University of Wisconsin
SCHOOL OF MEDICINE
AND PUBLIC HEALTH

Department of Pediatrics

January 24, 2018

Mr. Ben Harder
Chief of Health Analysis and Managing Editor
U.S. News and World Report
1050 Thomas Jefferson Street, N.W.
Washington, D.C. 20007-3837

Dear Mr. Harder:

Thank you for contacting us about your concerns related to the data submitted by the Pediatric Urology Program of the American Family Children's Hospital (AFCH) with last year's survey. We take this concern extremely seriously and are grateful for the opportunity to respond. We value the annual *U.S. News* survey process and collectively see the *U.S. News* Survey of Best Children's Hospitals as an essential component of our overall quality and programmatic improvement process. Every year, we dedicate over 800 hours of data analyst, quality analyst and physician lead time between December and March to completion of the survey. We use the metrics included in the survey to advocate for new programs or to improve existing programs during the rest of the year – it has become core to our quality journey. Finally, we have enjoyed a productive and helpful relationship with RTI and found them to be very responsive to our queries. We continue to strive for the most accurate data to reflect the high quality work we believe we are doing here.

Recently we had an anonymous complaint reflecting your concerns, which prompted us to examine our Urology data and check the processes used to generate the data. We had already planned a meeting with the Urology Department leadership to review the numbers for the coming year's survey since we had noticed a discrepancy between what was entered last year and what we have for this year, without a significant change in volume that might otherwise account for those differences. We believe this is due to a flaw in our final data checking/sign-off process, which we have rectified with this year's process as delineated below.

As we've grown with our electronic medical record, EPIC, we have struggled with getting accurate data reports carved out for AFCH (pediatric cases) apart from the overall University of Wisconsin Healthcare system. Based first on ICD-9 (now ICD-10) coding data gleaned from our billing information, we had a significant issue, particularly for outpatient clinic and surgical data. For instance, a number of years ago we found that our surgeon(s) had more accurate case logs than our EPIC data warehouse queries discovered, so we implemented a "final check" by our physician leads before submission of the survey to leadership for approval and then to RTI. Concurrently, we petitioned senior leadership and obtained permission to set up a separate data warehouse for AFCH specifically for the purposes of completing the *U.S. News* survey. These data would serve as the gold standard if there were any perceived discrepancies. However, we never discontinued the physician lead "final check," believing that these lead physicians might have information the data warehouse failed to retrieve concomitant with our growth in programs and volume. In hindsight, only Urology leadership altered the "final check" numbers on last year's survey.

After the anonymous complaint last month, we examined this year's Pediatric Urology data and the physician lead "final check" and found that there were cases in excess of what our AFCH data warehouse provided. The data analyst questioned the physician lead at the time but was told he believed his numbers were more accurate. She questioned the administrative lead for the Urology Department, who concurred with the physician. In response to this experience, we have informed all the physician leads that if they have concerns about the warehouse data provided to AFCH, they need to inform me. In addition, they must provide a case

H4/442 Clinical Science Center
608/263-8558

600 Highland Avenue

Madison, WI 53792-4108
FAX 608/263-0722

log complete with dates, times and medical record numbers so a manual chart review can be performed in time for the submission deadline in order to verify the data. Physician leads were also told that any department that is not willing to comply would not be permitted to submit data to *U.S. News*.

We take this issue extremely seriously and do not want to appear that we have gamed the system for a better score. We are a medium-sized children's hospital undergoing rapid growth in our clinical programs and in our electronic health record data reporting. We strive at every turn to insure that our systems are optimized and accurate. This issue has given us insight into our processes and it has been remedied. We humbly and apologetically request that our data and scoring for Urology in last year's survey be removed.

We appreciate the opportunity to respond to this inquiry.

Sincerely,

Ellen R Wald

Ellen R. Wald, M.D.
Alfred Dorrance Daniels Professor on Diseases of Children
Chair, Department of Pediatrics
School of Medicine and Public Health