Additional Information

[redacted]

LEVEL I GUIDANCE

February 1, 2016

PACE Level I Reporting Guidance

Table of Contents

PACE Level I Reporting Guidance

INTRODUCTION: PACE DATA ENTRY GUIDANCE

In order to comply with the PACE regulations, §460.140, §460.200(b)(1), §460.200 (c), and §460.202 PACE Organizations (POs) must meet external quality assessment and reporting requirements as specified by the Centers for Medicare and Medicaid Services (CMS) and the State Administering Agency (SAA). PACE Level I quality data elements are reported to CMS using the Health Plan Management System (HPMS), an information system and data exchange mechanism for Medicare Advantage Organizations (MAO) and POs. This guidance provides POs with an overview of requirements to report both aggregate and individual level data to monitor and improve quality of care and participant outcomes. For questions concerning Level I reporting POs should contact their CMS account manager initially and as a second option please send questions to the DMAO portal.lmi.org and copy their CMS account manager.

QUALITY IMPROVEMENT (QI)

Level I data should be reviewed for Quality Improvement (QI) using a standardized methodology (e.g., Plan, Do, Check, Act known as PDCA) to:

- Institute QI-driven change in policies, procedures, systems, or training as appropriate;
- Evaluate the effectiveness of the intervention;
- Track and trend for areas that need improvement and sustainable improvement;
- Reevaluate until improvement is sustained;
- Report and discuss findings at least annually to oversight committees including the PO's governing body; and
- Document for review during CMS/State Administering Agency audit as evidence of a performance improvement activity.

LEVEL I REPORTING REQUIREMENTS

Level I reporting requirements refer to those data elements used for monitoring that are regularly reported by POs via the HPMS PACE monitoring module. POs will have 30-days after the each quarter ends to enter date before the entry is considered late. For appeals and grievances POs will have seven days after the 30-day grace period to enter data. For instructions related to late date entries, data modifications and request for data entry extensions, please follow the HPMS User guide.

LEVEL I REPORTING INCIDENT REQUIREMENTS

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
Census Data	Census is defined as the number of participants currently receiving care.	Census data is collected quarterly.	For each new enrollment and disenrollment POs reports the data following information: -New Enrollments that includes Medicare, Dual eligible Medicaid, Private Pay. -Disenrollment Total that includes Medicare, Dual eligible Medicaid, Private Pay.
Grievances	A grievance is defined as a complaint, either written or oral, expressing dissatisfaction with the service delivery or the quality of care furnished.	Grievances data are collected quarterly. The PO can continue to enter grievances information for seven days after the end of the quarter. Grievances are entered under one of the three categories: Resolved or an Alternative Solution. Alternative Solution means that the PO has chosen an alternative option that addresses grievances safely and appropriately. CMS expects that all grievances are addressed and a resolution is	For each grievance the PO reports the following data information: -The source of the grievance; -The location that the grievance originated; -The type of grievance; -The specific issue related to the grievance; and -The resolution to the grievance.

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
		obtained. (Some grievances may not be resolved to the participants/caregiver satisfaction, however, a resolution must be obtained.)	
Appeals	An appeal is a participant's action taken with respect to the PO's non-coverage of, or nonpayment for, a service including denials, reductions, or termination of services.	Appeals are collected quarterly. The PO can continue to enter appeals information for seven days after the end of the quarter. Appeals are entered into HPMS once the appeal has been resolved or denied.	For each appeal the PO reports the following data information: -The source of the appeal; -The type of appeal; and -The resolution to the appeal.

PACE Level I Reporting Guidance

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
Immunizations	**Pneumococcal & Influenza** Immunizations are reported for all participants enrolled during the reporting period. Refer to http://www.cdc.gov/vaccines/schedules/index.html for immunization administration schedule. CMS expect POs to immunize participants' according to the CDC guidelines. **Pneumococcal:** http://www.cdc.gov/vaccines/vpd-vac/pneumo/vacc-in-short.htm. **Influenza:** http://www.cdc.gov/vaccines/vpd-vac/flu/default.htm	**Pneumococcal:** Pneumococcal data is collected quarterly. **Influenza:** Influenza immunizations screening, immunization, and data collection period begins quarter 1(Q1) - October 1 and ends March 31st of the following calendar year. Influenza data is collected annually following the end of the data collection period.	**Pneumococcal & Influenza:** For each participant the PO provides the following vaccine data information: -The total number of participants enrolled during the reporting period (including all disenrolled and deceased participants); -The total eligible to receive immunization; -The number of vaccines administered by the PO to eligible participants; -The total number eligible participants who did not receive the Pneumococcal/Influenza for the following reasons: medically contraindicated, prior immunization, refused, vaccine unavailable, missed opportunity (vaccine available but was not administered); and -The number of participants who received the vaccine and reported or had a reaction.

PACE Level I Reporting Guidance

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
	Minimum Levels of Performance: Each PACE Organization is expected to achieve an immunization rate of eighty percent (80%) for both influenza and pneumococcal vaccinations for the participant population that is appropriate.		
Falls Without Injury	A PACE participant fall can be defined as a sudden, unanticipated descent in which a participant comes to rest on the floor or some other surface, person, or object (intentional falls should not be counted). Falls without injury refers to falls that requires only first aid treatment, or minimal treatment (i.e. ace bandaged for a sprain) and do not require a	Falls without injury is collected quarterly.	For each participant Fall Without Injury POs provides the following data information: -The date the fall occurred; -The time the fall occurred; -Location where the fall occurred; -Precipitating /contributing factors; -The actions taken by the PO.

PACE Level I Reporting Guidance

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
	hospitalization greater than 24 hours. (Ex. falls that are caused scrapes, cuts and or bruises).		
Medication Administration Errors Without an Adverse Effect	Medication Administration Errors Without an Adverse Effect are when medication errors occur in violation of the physician's order, this includes errors made by the PO, PO's contracted staff and or participant or caregivers. Also, medication administration errors without adverse effect is an incident that has the potential of being harmful without actually causing an adverse effect.	Medication administration error without an adverse effect are collected quarterly.	For each Medication Administration Errors without an Adverse Effect the PO provides the following data information: -The date the medication error occurred; -The location where the medication error occurred; -The type of medication administration error; -Precipitating /contributing factors; and -The actions taken by the PO.

PACE Level I Reporting Guidance

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
Kennedy Terminal Ulcer (KTU)	This data element is under review. Enter "NO DATA TO REPORT" in order for the data entry process to be complete.	This data element is under review. Enter "NO DATA TO REPORT" in order for the data entry process to be complete.	This data element is under review. Enter "NO DATA TO REPORT" in order for the data entry process to be complete.
Burns	Burns 1st degree or less. An injury to tissue by heat, friction, electricity, radiation, or chemicals.	Burns 1st Degree is collected quarterly.	For each participant Burn 1st Degree or less the PO provides the following data information: -The date the burn occurred; -The location (ex. home); -The location of the burn on the body; -Precipitating /contributing factors; and -The actions taken by the PO.
Emergency Room Visits	Emergency room visit is an Emergency room visit that is less than 24 hours.	Emergency Room visits collected quarterly.	For each participant Emergency Room visit the PO provides the following data information: -Emergency room visit date; -Primary admitting diagnosis; -Discharge diagnosis; -Admission to hospital (only provide a Yes or No answer); -Participant living situation at the time of admission; -Participant Outcomes;

PACE Level I Reporting Guidance

Incident Type	Level I Reporting Definition	Collection Frequency	HPMS Data Entry Reporting Requirements
			-If the participant had repeat ER visits; and - All visits within the current Reporting Period
Other Incidents	If there is an incident that occurred that would be consider an "other" or does not fall into one of the categories above, contact your account manager to discuss the incident prior to entering the information into HPMS.	--	--

References

Agency for Healthcare Research and Quality http://www.ahrq.gov
- Clinical practice guidelines
- Preventing medical errors
- Quality care
- Safe care

Centers for Disease Control and Prevention http://www.cdc.gov
- Immunizations

Centers for Medicare & Medicaid Services http://www.cms.gov
- Quality initiatives and research

PACE regulations (42 CFR 460) http://www.ecfr.gov

Pharmacy Related Resources:
- Institute for Safe Medication Practices http://www.ismp.org/
- National Association of Boards of Pharmacy Links to State Boards http://www.nabp.net/
- American Society of Consultant Pharmacists (LTC Pharmacists) http://www.ascp.com/