



PRESS GANEY HeM Version 1.5

2024 REAL WORLD TESTING RESULTS

GENERAL INFORMATION

Plan Report ID Number: [For ONC-Authorized Certification Body Use Only]

Developer Name: Press Ganey Associates LLC

Product Name(s): Quality Performer HeM (Hospital Electronic Measures) Module

Version Number(s): 1.5

Certified Health IT Product List (CHPL) Product Number(s): 15.04.04.2834.Qual.15.00.0.181231

Developer Real World Testing Plan Page URL: [Quality Performer Certification | Press Ganey](#)

Developer Real World Testing Results Report Page URL (if different): [Insert URL if applicable]

CHANGES TO ORIGINAL PLAN

If a developer has made any changes to their approach for Real World Testing that differs from what was outlined in their plan, note these changes here.

Summary of Change	Reason	Impact

SUMMARY OF TESTING METHODS AND KEY FINDINGS
§ 170.315(b)(10) Electronic Health Information (EHI) Export

- Export of any Cases to a Single Patient QRDA I file:
 - No single QRDA I files were needed or requested by the client.

§ 170.315(c)(1) Record and Export

- This use case tracks the ability to upload a client file, a QRDA I file, with accurate case counts when compared to the QRDA export file.
- The client uploaded 2024 Q1 and Q2 Data to a production facility (10231) set up for this testing on October 31, 2024.
- The Measures included: eOPI-1, eSTK-2, eSTK-5, eHH-1 Hypoglycemia, ePC-02 and ePC-07.
 - Q3 and Q4 Data was not available at the time of this report creation.
- QRDA files uploaded without errors, based on the counts of cases on the Data Upload HeM page.
 - The number of QRDA files uploaded for each Quarter, had to be obtained via a Query, since all QRDA's for all Quarters were uploaded on 10/31/2024 to the Test Production Facility.

Measures Uploaded Q1 2024 Data 10/31/2024 into Production Test Facility	Number of Files Uploaded – 3941 (Total for the two Quarters) 1 st Qtr.– 1981	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts/ in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	141 in Pop 29 Not in Pop	0	167/170
eSTK-5 (CMS72)	Unable to obtain	141 in Pop 29 Not in Population	0	167/170
eHH-Hypoglycemia (CMS816)	Unable to obtain	1000 in Population 0 Not in Population	0	901/1000
eOPI-1 (CMS506)	Unable to obtain	1321 In Population 0 Not in Population	0	1210/1321
ePC-02 (CMS334)	Unable to obtain	45 in Pop 129 Not in Population	0	174/174
ePC-07 (CMS1028)	Unable to obtain	173 in Population 1 Not in Population	0	174/174

Measures Uploaded Q2 2024 Data 10/31/2024 into Production Test Facility	Number of Files Uploaded – 3941 (Total for the two Quarters) 2 nd Qtr. – 1959	Number of Cases on the HeM Dashboard and Data Summary Report	Number of Failures to Load; Data Load Status Report	QRDA Export file count/Case Counts/ in the QP-HeM Module after uploads
eSTK-2 (CMS104)	Unable to obtain	144 in Population 28 Not in Population	0	172/172
eSTK-5 (CMS72)	Unable to obtain	142 in Population 28 Not in Population	0	172/170

eHH- Hypo (CMS816)	Unable to obtain	981 in Population 0 Not in Population	0	868/981
eOPI-1 (CMS506)	Unable to obtain	1299 in Population 0 Not in Population	0	1191/1299
ePC-02 (CMS334)	Unable to obtain	59 in Population 103 Not in Population	0	162/162
ePC-07 (CMS1028)	Unable to obtain	160 in Population 2 Not in Population	0	162/162

§ 170.315(c)(2) Import from a client's EHR

- This case count verifies that the number of cases imported is equal to the number of cases that will be evaluated for the eCQM Initial Patient Population, Denominator, Denominator Exclusion, Numerator and Denominator Exception case results. The case counts evaluated can fall into multiple measures or not qualify for any Measure.

Measures 1 st Quarter	Total Population Count per eMeasure per Quarter in Epic	Number of Cases Total in IPP + Denominator+ Denominator Exclusion + Numerator + Denominator Exceptions	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	170	NA
eSTK-5 (CMS72)	Unable to obtain	170	NA
eHH-Hypoglycemia (CMS816)	Unable to obtain	1000	NA
eOPI-1 (CMS506)	Unable to obtain	1321	NA
ePC-02 (CMS334)	Unable to obtain	174	NA
ePC-07 (CMS1028)	Unable to obtain	174	NA

Measures 2 nd Quarter	Total Population Count per eMeasure per Quarter in Epic	Number of Cases Total in IPP + Denominator+ Denominator Exclusion + Numerator + Denominator Exceptions	Discrepancies on Load
eSTK-2 (CMS104)	Unable to obtain	172	NA
eSTK-5 (CMS72)	Unable to obtain	170	NA
eHH-Hypoglycemia (CMS816)	Unable to obtain	981	NA
eOPI-1 (CMS506)	Unable to obtain	1299	NA
ePC-02 (CMS334)	Unable to obtain	162	NA
ePC-07 (CMS1028)	Unable to obtain	162	NA

§ 170.315(c)(3) Report

- The CMS Report output generated on 11/15/2024 confirms the successful transmission, accurate reporting, and absence of any file formatting issues (with QRDA 1 containing all required data elements). There were no rejections or file formatting problems identified. Additionally, the case counts for 2024 Q1 and Q2 aligns with CMS case counts.

Q1 2024 Report Summary

Measure Category	In Population Case Count (All Measure Cats)	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS - eSTK-2	171	142	65	75	1
PG - eSTK-2	171	142	65	75	1
CMS - eSTK-5	171	142	28	110	1
PG - eSTK-5	171	142	28	110	1
CMS - eHH-Hypoglycemia	1000	1000	NA	40	NA
PG - eHH-Hypoglycemia	1000	1000	NA	40	NA
CMS - eOPI-1	1321	1321	345	150	NA
PG - eOPI-1	1321	1321	345	150	NA
CMS - ePC-02	174	45	2	17	NA
PG - ePC-02	174	45	2	17	NA
CMS - ePC-07	174	173	0	5	NA
PG - ePC-07	174	173	0	5	NA

Q2 2024 Report Summary

Measure Category	In Population Case Count (All Measure Cats)	Denominator Case Count	Denominator Exclusions Case Count	Numerator-Case Count	Denominator Exceptions-Case Count
CMS - eSTK-2	172	144	77	67	0
PG - eSTK-2	172	144	77	67	0
CMS - eSTK-5	172	144	28	110	2
PG - eSTK-5	172	144	28	110	2
CMS - eHH-Hypoglycemia	981	981	NA	22	NA
PG - e HH-Hypoglycemia	981	981	NA	22	NA
CMS - eOPI-1	1299	1299	362	135	NA
PG - eOPI-1	1299	1299	362	135	NA
CMS - ePC-02	162	59	1	21	NA
PG - ePC-02	162	59	1	21	NA
CMS - ePC-07	162	160	0	7	NA
PG - ePC-07	162	160	0	7	NA

STANDARDS UPDATES (INCLUDING STANDARDS VERSION ADVANCEMENT PROCESS (SVAP) AND UNITED STATES CORE DATA FOR INTEROPERABILITY (USCDI))

Indicate as to whether optional standards, via SVAP and/or USCDI, are leveraged as part of the certification of your health IT product(s).

- Yes, I have products certified with voluntary SVAP or USCDI standards. (If yes, please complete the table below.)
- No, none of my products include these voluntary standards.

Standard (and version)	
Updated certification criteria and associated product	
CHPL Product Number	
Conformance measure	

CARE SETTING(S)

The HeM Module contains both inpatient and emergency department patient data. The use of the Module, however, is not within the physical inpatient and emergency department care settings. The HeM Module is used by the Quality Department and/or the Information Technology Department in their physical space. Often the two departments work together to upload files, evaluate the HeM Module data and performance results.

METRICS AND OUTCOMES

Measurement/Metric	Associated Criterion(a)	Relied Upon Software (if applicable)	Outcomes	Challenges Encountered (if applicable)
Record and Export	§ 170.315(c)(1)	Quality Performer Hospital eMeasures Module v1.5	QRDA files and Case Counts are comparable, more than one case per patient file results in a slightly higher case count	Finding the specific files with more than one episode of care per QRDA file.
Import from a client's EHR	§ 170.315(c)(2)	Quality Performer Hospital eMeasures Module v1.5	Client confirms that Quality Performer counts are what they use and are correct. No errors noted on Load of Client QRDA files.	Having a baseline from the client Electronic Health Record for an exact comparison. Not available per client.
Report	§ 170.315(c)(3)	Quality Performer Hospital eMeasures	Quality Performer HeM Module Case counts	Query writer needed to determine QRDA file

		Module v1.5 and CMS Data Submission Portal	for each Measure/Measure Category Assignment matched the CMS Outcomes Report in all two Quarters of Data	counts per eCQM but expected with a QRDA submission format.
Electronic Health Information (EHI) Export	§ 170.315(b)(10)	Quality Performer Hospital eMeasures Module v1.5	No QRDA I single patient case files were generated by the client during the Real World Test time frame	The feature isn't one that clients need or use in their data validation activities

KEY MILESTONES

Key Milestone	Care Setting	Date/Timeframe
<p>3Q-2024: Clients aware of participation as RWT client and reminded of the process from the prior year. No questions.</p>	Quality and IT Departments	<p>1/21/2022 12:00 – One hour webinar</p> <p>Written Instructions Provided: 8/1/2022.</p> <p>Oct 2024: call with Press Ganey advisor to renew participation agreement</p>
<p>3Q 2024: During the 3rd quarter of CY 2024, clients can upload their Q1 and Q2 data files to the HeM Module. During this time clients work with Press Ganey Clinical Advisors to evaluate their performance data, the quality of their electronic file, and work with their EHR (Electronic Health Record) vendor to identify any corrections needed if the EHR vendor's QRDA (Quality Reporting Document Architecture) output file is the one being sent to Press Ganey for evaluation. It is expected that a preparatory call will be done with clients to prepare them for testing activities. Results will be documented in the test results section of the test methods and ultimately used to build the test report. If any non-compliances are observed, we will notify the ONC-ACB (Office of the National Coordinator – Authorized</p>	Quality and IT Departments	Q1 and Q2 Data loaded 10/31/2024 into Test Production Environment Facility 10231 for transmission to CMS Test Environment



<p>Certification Bodies) of the findings and make the necessary changes required.</p>		
<p>Q3-4Q-2023: During the last quarters of the year, the CMS (Centers for Medicare & Medicaid Services) test environment opens to allow submission of HeM data. Results, such as file rejection, and issues with the file are published in a report. Press Ganey downloads this report. The Clinical Advisor reviews the results with the client. File corrections are made and another upload, or cycles of file corrections and uploads to the CMS test environment occur until the client is satisfied and there are no rejections or file missing data elements. The RWT Report will be prepared for submission after the Transmission testing has occurred.</p>	<p>Press Ganey Transmissions Team with CMS Test Environment</p>	<p>Transmission testing started in 11/15/2024 into CMS Test Environment. CMS Report Findings Generated to compare with PG HeM Module counts.</p>
<p>November of 2024: Document our CY 2024 test results into our RWT Report and submit to our ONC-ACB.</p>		<p>11/20/2024. Findings completed.</p>