Stratis Health

- Mission: To lead collaboration and innovation in health care quality and safety, and serve as a trusted expert in facilitating improvement for people and communities.
- Expertise in many areas of health care quality, including hospital measure development, data collection, public reporting, and improvement.
Objectives

• Review the process used for measurement recommendations
• Describe recommended measures and rationale for recommendations
2012 Hospital Measures
Recommendation Process
Recommendations Process

- Eight measures
- Rural sensitive
- AHRQ measures

1. MDH focus
2. Identify potential measures
3. Convene team
4. Team rate measures
5. Team discussion
6. Final slate of measures
Recommendations Process

- CMS
- AHRQ
- IHI
- MBQIP
- MN Stroke Registry
Recommendations Process

- MDH focus
- Identify potential measures
- Convene team
- Team rate measures
- Team discussion
- Final slate of measures

- Consumer
- Employer
- Health plan
- MD
- Nursing operations
- Rural
Recommendations Process

1. Team rated measure sets
   - Strongly Support
   - Support
   - Oppose
   - Strongly Oppose
   - I don’t know, with comment box

2. Team members chose their top eight measures
Recommendations Process

- Patient outcomes
- Incent systems thinking
- Rural relevant
  - Volume
  - ED/OB
  - Transfer pts who want treatment

Diagram:
- MDH focus
- Identify potential measures
- Convene team
- Team rate measures
- Team discussion
- Final slate of measures

StratisHealth
Recommendations Process

CMS
Two ED throughput measures
Two global immunization measures
AMI -10 Statin at discharge
PPS only: Three mortality measures

Other
ED Transfer communication
Two stroke process measures
2012 Hospital Measures Recommendations
ED Throughput Measures

Measures

• Median time from ED arrival to ED departure for admitted ED patients (ED-1)
• Median time from admit decision time to ED departure time for admitted patients (ED-2)
ED Throughput Measures

- CMS measures
- Collected through chart abstraction
- Required of all inpatient prospective payment system (IPPS) hospitals by CMS starting January 2012
- Would expand requirements to critical access hospitals (CAH) and children’s hospitals
Global Immunization Measures

Measures

• Pneumococcal immunization—overall rate (Prev-Imm-1a)

• Influenza immunization—overall rate (Prev-Imm-2a)
Global Immunization Measures

• CMS measures
• Collected through chart abstraction
• Required of all IPPS hospitals by CMS starting January 2012
• Would expand requirements to CAH and children’s hospitals
Acute Myocardial Infarction

Measure
Statin prescribed at discharge (AMI-10)
Acute Myocardial Infarction

• CMS measure
• Collected through chart abstraction
• Required of all IPPS hospitals by CMS starting January 2011
• Would expand requirements to CAH
Mortality Measures

Measures

- Acute myocardial infarction (AMI)
  30-day mortality rate (Mort-30-AMI)
- Heart Failure (HF)
  30-day mortality rate (Mort-30-HF)
- Pneumonia (PN)
  30-day mortality rate (Mort-30-PN)
Mortality Measures

- CMS measures
- Calculated and reported on Hospital Compare by CMS if measure for that hospital has 25 or more patients
- Committee recommended to include only for IPPS hospitals based on discussion of characteristic of patients admitted to vs transferred from CAH
ED Transfer Communication

Summary Measure

- Administrative communication (NQF 0291)
- Vital signs (NQF 0292)
- Medication information (NQF 0293)
- Patient information (NQF 0294)
- Physician information (NQF 0295)
- Nursing information (NQF 0296)
- Procedures and tests (NQF 0297)
ED Transfer Communication

- Developed by the U of M Rural Health Research Center in partnership with Stratis Health
- Collected through chart abstraction
- Included in the Medicare Beneficiary Quality Improvement Project
- This would be new requirement for all hospitals
Stroke Measures

Measures

• NIH stroke scale performed in initial evaluation
• Door to imaging performed time
Stroke Measures

• MN Stroke Registry rural sensitive pilot measure
• Collected through chart abstraction
• Not NQF endorsed, but supports Minnesota’s leadership in developing rural sensitive measures
Retired Measures

- Aspirin at arrival (AMI-1)
- ACEI/ARB for left ventricular systolic dysfunction (AMI-3)
- Adult smoking cessation advice/counseling (AMI-4, HF-4, PN-4)
- Beta-blocker prescribed at discharge (AMI-5)
- Appropriate hair removal (SCIP INF-6)
- Timing of receipt of initial antibiotic following hospital arrival (PN-5c)
Additional Resources

- Specifications Manual for National Hospital Inpatient Quality Measures
  www.qualitynet.org

- National Quality Forum
  www.qualityforum.org
Questions?

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Stratis Health is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.