

## Proposed Measures for Hospital Public Reporting

#	Measure Name	Measure Type	NQF #	Measure Steward	Set	Proposed Measure Uses			
						Public Reporting/ Transparency	Monitoring Health Care	Provider Tiering	Consumer Decision-Making
1	Statin Prescribed at Discharge (AMI 10)	Mandated Process	639	CMS	AMI	X	X		
2	Aspirin Prescribed at Discharge for AMI (AMI 2)	Mandated Process	142	CMS	AMI	X	X		
3	Primary Percutaneous Coronary Intervention (PCI) received within 90 minutes of Hospital Arrival (AMI 8a)	Mandated Process	163	CMS	AMI	X		X	
4	Fibrinolytic Therapy received within 30 minutes of hospital arrival (AMI 7a)	Mandated Process	164	CMS	AMI	X	X		
5	Detailed Discharge Instructions (HF 1)	Mandated Process	136	CMS	HF	X	X		
6	Evaluation of Left Ventricular Systolic Function (LVS) (HF 2)	Mandated Process	135	CMS	HF	X	X		
7	ACEI or ARB for Left Ventricular Systolic Dysfunction (LVSD) (HF 3)	Mandated Process	162	CMS	HF	X	X		
8	Initial Antibiotic Selection for Community-acquired Pneumonia (CAP) in Immunocompetent Patients (PN 6)	Mandated Process	147	CMS	PN	X			
9	Blood cultures performed in the emergency department prior to initial antibiotic received in hospital (PN-3b)	Mandated Process		CMS	PN	X			
10	Surgery Patients with Recommended Venous Thromboembolism (VTE) Prophylaxis Ordered (SCIP-VTE-1)	Mandated Process	217	CMS	SCIP	X		X	
11	Surgery Patients Who Received Appropriate Venous Thromboembolism (VTE) Prophylaxis Within 24 Hours Prior to Surgery to 24 Hours After Surgery End Time (SCIP-VTE-2)	Mandated Process	218	CMS	SCIP	X		X	
12	Surgery patients on beta blocker therapy prior to admission who received a beta blocker during the perioperative period (SCIP-Card-2)	Mandated Process	284	CMS	SCIP	X		X	
13	Cardiac Patients with Controlled Postoperative Blood Glucose (SCIP-Inf-4)	Mandated Process	300	CMS	SCIP	X		X	
14	Surgery Patients with Perioperative Temperature Management (SCIP-Inf-10)	Mandated Process	452	CMS	SCIP	X		X	
15	Urinary catheter removed on Postoperative Day 1 (POD1) or Postoperative Day 2 (POD2) with day of surgery being day zero (SCIP-Inf-9)	Mandated Process	453	CMS	SCIP	X		X	
16	Prophylactic Antibiotic Received Within 1 hour Prior to Surgical Incision (SCIP-Inf-1a)	Mandated Process	527	CMS	SCIP	X		X	
17	Prophylactic antibiotic selection for surgical patients (SCIP-Inf-2a)	Mandated Process	528	CMS	SCIP	X		X	
18	Prophylactic Antibiotics Discontinued Within 24 hours After Surgery End Time (SCIP-Inf-3a)	Mandated Process	529	CMS	SCIP	X		X	
19	Rate of Babies Electively Delivered Before Full-Term	Other Process		Leapfrog		X			X
20	Obstetric Trauma - Vaginal Delivery without Instrument (PSI 19)	Safety Outcome		AHRQ	PSI	X			X
21	Obstetric Trauma - Vaginal Delivery with Instrument (PSI 18)	Safety Outcome		AHRQ	PSI	X			X
22	Birth Trauma Rate: Injury to Neonates (PSI 17)	Safety Outcome		AHRQ	PSI	X			X
23	Accidental Puncture or Laceration Rate (PSI 15)	Safety Outcome	345	AHRQ	PSI	X			
24	Iatrogenic Pneumothorax Rate (PSI 6)	Safety Outcome	346	AHRQ	PSI	X			
25	Postoperative Pulmonary Embolism or Deep Vein Thrombosis Rate (PSI 12)	Safety Outcome	450	AHRQ	PSI	X			
26	Postoperative Respiratory Failure Rate (PSI 11)	Safety Outcome	533	AHRQ	PSI	X			
27	Pressure Ulcer Rate (PSI 3)	Safety Outcome		AHRQ	PSI	X			X
28	Postoperative Hip Fracture Rate (PSI 8)	Safety Outcome		AHRQ	PSI	X			
29	Central Venous Catheter-Related Blood Stream Infection Rate (PSI 7)	Safety Outcome		AHRQ	PSI	X		X	
30	Hospital-Wide All-Cause Unplanned Readmission	Efficiency/Coord.	1789	CMS/Yale		X			
31	Plan All-cause Readmissions	Efficiency/Coord.	1768	NCQA	HEDIS	X			X
32	HCAHPS and CTM-3	Pt. Experience	166/228	AHRQ	HCAHPS	X			X
33	Computerized Physician Order Entry System	Structural		Leapfrog		X			X

**Proposed Measures for Hospital Public Reporting**

**Measures for Which Data May Not Be Available**

#	Measure Name	Measure Type	NQF #	Measure Steward	Set	Public Report/ Transparency	Monitor Health Care	Provider Tiering	Consumer Decision-Making
1	Timely Transmission of Transition Record (CCM-3)	Other Process		MassHealth	CCM	X			
2	Patients Discharged on Multiple Antipsychotic Medications (HBIPS-4)	Other Process	552	Joint Commission	HBIPS	X			
3	Hospice and Palliative Care - Treatment Preferences	Pt.Centered	1641	UNC-CH		X			X
4	Home Management Plan of Care Document Given to Patient/Caregiver (CAC-3)	Other Process	338	Joint Commission	CAC	X			
5	Use of relievers for inpatient asthma (CAC-1)	Other Process	143	Joint Commission	CAC	X			
6	Use of Systemic Corticosteroids for Inpatient Asthma (CAC-2)	Other Process	144	Joint Commission	CAC	X			

**Measure Use Definitons**

**Public Reporting/Transparency**

Refers to a broad set of indicators used to report to the public, stakeholders and the health policy community about the quality of care delivered in the MA health care market.

**Monitoring the Health Care System**

Refers to measures that are used to monitor trends and changes in care quality over time. Reporting on these measure spotlights areas where performance is deteriorating and/or areas of focus for the public, stakeholders and the health policy community.

**Provider Tiering**

Refers to measures that reflect provider performance that payers may want to encourage/discourage through contracting policies.

**Consumer Decision-Making**

to similar providers and that support consumers in selecting a service, provider, and/or care setting.