January 2020 Release
Preview Period: November 4 through December 3, 2019
Inpatient *Hospital Compare* Preview Quick Reference Guide

Preview User Interface (UI) Access

Preview Period

Preview data will be available to participating inpatient facilities via the *QualityNet Secure Portal* from **November 4 through December 3, 2019.**

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.**

4. Enter your *QualityNet* User ID, Password, and Security Code. Then, select **Submit**.

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 more information.

HCAHPS Survey

Results reflect Q2 2018–Q1 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

- Removed: VTE-6, IMM-2; ED-1b

- HCP Influenza Vaccination displays 2018–2019 flu season data (Q4 2018–Q1 2019).

- SEP-1 and PC-01 measure results include Q2 2018–Q1 2019.
  - Severe Sepsis and Septic Shock 3-hour and 6-hour bundle data are provided for Q1 2019 only. Data will be in a downloadable database on *Hospital Compare*.

- ED rates include Q2 2018–Q1 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 2017 data.
  - ED-2b display the state and national average minutes based on EDV category.

Structural Measures

- Removed: Structural Measures (SM-5; SM-6)

Complication and Deaths

- 30-Day Death Rate measure results reflect Q3 2015–Q2 2018.

- CMS Patient Safety Indicators (PSI) rates include Q3 2016–Q2 2018 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.

- Healthcare-associated Infection (HAI) measure rates reflect Q2 2018–Q1 2019 data.

- Surgical complications rates reflect Q2 2015–Q1 2018 discharges.

Unplanned Hospital Visits

- Condition-specific readmission rates reflect Q3 2015–Q2 2018 discharges.

- Procedure-specific readmission rates reflect Q3 2015–Q2 2018 discharges.

- Hospital-wide readmission rates reflect Q3 2017–Q2 2018 discharges.

- Excess Days in Acute Care (EDAC) measure results reflect Q3 2015–Q2 2018 discharge data.

Payment and Value of Care

- Payment measures
  - AMI, HF, and PN payment measure results reflect Q3 2015–Q2 2018 discharges.
  - 90-day hip/knee payment measure results reflect Q2 2015–Q1 2018 discharges.

- MSPB performance scores display for Q1 2018–Q4 2018 discharges.

- Removed: Clinical Episode-based Payment Measures (CEBP-1; CEBP-2; CEBP-3; CEBP-4; CEBP-5; CEBP-6)