



PCHQR Program: CY 2023 Resources and Tools

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Purpose

This presentation will review calendar year (CY) 2023 resources and tools for participants in the Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program.

Objectives

Participants will be able to locate and understand PCHQR Program resources and tools on the [QualityNet](#) and [Quality Reporting Center](#) websites.

Acronyms and Abbreviations

ACS	American Cancer Society	HCP	healthcare personnel
AJCC	American Joint Committee on Cancer	HQR	Hospital Quality Reporting
CAUTI	catheter-associated urinary tract infection	IPPS	inpatient prospective payment system
CDC	Centers for Disease Control and Prevention	LTCH	Long-Term Care Hospital
CDI	<i>Clostridium difficile</i> Infection	MRSA	Methicillin-resistant <i>Staphylococcus aureus</i>
CLABSI	central line-associated bloodstream Infection	NHSN	National Healthcare Safety Network
CMS	Centers for Medicare & Medicaid Services	NQF	National Quality Forum
CY	calendar year	PCH	PPS-Exempt Cancer Hospital
DACA	Data Accuracy and Completeness Acknowledgement	PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
EOL	End of Life	PDC	Provider Data Catalog
FSR	Facility-Specific Report	PPS	prospective payment system
FY	fiscal year	Q	quarter
HAI	healthcare-associated infection	SSI	Surgical Site Infection
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	VIQR	Value, Incentives, and Quality Reporting

PCHQR Program: CY 2023 Resources and Tools

PCHQR Program Resources and Tools

PCHQR Program Manual Updates

- Section 1: PCHQR Program – Inpatient Prospective Payment System (IPPS)/Long-Term Care Hospital (LTCH) PPS Final Rules
- Section 2: Measures
- Section 4: Hospital Quality Reporting (HQR) Registration Process
- Section 8: Accessing and Reviewing Reports
- Section 9: Public Reporting
- Appendix A: PCHQR Program Measure Submission Deadlines by Due Date
- Appendix B: PCHQR Program Relationship Matrix of Program Measures by Years and Quarters

Measure Submission Deadlines by Due Date

Due Date	CLABSI/CAUTI/SSI/MRSA/CDI*	Flu HCP Vac*	COVID-19 HCP Vac*	HCAHPS	DACA
11/15/2022	Q2 2022 (4/1–6/30)	N/A	Q2 2022 (4/1–6/30)	N/A	N/A
01/04/2023	N/A	N/A	N/A	Q3 2022 (7/1–9/30)	N/A
02/15/2023	Q3 2022 (7/1–9/30)	N/A	Q3 2022 (7/1–9/30)	N/A	N/A
04/05/2023	N/A	N/A	N/A	Q4 2022 (10/1–12/31)	N/A
05/15/2023	Q4 2022 (10/1–12/31)	Q4 2022–Q1 2023 (10/1/22–3/31/23)	Q4 2022 (10/1–12/31)	N/A	N/A
07/05/2023	N/A	N/A	N/A	Q1 2023 (1/1–3/31)	N/A
08/15/2023	Q1 2023 (1/1–3/31)	N/A	Q1 2023 (1/1–3/31)	N/A	N/A
08/31/2023	N/A	N/A	N/A	N/A	For FY 2024
10/04/2023	N/A	N/A	N/A	Q2 2023 (4/1–6/30)	N/A
11/15/2023	Q2 2023 (4/1–6/30)	N/A	Q2 2023 (4/1–6/30)	N/A	N/A

* Data are submitted to the CDC via NHSN.

† Submitted to CMS via the Hospital Quality Reporting System at <https://hqr.cms.gov/hqrmg/login>.

Relationship Matrix of Program Measures by Years and Quarters

This reference document for PCHQR Program participants provides the following:

- Specific measures with their National Quality Forum (NQF) and PPS-exempt cancer hospital (PCH) number
- Program (Fiscal) Year to which the measure applies
- Reporting Periods that apply to each respective Program (Fiscal) Year
- Quarterly data submission deadlines for each Reporting Period
- Time frames when each metric will be displayed for Public Reporting on the Provider Data Catalog (PDC) (<https://data.cms.gov/provider-data/>) website

Safety and Healthcare-Associated Infection (HAI)	Program (Fiscal) Years	Reporting Periods—Calendar Year Quarters (Qs)	Quarterly Data Submission Deadlines	PDC Release October 2022	PDC Release January 2023	PDC Release April 2023	PDC Release July 2023	PDC Release October 2023	PDC Release January 2024	PDC Release April 2024	PDC Release July 2024	PDC Release October 2024	PDC Release January 2025	PDC Release April 2025	PDC Release July 2025
Central Line-Associated Bloodstream Infection (CLABSI) NQF #0139 (PCH-4)	2022	1Q 2021	PRIOR	1Q 2021–4Q 2021	2Q 2021–1Q 2022	3Q 2021–2Q 2022	4Q 2021–3Q 2022	1Q 2022 – 4Q 2022	2Q 2022 – 1Q 2023	3Q 2022 – 2Q 2023	4Q 2022–3Q 2023	1Q2023 – 4Q2023	2Q 2023 – 1Q 2024	3Q 2023 – 2Q 2024	4Q 2023 – 3Q 2024
		2Q 2021	PRIOR												
		3Q 2021	PRIOR												
		4Q 2021	PRIOR												
Catheter-Associated Urinary Tract Infection (CAUTI) NQF #0138 (PCH-5)	2023	1Q 2022	PRIOR	1Q 2021–4Q 2021	2Q 2021–1Q 2022	3Q 2021–2Q 2022	4Q 2021–3Q 2022	1Q 2022 – 4Q 2022	2Q 2022 – 1Q 2023	3Q 2022 – 2Q 2023	4Q 2022–3Q 2023	1Q2023 – 4Q2023	2Q 2023 – 1Q 2024	3Q 2023 – 2Q 2024	4Q 2023 – 3Q 2024
		2Q 2022	11/15/2022												
		3Q 2022	02/15/2023												
		4Q 2022	05/15/2023												
2024	1Q 2023	08/15/2023	1Q 2021–4Q 2021	2Q 2021–1Q 2022	3Q 2021–2Q 2022	4Q 2021–3Q 2022	1Q 2022 – 4Q 2022	2Q 2022 – 1Q 2023	3Q 2022 – 2Q 2023	4Q 2022–3Q 2023	1Q2023 – 4Q2023	2Q 2023 – 1Q 2024	3Q 2023 – 2Q 2024	4Q 2023 – 3Q 2024	
	2Q 2023	11/15/2023													
	3Q 2023	02/15/2024													
	4Q 2023	05/15/2024													
2025	1Q 2024	08/15/2024	1Q 2021–4Q 2021	2Q 2021–1Q 2022	3Q 2021–2Q 2022	4Q 2021–3Q 2022	1Q 2022 – 4Q 2022	2Q 2022 – 1Q 2023	3Q 2022 – 2Q 2023	4Q 2022–3Q 2023	1Q2023 – 4Q2023	2Q 2023 – 1Q 2024	3Q 2023 – 2Q 2024	4Q 2023 – 3Q 2024	
	2Q 2024	11/18/2024													
	3Q 2024	02/17/2025													
	4Q 2024	05/15/2025													

Note: Gray box indicates activity complete; Q=Quarter.

Measure Crosswalk

Program Years FY 2020 to FY 2025

NQF #	PCH #	Measures Grouped by Measure Topic	Chart-Abstracted	Claims-Based	Program Year					
					FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025
#0223	PCH-1	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	✓		N/A	N/A	N/A	N/A	N/A	N/A
#0559	PCH-2	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	✓		N/A	N/A	N/A	N/A	N/A	N/A
#0220	PCH-3	Adjuvant Hormonal Therapy	✓		N/A	N/A	N/A	N/A	N/A	N/A
#0139	PCH-4	NHSN Central Line-Associated Bloodstream Infection (CLABSI) Outcome Measure	✓		✓	✓	✓	✓	✓	✓
#0138	PCH-5	NHSN Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure	✓		✓	✓	✓	✓	✓	✓
#0753	PCH-6* PCH-7*	ACS–CDC Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure	✓		✓	✓	✓	✓	✓	✓

PCHQR Program: CY 2023 Resources and Tools

PCHQR Program on QualityNet

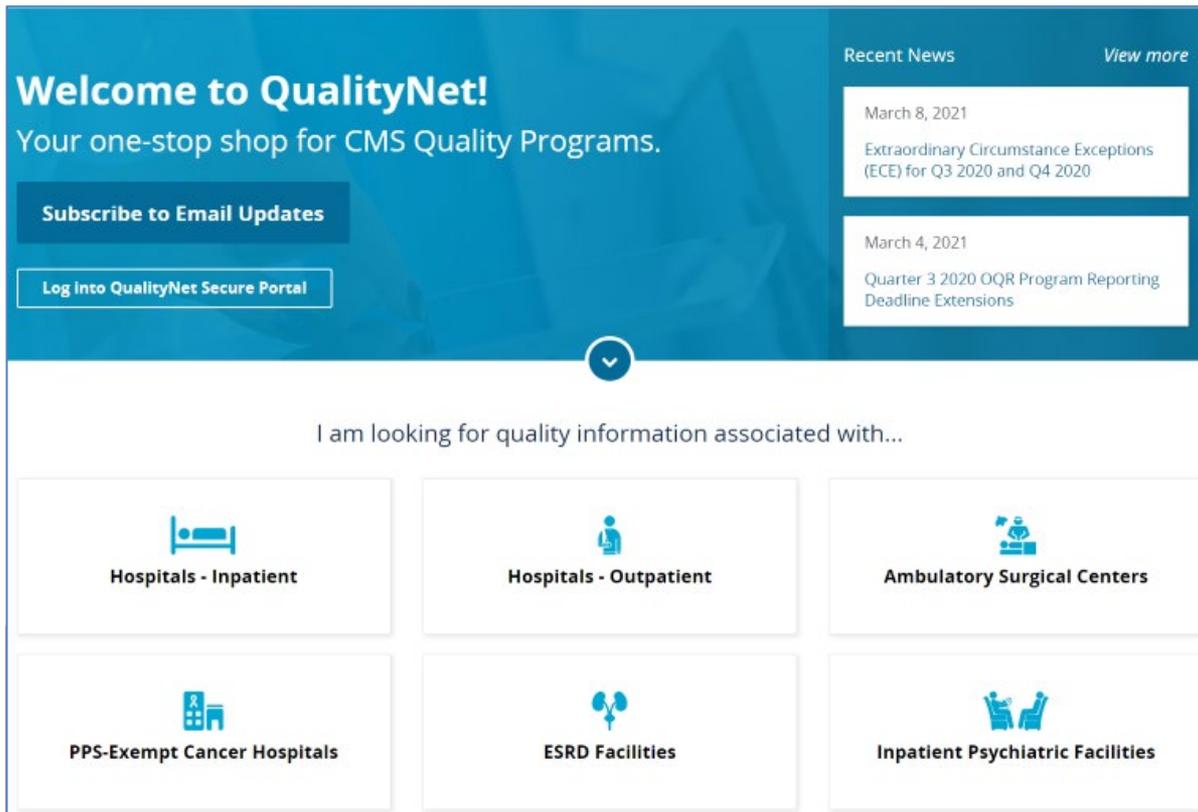
Where Can I Find PCHQR Program Resources?

QualityNet

- [PCHQR Program Overview page](#)
- [PCHQR Program Data Collection page](#)
- [PCHQR Program Resources page](#)
- [PCHQR Program Measures page](#)

QualityNet Home Page

QualityNet



The screenshot shows the QualityNet home page with a blue header. On the left, it says "Welcome to QualityNet! Your one-stop shop for CMS Quality Programs." Below this are two buttons: "Subscribe to Email Updates" and "Log into QualityNet Secure Portal". On the right, there is a "Recent News" section with two items: "March 8, 2021: Extraordinary Circumstance Exceptions (ECE) for Q3 2020 and Q4 2020" and "March 4, 2021: Quarter 3 2020 OQR Program Reporting Deadline Extensions". A central dropdown menu is open, showing "I am looking for quality information associated with..." followed by six categories: "Hospitals - Inpatient", "Hospitals - Outpatient", "Ambulatory Surgical Centers", "PPS-Exempt Cancer Hospitals", "ESRD Facilities", and "Inpatient Psychiatric Facilities".

Welcome to QualityNet!
Your one-stop shop for CMS Quality Programs.

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Recent News [View more](#)

March 8, 2021
Extraordinary Circumstance Exceptions (ECE) for Q3 2020 and Q4 2020

March 4, 2021
Quarter 3 2020 OQR Program Reporting Deadline Extensions

I am looking for quality information associated with...

- Hospitals - Inpatient
- Hospitals - Outpatient
- Ambulatory Surgical Centers
- PPS-Exempt Cancer Hospitals
- ESRD Facilities
- Inpatient Psychiatric Facilities

QualityNet PCHQR Program Overview Page

Home /

PPS-Exempt Cancer Hospitals

[Overview](#) [Measures](#) [Public Reporting](#) [Data Management](#) [Resources](#) [Notifications](#)

PPS-Exempt Cancer Hospital Overview

The Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program was developed as mandated by Section 3005 of the Affordable Care Act (Public Law 111-148).

[Read more](#)

Participating in the PCHQR Program?

[Download Fall 2022 Program Manual](#)

[View PCHQR Data Collection](#)

PPS-Exempt Cancer Hospital Quality Programs

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

[Learn more](#)

Learn about PPS-Exempt Cancer Hospital Measures, Public Reporting, and Data Management

QualityNet PCHQR Program Data Management Page

Home / PPS-Exempt Cancer Hospitals /

PPS-Exempt Cancer Hospital Data Management

Overview Measures Public Reporting **Data Management** Resources Notifications

PPS-Exempt Cancer Hospital Data Management

Learn more about data collection, data submission, and data validation.

Data Collection

PPS-Exempt Cancer Hospital Data Collection

The PCHQR program is comprised of multiple types of measures that are collected using a variety of tested data collection instruments.

[Learn more](#)

Data Submission

PPS-Exempt Cancer Hospital Data Submission

PPS-Exempt Cancer Hospitals (PCHs) participating in the PCHQR Program must submit required data via each measure's acceptable methods of transmission.

[Learn more](#)

QualityNet PCHQR Program Data Collection Page

Data Collection

Overview

Data Collection Overview

The PCHQR program is comprised of multiple types of measures that are collected by participating PPS-Exempt Cancer Hospitals using a variety of tested data collection instruments. These measures have different sampling requirements, reporting methods, and data submission deadlines.

File Name	File Type	File Size	
PCHQR Program Data Submission Deadlines (10/2022)	PDF	175 KB	Download

A facility can request an extension or waiver of various Quality Reporting Program requirements due to extraordinary circumstances beyond the control of the facility. To request an extension or waiver, complete and submit the Extraordinary Circumstances Exception form within 30 days of the disaster or extraordinary circumstance.

File Name	File Type	File Size	
Extraordinary Circumstances Exception form	PDF	257 KB	Download

A facility may submit a Measure Exception Request Form due to no/low procedure volumes.

File Name	File Type	File Size	
Measure Exception Request Form	PDF	136 KB	Download

End of Life (EOL) Measure Data Collection Tools

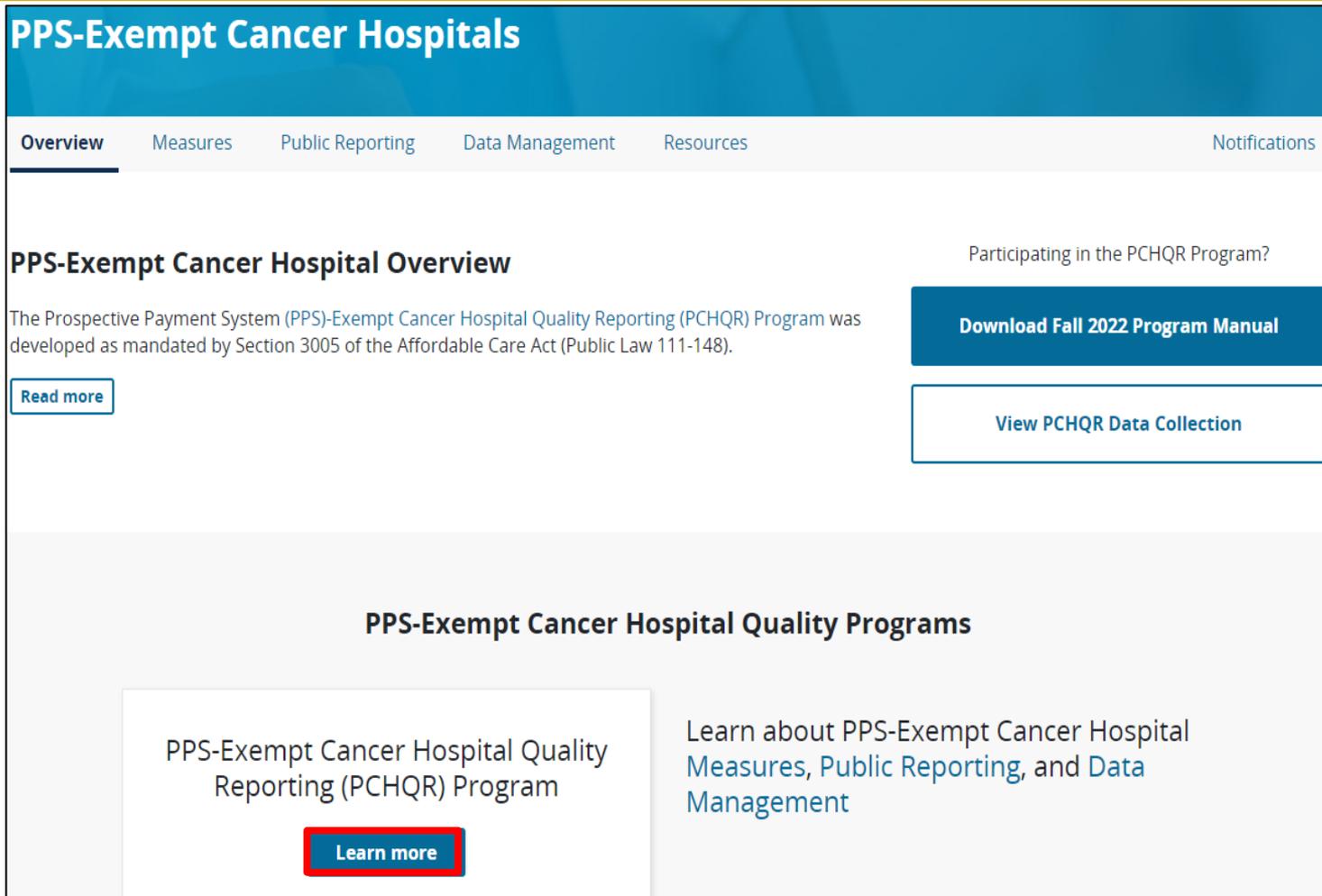
Table 2: Clinical Process/Oncology Care Measures (OCM)

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	FY 2023 EOL measure information	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	FY 2023 EOL measure information	None (This is a claims-based measure.)	This data will be submitted by CMS contractor on behalf of the PCH.

Table 3: Intermediate Clinical Outcome Measures

NQF #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
213	PCH-33	Proportion of Patients Who Died from Cancer Admitted to the ICU in the Last 30 Days of Life	FY 2023 EOL measure information	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 (3) Days	FY 2023 EOL measure information	None (This is a claims-based measure.)	This data will be submitted by CMS contractor on behalf of the PCH.

QualityNet PCHQR Program Overview Page – Learn More



The screenshot shows a web page titled "PPS-Exempt Cancer Hospitals". The page has a blue header with the title and a navigation menu with links for "Overview", "Measures", "Public Reporting", "Data Management", "Resources", and "Notifications". The "Overview" link is underlined. Below the navigation, the main heading is "PPS-Exempt Cancer Hospital Overview". To the right of this heading is the text "Participating in the PCHQR Program?". Below the heading is a paragraph: "The Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program was developed as mandated by Section 3005 of the Affordable Care Act (Public Law 111-148)." To the right of this paragraph is a blue button labeled "Download Fall 2022 Program Manual". Below the paragraph is a "Read more" button. Below the "Download Fall 2022 Program Manual" button is a white button with a blue border labeled "View PCHQR Data Collection". Below this content is a section titled "PPS-Exempt Cancer Hospital Quality Programs". This section contains two columns. The left column has the text "PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program" and a red-bordered blue button labeled "Learn more". The right column has the text "Learn about PPS-Exempt Cancer Hospital Measures, Public Reporting, and Data Management".

PPS-Exempt Cancer Hospitals

[Overview](#) [Measures](#) [Public Reporting](#) [Data Management](#) [Resources](#) [Notifications](#)

PPS-Exempt Cancer Hospital Overview

Participating in the PCHQR Program?

The Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program was developed as mandated by Section 3005 of the Affordable Care Act (Public Law 111-148).

[Read more](#)

[Download Fall 2022 Program Manual](#)

[View PCHQR Data Collection](#)

PPS-Exempt Cancer Hospital Quality Programs

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

[Learn more](#)

Learn about PPS-Exempt Cancer Hospital Measures, Public Reporting, and Data Management

QualityNet PCHQR Program Resources Page

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

Overview PCHQR Measures Participation Resources Webinars

About the PCQHR Program

The Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program was developed as mandated by Section 3005 of the Affordable Care Act (Public Law 111-148).

The PCHQR program is intended to equip consumers with quality-of-care information to make more informed decisions about healthcare options. It is also intended to encourage hospitals and clinicians to improve the quality of inpatient care that is provided to Medicare beneficiaries. A major part of the program supports improvement by ensuring that providers are aware of and reporting on best practices for their respective facilities and type of care.

To meet the PCHQR Program requirements, PPS-Exempt Cancer Hospitals (PCHs) are required to submit specific quality measures related to the PCHQR Program to the Centers for Medicare & Medicaid Services (CMS). Mandated reporting began with the Fiscal Year (FY) 2014 payment determination year. Participating facilities must comply with the program requirements set forth in the FY 2013 IPPS/LTCH Final Rule, including public reporting of the measure rates on the Provider Data Catalog (PDC).

Resources

[View Resources](#)

[View Webinars](#)

Key Documents

[Download Fall 2022 Program Manual](#)

Participation

[Download Submission Deadlines](#)

CMS has designated 11 hospitals as PPS-Exempt (Medicare PPS-Excluded Cancer Hospitals). [Learn more about PCHQR Program eligibility.](#)

Support Contact

(844) 472-4477 or (866) 800-8765
Weekdays from 8 a.m. to 8 p.m. Eastern Time (5 a.m. to 5 p.m. Pacific Time)

QualityNet PCHQR Program Resources Page

Resources

[Overview](#) [PCHQR Measures](#) [Participation](#) **[Resources](#)** [Webinars](#)

Program Resources

[Web Resources](#)

[Forms](#)

[Final Rules](#)

PCHQR Program Resources

File Name	File Type	File Size	
Frequently Asked Questions: COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP) Measure (02/2022)	PDF	174 KB	Download
2022 PCHQR Program Manual (11/2022)	PDF	2.7 MB	Download
PCHQR Program Data Submission Deadlines (10/2022)	PDF	175 KB	Download
PCHQR Program Measure Crosswalk (10/2022)	PDF	235 KB	Download
PCHQR Measure to Public Reporting Period Relationship Matrix (10/2022)	PDF	260 KB	Download

Final Rule Publications

Resources

Overview PCHQR Measures Participation **Resources** Webinars

Program Resources

Web Resources

Forms

Final Rules

Final Rules for Hospital Inpatient PPS/Long Term Care Hospitals (LTCHs)

Information regarding the PCHQR Program can be found in the following Final Rule (FR) publications:

File Name

File Type

FY 2023 IPPS/LTCH PPS Final Rule (87 FR 49311-49314)

PDF

[Download](#)

- Finalized the public display of the timelines for the 30-Day Unplanned Readmissions for Cancer Patients and four EOL measures.
- Adopted and codified a patient safety exception into the measure removal policy.
- Acknowledgement of comments received on the Request for Information regarding the potential future adoption of two digital NHSN measures: the NHSN Healthcare-Associated *Clostridioides difficile* Infection Outcome measure and NHSN Hospital-Onset Bacteremia & Fungemia Outcome measure

PCHQR Program Measures

The screenshot displays a web application interface for "PPS-Exempt Cancer Hospital Measures". At the top, a blue header contains the title. Below it is a navigation bar with tabs for "Overview", "Measures" (which is selected and underlined), "Public Reporting", "Data Management", "Resources", and "Notifications". The main content area is divided into two sections. The first section, "PPS-Exempt Cancer Hospital Claims-Based Measure Sets", lists four categories: "Chemotherapy Measure", "Cancer Readmissions Measure", "End-of-Life (EOL) Measures", and "Prostate Cancer Measure". Each category has a right-pointing chevron icon and a "Learn more" button. The second section, "PPS-Exempt Cancer Hospital Program Measures", lists one category: "PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program Measures", also with a chevron icon and a "Learn more" button.

PPS-Exempt Cancer Hospital Measures

Overview **Measures** Public Reporting Data Management Resources Notifications

PPS-Exempt Cancer Hospital Claims-Based Measure Sets

- > Chemotherapy Measure [Learn more](#)
- > Cancer Readmissions Measure [Learn more](#)
- > End-of-Life (EOL) Measures [Learn more](#)
- > Prostate Cancer Measure [Learn more](#)

PPS-Exempt Cancer Hospital Program Measures

- > PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program Measures [Learn more](#)

QualityNet PCHQR Program Measures Page

Finalized measures for inclusion in the PCHQR Program (by measure type and program year)

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

Y = Applicable for stated program year; N/A = Not Applicable for stated program year

NQF #	PCH #	Measure Name	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025
0138	PCH-5	CDC NHSN Catheter-Associated Urinary Tract Infections (CAUTI) Outcome Measure	Y	Y	Y	Y	Y
0139	PCH-4	CDC NHSN Central Line-Associated Bloodstream Infection (CLABSI) Outcome Measure	Y	Y	Y	Y	Y
0753	PCH-6 and PCH-7	Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure	Y	Y	Y	Y	Y
0431	PCH-28	CDC NHSN Influenza Vaccination Coverage Among Healthcare Personnel (HCP)	Y	Y	Y	Y	Y
1716	PCH-27	CDC NHSN Facility-wide Inpatient Hospital-onset Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) Bacteremia Outcome Measure	Y	Y	Y	Y	Y
1717	PCH-26	CDC NHSN Facility-wide Inpatient Hospital-onset <i>Clostridium difficile</i> Infection (CDI) Outcome Measure	Y	Y	Y	Y	Y
N/A	PCH-38	COVID-19 Vaccination Coverage Among HCP	N/A	N/A	Y	Y	Y

PCHQR Program: CY 2023 Resources and Tools

PCHQR Program on Quality Reporting Center

Where Can I Find PCHQR Program Resources?

Quality Reporting Center

- [PCHQR Program Tools and Resources page](#)
- [PCHQR Program Archived Events](#)

Quality Reporting Center

[Quality Reporting Center](#)

Search



Events Calendar

Inpatient

Outpatient

ASC



Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist hospitals, inpatient psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting.

Inpatient Quality Reporting Programs – PCHQR Program

[Home](#) / Inpatient

Inpatient Quality Reporting Programs	
Newsletters	▼
Hospital Inpatient Quality Reporting (IQR) Program	▼
PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program	▼
Inpatient Psychiatric Facilities Quality Reporting Program	▼
eCQM Archived	▼
Hospital Value-Based Purchasing (VBP) Program	▼

Inpatient Quality Reporting Programs

Welcome to the Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Center.

Hospital Inpatient VIQR Outreach and Education Overview

- [CMS Hospital Inpatient VIQR Programs Overview](#) 

Here you will find resources to assist acute care hospitals and critical access hospitals, inpatient psychiatric facilities, and PPS-exempt cancer hospitals. You may use the following links to access various programs and their resources, tools, and educational events.

- [Hospital Inpatient Quality Reporting \(IQR\) Program](#)
- [Inpatient Psychiatric Facility Quality Reporting \(IPFQR\) Program](#)
- [PPS-Exempt Cancer Hospital Quality Reporting \(PCHQR\) Program](#)
- [Hospital Value-Based Purchasing \(VBP\) Program Archived Events](#)
- [eCQM Archived Events](#)

PCHQR Program Selections

Inpatient Quality Reporting Programs	
Newsletters	▼
Hospital Inpatient Quality Reporting (IQR) Program	▼
▶ PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program	▲
Upcoming Events	
PCHQR Archived Events	
PCHQR Program Tools and Resources	
PPS-Exempt Cancer Hospital Notifications	
Final Rules for Hospital Inpatient Prospective Payment Systems	
Inpatient Psychiatric Facilities Quality Reporting Program	▼
eCQM Archived	▼

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

Overview

The Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program was developed as mandated by Section 3005 of the Affordable Care Act (Public Law 111-148).

The PCHQR program is intended to equip consumers with quality-of-care information to make more informed decisions about healthcare options. It is also intended to encourage hospitals and clinicians to improve the quality of inpatient care provided to Medicare beneficiaries by ensuring that providers are aware of and reporting on best practices for their respective facilities and type of care.

To meet the PCHQR Program requirements, PPS-Exempt Cancer Hospitals (PCHs) are required to submit all quality measures to the Centers for Medicare & Medicaid Services (CMS), beginning with the Fiscal Year (FY) 2014 payment determination year. Participating facilities must comply with the program requirements set forth, including public reporting of the measure rates.

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program Eligibility

Eligible hospitals are described in section 1886(d)(1)(B)(v) and referred to as a Prospective Payment System (PPS)-Exempt Cancer Hospitals, or PCHs. These hospitals are excluded from payment under the Inpatient Prospective Payment System. The Centers for Medicare & Medicaid Services (CMS) has designated 11 hospitals as [PPS-Exempt Cancer Hospitals](#), or Medicare PPS-Excluded Cancer Hospitals.

Quality Reporting Center Tools and Resources Page

PCHQR Program Tools and Resources

Hospital Contact Change Form

- [Hospital Contact Change Form](#) 

Care Compare Preview Documents for January 2023

- [PCHQR Public Reporting Preview Quick Reference Guide](#) 
- [PCHQR Public Reporting Preview Help Guide](#) 

PCHQR Program Manual

- [Fall 2022 PCHQR Program Manual](#)  (11/2022)

PCHQR Program Resources

- [Frequently Asked Questions: COVID-19 Vaccination Coverage Among Healthcare Personnel \(HCP\) Measure \(02/2022\)](#) 
- [PCHQR Measure Crosswalk \(11/2022\)](#) 
- [PCHQR Relationship Matrix \(10/2022\)](#) 
- [PCHQR Submission Deadlines \(10/2022\)](#)  

Additional Resources

The following websites provide additional information the PCHQR Program measure specifications and sampling methodology:

- [National Quality Forum measure endorsements and performance standards \(NQF\)](#)
- [Healthcare-Associated Infections \(HAI\) measure specifications](#)  (*Center for Disease Control*)
- [HCAHPS measure specifications \(HCAHPS Online\)](#)
- [CMS Quality Payment Program Measure Specifications](#)
- [QualityNet PCHQR Data Collection Page](#)

Measure Exception Form

Some hospitals may not have locations that meet the National Healthcare Safety Network (NHSN) criteria for CLABSI or CAUTI reporting and some hospitals may perform so few procedures requiring surveillance under the SSI measure that the data may not be meaningful for *Care Compare* or sufficiently reliable to be utilized for quality reporting purposes in a program year.

Reporting will not be required for these measures if the PPS-Exempt Cancer Hospital (PCH) performed less than a combined total of 10 colon and abdominal hysterectomy procedures in the calendar year prior to the reporting year. To indicate a measure is not being reported, a Measure Exception Form should be completed and submitted prior to the First Quarter data submission deadline for the applicable program year.

- [Measure Exception Form](#) 

Extraordinary Circumstances Exceptions (ECE) Request Form

Hospitals may request an exception from various quality reporting requirements due to extraordinary circumstances beyond the control of the facility. Such circumstances may include, but are not limited to, natural disasters (such as a severe hurricane or flood) or systemic problems with CMS data collection systems that directly affected the ability of facilities to submit data.

Hospitals must submit an ECE Request Form, with **all required sections completed within 90 calendar days of the extraordinary circumstance**. The hospital may request consideration for an exception of the requirement to submit quality data for one or more quarters.

- [Extraordinary Circumstances Exceptions \(ECE\) Request Form](#) 

Quality Reporting Center

PCHQR Program Archived Events

	Events Calendar	Inpatient	Outpatient	ASC	SNF VBP	Events on Demand
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PCHQR Archived Events

[PCHQR Program: End-of-Year Review and Look Ahead](#)

12/15/2022

Description: This presentation will provide a recap of this year's PCHQR Program key events and updates and provide insight into upcoming key events for calendar year (CY) 2023. Speaker: Lisa...

[PCHQR Program: Surgical Treatment Complications for Localized Prostate Cancer \(PCH-37\) Measure Overview](#)

9/15/2022

Description: This presentation will provide an overview of the Surgical Treatment Complications for Localized Prostate Cancer (PCH-37) measure for the Prospective Payment System-exempt Cancer...

[PCHQR Program: FY 2023 IPPS/LTCH PPS Final Rule](#)

9/8/2022

Description: This presentation provides an overview of the Fiscal Year (FY) 2023 Inpatient Prospective Payment System (IPPS)/Long-Term Care Hospital Prospective Payment System (LTCH PPS) Final Rule...

PCHQR Program: CY 2023 Resources and Tools

PCHQR Program Reminders

Data Submission Deadlines

- April 5, 2023
 - Q4 2022 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey
- May 15, 2023
 - Q4 2022 Healthcare-Associated Infection (HAI)
 - Q4 2022 COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP)
 - Q4 2022–Q1 2023 Influenza Vaccination Among HCP
- July 5, 2023
 - Q1 2023 HCAHPS Survey

Provider Data Catalog (PDC) Releases

[Provider Data Catalog](#)

- **January 2023 Release: January 25, 2023**
 - Q2 2021–Q1 2022 HCAHPS Survey
 - Q2 2021–Q1 2022 HAI measure
 - Q1 2022 COVID-19 Vaccination Coverage Among HCP
 - Q1 2021–Q4 2021 PCH-15
- **April 2023 Release: Date To Be Announced**
 - Preview period: January 26–February 24, 2023
 - Q3 2021–Q2 2022 HCAHPS Survey
 - Q3 2021–Q2 2022 HAI measure
 - Q2 2022 COVID-19 Vaccination Coverage Among HCP

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Claims-Based Measures

Facility-Specific Report (FSRs) – FY 2024 Results

- Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy (PCH-30 and PCH-31)
 - Anticipated delivery date: Spring 2023
 - **NEW** accessibility method: HQR System
 - [Listserve communication](#) distributed: November 8, 2022
 - Data collection period: July 1, 2021–June 30, 2022
 - FY 2024 results will be publicly reported in the July 2023 PDC release
- 30-Day Unplanned Readmissions for Cancer Patients (PCH-36)
 - Anticipated delivery date: Fall 2023
 - **NEW** accessibility method: HQR System
 - Data collection period: October 1, 2021–September 30, 2022
 - FY 2024 results will be publicly reported in the October 2023 PDC release

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Claims-Based Measures (continued)

Confidential National Reports – FY 2024 Results

- End of Life Measures (PCH-32, PCH-33, PCH-34, PCH-35)
 - Anticipated delivery date: Spring/Summer 2023
 - **NEW** accessibility method: HQR System
 - Data collection period: July 1, 2021–June 30, 2022

Confidential National Reports – FY 2024 Results

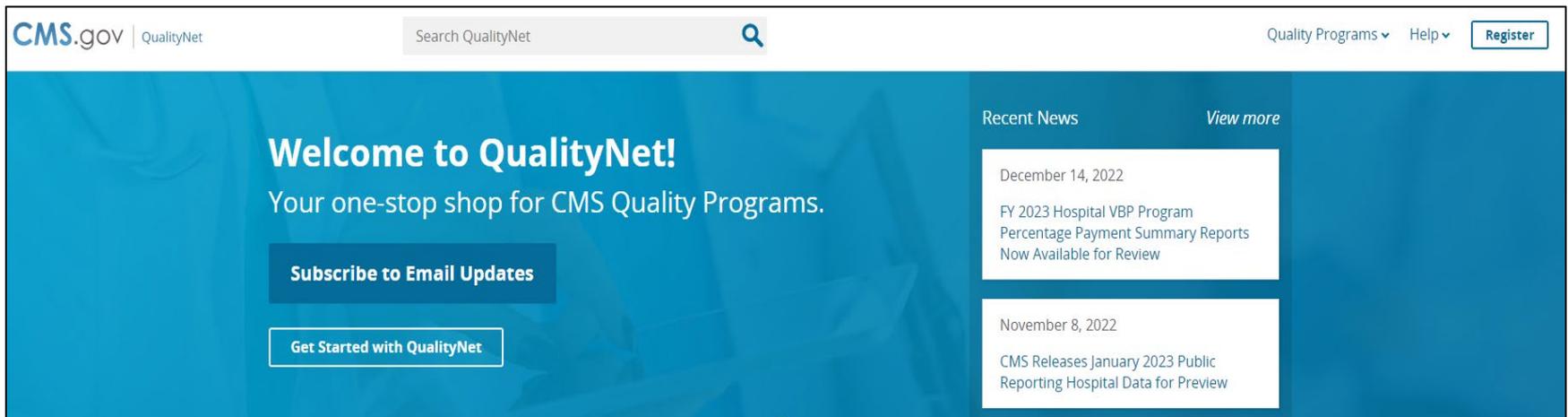
- Surgical Treatment Complications for Localized Prostate Cancer (PCH-37)
 - Anticipated delivery date: Spring 2023
 - **NEW** accessibility method: HQR System
 - Data collection period: July 1, 2020–June 30, 2021

PCHQR Program: CY 2023 Resources and Tools

QualityNet Email Updates and Question and Answer Tool

Getting Started: Receiving Program Notifications

[QualityNet Home Page](#)



The screenshot shows the QualityNet Home Page. At the top left is the CMS.gov logo and 'QualityNet'. A search bar contains 'Search QualityNet' and a magnifying glass icon. On the top right are links for 'Quality Programs', 'Help', and a 'Register' button. The main content area has a blue background with a white text box that says 'Welcome to QualityNet! Your one-stop shop for CMS Quality Programs.' Below this are two buttons: 'Subscribe to Email Updates' and 'Get Started with QualityNet'. To the right is a 'Recent News' section with a 'View more' link. It lists two news items: one dated December 14, 2022, about FY 2023 Hospital VBP Program reports, and another dated November 8, 2022, about CMS releasing January 2023 public reporting hospital data for preview.

CMS.gov | QualityNet

Search QualityNet

Quality Programs ▾ Help ▾ Register

Welcome to QualityNet!

Your one-stop shop for CMS Quality Programs.

[Subscribe to Email Updates](#)

[Get Started with QualityNet](#)

Recent News [View more](#)

December 14, 2022
FY 2023 Hospital VBP Program
Percentage Payment Summary Reports
Now Available for Review

November 8, 2022
CMS Releases January 2023 Public
Reporting Hospital Data for Preview

Sign Up for Email Updates

Sign Up for Email Updates

Enter your name and email address, and then select the lists you would like to join (at least one must be selected). You will receive an email requesting your confirmation for each subscription submission, and private lists will require approval from the list administrator prior to confirmation.

To ensure you receive messages from your lists, **please whitelist the domain: mailer.qualitynet.org**. This domain is part of every list's mailer address (example@mailer.qualitynet.org). If you have trouble receiving messages and the domain is whitelisted, please check your spam or junk folder. If the problem persists, contact your IT Support.

All fields marked with an asterisk (*) are required.

User Information

Name *

Email *

Mailing Lists

Public Lists Private Lists

Enter the required fields and select one or more mailing lists to become automatically subscribed.

▼ Quality Reporting

IQR Imp Discuss: Hospital Inpatient Quality Reporting (IQR) and Improvement Discussion
Forum for participants in Hospital Inpatient Quality Reporting Program to discuss topics of interest/concern, and share ideas, tools, and best practices.

PCHQR Notify: PPS-Exempt Cancer Hospitals Quality Reporting (PCHQR) Program Notifications
News, information, announcements, and educational offerings/events regarding the PPS-Exempt Cancer Hospitals Quality Reporting Program.

HQR Vendor Notify: Hospital Quality Reporting Vendor Notifications
Information and updates regarding any changes impacting HQR vendors.

Submit



Accessing the QualityNet Question and Answer Tool

The screenshot shows the CMS.gov QualityNet website interface. At the top left is the CMS.gov logo and 'QualityNet'. A search bar contains 'Search QualityNet'. On the right, there are links for 'Quality Programs', 'Help', 'Log into Secure Portal', and 'Register'. A dropdown menu is open, displaying three columns of links: 'Getting Started', 'Training & Guides', 'Known Issues & Maintenance', 'QualityNet Support', and 'Question & Answer Tools'. The 'Help' link in the top navigation and the 'PPS-Exempt Cancer Hospitals' link in the 'Question & Answer Tools' column are highlighted with red boxes. A 'Close' button is visible in the top right of the dropdown menu.

Getting Started
Registration
Sign In Instructions
Security Statement & Policy
Password Rules

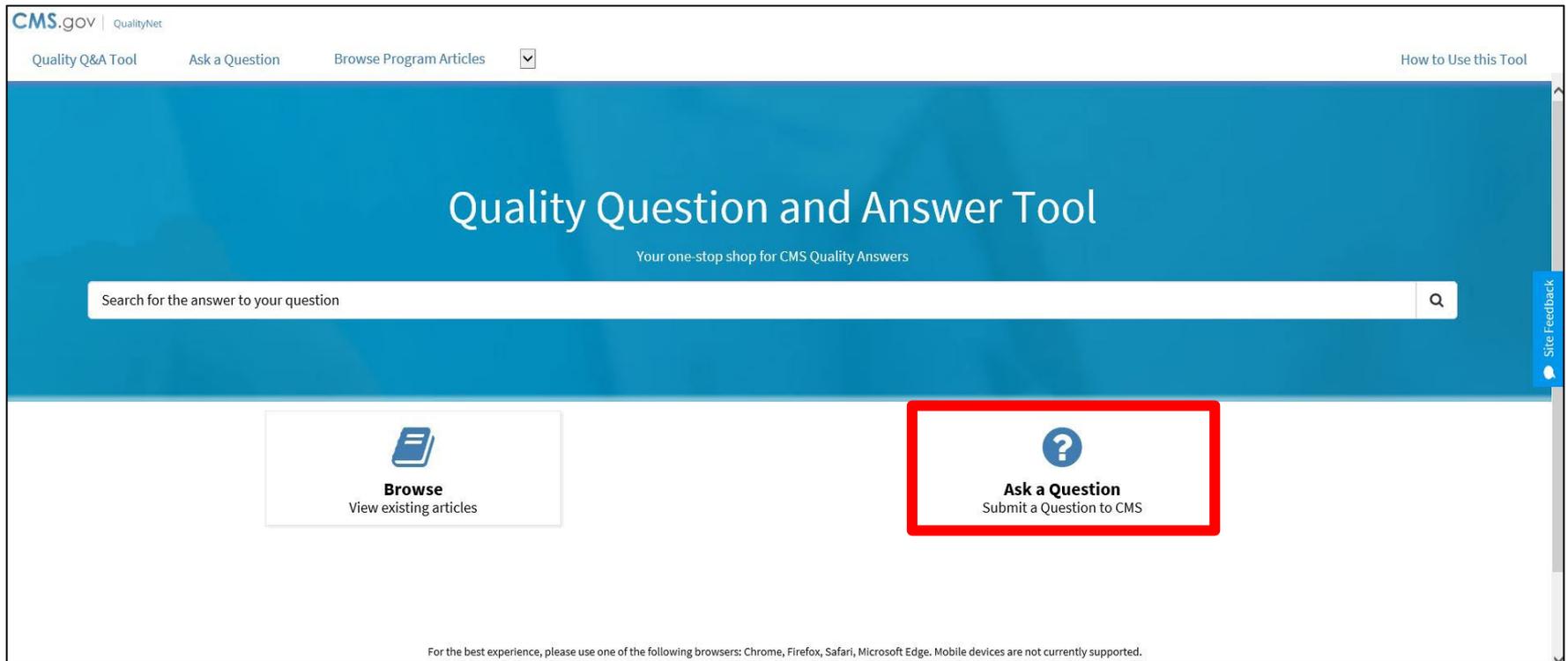
Training & Guides
QualityNet Training
QualityNet Secure Portal
Secure File Transfer
QualityNet Events Center

Known Issues & Maintenance
Known Issues
System Maintenance

QualityNet Support
QualityNet Support

Question & Answer Tools
Hospitals - Inpatient
Hospitals - Outpatient
PPS-Exempt Cancer Hospitals
Ambulatory Surgical Centers
ESRD Facilities
Inpatient Psychiatric Facilities

Ask a Question



CMS.gov | QualityNet

Quality Q&A Tool Ask a Question Browse Program Articles  How to Use this Tool

Quality Question and Answer Tool

Your one-stop shop for CMS Quality Answers

Search for the answer to your question 

 **Browse**
View existing articles

 **Ask a Question**
Submit a Question to CMS

Site Feedback

For the best experience, please use one of the following browsers: Chrome, Firefox, Safari, Microsoft Edge. Mobile devices are not currently supported.

Submit a Question

QualityNet Question and Answer Site

Submit a Question to Our Support Team. * Indicates required field

WARNING: Individually identifiable health information in this system is subject to the Health Information Portability and Accountability Act of 1996 and the Privacy Act of 1974. Submission of questions to the QIO and Hospital Q&A System that contains Protected Health Information (PHI) is a violation of these Acts. **Questions containing PHI will be deleted from the system and not processed.** For detailed information regarding transmitting or receiving healthcare information or data read the [QualityNet System Security Policy, PDF](#)

Tell us about yourself

First Name *

Last Name *

Email Address *

Confirm Email Address *

Phone Number

What is your question?

Program *

Topic *

Subject *

Question (4000 Characters Max) *

I'm not a robot 

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Closing Remarks

Disclaimer

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