

Welcome!

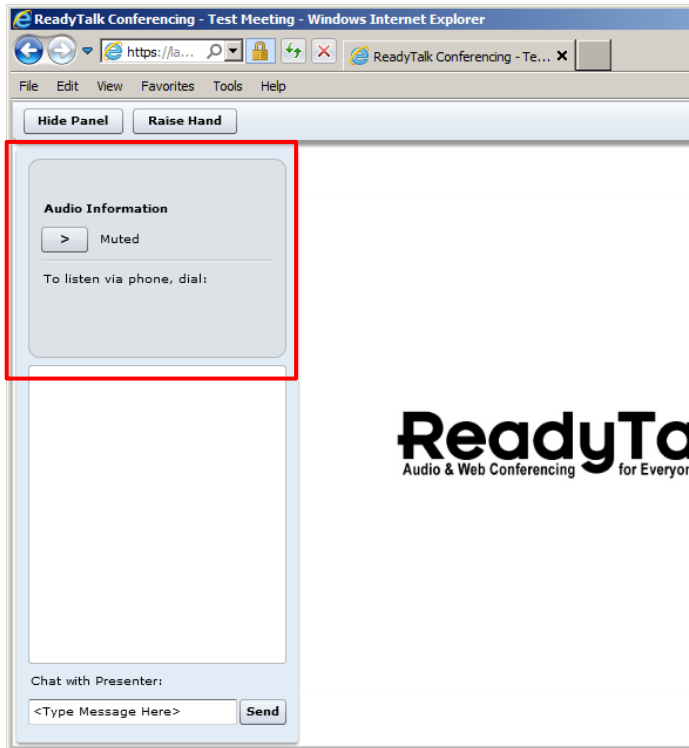
- **Audio for this event is available via ReadyTalk® Internet Streaming.**
- **No telephone line is required.**
- **Computer speakers or headphones are necessary to listen to streaming audio.**
- **Limited dial-in lines are available. Please send a chat message if needed.**
- **This event is being recorded.**



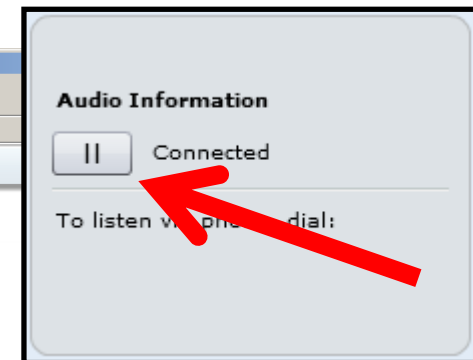
Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stop?

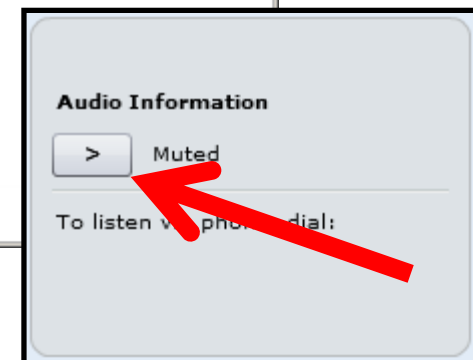
- Click Pause button
- Wait 5 seconds
- Click Play button



Location of Audio Controls



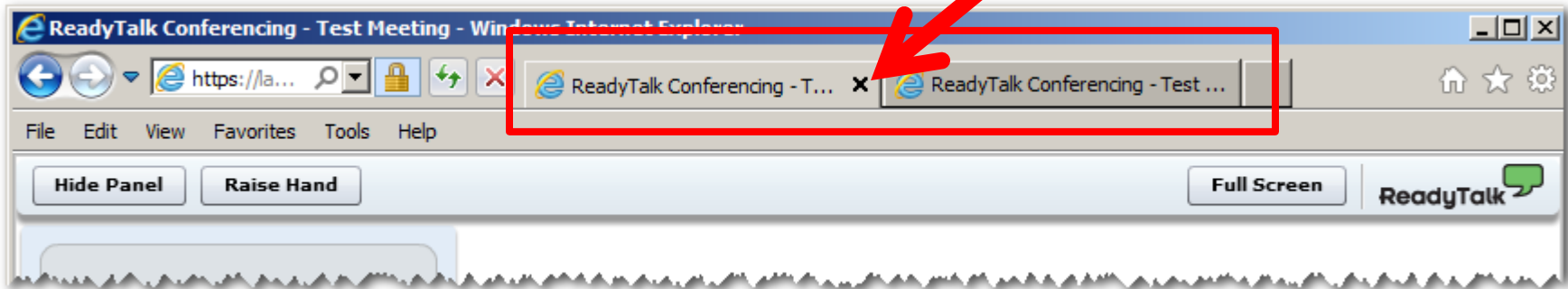
Step 1



Step 2

Troubleshooting Echo

- Hear a bad echo on the call?
- Echo is usually caused by multiple connections to a single event.
- Close all but one browser/tab and the echo will clear up.



Example of Two Connections to Same Event

Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



The screenshot shows a web browser window with the CMS logo at the top. The main content area displays a presentation slide with the following text:

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Specifications Manual, Version 4.4a,
Changes & Hospital VBP Program
Improvement Series: MSPB

November 18, 2014, 10 a.m. & 2 p.m. ET

*Candace Jackson, RN, Hospital
IQR Support Contract Lead*

*Donna Isgett, Sr. Vice President
Corporate Quality and Safety
McLeod Medical Center*

*Cindy Cullen, Mathematica
Policy Research*

*Bethany Wheeler, BS
Hospital VBP Program Support
Contract Lead*

*Amanda Molski, Quality
Coordinator Memorial Hospital
Sweetwater County*

At the bottom left, there is a chat window titled "Chat with Presenter" with a text input field and a "Send" button. A yellow arrow points to this chat window.



IPFQR Program Public Reporting and Fiscal Year 2017 Data Review

Evette Robinson, MPH

Project Lead, Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program
Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)

October 13, 2016

Purpose

This presentation summarizes the steps needed to access and review the December 2016 *Hospital Compare* Preview Reports and provides a review of the FY 2017 IPFQR Program Measure and Non-Measure results.

Learning Objectives

At the conclusion of this presentation, attendees will be able to:

- Access and interpret data displayed in the *Hospital Compare* Preview Report
- Understand the FY 2017 Measure and Non-Measure results for the IPFQR Program

Acronyms

APU	Annual Payment Update
CCN	CMS Certification Number
CY	Calendar Year
CMS	Centers for Medicare & Medicaid Services
EHR	Electronic Health Record
FFS	Fee-for-Service
FR	Final Rule
FUH	Follow-Up after Hospitalization for Mental Illness Measure
FY	Fiscal Year
HBIPS	Hospital-Based Inpatient Psychiatric Services
HIQR	Hospital Inpatient Quality Reporting
HISP	Health Information Service Provider
IMM-2	Influenza Vaccination Status Measure
IPPS	Inpatient Prospective Payment System
IPFQR	Inpatient Psychiatric Facility Quality Reporting
NHSN	National Healthcare Safety Network
SA	Security Administrator
SUB	Substance Use
TOB	Tobacco Use

IPFQR Program Public Reporting and Fiscal Year 2017
Data Review

PUBLIC REPORTING REVIEW

Public Reporting Background

- Section 1886(s)(4)(E) of the Social Security Act requires the Secretary to establish procedures for making the data submitted under the IPFQR Program available to the public
- Such procedures shall ensure that an IPF has the opportunity to review the data that are to be made public with respect to the psychiatric hospital or unit prior to such data being made public
- Data collected will be displayed on a CMS website.
- IPPS Final Rule, from August 19, 2013, finalized requirements for the FY 2014 payment determination and subsequent years

Preview Report Access

- *Hospital Compare* Preview Period runs **October 8 through November 6, 2016**
- *Hospital Compare* Preview report includes IPFQR Program measure data reported from **January 1, 2015 through March 31, 2016**
- The IPFQR *Hospital Compare* Preview Report Quick Reference Guide and the new *Hospital Compare* Preview Report Help Guide: Inpatient Psychiatric Facility Quality Reporting Program are available on the [IPF Public Reporting of Data](#) webpage on QualityNet.org and on the [IPFQR Program Resources and Tools](#) webpage on the Quality Reporting Center website.

Quick Reference Guide

December 2016 Release – Preview Period October 8 through November 6, 2016 Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program Hospital Compare Preview Report Quick Reference Guide

Preview Report Access

Preview Period

Preview Reports are available to participating IPFs via the *QualityNet Secure Portal* **October 8 through November 6, 2016.**

To access Preview Reports:

1. Navigate to the *QualityNet* website at <https://www.qualitynet.org>.
2. Select **Login** under the *Log in to QualityNet Secure Portal* header.
3. Enter your *QualityNet* User ID, Password, and Security Code. Then, select **Submit**.
4. Read the Terms and Conditions statement and select **I Accept** to proceed

To run Preview Reports, select the following:

1. **Run Reports** from the *My Reports* drop-down
2. **IPFQR** from the *Report Program* drop-down
3. **Public Reporting – Preview Reports** from the list in the *Report Category* drop-down
4. **View Reports** where the selected report will display under *Report Name*
5. **Public Reporting – Preview Reports** under *Report Name*
6. **Run Reports**

To View the Report:

Select the **Search Reports** tab. The report requested will display, as well as the report status. A green check mark will display in the *Status* column when the report is complete. Once complete, the report can be viewed or downloaded.

Preview Report Content

HBIPS Measures

Data reported for first through fourth quarters of 2015

HBIPS-2: Hours of Physical Restraint Use

HBIPS-3: Hours of Seclusion Use

HBIPS-5: Patients Discharged on Multiple Antipsychotic Medications with Appropriate Justification

HBIPS-6: Post Discharge Continuing Care Plan Created

HBIPS-7: Post Discharge Continuing Care Plan Transmitted to Next Level of Care Provider Upon Discharge

Follow up Measures

Data reported for third quarter 2014 through second quarter 2015

FUH-30: Follow-up after hospitalization for Mental Illness, 30-Days

FUH-7: Follow-up after Hospitalization for Mental Illness, 7-Days

Substance Abuse Measure

Data reported for first through fourth quarters of 2015

SUB-1: Alcohol Use Screening

Tobacco Use Measures

Data reported for first through fourth quarters of 2015

TOB-1: Tobacco Use Screening

TOB-2: Tobacco Use Treatment Provided or Offered and the subset

TOB-2a: Tobacco Use Treatment (during hospital stay)

Experience of Care Measure

Data reported for first through fourth quarters of 2015

IPFQR-PEoC: Assessment of Patient Experience of Care

Electronic Health Record Use

Data reported for first through fourth quarters of 2015

IPFQR-EHR: Use of an Electronic Health Record

Flu Season Measures

Data reported for fourth quarter 2015 through first quarter 2016

IMM-2: Influenza Vaccination

HCP FluVac: Influenza Vaccination Coverage Among Healthcare Personnel

Footnotes

FN 1: The number of cases/patients is too few to report.

NOTE: When this footnote is applied, data will display on the preview report; however, Hospital Compare will display 'Not Available' with Footnote 1.

FN 4: Data suppressed by CMS for one or more quarters.

FN 5: Results are not available for this reporting period.

FN 7: No cases met the criteria for this measure.

Questions regarding the IPFQR Preview Report or the IPFQR Program may be directed to the IPF Support Contractor.

IPFQualityReporting@HCOIS.org
(866) 800-8765, Monday-Friday, 8 a.m.–3 p.m. ET

Hospital Compare Preview Report Help Guide

Hospital Compare Preview Report Help Guide

*Inpatient Psychiatric Facility
Quality Reporting Program*

The target audience for this publication is hospitals participating in the Inpatient Psychiatric Facility Quality Reporting Program. The document scope is limited to instructions for hospitals on how to access and interpret the data provided on the Preview Report prior to the publication of data on *Hospital Compare*.

October 2016 Preview/December 2016 Hospital Compare Release



Highlights of the help guide include:

- An overview of the *Hospital Compare* Preview Report
- Steps to access Preview Reports
- Preview Report Details by Measure
- Helpful Resources

How to Access *Hospital Compare* Preview Reports

1. Access the public website for *QualityNet* at: www.qualitynet.org.

QualityNet

Log in to QualityNet Secure Portal (formerly MyQualityNet)

Search

Log In

Home My QualityNet Help

Hospitals - Inpatient Hospitals - Outpatient Physician Offices Ambulatory Surgical Centers PPS-Exempt Cancer Hospitals ESRD Facilities Inpatient Psychiatric Facilities Quality Improvement

QualityNet Registration

- Hospitals - Inpatient
- Hospitals - Outpatient
- Physician Offices

QualityNet News

[More News >](#)

[Providers selected for Hospital OQR Program validation for CY 2017](#)

The Centers for Medicare & Medicaid Services (CMS) Hospital Outpatient Quality Reporting (OQR)

Log in to QualityNet Secure Portal

Login

2. Select **Login** under the “Log in to QualityNet Secure Portal” header located in the sidebar on the right-hand side of the page.

How to Access *Hospital Compare* Preview Reports

Choose Your QualityNet Destination

Please select your primary quality program to reach the right log in screen for your QualityNet portal.

Secure File Transfer

Select your primary quality program:

End-Stage Renal Disease Quality Incentive Program

Ambulatory Surgical Center Quality Reporting Program

PPS-Exempt Cancer Hospital Quality Reporting Program

Inpatient Hospital Quality Reporting Program

Inpatient Psychiatric Quality Reporting Program

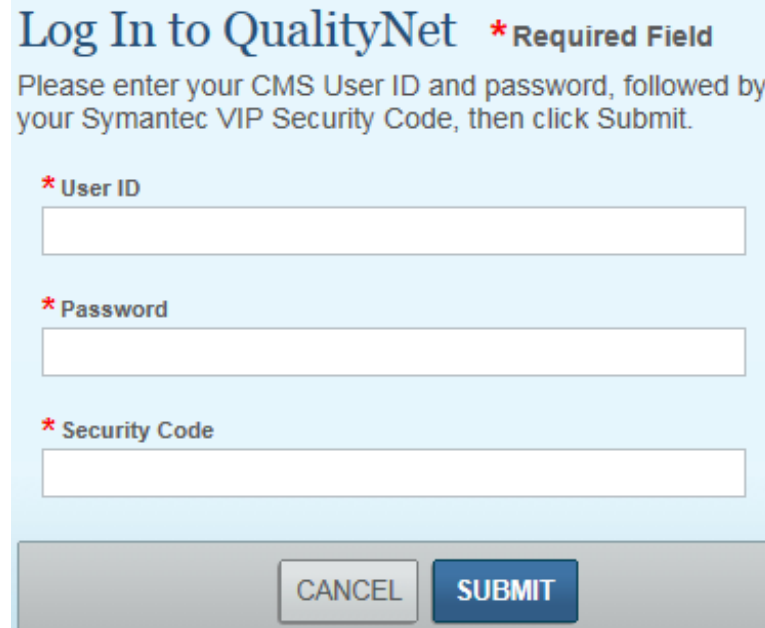
Outpatient Hospital Quality Reporting Program

Physicians Quality Reporting System / eRx

Quality Improvement Organizations

3. Select **Inpatient Quality Reporting Program** under “Choose Your QualityNet Destination.”

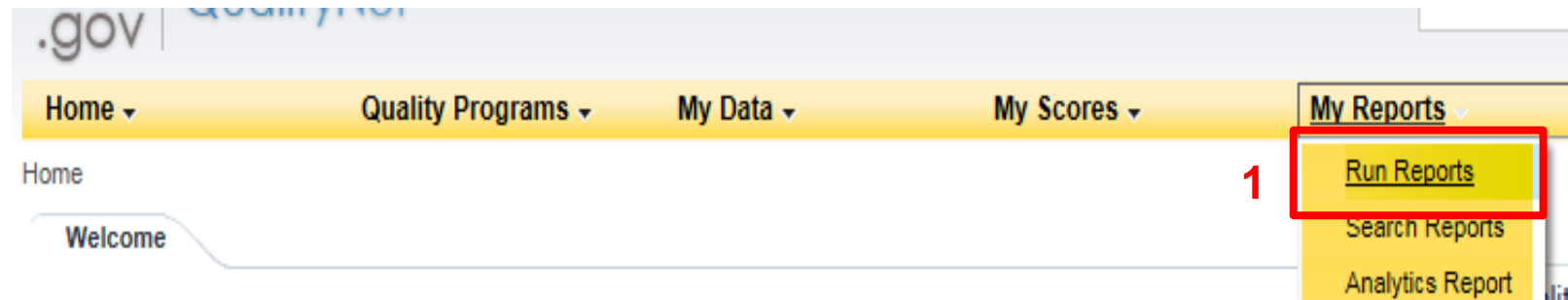
How to Access *Hospital Compare* Preview Reports



The screenshot shows a login form titled "Log In to QualityNet" with a red asterisk and the text "* Required Field". Below the title is a instruction: "Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit." There are three input fields: "* User ID", "* Password", and "* Security Code". At the bottom of the form are two buttons: "CANCEL" and "SUBMIT".

4. Enter your *QualityNet* User ID, Password, and Security Code and select **Submit**.
5. Read the Terms and Conditions statement and select **I Accept** to proceed.

Run the Preview Report



1. Select **Run Reports** from the *My Reports* drop-down.

Start Reports

This reporting portlet allows you to run and access reports on quality program data to which you are granted access.

2

I'd Like To...

Run Report(s)

Search Report(s)

View Favorite Reports

2. Click **Run Report(s)** on the “I'd Like To...” box.

Run the Preview Report

Select:

3. **IPFQR** from the *Report Program* drop-down
4. **Public Reporting – Preview Reports** from the List in the *Report Category* drop-down
5. **View Reports** and the selected report will display under *Report Name* (not pictured)
6. **Public Reporting – Preview Reports** under *Report Name*
7. **Run Reports**

CMS .gov | QualityNet

Home ▾ Quality Programs ▾ My Data ▾ My Scores ▾ My Reports

My Reports > Run Reports

Start Run Report(s) Search Report(s) Favorites

Select Program, Category and Report Report Parameters Confirmation

Select Program, Category and Report
The available reports are grouped by program and category combination. If you have access to a single program, your program has a single value, then it too will be pre-selected. Choose a program, then category, and then click on VIEW REPORTS to run from the table below by clicking on its name.

Report Program
IPFQR

Report Category
Public Reporting - Preview Reports

VIEW REPORTS

Search Report 3 4 5

REPORT NAME	REPORT DESCRIPTION
No Reports are available.	

Search Report

The screenshot displays a software interface with a top navigation bar containing four tabs: 'Start', 'Run Report(s)', 'Search Report(s)', and 'Favorites'. The 'Search Report(s)' tab is highlighted with a red border. Below the navigation bar is a progress bar with three steps: 'Select Program, Category and Report', 'Report Parameters', and 'Confirmation'. The 'Confirmation' step is currently active. The main content area features a 'Report Submitted' heading followed by a message: 'Thank you. Your report request has been submitted for processing. Processing time may vary due to the number of current requested reports. To run the same report with different parameters, click RUN SAME REPORT. To run a new report, click RUN NEW REPORT. To search and view submitted reports, click SEARCH REPORTS. To make this report a Favorite, click SEARCH REPORTS. To manage your Favorites, click the Favorites tab.' At the bottom of the interface, there are four buttons: 'CANCEL', 'RUN SAME REPORT', 'RUN NEW REPORT', and 'SEARCH REPORTS'. The 'SEARCH REPORTS' button is highlighted with a red border.

After the report request is submitted, select the **Search Reports** button OR select the **Search Report(s)** tab.

View the Preview Report

The screenshot shows a web application interface with a navigation bar containing 'Start', 'Run Report(s)', 'Search Report(s)', and 'Favorites'. Below the navigation bar is a 'Search Reports' section with a search bar and a checkbox for 'Search Saved Reports'. There are also date pickers for 'Requested Date' (01/08/2015 and 07/07/2015), a 'Show Reports' dropdown menu set to 'ALL', and buttons for 'RESET', 'SEARCH', and 'REFRESH REPORT STATUS'.

STATUS	DATE REQUESTED	REPORT NAME	LAST DOWNLOADED	SIZE (MB)	ACTION
✓	07/07/2015 11:25:10	Public Reporting – Preview Reports		0.0097	
✓	06/02/2015 13:50:06	Public Reporting – Preview Reports		0.0073	

Annotations: A red box highlights the 'STATUS' column header. Two blue boxes with arrows point to the 'View' and 'Download' icons in the 'ACTION' column of the first row.

The report requested will display, as well as the report status.

- A green check mark will display in the *Status* column when the report is complete.
- Once complete, the report can be viewed or downloaded.

Preview Report Content

Report Run Date: 09/23/2016

Header

Hospital Compare Preview Report: Improving Care Through Information
Inpatient Psychiatric Facility Quality Reporting Program
 Reporting Period: First Quarter 2015 through Fourth Quarter 2015 Discharges

CCN - HOSPITAL NAME

Address: _____
 City, State, ZIP: _____
 Phone Number: _____
 County Name: _____

Web-Based Measures Set IPFQR-HBIPS	Facility			State			National		
	Numerator	Denominator	Rate Per 1000 Patient Hours	Numerator	Denominator	Rate Per 1000 Patient Hours	Numerator	Denominator	Rate Per 1000 Patient Hours
HBIPS-2: Hours of physical-restraint use	27	56	20.09	337	524	26.80	1436364.0 2	1198562	49.93
HBIPS-3: Hours of seclusion	7	12	24.31	97	403	10.03	4704687.5 3	2226900	88.03
Measure Description	Numerator	Denominator	% of Total	Numerator	Denominator	% of Total	Numerator	Denominator	% of Total
HBIPS-5: Patients discharged on multiple antipsychotic medications with appropriate justification	3(1)	56(1)	5.36%(1)	75	925	8.11%	32142	34205	93.97%
HBIPS-6: Post-discharge continuing care plan created	47	55	85.45%	262	277	94.58%	114677	266330	43.06%
HBIPS-7: Post-discharge continuing care plan transmitted to the next level of care provider upon discharge	123	125	98.40%	322	338	95.27%	101927	103406	98.57%

Footnote Legend

1. The number of cases/patients is too few to report.
4. Data suppressed by CMS for one or more quarters.
5. Results are not available for this reporting period.
7. No cases met the criteria for this measure.

Footer

Preview Report Content

Substance Use		Facility			State			National		
Measure ID	Measure Description	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage
SUB-1	Alcohol Use Screening	93	93	100.00%	397	540	73.52%	36216	116200	31.17%
Tobacco Use		Facility			State			National		
Measure ID	Measure Description	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage
TOB-1	Tobacco Use Screening	73	75	97.33%	162	186	87.10%	56546	167022	33.86%
TOB-2	Tobacco Use Treatment Provided or Offered	41	78	52.56%	126	225	56.00%	17328	34691	49.95%
TOB-2a	Tobacco Use Treatment (during the hospital stay)	23	78	29.49%	63	225	28.00%	11275	34691	32.50%

Assessment of Patient Experience of Care		Facility	State			National		
Measure ID	Measure Description	Response	Response	Facility Count	Percentage	Response	Facility Count	Percentage
IPFQR-PEoC	Did your facility routinely assess patient experience of care using a standardized collection protocol and a structured instrument?	Yes	Yes	3	37.50%	Yes	15	71.43%
			No	5	62.50%	No	6	28.57%

Use of an Electronic Health Record (EHR)		Facility	State			National		
Measure ID	Measure Description	Response	Response	Facility Count	Percentage	Response	Facility Count	Percentage
IPFQR-EHR	Please select which of the following statements best describes your facility's highest level typical use of an EHR System (excluding the billing system) during the reporting period:	Non-Certified EHR Technology	Paper or Other Form	3	42.86%	Paper or Other Form	7	36.84%
			Non-Certified EHR Technology	2	28.57%	Non-Certified EHR Technology	5	26.32%
			Certified EHR Technology	2	28.57%	Certified EHR Technology	7	36.84%
	Did the transfers of health information at times of transitions in care include the	No	Yes	4	57.14%	Yes	13	68.42%
	exchange of interoperable health information with a health information service provider (HISP)?		No	3	42.86%	No	6	31.58%

Preview Report Content

Follow-Up After Hospitalization for Mental Illness		Facility			State			National		
Measure ID	Measure Description	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage
FUH-30	Follow-up after Hospitalization for Mental Illness 30-Days	N/A(5)	N/A(5)	N/A(5)	14	33	42.42%	1734	2798	61.97%
FUH-7	Follow-up after Hospitalization for Mental Illness 7-Days	N/A(5)	N/A(5)	N/A(5)	8	33	24.24%	1017	2798	36.35%

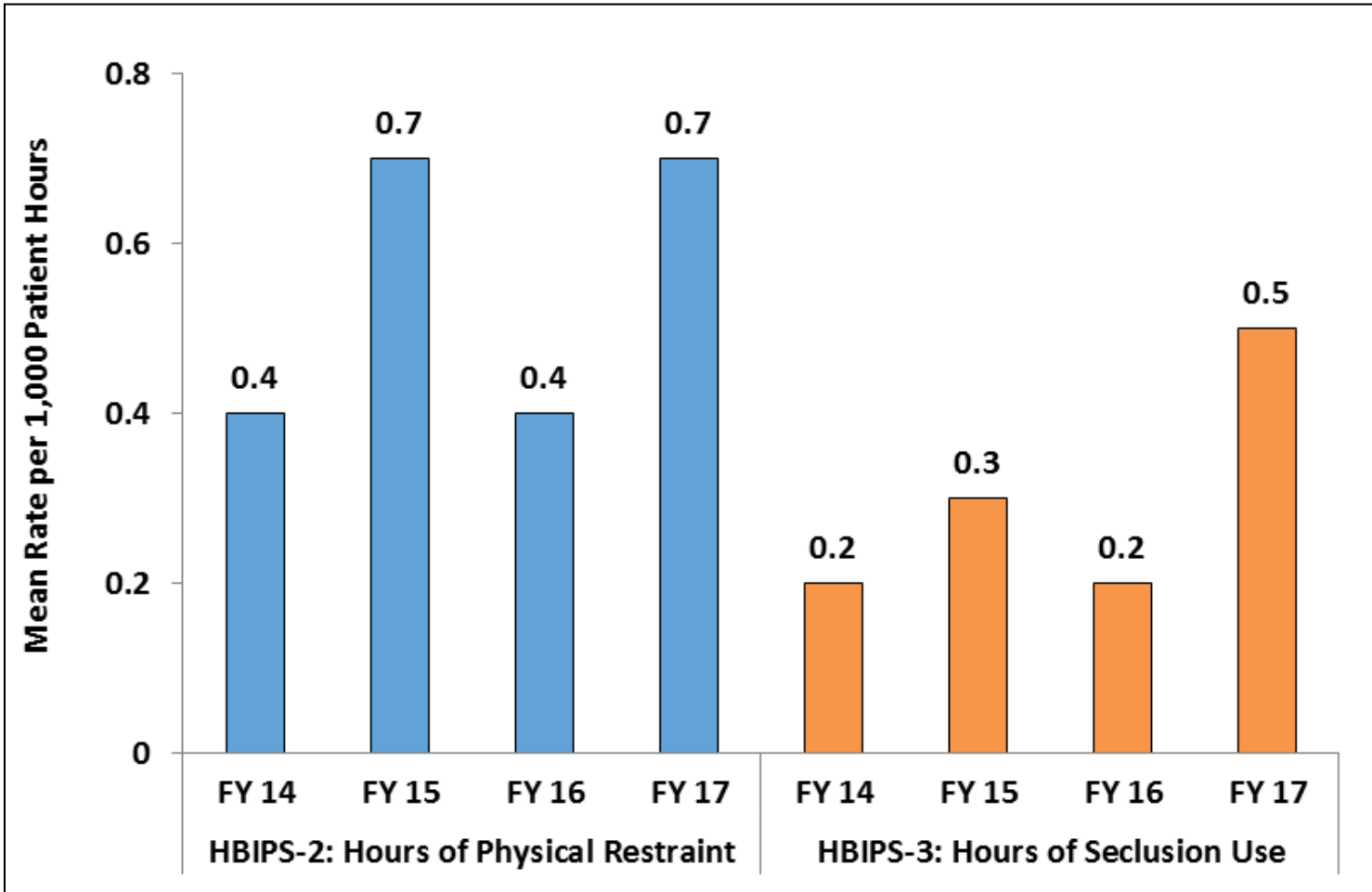
Flu Season Measures		Facility			State			National		
Measure ID	Measure Description	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage	Numerator	Denominator	Percentage
IPFQR-IMM-2	Influenza Immunization	7(1)	8(1)	87.50%(1)	159	184	86.41%	144518	189837	76.13%
IPFQR-HCP-FluVac	Healthcare Personnel Influenza Vaccination	15	44	34.00%	103414	136152	76.00%	3199522	3754090	85.00%

IPFQR Program Public Reporting and Fiscal Year 2017
Data Review

FY 2017 MEASURE AND NON-MEASURE RESULTS

HBIPS-2 and HBIPS-3

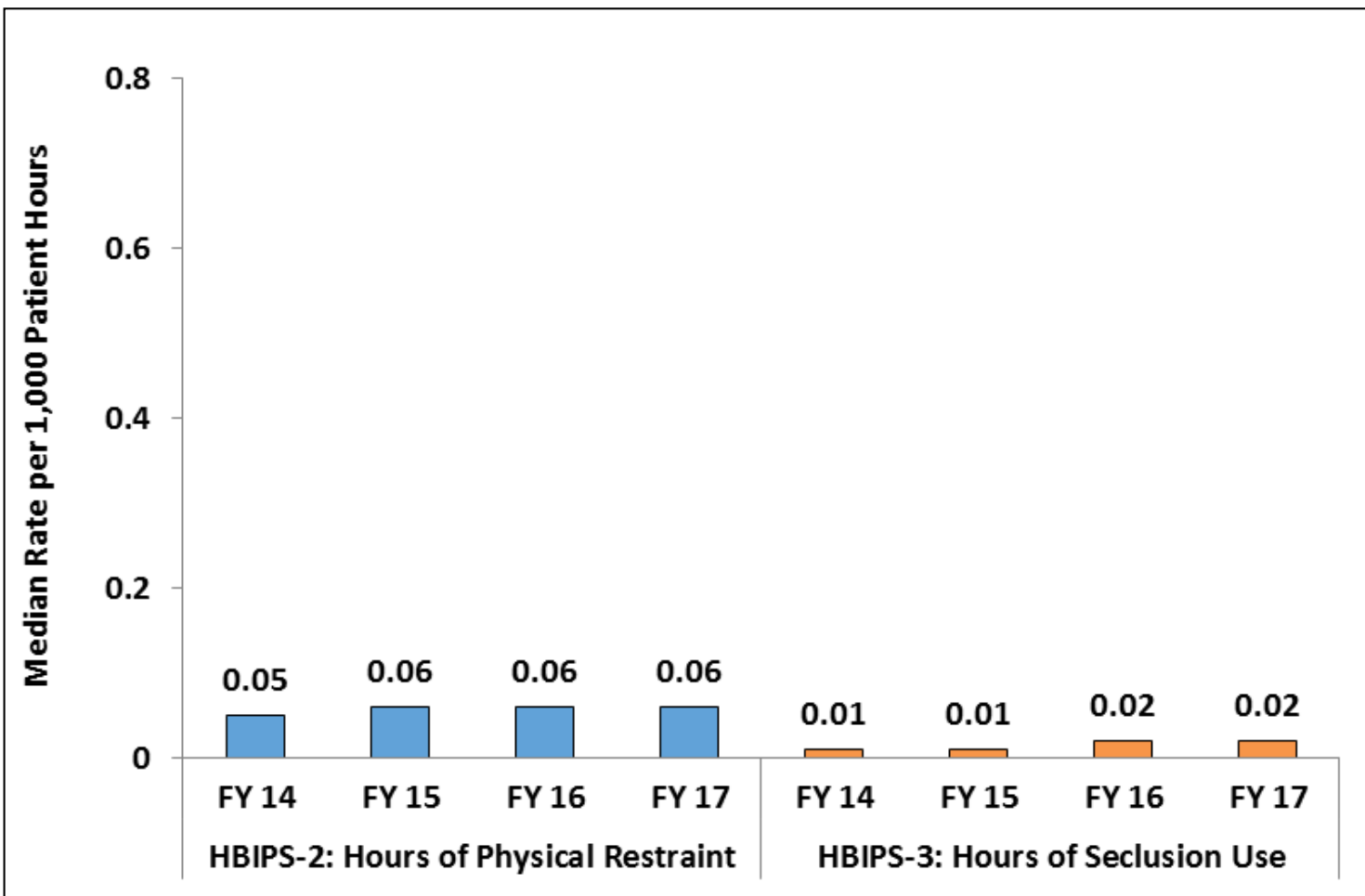
Measure Results: Mean Values



NOTE: Lower values for the HBIPS-2 and HBIPS-3 measures indicate better performance.

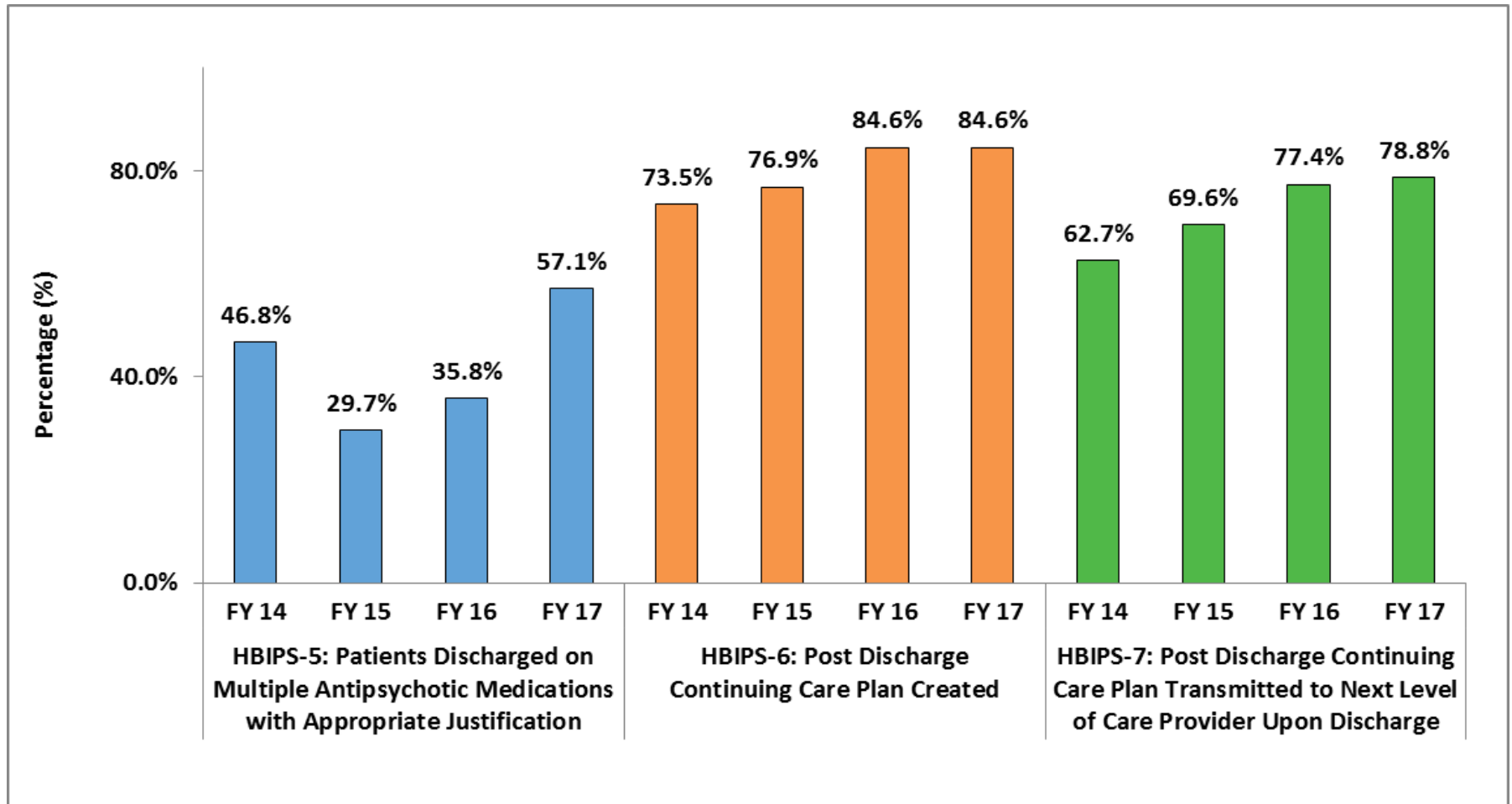
HBIPS-2 and HBIPS-3

Measure Results: Median Values



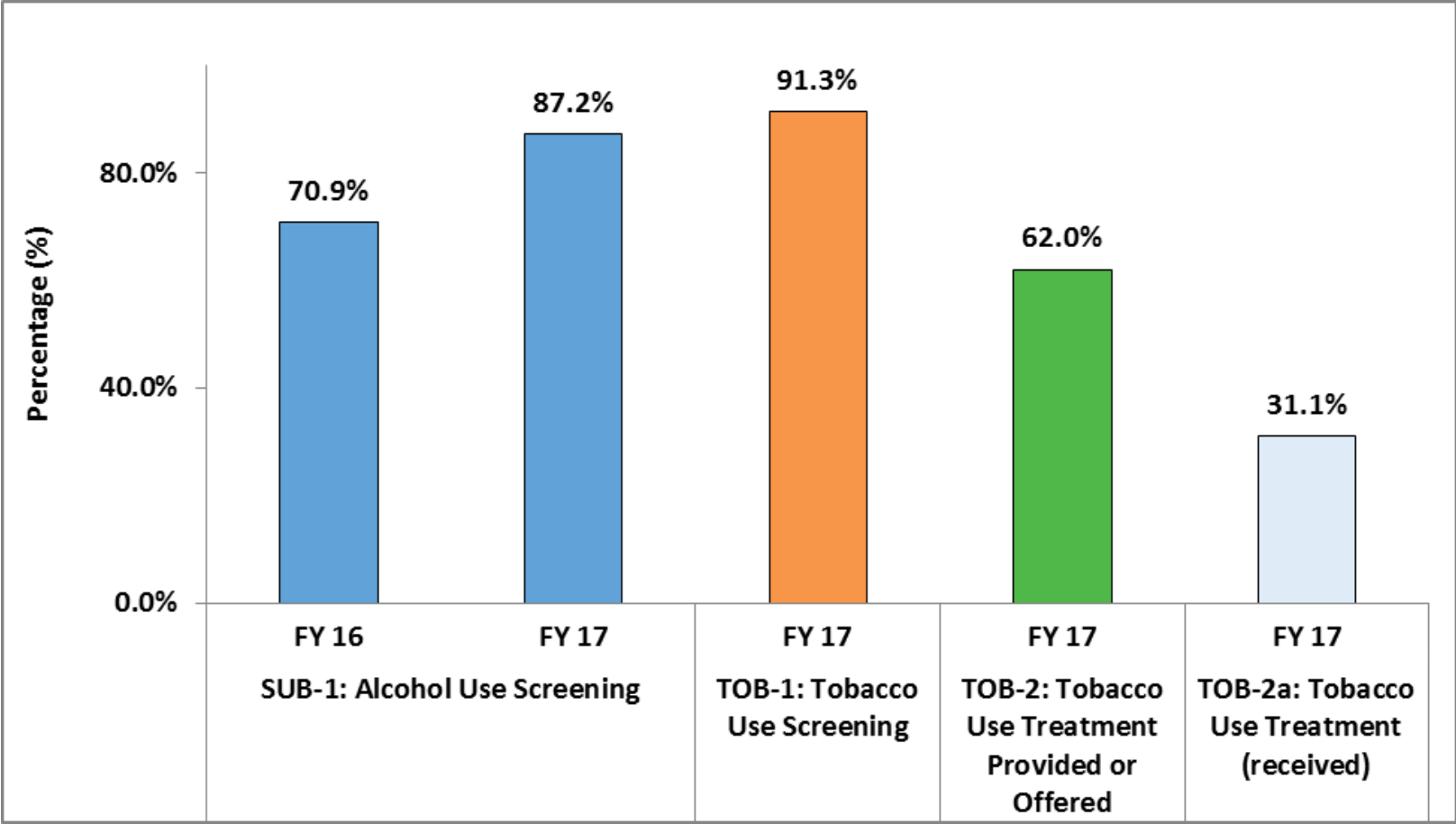
NOTE: Lower values for the HBIPS-2 and HBIPS-3 measures indicate better performance.

HBIPS-5 through -7 Measure Results



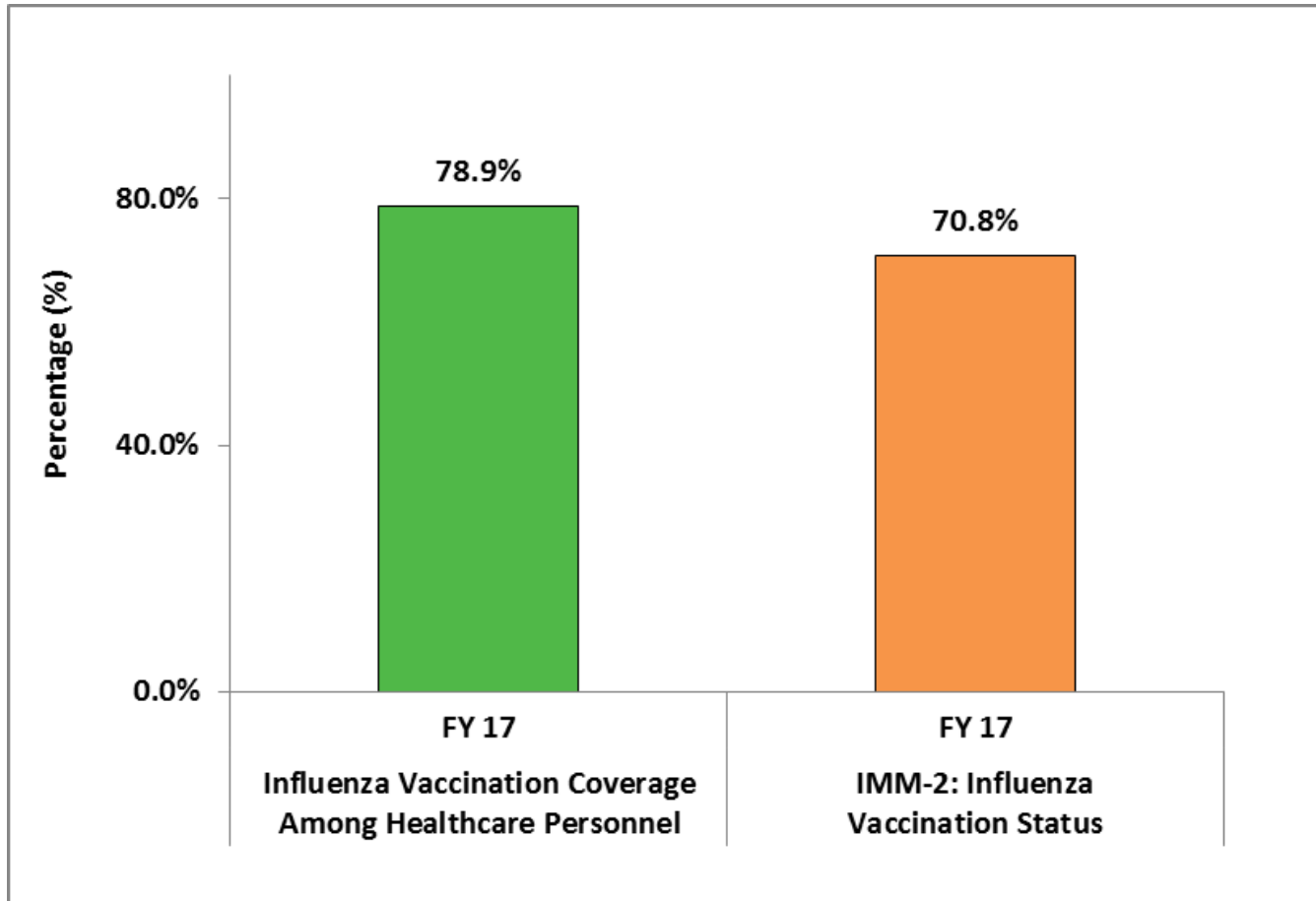
NOTE: Higher percentages for the HBIPS-5, -6, and -7 measures indicate better performance.

SUB-1, TOB-1, TOB-2 and the subset TOB-2a Measure Results



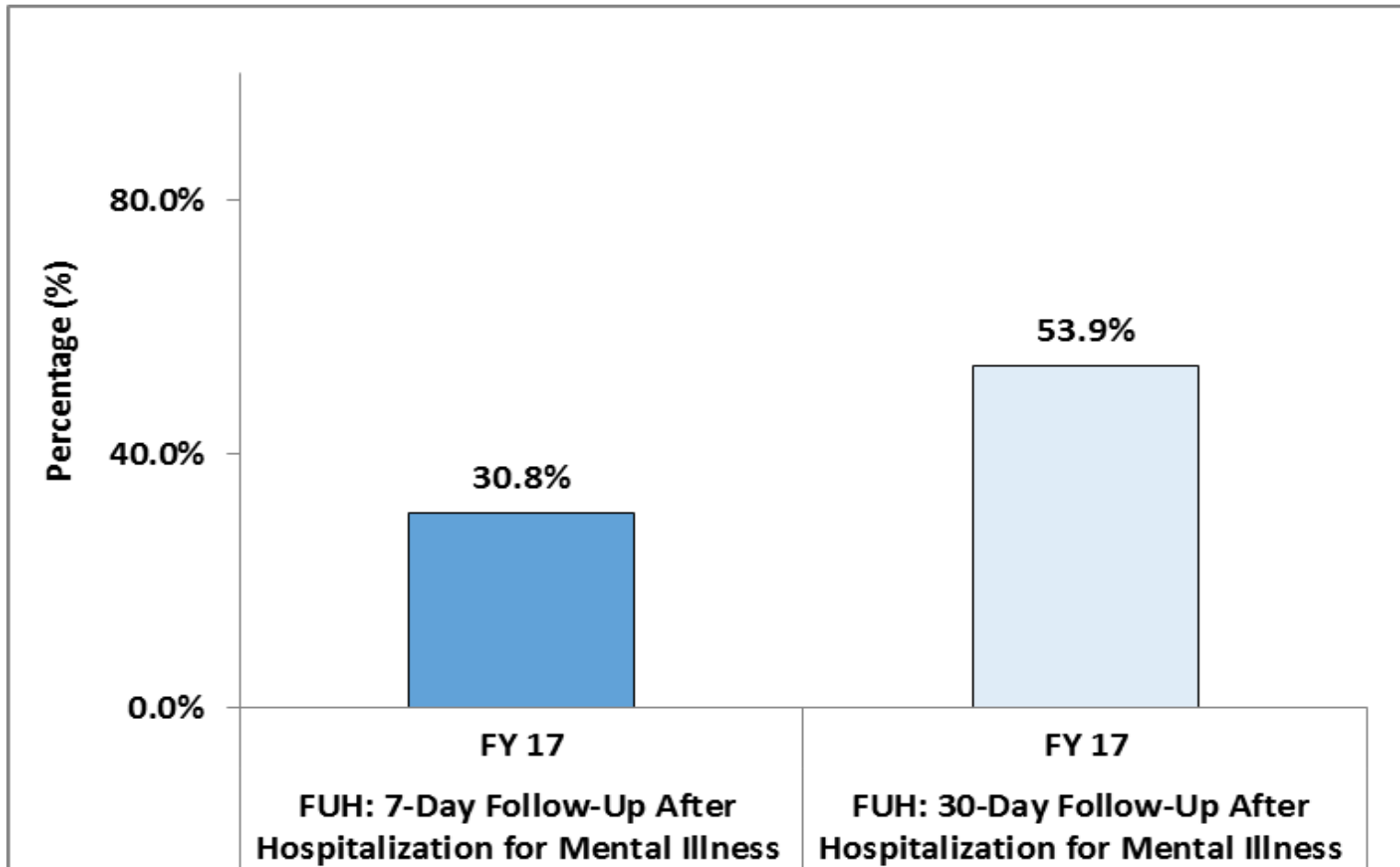
NOTE: Higher percentages for the SUB and TOB measures indicate better performance.

Flu Season Measure Results



NOTE: Higher percentages for the influenza immunization measures indicate better performance.

FUH Measure Results

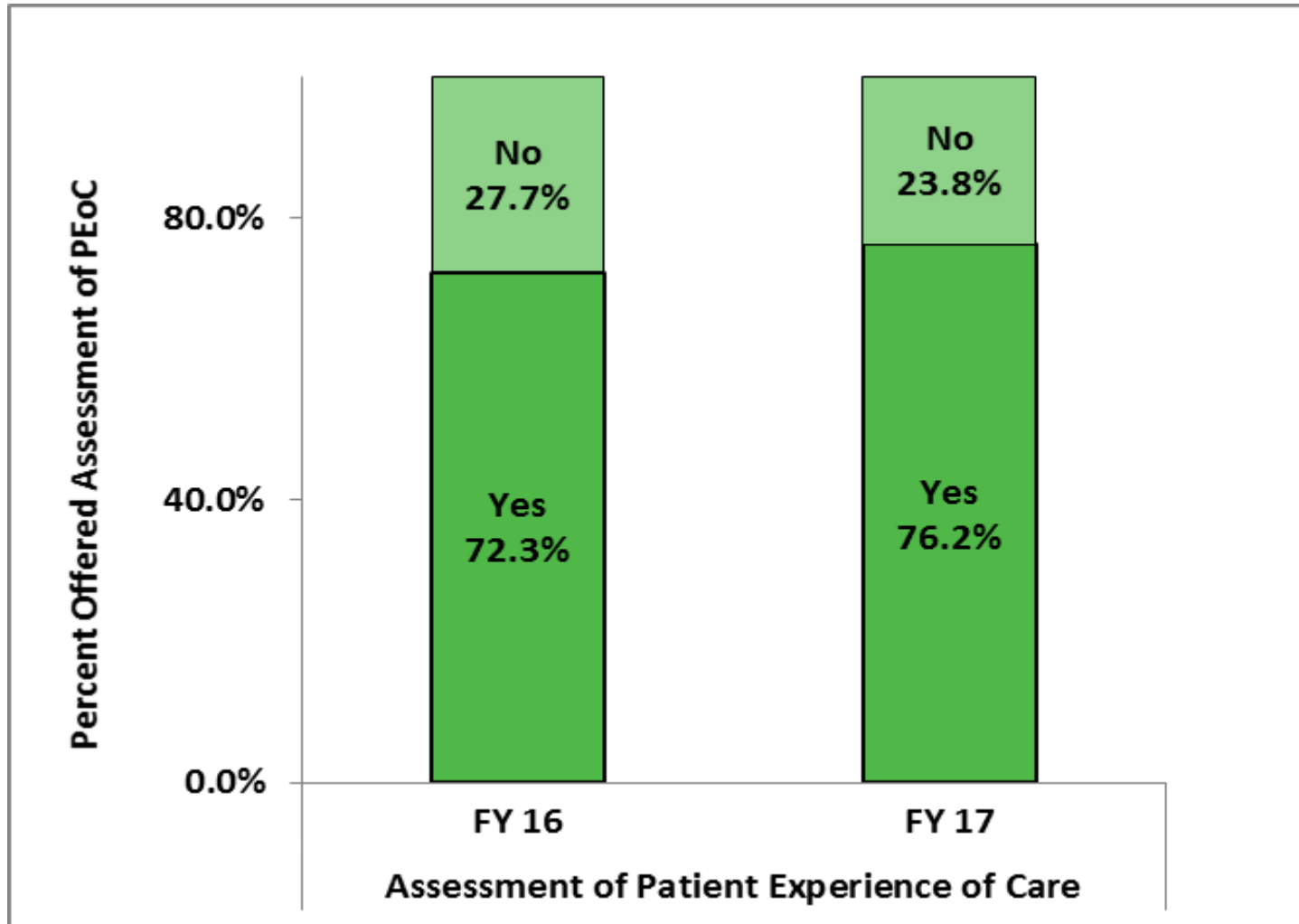


NOTE: Higher percentages for the FUH measure indicate better performance.

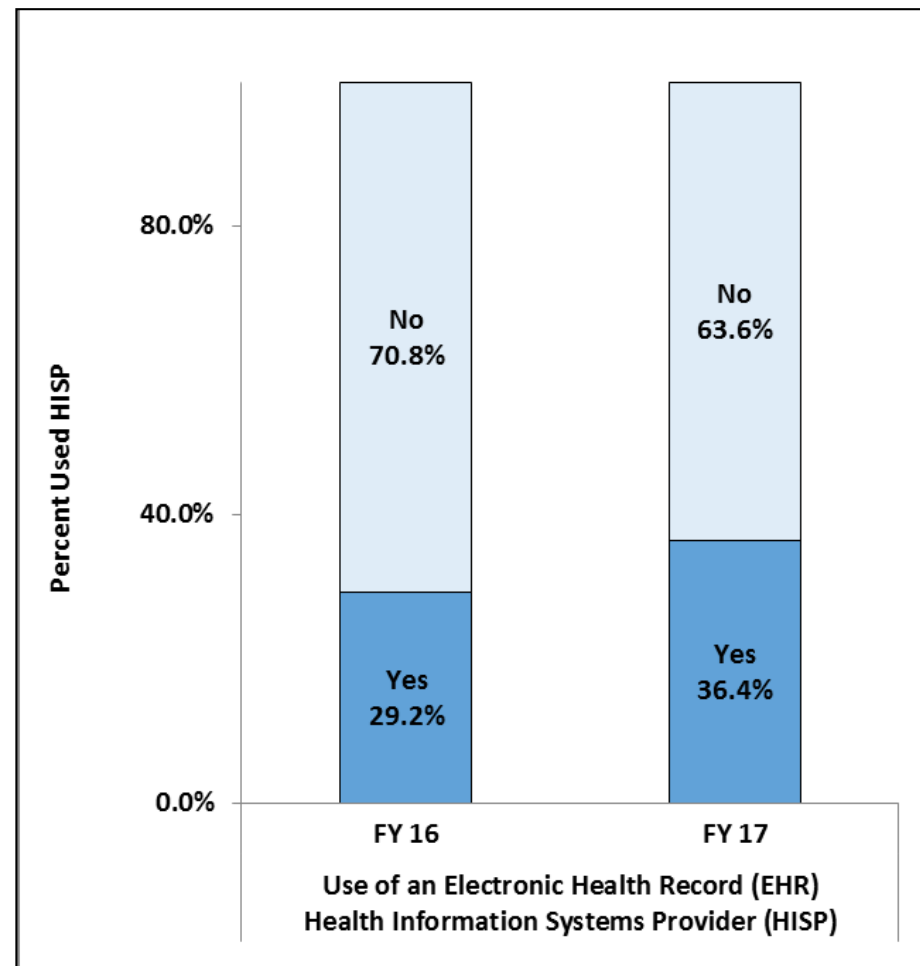
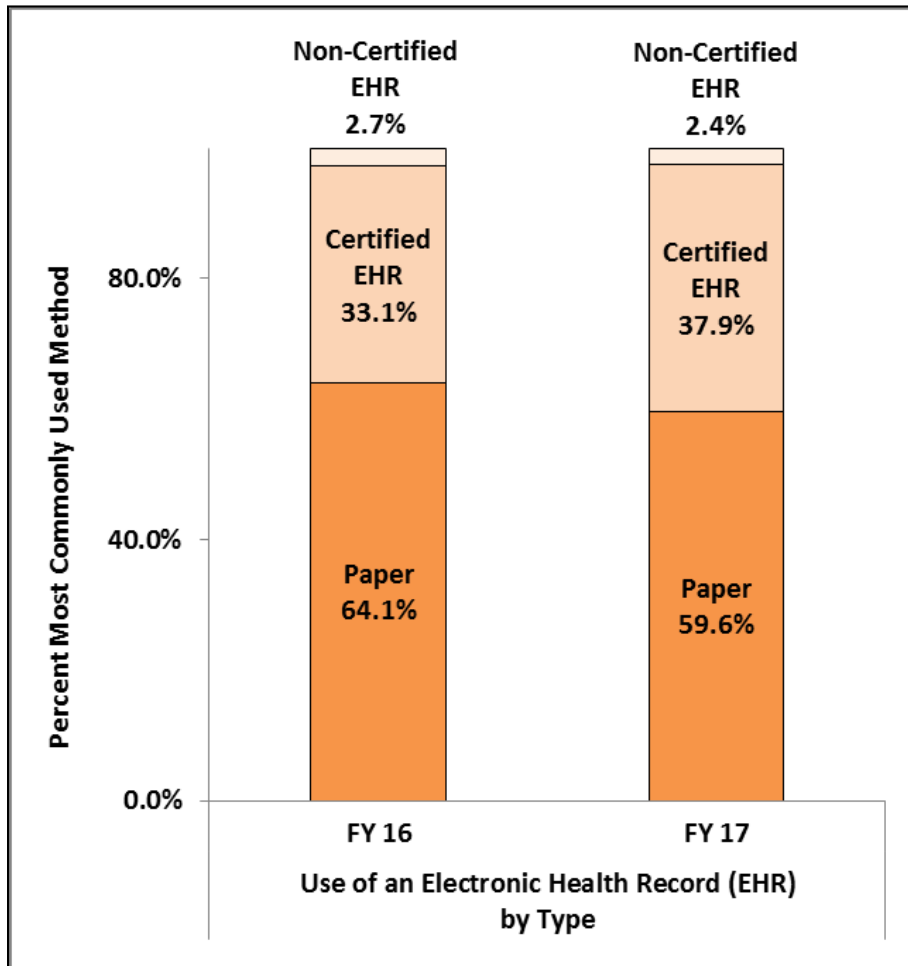
FUH Measure 7-Day and 30-Day Performance Rate Statistics

<u>FUH Performance Statistics</u>	<u>7-Day Rate (%)</u>	<u>30-Day Rate (%)</u>
Total Rate	30.8%	53.9%
Quartile 1	20.4%	43.6%
Quartile 2 (Median)	28.6%	54.2%
Quartile 3	38.2%	64.5%

Assessment of Patient Experience of Care Measure Results



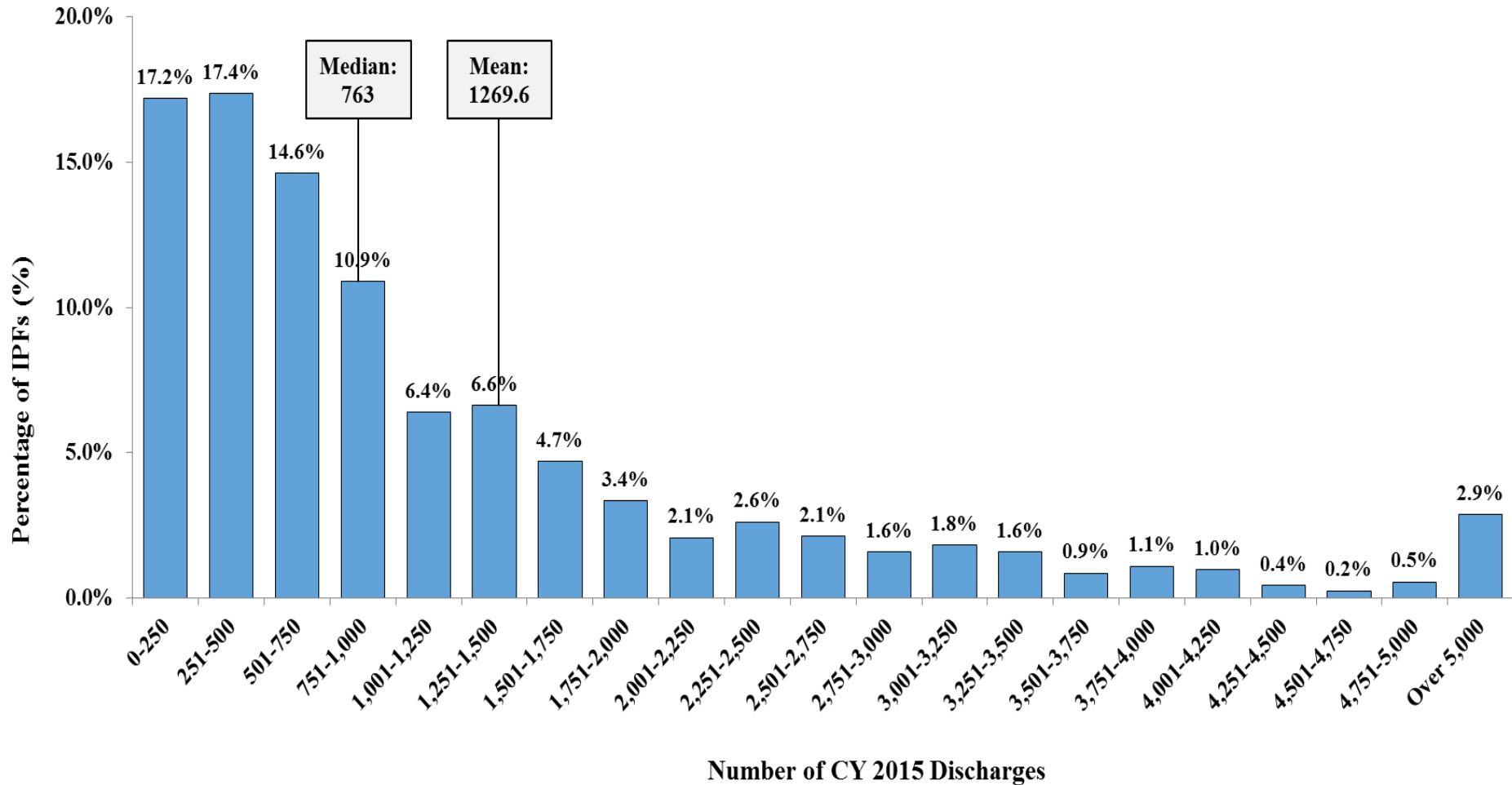
Use of EHR by Type and HISP Measure Results



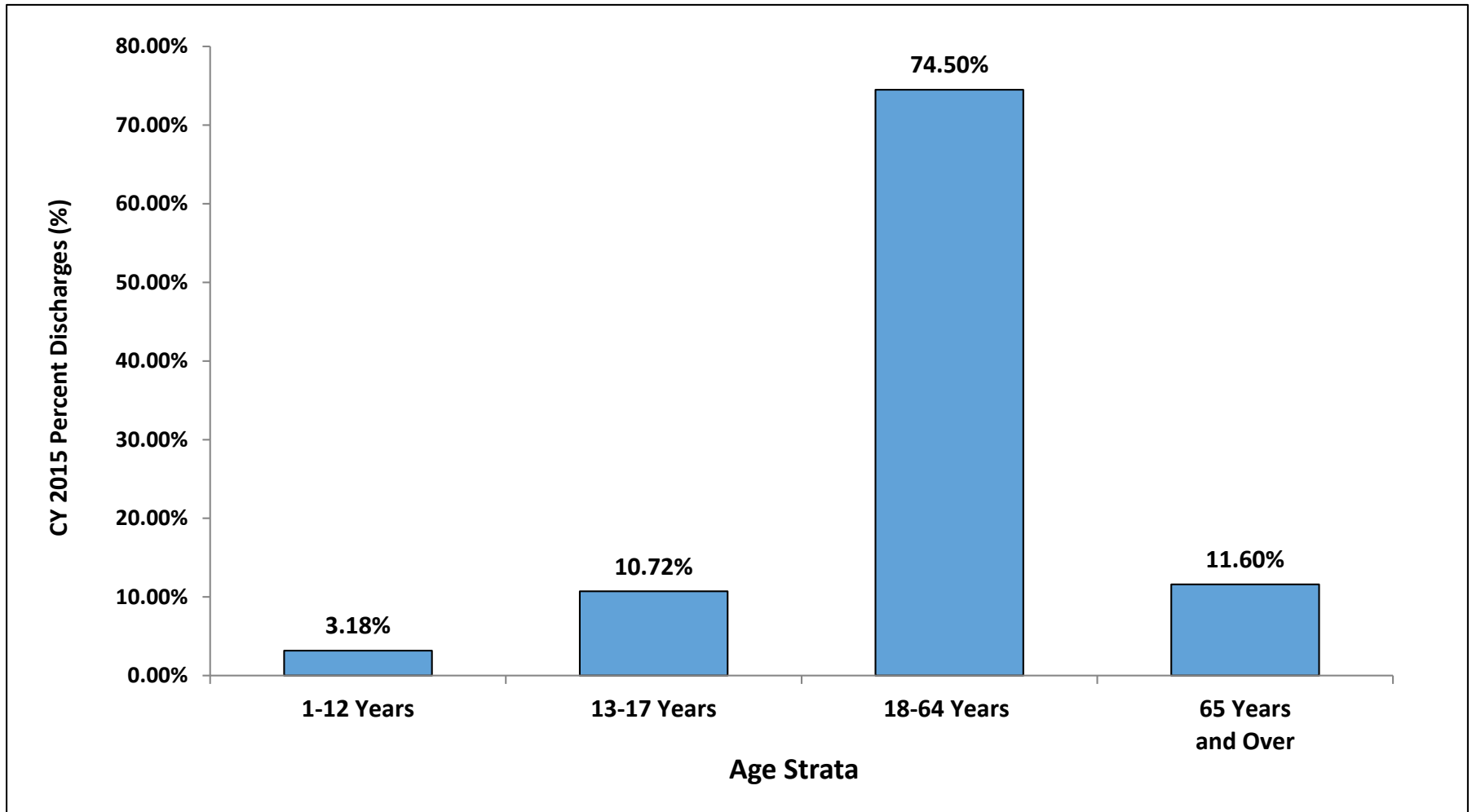
CY 2015 Non-Measure Data

- Non-measure data that IPFs collected in CY 2015 and reported this year will be presented here for informational purposes only.
- The non-measure data will not appear in the *Hospital Compare* Preview Report nor be publically reported.
- CMS will use this information to assess measures submissions for accuracy and to contribute to the development of new measures.

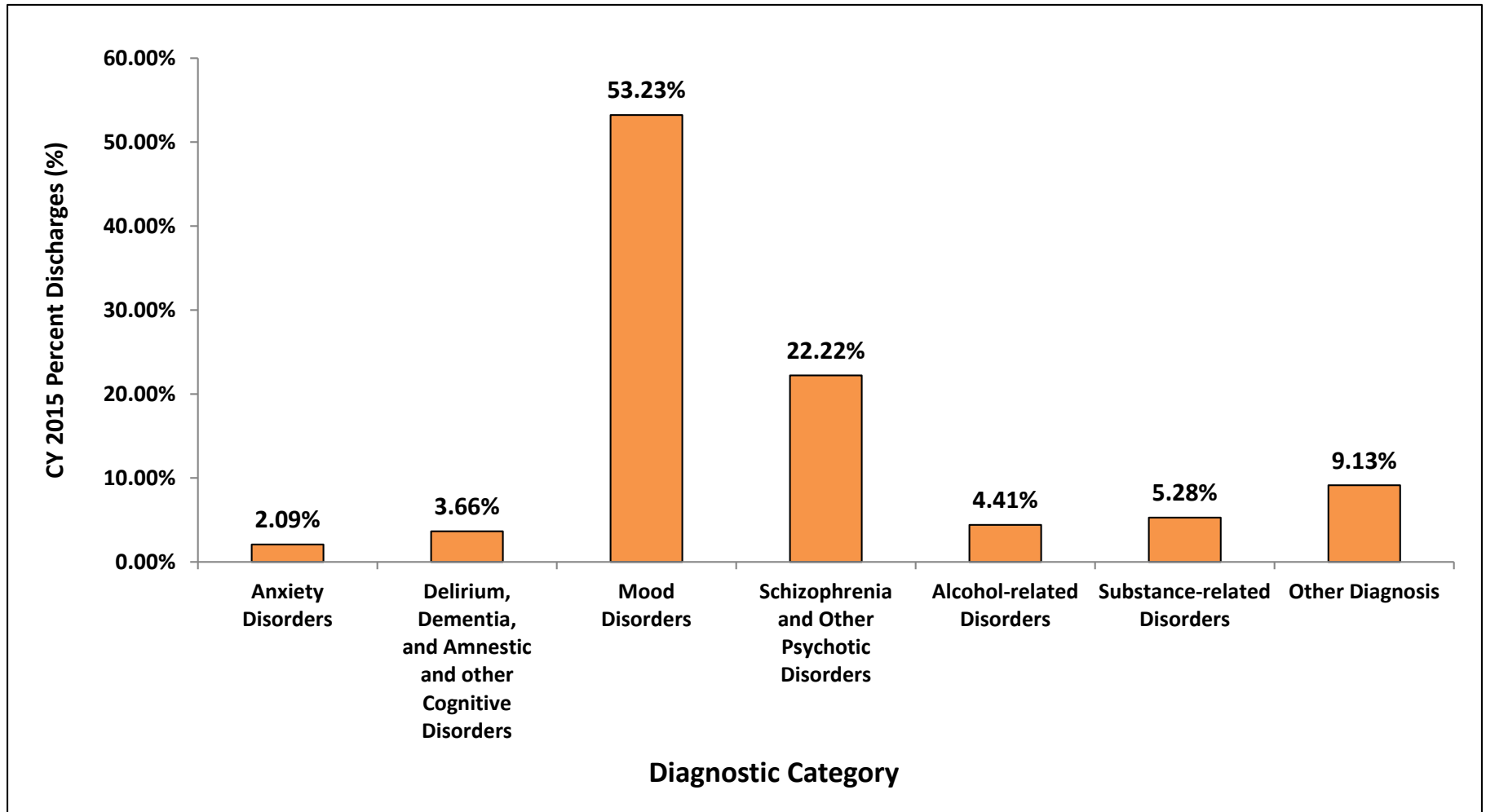
Distribution of CY 2015 Discharges from IPFs



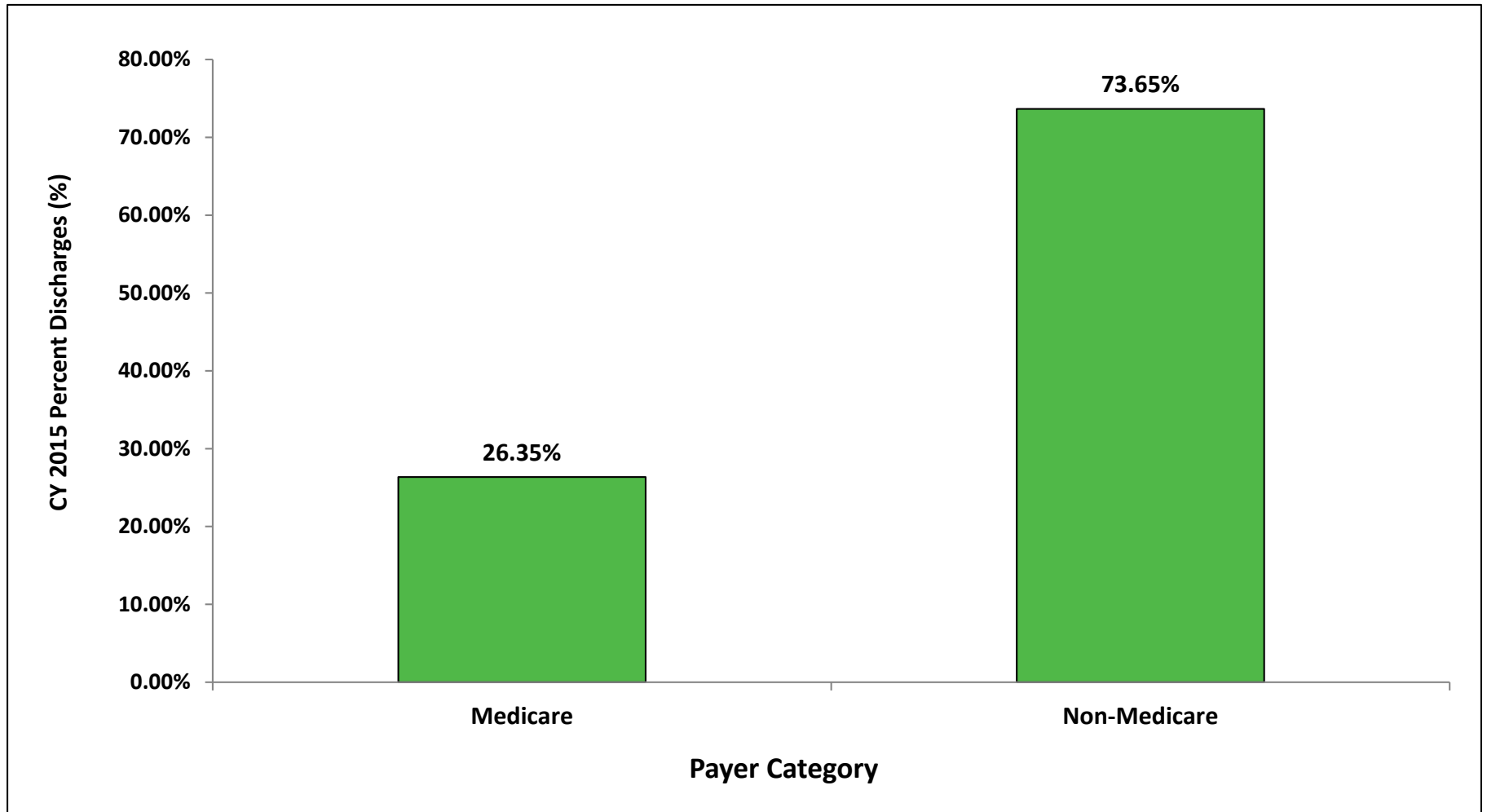
CY 2015 Total Discharges by Age Group



CY 2015 Total Discharges by Diagnostic Group



CY 2015 Total Discharges by Payer



Recognition for FY 2017 Performance and Improvement

CMS would like to acknowledge the top performing and most improved IPFs in the nation; however, this analysis is still in progress and will be presented as part of a future webinar.

IPFQR Program Public Reporting and Fiscal Year 2017
Measure Results Review

HELPFUL RESOURCES

Helpful Resources Links

FY 2017 IPPS Final Rule:

<https://www.gpo.gov/fdsys/pkg/FR-2016-08-22/pdf/2016-18476.pdf>

Specifications Manual for National Hospital Inpatient Quality Measures:

<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1141662756099>

The Joint Commission Specifications Manual (HBIPS):

<https://manual.jointcommission.org/>

Specifications Manual for National Hospital Inpatient Quality Measures (SUB, TOB, IMM):

www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1141662756099

Helpful Resources Links

CMS recommends that IPFs refer to the most recent IPFQR Program Manual for information pertaining to the IPFQR Program. This document, and other helpful resources and tools, can be found at:

- [QualityNet](https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772864255) > Inpatient Psychiatric Facilities > Resources:
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772864255>
- [Quality Reporting Center](http://www.qualityreportingcenter.com/inpatient/ipf/tools/) > IPFQR Program > Resources and Tools:
<http://www.qualityreportingcenter.com/inpatient/ipf/tools/>

IPFQR Program General Resources

Q & A Tool	Email Support	Website	Phone Support
https://cms-IP.custhelp.com	IPFQualityReporting@hcqis.org	www.QualityReportingCenter.com	(866)800-8765
Monthly Web Conferences	ListServes	Hospital Contact Change Form	Secure Fax
www.QualityReportingCenter.com	www.QualityNet.org	Hospital Contact Change Form	(877)789-4443

Helpful Resources

Save the Dates

Upcoming IPFQR Program educational webinars:

November 2016

FY 2019 New Measures Review

December 2016

Measures Under Consideration (MUC) and the Measure Applications Partnership (MAP) Processes

January 2017

NHSN Enrollment and Influenza Vaccination Among HCP Measure Refresher

IPFQR Program Public Reporting and Fiscal Year 2017 Measure Results Review

QUESTIONS?

Continuing Education Approval

- This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:
 - Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
 - Florida Board of Nursing Home Administrators
 - Florida Council of Dietetics
 - Florida Board of Pharmacy
 - Board of Registered Nursing (Provider #16578)
 - It is your responsibility to submit this form to your accrediting body for credit.

CE Credit Process

- Complete the ReadyTalk[®] survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
 - This is a separate registration from ReadyTalk
 - Please use your PERSONAL email so you can receive your certificate
 - Healthcare facilities have firewalls up that block our certificates

CE Certificate Problems?

- If you do not immediately receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that is sent out
- Please go back to the **New User** link and register your personal email account
 - Personal emails do not have firewalls

CE Credit Process: Survey

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by [SurveyMonkey](#)
Check out our [sample surveys](#) and create your own now!

CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Existing User Link:

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

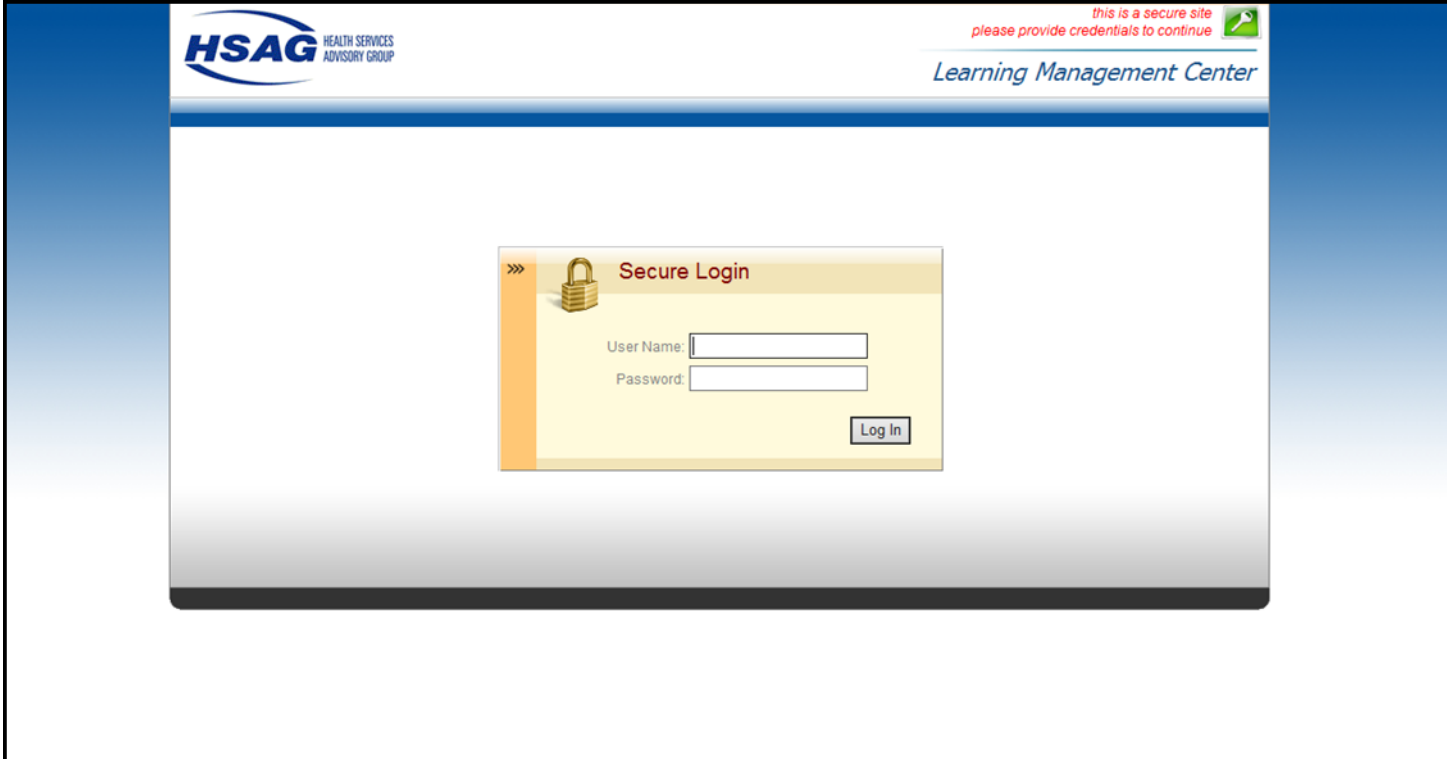
Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

CE Credit Process: New User

The screenshot shows a web page for the HSAG Learning Management Center. At the top left is the HSAG logo (Health Services Advisory Group). At the top right, there is a security notice: "this is a secure site please provide credentials to continue" with a small green icon. Below the logo and security notice, the text "Learning Management Center" is displayed. The main heading of the page is "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". Below this heading are four input fields: "First Name:" and "Last Name:" (each with a text box), "Email:" (with a text box), and "Phone:" (with a text box containing dashes for formatting). A "Register" button is located below the input fields. The entire registration form is enclosed in a white box with a blue border.

CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a red security notice reads "this is a secure site please provide credentials to continue" next to a green padlock icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box with a yellow background and a gold padlock icon. It contains two input fields: "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.