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Important Dates

July 1–August 15

- *QualityNet Secure Portal* open for submission:
 - IQR: 1Q 2017 PC-01
 - IPFQR: FY 2018 chart-abstracted and structural measures, non-measure data, and DACA

August 1

- 1Q 2017 Population and Sampling due for IQR-eligible hospitals

August 15

- 1Q 2017 clinical, PC-01 data due for IQR-eligible hospitals
- 1Q 2017 HAI data due for IQR-eligible hospitals and PCHs
- 4Q 2016 colon cancer, breast cancer data due for PCHs
- 2Q 2016 Adjuvant Hormonal Therapy data due for PCHs.
- CY 2016 OCM, EBRT data due for PCHs
- FY 2018 chart-abstracted and structural measures, non-measure data, and DACA due for IPFs

August 31

- FY 2018 DACA due for PCHs

Take 5! All You Need to Know About CY 2017 IQR Population and Sampling in 5 Minutes

Population and Sampling data are required for three inpatient measure sets:

- Global Measures
- Sepsis Measure
- VTE Sub-population 3: *Other VTE Only*

In Section 2 of the [Specifications Manual for National Hospital Inpatient Quality Measures](#), each measure set has specific guidelines that outline the Population and Sampling rules specific to that measure. Please see image below.

Section 2 - Measurement Information	
Section 2.1 -	Severe Sepsis and Septic Shock (SEP)
Section 2.2 -	Venous Thromboembolism (VTE)
Section 2.3 -	<i>Reserved for future use</i>
Section 2.4 -	Global Initial Patient Population (ED, IMM, TOB, SUB)

For your convenience, we are providing a condensed version of the Population and Sampling rules and tables found in Sections 2.1, 2.2, and 2.4. (Please review the full sections in the [Manual](#) for complete information.)

Global IPP (ED, IMM) includes:

- All patients admitted for inpatient acute care
- Patients aged newborn and older
- Patients with LOS ≤ 120 days
- Patients with a valid *ICD-10-CM Principal Diagnosis Code*

Sample Size Determinations are based on Global IPP size. Pick Quarterly or Monthly Sampling.

Global Quarterly Sampling		Global Monthly Sampling	
IPP Size	Minimum Required Sample Size	IPP Size	Minimum Required Sample Size
≥ 1,530	306	≥ 510	102
765–1529	20% of IPP	255–509	20% of IPP
153–764	153	51–254	51
6–152	100% of IPP	< 51	100% of IPP
0–5	Submission encouraged but not required. If submission occurs, 1–5 cases may be submitted.		

- Patients identified in the Global IPP and selected in the random sample should be abstracted for both the Immunization Measure (IMM-2) and the ED Measures* (ED-1, ED-2).
- Determine if cases selected for the Global sample meet the IPP requirements for Sepsis and VTE; if so, also include those cases in the sample selected for Sepsis and/or VTE. Refer to Section 4: Population and Sampling, page 4-4, of the Manual for further guidance.
- If appropriate, cases will be excluded from the denominator of a measure as part of the abstraction process per the measure’s algorithm. Cases with denominator exclusions should still be abstracted and submitted to the CMS Clinical Warehouse. These cases count towards your minimum required sample submissions.

***PLEASE NOTE:** Hospitals that do not have an ED and have a current [IPPS Measure Exception Form](#) for the ED Measure set on file do not need to submit case abstractions for the ED measures. **REMINDER:** The IPPS Measure Exception Form must be renewed at least annually.

Sepsis IPP includes:

- Patients with inpatient admission with *ICD-10-CM Principal or Other Diagnosis Code* for Sepsis as defined in Appendix A, Table 4.01
- Patients aged 18 or older
- Patients with LOS ≤ 120 days

Sample Size Determinations are based on the Sepsis IPP size. Choose Quarterly or Monthly Sampling.

Sepsis Quarterly Sampling		Sepsis Monthly Sampling	
IPP Size	Minimum Required Sample Size	IPP Size	Minimum Required Sample Size
≥ 301	60	≥ 101	20
151–300	20% of IPP	51–100	20% of IPP
30–150	30	10–50	10
6–29	100% of IPP	< 10	100% of IPP
0–5	Submission encouraged but not required. If submission occurs, 1–5 cases may be submitted.		

VTE IPP for Sub-population 3 – Other VTE Only includes:

- Patients with inpatient admission with *ICD-10-CM Other Diagnosis Code* for VTE as defined in Appendix A, Tables 7.03 and 7.04
- Patients WITHOUT *ICD-10-CM Principal Diagnosis Code* for VTE as defined in Appendix A, Tables 7.03 and 7.04
- Patients aged 18 or older
- Patients with LOS ≤ 120 days

Sample Size Determinations are based on the *Other VTE Only* IPP size.

Other VTE Only Quarterly Sampling	Other VTE Only Monthly Sampling
The <i>Other VTE Only</i> quarterly sub-population is not eligible for sampling and will use the entire VTE sub-population for reporting, UNLESS the quarterly initial patient population count for <i>Other VTE Only</i> is five or fewer. If VTE sub-population count is five or fewer, hospitals may choose to not submit data.	The <i>Other VTE Only</i> monthly sub-population is not eligible for sampling and will use the entire monthly VTE sub-population for reporting.

Reminder: IPPS Measure Exception Form Is Required Yearly!

Don't delay; submit today! If you will be submitting an [IPPS Measure Exception Form](#) for CY 2017, we highly recommend that you submit the Form now and not wait until the 1Q 2017 submission deadline. Hospitals use the Form to notify CMS that they don't treat patients related to specific hospital reporting measures and/or don't have measure-specific locations. It can be used for the Hospital IQR, Hospital VBP, and HAC Reduction Programs. This Form must be renewed annually, and hospitals are encouraged to submit the Form prior to the first quarter data submission deadline for the applicable year.

The IPPS Measure Exception Form may be used for the following measures:

- Perinatal Care (PC-01)
 - The hospital has no Obstetrics Department and does not deliver babies.
- SSI Colon and Abdominal Hysterectomy Procedures
 - The hospital performed **a combined total of nine or fewer colon surgeries and abdominal hysterectomies** in the calendar year prior to the reporting year.
- CAUTI and CLABSI
 - The hospital has no ICU or Adult or Pediatric Medical, Surgical, or Medical/Surgical wards.
- Emergency Department (ED-1 and ED-2)
 - The hospital has no ED and does not provide emergency care.

If a Measure Exception Form is submitted for:

- PC-01, the hospital won't be required to enter zeros into the *QualityNet* web-based measure application.
- SSI Colon and Abdominal Hysterectomy Procedures and/or CAUTI and CLABSI, the hospital won't be required to submit the selected measures to NHSN.
- ED measures, the hospital won't be required to submit the ED clinical data. However, the hospital is still required to submit Population and Sampling numbers for the Global measure set.

If you do not file a Measure Exception Form, you are required to submit all 1Q 2017 data, including zeros, for these measures by the August 15, 2017 deadline.

New Tools for Quality Reporting

1Q 2017 Hospital IQR Program Checklist

The [1Q 2017 Hospital IQR Checklist](#) is now available. Use this popular tool to ensure your Hospital IQR Program quality measures data were correctly submitted. A step-by-step process for entering your Population and Sampling data is also included.

1Q 2017 Hospital IQR Program PC-01 Quick Start Guide

What else is new? With the *QualityNet Secure Portal* opening July 1, 2017, for 1Q 2017 PC-01 submissions, make sure to check out the [Hospital IQR Program Quick Start Guide: Entering PC-01 Data into the QualityNet Secure Portal](#). This handy tool has everything you need to enter your PC-01 data, including screenshots of the questions to answer.

IPFQR Program Manual Version 3.0 with Release Notes

Need guidance on the FY 2018 IPFQR Program requirements? Check out the [IPFQR Program Manual Version 3.0](#) and [IPFQR Program Manual Release Notes Version 3.0](#) for all things essential to successfully meet the August 15, 2017 deadline.

2017 PCHQR Program Manual

Have questions regarding the upcoming submission requirements for the PCHQR Program? Check out the updated [2017 PCHQR Program Manual](#).

Acronyms

CAUTI	Catheter-Associated Urinary Tract Infection	IPFQR	Inpatient Psychiatric Facility Quality Reporting
CLABSI	Central Line-Associated Bloodstream Infection	IPP	Initial Patient Population
CMS	Centers for Medicare & Medicaid Services	IPPS	Inpatient Prospective Payment System
CY	Calendar Year	IQR	Inpatient Quality Reporting
DACA	Data Accuracy and Completeness Acknowledgement	LOS	Length of Stay
ED	Emergency Department	NHSN	National Healthcare Safety Network
EBRT	External Beam Radiotherapy	OCM	Oncology Care Measures
FY	Fiscal Year	PC	Perinatal Care
HAC	Hospital-Acquired Condition	PCH	PPS-Exempt Cancer Hospital
HAI	Healthcare-Associated Infection	PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	PPS	Prospective Payment System
ICD-10-CM	International Classification of Diseases, Tenth Revision, Clinical Modification	Q	Quarter
ICU	Intensive Care Unit	SSI	Surgical Site Infection
IMM	Immunization	VBP	Value-Based Purchasing
IPF	Inpatient Psychiatric Facility	VTE	Venous Thromboembolism