

Sample Data Flow Diagram: Annotations

- 1. QE Medicare Data (1a) and claims data from other private sources (1b, 1c, etc.) are combined and stored within the data aggregator's secure environment.
- 2. The data are aggregated, normalized, de-identified, and made ready for analysis. Example aggregators could be the lead entity (QE), a vendor, or a CSP.
- 3. The data are kept within the data aggregator's data center to prepare and calculate the measures.
- 4. These de-identified analyses and reports are available for the lead entity to review.
- 5. The lead entity works to finalize and submit its Phase 3 application evidence and receives Phase 3 approval from CMS. *Step 5 (evidence submission and approval process) is only required once prior to the lead entity's first round of public reporting. Prior to additional rounds of public reporting, the lead entity communicates changes to measures and reports via the QECP ongoing program administration "reporting changes" process.*
- 6. The lead entity prepares to distribute approved confidential reports to practices and/or providers.
- 7. Reports are distributed to practices and/or providers.
- 8. Providers and/or practices review the reports.
 - a. Requests for data or measure correction are submitted to the lead entity. The lead entity will review all requests and may call on the data aggregator for supporting information from the claims database.
 - b. If no requests for data or measure correction are received, then reports can be prepared for public consumption.
- 9. Reports are posted for public viewing.