



Blue Cross Blue Shield of Illinois

Use of AHRQ Quality Indicators

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**BlueCross BlueShield
of Illinois**
a Division of Health Care Service
Corporation (HCSC), a Mutual Legal
Reserve Company

BCBSIL Approach to Patient Safety

- In response to the IOM reports, large employer groups expect health plans to implement programs that will motivate hospitals to improve patient safety. Leapfrog is a specific focus of some employers.
- Patient safety is now included in health plan accreditation standards.
- BCBSIL chose to evaluate multiple indicators related to hospital quality and patient safety. Results are summarized in the BCBSIL Hospital Profile.
- To create a system that motivates improvement and rewards performance and outcomes, some profile-related indicators are being publicly reported and some are incorporated into the hospital contracting process.



Input From Hospitals

- The BCBSIL Hospital Advisory Group was created to provide a forum for obtaining input from network hospitals.
- The advisory group, representing diverse hospitals, reviewed draft Hospital Profile criteria and preliminary data.
- Recommendations from the advisory group were used in determining how to adjust AHRQ indicator results to improve comparability between hospitals.



2005: Third Annual BCBSIL Hospital Profile

Measures	Data Sources
Leapfrog	Leapfrog Website, TMIT and BCBSIL Hospital Survey
Member Survey	BCBSIL Member Survey
AHRQ Indicators*	BCBSIL Claims+ MedPar Data
Efficiency*	BCBSIL Claims Data
Physician Survey	BCBSIL Physician Surveys
Structural Indicators	JCAHO + HFAP Websites and BCBSIL Hospital Survey
Hospital Quality Alliance Indicators	Joint Commission Resources
Participation in National QI Initiatives	BCBSIL Hospital Survey

*For some indicators, hospitals are compared to other hospitals within their “peer group.”



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3rd Annual BCBSIL Hospital Profile: AHRQ Indicators

➤ Patient Safety Indicators:

- Selected Infections Due to Medical Care
- Postoperative PE/DVT
- Postoperative Respiratory Failure
- Postoperative Septicemia, Obstetric Trauma (without instrument)
- Decubitus Ulcer
- Failure to Rescue
- Accidental Puncture or Laceration

➤ Mortality Rates for Conditions:

- Acute myocardial infarction
- Congestive heart failure
- Acute stroke
- Gastrointestinal hemorrhage
- Hip fracture
- Pneumonia

➤ Mortality rates are aggregated into one score for reporting



Methodology

- To evaluate outcomes using AHRQ Quality Indicators and Patient Safety Indicators, BCBSIL uses HealthShare data analysis tools
- The data source is a database including both MedPar and BCBSIL claims data.
- Adjustments made to improve comparability between hospitals include:
 - exclusion of admissions involving a transfer in from another hospital
 - use of ARDRGs for risk adjustment
 - age adjustment: standardization of each hospital's complication rate based on its relative mix of patients at every age-ARDRG level (indirect standardization)
- In the past, when Illinois all-payor data were available, Medicaid admissions were excluded.



Methodology

- An additional modification to the AHRQ methodology for Postoperative Respiratory Failure and Postoperative Sepsis:
 - As written, these indicators include only elective admissions.
 - Because BCBSIL claims data do not include the admission type, elective admissions cannot be identified.
 - Therefore, the indicators are reported using all admissions.
 - However, using ER admission source as a proxy for non-elective admissions, a final adjustment is made based upon whether or not admissions were from the ER.



Considerations in reporting results

- Results are not reported for specialty hospitals (rehabilitation, behavioral health, pediatric, cancer).
- Indicators with very small numerators and/or denominators are not scored as they are of limited value in identifying differences between hospitals. Examples:
 - Complications of Anesthesia
 - Death in Low Mortality DRGs
 - Foreign Body Left in During Procedure
- However, even though indicators with small numbers may not discriminate between hospitals, they can still be used to provide feedback for quality improvement purposes.
- Indicator results are not reported when a specific hospital has a small denominator. Cut-off points are separately calculated for each indicator.



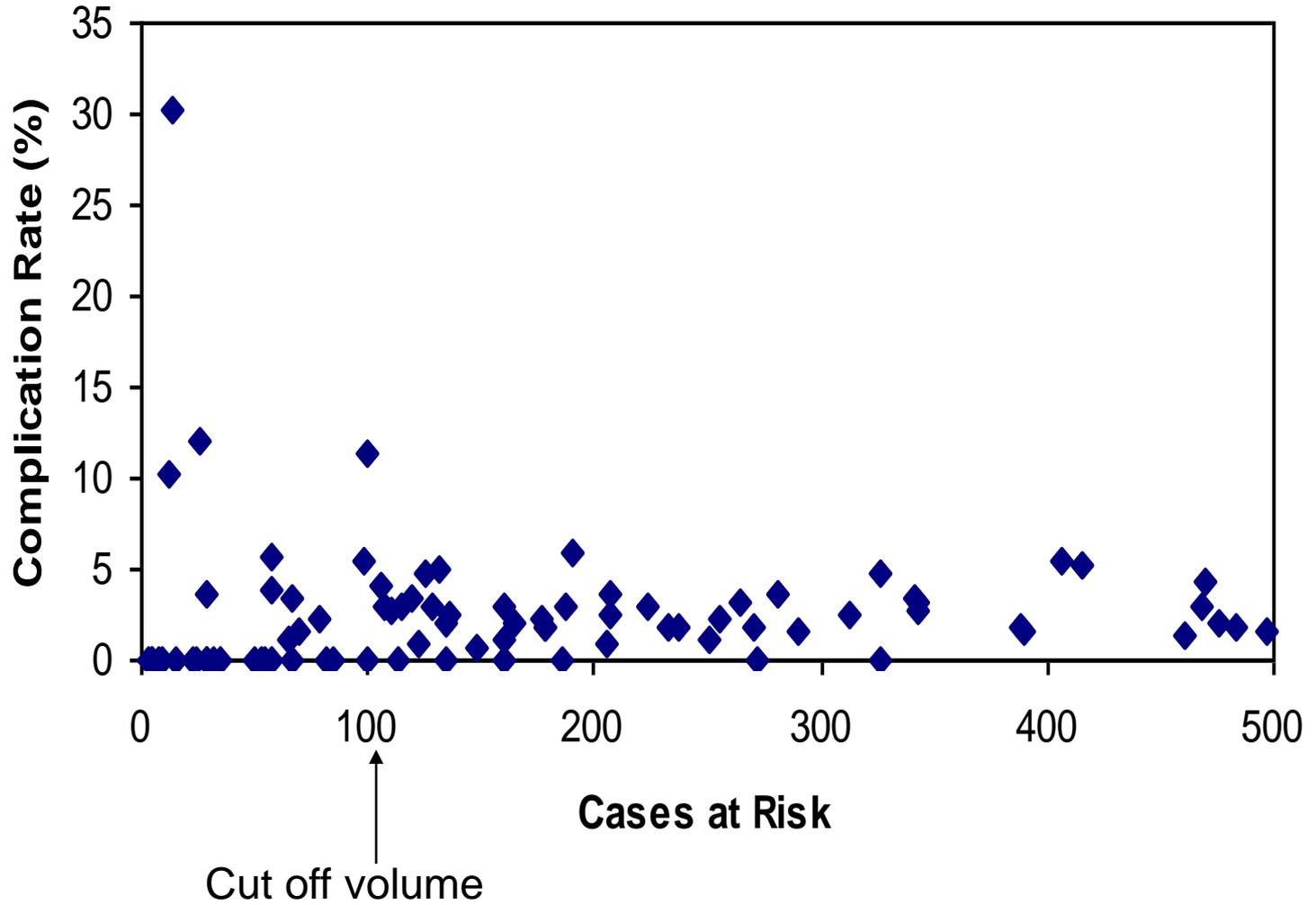
Small Numbers

- **AHRQ Patient Safety Indicators: Obstetric Trauma – Cesarean Section**
 - The hospital-specific rate was calculated for 134 Illinois hospitals. The data source included MedPar data plus BCBSIL admission claims.
 - There were a total of 57 complications among 10,276 cases at risk (0.6%).
 - The number of cases at risk (denominator) per hospital ranged from 1 to 662.
 - The number of cases with complications (numerator) ranged from 0 to 6.
 - Every hospital with more than two complications had a high volume of cases at risk.
- **Conclusion:** Due to the small numbers, the indicator did not identify meaningful differences in performance between hospitals.
- However, even though this indicator does not discriminate between hospitals, it can still be used to provide valuable information for quality improvement purposes.

# of complications	# of hospitals
0	103
1	18
2	8
3	1
4	1
5	2
6	1



Decubitus Ulcer



Peer Groups

Scoring of AHRQ indicators on the BCBSIL Hospital Profile is based upon a comparison of the adjusted rate for hospitals within the same “peer group.”

➤ Urban Hospitals – 5 peer groups are identified based on:

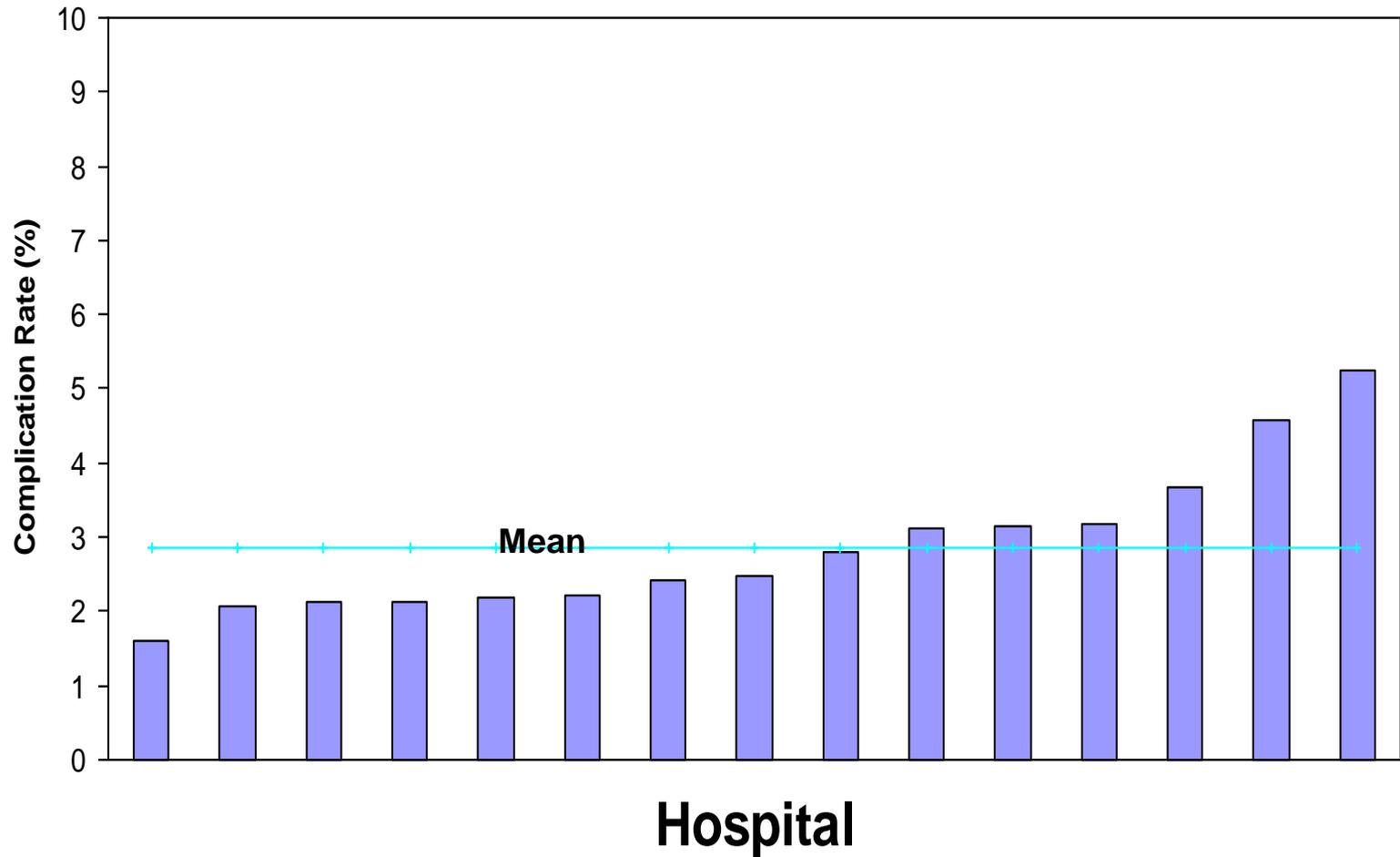
- Case mix
- Number of beds
- Resident to bed ratio
- Transplant volume
- Open heart surgery volume
- Trauma center status
- Neonatal ICU status

➤ Rural hospitals – 3 peer groups are identified based on:

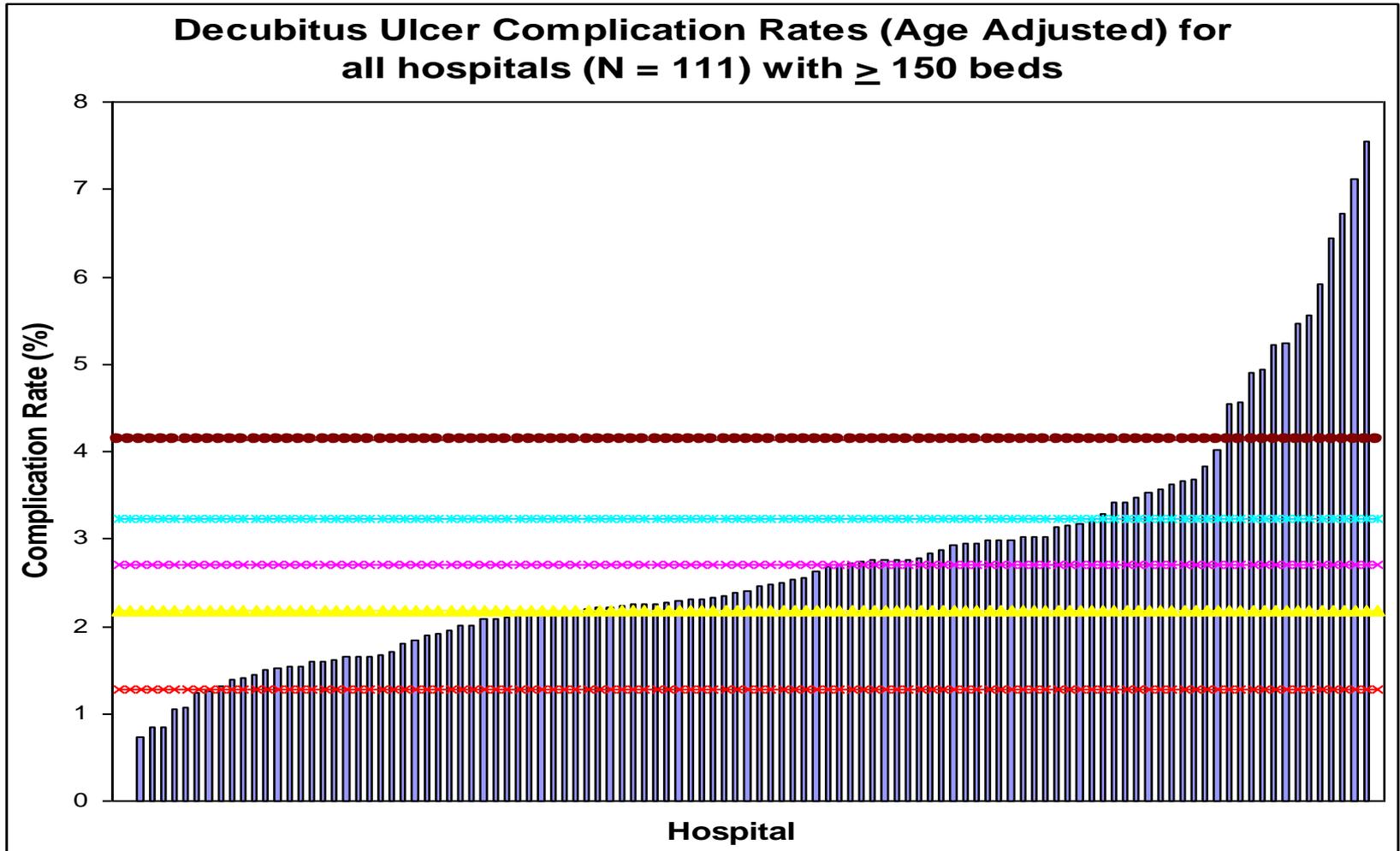
- Case mix
- Number of beds



Decubitus Ulcer Data (Age & ARDRG Case Mix Adjusted) for Urban hospitals in Peer groups 1 & 2

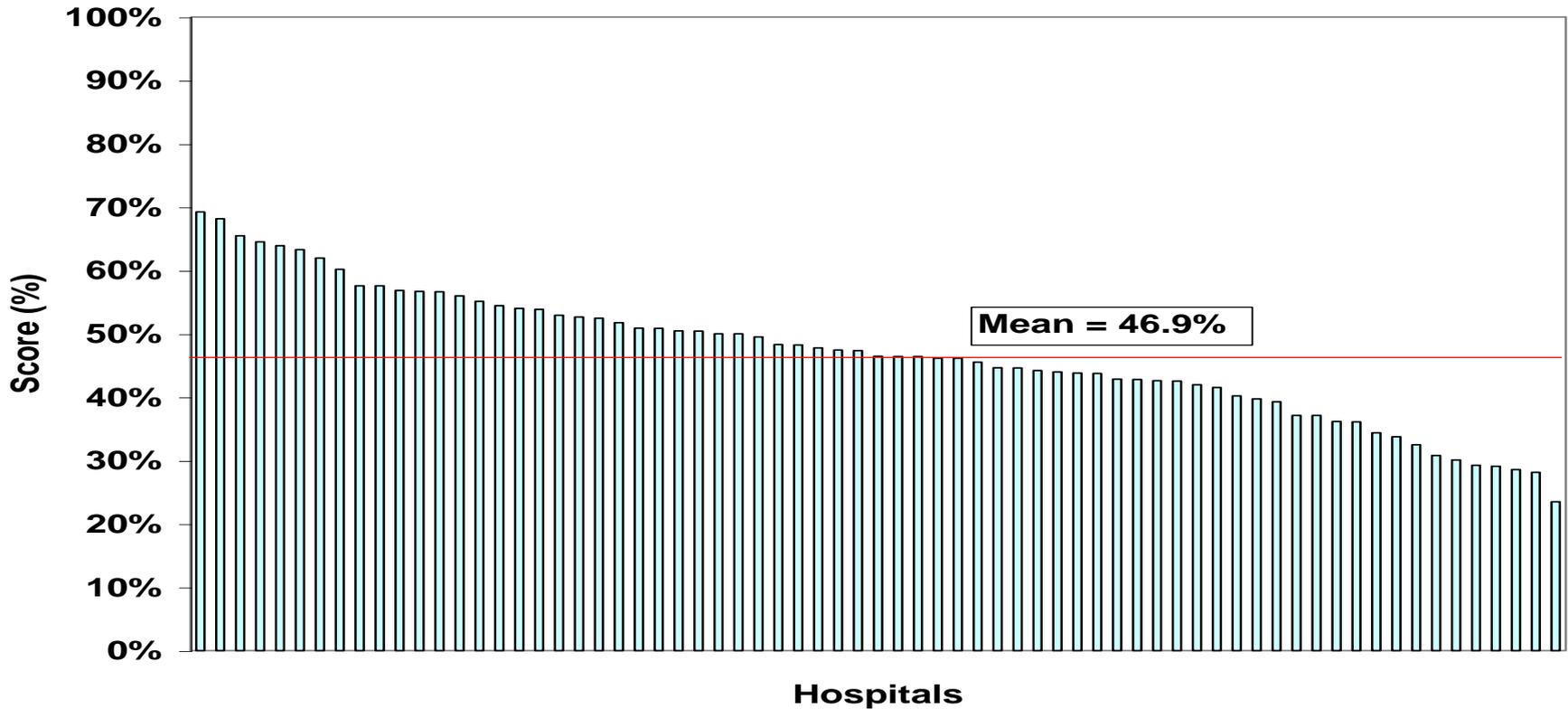


Results: Decubitus Ulcer

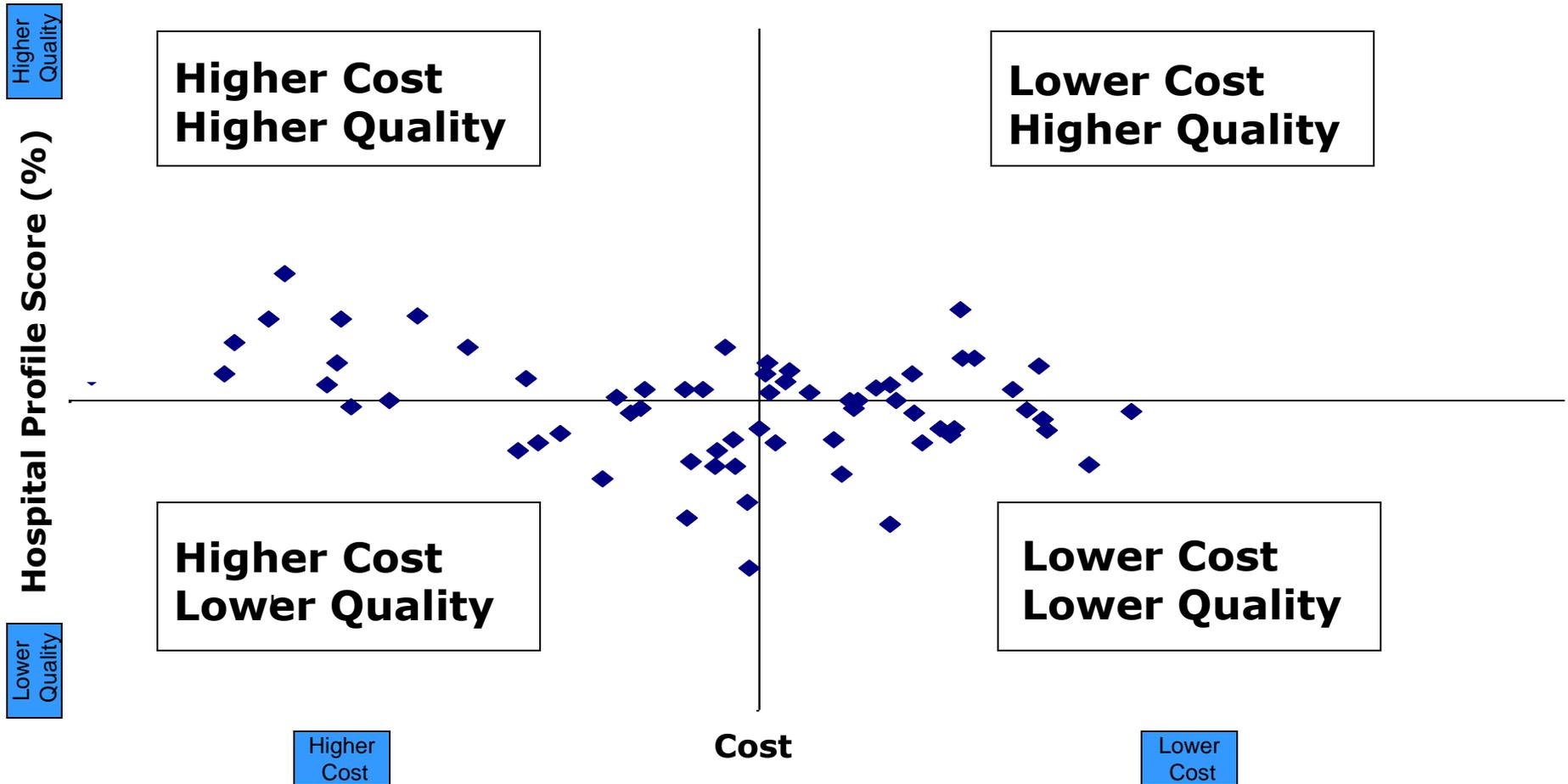


3rd Annual BCBSIL Hospital Profile Scores

Urban Hospitals Peer Groups 1-4



Urban Hospital Cost and Quality Value Report



Public Reporting

New Blue Star™ Hospital Report Profiling information to help members make informed decisions

At Blue Cross and Blue Shield of Illinois (BCBSIL), we're committed to helping members take charge of their health by providing a variety of resources, including information to assist them in assessing providers that best meet their needs. One new addition is the **Blue Star Hospital Report**.

The report provides performance information on 53 contracting urban Illinois hospitals. The data comes from multiple sources, including The Leapfrog Group's peer-to-peer investigative site, issues on improving patient safety, a NCCCO survey of members who were surveyed as an Illinois resident, information received previously in Blue Cross and Blue Shield's accreditation status. See the chart and report key for details.

Carol Moline, M.D., BCBSIL's Medical Director of Quality Improvement, explains, "The new Blue Star Hospital Report serves two purposes. First, it provides Blue Cross members with information about the safety and quality standards that hospitals have implemented. Second, we hope that public reporting will encourage hospitals to improve."

Hospital quality will continue an ongoing theme each year with the release annually to our members. The report can also be viewed on our Web site at www.bcbsil.com.



Spring 2005

Blue Prints for health

**Consumerism:
Take an active role in your health**

Do you know that just to be an emergency room, an emergency room can cost \$200 to \$500 for a doctor's appointment? What if you're a doctor's office, do you know the average cost of a 30-day supply of a common name drug costs \$71, compared to \$11 for a generic equivalent?

Today's cost-conscious consumers know that unnecessary healthcare expenses can add up to an eye-opening total — in higher insurance premiums, copayments and deductibles. Becoming more informed means that when you can, you'll choose the most affordable and effective way to become part of a large "consumer" in health care called "consumerism."

What is consumerism? It's a concept that empowers individuals to:

- Take charge of their health by actively seeking information on their health care conditions and making more informed decisions about their care.
- Make wise choices about how their health care costs are spent by selecting appropriate cost-effective services and providers.

At Blue Cross and Blue Shield of Illinois (BCBSIL), we help our members take charge of their health with these resources available at www.bcbsil.com:

- The new **Blue Star™ Hospital Report** can help you select providers that most meet your needs.
- The **Blue Star™ Annual GroupWIS Report** reveals medical groups' performance based on several national guidelines for providing preventive care and managing chronic conditions.
- **Blue Access™ for Members** gives you a Provider Finder™ tool to locate participating network providers' locations or specialists in your area online, to the Hospital Comparison tool, compare inpatient hospital outcome data, read drug-specific drug prices and providers, and access to health care website information from MyGo.com.™
- **Blue Ribbon™** is our critical illness and chronic illness collectible member webstore through a variety of services that cater to you and your family.

Make sure to visit www.bcbsil.com for more information on **CONSUMERISM AND BLUE PRINTS**.

So see which hospitals are **Blue Star™** performers, take a page # from **Blue Cross** and **Blue Shield** Hospital Report.

Blue Cross
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How to read this chart

QWIS Rating — This column reflects the hospital's achievement in meeting Leapfrog's goal to promote computer physician order entry (CPOE). CPOE has been shown to improve patient safety by reducing medical staff in-use computers for ordering medications, tests and procedures. (See key below for rating.)

PS Rating — This column reflects the hospital's achievement in meeting Leapfrog's goal to promote intensive care physician staffing (ICPS). Studies show that patient outcomes are better in hospitals where the intensive care unit is staffed with medical professionals who have specialized training in the unit.

See the Key for QWIS Rating and PS Rating

For this report and public report posted in June 2004 for a first publicly reporting year, Leapfrog set a goal of 90% for 2005.

- Hospital rates information available for reporting by Leapfrog
- Hospital made Leapfrog information goal only applicable and rates information available for public reporting by Leapfrog
- Hospital made Leapfrog information goal progress and rates information available for public reporting by Leapfrog
- Hospital made Leapfrog information goal implementation and rates information available for public reporting by Leapfrog

Member Satisfaction — This column reflects the hospital's composite score for Blue Cross and Blue Shield's annual Member Satisfaction Survey sent to all members who list an inpatient admission in 2004.

See the Key

- Survey results not applicable to individual member of hospital
- 90 percent to 99 percent satisfaction rate
- 80 percent to 89 percent satisfaction rate
- 70 percent to 79 percent satisfaction rate
- 60 percent to 69 percent satisfaction rate

Net Promoter Score — This column reflects the percentage of the hospital's medical staff that is a promoter.

See the Key

- 60 percent to 64 percent of medical staff is board certified
- 50 percent to 59 percent of medical staff is board certified
- 40 percent to 49 percent of medical staff is board certified
- 30 percent to 39 percent of medical staff is board certified
- 20 percent to 29 percent of medical staff is board certified
- 10 percent to 19 percent of medical staff is board certified

Accreditation Status — This column indicates the hospital received accreditation by the Joint Commission on Accreditation of Healthcare Organizations or the Healthcare Facilities Accreditation Program. Four Blue Stars indicate the hospital is accredited.

Performance-Based Recognition

- Indicators related to the hospital profile have been incorporated into many BCBSIL hospital contracts.
- The criteria used for the performance-based compensation is likely to evolve over the next several years.
- AHRQ indicators have not yet been included in the BCBSIL Blue StarSM Hospital Report, but will likely be included in the future.

