

REQUEST:

What data/studies exist to demonstrate that federal health quality reporting programs such as PQRI and PQRS have actually resulted in demonstrable improvements in patient care outcomes and what are some of the results of those studies?

RESPONSE:

Institute for Health Policy Researchers conducted literature searches on PubMed, Cochrane and Google Scholar and were able to retrieve seven studies discussing the potential impact of health quality reporting programs on patient outcomes and quality of care. The findings were mostly positive, highlighting significant reductions in readmission rates, lengths of stay and non-emergent ED use^{1,2}. Moreover, compliance with PQRS measures was found to be correlated with significantly improved patient outcomes and lower costs^{2,3}. One study looked at specific PQRS measures for certain surgical procedures and found that higher rates of postoperative complications and 30-day and 1-year mortality were significantly higher when the measures were not met⁴. Another study highlighted the importance of quality improvement education in improving gastroenterologists' performance⁵. However, quality reporting systems did not always have significant effects on patient outcomes and cost, as suggested by Ryan et al., who evaluated a public quality reporting and pay-for-performance program in 2009⁶. As explained by Dowd et al., PQRS reporting alone might not be sufficient to solve the attribution problem inherent in traditional fee-for-service Medicare. Nevertheless, as PQRS participation increases, it could help improve both attribution and information regarding the quality of health care services delivered to Medicare beneficiaries⁷.

Additional information on these studies is presented in the Appendix: Table 1, and the full text PDFs are available upon request. References are listed in the appendix.

We retrieved, detail and list 16 additional studies indirectly addressing the question (Appendix: Table 2). Some of the studies described specific PQRS measures, others provided a general view on the role of financial incentives or assessed the physicians' perspectives on such initiatives.