PCHQR Program: Updated Resources and Tools Review

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Purpose

This presentation will provide a review of the updated resources and tools for participants in the PCHQR Program.

Acronyms

Objectives

Participants will be able to locate, understand, and use the updated PCHQR Program resources and tools on the [QualityNet](#) and [Quality Reporting Center](#) websites.

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Acronyms and Abbreviations

CAUTI	catheter-associated urinary tract infection	**HAI**	healthcare-associated infection
CBE	consensus-based entity	**HCAHPS**	Hospital Consumer Assessment of Healthcare Providers and Systems
CDI	*Clostridioides difficile* Infection	**HCP**	healthcare personnel
CLABSI	central line-associated bloodstream Infection	**MRSA**	Methicillin-resistant *Staphylococcus aureus*
CMS	Centers for Medicare & Medicaid Services	**PCH**	PPS-Exempt Cancer Hospital
CY	calendar year	**PCHQR**	PPS-Exempt Cancer Hospital Quality Reporting
DACA	Data Accuracy and Completeness Acknowledgement	**PPS**	prospective payment system
ED	emergency department	**Q**	quarter
FR	*Federal Register*	**SSI**	Surgical Site Infection
FY	fiscal year		

PCHQR Program Resources and Tools

PCHQR Program Manual Updates

- Section 1: PCHQR Program – Inpatient Prospective Payment System/Long-Term Care Hospital PPS Final Rules

- Section 2: Measures

- Section 3: Data Reporting

- Section 9: Public Reporting

- Appendix A: PCHQR Program Measure Submission Deadlines by Due Date

- Appendix B: PCHQR Program Relationship Matrix of Program Measures by Years and Quarters

Acronyms

Measure Submission Deadlines by Due Date

Due Date	CLABSI/CAUTI/ SSI/MRSA/CDI*	Flu HCP Vac*	COVID-19 HCP Vac*	HCAHPS	DACA
10/04/2023	N/A	N/A	N/A	Q2 2023 (4/1–6/30)	N/A
11/15/2023	Q2 2023 (4/1–6/30)	N/A	Q2 2023 (4/1–6/30)	N/A	N/A
01/03/2024	N/A	N/A	N/A	Q3 2023 (7/1–9/30)	N/A
02/15/2024	Q3 2023 (7/1–9/30)	N/A	Q3 2023 (7/1–9/30)	N/A	N/A
04/03/2024	N/A	N/A	N/A	Q4 2023 (10/1-12/31)	N/A
05/15/2024	Q4 2023 (10/1–12/31)	Q4 2023–Q1 2024 (10/1/23–3/31/24)	Q4 2023 (10/1–12/31)	N/A	N/A
07/03/2024	N/A	N/A	N/A	Q1 2024 (1/1–3/31)	N/A
08/15/2024	Q1 2024 (1/1–03/31)	N/A	Q1 2024 (1/1–03/31)	N/A	N/A
09/03/2024	N/A	N/A	N/A	N/A	For FY 2025
10/02/2024	N/A	N/A	N/A	Q2 2024 (4/1–6/30)	N/A
11/18/2024	Q2 2024 (4/1–6/30)	N/A	Q2 2024 (4/1–6/30)	N/A	N/A

* Data are submitted to the CDC via NHSN.

Relationship Matrix of Program Measures by Years and Quarters

This reference document for PCHQR Program participants provides the following:
- Specific measures with their Consensus-Based Entity (CBE) and PPS-exempt Cancer Hospital (PCH) numbers
- Program (Fiscal) Year to which the measure applies
- Reporting Periods that apply to each respective Program (Fiscal) Year
- Quarterly data submission deadlines for each Reporting Period
- Time frames when each metric will be displayed for Public Reporting on the Provider Data Catalog (https://data.cms.gov/provider-data/) website
- Gray boxes to indicate activity complete

Safety and Healthcare-Associated Infection (HAI)	Program (Fiscal) Years	Reporting Periods– Calendar Year (CY) Quarters (Qs)	Quarterly Data Submission Deadlines	PDC Release October 2023	PDC Release January 2024	PDC Release April 2024	PDC Release July 2024	PDC Release October 2024	PDC Release January 2025	PDC Release April 2025	PDC Release July 2025	PDC Release October 2025	PDC Release January 2026	PDC Release April 2026	PDC Release July 2026	PDC Release October 2026
Central Line-Associated Bloodstream Infection (CLABSI) CBE #0139 (PCH-4)	2023	1Q 2022	PRIOR	1Q 2022–4Q 2022												
		2Q 2022	PRIOR		2Q 2022–1Q 2023											
		3Q 2022	PRIOR			3Q 2022–2Q 2023										
		4Q 2022	PRIOR				4Q 2022–3Q 2023									
Catheter-Associated Urinary Tract Infection (CAUTI) CBE #0138 (PCH-5)	2024	1Q 2023	PRIOR					1Q 2023–4Q 2023								
		2Q 2023	11/15/2023						2Q 2023–1Q 2024							
		3Q 2023	02/15/2024							3Q 2023–2Q 2024						
		4Q 2023	05/15/2024								4Q 2023–3Q 2024					
	2025	1Q 2024	08/15/2024									1Q 2024–4Q 2024				
		2Q 2024	11/18/2024										2Q 2024-1Q 2025			
		3Q 2024	02/17/2025											3Q 2024-2Q 2025		
		4Q 2024	05/15/2025												4Q 2024-3Q 2025	
	2026	1Q 2025	08/18/2025													1Q 2025-4Q 2025
		2Q 2025	11/17/2025													
		3Q 2025	02/17/2026													
		4Q 2025	05/18/2026													

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Relationship Matrix of Program Measures by Years and Quarters

Patient Engagement/ Experience of Care Documentation of Goals of Care Discussions Among Cancer Patients (PCH-42)	Program (Fiscal) Years	Reporting Periods– Calendar Year Quarters (Qs)	Quarterly Data Submission Deadlines	PDC Release January 2023	PDC Release April 2023	PDC Release July 2023	PDC Release October 2023	PDC Release January 2024	PDC Release April 2024	PDC Release July 2024	PDC Release October 2024
	2026	1Q 2024	08/15/2025	In the FY 2024 Inpatient Prospective Payment Systems (IPPS)/Long-Term Care Hospital Prospective Payment System (LTCH PPS) final rule (88 FR 59223 and 59226–59228), public reporting will begin July 2026 or as soon as feasible thereafter.							
		2Q 2024									
		3Q 2024									
		4Q 2024									

Health Equity Measures Hospital Commitment to Health Equity (PCH-39)	Program (Fiscal) Years	Reporting Periods– Calendar Year Quarters (Qs)	Quarterly Data Submission Deadlines	PDC Release October 2023	PDC Release January 2024	PDC Release April 2024	PDC Release July 2024	PDC Release October 2024
	2026	1Q 2024	08/15/2025	In the FY 2024 IPPS/LTCH PPS final rule (88 FR 59209–59210 and 59226–59228), public reporting will begin with CY 2024 data beginning July 2026 or as soon as feasible thereafter.				
		2Q 2024						
		3Q 2024						
		4Q 2024						

Health Equity Measures Screening for Social Drivers of Health (PCH-40) Screen Positive Rate for Social Drivers of Health (PCH-41a–e*)	Program (Fiscal) Years	Reporting Periods– Calendar Year Quarters (Qs)	Quarterly Data Submission Deadlines	PDC Release October 2023	PDC Release January 2024	PDC Release April 2024	PDC Release July 2024	PDC Release October 2024
	2026**	1Q 2024	08/15/2025	In the FY 2024 IPPS/LTCH PPS final rule (88 FR 59216, 59221–59222, 59226–59228), public reporting will begin with CY 2024 data beginning July 2027 or as soon as feasible thereafter.				
		2Q 2024						
		3Q 2024						
		4Q 2024						

*The Screen Positive Rate for Social Drivers of Health measure has five individual Health-related Social Needs: 41a. Screen Positive Rate for Social Drivers of Health - Food Insecurity; 41b. Screen Positive Rate for Social Drivers of Health - Housing Instability; 41c. Screen Positive Rate for Social Drivers of Health - Transportation Needs; 41d. Screen Positive Rate for Social Drivers of Health - Utility Difficulties; 41e. Screen Positive Rate for Social Drivers of Health - Interpersonal Safety
** In the FY 2024 IPPS/LTCH PPS final rule (88 FR 59215 and 59221), FY 2026 data reporting is voluntary.

Measure Crosswalk
Program Years FY 2023 to FY 2026

Consensus-Based Entity #	PCH #	Measures Grouped by Measure Topic	Chart-Abstracted	Claims-Based	Program Year			
					FY 2023	FY 2024	FY 2025	FY 2026
Clinical Process /Oncology Care Measures								
#0210	PCH-32	Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life		✓	✓	✓	✓	✓
#0215	PCH-34	Proportion of Patients Who Died from Cancer Not Admitted to Hospice		✓	✓	✓	✓	✓
Intermediate Clinical Outcome Measures								
#0213	PCH-33	Proportion of Patients Who Died from Cancer Admitted to the Intensive Care Unit (ICU) in the Last 30 Days of Life		✓	✓	✓	✓	✓
#0216	PCH-35	Proportion of Patients Who Died from Cancer Admitted to Hospice for Less Than Three Days		✓	✓	✓	✓	✓
Patient Engagement/Experience of Care Measure								
#0166	PCH-29	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey	✓		✓	✓	✓	✓
N/A	PCH-42	Documentation of Goals of Care Discussions Among Cancer Patients	✓		N/A	N/A	N/A	✓

Acronyms

Measure Crosswalk
Program Years FY 2023 to FY 2026

Consensus-Based Entity #	PCH #	Measures Grouped by Measure Topic	Chart-Abstracted	Claims-Based	Program Year			
					FY 2023	FY 2024	FY 2025	FY 2026
Health Equity Measures								
N/A	PCH-39	Hospital Commitment to Health Equity	✓		N/A	N/A	N/A	✓
N/A	PCH-40	Screening for Social Drivers of Health	✓		N/A	N/A	N/A	✓
N/A	PCH-41a–e**	Screen Positive Rate for Social Drivers of Health	✓		N/A	N/A	N/A	✓

** The Screen Positive Rate for Social Drivers of Health measure has five individual Health-related Social Needs:
41a. Screen Positive Rate for Social Drivers of Health - Food Insecurity; 41b. Screen Positive Rate for Social Drivers of Health - Housing Instability; 41c. Screen Positive Rate for Social Drivers of Health - Transportation Needs; 41d. Screen Positive Rate for Social Drivers of Health - Utility Difficulties; 41e. Screen Positive Rate for Social Drivers of Health - Interpersonal Safety

PCHQR Program on QualityNet

Where Can I Find PCHQR Program Resources?

QualityNet

- [PCHQR Program Overview page](#)
- [PCHQR Program Data Collection page](#)
- [PCHQR Program Resources page](#)
- [PCHQR Program Measures page](#)

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QualityNet Home Page

[QualityNet](#)

QualityNet PCHQR Program Overview Page

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QualityNet PCHQR Program Data Management Page

QualityNet PCHQR Program Data Collection Page

Table 4: Patient Engagement/Experience of Care Measure

CBE #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
0166	PCH-29	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)	Technical Specifications	Survey instrument- Opens in new browser tab or approved survey vendor- Opens in new browser tab	Submitted by vendor or upload via the QualityNet Managed File Transfer (MFT) using the online data entry tool or in XML format
N/A	PCH-42	Documentation of Goals of Care Discussions Among Cancer Patients	Coming Soon	Coming Soon	This data will be submitted via the Hospital Quality Reporting System Portal

Table 6: Health Equity Measures

CBE #	PCH #	Measure Name	Specifications Manual & Measure Information Forms	Data Collection Tool	Acceptable Method of Transmission
N/A	PCH-39	Hospital Commitment to Health Equity	Coming Soon	Coming Soon	This data will be submitted via the Hospital Quality Reporting System Portal
N/A	PCH-40	Screening for Social Drivers of Health	Coming Soon	Coming Soon	This data will be submitted via the Hospital Quality Reporting System Portal
N/A	PCH-41a-e*	Screen Positive Rate for Social Drivers of Health	Coming Soon	Coming Soon	This data will be submitted via the Hospital Quality Reporting System Portal

*41a. Screen Positive Rate for Social Drivers of Health - Food Insecurity; 41b. Screen Positive Rate for Social Drivers of Health - Housing Instability; 41c. Screen Positive Rate for Social Drivers of Health - Transportation Needs; 41d. Screen Positive Rate for Social Drivers of Health - Utility Difficulties; 41e. Screen Positive Rate for Social Drivers of Health - Interpersonal Safety

QualityNet PCHQR Program Overview Page – Learn More

QualityNet PCHQR Program Resources Page

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program

Overview   PCHQR Measures   Participation   Resources   Webinars

About the PCQHR Program

The Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting (PCHQR) Program was developed as mandated by Section 3005 of the Affordable Care Act (Public Law 111-148).

The PCHQR program is intended to equip consumers with quality-of-care information to make more informed decisions about healthcare options. It is also intended to encourage hospitals and clinicians to improve the quality of inpatient care that is provided to Medicare beneficiaries. A major part of the program supports improvement by ensuring that providers are aware of and reporting on best practices for their respective facilities and type of care.

To meet the PCHQR Program requirements, PPS-Exempt Cancer Hospitals (PCHs) are required to submit specific quality measures related to the PCHQR Program to the Centers for Medicare & Medicaid Services (CMS). Mandated reporting began with the Fiscal Year (FY) 2014 payment determination year. Participating facilities must comply with the program requirements set forth in the FY 2013 IPPS/LTCH Final Rule, including public reporting of the measure rates on the Provider Data Catalog (PDC).

Key Documents

Download Fall 2023 Program Manual

Participation

Download Submission Deadlines

CMS has designated 11 hospitals as PPS-Exempt (Medicare PPS-Excluded Cancer Hospitals). Learn more about PCHQR Program eligibility.

Resources

View Resources   **View Webinars**

Support Contact

(844) 472-4477 or (866) 800-8765
Weekdays from 8 a.m. to 8 p.m. Eastern Time (5 a.m. to 5 p.m. Pacific Time)

QualityNet PCHQR Program Resources Page

Final Rule Publications

Resources

Overview   PCHQR Measures   Participation   **Resources**   Webinars

Program Resources

Web Resources

Forms

Final Rules

Final Rules for Hospital Inpatient PPS/Long Term Care Hospitals (LTCHs)

Information regarding the PCHQR Program can be found in the following Final Rule (FR) publications:

File Name	File Type	
FY 2024 IPPS/LTCH PPS Final Rule (88 FR 59203-59232) - Modified the COVID-19 Vaccination Among Healthcare Personnel measure (88 FR 59137-59144). - Adoption of three health equity measures: Facility Commitment to Heallth Equity, Screening for Social Drivers of Health, and Screen Positive Rate for Social Drivers of Health. - Adoption of the Documentation of Goals of Care Discussions Among Cancer Patients measure. - Finalized public display of the Surgical Treatment Complications for Localized Prostate Cancer measure. - Modified the data submission and reporting requirements for the Hospital Consumer Assessment of Healthcare Providers and Systems Survey measure.	PDF	Download

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PCHQR Program Measures

11/15/2023

PCHQR Program on Quality Reporting Center

Where Can I Find PCHQR Program Resources?

Quality Reporting Center

- [PCHQR Program Tools and Resources](#)
- [PCHQR Program Archived Events](#)

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Quality Reporting Center

[Quality Reporting Center](#)

Inpatient Quality Reporting Programs – PCHQR Program

PCHQR Program Selections

# Quality Reporting Center Resources and Tools Page

## Hospital Contact Change Form

- Hospital Contact Change Form 🗎

Care Compare Preview Documents for January 2024 ⌄

PCHQR Program Manual ⌃

- Fall 2023 PCHQR Program Manual 🗎 (11/2023)

PCHQR Program Resources ⌃

- Frequently Asked Questions: COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP) Measure (02/2022) 🗎
- PCHQR Program Measure Crosswalk (10/2023) 🗎
- PCHQR Program Relationship Matrix (10/2023) 🗎
- PCHQR Program Submission Deadlines (10/2023) 🗎 🗎

Additional Resources ⌃

The following websites provide additional information the PCHQR Program measure specifications and sampling methodology:

- National Quality Forum measure endorsements and performance standards *(NQF)*
- Healthcare-Associated Infections (HAI) measure specifications 🗎 *(Center for Disease Control)*
- HCAHPS measure specifications *(HCAHPS Online)*
- CMS Quality Payment Program Measure Specifications
- QualityNet PCHQR Data Collection Page

Measure Exception Form

Some hospitals may not have locations that meet the National Healthcare Safety Network (NHSN) criteria for CLABSI or CAUTI reporting and some hospitals may perform so few procedures requiring surveillance under the SSI measure that the data may not be meaningful for *Care Compare* or sufficiently reliable to be utilized for quality reporting purposes in a program year.

Reporting will not be required for these measures if the PPS-Exempt Cancer Hospital (PCH) performed less than a combined total of 10 colon and abdominal hysterectomy procedures in the calendar year prior to the reporting year. To indicate a measure is not being reported, a Measure Exception Form should be completed and submitted prior to the First Quarter data submission deadline for the applicable program year.

- Measure Exception Form 🗎

Extraordinary Circumstances Exceptions (ECE) Request Form

Hospitals may request an exception from various quality reporting requirements due to extraordinary circumstances beyond the control of the facility. Such circumstances may include, but are not limited to, natural disasters (such as a severe hurricane or flood) or systemic problems with CMS data collection systems that directly affected the ability of facilities to submit data.

Hospitals must submit an ECE Request Form, with **all required sections completed within 90 calendar days of the extraordinary circumstance**. The hospital may request consideration for an exception of the requirement to submit quality data for one or more quarters.

- Extraordinary Circumstances Exceptions (ECE) Request Form 🗎

Quality Reporting Center
PCHQR Program Archived Events

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PCHQR Program Reminders

Data Submission Deadlines

- November 15, 2023
  - Q2 2023 Healthcare-Associated Infection (HAI)
  - Q2 2023 COVID-19 HCP
- January 3, 2024
  - Q3 2023 HCAHPS Survey
- February 15, 2024
  - Q3 2023 HAI
  - Q3 2023 COVID-19 HCP

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Provider Data Catalog Releases

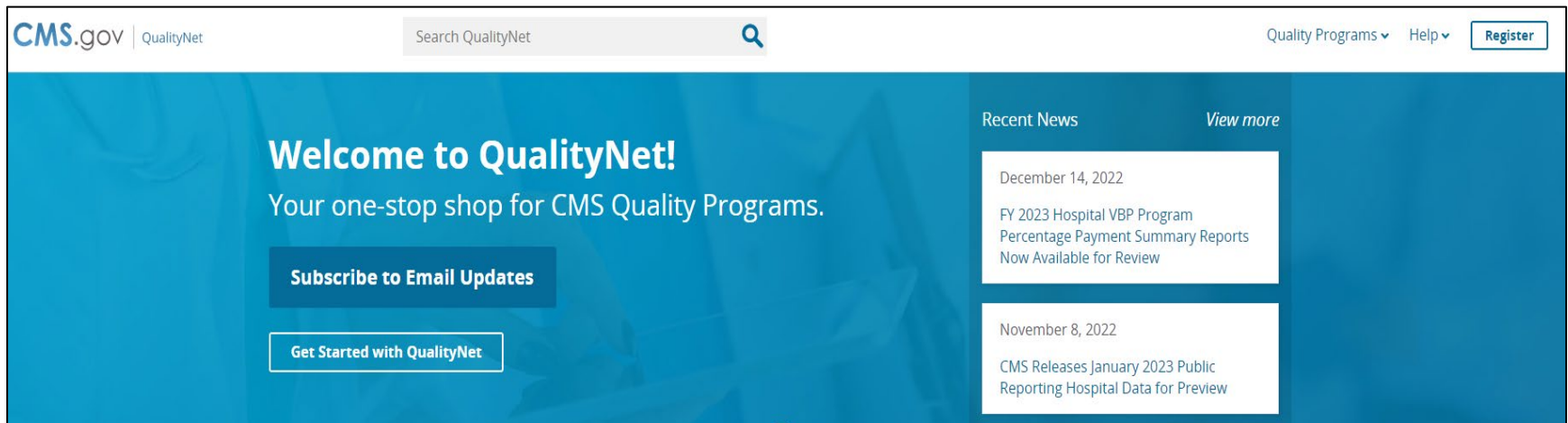## Provider Data Catalog

- **October 2023 Release: November 8, 2023**
  - Q2 2022–Q4 2022 HCAHPS Survey data
  - Q1 2022–Q4 2022 HAI measure data
  - Q4 2022 COVID-19 Vaccination Coverage Among HCP measure data
  - Q4 2022–Q1 2023 Influenza Vaccination Coverage Among HCP measure data
  - Q4 2021–Q3 2022 (FY 2024) 30-Day Unplanned Readmissions for Cancer Patients (PCH-36) claims data

- **January 2024 Release: Date To Be Announced**
  - Preview period: October 19–November 17, 2023
  - Q2 2022–Q1 2023 HCAHPS Survey data
  - Q2 2022–Q1 2023 HAI measure data
  - Q1 2023 COVID-19 Vaccination Coverage Among HCP measure data

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QualityNet Email Updates and Question & Answer Tool

Getting Started:
Receiving Program Notifications

QualityNet Home Page

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Sign Up for Email Updates

Sign Up for Email Updates

Enter your name and email address, and then select the lists you would like to join (at least one must be selected). You will receive an email requesting your confirmation for each subscription submission, and private lists will require approval from the list administrator prior to confirmation.

To ensure you receive messages from your lists, **please whitelist the domain: mailer.qualitynet.org**. This domain is part of every list's mailer address (example@mailer.qualitynet.org). If you have trouble receiving messages and the domain is whitelisted, please check your spam or junk folder. If the problem persists, contact your IT Support.

All fields marked with an asterisk (*) are required.

User Information

Name *

Email *

Mailing Lists

Public Lists   Private Lists

Enter the required fields and select one or more mailing lists to become automatically subscribed.

∨ Quality Reporting

☐ **IQR Imp Discuss: Hospital Inpatient Quality Reporting (IQR) and Improvement Discussion**
Forum for participants in Hospital Inpatient Quality Reporting Program to discuss topics of interest/concern, and share ideas, tools, and best practices.

☐ **PCHQR Notify: PPS-Exempt Cancer Hospitals Quality Reporting (PCHQR) Program Notifications**
News, information, announcements, and educational offerings/events regarding the PPS-Exempt Cancer Hospitals Quality Reporting Program.

☐ **HQR Vendor Notify: Hospital Quality Reporting Vendor Notifications**
Information and updates regarding any changes impacting HQR vendors.

Submit

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Accessing the QualityNet Question & Answer Tool

Ask a Question

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Submit a Question

QualityNet Question and Answer Site

Submit a Question to Our Support Team.   * Indicates required field

WARNING: Individually identifiable health information in this system is subject to the Health Information Portability and Accountability Act of 1996 and the Privacy Act of 1974. Submission of questions to the QIO and Hospital Q&A System that contains Protected Health Information (PHI) is a violation of these Acts. Questions containing PHI will be deleted from the system and not processed. For detailed information regarding transmitting or receiving healthcare information or data read the QualityNet System Security Policy, PDF

Tell us about yourself

First Name *   Last Name *

enter first name (limit 75 chars)   enter last name (limit 75 chars)

Email Address *   Confirm Email Address *   Phone Number

enter email address; format joe@domain.com   enter email address again to confirm   format xxx-xxx-xxxx (ext.)

What is your question?

Program *

select from the drop down

Topic *

select from the list of provided topics

Subject *

enter a brief summary of your question (limit 160 chars)

Question (4000 Characters Max) *

enter your question for CMS

[ ] I'm not a robot   reCAPTCHA
Privacy - Terms   SUBMIT QUESTION

Closing Remarks

Disclaimer

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