

## Overview of the Hospital Value-Based Purchasing (VBP) Fiscal Year (FY) 2017

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## Submitting Questions

Type questions in the "Chat with Presenter" section, located in the bottom-left corner of your screen.



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## Hospital Value-Based Purchasing (VBP) Program

### Claims-Based Measures

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Hospital Reporting  
Reports and Analytics Contractor

April 21, 2015

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## Purpose

The purpose of today's webinar is to provide an overview of the AHRQ PSI-90 Composite and Mortality Measures Hospital Specific Report (HSR); including how to receive your HSR, how to comprehend the calculations of the AHRQ PSI-90 and Mortality Measure, how to read the HSR and identify the process of submitting a Review and Corrections Request.

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## Objectives

Participants will be able to:

- Identify how to receive your Agency for Healthcare Research and Quality (AHRQ) PSI-90 Composite and Mortality Measures Hospital Specific Report (HSR)
- Comprehend the calculations of the AHRQ PSI-90 and Mortality Measures
- Understand how to read the HSR
- Identify the process of submitting a Review and Correction Request

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## How to Receive Your HSR

### How do you know your HSR is available?

- A QualityNet Notification was sent via email to those who are registered for the notifications regarding the Hospital Inpatient Quality Reporting Program. The notification indicated the reports are available.

### Who has access to your HSR?

- Hospital users with the Hospital Reporting Feedback-Inpatient role and the File Exchange and Search role will have access to the HSRs and User Guide.

### How can you access your HSR?

- For those with the correct access the HSRs and User Guide will be in their My QualityNet Secure File Transfer Inbox.

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# HOSPITAL VBP AHRQ HSR

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## Table 1: Hospital Results

Measure	Performance Period Index Value [a]	Achievement Threshold [b]	Benchmark [c]
PSI-90 Composite	0.561944	0.616248	0.449968

[a] Performance Period Index Value = a weighted average of 8 individual Patient Safety Indicators (PSIs)  
 The PSI-90 Composite should be interpreted by way of comparison, with lower PSI-90 Composite values corresponding to better quality. The target population is Medicare Fee-for-Service beneficiaries discharged from an Inpatient Prospective Payment System (IPPS) hospital.  
 [b] Achievement Threshold = the median index value among all hospitals with measure results and minimum valid discharges during the FY 2016 baseline period (October 15, 2010 - June 30, 2011).  
 [c] Benchmark = the mean of the best performing decile of index values among all hospitals with measure results and minimum valid discharges during the FY 2016 baseline period (October 15, 2010 - June 30, 2011).

Notes:  
 1. This table is based on discharges from October 15, 2012 through June 30, 2014. Minimum case requirement of at least 3 valid discharges on any one underlying indicator.  
 2. N/A = Not available for calculation because there were not enough cases at the hospital to calculate rates for this measure. In order to receive an AHRQ PSI-90 Composite Index Value, a hospital must meet the minimum case requirement of at least 3 valid discharges on any one underlying indicator.

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## Table 2: AHRQ PSI Performance

Performance Information	PSI 90 Composite [a]	PSI 91 - Patient Safety for Selected Indicators	PSI 92 - Pressure Ulcer Rate	PSI 93 - Intensive Care Unit Mortality Rate	PSI 94 - Central Venous Catheter Related Bloodstream Infection Rate	PSI 95 - Urinary Catheter Associated Infection Rate	PSI 96 - Ventilator-Associated Pneumonia Rate	PSI 97 - Surgical Site Infection Rate	PSI 98 - Hospital-Acquired Sepsis Rate	PSI 99 - Hospital-Acquired Pneumonia or Laceration Rate
Total Number of Eligible Discharges (Denominator) [a]	2,783	2,783	2,783	2,783	2,783	2,783	2,783	2,783	2,783	2,783
Unadjusted Rate per 1,000 Eligible Discharges [a]	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56
Adjusted Rate per 1,000 Eligible Discharges [a]	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56	0.56

Notes:  
 1. The Total Number of Eligible Discharges and Unadjusted Rate per 1,000 Eligible Discharges do not apply to the PSI 90 composite measure.  
 2. The PSI 90 composite is calculated from PSI 91, 92, 93, 94, 95, 96, 97, 98, and 99.  
 3. These statistics are not shown on your hospital's Percentage Payment Summary Report, but we include them here for your reference.

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**Table 3: AHRQ PSI Discharges**

ID Number	Measure	MSW	Medical Record Number	Accounting Date	Admission Date	Discharge Date	PSI Trigger Discharges	PSI	PSI90
1	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
2	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
3	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
4	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
5	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
6	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
7	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
8	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
9	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
10	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
11	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
12	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
13	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
14	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
15	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
16	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
17	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
18	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
19	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00
20	PROPHYLACTIC ANTIBIOTIC THERAPY	000000	000000	00/00/00	00/00/00	00/00/00	100	0.00	0.00

The ID Number is provided for use if you need to reference records in this table in an email or otherwise, so that you can avoid sharing personally identifiable information (PII) or personal health information (PHI).

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## Understanding the AHRQ Calculations Through Replication

The replication process for the AHRQ PSI-90 Composite includes calculation of the:

- Observed Rate per 1,000 Eligible Discharges
- Risk-Adjusted Rate per 1,000 Eligible Discharges
- Smoothed Rate per 1,000 Eligible Discharges
- PSI-90 Composite

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## Calculate the Observed Rate per 1,000 Eligible Discharges

	A	B	C	D
1	Table 2. Additional Information for Replicating Your Hospital's AHRQ PSI-90 Composite Index Value for the FY			
2	HOSPITAL NAME			
3	October 15, 2012 through June 30, 2014			
4				
5	<b>Performance Information</b>			
6	Total Number of Eligible Discharges (Denominator)	PSI 90 Composite [B] - Patient Safety for Selected Indicators	PSI 03 - Pressure Ulcer Rate	PSI 06 - Iatrogenic Pneumothorax Rate
7	3,813	-	0.01	0.21
8	Smoothed Rate per 1,000 Eligible Discharges [A] [C]	National Risk-Adjusted Rate per 1,000 Eligible Discharges [C]	0.08	0.24
9	0.951844	-	0.1357	0.0914
10	Measure's Weight in Composite [C]	-	0	0.22
11	Number of Outcomes (Numerator) [C]	-	0.00	0.19
12	Observed Rate per 1,000 Eligible Discharges [C]	-	7.72	0.50
13	Risk-Adjusted Rate per 1,000 Eligible Discharges [C]	-	0.92	0.57
14	Relative Weight [C]	-	0.000224115	0.224114747
15	Observed rate calculations	-		
16	Divide Number of Outcomes by Eligible Discharges =D11/D6	-		
17	Multiply by 1000 =D18*1000	-		
18		-		
19		-		
20		-		

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## Calculate the Risk-Adjusted Rate per 1,000 Eligible Discharges

	A	B	C	D
1	Table 2. Additional Information for Replicating Your Hospital's AHRG PSI-90 Composite Index Value for the FY 2			
2	HOSPITAL NAME			
3	October 15, 2012 through June 30, 2014			
4				
5	<b>Performance Information</b>			
6	Total Number of Eligible Discharges (Denominator) of Your Hospital [a] [c]	PSI 90 Composite [b] - Patient Safety for Selected Indicators	PSI 03 - Pressure Ulcer Rate	PSI 06 - Iatrogenic Pneumothorax Rate
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	3.613	8.924
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.01	0.21
9	Composite Index Value [a]	0.561944	0.08	0.24
10	Measure's Weight in Composite [a]	-	0.1357	0.0614
11	Number of Outcomes (Numerator) [a]	-	0	2
12	Observed Rate per 1,000 Eligible Discharges [c]	-	0.00	0.22
13	Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.00	0.19
14	Expected Rate per 1,000 Eligible Discharges [c]	-	7.72	0.50
15	Reliability Weight [c]	-	0.92	0.57
16				
17		Observed Rate +D18*1000	0.22414747	
18		HCUF National Rate from the User Guide	0.000477086	
19				
20		<b>Risk-Adjusted Rate calculations</b>		
21		divide the observed rate by the expected rate =+D18/D14	0.444242723	
22		multiply by the HCUF National rate =+D21*CO0	0.000195287	
23		multiply by 1,000 =+D24*1000	0.195287397	
24				
25				
26				
27				

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## Calculate the Smoothed Rate per 1,000 Eligible Discharges

	A	B	C	D
1	Table 2. Additional Information for Replicating Your Hospital's AHRG PSI-90 Composite Index Value for the FY 2			
2	HOSPITAL NAME			
3	October 15, 2012 through June 30, 2014			
4				
5	<b>Performance Information</b>			
6	Total Number of Eligible Discharges (Denominator) of Your Hospital [a] [c]	PSI 90 Composite [b] - Patient Safety for Selected Indicators	PSI 03 - Pressure Ulcer Rate	PSI 06 - Iatrogenic Pneumothorax Rate
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	3.613	8.924
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.01	0.21
9	Composite Index Value [a]	0.561944	0.08	0.24
10	Measure's Weight in Composite [a]	-	0.1357	0.0614
11	Number of Outcomes (Numerator) [a]	-	0	2
12	Observed Rate per 1,000 Eligible Discharges [c]	-	0.00	0.22
13	Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.00	0.19
14	Expected Rate per 1,000 Eligible Discharges [c]	-	7.72	0.50
15	Reliability Weight [c]	-	0.92	0.57
16				
17		Risk-Adjusted Rate =+D24*1000	0.195287397	
18				
19		<b>Smoothed rate calculations</b>		
20		multiply risk-adjusted rate by the reliability rate =+D25*D15	0.105100936	
21		multiply national risk-adjusted rate by one minus the reliability rate =+D6*(1-D15)	0.105117583	
22		add these two values =+D28+D29	0.210227519	
23				
24				
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## Calculate the PSI 90 Composite

	A	B	C	D	E	F	G	H	I	J	
1	Table 2. Additional Information for Replicating Your Hospital's AHRG PSI-90 Composite Index Value for the FY 2014 (QIP Performance Period)										
2	HOSPITAL NAME										
3	October 15, 2012 through June 30, 2014										
4											
5	<b>Performance Information</b>										
6	Total Number of Eligible Discharges (Denominator) of Your Hospital [a] [c]	PSI 90 Composite [b] - Patient Safety for Selected Indicators	PSI 03 - Pressure Ulcer Rate	PSI 06 - Iatrogenic Pneumothorax Rate	PSI 07 - Central Venous Catheter-Related Bloodstream Infection Rate	PSI 08 - Postoperative Wound Infection Rate	PSI 09 - Postoperative Urinary Tract Infection Rate	PSI 10 - Postoperative Stroke/Stroke-Like Event Rate	PSI 11 - Postoperative Acute Kidney Injury Rate	PSI 14 - Postoperative Blood Transfusion Rate	PSI 15 - Accidental Pacemaker or Implantable Cardioverter-Defibrillator Rate
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	3.613	8.924	2.901	1.549	2.321	3.921	3.191	2.28	0.501
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.01	0.21	0.37	0.05	0.37	0.51	0.51	0.00	1.97
9	Discharges [c]	-	0.08	0.26	0.07	0.05	0.32	0.19	0.77	1.97	0.49
10	Composite Index Value [a]	0.561944	0.08	0.24	0.09	0.09	0.29	0.08	0.09	0.09	0.04
11	Measure's Weight in Composite [a]	-	0	2	4	6	2	3	3	0	16
12	Number of Outcomes (Numerator) [a]	-	0	2	8	6	2	3	3	0	16
13	Observed Rate per 1,000 Eligible Discharges [c]	-	0.00	0.22	0.07	0.09	0.33	0.09	0.09	0.00	1.98
14	Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.00	0.19	0.05	0.00	0.34	0.09	0.00	0.00	2.00
15	Expected Rate per 1,000 Eligible Discharges [c]	-	7.72	0.50	0.60	0.03	0.50	0.50	0.50	0.00	2.00
16	Reliability Weight [c]	-	0.92	0.57	0.92	0.92	0.78	0.92	0.88	0.81	0.81
17											
18		HCUF National Rate from the User Guide	0.000347370	0.000477086	0.000220716	0.00012449	0.000444011	0.000720301	0.001080071	0.000200403	0.000200403
19			0.00071405	0.00202719	0.000442014	0.00011258	0.000401189	0.000600888	0.000400011	0.000000011	0.000000011
20											
21		<b>Calculate PSI 90 composite</b>									
22		divide the observed rate by the expected rate =+D18/D14	0.000000001	0.000000002	0.000000004	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001
23		divide the HCUF national rate =+D20/D22	0.000000001	0.000000002	0.000000004	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001
24		divide the composite weight =+D21/D16	0.000000001	0.000000002	0.000000004	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001
25		sum and multiply 6 decimal places =+D23/D25 (25)	0.000000001	0.000000002	0.000000004	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001	0.000000001
26											
27											
28											
29											
30											
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## AHRQ Differences Across Programs

Differences in IQR and HVBP results are due to the following:

- Data period used for calculation -
  - IQR - July 1, 2012 through June 30, 2014
  - HVBP - October 15, 2012 through June 30, 2014
- Diagnosis and procedure codes
  - FY16 HVBP uses nine diagnoses and six procedure codes in order to be consistent with the HVBP baseline period
  - 2015 IQR uses 25.
- Software versions
  - FY16 HVBP uses version 4.4 of the AHRQ software in order to be consistent with the HVBP baseline period
  - 2015 IQR uses 4.5a.

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## HOSPITAL VBP MORTALITY HSR

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### Table 1: Hospital Results

Measure (a)	Number of Eligible Discharges (b)	Performance Period Survival Rate (c)	Achievement Threshold (d)	Benchmark (e)
AMI 30-Day Mortality	12	0.862530	0.847472	0.862371
HF 30-Day Mortality	64	0.894182	0.881510	0.900315
Pneumonia 30-Day Mortality	97	0.877983	0.882051	0.904181

[a] AMI = acute myocardial infarction; HF = heart failure  
 [b] Final number of discharges from your hospital used for measure calculation. Results for hospitals with fewer than 25 eligible discharges will not be used to calculate the score for that measure for the FY 2015 Hospital Value-Based Purchasing Performance period; your results are presented here for your information.  
 [c] FY16 Performance Period Survival Rate = 1 - Risk Standardized Mortality Rate (RSMR). See Table 2 for RSMR information.  
 [d] Achievement Threshold = the median survival rate among all hospitals with measure results and minimum case size (n=25) during the FY16 baseline period (October 1, 2010 - June 30, 2011).  
 [e] Benchmark = the mean of the top decile of survival rates among all hospitals with measure results and minimum case size (n=25) during the FY16 baseline period (October 1, 2010 - June 30, 2011).

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## Table 2: Additional Information

Measure [d]	Number of Eligible Discharges [d]	Predicted Deaths [d]	Expected Deaths [d]	National Observed Mortality Rate [e]	Risk-Standardized Mortality Rate [f]	Performance Period Survival Rate [g]
AMI 30-Day Mortality	12	2.02	2.02	0.137543	0.134710	0.92530
HF 30-Day Mortality	64	7.13	6.03	0.114749	0.139119	0.94182
Pneumonia 30-Day Mortality	97	9.25	8.45	0.111791	0.122317	0.877083

[d] Final number of discharges from your hospital used for measure calculation.  
 [e] The number of predicted deaths within 30 days from admission, on the basis of your hospital's performance with its observed case mix and your hospital's estimated effect on mortality (provided in your hospital discharge-level data).  
 [f] The number of expected deaths within 30 days from admission, on the basis of average hospital performance with your hospital's case mix and the average hospital effect (provided in your hospital discharge-level data).  
 [g] National Observed Mortality Rate = (Number of observed 30-day deaths nationally / Number of eligible discharges nationally).  
 [h] Risk-Standardized Mortality Rate (RSMR) = (Predicted Deaths / Expected Deaths) \* National Observed Mortality Rate.  
 [i] Performance Period Survival Rate = (1 - Risk-Standardized Mortality Rate).

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## Tables 3, 4, and 5: Discharges

ID Number	HICNO	Medical Record Number	Beneficiary DOB	Admit Date of Index Stay	Discharge Date of Index Stay	Primary Diagnosis	Discharge Destination	Index Stay	Inclusion/Exclusion Indicator
1	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41061	20	YES	0
2	999999999A	99999A	99/99/9999	99/99/9999	41071	3	YES	0	

- The discharge tables contain discharge-level data for all Part A Medicare Fee-for-Service (FFS) patient stays with a primary qualifying diagnosis of Acute Myocardial Infarction (AMI), Heart Failure (HF), or Pneumonia accordingly, that had a discharge date in the reporting period, for patients who were age 65 and older at the time of admission.
- The ID Number is provided for use if needed to reference records in this table in an email or otherwise, so that sharing of PHI or PII is avoided.

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## Tables 3, 4, and 5: Discharges

Index Stay	Inclusion/Exclusion Indicator	Death within 30 Days	Death Date	EMALE	delxPTCA	dmvCABG	LiverDis	Age_65	HOSP_EFFECT	AWG_EFFECT
9	YES	0	YES	999999999	1	0	0	0	21	-
10	YES	0	YES	999999999	1	0	0	0	25	-
11	YES	0	NO	-	1	0	0	0	13	-
12	YES	0	NO	-	1	0	0	0	32	-
13	YES	0	NO	-	0	0	0	0	34	-
14	YES	0	NO	-	0	0	0	0	34	-
15	YES	0	NO	-	1	0	1	0	5	-
16	YES	0	NO	-	0	0	0	0	25	-
17	YES	0	NO	-	1	0	0	0	25	-
18	YES	0	NO	-	0	0	0	0	26	-
19	YES	0	NO	-	1	0	0	0	43	-
20	YES	0	NO	-	1	0	0	0	43	-
21	NO	1	NO	-	-	-	-	-	-	-
22	NO	2	NO	-	-	-	-	-	-	-
23	NO	7	NO	-	-	-	-	-	-	-

Row 8 in the HSR contains the model coefficients for each risk factor. These are estimates over data for all hospitals.

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# Understanding the AHRQ Calculations Through Mortality

The replication process for the Mortality Measures includes calculation of the:

- Predicted Deaths
- Expected Deaths
- Risk-Standardized Mortality Rate
- Performance Period Survival Rate

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## Calculate Predicted Deaths: Step 1

ID Number	HICCN0	Medical Record Number	Beneficiary DOB	Admit Date of Index Stay	Discharge Date of Index Stay	Primary Diagnosis	Discharge Disposition	Index Stay	Inclusion/Exclusion Indicator	Death within 30 Days
1	000000000A	00000A	00000000	00000000	00000000	41001	99	YES	1	NO
2	000000000A	00000A	00000000	00000000	00000000	41001	99	YES	1	NO
3	000000000A	00000A	00000000	00000000	00000000	41001	10	YES	1	NO
4	000000000A	00000A	00000000	00000000	00000000	41001	10	YES	1	NO
5	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
6	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
7	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
8	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
9	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
10	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
11	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
12	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
13	000000000A	00000A	00000000	00000000	00000000	41001	2	YES	2	NO
14	000000000A	00000A	00000000	00000000	00000000	41001	2	NO	2	NO
15	000000000A	00000A	00000000	00000000	00000000	41001	2	NO	2	NO

Limit your Replication calculations to rows where "INDEX STAY" (column I) equals "YES." In this example, "INDEX STAY" is represented by discharges in rows 9–20.

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## Calculate Predicted Deaths: Step 2

Index Stay	Inclusion/Exclusion Indicator	Death within 30 Days	DRG	MSL	AutoPCA	AutoCARE	AMI_ser	AMI_ser	MS_Care	MS_Care	Inclgn	Exclgn	Rng/Std	ValidDt	HTM
1	1	0	99	0	0	0	0	0	0	0	0	0	0	0	0
2	1	0	99	0	0	0	0	0	0	0	0	0	0	0	0
3	1	0	10	0	0	0	0	0	0	0	0	0	0	0	0
4	1	0	10	0	0	0	0	0	0	0	0	0	0	0	0
5	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
6	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
7	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
8	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
9	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
10	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
11	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
12	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
13	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
14	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0
15	1	1	2	0	0	0	0	0	0	0	0	0	0	0	0
16	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
17	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
18	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
19	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0
20	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0

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## Calculate Predicted Deaths: Step 3

Age	Female	Male	Trans	Phys	Uro	Age	HOSP_EFFECT	ADD_EFFECT
25	0	0	0	0	0	1	1.980176	
26	0	0	0	0	0	1	1.980176	
27	0	0	0	0	0	1	1.980176	
28	0	0	0	0	0	1	1.980176	
29	0	0	0	0	0	1	1.980176	
30	0	0	0	0	0	1	1.980176	
31	0	0	0	0	0	1	1.980176	
32	0	0	0	0	0	1	1.980176	
33	0	0	0	0	0	1	1.980176	
34	0	0	0	0	0	1	1.980176	
35	0	0	0	0	0	1	1.980176	
36	0	0	0	0	0	1	1.980176	
37	0	0	0	0	0	1	1.980176	
38	0	0	0	0	0	1	1.980176	
39	0	0	0	0	0	1	1.980176	
40	0	0	0	0	0	1	1.980176	
41	0	0	0	0	0	1	1.980176	
42	0	0	0	0	0	1	1.980176	
43	0	0	0	0	0	1	1.980176	

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## Calculate Predicted Deaths: Step 4

Age	Female	Male	Trans	Phys	Uro	Age	HOSP_EFFECT	ADD_EFFECT
25	0	0	0	0	0	1	1.980176	
26	0	0	0	0	0	1	1.980176	
27	0	0	0	0	0	1	1.980176	
28	0	0	0	0	0	1	1.980176	
29	0	0	0	0	0	1	1.980176	
30	0	0	0	0	0	1	1.980176	
31	0	0	0	0	0	1	1.980176	
32	0	0	0	0	0	1	1.980176	
33	0	0	0	0	0	1	1.980176	
34	0	0	0	0	0	1	1.980176	
35	0	0	0	0	0	1	1.980176	
36	0	0	0	0	0	1	1.980176	
37	0	0	0	0	0	1	1.980176	
38	0	0	0	0	0	1	1.980176	
39	0	0	0	0	0	1	1.980176	
40	0	0	0	0	0	1	1.980176	
41	0	0	0	0	0	1	1.980176	
42	0	0	0	0	0	1	1.980176	
43	0	0	0	0	0	1	1.980176	

Predicted probability for each discharge = (1/(1+exp(-1 \* Add HOSP\_EFFECT results)))

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## Calculate Predicted Deaths: Step 5

Age	AO	AP	AQ	AR	AS
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
41					
42					
43					

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## Calculate Expected Deaths

PhysChg	LineChg	Age_Rs	HOSP_EFFECT	AVG_EFFECT
1	1	1	0.000000	-0.200000
1	2	1	0.000000	-0.200000
1	3	1	0.000000	-0.200000
1	4	1	0.000000	-0.200000
1	5	1	0.000000	-0.200000
1	6	1	0.000000	-0.200000
1	7	1	0.000000	-0.200000
1	8	1	0.000000	-0.200000
1	9	1	0.000000	-0.200000
1	10	1	0.000000	-0.200000
1	11	1	0.000000	-0.200000
1	12	1	0.000000	-0.200000
1	13	1	0.000000	-0.200000
1	14	1	0.000000	-0.200000
1	15	1	0.000000	-0.200000
1	16	1	0.000000	-0.200000
1	17	1	0.000000	-0.200000
1	18	1	0.000000	-0.200000
1	19	1	0.000000	-0.200000
1	20	1	0.000000	-0.200000
1	21	1	0.000000	-0.200000
1	22	1	0.000000	-0.200000
1	23	1	0.000000	-0.200000
1	24	1	0.000000	-0.200000
1	25	1	0.000000	-0.200000
1	26	1	0.000000	-0.200000
1	27	1	0.000000	-0.200000
1	28	1	0.000000	-0.200000
1	29	1	0.000000	-0.200000
1	30	1	0.000000	-0.200000
1	31	1	0.000000	-0.200000
1	32	1	0.000000	-0.200000
1	33	1	0.000000	-0.200000
1	34	1	0.000000	-0.200000
1	35	1	0.000000	-0.200000
1	36	1	0.000000	-0.200000
1	37	1	0.000000	-0.200000
1	38	1	0.000000	-0.200000
1	39	1	0.000000	-0.200000
1	40	1	0.000000	-0.200000
1	41	1	0.000000	-0.200000
1	42	1	0.000000	-0.200000
1	43	1	0.000000	-0.200000
1	44	1	0.000000	-0.200000
1	45	1	0.000000	-0.200000
1	46	1	0.000000	-0.200000
1	47	1	0.000000	-0.200000
1	48	1	0.000000	-0.200000
1	49	1	0.000000	-0.200000
1	50	1	0.000000	-0.200000

Expected probability for each discharge = 1/(1+exp(-1 \* Add AVG\_EFFECT results))

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## Calculate Expected Deaths

AP	AQ	AR	AS	AT	AU	AV	AW
sum	HOSP_EFFECT	Predicted probability	AVG_EFFECT	Expected probability			
1.656848519	-1.115527354	0.240555990	-1.115541573	0.240783443			
1.944263676	-0.839112206	0.301721797	-0.838426416	0.301666303			
1.632522776	-1.150853107	0.240333294	-1.150167316	0.240458523			
0.323663007	-2.459712875	0.078731161	-2.459027084	0.078780917			
2.385755065	-0.397619918	0.401884338	-0.396924027	0.402049195			
0.595957936	-2.187417946	0.100886065	-2.186732156	0.100948289			
0.307800863	-2.475575020	0.077588299	-2.474889229	0.077637394			
1.096523206	-1.689852676	0.156190192	-1.688166885	0.156280597			
0.821470089	-1.961906794	0.123200945	-1.961220003	0.123335076			
0.891655936	-1.891719947	0.131048487	-1.891034156	0.131126601			
0.219052773	-2.564231110	0.071470119	-2.563637319	0.071515643			
0.466388612	-2.316987270	0.089725820	-2.316301480	0.089781848			
		Predicted Deaths		Expected Deaths			
		=SUM(AR26:AR37)	2.019496508	2.020563831	=SUM(AU26:AU37)		

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## Calculate the Risk-Standardized Mortality Rate

AP	AQ	AR	AS	AT	AU	AV	AW	AX	AY
sum	HOSP_EFFECT	Predicted probability	AVG_EFFECT	Expected probability					
1.656848519	-1.115527354	0.240555990	-1.115541573	0.240783443					
1.944263676	-0.839112206	0.301721797	-0.838426416	0.301666303					
1.632522776	-1.150853107	0.240333294	-1.150167316	0.240458523					
0.323663007	-2.459712875	0.078731161	-2.459027084	0.078780917					
2.385755065	-0.397619918	0.401884338	-0.396924027	0.402049195					
0.595957936	-2.187417946	0.100886065	-2.186732156	0.100948289					
0.307800863	-2.475575020	0.077588299	-2.474889229	0.077637394					
1.096523206	-1.689852676	0.156190192	-1.688166885	0.156280597					
0.821470089	-1.961906794	0.123200945	-1.961220003	0.123335076					
0.891655936	-1.891719947	0.131048487	-1.891034156	0.131126601					
0.219052773	-2.564231110	0.071470119	-2.563637319	0.071515643					
0.466388612	-2.316987270	0.089725820	-2.316301480	0.089781848					
		Predicted Deaths		Expected Deaths					
		2.019496508		2.020563831					
		=AR40(AJ40)	0.999472	Standardized Mortality Ratio (SMR)					
		=AT43(AT44)	0.137543	National Observed Mortality Rate from table 2					
			0.137470	Risk Standardized Mortality Rate (RSMR)					

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## Calculate the Performance Period Survival Rate

	AP	AQ	AR	AS	AT	AU	AV	AW	AX	A
25	sum	HO SP_EFFECT	Predicted probability		AVG_EFFECT	Expected probability				
26	1.66648519	-1.116527354	0.246655990		-1.116541573	0.246783443				
27	1.944263676	-0.839112206	0.301721797		-0.838425416	0.301866303				
28	1.632522776	-1.150853107	0.240332094		-1.150187316	0.240458523				
29	0.323663007	-2.459712876	0.078731911		-2.459027084	0.078768917				
30	2.385756095	-0.397618918	0.401884338		-0.396934027	0.402049195				
31	0.598967936	-2.187417946	0.100886995		-2.186732156	0.100948289				
32	0.307800863	-2.475576620	0.077588299		-2.474889929	0.077537394				
33	1.096523206	-1.896852676	0.155190192		-1.896166885	0.155280597				
34	0.821470089	-1.981905794	0.123260945		-1.981220003	0.123335076				
35	0.891655936	-1.891719947	0.131648487		-1.891034156	0.131728501				
36	0.219052773	-2.564323110	0.071470119		-2.563637319	0.071515643				
37	0.466388612	-2.316987270	0.089725820		-2.316301480	0.089781848				
38										
39			Predicted Deaths			Expected Deaths				
40			2.019495508			2.020563831				
41										
42										
43				=AR40/AU40	0.999472	Standardized Mortality Ratio (SMR)				
44					0.137543	National Observed Mortality Rate from table 2				
45				=AT43/AT44	0.137470	Risk Standardized Mortality Rate (RSMR)				
46										
47				=1-AT45	0.862530	Performance Period Survival Rate				
48										
49										

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## HVBP HSR User Guide

The FY16\_HVBP\_HSR\_UserGuide.pdf accompanies your HSRs and contains additional information about the HSRs, including examples for the AHRQ and Mortality replication process.

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## REVIEW AND CORRECTION PROCESS

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## Review and Corrections Period Timeline

- The notification that was sent to indicate the reports were available also contained the timeline of the Review and Corrections period.
- Pay special attention to the deadline.
  - Review and Correction requests sent after the deadline will not be considered.
- The Review and Correction period for FY 2016 is **April 10–May 11, 2015**.

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## Submission of a Review and Corrections Request

Requests can be submitted via:

- Email to [gnetsupport@hcqis.org](mailto:gnetsupport@hcqis.org)
  - Include “Hospital VBP” in the subject line
- Phone at 866.288.8912
- Teletypewriter (TTY) at 877.715.6222

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## Review and Corrections Process Inclusions and Exclusions

- Eligible for Review:
  - Suspected calculation errors on your report **can be** submitted for consideration.
- Ineligible for Review:
  - Requests for submission of new or corrected claims to the underlying data **are not** allowed.

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## Resources

- HVBP Overview
  - <https://www.qualitynet.org/dcs/ContentServer?cid=1228773024772&pagename=QnetPublic%2FPaper%2FQnetTier4&c=Page>
- AHRQ Resources
  - QualityNet: <http://www.qualitynet.org> > Hospitals – Inpatient > Claims-Based Measures > Agency for Healthcare Research and Quality (AHRQ) Indicators > Resources
    - <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPager%2FQnetTier4&cid=1228695355425>
  - Quality Indicators Support
    - [QISupport@ahrq.hhs.gov](mailto:QISupport@ahrq.hhs.gov)
  - PSI Resources
    - [http://www.qualityindicators.ahrq.gov/modules/psi\\_resources.aspx](http://www.qualityindicators.ahrq.gov/modules/psi_resources.aspx)
- Mortality Resources
  - QualityNet: <http://www.qualitynet.org> > Hospitals – Inpatient > Claims-Based Measures > Mortality Measures > Resources
    - <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPager%2FQnetTier4&cid=1163010398556>
  - Questions about the 30-day mortality measures may be sent to: [cmsmortalitymeasures@yale.edu](mailto:cmsmortalitymeasures@yale.edu)

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## Contact Us

			
<b>Q &amp; A Tool</b> <a href="https://cms-ip.cuhelp.com">https://cms-ip.cuhelp.com</a>	<b>Email Support</b> <a href="mailto:InpatientSupport@virgic1.HCOIS.org">InpatientSupport@virgic1.HCOIS.org</a>	<b>Phone Support</b> 644.872.4177 or 866.600.8765	<b>Inpatient Live Chat</b> <a href="http://www.qualityreportingcenter.com/inpatient">www.qualityreportingcenter.com/inpatient</a>
			
<b>Monthly Web Conferences</b> <a href="http://www.QualityReportingCenter.com">www.QualityReportingCenter.com</a>	<b>Secure Fax</b> 877.769.4443	<b>ListServes</b> Sign up on <a href="http://www.QualityNet.org">www.QualityNet.org</a>	<b>Website</b> <a href="http://www.QualityReportingCenter.com">www.QualityReportingCenter.com</a>

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## Continuing Education Approval

- This program has been approved for 1.0 continuing education (CE) unit given by CE Provider #50-747 by the following professional boards:
  - Florida Board of Nursing
  - Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
  - Florida Board of Nursing Home Administrators
  - Florida Council of Dietetics
  - Florida Board of Pharmacy
- Professionals licensed in other states will receive a Certificate of Completion to submit to their licensing Boards

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### CE Credit Process: Survey

- Complete the WebEx survey you will receive by email within the next 48 hours, or the one that will pop up after the webinar.
- The survey will ask you to log in or register to access your personal account in the Learning Management Center.
  - A one-time registration process is required.

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### CE Credit Process: Survey

Please provide any additional comments:

**10. What is your overall level of satisfaction with this presentation?**

Very satisfied  
 Somewhat satisfied  
 Neutral  
 Somewhat dissatisfied  
 Very dissatisfied

If you answered "very dissatisfied," please explain:

**11. What topics would be of interest to you for future presentations?**

**12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.**


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View our top quality research and analytics tool for your business

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### CE Credit Process: Accessing Certificate

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

**New User Link:**  
<https://www.ishippa.com/jsp/gov/cert/cert.asp?CERTID=48343&CEID=48343&CEID=48343>

**Existing User Link:**  
<https://www.ishippa.com/jsp/gov/cert/cert.asp?CERTID=48343&CEID=48343&CEID=48343>

Note: If you click the "Done" button below, you will not have the opportunity to return your certificate without participating in a longer survey.

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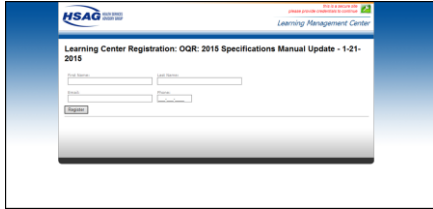
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## CE Credit Process: New User



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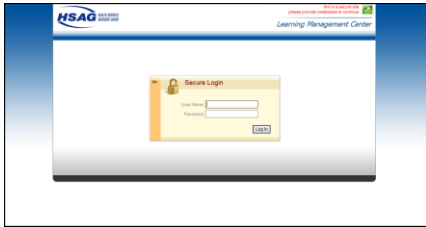
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## CE Credit Process: Existing User



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## QUESTIONS?



This material was prepared by the Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Contractor, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services, HHS#M-100-2013-11007U, FL-OR-CM-04102013-01

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