



Hospital Inpatient Quality Reporting (IQR) Program

Support Contractor

Public Reporting: Exploring the Next Generation of Preview Reports

Presentation Transcript

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November 27, 2018

2 p.m. ET

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Liana Bui:

Good afternoon. We would like to welcome everyone to today's Public Reporting Outreach and Education event entitled, *Public Reporting: Exploring the Next Generation of Preview Reports*. My name is Liana Bui and I will be the moderator for today's event. I serve as one of the project coordinators for the public reporting program within the Hospital Inpatient Value, Incentives, and Quality Reporting, or VIQR, Outreach and Education Support Contractor. As the title indicates, we will be discussing public reporting and exploring the next generation of preview reports. Today's event is open to participants in the Hospital Inpatient Quality Reporting, PPS-Exempt Cancer Hospital Quality Reporting, and Inpatient Psychiatric Facility Quality Reporting Programs. Jan Fredericksen, who is the Public Reporting and *Hospital Compare* Program Lead for the VIQR Outreach and Education Support Contractor, will be the main speaker for today's presentation.

The purpose of today's event is to provide an overview of the new Hospital Quality Reporting Next Generation User Interface, with a walk-through on how to log on to the new user interface. On the next slide, we will take a look at today's objectives.

There are three main objectives for today's webinar. Program participants should be able to understand the purpose of changing to the Next Generation User Interface, know the steps to take in order to log in to the Next Generation User Interface, and learn how the data are displayed on the Next Generation User Interface.

At this time, I'd like to turn the presentation over to Jan, who will further discuss the new and exciting Hospital Quality Reporting Next Generation.

Jan Fredericksen:

Hello to everyone and thank you for taking time out of your busy day to join us. CMS' goals for public reporting are to promote transparency to the reporting of clinical quality measures. Public reporting displays hospital performance data in a consistent, unified manner to ensure the availability of reliable information about the care delivered in the nation's hospitals, including outpatient care. Providers can utilize this data to drive continuous quality improvement initiatives and track progress. The data

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that are publicly reported, this empowers consumers to make informed decisions about their healthcare. Publishing data on *Hospital Compare*, in a consumer-friendly format, allows consumers to understand the data and make informed decisions about where to get care. So, what is changing? The method by which preview data is accessed, the way the data is organized, and the way hospitals interact with the data. Next slide, please.

A little background on the change. In response to CMS' desire to bring end users' needs to the forefront and develop a modern quality reporting system, the Hospital Quality Reporting user experience team has been working for the past year redesigning the *QualityNet Secure Portal*. Beginning with the February *Hospital Compare* preview period, *QualityNet* will include an interactive section specifically designed for public reporting data. To understand the end user's needs, the user research team spoke with 156 users—including stakeholders, support contractors, subject-matter experts, development teams, and, of course, end users—and used the insights obtained from these groups to build a user-centered system that replaces the static PDF preview report. The new public reporting user interface allows for a consistent experience through the use of one platform and a unified display across multiple programs. Through the streamlining of information, the data is no longer divided by programs, but is displayed on one report. For those of you familiar with *Hospital Compare* website, you will find this new design in *QualityNet* familiar. The flow of data and categorization of measure groups align, creating a consistent way of displaying data—first, to the providers during the preview period, and, ultimately, to public reporting of the data on *Hospital Compare*. Next slide, please.

Access will be available on multiple platforms. Besides a desktop computer, users will now be able to access data through a tablet and through mobile devices. The one on the left is the tablet view, while the picture on the right is the mobile view. Next slide, please.

Not everything is changing, though. Some things that will remain the same are submission deadlines, *QualityNet* username and password, and the measures that are displayed. The next few slides will show you how to

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access the new preview report user interface, and identify information that will be useful to your facility. Next slide, please.

For those of you familiar with *QualityNet*, this view will be familiar. The user will begin by clicking the Log In button on the *QualityNet* home page. Either of the two login buttons will take you to the login screen. The login page has not changed. Next slide, please.

This will bring you to the Choose Your *QualityNet* Destination page. There will now be an additional destination in the *QualityNet* destination drop-down list. Select HQR Next Generation to access. Next slide, please.

As the process of logging in has not changed, you will enter your user ID, password, and security code as you normally would. Next slide, please.

Once authenticated, users associated with a single provider—meaning, they report data for one hospital—will land on the Hospital Quality Reporting, or HQR, dashboard. You will see a Public Reporting card, which, once selected, will direct you to the new user interface. Special note for users who have access to multiple facilities' data: If you have permission to access multiple facilities, you must first select the facility CCN. The box to the right would be your view in this instance. When you are ready to view a different facility's data, select the Change Facility icon at the top of the page. From there, you will be able to select a different facility that you have access to. Remember, the Change Facility icon will only be visible to those of you with access to multiple facilities. To select the facility, you would click on the blue CCN link associated with the name of the facility. Once you click on the blue link, you will be taken to the dashboard, which is displayed on the slide. The Change Facility button is readily available at any time during the interface to switch to a new facility. Remember, for those providers who do not have access to multiple facilities, you would only see the left-hand part of the screen and would only need to click on the Public Reporting card. Next slide, please.

Once the Public Reporting link is selected, you will be directed to the landing page. On the landing page, you will find the hospital name, along

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with the hospital characteristics that were previously found on your preview report. Here, you will notice that there are two tabs across the top of the screen, Star Rating and Measure Data. These will be your navigation tabs and will constantly be available to access as you navigate through the interface. The platform will default to the star rating for the IQR and OQR Program. The IPPS and PCH Program users who do not report star ratings will see the measure tab only. Next slide, please.

The Star Rating tab displays the overall hospital star rating, facility details or the hospital characteristics, and the measure group score. Each group displays the performance for the group and expands to display the number of scored measures in that group, as well as a national score comparison graph. Next slide, please.

Each group score is assigned a weight, which is used to calculate a summary score. The graph shown displays the weighting for each group when data are submitted for all measure groups. If a hospital reports no measures for a given measure group, that group is considered to be missing. CMS applies the approach of a reweighting of the weight of the missing group across the groups for which the hospital does report measures. For more information on weighting, please refer to the quarterly updates and specification report found on *QualityNet* Overall Hospital Ratings web page. Additional information at the bottom of the Star Ratings tab includes the weight of each group and a link to additional information on the *Hospital Compare* web page. Next slide, please.

If you click on the Measure Data tab, this will be your view. Starting at the top, you will notice the hospital name is at the top of the page. There is a blue export button that we will discuss later in the presentation. Under the Export Data button, you will see a Search field, along with other filter features. This feature allows users to have flexibility and to prioritize what data is displayed. I will expand on this option later, as well. Then you will notice blue measure groups all the way down the page. Inside the blue measure groups are the data. The plus sign next to each measure group name has an accordion feature, which will allow the user to see the data when it is expanded, and it will hide the data when closed. For those of

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you familiar with *Hospital Compare* website, you will notice the similarity. To expand the Timely and Effective Care measure group, click the plus sign to the left of the measure group.

This is a partial view of the measures within the Timely and Effective Care measure group, once expanded. Starting from left to right, the measure ID will be listed first on the left-hand side. Moving across the page, you will see the facility rate, number of patients, state rate, national rate, and top 10 percent. Please note that these headers might change depending on the measure group you are reviewing, but the layout and functionality remains the same. You will also see light blue subheaders with categories listed. For example, Emergency Department Care. This is another way to help you identify where certain measures will be found. You may notice in some measure groups a combination of both OQR and IQR measures. You will no longer be viewing only measures that pertain to a specific program. What you will see are based on what programs your facility participates in. Next slide, please.

At the top of this page, you'll see a Search field. In this field, you can enter measure ID, and the measure group that has that particular measure ID will display. In this field, you can enter a measure ID—in this case, SEP-1. And the measure group that has that particular measure ID will display below, which is in Timely and Effective Care. It is important to note that the current search feature only responds to exact measure IDs. So, in the example, we entered SEP-1 in the Timely and Effective Care measure group, where SEP-1 is located is now available to us. If you were to enter just SEP-1, without the hyphen, you would not be able to see any results. If you entered sepsis, you would not receive results. This functionality may not function exactly as presented in this webinar, but we wanted to make you aware that this will be more user-friendly in the future. Also, in order to assist providers in identifying which measures are in each of those measure group accordions, a table has been added to the help guides for each of the programs. Next slide, please.

Now, let's do some filtering. You will see release level and performance filters. These filters allow the facility to drill down and display specific filter

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data. Let's start with the release filter. The filter will default to February 2019 and will automatically include all applicable measures for this reporting period. A new feature of the preview report user interface is the ability to see past releases. Once the February preview period ends, that data will not be removed and will be archived in this tool. When April preview begins—becomes available, a drop-down for both February and April will be available, and you will be able to select either. Also on this page, you will see level and performance filters. Use the level filter to determine how you would like to compare your facilities to either the state or the nation. The performance filter will allow you to select better, same, average, or worse. The accordions will then appear and facilities can drill down further to see which measures meet these requirements. Next slide, please.

Additional information regarding a measure is accessible by selecting the blue info icon to the left of the measure ID to display the full measure's descriptions and the reporting periods for the measures selected in a pop-up modal. For this slide, we selected VTE-6, and the measure description appears in the modal with the reporting period for this release. However, please note that this is just an example of the functionality and not the accurate quarters that you will see on the user interface. The reporting period information was previously found in the subheader of the old preview report. The closing modal, select either Cancel or Close. Next slide, please.

The blue asterisk indicates that there is further information available. Next Generation calls this supplemental information. Selecting the data value next to the asterisk will reveal a modal with additional details about the data. For this example, ED-1b was selected. The top portion of the screen is displaying the user interface asterisks next to the facility rate, state rate, and national rate, indicating that there is additional information available. By selecting the facility rate data next to the blue asterisk, the facility rate modal appears with additional information—and, in this case, the footnotes that have been applied to this value. In addition, and special for the emergency department measures, you will also find the hospital ED Volume Category assignment.

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This emergency department volume is categorized for the hospital's reference and is what you can use to compare your hospital to hospitals of like-sized ED volumes. Note that these modals would display individually when selected on the user interface, but we are showing them to you together to explain where the ED volume median calculations are found. As you are aware, the Your Hospital [ED] Volume Category measure category assignment is determined by the denominator entered by the facility for OP-22, left without being seen. Only hospitals that submit data for OP-22 will have the ED Volume Category. Otherwise, it will be not available in a footnote size. If you select the data next to the blue asterisk for the state rate, you will see the modal in the middle of this slide. It will list the footnotes applied to that piece of data and the median times for providers in your state with the same ED Volume Category. Note that these are not necessarily accurate footnote assignments for this particular demonstration. If you select the data next to the blue asterisk for the national rate, you will see in the modal on the right-lower portion of this slide, the [modal] will contain the footnotes applied for that piece of data and the median minutes for providers in the nation with the same ED Volume Category. Again, to close this modal, select Cancel and Close. Next slide, please.

We have now taken a look at the user interface. Let's talk about how you can export the data that you see on the new user interface. On the top left, you will see a Export Data button. This Export Data button is located at the top of the Measures Data tab. This is where you will export the data on the user interface in PDF format to save in a location of your choice and, once saved, allow you to print the preview report. As a reminder, if your facility participates in multiple programs, such as IQR and OQR, all measures will print on one report and that will likely yield a lengthy report. Let's see what a new—the new principal report looks like. Next slide, please.

The PDF preview report contains all of the information found on the Measure Data tab. You will see the facility characteristics, such as the hospital name and CCN, along with page number and date printed at the

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top of the page. You will also find the measure ID, measure description, reporting periods, and data elements associated with the measure. The information that was contained in the modal, such as the footnotes, will also display when you export the preview report. The footnotes to the right of the measure value are referenced at the bottom of the page. Remember, if the facility reports across multiple programs, all applicable measures will be contained in the report.

At the beginning of each preview period, a *Quality[Net]* news article is released. It contains information for the release periods, as well as links to the updated help guide and quick reference guide for your program. These documents are provided to help you and contain step-by-step information about how to access the user interface and review your data during the preview period. Note that the data will not go away as it did with the old preview report. So, beginning with the February release, the data will continue to be available to you. In addition to *QualityNet*, you can also find the help guide and quick reference guide on the *Quality Reporting Center* site. Be sure that you're registered for a ListServe so that you can get this information up to date. Additional functionalities are planned, and we will let you know as those are available and being developed. Thank you for your attention, and I will now turn the webinar over to Liana. Next slide, please.

Liana Bui:

Before we start today's question and answer, as a reminder, the slides for today's event were posted on *QualityReportingCenter.com* prior to the event. The question-and-answer transcript and recording of today's event will be posted on the same website and *QualityNet.org* in the near future.

Lastly, if you have any questions you would like answered, please type your question in the chat window for the speaker to best answer your question. We ask that at the beginning of your question, please reference the slide number, along with the question, in the chat window. Questions that are not answered during this question-and-answer session will be posted to the *QualityReportingCenter.com* website at a later date. If we could move back to slide 22, please.

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Jan Fredericksen: This is Jan, and I wanted to provide an update for this particular feature. At the time that we prepared the webinar, it was anticipated that this filter feature would be available for this release. However, it has been determined that it is not ready for that yet. So, it is something that will be available at a future time, and we'll let you know when that is. The search functionality that is shown on the left-hand side of that row does function. However, the other will not, and I just wanted to let you know that verbally.

Liana Bui: Now, we will begin our question-and-answer session. Jan will be addressing the questions submitted as time allows. We will not be asking questions in a particular order as to how they were received in the chat box. Our first question: When will this new format be available?

Jan Fredericksen: It should—it will be available for the preview period that is anticipated to begin in—next month, in December. And, we will provide a ListServe to you at that time to let you know when it's available.

Liana Bui: Thank you, next question. One of the participant's question is: I currently report for two facilities. However, I have a different login for each in *QualityNet*. Will I be needing two logins—still be needed—or will that change button be used?

Jan Fredericksen: It's our understanding that if you have access to a provider's data and report for more than one facility, you should be able to access that data for both of them by using that Change Facility.

Liana Bui: Thank you, next question. For facilities that have IPF, will the data be under the measure data of the facility?

Jan Fredericksen: Yes. The IPF data will be listed—I presume we're talking IPF—will be listed on the preview user interface, just as all the other measures.

Liana Bui: Thank you, Jan. Will older releases, for example, 2018, be added to the filters in the future?

Jan Fredericksen: There's no plan to go back and enter legacy data. The plan is to move forward. So, the very first release that will show on and be included and

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preserved in this user interface is the February 2019 data. And then, they will continue to add future releases to that report.

Liana Bui: Thank you, Jan. Another question: Is this taking place of the preview reports?

Jan Fredericksen: This will be where your preview report will be obtained. In the old way, where you had to go in and run the report by logging in to the portal and going to My Task and Run Reports, that no longer is functioning. You may still see it, but it will not function. So, you must use this new link in order to access the user interface and to download that data for your preview.

Liana Bui: Okay. Thank you. We have time for one more question. One of our participants have tried to log on to the HQR, but they are getting a message saying, Access Denied. Should they be able to access this now or not until February?

Jan Fredericksen: You will not be able to access it until you are notified that the preview is beginning. If you are—exactly what you're finding is what should happen. You will have access denied until the preview actually opens for this release—for this first one, for sure. So, if you have already gone out and attempted to do that, getting a note that says that access is denied is exactly what we'd expect to see happen. Again, make sure that you're on the ListServe so that you can see when preview will be going live so that you'll be able to access it at that time.

Liana Bui: Jan, we have one more question. One of our users says: Beginning February preview under What Has Changed, will that preview report be coming out in February 2019 or the preview report in the coming months for the *Hospital Compare* February 2019 release?

Jan Fredericksen: The preview report that will be available to you to review in December is the data that will be publicly reported on *Hospital Compare* in February. I think that is what the question was.

Liana Bui: Jan, another question has come in. Can you export measure data in Excel or only in PDF format?

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Jan Fredericksen: At this time, only the PDF is available. I know that there are future plans to make that a more user-friendly export function. But, for this first release, the PDF is the only thing that's available for export, and then available for printing. We're going to, as more functions and features become available, we'll keep you informed. So, you'll be able to be aware of that capability. But, at this time, the PDF is the only thing that's available.

Liana Bui: Jan, another question has come in. Just to verify, the new view will be similar to what the public will see?

Jan Fredericksen: No. The new view is what you're going to see for your preview data. What you will see on *Hospital Compare* is what the public will see. The only thing that's really different—what's going to display on *Hospital Compare* will not necessarily change from what we're seeing today. What's changing is what you're going—how you're going to be able to view your preview data and the preview report that's being produced. But what the public will see will not change.

Liana Bui: Thank you, Jan. Jan, another question has come in. When preview begins, is there a way we could share feedback with CMS on our experience using the new user interface?

Jan Fredericksen: That's a really good question. And I know the UX team that put some of these things together may be interested in that. Let me—I'll have to get more information on that. I really don't have an answer to that question.

Liana Bui: Perfect. Thank you, Jan. Another question is: The time frame for preview reports to correct any errors, is it still 30 days?

Jan Fredericksen: The purpose of the preview report is not for the correction of errors. The preview report, the purpose is to show you what will be going onto *Hospital Compare*. It is—the expectation that for any data that is submitted from chart abstraction or web-based, that all data is to be reviewed and corrected prior to the submission deadline. So, anything that's found after that is really not available for changes. So, the preview period is for the designated 30 days. For those hospitals who have the ability to suppress data, then that is—it needs to occur within that 30-day

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period before the last day of the preview. Otherwise, they're really—you know, they're certainly available for questions, and we welcome questions about your data to help explain those things. But, whatever has been submitted by the submission deadline is what will be reported for, like the HAI and the chart-abstracted and web-based measures.

Liana Bui: Perfect. Thank you, Jan. One of our users has asked: I have access to seven different hospitals. Will I need to update all of my passwords?

Jan Fredericksen: My understanding [is] that you will not, that you will have the ability to use that Change Facility button and enter a different CCN, based on what's available to you. So, that's our understanding, and that's the anticipated way that this would function. So, in that one slide, you should be able to see all the facilities that you have available to you to be able to select that and be able to view their data and export.

Liana Bui: Thank you, Jan. Another user has asked: Will we no longer need to use Secure File Transfer to download reports?

Jan Fredericksen: This report does not go through Secure File Transfer. I'm not sure what reports that would be. HSRs, those hospital-specific reports, will continue to be through Secure File Transfer. But the preview, the—you will still go through the secure portal, of course, and you'll be getting through that login to this Next Generation. And then, you will download from that site to wherever you choose to save it, on your desktop or your drives for your hospital. But there is no—Secure File Transfer has not been part of the preview process previously, and it isn't for this, either.

Liana Bui: Thank you, Jan. A user has asked: If we encounter problems when trying to preview—to view preview information, will we call the *QualityNet* Help Desk?

Jan Fredericksen: Certainly, the *QualityNet* Help Desk is one option, or you can use the Q&A tool off of *QualityNet*, and we can assist you, as well. I think that is our last question and concludes our Q&A session for today.

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Liana Bui:

Thank you for the questions and sorry if we didn't have time for your question in today's live Q&A. If you have any additional questions on how to access the new user interface after reviewing the steps shown in this webinar, and the resources linked on the previous slide, you can call our phone staff or access the public reporting question-and-answer tool found on the home page of *QualityNet*. You can access this tool by clicking on the appropriate link that is indicated in the red box on this slide. If you are accessing this tool for the first time, please keep in mind there is a first-time registration required. The hyperlink on the top of this slide will take you to the public reporting question-and-answer tool. The first screenshot on the left shows the answer category option available by topic. The screenshot on the right gives you the opportunity to ask a question. Please be sure to include your CCN when you submit your question and to select the correct queue. Thank you for joining us for today's webinar. We hope you learned something today. Thank you and enjoy the rest of your day. Goodbye, everyone.