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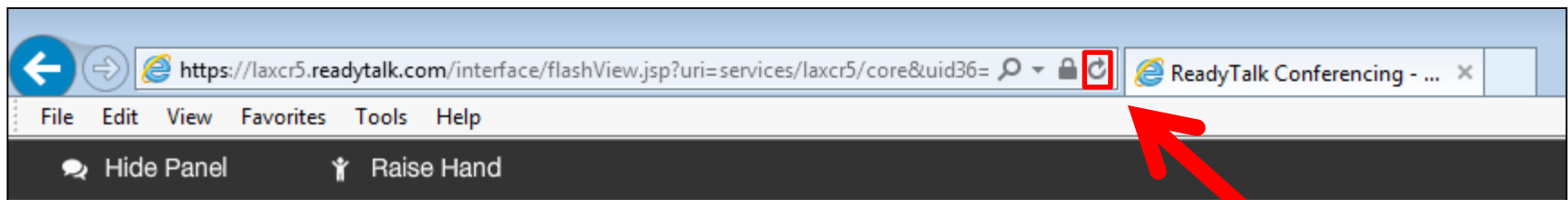**Audio from computer speakers breaking up? Audio suddenly stop?**

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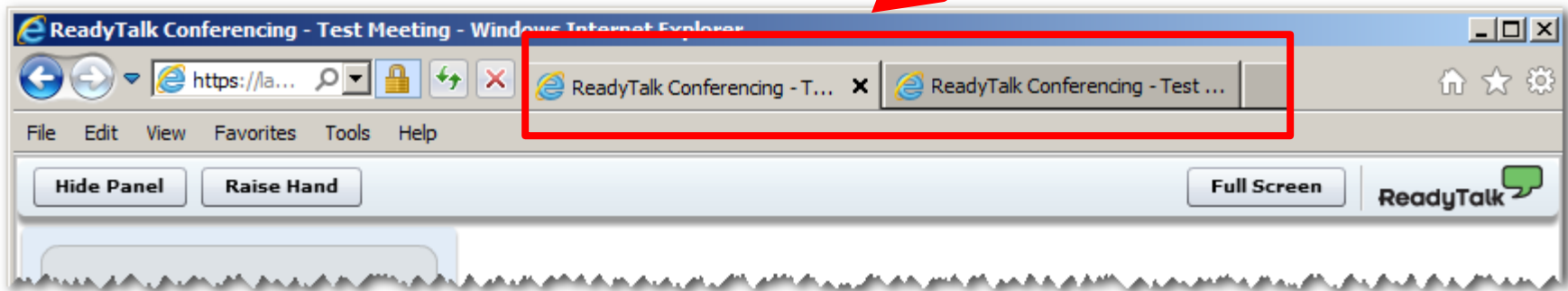
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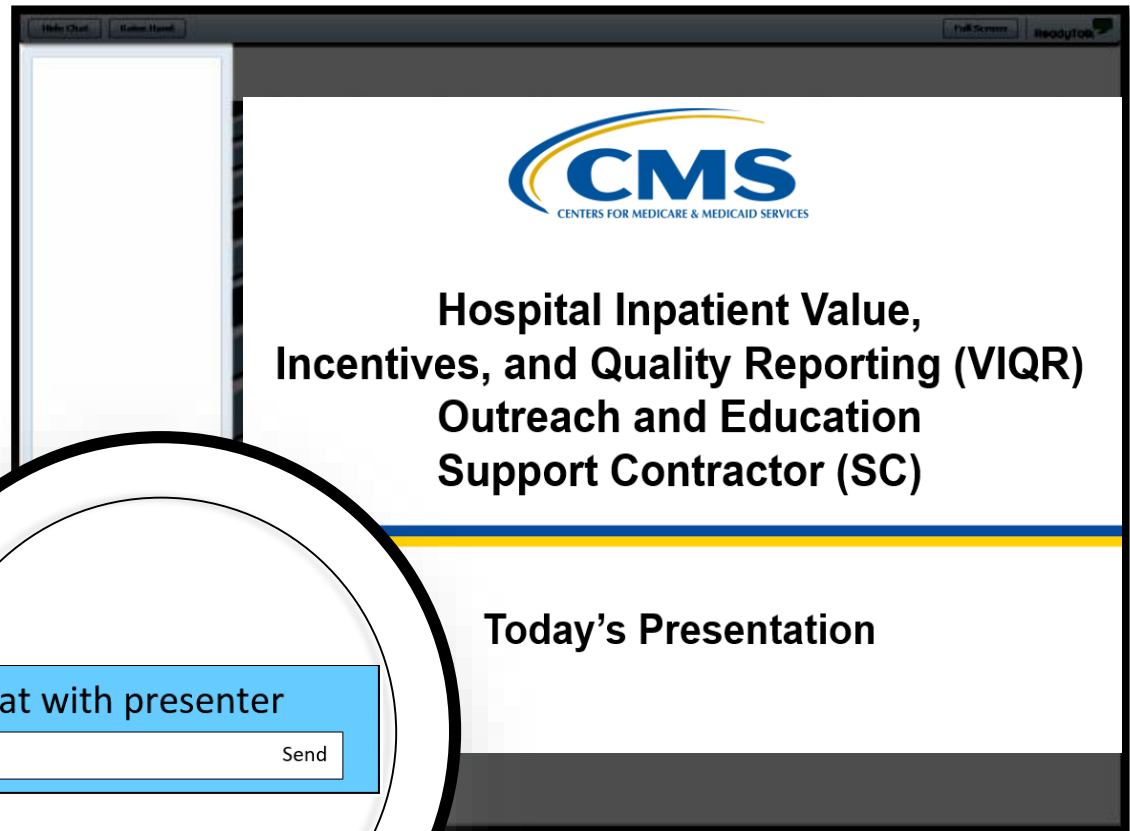
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Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor (SC)

Today's Presentation

Chat with presenter

Send

PCHQR Program:
CY 2019 Measures and Resources Update

Lisa Vinson, BS, BSN, RN

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

July 25, 2019

Acronyms and Abbreviations

ACoS	American College of Surgeons		**ICD**	International Classification of Diseases
AIR	American Institutes for Research		**MAP**	Measure Applications Partnership
ASCO	American Society of Clinical Oncology		**MIF**	Measure Information Form
ASTRO	American Society for Radiation Oncology		**MRSA**	Methicillin-resistant *Staphylococcus aureus*
AUA	American Urological Association		**NHSN**	National Healthcare Safety Network
CDI	*Clostridium difficile* Infection		**NQF**	National Quality Forum
CE	continuing education		**OCM**	Oncology Care Measure
CMS	Centers for Medicare & Medicaid Services		**PCH**	PPS-Exempt Cancer Hospital
CPT®	Current Procedural Terminology®		**PCHQR**	PPS-Exempt Cancer Hospital Quality Reporting
CST	Cancer-Specific Treatment		**PPS**	prospective payment system
CY	calendar year		**Q**	quarter
DACA	Data Accuracy and Completeness Acknowledgement		**QPP**	Quality Payment Program
EBRT	external beam radiotherapy		**SBRT**	Stereotactic Body Radiation Therapy
fxns	fractions		**SC**	support contractor
HAI	Healthcare-associated infection		**SSI**	Surgical Site Infection
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems		**SRS**	Stereotactic Radiosurgery
HCP	healthcare personnel		**VIQR**	Value, Incentives, and Quality Reporting

Purpose

This presentation will provide PCHQR Program participants with a high-level review of the 2019 updates, with a focus on the Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain (National Quality Forum [NQF] #0383/PCH-15) measure, program manual, and other resources.

Acronyms

Objectives

At the end of the presentation, participants will be able to:

- Apply the updated measure information form to accurately abstract NQF#0383/PCH-15 for the new measure specifications.

- Use the updated algorithm to visualize the data abstraction process for NQF#0383/PCH-15.

- Describe the updated sections of the 2019 PCHQR Program Manual

- Locate updated resources and tools on *QualityNet* and *Quality Reporting Center*.

Acronyms

PCHQR Program: CY 2019 Measures and Resources Update

Measure Updates

Structure of OCM and EBRT Tools

The following four tools are associated with the External Beam Radiotherapy (EBRT) for Bone Metastases measure and the Oncology Care Measure (OCM) for CY 2019:

- Measure Information Form
- Clean algorithm
- Population and sampling algorithm
- Data abstraction paper tool

2019 OCM and EBRT Updates

- NQF #0383/PCH-15
  - Apply the MIF and algorithms.
    - Versions for 2018 and 2019 are currently on the *QualityNet* PCHQR Data Collection page*.*
- EBRT (PCH-25)
  - **No updates were made to the 2019 EBRT tools.**
  - This should only be reported once per quarter. If a course of treatment spans more than one quarter, attribute it to the date of the first encounter.
  - Apply the MIFs and algorithms:
    - Versions for 2018 and 2019 are currently on the *QualityNet* PCHQR Data Collection page*.*

Acronyms

NQF #0383: MIF Updates

- Updated measure title, description, instructions and submission criteria

- Added denominator coding – CPT Service Codes
  - 99201, 99203, 99203, 99204, 99205, 99212, 99213, 99214, 99215 WITHOUT Telehealth modifier GQ, GT, 95, POS 02

- Added denominator coding – CPT Procedure Codes
  - 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549 and Denominator Criteria (M1000)

- Added denominator coding, CPT
  - 77427, 77431, 77432, 77435

- Denominator coding (Eligible cases), ICD-10-CM
  - Added C43.111, C43,112, C43.121, C43.122; C44.1021, C44.1022, C44.1091, C44;1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
  - Deleted C43.11, C43.12, C44.102, C44.109, C44.112, C44.119, C44.122, C44.129, C44.192, C4A.11, C4A.12

- Added Numerator Options
  - Performance met (M1001) and Performance not met (M1002)

Acronyms

NQF #0383: MIF Overview

PPS-Exempt Cancer Hospital Quality Reporting Program
Measure Information Form[1]

Measure Name: Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain

Measure ID#: NQF #0383, PCH-15

NQF Portfolio(s):

- 2012 Measure Applications Partnership (MAP) Hospice and Palliative Care Family of Measures
- American Institutes for Research (AIR) Patient and Family Engagement Measures
- Oncology Metrics

National Quality Strategy Priority: Effective Communication and Care Coordination

Type of Measure: Process

Improvement Noted As: Higher score indicates better quality

Measure Steward: American Society of Clinical Oncology (ASCO)

DESCRIPTION:

Percentage of patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having moderate to severe pain with a plan of care to address pain documented on or before the date of the second visit with a clinician.

INSTRUCTIONS:

This measure is to be submitted once for each new occurrence of cancer diagnosis during the performance period for patients in whom moderate to severe pain is present.

NQF #0383: Algorithm Denominator

Acronyms 14
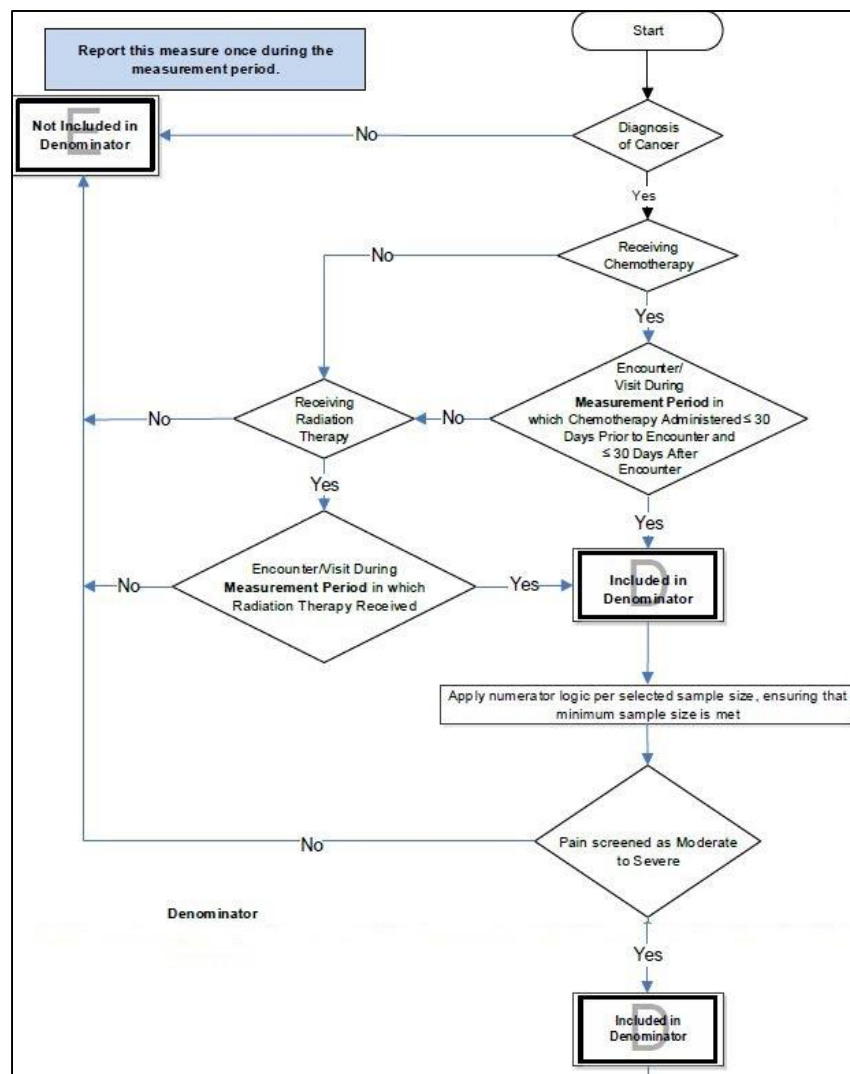
NQF #0383: Algorithm Numerator

Numerator

Average Quarterly Initial Population Size/ Minimum Required Sample Size		
Quarterly Sample Size Instructions: From initial population, calculate sample as follows:		
Cases		Sampling
<10	=	Include all pts
10-50	=	10 pts
51-125	=	20% of pts
>125	=	25 pts

Included in Denominator

Apply numerator logic per selected sample size to ensure that minimum sample size is met

Plan of Care to Address Moderate to Severe Pain Documented On or Before the Date of the 2nd Visit With a Clinician

No → Not Included in Numerator

Yes → Included in Numerator

Acronyms | 15
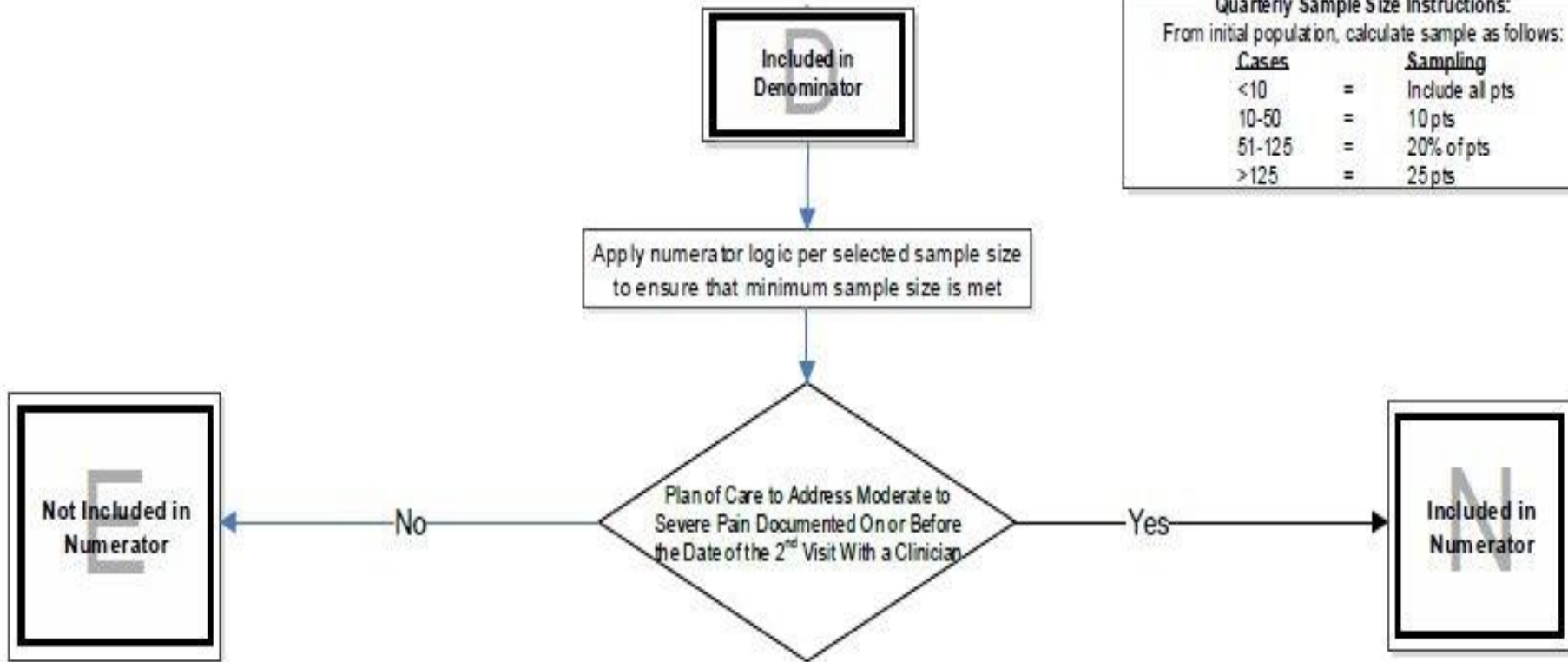
NQF #0383: Paper Abstraction Tool

Paper Tool
Oncology: Medical and Radiation: Plan of Care for Moderate to Severe Pain
(NQF #0383, PCH-15)
Quarter 1 2019 through Quarter 4 2019

This paper abstraction tool is provided as an optional, informal mechanism to aid PPS-Exempt Cancer Hospitals (PCHs) in the collection of the measures for the Centers for Medicare & Medicaid Services (CMS) PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program. The tool is designed to collect patient-specific data; however, once abstracted, the data will need to be compiled and reported to CMS in aggregate quarters, along with the percentage. If there are any questions or concerns regarding use of this paper abstraction tool, please contact the PCHQR Program Support Contractor.

Patient Identifier: _____

Treatment Date: _____

Reporting Period: _____

The information from each medical record will be used to determine the numerator and denominator in aggregate.

1. *Diagnosis of Cancer* – Is there a diagnosis of cancer? _____
   a. If "Yes," proceed to *Receiving Chemotherapy.*
   b. If "No," the case will be excluded. Stop abstracting. The case will not be included in the numerator or denominator.

EBRT (PCH-25)

- NQF endorsement removed (effective March 22, 2018).

- NQF #1822 MIF and algorithms verbiage was removed and replaced with PCH-25 verbiage.

- There are no content updates to MIF and algorithms.

PCH-25: MIF Overview

**PPS-Exempt Cancer Hospital Quality Reporting Program
Measure Information Form**

Measure Name: External Beam Radiotherapy (EBRT) for Bone Metastases

Measure ID#: PCH-25

National Quality Strategy Domain: Effective Communication and Care Coordination

Type of Measure: Process

Improvement Noted As: Higher score indicates better quality

Measure Steward: American Society for Radiation Oncology (ASTRO)

DESCRIPTION: Percentage of patients, regardless of age, with a diagnosis of bone metastases and no history of previous radiation who receive EBRT with an acceptable fractionation scheme

INSTRUCTIONS: This measure is to be reported once per reporting period for patients, with a diagnosis of bone metastases and no history of previous radiation to the site, who receive EBRT to treat metastatic bone lesion(s).

- All encounters that result from a single treatment plan should be considered one case with the case being attributed to the first date of administration of EBRT.
- Consider the administration of EBRT to different anatomic sites as separate cases.
- If the EBRT treatment course is initiated, but not completed, the case should still be included.

PCH-25: MIF Denominator and Numerator Statements

DENOMINATOR: All patients with bone metastases and no previous radiation to the same anatomic site who receive EBRT for the treatment of bone metastases

All patients, regardless of age
AND
Bone metastases diagnosis – International Classification of Diseases (ICD)-10-CM: C79.51, C79.52
AND
Current Procedure Terminology (CPT®) Codes: 77402, 77407, 77412

Denominator Exclusions:
Documentation of medical reason(s) including:

- The EBRT is used to treat anything other than bone metastases
- Previous radiation treatment to the same anatomic site (i.e., retreatment, re-irradiation, overlap with prior treatment field)
- Patients for whom the current EBRT is being administered via stereotactic body radiation therapy (SBRT) or stereotactic radiosurgery (SRS)
- Patients who are part of a prospective clinical protocol involving the use of radiation therapy
- Patients with femoral axis cortical involvement greater than 3 cm in length if the current EBRT is to that femur
- Patients who have undergone a surgical stabilization procedure if at the site of the current EBRT treatment
- Patients with spinal cord compression, cauda equina compression, or radicular pain documented as related to the bone metastases being treated with EBRT

NUMERATOR: All patients, regardless of age, with bone metastases and no previous radiation to the same anatomic site, who receive EBRT for the treatment of bone metastases with any of the following recommended fractionation schemes: 30Gy/10fxns, 24Gy/6fxns, 20Gy/5fxns, and 8Gy/1fxn

PCHQR Program Manual and Resources

2019 PCHQR Program Manual Updates

Section 1: PCHQR Program Overview

Section 2: Measures

- Removed Cancer-Specific Treatment (CST) measure information
- Updated NQF #0383/PCH-15
- Noted removal of four OCMs

Section 3: Data Reporting

Section 4: *QualityNet* Registration Process

Section 5: Vendor Authorization

Acronyms   21

2019 PCHQR Program Manual Updates (continued)

Section 6: Notice of Participation

Section 7: Data Accuracy and Completeness
               Acknowledgement (DACA)

Section 8: Accessing Reviewing Reports

Section 9: Public Reporting

- Updated timeline
- New Next Generation User Interface information

Section 10: Resources

- Updated appendices
  - Program measure submission deadlines
  - Relationship matrix

Where Do I Find PCHQR Program Resources?

QualityNet

- PCHQR Program Overview page
- PCHQR Program Data Collection page
- PCHQR Program Resources page

Quality Reporting Center

- Resources and Tools page

Acronyms

Quality Net
Data Collection Page

Data Collection

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

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.

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.

A facility may submit a Measure Exception Request Form due to no/low procedure volumes. Refer to listserve 2018-17-PCH for specifics.

| 0383 | PCH-15 | Oncology: Plan of care for pain (Measure updated for CY 2019 – Oncology: Plan of care for moderate to severe pain) | • 2018 Plan of care for pain measure information form
• 2018 Plan of care algorithm (clean version)
• 2018 Plan of care algorithm (population and sampling version)
• 2019 Plan of care for moderate to severe pain measure information form*
• 2019 Plan of care for moderate to severe pain algorithm (clean version)*
• 2019 Plan of care for moderate to severe pain (population and sampling version)* | • 2018 Plan of care for pain paper abstraction tool
• 2019 Plan of care for moderate to severe pain paper abstraction tool* | Web-based data entry via QualityNet Secure Portal |

Acronyms

Quality Net
Resources Page

Resources

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

Web Resources

The following sites provide additional information about the PCHQR Program's measure specifications and sampling methodology.

- American College of Surgeons (ACoS) - Cancer
- American Society for Radiation Oncology (ASTRO)
- American Urological Association (AUA)
- National Healthcare Safety Network (NHSN)
- Medicare PPS-Excluded Cancer Hospitals
- Federal Register
- Hospital Compare
- Hospital Survey Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
- National Quality Forum Measure Endorsements and Performance Standards (NQF)
- Quality Payment Program (CMS)
- Quality Reporting Center
- Regulations.gov

Program-Specific Resources

- 2019 PPS-Exempt Cancer Hospitals Quality Reporting (PCHQR) Program Manual, PDF-6.5 MB (Updated April 2019)
- Data Submission Deadlines, PDF-52 KB (Updated April 2019)
- Measure Crosswalk, PDF-71 KB (Updated November 2018)
- PCHQR Measure to Public Reporting Period Relationship Matrix, PDF-193 KB (Updated April 2019)
- PCHQR Program Web-Based Data Collection Tool Guideline by Due Date, PDF-471 KB (Updated September 2018)

Acronyms 25

New Look
Quality Reporting Center

Quality Reporting Center

Inpatient Quality Reporting Programs

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
  - Resources and Tools
- Inpatient Psychiatric Facilities Quality Reporting Program ⌄
- eCQM Archived ⌄
- Hospital Value-Based Purchasing (VBP) Program ⌄

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.

Final Rules for Hospital Inpatient Prospective Payment Systems

Information regarding the PCHQR Program can be found in the following Inpatient Prospective Payment System and Long Term Care Hospitals Prospective Payment System (IPPS/LTCH) Final Rule (FR) publications.

Quality Reporting Center
Resources and Tools Page

Resources and Tools

PCH Tools and Resources

Hospital Contact Change Form

- Hospital Contact Change Form 📄

Hospital Compare Preview Documents for July 2019 ⌄

PCHQR Program Manual ⌃

- 2019 PCHQR Program Manual 📄

PCHQR Program Resources ⌃

- PCHQR Measure Crosswalk 📄
- PCHQR Program Measure Submission Deadlines by Due Date 📄
- PCHQR Program Relationship Matrix of Program Measures by Years and Quarters 📄
- PCHQR Program Web-Based Data Collection Tool Guideline by Due Date 📄

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)*
- Clinical Process/Cancer-Specific Treatments measure specifications
  - Breast Measure Specifications 📄
  - Colon Measure Specifications 📄

- 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 *Hospital 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 📄

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PCHQR Program: CY 2019 Measures and Resources Update

Key Reminders

Important Events and Dates

- **Upcoming Webinars – Save the Date**
  - August 22, 2019 (Tentative)
- **Upcoming Data Submissions**
  - August 15, 2019
    - Q1 2019 Healthcare-associated infection (HAI) measures data
    - Q1–Q4 2018 OCMs and EBRT data
  - September 3, 2019
    - Fiscal Year 2020 DACA (electronic submission)

Acronyms 31

Hospital Compare

- **July 2019**
  - Q4 2016–Q3 2017 CST hormone data
  - Q4 2017–Q3 2018 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey data
- **October 2019**
  - Q1 2017–Q4 2017 CST hormone data
    - Last display on *Hospital Compare*
  - Q1 2018–Q4 2018 HCAHPS Survey data
  - Q1 2018–Q4 2018 HAI data*
    - MRSA, CDI, SSI-colon and abdominal hysterectomy
  - Q4 2018–Q1 2019 Influenza Vaccination Coverage Among Healthcare Personnel (HCP) data*

*Currently proposed for public display on *Hospital Compare* in the FY 2020 Inpatient Prospective Payment System/Long-Term Care Hospital Prospective Payment System (IPPS/LTCH PPS) Proposed Rule

Acronyms

Accessing the *QualityNet* Questions and Answers Tool

QualityNet Questions and Answers Tool

Acronyms

PCHQR Program: CY 2019 Measures and Resources Update

Closing Remarks

Disclaimer

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