

Hospital Quality Alliance (HQA): Improving Care through Information

(previously referred to as the National Voluntary Hospital Reporting Initiative)

Reference Checklist

Hospital Participation Requirements

1. Hospital completes the **Pledge of Participation** form for the “Hospital Quality Alliance” and faxes it to the American Hospital Association (AHA). Any subsequent changes to this form requires either the submission of a new form, or changes made on the original form must be initialed and dated by the CEO/Administrator, and then faxed to the AHA. Participants signing up for the first time for the initiative should complete the new pledge form. Pledges completed on the previous form released by the AHA in the May 2, 2003 Quality Advisory remain in effect. If a QIO receives a pledge form directly, it must be faxed to AHA as soon as possible.

See the **HQA Timeline** for each reporting period and the **HQA Flowchart** of the overall process. If a hospital is using a vendor to transmit data to the QIO Clinical Warehouse, it is suggested that the hospital also provide the vendor with a copy of the pledge form.

For a hospital that converts from an Acute to a Critical Access Hospital (CAH), a new Pledge of Participation form needs to be completed; or the prior form can be updated with a change in the provider number by dating and initialing the change and resubmitting the updated pledge form to AHA. The CAH needs to determine if the discharge start date will remain the same, thereby retrieving discharges under both the acute and CAH provider number for public reporting. The CAH can also change their discharge start quarter and resubmit the pledge form to AHA so only the CAH discharges are included. The QIOs will be responsible for updating their tracking system for both acute and CAH numbers.

2. AHA will post names of pledged hospitals to **www.AHA.org** and forward a copy of the pledge forms to the QIOs for the initiative.
3. QIO is responsible for tracking this information into their database, which will be used to trigger the release of data for hospital public reporting.
4. Hospital identifies its QualityNet Exchange Administrator who registers for access to the QualityNet Exchange secure site at **www.qnetexchange.org** through its QIO (see **QualityNet Exchange Registration**). A hospital **is required** to register for QualityNet Exchange if it is participating in this national effort, even if it is using a vendor to transmit data. This requirement is necessary to access the preview data for the “Hospital Quality Alliance”.
5. Hospital collects core measure data for all payers using one of several mechanisms:
 - Joint Commission on Accreditation of Healthcare Organizations (JCAHO) ORYX[®] Core Measure Performance Measurement System (PMS)
 - CMS Abstraction & Reporting Tool (CART)
 - Other third-party vendor who has met the Measurement Specifications for data transmission (XML file format) into QualityNet Exchange

Hospital Quality Alliance (HQA): Improving Care through Information

(previously referred to as the National Voluntary Hospital Reporting Initiative)

Reference Checklist

Hospital Participation Requirements

6. If using a PMS/vendor to transmit data, the hospital completes the **Hospital Authorization for Vendor Transmission to QIO Clinical Warehouse** form authorizing the vendor to transmit their data to the QIO Clinical Warehouse via QualityNet Exchange and submits the form to the QIO. It is suggested that hospitals provide the vendor with a copy of the authorization form. This form is also available by contacting your QIO. QIO enters appropriate information into their tracking system, which is used for verification when the PMS/vendor submits data to QualityNet Exchange.
7. Hospital submits data for all payers to the QIO Clinical Warehouse via **www.qnetexchange.org** through a PMS/vendor or directly (see Submission of Data section on page 3 and the **HQA Timeline**).
8. The Clinical Data Abstraction Center (CDAC) requests copies of medical records from the hospital for chart audit validation purposes and the hospital sends copies of the requested charts to the CDAC (see Chart Audit Validation below).
9. Hospitals will be given 30 days to preview the data to be included on the CMS Web site, prior to the data being made public. See the **HQA Timeline**. The data will be available on QualityNet Exchange for the hospital users designated with the QIO Clinical Warehouse Feedback Report role. Hospitals will be notified via E-mail that the data are ready to be previewed.
10. Hospitals may decide to withhold or withdraw at any time during the preview period. If a hospital wishes to withdraw or withhold, it must send the **Withdrawal of Participation** or the **Request for Withholding Data From Pubic Reporting** form to their QIO contact for the "Hospital Quality Alliance". See the **HQA Timeline** for. Refer to QualityNet Exchange for **QIO Contact list**. The American Hospital Association (AHA), Federation of American Hospitals (FAH) and Association of American Medical Colleges (AAMC) will also be notified of the withdrawal received by the QIO and may have follow-up contact with the facility. If a hospital is using a vendor to transmit data to the QIO Clinical Warehouse, it is suggested that they also provide the vendor with a copy of the withdrawal form.
11. Hospitals may contact their QIO for questions relating to their data.
12. Data will be reported on **Hospital Compare**, the CMS site for Medicare beneficiaries and the general public (anticipated in 2005).

QualityNet Exchange Registration & Administrator Role

1. Hospital QualityNet Exchange Administrator registers for QualityNet Exchange by following the steps on **www.qnetexchange.org**, which include contacting your QIO QualityNet Exchange Administrator for the registration form.
2. Hospital QualityNet Exchange Administrator then:
 - validates which other users should have access to the QualityNet Exchange site;
 - validates what type of access each user should have;
 - completes and/or approves each user's online registration;
 - terminates and revokes QualityNet Exchange user accounts;
 - monitors QualityNet Exchange usage at your organization to maintain proper security and confidentiality measures; and serves as the main point of contact at your organization for information regarding QualityNet Exchange.

Hospital Quality Alliance (HQA): Improving Care through Information

(previously referred to as the National Voluntary Hospital Reporting Initiative)

Reference Checklist

Submission of Data

QualityNet Exchange is the only CMS-approved method for the electronic transmission of private data between healthcare providers and QIOs. The data stored in the QIO Clinical Warehouse is considered QIO data. All files and data exchanged with a QIO via QualityNet Exchange are encrypted during transmission, and are stored in an encrypted format until they are downloaded. The QualityNet Exchange website meets and exceeds all current Health Insurance Portability and Accountability Act (HIPAA) requirements, and has passed rigorous security testing by a third-party security company.

Data submitted to QualityNet Exchange is protected as noted above, and is not released for public reporting unless the hospital has completed the Pledge of Participation form and the QIO has entered the information into their tracking system. The publicly reported data is only at the hospital level and is not patient-specific; therefore, patient confidentiality/privacy is maintained and all HIPAA requirements are met.

1. Data transmission requirements for submission to QualityNet Exchange:
 - Data can be transmitted into QualityNet Exchange at any time. However, only discharges submitted according to the **HQA Timeline** will be included in the data that is publicly reported for “Hospital Quality Alliance”.
 - For those hospitals choosing to submit data, CMS expects data to be submitted and “accepted” (i.e. passing all edits) to the QIO Clinical Warehouse no later than **15 calendar days after** the 4th month following the end of each quarter. This timeline allows 15 calendar days beyond JCAHO submission requirements. See **Data Transmission Deadlines**.
 - Cases in the QIO Clinical Warehouse can continue to be updated until the QIO Clinical Warehouse submission deadline each quarter. Cases in that quarter, whether selected for validation or not will be “frozen” (no further updates will be accepted) at that time.
2. To upload data, log into the secure QualityNet Exchange website at **www.qnetexchange.org** (hospital or PMS/vendor submission):
 - Click on the QIO Clinical Warehouse Data Upload link.
 - Identify whether you want to upload specific files or a directory.
 - Select the directory and folder where the files are located and select OK.
 - Highlight the files or directory you want to upload.
 - Click on the Open or OK button.

Chart Audit Validation

1. If hospital submits at least six discharges (across all topics) in a quarter, CMS will select a random sample of five discharges for chart audit validation.
2. CDAC requests copies of medical records for selected discharges from the hospital.
3. Hospital sends medical records for five selected discharges to the CDAC. Any record not submitted within the required timeframe will affect the overall reliability score for the hospital.

Hospital Quality Alliance (HQA): Improving Care through Information

(previously referred to as the National Voluntary Hospital Reporting Initiative)

Reference Checklist

Chart Audit Validation (continued)

4. CDACs abstract the measures submitted by the hospital and a comparison will be made for selected elements. Validation information is available on the QualityNet Exchange Web site. Results and educational feedback on the abstraction and an overall agreement rate will be provided to the hospital and their QIO.
5. Validation results:
 - Hospital passes validation if they achieve 80.0% or greater agreement rate across the selected elements on the five discharges. Data in the warehouse for that quarter is flagged as “validated”.
 - Hospital fails validation if they received less than 80.0% agreement rate across the five discharges. Data for that quarter is flagged as “unvalidated”. Future measure comparison reports will be available on QualityNet Exchange to query by “All cases” or “Validated cases only”.
6. QIO offers educational assistance and/or additional training based on hospital validation results.
7. Hospitals that fall below an 80.0% agreement rate on their validation results will have the ability to appeal the CDAC findings based on the copy of the medical record submitted. An appeal form is included with the validation reports that will be posted in the QualityNet Exchange in-box of the hospital users with the QIO Clinical Warehouse Feedback Reports role. It is also available on the QualityNet Exchange Web site. Refer to the [Hospital Process flowchart for validation](#).

Hospital Quality Alliance (HQA): Improving Care through Information

(previously referred to as the National Voluntary Hospital Reporting Initiative)

Reference Checklist

Resources

www.aamc.org (Association of American Medical Colleges)

- A Word from the President: Bridging the Quality Chasm
- Quality Issue Hub

www.aha.org (American Hospital Association)

- Quality Advisories

www.ahcpr.gov (Agency for Healthcare Research and Quality)

- Hospital Consumer Assessment of Health Plans (H-CAHPS) - Measuring Patient's Hospital Care Experiences: Development of a National Standard

www.cms.hhs.gov (CMS website for Professionals, Governments, Consumers, and Public Affairs)

- Hospital Quality Initiative Overview
- Frequently Asked Questions
- Hospital Quality Alliance Fact Sheet
- CMS Hospital 3-State Pilot Project Fact Sheet
- H-CAHPS Patient Experience of Care Survey Fact Sheet
- National Voluntary Reporting, "A Public Resource on Hospital Performance"

www.fahs.com (Federation of American Hospitals)

- Quality Advisories

www.medicare.gov (CMS website for consumers)

- Cost and benefit information for consumers
- Hospital Compare (future link for public reporting)

www.medqic.org (CMS Medicare Quality Improvement Clearinghouse)

- QIO Directory
- Quality improvement resources and strategies

www.qnetexchange.org (QualityNet Exchange – a public resource for Hospital Data Collection and CART; a secure site for data transmission)

- Hospital Quality Initiative (Public Reporting)
- QIO Contact for "Hospital Quality Alliance"
- CMS Abstraction & Reporting Tool (CART) software and User Guides
- Data transmission requirements
- Data Validation
- Quality of Care Measures, Data Abstraction Definitions, Analytic Flowcharts
- Recorded Training Sessions (CART, XML Case Checker, QualityNet Exchange, & Abstraction Definitions)
- Questions and Answers (QUEST)