



Clinical Analytics Version 2019.2 Release Notes

The 2019.2 release includes a system-wide facelift and several performance enhancements, as well as over 100 new measures, sepsis cohort profile filters, and specific updates based on client feedback.

Highlights

Read further for more details about:

- » **New Look:** Updated sign-in screen, logos, colors, etc
- » **New Measures:** Over 100 new measures around palliative care, pharmacy utilization, and more.
- » **Sepsis Cohorts:** There are 5 new sepsis cohorts available in your Cohorts Profile Filter.
- » **New Physician Role:** Anesthesiologist (Principal or Secondary Px) can be used throughout the tool as any other Physician Role.

General Features

System-wide Updates

Branding Facelift: Clinical Analytics

As mentioned in the 2019.1 release, Peak is now a part of the Syntellis Performance Solutions, LLC Axiom Software Suite and referred to as Clinical Analytics. Starting with a whole new look for the sign-in page, we have been updating the style and color throughout the tool. None of these changes affect the functionality of the tool, but help align the look and feel of Clinical Analytics with the rest of the Axiom product offering as we continue to progress towards tighter integration with the overall product suite. Be watching for similar updates to Documentation in the coming months.

Performance Enhancement

As with the last couple releases, we are working hard to improve the performance of Clinical Analytics. We are seeing faster computations, faster page loading, and more efficient data loading.

Profiles

Sepsis Cohorts

There are 5 new sepsis cohorts available in the Cohorts Profile Filter when customizing your profiles.

- » Sepsis Present on Admission with a Major Procedure
- » Sepsis Present on Admission without a Major Procedure
- » Sepsis not Present on Admission with a Major Procedure
- » Sepsis not Present on Admission without a Major Procedure
- » Sepsis in Newborns

Full Cohort Definitions are available in Documentation. Please note that these cohorts are available for use as profile filters, but, unlike the other 38 cohorts currently available, are not available in the Statistical Process Control section.

New Physician Role

In the Procedures file, many clients send Anesthesiologist information for multiple procedures (not just the principal). To capture this information and make it useful in Clinical Analytics, there is now a new Physician Role called "Anes-

thesiologist (Principal or Secondary Px)," in addition to the current "Anesthesiologist" role, which can be used throughout the tool as any other Physician Role (Profile Filter, Group-By, PPE Reporting, etc).

Definition Updates

CPT© Codes

Current Procedural Terminology (CPT©) Codes and descriptions have been updated according to the latest 2019 definitions from the American Medical Association (AMA).

First Databank (FDB)

The entire FDB pharmacy table has been updated, including NDCs (National Drug Codes) and hierarchy information. These changes are reflected in the Pharmacy Analytics section, the new Pharmacy Utilization measures (see below) and in the NDC Profile Filter.

New Measures

Please see Measure Definitions in Documentation for details about any of these new measures.

Sepsis Mortality Rate

Based on the previously mentioned sepsis cohorts, there is a new measure specifically targeting the mortality rate for those patients. This measure can be added throughout Scorecards and PPE Reporting.

Failed Moderate Sedation

This measure is similar to the Reaction to Anesthesia measure and flags patients with one of the following diagnosis codes, not POA: T8852XA, T8852XD, T8852XS

Days from Readmission

Similar to the Days to Readmission measure, but aligned with Backward-looking readmission measures, this measure displays the number of days between the admission date of the current encounter and the discharge date of the previous encounter.

New Pharmacy Utilization Measures

These measures are based on NDC charges on the patient encounter. A patient is flagged if they had an NDC code in the respective First Data Bank category and the aggregated measure is the percentage of discharges with at least one related code, regardless of quantity.

- » Analgesics-Opioids
- » Analgesics-Non-Opioid
- » Analgesics-Local
- » Adjuvant Pain Medications
- » Antimicrobials-Community Acquired Pneumonia (AMX-CAP)
- » Antimicrobials-Pre-Operative Prophylaxis (AMX-PreOp)
- » Antimicrobials-Sepsis: Broad Spectrum Antibiotics per CMS accepted list (AMX-Sepsis CMS)
- » Antimicrobials-Sepsis: Broad Spectrum Antibiotics per Evidence Based Practice (AMX-Sepsis EB)
- » Anticoagulants-VTE/Stroke Prophylaxis
- » Anticoagulants-PCI
- » Antiplatelet Therapy
- » Fibrinolytics
- » Antidotes
- » ACE Inhibitors/ ARBs

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- » Diuretics
- » Statins
- » Aldosterone Inhibitors
- » Vasopressors
- » Beta Blockers - Heart Failure
- » Immunizations
- » Inhalation Therapy
- » Systemic Steroids
- » Methylxanthins

See Pharmacy Utilization Measures in Documentation for more details.

New Palliative Care Measures

There are several new Palliative Care measures available based on these additional encounter-level data from your facility:

- » Palliative Care Consult Order Date/Time
- » Palliative Care Consult Ordering Physician
- » Palliative Care Consult Date/Time
- » Palliative Care Consulting Physician

See Palliative Care Measures in Documentation for more information and a complete list of these measures.

COMPARATIVE MEASURES

Based on the time from the patient's admission to the time of the palliative care consult and the time from that consult to the patient's discharge, you can now compare the care provided to patients before and after the consult. In particular, these new measures are focused on per-day before & after differences in:

- » Total Charges
- » Total Cost
- » ICU Charges
- » ICU Cost
- » Critical Care Charges
- » Critical Care Cost
- » Pharmacy Charges
- » Pharmacy Cost
- » ICU Days

POTENTIAL EXCESS

From these per-day differences, we can estimate potential excess costs and charges for these patients to encourage earlier identification of palliative care opportunities.

- » Potential Excess Total Charges/Cost Before Palliative Consult
- » Potential Excess ICU Charges/Cost Before Palliative Consult
- » Potential Excess Critical Care Charges/Cost Before Palliative Consult
- » Potential Excess Pharmacy Charges/Cost Before Palliative Consult

OTHER NEW MEASURES

Other measures include:

- » Usage - Palliative Care Consultation
 - » Percent of discharges which received a palliative care consult

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- » % Mortality with Palliative Care
 - » Percent of encounters discharged expired which received a palliative care consult

NEW PALLIATIVE CARE PHYSICIAN ROLES

With these new measures, there are also two new Physician Roles:

- » Palliative Care Referring Physician
- » Palliative Care Consulting Physician

NEW PALLIATIVE CARE STRATIFICATION

There are several new Group-Bys for stratification of your analytics:

- » Palliative Care Referring Physician
- » Palliative Care Consulting Physician
- » Palliative Care Referring Physician Primary Specialty
- » Palliative Care Consulting Physician Primary Specialty
- » Palliative Care Referring Diagnosis
- » Palliative Care Referring Diagnosis CCS Category

NEW PALLIATIVE CARE PROFILE FILTERS

There are 4 new related Profile Filters for defining your patient population of interest:

- » Palliative Care Referring Physician
- » Palliative Care Consulting Physician
- » Palliative Care Referring Diagnosis
- » Palliative Care Referring Diagnosis CCS Category

Note that these new palliative care analytics require additional data from your facility. Please Contact Support for more information.

Cost/Charge/Days/Usage Measures

Several new measures have been added and some existing measures have been renamed for consistency across Cost, Charges, Days, and Usage measures available in Clinical Analytics:

- » Usage - Blood Administration
- » Charges - Operating Room
- » Usage - Coronary Care (formerly: Usage - CCU)
- » Usage - Therapy: Physical, Occupational, Speech (formerly: Usage - PT, OT, and Speech Therapy Use)
- » Cost - Nursery
- » Cost - Direct - Nursery
- » Cost - Indirect - Nursery
- » Charges - Nursery
- » Cost - NICU
- » Cost - Direct - NICU
- » Cost - Indirect - NICU
- » Charges - NICU
- » Days - Nursery and NICU
- » Days - Accommodation - Private
- » Days - Accommodation - Semi Private
- » Days - Accommodation - Ward

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- » Days - Accommodation - Private, Semi-Private and Ward
- » Usage - Radiology and CT Scan (formerly: Usage - Radiology Use)
- » Usage - CT Scan (formerly: Usage - CT Use)
- » Cost - CT Scan
- » Cost - Direct - CT Scan
- » Cost - Indirect - CT Scan
- » Charges - CT Scan
- » Days - Accommodation - ICU (formerly: Days - Accommodation - Intensive Care)
- » Cost - Accommodation - ICU (formerly: Cost - Intensive Care)
- » Cost - Direct - Accommodation - ICU (formerly: Cost - Direct - Intensive Care)
- » Cost - Indirect - Accommodation - ICU (formerly: Cost - Indirect - Intensive Care)
- » Charges - Accommodation - ICU (formerly: Charges - Intensive Care)

PDI & PQI Measures

Based on output from the AHRQ Grouper Software, the following PDI and PQI measures are now available in Clinical Analytics:

- » PDI-14 - Asthma Admission Rate
- » PDI-15 - Diabetes Short-term Complications Admission Rate
- » PDI-16 - Gastroenteritis Admission Rate
- » PDI-18 - Urinary Tract Infection Admission Rate
- » PDI-90 - Pediatric Quality Overall Composite
- » PDI-91 - Pediatric Quality Acute Composite
- » PDI-92 - Pediatric Quality Chronic Composite
- » PQI-01 - Diabetes Short-term Complications Admission Rate
- » PQI-03 - Diabetes Long-term Complications Admission Rate
- » PQI-05 - Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate
- » PQI-07 - Hypertension Admission Rate
- » PQI-08 - Heart Failure Admission Rate
- » PQI-11 - Bacterial Pneumonia Admission Rate
- » PQI-12 - Urinary Tract Infection Admission Rate
- » PQI-14 - Uncontrolled Diabetes Admission Rate
- » PQI-15 - Asthma in Younger Adults Admission Rate
- » PQI-16 - Lower-Extremity Amputation among Patients with Diabetes Rate
- » PQI-90 - Prevention Quality Overall Composite
- » PQI-91 - Prevention Quality Acute Composite
- » PQI-92 - Prevention Quality Chronic Composite
- » PQI-93 - Prevention Quality Diabetes Composite

PPE Reporting

Physician-Level Measure Displays

The "# Cases" Column in the Measure Analysis section does not apply to physician-level measures and will now display "N/A" to avoid confusion. Encounter-level measures will continue to display the number of cases, as expected.