

# Reporting Hospital Quality Measures

## Nevada Legislative Committee on Health Care Testimony

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# Who is *HealthInsight*?

- A private, non-profit 501( c )3 corporation
  - Dedicated to improving healthcare quality for all citizens
  - Community-based governance
  - 30+ years experience working on quality
  - ~25 local staff in Nevada
- Federally-designated Medicare quality improvement organization (QIO) for Nevada and Utah
- Unbiased, respected convener and catalyst



# What is a Quality Measure?

*Definition: A mechanism that enables the user to quantify the quality of a selected aspect of care by comparing it to a criterion.*

- Outcome measures
- Process measures



# Current National Hospital Reporting Landscape

- CMS “Pay for Reporting” Initiatives
  - Reporting Hospital Quality Data for Annual Payment Update (RHQDAPU)
  - Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
  - Hospital Outpatient Quality Data Reporting Program (HOP QDRP)
- Hospital Quality Alliance – *Hospital Compare*
- Leap Frog
- Coming Soon: Value-Based Purchasing Program



# Current Statewide Hospital Reporting Landscape

- *HealthInsight* Hospital Rankings – available at [www.healthinsight.org](http://www.healthinsight.org)
- *Nevada Hospital Quality Compare* – available at [www.nvhospitalquality.net](http://www.nvhospitalquality.net)



# Agency for Healthcare Research and Quality (AHRQ) Quality Indicators (QIs)

- Inpatient Quality Indicators
- Patient Safety Indicators
- Prevention Quality Indictors
- Pediatric Quality Indicators



# Key Differences Between AHRQ QIs and CMS Quality Measures

AHRQ

CMS

<b>Data Collection Methodology</b>	Administrative Data	Clinical Data Collection
<b>Quality Measure Type</b>	Outcome Measure	Process Measure



# Current AHRQ QI Uses

- Public reporting
- Pay for Performance (P4P) Initiatives
- State and regional hospital associations' member only reports
- Internal hospital quality improvement
- Research
- National quality reports
- State agencies' safety monitoring and internal analyses





# What Are Other States Doing?

- Utah: PricePoint and CheckPoint <http://www.utcheckpoint.org/>  
<http://utpricepoint.org/>
- Oregon: Hospital Specific Reports  
<http://www.oregon.gov/OHPPR/HQ/>
- Wisconsin: Performance and Progress Reports  
<http://www.wchq.org/usingreports/>
- New York: New York Regional Health Care Report Card  
<http://www.nyshaf.org/>



# AB146 Implementation: Strengths of AHRQ QIs

- Outcome-focused
- Based on administrative data
- Hospital-focused
- Available for public use
- Nationally vetted
- Use in other states – “apples to apples”
- No software investment



# AB146 Implementation: Limitations of AHRQ QIs

- Patient confidentiality concerns due to low volume/sample sizes
- Applicability to all hospitals
- Based on inpatient discharge data only – no outpatient procedures
- Lack depth of clinical detail
- Coding practice variations
- Data validity concerns



# AB146 Implementation: *HealthInsight* Recommendations

- Select subset of AHRQ QIs specific to Nevada market
- QI selection process – collaborative statewide effort
- *HealthInsight* can perform SAS data analysis and coordinate with state entities for report preparation and website display



# Additional Resources

- Agency for Healthcare Research and Quality (AHRQ)

<http://www.qualityindicators.ahrq.gov/>

- National Association of Health Data Organizations (NAHDO)

<http://www.nahdo.org/qualityreports.aspx>



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