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Troubleshooting Echo

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Example of two browsers/tabs open in same event

Submitting Questions

Type questions in the "Chat with Presenter" section located on the bottomleft corner of your screen.





The Treasure Hunt: Valuable Tools for Successful Reporting

Pam Harris, BSN, RN

Project Coordinator Hospital Outpatient Quality Reporting (OQR) Program Support Contractor

April 19, 2017

Save the Date

- Upcoming Hospital OQR Program educational webinars:
 - June 21, 2017: Question and Answer Session
 - July (TBA): Proposed Rule
- Notifications of additional educational webinars will be sent via ListServe

Learning Objectives

- At the conclusion of the presentation, attendees will be able to:
- ✓ Locate and use the tools on the Quality Reporting Center website.
- ✓ List at least two tools available on the QualityNet website.
- ✓ Identify and run *QualityNet* reports.



www.qualityreportingcenter.com

Treasure-Hunting Tools

Tools in This Chest

We will discover:

- Program information
- Tutorial videos
- Educational webinars
- Various resources



Information Categories

C S Attp://www.qualityreportingcenter.com/	<i>Q</i> uality Reporting Center ×	- Contraction
File Edit View Favorites Tools Help		
НОМЕ	PROGRAM INFORMATION	Log In to Access QIO Section
EVENTS CALENDAR	HOQR 101	
	> PROGRAM RULE	Change Text Size: <u>A A</u> Search
	HISTORY	Search
	UPCOMING EVENTS	
sc	ARCHIVED EVENTS	A CONTRACTOR
EDUCATION	> OQR TIMES	U coming Events
QIN-QIO	> LOOKUP TOOL	February 22, 2017
Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and	TOOLS AND RESOURCES	Measure Submission Via a Veb-Based Tool - 1 C.E.
Education Support Programs. Here you will find resources to assist hospitals, inputier psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting. Through these sites, you can access:	nt DATA COLLECTION AND CART	February 22, 2017 Hospital Inpatient Quality Reporting (IQR) Program
Reference and training materials	DATA SUBMISSION	Requirements for Fiscal Year (FY) 2019 Payment
Educational presentations	DATA VALIDATION	Determination

Program Information

Program Information

Home » Hospital OQR Program » Program Information

How to Participate

To participate in the Hospital OQR Program initiative, please visit qualitynet.org.

How to Withdraw

To withdraw from participation in the Hospital OQR Program initiative, please visit qualitynet.org.

Measure Sets

The current measure sets and OP measure numbers are presented below, according to measure set (they are not in order according to measure number).

- · Acute Myocardial Infarction / Chest Pain
 - OP-1: Median Time to Fibrinolysis
 - · OP-2: Fibrinolytic Therapy Received Within 30 Minutes of ED arrival
 - OP-3: Median Time to Transfer to Another Facility for Acute Coronary Intervention
 - · OP-4: Aspirin at Arrival
 - OP-5: Median Time to ECG
- · ED Throughput
 - OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients
 - OP-20: Door to Diagnostic Evaluation by a Qualified Medical Professional
 - · OP-22: Left Without Being Seen
- Pain Management
 - OP-21: Median Time to Pain Management for Long Bone Fracture
- Stroke
 - OP-23: Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 minutes of ED Arrival
- Imaging Efficiency
 - · OP-8: MRI Lumbar Spine for Low Back Pain
 - OP-9: Mammography Follow-up Rates
 - OP-10: Abdomen CT-Use of Contrast Material
 - · OP-11: Thorax CT-Use of Contrast Material
 - OP-13: Cardiac Imaging for Preoperative Risk Assessment for Non Cardiac Low Risk Surgery
 - OP-14: Simultaneous Use of Brain Computed Tomography (CT) and Sinus Computed Tomography (CT)

Finding the Timelines

Timelines

Below are important upcoming deadlines associated with the Hospital OQR Program reporting program. Click the following links to download the Hospital OQR Important Dates as a PDF for <u>CY 2018</u>.

Hospital OQR Important Dates Payment Determination CY 2018				
Clinical Data Submission	Encounter Dates	Encounter Quarter		
Nov. 1, 2016	April 1 – June 30, 2016	Q2 2016		
Feb. 1, 2017	Jul 1- Sept. 30, 2016	Q3 2016		
May 1, 2017	Oct. 1- Dec. 31, 2016	Q4 2016		
Aug. 1, 2017	Jan. 1 – March 31, 2017	Q1 2017		
Population and Sampling	Encounter Dates	Encounter Quarter		
Nov. 1, 2016*	April 1 – June 30, 2016	Q2 2016		
Feb. 1, 2017*	Jul 1- Sept. 30, 2016	Q3 2016		
May 1, 2017*	Oct. 1- Dec. 31, 2016	Q4 2016		
Aug. 1, 2017*	Jan. 1 – March 31, 2017	Q1 2017		
Scheduled Clinical Data Abstraction Center (CDAC) Record Requests (approximate)	Encounter Dates	Encounter Quarter		
Sept. 2016	Jan. 1 – March 31, 2016	Q1 2016		
Dec. 2016	April 1 – June 30, 2016	Q2 2016		
Mar. 2017	July 1 - Sep 30, 2016	Q3 2016		
Jun. 2017	Oct. 1 - Dec 31, 2016	Q4 2016		

Timelines for Calendar Year (CY) 2018

Clinical Data Submission	Encounter Dates	Encounter Quarter
Nov 1, 2016	Apr 1–Jun 30, 2016	Q2 2016
Feb 1, 2017	Jul 1–Sep 30, 2016	Q3 2016
May 1, 2017	Oct 1-Dec 31, 2016	Q4 2016
Aug 1, 2017	Jan 1–Mar 31 2017	Q1 2017
Population and Sampling	Encounter Dates	Encounter Quarter
Nov 1, 2016*	Apr 1–Jun 30, 2016	Q2 2016
Feb 1, 2017*	Jul 1–Sep 30, 2016	Q3 2016
May 1, 2017*	Oct 1–Dec 31, 2016	Q4 2016
Aug 1, 2017*	Jan 1–Mar 31 2017	Q1 2017
Scheduled CDAC Record Requests	Encounter Dates	Encounter Quarter
Sep 2016	Jan 1–Mar 31, 2016	Q1 2016
Dec 2016	Apr 1–Jun 30, 2016	Q2 2016
Mar 2017	Jul 1–Sep 30, 2016	Q3 2016
Jun 2017	Oct 1-Dec 31, 2016	Q4 2016
Web-Based Measures – QualityNet	Encounter Dates	Submission Dates
OP-12	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-17	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-22	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-25	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-26	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-29	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-30	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-31**	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
OP-33	Jan 1–Dec 31, 2016	Jan 1–May 15, 2017
Web-Based Measure – National Healthcare Safety Network (NHSN)	Encounter Dates	Submission Dates
OP-27	Oct 1, 2016–Mar 31, 2017	Oct 1, 2016–May 15, 2017

Hospital OQR 101

Hospital Outpatien	t Qual	ity Reporting 101		
Home » Hospital OQR Program » Hospital Outpatient Quality Reporting 101 Videos The video library contains short educational videos on key concepts in the Hospital OQR Program. Click any link in the table below to view a video.				
Title (click to view video)		Description		
Becoming a Security Administrator (English)	rator (English) Learn how to fill out the Security Administration form			
Logging In to QualityNet	Learn how to log in to the QualityNet.org website to access and report OQR data			
Accessing and Understanding the Medicare Claims Details Report	Learn how to access the Medicare Claims Details Report, and understand the data presented			
Resources				
Guides for getting started with the HOQR Prog	gram.			
Successful Reporting in the Hospital OQR Program: A Step-by-Step Guide for New Facilities		Essential information for those new to the Hospital OQR Program		
Hospital OQR ListServe		Email sign-up to receive the most up-to-date information and education		
Hospital OQR on QualityNet		Program information and access to data submission portal and reports		
Q1 2017 Outpatient/Inpatient Timeline Reporting deadlines and important dates for the OQR and IQR Program				

Upcoming Events

OQR: CMS Abstraction & Reporting Tool (CART): Knowing the Basics — 1 C.E.

Date: March 15, 2017, 10:00 AM and 2:00 PM ET Group: Hospital OQR

Times: 10:00 – 11:00 AM EST 2:00 – 3:00 PM EST

Join us for an overview of the steps required for entering abstractions into CART. This presentation will also demonstrate how to export your abstractions and submit your data into the QualityNet Secure File Transfer. Included are tips and tricks to help you along the way.

Target Audience: Hospital personnel new or needing a review of the CART tool and submission of CART data.

Moderator:

Karen VanBourgondien RN, BSN Education Coordinator, Outpatient Quality Reporting and Education Support Contractor

Speaker:

Pam Harris, RN, BSN

Program Lead, Outpatient Quality Reporting and Education Support Contractor

Documentation:

- Registration Flyer
- Registration Links (<u>10 AM / 2 PM</u>)
- Presentation Slides
- Recorded Event
- Presentation Transcript
- Q&A Transcript

Archived Events

Archived Events

Home » Hospital OQR Program » Archived Events

OQR: Hospital OQR Program CY 2018 Chart-Abstracted Validation Overview for Selected Hospitals

Date: February 15, 2017

Time: 10:00-11:00 AM EST 2:00 – 3:00 PM EST

The validation contractor will educate and share information regarding the Hospital OQR chart-abstracted validation process for CY 2018.

Target Audience: Hospitals reporting for the Outpatient Quality Reporting Program interested in learning about the formal validation process.

Moderator:

Karen VanBourgondien RN, BSN Education Coordinator Outpatient Quality Reporting and Education Support Contractor

Speaker:

Alex Feilmeier, MHA Lead Health Informatics Solutions Coordinator Value, Incentives, and Quality Reporting Center, Validation Support Contractor

Documentation

- Registration Flyer
- Registration Links (<u>10 AM / 2 PM</u>)
- Presentation Slides
- Recorded Event
- Presentation Transcript
- Q&A Transcript

Lookup Tools

Lookup Tools

Home » Hospital OQR Program » Lookup Tools

Web-Based Status Listing (PY 2018)

Please utilize the search function below for the Web-Based Measure Status Listing to determine whether your facility has completed data submission for the following measures for the Hospital Outpatient Quality Reporting (OQR) Program:

- OP-12: The Ability for Providers with HIT to Receive Laboratory Data Electronically Directly into their ONC-Certified EHR System
 as Discrete Searchable Data
- OP-17: Tracking Clinical Results between Visits
- · OP-22: ED-Left Without Being Seen
- · OP-25: Safe Surgery Checklist Use
- OP-26: Hospital Outpatient Volume on Selected Outpatient Surgical Procedures
- OP-27: Influenza Vaccination Coverage among Healthcare Personnel
- OP-29: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients
- OP-30: Colonoscopy Interval for Patients with a History of Adenomatous Polyps-Avoidance of Inappropriate Use
- · OP-31: Cataracts Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

The Web-Based Measure Status Listing is based on the most current information submitted to the Centers for Medicare & Medicaid Services (CMS). Enter the CMS Certification Number (CCN) for your facility to receive the status of your facility's data submission for all of the web-based measures submitted via the QualityNet web-based tool as of the date indicated. However, to document that all data submission requirements for the measures are complete, please log in to the <u>QualityNet website</u> and print a screenshot of the data submitted for your records.

Data Archives

Visit the Archive pages via the links below to review a previous year's web-based data submission.

Use the Lookup Tool

Enter your facility's CMS Certification Number (CCN) into the field below. Your facility will not be visible in the database if no data have been submitted.

Note: Data last updated February 16, 2017

CCN:
Enter
OP-32 Lookup Tool
Please enter your facility's CCN into the form below.
Key and the second links in the fact the second secon

Checking Your Data

The Web-Based Measure Status Listing is based on the most current information submitted to the Centers for Medicare & Medicaid Services (CMS). Enter the CMS Certification Number (CCN) for your facility to receive the status of your facility's data submission for all of the web-based measures submitted via the QualityNet web-based tool as of the date indicated. However, to document that all data submission requirements for the measures are complete, please log in to the <u>QualityNet website</u> and print a screenshot of the data submitted for your records.

Data Archives

Visit the Archive pages via the links below to review a previous year's web-based data submission.

Use the Lookup Tool

Enter your facility's CMS Certification Number (CCN) into the field below. Your facility will not be visible in the database if no data have been submitted.

Note: Data last update	ed February 16, 2017	
Enter		

OP-32 Lookup Tool

Please enter your facility's CCN into the form below.

If you receive the response "Yes," your facility has a Claims Detail Report (CDR) located on the QualityNet Secure Portal. To retrieve the CDR, your facility must have an active Security Administrator.

If you receive the response "No," your facility either does not have an CDR with data to retrieve or your CCN was not found. Please verify that your CCN was entered accurately.

Note: Data last updated February 16, 2017

CCN:				
Enter				

Verifying Your Submission

Dioaco ontor vour facility's Ch	49 Contification Number (CCN) into the form below. Please be award
hat your facility will not be vis	ible in the database if no data have been submitted
hat your facility will not be vis	ible in the database if no data have been submitted.
Note: Data last updated Feb	oruary 16, 2017
CCN:	
Enter	
Results for the CCN sub	omission of
Web-Based Measures Inform	mation:
Your CCN submission of	contains the following data:
OD 12 Submitted: Ves	
OP-12 Submitted: Yes	
• OP-17 Submitted: Yes	
• OP-22 Submitted: Ves	
• OP 26 Submitted: Ves	
• OP-27 Submitted: Ves	
• OP-29 Submitted: Yes	
• OP-30 Submitted: Yes	
OP-31 Submitted: No	
DP-32 Information:	
es your facility has a Claim	s Detail Report (CDR) located on the QualityNet Secure Portal. To
, je	

Another Handy Tool

The Web-Based Measure Status Listing is based on the most current information submitted to the Centers for Medicare & Medicaid Services (CMS). Enter the CMS Certification Number (CCN) for your facility to receive the status of your facility's data submission for all of the web-based measures submitted via the QualityNet web-based tool as of the date indicated. However, to document that all data submission requirements for the measures are complete, please log in to the <u>QualityNet website</u> and print a screenshot of the data submitted for your records.

Data Archives

Visit the Archive pages via the links below to review a previous year's web-based data submission.

Use the Lookup Tool

Enter your facility's CMS Certification Number (CCN) into the field below. Your facility will not be visible in the database if no data have been submitted.

Note: Data last updated February 16, 2017

CCN:

OP-32 Lookup Tool

Please enter your facility's CCN into the form below.

If you receive the response "Yes," your facility has a Claims Detail Report (CDR) located on the QualityNet Secure Portal. To retrieve the CDR, your facility must have an active Security Administrator.

If you receive the response "No," your facility either does not have an CDR with data to retrieve or your CCN was not found. Please verify that your CCN was entered accurately.

CNI-			
	-		
Entor			



OP-32 Information

Please enter your facility's CM	IS Certification Number (CCN) into the form below. Please be aware
that your facility will not be vis	ible in the database if no data have been submitted.
	10 0040
Note. Data last updated May	10, 2010
CCN:	
Enter	
Results for the CCN sub	omission of
Web-Based Measures Inforr	nation:
Your CCN submission of	contains the following data:
OP-12 Submitted: Yes	
OP-17 Submitted: Yes	
OP-22 Submitted: Yes	
OP-25 Submitted: Yes	
OP-26 Submitted: Yes	
OP-27 Submitted: Yes	
OP-29 Submitted: Yes	
OP-30 Submitted: Yes	
OP-31 Submitted: No	
OP-32 Information:	
Yes your facility has a Claims	Detail Report (CDR) located on the QualityNet Secure Portal. To
retrieve the CDD your facility	must have an active Security Administrator. Go to QualityNet org to

Claims Detail Report for OP-32

- Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy measure
 - This measure will be publicly reported beginning on or after December 1, 2017 and used for payment determination beginning with payment year (PY) 2018.
 - Claims detail reports will be available at three stages prior to the final measure calculation and public reporting of measure results.
- <u>https://www.qualitynet.org/dcs/ContentServer?cid=</u> 1228775181947&pagename=QnetPublic%2FPage %2FQnetTier3& c=Page

Tools and Resources

	Program Re	sources		
Successful Reporting in the Hospital OQR Program: A Step-by-Step Guide for New Facilities		Essential information for those new to the Hospital OQR Program		
Hospital OQR Reference Checklist		Summary of the current year's program requirements		
Q3 2016 Hospital Quality Reporting Checklist		A step-by-step guide for data submission		
Hospital Outpatient Quality Reporting Question and Answers Tool		Immediate feedback to your questions and a searchable database of past responses		
Q1 2017 Outpatient/Inpatient Timeline		Reporting deadlines and important dates for the OQR and IQR Program		
Hospital OQR ListServe		Email sign-up to receive the most up-to-date information and education		
Hospital OQR on QualityNet		Program information and access to data submission portal and reports		
CMS Extraordinary Circumstances Extension/Exemption Guidelines and Form		Please visit QualityNet.org		
Hospital Contact Change Form		Update your facility's contact information		
Hospital Quality Reporting 101		Resources for new quality reporting professionals		



Measure Resources/Guideline Tools

Measure Resources				
NHSN: Preparing for Data Submission	Learn how to add new users and Facility Administrators			
Hospital OQR Quality Measures and Timelines	Reporting periods and data submission deadlines for the CY 2018 Payment Determination			
World Health Organization Surgical Safety Checklist	Sample form to use for OP-25			
Measure Guideli	nes and Tools			
Hospital OQR Provider Contact Time: Guidelines	Guidance for abstracting for OP-20			
Arrival Time Guidelines	Guidance for abstracting ED Arrival Time for OP-18			
ED Departure Time: Guidelines	Guidance for abstracting ED Departure Time for OP-18			
Hospital OQR Reason for Delay in Fibrinolytic Therapy Guidelines	Guidance for abstracting OP-1 and OP-2			
Hospital OQR Measures Submitted Via a Web-Based Tool: Submission Guidelines	Support for data entry into the web-based tools for current year's Payment Determination			
Hospital OQR Measures Submitted Via a Web-Based Tool: Sampling Guidelines	Detailed information on sample size determination for web- based measures			

Endoscopy Tools

Endoscopy	/ Tools
Endoscopy Tool OP-29 and OP-30	Instructional data collection template for OP- 29 and OP-30
OP-29: Appropriate Follow-Up Interval for Norr	nal Colonoscopy in Average Risk Patients
Endoscopy Tool OP-29 Flow Chart	Diagram of data collection for OP-29
Denominator Codes for OP-29	CPT® codes to use for OP-29
Fact Sheet for OP-29	Guidance for collecting data for OP-29
OP-30: Colonoscopy Interval for Patients v Avoidance of Inap	vith a History of Adenomatous Polyps- propriate Use
Endoscopy Tool for OP-30 Flowchart	Diagram of data collection for OP-30
Denominator Codes for OP-30	CPT® codes to use for OP-30
Fact Sheet for OP-30	Guidance for collecting data for OP-30



More Tools



Cataract	Tools
OP-31: Cataracts – Improvement in Patient's Cataract S	Visual Function within 90 Days Following urgery
OP-31 Data Collection Guidelines	Guidance for collecting data for OP-31
OP-31 Data Collection Tool	Data collection log for OP-31
External Beam Radi	iotherapy Tools
OP-33 Flowchart	Diagram of data collection for OP-33
OP-33: Fact Sheet	Guidance for collecting data for OP-33
Helpful Resource	es from CMS
OPPS CY 2017 Final Rule, Federal Register, Vol. 81, No. 219 for the Hospital OQR Program	Current governing regulations for the Hospital OQR Program
Proposed Rule for CY 2017 published July 6. 2016	Changes proposed for finalization in November 2016



www.qualitynet.org

Unlocking the Chest

Tools in This Chest

Tools we will discover:

- ListServes/Notifications
- Specifications Manual
- Information on the Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)
- QualityNet Reports

Program Selections

www.qualitynet.org

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OAS CAHPS® Website

www.oascahps.org

Outpatient and Ambulatory Surgery CAHPS Survey The official website for news and information about the OAS CAHPS Survey	Login
Home General Information Training For Vendors Survey Materials Data Submission For Facilities	
You are here: Home	Back
 Welcome to the Outpatient and Ambulatory Surgery CAHPS (OAS CAHPS) website OAS CAHPS Survey is designed to measure patients' experiences with care received from Medicare-certified hospital outpatient departments (HOPDs) and ambulatory surgery centers (ASCs). Information about the following topics is available under the General Information menu: About OAS CAHPS. This section provides an overview and background information on the survey development. National Implementation. This section provides an overview of the voluntary national implementation program which begins January 2016. Mode Experiment. This section provides an overview of the rall 2015 Mode Experiment for OAS CAHPS. Registration and Application Process. This section outlines the steps required for participating hospitals and ASCs to register for OAS CAHPS and for survey vendors to apply for approved vendor status. For more information, please contact oascahps@rti org or call 1<u>-866-590-7468</u>. For information about the availability of auxiliary aids and services, please visit: http://www.medicare.gov/about-us/nondiscrimination/nondiscrimination-notice.html Para información sobre esta encuesta o para hablar con alguien en español, por favor, comuníquese con el Personal de Coordinación de Encuestas de OASCAHPS por correo electrónico a la dirección oascahps@rti org o puede llamar al número gratuito <u>1-866-590-7468</u>. 	Quick Links For Hospitals/ASCs • Getting Started • Register to Participate • Approved Survey Vendors • 2017 Final Rule • How to Authorize Vendors For Vendors • Vendor Registration
Recent Announcements Guidance on Providing Response Data for About You Questions (Q36 and Q37) to Client Facilities Posted on: Thursday, February 16, 2017 Additional Guidance on Supplemental Questions Vendors and Their Client HOPDs and ASCs Use in the OAS CAHPS Survey Posted on: Thursday, February 16, 2017 Options for Reporting "About You" Response Data to HOPDs and ASCs when there are Fewer than 11 Responses in One or More Categories Posted on: Monday, January 23, 2017 Final Calendar Year (CY) 2016, Quarter 3 Data Submission Deadline Reminder Posted on: Wednesday, January 04, 2017 Calendar Year (CY) 2016, Quarter 3 Data Submission Deadline Reminder Posted on: Thursday, December 22, 2016	

Specifications Manual

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Utilizing Your Equipment

Running Reports

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Frequently Used Reports

The reports we will discuss today:

- Provider Participation Report
- Claims Detail Report
- Submission Detail Report
- Submission Summary Report

Let's Start the Search

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QualityNet Secure Portal Established by the Centers for Medicare and Medicaid Services (CMS), QualityNet provides healthcare quality improvement news, resources, data reporting tools and applications for use by healthcare providers and others. QualityNet is the only CMS-approved site for secure communications and healthcare quality data exchange between: Quality Improvement Organizations (QIOs), Hospitals, Physician offices, Nursing homes, End Stage Renal Disease (ESRD) networks, facilities, and data vendors.		QualityNet News Hospital Compare updated with results for three value-based pi Hospitals randomly selected fo data validation CMS issues blanket exemption adversely affected by Hurricand More News 	n FY 2017 measure urchasing programs r FY 2019 inpatient I for providers e Matthew
If you need further assistance contact the QualityNet Help Desk		Announcements from QualityNet • Maintenance downtime schedu • Maintenance downtime schedu • Maintenance downtime schedu	t Team Iled through Dec. 12 Iled for Dec. 8-12 Iled for Nov. 18-21
Quality Programs		More Announcements	
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Provider Participation Report



Claims Detail Report

Select the Hospital Reporting–Annual Payment Update Report category:

- Monitors claims submitted to Medicare during a specified quarter
- Includes only Medicare Fee-for-Service claims
- Does not include ED-Throughput claims due to the very high volume of claims submitted each quarter

More Treasures

Select the Hospital Reporting–Feedback Reports category:

- Submission Detail Report
 - Displays detailed information of selected uploaded data grouped by provider into the warehouse
 - Displays error codes
- Submission Summary Report
 - Displays the number of charts accepted or rejected from the warehouse for each measure set
 - Displays error codes



In Summary

Gems We Have Covered

Today we have discussed:

- Tools and resources on the Support Contractor website: <u>www.qualityreportingcenter.com</u>
- Information accessible via the QualityNet website: <u>www.qualitynet.org</u>
- Reports available through the Secure Portal of QualityNet and how to run them

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 separate from registering for the webinar. If you have not registered at the Learning Management Center, you will not receive your certificate.
 - Please use your **personal** email so you can receive your certificate.
 - Healthcare facilities have firewalls that block our certificates.

CE Certificate Problems?

- If you do not immediately receive a response to the email you used to register in the Learning Management Center, a firewall is blocking the survey link.
- Please go back to the New User link and register your personal email account.
- If you continue to have problems, please contact Deb Price at <u>dprice@hsag.com</u>.

CE Credit Process: Survey

Please provide any additional comments	
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10. What is your overall level of satisfaction with this presentation?	
◯ Very satisfied	
Somewhat satisfied	
O Neutral	
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◯ Very dissatisfied	
If you answered "very dissatisfied", please explain	
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11 What tonics would be of interest to you for future presentations?	
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12. If you have questions or concerns, please feel free to leave your name ar	nd phone number or email address and we will contact you.
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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://imc.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

Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015 First Name:
First Name: Last Name: Email: Phone: Register

CE Credit Process: Existing User

HSAG HEALTH SERVICES ADVISORY GROUP		this is a secure site please provide credentials to continue	
	Secure Login		
	Password:		

Thank You for Participating!

Please contact the Support Contractor if you have any questions:

 Submit questions online through the QualityNet Question & Answer Tool at <u>www.qualitynet.org</u>

Or

• Call the Support Contractor at 866.800.8756.