



**PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program**  
**Inpatient Value, Incentives, and Quality Reporting (VIQR)**  
**Outreach and Education Support Contractor**

**PCHQR Program:  
A Closer Look at Public Reporting**

**Presentation Transcript**

**Speaker**

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## **PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program**

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**Lisa Vinson:** Good afternoon, and welcome to today's webinar entitled, *A Closer Look at Public Reporting*. My name is Lisa Vinson, and I serve as the Program Lead for the PPS- Exempt Cancer Hospital Quality Reporting, or PCHQR, Program within the Inpatient Value, Incentives, and Quality Reporting, or VIQR, Outreach and Education Support Contractor. I will be the speaker for today's event. As you may recall, public reporting is one of the PCHQR Program requirements, which allows data to be made available to the public, allowing consumers to make more informed decisions about their health care options. This is accomplished through public reporting of measure rates, or PCH data, through the Provider Data Catalog, or PDC, which will be our focus for today. This is relevant as the Provider Data Catalog release just occurred on Wednesday, April 26th. Please note that, during this presentation, we will only be discussing public reporting as it pertains to the PCHQR Program. So, while you are welcome to participate, if you are associated with any of the other CMS programs, you will want to refer to materials specific to your program. Furthermore, if you have questions about the content of today's presentation, please submit them using the Questions function. As time allows, your question will be addressed during today's event. If time does not allow all questions to be answered during this presentation, remember that the slides, recording, transcript, and question-and-answer summary document will be posted on both [QualityNet](#) and [Quality Reporting Center](#) websites.

As a reminder, we do not recognize the raised-hand feature in the Chat tool during webinars. Instead, you can submit any questions, pertinent to the webinar topic, to us via the Questions tool. All questions received via the Questions tool during this webinar that pertain to this webinar topic will be reviewed, and a question-and-answer summary document will be available at a later date. To maximize the usefulness of the question-and-answer summary document, we will consolidate the questions received during this event and focus on the most important and frequently asked questions. Again, these questions and answers will be addressed in the summary document, which will be published at a later time.

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Any questions received that are not related to the topic of the webinar will not be answered in the Questions tool nor in the question-and-answer summary document for the webinar. To obtain answers to questions that are not specific to the content of this webinar, we recommend that you go to the [QualityNet Question and Answer Tool](#). You can access the question and answer tool using the link on this slide. There, you can search for questions unrelated to the current webinar topic. If you do not find your question there, then you can submit your question to us via the question and answer tool, which, again, you can access at the link on this slide. Later in today's presentation I will review how to submit inquiries via this tool.

For those who regularly attend PCHQR Program events, this is a customary slide and one that can be used as a great reference tool as we go throughout today's educational event. Some of the acronyms you may hear today include C-S-V, for comma-separated value; H-A-I, for healthcare-associated infection; H-A-R-P, or HARP, for HCQIS Access Roles and Profile; H-C-Q-I-S, or HCQIA, for Health Care Quality Information Systems; H-Q-R, for Hospital Quality Reporting; and P-D-C, for Provider Data Catalog.

The purpose of today's presentation is to provide PCHQR Program participants with an overview of public reporting, highlighting the Provider Data Catalog public reporting site.

At the culmination of this educational event, we hope participants are able to understand the purpose of public reporting, access preview data via the Hospital Quality Reporting, or HQR, Preview User Interface, and locate and navigate the PDC site to access PCH data.

Before we begin our discussion, I would like to provide a brief overview of public reporting. As you may be aware, public reporting is a statutory requirement set forth in Section 1866 (k)(4) of the Social Security Act, which requires procedures to be established for making data submitted under the PCHQR Program available to the public. These procedures ensure that a PCH can review the data prior to it being made public.

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Furthermore, PCHs would have 30 days prior to public reporting of the measure rates, which is known as the 30-day preview period. The final rule initially established that the publicly displayed data would be on Hospital Compare; however, this site was decommissioned about two years ago. In order to streamline all healthcare compare tools, CMS released Care Compare and the Provider Data Catalog. We will look at both sites closer, later in this presentation, but you can quickly access each site by the link on this slide.

As stated previously, PCHs have the opportunity to preview their facility's data before it is publicly reported.

Preview data is accessed via the Hospital Quality Reporting, or HQR, User Interface. This User Interface was developed and implemented allow providers increased flexibility in reviewing their data.

I will now provide a brief recap of the HQR Preview User Interface.

The upcoming preview period will occur in early May in preparation for the July 2023 Provider Data Catalog release. This release will include Quarter 4 2021 through Quarter 3 2022 HCAHPS Survey data; Quarter 4 2021 through Quarter 3 2022 HAI measure data; Quarter 3 2022 COVID-19 Vaccination Coverage Among Healthcare Personnel, or HCP, measure data; and Quarter 3 2021 through Quarter 2 2022, or fiscal year 2024, Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy measure data. We will briefly review how to access the preview data shortly, a process you may be already familiar with doing. As you know, the Public Reporting preview period occurs prior to the release of data on the Provider Data Catalog, or PDC. Now that you are able to review your facility's data electronically, you can access and review data for the current preview period when it opens and previous releases, dating as far back as February 2019, at your convenience. The Listserve communications we, the support contractor, provide contain detailed instructions on how to access the preview data utilizing the HQR Public Reporting User Interface.

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Reviewing your facility's data is important since this will provide you an opportunity to conduct a thorough review of the data that will be publicly displayed on the PDC. For the upcoming preview period, again, which will open in early May, please take some time and review your facility's data for accuracy.

Now, let's get started with our brief recap of accessing the HQR Preview User Interface. The first step is navigating to the HQR login page as displayed on this slide. You will start by entering your HCQIS Access Roles and Profile, or HARP, credentials which you should have already established. You are then required to enter your User ID and password. Then, select Login, as denoted by the red box on this slide. Then, you will be taken to the screen on the next slide.

For the two-factor authentication process, you will have an option to select the device you wish to verify your identity via a six-digit code. You can select either SMS/text, call, or email. For the purpose of this presentation, the selection was made for the verification code to be sent via SMS/text. You will now select Next to be taken to the next screen.

Once you received the six-digit verification code, you will type it in the box under the header Enter Code, as denoted by the first red box on this slide. You will then select Next, as shown by the second red box on this slide, to be taken to the page displayed on the next slide.

On the HQR landing page, there are several menu selections located in the navigation pane on the left-hand side, as shown by the red box. To access the Public Reporting User Interface, you will select the Program Reporting icon, that we will look at on the next slide.

Under the Program Reporting icon, you will select Public Reporting from the drop-down menu. After the page refreshes, you will then be able to access your facility's preview data.

This slide displays the Preview User Interface, specifically the Measure Data tab. Although not displayed here, you will see your provider name and CMS Certification Number, or CCN, at the top of the interface.

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Furthermore, within the Preview User Interface, you can easily view your facility's data. You can view measures by Measure Group, as shown by the headers, such as Survey of Patients' Experience or Process measures, which we will review shortly. You can search for individual measures by typing specific measures in the Search box, and the information in the table will be appropriately filtered, or you can utilize various filters, such as by Release. You can select the release date to be viewed, which dates back to February 2019. Level: Once this filter is activated in a future system update, you will be able to filter whether your facility's data will be compared to the state or national average. Performance: Once this filter is activated in a future system update, you will be able to filter your facility's data by being Above, Below, or the Same as the Previous Level filter selections. Lastly, in Export Data, the exported measure data will be in a PDF format, which can be printed and/or saved for future reference. As mentioned, data will be retained following the 30-day preview period.

Once you have familiarized yourself with the different features within the User Interface, you will then select a measure group to view the applicable measure data. The format of the data table is in accordion style, which can be expanded by selecting the plus sign to the left of the Measure Group header. As this slide displays, the accordion is expanded. However, by selecting the minus sign, the table will collapse. So, again, once the accordion is expanded, the measures and data will display. If you would like to view the full measure description, you can select the Information icon to the left of any measure listed. Of note, the asterisk next to a data value indicates additional details are available, such as a footnote or supplemental information.

As mentioned earlier, you have the ability to export data for a given release. By selecting the Export Data button, as denoted by the red box on this slide, a PDF report will be generated for you to print and/or download for future reference. This report is user- and printer-friendly, which allows for an organized view of your facility's data, as shown on the next slide.

This is a snippet of the PDF report when the Export Data button is selected, as discussed previously.

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Captured here is the Timely and Effective Care measure group which includes both healthcare personnel, or HCP, measures, which are Influenza Vaccination Coverage Among HCP, or PCH-28, and COVID-19 Vaccination Coverage Among HCP, or PCH-38.

Now, we will turn our attention to the public reporting sites, namely Care Compare and Provider Data Catalog, or PDC.

Displayed on this slide is the Care Compare home page. Care Compare provides a single user-friendly interface that patients and caregivers can use to make informed decisions about healthcare, based on cost, quality of care, volume of services, and other data. With just one click, patients can find information that is easy to understand about physicians, hospitals, nursing homes, and other health care services, instead of searching through multiple tools. For your convenience, the Care Compare site can be accessed by clicking the hyperlink on this slide.

The PDC site is the sole location for PCH data. On the subsequent slides, we will navigate the PDC site to ensure you are able to successfully locate PCH data.

On the PDC home page, you can access the PCH datasets by selecting Datasets at the top of the page or Hospitals in the middle of page, as illustrated by both red boxes displayed on this slide.

The Datasets page has an interactive search window, where you can start typing PCH, and a list below will populate with all datasets, including sorting and filtering options. The seven available datasets include Patient Survey PCH-HCAHPS National, Hospital, and State; Outcome Measures Hospital and Outcome Measures National for the Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy, or PCH-30 and PCH-31; Safety and Healthcare-associated Infections, which include CAUTI, CLABSI, SSIs, C. diff, MRSA, and HCP; and Oncology Care Measure, Plan of Care for Moderate to Severe Pain, or PCH-15, measure.

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Of note, this measure was last reported by PCHs in August 2022, and the last refresh or update of this measure data occurred in January of this year. This data will be removed from the PDC website in January 2024. From this page, you are able to download the dataset easily into a CSV format. For ease, and as shown on this slide, the PCH HCAHPS dataset appears first. When selected, you will be taken to the page on the next slide.

This is the Dataset Explorer page, which displays the dataset table for the applicable measure, which is publicly displayed and viewed. There are various functions available as it relates to sorting the data contained in the table and how the data in the table is displayed. You are also able to download the dataset into a CSV format and view the Data Dictionary in a PDF format. Both options are highlighted on the right-hand side of this slide. We will see how both download options look on the next two slides.

When you select Download This Dataset-CSV, this is how the file appears. For this particular measure, HCAHPS, the file displays the Measure ID, HCAHPS Question, HCAHPS Answer Description, HCAHPS Answer Percent, Start Date, and End Date. Again, this file can be downloaded, saved, and/or printed for future reference. The data is displayed in a simple, user-friendly format.

When you select the Data Dictionary download link, a PDF file will open, which is the Hospital Downloadable Database Data Dictionary. The purpose of the Data Dictionary, as stated in this document, is to provide a directory of material for use in the navigation of information contained within the Public Reporting downloadable databases. This document is updated with each release, which customarily occurs in January, April, July, and October.

The next selection on the home page, after Datasets, is Topics. From this page, you are able to view archived data. With the recent update to this page, the available years are now 2016 through 2023. You also have the option to download all datasets, which are available in a zip file format.

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If you are looking for archived data files, they are located here on the Hospitals Data Archive page. Again, this page has been updated to include 2023 Annual Files and date back to 2016. Regarding the archived data policy, CMS is required to maintain data from the last seven years for a provider and make it available to download on this page. There is an archived data website, if you are looking to access older data.

Lastly, on the About page, there is information about the PDC site.

There are also frequently asked questions and answers.

Then, there is a bar chart or graph displaying the distribution of topics relative to the total number of datasets on the PDC. There is also a link to submit feedback if you have comments on how this site functions. You can select the link that says Submit Feedback, which will allow you to compose an email to the designated email account.

Here is a list of available resources related to Public Reporting. Please be sure you are signed up to receive program notifications via email, and you can accomplish this by selecting the Subscribe to Email Updates button on the QualityNet home page. Important notifications are distributed surrounding the preview period, PDC release, and availability of Public Reporting resources. These resources include the quick reference guide and help guide, which are updated with each preview and release, and both documents are posted on the QualityNet PCHQR Program Public Reporting page. QualityReportingCenter.com is another great site to find PCHQR Program resources and tools. Many of the valuable resources and tools found on QualityNet can be found here, too. As events and activities related to Public Reporting are subject to change, these updates are communicated to those who are subscribed to receive program notifications, so, again, please be sure to sign up for this and other programs of interest to you.

Our final discussion point for today's event are the past, current, and upcoming Public Reporting activities. The most recent public reporting release occurred April 26.

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This included Quarter 3 2021 through Quarter 2 2022 HCAHPS Survey Data; Quarter 3 2021 through Quarter 2 2022 HAI measure data; and Quarter 2 2022 COVID-19 Vaccination Coverage Among HCP measure data. As we discussed today, the July 2023 preview period will open in early May. Again, please be sure to access the HQR Public Reporting User Interface to review your facility's data for accuracy when the preview period opens. Of note, this release will include the following measure data: Quarter 4 2021 through Quarter 3 2022 HCAHPS Survey Data; Quarter 4 2021 through Quarter 3 2022 HAI measure data; Quarter 3 2022 COVID-19 HCP measure data; and Quarter 3 2021 through Quarter 2 2022, or fiscal year 2024 Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy measure data. Of note, delivery of the fiscal year 2024 Facility-Specific Reports, or FSRs, for PCH-30 and PCH-31 will occur in May. Looking ahead, the fiscal year 2024 measure results for the 30-Day Unplanned Readmissions for Cancer Patients, or PCH-36, measure will be publicly reported for the first time this October. The fiscal year 2024 performance period is October 1, 2021, through September 30, 2022.

Before we close today's event, I would like to provide an overview on subscribing to PCHQR Program email notifications and submitting questions via the question and answer tool via the QualityNet website.

Here is where you subscribe to PCHQR Program notifications. This link is located on the QualityNet home page. Once you select the Subscribe to Email Updates button, as noted by the red box on this slide, you will be taken to the screen on the next slide.

Here is where you will be asked to enter your name and email address, as shown by the red box on the left-hand side of the slide. Then, you will have the opportunity to select the program notification lists you wish to join. At least one program must be selected. There are various quality reporting programs available to select, but the red box on the right-hand side of this slide 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.

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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 question and answer 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 then selecting the PPS-Exempt Cancer Hospitals link to start the process.

Now, you are at the QualityNet Question and 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 question may have been previously addressed and posted for viewing.

Here is where you will submit your inquiry. 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 have, and you may also query the system to see if the topic you are inquiring about has already been addressed.

In closing, thank you for your time and attention during today's presentation. Enjoy the remainder of your day. Thank you!