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**Oregon Hospital Quality Indicator Project, 2004**  
**Fact Sheet**  
**July 21<sup>st</sup>, 2005**

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**What is being released today and why is it important?**

- Today, the Governor, the Office for Oregon Health Policy and Research, and the Oregon Health Policy Commission are announcing the first step in an exciting process in Oregon of **publicly reporting health care quality information**, for use by health care providers, health care purchasers and the general public.
- The web link to the hospital quality information will be activated Thursday, July 21, 2005. To access the web site at that time, go to <http://www.oregon.gov/DAS/OHPPR/> where the link will be listed under the "What's New" banner.
- The inaugural web site presentation provides quality measures for selected health care procedures performed in Oregon's **hospitals**. These quality measures are based on data provided to the state by the hospitals as part of their regular reporting, but this represents the first time the information is being made publicly available with the intent of promoting health care and quality outcomes for all Oregonians.
- **Public reporting of quality measures in health care is becoming increasingly important** as health care costs rise and everyone wants to understand what they are getting for their health care dollar.
  - **Consumers** are being asked to become more sophisticated in their health care choices and quality information that helps them make education decisions is difficult to find.
  - **Employers** are looking for more information to make better health care purchasing decisions for their employees.
  - **Insurers** are looking for better information when contracting with health care providers.
  - **Providers**, when provided comparative quality data, are given the opportunity to identify areas of high performance as well as areas for further study.
- **This initiative parallels efforts nationwide to report hospital performance data.** The approach used in this project is based on an extensive evidence-based process under development by the federal Agency for Health Care Research and Quality. Additionally, the federal Centers for Medicare and Medicaid Services recently began displaying Medicare quality information on hospitals nationwide and 17 states have comparative hospital data available to the public through Internet sites.

## **What health care quality information is available on the website?**

- The data on the website provides the number (or volume) of certain procedures provided in Oregon's hospitals where there is scientific evidence that hospitals performing more of these procedures have better outcomes (for example, heart bypass surgery). Additionally, the website includes death (or mortality) rates for procedures and conditions where such rates may vary across hospitals and where higher mortality rates have been associated with poorer quality of care (for example, stroke).
- The following measures are being reported for Oregon hospitals statewide.

### *For Volume*

- Abdominal Aortic Aneurysm Repair
- Balloon Angioplasty
- Carotid Artery Plaque Removal
- Esophageal Resection
- Heart Bypass Surgery
- Pancreatic Resection
- Pediatric Heart Surgery

### *For Mortality*

- Abdominal Aortic Aneurysm Repair
- Balloon Angioplasty
- Heart Attack
- Heart Bypass Surgery
- Congestive Heart Failure
- Hip Fracture
- Pneumonia
- Stroke

## **How was this data prepared? Who was involved?**

- The state's Office for Oregon Health Policy and Research (OHPR) and the Oregon Health Policy Commission have worked collaboratively with an impressive array of representatives with expertise in assessing health care quality. Included were representatives from the Oregon Association of Hospitals and Health Systems, the Oregon Health Care Quality Corporation, individual Oregon hospitals and other interested stakeholders.
- Hospitals have been given an opportunity to review their data and to post comments on the website if they would like to provide background information or further clarifications of their results.
- These measures are developed from hospital discharge data which is submitted to OHPR annually. The state will post these measures on an annual basis as well as work in the interim to improve the information made available on the website.

## **What information is available on Oregon health care providers in addition to the data being released today?**

- This effort complements other efforts both nationally and within Oregon to make the health care system more transparent to providers, policymakers and consumers. Nationally, this project is a part of an extensive evidence-based process under development by the Agency for Health Care Research and Quality which is detailed at: [http://www.qualityindicators.ahrq.gov/iqi\\_download.htm](http://www.qualityindicators.ahrq.gov/iqi_download.htm).

Within Oregon, the Oregon Association of Hospitals and Health Systems is contributing to available data by posting hospital charge information on their website [www.orpricepoint.org](http://www.orpricepoint.org).

- This is only a small slice of the information a consumer might use in evaluating quality at a hospital. This website should not be used as the sole source of information when determining hospital quality. Besides talking with their physician, consumers can go to other websites that also provide important quality information. Web links to other resources are available on the OHPR website as well.
- Next steps will be to expand the data available to providers and consumers as well as further engage the health care community to ensure that the data is useful and is translating into improved health care services.

### **What are the limitations of the data being released today?**

There are important limitations to these data that should be kept in mind:

- Because these reports are based on billing data, the results have limitations. How billing data is recorded, or “coded”, varies among hospitals, partially due to different requirements by insurance payers and partially due to the individual judgment required.
- Billing data does not provide details about a patient’s condition when they are admitted to the hospital, nor does it capture everything that occurs during the hospital stay.
- Many of the procedures being reported have risks associated with them. Especially when looking at mortality rates, it is important to remember that medicine is not an exact science and death may occur even when all standards of care are followed.
- There are many factors that determine health care outcomes that may not relate to hospital performance, but would influence the results presented here, for example, stage of illness, age, other accompanying illnesses or conditions. The data analysis method attempts to adjust for some of these factors, but it is not possible to do so perfectly. In addition, when a patient has a Do Not Resuscitate (DNR) order in place, the hospital must honor that.
- Finally, some large multi-specialty hospitals serve as referral centers for the state and as a result end up taking the most severe and most complicated cases. Again, the data analysis method attempts to adjust for that, but cannot do so perfectly.

Generally, users should recognize that these quality indicators reflect only initial steps and will be continuously improved upon.

### **Who should I contact for more information?**

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