

## Additional Reconsideration Information for LTCH

June 16, 2014

### How do users view submitted data for Long Term Care Hospitals?

The three (3) LTCH measures that this document will assist with are “The Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (short-stay),” “Catheter-Associated Urinary Tract Infection (CAUTI),” and “Central Line-Associated Bloodstream Infection (CLABSI) data. The reporting period was for January 1, 2013 through December 31, 2013, and both measures were required to be submitted by May 15, 2014.

**NQF #0678 measurement:** “The Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (short-stay)”

To retrieve a copy of the data submitted for the Pressure Ulcer measure

#### 1) Begin by opening the QIES (CASPER Reporting) log-in page:

**CMS**  
CENTERS for MEDICARE & MEDICAID SERVICES

### QIES National System Login

Welcome to CASPER Reporting

Please enter your User ID and Password

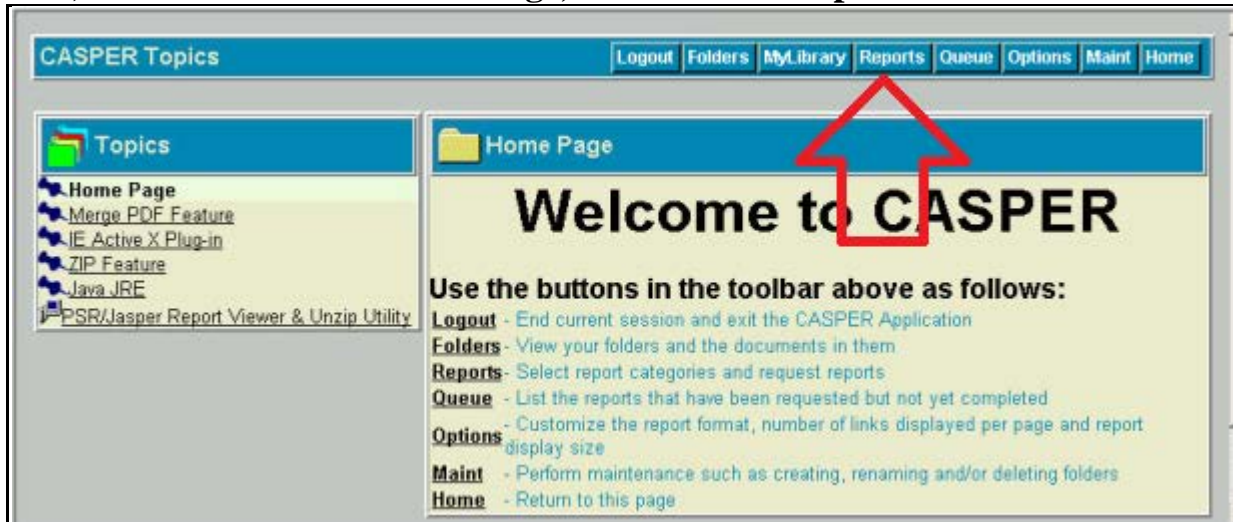
User ID:

Password:

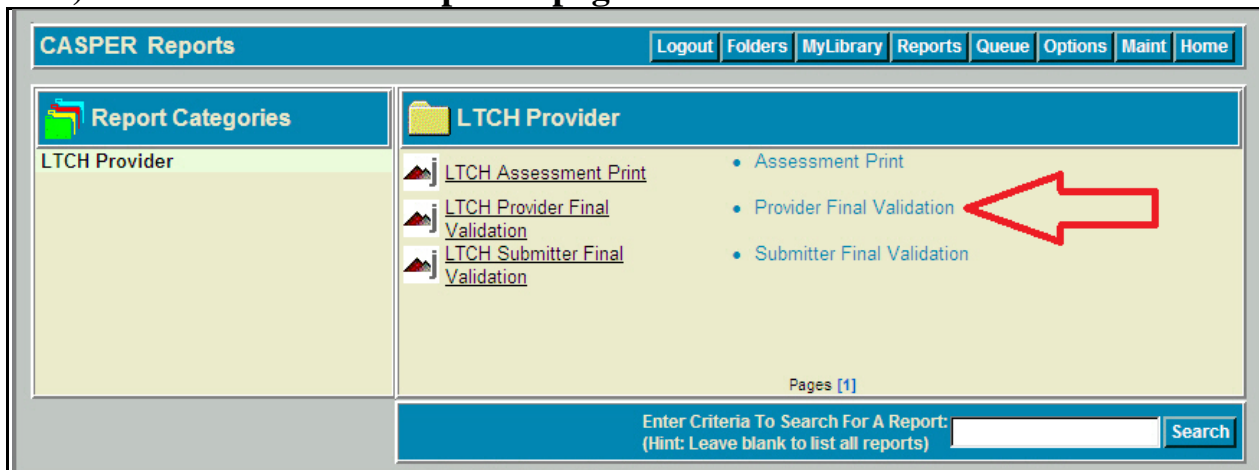
Login

[Unable to login?](#)  
[Click here to reset your User ID/Password.](#)

2) On the CASPER Home Page, click on the “Reports” button:



3) On the CASPER “Reports” page:



a) Run the “Facility Final Validation” report for the time period between 1/1/13-12/31/13. This will produce a list of successfully submitted assessments.

For further information regarding accessing facility submission reports or for answers to other NQF #0678 measurement reporting questions, please email [help@qtso.com](mailto:help@qtso.com) .

**NQF #0138 measurement:** “Catheter-Associated Urinary Tract Infection (CAUTI)” data and **NQF #0139 measurement:** “Central Line-Associated Bloodstream Infection (CLABSI)” data submitted to the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN).

**To retrieve a copy of the data submitted for the CAUTI or CLABSI measures:**

Providers may log into NHSN under their provider number and click the following links from the menu: Analysis > Output Options > Advanced > CMS Reports > CDC Defined Output to display a list of reports. From this list, providers may run the reports that are applicable to their facility type and the Healthcare-Associated Infection (HAI) data they wish to review. It is important to note that prior to generating a report, users should always first generate new datasets under the first link “Analysis” to ensure that all data recently entered is incorporated into the analyses.

The screenshot shows the NHSN web interface. At the top, it says "Department of Health and Human Services Centers for Disease Control and Prevention". Below that, it says "NHSN - National Healthcare Safety Network". The user is logged in as "MVA" for "Medical Center East (ID 10000)". The left sidebar has a menu with items like "Reporting Plan", "Patient", "Event", "Procedure", "Summary Data", "Analysis", "Survey", "Users", "Facility", "Group", and "Log Out". The main content area shows a "Summary Data Type:" dropdown menu. The dropdown is open, showing a list of options: "Device Associated - Intensive Care Unit / Other Locations", "Device Associated - Neonatal Intensive Care Unit", "Device Associated - Specialty Care Area", "Device Associated - Outpatient Dialysis - Census Form", "Medication Associated - AUR Microbiology Laboratory Data", and "Medication Associated - AUR Pharmacy Data". A yellow callout box with red text points to the dropdown menu, stating: "Different location types use different screens for entry of denominator (summary) data." A white callout box with red text points to the dropdown menu, stating: "Choose the type of location".

For log-in assistance and/or questions on how to check for summary data in the analysis tool, contact the NHSN Help Desk at the following:

[NHSN@cdc.gov](mailto:NHSN@cdc.gov).