



**American Hospital
Association®**

800 10th Street, NW
Two CityCenter, Suite 400
Washington, DC 20001-4956
(202) 638-1100 Phone
www.aha.org

June 24, 2015

Patrick Conway, M.D.
Deputy Administrator for Innovation & Quality
Chief Medical Officer
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

RE: Missing Data for Critical Access Hospitals in the April 2015 Update of Hospital Compare

Dear Dr. Conway:

On behalf of the American Hospital Association's (AHA) nearly 5,000 member hospitals, health systems and other health care organizations, including more than 1,600 small and rural hospitals, I write to express our deep disappointment that the April 2015 quarterly update of the Centers for Medicare & Medicaid Services' (CMS) *Hospital Compare* website failed to include most performance data reported voluntarily by critical access hospitals (CAHs). We strongly urge CMS to update *Hospital Compare* with the missing data as soon as possible.

While CAHs are not required to participate in CMS's hospital quality reporting programs, 94 percent (or 1,252) of the 1,330 CAHs in the United States are registered to submit quality data to CMS. Many of them have sufficient volume to publicly report at least one measure on *Hospital Compare*. The fact that so many CAHs are engaged in voluntary quality reporting demonstrates their commitment to sharing information with the communities they serve, and to identifying opportunities to improve care. Moreover, many payers – including some Medicaid programs and private insurers – use *Hospital Compare* data reported by CAHs in their pay-for-performance programs. For these reasons, it is critical that CMS post voluntarily reported data in a timely fashion.

We are aware that, on June 17, CMS posted a file that includes the CAH data that were omitted from the April *Hospital Compare* update. Unfortunately, the file is not posted to *Hospital Compare* itself; rather, it is posted to another CMS website unlinked to *Hospital Compare*. Moreover, the file is in a format that is unusable to anyone without significant expertise in data analysis. The 3,154-page file does not include the names of either hospitals or measures. Instead, it includes the CMS Certification Numbers (CCN) of the hospitals and codes for the measures. This approach does not facilitate the use of the data by patients to understand their local



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hospital's quality performance, nor its use by hospitals to identify opportunities for improvement or hospitals with stronger performance that may be worthy of emulation.

For the reasons outlined above, we strongly urge CMS to update *Hospital Compare* with the missing CAH data within the next 30 days. We further urge the agency to take steps to ensure that CAH data is posted in a timely fashion in future website updates.

Thank you for your consideration of this important issue. If you have any questions, please contact me or Akin Demehin, AHA senior associate director for policy, at 202-626-2365 or ademehin@aha.org.

Sincerely,

/s/

Nancy E. Foster
Vice President, Quality and Patient Safety Policy