



Communicating About Star Ratings & Hospital Acquired Condition Program

District of Columbia Hospital Association



dcha.org



Overview

The Centers for Medicare & Medicaid Services (CMS) plan to update its hospital overall star ratings. It's also expected that CMS will release the performance results from the FY2019 Hospital-acquired Condition (HAC) Reduction Program, including the list of penalized hospitals. Please be ready to address the data as it certainly generates interest from the media.

Hospitals and health systems, through DCHA's Quality Collaborative Network, have long supported transparency on quality. However, CMS's approach to star ratings is flawed and may mislead consumers. In addition, while hospitals strongly support programs to improve patient safety, the HAC Reduction Program results in arbitrary penalties that do not advance patient safety. Despite the concerns from the hospital and health care community, data will still be released.



What should hospitals do?

1

Check your preview reports to make sure you understand your hospital's reported performance.

Prepare key messages and talking points catered to your hospital's results and communication needs.

2



Sample key messages

Rating are all a little different and do not tell the whole story. This means hospitals scores are not the same on all ratings and makes ratings confusing.

Some ratings are not well designed and penalize hospitals that care for severely ill patients and those with complex health needs.

Patients should use a variety of resources when making health care decisions including considering what is important to them and consulting with doctors, nurses and other health care providers.

Hospitals are continuously working on improving quality and patient safety [\[insert your positive quality/safety story here\]](#).

[\[insert your hospital name here\]](#) is committed to keeping patients safe. We support programs that effectively promote patient safety improvements. And we're improving [\[insert your hospital data here\]](#).

Also note that according to a January 2019 preliminary report from the Agency for Healthcare Research and Quality, hospitals generated a 13 percent decline in many HACs between 2014 and 2017. That translates to 20,500 lives saved and nearly \$7.7 billion in health care costs averted.



Background information

Star Ratings

In July 2016, CMS began to report an overall star rating reflecting performance on nearly 60 measures. Hospital associations, the majority of Congress and many other stakeholders voiced significant concerns about the accuracy and meaningfulness of the ratings and urged CMS not to publish the ratings unless and until they could be improved. Nevertheless, CMS published the ratings. In 2017, further analyses identified issues with the execution of CMS's chosen methodology.

CMS temporarily suspended star ratings, proposed several technical updates to its methodology and posted revised ratings in December 2017. CMS planned to update the ratings again in July 2018 using the same methodology. However, hospitals reported hard-to-explain shifts in their performance that could not be explained by changes in underlying measure performance. As a result, CMS postponed the update to allow for further analysis and input. However, CMS has made only very modest changes to the methodology for February 2019.

HAC Reduction Program

The HAC Reduction Program imposes a 1 percent reduction to Medicare inpatient payments for hospitals in the worst performing quartile (25 percent) of risk-adjusted national HAC rates. Affected hospitals were informed by CMS that they would receive a penalty in the fall of 2018 and are being penalized for discharges from Oct. 1, 2018 to Sept. 30, 2019.

For FY2019, hospital performance in the program is determined using six measures split into two measurement domains. One domain, which comprises 85 percent of a hospital's score, includes five healthcare-associated infection (HAI) measures – central line-associated bloodstream infections, catheter-associated urinary tract infections, surgical-site infections, Methicillin resistant staphylococcus aureus infections, and Clostridium difficile infections. The remaining 15 percent of a hospital score is determined by a Medicare claims data-derived Patient Safety Indicator composite measure (PSI 90) that combines performance on several safety indicators, such as pressure ulcers, post-operative hip fractures and post-operative blood clots.