

From: Hogan, Eileen (AHRQ/CQuIPS)
Sent: Tuesday, March 07, 2017 12:23 PM
To: 'Nadia.Stachowicz@Carefusion.com'
Cc: Hogan, Eileen (AHRQ/CQuIPS)
Subject: RE: Comments on The Re-engineered visit for Primary Care, Nadia Stachowicz, BS, RRT, Senior Product Manager of Clinical Applications; Vyaire Medical, AHRQ Response, March 2017

Dear Ms. Stachowicz,

Thank you for your time and effort to comment on the Federal Register notice on “The Re-engineered Visit for Primary Care (AHRQ REV)”. My colleague, Ms. Lefkowitz, shared your email with your insights on the project and the critical challenges in quality and safety concerning primary care and readmissions.

AHRQ seeks to improve the quality, safety, efficiency, and effectiveness of health care for all Americans through a broad program of health services research and related activities. The agency offers practical, research-based tools and resources to help a variety of health care organizations, providers, and consumers make care safer in all health care settings. AHRQ promotes health care quality improvement by conducting and supporting:

1. Research that develops and presents scientific evidence on all aspects of health care;
2. The synthesis and dissemination of available scientific evidence for use by patients, consumers, practitioners, providers, purchasers, policy makers, and educators; and
3. Initiatives to advance private and public efforts to improve health care quality.

To meet AHRQ's goals and objectives, the agency awarded a task order to John Snow, Inc. to conduct a combination of qualitative research and quality improvement techniques to investigate the primary care-based transitional care workflow from the primary care staff, patient, and community agency perspective. This 30-month project builds on the knowledge base from the inpatient settings, adds to the expanding evidence base on preventing readmissions by focusing on the primary care setting, and provides insight on the components and themes that should be part of a re-engineered visit in primary care that will ultimately inform an effective intervention that can be tested in a diverse set of primary care clinics.

We appreciate your commitment to improving safety and your support of AHRQ's effort to reduce primary care readmissions. Kind regards, Eileen

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