PCHQR Program:
CY 2020 Measure 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

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Acronyms and Abbreviations

CAUTI	Catheter-associated Urinary Tract Infection
CDC	Centers for Disease Control and Prevention
CDI	*Clostridium difficile* Infection
CLABSI	Central Line-Associated Bloodstream Infection
COVID-19	Coronavirus disease 2019
CMS	Centers for Medicare & Medicaid Services
CY	calendar year
DACA	Data Accuracy and Completeness Acknowledgement
EBRT	external beam radiotherapy
ECE	Extraordinary Circumstances Exception
ED	emergency department
FSR	Facility-Specific Report
HAI	Healthcare-associated infection
HARP	HCQIS Access Roles and Profile
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems
HCP	healthcare personnel
HCQIS	Health Care Quality Information System
MIF	Measure Information Form
MRSA	Methicillin-resistant *Staphylococcus aureus*
NQF	National Quality Forum
OCM	Oncology Care Measure
PCH	PPS-Exempt Cancer Hospital
PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
PPS	prospective payment system
Q	quarter
SSI	Surgical Site Infection
VIQR	Value, Incentives, and Quality Reporting

Purpose

This presentation will provide PCHQR Program participants with a review of the calendar year (CY) 2020 updates, including the Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain (PCH-15/National Quality Forum [NQF] #0383) measure and program resources.

Objectives

Participants will be able to locate CY 2020 data collection tools for PCH-15/NQF #0383, updated resources on *QualityNet* and *Quality Reporting Center,* and recall key program dates and reminders.

Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain (PCH-15/NQF #0383)

Structure of OCM Tool

The following four tools are associated with Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain (PCH-15/NQF #0383), the only Oncology Care Measure for CY 2020 data collection and reporting:

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

CY 2020 Data Collection

There are **no** updates to the PCH-15/NQF #0383 data collection tools for CY 2020 data collection.

- CY 2020 tools will be posted on the *QualityNet* PCHQR Data Collection page.

PCH-15/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)

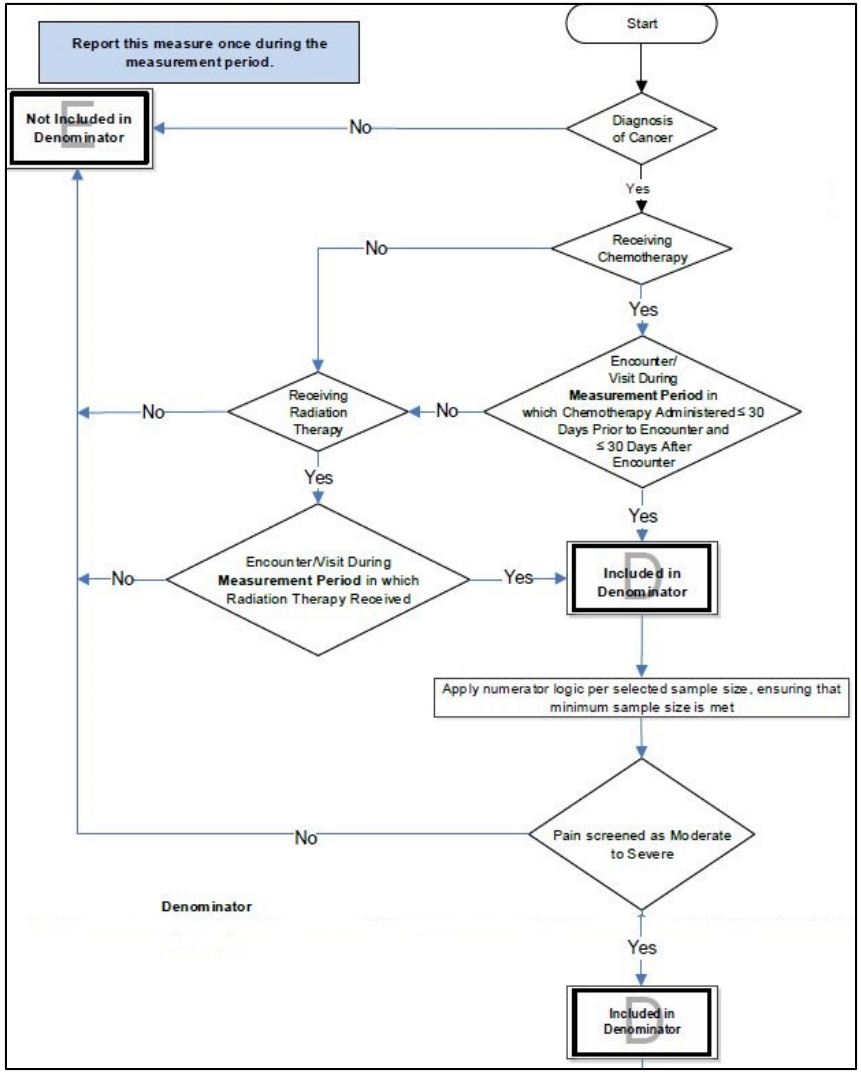
DESCRIPTION:

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.

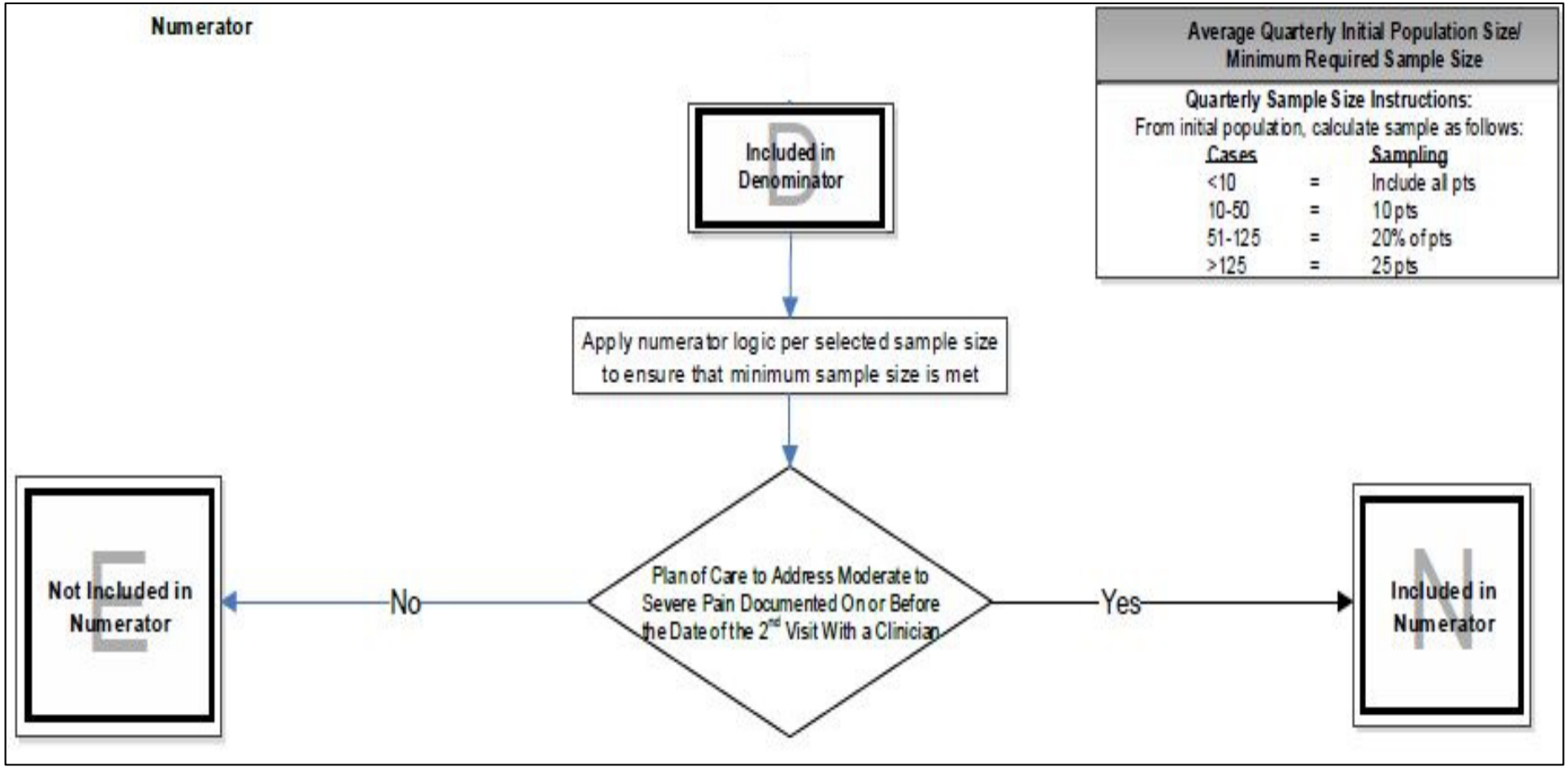
INSTRUCTIONS:

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.

PCH-15/NQF #0383: Algorithm Denominator



PCH-15/NQF #0383: Algorithm Numerator



PCH-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 2020 through Quarter 4 2020

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.

PCHQR Program Resources

Where Do I Find PCHQR Program Resources?

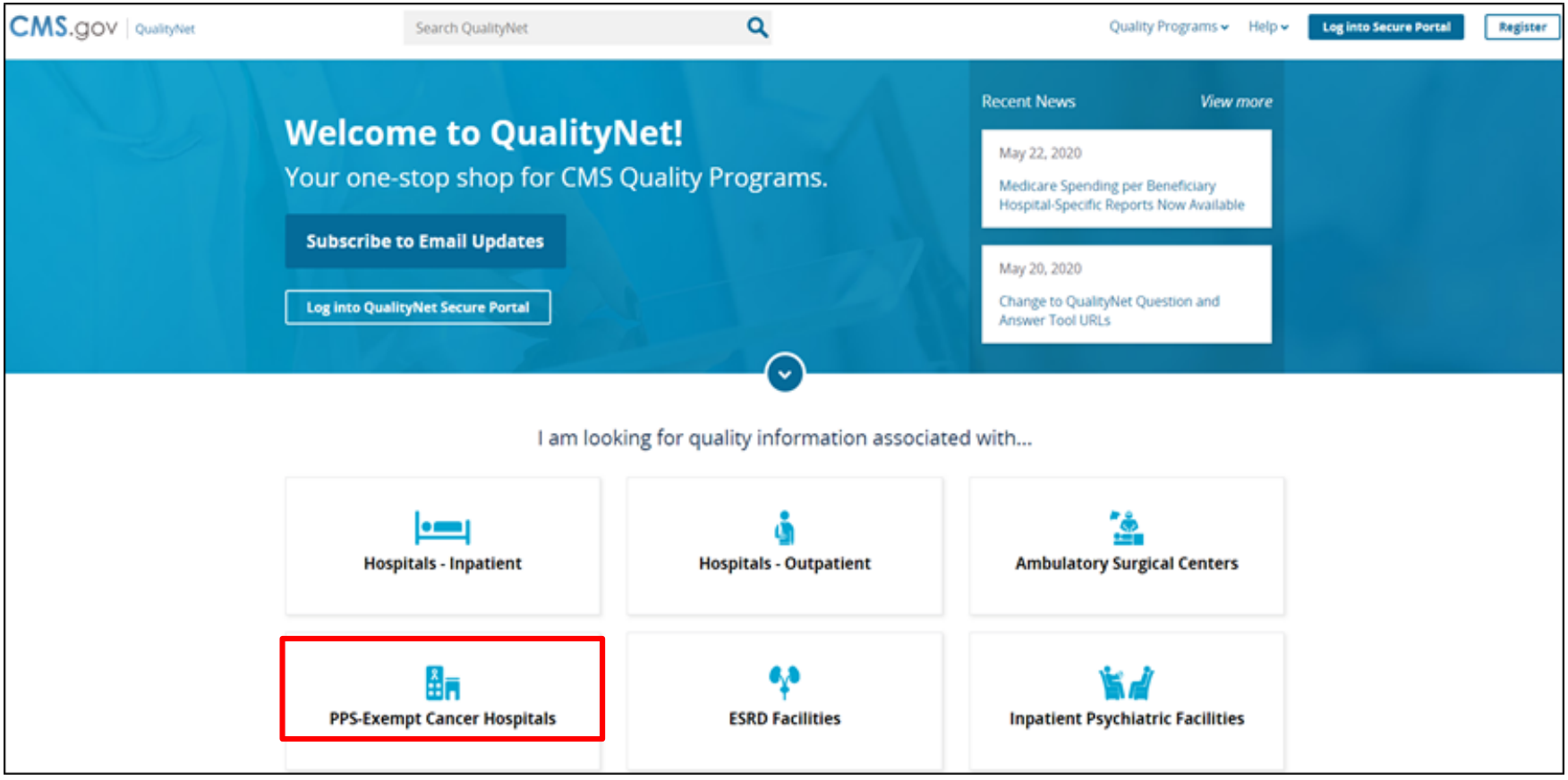
QualityNet

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

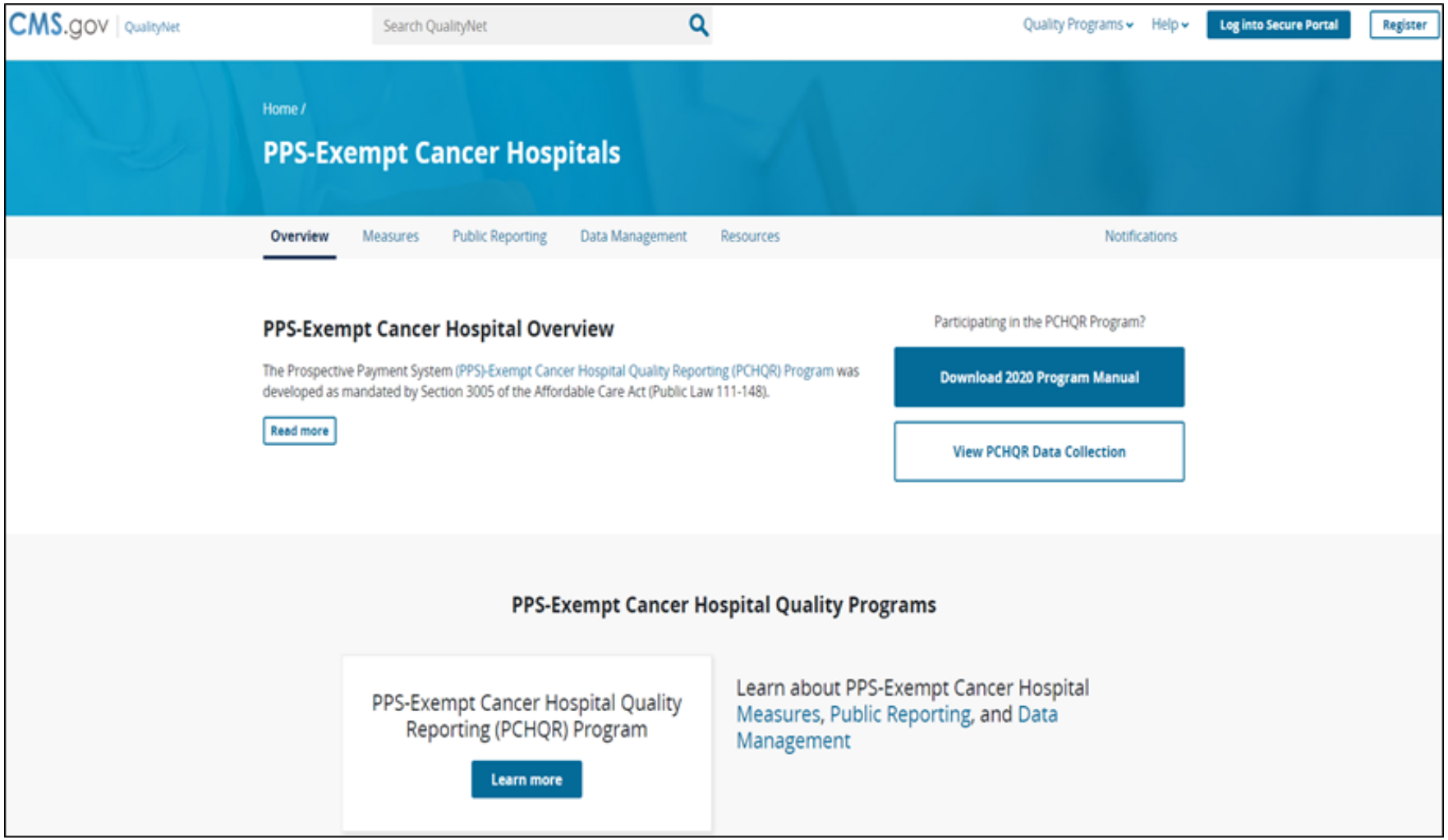
Quality Reporting Center

- Resources and Tools page

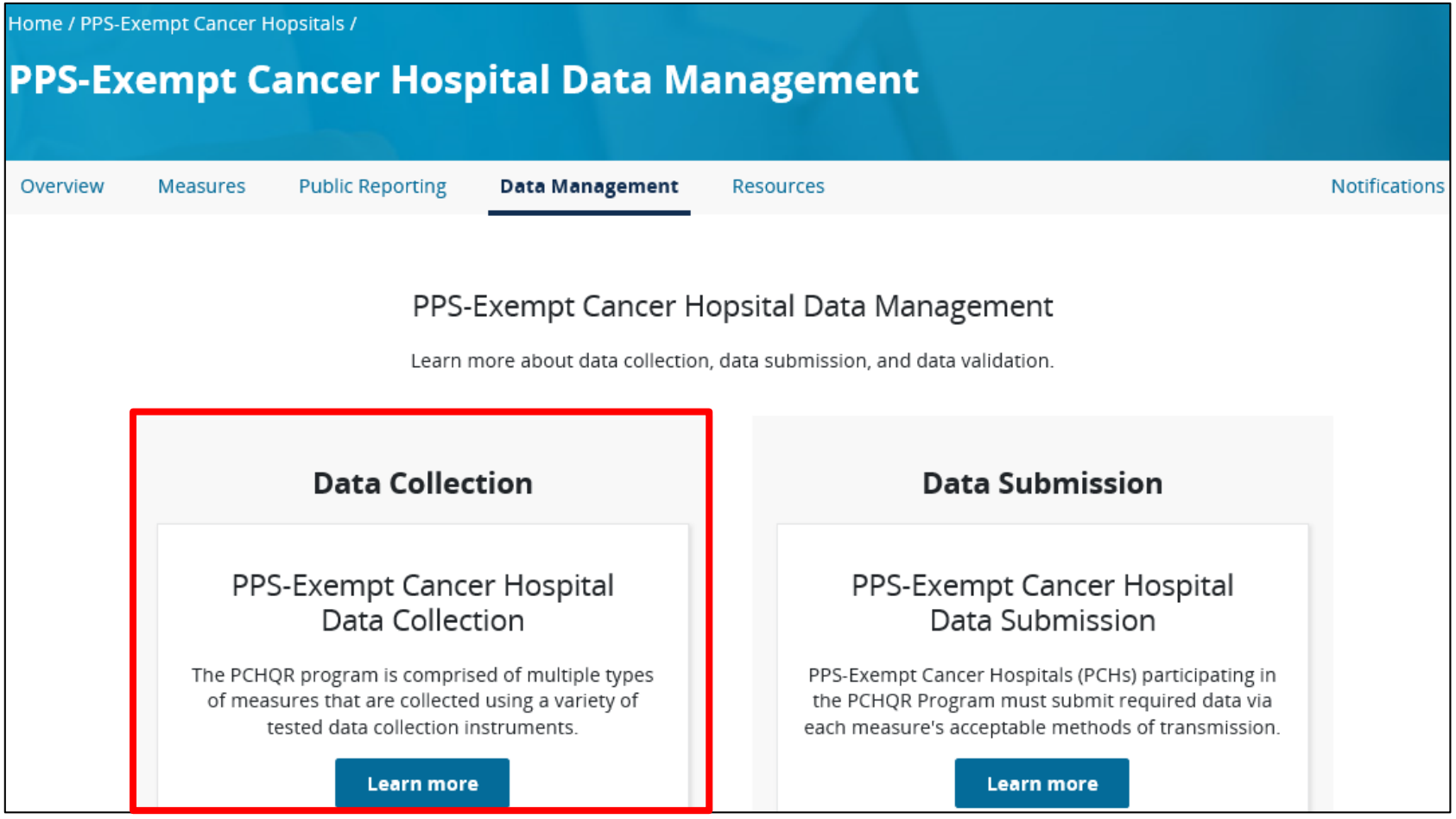
QualityNet Home Page



QualityNet PCHQR Program Landing Page



Navigating to the *QualityNet* PCHQR Program Data Collection Page



QualityNet Data Collection Page

PCH-15/NQF #0383 tools:

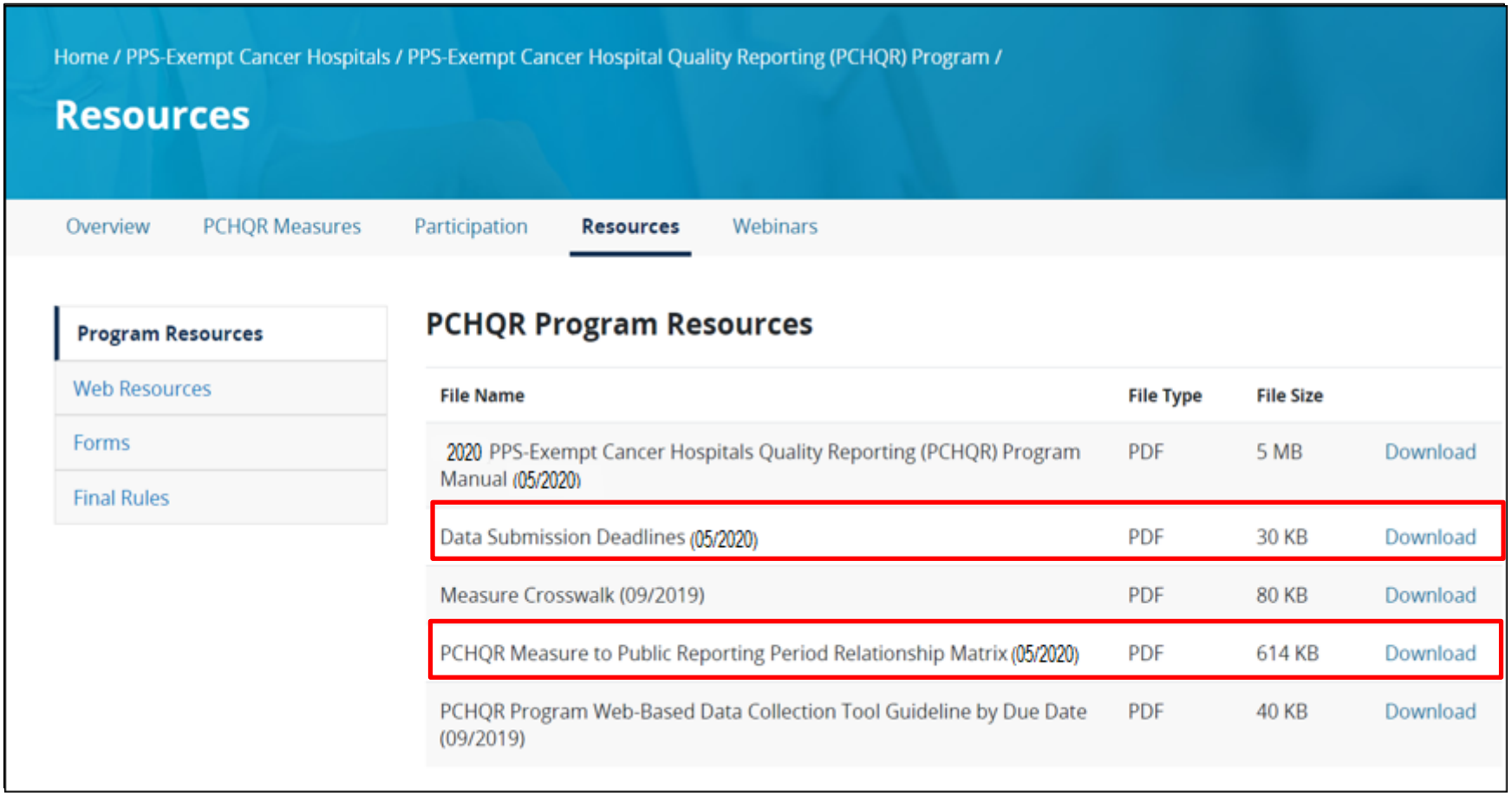
- Measure Information Form
- Clean algorithm
- Population and Sampling algorithm
- Paper abstraction tool

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

NQF #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
0383	PCH-15	Oncology: Plan of care for moderate to severe pain	• 2020 Plan of care for moderate to severe pain measure information form • 2020 Plan of care for moderate to severe pain algorithm (clean version) • 2020 Plan of care for moderate to severe pain (population and sampling version)	• 2020 Plan of care for moderate to severe pain paper abstraction tool	Web-based data entry via QualityNet Secure Portal

QualityNet Resources Page

Resources Page



PCHQR Program Measure Submission Deadlines by Due Date

Due Date	CLABSI/CAUTI/ SSI/MRSA/CDI*	HCP Flu Vac*	HCAHPS	OCM†‡ (PCH-15 only)	EBRT†‡	DACA
02/18/2020	**Q3 2019** (7/1–9/30)	N/A	N/A	N/A	N/A	N/A
04/01/2020	N/A	N/A	**Q4 2019 **** (7/1–9/30)	N/A	N/A	N/A
05/18/2020	**Q4 2019**** (7/1–9/30)	**Q4 2019–Q1 2020**** (10/1/19–03/31/19)	N/A	N/A	N/A	N/A
07/01/2020	N/A	N/A	**Q1 2020**** (1/1–3/31)	N/A	N/A	N/A
08/17/2020	**Q1 2020**** (1/1–3/31)	N/A	N/A	**CY 2019** (1/1–12/31)	**CY 2019** (1/1–12/31)	N/A
08/31/2020	N/A	N/A	N/A	N/A	N/A	**For FY 2021**
10/07/2020	N/A	N/A	**Q2 2020**** (4/1–6/30)	N/A	N/A	N/A
11/16/2020	**Q2 2020**** (4/1–6/30)	N/A	N/A	N/A	N/A	N/A
01/06/2021	N/A	N/A	**Q3 2020** (7/1–9/30)	N/A	N/A	N/A
02/16/2021	**Q3 2020** (7/1–9/30)	N/A	N/A	N/A	N/A	N/A
04/07/2021	N/A	N/A	**Q4 2020** (10/1–12/31)	N/A	N/A	N/A

* Data were submitted to the Centers for Disease Control and Prevention via the National Healthcare Safety Network.

** CMS-granted exception was applied for this reporting period in response to the 2019 Novel Coronavirus (COVID-19). Please refer to this link for more information: https://www.qualitynet.org/news/5e7a2b6902ca2c001f0fb905

† Submitted to CMS via the *QualityNet Secure Portal* at *www.QualityNet.org*

‡ Annual submission, stratified by quarter

PCHQR Program Relationship Matrix of Program Measures by Years and Quarters

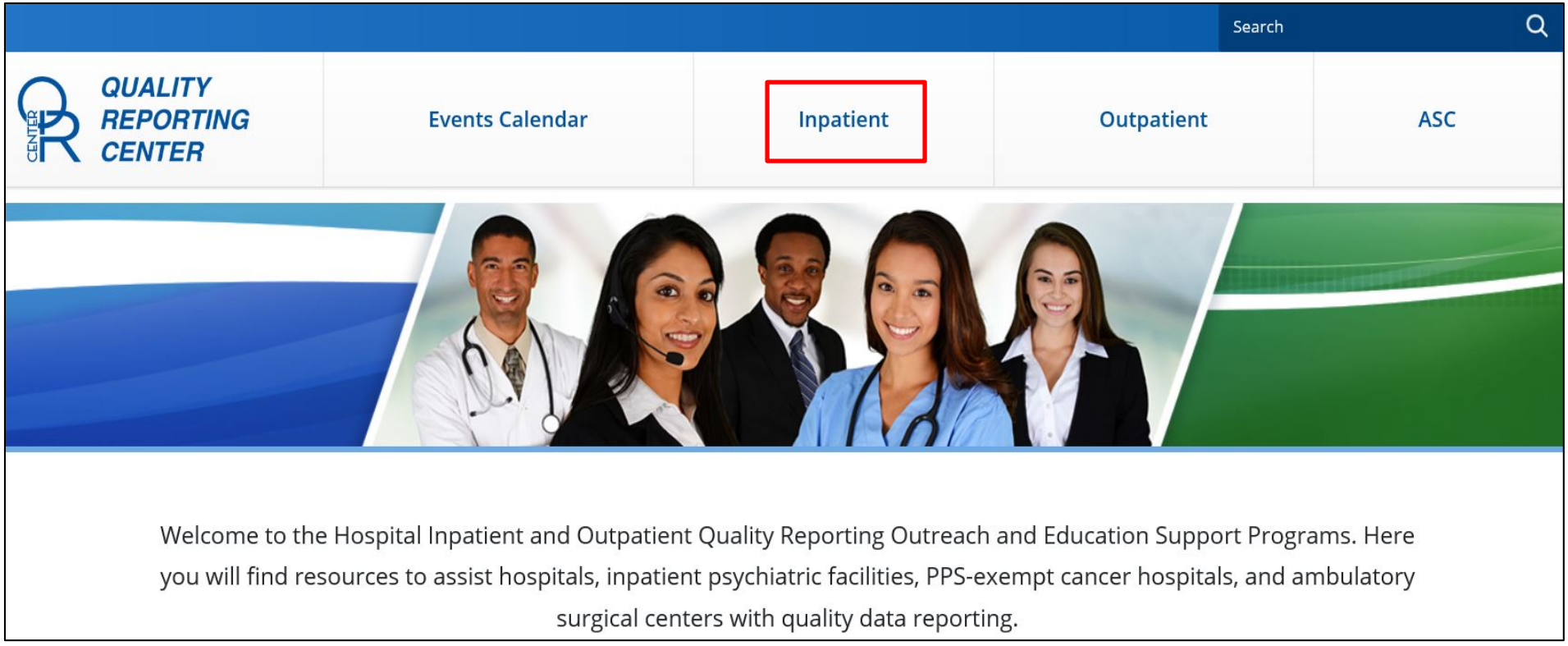
Safety and HAI	Program (Fiscal) Years	Reporting Periods–Calendar Year Quarters	Quarterly Data Submission Deadlines	*Hospital Compare* Release October 2019	*Hospital Compare* Release January 2020	*Hospital Compare* Release April 2020	*Hospital Compare* Release July 2020	*Hospital Compare* Release October 2020	*Hospital Compare* Release January 2021
Surgical Site Infection (SSI) NQF #0753 (PCH–6 is colon, and PCH–7 is abdominal hysterectomy.)	2015	1Q 2014	PRIOR						
	2016	2Q 2014	PRIOR						
		3Q 2014	PRIOR						
		4Q 2014	PRIOR						
	2017	1Q 2015	PRIOR						
		2Q 2015	PRIOR						
		3Q 2015	PRIOR						
		4Q 2015	PRIOR						
	2018	1Q 2016	PRIOR						
		2Q 2016	PRIOR						
		3Q 2016	PRIOR						
		4Q 2016	PRIOR						
	2019	1Q 2017	PRIOR						
		2Q 2017	PRIOR						
		3Q 2017	PRIOR						
		4Q 2017	PRIOR						
	2020	1Q 2018	PRIOR	1Q 2018–4Q 2018					
		2Q 2018	PRIOR		2Q 2018–1Q 2019				
		3Q 2018	PRIOR			3Q 2018–2Q 2019			
		4Q 2018	PRIOR				4Q 2018–3Q 2019		
	2021	1Q 2019	PRIOR					1Q 2019–4Q 2019	
		2Q 2019	PRIOR						2Q 2019–1Q 2020
		3Q 2019	PRIOR						
		4Q 2019*	PRIOR						
	2022	1Q 2020	08/17/2020						
		2Q 2020	11/16/2020						
		3Q 2020	02/16/2021						
		4Q 2020	05/17/2021						

*The CMS-granted exception was applied for this reporting period in response to the 2019 Novel Coronavirus (COVID-19). Please refer to this link for more information: https://www.qualitynet.org/news/5e7a2b6902ca2c001f0fb905

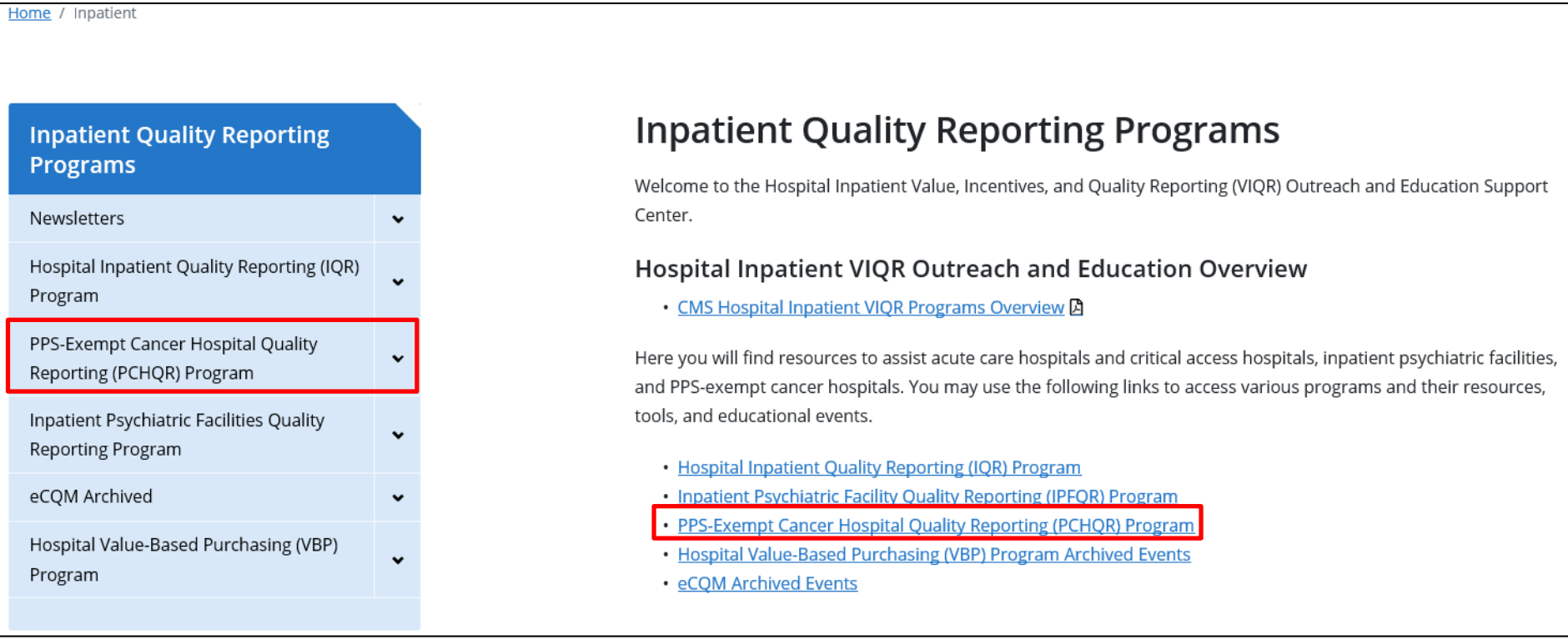
Note: Gray box indicates activity complete; Q=Quarter

Quality Reporting Center

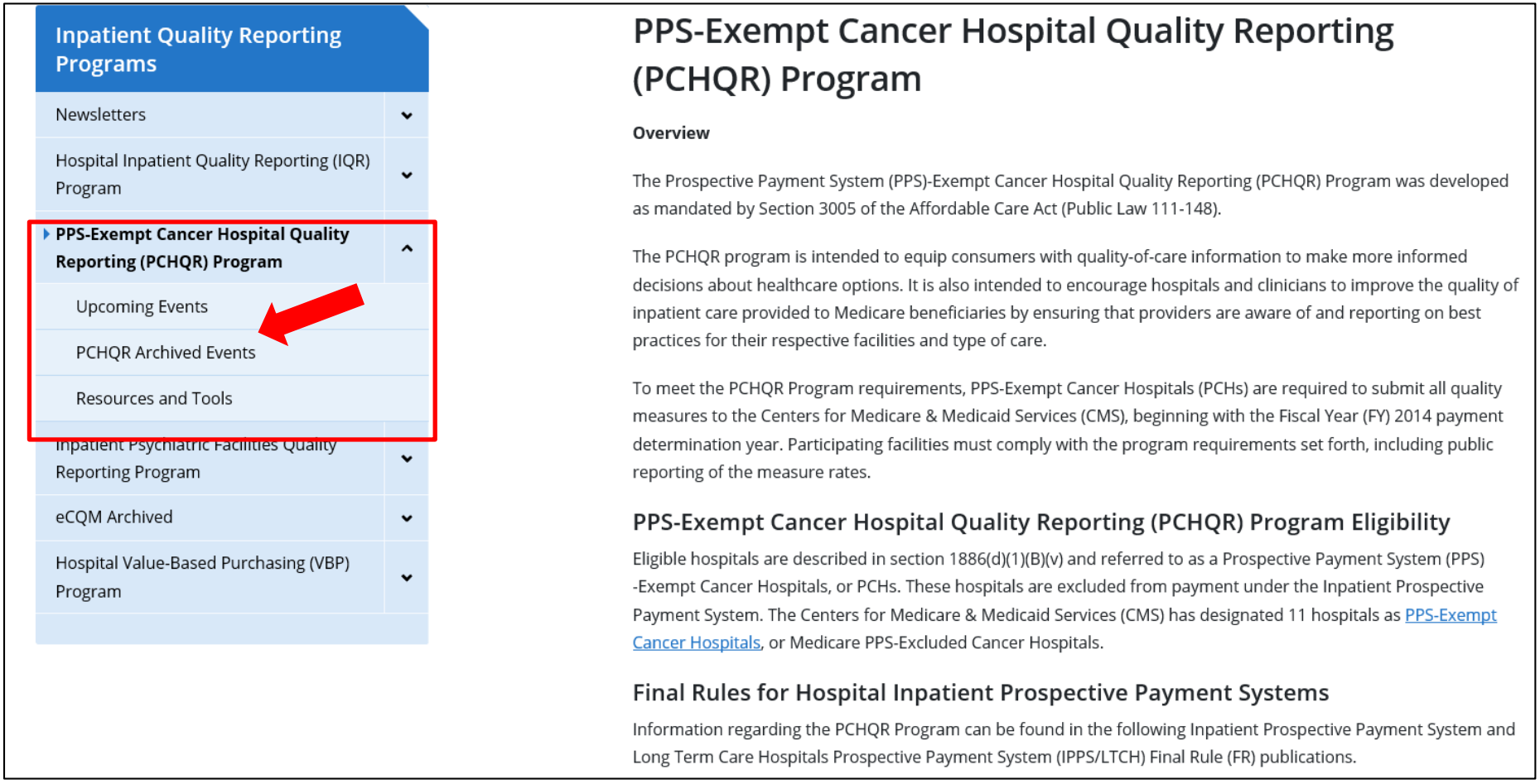
Quality Reporting Center



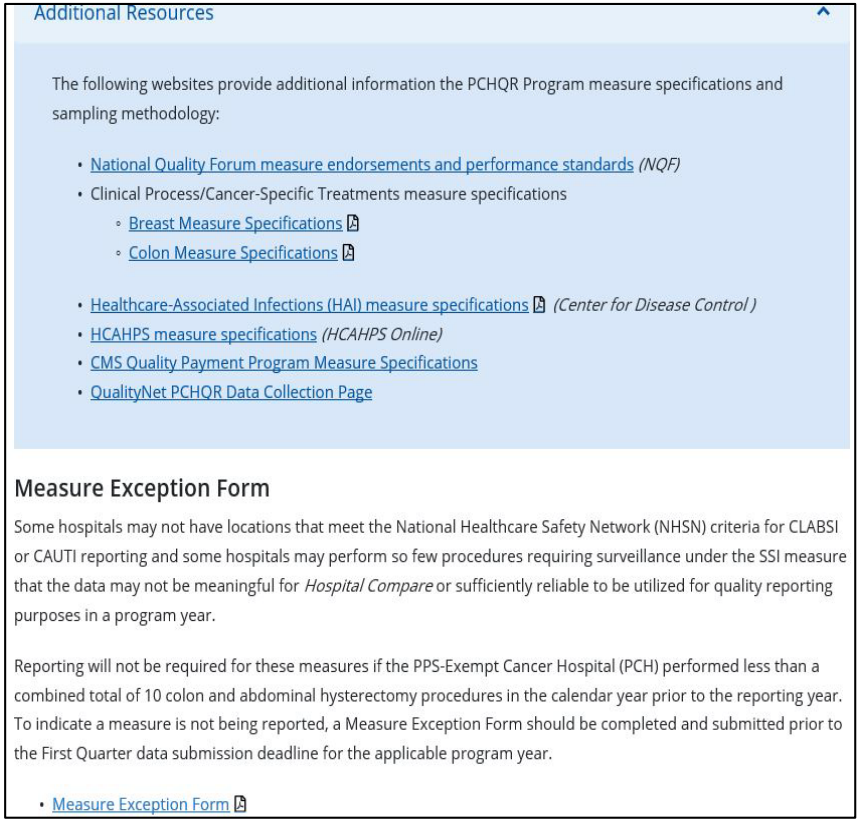
Inpatient Quality Reporting Programs



PCHQR Program Selections



Quality Reporting Center
Resources and Tools Page

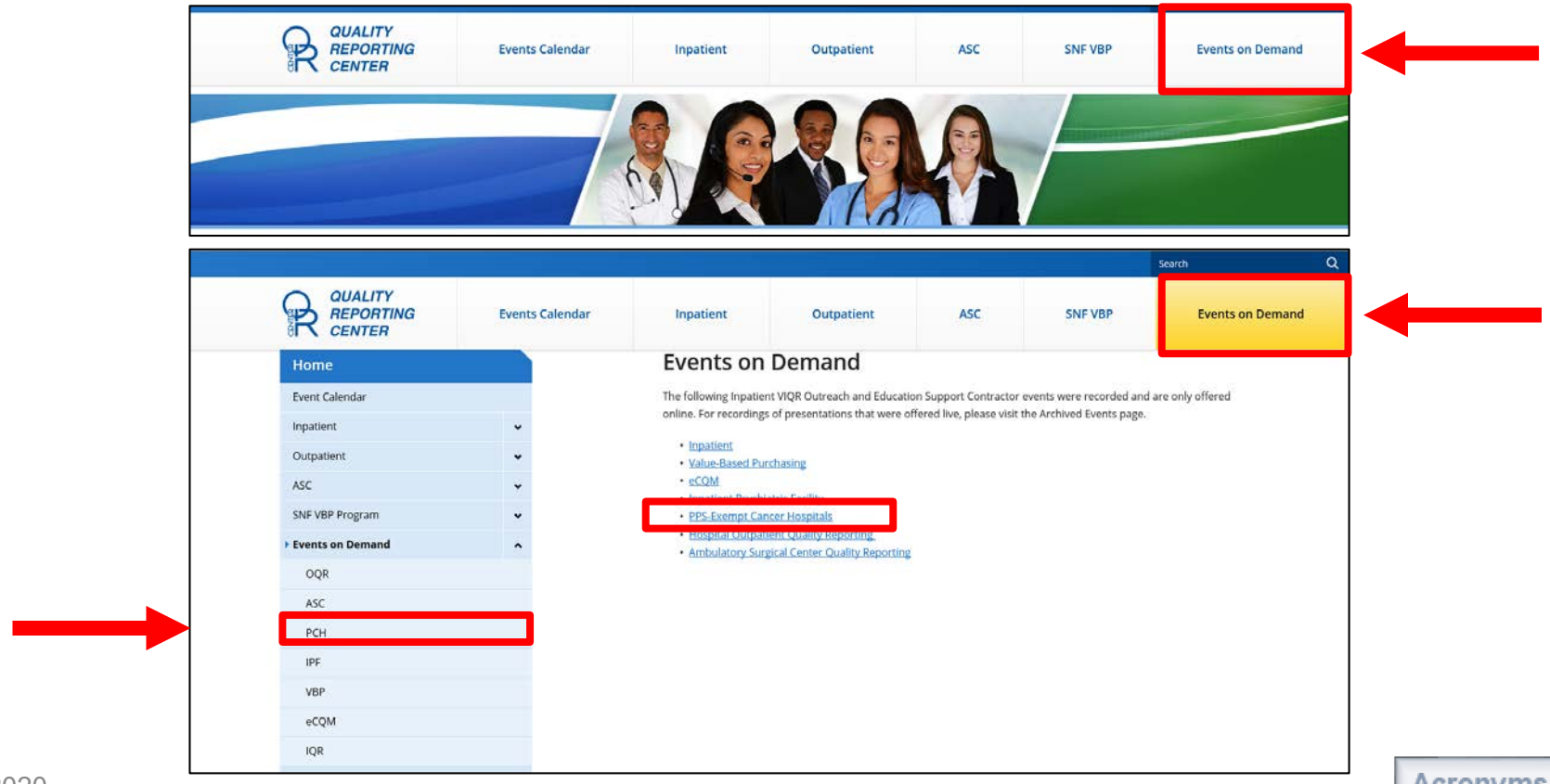


Key Dates and Reminders

Important Events and Dates

Upcoming Outreach and Educational Events are posted online:

[Events On Demand]



Important Events and Dates

Data Submission Deadlines

- July 1, 2020
  - Q1 2020 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey data*
- August 17, 2020
  - Q1 2020 Healthcare-Associated Infection (HAI) data*
    - Catheter-associated Urinary Tract Infection (CAUTI), Central Line-Associated Bloodstream Infection (CLABSI), Surgical Site Infection (SSI) colon and abdominal hysterectomy, Clostridium difficile Infection (CDI), Methicillin-resistant Staphylococcus aureus (MRSA)
  - CY 2019 OCM** and External Beam Radiotherapy (EBRT) data
- August 31, 2020
  - FY 2021 Data Accuracy and Completeness Acknowledgement (DACA)

*Measure data submission falls under the CMS-granted, COVID-19 Extraordinary Circumstances Exceptions (ECE). Although data submission for the excepted reporting periods is optional, submitted data will be publicly reported.
** Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain (PCH-15) only

Quality Reporting Requirements for PCHs Affected by COVID-19

- March 22, 2020: CMS announced relief for clinicians, providers, hospitals, and facilities participating in quality reporting programs in response to COVID-19.
- March 27, 2020: Additional guidance on the scope and duration of the exceptions was distributed to health care providers in a memorandum.
- May 12, 2020: CMS announced additional exceptions for reporting periods related to HAI measures and web-based data submissions for PCHs via Listserve communication.

Applicable Data Submission Deadlines and Discharge Periods

- For the Influenza Vaccination Coverage Among Healthcare Personnel (HCP) and Centers for Disease Control and Prevention (CDC) infection measures, data will not be required for:
  - May, August, and November 2020 submission deadlines for discharge periods:
    - October 1, 2019–December 31, 2019 (Q4 2019)
    - January 1, 2020–March 31, 2020 (Q1 2020)
    - April 1, 2020–June 30, 2020 (Q2 2020)
- For the HCAHPS Survey, data will not be required for:
  - April, July, and October 2020 HCAHPS submission deadlines for discharge periods:
    - October 1, 2019–December 31, 2019 (Q4 2019)
    - January 1, 2020–March 31, 2020 (Q1 2020)
    - April 1, 2020–June 30, 2020 (Q2 2020)

Applicable Data Submission Deadlines and Discharge Periods

- For web-based data submissions, data from encounters during the following periods will not be required:
  - January 1, 2020–March 31, 2020 (Q1 2020)
  - April 1, 2020–June 30, 2020 (Q2 2020)
- For claims-based measures, qualifying claims will be excluded from measure calculation for the following periods:
  - January 1, 2020–March 31, 2020 (Q1 2020)
  - April 1, 2020–June 30, 2020 (Q2 2020)

Public Reporting

- **July 2020 Release**
  - 4Q 2018 through 3Q 2019 HCAHPS Survey data
  - 4Q 2018 through 3Q 2019 HAI measure data
    - SSI-colon and abdominal hysterectomy, CDI and MRSA
  - Q3 2018 through Q2 2019 Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy
- **October 2020 Release**
  - 1Q 2019 through 4Q 2019 HCAHPS Survey data*
  - 1Q 2019 through 4Q 2019 HAI measure data*
    - SSI-colon and abdominal hysterectomy, CDI and MRSA
  - 4Q 2019 through 1Q 2020 HCP measure data*

*Q4 2019 and Q1 2020 measure data falls under the CMS-granted, COVID-19 Extraordinary Circumstances Exceptions (ECE).

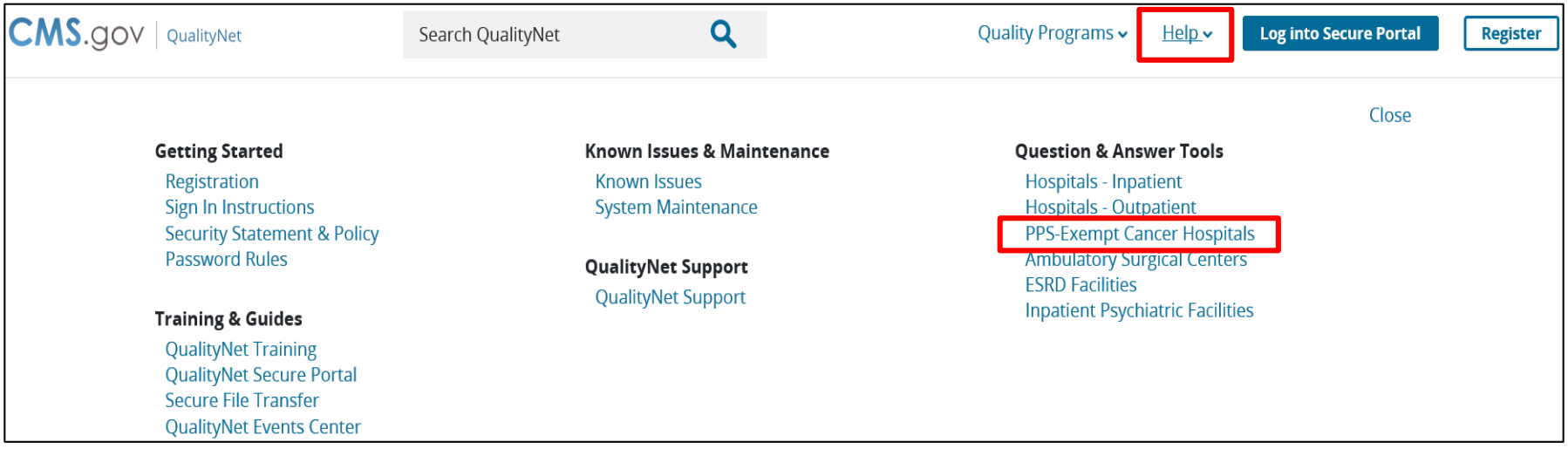
Admissions and ED Visits for Patients Receiving Outpatient Chemotherapy (PCH-30 and PCH-31) Measure

- FY 2020 measure results were publicly reported on *Hospital Compare* on April 22, 2020.
  - Data collection period: July 1, 2017–June 30, 2018
- Facility-Specific Reports (FSRs) were distributed April 30, 2020–May 1, 2020.
  - Data collection period: July 1, 2018–June 30, 2019
  - FY 2021 measure results will be publicly reported in July 2020.

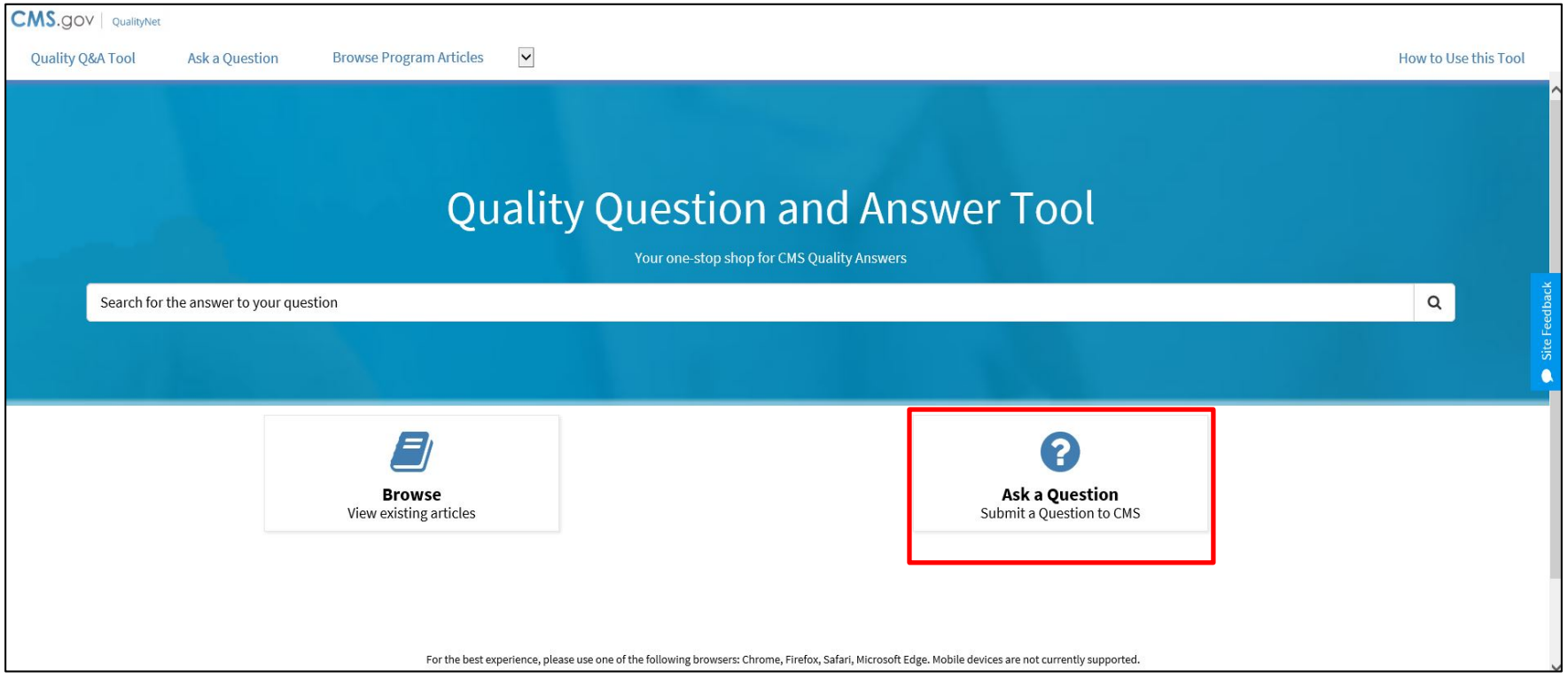
HCQIS Access Roles and Profile System (HARP) Account Transition

- Transition period ends June 15, 2020.
- Resources
  - *QualityNet* News Article
  - Setting Up Your HARP Account for Hospital Quality Reporting webinar
  - HARP User Guide
- *QualityNet* Help Desk
  - Email: qnetsupport@hcqis.org
  - Phone: (866) 288-8912

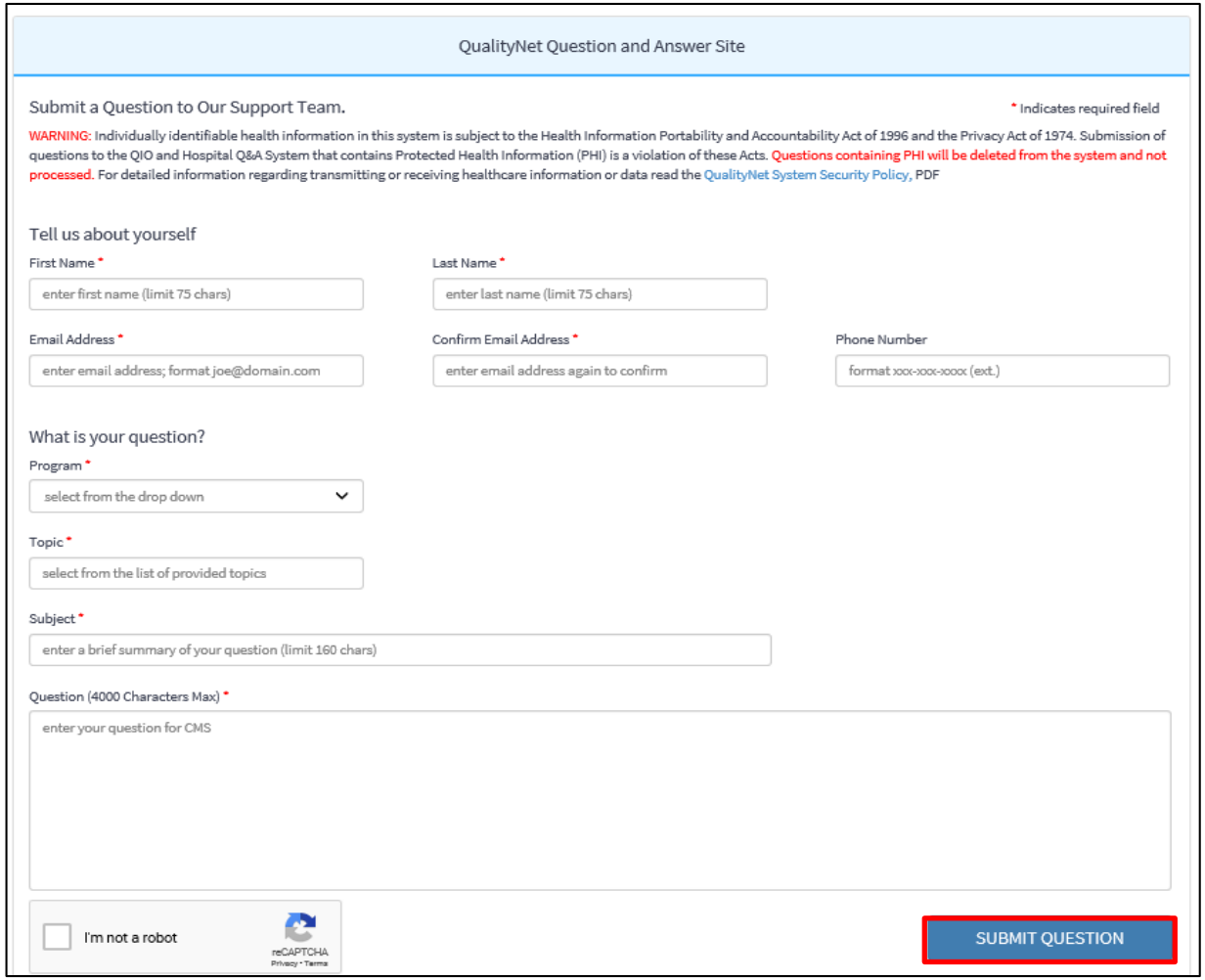
Accessing the *QualityNet* Questions and Answers Tool



Ask a Question



Submit a Question



Closing Remarks

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