
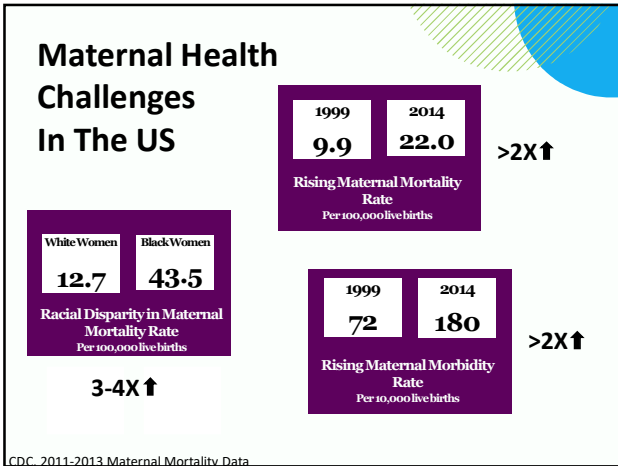


Jeanne Mahoney
AIM Senior Director

Elliott Main
AIM Implementation Director

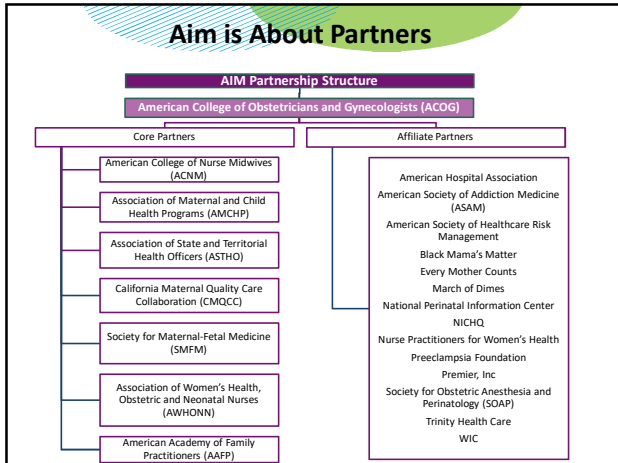
Deidre McDaniel
Program Manager, AIM

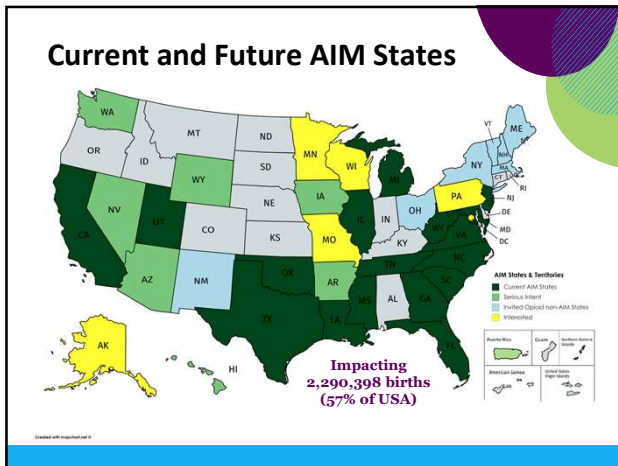





Accomplishments of AIM

- Created** a multidisciplinary and interagency collaboration among states, hospitals, and health systems
- Developed** harmonized, data-driven, continuous quality improvement processes
- Streamlined** bundle implementation utilizing evidence-based resources
- Provided** intensive technical assistance, education, and training across states, hospitals, and health systems





Project Scope: First 11 States

	Start Date	Hospitals Engaged	Total Births 2015	Bundles
Oklahoma	4/24/15	42	53,122	HEM; HTN
Florida	11/6/15	32	224,269	(HEM); HTN; CS-starting
Illinois	12/1/15	101	158,116	HTN
Michigan	12/1/15	84	113,312	HEM; HTN
NPIC	5/15/16	15		HEM; HTN; CS; VTE
Maryland	6/1/16	33	73,616	CS
Mississippi	11/18/16	45	38,934	HEM
California	1/20/17	202	491,748	(HEM); (HTN); CS
New Jersey	1/23/17		103,127	HEM
Utah	3/23/17		50,778	HTN
Louisiana	8/9/17		64,692	HEM
North Carolina	9/13/17		120,843	HEM
Trinity	10/5/17	32		CS
Premier	variable	28		HEM; HTN; CS; VTE

AIM Impact to Date

Initial "Class of 2015" (CA, FL, IL, MI, OK)

- 5 States
- 8.3 to 22.1% decrease in Severe Maternal Morbidity

California: Reduction of SMM from Hemorrhage

- In 126 Participating hospitals: -20.8%
- In 48 Control hospitals: -1.2%

Illinois: Treatment of Severe Hypertension

- In 126 Participating hospitals:
- Timely treatment (<60min) rose from 14% to 71%
- SMM among HTN patients fell from 15% to 9%

Questions?



Thank You!
