



Hospital Inpatient Quality Reporting (IQR) Program

Support Contractor

Navigating *Hospital Compare*

Presentation Transcript

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Bethany

Wheeler-Bunch:

Hello and welcome to the *Navigating Hospital Compare* webinar. My name is Bethany Wheeler-Bunch from the CMS Hospital Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support [Contract] Team. I will be the moderator for today's event. Before we begin, I'd like to make our first few regular announcements. This program is being recorded. A transcript of the presentation, along with the questions and answers, will be posted to the inpatient website, www.QualityReportingCenter.com, in the future. If you registered for today's event, a reminder email and the slides were sent out to your email about two hours ago. If you did not receive that email, you can download the slides at our inpatient website. Again, that's www.QualityReportingCenter.com. If you have a question as we move through the webinar, please type your question into the chat window with the slide number associated and we will answer as many questions as time allows. I would now like to introduce our speaker for today's event, Liana Bui. Liana is a Project Coordinator for the *Hospital Compare* and Public Reporting teams at the Hospital Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support [Contract] Team. Please welcome Liana. This event will provide an overview of CMS's *Hospital Compare* website, show the steps to compare hospitals using the website's features, and direct participants to other resources found on *Hospital Compare*.

By the end of today's event, participants will be able to understand the purpose of *Hospital Compare*, compare hospitals side-by-side using *Hospital Compare*, and navigate to different *Hospital Compare* pages and resources. I will now hand the presentation over to Liana. Liana, the floor is yours.

Liana Bui:

Hello, everyone. Let's get started on a little background on *Hospital Compare* and public reporting.

What is *Hospital Compare*? *Hospital Compare* was created by CMS in order to allow consumers access to new information for over 4,000

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Medicare-certified hospitals. The information that you find on *Hospital Compare* helps not only patients, but also hospitals.

The goal of the information provided on *Hospital Compare* is to help patients make decisions about where they get their healthcare. It also encourages hospitals to improve their quality of care in order to provide the best care.

Measures on *Hospital Compare*: The measures that are found on *Hospital Compare* are broken down among tabs, which are the General Information, Survey of Patients' Experience, Timely & Effective Care, Complications & Deaths, Unplanned Hospital Visits, Use of Medical Imaging, and Payment & Value of Care measures.

Hospital Compare Refreshes: *Hospital Compare* refreshes quarterly. Measures reported on *Hospital Compare* vary. Some of the measures that are reported refresh quarterly, while there are other measures that are refreshed annually. The best way to find out what was refreshed is through CMS Program Notification ListServes, which notify hospitals of the *Hospital Compare* refresh and provide a summary of the updated data. Please make sure you are signed up for those ListServes. You can sign up using the link provided on this slide.

Data Measurement Periods, Rolling Quarters, and Years: Now, let's take a look at measure groups that are reported annually and semi-annually first. Looking at this slide, you can see that healthcare personnel influenza vaccination [measure] is refreshed typically in October. In the February refresh are the Hospital Value-Based Purchasing Program, Hospital-Acquired Condition Reduction Program, Medicare Spending Per Beneficiary, Hospital Readmission Reduction Program, structural measures, inpatient psychiatric facilities, PPS-Exempt Cancer Hospital, Oncology Care Measures, PPS-Exempt Cancer Hospital External Beam Radiation Therapy measures, and Star Ratings. In the July refresh are the outcomes claims-based measures, payment measures, Patient Safety Indicators, and Star Ratings refresh. Measures that are refreshed quarterly are chart-abstracted/web-based data, healthcare-associated infections,

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Hospital Consumer Assessment of Healthcare Providers and Systems, or HCAHPS, PPS-exempt Cancer Hospitals, Cancer-Specific Treatment measures, and PPS-exempt Cancer [Hospital] HCAHPS measures. This slide also shows a chart of how rolling quarters work. *Hospital Compare* shows an aggregate of four rolling quarters of data, meaning that a new quarter of data [are] added and the oldest quarter of data removed.

Public Reporting Process: The public reporting process is broken down into three steps shown on this slide. The first step: Data collection and submission. CMS collects data and claims submitted by the hospital or the hospital vendor. For example, hospitals abstracted patient-level data, according to the specifications for the sepsis measure. Hospitals then have about four and a half months from the last day of the quarter to submit the collected sepsis data to CMS. Step two: Hospitals preview data. Hospitals then have an opportunity to preview the measure results calculated by CMS. Step three: Data published on *Hospital Compare*. Those measure results will then be publicly displayed on the *Hospital Compare* website. For more information on the new user interface for previewing public reporting data, check out the *Public Reporting: Exploring the Next Generation of Preview Reports* webinar found on the link on this slide.

Now that we have a little background on *Hospital Compare* and public reporting, let's take a look at *Hospital Compare* and begin comparing hospitals.

Hospital Compare: Let's get started. This is the home page of *Hospital Compare*. Starting with the home page, you can see the different tabs at the top, which we will be going over today. The tabs are About Hospital Compare, About the data, Resources, and Help. At the top, there's also a hyperlink to the *Hospital Compare* website.

Another great source on the home page, if you scroll down, will be the section at the bottom titled Spotlight, Tools and Tips, and Additional Information.

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Find a Hospital: Now let's get started on how to compare hospitals. The first step would be to conduct a search. You can see it here in the red square surrounding the search box. In order to search and find details on a hospital, you have to enter information in the location code which can be a zip code, city, or state, or, if you would like to further your search, you can enter a full or partial hospital name, this being optional. After entering the required fields, select the Search button to get your hospital search results.

Search Results: Here is what a search result page will look like with the amount of hospitals that are within your location perimeter that you previously set. Here in the list of results you will see basic information regarding the hospital such as the hospital's information, overall rating, distance from the location point you gave, if they have emergency services or not, and the hospital type.

Sort Hospitals: You are able to sort through your hospital search results. For example, you have 14 results. You want the first one to be the closest distance from the location point you gave. You would click on the up arrow below the distance, and it will reorder the list of 14 search results to show the closest hospital to you first.

Filter Hospitals: Navigating through the result page can be overwhelming, especially if there is a large amount of search results, but *Hospital Compare* offers filtering. To modify search results using the panel on the right of the page, currently the search results will display as a list. In order to see the search results on a map, you will have to select the Go to Map View icon on the upper right of the search result page. You can modify your search with the location or filter it more by overall ratings, hospital type, or if a hospital has an emergency service or not.

Add to Compare: Once you have narrowed down the search results to a couple of hospitals you would like to compare, you will select the Add to Compare button that is located below the hospital name.

Compare Now: *Hospital Compare* allows you to compare up to three hospitals at a time. This feature allows you to compare your selection side-

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by-side against various measures of quality. Alternatively, you can select any hospital within the search results, and it will navigate you directly to that hospital's profile where you can see all the information and data for that hospital. After you have selected the hospitals that you would like to compare, you would choose the Compare Now button located at the top of the search result page.

Navigation Tab: Following this, you will be directed to the compare page. The compare page contains information that is grouped into different tabs such as General Information, Survey of patients' experiences, Timely & effective care, Complications & death, Unplanned hospital visits, Use of medical imaging, and Payment & value of care. Here is an example of what you will see for hospital information that is laid out in a table format with a side-by-side comparison of the three hospitals.

Comparing Hospitals: As you navigate your way through the different tabs when comparing hospitals, one thing that I would like to mention is that the hospital information that is displayed on this slide, such as the hospital name and address along with the overall ratings, will carry through the different tabs and be located at the top of each of the data tables so you're able to easily reference it when comparing hospitals. Also, please take note of the eye icon. We will get to that on the next slide.

General Information: On this slide, you will see what's it like to compare hospitals and how the data will display through a side-by-side comparison. Remember on the last slide when I mentioned the eye icon? Well, it is a handy resource. So, if you hover your mouse over the eye icon, a box will appear which contains contextual information.

Survey of Patients' Experiences: On this slide, you will see the Survey of Patients' Experiences tab. When comparing hospitals at the top, it shows a little bit of background information on the HCAHPS data which will be displayed on the following slide.

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Survey of Patients' Experiences: On this slide, you will see the hospital information laid out in a table format with a side-by-side comparison of the three hospitals along with their stay and national average.

Hospital Compare allows you to view the data either as a table or as a graph by selecting the Show Graph button. Let's see how this data displays as a graph, shall we?

Survey of Patients' Experiences [Show Graphs]: Like we mentioned on the last slide, by selecting the Show Graph button, the data will convert to a graph. For example, the data were converted into a bar graph. On this slide, the graph shows similarly to how it was displayed as a table on the previous slide with the hospitals side-by-side also showing the state and national average. *Hospital Compare* displays data in different formats visually. You will be able to see different types of graphs and, oftentimes, there will be more information on how to interpret them visually.

Survey of Patients' Experiences: View More Details: Looking at the table on this slide, you can see that they are answering one of the questions in the Survey of Patients' Experiences. The question is: Would patient recommend the hospital to their friends and family? Looking at Hospital Number 1 in the first column, patients who reported "Yes" they would definitely recommend the hospital, there was 79 percent. Patients who reported "Yes" they would probably recommend the hospital is 18 percent. Patients who reported "No" they would probably not or definitely not recommend the hospital was three percent. Underneath the hospital rates are the state averages along with the national averages. Below that, you can see in a second column "survey response rate," meaning, of those patients asked to take the survey, 27 percent agreed. The 27 percent is the number of completed surveys. In this case, it is 3,085 patients.

Complications & Deaths Tab: As you familiarize yourself a little bit more on comparing hospitals, you will notice that each of the tabs contains information on the measure. On the current slide, you will see under

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Complications & deaths that there are three accordions, Surgical complications, Infections, and 30-day death rates. Let's click on the Infection accordion and explore some more.

By selecting on the accordion for Infections underneath Complications & deaths, you will open up the accordion, which provides information along with resources to other links. One point that I wanted to show for infections was the graph. Let's see what happens when we click on Show Graphs.

Before we take a look at the infections graph, let's take a look at how to read this graph. To better explain this slide, let me provide a little bit of background. For some measures, such as the CDC healthcare-associated infection measures and claims-based outcome measures, CMS provides the option to view the confidence interval for the measures. CMS uses the hospital's confidence interval in addition to the rate or SIR to determine the performance category of better, worse, and no different than the nation. Those performance categories are indicated on the color of the bar, green meaning better than, yellow indicating no different, and red representing worse than. Now, let's take a look at that data.

Complications & Deaths: Infections: Graph: Looking at the graph on this slide, we can see from the background learned on the previous slide that Hospital 1 and 2 are no different from the national result as indicated by their yellow bar color. Looking at Hospital Number 3, we can see that it is green, which indicates better than. Now, let's take a look at that data.

Complications & Deaths: Infections: View More Details: Earlier when we were looking at the accordion which contained Infections, we selected the button Show Graphs. Now, when we select the button View More Details, by clicking on that button, a table will appear containing the measure details for those Complications & Deaths Infections, listing it so you're able to compare the three hospitals.

Now that we've taken a look at how to compare hospitals on *Hospital Compare*, let's take a look at a few resources and helpful tips.

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Measure Resources: Under each of the tabs shown on *Hospital Compare*, there are accordions and within the accordions there are descriptions of the quality measure presented with a list of resources that you can explore for more information. In this slide, we show “Surgical complications.”

Printing Information: As you make your way through *Hospital Compare* pages, the information you find can be printed for a reference. To do so, in the top right corner is a “Print all information” button. By clicking on this link, you will be able to have printable web pages that appear. This page will summarize all the different tabs when comparing hospitals.

Now that we know a bit more about how to compare hospitals, let’s move on to the About Hospital Compare tab on the home screen of *Hospital Compare*. In the About Hospital Compare pages, you will be given a snapshot of the information that you will find on the *Hospital Compare* site along with explanations about the measure of quality and why they are important.

Why is it important? The summary of the different measures on the About Hospital Compare page briefly go over measures found in the different tabs and accordions. Looking at the screen now, we are looking under “Timely and effective care” tabs under the accordion of sepsis care where we will get a brief snapshot of the quality measure and why it is important. It also lets us know when we are looking at the data on the *Hospital Compare* page for a hospital that higher percentages are better for this measure.

About the Data Tab: Next, we will take a look at the “About the data” tab on the *Hospital Compare* home page. You might notice that the tab is similarly formatted as the About Hospital Compare tab. The pages found within the data section will provide more technical details regarding the data such as the data source methodology for those quality measures posted on *Hospital Compare*, which include links that will lead to further information. The page shown on the screen is a very important resource. Here you will be able to find information such as measure identifiers, technical measure name, measure name as posted on *Hospital Compare*,

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the update frequency, and the current collection period for all the data that is shown on *Hospital Compare*.

About the Data Page: Here we are looking at 30-day death rates in the “About the data” section of *Hospital Compare*. Here you are able to look at more detailed information regarding a quality measure with a drop-down accordion. In this screenshot, we are able to see which patients are included in the accordion, which is open, and which additional information is provided for that section. This section of *Hospital Compare* is very useful when you are looking at data from hospitals and you want to know more technical details for all the quality measures displayed. Let’s move on and take a look at the Resources tab on *Hospital Compare*.

Resources Tab: In the Resource tab, you will find pages that will help you with information such as this slide, which contains a glossary which then defines the different terms that you might see on *Hospital Compare* along with their definition.

Updating Your Information on *Hospital Compare*: This is an important tool when reviewing your own hospital’s or facility’s administrative data to make sure that the data [are] up-to-date. Please make sure that if any updates need to be made take a look at the Resources page. It will put you in contact with the correct sources that can update your administrative data on *Hospital Compare*.

Help Tab: On the Help tab you will be able to walk through, again, the steps that it takes to help you find and compare hospitals as well as tips on how to print data found on *Hospital Compare* using the different browser programs.

Now, let’s take a look at how to download the data shown on *Hospital Compare*.

Resources: Download the Data: Under the Resources tab, you are able to find a link to “Download the data” which will take you data.medicare.gov. On this site, you will be able to see a downloadable data page where you

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are able to see archived *Hospital Compare* data long with the current data found on *Hospital Compare*.

Once you get to *data.medicare.gov*, you will select Hospital Compare data.

Data.medicare.gov: After you select Hospital Compare, you will be shown a list of all the measures shown on *Hospital Compare*. This data [are] the current data files of what is shown on *Hospital Compare*. You are able to search and filter through these quality measures.

Download CSV Flat Files: Once you have found the data files that you are looking for, you are able to download the data as a CSV flat file. A great tip: If you would like to reference the data measurement periods contained in each of the files, reference the measure dates file as shown on this slide.

Data Archive: At the top of the page, you will be able to see a Data Archive tab. When you select the Data Archive tab, you will be able to see *Hospital Compare* data archives. Here you will be able to find the annual files, which you can download into a zip file containing the CSV flat files.

Let's quickly take a look at additional data and Socrata tables on *Hospital Compare*.

Scrolling down the *Hospital Compare* home page, under Additional Information you will find a hyperlink to the Hospital Value-Based Purchasing Program page on *Hospital Compare*. Let's take a look at where that takes us.

Downloading a Socrata Table: On the Hospital Value-Based Purchasing Program along with a few other pages on *Hospital Compare*, the data [are] displayed in a Socrata table. From the Socrata table, you are able to export the data provided in this section. The data [are] available to download as a CSV, CSV for Excel, JSON, RDF, RSS, and XMO. With that bit of information, that concludes today's presentation. Thank you for navigating *Hospital Compare* with me. I would like to turn it over to Bethany, who will conduct our live Q&A.

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Bethany

Wheeler-Bunch:

Thank you, Liana, for showing us how to navigate *Hospital Compare*. While we work on compiling the questions submitted during the webinar, I would like to share some details regarding our upcoming educational webinars. Our next webinar is scheduled for tomorrow, December 19, for hospitals participating in the PPS-exempt Cancer Hospital Quality Reporting Program. This webinar will present a recap of 2018 and a look ahead towards 2019. That's the last webinar we have planned for December, and our next set of webinars will begin again after the start of the new year in January. We anticipate holding events for IQR, IPF, PCH, eCQM, Hospital VBP, the HAC Reduction Program, and the Hospital Readmissions Reduction Programs.

On January 31, we will host a webinar to assist in navigating all of the resources and information found on *Quality Net* for the Hospital IQR Program, the Hospital VBP Program, the HAC Reduction Program, and the Hospital Readmissions Reduction Program.

The dates for the other events will be announced in the upcoming weeks. Please keep an eye out on your *Quality Net* ListServes for those webinar announcements. In February, we plan to hold a webinar to discuss the February *Hospital Compare* refresh as it pertains to the Hospital VBP Program, HAC Reduction Program, and the Hospital Readmissions Reduction Program. This webinar will give a brief overview of these brief programs and then we will walk through how to access these programs' data on *Hospital Compare*. In March, we plan to host a webinar specific to the fiscal year 2021 Hospital VBP Program, including changes from the previous years, a breakdown of the steps for scoring, and assistance in understanding the different pages of the report.

These are just a few of the offerings that we have planned for the upcoming months. To keep up to date with all of our presentations, please sign up for the *Quality Net* ListServe notifications and check back for updates on the events calendar on the *QualityReportingCenter.com* website.

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We will now move to our question and answer session. Liana, our first question is on slide 13. In step two when hospitals preview data, if we find a mistake we make during submission, can we correct it prior to the data being published on *Hospital Compare*?

Liana Bui: Thank you for that great question. We do get that question from time to time. Can we go back to slide 13, please? Thank you. Unfortunately, the preview period where hospitals preview data [are] not for the correction of errors. Any corrections must be made prior to the measure submission deadline. The expectation is that providers will review and correct their data prior to the submission deadline because once the submission deadline has passed, no corrections can be made.

Bethany

Wheeler-Bunch: Thank you for that clarification, Liana. The next question is: When you talk about the ListServes for the refresh, are there other ListServes that will announce submission deadlines and when preview begins?

Liana Bui: Thanks, Bethany, for another great question. Can we please go back to slide 11? Thank you. You can see the link at the bottom of this slide. When you click on that link, it will take you straight to *QualityNet* to sign up for the applicable program ListServes, which is a great source that will let you know about the upcoming submissions, upcoming webinars, the beginning of preview period, and so much more. One helpful tip: We oftentimes get comments about people signing up multiple times for ListServes and they still are not getting those ListServes. One common issue can be that facility firewalls can block those communication ListServes from coming through. So, if you think you're not getting them and you've signed up multiple times, I would doublecheck with your IT team.

Bethany

Wheeler-Bunch: The next question, Liana, is on slide 37. Will the "Print all information" button print the information in the table form that we see on *Hospital Compare*?

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Liana Bui: Thank you for that question. Can we go back to slide 37, please? Perfect. Thank you. Notice in the upper right corner is a “Print all information” button. By pressing on that button, you will be able to print out in a table form identical to how it is shown on *Hospital Compare*. If you end up having any issues, there’s more information that goes into specifics on how to print out the *Hospital Compare* information. You can find that on the Help tab on *Hospital Compare*, which will go into how to troubleshoot some issues and how to print from some different browsers. Thank you.

Bethany

Wheeler-Bunch: Thanks, Liana. The next question is in our chat box pretty frequently. When is the next *Hospital Compare* refresh?

Liana Bui: Thanks, Bethany. If you don’t mind, can we go back to slide 12, please? Perfect. At the bottom of the slide, you will see our anticipated timeline. So, the next anticipated *Hospital Compare* refresh will take place February 2019. The next volume release that we anticipate will be our April 2019 release.

Bethany

Wheeler-Bunch: Thank you. Are there resources that we can use when we preview our data?

Liana Bui: Thanks for that question. Yes, there are resources available to help with the *Hospital Compare* preview period. Those resources can be found year around on both *QualityNet* as well as *Quality Reporting Center*. They are updated quarterly with each release, and those documents are program specific help guides and quick reference guides.

Bethany

Wheeler-Bunch: The next question is: Where can we find out what period of data we are looking at?

Liana Bui: Great question. So, when you are looking at *Hospital Compare*, you will go to the “About the data” tab. We mentioned it earlier on slide 40. Can we go back to slide 40, please? Perfect. Thank you. Okay. Looking at this slide under “Measures and current data collection periods,” you will see a

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column labeled “Current data collection period,” and that’s where you will find the collection period for the measure data that is being displayed on *Hospital Compare*.

Bethany

Wheeler-Bunch: Our next question is in regard to the Next Generation User Interface. We held a webinar regarding the Next Generation User Interface for public reporting back towards the end of November and we also held one yesterday. If you would like to review more information regarding the Next Generation User Interface, the recordings of those webinars are available out on www.QualityReportingCenter.com. Our specific question today is: Will we no longer be receiving quarterly *Hospital Compare* preview reports now that the Next Generation User Interface is available?

Liana Bui: Thank you, Bethany. Yes. Instead of running preview reports like the previous release that require you to do that during a designated 30-day window, you will be now able to obtain preview data using the Next Generation User Interface.

Bethany

Wheeler-Bunch: Thank you. With the change to the Next Generation User Interface, will there be any changes that the hospital sees on *Hospital Compare*?

Liana Bui: Thanks for that question. No, the changes were only to how hospitals preview their data on the Next Generation User Interface. There were no changes on *Hospital Compare* with the introduction of the Next Generation User Interface. One thing that I did want to mention is, on the user interface, the data will not be going away after the preview period ends. You will be able to continuously review your preview data.

Bethany

Wheeler-Bunch: Thanks, Liana. Do we need to submit a request to have access to *Hospital Compare* or is it all public information?

Liana Bui: Thanks for that question. No, you don’t need to request any special access to take a look at *Hospital Compare*. *Hospital Compare* is a public website for everyone to view freely. There is no special access or roles required.

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Bethany

Wheeler-Bunch: Thanks, Liana. The next question is regarding star ratings. When will CMS be releasing star ratings preview data?

Liana Bui: Thanks, Bethany, for that question. So, the star ratings data have become available to hospitals to preview at the beginning of this preview period, which started on December 1. So, it's currently on the Next Generation User Interface. Also, ratings were made available to them, the Hospital-Specific Reports for the star ratings, which they would have gotten through Secure File Transfer, and those started to go out on December 3.

Bethany

Wheeler-Bunch: Liana, earlier in the presentation you mentioned that some measures are annually reported in refresh on *Hospital Compare*, whereas others roll on and off with each quarter. Are the claims-based mortality measures annually reported or are they refreshed quarterly? Could you also comment on HCAHPS?

Liana Bui: Thank you for that question. If you don't mind, can we go back to slide number 12, please? Perfect. So, looking at this chart on this slide, we can see that the claims-based measures are refreshed annually and that typically occurs in the July release. I think you mentioned HCAHPS. So, also looking at the slide, you can see that HCAHPS are refreshed quarterly. HCAHPS is a great example of what I mentioned earlier regarding rolling quarters.

So, looking at the bottom of the screen, you can see that in the October 2018 refresh it has data contained first quarter 2017 through fourth quarter 2017 data. When *Hospital Compare* refreshes in February, the oldest quarter of data will roll off and the new quarter of data will be added. So, our new time period is second quarter 2017 through first quarter 2018.

Bethany

Wheeler-Bunch: Liana, the next question is in regard to the Hospital Value-Based Purchasing Program data. It appears that [they are] not within the actual *Hospital Compare* pages and in a separate table. Is that correct?

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Liana Bui: Thanks for that question, Bethany. Hospital Value-Based Purchasing Program data are not found in the tables that you would see when you're comparing hospitals. If you could go back to slide 52, please? Thank you.

On this section of the home page of *Hospital Compare*, you will find a link to the Hospital Value-Based Purchasing Program and, within that page, you will see the data for the Hospital Value-Based Purchasing Program in a Socrata table. That's also the same for the Hospital Readmission Reduction Program, as well as the Hospital-Acquired Condition Reduction Program, and PPS-exempt Cancer Hospitals, as well as inpatient psychiatric facilities.

Bethany

Wheeler-Bunch: Liana, the next question: Are eCQM data on *Hospital Compare*?

Liana Bui: Thank you for the question. To answer it, currently eCQMs are not publicly reported on *Hospital Compare*.

Bethany

Wheeler-Bunch: Liana, the next question is: How often are star ratings refreshed on *Hospital Compare*?

Liana Bui: Thank you for that question. Can we go back to slide 12, please? Thank you. As we can see on this slide, star ratings are updated biannually. So, the next updates to star ratings are anticipated for February and July of 2019.

Bethany

Wheeler-Bunch: Where can I go if I have questions relating to data on *Hospital Compare*?

Liana Bui: Excellent question. The best contact regarding *Hospital Compare* and the data would be to email HospitalCompare@LantanaGroup.com. You can also contact us by using the Inpatient Question & Answer tool on *Quality Net*. Please keep in mind that if you are using the [Inpatient] Question & Answer tool for the first time, registration will be required. You can also call us by calling (844) 472-4477 or (866) 800-8765.

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Bethany

Wheeler-Bunch: The next question is regarding the Next Generation User Interface in *Hospital Compare*. Are all the data that [are] included in the Next Generation User Interface translated and then reported on *Hospital Compare*, or [are] there some data that [are] only available within the Next Generation User Interface or a Hospital-Specific Report (HSR) for example?

Liana Bui:

Thank you for that question. *Hospital Compare* contains an aggregate of data that you would find on the user interface and HSRs. A majority of the data found in those are on *Hospital Compare* but not all are publicly reported. For example, in HSRs you will be able to find patient-level data with risk adjustments along with other details that are not publicly reported on *Hospital Compare*.

Bethany

Wheeler-Bunch: Thank you for answering those questions, Liana. That's all the time we have for today. Everyone have a great rest of your day and I will now turn it over to Dr. Debra Price to speak about continuing education credits. Thank you all. Have a great day.

Dr. Debra Price:

Hi, everyone. Thanks for attending today's event. The presentation has been approved for continuing education credit by the boards listed on this slide. If your board is not one of those boards listed, you can forward the certificate to your own board and see if they accept this certificate across state lines. Now, you can always reach out to me if you have issues.

There are three easy steps for completing your credits. The first step: Complete the survey at the end of this event. It will automatically pop up. The second step: Register either as a New User or an Existing User on our HSAG Learning Management Center website. The third step: Print out your certificate from the website. One precaution for everyone: This is a separate registration than the one that you used to get into ReadyTalk and the webinar. Also, we prefer that you use your personal email because your healthcare emails have blocks that seem to be blocking our automatic links.

Hospital Inpatient Quality Reporting (IQR) Program

Support Contractor

Okay. This is what will pop up at the end of our slides. It's the bottom of the survey. Finish the survey and click that grey button on the right-hand bottom that says Done.

This page will pop up. You will note that there are two green links. The first one is the New User link. Please use that if you have had any kind of issues before or if you are new user. The second link is Existing User link. Use that if you haven't had any issues before.

Depending on the link that you clicked on, you will be taken to one of these screens. For the New User screen on the left, use your personal email and the personal phone number. If you've had any problems getting your credit, please go back and use this New User screen. The Existing User screen on the right is for you to complete if you haven't had any problems with past events. Your complete email is your user name, and that includes whatever is after the @ sign.

Finally, we would like to thank everyone for attending today's event. If we didn't get to your question, all submitted questions relating to this webinar will be posted to our *QualityReportingCenter.com* website at a later date.

Now, we hope you learned something today. Thank you and enjoy the rest of your day. Goodbye, everyone.