

**Release Notes to the Specifications Manual for National Hospital Inpatient Quality Measures-
Hospital-Based Inpatient Psychiatric Services Core Measure Set v2.2
(6-1-2009)**

Guidelines for Using Release Notes

Release Notes 2.2 provide modifications to the *Specifications Manual for National Hospital Inpatient Quality Measures- Hospital-Based Inpatient Psychiatric Services Core Measure Set*. The Release Notes are provided as a reference tool and are not intended to be used to program abstraction tools. Please refer to the *Specifications Manual for National Hospital Inpatient Quality Measures- Hospital-Based Inpatient Psychiatric Services Core Measure Set* for the complete and current technical specifications and abstraction information.

The notes are organized to follow the order of the Table of Contents. Within each topic section, a row represents a change beginning with general changes followed by data elements in alphabetical order. The implementation date is **10-01-2009** unless otherwise specified. The column headings are described below:

- **Section** - used to identify which section(s) listed in the Table of Contents contain the change listed. The sections are Data Dictionary, Measurement Information, Missing and Invalid Data, etc.
- **Impacts** - used to identify which portion(s) of the Manual Section is impacted by the change listed. Examples are Alphabetical Data Dictionary, Measure Information Form (MIF) and Flowchart (Algorithm). The measures that the data element is collected for are identified.
- **Rationale** – provided to identify why the change is being made.
- **Description of Changes** - used to identify the section within the document where the change occurs, e.g., Definition, Data Collection Question, Allowable Values, and Denominator Statement - Data Elements.
NOTE: Additions and Deletions are listed and additions are **yellow highlighted** in the corresponding document. Exceptions: The additions and changes to the Algorithms are not yellow highlighted, and the Hospital Initial Patient Population and Clinical Data XML File Layouts are **yellow highlighted** in the cells that have a change in them and the actual changes are **bolded**.
- **Page**- the beginning page number is from the 2.1b version of the manual

Data elements that cross multiple measures and contain the same changes will be consolidated into one row. If those changes do not apply to all of the measures listed in the Impacts column that is identified in the description of changes.

This document should allow the reader to identify the exact location of each change by reading from left to right across the columns. An **example** is: Changing a note for abstraction within ***Initial Blood Culture Collection Time, which is collected for PN-3a, PN-3b.***

Section	Impacts	Rationale	Description of Changes	Page
Effective 10/01/2009 Discharges				
Table of Contents	Table of Contents	To allow for the addition of the population and sampling transmission data processing flow.	<u>Section 9 – Data Transmission</u> Change: “Transmission Data Processing Flow” to “Transmission Data Processing Flow: Clinical” Add: “Transmission Data Processing Flow: Population and Sampling”	N/A
Table of Contents	Table of Contents	The Joint Commission is moving away from using the term	<u>Section 5 – HBIPS Quality Measure Verification Process</u> Change: From: (The Joint Commission Performance	N/A

		<p>'Performance Measurement System' for our listed ORYX vendors.</p> <p>This change has been made as appropriate throughout the entire manual.</p>	<p>Measurement Systems Only) This section has been moved to the <i>ORYX Technical Implementation Guide</i> and is available to performance measurement systems via the Joint Commission's extranet site for measurement systems (PET).</p> <p>To: (The Joint Commission ORYX Vendors® Only) This section has been moved to the <i>ORYX Technical Implementation Guide</i> and is available to ORYX Vendors via the Joint Commission's extranet site for measurement systems (PET).</p>	
Using the Specifications Manual for National Hospital Inpatient Quality Measures	Using the Specifications Manual for National Hospital Inpatient Quality Measures	To allow for the addition of the population and sampling transmission data processing flow.	<p><u>Section 9 - Data Transmission</u> Change the word "Flow" to "Flows" and "contains" to "contain" in the 1st sentence of the 4th paragraph.</p> <p>Add: "and the population and sampling data" to the end of the 1st sentence of the 4th paragraph.</p>	-x-
Data Dictionary	Alphabetical Data Dictionary	To be consistent with the Specifications Manual for National Hospital Inpatient Quality Measures V3.0.	<p><u>Guidelines for Abstraction</u> Remove notes from Guidelines for Abstraction and place under the Notes for Abstraction throughout the entire data dictionary.</p>	Various
<i>Admission Date</i>				
Data Dictionary	Alphabetical Data Dictionary All records	To allow hospitals to include patients with a long length of stay.	<p><u>Notes for Abstraction</u> Add the following statement: For HBIPS only, admission dates prior to 2001 are acceptable.</p>	1-12
<i>Continuing Care Plan-Discharge Medications</i>				
Data Dictionary	Alphabetical Data Dictionary HBIPS-6 HBIPS-7	To clarify documentation requirements for data element.	<p><u>Notes for Abstraction</u> Add the following statement: All medications must have the names, dosage and indications for use listed in the continuing care plan. The indication for use can as short as one to two words, but must be present for all medications, not just psychotropic medications.</p>	1-19
<i>Discharge Status</i>				
Data Dictionary	Alphabetical Data Dictionary HBIPS-1 HBIPS-4 HBIPS-5 HBIPS-6 HBIPS-7	Changes to be consistent with NUBC guideline.	<p><u>Usage Note</u> Change Value 01-Includes discharge to home; jail or law enforcement; home on oxygen if DME only; any other DME only; group home, foster care, and other residential care arrangements; outpatient programs, such as partial hospitalization or outpatient chemical dependency programs; assisted living facilities that are not state-designated.</p>	1-34

			<p>TO Includes discharge to home; home on oxygen if DME only; any other DME only; group home, foster care, independent living and other residential care arrangements; outpatient programs, such as partial hospitalization or outpatient chemical dependency programs.</p> <p><u>Allowable Value</u> Change Value 04-Discharged/transferred to an intermediate care facility (ICF)</p> <p>TO 04-Discharged/transferred to a facility that provides custodial or supportive care</p> <p><u>Usage Note</u> Change Value 04-Typically defined at the state level for specifically designated intermediate care facilities. Also used to designate patients that are discharged/transferred to a nursing facility with neither Medicare nor Medicaid certification and for discharges/transfers to state designated Assisted Living Facilities.</p> <p>TO Includes intermediate care facilities (ICFs) if specifically designated at the state level. Also used to designate patients that are discharged/transferred to a nursing facility with neither Medicare nor Medicaid certification and for discharges/transfers to Assisted Living Facilities.</p> <p><u>Allowable Value</u> Add Value 21-Discharged/transferred to Court/Law Enforcement Usage Note: Includes transfers to incarceration facilities such as jail, prison or other detention facilities.</p>	
<i>Measure Category Assignment</i>				
Data Dictionary	Alphabetical Data Dictionary All records	The Joint Commission is moving away from using the term 'Performance Measurement System' for our listed ORYX vendors	<p><u>Collected For:</u> Change the 2nd sentence in the 2nd bullet under the Collected For Notes: From: The performance measurement system's calculated <i>Measure Category Assignment</i> will be transmitted to The Joint Commission on a quarterly basis with the associated hospital clinical data. To: The ORYX Vendor's calculated <i>Measure Category Assignment</i> will be transmitted to The Joint Commission on a quarterly basis with the associated hospital clinical data.</p> <p>Change the 4th sentence in the 2nd bullet under the Collected For Notes: From: Performance measurement systems can refer to the Joint Commission's <i>ORYX Data Quality Manual</i> for more information. To: ORYX Vendors can refer to the Joint Commission's <i>ORYX Data Quality Manual</i></p>	1-48

			for more information.	
<i>Measurement Value</i>				
Data Dictionary	Alphabetical Data Dictionary All records	The Joint Commission is moving away from using the term "Performance Measurement System" for our listed ORYX vendors	<u>Collected For:</u> Change the 1st sentence under the Collected For Notes: From: The performance measurement system's calculated <i>Measurement Value</i> will be transmitted to The Joint Commission on a quarterly basis with the associated hospital clinical data. To: The ORYX Vendor's calculated <i>Measurement Value</i> will be transmitted to The Joint Commission on a quarterly basis with the associated hospital clinical data. Change the 3 rd sentence under the Collected For Notes From: Performance measurement systems can refer to the Joint Commission's <i>ORYX Data Quality Manual</i> for more information. To: ORYX Vendors can refer to the Joint Commission's <i>ORYX Data Quality Manual</i> for more information.	1-51
<i>Patient Strengths Psychological Trauma History Substance Use Violence Risk to Others Violence Risk to Self</i>				
Data Dictionary	Alphabetical Data Dictionary HBIPS-1	To clarify intent of allowable value X and timeframe for initial screening.	<u>Allowable Values</u> Change the word "subsequent" to "previous" for allowable value X <u>Notes for Abstraction</u> Add the following statement to the fourth paragraph: The day after admission is defined as the first day.	1-63 1-79 1-85 1-91 1-93
<i>Sample</i>				
Data Dictionary	Alphabetical Data Dictionary All records	The measure sets are no longer referred to as "topics" in the manual.	<u>Allowable Values</u> Change the word "topic" to "measure set" in the 'No' value.	1-82
Measure Information	HBIPS Data Element List	To be consistent with the Specifications Manual for National Hospital Inpatient Quality Measures V3.0.	Add the following data elements to general HBIPS data element table: <i>ICD-9-CM Other Procedures</i> -Optional for All records <i>ICD-9-CM Other Procedure Dates</i> -Optional for All records <i>ICD-9-CM Principal Procedure</i> -Optional for All records <i>ICD-9-CM Principal Procedure Date</i> -Optional for All records	HBIPS-3
Measure Information	Measure Information Form (MIF)	To align MIF with recent data element changes.	<u>Denominator Data Elements</u> Split <i>Psychiatric Inpatient Days</i> into 2 data elements: <i>Psychiatric Inpatient Days</i> -	HBIPS-2-1 HBIPS-3-

	HBIPS-2 HBIPS-3		<i>Medicare Only, Psychiatric Inpatient Days-Non- Medicare Only.</i> Split Total Leave Days into 2 data elements: <i>Leave Days- Medicare Only, Leave Days-Non- Medicare Only.</i>	1
Algorithm-MIF	HBIPS-4 HBIPS-5 HBIPS-6 HBIPS-7	Changes to be consistent with NUBC guideline.	Add a new value "21" under the "Discharge Status" so the values are changed from "=01, 02,...07,43,...70" to "=01,02,...07, 21, 43...70".	HBIPS-4-5 HBIPS-5-5 HBIPS-6-4 HBIPS-7-4
	HBIPS-4	To allow "UTD" value goes to Category "E" instead of "D"	Change the value from "=1 or UTD" to "=1" where it connects between "Number of Antipsychotic Medications Prescribed at Discharge" and the Outcome Box "D". Change the value from ">=2" to ">=2 or UTD" where it connects between "Number of Antipsychotic Medications Prescribed at Discharge" and the Outcome Box "E".	HBIPS-4-5
	HBIPS-5	To allow "UTD" value goes to Category "D" instead of "B"	Change the value from "<=1 or UTD" to "<=1" where it connects between "Number of Antipsychotic Medications Prescribed at Discharge" and the Outcome Box "B". Change the value from ">=2" to ">=2 or UTD" where it connects between "Number of Antipsychotic Medications Prescribed at Discharge" and "Appropriate Justification for Multiple Antipsychotic Medications". Add one more check for "Number of Antipsychotic Medications Prescribed at Discharge" - if it is "=UTD" then the case goes to Category assignment "D".	HBIPS-5-5
Population and Sampling Specifications				
Population and Sampling Specifications	Sample Size Requirements	Effective sample size is no longer applicable.	<u>Sample Size Requirements – Introduction</u> Remove the words "effective sample" from the last sentence under <i>Sampling</i> . Remove 2 nd bullet under <i>Sampling</i> <ul style="list-style-type: none"> "Effective sample" refers to that part of the sample that makes it into the denominator of a measure. This is defined as the sample for a measure minus all of the exclusions for that measure in that sample. 	3-1
			<u>Sample Size Requirements – Sample Size Requirements</u> Remove the word "effective" from the 1 st sentence in the 2 nd paragraph and the last sentence in the 3 rd paragraph.	3-4

		<p>Remove from the 2nd sentence in the 4th paragraph “Because the sample for a measure set will rarely be equal to the effective sample”</p> <p>Under Quarterly Example 1: Measure Set is Not Stratified: Remove the word “effective” from the 1st sentence.</p> <p>Remove the 1st and 2nd bullets</p> <ul style="list-style-type: none"> • <i>The effective quarterly sample size for a measure set is at least 35 cases per quarter; and</i> • <i>The required quarterly sample size is at least 20% of the Initial Patient Population.</i> <p>Under Quarterly Example 2: Measure set is stratified: Remove the word “effective” from the 2nd sentence.</p> <p>Remove the 2nd sentence under the 1st bullet: <i>The effective quarterly sample size within a stratum is at least 16 cases per quarter.</i></p> <p>Remove the 2nd bullet: <i>The required quarterly sample size is at least 10% of the stratum population.</i></p> <p>Under Monthly Example 1: Measure set is Not Stratified: Remove the word “effective” from the 1st sentence.</p> <p>Remove the 1st and 2nd bullets</p> <ul style="list-style-type: none"> • <i>The effective monthly sample size for a measure set is at least 12 cases per month; and</i> • <i>The required monthly sample size is at least 20% of the Initial Patient Population.</i> <p>Under Monthly Example 2: Measure set is Stratified: Remove the word “effective” from the 2nd sentence.</p> <p>Remove the 2nd sentence under the 1st bullet: <i>The effective monthly sample size within a stratum is at least 6 cases per month.</i></p> <p>Remove the 2nd bullet: <i>The required monthly sample size is at least 10% of the strata population.</i></p>	<p>3-5</p> <p>3-6</p> <p>3-7</p> <p>3-8</p>
Data Transmission			

Data Transmission	Data Transmission	To create one document that contains all of The Joint Commission Transmission Identifier Numbers	<p><u>Joint Commission Data Transmission</u> Remove the following Joint Commission Transmission Identifier tables: Table 1 – Hospital-Based Inpatient Psychiatric Services</p> <p><u>Joint Commission Data Transmission - Overview</u> Change the 6th bullet “Identifiers used to transmit aggregate national hospital quality inpatient measure data” From: The performance measure identifiers used to transmit aggregate HCO-level data to The Joint Commission are presented in this section. See Tables 1 to Table 6 that follow for the transmission identifiers used to transmit aggregate HCO-level national hospital quality inpatient measure data to The Joint Commission. To: The performance measure identifiers used to transmit aggregate HCO-level data to The Joint Commission are maintained within the ORYX Technical Implementation Guide. ORYX Vendors have access to the <i>ORYX Technical Implementation Guide</i> through the Performance Measurement System Extranet Track (PET).</p>	6-7 6-8 6-9 6-5
Data Transmission	Data Transmission	The allowable measure set combinations will change due to the adding of the VTE and Stroke measures and the age restriction for SCIP being moved to the measure algorithms.	<p><u>Joint Commission Guidelines for Submission of Hospital Clinical Data – Allowable Measure Set Combination per Patient Episode of Care</u> Refer to the section for the specific changes.</p> <p>Add “Refer to Appendix E, Table 2.7 Allowable Measure Set Combinations for further guidance.</p>	6-10
Data Transmission	Data Transmission	To align with the functionality of the warehouse. ‘Delete’ files submitted without all of the required tags will be rejected from the QIO Clinical Warehouse.	<p><u>Joint Commission Guidelines for Submission of Hospital Initial Patient Population Data – Hospital Initial Patient Population Data XML File Layout</u> Add after 2nd paragraph under “Note”: In order to delete an existing file all XML tags must be present, however, only the XML tags mentioned above (<i>Health Care Organization ID</i>, Time-Period and Measure-Set) need to be submitted with values.</p>	6-16
Transmission Data Processing Flow				
Data Transmission	Transmission Data Processing Flow	To provide guidance as to how the population and sampling data is processed in the	<p><u>Data Transmission – Transmission Data Processing Flow</u> Add Transmission Data Processing Flow: Population and Sampling and Initial Patient Population Data Processing Flow algorithm.</p>	

		QIO Clinical Warehouse and the Joint Commission's Data Warehouse.		
Data Transmission	Transmission Data Processing Flow	To allow for the addition of the population and sampling transmission data processing flow.	<u>Transmission Data Processing Flow</u> Change name from "Transmission Data Processing Flow" to "Transmission Data Processing Flow: Clinical" <u>Transmission Data Processing Flow – Algorithm</u> Change name from "Transmission Data Processing Flow" to "Transmission Data Processing Flow: Clinical"	6-45
Transmission Alphabetical Data Dictionary				
<i>ICD Population Size</i> <i>Number of Cases with An Influenza Vaccination Shortage</i> <i>Number of Cases with UTD Allowable Values</i> <i>Number of Rejected Cases</i> <i>Performance Measure Identifier</i> <i>Performance Measurement System (PMS) Identifier</i>				
Data Transmission	Transmission Alphabetical Data Dictionary	These data elements are part of the HCO-level aggregate (X12) data ORYX vendors send The Joint Commission. By removing these data elements from the transmission data dictionary of this manual, the definition of all HCO-level aggregate data elements will be consolidated into the ORYX Technical Implementation Guide. ORYX vendors have access to the ORYX Technical Implementation Guide through the Performance Measurement System Extranet Track (PET).	<u>Transmission Alphabetical Data Dictionary List</u> <u>Transmission Alphabetical Data Dictionary</u> Remove the following data elements: ICD Population Size Number of Cases with An Influenza Vaccination Shortage Number of Cases with UTD Allowable Values Number of Rejected Cases Performance Measure Identifier Performance Measurement System (PMS) Identifier	6-22 6-30 6-31 6-22 6-34
<i>Initial Patient Population Size – Medicare Only</i>				
Data Transmission	Transmission Alphabetical Data	Addition of the Stroke and VTE measure sets.	<u>Format – Occurs</u> Change 1 st sentence from "Non-stratified Measure Sets: One <i>Initial Patient Population</i>	6-25

	Dictionary		<p><i>Size – Medicare Only</i> per hospital's measure set (e.g., AMI, HF and PN)." To: "Non-stratified Measure Sets: One <i>Initial Patient Population Size – Medicare Only</i> per hospital's measure set (e.g., AMI, HF, PN and STK)."</p> <p>Add new bullet to the end of the 2nd sentence:</p> <ul style="list-style-type: none"> The VTE measure set has three occurrences, one for each sub-population (No VTE, Principal VTE and Other VTE Only). 	
<i>Initial Patient Population Size – Non-Medicare Only</i>				
Data Transmission	Transmission Alphabetical Data Dictionary	Addition of the Stroke and VTE measure sets.	<p><u>Format – Occurs</u> Change 1st sentence from "Non-stratified Measure Sets: One <i>Initial Patient Population Size – Non-Medicare Only</i> per hospital's measure set (e.g., AMI, HF and PN)." to "Non-stratified Measure Sets: One <i>Initial Patient Population Size – Non-Medicare Only</i> per hospital's measure set (e.g., AMI, HF, PN and STK)."</p> <p>Add new bullet to the end of the 2nd sentence:</p> <ul style="list-style-type: none"> The VTE measure set has three occurrences, one for each sub-population (No VTE, Principal VTE and Other VTE Only). 	6-27
<i>Measure Set</i>				
Data Transmission	Transmission Alphabetical Data Dictionary	To align the Format (Length, Type and Occurs) within the data element with the Hospital Clinical Data XML File Layout and the Hospital Initial Patient Population XML File Layout.	<p><u>Measure Set – Format</u> Change Length from "Not Applicable" to "10"</p> <p>Change Occurs from "Not Applicable" to Hospital Clinical Data file: 1 Hospital Initial Patient Population Data file: 1 – 9 (including HBIPS)</p>	6-28
<i>National Provider Identifier</i>				
Data Transmission	Transmission Alphabetical Data Dictionary	The NPI is a 10 digit number and does not allow for other characters.	<p><u>National Provider Identifier – Format</u> Change format 'Type' from "Character" to "Numeric"</p>	6-29
<i>Sample Size – Medicare Only</i>				
Data Transmission	Transmission Alphabetical Data Dictionary	Addition of the Stroke and VTE measure sets.	<p><u>Format – Occurs</u> Change 1st sentence from "Non-stratified Measure Sets: One <i>Sample Size – Medicare Only</i> per hospital's measure set (e.g., AMI, HF and PN)." To: "Non-stratified Measure Sets: One <i>Sample Size – Medicare Only</i> per hospital's measure set (e.g., AMI, HF, PN and STK)."</p>	6-38

			<p>Add new bullet to the end of the 2nd sentence:</p> <ul style="list-style-type: none"> The VTE measure set has three occurrences, one for each sub-population (No VTE, Principal VTE and Other VTE Only). 	
Sample Size – Non-Medicare Only				
Data Transmission	Transmission Alphabetical Data Dictionary	Addition of the Stroke and VTE measure sets.	<p><u>Format – Occurs</u> Change 1st sentence from “Non-stratified Measure Sets: One <i>Sample Size – Non-Medicare Only</i> per hospital’s measure set (e.g., AMI, HF and PN).” To: “Non-stratified Measure Sets: One <i>Sample Size – Non-Medicare Only</i> per hospital’s measure set (e.g., AMI, HF, PN and STK).”</p> <p>Add new bullet to the end of the 2nd sentence:</p> <ul style="list-style-type: none"> The VTE measure set has three occurrences, one for each sub-population (No VTE, Principal VTE and Other VTE Only). 	6-39 6-40
Sampling Frequency				
Data Transmission	Transmission Alphabetical Data Dictionary	Addition of the Stroke and VTE measure sets.	<p><u>Format – Occurs</u> Change 1st sentence from “Non-stratified Measure Sets: One <i>Sampling Frequency</i> per hospital’s measure set (e.g., AMI, HF and PN).” To: “Non-stratified Measure Sets: One <i>Sampling Frequency</i> per hospital’s measure set (e.g., AMI, HF, PN and STK).”</p> <p>Add new bullet to the end of the 2nd sentence:</p> <ul style="list-style-type: none"> The VTE measure set has three occurrences, one for each sub-population (No VTE, Principal VTE and Other VTE Only). 	6-41
Hospital Clinical Data XML File Layout				
<i><episode-of-care></i>				
Data Transmission	Hospital Initial Patient Clinical Data XML File Layout	Addition of STK and VTE measure sets.	<p><u>Elements</u></p> <p><i><episode-of-care></i> Add under Valid Values: STK (The Joint Commission Only) VTE (The Joint Commission Only)</p>	4
Hospital Initial Patient Population Data XML File Layout				
<i><measure-set></i>				
Data Transmission	Hospital Initial Patient Population Data XML File Layout	To align what is in the XML file with the data element.	<p><u>Elements - <i><measure-set></i></u> Change ‘Description’ from “Used to identify which of the five inpatient measure-sets the case was abstracted for” to “Indicates which measure set(s) are being transmitted”</p> <p>Change ‘Field Size’ from “5” to “10”</p>	3
Data	Hospital Initial	Changes related	<u>Elements - <i><measure set></i></u>	3

Transmission	Patient Population Data XML File Layout	to the addition of the VTE and Stroke measure sets.	<p>Add “VTE (The Joint Commission only)” and “Stroke (The Joint Commission only)” to the Valid Values.</p> <p><u>Elements - <stratum></u> Add or “VTE” as a sub-element to the XML Element</p> <p>Add new row for VTE: Description: Specific type of VTE 1 = No VTE 2 = Principal VTE 3 = Other VTE Only Attribute: id Valid Values: 1-3 Data Type: Numeric Field Size: 1 Data Required (CMS): No Data Required (The Joint Commission): VTE only</p>	
<i><npi></i>				
Data Transmission	Hospital Initial Patient Population Data XML File Layout	The NPI is a 10 digit number and does not allow for other characters.	<p><u>Elements - <npi></u> Change ‘Data Type’ from “Character” to “Numeric”</p>	2
Appendices				
Appendix B	Table 10.0 Antipsychotic Medications Table 10.1 Short-Acting Intramuscular Antipsychotic Medications	To be consistent with the Specifications Manual for National Hospital Inpatient Quality Measures V3.0.	<p><u>Appendix B-Medication Tables</u> Replace Table 10.0 and 10.1 with new tables providing crosswalk to generic medications.</p>	Appendix B-1
Appendix B	Table 10.0 Antipsychotic Medications	New medication added	Add Fanapt and Iloperidone to Table 10.0	Appendix B-1
Appendix C		The number of measures has increased.	<p><u>General Glossary of Terms</u> Surgical care improvement project (SCIP): Change the number of measures in the definition to “ten.”</p>	Appendix C-12
Appendix C		The current definition only applies to the SCIP VTE measures	<p><u>General Glossary of Terms</u> Change: VTE module to VTE -A term that includes deep vein thrombosis and/or pulmonary embolism</p>	
Appendix C		New STK Measure set definitions	<p><u>General Glossary of Terms</u> Add the following STK glossary terms and definitions: Acute Ischemic Stroke Acute Hemorrhagic Stroke Angioplasty Anti-thrombotic Therapy</p>	

			<p>Atherosclerosis Atrial Fibrillation Atrial Flutter Elective Carotid Endarterectomy Elective Carotid Intervention Emergency Medical System (EMS) Intermittent Pneumatic Compression Stockings IV Thrombolytic Therapy Low-density Lipoprotein (LDL) Paroxysmal Statin Medication Stent Stroke Time Last Known Well Tissue Plasminogen Activator (t-PA)</p>	
Appendix C		<p>The Joint Commission revised terminology from Performance Measurement System to ORYX® Vendors. Removed risk adjustment data element as a term.</p>	<p><u>General Glossary of Terms</u> Remove: Measurement System and Performance Measurement System term and definition Remove: Risk Adjustment data element term and definition Remove: Risk Adjustment data element terminology in the Data Element definition. Add: ORYX® Vendor term and definition Change: reference of “system” to “vendor” in the Data Transmission definition Change: Risk Factor definition to remove the last sentence “Refer to Appendix B for risk factor definitions.” Change: references of performance management systems to ORYX® Vendors in the following term definitions:</p> <ul style="list-style-type: none"> • Aggregate (hospital data) • Aggregate Risk-Adjusted Data Elements • Comparison Group • Data Transmission • Health Care Organization • Health Care Organization Level Data • Non-Core Measures • Performance Measurement System’s Extranet Track • Verification 	
Appendix D		<p>To allow for the addition of the population and sampling transmission data processing flow.</p>	<p><u>Flowchart Symbols</u> Change the word: “Flow” to “Flows” in the last sentence under the last symbol.</p>	Appendix D-7
Appendix E		<p>Changes to be consistent with NUBC guideline.</p>	<p><u>Table 2.5 Discharge Status Disposition</u> Remove from 01 “Assisted Living Facility” and</p>	Appendix E-1

			<p>“Court/Law Enforcement” under Discharge Disposition</p> <p>Add to 01 “Another acute care facility for an outpatient procedure”, “Home with Hospice referral only (has not accepted hospice care by a hospice organization)” and “Home with outpatient therapy (OT/PT) not provided by a home health service organization” under Discharge Disposition</p> <p>Add to 03 “Skilled nursing facility with hospice referral only (has not accepted hospice care by a hospice organization)” under Discharge Disposition</p> <p>Add to 04 “Assisted Living Facility” and “Nursing facility with hospice referral only (has not accepted hospice care by a hospice organization)” under Discharge Disposition</p> <p>Add to 06 “Home with therapy services (PT/OT) provided by home health service organization” under Discharge Disposition</p> <p>Add “21” under Discharge Status and “Jail”, “Prison” and “Other detention facilities” under Discharge Disposition</p> <p>Change 50 to “Discharged to home or an alternative setting that is the patient’s “home,” such as a nursing facility, and will receive in-home hospice services” under Discharge Disposition</p> <p>Add to 51 “General Inpatient Hospice care” and “General Inpatient Respite Hospice care” under Discharge Disposition</p> <p>Add to 61 “Discharged from an acute hospital to a Critical Access Hospital swing bed” under Discharge Disposition</p>	
Appendix E	Table 2.7 Allowable Measure Set Combinations	To provide further clarification as to which measure sets are allowed to be combined.	<p><u>Tables</u></p> <p>Add: Table 2.7 Allowable Measure Set Combinations</p>	N/A
Appendix F		To add the National Uniform Billing Committee as a resource.	<p><u>Appendix F – Resources</u></p> <p>Add: National Uniform Billing Committee (NUBC) For further information regarding the UB-04 and NUBC related data elements, please refer to the NUBC manual, “Official UB-04 Data Specifications Manual (c) Copyright American Hospital Association” or website at www.nubc.org/index.html.</p>	Appendix F-1
Appendix F		The Joint	<u>Appendix F – Resources</u>	Appendix

		Commission has a new web-based question and answer forum.	<p>Change the following resource from: Healthcare Organizations If you are a Joint Commission accredited healthcare organization with questions about National Quality Measures, ORYX® requirements, etc., please contact Accreditation and Certification Operations at oryx@jointcommission.org</p> <p>TO: If you are a Joint Commission accredited healthcare organization with questions about National Quality Measures, ORYX® requirements, etc., please contact Accreditation and Certification Operations at http://manual.jointcommission.org/</p>	F-1
Appendix F		The Joint Commission is moving away from using the term 'Performance Measure System' for our listed ORYX vendors.	<p><u>Appendix F – Resources</u> Change the following resource from: Performance Measurement Systems If you are a performance measurement system with questions about Hospital-Based Inpatient Psychiatric Services Measures, please contact The Joint Commission's Division of Quality Measurement and Research at oryxcore@jointcommission.org.</p> <p>TO: ORYX® Vendors If you are an ORYX Vendor with questions about Hospital-Based Inpatient Psychiatric Services Measures, please contact The Joint Commission's Division of Quality Measurement and Research at http://manual.jointcommission.org.</p>	Appendix F-1