

**Release Notes to the Specifications Manual for National Hospital Quality Measures v1.0
(9-15-2004)**

Section of Manual	Impacts	Description of Changes	Affected Submissions
		<p>This document contains Release Notes to the <i>Specifications Manual for National Hospital Quality Measures</i>, version 1.0 (the aligned manual, see box below). The intended audience for the Release Notes is Joint Commission stakeholders who seek an overview of the changes from the <i>Specifications Manual for National Implementation of Hospital Core Measures</i>, version 2.02 (the old manual, effective for 7/1/2004 to 12/31/2004 discharges) to the <i>Specifications Manual for National Hospital Quality Measures</i>, version 1.0 (effective for 1/1/2005 discharges).</p> <p>The aligned manual represents the result of discussions by the Centers for Medicare & Medicaid Services (CMS) and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to achieve alignment of common national performance measures and to share one set of documentation. Data transmission requirements will remain unique for CMS compared to JCAHO since CMS receives patient level data and the Joint Commission receives hospital level data. The unique data transmission requirements will demand that CMS and JCAHO continue discussions to ensure consistent handling of missing/invalid data, front-end edits, data quality, etc.</p>	
All Sections	All Measures	NOTE that the <i>Core Performance Measures</i> are now referred to as the <i>National Hospital Quality Measures</i> .	
Data Dictionary, Measure Information Forms (MIFs), National Hospital Quality Measure Verification Process.	PN-3b, PN-5, PN-5a, PN-5b, PN-6, PN-6a, PN-6b, SIP-1, SIP-2, SIP-3	<p>NOTE that as part of the alignment process, data elements in PN and SIP with similar names, e.g. <i>Antibiotic Allergy (SIP)</i>, <i>History of Antibiotic Allergy (PN)</i>, have been combined into one data element, <i>Antibiotic Allergy</i>. However, within each newly merged data element, there are instructions for abstraction provided specific to SIP or PN, e.g. <i>Antibiotic Name</i> has distinct Notes for Abstraction for SIP and PN and Suggested Data Sources have additional instructions specific to SIP. For further information, refer to the data element pages in the data dictionary. The relevant data element changes are as follows:</p> <ul style="list-style-type: none"> • FROM <i>Name of Antibiotic (SIP)</i>, <i>Name of Antibiotic Administered During First 36 Hours (PN)</i> TO <i>Antibiotic Name</i>. • FROM <i>Date of Antibiotic (SIP)</i>, <i>Start Date of Antibiotic Administration (PN)</i> TO <i>Antibiotic Administration Date</i>. • FROM <i>Time of Antibiotic (SIP)</i>, <i>Start Time of Antibiotic Administration (PN)</i> TO <i>Antibiotic Administration Time</i>. • FROM <i>Route of Antibiotic (SIP)</i>, <i>Route of Antibiotic Administration (PN)</i> TO <i>Antibiotic Administration Route</i>. • FROM <i>Antibiotic Allergy (SIP)</i>, <i>History of Antibiotic Allergy (PN)</i> TO <i>Antibiotic Allergy</i>. • FROM <i>Antibiotics Prior to Arrival (SIP)</i>, <i>Antibiotics Prior to Arrival (PN)</i> TO <i>Antibiotics Prior to Arrival</i>. • CHANGE in the maximum number of occurrences to '75' for both SIP and PN for the data elements <i>Antibiotic Name</i>, <i>Antibiotic Administration Date</i>, <i>Antibiotic Administration Time</i>, <i>Antibiotic Administration Route</i>, and also <i>Prophylactic Antibiotic</i>(for SIP). 	
All sections	All Records	NOTE that all references to Numeric Measure Identifiers or Transmission Identifiers have been removed from	

		other sections of the manual. That information is now mentioned only in the National Hospital Quality Measure Data Transmission section	
All sections	All Records	ADD data element <i>Abstraction Date</i> .	CMS Only
All sections	All Records	ADD data element <i>Abstractor Identification (ID) Number</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>ASA Score</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Beta Blockers</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Blood Sugar</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Bowel Prep</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>DVT Interventions</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>DVT Prophylaxis</i> .	CMS Only
All sections	AMI-T2	ADD data element <i>First In-Hospital LDL Cholesterol Qualitative Description</i> .	CMS Only
All sections	AMI-T2	ADD data element <i>First In-Hospital LDL Cholesterol Value</i> .	CMS Only
All sections	All Records	ADD data element <i>First Name</i> .	CMS Only
All sections	All Records	ADD data element <i>Hispanic Ethnicity</i> .	
All sections	AMI-T1a, AMI-T1b, AMI-T2	ADD data element <i>In-Hospital LDL Cholesterol Test</i> .	CMS Only
All sections	AMI-T1b	ADD data element <i>In-Hospital LDL Cholesterol Test Within 24 Hours After Arrival</i> .	CMS Only
All sections	All Records	ADD data element <i>Last Name</i>	CMS Only
All sections	AMI-T2	ADD data element <i>Lipid Lowering Agent Prescribed at Discharge</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Oxygen</i> .	CMS Only
All sections	All Records (Optional)	ADD data element <i>Physician 1</i> .	CMS Only
All sections	All Records (Optional)	ADD data element <i>Physician 2</i> .	CMS Only
All sections	AMI-T1a	ADD data element <i>Plan for LDL Cholesterol Test</i> .	CMS Only
All sections	AMI-T1a, AMI-T2	ADD data element <i>Pre-Arrival LDL Cholesterol Qualitative Description</i> .	CMS Only
All sections	AMI-T1a, AMI-T2	ADD data element <i>Pre-Arrival LDL Cholesterol Test</i> .	CMS Only
All sections	AMI-T1a, AMI-T2	ADD data element <i>Pre-Arrival LDL Cholesterol Value</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Preop Location</i> .	CMS Only
All sections	All Records	ADD data element <i>Race</i> .	
All sections	AMI-T1a, AMI-T2	ADD data element <i>Reason for No LDL-Cholesterol Testing</i> .	CMS Only
All sections	AMI-T1a, AMI-T2	ADD data element <i>Reason for No Lipid-Lowering Therapy</i> .	CMS Only
All sections	All Records	ADD data element <i>Sample</i> . [This data element is for use in data transmission.]	CMS Only
All sections	SIP (Optional)	ADD data element <i>Temperature</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Temperature Obtained</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Type of Infection</i> .	CMS Only
All sections	SIP (Optional)	ADD data element <i>Wound Class</i> .	CMS Only
All sections	SIP	RENAME data element <i>Admission Diagnosis</i> as <i>Admission Diagnosis of Infection</i> .	
All sections	All Measures	CHANGE all date and time data elements to reflect new format specifications. In the case of dates, the hyphen character is now used as a separator (for example, MM-DD-YYYY instead of MM/DD/YYYY). This modification affects the following data elements: <ul style="list-style-type: none"> <i>Admission Date</i> (All Measures) 	

		<ul style="list-style-type: none"> • <i>Arrival Date</i> (AMI-1,6,7,7a, 8, 8a; PN-3b, 5,5a, 5b) • <i>Date of Infection</i> (SIP-3) • <i>Discharge Date</i>(All Measures) • <i>First PCI Date</i>(AMI-8, 8a) • <i>ICD-9-CM Other Procedure Date</i> (All Measures) • <i>ICD-9-CM Principal Procedure Date</i> (All Measures) • <i>Initial Blood Culture Collection Date</i> (PN-3a, 3b) • <i>Surgery End Date</i> (SIP-1,2,3) 	
All sections	PN-3a, PN-6, AMI-T1a, AMI-T1b, AMI-T2	<p>NOTE that certain CMS Only measures which were not documented in the old manual are now included in the aligned manual. These measures are as follows:</p> <ul style="list-style-type: none"> • PN-3a: Blood Culture Within 24 Hours Prior to or After Arrival. • PN-6: Initial Antibiotic Selection for CAP in immunocompetent patient. [This measure is required for CMS data reporting. It differs from PN-6a and PN-6b in that no distinction is made between ICU and non-ICU patients.] • AMI-T1a: LDL cholesterol assessment. [This is an optional test measure.] • AMI-T1b: LDL cholesterol testing within 24 hours after hospital arrival. [This is an optional test measure.] • AMI-T2: Lipid lowering therapy at discharge. [This is an optional test measure.] 	CMS Only
All sections	All Records (used in algorithm for AMI-2, AMI-3, AMI-4, AMI-5, AMI-9, AMI-T1a and AMI-T2, All HF Measures, PN-2, PN-4, PN-7, PR-2)	Due to an indefinite delay in implementation, <i>Discharge Status</i> code '65' will not be accepted as a valid code.	
Data Dictionary	All Measures	NOTE that a 'Suggested Data Collection Question' has been added for each data element.	
Data Dictionary	AMI, HF, PN, SIP, PR	<p>NOTE that based on alignment discussions the definitions have been expanded or modified for the following data elements:</p> <p><i>ACEI Prescribed at Discharge, Antibiotic Received, Aspirin Prescribed at Discharge, Aspirin Received Within 24 Hours Before or After Hospital Arrival, Beta Blocker Prescribed at Discharge, Beta Blocker Received Within 24 Hours After Hospital Arrival, Blood Culture Collected After Arrival, Blood Cultures Prior to Arrival, Case Identifier, Compromised, Contraindication to ACEI at Discharge, Contraindication to Aspirin at Discharge</i> (also includes modification to Notes for Abstraction), <i>Contraindication to Aspirin on Arrival, Contraindication to Beta Blocker at Discharge, Discharge Status</i> (some allowable value definitions were updated based on UB-92 updates), <i>First PCI Time, ICD Population Size</i> (added the Note for clarification of definition for SIP), <i>Initial Blood Culture Collection Date, Initial Blood Culture Collection</i></p>	

		<i>Time, Influenza Vaccination Status, Initial ECG Interpretation, LVF Assessment, LVSD, Pneumococcal Vaccination Status, Prophylactic Antibiotic, Thrombolytic Administration, Thrombolytic Administration Date, Thrombolytic Administration Time.</i>	
Data Dictionary	AMI-4, PN-4, HF-4	CHANGE in allowable values for data element <i>Adult Smoking History</i> from “Y, N, Z” to “Y, N” due to merging of “N” and “Z” values.	
Data Dictionary, MIFs, National Hospital Quality Measure Verification Process	AMI-8, 8a	ADD new data element ‘ <i>First PCI Date</i> ’ instead of the derived variable. [This data element can be pre populated by the measurement systems from UB-92 data (with the ICD-9-Procedure Date corresponding to the first PCI procedure code) but the abstractor should be able to override it.]	
Data Dictionary	PN-2,7	ADD the phrase “ or if medically contraindicated because of bone marrow transplant within the past 12 months ” at the end of the line for allowable value ‘4’ for data elements <i>Pneumococcal Vaccination Status</i> and <i>Influenza Vaccination Status</i> .	
Data Dictionary	PN-3b, 5, 5a, 5b	Data Elements ‘ <i>Initial Antibiotic Date</i> ’ and ‘ <i>Initial Antibiotic Time</i> ’ have been removed. This information will instead be derived using the data elements <i>Antibiotic Administration Date</i> and <i>Antibiotic Administration Time</i> respectively.	
Data Dictionary	PN-6,6a,6b	DELETE data element ‘ <i>Antibiotic Administered During the First 36 Hours of Arrival</i> ’.	
Data Dictionary	SIP-1, 2, 3	CHANGE in definition for the data element ‘ <i>Antibiotic Name</i> ’ previously known as ‘ <i>Name of Antibiotic</i> ’.	
Data Dictionary	SIP, PN	MOVED Antibiotic Route (PN) Table 1.4 and Antibiotic Route (SIP) Table 1.8 to the Data Dictionary from Appendix H.	
MIF	All Measures	All Terminology subsections have been moved from the Measure Information Forms to the glossary, Appendix D, or to the appropriate data element page in the Data Dictionary.	
MIF	AMI-1, AMI-2, AMI-3, AMI-4, AMI-5, AMI-6, AMI-9	Under the measure denominator statement, patients transferred to a federal hospital have been added as an exclusion to reflect the algorithm.	
MIF	AMI-2, AMI-3, AMI-4, AMI-5, AMI-9	Algorithm Change: Pages AMI-2-5, AMI-3-5, AMI-4-5, AMI-5-5, AMI-9-4; CHANGE LOGIC to REMOVE 65 as a valid <i>Discharge Status</i> value.	
MIF	AMI-7	Algorithm Change: Page AMI-7a-4, 7a-6. RENAME Thrombolytic Timing as Mean Time To Thrombolysis.	
MIFs	AMI-8, AMI-8a	Algorithm Change: Pages AMI-8-6, AMI-8a-6; CHANGE LOGIC to REMOVE evaluation of ‘ICD-9-CM Principal or Other Procedure Date’. ADD data element <i>First PCI Date</i> .[This data element can be pre populated by the measurement systems from UB-92 data (with the ICD-9-Procedure Date corresponding to the first PCI procedure code) but the abstractor should be able to override it.] MOVE evaluation of <i>First PCI Time</i> to precede <i>First PCI Date</i> . REMOVE the internal variable ‘Earliest PCI Date.’	
MIF	AMI-4	Algorithm Change: Page AMI 4-5; REMOVE	

		allowable value “Z” from the evaluation of the data element ‘ <i>Adult Smoking History</i> ’. This change is due to the merging of definitions for allowable values “N” and “Z”.	
MIFs	HF-1, HF-2, HF-3, HF-4	Under the measure denominator statement, patients transferred to a federal hospital have been added as an exclusion to reflect the algorithm.	
MIFs	HF-1, HF-2, HF-3, HF-4	Algorithm Change: Pages HF-1-5, HF-2-4, HF-3-5, HF-4-5; CHANGE LOGIC to REMOVE 65 as a valid <i>Discharge Status</i> value.	
MIF	HF-4	Algorithm Change: Page HF 4-5; REMOVE allowable value “Z” from the evaluation of the data element ‘ <i>Adult Smoking History</i> ’. This change is due to the merging of definitions for allowable values “N” and “Z”.	
MIF	PR-2	NOTE that the measure denominator statement now excludes patients transferred to another acute care hospital.	
MIF	PR-2	Algorithm Change: Page PR-2-3; CHANGE LOGIC to REMOVE 65 as a valid <i>Discharge Status</i> value. CHANGE LOGIC to EXCLUDE patients with a <i>Discharge Status</i> value of 02 from the measure population [Category B].	
MIFs	All PN Measures	Algorithm Change: Patient Age calculation and exclusion of patients <18 years of age has now been moved into the common logic right below <i>Birthdate</i> .	
MIF	PN-1	Algorithm Change: Page PN 1-4; MODIFY Numerator and Denominator statements.	
MIF	PN-2	Algorithm Change: Pages PN-2-4, 2-5; MODIFY Numerator and Denominator statements. CHANGE LOGIC to REMOVE 65 as a valid <i>Discharge Status</i> value. ADD another check for Patient Age following <i>Transfer from Another ED</i> to exclude patients less than 65 years of age.	
MIFs	PN-3b, PN-4, PN-5	NOTE that in order to reflect alignment discussions, minor revisions were made to the text of the following subsections: Performance Measure Name; Description; Numerator Statement; and Denominator Statement.	
MIFs	PN-3b, PN-5, PN-5a, PN-5b	Data Elements ‘ <i>Initial Antibiotic Date</i> ’ and ‘ <i>Initial Antibiotic Time</i> ’ have been removed. This information will instead be derived using the data elements <i>Antibiotic Administration Date</i> and <i>Antibiotic Administration Time</i> respectively.	
MIF	PN-3b	Algorithm Change: Page PN-3b-4, 3b-6,3b-7; CHANGE Measure name. MODIFY Numerator and Denominator statements. The initial antibiotic date and time will now be derived from the antibiotic grid consisting of Antibiotic Name, Date, Time and Route used for PN-6, 6a, 6b. CHANGE LOGIC to include data elements <i>Antibiotic Name</i> , <i>Antibiotic Administration Date</i> , <i>Antibiotic Administration Time</i> from which the initial antibiotic date and time will now be derived.	
MIF	PN-4	Algorithm Change: Page PN-4-4 and PN 4-5; MODIFY Numerator and Denominator descriptions. CHANGE LOGIC to REMOVE 65 as a valid	

		<p><i>Discharge Status</i> value.</p> <p>REMOVE allowable value “Z” from the evaluation of the data element ‘<i>Adult Smoking History</i>’. This change is due to the merging of definitions for allowable values “N” and “Z”.</p>	
MIF	PN-5, 5a, 5b	<p>Algorithm Change: Pages PN-5-7, PN-5ab-7, 5ab-10; The initial antibiotic date and time will now be derived from the antibiotic grid consisting of Antibiotic Name, Date, Time and Route used for PN-6, 6a, 6b.</p> <p>CHANGE LOGIC to include data elements <i>Antibiotic Name, Antibiotic Administration Date, Antibiotic Administration Time</i> from which the initial antibiotic date and time will now be derived.</p>	
MIF	PN-6a, 6b	<p>Algorithm Change: NOTE the verbiage has changed for Measure Names, Numerator and Denominator statements for both PN-6a and 6b.</p>	
MIF	PN-6,6a,6b	<p>DELETE data element ‘<i>Antibiotic Administered During the First 36 Hours of Arrival</i>’.</p>	
MIF	PN-6a, 6b	<p>Algorithm Change: Pages PN-6a-8, PN-6b-8 in version 2.02;</p> <p>DELETE data element ‘<i>Antibiotic Administered During the First 36 Hours of Arrival</i>’</p>	
MIF	PN-6a, PN-6b	<p>Algorithm Change: Pages PN-6a-9, PN-6b-9 in version 2.02;</p> <p>CHANGE in LOGIC for processing antibiotic timings, including creating a derived variable ‘Antibiotic Days’ and change in ‘ANTIMINUTES’ evaluation.</p> <ul style="list-style-type: none"> • The ‘Antibiotic Days’ processing has been modified to allow only those cases where Antibiotic Days = 0 for all antibiotics (which previously was processed as ‘Start Date of Antibiotic = Arrival Date, for at least one antibiotic), to proceed directly to the antibiotic regimen check. • The variable ‘ANTIMINUTES’ has also been modified accordingly. • An additional step has been added in processing for both ‘Antibiotic Days’ and ‘ANTIMINUTES’ to exclude cases who received all antibiotics past 36 hours of arrival. 	
MIF	PN-7	<p>Algorithm Change: Page PN-7-5;</p> <p>ADD another check for Patient Age following <i>Transfer from Another ED</i> to exclude patients less than 50 years of age.</p> <p>CHANGE LOGIC to REMOVE 65 as a valid <i>Discharge Status</i> value.</p>	
MIF	SIP-1,2,3	<p>NOTE that the denominator statements have been modified to exclude patients who received antibiotics during the 24 hours prior to arrival. [As opposed to antibiotics at admission]</p>	
MIF	SIP-1,2,3	<p>Algorithm Change: Pages SIP-7, SIP-1-5, 2-5, 3-4;</p> <p>CHANGE LOGIC to check <i>ICD-9-CM Principal and Other Procedure Codes</i> in one decision point.</p>	
MIF	SIP-2	<p>NOTE that changes have been made to the Antibiotic</p>	

		Selection Regimen table to reflect the new antibiotic guidelines.	
MIF	SIP-2	Algorithm Change: Pages SIP-2-7, 2-8, 2-9; CHANGE in LOGIC to reflect the new antibiotic guidelines specifically for Hysterectomy and Colon Surgery patients who have Beta-Lactam allergy.	
MIF	SIP-3	Algorithm Change: Pages SIP-3-6; The last NOTE at the bottom of the page has been refined for better interpretation of the step in proceeding with <i>Prophylactic Antibiotic</i> .	
Missing and Invalid Data, National Hospital Quality Measure Verification Process	All Measures	NOTE that this section has been modified to clarify the JCAHO method for handling measurement system front-end edits.	
Sampling Methods	All Measures	NOTE that for all measure sets, major revisions have been made to the requirements for sample size and sampling interval to create the same sampling method for CMS and JCAHO.	
Data Quality	All Measures	NOTE that the requirement to submit data reliability results of measurement system re-abstraction to the Joint Commission is pending until such time as the process and the file formats are finalized between CMS and the Joint Commission.	
Risk Adjustment	PR-2	NOTE that changes have been made to the upper and lower limits of birth-weight groupings for appropriate risk factors. The sample Risk Model Information file has also been updated to reflect the changes to the birth-weight risk factors. Refer to Appendix B for further information.	
National Hospital Quality Measure Verification Process	AMI, PN and SIP Measures	NOTE that as part of the CMS/JCAHO alignment process some data elements have been added while others have been removed from the test case file format to reflect the changes in the Data Dictionary and the MIFS. NOTE that in the cases of PN and SIP, changes have been made to allow for 75 distinct occurrences of antibiotic administration (including associated information).	
National Hospital Quality Measure Data Transmission	All Measures	NOTE that all references to Numeric Measure Identifiers or Transmission Identifiers have been removed from other sections of the manual. That information is now mentioned only in the National Hospital Quality Measure Data Transmission section. ADDED information on ORYX data re-transmission policy. NOTE that the schedule of risk adjustment model release dates has been updated to include new dates.	
Appendix A	All Records	NOTE that shortened descriptions have been added to all ICD-9-CM code tables.	
Appendix B	AMI-9	NOTE that MAJOR revisions have been made to the tables of Risk Factor Definitions. <ul style="list-style-type: none"> ADD new potential risk factors AGEINT, AGEINT_SEXR, RF210_AGEINT, CRF401, CRF402, CRF403, CRF404, CRF405, CRF406, CRF407, CRF408, CRF409, CRF410, CRF411, CRF412, CRF413, CRF414, CRF415, CRF416, 	

		CRF417, CRF418, CRF419, CRF420, CRF421, CRF422, CRF423, CRF424, CRF425, CRF426, CRF427, CRF428, CRF429, CRF430.	
Appendix B	PR-1	<ul style="list-style-type: none"> • ADD new potential risk factors RF16M, RF100M, RF123M, RF124M, RF119M_RF124M. • MODIFY RF109M (insert code 653.51) 	
Appendix B	PR-2	<ul style="list-style-type: none"> • DELETE NBW2, NBW3, NBW4, NBW5. • ADD new potential risk factors RF322, RF323, RF351, RF352, RF353, RF354, RF355, RF356, RF357, RF358, RF351_RF322, RF361, RF362, RF363, RF364, RF365, RF366. • MODIFY lower limits of birth-weight groupings for pregnancy risk factors. 	
Appendix B	PR-3	<ul style="list-style-type: none"> • ADD new potential risk factors MAGE16L, RF101M, RF303M, RF321M, RF325M, RF327, RF328, RF303M_RF325M. • MODIFY RF303M (delete codes: 72.0, 72.1, 72.21, 72.29, 72.31, 72.39, 72.71, and 72.79) 	
Appendix C	PN-3b, PN-5, PN-5a, PN-5b, PN-6, PN-6a, PN-6b, SIP-1, SIP-2, SIP-3	NOTE that changes have been made to Table 2.1 (Antimicrobial Medications Table) through Table 4.0 (Antibiotic Allergy Table). The changes to the medication tables have been highlighted for user convenience.	
Appendix D	All Measures	MOVED Terminology subsection from MIFs to glossary or to the appropriate data element page in the Data Dictionary.	
Appendix G	All Measures	NOTE that this section has been UPDATED to provide links to resources available for measurement systems and their clients collecting and transmitting CMS/JCAHO National Hospital Quality Measure data.	
Appendix H	All Measures	MOVED Antibiotic Route (PN) Table 1.4 and Antibiotic Route (SIP) Table 1.8 to the Data Dictionary.	
Appendix I	AMI, HF, PN, SIP	NOTE this is a new section that has been added to provide information on Patient ID Element Edits for QIO Clinical Warehouse, effective with 01/01/05 Discharges.	