

### Performance Measurement Work Group

1/18/17 Meeting



# RY 2019 Maryland Hospital Acquired Conditions (MHAC)



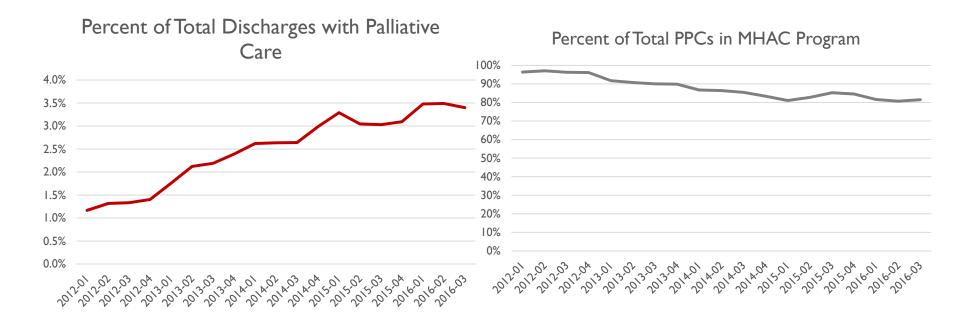
### General RY 2019 MHAC Updates

- ▶ Removal of palliative care exclusion
- Update to PPC Grouper Version 34 (ICD-10)
- Inclusion of all chronic beds and Holy Cross Germantown
- Hospitals with only serious reportable events removed
- MHAC methodology and Scaling
  - No changes to setting of benchmarks/thresholds or PPC scoring methodology (i.e., improvement and attainment points)
  - ▶ Change to single linear scale with max penalty/reward of 2%



#### Palliative Care

- Include palliative care cases in RY19 MHAC
  - ▶ Rationale: Increased coding, large coding variance between hospitals, serious complication → PC, quality improvement





#### Program Specifics RY 19

- ▶ 3M PPC Grouper version 34
  - ▶ Base Year = October 2015 September 2016
  - Performance Year = CY 2017
- Performance metric = observed / expected ratio
- Exclusions
  - Statewide: Cases with more than 6 PPCs
  - Hospital: <10 at-risk or <1 expected; must qualify for more than the seriously reportable events
- Better of Attainment and Improvement
  - ▶ Hospital's O /E ratios are compared to statewide base year performance, thresholds and benchmarks and converted to points from 0-10.
- PPCs grouped in two tiers weighted differently (100% vs 50%) to put more emphasis on the "target" PPCs.



#### PPC Measurement Changes

- Version 34 PPC grouper
- PPC Changes
  - ▶ 3M removed PPC 12 (cardiac arrhythmia) and PPCs 57, 58 (OB Lacerations)
  - Clinical changes to PPC 36 (Acute mental health changes) and PPC 66 (Catheter related UTI) result in no hospital meeting minimum inclusion threshold
  - PPC 21 (c. Diff) moved to tier 2
  - Inclusion of PPC 64 back into combo PPC 67
  - Removal of all out of grouper exclusions and hierarchy changes
- ▶ No other changes to combos or monitoring only PPCs
  - ▶ Based on this there are 57 PPCs (48 with combinations) included in payment program



#### Benchmarks/Thresholds

- ▶ Threshold = weighted mean of all O/E ratios (O/E = I)
- Benchmark = weighted mean of the O/E ratios for top performing hospitals that account for a minimum 25% of statewide discharges
- See excel handout with benchmarks for RY18 and RY19 benchmarks



#### RY2019 MHAC Scaling Proposal

- No statewide improvement goal
  - Single revenue adjustment scale with max penalty 2% and max reward 1%
- ▶ Full range scale (0-100%)
  - Options: Continuously scaled revenue adjustments vs neutral zone

### MHAC Scaling Options

RY 2018 Scale				
Final MHAC Score		Below State Quality Target	Exceed State Quality Target	
Scores less than or equal				
to	0.17	-3.00%	-1.00%	
	0.20	-2.74%	-0.88%	
	0.25	-2.29%	-0.67%	
	0.30	-1.85%	-0.46%	
	0.35	-1.41%	-0.25%	
	0.40	-0.97%	-0.04%	
	0.45	-0.53%	0.00%	
	0.50	-0.09%	0.00%	
	0.55	0.35%	0.17%	
	0.60	0.79%	0.33%	
	0.65	1.24%	0.50%	
	0.70	1.68%	0.67%	
	0.75	2.12%	0.83%	
Scores greater than or equal to	0.80	0.00%	1.00%	
Penalty thre	Penalty threshold:		0.41	
Reward Threshold		No rewards	0.50	

Option 1: Full Scale			
without Neutral Zone			
Final MHAC Score	Revenue		
	Adjustment		
0.00	-2.00%		
0.05	-1.80%		
0.10	-1.60%		
0.15	-1.40%		
0.20	-1.20%		
0.25	-1.00%		
0.30	-0.80%		
0.35	-0.60%		
0.40	-0.40%		
0.45	-0.20%		
0.50	0.00%		
0.55	0.10%		
0.60	0.20%		
0.65	0.30%		
0.70	0.40%		
0.75	0.50%		
0.80	0.60%		
0.85	0.70%		
0.90	0.80%		
0.95	0.90%		
1.00	1.00%		
Penalty/Reward			
threshold:	0.50		

Option 1: Full Scale

#### **Option 2: Full Scale with Neutral Zone**

Final MHAC Score	Revenue
Tillal Williac Score	Adjustment
0.00	-2.00%
0.05	-1.78%
0.10	-1.56%
0.15	-1.33%
0.20	-1.11%
0.25	-0.89%
0.30	-0.67%
0.35	-0.44%
0.40	-0.22%
0.45	0.00%
0.50	0.00%
0.55	0.00%
0.60	0.11%
0.65	0.22%
0.70	0.33%
0.75	0.44%
0.80	0.56%
0.85	0.67%
0.90	0.78%
0.95	0.89%
1.00	1.00%
Penalty threshold:	0.45
Reward Threshold	0.55

### MHAC Modeling

RY 17 Modeled Results	Min	Penalty/Reward Cut Point	Max	Statewide Penalties	Statewide Rewards
RY 2017 Actual Results	17%	33%/43%	80%	<\$1M	+30M
RY 2017 scores w/RY18 Scale	17%	40%/50%	80%	-\$2M	+22M
Full Range Scale without Neutral Zone	0%	50%	100%	-\$10M	+\$13M
Full Range Scale with Neutral Zone	0%	45%/55%	100%	-\$6M	+\$9M



### RY 2019 Quality Based Reimbursement (QBR)



### RY17 QBR Scaling

- Retrospective change to RY17 QBR scale approved by Commission in December
  - Scale was originally too low when based on base year attainment only points
  - Approved scale uses final QBR scores to set linear scale that rewards/penalizes hospitals above/below statewide average
  - Not revenue neutral
  - Higher penalties put into rates in RY18



#### RY18 QBR Updates

- HSCRC will resend base year data to hospitals with following changes:
  - Removal of HCAHPS pain measure
  - Correction on CTM-3 measure
  - ▶ For CAUTI, RY18 scores will be based on performance period attainment only and state benchmark (as was done for RY17)
- HSCRC staff is proposing to use final scores to set linear scale for RY 18 QBR (same as RY 17)
  - Performance period complete
- Exploring options for calculating scores earlier



#### RY19 QBR Updates

- Update measures
  - ▶ Add THA/TKA Total hip/total knee arthroplasty complications
  - Update mortality measure
    - Final recommendation stated we will be not excluding palliative care cases from mortality measures (statewide improvement rate is highly correlated with increase in palliative care cases)
    - Working through details on adding palliative care (e.g., adding palliative care flag to regression model)
  - ▶ PSI-90 currently no ICD-10 version
- Exploring options for calculating scores earlier



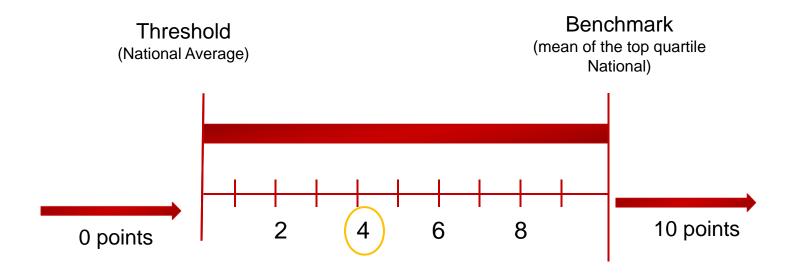
#### RY19 QBR Scaling

- Goal is to incentivize all MD hospitals to improve and achieve performance on par with the nation
- ▶ Final Score Scale vs. Prospective Scale
  - Predetermined performance targets and financial impact
  - ▶ Ensure performance aligns with revenue adjustments



#### **Attainment Score Calculations**

#### One QBR Measure-Risk Adjusted Rate or Percent of Patients



\*Mortality and PSI measures are based on state average and top performance benchmarks.



#### **QBR** Score Calculations

- Better of Attainment or Improvement = 0-10 points
- Maximum Available Points= 10 Points\* Number of Measures
- Actual Hospital Points = Sum of Hospital Points
- QBR Final Score = Actual Hospital Points/Maximum Available Points
  - ▶ 0% = None of the rates are at the average
  - ▶ 100%= All of the rates are at the top 5 %



### Applying Final Score to Scaling

- ▶ Full Score: Range 0-100%, mid-point 50%
- ▶ State distribution: 7%-57%, average 37%
- Scaling based on state distribution recalibrates the payment adjustments back to state performance
- Predetermined scores should be more specifically tied to the state's performance compared to national rates
  - Performance benchmarks for each measure (Thresholds and benchmarks) are based on national rates
  - Scaling methodology does not reflect performance standards as the total scores are lower



### Modeling of QBR Scaling Options

- Which scores should be used for maximum rewards and penalties?
- Which score should be used as cut point to turn from penalty to reward zones?
  - 80% represents realistic max possible score
  - Rewards can be increased in commensurate with higher points
    - Increase the maximum reward from 1% to 2% inpatient revenue

RY 19 Scaling Options	Min	Cut Point	Max	Statewide Penalties	Statewide Rewards
Final Scores (max reward 1%)	7%	37%	57%	-\$20M	+11M
Prospective Options Max Reward 2%					
Full Score Range	0%	50%	100%	-49M	+1M
Option 1	0%	40%	80%	-24M	+7M
Option 2	0%	45%	80%	-37M	+3M
Note: Modeling based on RY17 Final Scores	5	,			



#### QBR Scaling Options: Score Comparison

#### **FY 2017**

#### FY 2017 Final QBR Score Based Scaling **Final QBR** % Revenue **Scores Impact** 0.07 -2.00% 0.20 -1.13% 0.31 -0.40% 0.31 -0.40% 0.37 0.00% 0.40 0.15% 0.49 0.60% 0.57 1.00%

#### **Full Score Range**

Final QBR Score	Payment
rillal QBK Score	Adjustment
0.00	-2.00%
0.10	-1.60%
0.20	-1.20%
0.30	-0.80%
0.40	-0.40%
0.50	0.00%
0.60	0.40%
0.70	0.80%
0.80	1.20%
0.90	1.60%
1.00	2.00%
Payment Threshold	0.50

#### **Option I**

Final QBR Score	Payment Adjustment
0.00	-2.00%
0.10	-1.50%
0.20	-1.00%
0.30	-0.50%
0.40	0.00%
0.50	0.50%
0.60	1.00%
0.70	1.50%
0.80	2.00%
0.80	2.00%
Payment Threshold	0.40

#### Option 2

Final QBR Score	Payment Adjustment
0.00	-2.00%
0.10	-1.56%
0.20	-1.11%
0.30	-0.67%
0.40	-0.22%
0.45	0.00%
0.50	0.29%
0.60	0.86%
0.70	1.43%
0.80	2.00%
0.80	2.00%
Payment Threshold	0.45



## Draft RY19 Recommendation (February Commission Meeting)

- Staff recommends that the following be considered for RY 2019:
  - Move to a modified full scale distribution:
    - ▶ Range 0-80%
    - Penalty/Reward Cut Point between 40% and 50%
  - Increase the maximum reward to 2 percent as the achieving rewards will be based on modified full scale distribution.



#### **Contact Information**

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