

## **FAQs on the PACE Quality Monitoring and Reporting**

### **April 2018**

#### **Frequency for Reporting PACE Quality Data**

##### **Q1: What is the required frequency for reporting PACE Quality Data in the Health Plan Management System (HPMS)?**

**A:** PACE Organizations (POs) must report all PACE quality data (which includes the former PACE Level I, PACE Level II, and Root Cause Analyses investigations) to CMS on a quarterly basis, with a 45 calendar day grace period at the end of each quarter. POs are not precluded from submitting PACE quality data prior to the end of the quarter.

##### **Q2: Can POs request an extension for reporting PACE quality data beyond the quarterly due dates?**

**A:** POs may request a reporting extension in HPMS. The CMS Account Manager will review and make a determination to approve or deny the request as expeditiously as possible. Please see the HPMS PACE Quality Monitoring User Guide for instructions on how to request an extension.

#### **Root Cause Analysis Requirements (RCAs)**

##### **Q3: What are the requirements for conducting and reporting RCAs?**

**A:** POs must initiate the RCA investigation *internally* within three working days of identifying the incident. The analysis must be completed and documented in HPMS within the 45 day grace period at the end of each quarter. The mandatory data fields for reporting RCAs include contributing factors, actions taken and ongoing improvements.

##### **Q4: Can POs upload a file in place of the mandatory RCA fields?**

**A:** POs must complete the mandatory RCA fields in HPMS. Supporting documentation may be submitted in HPMS through the upload document feature, however, CMS does not require the submission of supporting documentation into HPMS and expects that it will only be done on a voluntary basis, and only as needed in unusual circumstances, e.g., police/coroner reports, complex adverse outcomes, etc.

##### **Q5: What is the requirement for reporting the participant's current status?**

**A:** POs are required to indicate in HPMS what the participant's current status is at the conclusion of the RCA investigation.

#### **Notifications to CMS and the State Administering Agency (SAA)**

##### **Q6: What are the requirements to notify CMS and the SAA when incidents such as falls with injury, elopements, etc., occur?**

**A:** POs are required to discuss PACE quality data with their CMS AM as part of routine discussions. Please consult with your AM to determine the frequency of these discussions. Likewise, POs should consult with their SAA to determine what the expectations are for notifications and discussions between the SAA and the PO when such incidents occur.

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#### **Q7: Will SAA staff have access to HPMS PACE quality data?**

**A:** SAA staff will maintain their ability to access data for those PACE organizations within their respective state. States that do not currently have access to the PACE Quality Monitoring Module may request access by contacting the HPMS user access mailbox at [hpms\\_access@cms.hhs.gov](mailto:hpms_access@cms.hhs.gov).

#### **PACE Quality Data Reporting Requirements**

#### **Q8: What is the requirement for reporting adverse outcomes?**

**A:** CMS expects POs to document an adverse outcome(s) in instances where serious injury or a significant hospitalization occur as a result of a PACE Quality Data incident, e.g., elopements, falls with injury, restraint use, etc., or, when an adverse outcome occurs independent of other PACE Quality Data incidents.

#### **Q9: What is the requirement for reporting significant diagnoses?**

**A:** It is recommend that POs identify the diagnoses that are most relevant to the incident and/or those that have a significant impact on the participant's overall health and functional status.

#### **Q10: What is the threshold for reporting pressure injuries and how should POs report more than one pressure injury?**

**A:** POs must report a stage 3, stage 4 or unstageable pressure injury that is acquired while enrolled in PACE. Each pressure injury is reported in HPMS as a separate entry.

#### **Q11: What is the requirement for reporting the participant's center attendance?**

**A:** POs are required to indicate in HPMS what the participant's center attendance is at the time the incident occurred.

#### **PACE Quality Data Resources**

#### **Q12: Where can additional information on the PACE Quality Data reporting requirements be found?**

**A:** Additional information is located in the PACE Quality Monitoring and Reporting Guidance document, which can be found on the Division of Medicare Advantage Operations (DMAO) Portal at <https://dmao.lmi.org>.

#### **Q13: Who can I contact for questions regarding the PACE Quality Data reporting requirements?**

**A:** For questions regarding the PACE Quality Data reporting requirements, contact the DMAO portal at <https://dmao.lmi.org>.