

Comparison Between Original PAT and Revised Submission

When the original PAT was submitted for review, screen prints from the forms used for the PGP Demonstration PAT were submitted. The MCMP PAT had not yet been finalized. Since then, the tool has been tailored and enhanced with additional edits and support for the small practices participating in the MCMP Demonstration. *However, the underlying data collection remains substantially unchanged.* Attached are screen prints from the PGP PAT and MCMP PAT, the latter of which reflects enhancements such as additional edits and information to make it easier for small practices to report and submit data. With the exception of the cover screen, which will be tailored with the name of each demonstration, practices participating in the EHR Demonstration, which will begin reporting in 2011, will use the same PAT as the MCMP Demonstration.

Below are some of the specific changes:

- **Cover Screen with PRA Disclaimer** – This screen is specific to each demonstration. It will be updated with the new PRA approval number and expiration date. We have added a “Help” key to the screen.
- **On-Line User Guide** - We have added an on-line user guide for data submitters. This was previously available only on paper.
- **Option to Check for Latest Version** - The initial tool required users to know to check and download upgraded versions of the PAT tool. We now allow users to automatically set their computer systems up to check for and upload new versions according to the schedule they select.
- **Demographics Module Screen** - This screen identifies all patients that a practice must report on. CMS provides basic but critical beneficiary information in order to help the practice identify and match to the appropriate patient from their records. The information on this screen has been rearranged and additional information has been added to help the practice in abstracting data from their own medical charts. This includes the reporting period (“Database info”) so practices know what dates to look for when they abstract data from their medical records and the rank ordering which is important if a practice is large enough to sample patients (vs. reporting on all patients). In addition, the “Patient Status” box provides information to the practice on whether all of the information has been reported for the individual patient and a “Custom Notes” field has been added. The screen also allows the option to synchronize data collection between tabs so that if the same data is required in more than one place, it is automatically updated and inconsistencies are highlighted, allowing for more accurate and streamlined reporting.

- **Modules** - The PGP Demonstration collects the same basic quality measures data as the MCMP Demonstration, although it is organized slightly different on the PAT. For example, the PGP PAT collects the immunization measures within each module. For example, see the boxes for Influenza and Pneumonia Vaccination on the Diabetes, Coronary Artery Disease and Congestive Heart Failure screen prints. The MCMP Demonstration aggregates the immunization measures with the cancer screening measures in a preventive care tab with sub-screens for each topic.
- Since the original PGP PAT was developed, some of the measures have been modified by the measure owners (¹). For example, under the Diabetes tab, the “Complete Foot Exam” measure had required detail on all three types of foot exams. It now only requires at least one of those exams to be done so that measure has been simplified. For Blood Pressure Management under the Diabetes tab, the specific systolic and diastolic numbers are recorded vs. just “Yes/No.”
- In the MCMP PAT, each box is labeled with the number of the measure it applies to and each screen retains the patient and database information sections to guide the practice in reporting. While some of the specific boxes for keying in data have been reorganized, the core data collection tool and reporting requirements are the same.

¹ The measures reported are owned and maintained by either the American Medical Association (AMA), the National Committee for Quality Assurance (NCQA), or CMS. All have been evaluated through a consensus process. None of the demonstrations have developed demonstration specific measures. When these measure owners revise the specifications for measures, we update our tool to be consistent with other data collection efforts that may be going on, thereby making it easier for practices to report accurately and consistently.