

# **November CMS and ONC eHealth Vendor Workgroup**

November 19, 2015  
12:00 PM EDT

Agenda Item	Speaker
Million Hearts Model Update	Carlye Burd <i>CMS' Center for Medicare &amp; Medicaid Innovation (CMMI)</i>
Quality Reporting Document Architecture (QRDA) Validation Tools Update <ul style="list-style-type: none"> <li>• Cypress Validation Utility</li> <li>• SEVT</li> <li>• PSVA</li> </ul>	David Czulada, <i>on behalf of ONC</i> Brahma Sen and Jennifer Seeman, <i>on behalf of CMS</i>
The Joint Commission's 2015 Electronic Clinical Quality Measures (eCQMs) Data Receipt Update	Mitra Biglari <i>The Joint Commission</i>
The Joint Commission's 2016 Measure Selection Requirements Update	Sharon Sprenger <i>The Joint Commission</i>
Questions	

Carlye Burd

# **MILLION HEARTS MODEL UPDATE**

# Million Hearts: Cardiovascular Risk Reduction Model



*EHR Vendor Meeting  
11/19/2015*

*Preventive and Population  
Health Care Model Group  
Center for Medicare and  
Medicaid Innovation*

# Purpose and Overview

## **PRESENTATION GOAL:**

Brief EHR Vendors on the Million Hearts Model and the development of the Model's data reporting registry

## **OVERVIEW**

- Model Design Overview
- Data Registry Development

# Model Overview

## AIM

Five-year model to test whether provider incentives for risk stratification, shared decision-making and CVD risk reduction is effective in reducing heart attacks, strokes, total cost of care or Medicare FFS beneficiaries.

## PRACTICE PARTICIPATION

- About 450 practices from all 50 states
- At least one MD, DO, PA or NP
- Stage 1 Meaningful Use and ONC certified EHR

## TARGET MEDICARE POPULATION

- Medicare FFS Beneficiaries
- Risk Modification and payment for high risk beneficiaries

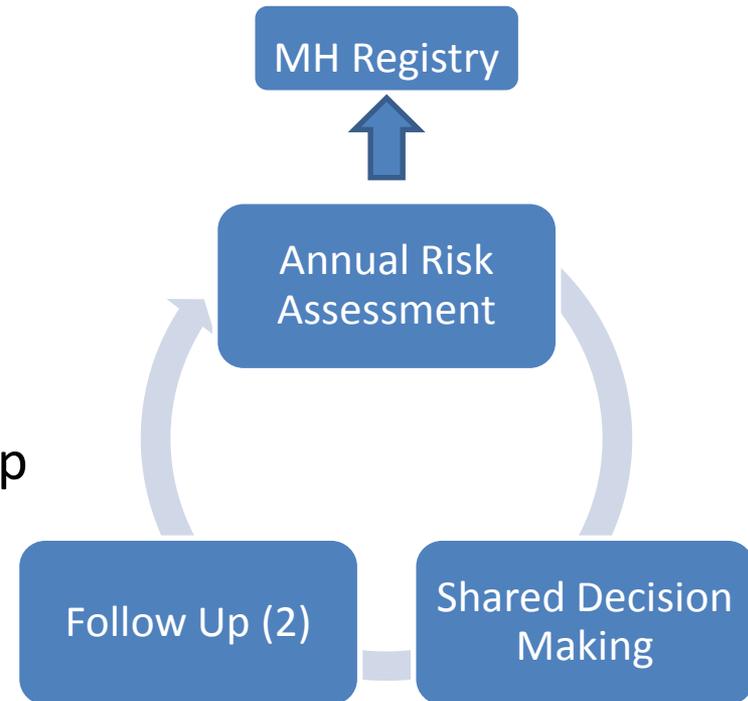
# Model Design

## PRACTICE RANDOMIZATION

- Practices randomized to Intervention or Control Group

## INTERVENTION

- Risk stratify beneficiaries using the ACC/AHA 10 year Atherosclerotic Cardiovascular Disease (ASCVD) risk score as baseline
- Shared decision and care teams to develop risk modification plan for highest risk beneficiaries (risk of MI/stroke > 30%)
- Perform annual risk reassessment for high risk beneficiaries



# Current ACC/AHA Risk Calculator- Web Based Platform

The screenshot displays the 'ASCVD Risk Estimator\*' web-based platform. The interface features a navigation bar with four tabs: 'Estimator' (selected), 'Clinicians', 'Patients', and 'About'. Below the navigation bar, a dark blue header contains the title 'ASCVD Risk Estimator\*'. A prominent message in a white box with a blue border states: 'All fields are required to compute ASCVD risk.' The form is organized into two columns. The left column includes: 'Gender' with radio buttons for 'Male' and 'Female'; 'Total Cholesterol (mg/dL)' with a text input field containing '130-320'; 'HDL - Cholesterol (mg/dL)' with a text input field containing '20-100'; and 'Treatment for Hypertension' with a radio button. The right column includes: 'Age' with a text input field containing '20-79'; 'Race' with three radio button options: 'White', 'African American', and 'Other'; and 'Systolic Blood Pressure' with a text input field containing '90-200'. A close button (marked with an 'x') is located in the bottom right corner of the form area.

<http://tools.acc.org/ASCVD-Risk-Estimator/>

# Model Design

## REPORTING REQUIREMENTS

- Practices will report using the *Million Hearts Registry*
  - Beneficiary clinical data and risk scores reported every 6 months

## PAYMENT MODEL

- Year 1: Pay for reporting and ramp up
- Year 2-5: Incentivized PBPM for high risk beneficiaries

Absolute Risk Reduction	PBPM Paid
5-10%	\$5
> 10%	\$10

# Million Hearts Registry

## GOAL

Develop user-friendly interface for practices to enter clinical data and manage risk for the Model.

## DEVELOPMENT

- CMS contracting with Deloitte & CECity to develop registry

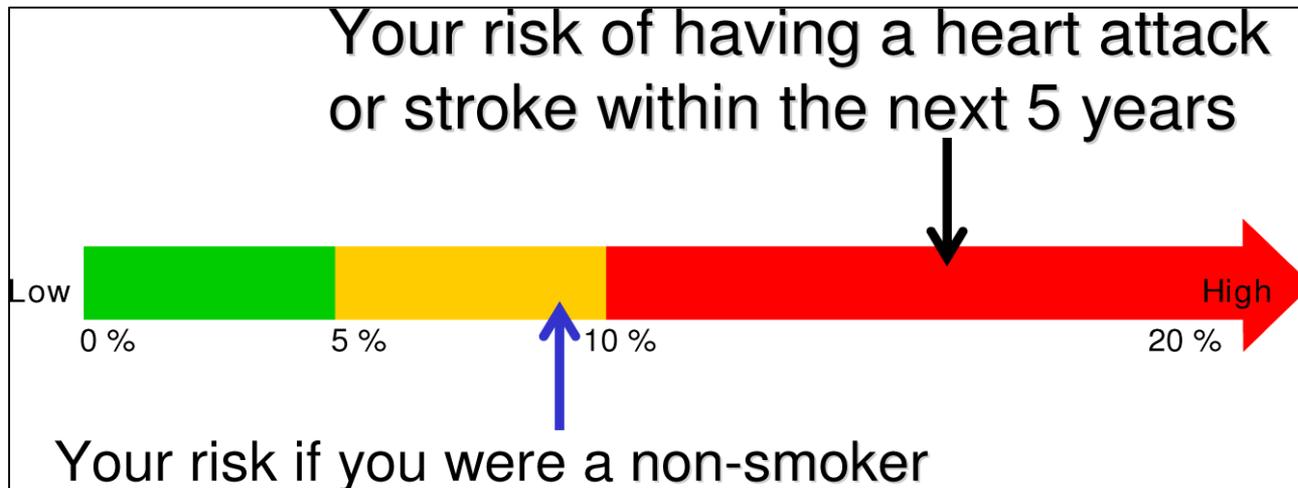
## REGISTRY COMPONENTS

- Attributed List of Beneficiaries
- Risk Calculator
- Shared Decision Making Tool

# Million Hearts Registry

## REGISTRY FUNCTIONALITY

- Option for **manual data entry** or **bulk upload** of clinical data
  - Template for populating from EHR for bulk upload
- Data visualization of risk and treatment options
- Reminders during reporting periods



# CECity PQRSwizard Patient Registry

Logged In as Jane Smith



[Home](#)
[Products](#)
[Penalties & Incentives](#)
[How It Works](#)
[Partners](#)
[Support](#)

Sign out



### PQRSwizard Progress Summary

Launch Video: Individual Measures

**ACCOUNT INFO** Edit

NPI: 000000000  
 TIN: 111111111  
 Email: jsmith@cecity.com  
 Face to Face Encounter: Yes

**SELECTED MEASURE 8** Edit

Measures:  3 / 3  
 NQS Domains:  3 / 3  
 Cross Cutting:  1+ / 1

#1 #110 #111 #117 #119  
 #127 #128 #130 #131

**COLLECTED PQR 8 DATA**

Complete Patients: 8  
 Complete Encounters: 1  
 Incomplete Patients: 2  
 Patients with Incomplete encounters: 7

**READY TO SUBMIT**

*You are not ready to submit*

## Collect PQR Data

Now it is time to start inputting or uploading your PQR data. PQRSwizard provides web based forms for you to manually enter your PQR data; click the "Manually Add Patient" button to add patients manually. There are also spreadsheet based data templates and definition files available for you to upload your patient records as well. You may use one more of these methods to populate your PQRSwizard Patient Registry. If you would like to edit your measures selection, click the Edit button on the "Selected Measures" panel on the left of this screen.

**Upload Files**

Access data templates and upload patient data files.

**View Previous Uploads**

Review uploads and access historic files.

**Manually Add Patient**

Add new patients manually. Includes the ability to add a patient encounter and encounter data for the patient.

All Patients (10)
Incomplete Patients (2)
Incomplete Encounters (7)
Invalid Patients (1)

### My PQRSwizard Patient Registry

Filter By

Q

PATIENT ID	FIRST NAME	LAST NAME	DOB	LAST UPDATED	# ENCOUNTERS	
+ 123456789	Tina	Baker	05/12/1945	08/24/2015	1 <span style="color: orange;">⚠</span>	Actions -
+ 2135461	Tim	Grange	09/14/1945	08/24/2015	0 <span style="color: orange;">⚠</span>	Actions -
+ 23589123	Heidi	Ghanz	03/13/1940	08/24/2015	2 <span style="color: orange;">⚠</span>	Actions -
+ 47832123131 <span style="color: red;">!</span>				08/24/2015	1 <span style="color: orange;">⚠</span>	Actions -
+ 546821D2	Jennifer	LaChance	06/16/1945	08/24/2015	2 <span style="color: orange;">⚠</span>	Actions -
+ 89832123	Mike	Michaels	08/19/1945	08/24/2015	1 <span style="color: orange;">⚠</span>	Actions -
+ 89753032	Frank	Franco	03/15/1945	08/24/2015	1 <span style="color: orange;">⚠</span>	Actions -
+ 985312352	Angela	Casale	08/16/1945	08/24/2015	1 <span style="color: orange;">⚠</span>	Actions -
+ A12445901 <span style="color: red;">!</span>				08/24/2015	1 <span style="color: orange;">⚠</span>	Actions -
+ Patient 1	Jim	Smith	02/09/1950	08/24/2015	1	Actions -

⚠ Has Incomplete patient encounter information ! Patient data is Incomplete.

1 - 10 of 10
LISTINGS PER PAGE: 10 / 20 30

«
«
1
»
»

# Thank You

## Questions?

<https://innovation.cms.gov/initiatives/Million-Hearts-CVDRRM/>

### Contact Information:

Million Hearts Model, Preventive and Population Health Care Model Group, Center for Medicare and Medicaid Innovation

- Carlye Burd, MH Model IT Team Lead, [carlye.burd@cms.hhs.gov](mailto:carlye.burd@cms.hhs.gov)
- Nina Brown, MH Model Team Lead, Director of the Division of Health Care Delivery, [nina.brown@cms.hhs.gov](mailto:nina.brown@cms.hhs.gov)

David Czulada, Brahma Sen, and Jennifer Seeman

**QUALITY REPORTING  
DOCUMENT ARCHITECTURE  
(QRDA) VALIDATION TOOLS  
UPDATE**



# Quality Reporting Document Architecture (QRDA) Validation Tools

**David Czulada**

Contractor on Behalf of the Office of the National Coordinator for Health Information  
Technology (ONC)

**Brahma Sen**

Physician Quality Reporting System (PQRS) Release Manager  
Development Effort Consolidation Contract (DECC)

**Jennifer Seeman**

Hospital Quality Reporting (HQR)  
Electronic Health Record (EHR) Program Manager, Edaptive Systems, PMBR

**November 19, 2015**

QRDA Validation Tools

---

# **CYPRESS VALIDATION UTILITY**

David Czulada

Contractor on Behalf of the ONC

# Cypress Validation Utility

## The Cypress Validation utility:

- Is standalone and used for validating QRDA files against the Health Level-7 (HL7), Centers for Medicare & Medicaid Services (CMS) 2015 and 2016 QRDA Implementation Guides
- Allows vendors to choose the desired validation test:
  - CMS QRDA Category I & III (2015 or 2016 for EH or EP)
  - HL7 QRDA Category I & III
- Is available on the [Standards Implementation and Testing Environment \(SITE\)](#)
  - No login required

Reference: url for SITE: <http://sitenv.org/qrda>

# Using the Cypress Validation Utility

1. Select a file to validate
2. Select Reporting Program Year
  - a. None
  - b. 2015
  - c. 2016
3. Select Reporting Program
  - a. PQRS
  - b. HQR
4. Select Document Type
  - a. QRDA Cat I (R2 or R3)
  - b. QRDA Cat III
5. Acknowledge that QRDA file does not include Personally Identifiable Information (PII) or Personal Health Information (PHI)
6. Submit

The screenshot shows the Cypress Validation Utility web interface. At the top, there is a warning message in a red box: "WARNING: This utility is meant for synthetic patient records only. DO NOT upload documents containing Protected Health Information (PHI) or Personally Identifiable Information (PII). The Cypress QRDA Validation Utility is intended as a development tool for EHR vendors who are testing synthetic QRDA Category I and Category III documents for conformance to CMS submission requirements. Files submitted for validation must not contain PHI or PII." Below the warning, the form is divided into sections: "Document" with a file selection button labeled "Select QRDA file" (callout 1); "Reporting Program Year" with radio buttons for "None (Base IG Only)", "2015", and "2016" (callout 2); "Reporting Program" with radio buttons for "PQRS" and "HQR" (callout 3); "Document Type" with radio buttons for "QRDA Cat I (R2)", "QRDA Cat I (R3)", and "QRDA Cat III" (callout 4); "PHI Confirmation" with a checkbox and text: "Please check the box to acknowledge that you've read and understand the warning, and to the best of your knowledge, the submitted files will contain neither PII nor PHI:" (callout 5); and a "Submit" button (callout 6).

# Validations

1. Clinical Document Architecture (CDA) Schema validation
2. Implementation Guide Schematron validation
  - a. Varies depending on which test you run (PQRS, HQR, HL7, 2015, 2016)
3. Measure/Population ID validation
  - a. Does the file contain valid measure IDs? Are populations reported only once?
4. Code/Valueset validation
  - a. Are valid valuesets and codes being used?
5. Measure Period validation
  - a. Is correct Measure Period used?
  - b. Do encounter time ranges fall within the Measure Period (For Electronic Health [EH] measures)?
6. Performance Rate validation (for Cat III)
  - a. Is the performance rate calculated correctly?

# Validation Error Report

## Document

EH\_Dora\_Fox\_incorrect\_encounter\_code.xml

Change

Remove

## Reporting Program Year

None (Base IG Only)

2015

2016

## Reporting Program

PQRS

HQR

## Document Type

QRDA Cat I (R2)

QRDA Cat I (R3)

QRDA Cat III

## PHI Confirmation

Please check the box to acknowledge that you've read and understand the warning, and to the best of your knowledge, the submitted files will contain neither PII nor PHI:



Submit

## cypress validation utility

Summary

Measures (0)

Value Sets (1)

CMS (0)

QRDA (0)

CDA (0)

1. The code 18345200512342 in codeSystem 2.16.840.1.113883.6.96 cannot be found in the declared valueSet 2.16.840.1.113883.3.666.5.307

```
<entry >
```

```
<encounter classCode="ENC" moodCode="EVN">
```

```
<!-- Encounter activities template -->
```

```
<templateId root="2.16.840.1.113883.10.20.22.4.49"/>
```

```
<!-- Encounter performed template -->
```

```
<templateId root="2.16.840.1.113883.10.20.24.3.23"/>
```

```
<id extension="551ed416495230114b250100" root="1.3.6.1.4.1.115"/>
```

```
<code code="18345200512342" codeSystem="2.16.840.1.113883.6.96" sdtc:valueSet="2.16.840.1.113883.3.666.5.307">
```

```
<originalText >
```

```
Encounter, Performed: Encounter Inpatient
```

```
</originalText>
```

```
</code>
```

```
<text >
```

```
Encounter, Performed: Encounter Inpatient
```

```
</text>
```

```
<statusCode code="completed"/>
```

```
<effectiveTime >
```

```
<!-- We try to look for the admit/discharge times on the encounter if they are there. If not, we fall back to the typical start/end date. -->
```

```
<low value="20130430170000"/>
```

```
<high value="20130430210000"/>
```

```
</effectiveTime>
```

```
</encounter>
```

```
</entry>
```

QRDA Validation Tools

---

**LIVE DEMO**

QRDA Validation Tools

---

# **SUBMISSION ENGINE VALIDATION TOOL (SEVT)**

Brahma Sen  
PQRS Release Manager  
DECC

# PQRS Portal

## Related Links

- [+ CMS](#)
- [+ Quality Improvement Resources](#)
- [+ Measure Development](#)
- [+ Consensus Organizations for Measure Endorsement/Approval](#)
- [+ Communication Support Page](#)

## Guest Instructions

Welcome to the Physician and Other Health Care Professionals Quality Reporting Portal. Please click on the Sign In button located in the center of the page.

[Download and install Adobe Reader](#) to view User Guides in accessible PDF format.

## User Guides

- [PQRS Portal User Guide](#)
- [PQRS SEVT User Guide](#)

## Guest Announcement

Information in the Taxpayer Identification Number (Tax ID or TIN-level) PQRS feedback reports is confidential. Your report is safely stored online and accessible only to you (and those you authorize) through the web application. TIN-level reports should be shared only with others within the practice who have a vested interest in the summarized quality data. Sharing of other PQRS participants' information is acceptable only if the individual EP has authorized the TIN to do so. Please ensure that these reports are handled appropriately and disposed of properly to avoid a potential Personally Identifiable Information (PII) exposure or Identity Theft risk.

PQRS Feedback Reports for program year 2014 and later can be accessed (when available) from the PV-PQRS portal. For instructions on how to access these Feedback Reports, please go to [Physician Feedback Program website](#).

## Physician and Other Health Care Professionals Quality Reporting Portal

**Sign In** to your Portal

If you do not have an account, please register.

[Forgot your password?](#)

For assistance with new & existing EIDM accounts, review the [Quick Reference Guides](#).

# PQRS Portal

## Terms & Conditions

**CMS.gov** | Enterprise Portal  
Centers for Medicare & Medicaid Services

Home | About CMS | Newsroom | Archive | [Help & FAQs](#) | [Email](#) | [Print](#)

Health Care Quality Improvement System | Provider Resources

### Terms and Conditions

OMB No.0938-1236 | Expiration Date: 04/30/2017 | [Paperwork Reduction Act](#)

You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:  
You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system.  
At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.

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

To continue, you must accept the terms and conditions. If you decline, your login will automatically be cancelled.

# PQRS Portal Log In

**CMS.gov** | Enterprise Portal  
Centers for Medicare & Medicaid Services

Home | About CMS | Newsroom | Archive | [Help & FAQs](#) | [Email](#) | [Print](#)

Health Care Quality Improvement System | Provider Resources

## Welcome to CMS Enterprise Portal

User ID

Password

[Log In](#) [Cancel](#)

[Forgot Password?](#)  
[Forgot User ID?](#)  
Need an account? Click the link - [New user registration](#)

# PQRS Submission Engine Validation Tool (SEVT) Navigation

Log Off User Eight

**CMS** | QualityNet  
.gov

### Site Navigation

Welcome, test77@e14s.com

**Log Off**

- Enhanced Feedback Submission Reports
- Submission Engine Validation Tool**
- Submission Reports
- Submissions

### Welcome

Welcome to Physicians Quality Reporting System (PQRS), quality data processing and reporting system. Providers, group practices, and data submission entities can test submitting quality data, perform data submissions during the submission period, view/request feedback reports, submit informal review requests for PQRS program.

To start the submission process or begin testing, or to access any other PQRS function, select the option on the left side navigation.

### Scheduled System Outages

PQRS Feedback Reports for program year 2014 and later can be accessed (when available) from the PV-PQRS portal. For instructions on how to access these Feedback Reports, please go to [Physician Feedback Program website](#).

PQRS system and applications will be down for maintenance during the dates below. For questions, contact the QualityNet Helpdesk.

Every Tuesday starting at 8:00 PM ET through Wednesday at 6:00 AM ET  
Every Thursday starting at 8:00 PM ET through Friday at 6:00 AM ET  
Third weekend of each Month starting Friday at 8:00 PM ET through Monday at 6:00 AM ET

Upcoming Maintenance weekend schedule:

- January (01/23 - 01/25)
- February (02/20 - 02/22)
- March (03/20 - 03/22)
- April (04/17 - 04/19)
- May (05/15 - 05/17)
- June (06/26 - 06/28)
- July (07/17 - 07/19)
- August (08/21 - 08/23)
- September (09/18 - 09/20)
- October (10/16 - 10/18)
- November (11/20 - 11/22)
- December (12/11 - 12/13)

# PQRS SEVT

The screenshot shows the CMS.gov QualityNet interface. At the top right, there is a "Log Off" link with a user icon. The main header displays "CMS.gov" and "QualityNet". On the left, a "Site Navigation" box contains a "Log Off" link (highlighted with a red box) and a list of menu items: "GPRO Submission", "PQRS Feedback Reports - Viewer", and "Submission Engine Validation Tool". The main content area is titled "Submission Engine Validation Tool" and contains the following text: "This tool allows users to validate the format and/or content of a file prior to submission. NOTE: This is not intended for GPRO/ACO web interface users." Below this, there are several form fields: "Participation Year" with a radio button selected for "2015", "Submission Type" with a dropdown menu set to "--Select One--", and "File:" with a text input field and a "Browse..." button. A "Validate" button is located at the bottom left of the form area.

# PQRS SEVT Submission Options

The screenshot shows the CMS.gov QualityNet interface. On the left is a 'Site Navigation' menu with links for 'PQRS Feedback Reports - Viewer', 'Submission Engine Validation Tool' (highlighted), 'Submission Reports', and 'Submissions'. The main area is titled 'Submission Engine Validation Tool' and contains a form with the following fields:

- Participation Year:** A radio button selected for '2015'.
- Submission Type:** A dropdown menu with options: '--Select One--', 'Registry XML', 'QCDR XML', 'ORDA Category 1' (highlighted), and 'ORDA Category 3'. A callout box points to this field with the text 'Required field-Submission Type'.
- File:** A text input field followed by a 'Browse...' button.

At the bottom left of the form is a 'Validate' button. The top right of the page has a 'Log Off' link. The CMS.gov logo and 'QualityNet' text are in the top left.

# PQRS SEVT Valid File

Log Off

**CMS** | QualityNet  
.gov

### Site Navigation

Welcome, qmuu884

**Log Off**

- PQRS Feedback Reports - Viewer
- **Submission Engine Validation Tool**
- Submission Reports
- Submissions

### Submission Engine Validation Tool

This tool allows users to validate the format and/or content of a file prior to submission.  
**NOTE:** This is not intended for GPRO/ACO web interface users.

\* indicates required fields

\* Participation Year:  2015

\* Submission Type:

\* File:

**The file passed validation**

[Validate Another File](#)

# PQRS SEVT

## File with Warnings

Log Off

**CMS** | QualityNet  
.gov

### Site Navigation

Welcome, qmuu884

**Log Off**

- PQRS Feedback Reports - Viewer
- **Submission Engine Validation Tool**
- Submission Reports
- Submissions

### Submission Engine Validation Tool

This tool allows users to validate the format and/or content of a file prior to submission.  
**NOTE:** This is not intended for GPRO/ACO web interface users.

\* indicates required fields

\* Participation Year:  2015

\* Submission Type:

\* File:

 **The file passed validation with 1 Warning(s)**

[Validate Another File](#)

# PQRS SEVT File with Errors

The screenshot displays the CMS.gov QualityNet interface. At the top right, there is a "Log Off" link. The main header features the "CMS.gov" logo and "QualityNet" text. On the left, a "Site Navigation" sidebar includes a welcome message "Welcome, qmuu884", a "Log Off" link, and a list of menu items: "PQRS Feedback Reports - Viewer", "Submission Engine Validation Tool" (highlighted), "Submission Reports", and "Submissions". The main content area is titled "Submission Engine Validation Tool" and contains the following text: "This tool allows users to validate the format and/or content of a file prior to submission. NOTE: This is not intended for GPRO/ACO web interface users. \* indicates required fields". Below this, there are form fields for "Participation Year" (set to 2015), "Submission Type" (a dropdown menu showing "--Select One--"), and "File" (a text input field with a "Browse..." button). A "Validate" button is located below the "File" field. At the bottom right, a red-bordered box contains a warning icon, the text "1 Error(s) Returned", and a blue link "Validate Another File".

# PQRS SEVT View Errors



## Submission Engine Validation Tool

**Submission Type:** QCDR XML  
**File Name:** 6028\_qcdr\_invalid\_npi\_format.xml  
**Validation Run Date/Time:** Fri Jan 23 10:22:45 EST 2015

 **1 Error(s) Retrieved**

LineNumber	ErrorCode	MessageDetail
18	6028	Provider NPI is not an allowable value.

# PQRS SEVT

## Errors and Warnings

The screenshot displays the CMS.gov QualityNet interface. On the left is a 'Site Navigation' menu with options like 'Log Off', 'PQRS Feedback Reports - Viewer', 'Submission Engine Validation Tool', 'Submission Reports', and 'Submissions'. The main area is titled 'Submission Engine Validation Tool' and contains a form with fields for 'Participation Year' (set to 2015), 'Submission Type' (set to --Select One--), and 'File' (with a 'Browse...' button). A 'Validate' button is present. A red-bordered box highlights a message: '1 Error(s) and 1 Warning (s) Returned' with a warning icon and a 'Validate Another File' link.

Log Out

**CMS** | QualityNet  
.gov

Site Navigation  
Welcome, qmuu884  
**Log Off**

- PQRS Feedback Reports - Viewer
- **Submission Engine Validation Tool**
- Submission Reports
- Submissions

Submission Engine Validation Tool

This tool allows users to validate the format and/or content of a file prior to submission.  
**NOTE:** This is not intended for GPRO/ACO web interface users.  
\* indicates required fields

\* Participation Year:  2015

\* Submission Type:

\* File:

 [1 Error\(s\) and 1 Warning \(s\) Returned](#)  
[Validate Another File](#)

# PQRS SEVT

## View Errors and Warnings



### Submission Engine Validation Tool

**Submission Type:** QRDA Category 1  
**File Name:** 7134\_S1\_L0563\_Pyscl\_Exm\_Fndg.xml  
**Validation Run Date/Time:** Wed Jan 14 14:55:56 EST 2015

#### 1 Error(s) Retrieved

LineNumber	ErrorCode	MessageDetail
512		PQRS_10710: //act[templateId/@root='2.16.840.1.113883.10.20.24.3.3']/code ValueSet validation failed. The provided code, codeSystem, and valueSet are incompatible.

#### 1 Warning(s) Retrieved

LineNumber	ErrorCode	MessageDetail
3	26958	This representedCustodianOrganization SHOULD contain zero or one [0..1] id (CONF:26958) such that it

Quality Reporting Document Architecture (QRDA) Validation Tools

# **PRE-SUBMISSION VALIDATION APPLICATION (PSVA)**

Jennifer Seeman

HQR EHR Program Manager, Edaptive Systems, PMBR

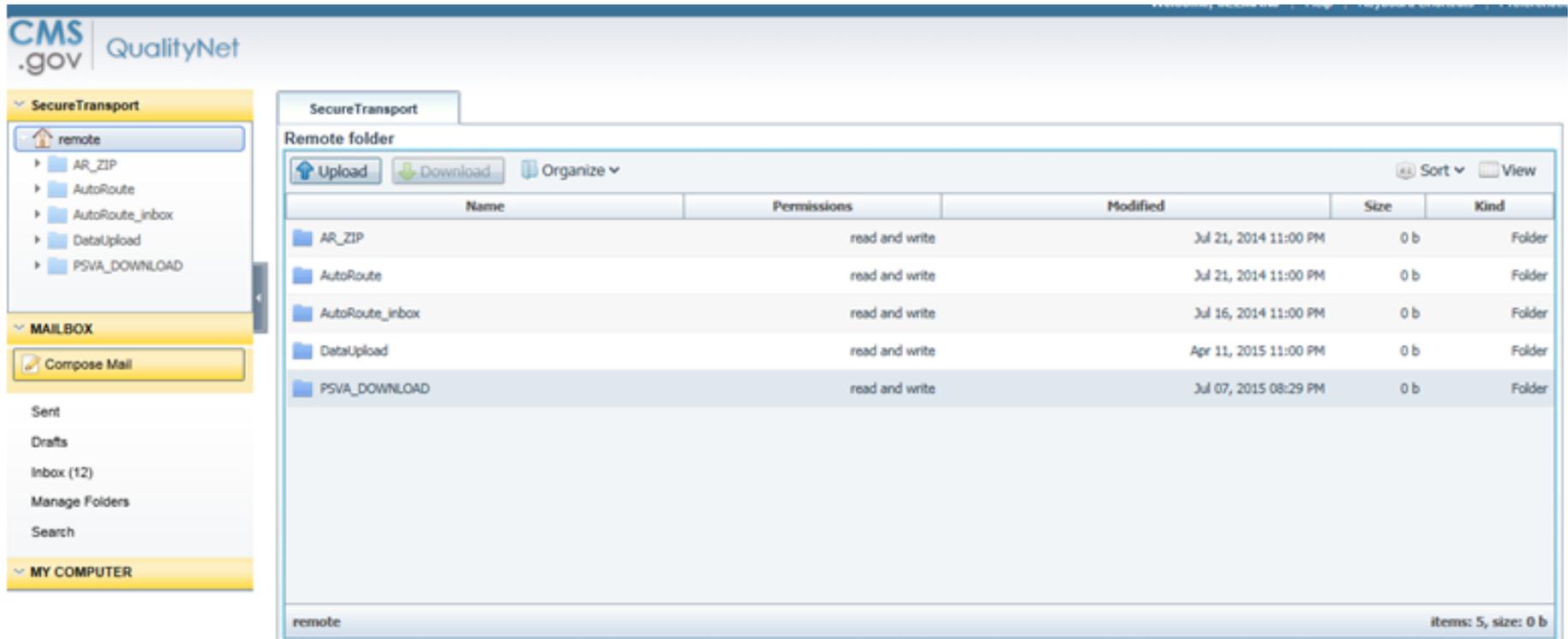
# PSVA

PSVA, developed in response to interest and demand from the HQR community to validate QRDA Category I R2 files:

- Is a downloadable tool that operates on a User's system
- Allows submitters to catch and correct errors prior to data submission to the CMS
- Provides validation feedback within the User's system
- Allows valid files to be separated and submitted while invalid files are identified for error correction

# QualityNet Secure Portal

PSVA is available for download from the Secure File Transfer page on the *QualityNet Secure Portal*.



The screenshot displays the QualityNet Secure Portal interface. On the left, a navigation pane shows the 'SecureTransport' section with a 'remote' folder selected, containing sub-folders: AR\_ZIP, AutoRoute, AutoRoute\_inbox, DataUpload, and PSVA\_DOWNLOAD. Below this is the 'MAILBOX' section with a 'Compose Mail' button and links for Sent, Drafts, Inbox (12), Manage Folders, and Search. At the bottom is the 'MY COMPUTER' section.

The main content area shows a 'Remote folder' window for 'SecureTransport'. It includes 'Upload', 'Download', and 'Organize' buttons. A table lists the contents of the 'remote' folder:

Name	Permissions	Modified	Size	Kind
AR_ZIP	read and write	Jul 21, 2014 11:00 PM	0 b	Folder
AutoRoute	read and write	Jul 21, 2014 11:00 PM	0 b	Folder
AutoRoute_inbox	read and write	Jul 16, 2014 11:00 PM	0 b	Folder
DataUpload	read and write	Apr 11, 2015 11:00 PM	0 b	Folder
PSVA_DOWNLOAD	read and write	Jul 07, 2015 08:29 PM	0 b	Folder

At the bottom of the window, it indicates 'remote' and 'items: 5, size: 0 b'.

# PSVA Download Folder

The screenshot displays the CMS.gov QualityNet interface. The top navigation bar includes "Welcome, SEEMANJ", "Help", "Keyboard Shortcuts", and "Preference". The left sidebar shows a navigation tree with "SecureTransport" expanded to "remote", where "PSVA\_DOWNLOAD" is selected. Below this, the "MAILBOX" section includes "Compose Mail", "Sent", "Drafts", "Inbox (12)", "Manage Folders", and "Search". The "MY COMPUTER" section is also visible.

The main content area shows the "SecureTransport" tab with a "Remote folder" view. It includes "Upload", "Download", and "Organize" buttons, along with "Sort" and "View" options. A table lists the contents of the "PSVA\_DOWNLOAD" folder:

Name	Permissions	Modified	Size	Kind
schematrons	read	Aug 27, 2015 07:22 PM	0 b	Folder
psva_tool.xml	read	Aug 27, 2015 07:21 PM	2 KB	XML document
psva-tool-1.0.1.zip	read	Aug 27, 2015 07:21 PM	16 MB	ZIP archive

The bottom status bar indicates the current path is "remote/PSVA\_DOWNLOAD" and contains "Items: 3, size: 16 MB".

# Launch Download

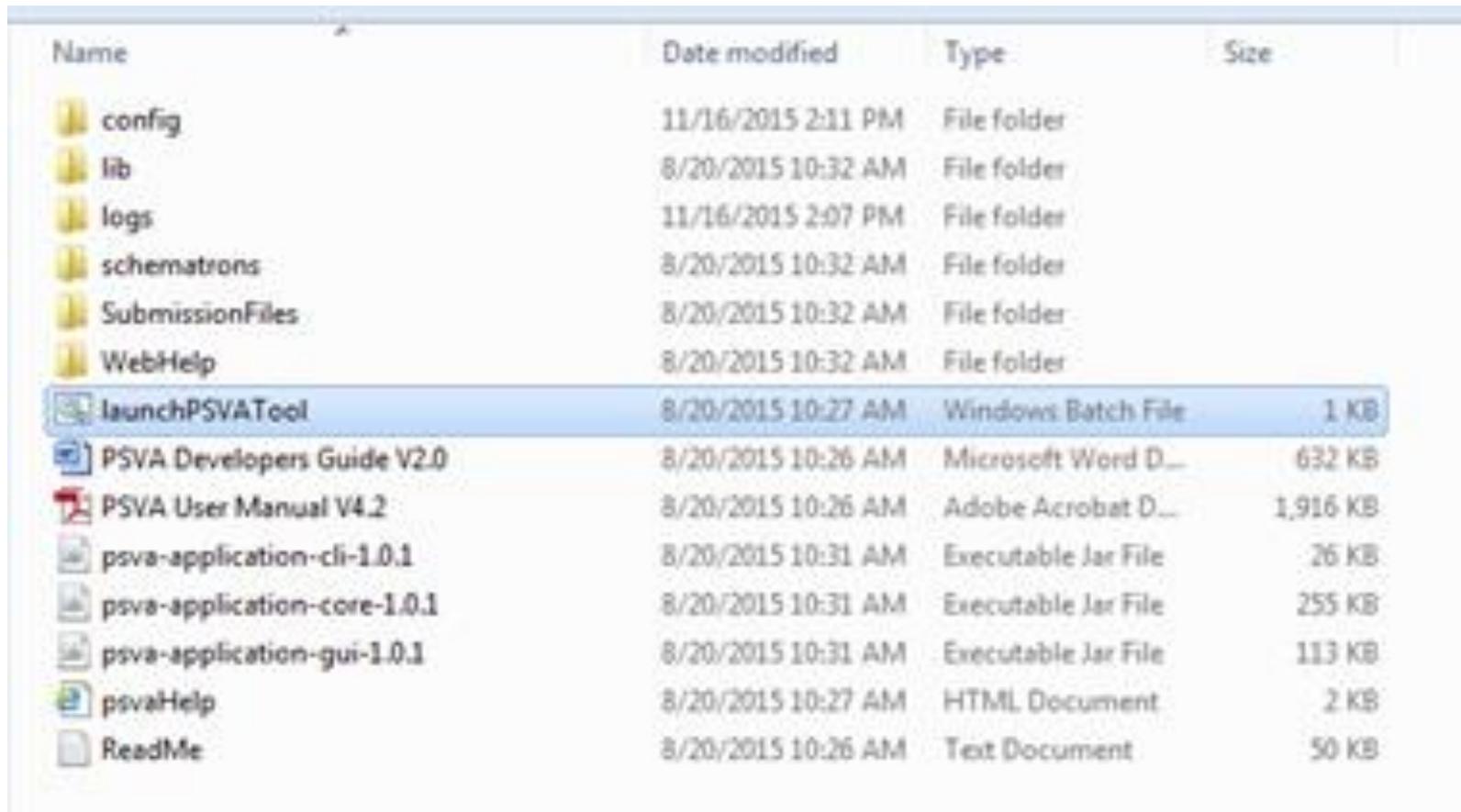
The screenshot displays the CMS.gov QualityNet interface. On the left, a navigation pane shows a tree structure under 'SecureTransport' with folders like 'remote', 'AR\_ZIP', 'AutoRoute', 'AutoRoute\_inbox', 'DataUpload', and 'PSVA\_DOWNLOAD'. Below this is a 'MAILBOX' section with 'Compose Mail' and a list of folders: 'Sent', 'Drafts', 'Inbox (12)', 'Manage Folders', and 'Search'. At the bottom of the navigation pane is 'MY COMPUTER'. The main content area is titled 'SecureTransport' and shows a 'Remote folder' view. It includes 'Upload', 'Download', and 'Organize' buttons. A table lists the contents of the folder:

Name	Permissions	Modified	Size	Kind
schematrons	read	Aug 27, 2015 07:22 PM	0 b	Folder
psva_tool.xml	read	Aug 27, 2015 07:21 PM	2 KB	XML document
psva-tool-1.0.1.zip	read	Aug 27, 2015 07:21 PM	16 MB	ZIP archive

At the bottom of the main area, it shows the path 'remote/PSVA\_DOWNLOAD', the selected file 'psva-tool-1.0.1.zip, 16 MB', and 'items: 3, size: 16 MB'.

A file dialog box is shown at the bottom of the screen. The text inside reads: 'Do you want to open or save psva-tool-1.0.1.zip (16.0 MB) from dataexchange.qualitynet.org?'. To the right of the text are three buttons: 'Open', 'Save' (with a dropdown arrow), and 'Cancel'. A close button (X) is also present.

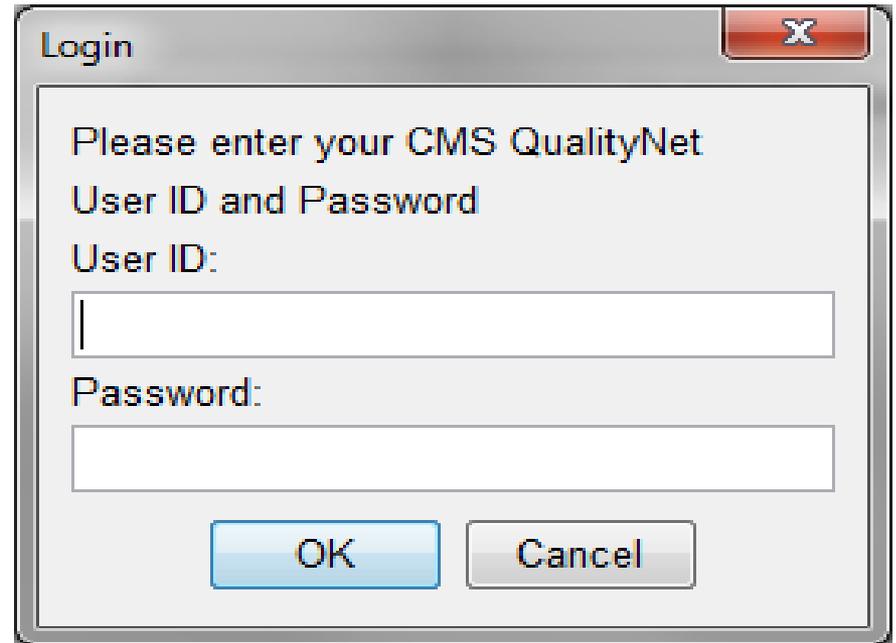
# Launch Tool



Name	Date modified	Type	Size
config	11/16/2015 2:11 PM	File folder	
lib	8/20/2015 10:32 AM	File folder	
logs	11/16/2015 2:07 PM	File folder	
schematrons	8/20/2015 10:32 AM	File folder	
SubmissionFiles	8/20/2015 10:32 AM	File folder	
WebHelp	8/20/2015 10:32 AM	File folder	
launchPSVATool	8/20/2015 10:27 AM	Windows Batch File	1 KB
PSVA Developers Guide V2.0	8/20/2015 10:26 AM	Microsoft Word Document	632 KB
PSVA User Manual V4.2	8/20/2015 10:26 AM	Adobe Acrobat Document	1,916 KB
psva-application-cli-1.0.1	8/20/2015 10:31 AM	Executable Jar File	26 KB
psva-application-core-1.0.1	8/20/2015 10:31 AM	Executable Jar File	255 KB
psva-application-gui-1.0.1	8/20/2015 10:31 AM	Executable Jar File	113 KB
psvaHelp	8/20/2015 10:27 AM	HTML Document	2 KB
ReadMe	8/20/2015 10:26 AM	Text Document	50 KB

# Log-In

- Users will need to have a *QualityNet Secure Portal* account with the EHR Data Upload role added to use the tool.
- You will need to log-in with your *Secure Portal* account every time you access the tool.



Login

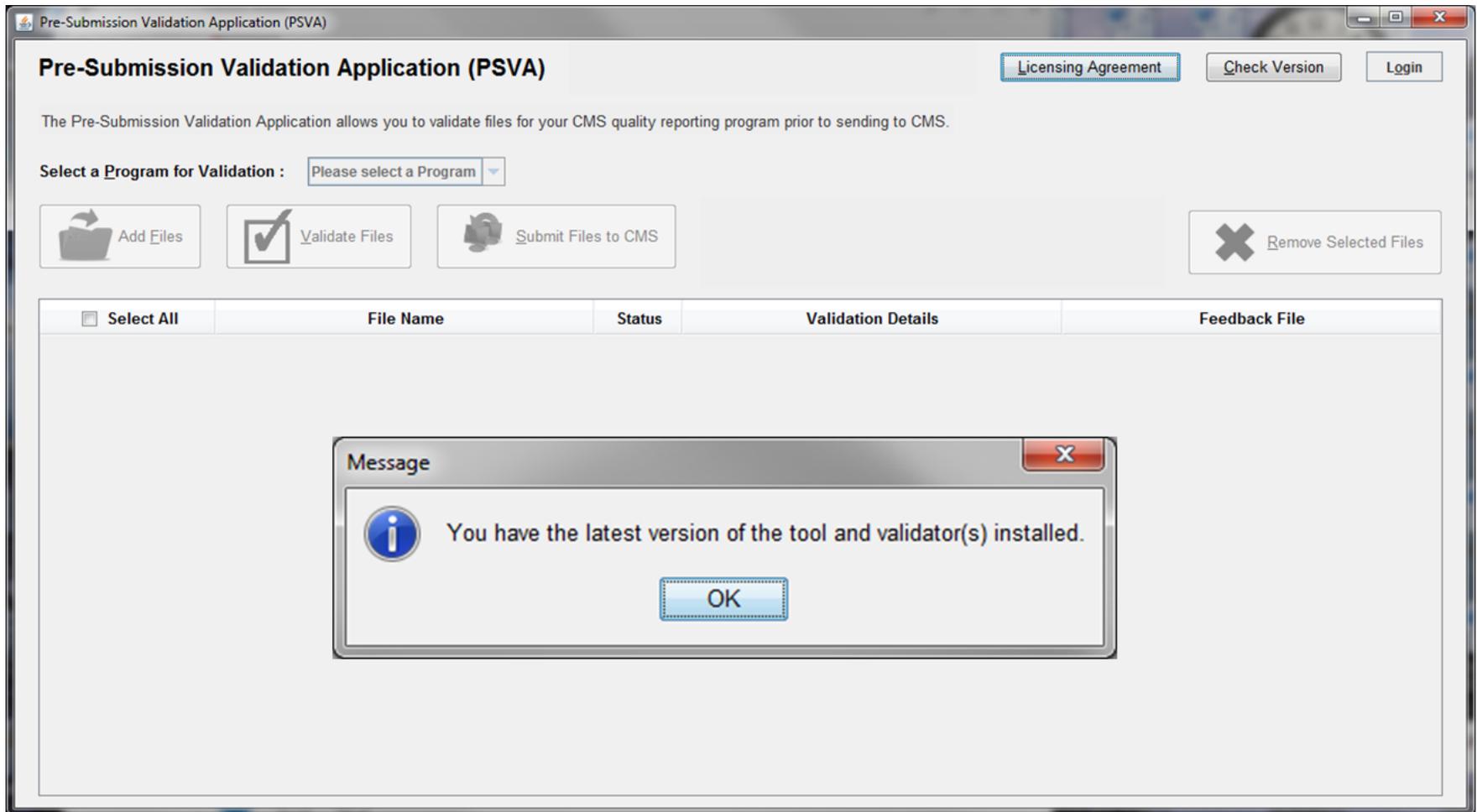
Please enter your CMS QualityNet  
User ID and Password

User ID:

Password:

OK Cancel

# Tool Version Check



# Select Program

Pre-Submission Validation Application (PSVA)

**Pre-Submission Validation Application (PSVA)**             

The Pre-Submission Validation Application allows you to validate files for your CMS quality reporting program prior to sending to CMS.

Select a Program for Validation :  ▼

   HQR\_EHR  
HQR\_EHR\_IQR  
HQR\_IQR

<input type="checkbox"/> Select All	File Name	Status	Validation Details	Feedback File
-------------------------------------	-----------	--------	--------------------	---------------

# Upload Files

The screenshot shows the 'Pre-Submission Validation Application (PSVA)' window. At the top, there are buttons for 'Licensing Agreement' and 'Check Version'. Below the title bar, the text reads: 'The Pre-Submission Validation Application allows you to validate files for your CMS quality reporting program prior to sending to CMS.' A dropdown menu is set to 'HQR\_EHR'. There are four main buttons: 'Add Files' (with a folder icon), 'Validate Files' (with a checkmark icon), 'Submit Files to CMS' (with a refresh icon), and 'Remove Selected Files' (with a red X icon). A tooltip is visible over the 'Add Files' button, stating: 'Add Files Button, selecting this button will open a file selection window to add files'. Below the buttons is a table with columns: 'Select All', 'File Name', 'Status', 'Validation Details', and 'Feedback File'. A 'Message' dialog box is open in the foreground, displaying an information icon and the text: 'The selected files are added to file details table.' with an 'OK' button.

Pre-Submission Validation Application (PSVA)

Licensing Agreement Check Version

The Pre-Submission Validation Application allows you to validate files for your CMS quality reporting program prior to sending to CMS.

Select a Program for Validation : HQR\_EHR

Add Files Validate Files Submit Files to CMS Remove Selected Files

Add Files Button, selecting this button will open a file selection window to add files

Select All	File Name	Status	Validation Details	Feedback File
------------	-----------	--------	--------------------	---------------

Message

The selected files are added to file details table.

OK

# Validate Files

The screenshot displays the 'Pre-Submission Validation Application (PSVA)' window. At the top, there are buttons for 'Licensing Agreement' and 'Check Version'. Below the title bar, a description states: 'The Pre-Submission Validation Application allows you to validate files for your CMS quality reporting program prior to sending to CMS.' A dropdown menu is set to 'HQR\_EHR'. The main toolbar contains 'Add Files', 'Validate Files', 'Submit Files to CMS', and 'Remove Selected Files'. A tooltip over the 'Validate Files' button reads: 'Validate Files button, selecting this button will validate the selected files, for the program selected'. Below the toolbar is a table with the following data:

<input checked="" type="checkbox"/> Select All	File Name	Status	Validation Details	Feedback File
<input checked="" type="checkbox"/>	JEN__UAT_ED1_0495_Q1_alpha.zip	New		

In the foreground, a 'Validation in Progress' dialog box is open, showing a progress bar at 25% and the text: 'Validating File: JEN\_\_UAT\_ED1\_0495\_Q1\_alpha.zip'.

# Validation Details

Pre-Submission Validation Application (PSVA)

The Pre-Submission Validation Application allows you to validate files for your CMS quality reporting program prior to sending to CMS.

Select a Program for Validation :

<input type="checkbox"/> Select All	File Name	Status	Validation Details	Feedback File
<input checked="" type="checkbox"/>	JEN_UAT_ED1_0495_Q1_alpha.good.zip	Valid	Number of files processed: 9 Number of valid files processed: 9 Number of invalid files processed: 0	JEN_UAT_ED1_0495_Q1_alpha.csv
<input type="checkbox"/>	JEN_UAT_ED1_0495_Q1_alpha.bad.zip	Invalid	Number of files processed: 7 Number of valid files processed: 0 Number of invalid files processed: 7	JEN_UAT_ED1_0495_Q1_alpha.csv

Selecting this will open the feedback file JEN\_UAT\_ED1\_0495\_Q1\_alpha.csv

# Error/Warning Report

File Name	Message Type	Feedback Message
1 Summary: 16 files processed, 9 files valid, 7 files invalid		
2 Validated with: HQR_EHR version 1.1.0		
3		
File Name	Message Type	Feedback Message
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	The languageCommunication, if present, SHOULD contain zero or one [0..1] proficiencyLevelC
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This assignedAuthor SHOULD contain zero or one [0..1] code (CONF:16787).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	Such ids SHOULD contain zero or one [0..1] @root="2.16.840.1.113883.4.6" National Provider Ic
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	Such ids SHOULD contain zero or one [0..1] @root="2.16.840.1.113883.4.6" National Provider Ic
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	The doseQuantity, if present, SHOULD contain zero or one [0..1] @unit, which SHALL be select
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	The text, if present, SHOULD contain zero or one [0..1] reference (CONF:15977).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or one [0..1] text (CONF:7362).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This code SHOULD contain zero or one [0..1] originalText (CONF:7413).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or more [0..*] targetSiteCode (CONF:7683).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or more [0..*] performer (CONF:7718) such that it SHALL contain exactly
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This code SHOULD contain zero or one [0..1] originalText (CONF:19203).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or one [0..1] text (CONF:9185).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or more [0..*] performer (CONF:8301).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This code SHOULD contain zero or one [0..1] originalText (CONF:19186).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or more [0..*] targetSiteCode (CONF:8250).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	SHOULD contain zero or more [0..*] performer (CONF:8251).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This code SHOULD contain zero or one [0..1] originalText (CONF:19198).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	The code, if present, SHOULD contain zero or one [0..1] originalText (CONF:8719).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This effectiveTime SHOULD contain zero or one [0..1] high (CONF:26935).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This externalDocument SHOULD contain zero or one [0..1] code="57024-2" Health Quality Mea
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This representedCustodianOrganization SHOULD contain zero or one [0..1] id (CONF:26999) su
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This representedCustodianOrganization SHOULD contain zero or one [0..1] id (CONF:27000) su
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	State SHALL be provided if the country is US. If country is not specified, it is assumed to be the
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	WARNING	This assignedEntity MAY contain zero or one [0..1] assignedPerson (CONF:CMS_0019)
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	SHALL contain at least one [1..*] id (CONF:26549).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	SHALL contain exactly one [1..1] effectiveTime (CONF:26933).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	This effectiveTime SHALL contain exactly one [1..1] low (CONF:26934).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	SHALL contain at least one [1..*] id (CONF:26992).
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	This externalDocument SHALL contain exactly one [1..1] id (CONF:12811) such that it SHALL co
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	Where the clinical statement codes SHALL contain the @sdct:setValueSet extension to reference
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	SHALL contain exactly one [1..1] templateId (CONF:CMS_0001) such that it SHALL contain exac
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	This languageCode SHALL contain exactly one [1..1] @code="en" English (CodeSystem: Langua
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	This patientRole SHALL contain exactly one [1..1] id such that it SHALL contain exactly one [1..
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	This representedCustodianOrganization SHALL contain exactly one [1..1] id (CONF:CMS_0016)
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	SHALL contain exactly one [1..1] documentationOf (CONF:CMS_0017) such that it SHALL contai
0376_Incidence of Potentially-Preventable Venous Thromboembolism_QRDA_Sample.xml	ERROR	This assignedEntity SHALL contain exactly one [1..1] id (CONF:CMS_0018) such that it SHALL co

# Submit Validated Files to CMS

The screenshot displays the 'Pre-Submission Validation Application (PSVA)' interface. At the top, there are buttons for 'Licensing Agreement' and 'Check Version'. Below this, a dropdown menu is set to 'HQR\_EHR'. A row of buttons includes 'Add Files', 'Validate Files', 'Submit Files to CMS', and 'Remove Selected Files'. A table below shows the results of validation for two files. A tooltip points to the 'Submit Files to CMS' button, stating: 'Submit Files to CMS Button, selecting this button will Submit selected valid Files to CMS'. A progress dialog window is overlaid on the bottom, titled 'File Submission to CMS in Progress', showing a 25% progress bar and the text 'Submitting File : JEN\_\_UAT\_ED1\_0495\_Q1\_alpha.good.zip'.

**Pre-Submission Validation Application (PSVA)**

The Pre-Submission Validation Application allows you to validate files for your CMS quality reporting program prior to sending to CMS.

Select a Program for Validation :

<input type="checkbox"/> Select All	File Name	Status	Validation Details	Feedback File
<input checked="" type="checkbox"/>	JEN__UAT_ED1_0495_Q1_alpha.good.zip	Valid	Number of files processed: 9 Number of valid files processed: 9 Number of invalid files processed: 0	<a href="#">JEN__UAT_ED1_0495_Q1_alpha.csv</a>
<input type="checkbox"/>	JEN__UAT_ED1_0495_Q1_alpha.bad.zip	Invalid	Number of files processed: 7 Number of valid files processed: 0 Number of invalid files processed: 7	<a href="#">JEN__UAT_ED1_0495_Q1_alpha.csv</a>

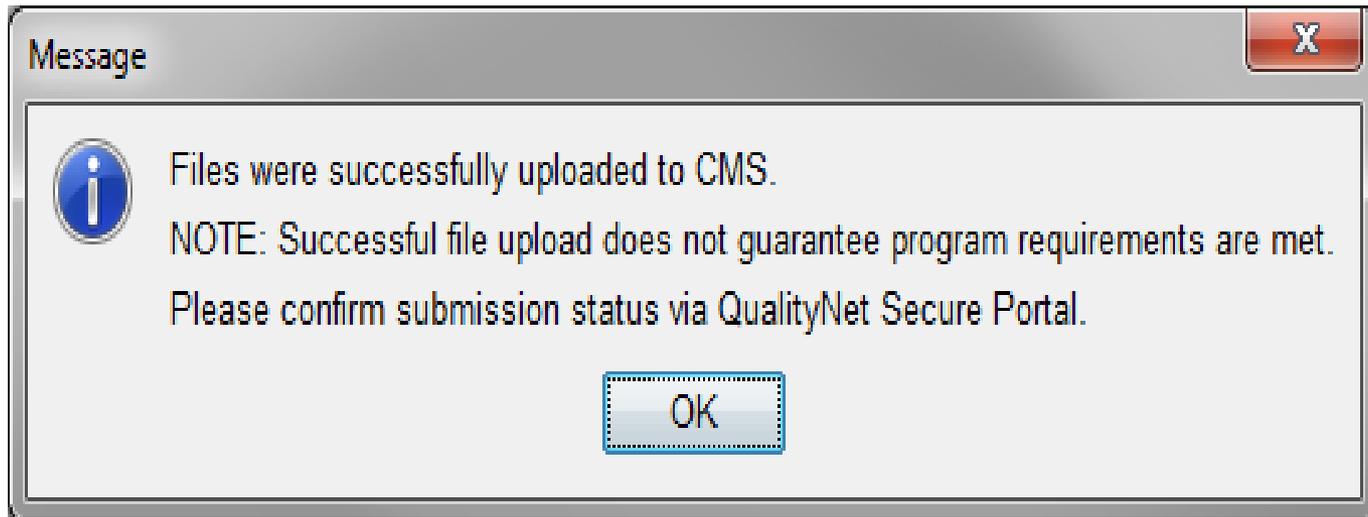
Submit Files to CMS Button, selecting this button will Submit selected valid Files to CMS

File Submission to CMS in Progress

25%

Submitting File : JEN\_\_UAT\_ED1\_0495\_Q1\_alpha.good.zip

# Files Submitted Message



**QUESTIONS?**

**PLEASE SEND ANY FOLLOW UP OR  
FEEDBACK ON THESE TOOLS TO**

**[STEPHANIE.WILSON@AREA-M.HCQIS.ORG](mailto:STEPHANIE.WILSON@AREA-M.HCQIS.ORG)**.

Mitra Biglari

**THE JOINT COMMISSION'S  
2015 ELECTRONIC CLINICAL  
QUALITY MEASURES (ECQMS)  
DATA RECEIPT UPDATE**

Sharon Sprenger

**THE JOINT COMMISSION'S  
2016 MEASURE SELECTION  
REQUIREMENTS UPDATE**



# The Joint Commission's 2016 Measure Selection Requirements

***November 2015***





# Joint Commission ORYX Performance Measurement Reporting

2016



# Joint Commission 2016 Flexible ORYX Performance Measurement Reporting

- ▶ Continued flexibility in meeting ORYX requirements
- ▶ Continued alignment as closely as possible with CMS
- ▶ Maintaining current requirement for reporting on six sets of measures with flexibility in measure set selection
- ▶ Measure set selections based on patient populations served and services provided

# 2016 Flexible ORYX Performance Measure Reporting Options

<u>OPTION 1</u> → <b>OR</b> → <u>OPTION 2</u> → <b>OR</b> → <u>OPTION 3</u>																					
<b>Select and Report Data on:</b> <b>Modified Sets of Chart-Abstracted Measures</b>	<b>Select and Report Data on:</b> <b>eCQM Sets Only</b>	<b>Select and Report Data on:</b> <b>Combination of Chart-Abstracted and eCQM Sets</b>																			
<ul style="list-style-type: none"> <li>Select and report on six of nine sets of chart-abstracted measures for calendar year 2016 applicable to the services provided and patient populations served by the hospital</li> <li>Perinatal Care will remain required as one of the six sets if applicable, i.e., at least 300 live births per year</li> </ul>	<ul style="list-style-type: none"> <li>Select six of the eight eCQM sets applicable to the services provided and patient populations served by the hospital. Report on either or both 3rd and 4<sup>th</sup> quarters for calendar year 2016.</li> <li>Data <b>MUST</b> be reported on <b>AT LEAST ONE</b> eCQM in the eCQM SET(s) selected.</li> <li>Perinatal Care will remain required as one of the six sets if applicable, i.e., at least 300 live births per year</li> </ul>	<ul style="list-style-type: none"> <li>Select and report on six sets of measures applicable to the services provided and patient populations served by the hospital</li> <li>Perinatal Care will remain required as one of the six sets if applicable, i.e., at least 300 live births per year</li> <li>Measure sets will be selected from among the available complement of core measure sets (See Options 1 chart-abstracted and 2 eCQM Sets)</li> <li>Hospitals wishing to select this option and that may be interested in reporting on the same set(s) of chart-abstracted and CQMs should contact Frank Zibrat at 630-792-5992 or via e-mail at <a href="mailto:fzibrat@jointcommission.org">fzibrat@jointcommission.org</a></li> <li>See notes under Option 2</li> </ul>																			
<table border="1"> <thead> <tr> <th style="text-align: center;">Joint Commission Chart Abstraction Measure Sets</th> </tr> </thead> <tbody> <tr><td>ED-1a, ED-2a</td></tr> <tr><td>PC-01, PC-02, PC-03, PC-04, PC-05</td></tr> <tr><td>STK-4</td></tr> <tr><td>VTE-5, VTE-6</td></tr> <tr><td>IMM-2</td></tr> <tr><td>HBIPS-1, HBIPS-2, HBIPS-3, HBIPS-5</td></tr> <tr><td>SUB-1, SUB-2, SUB-3</td></tr> <tr><td>TOB-1, TOB-2, TOB-3</td></tr> <tr><td>OP-1, OP-2, OP-3, OP-4, OP-5, OP-18, OP-20, OP-21, OP-23</td></tr> </tbody> </table>	Joint Commission Chart Abstraction Measure Sets	ED-1a, ED-2a	PC-01, PC-02, PC-03, PC-04, PC-05	STK-4	VTE-5, VTE-6	IMM-2	HBIPS-1, HBIPS-2, HBIPS-3, HBIPS-5	SUB-1, SUB-2, SUB-3	TOB-1, TOB-2, TOB-3	OP-1, OP-2, OP-3, OP-4, OP-5, OP-18, OP-20, OP-21, OP-23	<table border="1"> <thead> <tr> <th style="text-align: center;">Joint Commission eCQM Measure Sets</th> </tr> </thead> <tbody> <tr><td>eAMI-7a, eAMI-8a</td></tr> <tr><td>eCAC-3</td></tr> <tr><td>eED-1a, eED-2a</td></tr> <tr><td>ePC-01, ePC-05/5a</td></tr> <tr><td>eSTK-2, eSTK-3, eSTK-4, eSTK-5, eSTK-6, eSTK-8, eSTK-10</td></tr> <tr><td>eSCIP-INF-1, eSCIP-INF-9</td></tr> <tr><td>eVTE-1, eVTE-2, eVTE-3, eVTE-4, eVTE-5, eVTE-6</td></tr> <tr><td>eEHDI-1a</td></tr> </tbody> </table>	Joint Commission eCQM Measure Sets	eAMI-7a, eAMI-8a	eCAC-3	eED-1a, eED-2a	ePC-01, ePC-05/5a	eSTK-2, eSTK-3, eSTK-4, eSTK-5, eSTK-6, eSTK-8, eSTK-10	eSCIP-INF-1, eSCIP-INF-9	eVTE-1, eVTE-2, eVTE-3, eVTE-4, eVTE-5, eVTE-6	eEHDI-1a	
Joint Commission Chart Abstraction Measure Sets																					
ED-1a, ED-2a																					
PC-01, PC-02, PC-03, PC-04, PC-05																					
STK-4																					
VTE-5, VTE-6																					
IMM-2																					
HBIPS-1, HBIPS-2, HBIPS-3, HBIPS-5																					
SUB-1, SUB-2, SUB-3																					
TOB-1, TOB-2, TOB-3																					
OP-1, OP-2, OP-3, OP-4, OP-5, OP-18, OP-20, OP-21, OP-23																					
Joint Commission eCQM Measure Sets																					
eAMI-7a, eAMI-8a																					
eCAC-3																					
eED-1a, eED-2a																					
ePC-01, ePC-05/5a																					
eSTK-2, eSTK-3, eSTK-4, eSTK-5, eSTK-6, eSTK-8, eSTK-10																					
eSCIP-INF-1, eSCIP-INF-9																					
eVTE-1, eVTE-2, eVTE-3, eVTE-4, eVTE-5, eVTE-6																					
eEHDI-1a																					



# 2016 ORYX Performance Measure Reporting Requirements – Perinatal Care

- ▶ One measure set - **perinatal care** - **continues to be mandatory** as one of the six sets of measures.
  - The threshold for mandatory reporting has been reduced to 300 or more live births per year
  - Any hospital may elect to report on the PC measure set regardless of the number of live births per year

# 2016 ORYX Performance Measure Reporting Requirements: Perinatal Care Measure Set

- ▶ Chart-abstraction selected
  - Report PC-01, PC-02, PC-03, PC-04, PC-05
- ▶ eCQM selected
  - Report ePC-01, ePC-05/5a



# Joint Commission 2016 eCQM Measure Sets

eAMI-7a, eAMI-8a\*

eCAC-3

eED-1a, eED-2a

ePC-01, ePC-05/5a

eSTK-2, eSTK-3, eSTK-4, eSTK-5, eSTK-6, eSTK-8, eSTK-10

eSCIP-INF-1a, eSCIP-INF-9

eVTE-1, eVTE-2, eVTE-3, eVTE-4, eVTE-5, eVTE-6

eEHDI-1a\* Hearing screening prior to hospital discharge

**\*NEW Added for 2016**



# ORYX Vendors Supporting eCQM Data Transmissions

- ▶ Accredited hospitals selecting to report eCQMs must use a Joint Commission-listed ORYX eCQM vendor.
- ▶ List of ORYX eCQM vendors is available at:
  - [http://www.jointcommission.org/assets/1/18/2015\\_eCQM\\_Vendors.pdf](http://www.jointcommission.org/assets/1/18/2015_eCQM_Vendors.pdf)



# eCQM Measure Sets Only

## NOTE:

- For submission of 2016 discharge data, The Joint Commission will only accept data consistent with the June 2015 annual update eCQM specifications posted on the CMS website<sup>1</sup>

<sup>1</sup>June 2015 annual update eCQM specifications posted on CMS' website for eReporting the 2016 Reporting Year:

[http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/eCQM\\_Library.html](http://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/eCQM_Library.html)



# eCQM Measure Sets Only

## **NOTE:**

A listed ORYX eMeasure Vendor's technology must be certified by an Office of the National Coordinator for Health Information Technology Authorized Certification Body (ONC-ACB) as meeting either the 2014 or 2015 Edition certification criteria for calculating and submitting inpatient electronic clinical quality measures (eCQMs)

# Data Submission for eCQMs

- ▶ eCQM measure data for either or both 3<sup>rd</sup> and/or 4<sup>th</sup> quarters for 2016 due to The Joint Commission no later than March 15, 2017



# Modifications to 2016 ORYX Electronic Clinical Quality Measure (eCQM) Reporting Options

- ▶ Hospitals and critical access hospitals interested in reporting on electronic clinical quality measure (eCQM) sets to meet 2016 ORYX performance measurement requirements **may**:
  - Report on one or more measures in eCQM set
  - Each eCQM set, regardless of the number of measures reported, will still count toward meeting the six measure set reporting requirement
    - Reporting Option 2: eCQM sets only
    - Reporting Option 3: combination of chart-abstracted measures and eCQMs



# Modifications to 2016 ORYX Electronic Clinical Quality Measure (eCQM) Reporting Options

## Why the modifications?

- Provides closer alignment with CMS
- Supports hospitals in efforts to meet CMS eCQM reporting requirements for CY 2016
- Encourages selecting and reporting on the same eCQMs to The Joint Commission

# Joint Commission Measure Sets Effective January 1, 2016

Measure Set	Retired/Temporarily Inactivated Chart Abstracted Measure	Retained Chart Abstracted Measures	Electronic Clinical Quality Measures (eCQM)
AMI	Retired AMI-7a		eAMI-7a, eAMI-8a
SCIP	Retired SCIP INF-4		eSCIP-INF-1 eSCIP-INF-9
CAC	Retired CAC-3		eCAC-3
VTE	Retired VTE-1, VTE-2, VTE-3	VTE-5, VTE-6	eVTE-1, eVTE-2, eVTE-3, eVTE-4, eVTE-5, eVTE-6
Stroke (STK)	Retired STK-1, STK-2, STK-3, STK-5, STK-6, STK-8, STK-10	STK-4	eSTK-2, eSTK-3, eSTK-4, eSTK-5, eSTK-6, eSTK-8, eSTK-10
ED		ED-1a, ED-2a	eED-1a, eED-2a
IMM	Retired IMM-1	IMM-2	
HBIPS*	Retired HBIPS-4, HBIPS-6, HBIPS-7	HBIPS-1**, HBIPS-2**, HBIPS-3**, HBIPS-5**	
TOB	Temporarily Inactivated TOB-4	TOB-1, TOB-2, TOB-3	
SUB	Temporarily Inactivated SUB-4	SUB-1, SUB-2, SUB-3	
Perinatal Care*** (PC)		PC-01, PC-02, PC-03, PC-04, PC-05	ePC-01, ePC-05/5a
Hospital Out Patient (OP)		OP-1, OP-2, OP-3, OP-4, OP-5, OP-18, OP-20, OP-21, OP-23	
EHDI (Early Hearing Detection and Intervention)			EHDI-1a

\* HBIPS required for free standing psychiatric hospitals; available for selection for general hospitals with psychiatric units.

\*\* HBIPS for each measure, includes all relevant patient age groups, Children (1 through 12 years), Adolescent (13 through 17 years), Adult (18 through 64 years) and Older Adult (≥ 65 years)

\*\*\* PC required for facilities with at least 300 live births per year; available for selection if fewer than 300 live births per year.

# Reference Information to Assist in Updating ORYX Measure Set Selections

**2016 Flexible ORYX Reporting Options Measure Set Selection Instructions/Forms:**  
[http://www.jointcommission.org/instructions\\_due\\_dates\\_submitting\\_oryx\\_measure\\_set\\_selections\\_2016/](http://www.jointcommission.org/instructions_due_dates_submitting_oryx_measure_set_selections_2016/)

**Facts about ORYX® for Hospitals:** Reporting requirements for accredited hospitals and critical access hospitals  
[http://www.jointcommission.org/facts\\_about\\_oryx\\_for\\_hospitals/](http://www.jointcommission.org/facts_about_oryx_for_hospitals/).

**2016 Flexible ORYX Performance Measure Reporting Options:** Review before deciding on an option for meeting 2016 ORYX measure reporting requirements.  
[http://www.jointcommission.org/2016\\_flexible\\_oryx\\_performance\\_measure\\_reporting\\_options/](http://www.jointcommission.org/2016_flexible_oryx_performance_measure_reporting_options/)

**Joint Commission Measure Sets Effective January 1, 2016:** Concise list of chart-abstracted measure sets/measures retired or temporarily inactivated, and both chart-abstracted and eCQM measure sets available for selection for 2016.  
[http://www.jointcommission.org/joint\\_commission\\_measure\\_sets\\_effective\\_january\\_1\\_2016/](http://www.jointcommission.org/joint_commission_measure_sets_effective_january_1_2016/)

**Frequently Asked Questions About 2016 ORYX Performance Measure Reporting Requirements and Options:** Assists in deciding how best to meet flexible ORYX® performance measure reporting requirements for calendar year 2016.  
[http://www.jointcommission.org/frequently\\_asked\\_questions\\_about\\_2016\\_oryx\\_performance\\_measure\\_reporting\\_reqs\\_options/](http://www.jointcommission.org/frequently_asked_questions_about_2016_oryx_performance_measure_reporting_reqs_options/)



**QUESTIONS?**

**[EHRINQUIRIES@CMS.HHS.GOV](mailto:EHRINQUIRIES@CMS.HHS.GOV)**