



Tip Sheet—Inpatient Population and Sampling

General Information:

Entry of Population and Sampling data can be accomplished by either a vendor or the hospital. Even if submitted by the vendor, hospital staff should still review the numbers prior to the submission deadline. Reasons for doing this include the following:

- To make sure the data have been submitted and appear to be “reasonable.”
- To ensure that the total patient population for each topic and SCIP strata is as accurate as possible.
- To ensure that the sample size for each topic and SCIP strata is statistically valid and will not result in under-submission of clinical data, as this could potentially affect the payment of a hospital’s full Annual Payment Update.
- Identification of potential problems at this point allows sufficient time to correct them prior to the actual clinical data submission date.

Evaluating Population and Sample Sizes (PPS Hospitals):

We highly recommend you complete the following steps at least a few days before the Population and Sampling Submission Deadline to allow time to correct any errors that may be found.

- 1. Log in to My QNet and go to the “Run Reports” section. Select the “Annual Payment Update Reports” category and click on “RHQDAPU Provider Participation Report.” Click on your hospital name and the link to request the report. Save or print the report from the “View Reports” tab.**

This report is four pages long with each page summarizing one-quarter’s data from the calendar year. The “Total Medicare Claims” column is updated on a monthly basis until approximately 15 days prior to the submission deadline for that quarter. There may be slight variations to the number of claims prior to being “locked down” due to late claims submissions, billing corrections, etc.

The Total Patient Population for any topic or SCIP strata is composed of both Medicare and Non-Medicare patients. Due to the large number of payor sources, there is no way to know the total population size unless this information is provided by each hospital. The only “known” number of cases for any topic or strata is available via Medicare claims data.

Note: The Medicare Claims number listed on this report is derived from cases in which Medicare was the primary payor source and the claim has been finalized.

- 2. While still logged into QNet, go back to the “My Tasks” page. Click on “View/edit Population and Sampling” in the “Manage Measures, Hospital Inpatient” section. Highlight your hospital’s name and click “continue.” Select the appropriate quarter for the upcoming reporting period and click “continue.”**

You must have a number from zero and up within every cell, for every topic and SCIP strata. If any cells are left “open,” this will be interpreted as an “incomplete data submission.” There must also be a sampling frequency entered above every topic and SCIP strata. The three options for this include:

- Not sampled
- Monthly
- Quarterly

3. Compare the RHQDAPU Medicare claims data to the Population and Sampling Medicare total Medicare Initial Inpatient Population. If there is a significant difference between these numbers, you may need to determine if the method used to identify Medicare cases is faulty. You may also need to identify the missing cases.

Note: The definitions for the Medicare counts differ between these reports. The RHQDAPU Provider Participation Report only counts cases in which Medicare was a primary payor and the claim has been finalized. The Inpatient Population and Sampling guidelines require hospitals to enter the number of inpatients with Medicare as ANY payor source and regardless of whether or not Medicare was actually billed. Because of these differences, the Population and Sampling total Medicare number should generally be the same as or greater than the RHQDAPU Medicare number.

Under-counting Medicare cases could result in a total patient population that is inaccurate, impacting the validity and reliability of the total sample size.

If the hospital or its vendor determines that it is necessary to identify the missing cases but are unable to do so, contact the QIO RHQDAPU support team for further assistance.

4. Calculate the absolute minimum sample size required for RHQDAPU participation. This is done by applying the quarterly sampling tables to the number of Medicare claims listed for each topic and SCIP strata on the RHQDAPU Provider Participation Report.

CMS determines the minimum sample size required for RHQDAPU participation based upon the Medicare claims number, which can be considered to be the “base” total population for each topic or SCIP strata. The quarterly sampling methodology described in the corresponding version of the Specifications Manual is applied to each Medicare claims number (i.e., the “base” total population) to determine the absolute minimum sample size that needs to be accepted into the CMS data warehouse for each topic and strata. The HRP QIOSC uses this methodology to identify hospitals that may be under-submitted when approaching the clinical data submission deadline.

Note: The Medicare claims are only used to calculate the expected minimum sample size for each topic and SCIP strata. Medicare status is NOT considered for the actual cases abstracted and entered into the QIO Clinical Data Warehouse. As long as the final number of cases in the warehouse is equal to or greater than this calculated minimum requirement, the hospital will continue to be eligible for full APU payment.

5. Compare the total monthly/quarterly sample sizes against the total monthly/quarterly initial patient population sizes to ensure that sampling guidelines from the appropriate version of the *Specifications Manual* have been followed.
6. Compare your calculated minimum sample size to the final total sample size to ensure that you have met the minimum requirements for RHQDAPU.

The overall goal is to be as accurate as possible in identifying the total patient populations and in determining the appropriate sample sizes. This will contribute to having reliable data that can be extrapolated to the larger patient population.



Becky Ure
rure@flqio.sdps.org
(813) 865-3549

Lane Harrigan
lharrigan@flqio.sdps.org
(813) 865-3509

Lawanna Hurst
lhurst@flqio.sdps.org
(813) 865-3518

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