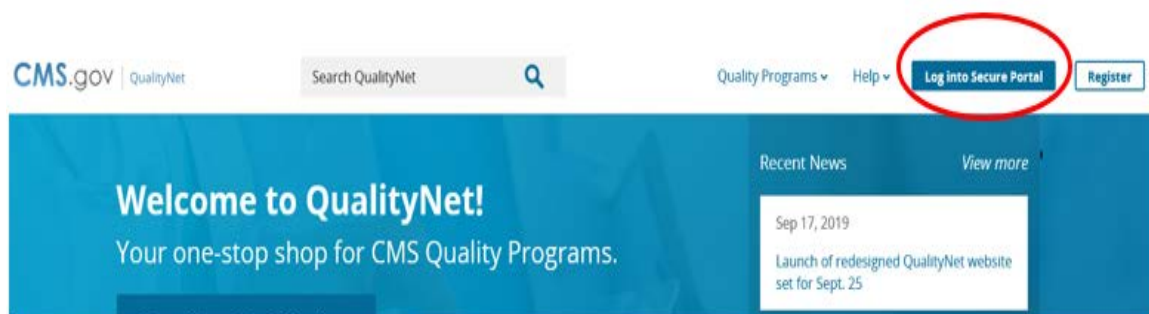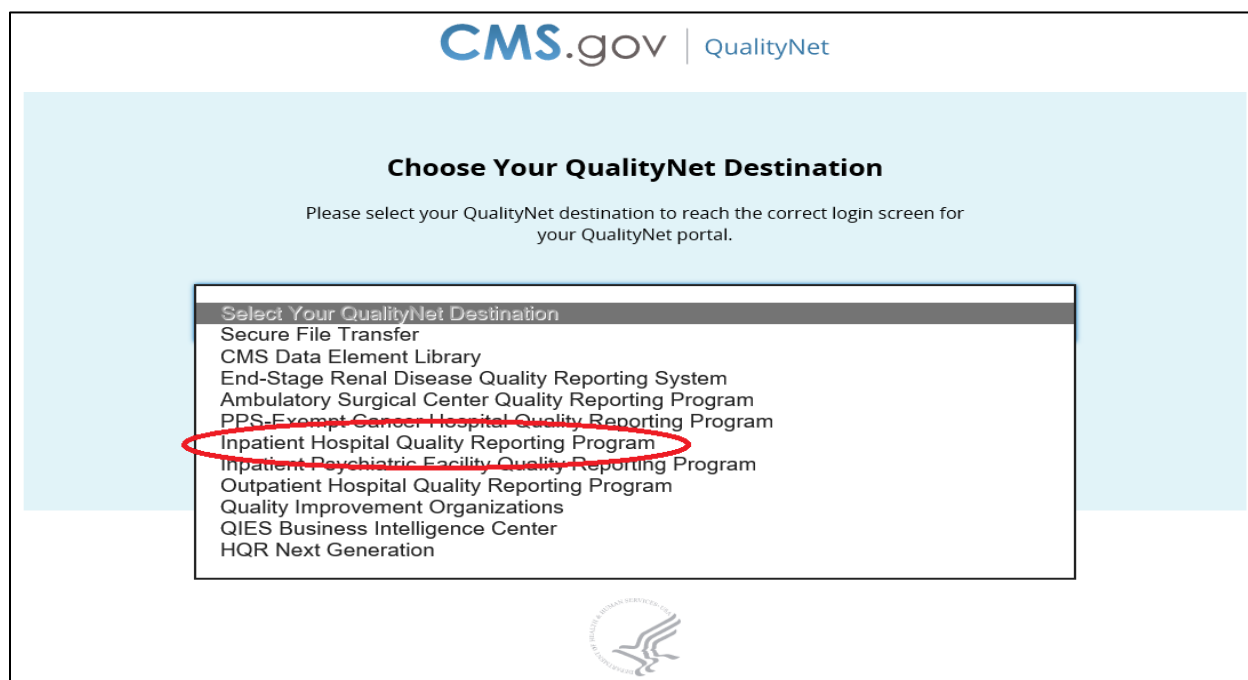## Hospital Inpatient Quality Reporting Program Reference Guide Entering PC-01 Data via the *QualityNet Secure Portal*

NOTE: Hospitals that do not deliver babies may submit an [Inpatient Prospective Payment System (IPPS) Quality Reporting Programs Measure Exception Form](#) Otherwise, hospitals must complete this entire process each quarter by the submission deadline and enter a zero (0) for the measure questions.

1. In your Internet browser, navigate to *www.QualityNet.org.*

2. The *QualityNet* home page will open. Locate the *Log in to QualityNet Secure Portal* section in the upper right-hand side of the page; select **Login into Secure Portal**

3. The *Choose Your QualityNet Destination* page will open. From the *Select Your QualityNet Destination* drop-down menu, select **Inpatient Hospital Quality Reporting Program.**
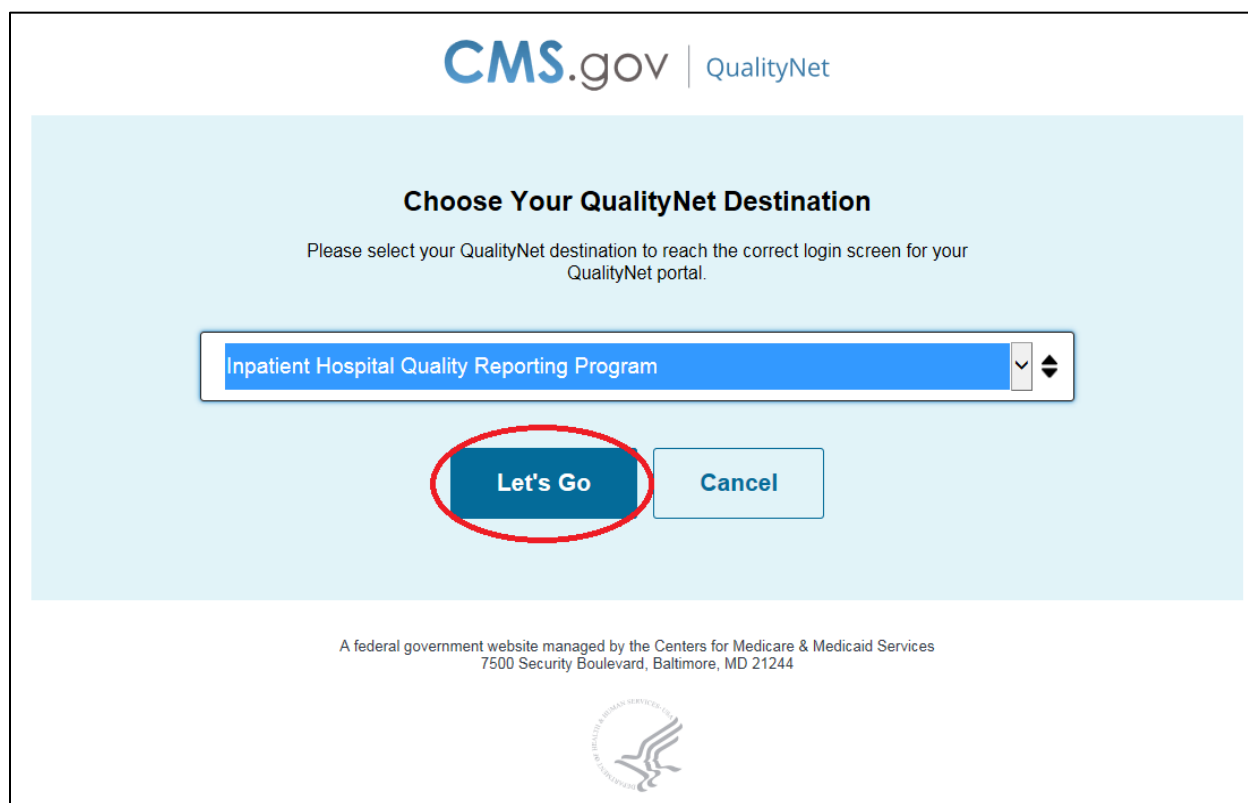
4. After selecting Inpatient Hospital Quality Reporting Program, select the
Let's Go button.

5. The *Log In to QualityNet* page will open. Enter your **User ID, Password,** and **Security Code.** Select the **SUBMIT** button.

6. To obtain your security code, open the VIP Access application that was downloaded and saved to your desktop during the *QualityNet Secure Portal* enrollment process. If you have not enrolled with *QualityNet*, please contact the Help Desk at (866) 288-8912.

7. Once this is open, you will see the token with a security code. The code changes every 30 seconds. To copy the code, select the **copy** icon on the far right of the code. Then, paste that code into the Security Code box on the *Log In to QualityNet* page. You will need to do this step every time you log in to the *QualityNet Secure Portal*.

8. The U.S. Government information system warning page will open. Select the **I Accept** button.

****WARNING**WARNING**WARNING****

You have accessed a U.S. Government information system. There is no right of privacy on this system.

All data contained within this system is owned by the Centers for Medicare & Medicaid Services of the U.S. Department of Health and Human Services. For the purpose of protecting the rights and property of the Department, and to monitor compliance with all applicable statutes, regulations, agreements and policies; data access, entry and utilization may be monitored, intercepted, recorded, copied, audited, inspected or otherwise captured and/or analyzed in any manner.

Use of this system by any user, authorized or unauthorized, constitutes consent to this monitoring, interception, recording, copying, auditing, inspecting or otherwise capturing and/or analyzing of data access, entry and/or utilization through this system.

Unauthorized access is prohibited by Title 18 of the United States Code, Section 1030. Unauthorized access or use of this computer system may subject violators to criminal, civil, and/or administrative action. System personnel may give any potential evidence of crime found on Department computer systems to law enforcement officials.

System users are required to adhere to all applicable statutes, regulations, agreements and policies governing their access to and use of the data contained within this system including, but not limited to, "CMS Information Security Policies, Standards and Procedures."
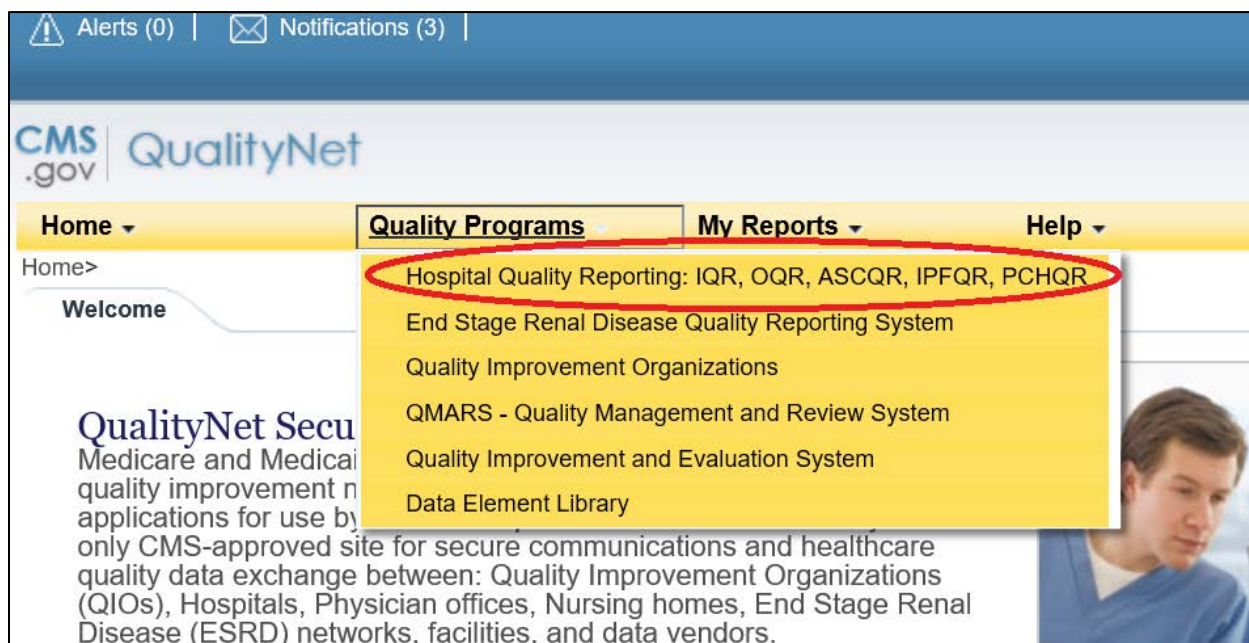
****WARNING**WARNING**WARNING****

I Accept   I Decline

9. The *QualityNet Secure Portal* launch page will open. From the *Quality Programs* drop-down menu, select **Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR**.

10. The *Quality Reporting System: My Tasks* page will open. Locate the *Manage Measures* section; select **View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)**.

    NOTE: The information displayed in the screenshot below may differ depending on the assigned role and user.
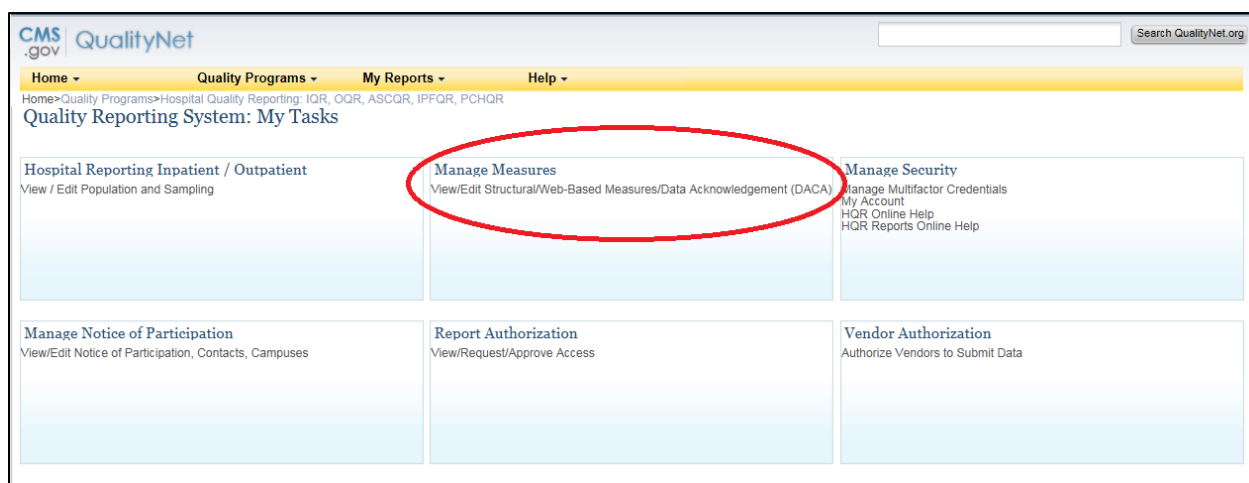
11. The *Structural/Web-Based Measures* screen will open. Under *Select a Program*, select **Inpatient Web-Based Measures**.

12. The *Payment Year* screen will open. From the *Payment Year* drop-down menu, select **2021**; then, select the **Continue** button.

The *Quarter (Measure) Selection* screen will open. Under the *Action* column, all quarters for Calendar Year 2019 are displayed. **Be certain to select the correct quarter**. For guidance refer to the information in the Submission Period column and the With Respect to Reporting Period column to the left.

Web-Based Measures | PY 2021

Quarter (Measure) Selection
Select the quarter (measure) to view or manage data.
NOTE: Vendors can view data in any quarter in which data entry was authorized.

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

Submission Period	With Respect to Reporting Period	Action
07/01/2019 - 08/15/2019	January 1, 2019 - March 31, 2019	Select Qtr - 1
10/01/2019 - 11/15/2019	April 1, 2019 - June 30, 2019	Select Qtr - 2
01/01/2020 - 02/18/2020	July 1, 2019 - September 30, 2019	Select Qtr - 3
04/01/2020 - 05/15/2020	October 1, 2019 - December 31, 2019	Select Qtr - 4

Back

13. If you are a user representing an organization with access to multiple providers, the *Provider Selection* screen will appear. Select one or more providers. Click the **Continue** button.

If you are a hospital user and have access only to your organization's data, you will be presented with the summary screen, as shown below in Step 14.

Web-Based Measures | 2021

Provider Selection

Select one or more providers.

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

000000 – SAMPLE HOSPITAL

[Clear] [Back] [Continue]

14. The summary screen displays the submission status of the PC-01 measure as Completed or Incomplete. To complete the submission, select **PC-01**.

Web-Based Measures | PY 2021

Use the horizontal scroll bar in the middle of this page to scroll completely to the right to view and edit the remaining data submissions.

Provider ID	PC-01
000000	Incomplete

15. The *PC-01: Elective Delivery* screen will open. Complete the eight (three Population, one Numerator, one Denominator, and three Exclusion questions) measure questions as indicated by the red asterisk.

> **HELPFUL TIP:** Make sure to allow ample time before the deadline to review and, if necessary, correct your data. Hospitals can update/correct their submitted clinical data until the Centers for Medicare & Medicaid Services (CMS) submission deadline, immediately after which the warehouse will be locked. Any updates made after the submission deadline will not be reflected in the data CMS uses.

> **IMPORTANT NOTE:** If your hospital submitted an IPPS Quality Reporting Programs Measure Exception Form for PC-01, your Provider Participation Report will continue to display as "No" for PC-01 measure submission.

a. **Complete the three Population questions.**

> **HELPFUL TIP:** For information on abstracting the Perinatal Care (PC)-01 measure, please reference the applicable version of the PC-01 measure specifications, which can be located via the Specifications Manual for Joint Commission National Quality Measures page on The Joint Commission's website.

NOTE: The measure numbers displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.

Instruction Text: Leaving this screen without calculating and saving RESULTS will cause the loss of any new or modified data. RESULTS cannot be calculated unless all data entry fields contain a valid value.

PC-01 : Elective Delivery

Population

* What was your hospital's Total Mother Population?

    1234

* What was your hospital's sample size?

    125

* What was your hospital's sampling frequency?

- ⦿ Monthly
- ◯ Quarterly
- ◯ Not Sampled
- ◯ N/A - Submission not required

b. **Complete the one Numerator question and one Denominator question.**

NOTE: The measure numbers displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.
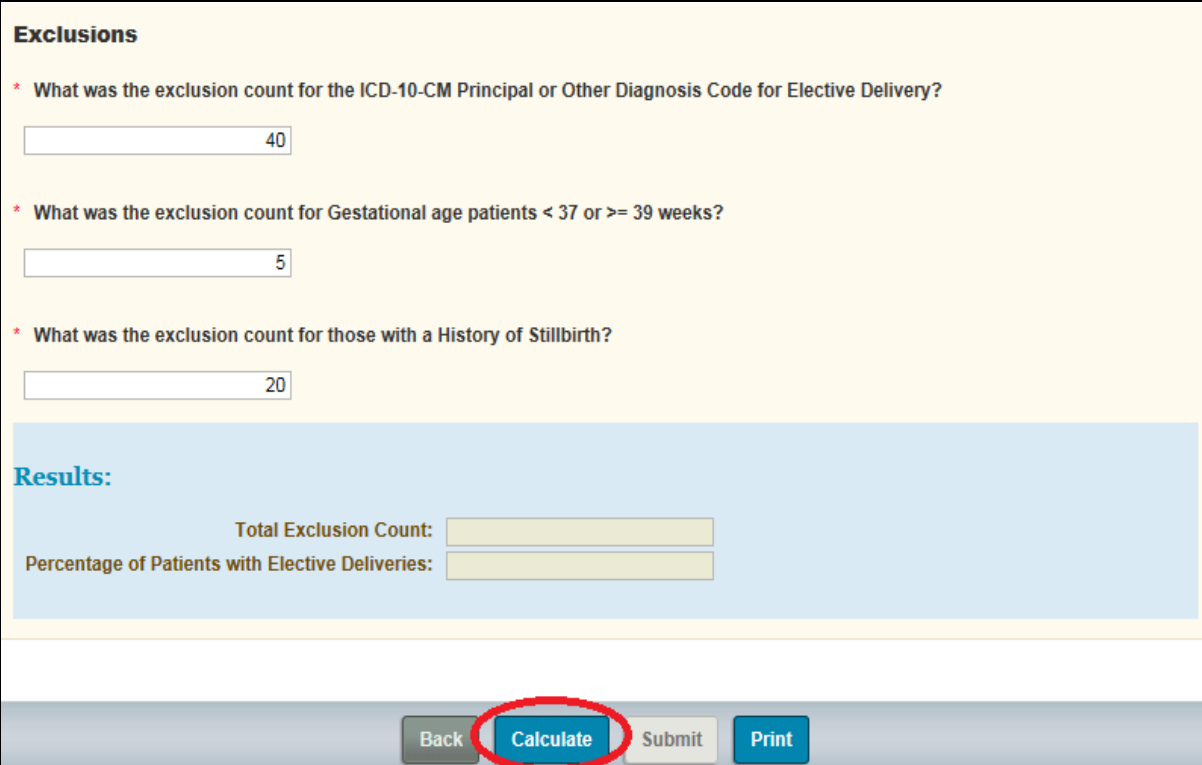
Numerator

* What was the number of patients with elective deliveries?

    7

Denominator

* What was the total number of patients delivering newborns with >=37 and <39 weeks of gestation completed?

    50

c. **Complete the three Exclusions questions. Once you have completed the questions, select the Calculate button.**

NOTE: The measure numbers displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.

d. **Check to make sure no warning or error message has appeared. An example of a warning message is depicted below. If you do <u>not</u> receive a warning or error message, <u>skip to Step 15.g</u>.**

NOTE: The measure number displayed in the screenshot below is shown only as an example. Actual measure numbers will vary by provider.

e. **If you <u>do</u> receive a warning or error message, you may choose to correct the data (which is recommended) by selecting the Edit button. Correct any data issues described in the warning or error message. If you choose not to correct the data, continue to calculate the results.**

NOTE: The measure numbers displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.
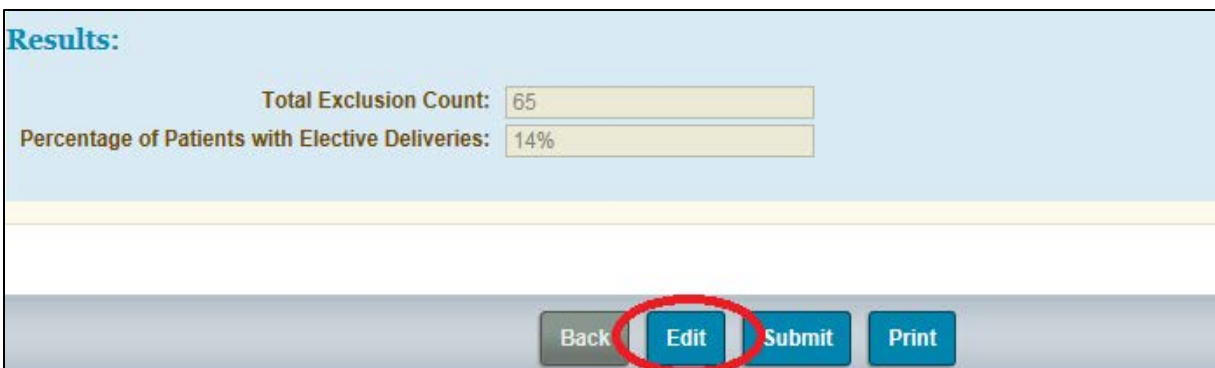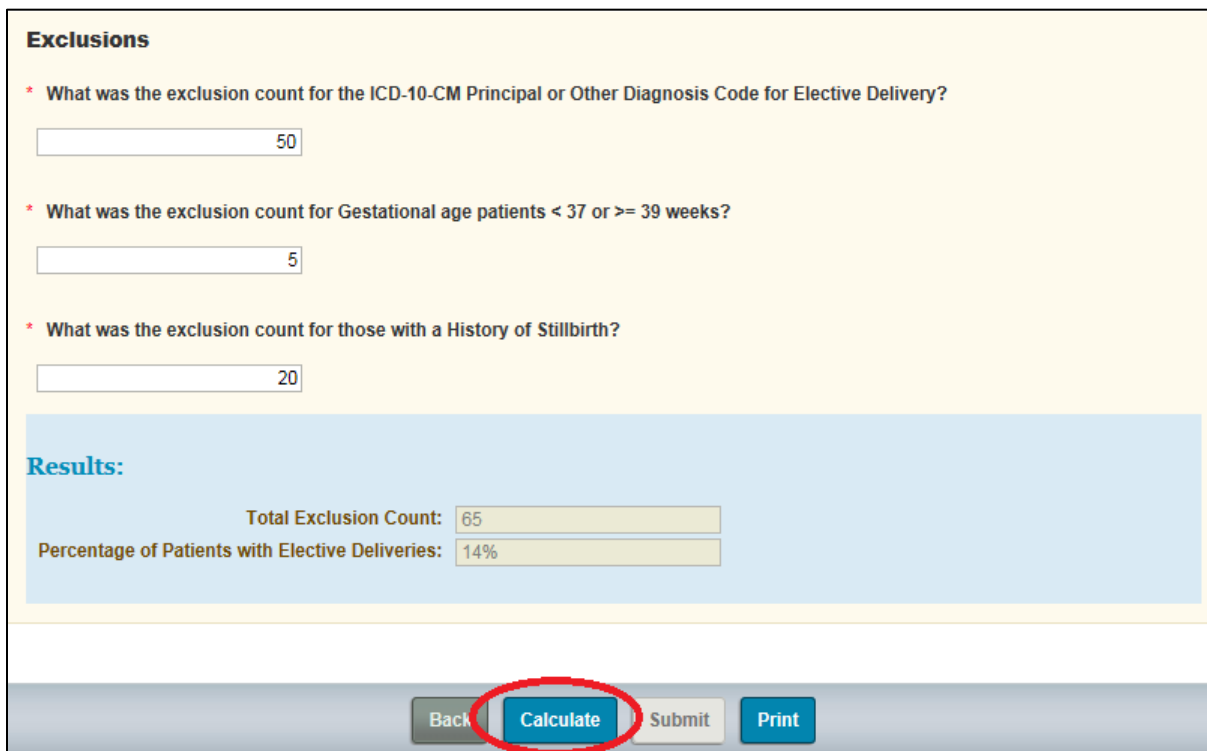
Results:

Total Exclusion Count:	65
Percentage of Patients with Elective Deliveries:	14%

Back   **Edit**   Submit   Print

f. **After entering the corrected data, select the Calculate button again. Please note that the previously calculated count and rate will continue to display until the Calculate button is clicked.**

NOTE: The measure numbers for the three available questions displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.

Exclusions

* What was the exclusion count for the ICD-10-CM Principal or Other Diagnosis Code for Elective Delivery?

50

* What was the exclusion count for Gestational age patients < 37 or >= 39 weeks?

5

* What was the exclusion count for those with a History of Stillbirth?
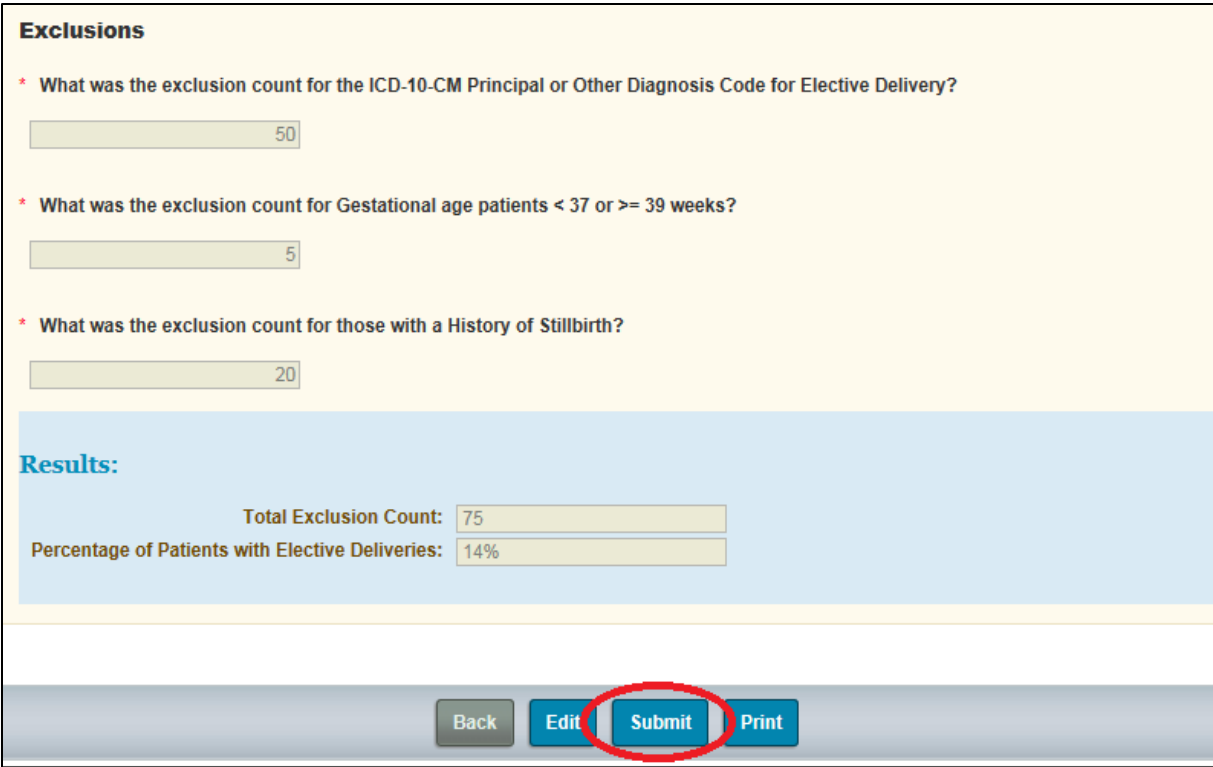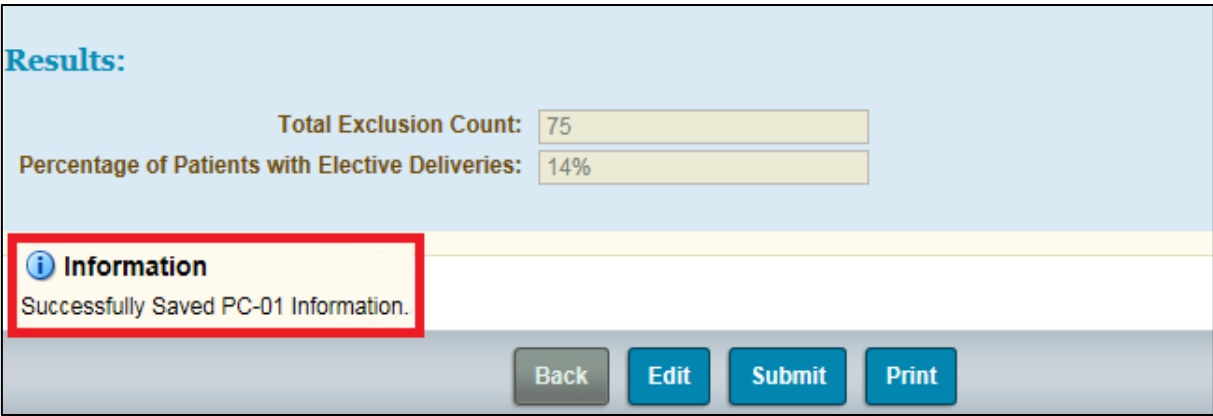
20

Results:

Total Exclusion Count:	65
Percentage of Patients with Elective Deliveries:	14%

Back   **Calculate**   Submit   Print

g. **Verify the *Results* section, which includes Total Exclusion Count and Percentage of Patients with Elective Deliveries. Once verified, select the Submit button.**

NOTE: The measure numbers displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.

h. **Locate the message, "Successfully Saved PC-01 Information," as depicted in the screenshot below. If you do not see this message, your data were not submitted successfully.**
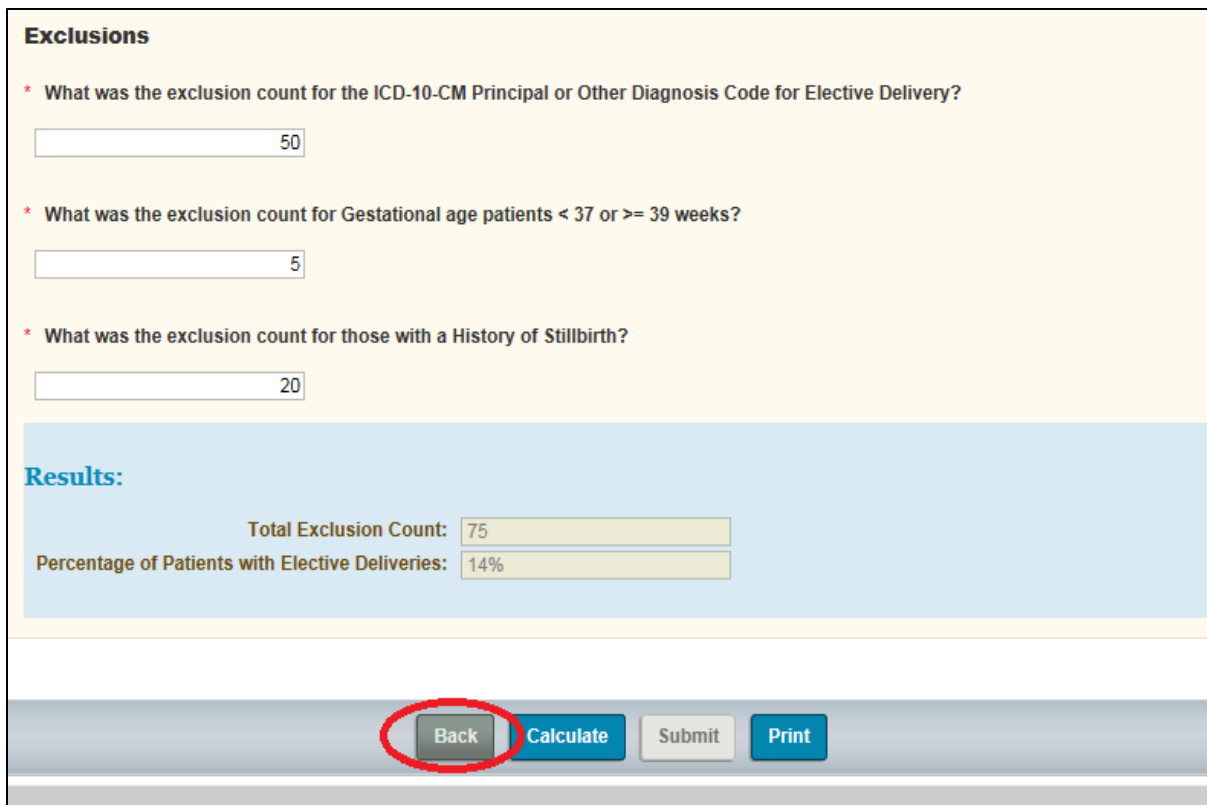
i. **You may then select the Back button.**

NOTE: The measure numbers displayed in the screenshot below are shown only as an example. Actual measure numbers will vary by provider.

Exclusions

* What was the exclusion count for the ICD-10-CM Principal or Other Diagnosis Code for Elective Delivery?

> 50

* What was the exclusion count for Gestational age patients < 37 or >= 39 weeks?

> 5

* What was the exclusion count for those with a History of Stillbirth?
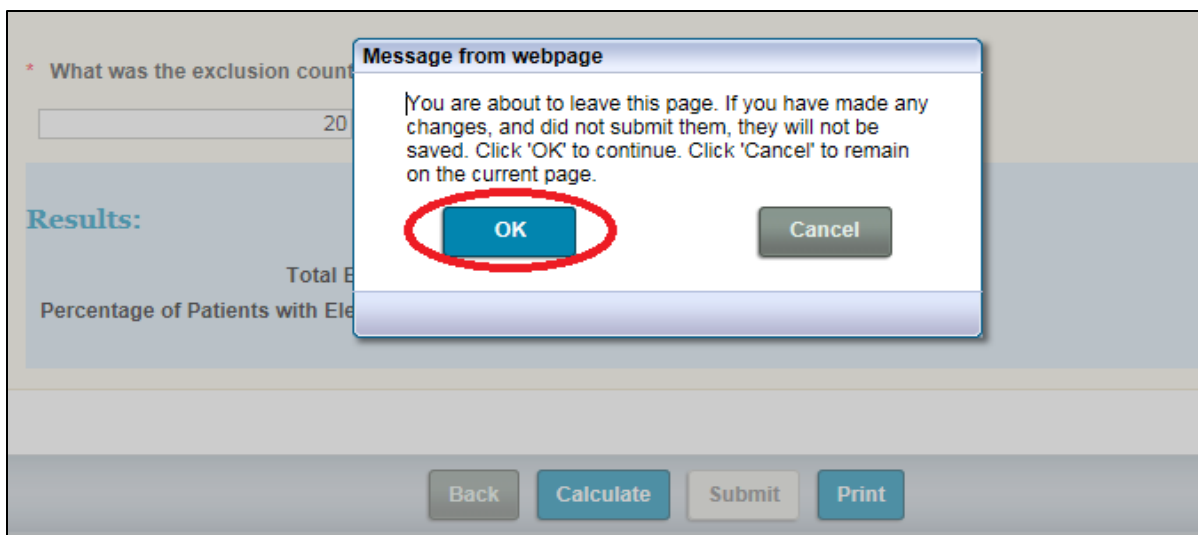
> 20

Results:

Total Exclusion Count:	75
Percentage of Patients with Elective Deliveries:	14%

[Back] [Calculate] [Submit] [Print]

j. **After selecting the Back button, a pop-up dialog box titled, "Message from webpage" will open. Select the OK button.**

NOTE: The measure number displayed in the screenshot below is shown only as an example. Actual measure numbers will vary by provider.

Message from webpage

You are about to leave this page. If you have made any changes, and did not submit them, they will not be saved. Click 'OK' to continue. Click 'Cancel' to remain on the current page.

[OK] [Cancel]

k. **Once the OK button has been selected, as depicted above, the summary screen should display the submission status of the PC-01 measure as Completed.**

Web-Based Measures | PY 2021

Use the horizontal scroll bar in the middle of this page to scroll completely to the **right** to view and edit the remaining data submissions.

Provider ID	PC-01
000000	Completed

HELPFUL TIP: If the PC-01 measure submission status does not display as Completed, your data **were not submitted successfully**. For further assistance on entering your PC-01 data, contact the Hospital Inpatient Quality Reporting (IQR) Program Support Team at (844) 472-4477 or (866) 800-8765, 8 a.m. to 8 p.m. Eastern Time, Monday through Friday.