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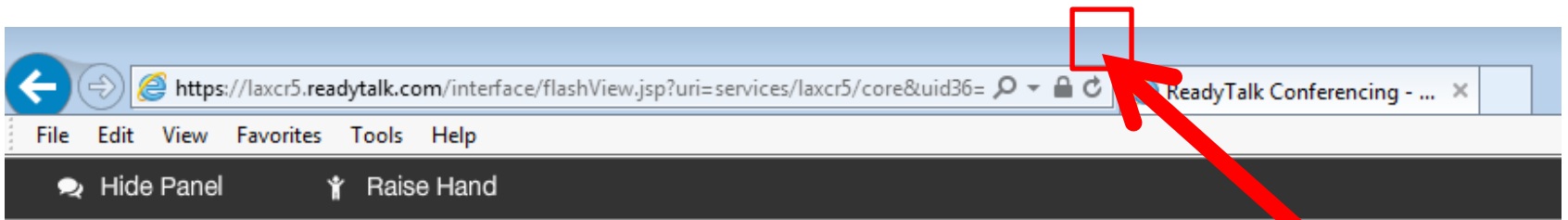
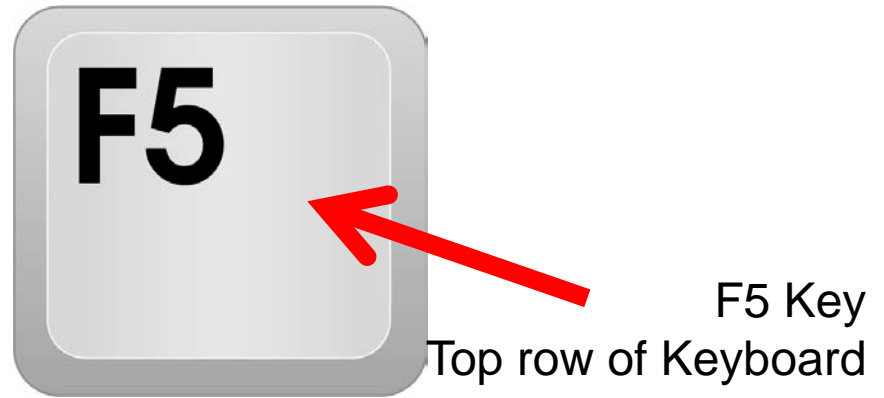
- **Audio for this event is available via ReadyTalk® Internet Streaming.**
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Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stop?

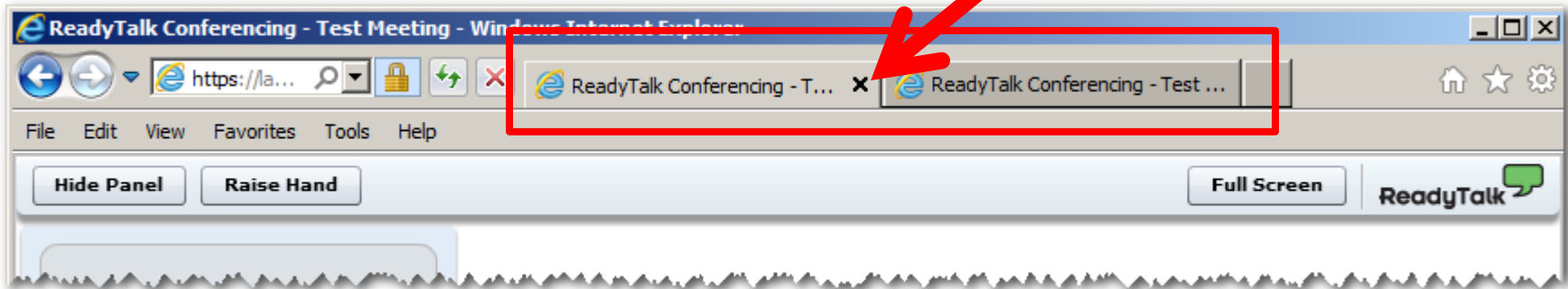
- Click Refresh icon –
or-
Click F5



Location of Buttons

Troubleshooting Echo

- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.
- Close all but one browser/tab and the echo will clear up.



Example of Two Browsers Tabs open in Same Event

Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



A screenshot of a web interface. On the left, there is a vertical chat window with a white background and a blue border. At the bottom of this window, there is a text input field labeled "Type questions here." and a "Send" button. The main content area on the right has a light gray background. At the top center, there is the CMS logo (Centers for Medicare & Medicaid Services). Below the logo, the text "Welcome to Today's Event" is displayed in a large, blue, sans-serif font. At the bottom of the main area, there is a yellow horizontal line, and below it, the text "Thank you for joining us today! Our event will start shortly." is displayed in a smaller, italicized, blue font. The top of the screenshot shows a dark gray header with buttons for "Hide Chat", "Raise Hand", "Full Screen", and "ReadyToGo".



PCHQR Program: Updates to Program Manual, Measure Information Forms, and Algorithms

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February 23, 2017

Acronyms and Abbreviations

ACS	American College of Surgeons	ICD	International Classification of Diseases
ADCC	Alliance of Dedicated Cancer Centers	IPF	Inpatient Psychiatric Facility
ADT	Androgen Deprivation Therapy	IPPS	Inpatient Prospective Payment System
AHRQ	Agency for Healthcare Research and Quality	IQR	Inpatient Quality Reporting
AJCC	American Joint Committee on Cancer	LabID	Laboratory-Identified
AMA	American Medical Association	LTCH	Long-Term Care Hospital
CAUTI	Catheter-Associated Urinary Tract Infections	MAP	Measure Application Partnership
CDC	Centers for Disease Control and Prevention	MIF	Measure Information Form
CCN	CMS Certification Number	MRSA	Methicillin-Resistant <i>Staphylococcus aureus</i>
CDI	<i>Clostridium difficile</i> Infection	MUC	Measures Under Consideration
CE	Continuing Education	N/A	Not Available
CLABSI	Central Line-Associated Bloodstream Infection	NHSN	National Healthcare Safety Network
CMS	Centers for Medicare & Medicaid Services	NQF	National Quality Forum
CPT	Current Procedural Terminology	OCM	Oncology Care Measure
CST	Cancer-Specific Treatment	OQR	Outpatient Quality Reporting
CY	Calendar Year	PCH	PPS-Exempt Cancer Hospital
DACA	Data Accuracy and Completeness Acknowledgement	PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
EBRT	External Beam Radiotherapy	PQRS	Physician Quality Reporting System
ED	Emergency Department	PR	Public Reporting
FFS	Fee-For-Service	PSA	Prostate Specific Antigen
FY	Fiscal Year	Q	Quarter
Fxns	Fractions	QPP	Quality Payment Program
Gy	Gray	RSAR	Risk-standardized admission rate
HAI	Healthcare-Associated Infection	RSEDR	Risk-standardized ED visit rate
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	SBRT	Stereotactic Body Radiation Therapy
HCP	Healthcare Personnel	SCIP	Surgical Care Improvement Project
HHS	Health and Human Services	SRS	Stereotactic Radiosurgery
HQR	Hospital Quality Reporting	SSI	Surgical Site Infection
HT	Health Transitions	TEP	Technical Expert Panel
		TBD	To be determined

Purpose

This presentation will provide participants in the PCHQR Program with a high-level review of the highlights of the 2017 Program Manual, as well as examine the granular updates to the measure information forms and algorithms for the Oncology Care and Clinical Effectiveness measures.

Objectives

Upon completion of this program, participants will be able to:

- Describe the sections of the Program Manual that have been updated for 2017
- Apply the updated measure information forms to accurately abstract the Oncology Care and Clinical Effectiveness measures for the new measure specifications
- Utilize the updated algorithms to visualize the data abstraction process for these measures

PCHQR Program: Updates to Program Manual,
Measure Information Forms, and Algorithms

2017 Program Manual

2017 Program Manual Updates

- Section 1: PCHQR Program Overview
- Section 2: Measures
 - Updates to OCMs: NQF #0382, #0389, #0390
 - Update to Clinical Effectiveness Measure: NQF #1822
- Section 3: Data Reporting
 - Impact of Web-Based Data Collection Tool
 - Update to Measure Exception Form
- Section 4: *QualityNet* Registration Process
- Section 5: Vendor Authorization

2017 Program Manual Updates

- Section 6: Notice of Participation
- Section 7: DACA
- Section 8: Accessing Reviewing Reports
 - PCHQR Facility Report
 - PCHQR HCAHPS Report
- Section 9: Public Reporting
 - Extend and update schedule
 - Preview Reports
- Section 10: Resources
 - Review of communication mechanisms
 - Appendices
 - Program Measure Submission Deadlines
 - Relationship Matrix

PCHQR Program: Updates to Program Manual,
Measure Information Forms, and Algorithms

Oncology Care and Clinical Effectiveness Measures

Structure of OCM and EBRT Tools

Each of the six metrics has the following four items associated with them for 2016 and 2017.

- Measure Information Form
- Clean Algorithm
- Population and Sampling Algorithm
- Paper Data Abstraction Tool

Measure Information Form

- MIFs are derived from NQF, PQRS/QPP, CMS, and measure stewards
- MIFs Contain:
 - Introductory information
 - Denominator and numerator definitions (ICD-10 codes, CPT[®] codes, and clinical abstraction parameters)
 - Rationale
 - Clinical Recommendation Statements

2017 OCM and EBRT Updates

Universal Applications

- Use the patient visit or treatment date to identify the event time period for these measures:
 - The pain measures (NQF #0383 and #0384) may have multiple encounters reported within a quarter.
 - The other measures (NQF #0382, #0389, #0390 and #1822) should only be reported once per quarter. If a course of treatment spans more than one quarter, attribute it to the date of first encounter.
- Apply the MIFs and algorithms as follows:
 - 2015 – removed
 - 2016 – currently on *QualityNet*
 - 2017 – will be soon posted

MIF (NQF #0382) – Overview

PPS-Exempt Cancer Hospital Quality Reporting Program Measure Information Form¹

Measure Name: Radiation Dose Limits to Normal Tissues

Measure ID#: NQF 0382, PCH-14

NQF Portfolio(s): Oncology Metrics, Radiation Oncology

National Quality Strategy Domain: Patient Safety

Type of Measure: Process

Improvement Noted As: Higher score indicates better quality.

Measure Steward: American Society for Radiation Oncology (ASTRO)

DESCRIPTION:

Percentage of patients, regardless of age, with a diagnosis of breast, rectal, pancreatic or lung cancer receiving three dimensional (3D) conformal radiation therapy who had documentation in medical record that radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues.

MIF (NQF #0382) – Denominator

DENOMINATOR:

All patients, regardless of age, with a diagnosis of breast, rectal, pancreatic or lung cancer receiving 3D conformal radiation therapy.

Denominator Criteria (Eligible Cases):

Diagnosis for rectal, pancreatic, lung or breast cancer (ICD-10-CM): C19, C20, C21.2, C21.8, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C34.00, C34.01, C34.02, C34.10, C34.11, C34.12, C34.2, C34.30, C34.31, C34.32, C34.80, C34.81, C34.82, C34.90, C34.91, C34.92, C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929

AND

Patient encounter during the reporting period, Current Procedural Terminology, CPT®: 77295 (radiation therapy treatment planning) OR CPT®: 77402, 77407, or 77412 (radiation therapy delivery)

AND NOT (exclude patients with metastatic disease)

Diagnosis for metastatic cancer (ICD-10-CM): C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71, C79.72, C79.81, C79.82, C79.89, C79.9

MIF (NQF #0382) – Numerator

NUMERATOR:

Patients who had documentation in medical record that radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues.

Numerator Quality-Data Coding Options for Reporting Satisfactorily:

Radiation Dose Limits to Normal Tissues Established

Performance Met: CPT II 0520F: Radiation dose limits to normal tissues established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissue/organ

OR

Radiation Dose Limits to Normal Tissues not Established, Reason not Otherwise Specified

Append a reporting modifier (**8P**) to CPT Category II code **0520F** to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

Performance Not Met: 0520F with 8P: Radiation dose limits to normal tissues not established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissue/organ, reason not otherwise specified

If CPT II codes are not used or available, chart abstraction may be used to determine if radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues/organs.

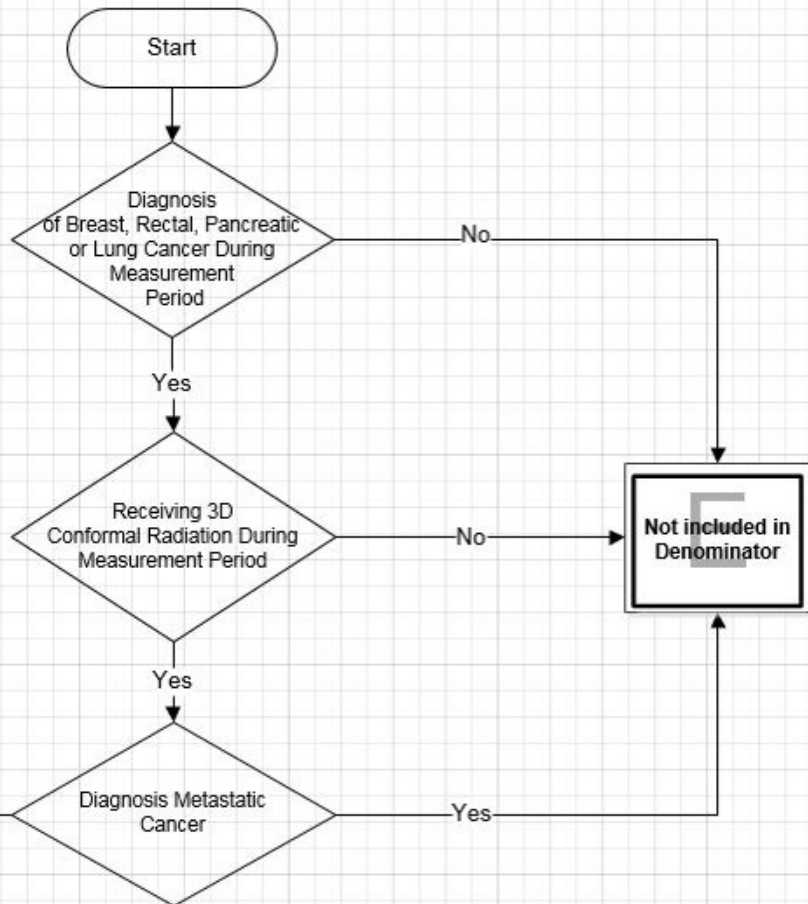
Algorithm (NQF #0382) – Denominator

Legend:
 D = Included in Denominator
 N = Included in Numerator
 E = Excluded from Numerator/Denominator

ICD-10-CM = C19, C20, C21.2, C21.8, C25.0, C25.1, C25.2, C25.3, C25.4, C25.7, C25.8, C25.9, C34.00, C34.01, C34.02, C34.10, C34.11, C34.12, C34.2, C34.30, C34.31, C34.32, C34.80, C34.81, C34.82, C34.90, C34.91, C34.92, C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.919, C50.921, C50.922, C50.929

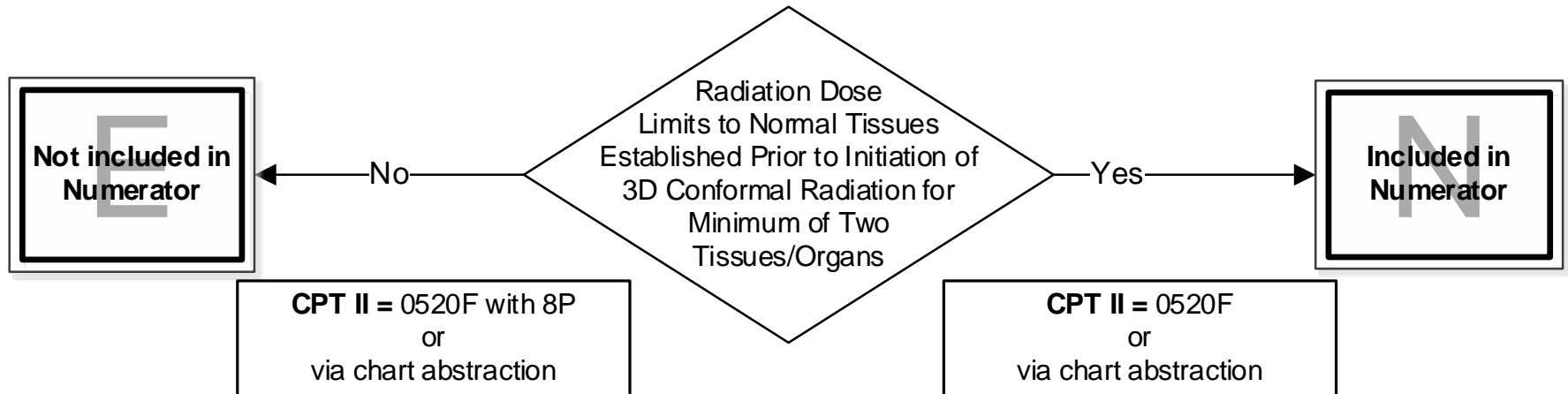
CPT = 77295 (planning), OR
 CPT = 77402, 77407, or 77412 (administration)

D
 Included in Denominator



ICD-10-CM = C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71, C79.72, C79.81, C79.82, C79.89, C79.9

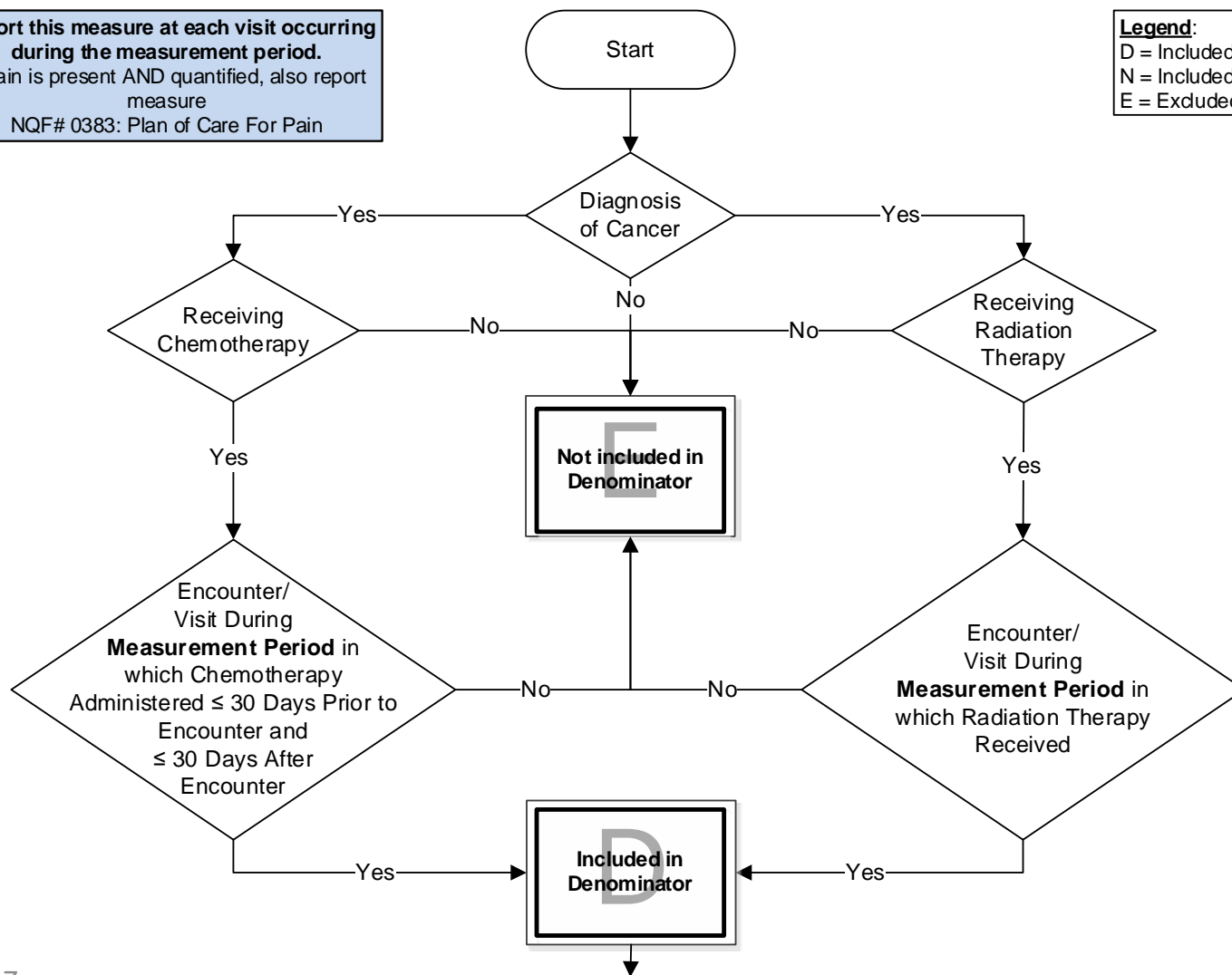
Algorithm (NQF #0382) – Numerator



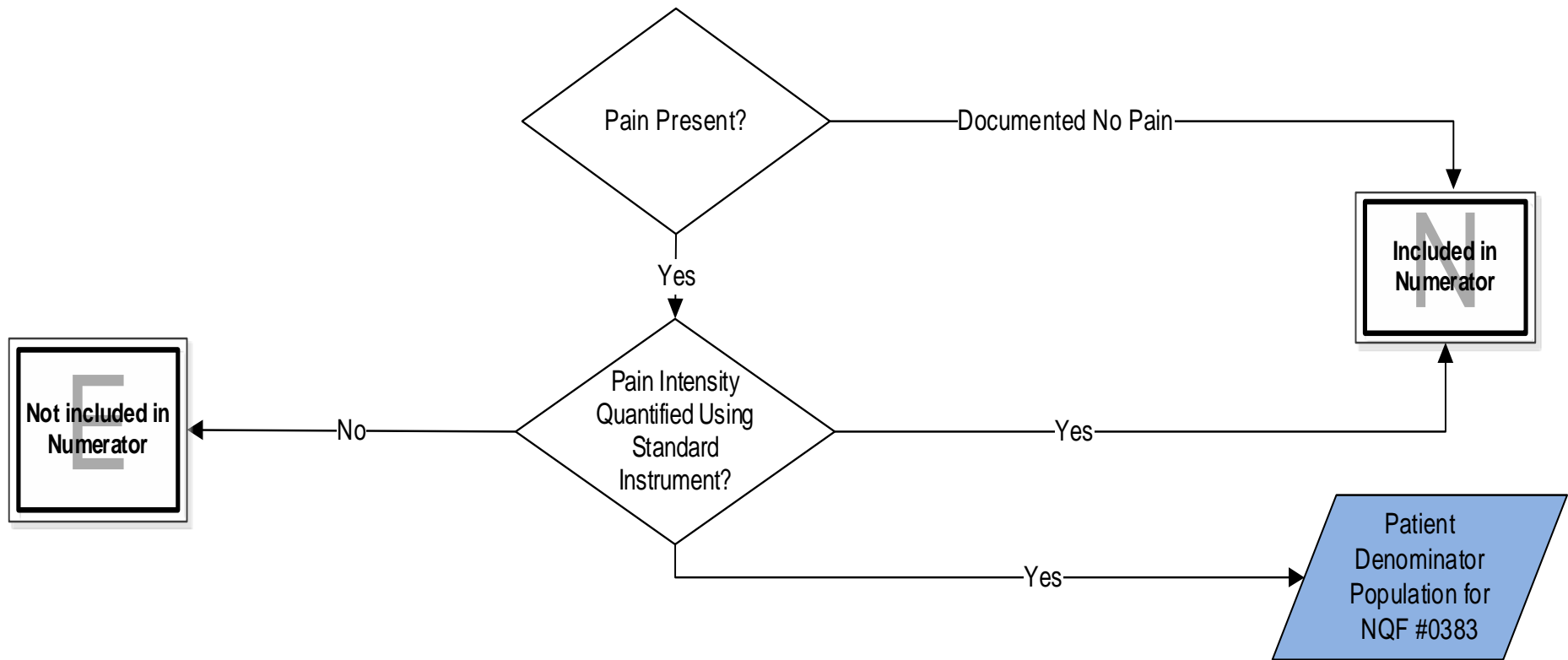
Algorithm (NQF #0384) – Denominator

Report this measure at each visit occurring during the measurement period.
If pain is present AND quantified, also report measure
NQF# 0383: Plan of Care For Pain

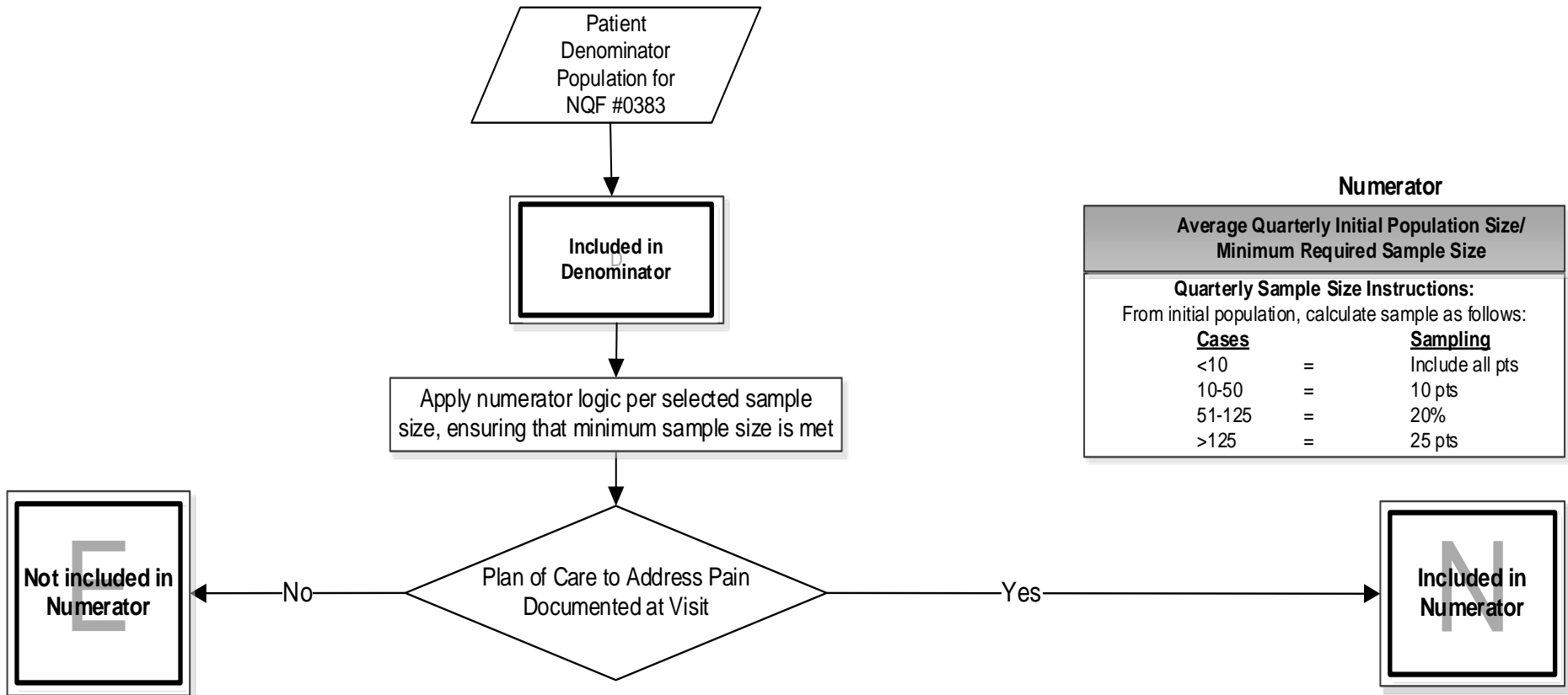
Legend:
D = Included in Denominator
N = Included in Numerator
E = Excluded from Numerator/Denominator



Algorithm (NQF #0384) – Numerator



Algorithm (NQF #0383) – Numerator



MIF (NQF #0389) – Overview

Measure Name: Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients

Measure ID#: NQF 0389, PCH-18

NQF Portfolio(s): Meaningful Use (MU), MU Stage 2 Clinical Quality Measures (CQMs), NextGen Certified, Oncology Metrics

National Quality Strategy Priority: Affordable Care

Type of Measure: Process

Improvement Noted As: Higher score indicates better quality

Measure Steward: AMA-convened Physician Consortium for Performance Improvement

MIF (NQF #0389)

Description and Denominator

DESCRIPTION: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low (or very low) risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy of the prostate who did not have a bone scan performed at any time since diagnosis of prostate cancer.

DENOMINATOR:

All patients, regardless of age, with a diagnosis of prostate cancer at low (or very low) risk of recurrence receiving interstitial prostate brachytherapy, **OR** external beam radiotherapy to the prostate, **OR** radical prostatectomy, **OR** cryotherapy to the prostate.

Denominator Criteria (Eligible Cases):

Any male patient, regardless of age,

AND

Diagnosis for prostate cancer: ICD-10 = C61,

AND

Patient encounter during the reporting period: CPT® = 55810, 55812, 55815, 55840, 55842, 55845, 55866, 55873, 55875, 77427, 77435, 77772, 77778, or 77799

AND

Low (or very low) risk of recurrence, prostate cancer (criteria above or CPT® II code = G9706)

MIF (NQF #0389) – Definitions

Definitions:

Very Low Risk of recurrence of prostate cancer:

- PSA < 10 ng/ml; **AND**
- Gleason score of 6 or less; **AND**
- Clinical stage T1c; **AND**
- Presence of disease in fewer than 3 biopsy cores; **AND**
- $\leq 50\%$ prostate cancer involvement in any core; **AND**
- PSA density ≤ 0.15 ng/mL/cm³

Low Risk of recurrence of prostate cancer:

- PSA < 10 ng/ml; **AND**
- Gleason score of 6 or less; **AND**
- Clinical stage T1 to T2a

External beam radiotherapy:

- 3D conformal radiation therapy, **OR**
- Intensity modulated radiation therapy (IMRT), **OR**
- Stereotactic body radiotherapy (SBRT), **OR**
- Proton beam therapy

MIF (NQF #0389) – Numerator

NUMERATOR:

Patients who did not have a bone scan performed at any time since diagnosis of prostate cancer.

Performance Met: Bone scan **not** performed prior to initiation of treatment nor at any time since diagnosis of prostate cancer (CPT® II = 3270F or via chart abstraction)

OR

Medical Performance Exclusion: Documentation of medical reason(s) for performing a bone scan (including documented pain, salvage therapy, other medical reasons) (CPT® II = 3269F with 1P or via chart abstraction)

OR

System Performance Exclusion: Documentation of system reason(s) for performing a bone scan (including bone scan ordered by someone other than the reporting hospital) (CPT® II = 3269F with 3P or via chart abstraction)

OR

Performance Not Met: Bone scan was performed prior to initiation of treatment or at any time since diagnosis of prostate cancer (CPT II® = 3269F or via chart abstraction)

MIF (NQF #0390) – Overview

PPS-Exempt Cancer Hospital Quality Reporting Program Measure Information Form¹

Measure Name: Prostate Cancer: Adjuvant Hormonal Therapy for High or Very High Risk Prostate Cancer Patients

Measure ID#: NQF 0390, PCH-17

NQF Portfolio(s): Oncology Metrics

National Quality Strategy Priority: Effective Communication and Care Coordination

Type of Measure: Process

Improvement Noted As: Higher score indicates better quality.

Measure Steward: American Urological Association (American Urological Association Education and Research, [AUAER], Inc.)

MIF (NQF #0390)

Description and Denominator

DESCRIPTION: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high or very high risk of recurrence, receiving external beam radiotherapy to the prostate, who were prescribed adjuvant hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)

DENOMINATOR: All patients, regardless of age, with a diagnosis of prostate cancer at high or very high risk of recurrence, receiving external beam radiotherapy to the prostate as primary therapy.

Denominator Criteria (Eligible Cases):

Any male patient, regardless of age,

AND

Diagnosis for prostate cancer: ICD-10 = C61,

AND NOT

Diagnosis for metastatic cancer (ICD-10-CM): C77.0, C77.1, C77.2, C77.3, C77.4, C77.5, C77.8, C77.9, C78.00, C78.01, C78.02, C78.1, C78.2, C78.30, C78.39, C78.4, C78.5, C78.6, C78.7, C78.80, C78.89, C79.00, C79.01, C79.02, C79.10, C79.11, C79.19, C79.2, C79.31, C79.32, C79.40, C79.49, C79.51, C79.52, C79.60, C79.61, C79.62, C79.70, C79.71, C79.72, C79.81, C79.82, C79.89, C79.9

AND

Patient encounter during the reporting period: Current Procedural Terminology, or CPT = 77427, 77435

AND

High or very high risk of recurrence of prostate cancer (criteria above or CPT II code = G8465)

MIF (NQF #0390) – Definitions

Definitions:

High Risk of recurrence of prostate cancer:

- PSA > 20 ng/ml; **OR**
- Gleason score 8-10; **OR**
- Clinically localized stage T3a

Note: patients with multiple adverse factors may be shifted into the very high risk category

Very High Risk of recurrence of prostate cancer:

- Clinical stage T3b to T4, **OR**
- Primary Gleason pattern 5, **OR**
- More than 4 cores with Gleason score 8 to 10

External beam radiotherapy:

- 3D conformal radiation therapy, **OR**
- Intensity modulated radiation therapy (IMRT), **OR**
- Stereotactic body radiotherapy (SBRT), **OR**
- Proton beam therapy

Prescribed: Includes patients who are currently receiving medication(s) that follow the treatment plan recommended at an encounter during the reporting period, even if the prescription for medication(s) was ordered prior to the encounter (neoadjuvant/concurrent/adjuvant deprivation [ADT]).

MIF (NQF #0390) – Numerator

NUMERATOR: Patients who were prescribed adjuvant hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)

Performance Met: Adjuvant (i.e., in combination with external beam radiotherapy to the prostate for prostate cancer) hormonal therapy (gonadotropin-releasing hormone [GnRH] agonist or antagonist) prescribed/administered (CPT II = 4164F or via chart abstraction)

OR

Medical Performance Exclusion: Documentation of medical reason(s) for not prescribing/administering adjuvant hormonal therapy (e.g., salvage therapy) (CPT II = 4164F *with* 1P or via chart abstraction)

OR

Patient Performance Exclusion: Documentation of patient reason(s) for not prescribing/administering adjuvant hormonal therapy (4164F *with* 2P or via chart abstraction)

OR

Performance Not Met: Patients who were not prescribed/administered adjuvant hormonal therapy, reason not otherwise specified (4164F *with* 8P or via chart abstraction)

MIF (NQF #1822) – Overview

PPS-Exempt Cancer Hospital Quality Reporting Program Measure Information Form

Measure Name: External Beam Radiotherapy (EBRT) for Bone Metastases

Measure ID#: NQF 1822, PCH-25

NQF Portfolio(s): Oncology Metrics

National Quality Strategy Domain: Effective Communication and Care Coordination

Type of Measure: Process

Improvement Noted as: Higher score indicates better quality.

Measure Steward: American Society for Radiation Oncology (ASTRO)

MIF (NQF #1822)

Description, Instructions and Denominator

DESCRIPTION: Percentage of patients, regardless of age, with a diagnosis of bone metastases and no history of previous radiation who receive EBRT with an acceptable fractionation scheme.

INSTRUCTIONS: This measure is to be reported once per reporting period for patients, with a diagnosis of bone metastases and no history of previous radiation to the site, who receive external beam radiation therapy to treat metastatic bone lesion(s).

- All encounters that result from a single treatment plan should be considered one case with the case being attributed to the first date of administration of EBRT
- Consider the administration of EBRT to different anatomic sites as separate cases
- If the EBRT treatment course is initiated, but not completed, the case should still be included

DENOMINATOR: All patients with bone metastases and no previous radiation to the same anatomic site who receive EBRT for the treatment of bone metastases.

All patients, regardless of age

AND

Bone metastases diagnosis (ICD-10-CM): C79.51, C79.52

AND

CPT® Codes: 77402, 77407, 77412

MIF (NQF #0390) – Exclusions

Denominator Exclusions:

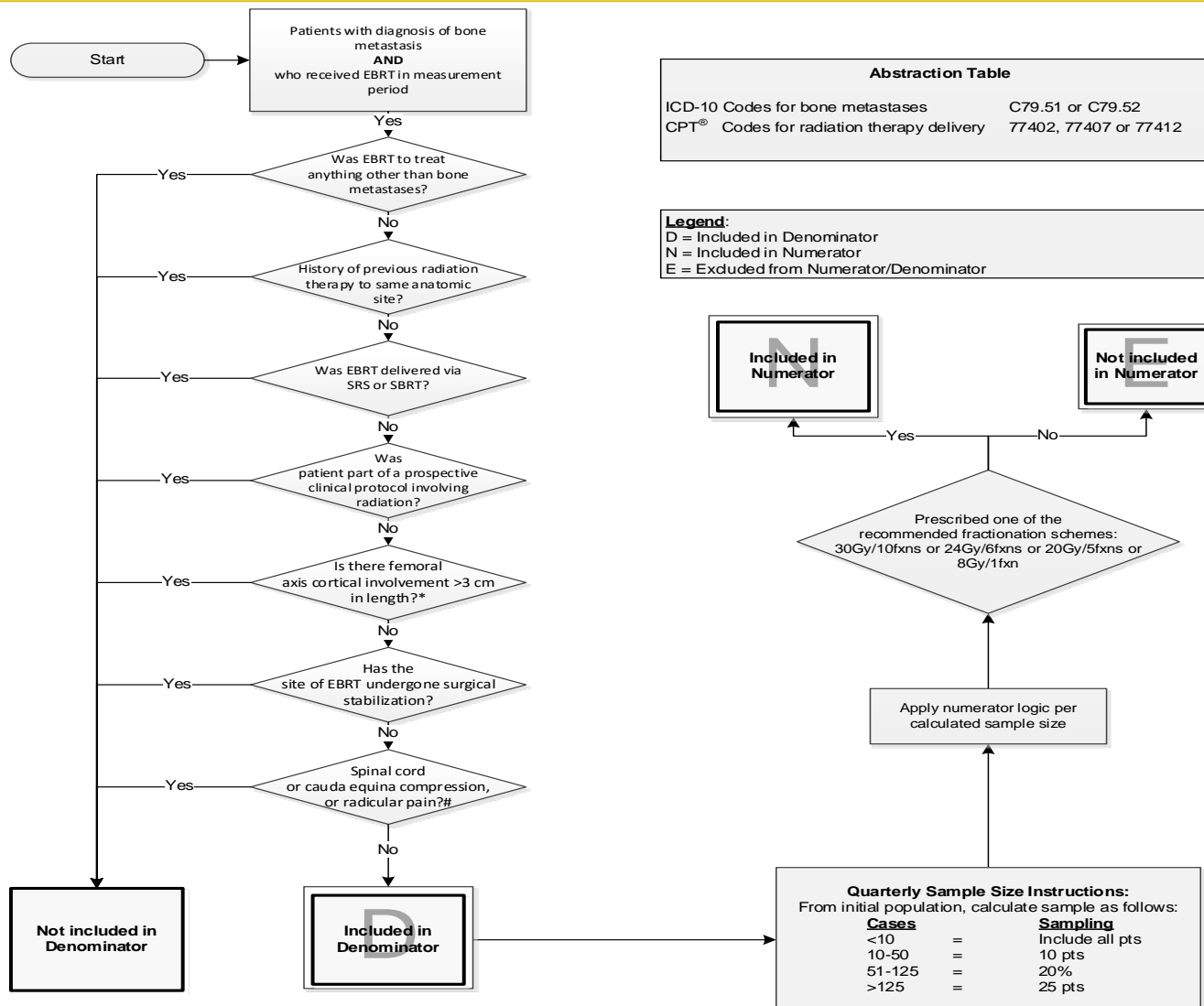
Documentation of medical reason(s) including:

- The EBRT is used to treat anything other than bone metastases
- Previous radiation treatment to the same anatomic site (i.e., retreatment, re-irradiation, overlap with prior treatment field)
- Patients for whom the current EBRT is being administered via stereotactic body radiation therapy (SBRT) or stereotactic radiosurgery (SRS)
- Patients who are part of a prospective clinical protocol involving the use of radiation therapy
- Patients with femoral axis cortical involvement greater than 3 cm in length if the current EBRT is to that femur
- Patients who have undergone a surgical stabilization procedure if at the site current EBRT treatment
- Patients with spinal cord compression, cauda equina compression, or radicular pain documented as related to the bone metastases being treated with EBRT

MIF (NQF #1822) – Numerator

Numerator Statement: All patients, regardless of age, with bone metastases and no previous radiation to the same anatomic site, who receive EBRT for the treatment of bone metastases with any of the following recommended fractionation schemes: 30Gy/10fxns, 24Gy/6fxns, 20Gy/5fxns, and 8Gy/1fxn.

Algorithm – NQF #1822



PCHQR Program: Updates to Program Manual,
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Miscellaneous Notes

Important Upcoming Events

Currently Scheduled 2017 Webinars

- **March 23:** *PCHQR Program: Web-Based Data Collection Tool*
- **April 27:** *PCHQR Program: FY 2018 IPPS/LTCH Proposed Rule*
- **May 25:** TBD – Best Practices
- **June 22:** TBD – Best Practices
- **July 27:** TBD – Best Practices
- **August 24:** *PCHQR Program: FY 2018 IPPS/LTCH Final Rule*

Important Upcoming Dates

Upcoming Hospital Quality Reporting Data Submissions

- **February 24, 2017:** Q2 2016 chemo and Q4 2015 hormone
- **March 15, 2017:** Q3 HAI data
- **April 5, 2017:** Q4 2016 HCAHPS data
- **May 15, 2017:** Q3 2016 chemo, Q1 2016 hormone, Q4 2016 HAI, and Q4 2016 through Q1 2017 HCP influenza vaccination data
 - First use of Web-Based Data Collection Tool
 - First reporting of HCP influenza vaccination data

Important Upcoming Dates

Key Hospital Compare Refresh Dates

- **April 2017:** Anticipated Refresh on April 26
- **July 2017:**
 - Support Contractor submitted CST data
 - Contains:
 - 2Q 2015 through 1Q 2016 chemo data
 - 4Q 2014 through 3Q 2015 hormone data
 - 1Q through 4Q 2015 OCM data
 - 4Q 2015 through 3Q 2016 HCAHPS data
 - Preview period scheduled for April 6 through May 12
 - Anticipated refreshing on July 26

Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
 - It is your responsibility to submit this form to your accrediting body for credit.

CE Credit Process

- Complete the ReadyTalk[®] survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “Done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
 - This is a separate registration from ReadyTalk[®].
 - Please use your PERSONAL email so you can receive your certificate.
 - Healthcare facilities have firewalls up that block our certificates.

CE Certificate Problems?

- If you do not immediately receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that is sent out.
- Please go back to the **New User** link and register your personal email account.
 - Personal emails do not have firewalls.

CE Credit Process: Survey

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by [SurveyMonkey](#)
Check out our [sample surveys](#) and create your own now!

CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Existing User Link:

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

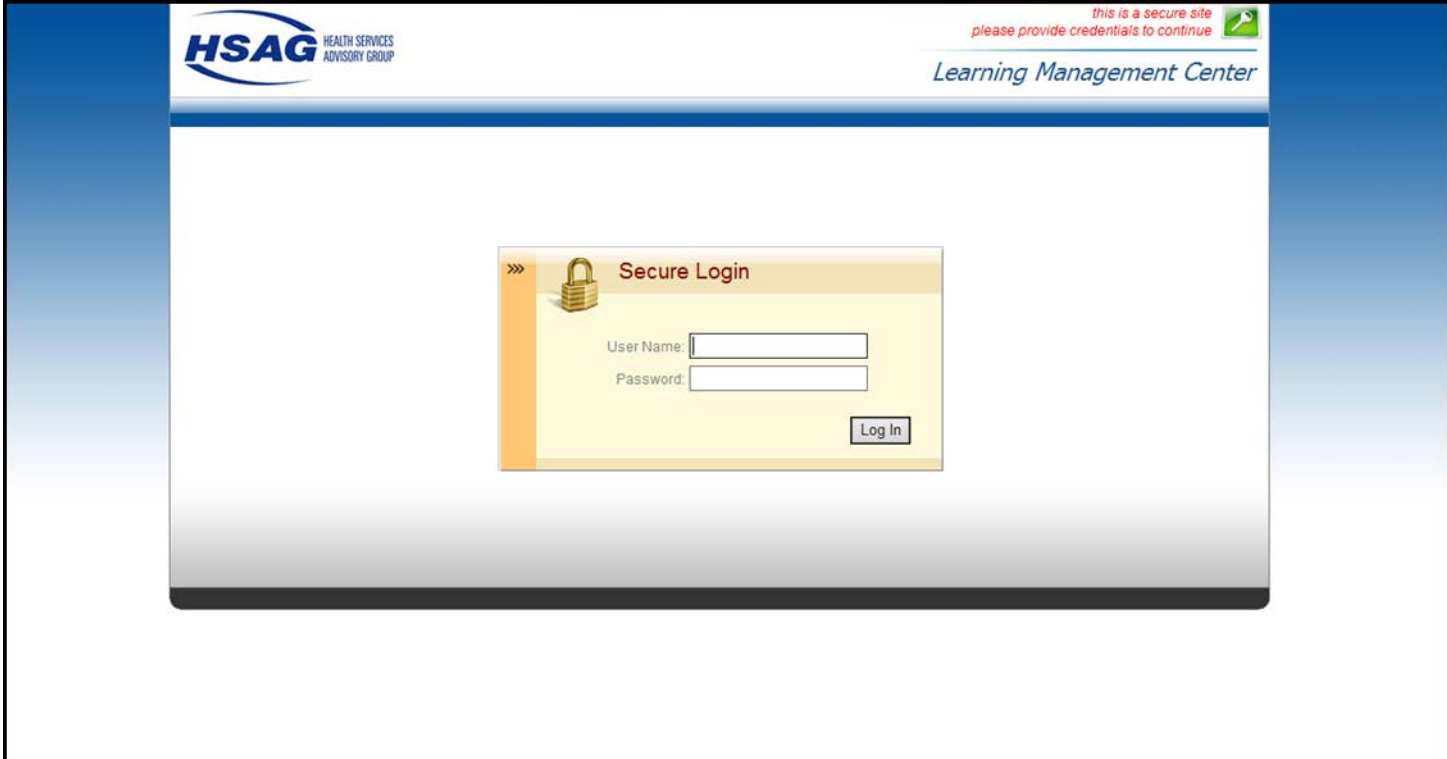
Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

CE Credit Process: New User

The screenshot shows a web browser window displaying the registration page for a new user. The page features the HSAG logo (Health Services Advisory Group) in the top left corner. In the top right corner, there is a security notice: "this is a secure site please provide credentials to continue" with a small green padlock icon. Below this, the text "Learning Management Center" is displayed. The main heading of the page is "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The registration form includes four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field has a small icon of a telephone handset. Below the input fields is a "Register" button. The entire form is set against a light blue gradient background.

CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo (Health Services Advisory Group). At the top right, a security notice reads "this is a secure site please provide credentials to continue" with a lock icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box containing a padlock icon, a "User Name:" label with an input field, a "Password:" label with an input field, and a "Log In" button.

PCHQR Program: Updates to Program Manual,
Measure Information Forms, and Algorithms

Closing Remarks

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