



# **Hospital Quality-Based Program: Potentially Preventable Complications (PPC) Hospital-Level Report**

**Hospital:**

**NPI:**

**TPI:**

**Reporting Period:** State Fiscal Year 2019 (September 1, 2018 through August 31, 2019)

**Population:** All Medicaid and CHIP

**Effective Date:** State Fiscal Year 2021 (September 1, 2020 through August 31, 2021)

*\* This is a low-volume hospital*

## **About this report**

Senate Bill (S.B.) 7, 82nd Texas Legislature, First Called Session, 2011, and S.B. 7, 83rd Texas Legislature, Regular Session, 2013, requires HHS to implement a hospital reporting process and reimbursement reductions to hospitals based on their performance in potentially preventable readmissions (PPRs) and potentially preventable complications (PPCs). For the Medicaid Program, actual rates of these potentially preventable events (PPEs) are compared to their expected rates and a final reimbursement adjustment is determined and applied to all claims paid by HHS to each hospital. Calculation of the PPE rates are made using Medicaid/CHIP fee-for-service claims and managed care encounters.

A hospital with an actual-to-expected PPC ratio equal to or greater than 1.10 and equal to or less than 1.25 is subject to a reimbursement adjustment of -2% of the hospital's inpatient claims. An actual-to-expected PPC ratio greater than 1.25 is subject to a reimbursement adjustment of -2.5% of the hospital's inpatient claims. It is important to note that the actual-to-expected ratio is rounded to two decimal places.

HHS can provide underlying detailed data for this report to each hospital following their request (please include full name, email, phone number, NPI, TPI, and hospital name) emailed to [MCD\\_PPR\\_PPC@hpsc.state.tx.us](mailto:MCD_PPR_PPC@hpsc.state.tx.us)

**HHS Potentially Preventable Events webpage:** <https://hhs.texas.gov/about-hhs/process-improvement/medicaid-chip-quality-efficiency-improvement/potentially-preventable-events>

**Table 1 - Hospital Present on Admission (POA) Quality Check**

% Not POA for Pre-Existing Secondary Diagnosis	% POA for Secondary Diagnosis Codes	% POA for Secondary Diagnosis on Elective Surgical Cases	POA Quality Screen #1	POA Quality Screen #2	POA Quality Screen #3	POA Quality Screen #4	POA Quality Check

**Table 2 - Hospital PPC Resource Utilization**

	Total Number of Admissions	Admissions at Risk for PPC	Number of PPC Admissions	Actual PPC Weights	Expected PPC Weights	Actual-to-Expected Ratio	Total Reimbursement Reduction
Hospital							

**Table 3 - Hospital PPC Counts**

	Unique Members with PPCs	Actual PPC Counts
Hospital		

**Table 4 - State-Wide Hospital PPC Resource Utilization**

	25th Percentile	50th Percentile	90th Percentile
PPC Weights	78.1245	32.0459	9.9673

**Table 5 - State-Wide Hospital Distributions**

	25th Percentile	50th Percentile	90th Percentile
Total Number of Admissions	977	2,218	6,615
Admissions at Risk for PPC	977	2,218	6,615
Number of PPC Admissions	10	18	83
Members with PPCs	10	18	79
Actual PPC Counts	12	22	111

**Table 6 - Hospital PPC Results by PPC Group**

PPC Group	PPC Weights	Fraction of Total PPC Weights	PPC Counts	Fraction of Total PPCs
1 – Extreme Complications				
2 – Cardiovascular-Respiratory Complications				
3 – Gastrointestinal Complications				
4 – Perioperative Complications				
5 – Infectious Complications				

PPC Group	PPC Weights	Fraction of Total PPC Weights	PPC Counts	Fraction of Total PPCs
6 – Malfunctions, Reactions, etc.				
7 – Obstetrical Complications				
8 – Other Medical and Surgical Complications				

**Table 7 - Hospital PPC Results by PPC Category (Top 40 PPC Categories by PPC Weights)**

PPC Category	PPC Weights	Fraction of Total PPC Weights	PPC Counts	Fraction of Total PPCs



PPC Category	PPC Weights	Fraction of Total PPC Weights	PPC Counts	Fraction of Total PPCs