

Aetna Institutes of Quality[®] Cardiac Care Facilities

Program Requirements 2009 Designations

A facility that meets Aetna's designation requirements for clinical quality, value and access for cardiac care may be selected for our Institutes of Quality (IOQ) Cardiac Care network. If a facility meets all minimum program requirements, Aetna evaluates the answers provided by the facility in its response to our survey of information, and reviews other publicly available data as well as Aetna internal data.

I. Requirements for consideration

Volume:

Aetna Institutes of Quality Cardiac Care facilities must perform at least 400 percutaneous coronary interventions (PCI) (also referred to as angioplasty or stent procedures) and 125 open heart surgery cases (for example, includes coronary artery bypass graft surgery and heart valve replacement surgery) in the most recent 12 calendar months.

Participating status of facility and physicians delivering cardiac care:

Facility/facilities must:

1. Be credentialed by Aetna, participate in Aetna's provider network for all products offered in the market, and be accredited by appropriate external entities.
2. Provide on-site availability (seven days a week) of specialist physicians (e.g., cardiologists, cardiovascular surgeons, anesthesiologists) performing cardiac care, participating in Aetna's network for all products offered in the market. Also, among these specialists, at least seventy-five percent (75%) must be board certified specialists in specialties treating primarily cardiac disease.
3. Have availability of emergency response teams 24 hours a day, 7 days a week which includes an Advanced Cardiac Life Support (ACLS) certified physician; policies and specialists available to perform urgent and emergency primary PCI; and provide cardiac surgery. The emergency department must have on-call response teams available to perform urgent and emergency invasive cardiovascular procedures.
4. Provide daily rounds to all cardiac patients in intensive care unit -- by Intensivists, Pulmonologists, Cardiologists, Cardiovascular Surgeons or Internists.
5. Provide a clinical pharmacist daily medical review for cardiac patients in intensive care units.

Scope of cardiac and related services:

1. Facility must provide a full range of adult cardiac services including: emergency care, medical care of cardiac conditions (for example, heart failure, acute myocardial infarction), percutaneous coronary interventions (PCI), open heart surgery, care of heart rhythm disorders and placement of implantable cardioverter defibrillator for the most recent 12 consecutive calendar months.
2. The following clinical services must be available for consultation and daily primary care: anesthesiology, pulmonology, radiology, infectious disease,

- psychology/behavioral health, intensive care unit, specialized equipment, nutrition counseling/education, pharmacist.
3. Facility must make appropriate referrals to structured smoking cessation programs and cardiac rehabilitation programs at the facility, or an appropriate facility.

Quality and clinical outcomes and reporting:

1. Within the most recent 12 calendar months of data available, the facility’s mortality and complication rates for selected conditions and procedures must be less than or equal to the minimums established, based on evidence available in the literature.
2. Facility must have a quality improvement program with initiatives focused on continuously measuring and improving cardiac care to include an automated data collection system and/or personnel in place.
3. Facility must perform patient satisfaction surveys and responsive improvement activities.
4. Facility must report to The Leapfrog Group, or an equivalent patient safety and quality initiative.
5. Facility must report cardiovascular case information to external registries for cardiology procedures established by American College of Cardiology and the Society of Thoracic Surgeons, or equivalent state or regional reporting and quality improvement registry.

II. Evaluation criteria in addition to required elements

If a facility meets all requirements under Section I -- Requirements for consideration -- Aetna evaluates and scores the facility’s remaining responses on the Request for Information (RFI) survey submission according to the criteria set forth below.

Category	Description	Criteria
Structure		
Accreditation, certification, and recognition	Specialist physicians credentialed for Implantable Cardioverter Defibrillator (ICD). Facility certification for disease-specific care by The Joint Commission. Facility accreditation by the Society of Chest Pain Centers -- www.scpccp.org/dnn/ . Facility cardiac imaging and nuclear cardiac imaging services accredited. Facility rehabilitation program accredited. Facility is recognized by the Magnet Nursing Services Recognition Program for Excellence in Nursing Service -- www.nursecredentialing.org .	ICD standards set by Implantation Criteria Heart Rhythm Society 2004 Clinical Competency Statement -- www.abms.org Certification for myocardial infarction and/or heart failure. Imaging accreditation by either the American College of Radiology or Intersocietal Accreditation Commission. Certified by the American Association of Cardiovascular and Pulmonary Rehabilitation.

Category	Description	Criteria
	Society of Thoracic Surgeons (STS) STAR Rating (Quality Aggregate Rating) Score -- www.sts.org	
Patient safety	<p>Submission and publicly report to The Leapfrog Group Hospital Survey on The Leapfrog Group's website. (An alternative equivalent, publicly reported measurement and scoring system will be considered.) www.leapfroggroup.org</p> <p>Voluntarily reports to the Joint Commission on Sentinel Events -- www.jointcommission.org/SentinelEvents/</p>	Scores level of progress on patient safety measures, computerized physician order entry and on treatment safety for cardiovascular services.
Quality improvement programs	External in specific national programs to improve cardiac care.	Participation in Institutes for Healthcare Improvement (IHI), Centers for Medicare & Medicaid Services (CMS)/Premier Hospital Quality Incentive Demonstration (HQID) Project -- www.ihl.org/IHI/Programs/Campaign www.qualitydemo.com
Behavioral health	Depression screening	Formal process or tool to screen cardiac patients.
Outcomes		
Mortality (death) rates	In hospital and 30 days after procedure or stay for certain cardiac conditions, including acute myocardial infarction, heart failure, angioplasty, coronary artery bypass graft surgery and heart valve surgeries.	Rates better than published national averages.
Complications and readmissions	<p>Overall and specific complication rates following cardiac procedures during stay and up to 30 days after procedures.</p> <p>Risk adjusted readmissions to the hospital after cardiac care.</p>	<p>Complications after angioplasty -- diagnostic cardiac catheterization include: blood vessel complication.</p> <p>Complications after open heart surgeries include: need to return to the operating room, kidney problems, stroke, wound infection, and the need to stay on a ventilator machine for a prolonged time.</p>
Success of procedures	<p>Percentage of successful angioplasty procedures where the blood vessels have improved blood flow and there were no complications after the procedure (death, heart attack, or emergency surgery) -- www.ncdr.com.</p> <p>Incidence of patients undergoing diagnostic heart catheterizations, who are found to have no or less severe disease than expected.</p>	Meet benchmarks.

Category	Description	Criteria
Process		
Adherence to evidence-based guidelines: Health organizations	<p>Programs developed by the American College of Cardiology and the American Heart Association, which encourage adherence to evidence based guidelines related to cardiac care:</p> <ul style="list-style-type: none"> - Get With the Guidelines Program for Heart Failure - Get With the Guidelines Program for Coronary Artery Disease - D2B: an Alliance for Quality™ (Door to Balloon) <p>National Quality Forum (NQF) approved measures around specific medication use during and after hospitalization and advice and counseling on smoking cessation -- www.hospitalcompare.hhs.gov and www.qualityforum.org.</p>	<p>Recognition of participation in programs: NQF measures for Acute Myocardial Infarction (AMI) and Coronary Artery Disease (CAD) Care, Heart Failure (HF).</p> <p>Minimum requirements in place for each measure with enhanced score for higher percent.</p> <p>If facility does not report to CMS but can report measures, those are considered.</p>
Adherence to evidence-based guidelines: Physician specialty groups	<p>Timely completion of cardiac studies for patients who have heart attacks.</p> <p>Percentage of patients undergoing angioplasty with stents or coronary artery bypass graft surgery who received appropriate medications during hospitalization and upon discharge.</p> <p>Percentage of patients having coronary artery bypass graft surgery where certain techniques are used.</p>	<p>Percentage of patients with heart attacks meeting certain specifications who are taken to the heart catheterization study lab within 90 minutes.</p> <p>Medications recommended by medical specialty groups.</p>
Access and Cost Effectiveness		
Overall network access and capacity	Evaluation of Aetna members' current utilization, cardiac care needs and geographic access as measured by average travel distance to emergency and non-emergency health care services in Aetna's participating network.	Facilities that are more geographically accessible to, and are utilized more by Aetna members are given additional consideration.
Cost effectiveness	Evaluation of cost per risk-adjusted case based upon Aetna data. This data uses the last 24 months of Aetna cost-data and is adjusted to take into consideration relevant risks such as age, sex and other conditions of the patients using a product known as Symmetry Episode Risk Groups® .	If one facility is more cost-effective than other comparable facilities, the more cost-effective facility will be selected. Depending on network access, capacity and other competitive needs, Aetna may designate other facilities that have met the other evaluation criteria.

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