Instructions and Due Dates for Submitting ORYX Measure Set Selections for 2016

As announced in September, The Joint Commission will continue to provide accredited hospitals and critical access hospitals with flexibility in meeting ORYX performance measure reporting requirements for calendar year (CY) 2016. Measure reporting requirements can be met through the submission of data on six measure sets (four sets for critical access hospitals) by selecting one of three options: 1) chart-abstracted, 2) electronic clinical quality measures (eCQMs), or 3) a combination. This communication includes information and instructions for updating ORYX measure set selections. Please note the due dates below for submitting your hospital's measure set selections for 2016. Hospitals should begin submitting this information beginning **November 1, 2015**.

Due Dates for Measure Set Selections:

By November 30, 2015

- For hospitals currently reporting on six sets of measures (four sets for CAHs) for 2015 and that are not required to add measure sets for 2016 and that are not electing to make any changes to their 2015 measure set selections or vendor for reporting in 2016

- For hospitals electing to report on a minimum of six sets of chart-abstracted measures (**Option 1**)

By January 31, 2016

- For hospitals exploring vendor submission of data for the 3rd and/or 4th quarter 2016 on a minimum of six sets of eCQMs (**Option 2**)

- For hospitals considering vendor submission on a minimum of six sets of measures using a combination of chart-abstracted measure sets (monthly data submitted on a quarterly basis) and eCQM sets (3rd and/or 4th quarter 2016) (**Option 3**)

Note about critical access hospitals: Critical access hospitals continue to be required to collect data on a minimum of four sets of measures and have the option of collecting data internally or submitting data to The Joint Commission through a listed ORYX vendor.

Note about eCQM measure sets: For hospitals selecting eCQM measure set(s), The Joint Commission **will not publicly report the 2016 eCQM data on Quality Check.** Data and hospital performance on the eCQMs will only be displayed in the ORYX Performance Measure Report for internal hospital use only.

IMPORTANT UPDATE - eCQM Reporting Options (Option 2 and Option 3) Modified for 2016:

- Hospitals wishing to report on six sets of eCQMs (Option 2) or wishing to report on both the chart-abstracted and eCQM set(s) of measures (Option 3) but that are unable to report on all eCQM measures that comprise the eCQM set may now report on as few as one measure in an eCQM set and the set will count toward meeting the six set reporting requirement. Vendors will be invoiced for each individual eCQM measure set submitted.

- For hospitals selecting Option 3 and wishing to report on both the chart-abstracted and eCQM version of the same set(s) of measures, each version of the same set will count as an individual set of measures toward meeting the six set reporting requirement. The data submission fee for each version of the same measure set will be billed to the vendor as a separate measure set.

Measure Set Selection Instructions and Forms

- First, please review the document "Joint Commission Measure Sets Effective January 1, 2016" available on The Joint Commission's website for a complete list of the measure sets and

measures being retired or temporarily inactivated along with the list of available measure sets (See Attachment A).

- Then, complete the "2016 FLEXIBLE ORYX REPORTING OPTIONS MEASURE SET SELECTION INSTRUCTIONS and FORMS" available at: http://www.jointcommission.org/Hospital_Core_Measure_Set_Selection_Form/.

- Read carefully the instructions on the document. When making your selections, remember that measure set selections must be relevant to the services provided by your hospital and the patient populations served.

  Note for health care systems: If you are a member of a health care system that is coordinating the selection of reporting options and measure set selections among its member hospitals, it may not be necessary to provide The Joint Commission with an individual selection form for your organization. The health care system can provide The Joint Commission with the necessary information (e.g., a spreadsheet) listing each hospital and its selections. Please check with your primary health care system contact.

- **Fax the completed form (or, for health care systems, the spreadsheet) to 630-792-4992 or e-mail the form to fzibrat@jointcommission.org.**

See also:

- **Attachment A**: **Reference Information to Assist in Updating ORYX Measure Set Selections**

- **Attachment B: Joint Commission ORYX Measure Changes**

- **Attachment C: Primary and Comprehensive Stroke Center Certification**

Should you have additional questions regarding the ORYX core measure reporting requirements effective January 1, 2016, please contact Frank Zibrat at 630-792-5992 or at fzibrat@jointcommisison.org, or you may submit your questions to the ORYX Information Line at HCOOryx@jointcommission.org.

Reference Information to Assist in Updating ORYX Measure Set Selections

2016 Flexible ORYX Reporting Options Measure Set Selection Instructions and Forms:
http://www.jointcommission.org/Hospital_Core_Measure_Set_Selection_Form/

Facts about ORYX® for Hospitals: Includes reporting requirements for accredited hospitals and critical access hospitals. http://www.jointcommission.org/facts_about_oryx_for_hospitals/.

2016 Flexible ORYX Performance Measure Reporting Options: Review this document before deciding on an option for meeting 2016 ORYX measure reporting requirements. http://www.jointcommission.org/2016_flexible_oryx_performance_measure_reporting_options/

Joint Commission Measure Sets Effective January 1, 2016: Provides a concise list of the chart-abstracted measure sets and measures being retired or temporarily inactivated, along with both the chart-abstracted and eCQM measure sets available for selection for 2016. http://www.jointcommission.org/joint_commission_measure_sets_effective_january_1_2016/

Frequently Asked Questions About 2016 ORYX Performance Measure Reporting Requirements and Options: Provides assistance in deciding how best to meet a hospital's flexible ORYX® performance measure reporting requirements for calendar year 2016. http://www.jointcommission.org/frequently_asked_questions_about_2016_oryx_performance_measure_reporting_reqs_options/

Joint Commission ORYX Measure Changes

- Please review the document "Joint Commission Measure Sets Effective January 1, 2016" for a complete list of the measure sets and measures being retired or temporarily inactivated along with the list of available measure sets (See Attachment A).

  The Joint Commission will automatically set the data collection end date to December 31, 2015 for all those individual chart-abstracted measure sets/measures that are being retired for 2016.

- The threshold for 2016 mandatory reporting of the Perinatal Care (PC) performance measure set has been reduced to 300 or more live births per year.

- For Joint Commission reporting purposes for CY 2016, those free-standing psychiatric hospitals required to report on the Hospital-Based Inpatient Psychiatric Services (HBIPS) measure set and those acute care hospitals with inpatient psychiatric units that elect to report on the HBIPS measure set are not required to also report on the Tobacco Treatment (TOB) and/or Substance Use (SUB) measure sets or the Immunization (IMM) measure, though they may elect to do so voluntarily.

  NOTE: While reporting on the HBIPS measure set and certain of the TOB and SUB measures and the IMM-2 measure is required for the Centers for Medicare and Medicaid Services (CMS) Inpatient Psychiatric Facilities Quality Reporting Program, reporting on these three measure sets/measures is not required for Joint Commission reporting purposes. However, The Joint Commission would also like to caution that for Joint Commission reporting purposes the TOB and SUB measure sets are global measure sets/measures. Hospitals electing to report on the TOB and SUB measures must include all relevant inpatients in its initial patient population regardless of the inpatient setting of care.

Primary and Comprehensive Stroke Center Certification

For purposes of **<u>Certification ONLY</u>**, organizations seeking or currently Joint Commission certified as either a Primary Stroke Center or Comprehensive Stroke Center must continue to report data on all eight of The Joint Commission chart-abstracted Stroke (STK) measures, i.e., (STK-1, STK-2, STK-3, STK-4, STK-5, STK-6, STK-8, STK-10)

Organizations seeking or currently Joint Commission certified as a Comprehensive Stroke Center must also report data on all of The Joint Commission chart-abstracted Comprehensive Stroke (CSTK) measures.

Data may continue to be manually entered into the Certification Measure Information Process (CMIP) application accessed through the hospital's Joint Commission Connect extranet site, or the data may be reported through a Joint Commission-listed vendor that supports submission of the related measure data for purposes of certification. Comprehensive Stroke Centers, in particular, are encouraged to report their STK and CSTK data through a Joint Commission-listed vendor.

Certified programs wishing to report their STK and/or CSTK measure data through a vendor should contact Frank Zibrat at 630-792-5992 or at fzibrat@jointcommisison.org.