Introduction to QSRS & Overview of Requests for Hospitals Web link:

Phone number:

Audio Access Code:

PRESENTED BY:

BFCC NCORC

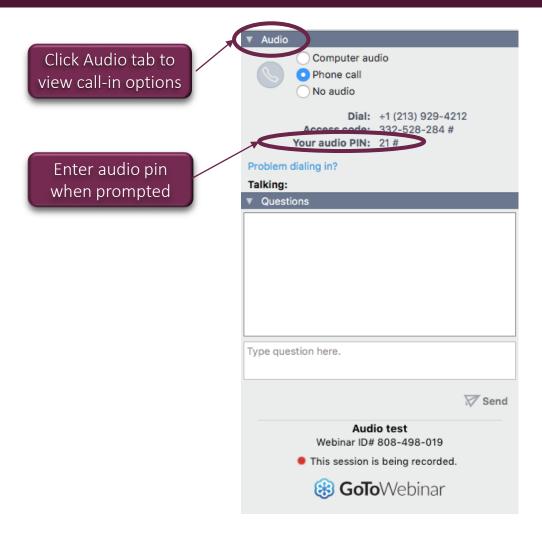
March 1, 2023



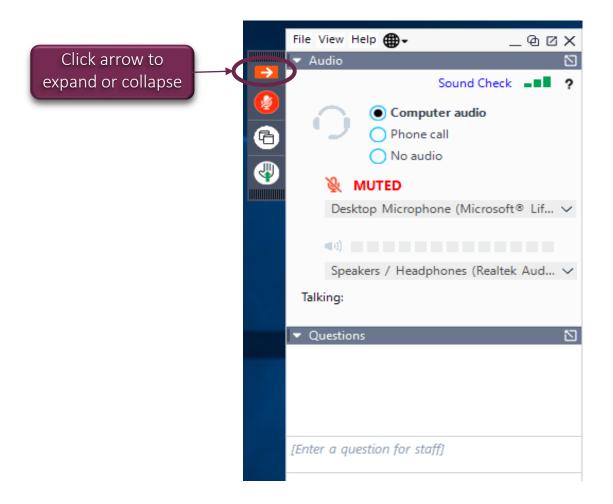


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Getting Connected to Audio



Setting Screen View





Collaborating/Asking Questions

Enabling Audio



Contributing a Question



Agenda

Торіс	Speaker(s)			
Welcome	TBN, CMS			
Overview of QSRS	Wendy Gary, NCORC			
Your Hospital was Sampled to Provide Data for QSRS				
Submitting Data to QSRS				
Questions & Wrap Up				





Q: What is QSRS?

A: The Quality and Safety Review System (QSRS) is a patient safety surveillance system developed by the Agency for Healthcare Research and Quality.

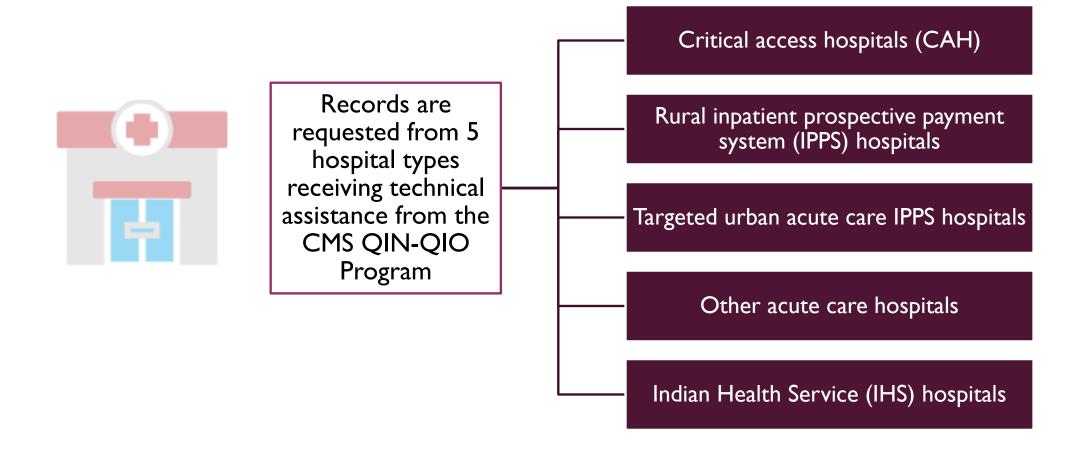
- Measures the magnitude of adverse events among hospital patients covered by
 Medicare to monitor trends and assess the impact of national patient safety initiatives
- Informs national and local quality improvement efforts

Q: Where do QSRS data come from?

A: A sample of hospitals from across the country submit medical records for a small number of patients who received care in their facility. Those medical records are reviewed and data are captured in QSRS.

Q: How are hospitals sampled?

A: Annually ~700 hospitals are randomly sampled. Each receives a quarterly request to provide medical records.



Q: What data are collected in QSRS?

A: QSRS includes an array of adverse event measures, including:

- Opioid use/misuse
- Surgical site infections
- Other surgical and anesthesia-related adverse events
- Obstetric and neonatal adverse events
- "All-cause harm" measurement
- Provides additional detail for the most frequently occurring events

Q: Are QSRS data available to the public? Can I see my hospital's data?

A: Currently, QSRS data are not available to the public; data are used to help AHRQ and CMS quantify and categorize adverse events occurring in hospitals and develop improvement strategies.

Your Hospital was Sampled to Provide Data for QSRS

Hospitals Sampled to Provide Data for QSRS

Q: My hospital was sampled to provide data for QSRS; what do I need to do?

A: You should have received a Fed Ex package explaining that your hospital was randomly sampled to provide data for QSRS. Quarterly for I year, you will be asked to submit a sample of patient records for Medicare beneficiaries hospitalized as inpatients.

Some hospitals will receive a 2nd package this month requesting you to submit medical records. Other hospitals will get requests in the upcoming months. You will receive 4 requests in total over the coming year.

Hospitals Sampled to Provide Data for QSRS

Q: Do I have to submit data to QSRS?

A: You are required to submit requested data to QSRS. Records that are not received may be subject to a technical denial of Medicare payment for non-compliance.

You will get a reminder if your records are not received within 30 days.

Contact Name and Address for Hospitals

Q: Where will requests for my hospital be sent?

A: FedEx packages are sent to the MEDICAL RECORD DIRECTOR using the address of the Medical Records CDAC contact in PRS

- Verify the contact information for your hospital:
 Provider Contact Lookup Form (qualityreportingcenter.com)
- Get additional help if with your hospital contact information:
 Contact Us (qualityreportingcenter.com)

Q: How do I submit data to QSRS?

- A: You will receive a Fed Ex package with a list of patient records to submit. Follow the instructions in the letter and submit your records electronically including a cover sheet for each patient record.
- Submit via CMS Managed File Transfer
- Submit via removable physical media (e.g. CD/DVD/flash drive).
- You will be reimbursed \$3/record submitted

Q: How do access Managed File Transfer?

A: To access Managed File Transfer, you will need to log on to your secure HARP account through CMS.

Managed File Transfer Login (cms.gov)

Q: Can I submit paper records?

A: If your organization cannot submit records electronically, you must get a waiver from the BFCC-QIO in your state.

Locate Your BFCC-QIO | qioprogram.org

Q: What do I need to submit?

A: You need to submit the entire inpatient record for each case on your case listing.

Data Required for QSRS

- Admission/Discharge/Transfer Record
- All Diagnostic Reports
- Ambulance Records
- Anesthesia Record
- CABG Report
- Cardiac Catheterization Report
- Coding Summary
- Consultant's Reports
- Discharge Instructions

- Discharge Summary
- Echocardiogram Reports
- Electrocardiogram Reports
- Emergency Room Records
- Face Sheets
- Graphic Flow Sheets
- History & Physical
- Laboratory/Pathology Reports
- Medication Records (MARs)

- Nurse's Notes
- Operative Reports
- Physician's Orders
- Physician's Progress Report
- PTCA Reports
- Rhythm Strips
- Special Procedures Reports
- Stress Test Reports
- Transfer Notes/Records

Q: How much time do I have to submit my records?

A: Records are to be submitted within 14 days.

- You will get a reminder if your records are not received within 30 days.
- Hospitals are subject to technical denial for records not received within 60 days.

Process at a glance



I. Sampled Hospitals receive a FedEx package notifying them of their selection



2. Quarterly, hospitals receive a FedEx package requesting specific records to be submitted



3. Hospitals submit complete records within 14 days via CMS Managed File Transfer or electronic media



4. Reminder are sent for records are not received within 30 days



5. Hospitals are subject to technical denial for records not received within 60 days

Additional Questions?

Wrap Up

Follow-up for Support

TiSTA Provider help desk for record submission specifications

(717) 718-1230 extension 201





Participant Feedback

After the call, please take a minute or so to complete a very brief survey that will pop up in a new tab on your open web browser.

We appreciate your feedback.





Appendix A: Detailed QSRS Measures/Modules

QSRS Measures/Modules (1 of 3)

- Blood and Blood Product
 - Patient sustained one or more adverse outcomes related to receipt of blood or blood product transfusion
- Birth Maternal
 - Patients sustained one or more maternal adverse outcomes
- Fall
 - Patients with one or more falls during stay
- Healthcare-associated Infection (HAI)
 - Urinary Tract Infections (UTI)
 - Catheter-associated urinary tract infection (CAUTI)
 - Central Line-Associated Bloodstream Infections
 - Clostridium Difficile Infection (CDI) acquired during stay
 - CORONAVIRUS (COVID-19)
 - HAP (Hospital Acquired Pneumonia) not preceded by surgery
 - Major surgical procedure preceded HAP (Hospital Acquired Pneumonia)
 - Surgical Site Infection (SSI) following operating room procedures

QSRS Measures/Modules (2 of 3)

Medication

- Adverse Event Associated with IV Unfractionated
- Adverse event associated with warfarin
- Adverse event associated with LMWH, thrombin inhibitor or factor Xa inhibitor
- Adverse Event Associated with Hypoglycemic Agent
- Adverse event within 24 hrs. following opioid administration
- Anaphylaxis
- Possible overdose
- Pressure Injury (Pressure Ulcer)
 - Stays with one or more pressure ulcer adverse events
- Surgery or Anesthesia
 - Patient sustained one or more adverse outcomes from one or more operating room procedures or instance of anesthesia during stay
- Venous Thromboembolism (VTE)
 - Other VTEs (not surgery-related)
 - Patient developed VTE/PE following listed procedure (no VTE prior to procedure)

QSRS Measures/Modules (3 of 3)

- Other Outcomes of Interest (OOI)
 - latrogenic pneumothorax associated with Non-OR Procedure
 - Unintended laceration or puncture associated with Non-OR Procedure
 - Intravascular air embolism during stay
 - Arterial puncture during stay
 - Mechanical adverse event associated with central venous catheter
 - Patient experienced burn during stay
 - Patient attempted suicide during stay
 - Patient harmed from use of physical restraint (other than bedrails)
 - Patient harmed from accident associated with bedrails (other than fall)
 - Patient elopement during stay

Appendix B: Sample Distribution Example

Hospital Sample (example distribution)

	2021 Quarter 3			
	(07/01/2021-09/30/2021)			
Sample Cohorts	#	%		
Medicare Other ACH (MOACH)	2,019	31.1		
Medicare Rural IPPS (MRIPPS)	1,246	19.2		
Medicare Targeted Urban ACH (MTUACH)	1,717	26.5		
Total ACH (Excluding CAH/HIS)	4,982	76.8		
Medicare Critical Access Hospitals (CAH)	1,217	18.7		
Medicare Indian Health Service Hospital (IHS)	292	4.5		
Total Discharges	6,491	100.0		

Appendix C: Sample QSRS Report

Sample Report: Stays With at Least One AE (does not contain real data)

Sample Cohorts	Quarter 1, 2021 (01/01/2021-03/31/2021)		Quarter 2, 2021 (04/01/2021-06/30/2021)		Quarter 3, 2021 (07/01/2021-09/30/2021)				
	Total	At least one Adverse Event during stay		Total	At least one Adverse Event during stay		Total	At least one Adverse Event during stay	
		Total (#)	Rate (%, 95% CI)		Total (#)	Rate (%, 95% CI)		Total (#)	Rate (%, 95% CI)
Medicare Other ACH (MOACH)	3051	155	8.4 (6.37- 8.62)	2065	215	6.5 (5.49- 7.63)	2019	134	6.6 (5.63- 7.81)
Medicare Rural IPPS (MRIPPS)	1183	86	7.3 (5.92- 8.89)	1221	60	4.8 (3.72- 6.14)	1246	81	6.7 (4.54- 7.13)
Medicare Targeted Urban ACH (MTUACH)	430	42	9.8 (7.31- 12.94)	896	78	6.2 (4.81- 8.01)	1717	145	8.4 (7.22- 9.85)
Medicare Critical Access Hospitals (CAH)	891	52	8.6 (2.56- 5.03)	683	29	3.0 (2.06-4.2)	1217	27	3.0 (2.21- 4.16)
Medicare Indian Health Service Hospital (IHS)	300	26	8.7 (5.98- 12.40)	298	8	2.7 (1.37- 5.21)	292	10	3.4 (4.87- 6.19)
Total ACH (Excluding CAH/IHS)	3704	283	7.6 (6.83- 8.54)	4182	250	6.0 (5.30- 6.74)	3982	250	7.0 (6.35- 7.77)
Total Overall	4895	541	7.0 (6.29- 7.71)	3463	287	5.2 (4.63- 5.82)	6491	397	6.1 (5.56- 6.73)

Thank You

Publication No. ACP-2023-NCORC-0089. This material was prepared by Avar Consulting, Inc., a Medicare Quality Improvement Organization under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. The information contained in this document is conditionally valid through May 2024.



