

Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB)

Statement submitted by: The Premier healthcare alliance

March 2, 2022

The Premier healthcare alliance appreciates the opportunity to submit a statement to the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB). Premier Inc. is a leading healthcare improvement company, uniting an alliance of more than 4,400 U.S. hospitals and health systems and approximately 225,000 non-acute providers, including 28,000 nursing homes across the country, to transform healthcare. With integrated data and analytics, collaboratives, supply chain solutions, and consulting and other services, Premier enables better care and outcomes at a lower cost.

COVID-19 has brought to the forefront the specific challenges nursing homes face in containing the spread of infectious disease. The virus has accelerated at nursing homes because residents are generally vulnerable to its complications and more susceptible in the contained space of the facilities. While data about infections in nursing homes is limited, [the CDC notes that](#), even prior to the pandemic, a staggering 1 to 3 million serious infections occur every year in these facilities and as many as 380,000 people die of the infections in nursing homes every year.

Infection prevention oversight and training at nursing homes is a challenge in and of itself with limited staffing and several layers of reporting requirements. This challenge is compounded by limited Electronic Health Record (EHR) functionality at the sites. Without a comprehensive infection prevention surveillance workflow, the surveillance, tracking, documenting and reporting of epidemiologically significant organisms and infection is difficult for everyday risks, such as multi-drug resistant organisms, but also when an outbreak like COVID-19 occurs.

Clinical analytics technologies are currently widely leveraged in hospitals and acute setting to detect patient care issues through surveillance, interventions and reporting capabilities that are needed to support antimicrobial stewardship programs. These systems utilize data from EHRs and have significantly helped clinicians and pharmacists in acute settings identify overuse of antibiotics and drug-bug mismatches, reduce time-to-appropriate therapy and enhance therapy for difficult-to-treat pathogens. Those health systems already utilizing clinical surveillance technology were well positioned to respond to COVID-19 before the pandemic hit.

Unfortunately, clinical analytics technologies are currently not widely used in nursing homes and other long-term and post-acute care (LTPAC) settings. These settings should have the same access to tools that will help them combat infection spread during any future outbreaks of COVID-19 and during their day-to-day operations, but unfortunately funding remains a significant barrier as all the programs authorized and funded under the Health Information Technology for Economic Clinical Health (HITECH) Act excluded LTPAC providers. These entities are already challenged with meeting their more visible needs, such as testing and securing adequate PPE levels at their sites, but a comprehensive approach is additionally needed to ensure data collection is efficient, non-duplicative and being analyzed in ways that are helpful for facilities. Furthermore, it is critical that lessons learned from meaningful use are applied forward as we develop cohesive solutions to address the lack of EHRs and clinical surveillance technology in LTPAC settings and create appropriate incentives for adoption.

Premier urges Congress and the Administration to designate funds to incentivize LTPAC providers to implement electronic clinical surveillance technology that will provide meaningful assistance with infection control.

If you have any questions regarding our comments or need more information, please contact Shara Siegel, Director of Government Affairs, at shara_siegel@premierinc.com or 646-484-0905.