July CMS Quality Vendor Workgroup

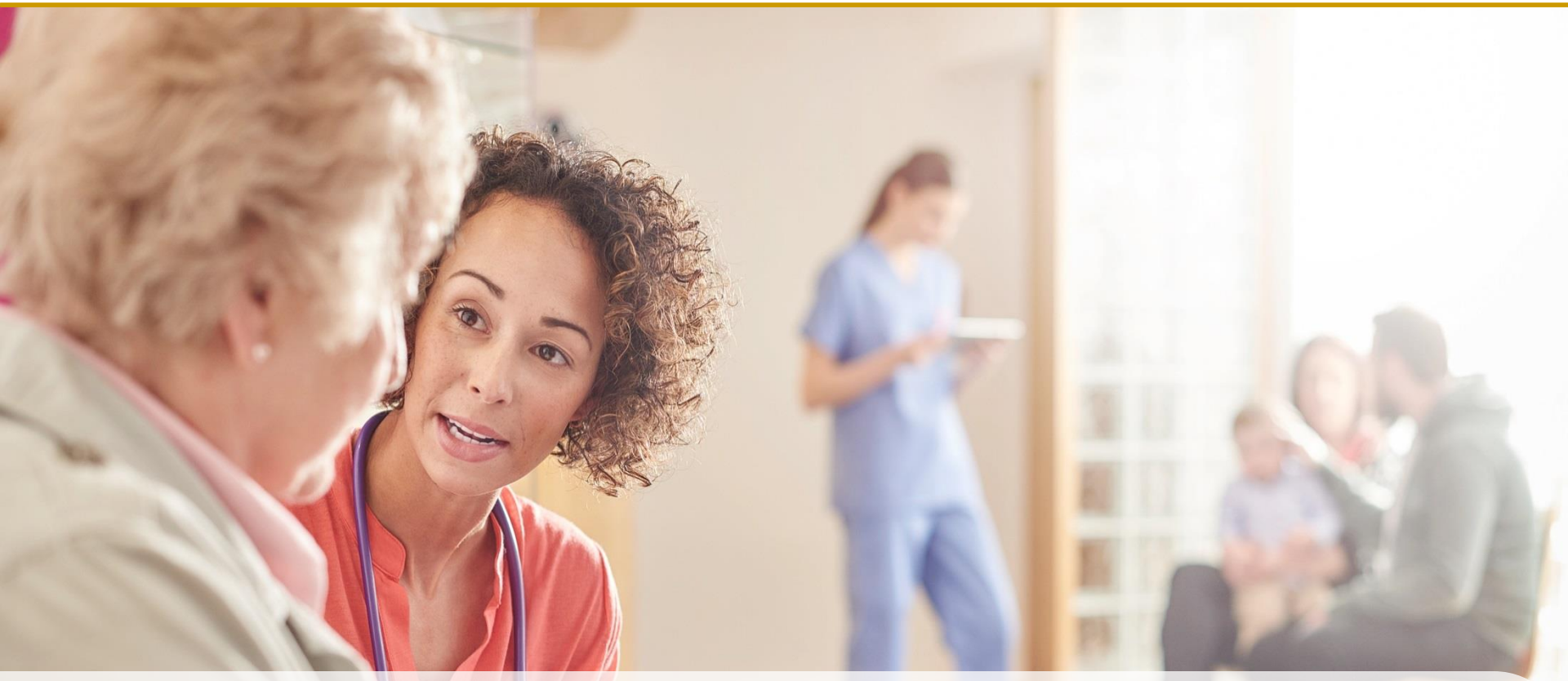
July 21, 2016
12:00 PM EDT

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

Agenda

Topic	Speaker
CMS Patient Relationship Categories	**Kristin Borowski** *Division of Quality Measurement, CMS*
2017 CMS HQR QRDA Implementation Guide, Schematrons, and Sample File	**Shanna Hartman** *Division of Electronic and Clinician Quality, CMS*
Hospital Inpatient Quality Reporting (HIQR)	**Artrina Sturges on behalf of CMS** *Division of Value, Incentives, and Quality Reporting, CMS*
Questions	



CMS Patient Relationship Categories

MACRA Section 101(f)

Kristin Borowski
Center for Clinical Standards and Quality

Background

- MACRA, paragraph (3) of section 1848(r) requires the Secretary to post on the CMS website a draft list of the patient relationship categories and codes for review and comment.
- The patient relationship codes reported on claims will be used to attribute patients and episodes (in whole or in part) to one or more physicians/practitioners.
- CMS will conduct an analysis of resource use utilizing Care Episode and Patient Condition groups as well as patient relationship categories.

Policy Principles

1. Develop a clear, simple classification code set to identify patient relationship categories that define and distinguish the different relationships and responsibilities physicians and practitioners have with a patient at the time of furnishing an item or service.
2. Ensure that the majority of clinician relationships are captured with the patient relationship categories.
3. Ensure flexibility in and ease of submission of codes as part of claims, reflecting that the relationship a clinician has with a given patient may change depending on the clinical situation.
4. Ensure that CMS is open and transparent during the development of patient relationship categories and codes and educate clinicians on the intent and use of the categories and codes.
5. Enable accurate and effective resource use measurement.

Patient Relationship Categories

The following categories have been posted for public comment on CMS.gov:

- Clinician who is the primary health care provider responsible for providing or coordinating the ongoing care of the patient for chronic and acute care.
- Clinician who provides continuing specialized chronic care to the patient.
- Clinician who takes responsibility for providing or coordinating the overall health care of the patient during an acute episode.
- Clinician who is a consultant during the acute episode.
- Clinician who furnishes care to the patient only as ordered by another clinician.

CMS.gov Posting

Please see the following link for the patient relationship categories posting here: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-Feedback.html.

Please provide comments to patientrelationshipcodes@cms.hhs.gov no later than August 15, 2016.

Contact Information

Kristin Borowski, MPP

Division of Quality Measurement

Quality Measures and Value Based Incentives Group

Center for Clinical Standards and Quality

410-786-1591

Kristin.Borowski@cms.hhs.gov

2017 CMS HQR QRDA Implementation Guide, Schematrons, and Sample File Now Available

Shanna Hartman

Division of Electronic and Clinician Quality, CMS

2017 CMS HQR QRDA Implementation Guide, Schematrons, and Sample File Now Available

Visit the CMS eCQM Library and the eCQI Resource Center to access the 2017 CMS Hospital Quality Reporting (HQR) Quality Reporting Document Architecture (QRDA) Implementation Guide (IG) , Schematrons, and Sample File

The CMS HQR QRDA IG provides technical instructions for QRDA Category I reporting for the:

- Hospital Inpatient Quality Reporting (IQR) Program

- Medicare Electronic Health Record (EHR) Incentive Program

2017 CMS HQR QRDA Implementation Guide, Schematrons, and Sample File Now Available

The 2017 IG contains the following high-level changes from the 2016 IG related to the HQR reporting programs:

- The constraints for documentationOf/serviceEvent are updated to reflect HQR specific requirements for TIN and NPI clarity.
- Added Section 5.3 that contains additional HQR specific validations for QRDA I.
- CMS Certification Number is now required for the Hospital IQR and EHR Incentive Programs.

2017 CMS HQR QRDA Implementation Guide, Schematrons, and Sample File Now Available

The IG also provides the following additional changes that affect Eligible Hospitals and Critical Access Hospitals (CAHs):

- The base standard for QRDA I reporting is updated to the HL7 QRDA Category I, DSTU Release 3.1 (April, 2016), instead of the HL7 QRDA Category I, DSTU Release 3. The QRDA Category I, R3.1 has incorporated updates to align with the updates made to the Quality Data Model v4.2 and C-CDA Release 2.1.

- Sections 9 and 10 contain the updated change logs for IG changes to Base Standard and CMS IG changes from 2016 to 2017.

- A Coordinated Universal Time (UTC time) offset should not be used anywhere in a QRDA I file or, if a UTC offset is needed anywhere, it must be specified everywhere a time field is provided.

For More Information

Current and past QRDA Implementation Guides, Schematrons, and sample files are available in the CMS eCQM Library and the eCQI Resource Center.

Hospital Inpatient Quality Reporting (IQR) Program Update

Artrina Sturges, EdD
Project Lead, IQR-Electronic Health Record (EHR) Alignment
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)

July 21, 2016

Frequently Asked Question (FAQ) – 1

Are hospitals required to submit population and sampling data for electronic Clinical Quality Measures (eCQMs) for Calendar Year (CY) 2016?

Population and Sampling is not required at this time for eCQM data submission. All applicable patient data must be submitted via Quality Reporting Document Architecture (QRDA) I files. However, population and sampling is required for chart-abstracted measures.

FAQ – 2

Can a hospital use a flow sheet or another non-certified source to input and capture data in the Electronic Health Record (EHR) for CY 2016?

Hospitals may either use abstraction or pull the data from non-certified sources in order to then input the data into CEHRT to capture and report QRDA Category I files. The ability to abstract or pull data from non-certified sources to then input this data into CEHRT, reinforces the importance of ensuring the system is properly mapped. Properly mapping a system ensures that data elements are consistently and correctly captured for accurate program reporting.

FAQ – 3

For CY 2016 testing, if test files are rejected or have errors, how will we know what needs to be fixed? Is it an issue with the setup of the file creation?

If your file is rejected, it is likely an issue with the setup of the submitted file. If you use the Pre-submission Validation Application (PSVA) to test the generated files, the tool will provide a feedback file for you to review. If, however, you choose not to use the PSVA tool and submit the test file directly to the QualityNet Secure Portal (QSP)*, you will want to generate the Submission Detail Report from the Run Reports screen in QSP.*

FAQ – 4

Can we submit test files prior to October 1, 2016? How long will we be permitted to test QRDA Category I files?

QRDA Category I test files are now being accepted in the QSP. Facilities are encouraged to submit test files early and often. You are also encouraged to download the PSVA tool to assist with the testing process. Please note, the ability to test QRDA I files will continue through the production file submission period, which closes on February 28, 2017.

FAQ – 5

Can we obtain patient-level performance feedback reports following submission of test files to the QSP in CY 2016?

The following performance feedback reports can be generated after successfully submitting test files to the QSP: Submission Summary, Submission Detail, as well as the eCQM Submission and Performance Reports.

The PSVA Tool

- Allows submitters to catch and correct QRDA formatting errors prior to data submission to CMS
- Is used voluntarily. CMS recommends vendors and facilities use the tool to test early and test often
- Is downloadable from the Secure File Transfer in the *QSP* and Installs on your system

NOTES:

  - To submit files, you or your vendor, will require a *QSP* User Account with an EHR Data Upload role
  - For assistance with the PSVA tool, user accounts, or roles, please contact the *QualityNet* Help Desk at qnetsupport@hcqis.org or 866.288.8912, 7 a.m. – 7 p.m. Central Time, Monday through Friday

Test QRDA I Files: Preparation Checklist

CY 2016 Inpatient Quality Reporting (IQR) – Electronic Health Record (EHR) Alignment Preparation Checklist for eCQM Reporting – QRDA-I File Testing Instructions

Due	Task	✓
NOW	☐ **Select** at least four eCQMs from the available 28 eCQMs List. ☐ **Confirm** EHR System is certified to either 2014 or 2015 Office of the National Coordinator for Health Information Technology (ONC) Standards on the Certified Health IT Product List – CHPL Website and review which measures the system is certified to report. ☐ **Contact** the *QualityNet* Help Desk and obtain a *QualityNet Secure Portal* (*QSP*) account and the EHR Data Upload Role. ☐ **Confirm** QRDA -Category I files are constructed per the 2016 Centers for Medicare & Medicaid Services (CMS) Implementation Guide (IG) and 2016 CMS QRDA IG Appendix and Schematrons, and use the eCQM Specifications for Eligible Hospitals Update June 2015 on the eCQM Library page. ☐ **Download** the Pre-Submission Validation Application (PSVA) version 1.1.2 and the User Guide from the Secure File Transfer (SFT) of the QSP to validate the certified electronic health record technology (CEHRT)-generated QRDA – I files for test submission.	☐

Posted on http://www.qualityreportingcenter.com/

Upcoming and Archived Webinars

- ***Common Errors for QRDA Category I Test Files: Session 1*** (July 25)
- ***2017 IPPS Final Rule*** (Late August)
- ***2017 IPPS Final Rule – eCQM Reporting Requirements*** (Mid September)

Please visit the http://www.qualityreportingcenter.com/ website to obtain archived webinar materials, helpful tools, and information on upcoming presentations.

Resources

QualityNet Help Desk – PSVA and Data Upload

- Qnetsupport@hcqis.org
- 1.866.288.8912, 7 a.m.–7 p.m. CT, Monday through Friday

eCQM General Program Questions – IQR Program

- https://cms-ip.custhelp.com
- 866.800.8765 or 844.472.4477, 7 a.m.–7 p.m. CT Monday through Friday (except holidays)

EHR (Meaningful Use) Information Center – EHR Incentive Program

- 888.734.6433, 7:30 a.m.– 6:30 p.m., CT Monday through Friday

The JIRA – Office of the National Coordinator (ONC) Project Tracking

- http://oncprojectracking.org Resource to submit questions and comments regarding:
  - Issues identified with eCQM logic
  - Clarification on specifications
  - The Combined QRDA IG for 2016

Questions?

Thank you!

The next vendor call will be held on **Thursday, August 18, 2016 from 12 – 1:30 p.m. ET**. CMS will share more information as it becomes available.