CMS Sep-1/Sepsis Updates - 2019

Reminder: CMS SEP-1 Requirements

Required Action	Severe Sepsis		Septic Shock	
	3-Hr Bundle	6-Hr Bundle	3-Hr Bundle	6-Hr Bundle
Initial Lactate Collection	Yes	Must be completed within 3-hrs of Severe Sepsis Presentation		
Blood Culture Collection	Yes			
Initial Antibiotic Started	Yes			
Repeat Lactate Collection (if Initial Lactate is > 2)	N/A	Yes	Yes Completed within 6-hrs of Severe Sepsis presentation	
30 mL/kg Crystalloid Fluids Started	N/A	N/A	Yes	Completed within 3-hrs of initial hypotension and/or septic shock
Vasopressor Given (if hypotension persists)	N/A	N/A	Completed	Yes
Repeat Volume Status Assessment	N/A	N/A	within 6-hrs of septic shock	Yes

Sepsis Definitions (Ever Changing.....)

	ESTABLISHED DEFINITIONS (used by CMS)	SEPSIS-3 DEFINITIONS	SSC GUIDELINES
SEPSIS	Presumed/known infection + \geq 2 systemic inflammatory response syndrome criteria	≥2 SOFA criteria (present or increased) Includes: hypotension + normal lactate (shock)	Sepsis = severe sepsis
SEVERE SEPSIS	Sepsis + end organ dysfunction, lactate >4 mmol/L	Not a category	"Sepsis" = established severe sepsis definition
SEPTIC SHOCK	Sepsis + refractory hypotension (± lactate)	Vasopressors and lactate >2 mmol/L	Sepsis + refractory hypotension (± lactate)
MORTALITY RATIO = OBSERVED MORTALITY EXPECTED MORTALITY	Sepsis = low acuity Observed mortality low Expected mortality low	Sepsis = higher acuity Observed mortality higher Expected mortality low	NA

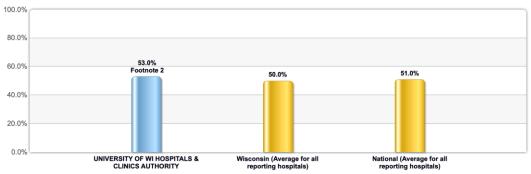
• SEP-1 and 'Sepsis-3'

• **'Sepsis 3'definition: CMS** will **NOT** be using or transitioning to the new Sep-3 definitions at this point due to "significant" lack of evidence

CMS SEP-1 Reporting

- Public Reporting
 - o SEP-1 overall hospital performance began being publicly reported with the July 2018 Hospital Compare release
 - o Beginning in July, there will be the overall measure + breakdown by 3 and 6 hour bundle compliance





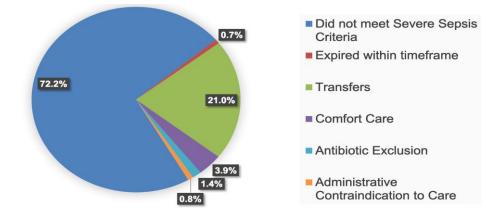
For this measure, the rate for the top 10% of hospitals was 76%.



Miscellaneous:

• Lactate/Key Reminders

- Prior to January 2019, for "Initial Lactate" data element, the lactate drawn closest to severe sepsis presentation time (SSPT). Beginning in January, use highest level drawn before severe sepsis presentation time (6-hours prior to 3-hours s/p severe sepsis)
- Other Acute Cause: If medical record=source of the condition is NOT an infection and NOT caused by an infection, the SIRS criteria or sign of organ dysfunction should not be used—i.e. physician documented "AKI (acute cause) due to dehydration (source)" or Lactate of 4.3 d/t Seizure (acute cause) post brain injury (source)
- IBW:
- Exceptions



Note: Data from January 2017–December 2017 (444,489 total exclusions for cases)