

# Performance Report Overview

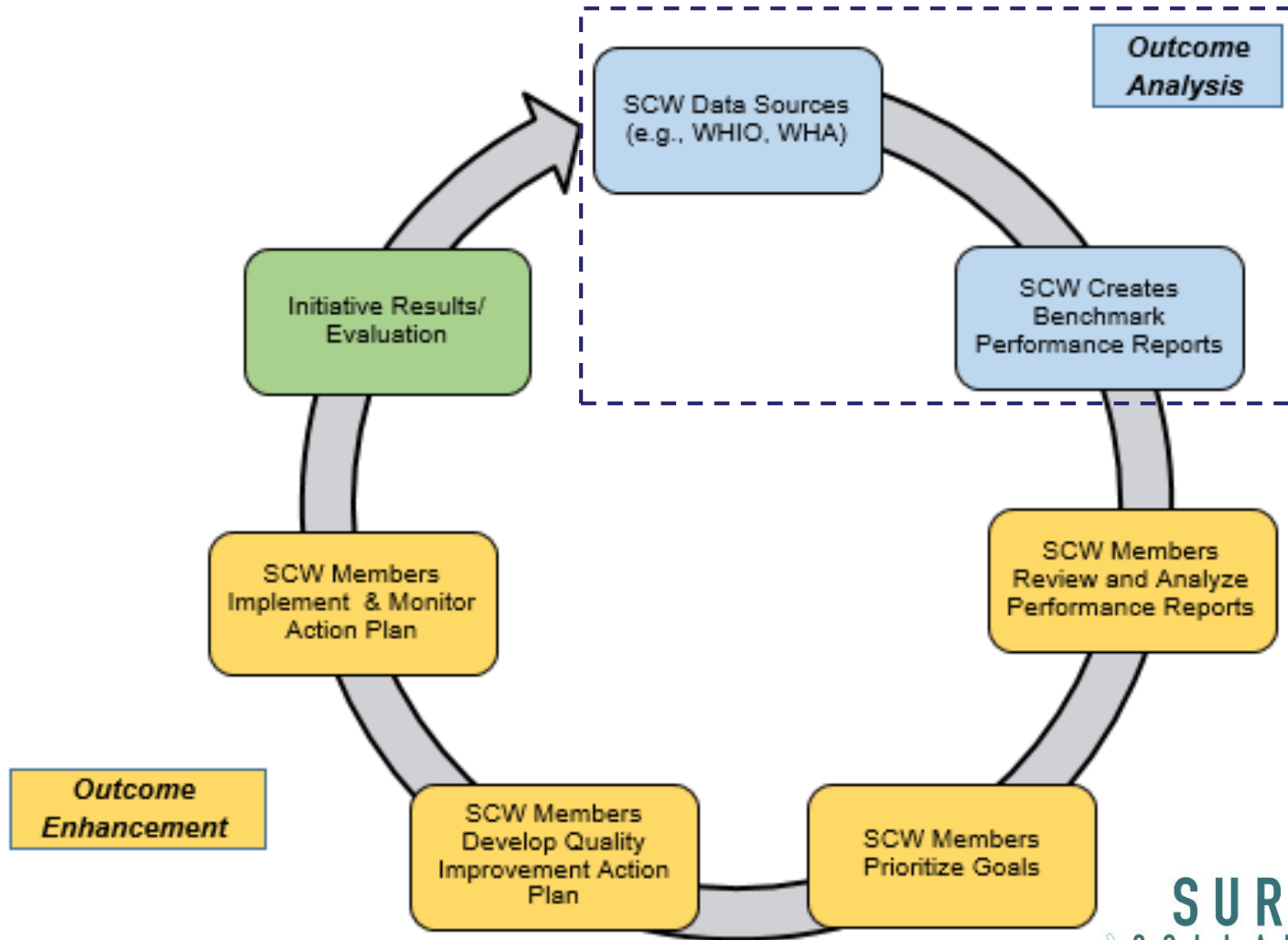


# Background

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- Accurate, reliable data is the cornerstone of every successful surgical collaborative
  - Identify problems by assessing current performance and identifying gaps
  - Enables accurate assessment of change on pre-determined performance measures
  - Allows for continued assessment of sustained improvement

# Outcome-Based Quality Improvement



# Assessing Data Needs for SCW Projects

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- Assess data elements/measures needed to accurately measure performance and judge improvement for specific project
- Determine number of cases over measurement period to produce robust estimates (min of 10/yr)
- Available Data
  - Must be accurate, reliable, timely
  - Must be measured consistently to capture current state & improvements
  - Minimize data collection burden



# Wisconsin Health Information Organization (WHIO)

“Dedicated to improving the quality, affordability, safety and efficiency of health care in Wisconsin”

## Contribution to SCW:

- All-payer claims database (Commercial, Medicaid FFS, Medicare)
- Includes ~80% of WI population
- Leader in quality measurement and reporting
- Identified Uses: Inpatient/ Outpatient Use (diagnosis & procedure codes); Pharmacy; Comorbidity (important to risk adjustment)



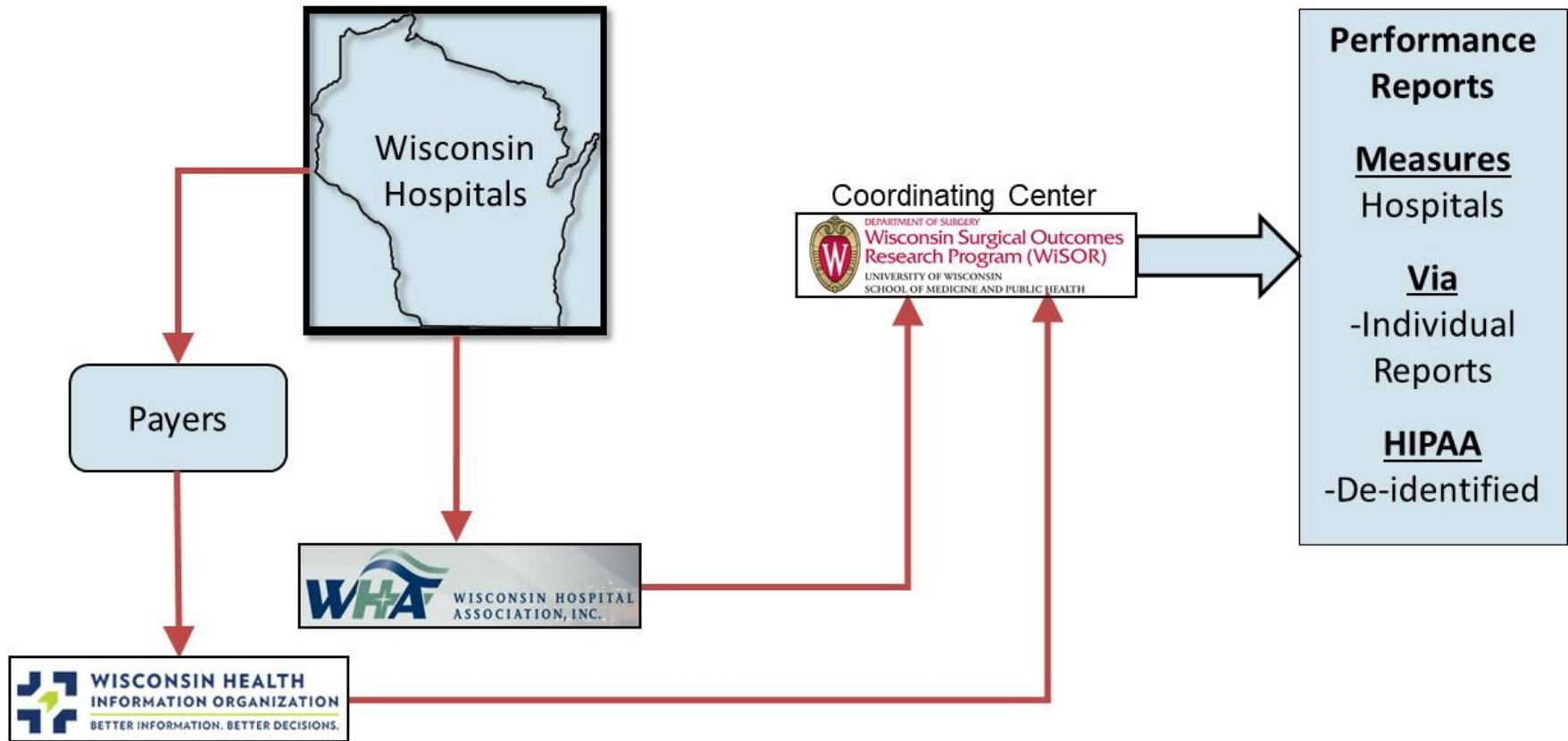
# Wisconsin Hospital Association (WHA)

“Advocating for the ability of its members to lead in the provision of high quality, affordable, and accessible health care services, resulting in healthier Wisconsin communities.”

## Contribution to SCW:

- Inpatient and outpatient discharge data (quarterly)
- Committed to facilitating collaboration between hospitals
- Identified Uses: Hospital Use Over Time (diagnosis & procedure codes)

# Data Flow for Initial Performance Reports

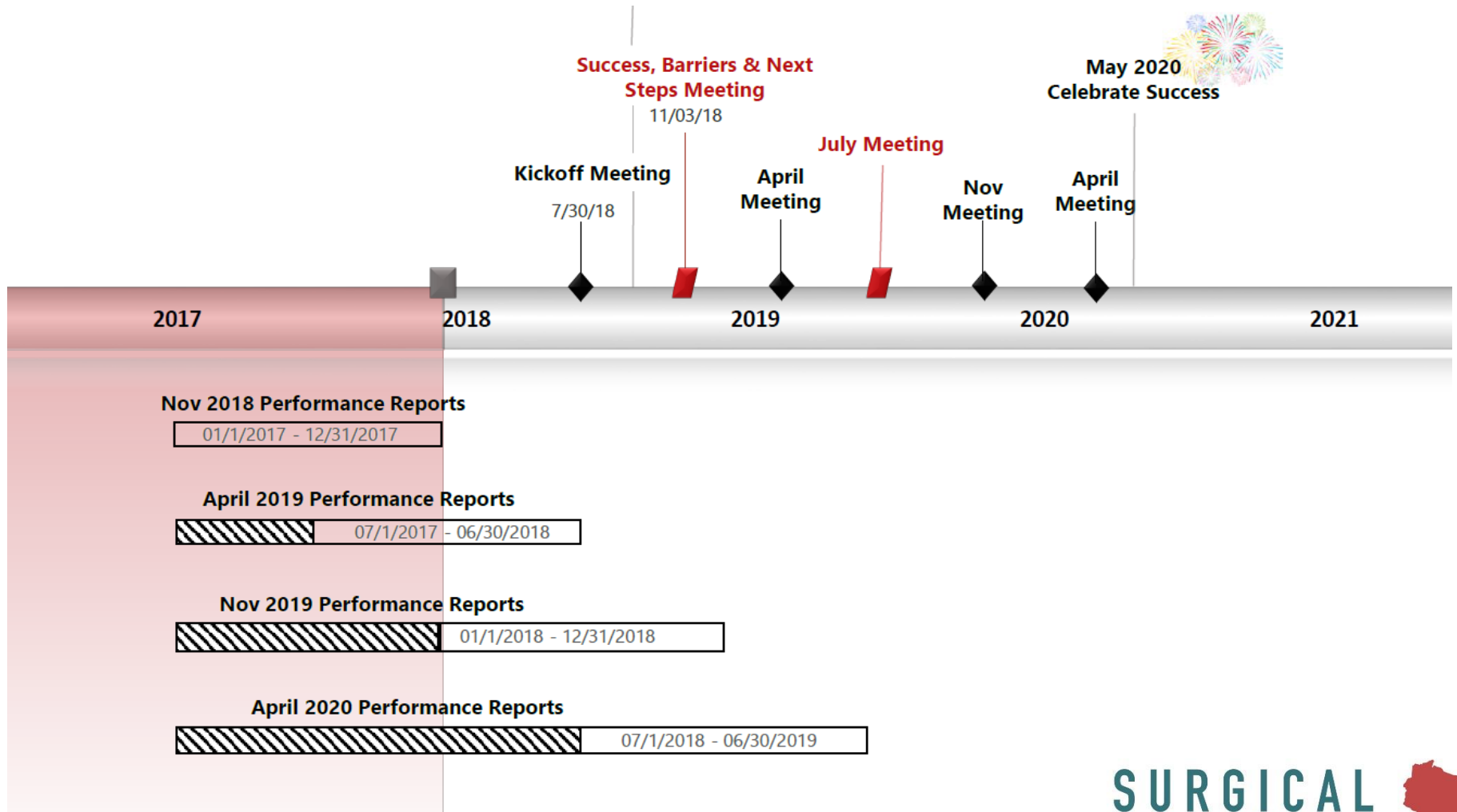


# Data Accuracy & Reliability

Type of Measure (Examples)	Hospital Discharge Data (WHA)	Insurance Claims (WHIO)	Primary Data Collection
Surgery	X	X	
Hospital Use (ED; Readmission; Length of Stay)	X	X	
Outpatient Services, including Pharmacy		X	
Complications; SSI; VTE			X
Labs			X



# Quality Initiative Timeline



# Importance of Risk & Reliability Adjustment

- Comparing estimates between hospitals or surgeons requires accurately and fairly accounting for differences in
  - Risks of outcomes based on patient population differences (“risk adjustment” for case mix)
  - Number of cases available (“reliability adjustment”)



1 complication; 10 patients



1 complication; 50 patients

# Performance Report

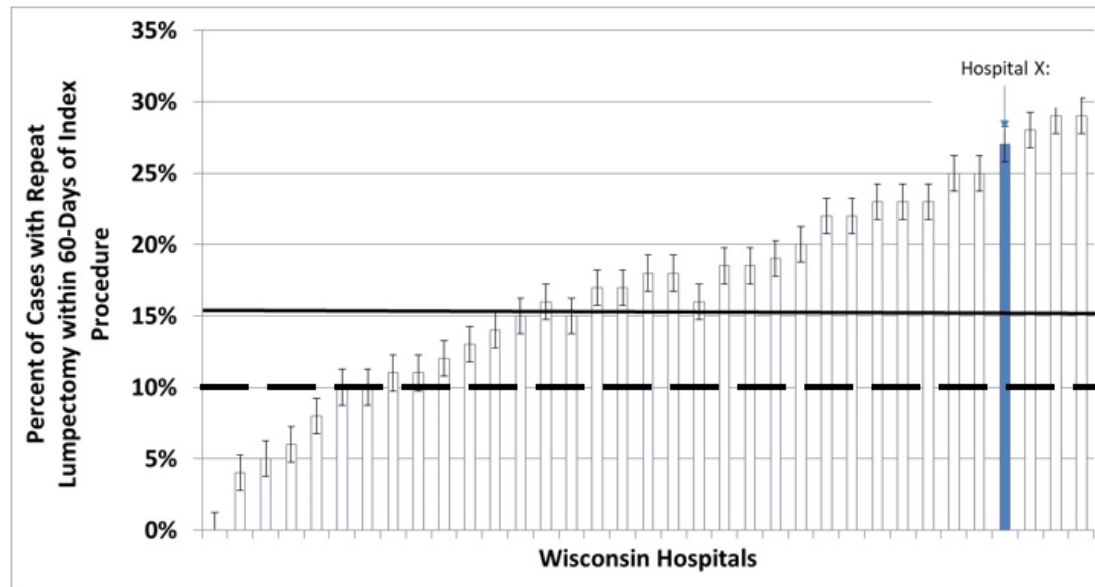
## Core Common Elements

- Hospital-level unadjusted and risk- and reliability-adjusted estimates
  - Comparators: All Wisconsin hospitals; SCW participating hospitals; Society-endorsed targets when available
  - Confidence intervals around estimates to facilitate comparisons
- Hospital level case volume & brief patient sociodemographic & clinical characteristics
- Graphical representation of the range of performance across hospitals

# Performance Report

## Project: Reducing Repeat Operations for Women with Breast Cancer

- Measures
  - 60-Day Re-excision Rate
  - Mastectomy Rate

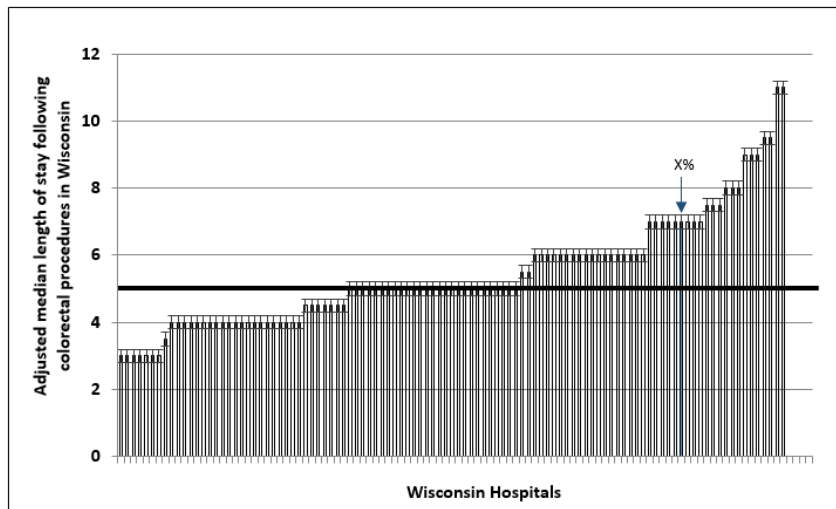


# Performance Report

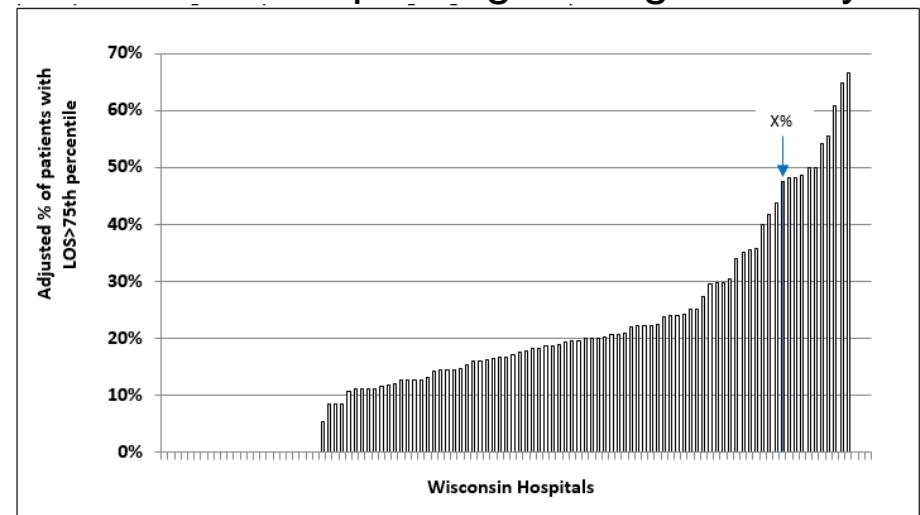
## Project: Enhanced Recovery after Colorectal Procedures

- Measures
  - Median/mean length of postoperative stay
  - All-cause 30-day readmission
  - Predicted probability of prolonged length of stay (>75<sup>th</sup> percentile)

Median length of stay (days)



Percent with prolonged length of stay

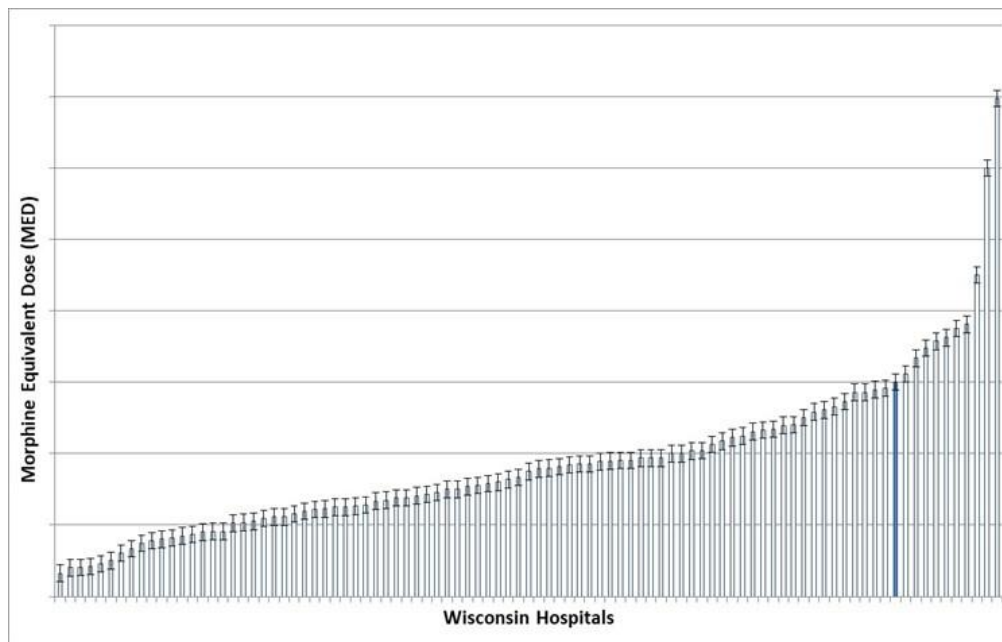


# Performance Report

## Project: Reducing Opioid Prescribing

- Measures
  - Mean number of hydrocodone, codeine, tramadol, oxycodone, hydromorphone tablets filled postoperatively by procedure
  - Mean morphine equivalent dose (MED) filled within 30 days of procedure

Postoperative MED filled within 30 days



# Future Report Enhancements

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- Confidential surgeon-level reports when possible
- Assessing changes in measures over time
- Assessing potential for secure e-report delivery