



PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

Inpatient Value, Incentives, and Quality Reporting (VIQR)

Outreach and Education Support Contractor

PCHQR Program: CY 2023 Resources and Tools

Presentation Transcript

Speaker

Lisa Vinson, BS, BSN, RN
Program Lead, PCHQR Program
Inpatient VIQR Outreach and Education Support Contractor

February 23, 2023

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Lisa Vinson: Good afternoon, and welcome to today's Outreach and Education program for the PPS-Exempt Cancer Hospital Quality Reporting, or PCHQR, Program, entitled *Calendar Year 2023 Resources and Tools*. My name is Lisa Vinson, and I am the Program Lead for the PCHQR Program with the Inpatient Value, Incentives, and Quality Reporting, or VIQR, Outreach and Education Support Contractor. I will be the speaker for today's event. Today's presentation will focus on an overview of a few familiar program resources and tools which are used to assist you with data collection and submission requirements. We will also navigate both [QualityNet](#) and [Quality Reporting Center](#) websites to locate these resources and tools.

As always, you can submit inquiries using the Question function that was discussed earlier. As time allows, we will respond to your inquiries during today's event. As we may not be able to address all questions received due to time limitations, please remember that all questions and answers, as well as the recording and transcript for today's event, will be posted on Quality Reporting Center and QualityNet under the PCHQR Program tab. Lastly, I would like to emphasize that today's event is specific to the participants in the PPS-Exempt Cancer Hospital Quality Reporting Program only. Others interested in the topics covered during today's webinar are certainly welcome to attend. However, the information presented today only pertains to those participating in the PCHQR Program. If you are not a participant in the PCHQR Program and have similar measures or requirements in your CMS Quality Reporting Program, please refer to the materials supplied by your program's support contractor.

The purpose of today's event is to review calendar year 2023 resources and tools for participants in the PCHQR Program.

At the culmination of today's presentation, we hope that participants will be able to locate and understand PCHQR Program resources and tools on the QualityNet and Quality Reporting Center websites.

This slide is our standard acronyms and abbreviations slide.

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We provide this slide during each event to serve as a reference for you to use as we discuss our program. Also, by listing the abbreviations and their corresponding full name here, at the beginning, we are able to simplify the appearance of the slides for this presentation. At this time, I would like to highlight a few acronyms and abbreviations you may hear today. These include CY, for calendar year; FY, for fiscal year; FSR, for Facility-Specific Report; HCP, for healthcare personnel; HQR, for Hospital Quality Reporting; and PDC, for Provider Data Catalog.

At least twice a year, most PCHQR Program resources and tools available to program participants, which we will review today, undergo updates to reflect the most up-to-date program information. We will begin our discussion with the PCHQR Program Manual.

The PCHQR Program Manual can be accessed on both Quality Reporting Center and QualityNet. The program manual is usually updated twice a year, with the most significant update occurring during the early fall, after the final rule is published. The second round of updates, in the spring, contain the information that has emerged since the publication of the final rule and has any clarifications and updates to assist you in understanding the measures and reporting process for the current calendar year's patient care. If there are substantial updates needed, the second iteration of the program manual will be made available this spring, likely sometime in April or May. Before we review the last updates made to the program manual, I would like to give you a quick refresher on the use of this manual. First, the program manual is essentially an overview of the PCHQR Program. It is NOT a measure specifications manual. Currently, the program does not have any web-based measures that require abstraction; however, if this changes, the measure specifications needed to abstract measures are available on QualityNet for the PCHQR Program, specifically on the Data Collection page. Secondly, the manual provides a comprehensive review of all aspects of the program. As you will see, this spans from the final rules establishing and governing the program, to the specific measures and how to report them, to participation, and to Public Reporting.

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Thirdly, the manual has electronic links. This allows you, from the Table of Contents, to jump to the specific portion of the program manual you are seeking information on. There are a total of 10 sections in the program manual and three appendices. This slide lists only the sections that were last updated for the program manual, which is currently posted on the QualityNet and Quality Reporting Center websites. Beginning with Section 1, the Inpatient Prospective Payment System, or IPPS, Long-Term Care Hospital, or LTCH, PPS Final Rules section was updated to include the Fiscal Year 2023 IPPS/LTCH PPS Final Rule, published back in August. There is a summary of the finalized changes and a link to the *Federal Register* version of the final rule. Section 2: Measures provides a list of all the current measures in the PCHQR Program. Section 4: Hospital Quality Reporting, or HQR, Registration Process now reflects the updated steps for logging in the HQR system. Section 8: Access and Reviewing Reports discusses two types of reports, the PCHQR Performance Report and the HCAHPS report. Please note that the PCHQR Performance Report is now available, and the information provided in the program manual provides a review of steps you will need to take to access these reports in the HQR system. As a reminder, these reports are the equivalent of the PDF facility report you once generated in the legacy QualityNet system to validate your data submissions for a given fiscal year. Then, there is also the HCAHPS report which is currently available in the HQR system, and the steps are provided in the program manual on how to access these reports in the HQR system. Section 9: Public Reporting was updated to include the current public display timeline, which includes the Provider Data Catalog, or PDC, release and associated quarters of data that will be displayed. Lastly, Appendices A and B, the PCHQR Program Measure Submission Deadlines by Due Date table and the PCHQR Program Relationship Matrix of Program Measures by Years and Quarters, are both available, and I will provide more detail about these tools which have dedicated slides that we will be discussing shortly. As a reminder, the PCHQR Program Manual is currently located on both the QualityNet and Quality Reporting Center websites. Later in the presentation, we will discuss the exact location of the program manual and other resources and tools on both of these sites.

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This tool, the PCHQR Program Measure Submission Deadlines by Due Date table, has been updated to include submission due dates through November 2023, the last data submission deadline for this calendar year. This document is located on both the QualityNet and Quality Reporting Center websites.

Displayed on this slide is the PCHQR Program Relationship Matrix of Program Measures by Years and Quarters. This document displays the measure name, applicable program or fiscal year, reporting period or calendar year quarters, quarterly data submission deadline date, and Public Reporting releases. This tool provides a consolidated view of the relationship between the program measure, applicable fiscal year, data submission deadline, and Public Reporting release. This document is also located both the QualityNet and Quality Reporting Center websites.

The Measure Crosswalk for Program Years FY 2020 through 2025 resource lists all measures that have ever been included in the PCHQR Program and their status throughout the span of the specified fiscal year. The measure crosswalk is typically updated once a year, usually in the fall, to reflect any finalized measure changes in the final rule, such as the effective fiscal year a measure is added or removed. For instance, if a measure is added, a checkmark will be placed accordingly. If a measure is removed, Not Applicable or N/A will be marked accordingly. The measure crosswalk was last updated to include fiscal year 2025. This document is also located on both QualityNet and Quality Reporting Center for your convenience.

Now, we will take some time and navigate through a few of the PCHQR Program pages on QualityNet, where the resources and tools we just discussed are found.

For your convenience, I have included the QualityNet PCHQR Program page links, which will take you directly to the tools we discussed today.

The QualityNet PCHQR Program Overview page provides statutory and background related information.

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There is also a link to the Data Collection page and links that will direct you to the Resources and Measures pages. We will review these pages on the next series of slides.

On this slide, you have a view of the QualityNet home page. If you are looking for more information on the PCHQR Program, you will need to click the PPS-Exempt Cancer Hospitals box as denoted on the red box on this slide. By doing so, you will be taken to the screen on the next slide.

This is the PCHQR Program landing page, where you can start your journey to accessing all information related to the program. From this page, you can navigate to several different pages noted by the headers at the top of the page, such as Measures, Public Reporting, Data Management, Resources, and Notifications. You are also able to download the program manual, and there is a shortcut button to the PCHQR Data Collection page.

Here is how you will access the QualityNet PCHQR Program Data Collection Page, which houses the data collection tools and specifications for the program measures. On the Data Management page, you will find the PCH Data Collection selection, as shown by the red box on this slide. By selecting Learn More, you will be directed to the Data Collection Overview page which houses the data collection tools for the PCHQR Program measures.

This is the top portion of the Data Collection page. Here, you will find links to download and view the Measure Submission Deadlines by Due Date Table, which we discussed earlier; the Extraordinary Circumstances Exception, or ECE, Form; and the Measure Exception Form.

This is a portion of the bottom half of the Data Collection page. There is a total of five tables on this page. Each table represents a measure category, along with the measure information, data collection tools, and acceptable method of transmission. Currently, fiscal year 2023 measure information is available for all of the claims-based measures.

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Upcoming updates for this page will include fiscal year 2024 measure information for the Admissions and Emergency Department, or ED, Visits for Patients Receiving Outpatient Chemotherapy, or PCH-30 and PCH-31 measure; the four EOL measures, which are displayed on this screen, which are PCH-32, -33, -34 and -35; 30-Day Unplanned Readmissions for Cancer Patients, or PCH-36 measure; and the Surgical Treatment Complications for Localized Prostate Cancer, or PCH-37, measure. Again, this page will be updated in accordance with when the Facility-Specific Reports, or FSRs, will be distributed. This will be discussed later on in the presentation.

Back to the Overview page, the Learn More button, as illustrated by the red box on this slide, will allow you to access many of the resources and tools we have discussed today. By selecting Learn More, you will be taken to the screen on the next slide.

The object for this page is locating or navigating to the Resources page, and you will do so by selecting View Resources as shown by the red box on this slide.

Here is a consolidated list of the program resources discussed today: the program manual, Measure Submission Deadlines by Due Date Table, measure crosswalk, and relationship matrix. On the next slide, we will review the Final Rules tab.

The Final Rules tab is updated at least once a year to reflect a summary of the finalized changes published in the PCHQR Program section of the final rule. Therefore, the most current update made to this page includes a summary of the finalized changes for the program in last year's final rule, fiscal year 2023, and a downloadable link that directs to the *Federal Register* version of the final rule. Although, not displayed on this slide, all final rule publications are listed on this page, beginning with the fiscal year 2013 final rule. This page will be updated later this year when the fiscal year 2024 final rule is published.

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This is the PCHQR Program Measures page. Here is where you can find a list of the PCHQR Program claims-based measures. By clicking Learn More by each of the measures, you will be taken to a page dedicated to information on those measures. For instance, the chemotherapy measure page, which will be updated this spring when the fiscal year 2024 measure results are available, provides an overview of the measure; information concerning the measure methodology, such as the measure specifications and data dictionary; information on the FSRs, such as a mock FSR and user guide; and resources, such as a Frequently Asked Questions document, measure updates, a specifications report, and fact sheet. Also available are archived resources. Please revisit this page when the fiscal year 2024 claims-based measure results are available. Typically, the Listserve communications informing participants when the FSRs are available will provide links to this page so that you are able access the most current information.

On the next slide, we look at the PCHQR Program Measures section.

This page displays the finalized measures for inclusion in the PCHQR Program by measure type and program or fiscal year, which is 2021 through 2025. Of note, there is a link to the measure crosswalk, which we discussed earlier, which is a printer-friendly version of the information provided on this slide.

In addition to the QualityNet website, the Quality Reporting Center website is a valuable resource, as well. I would now like to briefly show you how to navigate this site, particularly the PCHQR Program page.

Here are quick links to the Quality Reporting Center PCHQR Program pages we will review for this portion of the event. By clicking either link, you will be taken directly to these pages for convenience. If you are not familiar with this site, please bookmark these pages and refer back to them at your leisure.

The Quality Reporting Center home page, shown here, can be accessed by clicking the hyperlink above the image.

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On this page, you will start by selecting Inpatient, as denoted by the red box on this slide. By doing so, you will go to the screen on the next slide.

On this page, you have two options that will take you directly to the PCHQR Program page. For the purpose of the presentation, we will choose the selection on the left-hand side of screen, which will display the drop-down menu options on the next slide.

Now, from the five options available under the PCHQR Program header, by choosing Resources and Tools, you will be taken to the screen on the next slide.

Here you will find many, if not all, of the same resources and tools found on the QualityNet PCHQR Program page. From this page, you can access the Hospital Contact Change Form and Public Reporting documents, such as the January 2023 preview documents, which are currently posted. A future update will include the April 2023 preview documents. The PCHQR Program Manual and program resources and tools that we have already covered are available on this page. There are also additional resources available, along with a link to the Measure Exception Form and Extraordinary Circumstances Exception, or ECE, request form on this page as well.

Lastly, I wanted to highlight the PCHQR Program Archived Events page. If you are ever looking for a past event recording, transcript, and/or question-and-answer summary document, you can locate these items on this page.

We will conclude today's event, as always, by reviewing key reminders for the PCHQR Program, beginning on our next slide.

Here is a list of the upcoming data submission deadlines: On April 5, Q4 2022 HCAHPS Survey data are due. On May 15, Q4 HAI and COVID-19 HCP data are due. Q4 2022–Q1 2023 Influenza Vaccination Among HCP data are due, as well. Lastly, on July 5, Q1 2023 HCAHPS Survey data are due.

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These submission due dates and the remaining deadline dates for calendar year 2023 are also provided in a table format, which is the Measure Submission Deadline by Due Dates Table we discussed earlier. Please be sure you are signed up to receive PCHQR Program notifications, as data submission reminders are distributed multiple times prior to the deadline date. You can only receive these and other program-related communications by signing up via the [Subscribe to Email Updates](#) link on the QualityNet home page.

This slide provides information about the upcoming Provider Data Catalog, or PDC, releases. Most recently, the PDC was updated on January 25. For this release, the following quarters of data are displayed: Q2 2021–Q1 2022 HCAHPS Survey data; Q2 2021–Q1 2022 HAI measure data; Q1 2022 COVID-19 Vaccination HCP data; and Q1 2021–Q4 2021 PCH-15 data. We are currently in the April 2023 preview period, which closes Thursday, February 24. The following measures and quarters of data are included in this preview period in preparation for the April release or update: Q3 2021–Q2 2022 HCAHPS Survey data; Q3 2021–Q2 2022 HAI measure data; and Q2 2022 COVID-19 HCP measure data. Please be sure that you have reviewed your facility's data for accuracy before the close date. The exact April PDC release date will be announced via Listserve communication. So, again, please be sure you are signed up to receive PCHQR Program notifications as public reporting dates are subject to change. We provide specific dates and other pertinent information via these communications.

Outlined on this slide are upcoming activities for the program's claims-based measures. One important reminder regarding all claims-based measures is the new method in which the PCHs will be receiving their Facility-Specific Reports, or FSRs. Back in November of last year, there was a Listserve communication distributed, notifying PCHQR Program participants, along with other quality reporting program participants, that the claims-based measure FSRs moved from the Managed File Transfer, or MFT, system to the Hospital Quality Reporting, or HQR, system.

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Of note, this communication explained that FSRs will only be available via MFT by request and provided instructions on where and how to download the FSRs in the HQR system. For your convenience, the link provided on this slide will direct you to this communication. For the OP Chemotherapy measure, or PCH-30 and PCH-31, the anticipated delivery date for the FSRs of the fiscal year 2024 measure results is this spring, and these results will be publicly reported in the July 2023 PDC release. The fiscal year 2024 data collection period is Q3 2021– Q2 2022. For the Cancer Readmissions measure, or PCH-36, the anticipated delivery date for the FSRs of the fiscal year 2024 measure results is this fall. These results will be publicly reported in the October 2023 PDC release. The fiscal year 2024 data collection period is Q4 2021–Q3 2022.

Please note that EOL and prostate cancer measure fiscal year 2024 measure results are both confidential. For the EOL measures, or PCH-32, -33, -34 and -35, the anticipated delivery date for the FSRs of the fiscal year 2024 measure results is between this spring and this summer. These results are confidential. The fiscal year 2024 data collection period is Q3 2021–Q2 2022. As you may recall, the Fiscal Year 2023 IPSS/LTCH PPS Final Rule stated that the fiscal year 2025 measure results will be publicly reported in the July 2024 PDC release. For the prostate cancer measure, or PCH-37, the anticipated delivery date for the FSRs of the fiscal year 2024 measure results is this spring. These results are also confidential. The fiscal year 2024 data collection period is Q3 2020–Q2 2021. Of note, these results are confidential as public reporting will have to be specified in a future final rule publication. Listserve communications will be distributed to those signed up to receive program notifications regarding the availability of the FSRs for all claims-based measures as we get closer to the time.

On the next series of slides, we will review how to sign up for email notification and access the [QualityNet Question & Answer Tool](#).

Here is where you subscribe to PCHQR Program notifications. This link is located on the QualityNet home page.

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Once you select the Subscribe to Email Updates, as noted on the red box on this slide, you will be taken to the screen on the next slide.

Here, you will be asked to enter your name and email address, as shown by the red box on the left side. Then, you will have the opportunity to select the program notification lists you wish to join. At least one must be selected. There are various quality reporting programs available to select, but the red box on the right side denotes the selection you will need to make in order to receive PCHQR Program notifications. Of note, all fields marked with an asterisk are required. Once you've made your selection or selections, you will then select Submit, as shown by the red arrow. From this point, you will receive an email requesting your confirmation for each subscription submission. Please be sure to follow the instructions in this email to ensure your subscription is confirmed.

Displayed on this slide is how you can access the PCHQR Program Questions & Answers Tool via the QualityNet home page. You will access this tool by selecting the Help drop-down link, as indicated by the red box, and selecting the PPS-Exempt Cancer Hospitals link to start the process.

Now, you are at the QualityNet Question & Answer Tool landing page. After you select the Ask a Question link, as shown by the red box on this slide, you will be taken to a page where you will need to complete your personal information. Then, you will be asked to enter details regarding the inquiry you are submitting. On this page, you are also able to Browse Program Articles and Search to see if your questions may have been previously addressed and posted for viewing.

Here is where you will submit your inquiry. Please be sure to complete the required fields. Once this is complete, you will need to select Submit Question, as denoted by the red box on this slide, to submit your inquiry. We encourage you to utilize this tool to ask any program-related questions you may have, and you may query the system to see if the topic you are inquiring about has already been addressed.

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In closing, thank you for your time and attention during today's event.

As a final reminder, please be sure you are signed up to receive PCHQR Program notifications, as important information will be distributed about upcoming PCHQR Program related activities.

Thank you again. Enjoy the remainder of your day!