PRESS GANEY HeM Version 1.5

2023 REAL WORLD TESTING RESULTS

GENERAL INFORMATION

Plan Report ID Number: [For ONC-Authorized Certification Body use only]

Developer Name: Press Ganey Associates LLC

Product Name(s):Quality Performer HeM (Hospital Electronic Measures) Module Version Number(s): 1.5

Certified Health IT Product List (CHPL) Product Number(s): 15.04.04.2834.Qual.15.00.0.181231

Developer Real World Testing Plan Page URL: Quality performer certification | Press Ganey

Developer Real World Testing Results Report Page URL [if different from above]:

CHANGES TO ORIGINAL PLAN

If a developer has made any changes to their approach for Real World Testing that differs from what was outlined in their plan, note these changes here.

Summary of Change	Reason	Impact
(2022 Test Plan Change) A request to client to give us the Total population per eCQM for each Quarter for § 170.315(c)(2) Import from a client's EHR for Reporting purposes.	It was realized that for better Import comparison, the client's counts compared to Press Ganey Counts would be a better measure of success	A Press Ganey Advisor for the Client has worked with the Client to obtain these total population counts per Measure from the Client's Epic EHR system. However, the client cannot obtain these total population numbers from their EHR system. This comparison is not available at this time.

SUMMARY OF TESTING METHODS AND KEY FINDINGS

§ 170.315(c)(1) Record and Export

- This use case tracks the ability to upload a client file, a QRDA I file, with accurate case counts when compared to the QRDA export file.
- The client uploaded 2023 Q1, Q2 and Q3 Data to a production facility (10231) set up for this testing on Jan 5, 2024.
- The Measures included: eOPI-1, eSTK-2, eSTK-5, eSTK-6.
    - Q4 Data was not available at the time of this report creation.
- QRDA files uploaded without errors, based on the counts of cases on the Data Upload HeM page.
    - The number of QRDA files uploaded for each Quarter, had to be obtained via a Query, since all QRDAs for all Quarters were uploaded on 1/5/2024 to the Test Production Facility.

Measures Uploaded Q1 2023 Data 1/5/2024 into Production Test Facility	Number of Files Uploaded – 4995 (Total for all three Quarters) 1st Qtr – 1350	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts/ in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	119 in Pop 31 Not in Pop	0	149/150
eSTK-5 (CMS72)	Unable to obtain	118 in Pop 31 Not in Population	0	149/150
eSTK-6 (CMS105)	Unable to obtain	118 in Population 31 Not in Population	0	149/150
eOPI-1 (CMS506)	Unable to obtain	1107 In Population 0 Not in Population	0	1045/1107

Measures Uploaded Q2 2023 Data 1/5/2024 into Production Test Facility	Number of Files Uploaded – 4995 (Total for all three Quarters) 2nd Qtr – 1252	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts/ in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	117 in Population 22 Not in Population	0	137/139
eSTK-5 (CMS72)	Unable to obtain	117 in Population 22 Not in Population	0	137/139
eSTK-6 (CMS105)	Unable to obtain	117 in Population 22 Not in Population	0	137/139
eOPI-1 (CMS506)	Unable to obtain	1126 in Population 0 Not in Population	0	1055/1126

Measures Uploaded Q3 2023 Data 1/5/2024 into Production Test Facility	Number of Files Uploaded – 4995 (Total for all three Quarters) 3rd Qtr – 2388	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts/ in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	109 in Population 21 Not in Population	0	129/132
eSTK-5 (CMS72)	Unable to obtain	110 in Population 21 Not in Population	0	129/132
eSTK-6 (CMS105)	Unable to obtain	106 in Population 21 Not in Population	0	129/132
eOPI-1 (CMS506)	Unable to obtain	1274 in Population 0 Not in Population	0	1176/1274

§ 170.315(c)(2) Import from a client's EHR

- This case count verifies that the number of cases imported is equal to the number of cases that will be evaluated for the eCQM Initial Patient Population, Denominator, Denominator Exclusion, Numerator and Denominator Exception case results. The case counts evaluated can fall into multiple measures or not qualify for any Measure.

Measures 1st Quarter	Total Population Count per eMeasure per Quarter in Epic	Number of Cases Total in IPP + Denominator+ Denominator Exclusion + Numerator + Denominator Exceptions	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	150	NA
eSTK-5 (CMS72)	Unable to obtain	150	NA
eSTK-6 (CMS105)	Unable to obtain	150	NA
eOPI-1 (CMS506)	Unable to obtain	1107	NA

Measures 2nd Quarter	Total Population Count per eMeasure per Quarter in Epic	Number of Cases Total in IPP + Denominator+ Denominator Exclusion + Numerator + Denominator Exceptions	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	139	NA
eSTK-5 (CMS72)	Unable to obtain	139	NA
eSTK-6 (CMS105)	Unable to obtain	139	NA
eOPI-1 (CMS506)	Unable to obtain	1126	NA

Measures 3rd Quarter	Total Population Count per eMeasure per Quarter in Epic	Number of Cases Total in IPP + Denominator+ Denominator Exclusion + Numerator + Denominator Exceptions	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	132	NA
eSTK-5 (CMS72)	Unable to obtain	132	NA
eSTK-6 (CMS105)	Unable to obtain	132	NA
eOPI-1 (CMS506)	Unable to obtain	1274	NA

§ 170.315(c)(3) Report

- The CMS Report output generated on 1/9/2024 confirms the successful transmission, accurate reporting, and absence of any file formatting issues (with QRDA I containing all required data elements). There were no rejections or file formatting problems identified. Additionally, the case counts for 2023 Q1, Q2, and Q3 aligns with CMS case counts.

Q1 2023 Report Summary

Measure Category	In Population Case Count (All Measure Cats)	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS-eSTK-2	150	0	55	64	0
PG-eSTK-2	150	0	55	64	0
CMS- eSTK-5	150	8	17	93	1
PG-eSTK-5	150	8	17	93	1
CMS- eSTK-6	150	0	55	63	1
PG-eSTK-6	150	0	55	63	1
CMS- eOPI-1	1107	704	289	114	NA
PG- eOPI-1	1107	704	289	114	NA

Q2 2023 Report Summary

Measure Category	In Population Case Count (All Measure Cats)	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS-eSTK-2	139	0	54	63	0
PG-eSTK-2	139	0	54	63	0
CMS- eSTK-5	139	4	26	87	0
PG-eSTK-5	139	4	26	87	0
CMS- eSTK-6	139	0	54	57	6
PG-eSTK-6	139	0	54	57	6
CMS- eOPI-1	1126	739	285	102	NA
PG- eOPI-1	1126	739	285	102	NA

Q3 2023 Report Summary

Measure Category	In Population Case Count (All Measure Cats)	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS-eSTK-2	132	2	57	50	2
PG-eSTK-2	132	2	57	50	2
CMS- eSTK-5	132	3	36	71	1
PG-eSTK-5	132	3	36	71	1
CMS- eSTK-6	132	1	57	48	5
PG-eSTK-6	132	1	57	48	5
CMS- eOPI-1	1274	789	334	151	NA
PG- eOPI-1	1274	789	334	151	NA

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

Indicate as to whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of your health IT product(s).

☐ Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below.

[X] No, none of my products include these voluntary standards.

Standard (and version)	
Updated certification criteria and associated product	
CHPL Product Number	
Conformance measure	

CARE SETTING(S)

The HeM Module contains both inpatient and emergency department patient data. The use of the Module, however, is not within the physical inpatient and emergency department care settings. The HeM Module is used by the Quality Department and/or the Information Technology Department in their physical space. Often the two departments work together to upload files, evaluate the HeM Module data and performance results.

METRICS AND OUTCOMES

Measurement /Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
Record and Export	§ 170.315(c)(1)	Quality Performer Hospital eMeasures Module v1.5	QRDA files and Case Counts are comparable, more than one case per patient file results in a slightly higher case count	Finding the specific files with more than one episode of care per QRDA file.
Import from a client's EHR	§ 170.315(c)(2)	Quality Performer Hospital eMeasures Module v1.5	Client confirms that Quality Performer counts are what they use and are correct. No errors noted on Load of Client QRDA files.	Having a baseline from the client Electronic Health Record for an exact comparison. Not available per client.
Report	§ 170.315(c)(3)	Quality Performer Hospital eMeasures Module v1.5 and CMS Data Submission Portal	Quality Performer HeM Module Case counts for each Measure/Measure Category Assignment matched the CMS Outcomes Report in all three Quarters of Data	Query writer needed to determine QRDA file counts per eCQM but expected with a QRDA submission format.

KEY MILESTONES

Key Milestones	Care Setting	Date/Timeframe
1Q-2023: Clients aware of participation as RWT client and reminded of the process from the prior year. No questions.	Quality and IT Departments	1/21/2022 12:00 – One hour webinar Written Instructions Provided: 8/1/2022. Jan 2023 call with Press Ganey advisor to renew participation agreement
2Q-3Q 2023: During the 2nd, 3rd and 4th quarter of CY 2023, clients can upload their data files to the HeM Module. During this time clients work with Press Ganey Clinical Advisors to evaluate their performance data, the quality of their electronic file, and work with their EHR (Electronic Health Record) vendor to identify any corrections needed if the EHR	Quality and IT Departments	Q1, Q2 and Q3 Data loaded 1/5/2024 into Test Production Environment Facility 10231 for transmission to CMS Test Environment

vendor's QRDA (Quality Reporting Document Architecture) output file is the one being sent to Press Ganey for evaluation. It is expected that a preparatory call will be done with clients to prepare them for testing activities. Results will be documented in the test results section of the test methods and ultimately used to build the test report. If any non-compliances are observed, we will notify the ONC-ACB (Office of the National Coordinator – Authorized Certification Bodies) of the findings and make the necessary changes required.		
4Q-2023: During the last quarter of the year, the CMS (Centers for Medicare & Medicaid Services) test environment opens to allow submission of HeM data. Results, such as file rejection, and issues with the file are published in a report. Press Ganey downloads this report. The Clinical Advisor reviews the results with the client. File corrections are made and another upload, or cycles of file corrections and uploads to the CMS test environment occur until the client is satisfied and there are no rejections or file missing data elements. The RWT Report will be prepared for submission after the Transmission testing has occurred.	Press Ganey Transmissions Team with CMS Test Environment	Some transmission testing started in Q4 2023 and Continues into CMS Test Environment into Q1 2024. Last done on 1/9/2024. CMS Report Findings Generated to compare with PG HeM Module counts.
January of 2024: Document our CY 2023 test results into our RWT Report and submit to our ONC-ACB.		1/10/2024. Findings completed.