

Program of All Inclusive Care for the Elderly

User's Guide FALL 2005

Produced by: Centers for Medicare & Medicaid Services Center for Beneficiary Choices

Medicare Plan Accountability Group Division of Health Plan and Provider Data

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INTRODUCTION

In order to comply with the PACE regulations, §460.140 and §460.200, all PACE Organizations 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). These requirements are contained in your program agreement that will be signed at the time of permanent provider application approval.

The PACE quality data elements will be reported to CMS using the Health Plan Management System (HPMS), an information system and data exchange mechanism for Medicare managed care organizations (MCO), including PACE organizations. CMS requires that HPMS is accessed by means of the Medicare Data Communications Network (MDCN), a secure network maintained by AT&T Global Network Services (AGNS) on behalf of CMS. Please see the *HPMS Connectivity Instructions* document for information/options about connecting to AGNS to access the HPMS.

HPMS PACE Organization Monitoring Functionality

The Health Plan Management System (HPMS) PACE Organization Monitoring Module provides each PACE organization with the capability to enter certain data required by the Centers for Medicare & Medicaid Services (CMS) and the State Administering Agency (SAA) to monitor the performance of their organization. The PACE Organization Monitoring function is also intended to provide CMS and SAA users with the capability to track and monitor data related to nine key indicators for all PACE organizations.

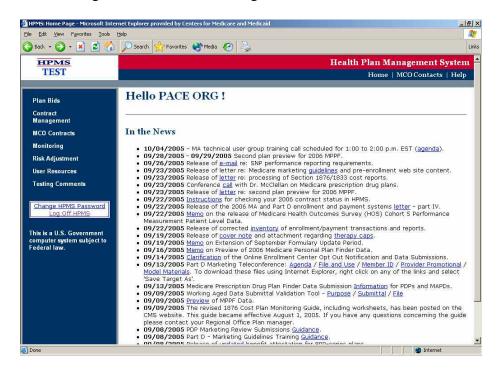
The PACE Monitoring Module allows one or more PACE organization representatives to enter and edit data for each H Number. (The H Number is the internal CMS identification number used for all managed care contracts, and is identified in each executed PACE program agreement.) An H Number may have one or more sites, and the PACE Monitoring Module provides the capability for data to be entered separately at each site.

PACE data submitted through the PACE Monitoring Module must come exclusively from a PACE site, not the parent organization. If the PACE organization has more than one site of care/treatment, **each site must be identified separately**. PACE organizations are required to report their information quarterly. This timeframe is most useful in determining and monitoring trends and patterns of care and will coincide with the reporting of financial data. CMS and the State Agencies will use these monitoring data to identify potential problems, aberrant outcomes, or unusual events that may be the first indication of problems in patient care, site operations, or financial solvency. These data elements will be used to determine if additional onsite monitoring activities by CMS or the State are necessary.

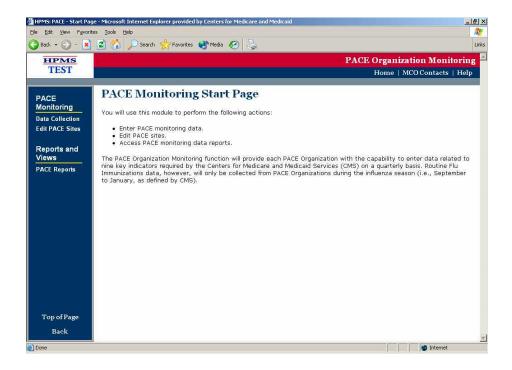
This guide will provide PACE organization users with guidance for entering data, printing reports, and navigating through the various screens and functions contained within the module.

HPMS PACE START PAGE

Below is the HPMS home page. This is the first page that will appear once the user has logged into the HPMS system. The user should click on the PACE Monitoring link, found under the "Monitoring" header in the left navigation bar, to enter the PACE module.



Once the user has selected the PACE monitoring link, the user will be taken to the PACE Monitoring Start Page. From this page, the user can add, edit, or delete a PACE site, enter data, view a report, log off the HPMS, or return to the HPMS home page.



PACE SITE EDITING – ADDING, EDITING, AND DELETING A PACE SITE SELECT A CONTRACT NUMBER SCREEN

The PACE Site Editing – Select a Contract Number screen displays the list of H Numbers assigned to the user based on the PACE Organization affiliation. The user selects the H Number for which they would like to enter data and clicks on the "Next" button. This functionality is the same whether the user wishes to add, edit, or delete a PACE site.

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PACE SITE EDITING PACE SITES FOR...

This screen will display the H Number selected by the user as well as a list of existing sites for this PACE organization. The user will highlight the PACE site for which they intend to enter data and select the appropriate button. The user can select from the add, edit, or delete a PACE site functions, or select the Back button to return to the previous page.

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PACE SITE EDITING ADD A PACE SITE

To add a PACE site, select the ADD button on the PACE Site Editing screen (note, do not highlight an existing PACE site if you wish to add a new site), and the following PACE SITE Editing – Add a PACE Site screen will appear. Enter data as necessary. Please note that the Begin Data Collection quarter will be pre-filled with the current reporting quarter. *Unless otherwise instructed, it is suggested that you leave this field unchanged.* When complete, click the SUBMIT button.

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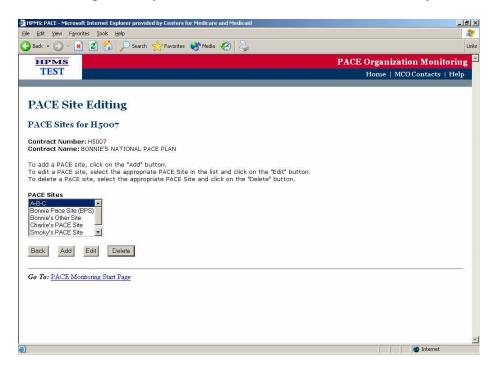
PACE SITE EDITING EDIT A PACE SITE

To edit a PACE site, select the PACE site you wish to edit, and select the EDIT button on the PACE Site Editing screen. The following PACE SITE Editing – Edit a PACE Site screen will appear. Edit data as necessary. Please note that the Begin Data Collection field cannot be edited. When complete, click the SUBMIT button.

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PACE SITE EDITING DELETING A PACE SITE

To delete a previously entered PACE site, select the PACE site you wish to delete.



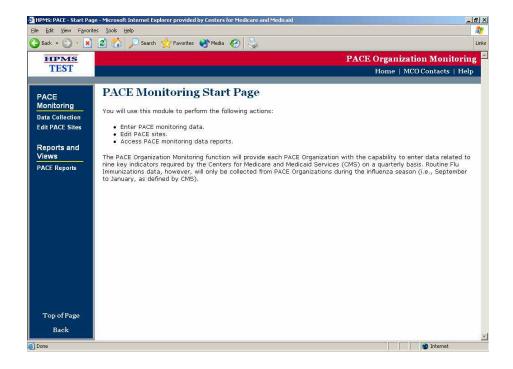
Once you have selected the site, select the DELETE button. The following message will appear:

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	Cancel	_

Select OK, and the site will be deleted.

PACE MONITORING ENTERING PACE DATA

To enter data for a PACE site, select the Data Collection link from the PACE Start Page.



PACE MONITORING SELECT A CONTRACT NUMBER

From the Select a Contract Number screen, select your organization's H number, and select the NEXT button.

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PACE MONITORING SELECT A PACE SITE

From the Select a PACE Site screen, select the site you wish to enter data for, and select NEXT.

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PACE MONITORING SELECT A DATA COLLECTION PERIOD ENTER TOTAL # OF PARTICIPANTS

Once a site is selected, the user must then select a data collection quarter. Generally, only the current data collection quarter will be displayed for selection, but because CMS may allow the plan to enter or edit data after a data collection period has ended, there may be more than one data collection quarter displayed for selection. You may also see the Flu Immunizations function, as that data is entered separately from the remaining quality indicators.

On the Select a Data Collection Period screen, the currently available collection periods will be highlighted in blue text. The user is required to enter the correct Total Number of Participants at the End of the Collection Period for any currently open collection periods. When complete, click on the SUBMIT button to proceed.

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PACE MONITORING SELECT A DATA COLLECTION PERIOD ENTER TOTAL # OF PARTICIPANTS CHECK

The PACE module will check to ensure that the user has entered participant number data for ALL Collection Periods available. Please ensure that you have entered the correct Number of Participants for all highlighted Collection Periods. When complete, select the SUBMIT button.

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PACE MONITORING SELECT A DATA COLLECTION PERIOD

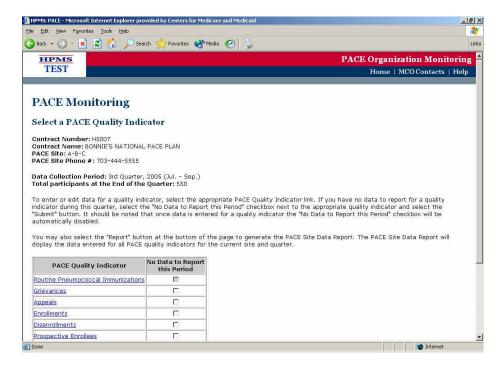
Once the Total Number of Participants is entered, the user can click on a highlighted quarter and advance to the Select a PACE Quality Indicator Selection screen, or select the "Back" button to return to the Select a Site screen.

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PACE MONITORING SELECT A PACE QUALITY INDICATOR

Select a PACE Quality Indicator Screen

Once a site is selected, the user can begin entering data for each of the PACE quality indicators being collected. Select one of the nine PACE Quality Indicators. If you do not have data to report or edit for a quality indicator, select the "No Data to Report this Period" check box, and select the Submit button to confirm. The "Submit" button will save any selections the user made to the "No Data to Report this Period" check boxes and returns the user to the Select a Quarter screen. If you make changes to the "No Data to Report this Period" check boxes and select the "Back" button, you will be prompted to save your changes.



PACE MONITORING ROUTINE PNEUMOCCOCCAL AND INFLUENZA IMMUNIZATIONS

The purpose of these measures is to provide information about the PACE participants who have received routine immunizations during a reporting year. Please note that while the Pneumoccoccal Immunizations screen will be available for all collection periods, the Influenza Immunizations screen will only be available during the Flu season, as defined to begin September 1, and end January 30 of the respective year.

Data Reporting Requirements:

Influenza Immunization

Number of participants who received an influenza (i.e., flu) immunization during the reporting year; (September 1 – March 31) Number of participants who refused to take a flu immunization

Number of participants NOT eligible for a flu immunization because it is medically contraindicated or prior immunized.

Total number of participants at the end of the month of March.

Calculation: Number of participants who received a flu immunization during the reporting period/(Total number of participants - Number of participants where flu immunization is medically contraindicated or prior immunized).

Pneumococcal Immunization

Number of participants who received a pneumococcal immunization in the last ten years (or 5-10 years based on your organization's policy for practice guidelines on this immunization) Total number of participants at the PACE organization, including:

Number of participants not immunized for pneumococcal; and Reason for not immunizing

Frequency:

Routine immunization data will only be collected during the flu season (e.g. September 1 to March 31, as defined by CMS).

How to use the measure:

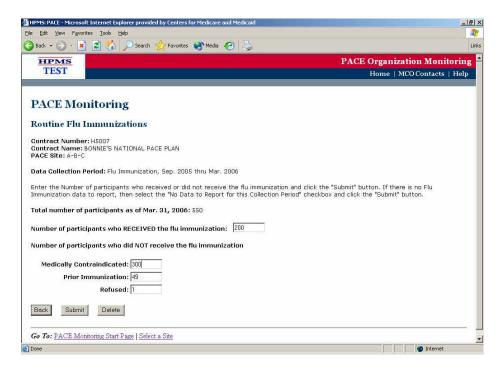
Compare the number of PACE participants who were enrolled during the reporting year to the number of participants who received routine immunizations (flu and pneumococcal) during the reporting year.

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 (i.e., the rate will exclude those participants who refused the vaccine or the vaccinations were medically contraindicated).

Data Entry Screens:

Flu Immunization data will be entered on the following screen. These data will be entered at the end of the January. The PACE organization user has up to twenty business days after the end of the month of March to enter the Flu Immunization information. At that time, information for the next quarter's data entry will be displayed.



Pneumococcal Immunization data will be entered on the following screen. These data will be entered quarterly. The PACE organization user has up to twenty business days after the end of the quarter to enter the Pneumococcal Immunization information. At that time, information for the next quarter's data entry will be displayed.

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Routine Pneumococcal Immunizations		
Contract Number: H5007 Contract Name: BONNIE'S NATIONAL PACE PLAN PACE Site: A-B-C		
Data Collection Period: 3rd Quarter, 2005 (Jul Sep.)		
Enter the Number of participants who received or did not receive the pneumococcal immunization and click the "	Submit" button.	
Total number of participants at the end of the quarter: 550		
Number of participants who RECEIVED the pneumococcal immunization:		
Number of participants who did NOT receive the pneumococcal immunization		
Medically Contraindicated: 0		
Prior Immunization: 0		
Refused: 549		
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PACE MONITORING ROUTINE PNEUMOCCAL IMMUNIZATIONS COUNTS CHECK

Please note that as you enter data into the PACE module, the system will perform count checks, such as the one below, to ensure the accuracy of the data. If you receive an error message, follow the instructions to correct the error.

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Number of participants who did NOT receive the pneumoco	iccal immunization
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GRIEVANCES AND APPEALS

Grievances are defined as either written or oral expressions of dissatisfaction with service delivery or the quality of care provided by a PACE Organization. Appeals are defined as a written complaint due to non-coverage or non-payment of a service or item.

Data Reporting Requirements:

Total number of participants Source of each grievance or appeal (participant, family, caregiver, other with description) Date of initiation of each grievance or appeal. Date of resolution of each grievance or appeal. Description of each grievance or appeal

Frequency:

PACE Organizations will be asked to submit grievance and appeals data on a quarterly basis. Note, both grievances and appeals will be entered **once** the grievance or appeal **has been resolved**.

How to use the measure:

It is expected that CMS and their State Agency partners will use these data to monitor trends and patterns. The number of grievances and appeals alone should not be viewed as an indicator of a problem. A high number of grievances could mean that participants are encouraged to speak up for themselves and voice their concerns.

Data Entry Screens:

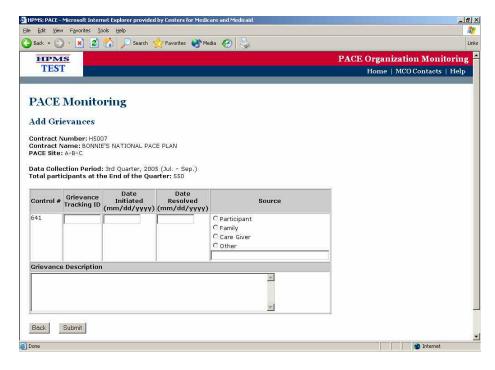
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Back	41 Add	Tracking ID 4567 Delete	Initiated 6/1/2005	Resolved 9/30/2005				
Back	41 Add	Tracking ID 4567 Delete	Initiated 6/1/2005	Resolved 9/30/2005				
Back	41 Add	Tracking ID 4567 Delete	Initiated 6/1/2005	Resolved 9/30/2005				
Back	41 Add	Tracking ID 4567 Delete	Initiated 6/1/2005	Resolved 9/30/2005				

The Grievance and Appeals screens will display all grievances and appeals that have been resolved for this quarter. To delete a Grievance or Appeals record, select the checkbox next to each appropriate record and select the "Delete" button.

PACE MONITORING ADD GRIEVANCES AND APPEALS

To add one or more grievances or appeals records, select the "Add" button to advance to the appropriate data entry screen. The PACE organization user should enter a grievance or appeal only after it has been resolved. You can continue to enter grievance and appeals information until seven days after the end of the quarter. At that time, information for the next quarter's data entry will be displayed.

Specific grievances or appeals data will be entered on this screen. Each Grievance and Appeals entry will have a Control # which is generated by the system to track the record. Additionally, you may choose to enter your own Grievance Tracking ID or Appeals Tracking ID number. This field allows the user to track the grievances and appeals with their own internal ID system. The user would also enter the Date Initiated, Date Resolved, the Source, and a Description of the grievance or appeal. If the user selects "Other" as the source of the grievance or appeal, the associated text field will be enabled, and you can enter a source other than those listed for selection.



PACE MONITORING EDIT GRIEVANCES AND APPEALS

To edit a grievance or appeal, select the control number next to the entry. You will be taken to the Edit Grievances/Appeals screen. Select the Submit button when finished.

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Total parti	cipants at th	ne End of the Qu	arter: 550		
	Grievance	Date	Date	12 000-000	
Control #	Tracking ID	Initiated (mm/dd/yyyy)	Resolved (mm/dd/yyyy)	Source	
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ENROLLMENTS

Enrollments are defined as individuals who have had an encounter with the PACE Organization and subsequently enrolled in the PACE program. Enrollment information is entered for each month by quarter.

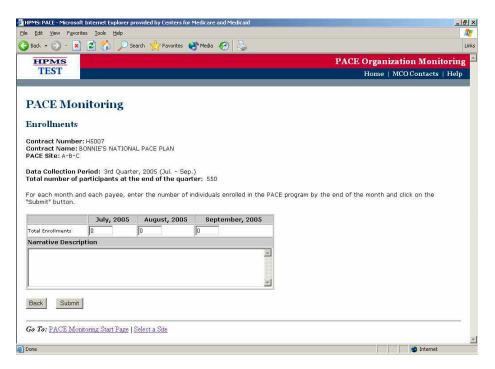
Data Reporting Requirements:

Total number of participants Number of individuals, who are enrolled in the program at the end of the month

How to use the measure:

It is expected that CMS and their State Agency partners will use this data to monitor trends and patterns. The data will also be used to determine if there are accessibility issues and to determine if the PACE Organization has sufficient financial resources to conduct appropriate marketing activities. This information can also be used to evaluate the PACE Organization's ability to maintain an appropriate census.

Data Entry Screens:



You will enter the number of individuals enrolled in the PACE program at the end of each month, identified by payee. The months listed are based on the quarter and year. The PACE organization user can continue to enter Enrollment information up to twenty business days after the end of the data entry quarter. At that time, information for the next quarter's data entry will be displayed.

DISENROLLMENTS

Disenrollments are defined as participants who left (i.e., disenrolled) the PACE program for reasons <u>other then death</u>.

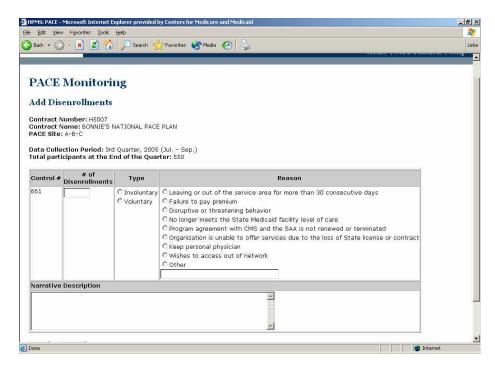
Data Reporting Requirements:

Total number of participants Number of involuntary disenrollments Number of voluntary disenrollments Reason for each involuntary disenrollment Reason for each voluntary disenrollment If "Other" is selected, the user will also enter a text description.

How to use the measure:

It is expected that CMS and their State Agency partners will utilize this information to determine if there are any problems with site operations, such as accessibility or provision of services, etc., which are causing voluntary disenrollments. In addition, this information can be used to review the organization's policies on involuntary disenrollments.

Data Entry Screens:



Data on specific Disenrollments are entered on this screen. Each Disenrollment entry will have a Control # which is generated by the system to track the record. You will select the # of disenrollments by type, type of Disenrollment, and select the Reason for Disenrollment. If you select "Other" as the reason for the disenrollment, the associated text field will be enabled, and you can enter a reason other than those listed for selection.

You may aggregate any of your voluntary or involuntary disenrollments if the reasons are the same. However, the voluntary and the involuntary disenrollments must be separated. To delete a Disenrollment record, select the checkbox next to each appropriate record and select the "Delete" button. To add one or more Disenrollment records, select the "Add" button to advance to the appropriate data entry screen. The PACE organization user can continue to enter disenrollment information up to twenty business days after the end of the quarter. At that time, information for the next quarter's data entry will be displayed.

PROSPECTIVE ENROLLEES

Prospective enrollees are defined as potential participants who were interviewed and <u>met the</u> <u>three basic eligibility requirements</u> but did not enroll in the PACE program.

Data Reporting Requirements:

Indicate the "Reason" each potential participant did not enroll (e.g., health/safety jeopardy by living in community setting *, Preference for Own Physician; Preference for Other Health Care Provider or Institution; Unwillingness to meet payment responsibilities; Unwilling to Comply with Treatment Plan; or Other). If "Other" is selected, the user will also enter a text description. *If a prospective participant is denied enrollment because his or her health or safety would be jeopardized by living in a community setting, the PACE organization must meet the following requirements:

- (1) Notify the individual in writing of the reason for the denial.
- (2) Refer the individual to alternative services, as appropriate.
- (3) Maintain supporting documentation of the reason for the denials.
- (4) Notify CMS and the State Administering agency and make the documentation available for review**.

<u>**The PACE organization must also follow the State's requirement for notification prior to</u> <u>denial of enrollment.</u>

How to use the measure:

This information can be utilized to determine if the PACE Organization is following the appropriate eligibility criteria and to determine if the organization is conducting appropriate marketing activities.

Data Entry Screens

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Data on all potential participants for the quarter is displayed on the Prospective Enrollees screen. To add one or more Prospective Enrollee records, select the "Add" button to advance to the appropriate data entry screen. To delete a Prospective Enrollee record, select the checkbox next to each appropriate record and select the "Delete" button. You will then enter the # of prospective enrollees by Reason and select the Reason for Not Enrolling. If you select "Other" as the reason for not enrolling, the associated text field will be enabled, and you can enter a reason other than those listed for selection. The PACE organization user can continue to enter prospective enrollee information up to twenty business days after the end of the quarter. At that time, information for the next quarter's data entry will be displayed. You may aggregate any of your prospective enrollees' data by reason, when the reasons given are the same.

READMISSIONS

Readmissions are defined as PACE participants re-admitted to an acute care hospital within 31 days.

Data Reporting Requirements:

Total number of participants

Number of participant hospital re-admissions in a 31-day period (from discharge to readmit).

How to use the measure:

CMS and State users will review those PACE participants with high usage to determine if intervention by the PACE Organization could have prevented some of the hospitalizations. Readmission for the same reason in a 31-day period could indicate that the length of stay is too short or that there is inadequate follow-up care by the PACE Organization. CMS and the State monitors will conduct quarterly comparisons to get a total picture of the care provided by the organization.

Data Entry Screens:

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The Readmissions screen displays all readmissions that have been entered for this quarter. The PACE organization user will enter the number of re-admissions that occurred within 31 days of release from the hospital on this screen.

To add one or more Readmissions records, select the "Add" button to advance to the appropriate data entry screen. To delete a Readmissions record, select the checkbox next to each appropriate record and select the "Delete" button. Each Readmission entry will have a Control number that is generated by the system to track the record. You will then enter the number of readmissions and the Admitting Medical Diagnosis. The Admitting Medical Diagnosis text field allows the user to

enter up to 4000 characters. You can add the ICD-9 code or the narrative diagnosis. The PACE organization user can continue to enter unscheduled hospitalization information up to twenty business days after the end of the quarter. At that time, information for the next quarter's data entry will be displayed. You may aggregate your readmissions when the diagnosis reason is the same.

EMERGENCY (UNSCHEDULED) CARE

Emergency (Unscheduled) Care is defined as PACE participants seen in the hospital emergency room (including care from a PACE physician in a hospital emergency department) or an outpatient department/clinic emergency.

Data Reporting Requirements:

Total number of participants Specific reason including diagnosis (general diagnosis such as a fractured femur or ICD-9 code)

How to use the measure:

CMS and State users will review those PACE participants with high usage to determine if intervention by the PACE Organization could have prevented some of the visits to the Emergency Room. An inadequate on-call system may also account for a high use of emergent care.

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The Emergency Care screen displays all emergency care incidents that have been entered for this quarter. To add one or more Emergency Care records, select the "Add" button to advance to the appropriate data entry screen. To delete an Emergency Care record, select the checkbox next to each appropriate record and select the "Delete" button. Each Emergency Care record will have a Control number that is generated by the system to track the record. You will then enter the # of emergency visits and the General Diagnosis. The General Diagnosis text field allows the user to enter up to 4000 characters. The PACE organization user can continue to enter emergency care information up to twenty business days after the end of the quarter. At that time, information for

the next quarter's data entry will be displayed. You may aggregate your emergency visits when the diagnosis reasons are the same.

UNUSUAL INCIDENTS FOR PARTICIPANTS AND THE PACE SITE

Unusual incidents are defined as unanticipated circumstances, occurrences, or situations that have the potential for serious consequences for the participants. Examples include, but are not limited to: Falls at Home or the Adult Day Health Center; Falls while Getting into the Van; Van Accidents other than Falls; Participant Suicide or Attempted Suicide; Staff Criminal Records; Infectious or Communicable Disease Outbreaks; Food Poisoning; Fire or Other Disasters; Participant Injury that Required Follow-up Medical Treatment; Participant Injury on Equipment; Lawsuits; Medication Errors, Participant Elopement; and any type of Restraint Use. This is not an inclusive list, so we would expect PACE sites to submit quarterly information on any unanticipated situations that occur.

Data Reporting Requirements:

Total number of participants Description of the incident

How to use the measure:

CMS and State users will analyze categories focusing on whether these incidents were preventable, what steps were taken to resolve the problem, and what changes are being made to prevent or reduce the likelihood of reoccurrence. Is there a pattern that indicates a need for follow-up to investigate health and safety issues and procedures? Is this a program problem (e.g. negligence by staff) or a participant problem (e.g. verbal outbursts by participant with mental illness or severe dementia)?

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		C Van accident other than fall	
		C Suicide or attempted suicide	
		C Staff criminal record	
		C Infectious or communicable disease outbreak	
		C Food Poisoning	
		C Fire or other disasters	
		C Injury that required follow-up medical treatment	
		C Injury on equipment	
		C Lawsuit	
		C Medication error	
		C Restraint use	
		C Other	
Varrative De	escription	•	

The Unusual Incident screen will display all unusual incidents that have been entered for this quarter. To add one or more Unusual Incident records, select the "Add" button to advance to the appropriate data entry screen. To delete an Unusual Incident record, select the checkbox next to each appropriate record and select the "Delete" button. Each Unusual Incident record will have a Control number that is generated by the system to track the record. You will then enter the Incident Description. If you select "Other" as the incident description, the associated text field will be enabled, and you can enter an incident description other than those listed for selection. The Incident Description text field allows the user to enter up to 4000 characters. The PACE organization user can continue to enter unusual incident information up to twenty business days after the end of the quarter. At that time, information for the next quarter's data entry will be displayed. You may aggregate your unusual incidents when the incident types are the same.

PARTICIPANT DEATHS

Deaths are defined as the death of participants during the given reporting period.

Data Reporting Requirements:

Total Number of participants Cause of the participant's death (Enter diagnosis i.e. congestive heart failure). Setting of the participant's death (Home, Hospital, NF/SNF, or Other with description)

How to use the measure:

CMS and State users will analyze the data to determine if there is a pattern indicating inappropriate setting for the participant or problems with accessibility to 24-hour care. Because of the link between the number of deaths and enrollment, this information may also indicate if the PACE Organization is maintaining an appropriate census to remain fiscally viable.

Data Entry Screens:

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The Participant Deaths screen will display all deaths that have been entered for this quarter. To add one or more Participant Death records, select the "Add" button to advance to the appropriate data entry screen. To delete a Participant Death record, select the checkbox next to each appropriate record and select the "Delete" button. Each Participant Death record will have a Control number that is generated by the system to track the record. You will then enter the #of participant deaths, select the setting and Cause of Death. If you select "Other" as the setting, the associated text field will be enabled, and you can enter a setting other than those listed for selection. The Cause of Death text field allows the user to enter up to 4000 characters. The PACE organization user can continue to enter participant death information up to twenty business days after the end of the quarter. At that time, information for the next quarter's data

entry will be displayed. You may aggregate your deaths by cause and setting when these have occurred with the same diagnosis and setting.

PACE MONITORING NO DATA TO REPORT THIS PERIOD

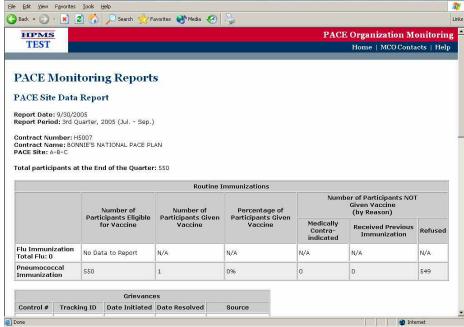
If there is no data to report for a specific quality indicator, select the corresponding checkbox in the "No Data to Report this Period" column and select the "Submit" button.

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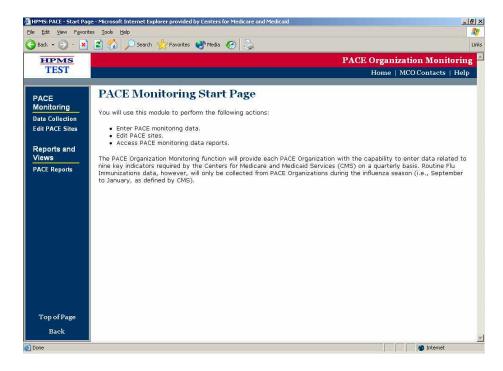
PACE MONITORING GENERATE SITE SUMMARY REPORT

Once the data for all quality indicators have been entered, you can select the REPORT button at the bottom of the screen to generate a PACE site report.

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dicator during this quarter, select (the "No Data to Report	opriate PACE Quality Indicator link. If you have no data to report for a quality this Period' checkbox next to the appropriate quality indicator and select the ed for a quality indicator the "No Data to Report this Period" checkbox will be	
ou may also select the "Report" but splay the data entered for all PACE PACE Quality Indicator	E quality indicators for t	he page to generate the PACE Site Data Report. The PACE Site Data Report will he current site and quarter.	
	this Period		
outine Pneumococcal Immunization			
rievances	Π		
ppeals	N		
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eadmissions	N		
mergency (Unscheduled) Care	No.		
nusual Incidents	N		
articipant Deaths	Π		



From the PACE Organization Monitoring Start Page, you can select the PACE Reports link to access various reports.



The screen below shows a listing of the reports available to PACE organizations. To view a PACE report, select the Report name and then select the "Next" button.

NOTE: The reports only contain those data submitted by your PACE organization. No data, other than contact information, is viewable for other PACE Organizations.

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Once you have selected the report, the following screen will appear. Select the quarter containing the data you wish to view, and then select the "Next" button.

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Once the report and quarter have been chosen, the following screen will appear. The user should navigate, where needed, through the Region, State, H Number, and Site screens to select their specific H Number/Site. When complete, select the "Next" button to view that report.

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PACE Organization Report

The PACE Organization Report displays contact information for all sites within a PACE Organization by Region and State.

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PACE Site	Data Entry Contact	Address	E-Mail	Telephone		
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	14 1428 1928 1978 10 12	an an				
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PACE Site Data Report

The PACE Site Data Report displays the monitoring data for the nine PACE quality indicators by Site.

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PACE Aggregate Report

The PACE Aggregate Report displays an aggregate level summary for each of the nine PACE quality indicators by Region, State, or Site. These data are collected / entered by PACE Organization by numerator and denominator and are reported by percentages.

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PACE Narrative Descriptions Report

The PACE Narrative Descriptions report displays the text entered in the narrative data fields for the nine PACE quality indicators by H Number, Site, and quarter.

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Emergency (Unscheduled) Care Emergency (Unscheduled) Care	n/a n/a Other - other	test	

PACE Status Report

The PACE Status Report identifies which PACE site data has not been submitted, or on the other hand, indicates that all data have been successfully entered.

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HPMS CONTACT INFORMATION

Please contact the HPMS Help Desk at 1-800-220-2028 for technical assistance on the use of the HPMS for the reporting of PACE data elements.

If you have any questions regarding PACE regulations pertaining to the reporting requirements, please do not hesitate to call Patricia Rishell at 410-786-5496 or <u>patricia.rishell@cms.hhs.gov</u>