



### Get With The Guidelines® Plus Quality Awards FAQ

#### What is the Get With the Guidelines<sup>®</sup> Plus Quality Award?

The Plus Quality Award is an advanced level of recognition that allows hospitals to be acknowledged for their compliance with the Quality Measures within the Get With The Guidelines program. This is an optional award that a hospital may choose to pursue if they are collecting Quality Measures and would like to be recognized for their efforts.

#### What criteria need to be met to be eligible?

- Your hospital must qualify for a **Silver or Gold** level Achievement Award.
- The Plus Award application MUST include the same patient population as is included in the Achievement Award application.
- Your hospital must be able to demonstrate at least 75% compliance for 12 consecutive months (Calendar Year) for the required number of Get With The Guidelines®-Stroke or -Heart Failure Quality Measures.
- For heart failure, select and submit four or more Quality Measures (see below).
- For stroke, select and submit five or more Quality Measures (see below).
- Please refer to the Patient Management Tool<sup>®</sup> (PMT) (Report Measure section for detailed description of each measure.
- The period of compliance being submitted must be the exact same 12month period (Calendar Year) as your Silver Achievement Award OR for the most recent year of your Gold Award. For example, if your new (or current) Achievement Award time of compliance period is for 1/1/17 – 12/31/17, then your Plus Quality Award time of compliance period must also be for 1/1/17 – 12/31/17.

#### Heart Failure Quality Measures

Select and submit four or more Quality Measures for the Plus Quality Award:

- Aldosterone Antagonist at Discharge
- ARNI at Discharge
- Hydralazine Nitrate at Discharge

- CRT-D or CRT-P Placed or Prescribed at Discharge
- ICD Counseling or ICP Placed or Prescribed at Discharge
- Pneumococcal vaccination
- Anticoagulation for Atrial Fibrillation or Atrial Flutter
- DVT Prophylaxis
- Influenza Vaccination During Flu Season
- Follow-Up Visit Within 7 Days or Less

#### Stroke Quality Measures

Select and submit five or more Quality Measures for the Stroke Plus Quality Award:

- Dysphagia Screening
- Stroke Education
- Rehabilitation Considered
- Time to Intravenous Thrombolytic Therapy
- LDL Documented
- Intensive Statin Therapy
- IV rt-PA 3.5 Hrs (Arrived by 3.5 hours TX by 4.5 hours)
- NIHSS Reported

#### What is the process for applying for the Plus Quality Award?

- Review your hospital's data for either the stroke or heart failure Quality Measures, using the same 12-month period (Calendar Year) as used for your Silver Achievement Award or the most recent 12-month period (Calendar Year) of your Gold Achievement Award.
- Generate the PMT Bar Graph Reports and determine if you have either a minimum of five measures for stroke or four measures for heart failure that each meets the 75% compliance level. The percentage may be rounded up to the first decimal (74.6%) as this conforms to PMT percentage reporting.
- All data must be submitted into PMT by 3/31 of each calendar year for you to qualify for plus award. (For example, if you anticipate an award with data from January 2017 – December 2017, all data must be accurately entered into the PMT by 3/31/2018 data deadline to be accepted for an award)

### Does our hospital need to submit the same Quality Measures each year when we apply for the Plus Award?

No, you can select and submit different quality measures each year.

### Will small hospitals be allowed to submit for an award even if they don't see 30 patients in a year (small volume exception)?

Yes, the same rules that apply for the Achievement Awards will also apply to the Plus Awards. Therefore, if your hospital does not have 30 patients within a year, you may submit for the equivalent of 12 months (Calendar Year) of patient volume.

# Will my hospital receive any additional promotional benefits for my Plus Award level (e.g., icons, press releases, special acknowledgement in USN&WR and at International Stroke Conference and Scientific Sessions)?

Yes, as a Plus Award hospital you will receive new "Plus" icon, press releases, special acknowledgement in USNWR and will be recognized at ISC and Sessions.

### What is the difference between the Gold/Silver Plus & Gold/Silver? How are they different from current awards?

Plus is an additional level of recognition noting a hospitals expanded efforts to provide quality care through administering additional evidenced-based therapies.

### If we are already meeting 85% or better in all measures what is the benefit for the Plus Program?

It indicates your hospital's commitment to quality care and provides an opportunity to promote evidence of the commitment.

### If we need 85% compliance on these same measures for a Silver Award, but only 75% for Plus, how does this make it Plus?

An analysis of Get With The Guidelines data showed that thresholds of performance for quality measures was quite low. The Plus Award promotes attention to these evidenced-based therapies at a threshold that is slightly lower to provide accessibility and motivation.

### Will I have an opportunity to know if my hospital met the 75% compliance? Who would I contact?

Hospitals can run their own reports for any of the Quality Measures and identify those that qualify. You can reach out to your Get With The Guidelines director for assistance in interpreting your data and if your hospital meet the requirements set forth.

## What is the time frame? Is it monthly at 75% for 1 year? Or is it quarterly? Or is it averaged over a year?

It is the average over the 12-month period — the same 12-month period for your Silver award or the same 12-month period for the most current year of your Gold award.

### Does each measure have to be at least 75% every month or an average over the 12 month?

Like our other measures, an average over 12 months.

#### What is the due date for the Plus Quality Award?

You submit same time of compliance as you submit your Gold or Silver Award application.

#### With your updates, will our abstraction vendors be able to upload to your database?

That is a vendor decision. Many of them choose to only upload the Performance Measures. You may contact your vendor to request that they consider this additional functionality. Otherwise you are free to back fill the PMT with the necessary elements to allow for Quality Measures to be run.

### How can you ensure that facilities are submitting reliable data when there is no validation process by outside reviewers?

The Get With The Guidelines awards program uses both an internal and external review process for each of hospital level data; however, this does not include rigorous confirmation of actual results. Moreover, we expect that the healthcare community and its leaders function with a high level of integrity rendering it unnecessary to invest resources in such a validation process.

#### Will our hospital receive two award certificates, one for Achievement and one for Plus?

No, once your hospital meets the Plus level criteria you will be awarded one certificate with a special "Plus" icon affixed and your certificate will read "Silver (or Gold) Plus Award Hospital."

#### Who do I contact if I have further questions?

For more information contact your Get With The Guidelines Quality and Systems director.