



**Analysis of the Outcome of Leapfrog Comment Letter to
The Centers for Medicare and Medicaid Services (CMS)
Regarding the CMS Proposed Rule on Hospital Inpatient Prospective
Payment Systems (IPPS)**

Based on FY 2019 Final Rule Issued by CMS August 2018

Analysis prepared August 2018

Leapfrog Group Recommendation	Page # in Leapfrog Letter	Are We Satisfied With the Outcome?	CMS Final Ruling
Strongly oppose CMS proposal to remove 39 infection and patient safety measures from the Inpatient Quality Reporting Program (IQR). We advocate the importance of full transparency, preserving the measures in Hospital Compare and maintaining reporting at a high level of detail	5	Partially	CMS will remove the 39 proposed measures from the IQR, but 5 infection measures will be removed 1 year later than originally proposed. The good news is that the final rule has significant language citing Leapfrog's comments (and aligned comments from others) assuring continued public reporting of safety measures on Hospital Compare and in a manner consistent with the detail currently available
Differentiate between hospitals on quality and safety on CMS Hospital Compare	2	No	Did not respond to Leapfrog's comment
Report on CMS Hospital Compare by bricks and mortar facility, not Medicare Provider Number (MPN)	2	No	Did not respond to Leapfrog's comment



Restore Healthcare-Acquired Conditions (HACs) and Never Events to CMS Hospital Compare	3	No	Did not respond to Leapfrog's comment
Don't exempt critical access hospitals, pediatric hospitals, military hospitals or hospitals in Guam & Puerto Rico from public reporting	3	No	Did not respond to Leapfrog's comment
Support the CMS proposal to include the following measures for future use in the Inpatient Quality Reporting Program: <ul style="list-style-type: none"> •Claims-Only, Hospital-Wide, All-Cause, Risk-Standardized Mortality measure •Hybrid Hospital-Wide, All-Cause, Risk-Standardized Mortality measure •Opioid Harm Electronic Clinical Quality Measure (eCQM) 	6	Yes	CMS will consider the use of all 3 measures for future use in the Inpatient Quality Reporting Program
Support the proposed rule to refine the "Communication About Pain" patient experience measure to dissuade the over prescription of opioids	7	Yes	CMS will move forward with their plan to refine the measure
Support CMS proposal for equal measure weights for Hospital Acquired Condition (HAC) Reduction Program measures	7	Yes	CMS will adopt equal measure weights beginning in fiscal year 2019
Maintain the 5 healthcare-associated infection measures in the Inpatient Quality Reporting Program. But if the measures are removed, continue reporting full information on the measures on Hospital Compare	8	Partially	The healthcare-associated infection measures will be removed from the Inpatient Quality Reporting Program. A change from the proposed to final rule is that these measures will be removed 1 year later than proposed. Significant language citing Leapfrog's comments assures continued public



			reporting of detailed safety measures in Hospital Compare
Do not support the CMS proposal to remove 10 safety measures from the Hospital Value-Based Purchasing Program	8	Partially	CMS will keep 6 of the 10 measures proposed for removal
Oppose the CMS proposal to revise the Hospital Value-Based Purchasing Program domains to remove the safety domain	9	Yes	CMS will maintain the safety domain in the Hospital Value-Based Purchasing Program
Do not support CMS proposed ability to withdraw measures from the Hospital Value-Based Purchasing Program without rulemaking	9	No	CMS will enact their ability to remove a measure without rulemaking if they believe the measure poses specific patient safety concerns
Do not support CMS proposal to remove the requirement to maintain a measure in Inpatient Quality Reporting Program that is used in the Hospital Value-Based Purchasing Program	10	No	CMS will no longer require that measures in the Hospital Value-Based Purchasing Program also be used in the Inpatient Quality Reporting Program
Do not support CMS proposal to report performance on the Hospital Value-Based Purchasing Program by domain and not by measure	10	Yes	CMS will report Hospital Value-Based Purchasing Program results at the measure level citing they will report the information in a manner that is transparent and easily understood by patients
Do not support CMS proposal to weigh costs and benefits of measures before use in Hospital Value-Based Purchasing Program, because the cost as defined in the proposed rule are costs to hospitals to collect and report the information. Cost and benefits should be defined	10	Partially	CMS cited Leapfrog's comments to explain that costs include costs to patients and caregivers. The language remains unclear that consumer needs will come before provider needs when defining benefits and costs



as they relate to beneficiaries and the public, not only hospitals.			
Oppose removal of the Methicillin-resistant Staphylococcus aureus (MRSA) measure from the Long Term Care Hospital Quality Reporting Program	11	No	CMS is moving forward with removing the MRSA measure
Do not support adjusting quality measures by socioeconomic status	12	No	CMS will adjust for socioeconomic status using dual-eligible beneficiary status for hospitals' payment adjustment factor
Support continued reporting of PSI 90 child measures in the CMS download file	12	Yes	CMS will continue to report the PSI 90 child measures in the CMS download file
Support reinstatement of the two year measurement period for PSI 90	12	Yes	CMS will use a two year measurement period for PSI 90
Support proposal for measure modifications regarding patients' access to their electronic health information	12	Yes	CMS will make proposed measure changes that promote giving patients better access to their electronic health information