ASTHO Comments on “Medicare Program; Hospital Inpatient Value-Based Purchasing Program”
Proposed Rule: CMS–3239–P

March 8, 2011

The Centers for Medicare & Medicaid Services in the Department of Health and Human Services seeks public comment on the “Medicare Program; Hospital Inpatient Value-Based Purchasing Program” Proposed Rule. Below, the Association of State and Territorial Health Officials (ASTHO) offers comments for consideration.

ASTHO is the national nonprofit organization representing the public health agencies of the United States, the U.S. Territories, and the District of Columbia, as well as the 120,000 public health professionals these agencies employ. ASTHO members, the chief health officials of these jurisdictions, are dedicated to formulating and influencing sound public health policy and to assuring excellence in state-based public health practice. Our vision is healthy people thriving in a nation free of preventable illness and injury.

Addressing healthcare-associated infections (HAI) is a primary area to reduce the incidence of preventable illness and death in the United States, and is therefore a key area of focus for ASTHO. ASTHO encourages a central role for state and territorial public health agencies in HAI prevention, given their authority, responsibility, and experience in implementing communicable disease control measures and establishing prevention education programs for healthcare providers. ASTHO recognizes the importance of robust and accurate data and applauds CMS for including the Hospital In-Patient Quality Reporting (IQR) validation process as part of the Hospital Value-Based Purchasing (VBP) program.

Healthcare-Associated Infection Measures (HAI)
• ASTHO supports value-based incentive payments for achievement and improvement on quality measures, including HAI process (e.g., infection control practices) and outcome (e.g., HAI rates) measures. Payment policies can catalyze development of systems of care that are prevention oriented. ASTHO supports using financial incentives to help promote a culture of safety and proactive HAI prevention approaches.
• The proposed methodology for calculating value-based incentive payments, including the linear exchange function, is sound because it provides equal incentive for high performers and low performers to improve the quality and safety of their care. Though it is too early to assess the true impact of payment policies on reduction of HAI incidence, policies that incentivize both high and low performers are preferable as they promote patient safety in a broader range of hospitals.
• ASTHO urges CMS to adopt widely endorsed process and outcome measures related to HAI (e.g., measures reported via CDC’s National Healthcare Safety Network [NHSN]) as quickly as statute allows. We support CMS in their intent to add new measures from the Hospital IQR program, with public comment but without additional rulemaking, as soon as they meet the requirement to be posted on Hospital Compare for one year.
• ASTHO recommends that additional HAI process measures be considered for future inclusion in the Hospital IQR program and Hospital VBP program. Process measures are important for promoting HAI prevention and measuring progress. In state policy, there are many examples of process measures focused on patient safety and quality, such as hand hygiene requirements, central line insertion practices, and nurse staffing hours per patient day.

• ASTHO also recommends that additional HAI outcome measures be considered for future inclusion in the Hospital IQR program and Hospital VBP program as these measures are developed and validated. Outcome measures can especially be useful to assess progress in reducing infections. ASTHO recommends using the definitions, methodologies, and standards of NHSN to report HAI outcome measures.

Vaccine Measures
• Since immunizations are one of the most effective public health interventions for reducing the burden of infectious disease, ASTHO strongly supports the inclusion of the pneumococcal and influenza vaccinations in the Hospital VBP measures. Our country currently lacks an adequate infrastructure for ensuring that adults receive the vaccines they need to protect themselves from infectious disease; incentivizing greater hospital involvement in providing vaccines via the Hospital VBP program provides one avenue to address this challenge.