

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

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Specifications Manual, Version 4.4a,  
Changes & Hospital VBP Program  
Improvement Series: MSPB

November 18, 2014, 10 a.m. & 2 p.m. ET

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# Hospital Value-Based Purchasing (VBP) Program

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## Claims-Based Measures

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**April 21, 2015**

# 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.

# 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

# 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.

# HOSPITAL VBP AHRQ HSR

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# Table 1: Hospital Results

	A	B	C	D	E	F	G	H	
1	Table 1. AHRQ PSI-90 Composite Results for the FY 2016 Hospital VBP Performance Period								
2	HOSPITAL NAME								
3									
4	<b>Measure</b>	<b>Performance Period Index Value [a]</b>	<b>Achievement Threshold [b]</b>	<b>Benchmark [c]</b>					
5	PSI-90 Composite	0.561944	0.616248	0.449988					
6									
7	[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.								
8	[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).								
9	[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).								
10									
11	Notes:								
12	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.								
13	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.								
14									

# Table 2: AHRQ PSI Performance

	A	B	C	D	E	F	G	H	I	J	K
1	Table 2: Additional Information for Replicating Your Hospital's AHRQ PSI-90 Composite Index Value for the FY 2016 Hospital VBP Performance Period										
2	HOSPITAL NAME										
3	October 15, 2012 through June 30, 2014										
4											
5	<b>Performance Information</b>	<b>PSI 90 Composite [b] – Patient Safety for Selected Indicators</b>	<b>PSI 03 – Pressure Ulcer Rate</b>	<b>PSI 06 – Iatrogenic Pneumothorax Rate</b>	<b>PSI 07 – Central Venous Catheter-Related Bloodstream Infection Rate</b>	<b>PSI 08 – Postoperative Hip Fracture Rate</b>	<b>PSI 12 – Postoperative Pulmonary Embolism or Deep Vein Thrombosis Rate</b>	<b>PSI 13 – Postoperative Sepsis Rate</b>	<b>PSI 14 – Postoperative Wound Dehiscence Rate</b>	<b>PSI 15 – Accidental Puncture or Laceration Rate</b>	
6	Total Number of Eligible Discharges (Denominator) at Your Hospital [a] [c]	-	3,613	8,924	7,065	1,549	2,321	N/A	228	9,503	
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	0.01	0.21	0.37	0.06	2.97	N/A	0.40	1.97	
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.08	0.24	0.07	0.06	3.42	9.14	0.77	1.46	
9	Composite Index Value [b]	0.561944	-	-	-	-	-	-	-	-	
10	Measure's Weight in Composite [c]	-	0.1357	0.0614	0.0831	0.0005	0.2209	0.0536	0.0159	0.4289	
11	<b>Number of Outcomes (Numerator) [c]</b>	<b>-</b>	<b>0</b>	<b>2</b>	<b>4</b>	<b>0</b>	<b>7</b>	<b>N/A</b>	<b>0</b>	<b>16</b>	
12	Observed Rate per 1,000 Eligible Discharges [c]	-	0.00	0.22	0.57	0.00	3.02	N/A	0.00	1.68	
13	Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.00	0.19	0.46	0.00	2.84	N/A	0.00	2.09	
14	Expected Rate per 1,000 Eligible Discharges [c]	-	7.72	0.50	0.89	0.03	5.16	N/A	3.47	2.26	
15	Reliability Weight [c]	-	0.92	0.57	0.77	0.02	0.78	N/A	0.48	0.81	
16											
17	[a] The Total Number of Eligible Discharges and Smoothed Rate per 1,000 Eligible Discharges do not apply to the PSI 90 composite measure.										
18	[b] The PSI 90 composite is calculated from PSI 03, 06, 07, 08, 12, 13, 14 and 15.										
19	[c] These statistics are not shown on your hospital's Percentage Payment Summary Report, but we include them here for your reference.										
20											
21	Notes:										
22	1. *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.										
23	2. For more information on PSI calculations, including definitions of Observed, Expected, Risk-Adjusted, and Smoothed Rates, Composite Values, or Performance Categories, please visit the Hospitals-Inpatient page of the QualityNet website.										
24	3. N/A = Not available for calculation because there were not enough cases at the hospital to calculate rates for this measure. If any of the component PSI measures used for the PSI 90 composite have fewer than three eligible cases, then the national risk-adjusted rate is used for that component PSI.										
25											

# Table 3: AHRQ PSI Discharges

Table 3: Discharge-Level Information for the AHRQ PSI Measures for the FY 2016 Hospital VBP Program Performance Period  
 HOSPITAL NAME  
 October 15, 2012 through June 30, 2014  
 This file contains MOCK data except for national results. In your hospital's own HSR file, the data contains PII. DO NOT EMAIL THE REAL HSR FILES OR ANY OF THEIR CONTENTS BECAUSE THEY CONTAIN PERSONALLY IDENTIFIABLE INFORMATION. When referring to these documents use ID Numbers.

ID Number	Measure	HICNO	Medical Record Number	Beneficiary DOB	Admission Date	Discharge Date	PSI Trigger Diagnoses or Procedures	DX1	POA1
1	IATROGENIC PNEUMOTHORAX (PSI06)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	5121	42781	Y
2	IATROGENIC PNEUMOTHORAX (PSI06)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	5121	4414	Y
3	CENTRAL VENOUS CATHETER-RELATED BLOODSTREAM INFECTIONS (PSI07)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	99931	56081	Y
4	CENTRAL VENOUS CATHETER-RELATED BLOODSTREAM INFECTIONS (PSI07)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	99931	56211	Y
5	CENTRAL VENOUS CATHETER-RELATED BLOODSTREAM INFECTIONS (PSI07)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	99931	3962	Y
6	CENTRAL VENOUS CATHETER-RELATED BLOODSTREAM INFECTIONS (PSI07)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	99932	55221	Y
7	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	45340	44024	Y
8	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	45340	11595	Y
9	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	45341	4414	Y
10	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	41519	73342	Y
11	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	45341	V5482	-
12	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	45341	99656	Y
13	POSTOPERATIVE PULMONARY EMBOLISM OR DEEP VEIN THROMBOSIS (PSI12)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	41519	1533	Y
14	ACCIDENTAL PUNCTURE OR LACERATION (PSI15)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	9982	57410	Y
15	ACCIDENTAL PUNCTURE OR LACERATION (PSI15)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	9982	56081	Y
16	ACCIDENTAL PUNCTURE OR LACERATION (PSI15)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	9982	41401	Y
17	ACCIDENTAL PUNCTURE OR LACERATION (PSI15)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	9982	1534	Y
18	ACCIDENTAL PUNCTURE OR LACERATION (PSI15)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	9982	41401	Y
19	ACCIDENTAL PUNCTURE OR LACERATION (PSI15)	99999999	999999A	09/09/9999	09/09/9999	09/09/9999	9982	57400	Y

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).

# 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

# 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	Performance Information	PSI 90 Composite [b] – Patient Safety for Selected Indicators	PSI 03 – Pressure Ulcer Rate	PSI 06 – Iatrogenic Pneumothorax Rate
6	Total Number of Eligible Discharges (Denominator) at Your Hospital [a] [c]	-	3,613	8,924
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	0.01	0.21
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.08	0.24
9	Composite Index Value [b]	0.561944	-	-
10	Measure's Weight in Composite [c]	-	0.1357	0.0614
11	Number of Outcomes (Numerator) [c]	-	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 calculations			
18	Divide Number of Outcomes by Eligible Discharges		=D11/D6	0.000224115
19	Multiply by 1000		=D18*1000	0.224114747
20				

# Calculate the Risk-Adjusted 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			
2	HOSPITAL NAME			
3	October 15, 2012 through June 30, 2014			
4				
5	<b>Performance Information</b>	<b>PSI 90 Composite [b] – Patient Safety for Selected Indicators</b>	<b>PSI 03 – Pressure Ulcer Rate</b>	<b>PSI 06 – Iatrogenic Pneumothorax Rate</b>
6	Total Number of Eligible Discharges (Denominator) at Your Hospital [a] [c]	-	3,613	8,924
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	0.01	0.21
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.08	0.24
9	Composite Index Value [b]	0.561944	-	-
10	Measure's Weight in Composite [c]	-	0.1357	0.0614
11	Number of Outcomes (Numerator) [c]	-	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				
19		Observed Rate =D18*1000		0.224114747
20		HCUP National Rate from the User Guide		0.000417086
21				
22		<b>Risk-Adjusted Rate calculations</b>		
23		divide the observed rate by the expected rate =D19/D14		0.444242723
24		multiply by the HCUP National rate =D23*D20		0.000185287
25		multiply by 1,000 =D24*1000		0.185287397
26				

# Calculate the Smoothed 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 2012			
2	HOSPITAL NAME			
3	October 15, 2012 through June 30, 2014			
4				
5	<b>Performance Information</b>	<b>PSI 90 Composite [b] – Patient Safety for Selected Indicators</b>	<b>PSI 03 – Pressure Ulcer Rate</b>	<b>PSI 06 – Iatrogenic Pneumothorax Rate</b>
6	Total Number of Eligible Discharges (Denominator) at Your Hospital [a] [c]	-	3,613	8,924
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	0.01	0.21
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.08	0.24
9	Composite Index Value [b]	0.561944	-	-
10	Measure's Weight in Composite [c]	-	0.1357	0.0614
11	Number of Outcomes (Numerator) [c]	-	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				
25		Risk-Adjusted Rate =D24*1000		0.185287397
26				
27	<b>Smoothed rate calculations</b>			
28		multiply risk-adjusted rate by the reliability rate =D25*D15		0.105109936
29		multiply national risk-adjusted rate by one minus the reliability rate =D8*(1-D15)		0.105117583
30		add these two values =D28+D29		0.210227519
31				

# 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 AHRQ PSI-90 Composite Index Value for the FY 2016 Hospital VBP Performance Period									
2	HOSPITAL NAME									
3	October 15, 2012 through June 30, 2014									
4										
5	<b>Performance Information</b>	<b>PSI 90 Composite [b] – Patient Safety for Selected Indicators</b>	<b>PSI 03 – Pressure Ulcer Rate</b>	<b>PSI 06 – Iatrogenic Pneumothorax Rate</b>	<b>PSI 07 – Central Venous Catheter-Related Bloodstream Infection Rate</b>	<b>PSI 08 – Postoperative Hip Fracture Rate</b>	<b>PSI 12 – Postoperative Pulmonary Embolism or Deep Vein Thrombosis Rate</b>	<b>PSI 13 – Postoperative Sepsis Rate</b>	<b>PSI 14 – Postoperative Wound Dehiscence Rate</b>	<b>PSI 15 – Accidental Puncture or Laceration Rate</b>
6	Total Number of Eligible Discharges (Denominator) at Your Hospital [a] [c]	-	3,613	8,924	7,065	1,549	2,321	N/A	228	9,503
7	Smoothed Rate per 1,000 Eligible Discharges [a] [c]	-	0.01	0.21	0.37	0.06	2.97	N/A	0.40	1.97
8	National Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.08	0.24	0.07	0.06	3.42	9.14	0.77	1.46
9	Composite Index Value [b]	0.561944	-	-	-	-	-	-	-	-
10	Measure's Weight in Composite [c]	-	0.1357	0.0614	0.0831	0.0005	0.2209	0.0536	0.0159	0.4289
11	Number of Outcomes (Numerator) [c]	-	0	2	4	0	7	N/A	0	16
12	Observed Rate per 1,000 Eligible Discharges [c]	-	0.00	0.22	0.57	0.00	3.02	N/A	0.00	1.68
13	Risk-Adjusted Rate per 1,000 Eligible Discharges [c]	-	0.00	0.19	0.46	0.00	2.84	N/A	0.00	2.09
14	Expected Rate per 1,000 Eligible Discharges [c]	-	7.72	0.50	0.89	0.03	5.16	N/A	3.47	2.26
15	Reliability Weight [c]	-	0.92	0.57	0.77	0.02	0.78	N/A	0.48	0.81
16										
20	HCU National Rate from the User Guide		0.005347331	0.000417086	0.000720718	0.000032499	0.004864561	0.010736301	0.001096571	0.002804933
30	smoothed rate		0.005717453	0.210227519	0.369442414	0.062001328	2.965981189	9.136383939	0.400940531	1.969601813
31										
32	<b>Calculate PSI 90 composite</b>									
33	divide smoothed rate by 1000 =C30/1000		0.000005717	0.000210228	0.000369442	0.000062001	0.002965981	0.009136384	0.000400941	0.001969602
34	divide by HCU national rate =C33/C20		0.001069216	0.504038843	0.512603540	1.907797805	0.609711997	0.850980627	0.365631295	0.702192148
35	Multiply by composite weight =C34*C10		0.000145093	0.030947985	0.042597354	0.000953899	0.134685380	0.045612562	0.005813538	0.3011170212
36	sum and round to 6 decimal places =SUM(C35:J35)		0.561926							
37										

# 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.

# HOSPITAL VBP MORTALITY HSR

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# Table 1: Hospital Results

	A	B	C	D	E	F	G	H
1	Table 1. 30-Day Mortality Measure Results for the FY 2016 Hospital VBP Performance Period							
2	HOSPITAL NAME							
3								
4	<b>Measure [a]</b>	<b>Number of Eligible Discharges [b]</b>	<b>Performance Period Survival Rate [c]</b>	<b>Achievement Threshold [d]</b>	<b>Benchmark [e]</b>			
5	AMI 30-Day Mortality	12	0.862530	0.847472	0.862371			
6	HF 30-Day Mortality	64	0.864182	0.881510	0.900315			
7	Pneumonia 30-Day Mortality	97	0.877683	0.882651	0.904181			
8								
9	[a] AMI = acute myocardial infarction; HF= heart failure							
10	[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 2016 Hospital Value-Based Purchasing Performance period; your results are presented here for your information.							
11	[c] FY16 Performance Period Survival Rate = 1 – Risk Standardized Mortality Rate (RSMR). See Table 2 for RSMR.							
12	[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).							
13	[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).							
14								
15	Notes:							
16	1. This table is based on discharges from October 1, 2012 - June 30, 2014.							
17	2. N/A = Your hospital had no qualifying discharges or results for that condition.							
18								
	Table 1 Hospital Results		Table 2 Additional Information		Table 3 Discharges AMI Mort.		Table 4 Discharges HF Mort.	

# Table 2: Additional Information

	A	B	C	D	E	F	G	H	I	J
1	Table 2. Additional Information for Replicating Your Hospital's Risk-Standardized Mortality Results for the FY 2016 Hospital VBP Performance Period									
2	HOSPITAL NAME									
3										
4	<b>Measure [a]</b>	<b>Number of Eligible Discharges [b]</b>	<b>Predicted Deaths [c]</b>	<b>Expected Deaths [d]</b>	<b>National Observed Mortality Rate [e]</b>	<b>Risk-Standardized Mortality Rate [f]</b>	<b>Performance Period Survival Rate [g]</b>			
5	AMI 30-Day Mortality	12	2.02	2.02	0.137543	0.137470	0.862530			
6	HF 30-Day Mortality	64	7.13	6.03	0.114749	0.135818	0.864182			
7	Pneumonia 30-Day Mortality	97	9.25	8.45	0.111761	0.122317	0.877683			
8										
9	[a] AMI = acute myocardial infarction; HF= heart failure									
10	[b] Final number of discharges from your hospital used for measure calculation.									
11	[c] 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).									
12	[d] The number of expected deaths within 30 days of 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).									
13	[e] National Observed Mortality Rate = (Number of observed 30-day deaths nationally / Number of eligible discharges nationally).									
14	[f] Risk-Standardized Mortality Rate (RSMR) = (Predicted Deaths / Expected Deaths) * National Observed Mortality Rate.									
15	[g] Performance Period Survival Rate = (1 - Risk-Standardized Mortality Rate).									
16										
17	Notes:									
18	1. This table is based on discharges from October 1, 2012 - June 30, 2014.									
19	2. The information in this table is provided only to help in replicating your hospital's survival rates in Table 1; other than the number of eligible discharges and the survival rate, information in this table will not be publicly reported.									
20	3. See the Replication Instructions provided as part of the "Hospital-Specific Report User Guide" file for more information.									
21	4. N/A = Your hospital had no qualifying discharges or results for that condition.									
22										
<p>Table 1 Hospital Results   <b>Table 2 Additional Information</b>   Table 3 Discharges AMI Mort.   Table 4 Discharges HF Mort.   Table 5 Discharges PN Mort.</p>										

# Tables 3, 4, and 5: Discharges

	A	B	C	D	E	F	G	H	I	J
1	Table 3. Discharge-level Worksheet for AMI Mortality									
2	HOSPITAL NAME									
3	October 1, 2012 through June 30, 2014									
4	This file contains MOCK data except for national results. In your hospital's own HSR file, the data contains PII. DO NOT EMAIL THE REAL HSR FILES OR ANY OF THEIR CONTENTS BECAUSE THEY CONTAIN PERSONALLY IDENTIFIABLE INFORMATION. When referring to these documents use ID Numbers.									
5	[Row 8 contains risk factor coefficients - see data beginning at column M.]									
6										
7	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
8	--	--	--	--	--	--	--	--	--	--
9	1	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41091	20	YES	0
10	2	999999999A	99999A	99/99/9999	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 PII or PHI is avoided.

# Tables 3, 4, and 5: Discharges

	I	J	K	L	M	N	O	P	AL	AM	AN	AO
6												
7	Index Stay	Inclusion/Exclusion Indicator	Death within 30 Days	Death Date	MALE	dxHxPTCA	dxHxCABG	un	LiverDis	Age_65	HOSP_EFFECT	AVG_EFFECT
8	--	--	--	--	0.1322793	-0.285087	0.114669779		0.4128875	0.0556675	-2.783375883	-2.782690092
9	YES	0	YES	99/99/9999	1	0	0		0	21	-	-
10	YES	0	YES	99/99/9999	1	0	0		0	25	-	-
11	YES	0	NO	--	1	0	0		0	13	-	-
12	YES	0	NO	--	1	0	0		0	12	-	-
13	YES	0	NO	--	0	0	0		0	34	-	-
14	YES	0	NO	--	1	0	0		0	14	-	-
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	15	-	-
18	YES	0	NO	--	1	0	0		0	24	-	-
19	YES	0	NO	--	1	0	0		0	9	-	-
20	YES	0	NO	--	1	0	0		0	13	-	-
21	NO	1	NO	--	--	--	--		--	--	-	-
22	NO	2	NO	--	--	--	--		--	--	-	-
23	NO	7	NO	--	--	--	--		--	--	-	-
24												

Table 1 Hospital Results    Table 2 Additional Information    **Table 3 Discharges AMI Mort.**    Table 4 Discharges HF Mort.    Table 5 Discharges PN Mort.

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

# 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

# Calculate Predicted Deaths: Step 1

	A	B	C	D	E	F	G	H	I	J	K
1	Table 3. Discharge-level Worksheet for AMI Mortality										
2	HOSPITAL NAME										
3	October 1, 2012 through June 30, 2014										
4	This file contains MOCK data except for national results. In your hospital's own HSR file, the data contains PII. DO NOT EMAIL THE REAL HSR FILES OR ANY OF THEIR CONTENTS BECAUSE THEY CONTAIN PERSONALLY IDENTIFIABLE INFORMATION. When referring to these documents use ID Numbers.										
5	[Row 8 contains risk factor coefficients - see data beginning at column M.]										
6											
7	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	Death within 30 Days
8	--	--	--	--	--	--	--	--	--	--	--
9	1	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41091	20	YES	0	YES
10	2	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	3	YES	0	YES
11	3	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	3	YES	0	NO
12	4	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41091	2	YES	0	NO
13	5	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	3	YES	0	NO
14	6	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41091	2	YES	0	NO
15	7	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	6	YES	0	NO
16	8	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41091	2	YES	0	NO
17	9	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	6	YES	0	NO
18	10	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41091	1	YES	0	NO
19	11	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	2	YES	0	NO
20	12	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	2	YES	0	NO
21	13	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41011	2	NO	1	NO
22	14	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	2	NO	2	NO
23	15	999999999A	99999A	99/99/9999	99/99/9999	99/99/9999	41071	2	NO	7	NO
24											
25											

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.

# Calculate Predicted Deaths: Step 2

	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X
1																
2																
3																
4																
5																
6																
7	Index Stat	Inclusion/ Exclusion Indicator	Death within 30 Days	Death Date	MALE	dxHxPTCA	dxHxCABG	AMI_ant1	AMI_ant2	Hx_CHF	Hx_MI	UnAngina	Atherosc	RespFail	ValvuDis	HTN
8	--	--	--	--	0.13227928	-0.285087005	0.114669779	0.82153943	0.53752994	0.27440774	-0.03081154	-0.09011058	-0.48719228	0.157419	0.08546243	-0.3156665
9	YES	0	YES	99/99/9999	1	0	0	0	0	0	0	0	1	1	0	1
10	YES	0	YES	99/99/9999	1	0	0	0	0	1	0	0	0	0	0	1
11	YES	0	NO	--	1	0	0	0	0	0	0	0	0	0	0	1
12	YES	0	NO	--	1	0	0	0	0	1	0	0	1	0	0	1
13	YES	0	NO	--	0	0	0	0	0	0	0	0	1	0	0	0
14	YES	0	NO	--	1	0	0	0	0	0	0	0	0	0	0	1
15	YES	0	NO	--	1	0	1	0	0	0	0	0	1	0	0	1
16	YES	0	NO	--	0	0	0	0	0	0	0	0	1	0	0	1
17	YES	0	NO	--	1	0	0	0	0	1	0	0	1	0	1	1
18	YES	0	NO	--	1	0	0	0	0	0	0	0	1	0	0	1
19	YES	0	NO	--	1	0	0	0	0	0	0	0	1	0	0	1
20	YES	0	NO	--	1	0	0	0	0	0	0	0	1	0	0	0
21	NO	1	NO	--	--	--	--	--	--	--	--	--	--	--	--	--
22	NO	2	NO	--	--	--	--	--	--	--	--	--	--	--	--	--
23	NO	7	NO	--	--	--	--	--	--	--	--	--	--	--	--	--
24																
25	Multiply each risk factor flag for Index=YES rows by the relevant coefficient found in row 8.															
26	=MS8*M9				0.13227928	0	0	0	0	0	0	0	-0.48719228	0.157419	0	-0.3156665
27					0.13227928	0	0	0	0	0.27440774	0	0	0	0	0	-0.3156665
28					0.13227928	0	0	0	0	0	0	0	0	0	0	-0.3156665
29					0.13227928	0	0	0	0	0.27440774	0	0	-0.48719228	0	0	-0.3156665
30					0	0	0	0	0	0	0	0	-0.48719228	0	0	0
31					0.13227928	0	0	0	0	0	0	0	0	0	0	-0.3156665
32					0.13227928	0	0.114669779	0	0	0	0	0	-0.48719228	0	0	-0.3156665
33					0	0	0	0	0	0	0	0	-0.48719228	0	0	-0.3156665
34					0.13227928	0	0	0	0	0.27440774	0	0	-0.48719228	0	0.08546243	-0.3156665
35					0.13227928	0	0	0	0	0	0	0	-0.48719228	0	0	-0.3156665
36					0.13227928	0	0	0	0	0	0	0	-0.48719228	0	0	-0.3156665
37					0.13227928	0	0	0	0	0	0	0	-0.48719228	0	0	0
38																
39																

# Calculate Predicted Deaths: Step 3

	AG	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ	A
1												
2												
3												
4												
5												
6												
	FunctDis	PVDis	MetasCA	Trauma	PsychDis	LiverDis	Age_65	HOSP_EFFECT	AVG_EFFECT			
7	0.17952027	0.08625711	0.67621777	-0.01053198	0.08756338	0.4128875	0.05566751	-2.783375883	-2.782690092			
9	0	0	0	1	1	0	21	-	-			
10	0	0	0	1	0	0	25	-	-			
11	0	1	0	0	0	0	13	-	-			
12	0	0	0	1	0	0	12	-	-			
13	0	0	0	0	1	0	34	-	-			
14	0	0	0	0	0	0	14	-	-			
15	0	0	0	0	0	0	5	-	-			
16	0	0	0	1	0	0	25	-	-			
17	0	1	0	0	0	0	15	-	-			
18	1	0	0	0	0	0	24	-	-			
19	0	1	0	1	0	0	9	-	-			
20	0	0	0	0	0	0	13	-	-			
21	--	--	--	--	--	--	--	-	-			
22	--	--	--	--	--	--	--	-	-			
23	--	--	--	--	--	--	--	-	-			
24										=SUM(M26:AM26)	=AP26+AN\$8	
25										sum	Add	
26	0	0	0	-0.01053198	0.08756338	0	1.16901775	1.666848519	-1.116527364			
27	0	0	0	-0.01053198	0	0	1.39168779	1.944263676	-0.839112206			
28	0	0.08625711	0	0	0	0	0.72367765	1.632522776	-1.150853107			
29	0	0	0	-0.01053198	0	0	0.66801014	0.323663007	-2.459712875			
30	0	0	0	0	0.08756338	0	1.8926954	2.385756065	-0.397619818			
31	0	0	0	0	0	0	0.77934516	0.595957936	-2.187417946			
32	0	0	0	0	0	0	0.27833756	0.307800863	-2.475575020			
33	0	0	0	-0.01053198	0	0	1.39168779	1.096523206	-1.686852676			
34	0	0.08625711	0	0	0	0	0.83501268	0.821470089	-1.961905794			
35	0.17952027	0	0	0	0	0	1.33602028	0.891655936	-1.891719947			
36	0	0.08625711	0	-0.01053198	0	0	0.50100761	0.219052773	-2.564323110			
37	0	0	0	0	0	0	0.72367765	0.466388612	-2.316987270			
38												

# Calculate Predicted Deaths: Step 4

	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ	AR	AS
7	PVDis	MetasCA	Trauma	PsychDis	LiverDis	Age_65	HOSP_EFFECT	AVG_EFFECT				
8	0.0862571	0.6762178	-0.01053198	0.08756338	0.4128875	0.0556675	-2.783375883	-2.782690092				
9	0	0	1	1	0	21	-	-				
10	0	0	1	0	0	25	-	-				
11	1	0	0	0	0	13	-	-				
12	0	0	1	0	0	12	-	-				
13	0	0	0	1	0	34	-	-				
14	0	0	0	0	0	14	-	-				
15	0	0	0	0	0	5	-	-				
16	0	0	1	0	0	25	-	-				
17	1	0	0	0	0	15	-	-				
18	0	0	0	0	0	24	-	-				
19	1	0	1	0	0	9	-	-				
20	0	0	0	0	0	13	-	-				
21	--	--	--	--	--	--	-	-				
22	--	--	--	--	--	--	-	-				
23	--	--	--	--	--	--	-	-				
24									=SUM(M26:AM26)	=AP26+AN\$8	=1/(1+EXP(-1*AQ26))	
25									sum	Add	Predicted	
26	0	0	-0.01053198	0.08756338	0	1.1690177			1.666848519	-1.116527364	0.246655990	
27	0	0	-0.01053198	0	0	1.3916878			1.944263676	-0.839112206	0.301721797	
28	0.0862571	0	0	0	0	0.7236777			1.632522776	-1.150853107	0.240333294	
29	0	0	-0.01053198	0	0	0.6680101			0.323663007	-2.459712875	0.078731161	
30	0	0	0	0.08756338	0	1.8926954			2.385756065	-0.397619818	0.401884338	
31	0	0	0	0	0	0.7793452			0.595957936	-2.187417946	0.100886065	
32	0	0	0	0	0	0.2783376			0.307800863	-2.475575020	0.077588299	
33	0	0	-0.01053198	0	0	1.3916878			1.096523206	-1.686852676	0.156190192	
34	0.0862571	0	0	0	0	0.8350127			0.821470089	-1.961905794	0.123260945	
35	0	0	0	0	0	1.3360203			0.891655936	-1.891719947	0.131048487	
36	0.0862571	0	-0.01053198	0	0	0.5010076			0.219052773	-2.564323110	0.071470119	
37	0	0	0	0	0	0.7236777			0.466388612	-2.316987270	0.089725820	
38												

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

# Calculate Predicted Deaths: Step 5

	AO	AP	AQ	AR	AS
			<b>Add</b>	<b>Predicted</b>	
25		<b>sum</b>	<b>HOSP_EFFECT</b>	<b>probability</b>	
26		1.666848519	-1.116527364	0.246655990	
27		1.944263676	-0.839112206	0.301721797	
28		1.632522776	-1.150853107	0.240333294	
29		0.323663007	-2.459712875	0.078731161	
30		2.385756065	-0.397619818	0.401884338	
31		0.595957936	-2.187417946	0.100886065	
32		0.307800863	-2.475575020	0.077588299	
33		1.096523206	-1.686852676	0.156190192	
34		0.821470089	-1.961905794	0.123260945	
35		0.891655936	-1.891719947	0.131048487	
36		0.219052773	-2.564323110	0.071470119	
37		0.466388612	-2.316987270	0.089725820	
38					
39				<b>Predicted Deaths</b>	
40			<b>=SUM(AR26:AR37)</b>	2.019496508	
41					
42					
43					

# Calculate Expected Deaths

	AK	AL	AM	AN	AO	AP	AQ	AR	AS	AT	AU	AV
	PsychDis	LiverDis	Age_65	HOSP_EFFECT	AVG_EFFECT							
7												
8	0.08756338	0.4128875	0.0556675	-2.783375883	-2.782690092							
9	1	0	21	-	-							
10	0	0	25	-	-							
11	0	0	13	-	-							
12	0	0	12	-	-							
13	1	0	34	-	-							
14	0	0	14	-	-							
15	0	0	5	-	-							
16	0	0	25	-	-							
17	0	0	15	-	-							
18	0	0	24	-	-							
19	0	0	9	-	-							
20	0	0	13	-	-							
21	--	--	--	-	-							
22	--	--	--	-	-							
23	--	--	--	-	-							
24						=SUM(M26:AM26)	=AP26+AN\$8	=1/(1+EXP(-1*AQ26))	=AP26+AO\$8	1/(1+EXP(-1*AT26))		
25						sum	Add	Predicted	Add	Expected		
26	0.08756338	0	1.1690177			1.666848519	-1.116527364	0.246655990	-1.115841573	0.246783443		
27	0	0	1.3916878			1.944263676	-0.839112206	0.301721797	-0.838426416	0.301866303		
28	0	0	0.7236777			1.632522776	-1.150853107	0.240333294	-1.150167316	0.240458523		
29	0	0	0.6680101			0.323663007	-2.459712875	0.078731161	-2.459027084	0.078780917		
30	0.08756338	0	1.8926954			2.385756065	-0.397619818	0.401884338	-0.396934027	0.402049195		
31	0	0	0.7793452			0.595957936	-2.187417946	0.100886065	-2.186732156	0.100948289		
32	0	0	0.2783376			0.307800863	-2.475575020	0.077588299	-2.474889229	0.077637394		
33	0	0	1.3916878			1.096523206	-1.686852676	0.156190192	-1.686166885	0.156280597		
34	0	0	0.8350127			0.821470089	-1.961905794	0.123260945	-1.961220003	0.123335076		
35	0	0	1.3360203			0.891655936	-1.891719947	0.131048487	-1.891034156	0.131126601		
36	0	0	0.5010076			0.219052773	-2.564323110	0.071470119	-2.563637319	0.071515643		
37	0	0	0.7236777			0.466388612	-2.316987270	0.089725820	-2.316301480	0.089781848		
38												
39												

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

# Calculate Expected Deaths

	AP	AQ	AR	AS	AT	AU	AV	AW
		<b>Add</b>	<b>Predicted</b>		<b>Add</b>	<b>Expected</b>		
25	<b>sum</b>	<b>HOSP_EFFECT</b>	<b>probability</b>		<b>AVG_EFFECT</b>	<b>probability</b>		
26	1.666848519	-1.116527364	0.246655990		-1.115841573	0.246783443		
27	1.944263676	-0.839112206	0.301721797		-0.838426416	0.301866303		
28	1.632522776	-1.150853107	0.240333294		-1.150167316	0.240458523		
29	0.323663007	-2.459712875	0.078731161		-2.459027084	0.078780917		
30	2.385756065	-0.397619818	0.401884338		-0.396934027	0.402049195		
31	0.595957936	-2.187417946	0.100886065		-2.186732156	0.100948289		
32	0.307800863	-2.475575020	0.077588299		-2.474889229	0.077637394		
33	1.096523206	-1.686852676	0.156190192		-1.686166885	0.156280597		
34	0.821470089	-1.961905794	0.123260945		-1.961220003	0.123335076		
35	0.891655936	-1.891719947	0.131048487		-1.891034156	0.131126601		
36	0.219052773	-2.564323110	0.071470119		-2.563637319	0.071515643		
37	0.466388612	-2.316987270	0.089725820		-2.316301480	0.089781848		
38								
39			<b>Predicted Deaths</b>			<b>Expected Deaths</b>		
40		<b>=SUM(AR26:AR37)</b>	2.019496508			2.020563831	<b>=SUM(AU26:AU37)</b>	
41								
42								
43								
44								
45								

# Calculate the Risk-Standardized Mortality Rate

	AP	AQ	AR	AS	AT	AU	AV	AW	AX	AY
		<b>Add</b>	<b>Predicted</b>		<b>Add</b>	<b>Expected</b>				
25	<b>sum</b>	<b>HOSP_EFFECT</b>	<b>probability</b>		<b>AVG_EFFECT</b>	<b>probability</b>				
26	1.666848519	-1.116527364	0.246655990		-1.115841573	0.246783443				
27	1.944263676	-0.839112206	0.301721797		-0.838426416	0.301866303				
28	1.632522776	-1.150853107	0.240333294		-1.150167316	0.240458523				
29	0.323663007	-2.459712875	0.078731161		-2.459027084	0.078780917				
30	2.385756065	-0.397619818	0.401884338		-0.396934027	0.402049195				
31	0.595957936	-2.187417946	0.100886065		-2.186732156	0.100948289				
32	0.307800863	-2.475575020	0.077588299		-2.474889229	0.077637394				
33	1.096523206	-1.686852676	0.156190192		-1.686166885	0.156280597				
34	0.821470089	-1.961905794	0.123260945		-1.961220003	0.123335076				
35	0.891655936	-1.891719947	0.131048487		-1.891034156	0.131126601				
36	0.219052773	-2.564323110	0.071470119		-2.563637319	0.071515643				
37	0.466388612	-2.316987270	0.089725820		-2.316301480	0.089781848				
38										
39			<b>Predicted Deaths</b>			<b>Expected Deaths</b>				
40			2.019496508			2.020563831				
41										
42										
43			<b>=AR40/AU40</b>		0.999472	<b>Standardized Mortality Ratio (SMR)</b>				
44					0.137543	<b>National Observed Mortality Rate from table 2</b>				
45			<b>=AT43*AT44</b>		0.137470	<b>Risk Standardized Mortality Rate (RSMR)</b>				
46										
47										
48										
49										

# Calculate the Performance Period Survival Rate

	AP	AQ	AR	AS	AT	AU	AV	AW	AX	A
		<b>Add</b>	<b>Predicted</b>		<b>Add</b>	<b>Expected</b>				
25	<b>sum</b>	<b>HOSP_EFFECT</b>	<b>probability</b>		<b>AVG_EFFECT</b>	<b>probability</b>				
26	1.666848519	-1.116527364	0.246655990		-1.115841573	0.246783443				
27	1.944263676	-0.839112206	0.301721797		-0.838426416	0.301866303				
28	1.632522776	-1.150853107	0.240333294		-1.150167316	0.240458523				
29	0.323663007	-2.459712875	0.078731161		-2.459027084	0.078780917				
30	2.385756065	-0.397619818	0.401884338		-0.396934027	0.402049195				
31	0.595957936	-2.187417946	0.100886065		-2.186732156	0.100948289				
32	0.307800863	-2.475575020	0.077588299		-2.474889229	0.077637394				
33	1.096523206	-1.686852676	0.156190192		-1.686166885	0.156280597				
34	0.821470089	-1.961905794	0.123260945		-1.961220003	0.123335076				
35	0.891655936	-1.891719947	0.131048487		-1.891034156	0.131126601				
36	0.219052773	-2.564323110	0.071470119		-2.563637319	0.071515643				
37	0.466388612	-2.316987270	0.089725820		-2.316301480	0.089781848				
38										
39			<b>Predicted Deaths</b>			<b>Expected Deaths</b>				
40			2.019496508			2.020563831				
41										
42										
43			<b>=AR40/AU40</b>		0.999472	<b>Standardized Mortality Ratio (SMR)</b>				
44					0.137543	<b>National Observed Mortality Rate from table 2</b>				
45			<b>=AT43*AT44</b>		0.137470	<b>Risk Standardized Mortality Rate (RSMR)</b>				
46										
47			<b>=1-AT45</b>		0.862530	<b>Performance Period Survival Rate</b>				
48										
49										

# 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.

# 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.**

# Submission of a Review and Corrections Request

Requests can be submitted via:

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

# 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.

# Resources

- HVBP Overview
  - <https://www.qualitynet.org/dcs/ContentServer?cid=1228773024772&pagename=QnetPublic%2FPa ge%2FQnetTier4&c=Page>
- AHRQ Resources
  - *QualityNet*. <https://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%2FPa ge%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*. <https://www.qualitynet.org> > Hospitals – Inpatient > Claims-Based Measures > Mortality Measures > Resources  
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPa ge%2FQnetTier3&cid=1163010398556>
  - Questions about the 30-day mortality measures may be sent to: [cmsmortalitymeasures@yale.edu](mailto:cmsmortalitymeasures@yale.edu)

# Contact Us



## Q & A Tool

<https://cms-ip.custhelp.com>



## Email Support

[InpatientSupport@virg1.HCQIS.org](mailto:InpatientSupport@virg1.HCQIS.org)



## Phone Support

844.472.4477 or  
866.800.8765



## Inpatient Live Chat

[www.qualityreportingcenter.com/inpatient](http://www.qualityreportingcenter.com/inpatient)



## Monthly Web Conferences

[www.QualityReportingCenter.com](http://www.QualityReportingCenter.com)



## Secure Fax

877.789.4443



## ListServes

Sign up on  
[www.QualityNet.org](http://www.QualityNet.org)



## Website

[www.QualityReportingCenter.com](http://www.QualityReportingCenter.com)

# 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

# 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.

# CE Credit Process: Survey

No

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.**

Done

Powered by [SurveyMonkey](#)  
Check out our [sample surveys](#) and create your own now!

# 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://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

**Existing User Link:**  
<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

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

Done

# CE Credit Process: New User

The screenshot shows a web browser window displaying the registration page for a new user. The page header includes the HSAG logo (Health Services Advisory Group) on the left and a security notice on the right: "this is a secure site please provide credentials to continue" with a small green icon. Below the header, the page title is "Learning Management Center". The main content area is titled "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The registration form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field has a small icon of a telephone handset. Below the input fields is a "Register" button. The page is framed by a blue border on the left and right sides.

**HSAG** HEALTH SERVICES ADVISORY GROUP

this is a secure site  
please provide credentials to continue

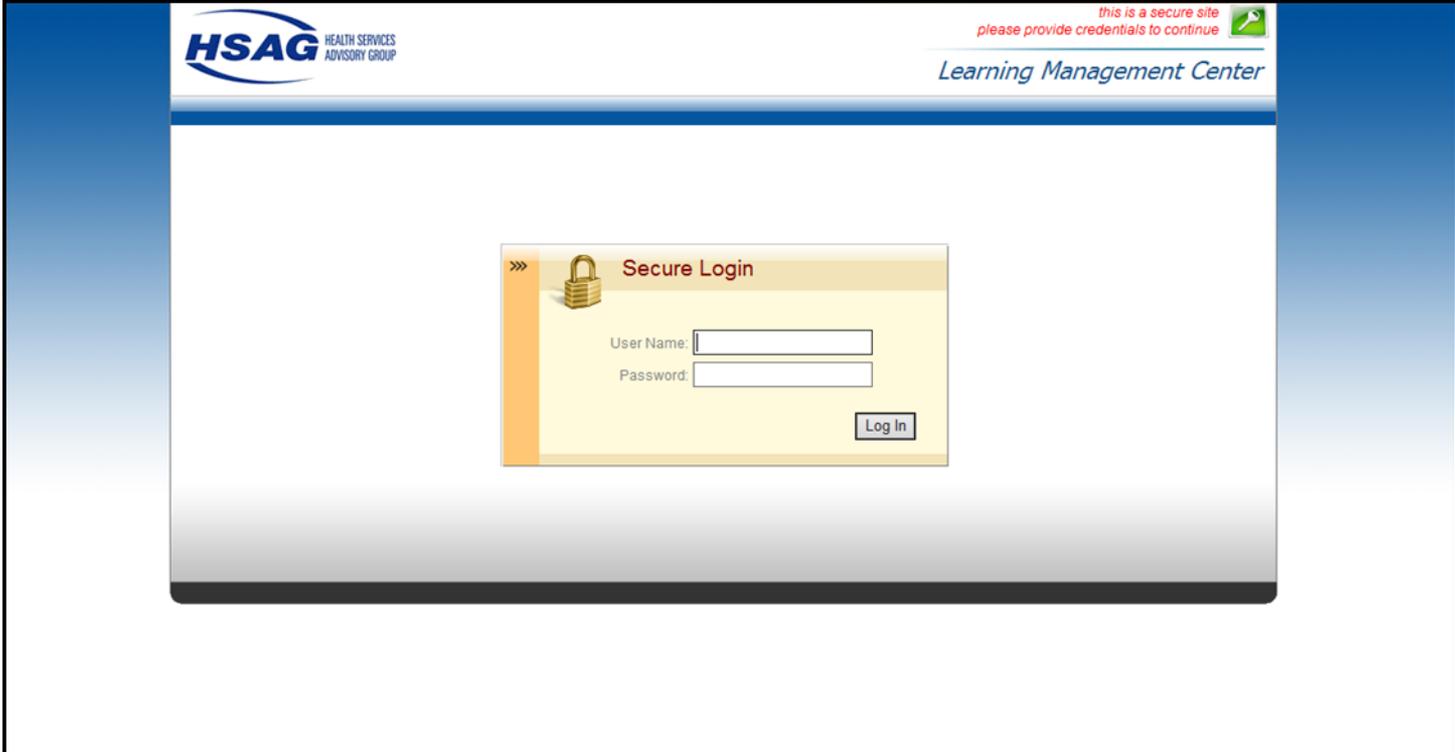
Learning Management Center

**Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015**

First Name:  Last Name:

Email:  Phone:

# CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a red security warning reads "this is a secure site please provide credentials to continue" next to a small green icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box with a yellow background and a lock icon. It contains two input fields: "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.

# QUESTIONS?

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