



# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

## Support Contractor

### PCHQR Program: Overview of Administrative Requirements

#### Presentation Transcript

#### Moderator/Speaker

**Lisa Vinson, BS, BSN, RN**

Program Lead, PCHQR Program

Hospital Inpatient Value, Incentives, and Quality Reporting VIQR

Outreach and Education Support Contractor SC

**January 24, 2018**

**2 p.m. ET**

**DISCLAIMER:** This transcript was current at the time of publication and/or upload onto the *Quality Reporting Center* and *QualityNet* websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to this transcript change following the date of posting, this transcript will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This transcript was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included in the presentation are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the transcript and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

**Lisa Vinson:**

Good afternoon. Thank you for joining today's webinar entitled, *PCHQR Program Overview of Administrative Requirements*. My name is Lisa Vinson and I serve as the Program Lead for the PPS-Exempt Cancer Hospital Quality Reporting, or PCHQR, Program within the Hospital Inpatient Value, Incentives, and Quality Reporting, or VIQR, Support Contractor. I will be your speaker for today's event. As the program's administrative requirements may be a very familiar topic for most participants, I feel that it was an important piece of the program to revisit. Especially, since some PCH providers have had some questions in the past related to establishing new *QualityNet* accounts for a new staff member; or a notification that may have been received from us (the support contractor) or *QualityNet*; or even an error message received within the *QualityNet Secure Portal*. So, today, I will be providing an overview of the PCHQR Program's administrative requirements with hopes of providing clarification for different encounters you may have experienced or may experience in the future. If you have questions about the content of today's presentation, please submit them using the chat function. As time allows, I will address these during today's event. If time does not allow all questions to be answered during today's event, the questions and answers will be posted on both *QualityNet* and *Quality Reporting Center* websites, along with the slides, recording, and transcript following this presentation. Also, if you registered for this event in advance, you should have received ListServe communications previously. The second of these, received yesterday, had a link to [QualityReportingCenter.com](http://QualityReportingCenter.com). On this website, the slides that we will be reviewing during today's presentation are available, should you wish to print a hardcopy for use during today's event, and/or to retain for future reference. On slide 6, let's take a look at some of the acronyms and abbreviations you will hear today.

This is our standard acronyms and abbreviations list. Those of which you will hear today, include what is provided in the table on this slide, such as C-M-S for Centers for Medicare & Medicaid Services, C-C-N for CMS Certification Number, D-A-C-A, or DACA, for Data Accuracy and Completeness Acknowledgement, N-O-P for Notice of Participation, and S-A for Security Administrator. As we go through the presentation, please

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

keep this slide readily available for use as a reference in the event you are not familiar with a particular acronym or abbreviation used. Slide 7, please.

So, the purpose of today's presentation is to provide an overview of the PCHQR Program's administrative requirements. As we review the objectives on the next slide, slide 8, we will identify what these requirements are.

At the end of this event, you, as a PCHQR Program participant, will be able to demonstrate an understanding of the program's administrative requirements by obtaining a *QualityNet* user account through completing the *QualityNet* registration process and completing the steps of the new user enrollment for the *QualityNet Secure Portal*; maintaining an active Security Administrator, or SA, in which we will be discussing the registration process for this role designation and responsibilities for whom assumes this role; verifying the status of the Notice of Participation, or NOP, via the *QualityNet Secure Portal*; and completing the Data Accuracy and Completeness Acknowledgement, or DACA, which will be electronically submitted for the upcoming data-submission period, effective July 1—which is the anticipated opening date—through August 31, 2018, as the submission deadline. We will now begin our discussion with an important first step, which is obtaining a *QualityNet* user account. Slide 9, please.

*QualityNet* was established by the Centers [for] Medicare & Medicaid Services, or CMS, to provide healthcare quality improvement news, resources, and data-reporting tools and applications used by healthcare providers and others. It is the only CMS-approved website for secure communications in healthcare quality; data exchange between quality-improvement organizations, or QIOs; hospitals; physician offices; nursing homes; end-stage renal disease, or ESRD, networks and facilities; and data vendors. Today, we will be focusing on three processes as it relates to getting started with *QualityNet*: the initial registration process; enrolling in the *QualityNet Secure Portal*; and registering for the Security Administrator user classification, all of which are administrative requirements for the PCHQR Program. Slide 10, please.

## Support Contractor

Getting started with *QualityNet* requires completion of a mandatory registration process. This process is used to maintain the confidentiality and security of healthcare information and data transmitted via the *QualityNet Secure Portal*. Again, this CMS-approved site for secure healthcare quality data exchange enables facility reporting. As you are aware, in order to participate and submit data for reporting in order to meet program requirements, a PCH must obtain a *QualityNet* user account and register for access to the *QualityNet Secure Portal*. Slide 11, please.

This is the starting point. This is what the *QualityNet* Registration page for the PCHQR Program looks like. This particular page can be accessed by clicking the “PCHQR Program *QualityNet* Registration” link above the image on this slide. As we move forward, we will be discussing the Security Administrator, or SA, user classification. However, we will now turn our attention to the *QualityNet Secure Portal*. Slide 12, please.

The *QualityNet Secure Portal* is the secure portion of *QualityNet*. It houses various applications for CMS quality reporting programs. There are terms and conditions that must be accepted by users of this system. These accounts are monitored to ensure compliance with Rules of Behavior and Terms of Use. These terms are accessible from the footer section of all *QualityNet* pages, specifically, the link that reads, “Terms of Use.” All users requesting access to the *QualityNet Secure Portal* must be individually approved and verified. For access to the *QualityNet Secure Portal*, a registered *QualityNet* user must complete the new user enrollment process, which we will look at closer on slide 13.

The steps outlined on this slide are for enrollment to access the *QualityNet Secure Portal* and first-time log-in procedure. Please note that the new user enrollment process only needs to be completed once. There are prerequisites for this process, which are [1] a completed *QualityNet* registration that in turn has allowed your organization’s Security Administrator to provide you with a *QualityNet* user ID and password, and [2] a Symantec VIP multi-factor credential application downloaded to your PC, tablet, or smartphone. Slide 14, please.

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

There are resources always available at your disposal in the *QualityNet* page. If you need user information or information pertaining to the secure portal enrollment and/or registration process, you can access the Resources page, as indicated by the red box and arrow. By clicking the “Secure Portal Resources” link, you will be taken to the Resources page, as shown on slide 15.

The *QualityNet Secure Portal* Resources page, which is accessible via the link provided at the top of this slide, houses several links that provide valuable information. As displayed here, there are various secure portal user guides, frequently asked questions, and even training videos for providers and vendors. Slide 16, please.

The PCHQR Program requires every facility to designate at least one active *QualityNet* Security Administrator, or SA. The *QualityNet* Security Administrator facilitates the registration process for other users at the PCH. Providers submitting data, or using a vendor to submit data on their behalf, and accessing secured reports via the *QualityNet Secure Portal*, are required to designate an SA. Now, let’s take a look at the responsibilities of the SA. Slide 17, please.

The PCH *QualityNet* SA is responsible for creating, approving, editing, and/or terminating *QualityNet* user accounts for the PCH; assigning user roles for Basic Users within the PCH in order to ensure users’ access to the secure web-based application; monitoring *QualityNet* usage at the PCH to ensure security and confidentiality are maintained; and serving as the point of contact at the PCH for information regarding *QualityNet*. Slide 18, please.

So, this slide captures the *QualityNet* Home screen, which I’m sure you all are very familiar with. As denoted by the red box on the left-hand side, the *QualityNet* Registration box has a “Cancer Hospitals” link. By clicking this link, you will be taken to the screen we briefly discussed back on slide 11, the PCHQR *QualityNet* Registration page, which we will now see again and discuss further. Slide 19, please.

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

As you can see, there are two classifications to choose from: Security Administrator, as indicated by the red box, or Basic User. Any user that is not designated as a *QualityNet* SA or a Security Designate is considered a nonadministrative, or Basic User. As a Basic User, various roles to fit job needs can be assigned, such as accessing reports; authorizing vendors to submit data; managing measures; managing the Notice of Participation, or NOP; managing security; and viewing or editing online forms. However, for the purposes of this presentation, we will focus on the SA registration, as this is one of the program requirements. The “Security Administrator” link in the red box will take you to the SA Registration page, on slide 20.

So, how do you register as a Security Administrator? You will start with the SA registration packet. This is a five-page PDF file that contains all of the details necessary to complete the *QualityNet* SA Registration Form and SA Authorization Form, which are required to be completed in order to request access to the *QualityNet Secure Portal*. Slide 21, please.

The SA registration packet includes the *QualityNet* Security Administrator Registration and Authorization Forms. Both forms are required to be filled out in their entirety; and for your convenience, the registration packet includes this checklist here on this slide. By completing the tasks listed, this will ensure that all required information has been provided and will avoid delays in processing your registration. It is important to note the last checklist item. Photocopies or faxes of these forms will not be accepted. Therefore, PCHs are strongly encouraged to retain copies of all forms for its records. So, once you have validated that all tasks have been completed, the forms will need to be mailed per the instructions provided in the packet. When processing is complete, the account is activated, and a welcome email is sent to the account owner at the email address supplied on the registration form. This email will contain the *QualityNet* user ID. The Security Administrator who created the account should provide a temporary password to you. The new user is now able to access the *QualityNet Secure Portal* to change the password, answer security questions, complete the identity proofing, and register their two-factor credential. Slide 22, please.

## Support Contractor

So, there are two basic, but very important, key takeaways for a Security Administrator. First, it is a program requirement to have at least one active SA. However, CMS highly recommends designating a minimum of two: one to serve as the primary SA and the other to serve as the alternate; and second, the SA registration process we just discussed is required for each individual user. As the designated SA for your organization, in the event you are no longer to serve in that capacity, you would not be able to simply transfer your rights as an SA to the new individual assuming that role. The new user would need to complete the required SA registration process and have their own individual account established. Slide 23, please.

Typically, around the beginning of each month, the PCH SA receives an action-required email notification regarding their Security Administrator account status, indicating that the account is either expired or will be expiring soon. If the account status is expiring soon, this means that your current password is due to expire. To avoid an expired status, you would need to log in to your *QualityNet* account using your username, current password, and security code. On the My Account page, you are able to make changes to your account, including changing the password. You will need to make this change by the password-expiration date provided in the email or in *QualityNet* on the My Account page. Once this has been completed, your account status should be active. If your account status is expired, this means that you have not logged in to your account or changed your *QualityNet* password for 60 days, or two months. You will need to go to the *QualityNet* Log In page and enter your username, expired password, and security code. You will then receive a message indicating that your password has expired. Once you click “OK,” a new screen will appear, prompting you to enter a new password. Clicking “Continue” will take you to a log-in screen, where you will enter your username, new password, and security code. Now, your account status should be active. As a rule of thumb, be sure to sign in to the secure portal at least every 60 days and change your password at least every 60 days. Of course, more frequent access and updating will keep your account active. Slide 24, please.

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

There will be times when you follow the instructions provided, but that may not resolve your issue or if you are unable to log in to your *QualityNet* account for an extended amount of time, say 120 days, which causes your account to be inactivated. In these instances, when additional assistance is required, please contact the *QualityNet* Help Desk. The Help Desk technical support staff can be reached either by phone or email, as indicated on this slide. Remember, before ending the call, to take note of the incident number assigned to you, in the event you need to follow up. We will wrap up the didactic portion of today's event, discussing the last two administrative requirements: the Notice of Participation and the Data Accuracy and Completeness Acknowledgement. Let's begin with the Notice of Participation on slide 25.

PCHs who elected to participate in the PCHQR Program were required to complete a Notice of Participation, or NOP. As all of the PCHs have completed the NOP, by submitting it indicates that the PCH agreed to participate and publicly report its measure rates. It is important to note that hospitals with a PCHQR NOP will remain active program participants until a withdrawal is submitted via the *QualityNet Secure Portal*. So, now, we will briefly review the steps for verifying your NOP status. Slide 26, please.

The NOP, which is online, can be accessed via the *QualityNet Secure Portal* from the My Tasks screen, as depicted here on this slide. By selecting the "View/Edit Notice of Participation, Contacts, Campuses" link, as indicated by the red box, you will be taken to the next screen on slide 27.

This screen may appear differently for each user, dependent upon how many facilities the user is affiliated with. A user who is affiliated with only one facility will only see their facility's six-digit CMS certification number, or CCN, when on this screen. However, users who are affiliated with more than one facility will be prompted to enter the CCN, as shown on this slide by the red arrow. Then, by selecting "Next," there will be a few menu options to choose from. Slide 28, please.

On this menu screen, a PCH user has the choice to select an action to be completed. These options are listed in the red box. You can "View, Add,

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

or Update” the “NOP [Notice of Participation],” “Contacts,” or “Additional Campuses.” Two points to make here would be that the “Additional Campuses” link may not apply to all PCHs, since it is applicable for facilities that have more than one physical location, but are licensed and reimbursed under the same CCN; and the contact information is required to be entered, if this is the first time the NOP is being added. At least two facility contacts must be entered on the contacts screen. This information is used for sending email alert notifications if edits are made within the NOP application. So, let’s focus on the “Notice of Participation” link. Slide 29, please.

Since the PCHs have already completed their NOP, this slide is simply highlighting what you should expect to see if you need to verify your NOP status. The NOP status should read, “Participating” and “Carry Forward” should be listed under the “Added By” column for each respective fiscal year. For the PCHs, the Notice of Participation is an automatic renewal process. Therefore, each year, the new NOP was added by Carry Forward. As the denoted on this slide by the red circle, this is indicating the system carried it forward. It will continue to carry forward unless rescinded or ended by the participating PCH, also known as the “Request to be withdrawn from participation” option. Slide 30, please.

Beginning with program year 2015 for fiscal year 2016, PCHs were required to complete an online Data Accuracy and Completeness Acknowledgement, or DACA, attesting to the accuracy and completeness of the data entered. Due to a system-capacity issue for the following two program years, 2016 (applicable to fiscal year 2017) and program year 2017 (applicable to fiscal year 2018), the DACA had to be submitted manually, which was via secure fax. However, for fiscal year 2019, I am pleased to say that the DACA requirement is returning to an electronic process, which we will briefly discuss now, beginning with slide 31.

Similar to accessing the NOP, the online DACA will also be available via the *QualityNet Secure Portal’s* My Tasks page, just as it was before. It will be accessible by selecting the link found under the “Manage Measures” header, as shown here on the slide by the red circle. The link is

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

entitled, “View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA).” By selecting this link, you will be taken to the following screen on slide 32.

Here, you are selecting the appropriate program, which is as indicated by the red arrow, “PPS Exempt Cancer Hospitals DACA.” Slide 33, please.

Please note that the next two slides, including this one, depict what a PCH user would see at this current time, if they accessed their facility’s DACA. Updated information to provide visually, such as screenshots, was not available during the time the presentation materials were being developed. As we go through these slides, I will point out what will be different, effective July 1, when the online fiscal year 2019 DACA submission period is anticipated to open. So, with that being said, for the fiscal year drop-down menu, 2019 will be available to select. Presently, the fiscal year 2016 electronic DACA is viewable, and I have used this to help visualize what you will see when the fiscal year 2019 DACA becomes available. Slide 34, please.

So, this is how the electronic DACA will appear. Again, keeping in mind that there will be changes to make it applicable for fiscal year 2019, the changes you will see will be indicated by the red circles on the slide. Here, you will note that the fiscal year will be updated to 2019, and the submission period, which will be updated to reflect July 1, 2018, which is the anticipated opening date, through August 31, 2018, as the submission deadline or closing date. Slide 35, please.

The verbiage on the DACA will be updated accordingly and will be very similar to the text of the previous DACAs submitted manually. Again, the appropriate edits will be made to reflect the correct fiscal years that cover all the PCHQR data reported. At the bottom of the screen, you will note that the acknowledgement will be electronically stamped with the submitter’s name, position or title, date, and time. As we get closer to the submission period, we will be sending notifications, and providing more education, regarding this process. Slide 36, please.

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

Now that the didactic portion has been wrapped up, we will conclude today's event, as always, by reviewing important upcoming information for the PCHQR Program, beginning on slide 37.

On December 20, 2017, you should have received the *Fall 2017 Quality Reporting Center Newsletter*, which alerted participants of the new NHSN Agreement to Participate and Consent. As the slide states, the new NHSN agreement is for all current NHSN users who enrolled in NHSN prior to December 2, 2017, which includes primary contacts and facility administrators. As of January 23, 2018, the updated consent was made available for review and electronic signature [NOTE: The updated NHSN Agreement to Participate and Consent will now be available January 30, 2018.] The deadline to complete this task is April 14, 2018. Questions pertaining to this process will need to be directed to the NHSN Help Desk at [nhsn@cdc.gov](mailto:nhsn@cdc.gov); and please be sure to include "NHSN Re-consent" in the subject line. If, for some reason, you did not receive the fall 2017 newsletter, it is accessible by clicking the link provided on this slide. Also, you will want to be sure that you are registered to receive the PCHQR Program notifications, also commonly referred to as ListServes. Slide 38, please.

The next quarterly submission of the CST and HAI data is due by February 15, 2018. This will include quarter two 2017 CST chemo data for breast and colon, quarter four 2016 CST hormone data, and quarter three 2017 HAI data. And, the next scheduled outreach and education event entitled, *2018 Updates to Measures*, will be held Thursday, February 22. As future events are in the process of being developed, please continue to provide feedback on topics you would like to see presented. You can always provide your suggestions via the post-event survey, specifically question number 13, and the *QualityNet* Q&A tool, which I will recap before we end today's event. Also, as a reminder, the February 15 data-submission period does fall under the CMS granted, hurricane-related exception for those PCHs impacted by Hurricanes Harvey and Irma. This takes us to our next slide, number 39, which provides some more information related to this.

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

The hurricane-related ECE is still effective for those PCHs in impacted areas for the upcoming data-submission deadlines detailed here on this slide. CMS continues to closely monitor the situation, and as adjustments are made, CMS will communicate them accordingly. So, be sure to monitor your inbox for these communications. Slide 40, please.

Here are key dates for the 2018 April and July *Hospital Compare* preview periods and releases. Please remember that all dates for public reporting are subject to change. As we get closer to the preview periods and refresh dates, we will always notify you of the exact dates via ListServe. Slide 41, please.

As the support contractor, we are available to answer questions you may have. The *QualityNet* Questions & Answers tool was discussed more in depth during the September 2017 event. As a quick overview, illustrated on this slide by the red box on the right-hand side, is the *QualityNet* Questions & Answers tool for the PCHs, which is found on the *QualityNet* Home page. Also, remember that if you are a first-time user, you will need to complete the registration process to establish your log-in credentials. Slide 42, please.

This slide highlights the ability to query the tool's database for previously answered questions. You have a few options, as denoted on this slide. You can type a question in the search box, as depicted by the red box; or you can select an answer category to search previously asked questions; or you can search questions, which are sorted by most popular answers. Once your question has been successfully submitted, you will be issued an incident, or reference, number to maintain for your records. Questions submitted via this tool are typically answered within two business days. Slide 43, please.

Lastly, I would just like to remind all program participants that at any time you need to update your facility's contact information, please complete and submit the Hospital Contact Change Form. This includes any changes regarding key contacts at the hospital, such as the CEO or administrator, PCHQR specialist, NHSN contact, and/or *QualityNet* Security Administrator. This helps to ensure that we have the most up-to-date

# PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

---

## Support Contractor

information so that the facility receives all necessary correspondences regarding the PCHQR Program. The Hospital Contact Change Form is located in two locations. The first location is on the *QualityNet* PCHQR Program Resources page. For your convenience, a link to this page has been provided at the top of this slide, directly above the screen capture. Slide 44, please.

The second location is on *Quality Reporting Center*, specifically on the PCHQR Program Resources and Tools page. Again, a link has been provided at the top of the slide that will take you directly to the page illustrated here. If you have any questions or concerns in regards to completing this document, please feel free to contact the VIQR Support Contractor. Next slide, please.

In closing, I would like to thank you for your time and attention during today's event. I hope that the information provided was beneficial. Thank you again and enjoy the remainder of your day.