Release Notes to the Specifications Manual for Joint Commission National Quality Core Measures- v2010B2 (10-1-2010)

Guidelines for Using Release Notes

Release Notes 2010B1 provide modifications to the *Specifications Manual for Joint Commission National Quality Core Measures*. The Release Notes are provided as a reference tool and are not intended to be used to program abstraction tools. Please refer to the *Specifications Manual for Joint Commission National Quality Core Measures* for the complete and current technical specifications and abstraction information.

The notes are organized to follow the order of the Table of Contents. Within each topic section, a row represents a change beginning with general changes followed by data elements in alphabetical order. The implementation date is **10-01-2010** unless otherwise specified. The column headings are described below:

- **Section** used to identify which section(s) listed in the Table of Contents contain the change listed. The sections are Data Dictionary, Measurement Information, Missing and Invalid Data, etc.
- Impacts used to identify which portion(s) of the Manual Section is impacted by the change listed. Examples are Alphabetical Data Dictionary, Measure Information Form (MIF) and Flowchart (Algorithm). The measures that the data element is collected for are identified.
- Rationale provided to identify why the change is being made.
- Description of Changes used to identify the section within the document where the change occurs, e.g., Definition, Data Collection Question, Allowable Values, and Denominator Statement -Data Elements.

Data elements that cross multiple measures and contain the same changes will be consolidated into one row. If those changes do not apply to all of the measures listed in the Impacts column that is identified in the description of changes.

This document should allow the reader to identify the exact location of each change by reading from left to right across the columns. An **example** is: Changing a note for abstraction within *Initial Blood Culture Collection Time*, which is collected for PN-3a, PN-3b.

Section	Impacts	Rationale	Description of Changes				
Effective 10/01/2010 Discharges							
MIF	PC-04	To correct denominator excluded population	Add second bullet under denominator excluded population: ICD-9-CM Principal Diagnosis Code for liveborn newborn as defined in Appendix A, Table 11.10.3 AND ICD-9-CM Other Diagnosis Codes for newborn septicemia or bacteremia as defined in Appendix A, Table 11.10 Add the following denominator and risk adjustment data elements: Admission Type and Point of Origin for Admission or Visit Delete the following denominator and risk adjustment data element: Newborn Admission Source				
MIF	PC-05	To correct denominator included population	Change denominator statement from term newborns discharged from the hospital to: single term newborns discharged from the hospital Change the denominator included population from: Live-born newborns with ICD-9-CM Principal Diagnosis Code or ICD-9-CM Other Diagnosis Codes				

			for term gestation as defined in Appendix A, Table 11.20.1 to: Liveborn newborns with ICD-9-CM Principal Diagnosis Code or ICD-9-CM Other Diagnosis Codes for single liveborn newborn as defined in Appendix A, Table 11.20.1 Add the following denominator data elements: Admission Type and Point of Origin for Admission or Visit Delete the following denominator data element: Newborn Admission Source
MIF- Algorithm	PC-04	To correct denominator excluded population	Add Admission Type and Point of Origin for Admission or Visit decision checks between ICD-9-CM Principal or Other Procedure Code and ICD-9-CM Other Diagnosis Codes decision check on Table 11.10.1 Delete Newborn Admission Source decision check and associated branches
MIF- Algorithm	PC-05	To correct denominator included population	Add Admission Type and Point of Origin for Admission or Visit decision checks right after Run box process box Delete Newborn Admission Source decision check and associated branches
Data Dictionary	Data Elements	To update data elements	Add: Admission Type and Point of Origin for Admission or Visit Delete: Newborn Admission Source
Data Dictionary	Point of Origin for Admission or Visit	To remove an allowable value and associated notes for abstraction	Change: allowable value 7 from 7 Emergency Room The patient was admitted to this facility after receiving services in this facility's emergency room. <u>Usage Note</u> : <u>Excludes patients who came to the emergency room from another health care facility.</u> to 7 Reserved for assignment by the NUBC (Discontinued effective 10/1/2010.) Delete the following under <u>Notes for Abstraction</u> : Example 2:
			An auto accident victim was taken to the emergency department of Hospital A by EMTs, stabilized, then transferred to Hospital B where he receives additional treatment in the ED, and then is admitted as an inpatient to Hospital B. The Point of Origin code for Hospital A is 7- Emergency Room; the point of origin for Hospital B would be 4- Transfer from a Hospital.
			The emergency room code is limited to patients who receive unscheduled emergency services in the ER not originating from another health care facility. As in the auto accident example above, a victim brought to the ER would be coded as 7 since the patient was not previously at any other kind of health care facility. Code 7 also includes self-referrals in emergency situations that require immediate medical attention.

			Usage Notes/Cases
			III. Transfer by Law Enforcement or Court If the patient was simply transported by law enforcement to our facility, the patient is neither under arrest nor serving any jail time, then the Point of Origin code would be 7 – Emergency Room. Law enforcement is simply transporting the patient for emergency/urgent care treatment. The patient is not incarcerated (that is, neither under arrest nor serving any jail time).
PC-List	Initial Patient Population	To reduce abstraction burden by using administrative data instead of chart abstracted data and correct population criteria.	Add: text "OR NO ICD-9-CM Principal Diagnosis Code as defined in Appendix A, Table 11.10.3 AND NO ICD-9-CM Other Diagnosis Code as defined in Appendix A, Table 11.10" to the definition for the Initial patient population for Newborns with BSI. Replace: bullet with Newborn Admission Source in the definition for Newborns with BSI with the following text: "Admission Type of Elective, Emergency, Urgent, Trauma Center or Information not available; and Point of Origin for Admission or Visit from Non-Health Care Facility Point of Origin, Clinic, Transfer From a Hospital (Different Facility), Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF), another Health Care Facility Court/Law Enforcement Information not Available Transfer from One Distinct Unit of the Hospital to another Distinct Unit of the Same Hospital Resulting in a Separate Claim to the Payer, Ambulatory Surgery Center, or Hospice".
PC-List	Initial Patient Population Algorithm	To reduce abstraction burden by using administrative data instead of chart abstracted data.	Add Admission Type and Point of Origin for Admission or Visit decision points and associated logic after Discharge Status to include or exclude cases from Initial Patient population. Delete Newborn Admission Source decision check and associated logic.
PC-List	Initial Patient Population Algorithm	To correct the population criteria	Add decision points for ICD-9-CM Principal Diagnosis Code and ICD-9-CM Other Diagnosis Code below the first ICD-9-CM Principal Diagnosis Code to exclude cases that had a principal diagnosis on Table 11.10.3 and a secondary diagnosis on Table 11.10.
Appendix A	Table 11.07	Code table updated to contain correct codes	Appendix A-Table 11.07 Add: Codes 663.50, 663.51, 663.53 Delete: Code 663.5
Appendix A	Table 11.10	Code table was updated to reflect deleted code	Appendix A-Table 11.10 Delete: Code 790.7
Appendix A	Table 11.10.2	Code table was updated to	Appendix A-Table 11.10.2 Add: Code 790.7

		reflect additional code	Delete: Code 038.1
Appendix A	Table 11.10.3	Code table was added to reflect change in denominator excluded populations	Appendix A-Table 11.10.3 Add: Code table 11.10.3 Liveborn newborn
Appendix A	Table 11.20.1	To correct error in decimal point	Appendix A-Table 11.20.1 Change: Code table name from Term Gestation to Single Liveborn Newborn Add: Codes V30.00, V30.01, V30.1, V 30.2 Delete: Code 765.29