MEASURE PRODUCTION QUALITY ASSURANCE (QA) WORKSHEET

The purpose of this information collection worksheet (starting on page 2 of this document) is to provide the QECP team with a comprehensive and concise view of the QEs' measurement process from data integration to final reporting (Exhibit 1). The intent of the collected information is to present and describe the QE's error identification and correction approach in its measure production process (i.e., QE's quality assurance process). QEs must use this worksheet to describe how their organization:

- integrates data into a repository to calculate reported performance measures;
- addresses data completeness, accuracy, and consistency; and
- identifies, corrects, and mitigates errors during the measure calculation and reporting process once QE Medicare data are integrated.

The information QEs provide in this worksheet address several (but not all) of the evidence requirements for Element 6A. Refer to page 88 of the 2016 Operations Manual for a complete list of evidence requirements for Element 6A. **QEs must complete and upload this worksheet, along with relevant policy/procedural supporting documents, to their secure QECP application portal under Element 6A in order to comply with Phase 3 of the QECP Minimum Requirements Review.**

Exhibit 1: Measure Production Quality Assurance
(Standard 6)

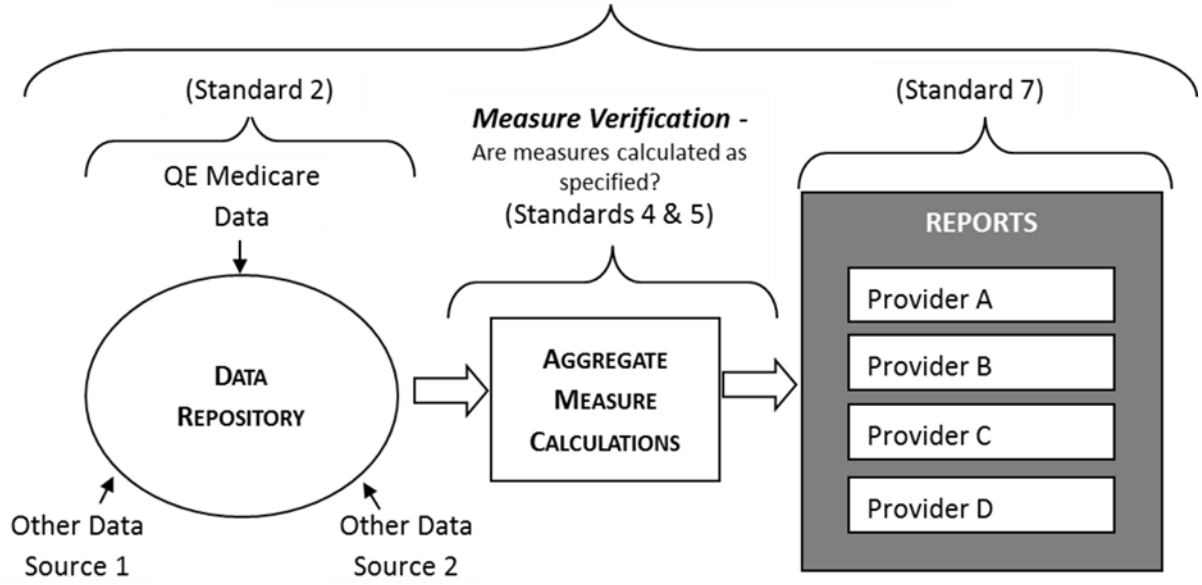

Table 1: Department/Vendor Responsibilities

For each function listed in the table below, provide the name of the department or vendor responsible for completing each task; the name, credentials, and title of the responsible personnel; and the application or software used to complete each task.

General Measure Production Functions	**Internal Department Name or Vendor Name**[1]	**Internal Staff** (Name, Credentials, and Title)	**Contracted Staff** (Name, Credentials, and Title)	**Application/Software**[1]
Data Integration				
QE Medicare Data Integration (if different than above)				
Data Warehouse Maintenance				
Measure Repository Maintenance				
Measure Calculation				

[1] If applicable, documentation and/or purchase orders of the software and/or systems vendor utilized in the entity's QA process **must** be uploaded as evidence to Element 6A in the QE's application portal.

Setting Quality Assurance (QA) Standards or Policies				
Conducting QA Reviews				
Reviewing QA Reports				
Other *(Specify:_____)*				

Information Request	Response
List measures calculated for the first time (list only those that will include QE Medicare data).	
List and briefly describe your organization's QA policy document(s). [A complete QA policy may be uploaded as evidence for Element 6A in the QE's application portal]	*{List the name of each QA policy document, and provide a brief description of its contents.}*
What data circumstance (e.g. performance above or below expected performance - 3rd standard deviation) triggers additional review and scrutiny for accuracy by your organization?	
How does your organization determine compliance with measure specifications?	

Table 2: Data Files and Data Accuracy

Describe each source of data combined with QE Medicare data; add rows as necessary (i.e., two sources of enrollment data will require two rows of "Enrollment or Membership").

Data Sources	File Description (e.g., enrollment data from Happy Health Plan)	Size of File (e.g., # of claims lines or covered lives)	Date Loaded into Data Repository	Date Integrated with Medicare Data	Proportion of Data File in Final QE Data File (% of all claim lines or covered lives in integrated data file)
Enrollment or Membership					
Practitioner					
Claim or Encounter					
Behavioral Healthcare					
Pharmacy					
Public Registry (e.g. immunizations)					
Other *(Specify:_____)*					

Information Request	Response
Are standard code sets used (e.g. ICD-9, CPT)? If not, how is consistency between data elements ensured?	
How is data loading and mapping assessed for accuracy and completeness?	
What methods are used to QA each data source?	
Were any data excluded from measure reporting?	
Why were data excluded (e.g., incomplete data from a claims vendor)?	
What percentage of members, practitioners, or claims was affected by these exclusions?	
How does your organization assess whether individual elements are missing, incomplete or invalid?	

Table 3: QA Reports

Information Request	Response
What types of QA reports are produced by your organization? [Sample reports generated by the QA process **must** be attached as evidence to Element 6A in QE's application portal]	*{List the file name of each QA sample report, and provide a brief description of its contents.}*
Who receives the QA reports?	
Are corrective actions assigned as part of the QA process?	
How does your organization correct errors in the measurement and reporting processes? [A complete QA policy may be uploaded as evidence for Element 6A in the QE's application portal]	*{If response can be found in a QA policy document, list the file name, page number, and relevant section of the document.}*
If an error is identified during the QA process, how does your organization update the reports to the providers and consumers? [A complete QA policy may be uploaded as evidence for Element 6A in the QE's application portal]	*{If response can be found in a QA policy document, list the file name, page number, and relevant section of the document.}*