



The influential voice of Nebraska's hospitals

Hospital Quality Reporting: 2021 Updates

March 18, 2021

Hospital Quality Reporting: 2021

Objectives

- Provide updates of major federal and state quality programs in 2021

Disclaimer

- No conflict of interests
- Not inclusive of all quality reporting requirements.

Federal Updates



Use Meaningful Measures to Streamline and Align Quality Measurement



Leverage Measures to Drive Improvement Through Public Reporting and Payment Programs



Improve Quality Measures Efficiency by a Transition to Digital Measures and Use of Advanced Data Analytics



Empower Consumers to Make Best Healthcare Choices through Patient-Directed Quality Measures and Public Transparency



Leverage Quality Measures to Promote Equity and Close Gaps in Care

Federal Updates



● **Promote Effective Communication & Coordination of Care**

Meaningful Measure Areas:

- Medication Management
- Admissions and Readmissions to Hospitals
- Transfer of Health Information and Interoperability

● **Promote Effective Prevention & Treatment of Chronic Disease**

Meaningful Measure Areas:

- Preventive Care
- Management of Chronic Conditions
- Prevention, Treatment, and Management of Mental Health
- Prevention and Treatment of Opioid and Substance Use Disorders
- Risk Adjusted Mortality

● **Work with Communities to Promote Best Practices of Healthy Living**

Meaningful Measure Areas:

- Equity of Care
- Community Engagement

● **Make Care Affordable**

Meaningful Measure Areas:

- Appropriate Use of Healthcare
- Patient-focused Episode of Care
- Risk Adjusted Total Cost of Care

● **Make Care Safer by Reducing Harm Caused in the Delivery of Care**

Meaningful Measure Areas:

- Healthcare-associated infections
- Preventable Healthcare Harm

● **Strengthen Person & Family Engagement as Partners in their Care**

Meaningful Measure Areas:

- Care is Personalized and Aligned with Patient's Goals
- End of Life Care according to Preferences
- Patient's Experience of Care
- Functional Outcomes

Federal Updates

Goals of MM 2.0

Utilize only quality measures of highest value and impact focused on key quality domains

Align measures across value-based programs and across partners, including CMS, federal, and private entities

Prioritize outcome and patient reported measures

Transform measures to fully digital by 2025, and incorporate all-payer data

Develop and implement measures that reflect social and economic determinants



Building Value-Based Care



Quality Payment Program - QPP

Future

- MIPS Value Pathways (MVP)
- APM Performance Pathways

Medicaid & CHIP Quality

- COVI-19 led to setbacks for beneficiary care
 - ✓ Primary care
 - ✓ Preventative
 - ✓ Mental health
 - ✓ Vaccinations
 - ✓ Dental
- Future: “double down on mandatory reporting”

Medicaid & CHIP Quality

2018 - Child/Adult Core Sets

2024 - Mandatory reporting will be implemented and will be required for national Child QMP and Adult Behavioral Health measures

Future Focus

- Timely Data feeds
- Large group data extraction
- All Payer Metrics

Medicare Quality

BFCC – QIO

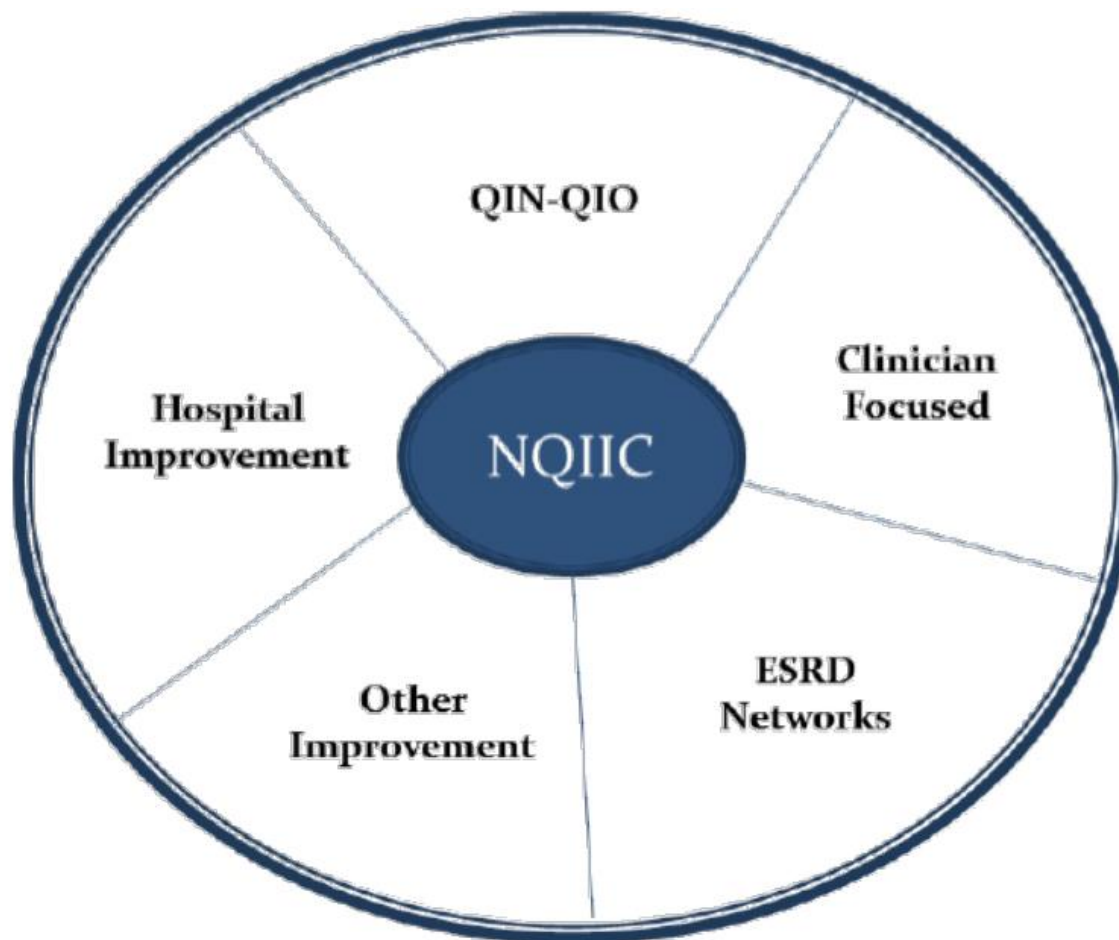
QIN – QIO

HQIC

Making sense of the “alphabet soup.”

Medicare Quality

Network of Quality Improvement and Innovation Contractors



Medicare Quality

- BFCC – QIO - Patient Complaints - Livanta
- QIN – QIO – Post-acute & Communities - TMF
- HQIC – Hospitals – NHA & Telligen

Medicare Quality - Hospitals

Hospital Quality Improvement Contract- HQIC

- Nebraska & Telligen

Measures:

- Adverse Drug Events
- Catheter-Associated Urinary Tract Infection (CAUTI)
- Central Line-Associated Bloodstream Infection (CLABSI)
- *Clostridioides difficile* Infection
- Falls and Immobility
- Multi-Drug Resistant Organisms (MDRO) Infection
- Pressure Ulcers
- Sepsis
- Readmissions
- Surgical Site Infection (SSI)
- Venous Thromboembolism (VTE)

CAH FLEX MBQIP

Core

Patient Safety Inpatient

- Staff Influenza
- Antibiotic Stewardship

Patient Engagement

- HCAHPS

Care Transitions

- Emergency Department Transfer Communication

Outpatient

- AMI Fibrinolytic Therapy and Transfer time
- ED Throughput
 - Arrival to Discharge
 - Left without being seen

Additional

Patient Safety Inpatient

- Healthcare Associated Infections
- Prenatal Care
- Falls
- Adverse Drug Events
- Patient Safety Culture Survey
- Inpatient Influenza Vaccine
- eCQMS - VTE, Opioids, ED Admit Decision time to Departure

Patient Engagement

- ED CAHPS

Care Transitions

- Discharge planning
- Medication Reconciliation
- Swing Bed Care
- Claims Based – readmissions, Complications, Hospital Return Days

Outpatient

- Chest Pain/AMI – aspirin, EKG
- ED Throughput – door to MD evaluation

COVID-19

- Teletracking
- Knowledge Center
- NIISIS

Social Determinants of Health



- Economic Stability
 - Employment
 - Food Insecurity
 - Housing Instability
 - Poverty
- Education
 - Early Childhood Education and Development
 - Enrollment in Higher Education
 - High School Graduation
 - Language and Literacy
- Social and Community Context
 - Civic Participation
 - Discrimination
 - Incarceration
 - Social Cohesion
- Health and Health Care
 - Access to Health Care
 - Access to Primary Care
 - Health Literacy
- Neighborhood and Built Environment
 - Access to Foods that Support Healthy Eating Patterns
 - Crime and Violence
 - Environmental Conditions
 - Quality of Housing

Age- Friendly



- **What Matters:** Know and act on each older adult's specific health outcome goals and care preferences across settings
- **Medications:** If medications are necessary, use Age-Friendly medications that do not interfere with what matters, mentation or mobility.
- **Mentation:** Identify and manage depression, dementia and delirium across care settings.
- **Mobility:** Ensure that older adults at home and in every setting of care move safely every day in order to maintain function and to do what matters.

CMS Star Rating

- **April 2021 Release**
 - Fewer measures
 - Minimum reporting
 - Peer groups
 - Opt out for CAH's
 - Include Veterans in 2023

Questions?

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