

Using harm-based weights for the AHRQ Patient Safety for Selected Indicators composite (PSI-90): does it affect assessment of hospital performance and financial penalties in Veterans Health Administration hospitals?

September 1, 2018

Chen Q, Rosen AK, Borzecki A, et al. Using Harm-Based Weights for the AHRQ Patient Safety for Selected Indicators Composite (PSI-90): Does It Affect Assessment of Hospital Performance and Financial Penalties in Veterans Health Administration Hospitals? *Health Serv Res.* 2016;51(6):2140-2157.

doi:10.1111/1475-6773.12596.

<https://psnet.ahrq.gov/issue/using-harm-based-weights-ahrq-patient-safety-selected-indicators-composite-psi-90-does-it>

The AHRQ [Patient Safety Indicators](#) (PSIs) use hospitals' administrative data to measure quality and carry financial consequences for hospitals as part of pay-for-performance initiatives. [Prior research](#) has raised concerns about the [validity](#) of PSIs compared with directly using clinical data to identify safety events. AHRQ recently restructured PSI-90 (a composite measure containing multiple distinct PSIs) from volume-based to harm-based weighting. Using data from 132 Veterans Health Administration hospitals, this retrospective study compared hospital performance using the previous PSI-90 with performance under the redesigned measure. Although there was strong association between the volume-based and harm-based PSI-90 measures, use of the harm-based version had a significant impact on pay-for-performance because of changes in the weights of the component measures. Approximately 15% of hospitals in the study would face changes in financial penalties under the [Hospital-Acquired Condition Reduction Program](#) when using the new PSI-90. A past [PSNet perspective](#) discussed the impact of pay-for-performance.