

Missouri Transparency Initiative

September 25, 2015

Why Transparency?

- Unprecedented volumes of health care data is being released, but the information is difficult to navigate. Empowering consumers with information they understand will enable value-based decision making, which is essential for positive market change.¹

We want to tell our own story.

¹ HealthSparq, "U.S. Healthcare Reform: The Call for Greater Cost and Quality Transparency."

MHA Board Action — Fall 2014

- Following recommendations from the MHA Price Transparency Workgroup and the MHA Strategic Quality Advisory Committee, the MHA Board of Trustees approved a phased approach for voluntary, hospital-specific public reporting of price and quality data.
 - Hospital-specific data and education has been provided throughout 2015.
 - The public release of price and quality data will be in January 2016.

Transparency Strategy



- Strategy: Support hospitals in implementing the Triple Aim of better health, better care and lower costs
- Goals
 - Reduce variation
 - Coordinate care across the continuum of care
 - Increase transparency through non-competitive methods
 - Implement population-based health management and improvement strategies
- MHA action
 - Focused technical and adaptive support
 - Importance – validity – accuracy – reliability – feasibility
 - Engagement

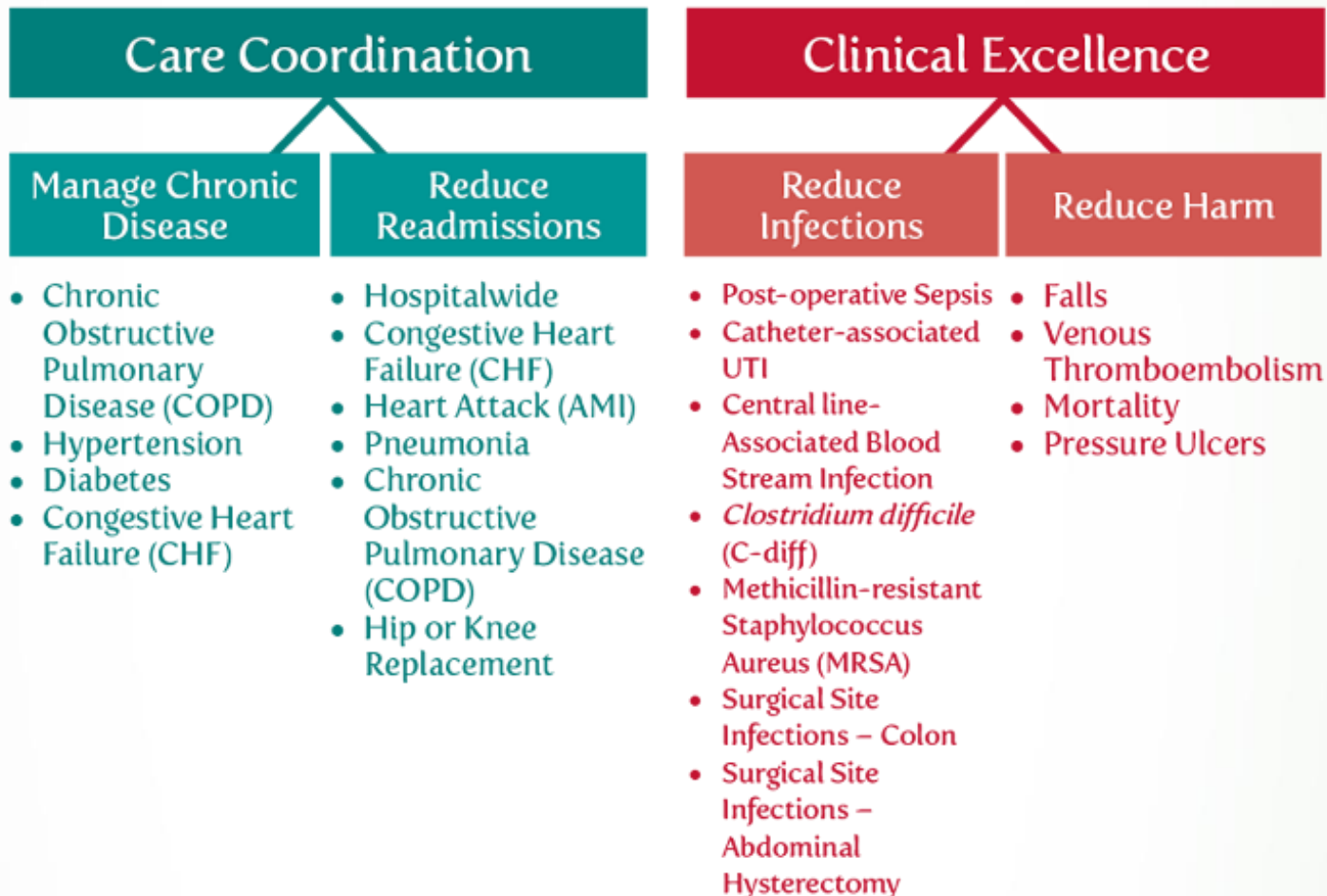
Quality Transparency

Dana Downing
Vice President of Quality Program Development

Topic Analysis: Measure Selection

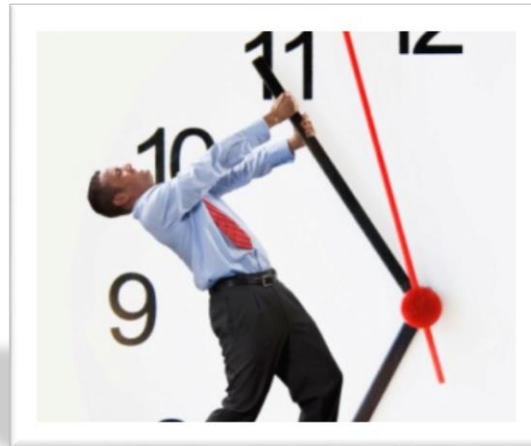
- **Quality of measure**
 - Validity – NQF endorsed
 - Reliability – defined numerator and denominator
 - HEN, eCQM, ACO
 - Claims data to reduce hospital burden
- **Financial implications**
 - Regulatory impact
 - Value-based purchasing
 - Readmission reduction
 - HAC
- **Ability to improve**
 - Variation across state
 - Variation from goal
- **Population health**
 - Align with CHNA
 - Impact through continuum

Quality Measures



Data Source

- Claims data
 - Reduces the burden of collecting measures, therefore providing more time and resources for analysis and implementation
 - Ensures consistent data from facility to facility





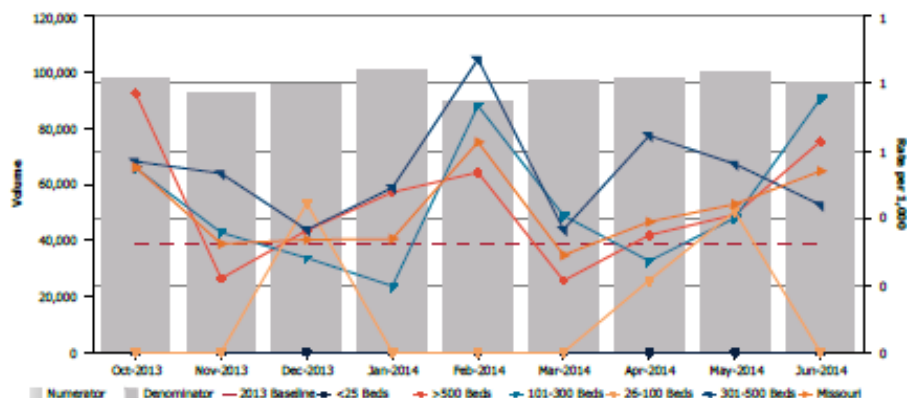
Hospital Quality Reportcard

CAUTIs - Hospital Acquired



Data Definition: Catheter associated urinary tract infections in inpatients developed while a patient in the hospital.

Rationale: CAUTIs are the most common type of infection in U.S. hospitals and account for 35 percent of hospital acquired infections. Research suggests CAUTIs are preventable and that as many as 50 to 70 percent are avoidable (Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services, 2012). In 2014, hospitals that participated in the Missouri Hospital Engagement Network reduced the CAUTI rate by 2 percent through focused evidence-based practice sharing and education (Missouri Hospital Engagement Network, 2014)



		Oct-2013	Nov-2013	Dec-2013	Jan-2014	Feb-2014	Mar-2014	Apr-2014	May-2014	Jun-2014
>50 Beds	Numerator	11	3	5	7	7	3	5	6	9
	Denominator	14,272	13,666	13,783	14,698	13,075	14,084	14,342	14,658	14,342
	Rate per 1,000	0.8	0.2	0.4	0.5	0.5	0.2	0.3	0.4	0.6
301-500 Beds	Numerator	8	7	5	7	11	5	9	8	6
	Denominator	14,088	13,152	13,719	14,292	12,609	13,682	13,953	14,273	13,674
	Rate per 1,000	0.6	0.5	0.4	0.5	0.9	0.4	0.6	0.6	0.4
101-300 Beds	Numerator	8	5	4	3	10	6	4	6	11
	Denominator	14,577	14,038	14,288	15,219	13,628	14,755	14,723	15,012	14,570
	Rate per 1,000	0.5	0.4	0.3	0.2	0.7	0.4	0.3	0.4	0.8
25-100 Beds	Numerator	0	0	2	0	0	0	1	2	0
	Denominator	4,624	4,287	4,512	4,831	4,259	4,654	4,675	4,771	4,565
	Rate per 1,000	0.0	0.0	0.4	0.0	0.0	0.0	0.2	0.4	0.0
<25 Beds	Numerator	0	0	0	0	0	0	0	0	0
	Denominator	1,229	1,146	1,360	1,333	1,170	1,262	1,255	1,206	1,070
	Rate per 1,000	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Missouri	Numerator	27	15	16	17	28	14	19	22	26
	Denominator	49,046	46,483	47,749	50,373	44,741	48,437	48,948	49,920	48,221
	Rate per 1,000	0.6	0.3	0.3	0.3	0.6	0.3	0.4	0.4	0.5

Dashboard Access

- HIDI Analytic Advantage®
 - If you do not have access to HIDI Analytic Advantage®, contact HIDI support at hidi@mhanet.com



Timeline and Resources

Launch Timeline

Action	Status	Implementation Date
Data Use Agreement	89 percent acute and CAHs and 90 percent of all hospitals have signed	September 1
Hospital-specific quality data updates	Quarterly updates on HIDI Analytic Advantage® PLUS	February, May, July, October
Hospital-specific price data updates	Annual updates on HIDI Analytic Advantage® PLUS	September 17
Focus on Hospitals Website	Redesign in process	November 15
Web-based member education	Ongoing throughout 2015	Friday, September 25 Tuesday, November 10
Hospital preview period for all participating hospitals to view all participating data (will require permission)	Pending website readiness	Monday, Nov. 16 – Tuesday, December 15
Public Launch		Friday, January 15

Transparency Resources

Distribution of Resources

Activity	Promoted
Analytic Advantage+ Quality Portal Tutorial	MHA Today, Website, Email, Memo, Monthly Quality Webinars
Quality Measure Technical Manual	MHA Today, Website, Email, Memo, Monthly Quality Webinars
Data Use Agreement and Memo Dissemination	Memo
Missouri Price & Quality Transparency FAQ Sheet	District Council Meetings, MHA Today, MHA Quality Newsletter, Website, WUW

Transparency Education

To date in 2015 includes:

- MHA board meetings
- District council meetings
- Regional quality meetings
- PMG meetings
- Site visits
- Webinars
- HIDI Data Committee, Price Transparency Workgroup and Strategic Quality Committee

Price Transparency

Mary Becker

Senior Vice President of Strategic Partnerships and Communications

Price Data

- 100 most prevalent statewide DRGs for FY2014
- Minimum, maximum and median charges are calculated with outliers removed (the lowest 10 percent and highest 10 percent).
- Outpatient visits are separated into two units of analysis — Emergency Department and Clinical Services.
- ED services will be grouped in the five facility levels. ED admissions won't show in the ED category.
- The top 45 most frequent CCS' for clinical services will be displayed.

Display Guidelines

- Categories for hospitals with less than 20 cases (MS-DRG for IP, Procedure for OP) will not display on the report, but will be included in state aggregate calculation.
- Non-participating hospitals will be listed as non-participating, but will be included in state aggregate calculation.

DRGs

DRGs will be translated into layman's language and grouped into categories similar to Medical Diagnosis Categories

- Nervous System
- Ear, Nose, Mouth and Throat
- Respiratory System
- Circulatory System
- Digestive System
- Hepatobiliary System/Pancreas
- Musculoskeletal/Connective Tissue
- Skin/Subcutaneous Tissue/Breast
- Endocrine/Nutritional/Metabolic
- Kidney/Urinary Tract
- Female Reproductive
- Pregnancy/Childbirth/Newborn and Other Neonates
- Blood/Related
- Neoplasms/Related
- Infection/Parasites
- Mental Disorders
- Substance Abuse
- Injury/Poisoning
- Other Factors

Display of Inpatient Price Data

MDC	MDC Description	DRG	DRG Title	State Discharges	State Median Charges	State Maximum Charges	State Minimum Charges	State Avg LOS
19	MENTAL DISEASES & DISORDERS	885	PSYCHOSES	45,401	\$11,216.30	\$29,034.12	\$4,589.02	5
14	PREG,CHILDBIRTH & PUERPER	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	40,609	\$10,649.63	\$17,756.16	\$5,790.02	2
15	NEWBORNS & OTHER NEONATES	795	NORMAL NEWBORN	31,445	\$3,129.70	\$6,063.70	\$1,664.51	2
08	DS & DISOR OF MUSCULOSKEL	470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC	25,138	\$40,832.30	\$67,721.72	\$26,154.08	2
18	INFECTIOUS & PARASITIC DIS	871	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS W MCC	19,199	\$37,161.50	\$99,953.10	\$13,409.41	5
06	DS & DISOR OF DIGEST SYSTEM	392	ESOPHAGITIS, GASTROENT & MISC DIGEST DISORDERS W/O MCC	16,710	\$15,419.12	\$33,992.01	\$6,243.73	2
14	PREG,CHILDBIRTH & PUERPER	766	CESAREAN SECTION W/O CC/MCC	13,591	\$15,668.43	\$26,680.37	\$9,204.55	3
15	NEWBORNS & OTHER NEONATES	794	NEONATE W OTHER SIGNIFICANT PROBLEMS	13,551	\$4,031.95	\$11,204.47	\$1,984.04	2
23	FACT INFL HLTH STAT & SER	945	REHABILITATION W CC/MCC	12,871	\$30,547.00	\$74,969.51	\$10,188.82	12
09	DS & DISOR OF SKIN	603	CELLULITIS W/O MCC	10,509	\$13,204.00	\$31,948.40	\$5,456.12	3
20	SUBST USE & ORG MEN DISORD	897	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W/O MCC	9,415	\$9,320.19	\$23,273.31	\$3,747.30	3
14	PREG,CHILDBIRTH & PUERPER	765	CESAREAN SECTION W CC/MCC	8,999	\$19,018.20	\$36,399.91	\$10,746.27	3
04	DS & DISOR OF RESP SYSTEM	194	SIMPLE PNEUMONIA & PLEURISY W CC	8,592	\$17,493.63	\$41,262.50	\$7,265.32	3
04	DS & DISOR OF RESP SYSTEM	189	PULMONARY EDEMA & RESPIRATORY FAILURE	8,497	\$25,117.19	\$67,050.97	\$10,163.72	4
05	DS & DISOR OF CIRC SYSTEM	291	HEART FAILURE & SHOCK W MCC	8,256	\$27,496.13	\$70,204.22	\$12,337.42	5
05	DS & DISOR OF CIRC SYSTEM	292	HEART FAILURE & SHOCK W CC	8,017	\$19,713.50	\$44,618.79	\$8,832.67	3
11	DS & DISOR OF KIDNEY & URIN	690	KIDNEY & URINARY TRACT INFECTIONS W/O MCC	7,576	\$14,509.20	\$32,275.16	\$6,232.06	3
14	PREG,CHILDBIRTH & PUERPER	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	7,488	\$12,906.82	\$23,500.00	\$6,845.91	2
18	INFECTIOUS & PARASITIC DIS	872	SEPTICEMIA OR SEVERE SEPSIS W/O MV 96+ HOURS W/O MCC	7,353	\$21,261.73	\$51,418.60	\$9,465.83	4
04	DS & DISOR OF RESP SYSTEM	193	SIMPLE PNEUMONIA & PLEURISY W MCC	7,145	\$26,866.70	\$65,135.68	\$11,466.54	4
10	ENDOCRINE,NUTR & METAB DIS	641	MISC DISORDERS OF NUTRITION,METABOLISM,FLUIDS/ELECTROLYTES W/O MCC	6,898	\$12,893.41	\$32,784.68	\$4,833.06	2
11	DS & DISOR OF KIDNEY & URIN	683	RENAL FAILURE W CC	6,738	\$19,091.09	\$46,670.54	\$8,255.31	3
06	DS & DISOR OF DIGEST SYSTEM	378	G.I. HEMORRHAGE W CC	5,988	\$21,393.23	\$45,792.87	\$9,923.38	3
04	DS & DISOR OF RESP SYSTEM	190	CHRONIC OBSTRUCTIVE PULMONARY DISEASE W MCC	5,836	\$21,784.81	\$52,938.00	\$9,428.72	4
05	DS & DISOR OF CIRC SYSTEM	247	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W/O MCC	5,729	\$59,522.39	\$101,486.68	\$39,736.93	2

Review Period

- Sept. 17 hospitals were notified their price measures were available on HIDI Analytic Advantage[®]

Focus on Hospitals

CURRENT. COMPLETE. ACCURATE.

Missouri's go-to resource for hospital cost, quality, and community health data...

HOSPITAL NAME -OR- ZIP CODE SEARCH

WHAT IS FOCUS ON HOSPITALS?

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Coming Soon!

TYPES OF HOSPITAL DATA



START YOUR HOSPITAL SEARCH NOW

Questions?

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