Crunching the Numbers: Reviewing Your Hospital's Data

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Outpatient Quality Program Systems and Stakeholder Support

Learning Objectives

At the conclusion of the presentation, attendees will be able to:

- Summarize the proposals for the calendar year (CY) 2020 Proposed Rule for this program
- Recognize the comparisons for the web-based measures of the Outpatient Quality Reporting (OQR) and Ambulatory Surgical Center Quality Reporting (ASCQR) Programs.
- Demonstrate how to retrieve your publicly displayed data.

Proposed Rule Review

Payment Determination

Reporting requirements for a given calendar year affect your hospital's payment for the upcoming payment determination year.

Proposed Removal

The Centers for Medicare & Medicaid Services (CMS) proposed to remove OP-33: External Beam Radiotherapy for Bone Metastases beginning with the CY 2022 payment determination.

- Under Factor 8: Costs associated with the measure outweigh the benefit of its continued use
- Due to collection and reporting burden
- Because removal aligns with another CMS program
  - Concern the measure is not in line with clinical guidelines and standards

Public Comment

CMS requested comment on the potential future adoption of four patient safety measures:

- Patient Burn
- Patient Fall
- Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant
- All-Cause Hospital Transfer/Admission

Additional Comments Requested

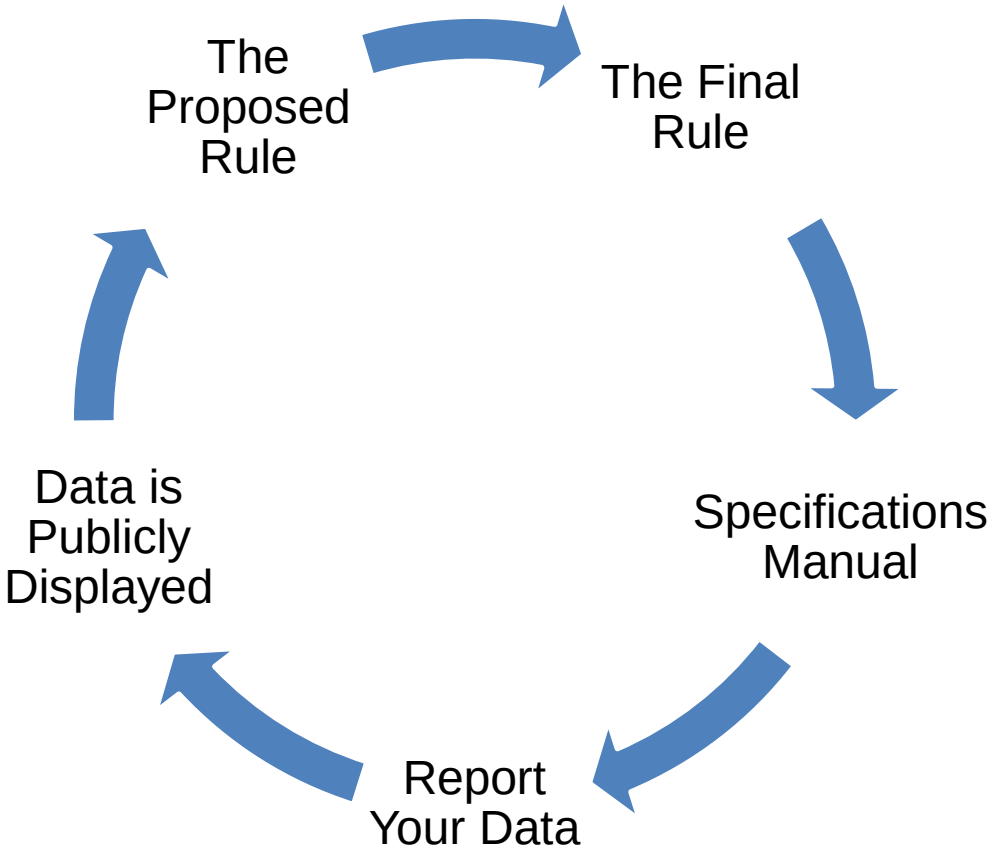
CMS also requested comment on areas for future development, including:

- Addition of outcome measures
- Elimination of process measures
- Goals:
  - Better healthcare
  - Improved health for beneficiaries
  - Alignment of quality measures across programs

Proposed Rule References

- Proposed Rule
  - PDF version, page 157 https://www.govinfo.gov/content/pkg/FR-2019-08-09/pdf/2019-16107.pdf

Tying It Together



Reporting Your Data

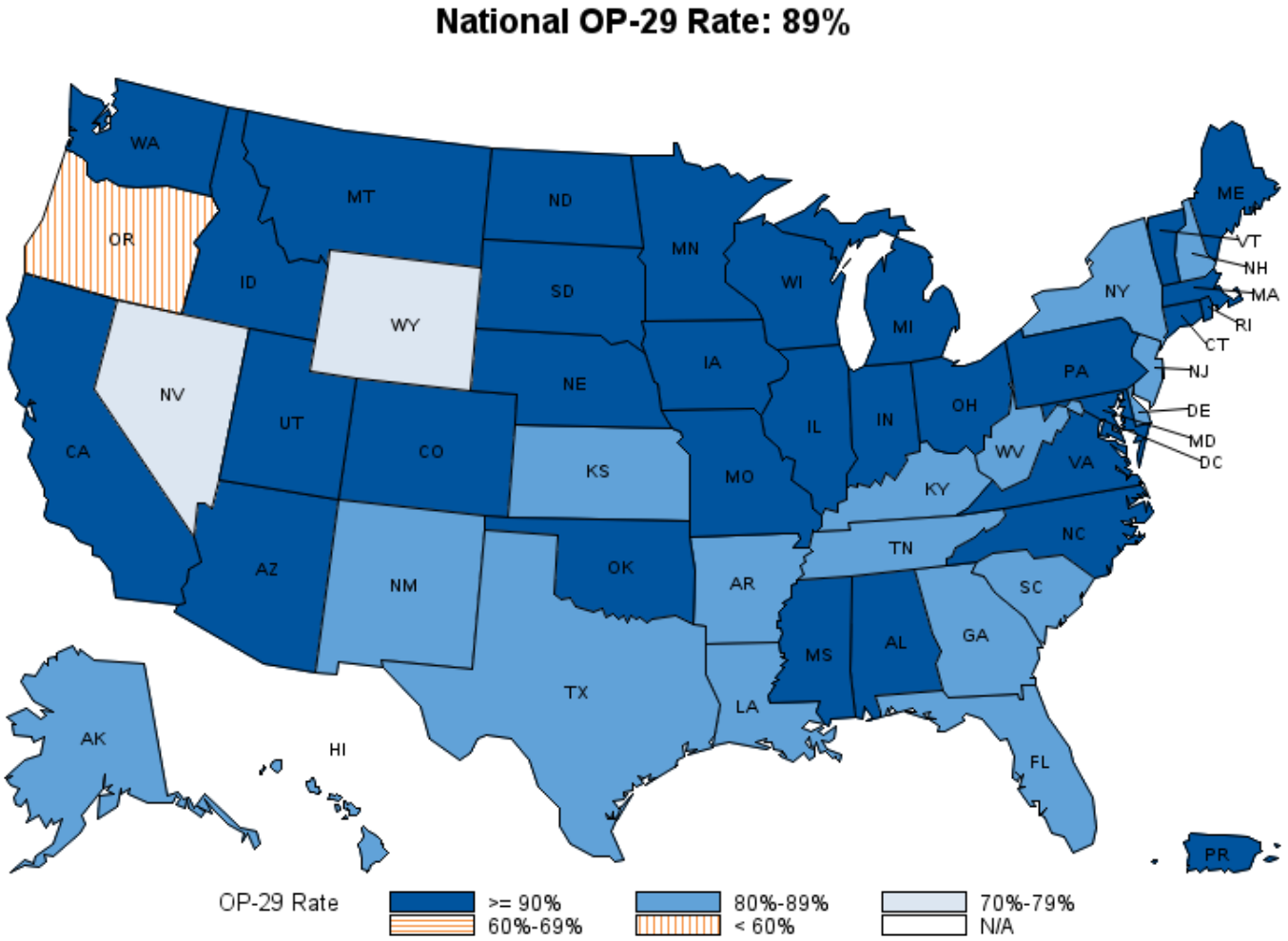
Displayed Data

Data reported for this program will be publicly displayed.

- Use your preview period
- Access your publicly-displayed data
- Compare your data to other hospitals
  - Use all available tools to evaluate, implement changes, and improve quality.

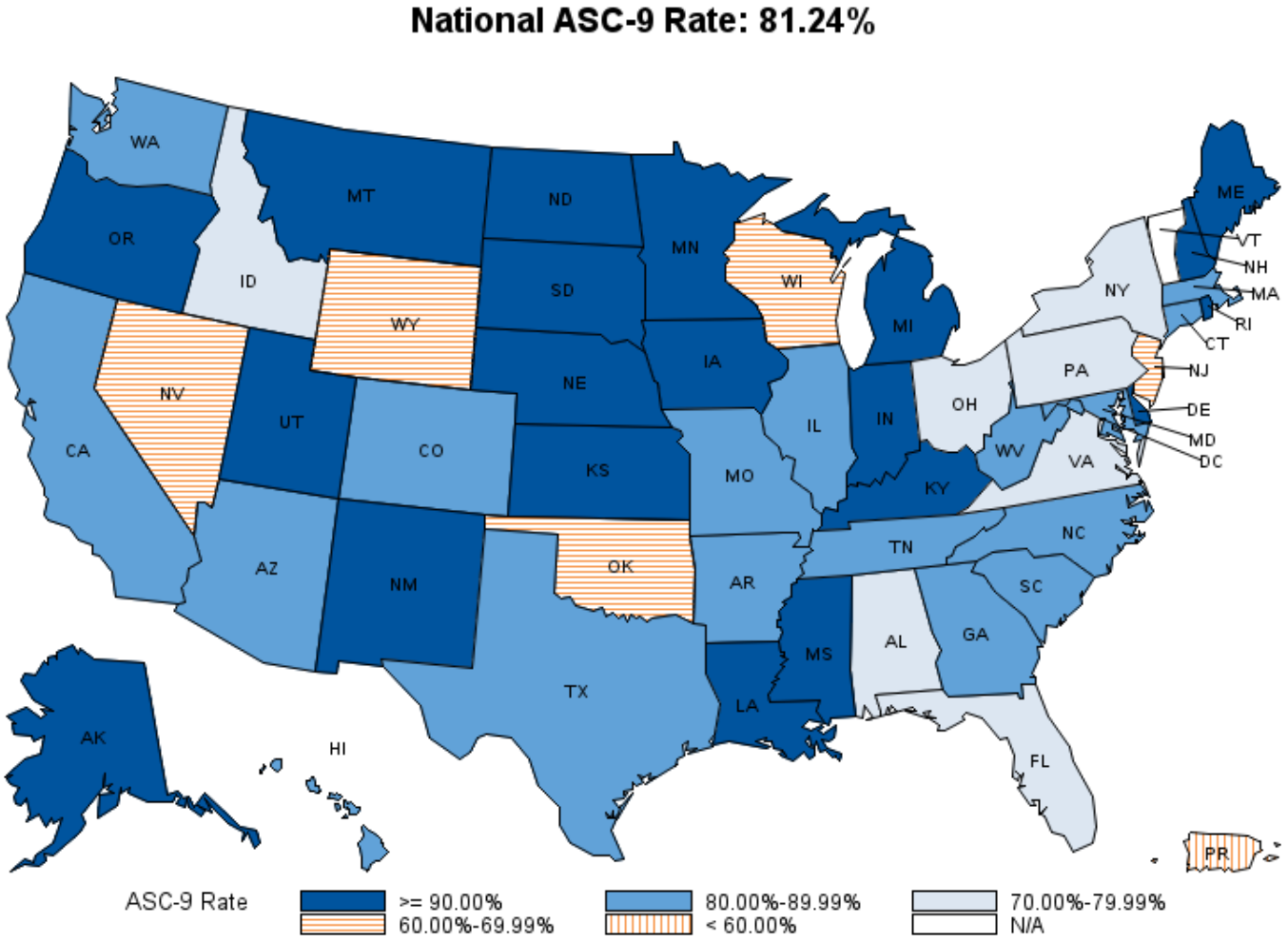
Data Review

OP-29 Rate by State for 2018



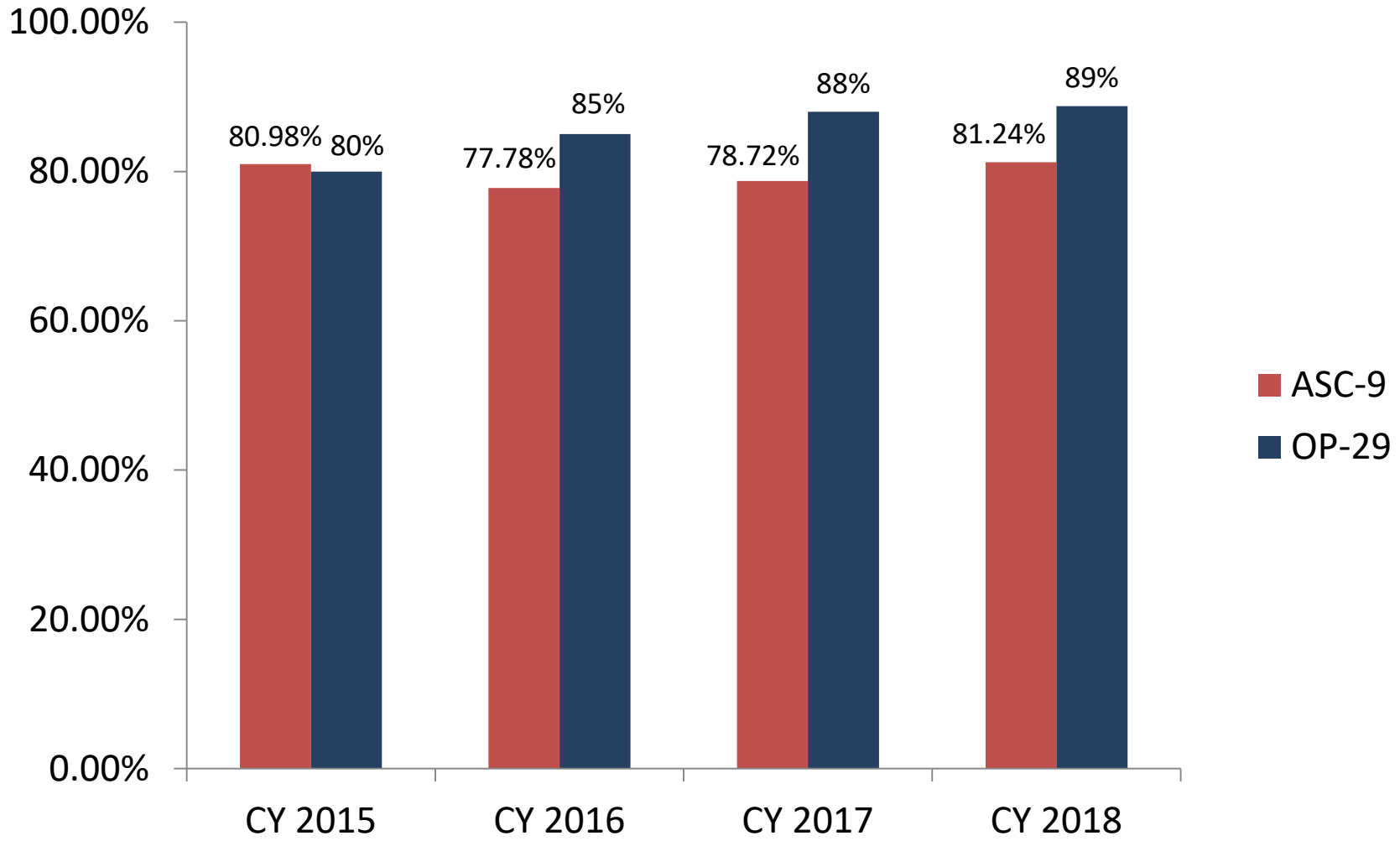
Displayed are unofficial preliminary data and may differ from data reported on Hospital Compare.

ASC-9 Rate by State for 2018



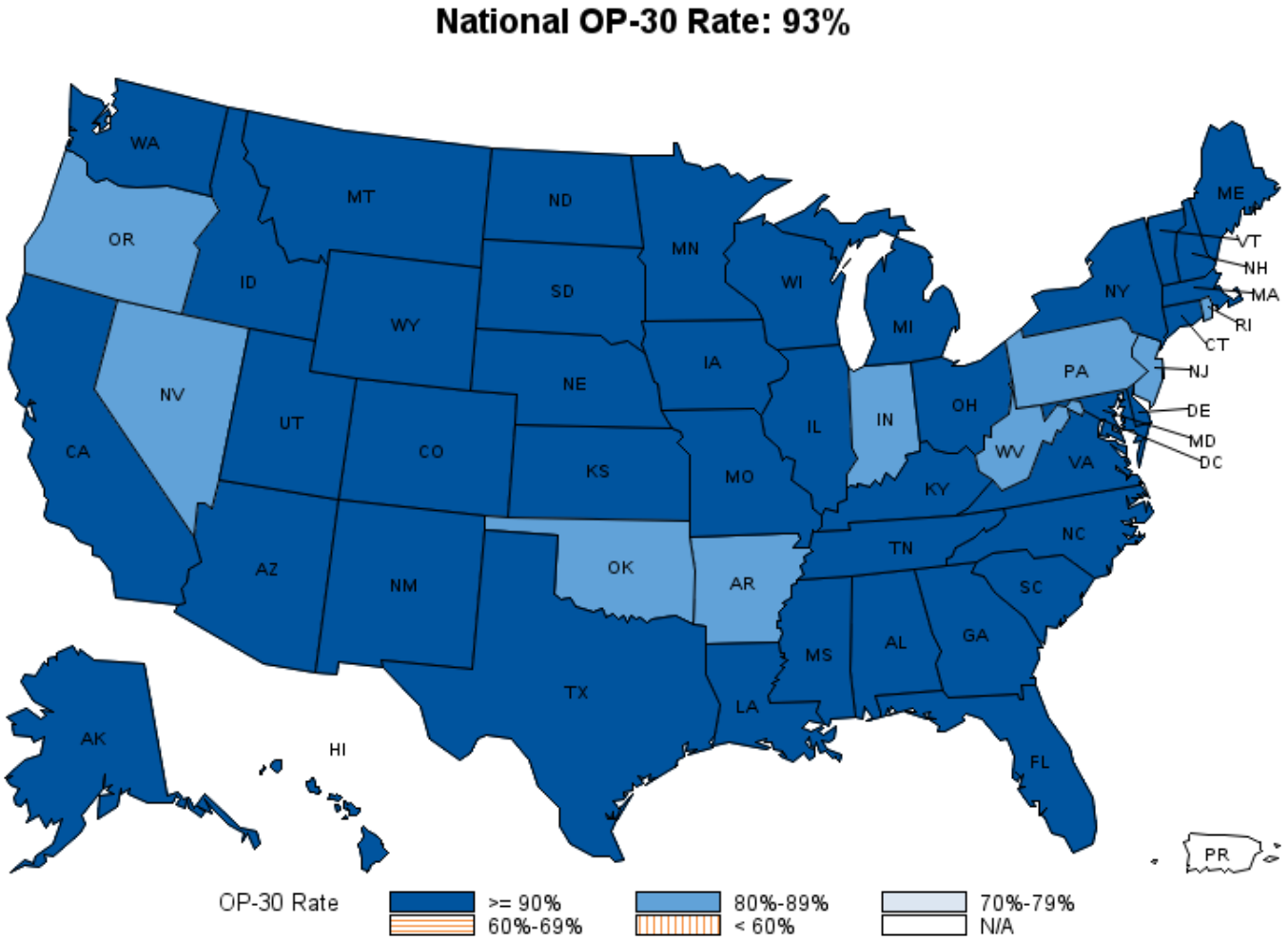
Displayed are unofficial preliminary data and may differ from data reported on Hospital Compare.

Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients Measure Comparison



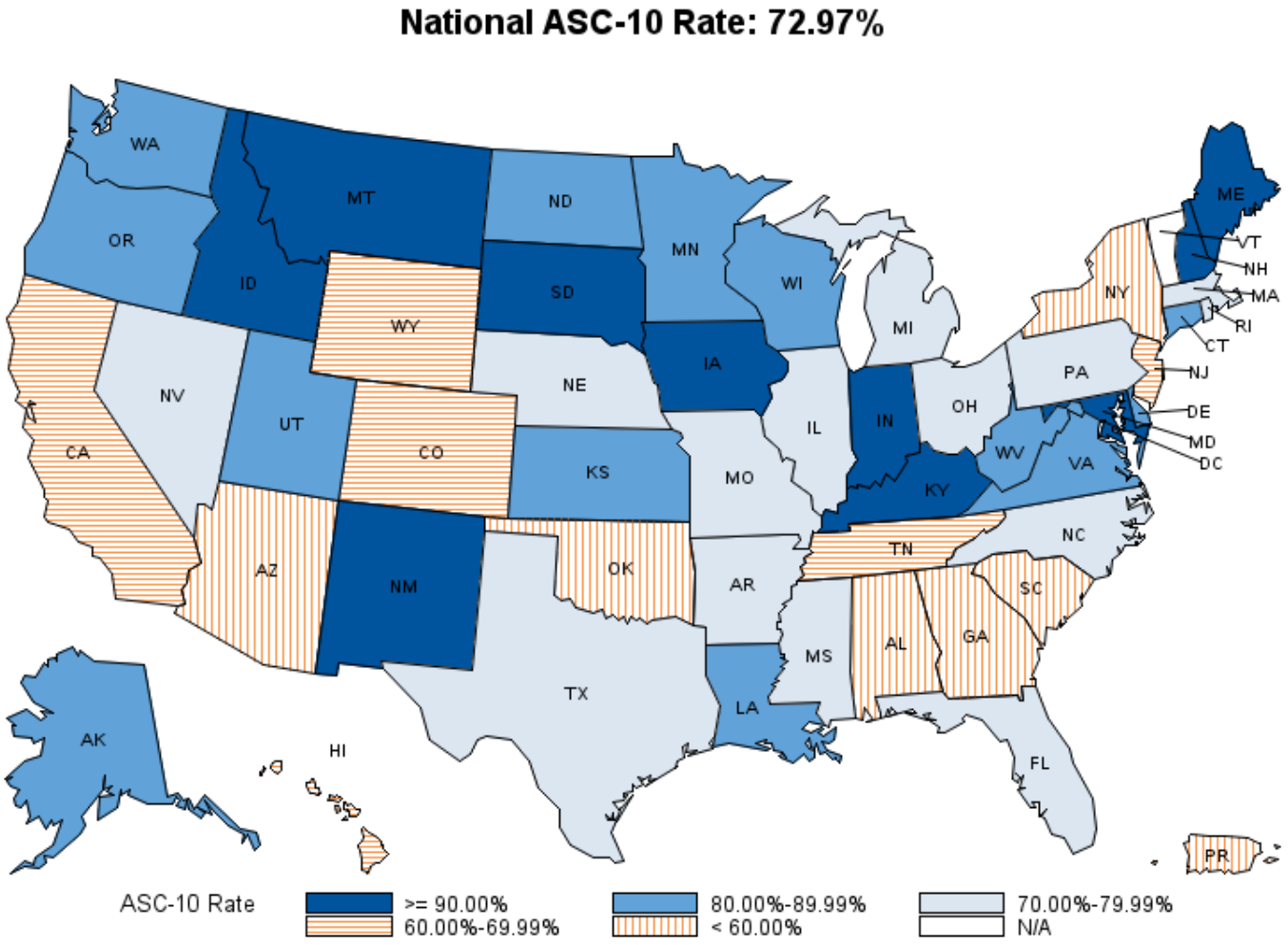
Data source: CY 2015–CY 2017 Hospital Compare; CY 2018 preliminary data

OP-30 Rate by State for 2018



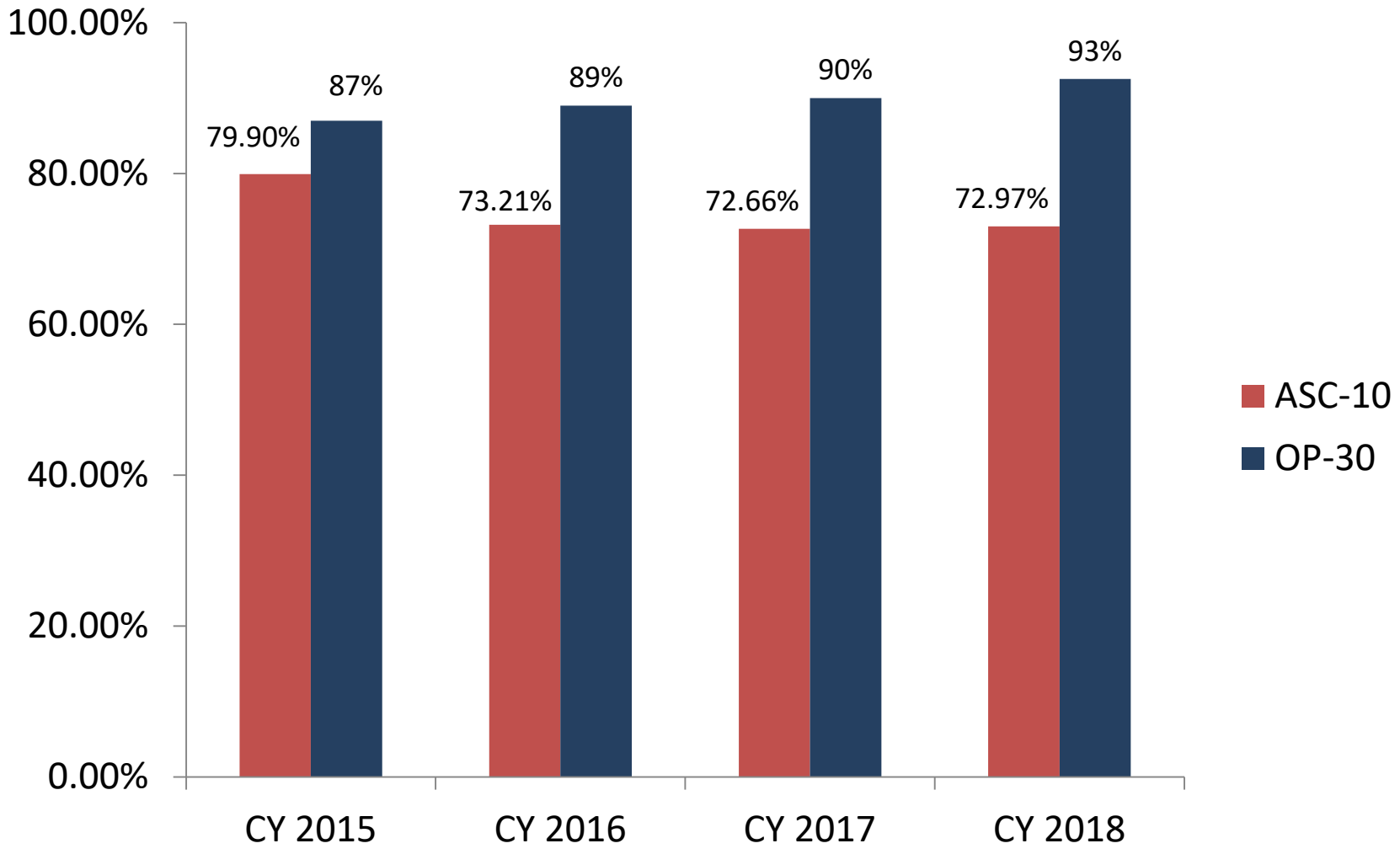
Displayed are unofficial preliminary data and may differ from data reported on Hospital Compare.

ASC-10 Rate by State for 2018



Displayed are unofficial preliminary data and may differ from data reported on Hospital Compare.

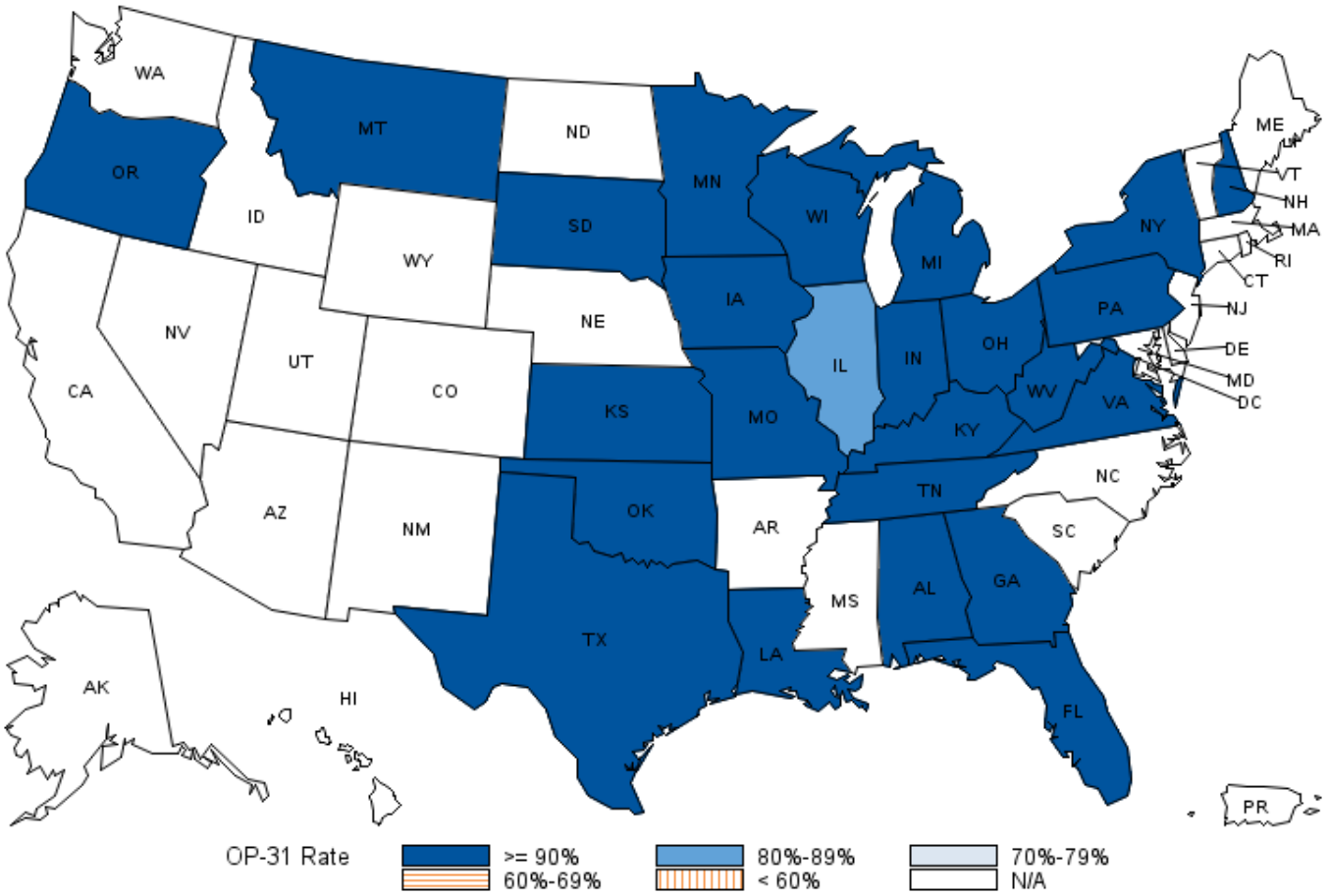
Colonoscopy Interval for Patients with a History of Adenomatous Polyps- Avoidance of Inappropriate Use Measure Comparison



Data source: CY 2015–CY 2017 Hospital Compare; CY 2018 preliminary data

OP-31 Rate by State for 2018

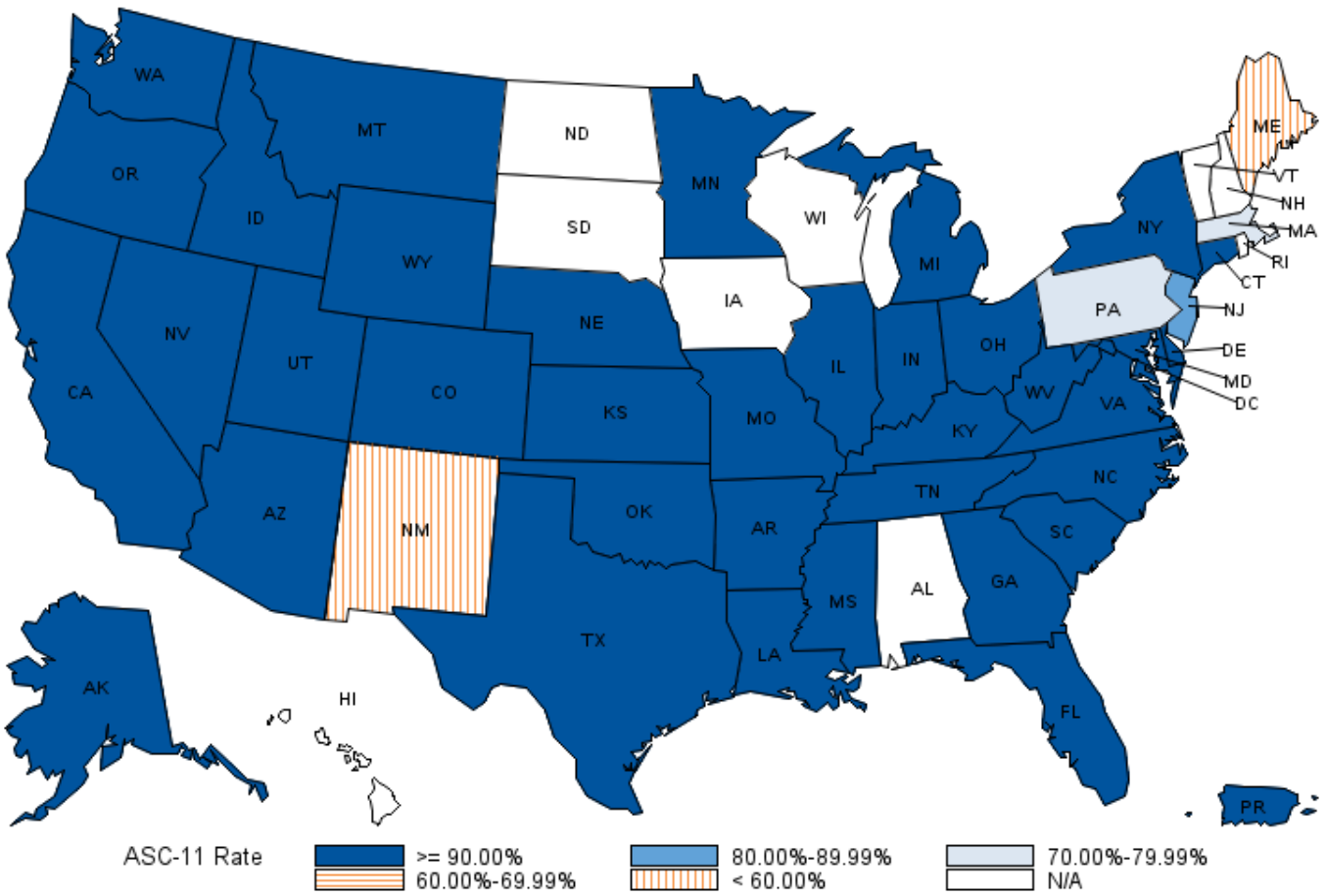
National OP-31 Rate: 98%



Displayed are unofficial preliminary data and may differ from data reported on Hospital Compare.

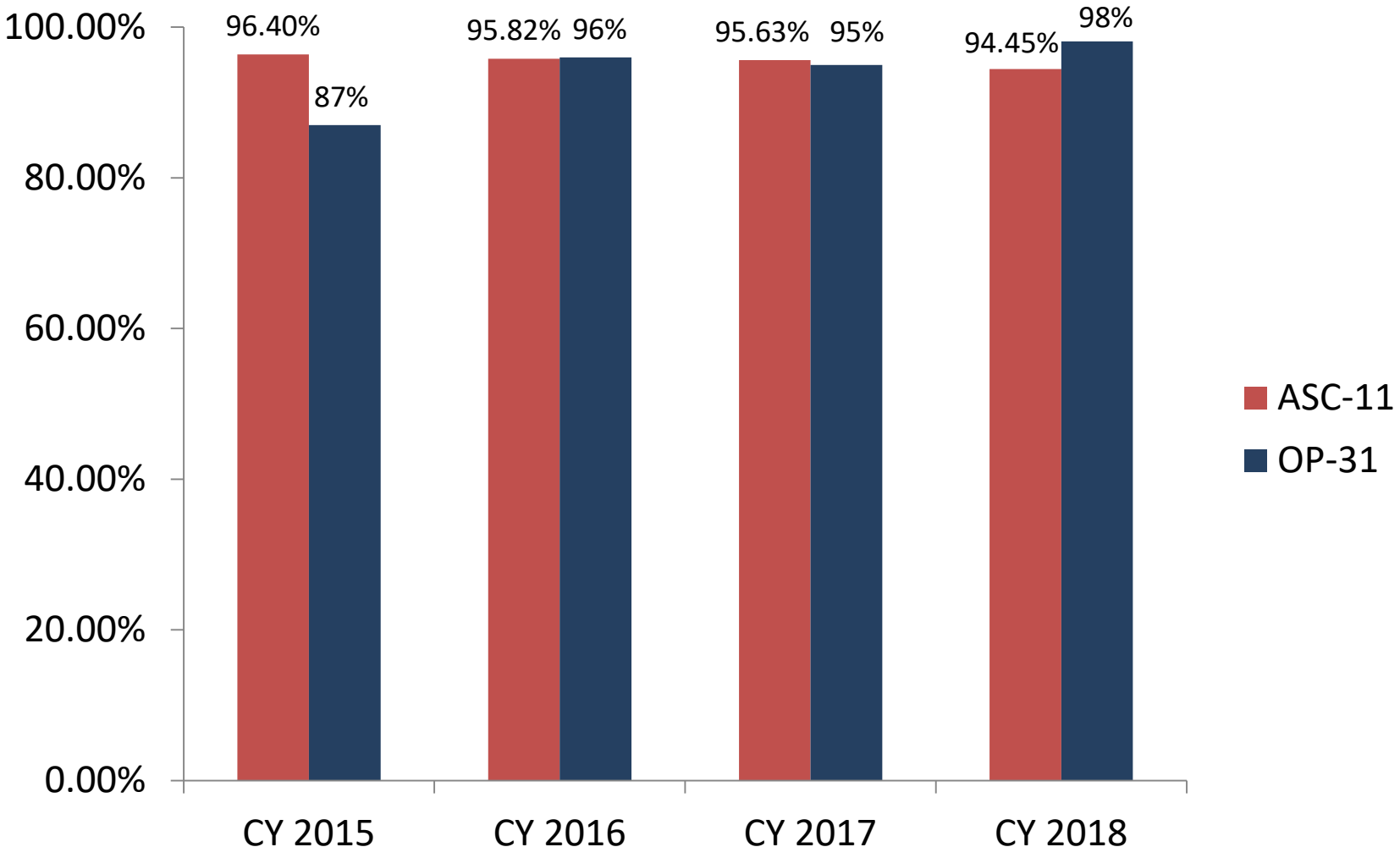
ASC-11 Rate by State for 2018

National ASC-11 Rate: 94.45%



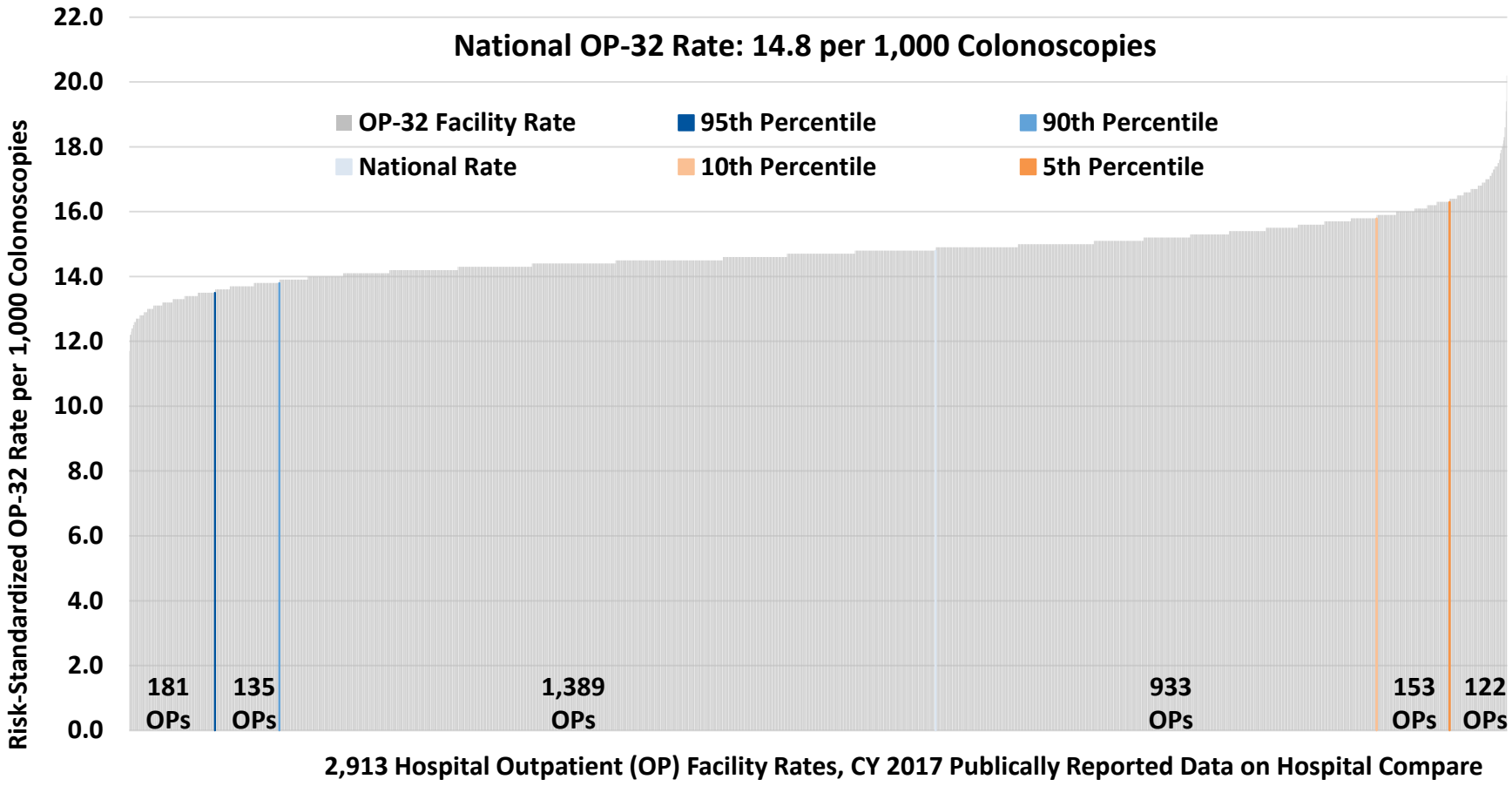
Displayed are unofficial preliminary data and may differ from data reported on Hospital Compare.

Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary) Measure Comparison



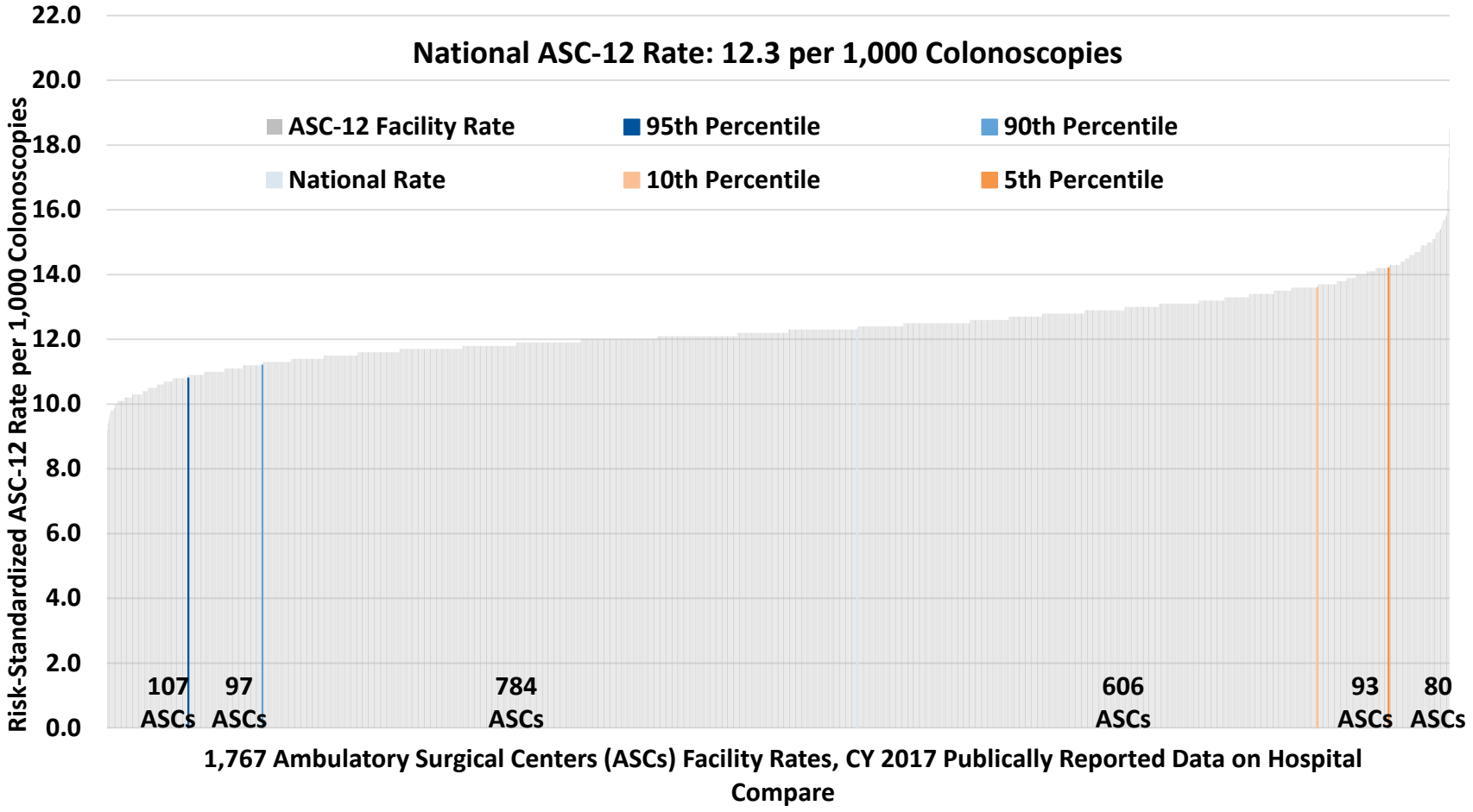
Data source: CY 2015–CY 2017 Hospital Compare; CY 2018 preliminary data

OP-32 Rates for 2017



Footnotes: 667 OPs have a footnote (1): The number of cases/patients is too few to report. 1,188 OPs have a footnote (5): Results are not available for this reporting period. 33 OPs have a footnote (7): No cases met the criteria for this measure.

ASC-12 Rates for 2017



Footnotes: 240 ASCs have a footnote (1): The number of cases/patients is too few to report. 3,227 ASCs have a footnote (5): Results are not available for this reporting period. 9 ASCs have a footnote (7): No cases met the criteria for this measure.

Hospital Compare

Locating Your Data

https://www.medicare.gov/hospitalcompare/search.html

Medicare.gov | Hospital Compare

The Official U.S. Government Site for Medicare

Hospital Compare Home | About Hospital Compare | About the data | Resources | Help

Home

+ Share

You can now view Department of Defense and Veterans Health Administration hospital performance data through the search function.

Find a hospital

A field with an asterisk (*) is required.

* **Location**

Example: 45802 **or** Lima, OH **or** Ohio

33604

Hospital name (optional)

ABC Hospital

Search

Spotlight

Tools and Tips

Additional Information

Your Facility

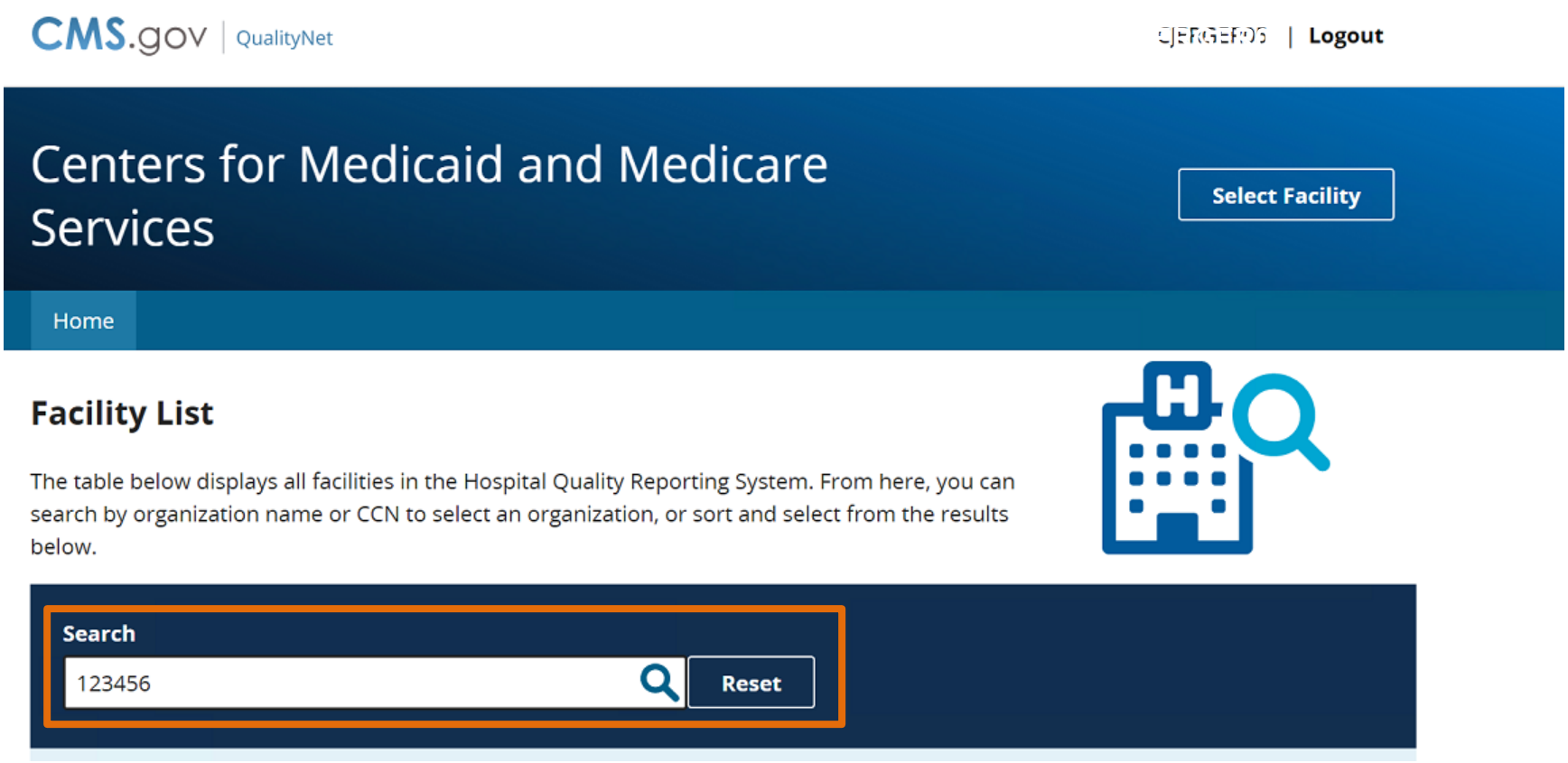
Next Generation

This new interface:

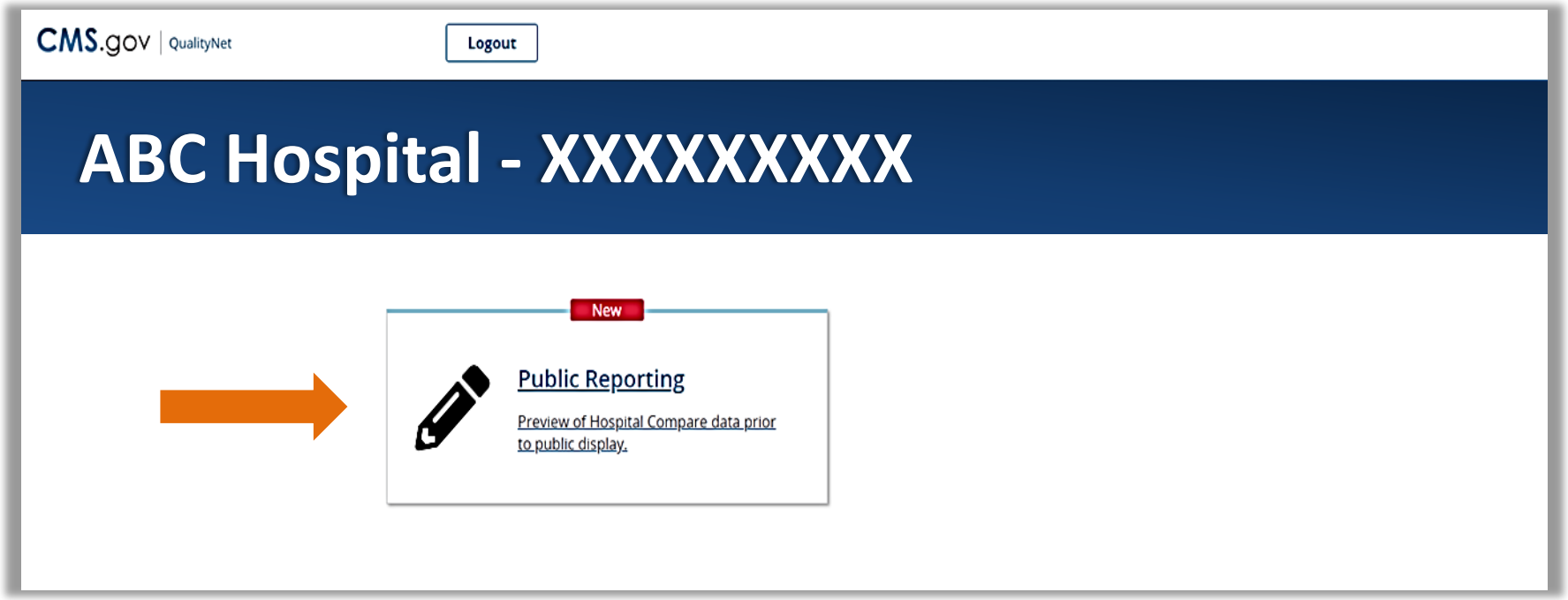
- Provides a universal platform across multiple programs
- Is consistent across programs
- Aligns with Hospital Compare

Select: Next Generation

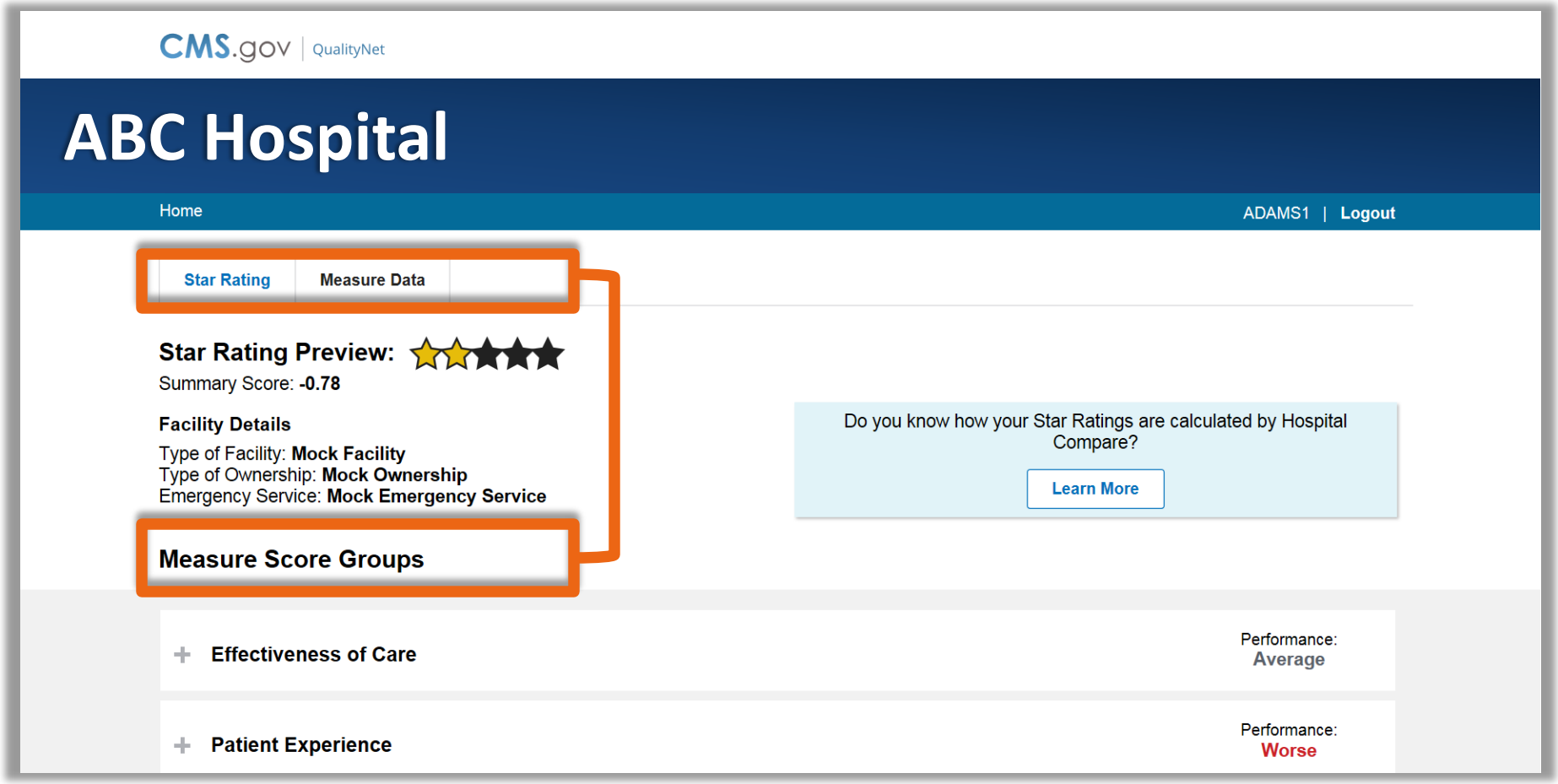
Select Your Hospital



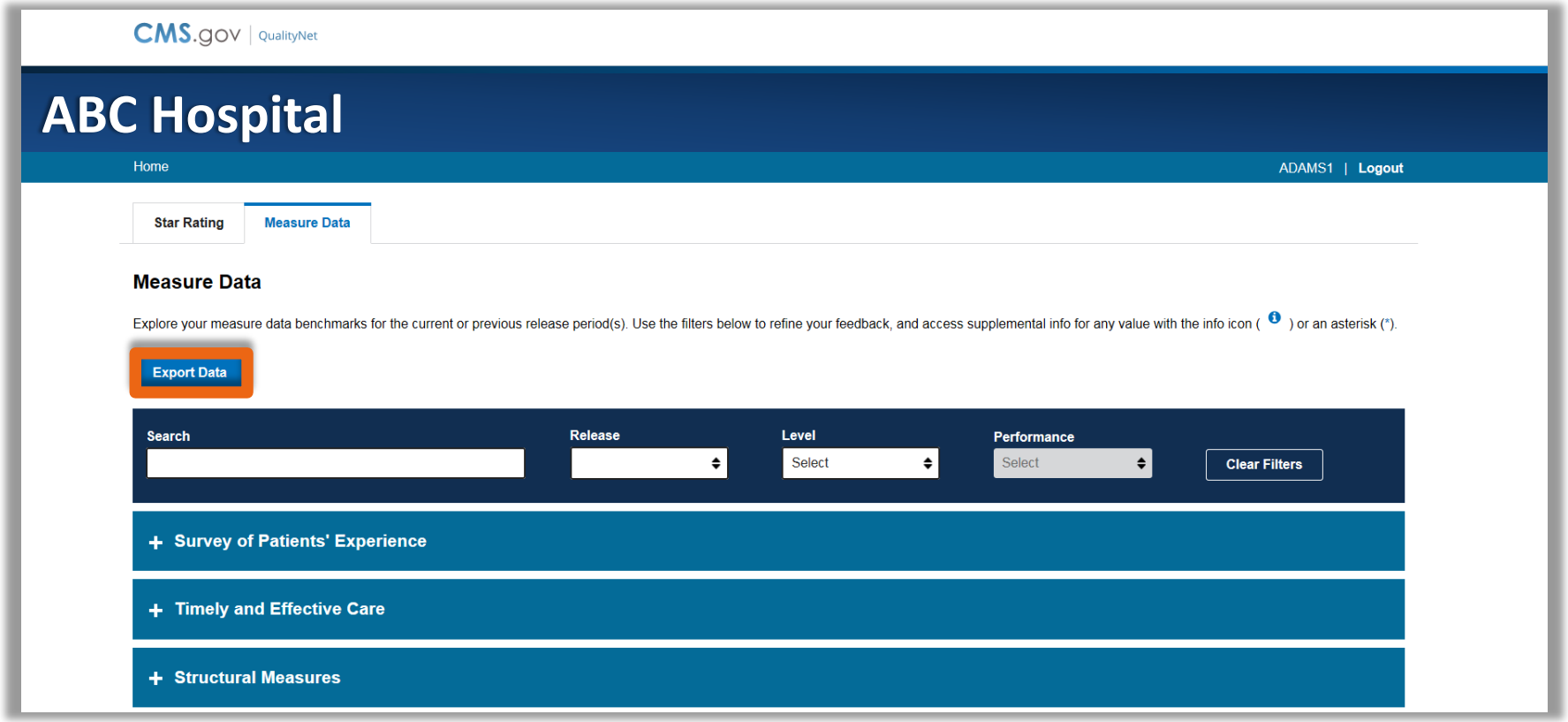
Choose Public Reporting



Landing Page



Measure Page Overview



Summary

- Evaluate your preview report
- Access your publicly displayed data
- Compare your data to other hospitals
  - Use available tools to evaluate, implement changes, and improve quality
- Continue on your successful path

Questions

Thank You for Participating!

Please contact the Outpatient Quality Program Systems and Stakeholder Support team if you have any questions:

- Submit questions online through the QualityNet Question & Answer Tool at www.qualitynet.org

Or

- Call directly at 866.800.8756.

Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- 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
- Board of Registered Nursing (Provider #16578)
  - It is your responsibility to submit this form to your accrediting body for credit.

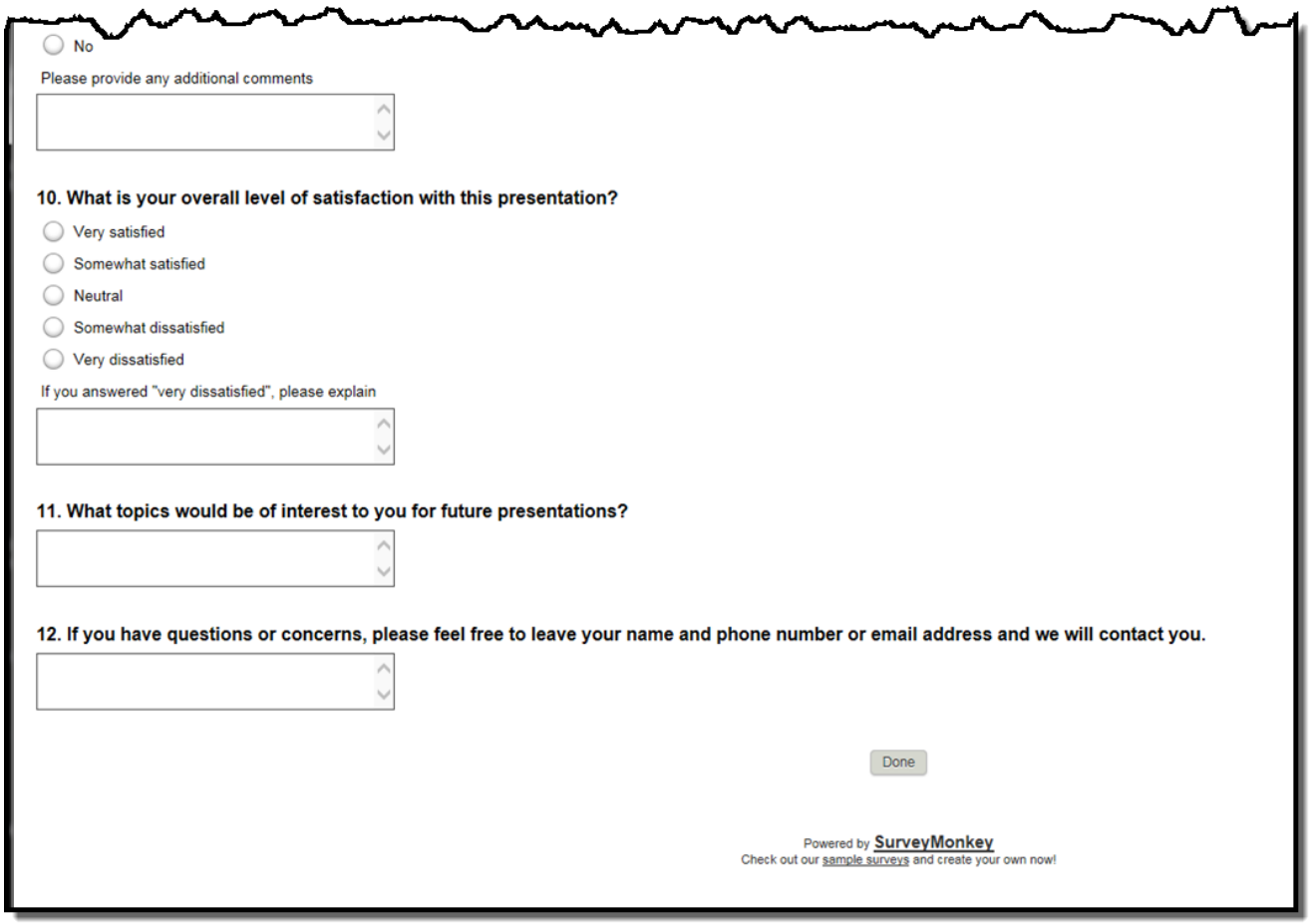
CE Credit Process

- Complete the ReadyTalk® survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “Done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
  - This is separate from registering for the webinar. If you have not registered at the Learning Management Center, you will **not** receive your certificate.
  - Please use your **personal** email so you can receive your certificate.
  - Healthcare facilities have firewalls that block our certificates.

CE Certificate Problems?

- If you do not immediately receive a response to the email you used to register in the Learning Management Center, a firewall is blocking the survey link.
- Please go back to the New User link and register your personal email account.
- If you continue to have problems, please contact Artrina Sturges at asturges@hsag.com.

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

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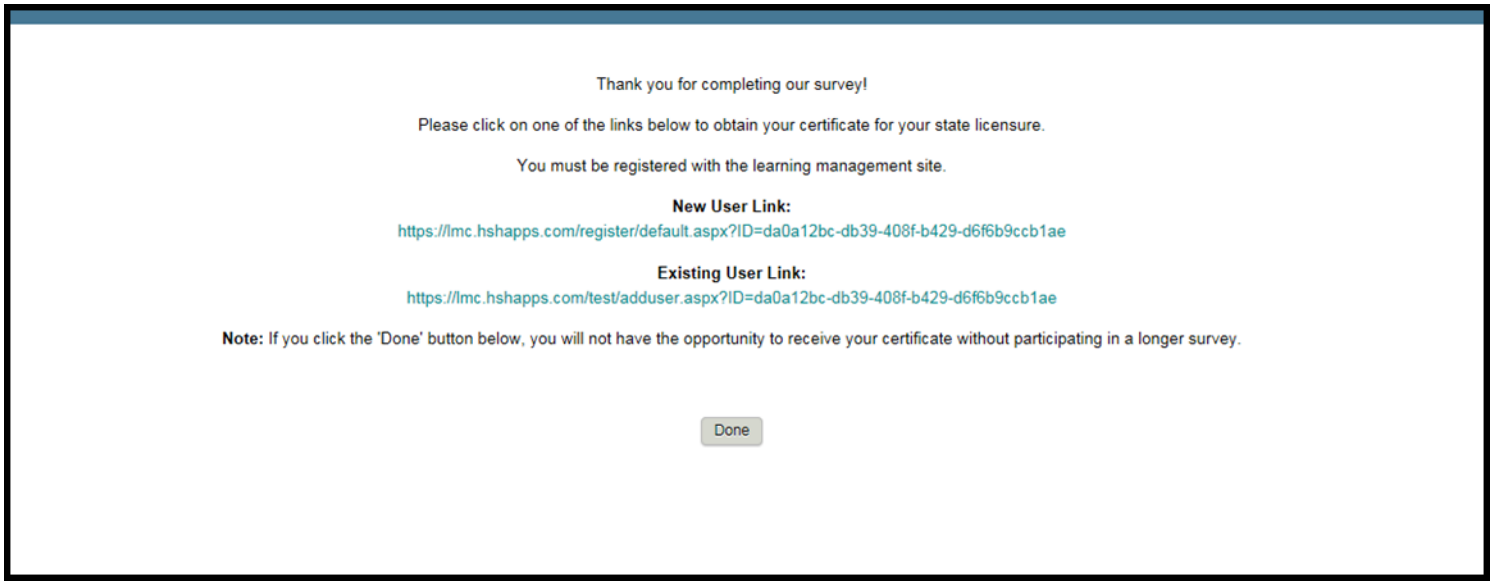
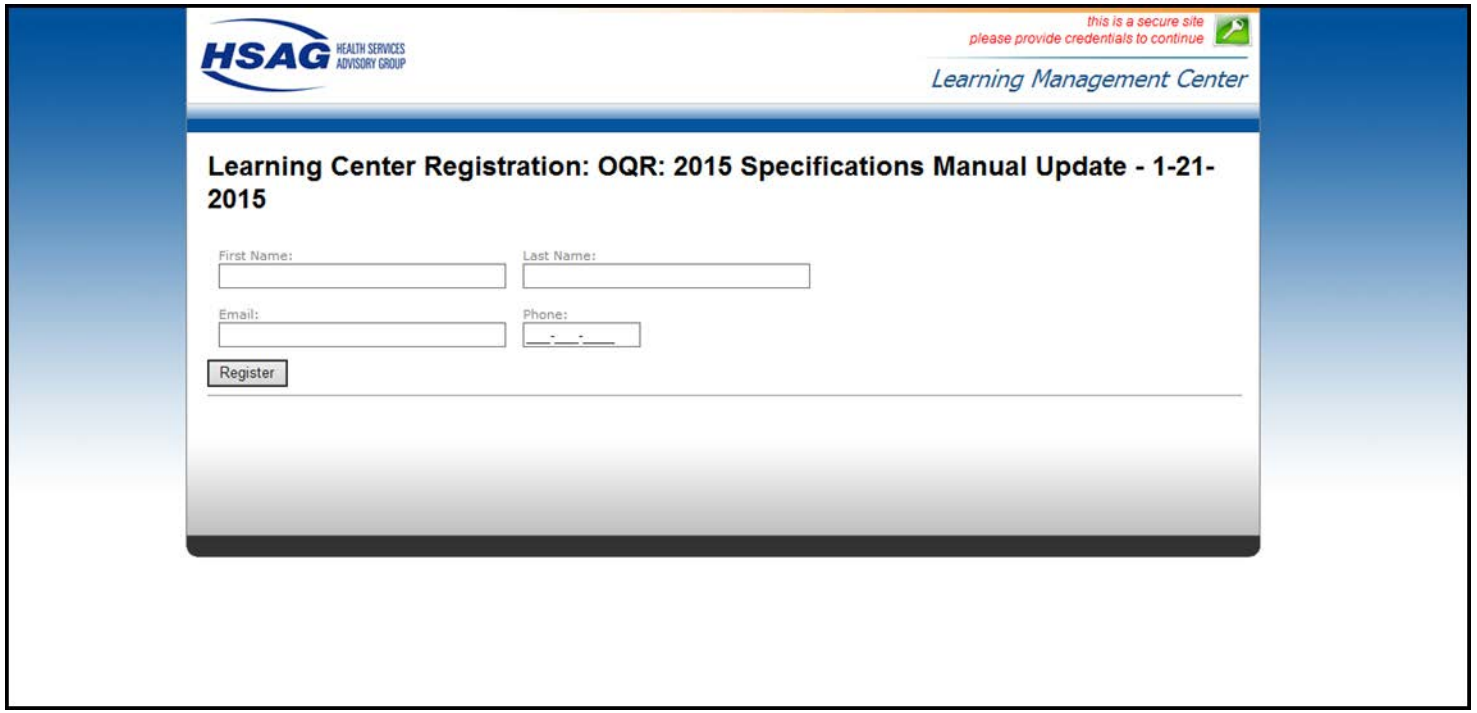
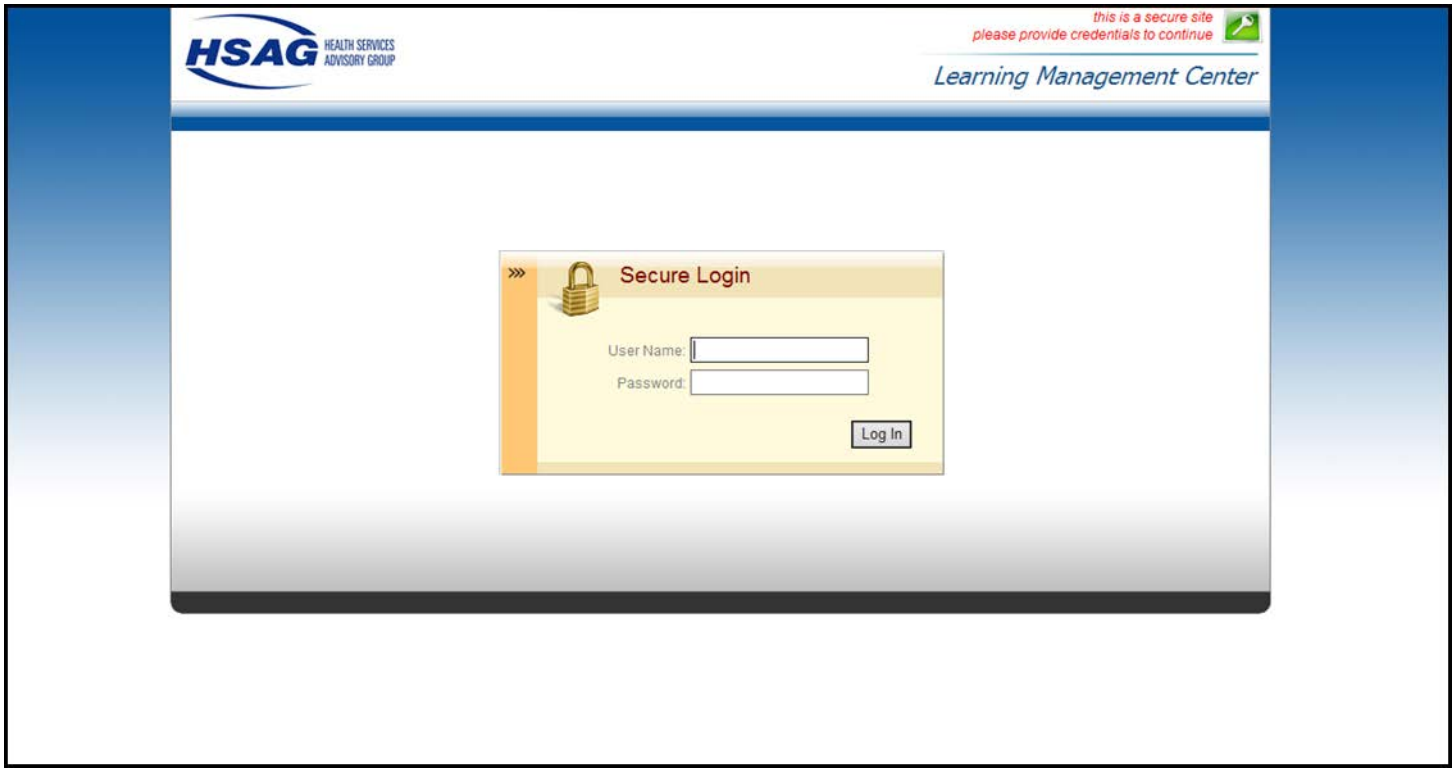
CE Credit Process



CE Credit Process: New User



CE Credit Process: Existing User



References

- Slides 25, 26: https://www.medicare.gov/hospitalcompare/search.html. Accessed on August 23, 2019.
- Slides 28-32: https://www.qualitynet.org/. Accessed on August 23, 2019.

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