

**Center for Medicare and Medicaid Services (CMS)
Inpatient Prospective Payment System (IPPS)
Rule Impacting Healthcare-Associated Infection
(HAI) Reporting and Payment:
Role of the Centers for Disease Control and
Prevention's (CDC's) National Healthcare Safety
Network (NHSN)**

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NHSN and the IPPS Rule: Overview

1. Inpatient Prospective Payment System (IPPS) hospitals participating in CMS's Reporting Hospital Quality Data for Annual Payment Update (RHQDAPU) program will be required to submit healthcare-associated infection (HAI) data via CDC's National Healthcare Safety Network (NHSN) beginning January 2011
2. Central line-associated bloodstream infection (CLABSI) reporting for intensive care units and neonatal intensive care units beginning January 2011
3. Surgical site infection (SSI) reporting for select surgical procedure categories beginning January 2012

APIC Supports Use of NHSN in IPPS RHQDAPU



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APIC Talking Points on CMS FY 2011 Proposed Changes to IPPS

These talking points are provided to APIC members who wish to submit comments to the Centers for Medicare and Medicaid Services (CMS) on the proposed changes to the hospital inpatient

APIC applauds CMS's plan to move to use of NHSN, rather than administrative/coding data for payment determination, and strongly recommends that this transfer must be rolled out incrementally in order to ensure accuracy of data and ability of hospitals to transition from one type of data requirement to another.

CMS proposes to use the Centers for Disease Control and Prevention's (CDC) National

APIC believes that CLABSI is the *only* measure that is sufficiently through the consensus process and can be adopted quickly to meet the statutory requirement without unduly burdening hospitals. APIC supports CLABSI for payment in FY 2013 assuming the measure is fully transparent, utilizes NHSN, and hospitals do not have to join a registry to report the information.

proposed rule.

Spreading knowledge. Preventing infection.™

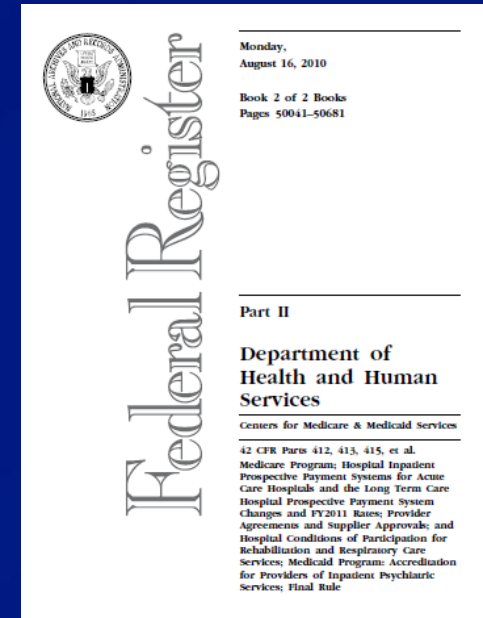
Use of NHSN by 21 States for Mandatory HAI Reporting

NY SC CT CA MD OK VA IL OR
 VT CO TN PA DE MA WA NH NJ WV NV TX

	2007	2008	2009	2010	2011
Central line associated bloodstream infections			CA, CO, CT, DE, IL, MA, MD, NH, NJ, NV, NY, OK, OR, PA, SC, TN, TX, VA, VT, WA, WV		
Surgical site infections			CO, IL, MA, NH, NJ, NV, NY, OR, PA, SC, TN, TX, VT, WA		
Multi-drug resistant organisms & <i>C. difficile</i> associated disease			CA, NJ, NV, NY, TN and other states considering its use		
Ventilator associated pneumonias			OK, PA, WA		
Catheter associated UTI			NJ, PA		
Central line insertion practices			CA, NH		
Dialysis events			CO		
Healthcare worker influenza vaccination coverage			WV, and other states are considering its use		

NHSN and the IPPS Rule: Mandatory HAI Reporting on the Federal Level

- Proposed rule - April 20, 2010
- Public comments due - June 18, 2010
- Final rule announced - August 3, 2010
- Final rule published - August 16, 2010:
<http://edocket.access.gpo.gov/2010/pdf/2010-19092.pdf>
- First reporting quarter - January 1 through March 31, 2011
- First quarterly data due - August 15, 2011



Implementation of HAI reporting via NHSN as part of the IPPS rule is a work in progress - An interagency group is meeting regularly and working on operational plans. However, more work is needed to complete plans and prepare for NHSN to serve as an operational system for quality measure reporting to CMS.

NHSN and the IPPS Rule: Operational Plans

- Hospitals agree to participate by signing:
 - RHQDAPU pledge form
 - NHSN consent agreement
- Hospitals new to NHSN complete enrollment process
- Hospitals enter CMS Certification Number (CCN) into NHSN, if not already entered
- New NHSN users take training prior to using the system
- Hospital reporting via NHSN for RHQDAPU starts January 2011
- CMS provides CDC with a list of CCNs for hospitals participating in RHQDAPU
- CDC adds an NHSN analysis feature that enables quarterly calculation of hospital-specific CLABSI statistics
- CMS uses hospital-specific statistics to pay hospitals that successfully report and for public reporting at the Hospital Compare website: <http://www.hospitalcompare.hhs.gov>

National Quality Forum #0139 – Central line associated bloodstream infections among ICU and NICU patients

Numerator – Laboratory-confirmed primary bloodstream infections that are not secondary to another infection and that occur in Intensive Care Unit (ICU) or Neonatal Intensive Care Unit (NICU) patients in whom a central line or umbilical catheter was in place at the time of, or within 48 hours before, onset of the infection

Denominator – Device days, i.e., number of ICU or NICU patients with one or more central lines or umbilical catheters enumerated daily and summed over the measurement interval

National Quality Forum #0299 – Surgical site infections

Numerator – Deep incisional or organ/space infections occurring within 30 days after an operative procedure* if no implant is in place or within 1 year if an implant is in place

Denominator – Number of operative procedures*

*Procedures in scope for the measure are coronary artery bypass graft and other cardiac surgery, hip or knee arthroplasty, colon surgery, hysterectomy (abdominal or vaginal), and vascular surgery

NHSN and the IPPS Rule: Additional Operational Considerations

- Hospitals that use a commercial infection control software system can report HAI electronically to NHSN
- NHSN web page for IPPS participating hospitals is under development and will provide targeted resources for training and reporting using NHSN
- HAI reporting requirements for RHQDAPU do not supercede state HAI reporting requirements
- CLABSI data submitted via NHSN to comply with RHQDAPU reporting requirements in 2011 will not be included in RHQDAPU data validation

Thank You!

Your Questions and Comments are Welcome

**For More Information about NHSN:
<http://www.cdc.gov/nhsn/>**



**National Center for Emerging and Zoonotic Infectious Diseases
Division of Healthcare Quality Promotion**

