



Q&A Aug 4, 2020 Joint Commission Vendor and Consultant Webinar

Topic	Number	Question	Answer
General	1	What is the best way, in your opinion, for vendors to stay up to date on measure specs, requirements, and submission details?	Vendors may attend our monthly Office Hours. This includes vendors that are supporting their hospitals by providing a chart-abstraction aggregate data report and not by logging into the DDSP. If you register and don't attend the live call, the recording is typically available via the same link within a couple of hours. <input type="checkbox"/> In addition, we recommend watching our main website for performance measurement: https://www.jointcommission.org/measurement/
General	2	Can hospitals request access for their vendor to both the DDSP and CMIP in the same email request, understanding that different sign on credentials are needed.	The DDSP and CMIP are on two different Platforms with their own security access protocols. DDSP: Hospital staff with DDSP Invite & Manager User access sends an invitation to the vendor staff that will be accessing their DDSP Workspace. CMIP: Hospitals should evaluate if it is appropriate to bring vendors onto their JC Connect(R) site where CMIP is available. JC Connect contains everything applicable for a hospital's accreditation and certification activities. If a hospital determines it is appropriate to bring a vendor onto JC Connect, they should ensure the user's Security Access are appropriate to limit their access to CMIP. Hospital staff that are Security Administrators on JC Connect can create a new user for the vendor staff that need access.
General	3	How do you sign up for notifications through "Perspectives"?	Perspectives is a subscription publication. Below is a link to the home page for the publication: <input type="checkbox"/> https://store.jcrinc.com/the-joint-commission-perspectives/?_ga=2.135005108.474765313.1596557662-1917965766.1568982973
General	4	What are the ORYX Requirements for ED, VTE, and IPF?	Freestanding Psych facilities are Required to submit the HBIPS measures to The Joint Commission. The majority of these hospitals also participate in CMS' Inpatient Psychiatric Facility Prospective Payment System (IPF PPS) quality reporting program which require the hospitals to submit IMM, SUB, and TOB measures, along with HBIPS measures. The Joint Commission offers the IMM-2, SUB-2/3, and TOB-2/3 measures to the Freestanding Psych facilities to allow them to submit the same data to both CMS and The Joint Commission. <input type="checkbox"/> Smaller hospitals and CAHs have no Required measures - they must submit data on any 3 measures, chart-abstracted and/or eCQMs. For this reason, we continue to make a variety of measures available for their use, including ED-1/2 and VTE-6.
General	5	Do we need to login to JC Connect to remove the selections for the chart-abstracted measures ED-2, PC-03, and PC-04?	PC-03 and PC-04 have been retired and not available for any hospital on the DDSP. The DDSP will make ED-2 available, but it is no longer a required measure for any hospital.
General	6	Will vendors have access to the National rates or benchmarks as we do now?	Data provided in NCG files (National, State and Accredited compare groups) are now included with the Accelerate PI® Dashboards available to hospitals via JC Connect®. Due to extended deadlines and optional submissions for CY2020 data, The Joint Commission continues to evaluate the results of the data. Upon completion of the analysis, a decision will be made regarding any publication of benchmarks and national compare groups.
eCQM	1	It seems there are more eCQMs on the development roadmap. Is the plan to have the eCQMs that are only applicable to The Joint Commission (ex. ePC-01, ePC-02) be required for hospital accreditation and/or certification in the future or will they remain "optional"?	We are currently evaluating which programs (i.e. accreditation vs certification) are appropriate for those eCQMs in development/testing. It is likely the ePC-06 measure will be included in the list of optional eCQMs for accreditation as the chart based PC-06 measure is already included in our program. We continue to evaluate which program is appropriate for the patient blood management measures (ePBM 01,03,04).
Certification	1	Please confirm that CMIP data is still entered as monthly data points?	Yes, the chart-abstracted data for standardized certification measures is entered into CMIP as monthly data points.
Certification	2	If a hospital is not in a certification program but wishes to submit chart-abstracted stroke measures would the HCO use the DDSP for that or, because they are stroke measures, would they be entered into the CMIP site anyway?	The chart-abstracted Stroke measures are only available for hospitals participating in the appropriate Certification programs and the CMIP application is restricted to these facilities. <input type="checkbox"/> eCQM Stroke measures are available for all accredited hospitals to submit via the DDSP.
Chart-Abstracted Measures	1	How will vendors / consultants know which chart-abstracted measures to submit for each hospital?	If a hospital has a Required measure based upon their ORYX Policies (e.g., HBIPS for Free-stand Psych facilities), it is listed as such on the Measure List page within the DDSP. Beyond that, vendors must work with their hospitals to determine which measures they want you to submit for them.
Chart-Abstracted Measures	2	Will the data entry guide be updated along the same timelines as the specification manuals? for example if an exclusion is removed or added to a measure how long will it take for that to be reflected in the data entry guide?	We anticipate updating it once for the data collection year - after both versions of the Specifications manual for that year has been released.
Chart-Abstracted Measures	3	We are looking at the documentation for DDSP and ran into a question for the stratified measure tools. Can you tell us if the last 3 data elements for Tool #3, 4, and 5 are applicable to all stratifications or is this only for the overall measure?	The 'Total Exclusion Count' and 'Total Count of Cases with Category Y or X' are calculated by the DDSP. For stratified measures, they are calculated for the Overall measure. The 'Measure Exclusions' are entered based upon the Overall measure. This includes OP-18 where the Overall measure rates are not submitted.
Chart-Abstracted Measures	4	Are monthly or quarterly chart-abstracted data points entered into the DDSP?	Chart-abstracted measure data is entered as monthly data points into the DDSP. The DDSP submission deadline is quarterly.

Chart-Abstracted Measures	5	Do measures selected for chart-abstracted submission via DDSP require a full 12 months of data to be submitted?	<p>Hospitals with Required measures (e.g., PC-01 or the HBIPS measures) must submit a full 12 months of data for these measures.</p> <p>Hospitals which choose to report other available measures must also submit a full 12 months of data. Once a measure has been submitted for a quarter, it becomes a 'Required' measure for future quarters during the calendar year. For example, if a hospital chooses to submit a measure starting 3Q2020, they must complete the calendar year and also submit 4Q2020 data for the measure.</p> <p>NOTE: Submission of 2020 data is based on the modifications for reporting 1Q2020 and 2Q2020 chart-abstracted data. The Joint Commission seeks to reduce burden on organizations by making chart-abstracted data submission optional during 1Q2020 and 2Q2020. For those organizations who can and choose to submit data, the Joint Commission will continue to provide feedback reports and benchmarks of available data.</p>
Chart-Abstracted Measures	6	Can a hospital submit a quarter's worth of data for a measure when they do not have data for a given month?	<p>Yes, a hospital can attest to not having any cases for a specific month or HIBPS strata. There are two ways in which the attestation can be entered. <input type="checkbox"/></p> <p><input type="checkbox"/> Initial Population (IP) Attestation: If a measure/strata for a month has no patients in the IP, the user will enter a zero for the IP and check the box 'Zero Initial Population Case Attestation'. <input type="checkbox"/></p> <p><input type="checkbox"/> Denominator Attestation: If a measure/strata for a month has patients in the IP, but all cases go to Category B such that there are no cases in the Denominator, the user will enter a zero for the Denominator and check the box 'Zero Denominator Case Attestation'. <input type="checkbox"/></p> <p>NOTE: The exemption for not submitting patient-level data when the hospital has five or fewer discharges that fit the denominator criteria for the calendar quarter is no longer applicable for chart-abstracted measures as hospitals are only submitting aggregate data.</p>
Chart-Abstracted Measures	7	What will occur if only one or two months in a quarter are completed for a measure before the deadline?	<p>The month that has been entered will be submitted. <input type="checkbox"/></p> <p><input type="checkbox"/> The months that are not entered will be reported as 'missing' data and that information will be utilized in downstream statistical analysis, reports and on Quality Check. <input type="checkbox"/></p> <p><input type="checkbox"/> The DDSP does not provide the ability to 'resubmit' chart-abstracted data once the quarter has been closed so it is important to enter all data by the quarter's submission deadline.</p>
Chart-Abstracted Measures	8	May chart-abstracted data be changed prior to the submission deadline for the quarter?	Yes. Chart-abstracted data for the 3 months in the quarter may be changed up to the submission deadline for the quarter.
Chart-Abstracted Measures	9	May historical chart-abstracted data be added or corrected once the deadline has past for a given quarter? Example, update 1Q2020 data after the 10/31/2020 submission deadline.	No. The DDSP does not provide the ability to 'resubmit' chart-abstracted data once the quarter has been closed.
Chart-Abstracted Measures	10	What is expected in the fields for Sampling Frequency and Sample Size for HBIPS overall measures, since each stratum can be answered differently?	<p>For HBIPS, a hospital is expected to choose one sampling methodology or Sampling Frequency for the entire measure topic (quarterly, monthly, or not sampling). The sampling methodology should not be determined for each strata.</p> <p>The HBIPS specific sampling requirements is at the strata level, so the Sample Size will be entered for each strata.</p>
Chart-Abstracted Measures	11	HBIPS: A hospital samples adult population monthly, but does 100% of older adults. Do they answer monthly for both?	Yes, they will select that they sampled Monthly, which means this is the sampling table that was used for the measure. The fact that they sampled 100% for the Older Adults is OK. Whether this occurred because the hospital oversampled or the sampling table instructed them to sample 100% based on the number of cases in the IP doesn't matter - in either case, they used the Monthly sampling table for all strata. If they didn't sample any of the strata, then they would choose 'not sampling' for the overall measure.
Chart-Abstracted Measures	12	HBIPS-1 and 5 (slide 37): Why is "number of cases with a psychiatric diagnosis excluded because they were not patients in an inpatient psychiatric care setting" a Measure Exclusion question when a patient is already excluded from the overall HBIPS Initial Population for not being in a Psych Setting? This number will never be higher than 0, because the IP is what feeds into the measure algorithms.	<p>The Initial Population for both HBIPS-1 and 5 allow patients into the measure if the data element Psychiatric Care Setting is missing. This was done because during beta testing of these measures it became apparent that not all facilities could set the value of this data element before manual data abstraction had to occur.</p> <p>Hospitals that are able to pre-set this data element before the IP is executed, will be entering a zero.</p> <p>Hospitals that are not able to pre-set this data element, will need to answer the Measure Exclusion question based on how they manually abstracted the data for their patients.</p>
Chart-Abstracted Measures	13	Slide 18 - Will there be data file submission options for the DDSP for Chart-Abstracted measures in the future?	A file submission option is being discussed; however, it has not been determined yet if one will be implemented in the future.
Chart-Abstracted Measures	14	Will there be any higher-level reports for users with access to multiple hospitals for chart-abstracted measure purposes which show all the hospital's which are available under a user? E.g., a report that shows what measures should be submitted for all HCO's under our account?	Hospitals no longer provide their measure selections prior to submitting data, so users must work with hospital management to determine which measures are to be submitted. The Chart-Abstracted Measure module does provide information concerning Required measures (e.g., HBIPS for Freestanding Psych facilities or all PC measures for large hospital with 300 or more live births) for each hospital. The Joint Commission is evaluating what the requirements would be for this potential future functionality for the Chart-Abstraction Measure module.