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QUALITY FORUM**

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All-Cause Admissions and Readmissions, Fall 2020 Measure Review Cycle

Post-Comment Standing Committee Meeting

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Welcome

Housekeeping Reminders WebEx

- This is a WebEx meeting with audio and video capabilities
- Optional: Dial **844-621-3956** and enter passcode **173 011 5958**
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
 - ▣ Chat box: to message NQF staff or the group
 - ▣ Raise hand: to be called upon to speak
- We will conduct a Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at readmissions@qualityforum.org

Project Team All-Cause Admissions and Readmissions Committee



**Matthew Pickering,
PharmD
Senior Director**



**Oroma Igwe,
MPH
Project Manager**



**Yemsrach Kidane,
PMP
Project Manager**



**Taroon Amin,
PhD, MPH
Consultant**



Agenda

- Attendance
- Review and Discuss Public Comments
- Related and Competing Measures Discussion
- NQF Member and Public Comment
- Next Steps
- Adjourn

Attendance

All-Cause Admissions and Readmissions Fall 2020 Cycle Standing Committee

- **John Bulger, DO, MBA** (co-chair)
- **Chloe Slocum, MD, MPH** (co-chair)
- Edward Davidson, PhD, MPH, FASCP
- Richard James Dom Dera, MD, FAAFP
- Victor A. Ferraris, MD, PhD
- Lisa Freeman
- Kellie Goodson, MS, CPXP
- Faith Green, MSN, RN, CPHQ, CPC-A
- Dinesh Kalra, MD
- Michelle Lin, MD, MPH, MS
- Dheeraj Mahajan, MD, CIC, CMD
- Kenneth McConnochie, MD, MPH
- Jack Needleman, PhD, FAAN
- Zeyno Nixon, PhD, MPH
- Amy O'Linn, DO, FHM, FACP
- Janis Orlowski, MD, MACP
- Sonya Pease, MD, MBA
- Gaither Pennington, RN, BSN
- Rebecca Perez, MSN, RN, CCM
- Sheila Roman, MD, MPH
- Teri Sholder, RN, BSN, MHA, CPHQ, CPC
- Lalita Thompson, MSN, RN, CRRN
- Cristie Travis, MSHA
- Milli West, MBA, CPHQ

Review and Discuss Public Comments



0330 Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate (RSRR) following Heart Failure (HF) Hospitalization

- **Measure Steward:** Yale New Haven Health Services Corporation Center for Outcomes Research and Evaluation (Yale CORE)/Centers for Medicare & Medicaid Services (CMS)
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ The measure estimates a hospital-level risk-standardized readmission rate (RSRR) for patients discharged from the hospital with a principal diagnosis of heart failure (HF). Readmission is defined as unplanned readmission for any cause within 30 days of the discharge date for the index admission. Readmissions are classified as planned and unplanned by applying the planned readmission algorithm. The target population is patients age 65 and over. The Centers for Medicare & Medicaid Services (CMS) annually reports the measure for patients who are 65 years or older and are enrolled in fee-for-service (FFS) Medicare and hospitalized in non-federal hospitals or are patients hospitalized in Veterans Health Administration (VA) facilities.



0505 Hospital 30-day All-Cause Risk-Standardized Readmission Rate (RSRR) Following Acute Myocardial Infarction (AMI) Hospitalization

- **Measure Steward:** Yale CORE/CMS

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ The measure estimates a hospital-level 30-day, all-cause, risk-standardized readmission rate (RSRR) for patients age 65 and older discharged from the hospital with a principal diagnosis of acute myocardial infarction (AMI). Readmission is defined as unplanned readmission for any cause within 30 days of the discharge date for the index admission. Readmissions are classified as planned and unplanned by applying the planned readmission algorithm. CMS annually reports the measure for patients who are 65 years or older and enrolled in fee-for-service (FFS) Medicare and hospitalized in non-federal hospitals or are patients hospitalized in Veterans Health Administration (VHA) facilities.



0506 Hospital 30-day, All-Cause, Risk-Standardized Readmission Rate (RSRR) following Pneumonia Hospitalization

- **Measure Steward:** Yale CORE/CMS

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ The measure estimates a hospital-level 30-day, all-cause, risk-standardized readmission rate (RSRR) for patients age 65 and older discharged from the hospital with either a principal discharge diagnosis of pneumonia (including aspiration pneumonia) or a principal discharge diagnosis of sepsis (not severe sepsis) with a secondary diagnosis of pneumonia (including aspiration pneumonia) coded as present on admission (POA). Readmission is defined as an unplanned readmission for any cause within 30 days of the discharge date for the index admission. Readmissions are classified as planned and unplanned by applying the planned readmission algorithm. CMS annually reports the measure for patients who are 65 years or older and enrolled in fee-for-service (FFS) Medicare and hospitalized in non-federal hospitals or are patients hospitalized in Veterans Health Administration (VA) facilities.

1891 Hospital 30-day, All-cause, Risk-Standardized Readmission Rate (RSRR) following Chronic Obstructive Pulmonary Disease (COPD) Hospitalization

- **Measure Steward:** Yale CORE/CMS

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ The measure estimates a hospital-level 30-day, all-cause, risk-standardized readmission rate (RSRR) for patients age 65 and over discharged from the hospital with either a principal discharge diagnosis of COPD or a principal discharge diagnosis of respiratory failure with a secondary diagnosis of acute exacerbation of COPD. The outcome (readmission) is defined as unplanned readmission for any cause within 30 days of the discharge date for the index admission (the admission included in the measure cohort). A specified set of planned readmissions do not count in the readmission outcome. CMS annually reports the measure for patients who are 65 years or older and are enrolled in fee-for-service (FFS) Medicare and hospitalized in non-federal hospitals or are patients hospitalized in Veterans Health Administration (VA) facilities.



2515 Hospital 30-Day, All-Cause, Unplanned, Risk-Standardized Readmission Rate (RSRR) following Coronary Artery Bypass Graft (CABG) Surgery

- **Measure Steward:** Yale CORE/CMS

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ The measure estimates a hospital-level risk-standardized readmission rate (RSRR), defined as unplanned readmission for any cause within 30-days from the date of discharge for a qualifying index CABG procedure, in patients 65 years and older.
- ▣ An index admission is the hospitalization for a qualifying isolated CABG procedure considered for the readmission outcome.



2888 Accountable Care Organization Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions

- **Measure Steward:** Yale CORE/CMS
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ Rate of risk-standardized acute, unplanned hospital admissions among Medicare fee-for-service (FFS) beneficiaries 65 years and older with multiple chronic conditions (MCCs) who are assigned to an Accountable Care Organization (ACO).



3597 Clinician-Group Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions under the Merit-based Incentive Payment System

- **Measure Steward:** Yale CORE/CMS

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ Risk-Standardized rate of acute, unplanned hospital admissions among Medicare Fee-for-Service (FFS) patients aged 65 years and older with multiple chronic conditions (MCCs)

Themed Comments

Number of Comments Received: 15 comments were received on the following measures:

- 0330 Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate (RSRR) following Heart Failure (HF) Hospitalization
- 0505 Hospital 30-day All-Cause Risk-Standardized Readmission Rate (RSRR) Following Acute Myocardial Infarction (AMI) Hospitalization
- 0506 Hospital 30-day, All-Cause, Risk-Standardized Readmission Rate (RSRR) following Pneumonia Hospitalization
- 1891 Hospital 30-day, All-cause, Risk-Standardized Readmission Rate (RSRR) following Chronic Obstructive Pulmonary Disease (COPD) Hospitalization
- 2515 Hospital 30-Day, All-Cause, Unplanned, Risk-Standardized Readmission Rate (RSRR) following Coronary Artery Bypass Graft (CABG) Surgery
- 2888 Accountable Care Organization Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions
- 3597 Clinician-Group Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions under the Merit-based Incentive Payment System

Themed Comments (cont'd)

Summary of Comments Received: Three major themes were identified in the post-evaluation comments

- Reliability and Minimum Reliability Thresholds
 - » Concern regarding reliability thresholds and intraclass correlation coefficients at the minimum sample size/case volume
- Social Risk and Risk Adjustment
 - » Concern with the lack of inclusion of social risk factors in the risk adjustment model and questioning the adequacy of the risk model due to the deviance R-squared results
- Opportunity for Improvement
 - » Questioning whether the measures remain useful to distinguish hospital performance and drive improvements based on the low number of outliers (best and worst performers) in the distribution of hospital's performance scores and minimal increases in absolute percentage points between July 2016-June 2017 and July 2018-June 2019



3597 Clinician-Group Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions under the Merit-based Incentive Payment System¹

- **Measure Steward:** Yale CORE/CMS

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ Risk-Standardized rate of acute, unplanned hospital admissions among Medicare Fee-for-Service (FFS) patients aged 65 years and older with multiple chronic conditions (MCCs)

- **Summary of Comments Received:** One comment

- ▣ Commenters expressed concern that the attribution of this measure may not be reasonable and evidence-based.

Related and Competing Discussion

Related and Competing Measures

If a measure meets the four criteria **and** there are endorsed/new related measures (same measure focus **or** same target population) or competing measures (both the same measure focus **and** same target population), the measures are compared to address harmonization and/or selection of the best measure.

	Same concepts for measure focus-target process, condition, event, outcome	Different concepts for measure focus-target process, condition, event, outcome
Same target population	Competing measures-Select best measure from competing measures or justify endorsement of additional measure(s).	Related measures-Harmonize on target patient population or justify differences.
Different target patient population	Related measures-Combine into one measure with expanded target patient population or justify why different harmonized measures are needed.	Neither harmonization nor competing measure issue.



Related and Competing Measures (continued)

- Related and competing measures will be grouped and discussed after recommendations for all related and competing measures are determined. Only measures recommended for endorsement will be discussed.
- Committee will not be asked to select a best-in-class measure if all related and competing measures are not currently under review. Committee can discuss harmonization and make recommendations. Developers of each related and competing measure will be encouraged to attend any discussion.



2888 Related Measures

- **3597** Clinician-Group Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions under the Merit-based Incentive Payment System¹ (MIPS) (Yale CORE)



3597 Related Measures

- **2888** Accountable Care Organization Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions (Yale CORE)



0330 Related Measures

- **0229** Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Heart Failure (HF) Hospitalization (Yale CORE)
- **0505** Hospital 30-Day All-Cause Risk-Standardized Readmission Rate (RSRR) following Acute Myocardial Infarction (AMI) Hospitalization (Yale CORE)
- **1789** Hospital-Wide All-Cause Unplanned Readmission Measure (HWR) (Yale CORE)
- **1891** Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate (RSRR) following Chronic Obstructive Pulmonary Disease (COPD) Hospitalization (Yale CORE)
- **2879** Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data (Yale CORE)
- **2880** Excess Days in Acute Care (EDAC) after Hospitalization for Heart Failure (HF) (Yale CORE)
- **2886** Risk-Standardized Acute Admission Rates for Patients with Heart Failure (Yale CORE)
- **2888** Accountable Care Organization Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions (Yale CORE)



0505 Related Measures

- **0230** Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) following Acute Myocardial Infarction (AMI) Hospitalization (Yale CORE)
- **0330** Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate (RSRR) following Heart Failure (HF) Hospitalization (Yale CORE)
- **0730** Acute Myocardial Infarction (AMI) Mortality Rate (Agency for Healthcare Research and Quality (AHRQ))
- **1789** Hospital-Wide All-Cause Unplanned Readmission Measure (HWR) (Yale CORE)
- **2431** Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Acute Myocardial Infarction (AMI) (Yale CORE)
- **2473** Hybrid Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) following Acute Myocardial Infarction (AMI) (Yale CORE)
- **2879** Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data (Yale CORE)
- **2881** Excess Days in Acute Care (EDAC) after Hospitalization for Acute Myocardial Infarction (AMI) (Yale CORE)



0506 Related Measures

- **0231** Pneumonia Mortality Rate (IQI 20) (AHRQ)
- **0279** Community Acquired Pneumonia Admission Rate (PQI 11) (AHRQ)
- **1789** Hospital-Wide All-Cause Unplanned Readmission Measure (HWR) (Yale CORE)
- **2579** Hospital-level, Risk-Standardized Payment Associated with a 30-Day Episode of Care for Pneumonia (PN) (Yale CORE)
- **2882** Excess Days in Acute Care (EDAC) after Hospitalization for Pneumonia (Yale CORE)



1891 Related Measures

- **0275** Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate (PQI 05) (AHRQ)
- **0506** Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate (RSRR) Following Pneumonia Hospitalization (Yale CORE)
- **1789** Hospital-Wide All-Cause Unplanned Readmission Measure (HWR) (Yale CORE)
- **1893** Hospital 30-Day, all-cause, risk-standardized mortality rate (RSMR) following chronic obstructive pulmonary disease (COPD) hospitalization (Yale CORE)
- **2879** Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data (Yale CORE)
- **2888** Accountable Care Organization Risk-Standardized Acute Hospital Admission Rate for Patients with Multiple Chronic Conditions (Yale CORE)



2515 Related Measures

- **0114** Risk-Adjusted Postoperative Renal Failure (The Society of Thoracic Surgeons (STS))
- **0115** Risk-Adjusted Surgical Re-exploration (STS)
- **0119** Risk-Adjusted Operative Mortality for CABG (STS)
- **0129** Risk-Adjusted Postoperative Prolonged Intubation (Ventilation) (STS)
- **0130** Risk-Adjusted Deep Sternal Wound Infection (STS)
- **0131** Risk-Adjusted Stroke/Cerebrovascular Accident (STS)
- **0330** Hospital 30-day, all-cause, risk-standardized readmission rate (RSRR) following heart failure (HF) hospitalization (Yale CORE)
- **0505** Hospital 30-day all-cause risk-standardized readmission rate (RSRR) following acute myocardial infarction (AMI) hospitalization (Yale CORE)
- **1789** Hospital-Wide All-Cause Unplanned Readmission Measure (HWR) (Yale Core)
- **2558** Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following coronary artery bypass graft (CABG) surgery (Yale CORE)
- **3494** Hospital 90-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Coronary Artery Bypass Graft (CABG) Surgery (Yale CORE)

NQF Member and Public Comment

Next Steps

Activities and Timeline – Fall 2020 Cycle

***All times ET**

Meeting	Date, Time*
CSAC Review	June 29 (9:00 AM – 5:00 PM) June 30 (9:00 AM – Noon)
Appeals Period (30 days)	July 7 – August 5



Project Contact Info

- Email: readmissions@qualityforum.org
- NQF phone: 202-783-1300
- Project page:
[http://www.qualityforum.org/All Cause Admissions and Readmissions.aspx](http://www.qualityforum.org/All_Cause_Admissions_and_Readmissions.aspx)
- SharePoint site:
http://share.qualityforum.org/portfolio/admissions_readmissions/SitePages/Home.aspx

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