

TIP SHEET

Monitoring Submission of Inpatient Population & Sampling Data and Inpatient Clinical Data

(PPS Hospitals Only)

Submission of Population and Sampling data and inpatient clinical data to the QIO Clinical Data Warehouse can be accomplished by either a vendor or the hospital. Hospital staff should monitor the accuracy of this data well before each of the submission deadlines, *even if it is submitted by their vendor*. The key goals to accomplish are as follows:

- I. To have the Initial Patient Population for each topic and strata as accurate as possible
- II. To accurately calculate sample sizes according to *Specifications Manual* guidelines
- III. To assure that the number of cases accepted into the QIO Clinical Data Warehouse for each topic and strata matches the submitted sample size for that topic or strata

*Medicare Patients
+ Non-Medicare Patients
= Initial Patient Population*

Tip: *If your vendor enters your Population & Sampling data, print a copy of this data after the numbers have been entered. If your hospital enters its own numbers, print a copy of the blank grid to use as a worksheet while researching your patient numbers.*

Tip: *Use the Medicare claims number from the Hospital Reporting PPR as a tool to evaluate whether or not the number in your Medicare patients subgroup appears to be reasonably accurate.*

I. Accurate Initial Patient Populations

1. Print a copy of your Hospital Provider Participation Report (PPR).

- a. Log in to QNet
- b. Go to "Run Reports"
- c. Under the report category drop down tab, select "Hospital Reporting Annual Payment Update Reports," click on the link for "Inpatient" then click "Go."
- d. Click on "Hospital Reporting-Provider Participation Report".
- e. Click on your hospital name and the desired "year" or "quarter."
- f. Click on "Request Report."
- g. Click on the tab, "View Reports," near the top of the window.
- h. When the report status is "complete," click on the magnifying glass icon to open the file.
- i. This report will have one page for each quarter of the calendar year if you select "year". If you select "quarter," one page will be present. Print the page for the quarter you are evaluating.

2. Print a copy of your Population & Sampling (P&S) data.

- a. Click on the link near the top of the window that says, "Back to My Tasks." (Note: This will take you to the first page you saw after logging in to QNet.)
- b. Under the "Manage Measures, Hospital-Inpatient" section, click on the link for "View / Edit Population & Sampling."
- c. Enter your hospital's CCN (6-digit CMS Certification Number) and then click on "Find."
- d. Click on the appropriate reporting quarter and "Continue."
- e. Click "Print."

3. Evaluate the size of your Medicare "sub-groups."

- a. For each topic and strata, compare the "Total Medicare Claims" listed on the Hospital Reporting Provider Participation Report against the "Total Medicare Initial Inpatient Population" that has been or will be entered into the Population & Sampling grid.
- b. Make sure that the "Total Medicare Initial Inpatient Population" for each topic and strata in the P&S grid is the same as or larger than the corresponding "Total Medicare Claims." (See definitions in note at left)

TIP SHEET

Note: The definitions for these Medicare counts differ:

- **Total Medicare Initial Inpatient Population** (entered into the P&S grid) are those cases where Medicare was any payor source and billing may not have been completed yet.
- **Total Medicare claims** (on the Hospital Reporting PPR) are those cases where Medicare was a primary payor and claims have been finalized.

- c. If your “Total Medicare Initial Inpatient Population” is the same as or larger than the “Total Medicare Claims,” nothing more needs to be done.
- d. If your “Total Medicare Initial Inpatient Population” is less than the “Total Medicare Claims,” you need to investigate this further to determine if you may be missing a significant number of Medicare cases that will impact your total inpatient populations. Verify that you have followed the *Specifications Manual* guidelines for identifying your initial inpatient populations. On occasion, coding/billing corrections may also account for a lower “Total Medicare Initial Inpatient Population.”
- e. If you are unable to locate the missing Medicare cases, need to obtain patient-level information on the billed cases, or are not sure if a difference in numbers is significant, check with AQAF-QIO Performance Improvement Advisor.
- f. Maintain documentation explaining any discrepancies that cannot be corrected in case it is needed for future APU reconsideration requests.

4. Compare the size of your “Total Initial Inpatient Populations” (Medicare plus non-Medicare) against the “Total Medicare Claims.”

- a. Verify that the “Total Initial Inpatient Population” for each topic and strata is the same as or larger than the corresponding “Total Medicare Claims.”
- b. If any “Total Initial Inpatient Population” is smaller than the “Total Medicare Claims,” you will most likely need to identify additional cases (Medicare or non-Medicare) prior to determining and/or evaluating sampling sizes.
- c. If you need further assistance in evaluating patient populations and/or locating additional patients, email AQAF-QIO Performance Improvement Advisor. **DON’T wait until you are up against the deadline to do this!**

Tip: Sampling tables are located near the beginning of each topic’s Measure Information Form in the appropriate version of the *Specifications Manual*:

www.qualitynet.org
(Hospitals-Inpatient tab, Specifications Manual link)

AMI: Section 2.1

HF: Section 2.2

PN: Section 2.3

SCIP: Section 2.4

VTE: Section 2.7

STK: Section 2.8

ED/IMM: Section 2.9

ED: Section 2.10

II. Follow the Sampling Guidelines

1. Verify the sample size for each topic and strata.

- a. Review each topic and strata “Total Initial Inpatient Populations” and “Sample Sizes” on your Population & Sampling report and compare the numbers against the sampling tables in the *Specifications Manual*.
- b. If you indicated “Not Sampled” for the sampling frequency, you should have the same total sample size as the “Total Initial Inpatient Population” for that topic or strata. (You are abstracting 100% of your cases for the topic/strata.)
- c. If you indicated “Quarterly” for the sampling frequency, you need to apply the appropriate quarterly sampling table to the “Total Initial Inpatient Population” to make sure the sample size you entered is at least the required number for that topic or strata.
- d. If you indicated “Monthly” for the sampling frequency, you need to apply the appropriate monthly sampling table to the “Total Initial Inpatient Population” for each of the three months to make sure the sample size you entered for each month is at least the required number for that topic or strata.
- e. If you indicated “N/A” for the sampling frequency, your “Total Initial Inpatient Population” for that topic was five cases or less, and you will not be abstracting and submitting the clinical data for that topic.

TIP SHEET

2. Some hospitals choose to sample more cases than the required minimum sample size.

- a. This is an acceptable practice, but may affect your “ideal” data submission. (See Section III).

III. Adequate Data Submission

1. After you have submitted your clinical inpatient data, run a new copy of your Hospital Reporting Provider Participation Report.

2. Compare the “Total Cases Accepted to Date” against the “Total Sample Size.”

- a. Ideally, you should have at least the same number of cases accepted into the warehouse as you indicated your sample size would be.
- b. If you are monitoring your APU Dashboard report on QNet, be aware that submitting fewer cases than your sample size (even if you have oversampled) will reflect as “under submitted,” even if you have met the minimum requirements for Hospital Reporting Program.

3. Prior to the Population & Sampling data submission deadline, verify that you have entered a number \geq zero IN EVERY CELL in the Population & Sampling grid.

- a. Leaving any cell “blank will result in incomplete data submission and will jeopardize your hospital receiving its full Annual Payment Update!
- b. The last chance you have to modify your Population & Sampling numbers and your clinical data submission is before the data is “locked down” at midnight, Central Time, on the population and sampling submission deadline date!



Help

AQAF Performance Improvement Advisor

Maxine Starks

mstarks@alqio.sdps.org

(205) 970-1600 Ext. 3508



This material was originally prepared by FMQAI, the Medicare Quality Improvement Organization for Florida, and HSAG, the Medicare Quality Improvement Organization for California, and distributed by AQAF, the Medicare Quality Improvement Organization for Alabama, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. Contents do not necessarily reflect CMS policy. 10SOW-AL-C7-12-55