

## QUALITY IMPROVEMENT IN REAL-LIFE ANESTHESIA PRACTICE: WHAT TRAINEES NEED TO KNOW

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US Anesthesia Partners

### Disclosure

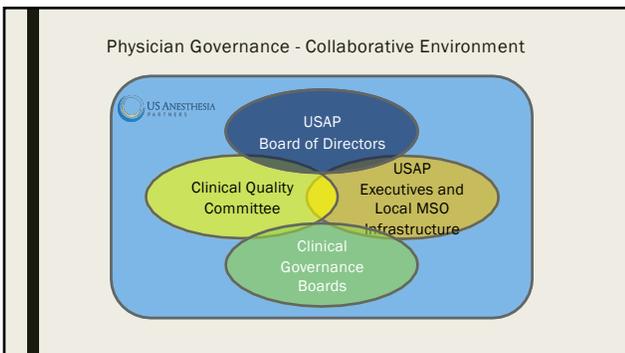
- I am a shareholder in US Anesthesia Partners
  - Houston, Dallas, Denver, Orlando
- I have no investment in companies providing healthcare goods
- I am not paid by any other company
- I work clinically at Baylor University Medical Center, Dallas
  - Not a university hospital!
  - Large community hospital: Level 1 trauma, cardiac, transplant
- I am motivated to improve patient care

### Learning Objectives

- Recognize what a large group practice looks like in 2016
  - Size and scope
  - Personnel
- Understand why quality is a competitive advantage
  - Regulatory requirements
  - Hospital partnerships
- Learn what will be expected of a new-grad resident

### US Anesthesia Partners

- A true partnership -- member groups buy in
- The largest physician-owned company in the world
- Deep penetration in selected markets
- Physicians own all clinical governance
  - Hiring, firing, staffing, schedules, compensation
- Supported by the corporate umbrella
  - Contracts, coding, billing, HR, malpractice, legal, compliance, information technology, QUALITY



### USAP Personnel Census

Region	2014	2015	2016	2017	2018	2019	2020	2021	2022
North	12,345	13,456	14,567	15,678	16,789	17,890	18,901	19,012	20,123
South	8,765	9,876	10,987	11,098	12,109	13,210	14,321	15,432	16,543
West	5,432	6,543	7,654	8,765	9,876	10,987	11,098	12,109	13,210
Midwest	3,210	4,321	5,432	6,543	7,654	8,765	9,876	10,987	11,098
Southwest	2,109	3,210	4,321	5,432	6,543	7,654	8,765	9,876	10,987

### Quality Improvement as a Competitive Advantage

- We want to take the best care of our patients
- We want our professionals to know their status
- We want to work with our hospital partners
- We want to work with payers
  - CMS (measures and regulatory reporting)
  - Commercial insurance contracts
- We want to create the right future

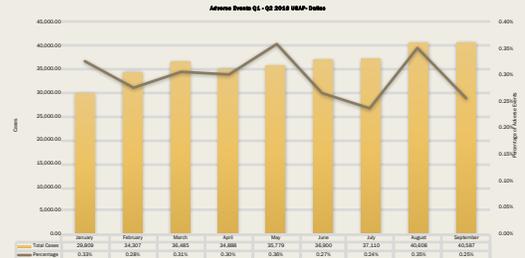
### USAP Quality: What I Ask For

- Outcomes capture from every case
- Patient satisfaction measurement in every practice
- Incident capture and review
- Participation in hospital quality programs
- Successful PQRS reporting
- Sharing best practices

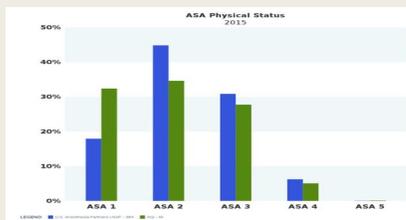
### Outcomes Capture

- Every case, every day
- Electronic form, linked to billing ticket
- Measure elements established annually by CQC
- Options:
  - USAP Internal ("e-bluesheet"; South Texas, Orlando)
  - MD Cloud (North Texas)
  - Medaxian (Colorado)

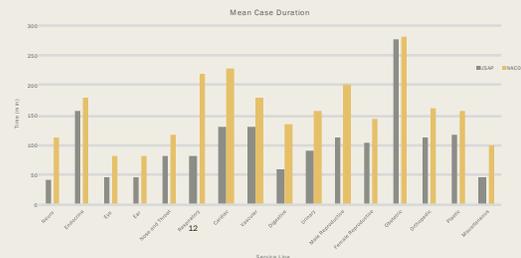
### Cases and Adverse Events



### Patient Demographics



### Practice Efficiency



### Outcomes - 155,000 Cases in 2015

Outcome	N	Rate	NACOR
Adverse Drug Reaction	19	0.012%	0.019%
Anaphylaxis	2	0.001%	0.006%
Aspiration	15	0.010%	0.024%
Cardiac Arrest	20	0.013%	0.075%
Case Cancellation	52	0.033%	0.063%
Death	5	0.003%	0.037%
Eye Injury	21	0.014%	0.005%
PONV	169	0.109%	3.010%
Post-Dural Puncture Headache	9	0.006%	0.031%
Neurologic Deficit	3	0.002%	0.020%
Reintubation	30	0.019%	0.060%
Respiratory Arrest	7	0.005%	0.007%
Unplanned Admission	14	0.009%	0.094%
Unplanned ICU Upgrade	34	0.022%	0.115%



### Dashboards



### Drill Down

### Patient Satisfaction

#### VITALS Anesthesia provider Patient Satisfaction Questionnaire (APSQ2)

1. Please select these providers for whom you remember enough to answer questions about this case.

Dr. Johnson    Minnie Jones

Remember neither of these healthcare providers.

Question #    Question Group    Answer Type    Question Text

2    Privacy Respected, Composite    Likert Scale 1-5 w N/A    Your anesthesia provider did his or her best to respect your privacy.

3    Communication, Composite    Likert Scale 1-5 w N/A    Your questions about anesthesia, the process, risks, and possible after effects were answered.

4    Decision Prep, Composite    Likert Scale 1-5 w N/A    You were well prepared to make informed decisions.

5    Ease Anxiety, Composite    Likert Scale 1-5 w N/A    Your anesthesia provider helped ease any anxiety you were feeling.

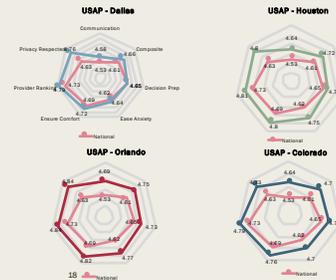
6    Ensure Comfort, Composite    Likert Scale 1-5 w N/A    Your anesthesia provider ensured your comfort during the surgical experience.

7    Overall    Likert Scale 1-5    Using a number from 5 to 1, where 5 is the best possible and 1 is the worst, please rate your anesthesia provider.

8    Yes/No          Did you experience nausea or vomiting after your surgery?

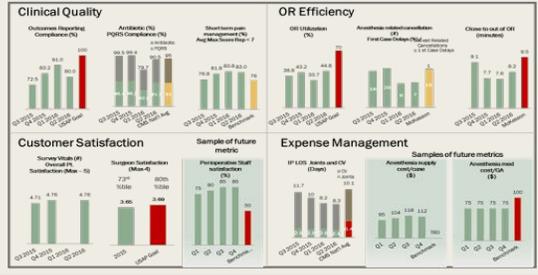
9    Text Box          Please share additional comments for your anesthesia provider.

### Patient Satisfaction



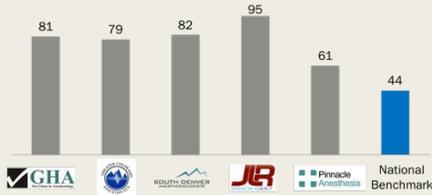
# Hospital Partnership

## Scorecards



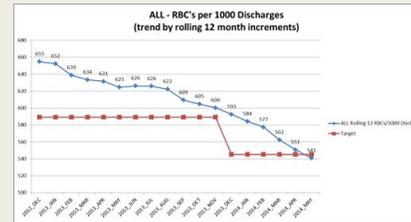
## Other Customers

Facility and Surgeon NPS by practice



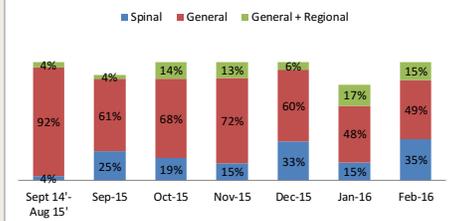
USAP NPS scores significantly exceed national benchmark for large anesthesia group practices

## Patient Blood Management



## Same Day Joint Surgery (BUMC)

Mode of Anesthesia



## Perioperative Surgical Home Scorecard

Pilot (Sept. 14'-Aug. 15') from Baseline (July 13'-Dec. 13')	Total Hip Replacement	Total Knee Replacement	Hip Fracture
LOS	Decreased 16.55%	Decreased 17.38%	Increased 4.98%
Direct Cost	Decreased 8.79%	Decreased 3.48%	Decreased 4.68%
30 day Readmissions	Decreased 29.33%	Decreased 44.96%	
Pre-op education (joint class attendance)	Increased 137.5%	N/A	
PACU (Recovery room) time	Increased 8.73%	Increased 4.18%	Decreased 6.83%
Patient Satisfaction	Increased by 2.4%		
Blood transfusion utilization post-operatively	Decreased by 49%	Decreased 64.74%	Decreased 24.25%
One Day Joint Patients	Increased by 340%	Increased by 325%	N/A

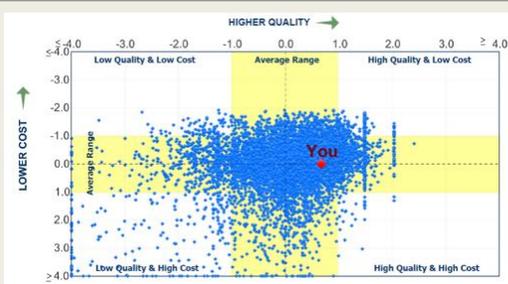
# Regulatory Reporting

## “Pay for Performance”

- Federal programs to promote quality over quantity
  - Based on measuring outcomes
  - Payment incentives and penalties
  - Public reporting
- Today:
  - Physician Quality Reporting System
  - Value Based Modifier
  - Meaningful Use
- Applies to our reimbursement for traditional Medicare cases (but drives requirements for all payers)
- Major change coming in 2019



## Quality and Resource Use Report (Texas)



## Quality and Resource Use Report (Texas)

Measure Identification Number(s)	Measure Name	Number of Eligible Cases	Your TIN		All TINs in Peer Group		
			Performance Rate	Standardized Performance Score	Included in Domain Score?	Benchmark (National Mean)	Standard Deviation
76	Prevention of Central Venous Catheter (CVC)-Related Bloodstream Infections	13,288	99.93%	0.66	Yes	84.20%	23.98
145	Radiology Exposure Time Reported for Procedures Using Fluoroscopy	2	100.00%	0.89	No	77.92%	24.88
193	Perioperative Temperature Management	391,248	99.68%	0.82	Yes	93.11%	10.68
ACI 6	Immediate Perioperative Cardiac Arrest Rate	615,580	0.03%	---	No	---	---
ACI 7	Immediate Perioperative Mortality Rate	622,998	0.01%	---	No	---	---
ACI 8	PACU Reintubation Rate	528,275	1.69%	---	No	---	---
ACI 10	Composite Procedural Safety for Central Line Placement	90,675	99.69%	---	No	---	---
ACI 12	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	466,048	63.57%	---	No	---	---
ACI 13	Perioperative Temperature Management	428,630	55.74%	---	No	---	---
ACI 14	Perioperative Use of Aspirin for Patients with Drug-Eluting Coronary Stents	598,337	99.40%	---	No	---	---
ACI 15	Surgical Safety Checklist - Applicable Safety Checks Completed Before Induction of Anesthesia	400,750	99.85%	---	No	---	---
ACI 17	Corneal Injury Diagnosed in the Post-Anesthesia Care Unit/Recovery Area After Anesthesia Care	296,003	99.99%	---	No	---	---

## MACRA – Specific Actions

- Push data capture/transmission/analysis/reporting
  - Demographics
  - Patient Centered Clinical Outcomes
  - Cost accounting
- Participate in measure design discussions
- Launch some trial balloons (e.g. Pre-op Assessment, PSH, joint replacement bundles)
  - Coordination of care experiments
  - Novel payment mechanisms
- Submit ABA Part IV or ABMS Portfolio applications
- Understand meaningful use requirements
- Negotiate against downside risks



## Questions? Contact Me!

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