



## Hospital Quality Measure Reporting Changes

CMS proposes to add 43 new quality measures to the current 30 measures hospitals must report in order to receive their full annual update to Medicare inpatient payment rates. The additional measures include: Surgical Care Improvement Project (SCIP), hospital readmissions, nursing care, patient safety and inpatient quality indicators by AHRQ, venous thromboembolism, stroke, and cardiac surgery measures.

Hospital Acquired Conditions Expansion and Present on Admission (POA) Indicators Effective October 1, 2008, Medicare will no longer pay hospitals at a higher rate when certain conditions develop during the hospital stay. The original list of 8 conditions remains the same as stated in the final rule for FY2008, with a revision to the pressure ulcer description. Only Stage III and Stage IV pressure ulcers will be subject to reduced payments if not present on admission.

FY2009 proposed additions to conditions not paid if they are hospital acquired are:

- ▶ Surgical site infections following certain elective procedures
- ▶ Legionnaires' disease
- ▶ Extreme blood sugar derangement
- ▶ Iatrogenic pneumothorax
- ▶ Delirium
- ▶ Ventilator-associated pneumonia
- ▶ Deep vein thrombosis/pulmonary embolism
- ▶ *Staphylococcus aureus* septicemia
- ▶ *Clostridium difficile* associated disease

Present on admission indicator U (unknown) will indicate that any of the above-listed conditions will not be paid at a higher rate, as well as POA indicator N (not present on admission).