

### **PRIME/QIP METRICS OFFICE HOUR**

Thursday, March 14, 12:00-1:00pm

**Presenters:** 

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**Play recording** 

## Housekeeping



Lines are muted on entry



Please mute locally & unmute to ask questions



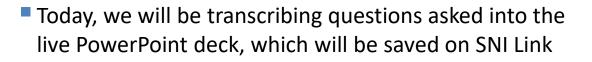
At any time, feel free to chat your question & we will read out



Webinar will be recorded and saved on SNI Link: <u>PRIME Webinars</u> and <u>QIP Webinars</u>



#### Reminder: transcribing questions





- Goal is to create more user-friendly resource
- Help us today by:
  - Having patience!
  - Chatting in your questions
  - Letting us know how it worked at end of survey





# PRIME

**Reminder**: PRIME Questions are saved on the <u>PCS</u> <u>report on PRIMEone</u>



#### Q&A: PRIME

- Q: Given that PRIME reporting portal is not working correctly, is there any discussion about a PRIME MY report extension for March?
- Q: Is the PRIME Portal working?
- Q: 1.2.5 Controlling Blood Pressure, how will trending break be reported?
- Q: Does 3.2.4 also get reported as the other trending break metrics?
- Q: If the Controlling Blood Pressure metric is our selected disparity reduction metric, does the trending break policy apply as well?
- Q: Do we follow Trending Break Policy for our disparity?
- Q: For targets at or above the 90th percentile, is there such a thing as over performance?
- Q: Have the High Performance Pool funds or amounts been released?
- Q: For 3.2.1 headache imaging, if a patient is imaged for a diagnosis unrelated to headache (such as a gunshot to the head a week after initial headache dx) and is subsequently imaged, can we exclude these patient types?
- Q (for group): Now that PQI90 is staying in PRIME, does any entity have QI structures or activity to share?
- Q: 1.3.6 Specialty expertise via non-face to face: for procedures such as colonoscopy where a patient is referred to a specialty provider for a procedure rather than a consultation, can we exclude from the denominator?



#### Q&A: PRIME (cont.)

Q: 1.3.6 Specialty expertise via non-face to face: for procedures such as colonoscopy where a patient is referred to a specialty provider for a procedure rather than a consultation, can we exclude from the denominator?



#### PRIME 2.2.2 HCAHPS - exclude "meds not given"

PCS # 00224848

Metric: H-CAHPS: Care Transition Metrics

Question Title: Meds not Given

Question: For question 25 on Understood Purpose of Taking Meds, there is a patient response option of "no meds given", which is basically not applicable. Shouldn't these people be excluded from the denominator (for calculating a composite top box score)? Otherwise, how would they strongly agree they understood the purpose if they aren't getting any meds?
Answer: That is correct - patients that respond "I was not given any medications"

Answer: That is correct - patients that respond "I was not given any medications when I left the hospital" should be excluded from the denominator when calculating the Care Transition composite score. CMS HCAHPS has noted that for Question #25: Per HCAHPS guidance, do not factor in the response if the response is "I was not given any medications when I left the hospital".



#### **Questions?**



#### **Reminder**: QIP Questions are saved on the <u>PCS report</u> <u>on SNI Link</u>



#### Q&A: QIP

Q: For Q-RU5 opioid, if prescription is filled for 10 days before end of measurement year, we have to count 20 days in the new measurement year?

