



**2009 ORYX Performance Measure Reporting Requirements for Hospitals
and
Guidelines for Measure Selections**

The Joint Commission ORYX performance measure reporting requirements for 2009 remain unchanged from 2008. Joint Commission accredited hospitals are required to collect and submit data to The Joint Commission on a minimum of **four** core measure sets or a combination of applicable core measure sets and non-core measures as described in the table below. Because of the limited number of non-core measures available for selection through Joint Commission listed vendors, and the absence of available benchmarks, the non-core measure requirement remains capped at nine measures.

2009 Hospital ORYX Requirements

Applicable Core Measure Sets	Core Measure Sets Required	Non-Core Measures Required
4 Core Measure Sets	4 Core Measure Sets	None (Data not accepted)
3 Core Measure Sets	3 Core Measure Sets	3 Non-Core Measures
2 Core Measure Sets	2 Core Measure Sets	6 Non-Core Measures
1 Core Measure Set	1 Core Measure Set	9 Non-Core Measures
No Core Measure Sets	No Core Measure	Sets 9 Non-Core Measures



Guidelines for Measure Set Selections

Measure Sets Available for Selection

Hospitals may choose their core measure sets from among those currently available. No specific measure sets are currently mandated by the Joint Commission for data collection in 2009. Measure sets currently available include:

- Acute Myocardial Infarction (AMI)
- Heart Failure
- Pneumonia
- Pregnancy and Related Conditions
- Surgical Care Improvement Project
- Children's Asthma Care
- Hospital Outpatient Department
- Hospital Based Inpatient Psychiatric Services

Note:

- **Surgical Care Improvement Project**
SCIP-Inf-7 Colorectal Surgery Patients with Immediate Postoperative Normothermia -- Data collection and submission for this measure is not required, however, hospitals may elect to voluntarily collect and submit data to The Joint Commission for this measure.
- Detailed information on all available core measure sets with the exception of Hospital Outpatient Department can be found in the **Specifications Manual for National Hospital Quality Measures** available on The Joint Commission website at:

<http://www.jointcommission.org/PerformanceMeasurement/PerformanceMeasurement/Current+NHQM+Manual.htm>

- Detailed information on the Hospital Outpatient Department measures can be found in the **Specifications Manual for Hospital Outpatient Department Quality Measures** available on QualityNet at:

<http://www.qualitynet.org/dcs/ContentServer?cid=1196289981244&pageName=QnetPublic%2FPage%2FQnetTier2&c=Page>

A link to the Hospital Outpatient Department measures available on QualityNet also can be found by going to The Joint Commission website at:

<http://www.jointcommission.org/PerformanceMeasurement/PerformanceMeasurement/Hospital+Outpatient+Department+Core+Measure+Set.htm>

and clicking on **The Specifications Manual for Hospital Outpatient Department Quality Measures**.



Selecting Measure Sets

For purposes of meeting Joint Commission ORYX performance measure reporting requirements for 2009, hospital core measure set selections should be based primarily upon the patient populations served and the services provided by the hospital.

As national performance measurement initiatives continue to evolve under the “Hospital Quality Alliance (HQA): Improving Care through Information” initiative, the Deficit Reduction Act, and the expanded public reporting of hospital performance measure data on the Centers for Medicare and Medicaid Services (CMS) website, Hospital Compare, it may not be possible for hospitals to both select measure sets that fully satisfy Joint Commission ORYX expectations that the measure sets appropriately reflect patient populations served by the hospital and, at the same time, that are relevant to national requirements. In these situations, hospitals may make selections based, first, on national requirements and, secondarily, on patient populations served. The hospital may select and transmit data for additional core measure sets beyond the minimum required if it so desires.

If a hospital elects to collect and transmit measure data for more than the minimum four measures sets required for accreditation purposes, these data also will be displayed in the ORYX Performance Measure Report and used in the survey process (i.e., the Priority Focus Process), and they will be posted to Quality Check and used in The Joint Commission’s Strategic Surveillance System (S3).

Hospitals are required to collect and transmit data for all measures within its selected measure set(s) unless the hospital does not provide a service addressed by a measure(s) in the measure set (e.g., the hospital selects the AMI core measure set but does not perform percutaneous coronary interventions [PCI] and, thus, would not collect data on such a measure).

As new measure sets are introduced and endorsed by the National Quality Forum (NQF) and adopted by the Hospital Quality Alliance (HQA) and, where measures are common to and fully-aligned with CMS measures, those measure sets will become available for use by hospitals to meet Joint Commission ORYX requirements.

Also, as new measures are added to existing measure sets, once they successfully complete the same approval process described above, hospitals electing to use those measure sets will be required to collect and transmit data for those additional measures upon The Joint Commission’s announcement of an effective date for implementation.

Changing Measure Set(s)/Measure Selections

Except in those situations where the hospital no longer provides services to a particular patient population addressed by a measure set, the following basis will be used in consideration of a hospital’s request to change its selection of a core measure set(s):

- At least 12 months of data must have been previously received by The Joint Commission for the core measure set.

- A hospital may not replace a core measure set if its current 12-month rolling measure set composite score is less than the minimal acceptable level. The minimal acceptable level is the national average minus one standard deviation.
- The hospital should be prepared to justify the basis for measure set selection(s) to the surveyor(s) during the onsite survey.

Reporting Measure Set/Measure Selections

Accredited hospitals now can manage their ORYX core and non-core measure selections by going to their secure Joint Commission extranet site and accessing the **ORYX Management System (OMS)** application by selecting “ORYX Measure Selection” under **Performance Measurement (ORYX)**.

Accreditation Tools	
<p>Continuous Compliance Tools</p> <ul style="list-style-type: none"> ▶ Periodic Performance Review (PPR) ▶ e-Statement of Conditions ▶ Complaint Response ▶ Self-Report Sentinel Event ▶ Sentinel Event Activities ▶ E-dition 	<p>Application for Accreditation</p> <ul style="list-style-type: none"> ▶ Application ▶ Quality Check Service Profile ▶ Durable Medical Equipment, Prosthetics/Orthotics & Supplies (DMEPOS) Product Selection
<p>Reports</p> <ul style="list-style-type: none"> ▶ Accreditation Report ▶ Priority Focus Process ▶ Accreditation Quality Report ▶ ORYX Performance Measure Report ▶ Correspondence ▶ Sentinel Event Correspondence 	<p>Pre-Survey</p> <ul style="list-style-type: none"> ▶ Survey Agenda ▶ Survey Activity Guide
<p>Accreditation Contracts and Fees</p> <ul style="list-style-type: none"> ▶ Contracts ▶ Fee, Billing and Invoice Information 	<p>Post-Survey</p> <ul style="list-style-type: none"> ▶ Evidence of Standards Compliance ▶ Measure of Success ▶ Publicity Kit ▶ Survey Evaluations
<p>Quality Improvement Tools</p> <ul style="list-style-type: none"> ▶ Strategic Surveillance System 	<p>Performance Measurement (ORYX)</p> <ul style="list-style-type: none"> ▶ ORYX Measure Selection ← ▶ ORYX Performance Measure Report ▶ Documentation and Related Links



Hospitals also may submit core measure set and, as appropriate, non-core measure selections/changes as well as changes in vendor selections to The Joint Commission by downloading the appropriate measure selections form(s) available on The Joint Commission website at:

http://www.jointcommission.org/AccreditationPrograms/Hospitals/ORYX/selection_change_forms.htm

or by visiting their Joint Commission Connect extranet site and, under **Performance Measurement (ORYX)**, selecting “Documentation and Related Links” and then “ORYX Requirements for Hospitals.”

Completed forms should be faxed to the number listed on the form.

Unless the hospital is a component of a larger corporate entity that is coordinating measure set/measure selections for all its member hospitals, each organization must update The Joint Commission directly regarding additions or changes to its selection of core measure sets and measures.

NOTE:

It is imperative that hospitals notify their ORYX vendor of new measure set/measure selections or any changes to existing selections of core measure sets/measures to ensure that the appropriate data are submitted to and accepted by The Joint Commission.

For hospitals participating with the HQA and the “Hospital Quality Alliance (HQA): Improving Care through Information” initiative and that are using a Joint Commission listed measurement system to submit inpatient performance measure data to the QIO Clinical Warehouse via QualityNet Exchange, it is imperative that hospitals submit an “Inpatient Hospital Vendor Authorization for Data Submission” form available on the QualityNet Exchange website (<http://www.qualitynet.org>).

The Centers for Medicare & Medicaid (CMS) has designated FMQAI as the Hospital Outpatient Quality Data Reporting Program (HOP QDRP). FMQAI supports activities under the HOP QDRP, including providing technical support and feedback to assist hospitals with quality data reporting. All questions about the HOP QDRP should be submitted to FMQAI by e-mail at hopqdrp@fmqai.com or by phone, toll-free, at (866) 800-8756 weekdays from 7 a.m. to 6 p.m. Eastern Time.

Neither The Joint Commission, nor QualityNet Exchange and FMQAI share information on hospital core measure set selections across the three organizations.

2009 ORYX Requirements for “Small” Hospitals

Hospitals with an average daily census of 10 or less must meet the same general ORYX requirements outlined above but are exempt from the requirement to submit data via a listed performance measurement system to the Joint Commission. Small hospitals are



required to:

- Collect data internally on all selected measure sets/measures
- Generate either run charts or control charts on each measure, at least quarterly, for use in internal quality improvement activities
- Make data reports available for review by surveyors during on-site surveys, and produce the reports upon request of the Joint Commission for the purpose of data monitoring activities.

As with all other hospitals, those organizations qualifying as “small” hospitals must contact The Joint Commission directly regarding additions or changes to their selection of core measure sets and, as appropriate, non core measures.

Qualifying “small” hospitals have the option of collecting and submitting performance measure data to The Joint Commission using a Joint Commission listed vendor. “Small” hospitals electing to submit core measure data to The Joint Commission will have those data displayed in their ORYX Performance Measure Report and included in the Priority Focus Process as well as the Strategic Surveillance System (S3). Performance on those core measures also will be displayed in the hospital’s Quality Report.

2009 ORYX Requirements for Children’s Hospitals

Children’s hospitals separately accredited by The Joint Commission, i.e., children’s hospitals not surveyed and accredited as a site under the accreditation of another Joint Commission accredited hospital, are required to collect and submit data to the Joint Commission on the Children’s Asthma Care (CAC) core measure set comprised of 3 performance measures:

CAC – 1 Use of Relievers for Inpatient Asthma

CAC – 2 Use of Systemic Corticosteroids for Inpatient Asthma

CAC – 3 Home Management Plan of Care Given to Patient/Caregiver

While CAC-3 was originally implemented as a test measure pending endorsement by the National Quality Forum, the measure was endorsed effective with 7/01/2008 discharges. Data analysis for CAC-3 now is used in the accreditation process and is publicly reported on Quality Check.

Any Joint Commission accredited general medical/surgical hospital that provides care to the relevant patient populations addressed by the CAC core measure set may elect to collect and submit data to the Joint Commission on that measure set to meet minimum ORYX performance measure reporting requirements or as an additional measure set.

If a general/medical surgical hospital has not been able to identify applicable measure sets to meet minimum ORYX requirements and the CAC measure set is applicable to the patient populations served by that hospital, then the hospital is required to collect and submit data to the Joint Commission for the CAC measure set.

Hospitals submitting data to The Joint Commission on the CAC measure set, either as one of their selected required core measure sets or as an additional elective set, are required to collect and submit data on all applicable age groups for all three measures.

2009 ORYX Requirements for Psychiatric Hospitals



Pending National Quality Forum (NQF) endorsement and Hospital Quality Alliance (HQA) approval of The Joint Commission's Hospital Based Inpatient Psychiatric Services (HBIPS) core measure set, Joint Commission accredited psychiatric hospitals that are surveyed under the *Comprehensive Accreditation Manual for Hospitals: The Official Handbook* and that are not otherwise accredited as a site under the accreditation of a general/medical surgical hospital have the option of collecting and submitting data to The Joint Commission on either all applicable measures that comprise the final HBIPS core measure set or on nine non-core measures in order to meet their ORYX requirements.

Upon NQF endorsement and HQA approval The Joint Commission will announce a date when collection and submission of data on all applicable HBIPS measure will become mandatory for Joint Commission accredited psychiatric hospitals as described above.

Unlike core measure reporting requirements outlined in the table above, psychiatric hospitals electing to submit data to The Joint Commission now, or when required in the future, will not be required to collect and submit, nor will The Joint Commission accept, non-core measure data.

Until approvals are received, The Joint Commission will not publicly report hospital performance on the measure set on Quality Check, nor will the data be included in The Joint Commission's Priority Focus Process (PFP) or its Strategic Surveillance System (S3). However, the data will be reported in each hospital's ORYX Performance Measure Report available via secure extranet site and available for use by Joint Commission surveyors in the survey process.

Additionally, general medical/surgical hospitals that provide acute inpatient psychiatric services also may select the Hospital Based Inpatient Psychiatric Services measure set as one of their four sets of core measures needed to meet ORYX requirements.

For more information

Contact the ORYX Information Line at (630) 792-5085, or visit www.jointcommission.org. You also can submit questions to hcooryx@jointcommission.org. Or you may direct your questions to <http://manual.jointcommission.org>.