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MEMORANDUM

To: HSCRC Quality-based Reimbursement Initiation Work Group and Subcommittee Members

From: Robert Murray 

RE: Sharing of IWG Analyses

Date: January 25, 2008

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During the meeting of the Health Services Cost Review Commission (HSCRC) Quality-based Reimbursement Initiation Work Group (IWG) held on January 4, 2008, the question arose as to whether hospital-identified analyses could be shared with certain personnel at Maryland hospitals in order to gain the benefit of obtaining commentary from hospital personnel who are experienced in quality and patient safety measurement and reporting. This memorandum is designed to clarify the parameters under which such hospital-identified information may be shared with hospital personnel.

By the summer of 2007, all hospitals had signed a consent agreement authorizing the sharing of aggregate hospital-identified data from the Quality Improvement Organization (QIO) clinical data warehouse to the HSCRC, its Initiation Work Group, and all Maryland acute care hospitals for purposes relating to the HSCRC quality-based reimbursement initiative. Under the data use agreement issued by the Delmarva Foundation, IWG subcommittee members may receive the same level of data provided to the IWG.

Based on the provisions of the data use agreement and hospital consent agreements, it is the policy of the HSCRC that:

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Sharing of IWG Analyses

1. Hospital-identified analyses produced pursuant to the deliberations of the HSCRC Initiation Work Group and its requisite Subcommittee(s) may be shared with appropriate individuals at Maryland hospitals that have signed the HSCRC authorization form for the sharing of aggregate hospital-identified data. The intent is to obtain input from individuals at hospitals who are able to provide constructive input regarding the data, methodologies, and analyses associated with the development of the HSCRC Quality-based reimbursement project.
2. Confidential documents must be clearly marked as "CONFIDENTIAL" and titled "Preliminary."
3. A summary of the methodology used to yield the results of the analysis must be clearly stated and attached to the analysis.
4. Analyses must include documentation of the source and timing of the data used for the analysis as well as confirmation that the analysis was performed for the purposes of the HSCRC quality-based reimbursement project.

As a result of its representation on the IWG Subcommittee, the Maryland Hospital Association may share information with hospital personnel provided that the sharing of such information complies with the conditions set forth in this memorandum.

Any hospital that violates the provisions of this memorandum may be subject to all penalties as provided for in applicable law and regulation.