PEPPER Sessions Chapter 8
National and State Data Short-Term

During this session, I'm going to review the national- and state-level data and other data resources that are available on the PEPPER website. In addition to the hospital-specific data that are included in your PEPPER, we put together aggregate national-level and state-level data that you might find useful. Following each release, we post the data for the target areas on the data page on the PEPPER website at pepper.cbrpepper.org.

And these reports are available on the tab for short-term acute care hospitals. And you'll find reports at the national level as well as at the state level.

This is an example of a target area summary. This is at the national level. You will see that we provide for all of the target areas. And this is just a portion of the report.

The numerator counts for the nation. The denominator counts at the national level. The proportion — this is the average proportion for all providers in the nation — the average length of stay for the numerator discharges. The average Medicare payment for the numerator discharges. And the total amount of Medicare payment for the numerator discharges.

And this report always includes the most recent four quarters. And we do update it on a quarterly basis following each new report release.

We also make available national-level data for the top one-day stays for medical DRGs and the top one-day stays for surgical DRGs.

And so here on this slide you can see an example of the top medical DRGs for same- and one-day stays. Again this is at the national level. You find similar statistics for your provider within your PEPPER. Now you'll also find workbooks posted that have one worksheet tab for each state for the top one-day stay reports as well as for the target area summary reports.

Now within your PEPPER, the National High Outlier Ranking Report identifies your rank as compared to all of the other hospitals in the nation based on the total number of high outliers for 12 quarters. So what if you're curious about how your number — your total number of high outliers — compares to that of other hospitals?

We have put together a chart that can help you figure out how your total number of high outliers compares to that of other hospitals in the nation. So you can see along the horizontal or x-axis, we identify the total number of outliers. So that ranges from 0 all the way to about 100. So this is the total number of outliers for an individual hospital. And each of the blue dots on here represents one provider. So you can see there is one provider that has the greatest number of high outliers — almost 100. That's the second provider. That provider would be ranked number two on their High Outlier Ranking Report and so on.

So you can use this graph and the total number of high outliers from your PEPPER to gauge where your hospital falls in this distribution. And we do update this every release. So it's updated on a quarterly basis.

Now one common request that we've had over time from hospitals is the ability for them to be compared to their peers, and our team has discussed this on an ongoing basis. There are a number of challenges to actually putting something like this into operation within the PEPPER.

The peer grouping schemes/the methodologies do differ. If we're going to make that available in the PEPPER, the resulting cell sizes would be very small. And so the comparative data there would probably not be very meaningful. And there were also some classification challenges.

So we decided to put together peer group bar charts that would be utilized outside of the PEPPER that would allow providers to compare themselves to others that they consider to be their peers.

So for each quarter we identify and categorize hospitals into these appropriate peer groups based on the provider of services file or the claim status.

The provider of services file is available for download from the CMS website. And it contains data from the Online Survey, Certification and Reporting for OSCAR system. And those data are collected through the CMS regional office. And the file is updated on a quarterly basis.

So for each of the target areas, we identify the 20th, the 50th, and the 80th national percentile for hospitals in these four categories. We look at locations — which is urban versus rural. We look at ownership type, which is for profit or physician-owned versus nonprofit or church-owned versus government, teaching status, and surgical focus.

Now surgical focus — if a hospital has a surgical focus, they have greater than or equal to 70% of their claims billed to a surgical DRG. That would be a surgical focus hospital.

There's more information on the data tab for short-term acute care hospitals. There's a methodology document that includes more specifics as well a hospital by peer group file that can give you more information. Now this report we update on an annual basis.

I've included here in the presentation a screen shot — an example of what these peer group bar charts look like, at least for now. Please be aware that the design of the bar charts will be revised slightly in future reports. And we have a worksheet tab that looks like this for each target area. This happens to be for the stroke intercranial hemorrhage. And you can see, for example in the upper left graph that has the darker red bars, we identify the 80th percentile, the 50th percentile, and the 20th percentile for these different peer groups — urban versus rural.

And so what you can do then is you can take your PEPPER — your target area percent — and think about how it compares to the 80th, the 50th, and the 20th percentile for the peer group that you consider to be most like yourself.

We also have the peer group for ownership types. So you can see in this particular target area, there are for profit or physician-owned hospitals that have a higher 80th, 50th, and 20th percentile than other ownership types do.

And the bottom left corner is teaching status. And then there's the surgical focus peer group.