Hospital IQR Program
CY 2019 (FY 2022 Payment Determination)
eCQM Validation Overview for Selected Hospitals

July 6, 2020

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Purpose

The purpose of this webinar is to share information regarding the Centers for Medicare & Medicaid Services (CMS) Hospital IQR Program electronic clinical quality measure (eCQM) data validation process for fiscal year (FY) 2022, which validates calendar year (CY) 2019 data.

Acronyms

Objectives

Participants will be able to:

- Understand the Hospital IQR Program eCQM data validation process for CY 2019 eCQM data validation, impacting FY 2022 payment determination.

- Identify the deadlines and associated required activities relating to CY 2019 eCQM data validation for FY 2022 payment determination.

- Submit medical records requested by the CMS Clinical Data Abstraction Center (CDAC).

- Receive and interpret validation results.

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Acronyms and Abbreviations

AMI	acute myocardial infarction	**ID**	identification
APU	annual payment update	**IQR**	Inpatient Quality Reporting
CAC	Children's Asthma Care	**PC**	Perinatal Care
CCN	CMS Certification Number	**PCI**	Percutaneous Coronary Intervention
CDAC	Clinical Data Abstraction Center	**PDF**	Portable Document Format
CE	continuing education	**PHI**	personal health information
CEO	Chief Executive Officer	**PII**	personally identifiable information
CMS	Centers for Medicare & Medicaid Services	**QRDA**	Quality Reporting Document Architecture
CY	calendar year	**SC**	support contractor
ECE	extraordinary circumstances exception	**STK**	Stroke
eCQM	electronic clinical quality measure	**VIQR**	Value, Incentives, and Quality Reporting
ED	emergency department	**VIQRC**	Value, Incentives, and Quality Reporting Center
EHDI	Early Hearing and Detection Intervention	**VSC**	Validation Support Contractor
EHR	electronic health record	**VTE**	venous thromboembolism
FY	fiscal year		

2019 Novel Coronavirus (COVID-19)

CMS has granted exceptions in response to COVID-19 to assist health care providers while they direct resources toward caring for their patients and ensuring the health and safety of patients and staff.

Specific details regarding these exceptions were communicated in the Guidance Memo released by CMS on March 27, 2020: https://www.cms.gov/files/document/guidance-memo-exceptions-and-extensions-quality-reporting-and-value-based-purchasing-programs.pdf.

Hospitals have been granted exceptions without having to submit an Extraordinary Circumstances Exceptions (ECE) request form and are not required to submit data for quarters covered by the exception; however, CMS understands that some hospitals that have been granted an ECE for one or more quarters of data validation may voluntarily choose to submit data for periods covered by the exception.

To ensure these hospitals receive key feedback based on the data they submitted, CMS will evaluate all submitted data per the normal validation process.

- For those hospitals that choose **_not_** to submit requested data, for the purposes of final Annual Payment Update (APU) determination, hospitals will not be penalized in any way.

- For those hospitals that choose to submit requested data despite the exception, for the purposes of final APU determination, hospitals will not be penalized in any way, regardless of performance.

In summary, your hospital may choose to comply with validation requests and subsequently receive detailed individual case feedback per the normal validation process, or you may choose to ignore these requests entirely. Neither option will negatively affect your eCQM validation requirements for APU determination.

Note: Your hospital may still receive additional requests and email reminders up until the deadline.

eCQM Validation Process

Hospital Submits QRDA Category I Files → CMS Selects Hospitals and Cases → Hospital Submits PDF Medical Records → CMS Conducts Abstractions → CMS Releases Validation Results to Hospitals

Acronyms

Synopsis

- CMS uses an annual validation process to assess the accuracy of eCQM data. (CMS has used this process to assess chart-abstracted measure data for years.)

- The validation process also verifies that eCQM data submitted to the CMS Clinical Warehouse meet the measure's intent.

- Each year, CMS will require hospitals to participate in one of the two inpatient validation processes: chart-abstracted validation or eCQM validation.

Synopsis (Continued)

- In June of 2020, up to 200 hospitals were randomly selected to participate in the eCQM validation process for FY 2022 payment determination.

- The accuracy of submitted eCQM data will not impact the pass-fail results for eCQM validation used to determine the Hospital IQR Program annual payment update (APU).

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CY 2019 eCQMs

EHR-Based Clinical Process of Care Measures (eCQMs)			
Short Name	**Measure Name**	**National Quality Forum #**	**CMS #**
AMI-8a	Primary Percutaneous Coronary Intervention(PCI) Received Within 90 Minutes of Hospital Arrival		53
CAC-3	Home Management Plan of Care Document Given to Patient/Caregiver		26
ED-1	Median Time from Emergency Department (ED) Arrival to ED Departure for Admitted ED Patients	0495	55
ED-2	Median Admit Decision Time to ED Departure Time for Admitted Patients	0497	111
EHDI-1a	Hearing Screening Prior to Hospital Discharge	1354	31
PC-01	Elective Delivery	0469	113
PC-05	Exclusive Breast Milk Feeding	0480	9
STK-02	Discharged on Antithrombotic Therapy	0435	104
STK-03	Anticoagulation Therapy for Atrial Fibrillation/Flutter	0436	71
STK-05	Antithrombotic Therapy by End of Hospital Day Two	0438	72
STK-06	Discharged on Statin Medication	0439	105
STK-08	Stroke Education		107
STK-10	Assessed for Rehabilitation	0441	102
VTE-1	Venous Thromboembolism Prophylaxis	0371	108
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	0372	190

Hospitals to Submit Data for One Quarter

Hospitals selected for eCQM validation will have their data validated for the most recently submitted calendar quarter, regardless of the number of quarters submitted.

eCQM Validation Quarters for FY 2022
First quarter 2019 (Jan–March 2019)
Second quarter 2019 (April–June 2019)
Third quarter 2019 (July–Sep 2019)
Fourth quarter 2019 (Oct–Dec 2019)

Hospital Selection

- Random selection of up to 200 hospitals in June 2020

- Criteria to exclude hospitals from random selection:
  - Fewer than five discharges for one eCQM
  - Selected for chart-abstracted data validation
  - eCQM extraordinary circumstances exception (ECE) approved waivers

Notification of Hospital Selection

Notification of hospital selection occurs annually via:

- News article posted on *QualityNet*, along with the list of selected hospitals.

- Listserv to the community.

- Email communication from the VSC directly to the selected hospitals.

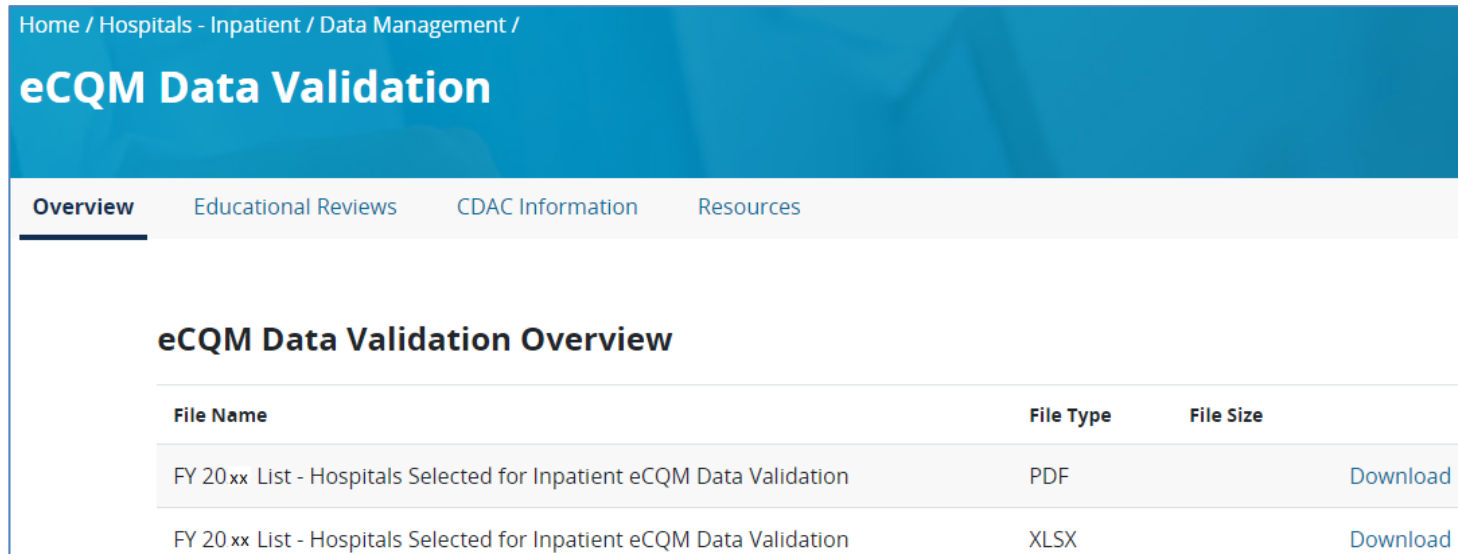# Notification of Hospital Selection (Continued)

- Hospitals selected for the Hospital IQR Program eCQM validation are notified by email communication. This communication is sent to the following hospital contacts listed within the official CMS contact database:
  - o Chief Executive Officer / Administrator
  - o Hospital IQR
  - o CDAC Medical Records
  - o Quality Improvement
- The VSC monitors the email communications to ensure all hospitals were notified of selection. Any bounce-backs are researched, and hospital contacts are updated in the CMS system to ensure accurate delivery of future notifications.

Selected Hospital List

The list of the hospitals selected for FY 2022 eCQM validation can be found on www.qualitynet.org.

To access, select **[Hospitals – Inpatient]**, and then **[Data Management]**, followed by **[eCQM Data Validation]:**

https://www.qualitynet.org/inpatient/data-management/ecqm-data-validation

Home / Hospitals - Inpatient / Data Management /

eCQM Data Validation

Overview   Educational Reviews   CDAC Information   Resources

eCQM Data Validation Overview

File Name	File Type	File Size	
FY 20xx List - Hospitals Selected for Inpatient eCQM Data Validation	PDF		Download
FY 20xx List - Hospitals Selected for Inpatient eCQM Data Validation	XLSX		Download

Update Contact Information

- Regularly update hospital contact information to ensure receipt of eCQM validation-related communications and reminders.

- Hospitals may check and update contacts by sending an email with their six-digit CMS Certification Number (CCN)/Provider ID number to the Hospital Inpatient Support Contractor at: QRFormsSubmission@hsag.com.

Case Selection

- CMS selects two cases at random from each of the four measures reported.

- If fewer than two cases are available for a given measure, more than two will be selected from another measure, not to exceed a total of eight cases selected.

- Case selection is limited to those that met the denominator eligibility criteria, as reported by the hospital.

Medical Records Request

TIME SENSITIVE

Clinical Data Abstraction Center (CDAC) Medical Record Request for Validation

- The CDAC will FedEx hospitals a written request to "Medical Records Director" to submit a patient medical record for each case that CMS selected for eCQM validation.

- It is important that the packet be routed to the correct individual(s) (those responsible for fulfilling the request) as soon as possible before the medical record submission deadline.

IMPORTANT NOTE: The medical records request will be delivered to the address listed under the Medical Records contact type in the official CMS contact database. Hospitals may check the address and make updates to the address by sending an email with their six-digit CCN/Provider ID to the Hospital Inpatient SC at: QRFormsSubmission@hsag.com.

Medical Records Request (Continued)

Case Selection Report

- A registered user with the appropriate reports role will access the hospital's list of cases, including all available patient identifiers, selected for eCQM validation via the QualityNet Secure Portal.

  To access the report:

  1. Log in to the *QualityNet Secure Portal*
  2. Select **My Reports**, then **Run Reports**
  3. Select the **Run Reports** tab
  4. Under Report Program, select **Inpatient**
  5. Under Report Category, select **Hospital Reporting–Data Validation Reports**
  6. Click the **View Reports** box
  7. Under Report Name, select **Hospital Data Validation– eCQM Case Selection Report**

Medical Records Request (Continued)

Prior to Submission

- Once the CDAC has received the record, hospitals are not allowed to send records or additional documentation; this applies even if the wrong record is sent, or if pages are missing, or pages are illegible, etc. The CDAC will abstract every case with the applicable documentation that the hospital **originally** sent.

- All records should be carefully reviewed prior to submitting them to the CDAC.

  - o Consider having an abstractor review your records prior to submitting. The abstractor is most familiar with the location of the information needed for abstraction.

  - o **It is especially important to include all information used for abstraction from an EHR in the Portable Document Format (PDF) file submitted to the CDAC.**

Medical Records Request (Continued)

Prior to Submission (Continued)

The objective of measure validation is to verify eCQM data submitted by the hospital to the clinical warehouse meet the measure intent of **eCQM specifications**.

- When validating cases, the CDAC reviews data found in both **discrete and non-discrete fields** in the medical records submitted as PDF files.

- When reviewing records prior to submission, hospitals are encouraged to:
  - Compare extracted data with other information in the record to ensure QRDA submissions report quality in alignment with the **measure's intent.**
  - Closely examine the accuracy of time-stamps (e.g., arrival times and medication administration times).

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Medical Records Request (Continued)

Submission

- Hospitals have until the date listed on the request to send their records to the CDAC.

- Hospitals must submit medical records as PDF files via the *QualityNet Secure Portal* Secure File Transfer application.

- **Inpatient records must be received within 30 days of the request date in order to voluntary receive key feedback based on the data submitted.**

- Detailed instructions on how to submit medical records are provided within the packet delivered by the CDAC.

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Medical Records Request (Continued)

Additional information about the request for medical records can be found on *QualityNet.* To access, select **[Hospitals – Inpatient]**, and then **[Data Management]**, followed by **[eCQM Data Validation]**, and lastly **[CDAC Information]:**
https://www.qualitynet.org/inpatient/data-management/ecqm-data-validation/cdac-info

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Receipt of Results

- Hospital staff will receive an email notification when the eCQM Validation Case Detail Report and the eCQM Validation Summary Report are available for download from the *QualityNet Secure Portal*.

- The reports, which provide the validation results of abstraction and educational comments, are anticipated to be released in the fall of 2020.

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FY 2022 Payment Determination

- CMS will notify hospitals via targeted emails whether they passed or failed eCQM validation.

- The accuracy of eCQM data and the validation of measure reporting will not affect the payment determination.

- Hospitals will pass or fail validation based on the timely and complete submission of at least 75 percent of the records CMS requested.

  o For example, if eight medical records are requested, at least six complete medical records must be submitted to meet the 75 percent requirement. If a hospital does not meet the overall validation requirement, the hospital will not be eligible to receive the full APU.

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eCQM Validation Reports

- eCQM Case Selection Report:
  - Displays the patient-identifying information pertaining to the cases selected for eCQM validation.

- eCQM Validation Summary Report:
  - Provides a high-level summary of the validation-reliability rate for each abstracted case.

- eCQM Validation Case Detail Report:
  - Provides a list of all elements abstracted compared to the CDAC re-abstraction on each case.

eCQM Case Selection Report

- Lists hospital's cases selected for eCQM validation, including all available patient identifiers.

- Displays the **Medical Record Request Date**, the **Due to CDAC Date**, and the **Record Received Date** (after the CDAC has received hospital's records).

NOTE: It could take up to 24 hours for the **Record Received Date** to populate. To verify receipt of records, contact the CDAC directly via email at CDAChelpdesk@hcqis.org or phone at (717) 718-1230, ext. 201.

Hospital Reporting - Data Validation: eCQM Case Selection Report - Inpatient

Provider: 999999
Fiscal Year: 2022 (1Q18, 2Q18, 3Q18, 4Q18)

Patient Identifier	Patient Name[1]	DOB	Admit Date	Discharge Date	eCQM Measure[2]	Abstraction Control Number	Medical Record Request Date	Due to CDAC Date	Record Received Date
							10/08/1998	11/09/1998	11/04/1998
							10/08/1998	11/09/1998	10/27/1998
							10/08/1998	11/09/1998	10/27/1998
							10/08/1998	11/09/1998	11/06/1998
							10/08/1998	11/09/1998	11/04/1998
							10/08/1998	11/09/1998	11/05/1998

NOTE: Grey spaces indicate areas of possible personally identifiable information (PII)/personal health information (PHI), which could be found on actual report.

Acronyms

eCQM Validation Summary Report

The eCQM Validation Summary Report lists each validated case with its score, organized by measure.

Hospital Data Validation: eCQM Validation Summary Report - Inpatient

Provider: 999999
Fiscal Year: 2022 (1Q18, 2Q18, 3Q18, 4Q18)

eCQM Measure	Abstraction Control Number	Patient Identifier	Admit Date	Discharge Date	Case Reliability
					0/2
					0/2
					0/2
					0/2
	This space intentionally left blank.				0/2
					0/2
					0/2
					0/2

NOTE: Blank space indicates area of possible PII/PHI, which could be found on actual report.

eCQM Validation Case Detail Report

- Lists all abstracted elements compared to the CDAC re-abstraction on each case.

- Mismatches and the associated educational comments from the CDAC are displayed in red font.

Hospital Reporting - Data Validation: eCQM Case Detail Report - Inpatient

Provider: 999999
Fiscal Year: 2022 (1Q18, 2Q18, 3Q18, 4Q18)

Abstraction Control Number: ▮		Case Status: Complete		
Patient ID: ▮		Comments:		
eCQM Measure: ▮				
Admit Date: ▮				
Discharge Date: ▮				

Individual Case Reliability Rate: (/)

Measure:	Original Outcome*	Validated Outcome*	Result
▮	▮	▮	Match
▮	▮	▮	**Mismatch**

NOTE: Black boxes indicate areas of possible PII/PHI, which could be found on actual report.

Acronyms

eCQM Validation Case Detail Report (Continued)

Inquiries

- Result-specific inquiries must be submitted within 30 days of the validation results being posted on the My Reports section of the *QualityNet Secure Portal*.

- Inquiries may be submitted in the following ways:

    o Email the VSC directly at validation@telligen.com

    o CMS Hospital Inpatient Questions and Answers tool at https://cmsqualitysupport.servicenowservices.com/qnet_qa

    NOTE: To avoid a breach of PHI, if the question is case specific and requires the inclusion of patient information, please send your question to the VALIDATION CONTRACTOR group through the *QualityNet Secure Portal* Secure File Transfer application.

Acronyms

Resources

- eCQM validation resources available on *QualityNet* include:
  - o Selected Provider Lists
  - o eCQM Validation Fact Sheet document
  - o Important dates and deadlines

- To access, select **[Hospitals – Inpatient]**, and then **[Data Management]**, followed by **[eCQM Data Validation]**, and lastly **[Resources]:**
  https://www.qualitynet.org/inpatient/data-management/ecqm-data-validation/resources

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Validation Questions

- Validation Support Contractor (VSC) email:
  - validation@telligen.com
- CMS Hospital Inpatient Questions and Answers Tool:
  - https://cmsqualitysupport.servicenowservices.com/qnet_qa When submitting a question, include the hospital six-digit CCN/Provider ID to expedite a reply with information specific to your hospital.

Acronyms