



HOW DOES YOUR HOSPITAL **STACK UP?**

An Exclusive Inpatient eCQM
Benchmark Report from Medisolv



IT'S SAID THAT WHAT GETS MEASURED GETS IMPROVED.

It's also true, especially in healthcare, that what gets compared and published gets improved. This exclusive inpatient electronic clinical quality measure (eCQM) benchmark report from Medisolv gives your hospital quality department the comparative data it needs to drive improvement and higher eCQM scores now that they are public.

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INTRODUCTION

HOSPITALS AND HEALTH SYSTEMS collect and submit performance data to the Centers for Medicare & Medicaid Services (CMS) as part of the agency's hospital Inpatient Quality Reporting (IQR) program. While participation in the IQR program is voluntary for hospitals that treat Medicare patients, eligible hospitals that don't submit performance data are subject to a 25% reduction in their Annual Payment Update (APU). CMS requires participating hospitals to submit any four eCQMs to the agency each year. (In 2022, one of the four must be the new opioid eQCM.)

What happens next? After hospitals submit their eCQMs, CMS electronically confirms the receipt of the submissions—but that's it. Quality leaders don't know how their hospital's scores compare with the scores of their peers.

They don't know whether their scores are good or bad relative to hospitals with the same patient populations or clinical services.

Now, that's changing: **CMS**
will publicize 2021 hospital
performance data in 2022.

Medisolv is one of the few vendors in the nation with this data - and now we've aggregated it to help you compare your hospital's performance against that of more than 200 of its peers. As a quality leader, you can use this information to drive quality and safety improvement in your own organization in 2022 and beyond.

This report features mean, median, 25th percentile, 75th percentile, scores for 12 inpatient eCQMs for all quarters of 2021. You also can mark your quarterly scores for each of the 12 eCQMs on their respective sections.

How does your hospital compare? Flip through this exclusive eQCM benchmark report and find out.

METHODOLOGY

THE eCQM BENCHMARK SCORES featured in this report are based on performance data that Medisolv electronically harvests directly from approximately 200 of our hospital clients through our ENCOR quality-improvement software platform.

The timeliness of our quarterly harvest schedule is what keeps us on track to give timely insight into comparative performance.

Quarter 1:

- Harvest Data: April 30
- Publish Data: May 15

Quarter 2:

- Harvest Data: July 31
- Publish Data: August 15

Quarter 3:

- Harvest Data: October 31
- Publish Data: November 15

Quarter 4:

- Harvest Data: January 31
- Publish Data: February 15

Not all hospitals entered data for each quarter of 2021, so the number of hospitals reporting data per quarter varies slightly in each of the three quarters this year.

Before we use the de-identified eCQM data to build our quarterly benchmarks, we go through a number of checks to validate the data from each hospital. For example, we flag what we call “data

aberrations” or big changes in eCQM scores for one hospital from one quarter to the next. We also flag what we call “extreme outliers” or scores that fall more than two standard deviations from the norm.

We pool the data aberrations and extreme outliers and check them against the hospitals’ own data sets to rule out any technology-related data transfer issues. Those that can’t be explained and corrected via technology fixes get referred to our client services team, which then works with the hospital to identify potential causes of the aberrations and outliers. In many cases, significant internal organization changes at a hospital are the root cause of an aberration or outlier. An example would be adding or closing a clinical service line.

Depending on the cause, we either greenlight the data to be included in our calculations or remove the data from our data set for that quarter. At that point, we determine that we have a clean data set from which we can create our eCQM benchmarks.

Please [contact us](#) with any questions about our inpatient eCQM benchmark methodology.

Our thanks to Kristen Beatson and Stephen Manna for providing the information found in this report.

KRISTEN BEATSON, RN, is the Vice President of Electronic Measures at Medisolv.

STEPHEN MANNA is Director, Enterprise BI Solutions for Medisolv.

eCQM Benchmarks



eCQM BENCHMARKS

MEASURE NAME

Safe Use of Opioids—Concurrent Prescribing

Inverse Measure (lower scores are better)

SHORT NAME

CMS 506

	1Q	2Q	3Q	4Q
MEAN	19.41	18.14	17.48	18.29
MEDIAN	17.46	16.67	16.36	17.3
25 TH PERCENTILE	22.54	20.86	20.79	22.47
75 TH PERCENTILE	13.11	12.72	12.46	12.52

MEDISOLV BENCHMARK **7.74**

ENTER YOUR QUARTERLY
OPIOID PRESCRIBING SCORES

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

eCQM BENCHMARKS

MEASURE NAME

**Admit Decision Time to ED (Emergency Department)
Departure Time for Admitted Patients (Unstratified)**

SHORT NAME

ED-02

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

1Q

2Q

3Q

4Q

MEAN

n/a

n/a

n/a

n/a

MEDIAN

106.75

87

109

119

25TH PERCENTILE

147.62

131.5

158.5

176.25

75TH PERCENTILE

66.75

62

69.5

71

MEDISOLV BENCHMARK 34.39

ENTER YOUR QUARTERLY ADMIT
DECISION TIME SCORES

eCQM BENCHMARKS

MEASURE NAME

Discharged on Antithrombotic Therapy

SHORT NAME

STK-02

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

1Q

2Q

3Q

4Q

MEAN

78.56

83.31

78.69

83.92

MEDIAN

94.43

95.83

92.31

96.13

25TH PERCENTILE

74.34

80.95

78.92

83.55

75TH PERCENTILE

100.00

100.00

100.00

100.00

MEDISOLV BENCHMARK 100.00

ENTER YOUR QUARTERLY
DISCHARGED ON ANTITHROMBOTIC
THERAPY SCORES

eCQM BENCHMARKS

MEASURE NAME

**Anticoagulation Therapy for Atrial
Fibrillation/Flutter**

SHORT NAME

STK-03

	1Q	2Q	3Q	4Q
MEAN	51.14	43.34	42.29	47.55
MEDIAN	55.49	46.25	50.00	56.97
25 TH PERCENTILE	0.00	0.00	0.00	0.00
75 TH PERCENTILE	100.00	80.00	75.00	83.33

MEDISOLV BENCHMARK 94.8

ENTER YOUR QUARTERLY
ANTICOAGULATION THERAPY SCORES

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

eCQM BENCHMARKS

MEASURE NAME

**Antithrombotic Therapy by the End of
Hospital Day Two**

SHORT NAME

STK-05

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

	1Q	2Q	3Q	4Q
MEAN	79.81	84.3	82.04	82.45
MEDIAN	90.61	91.3	90.77	91.43
25 TH PERCENTILE	80.04	83.07	80.14	79.25
75 TH PERCENTILE	100.00	100.00	100.00	100.00

MEDISOLV BENCHMARK 99.85

ENTER YOUR QUARTERLY
ANTICOAGULATION THERAPY SCORES



eCQM BENCHMARKS

MEASURE NAME

Discharged on Statin Medication

SHORT NAME

STK-06

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

	1Q	2Q	3Q	4Q
MEAN	76.2	80.06	77.09	78.28
MEDIAN	90.91	91.84	91.8	92.31
25 TH PERCENTILE	70.7	77.78	74.09	75.00
75 TH PERCENTILE	100.00	100.00	100.00	100.00

MEDISOLV BENCHMARK 100.00

ENTER YOUR QUARTERLY STATIN
DISCHARGE SCORES



eCQM BENCHMARKS

MEASURE NAME

Elective Delivery

Inverse Measure (lower scores are better)

SHORT NAME

ePC-01

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

12

	1Q	2Q	3Q	4Q
MEAN	18.39	21.18	17.93	15.86
MEDIAN	0.00	0.00	0.00	0.00
25 TH PERCENTILE	35.25	50.00	35.6	31.24
75 TH PERCENTILE	0.00	0.00	0.00	0.00

MEDISOLV BENCHMARK 0.00

ENTER YOUR QUARTERLY
ELECTIVE DELIVERY SCORES

eCQM BENCHMARKS

MEASURE NAME

Cesarean Birth

Inverse Measure (lower scores are better)

SHORT NAME

ePC-02

	1Q	2Q	3Q	4Q
MEAN	11.17	13.08	14.07	12.68
MEDIAN	0.00	0.00	0.00	0.00
25 TH PERCENTILE	24.87	23.08	29.79	25.45
75 TH PERCENTILE	0.00	0.00	0.00	0.00

MEDISOLV BENCHMARK 0.00

ENTER YOUR QUARTERLY
CESAREAN BIRTH SCORES

eCQM BENCHMARKS

MEASURE NAME

Exclusive Breast Milk Feeding

SHORT NAME

ePC-05

	1Q	2Q	3Q	4Q
MEAN	36.32	37.57	40.99	39.09
MEDIAN	34.94	37.47	39.5	41.26
25 TH PERCENTILE	19.73	18.53	22.17	18.41
75 TH PERCENTILE	54.92	54.86	63.15	55.7

MEDISOLV BENCHMARK 81.9

ENTER YOUR QUARTERLY
BREAST-FEEDING SCORES



eCQM BENCHMARKS

MEASURE NAME

**Unexpected Complications in Term Newborns
(Unstratified)** *Inverse Measure (lower scores are better)*

SHORT NAME

ePC-06

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

	1Q	2Q	3Q	4Q
MEAN	n/a	2.86	4.08	2.12
MEDIAN	n/a	2.6	2.7	1.82
25 TH PERCENTILE	n/a	3.89	6.26	2.95
75 TH PERCENTILE	n/a	2.06	2.58	1.38

MEDISOLV BENCHMARK 3.9

ENTER YOUR
QUARTERLY TERM NEWBORN
COMPLICATION SCORES



eCQM BENCHMARKS

MEASURE NAME

Venous Thromboembolism Prophylaxis

SHORT NAME

VTE-1

	1Q	2Q	3Q	4Q
MEAN	85.13	84.31	86.43	85.2
MEDIAN	89.28	89.22	90.53	90.24
25 TH PERCENTILE	81.18	81.47	83.27	83.21
75 TH PERCENTILE	95.94	95.81	95.93	95.39

MEDISOLV BENCHMARK **99.32**

ENTER YOUR
QUARTERLY VENOUS
THROMBOEMBOLISM SCORES



eCQM BENCHMARKS

MEASURE NAME

**Intensive Care Unit Venous
Thromboembolism Prophylaxis**

SHORT NAME

VTE-2

MEASURE

1

2

3

4

5

6

7

8

9

10

11

12

	1Q	2Q	3Q	4Q
MEAN	79.03	78.55	82.56	80.62
MEDIAN	94.39	93.45	95.06	95.16
25 TH PERCENTILE	80.78	81.81	89.14	87.16
75 TH PERCENTILE	98.71	98.63	98.06	98.4

MEDISOLV BENCHMARK 99.99

ENTER YOUR
QUARTERLY ICU VENOUS
THROMBOEMBOLISM SCORES

How to Use This Benchmark Report ●●●●●

KRISTEN BEATSON, RN, & STEPHEN MANNA

THIS INPATIENT eCQM BENCHMARK REPORT from Medisolv gives hospital quality leaders like you unparalleled insights into your organization's performance on 12 different inpatient eQMs.

Learn more about how we derived these benchmarks [here](#).

This benchmark report and the eCQM benchmarking tools embedded in [Medisolv's ENCOR quality management software platform](#) are game changers for you, your department and your hospital.

For the first time, you can compare your eCQM scores over time with the scores of hospitals that treat similar patient populations, offer the same clinical services and are of the same size and location. This report shares aggregate quarterly scores to date from nearly 200 hospitals for 12 eQMs. The custom benchmarking tools in ENCOR enable you to drill deeper into the data using a number of different filters.

Knowing and comparing your eCQM scores is one thing. What you do with that knowledge and data comparisons is another. That's where your power to drive quality improvement comes from.

We recommend a five-step process to harness that power, which you'll find on the next page. →

1

Start by comparing your score on an eCQM with how well your peer hospitals scored on the same eCQM. Are you noticeably higher or lower than the mean or median? How do you compare with the scores at the 25th or 75th percentile for that eCQM?

2

Assuming you find a noticeable difference one way or the other and want to know why, the first place to look is your mapping for the eCQM. By definition, you send eCQMs electronically to CMS without human intervention. That means all the data elements that make up an eCQM must be precisely coded and connected to generate an eCQM that accurately captures your performance on that measure. If your mapping is off, your eCQM score could be off, too.

3

The next step is to check your workflows. Your mapping may be correct, and the resulting eCQM may be valid based on that mapping, but your score may be off because a breakdown in your workflows is preventing a critical data element from being captured by your mapping. That may be a glitch in an IT system or a new clinical protocol that bypasses a legacy data element.

4

Another possible explanation for missing data that causes your eCQM to miss the mark is clinical documentation. Doctors, nurses and other clinicians might not be accurately, completely or thoroughly documenting the care they provided to patients or the data elements connected to that care in their patients' EMRs. Improving clinical documentation may improve your eCQM score.

5

If all your eCQM structures and processes are in place and functioning like they're supposed to, the final step is to look at the actual clinical practices of your doctors, nurses and other clinicians. They may not be universally following all the standard clinical protocols for the types of patients and medical conditions reflected in the eCQM. This is when you need to collaborate with your medical staff to improve adherence to clinical protocols through medical education and training.

Putting it into action

This fifth step—examining your hospital's clinical practices—is where you can really make a difference in your eQCM scores by improving adherence to your evidence-based practices. The earlier steps focus on fixing structures and processes, but those fixes can only take you so far. Improving the quality and safety of patient care moves the needle.

If you're like most hospitals, you don't track all 12 eQCMs. In that case, which of the eQCMs that you do track should you go after first, using this five-step approach based on our new benchmark data and tools? Here's the order that we suggest:

1

THE FOUR eQCMS YOU SUBMIT TO CMS.

(Safe Opioid Prescribing required by CMS in 2022.) These will be the four that CMS ultimately makes public and uses to compare your performance with other hospitals'. You want to put your best foot forward on these.

2

THE eQCMS WHERE YOUR SCORES ARE MARKEDLY LOWER THAN THOSE OF YOUR PEER HOSPITALS.

Being markedly lower could be a sign that your hospital isn't providing the optimum level of care to a specific type of patient. Again, this is where you'll drive the biggest gains in quality and safety.

3

THE eQCMS WHERE YOUR SCORES ARE COMPETITIVE WITH YOUR PEERS'.

Here, you have a choice: Will you be satisfied because you're as good as they are? Or do you want to lap your peers and move ahead of the pack on that particular measure?

4

THE eQCMS WHERE YOUR SCORES ARE MARKEDLY HIGHER THAN THOSE OF YOUR PEERS.

Again, you have a choice to make. Will you be satisfied being better than most of your peers? Or do you see an opportunity to aim for a top ranking on that particular measure?

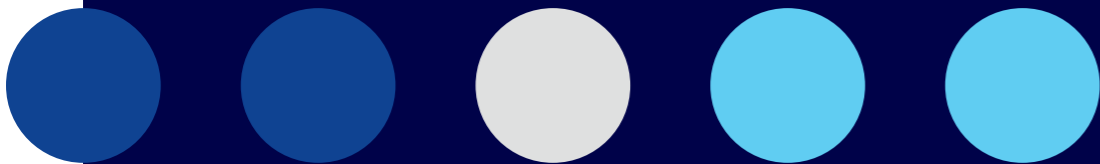
Whatever step you take in the five-step approach, and however you decide to prioritize which eQCMs to improve, you now have the benchmark data to support and justify every move you make to improve the care you give patients.

CONCLUSION

WE HOPE THIS INFORMATION will spark conversations within your organization about your hospital's performance compared with its peers. How did your hospital's scores for the measures you track compare with our benchmarks for all quarters of 2021? Is your hospital performing above, at or below the first-ever eCQM benchmarks published in the industry?

Knowing how your hospital compares with your peer hospitals will help you advance on your quality-improvement journey. Following the data will lead you to solutions that will help you improve your eCQM scores and improve the quality and safety of the care that you provide to your patients.

Let us know how we can help you on your journey.



Ready to **take the next step**
to improve your hospital's
eCQM performance?

Contact Us



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