2016 Children's Hospital Survey on Accountability Programs and Quality Measures

Survey and Reference Documents
2016 Children's Hospital Survey on Accountability Programs and Quality Measures (PDF format)
Terms and Definitions
Measure List
Excel Measure Upload Template

Questions?
Call in to the open conference line to ask your questions and to hear your colleagues’ questions and answers.

The conference hours are scheduled for the following Thursdays from 12:00–1:00 ET: August 4, 11, 18, 25 & September 1.

Call-in number: 1-855-244-8681
Access Code: 222 223 69

For questions related to the survey, please email the survey team (Sally Turbyville, Alex Rothenburger, Kahari McCall and Ruth Riggs).
Introduction

For children’s hospitals within a hospital system

As a children’s hospital within a larger system, your experience with the programs and measures is important to our understanding the landscape of children’s hospitals’ accountability programs and their use of measures. Please answer the questions from the perspective of child health care quality and outcomes. We are also interested in any programs that while not pediatric-centered require your children’s hospital’s participation within the larger system.

This survey will collect information about your hospital’s current or near-term participation in various accountability programs and the use of quality measures.

Accurate, useful measures of health care quality (measures of safety, effectiveness, patient-centeredness, timeliness, efficiency, and equity[1]) are increasingly important, particularly as pediatric health care systems and providers respond to increased demand from parents and caregivers for more transparency, and as payers move towards value-based purchasing (VBP) models. And yet there remains a lack of standardized evidence-based pediatric quality measures available for broad use.

We recognize many of you routinely use measures to assess quality of care and outcomes and to drive improvement. We want to hear from you about the use of measures at your hospital, including any promising measures that warrant consideration for broader use.

CHA will use the collected program and measure information to:

- Establish the first national and searchable list of accountability programs and measures used by children’s hospitals
- Advocate better for children’s hospitals and the need for meaningful measures
- Identify promising measures and consider mechanisms to position them for broader use (e.g., endorsement by the National Quality Forum)
- Report on trends (current and future) in the participation in various accountability programs and use of measures among children’s hospitals
- Define or identify quality policy and measurement priorities and gaps

This is critical work and we appreciate your help in collecting your information. Respondents will get an early preview of our summary of findings. We will share aggregate data and will keep any specific hospital responses and identifying information confidential. You will be able to print your complete survey response once submitted; we hope this will be immediately beneficial to you in providing a snapshot view of your hospitals accountability programs and measures.

Instructions

This survey likely requires collaboration across different areas at your hospital to complete. In order to increase the validity and consistency of responses, we request that each hospital submit only one completed survey; it may be beneficial to identify one person as the point of contact for the survey. During field testing of this survey, we were told that the following hospital areas may have necessary information to complete the survey: quality and safety, population health, revenue and cycle or network contracting, offices of the Chief Financial Officer, Chief Information Officer, and Chief Quality Officer.

The survey can take as little as an hour to complete. It is likely that it will take longer if a hospital participates in several programs or if several individuals are asked to contribute to parts of the survey.

This survey will focus on the targeted accountability programs and gather information about the quality measures they use to assess performance. The targeted programs include:

- Public Reporting
- Value-based Purchasing
- Accreditation
- Certification, Designation, or Award/Recognition
- Network Decisions—Inclusion/Exclusion/Differentiation

We are interested in understanding which accountability programs and quality measures are the most prominent among children’s hospitals—now and in the near future. For those programs where CHA can obtain the list of measures elsewhere (e.g., a state public report website), we only ask for the name and/or link to the program. To reduce the burden associated with the completion of this survey, we provide several options on how to share that information with us.

Please use the glossary of terms for full definitions and examples as needed.

Contact Information for Respondent

First Name
Last Name
Title
Email
Phone
Public Reporting

Public Reporting programs are programs where data are made publicly available to all, or to a broad audience free of charge or at a nominal cost, about a health care structure, process, or outcome.

1. Current Participation:
   In which of the following public reporting programs does your hospital currently participate? (select all that apply)
   - U.S. News Best Children’s Hospitals rankings
   - Leapfrog Group’s Top Children’s Hospitals
   - Clinical Registry (with public reports)
   - CMS reporting programs (Medicare Hospital Compare, Physician Quality Reporting System)
   - CMS-Meaningful Use
   - State Association public reports (e.g., your state’s hospital association)
   - Business or Employer Coalitions public reports (e.g., Midwest Business Group on Health)
   - State agency, or state/regional collaborative, or All Payers Claim Databases (e.g., New York State Department of Health, Oregon Health Care Quality Corporation, Wisconsin Health Information Organization)
   - Hospital’s own public report (e.g., hospital reports selected measures on their own website)
   - Other - including other proprietary report cards (e.g., Health Grades) (list) ____________________
   - None
   - Don’t know

2. Future Participation:
   In which of the following public reporting program(s) does your hospital intend to start participating in the near-term (1 to 4 years)? (select all that apply)
   Unselected choices from question 1 will carry forward as choices for question 2.
   - U.S. News Best Children’s Hospitals rankings
   - Leapfrog Group’s Top Children’s Hospitals
   - Clinical Registry (with public reports)
   - CMS reporting programs (Medicare Hospital Compare, Physician Quality Reporting System)
   - CMS-Meaningful Use
   - State Association public reports (e.g., your state’s hospital association)
   - Business or Employer Coalitions public reports (e.g., Midwest Business Group on Health)
   - State agency, or state/regional collaborative, or All Payers Claim Databases (e.g., New York State Department of Health, Oregon Health Care Quality Corporation, Wisconsin Health Information Organization)
   - Hospital’s own public report (e.g., hospital reports selected measures on their own website)
   - Other - including other proprietary report cards (e.g., Health Grades) (list) ____________________
   - None
   - Don’t know
3. To help us better understand the context in which your hospital participates, we are interested in whether your hospital is required to participate by some external agency or organization.

Is your hospital’s participation in the program mandated or required by an external party (e.g., state or payer) or is it voluntary?

<table>
<thead>
<tr>
<th>Public reporting programs you selected in question 1 will carry forward and you will respond for each program.</th>
<th>Mandatory</th>
<th>Voluntary</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. News Best Children’s Hospitals rankings</td>
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<tr>
<td>Leapfrog Group's Top Children's Hospitals</td>
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<td>CMS-Meaningful Use</td>
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<td>Hospital’s own public report (e.g., hospital reports selected measures on their own website)</td>
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<tr>
<td>Other - including other proprietary report cards (e.g., Health Grades) (list)</td>
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</table>
4. Because we can obtain the list of measures from the public report program, we do not need you to provide us information about the individual measures. We do, however, require the name or link to the following public report programs you currently participate:

The programs listed below will appear if you selected them in question 1 above. (US News, Leapfrog, CMS reporting programs and CMS-Meaningful use are excluded because those are readily known to CHA.)

<table>
<thead>
<tr>
<th>Name or Link</th>
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<tbody>
<tr>
<td>Clinical Registry (with public reports)</td>
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<tr>
<td>State Association public reports (e.g., your state’s hospital association)</td>
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<tr>
<td>Hospital’s own public report (e.g., hospital reports selected measures on their own website)</td>
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<tr>
<td>Other</td>
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</table>

5. Benchmarking is often used to support peer-to-peer learning. CHA would like to know which benchmarking tools children’s hospitals are using so that we may better target our efforts with respect to informing or improving these tools.

Does your hospital purchase the USN&WR benchmarking tool, Hospital Data Insights?
- Yes
- No
- Don't know

6. Does your hospital purchase any other benchmarking tool?
- Yes
- No
- Don't know

7. Please list the benchmarking tool(s) your hospital purchases.
   Answer if you selected “Yes” to question 6.
Value-based Purchasing (VBP) Programs

Value-based Purchasing (VBP) programs link payment amounts to performance; payers are exceedingly requiring some kind of value criteria in their contracts with providers. These programs include a broad set of performance-based delivery and payment strategies where payers (public, private) link financial incentives to performance. Public (Medicaid, Medicare) and private payers (health plans, employers) are using VBP strategies in an effort to increase the value of health care.

For these programs, because they are so varied and often led by payers or employers, of which there are many, we need you to tell us which measures you are being asked to use for participation in 'said' program.

8. Current Participation:
In which of the following value-based purchasing programs does your hospital currently participate? (select all that apply)

- Pay-for performance program
- Accountable Care Organizations (ACOs) at risk for cost and quality
- Patient Centered Medical Homes (PCMHs) at risk for cost and quality
- Bundled payment
- CMS Value-based programs (VBP)
- Other (list) ____________________
- None
- Don't know

9. Do any of the VBP programs focus on a particular population, condition (e.g., asthma), or service (e.g., appendectomies, pharmacy)? If so, please list:
Answer if you selected any programs in question 8.

10. Future Participation:
In which of the following value-based purchasing programs does your hospital intend to start participating in the near-term (1 to 4 years)? (select all that apply)

Unselected choices from question 8 will carry forward as choices for question 10

- Pay-for performance program
- Accountable Care Organizations (ACOs) at risk for cost and quality
- Patient Centered Medical Homes (PCMHs) at risk for cost and quality
- Bundled payment
- CMS Value-based programs (VBP)
- Other (list) ____________________
- None
- Don't know
Value-based Purchasing (VBP) Programs (continued)

11. We need some additional information about the value-based purchasing program(s) in which your hospital participates—specifically, about the measures used in the program(s).

Answer if you selected any programs in question 8.

There are three ways to submit information about the measures.

1) Complete the measure list within the survey,
2) Complete the Excel template and upload the completed file, or
3) Upload another file you already have containing the list of measures.

☑ I will complete the measure list within this survey
☑ I will upload the completed Excel template or another file

12. Upload the completed Excel template or a file containing measures used in the value based purchasing program(s) in which your hospital participates.

Upload tool appears if you answered “I will upload…” to question 11.

- Only one file can be uploaded.
  - While it appears you can upload more than one file, only one file is saved in the upload process.
  - You may upload more than one file if the files are compressed into a single ZIP file before uploading.
- File needs to be smaller than 16MB.
- Any file type is acceptable with the exception of executable files (such as those ending in .exe).

13. Which measures or measure topics do(es) the value based purchasing program(s) in which your hospital participates use? If the program(s) use(s) the same measure or measure topic listed, select “same” from the drop-down list. If the program(s) use(s) a modified version of the measure, select “modified.”

Measure table appears if you select “I will complete the measure list within this survey” in question 11.

Refer to Measure List PDF or Excel Upload template to see list of measures from which you will select.

14. Other Measures

If any of the value-based purchasing programs in which your hospital participates use measures not listed in the tables above, please provide the measure name(s) or description(s) below and/or upload a file containing the measure information using the file upload tool below.

1. (Provide measure name or description)
2. (Provide measure name or description)
3. (Provide measure name or description)
4. (Provide measure name or description)
5. (Provide measure name or description)

If more “other” measures are used in the value based purchasing program(s) in which your hospital participates, upload a file containing the measures.
• Only one file can be uploaded.
  o While it appears you can upload more than one file, only one file is saved in the upload process.
  o You may upload more than one file if the files are compressed into a single ZIP file before uploading.
• File needs to be smaller than 16MB.
• Any file type is acceptable with the exception of executable files (such as those ending in .exe).

15. To help us better understand the context in which your hospital participates, we are interested in whether your hospital is required to participate by some external agency or organization.

Is your hospital’s participation in the program mandated or required by an external party (e.g., state or payer) or is it voluntary?

<table>
<thead>
<tr>
<th></th>
<th>Mandatory</th>
<th>Voluntary</th>
<th>Don’t know</th>
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<tbody>
<tr>
<td>Value-based purchasing programs you <strong>selected in</strong> question 8 will carry forward and you will respond for each program.</td>
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<tr>
<td>Pay-for performance program</td>
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<tr>
<td>Accountable Care Organizations (ACOs) at risk for cost and quality</td>
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<tr>
<td>Bundled payment</td>
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<tr>
<td>CMS Value-based programs (VBP)</td>
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<tr>
<td>Other (list)</td>
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Accreditation Programs

Accreditation programs evaluate a health care organization’s systems, processes, and performance to ensure it is meeting predetermined criteria, including health and safety standards, and are conducted by an impartial external organization.

Because we can obtain the list of measures from the accrediting organizations, we do not need you to provide us information about the individual measures. We do, however, need to know in which accreditation program your hospital participates.

16. Current Participation:
   In which of the following accreditation programs does your hospital currently participate? (select ONE)

   - The Joint Commission (TJC)
   - Det Norske Veritas Healthcare-GL (DNV)
   - The Healthcare Facilities Accreditation Program (HFAP)
   - Center for Improvement in Healthcare Quality (CIHQ)
   - Accreditation Association for Hospitals/Health Systems Inc (AAHHS)
   - Other ____________________
   - None
   - Don't know

17. Future Participation:
   Does your hospital intend to start participating in any accreditation program in the near-term (1 to 4 years)?
   Answer if you selected “None” or “Don’t know” to question 16

   - The Joint Commission (TJC)
   - Det Norske Veritas Healthcare-GL (DNV)
   - The Healthcare Facilities Accreditation Program (HFAP)
   - Center for Improvement in Healthcare Quality (CIHQ)
   - Accreditation Association for Hospitals/Health Systems Inc (AAHHS)
   - Other ____________________
   - None
   - Don't know

18. Does your hospital use the CMS-deemed survey for your hospital accreditation?
   Answer if you did NOT select “None” or “Don’t know” to question 16

   - Yes
   - No
   - Don't know

19. What other accreditation programs, if any, does your hospital participate in? (For example, ACO accreditation by NCQA.)
Certification, Designation, or Award/Recognition

Certification, Designation, or Award/Recognition programs are earned by programs or services based within or associated with your hospital.

Because we can obtain the list of measures from the owner of these programs, we do not need you to provide us information about the individual measures. We do, however, need to know in which programs your hospital participates.

20. Current Participation:
Which of the following certification, designation, or award/recognition programs does your hospital currently have or participate in? (select all that apply)

TJC
- Disease-Specific Care (DSC) Certification Programs: DSC Pediatric Certification
- Disease-Specific Care (DSC) Certification Programs: DSC Neonatal/Perinatal Certification
- Palliative Care Programs
- Health Staffing Services
- Integrated Care
- Perinatal Care
- Primary Care Medical Home
- Patient Blood Management

NCQA
- Physician and Hospital Quality (PHQ)
- Patient-Centered Medical Home Recognition (PCMH)
- Patient-Centered Specialty Practice Recognition (PCSP)

Awards
- American Association of Critical-Care Nurses (AACN) Beacon Award for Excellence
- The American Nurses Credentialing Center (ANCC) Magnet Prize®

Other
- Other (List) __________________________

☐ None
☐ Don't know
21. Future Participation:
Which of the following certification, designation, or award/recognition program(s) does your hospital intend
to pursue in the near-term (1 to 4 years)? (select all that apply)

Unselected choices from question 20 will carry forward as choices for question 21

TJC
- Disease-Specific Care (DSC) Certification Programs: DSC Pediatric Certification
- Disease-Specific Care (DSC) Certification Programs: DSC Neonatal/Perinatal Certification
- Palliative Care Programs
- Health Staffing Services
- Integrated Care
- Perinatal Care
- Primary Care Medical Home
- Patient Blood Management

NCQA
- Physician and Hospital Quality (PHQ)
- Patient-Centered Medical Home Recognition (PCMH)
- Patient-Centered Specialty Practice Recognition (PCSP)

Awards
- American Association of Critical-Care Nurses (AACN) Beacon Award for Excellence
- The American Nurses Credentialing Center (ANCC) Magnet Prize®

Other
- Other (List) ____________________

- None
- Don't know

22. To help us better understand the context in which your hospital participates, we are interested in whether
your hospital is required to participate by some external agency or organization.

Is your hospital’s participation in the program mandated or required by an external party (e.g., state or
payer) or is it voluntary?

<table>
<thead>
<tr>
<th>Programs you selected in question 20 will carry forward and you will respond for each program.</th>
<th>Mandatory</th>
<th>Voluntary</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disease-Specific Care (DSC) Certification Programs: DSC Pediatric Certification (TJC)</td>
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<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Disease-Specific Care (DSC) Certification Programs: DSC Neonatal/Perinatal Certification (TJC)</td>
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<tr>
<td>Palliative Care Programs (TJC)</td>
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<td>☐</td>
</tr>
<tr>
<td>Health Staffing Services (TJC)</td>
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<tr>
<td>Integrated Care (TJC)</td>
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<tr>
<td>Perinatal Care (TJC)</td>
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<tr>
<td>Award Category</td>
<td>Recognition</td>
<td>Acceptance</td>
<td>Other</td>
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<tr>
<td>Primary Care Medical Home (TJC)</td>
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<tr>
<td>American Association of Critical-Care Nurses (AACN) Beacon Award for Excellence</td>
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<tr>
<td>The American Nurses Credentialing Center (ANCC) Magnet Prize®</td>
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<tr>
<td>Other (List)</td>
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</table>
Centers of Excellence

Centers of Excellence (COE) recognized by insurers or employers are branded “centers” typically focusing on the treatment of a specific disease or procedures (e.g., transplant). For these programs, because they are so varied and often led by payers or employers, of which there are many, we need you to tell us which measures you are being asked to use for participation in ‘said’ program.

23. Current Participation:
In which of the following Center of Excellence program(s) is your hospital recognized? (select all that apply)

- **Aetna**
  - Institutes of ExcellenceTM Pediatric Congenital Heart Surgery Facilities
  - Institutes of ExcellenceTM Transplant Facilities

- **Optum (UnitedHealth Group)**
  - Transplantation
  - Cancer
  - Chronic Kidney Disease
  - Bariatric
  - Orthopedics
  - Neonatology

- **Anthem (BlueCross BlueShield)**
  - Transplants

- **Other**
  - Employer or employer group (if selected, please provide details below)
  - Regional/local Insurer or Payer (if selected, please provide details below)
  - Other ____________________
  - None
  - Don't know

24. **Employer or employer group**
*Answer if you selected “Employer or employer group” in question 23.*
Employer or employer group name
Name or Focus of Employer COE

25. **Regional/local Insurer or Payer**
*Answer if you selected “Regional/local Insurer or Payer” in question 23.*
Regional/local Insurer or Payer name
Name or Focus of regional/local payer COE
Centers of Excellence (continued)

26. Future Participation:
In which of the following Center of Excellence program(s) is your hospital currently **pursuing** recognition or planning to pursue recognition in the near-term (1 to 4 years)? (select all that apply)

**Unselected choices from question 23 will carry forward as choices for question 26**

- Aetna
  - Institutes of Excellence™ Pediatric Congenital Heart Surgery Facilities
  - Institutes of Excellence™ Transplant Facilities

- Optum (UnitedHealth Group)
  - Transplantation
  - Cancer
  - Chronic Kidney Disease
  - Bariatric
  - Orthopedics
  - Neonatology

- Anthem (BlueCross BlueShield)
  - Transplants

- Other
  - Employer or employer group (if selected, please provide details below)
  - Regional/local Insurer or Payer (if selected, please provide details below)
  - Other _____________________

- None
- Don’t know

27. We need some additional information about the Center of Excellence program(s) in which your hospital participates — specifically, about the measures used in the program(s).

**Answer if you selected any programs in question 23.**

There are three ways to submit information about the measures.

1) Complete the measure list within the survey,
2) Complete the Excel template and upload the completed file, or
3) Upload another file you already have containing the list of measures.

- I will complete the measure list within this survey
- I will upload the completed Excel template or another file
Centers of Excellence (continued)

28. Upload the completed Excel template or a file containing measures used in the Centers of Excellence in which your hospital participates.

Upload tool appears if you answered “I will upload…” to question 27.

- Only one file can be uploaded.
  - While it appears you can upload more than one file, only one file is saved in the upload process.
  - You may upload more than one file if the files are compressed into a single ZIP file before uploading.
- File needs to be smaller than 16MB.
- Any file type is acceptable with the exception of executable files (such as those ending in .exe).

29. Which measures or measure topics do(es) the value based purchasing program(s) in which your hospital participates use? If the program(s) use(s) the same measure or measure topic listed, select “same” from the drop-down list. If the program(s) use(s) a modified version of the measure, select “modified.”

Measure table appears if you select “I will complete the measure list within this survey” in question 27.

Refer to Measure List PDF or Excel Upload template to see list of measures from which you will select.

30. Other Measures

If any of the Centers of Excellence in which your hospital participates use measures not listed in the tables above, please provide the measure name(s) or description(s) below and/or upload a file containing the measure information using the file upload tool below.

1. (Provide measure name or description)
2. (Provide measure name or description)
3. (Provide measure name or description)
4. (Provide measure name or description)
5. (Provide measure name or description)

Upload a file containing other measures used in the value based purchasing program(s) in which your hospital participates.

- Only one file can be uploaded.
  - While it appears you can upload more than one file, only one file is saved in the upload process.
  - You may upload more than one file if the files are compressed into a single ZIP file before uploading.
- File needs to be smaller than 16MB.
- Any file type is acceptable with the exception of executable files (such as those ending in .exe).
31. To help us better understand the context in which your hospital participates, we are interested in whether your hospital is required to participate by some external agency or organization.

Is your hospital’s participation in the program mandated or required by an external party (e.g., state or payer) or is it voluntary?

| Programs you selected in question 23 will carry forward and you will respond for each program. |
|---------------------------------------------------------------|------------|---------|--------|
| Institutes of ExcellenceTM Pediatric Congenital Heart Surgery Facilities (Aetna) | Optional | Optional | Don’t know |
| Institutes of ExcellenceTM Transplant Facilities (Aetna) | Optional | Optional | Don’t know |
| Transplantation (Optum) | Optional | Optional | Don’t know |
| Cancer (Optum) | Optional | Optional | Don’t know |
| Chronic Kidney Disease (Optum) | Optional | Optional | Don’t know |
| Bariatric (Optum) | Optional | Optional | Don’t know |
| Orthopedics (Optum) | Optional | Optional | Don’t know |
| Neonatology (Optum) | Optional | Optional | Don’t know |
| Transplants (Anthem) | Optional | Optional | Don’t know |
| Employer or employer group COE | Optional | Optional | Don’t know |
| Regional/local Insurer or Payer COE | Optional | Optional | Don’t know |
| Other | Optional | Optional | Don’t know |
Network Inclusion/Exclusion

Network Inclusion/Exclusion or Differentiated/Distinction criteria by payers, employers, or provider owned/managed networks that use quality, in addition to cost/utilization measures, as part of their network adequacy or inclusion decision-making.

For these programs, because they are so varied and often led by payers or employers, of which there are many, we need you to tell us which measures you are being asked to use for participation in ‘said’ program.

32. Current Participation:
   Is your hospital currently contracted or engaged with any payers or employers that use quality measure results for these type of network decisions or differentiation purposes?
   - Yes
   - No
   - Don't know

33. List the name(s) of payer(s) with which you have these types of arrangements.
   Answer if question 32 is “Yes”

34. Future Participation:
   Do you believe quality measures will be used in the next 1-4 years by payers or employers for decisions about network inclusion or exclusion or differentiation purposes?
   Answer if question 32 is “No” or “Don't know”
   - Yes
   - No
   - Don't know

35. We need some additional information about the Network Inclusion/Exclusion program(s) in which your hospital participates —specifically, about the measures used in the program(s).
   Answer if question 32 is “Yes”

There are three ways to submit information about the measures.
   1) Complete the measure list within the survey,
   2) Complete the Excel template and upload the completed file, or
   3) Upload another file you already have containing the list of measures.

   - I will complete the measure list within this survey
   - I will upload the completed Excel template or another file
Network Inclusion/Exclusion (continued)

36. Upload the completed Excel template or a file containing measures used in the Centers of Excellence in which your hospital participates.

Upload tool appears if you answered "I will upload…" to question 35.

- Only one file can be uploaded.
  - While it appears you can upload more than one file, only one file is saved in the upload process.
  - You may upload more than one file if the files are compressed into a single ZIP file before uploading.
- File needs to be smaller than 16MB.
- Any file type is acceptable with the exception of executable files (such as those ending in .exe).

37. Which measures or measure topics do(es) the network inclusion/exclusion program(s) in which your hospital participates use? If the program(s) use(s) the same measure or measure topic listed, select "same" from the drop-down list. If the program(s) use(s) a modified version of the measure, select "modified."

Measure table appears if you select “I will complete the measure list within this survey” in question 35.

Refer to Measure List PDF or Excel Upload template to see list of measures from which you will select.

38. Other Measures

If any of the network inclusion/exclusion programs in which your hospital participates use measures not listed in the tables above, please provide the measure name(s) or description(s) below and/or upload a file containing the measure information using the file upload tool below.

1. (Provide measure name or description)
2. (Provide measure name or description)
3. (Provide measure name or description)
4. (Provide measure name or description)
5. (Provide measure name or description)

Upload a file containing other measures used in the value based purchasing program(s) in which your hospital participates.

- Only one file can be uploaded.
  - While it appears you can upload more than one file, only one file is saved in the upload process.
  - You may upload more than one file if the files are compressed into a single ZIP file before uploading.
- File needs to be smaller than 16MB.
- Any file type is acceptable with the exception of executable files (such as those ending in .exe).
39. To help us better understand the context in which your hospital participates, we are interested in whether your hospital is required to participate by some external agency or organization.

Is your hospital’s participation in the program mandated or required by an external party (e.g., state or payer) or is it voluntary?

- Yes
- No
- Don’t know
Pediatric Clinical/Patient Registries

Pediatric Clinical/Patient Registries collect—for one or more purposes—standardized information about a group of pediatric patients who share a condition or experience. Note, unlike other questions in this survey, please select ALL the clinical registries in which your hospital participates, even if it is not part of an accountability program.

40. Current Participation:
In which of the following patient registries is your hospital currently reporting information on pediatric patients? (select all that apply)
- IMPACT REGISTRY™
- ImproveCareNow (ICN2)
- Global Tracheostomy Collaborative Registry
- ACS National Surgical Quality Improvement Program® (ACS NSQIP®)
- Pediatric Cardiac Critical Care Consortium (PC⁴)
- Pediatric Heart Transplant Study (PHTS)
- Vermont Oxford Network-network databases or registries
- Virtual PICU Systems, LLC (VPS)
- CF [Cystic Fibrosis] Patient Registry
- Society for Pediatric Anesthesia Wake Up Safe
- Society of Thoracic Surgeons Congenital Heart Surgery Database (STS-CHSD)
- Extracorporeal Membrane Oxygenation (ECMO) Registry of the Extracorporeal Life Support Organization (ELSO)
- Collaborative Pediatric Critical Care Research Network (CPCCRN)
- Pediatric Emergency Care Applied Research Network (PECARN)
- Department of Defense Trauma Registry (DoDTR)
- Association Get With the Guidelines Resuscitation (AHA-GWTG-R) (formerly the National Registry of Cardiopulmonary Resuscitation)
- ICD (Implantable Cardioverter Defibrillators) Registry, American College of Cardiology
- AMII Registry
- National Healthcare Safety Network: NHSN
- Society for Pediatric Sedation Registry
- Other ____________________
- None
- Don't know
Pediatric/Clinical Patient Registries (continued)

41. Future Participation:

Does your hospital intend to report information on pediatric patients to any of these registries in the near-term (1 to 4 years)?

Unselected choices from question 40 will carry forward as choices for question 41

- IMPACT REGISTRY™
- ImproveCareNow (ICN2)
- Global Tracheostomy Collaborative Registry
- ACS National Surgical Quality Improvement Program® (ACS NSQIP®)
- Pediatric Cardiac Critical Care Consortium (PC⁴)
- Pediatric Heart Transplant Study (PHTS)
- Vermont Oxford Network-network databases or registries
- Virtual PICU Systems, LLC (VPS)
- CF [Cystic Fibrosis] Patient Registry
- Society for Pediatric Anesthesia Wake Up Safe
- Society of Thoracic Surgeons Congenital Heart Surgery Database (STS-CHSD)
- Extracorporeal Membrane Oxygenation (ECMO) Registry of the Extracorporeal Life Support Organization (ELSO)
- Collaborative Pediatric Critical Care Research Network (CPCCRN)
- Pediatric Emergency Care Applied Research Network (PECARN)
- Department of Defense Trauma Registry (DoDTR)
- Association Get With the Guidelines Resuscitation (AHA-GWTG-R) (formerly the National Registry of Cardiopulmonary Resuscitation)
- ICD (Implantable Cardioverter Defibrillators) Registry , American College of Cardiology
- AMII Registry
- National Healthcare Safety Network: NHSN
- Society for Pediatric Sedation Registry
- Other ____________________
- None
- Don't know
Patient Experience
This section asks a few more questions about your hospital's use of patient experience instruments surveys and results. This includes patient experience surveys that may or may not be used as part of an established accountability program.

42. Current Participation:
You selected these patient experience surveys as currently being administered to assess patient/family experience at your hospital:

<table>
<thead>
<tr>
<th>Survey</th>
<th>Currently using</th>
<th>Plan to use near-term</th>
<th>Not using and no plans to use</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAHPS Hospital Survey</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>CAHPS Child Hospital Survey</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>CAHPS Clinician &amp; Group Survey</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>CAHPS Surgical Care Survey</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>CAHPS Health Plan Survey 5.0H Child Version (NCQA)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Plus Children With Chronic Conditions supplement</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>CAHPS American Indian Survey</td>
<td>☐</td>
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</tr>
<tr>
<td>Young Adult Health Care Survey (OHSU)</td>
<td>☐</td>
<td>☐</td>
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<td>☐</td>
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<tr>
<td>Promoting Healthy Development Survey (OHSU)</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Validated family-centered survey questionnaire for parents’ and patients’ experiences during inpatient pediatric hospital stay (BCH-CPSQR)</td>
<td>☐</td>
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<tr>
<td>Other</td>
<td>☐</td>
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</tr>
</tbody>
</table>

If you completed any of the measure lists within the online survey, any patient experience surveys you selected will be listed here.

43. Current and Future Participation:
Which of these additional patient experience survey instruments does your hospital currently use or plan to use in the near term (1 to 4 years)? (select all that apply)

<table>
<thead>
<tr>
<th>Survey</th>
<th>Currently using</th>
<th>Plan to use near-term</th>
<th>Not using and no plans to use</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAHPS Hospital Survey</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>CAHPS Child Hospital Survey</td>
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<tr>
<td>CAHPS Clinician &amp; Group Survey</td>
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<tr>
<td>CAHPS Surgical Care Survey</td>
<td>☐</td>
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<tr>
<td>CAHPS Health Plan Survey 5.0H Child Version (NCQA)</td>
<td>☐</td>
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<td>☐</td>
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<tr>
<td>Plus Children With Chronic Conditions supplement</td>
<td>☐</td>
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<tr>
<td>CAHPS American Indian Survey</td>
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<tr>
<td>Young Adult Health Care Survey (OHSU)</td>
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<tr>
<td>Promoting Healthy Development Survey (OHSU)</td>
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</tr>
<tr>
<td>Validated family-centered survey questionnaire for parents’ and patients’ experiences during inpatient pediatric hospital stay (BCH-CPSQR)</td>
<td>☐</td>
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<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>

If you completed any of the measure lists within the online survey, any patient experience surveys you selected will not be listed here.
Your Hospital’s Views on Hospital Accountability Programs and Quality Measures

It is important to us at CHA that we hear children’s hospitals views on the accountability programs and measures. In particular, we are interested in understanding: how committed your hospital is to improving performance in any given accountability program; how well these programs do or do not describe the quality of care provided to patients; challenges associated with production of the measures; and how you think the hospital’s quality or value story should be described.

Hospital Commitment to Program: Hospitals may engage in unit or hospital-wide efforts to effect performance on measures in an accountability program. For example, the use of Key Performance Indicators (KPIs) to indicate progress toward a desirable outcome, in this case performing well in accountability programs.
44. You selected the following accountability programs for your hospital. From your point of view, please indicate your level of agreement with the following statements. (Strongly disagree, disagree, neutral, agree, strongly agree.)

<table>
<thead>
<tr>
<th>Accountability programs you selected in the previous sections will be listed here.</th>
<th>I know what the measure results are and they are shared regularly with me.</th>
<th>The hospital C-Suite executives communicate regularly about the importance and relevance of the accountability programs</th>
<th>At least some of the measure results influence my hospital’s quality improvement efforts.</th>
<th>I know how I can contribute to the performance of at least some measure results.</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. News Best Children’s Hospitals rankings</td>
<td></td>
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<tr>
<td>Leapfrog Group’s Top Children’s Hospitals</td>
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<tr>
<td>Clinical Registry (with public reports)</td>
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<tr>
<td>CMS reporting programs (Medicare Hospital Compare, Physician Quality Reporting System)</td>
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<tr>
<td>CMS-Meaningful Use</td>
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<tr>
<td>State Association public reports (e.g., your state’s hospital association)</td>
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<tr>
<td>Business or Employer Coalitions public reports (e.g., Midwest Business Group on Health)</td>
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<tr>
<td>State agency, or state/regional collaborative, or All Payers Claim Databases (e.g., New York State Department of Health, Oregon Health Care Quality Corporation, Wisconsin Health Information Organization)</td>
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<tr>
<td>Other public reporting program -- ($q://QID7/ChoiceTextEntryValue/6)</td>
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<tr>
<td>Pay-for performance program</td>
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<tr>
<td>Accountable Care Organizations (ACOs) at risk for cost and quality</td>
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<tr>
<td>Patient Centered Medical Homes (PCMHs) at risk for cost and quality</td>
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<tr>
<td>Bundled payment</td>
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<tr>
<td>CMS Value-based programs (VBP)</td>
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<tr>
<td>Other Value based purchasing program -- ($q://QID144/ChoiceTextEntryValue/5)</td>
<td></td>
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<tr>
<td>The Joint Commission (TJC)</td>
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<tr>
<td>Det Norske Veritas Healthcare-GL (DNV)</td>
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<tr>
<td>The Healthcare Facilities Accreditation Program (HFAP)</td>
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<tr>
<td>Center for Improvement in Healthcare Quality (CIHQ)</td>
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<tr>
<td>Accreditation Association for Hospitals/Health Systems Inc (AAHHS)</td>
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<tr>
<td>Other accreditation program -- ($q://QID45/ChoiceTextEntryValue/7)</td>
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<tr>
<td>Disease-Specific Care (DSC) Certification Programs: DSC Pediatric Certification (TJC)</td>
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<tr>
<td>Disease-Specific Care (DSC) Certification Programs: DSC Neonatal/Perinatal Certification (TJC)</td>
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</tbody>
</table>
Accountability program's quality story

In order to assess the face validity of the accountability programs’ quality descriptions, we want to hear from you how well you believe the programs effectively describe the quality and value of patient care provided. We also want to understand which measures your hospital executives and governing boards regularly monitor to assess quality and to identify potential quality issues.

45. Which of the following best describes the extent to which quality measures used in your hospital’s accountability programs are representative of the quality of patient care your hospital provides?

- Not at all representative of the quality of patient care
- Slightly representative of the quality of patient care
- Somewhat representative of the quality of patient care
- Moderately representative of the quality of patient care
- Very representative of the quality of patient care
Challenges and Solutions

We realize that there are substantial infrastructure and operational challenges to support valid measurement. We would like to hear from you about these challenges to better inform CHA targeted efforts.

46. Which of the following best describes the level of effort that your hospital puts into the production and use of quality measures compared to three years ago?
   - Much less effort
   - Less effort
   - The same amount of effort
   - More effort
   - Much more effort

47. To what extent is it a burden for your hospital to calculate and use quality measures that are similar but not identical to each other? (For example, one accountability program measuring readmissions asks for all readmissions within 7 days while another accountability program asks for all preventable readmissions within 30 days. Or, one program defines what is a preventable readmission differently than another program.)
   - Not a burden
   - Slight burden
   - Moderate burden
   - Significant burden
   - Extreme burden
   - Do not have this problem (i.e., similar but different measures used in different programs)
   - Don’t Know

48. How challenging are the operational and system infrastructures to the calculation of quality measures?

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Not at all a challenge</th>
<th>Minor challenge</th>
<th>Neutral challenge</th>
<th>Moderate challenge</th>
<th>Serious challenge</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accurate and complete data</td>
<td></td>
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<tr>
<td>EHR/EMR system data capture</td>
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<tr>
<td>Access to claims data</td>
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<tr>
<td>Data extraction from different sources</td>
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<tr>
<td>Data integration and/or aggregation</td>
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<tr>
<td>Tracking measures’ performance in real-time so they are actionable</td>
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<tr>
<td>Dedicated resources for measurement activities</td>
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<tr>
<td>Other:</td>
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</tbody>
</table>
Your Hospital’s Quality Story
The following section explores how you tell your hospital’s quality story.

49. If you had to pick the three most important quality measures that all children’s hospitals should regularly assess and use to drive improvement, which three would they be?
   1.
   2.
   3.

50. Internal Measure Scorecard
CHA wants to know which measures your C-suite executives and boards monitor regularly. Please upload any measures scorecard(s) used to help executives track how well the hospital is meeting its strategic and long-term objectives. For example, an executive scorecard may report staffing vacancy rates or adverse events; typically, they include baseline and target figures, and trends. True measure results can be stripped, we will keep any results shared strictly confidential.

   • Only one file can be uploaded.
     o While it appears you can upload more than one file, only one file is saved in the upload process.
     o You may upload more than one file if the files are compressed into a single ZIP file before uploading.
   • File needs to be smaller than 16MB.
   • Any file type is acceptable with the exception of executable files (such as those ending in .exe).

51. Beyond any specific measures, what do you think is the most important determinant of quality at a children's hospital?

52. When speaking to your family and friends, how do you describe and persuade them that your hospital is a great hospital for kids?

53. What other comments would you like to make?