**Appendix:** "Do the Stars Align? Distribution of High Quality Ratings of Healthcare Sectors Across U.S. Markets"

**Appendix Table 1:** Specific Measures of the Four CMS Star Rating Systems

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| **Sector** | **Measure Domains** |
| **Hospitals** | Mortality:   * Acute myocardial infarction (AMI) * Coronary artery bypass graft surgery (CABG) * Chronic Obstructive Pulmonary Disease (COPD) * Congestive heart failure * Pneumonia * Stroke * Serious treatable complications after surgery   Safety of care:   * Central line-associated bloodstream infections (CLABSI) * Catheter-associated urinary tract infections (CAUTI) * Surgical site infections from colon surgery (SSI: Colon) * Surgical site infections from abdominal hysterectomy (SSI: Hysterectomy) * Methicillin-resistant Staphyloccocus Aureus (MRSA) events * Clostridium-difficile events * Rate of complications for hip/knee replacement * Serious complications   Hospital readmissions (30-days):   * AMI * CABG surgery * COPD * Congestive heart failure * Hip/Knee surgery * Pneumonia * Stroke * Hospital wide readmissions   Patient experience:   * Nursing communication * Doctor communication * Staff responsiveness * Pain control * Communication about medications * Cleanliness * Quietness * Discharge information * Understanding of care * Overall hospital rating * Recommendation of hospital   Effectiveness of care:   * Flu vaccination of patients * Flu vacations of staff * Aspirin within 24hrs of AMI patients * Proportion of patients who leave ED before being seen * Percentage of patients in ED with stroke symptoms who received brain scan results within 45 minutes of arrival * Percentage of patients receiving appropriate recommendation for colonoscopy screening * Percentage of patient with history of polyps receiving follow-up colonoscopy in the appropriate time frame * Percent of mothers whose deliveries were scheduled too early (1-2 weeks early) if not medically necessary * Ischemic stroke patients who got medicine to break up blood clot within 3 hours * Patients with blood clots who received anticoagulants * Patients who developed blood clots who did not receive prophylaxis   Timeliness of care   * Average (median) time patients spent in emergency department before being admitted to inpatient * Average (median) time patients spent in ED waiting to get to inpatient floor * Average (median) number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital * Average (median) number of of minutes before outpatients with chest pain or possible heart attack got an ECG * Average (median) time patients spent in the ED before leaving from the visit * Average (median) time patients spent in the ED before being seen * Average (median) time patients spent in the ED with broken bones had to wait before getting pain medication   Efficient use of medical imaging   * Outpatients with low-back pain who had an MRI without trying recommended treatments first, such as physical therapy * Outpatient CT scans of the abdomen that were “combination” (double) scans * Outpatient CT scans of the chest that were “combination (double) scans * Outpatients who got cardiac imaging stress tests before low-risk outpatient surgery * Outpatients with brain CT scans who got a sinus CT scan at the same time |
| **Home Health Agencies** | Clinical process measures   * Timely imitation of care * Drug education on all medications provided to patient/caregiver * Influenza vaccine   Outcome measures:   * Improvement in ambulation * Improvement in bed transferring * Improvement in bathing * Improvement in pain interfering with activity * Improvement in shortness of breath * Acute care hospitalization rate |
| **Nursing Homes** | Health inspections:   * Nursing home survey on health deficiencies * Number of repeat revisits required to confirm correction of deficiencies   Staffing:   * Total nursing hours per resident day (RN + LPN + nurse aide hours) * RN hours per resident day   Quality measures:  Long stay residents:   * % residents whose need for help with activities of daily living has increased * % of residents whose ability to move independently worsened * % of high risk residents with pressure ulcers * % of residents who have/had a catheter inserted and left in their bladder * % of residents who were physically restrained * % of residents with a urinary tract infection * % of residents who self-report moderate to severe pain * % of residents experiencing one or more falls with major injury * % of residents who receive an antipsychotic medication   Short-stay residents:   * % of residents whose physical function improves from admission to discharge * % of residents with pressure ulcers that are new or worsened * % of residents who self-report moderate to severe pain * % of residents who newly received an antipsychotic medication * % of residents who were re-hospitalized after a nursing home admission * % of residents who have had an outpatient ED visit * % of residents who were successfully discharged to the community |
| **Dialysis Centers** | Quality measures   * Standardized mortality ratio * Standardized hospitalization ratio * Standardized transfusion ratio * % of adult patients who had enough waste removed from blood during dialysis * % of pediatric patients who had enough waste removed from blood during dialysis * % of adult peritoneal dialysis patients who had enough waste removed from blood during dialysis * % of adult dialysis patients who had hypercalcemia * % of adult dialysis patients who received treatment through fistula * % of adult patients who had a catheter left in vein for 90 days or longer for regular hemodialysis treatment |