July 2020 Release

Preview Period: May 4 through June 3, 2020

Inpatient Public Reporting Preview Quick Reference Guide

Detailed information for measures included in the Preview UI may be found in the inpatient help guide on QualityNet. For those hospitals eligible to withhold data, the Inpatient Hospital Compare Request for Withholding Data from Public Reporting Form must be received by the Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor no later than June 3, 2020.

Preview User Interface (UI) Access

**Preview Period**
Preview data will be available to participating inpatient facilities via the QualityNet Secure Portal from May 4–June 3, 2020.

**Access Preview Data**
1. Navigate to the QualityNet website.
2. Select Log into QualityNet Secure Portal.
3. From the Choose Your QualityNet Destination dashboard, select Hospital Quality Reporting. Then, select Let’s Go.
5. Read the Terms and Conditions statement, and select I Accept to proceed.
6. You will be directed to the My Tasks page. Select OK on the pop-up statement to proceed.
7. On the My Tasks page, select View the New Hospital Quality Reporting card in the top-right corner of the page.
8. The page will direct you to the landing page. Select Public Reporting.
9. The page will refresh, and the data will be available to preview.

**Preview Content**

**Overall Hospital Quality Star Rating**
Please see the Help Guide for details.

**Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey**
Results reflect Q4 2018–Q3 2019 discharges.

- Composite 4: Pain communication and the associated individual questions are displayed only on the preview UI and PDF; they are not displayed on Hospital Compare or in the downloadable database.
- Individual questions from the HCAHPS composite measures are provided for preview and are available in the downloadable database on Hospital Compare; they are not displayed on Hospital Compare.
- HCAHPS scores based on fewer than 25 completed surveys will display on the Preview with Footnote 1; however, the scores will not be reported on Hospital Compare.

**Timely and Effective Care Measures**
- SEP-1 and PC-01 measure results include Q4 2018–Q3 2019.
  - Severe Sepsis and Septic Shock 3-hour and 6-hour bundle data are provided for Q1 2019–Q3 2019. Data will be in a downloadable database on Hospital Compare.
- ED rates include Q4 2018–Q3 2019 discharges unless otherwise specified.
  - The Emergency Department Volume (EDV) measure is based on the denominator used for Hospital Outpatient Quality Reporting (OQR) Program measure OP-22 for calendar year 2018 data.
  - ED-2b display the state and national average minutes based on EDV category.

**Complication and Deaths**
- 30-Day Death Rate measure results reflect Q3 2016–Q2 2019.
- CMS Patient Safety Indicators (PSI) rates include Q3 2017–Q2 2019 discharges. CMS PSI 4 and CMS PSI 90 will display on Hospital Compare. Individual components of CMS PSI 90 are available in a downloadable database.
- Surgical complications rates reflect Q2 2016–Q1 2019 discharges.

**Unplanned Hospital Visits**
- Condition-specific readmission rates reflect Q3 2016–Q2 2019 discharges.
- Hospital-wide readmission rates reflect Q3 2018–Q2 2019 discharges.
- Excess Days in Acute Care (EDAC) measure results reflect Q3 2016–Q2 2019 discharge data.

**Payment and Value of Care**
- Payment measures
  - AMI, HF, and PN payment measure results reflect Q3 2016–Q2 2019 discharges.
  - 90-day hip/knee payment measure results reflect Q2 2016–Q1 2019 discharges.
- MSPB performance scores display for Q1 2018–Q4 2018 discharges.