

Hospital VBP Program, HAC Reduction Program, and Hospital Readmissions Reduction Program FY 2025 Provider Data Catalog Update

March 5, 2025

Speakers

Maria Gugliuzza, MBA

Program Lead, Hospital Value-Based Purchasing (VBP) Program
Division of Value, Incentives, and Quality Reporting Program Support (DPS) Contractor

Juliana Conway

Program Manager, Hospital-Acquired Condition (HAC) Reduction Program

DPS Contractor

Rebecca Silverman

Program Manager, Hospital Readmissions Reduction Program
DPS Contractor

Moderator Brandi Bryant

Business Analyst, Hospital VBP Program
Inpatient and Outpatient Healthcare Quality Systems Development and
Program Support

Purpose

This event will provide an overview of publicly reported data for the Centers for Medicare & Medicaid Services (CMS) inpatient hospital payfor-performance programs, including the Hospital VBP Program, the HAC Reduction Program, and the Hospital Readmissions Reduction Program.

3/5/2025 3

Objectives

Participants will be able to:

- Locate publicly reported data for the CMS inpatient hospital pay-for-performance programs.
- Identify publicly reported data from previous years.
- Obtain comma-separated value (CSV) files of the publicly reported data.

3/5/2025 4

Webinar Chat Questions

Please submit any questions that are pertinent to the webinar topic via the Chat tool. As time permits, we will answer these questions at the end of the webinar. Any pertinent question that we cannot answer during the webinar will be addressed in a question-and-answer summary document.

We do not use the raised-hand feature in the Chat tool during webinars.

If you have an additional questions after this event, submit your question through the QualityNet Question and Answer Tool. Include the webinar name, slide number, and speaker name.

If you have a question unrelated to the current webinar topic, please first search for the question in <u>QualityNet Question and Answer Tool</u>. If you do not find an answer, then submit your question to us via the same tool. We will respond to questions as soon as possible.

Acronyms

AMI	acute myocardial infarction	HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems
API	Application Programming Interface	HF	heart failure
CABG	coronary artery bypass graft	IPPS	Inpatient Prospective Payment System
CAUTI	catheter-associated urinary tract infection	MORT	mortality
CDI	Clostridium difficile infection	MRSA	Methicillin-resistant Staphylococcus aureus
CLABSI	central line-associated bloodstream infection	MS-DRG	Medicare Severity Diagnosis-Related Group
CMS	Centers for Medicare & Medicaid Services	MSPB	Medicare Spending per Beneficiary
COMP	complication	PN	pneumonia
COPD	chronic obstructive pulmonary disease	PSI	Patient Safety Indicator
CSV	Comma Separated Value	Q	quarter
DRG	Diagnosis-Related Group	RSCR	Risk-Standardized Complication Rate
DPS	Division of Value, Incentives, and Quality Reporting Program Support Contractor	RSMR	Risk-Standardized Mortality Rate
ERR	Excess Readmission Ratio	SSI	surgical site infection
FY	fiscal year	THA/TKA	total hip arthroplasty/total knee arthroplasty
HAC	Hospital-Acquired Condition	TPS	Total Payment Score
HAI	healthcare-associated infection	VBP	value-based purchasing

Maria Gugliuzza, MBA Program Lead, Hospital VBP Program, DPS

Provider Data Catalog and Data File Downloads

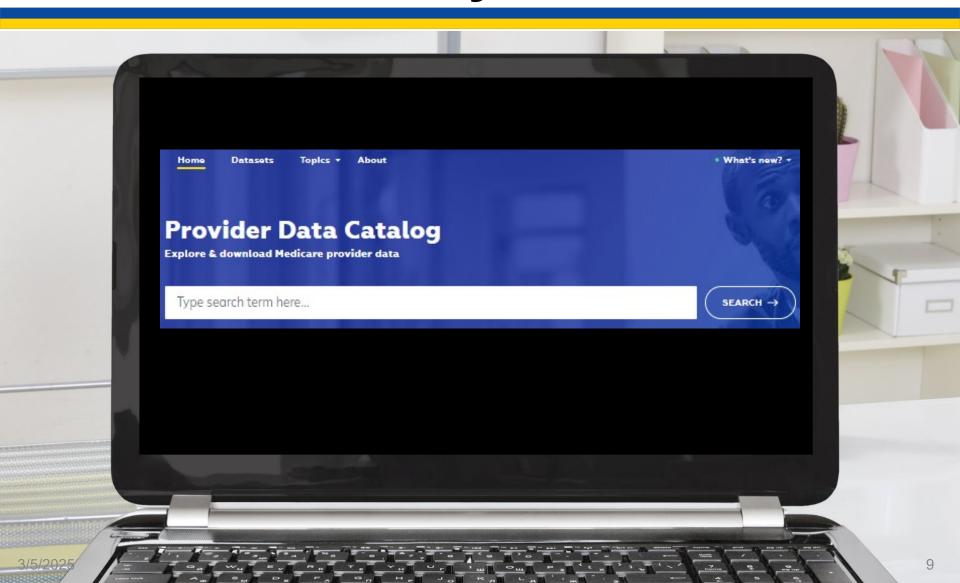
About the Provider Data Catalog

 The Provider Data Catalog gives you direct access to CMS official data used on the Compare Tool on Medicare.gov.

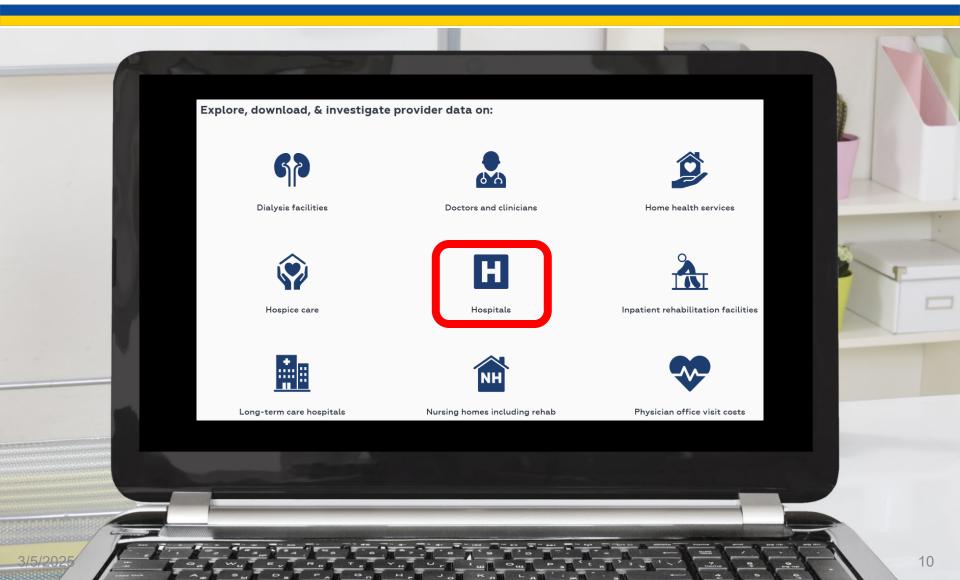
You can:

- View the data in your browser.
- Download the data in a variety of formats.
- Access the data through an Application Programming Interface (API). An API lets developers connect other applications to the data in real time using the same data CMS uses to power the Medicare.gov website.
- Provider Data Catalog: https://data.cms.gov/provider-data/

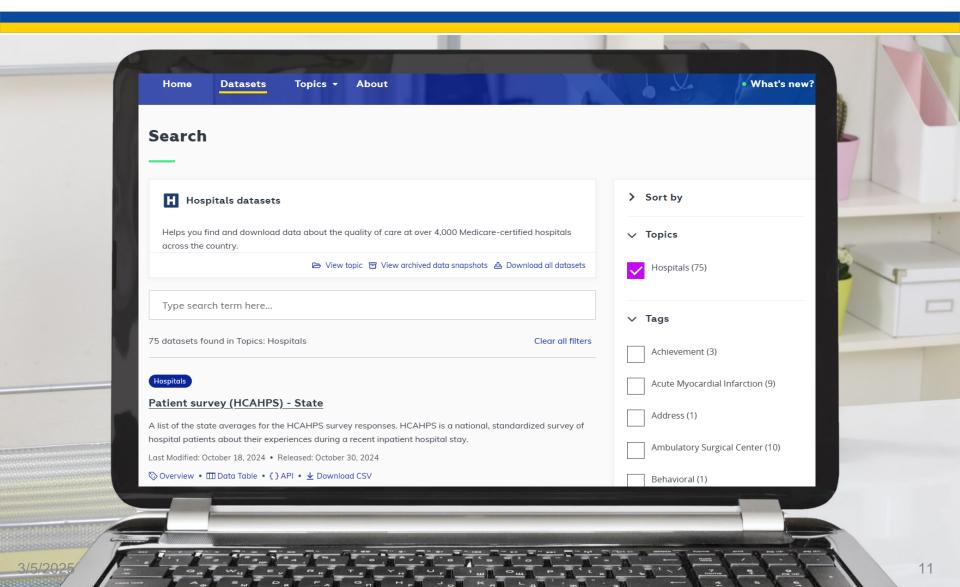
Provider Data Catalog Home and Key Term Search



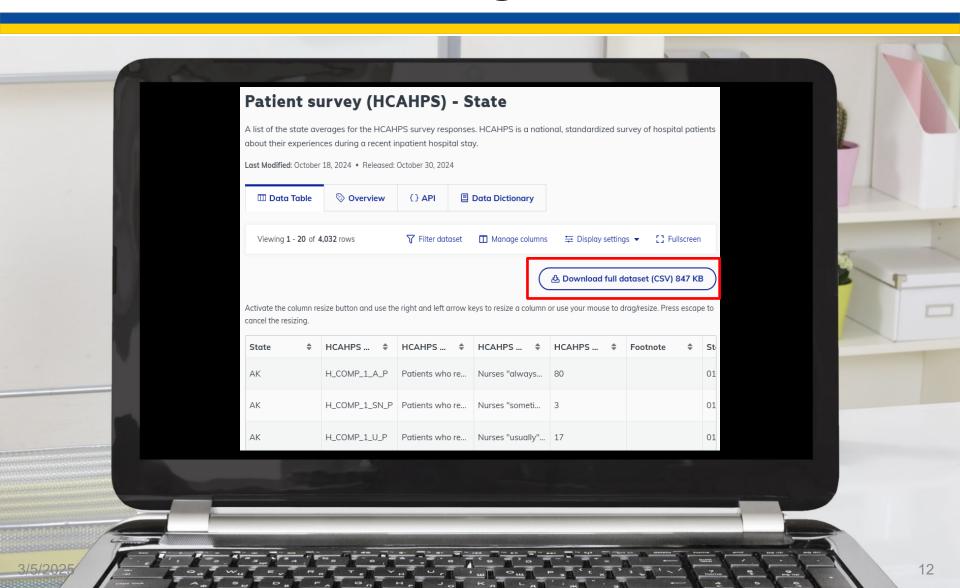
Provider Data Catalog Topics



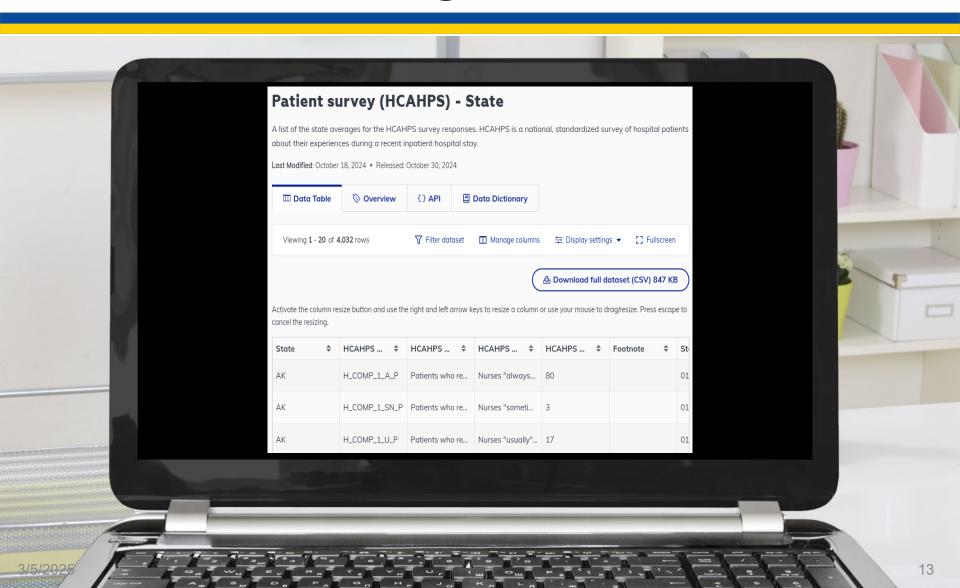
Provider Data Catalog Viewing and Selecting Datasets



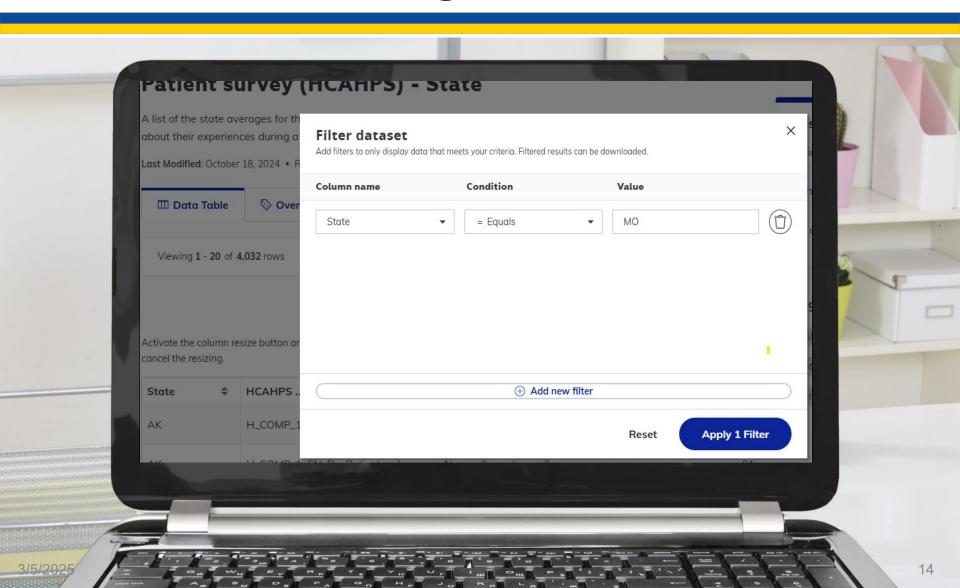
Provider Data Catalog Downloading a Dataset



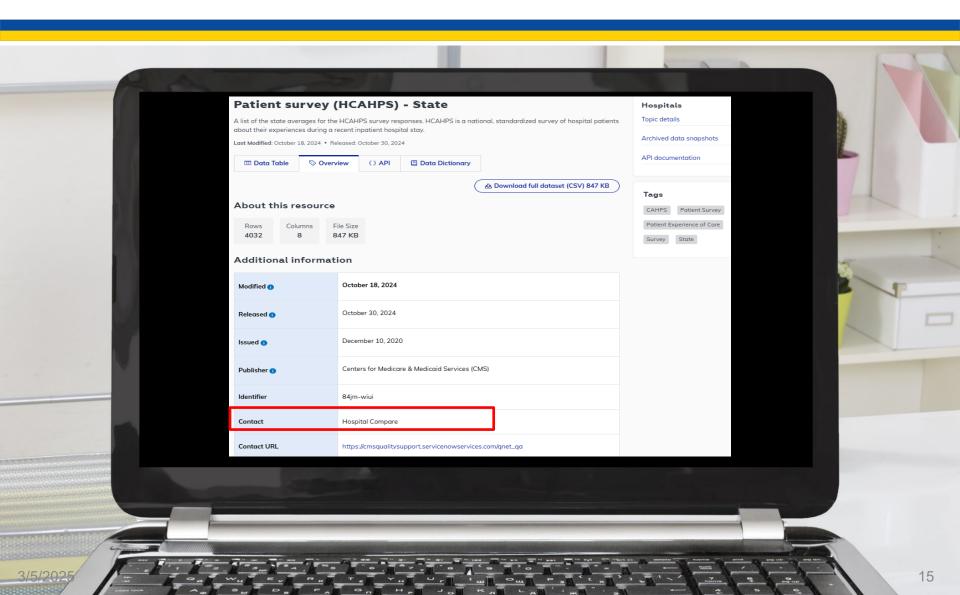
Provider Data Catalog Filtering a Dataset



Provider Data Catalog Filtering a Dataset



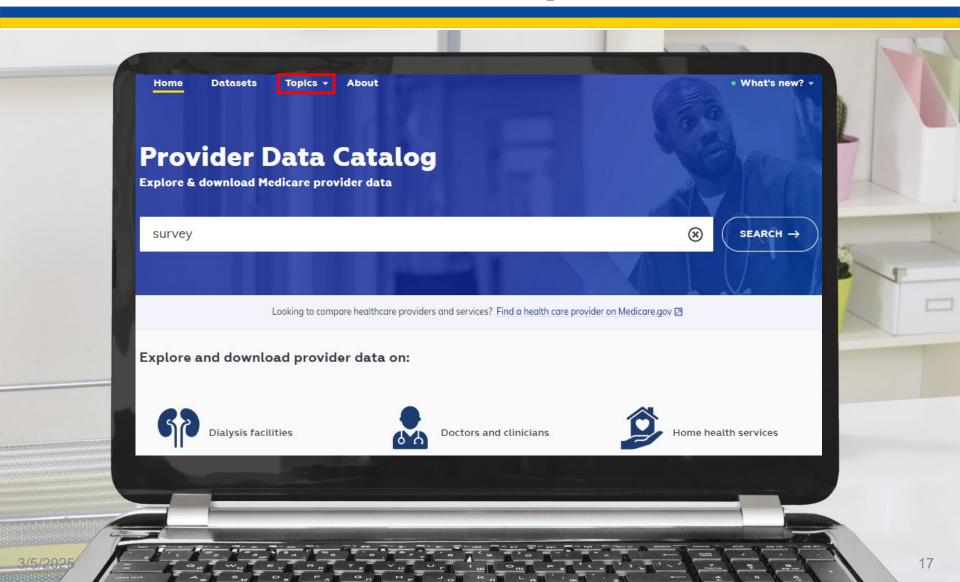
Provider Data Catalog Dataset Information



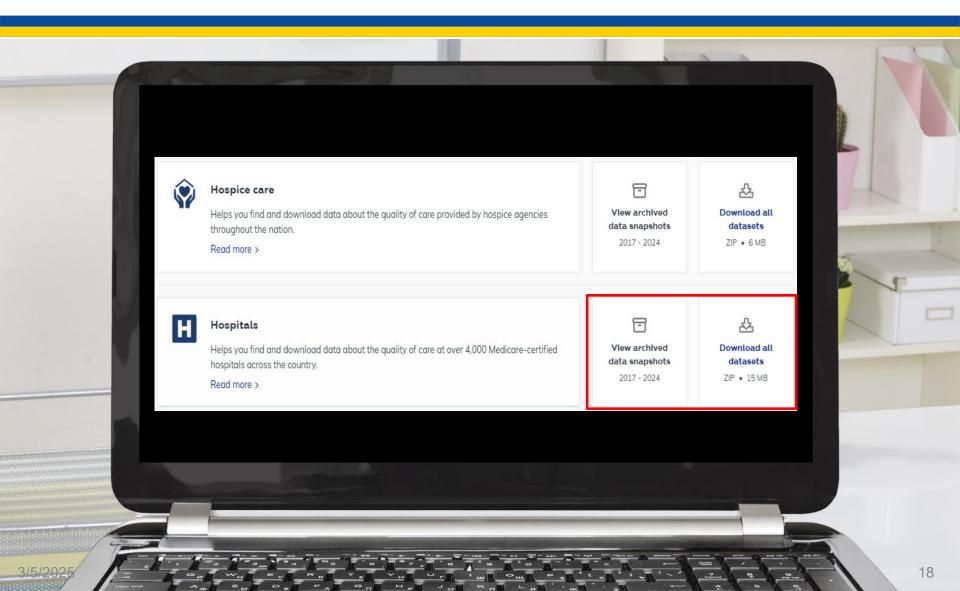
Frequently Asked Questions

- 1. How do I download the entire hospital database, not individual files?
- 2. How do I find previous releases (archived) hospital files?

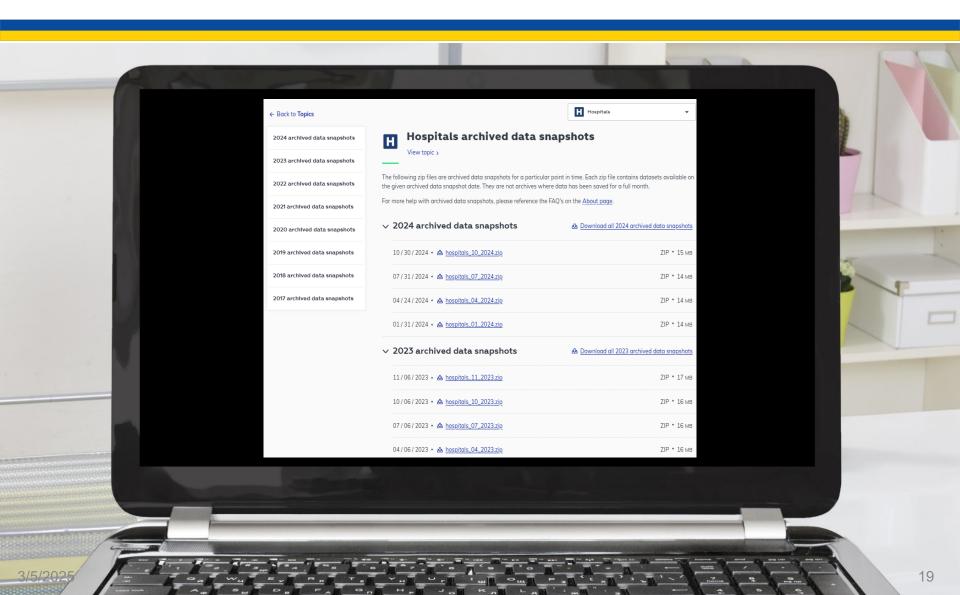
Provider Data Catalog Select Topics



View Archived Data and Download All Datasets



Hospital Data Archive



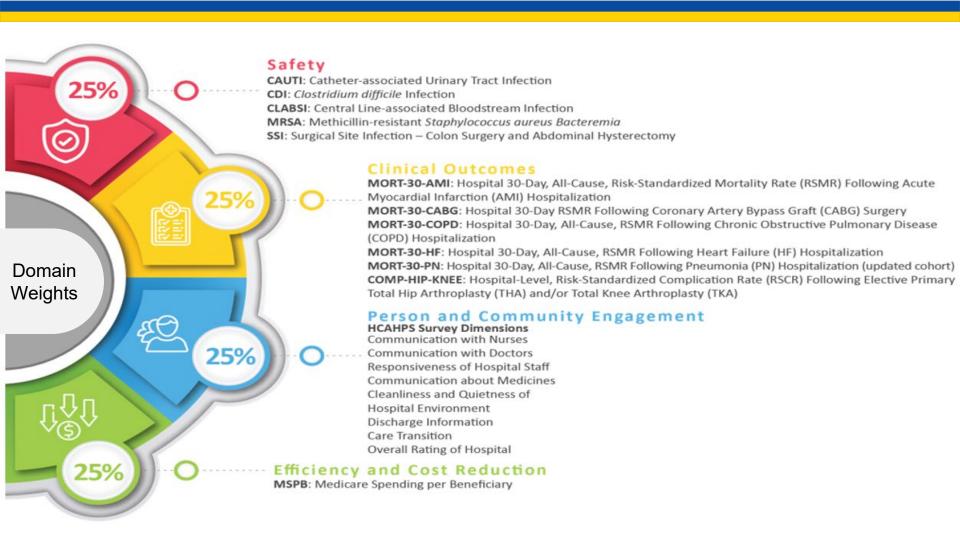
Maria Gugliuzza, MBA Program Lead, Hospital VBP Program, DPS

Hospital VBP Program

Program Overview

- The Hospital VBP Program is a value-based purchasing program established under Section 1886(o) of the Social Security Act.
- Hospital value-based incentive payments are based on hospital's Total Performance Scores (TPSs).
 - A TPS is determined by calculating a hospital's achievement and improvement points for each measure within each domain and summing weighted domain scores.
 - In fiscal year (FY) 2025, a total of 2,489 hospitals are subject to payment adjustments. The average TPS is 23.8, and all TPS's range from a minimum of 0.0 to a maximum of 75.7.
 - CMS provides hospitals 30 days to review and submit corrections prior to publicly reporting results.

FY 2025 Domains and Measures



FY 2025 Baseline and Performance Periods

190	Domain	Measure	Baseline Period	Performance Period
+	Clinical Outcomes	Mortality Measures (AMI, COPD, HF, CABG, PN)	July 1, 2015– June 30, 2018	July 1, 2020– June 30, 2023
		Complication Measure	April 1, 2015– March 31, 2018	April 1, 2020– March 31, 2023*
a	Person and Community Engagement	HCAHPS Survey	January 1, 2019– December 31, 2019**	January 1, 2023– December 31, 2023
•	Safety	Healthcare- Associated Infection (HAI) Measures	January 1, 2019– December 31, 2019**	January 1, 2023– December 31, 2023
\$	Efficiency and Cost Reduction	MSPB	January 1, 2021– December 31, 2021	January 1, 2023– December 31, 2023

^{*}As outlined in the interim rule (CMS-3401-IFC) published on September 2, 2020, CMS will exclude claims for services provided between January 1, 2020, and June 30, 2020 (Q1 and Q2 of 2020), from its calculations for Medicare quality reporting and value-based purchasing programs.

^{**}In addition, CMS also finalized these baseline periods due to the COVID-19 public health emergency.

Publicly Reported Data

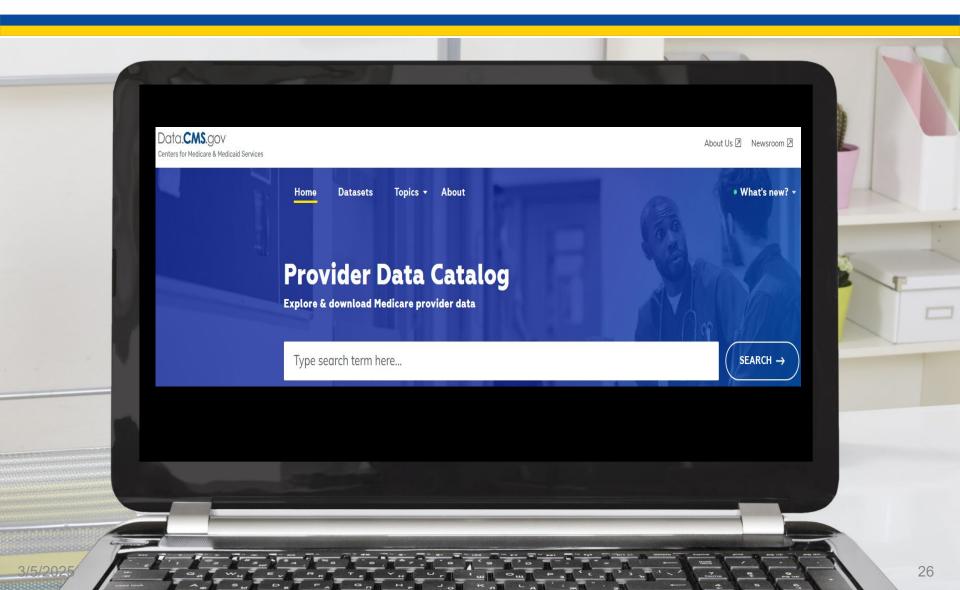
- On February 19, 2025, CMS updated the Provider Data Catalog on <u>data.cms.gov</u> to include the following FY 2025 Hospital VBP Program data and scoring information:
 - Measure/Dimension Scores
 - Domain Scores
 - TPSs
- Reminder: Actual FY 2021 Hospital VBP Program aggregate payment adjustments
 - Unchanged this year.

FY 2025 Payment Adjustment Factor File

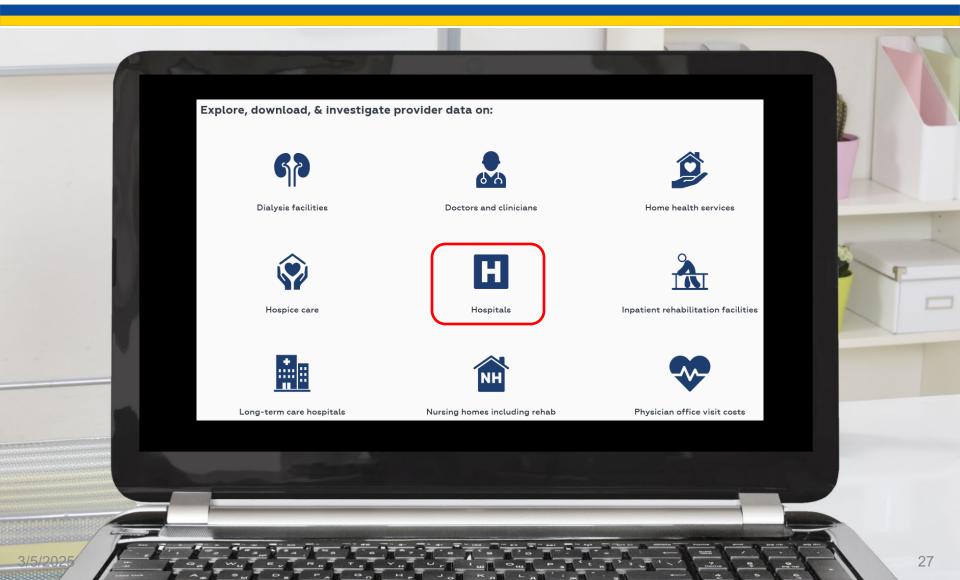
Table 16B, available on the CMS.gov website, contains the actual payment adjustment factors by CMS Certification Number for each participating hospital under the Hospital VBP Program for FY 2025. These actual factors are based on the finalized baseline and performance period for FY 2025, and CMS will use them to adjust base operating Medicare Severity Diagnosis-Related Group (MS-DRG) payments to eligible hospitals for discharges occurring in FY 2025.

Table 16B link: https://www.cms.gov/medicare/payment/prospective-payment-pa

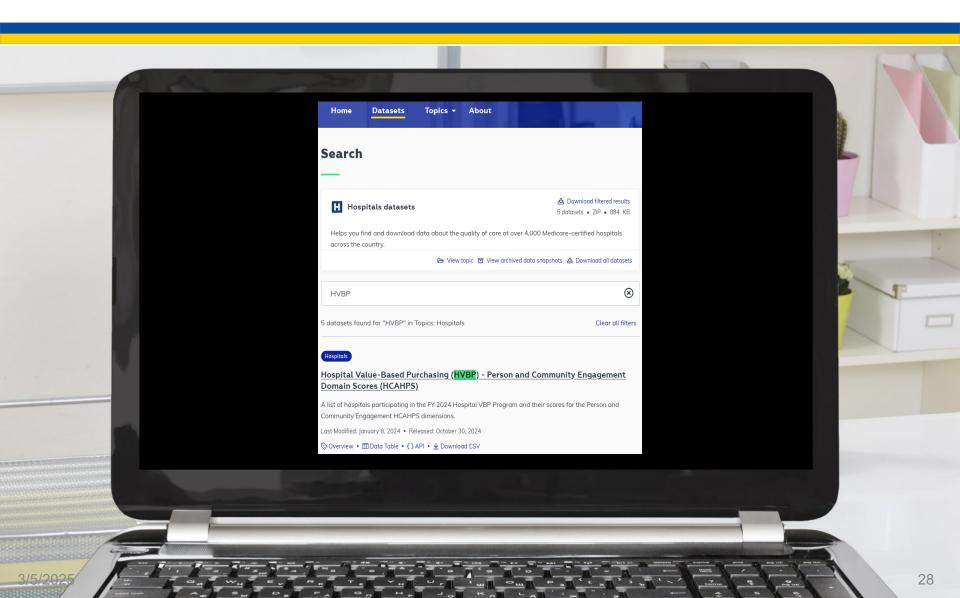
Provider Data Catalog Home and Search



Provider Data Catalog Topics



Keyword Search: VBP



Provider Data Catalog Hospital VBP Program Datasets

Hospital-level datasets that are available in the Provider Data Catalog for the Hospital VBP Program:

- Hospital Value-Based Purchasing (HVBP) Clinical Outcomes Domain Scores
- Hospital Value-Based Purchasing (HVBP) Person and Community Engagement Domain Scores (HCAHPS)
- Hospital Value-Based Purchasing (HVBP) Safety
- Hospital Value-Based Purchasing (HVBP) Efficiency Scores
- Hospital Value-Based Purchasing (HVBP) Total Performance Score

Hospital VBP Program Resources

Provider Data Catalog

- Website: https://data.cms.gov/provider-data/
- QualityNet Question and Answer Tool:
 https://cmsqualitysupport.servicenowservices.com/qnet_qa
 Navigate to the Ask a Question tab and select Hospital Compare Hospital Compare Site Support under the Program list.

Hospital VBP Program Methodology and General Information

- CMS.gov website: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HospitalQualityInits/Hospital-Value-Based-Purchasing-Medicare/QualityInits/Hospital-Value-Based-Purchasing-Medicare/QualityInits/Hospital-Value-Based-Purchasing-Medicare/QualityInits/Hospital-Value-Based-Purchasing-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Quality-Initiatives-Patient-Medicare/Medi
- QualityNet website: https://qualitynet.cms.gov/inpatient/hvbp

Hospital VBP Program General Inquiries

QualityNet Question and Answer Tool:
 https://cmsqualitysupport.servicenowservices.com/qnet_qa
 Navigate to the Ask a Question tab and select HVBP – Hospital Value Based Purchasing under the Program list.

Juliana Conway Program Manager, HAC Reduction Program, DPS

HAC Reduction Program

Program Overview

- The HAC Reduction Program is a value-based purchasing program established under Section 1886(p) of the Social Security Act.
- Hospitals with a Total HAC Score in the worstperforming quartile of all subsection (d) hospitals receive a 1-percent reduction to Medicare payments.
- CMS provides hospitals 30 days to review and submit corrections prior to publicly reporting results.
- In FY 2025, 729 hospitals are in the worst-performing quartile and receiving the 1-percent reduction.

Program Updates for FY 2025

For the FY 2025 HAC Reduction Program, CMS:

- Used version 14.0 PSI software to calculate CMS PSI 90.
- Made non-substantive changes to the CMS PSI 90 component measure, CMS PSI 08 – In-Hospital Fall-Associated Fracture Rate, to include all hospital fall-associated fractures, rather than only hospital fall-associated hip fractures.
- Adopted a validation reconsideration policy to allow hospitals that fail to meet the validation requirement to request a reconsideration of this validation decision.

FY 2025 Measures and Performance Periods

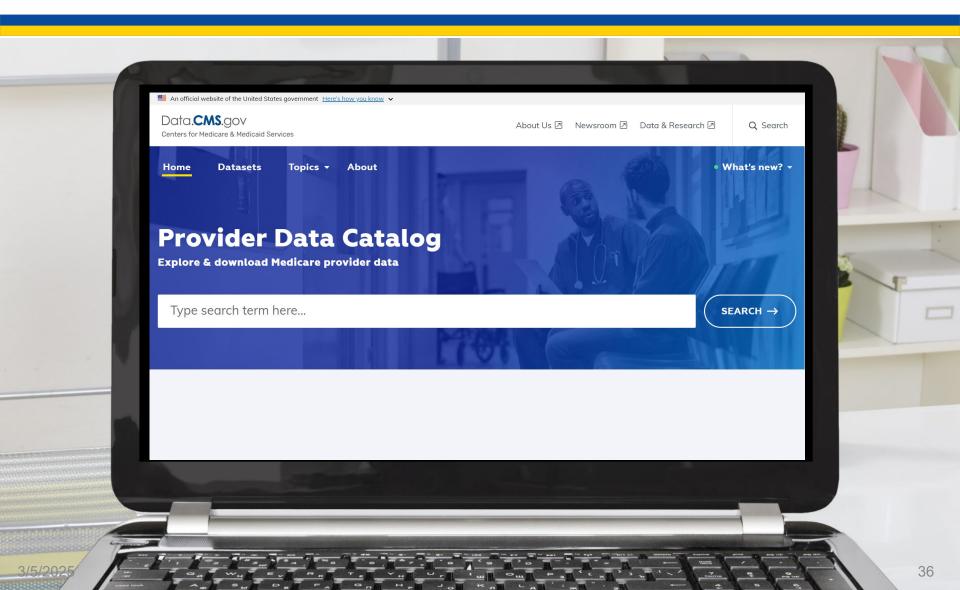
Measure	Data Source	FY 2025 Performance Period
CMS Patient Safety and Adverse Events Composite (PSI 90)	Claims	July 1, 2021–June 30, 2023
Central Line-Associated Bloodstream Infection (CLABSI)	Chart-abstracted	January 1, 2022–December 31, 2023
Catheter-Associated Urinary Tract Infection (CAUTI)	Chart-abstracted	January 1, 2022–December 31, 2023
Colon and Abdominal Hysterectomy Surgical Site Infection (SSI)	Chart-abstracted	January 1, 2022–December 31, 2023
Methicillin-resistant Staphylococcus aureus (MRSA) bacteremia	Chart-abstracted	January 1, 2022–December 31, 2023
Clostridium difficile infection (CDI)	Chart-abstracted	January 1, 2022–December 31, 2023

Provider Data Catalog FY 2025 Release

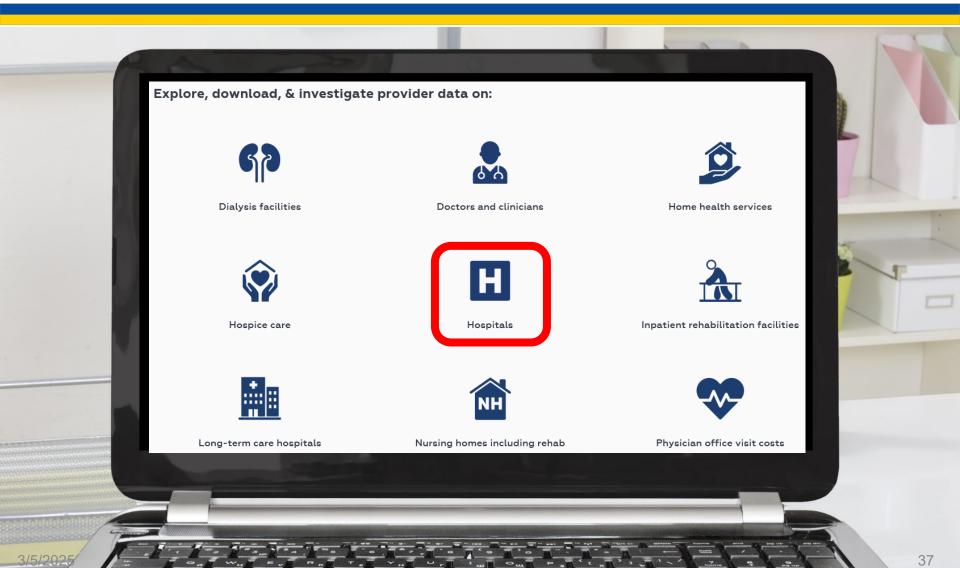
In February 2025, CMS updated the Provider Data Catalog on data.cms.gov to include the following FY 2025 HAC Reduction Program information:

- Measure results for CMS PSI 90 and HAI measures
- Measure scores for the CMS PSI 90 and HAI measures
- Total HAC Score
- Payment Reduction Indicator

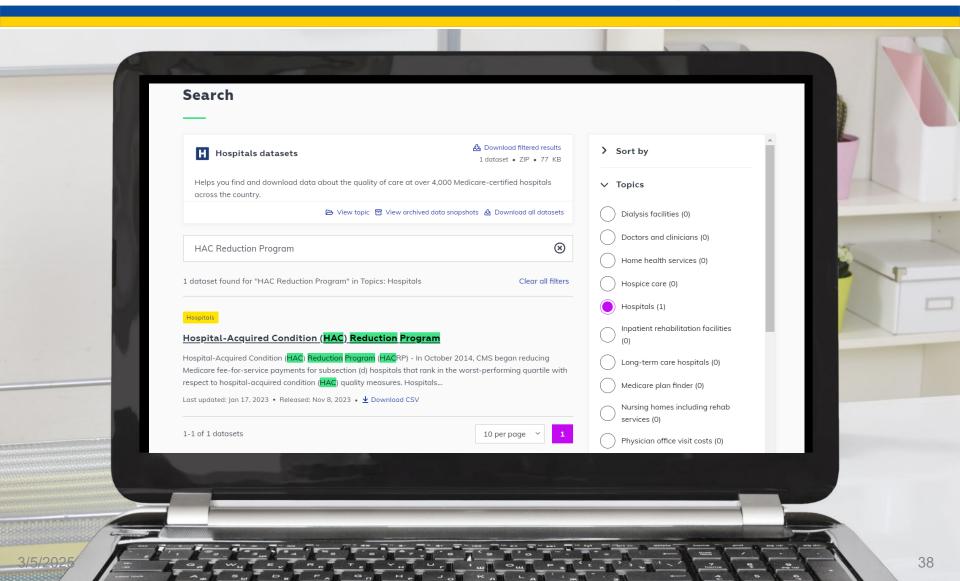
Provider Data Catalog Home and Search



Provider Data Catalog Topics



Keyword Search: HAC Reduction Program



HAC Reduction Program Resources

Provider Data Catalog

- Website: https://data.cms.gov/provider-data
 - HAC Reduction Program dataset
- Inquiries: QualityNet Question and Answer Tool Navigate to the Ask a Question tab and select Hospital Care Compare Site Support under the Program list.

HAC Reduction Program Methodology and General Information

- CMS.gov website: https://www.cms.gov/medicare/payment/prospective-payment/prospective-payment-payment/prospective-payment-payment/prospective-payment-payment/prospective-payment-paym
- QualityNet website: https://qualitynet.cms.gov/inpatient/hac

HAC Reduction Program General Inquiries

 QualityNet Question and Answer Tool - Navigate to the Ask a Question tab and select HACRP – Hospital-Acquired Condition Reduction Program under the Program list.

Rebecca Silverman, Program Manager Hospital Readmissions Reduction Program, DPS

Hospital Readmissions Reduction Program

3/5/2025

Program Overview

- Hospital Readmissions Reduction Program is a Medicare value-based purchasing program established under Section 1886(q) of the Social Security Act.
- Subsection (d) hospitals with excess readmissions, relative to other hospitals with a similar proportion of patients who are dually eligible for Medicare and full Medicaid benefits, have their payments reduced by up to 3 percent under the program.
- CMS provides hospitals 30 days to review and submit corrections prior to publicly reporting results.
- In FY 2025, 83 percent of eligible hospitals (n=2,828) are receiving payment reductions.

Program Changes for FY 2025

- The FY 2025 performance period is July 1, 2020, to June 30, 2023.
- CMS did not make any substantive changes to the program for FY 2025.

FY 2025 Measures and Performance Periods

Claims-Based	Consensus-	FY 2025
Readmission Measure	Based Entity ID	Performance Period
AMI	#0505	July 1, 2020–June 30, 2023
COPD	#1891	July 1, 2020–June 30, 2023
HF	#0330	July 1, 2020–June 30, 2023
Pneumonia	#0506	July 1, 2020–June 30, 2023
CABG	#2515	July 1, 2020–June 30, 2023
Elective Primary THA/TKA	#1551	July 1, 2020–June 30, 2023

Provider Data Catalog FY 2025 Release

In February 2025, for hospitals with at least 25 discharges, CMS updated the Provider Data Catalog on data.cms.gov to include the following information for each of the six readmission measures:

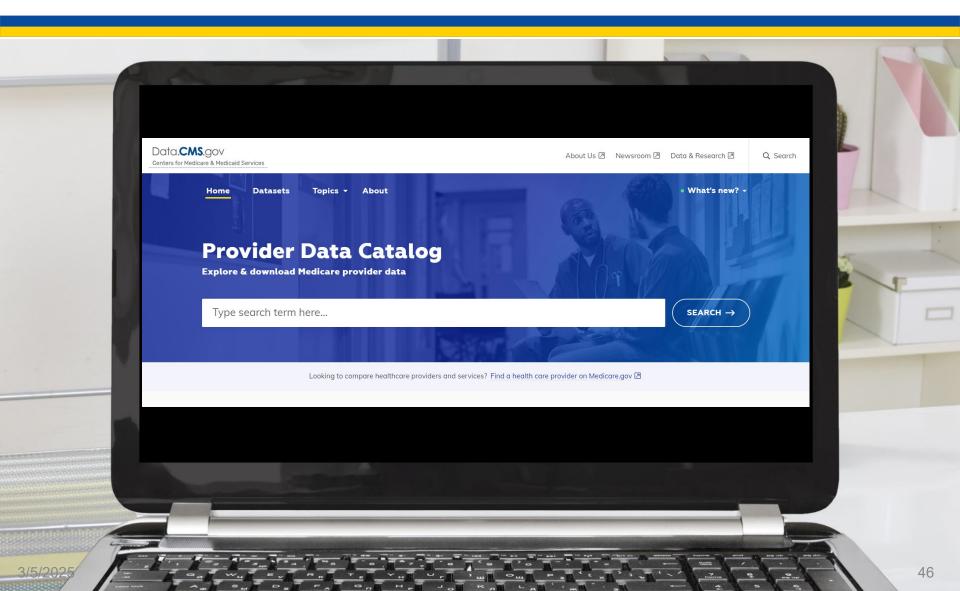
- Number of eligible discharges
- Number of readmissions (only if the hospital has 11 or more readmissions)
- Predicted readmission rate
- Expected readmission rate
- Excess readmission ratio (ERR)

Supplemental Data File

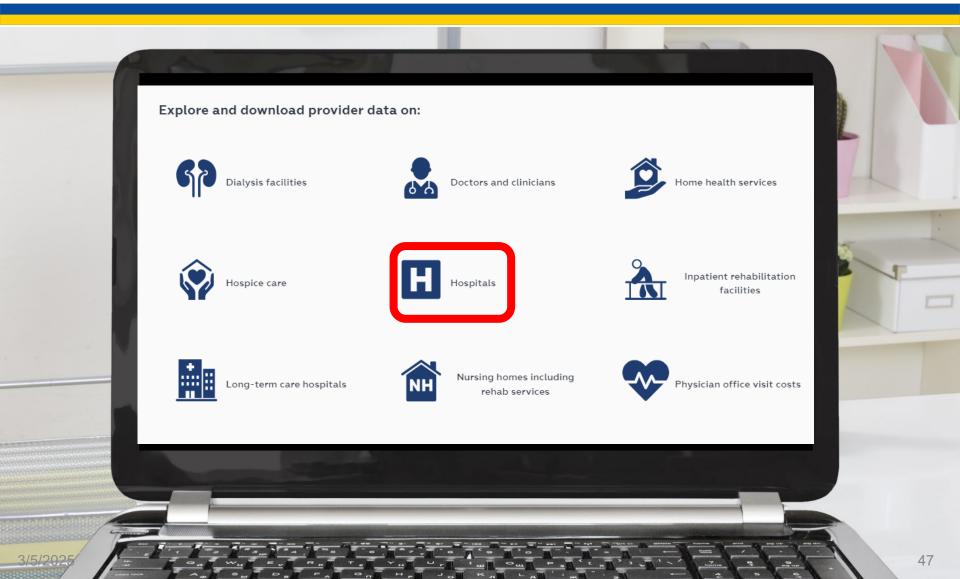
In addition to updating the Provider Data Catalog <u>on data.cms.gov</u>, CMS released the payment reduction percentage and component information in the FY 2025 IPPS/LTCH PPS Final Rule Hospital Readmissions Reduction Program Supplemental Data File at the end of the Review and Correction period. CMS posted this file on the <u>FY 2025 IPPS final rule home page</u>. The file includes the following:

- Payment reduction percentage
- Payment adjustment factor
- Dual proportion
- Peer group assignment
- Neutrality modifier
- ERR for each measure
- Number of eligible discharges for each measure
- Peer group median ERR for each measure
- Penalty indicator for each measure
- DRG payment ratio for each measure

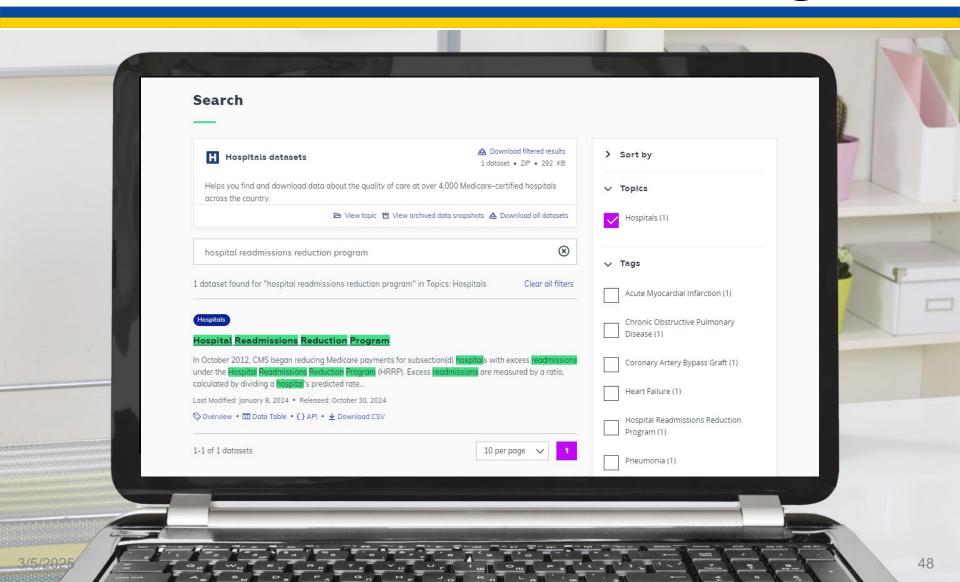
Provider Data Catalog Home and Search



Provider Data Catalog Topics



Keyword Search: Hospital Readmissions Reduction Program



Hospital Readmissions Reduction Program Resources

Provider Data Catalog

- Website: https://data.cms.gov/provider-data/
 - Hospital Readmissions Reduction Program Dataset
- Inquiries: <u>QualityNet Question and Answer Tool</u>: Navigate to the Ask a Question tab and select Hospital Care Compare Site Support under the Program list.

General Program and Payment Adjustment Information

- CMS.gov website: https://www.cms.gov/medicare/payment/prospective-payment-systems/acute-inpatient-pps/hospital-readmissions-reduction-program-hrrp
- QualityNet website: https://qualitynet.cms.gov/inpatient/hrrp

General Inquiries

QualityNet Question and Answer Tool: Navigate to the Ask a Question tab.
 Select HRRP – Hospital Readmissions Reduction Program under the Program list.

Measure Methodology Inquiries

 QualityNet Question and Answer Tool: Navigate to the Ask a Question tab.
 Select Inpatient Claims-Based Measures under the Program list. Select Readmission as the Topic. Hospital VBP Program, HAC Reduction Program, and Hospital Readmissions Reduction Program FY 2025 Provider Data Catalog Update

Questions

3/5/2025

Disclaimer

This presentation was current at the time of publication and/or upload onto the Quality Reporting Center and QualityNet websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to this presentation change following the date of posting, this presentation will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included in the presentation are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the presentation and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

3/5/2025