

# National Committee on Vital and Health Statistics (NCVHS)

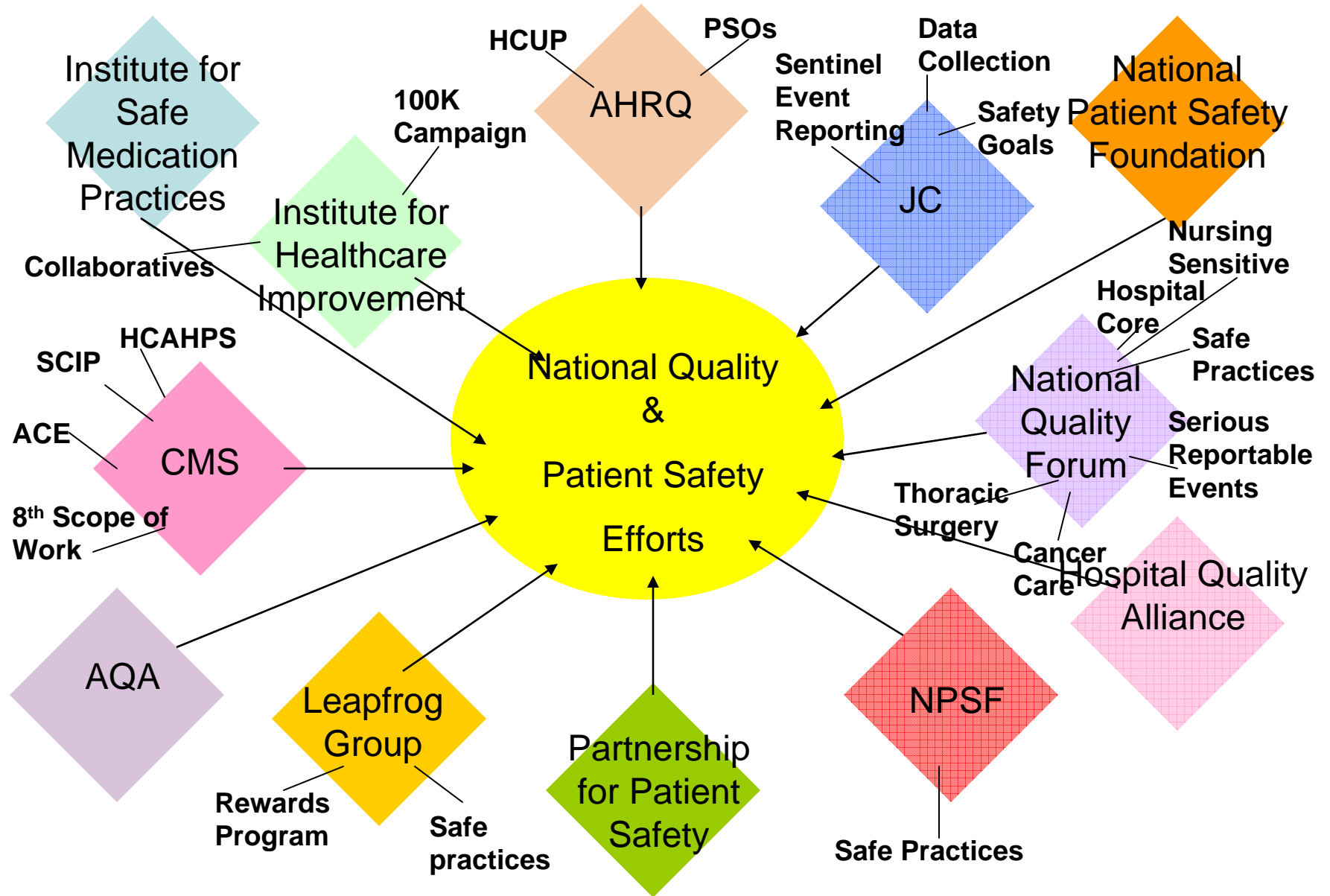
Ad Hoc Work Group on  
Secondary Uses of Health Data

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**Helping Health Care Organizations Help Patients.**

# Multitude of Activities Confronting Hospitals



# Hospital Quality Alliance

- The Hospital Quality Alliance: Improving Care Through Information (HQA) is a public-private partnership to improve the quality of care provided by the nation's hospitals by measuring and publicly reporting on that care.

# Partners In HQA

## Hospitals

- American Hospital Association
- Federation of American Hospitals
- Association of American Medical Colleges
- National Association of Childrens' Hospitals
- National Association of Public Hospitals

## Other Providers

- American Medical Association
- American Nurses Association

## Government

- Centers for Medicare and Medicaid Services
- Agency for Healthcare Research and Quality

## Employers/Consumers/ Purchasers

- AARP
- AFL-CIO
- Consumer/Purchaser Disclosure Project
- US Chamber of Commerce
- General Electric
- Blue Cross
- National Business Coalition on Health
- America's Health Insurance Plans

## Quality Groups

- The Joint Commission
- National Quality Forum

# The Hospital Quality Alliance

- Identifies robust sets of standardized and easy-to-understand hospital quality measures
- Used by all stakeholders to improve quality of care
- Used by consumers to make informed healthcare choices
- Hospital Compare, a website tool developed to publicly report credible and user-friendly information debuted on April 1, 2005 at **[www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)**

# Hospital Participation in HQA

(As of January 2007)

- Total hospitals reporting – 4215
  - 3628 Acute Care
  - 613 Critical Access
- Breakdown of reporting hospitals
  - No cases to report --- 202
  - Initial 10 – 20 measures --- 1312
  - All measures --- 2701

# HQA Work

- Consolidating data stream to reduce burden, expand capacity for measurement
- Analysis of cost
- Identification of priorities for measurement
  - Ongoing identification of more measures to use
- Coordination with AQA on efficiency, harmonization of measures, pricing transparency, pilots
- Infrastructure for sustainability



Internal Quality Improvement

Accountability

Public Reporting

Payment-Hospital

Maintenance of  
Physician Certification

Payment-  
Physician



1985

2007 and Beyond

## The Continuum of Uses for Performance Measurement Data

# The Joint Commission

- Nations predominant standards-setting and accrediting body in health care
- **Mission:** To continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations.

# Current Primary Quality Measurement Data Sources

- Medical record, majority paper abstraction and some hospitals utilize electronic health records
- Administrative Claims Data, i.e., UB-92/UB-04

# Future Potential Primary Data Sources

- Human resource, payroll records
- Administrative – e.g., patients days
- Surveys – e.g., employee, patient
- Electronic Registries – e.g., cardiac, cancer
- Electronic health records

# On the Move to Improve ORYX Data Quality

- 53 core vendors (as of 4/07)
- Quarterly core data transmissions
- Transmitting core data for approximately 3,300 hospitals each quarter



# On the Move to Improve ORYX Data Quality

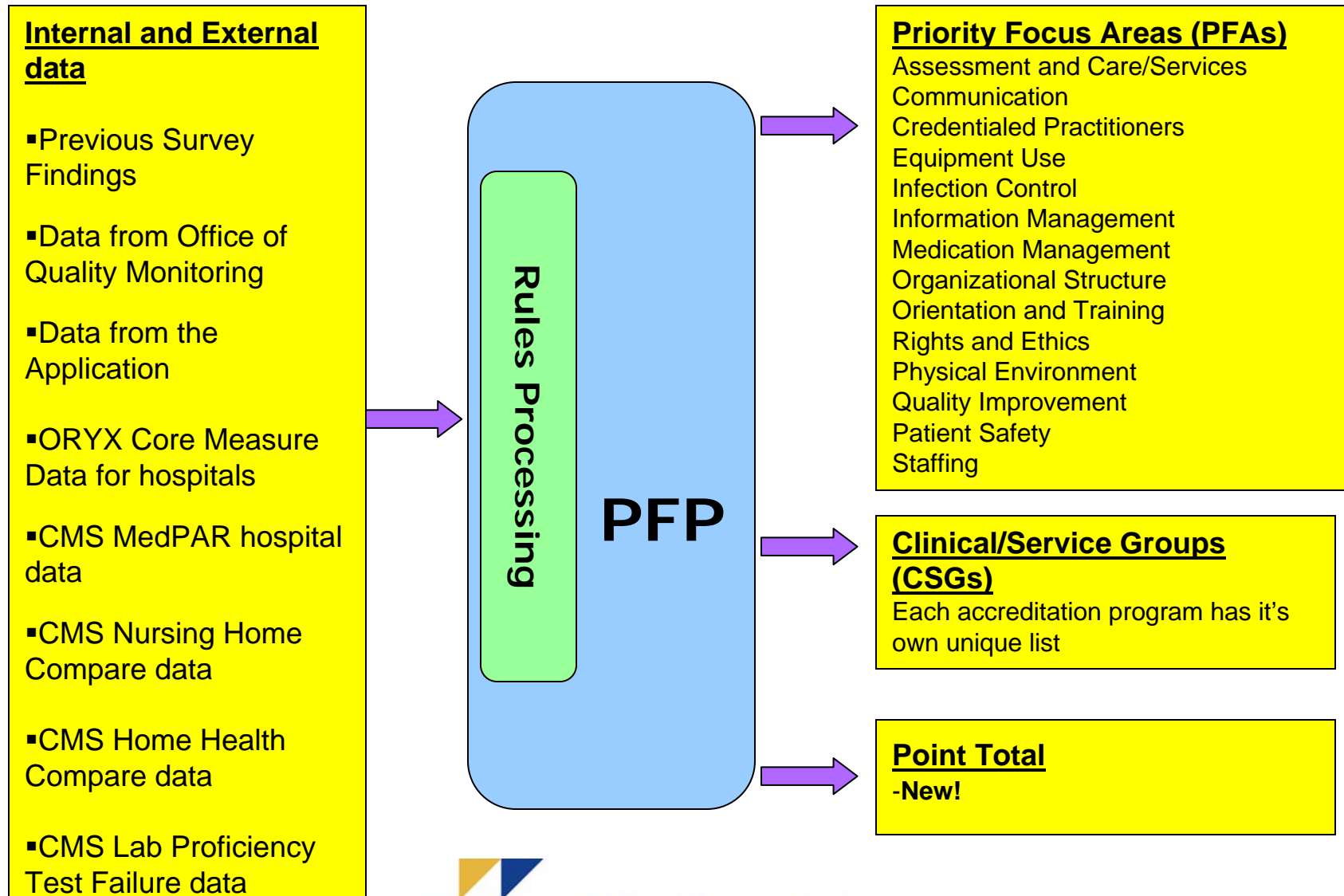
- What is done by The Joint Commission to ensure data quality?
  - Vendor Contract
  - Data Quality Education
  - Vendor Education Manuals/Guides
  - Quarterly Data Quality Tests
  - Data Quality Reports/Integrity Reporting
  - Data Retransmissions
  - Vendor Audits



# The Joint Commission Uses of Quality Data

- Priority Focus Process (PFP)
- ORYX Performance Measure Report
- Quality Check
- Annual Report – New March 2007
  - National Quality Improvement Goals
  - National Patient Safety Goals

# Priority Focus Process

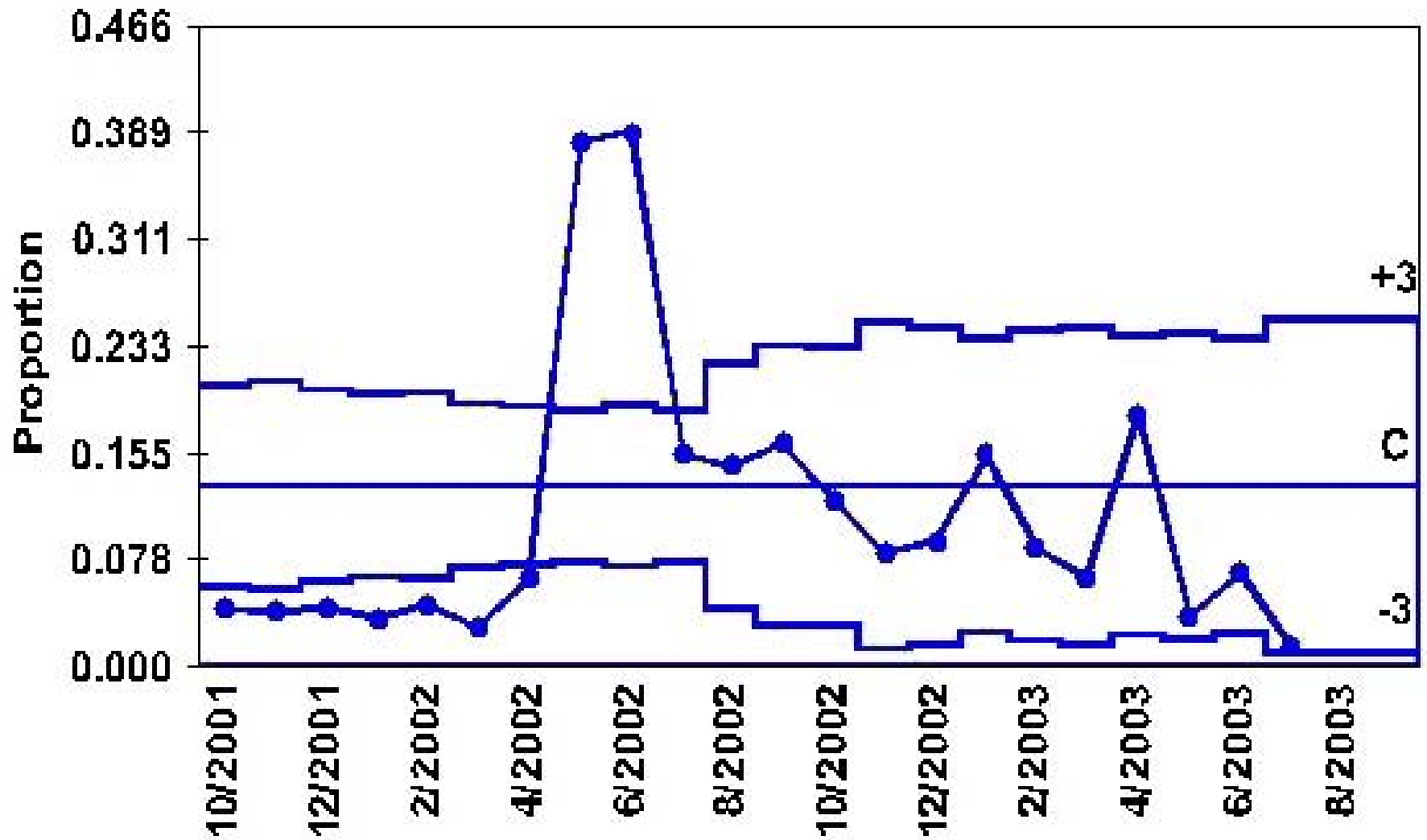




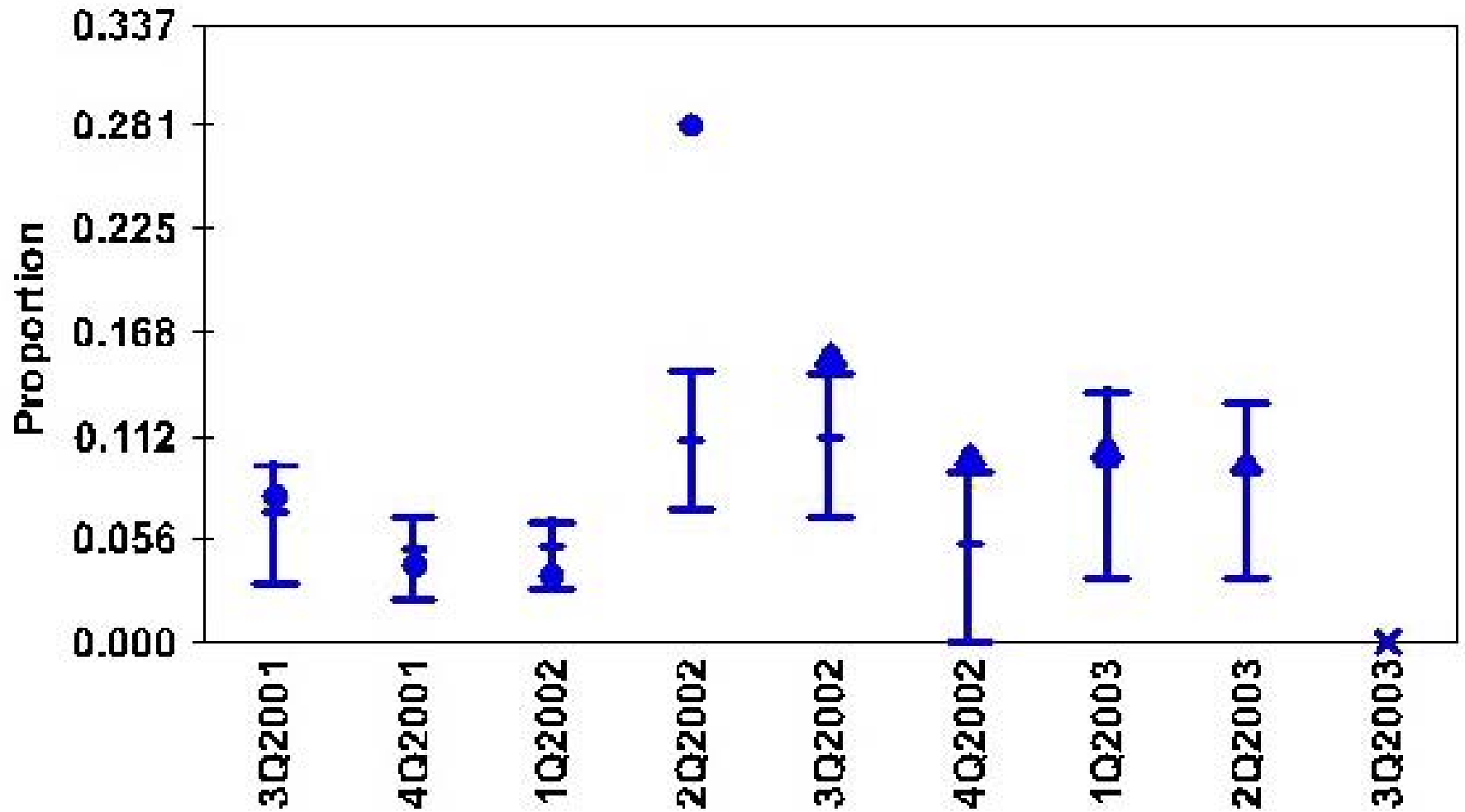
# ORYX Performance Measure Report

- Measure Set Summary
- Measure Summary
- Measure Detail
  - Quarterly Comparison analysis for each measure
  - Control Chart analysis for each measure
  - Missing Data
  - Data Quality Issues
  - Standard Compliance Issue

# Control Chart Example



## Comparison Chart Example



the public about the choices available to them.



## A Sample Hospital

1199 Sun Valley Road, Houston, Texas



### Summary of Quality Information

#### Accreditation Decision

Accredited.

#### Decision Effective Date

January 15, 2006

#### Accredited Programs

- Hospital
- Laboratory
- Home Care

#### Special Quality Awards

- 2004 Hospital Quality Alliance Participation
- 2005 The Medal of Honor for Organ Donation

#### Symbol Key

- This Organization Achieved the Best Possible Results
- This Organization's Performance is Above the Performance of Most Accredited Organizations
- This Organization's Performance is Similar to the Performance of Most Accredited Organizations
- This Organization's Performance is Below the Performance of Most Accredited Organizations
- Not Displayed

#### Footnote Key

1. The Measure or Measure Set is not Reported.
2. The Measure Set Does Not Have an Overall Result.
3. The Number of Patients is Not Enough for Comparison Purposes.
4. The Measure Results are not Displayed.
5. The Organization Scored Above 90% but was Below Most Other Organizations.
6. The Measure Results are Not Statistically Valid.
7. The Measure Results are Based on a Sample of Patients.
8. The Number of Months with Measure Data is Below the Reporting Requirement.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

#### Compared to other JCAHO Accredited Organizations

	Compared to other JCAHO Accredited Organizations	
	Nationwide	Statewide
2006 National Patient Safety Goals:		
National Quality Improvement Goals:		
Heart Attack Care		
Heart Failure Care		
Pneumonia Care		
Surgical Infection Prevention Care (for all reported procedures)		
• Blood Vessel Surgery		
• Colon/Large Intestine Surgery		
• Coronary Artery Bypass Graft		
• Hip Joint Replacement Surgery		
• Hysterectomy		
• Knee Joint Replacement Surgery		
• Open Heart Surgery		

\* State Results are not Calculated for the National Patient Safety Goals.



# Improving America's Hospitals

## A Report on Quality and Safety

Introduction from The Joint Commission President

Executive Summary

Joint Commission Accreditation

Medical Conditions

Quality & Safety Key Performance Results

Quality Performance Detail

Joint Commission's Commitment to Safety

2005 National Patient Safety Goals Performance

Glossary of Definitions & Abbreviations

References



# Major Secondary Uses of Data

- Patient/Consumer Choice
- Quality Improvement
- Accountability
- Improve Public Health
- Drive Market Share

# Barriers/Challenges to Secondary Use of Data

- Potential privacy issues
- Absence of standardization of measures and data element definitions
- Data quality
- Methodology associated with de-identification, consistent with HIPAA

# Rules are Needed, Such As:

- Standard rules for de-anonymization
- Data quality
- Matching data sets
- Who gets information
- Potential new privacy rules
- Correct statistical approaches to balance and differentiate outliers



# Emerging Use: Tertiary

- 3<sup>rd</sup> parties creating new and different views of data, such as researchers, 3<sup>rd</sup> party payors
- Organization with secondary use has no control over tertiary use
- Potential for unintended consequences

# Summary

- Need right protection on data
- Be cognizant of unintended consequences
- Balance patient privacy with creative, unique, elucidating use of data, producing different pictures of health care and health status
- Health care data should improve the safety and quality of care provided to the public