

# Welcome!

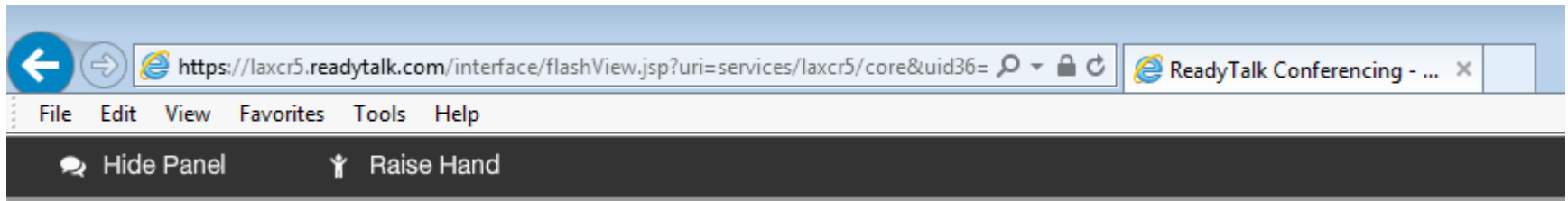
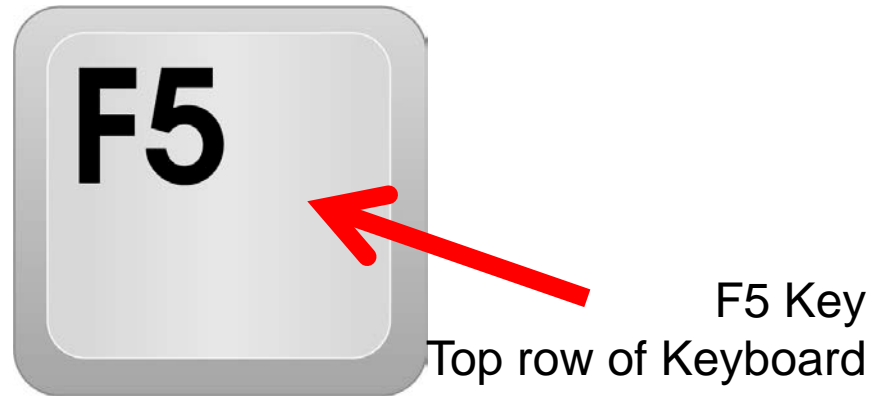
- **Audio for this event is available via ReadyTalk® Internet Streaming.**
- **No telephone line is required.**
- **Computer speakers or headphones are necessary to listen to streaming audio.**
- **Limited dial-in lines are available. Please send a chat message if needed.**
- **This event is being recorded.**



# Troubleshooting Audio

Audio from  
computer speakers  
breaking up?  
Audio suddenly  
stop?

- Click Refresh icon  
– or-  
Click F5

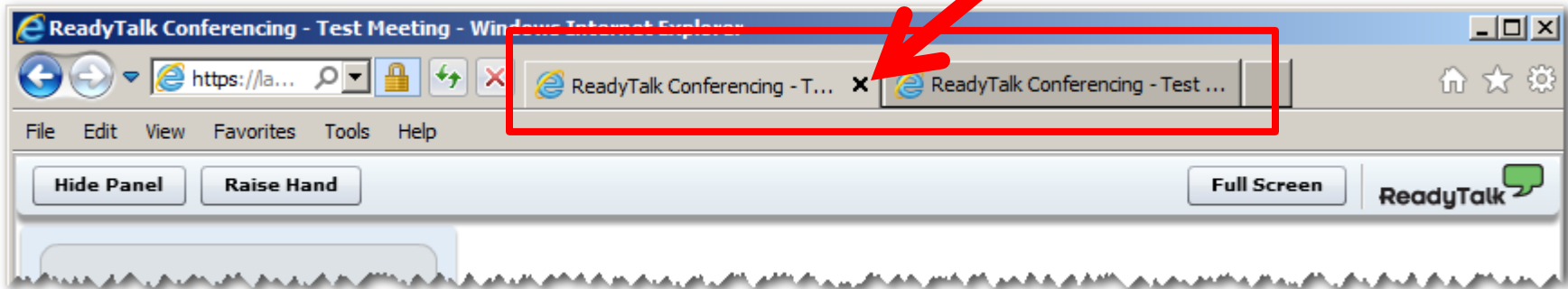


Location of Buttons



# Troubleshooting Echo

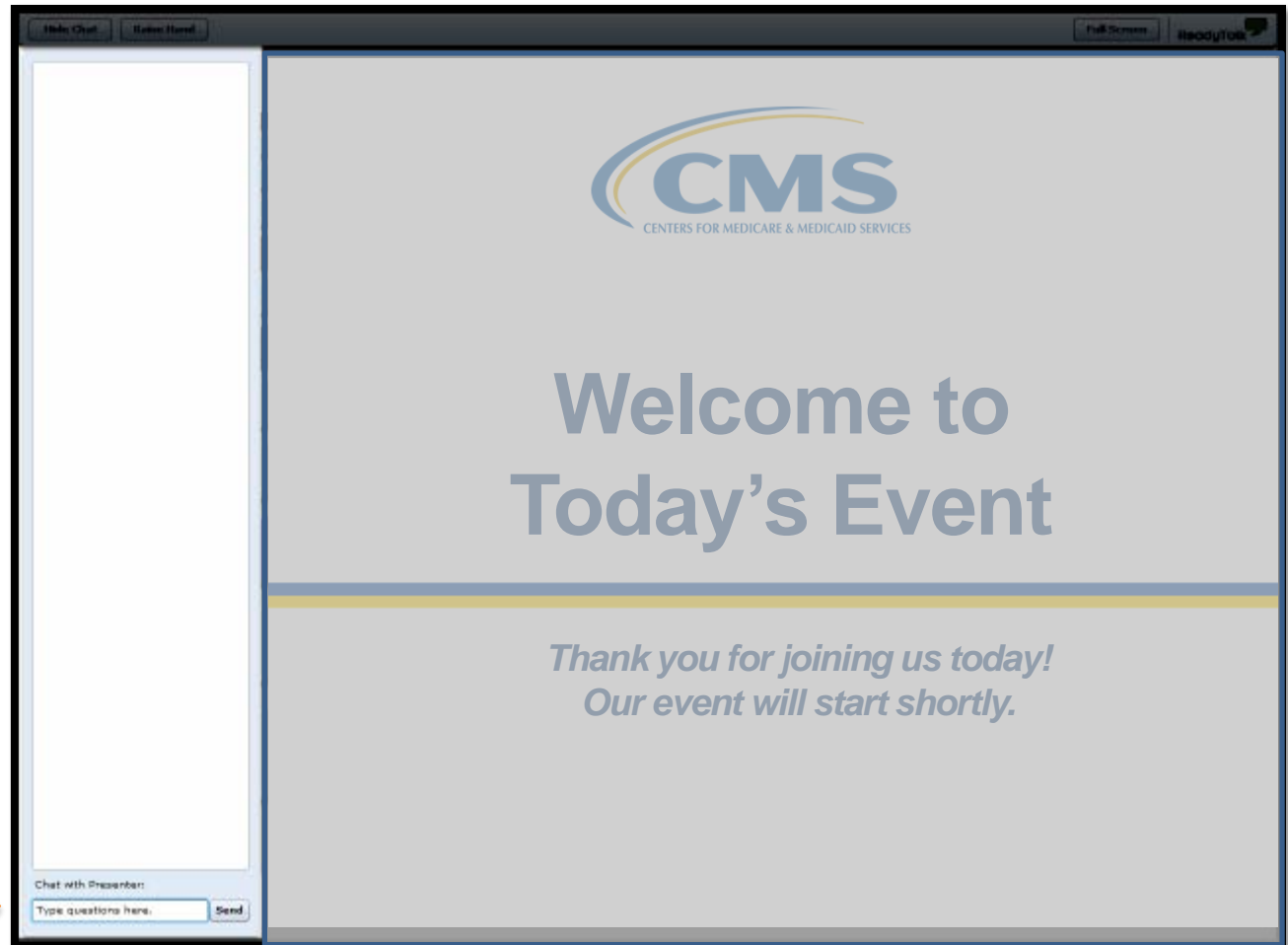
- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.
- Close all but one browser/tab and the echo will clear.



*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.





# **PCHQR Program Web-Based Data Collection Tool**

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**March 23, 2017**

# Acronyms and Abbreviations

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

# Purpose

This presentation will provide participants in the PCHQR Program an overview of the new WBDCT. Located on *QualityNet*, this tool will be used by Program participants to submit their CST, EBRT, and OCM data.

# Objectives

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

- Locate the WBDCT on *QualityNet*
- Utilize the tool to enter their CST, EBRT, and OCM data
- Review their data to ensure accuracy and completeness



# Log into *QualityNet*

The screenshot shows the QualityNet website interface. At the top left is the QualityNet logo. To its right is the text "Log in to QualityNet Secure Portal (formerly MyQualityNet)" with a "Log In" button highlighted in a red box. Further right is a search bar with a "Search" button. Below this is a navigation bar with "Home", "My QualityNet" (highlighted in a red box), and "Help". Underneath are several menu items: "Hospitals - Inpatient", "Hospitals - Outpatient", "Physician Offices", "Ambulatory Surgical Centers", "PPS-Exempt Cancer Hospitals", "ESRD Facilities", "Inpatient Psychiatric Facilities", and "Quality Improvement".

On the left side, there are two sections: "QualityNet Registration" with a list of links (Hospitals - Inpatient, Hospitals - Outpatient, Physician Offices, ASCs, Cancer Hospitals, ESRD Facilities, Inpatient Psychiatric Facilities, QIOs) and "Getting Started with QualityNet" with a list of links (Registration, Sign-In Instructions, Security Statement, Password Rules).

In the center, there is a yellow maintenance notice: "Maintenance downtime scheduled for March 17-20" with details about the downtime. Below this is a "QualityNet News" section with a "More News »" link. A news item is titled "Hospital Value-Based Purchasing (VBP) FY 2019 Baseline Measures Report now available" and provides information about the report and links to "How to Read Your FY 2019 Baseline Measures Report" and "FY 2019 Domain Weighting Quick Reference Guide".

On the right side, there is a "Log in to QualityNet Secure Portal" section with a "Login" button highlighted in a red box. Below this are links for "Download Symantec ID (required for login)" and "Portal Resources". At the bottom right is a "Questions & Answers" section with a list of links (Hospitals - Inpatient, Hospitals - Outpatient, Ambulatory Surgical Centers, Inpatient Psychiatric Facilities, PPS-Exempt Cancer Hospitals).

To log into *QualityNet*, click on any of the links highlighted in the red boxes.

# Choose Your Program

The Choose Your *QualityNet* Destination screen appears.

**CMS.gov** | QualityNet  
Centers for Medicare & Medicaid Services

### Choose Your QualityNet Destination

Please select your primary quality program to reach the correct login screen for your QualityNet portal.

Secure File Transfer

Select your primary quality program:

- End-Stage Renal Disease Quality Reporting System
- Ambulatory Surgical Center Quality Reporting Program
- PPS-Exempt Cancer Hospital Quality Reporting Program**
- Inpatient Hospital Quality Reporting Program
- Inpatient Psychiatric Facility Quality Reporting Program
- Outpatient Hospital Quality Reporting Program
- Physician Quality Reporting System
- Quality Improvement Organizations

CANCEL

The **PPS-Exempt Cancer Hospital Quality Reporting Program** link

# Enter Credentials into *QualityNet*

**CMS.gov** | QualityNet  
Centers for Medicare & Medicaid Services

**Log In to QualityNet** \*Required Field  
Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit.

\* User ID

\* Password

\* Security Code

CANCEL SUBMIT

**Help**  
Start/Complete New User Enrollment  
Forgot your password?  
Trouble with your Security Code?  
Need to register for a QualityNet account?

- To log into *QualityNet***
1. Enter your User ID, Password, and Security Code
  2. Select “SUBMIT”
  3. Select “I Accept” on the Terms and Conditions window that appears
- Note:** If you select “I Decline” on the Terms and Conditions window, the program will close.

# Proceed to “Quality Programs” and Select “Hospital Quality Reporting”

The screenshot shows the CMS QualityNet website interface. At the top left, the logo reads "CMS .gov | QualityNet". Below the logo is a navigation bar with three items: "Home", "Quality Programs", and "Help", each with a downward arrow. The "Quality Programs" menu is open, displaying a list of options: "Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR", "Hospital Inpatient/Outpatient Quality Reporting Program", "Physician Quality Reporting System", "End Stage Renal Disease Quality Reporting System", "Quality Improvement Organizations", and "Physician Quality Reporting System/ eRx". The first option is highlighted with a red box. Below the navigation bar, there is a "Welcome" message and a section titled "QualityNet Security" which provides information about secure communication and access instructions. At the bottom, there is a section titled "Quality Programs" with a list of links to various reporting systems.

## Step 1

Click on down arrow next to “Quality Programs”

## Step 2

Click on “Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR”

# Quality Reporting System: My Tasks

## Select “View/Edit Structural/Web-Based Measures/ Data Acknowledgement (DACA)”

**CMS** | QualityNet  
.gov

Home ▾      Quality Programs ▾      My Reports ▾      Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR

### Quality Reporting System: My Tasks

<b>Manage Measures</b> <a href="#">View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)</a>	<b>Manage Security</b> <a href="#">Manage Multifactor Credentials</a> <a href="#">My Account</a>
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# Start: Structural/Web-Based Measures

## Select “PPS Exempt Cancer Hospitals Web-Based Measures”

The screenshot shows the CMS QualityNet interface. At the top left is the CMS.gov logo and QualityNet text. Below it is a navigation bar with links for Home, Quality Programs, My Reports, and Help. A breadcrumb trail reads: Home > Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA). The main heading is "Start Structural/Web-Based Measures". Below this is a sub-heading "View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)". On the left, a light blue box contains two paragraphs: "A structural measure reflects the environment in which providers care for patients. Structural measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes requesting structural measures information will encourage facilities to increase the use of tools, ultimately improving the quality of care provided to Medicare beneficiaries." and "Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients." On the right, a yellow box titled "Select a Program" contains two options: "PPS Exempt Cancer Hospitals Web-Based Measures" (highlighted with a red border) and "PPS Exempt Cancer Hospitals DACA".

**CMS** | QualityNet  
.gov

Home ▾      Quality Programs ▾      My Reports ▾      Help ▾

Home > Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

**Start** Structural/Web-Based Measures

View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

A structural measure reflects the environment in which providers care for patients. Structural measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes requesting structural measures information will encourage facilities to increase the use of tools, ultimately improving the quality of care provided to Medicare beneficiaries.

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

**Select a Program**

**PPS Exempt Cancer Hospitals Web-Based Measures**

PPS Exempt Cancer Hospitals DACA

# PPS Exempt Cancer Hospitals Web-Based Measures Select Appropriate Fiscal Year

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

**Start** Structural/Web-Based Measures

## PPS Exempt Cancer Hospitals Web-Based Measures

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

Please select a Fiscal Year

-- Select --  
2018  
2017  
2016

Continue

### Notes on Fiscal Year

- FY 2018 – will be used for Q1 – 4 OCM and EBRT data (2016 care)
- FY 2017 – will be used for Quarter 1, 2, 3, and 4, 2016 CST data (2016 diagnosis cohorts)
- FY 2016 – do **not** use

# How Do I Know Which Fiscal Year?

The key is to know the Fiscal Year to which the data that you are reporting applies.

Due Date	Measure(s)	Fiscal Year	Time Period
05/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2017	<b>Q3 2016</b> (7/1/16–9/30/16)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	<b>Q1 2016</b> (1/1/16–3/31/16)
08/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2017	<b>Q4 2016</b> (10/1/16–12/31/16)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	<b>Q2 2016</b> (4/1/16–6/30/16)
	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2018	<b>CY 2016</b> (1/1/16–12/31/16)
11/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q1 2017</b> (1/1/17–3/31/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	<b>Q3 2016</b> (7/1/16–9/30/16)



# Entering CST Data Due May 15, 2017

Due Date	Measure(s)	Fiscal Year	Time Period
05/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2017	Q3 2016 (7/1/16–9/30/16)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	Q1 2016 (1/1/16–3/31/16)

CMS.gov QualityNet

Home - Quality Programs - My Reports - Help

Home > Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures 03/09/2017 09:10:46 PT

PPS Exempt Cancer Hospitals Web-Based Measures Print

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

\* Fiscal Year: Please select a Fiscal Year  
2017

Continue

**Step 1**  
Select Fiscal  
Year “2017”

**Step 2**  
Click  
“Continue”

# Entering Q1 2016 Adjuvant Hormone Therapy Data


Due Date	Measure(s)	Fiscal Year	Time Period
05/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2017	Q3 2016 (7/1/16–9/30/16)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	Q1 2016 (1/1/16–3/31/16)

CMS.gov QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures 03/09/2017 09:19:05 PT

PPS Exempt Cancer Hospitals Web-Based Measures 

**Web-Based Measures | FY 2017**

**Quarter-Annual Reporting Period Selection**  
Select a reporting period to view or manage measure data at the quarter or annual level.

Submission Period	With Respect to Reporting Period	Action
04/01/2017 - 05/15/2017	January 1, 2016 - March 31, 2016	<b>Select Qtr - 1</b>
07/01/2017 - 08/15/2017	April 1, 2016 - June 30, 2016	Select Qtr - 2
Varies By Measure	July 1, 2016 - September 30, 2016	Select Qtr - 3
Varies By Measure	October 1, 2016 - December 30, 2016	Select Qtr - 4

“Select Qtr - 1”

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

# Entering Q1 2016 Adjuvant Hormone Therapy Data

CMS.gov QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Submission Period #1  
04/01/2017 - 05/15/2017

With Respect to Reporting Period #2  
01/01/2016 - 03/31/2016

Click **BLUE** NQF#  
to proceed to the  
data entry screen

Web-Based Measures | FY 2017

Provider ID	NQF #0220 #4	Completed #3
999999		

The "Status" will vary as follows:

- "Unavailable" when data submission period is **not** open
- "Available" when data submission period is open
- "Completed" after data has been submitted; can be edited if data submission period is still open; view only once period closed

# Entering Q1 2016 Adjuvant Hormone Therapy Data

CMS.gov QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

**Start** Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Provider	CCN	Submission Period	With Respect to Reporting Period
World's Best Cancer Hospital	999999	04/01/2017 - 05/15/2017	01/01/2016 - 03/31/2016

**Web-Based Measures | FY 2017** \* Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

**NQF #0220: Adjuvant Hormonal Therapy**

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

# Entering Q1 2016 Adjuvant Hormone Therapy Data

CMS.gov QualityNet

Home - Quality Programs - My Reports - Help -

Home > Quality Programs > Hospital Quality Reporting > IQR, OQR, ASCQR, IPFOR, PCHQR > Manage Measures > View/Edit Structural/ Web-Based Measures > Data Acknowledgment (DACA)

**Numerator**

Please enter the number of patients identified as concordant (measure\_status = "comp" or "concord") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

 **#1 Enter numerator value**

**Denominator**

Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

 **#2 Enter denominator value**

**Results**

Percentage of female patients, age >18 at diagnosis, who have their first diagnosis of breast cancer (epithelial malignancy), at AJCC stage T1cN0M0, IB to III, whose primary tumor is progesterone or estrogen receptor positive recommended for tamoxifen or third generation aromatase inhibitor (considered or administered) within 1 year (365 days) of diagnosis.

Return to Summary Calculate Submit Print

**#3**

Click "Calculate"  
This will result in "Results" being calculated, and the "Submit" button becoming active.

**#4**

Click "Submit"  
This will result in data being submitted.

# When You Click “Calculate” For the CST Measures

**Error**  
Denominator must be equal to or greater than the Numerator.

**NQF #0220: Adjuvant Hormonal Therapy**

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

**Denominator**

\* Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

- If acceptable, “Submit” button will activate
- If error, fatal “red X” with one of three messages
  - “Denominator must be equal to or greater than the Numerator”
  - “Numerator value must be a zero or positive integer”
  - “Denominator value must be a zero or positive integer”

# Messages You Can Receive Upon Clicking “Submit” for CSTs

Only one message can appear:  
“Successfully Saved”



**Information**  
Successfully Saved NQF #0220 Information.

**NQF #0220: Adjuvant Hormonal Therapy**

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

**Denominator**

\* Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

# Next Steps After Submission

The screenshot shows a web form with three main sections: Numerator, Denominator, and Results. The Numerator section has a text input field containing the number '5'. The Denominator section has a text input field containing the number '10'. The Results section displays a percentage of '50.0%' and a detailed description of the patient population. At the bottom of the form, there are four buttons: 'Return to Summary', 'Calculate', 'Submit', and 'Print'. The 'Return to Summary' and 'Print' buttons are highlighted with red boxes and labeled with '#1' and '#2' respectively.

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

**Denominator**

\* Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

**Results**

Percentage of female patients, age >18 at diagnosis, who have their first diagnosis of breast cancer (epithelial malignancy), at AJCC stage T1cN0M0, IB to III, whose primary tumor is progesterone or estrogen receptor positive recommended for tamoxifen or third generation aromatase inhibitor (considered or administered) within 1 year (365 days) of diagnosis. 50.0%

#1     #2

- Proceed to enter the chemo data (#1), and/or
- Verify/memorialize your entry
  - Print current screen (#2)
  - Go back through entry process and view/edit data
  - Print Hospital Report for Fiscal Year 2017



# Printing Your Submission

Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

To print the page please click CTRL + P

Provider	CCN	Submission Period	With Respect to Reporting Period
Worlds Greatest Cancer Hospital	999999	04/01/2017 - 05/15/2017	01/01/2016 - 03/31/2016

Web-Based Measures | FY 2017 \* Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

**NQF #0220: Adjuvant Hormonal Therapy**

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

5

**Denominator**

\* Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

10

**Results**

Percentage of female patients, age >18 at diagnosis, who have their first diagnosis of breast cancer (epithelial malignancy), at AJCC stage T1cN0M0, IB to III, whose primary tumor is progesterone or estrogen receptor positive recommended for tamoxifen or third generation aromatase inhibitor (considered or administered) within 1 year (365 days) of diagnosis. 50.0%

- In this new window, click “CTRL + P” to print
- If you want to resize prior to printing (especially useful for the OCMs and EBRT):
  - Click on “Tools,” “Print,” and “Print Preview”
  - Change print size to desired appearance
  - Click printer icon to print

# Returning to Summary Screen to Enter CST Chemo Data

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

**Denominator**

\* Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

**Results**

Percentage of female patients; age > 18 at diagnosis; who have their first diagnosis of breast cancer (epithelial or sarcoma) with a primary tumor is progesterone receptor positive and has received a third generation aromatase inhibitor (considered or administered) within 1 year (365 days) of diagnosis.

**Message from webpage**

You are about to leave this page. If you have made any changes, and did not submit them, they will not be saved. Click 'OK' to continue. Click 'Cancel' to remain on the current page.

**OK** **Cancel**

**Return to Summary** **Calculate** **Submit** **Print**

# Returning to Summary Screen

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾  
Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Submission Period: 04/01/2017 - 05/15/2017  
With Respect to Reporting Period: 01/01/2016 - 03/31/2016

Web-Based Measures | FY 2017

Provider ID	NQF #0220	Status
999999		Completed

#1 points to the 'Completed' status.

#2 points to the 'Back' button.

#3 points to the 'Payment Year Selection' button.

- #1: Note that data status for NQF #0220 is now “Completed”
- #2: “Back” will take you to desired screen; entry for FY 2017 data
- #3: Will return you to “Payment Year Selection” screen

# Entering Q3 2016 Chemo Data

Due Date	Measure(s)	Fiscal Year	Time Period
05/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2017	<b>Q3 2016</b> (7/1/16–9/30/16)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	<b>Q1 2016</b> (1/1/16–3/31/16)

CMS.gov QualityNet

Home > Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

03/09/2017 09:19:05 PT

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Web-Based Measures | FY 2017

Quarter-Annual Reporting Period Selection  
Select a reporting period to view or manage measure data at the quarter or annual level.

Submission Period	With Respect to Reporting Period	Action
04/01/2017 - 05/15/2017	January 1, 2016 - March 31, 2016	Select Qtr - 1
07/01/2017 - 08/15/2017	April 1, 2016 - June 30, 2016	Select Qtr - 2
Varies By Measure	July 1, 2016 - September 30, 2016	<b>Select Qtr - 3</b>
Varies By Measure	October 1, 2016 - December 30, 2016	Select Qtr - 4

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

"Select Qtr - 3"

# Entering Q3 2016 Chemo Data

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

**Start** Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Submission Period Varies by Measure **#1**

With Respect to Reporting Period 07/01/2016 - 09/30/2016 **#2**

Web-Based Measures | FY 2017

Provider ID	NQF #0223	NQF #0559	NQF #0220
999999	AVAILABLE	AVAILABLE	UNAVAILABLE

**#3** (arrows pointing to the two 'AVAILABLE' cells)

**#4** (arrow pointing to the 'UNAVAILABLE' cell)

- #1: Submission period varies due to chemo and hormone measures
- #2: Reporting period shows you are entering Q3 data
- #3: Entry for chemo measures (NQF #0223 and #0559) are available
- #4: Entry for hormone measure (NQF #0220) is unavailable

# Q1 2016 Entry Screen: NQF #0223

**Start** Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Provider  CCN   
World's Greatest Cancer Hospital  999999

Submission Period  
04/01/2017 - 05/15/2017

With Respect to Reporting Period  
07/01/2016 - 09/30/2016

**Web-Based Measures | FY 2017** \* Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

**NQF #0223: Adjuvant Chemotherapy Colon Cancer**

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0223 in the Rapid Quality Reporting System for the data reporting period.

# Q1 2016 Entry Screen: NQF #0559

[Start](#) Structural/Web-Based Measures

[PPS Exempt Cancer Hospitals Web-Based Measures](#)

Provider  
World's Greatest Cancer Hospital

CCN  
999999

Submission Period  
04/01/2017 - 05/15/2017

With Respect to Reporting Period  
07/01/2016 - 09/30/2016

[Web-Based Measures | FY 2017](#) \* Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

**NQF #0559: Combination Chemotherapy Breast Cancer**

**Numerator**

\* Please enter the number of patients identified as concordant (measure\_status = "comp" or "consid") for NQF #0559 in the Rapid Quality Reporting System for the data reporting period.

# A Note on Rounding

The methodology used in the WBDCT is referred to as “round half to even.”

- Also referred to as convergent, statistician’s, Dutch, Gaussian, odd-even, or banker’s rounding
- Only applies if the decimal place being rounded is exactly 5, such as, X.50 or X.Y50
- When you have a value of 5, you round to the nearest even digit
  - 97.5 rounds up to 98, but 96.5 rounds down to 96
  - 92.45 rounds down to 92.4, but 92.75 rounds up to 92.8



# Entering the OCMs and EBRT Select Fiscal Year 2018

**Start** Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

## Web-Based Measures | FY 2018

### Quarter-Annual Reporting Period Selection

Select a reporting period to view or manage measure data at the quarter or annual level.

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

Submission Period	With Respect to Reporting Period	Action
Varies By Measure	January 1, 2017 - March 31, 2017	Select Qtr - 1
Varies By Measure	April 1, 2017 - June 30, 2017	Select Qtr - 2
Varies By Measure	July 1, 2017 - September 30, 2017	Select Qtr - 3
Varies By Measure	October 1, 2017 - December 31, 2017	Select Qtr - 4
07/01/2016 - 08/15/2017	January 1, 2016 - December 31, 2016	Select Annual

“Select Annual”

# Entering the OCMs and EBRT Measure Selection Screen

**Start** Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Submission Period  
07/01/2017 - 08/15/2017

With Respect to Reporting Period  
01/01/2016 - 12/31/2016

Web-Based Measures | FY 2018

Provider ID	NQF #1822	NQF #0382	NQF #0383	NQF #0384	NQF #0389	NQF #0390
999999	Unavailable	Unavailable	Unavailable	Unavailable	Unavailable	Unavailable



# EBRT Data Entry Screen

**Start** Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Provider	CCN	Submission Period	With Respect to Reporting Period
World's Greatest Cancer Hospital	999999	07/01/2017 - 08/15/2017	01/01/2016 - 12/31/2016

**Web-Based Measures | FY 2018** \* Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

**NQF #1822: External Beam Radiotherapy for Bone Metastases**

# EBRT Population and Sampling

## NQF #1822: External Beam Radiotherapy for Bone Metastases

### Population

\* What was your hospital's sampling frequency?

Quarter 1	Quarter 2	Quarter 3	Quarter 4
<input checked="" type="radio"/> Quarterly	<input type="radio"/> Quarterly	<input type="radio"/> Quarterly	<input checked="" type="radio"/> Quarterly
<input type="radio"/> Not Sampled	<input checked="" type="radio"/> Not Sampled	<input type="radio"/> Not Sampled	<input type="radio"/> Not Sampled
<input type="radio"/> N/A - Submission not required	<input type="radio"/> N/A - Submission not required	<input checked="" type="radio"/> N/A - Submission not required	<input type="radio"/> N/A - Submission not required

\* What was your hospital's quarterly Initial Patient Population?

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
125	35	2	70	232

\* What was your hospital's quarterly Sample Size?

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
25	35	2	14	76

# EBRT Numerator and Denominator

## Numerator

\* Please enter the number of all patients, regardless of age, with painful bone metastases, and no previous radiation to the same anatomic site who receive EBRT with any of the following recommended fractionation schemes: 30Gy/10fxns, 24Gy/8fxns, 20Gy/5fxns, 8Gy/1fxn.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
5	30	2	12	49

## Denominator

\* Please enter the number of all patients with painful bone metastases and no previous radiation to the same anatomic site, who are not specifically excluded from the denominator, who received EBRT during the reporting period.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
25	35	2	14	76

# EBRT Results and Submission

## RESULTS

Percentage of patients, regardless of age, with a diagnosis of painful bone metastases and no history of previous radiation who receive external beam radiation therapy with an acceptable fractionation scheme.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
20%	86%	100%	86%	64%

[Return to Summary](#) [Calculate](#) [Submit](#) [Print](#)

# Key WBDCT Reminders

- Select the correct Fiscal Year
- Select the correct reporting time period for the measure based upon the data submission period

Due Date	Measure(s)	Fiscal Year	Time Period
05/15/2017	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2017	Q3 2016 (7/1/16–9/30/16)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	Q1 2016 (1/1/16–3/31/16)

- Use the WBDCT to enter CST, EBRT, and OCM data; do not submit external files

PCHQR Program: Web-Based Data Collection Tool

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## **Miscellaneous Notes**



# Important Upcoming Events

## Currently Scheduled 2017 Webinars

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

# Important Upcoming Dates

## Upcoming HQR Data Submissions

- **April 5, 2017:** Q4 2016 HCAHPS data
- **May 15, 2017:**
  - Q3 2016 chemo
  - Q1 2016 hormone
  - Q4 2016 HAI
  - Q4 2016 through Q1 2017 HCP influenza vaccination
- **July 5, 2017:** Q1 2017 HCAHPS data
- **August 15, 2017:**
  - Q4 2016 chemo
  - Q2 2016 hormone
  - Q1 2017 HAI data

# Important Upcoming Dates

## ***Key Hospital Compare Refresh Dates***

- **April 2017:** Anticipated refreshing on April 26
- **July 2017:**
  - Contains:
    - 2Q 2015 through 1Q 2016 chemo data
    - 4Q 2014 through 3Q 2015 hormone data
    - 1Q through 4Q 2015 EBRT data
    - 4Q 2015 through 3Q 2016 HCAHPS data
  - Preview period scheduled for April 6 through May 12
  - Anticipated refreshing on July 26
- **October 2017:**
  - Contains:
    - 3Q 2015 through 2Q 2016 chemo data
    - 1Q 2015 through 4Q 2015 hormone data
    - 1Q 2016 through 4Q 2016 HCAHPS data
  - Preview period scheduled for July 12 through August 10
  - Anticipated refreshing on October 12

# 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 & Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Dietetics and Nutrition Practice Council
- Florida Board of Pharmacy
- CA 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<sup>®</sup> 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 the HSAG Learning Management Center.
  - This is a separate registration from ReadyTalk<sup>®</sup>.
  - 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.
- 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.**

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

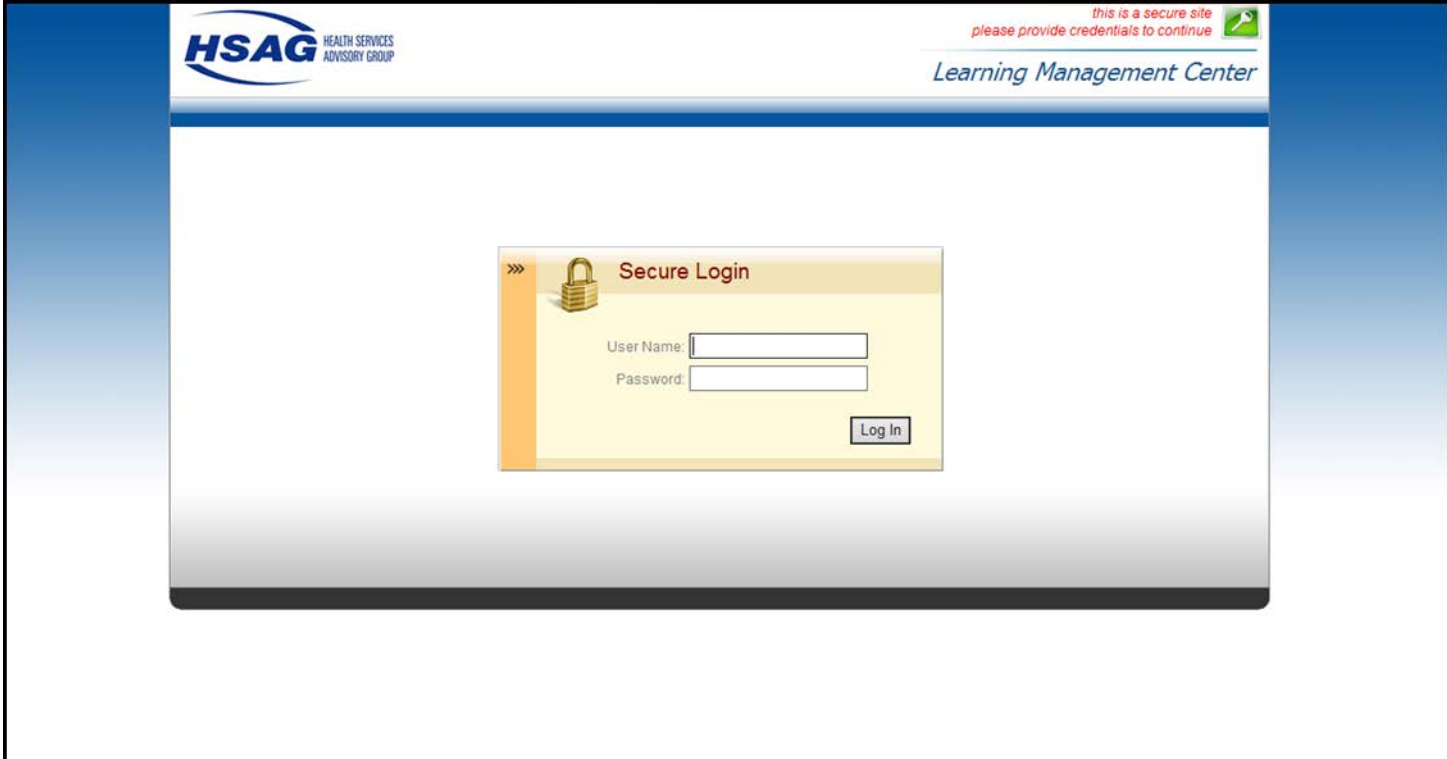


# CE Credit Process: New User

The screenshot shows a web browser window with the following elements:

- HSAG Health Services Advisory Group** logo in the top left corner.
- A security warning in the top right: "this is a secure site please provide credentials to continue" with a lock icon.
- The text "Learning Management Center" in the top right.
- The main heading: "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015".
- Registration fields: "First Name:" and "Last Name:" (text boxes), "Email:" (text box), and "Phone:" (text box with dashes).
- A "Register" button below the fields.

# 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: Web-Based Data Collection Tool

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# Questions?

# Disclaimer

This presentation 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 this presentation change following the date of posting, this presentation will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

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