

### PCHQR Program: Preparing for August 2023 Submissions

### Lisa Vinson, BS, BSN, RN

Lead, Prospective Payment System-Exempt Cancer Hospital Quality Reporting (PCHQR) Program Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Contractor

July 6, 2023

### **Webinar Questions**

- Please email any questions related to this webinar to <u>WebinarQuestions@hsag.com</u>.
  - Write "PCHQR Program: Preparing for August 2023 Submissions" in the subject line.
  - Include your question and the applicable slide number in the body of the email.
- For questions unrelated to the webinar topic, use the <u>QualityNet Question and Answer Tool</u>.

### **Acronyms and Abbreviations**

| CAUTI  | catheter-associated urinary tract infection                         | НСР   | healthcare personnel   |
|--------|---|-------|--|
| CDC    | Centers for Disease Control and Prevention                          | HQR   | Hospital Quality Reporting   |
| CDI    | Clostridioides difficile infection                                  | MRSA  | Methicillin-resistant<br><i>Staphylococcus aureus</i>                      |
| CLABSI | Central line-associated bloodstream infection                       | NHSN  | National Healthcare<br>Safety Network                                      |
| CMS    | Centers for Medicare &<br>Medicaid Services                         | РСН   | Prospective Payment System-<br>Exempt Cancer Hospital                      |
| СҮ     | calendar year   | PCHQR | Prospective Payment System-<br>Exempt Cancer Hospital<br>Quality Reporting |
| DACA   | Data Accuracy and Completeness<br>Acknowledgement                   | PDC   | Provider Data Catalog  |
| FY     | fiscal year   | Q     | quarter  |
| HAI    | healthcare-associated infection                                     | SSI   | Surgical Site Infection  |
| HCAHPS | Hospital Consumer Assessment of<br>Healthcare Providers and Systems |       | Back   |

### Purpose

This presentation will review the steps to successfully submit the following required information:

- Fiscal year (FY) 2024 Data Accuracy and Completeness Acknowledgment (DACA) via the *Hospital Quality Reporting (HQR) System*
- Quarter (Q)1 2023 healthcare-associated infection (HAI) and COVID-19 Vaccination Among Healthcare Personnel (HCP) measure data via the Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN)

### **Objectives**

Participants will be able to demonstrate an understanding of the PCHQR Program's submission methods and requirements, as evidenced by successfully submitting the FY 2024 DACA, HAI, and COVID-19 HCP measure data.

5

# **Summary of Submissions**

- The data submission period opened July 1, 2023.
- Data for these measures are due by August 15, 2023:
   Q1 2023 HAI measure data
   Q1 2023 COVID-19 HCP measure data
- The FY 2024 DACA is due by August 31, 2023.

6

PCHQR Program: Preparing for August 2023 Submissions

**FY 2024 DACA** 

# HQR Log In

- Access the HQR home page: <u>https://hqr.cms.gov/hqrng/login</u>
- Enter your Health Care Quality Information Systems Access Roles and Profile credentials.
- Select Log In.

| CMS.gov   Hospital Quality Reporting              | Sign up   |
|---|---|
| velcome to<br>COSS.gov Hospital Quality Reporting | Log in<br>Enter your HARP user ID and password<br>User ID<br>User ID<br>Password<br>Password<br>Having trouble logging in?<br>By logging in, you agree to the Terms & Conditions. |

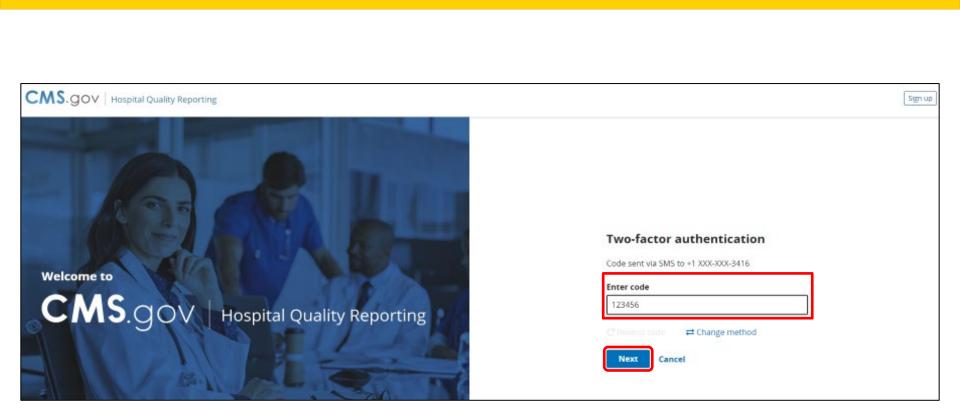
8

### **Two-Factor Authentication**

| CMS.gov   Hospital Quality Reporting             |  | Sign up   |  |
|--|--|---|--|
| Welcome to<br>CMS.GOV Hospital Quality Reporting | Two-factor authentication<br>Choose an authentication method<br>SMS to +1 XXXX-XXX-3416<br>Call to +1 XXXX-XXXX-3416<br>Call to +1 XXXX-XXXX-3416<br>Email<br>XXXX<br>Cancel | Two-factor authentication         Choose an authentication method         SMS to +1 XXX-XXX-3416         ↓         Don't have access to a device? Use another method.         Next       Cancel |  |

9

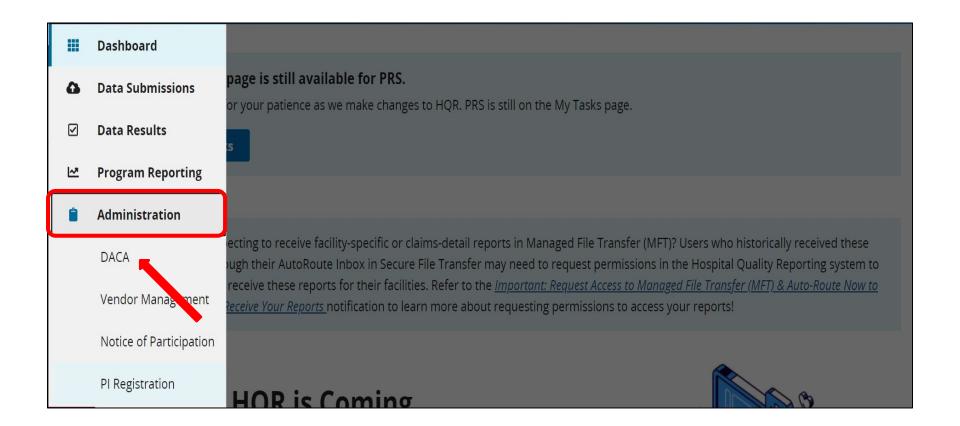
### **Enter Code**



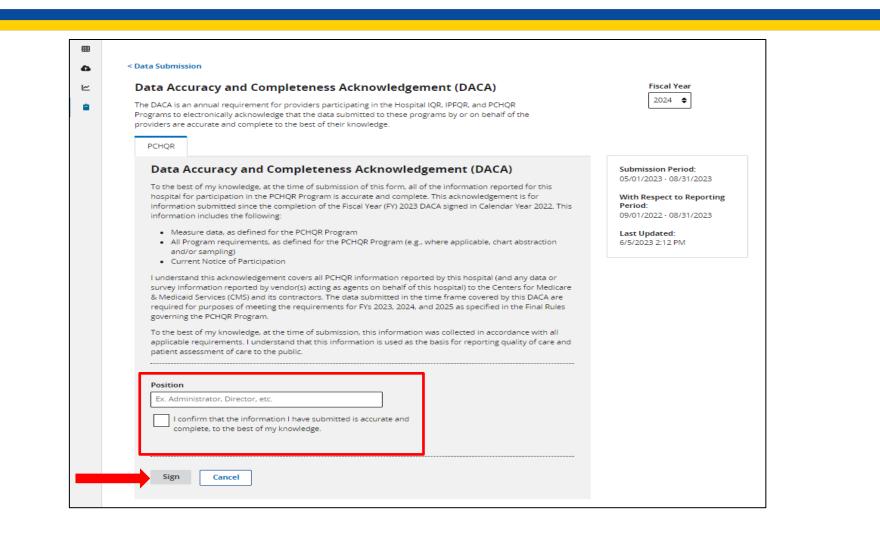
### **HQR Landing Page**

|    | GOV QualityNet   |   |  |
|----|--|---|--|
| PP | S-Exempt Cancer Hospital   |   |  |
|    |  |   |  |
| •  | My Tasks page is still available for PRS. Thank you for your patience as we make changes to HQR. PRS is still on the My Tasks page.  |   |  |
| ~  | My Tasks   |   |  |
| Ê  |  |   |  |
|    | Are you expecting to receive facility-specific or claims-detail reports in Managed File Transfer (M<br>AutoRoute Inbox in Secure File Transfer may need to request permissions in the Hospital Qualit<br>facilities. Refer to the <u>Important: Request Access to Managed File Transfer (MFT) &amp; Auto-Route Now</u><br>requesting permissions to access your reports! | ity Reporting system to continue to rec   | eive these reports for their   |
|    | The New HQR is Coming  |   | Contraction of the second seco |
|    | We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you<br>exciting new features to help you execute your responsibilities faster, and with more confidence.   | i will see many   |  |
|    | New! Check out the navigation on the left:   |   |  |
|    |  | The second se |  |
|    | $\leftarrow$ All features and functions are now available in the navigation  |   |  |

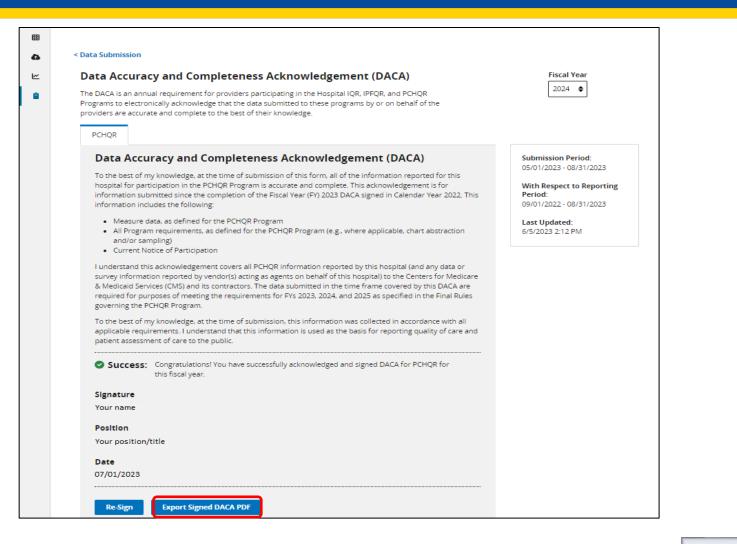
### **Select DACA**



### **Review and Sign**



### **Submission Confirmation**



### **For Your Records**

| Data Accuracy and Completeness Acknowledgement (DACA)  |
|--|
| To the best of my knowledge, at the time of submission of this form, all of the information reported for this hospital for participation in the PCHQR Program is accurate and complete. This acknowledgement is for information submitted since the completion of the Fiscal Year (FY) 2023 DACA signed in Calendar Year 2022. This information includes the following:  |
| * Measure data, as defined for the PCHQR Program<br>* All Program requirements, as defined for the PCHQR Program (e.g., where applicable, chart<br>abstraction and/or sampling)<br>* Current Notice of Participation   |
| I understand this acknowledgement covers all PCHQR information reported by this hospital (and<br>any data or survey information reported by vendor(s) acting as agents on behalf of this hospital)<br>to the Centers for Medicare & Medicaid Services (CMS) and its contractors. The data submitted<br>in the time frame covered by this DACA are required for purposes of meeting the requirements<br>for FYs 2023, 2024, and 2025 as specified in the Final Rules governing the PCHQR Program. |
| To the best of my knowledge, at the time of submission, this information was collected in accordance with all applicable requirements. I understand that this information is used as the basis for reporting quality of care and patient assessment of care to the public.   |
| Congratulations! You have successfully acknowledged and signed DACA for PCHQR for this<br>fiscal year.   |
| Signature<br>Your name   |
| Position   |
| Your position/title  |
| Date<br>07/01/2023   |
|  |

PCHQR Program: Preparing for August 2023 Submissions

### Q1 2023 HAI and COVID-19 HCP Measure Data

### HAI and COVID-19 HCP Measure Data Submissions

Submit the following Q1 2023 measure data via NHSN:

- Catheter-associated urinary tract infection (CAUTI)
- Central line-associated bloodstream infection (CLABSI)
- Clostridioides difficile infections (CDI)
- Methicillin-resistant Staphylococcus aureus (MRSA)
- Surgical Site Infections (SSI) colon and abdominal hysterectomy
- COVID-19 HCP

# Submitting HAI and COVID-19 HCP Data

- HAI and COVID-19 HCP data are submitted to the CDC's NHSN.
  - The CDC transmits the data to CMS immediately following the quarterly submission deadline for use in the PCHQR Program and CDC surveillance programs.
- PCHs must collect and submit HAI data at least quarterly prior to each quarterly submission deadline.
  - PCHs must collect numerator and denominator values for CAUTI, CLABSI, CDI, MRSA, SSI-colon, and SSIabdominal hysterectomy events among all inpatients in the facility.

# Submitting HAI and COVID-19 HCP Data

- PCHs must collect and submit COVID-19 HCP data at least quarterly prior to each quarterly submission deadline:
  - PCHs must collect the numerator and denominator for at least one self-selected week during each month of the reporting quarter.
  - In NHSN, a week belongs to the month in which the week ends. NHSN <u>will not</u> send a hospital's Q1 2023 COVID-19 HCP measure data to CMS unless there is at least one week of data that ends in January, one week of data that ends in February, and one week of data that ends in March.
- For questions or data submission-related issues, please contact the NHSN Help Desk at <u>NHSN@cdc.gov</u>.

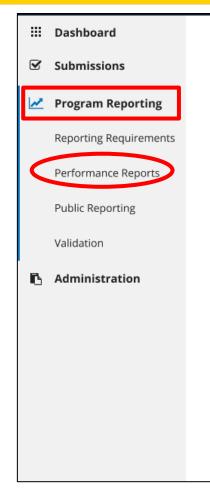
### **CDC NHSN Resources**

- Cancer Hospitals page
- <u>COVID-19 Hospital Data reporting</u>
- Weekly HCP COVID-19 Vaccination
- NHSN Help Desk: <u>NHSN@cdc.gov</u>

### **Submission Reports**

- Generate a PCH Facility Report via the HQR System:
  - FY 2024 for calendar year (CY) 2023 CAUTI and CLABSI measure data
  - FY 2025 for CY 2023 CDI, MRSA, SSIs and COVID-19 HCP measure data
- You may also generate your facility's NHSN-Analysis-CMS Reports.
  - For instructions to generate these reports visit: <u>https://www.cdc.gov/nhsn/cms/pps.html</u>

### **HQR PCH Facility Report**



#### My Tasks page is being retired.

Thank you for your patience as we make changes to HQR. Quality Net Secure Porta Resource System are still on the My Tasks page.

My Tasks

### The New HQR is Coming

We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence.

#### New! Check out the navigation on the left:

- ← All features and functions are now available in the navigation
- ← Tasks are clearly divided move from one to another with ease

### **Select Program**

#### Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

|   | Program        | Report        | Fiscal Year   |            |
|---|----------------|---------------|---------------|------------|
|   | PCHQR 🔶        | Select Report | Select Year 🔶 | 5 . 601/   |
|   | Select Program |               |               | Export CSV |
|   | HVBP           |               |               |            |
|   | IQR            |               | ₹             |            |
| - | PCHQR          |               |               |            |

### **Select Report**

#### Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

| Program            | Report        | Fiscal Year |            |
|--------------------|---------------|-------------|------------|
| PCHQR              | Select Report | Select Year | \$<br>5    |
| rovider(s)         | Select Report |             | Export CSV |
| Search Provider(s) | PCH Facility  |             |            |

### **Select Fiscal Year**

|                    |                |                                | Facility, State, and National level calculations a<br>culations are available for the HVBP Program. |                                       |
|--------------------|----------------|--------------------------------|---|---------------------------------------|
|                    | measure and re | reentage i dyment burnnary car |   | Access is dependent upon permissions. |
| Program            |                | Report                         | Fiscal Year   |                                       |
| PCHQR              | \$             | PCH Facility                   | Select Year   | \$                                    |
| Provider(s)        |                |                                | Select Year<br>2022   | Export CSV                            |
| Search Provider(s) |                |                                | 2023<br>2024  |                                       |
|                    |                |                                | 2025  |                                       |
|                    |                |                                |   |                                       |
|                    |                |                                |   |                                       |

### **Export Comma-Separated Value**

|   | <b>Performance Reports</b><br>This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR,<br>and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions. |
|---|---|
|   | Program Report Fiscal Year   PCHQR PCH Facility 2024  |
| E |   |

PCHQR Program: Preparing for August 2023 Submissions

**Key Dates and Reminders** 

# Upcoming Data Submission Deadlines

### • August 15, 2023

- o Q1 2023 HAI measure data
- Q1 2023 COVID-19 HCP measure data
- The measure exception form for CY 2023 is due by August 15, 2023: <u>QualityNet PCHQR Program</u> <u>Resources–Forms</u>
- August 31, 2023
  - FY 2024 DACA
- October 4, 2023
  - Q2 2023 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey Data

# **Public Reporting**

- July 2023 Provider Data Catalog (PDC) Release
  - o Q4 2021–Q3 2022 HCAHPS Survey data
  - o Q4 2021–Q3 2022 HAI measure data
  - o Q3 2022 COVID-19 HCP measure data
  - Q3 2021–Q2 2022 (FY 2024) Admissions and Emergency
     Department Visits for Patients Receiving Outpatient Chemotherapy
- October 2023 PDC Release
  - o Q1 2022–Q4 2022 HCAHPS Survey data
  - o Q1 2022–Q4 2022 HAI measure data
  - o Q4 2022–Q1 2023 Influenza HCP measure data
  - o Q4 2022 COVID-19 HCP measure data
  - Q4 2021–Q3 2022 (FY 2024) 30-Day Unplanned Readmissions for Cancer Patients \*NEW\*

# Where Can I Find PCHQR Program Resources?

### QualityNet

- <u>PCHQR Program Overview page</u>
- PCHQR Program Data Collection page
- <u>PCHQR Program Resources page</u>

**Quality Reporting Center** 

Resources and Tools page

PCHQR Program: Preparing for August 2023 Submissions

### QualityNet PCHQR Program Notifications and Question and Answer Tool

### Subscribe to Program Notifications

### **QualityNet Home Page**

| Search QualityNet  | Quality Programs - Help - Register  |
|--|---|
|  | Recent News View more   |
| Welcome to QualityNet!<br>Your one-stop shop for CMS Quality Programs. | November 19, 2021<br>CMS Releases HVBP FY 2022 Percentage<br>Payment Summary Reports                      |
| Subscribe to Email Updates Get Started with QualityNet                 | October 19, 2021<br><u>CMS Releases January 2022 Public</u><br><u>Reporting Hospital Data for Preview</u> |
|  |   |

# Sign Up for Email Updates

#### Sign Up for Email Updates

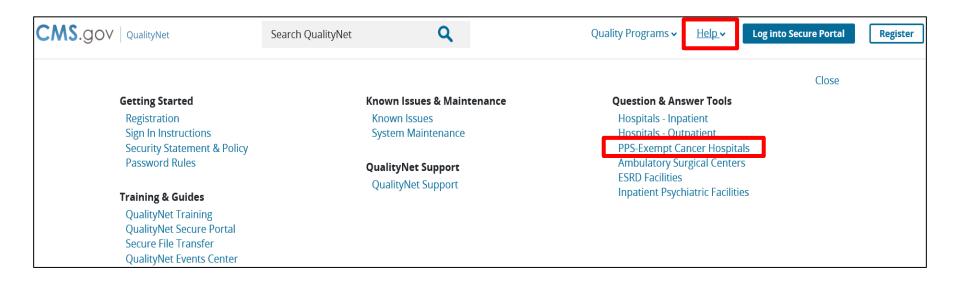
Enter your name and email address, and then select the lists you would like to join (at least one must be selected). You will receive an email requesting your confirmation for each subscription submission, and private lists will require approval from the list administrator prior to confirmation.

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 *           | Public Lists Private Lists   |
|                  | Enter the required fields and select one or more mailing lists to become automatically subscribed.   |
|                  | → Quality Reporting  |
| Email *          | IQR Imp Discuss: Hospital Inpatient Quality Reporting (IQR) and Improvement Discussion<br>Forum for participants in Hospital Inpatient Quality Reporting Program to discuss topics of interest/concern,<br>and share ideas, tools, and best practices. |
|                  | PCHQR Notify: PPS-Exempt Cancer Hospitals Quality Reporting (PCHQR) Program Notifications<br>News, information, announcements, and educational offerings/events regarding the PPS-Exempt Cancer<br>Hospitals Quality Reporting Program.                |
|                  | HQR Vendor Notify: Hospital Quality Reporting Vendor Notifications<br>Information and updates regarding any changes impacting HQR vendors.   |
|                  | Submit   |

### Accessing the QualityNet Question and Answer Tool



# Ask a Question

**QualityNet Question and Answer Tool** 

| CMS.gov QualityNet         |  |  |                      |
|----------------------------|--|--|----------------------|
| Quality Q&A Tool Ask a Que | stion Browse Program Articles                                      |  | How to Use this Tool |
|                            | Quality Questio  | n and Answer Tool  |                      |
|                            |  | op for CMS Quality Answers   |                      |
| Search for the answer to   | o your question  |  | ک<br>Steedback       |
|                            |  |  | site F               |
|                            | Browse<br>View existing articles                                   | Ask a Question<br>Submit a Question to CMS   |                      |
|                            | 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 fiel   |
| questions to the QIO and Hospital Q&A System that contai  |                                      | ccountability Act of 1996 and the Privacy Act of 1974. Submission<br>a. Questions containing PHI will be deleted from the system and r<br>t System Security Policy, PDF |
| Tell us about yourself  |                                      |   |
| First Name *  | Last Name *                          |   |
| enter first name (limit 75 chars)   | enter last name (limit 75 chars)     |   |
| Email Address *   | Confirm Email Address *              | Phone Number  |
| enter email address; format joe@domain.com  | enter email address again to confirm | format.xxx-xxx-xxxx (ext.)  |
| Topic •<br>select from the list of provided topics<br>Subject •<br>enter a brief summary of your question (limit 160 chars) |                                      | ]   |
| Question (4000 Characters Max) •  |                                      |   |
| enter your question for CMS   |                                      |   |
| I'm not a robot   |                                      | SUBMIT QUESTION   |

PCHQR Program: Preparing for August 2023 Submissions

**Closing Remarks** 

### Disclaimer

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

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