

# April 2019 Release

Preview Period: February **8** through March **9**, 2019

## Inpatient *Hospital Compare* Preview Quick Reference Guide

### Preview User Interface (UI) Access

#### Preview Period

Preview data will be available to participating inpatient facilities via the *QualityNet Secure Portal* from **February 8 through March 9, 2019**.

#### Access Preview Data

1. Navigate to the *QualityNet* website at <https://www.qualitynet.org>.
2. Select **Login** under the *Log in to QualityNet Secure Portal* header.
3. From the **Choose Your QualityNet Destination** dashboard, select **HQR Next Generation**.
4. Enter your *QualityNet* User ID, Password, and Security Code. Then, select **Submit**.
5. Read the Terms and Conditions statement and select **I Accept** to proceed.
6. A card layout is displayed on the landing page. Select **Public Reporting (PR)**.
7. The page will refresh, and the data will be available to preview.

### Preview Content

#### Overall Hospital Quality Star Rating

Please see the help guide for more information.

#### Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Measures

Results reflect 3Q 2017–2Q 2018 discharges.

- HCAHPS scores based on fewer than 25 completed surveys will display on the Preview with Footnote 1; however, the scores will not be reported on *Hospital Compare*.

#### Timely and Effective Care Measures

- Immunization (IMM)-2 displays 2017–2018 flu season data (4Q 2017–1Q 2018 discharges).
- Healthcare Personnel (HCP) Influenza Vaccination display 2017–2018 flu season data (4Q 2017–1Q 2018).
- SEP-1, VTE-6, and PC-01 measure results include 3Q 2017–2Q 2018.
- Emergency Department rates include 3Q 2017–2Q 2018 discharges unless otherwise specified.
  - The Emergency Department Volume (EDV) measure is based on the denominator used for the Hospital Outpatient Quality Reporting Program measure OP-22 for calendar year (CY) 2017 data.
  - ED-1b and ED-2b display the state and national average minutes based on EDV category.

#### Structural Measures

- Safe Surgery Checklist Use (SM-5) and Hospital Survey on Patient Safety Culture (SM-6) are based on hospital data for CY 2017.

#### Complication and Deaths

- 30-Day Death Rate measure results reflect 3Q 2014–2Q 2017.
- CMS Patient Safety Indicators (PSI) rates include 4Q 2015–2Q 2017 discharges. CMS PSI 4 and CMS PSI 90 will display on *Hospital Compare*. Individual components of CMS PSI 90 are available in a downloadable database.
- Healthcare-associated Infection (HAI) measure rates reflect 3Q 2017–2Q 2018 data.
- Surgical complication rates reflect 2Q 2014–1Q 2017 discharges.

#### Unplanned Hospital Visits

- Condition-specific readmission rates reflect 3Q 2014–2Q 2017 discharges.
- Procedure-specific readmission rates reflect 3Q 2014–2Q 2017 discharges.
- Hospital-wide readmission rates reflect 3Q 2016–2Q 2017 discharges.
- Excess Days in Acute Care (EDAC) measure results reflect 3Q 2014–2Q 2017 discharge data.

#### Payment and Value of Care

- Payment measures
  - Acute Myocardial Infarction (AMI), Heart Failure (HF), and Pneumonia payment measure results reflect 3Q 2014–2Q 2017 discharges.
  - 90-day hip/knee payment measure results reflect 2Q 2014–1Q 2017 discharges.
- Medicare Spending per Beneficiary (MSPB)
  - The performance scores display for 1Q 2017–4Q 2017 discharges.
- Clinical Episode-based Payment (CEBP) measure results reflect 1Q 2017–4Q 2017 discharges.
  - The CEBP measures will be available on *Hospital Compare* in a downloadable database.