

EPRP UPDATE

1Q FY2024

10/27/2023

1Q FY2024 CHANGES

- The slides in this presentation will serve to provide an overview of changes to the 1Q FY2024 data collection instruments and scoring.
- Although the most important points will be covered, please be sure to review all of the highlighted sections in the Word documents that have been provided by email.

- There were no changes made to the following instruments:

- Cataract Surgery (CAT)
- Colonoscopy Follow-Up (HOP29)
- Common Modules
 - Delirium Risk
 - Inpatient Medication Reconciliation
- Hospital Outpatient Measures (HOP)

- Changes to the remaining instruments will be highlighted in the following slides

Sepsis

- Do Not Resuscitate Comfort Care (DNR-CC) has been added to the list of acceptable terms for questions #26, CMOPLC and #43, CMOPLC2
- Examples of noninvasive measurements of cardiac output, cardiac index, stroke volume or stroke volume index have been added to the definition and decision rules for question #44, CRYSTL2
 - May include but are not limited to:
 - Point of care (bedside) ultrasound (POCUS)
 - FlowTrac
 - Impedance measures

There are no additional changes to Sepsis

Global Measures (GM)

- Question #11: FLUSTAT
- The current influenza immunization season has been updated
 - 7/01/2023 – 6/30/2024
- An update was added to the definition and decision rules regarding documentation found in the Immunization Health Summary or in Joint Longitudinal Viewer (JLV)
- It is acceptable if the vaccine information was provided by the IZ Gateway IIS
- IZ Gateway immunization information must include:
 - Name of vaccine (e.g., Influenza)
 - Date administered: MM/DD/YYYY
 - Location will include IZG, state abbreviation (e.g., AZ) and IIS.
 - For example: Location: IZG- AZ IIS

Global Measures (GM)

- Additional terms have been added to the Only Acceptable Terms in question #12, COMFORT
 - Compassionate extubation
 - Do Not Resuscitate Comfort Care (DNR-CC)

Global Measures (GM)

• Question #13: TOBSTATUS3

• In order to improve accuracy of abstraction, an additional example was added for selecting value "99" when there is conflicting documentation

• Data would also be considered conflicting if there is documentation of **former** tobacco user and **never** used. Enter "99" for conflicting documentation in this scenario

There are no additional changes to GM

Scoring

• There were no scoring changes for the following instruments:

- CAT
- Colonoscopy Follow-Up (HOP29)
- GM
- HOP
- Sepsis

COMMUNICATION OF ABNORMAL TEST RESULTS (CTR)

- The previous monthly CTR instrument and measures (ctr20, ctr21, ctr22, and ctr23) have been retired.
- It has been replaced with the pilot study, CTR Pilot III, completed in 4Q FY2023.
- The new quality indicators are ctr24 and ctr25.

Communication of Abnormal Test Results (CTR)

- Due to low response rates, answer values "4", "5", and "6" have been grouped together as answer value "7" for the following questions:
 - ABFOBTPRO
 - ABAFPFPRO
 - ABPSAPRO
 - ABMAMPRO
 - APCTSPRO
 - ABHIVPRO
- Which health care staff communicated the abnormal FOB T/FIT result to the patient?
 1. Physician, APN (NP, CNS), PA
 2. Registered Nurse (RN)
 3. Licensed Practical (Vocational) Nurse (LPN/LVN)
 7. Other staff deemed appropriate by the medical facility
- Choose option #7 "other staff deemed appropriate by the medical facility" when pharmacists, psychologists, social workers, and other appropriate providers communicated the abnormal results to the patient.

Communication of Abnormal Test Results (CTR)

- Additional guidance has been added for question #47, LUNG-RADS
 - Enter the LUNG-RADS code documented in the low dose CT lung scan report on (computer display abnctsdtd).
- If the LUNG-RADS code includes both a number and the letter S, enter only the number portion.
 - For example, if the LUNG-RADS code is 2S, enter 2.

There are no additional changes for CTR

CTR Scoring: 2 new CTR measures

- **ctr24:** Percentage of Abnormal Test Results that Require Action Compliant with Directive
- Cases included in the denominator will pass if:
 - The abnormal test result was communicated to the patient within 7 days of the abnormal test result date **OR**
 - There is documentation the abnormal result was communicated to the patient <=14 days of the abnormal test result date **AND**
 - there is documentation that communication was delayed due to sensitive or extenuating circumstances
- **ctr25:** Percentage of Abnormal Test Results that Require Action Communicated within 30 Days of Test Report
- Cases included in the denominator will pass if:
 - The abnormal outpatient test result with action required was communicated to the patient within 30 days of the abnormal test result report date.

Home Based Primary Care (HBPC)

Question #21, PTLTPLAN

- Examples of places that may provide a higher level of care have been added
- ...transition to a higher level of care (i.e., Assisted Living Facility or Memory Care Facility, Vet Center or State Veteran's Home, Community Nursing Home (CNH), Medicaid Nursing Home, Medical Foster Home (MFH)).
- Additional examples of documentation have also been added to provide clarification what denotes documentation of a long term care plan for selecting value "1"

HBPC Changes to PTSD Questions

- Question #72, PCPTSD5 was updated to display the time frame from the study begin date to 5 years prior to the study end date
- Reference to "on or after 9/01/2018" was removed
- Similar changes were made to PCPTSD5DT2, SCRPTSD5g, and PCPTSD5DT due to the year 2018 being out of the acceptable date range (past five years)
- Questions PTRNPC, PCPTSDT, PCTSD and PTSDCOR have been removed
- Field formatting was updated to account for the deleted questions

HBPC

• Question #81, VACSSRS

- Medical Residents have been added to the list of acceptable providers to ensure documentation from a medical resident is accepted

Admission Therapist	Occupational Therapist (OT)
Advanced Practice Registered Nurse (APRN) (NCCAG)	Peer Support Specialist
Chiropractor/Physical Therapist	Physical Therapist (PT)
Communication Disorders Specialist	Physician (MD/DO) Medical Residents
Licensed Clinical Social Worker (LCSW)	Physician Assistant (PA)
Licensed Independent Social Worker (LISW)	Psych Tech (psychometrist)
Licensed Marriage and Family Therapist (LMFT)	Registered Nurse (RN)
Licensed Master of Social Work (LMSW)	Rehabilitation Counselor
Licensed Practical Nurse (LPN)	Respiratory Therapist (RT)
Licensed Professional Mental Health Counselor (LPMHC)	Unlicensed Assistive Personnel Health Tech, Medical Assistant, Nursing Assistant
Licensed Psychologist (LPSYCHO)	Vocational Rehabilitation Specialist
Medical Instrument Technologist (MIT)	

HBPC

- Questions #103, PPSVAC23 and #105, PVVAC20 have the same additional guidelines for documentation found in the Immunization Health Summary previously discussed in GM
- Documentation in the Immunization Health Summary (under the reports tab in CPRS) or Joint Longitudinal Viewer (JLV) that the vaccine information was provided by the IZ Gateway IIS. IZ Gateway immunization information must include:
 - Name of vaccine (e.g., PREVNAR 20)
 - Date administered: MM/DD/YYYY (e.g., 01/31/2023)
 - Location will include IZB, state abbreviation (e.g., AZ), and IIS.
 - For example, Location: IZG-AZ IIS

HBPC Scoring

- hc57 and hc45 (pneumococcal immunization measures)
 - The cut off date for patients <66 has been updated
 - the patient's age as of 01/01/2023 is <66
- hc41 (PTSD screening)
 - Screening via the Single Item PTSD Screener-B (SIPS-B) has been removed as a denominator exclusion
 - References to 09/01/18 have been removed from the numerator
- There were no other scoring changes in HBPC

Clinical Guidelines and Prevention Indicators (CGPI): Validation Module

- An addition was made to the definition and decision rules for questions #24, HTNENC1 and #26, HTNENC2
- The change was made to ensure accuracy of abstraction
- Hypertension diagnosis may be taken from clinical documentation in the outpatient setting and **must include the ICD-10-CM code I10: Essential (primary) hypertension.**
- Review the clinical encounters in the Reports tab for an encounter that includes ICD-10-CM diagnosis code I10.
- Review the progress notes to ensure the encounter is outpatient and meets the remaining requirements listed in the rules
- **Exclude:** Acute Inpatient and ED visits

CGPI: Prevention Indicators Module

- The influenza immunization period was updated to reflect the current dates:
 - 7/01/2023 through 6/30/2024
- The additional guidelines regarding IZ Gateway IIS documentation found in the Immunization Health Summary for flu and pneumonia vaccines discussed in GM and HBPC have been added to the applicable questions in the CGPI Prevention Indicators module
- Remember: Documentation of the vaccine in the Immunization Health Summary (i.e., information NOT provided by IZ Gateway), WITHOUT verification in a progress note that the vaccine was actually given is not acceptable

CGPI: Prevention Indicators Module

- Two new informational only questions have been added to the tobacco screening questions
- The purpose is to identify the date in which an FDA approved tobacco use cessation medication was ordered *in relation to the offer of medication captured in question #26, TUCMEDT2*

CGPI: Prevention Indicators Module

- Question #27, TOBRXORDDT, enter the most recent date closest to (computer to display tucmedt2) that an FDA approved tobacco cessation medication was ordered for the patient
- Please review the physician orders and VA and nonVA active medication lists to determine the most recent date closest to TUCMEDT2 (the date an FDA approved tobacco use cessation medication was offered to the patient) and enter the order date

CGPI: Prevention Indicators Module

- The second new question, #28 TOBRXNME1-7 asks what FDA approved tobacco medication was most recently ordered
- This is a select all that apply question

Nicotine replacement products – over the counter (OTC):

1. Nicotine patch (Nicoderm CQ, Habitrol)
2. Nicotine gum (Nicorette)
3. Nicotine lozenges (Commit)

Nicotine replacement products - prescription only:

4. Nicotine inhaler (Nicotrol inhaler)
5. Nicotine nasal spray (Nicotrol)

Oral medications – prescription only:

6. Bupropion (Zyban, Wellbutrin)
7. Varenicline (Chantix)

CGPI: Prevention Indicators Module

- Guidance for acceptable documentation prior to 10/1/2018 was removed from the definition and decision rules for the following questions:
 - #47, SIGMOID₅
 - #51, CTCOLON
 - #57, TESTPAP
 - #64, HPVTEST₂
 - #75, MAMGRAM₃

CGPI: Prevention Indicators Module

- To improve quality of abstraction, an addition was made to the definition and decision rules for question #59, PAPRPTDT
- If TESTPAP = 1, enter the exact date of the most recent pap test report
- If TESTPAP = 3 and the day of the pap test report is not documented, enter 01 for day and enter the exact month and year the acceptable provider documented the pap test was completed with the results
- Only enter 99/99/9999 if the pap test report date is after the pull list date

CGPI

- There are no changes to the following modules:
 - Cardiovascular Disease (CVD)
 - Diabetes Module (DM)

CGPI Scoring

- MOV6 has been retired
- Updates to the age cutoff dates for pvc12, p24, p25h (Cerner), p26h (Cerner) and p27 were made in CGPI as discussed in HBPC
 - pvc12 (pneumococcal immunization age 66 or greater) is no longer an accountability measure
 - This means it is no longer eligible for reconsideration
- The influenza immunization period was updated
 - During the period from 7/1/2023 to the pull list date or study end date
- PTSD51 was updated to remove references to 09/01/2018 and SIP5-B as discussed in HBPC

CGPI Scoring

- Ked4h (kidney health evaluation for patients with diabetes)
 - Cases included in the denominator will pass if:
 - A urine albumin-creatinine ratio was documented in the past year and
 - An eGFR was done within the past year
 - OR
 - During the past year a urine creatinine test and a urine albumin or microalbumin test was performed on the same date and
 - An eGFR was done within the past year

There were no other scoring changes to CGPI

THANK YOU FOR
VIEWING THE 1Q FY2024
EPRP UPDATE!

Please contact your Regional Manager via the Q&A portal if you have any questions.
