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# Troubleshooting Audio

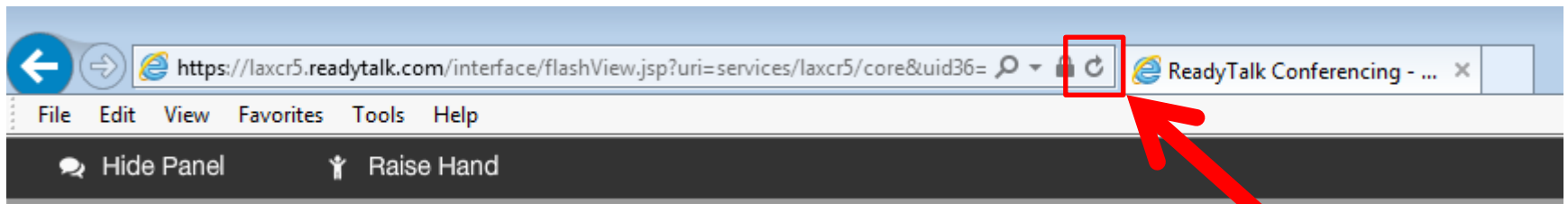
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F5 Key  
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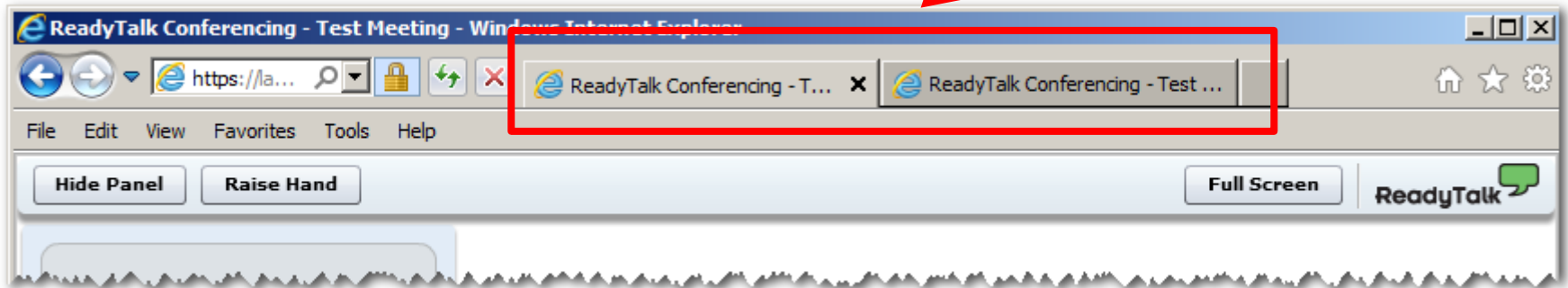


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*Example of Two Browsers/Tabs open in Same Event*

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# **PCHQR Program: Practical Impacts of the FY 2018 IPPS/LTCH PPS Final Rule**

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**September 28, 2017**

# Acronyms and Abbreviations

ACS	American College of Surgeons	ICD	International Classification of Diseases
ADT	Androgen Deprivation Therapy	ICU	<b>Intensive Care Unit</b>
AHRQ	Agency for Healthcare Research and Quality	IPPS	<b>Inpatient Prospective Payment System</b>
AJCC	American Joint Committee on Cancer	IQR	Inpatient Quality Reporting
AMA	American Medical Association	LabID	Laboratory-Identified
<b>CAUTI</b>	<b>Catheter-Associated Urinary Tract Infection</b>	<b>LTCH</b>	<b>Long-Term Care Hospital</b>
<b>CDC</b>	<b>Centers for Disease Control and Prevention</b>	<b>MIF</b>	<b>Measure Information Form</b>
CCN	CMS Certification Number	<b>MRSA</b>	<b>Methicillin-Resistant <i>Staphylococcus aureus</i></b>
<b>CDI</b>	<b><i>Clostridium difficile</i> Infection</b>	<b>N/A</b>	<b>Not Available</b>
<b>CE</b>	<b>Continuing Education</b>	<b>NHSN</b>	<b>National Healthcare Safety Network</b>
<b>CLABSI</b>	<b>Central Line-Associated Bloodstream Infection</b>	<b>NQF</b>	<b>National Quality Forum</b>
<b>CMS</b>	<b>Centers for Medicare &amp; Medicaid Services</b>	<b>OCM</b>	<b>Oncology Care Measure</b>
CPT	Current Procedural Terminology	OQR	Outpatient Quality Reporting
<b>CST</b>	<b>Cancer-Specific Treatment</b>	<b>PCH</b>	<b>PPS-Exempt Cancer Hospital</b>
CY	Calendar Year	<b>PCHQR</b>	<b>PPS-Exempt Cancer Hospital Quality Reporting</b>
<b>DACA</b>	<b>Data Accuracy and Completeness Acknowledgement</b>	<b>PPS</b>	<b>Prospective Payment System</b>
<b>EBRT</b>	<b>External Beam Radiotherapy</b>	<b>PR</b>	<b>Public Reporting</b>
<b>ECE</b>	<b>Extraordinary Circumstances Extension/ Exception</b>	<b>Q</b>	<b>Quarter</b>
<b>ED</b>	<b>Emergency Department</b>	<b>QIN</b>	<b>Quality Innovation Network</b>
<b>EOL</b>	<b>End of Life</b>	QPP	Quality Payment Program
EPIC	Expanded Prostate Inventory Composite	RSAR	Risk-Standardized Admission Rate
<b>FSR</b>	<b>Facility-Specific Report</b>	RSEDR	Risk-Standardized ED Visit Rate
<b>FY</b>	<b>Fiscal Year</b>	SBRT	Stereotactic Body Radiation Therapy
<b>HAI</b>	<b>Healthcare-Associated Infection</b>	<b>SCIP</b>	<b>Surgical Care Improvement Project</b>
<b>HCAHPS</b>	<b>Hospital Consumer Assessment of Healthcare Providers and Systems</b>	<b>SIR</b>	<b>Standardized Infection Ratio</b>
<b>HCP</b>	<b>Healthcare Personnel</b>	SRS	Stereotactic Radiosurgery
HHS	US Department of Health and Human Services	<b>SSI</b>	<b>Surgical Site Infection</b>
<b>HQR</b>	<b>Hospital Quality Reporting</b>	TBD	To Be Determined
		<b>WBDCT</b>	<b>Web-Based Data Collection Tool</b>

# Purpose

This presentation will provide a practical overview of the changes impacting PCHQR Program participants due to the publication of the Fiscal Year (FY) 2018 Inpatient Prospective Payment System/Long-Term Care Hospital (IPPS/LTCH) Prospective Payment System (PPS) Final Rule.

# Objectives

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

- Summarize the operational changes impacting the PCHQR Program
- Access and employ updated Program resources available on *QualityNet* and *Quality Reporting Center*
- Discuss updated PPS-Exempt Cancer Hospital Report elements that will be available on *QualityNet*



# FY 2018 Final Rule

- Issued on August 2, 2017
  - Displayed at the Office of the Federal Register Public Inspection Desk until publication in the *Federal Register* on August 14, 2017
  - [FY 2018 IPPS/LTCH PPS Final Rule—Display Copy](#)
  - PCHQR Program rules on pages 1678–1735
- Published in *Federal Register* on August 14, 2017
  - [FY 2018 IPPS/LTCH PPS Final Rule—PDF Version](#)
  - PCHQR Program rules on pages 38411–38425

PCHQR Program: Practical Impacts of the FY 2018  
IPPS/LTCH PPS Final Rule

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## **Summary of Operational Changes**

# Major Sections of Rule

1. Background
2. Criteria for Removal and Retention of PCHQR Program Measures
3. **Retention and Removal of Previously Finalized Quality Measures for PCHs Beginning with the FY 2020 Program Year**
4. **New Quality Measures Beginning with the FY 2020 Program Year**
5. Accounting for Social Risk Factors in the PCHQR Program
6. Possible New Quality Measure Topics for Future Years
7. Maintenance of Technical Specifications for Quality Measures
8. **Public Display Requirements**
9. **Form, Manner, and Timing of Data Submission**
10. **Extraordinary Circumstances Exceptions (ECE) Policy Under the PCHQR Program**

**And, a special bonus feature!**

# Removal of the CST Measures

Beginning with diagnoses occurring as of January 1, 2018; therefore, last diagnosis cohort will be Quarter 4, 2017 with last reporting of data:

- August 15, 2018, for colon and breast chemotherapy measures
- February 15, 2019, for hormone measure

Due Date	Measure	Fiscal Year	Time Period
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)
02/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q2 2017</b> (4/1/17–6/30/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	<b>Q4 2016</b> (10/1/16–12/31/16)
05/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q3 2017</b> (7/1/17–9/30/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q1 2017</b> (1/1/17–3/31/17)
08/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q4 2017</b> (10/1/17–12/31/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q2 2017</b> (4/1/17–6/30/17)
	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2019	<b>CY 2017</b> (1/1/17–12/31/17)
11/15/2018	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q3 2017</b> (7/1/17–9/30/17)
02/15/2019	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q4 2017</b> (10/1/17–12/31/17)
08/15/2019	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2020	<b>CY 2018</b> (1/1/18–12/31/18)

# Addition of New Quality Measures for FY 2020 Program Year

## Clinical Process/Oncology Care Measures

Short Name	NQF #	Measure Name
N/A	0382	Oncology: Radiation Dose Limits to Normal Tissues
N/A	0383	Oncology: Plan of Care for Pain—Medical Oncology and Radiation Oncology
N/A	0384	Oncology: Medical and Radiation—Pain Intensity Quantified
N/A	0390	Prostate Cancer: Adjuvant Hormonal Therapy for High Risk Prostate Cancer Patients
N/A	0389	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients
EOL-Chemo	0210	Proportion of Patients Who Died From Cancer Receiving Chemotherapy in the Last 14 Days of Life
EOL-Hospice	0215	Proportion of Patients Who Died From Cancer Not Admitted to Hospice

## Intermediate Clinical Outcome Measures

Short Name	NQF #	Measure Name
EOL-ICU	0213	Proportion of Patients Who Died From Cancer Admitted to the ICU in the Last 30 Days of Life
EOL-3DH	0216	Proportion of Patients Who Died From Cancer Admitted to Hospice for Less than Three Days

# New Measures on *QualityNet*

**Table 3: Clinical Process/Oncology Care Measures (OCMs)**

NQF #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
0210	PCH-32	Proportion of Patients Who Died From Cancer Receiving Chemotherapy in the Last 14 Days of Life	Measure information form under development	None. (This is a claims-based measure.)	This data will be submitted by CMS contractor on behalf of the PCH.
0215	PCH-34	Proportion of Patients Who Died From Cancer Not Admitted to Hospice	Measure information form under development	None. (This is a claims-based measure.)	This data will be submitted by CMS contractor on behalf of the PCH.

**Table 4: Intermediate Clinical Outcome Measures**

NQF #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
0213	PCH-33	Proportion of Patients Who Died From Cancer Admitted to the ICU in the Last 30 Days of Life	Measure information form under development	None. (This is a claims-based measure.)	This data will be submitted by CMS contractor on behalf of the PCH.
0216	PCH-35	Proportion of Patients Who Died from Cancer Admitted to Hospice for Less Than Three Days	Measure information form under development	None. (This is a claims-based measure.)	This data will be submitted by CMS contractor on behalf of the PCH.

# What About the “Old” Measures?

**Table 3: Clinical Process/Oncology Care Measures (OCMs)**

NQF #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
0382	PCH-14	Oncology: Radiation dose limits to normal tissues	2017 Radiation dose limit measure information form 2017 Radiation dose limit algorithm (clean version) 2017 Radiation dose limit algorithm (population and sampling version)	2017 Radiation dose limit paper abstraction tool	Web-based data entry via <a href="#">QualityNet Secure Portal</a>
0383	PCH-15	Oncology: Plan of care for pain	2017 Plan of care for pain measure information form 2017 Plan of care algorithm (clean version) 2017 Plan of care algorithm (population and sampling version)	2017 Plan of care for pain	Web-based data entry via <a href="#">QualityNet Secure Portal</a>
0384	PCH-16	Oncology: Pain intensity quantified	2017 Pain intensity quantified measure information form 2017 Pain intensity quantified algorithm (clean version) 2017 Pain intensity quantified algorithm (population and sampling version)	2017 Pain intensity quantified paper abstraction tool	Web-based data entry via <a href="#">QualityNet Secure Portal</a>

# Previously Finalized and New Public Display Requirements

Measures	Time
<ul style="list-style-type: none"> <li>Adjuvant Chemotherapy is Considered or Administered Within 4 Months (120 days) of Diagnosis to Patients Under the Age of 80 with AJCC III (Lymph Node Positive) Colon Cancer (NQF #0223)<sup>x</sup></li> <li>Combination Chemotherapy is Considered or Administered Within 4 Months (120 days) of Diagnosis for Women Under 70 with AJCC T1cN0M0, or Stage IB—III Hormone Receptor Negative Breast Cancer (NQF #0559)<sup>x</sup></li> </ul>	2014 and subsequent years
Adjuvant Hormonal Therapy (NQF #0220) <sup>x</sup>	2015 and subsequent years
<ul style="list-style-type: none"> <li>Oncology: Radiation Dose Limits to Normal Tissues (NQF #0382)<sup>*</sup></li> <li>Oncology: Plan of Care for Pain—Medical Oncology and Radiation Oncology (NQF #0383)</li> <li>Oncology: Medical and Radiation—Pain Intensity Quantified (NQF #0384)</li> <li>Prostate Cancer: Adjuvant Hormonal Therapy for High Risk Prostate Cancer Patients (NQF #0390)</li> <li>Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients (NQF#0389)</li> <li>Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey (NQF #0166)</li> </ul>	2016 and subsequent years
<ul style="list-style-type: none"> <li>CLABSI (NQF #0139)<sup>**</sup></li> <li>CAUTI (NQF #0138)<sup>**</sup></li> </ul>	Deferred
External Beam Radiotherapy for Bone Metastases (NQF #1822) <sup>***</sup>	2017 and for subsequent years

<sup>\*</sup> Update newly finalized for display for the FY 2019 Program Year and subsequent years in the FY 2017 IPPS/LTCH PPS Final Rule (81 FR 57192); expanded cohort will be displayed as soon as feasible.

<sup>\*\*</sup> Deferral finalized in the FY 2017 IPPS/LTCH PPS Final Rule (81 FR 57192).

<sup>\*\*\*</sup> Measure finalized for public display in the FY 2017 IPPS/LTCH PPS Final Rule (81 FR 57192).

<sup>x</sup> Measure finalized for removal beginning the FY 2020 Program Year.



# Practical Applications to Public Reporting of PCHQR Program Data

- CSTs
- OCMs and EBRT
- HCAHPS
- CLABSI and CAUTI
- SSI, CDI, MRSA, HCP, Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy
- New end-of-life measures

# Schedule for Public Reporting

<i>Hospital Compare Release</i>	<b>Measures</b>	<b>Quarters Displayed</b>
<b>October 2017</b>	PCH-1, PCH-2 PCH-3 PCH-29	Q3, Q4 2015 and Q1, Q2 2016 Q1, Q2, Q3, Q4 2015 Q1, Q2, Q3, Q4 2016
<b>December 2017</b>	PCH-1, PCH-2 PCH-3 PCH-29 PCH-14, PCH-15, PCH-16, PCH-17, PCH-18, and PCH-25	Q4 2015 and Q1, Q2, Q3 2016 Q2, Q3, Q4 2015 and Q1 2016 Q2, Q3, Q4 2016 and Q1 2017 Q1, Q2, Q3, Q4 2016
<b>April 2018</b>	PCH-1, PCH-2 PCH-3 PCH-29	Q1, Q2, Q3, Q4 2016 Q3, Q4 2015 and Q1, Q2 2016 Q3, Q4 2016 and Q1, Q2 2017
<b>July 2018</b>	PCH-1, PCH-2 PCH-3 PCH-29	Q2, Q3, Q4 2016 and Q1 2017 Q4 2015 and Q1, Q2, Q3 2016 Q4 2016 and Q1, Q2, Q3 2017
<b>October 2018</b>	PCH-1, PCH-2 PCH-3 PCH-29	Q3, Q4 2016 and Q1, Q2 2017 Q1, Q2, Q3, Q4 2016 Q1, Q2, Q3, Q4 2017
<b>December 2018</b>	PCH-1, PCH-2 PCH-3 PCH-29 PCH-14, PCH-15, PCH-16, PCH-17, PCH-18, and PCH-25	Q4 2016 and Q1, Q2, Q3 2017 Q2, Q3, Q4 2016 and Q1 2017 Q2, Q3, Q4 2017 and Q1 2018 Q1, Q2, Q3, Q4 2017*

\* Please note that the diagnosis cohort for NQF #0382 (PCH-14) is expanded in the data refreshed in December 2018 to include breast and rectal cancers, in addition to the previously included lung and pancreatic cancers.

# Form, Manner, and Timing of Data Submission

- WBDCT
  - Quarterly submission of CSTs
  - Annual submission of OCMs and EBRT, stratified by quarter (NQF #0382, #0383, #0384, #0389, #0390, and #1822)
  - NHSN/CDC submission on behalf of PCHs
  - Quarterly submission of CLABSI, CAUTI, SSI, CDI, and MRSA data
  - Annual submission of Influenza Vaccination Coverage Among Healthcare Personnel (HCP)
- HCAHPS quarterly (via vendor)
- Claims-based measures
  - Outpatient chemotherapy
  - End-of-life measures
- DACA annually online via *QualityNet*

# Extraordinary Circumstances Exceptions (ECE) Request Form

- Alignment with other CMS Programs
  - Extension of deadline to apply from 30 days following the occurrence
  - CMS may grant exception or extension due to CMS data-system issues
- ECE request form is available on the following websites:
  - *QualityNet*: PCHQR Program Resources
  - *Quality Reporting Center*: PCHQR Program Resources and Tools

# Reporting Requirements for Areas Impacted by Hurricanes

CMS has issued communications granting an exception to PCHs located in specified counties, parishes, islands, and municipios in Texas, Florida, Louisiana, Puerto Rico, and the US Virgin Islands.

- For chart-abstracted data and NHSN HAI data:
  - November 2017 and February 2018 submission deadlines for discharge periods:
    - January 1, 2017 – March 31, 2017 (Q1 2017) – Colon Cancer/Breast Cancer
    - April 1, 2017 – June 30, 2017 (Q2 2017) – Colon Cancer/Breast Cancer
    - June 1, 2016 – September 30, 2016 (Q3 2016) – Adjuvant Hormonal Therapy
    - October 1, 2016 – December 31, 2016 (Q4 2016) – Adjuvant Hormonal Therapy
    - April 1, 2017 – June 30, 2017 (Q2 2017) – CLABSI, CAUTI, SSI, CDI, MRSA
    - June 1, 2017 – September 30, 2017 (Q3 2017) – CLABSI, CAUTI, SSI, CDI, MRSA
- For HCP data:
  - May 15, 2018 submission deadline for the 2017 – 2018 flu season:
    - October 1, 2017 – March 31, 2018 (Q4 2017 through Q1 2018)
- For HCAHPS Survey data:
  - October 2017 and January 2018 HCAHPS submission deadlines for discharge periods:
    - April 1, 2017 – June 30, 2017 (Q2 2017)
    - July 1, 2017 – September 30, 2017 (Q3 2017)

# HCAHPS Survey

## **FY 2018 IPPS/LTCH PPS Final Rule (82 FR 38328 Through 38342)**

- Existing HCAHPS Survey revised by refining the current Pain Management questions (HCAHPS questions 12, 13, and 14)
- Composite measure name updated from “Pain Management” to “Communication About Pain”
- New questions address how providers communicate with patients about pain while removing ambiguities in the wording or intent of the questions

# HCAHPS Survey Questions

Previous Pain Management Questions	New Composite Measure Questions
<ul style="list-style-type: none"><li>• During this hospital stay, did you need medicine for pain?<ul style="list-style-type: none"><li><input type="checkbox"/> Yes</li><li><input type="checkbox"/> No</li></ul></li><li>• During this hospital stay, how often was your pain well controlled?<ul style="list-style-type: none"><li><input type="checkbox"/> Never</li><li><input type="checkbox"/> Sometimes</li><li><input type="checkbox"/> Usually</li><li><input type="checkbox"/> Always</li></ul></li><li>• During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?<ul style="list-style-type: none"><li><input type="checkbox"/> Never</li><li><input type="checkbox"/> Sometimes</li><li><input type="checkbox"/> Usually</li><li><input type="checkbox"/> Always</li></ul></li></ul>	<ul style="list-style-type: none"><li>• During this hospital stay, did you have any pain?<ul style="list-style-type: none"><li><input type="checkbox"/> Yes</li><li><input type="checkbox"/> No</li></ul></li><li>• During this hospital stay, how often did hospital staff talk with you about how much pain you had?<ul style="list-style-type: none"><li><input type="checkbox"/> Never</li><li><input type="checkbox"/> Sometimes</li><li><input type="checkbox"/> Usually</li><li><input type="checkbox"/> Always</li></ul></li><li>• During this hospital stay, how often did hospital staff talk with you about how to treat your pain?<ul style="list-style-type: none"><li><input type="checkbox"/> Never</li><li><input type="checkbox"/> Sometimes</li><li><input type="checkbox"/> Usually</li><li><input type="checkbox"/> Always</li></ul></li></ul>

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## **Updated Program Resources**



# Updates to *QualityNet*

## **PCHQR Program Web Pages**

- Overview
- Measures
- Data Collection
- Data Submission
- Resources

## **Updated Resources**

- Program Manual
- Measure Submission Deadlines by Due Date
- WBDCT Guideline by Due Date
- Relationship Matrix

# Measure Submission Deadlines by Due Date

Due Date	Colon Cancer/ Breast Cancer	Adjuvant Hormonal Therapy	CLABSI/ CAUTI/SSI/ MRSA/CDI	HCP Flu Vac	HCAHPS	OCM	EBRT	DACA
10/04/2017	N/A	N/A	N/A	N/A	Q2 2017 (4/1–6/30)	N/A	N/A	N/A
11/15/2017	Q1 2017 (1/1–3/31)	Q3 2016 (7/1–9/30)	Q2 2017 (4/1–6/30)	N/A	N/A	N/A	N/A	N/A
01/03/2018	N/A	N/A	N/A	N/A	Q3 2017 (7/1–9/30)	N/A	N/A	N/A
02/15/2018	Q2 2017 (4/1–6/30)	Q4 2016 (10/1–12/31)	Q3 2017 (7/1–9/30)	N/A	N/A	N/A	N/A	N/A
04/04/2018	N/A	N/A	N/A	N/A	Q4 2017 (10/1–12/31)	N/A	N/A	N/A
05/15/2018	Q3 2017 (7/1–9/30)	Q1 2017 (1/1–3/31)	Q4 2017 (10/1–12/31)	Q4 2017–Q1 2018 (10/1/17–3/31/18)	N/A	N/A	N/A	N/A
07/05/2018	N/A	N/A	N/A	N/A	Q1 2018 (1/1–3/31)	N/A	N/A	N/A
08/15/2018	Q4 2017 (10/1–12/31)	Q2 2017 (4/1–6/30)	Q1 2018 (1/1–3/31)	N/A	N/A	CY 2017 (1/1–12/31)	CY 2017 (1/1–12/31)	N/A
08/31/2018	N/A	N/A	N/A	N/A	N/A	N/A	N/A	For FY 2019
10/04/2018	N/A	N/A	N/A	N/A	Q2 2018 (4/1–6/30)	N/A	N/A	N/A
11/15/2018	N/A	Q3 2017 (7/1–9/30)	Q2 2018 (4/1–6/30)	N/A	N/A	N/A	N/A	N/A
01/03/2019	N/A	N/A	N/A	N/A	Q3 2018 (7/1–9/30)	N/A	N/A	N/A

# WBDCT Guideline by Due Date

Due Date	Measure	Fiscal Year	Time Period
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)
02/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q2 2017</b> (4/1/17–6/30/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	<b>Q4 2016</b> (10/1/16–12/31/16)
05/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q3 2017</b> (7/1/17–9/30/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q1 2017</b> (1/1/17–3/31/17)
08/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	<b>Q4 2017</b> (10/1/17–12/31/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q2 2017</b> (4/1/17–6/30/17)
	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2019	<b>CY 2017</b> (1/1/17–12/31/17)
11/15/2018	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q3 2017</b> (7/1/17–9/30/17)
02/15/2019	Adjuvant Hormonal Therapy (NQF #0220)	2018	<b>Q4 2017</b> (10/1/17–12/31/17)
08/15/2019	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2020	<b>CY 2018</b> (1/1/18–12/31/18)

# Relationship Matrix of Program Measures by Years and Quarters

Oncology Care Measures	Program (Fiscal) Years	Reporting Periods–Calendar Year Quarters	Quarterly Data Submission Deadlines	Hospital Compare Release December 2016	Hospital Compare Releases April 2017, July 2017, and October 2017	Hospital Compare Release December 2017		
NQF #0382 (PCH–14)	2016	1Q 2015	PRIOR	1Q2015–4Q2015				
NQF #0383 (PCH–15)	2017	2Q 2015	PRIOR					
		3Q 2015						
		4Q 2015						
NQF #0384 (PCH–16)	2018	1Q 2016	PRIOR			1Q2016–4Q2016		
		2Q 2016						
		3Q 2016						
		4Q 2016						
NQF #0390 (PCH–17)	2019	1Q 2017	08/15/2018					
NQF #0389 (PCH–18)		2Q 2017						
		3Q 2017						
		4Q 2017						
	2020	1Q 2018	08/15/2019					
		2Q 2018						
		3Q 2018						
		4Q 2018						

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## **Updates to PPS-Exempt Cancer Hospital Reports**

# PCH Report Updates

- Use of superscripts on (N/A)<sup>1</sup> and (N/A)<sup>2</sup> [(N/A<sup>1</sup>) and (N/A<sup>2</sup>)]
- Data tables will only display in the Program Years to which they apply
- Measure titles will be consistent with those in final rules
- QINs will have access to PCH Reports
- “Diagnosis Cohort” will replace “Discharge Quarter” for CSTs
- The new, improved (N/A)<sup>1</sup>
- Patient days will appear for CDI and MRSA
- Population and sampling data will appear for OCMs, starting with 2016 data on FY 2018 PCH Report (retrospectively)
- “Update date” for HAls will only update for current quarter being reported; this will **not** be retrospective

# Use of “Diagnosis Cohort” for CSTs

Measure Set: Cancer Specific Measures				
		Numerator	Denominator	Percent
Measure: (NQF #0223) Adjuvant Chemotherapy Colon Cancer				
Last ACoS Update: 11/16/2016	Discharge Quarter: 01/01/2016 - 03/31/2016	3	4	75
Last ACoS Update: 02/25/2017	Discharge Quarter: 04/01/2016 - 06/30/2016	1	2	50.0
Last ACoS Update: 05/04/2017	Discharge Quarter: 07/01/2016 - 09/30/2016	1	1	100
Last ACoS Update: (N/A)1	Discharge Quarter: 10/01/2016 - 12/31/2016	(N/A)1	(N/A)1	(N/A)1



# The New, Improved “N/A<sup>1</sup>”

- In the past (N/A<sup>1</sup>) displayed for the following:
  - Data not applicable
  - Any value equal to zero
- Now (N/A<sup>1</sup>) will only display for data not applicable.

Measure Set: HAI		Measure: CLABSI	
Oncology Location Type		Numerator	Denominator
Discharge Quarter: 01/01/2016 - 03/31/2016		Last NHSN Update: 05/16/2017	
Medical-Surgical Critical Care		(N/A) <sup>1</sup>	141
General Hematology/Oncology Ward		3	1112
Discharge Quarter: 04/01/2016 - 06/30/2016		Last NHSN Update: 05/16/2017	
Medical-Surgical Critical Care		(N/A) <sup>1</sup>	127
General Hematology/Oncology Ward		6	1014
Discharge Quarter: 07/01/2016 - 09/30/2016		Last NHSN Update: 05/16/2017	



# Be Aware: N/A<sup>2</sup> Still Has Meaning

## Example of SCIP Measures in FY 2017 PCH Report

Measure Set: SCIP Measures				
		Numerator	Denominator	Percent
<b>Measure: (NQF #0527) Prophylactic Antibiotics Received Within 1 Hour Prior to Surgical Incision</b>				
	Discharge Quarter: 01/01/2015 - 03/31/2015	(N/A)2	(N/A)2	(N/A)2
	Discharge Quarter: 04/01/2015 - 06/30/2015	29	29	100
	Discharge Quarter: 07/01/2015 - 09/30/2015	30	30	100
	Discharge Quarter: 10/01/2015 - 12/31/2015	(N/A)2	(N/A)2	(N/A)2
<b>Measure: (NQF #0528) Prophylactic Antibiotic Selection for Surgical Patients</b>				
	Discharge Quarter: 01/01/2015 - 03/31/2015	(N/A)2	(N/A)2	(N/A)2
	Discharge Quarter: 04/01/2015 - 06/30/2015	24	29	82.8
	Discharge Quarter: 07/01/2015 - 09/30/2015	28	29	96.6
	Discharge Quarter: 10/01/2015 - 12/31/2015	(N/A)2	(N/A)2	(N/A)2

# Patient Days for CDI and MRSA

- Actual patient days will display for CDI and MRSA.
- SIR will not display.

Measure Set: HAI				
		Numerator	Denominator	SIR
Measure: <i>Clostridium difficile</i> Infection (CDI)				
Last NHSN Update: 10/26/2016	Discharge Quarter: 01/01/2016 - 03/31/2016	3	(N/A)1	(N/A)1
Last NHSN Update: 11/16/2016	Discharge Quarter: 04/01/2016 - 06/30/2016	5	(N/A)1	(N/A)1
Last NHSN Update: 03/03/2017	Discharge Quarter: 07/01/2016 - 09/30/2016	2	(N/A)1	(N/A)1
Last NHSN Update: 05/16/2017	Discharge Quarter: 10/01/2016 - 12/31/2016	(N/A)1	(N/A)1	(N/A)1

# CDI and MRSA Layout Will Be Similar to That for CLABSI and CAUTI

Measure Set: HAI	Measure: CLABSI	
Oncology Location Type	Numerator	Denominator
Discharge Quarter: 01/01/2016 - 03/31/2016	Last NHSN Update: 05/16/2017	
Hematopoietic Stem Cell Transplant Ward	1	371
General Hematology/Oncology Ward	1	1314

# Population and Sampling for OCMs

- Current display for FY 2018

Measure: (NQF #0384) Oncology: Pain Intensity Quantified				
	Discharge Quarter: 01/01/2016 - 03/31/2016	81	91	89
	Discharge Quarter: 04/01/2016 - 06/30/2016	82	110	75
	Discharge Quarter: 07/01/2016 - 09/30/2016	78	114	68
	Discharge Quarter: 10/01/2016 - 12/31/2016	90	111	81

- Future display will mimic EBRT

Measure Set: Clinical Effectiveness Measure						
	Population And Sampling			Numerator	Denominator	Percent
	Sampling Frequency	Initial Patient Population	Sample Size			
Measure: (NQF #1822) External Beam Radiotherapy for Bone Metastases						
Discharge Quarter: 01/01/2015 - 03/31/2015	Quarterly	65	13	13	13	100
Discharge Quarter: 04/01/2015 - 06/30/2015	Quarterly	94	22	19	22	86
Discharge Quarter: 07/01/2015 - 09/30/2015	Quarterly	91	20	18	20	90
Discharge Quarter: 10/01/2015 - 12/31/2015	Quarterly	89	18	18	18	100

# Date of “Last NHSN Update” Will Only Update for Most Recent Quarter

Measure Set: HAI		Measure: CLABSI	
Oncology Location Type		Numerator	Denominator
Discharge Quarter: 01/01/2016 - 03/31/2016		Last NHSN Update: 05/16/2017	
Medical-Surgical Critical Care		(N/A)1	141
General Hematology/Oncology Ward		3	1112
Discharge Quarter: 04/01/2016 - 06/30/2016		Last NHSN Update: 05/16/2017	
Medical-Surgical Critical Care		(N/A)1	127
General Hematology/Oncology Ward		6	1014
Discharge Quarter: 07/01/2016 - 09/30/2016		Last NHSN Update: 05/16/2017	

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## **Miscellaneous Notes**

# Outpatient Chemotherapy Measure

## National Confidential Reporting Period (Dry Run)

- Dry run of the **Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy measure (PCH-30/31)** for the PCHQR Program has been **extended** through September 29, 2017.
- CMS has provided facilities with confidential, **updated** FSRs for the measure via the *QualityNet Secure Portal*.
- Detailed information about the measure and dry run is available on *QualityNet* at:
  - [QualityNet](#) > PPS-Exempt Cancer Hospitals > Measures > Chemotherapy Measure Dry Run
- CMS encourages facilities to review their measure results and ask questions about the measure during the dry run period.
  - Send questions about the chemotherapy measure to [CMSChemotherapyMeasure@yale.edu](mailto:CMSChemotherapyMeasure@yale.edu).

# Important Upcoming Events

## Currently Scheduled 2017 Webinars

- **October 26:** *PCHQR Program: New End-of-Life Measures (American Society of Clinical Oncology [ASCO])*
- **November 16:** *PCHQR Program: Best Practices II*
- **December 14:** *PCHQR Program: The Year in Review and a Look Ahead*



# Important Upcoming Dates

## Upcoming HQR Data Submissions

- **October 4, 2017:** Q2 2017 HCAHPS Survey
- **November 15, 2017:**
  - Q1 2017 chemo (breast and colon)
  - Q3 2016 hormone
  - Q2 2017 HAI

# Important Upcoming Dates

## *Hospital Compare Key Dates*

- **October 2017**
  - Contains:
    - 3Q 2015 through 2Q 2016 chemo data
    - 1Q 2015 through 4Q 2015 hormone data
    - 1Q 2016 through 4Q 2016 HCAHPS Survey data
  - Anticipated refresh October 25
- **December 2017**
  - Contains:
    - 4Q 2015 through 3Q 2016 chemo data
    - 2Q 2015 through 1Q 2016 hormone data
    - 2Q 2016 through 1Q 2017 HCAHPS Survey data
    - 1Q 2016 through 4Q 2016 OCM data
    - 1Q 2016 through 4Q 2016 EBRT data
  - Preview period scheduled October 2 through October 31
  - Anticipated refresh December 20

# Continuing Education Approval

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

- **National**

- Board of Registered Nursing (Provider #16578)

- **Florida**

- Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
- Board of Nursing Home Administrators
- Board of Dietetics and Nutrition Practice Council
- Board of Pharmacy

**PLEASE NOTE:** To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.

# 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 the HSAG 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 was 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.**

Done

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

# CE Credit Process: Certificate

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.

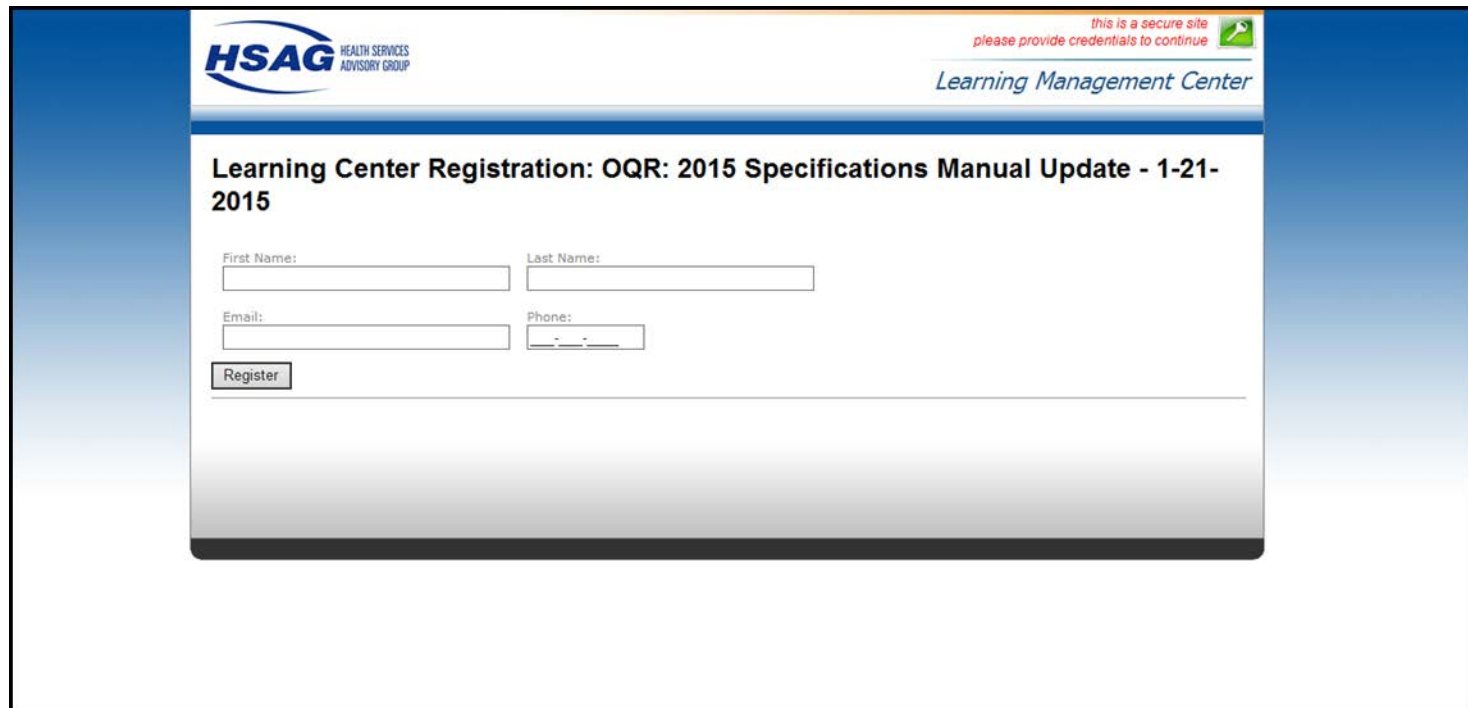
**New User Link:**  
<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

**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 displays the registration interface for the HSAG Learning Management Center. At the top left is the HSAG logo with the text 'HEALTH SERVICES ADVISORY GROUP'. At the top right, a security notice states 'this is a secure site please provide credentials to continue' next to a lock icon, and the text 'Learning Management Center' is displayed. The main heading for the registration is 'Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015'. Below this heading are four input fields: 'First Name:', 'Last Name:', 'Email:', and 'Phone:'. The 'Phone:' field includes a dropdown menu for the country code. A 'Register' button is positioned below the 'First Name' and 'Email' fields. The entire registration form is contained within a blue-bordered box.

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site  
please provide credentials to continue

Learning Management Center

**Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015**

First Name:

Last Name:

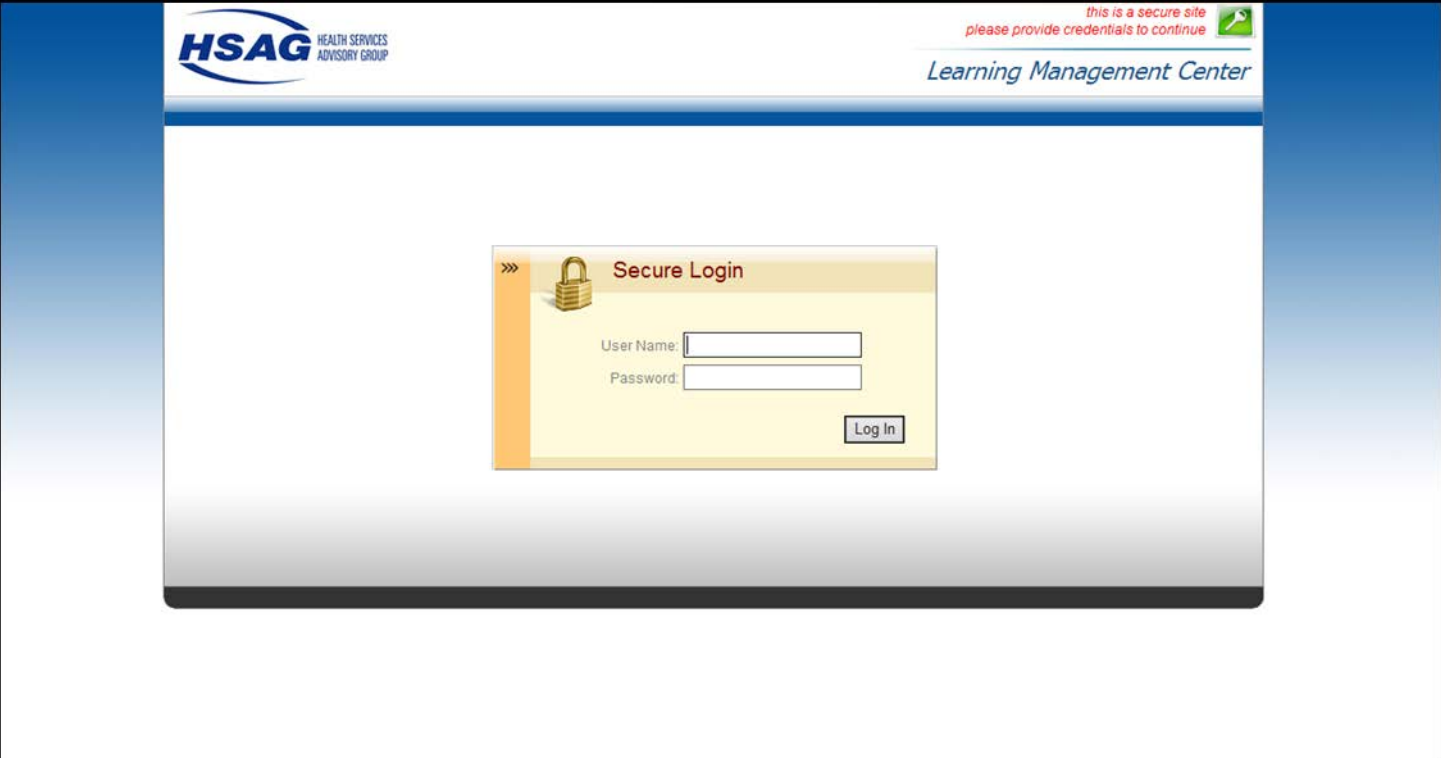
Email:

Phone:

Register



# 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 with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a red security warning reads "this is a secure site please provide credentials to continue" next to a small green icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box with a yellow background and an orange border. Inside this box, there is a padlock icon, the title "Secure Login", and two input fields labeled "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.

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## **Closing Remarks**

# Disclaimer

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