



KHC Office Hours
HQIC Priorities to Improve Star Ratings in 2024

January 24, 2024

This material was prepared by the Iowa Healthcare Collaborative, a Compass Hospital Quality Improvement Contractor under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS.






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Agenda

- + Welcome and Announcements- HQIC 2024 Review
- + Presentation- Using HQIC Priorities to improve CMS Star Ratings
- + Data Updates
- + Wrap up and next steps

Jan. 24, 2024



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KHC Compass HQIC Team



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Data & Measurement Director



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Quality Improvement Advisor



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Quality Improvement Advisor



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Compass HQIC Program Goals

Overall HQIC Progress to CMS Target Goals

1. Increase **patient safety** with a focus on reduction of harm
2. Increase the quality of **care transitions** with a focus on high utilizers
3. Improve behavioral health outcomes with a focus on decreased **opioid misuse**

Topic Area	Met CMS Program Goal
All Cause Harm	Yes
Anticoagulants and Hypoglycemia	Yes
Opoids ADE	Yes
Opoid Prescribing	Yes
Readmissions	Yes

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Compass HQIC Reporting Percentages

Dec 2023

Item Area Measure	Measure Date Range	Compass Data Points	Program Target %	Company Percent Reporting
Respiratory Care Measures				
ADE - Hospital Acquired Anticoagulant-Related Adverse Drug Events - Medicare	Medicare Claims	276/276	75.00	100.00
ADE - Hospital Acquired Hypoglycemia-Related Adverse Drug Events - Medicare	Medicare Claims	276/276	75.00	100.00
ADE - Hospital Acquired Opoid-Related Adverse Drug Events - Medicare	Medicare Claims	276/276	75.00	100.00
CAUTI - NHIN CAUTI Rate - ICI, excluding NCI	NHIN	45/56	75.00	80.34
CAUTI - NHIN CAUTI Rate - ICI + Other ICI	NHIN	238/276	75.00	85.81
CAUTI - Catheter Utilization Rate - All ICI	NHIN	238/276	75.00	85.81
C-DIFF - Healthcare Facility Clostridium difficile Infection Rate	NHIN	224/276	75.00	80.97
CLABSI - NHIN CLABSI Rate - ICI, including NCI	NHIN	45/56	75.00	80.34
CLABSI - NHIN CLABSI Rate - ICI + Other ICI	NHIN	224/276	75.00	80.97
CLABSI - MESA Rate	NHIN	224/276	75.00	91.29
Opoids - High-Dose Opoid Prescribing Upon Discharge - Medicare	Medicare Claims	276/276	75.00	100.00
PHI - Pressure Ulcer Rate, Stage 3+ (AHRQ PSI-03) - Medicare	Medicare Claims	276/276	75.00	100.00
Reassessments - Hospital-wide, All Cause, Unplanned Hospital 30-Day Readmissions - Medicare	Medicare Claims	276/276	75.00	100.00
Sepsis - Sepsis Mortality - Medicare	Medicare Claims	276/276	75.00	100.00
Sepsis - Postoperative Sepsis Rate (AHRQ PSI-12) - Medicare	Medicare Claims	276/276	75.00	100.00

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2024 Compass HQIC Updates

+HQIC Additional Focus Topic Areas

- Staffing and Retention
- Workplace Violence
- High Reliability Organization
- Rural Emergency Hospital

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Compass Data Portal

2024 Quality Improvement Workplan

- + Complete by March 1st, 2024
- + Complete in the Compass Data Portal
- + Select 2-6 priority areas

Workplan 2024

- + Accessing the 2024 Workplan

- + Click on pencil icon

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Compass Data Portal

Health Equity Organizational Assessment (HEOA)

Steps to enter HEOA:

1. Sign into Compass data Portal
2. Select your hospital
3. On left hand side click the drop down by "Facility" and click on "HEOA"

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Compass Data Portal

Patient and Family Engagement (PFE)

Steps to enter PFE:

1. Sign into Compass data Portal
2. Select your hospital
3. On left hand side click the drop down by "Facility" and click on "Monthly Data"

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HQIC Priorities to Improve CMS Star Ratings

How Do You Compare?

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What are CMS Star Ratings?

- Released by CMS in 2016
- Developed to help consumers make more informed decisions
- CMS published hospital quality star ratings on Hospital Compare
- Star Ratings Program is just one of CMS' initiatives to improve health care quality
- Hospitals that earn a 5-star rating generally have better scores in heavily weighted areas

Find & compare providers near you.

Not sure what type of provider you need? [Select a choice about the types of providers.](#)

 Welcome

 Doctors & clinicians

 Hospitals

 Nursing homes including rehab services

 Home health services

Find hospitals near me

Find and compare information about the quality of care at over 4,000 Medicare-certified hospitals, including over 100 Veterans Administration (VA) medical centers and over 50 military hospitals, across the country.

MY LOCATION *

2529 Kansas Highway 58, Haddon...

NAME & TYPE (optional)

Facility name or type



Any content on Hospital Compare about a specific facility is provided pursuant to 42 CFR 100.307. ©2023 CMS.

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How Are Star Ratings Calculated?

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Mortality(7)- 22%

Safety(8)- 22%

Readmission(11)- 22%

Patient Experience(8)- 22%

Timely and Effective Care(13)- 12%

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Mortality

Measures used in the Star Rating

Death rate for heart attack patients	7/1/2018	6/30/2021
Death rate for coronary artery bypass graft (CABG) surgery patients	7/1/2018	6/30/2021
Death rate for chronic obstructive pulmonary disease (COPD) patients	7/1/2018	6/30/2021
Death rate for heart failure patients	7/1/2018	6/30/2021
Death rate for pneumonia patients	7/1/2018	6/30/2021
Death rate for stroke patients	7/1/2018	6/30/2021
Deaths among patients with serious treatable complications after surgery	7/1/2019	6/30/2021

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Patient Experience

Measures used in the Star Rating

Patients who reported that their nurses communicated well	4/1/2021	3/31/2022
Patients who reported that their doctors communicated well	4/1/2021	3/31/2022
Patients who reported that they received help as soon as they wanted	4/1/2021	3/31/2022
Patients who reported that staff explained about medicines before giving it to them	4/1/2021	3/31/2022
Patients who reported that their room and bathroom were clean/ Patients who reported that the area around their room was quiet at night	4/1/2021	3/31/2022
Patients who reported that they were given information about what to do during their recovery at home	4/1/2021	3/31/2022
Patients who understood their care when they left the hospital	4/1/2021	3/31/2022
Patients who gave their hospital a rating on a scale from 0 (lowest) to 10 (highest)/ Patients who would recommend the hospital to their friends and family	4/1/2021	3/31/2022

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Timely & Effective Care

Measures used in the Star Rating

Percentage of healthcare workers given influenza vaccination	10/1/2021	3/31/2022
COVID-19 vaccination coverage among health care providers	1/1/2022	3/31/2022
Percentage of patients who left the emergency department before being seen	1/1/2021	12/31/2021
Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival	4/1/2021	3/31/2022
Percentage of patients receiving appropriate recommendation for follow-up screening colonoscopy	1/1/2021	12/31/2021
Percentage of mothers whose deliveries were scheduled too early (1-2 weeks early), when a scheduled delivery was not medically necessary	4/1/2021	3/31/2022
Percentage of patients who received appropriate care for severe sepsis and septic shock	4/1/2021	3/31/2022
Percentage of outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival	4/1/2021	3/31/2022
Average (median) number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital	4/1/2021	3/31/2022
Average (median) time patients spent in the emergency department before leaving from the visit	4/1/2021	3/31/2022
Percentage of outpatients with low-back pain who had an MRI without trying recommended treatments first, such as physical therapy	7/1/2020	6/30/2021
Percentage of outpatient CT scans of the abdomen that were "combination" (double) scans	7/1/2020	6/30/2021
Percentage of outpatients who got cardiac imaging stress tests before low-risk outpatient surgery	7/1/2020	6/30/2024

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Safety of Care

Measures used in the Star Rating

Central line-associated bloodstream infections (CLABSI)	4/1/2021	3/31/2022
Catheter-associated urinary tract infections (CAUTI)	4/1/2021	3/31/2022
Surgical site infections from colon surgery (SSI: Colon)	4/1/2021	3/31/2022
Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy)	4/1/2021	3/31/2022
Methicillin-resistant Staphylococcus aureus (MRSA) Blood Laboratory-identified Events (Bloodstream infections)	4/1/2021	3/31/2022
Clostridium difficile (C. diff) Laboratory-identified Events (Intestinal infections)	4/1/2021	3/31/2022
Rate of complications for hip/knee replacement patients	4/1/2018	3/31/2021
Serious complications	7/1/2019	6/30/2021

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Readmission

Measures used in the Star Rating

Hospital return days for heart attack patients	7/1/2018	6/30/2021
Rate of readmission for coronary artery bypass graft (CABG) surgery patients	7/1/2018	6/30/2021
Rate of readmission for chronic obstructive pulmonary disease (COPD) patients	7/1/2018	6/30/2021
Hospital return days for heart failure patients	7/1/2018	6/30/2021
Rate of readmission after hip/knee surgery	7/1/2018	6/30/2021
Hospital return days for pneumonia patients	7/1/2018	6/30/2021
Rate of readmission after discharge from hospital (hospital-wide)	7/1/2020	6/30/2021
Rate of unplanned hospital visits after an outpatient colonoscopy	1/1/2019	12/31/2021
Rate of unplanned hospital visits for patients receiving outpatient chemotherapy	1/1/2021	12/31/2021
Rate of emergency department visits for patients receiving outpatient chemotherapy	1/1/2021	12/31/2021
Ratio of unplanned hospital visits after hospital outpatient surgery	1/1/2021	12/31/2021

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- Preserves some year-to-year stability, but ratings remain volatile for hospitals reporting fewer measures
- Under CMS' new peer grouping approach, 74% of hospitals are scored on all five measure groups with the remaining 26% split across the 14 combinations of measure groups
- Star Ratings remain volatile for hospitals reporting fewer measures, especially smaller, rural hospitals and critical access hospitals (CAHs).
- Ongoing systematic assessment of the methodology is vital, and CMS should evaluate potential approaches that make the basis of ratings more equitable.



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Resources



- + [Overall Hospital Quality Star Rating \(LINK\)](#)
- + [Medicare.gov \(LINK\)](#)
- + Measure update frequency can be found at [CMS Data Collection Periods \(LINK\)](#)
- + **Data Collection Period dates can be found:**
 - * In the Hospital-Specific Report, Table 3, Column J
 - * On QualityNet Overall Hospital Rating Data Collection web page at [QualityNet \(LINK\)](#)
 - * In the Hospital-Specific Report User Guide(HUG) that is sent with your HSR Report.
 - * A copy of the HUG can also be found on QualityNet Overall Hospital Rating web page at [QualityNet \(LINK\)](#)

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Data Updates

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Star Ratings in Kansas

Data Released November 8, 2023

- + Among **ALL** Kansas hospitals (141):

*****	11
****	10
***	13
**	7
*	3
N/A	97 (69%)
- + In KS HQIC Network, 22 facilities have a rating
- + Many facilities have a rating in some years, but not every year.


Data from <https://data.cms.gov>: Hospital General Information file; Released Nov 8, 2023

Current Kansas 5-star Facilities

AdventHealth Shawnee Mission
Colmery-O'Neil VA Medical Center
Kansas Surgery and Recovery Center
Pratt Regional Medical Center
Providence Medical Center
Saint John Hospital
Saint Lukes South Hospital
The University of Kansas Hospital
Via Christi Hospital on St. Teresa
Wesley Medical Center
Wichita VA Medical Center

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- + You might have one next year!
- + Put your organization in the best position for a better rating by building your quality program.
- + Take advantage of QHi
 - HCAHPS Measure Set
 - KHC Compass NHSN



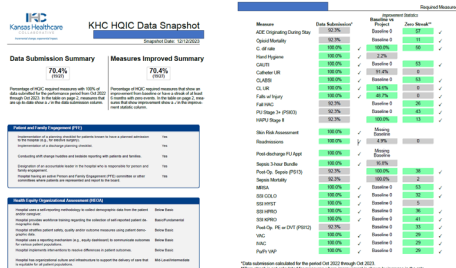
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- + Data is due at the end of the month—reflecting the previous month
- + Data Refresh
 - Administrative Claims and NHSN transferred to QHI
 - QHI data are sent to Compass (except for NHSN)
 - Current Data Refresh: 1/10/2024
 - Next Refresh: **On or around February 8, 2023**
- + Reports – Emailed from your QIA (Erin or Julia)
 - Compass HQIC Data Completeness Report
 - KHC Compass Data Snapshot Report
 - New dashboard report

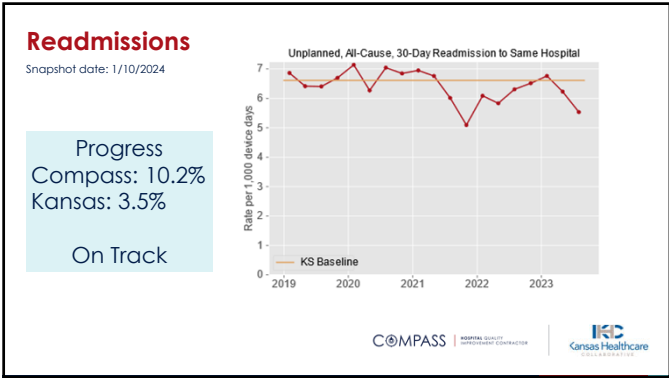


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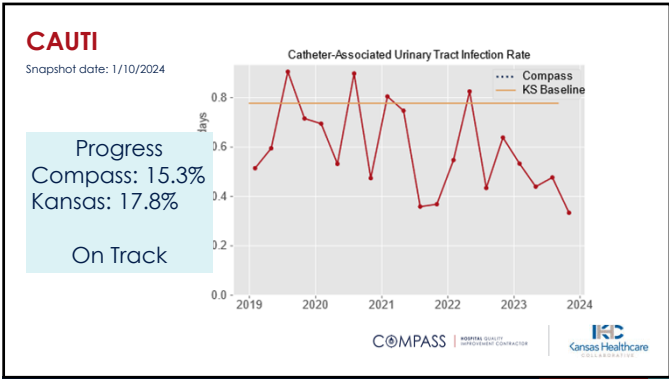
2 Page dashboard



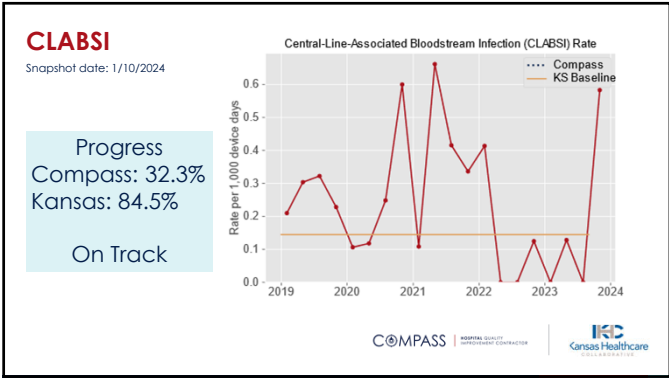
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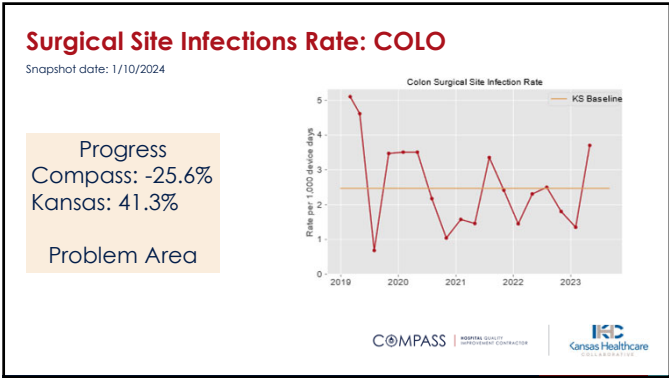
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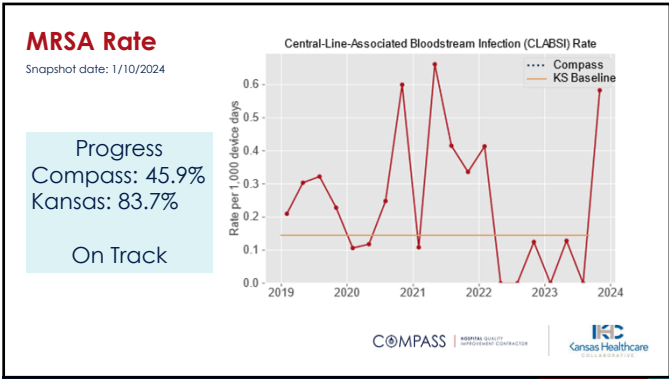
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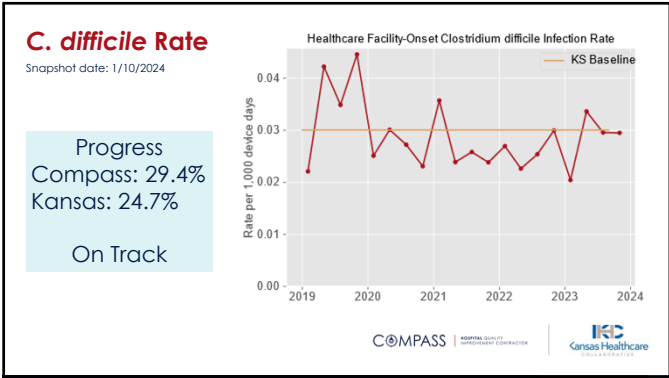
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Wrap Up:
Upcoming Events and
Next Steps

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KHC Office Hours

2024 KHC Office Hours Series
An Education Series for Clinics and Hospitals

February 28

Addressing SDOH in Rural Communities

March 27

Sepsis Abstraction/Internal Validation: How do You Measure Up?

April 24

Health Care Apprenticeship as a Workforce Strategy

May 24

Applying High Reliability Concepts in Critical Access Hospitals

June 26

Advanced Directives are for the Living - Improving Workflows in Your Organization

July 24

PFAC: Are Your Teams Engaged?

September 25

HQIC Wrap-Up and Celebration

October 23

Applying Area-based Measures Data in Your Improvement Efforts

Register here: https://zoom.us/webinar/register/WN_MTqutSh9Qs6mr6LhTvlVzw

All sessions are recorded and
posted to KHC Education Archive
at www.khconline.org/archive.

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Upcoming Compass HQIC Events

▪ Back to Basics: Team Building for Hospital Quality Leaders

Tuesday, January 30, 2024, from 1:00-2:00 PM CT

Register: https://us06web.zoom.us/webinar/register/WN_mc4o2RY4SqrUFJiJwRIYw%23/registration

▪ 2024 Compass Infection Prevention Office Hour

Quarterly beginning February 7, 2024, from 1:00-1:45 PM CT

Register: <https://us06web.zoom.us/meeting/register/17EqdOCpzzsHtSSPaxlXFFn1p6HkU7-W%23/registration>

▪ Communication Conundrums

Monday, February 12, 2024, from 1:00-2:00PM CT

Register: https://us06web.zoom.us/webinar/register/WN_U7FYEDPhQUghPKPdpXeCRA#/registration

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Kansas Healthcare Collaborative
www.khconline.org (785) 235-0763

Upcoming KHC Webinar

**Updates on Health Professional Shortage Area (HPSA) Designations
Featuring KDHE's Office of Primary Care & Rural Health**

Thursday, February 15, 2024
11:30 a.m. to 12:30 p.m. CT

Speakers: Ashley Wallace and Britney Nasser with
KDHE's Office of Primary Care and Rural Health

Ashley Wallace and Britney Nasser from KDHE's Office of Primary Care and Rural Health will
discuss the latest changes to Kansas HPSA designations, what their office is doing in
response to these changes and how the changes may impact Kansas health care
organizations.

[Register Here](#)

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Next Steps

- Set your Q.I. Work Plan for 2024 using the IHC Portal
- NHSN Annual Survey is Due March 1st, 2024
- Ensure data entry is current and timely
- Log into ICompass Forum and ICompass Academy to engage and learn
- Watch your inbox for the Compass Navigator on Feb. 1st

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Questions?



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Have Questions, Need Help?

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→ Find contact info and more at:
www.KHOnline.org/staff



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