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Troubleshooting Audio

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Click Refresh icon

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F5 Key
Top Row of Keyboard

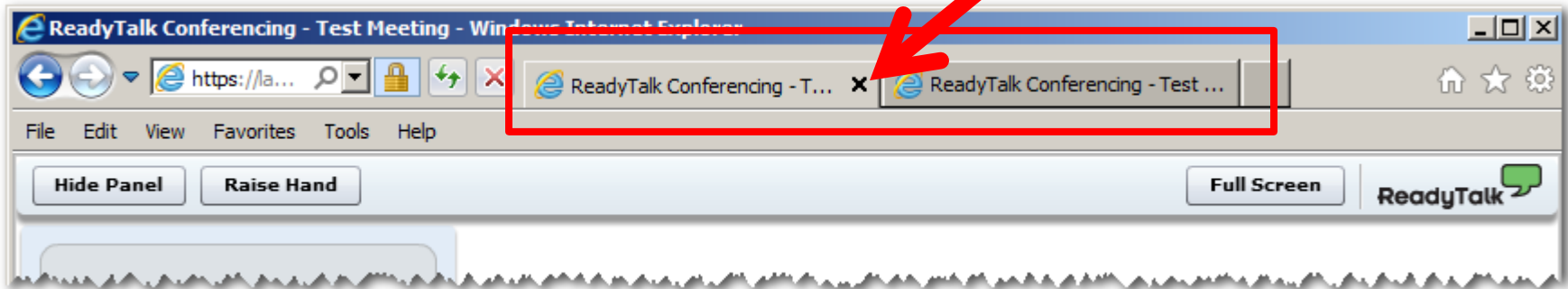


Location of Buttons

Refresh

Troubleshooting Echo

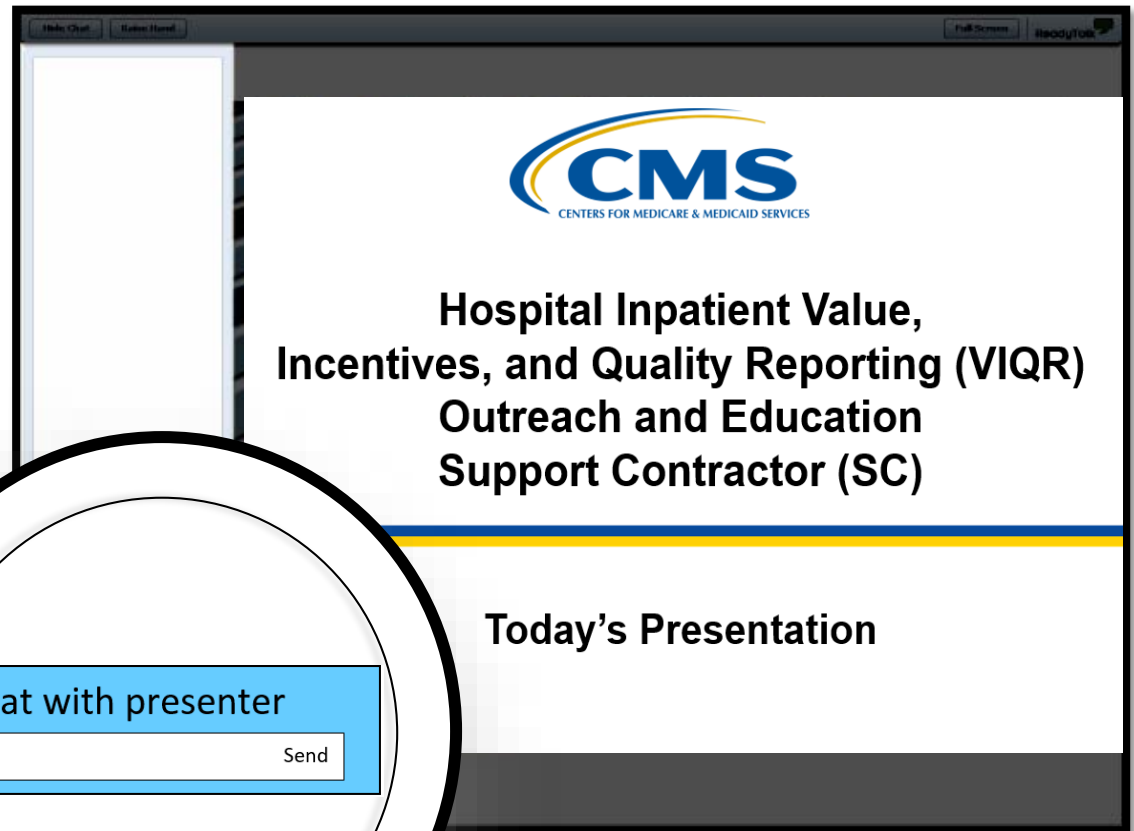
- Hear a bad echo on the call?
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Example of Two Browser Tabs open in Same Event

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Fiscal Year 2018
Hospital VBP Program, HAC Reduction
Program, and HRRP:
Hospital Compare Data Update

December 20, 2017

Speakers

Bethany Wheeler-Bunch, MSHA

Lead, Hospital Value-Based Purchasing (VBP) Program
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contract (SC)

Angie Goubeaux

Lead, Hospital-Acquired Condition (HAC) Reduction Program
Hospital Quality Reporting Program Support (HQRPS) Contract

Kati Michael

Lead, Hospital Readmissions Reduction Program (HRRP)
HQRPS Contract

Purpose

This event will provide an overview of the publicly reported data and information available for the CMS inpatient hospital pay-for-performance programs, including the Hospital VBP Program, the HAC Reduction Program, and the HRRP.

Objectives

Participants will be able to:

- Recall the location of the publicly reported data for the CMS inpatient hospital pay-for-performance programs.
- Identify publicly reported data from previous years.
- Obtain comma-separated value (CSV) files of the publicly reported data.


Acronyms and Abbreviations

AMI	acute myocardial infarction	JSON	JavaScript Object Notation
CABG	coronary artery bypass grafting	MORT	mortality
CAUTI	Catheter-Associated Urinary Tract Infection	MRSA	Methicillin-resistant Staphylococcus aureus
CDC	Centers for Disease Control and Prevention	MS-DRG	Medicare Severity-Diagnosis Related Group
CDI	Clostridium difficile Infection	MSPB	Medicare Spending per Beneficiary
CLABSI	Central Line-Associated Bloodstream Infection	NHSN	National Healthcare Safety Network
CMS	Centers for Medicare & Medicaid Services	NQF	National Quality Forum
COPD	chronic obstructive pulmonary disease	PC	Perinatal Care
CSV	comma-separated value	PCCEC/CC	Patient- and Caregiver-Centered Experience of Care/Care Coordination
FY	fiscal year	PN	pneumonia
HAC	hospital-acquired condition	PSI	Patient Safety Indicator
HAI	healthcare-associated infection	RDF	Resource Description Framework
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	READM	readmission
HF	heart failure	RSS	Rich Site Summary
HQRPS	Hospital Quality Reporting Program Support	SSI	surgical site infection
HRRP	Hospital Readmissions Reduction Program	THA	total hip arthroplasty
ICD-9-CM	The International Classification of Diseases, Ninth Revision, Clinical Modification	TKA	total knee arthroplasty
ICD-10 CM	The International Classification of Diseases, Tenth Revision, Clinical Modification	VBP	value-based purchasing
ICD-10-PCS	The International Classification of Disease, 10th revision, Procedure Classification System	VIQR SC	Value, Incentives, and Quality Reporting Support Contract
IQR	Inpatient Quality Reporting	XML	eXtensible Markup Language


Bethany Wheeler-Bunch, MSHA, Lead, Hospital VBP Program
Hospital Inpatient VIQR Outreach and Education SC

Hospital VBP Program


Background




- Section 1886(o) of the Social Security Act sets forth the statutory requirements for the Hospital VBP Program.




- Quality incentive program built on the Hospital IQR Program measure reporting infrastructure.



- Next step in promoting higher quality of care for Medicare; pays for care that rewards better value and patient outcomes instead of just volume of services.



- Funded by a 2.00 percent reduction from participating hospitals' base-operating MS-DRG payments for FY 2018.



- Hospital VBP Program uses measures that have been specified under the Hospital IQR Program and results published on *Hospital Compare* for at least one year.

FY 2018

Domain Weights and Measures

SAFETY

1. **PSI 90:** Complication/patient safety for selected indicators (composite)
2. **CDI:** Clostridium difficile Infection
3. **CAUTI:** Catheter-Associated Urinary Tract Infection
4. **CLABSI:** Central Line-Associated Bloodstream Infection
5. **MRSA:** Methicillin-resistant Staphylococcus aureus Bacteremia
6. **SSI:** Surgical Site Infection Colon Surgery and Abdominal Hysterectomy
7. **PC-01:** Elective Delivery Prior to 39 Completed Weeks Gestation

CLINICAL CARE

1. **MORT-30-AMI:** Acute Myocardial Infarction (AMI) 30-Day Mortality Rate
2. **MORT-30-HF:** Heart Failure (HF) 30-Day Mortality Rate
3. **MORT-30-PN:** Pneumonia (PN) 30-Day Mortality Rate

EFFICIENCY AND COST REDUCTION

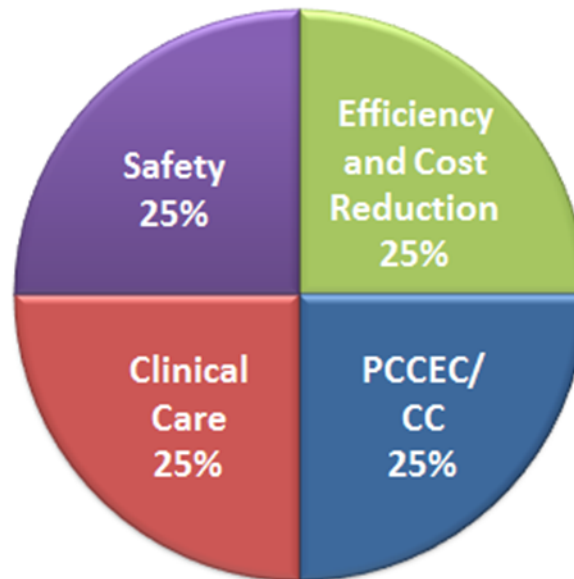
1. **MSPB:** Medicare Spending per Beneficiary (MSPB)

PATIENT- AND CAREGIVER-CENTERED EXPERIENCE OF CARE/CARE COORDINATION (Experience of Care)

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey Dimensions:

1. Communication with Nurses
2. Communication with Doctors
3. Responsiveness of Hospital Staff
4. Communication about Medicines
5. Cleanliness and Quietness of Hospital Environment
6. Discharge Information
7. Care Transition*
8. Overall Rating of Hospital

Domain Weights



An asterisk (*) indicates a newly adopted measure for the Hospital VBP Program.

FY 2018

Data Periods

Domain	Measure	Baseline Period	Performance Period
Clinical Care	Mortality Measures	10/1/2009–6/30/2012	10/1/2013–6/30/2016
Experience of Care	HCAHPS Survey	1/1/2014–12/31/2014	1/1/2016–12/31/2016
Safety	PSI 90	7/1/2010–6/30/2012	7/1/2014–9/30/2015
	HAI Measures	1/1/2014–12/31/2014	1/1/2016–12/31/2016
	PC-01	1/1/2014–12/31/2014	1/1/2016–12/31/2016
Efficiency and Cost Reduction	MSPB	1/1/2014–12/31/2014	1/1/2016–12/31/2016

Hospital VBP Program vs Hospital IQR and HAC Reduction Programs

The FY 2018 Hospital VBP Program uses measures that are included in the Hospital IQR Program; however, you may notice slightly different results between the two programs, for example:

- HCAHPS
 - The HCAHPS survey in the Hospital VBP Program uses the top-box responses only in the rate calculation.
 - The cleanliness and quietness questions are combined into one dimension in the Hospital VBP Program.
 - The pain management dimension was not used in the Hospital VBP Program in FY 2018.
- The 30-day mortality measures are displayed as survival rates in the Hospital VBP Program instead of a mortality rate.
- The baseline and performance periods may be different than many measures publicly reported on the *Hospital Compare* website for the Hospital IQR Program or used in the HAC Reduction Program.

Hospital VBP Program vs Hospital IQR and HAC Reduction Programs

(Continued)

- The Hospital IQR Program and HAC Reduction Program used an updated version of the PSI 90 Composite. Measure changes include the following:
 - Measure name
 - Number of component indicators (increased from eight to 10)
 - Specification changes in PSI 08, PSI 12, and PSI 15
 - Component weighting (now incorporates harm)
 - Component weights (more equally distributed among the component indicators)
 - More detailed information available here:
https://www.qualityreportingcenter.com/wp-content/uploads/2017/03/QA-Transcript_VBP_MarchWebinar_03292017_vFINAL508.pdf
- The CLABSI and CAUTI measures use data from select intensive care units only in the Hospital VBP Program; whereas, the Hospital IQR Program and HAC Reduction Program utilized expanded locations for FY 2018.
- The CLABSI, CAUTI, SSI, MRSA, and CDI measures utilize the current standard population (old baseline) in calculations for the Hospital VBP Program in FY 2018; whereas, the Hospital IQR Program and HAC Reduction Program utilized the new standard population (new baseline).

Overall Hospital Rating and Hospital VBP Program

- On *Hospital Compare*, the Overall Hospital Rating summarizes Hospital IQR and Hospital Outpatient Quality Reporting Program data.
- The Overall Hospital Rating calculations do not include Hospital VBP Program results.

Publicly Reported Data

- In early November 2017, CMS posted the FY 2018 payment adjustment factors to the *cms.gov* website.
- On December 20, 2017, CMS will update the data on the *Hospital Compare* website to include the following:
 - FY 2018 Hospital VBP Program data and scoring information
 - Measure/Dimension Scores
 - Domain Scores
 - Total Performance Scores
 - Actual FY 2016 Hospital VBP Program aggregate payment adjustments

FY 2018 Payment Adjustment File

Table 16B contains the actual payment adjustment factors by CMS Certification Number for each participating hospital under the Hospital VBP Program for FY 2018. These actual factors are based on the finalized baseline and performance period for FY 2018 and will be used to adjust base operating MS-DRG payments to eligible hospitals for discharges occurring in FY 2018.

Table 16B link:

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2018-IPPS-Final-Rule-Home-Page-Items/FY2018-IPPS-Final-Rule-Tables.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=ascending>

Fact Sheet link:

<https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-11-03.html>

Hospital Compare Home Page

<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 hospital performance data using our [interactive datasets](#) and [downloadable databases](#).

Find a hospital

A field with an asterisk (*) is required.

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

Hospital name (optional)



Hospital Compare Homepage Link to Hospital VBP Program

<https://www.medicare.gov/hospitalcompare/Data/hospital-vbp.html>

Spotlight

- ◆ **NEW** View the new "Hospital Returns" tab for data on readmissions and extra days spent back in the hospital.
- ◆ Compare hospitals based on their overall star rating, summarizing up to 57 measures of quality shown on Hospital Compare. [Learn more.](#)
- ◆ Get data on:
 - ◆ **NEW** Department of Defense (DoD) Hospital Performance Data. Updated December 2017.
 - ◆ Veterans Administration (VA) hospitals. Updated December 2017.
 - ◆ PPS-exempt cancer hospitals. Updated December 2017.
 - ◆ **NEW** Inpatient Psychiatric Facility Quality Reporting measures. Updated December 2017.
 - ◆ Ambulatory surgical centers. Updated December 2017.
 - ◆ American College of Surgeons National Surgical Quality Improvement Program® outcome measures. Updated December 2017.
 - ◆ The number of selected procedures hospital outpatient surgical departments perform.
- ◆ View hospital survey (inspection) reports.

Tools and Tips

- ◆ Get information on [choosing a hospital](#), [filing a complaint](#), or [Medicare coverage for hospital services](#).
- ◆ Get [tips for printing hospital information](#).
- ◆ [Find and compare other healthcare providers](#) like doctors, hospitals, nursing homes, and more.
- ◆ Compare Medicare health and drug plans.

Additional Information

- ◆ Hospital Compare data last updated: October 25, 2017. [Go to updates](#)
- ◆ Explore and download [Hospital Compare data](#). Updated December 20, 2017. Beginning in July 2017, the downloadable database will be provided in CSV format only.
- ◆ Get data from Medicare programs that link quality to payment.
 - ◆ Hospital Readmissions Reduction Program (HRRP). Updated December 2017.
 - ◆ **Hospital Value-Based Purchasing Program (HVBP).** Updated December 2017.
 - ◆ Hospital-Acquired Condition (HAC) Reduction Program. Updated December 2017.
 - ◆ Comprehensive Care for Joint Replacement Model. New in July 2017.
- ◆ For hospitals: [Update your address, phone number, and other administrative information.](#)
- ◆ For general questions regarding Hospital Compare and the data, email hospitalcompare@hsag.com.
- ◆ View providers and suppliers that are terminated or are at risk for termination from Medicare.

Hospital VBP Program Pages

Hospital Value-Based Purchasing

Clinical Care domain

Patient- and Caregiver-Centered Experience of Care/Care Coordination domain

Safety domain

Efficiency and cost reduction domain

Total Performance Score

Payment Adjustments

- CMS breaks down the Hospital VBP Program measures into smaller tables based on the Domain.
- The Total Performance Score table also provides Domain Scores.
- A series of tables with actual aggregate payment adjustments from a previous fiscal year is available.

Hospital VBP Program Data Pages

Download available as:

- CSV
- CSV for Excel
- JSON
- RDF
- RSS
- XML

Efficiency and cost reduction domain

The Centers for Medicare & Medicaid Services' (CMS) measures cost of care through the efficiency and cost reduction domain to increase the transparency of care for consumers by recognizing hospitals that provide high quality care at lower costs to Medicare.

Medicare spending per beneficiary (MSPB) measure

This measure of efficiency is based on an assessment of payment for services provided to a beneficiary during a spending-per-beneficiary episode that spans from 3 days prior to an inpatient hospital admission through 30 days after discharge. The payments included in this measure are standardized and adjusted so that variation in geographic costs are removed, as well as variation in patient health status.

Fiscal Year 2018 Baseline and Performance Periods:

Baseline period: January 1, 2014 - December 31, 2014

Performance period: January 1, 2016 - December 31, 2016

The screenshot shows the Data.Medicare.gov interface. At the top, it says 'Hospital Value-Based Purchasing (HVPB) - Efficiency Scores'. Below this is a table with two columns: 'Provider_Number' and 'Hospital_Name'. The table lists 14 hospitals. To the right of the table is a 'More Views' sidebar with options: 'Download' (circled in red), 'Discuss', 'Embed', 'API', 'OData', and 'Print'. The 'Download' option is highlighted with a red circle.

Provider_Number	Hospital_Name
1	370001 HILLCREST MEDICAL CENTER
2	220110 BRIGHAM AND WOMEN'S HOSPITAL
3	220010 LAWRENCE GENERAL HOSPITAL
4	220017 CARNEY HOSPITAL
5	230236 METRO HEALTH HOSPITAL
6	220052 SIGNATURE HEALTHCARE BROCKTON
7	230105 MCLAREN - NORTHERN MICHIGAN
8	200018 AROOSTOOK MEDICAL CENTER
9	200052 NORTHERN MAINE MEDICAL CENTER
10	200009 MAINE MEDICAL CENTER
11	230066 MERCY HEALTH MUSKOGON
12	230081 MUNSON HEALTHCARE CADILLAC HOS
13	230277 HURON VALLEY-SINAI HOSPITAL
14	230041 MCLAREN BAY REGION

FY 2016 Payment Adjustments

Hospital Value-Based Purchasing

Clinical Care domain

Patient- and Caregiver-Centered Experience of Care/Care Coordination domain

Safety domain

Efficiency and cost reduction domain

Total Performance Score

Payment Adjustments

FY 2016 payment adjustment tables include the following:

- Net change in base-operating DRG payment amount
- Distribution of net change in base-operating DRG payment amount
- Percent change in base-operating DRG payment amount
- Value-based incentive payment amount

Note: Data are in an aggregate form, not at an individual CMS Certification Number level.

Resources

Hospital Compare:

- <https://www.medicare.gov/hospitalcompare/search.html>

Hospital VBP Program page on *Hospital Compare:*

- <https://www.medicare.gov/hospitalcompare/Data/hospital-vbp.html>

General *Hospital Compare* inquiries:

- hospitalcompare@hsag.com

Hospital VBP Program information:

- <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772039937>

Hospital VBP Program general inquiries:

- <https://cms-ip.custhelp.com/>
- Hospital Inpatient VIQR Outreach and Education SC at (844) 472-4477

Angie Goubeaux, Lead, HAC Reduction Program
HQRPS Contract

HAC Reduction Program

Overview

- The HAC Reduction Program is a pay-for-performance program.
- Section 1886(p)(6)(B) of the Social Security Act sets forth the statutory requirements for the HAC Reduction Program.
- CMS adjusts Medicare payments for hospitals that rank in the worst-performing 25 percent of all subsection (d) hospitals on key quality measures.
- Payment adjustments started with federal FY 2015 discharges (i.e., beginning on October 1, 2014). CMS reduces these hospitals' payments by 1 percent of what would otherwise have been paid.
- Section 1886(p)(6)(B) of the Social Security Act requires the Secretary of Health and Human Services to ensure eligible hospitals can review and submit corrections for their HAC-related data before public reporting.
- CMS will no longer post the payment penalty file for the HAC Reduction Program on the *cms.gov* website. This information will appear on *Hospital Compare*.

Hospital Compare

December 2017 Release

On December 20, 2017, CMS will update the data on the *Hospital Compare* website to include the following FY 2018 HAC Reduction Program information:

- Modified Recalibrated PSI 90 Composite measure score
- CDC NHSN measure scores
 - CLABSI
 - CAUTI
 - SSI
 - MRSA Bacteremia
 - CDI measure scores
- Domain 1 and Domain 2 scores
- Total HAC Score
- Payment Reduction Indicator

FY 2018 Performance Periods

Calculations for FY 2018 HAC Reduction Program are based on the following performance periods:

- **Domain 1**

The Modified Recalibrated PSI 90 Composite uses Medicare fee-for-service claims data from **July 1, 2014, through September 30, 2015.***

- **Domain 2**

The CLABSI, CAUTI, SSI, MRSA Bacteremia, and CDI measures use chart-abstracted surveillance data from **January 1, 2015, through December 31, 2016.**

*This is a shortened data collection period for Domain 1, which only uses ICD-9-CM data.

Overall Hospital Rating

- On *Hospital Compare*, the Overall Hospital Rating summarizes Hospital IQR and Hospital Outpatient Quality Reporting Program data.
- The Overall Hospital Rating calculations do not include HAC Reduction Program results.

Hospital Compare Homepage Link to HAC Reduction Program

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

The screenshot shows the Hospital Compare homepage with three main sections: Spotlight, Tools and Tips, and Additional Information. The 'Additional Information' section contains a list of links, with the 'Hospital-Acquired Condition (HAC) Reduction Program' link circled in red.

Spotlight	Tools and Tips	Additional Information
<ul style="list-style-type: none">◆ NEW View the new "Hospital Returns" tab for data on readmissions and extra days spent back in the hospital.◆ Compare hospitals based on their overall star rating, summarizing up to 57 measures of quality shown on Hospital Compare. Learn more.◆ Get data on:<ul style="list-style-type: none">◆ NEW Department of Defense (DoD) Hospital Performance Data. Updated December 2017.◆ Veterans Administration (VA) hospitals. Updated December 2017.◆ PPS-exempt cancer hospitals. Updated December 2017.◆ NEW Inpatient Psychiatric Facility Quality Reporting measures. Updated December 2017.◆ Ambulatory surgical centers. Updated December 2017.◆ American College of Surgeons National Surgical Quality Improvement Program® outcome measures. Updated December 2017.◆ The number of selected procedures hospital outpatient surgical departments perform.◆ View hospital survey (inspection) reports.	<ul style="list-style-type: none">◆ Get information on choosing a hospital, filing a complaint, or Medicare coverage for hospital services.◆ Get tips for printing hospital information.◆ Find and compare other healthcare providers like doctors, hospitals, nursing homes, and more.◆ Compare Medicare health and drug plans.	<ul style="list-style-type: none">◆ Hospital Compare data last updated: October 25, 2017. Go to updates◆ Explore and download Hospital Compare data. Updated December 20, 2017. Beginning in July 2017, the downloadable database will be provided in CSV format only.◆ Get data from Medicare programs that link quality to payment.<ul style="list-style-type: none">◆ Hospital Readmissions Reduction Program (HRRP). Updated December 2017.◆ Hospital Value-Based Purchasing Program (HVBP). Updated December 2017.◆ Hospital-Acquired Condition (HAC) Reduction Program. Updated December 2017.◆ Comprehensive Care for Joint Replacement Model. New in July 2017.◆ For hospitals: Update your address, phone number, and other administrative information.◆ For general questions regarding Hospital Compare and the data, email hospitalcompare@hsag.com.◆ View providers and suppliers that are terminated or are at risk for termination from Medicare.

Hospital Compare HAC Reduction Program Page

<https://www.medicare.gov/hospitalcompare/HAC-reduction-program.html>

Medicare.gov | Hospital Compare
The Official U.S. Government Site for Medicare

Hospital-Acquired Condition Reduction Program

In October 2014, CMS began reducing Medicare payments for subsection (d) hospitals that rank in the worst-performing quartile of subsection (d) hospitals with respect to hospital-acquired conditions (HACs). For the FY 2018 HAC Reduction Program, the worst-performing quartile is identified by calculating a Total HAC Score based on hospitals' performance on six quality measures: the Recalibrated Patient Safety Indicators (PSI) 90 Composite, which is calculated using recalibrated version 6.0.2 of the PSI software, and the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI) (Colon Surgery and Abdominal Hysterectomy), Methicillin-resistant Staphylococcus aureus (MRSA) bacteremia, and Clostridium difficile Infection (CDI) measures. Hospitals with a Total HAC Score greater than the 75th percentile of the Total HAC Score distribution will be subject to a payment reduction.

To learn more about the measures and scoring methodology for the HAC Reduction Program, please visit the [QualityNet Website](#).

Hospital-Acquired Condition Reduction Program data

	Hospital_Name	Provider ID	State	Fiscal Year	Domain_1_Score
1	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL	2017	1.0
2	MARSHALL MEDICAL CENTERS	010005	AL	2017	3.0
3	ELIZA COFFEE MEMORIAL HOSPITAL	010006	AL	2017	7.0
4	MIZELL MEMORIAL HOSPITAL	010007	AL	2017	3.0
5	CRENSHAW COMMUNITY HOSPITAL	010008	AL	2017	6.0
6	ST. VINCENT'S EAST	010011	AL	2017	8.0

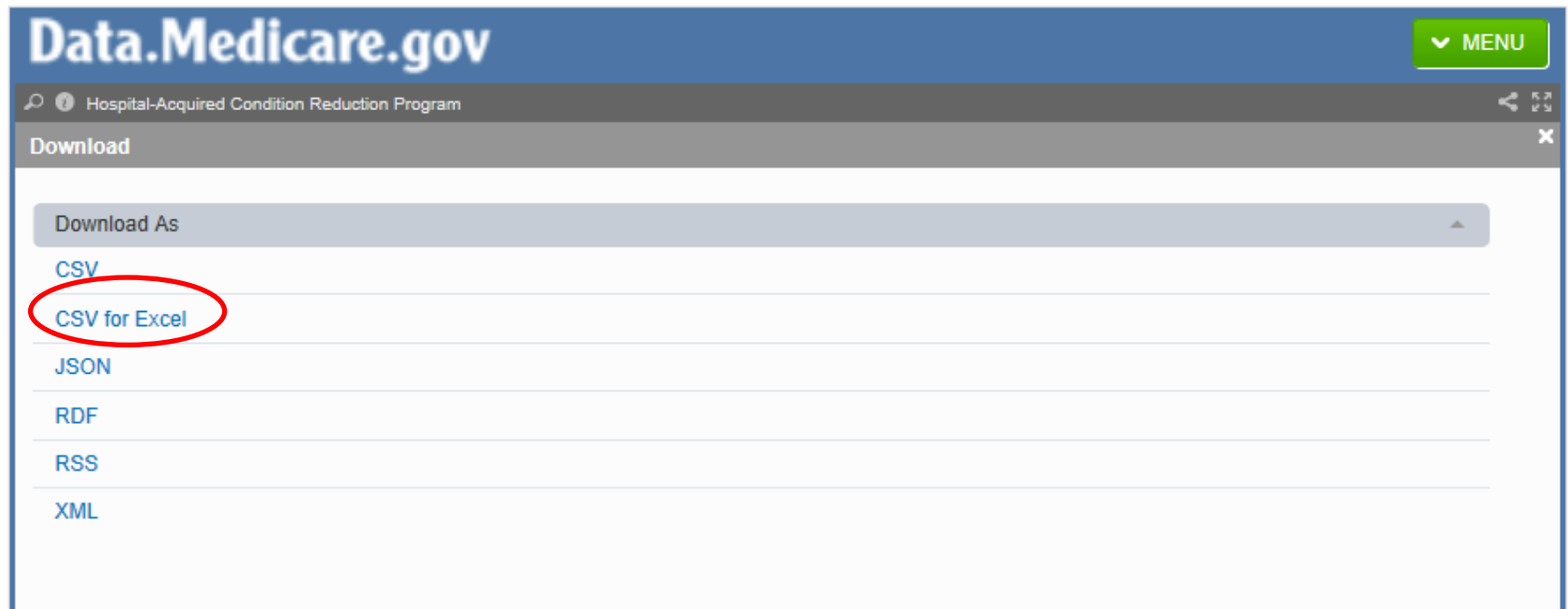
Data.Medicare.gov MENU

- More Views
Filters, charts, and maps
- Download**
Download in various formats
- Discuss
Discuss this Dataset
- Embed
Embed this player on your site
- API

HAC Reduction Program Downloadable Database

To learn more about the measures and scoring methodology for the HAC Reduction Program, please visit the [QualityNet Website](#).

Hospital-Acquired Condition Reduction Program data



The screenshot shows the Data.Medicare.gov interface. At the top, there is a blue header with the text "Data.Medicare.gov" and a green "MENU" button. Below the header, the page title is "Hospital-Acquired Condition Reduction Program". A "Download" modal window is open, displaying a list of download options under the heading "Download As". The options are: CSV, CSV for Excel (circled in red), JSON, RDF, RSS, and XML.

Download As
CSV
CSV for Excel
JSON
RDF
RSS
XML

HAC Reduction Program Resources

HAC Reduction Program methodology and general information:

- www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228774189166
- CMS.gov HAC Reduction Program:
<http://cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/HAC-Reduction-Program.html>

HAC Reduction Program results:

- Medicare.gov Hospital Compare HAC Reduction Program:
www.medicare.gov/hospitalcompare/HAC-reduction-program.html

Hospital Compare questions:

- HospitalCompare@hsag.com

HAC Reduction Program questions:

- HACRP@lantanagroup.com
- QualityNet Question and Answer Tool:
<https://cmsip.custhelp.com/app/homehacrp/p/842>

Kati Michael, Lead, HRRP
HQRPS Contract

Hospital Readmissions Reduction Program

Background

- Section 1886(q) of the Social Security Act sets forth the statutory requirements for the HRRP.
- Payment adjustments began with discharges on October 1, 2012.

Purpose

- HRRP is an important part of continued efforts by CMS to link payment to the quality of hospital care.
- HRRP provides strong financial incentive for hospitals to improve communication, care coordination efforts, and engagement with patients and caregivers in post-discharge planning.

FY 2018 Measures

Claims-Based Readmission Measure	NQF Measure Number	FY 2018 Reporting Period
READM-30-AMI	NQF #0505	July 1, 2013–June 30, 2016
READM-30-HF	NQF #0330	July 1, 2013–June 30, 2016
READM-30-PN	NQF #0506	July 1, 2013–June 30, 2016
READM-30-COPD	NQF #1891	July 1, 2013–June 30, 2016
READM-30-THA/TKA	NQF #1551	July 1, 2013–June 30, 2016
READM-30-CABG	NQF #2515	July 1, 2013–June 30, 2016

Discharge diagnoses for each applicable condition are based on a list of specific ICD-9-CM or ICD-10-CM and ICD-10-PCS code sets.

Hospital Compare

December 2017 Release

- For applicable hospitals with at least 25 eligible discharges, CMS is reporting the following data elements for each of the six HRRP readmission measures on *Hospital Compare*:
 - Number of eligible discharges
 - Number of readmissions
(only if the hospital has 11 or more readmissions)
 - Predicted readmissions
(also known as the adjusted actual readmissions)
 - Expected readmissions
 - Excess readmission ratio
- The FY 2018 HRRP measure results will be updated on the CMS *Hospital Compare* website on December 20, 2017.

Formula for Calculating Aggregate Payments for Excess Readmissions

FORMULAS TO CALCULATE THE READMISSIONS ADJUSTMENT FACTOR FOR FY 2018

Aggregate payments for excess readmissions =

[sum of base operating DRG payments for AMI x (Excess Readmissions Ratio for AMI -1)]
+
[sum of base operating DRG payments for HF x (Excess Readmissions Ratio for HF -1)]
+
[sum of base operating DRG payments for PN x (Excess Readmissions Ratio for PN -1)]
+
[sum of base operating DRG payments for COPD x (Excess Readmissions Ratio for COPD -1)]
+
[sum of base operating DRG payments for THA/TKA x (Excess Readmissions Ratio for THA/TKA -1)]
+
[sum of base operating DRG payments for CABG x (Excess Readmissions Ratio for CABG -1)].

*We note that if a hospital's excess readmissions ration for a condition is less than/equal to (\leq) 1, there are no aggregate payments for excess readmissions for that condition included in this calculation.

Aggregate payments for all discharges = sum of base operating DR payments for all discharges.

Ratio = 1 - (Aggregate payments for excess readmissions ÷ Aggregate payments for all discharges).

Proposed Readmissions Adjustment Factor for FY 2018 is the higher of the ratio or 0.9700.

*Based on claims data from July 1, 2013 to June 30, 2016 for FY 2018.

21st Century Cures Act Provisions for HRRP

The 21st Century Cures Act statute and finalized policy provision to assess performance relative to other hospitals with a similar proportion of dual-eligible patients will not be implemented until FY 2019 payment.

Supplemental Data File

Hospital FY 2018 HRRP payment adjustment factor information, based on data available as of the close of the review and corrections period, was made available to the public in August 2017 and posted as part of the final rule data files on the *cms.gov* website:

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2018-IPPS-Final-Rule-Home-Page.html>

Differences in Hospital IQR and HRRP

- Both use the same measure methodology and discharge time period, but the two programs use different sets of hospitals.
- HRRP uses subsection (d) hospitals and Maryland hospitals participating in the all-payer model.
- The Hospital IQR Program includes a more expansive group of hospitals that voluntarily participate, including critical access hospitals (CAHs), PPS-Exempt Cancer Hospitals (PCHs), and hospitals located in U.S. territories, which are not subsection (d) hospitals.
- Most hospitals will have similar results, or possibly a lower number of readmissions (or unadjusted readmission rate), in the HRRP compared to their results in the Hospital IQR Program. However, some hospitals may have a slightly higher number of readmissions (or unadjusted readmission rate) due to the difference in the applicable hospitals described above.

Hospital Compare

Homepage Link to HRRP

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

The screenshot shows the Hospital Compare homepage with three main sections: Spotlight, Tools and Tips, and Additional Information. A red circle highlights the link for the Hospital Readmissions Reduction Program (HRRP) in the Additional Information section.

Spotlight

- ◆ **NEW** View the new "Hospital Returns" tab for data on readmissions and extra days spent back in the hospital.
- ◆ Compare hospitals based on their overall star rating, summarizing up to 57 measures of quality shown on Hospital Compare. [Learn more.](#)
- ◆ Get data on:
 - ◆ **NEW** Department of Defense (DoD) Hospital Performance Data. Updated December 2017.
 - ◆ Veterans Administration (VA) hospitals. Updated December 2017.
 - ◆ PPS-exempt cancer hospitals. Updated December 2017.
 - ◆ **NEW** Inpatient Psychiatric Facility Quality Reporting measures. Updated December 2017.
 - ◆ Ambulatory surgical centers. Updated December 2017.
 - ◆ American College of Surgeons National Surgical Quality Improvement Program® outcome measures. Updated December 2017.
 - ◆ The number of selected procedures hospital outpatient surgical departments perform.
- ◆ View hospital survey (inspection) reports.

Tools and Tips

- ◆ Get information on choosing a hospital, filing a complaint, or Medicare coverage for hospital services.
- ◆ Get tips for printing hospital information.
- ◆ Find and compare other healthcare providers like doctors, hospitals, nursing homes, and more.
- ◆ Compare Medicare health and drug plans.

Additional Information

- ◆ Hospital Compare data last updated: October 25, 2017. [Go to updates](#)
- ◆ Explore and download Hospital Compare data. Updated December 20, 2017. Beginning in July 2017, the downloadable database will be provided in CSV format only.
- ◆ Get data from Medicare programs that [link quality to payment](#).
 - ◆ **Hospital Readmissions Reduction Program (HRRP).** Updated December 2017.
 - ◆ Hospital Value-Based Purchasing Program (HVBP). Updated December 2017.
 - ◆ Hospital-Acquired Condition (HAC) Reduction Program. Updated December 2017.
 - ◆ Comprehensive Care for Joint Replacement Model. New in July 2017.
- ◆ For hospitals: [Update your address, phone number, and other administrative information.](#)
- ◆ For general questions regarding Hospital Compare and the data, email hospitalcompare@hsag.com.
- ◆ View providers and suppliers that are terminated or are at risk for termination from Medicare.

Hospital Compare HRRP Page

Medicare.gov | Hospital Compare

The Official U.S. Government Site for Medicare

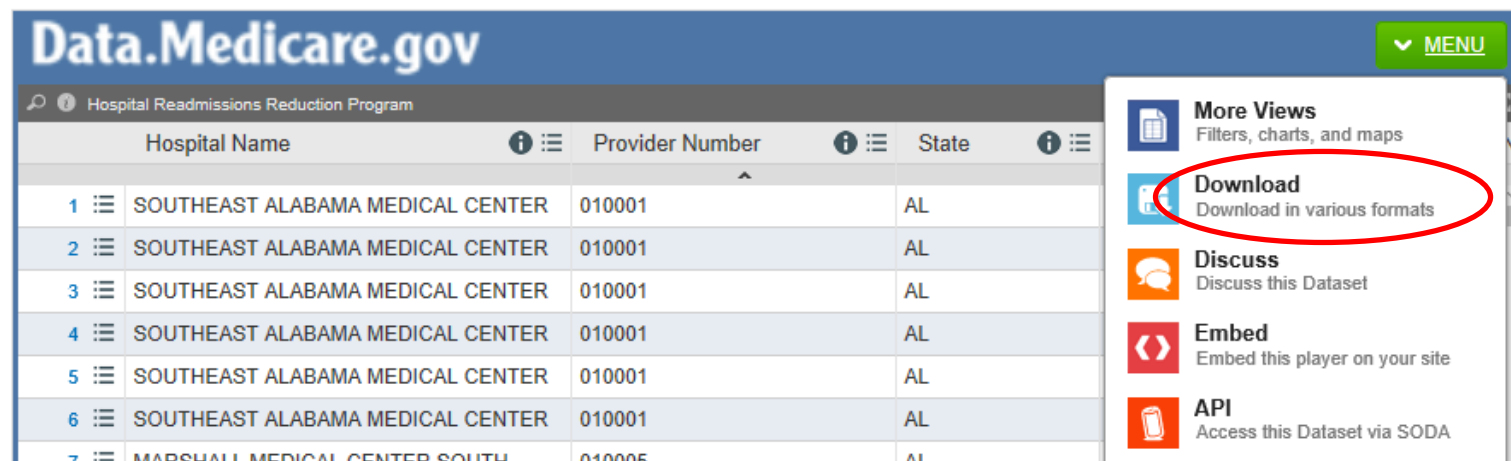
Hospital Readmissions Reduction Program

In October 2012, CMS began reducing Medicare payments for Inpatient Prospective Payment System (IPPS) hospitals with excess readmissions. Excess readmissions are measured by a ratio, by dividing a hospital's number of "predicted" 30-day readmissions for heart attack, heart failure, pneumonia, COPD, hip/knee replacement, and coronary artery bypass graft surgery by the number that would be "expected," based on an average hospital with similar patients. A ratio greater than 1.0000 indicates excess readmissions.

[More information on how payments are adjusted.](#)

[More on the calculations.](#)

Hospital Readmissions Reduction Program data



Data.Medicare.gov MENU

Hospital Readmissions Reduction Program

	Hospital Name	Provider Number	State
1	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
2	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
3	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
4	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
5	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
6	SOUTHEAST ALABAMA MEDICAL CENTER	010001	AL
7	MARSHALL MEDICAL CENTER SOUTH	010005	AL

- More Views**
Filters, charts, and maps
- Download**
Download in various formats
- Discuss**
Discuss this Dataset
- Embed**
Embed this player on your site
- API**
Access this Dataset via SODA

HRRP Downloadable Database

To learn more about the measures and scoring methodology for the HAC Reduction Program, please visit the [QualityNet Website](#).

Hospital-Acquired Condition Reduction Program data

The screenshot shows the Data.Medicare.gov interface. At the top, there is a search bar with the text 'Hospital-Acquired Condition Reduction Program'. Below the search bar is a 'Download' section with a dropdown menu labeled 'Download As'. The dropdown menu is open, showing several options: 'CSV', 'CSV for Excel', 'JSON', 'RDF', 'RSS', and 'XML'. The 'CSV for Excel' option is highlighted with a red circle.

Data.Medicare.gov MENU

Hospital-Acquired Condition Reduction Program

Download

Download As

- CSV
- CSV for Excel
- JSON
- RDF
- RSS
- XML

HRRP Resources

Hospital Compare:

- <https://www.medicare.gov/hospitalcompare/search.html?>

Hospital Compare inquiries:

- hospitalcompare@hsag.com

HRRP Program information:

- <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772412458>

HRRP general inquiries:

- HRRP@lantanagroup.com
- *QualityNet* Question and Answer Tool
<https://cms-ip.custhelp.com/app/homehrrp/p/843>

HRRP measure methodology inquiries:

- cmsreadmissionmeasures@yale.edu

More program and payment adjustment information:

- <https://www.cms.gov/medicare/medicare-fee-for-service-payment/acuteinpatientpps/readmissions-reduction-program.html>

Readmission measures:

- <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1219069855273>

Bethany Wheeler-Bunch, MSHA, Lead, Hospital VBP Program
Hospital Inpatient VIQR Outreach and Education SC


Downloading Current and Archived Data

Data.Medicare.Gov and Downloading Data

<https://data.medicare.gov/>



 **DOWNLOAD CSV FLAT FILES
(REVISED) NOW**

 **GET ARCHIVED DATA**

Archived 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 hospital performance data using our [interactive datasets](#) and [downloadable databases](#).

Find a hospital

A field with an asterisk (*) is required.

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

Hospital name (optional)

Archived Data

About Hospital Compare

About the data

Resources

Glossary

Information for patients

Information for hospitals

» **Download the data**

Help

Back to top

Download the data

- Visit data.medicare.gov to get the downloadable data.
- [Get archived Hospital Compare data.](#)
- [Learn more about using government data.](#)

Archived Data

<https://data.medicare.gov/data/archives/hospital-compare>

The screenshot shows the Data.Medicare.gov website. The header includes the site name, navigation links for Home, Get started, Info, and Developers, a search bar, and a SIGN IN link. The main content area features the title 'Hospital Compare data archive' and two sections: '2017 Annual Files' and '2016 Annual Files'. Each section contains a list of zip files with their respective dates and sizes.

Data.Medicare.gov [Get started](#) [Info](#) [Developers](#) [SIGN IN](#)

Hospital Compare data archive

2017 Annual Files

- HOSArchive_Revised_FlatFiles_20170726.zip (07/26/2017, Zip File, 15222 KB)
- HOSArchive_20170428.zip (04/28/2017, Zip File, 50684 KB)
- HOSArchive_Revised_Flatfiles_20170428.zip (04/28/2017, Zip File, 14930 KB)

2016 Annual Files

- HOSArchive_20161219.zip (12/19/2016, Zip File, 41114 KB)
- HOSArchive_Revised_Flatfiles_20161219.zip (12/19/2016, Zip File, 15608 KB)
- Hospital_20161110.zip (11/10/2016, Zip File, 52138 KB)
- Hospital_Revised_FlatFiles_20161110 (11/10/2016, Zip File, 15473 KB)
- VA_Data_10.19.2016 (10/19/2016, Zip File, 342 KB)
- HOSArchive_20160810.zip (08/10/2016, Zip File, 43096 KB)
- HOSArchive_Revised_FlatFiles_20160810.zip (08/10/2016, Zip File, 14900 KB)

Fiscal Year 2018

Hospital VBP Program, HAC Reduction Program, and HRRP:
Hospital Compare Data Update

Questions

Continuing Education Approval

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

- **National**

- Board of Registered Nursing (Provider #16578)

- **Florida**

- Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
- Board of Nursing Home Administrators
- Board of Dietetics and Nutrition Practice Council
- Board of Pharmacy

Note: To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.

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 the HSAG Learning Management Center.
 - This is a separate registration from ReadyTalk®.
 - Please use your **personal** email so you can receive your certificate.
 - Healthcare facilities have firewalls up that block our certificates.

CE Certificate Problems

- If you do not **immediately** receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that was sent.
- Please go back to the **New User** link and register your personal email account.
 - Personal emails do not have firewalls.

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: 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>

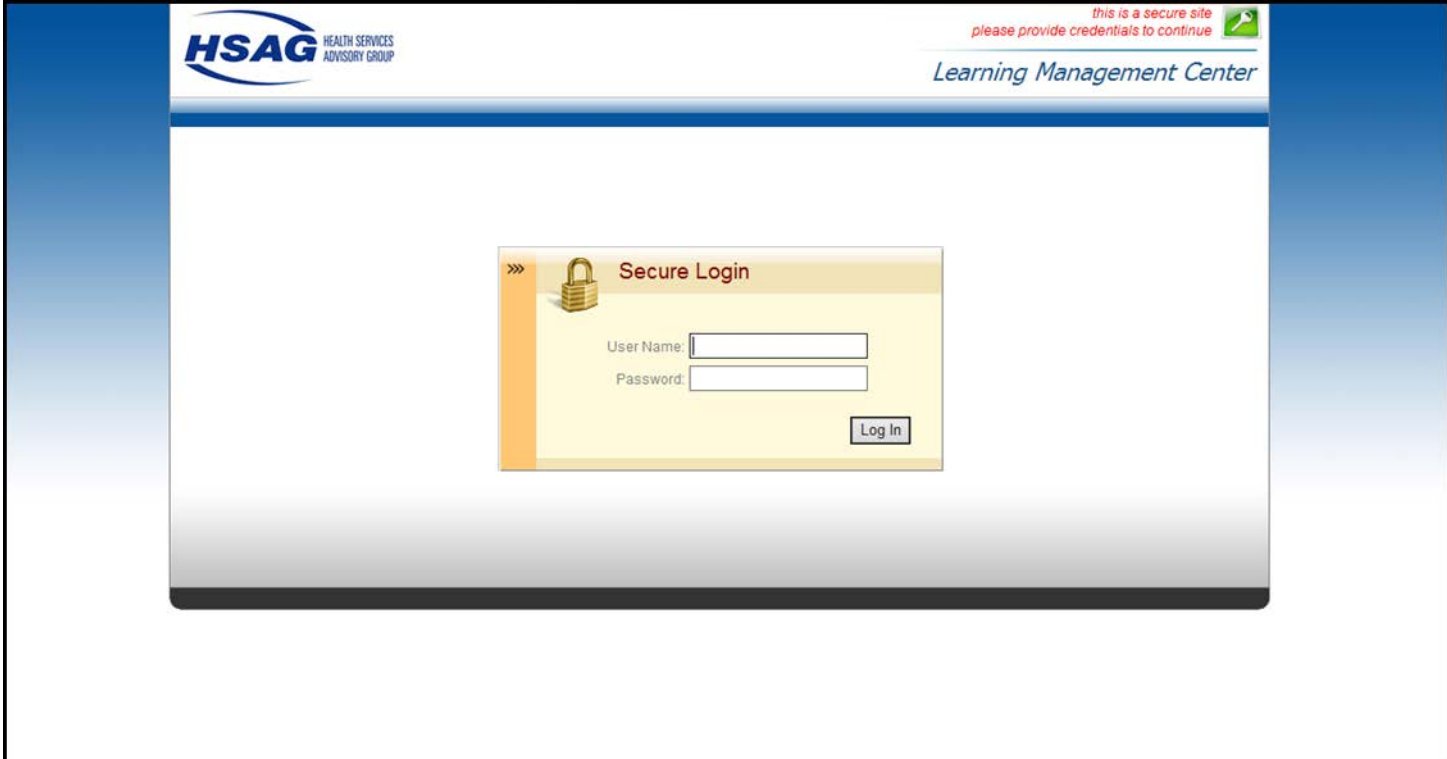
Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

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 lock icon. Below the header, the text "Learning Management Center" is displayed. 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 entire form is set against a light blue gradient background.

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 (Health Services Advisory Group). At the top right, a security notice reads "this is a secure site please provide credentials to continue" with a lock icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box containing a padlock icon, a "User Name:" label with an input field, a "Password:" label with an input field, and a "Log In" button.

Disclaimer

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