

Digging Deeper Into the Data: How to Access and Interpret QualityNet Reports

Karen VanBourgondien, RN, BSN Education Coordinator HSAG

April 15, 2015

May 1, 2015, is the next deadline for Clinical Data and Population and Sampling data submissions from Q4 2014 (October 1– December 31, 2014). This will be the last quarter that OP-6 and OP-7 will be reported.

Save The Date

- The next Hospital Outpatient Quality Reporting (OQR) webinar will be May 20, 2015.
- The presentation will present data reported for the Hospital OQR Program and how to utilize this data for quality improvement within your facility.
- Announcements about upcoming webinars will be sent via the Hospital OQR ListServe.



Learning Objectives

At the conclusion of the program, attendees will be able to:

- · Identify where to locate the most commonly used Hospital OQR reports on QualityNet.
- · Describe the most commonly used Hospital OQR reports.
- Understand the meaning and value of the QualityNet reports.



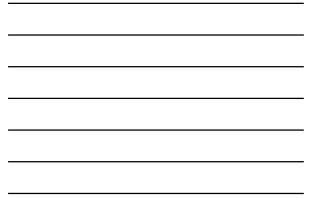


QualityNet reports and how can they

Report Categories

- Annual Payment Update (APU)
- Validation
- Feedback
- Public Reporting

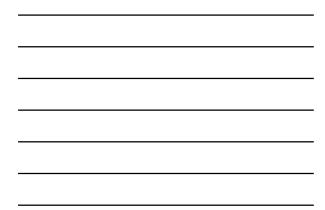
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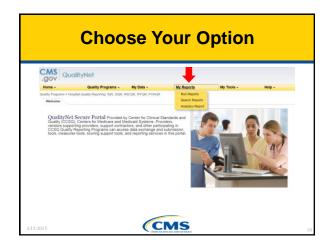


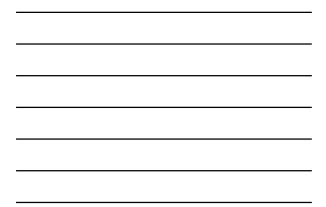






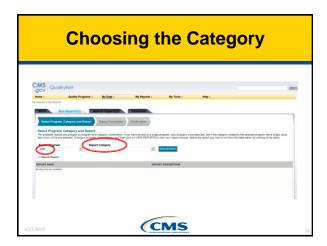






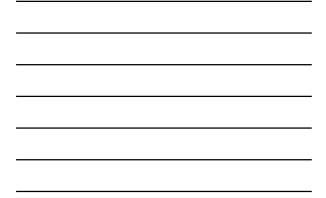




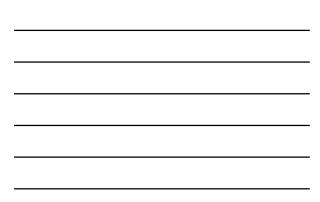




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Report Category: APU Reports

- Claims Detail Report: Identifies claims in final action status in the CDAC.
- Confidence Interval Report: Displays the confidence interval reliability result for APU.
- Provider Participation Report: Displays a summary of requirements data for participation in the Hospital OQR Program.

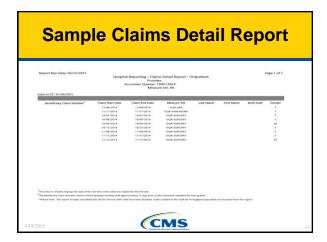


Claims Detail

Purpose:

- Provides users with the ability to monitor claims submitted in final action status.
- Includes only Medicare Fee-for-Service claims that have been finalized.
- Excludes ED-Throughput claims.





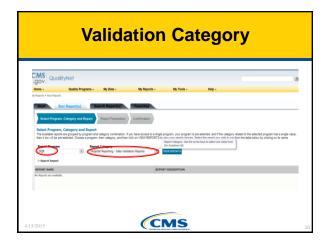


Purpose:

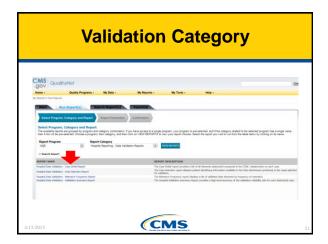
- Allows hospitals and their vendors to monitor their compliance with program requirements.
- Displays summary information of cases accepted into the CDAC.
- Updated nightly with all data submitted and successfully processed the previous day.

Sam	ole P		vider Pa Report	artic	ipatio
Report Run Dutic 03/04/2015 Subr ID: Produce ID: Provider Opt. Albit QuarkAt Amonstrutor: Yes		Hospital Re	porting - Provider Participation Report - Output Prement Your: 2016		Page 1 of 2 em Sepret Date: (1/12/08/7 spation Date: (4/1/19/2
Completed Structural Measures: No Selected for Clinical Measure Validation: Encounter Time Period	No Outpatient Population ¹	Sample ¹	Total Cares Accepted by Submission Deadline ²	Total Medicare Claims ³	Maximum Encounter Date from Claims ⁴
Q3 2014					
OQR-AME	3			2	09/11/2014
OQ8-CP	9	9		5	09/24/2014 09/20/2014
OQR-ED				512	
OQE-ININ MGMT	30	30			62/21/2014 (9/98/2014
OQ8-SURGERY	13	13			09/26/2014
Q4.2514					
OQE-AMR OQE-CP				1	11/14/2014
008-09				368	12/12/2014
				5	11/00/2014
OQR-ED COR-RIEN MGMT					11/16/2014
OQR-PRIN MGMT					11/25/2014
OQE-ININ MGMT OQE-STN				:	











Report Category: Data Validation Reports

- Case Detail Report: Compares the hospital abstraction to the CDAC re-abstraction results.
- Case Selection Report: Displays a detailed list of the cases that were selected for hospital validation for a particular quarter.
- Mismatch Frequency Report: Lists the validated data elements by frequency of mismatch.
- Validation Summary Report: Compares the hospital abstraction data elements and original measure outcomes to the adjudicated record data elements and adjudicated measure outcomes.

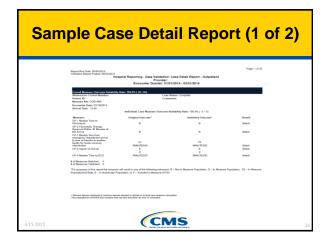


Case Detail

Purpose:

- Compares the hospital abstraction data elements to the CDAC results.
- Provides a list of all elements abstracted on each case.
- Grouped primarily by Provider ID, then by Encounter Time Frame, then by Abstraction Control Number.







San	nple Cas	se Deta	il Repo	ort (2 of	2)
	Report Run Date: 03/17/2015 Vabiation Report Posted: 03/16/2015			Page: 3 of 25	
	н	ospital Reporting - Data Validation Provider			
		Encounter Quarter: 04			
	Overall Measure Outcome Reliability		Status: Complete		
	Parient ID: Measure Set: COB.FD	Com	ments:		
	Encounter Date: 04/13/2014				
	Arrival Time: 22.49	Individual Case Measure Outcome	Builden Barry Black (1 / 7)		
	Manner				
	OP. 38a Median Time from ED	Original Outcome*	Validated Outcome'	Result	
	Arrival to ED Departure for Discharged ED Patients -		141	\frown	
	Overall Rate OP-20 Door to Diagnostic	Y	MINUTES/D1	Mamatch	
	Evaluation by a Qualified Medical Personnel	31 MINUTESID	31 MINUTESID	Matsh	
	# of Measures Matched: 1 # of Measures Validated: 2				
		re will result in one of the following outcome Population, or Y – Included in Measure (UTE	s: B – Not in Measure Population, D – In Neas I)	ure Population, D2 - In Measure	
	 Exercut Some digitized in both text de - Any educational comment that contains to 	obe element à utilizar in al least one reveaux ou di nel fort describes an entr an monato.			
4/15/2015		(CN	15		25



Case Selection Purpose: • Displays a detailed list of the cases that were selected for hospital validation for a particular quarter. • Sorted primarily by Provider ID, then by Measure Set within the Provider.

		5	Hosp	ital Reporti	ng - Data Valid	ation: Case Selection Rep	ort - Outpatient		Page 1 of
						ovider:			
	_	_			Encounter Quart	er: 07/01/2014 - 09/30/201-	+		
atient Identifier		DOB	Encounter Date		Measure Set		Medical Record Request Date		
abent spentitier	Name	DOB	Encounter Date	Arrival Table	Measure Set	Abstraction Control Number	Medical Record Request Date	Due to CDAC by	Record Received
1199434			/2014	02.44	OQR-8D	502A0003	19-708-15	05-APR-15	*
1201180			/2014	39.47	008-60	502A0003	19-768-15	05-APR-15	
1198427			/2014	07:06	OQR-ED	502A0001	19-FEB-15	05-APR-15	
1200168			/2014	13:57	OQR-ED	502A0003	19-708-15	05-APE-15	
1199156			/2014	11:28	OQR-ED	502A0002	19-FEB-15	05-APR-15	N
1199998			/2014	19:56	OQR-ED	\$02A0001	19-FEB-15	05-APR-15	
1199395			/2014	11:08	OQR-ED	502A0003	19-769-15	05-APR-15	
1198578			/2014	20:08	OQR-PAIN MGMT	502A0003	15-768-15	05-APR-15	N
1200350			/2014	12:41	OQR-PAIN MGMT	502A0003	19-708-15	05-APE-15	N
1196623			/2014	10.24	OQR-PAIN MGMT	\$02A0003	25-FEB-15	05-APR-15	N
1199140			/2014	21:05	OQR-PAIN MGMT	502A0001	19-768-15	05-APR-15	
1201466			/2014	18.05	OQR-PAIN MGMT	502A0003	19-788-15	05-APR-15	*



	reet	back Re	ports	
2446				
QualityNe	t			12
Home - Or	ality Programs - My Data -	My Reports - My Tools -	Help -	
ly Reports > Run Reports				
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then it too will be pre-selecter	 Choose a program, then category, and the 	I. If you have access to a single program, your program is pre- en click on VIEW REPORTS to view unit remote choices. Sala Report Cotegory. Use the arrow the demose bit	of the remost unit with to run from the table below by click	em has a single value, ing on its name.
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> Search Report				
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Hospital Reporting: Feedback Reports

Two sets of Reports:

- The first set displays feedback and measure information on files that have been submitted to the CDAC.
- The second, Vendor Feedback Reports, displays hospital performance information on select quality measures for the clinical topics.



Report Category: Feedback Reports (1 of 5)

- Case Status Summary: Displays summary case submission status information for the CDAC, such as the number of cases submitted, accepted, and rejected.
- Facility, State, and National: Provides data, summarizes, and compares the data of the facility at the state and national level per quarter.



Report Category: Feedback Reports (2 of 5)

 Measure Status by Case Report: Detailed report of individual cases, which includes measure inclusion status and reason for exclusion for each case (will have a denominator and numerator).

CMS

Report Category: Feedback Reports (3 of 5)

- Measure Status by Category: Provides a summary of counts per measure that are accepted into the CDAC per facility.
- Population Submission: Displays information regarding the submission of population and sampling data.



Report Category: Feedback Reports (4 of 5)

- Population and Sampling Summary: Provides a summary of the population and sampling data for cases for Medicare and non-Medicare patients by quarter, measure set, and provider.
- Potential Duplicate Records: Identifies potential duplicate records submitted to the warehouse.



Report Category: Feedback Reports (5 of 5)

- Submission Detail: Displays detailed information of selected uploaded data grouped by provider.
- Submission Summary: Provides a summary of information of selected uploaded data.
- Vendors Authorized to Upload Data: Displays vendors authorized by a hospital to submit hospital data on its behalf.

CMS

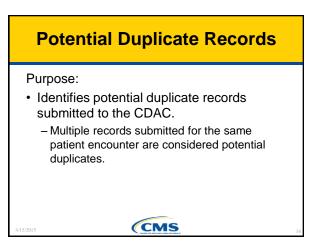
Case Status Summary

Purpose:

- Displays a total of unique cases submitted to the CDAC.
- Displayed by Measure Set for the specified encounter period.
- Includes the number of cases submitted, accepted, and rejected.



Report Run Date: 11/11/2 He	ospital Reporting - Case Status Su Provider:	mmary Report - Outpatie	Page 1 o nt
	Encounter Quarter. Measure Set: OQR Submitter:	-SURGERY	
Measure Set	Unique Cases Submitted ¹	Cases Accepted ²	Cases Rejected ³
OQR-SURGERY	192	192	0



Sample Potential Duplicate Records Report

Encounter Date	Time	Measure Set	Patient ID		Sex	Birth Date	Postal Code	Upload Date	File Name	Upload User Name	Upload Batch ID	Import Provider ID	Matchir ID
Provider ID 09/10/2013	14.28	OQR-AM	×				32433	01/25/2014	100081_7943_20130910AMI_52471.xml		613	100	353
09/19/2013	14.28	OQR-AM					32433	01/28/2014	100081_7543_20130915AMI_13868.xml		622	100	353



Submission Detail

Purpose:

- Provides information on the data submitted through the CDAC.
- Displays detailed information of selected uploaded data grouped by provider.
- Displays error codes.



Sample Submission Detail Report

	te: 03/05/2015					Page 1 of 11
		Hospi	ital Reporting - Submission	n Detail Report - Outp	atient	
			Provider: Encounter Quarter:07/0			
			Submitter			
			Measure 5			
			File Stats			
			Action Co Message To			
			Message ()	Abe: VII		
Batch ID	Encounter	r Date and Time	Upload Date	Action Code	File Hame	File Status
Manual Set OOM	10					
Patient 4D						
97388		1/2014 10:36	01/16/2015	Ast	100128_101082565.xmi	Reported
Menage Count: 1	Message: 15965	Critical Error: The sub	pression deadline for this encourt	ver time period has passed. Up	dates are no longer being accepted to	the OQRClasscal Warehou
36385	07/05	1/2014 20:36	81/20/2015	Au513	100128_101082545.aml	Accepted
	Message 37215				ent did not have a principal diagnosis o	
	Message: 37225				Incharged to an Acute Care Facility - Ge	ment legation Care or
Message Count: 2		Acute Care Facility - 5	Department of Defense or Veterar	d's Administration		
Patient ED:						
57368		1/2014 23:04	01/16/2015	Add	100128_10108375A.and	Rejected
Message Count: 1	Message 15965	Critical Error: The sub	emission deadline for this encourt	Jet time period has pened. Up	olates are no longer being accepted to	the OQRClinical Warehow
Managa Count: 1 98385	07/05	1/2014 23:04	91/20/2015	Ast	100128_101063758.aml	Accepted
	Message 37215	OF-18c EXCLUDED -	ICD-9-CM Principal Diagnosis Cor	to (PRIMIDIC) andicates the path	ent did not have a principal diagnosis o	of overstat discorder
	Message: 37225			relations the matient was not of	ischarged to an Acute Care Facility - Ge	evenal Ingutient Care or
Manager Court 2	Missign 37275	Acute Care Facility - 0	Department of Defense or Veterar	n's Administration		
Meniago Court: 2 Faturet Eb	Minings 1725	Acute Care Facility - 1	Department of Defense or Veteral	n's Administration		
	87.93	Acute Care Fecility - 1 1/2014 05:42	Department of Defense or Velerar 81/16/2015	en's Administration Adul	100128_101185494.amt	Rejected
Patient Kh		Acute Care Fecility - 1 1/2014 05:42	Department of Defense or Velerar 81/16/2015	en's Administration Adul	100128_101385494.and dates are no longer being accepted to	

Submission Summary

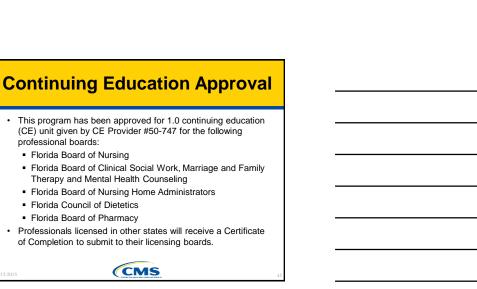
Purpose:

- Provides information on the data submitted to the CDAC.
- Displays counts of accepted and rejected cases and counts of error codes.

Subm	issior	<mark>າ Sum</mark>	nmary	/ Repo	ort
Report Run Date: 02/27/2015	Hospital R	eporting - Submission Su Provider: Encounter Quarter: 07/01 Submitter: Measure Se File Status:	/2014-09/30/2014 E All All	atient	
	Provider ID	Sort By: Mean Provider Name	File Status	File Count	
	Measure Set OQII-AMI	Provincer Name	a ne status	row could	
			Accepted		
	Measure Set OQE-AMI has 97 Provider ID Measure Set: OOR-CP	Accepted and 0 Rejected Provider Name	File Status	File Count	
			Accepted	14	
	Measure Set OQR-CP has 14 / Provider ID Measure Set: OOR-CD	Provider Name	File Status	File Count	
	and a set of the set		Accepted	116	
	Measure Set OQR-ED has 116				
	Provider ID Measure Set: OOR-PAIN M	Provider Name	File Status	File Count	
	Memore set OQR-PAIN M		Accepted	44	
		T has 48 Accepted and 0 Rejecte	4		
	Provider ID	Provider Name	File Status	File Count	
	Measure Set: OQR-STK		Accepted		
	Measure Set OQR-STK has 9 A	compted and 0 Rejected			
	Provider ID	Provider Name	File Status	File Count	
Airlighe arror roiden can be associate or additional detail, review the Horge	d with a single file. Ital Reporting – Submission Datai	I Report.			







CE Credit Process

- Complete the WebEx survey you will receive by email within the next 48 hours.
- The survey will ask you to log in or register to access your personal account in the Learning Management Center.
 - A one-time registration process is required.
- Additional details are available at: <u>www.qualityreportingcenter.com</u>



Decase contact the Hospital OQR Support Contractor if you have any questions: • Submit questions online through the QualityNet Question & Answer Tool at www.qualitynet.org Or • Call the Hospital OQR Support Contractor at 866-800-8756.