Quality Program Measure Trends Analysis Training Video

Version 1

Hello and thank you for listening. Today we will be going over DataGen's Quality Program Measure Trends analysis that you receive through your State Hospital Association or corporate health system. For those who are not familiar, DataGen is a for-profit subsidiary of the Healthcare Association of New York State that analyzes Medicare fee-for-service reimbursement for providers throughout the country.

The Quality Program Measure Trends Analysis provides a comparative view of the quality data collected over time by CMS and used in several Medicare Quality Programs, including but not limited to, the Value Based Purchasing program, Readmissions Reduction Program, and Hospital Acquired Condition reduction program. The analysis also includes Hospital Consumer Assessment of Healthcare Providers and Systems survey data and overall star ratings. Star ratings developed by CMS and included in the Care Compare dataset are not tied to any payment program and thus do not affect reimbursement.

The measures included within the analysis are split into categories, each with their own tab. Hospital performance levels are shown in graphical form for each measure with relevant comparisons to national standards. These standards are intended to give a hospital an indication of how it would perform in the quality programs. National performance comparison groups can be toggled on and off by users. Multiple measures in each domain can be viewed using the scroll bar at the bottom of the graph or by selecting/deselecting measures in the “Measures” filter section on the left.

The graphs in this analysis are set to display hospital performance relative to national average, 25th, 50th, 75th, and 90th percentiles. As a result, the axis for each chart varies. The peer group selection allows Critical Access Hospitals, or CAHS, and small rural hospitals to be compared to all hospitals or just to other CAHs/small rural hospitals and/or Inpatient Prospective Payment System, or IPPS, hospitals to be compared to only other IPPS hospitals.

The start period drop down indicates the oldest Care Compare release of data shown in charts and reports throughout the analysis and can be used to filter out older periods of data from inclusion in those charts and reports. Changing any filter in the controls on the left will reset all filter options below it.

Hospital performance levels are also shown in tabular form. This includes rankings within the nation and the state to show how hospital performance is changing relative to performance across the country. It is important to note that a hospital with performance levels that are not improving at a rate comparable to or better than the nation may have performance levels that are improving but will have a decreasing national rank.

Although state rankings are provided within this analysis, the quality payment programs under study are national programs and therefore the national rank is most relevant to program performance.

This analysis ignores measure case count requirements and therefore, when possible, calculates measure scores for hospitals whose measures do not meet program case count requirements. CMS does not provide a measure score for those measures but provides the data elements to calculate the score. Measure scores that are calculated in this way are indicated by a data row highlighted in gray.

© DataGen®, Inc.

Z-scores are calculated with respect to the measure and data period, with higher z-scores being better. A z-score is the distance from the national mean in units of standard deviation and allows measures on different scales to be compared.

The Bottom Measures tab in the analysis orders measures by z-score and displays the three measures with the lowest z-scores. This tab only reflects the "All" peer group and does not rank CAHs/small rural hospitals against solely CAHs/small rural hospitals or IPPS hospitals against solely IPPS hospitals. Z-scores are compared for the most recent data period for each measure (up to five Care Compare release quarters back). No measures will be ranked if a hospital does not have any data in the last five Care Compare releases and these charts will read "No Data to Graph". Z-scores are not compared for those measures that do not meet case count requirements.

The Notes tabs of the analysis provides data sources used, timeframes, applicable program years for each measure, and other pertinent information.

The Glossary tab of the analysis provides you with definitions for each abbreviation used throughout the analysis, measure IDs, and full measure descriptions.

Measures that CMS has adopted for use in at least one of the included programs for the current program year and forward are included, though some measures do not apply to all program years. Measures collected by CMS that have not been adopted for use in one of the programs but are included in the Care Compare database are not evaluated in this analysis, with the exception of star ratings. Measures that have been finalized for use in one of the included programs, but are lacking complete data in Care Compare, are not evaluated in this analysis. To focus on measures relevant to the quality programs going forward, this analysis does not include measures that CMS has removed from the current program year.

Rankings are not provided for hospitals that do not meet the minimum case count requirement for at least one quality payment program. Hospital counts, case count minimums, and reporting practices by CMS may change from quarter to quarter. This analysis evaluates performance for all PPS and critical access hospitals included in CMS' Care Compare database, not just those included in the programs. Therefore, in some cases, there may be multiple measures that are unavailable for a hospital for all quarters. Data is not shown for releases where data was incomplete or where the measures were not yet being reported. If no data exists for a measure within the chosen timeframe there will be no option in the filters to select the measure.

If you have any questions, please reach out to your State Hospital Association or system representative. Thank you and have a great day.

####

© DataGen®, Inc.