Welcome!

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- This event is being recorded.
Troubleshooting Audio

Audio from computer speakers breaking up? Audio suddenly stop?

• Click Refresh icon – or-
  Click F5

Location of Buttons

F5 Key
Top row of Keyboard

Refresh
Troubleshooting Echo

• Hear a bad echo on the call?
• Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.
• Close all but one browser/tab and the echo will clear up.

Example of Two Browsers Tabs open in Same Event
Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.
Annual Requirements: DACA, HCP, Structural Measures, and QualityNet SA

Candace Jackson, RN

Project Lead, Inpatient Quality Reporting (IQR)
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Support Contractor (SC)

March 28, 2016
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>CY</td>
<td>Calendar Year</td>
</tr>
<tr>
<td>DACA</td>
<td>Data Accuracy and Completeness Acknowledgement</td>
</tr>
<tr>
<td>HCP</td>
<td>Healthcare Personnel</td>
</tr>
<tr>
<td>IQR</td>
<td>Inpatient Quality Reporting</td>
</tr>
<tr>
<td>NHSN</td>
<td>National Healthcare Safety Network</td>
</tr>
<tr>
<td>NQF</td>
<td>National Quality Forum</td>
</tr>
<tr>
<td>SA</td>
<td>Security Administrator</td>
</tr>
</tbody>
</table>
Purpose

This presentation will provide insight on the annual submission requirements for the IQR Program.
Objectives

Participants will be able to:

• Identify the requirements that are submitted annually for the IQR Program
• Complete and submit the Structural Measures and DACA accurately
Annual Submissions: DACA, HCP, Structural Measures, and QualityNet SA

STRUCTURAL MEASURES AND DACA
Structural Measures and DACA

Structural measures and DACA are submitted annually

• The reporting year goes from January 1 through December 31

• The submission Deadline is May 15 for the previous reporting year
  ▪ Submission deadline for CY 2015 Structural Measures and DACA is May 15, 2016
  ▪ Data can be entered from April 1, 2016 through May 15, 2016

• The data are entered through the QualityNet Secure Portal
Secure Portal Home Page

QualityNet Secure Portal Provided by Center for Clinical Standards and Quality (CCSQ), Centers for Medicare and Medicaid Systems. Providers, vendors supporting providers, support contractors, and other participating in CCSQ Quality Reporting Programs can access data exchange and submission tools, measures tools, scoring support tools, and reporting services in this portal.

QualityNet News
More News......

Announcements from QualityNet Team
More Announcements......

QualityNet Events
The QualityNet Event Center provides a schedule of upcoming (live) training sessions, as well as trainings hosted by QI/Os for healthcare providers in their respective states. Also listed are details, including date, time, duration of the event, and panelists/moderators. To view the schedule, visit QualityNet Event Center
Accessing IQR Program
Accessing Structural Measures and DACA
Select Inpatient Program

A structural measure reflects the environment in which providers care for patients. Structural measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes requesting structural measures information will encourage facilities to increase the use of tools, ultimately improving the quality of care provided to Medicare beneficiaries.

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.
Select Payment Year

1. Select Payment Year
2. Click on CONTINUE
Structural Measures
Participation in a Systematic Clinical Database Registry for Nursing Sensitive Care

1. Select Yes or No

2. Click on Submit
Definition of Participation

Participation in the Hospital IQR Program requires submitting standardized data elements that are applicable to at least two NQF endorsed measures related to the topics measured by the registry, as well as reporting on all patients eligible for the measures.
Definition of Qualified Registry

Receiving data from more than five hospitals, and providing calculated measures, results, benchmarks, and quality improvement information to the participant (and to designated third parties).
Participation in a Systematic Clinical Database Registry for Nursing Sensitive Care

1. Select Yes.
2. Click on American Nursing Associations National Database of Nursing Quality Indicators or Other and enter Registry Name.
3. Click on Submit.
Structural Measure Updated

Inpatient Structural Measures/DACA

Submission Period
01/01/2016 - 05/15/2016
With Respect to Reporting Period
01/01/2015 - 12/31/2015

Participation in a Systematic Clinical Database Registry for Nursing Sensitive Care Updated

Structural Measures | PY 2017

For Hospital Inpatient Quality Reporting participating providers, the Structural Measures question(s), their applicable child question(s) and the Data Acknowledgement are required in order to fulfill the Annual Payment Update (APU) requirement. The Centers for Medicare & Medicaid Services (CMS) is requesting these items be available for all providers.

Participation in a Systematic Clinical Database Registry for Nursing Sensitive Care

* Does/Did your hospital participate\(^1\) in a systematic qualified\(^2\) clinical registry or registries measuring Nursing Sensitive Care?

- Yes ☐ No

* Which registry or registries?
Structural Measure Completed

![CMS QualityNet screenshot](image)

**Inpatient Structural Measures/DACA**

- **Submission Period**: 01/01/2016 - 05/15/2016
- **With Respect to Reporting Period**: 01/01/2015 - 12/31/2015

### Structural Measures | PY 2017

<table>
<thead>
<tr>
<th>Provider ID</th>
<th>Participation in a Systematic Clinical Database Registry for Nursing Sensitive Care</th>
<th>Participation in a Systematic Clinical Database Registry for General Surgery</th>
<th>Safe Surgery Checklist Use</th>
<th>DACA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Completed</td>
<td>Incomplete</td>
<td>Incomplete</td>
<td>Incomplete</td>
</tr>
</tbody>
</table>

**Program Selection**

**Payment Year Selection**

---

3/28/2016
Participation in a Systematic Clinical Database Registry for General Surgery

For Hospital Inpatient Quality Reporting participating providers, the Structural Measures question(s), their applicable child question(s) and the Data Acknowledgement are required in order to fulfill the Annual Payment Update (APU) requirement. The Centers for Medicare & Medicaid Services (CMS) is requesting these items be available for all providers.

Participation in a Systematic Clinical Database Registry for General Surgery

* Does/Did your hospital participate\(^1\) in a systematic qualified\(^2\) clinical registry measuring General Surgery?
   - Yes
   - No

* Which registry or registries?
   - American College of Surgeons National Surgical Quality Improvement Program Registry
   - Other Registry (Please specify)

Registry Name
Safe Surgery Checklist Use

For Hospital Inpatient Quality Reporting participating providers, the Structural Measures question(s), their applicable child question(s) and the Data Acknowledgement are required in order to fulfill the Annual Payment Update (APU) requirement. The Centers for Medicare & Medicaid Services (CMS) is requesting these items be available for all providers.

Safe Surgery Checklist Use

* Does your facility use a Safe Surgery Checklist?
  - Yes  
  - No
DACA

Data Accuracy and Completeness Acknowledgement | PY 2017

For all Hospital Inpatient Quality Reporting participating providers, the Data Accuracy and Completeness Acknowledgement is required by CMS in order to fulfill the Annual Payment Update (APU) requirement.

Data Accuracy and Completeness Acknowledgement

To the best of my knowledge, at the time of submission, all of the information reported for this hospital for the Hospital Inpatient Quality Reporting (IQR) Program, as required for the annual Payment Year (PY) 2017 Hospital IQR Program requirements, is accurate and complete. This information includes the following:

- Chart Abstracted measure sets
- Initial patient population and sample counts
I understand this acknowledgement covers all Hospital IQR information reported by this hospital (and any data or survey information reported by vendor(s) acting as agents on behalf of this hospital) to the Centers for Medicare & Medicaid Services (CMS) and its contractors for the PY 2017 payment update.

To the best of my knowledge, at the time of submission, this information was collected in accordance with all applicable requirements. I understand that this information is used as the basis for the public reporting of quality of care and patient assessment of care data.

I understand that this acknowledgement is required for the purpose of meeting any PY 2017 Hospital IQR Program requirements.

Enter your position and click 'Submit'.

1. Click on “Yes, I Acknowledge”
2. Enter “Position”
3. Click on “Submit”
DACA Updated

For all Hospital Inpatient Quality Reporting participating providers, the Data Accuracy and Completeness Acknowledgement is required by CMS in order to fulfill the Annual Payment Update (APU) requirement.

Data Accuracy and Completeness Acknowledgement

To the best of my knowledge, at the time of submission, all of the information reported for this hospital for the Hospital Inpatient Quality Reporting (IQR) Program, as required for the annual Payment Year (PY) 2017 Hospital IQR Program requirements, is accurate and complete. This information includes the following:

- Chart Abstracted measure sets
- Initial patient population and sample counts
- Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey
DACA Completed

I understand this acknowledgement covers all Hospital IQR information reported by this hospital (and any data or survey information reported by vendor(s) acting as agents on behalf of this hospital) to the Centers for Medicare & Medicaid Services (CMS) and its contractors for the PY 2017 payment update.

To the best of my knowledge, at the time of submission, this information was collected in accordance with all applicable requirements. I understand that this information is used as the basis for the public reporting of quality of care and patient assessment of care data.

I understand that this acknowledgement is required for the purpose of meeting any PY 2017 Hospital IQR Program requirements.

Acknowledgement has been submitted by:
Name: Candace Jackson
Position: Quality Director
Date: 02/05/2016
Time: 12:11:04 PT

Update Acknowledgement
Return to Summary  Submit  Print
Structural Measures and DACA Completed

![CMS QualityNet](image_url)

**Inpatient Structural Measures/DACA**

- **Submission Period:** 01/01/2016 - 05/15/2016
- **With Respect to Reporting Period:** 01/01/2015 - 12/31/2015

**Structural Measures | PY 2017**

<table>
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<th>Participation in a Systematic Clinical Database Registry for General Surgery</th>
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<td><strong>Completed</strong></td>
<td><strong>Completed</strong></td>
</tr>
</tbody>
</table>

3/28/2016
Annual Submission: DACA, HCP, Structural Measures, and QualityNet SA

HCP
HCP Influenza Vaccination Measure

**Denominator:**
HCP who are physically present in the healthcare facility for at least 30 working days between October 1 and March 31

**Numerator:**
HCP in the denominator population who received an influenza vaccination during the time from when the vaccine became available (e.g., August or September) through March 31 of the following year
HCP Reporting Requirements

Where:

HCP data is reported through the NHSN

When:

• Facilities are only required to report data once at the conclusion of the reporting period (October 1 to March 31).
• Data must be entered by May 15 for the flu season.
• 4Q15 through 1Q16 data will need to be entered by May 15, 2016.
## Verifying HCP Submission

### Hospital Reporting - Provider Participation Report - Inpatient
Quarter 1 - 2015 Discharges

**Report Run Date:** 02/11/2016

<table>
<thead>
<tr>
<th>Provider ID:</th>
<th>Provider Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Intent to Submit EHR Measures:**
- EHR Measures Submitted:

### Clinical Web-Based Measures

<table>
<thead>
<tr>
<th>Measure Set: PC</th>
<th>Total Numerator¹¹</th>
<th>Total Denominator¹¹</th>
<th>Total Mother Population</th>
<th>Total Sample Size</th>
<th>Discharge Quarter Sample Frequency</th>
<th>Total Exclusions¹¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>PC-01 Elective Delivery</td>
<td>0</td>
<td>22</td>
<td>107</td>
<td>107</td>
<td>Monthly</td>
<td>85</td>
</tr>
</tbody>
</table>

**Exclusion Count**
- **ICD-9-CM Principal or Other Diagnosis Code for elective delivery¹¹** | 48
- **Enrolled in a Clinical Trial¹¹** | 0
- **Gestational age patients < 37 or >= 39 weeks gestation¹¹** | 37

### IQR-HAI Quality Measure Data

<table>
<thead>
<tr>
<th>Measure</th>
<th>IQR-HAI Data Submitted</th>
<th>Last NHSN File Update to CMS⁸</th>
</tr>
</thead>
<tbody>
<tr>
<td>C.difficile</td>
<td>Yes</td>
<td>11/16/2015</td>
</tr>
<tr>
<td>CAUTI</td>
<td>Yes</td>
<td>11/16/2015</td>
</tr>
<tr>
<td>CLABSI</td>
<td>Yes</td>
<td>11/16/2015</td>
</tr>
<tr>
<td><strong>Healthcare Personnel Influenza Vaccination</strong></td>
<td>Yes</td>
<td>05/18/2015</td>
</tr>
<tr>
<td>MRSA Bacteremia</td>
<td>Yes</td>
<td>11/16/2015</td>
</tr>
<tr>
<td>SSI - Abdominal Hysterectomy</td>
<td>Yes</td>
<td>11/16/2015</td>
</tr>
<tr>
<td>SSI - Colon Surgery</td>
<td>Yes</td>
<td>11/16/2015</td>
</tr>
</tbody>
</table>
Annual Submissions: DACA, HCP, Structural Measures, and *QualityNet* SA
Maintain an Active QualityNet SA

Hospitals are required to maintain an active QualityNet SA at all times. The QualityNet SA:

- Facilitates the registration process for other users at the organization
- Logs into their account(s) at least once per month to maintain an active status

**NOTE:** Accounts that have been inactive for 120 days will be disabled. Inactive users will need to contact the QualityNet Help Desk to have their account reset once disabled.
QualityNet SA Recommendation

It is highly recommended that hospitals designate at least two QualityNet Security Administrators – one to serve as the primary QualityNet SA and the other to serve as a backup.
Verifying Active QualityNet SA

Report Run Date: 02/11/2016

Hospital Reporting - Provider Participation Report - Inpatient
Quarter 1 - 2015 Discharges

<table>
<thead>
<tr>
<th>State</th>
<th>CEO Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Medicare Accept Date: 12/31/2013</td>
</tr>
<tr>
<td></td>
<td>Notice of Participation Date: 06/24/2014</td>
</tr>
<tr>
<td></td>
<td>Withdrawal or Non-Participation Date:</td>
</tr>
</tbody>
</table>

**Active QualityNet Security Administrator:** Yes

**Completed Structural Measures:** No

**Data Accuracy and Completeness Acknowledgement:** No

**Intent to Submit EHR Measures:**

**EHR Measures Submitted:**

Selected for Validation: No

<table>
<thead>
<tr>
<th>Measure Sets¹</th>
<th>Total Cases Accepted²</th>
<th>Total Medicare Claims³</th>
<th>Total Patient Population⁴</th>
<th>Total Sample Size⁴</th>
<th>Discharge Quarter Sample Frequency⁴</th>
</tr>
</thead>
</table>

3/28/2016
QUESTIONS?