

CMS hospital star ratings offer limited measure of surgical quality

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Although the Centers for Medicare & Medicaid Services (CMS) star ratings are associated with adverse outcomes after surgery, there is wide variation in outcomes within each star rating group, according to a study published online June 18 in *JAMA Surgery*.

Adrian Diaz, M.D., M.P.H., from The Ohio State University in



Columbus, and colleagues examined the CMS hospital star ratings and hospital surgical quality for Medicare beneficiaries undergoing colectomy, coronary artery bypass graft, cholecystectomy, appendectomy, and incisional hernia repair. Data were included for 1,898,829 patients at 3,240 hospitals with a CMS star rating.

The researchers found that the risk- and reliability-adjusted 30-day mortality rate decreased from 6.80 to 4.93 percent in one- and five-star hospitals, respectively (adjusted odds ratio, 1.86).

Across all hospitals, wide variation was seen in the rates of hospital mortality, serious complications, and readmission (variation, 1.89, 1.97, and 1.27 percent, respectively). After stratifying hospitals by their star rating, similar variation patterns were seen within star-rating groups for 30-day mortality (variation, 1.91, 1.86, 1.84, 1.76, and 1.79 percent for one-, two-, three-, four-, and five-star, respectively). For serious complications and readmissions, similar patterns were seen.

"These findings highlight the limitations of the CMS star rating system as a measure of <u>surgical quality</u> and should be a call for continued improvement of publicly reported hospital grade measures," the authors write.

More information: Adrian Diaz et al, Variation in Postoperative Outcomes Across Federally Designated Hospital Star Ratings. *JAMA Surgery* (2024) DOI: 10.1001/jamasurg.2024.1582

Anoosha Moturu et al, The American College of Surgeons Approach to Public Reporting, *JAMA Surgery* (2024). DOI: 10.1001/jamasurg.2024.1591

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