

NATIONAL VOLUNTARY HOSPITAL REPORTING INITIATIVE
(Aka by the public-private partnership as “A Public Resource on Hospital Performance”)

FACT SHEET

The American Hospital Association (AHA), the Federation of American Hospitals (FAH), and the Association of American Medical Colleges (AAMC) have launched a national voluntary initiative to collect and report hospital quality performance information. This effort is intended to make critical information about hospital performance accessible to the public and to inform and invigorate efforts to improve quality. Voluntary reporting is an essential first step to realize this goal. This project builds upon previous CMS and QIO strategies to identify illnesses and/or clinical conditions that affect Medicare beneficiaries in order to: promote the best medical practices associated with the targeted clinical disorders; prevent or reduce further instances of these selected clinical disorders; and prevent related complications.

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the National Quality Forum (NQF), the Centers for Medicare & Medicaid Services (CMS), and the Agency for Healthcare Research and Quality (AHRQ) support this initiative as the beginning of an ongoing effort to make hospital performance information more accessible to the public, payers, and providers of care. NQF, JCAHO, CMS, and AHRQ are providing the technical assistance in developing and/or identifying quality measures; and in making the information accessible, understandable and relevant to the public.

Hospital recruitment/information

The Quality Initiative: A Public Resource on Hospital Performance led by the American Hospital Association, Federation of American Hospitals, and Association of American Medical Colleges

Need

There is growing consensus among a broad array of federal, state, industry, union, employer and consumer stakeholders around the importance of public reporting of hospital quality measures, including those that measure clinical outcomes and the patient’s perception of care. Over time, public reporting will give consumers needed information about the health care system that may help them make more informed decisions about their care. Valid, reliable, comparable and salient quality measures have been shown to provide a potent stimulus for clinicians and providers to improve the

quality of the care they provide. This voluntary reporting initiative is a significant step toward a more informed public and sustained health care quality improvement.

Intent

The purpose of this effort is to:

- Provide useful and valid information about hospital quality to the public;
- Give providers a sense of predictability about public reporting expectations;
- Standardize data collection priorities and mechanisms;
- Support physicians and other clinicians in their ability to provide quality care to patients; and
- Enhance hospitals' efforts to improve the care they deliver.

Collaboration

These national private sector organizations have stepped forward to partner with government to align their quality measurement and improvement efforts to be more effective and efficient as they work to improve health care. In partnership, health care providers and government will be more effective in promoting improvements in care and in helping the public become better informed. Further, this voluntary reporting collaboration will provide a strong foundation for the identification and use of a standard set of valid, reliable, comparable, salient measures across federal, state and private sector quality improvement efforts.

Commitment

The focus of the national public reporting of hospital measures and the associated quality improvement work will be on a common set of priorities that relate to medical conditions or aspects of care, and patients' perceptions of care. The hospital associations will work with their members to voluntarily share with the public the performance measures created through this process.

First Steps

Measures - To get started quickly, hospitals have begun with 10 JCAHO/CMS – developed NQF – endorsed measures that are feasible to be publicly reported immediately.

Condition: Acute Myocardial Infarction

Measures: Aspirin at arrival, Aspirin at discharge, Beta blocker at arrival, Beta blocker at discharge, ACE inhibitor for left ventricular systolic dysfunction

Condition: Heart Failure

Measures: Left ventricular function assessment, ACE inhibitor for left ventricular systolic dysfunction

Condition: Pneumonia

Measures: Initial antibiotic timing, Pneumococcal vaccination, Oxygenation assessment

Technical Assistance – JCAHO, NQF, CMS, and AHRQ are providing technical assistance regarding the quality measures, making the information accessible and understandable to the public, and fostering quality improvement. In particular, CMS is making technical assistance in quality improvement activities through the federally funded Medicare Quality Improvement Organizations in each state, and will report this quality information on www.cms.hhs.gov.

3 State Pilot – CMS has implemented a complimentary effort, a 3 state pilot project to test and refine a standardized ‘Patient Perspectives of Care’ survey (H-CAHPS) instrument for national use. In addition, this pilot project will test and refine consumer messages about hospital quality, allowing CMS to create ‘Hospital Compare on www.medicare.gov. Pilot states include New York, Maryland, and Arizona (see CMS Hospital State Pilot Project).

Subsequent Steps

Future priorities and measures will be informed by a report from the Institute of Medicine (IOM) that identifies 20 priority areas for quality improvement. Measures will be drawn from those endorsed by the NQF; measures will be sought that respond to the 6 aims set forth in IOM’s Crossing the Quality Chase, and where possible will include cross-cutting measures. The entire spectrum of stakeholders will be engaged to work toward focusing national public reporting of hospital performance on agreed-upon priorities and NQF – endorsed measures. In order to achieve these goals, CMS is implementing a process to be managed through a contract with a designated QIO to expand the set of hospital quality performance measures for public reporting.