Navigating *QualityNet*: Where to Find What You Need When you Need it

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1 p.m. ET

Continuing Education Approval

- This program has been approved for 1.0 continuing education (CE) unit given by CE Provider #50-747 for the following professional boards:
  - Florida Board of Nursing
  - 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
- Professionals licensed in other states will receive a Certificate of Completion to submit to their licensing Boards.

CE Credit Process

- Complete the ReadyTalk survey you will receive by email within the next 48 hours or the one that will pop up after the webinar.
- 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.

Objectives

Participants will be able to:

- Navigate the *QualityNet* PCHQR section as part of improved patient care
- Demonstrate knowledge of resources, including the Questions & Answers tool, data collection tools, and submission documents
- Discuss steps for using the website effectively and efficiently

QualityNet Overview

- Established by the Centers for Medicare & Medicaid Services (CMS)
- Provides healthcare quality improvement news, resources, and data reporting tools and applications
- Used by healthcare providers and others in support of selected quality reporting programs

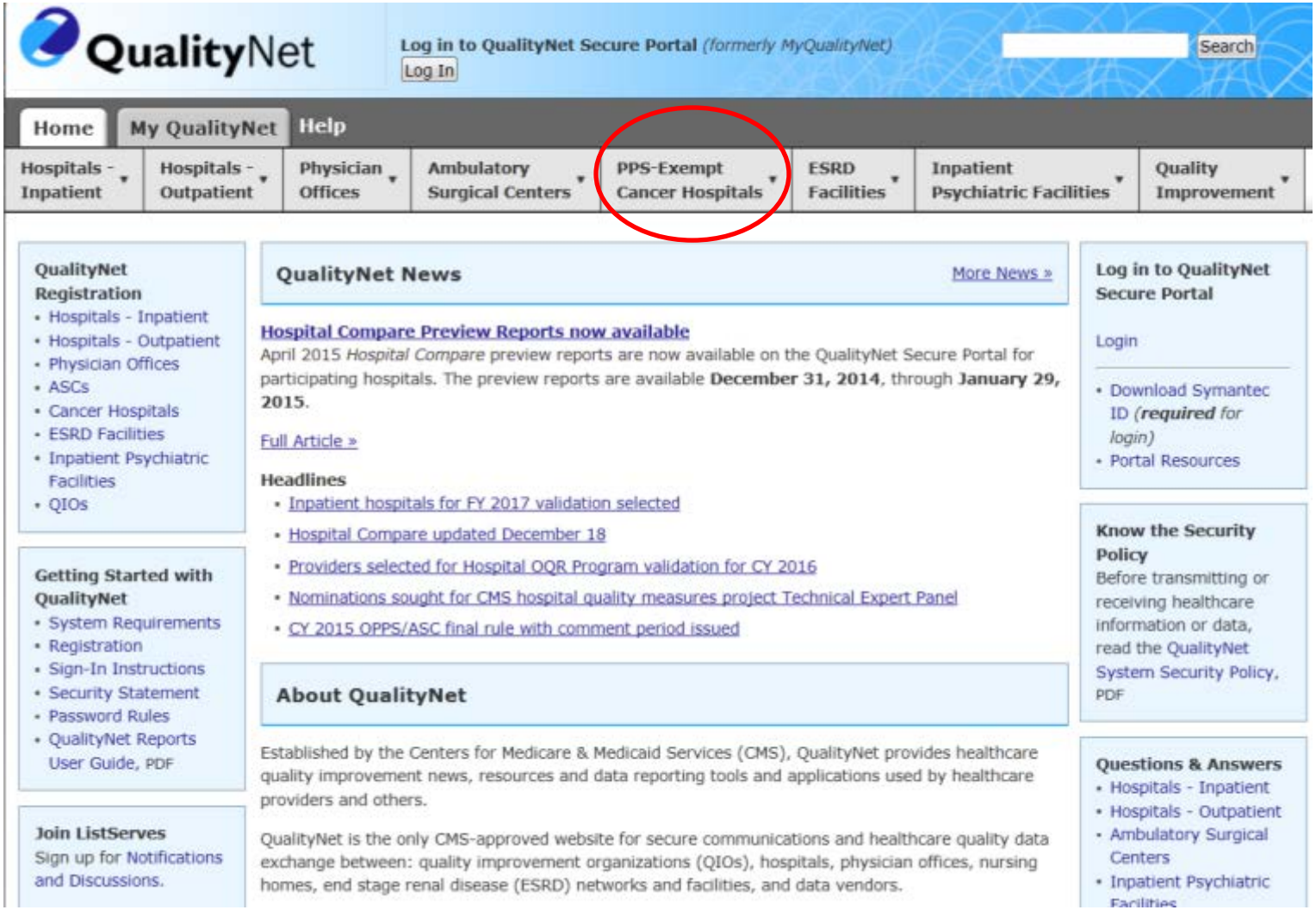
www.qualitynet.org

QualityNet Overview

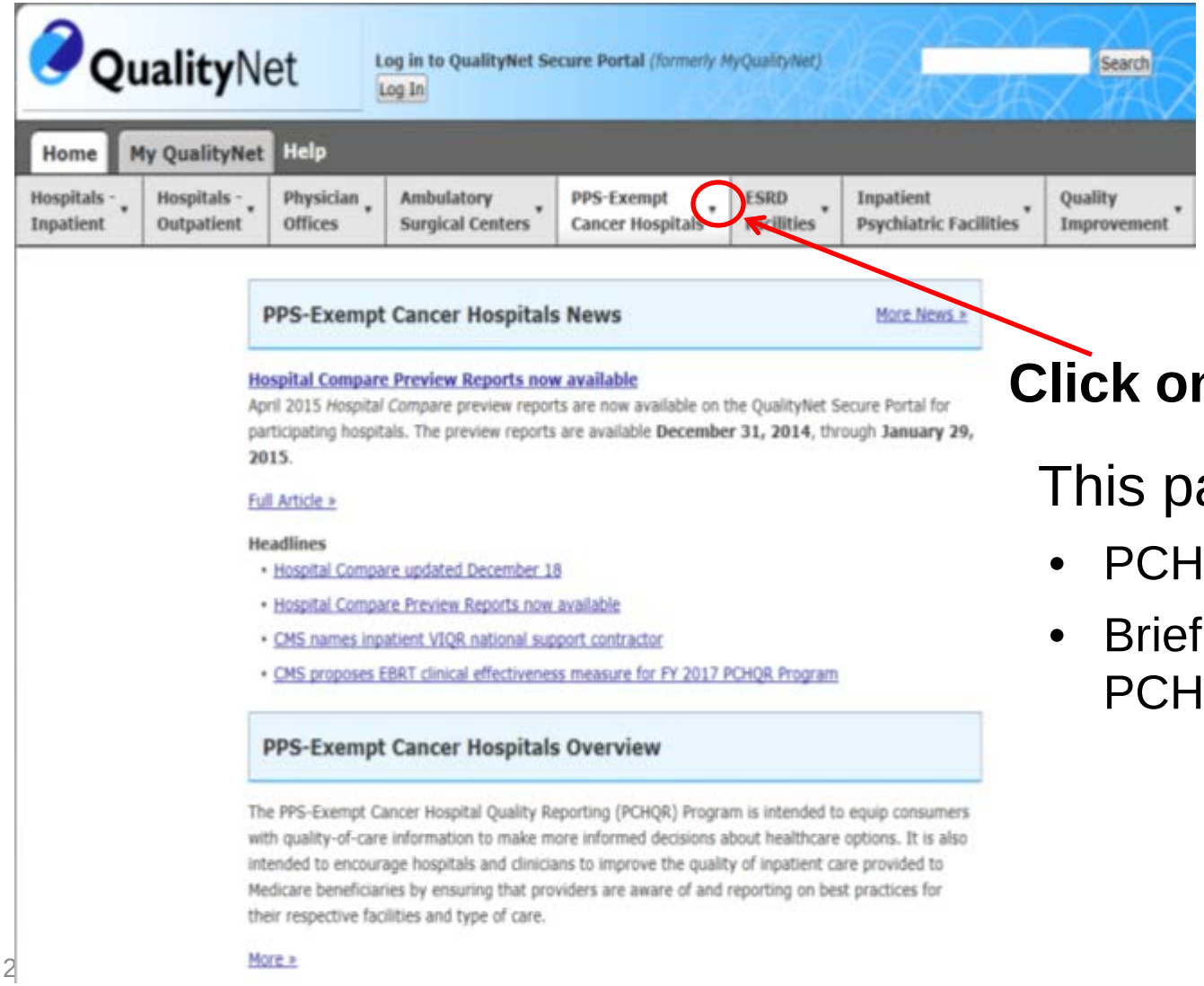
- *QualityNet* provides information and resources for multiple CMS quality reporting programs, including:
  - Hospital Inpatient Quality Reporting (Hospital IQR)
  - Hospital Outpatient Quality Reporting (Hospital OQR)
  - Ambulatory Surgical Center Quality Reporting (ASCQR)
  - Inpatient Psychiatric Facility Quality Reporting (IPF QR)
  - **PPS-Exempt Cancer Hospital Quality Reporting (PCHQR)**
  - Physician Quality Reporting System (PQRS)
  - End Stage Renal Disease Reporting (ESRD)

www.qualitynet.org

QualityNet Home Page



PPS-Exempt Cancer Hospitals Home Page



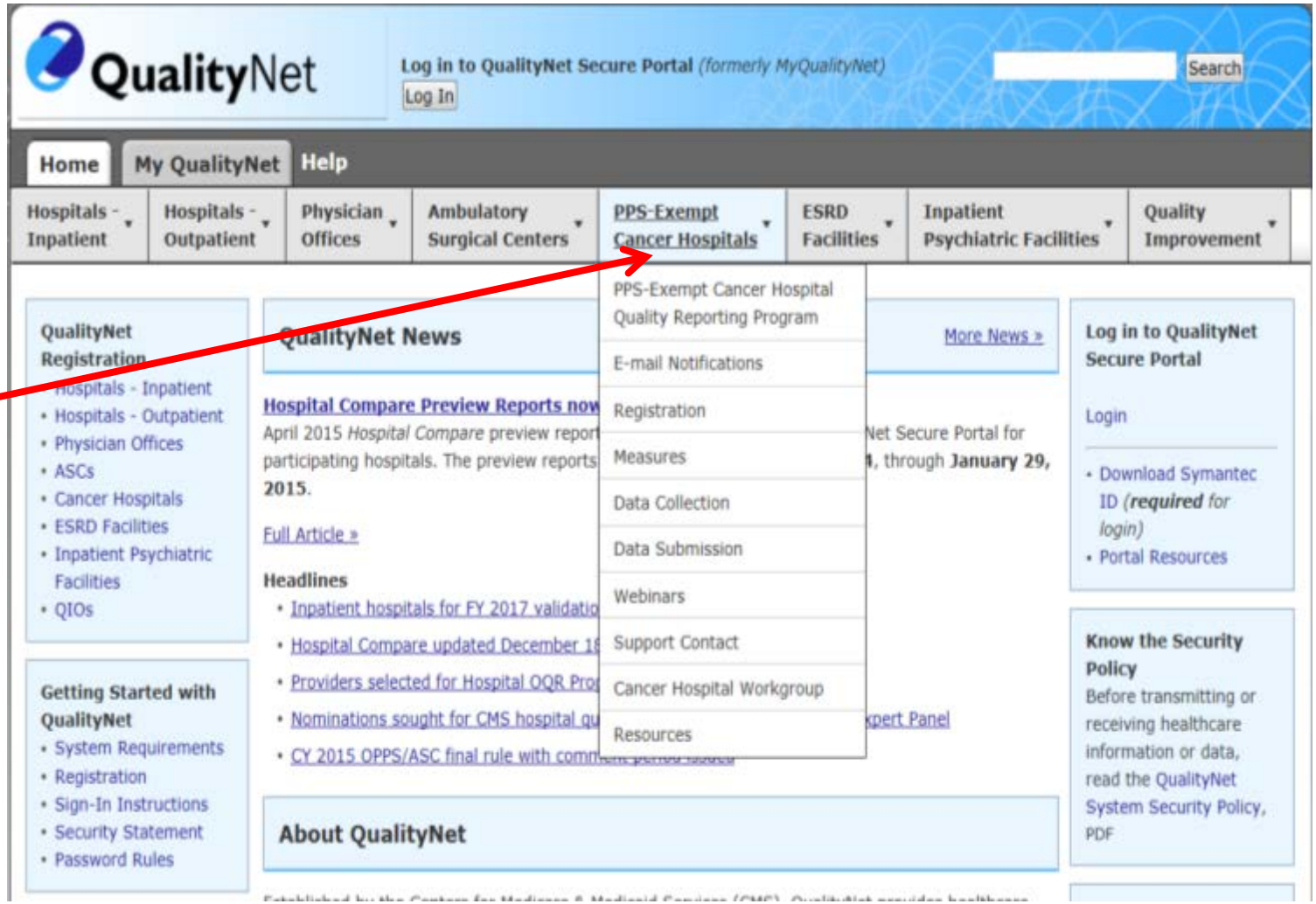
Click on the down arrow.

This page contains:

- PCHQR News
- Brief Overview of PCHQR Program

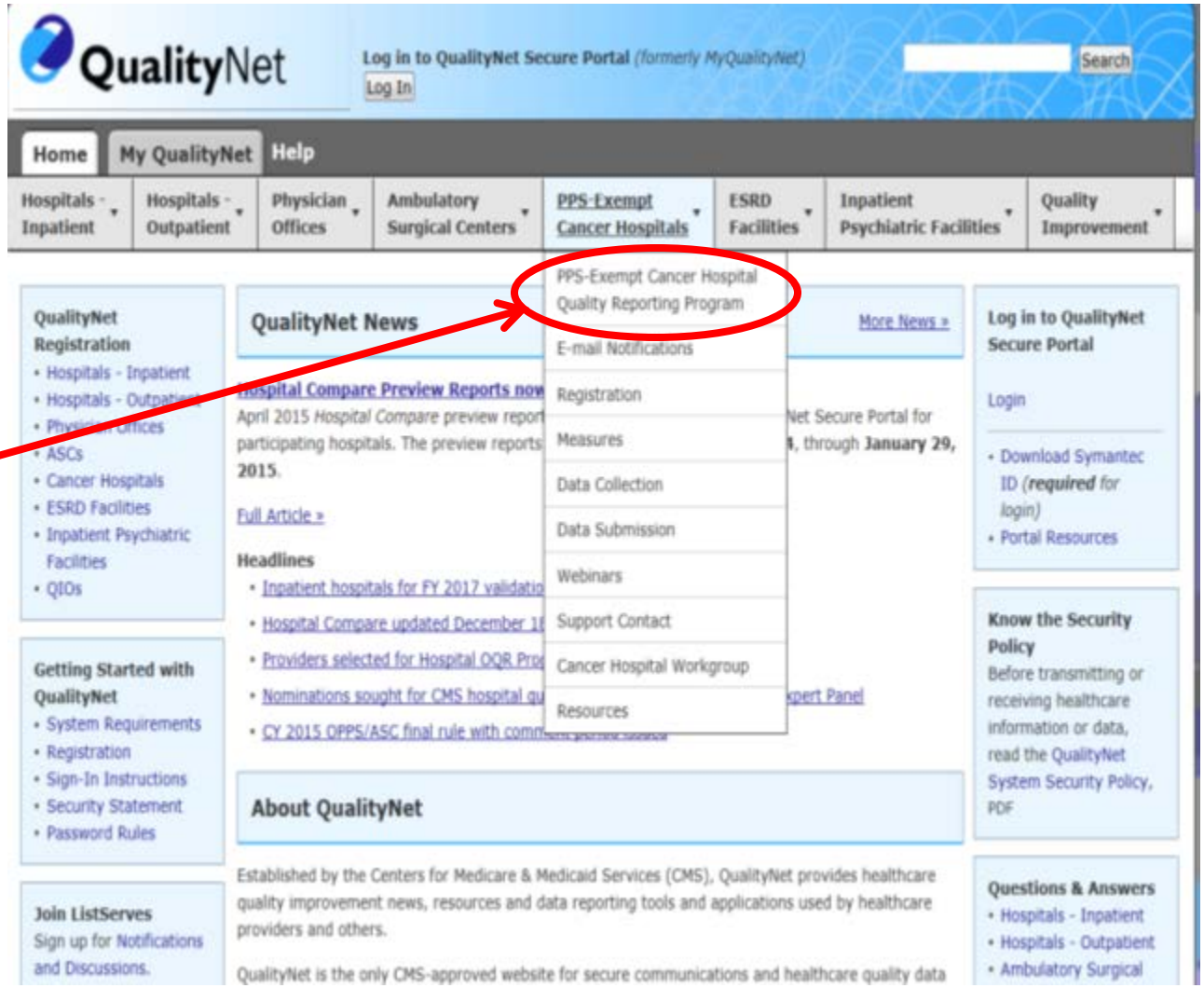
PPS-Exempt Cancer Hospitals Menu

Hover over or click on the tab to display the drop down menu for the PPS-Exempt Cancer Hospitals.



PPS-Exempt Cancer Hospital Quality Reporting Tab

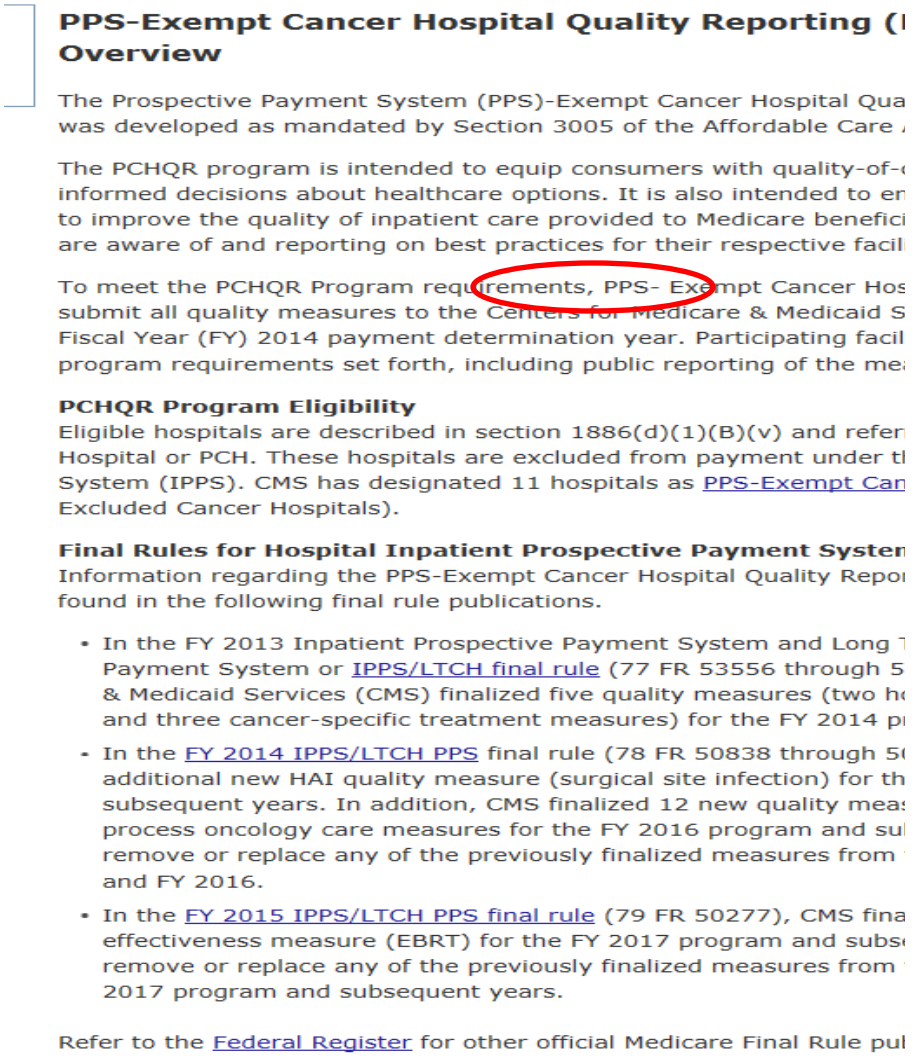
Click on the PPS-Exempt Cancer Hospital Quality Reporting Program.



PPS-Exempt Cancer Hospitals Quality Reporting Program Page

The PCHQR Program page provides:

- List of hospitals in PCHQR program
- Links to the FY Final Rules with PCHQR sections
- Link to the Federal Register website



PPS-Exempt Cancer Hospital Quality Reporting (I
Overview

The Prospective Payment System (PPS)-Exempt Cancer Hospital Qua
was developed as mandated by Section 3005 of the Affordable Care

The PCHQR program is intended to equip consumers with quality-of-
informed decisions about healthcare options. It is also intended to en
to improve the quality of inpatient care provided to Medicare benefici
are aware of and reporting on best practices for their respective facil

To meet the PCHQR Program requirements, PPS- Exempt Cancer Hos
submit all quality measures to the Centers for Medicare & Medicaid S
Fiscal Year (FY) 2014 payment determination year. Participating facil
program requirements set forth, including public reporting of the mea

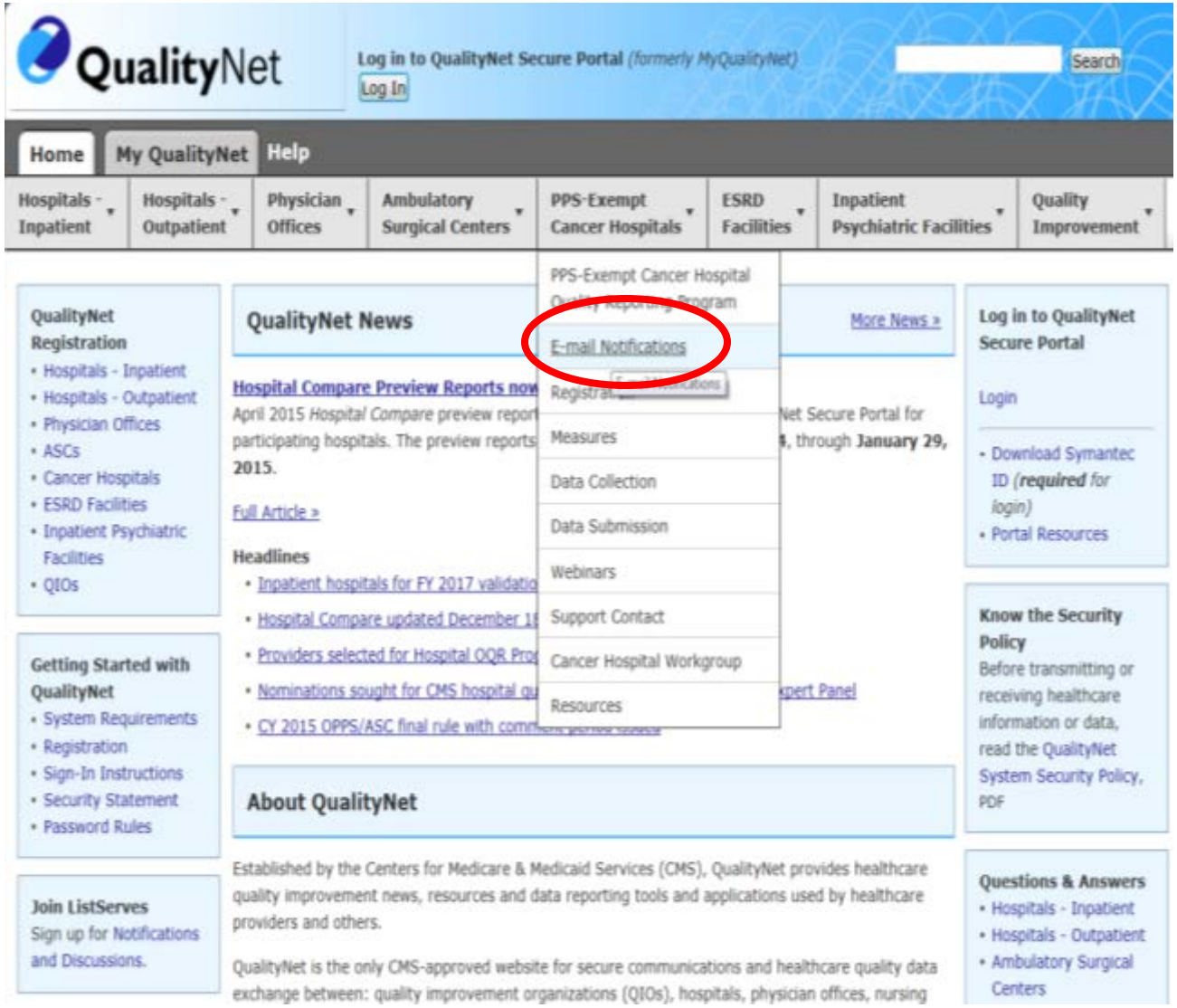
PCHQR Program Eligibility
Eligible hospitals are described in section 1886(d)(1)(B)(v) and refer
Hospital or PCH. These hospitals are excluded from payment under th
System (IPPS). CMS has designated 11 hospitals as PPS-Exempt Can
Excluded Cancer Hospitals).

Final Rules for Hospital Inpatient Prospective Payment Systen
Information regarding the PPS-Exempt Cancer Hospital Quality Repor
found in the following final rule publications.

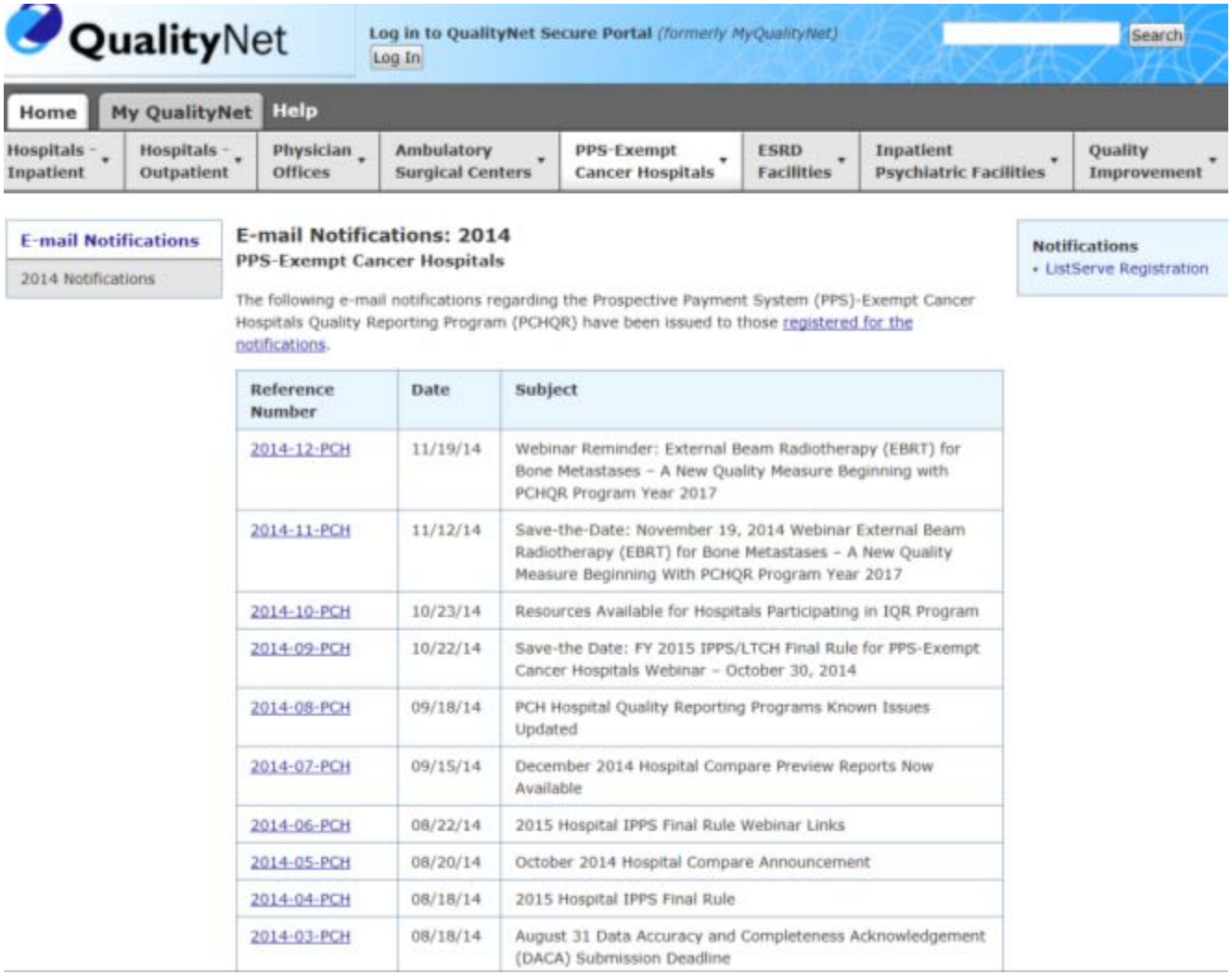
- In the FY 2013 Inpatient Prospective Payment System and Long T
  Payment System or IPPS/LTCH final rule (77 FR 53556 through 5
  & Medicaid Services (CMS) finalized five quality measures (two h
  and three cancer-specific treatment measures) for the FY 2014 p
- In the FY 2014 IPPS/LTCH PPS final rule (78 FR 50838 through 5
  additional new HAI quality measure (surgical site infection) for th
  subsequent years. In addition, CMS finalized 12 new quality meas
  process oncology care measures for the FY 2016 program and su
  remove or replace any of the previously finalized measures from
  and FY 2016.
- In the FY 2015 IPPS/LTCH PPS final rule (79 FR 50277), CMS fina
  effectiveness measure (EBRT) for the FY 2017 program and subs
  remove or replace any of the previously finalized measures from
  2017 program and subsequent years.

Refer to the Federal Register for other official Medicare Final Rule pul

PPS-Exempt Cancer Hospitals E-mail Notifications Tab



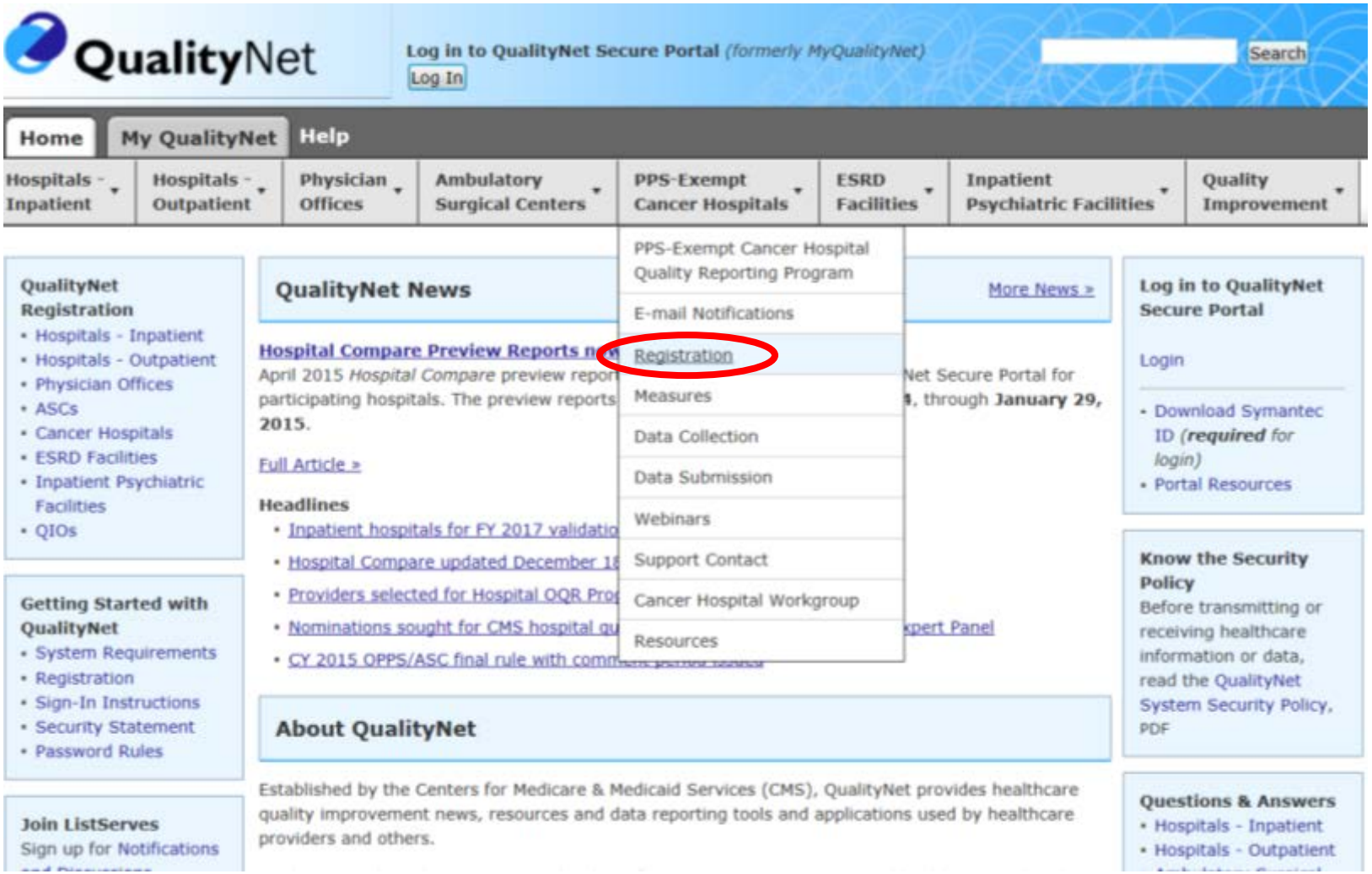
PPS-Exempt Cancer Hospitals E-mail Notifications Page



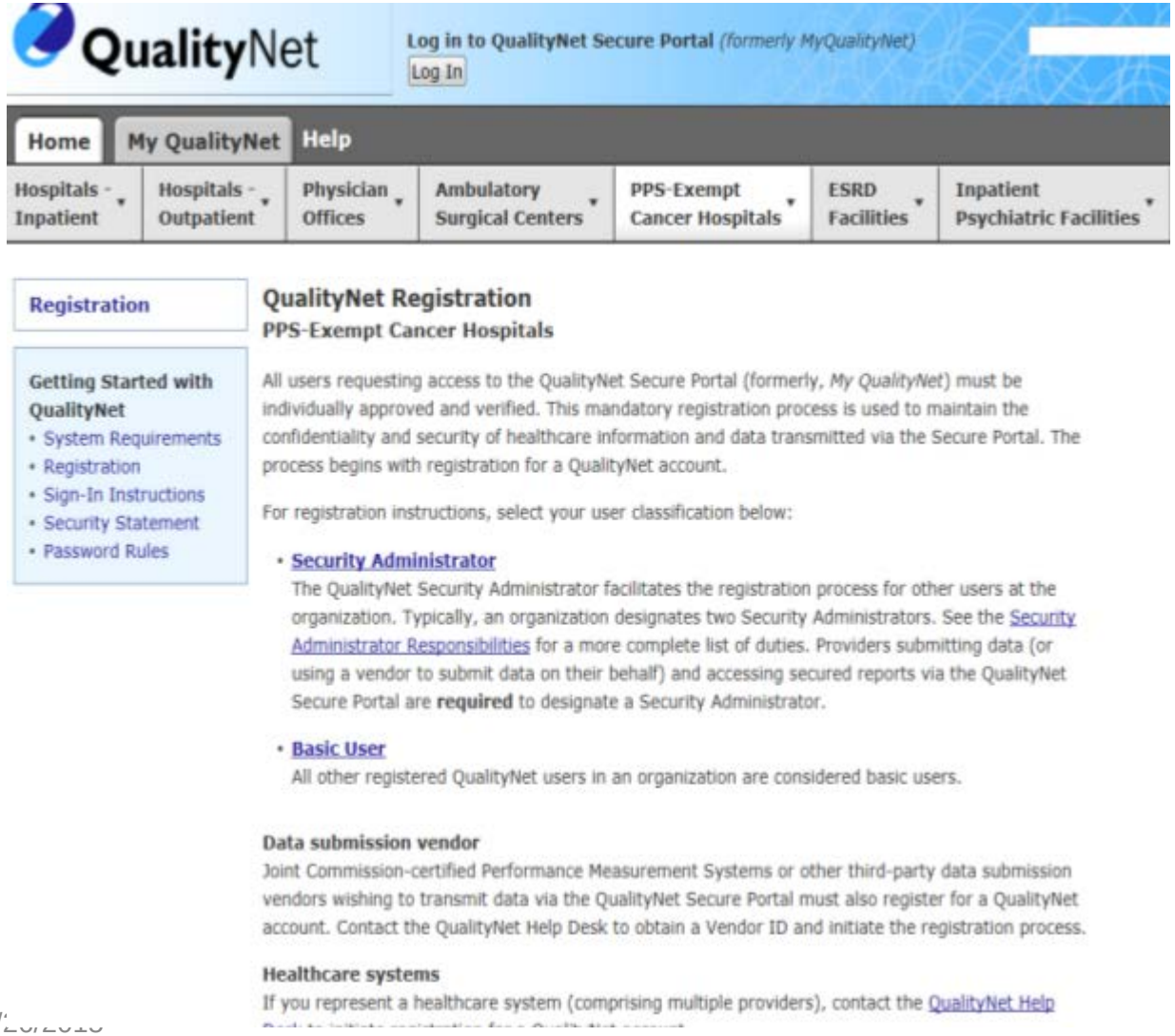
The E-mail Notifications page provides:

- Access to CMS-approved PCH ListServe notifications distributed since August 2014
- Listserve registration

PPS-Exempt Cancer Hospitals Registration Tab



PPS-Exempt Cancer Hospitals Registration Page



The PCHQR Registration Page provides:

- Information about registering on *QualityNet* as a Security Administrator (SA) or a Basic User

Each hospital should have at least two team members registered as SAs.

Important Reminders for Hospitals Regarding SAs

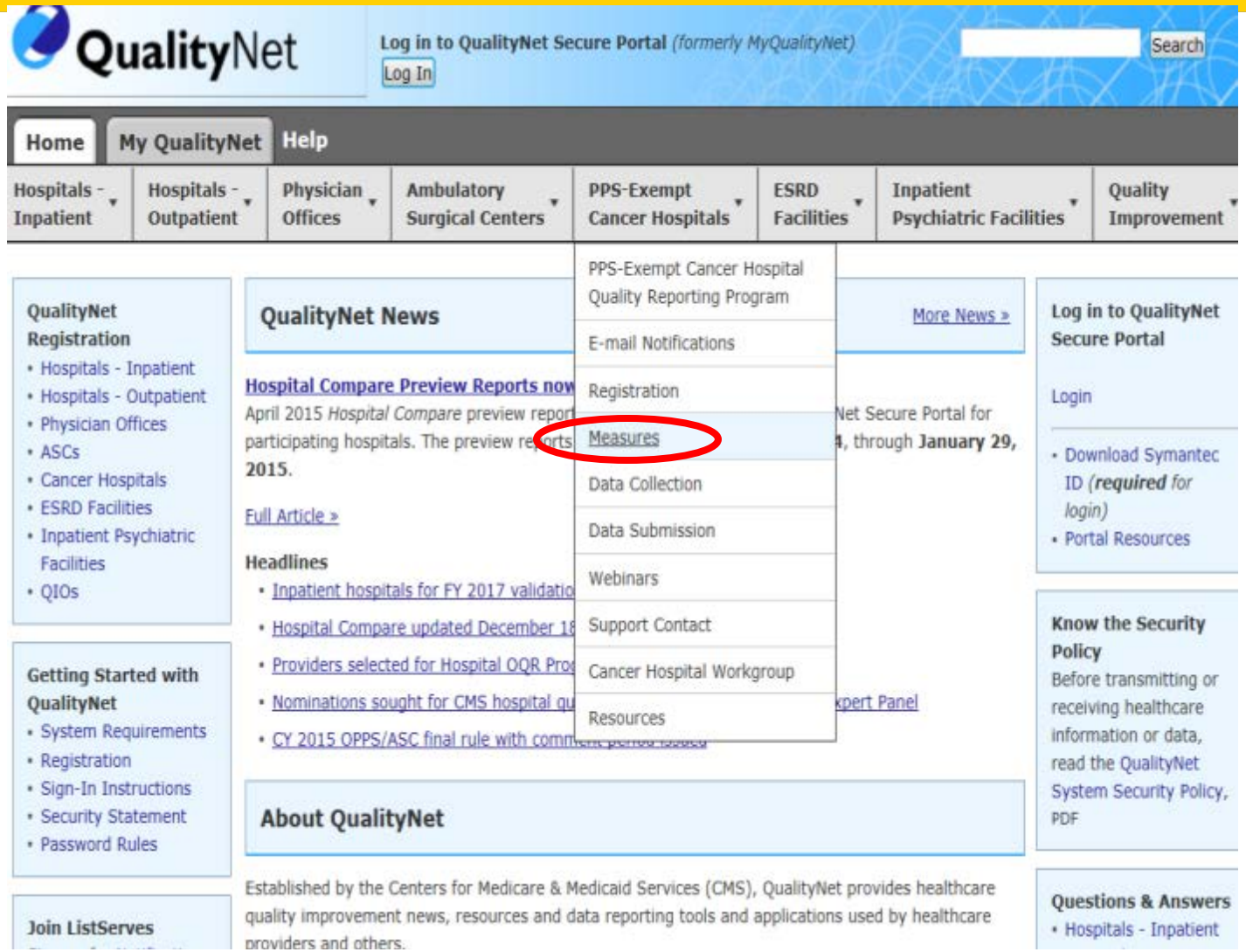
Each hospital should have at least two *QualityNet* SAs.

- This is important for backup in the event of illness, vacations, or position status changes during a data submission period.

SAs must log into QualityNet at least every 60 days to keep their account active.

- If an SA (or other QualityNet user) has not logged in for more than 60 days, their account may be deactivated.
  - This could pose a problem during a data submission period.

PPS-Exempt Cancer Hospitals Measures Tab



PPS-Exempt Cancer Hospitals Measures Page

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Progra

Hospitals participating in the PPS-Exempt Cancer Hospital Quality Reporting
required to report the following measures endorsed by the National Quality F
the specified program year reporting requirements as outlined in the current
final rules.

Refer to the Data Collection page for measure specifications. Refer to the Da
submission deadlines. Refer to the Measure Crosswalk for an accessible, prin
information displayed below.

**Finalized measures for inclusion in the PCHQR Program (by me
program year)**

Table 1: Safety and Healthcare-Associated Infection (HAI) Measures
Y = Applicable for stated program year; N/A = Not Applicable for stated program ye

NQF #	Measure Name	FY 2014	FY 2015	FY 2(
0139	NHSN Central Line-Associated Bloodstream Infection (CLABSI) Outcome Measure	Y	Y	Y
0138	NHSN Catheter-Associated Urinary Tract Infections (CAUTI) Outcome Measure	Y	Y	Y
0753	Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure	N/A	Y	Y

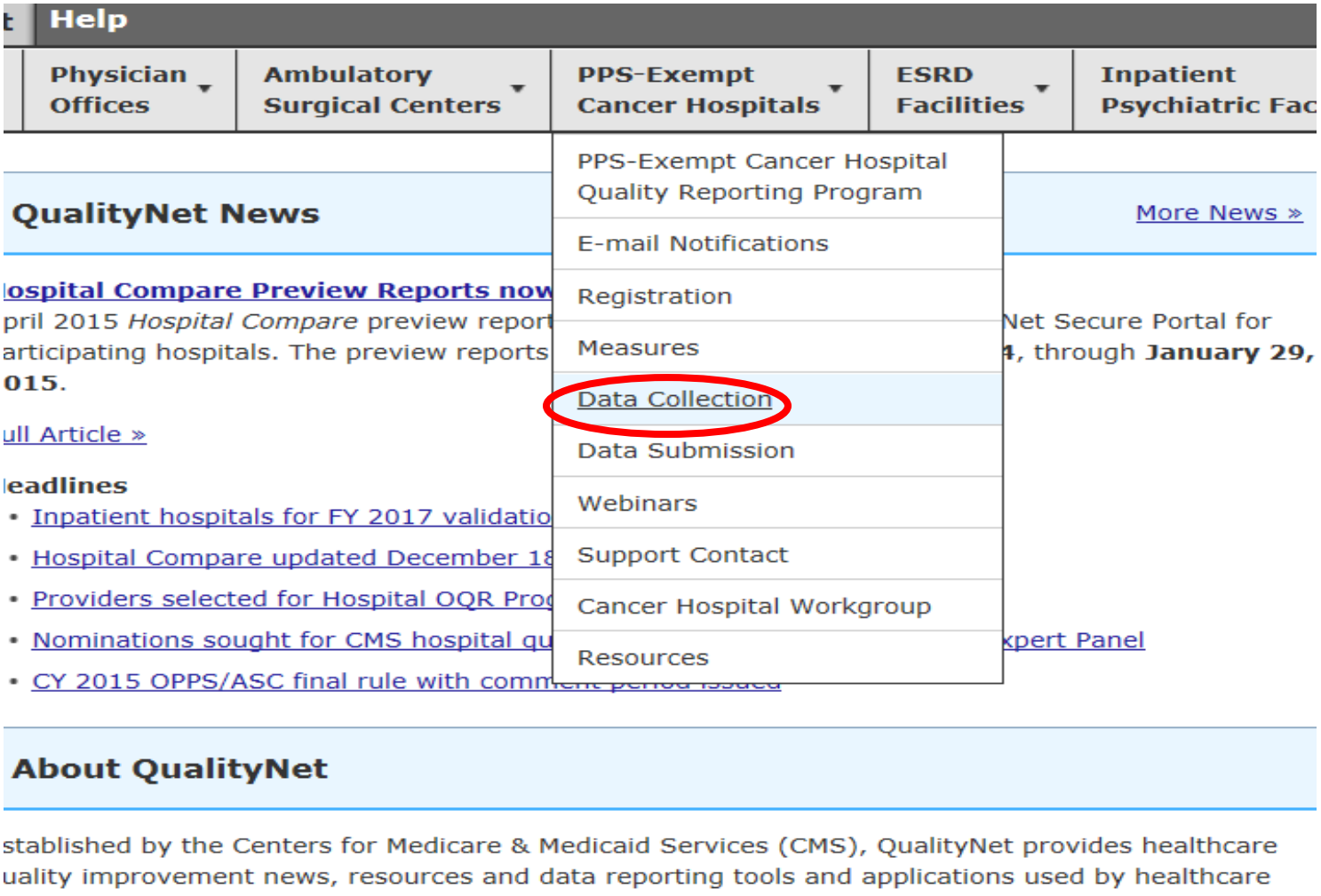
Table 2: Clinical Process/Cancer-Specific Treatment Measures
Y = Applicable for stated program year; N/A = Not Applicable for stated program ye

The PCHQR Measures page provides:

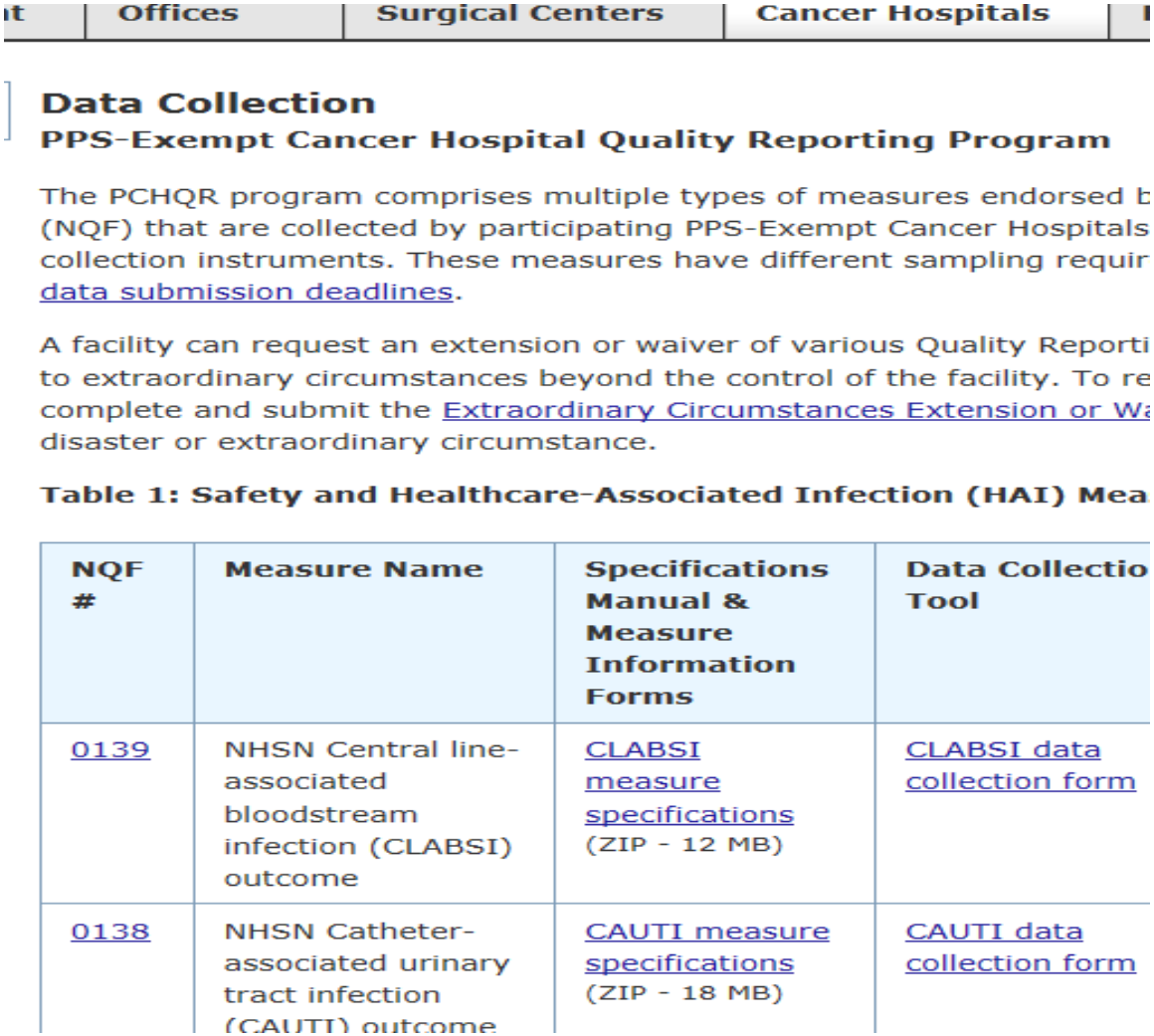
- Table of all PCHQR measures by Program Year
- Link to Final Rules
- Links to other pages
  - Data Collection
  - Data Submission
  - Measure Crosswalk

The Measures page makes it easy to locate measure-specific information quickly and easily.

PPS-Exempt Cancer Hospitals Data Collection Tab



PPS-Exempt Cancer Hospitals Data Collection Tab



Offices | Surgical Centers | Cancer Hospitals

Data Collection

PPS-Exempt Cancer Hospital Quality Reporting Program

The PCHQR program comprises multiple types of measures endorsed b
(NQF) that are collected by participating PPS-Exempt Cancer Hospitals
collection instruments. These measures have different sampling requir
data submission deadlines.

A facility can request an extension or waiver of various Quality Reporti
to extraordinary circumstances beyond the control of the facility. To re
complete and submit the Extraordinary Circumstances Extension or Wa
disaster or extraordinary circumstance.

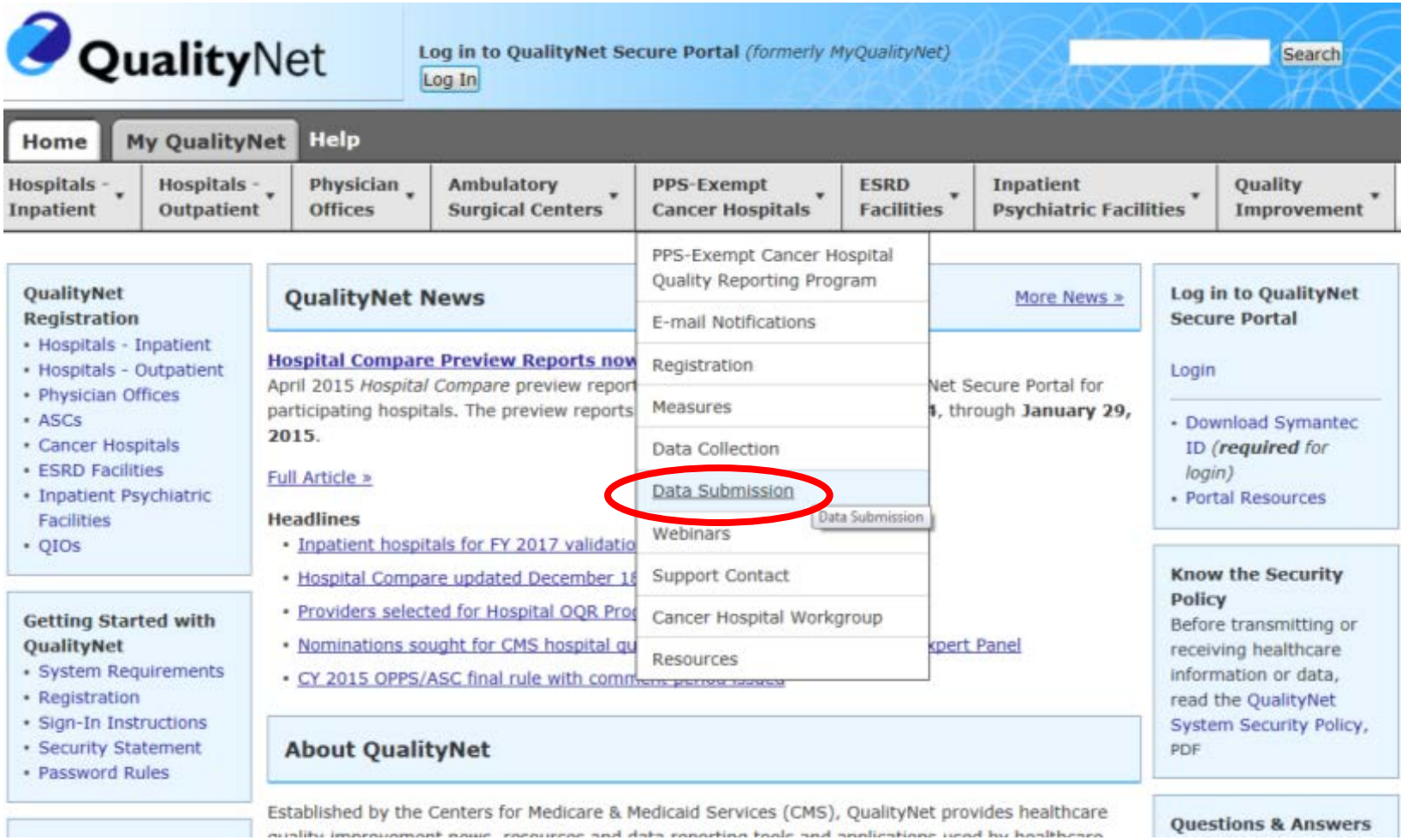
Table 1: Safety and Healthcare-Associated Infection (HAI) Mea

NQF #	Measure Name	Specifications Manual & Measure Information Forms	Data Collectio Tool
0139	NHSN Central line-associated bloodstream infection (CLABSI) outcome	CLABSI measure specifications (ZIP - 12 MB)	CLABSI data collection form
0138	NHSN Catheter-associated urinary tract infection (CAUTI) outcome	CAUTI measure specifications (ZIP - 18 MB)	CAUTI data collection form

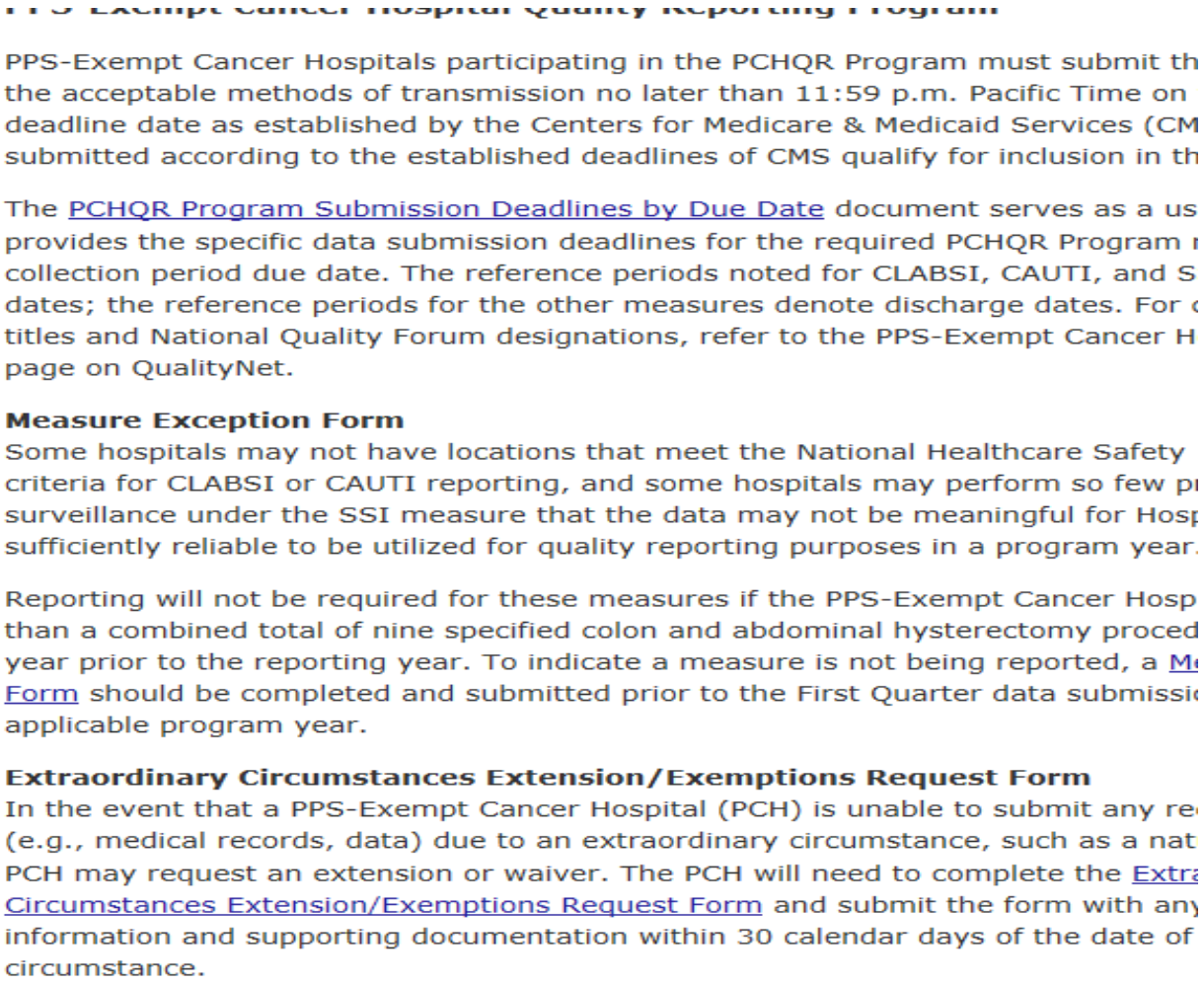
The PCHQR Data Collection page provides:

- Table with links to individual measure information, data collection forms, and data transmission information
- Link to data submission deadlines table
- Link to Extraordinary Circumstances Extension or Waiver form

PPS-Exempt Cancer Hospitals Data Submission Tab



PPS-Exempt Cancer Hospitals Data Submission Page



PPS-Exempt Cancer Hospitals participating in the PCHQR Program must submit th
the acceptable methods of transmission no later than 11:59 p.m. Pacific Time on
deadline date as established by the Centers for Medicare & Medicaid Services (CM
submitted according to the established deadlines of CMS qualify for inclusion in th

The PCHQR Program Submission Deadlines by Due Date document serves as a us
provides the specific data submission deadlines for the required PCHQR Program
collection period due date. The reference periods noted for CLABSI, CAUTI, and S
dates; the reference periods for the other measures denote discharge dates. For
titles and National Quality Forum designations, refer to the PPS-Exempt Cancer H
page on QualityNet.

Measure Exception Form
Some hospitals may not have locations that meet the National Healthcare Safety
criteria for CLABSI or CAUTI reporting, and some hospitals may perform so few pr
surveillance under the SSI measure that the data may not be meaningful for Hosp
sufficiently reliable to be utilized for quality reporting purposes in a program year.

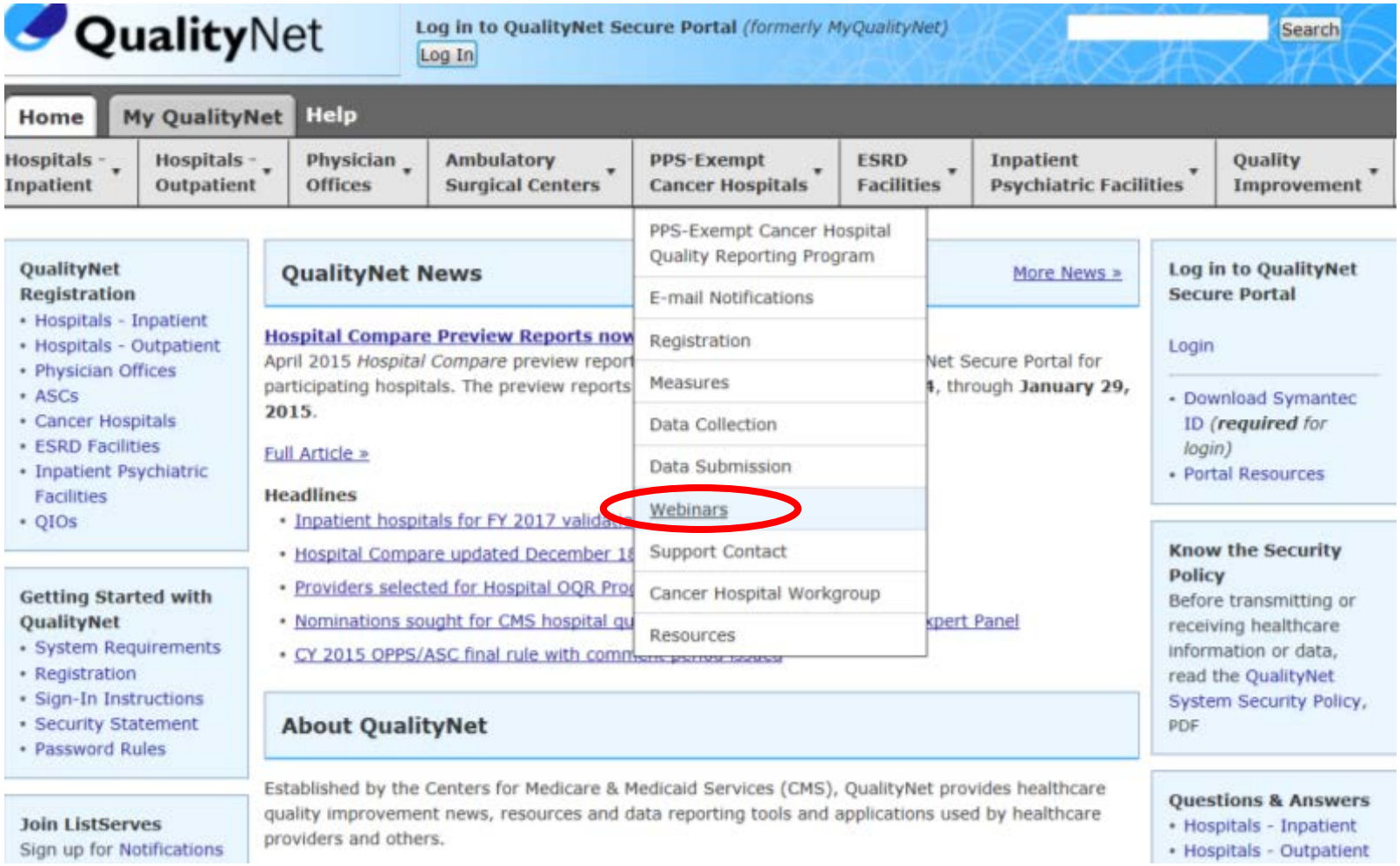
Reporting will not be required for these measures if the PPS-Exempt Cancer Hosp
than a combined total of nine specified colon and abdominal hysterectomy proced
year prior to the reporting year. To indicate a measure is not being reported, a M
Form should be completed and submitted prior to the First Quarter data submissi
applicable program year.

Extraordinary Circumstances Extension/Exemptions Request Form
In the event that a PPS-Exempt Cancer Hospital (PCH) is unable to submit any re
(e.g., medical records, data) due to an extraordinary circumstance, such as a nat
PCH may request an extension or waiver. The PCH will need to complete the Extra
Circumstances Extension/Exemptions Request Form and submit the form with any
information and supporting documentation within 30 calendar days of the date of
circumstance.

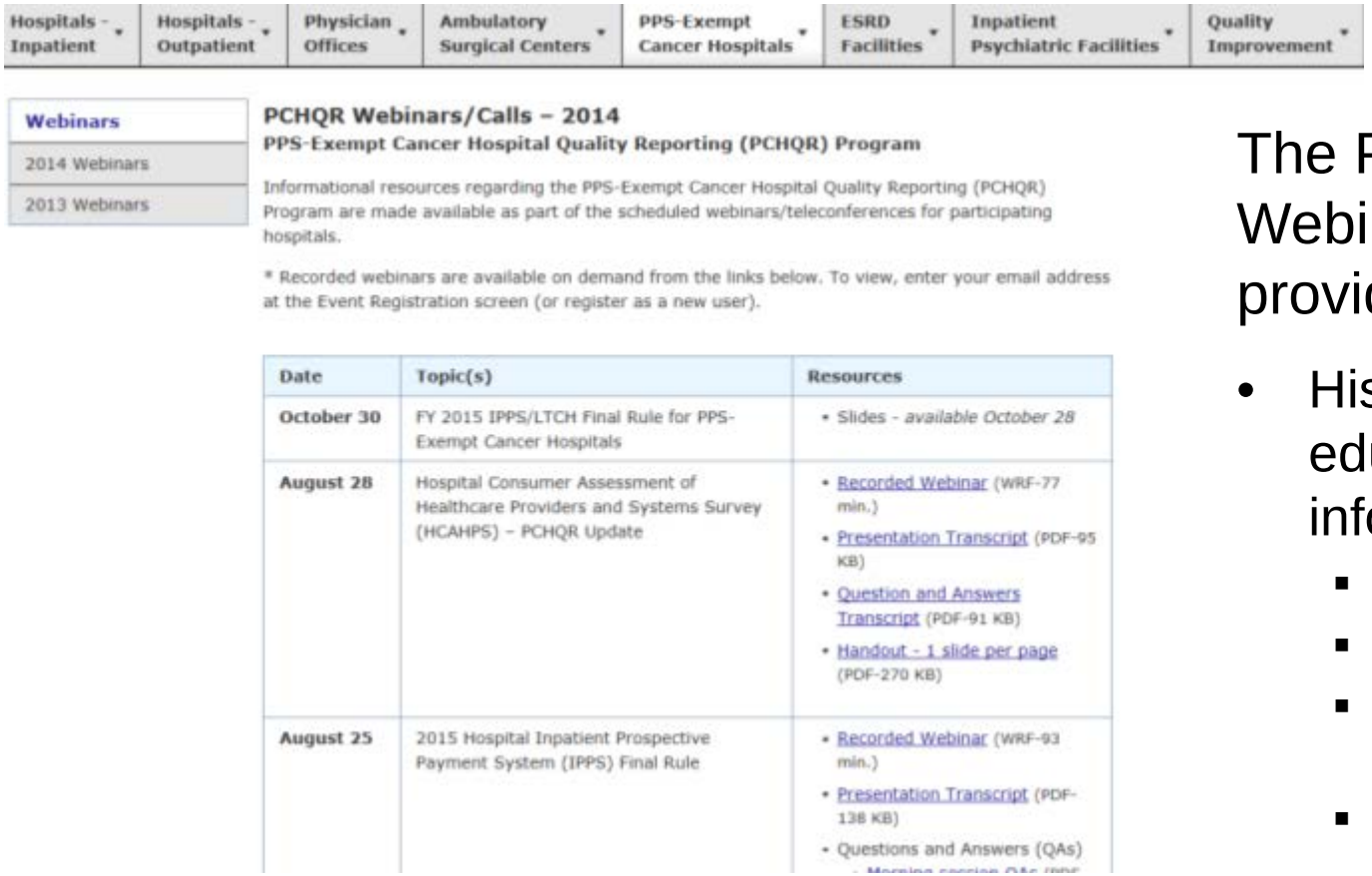
The PCHQR Data Submission page provides:

- Link to Submission Deadlines by Due Date grid
- Link to the Measures page
- Link to the Measure Exception Form
- Link to the Extraordinary Circumstances Extension or Waiver form
- Contact information for form submission

PPS-Exempt Cancer Hospitals Webinars Tab



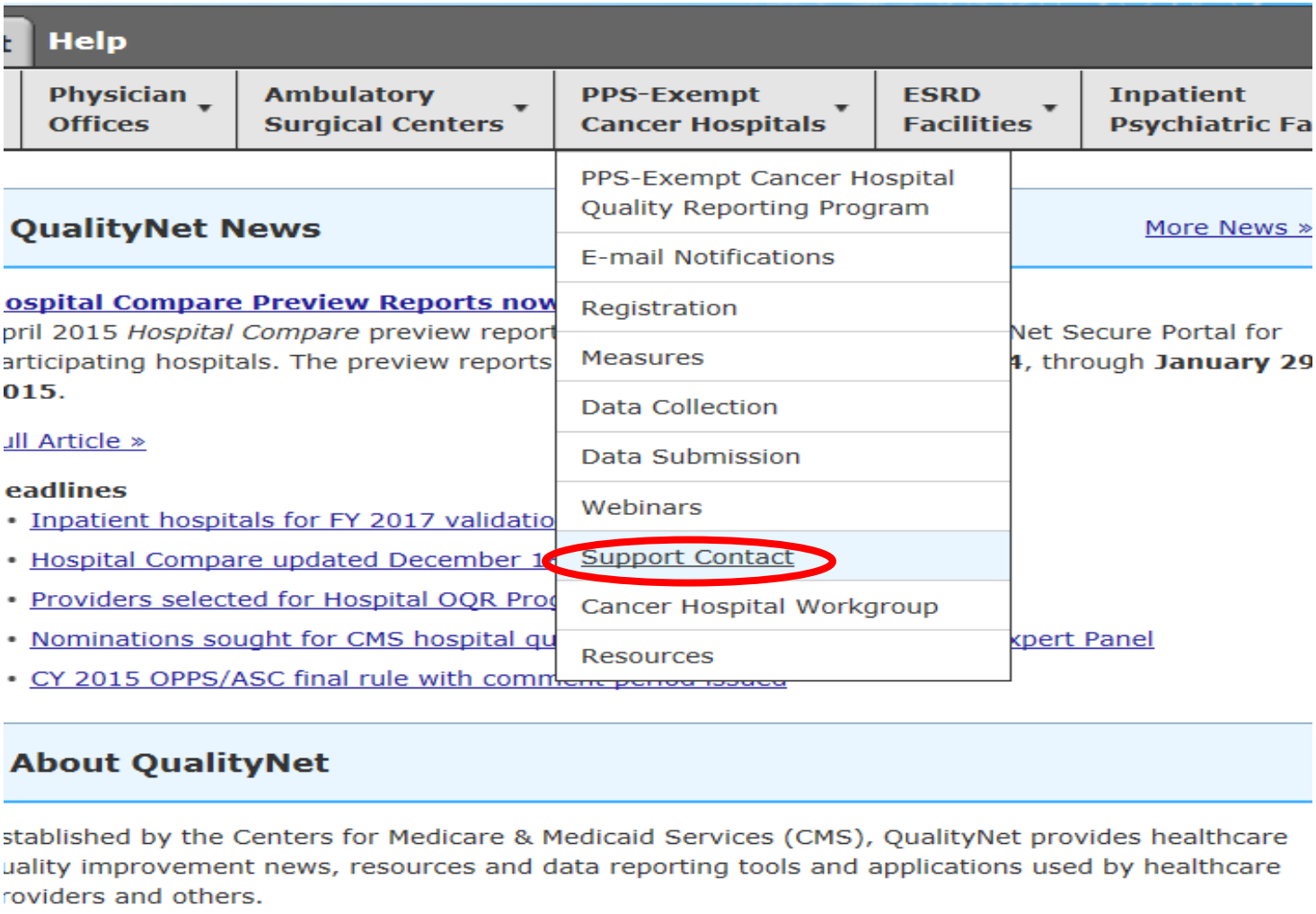
PPS-Exempt Cancer Hospitals Webinars Page



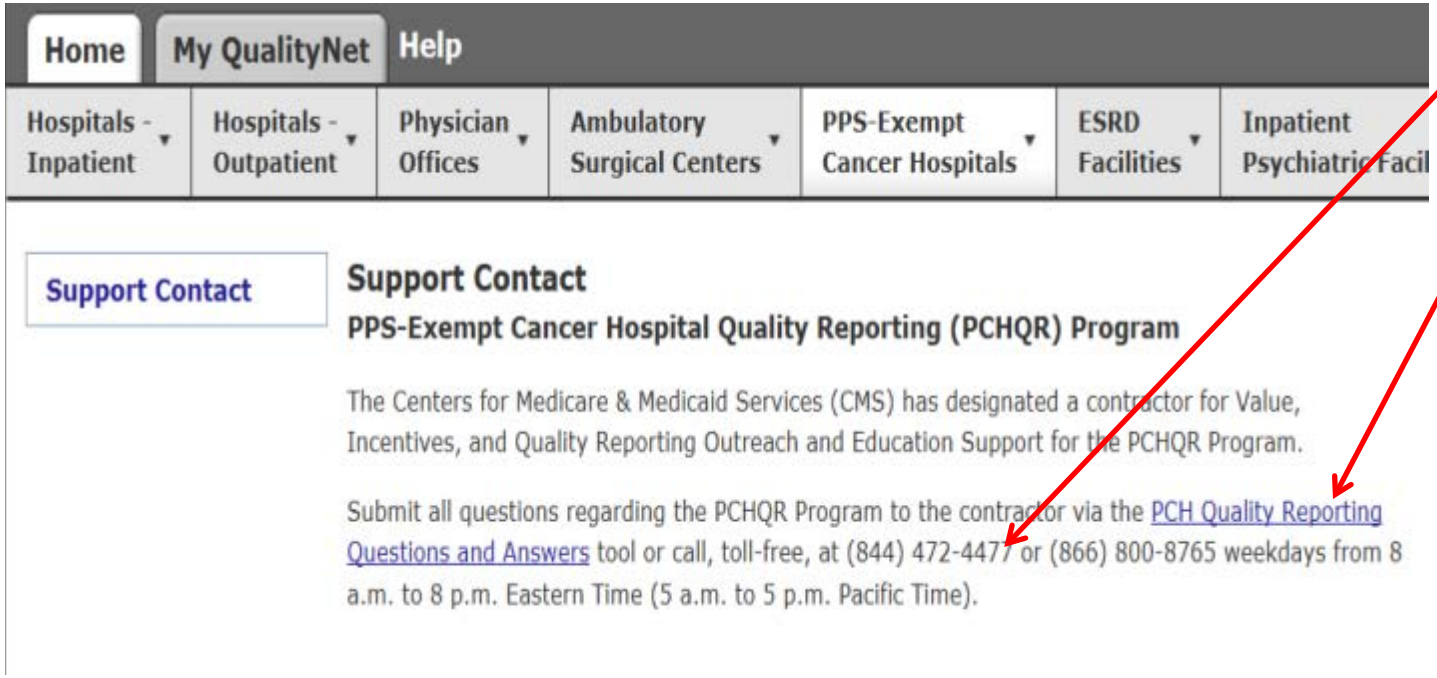
The PCHQR Webinars/Calls page provides:

- Historical access to educational event information
  - Presentation slides
  - Audio recordings
  - Presentation transcripts
  - Q&A transcripts

PPS-Exempt Cancer Hospitals Support Contact Tab

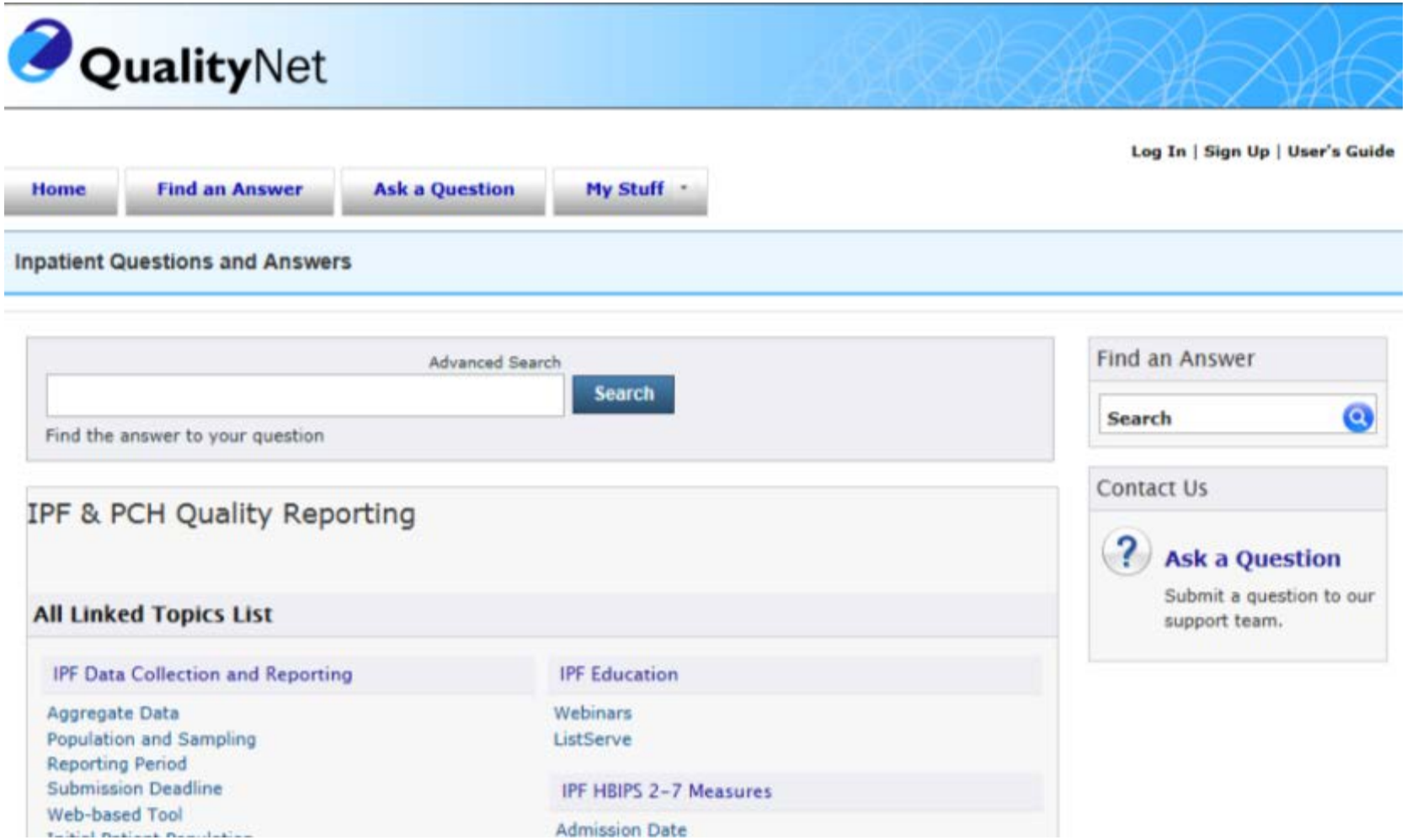


PPS-Exempt Cancer Hospitals Support Contact Page



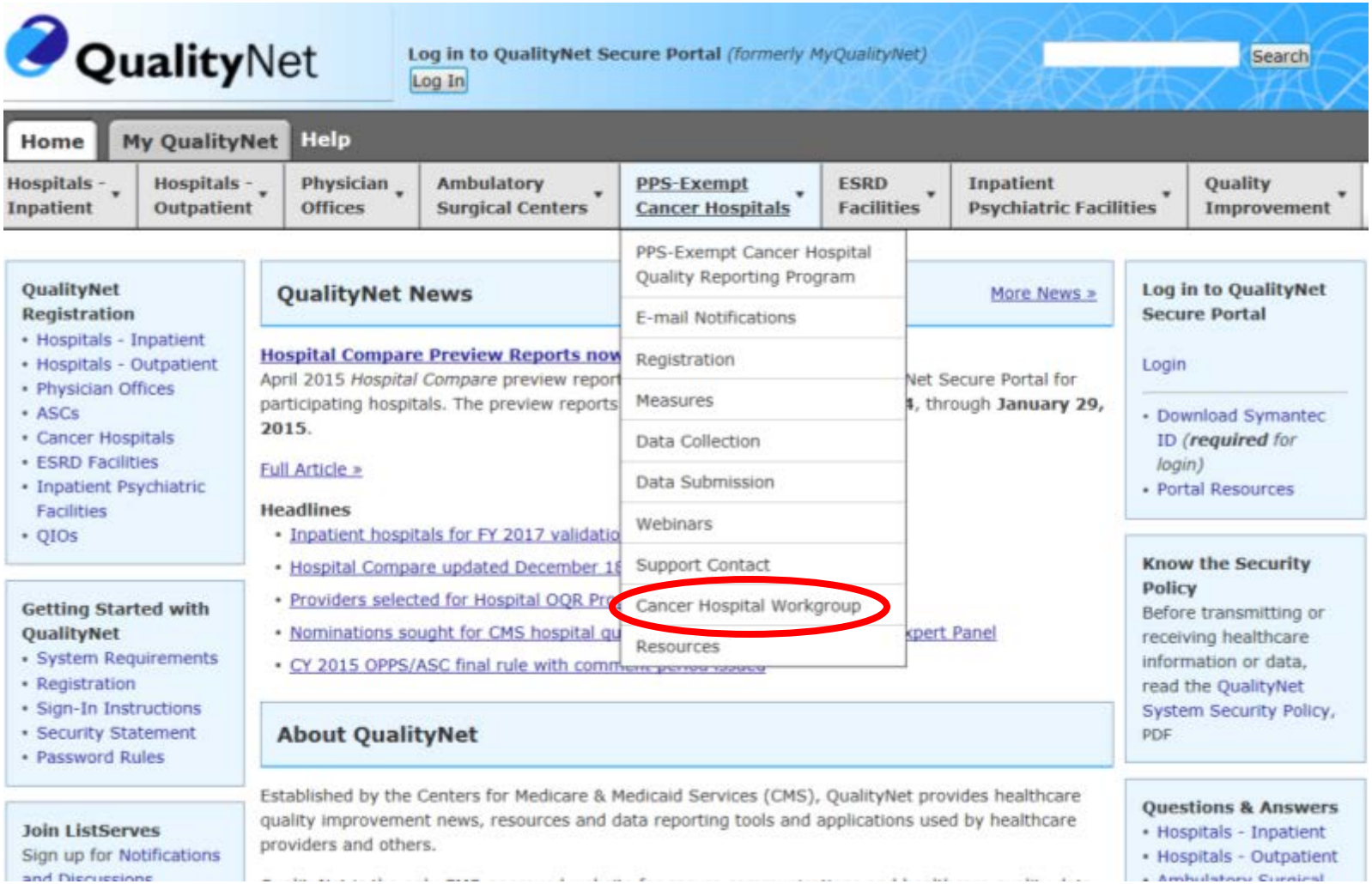
- Contact us by telephone
- Submit questions to the PCH Quality Reporting Questions and Answers Tool

PPS-Exempt Cancer Hospitals Questions and Answers Tool

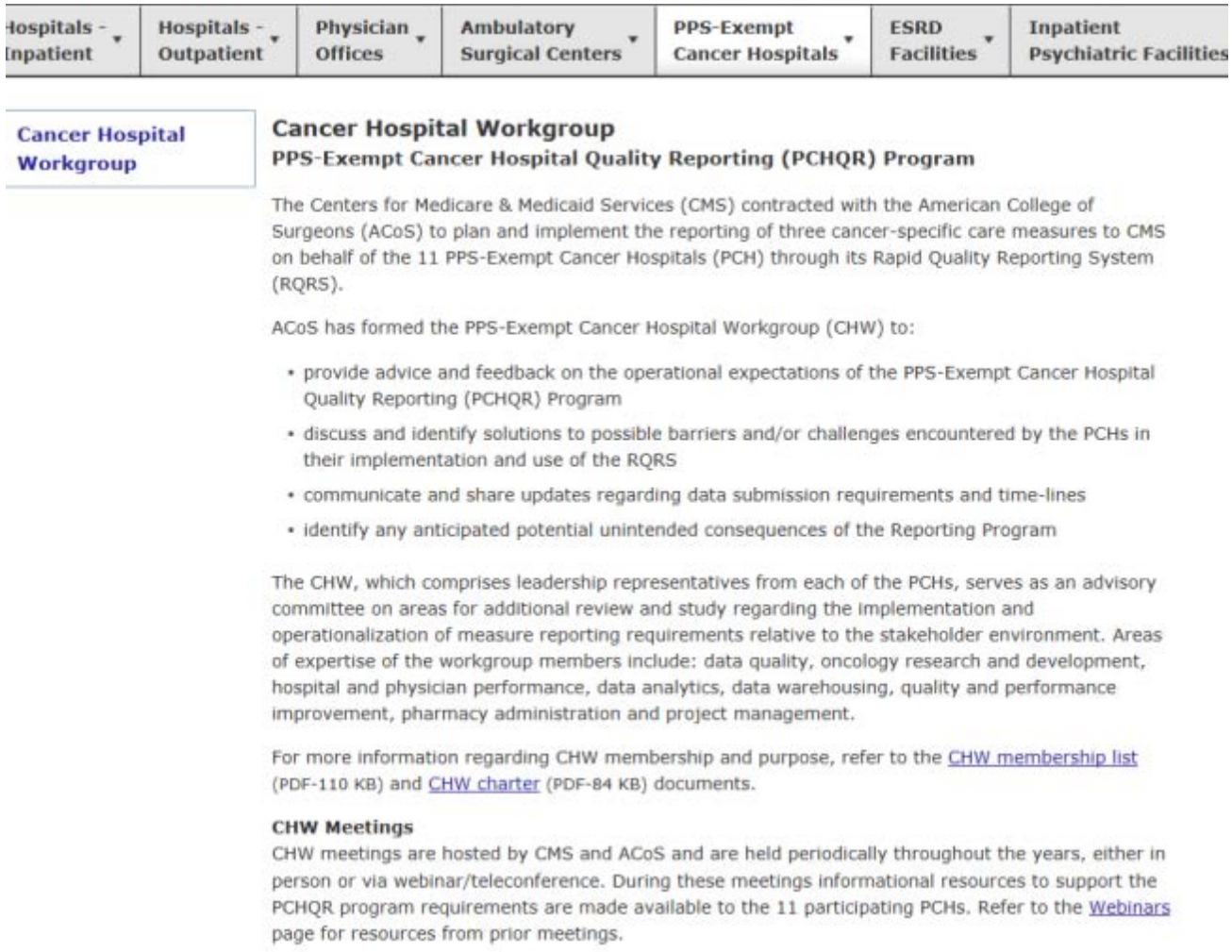


https://cms-ip.custhelp.com/app/home4

PPS-Exempt Cancer Hospitals Cancer Hospital Workgroup Tab



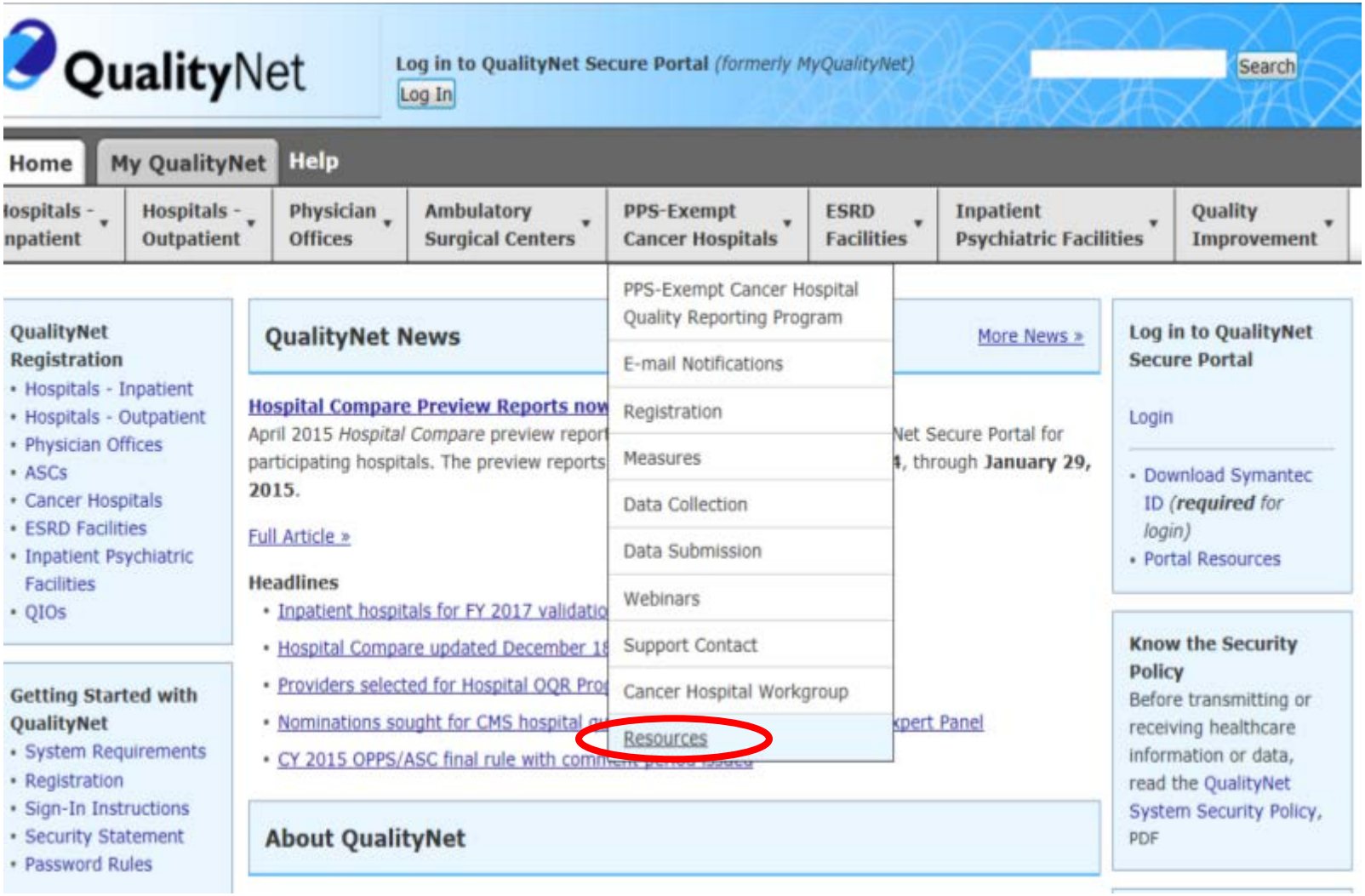
PPS-Exempt Cancer Hospitals Cancer Hospital Workgroup Page



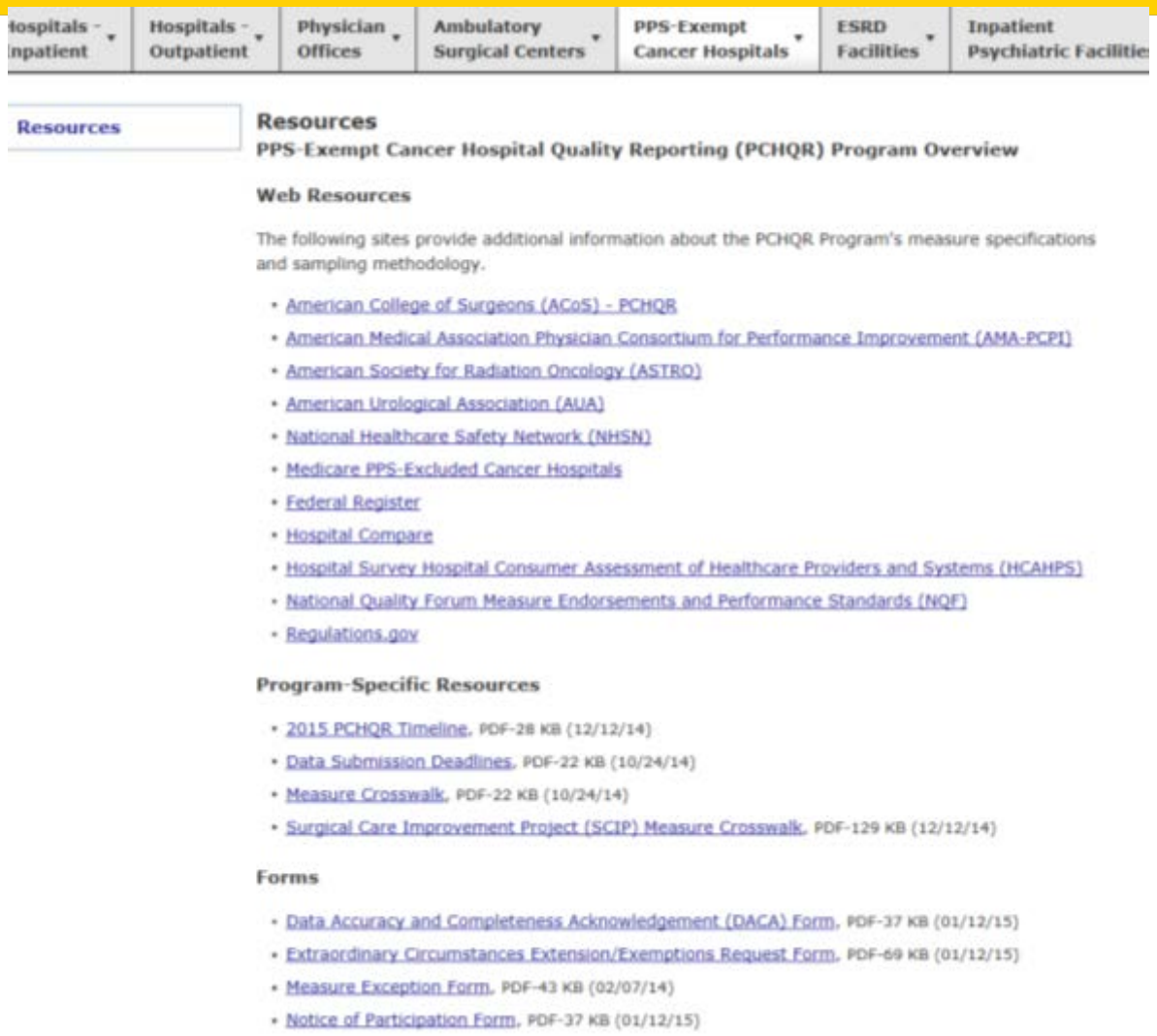
The PCHQR Cancer Hospital Workgroup (CHW) page provides:

- Overview of the CHW
- Links to the CHW membership list and charter
- CHW meeting information
- Link to the Webinars page

PPS-Exempt Cancer Hospitals Resources Tab



PPS-Exempt Cancer Hospitals Resources Page



The PCHQR Resources page provides quick access to:

- Web Resources (outside of *QualityNet*)
- PCH-Specific Resources
- Forms
  - Data Accuracy and Completeness Acknowledgement (DACA)
  - Extraordinary Circumstances Extension/Exemption Request
  - Measure Exception
  - Notice of Participation (NoP)

Questions

This material was prepared by the Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Contractor, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. HHSM-500-2013-13007I, FL-IQR-Ch8-02182015-05