



PPS-Exempt Cancer Hospital Quality Reporting Program

Support Contractor

PCHQR Program: FY 2018 IPPS/LTCH Final Rule

Questions & Answers

Moderator/Speaker

Lisa Vinson, BS, BSN, RN

Project Manager, PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)

Speaker

Caitlin Cromer, MA

Program Lead, PCHQR

Social Science Research Analyst, Quality Measures and Value Incentives Group (QMVIG)
Center for Clinical Standards and Quality (CCSQ), Centers for Medicare and Medicaid Services
(CMS)

August 24, 2017

2 p.m. ET

DISCLAIMER: This presentation question-and-answer transcript was current at the time of publication and/or upload onto the *Quality Reporting Center* and *QualityNet* websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to these questions and answers change following the date of posting, these questions and answers will not necessarily reflect those changes; given that they will remain as an archived copy, they will not be updated.

The written responses to the questions asked during the presentation were prepared as a service to the public and are not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the question-and-answer session and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.



PPS-Exempt Cancer Hospital Quality Reporting Program

Support Contractor

Question 1: Are National Quality Forum (NQF) measures #0210 and #0215 chart-abstracted measures? How is reporting of these measures required (for example, is it reported as aggregate data)?

Thank you for the inquiry. All of the end-of-life (EOL) measures (NQF #0210, #0213, #0215, and #0216) added to the PCHQR Program in the Fiscal Year (FY) 2018 Inpatient Prospective Payment System/Long Term Care Hospital (IPPS/LTCH) Final Rule are proposed as claims-based measures. As such, they should be derived from Medicare administrative data and chart abstraction is not anticipated at this time. Measure results will be presented as aggregate performance data.

Question 2: For the EOL measures, will the PPS-exempt cancer hospitals (PCHs) be provided dry run reports with patient level detail for review

Thank you for your inquiry. The FY 2018 IPPS/LTCH Final Rule does not speak to conducting a dry run for the end-of-life measures. As always, please monitor the PCHQR Program communications for future plans and announcements pertaining to the activities of the Program.

Question 3: Are all of the PCHs aware that the measure developer will be sending new Facility-Specific Reports (FSRs) to the PCHs as part of the dry run for the Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy measure?

As communicated yesterday during the National Provider Call for this measure, there was an error in the calculations used in the FSRs that were distributed to the PCHs. The measure developer will be distributing new FSRs with corrected data in the near future. Also, the dry run dates will be extended. Please monitor Program Listserves and *QualityNet* for further updates. Thank you!



PPS-Exempt Cancer Hospital Quality Reporting Program

Support Contractor

Question 4: Slide 45 in the presentation materials refers to the Central Line-Associated Bloodstream Infection (CLABSI) data submitted by the Centers for Disease Control and Prevention (CDC) on behalf of the PCHs. Are those infections that meet the Mucosal Barrier Infection – Laboratory Confirmed Bloodstream Infection definition included in the total number of CLABSI events reported to CMS?

Yes. The CDC does not exclude these events from the total number of CLABSI events reported to CMS for participants in the PCHQR Program.