



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

### **Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor**

#### **PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program: A Closer Look at Public Reporting**

#### **Presentation Transcript**

#### **Speaker**

**Lisa Vinson, BS, BSN, RN**  
Program Lead, PCHQR Program  
Inpatient VIQR Outreach and Education Support Contractor

**February 23, 2021  
2 p.m. Eastern Time (ET)**

**DISCLAIMER:** This presentation document was current at the time of publication and/or upload onto the *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 these questions and answers change following the date of posting, these questions and answers will not necessarily reflect those changes; this information will remain as an archived copy with no updates performed.

Any references or links to statutes, regulations, and/or other policy materials included 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 questions-and-answers session 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.

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

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

**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 healthcare options. This is accomplished through public reporting of measure rates, or PCH data, through the newly designed Compare tools, specifically the Provider Data Catalog, or PDC, which will be our focus for today. This is relevant as the current preview period will end in a few days and the anticipated Provider Data Catalog release for April 2021 is near. 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 chat 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 questions-and-answers summary document will be posted on [Quality Reporting Center](#) and [QualityNet](#).

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 chat tool. All questions received via the chat tool during this webinar that pertain to this webinar topic will be reviewed and a questions-and-answers summary document will be available at a later date. To maximize the usefulness of the questions-and-answers 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 later.

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

---

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

Any questions received that are not related to the topic of the webinar will not be answered in the chat tool nor in the questions-and-answers 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 Q&A tool](#). You can access the Q&A 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 Q&A 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 and abbreviations you may hear today include CSV, for comma-separated value; HAI, for healthcare-associated infection; HCAHPS, for Hospital Consumer Assessment of Healthcare Providers and Systems; HQR for Hospital Quality Reporting, and PDC, for Provider Data Catalog.

The purpose of today's presentation is to provide PCHQR Program participants with an overview of public reporting, highlighting the new Care Compare and Provider Data Catalog public reporting sites, with an emphasis on the PDC site. This, as you will see later, is where the PCHQR Program data is located.

At the culmination of this educational event, we hope participants are able to identify the purpose of public reporting, access preview data via the Hospital Quality Reporting Preview User Interface, locate the Care Compare and Provider Data Catalog, and navigate and access PCH data on the Provider Data Catalog site.

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.

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

---

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

These procedures ensure that a PCH can review the data that are public prior to data being made public. 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 as of December 1, 2020. In order to streamline all healthcare compare tools, CMS released Care Compare and the Provider Data Catalog on September 3, 2020. 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 they are publicly reported. The way in which the preview data is accessed changed back in 2018. This was the switch to the Hospital Quality Reporting, or HQR, User Interface. This user interface was implemented with the December 2018 preview for the February 2019 release and was developed to allow providers increased flexibility in reviewing their data. I will now provide a brief recap of the HQR Preview User Interface.

The current preview period closes Friday, February 26, 2021, which is three days away. Hopefully, by now you should have reviewed your PCH data, which includes Q1 2019–Q4 2019 HCAHPS Survey data and Q1 2019–Q4 2019 HAI 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 now what is known as the Provider Data Catalog, or PDC, site. Now that you are able to review your facility's data electronically, you can access and review data for the current preview period and previous releases, as far back as February 2019, at your convenience. The Listserve communications we, the Support Contractor, provide contained detailed instructions on how to access the data utilizing the HQR Public Reporting User Interface. 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.

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

---

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

For instance, the current preview period for the upcoming April 2021 PDC release opened January 27 and closes February 26. So, again if you have not already done so, please take the time and review your facility's preview 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 log-in page as displayed on this page. You will start by entering your HCQIS Access Roles and Profile, or HARP, credentials, which you should have already established. You are 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 2-factor authentication process, you will have an option to select the device you wish to verify your identity via a 6-digit code. You can select either text or email. For the purpose of this presentation, the verification code has been sent via text and entered in the box labeled Enter Code. You will now select Continue to be taken to the next screen.

The Terms and Conditions statement will appear. Once you scroll down, the Accept button will become selectable, and then you will proceed to the HQR landing page. Of note, if you select Cancel, the program will close.

On the HQR landing page, there are several menu selections. These are located in the navigation pane on the left-hand side. To access the public reporting user interface, you will select the Program Reporting icon, as displayed 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 screen.

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

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

Furthermore, within the preview user interface, you can easily view your facility's data. You can view the 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 also search for individual measures by typing specific measures in the Search box and the information in the table will be appropriately filtered. You can also use various filters: By Release, you can select release data to be viewed, beginning with February 2019; By 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; By Performance, once this filter is activated in a future system update, you will be able to filter your facility's data for being Above, Below, or the Same as previous Level filter selections; and Export Data, the exported measure data will be in a PDF format, which can be printed and saved for future reference. As mentioned earlier, data will be retained following the 30-day preview.

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 an accordion style, which can be expanded by selecting the plus (+) sign to 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, denoted by the lower case "i", 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.

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

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

This is a snippet of the PDF report when the Export Data button is selected as discussed previously. Captured here is the Complications and Deaths measure group which includes HAI measure data; SSI-colon and abdominal hysterectomy; CDI, or C. diff.; and MRSA. Of note, public display requirements have not been specified yet for CAUTI and CLABSI measures for the PCHQR Program. These requirements will be conveyed via the final rule.

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

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 healthcare 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 Provider Data Catalog, or PDC, better serves those individuals who are interested in detailed CMS data and use interactive and downloadable datasets. The PDC now makes quality datasets available through an improved interface, allowing easy access and the ability to analyze the CMS publicly reported data and make it useful for patients. A key takeaway here is that this is the site where PCH data are located, not Care Compare.

The PDC site is the new 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 PCH datasets by selecting Datasets at the top of the page or you can select 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.

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

---

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

Applicable datasets include Oncology Care Measure, which is the Plan of Care for Moderate to Severe Pain measure, or PCH-15; Patient Survey, PCH-HCAHPS Hospital and State; Outcome Measures Hospital and Outcome Measures National, which includes Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy, or PCH-30 and PCH-31 measure; and the Safety and Healthcare-associated Infections, which include the SSIs, C. diff, MRSA, and HCP measures. Of note, these measures actually fall under the dataset header Cancer Treatment Measures. This will be updated in a future release. 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, and 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 actual data table is displayed. You are also able to download the dataset to 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 CSV 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 are 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 datasets. This document is updated with each release, which customarily occurs in January, April, July, and October.



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

---

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

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 2014 through 2021. You also have the option to download all datasets which are available in a zip file format.

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 2021 annual files and date back to 2014. 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 background information about the PDC site. There is also a link to submit feedback, if you have comments on how this site functions. The actual email address is [FeedbackDataCatalog@cms.hhs.gov](mailto:FeedbackDataCatalog@cms.hhs.gov).

Here is a list of available resources related to Public Reporting. Please be sure you are signed up to receive program notifications via email. 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. Both documents are posted on the *QualityNet* PCHQR Program Public Reporting page.

[QualityReportingCenter.com](http://QualityReportingCenter.com) is another great site to find PCHQR Program resources and tools. Many of the valuable resources and tools found on *QualityNet* can also 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.

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

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

Our final discussion point for today's event are the past, current, and upcoming public reporting activities. The most recent public reporting release occurred last month on January 27, which included Q1 2019–Q4 2019 HCAHPS Survey Data, Q1 2019–Q4 2019 HAI measure data, and Q1 2019–Q4 2019 EBRT and PCH-15 measure data. The January release was the last public display of EBRT data. As we have discussed and reviewed today, the April 2021 preview period closes on February 26. Please be sure you have accessed the HQR Public Reporting User Interface to review your facility's data for accuracy prior to this date. Please also remember that for this release both the HCAHPS and HAI data were not updated since Q1 2020 and Q2 2020 data are excepted from public reporting under the COVID-19 blanket waiver, as these quarters would have originally been included in this release. The exact date of the April 2021 release will be communicated via email notification, so be sure to subscribe to the notification distribution list. Looking ahead, the FY 2020 IPPS/LTCH PPS Final Rule established that confidential, national reporting will be conducted for the four End-of-Life measures (PCH-32, PCH-33, PCH-34, and PCH-35) and the 30-day Unplanned Readmissions for Cancer Patients (PCH-36) measures. Again, the performance periods for these measures will be adjusted due to the COVID-19 blanket waiver. We anticipate that these reports will be available for the EOL measures in late spring and summer for the 30-day Unplanned Readmissions measure. Specific dates will be communicated via Listserve notification. Of note, and not listed on this slide, is the upcoming delivery of the FY 2022 facility-specific reports for the Admission and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy, or PCH-30 and PCH-31, measure which will occur this Spring. These measure results are anticipated to be publicly reported in the July 2021 PDC release.

Before we close today's event, I would like to provide a brief overview on submitting questions via the *QualityNet* Question and Answer tool.

Displayed on this slide is how you can access the PCHQR Program Questions and Answers tool via the *QualityNet* home page.

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

---

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

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 new *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 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.