**Measures and current data collection periods on Hospital Compare**

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| **Measure identifier** | **Technical measure title** | **Measure as posted on Hospital Compare** | **Update frequency** | **Current data collection period** |
| **From** | **Through** |
| General information- Structural measures |
| **SM-PART-NURSE** | Participation in a systematic database for nursing sensitive care | Nursing Care Registry | Annually December | 1/1/2015 | 12/31/2015 |
| **ACS-REGISTRY** | Participation in a multispecialty surgical registry | Multispecialty Surgical Registry | Quarterly  | 10/1/2015 | 9/30/2016 |
| **SM-PART-GEN-SURG** | Participation in general surgery registry | General Surgery Registry | Annually December | 1/1/2015 | 12/31/2015 |
| **OP-12** | The Ability for Providers with HIT to Receive Laboratory Data Electronically Directly into their ONC-Certified EHR System as Discrete Searchable Data | Able to receive lab results electronically | Annually December | 1/1/2015 | 12/31/2015 |
| **OP-17** | Tracking Clinical Results between Visits | Able to track patients’ lab results, tests, and referrals electronically between visits | Annually December | 1/1/2015 | 12/31/2015 |
| **OP-25** | Safe surgery checklist use (outpatient) | Uses outpatient safe surgery checklist | Annually December | 1/1/2015 | 12/31/2015 |
| **SM-SS-CHECK** | Safe surgery checklist use (inpatient) | Uses inpatient safe surgery checklist  | Annually December | 1/1/2015 | 12/31/2015 |
| Survey of patient's experiences- Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) |
| **H-COMP-1-A-P** | Communication with nurses (composite measure) | Patients who reported that their nurses "Always" communicated well | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-1-U-P** | Communication with nurses (composite measure) | Patients who reported that their nurses "Usually" communicated well | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-1-SN-P** | Communication with nurses (composite measure) | Patients who reported that their nurses "Sometimes" or "Never" communicated well | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-2-A-P** | Communication with doctors (composite measure) | Patients who reported that their doctors "Always" communicated well | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-2-U-P** | Communication with doctors (composite measure) | Patients who reported that their doctors "Usually" communicated well | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-2-SN-P** | Communication with doctors (composite measure) | Patients who reported that their doctors "Sometimes" or "Never" communicated well | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-3-A-P** | Responsiveness of hospital staff (composite measure) | Patients who reported that they "Always" received help as soon as they wanted | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-3-U-P** | Responsiveness of hospital staff (composite measure) | Patients who reported that they "Usually" received help as soon as they wanted | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-3-SN-P** | Responsiveness of hospital staff (composite measure) | Patients who reported that they "Sometimes" or "Never" received help as soon as they wanted | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-4-A-P** | Pain management (composite measure) | Patients who reported that their pain was "Always" well controlled | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-4-U-P** | Pain management (composite measure) | Patients who reported that their pain was "Usually" well controlled | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-4-SN-P** | Pain management (composite measure) | Patients who reported that their pain was "Sometimes" or "Never" well controlled | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-5-A-P** | Communication about medicines (composite measure) | Patients who reported that staff "Always" explained about medicines before giving it to them | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-5-U-P** | Communication about medicines (composite measure) | Patients who reported that staff "Usually" explained about medicines before giving it to them | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-5-SN-P** | Communication about medicines (composite measure) | Patients who reported that staff "Sometimes" or "Never" explained about medicines before giving it to them | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-CLEAN-HSP-A-P** | Cleanliness of hospital environment (individual measure) | Patients who reported that their room and bathroom were "Always" clean | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-CLEAN-HSP-U-P** | Cleanliness of hospital environment (individual measure) | Patients who reported that their room and bathroom were "Usually" clean | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-CLEAN-HSP-SN-P** | Cleanliness of hospital environment (individual measure) | Patients who reported that their room and bathroom were "Sometimes" or "Never" clean | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-QUIET-HSP-A-P** | Quietness of hospital environment (individual measure) | Patients who reported that the area around their room was "Always" quiet at night | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-QUIET-HSP-U-P** | Quietness of hospital environment (individual measure) | Patients who reported that the area around their room was "Usually" quiet at night | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-QUIET-HSP-SN-P** | Quietness of hospital environment (individual measure) | Patients who reported that the area around their room was "Sometimes" or "Never" quiet at night | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-6-Y-P** | Discharge information (composite measure) | Patients who reported that YES, they were given information about what to do during their recovery at home | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-6-N-P** | Discharge information (composite measure) | Patients who reported that NO, they were not given information about what to do during their recovery at home | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-7-SA** | Care Transition (composite measure) | Patients who "Strongly Agree" they understood their care when they left the hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-7-A** | Care Transition (composite measure) | Patients who “Agree” they understood their care when they left the hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-COMP-7-D-SD** | Care Transition (composite measure) | Patients who “Disagree” or “Strongly Disagree” they understood their care when they left the hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-HSP-RATING-9-10** | Overall rating of hospital (global measure) | Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest) | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-HSP-RATING-7-8** | Overall rating of hospital (global measure) | Patients who gave their hospital a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest) | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-HSP-RATING-0-6** | Overall rating of hospital (global measure) | Patients who gave their hospital a rating of 6 or lower on a scale from 0 (lowest) to 10 (highest) | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-RECMND-DY** | Willingness to recommend the hospital (global measure) | Patients who reported YES, they would definitely recommend the hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-RECMND-PY** | Willingness to recommend the hospital (global measure) | Patients who reported YES, they would probably recommend the hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| **H-RECMND-DN** | Willingness to recommend the hospital (global measure) | Patients who reported NO, they would probably not or definitely not recommend the hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| Timely & effective care- Cataract surgery outcome |
| **OP-31** | Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery | Percentage of patients who had cataract surgery and had improvement in visual function within 90 days following the surgery  | Annually December | 1/1/2015 | 12/31/2015 |
| Timely & effective care- Colonoscopy follow-up |
| **OP-29** | Endoscopy/polyp surveillance: appropriate follow-up interval for normal colonoscopy in average risk patients | Percentage of patients receiving appropriate recommendation for follow-up screening colonoscopy | Annually December | 1/1/2015 | 12/31/2015 |
| **OP-30** | Endoscopy/polyp surveillance: colonoscopy interval for patients with a history of adenomatous polyps - avoidance of inappropriate use | Percentage of patients with history of polyps receiving follow-up colonoscopy in the appropriate timeframe | Annually December | 1/1/2015 | 12/31/2015 |
| Timely & effective care- Heart attack |
| **OP-3b** | Median time to transfer to another facility for acute coronary intervention | Average (median) number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-5** | Median time to ECG | Average (median) number of minutes before outpatients with chest pain or possible heart attack got an ECG | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-2** | Fibrinolytic therapy received within 30 minutes of emergency department arrival | Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-4** | Aspirin at arrival | Outpatients with chest pain or possible heart attack who received aspirin within 24 hours of arrival or before transferring from the emergency department | Quarterly  | 1/1/2016 | 12/31/2016 |
| Timely & effective care- Emergency department (ED) throughput |
| **EDV** | Emergency department volume | Emergency department volume | Annually December | 1/1/2015 | 12/31/2015 |
| **ED-1b** | Median time from emergency department arrival to emergency department departure for admitted emergency department patients | Average (median) time patients spent in the emergency department, before they were admitted to the hospital as an inpatient | Quarterly  | 1/1/2016 | 12/31/2016 |
| **ED-2b** | Admit decision time to emergency department departure time for admitted patient | Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-18b** | Median time from emergency department arrival to emergency department departure for discharged emergency department patients | Average (median) time patients spent in the emergency department before leaving from the visit | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-20** | Door to diagnostic evaluation by a qualified medical professional | Average (median) time patients spent in the emergency department before they were seen by a healthcare professional | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-21** | Median time to pain medication for long bone fractures | Average (median) time patients who came to the emergency department with broken bones had to wait before getting pain medication | Quarterly  | 1/1/2016 | 12/31/2016 |
| **OP-22** | Patient left without being seen | Percentage of patients who left the emergency department before being seen | Annually December | 1/1/2015 | 12/31/2015 |
| **OP-23** | Head CT scan results for acute ischemic stroke or hemorrhagic stroke who received head CT scan interpretation within 45 minutes of arrival | Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival | Quarterly  | 1/1/2016 | 12/31/2016 |
| Timely & effective care- Preventive care |
| **IMM-2** | Immunization for influenza | Patients assessed and given influenza vaccination | Annually December | 10/1/2015 | 3/31/2016 |
| **IMM-3-OP-27-FAC-ADHPCT** | Influenza Vaccination Coverage among Healthcare Personnel | Healthcare workers given influenza vaccination | Annually October | 10/1/2016 | 3/31/2017 |
| Timely & effective care- Stroke care |
| **STK-4** | Thrombolytic Therapy | Ischemic stroke patients who got medicine to break up a blood clot within 3 hours after symptoms started  | Quarterly  | 1/1/2016 | 12/31/2016 |
| Timely & effective care- Blood clot prevention & treatment |
| **VTE-6** | Hospital acquired potentially preventable venous thromboembolism | Patients who developed a blood clot while in the hospital who *did not* get treatment that could have prevented it  | Quarterly  | 1/1/2016 | 12/31/2016 |
| **VTE-5** | Warfarin therapy discharge instructions | Patients with blood clots who were discharged on a blood thinner medicine and received written instructions about that medicine  | Quarterly  | 1/1/2016 | 12/31/2016 |
| Timely & effective care- Pregnancy & delivery care |
| **PC-01** | Elective delivery | Percent of mothers whose deliveries were scheduled too early (1-2 weeks early), when a scheduled delivery was not medically necessary | Quarterly  | 1/1/2016 | 12/31/2016 |
| Complications & deaths- Surgical complications |
| **COMP-HIP-KNEE** | Hospital level risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and total knee arthroplasty (TKA) | Rate of complications for hip/knee replacement patients | Annually July | 4/1/2013 | 3/31/2016 |
| **PSI-90-SAFETY** | Complication/patient safety for selected indicators (composite) | Serious complications | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-3-ULCER\*** | [Pressure ulcer rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Pressure sores | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-4-SURG-COMP\*** | Death rate among surgical inpatients with serious treatable complications | Deaths among patients with serious treatable complications after surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-6-IAT-PTX\*** | [Iatrogenic pneumothorax rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Collapsed lung due to medical treatment | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-8-POST-HIP\*** | [Postoperative hip fracture rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Broken hip from a fall after surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-9-POST-HEM\*** | [Perioperative hemorrhage or hematoma rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Bleeding or bruising during surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-10-POST-KIDNEY\*** | [Postoperative acute kidney injury requiring dialysis rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Kidney and diabetic complications after surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-11-POST-RESP\*** | [Postoperative respiratory failure rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Respiratory failure after surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-12-POSTOP-PULMEMB-DVT\*** | [Perioperative pulmonary embolism or deep vein thrombosis rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Serious blood clots after surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-13-POST-SEPSIS\*** | [Postoperative sepsis rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | Blood stream infection after surgery | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-14-POSTOP-DEHIS\*** | [Postoperative wound dehiscence rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov)](https://data.medicare.gov/) | A wound that splits open after surgery on the abdomen or pelvis | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| **PSI-15-ACC-LAC\*** | Accidental puncture or laceration rate (Data will not be posted on Hospital Compare but will be available on Data.Medicare.Gov) | Accidental cuts and tears from medical treatment | Annually July\*\* | 7/1/2014 | 9/30/2015 |
| Complications & deaths- Healthcare-associated infections (HAI) |
| **HAI-1** | Central line-associated bloodstream infections (CLABSI) in ICUs and select wards | Central line-associated bloodstream infections (CLABSI) in ICUs and select wards | Quarterly  | 1/1/2016 | 12/31/2016 |
| **HAI-2** | Catheter-associated urinary tract infections (CAUTI) in ICUs and select wards | Catheter-associated urinary tract infections (CAUTI) in ICUs and select wards | Quarterly  | 1/1/2016 | 12/31/2016 |
| **HAI-3** | Surgical site infections from colon surgery (SSI: Colon) | Surgical site infections from colon surgery (SSI: Colon) | Quarterly  | 1/1/2016 | 12/31/2016 |
| **HAI-4** | Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy) | Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy) | Quarterly  | 1/1/2016 | 12/31/2016 |
| **HAI-5** | Methicillin-resistant *Staphylococcus Aureus* (or MRSA) blood infections | Methicillin-resistant *Staphylococcus Aureus* (MRSA) Blood Laboratory-identified Events (Bloodstream infections) | Quarterly  | 1/1/2016 | 12/31/2016 |
| **HAI-6** | *Clostridium difficile* (C.diff.) infections | *Clostridium difficile* (C.diff.) Laboratory-identified Events (Intestinal infections) | Quarterly  | 1/1/2016 | 12/31/2016 |
| Complications & deaths- 30-day death rates |
| **MORT-30-COPD\*** | COPD 30-day mortality rate | Death rate for COPD patients | Annually July | 7/1/2013 | 6/30/2016 |
| **MORT-30-AMI\*** | Acute myocardial infarction (AMI) 30-day mortality rate | Death rate for heart attack patients | Annually July | 7/1/2013 | 6/30/2016 |
| **MORT-30-HF\*** | Heart failure (HF) 30-day mortality rate | Death rate for heart failure patients | Annually July | 7/1/2013 | 6/30/2016 |
| **MORT-30-PN\*** | Pneumonia (PN) 30-day mortality rate | Death rate for pneumonia patients | Annually July | 7/1/2013 | 6/30/2016 |
| **MORT-30-STK** | Stroke 30-day mortality rate | Death rate for stroke patients | Annually July | 7/1/2013 | 6/30/2016 |
| **MORT-30-CABG** | Coronary artery bypass graft (CABG) surgery 30-day mortality rate | Death rate for CABG surgery patients | Annually July | 7/1/2013 | 6/30/2016 |
| Hospital returns- 30-day unplanned readmissions & hospital return days |
| **MSPB-1** | Medicare hospital spending per patient | Medicare Spending per Beneficiary | Annually December | 1/1/2015 | 12/31/2015 |
| **EDAC-30-AMI** | AMI excess days in acute care (EDAC) | Hospital return days for heart attack patients | Annually July | 7/1/2013 | 6/30/2016 |
| **EDAC-30-HF** | HF excess days in acute care (EDAC) | Hospital return days for heart failure patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-COPD\*** | Chronic obstructive pulmonary disease (COPD) 30-day readmission rate | Rate of readmission for chronic obstructive pulmonary disease (COPD) patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-AMI\*** | Acute myocardial infarction (AMI) 30-day readmission rate | Rate of readmission for heart attack patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-HF\*** | Heart failure (HF) 30-day readmission rate | Rate of readmission for heart failure patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-PN\*** | Pneumonia (PN) 30-day readmission rate | Rate of readmission for pneumonia patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-STK** | Stroke 30-day readmission rate | Rate of readmission for stroke patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-CABG** | Coronary artery bypass graft (CABG) surgery 30-day readmission rate | Rate of readmission for coronary artery bypass graft (CABG) surgery patients | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-HIP-KNEE** | 30-day readmission rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) | Rate of readmission after hip/knee replacement | Annually July | 7/1/2013 | 6/30/2016 |
| **READM-30-HOSP-WIDE** | 30-day hospital-wide all- cause unplanned readmission (HWR) | Rate of readmission after discharge from hospital (hospital-wide) | Annually July | 7/1/2015 | 6/30/2016 |
| Use of medical imaging- Outpatient imaging efficiency |
| **OP-8** | MRI Lumbar Spine for Low Back Pain | Outpatients with low-back pain who had an MRI without trying recommended treatments (such as physical therapy) first (if a number is high, it may mean the facility is doing too many unnecessary MRIs for low-back pain). (if a number is high, it may mean the facility is doing too many unnecessary MRIs for low-back pain) | Annually July | 7/1/2015 | 6/30/2016 |
| **OP-9** | Mammography Follow-Up Rates | [Outpatients who had a follow-up mammogram, breast ultrasound, or breast MRI within the 45 days after a screening mammogram](https://www.medicare.gov/hospitalcompare/Resources/Glossary.html#0017) (a follow-up rate near 0% may indicate missed cancer; a rate higher than 14% may mean there is unnecessary follow-up) | Annually July | 7/1/2015 | 6/30/2016 |
| **OP-10** | Abdomen CT - Use of Contrast Material | Outpatient CT scans of the abdomen that were “combination” (double) scans (if a number is high, it may mean that too many patients have a double scan when a single scan is all they need) | Annually July | 7/1/2015 | 6/30/2016 |
| **OP-11** | Thorax CT - Use of Contrast Material | Outpatient CT scans of the chest that were “combination” (double) scans(if a number is high, it may mean that too many patients have a double scan when a single scan is all they need) | Annually July | 7/1/2015 | 6/30/2016 |
| **OP-13** | Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac Low-Risk Surgery | Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery (if a number is high, it may mean that too many cardiac scans were done prior to low-risk surgeries) | Annually July | 7/1/2015 | 6/30/2016 |
| **OP-14** | Simultaneous Use of Brain Computed Tomography (CT) and Sinus CT | Outpatients with brain CT scans who got a sinus CT scan at the same time (if a number is high, it may mean that too many patients have both a brain and sinus scan, when a single scan is all they need) | Annually July | 7/1/2015 | 6/30/2016 |
| Payment & value of care |
| **PAYM-30-AMI** | Heart attack payment | Payment for heart attack patients | Annually July | 7/1/2013 | 6/30/2016 |
| **PAYM-30-HF** | Heart failure payment | Payment for heart failure patients | Annually July | 7/1/2013 | 6/30/2016 |
| **PAYM-30-PN** | Pneumonia payment | Payment for pneumonia patients | Annually July | 7/1/2013 | 6/30/2016 |
| **PAYM-90-HIP-KNEE** | Hip/knee replacement payment | Payment for hip/knee replacement patients | Annually July | 4/1/2013 | 3/31/2016 |