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INTRODUCTION

In order to comply with the PACE regulation, §460.140, §460.200(b)(1), §460.200 (c), and §460.202, all PACE Organizations must meet external quality assessment and reporting requirements as specified by the Centers for Medicare & Medicaid Services (CMS) and the State Administering Agency (SAA).

The PACE quality data elements are reported to CMS using the Health Plan Management System (HPMS), an information system and data exchange mechanism for Medicare managed care organizations (MCOs), including PACE Organizations.

HPMS PACE Organization Monitoring Functionality

The HPMS PACE Quality Monitoring module enables PACE organizations to enter certain data required by CMS and the SAA to monitor the performance of their organization. The PACE Quality 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 for the managed care contract, and is identified in the executed PACE program agreement.) An H Number may be associated with one or more sites, and the PACE Quality Monitoring module requires data to be entered at each site.

PACE data submitted through the PACE Quality Monitoring module must be provided 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 manual will provide PACE organization users with guidance on entering data, printing reports, and navigating the various screens and functions in the module.
I. GETTING STARTED

CMS USER IDS

Users must have a CMS-issued User ID and password with HPMS access in order to log into the system. Users must also associate their User ID with the specific Medicare Advantage (MA) contract numbers they work with in the HPMS.

To obtain a new CMS User ID, users must complete a CMS User ID request form as required. Users may access the following web site for detailed access instructions, including forms.


Direct all further questions related to HPMS user access to HPMS_access@cms.hhs.gov.
II. PACE Quality Monitoring

PACE START PAGE

Below is the HPMS Home Page. This is the first page to display after the user logs into the HPMS.

Select Monitoring from the top navigation bar, then select PACE Quality Monitoring in the fly-out menu (Table II-1) to advance to the PACE Quality Monitoring Start Page (Table II-2).

The PACE Quality Monitoring Start Page contains the links that enable users to enter and upload data, view reports, request a reporting-period extension, and either log off the HPMS or return to the HPMS Home Page.
III. DATA ENTRY

To enter data (manual option – not upload option) for a PACE site, select the Data Entry link in the right menu on the PACE Start Page (Table III-1). The user will advance to the Data Entry - Selection Criteria screen (Table III-2).

Table III-1

![Data Entry Screen](image)

SELECTION CRITERIA

Select the organization’s H number from the Data Entry - Selection Criteria screen (Table III-2). After the H number has been selected, the site names attached to the H number will display. Select the site name for which to enter data. After the user selects a site, the Collection Period picklist will auto-populate. Select a data-collection quarter.

Generally, only the current data collection quarter will display, but previous periods may display in some cases.

Table III-2

![Selection Criteria Screen](image)
**PACE QUALITY INDICATOR SELECTION**

The **Data Entry - Quality Indicator Selection** screen (Table III-3) enables the user to specify the quality indicator for which to enter data. Select the PACE Quality Indicator using the radio buttons to the left of the quality indicator, and select **Edit Quality Indicator**.

Note that the status of each quality indicator displays. The valid statuses are: **Not Started**, **No Data to Report**, and **Data Submitted**. Select **Back** to return to the **Data Entry - Selection Criteria** screen.

![Table III-3](image-url)
PACE QUALITY INDICATOR: NO DATA TO REPORT

A “No Data to Report” function is available for each quality indicator. Use this function when there is no data for a quality indicator.

For example, to submit “No Data to Report” for Appeals, select Appeals on the Data Entry - Quality Indicator Selection screen.

On the Data Entry - Appeals screen (Table III-4), select No Data to Report.

Table III-4

Review the confirmation data on the Data Entry - Appeals - No Data to Report screen (Table III-5). Select Back to make a correction, or select Submit to return to the Data Entry - Quality Indicator Selection screen.

Table III-5
The updated status of the quality indicator “No Data to Report” will display (Table III-6).

**Table III-6**

<table>
<thead>
<tr>
<th>Select</th>
<th>PACE Quality Indicator</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appels</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Emergency Team/Unit</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Diagnostic Eval</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Death (Non-Infectious)</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Falls/Injury</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Preventer Hits</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Showers</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Immunizations - Influence Yellow, Red, or Yellow 2010</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>iVitamin Administration</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Abuse</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Advance Drug Reaction</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Advance Outcome</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Burn/2nd Degree or Higher</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Disponent</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Equipment Related/Injuries</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Falls With Injury</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Fire/Smoke Detectors</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Gerontological Outbreak</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Infantile Illness Outbreak</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Media Related Event</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Medication Related</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Medication Related (Sedation)</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Medical/Ambulance</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Pressure Injury</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Railroad</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Suicide Attempt/Fatal</td>
<td>No Data to Report</td>
<td></td>
</tr>
<tr>
<td>Unexplained Deaths</td>
<td>No Data to Report</td>
<td></td>
</tr>
</tbody>
</table>

A “Data To Report” function is provided to reverse a “No Data to Report” entry.

On the **Data Entry - Quality Indicator Selection** screen, select the quality indicator for which the user wishes to reverse the “No Data to Report.”

For example, select **Appeals**, and select **Edit Quality Indicator** to advance to the **Data Entry - Appeals** (Table III-7) screen. Then select **Data To Report**.

**Table III-7**

![](image.png)
On the Data Entry - Appeals - Data to Report confirmation screen (Table III-8), review the information. Select Back to make a correction, or select Submit to be returned to the Data Entry - Quality Indicator Selection screen.

Table III-8

On the Data Entry - Quality Indicator Selection screen (Table III-9), the status of the quality indicator will change from “No Data to Report” to “Not Started.” After the status has changed to “Not Started,” the user can enter data for this quality indicator.

Table III-9

If records have been reported for a quality indicator, the user must delete ALL before the user can indicate No Data To Report.

*Note that “No Data to Report” is not an option for the quality indicators Enrollment Data, Immunizations - Pneumococcal, and Immunization - Influenza. Zeros should be entered for these quality indicators if there is no data to report.
PACE QUALITY INDICATOR: APPEALS

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Appeals data. Please refer to the PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Appeals.

Data Reporting Requirements:
1. Source
2. Appeal Type
3. Resolution

On the Data Entry - Quality Indicator Selection screen (Table III-3), select the Appeals Quality Indicator, and select Edit Quality Indicator.

On the Data Entry - Appeals screen (Table III-10), select Add to advance to the Data Entry - Appeals - Add screen (Table III-11). Note that the Edit and Delete buttons are disabled on the Data Entry - Appeals screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Select data from all dropdowns (Table III-11).
Select **Next** to advance to the **Data Entry - Appeals - Verify** screen (Table III-12). Review information. Select **Back** to make corrections, or **Submit**.

**Table III-12**

![Image of Table III-12]

A **Control Number** generates for each **Appeals** record (Table III-13). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

**Table III-13**

![Image of Table III-13]
PACE QUALITY INDICATOR: EMERGENCY ROOM VISITS

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Emergency Room and Urgent Care Center Visit data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Emergency Room Visits.

Data Reporting Requirements:
1. ER/Urgent Care Center Visit Date
2. Primary Admitting Diagnosis (ICD-10 Codes)
3. Discharge Diagnosis (ICD-10 Codes)
4. Admission to Hospital
5. Participant Living Situation
6. Participant Outcomes (User Ctrl + Right Mouse Select to mark multiple selections)
7. Has the Participant had repeat ER Visits?

On the Data Entry - Quality Indicator Selection screen (III-3), select Emergency Room Visits Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Emergency Room Visits screen (Table III-14), select Add to advance to the Data Entry - Emergency Room Visits - Add screen (Table III-15). Note that the Edit and Delete buttons are disabled on the Data Entry - Emergency Room Visits screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-14

Enter data in all fields, picklists, and dropdowns. To add a Primary Admitting Diagnosis or Discharge Diagnosis, enter an ICD-10 code in the Primary Admitting Diagnosis or Discharge Diagnosis field, then select Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-16).
Table III-15

Emergency Room Visits - Add

Contract Number: 20001
Contract Name: EXAMPLE CONTRACT 1
Site Name: Example Site Name
Data Collection Period: 2nd Quarter, 2018 (Apr. - Jun.)

ER Visit Date:

Primary Admitting Diagnosis:

Discharge Diagnosis:

Assigned Diagnosis

Add a Diagnosis >>

<< Remove a Diagnosis

<< Remove All

Admission to Hospital?

Participant Living Situation:

Discharged to a higher level of care
Discharged to Home
DMF (Medical equipment) provided
Hospital Admission
Medication changes
New Diagnoses
No new diagnoses or interventions
Reassessment by Member(s) of UI
Referral for PCP follow-up
Referral for Specialist follow-up

Has this Participant had repeat ER Visits?  Yes  No

Note: All data entry fields are required.

ICD-10 Guidance:

ICD Code is 3-8 characters in length
Position 1 is alpha
Position 2 is numeric
Position 3 is alpha or numeric (not case sensitive)
Position 4 is a period
Position 5-6 are alpha or numeric (not case sensitive)

Table III-16

ICD-10 Code Lookup

Note: To search for a specific ICD-10 code and its description, enter a keyword(s) below and select "Search." Select the code link in the search results to populate the code in the appropriate field on the Data Entry page.

Enter a keyword(s) or an ICD-10 code(s): Chondromacia, chondromacia, shoulder

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M54.21</td>
<td>Chondromacia, shoulder</td>
</tr>
<tr>
<td>M54.22</td>
<td>Chondromacia, right shoulder</td>
</tr>
<tr>
<td>M54.23</td>
<td>Chondromacia, unspecified shoulder</td>
</tr>
</tbody>
</table>
Select **Next** to advance to the **Data Entry - Emergency Room Visits - Verify** screen (11-17). Review information. Select **Back** to make corrections, or **Submit**.

### Table III-17

![Table III-17](image)

A **Control Number** generates for each **Emergency Room Visits** record (Table III-18). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

### Table III-18

![Table III-18](image)
**PACE QUALITY INDICATOR: ENROLLMENT DATA**

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Enrollment data. Please enter participants only once under the correct category. Medicare is for Medicare-Only eligible participants, Dual Eligible is for both Medicare and Medicaid eligible, etc.

**Data Reporting Requirements:**
1. **Total Census**
2. **Total New Enrollments**
3. **Total Disenrollments**
4. **Total Deaths**

On the **Data Entry - Quality Indicator Selection** screen (Table III-3), select the **Enrollment Data** Quality Indicator and select **Edit Quality Indicator**.

Enter data on the **Data Entry - Data Enrollment** screen (Table III-19).
Select **Next** to advance to the **Data Entry - Enrollment Data - Verify** screen (Table III-20). Review information. Select **Back** to make corrections, or **Submit**.

**Table III-20**

The user will enter the number of individuals enrolled in the PACE program at the end of each quarter.
PACE QUALITY INDICATOR: DENIALS (OF PROSPECTIVE ENROLLEES)

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Denials (of Prospective Enrollees) data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Denials (of Prospective Enrollees) data.

Data Reporting Requirements:
1. Is this Person?
2. Date of Denial Occurrence
3. Denial Reason

On the Data Entry - Quality Indicator Selection screen (III-3), select Denials (of Prospective Enrollees) Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Denials (of Prospective Enrollees) screen (Table III-21), select Add to advance to the Data Entry - Denials (of Prospective Enrollees) - Add screen (Table III-22). Note that the Edit and Delete buttons are disabled on the Data Entry - Denials (of Prospective Enrollees) screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-21

![Data Entry - Denials (of Prospective Enrollees) Screen](image)

Enter data in all fields, picklists, and dropdowns.
Select **Next** to advance to the **Data Entry - Denials (of Prospective Enrollees) - Verify** screen (Table III-23). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Denials (of Prospective Enrollees)** record (Table III-24). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the record to be deleted, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

**Table III-24**

![Screen Shot](image-url)
PACE QUALITY INDICATOR: FALLS WITHOUT INJURY

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Falls Without Injury data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Falls Without Injury data.

Data Reporting Requirements:
1. Location of Fall
2. Time of Fall
3. Contributing Factors (Can have multiple selections by Ctrl + select the below selections)
4. Actions Taken (User Ctrl + Right Mouse Select for multiple selections)

On the Data Entry - Quality Indicator Selection screen (III-3), select Falls Without Injury Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Falls Without Injury screen (Table III-25), select Add to advance to the Data Entry - Falls Without Injury - Add screen (Table III-26). Note that the Edit and Delete buttons are disabled on the Data Entry - Falls Without Injury screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-25

Enter data in all fields, picklists, and dropdowns.
Select **Next** to advance to the **Data Entry - Falls Without Injury - Verify** screen (Table III-27). Review information. Select **Back** to make corrections, or **Submit**.

---

**Table III-26**

---

**Table III-27**
A Control Number generates for each Falls Without Injury record (Table III-28). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.

**Table III-28**
PACE QUALITY INDICATOR: GRIEVANCES

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Grievance data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Grievances.

Data Reporting Requirements:
1. Source
2. Location
3. Grievance Type and Specific Issue
4. Resolution
5. Actions Taken

On the Data Entry - Quality Indicator Selection screen (III-3), select Grievances Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Grievances screen (Table III-29), select Add to advance to the Data Entry - Grievances - Add screen (Table III-30). Note that the Edit and Delete buttons are disabled on the Data Entry - Grievances screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-29

Enter data in all fields, picklists, and drop downs.
Select **Next** to advance to the **Data Entry - Grievances - Verify** screen (Table III-31). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Grievance** record (Table III-32). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

**Table III-32**
PACE QUALITY INDICATOR: IMMUNIZATIONS –
INFLUENZA (OCT. THRU MAR. 20XX)

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Influenza Immunization data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Influenza Immunization data.

Please Note: while the Pneumococcal 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 in October and end in March of the respective year.

Data Reporting Requirements:
Number of participants who received an influenza (i.e., flu) immunization during the reporting year; (October – March 20XX)

1. Total Number of Participants
   • Eligible to Receive Immunization
   • Actually Received Immunization(by the PO)
   • Had a Reaction to Vaccine

2. Total Participants who DID NOT Receive Immunization
   • Medically Contraindicated
   • Prior Immunization
   • Refused
   • Vaccine Unavailable
   • Missed Opportunity

Frequency:
Routine immunization data will only be collected during the flu season (e.g., October to March as defined by CMS).

Flu Immunization data will be entered on the following screen.

On the Data Entry - Quality Indicator Selection screen (III-3), select Immunizations - Influenza (Oct. - Mar. 20XX) Quality Indicator and then select Edit Quality Indicator.

Enter data on the Data Entry - Immunizations - Influenza (Oct. - Mar. 20XX) screen (Table III-33).
Select **Next** to advance to the **Data Entry - Immunizations - Influenza - Verify** screen (Table III-34). Review information. Select **Back** to make corrections, or **Submit**.

Please Note:

- The following edit is applied to the **Data Entry - Immunizations - Influenza (Jan. - Mar. 20XX)**: the Total Eligible to Receive Immunization must equal Actually Received Immunization plus the number of Participants Who Did Not Receive Immunization.
- Only one Immunizations Influenza record can be entered for each quarter. This data may be edited by selecting Immunizations Influenza on the **Data Entry - Quality Indicator Selection** screen and then the **Edit Quality Indicator** button. The previously entered information will then be displayed.
PACE QUALITY INDICATOR: IMMUNIZATIONS - PNEUMOCOCCAL

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Pneumococcal Immunization data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Pneumococcal Immunization data.

**Data Reporting Requirements:**

1. Total Number of Participants
   - Total Eligible to Receive Immunization
   - Received Immunization (By the PO)
   - Had a Reaction to Vaccine

2. Total Participants who DID NOT Receive Immunization
   - Medically Contraindicated
   - Prior Immunization
   - Refused
   - Vaccine Unavailable
   - Missed Opportunity

Pneumococcal Immunization data will be entered on the following screen.

On the **Data Entry - Quality Indicator Selection** screen (III-3), select **Immunizations - Pneumococcal** Quality Indicator and then select **Edit Quality Indicator**.

Enter data on the **Data Entry - Immunizations - Pneumococcal** screen (Table III-35).

Table III-35
Select **Next** to advance to the **Data Entry - Immunizations - Pneumococcal - Verify** screen (Table III-36). Review information. Select **Back** to make corrections, or **Submit**.

Please Note:

- The following edit is applied to the **Data Entry - Immunizations - Pneumococcal**: Total Eligible to Receive Immunization must equal Actually Received Immunization plus the number of Participants Who Did Not Receive Immunization.
- Only one Pneumococcal Immunizations record can be entered for each quarter. This data may be edited by selecting Pneumococcal Immunizations on the **Data Entry - Quality Indicator Selection** screen and then the **Edit Quality Indicator** button. The previously entered information will then be displayed.

**Table III-36**
PACE QUALITY INDICATOR: MEDICATION ADMINISTRATION ERRORS

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Medication Administration Error data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Medication Administration Error data.

Data Reporting Requirements:

1. Location of Incident
2. Type of Medication Error
3. Contributing Factors
4. Actions Taken

On the Data Entry - Quality Indicator Selection screen (III-3), select Medication Administration Errors Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Medication Administration Errors screen (Table III-37), select Add to advance to the Data Entry - Medication Administration Errors - Add screen (Table III-38). Note that the Edit and Delete buttons are disabled on the Data Entry - Medication Administration Errors screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-37

Enter data in all fields, picklists, and dropdowns.
Select **Next** to advance to the **Data Entry - Medication Administration Errors - Verify** screen (Table III-39). Review information. Select **Back** to make corrections, or **Submit**.
A Control Number generates for each Medication Administration Error record (Table III-40). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.

Table III-40
PACE QUALITY INDICATOR: ABUSE

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Abuse data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Abuse.

Data Reporting Requirements:
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant’s Current Status
4. Type of Abuse
5. Person Accused of Abuse
6. Was Compliance Maintained with Plan of Care?
7. Was Compliance Maintained with Participant’s Medications?
8. Was the Participant Receiving Mental Health or Substance Abuse Service Prior to the Incident?
9. Was Adult Protective Services Notified?

ROOT CAUSE ANALYSIS:
10. Contributing Factors*
11. Actions Taken*
12. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Abuse Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Abuse screen (Table III-41), select Add to advance to the Data Entry - Abuse - Add screen (Table III-42). Note that the Edit and Delete buttons are disabled on the Data Entry - Abuse screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.
Enter data in all fields, picklists, and dropdowns. To add a **Significant Diagnosis**, enter an ICD-10 code in the Significant Diagnosis field, then select **Add a Diagnosis**. To search for an ICD-10 code, select the **Code Lookup** link (Table III-43).
Make **Root Cause Analysis** selections (Table III-44). To upload an attachment, select “Browse” and then choose a document.

**Table III-44**

Select **Next** to advance to the **Data Entry - Abuse - Verify** screen (Table III-45). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Abuse** record (Table III-46). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.
PACE QUALITY INDICATOR: ADVERSE DRUG REACTION

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Adverse Drug Reaction data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Adverse Drug Reaction.

Data Reporting Requirements:
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant’s Current Status

ROOT CAUSE ANALYSIS:
4. Contributing Factors*
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Adverse Drug Reaction Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Adverse Drug Reaction screen (Table III-47), select Add to advance to the Data Entry - Adverse Drug Reaction - Add screen (Table III-48). Note that the Edit and Delete buttons are disabled on the Data Entry - Abuse screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-47

![Data Entry - Quality Indicator Selection Screen](Image)

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter an ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-49).
Table III-48

Table III-49
Make **Root Cause Analysis** selections (Table III-50). To upload an attachment, select “Browse” and then choose a document.

**Table III-50**

Select **Next** to advance to the **Data Entry - Adverse Drug Reaction - Verify** screen (Table III-51). Review information. Select **Back** to make corrections, or **Submit**.
A Control Number generates for each Adverse Drug Reaction record (Table III-52). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.
PACE QUALITY INDICATOR: ADVERSE OUTCOME

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Adverse Outcome data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Adverse Outcome data.

Data Reporting Requirements:
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant's Current Status

ROOT CAUSE ANALYSIS:
4. Contributing Factors*
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Adverse Outcome Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Adverse Outcome screen (Table III-53), select Add to advance to the Data Entry - Adverse Outcome - Add screen (Table III-54). Note that the Edit and Delete buttons are disabled on the Data Entry - Adverse Outcome screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-53

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter an ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-55).
Table III-54

Table III-55
Make **Root Cause Analysis** selections (Table III-56). To upload an attachment, select “Browse” and then choose a document.

**Table III-56**

Select **Next** to advance to the **Data Entry - Adverse Outcome - Verify** screen (Table III-57). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Adverse Outcome** record (Table III-58). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.
PACE QUALITY INDICATOR: BURNS 2ND DEGREE OR HIGHER

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Burns 2nd Degree or Higher data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Burns 2nd Degree or Higher data.

Data Reporting Requirements:
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant’s Current Status

ROOT CAUSE ANALYSIS:
4. Contributing Factors*
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Burns 2nd Degree or Higher Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Burns 2nd Degree or Higher screen (Table III-59), select Add to advance to the Data Entry - Burns 2nd Degree or Higher - Add screen (Table III-60). Note that the Edit and Delete buttons are disabled on the Data Entry - Burns 2nd Degree or Higher screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-59

Enter data in all fields, picklists, and dropdowns. To add a Type of Burn or Significant Diagnosis, enter an ICD-10 code in the Type of Burn or Significant Diagnosis field, and then select Add. To search for an ICD-10 code, select the Code Lookup link (Table III-61).
### Table III-60

**Data Entry**

Burns 2nd Degree or Higher - Add

**Contract Number:** 20001  
**Contract Name:** EXAMPLE CONTRACT 1  
**Site Name:** Example Site Name  
**Data Collection Period:** 2nd Quarter, 2018 (Apr. - Jun.)

**Account Manager:**
- **Age Range:** 10
- **Gender:** Male
- **Enrollment Date:**
- **Incident Date:**
- **Location of Incident:**
- **Was the Participant Hospitalized?**
- **Participant’s Current Status:**
- **Center Attendance:**

**Type of Burn:**
- Enter an ICD-10 Code. Click **Code Lookup** to search for an ICD-10 Code(s). Select a **Burn Type** when complete to assign the ICD-10 Codes. Assign all that apply.

**Assigned Burn Type**
- Add a Burn Type
- **Remove a Burn Type**
- **Remove All**

**Significant Diagnosis:**
- Enter an ICD-10 Code. Click **Code Lookup** to search for an ICD-10 Code(s). Select a **Significant Diagnosis** when complete to assign the ICD-10 Codes. Assign all that apply.

**Assigned Diagnosis**
- Add a Diagnosis
- **Remove a Diagnosis**
- **Remove All**

**Note:** All data entry fields are required.

**ICD-10 Guidelines:**
- ICD-10 is 5 characters in length
- Position 1 is a digit
- Position 2-4 are digits or numbers (not case sensitive)
- Position 5 is a letter
- Positions 6-9 are digits or numbers (not case sensitive)

### Table III-61

**ICD-10 Code Lookup**

**Note:** To search for a specific ICD-10 code and its description, enter a keyword(s) below and select “Search.” Select the code links in the search results to populate the code in the appropriate field on the Data Entry page.

**Enter a keyword(s) or an ICD-10 code(s):**

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M85.21</td>
<td>Chondromalacia, shoulder</td>
</tr>
<tr>
<td>M94.31</td>
<td>Chondromalacia, right elbow</td>
</tr>
<tr>
<td>M85.22</td>
<td>Chondromalacia, left elbow</td>
</tr>
<tr>
<td>M85.29</td>
<td>Chondromalacia, unspecified elbow</td>
</tr>
</tbody>
</table>
Make **Root Cause Analysis** selections (Table III-62). To upload an attachment, select “Browse” and then choose a document.

**Table III-62**

Select **Next** to advance to the **Data Entry - Burns 2nd Degree of Higher - Verify** screen (Table III-63). Review information. Select **Back** to make corrections, or **Submit**.
Table III-63

A Control Number generates for each Burns 2nd Degree or Higher record (Table III-64). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.

Table III-64
The HPMS Pace Quality Reporting Module provides functionality for the reporting of Elopement data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Elopement data.

**Data Reporting Requirements:**
1. Location of Incident
2. Time of Incident
3. Was the Participant Hospitalized?
4. Participant’s Current Status

**ROOT CAUSE ANALYSIS:**
5. Contributing Factors*
6. Actions Taken*
7. Ongoing Improvements*

On the **Data Entry - Quality Indicator Selection** screen (III-3), select **Elopement** Quality Indicator and then select **Edit Quality Indicator**.

On the **Data Entry - Elopement** screen (Table III-65), select **Add** to advance to the **Data Entry - Elopement - Add** screen (Table III-66). Note that the **Edit** and **Delete** buttons are disabled on the **Data Entry - Elopement** screen if there are no records available to edit or delete. To report no data for the collection period, see the **PACE Quality Indicator: No Data To Report** section of the manual.

### Table III-65
![Data Entry - Elopement Screen](image)

Enter data in all fields, picklists, and dropdowns. To add a **Significant Diagnosis**, enter ICD-10 code in the Significant Diagnosis field, then select **Add a Diagnosis**. To search for an ICD-10 code, select the **Code Lookup** link (Table III-67).
Make **Root Cause Analysis** selections (Table III-68). To upload an attachment, select “Browse” and then choose a document.

**Table III-68**

Select **Next** to advance to the **Data Entry - Elopement - Verify** screen (Table III-69). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each Elopement record (Table III-70). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.
PACE QUALITY INDICATOR: EQUIPMENT-RELATED OCCURRENCES

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Equipment-Related Occurrences data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Equipment-Related Occurrences data.

**Data Reporting Requirements:**
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant’s Current Status

**ROOT CAUSE ANALYSIS:**
4. Contributing Factors*
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Equipment-Related Occurrences Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Equipment-Related Occurrences screen (Table III-71), select Add to advance to the Data Entry - Equipment-Related Occurrences - Add screen (Table III-72). Note that the Edit and Delete buttons are disabled on the Data Entry - Equipment-Related Occurrences screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-73).
### Table III-72

**Data Entry**

**Equipment-Related Occurrences - Add**

- Contract Number: Z3201
- Contract Name: EXAMPLE CONTRACT 1
- Site Name: Example Site Name
- Data Collection Period: 2nd Quarter, 2018 (Apr. - Jun.)

#### Account Manager:
- Age Range: TD

#### Gender:
- Male
- Female

#### Enrollment Date:

#### Incident Date:

#### Location of Incident:

#### Was the Participant Hospitalized?
- Yes
- No

#### Participant's Current Status:
-

#### Does Adverse Outcome Apply?
- Yes
- No

**Significant Diagnosis:**

Enter an ICD-10 Code. Click [Code Lookup] to search for an ICD-10 Code(s). Select [Add a Diagnosis] when complete to assign the ICD-10 Code(s). Assign up to 5 codes:

**Assigned Diagnosis**

#### Back

Note: All data entry fields are required.

**ICD-10 Guidance:**

- ICD Code is 3-4 characters in length
- Position 1 is alpha
- Position 2 is numeric
- Position 3 is alpha or numeric (not case sensitive)
- Position 4 is a period
- Position 5-6 are alpha or numeric (not case sensitive)

### Table III-73

**ICD-10 Code Lookup**

- To search for a specific ICD-10 code and its description, enter a keyword(s) below and select 'Search'. Select the code from the search results to populate the code in the appropriate field on the Data Entry page.

- **Enter a keyword(s) or an ICD-10 code(s):**
  - Shoulder

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M83.71</td>
<td>Chondromalacia, shoulder</td>
</tr>
<tr>
<td>M57.71</td>
<td>Chondromalacia, right shoulder</td>
</tr>
<tr>
<td>M54.21</td>
<td>Chondromalacia, left shoulder</td>
</tr>
<tr>
<td>M87.19</td>
<td>Chondromalacia, respected shoulder</td>
</tr>
</tbody>
</table>
Make **Root Cause Analysis** selections (Table III-74). To upload an attachment, select “Browse” and then choose a document.

**Table III-74**

Select **Next** to advance to the **Data Entry - Abuse - Verify** screen (Table III-75). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Equipment-Related Occurrences** record (Table III-76). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.
PACE QUALITY INDICATOR: FALLS WITH INJURY

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Falls With Injury data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Falls With Injury data.

Data Reporting Requirements:
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant’s Current Status

ROOT CAUSE ANALYSIS:
4. Contributing Factors *
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Falls With Injury Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Falls With Injury screen (Table III-77), select Add to advance to the Data Entry - Falls With Injury - Add screen (Table III-78). Note that the Edit and Delete buttons are disabled on the Data Entry - Falls With Injury screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-77

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-79).
### Table III-78

#### Image of the Data Entry Screen

The image shows a Data Entry screen with fields for entering information such as Account Manager, Age Range, Gender, Contract Number, Contract Name, Enrollment Date, Incident Date, Location of Incident, Time of Incident, Was the Participant Hospitalized, Participant's Current Status, Center Attendance, Does Adverse Outcome Apply, Significant Diagnosis, and Assigned Diagnosis.

### Table III-79

#### ICD-10 Code Lookup

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M94.21</td>
<td>Chondromas, elbow</td>
</tr>
<tr>
<td>M94.211</td>
<td>Chondromas, right elbow</td>
</tr>
<tr>
<td>M94.212</td>
<td>Chondromas, left elbow</td>
</tr>
<tr>
<td>M94.218</td>
<td>Chondromas, unspecified elbow</td>
</tr>
</tbody>
</table>
Make **Root Cause Analysis** selections (Table III-80). To upload an attachment, select “Browse” and then choose a document.

Select **Next** to advance to the **Data Entry - Abuse - Verify** screen (Table III-81). Review information. Select **Back** to make corrections, or **Submit**.
A Control Number generates for each Falls With Injury record (Table III-82). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.
PACE QUALITY INDICATOR: FIRES/OTHER DISASTERS

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Fires/Other Disasters data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Fires/Other Disasters data.

**Data Reporting Requirements:**
1. Type of Disaster
2. Location of Incident
3. Was the Participant Hospitalized?
4. Participant’s Current Status

**ROOT CAUSE ANALYSIS:**
5. Contributing Factors*
6. Actions Taken*
7. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Fires/Other Disasters Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Fires/Other Disasters screen (Table III-83), select Add to advance to the Data Entry - Fires/Other Disasters - Add screen (Table III-84). Note that the Edit and Delete buttons are disabled on the Data Entry - Fires/Other Disasters screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

**Table III-83**

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-85).
Make **Root Cause Analysis** selections (Table III-86). To upload an attachment, select “Browse” and then choose a document.

**Table III-86**

Select **Next** to advance to the **Data Entry - Fires/Other Disasters - Verify** screen (Table III-87). Review information. Select **Back** to make corrections, or **Submit**.
Table III-87

A Control Number generates for each Fires/Other Disasters record (Table III-88). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.

Table III-88
PACE QUALITY INDICATOR: FOODBORNE OUTBREAK

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Foodborne Outbreak data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Foodborne Outbreak data.

Data Reporting Requirements:
1. Were the Participants Hospitalized?
2. Location of Incident
3. Participants’ Current Status*
4. Incident Reported To

ROOT CAUSE ANALYSIS:
5. Contributing Factors*
6. Type of Pathogen
7. Actions Taken*
8. Ongoing Improvements

On the Data Entry - Quality Indicator Selection screen (III-3), select Foodborne Outbreak Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Foodborne Outbreak screen (Table III-89), select Add to advance to the Data Entry - Foodborne Outbreak - Add screen (Table III-90). Note that the Edit and Delete buttons are disabled on the Data Entry - Foodborne Outbreak screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-89

Enter data in all fields, picklists, and dropdowns.
Make **Root Cause Analysis** selections (Table III-91). To upload an attachment, select “Browse” and then choose a document.
Select **Next** to advance to the **Data Entry - Foodborne Outbreak - Verify** screen (Table III-92). Review information. Select **Back** to make corrections, or **Submit**.

**Table III-92**

A **Control Number** generates for each **Foodborne Outbreak** record (Table III-93). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

**Table III-93**
PACE QUALITY INDICATOR: INFECTIOUS DISEASE OUTBREAK

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Infectious Disease Outbreak data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Infectious Disease Outbreak data.

Data Reporting Requirements:
1. Were the Participants Hospitalized?
2. Location of Incident*
3. Participants’ Current Status*
4. Incident Reported To

ROOT CAUSE ANALYSIS:
5. Contributing Factors*
6. Type of Pathogen
7. Actions Taken*
8. Ongoing Improvements

On the Data Entry - Quality Indicator Selection screen (III-3), select Infectious Disease Outbreak Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Infectious Disease Outbreak screen (Table III-94), select Add to advance to the Data Entry - Infectious Disease Outbreak - Add screen (Table III-95). Note that the Edit and Delete buttons are disabled on the Data Entry - Infectious Disease Outbreak screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Enter data in all fields, picklists, and dropdowns.
Make **Root Cause Analysis** selections (Table III-96). To upload an attachment, select “Browse” and then choose a document.
Select **Next** to advance to the **Data Entry - Infectious Disease Outbreak - Verify** screen (Table III-97). Review information. Select **Back** to make corrections, or **Submit**.

### Table III-97

![Table III-97](image)

A **Control Number** generates for each **Infectious Disease Outbreak** record (Table III-98). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

### Table III-98

![Table III-98](image)
PACE QUALITY INDICATOR: MEDIA-RELATED EVENT

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Media-Related Event data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Media-Related Event data.

Data Reporting Requirements:
1. Were the Participants Hospitalized?
2. Participants' Current Status*
3. Media Reporting the Event*

ROOT CAUSE ANALYSIS:
4. Contributing Factors*
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Media-Related Event Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Media-Related Event screen (Table III-99), select Add to advance to the Data Entry - Media-Related Event - Add screen (Table III-100). Note that the Edit and Delete buttons are disabled on the Data Entry - Media-Related Event screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-99

![Image of Data Entry - Media-Related Event screen]

Enter data in all fields, picklists, and dropdowns.
Make **Root Cause Analysis** selections (Table III-101). To upload an attachment, select “Browse” and then choose a document.
Select **Next** to advance to the **Data Entry - Media-Related Event - Verify** screen (Table III-102). Review information. Select **Back** to make corrections, or **Submit**.

### Table III-102

A **Control Number** generates for each **Media-Related Event** record (Table III-103). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

### Table III-103
PACE QUALITY INDICATOR: MEDICATION-RELATED OCCURRENCES

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Medication-Related Occurrences data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Medication-Related Occurrences data.

Data Reporting Requirements:
1. Location of Incident
2. Type of Medication Error
3. Was the Participant Hospitalized?
4. Participant’s Current Status

ROOT CAUSE ANALYSIS:
5. Contributing Factors*
6. Actions Taken*
7. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Medication-Related Occurrences Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Medication-Related Occurrences screen (Table III-104), select Add to advance to the Data Entry - Medication-Related Occurrences - Add screen (Table III-105). Note that the Edit and Delete buttons are disabled on the Data Entry - Medication-Related Occurrences screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-104

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-106).
### Table III-105

![Image of Data Entry Screen]

#### Data Entry

**Medication-Related Occurrences - Add**

- **Contract Number:** Z0031
- **Contract Name:** EXAMPLE CONTRACT 1
- **Site Name:** Example Site Name
- **Data Collection Period:** 2nd Quarter, 2018 (Apr. - Jun.)

#### Account Manager:
- **Age Range:**
- **Gender:** Male, Female

#### Significant Diagnosis:

<table>
<thead>
<tr>
<th>ICD-10 Code Lookup</th>
</tr>
</thead>
</table>

#### Note:
All data entry fields are required.

#### ICD-10 Guidance:

<table>
<thead>
<tr>
<th>Position</th>
<th>Character(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Alpha</td>
</tr>
<tr>
<td>2</td>
<td>Numeric</td>
</tr>
<tr>
<td>3</td>
<td>Alpha or numeric (not case sensitive)</td>
</tr>
</tbody>
</table>

### Table III-106

![Image of ICD-10 Code Lookup]

#### ICD-10 Code Lookup

**Note:** To search for a specific ICD-10 code and its description, enter a keyword(s) box and select **Search**. Select the code link in the search results to populate the code in the appropriate field on the Data Entry page.

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>MH2.21</td>
<td>Chondromalacia, shoulder</td>
</tr>
<tr>
<td>MH2.21</td>
<td>Chondromalacia, right shoulder</td>
</tr>
<tr>
<td>MH2.21</td>
<td>Chondromalacia, left shoulder</td>
</tr>
<tr>
<td>MH2.21</td>
<td>Chondromalacia, unspecified shoulder</td>
</tr>
</tbody>
</table>
Make **Root Cause Analysis** selections (Table III-107). To upload an attachment, select “Browse” and choose a document.

### Table III-107

Select **Next** to advance to the **Data Entry - Medication-Related Occurrences - Verify** screen (Table III-108). Review information. Select **Back** to make corrections, or **Submit**.
A Control Number generates for each Medication-Related Occurrences record (Table III-109). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.
PACE QUALITY INDICATOR: MOTOR VEHICLE ACCIDENTS

The HPM S Pace Quality Reporting Module provides functionality for the reporting of Motor Vehicle Accidents data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Motor Vehicle Accidents data.

Data Reporting Requirements:
1. Were the Participants Hospitalized?
2. Participant’s Current Status*
3. Other Vehicles/Parties Involved*
4. Were any non-PACE participants injured?
5. Was the PACE driver issued a citation?

ROOT CAUSE ANALYSIS:
6. Contributing Factors*
7. Actions Taken*
8. Ongoing Improvements*

On the **Data Entry - Quality Indicator Selection** screen (III-3), select **Motor Vehicle Accidents** Quality Indicator and then select **Edit Quality Indicator**.

On the **Data Entry - Motor Vehicle Accidents** screen (Table III-110), select **Add** to advance to the **Data Entry - Motor Vehicle Accidents - Add** screen (Table III-111). Note that the **Edit** and **Delete** buttons are disabled on the **Data Entry - Motor Vehicle Accidents** screen if there are no records available to edit or delete. To report no data for the collection period, see the **PACE Quality Indicator: No Data To Report** section of the manual.

**Table III-110**

Enter data in all fields, picklists, and dropdowns.
Make **Root Cause Analysis** selections (Table III-112). To upload an attachment, select “Browse” and then choose a document.
Select **Next** to advance to the **Data Entry - Motor Vehicle Accidents - Verify** screen (Table III-113). Review information. Select **Back** to make corrections, or **Submit**.

### Table III-113

![Table III-113](image)

A **Control Number** generates for each **Motor Vehicle Accidents** record (Table III-114). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.

### Table III-114

![Table III-114](image)
PACE QUALITY INDICATOR: PRESSURE INJURY

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Pressure Injury data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Pressure Injury data.

Data Reporting Requirements:
1. Location of Incident
2. Pressure Injury
3. Location of Pressure Injury
4. Was the Participant Hospitalized?
5. Participant’s Current Status

ROOT CAUSE ANALYSIS:
6. Contributing Factors*
7. Actions Taken*
8. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Pressure Injury Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Pressure Injury screen (Table III-115), select Add to advance to the Data Entry - Pressure Injury - Add screen (Table III-116). Note that the Edit and Delete buttons are disabled on the Data Entry - Pressure Injury screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-115

Enter data in all fields, picklists, and dropdowns. To add a Significant Diagnosis, enter ICD-10 code in the Significant Diagnosis field, then select Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-117).
Make **Root Cause Analysis** selections (Table III-118). To upload an attachment, select “Browse” and then choose a document.

![Diagram of Root Cause Analysis](image)

**Table III-118**

Select **Next** to advance to the **Data Entry - Pressure Injury - Verify** screen (Table III-119). Review information. Select **Back** to make corrections, or **Submit**.
A Control Number generates for each Pressure Injury record (Table III-120). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.
PACE QUALITY INDICATOR: RESTRAINT USE

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Restraint Use data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Restraint Use data.

Data Reporting Requirements:
1. Location of Incident
2. Reason for Restraint Use*
3. Type of Restraint
4. Was the Participant Hospitalized?
5. Participant’s Current Status

ROOT CAUSE ANALYSIS:
6. Contributing Factors*
7. Actions Taken*
8. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Restraint Use Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Restraint Use screen (Table III-121), select Add to advance to the Data Entry - Restraint Use - Add screen (Table III-122). Note that the Edit and Delete buttons are disabled on the Data Entry - Restraint Use screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-121

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-123).
Table III-122

Data Entry

Restraint Use - Add

Contract Number: Z0601
Contract Name: EXAMPLE CONTRACT 1
Site Name: Example Site Name
Data Collection Period: 2nd Quarter, 2010 (Apr - Jun)

Account Manager:
Age Range: ________
Gender: Male  Female
Enrollment Date: ________
Incident Date: ________
Location of Incident: ________

Reason for Restraint Use:
- Actual Harm to Others
- Actual Harm to Self
- Increased Agitation
- New Medical Diagnosis
- New Psychiatric Diagnosis
- Prosthetic Medical Diagnosis
- Prosthetic Psychiatric Diagnosis
- Threat of Harm to Others

Type of Restraint:
Was the Participant Hospitalized? ________
Participant’s Current Status: ________
Center Attendance: ________

Does Adverse Outcome Apply? Yes  No

Significant Diagnosis:
- ICD-10 Coding Guide
Position 1 = a, b, c, d, e
Position 2 = a number
Position 3 = a symbol or numeric (no case sensitive)
Position 4 = a period
Position 5 = alpha or numeric (no case sensitive)

Assigned Diagnosis

Note: All data entry fields are required.

Table III-123

ICD-10 Code Lookup

Note: To search for a specific ICD-10 code and its description, enter a keyword(s) below and select Search. Select the code link in the search results to populate the code in the appropriate field in the Data Entry page.

Enter a keyword(s) or an ICD-10 code: ________ Search

<table>
<thead>
<tr>
<th>ICD-10 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>M94.21</td>
<td>Clavicular, shoulder</td>
</tr>
<tr>
<td>M94.22</td>
<td>Clavicular, right shoulder</td>
</tr>
<tr>
<td>M94.23</td>
<td>Clavicular, left shoulder</td>
</tr>
<tr>
<td>M94.27</td>
<td>Clavicular, unspecified shoulder</td>
</tr>
</tbody>
</table>
Make **Root Cause Analysis** selections (Table III-124). To upload an attachment, select “Browse” and then choose a document.

**Table III-124**

Select **Next** to advance to the **Data Entry - Restraint Use - Verify** screen (Table III-125). Review information. Select **Back** to make corrections, or **Submit**
A Control Number generates for each Restraint Use record (Table III-126). To edit a record, select the radio button next to the appropriate control number, and select Edit. To delete a record, select the radio button next to the appropriate control number, and select Delete. Select Back to return to the Data Entry - Quality Indicator Selection screen.
PACE QUALITY INDICATOR: SUICIDE ATTEMPT/SUICIDE

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Suicide Attempt/Suicide data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Suicide Attempt/Suicide data.

Data Reporting Requirements:
1. Location of Incident
2. Type of Incident
3. Immediate Action Taken*
4. Was the Participant Hospitalized?
5. Participant’s Current Status

ROOT CAUSE ANALYSIS:
6. Contributing Factors*
7. Actions Taken*
8. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Suicide Attempt/Suicide Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Suicide Attempt/Suicide screen (Table III-127), select Add to advance to the Data Entry - Suicide Attempt/Suicide - Add screen (Table III-128). Note that the Edit and Delete buttons are disabled on the Data Entry - Suicide Attempt/Suicide screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-127

Enter data in all fields, picklists, and dropdowns. To add a Significant Diagnosis, enter ICD-10 code in the Significant Diagnosis field, then select Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-129).
Make **Root Cause Analysis** selections (Table III-130). To upload an attachment, select “Browse” and then choose a document.

**Table III-130**

Select **Next** to advance to the **Data Entry - Suicide Attempt/Suicide - Verify** screen (Table III-131). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Suicide Attempt/Suicide** record (Table III-132). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.
PACE QUALITY INDICATOR: UNEXPECTED DEATHS

The HPMS Pace Quality Reporting Module provides functionality for the reporting of Unexpected Deaths data. Please refer to PACE Quality Monitoring and Reporting Guidance for operational guidance on reporting Unexpected Deaths data.

Data Reporting Requirements:
1. Location of Incident
2. Was the Participant Hospitalized?
3. Participant’s Current Status

ROOT CAUSE ANALYSIS:
4. Contributing Factors*
5. Actions Taken*
6. Ongoing Improvements*

On the Data Entry - Quality Indicator Selection screen (III-3), select Unexpected Deaths Quality Indicator and then select Edit Quality Indicator.

On the Data Entry - Unexpected Deaths screen (Table III-133), select Add to advance to the Data Entry - Unexpected Deaths - Add screen (Table III-134). Note that the Edit and Delete buttons are disabled on the Data Entry - Unexpected Deaths screen if there are no records available to edit or delete. To report no data for the collection period, see the PACE Quality Indicator: No Data To Report section of the manual.

Table III-133

Enter data in all fields, picklists, and dropdowns. To add an Adverse Outcome or Significant Diagnosis, enter ICD-10 code in the Adverse Outcome or Significant Diagnosis field, then select Add an Outcome or Add a Diagnosis. To search for an ICD-10 code, select the Code Lookup link (Table III-135).
Make **Root Cause Analysis** selections (Table III-136). To upload an attachment, select “Browse” and then choose a document.

**Table III-136**

![Table III-136 Image]

Select **Next** to advance to the **Data Entry - Unexpected Deaths - Verify** page (Table III-137). Review information. Select **Back** to make corrections, or **Submit**.
A **Control Number** generates for each **Unexpected Deaths** record (Table III-138). To edit a record, select the radio button next to the appropriate control number, and select **Edit**. To delete a record, select the radio button next to the appropriate control number, and select **Delete**. Select **Back** to return to the **Data Entry - Quality Indicator Selection** screen.
IV. Upload Data

The HPMS PACE Quality Monitoring module provides PACE Org. users with the ability to upload certain NON-RCA indicator data in BULK, via the Upload Data functionality.

For detailed instructions on preparing your files for upload, please refer to the “Upload Instructions” and “Upload Templates and Record Layouts” documentation available under the Documentation section within the HPMS PACE Quality Monitoring module.

To process the uploads once your file(s) are prepared, on the PACE Start Page (Table II-2), select on the Upload Data link on the Right-hand menu to advance to the Upload Data – Selection Criteria screen (Table IV-1).

Selection Criteria

The Upload Data – Selection Criteria screen (Table IV-1) 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 upload data; the screen will auto-populate with the site names tied to that H number. Select the site name for which the data is to be uploaded; the collection period will auto-populate. Select the data collection quarter.

Generally, only the current data collection quarter will be displayed for selection. However, previous periods may be displayed under some circumstances.

Table IV-1

![Table IV-1 Image](image-url)
UPLOAD DATA

From the Upload Data screen (Table IV-2) follow the on-screen instruction for uploading data. Consult the “Upload Instructions” link under Documentation on the PACE Start Page screen for more detailed instructions.

Table IV-2

![Upload Data Screen](image)

FILE UPLOADED SUCCESSFULLY

When an upload is successful the user will receive a screen similar to Table IV-3. The relevant items on this screen are the Contract Number and the Valid Rows. The number of Valid Rows should match the number of rows, absent the header row, in the text file which was uploaded.

Table IV-3

![Upload Statistics Screen](image)
UPLOAD FILE VALIDATION ERROR

A screen similar to Table IV-4 will display when an upload fails. It indicates the line number(s) and field(s) where the error occurred, the text of the field with the invalid data, and an error message. **Note that a file with a single error will be rejected in its entirety.**

Table IV-4

![Screen capture of HPMS interface showing an upload file validation error message with line numbers and field texts.](image-url)
V. REQUEST EXTENSION

The HPMS PACE Quality Reporting Module allows for the reporting of data for a quarter 45 days after the close of the quarter. In certain cases, it may be required to request an extension to allow further time to report.

On the PACE Quality Monitoring Start Page (Table II-2), select the Request Extension link on the right-hand menu to advance to the Request Extension - Selection Criteria screen (Table V-1).

SELECTION CRITERIA

The Request Extension - Selection Criteria screen (Table V-1) 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 request an extension. Once the H number has been selected, the Select a Site field auto-populates with the site names associated with the H number. The user will then select the site name for which they wish to request an extension and select Next.

Table V-1

REQUEST EXTENSION

At the Request Extension screen (Table V-2) select the checkbox next to each Collection Period that is to be included in this extension request. Extension Request date is the date to which you wish to extend the reporting period. The extension date must be a future date from the End Data Collection date. Enter the reasons for the extension in the Reason for Extension Request text box; select Next. The user will advance to the Request Extension - Extension Request - Confirmation screen (Table V-3).

Select Back to return to the Request Extension screen.
On the Request Extension - Extension Request - Confirmation screen (Table V-3) review the information. Select Back to make a correction, or select Submit.

Subsequent to the submission, the user will receive an HPMS email informing them that the extension request has been received by CMS.

**CMS APPROVAL**

Once the user has submitted the extension request, CMS will review the submission and determine if it is approved. Each user will be notified of its approval status by CMS via an HPMS email. If CMS approves the request for extension, the users will have until the CMS approved date to submit all data.
VI. PACE Reports

The **PACE Reports** allow users to access and view the Comparative Data Report - Quality Indicator Section 1, Comparative Data Report - Quality Indicator Section 2, Root Cause Analysis Report, Site Data Report, and Status Report. The reports provide easy and quick reference for data comparison across PACE Organizations, the review of site data, and the data entry status of each quality indicator for each PACE site.

On the **PACE Quality Monitoring Start Page** (Table II-2), select the **PACE Reports** link on the right-hand menu to advance to the **HPMS PACE Reports - Select a Report** screen (Table VI-1). This screen displays a list of the reports available to PACE Organizations. To view a PACE report, select the report name and then select **Next**.

**Please Note:** The reports contain, except for the comparative reports, only data submitted by the user’s PACE Organization. No data, other than contact information, is viewable by other PACE Organizations.

![Table VI-1](image)
PACE COMPARATIVE DATA REPORT – QUALITY INDICATOR SECTION 1

The Comparative Data Report - Quality Indicator Section 1 displays comparative data of like organizations without revealing identifiable information.

Select the Reporting Period(s), Region(s), and Reporting Section for which you wish to run the report, and select Next (Table VI-2). To choose a different PACE report, select Back.

Table VI-2

Select Generate Report to view the report, or select Back to choose a different Reporting Period, Region, or Report Section (Table VI-3).

Table VI-3
The PACE Comparative Data Report – Quality Indicator Section 1 will display (Table VI-4). Select Download to Excel to export the report contents to Excel, or select Back to return to the previous screen.

**Table VI-4**

![Table VI-4 Image]

**PACE COMPARATIVE DATA REPORT – QUALITY INDICATOR SECTION 2**

The Comparative Data Report - Quality Indicator Section 2 displays comparative data of like organizations without revealing identifiable information.

Select the Reporting Period(s) and Region(s) for which you wish to run the report, and select Next (Table VI-5). To choose a different PACE report, select Back.

**Table VI-5**

![Table VI-5 Image]
Select **Generate Report** to view the report, or select **Back** to choose a different Reporting Period or Region (Table VI-6).

### Table VI-6

The **PACE Comparative Data Report - Quality Indicator Section 2** will display (Table VI-7). Select **Download to Excel** to export the report contents to Excel, or select **Back** to return to the previous screen.

### Table VI-7
PACE SITE DATA REPORT

The PACE Site Data Report displays the monitoring data for the twenty-six PACE quality indicators by Site.

Select the Reporting Period(s), and select **Next** (Table VI-8). To choose a different PACE report, select **Back**.

**Table VI-8**

Select the Contract Number and Site for which you wish to run the report, and select **Next** (Table VI-9). To choose a different Reporting Period, select **Back**.

**Table VI-9**
Select **Generate Report** to view the report, or select **Back** to choose a different Contract Number or Site (Table VI-10).

**Table VI-10**

The **PACE Site Data Report** will display (Table VI-11). Select **Download to Excel** to export the report contents to Excel, or select **Back** to return to the previous screen.

**Table VI-11**
**PACE STATUS REPORT**

The PACE Status Report displays the PACE site quality indicators for which data has not been submitted.

Select the Reporting Period(s) for which you wish to run the report, and select **Next** (Table VI-12). To choose a different PACE report, select **Back**.

![Table VI-12](image)

Select the Contract Number and Site for which you wish to run the report, and select **Next** (Table VI-13). To choose a different Reporting Period, select **Back**.

![Table VI-13](image)
The **PACE Status Report** will display (Table VI-14). Select **Download to Excel** to export the report contents to Excel, or select **Back** to return to the previous screen.

**Table VI-14**

![PACE Status Report](image)
## Appendix I: HPMS Contact Information

<table>
<thead>
<tr>
<th>Subject Matter</th>
<th>Name</th>
<th>Phone</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>HPMS Technical Help</td>
<td>HPMS Help Desk</td>
<td>800-220-2028</td>
<td><a href="mailto:hpms@cms.hhs.gov">hpms@cms.hhs.gov</a></td>
</tr>
<tr>
<td>HPMS Password Reset Requests</td>
<td>CMS IT Help Desk</td>
<td>410-786-2580</td>
<td>N/A</td>
</tr>
<tr>
<td>HPMS User Access Questions</td>
<td>HPMS User Access Mailbox</td>
<td>N/A</td>
<td><a href="mailto:hpms_access@cms.hhs.gov">hpms_access@cms.hhs.gov</a></td>
</tr>
<tr>
<td>HPMS PACE Monitoring Related Questions</td>
<td>CMS DMAO Mailbox</td>
<td>N/A</td>
<td>DMAO.lmi.org</td>
</tr>
<tr>
<td>General HPMS PACE Monitoring Module Inquiries</td>
<td>Timothy Hoogerwerf</td>
<td>410-786-9962</td>
<td><a href="mailto:Timothy.hoogerwerf@cms.hhs.gov">Timothy.hoogerwerf@cms.hhs.gov</a></td>
</tr>
</tbody>
</table>