

Specifications Manual for National Hospital Quality Measures

Release Notes 1.05

December 8, 2005

Manual Section	Impacts	Description of Changes	Page(s)	Implementation Date
<p>Release Notes 1.05 provide modifications to the <i>Specifications Manual for National Hospital Quality Measures</i>.</p> <ul style="list-style-type: none"> • Changes include corrections and clarifications in response to questions and are based on ongoing alignment discussions between the Centers for Medicare & Medicaid Services and the Joint Commission. • Descriptions of changes are detailed. It may be advantageous to view the change in the version 1.05 documents. • The page numbers listed are from the 1.04a version of the manual. • Punctuation, spelling and formatting changes have not been listed. 				
Table of Contents	Table of Contents	<p>Replace the wording in the following sections with “This section has been moved to the <i>ORYX Data Quality Manual</i> and is available to performance measurement systems via the Joint Commission’s extranet site for measurement systems (PET)”:</p> <ul style="list-style-type: none"> • Section 3 - Missing and Invalid Data • Section 5 - Data Quality • Section 7 - Steps to Calculate Rates and Measurements 	None	04-01-06 Discharges
Using the Specifications Manual for National Hospital Quality Measures	Using the Specifications Manual	<ul style="list-style-type: none"> • Replace the wording in the following sections with “This section has been moved to the <i>ORYX Data Quality Manual</i> and is available to performance measurement systems via the Joint Commission’s extranet site for measurement systems (PET)”: o Section 3 - Missing and Invalid Data o Section 5 - Data Quality o Section 7 - Steps to Calculate Rates and Measurements • Remove “9.1” and “9.2” In Section 9 – National Hospital Quality Measure Data Transmission. • Make the following changes to the Appendix A – ICD-9-CM Code Tables section: <ul style="list-style-type: none"> o Remove the word “annually” from the sentence “ICD-9-CM codes are modified annually by the National Center for Health Statistics (NCHS) and the Centers for Medicare & Medicaid Services (CMS).” o Add the prefix “semi-” to the word “annually” in the following sentence: “The code tables in this Appendix are evaluated annually and modified based on these changes.” o Replace the sentence “All changes are effective annually beginning with October 1st discharges” with “Potential changes become effective beginning with either April 1st or October 1st discharges.” • Replace the word “LVF” in the phrase “LVF Assessment Inclusion Table” with “LVSF” in Appendix H. 	ix-xi	04-01-06 Discharges
Data Dictionary	Introduction	<p>Missing and Invalid Data: Replace the last sentence with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for additional details on the proper handling of missing and/or invalid data.”</p>	1-2	04-01-06 Discharges

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Data Dictionary	Alphabetical Data Element List	In the data element <i>Sample</i> row under the “Collected For” column, add “All Records” in front of “Used in data transmission” and place “Used in Data Transmission” in parentheses.	1-14	04-01-06 Discharges
Data Dictionary	<i>Admission Source</i>	To be consistent with current National Uniform Billing Committee (NUBC) information, update the following areas: <ul style="list-style-type: none"> • Collected For: Add PN-3a. Not listing this measure was an omission; it was not a change in the measure calculation. • Allowable Values: <ul style="list-style-type: none"> o Change the text for value “4” to the following: “Transfer from a hospital (Different Facility*) The patient was admitted to this facility as a hospital transfer from a different acute care facility where he or she was an inpatient, or Extramural Birth (if Admission Type = 4) A newborn born in a non-sterile environment *For Transfers from Hospital Inpatient in the Same Facility, see Code D” o Add value “D”: “Transfer from Hospital Inpatient in the Same Facility Resulting in a Separate Claim to the Payer (Effective 04-01-06). The patient was admitted to this facility as a transfer from hospital inpatient within this facility resulting in a separate claim to the payer.” 	1-21	04-01-06 Discharges
Measures Information	AMI Measure Population	Replace the last sentence in parentheses with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for greater detail.”	AMI-4	04-01-06 Discharges
Measures Information	AMI Data Element List	<ul style="list-style-type: none"> • Add <i>Sample</i> to the General Data Element Table. • In the General Data Element <i>Sample</i> row under the “Collected For” column, add “All Records (Used in Data Transmission).” 	AMI-2	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-1 Aspirin at Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-1-5	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-6 Beta Blocker at Arrival: <ul style="list-style-type: none"> • Add value “D” to the options located to the right of the <i>Admission Source</i> diamond. • Change the text of the right arrow for the second <i>Duration of Stay</i> diamond to “= 1.” 	AMI-6-5	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-7 Median Time to Thrombolysis: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-7-5	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-7a Thrombolytic Agent Received Within 30 Minutes of Hospital Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-7a-5	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-8 Median Time to PCI: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-8-5	04-01-06 Discharges

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Measure Information	AMI Analytic Flowchart	AMI-8a PCI Received Within 120 Minutes of Hospital Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-8a-5	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-9 Inpatient Mortality: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-9-4	04-01-06 Discharges
Measure Information	AMI Analytic Flowchart	AMI-T1b LDL Cholesterol Testing Within 24 Hours After Hospital Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	AMI-T1b-6	04-01-06 Discharges
Measures Information	HF Measure Population	Replace the last sentence in parentheses with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for greater detail.”	HF-4	04-01-06 Discharges
Measures Information	HF Data Element List	<ul style="list-style-type: none"> • Add <i>Sample</i> to the General Data Element Table. • In the General Data Element <i>Sample</i> row under the “Collected For” column, add “All Records (Used in Data Transmission).” 	HF-2	04-01-06 Discharges
Measures Information	PN Measure Population	Replace the last sentence in parentheses in the last paragraph with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for greater detail.”	PN-4	04-01-06 Discharges
Measures Information	PN Data Element List	<ul style="list-style-type: none"> • Add PN-3a to the General Data Element Table in the <i>Admission Source</i> row under the “Collected For” column. Not listing this measure was an omission; it was not a change in the measure calculation. • Add <i>Sample</i> to the General Data Element Table. • In the General Data Element <i>Sample</i> row under the “Collected For” column, add “All Records (Used in Data Transmission).” 	PN-2	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-1 Oxygenation Assessment: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-1-5	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-2 Pneumococcal Vaccination: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-2-5	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-3a Blood Cultures Performed Within 24 Hours Prior to or 24 Hours After Hospital Arrival for Patients Who Were Transferred or Admitted to the ICU Within 24 Hours of Hospital Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-3a-5	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-3b Blood Cultures Performed in the Emergency Department Prior to Initial Antibiotic Received in Hospital: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-3b-5	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-5 Antibiotic Timing (Median): Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-5-6	04-01-06 Discharges

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Measure Information	PN Analytic Flowchart	PN-5a Initial Antibiotic Received Within 8 Hours of Hospital Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-5ab-6	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-5b Initial Antibiotic Received Within 4 Hours of Hospital Arrival: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-5ab-9	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-6 Initial Antibiotic Selection for Community-Acquired Pneumonia (CAP) in Immunocompetent Patients: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-6, 6ab-7	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-6a Initial Antibiotic Selection for Community-Acquired Pneumonia (CAP) in Immunocompetent Patients – Intensive Care Unit (ICU) Patients: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-6, 6ab-15	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-6b Initial Antibiotic Selection for Community-Acquired Pneumonia (CAP) in Immunocompetent Patients – Non ICU Patients: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN6, 6ab-21	04-01-06 Discharges
Measure Information	PN Analytic Flowchart	PN-7 Influenza Vaccination: Add value “D” to the options located to the right of the <i>Admission Source</i> diamond.	PN-7-5	04-01-06 Discharges
Measures Information	SIP Measure Population	Replace the last sentence in the second to the last paragraph (beginning “Please refer...”) with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for additional details and examples related to stratification.”	SIP-6	04-01-06 Discharges
Measures Information	SIP Data Element List	<ul style="list-style-type: none"> • Add <i>Sample</i> to the General Data Element Table. • In the General Data Element <i>Sample</i> row under the “Collected For” column, add “All Records (Used in Data Transmission).” 	SIP-3	04-01-06 Discharges
Measures Information	PR Measure Population	Replace the last sentence in parentheses with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for greater detail.”	PR-3	04-01-06 Discharges
Measures Information	PR Data Element List	<ul style="list-style-type: none"> • Add <i>Sample</i> to the General Data Element Table. • In the General Data Element <i>Sample</i> row under the “Collected For” column, add “All Records (Used in Data Transmission).” 	PR-2	04-01-06 Discharges
Missing and Invalid Data	All	This section of the manual has been moved to the <i>ORYX® Data Quality Manual</i> .	Section 3	04-01-06 Discharges
Data Quality	All	This section of the manual has been moved to the <i>ORYX® Data Quality Manual</i> .	Section 5	04-01-06 Discharges
Risk Adjustment	Risk Model Application Steps	Update the following sections: <ul style="list-style-type: none"> • Missing Data Percentage: Replace the last sentence with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> and <i>ORYX Technical Implementation Guide</i> for additional 	6-5, 6-6	04-01-06 Discharges

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		information.” <ul style="list-style-type: none"> • Calculate the HCO aggregate risk-adjustment data elements: Replace the last two sentences with “Performance measurement systems need to refer to the <i>ORYX Data Quality Manual</i> and <i>ORYX Technical Implementation Guide</i> for additional details, formulas, and transmission specifications.” 		
Steps to Calculate Rates and Measurements	All	This section of the manual has been moved to the <i>ORYX® Data Quality Manual</i> .	Section 7	04-01-06 Discharges
National Hospital Quality Measure Verification Process	Introduction	Make the following changes to the first bulleted section: <ul style="list-style-type: none"> • Remove the first parenthetical remark “for details refer to the Missing and Invalid Data section of this manual.” • Replace the second parenthetical remark with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for additional details about missing and invalid data and <i>Measure Category Assignments</i>.” 	8-1	04-01-06 Discharges
National Hospital Quality Measure Verification Process	Front-end Filters and Verification	Replace the first sentence in option 1 with “Use the Missing/Invalid data category assignments described in the <i>ORYX Data Quality Manual</i> to identify EOC records with missing or invalid data for each national hospital quality measure.”	8-4	04-01-06 Discharges
CMS National Hospital Quality Measure Data Transmission	XML File Layout	Modify the XML File Layout according to these release notes.	9-15	04-01-06 Discharges
Appendix C	Table 1.1 Aspirin and Aspirin-Containing Medications	Add the following medications: <ul style="list-style-type: none"> • Azdone • BC Allergy Sinus Cold Powder • BC Arthritis Strength Powder • BC Powder • BC Sinus Cold Powder • Butal Compound • Butalbital, Aspirin And Caffeine • Butalbital, Aspirin, Caffeine and Codeine Phosphate • Carisoprodol And Aspirin • Carisoprodol, Aspirin And Codeine Phosphate • Compound-65 Pulvules • Darvon Compound-65 • Endodan • Equagesic • Goody’s Body Pain Formula Powder • Goody’s Extra Strength Headache Powder 	Appendix C-1, C-2, C-3	04-01-06 Discharges

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		<ul style="list-style-type: none"> • Goody’s Extra Strength Pain Relief Tablets • Invagesic • Invagesic Forte • Lanorinal • Methocarbamol And Aspirin • Norgesic • Norgesic Forte • Orphenadrine Citrate, Aspirin, And Caffeine • Orphengesic • Orphengesic Forte • Oxycodone And Aspirin • Percodan • Percodan-Demi • Propoxyphene Compound 65 • Robaxisal • Soma Compound • Soma Compound W/Codeine • Synalgos-DC • Vanquish 		
Appendix C	Table 1.2 ACEIs	Add Quinaretic.	Appendix C-5	04-01-06 Discharges
Appendix C	Table 1.7 ARBs	Add Benicar HCT.	Appendix C-10	04-01-06 Discharges
Appendix D	Glossary of Terms	<ul style="list-style-type: none"> • Replace the last sentence in the missing data term with “Performance measurement systems need to refer to the <i>ORYX® Data Quality Manual</i> for more information.” • Replace the last word “Cardiac” in the stratified measure term with “Other Cardiac Surgery – (SIP-1c) 	Appendix D-6, D-11	04-01-06 Discharges