CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES
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CJR Patient-Reported Outcomes (PROs) and Risk Variable Data Submission for Performance Year 1 Office Hours

Comprehensive Care for Joint Replacement Model

October 19, 2016

2:00-3:00 p.m. EST

Office Hours Format

- Poll participants to guide webinar
- Review PRO resources available on CJR Connect & additional participant resources
- Address commonly asked questions
- Open Q&A session

Commonly Asked Question Categories

- Identifying eligible patients for PRO and risk variable collection
  - Includes how to handle patients of providers in BCPI or other related models
- PRO and risk variable data requirements
  - Includes information about PRO surveys (PROMs), definition of chronic narcotic use, and pre- and post-operative data completeness
- Timing of PRO and risk variable data collection
- PRO and risk variable data submission in Performance Year (PY) 1
  - Includes test file & final PRO Data Collection Template population and submission information, how to handle multi-hospital health systems, data submission using *QualityNet*
- PRO and risk variable data submission in PYs 2-5
  - Includes submission of an External File to *QualityNet,* PRO Data Collection Template use in PY 2, guidance on naming the External File, reporting of the same PROMs and risk variable factors in PYs 2-5, External File submission protocol for vendors

Live Participant Survey

Which of the following categories of commonly asked questions would you like to learn more about? *Please select all that apply.*

- Identifying eligible patients for PRO and risk variable collection
- PRO and risk variable data requirements
- Timing of PRO and risk variable data collection
- PRO and risk variable data submission in PY 1
- PRO and risk variable data submission in PYs 2-5

Review: PRO Resources on CJR Connect

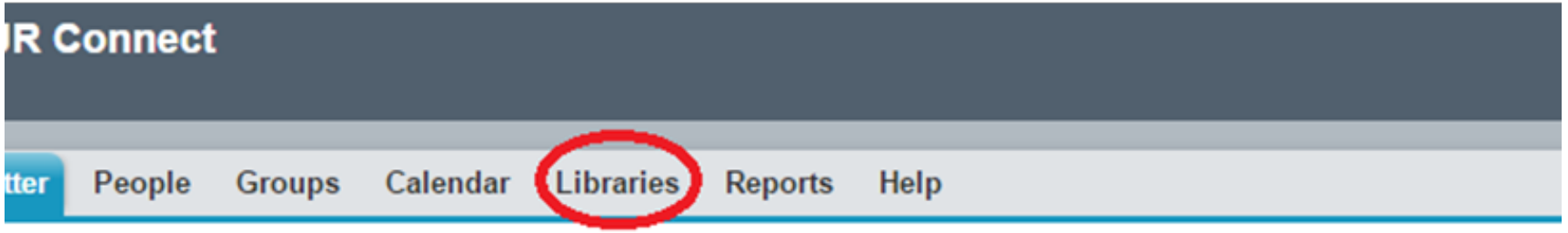
- **Comprehensive Care for Joint Replacement (CJR) PRO Data Collection Overview document**
  - Highlights key information
    - Rationale for collecting PROs
    - Eligible patients
    - Data elements for collection
    - Timeline for collecting & submitting pre- and post-op data
    - Resources (e.g., links to PRO survey instrument websites and contact information) to support successful collection and submission of data
- **CJR PRO Data Collection Patient Selection Flowchart and Timeline/Submission Deadlines documents**
  - Stand-alone resource
    - Helps identify eligible patients
    - Highlights timeline/submission deadline for PY1 and future PYs.
- **CJR PRO Resource List**
  - Selection of resources relevant to the CJR voluntary PRO data collection initiative
- **CJR Veterans RAND 12 (VR-12) Read Me**
  - Materials (template letter & abstract) for hospitals to fill out and submit when requesting the VR-12

Review (cont.): PRO Resources on CJR Connect

- **CJR PRO Collection FAQs**
  - Responses to frequently asked questions
- **CJR PRO Patient Brochure and Postcard**
  - Educational and reminder resource for hospitals to download, customize, and provide to patients
- **CJR PRO Guidance: Test File Upload onto *QualityNet***
  - Steps to submitting PRO Data Collection Template test file
- **CJR PRO Data Dictionary and Collection Template (Excel files)**
  - Data Dictionary (*version 1.1*) provides:
    - Comprehensive list of data elements to be collected/submitted
      - Data specifications (variable names) can be cross-walked to the Template
    - Hyperlinks to PRO survey instruments
  - Data Collection Template (*version 1.3*):
    - To be used to collect and submit the required data elements for hospitals opting to submit PRO information in PY1
  - Refer to the CJR PRO Data Dictionary and Collection Template user guides for details on the use of these resources

Review (cont.): Additional Participant Resources

- CJR Final Rule
  - https://federalregister.gov/a/2015-29438
- CJR Participant Hospital Support
  - CJRSupport@cms.hhs.gov
- CJR Connect
  - PRO resources available in the PRO Data Collection folder in the Libraries tab



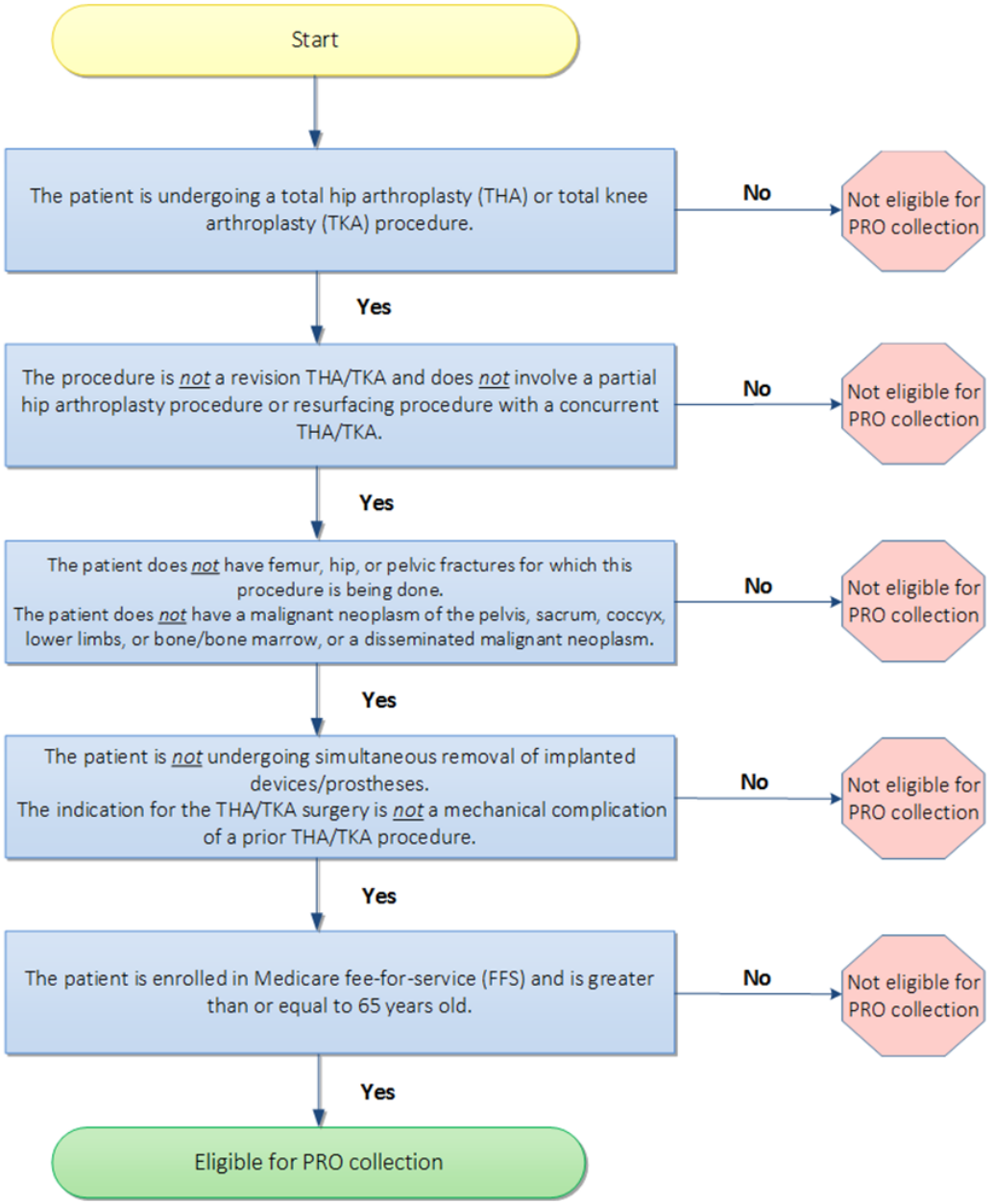
- CMS Measure Methodology Website
  - https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HospitalQualityInits/Measure-Methodology.html
    - Hip and Knee Arthroplasty Patient-Reported Outcomes folder

Identifying Eligible Patients for PRO and Risk Variable Collection

Patients Eligible for PRO and Risk Variable Collection

- PRO eligible patients overlap with, but are distinct from patients included in CJR model episodes
  - CJR model episodes are specified by MS-DRGs 469 and 470 (Lower Extremity Joint Replacement)
  - Eligible voluntary PRO data collection patients are specified primarily clinically:
    - Elective, primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) procedures
    - Medicare Fee-For-Service beneficiaries aged 65 or over
    - Patients of providers enrolled in BPCI or other similar models
    - *Patients undergoing revisions or with hip, femur or pelvic fractures, bony metastases, or requiring hardware removal are not eligible*
- Hospitals can submit PRO data on any patients, but only those meeting criteria are considered for successful PRO data submission

Patient Selection Flowchart



Patient Eligibility for Bilateral or Staged THA/TKA Surgeries

- **Reporting of eligible bilateral or staged elective primary THA/TKA surgeries**
  - For either both hips or both knees
    - **Staged procedures:** If second eligible THA/TKA procedure occurs within 90 days of the date of pre-operative PRO and risk variable data collection for first eligible THA/TKA procedure, you ***do not*** need to re-collect PRO data and only need to re-collect the Patient-Reported Pain in Non-operative Lower Extremity Joints variable.
    - **Same-day procedures:** Same guidance applies
  - For different joints (e.g., the first eligible procedure is for a left hip and second is for a right knee replacement)
    - **Staged procedures:** The second eligible procedure must occur within 90 days of the date of the pre-operative PRO and risk variable data collection for the first eligible procedure.

      You ***must*** (re-)collect:

      - PRO data for the specific type of joint replacement (use either the HOOS or KOOS [Subscale or Jr.] survey); and
      - The risk variable Patient-Reported Pain in Non-operative Lower Extremity Joint;

      You ***do not*** need to re-collect the other risk variable data and can simply report this data for both procedures in the Template
    - **Same-day procedures:** Same guidance applies
  - Report different joint replacement procedures for the same patient as unique cases (in another row) in the Template to get credit for both procedures

PRO and Risk Variable Data Requirements

Data Collection Requirements in PY 1

- Submit data elements as finalized in the CJR final rule
  - Refer to Table 28 of the final rule or PRO resources (e.g., Overview document, FAQs, Data Dictionary)
  - Use the most current version of the PRO Data Collection Template
- Voluntary reporting of PRO and risk variable data collection (final data elements and successful submission criteria) information can be found in Section III.D.3.a., pages 73486-73501, or section 510.400(b) of the final rule
- For the PY 1, hospitals opting to participate in the PRO data submission must submit data on **at least 50% or 50 cases** among all eligible THA/TKA procedures – for example:
  - Hospitals with 20 eligible procedural date cases between Jul 1 and Aug 31, 2016 would need to submit data on at least 10 cases (50%)
  - Hospitals with 1,000 eligible procedural date cases between Jul 1 and Aug 31, 2016 would need to submit data on at least 50 cases

Data Collection Requirements in PYs 2-5

PY	Eligible THA/TKA procedures performed during	PRO Submission Requirements
2	Sep 1, 2016 – Jun 30, 2017	≥ 60% or ≥ 75 eligible procedures
3	July 1, 2017 – June 30, 2018	≥ 70% or ≥ 100 eligible procedures
4	July 1, 2018 – June 30, 2019	≥ 80% or ≥ 200 eligible procedures
5	July 1, 2019 – June 30, 2020	≥ 80% or ≥ 200 eligible procedures

PRO submission requirements are for pre-operative data for cases (patients) with eligible THA/TKA procedures performed during the specified time period in the CJR final rule and noted in this table.

PRO and Risk Variable Data

- Hospitals must submit 100% of questions from one of two generic surveys (i.e., the VR-12 or PROMIS-Global); 100% of questions from a joint-specific HOOS/KOOS Jr. or subscale survey; and the following risk variables and identifiers:
  - Two required identifiers with all (pre- and post-operative) submitted data
  - Six required risk variables with pre-operative submitted data
- While not required for successful submission, we ask hospitals to also submit the following data elements with pre- and post-operative submitted data to improve CMS's understanding of PRO data
  - Medicare Provider Number
  - Mode of Collection
  - Date of Collection
  - Survey Respondent (if other than patient)

PRO and Risk Variable Data (cont.)

Pre Operative Data Collection					Post Operative Data Collection				
VR-12		*OR*	PROMIS-Global		VR-12		*OR*	PROMIS-Global	
AND					*AND*				
HOOS/KOOS Jr.		*OR*	HOOS/KOOS subscales		HOOS/KOOS Jr.		*OR*	HOOS/KOOS subscales	
HOOS Jr	KOOS Jr.		HOOS subscales	KOOS subscales	HOOS Jr	KOOS Jr.		HOOS subscales	KOOS subscales
• Pain (2Qs) • Function, daily living (4Qs)	• Stiffness (1Q) • Pain (4Qs) • Function, daily living (2Qs)		• Pain (10Qs) • Function, daily living (17Qs)	• Stiffness (2Qs) • Pain (9Qs) • Function, daily living (17Qs)	• Pain (2Qs) • Function, daily living (4Qs)	• Stiffness (1Q) • Pain (4Qs) • Function, daily living (2Qs)		• Pain (10Qs) • Function, daily living (17Qs)	• Stiffness (2Qs) • Pain (9Qs) • Function, daily living (17Qs)
AND					*AND*				
Medicare Provider Number	Mode of Collection		Body mass index (BMI) or height in cm and weight in kg		Medicare Provider Number			Mode of Collection	
Medicare Health Insurance Claim (HIC) number	Person completing survey		Pre-operative Use of Narcotics		Medicare Health Insurance Claim (HIC) number			Person completing survey	
Date of Birth	Patient-reported Pain in Non-operative Lower Extremity Joint(s)		Patient-reported Health Literacy Screening (SILS2) questionnaire		Date of Birth				
Date of Collection	Patient-reported Back Pain (Oswestry Index question)		Race and Ethnicity		Date of Collection				

PRO Survey Question Numbering

- Survey item numbering: *order preempts number*
  - PROMIS-Global Item Numbering
    - Some Q numbers in the PROMIS-Global survey are different from question assignments in the Data Dictionary; however, the order of Qs in the survey are the same as that found in the Data Dictionary
  - HOOS/KOOS Subscales vs. Jr.
    - The Data Dictionary shows that the Jr. survey questions are contained within the Subscale survey questions
    - Again, some Q numbers from the surveys are different from question assignments in the Data Dictionary; however, ordering of Qs is consistent across the surveys and the Data Dictionary
- VR-12 survey numbering and response requirement
  - VR-12 is also referred to as the Veterans RAND 12 Item Health Survey. The name of the survey does suggest that it only has 12 items, but the total number of questions is 14.
    - 12 Qs or items (i.e., question groups 1-7) in the survey are used to calculate the "Physical Health Summary Measure" (PCS-physical component) score and the "Mental Health Summary Measure (MCS-mental component) score.
    - 2 additional Qs are included as anchor questions that are used to gauge the clinical significance of a (physical and/or mental health) change following an intervention.
  - As finalized in the CJR final rule, this is one of the generic survey instrument hospitals can use. Therefore, hospitals who elect to use this survey instrument must report patient responses to all of the Qs; that is, all 14 Qs from this survey.

Defining Narcotics Use for Collection

- Definition and collection of "use of chronic (≥90 day) narcotics"
  - Definition: Having any daily or regular intermittent dose of morphine (or hydromorphone/equivalent) for a period of at least 90 days.
  - Collection: Data may be collected on any day within 90 days of your patient's elective primary THA/TKA procedure.
    - Count the patient as being on chronic narcotics if this variable is collected several weeks prior to the THA/TKA procedure and the clinical care team expects the patient to remain on narcotics until surgery, at which time, the patient will have been on narcotics for at least 90 days.
  - Can also abstract this information from medical records or EHR

Requirement for Submission of Pre- & Post-Operative Data

- Data must be submitted for the same set of patients both pre-and post-operatively
- Data must be complete for both pre- and post-operative surveys
- For PY 1, which concluded with the last eligible procedure date of August 31, 2016, hospitals must submit pre-operative data on at least 50 eligible patients or 50% of eligible patients to fulfill the successful criteria in PY 1.
- For PY 2, hospitals must submit post-operative data on the same eligible cases they submitted pre-operative data on in PY 1 *AND* collect pre-operative data on at least 75 eligible patients or 60% of eligible patients in PY 2 to fulfill the successful criteria in PY 2.
    - Please refer to the PRO Submission Requirements table provided in this Office Hours webinar or Table 30 in the CJR final rule

PY 2 Data Collection for Hospitals That Did Not Participate in PY 1

- Submission of voluntary data is not required for reconciliation payment eligibility in any year of the CJR model.
- CJR participant hospitals that successfully submit PRO data per the requirements in section III.D.3.a.(9) of the 2015 CJR final rule may increase their financial opportunity under the model, since those that successfully submit PRO data can receive two points toward their composite quality score.
- Successful PRO submission in PYs 2-5 requires both pre- *and* post-op data submission.
- Hospitals cannot meet successful PRO submission criteria in PY 2 if they did not participate in PY 1.
- For this reason, we urge hospitals considering future PRO submission to submit pre-operative PRO data in the current PY to prepare for the next PY submission.

PY2 Data Submission Scenarios

Scenario 1: Hospital successfully submits PRO data for ≥50 cases or ≥50% in PY1

- Hospital submits complete (no missing) post-op data for the same ≥50 cases or 50% from PY1 AND submits complete (no missing) pre-op data for 75 cases or ≥60%
- If hospitals meet this criteria, they will be considered successful for submission in PY2

Scenario 2: Hospital submits NO pre-op data in PY1

- If hospital did not successfully submit pre-op PRO data in PY1, hospital will NOT be considered as successfully submitting PRO data for PY2
- Complete (no missing) pre-op data submission in PY2 is required for successful PRO and risk variable data submission in PY3

Missing PRO Survey Answer(s) and/or Risk Variable Elements

- All survey questions must be answered; if a patient skips a question, the survey is not considered complete.
- Successful submission of PRO and risk variable data requires that the hospital submit all data elements as finalized in the CJR final rule. If the patient does not provide an answer, the data you submit for this patient would be considered incomplete.
- Race and ethnicity variables are required. We encourage the healthcare team to work with their patients to help them understand the importance of this information and select the option favored by the patient.

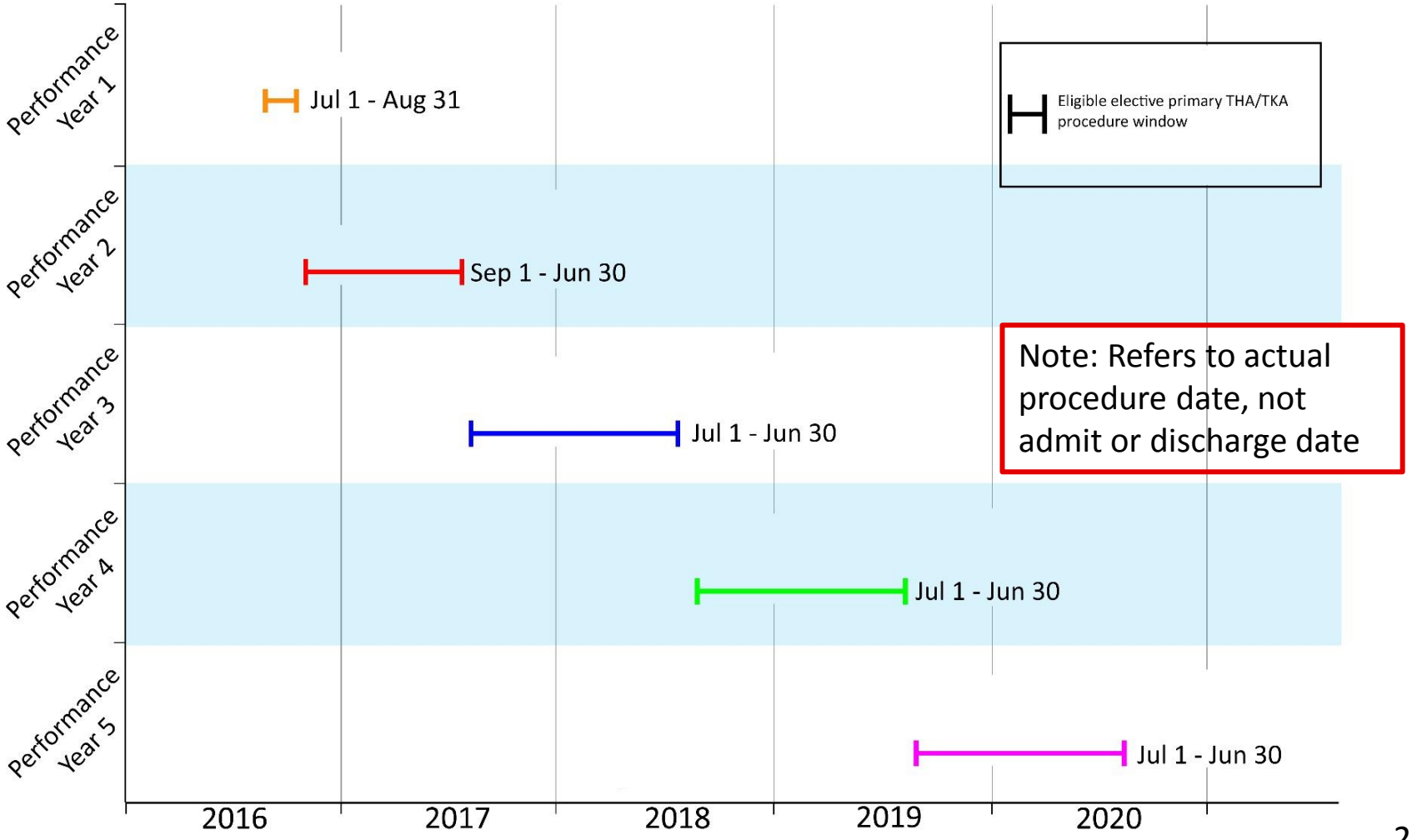
Timing of PRO and Risk Variable Data Collection

Data for Submission and Their Deadlines in PYs 1-5

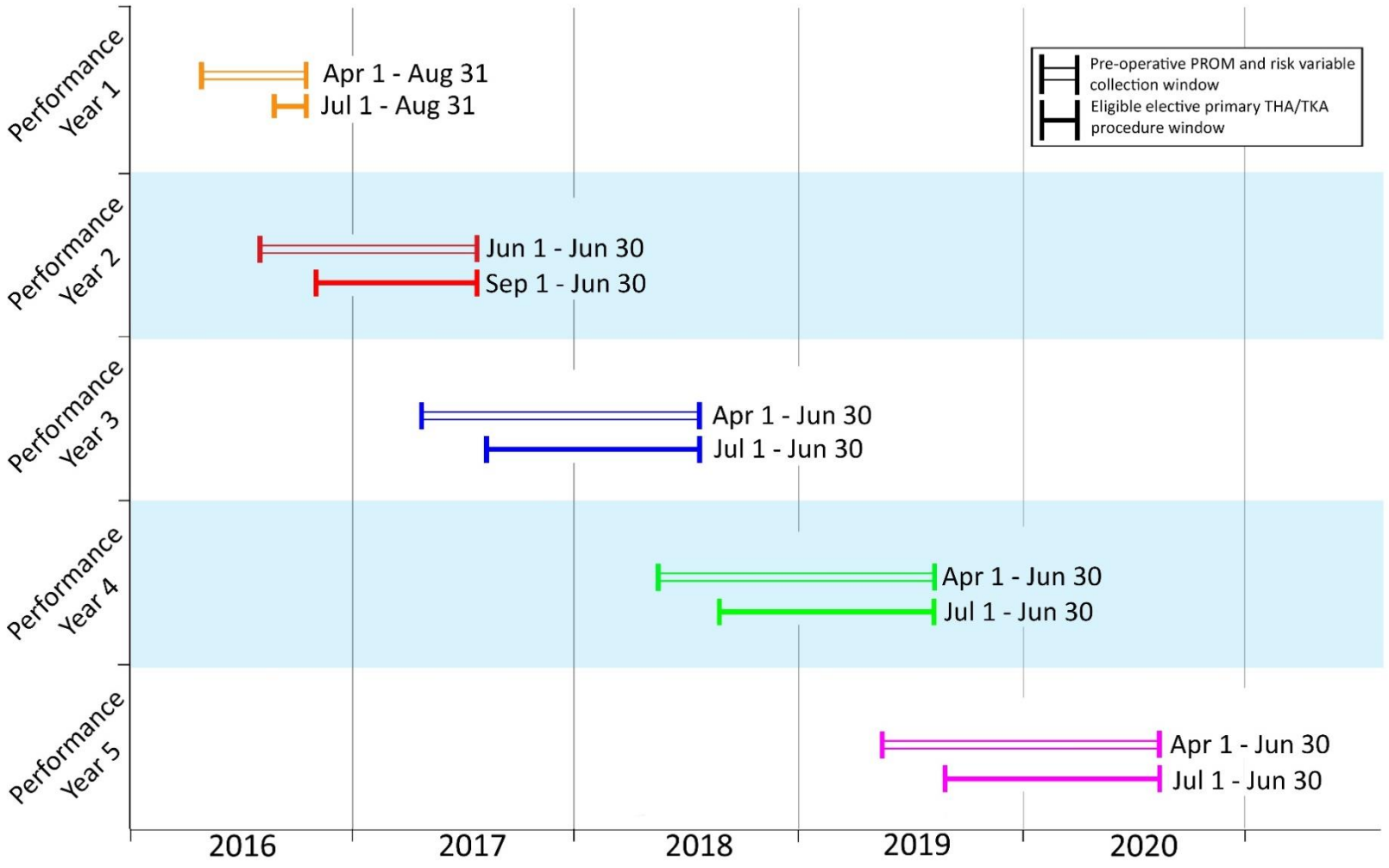
	PY 1	PY 2	PY 3	PY 4	PY 5
Deadline	October 31, 2016	October 31, 2017	August 31, 2018	August 31, 2019	August 31, 2020
Data Being Submitted	Pre-Operative Data on PY 1 Patients	Post-Operative Data on PY 1 Patients	Post-Operative Data on PY 2 Patients	Post-Operative Data on PY 3 Patients	Post-Operative Data PY 4 Patients
Data Being Submitted	Pre-Operative Data on PY 1 Patients	Pre-Operative Data on PY 2 Patients	Pre-Operative Data on PY 3 Patients	Pre-Operative Data on PY 4 Patients	Pre-Operative Data on PY 5 Patients

- PY 1: Submission on at least 50 or 50% of eligible procedures
- PY 2: Submission on at least 75 or 60% of eligible procedures
- PY 3: Submission on at least 100 or 70% of eligible procedures
- PY 4: Data submission on at least 200 or 80% of eligible procedures
- PY 5: Data submission on at least 200 or 80% of eligible procedures

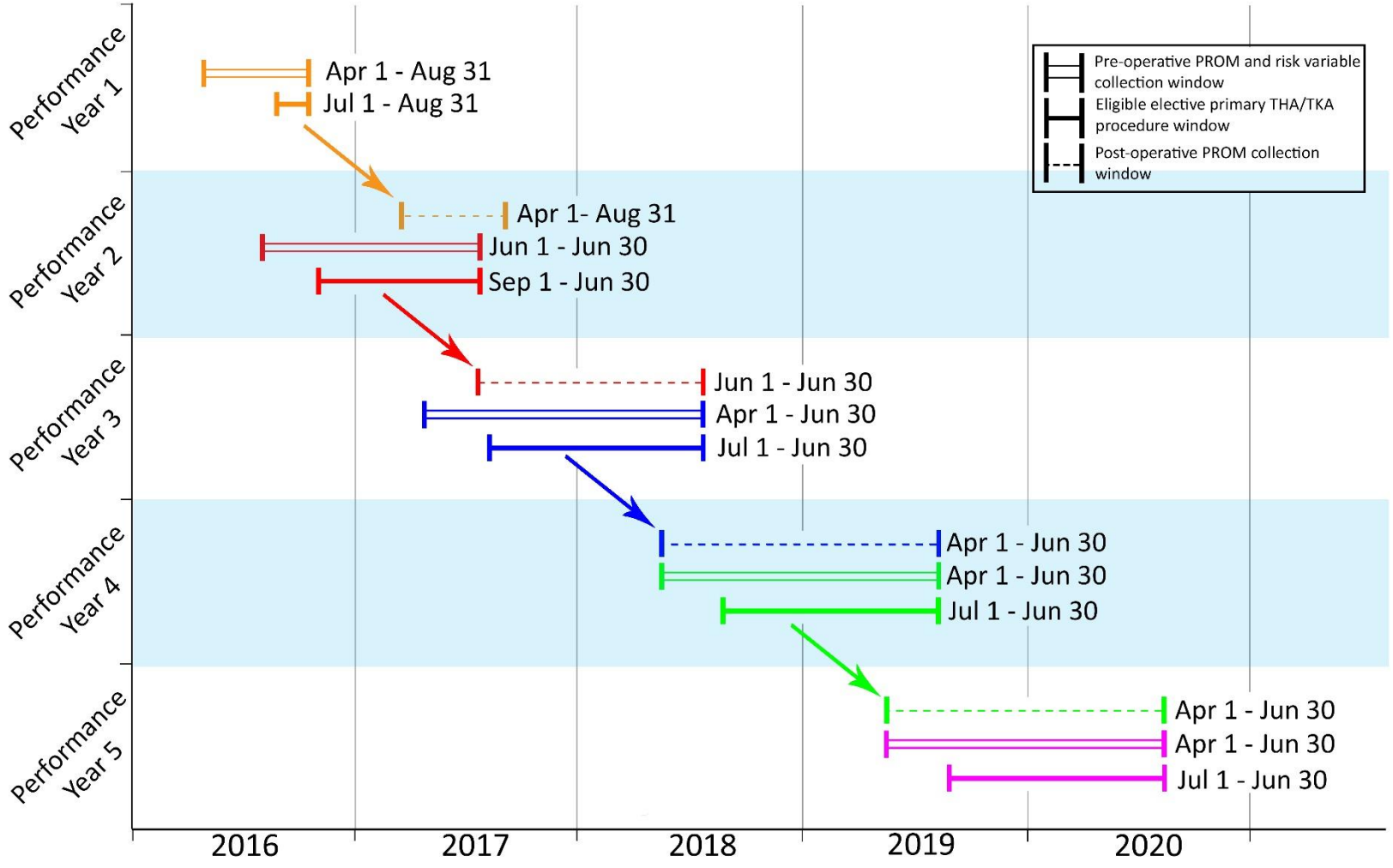
THA/TKA Procedures Eligible for PRO and Risk Variable Data Collection



Pre-Op PRO and Risk Variable and Eligible Procedure Windows



Pre-/Post-Op PRO and Risk Variable and Eligible Procedure Windows



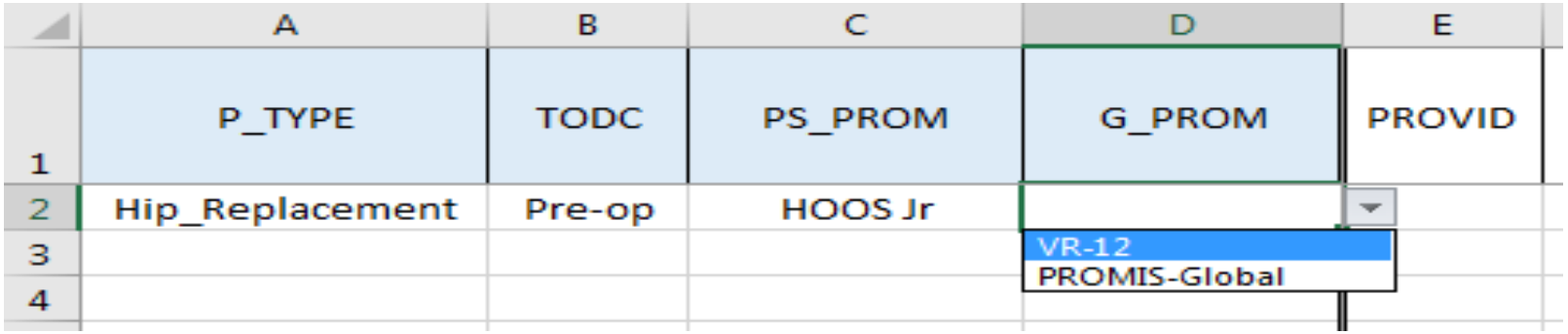
PRO Data Collection Timing

- Hospitals should collect a patient's pre-operative data 90 to 0 days (3 months) prior to the patient's procedure. The hospital will then need to collect this patient's post-operative data 270 to 365 days (9-12 months) after the patient's procedure.

PRO and Risk Variable Data Submission in PY 1

Population of PRO Data Collection Template

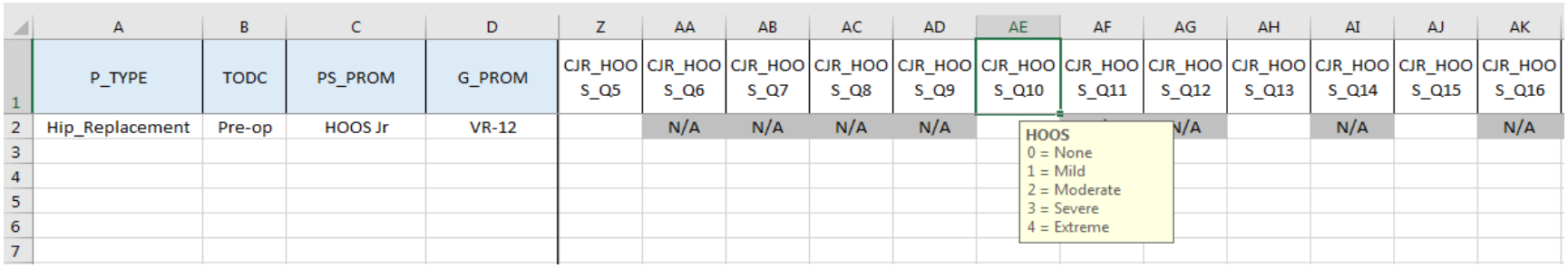
- PRO Data Collection Template has the following Customization Tool (drop-down)



  - Procedure Type (P_Type): Hip_Replacement or Knee_Replacement
  - Time of Data Collection (TODC): Pre-op or Post-op
  - Procedure Specific PROM (PS_PROM): Dependent on Procedure Type, but can be HOOS Jr. or HOOS Subscales; KOOS Jr. or KOOS Subscales
  - Generic PROM (G_PROM): VR-12 or PROMIS-Global

Population of PRO Data Collection Template (cont.)

- Once hospitals complete their selection of the four customization elements, the Template will automatically note the data elements to be collected and submitted in columns E through CV
  - Grayed-out cells with “N/A” indicate that data are not applicable based on the selection of the four customization elements, and hence not required for successful submission. The cells will not be “grayed out” when data are required for reporting.
    - Fields designated “N/A” are blocked for data entry

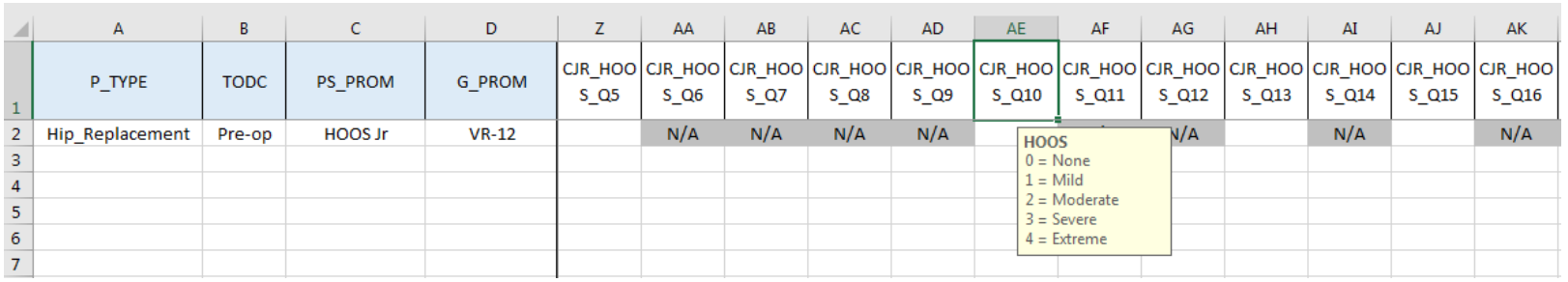


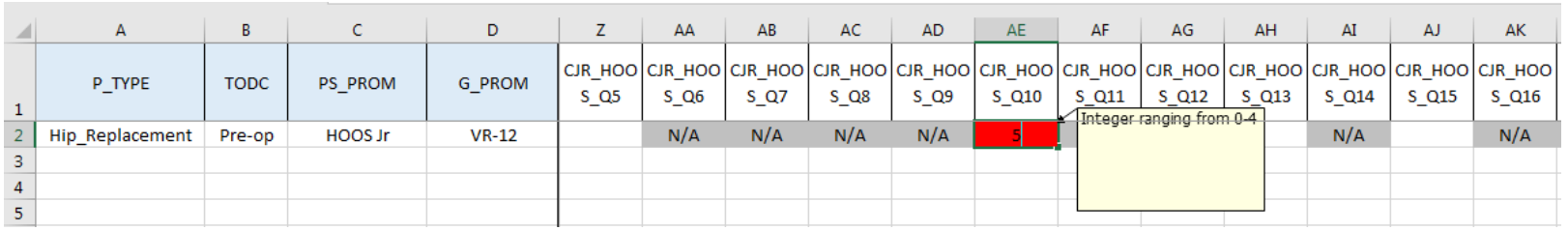
	A	B	C	D	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK
1	P_TYPE	TODC	PS_PROM	G_PROM	CJR_HOOS_Q5	CJR_HOOS_Q6	CJR_HOOS_Q7	CJR_HOOS_Q8	CJR_HOOS_Q9	CJR_HOOS_Q10	CJR_HOOS_Q11	CJR_HOOS_Q12	CJR_HOOS_Q13	CJR_HOOS_Q14	CJR_HOOS_Q15	CJR_HOOS_Q16
2	Hip_Replacement	Pre-op	HOOS Jr	VR-12		N/A	N/A	N/A	N/A			N/A		N/A		N/A
3																
4																
5																
6																
7																

HOOS
0 = None
1 = Mild
2 = Moderate
3 = Severe
4 = Extreme

Population of PRO Data Collection Template (cont.)

- Each data variable cell has a unique data validation rule which will reject invalid inputs
  - Hospitals can click on the variable name in the first row or refer to the comment automatically populated from the rejected cell for validation details.
    - Comment will disappear once a valid input is entered into the cell





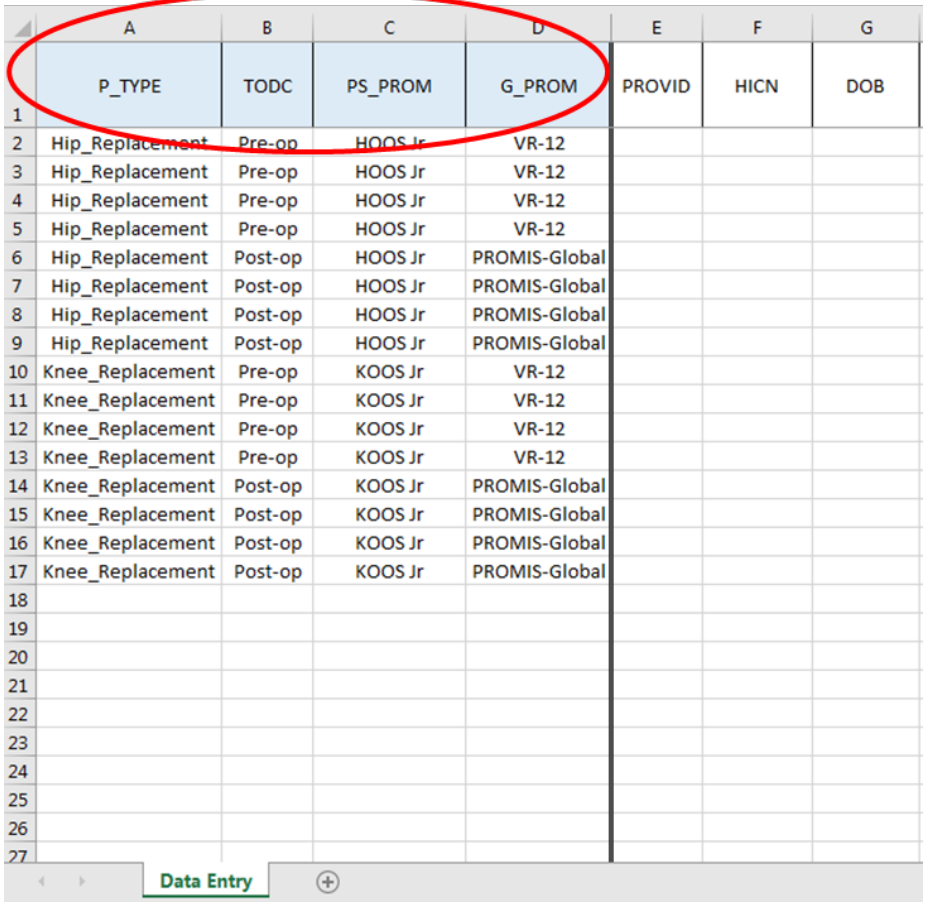
Population of PRO Data Collection Template (cont.)

- The column CW, or CORE Data Missed, located on the far right of this Template shows the number of data elements hospitals must submit.
  - Included to help hospitals perform automated self-checks on data completeness
  - Number in this cell will automatically decrease as hospitals enter in the data elements
  - Value of “0” in this column indicates the data for that patient (row) are complete

	A	B	C	D	CL	CM	CN	CO	CP	CQ	CR	CS	CT	CU	CV	CW
1	P_TYPE	TODC	PS_PROM	G_PROM	VR_12_Q 14	PROMIS_ GLOBAL_ Q1	PROMIS_ GLOBAL_ Q2	PROMIS_ GLOBAL_ Q3	PROMIS_ GLOBAL_ Q4	PROMIS_ GLOBAL_ Q5	PROMIS_ GLOBAL_ Q6	PROMIS_ GLOBAL_ Q7	PROMIS_ GLOBAL_ Q8	PROMIS_ GLOBAL_ Q9	PROMIS_ GLOBAL_ Q10	0
2	Hip_Replacement	Pre-op	HOOS Jr	VR-12		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	28
3																

Population of PRO Data Collection Template (cont.)

- While you do not need to use the Template to collect data, you ***must submit*** data in the Template provided
- If you are copying (cutting)/pasting data into the Template, you should paste in data for columns A-D (Customization Tool columns), first; ***you can paste in several rows at a time***



	A	B	C	D	E	F	G
1	P_TYPE	TODC	PS_PROM	G_PROM	PROVID	HICN	DOB
2	Hip_Replacement	Pre-op	HOOS Jr	VR-12			
3	Hip_Replacement	Pre-op	HOOS Jr	VR-12			
4	Hip_Replacement	Pre-op	HOOS Jr	VR-12			
5	Hip_Replacement	Pre-op	HOOS Jr	VR-12			
6	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global			
7	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global			
8	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global			
9	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global			
10	Knee_Replacement	Pre-op	KOOS Jr	VR-12			
11	Knee_Replacement	Pre-op	KOOS Jr	VR-12			
12	Knee_Replacement	Pre-op	KOOS Jr	VR-12			
13	Knee_Replacement	Pre-op	KOOS Jr	VR-12			
14	Knee_Replacement	Post-op	KOOS Jr	PROMIS-Global			
15	Knee_Replacement	Post-op	KOOS Jr	PROMIS-Global			
16	Knee_Replacement	Post-op	KOOS Jr	PROMIS-Global			
17	Knee_Replacement	Post-op	KOOS Jr	PROMIS-Global			
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							

Data Entry

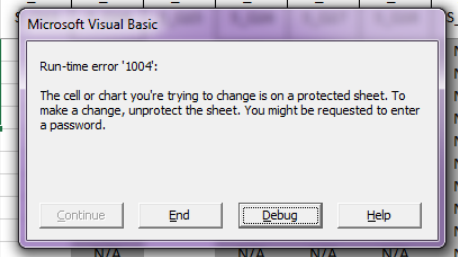
Population of PRO Data Collection Template (cont.)

- Paste data into contiguous cells that do not include a greyed out “N/A”
  - You can paste in several rows and columns of data at a time as long as they are:
    - Contiguous, do not overlap with the greyed out cells with “N/A”
      - For example, in a row with “Hip_Replacement”, “Pre-op”, “HOOS Jr”, and “VR-12” selected, you can paste data into columns E – S at one time, but for HOOS Jr questions (columns Z, AE, AH, AJ, AQ, and AS) you can only paste in column by column. You can, however, still paste in several rows at a time.
      - If you paste over the “N/A” cells, the pasting will be rejected and you will get an “error” message.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	CW
1	P_TYPE	TODC	PS_PROM	G_PROM	PROVID	HICN	DOB	COLLECTIO N_DT	COLLECTI ON_MD	RESPOND ER	RACE	ETHNICIT Y	LITERACY	BMI	HEIGHT	WEIGHT	NARCOTI C_USE	OTHER_J OINT_PAI N	BACK_PA IN	ADMSN_ DT	PROC_DT	CJR_HOO S_Q1	CJR_HOO S_Q2	CJR_HOO S_Q3	CJR_HOO S_Q4	CJR_HOO S_Q5		
2	Hip_Replacement	Pre-op	HOOS Jr	VR-12	123456	1234567890A	01/01/1940	04/01/2016	0	0	0	0	0	20	160	60	0	0	0	N/A	N/A	N/A	N/A	N/A	N/A	0	0
3	Hip_Replacement	Pre-op	HOOS Jr	VR-12	234567	1234567890B	01/02/1941	04/02/2016	1	0	1	0	1	21	170	70	0	1	1	N/A	N/A	N/A	N/A	N/A	N/A	1	19
4	Hip_Replacement	Pre-op	HOOS Jr	VR-12	345678	1234567890C	01/03/1942	04/03/2016	2	1	2	1	2	22	180	80	1	2	2	N/A	N/A	N/A	N/A	N/A	N/A	2	19
5	Hip_Replacement	Pre-op	HOOS Jr	VR-12	456789	1234567890D	01/04/1943	04/04/2016	0	1	3	1	3	23	190	90	1	3	3	N/A	N/A	N/A	N/A	N/A	N/A	3	19
6	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global							N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A	N/A	N/A		20
7	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global							N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A	N/A	N/A		20
8	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global							N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A	N/A	N/A		20
9	Hip_Replacement	Post-op	HOOS Jr	PROMIS-Global							N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A	N/A	N/A		20
10	Knee_Replacement	Pre-op	KOOS Jr	VR-12																N/A	N/A	N/A	N/A	N/A	N/A	N/A	30
11	Knee_Replacement	Pre-op	KOOS Jr	VR-12																N/A	N/A	N/A	N/A	N/A	N/A	N/A	30
12	Knee_Replacement	Pre-op	KOOS Jr	VR-12																N/A	N/A	N/A	N/A	N/A	N/A	N/A	30
13	Knee_Replacement	Pre-op	KOOS Jr	VR-12																N/A	N/A	N/A	N/A	N/A	N/A	N/A	30

...

	A	B	C	D	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN
1	P_TYPE	TODC	PS_PROM	G_PROM	CJR_HOO S_Q4	CJR_HOO S_Q5	CJR_HOO S_Q6	CJR_HOO S_Q7	CJR_HOO S_Q8	CJR_HOO S_Q9	CJR_HOO S_Q10	CJR_HOO S_Q11	CJR_HOO S_Q12	CJR_HOO	CJR_HOO	CJR_HOO	CJR_HOO	CJR_HOO	CJR_HOO	CJR_HOO S_Q19
5	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
6	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
7	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
8	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
9	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
10	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
11	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
12	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
13	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A
14	Hip_Replacement	Pre-op	HOOS Jr	VR-12	N/A		N/A	N/A	N/A	N/A		N/A	N/A							N/A



Test File Submission Process

- Test file submission is not a requirement for the CJR voluntary reporting of PRO and risk variable successful submission criteria. The process is a recommendation that will allow hospitals to become familiar with the submission process.
- When your test file has been downloaded by the "Yale – CORE" group in PY 1, you will receive a confirmation message letting you know that your file has been downloaded.
  - If your file does not meet the requirement, such as you have not used the most current version of the PRO Data Collection Template or did not attach a file, you will receive a message stating that submission was incomplete.
  - If you submit the test file with column CW showing all green (that is, there are no missing or invalid data cells), then you should have no issues with the final data submission.
- If there is an error in your test file, you can resubmit by following the process you followed when you first submitted your test file. To flag that this test file is an updated file, you should update the test file name to reflect that it is an updated version (e.g., v2.0).
  - For example, your test file name can look like this: Test File-Provider ID 12345A_09.28.2016_v2.0.
  - In the text block area of the "Compose message" tab in your MAILBOX on *QualityNet*, you can also let us know in your message that you have updated your test file.

Final PRO Data Collection Template Submission Process

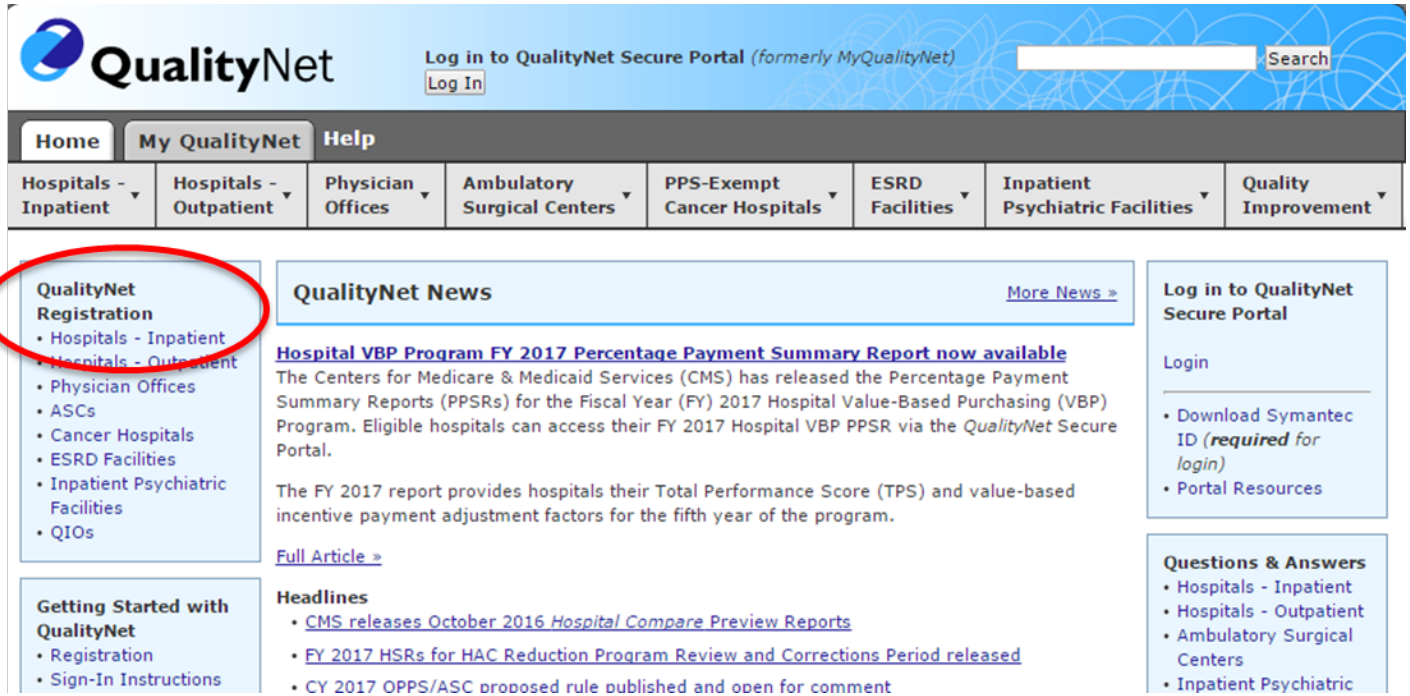
- CMS recommends that hospitals submit all final and completed PRO Data Collection Template in one transfer or upload onto QualityNet *before* the October 31st deadline for PY 1 of the CJR model.
  - We recommend the following naming convention for your final Template file: [hospital name]- Provider ID [provide ID or CCN]_MM.DD.YYYY_vX.X.
    - For example, this is how your final file name will look: Hospital for THA & TKA-Provider ID 12345A_09.28.2016_v1.0.
- If you need to make updates to the data, you can update your data and resubmit prior to the submission deadline.
  - To flag that the final file is an updated file, you should update the file name to reflect that it is an updated version (e.g., v2.0).
  - In the text block area of the "Compose message" tab in your MAILBOX on *QualityNet*, you can also let us know in your message that you have updated your test file.
- If you plan to update your files, please remember to include the version number of the file so that when an updated version is uploaded, we will be able to track this update, **otherwise we will use the last file that was uploaded to determine successful submission**. Thus, we recommend submitting the final and completed Template in one transfer so to limit confusion as to which version of the Template is the most current and up-to-date.

PRO Data Collection Template Submission Process for Multi-hospital Entities

- Each CJR PRO Data Collection Template file should only include the data for one hospital or provider having a provider ID or CCN in the CJR metropolitan statistical areas (MSAs).
- For example, if you are a part of a six hospital system, and only four of your hospitals are CJR participants (i.e., have provider IDs or CCNs in the CJR MSAs), and each of these four hospitals have their own provider ID or CCN, then you will need to submit four separate files for each of the hospitals.
  - Submission of these files can be done in one upload onto QualiytNet. Just remember, however, to distinguish the files by using the different provider ID (CCN) assigned to your hospitals in the file name. For example, for the recommended naming convention below, change the provider ID
    - Hospital for THA & TKA-Provider ID 12345A_09.28.2016_v1.0
    - Hospital for THA & TKA-Provider ID 13345A_09.28.2016_v1.0
    - Hospital for THA & TKA-Provider ID 14345A_09.28.2016_v1.0
    - Hospital for THA & TKA-Provider ID 15345A_09.28.2016_v1.0

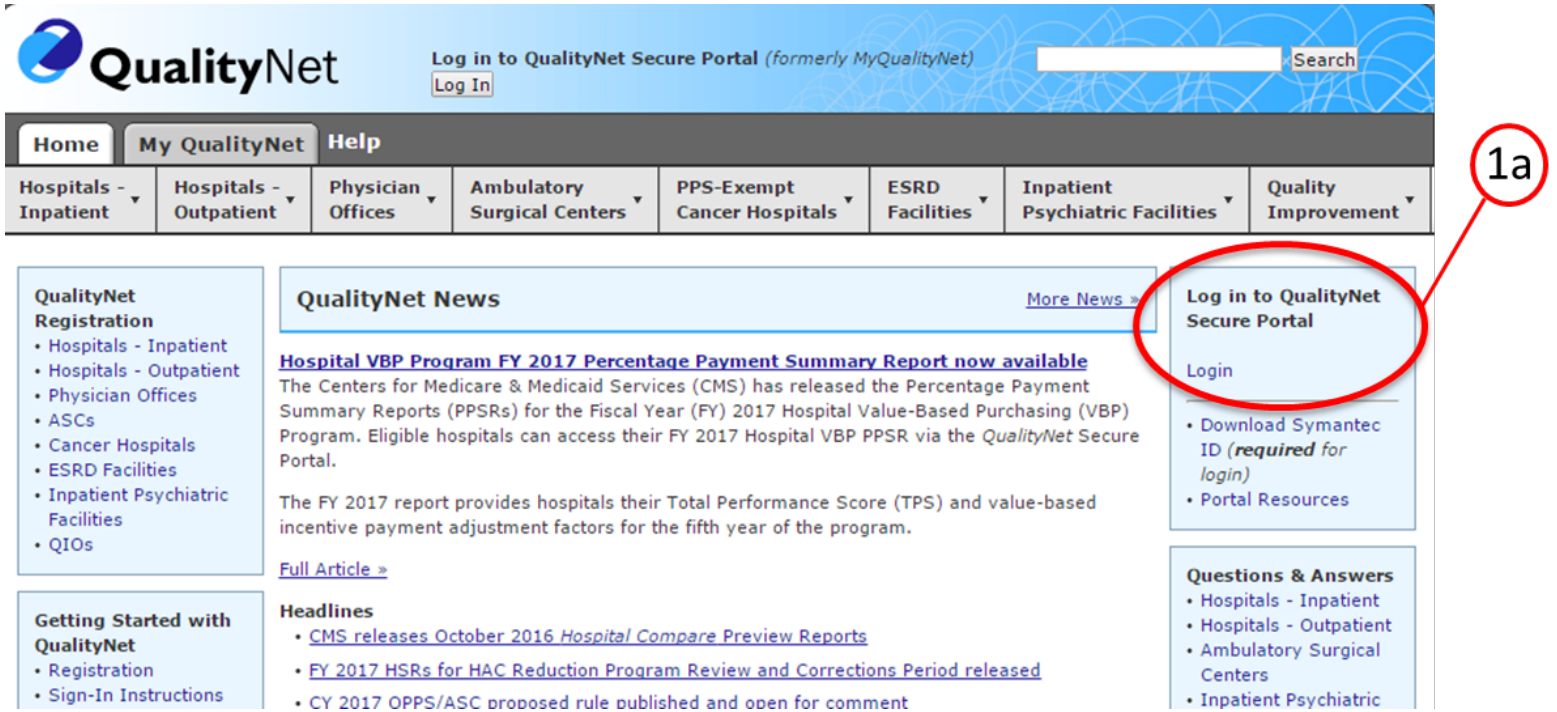
Data Submission Using *QualityNet*

- **Prerequisites to accessing *QualityNet***
  - Must have a valid *QualityNet* account
  - Must be enrolled in the *QualityNet Secure Portal*
- **You can register by visiting the site, navigate to "QualityNet Registration", select "Hospital – Inpatient", and follow the instructions**



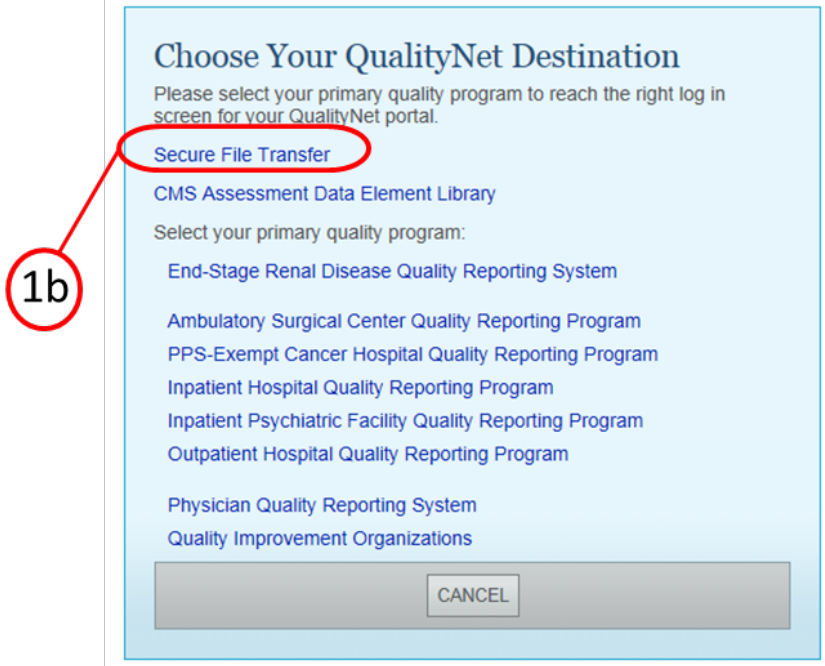
Data Submission Using *QualityNet* (cont.)

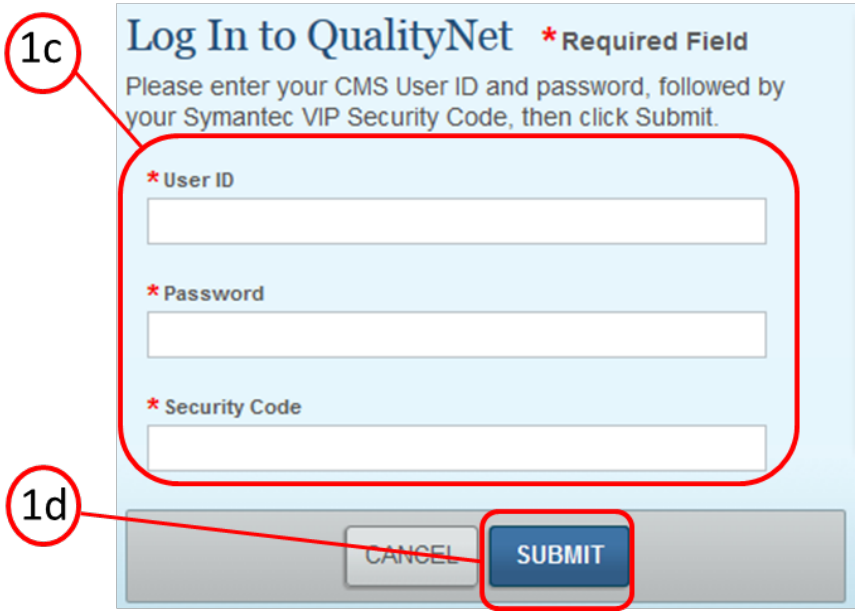
- **Steps to submit data**
  1. Login to *QualityNet* Secure Portal
     a. From the *QualityNet* home page select the "Login" link under the **Log in to QualityNet Secure Portal** heading



Data Submission Using *QualityNet* (cont.)

1. After selecting "Login"
   b. From the **Choose Your QualityNet Destination** landing page, select the "Secure File Transfer" link.
   c. Enter your User ID, Password, and Symantec VIP Access Security Code.
   d. Select the **[SUBMIT]** button. When the warning box appears, notifying that you have accessed a U.S. Government information system, scroll down and select the **[I Accept]** button.





Data Submission Using *QualityNet* (cont.)

2. Access the Secure File Transfer portal

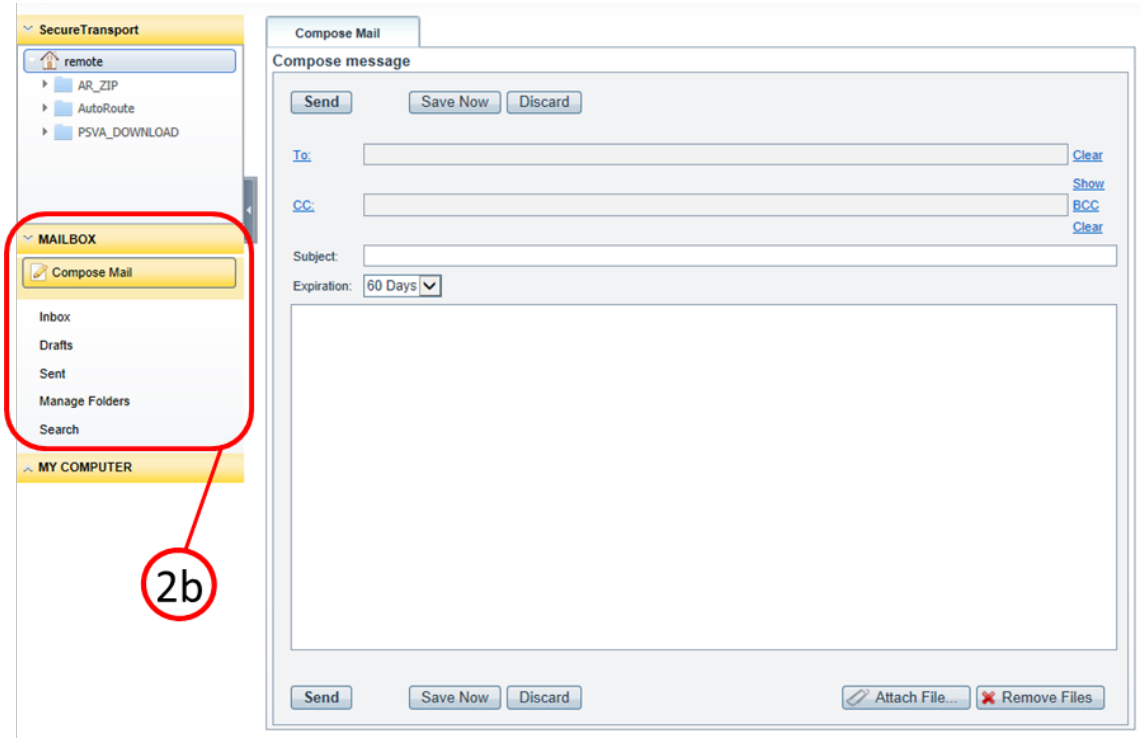
   a. From the QualityNet Secure Portal home page select the **Secure File Transfer** link at the top of the page to open the Secure File Transfer user interface screen.

Data Submission Using *QualityNet* (cont.)

2. Access the Secure File Transfer portal cont'd

   b. When the Secure File Transfer user interface screen appears, you will see the **MAILBOX** tab. The **MAILBOX** allows you to send and receive messages and attachments. The menu contains links to:

      i. Compose Mail function
      ii. View and manage received messages (inbox)
      iii. View and manage draft messages
      iv. View and manage sent messages
      v. Manage MAILBOX folders
      vi. Search mail function

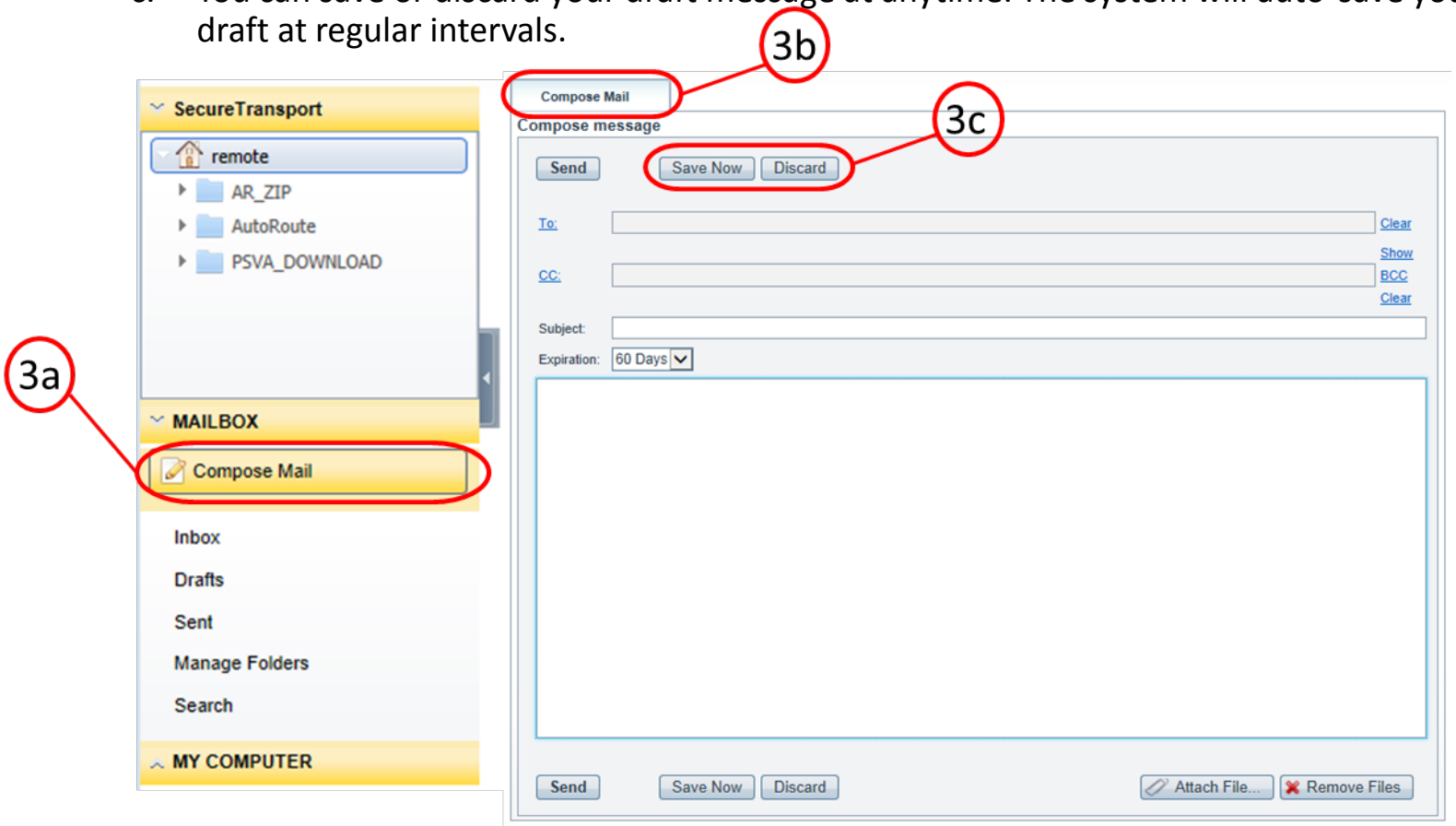


Note:
MAILBOX is not an email system. It is a method for securely sending and receiving files containing sensitive personally identifiable information (PII) and protected health information (PHI).

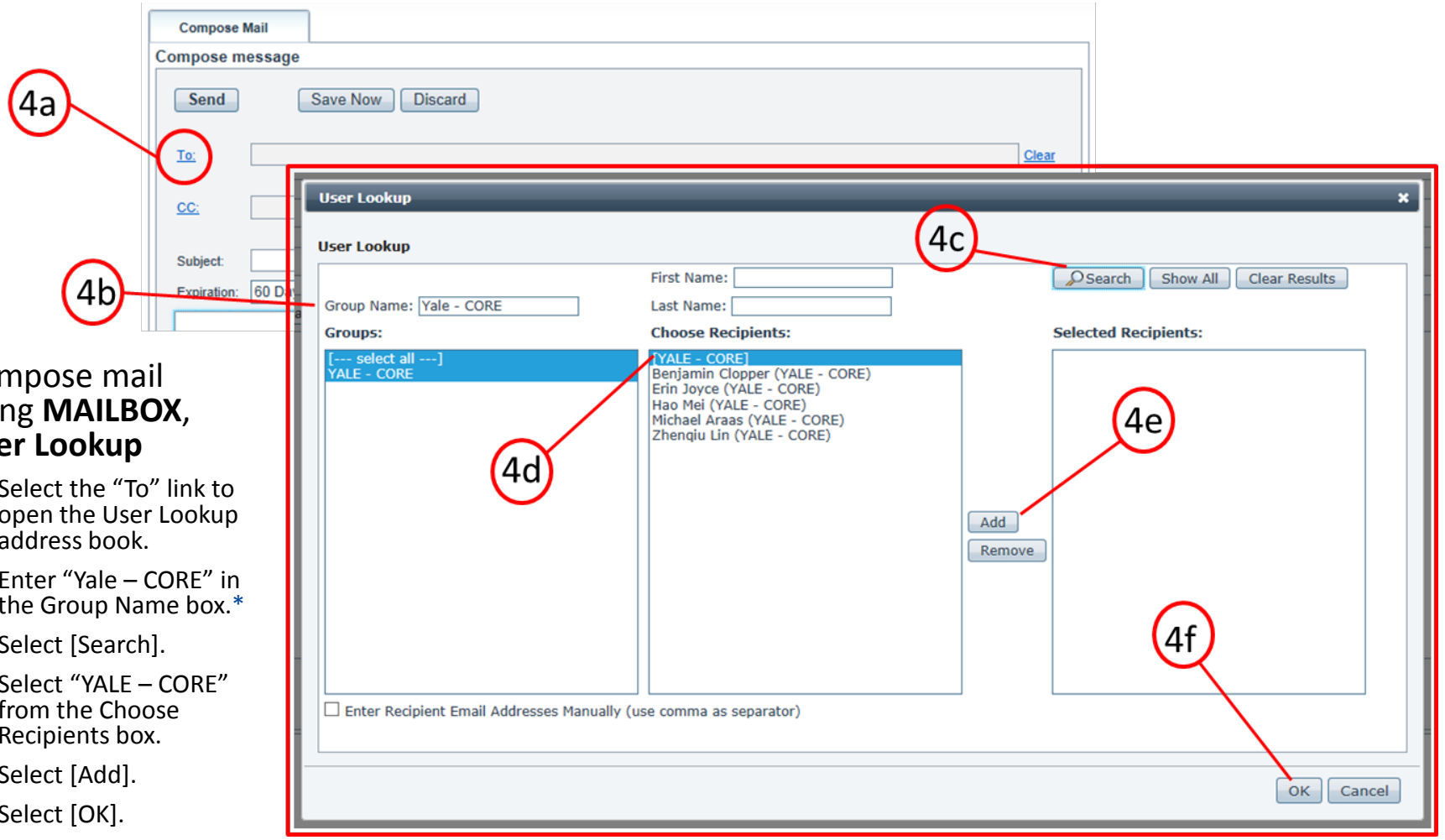
- Messages and files will be automatically deleted after a time frame specified in the message.
- Do not use **MAILBOX** for long term storage of messages or files.

Data Submission Using *QualityNet* (cont.)

3. Compose mail using MAILBOX
   a. Select **Compose Mail** to start a new message.
   b. A new "Compose Mail" tab will open in the work space.
   c. You can save or discard your draft message at anytime. The system will auto-save your draft at regular intervals.



Data Submission Using *QualityNet* (cont.)

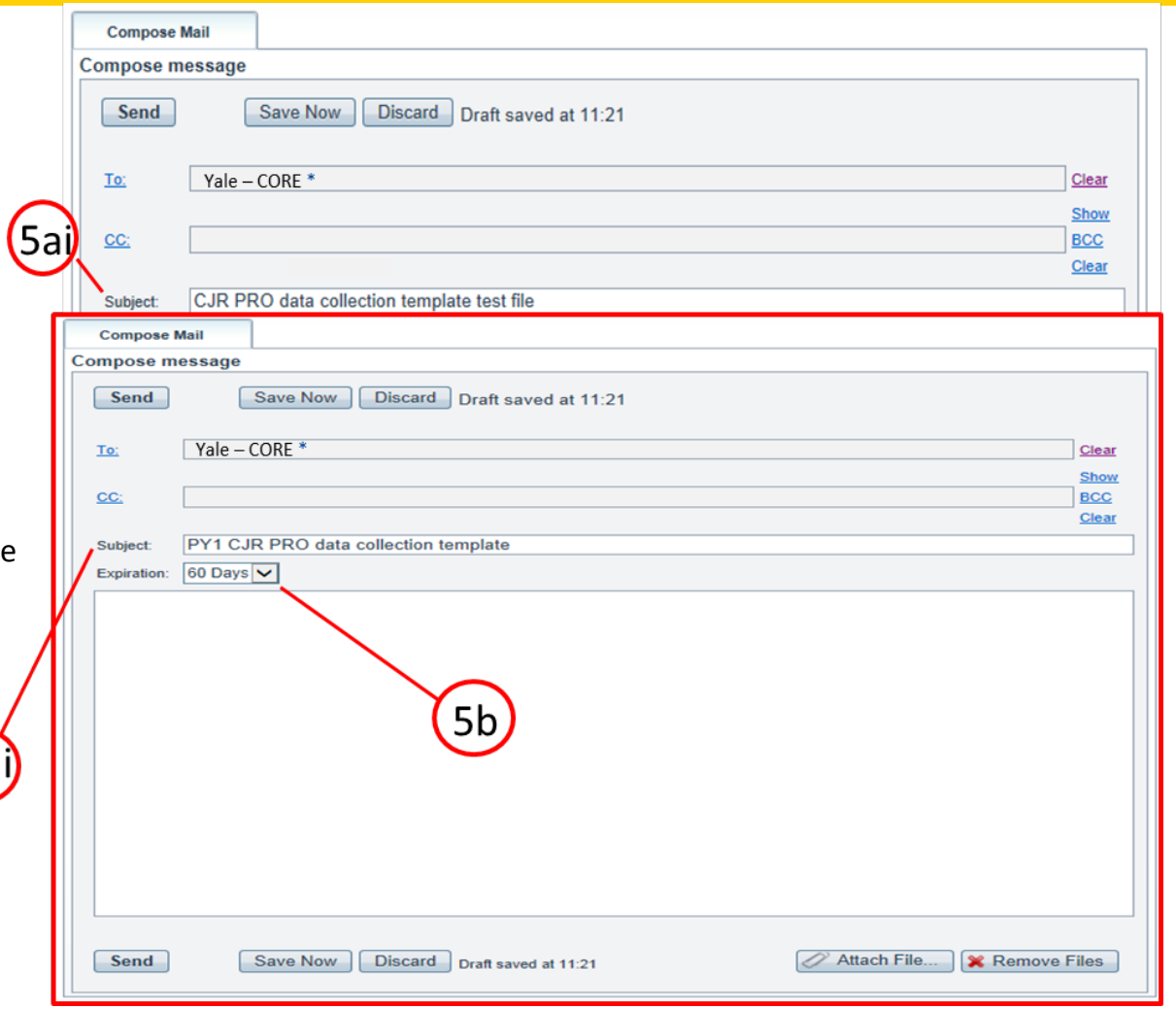


4. Compose mail using **MAILBOX**, **User Lookup**
   a. Select the "To" link to open the User Lookup address book.
   b. Enter "Yale – CORE" in the Group Name box.*
   c. Select [Search].
   d. Select "YALE – CORE" from the Choose Recipients box.
   e. Select [Add].
   f. Select [OK].

*There is a space between "Yale" and the dash; and the dash and "CORE".

Data Submission Using *QualityNet* (cont.)

5. Using **MAILBOX** to submit data.
   a. Enter the following for your message in the **Subject** line:
      i. For test file, enter: "CJR PRO data collection template test file" in the **Subject** line
      ii. For the final data file, enter: "PY1 CJR PRO data collection template" in the **Subject** line
      iii. **Do Not** include PII or PHI in the **Subject** line
   b. Select the 60 Days expiration option.



*The "To" line will display names of individuals from the Yale – CORE group.

Data Submission Using *QualityNet* (cont.)

5. Using **MAILBOX** to submit data cont'd

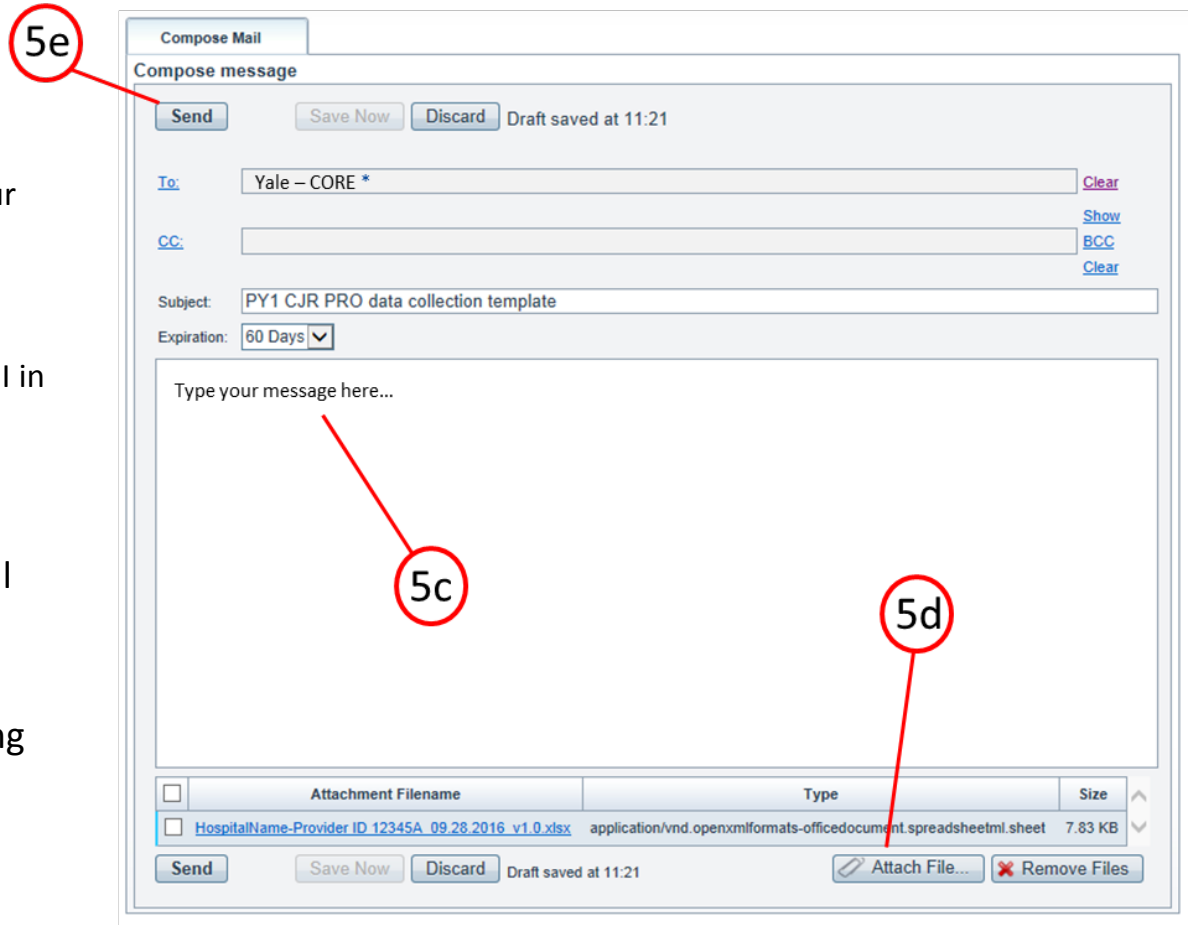
   c. Type your message in the text block area.

      i. We ask that you provide your hospital name, Provider ID and/or CMS Certification Number (CCN)

      ii. **Do Not** include any PII or PHI in the message

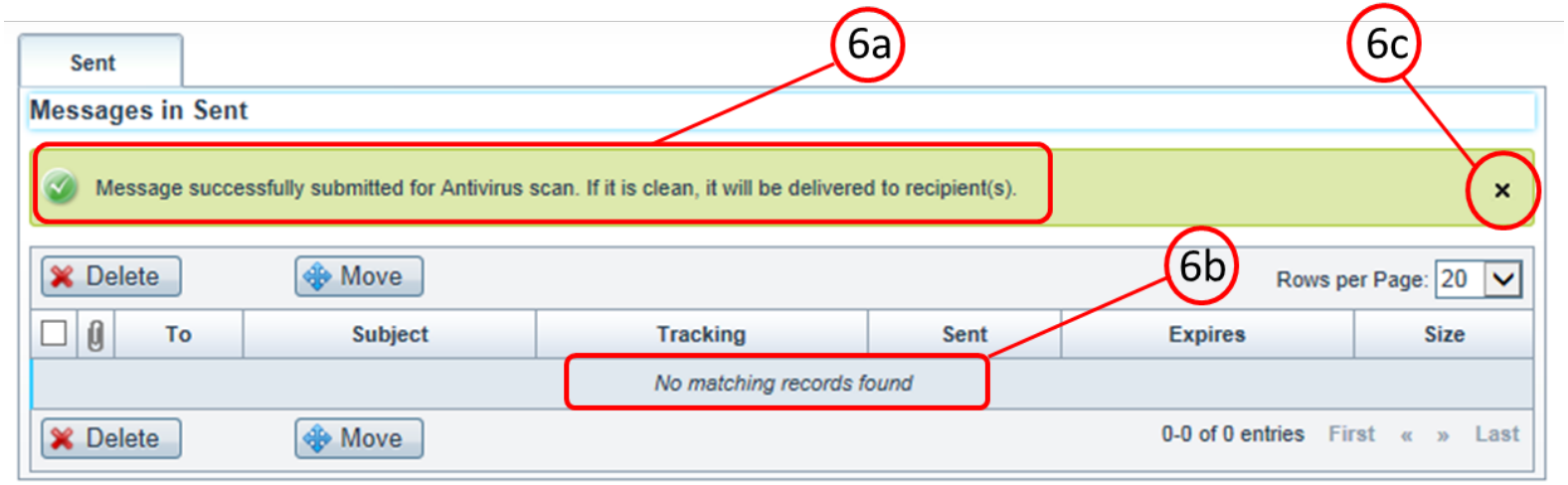
   d. Attach a data file by selecting **[Attach File]**. **Do Not** attach encrypted files. The system will perform a virus scan and encryption of attached files.

   e. Submit the data file by selecting **[Send]**.



Data Submission Using *QualityNet* (cont.)

6. Confirmation that message was sent
   a. After you select the **[Send]** button, a **Sent** message tab will open and a green message banner will display confirming your message has been submitted for a virus scan. If the file is clean, it will be delivered to the recipient(s).
   b. The message you sent will not show in the Sent folder immediately.
      i. The system scans attachments for viruses.
      ii. Speed of the virus scan and file transfer depends on the size of the file(s) and the number and size of other files being transferred at the same time.
      iii. When the scan is complete, the confirmation message will appear
   c. You can clear the confirmation message by selecting the x on the right side of the confirmation message.
   d. When your file is downloaded by the "Yale – CORE" group, you will receive a confirmation message letting you know that your file has been download.



PRO and Risk Variable Data Submission in PY 2-5

Submission of an External File to *QualityNet*

- In PYs 2-5, hospitals will continue to use *QualityNet* as the portal to submit their PRO and risk variable data. However, hospitals will need to collect their data using an External File (which is a csv file) and submit via the External File Upload Tool*.
- The External File is similar to the Template in that invalid inputs will be rejected. When invalid data are detected in the External File, the file will be rejected when uploaded.
- We recommend hospitals use the Template, which has the same unique data validation rule for each data variable as the External File, as a resource to ensure that valid inputs are reported in the File.
- Further information about the External File process will be provided as it becomes available.

*The name of the External File Upload Tool is yet to be determined.

PRO Data Collection Template Use in PY 2

- You can use the current PRO Data Collect Template (v1.3) to collect pre-operative data on PY 2 patients up until the end of PY 1 PRO data collection; that is, up until August 31, 2016.
  - For PY 2 data reporting, we will provide a PY 2 Template for hospitals to use as a reference, which will be available after November 1, 2016.
- In PY 2, however, hospitals will need to submit all data—that is, post-operative data on PY 1 patients and pre-operative data on PY 2 patients—using the External File.
- Therefore, any pre-operative data you collected on PY 2 patients using the Template will need to be transferred into the External File for submission in PY 2.
- We anticipate the External File process will be very similar but are currently unable to provide precise guidance on how data might be transferred between the current (v1.3) or the later PY 2 PRO Data Collect Template and the External File format. Further information about the External File submission process will be provided as it becomes available.

Guidance on Naming the External File

- We request that you use the following naming convention for your External File: **CJR_PYX_PROVID ID_MM_DD_YYYY_vX**
  - For “X” in “PYX”, provide the Performance Year you are submitting your data in (e.g., 2, 3, 4, or 5)
  - For “PROVID ID”, provider your hospital’s provider ID or CCN (6 digit)
  - For “MM_DD_YYYY”, provide the month, day, and year in which you are submitting your data
  - For “X” in “vX”, provide the version number of your file (e.g., v1, v2, v3, etc.)
- Your External File name can look like: CJR_PY2_12345A_10_19_16_v1.csv

Reporting Same PROMs and Risk Factors in PYs 2-5

Pre Operative Data Collection					Post Operative Data Collection				
VR-12		*OR*	PROMIS-Global		VR-12		*OR*	PROMIS-Global	
AND					*AND*				
HOOS/KOOS Jr.		*OR*	HOOS/KOOS subscales		HOOS/KOOS Jr.		*OR*	HOOS/KOOS subscales	
HOOS Jr	KOOS Jr.		HOOS subscales	KOOS subscales	HOOS Jr	KOOS Jr.		HOOS subscales	KOOS subscales
• Pain (2Qs) • Function, daily living (4Qs)	• Stiffness (1Q) • Pain (4Qs) • Function, daily living (2Qs)		• Pain (10Qs) • Function, daily living (17Qs)	• Stiffness (2Qs) • Pain (9Qs) • Function, daily living (17Qs)	• Pain (2Qs) • Function, daily living (4Qs)	• Stiffness (1Q) • Pain (4Qs) • Function, daily living (2Qs)		• Pain (10Qs) • Function, daily living (17Qs)	• Stiffness (2Qs) • Pain (9Qs) • Function, daily living (17Qs)
AND					*AND*				
Medicare Provider Number	Mode of Collection	Body mass index (BMI) or height in cm and weight in kg			Medicare Provider Number			Mode of Collection	
Medicare Health Insurance Claim (HIC) number	Person completing survey	Pre-operative Use of Narcotics			Medicare Health Insurance Claim (HIC) number			Person completing survey	
Date of Birth	Patient-reported Pain in Non-operative Lower Extremity Joint(s)	Patient-reported Health Literacy Screening (SILS2) questionnaire			Date of Birth				
Date of Collection	Patient-reported Back Pain (Oswestry Index question)	Race and Ethnicity			Date of Collection				

Vendor Submission Process on Behalf of Hospitals

- Starting in PY 2, vendors will be able to submit data on hospitals' behalf
  - Hospitals will need to contact a vendor to sign a contract.
  - If the vendor does NOT have a *QualityNet* account, the vendor will need to:
    - Obtain a Vendor ID if one does not exist. This can be obtained by contacting the *Inpatient Quality Reporting Support Contractor Lead, Candace Jackson at* candace.jackson@area-m.hcqis.org
    - Create a Security Administrator (SA) account
      - *Registration instructions/process can be found on the **QualityNet Registration** section of the QualityNet website at: http://www.qualitynet.org.*
      - With a Vendor ID, the vendor can have up to two SA accounts.
    - Once a SA account is created, the vendor can assign the **External Files Upload*** role to its staff member(s).
      - The staff member(s) can then log into *QualityNet*, create a basic user account under the vendor's *QualityNet* group, and submit the external file through the External Files Upload application.
  - If the vendor HAS a *QualityNet* SA account, the vendor will need to:
    - Assign its staff member(s) the **External Files Upload*** role
    - Once this role is assigned, the staff member(s) can log into *QualityNet* and submit the external file through the External Files Upload application.

*The **External Files Upload** role is a new role that will not be available until March 2017. An updated HQR Online Help Guide, with details on this new role as well as the External Files Upload application, will be available in 2017 on the *QualityNet* Secure Portal (under: "Help" > "Hospital Quality Reporting") for download.

Protocol for Vendors when Submitting External File

- Each External File should only include the data for one hospital or provider.
- For example, if you have surgeons from the same hospital who all have the same provider ID or CCN, you will need to consolidate the data for these surgeons into one file.
  - We request vendors use the naming convention for the External File as outlined in slide #52 of this Office Hours webinar; failure to use the provided naming convention may result in the submission not being attributed to the correct hospital. (CJR participants are hospitals or providers with provider IDs or CCNs in the CJR MSAs.)
- If the surgeon has a provider ID or CCN that is different from the hospital they are performing surgeries in, you must submit separate files for each of your surgeons and note their provider IDs or CCNs in the file name you submit.
  - Please note: only surgeons with provider IDs or CCNs in the CJR MSAs are considered CJR participants.
  - Again, we request that vendors use the naming convention for the External File as outlined in slide #52 of this Office Hours webinar.

Open Q&A

If we were unable to get to your Qs during this session, please send your Qs to the CJR Participant Hospital Support team at: CJRSupport@cms.hhs.gov.