Hospital Measures for Public Reporting
SQRMS, 2010-11

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Outline

- Pediatric Measures
- CMS Measures
  - Inpatient
  - Outpatient
- Patient Experience (HCAHPS)
- AHRQ Measures
- Health Information Technology
Pediatric measures – all new

§Measures based on claims data:

– AHRQ Pediatric composite
  • in last year’s rule to be reported this year

– Pediatric Heart Surgery
  • Volume (AHRQ PDI-7)
  • Mortality (AHRQ PDI-6)

– Central venous catheter-related blood stream infections (AHRQ PDI-12)
Pediatric measures – medical record abstracted measures

§ Home management plan of care given to patient/caregiver for pediatric asthma
  – Joint Commission CAC-3
  – Reported on HospitalCompare

§ Late Sepsis or Meningitis in Neonates

§ Late sepsis or meningitis in very low birth weight neonates
  • Vermont Oxford Network measures
  • Both recommended by NQF for public reporting of infections
CMS Measures

§ Heart Attack

§ Heart Failure

§ Pneumonia

§ Surgical Care Improvement Project

§ Outpatient
CMS Heart Attack Measures

- Aspirin at arrival (AMI-1)
- Aspirin at discharge (AMI-2)
- ACEI or ARB for LVSD (AMI-3)
- Adult smoking cessation advice/counseling (AMI-4)
- Beta-blocker prescribed at discharge (AMI-5)
- Fibrinolytic therapy received within 30 minutes of hospital arrival (AMI-7a)
- Primary PCI received within 90 minutes of hospital arrival (AMI-8a)

**NEW 2011:** Appropriate Care Measure (percent of patients that met ALL heart attack process of care measures, if eligible)
§ Discharge instructions (HF-1)
§ Evaluation of LVS function (HF-2)
§ ACEI or ARB for LVSD (HF-3)
§ Adult smoking cessation advice/counseling (HF-4)

**NEW 2011:** Appropriate Care Measure (percent of patients that met ALL heart failure process of care measures, if eligible)
CMS Pneumonia

§ Pneumococcal vaccination (PN-2)
§ Blood cultures performed in the emergency department prior to initial antibiotic received in hospital (PN-3b)
§ Adult smoking cessation advice/counseling (PN-4)
§ Initial antibiotic received within 6 hours of hospital arrival (PN-5c)
§ Initial antibiotic selection for community-acquired pneumonia (CAP) in immunocompetent patients (PN-6)
§ Influenza vaccination (PN-7)

NEW 2011: Appropriate Care Measure (percent of patients that met ALL pneumonia process of care measures, if eligible)
CMS Surgical Care Improvement Project

§ Prophylactic antibiotic received within one hour prior to surgical incision (SCIP-Inf-1)

§ Prophylactic antibiotic selection for surgical patients (SCIP-Inf-2)

§ Prophylactic antibiotics discontinued within 24 hours after surgery end time (SCIP-Inf-3)

§ Cardiac surgery patients with controlled 6 a.m. postoperative blood glucose (SCIP-Inf-4)

§ Surgery patients with appropriate hair removal (SCIP-Inf-6)

§ Surgery patients on beta-blocker therapy prior to arrival who received a beta-blocker during the perioperative period (SCIP-Card-2)

§ Surgery patients with recommended venous thromboembolism prophylaxis ordered (SCIP-VTE-1)

§ Surgery patients who received appropriate venous thromboembolism prophylaxis within 24 hours prior to surgery to 24 hours after surgery (SCIP-VTE-2)

§ NOTE: SCIP-7 retired (post-op normothermia for colorectal surgery)
CMS Outpatient

§Rural-relevant

– Emergency Department Measures

• Median time to fibrinolysis (OP-1)

• Fibrinolytic therapy received within 30 minutes of emergency department arrival (OP-2)

• Median time to transfer to another facility for acute coronary intervention (OP-3)

• Aspirin at arrival (OP-4)

• Median time to ECG (OP-5)
§ Outpatient Surgery

– Timing of antibiotic prophylaxis (prophylactic antibiotic initiated within one hour prior to surgical incision) (OP-6)

– Prophylactic antibiotic selection for surgical patients (OP-7)

§ All outpatient measures were in last year’s rule – collection has started, display next year
Patient Experience

§HCAHPS

– Hospitals with 500 or more discharges per year
– In last year’s list, but required this year
AHRQ Measures

§ Inpatient Quality Indicators

– Abdominal Aortic Aneurysm – Volume & Mortality (IQI-4 & 11)
– Coronary Artery Bypass Graft – Volume & Mortality (IQI-5 & 12)
– Angioplasty – Volume & Mortality (IQI-6 & 30)
– Hip Fracture Mortality (IQI-19)

– Mortality for Selected Medical Conditions
  • “Composite” measure
§ Patient Safety Indicators

– Pressure ulcers (PSI-3)
– Deaths among surgical patients (PSI-4)
– Post-op pulmonary embolism or deep vein thrombosis (PSI-12)
– OB trauma with instrument (PSI-18)
– OB trauma without instrument (PSI-19)
– Patient safety composite
§Hospital survey from American Hospital Association
   – AHA contracting with Office of National Coordinator of HIT
   – Just released (missed state timelines)