



AHRQ Quality Indicators

Maryland Health Services
Cost Review Commission
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Overview

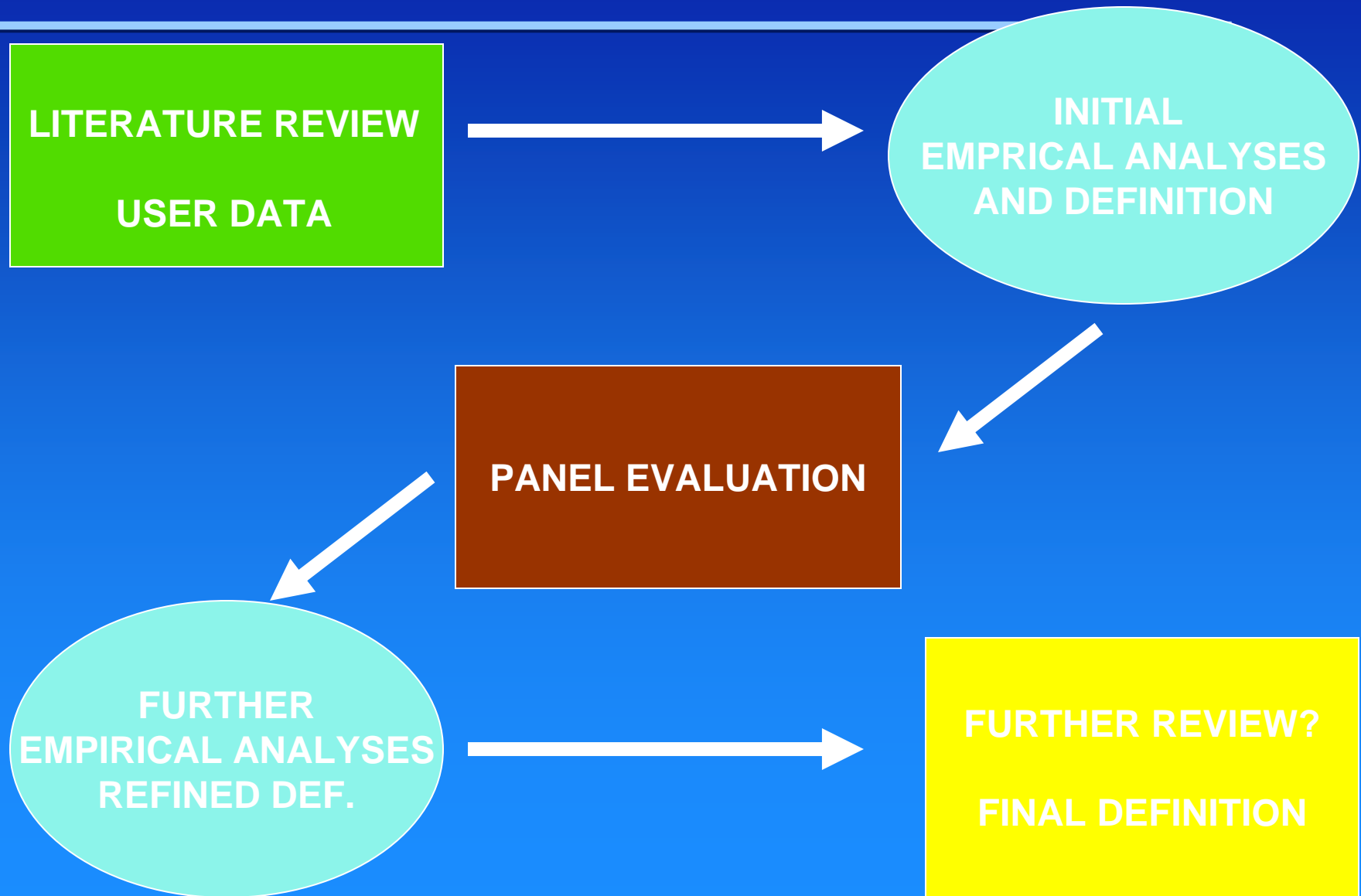
- AHRQ Quality Indicators
- Current Uses of the Quality Indicators
- Case Studies of P4P
- Future Enhancements



AHRQ Quality Indicators (QIs)

- Developed through contract with UCSF-Stanford Evidence-based Practice Center
- Use existing hospital discharge data, based on readily available data elements
- Incorporate severity adjustment methods (APR-DRGs, comorbidity groupings) in IQIs
- Current modules: Prevention QIs, Inpatient QIs, and Patient Safety Indicators

Example Indicator Evaluation





Overview of AHRQ QIs

- Prevention Quality Indicators
- Inpatient Quality Indicators
- Patient Safety Indicators
- Ambulatory care sensitive conditions
- Mortality following procedures
- Mortality for medical conditions
- Utilization of procedures
- Volume of procedures
- Post-operative complications
- Iatrogenic conditions



Structure of AHRQ QI

- Definitions based on
 - ICD-9-CM diagnosis and procedure codes
 - Often along with DRG, MDC, sex, age, procedure dates, admission type, admission source, discharge disposition, discharge quarter (new)
- Numerator is the number of cases “flagged” with the outcome of interest (e.g., Postoperative sepsis, avoidable hospitalization for asthma, death)
- Denominator is the population at risk (e.g. pneumonia patients, elective surgical patients, county population from census data)
- The observed rate is numerator / denominator
- Volume counts for selected procedures



Advantages

■ Public Access

- All development documentation and details on each indicator available on website www.qualityindicators.ahrq.gov
- Software available to download at no cost
- Standardized indicator definitions
- Can be used with any administrative data: HCUP, MedPac, state datasets, payer data, hospital internal data



Advantages (cont'd)

■ Scope

- 79 individual measures, will be more
- Each measure can be stratified by other variables including patient race, age, sex, provider, geographic region
- Include priority populations and areas: Child health, women's health (pregnancy and child-birth), diabetes, hypertension, ischemic heart disease, stroke, asthma, patient safety, preventative care
- Focus on acute care but do cross over to community and outpatient care delivery settings.



Advantages

- Indicator Maintenance
- National Benchmarks
 - National Healthcare Quality Report
 - National Healthcare Disparities Report
 - HCUPnet



The on-line query system to analyze health statistics and information on hospital stays at the national, regional, and state level.

- Skip Navigation
- HCUPnet Home
 - HELP
 - Medical dictionary
 - What is HCUP ?



If you are interested in your feedback. Please contact us at help@ahrq.gov.



HCUPnet is based on aggregate statistics tables to speed up data transfer and protect individual records, so that all possible queries can be addressed. If a query is not possible, HCUPnet will not allow you to choose certain parameters. If there is a query you'd like to see that HCUPnet does not support, please write us at help@ahrq.gov.



Welcome to HCUPnet.

Click the buttons to make a selection. Click the hyperlinks for information and definitions.

- National Statistics**
National and regional estimates on hospital use for all patients from the HCUP [Nationwide Inpatient Sample \(NIS\)](#).
- For Children Only**
National estimates on use of hospitals by children (age 0-17 years) from the HCUP [Kids' Inpatient Database \(KID\)](#).
- State Statistics**
Information on stays in hospitals for participating states from the HCUP [State Inpatient Databases \(SID\)](#).
- Quick National Statistics**
Ready-to-use tables on commonly requested information from the HCUP [Nationwide Inpatient Sample \(NIS\)](#).
- AHRQ Quality Indicators**
National information on measures of health care quality based on the NIS, using the AHRQ [Quality Indicators \(QIs\)](#).

>> Next >>

The statistics in HCUPnet would not be possible without statewide data collection projects that provide data to HCUP.

What's New

- More user-friendly interface, more definitions, more background information.
- Separate query paths for lay users and for researchers.
- A navigation bar that allows you to backtrack to any point in your query.
- Improved export and printing features.
- New cost information for national hospital stays for 2000.
- Standard errors for national estimates with module for significance testing.
- Completely sortable Quick Tables.
- De-duplicated all-listed diagnoses and procedures counts discharges rather than diagnoses and procedures.



Limitations

- Data-known limitations of administrative data
- Developed for quality improvement, evaluations conducted within that context
- Risk-adjustment limitations
- Evidence-base timing: Research vs. demand for information



General Uses of the AHRQ QIs

- Hospital Quality Improvement – Internal and External
 - Individual hospitals and health care systems
 - Hospital association member-only reports
- National, State and Regional Reporting
 - National Healthcare Quality/Disparities Reports
- Public Reporting by Hospital
 - Texas, New York, Colorado, Oregon, Massachusetts, Wisconsin
- Pay-for-Performance by Hospital
 - CMS/Premier Demo, Anthem of Virginia
- Hospital Profiling
 - Blue Cross/Blue Shield of Illinois



Pay for Performance: Case Studies

- CMS/Premier Demonstration Project
- Blue Cross/Blue Shield of Illinois
- Anthem BC/BS Virginia Pay for Performance Project



National Comparative Reporting: Pay for Performance

- CMS / Premier: Pay for Performance Demonstration Project
 - Two PSIs
 - Postoperative hemorrhage or hematoma and
 - Postoperative physiological and metabolic derangement
 - In two distinct patient populations - hip and knee replacement and CABG
 - Will create composite score (quality and safety)



State Level Comparative Reporting: Pay for Performance (cont.)

- Blue Cross Blue Shield of Illinois (BCBSIL)
 - Hospital Profiles include multiple aspects of hospital performance. Indicators include:
 - Compliance with the Leapfrog standards
 - AHRQ Quality Indicators – Inpatient and Patient Safety for 2004 profiles
 - Hospital-specific satisfaction and quality indicators from the BCBSIL
 - Accreditation status
 - Percentage of board certified physicians
 - And several other indicators...



State Level Comparative Reporting: Pay for Performance (cont.)

- Anthem BC/BS Virginia Pay for Performance Project
 - Hospitals select 2 of 9 PSIs
 - Focus on monitoring patient safety, not on specific scores
 - Virginia Health Information reports to hospitals – hospital compared to peer groups



QI Guidance Document

Guidance for Using the AHRQ Quality Indicators for Hospital-level Public Reporting or Payment



Prevention
Quality Indicators

Inpatient
Quality Indicators

Patient Safety
Indicators

<http://www.qualityindicators.ahrq.gov/>



Guidance Document - Highlights

- Does not endorse any individual or set of QIs for hospital level public reporting or P4P
- Notes all potentially appropriate based on:
 - Program purpose / goals
 - Data availability
 - Data quality (integrity, reliability, validity)
- Suggests looking at process and outcome measures for a more complete picture of quality; consider staged implementation; use of composite measures, etc.



Future Enhancements & Activities

- Development of Pediatric QIs (PedQIs): Release will occur two phases
 - First - Refinement of existing QIs to reflect more accurately uniqueness of measurements applied to the pediatric population
 - Second - Development of new QIs



Future Enhancements & Activities

- Expanded contract support
 - Literature review – all QIs
 - Standardization with other measures when possible
 - Evaluation of risk-adjustment methodology
 - Enhance documentation for differing audiences



Future Enhancements & Activities

- Scheduled indicator updates
 - Updates for ICD-9 coding changes – yearly
 - ◆ PQIs: November
 - ◆ IQIs: December
 - ◆ PSIs: January
 - Updates for indicator refinements based on literature review, updated evidence and user feedback – yearly as needed
 - ◆ PQIs: November
 - ◆ IQIs: December
 - ◆ PSIs: January



Future Enhancements & Activities

- Reporting Template
- Composites Development
- NQF Process



For More Information on AHRQ QIs

Additional information and assistance

- E-mail: support@qualityindicators.ahrq.gov
- Website: <http://qualityindicators.ahrq.gov/>
 - QI documentation and software is available
- Support Phone: (888) 512-6090 (voice mail)
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 - 301-427-1317