

Welcome!

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- This event is being recorded.



Troubleshooting Audio

Audio from computer speakers breaking up?

Audio suddenly stop?

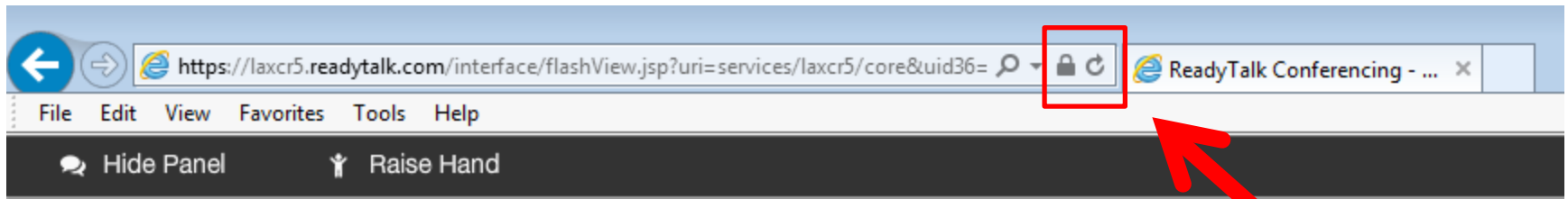
Click Refresh icon

– or –

Click F5



F5 Key
Top Row of Keyboard

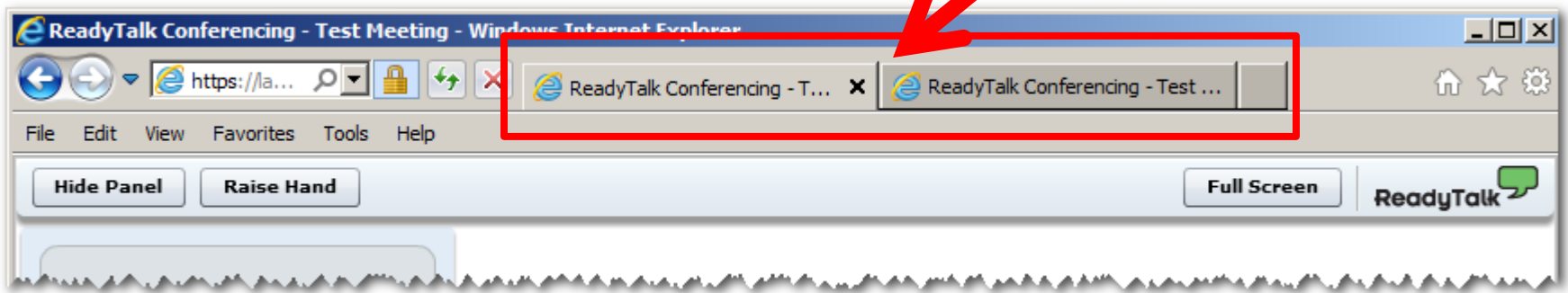


Location of Buttons

Refresh

Troubleshooting Echo

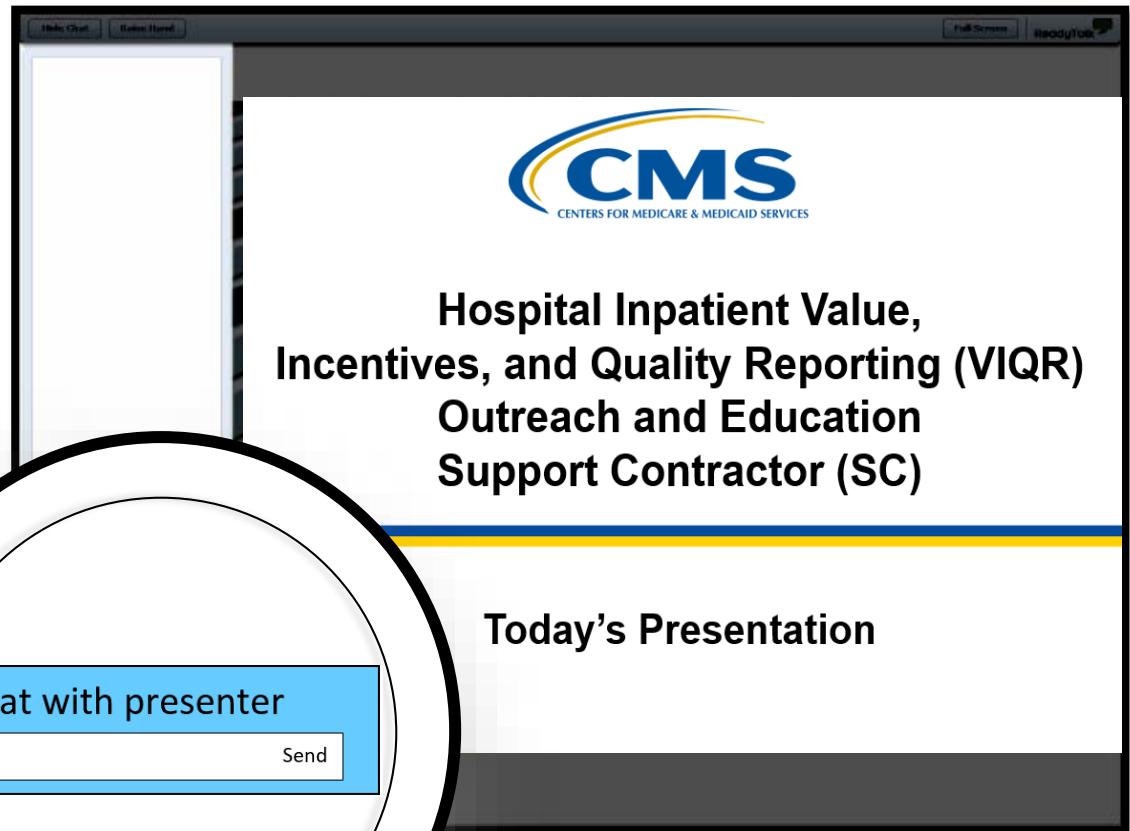
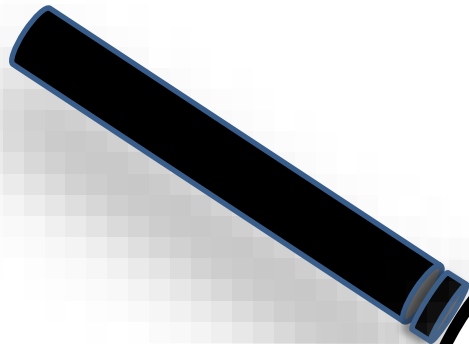
- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event (multiple audio feeds.)
- Close all but one browser/tab and the echo will clear up.



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.





PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report

Lisa Vinson, BS, BSN, RN

Program Lead

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)

March 22, 2018

Acronyms and Abbreviations

CE	Continuing education	N/A	Not Applicable
CMS	Centers for Medicare & Medicaid Services	NHSN	National Healthcare Safety Network
CST	Cancer-Specific Treatment	NQF	National Quality Forum
EBRT	External Beam Radiotherapy for Bone Metastases	OCM	Oncology Care Measure
ECE	Extraordinary Circumstances Exception	PCH	PPS-Exempt Cancer Hospital
FY	Fiscal Year	PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
HAI	Healthcare-associated infection	Q	Quarter
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	SC	Support contractor
HCP	Healthcare personnel	WBDCT	Web-based data collection tool
HSAG	Health Services Advisory Group	VIQR	Value, Incentives, and Quality Reporting

Purpose

This presentation will provide participants in the PCHQR Program with a comprehensive review of the web-based data collection tool (WBDCT) and the PPS-Exempt Cancer Hospital (PCH) report; both of which are located within the *QualityNet Secure Portal*.

Objectives

Upon completion of this program, participants will be able to:

- Effectively navigate the WBDCT to enter their Cancer-Specific Treatment (CST), Oncology Care Measure (OCM), and External Beam Radiotherapy for Bone Metastases (EBRT) data.
- Review their data to ensure accuracy and completeness.
- Access the PCH report to validate their data.

PCHQR Program Refresher:
Utilizing the Web-Based Data Collection Tool and PCH Report

QualityNet Secure Portal

Log In to *QualityNet Secure Portal*

QualityNet Homepage

The screenshot shows the QualityNet homepage. At the top left is the QualityNet logo. To its right is a red box containing the text "Log in to QualityNet Secure Portal (formerly MyQualityNet)" and a "Log In" button. Further right is a search bar with the word "Search" next to it. Below the logo is a navigation bar with "Home", "My QualityNet" (highlighted with a red box), and "Help". Under "My QualityNet" is a row of links: "Hospitals - Inpatient", "Hospitals - Outpatient", "Physician Offices", "Ambulatory Surgical Centers", "PPS-Exempt Cancer Hospitals", "ESRD Facilities", "Inpatient Psychiatric Facilities", and "Quality Improvement". The main content area has three columns. The left column is titled "QualityNet Registration" and lists: "Hospitals - Inpatient", "Hospitals - Outpatient", "Physician Offices", "ASCs", "Cancer Hospitals", "ESRD Facilities", and "Inpatient Psychiatric Facilities". The middle column has a yellow background with the heading "QualityNet downtime March 2-3" and text about system maintenance. Below this is a "QualityNet News" section with a "More News »" link. The right column has a red box containing the heading "Log in to QualityNet Secure Portal" and a "Login" button. Below this are links for "Download Symantec ID (required for login)", "Portal Resources", and "Secure File Transfer Resources".

QualityNet

Log in to QualityNet Secure Portal (formerly MyQualityNet)
Log In

Search

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
- ASCs
- Cancer Hospitals
- ESRD Facilities
- Inpatient Psychiatric Facilities

QualityNet downtime March 2-3

Due to system maintenance, QualityNet.org and the QualityNet Secure Portal may be intermittently unavailable from 7 p.m. CT on March 2, through 7 p.m. CT, on March 3. This will affect submissions to data warehouses and access to applications within the QualityNet Secure Portal.

QualityNet News [More News »](#)

Log in to QualityNet Secure Portal

Login

- Download Symantec ID (**required** for login)
- Portal Resources
- Secure File Transfer Resources

Choose Your *QualityNet* Destination

 | 
Centers for Medicare & Medicaid Services


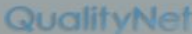
Choose Your QualityNet Destination

Please select your primary quality program to reach the correct login screen for your QualityNet portal.

[Secure File Transfer](#)

Select your primary quality program:

- [End-Stage Renal Disease Quality Reporting System](#)
- [Ambulatory Surgical Center Quality Reporting Program](#)
- [PPS-Exempt Cancer Hospital Quality Reporting Program](#)
- [Inpatient Hospital Quality Reporting Program](#)
- [Inpatient Psychiatric Facility Quality Reporting Program](#)
- [Outpatient Hospital Quality Reporting Program](#)
- [Physician Quality Reporting System](#)
- [Quality Improvement Organizations](#)

[QualityNet Home](#)  | 

A federal government website managed by the Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244



Required Log In Credentials

CMS.gov | QualityNet
Centers for Medicare & Medicaid Services

Log In to QualityNet *Required Field
Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit.

* User ID
* Password
* Security Code

CANCEL SUBMIT

Help
Start/Complete New User Enrollment
Forgot your password?
Trouble with your Security Code?
Need to register for a QualityNet account?

VIP Access
Credential ID: VSS188252286
Security Code: 545759
Symantec VeriSign & ID Protection

QualityNet Home CMS.gov QualityNet
A federal government website managed by the Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244

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

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Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

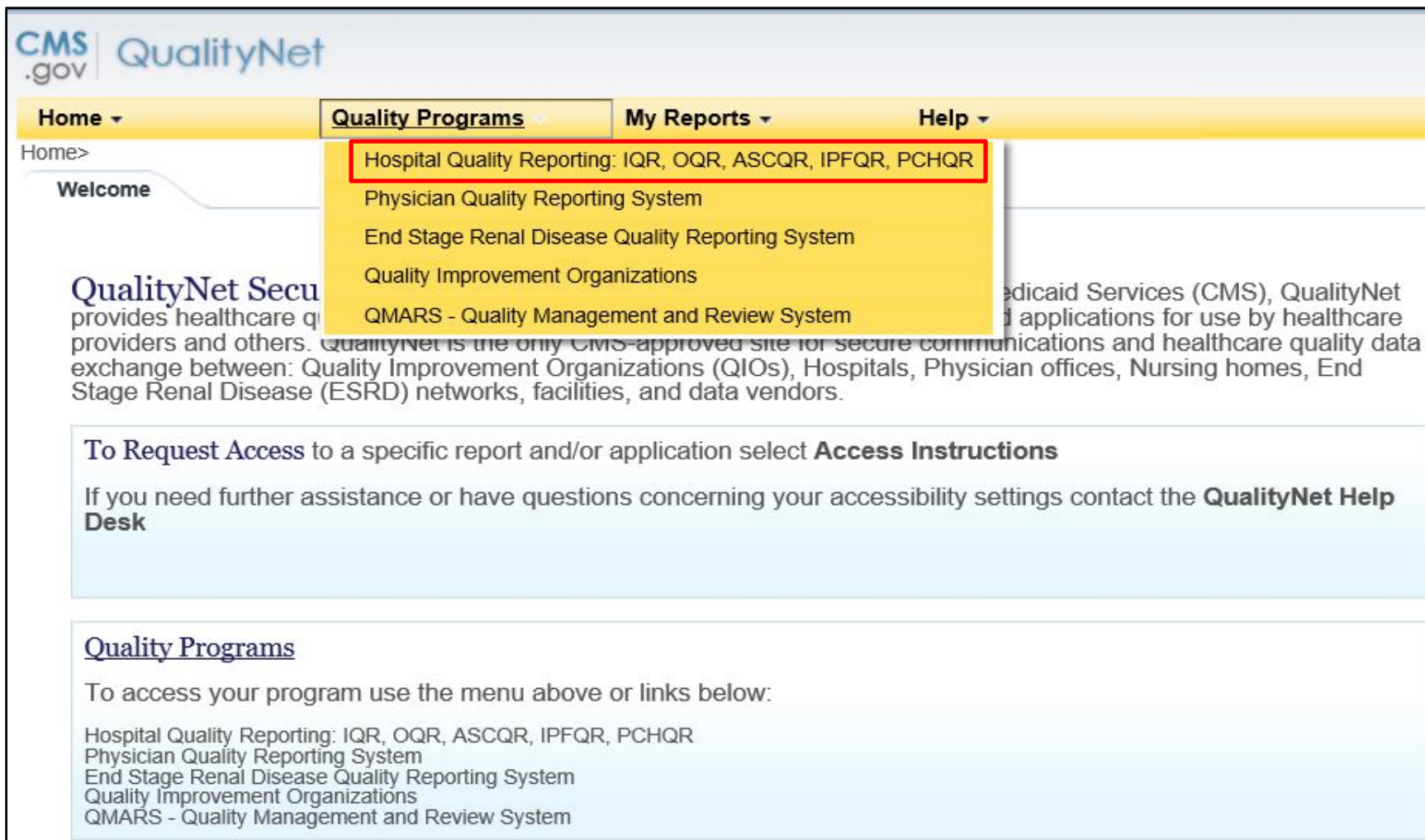
****WARNING* *WARNING* *WARNING****

I accept the above Terms and Conditions.

I Accept

I Decline

Choose Your Quality Program



The screenshot shows the CMS QualityNet website interface. At the top, the CMS logo and 'QualityNet' text are visible. Below this is a navigation bar with four tabs: 'Home', 'Quality Programs', 'My Reports', and 'Help'. The 'Quality Programs' tab is selected, and its dropdown menu is open, listing five options: 'Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR', 'Physician Quality Reporting System', 'End Stage Renal Disease Quality Reporting System', 'Quality Improvement Organizations', and 'QMARS - Quality Management and Review System'. The first option in the dropdown is highlighted with a red rectangular border. To the left of the dropdown, the 'Home' tab is also visible, with a 'Home>' link below it. Below the navigation bar, there is a 'Welcome' section with a paragraph of text about QualityNet's purpose. Below this, there is a section titled 'To Request Access' with instructions on how to request access and a link to 'Access Instructions'. At the bottom, there is a section titled 'Quality Programs' with a list of links to the same five programs listed in the dropdown menu.

CMS QualityNet

Home ▾ **Quality Programs ▾** My Reports ▾ Help ▾

Home>

Welcome

QualityNet Security

provides healthcare quality data to Medicare and Medicaid Services (CMS), QualityNet 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.

Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR

Physician Quality Reporting System

End Stage Renal Disease Quality Reporting System

Quality Improvement Organizations

QMARS - Quality Management and Review System

To Request Access to a specific report and/or application select **Access Instructions**

If you need further assistance or have questions concerning your accessibility settings contact the **QualityNet Help Desk**

Quality Programs

To access your program use the menu above or links below:

Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR

Physician Quality Reporting System

End Stage Renal Disease Quality Reporting System

Quality Improvement Organizations

QMARS - Quality Management and Review System

Manage Measures

CMS .gov QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR


Quality Reporting System: My Tasks

Hospital Reporting Inpatient / Outpatient View / Edit Population and Sampling	Manage Measures View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)
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PCHQR Program Refresher:
Utilizing the Web-Based Data Collection Tool and PCH Report

Web-Based Data Collection Tool

Select a Program

 **QualityNet**

[Home](#) ▾ [Quality Programs](#) ▾ [My Reports](#) ▾ [Help](#) ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

[View/Edit Structural/Web-Based Measures/Data Acknowledgement \(DACA\)](#)

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.

Meaningful Use (MU) is a CMS Medicare and Medicaid program that awards incentives for using Certified Electronic Health Record Technology (CEHRTs) to improve patient care. To achieve Meaningful Use and avoid penalties, providers must follow a set of criteria that serves as a roadmap for effectively using an EHR.

Select a Program

- [Inpatient Structural Measures/DACA](#)
- [Inpatient Web-Based Measures](#)
- [Inpatient Psychiatric Facilities Web-Based Measures/DACA](#)
- [PPS Exempt Cancer Hospitals Web-Based Measures](#)
- [PPS Exempt Cancer Hospitals DACA](#)

Select a Fiscal Year

The screenshot shows the CMS QualityNet web interface. At the top, the CMS.gov logo and 'QualityNet' are displayed. Below this is a navigation bar with links: Home, Quality Programs, My Reports, and Help. A breadcrumb trail indicates the current path: Home > Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA). The main heading is 'Start Structural/Web-Based Measures'. Below this, the section is titled 'PPS Exempt Cancer Hospitals Web-Based Measures'. On the left, a text box explains that Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. On the right, there is a form with a label '* Fiscal Year:' and a dropdown menu currently showing '2018'. A red arrow points to the dropdown menu, and a tooltip above it says 'Please select a Fiscal Year'. Below the dropdown is a large 'Continue' button, which is highlighted with a red rectangle.

CMS.gov QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

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.

* Fiscal Year: Please select a Fiscal Year

Continue

Determining the Correct Fiscal Year

PCHQR Program WBDCT Guideline by Due Date

Due Date	Measure	Fiscal Year	Time Period
02/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	Q2 2017 (4/1/17–6/30/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2017	Q4 2016 (10/1/16–12/31/16)
05/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	Q3 2017 (7/1/17–9/30/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	Q1 2017 (1/1/17–3/31/17)
08/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	Q4 2017 (10/1/17–12/31/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	Q2 2017 (4/1/17–6/30/17)
	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2019	CY 2017 (1/1/17–12/31/17)
11/15/2018	Adjuvant Hormonal Therapy (NQF #0220)	2018	Q3 2017 (7/1/17–9/30/17)

Entering Q3 2017 Colon and Breast Data

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Web-Based Measures | FY 2018

Quarter-Annual Reporting Period Selection

Select a reporting period to view or manage measure data at the quarter or annual level.

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

Submission Period	With Respect to Reporting Period	Action
Varies By Measure	January 1, 2017 - March 31, 2017	Select Qtr - 1
Varies By Measure	April 1, 2017 - June 30, 2017	Select Qtr - 2
Varies By Measure	July 1, 2017 - September 30, 2017	Select Qtr - 3
Varies By Measure	October 1, 2017 - December 31, 2017	Select Qtr - 4
07/01/2017 - 08/15/2017	January 1, 2016 - December 31, 2016	Select Annual

Back

Entering Q3 2017

Colon and Breast Data (Continued)

CMS.gov

QualityNet

Home ▾Quality Programs ▾My Reports ▾Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start

Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Submission Period
04/01/2018 - 05/15/2018

With Respect to Reporting Period
07/01/2017 - 09/30/2017

Web-Based Measures | FY 2018

Provider ID	NQF #0223	NQF #0559	NQF #0220
999999	Available	Available	Not Available

Please note - The "Status" will vary:

- **"Available"** means the data submission period is open.
- **"Not Available"** means the data submission period is not open.
- **"Completed"** appears after data have been submitted.
 - If data submission period is still open, data can be edited.
 - If data submission period is closed, data can only be viewed.

Back

Payment Year Selection

Colon Data Entry Screen

The screenshot shows the CMS QualityNet interface. At the top, there's a navigation bar with links: Home, Quality Programs, My Reports, and Help. Below this is a breadcrumb trail: Home > Quality Programs > Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR > Manage Measures > View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA). The main heading is 'Start Structural/Web-Based Measures'. Below that, it says 'PPS Exempt Cancer Hospitals Web-Based Measures'. A table displays the following information: Provider (PPS-Exempt Cancer Hospital), CCN (999999), Submission Period (04/01/2018 - 05/15/18), and With Respect to Reporting Period (07/01/2017 - 09/30/2017). A link for 'Web-Based Measures | FY 2018' is marked as a required field. A note at the bottom states: 'If no data for measures, please enter zero. Do not leave any entry fields blank.'

Provider	CCN	Submission Period	With Respect to Reporting Period
PPS-Exempt Cancer Hospital	999999	04/01/2018 - 05/15/18	07/01/2017 - 09/30/2017

[Web-Based Measures | FY 2018](#) * Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.



Top portion of screen



Bottom portion of screen

The screenshot shows the NQF #0223: Adjuvant Chemotherapy Colon Cancer data entry screen. It has a section for 'Numerator' with a text input field containing the number 4. Below this is a section for 'Denominator' with another text input field containing the number 4. A 'Results' section at the bottom shows the percentage of patients under the age of 80 with AJCC III (lymph node positive) colon cancer for whom adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis, with a value of 100.0%. At the bottom of the screen, there are two buttons: 'Return to Summary' and 'Print'.

NQF #0223: Adjuvant Chemotherapy Colon Cancer

Numerator

* Please enter the number of patients identified as concordant (measure_status = "comp" or "consid") for NQF #0223 in the Rapid Quality Reporting System for the data reporting period.

4

Denominator

* Please enter the number of patients identified as eligible for the denominator for NQF #0223 in the Rapid Quality Reporting System for the data reporting period.

4

Results

Percentage of patients under the age of 80 with AJCC III (lymph node positive) colon cancer for whom adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis. 100.0%

Return to Summary Print

Additional options:

- Calculate button
- Submit button

Entering Q1 2017 Hormone Data

CMS.govQualityNet

Home

Quality Programs

My Reports

Help

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Web-Based Measures | FY 2018

Quarter-Annual Reporting Period Selection
Select a reporting period to view or manage measure data at the quarter or annual level.

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

Submission Period	With Respect to Reporting Period	Action
Varies By Measure	January 1, 2017 - March 31, 2017	Select Qtr - 1
Varies By Measure	April 1, 2017 - June 30, 2017	Select Qtr - 2
Varies By Measure	July 1, 2017 - September 30, 2017	Select Qtr - 3
Varies By Measure	October 1, 2017 - December 31, 2017	Select Qtr - 4
07/01/2017 - 08/15/2017	January 1, 2016 - December 31, 2016	Select Annual

Back

Entering Q1 2017 Hormone Data (Continued)

CMS.gov

QualityNet

Home

Quality Programs

My Reports

Help

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Submission Period
Varies by Measure

With Respect to Reporting Period
01/01/2017 - 03/31/2017

Web-Based Measures | FY 2018

Provider ID	NQF #0223	NQF #0559	NQF #0220
999999	Completed	Completed	Available

<

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Back

Payment Year Selection

Hormone Data Entry Screen

CMS.gov QualityNet

Home - Quality Programs - My Reports - Help -

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

[Start](#) Structural/Web-Based Measures

[PPS Exempt Cancer Hospitals Web-Based Measures](#)

Provider	CCN	Submission Period	With Respect to Reporting Period
PPS-Exempt Cancer Hospital	999999	04/01/2018 - 05/15/2018	01/01/2017 - 03/31/2017

[Web-Based Measures | FY 2018](#) * Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.



Top portion of screen



Bottom portion of screen

NQF #0220: Adjuvant Hormonal Therapy

Numerator

* Please enter the number of patients identified as concordant (measure_status = "comp" or "consid") for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

64

Denominator

* Please enter the number of patients identified as eligible for the denominator for NQF #0220 in the Rapid Quality Reporting System for the data reporting period.

67

Results

Percentage of female patients, age >18 at diagnosis, who have their first diagnosis of breast cancer (epithelial malignancy), at AJCC stage T1cN0M0, IB to III, whose primary tumor is progesterone or estrogen receptor positive recommended for tamoxifen or third generation aromatase inhibitor (considered or administered) within 1 year (365 days) of diagnosis. 95.5%

[Return to Summary](#) [Print](#)

Additional options:

- Calculate button
- Submit button

Entering OCM and EBRT Data

Due Date	Measure	Fiscal Year	Time Period
08/15/2018	Colon Cancer (NQF #0223)/ Breast Cancer (NQF #0559)	2018	Q4 2017 (10/1/17–12/31/17)
	Adjuvant Hormonal Therapy (NQF #0220)	2018	Q2 2017 (4/1/17–6/30/17)
	OCMs and EBRT (NQF #0382, #0383, #0384, #0389, #0390, and #1822)	2019	CY 2017 (1/1/17–12/31/17)

CMS.gov QualityNet

Home - Quality Programs - My Reports - Help -

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Web-Based Measures | FY 2019

Quarter-Annual Reporting Period Selection
Select a reporting period to view or manage measure data at the quarter or annual level.

Submission Period	With Respect to Reporting Period	Action
Varies By Measure	January 1, 2017 - March 31, 2017	Select Qtr - 1
Varies By Measure	April 1, 2017 - June 30, 2017	Select Qtr - 2
Varies By Measure	July 1, 2017 - September 30, 2017	Select Qtr - 3
Varies By Measure	October 1, 2017 - December 31, 2017	Select Qtr - 4
07/01/2018 - 08/15/2018	January 1, 2017 - December 31, 2017	Select Annual

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.

Back

Entering OCM and EBRT Data

CMS.gov

QualityNet

Home

Quality Programs

My Reports

Help

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Submission Period
07/01/2018 - 08/15/2018

With Respect to Reporting Period
01/01/2017 - 12/31/2017

Web-Based Measures | FY 2018

Provider ID	NQF #1822	NQF #0382	NQF #0383	NQF #0384	NQF #0389	NQF #0390
999999	Available	Available	Available	Available	Available	Available

<

>

Back

Payment Year Selection

EBRT Data Entry Screen

CMS.gov | QualityNet

Home ▾Quality Programs ▾My Reports ▾Help ▾

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

Provider PPS-Exempt Cancer Hospital	CCN 999999	Submission Period 07/01/2018 - 08/15/2018	With Respect to Reporting Period 01/01/2017 - 12/31/2017
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Web-Based Measures | FY 2019 * Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

NQF #1822: External Beam Radiotherapy for Bone Metastases

What is Sampling and How is it Beneficial?

- Sampling is the process of selecting a **representative** part of a population to estimate a hospital's performance, without collecting data for its entire population.
- By sampling, a hospital can effectively and efficiently measure its performance.
- Data collection burden is reduced since data are not collected for the entire population.

Sampling Requirements for the PCHQR Program

- PCHs are not required to sample their data.
 - If sampling offers minimal benefit, PCHs may choose to use all cases.
- PCHs may chose to oversample their data.
 - Sample sizes provided reflect the minimum required.

Population and Sampling Tips

- If you select “Not Sampled” for Sampling Frequency, your Initial Patient Population, sample size, and denominator should all be equal for NQF #0382, #0383, #0384, and #1822.
 - This may not be true for NQF #0389 and #0390 (prostate measures) due to numerator (post-denominator) exclusions.
- If your Initial Patient Population is ≤ 10 , sampling is not allowed, and you should select “Not Sampled” for Sampling Frequency.

Average Quarterly Initial Population Size “N”	Minimum Required Sample Size “N”
>125	25 cases
51–125	20 percent of the Initial Patient Population
10–50	10 cases
<10	No sampling; 100 percent of the Initial Patient Population

Population and Sampling Questions

For each quarter, you must answer the following questions:

- What was your hospital's sampling frequency?
 - Quarterly = sampled
 - Not Sampled = not sampled
 - N/A – Submission Not Required = No eligible population
- What was the Initial Patient Population?
- What was the sample size?

Note: If you do not have any eligible patients, be sure to enter a population, sample, denominator, and numerator of "0" to denote that you submitted your results.

EBRT Data Entry Screen

Population, Sampling, Numerator, and Denominator

NQF #1822: External Beam Radiotherapy for Bone Metastases

Population

What was your hospital's sampling frequency?

Quarter 1	Quarter 2	Quarter 3	Quarter 4
<input checked="" type="radio"/> Quarterly	<input type="radio"/> Quarterly	<input type="radio"/> Quarterly	<input checked="" type="radio"/> Quarterly
<input type="radio"/> Not Sampled	<input checked="" type="radio"/> Not Sampled	<input type="radio"/> Not Sampled	<input type="radio"/> Not Sampled
<input type="radio"/> N/A - Submission not required	<input type="radio"/> N/A - Submission not required	<input checked="" type="radio"/> N/A - Submission not required	<input type="radio"/> N/A - Submission not required

What was your hospital's quarterly Initial Patient Population?

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
125	35	0	70	230

What was your hospital's quarterly Sample Size?

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
25	35	0	14	74

Numerator

Please enter the number of all patients, regardless of age, with painful bone metastases, and no previous radiation to the same anatomic site who receive EBRT with any of the following recommended fractionation schemes: 30Gy/10fxns, 24Gy/6fxns, 20Gy/5fxns, 8Gy/1fxn.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
5	30	0	12	47

Denominator

Please enter the number of all patients with painful bone metastases and no previous radiation to the same anatomic site, who are not specifically excluded from the denominator, who received EBRT during the reporting period.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
25	35	0	14	74

RESULTS

Percentage of patients, regardless of age, with a diagnosis of painful bone metastases and no history of previous radiation who receive external beam radiation therapy with an acceptable fractionation scheme.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
20%	86%	N/A	86%	64%

Avoiding OCM and EBRT Errors

- Sampling frequency = Quarterly
 - Sample must meet the minimum required sample size.
- Sampling frequency = Not sampled
 - Population must equal sample size.
 - Applies to NQF #0382, # 0383, #0384, and #1822
- Sampling frequency = N/A – submission not required
 - No eligible population. Enter “0” in all required data value fields.

Printing Your Submission Applies for All WBDCT Measures

CMS.gov

QualityNet

Home

Quality Programs

My Reports

Help

Home>Quality Programs>Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

Start

Structural/Web-Based Measures

PPS Exempt Cancer Hospitals Web-Based Measures

To print the page please click "CTRL+P"

Provider	CCN	Submission Period	With Respect to Reporting Period
PPS-Exempt Cancer Hospital	999999	04/01/2018 - 05/15/18	07/01/2017 - 09/30/2017

Web-Based Measures | FY 2018

* Required field

If no data for measures, please enter zero. Do not leave any entry fields blank.

NQF #0223: Adjuvant Chemotherapy Colon Cancer

Numerator
* Please enter the number of patients identified as concordant (measure_status = "comp" or "consid") for NQF #0223 in the Rapid Quality Reporting System for the data reporting period.

Denominator
* Please enter the number of patients identified as eligible for the denominator for NQF #0223 in the Rapid Quality Reporting System for the data reporting period.

Results
Percentage of patients under the age of 80 with AJCC III (lymph node positive) colon cancer for whom adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis. 100.0%

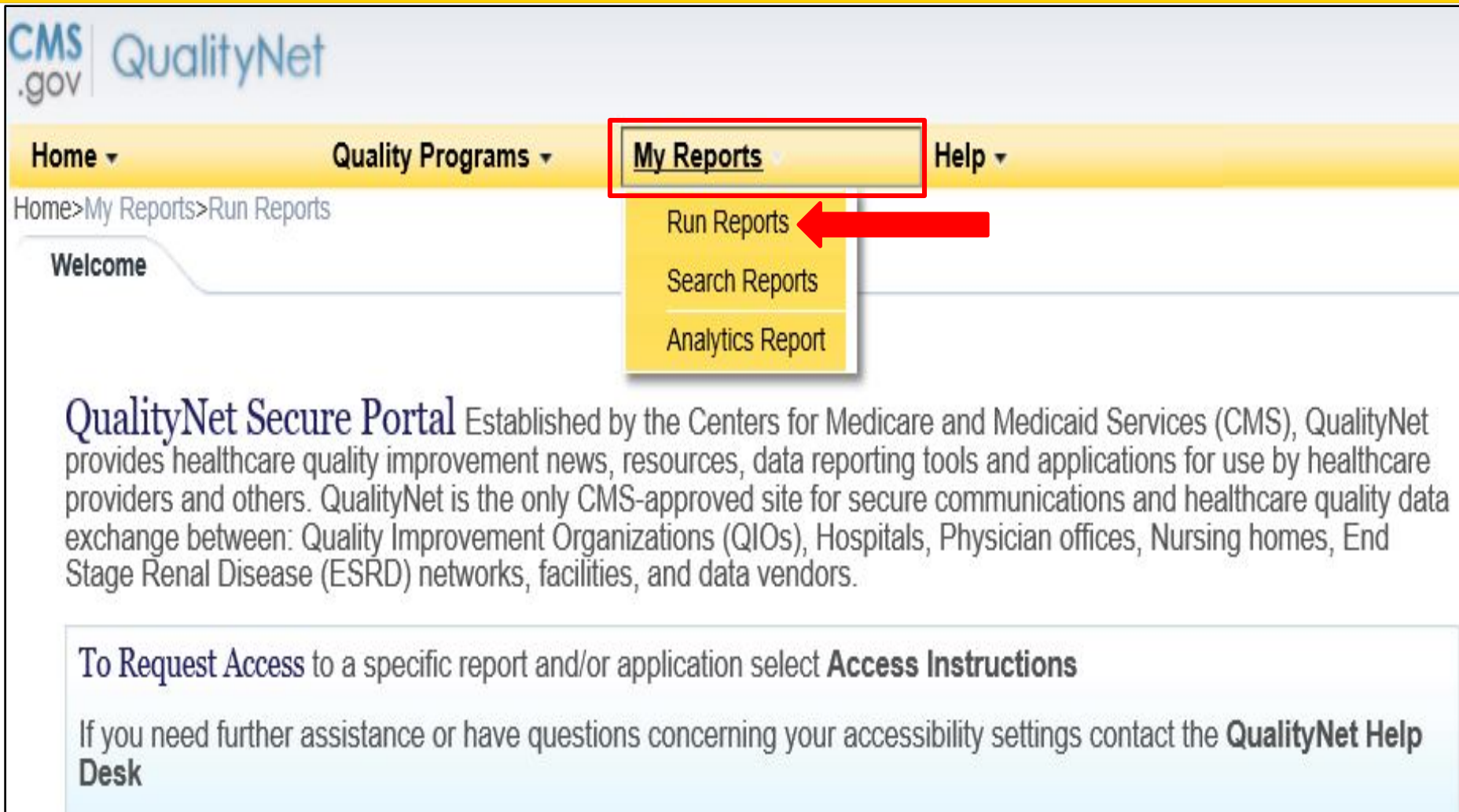
Return to Summary

Print

PCHQR Program Refresher:
Utilizing the Web-Based Data Collection Tool and PCH Report

PPS-Exempt Cancer Hospital (PCH) Reports

Getting Started: My Reports



The screenshot displays the CMS QualityNet Secure Portal interface. At the top, the CMS.gov logo and 'QualityNet' text are visible. Below this is a navigation bar with 'Home', 'Quality Programs', 'My Reports', and 'Help' menus. The 'My Reports' menu is highlighted with a red box, and a red arrow points to the 'Run Reports' option in the dropdown menu. The breadcrumb trail shows 'Home>My Reports>Run Reports'. A 'Welcome' message is displayed on the left. The main content area contains a paragraph about the QualityNet Secure Portal, followed by a box with instructions on how to request access and contact the QualityNet Help Desk.

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.

To Request Access to a specific report and/or application select **Access Instructions**

If you need further assistance or have questions concerning your accessibility settings contact the **QualityNet Help Desk**

I'd Like To Run My Report

The screenshot shows the CMS.gov QualityNet interface. At the top, there's a navigation bar with links: Home, Quality Programs, My Reports, and Help. Below this is a breadcrumb trail: Home > My Reports > Run Reports. The main content area has four tabs: Start, Run Report(s), Search Report(s), and Favorites. The 'Run Report(s)' tab is active. On the left, under 'Start Reports', there's a dark purple box with the text: 'This reporting portlet allows you to run and access reports on quality program data to which you are granted access.' To the right of this box is a dark blue sidebar titled 'I'd Like To...' containing three options: 'Run Report(s)', 'Search Report(s)', and 'View Favorite Reports'. A red arrow points from the purple box to the 'Run Report(s)' option in the sidebar.

CMS.gov QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>My Reports>Run Reports

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

Start Reports

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

I'd Like To...

- Run Report(s)
- Search Report(s)
- View Favorite Reports

Select Program, Category, and Report

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 is pre-selected, and if the category related to the selected program has a single value, then it too will be pre-selected. Choose a program, then category, and then click on VIEW REPORTS to view your report choices. Select the report you wish to run from the table below by clicking on its name.

Report Program
PCHQR

Report Category
PPS-Exempt Cancer Hospital - Feedback Reports

VIEW REPORTS

REPORT NAME	REPORT DESCRIPTION
PPS-Exempt Cancer Hospital Report	The PPS-Exempt Cancer Hospital report summarizes cancer measure data by quarter.

PCH Report Parameters

CMS.gov | QualityNet

Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home>My Reports>Run Reports

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

✓ Select Program, Category and Report **Report Parameters** Confirmation

Report Parameters

Select the parameters that define the report you will run, then click RUN REPORT.

* Indicates required fields.

PPS-Exempt Cancer Hospital Report - PCHQR

* **Provider:**

* **Fiscal Year:**
Please select ▾

* **Report Format:**
PDF ▾

FY 2019 and FY 2020 are available in drop-down menu.

CANCEL RESET **RUN REPORT**

PCH Report Submitted

The screenshot displays the CMS QualityNet interface. At the top, the CMS.gov logo and 'QualityNet' text are visible. Below this is a navigation bar with links for Home, Quality Programs, My Reports, and Help. The breadcrumb trail reads 'Home>My Reports>Run Reports'. The 'Run Report(s)' tab is selected, showing a workflow with three steps: 'Select Program, Category and Report', 'Report Parameters', and 'Confirmation'. The 'Report Submitted' message is displayed, enclosed in a red rounded rectangle. A red arrow points from the bottom right of this message box to the 'SEARCH REPORTS' button in the footer. The footer also contains buttons for 'CANCEL', 'RUN SAME REPORT', and 'RUN NEW REPORT'.

Report Submitted

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.

SEARCH REPORTS

PCH Report Status

Start

Run Report(s)

Search Report(s)

Favorites

Search Reports

Search for reports you have run. ☐ Search Saved Reports

Search Report Name

Requested Date - From09/03/2017

Requested Date - To03/02/2018

Show ReportsALL

RESET

SEARCH

REFRESH REPORT STATUS

STATUS	DATE REQUESTED	REPORT NAME	LAST DOWNLOADED	SIZE (KB)	ACTION
	03/02/2018 10:00:56	PPS-Exempt Cancer Hospital Report		0.1736	

CST Measure Table

Report Run Date: 03/02/2018

Page 4 of 5

Hospital Reporting – PPS-Exempt Cancer Hospital Report

Provider Name: PPS - Exempt Cancer Hospital Name

CCN: 999999

Fiscal Year: 2018

Exception Form on File: NO

Measure Set: Clinical Process / Cancer-Specific Treatment Measures

		Numerator	Denominator	Percent
Measure: (NQF #0223) Adjuvant Chemotherapy Colon Cancer				
Last Update: 10/23/2017	Diagnosis Cohort: 01/01/2017 - 03/31/2017	3	3	100
Last Update: 02/01/2018	Diagnosis Cohort: 04/01/2017 - 06/30/2017	4	4	100
Last Update: (N/A) ¹	Diagnosis Cohort: 07/01/2017 - 09/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Last Update: (N/A) ¹	Diagnosis Cohort: 10/01/2017 - 12/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Measure: (NQF #0559) Combination Chemotherapy Breast Cancer				
Last Update: 10/23/2017	Diagnosis Cohort: 01/01/2017 - 03/31/2017	1	2	50
Last Update: 02/01/2018	Diagnosis Cohort: 04/01/2017 - 06/30/2017	3	3	100
Last Update: (N/A) ¹	Diagnosis Cohort: 07/01/2017 - 09/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Last Update: (N/A) ¹	Diagnosis Cohort: 10/01/2017 - 12/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Measure: (NQF #0220) Adjuvant Hormonal Therapy				
Last Update: (N/A) ¹	Diagnosis Cohort: 01/01/2017 - 03/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Last Update: (N/A) ¹	Diagnosis Cohort: 04/01/2017 - 06/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Last Update: (N/A) ¹	Diagnosis Cohort: 07/01/2017 - 09/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹
Last Update: (N/A) ¹	Diagnosis Cohort: 10/01/2017 - 12/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹

OCM and EBRT Measure Tables

Measure Set: Clinical Process / Oncology Care Measures						
	Population And Sampling			Numerator	Denominator	Percent
	Sampling Frequency	Initial Patient Population	Sample Size			
Measure: (NQF #0382) Oncology-Radiation Dose Limits to Normal Tissues						
Discharge Quarter: 01/01/2017 - 03/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹
Discharge Quarter: 04/01/2017 - 06/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹
Discharge Quarter: 07/01/2017 - 09/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹
Discharge Quarter: 10/01/2017 - 12/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹

Measure Set: Clinical Effectiveness Measure						
	Population And Sampling			Numerator	Denominator	Percent
	Sampling Frequency	Initial Patient Population	Sample Size			
Measure: (NQF #1822) External Beam Radiotherapy for Bone Metastases						
Discharge Quarter: 01/01/2017 - 03/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹
Discharge Quarter: 04/01/2017 - 06/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹
Discharge Quarter: 07/01/2017 - 09/30/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹
Discharge Quarter: 10/01/2017 - 12/31/2017	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹	(N/A) ¹

What About My HAI Data on the PCH Report?

- HAI data are entered into the NHSN system and then transmitted to the CMS warehouse.
- How do I know which FY applies?
 - CAUTI and CLABSI apply to the **following FY.**
 - Example: Q4 2017 data due May 15, 2018, applies to FY 2018
- SSIs, CDI, MRSA, and HCP apply to **two FYs later.**
 - Example: Q4 2017 data due May 15, 2018, applies to FY 2019.

PCHQR Program Refresher:
Utilizing the Web-Based Data Collection Tool and PCH Report

Key Dates and Reminders

Updated NHSN Agreement to Participate and Consent

- The updated NHSN agreement is for **all** current NHSN users who enrolled in NHSN **prior** to December 2, 2017.
 - Includes primary contacts and facility administrators
- The updated consent is now available for review and electronic signature.
 - Must be completed by **April 14, 2018**
- If you have questions, email NHSN@cdc.gov with subject line “NHSN Re-consent.”
- Refer to the [Winter 2018 Quality Reporting Center Newsletter](#).

Upcoming PCHQR Program Event and Deadlines

- **April 26, 2018 – Save the Date**
- **April 4, 2018**
 - 4Q 2017 HCAHPS Survey Data
- **May 15, 2018**
 - 3Q 2017 CST colon and breast data
 - 1Q 2017 CST hormone data
 - 4Q 2017 HAI data
 - 4Q 2017–1Q 2018 Influenza Vaccination Coverage Among HCP data*

***Note:** HCP measure data falls under the CMS-granted hurricane-related ECE.

Hospital Compare Key Dates

- **April 2018 contains:**
 - 1Q 2016 through 4Q 2016 chemo data
 - 3Q 2015 through 2Q 2016 hormone data
 - 3Q 2016 through 2Q 2017 HCAHPS Survey data
 - *Hospital Compare* tentative release is April 25, 2018.
- **July 2018 contains:**
 - 2Q 2016 through 1Q 2017 chemo data
 - 4Q 2015 through 3Q 2016 hormone data
 - 4Q 2016 through 3Q 2017 HCAHPS Survey data
 - Preview period is tentatively scheduled for May 4 through June 2, 2018.
 - *Hospital Compare* tentative release is July 25, 2018.

Accessing the *QualityNet* Questions and Answers Tool

[QualityNet Questions and Answers Tool](#)

The screenshot displays the QualityNet website interface. At the top, there is a header with the QualityNet logo, a login link for the Secure Portal (formerly MyQualityNet), and a search bar. Below the header is a navigation bar with tabs for Home, My QualityNet, and Help. A secondary navigation bar lists various facility types: Hospitals - Inpatient, Hospitals - Outpatient, Physician Offices, Ambulatory Surgical Centers, PPS-Exempt Cancer Hospitals, ESRD Facilities, Inpatient Psychiatric Facilities, and Quality Improvement. The main content area is divided into three columns. The left column contains links for QualityNet Registration (Hospitals - Inpatient, Hospitals - Outpatient, Physician Offices, ASCs, Cancer Hospitals, ESRD Facilities, Inpatient Psychiatric Facilities, QIOs) and Getting Started with QualityNet (Registration, Sign-In Instructions, Security Statement, Password Rules, QualityNet System Security Policy, PDF). The middle column features QualityNet News, including a headline about CMS releasing December 2017 Hospital Compare preview reports, with a link to the full article. The right column contains a login section for the QualityNet Secure Portal and a Questions & Answers section. The Questions & Answers section lists links for Hospitals - Inpatient, Hospitals - Outpatient, Ambulatory Surgical Centers, Inpatient Psychiatric Facilities, and PPS-Exempt Cancer Hospitals. The PPS-Exempt Cancer Hospitals link is circled in red. Below this list is a note stating 'First-time registration required'. At the bottom right, there is a Downloads section.

QualityNet Log in to QualityNet Secure Portal (formerly MyQualityNet) Search

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
- ASCs
- Cancer Hospitals
- ESRD Facilities
- Inpatient Psychiatric Facilities
- QIOs

Getting Started with QualityNet

- Registration
- Sign-In Instructions
- Security Statement
- Password Rules
- QualityNet System Security Policy, PDF

Join ListServes

Sign up for Notifications and Discussions.

QualityNet News [More News »](#)

CMS releases December 2017 Hospital Compare preview reports

The Centers for Medicare & Medicaid Services (CMS) is making the December 2017 Hospital Compare preview reports available on QualityNet on October 2, 2017. The preview reports are for hospitals and facilities participating in the Inpatient Quality Reporting (IQR), Outpatient Quality Reporting (OQR), Inpatient Psychiatric Facility Quality Reporting (IPFQR) and PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Programs.

The *Hospital Compare* preview reports will be available from **October 2 through October 31**. Hospitals are encouraged to access and download reports early in the preview period in order to have time for a thorough review. The preview reports are only available during the preview period.

[Full Article »](#)

Headlines

- [CMS grants exceptions for Quality Program participants in FEMA disaster areas in Puerto Rico and U.S. Virgin Islands affected by Hurricane Maria](#)
- [CMS will not update Hospital Compare Star Ratings Data in October 2017](#)
- [CMS grants exceptions for Quality Program participants in FEMA disaster areas in Florida, Puerto Rico, and U.S. Virgin Islands affected by Hurricane Irma](#)
- [CMS will hold a second Review and Corrections Period for the FY 2018 HAC Reduction Program](#)
- [CMS grants exemptions for Quality Program participants in FEMA disaster areas in Texas and Louisiana affected by Hurricane Harvey](#)
- [Hospital VBP Program FY 2018 Percentage Payment Summary Report now available](#)

Log in to QualityNet Secure Portal

Login

- Download Symantec ID (**required** for login)
- Portal Resources
- Secure File Transfer Resources

Questions & Answers

- Hospitals - Inpatient
- Hospitals - Outpatient
- Ambulatory Surgical Centers
- Inpatient Psychiatric Facilities
- PPS-Exempt Cancer Hospitals**

Note: First-time registration required

Downloads

Continuing Education Approval

This program has been pre-approved for 1.0 continuing education (CE) unit for the following professional boards:

- **National**

- Board of Registered Nursing (Provider #16578)

- **Florida**

- Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
- Board of Nursing Home Administrators
- Board of Dietetics and Nutrition Practice Council
- Board of Pharmacy

Please Note: To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.

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 the HSAG 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 was sent.
- Please go back to the **New User** link and register your personal email account.
 - Personal emails do not have firewalls.

*Please download your continuing education certificate for your records.
HSAG retains attendance records for four years, not certificates.

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: Certificate

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.

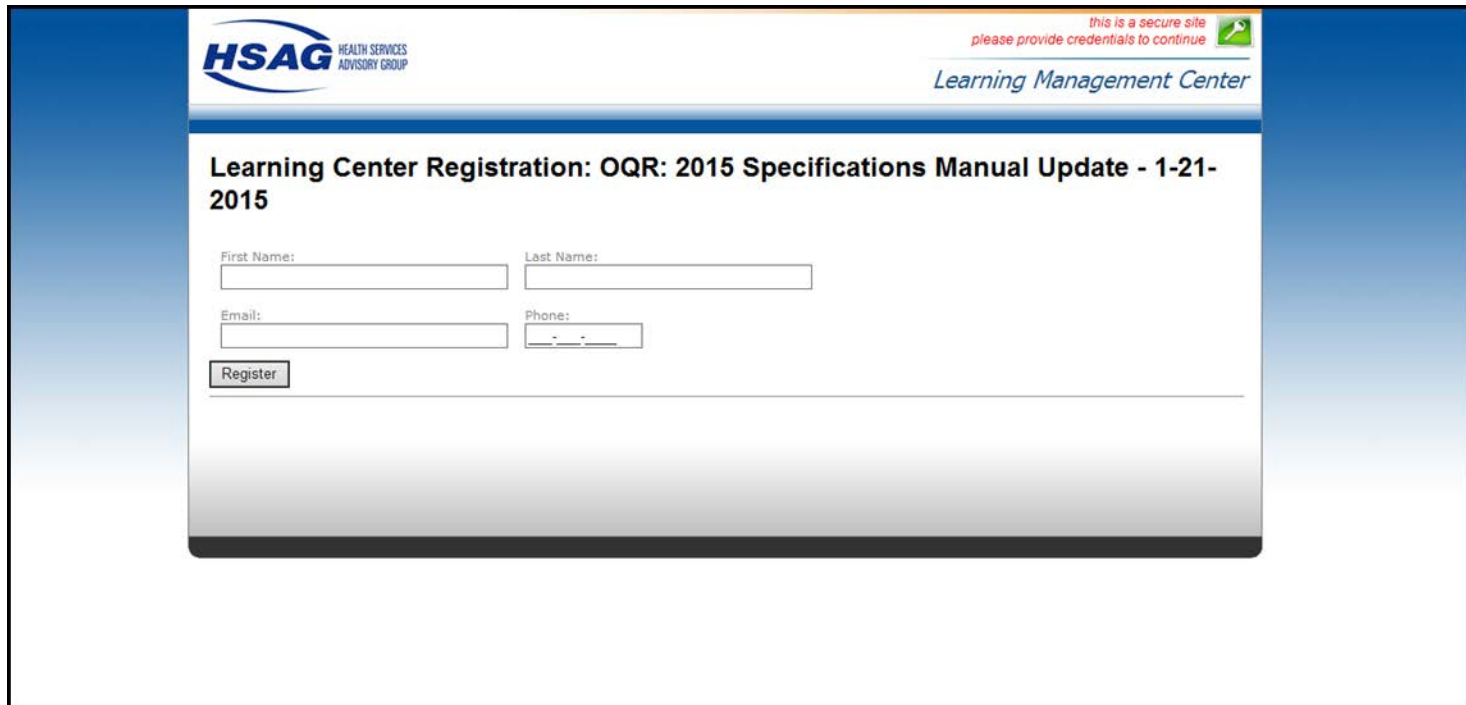
New User Link:
<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

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 displays the registration interface for a new user. At the top left is the HSAG logo (Health Services Advisory Group). At the top right, a security notice reads "this is a secure site please provide credentials to continue" next to a lock icon. Below this is the text "Learning Management Center". The main heading for the registration is "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field includes a small icon for a telephone. A "Register" button is positioned below the "Email:" field. The entire form is set against a blue gradient background.

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site
please provide credentials to continue

Learning Management Center

Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015

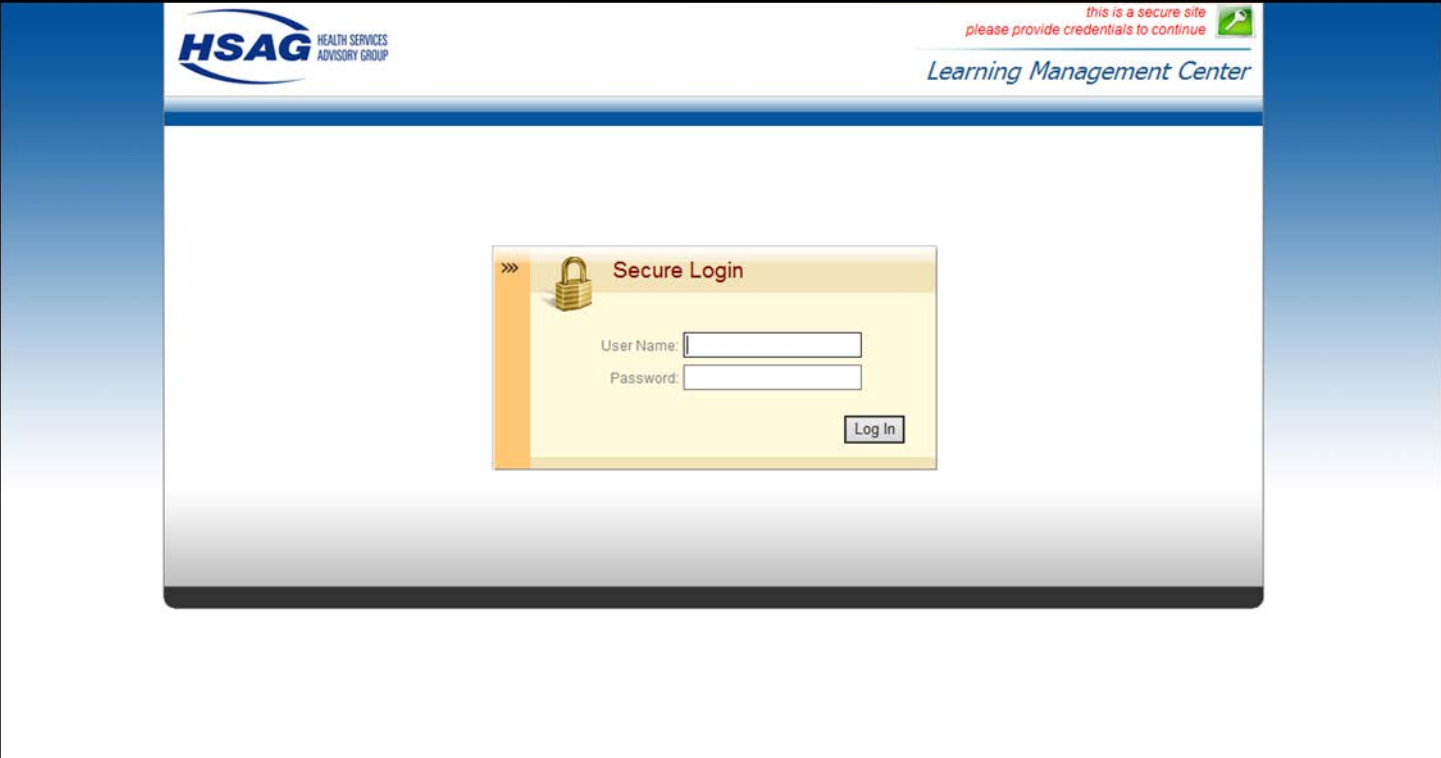
First Name:

Last Name:

Email:

Phone:

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 warning states "this is a secure site please provide credentials to continue" next to a small green icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box with a yellow background and an orange border. Inside this box, there is a padlock icon, the title "Secure Login", and two input fields labeled "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.

PCHQR Program Refresher:
Utilizing the Web-Based Data Collection Tool and PCH Report

Closing Remarks

Disclaimer

This presentation was current at the time of publication and/or upload onto *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 presentation change following the date of posting, this presentation will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

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