

Michigan Hospital Medicine Safety (HMS) Consortium Adjusted Performance Measurement Methodology

Historically, to assess performance, HMS utilized data submitted during the last quarter of a given year to allow sites to improve over the course of the year without impacting their pay for performance payment. With the current method, looking at one quarter of data results in unstable and unreliable estimates of a hospital's true performance. To mitigate this issue, the HMS Coordinating Center and the Data, Design, and Publications Committee (DDP) reviewed the current approach and discussed potential solutions with other BCBSM quality collaboratives, statistical/methodologic experts, and reviewed national approaches for performance assessment (i.e. Centers for Medicare & Medicaid Services (CMS)). As an outcome of these discussions, the Coordinating Center has developed a new method to assess hospital performance very similar to the way in which CMS assesses hospital performance nationally. This method has been approved by the HMS Data, Design and Publications subcommittee and Blue Cross Blue Shield of Michigan (BCBSM).

The method for obtaining each hospital's adjusted performance measurement utilizes all available data from the most recent 4 quarters. The collaborative wide average and collaborative wide improvement rate, as well as the average rate and improvement rate of each individual hospital are incorporated into the final adjusted rate. Each hospital's new adjusted rate now reflects both change in performance over time and overall performance relative to the collaborative averages. The adjusted performance is now a more stable and reliable estimate of each hospitals current performance, their performance relative to collaborative as a whole, and better reflects the improvement work each hospital is doing over a given performance year.

Utilizing the new adjusted method, there are now several ways for hospitals to improve their performance scores over time. These include:

- Continued high performance for hospitals exceeding current performance thresholds
- Improvements over time
- High performance in a majority of quarters

This packet contains your hospital's performance comparing the current (raw) method to the new adjusted method for each HMS 2018 performance measure. The following table details which method of assessment will be utilized for the 2018 performance index scorecard.

Measure #	Title	2018 Method of Assessment
5	Appropriate VTE prophylaxis given in patients at high risk of VTE	Current (Raw) or Adjusted
6	PICCs in for < 5 days (excluding deaths)	Current (Raw) or Adjusted
7	PICCs in patients with an eGFR <45 (without nephrology approval)	Current (Raw) or Adjusted
8	Use of single lumen PICCs in non-ICU cases	Current (Raw) or Adjusted
9	Uncomplicated CAP treated with 5 days of antibiotics	Adjusted
10*	Treatment of ASB with antibiotics Testing for ASB	Adjusted
11**	VTE pharmacologic prophylaxis given in low risk (on admission)	Current (Raw) Collaborative Average

^{*}Measure 10 is a dual measure

^{**}Measure 11 is a collaborative wide measure