

# Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

Quality Committee Meeting Notes – Monday, March 27, 2017

**Attendees: P=Present; A=Absent; X=Expected Absence**

A	Abdallah, Arbi 'Ben' (Wash U)	P	Lacca, Tory (Michigan)
A	Agarwala, Aalok (MGH)	P	Lins, Steve (Bronson Battle Creek)
P	Ajja, Olivia (St. Joseph Ann Arbor)	A	Lorzano, Alyssa (Oregon)
P	Angel, Alan (Bronson Battle Creek)	P	Louzon, Kathryn (Beaumont Royal Oak/Troy)
A	Aziz, Michael (OHSU)	P	Mack, Patricia (Weill-Cornell)
P	Becker, Aimee (Wisconsin)	A	Mathis, Mike (Michigan)
P	Berris, Joshua (Beaumont FH)	A	Mathur, Piyush (Cleveland Clinic)
P	Bhavsar, Shreyas (MD Anderson)	P	McKinney, Mary (Beaumont Dearborn/Taylor)
P	Biggs, Daniel (Oklahoma)	A	Miletic, Nino (NYU Langone)
P	Bledsoe, Amber (Utah)	A	Molina, Susan (St. Mary)
P	Brightman, Deena (Henry Ford)	A	Moore, James (UCLA)
P	Bornhoft, Katie (Michigan)	A	Naik, Bhiken (Virginia)
P	Buehler, Katie (Michigan)	A	Nanamori, Masakatsu (Henry Ford)
P	Carlington, Jen (St. Mary)	A	Nelson, Anne (Beaumont)
P	Cuff, Germaine (NYU Langone)	P	Osborne, Jaime (Michigan)
A	Coffman, Traci (St. Joseph)	A	Paganelli, Bill (Vermont)
P	Coons, Denise (Bronson Battle Creek/Kalamazoo)	A	Pace, Nathan (Utah)
A	Coyle, Nina (PhyMed)	P	Pardo, Nichole (Beaumont Grosse Pointe)
P	Crawford, Joan (Mercy Muskegon)	A	Peterson, William (Sparrow)
A	Cywinski, Jacek (Cleveland Clinic)	A	Poindexter, Amy (Holland)
A	Davies, Eric (St. Joseph Oakland)	P	Price, Matthew (Beaumont Royal Oak)
A	DeBoer, Jennifer (Holland)	A	Popovich, Matt (AQI)
P	Domino, Karen (U of Washington)	P	Quinn, Cheryl (St. Joes Oakland)
P	Dubovoy, Tim (Michigan)	A	Rensch, Bob (Bronson)
A	Fergus, Claudette (PhyMed)	A	Roberson, Nicole (Trinity)
A	Fleisher, Lee (Pennsylvania)	P	Rozewicz, Deb (Bronson)
P	Gates, Liz (Beaumont Royal Oak/Troy)	P	Saager, Leif (Michigan)
A	Giambrone, Greg (Weill-Cornell)	P	Saha, Amit (Wake Forest)
A	Godbold, Michael (Tennessee)	A	Sams, Amy (Bronson)
A	Greilich, Philip (UT Southwestern/MD Anderson)	P	Schoenberger, Rob (Yale)
A	Hart, Steve (Utah)	A	Schwartz, Rob (Holland)
P	Harwood, Tim (Wake Forest)	P	Segal, Scott (Wake Forest)
P	Heiter, Jerri (St. Joseph)	P	Shah, Nirav (Michigan)
P	Hightower, William (Henry Ford W. Bloomfield)	X	Shanks, Amy (Michigan)
A	Hitti, Nicole (Weill-Cornell)	A	Sharma, Anshuman (Wash U)
P	Horton, Brandy (A4)	A	Silvasi, Daniel (Beaumont Troy)
X	Housey, Shelley (Michigan)	A	Smith, Susan (Beaumont Royal Oak)
P	Ingle, Nicole (Beaumont)	A	Stefanich, Lyle (Oklahoma)
A	Jameson, Leslie (Colorado)	A	Tom, Simon (NYU Langone)
A	Jeffries, Thomas (St. Mary)	A	Turnbull, Zackary (Weill-Cornell)
A	Kennedy, Jori (Sparrow)	A	Turzewski, Cynthia (St. Mary)
X	Kheterpal, Sachin (Michigan)	P	Tyler, Pam (Beaumont Farmington Hills)
A	King, Lisa (Oklahoma)	A	Wedeven, Chris (Holland)
A	Kraus, Kelli (St. Mary's Livonia)	A	Whitney, Gina (Children's Colorado)
A	Kuck, Kai (Oklahoma)	A	Wilczak, Janet (Beaumont Dearborn/Taylor)
P	Lagasse, Robert (Yale)	A	Wood, Aaron (Beaumont Farmington Hills)
P	LaGorio, John (Mercy Muskegon)		

## Agenda & Notes

1. Minutes from February 27, 2017 meeting approved.
2. Announcements
  - a. ASPIRE only quarterly meeting to be held Friday, July 21, 2017 10a-2p at Lansing Community College in Lansing. Developing agenda now. Please contact Coordinating Center with any topic ideas.
  - b. MPOG meeting next year will be in Boston in October 20, 2017. Working on agenda now.
  - c. Next quarterly meeting: Friday, April 28. Will co-host with MSQC at Schoolcraft College in Livonia. Agenda is focused on both anesthesia and surgeon topics. Bhiken Naik coming to discuss opioid use and work done at UVa. Agenda is now posted & registration is open on the MSQC website. Combined surgeon and anesthesiologist panel regarding controversies in anesthesia care: glycemic control and fluid management. Dr. Leif Saager to present on intraop handoffs in the afternoon.
3. Cohort 3 Status
  - a. Beaumont-Grosse Pointe final review of data occurred last Friday, March 24. Will upload to production this week.
  - b. Henry Ford Health System- Detroit and West Bloomfield: in progress and on schedule.
4. QCDR Update
  - a. 2016 QCDR submission was successful.
  - b. QCDR audits are due May 31. Contact Katie with any questions.
  - c. CMS approval to be designated as a QCDR in 2017- pending. Expected to hear by mid-April.
  - d. ASPIRE will post contract and QCDR participation agreement on the website as soon as approval is confirmed. Let Dr. Shah or Katie Buehler via email know if interested in participating for 2017- can send out QCDR Participation Guide.
  - e. Insurance type is required this year. Specification document will be distributed to 2017 sites in April.
5. P4P Update
  - a. Scorecards submitted to BCBSM last month
  - b. Each site should have received scores from Tory already- great job to all!
6. ASPIRE Pediatric Subgroup
  - a. First meeting to be held last week. Great turnout from Pediatric Anesthesiologists from WashU, UMHS, NYU, and UVa
  - b. Reviewed NMB, GLU, PUL, TRAN, and FLUID measures for applicability to pediatric population.
  - c. Most measures will remain unchanged. Some modifications suggested. Will exclude massive transfusion based on weight for pediatric population.
  - d. Plan to build subgroups for cardiac and OB after successful roll-out of pediatric measures.
7. QI Toolkits
  - a. ASPIRE plans to build avoiding respiratory complications toolkit for 2017 based upon feedback from collaborative.

- b. Collection of material to help sites implement QI program based on existing QI Measures.
  - c. Examples include summary of literature, implementation ideas, placards and/or laminated cards, disseminations of best practices, etc. Sites are encouraged to submit any tools they may want to share with other sites.
  - d. Can supplement existing QI programs or help initiate a new one
8. Measure Build Updates
- a. Temperature Outcome measure: TEMP 03. Mirrors MIPS 424. Initial build and review complete. Will release this week to dashboards. Will not include TEMP 03 in emails until sites indicate they are ready. Requires PACU data to fully capture through 15 minutes after anesthesia end time. Most sites are scoring well with only the 30 minutes prior to anesthesia end. ASPIRE is building the infrastructure to handle PACU data and will work with Epic and Cerner to modify extracts which will assist most sites in contributing this data if interested.
  - b. TOC 02 measure is built and under review at this time. Will implement in dashboards soon. PACU handoff measure based on MIPS 426. Will release an audit tool in conjunction with this measure. Sites wishing to participate with this measure will have 2 scores, one for the EHR documentation score and one for the audit result.
  - c. PONV measure spec is complete (MIPS 430). Will begin build soon. ASPIRE will work with sites to identify documentation opportunities to accurately extract and measure the data for PONV.
  - d. Each of these measures can be used for QCDR submission and allow ASPIRE data to be compared across other providers nationally who are submitting via another anesthesia QCDR.
  - e. GLU 01 and TRAN 01 currently measure each glucose check or transfusion administered for every case. Therefore, a provider can have multiple passes/failures per case depending on the number of instances of glucose check or transfusion. ASPIRE would like to convert these measures to a per case pass/fail rate. Do not believe there will be too much effect on performance but will simplify failed case review as the CC adds failure reason to the failed case grids. Once implemented, will report back to the Quality Committee on the case level implications.
9. Provider emails: ASPIRE has received feedback from QI Champions and providers for enhancements to provider emails.
- a. ASPIRE can reduce the number of measures displayed in emails by site. QI Champions should notify ASPIRE if they would like a selection of measures displayed rather than all measures for every email. Can also change the order of the measures if desired.
  - b. For April, will now hide measures for providers that did not have any instances of that measure during the month.
  - c. Also in April, will be adding trend information to the bar graphs. Last month's performance will be displayed above each bar graph so providers can better compare their performance month to month.
10. Measure Timeliness Query
- a. Feedback from sites to consider delaying reporting since measure performance continues to change due to billing code updates.

- b. ASPIRE coordinating center will now be taking snapshots of the data on monthly intervals to see how much and how often scores change over time. If there are significant changes in measure performance, collaborative may decide to delay feedback emails.
- c. Expect to have a relevant amount of data by June to report back to the Collaborative on a plan at that time.

11. Data Direct Use case

- a. Originally created for research colleagues to assist with cohort discovery. Allows individual to query MPOG Central database and create a list of patients.
- b. Since its release, have quickly identified that this tool can also help with identifying QI opportunities.
- c. Demo of the tool for QI purposes shared during the meeting. See meeting recording for more information.
- d. Encourage sites to trial Data Direct for QI work and let us know if you have any questions.

Meeting concluded at 1046.