



Maryland Health Services Cost Review Commission

Potentially Preventable Utilization Measures

Performance Measurement Work Group 02/20/2014



Potentially Avoidable Utilization- Unplanned Care

Definition?

“Hospital care that is unplanned and can be prevented through improved care coordination, effective primary care and improved population health”.

Work and Considerations to date

- ▶ **Readmissions/Revisits**
 - ▶ Inpatient- All Hospital, All Cause 30 Day Readmissions using CMS methodology with adjustment for planned admissions
 - ▶ ED – any visit within 30 days of an inpatient admission
 - ▶ Observation- any observation within 30 days of an inpatient admission
- ▶ **Potentially Avoidable Admissions/Visits**
 - ▶ Inpatient- AHRQ Prevention Quality Indicators (PQIs)
- ▶ **Hospital Acquired Conditions**
 - ▶ Potentially Preventable Complications (PPCs)

Considerations for PAU

- ▶ Incorporation of readmissions and PPCs, in PAU measurement and policies
- ▶ Develop methodologies to calculate outpatient avoidable utilization
 - ▶ Integrating major surgeries and observation cases to the readmission algorithm
 - ▶ Defining potentially avoidable ED visits
- ▶ Evaluate alternative/additional measures
 - ▶ 3M potentially preventable events
 - ▶ Admissions from nursing homes
 - ▶ Overuse/Underuse measures
- ▶ Developing payment incentives to reduce PAUs
 - ▶ Positive incentives for improvement
 - ▶ Update factor considerations
 - ▶ Population growth allowance

Little Overlap Between Inpatient PAU Measures

	Numerator	Percent of Inpatient Discharges	Total Inpatient Charge
Total Readmissions	80,830	11.86%	\$1,178,937,554
Readmission Only	69,659	10.22%	\$1,003,894,719
Readmissions and PQIs	9,127	1.34%	\$98,398,625
Readmissions and PPCs	1,723	0.25%	\$68,781,131
Readmissions and PQIs and PPCs	321	0.05%	\$7,863,077
PQI Only	54,796	8.04%	\$506,620,160
PPC Only	20,183	2.96%	\$336,924,378
PQI and PPCS	1,661	0.24%	\$30,827,555

White Papers on PAU

- ▶ Submitted by:
 - ▶ Maryland Hospital Association
 - ▶ Carefirst
 - ▶ Johns Hopkins Health System
 - ▶ Johns Hopkins School of Public Health
 - ▶ 3M

White Paper Performance Measures

- ▶ Readmissions/Revisits
- ▶ Prevention Quality Indicators
- ▶ Johns Hopkins Overuse Index
- ▶ Per Capita Charges
- ▶ Length of Stay
- ▶ 3M Potentially Preventable Complications
- ▶ 3M Potentially Preventable Events

Readmissions and Revisits

- ▶ Readmissions: all-cause, all-hospital 30 day readmission rate
- ▶ Revisits: ED and or observation stays within 30 days of an inpatient admission (short term measure)

- ▶ HSCRC Concerns:
 - ▶ Should readmissions and/or revisits be incorporated into PAU or be a separate quality program?
 - ▶ Impact of hospital variation in use of observation stays on readmission program

Prevention Quality Indicators

- ▶ Developed by Agency For Health Care Quality and Research
- ▶ http://www.qualityindicators.ahrq.gov/modules/pqi_overview.aspx
- ▶ Also known as Ambulatory Care Sensitive Conditions, that is conditions for which good outpatient care can potentially prevent the hospitalization
- ▶ HSCRC Concerns:
 - ▶ Original intent was community-based measure (per 1,000 population); what will be appropriate denominator for hospital measure?

Johns Hopkins Overuse Index

Jodi Segal, Najilla Nassery, Hsien-Yen Cheng, Eva Chang, Kitty Chan, John Bridges

- ▶ Composite measure of systematic overuse
- ▶ Extensive clinical review of potentially overused procedures
- ▶ 20 equally weighted procedures in final measure
- ▶ Index was positively correlated with total costs, mortality, inpatient days, ICU days
- ▶ HSCRC Concerns:
 - ▶ Measure uses group of potentially overused indicators as proxy for overuse in general
 - ▶ Indicators included were only for Medicare and would need to be validated and refined for an all-payer model
 - ▶ Requires additional data sources

Per Capita Charges and Length of Stay

▶ HSCRC Concerns:

- ▶ Denominator? Assignment of population to a hospital for per capita calculation
- ▶ The impact of Medicare two midnight rule
- ▶ Shift of short stay admissions to observation

3M Potentially Preventable Events

- ▶ Potentially Preventable Complications
- ▶ Potentially Preventable Readmissions
- ▶ Potentially Preventable Admissions
- ▶ Potentially Preventable Emergency Room Visits
- ▶ Potentially Preventable Ancillary Services
- ▶ HSCRC Concerns:
 - ▶ Implementation timing and validation
 - ▶ Requires non-hospital claims for ancillary services

Population Focused Preventables

Thank you!

