



2014 PQRS Group Practice and ACO GPRO Web Interface Reporting Method



**GPRO Web Interface
Extensible Markup
Language (XML)**

Program Year 2014

Disclaimer

This presentation was current at the time it was published or uploaded onto the web. Medicare policy changes frequently so links to the source documents have been provided within the document for your reference.

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Announcements

- 1. Upcoming planned system outages:** The Portal will be unavailable for scheduled maintenance; therefore, the GPRO Web Interface will not be accessible during the following periods:
 - **Every Tuesday** starting at 8:00 pm ET–Wednesday at 6:00 am ET
 - **Every Thursday** starting at 8:00 pm ET–Friday at 6:00 am ET
 - **Third weekend of each Month** starting Friday at 8:00 PM ET–Monday at 6:00 AM ET
 - See the Physician Quality Reporting System Portal (PQRS Portal) for the complete list of scheduled system outages, at <https://www.qualitynet.org/portal>
- 2. Review the GPRO Web Interface measure specifications and supporting documents** on the GPRO Web Interface page of the CMS website at: http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html

Announcements (cont.)

3. GPRO Web Interface Key Dates

Action Required	Dates
Download patient ranking files from GPRO Web Interface	1/5/2015 – 1/9/2015
Access training version of the GPRO Web Interface	1/12/2015 – 1/23/2015
Enter and Submit 2014 quality data through the GPRO Web Interface	1/26/2015 – 3/20/2015 <i>Closes at 8:00pm ET / 7:00pm CT / 6:00pm MT / 5:00pm PT</i>

Announcements (cont.)

4. Upcoming 2014 GPRO Web Interface support calls

Date	Time	Topic
1/15/2015	1:00 - 2:00pm ET	GPRO Web Interface Q&A Session
1/26/2015 - 1/30/2015	1:00 - 2:00pm ET	Daily GPRO Web Interface Q&A Sessions
2/5/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
2/12/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
2/19/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
2/26/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
3/5/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
3/12/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
3/16/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
3/16/2015 – 3/20/2015	1:00 - 2:00pm ET	Daily GPRO Web Interface Q&A Sessions

Agenda

- Extensible Markup Language (XML) for the GPRO Web Interface
- 2014 GPRO Web Interface XML Specification
- XML Changes for 2014
- Data Abstraction
- Exporting XML Data Files
- Using Excel to View or Create XML Files
- Uploading XML Files
- Finding and Correcting Errors

Presenter: Jane Schiemer, CMS Contractor

XML FOR THE GPRO WEB INTERFACE

XML Specifications

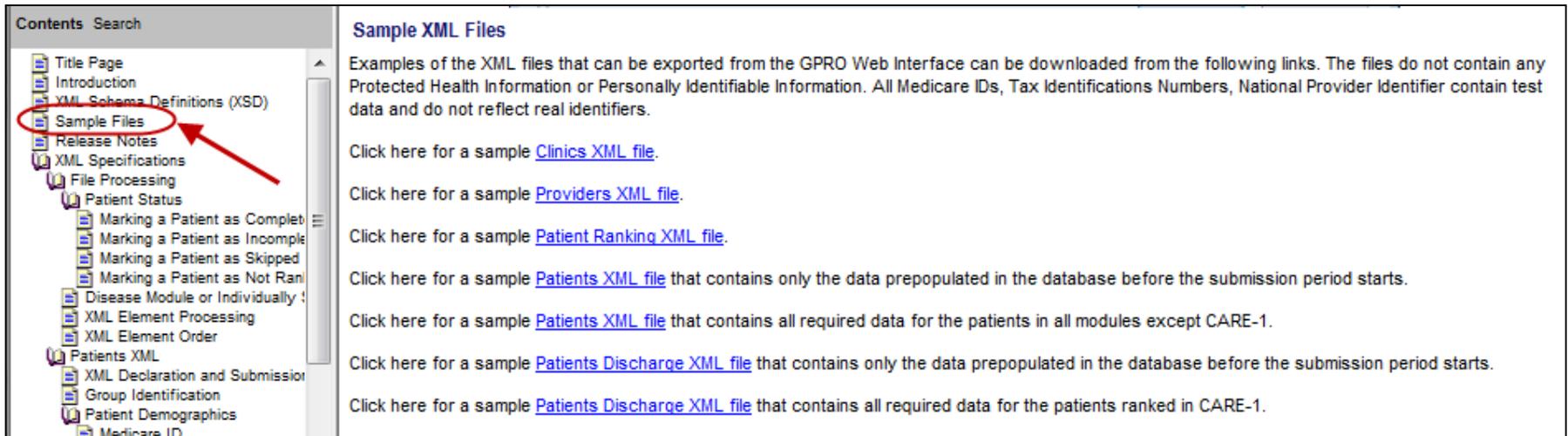
- The 2014 GPRO Web Interface XML Specifications link is available on the GPRO Web Interface of the CMS Website:
http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html
- The XML Specifications link will also be available:
 - In the GPRO Web Interface Online Help
 - In the Web Interface on the Upload Data and Export Data screens

GPRO Web Interface XML Specification Update

- The posted XML Specification will be updated during the down time on 12/16/2014
- The Patient Ranking XSD file will be updated
 - **If you have downloaded the Patient Ranking XSD file, you will need to download a new copy after 12/16/2014**
- The size of the <medical-not-qualified-reason> and <medical-not-qualified-date> data fields was corrected
- The text for the <dm-confirmed>20</dm-confirmed> tag example was updated
- Release Notes updated for <clinic-identifier>, <medical-not-qualified-reason>, and <medical-not-qualified-date> tags

Sample Files Download

- Sample XML files can be downloaded from the XML Specification
- Click the **Sample Files** link in **Contents**, then click the links to download the sample files using the instructions provided on the same page



The screenshot displays a web application interface. On the left, a 'Contents' sidebar lists various sections, with 'Sample Files' circled in red and a red arrow pointing to it. The main content area, titled 'Sample XML Files', provides instructions and links for downloading sample XML files. The text states: 'Examples of the XML files that can be exported from the GPRO Web Interface can be downloaded from the following links. The files do not contain any Protected Health Information or Personally Identifiable Information. All Medicare IDs, Tax Identifications Numbers, National Provider Identifier contain test data and do not reflect real identifiers.'

Click here for a sample [Clinics XML file](#).

Click here for a sample [Providers XML file](#).

Click here for a sample [Patient Ranking XML file](#).

Click here for a sample [Patients XML file](#) that contains only the data prepopulated in the database before the submission period starts.

Click here for a sample [Patients XML file](#) that contains all required data for the patients in all modules except CARE-1.

Click here for a sample [Patients Discharge XML file](#) that contains only the data prepopulated in the database before the submission period starts.

Click here for a sample [Patients Discharge XML file](#) that contains all required data for the patients ranked in CARE-1.

Sample Files

The files do not contain any real PHI or PII and all TINs, Medicare IDs, Names, and DOBs have been masked.

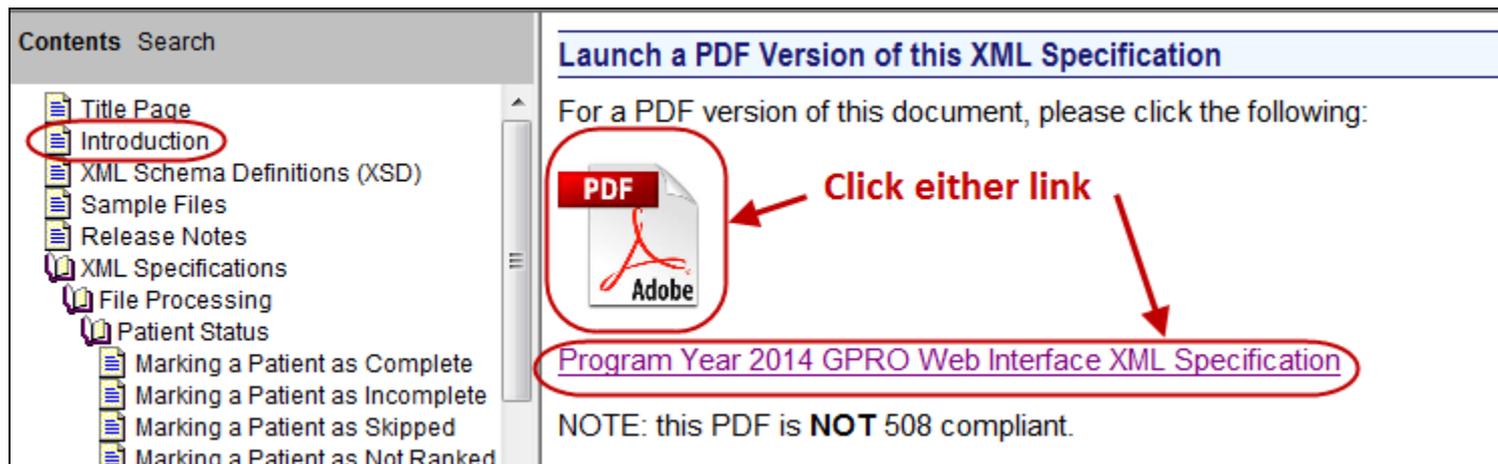
Sample File Name	Sample File Description
SampleClinics.xml	Sample file for the clinics from the patient sampling and loaded into the Web Interface.
SampleProviders.xml	Sample file for the providers from the patient sampling and loaded into the Web Interface.
SamplePatient-Ranking.xml	Sample file of the patient's ranking in all ranked modules. Contains the patient's demographic information, associated clinic, up to three providers, and the rank in all modules into which the patient has been sampled.
SamplePrefilledOnlyPatients.xml	Sample of the Patient XML file as it would appear when the data is exported prior to abstracting patients. If the measure has prefilled data for PREV-7, the prefilled values are included in the file. Does not include CARE-1 patients.
SampleCompletePatients.xml	Sample of the Patient XML file containing all required data necessary to complete the data for the patients in all ranked modules. Does not include CARE-1 patients.
SamplePrefilledOnlyPatient-Discharge.xml	Sample of the Patient Discharge XML file as it would appear when the data is exported prior to abstracting patients in CARE-1.
SampleCompletePatient-Discharge.xml	Sample of the Patient Discharge XML containing all required data necessary to complete the data for the patients in CARE-1.

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2014 GPRO WEB INTERFACE XML SPECIFICATION

XML Specification PDF

- A PDF version of the online XML Specification can be downloaded from the Introduction page of the XML Specification
- Note that download links for XSD and sample files are not available in the PDF version



The screenshot shows a web page with a table of contents on the left and a main content area on the right. The table of contents includes items like 'Title Page', 'Introduction', 'XML Schema Definitions (XSD)', 'Sample Files', 'Release Notes', 'XML Specifications', 'File Processing', and 'Patient Status'. The 'Introduction' item is circled in red. The main content area has a blue header 'Launch a PDF Version of this XML Specification' and text that says 'For a PDF version of this document, please click the following:'. Below this text is a PDF icon with the Adobe logo, also circled in red. A red arrow points from the text 'Click either link' to the PDF icon. Another red arrow points from the same text to a purple link 'Program Year 2014 GPRO Web Interface XML Specification', which is also circled in red. At the bottom of the main content area, there is a note: 'NOTE: this PDF is NOT 508 compliant.'

XML Schema Definition (XSD)

- The XSD files can be downloaded from the XML Specification
- Click the **XSD Schema Definitions (XSD)** link in **Contents**, then click the links to download the XSD files using the instructions on the same page



The screenshot shows a website interface with a 'Contents' sidebar on the left and a main content area on the right. In the sidebar, the 'XML Schema Definitions (XSD)' link is circled in red, and a red arrow points to it. The main content area is titled 'XSD Files' and contains five entries, each with a link to an XSD file and a reference to an XML file for more information.

XSD File	XML File
Patient XSD	Patients XML
Patient Discharge XSD	Patient Discharge XML
Patient Ranking XSD	Patient Ranking XML
Clinic XSD	Clinics XML
Providers XSD	Providers XML

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XML CHANGES FOR 2014

XML Changes for 2014

- The GPRO Web Interface XML is updated yearly based on PQRS program needs and user feedback
- Full details of the 2014 changes are listed in the **Release Notes** available by clicking the **Release Notes** link in the XML Specification Contents
- Changes in the measures and allowable values used to remove a patient from the sample are reflected in the XML Specifications
- The number of errors for invalid XML file format increased from 500 to 1000
- Each of the PREV and CARE measures have an optional comment tag specific to the measure
- The “-1” value is not valid for 2014; erasing previously entered data can only be done on the screens
- Optional header tags are not used in 2014
- The Patient Discharge file contains the patient’s demographic and confirmation tags, which are repeated for each of the patient’s discharges
- The Patients XML file does not include tags for CARE-1 ranked patients

XML Changes for Skipping a Patient

New values have been added to confirm if a patient is qualified for a measure or module:

- **Denominator Exclusion** is available for the HTN disease module and the PREV-5, PREV-6, PREV-9, PREV-11, and PREV-12 measure module confirmations
- The system can automatically skip patients for gender changes for patients ranked in PREV-5, age changes for patients ranked in all modules, or denominator exclusions for patients ranked in DM
 - These skip reasons are available in an export if appropriate, but cannot be included in an upload because these skip reasons can only be set by the system

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DATA ABSTRACTION

Data Abstraction

- The Web Interface provides two methods for data abstraction:
 - Manually entering the data for one patient at a time
 - Using an XML file to upload data for one or more patients
- The two methods may be used together, if desired
- The **Export Data** screen is used to download the XML files containing the data currently stored in the Web Interface
- The **Upload Data** screen is used to upload the XML files containing the values to update the patient data

Data Abstraction (cont.)

- When generating and downloading the XML files, only the data for your PQRS Group Practice Taxpayer Identification Number (TIN) or your ACO Primary TIN will be included
- When uploading XML files, the data must only be for patients sampled for your Group Practice TIN or your ACO Primary TIN
- If your IACS ID is used for multiple Group Practice TINs or ACO Primary TINs, you must log in for each TIN to export or upload XML files for that TIN
 - The exported files will automatically contain the TIN you used when logging in
 - The TIN in the XML file to be uploaded must match the TIN you used when logging in or the file will not be processed

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EXPORTING XML DATA FILES

Export Data Screen

<Your Organization Name Here> Accessibility | Help

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences

Export Data ?

* Export Data Set ▾

Note: When Patient Ranking or Patients option is selected from the Export Data Set drop-down, at least one module needs to be checked in Export Patients In Module(s) checkbox list below.

Export Patients In Module(s):

- CARE-1: Medication Reconciliation
- CARE-2: Falls
- CAD: Coronary Artery Disease
- DM: Diabetes Mellitus
- HF: Heart Failure
- HTN: Hypertension
- IVD: Ischemic Vascular Disease
- PREV-5: Breast Cancer Screening
- PREV-6: Colorectal Cancer Screening
- PREV-7: Influenza Immunization
- PREV-8: Pneumococcal Vaccination
- PREV-9: BMI Screening and Follow-Up
- PREV-10: Tobacco Use: Screening and Cessation Intervention
- PREV-11: Screening for High Blood Pressure and Follow-Up
- PREV-12: Depression Screening

Note: If the patient is ranked in additional modules than the ones selected above, check the Export all data for patients ranked in the selected module(s) checkbox below to export the additional data.

Export all data for patients ranked in the selected module(s)

[Generate XML](#)

* Required field

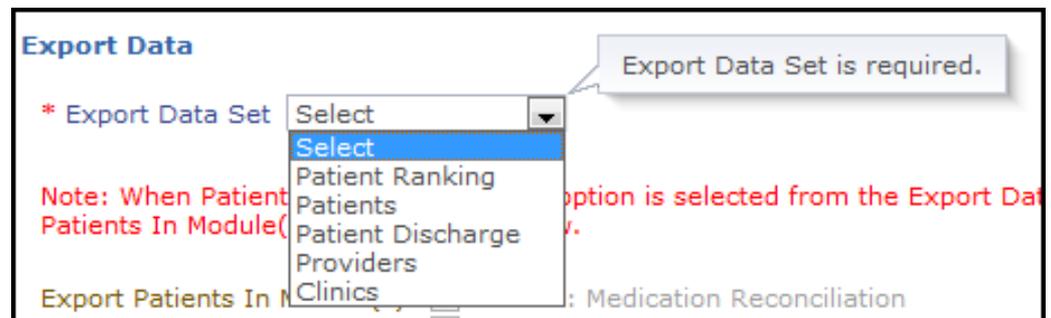
Export Data Results View GPRO Web Interface XML Specification [Refresh](#) ?

Date	User ID	File Name	Status	Comments
No XML files have been generated.				

Export Data Sets

Five Data Sets can be exported from the Web Interface

- **Patient Ranking** – list of patients with demographic information and rank order for modules in which the patient was selected for the sample
- **Patients** – list of patients with demographic information and measure data for modules in which the patient was selected for the sample
- **Patient Discharge** – demographic information, pre-populated discharge dates and measure data for the CARE-1: Medication Reconciliation measure
- **Providers** – list of pre-populated or user added providers
- **Clinics** – list of pre-populated or user added clinics



Patient Ranking XML File

Contains the patients ranked in the selected modules with the following data:

- Medicare ID
- First and Last Name
- Gender
- Date of Birth
- Up to three Provider NPIs and Provider Names
- Clinic Identifier
- Rank for the modules in which the patient is included in the sample

Patients XML File

- Contains the patients ranked in the selected modules with the same data as the Patient Ranking file plus:
 - Medical Record Number
 - Other Identifier
 - General and module specific comments
 - Medical Record Found with Reason and Date
 - Module confirmation and measure data for each module in which the patient is ranked
- CARE-1 confirmation, discharge dates, and measure data are not included in the Patients XML files
- Only the NPI of the providers are included, the name of the provider is not included
- If the file is generated before the additional data has been entered, the file will contain empty XML tags for these values
- PREV-7 measure data may be pre-filled during sampling

Patient Discharge XML File

- Contains the patients ranked in CARE-1 with the following data:
 - Medicare ID
 - Patient Demographics including Clinics IDs and Provider NPIs
 - Medical Record Found with Reason and Date
 - CARE-1 Rank
 - CARE-1 Confirmation
 - Discharge Date(s)
 - Measure Data
 - CARE Comments
- The Discharge Dates are pre-populated during sampling
- If the file is generated before the CARE-1 data has been entered, the file will contain the dates, but will contain empty XML tags for the measure values

Providers XML File

Contains the providers currently in the Web Interface with the following data:

- Provider's National Provider Identifier (NPI)
- Provider First and Last Name
- Provider's Employer Identification Number (EIN)
 - EIN defaults to the PQRS Group Practice's TIN or the ACO's Primary TIN
- Provider's Credentials
 - The credentials are optional and are not pre-populated
- Indicator that the provider was pre-populated or was added using the Web Interface

Clinics XML File

Contains the list of clinics currently in the Web Interface with the following data:

- Clinic Identifier
 - The default clinic identifier is the TIN for PQRS Group Practices
 - The default clinic identifiers will be pre-populated with the Participating TINs or CMS Certification Numbers (CCN) for ACOs
- Clinic Name
- Clinic's Address
 - The address is optional and is not pre-populated
- Indicator that the clinic was pre-populated or was added using the Web Interface

Exporting Data

- The current data can be exported at the beginning of the Submission Period or at any time during the Submission Period
- Exporting the data at the beginning of the Submission Period results in a file containing all demographics and PREV-7 data that has been pre-filled for the sampled patients
- Exporting the data during the Submission Period results in a file containing all pre-filled data and data entered during the Submission Period

Export Data Module Selection

- If you have selected **Patient Ranking** or **Patients** from the **Export Data Set** pull-down menu, you must select one or more modules to export
 - The checkboxes for the modules are only available for selection when the **Patient Ranking** or **Patients** data set is selected
 - The CARE-1 checkbox is not available for the **Patients** data set
 - The checkboxes are not available for selection with other data sets because the other data sets are not module specific
- Only the patients ranked in the selected modules will be included in the XML file



Export Data

* Export Data Set Patient Ranking ▼

Note: When Patient Ranking or Patients option is selected from the Export Data Set drop-down, at least one module needs to be checked in Export Patients In Module(s) checkbox list below.

* Export Patients In Module(s):

- CARE-1: Medication Reconciliation
- CARE-2: Falls
- CAD: Coronary Artery Disease
- DM: Diabetes Mellitus
- HF: Heart Failure
- HTN: Hypertension
- IVD: Ischemic Vascular Disease
- PREV-5: Breast Cancer Screening
- PREV-6: Colorectal Cancer Screening
- PREV-7: Influenza Immunization
- PREV-8: Pneumococcal Vaccination
- PREV-9: BMI Screening and Follow-Up
- PREV-10: Tobacco Use: Screening and Cessation Intervention
- PREV-11: Screening for High Blood Pressure and Follow-Up
- PREV-12: Depression Screening

Export All Data Checkbox

- Below the module list is an **Export all data for patients in the selected module(s)** checkbox to choose which data is included in the XML file
- The checkbox is only available when the **Patients** data set is selected
- The checkbox will be unchecked as the default selection
 - Uncheck the box to export the patient's data for only the selected modules when the patient is ranked in additional modules that are not selected
 - Unchecking the box is useful when modules are exported one at a time and duplication of data for patients in multiple modules is not desired
 - Check the box to export the patient's data for all modules in which the patient is ranked when the other module checkboxes are not selected
 - Checking the box is useful when some modules are exported, but all data for the patients ranked in the selected modules is desired

Note: If the patient is ranked in additional modules than the ones selected above, check the Export all data for patients ranked in the selected module(s) checkbox below to export the additional data.

Export all data for patients ranked in the selected module(s)

Export All Data Checkbox Example

- A patient is ranked in the **Hypertension (HTN)** and **PREV-6** modules
- The **Patients** data set is selected and the **HTN** module checkbox is the only module selected for the export
 - The XML file will only contain the patients who are ranked in **HTN**
 - When the **Export all data for patients ranked in the module(s)** checkbox is unchecked, the XML file will only contain the **HTN** data for the patient in this example
 - This option is useful if you are working module-by-module for your patients
 - When the checkbox is checked, the XML file will contain the **HTN** data for this patient, plus the **PREV-6** data for this patient
 - This option is useful if you are working patient-by-patient for your patients

Export All Data Checkbox XML Files

- This example shows the patient's data in the XML file when the checkbox is not checked
- Note that only HTN tags appear

```
<patient>  
  <medicare-id>000007007E</medicare-id>  
  <patient-first-name>First02113002</patient-first-name>  
  <patient-last-name>Last02113002</patient-last-name>  
  <gender>1</gender>  
  <birth-date>07/10/1943</birth-date>  
  <medical-record-number/>  
  <other-id/>  
  <provider-npi>0235279635</provider-npi>  
  <provider-npi-two/>  
  <provider-npi-three/>  
  <clinic-identifier>740021250</clinic-identifier>  
  <general-comments/>  
  <medical-record-found/>  
  <medical-not-qualified-reason/>  
  <medical-not-qualified-date/>  
  <htn-rank>339</htn-rank>  
  <htn-confirmed/>  
  <htn-recent-bp/>  
  <htn-bp-date/>  
  <htn-bp-systolic/>  
  <htn-bp-diastolic/>  
  <htn-comments/>  
</patient>
```

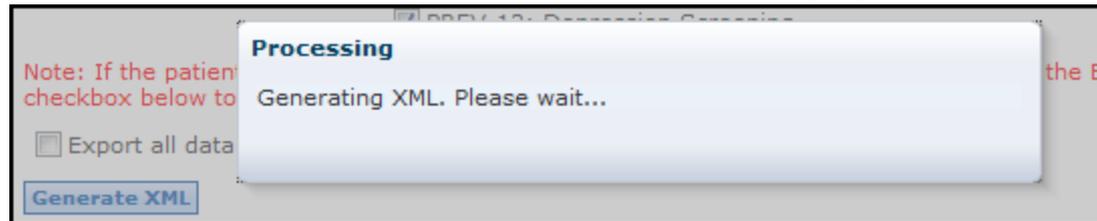
Export All Data Checkbox XML Files (cont.)

- This example shows the same patient's data in the XML file when the checkbox is checked
- Note the additional PREV-7 tags for this patient

```
<patient>
  <medicare-id>000007007E</medicare-id>
  <patient-first-name>First02113002</patient-first-name>
  <patient-last-name>Last02113002</patient-last-name>
  <gender>1</gender>
  <birth-date>07/10/1943</birth-date>
  <medical-record-number/>
  <other-id/>
  <provider-npi>0235279635</provider-npi>
  <provider-npi-two/>
  <provider-npi-three/>
  <clinic-identifier>740021250</clinic-identifier>
  <general-comments/>
  <medical-record-found/>
  <medical-not-qualified-reason/>
  <medical-not-qualified-date/>
  <htn-rank>339</htn-rank>
  <htn-confirmed/>
  <htn-recent-bp/>
  <htn-bp-date/>
  <htn-bp-systolic/>
  <htn-bp-diastolic/>
  <htn-comments/>
  <pccolorectal-rank>467</pccolorectal-rank>
  <pccolorectal-confirmed/>
  <pccolorectal/>
  <pccolorectal-comments/>
</patient>
```

Generate XML File

- After making your selections, click the **Generate XML** button
- Confirmation of the request appears:



- The request to generate the XML file is sent to the database and the **Export Data Results** table is updated with the status of the file generation

Export Data Results Table

- The **Export Data Results** table provides information on the current and prior file generation requests for your TIN
 - **Date** and time of the file generation request
 - **User Name** of the person generating the file
 - **File Name**, which reflects the Export Data Set selected
 - **Status** of the file generation
 - **Comments**, which contains the list of modules selected
- The **Refresh** button updates the list and the status
- If XML files have not been generated for your TIN, the table will display **No XML files have been generated.**

Date	User Name	File Name	Status	Comments
09/23/2014 01:56PM	Fakefirst1 FakeLast1	Patient-Discharge.xml	Complete	
09/15/2014 11:39AM	Fakefirst1 FakeLast1	Patients.xml	Complete	CARE-2,CAD,DM,HF,HTN,IVD,PREV-5,PREV-6,PREV-7,PREV-8,PREV-9,PREV-10,PREV-11,PREV-12
09/15/2014 09:36AM	Fakefirst1 FakeLast1	Patients.xml	Complete	DM

Exporting XML Files

- When the status of the file is **Complete**, the file name is a hyperlink that can be used to download the XML file

Date	User Name	File Name	Status	Comments
10/06/2014 04:50PM	Fakefirst1 FakeLast1	Patients.xml	Request Received	PREV-5,PREV-6,PREV-7,PREV-8,PREV-9,PREV-10,PREV-11,PREV-12
09/26/2014 11:50AM	FakeFirst2 FakeLast2	Patient-Discharge.xml	Complete	

- Selecting the hyperlink will open the Windows File Download popup to save or open the file
- Files can be downloaded after the date they were created, but will only contain data current at the time the file was generated

Viewing and Modifying XML Files

- The file can be viewed in Internet Explorer as a read only XML file
- The file can be viewed and modified as an XML file using free text editors such as Notepad++, or any other editor that has the capability to save with encoding UTF-8 without BOM
- The file can be viewed and modified as an XML file using proprietary XML editors
- The file can be used as input into Group Practices or ACO developed software to create XML files
- The files can be imported, modified, and exported using Microsoft Excel

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USING EXCEL TO VIEW OR CREATE XML FILES

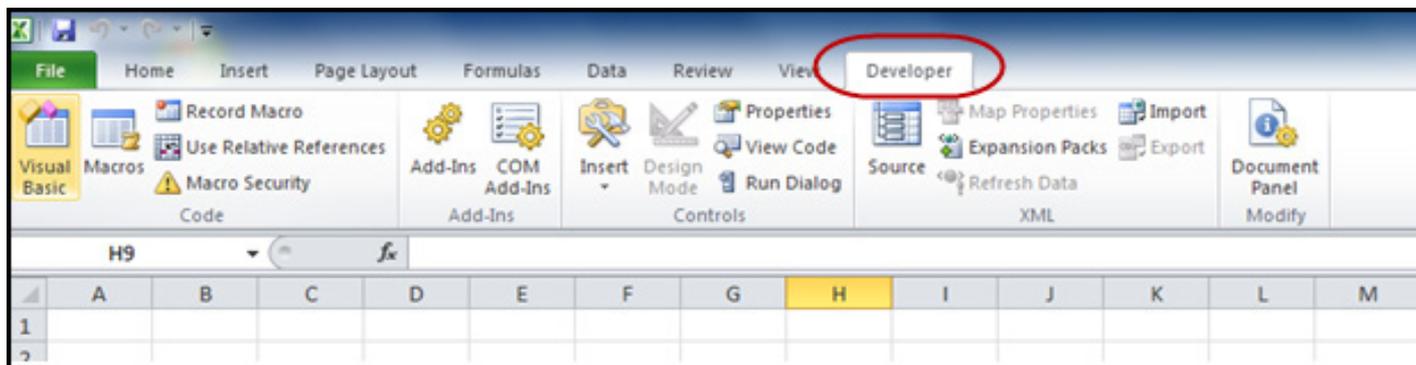
Using Excel with XML Files

- All XML files exported from the Web Interface can be imported into an Excel spreadsheet
- The Excel spreadsheet can be used to view, sort, or filter the exported data using standard Excel functionality
- The Excel spreadsheet can be used with the provided XSD files to update the **Patients** and **Patient Discharge** data and to create an XML file for upload into the Web Interface
- The XML Specification contains detailed directions on how to import and export Web Interface XML files using Excel 2007, 2010, and 2013, and brief directions on Excel 2003

Importing XML Files into Excel

The **Developer Tab** in Excel is used to import the XML files from the Web Interface and to create XML files using the data in the spreadsheet

- The following screenshots are from Excel 2010, but Excel 2003, 2007, or 2013 may also be used

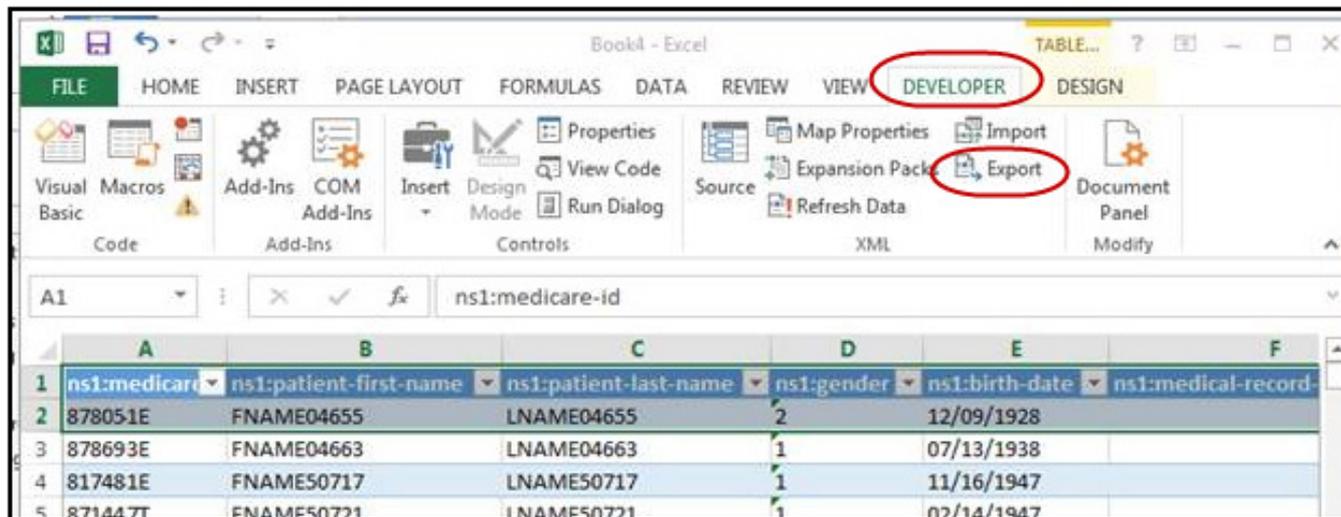


Importing XML Files into Excel (cont.)

- Set up the workbook by adding the XSD Mapping to the Excel workbook
 - The Patients XSD must be used when importing or creating Patients XML files
 - The Patient Discharge XSD must be used when importing or creating Patient Discharge XML files
- Import the XML file into the Excel workbook
- Detailed step-by-step directions on how to add the **Developer Tab**, map the XSD, and import the files are provided in the XML Specifications

Exporting XML Files from Excel (cont.)

- After importing and editing the XML data in the Excel file, The **Developer Tab** is used to **Export** the data
- The exported file must be edited to remove Excel added tags



Editing XML Files Exported from Excel (cont.)

- When Exporting XML files, Excel adds a default Target Name Space (TNS) to the tags and a default header
- The TNS addition to the tag, generally **ns1:**, must be removed from the XML tags before uploading the file in the Web Interface
- The TNS can be removed with a text editor such as NotePad++, using find and replace
 - The editor used must support saving the file with encoding **UTF-8 without BOM**

Editing XML Files Exported from Excel (cont.)

The first two lines in the XML file generated by Excel must be replaced with the appropriate header as indicated in the XML Specifications:

- The header from an exported XML file may be copied into the file created by Microsoft Excel
- A sample header file may be exported using the links provided in the XML Specification
- Files that do not have the TNS removed or do not have the appropriate header will be rejected as having an invalid format when they are uploaded
- Full instructions on the appropriate replacements are included in the XML specifications

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UPLOADING XML FILES

XML Data

- You may upload your XML data using one file for all data or multiple files with partial data
- Examples of how multiple files can be used:
 - Upload one module at a time
 - Upload all data available in your electronic health record system
 - Upload Medical Record Numbers for the patients
 - Upload measure dates (e.g. Blood Pressure or HbA1c) and enter measure result values manually
 - When multiple locations exist for a TIN, upload patients for each location in a separate file

Empty Tags in the XML Data

- When the XML file is exported, empty tags are provided for each data item in the modules in which the patient is ranked
- The empty tags are provided so you know which tags can be used for the patient
- The empty tags can be removed if the tag is not required
 - For example, if the patient cannot be confirmed in a module, the measure data is not required
- Empty tags will be ignored in the XML processing

Pre-filled Data in the XML Data

- Pre-filled data can be overwritten if more recent data is available in the patient's medical record
- The pre-filled **Clinic ID** or **Provider NPI(s)** may be updated using XML
 - Other patient Demographics data may only be updated manually using the Web Interface screens
- A Pre-filled **Yes** for PREV-7 Immunization Received may be overwritten

XML Processing

- XML tags containing data will overwrite any existing data already entered using XML or manual entry
- If a data field does not apply to a patient, you do not need to provide the XML tag
 - For example, in DM-16 if the patient does not have IVD, you do not need to provide a tag or value for Daily Aspirin Use
 - If you provide a value that is not required for the patient, it will be ignored in the measure performance calculations
- When included in the file, the XML tags must be in the order specified in **Appendix A** for the **Patients XML** file or in order specified in **Appendix B** for the **Patient Discharge XML** file
 - Files with a different tag order cannot be processed

XML Processing (cont.)

- The **CARE-1** discharge dates for a patient in the XML file must be the same dates as the pre-populated discharge dates in the Web Interface
 - The data guidance allows plus or minus two days from the pre-populated date to confirm the discharge, but the date in the XML file must be an exact match
- The **Clinic ID** and **Provider NPI** must exist in the Web Interface before they can be used in the XML file
- If a correctly formatted file contains an invalid discharge date, **Clinic ID**, or **Provider NPI**, an error will be received, but remaining valid information will be processed

Upload Data Screen

<Your Organization Name Here> [Accessibility](#) | [Help](#)

[Home](#) [Reports](#) ▾ [Export Data](#) [Upload Data](#) [Add/Edit](#) ▾ [Locked Records](#) [List Users](#) [Submit](#) [Preferences](#)

Upload Data

* Upload Data Set

Note: No other users should be using the database while data is being uploaded.

* Source File

Note: The name of the file can not exceed 35 characters.

* Required field

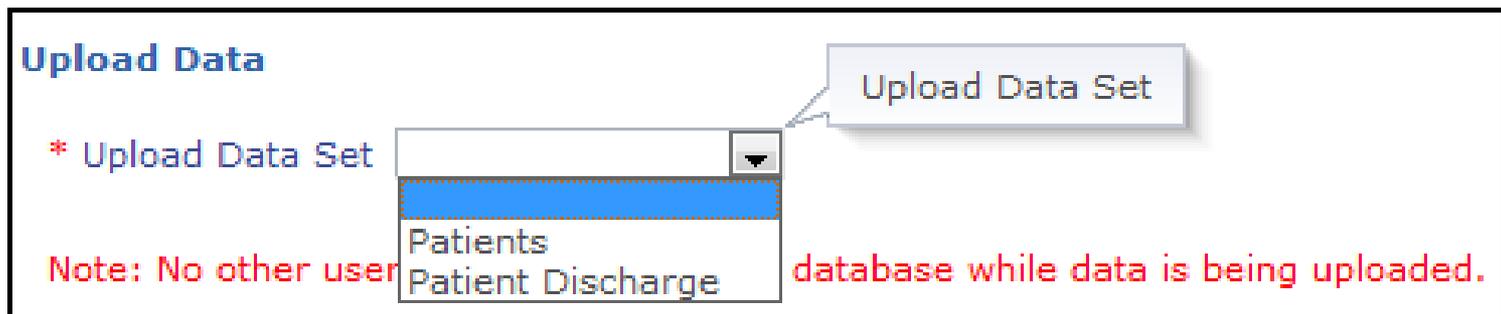
Upload Data Results

[View GPRO Web Interface XML Specification](#)

Date	User Name	File Name	File Type	Status
No XML files have been uploaded.				

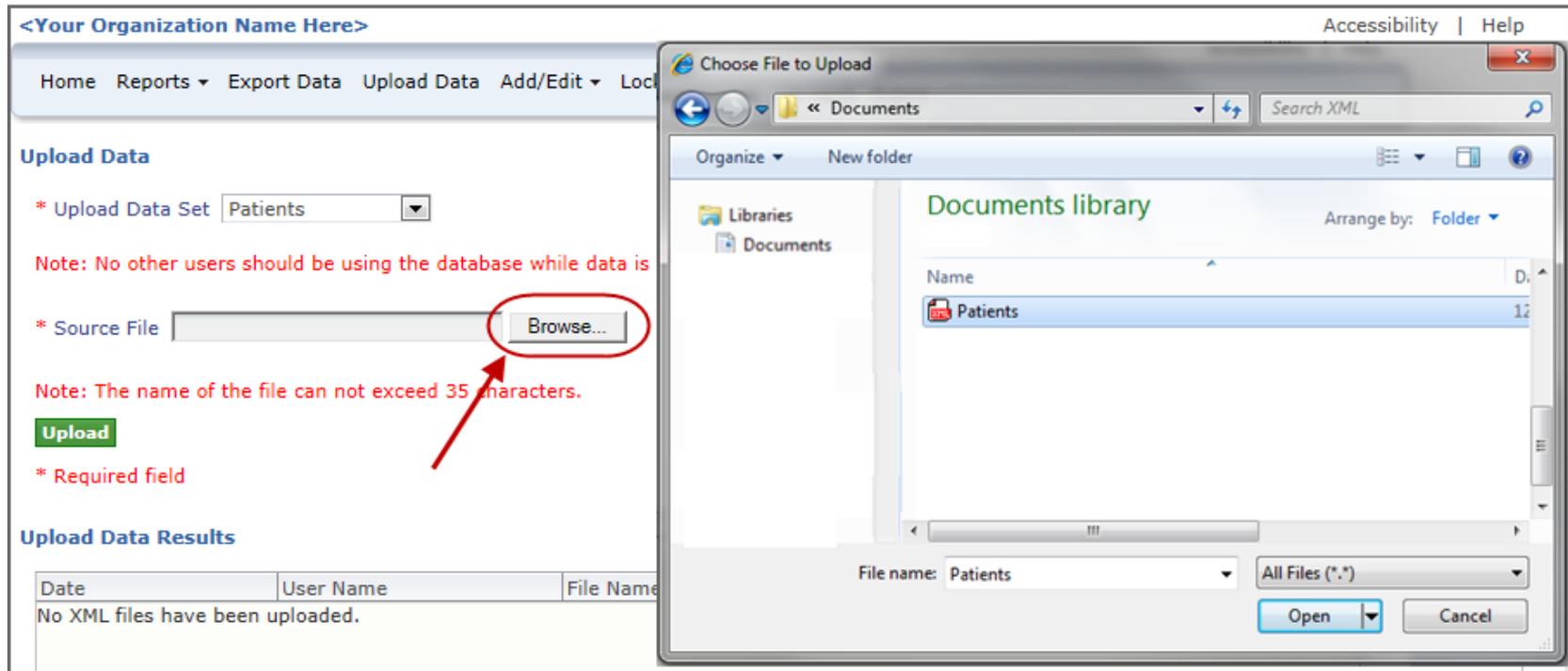
Uploading XML Files

- Two data sets can be uploaded into the Web Interface
 - Patients
 - Patient Discharge
- Select one of the options on the **Upload Data Set** pull-down menu



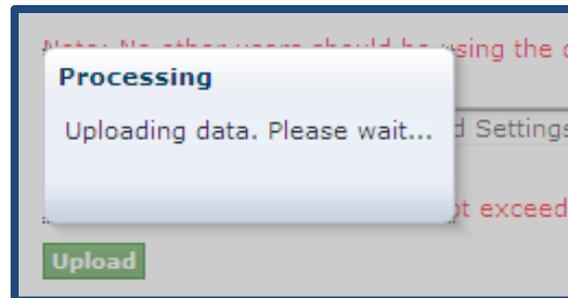
Uploading XML Files (cont.)

Select the **Browse** button to open the Windows file selector and chose the file to upload



Uploading XML Files (cont.)

- Click the **Upload** button
- Confirmation of the upload request will appear



- The request to upload the XML file is sent to the database and the **Upload Data Results** table is updated with the status of the file submission

Uploading XML Files (cont.)

- The **Upload Data Results** table will display information on the current and prior file uploads
 - **Date** and time the file was uploaded
 - **User Name** of the person uploading the file
 - User provided **File Name** for the uploaded file
 - **File Type** – Patient or Patient Discharge
 - **Status** of the upload processing
- The **Refresh** button updates the list and the status of the current file processing
- If XML files have not been uploaded for your TIN, the table will display **No XML files have been uploaded.**

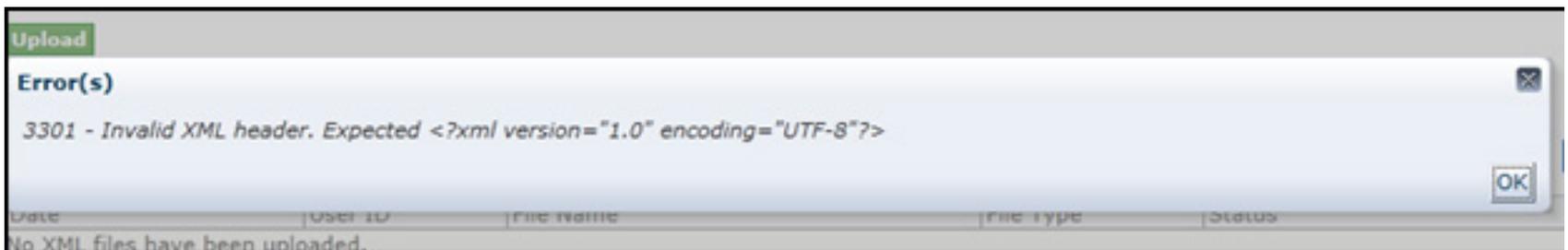
Date	User Name	File Name	File Type	Status
10/13/2014 01:43PM	Fakefirst1 FakeLast1	patient-discharge_10132015.xml	Patient Discharge	Upload Successful
09/15/2014 11:55AM	Fakefirst1 FakeLast1	patients_411_final.xml	Patient	Upload Successful
09/15/2014 11:47AM	Fakefirst1 FakeLast1	patients_411_final.xml	Patient	Invalid file structure
09/15/2014 11:29AM	Fakefirst1 FakeLast1	patientsdm3update.xml	Patient	Upload Successful

Presenter: Jane Schiemer, CMS Contractor

FINDING AND CORRECTING ERRORS

XML File Errors

- This error message will appear if the XML file was not saved with encoding **UTF-8 without BOM**
- If the header for the XML file is invalid, the Error message will appear and no further validation will be done on the file



XML File Editing Hints

- XML files cannot contain unprintable characters or BOM and those files with unprintable characters will be marked as invalid
 - Unprintable characters will not be visible to the user in Wordpad or Notepad
 - Wordpad may even **ADD** unprintable characters when saving
 - The freeware editors found to be most helpful to display special characters for removal are **Notepad++** and **PSPad**
- XML files do not need to be formatted using Pretty-Print
 - The `<?xml version="1.0" encoding="UTF-8"?>` line must be on a separate line from all other data
 - Files with the `<?xml version="1.0" encoding="UTF-8"?>` line on the same line as other data will be marked as having an invalid header
 - Using Pretty-Print helps locate errors because the error message contains a line number

XML File Editing Hints (cont.)

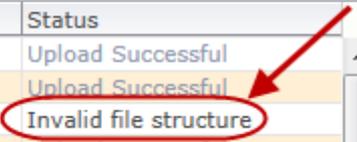
- The header format for a file to be uploaded may be copied from a file that has been downloaded from the Web Interface or the sample headers in the XML Spec
 - The header format in an exported Patients or Patient Discharge XML file is the same format used in a corresponding XML file to be uploaded
 - Patient XML file header and Patient Discharge XML file header are different
- While some users have been able to save and successfully upload files using various encoding methods, **UTF-8 without BOM** has been found to be the most reliable

XML File Errors (cont.)

- If the XML file is valid, the **Status** will display **Upload Successful** when processing is complete
- If there are errors in the XML file, the **Status** will display **Invalid file structure**
- The **Invalid file structure** text will be a hyperlink, which can be selected to display the associated errors

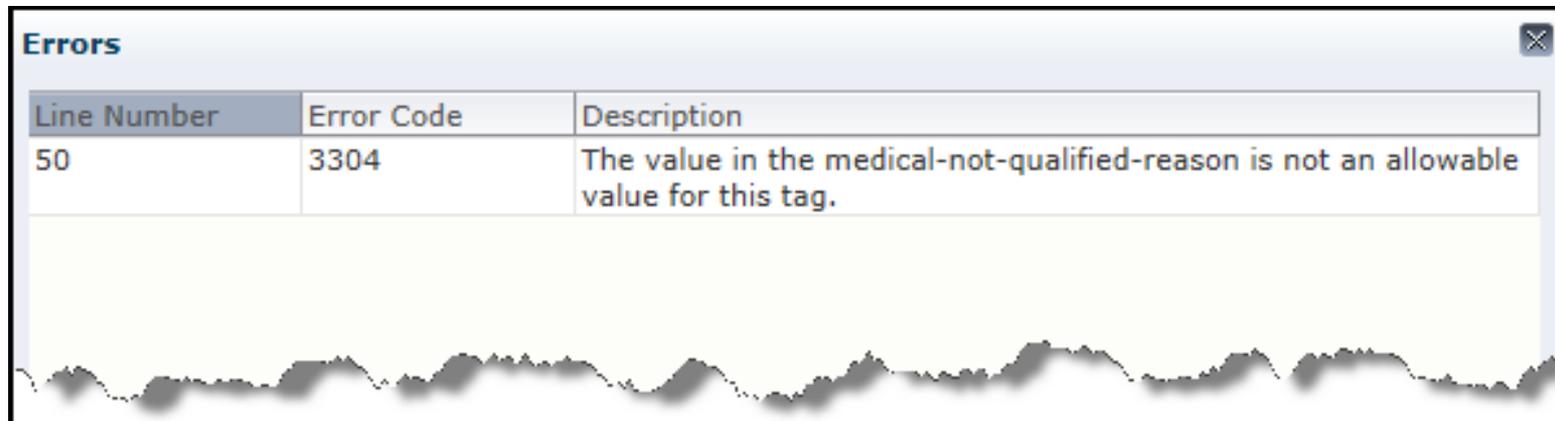
Upload Data Results [View GPRO Web Interface XML Specification](#) [Refresh](#) 

Date	User Name	File Name	File Type	Status
10/13/2014 01:43PM	Fakefirst1 FakeLast1	patient-discharge_10132015.xml	Patient Discharge	Upload Successful
09/15/2014 11:55AM	Fakefirst1 FakeLast1	patients_411_final.xml	Patient	Upload Successful
09/15/2014 11:47AM	Fakefirst1 FakeLast1	patients_411_final.xml	Patient	Invalid file structure
09/15/2014 11:29AM	Fakefirst1 FakeLast1	patientsdm3update.xml	Patient	Upload Successful



XML File Errors (cont.)

- Up to 1000 errors appear in a grid with the **Line Number** of the error, the **Error Code**, and a **Description** of the error
- The error codes and valid values for each tag are detailed in the XML Specifications



Line Number	Error Code	Description
50	3304	The value in the medical-not-qualified-reason is not an allowable value for this tag.

Check Entries Report

Check Entries Report - 09/09/2014 06:58PM -- <Your Organization Name Here>

[View Printable Report](#) 

Medicare ID	Type	Measure	Element	Message	Provider Name 1	Provider Name 2	Provider Name 3
214718869E	ERROR	PREV-5	PREV-5 Confirma...	The value is missing.	PLNAME040455, PFNAME040455	PLNAME060950, PFNAME060950	
605510586E	ERROR	PREV-11	PREV-11 Confirma...	The value is missing.	PLNAME020974, PFNAME020974	PLNAME013728, PFNAME013728	
210386374E	ERROR	IVD Confirma...	IVD Confirmed	The value is missing.	PLNAME017336, PFNAME017336	PLNAME047799, PFNAME047799	PLNAME018694, PFNAME018694
217141785E	ERROR	CAD Confirma...	CAD Confirmed	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-13	Most Recent BP	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-14	LDL-C Test	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-16	Has IVD	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-17	Tobacco Non-Use	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434

Check Entries Report (cont.)

- This report enables you to find errors and warnings for all patients
- The report will list
 - The patient's **Medicare ID**
 - The **Type** of message (error or warning)
 - The **Measure** and **Element** within the measure with the error or warning
 - **Message** describing the error or warning
 - Up to three **Provider Names** for the patient

Check Entries Report (cont.)

- Generate the report after uploading your XML files or manually editing the patients to find any missing or inconsistent data
- The report will list errors and warning for all patients, so generating the report before you begin abstraction will create a large file
- The missing data is based on the required data using the parent/child relationship

Check Entries Report (cont.)

- An error appears if the **Medical Record Found** does not have an answer
 - No other values for the patient will be checked until an answer is provided for **Medical Record Found**
- If **Medical Record Found** is **Yes**
 - The **Confirmation** for each module in which the patient is ranked will be checked and an error will appear for each confirmation missing a value
 - Measure values will not be checked in a module until the **Confirmation** for the module is set to **Yes**
- If **Confirmation** is **Yes** for the module, required values for the measures in that module are checked

Free Source Code Editors

- Notepad++ and PSPad are free source code editors that support encoding in **UTF-8 without BOM**
- A downloadable package, which does not require installation, is available for both Notepad++ and PSPad
- Notepad++ is available at <http://notepad-plus-plus.org>
- PSPad is available at <http://www.pspad.com>

RESOURCES & WHERE TO GO FOR HELP

Resources

- **GPRO Web Interface:** http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html
 - PQRS group practice and ACO support call presentations
 - 2014 XML Specification
 - 2014 Supporting Documents (in the Downloads section)
 - *Data Guidance is included as a separate tab in each of the supporting documents' workbooks*
 - 2014 GPRO Web Interface assignment specification and sampling documents
- **Shared Savings Program:** <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html>
- **Pioneer ACO Model:** <http://innovation.cms.gov/initiatives/Pioneer-ACO-Model/>
- **PQRS Portal:**
https://www.qualitynet.org/portal/server.pt/community/pqri_home/212

Resources (cont.)

Go to the CMS PQRS GPRO Web Interface page at http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html

2014 GPRO Web Interface Support Calls:

In addition to the training presentations, CMS will host [support calls](#) for those PQRS group practices who registered to report 2014 PQRS via the GPRO Web Interface and ACOs submitting data via the GPRO Web Interface. Support calls will be held on the following dates:

- **11/05/14:** GPRO Web Interface Overview and Q&A Session ([Presentation](#))
- **11/12/14:** IACS Overview and Q&A Session ([Presentation](#))
- **11/13/14:** Assignment and Sampling Overview and Q&A Session
- **11/19/14:** Measures Specification Overview and Q&A Session (ACOs only)
- **11/20/14:** Measures Specifications Overview and Q&A Session (PQRS group practices only)
- **12/04/14:** Beneficiary Sample List & Training Environment Instruction and Q&A Session
- **12/11/14:** Detailed XML Training and Q&A Session
- **01/15/15:** GPRO Web Interface Q&A Session
- **01/26/15 – 01/30/15:** Daily GPRO Web Interface Q&A Sessions
- **02/05/15:** Weekly GPRO Web Interface Q&A Session
- **02/12/15:** Weekly GPRO Web Interface Q&A Session
- **02/19/15:** Weekly GPRO Web Interface Q&A Session
- **02/26/15:** Weekly GPRO Web Interface Q&A Session
- **03/05/15:** Weekly GPRO Web Interface Q&A Session
- **03/12/15:** Weekly GPRO Web Interface Q&A Session
- **03/16/15 – 4/8/215:** Daily GPRO Web Interface Q&A Sessions (weekdays only)

Resources (cont.)

The QualityNet Portal is located at <https://www.qualitynet.org/portal>

The screenshot shows the CMS.gov QualityNet portal. At the top left is the CMS.gov logo and the QualityNet logo, with the text "Centers for Medicare & Medicaid Services" below. The page is divided into several sections:

- Related Links:** A list of links with expandable icons: CMS, Quality Improvement Resources, Measure Development, Consensus Organizations for Measure Endorsement/Approval, and Communication Support Page.
- Guest Instructions:** A welcome message for the Physician and Other Health Care Professionals Quality Reporting Portal, with a "Sign In" button and a link to download and install Adobe Reader.
- User Guides:** A list of user guides: PQRS Portal User Guide, PQRS SEVT User Guide, PQRS Feedback Report User Guide, eRx Feedback Report User Guide, eRx Payment Adjustment Feedback User Guide, and PQRS Feedback Dashboard User Guide.
- PQRS Verify Report:** A section for entering a TIN or NPI to verify a feedback report.
- Guest Announcement:** A notice about the confidentiality of PQRS feedback reports and a link to information about auxiliary aids and services.
- Physician and Other Health Care Professionals Quality Reporting Portal:** A central section with a "Sign In" button, a "Forgot your password?" link, and a "Quick Reference Guides" link.

Notice: If you have not used your IACS account within the past 60 days or more, your account has been temporarily disabled as required by the CMS security policy. You should have received an e-mail at the e-mail address associated with your IACS account profile instructing you how to get your account re-enabled. If you need further assistance, please contact the QualityNet Help Desk at 1-866-288-8912, or qnet-support@hcqis.org.

Notice: If you are experiencing difficulties viewing the PQRS Communications Support Page with Internet Explorer 9.0, please ensure that you are using the compatibility view feature by doing the following: Open Internet Explorer, Select Tools, Select Compatibility View

Where to Go for Help

- **QualityNet Help Desk (PQRS and IACS)**
 - E-mail: gnetssupport@hcqis.org
 - Phone: (866) 288-8912 (TTY 1-877-715-6222)
 - Fax: (888) 329-7377
- **CAHPS for PQRS Survey Project Team**
 - E-mail: pqrscahps@hcqis.org
- **EHR Incentive Program Information Center**
 - Phone: (888) 734-6433 (TTY 888-734-6563)
- **VM Help Desk**
 - Phone: (888) 734-6433 Option 3 or pvhelpdesk@cms.hhs.gov
- **Medicare Shared Savings Program ACO**
 - Information is available on the Shared Savings Program website at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html>
 - E-mail SharedSavingsProgram@cms.hhs.gov
- **Pioneer ACO**
 - E-mail: PIONEERQUESTIONS@cms.hhs.gov

Acronyms

- **ACO** – Accountable Care Organization
- **CAHPS** – Consumer Assessment of Healthcare Providers and Systems summary surveys
- **CMS** – Centers for Medicare & Medicaid Services
- **CQMs** – Clinical Quality Measures [for attestation]
- **eCQMs** – Electronic Clinical Quality Measures [for PQRS Portal submission]
- **EHR** – Electronic Health Record
- **EP** – Eligible Professional
- **FFS** – Fee-for-Service
- **GPRO** – Group Practice Reporting Option
- **NPI** – National Provider Identifier
- **ONC** – Office of the National Coordinator
- **PQRS** – Physician Quality Reporting System
- **PFS** – Physician Fee Schedule
- **VM** – Value-based Payment Modifier

Time for

QUESTION & ANSWER SESSION