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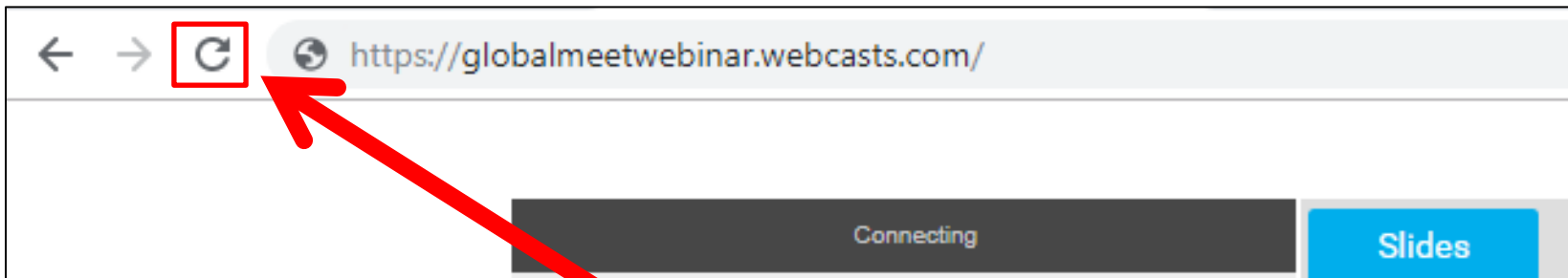


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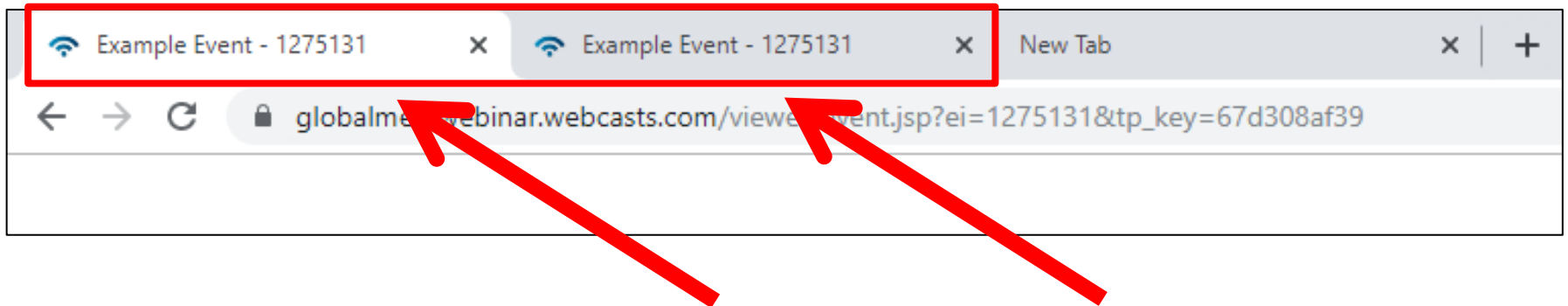
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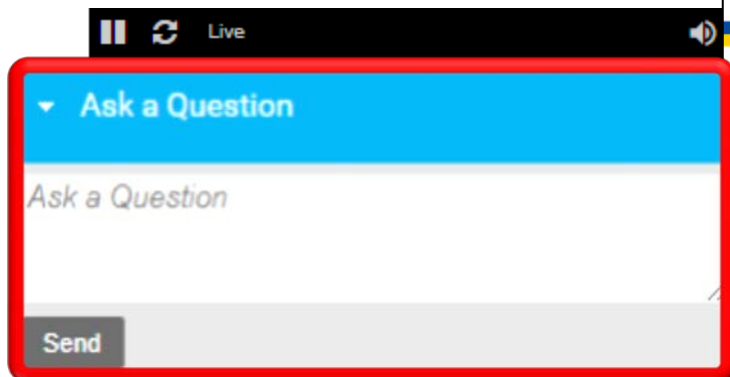
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Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor



Today's Presentation



PCHQR Program: FY 2023 IPPS/LTCH PPS Final Rule

September 8, 2022

Speakers

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Acronyms and Abbreviations

ACS	American College of Surgeons	HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems
CAUTI	Catheter-Associated Urinary Tract Infection	HCP	healthcare personnel
CDC	Centers for Disease Control and Prevention	ICU	intensive care unit
CDI	<i>Clostridium difficile</i> Infection	IPPS	Inpatient Prospective Payment System
CFR	Code of Federal Regulations	LTCH	long-term care hospital
CLABSI	Central Line-Associated Bloodstream Infection	MRSA	Methicillin-Resistant <i>Staphylococcus aureus</i>
CMS	Centers for Medicare & Medicaid Services	NHSN	National Healthcare Safety Network
CST	Cancer-Specific Treatment	NQF	National Quality Forum
CY	calendar year	OCM	Oncology Care Measure
EBRT	External Beam Radiotherapy	PCH	PPS-Exempt Cancer Hospital
ECE	Extraordinary Circumstances Exception	PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
ED	emergency department	PPS	prospective payment system
EOL	End of Life	QIO	Quality Improvement Organization
FR	<i>Federal Register</i>	SCIP	Surgical Care Improvement Project
FY	fiscal year	SSI	Surgical Site Infection
HAI	healthcare-associated infection	VIQR	Value, Incentives, and Quality Reporting

Purpose

This presentation will provide an overview of the Fiscal Year (FY) 2023 Inpatient Prospective Payment System (IPPS)/Long-Term Care Hospital Prospective Payment System (LTCH PPS) Final Rule and focus on the impact of the finalized changes on the PCHQR Program.

Objectives

Participants will be able to locate the FY 2023 IPPS/LTCH PPS Final Rule and identify the finalized changes that impact participants in the PCHQR Program.

Previous Changes to the Measures of the PCHQR Program

The FY 2023 IPPS/LTCH Final Rule is the eleventh rule addressing the PCHQR Program. Previous rules that impacted the PCHQR Program include the following:

- [FY 2013 IPPS/LTCH PPS Final Rule](#) (77 FR 53555–53567)
 - Five (two healthcare-associated infection [HAI] and three Cancer-Specific Treatment [CST]) quality measures were finalized for the FY 2014 program and subsequent years.
- [FY 2014 IPPS/LTCH PPS Final Rule](#) (78 FR 50837–50853)
 - One new HAI quality measure (surgical site infection [SSI]) was finalized for the FY 2015 program and subsequent years.
 - Twelve new quality measures for the FY 2016 program and subsequent years were finalized: five Clinical Process/Oncology Care Measures (OCMs); six Surgical Care Improvement Project (SCIP) measures; and one Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) measure.

Previous Changes to the Measures of the PCHQR Program (continued)

- [FY 2015 IPPS/LTCH PPS Final Rule](#) (79 FR 50277–50286)
 - One new Clinical Effectiveness measure (external beam radiotherapy [EBRT]) was finalized for the FY 2017 program and subsequent years.
- [FY 2016 IPPS/LTCH PPS Final Rule](#) (80 FR 49713–49723)
 - Two new outcome measures (Methicillin-resistant *Staphylococcus aureus* [MRSA] and *Clostridium difficile* infection [CDI]) and one process measure (Influenza Vaccination Coverage Among Healthcare Personnel [HCP]) were finalized for the FY 2018 program and subsequent years.
 - SCIP measures were removed as of October 1, 2016.

Previous Changes to the Measures of the PCHQR Program (continued)

- [FY 2017 IPPS/LTCH PPS Final Rule](#) (81 FR 57182–57193)
 - One new claims-based outcome measure (Admissions and Emergency Department [ED] Visits for Patients Receiving Outpatient Chemotherapy) was added for FY 2019.
 - The diagnosis cohort for National Quality Forum (NQF) #0382 (Oncology: Radiation Dose Limits to Normal Tissues) was expanded to include patients with breast and rectal cancer effective for patients treated in calendar year (CY) 2017 and applying to FY 2019.
- [FY 2018 IPPS/LTCH PPS Final Rule](#) (82 FR 38411–38425)
 - Three CST measures were removed from the program effective for diagnoses beginning January 1, 2018.
 - Four new end-of-life (EOL) claims-based measures (NQF #0210, #0213, #0215, and #0216) were added to the program for the FY 2020 program and subsequent years.

Previous Changes to the Measures of the PCHQR Program (continued)

- [FY 2019 IPPS/LTCH PPS Final Rule](#)
(83 FR 41609–41624)
 - One new measure removal factor, Factor 8, was added: “The costs associated with the measure outweigh the benefit of its continued use in the program.”
 - Four OCMs (NQF #0382, 0384, 0389, and 0390) were removed effective for patients being treated in CY 2019 (January 1–December 21, 2019).
 - The claims-based measure, 30-Day Unplanned Readmissions for Cancer Patients (NQF #3188), was added.

Previous Changes to the Measures of the PCHQR Program (continued)

- [FY 2020 IPPS/LTCH PPS Final Rule](#) (84 FR 42509–42524)
 - One new claims-based outcome measure, Surgical Treatment Complications for Localized Prostate Cancer, was adopted beginning with the FY 2022 program year.
 - The clinical effectiveness measure (EBRT) was removed, beginning with FY 2022 program year (patient encounters occurring as of January 1, 2020).
 - The HCAHPS survey was refined by removing the pain management questions beginning with October 1, 2019, discharges.
 - The Admissions and ED Visits for Patients Receiving Outpatient Chemotherapy data would be publicly reported as soon as feasible.
 - HAI measure data for MRSA, CDI, SSI-colon and abdominal hysterectomy, and HCP would be publicly reported as soon as feasible.
 - Confidential national reporting for EOL (NQF #0210, #0213, #0215, and #0216) and 30-Day Unplanned Readmissions for Cancer Patients (NQF #3188) measures was specified.

Previous Changes to the Measures of the PCHQR Program (continued)

- [FY 2021 IPPS/LTCH PPS Final Rule](#) (85 FR 58959–58965)
 - Two existing National Healthcare Safety Network (NHSN) measures, Catheter-associated Urinary Tract Infection (CAUTI) and Central Line-associated Bloodstream Infection (CLABSI), were refined to incorporate updated methodology developed by the Centers for Disease Control and Prevention (CDC).
 - Public reporting of the updated versions of the CLABSI and CAUTI measures will begin in the fall of CY 2022.

Previous Changes to the Measures of the PCHQR Program (continued)

- [FY 2022 IPPS/LTCH PPS Final Rule](#) (86 FR 45426–45437)
 - Removed of Oncology: Plan of Care for Pain – Medical Oncology and Radiation Oncology measure beginning with FY 2024 program year
 - Adopted COVID-19 Vaccination Among Healthcare Personnel measure beginning with the FY 2023 program year and subsequent years
 - Updated terminology for the PCHQR Program by replacing “QualityNet Administrator” with “QualityNet Security Official”
 - Codified existing PCHQR Program policies at 42 CFR 412.23 (f)(3) and CFR 412.24.

FY 2023 IPPS/LTCH PPS Final Rule Publication

- The FY 2023 IPPS/LTCH PPS Final Rule was published in the [*Federal Register*](#) on August 10, 2022.
- The PCHQR Program section is on pages 49311 through 49314.

PCHQR Program: FY 2023 IPPS/LTCH PPS Final Rule

Finalized Changes to the PCHQR Program

PCHQR Program Sections

1. Background
2. **Measure Retention and Removal Factors for the PCHQR Program**
 - **Adoption of a Patient Safety Exception to the Measure Removal Policy**
3. **Potential Adoption of Two National Healthcare Safety (NHSN) Measures – Request for Information**
4. Summary of PCHQR Program Measures for the FY 2024 Program Year and Subsequent Years
5. Maintenance of Technical Specification for Quality Measures
6. **Public Display Requirements**
 - **Public Display of End-of-Life (EOL) and 30-Day Unplanned Readmissions for Cancer Patients Measures Beginning with the FY 2024 Program Year Data**
7. Form, Manner and Timing of Data Submissions
8. Extraordinary Circumstances Exceptions (ECE) Policy Under PCHQR Program

Summary of Unchanged Sections in the Final Rule

- Section 1: Background
 - Sections 1866 (k) and 1866 (k)(1) of the Social Security Act apply.
- Section 4: Summary of PCHQR Program Measures for the FY 2024 Program Year
- Section 5: Maintenance of Technical Specifications for Quality Measures
 - Technical specifications are periodically updated and maintained on our [QualityNet website](#).
- Section 7: Form, Manner and Timing of Data Submissions
- Section 8: Extraordinary Circumstances Exceptions (ECE) Policy Under the PCHQR Program
 - Refer to FY 2019 IPPS/LTCH PPS Final Rule (84 FR 41623–41624) for more information.

Section 2: Measure Retention and Removal Factors for the PCHQR Program

Adoption of Patient Safety Exception to the Measure Removal Policy

- To align with other measure removal policies adopted in other quality programs, CMS proposed to promptly remove a measure, without rulemaking, if continued use of a measure in the PCHQR Program raises specific patient safety concerns.
 - Appropriate notifications would be delivered to hospitals, the public, vendors, and Quality Improvement Organizations (QIOs), as it relates to the reason for its removal, via routine communication channels, such as memos, emails, and notices on QualityNet.
 - Notice of the measure removal would also be provided in the *Federal Register*.
- CMS finalized proposal to adopt a Patient Safety Exception to the measure removal policy and to the regulations by revising 42 CFR 412.24(d)(3) to add a new paragraph (d)(3)(iii) effective with the FY 2024 program year.

Section 3: Potential Adoption of Two Digital NHSN Measures – Request for Information

NHSN Healthcare-associated *Clostridioides difficile* Infection (CDI) Outcome Measure and NHSN Hospital-onset Bacteremia & Fungemia Outcome Measure

- CMS has been considering adoption of both measures since cancer patients are often immunocompromised and more vulnerable to HAIs.
- Prevention practices will lead to a reduction in the number HAI cases, morbidity, and mortality.
- CMS received feedback, that is summarized in the final rule, to determine whether to adopt these measures for future program years.
 - These considerations include potential measure refinement, measure specifications, reporting burden, NQF review, and lack of risk adjustments.

Table IX.F-01: Summary of PCHQR Program Measures for the FY 2024 Program Year

Safety and Healthcare-Associated Infection (HAI)

Short Name	NQF #	Measure Name
CAUTI	0138	National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome Measure
CLABSI	0139	NHSN Central line-associated Bloodstream Infection (CLABSI) Outcome Measure
HCP	0431	Influenza Vaccination Among Healthcare Personnel
Colon and Abdominal Hysterectomy SSI	0753	American College of Surgeons-Centers for Disease Control and Prevention (ACS-CDC) Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure (currently includes SSIs following Colon Surgery and Abdominal Hysterectomy)
MRSA	1716	NHSN Facility-wide Inpatient Hospital-onset Methicillin-resistant <i>Staphylococcus aureus</i> Bacteremia Outcome Measure
CDI	1717	NHSN Facility-wide Inpatient Hospital-onset <i>Clostridium difficile</i> Infection (CDI) Outcome Measure
COVID-19 HCP Vaccination	N/A	COVID-19 Vaccination Coverage Among HCP

Table IX.F-01: Summary of PCHQR Program Measures for the FY 2024 Program Year

(Continued)

Clinical Process/Oncology Care Measures

Short Name	NQF #	Measure Name
EOL-Chemo	0210	Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life
EOL-Hospice	0215	Proportion of Patients Who Died from Cancer Not Admitted to Hospice

Intermediate Clinical Outcome Measures

EOL-ICU	0213	Proportion of Patients Who Died from Cancer Admitted to the Intensive Care Unit (ICU) in the Last 30 Days of Life
EOL-3DH	0216	Proportion of Patients Who Died from Cancer Admitted to Hospice for Less Than Three Days

Table IX.F-01: Summary of PCHQR Program Measures for the FY 2024 Program Year

(continued)

Patient Engagement/Experience of Care		
Short Name	NQF #	Measure Name
HCAHPS	0166	Hospital Consumer Assessment of Healthcare Providers and Systems
Claims Based Outcome Measures		
N/A	N/A	Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy
N/A	3188	30-Day Unplanned Readmissions for Cancer Patients
N/A	N/A	Surgical Treatment Complications for Localized Prostate Cancer

Section 6:

Public Display Requirements

Background

- Under Section 1866(k)(4) of the Social Security Act, CMS is required to establish procedures to make data submitted under the PCHQR Program available to the public and allow PPS-exempt Cancer Hospitals (PCHs) to review the data prior to public display.
- CMS continues to use rulemaking to establish the year the first publicly reported data would be made available and publish the data as soon as feasible during that year.
- CMS finalized a timetable for public display of data for specific PCHQR Program measures:
 - End of Life (EOL)
 - 30-Day Unplanned Readmissions for Cancer Patients

Section 6: Proposal to Begin Public Display of End-of-Life Measures Beginning with the FY 2024 Program Year Data

- CMS finalized its proposal, with a modification, to begin public display of the four EOL measures beginning with the FY 2025 program year (July 1, 2022–June 30, 2023):
 - Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life (NQF #0210)
 - Proportion of Patients Who Died from Cancer Not Admitted to Hospice (NQF #0215)
 - Proportion of Patients Who Died from Cancer Admitted to the ICU in the Last 30 Days of Life (NQF #0213)
 - Proportion of Patients Who Died from Cancer Admitted to Hospice for Less Than Three Days (NQF #0216)
- This delay will allow PCHs enough time to review their confidential reports.
- Public display will occur during the July 2024 refresh cycle or as soon as feasible thereafter.
 - The exact timeframe will be announced on our CMS website and applicable Listserves.

Section 6: Proposal to Begin Public Display of 30-Day Unplanned Readmissions for Cancer Patients Measure Beginning with the FY 2024 Program Year Data

- CMS finalized its proposal to begin public display of the 30-Day Unplanned Readmissions for Cancer Patients measure beginning with the FY 2024 program year (October 1, 2021–September 30, 2022).
 - Public display will occur during the October 2023 refresh cycle or as soon as feasible thereafter, following the 30-day preview period.
- CMS anticipates providing confidential reports on the data collected for the FY 2023 (October 1, 2020– September 30, 2021) program year in Summer 2022.

Table IX.F-02: Previously Finalized and Proposed Public Display Requirements

Measures	Public Reporting
<ul style="list-style-type: none"> HCAHPS Survey (NQF #0166) Oncology: Plan of Care for Pain – Medical Oncology and Radiation Oncology (NQF #0383)* 	2016 and subsequent years
<ul style="list-style-type: none"> ACS-CDC Harmonized Procedure Specific SSI – Colon and Abdominal Hysterectomy (NQF #0753) NHSN Facility-wide Inpatient Hospital-onset MRSA Bacteremia (NQF #1716) NHSN Facility-wide Inpatient-Hospital-onset CDI (NQF #1717) NHSN Influenza Vaccination Coverage Among HCP (NQF #0431) 	2019 and subsequent years
<ul style="list-style-type: none"> COVID-19 Vaccination Coverage Among HCP 	October 2022 and subsequent years
<ul style="list-style-type: none"> Admissions and ED Visits for Patients Receiving Outpatient Chemotherapy 	April 2020 and subsequent years
<ul style="list-style-type: none"> CAUTI (NQF #0138) CLABSI (NQF #0139) 	October 2022 and subsequent years

Table IX.F-02: Previously Finalized and Proposed Public Display Requirements

(continued)

Measures	Public Reporting
<ul style="list-style-type: none"> Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life (NQF #0210)** Proportion of Patients Who Died from Cancer Not Admitted to Hospice (NQF #0215)** Proportion of Patients Who Died from Cancer Admitted to the ICU in the Last 30 Days of Life (NQF #0213)** Proportion of Patients Who Died from Cancer Admitted to Hospice for Less Than Three Days (NQF #0216)** 	<p>July 2024 or as soon as feasible thereafter</p>
<ul style="list-style-type: none"> 30-Day Unplanned Readmissions for Cancer Patients (NQF #3188)*** 	<p>October 2023 or as soon as feasible thereafter</p>

*Measure finalized for removal, beginning with the FY 2024 program year.

**Measure finalized for public display beginning with FY 2025 program year data.

***Measure finalized for public display beginning with FY 2024 program year data.

PCHQR Program: FY 2023 IPPS/LTCH PPS Final Rule

Closing Remarks

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