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

PM Questions and Answers

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Question 1:	Yes, I'm from a Critical Access Hospital, and we do use the Claims Detail Report looking at our Medicare patients. And you have on the slide that it includes only Medicare Fee-for-Service claims that have not been finalized. So that means that I wouldn't receive any detail then on any managed Medicare patients, is that correct?
Answer 1:	That's correct.
Answer 1:	Yes, ma'am. That report has the, as you said, the fee for – I'm sorry, Medicare Fee- for-Service, and it also has Medicare Part A after they've gone through the final billing process. So that's all that's going to show upon on that report.
Question 1:	Okay, so no managed Medicare. Okay. Wonderful. Thank you.
Answer 1:	Yeah, that's correct. Yes, ma'am. There's no Medicare Advantage, Medicare Part B, or Medicare secondary payer claims on that report. Yes, ma'am.
Question 2:	My question relates to slide 17 about the Claims Detail Report. And it was mentioned that the report is updated three times per quarter. Are there specific dates that you actually do this, or could you kind of elaborate on when you upload those?
Answer 2:	Yes, they are released three times per quarter, and it's generally at the beginning of the quarter, towards the middle of the quarter, and then two weeks to the end of the quarter.

Question 3: Hi. I had a question about the preview report, specifically the Outpatient Imaging Efficiency measure. I was wondering if it was possible to get patient-level detail. I had submitted a Q&A, but I wasn't able to get a specific answer, and I had called in as well. I was just wondering. We can't get that information internally.

Answer 3: We have talked to the Lewin Group, who's the Support Contractor for the Imaging Efficiency measures, and they've referred us to ask your billing department to be able to get that information for you. And that information all comes to them, and it's coded through the Medicare claims, so your billing department should be able to obtain that information for you.

Question 4: Yes, you mentioned that the Surgery measures have been topped out, the OP-6 and -7 measures. But looking at the Claims Detail Report, that measure, you're still able to select it for encounters after January. Will those patients that fall into those measure categories still appear on the Claims Detail Report, even though it's not encouraged to report those, that data?

Answer 4: No. After January, the encounter dates starting January 1st, 2015, if you erroneously, accidentally, whatever have you, submit that data, it will be suppressed. So it is, to our knowledge, it will not even show up on a Claims Detail Report.

Question 5: Hi. Yes, I'm wondering, I'm looking at the hospital preview report, and we were fairly new with the perinatal care measure, and there was some confusion on entering into that web-based data tool. And so what I'm looking at is not our true percentages that are presenting on here. And I'm wondering, can you request submission during – or to withhold this during this time?

Answer 5: No. Once – all the information that shows up on Hospital Compare is based on the information that you submitted by – was submitted by the facility. And we're unable to speak specifically to Inpatient in terms of measure-specific information, but for Hospital Compare, that information is all derived from the information that you submitted.

Answer 5: So I would suggest that you call the Inpatient Support Contractor, since perinatal care is an inpatient measure, and discuss that with them.

Answer 5: If you don't have their number handy, Inpatient is 866.800.8765.

Question 6: Yes, could you please tell us exactly where to find – download this presentation on your site?

Answer 6: Sure. If you want to go to qualityreportingcenter.com, which is showing on the slide right now if you have that available, there is an events calendar, and you just click on today's event. The name of it is "Digging Deeper into the Data." And it will take you directly to a page, and you can print off presenter slides, that is, one slide per page or three per page.

Question 6: Thank you.

Answer 6:	And with this particular webinar, since there are a lot of displays of the reports, the three per page is going to be very difficult to read, so I'd recommend the one per page.
Question 7:	Could you provide where I could get the information of these reports for ASC and anesthesia, to make sure that all of their information is where it needs to be?
Answer 7:	Okay. The ASC reports are available – now there's only two different reports for the ASCs. There's the Provider Participation Report –
Answer 7:	And the Claims Detail.
Answer 7:	– and the Claims Detail Report. So those are available through QualityNet. Sign into the Secure Portal as you would, select the ASC Program, and then you'll move on to go into the Portal, and you'll have the HOP, ASC, and patient side. You'll select that one, and then go to run reports, and you'll have the ASC reports to run, provided you have that ability through your Security Administrator privileges. And then you can run reports for that particular ASC. The anesthesia, we have nothing to do with that, so I can't help you there.
Marty Ball:	Okay. Well then, I appreciate that, and I'm going to conclude today's program. I'd like to thank Karen for the valuable information that she shared with us today. We hope you'll have heard some useful information that will help in your outpatient quality reporting program. Please remember that you will not receive the WebEx survey for your CE certificate today. That will be sent from WebEx to your email within 48 hours. And if you didn't get a chance to ask your question today, please use the question and answer tool located on QualityNet.org. A Hospital OQR subject matter expert will send you a timely response. So thank you again, and enjoy the rest of your day.