Analysis of the Outcome of Leapfrog Comment Letter to the Centers for Medicare & Medicaid Services (CMS)

Regarding the CMS Proposed Rule on Hospital Inpatient Prospective Payment Systems (IPPS)

Based on FY 2023 Final Rule Issued by CMS August 1, 2022; Analysis Prepared August 2022

Leapfrog Group Recommendation	Page # in Leapfrog Letter	Does the Final Rule Align with Leapfrog Recommendation?	CMS Final Ruling
Hospital Acquired Conditions Reporting Program (HACRP) *This is the program that financially penalizes hospitals for poor performance.*			
Withdraw the proposal to suppress PSI 90* data from public reporting in 2023.	3, 10	Yes	CMS will calculate PSI 90 results for FY2023 and publicly report PSI 90 results on the Care Compare* website.
Continue to maintain publication of previous PSI 90 data.	3, 11	NA	Because there was not a proposal regarding past time periods, the rule does not address this specifically. *Note: CMS noted all hospitals as "Not available" for PSI 90 in the July 2022 update on Care Compare. This was not addressed in the final ruling and Leapfrog continues to advocate to make this data available.*
Withdraw the proposal to suppress PSI 90 data from the HACRP for fiscal year (FY) 2023.	3, 12	No	CMS will not implement the HACRP for FY 2023. As a result, no hospital will receive a payment penalty. CMS will publicly report PSI 90 and infection data for FY 2023.
Maintain the financial penalty for the HACRP for FY 2023.	3, 12	No	For the FY23 program year, CMS is essentially forgoing implementing the HACRP financial penalty due to the suspension of the measures that make up the program (i.e. CDC NHSN HAIs, PSI 90) in FY 2023.
Withdraw the proposal to suppress the CDC NHSN* HAI* measures from the FY 2024 HACRP.	9	No	CMS will finalize its proposal to omit the CDC NHSN HAI measures from the FY24 HACRP. CMS will publicly report infection data for FY 2024.
Do not suppress future measures without proper rulemaking.	3, 11	Yes	CMS states they intend to allow public comment on future measure suppression via rulemaking.
Continue to report the CDC NHSN HAI measures on Care Compare.	12	Yes	CMS will publicly report the CDC NHSN HAI measures.

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Only increase the minimum threshold for PSI 90 if all-payor data can be considered. Otherwise too many hospitals may be omitted.	12-13	No	CMS will increase the threshold for PSI 90 without considering all-payor claims.
Add two digital CDC NHSN HAI measures to the HACRP: • **Healthcare-associated Clostridioides difficile Infection Outcome Measure** • **Hospital-Onset Bacteremia & Fungemia Outcome Measure** **But strongly recommend maintaining MRSA* and CLABSI* at the same time.**	13	NA	As this was a request for information, CMS did not make a final determination. CMS will also maintain MRSA and CLABSI.
Hospital Value-Based Purchasing Program (HVBP) *This is the program that financially rewards hospitals for good performance.*			
Do not suppress HCAHPS* & the CDC NHSN HAIs from the HVBP score in FY2023.	13	No	CMS will finalize its proposal to suppress HCAHPS & the CDC NHSN HAIs from the HVBP Program for FY 2023.
Reintroduce & respecify the 30-day pneumonia (PN) mortality measure for public reporting in FY2023.	15	Yes	CMS will respecify the 30-day PN mortality measure & resume publicly reporting results in Jan. 2023. Beginning in FY 2024, CMS will also begin to include an adjustment for patient history of COVID-19 within 12 months prior to the admission. This is for the 30-day PN mortality measure as well as the other 5 measure in this program.
Hospital Inpatient Quality Reporting Program (IQR) *This is the program to equip consumers with quality data to make more informed health care decisions.*			
Support the addition of 10 measures to the IQR Program, especially the two measures focused on screening for social needs—as long as collection of data is standardized (i.e., AHC tool*).	15	Yes	CMS will add 10 measures to the IQR Program. CMS also held firm on the use of the AHC Tool for screening.
Respecify the Excess Days in Acute Care After Hospitalization for acute myocardial infarction (AMI)* measure to increase the minimum threshold.	15	Yes	CMS will increase the minimum threshold of the measure.

Leapfrog Group Recommendation	Page # in Leapfrog Letter	Are We Satisfied With the Outcome?	CMS Final Ruling
Establish a quality & safety of maternity care designation that includes a variety of maternity outcome measures that are meaningful to consumers.	15	Partially	CMS will add a quality & safety of maternity care designation to the Care Compare website, but it will not include multiple measures in FY 2023. CMS agreed to expand to include more measures in the future.
Add two digital CDC NHSN HAI measures to the HACRP: • **Healthcare-associated Clostridioides difficile Infection Outcome Measure** • **Hospital-Onset Bacteremia & Fungemia Outcome Measure** **But strongly recommend maintaining MRSA and CLABSI at the same time.**	16	NA	As this was a request for information, CMS did not make a final determination. CMS will also maintain MRSA and CLABSI.
Expand the reporting of eCQMs from four to six measures and do not allow self-selection of these measures.	16	Partially	CMS will finalize its proposal to require the increased eCQM reporting from four to six but did not sway from allowing self-selection.
Hospital Readmissions Reduction Program (HRRP) *This is the program that encourages hospitals to improve communication and care coordination to reduce readmissions.*			
Develop peer group reporting in the HRRP for payment. Do not risk adjust for socio-demographic, racial, ethnic, or other demographics in public reporting.	17	NA	As this was a request for information, CMS did not make a final determination.
Additional Comments – Not Program Specific			
Prioritize examining disparities in the treatment rendered and outcomes attained.	17	NA	As this was a request for information, CMS did not make a final determination.
Specify the use of data on social determinants of health ICD-10 Z codes*.	17	NA	As this was a request for information, CMS did not make a final determination as to.
Meaningfully differentiate the variation in hospital performance on the safety and quality measures published on Care Compare.	3	No	CMS did not respond to Leapfrog's recommendation.

Report results from all federal hospital programs by bricks-and-mortar facility, not CMS Certification Number (CCN).	3	No	CMS did not respond to Leapfrog's recommendation.
Stop exempting hospitals from public reporting including critical access hospitals, pediatric hospitals, hospitals in U.S. territories, and others.	4	No	CMS did not respond to Leapfrog's recommendation.

Key Terms

Acute myocardial infarction
- Also known as a heart attack, is a life-threatening condition that occurs when blood flow to the heart muscle is abruptly cut off, causing tissue damage.

AHC Tool
- The AHC-HRSN is a 10-item screening tool to identify patient needs that can be addressed through community services including economic stability, social and community context, neighborhood and physical environment, and food.

Care Compare
- Care Compare displays hospital performance data for the public.

CDC NSHN
- CDC's National Healthcare Safety Network is the nation's most widely used healthcare-associated infection tracking system.

CLABSI
- Infection that occurs when bacteria or other germs enter the patient's central line and then enter into their bloodstream.

HAI
- Healthcare Associated Infections including MRSA, C. diff, infection in the blood, infection in the urinary tract, and surgical site infection after colon surgery.

HCAHPS
- A standardized survey instrument and data collection methodology collecting information about patient experience.

ICD 10 Z codes
- Provide descriptions for when the symptoms a patient displays do not point to a specific disorder but still warrant treatment.

MRSA
- A type of staph bacteria that is resistant to (cannot be killed by) many antibiotics.

PSI 90
- A composite of ten serious preventable errors that kill 25,000 hospitalized patients each year