



Hospital Workgroup Pre-Meeting Assignments and Suggestions for Preparation

Thank you in advance for participating in this assignment. Its intention is to focus your preparation for the December Hospital Workgroup in-person meeting by designating a hospital measurement program for each workgroup member to review. Please see table 1 (below) for your assignment. Discussion for each program will begin with 2-3 minute summaries from those who are assigned to that program. After summaries, all workgroup members will have the opportunity to provide input on each program under review at the meeting. Accordingly, please plan to review all materials in advance of the meeting, but place particular emphasis on your assigned program. Your preparation and initial insights will enrich the workgroup's deliberations and provide a helpful starting point.

Table 1: Workgroup Members Assigned to Each Program

Hospital Program/Measures	Workgroup Member	Member Organization/Expertise
Inpatient Quality Reporting Program (IQR) <ol style="list-style-type: none"> 1) Adult Local Current Smoking Prevalence 2) American College of Surgeons-Centers for Disease Control and Prevention (ACS-CDC) Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure 3) INR Monitoring for Individuals on Warfarin after Hospital Discharge 4) IQI-22: Vaginal Birth After Cesarean (VBAC) Delivery Rate, Uncomplicated 5) National Healthcare Safety Network (NHSN) Antimicrobial Use Measure 	Richard Bankowitz Andrea Benin	Premier, Inc. Children's Hospital Association

Inpatient Quality Reporting Program (IQR) <ol style="list-style-type: none"> 1) Aortic Aneurysm Procedure Clinical Episode-Based Payment Measure 2) Cholecystectomy and Common Duct Exploration Clinical Episode-Based Payment Measure 3) Hospital-level, risk-standardized 30-day episode-of-care payment measure for pneumonia 4) Spinal Fusion Clinical Episode-Based Payment Measure 5) Transurethral Resection of the Prostate (TURP) for Benign Prostatic Hyperplasia Clinical Episode-Based Payment Measure 	Nancy Foster Kelly Trautner	American Hospital Association AFT Nurses and Health Professionals
Inpatient Quality Reporting Program (IQR) <ol style="list-style-type: none"> 1) Excess Days in Acute Care after Hospitalization for Pneumonia 2) Hospital 30-Day Mortality Following Acute Ischemic Stroke Hospitalization Measure 3) Hybrid 30-Day Risk-Standardized Acute Ischemic Stroke Mortality Measure with Claims and Clinical Electronic Health Record (EHR) Risk Adjustment Variables 4) Hybrid 30-Day Risk-Standardized Acute Ischemic Stroke Mortality Measure with Electronic Health Record (EHR)-Extracted Risk Adjustment Variables 5) Patient Safety for Selected Indicators /AHRQ Patient Safety Indicator Composite 	Gregory Alexander Heather Lewis	Subject Matter Expert Geisinger Health System

Value-Based Purchasing Program (VBP) <ol style="list-style-type: none"> 1) Hospital-level, risk-standardized 30-day episode-of-care payment measure for pneumonia 2) Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for Acute Myocardial Infarction (AMI) 3) Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for heart failure (HF) 4) Hospital-level, risk-standardized payment associated with an episode of care for primary elective total hip and/or total knee arthroplasty (THA/TKA) 	David Engler Martin Hatlie	America's Essential Hospitals Project Patient Care
Value-Based Purchasing Program (VBP) <ol style="list-style-type: none"> 1) Cellulitis Clinical Episode-Based Payment Measure 2) Gastrointestinal Intestinal (GI) Hemorrhage Clinical Episode-Based Payment Measure 3) Kidney/Urinary Tract Infection Clinical Episode-Based Payment Measure 	Cristie Travis Michael Phelan	Memphis Business Group on Health Subject Matter Expert
Value-Based Purchasing Program (VBP) <ol style="list-style-type: none"> 1) ACS-CDC Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure 2) Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Coronary Artery Bypass Graft (CABG) Surgery 3) Hybrid 30-Day Risk-Standardized Acute Ischemic Stroke Mortality Measure with Electronic Health Record (EHR)-Extracted Risk Adjustment Variables 	LaDawna Howard Jeff Jacobs	Service Employees International Union The Society of Thoracic Surgeons

Outpatient Quality Reporting Program (OQR) <ol style="list-style-type: none"> 1) Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy 2) Risk-standardized hospital visits within 7 days after hospital outpatient surgery 	Helen Haskell Shekhar Mehta	Mothers Against Medical Error Pharmacy Quality Alliance
Ambulatory Surgical Center Program (ASCQR) <ol style="list-style-type: none"> 1) Toxic Anterior Segment Syndrome (TASS) Outcome 	Donna Slosburg Karen Roth	ASC Quality Collaborative St. Louis Area Business Health Coalition
HAC Reduction Program <ol style="list-style-type: none"> 1) American College of Surgeons-Centers for Disease Control and Prevention (ACS-CDC) Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure 2) Patient Safety and Adverse Events Composite 	Mitchell Levy Brock Slabach	Subject Matter Expert National Rural Health Association

<p>End Stage Renal Disease (ESRD-QIP)</p> <ol style="list-style-type: none"> 1) Avoidance of Utilization of High Ultrafiltration Rate (≥ 13 ml/kg/hour) 2) ESRD Vaccination: Full-Season Influenza Vaccination 3) Measurement of Phosphorus Concentration 4) Proportion of Patients with Hypercalcemia (NQF #1454) 5) Standardized Hospitalization Ratio - Modified 6) Standardized Mortality Ratio - Modified 7) Standardized Readmission Ratio (SRR) for dialysis facilities 	<p>Allen Nissenson Elizabeth Evans Sean Morrison</p>	<p>Kidney Care Partners Subject Matter Expert Subject Matter Expert</p>
<p>PPS-Exempt Cancer Hospital Quality Reporting Program (PCHQR)</p> <ol style="list-style-type: none"> 1) Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy 2) American College of Surgeons-Centers for Disease Control and Prevention (ACS-CDC) Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure 3) National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure 4) National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure 5) Oncology: Radiation Dose Limits to Normal Tissues 	<p>Ron Walters Shelley Fuld Nasso</p> <p>Wei Ying</p>	<p>Alliance of Dedicated Cancer Centers National Coalition of Cancer Survivorship Blue Cross Blue Shield of Massachusetts</p>

Inpatient Psychiatric Facility Quality Reporting Program (IPFQR) 1) Substance Use Core Measure Set (SUB)-3 Alcohol & Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a Alcohol & Other Drug Use Disorder Treatment at Discharge 2) Thirty-day all-cause unplanned readmission following psychiatric hospitalization in an Inpatient Psychiatric Facility (IPF)	Jack Fowler Dolores Mitchell Ann Marie Sullivan	Subject Matter Expert Subject Matter Expert Subject Matter Expert
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To assist you in completing the assignment, the following materials are available on the MAP [Hospital Workgroup SharePoint Site](#):

- MAP Measure Selection Criteria (MSC)
- MAP Hospital Workgroup Frameworks for Current Measures
- CMS Needs and Priorities Document for each program (in a bundled PDF)
- MAP Hospital Workgroup Discussion Guide for December 16-17

Please be prepared to provide a 2-3 minute summary of your evaluation at the MAP Hospital Workgroup in-person meeting on December 16-17, 2015.