

Flex Program Guide: Using MBQIP Excel Files

May 2017

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U1RRH29052, Rural Quality Improvement Technical Assistance Cooperative Agreement, \$500,000 (0% financed with nongovernmental sources). This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS, or the U.S. Government.

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About this guide

The Federal Office of Rural Health Policy (FORHP) provides state Medicare Rural Hospital Flexibility (Flex) grant program coordinators with quarterly Microsoft Excel files containing Medicare Beneficiary Quality Improvement Project (MBQIP) data, which include hospital level denominators and hospital level numerators or medians, depending on the measure type. These quarterly Excel data files can be analyzed in a variety of ways to help state Flex Programs prioritize measures, or identify groupings of hospitals for potential improvement activities.

This guide includes overviews of the various Excel data files, as well as basic instructions for how to manipulate the Excel data files to:

- Calculate hospital rates, state averages and benchmarks (such as the top 10 percent)
- Sort and/or group hospitals by rates or medians on individual measures



Tips and tricks for manipulating data in Excel are noted throughout the guide with this symbol.

For more information about prioritizing quality improvement efforts and interpreting MBQIP Hospital and State Data Reports, see the <u>MBQIP Quality Guide</u>.

Note: The images provided in this guide were created using Microsoft Excel 2013; however, the concepts and basic steps should be the same regardless of the version of Excel being used.

Understanding the data

Overview

FORHP distributes data and reports to Flex staff as they become available. This means that you will receive data files on a rolling basis (for example, Q2 2016 Patient Safety & Outpatient data and reports were distributed in December 2016, while Q2 2016 HCAHPS data and reports were distributed in February 2017).

For Patient Safety & Outpatient and HCAHPS, you can expect to see the following files in each quarterly release:

- A file of non-submissions (Excel)
 - Name: XX_XQYY_NonSubmissions (where XX is your state abbreviation, X is the quarter (1, 2, 3, or 4) and YY is the short year (e.g. 16 for 2016, 17 for 2017)
- Reports for each hospital in your state (PDF)
 - Name: XX_123456_OP (where 123456 is the actual Provider Number/CCN (CMS Certification Number) for each hospital)
- Report for your state (PDF)
 - Name: XX_OP
 - A file of the actual hospital-level data for your state (Excel)
 - Name: XX_MBQIP_Outpatient_Data_XQYY or XX_MBQIP_HCAHPS_Data_XQYY

Note that two Patient Safety & Outpatient measures are only updated once per year. OP-22 data can be found in Q4 data releases (within a separate Excel file), and OP-27 can be found in Q1 data releases (as an additional column within the XX_MBQIP_Outpatient_Data_1QYY Excel file).

For EDTC data and reports, you will receive only PDF reports. This is because you should already possess the Excel file of hospital-level data (this is the Excel data submission template you submit to FORHP each quarter).

Patient Safety & Outpatient Excel data files

Understanding the data files

Patient Safety & Outpatient data files should look similar from quarter to quarter. A screenshot showing part of a sample data file is below:

	Α	В	C	D	E	F	G
					IMM2 Total		
1	State	Provider ID	IMM2 NUM	IMM2 DENOM	Рор	OP1 Median	OP1 Count
2	XX	XX1200	0	0		42	1
3	XX	XX1201	0	0	58		0
4	XX	XX1202	0	0			
5	XX	XX1203	0	0	35		0
6	XX	XX1204	0	0	19	37	2
7	XX	XX1205	0	0			0
8	XX	XX1206					
9	XX	XX1207	0	0	44		
10	XX	XX1208	0	0	38		0
11	XX	XX1209			41		
12	XX	XX1210	0	0			0
13	XX	XX1211	0	0			0
14	XX	XX1212	0	0		38	1
		10/10/0	~	^			•

The first and second columns contain your state's abbreviation and ID numbers for each CAH. The first row (in blue) contains variable names – be sure to scroll all the way to the right in your data files to see all of the variables. Each row after the first contains data for one CAH.

For each measure, there are two columns to pay attention to, plus a third column that you should be aware of:

- The first column will have the measure name and then either **NUM** (if the measure is a percentage measure) or **Median** (if the measure is a median measure)
- The second column will have the same measure name and then either **DENOM** (for percentage measures) or **Count** (for median measures)
- The third column will have the measure set name for the measure of interest, then **Total Pop**.
 - Note that this Total Pop column will always be the last column before the columns for a new measure set begin. In the screenshot above, IMM2 NUM and IMM2 DENOM in columns C and D are the only two columns in the IMM population, so IMM2 Total Pop is in column E. Column F (OP1 Median) is the first column within the AMI/Chest Pain measure set.
 - The measures OP-4 and OP-5 are part of two measure sets: AMI and Chest Pain. Therefore, there are two separate populations associated with these measures. In the data file, the relevant population columns are named AMI Total Pop and Chest Pain Total Pop. There is also a third column specific to OP-4 and OP-5 named AMI + Chest Pain Total Pop that provides the total population specific to OP-4 and OP-5.¹

¹ Note: **Chest Pain Total Pop** and **AMI + Chest Pain Total Pop** are included in the data files beginning with Q4 2016 data.

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Non-Submission list

Each quarter, you should also receive a Non-Submission list, such as the sample list below:

	Α	B	C	D	E	F	G	Н	I. I.	J	K
1					MBQIP P	atient Safety ar 2Q16 Non-S	nd Outpatient M ubmissions	easures			
-											
2	State	CCN	ІММ	OP_1	OP_2	OP_3b	OP_4	OP_5	OP_18b	OP_20	OP_21
3	XX	XX1200									
4	XX	XX1201							N	N	N
5	XX	XX1202		N	N	N	N	N			
6	XX	XX1203									
7	XX	XX1204									
8	XX	XX1205									
9	XX	XX1206	N	N	N	N	N	N	N	N	N
10	XX	XX1207		N	N	N					
11	XX	XX1208									
12	XX	XX1209	N	N	N	N					
13	XX	XX1210									
14	XX	XX1211									
15	XX	XX1212									
16	XX	XX1213									
_											

Similar to the data file, the first and second columns contain your state's abbreviation and ID numbers for each CAH. The second row (in blue) contains the variable names. After the first two columns, each column corresponds to a measure. Each row after the second contains information for one CAH.

This data file provides information about CAHs' MBQIP data submission status for each measure. For any measure, if a CAH did not submit data, the letter "N" is shown. If a blank is shown, then the CAH submitted data.

To illustrate, here is what would be displayed in the Non-Submission list and common scenarios that could lead to that result (see <u>Appendix 1</u> for a more detailed list scenarios):

- If Blank in the Non-Submission list (meaning that the CAH is considered to be submitting):
 - CAH submitted cases to the warehouse
 - CAH did not submit cases to the warehouse, but submitted a zero in population & sampling
- If an "N" in the Non-Submission list (meaning that the CAH is not considered to be submitting for measure):
 - CAH did not submit cases to the warehouse, and did not submit anything in population & sampling
 - CAH submitted a number greater than zero in population & sampling, but did not submit any cases to the warehouse.

Note that the Non-Submission status directly corresponds to what is displayed on Patient Safety & Outpatient Measure reports. If a CAH has a rate or median, a "0", or a "D/E" for a measure in its report, this is considered a submission. If a CAH has an "N/A" for a measure in the report, this is considered a non-submission. Explore Interpreting MBQIP Hospital Data Reports for Quality Improvement for more details about reports.

Calculating rates

The MBQIP Excel files include the numerator and denominator for each of the MBQIP rate measures by hospital. A first step towards making use of the Excel file data is to calculate the hospital rates for each measure.

A rate measures the number of times the quality measure was met (numerator) out of the total number of opportunities to meet the measure (denominator).

Note: You will not want to create hospital rates for measures that are medians (e.g., OP-1, OP-3b, OP-5, etc.). For more information on how to begin using data for median measures see <u>Calculating</u> <u>Weighted State Averages for Median Measures</u>.

To begin, determine the measure for which you wish to create a rate. Select the column to the right of the denominator for that measure by clicking on the letter that represents that column. Right click on that column and select *Insert*. A new column will appear to the left of the column you had selected.

P1	- : X V fx OP5 Median							Arial, He	e - 10 - A	Ă\$ ₹ % °
·		J. J.	1		1	1		BI	🗏 - 💁 -	• 00. 0 ▼
	А	В	L	M	N	0		P		Q
	State	Drovidor ID	OP2b Modion	OB2b Count				K Cu	<u>t</u>	25 Cours
1	State	Provider ID		OP3D Count		OP4 DENOM			ry ste Ontions:	-5 Coun
2	XX	XX1200	51	4	5	5	2			
3	XX	XX1201			3	3	20]	
4	XX	XX1202						-	te Special	
5	XX	XX1203			2	6	9	Ins	ert	
6	XX	XX1204			5	7	6	Cle	ar Co <u>n</u> tents	
7	XX	XX1205	145	2	8	10	18	:: For	rmat Cells	
8	XX	XX1206						<u>C</u> o	lumn Width	
9	XX	XX1207			9	9	6	<u>H</u> ic	le	
10	XX	XX1208	30	3	6	7	32	<u>U</u> n	hide	
11	XX	XX1209			3	6	4		4	
12	XX	XX1210			4	6	15		5	
13	XX	XX1211			5	7	18		6	
14	XX	XX1212	80	1	8	8	3		4	
15	XX	XX1213			9	9	8		8	
16	XX	XX1214			2	2	6		2	
17	XX	XX1215								

Enter a name for the column. For this example the name is OP4_RATE. In the cell below the new header name, enter a formula for calculating the rate. For this example the formula is =N2/O2, where N2 represents the cell containing the numerator and O2 represents the cell containing the denominator.

02	*	f_x \checkmark f_x	=N2/O2					
	А	В	L	М	Ν	0	Р	Q
1	State	Provider ID	OP3b Median	OP3b Count	OP4 NUM	OP4 DENOM	OP4_RATE	OP5 Median
2	XX	XX1200	51	4	5	5	=N2/O2	2
3	XX	XX1201			3	3		20
4	XX	XX1202						
5	XX	XX1203			2	6		9
6	XX	XX1204			5	7		6
7	XX	XX1205	145	2	8	10		18
8	XX	XX1206						
9	XX	XX1207			9	9		6
10	XX	XX1208	30	3	6	7		32
11	XX	XX1209			3	6		4
12	XX	XX1210			4	6		15
13	XX	XX1211			5	7		18
14	XX	XX1212	80	1	8	8		3
15	XX	XX1213			9	9		8
16	XX	XX1214			2	2		6
17	XX	XX1215						
4.0								

Click on the cell with the formula. Click on the plus sign (+) that appears when you hover over the bottom right corner of the cell and drag it down to copy the formula to the cells below.

P2	-	$\therefore \checkmark \checkmark f_x$	=N2/O2						
	А	В	L	М	N	0	Р	Q	
1	State	Provider ID	OP3b Median	OP3b Count	OP4 NUM	OP4 DENOM	OP4_RATE	OP5 Median	(
2	XX	XX1200	51	4	5	5	1	2	5
3	XX	XX1201			3	3	1	20	2
4	XX	XX1202					#VALUE!		
5	XX	XX1203			2	6	0.333333333	9	5
6	XX	XX1204			5	7	0.714285714	6	7
7	XX	XX1205	145	2	8	10	0.8	18	8
8	XX	XX1206					#VALUE!		
9	XX	XX1207			9	9	1	6	7
10	XX	XX1208	30	3	6	7	0.857142857	32	7
11	XX	XX1209			3	6	0.5	4	4
12	XX	XX1210			4	6	0.666666667	15	5
13	XX	XX1211			5	7	0.714285714	18	6
14	XX	XX1212	80	1	8	8	1	3	4
15	XX	XX1213			9	9	1	8	8
16	XX	XX1214			2	2	1	6	2
17	XX	XX1215					#VALUE!		
18									

While those cells are highlighted, right click and select *Format Cells*. In the Number tab, select Percentage from the Category list, leave the decimal places at 2, and click OK.

P2	-	$X \checkmark f_x$	=N2/O2					
	А	В	L	М	N	Ο	Р	Q
1	State	Provider ID	OP3b Median	OP3b Count	OP4 NUM	OP4 DENOM	OP4_RATE	OP5 Median
2	XX	XX1200	51	4	5	5	1	2 :
3	XX	XX1201			3	3	1	20 :
4	XX	XX1202	Format Cells		? 💌	#VALUE!		
5	XX	XX1203	Number Alignment	Font Border Fill		0.333333333	9 !	
6	XX	XX1204	<u>C</u> ategory:				0.714285714	6
7	XX	XX1205	General A	Sample			0.8	18
8	XX	XX1206	Currency Accounting	Decimal places: 2	÷		#VALUE!	
9	XX	XX1207	Uate Time Parcentage				1	6
10	XX	XX1208	Eraction				0.857142857	32
11	XX	XX1209	Text				0.5	4 .
12	XX	XX1210	Custom				0.666666667	15
13	XX	XX1211					0.714285714	18 (
14	XX	XX1212					1	3 ,
15	XX	XX1213	-				1	8
16	XX	XX1214	Percentage formats multi	ply the cell value by 100 ar	nd displays the result with	a percent symbol.	1	6
17	XX	XX1215					#VALUE!	
18								
19	9				ОК	Cancel		
20			1					

Do the same for any other rates you wish to calculate.

	Α	B	L	М	N	0	Р
1	State	Provider ID	OP3b Median	OP3b Count	OP4 NUM	OP4 DENOM	OP4_RATE
2	XX	XX1200	51	4	5	5	100.00%
3	XX	XX1201			3	3	100.00%
4	XX	XX1202					#VALUE!
5	XX	XX1203			2	6	33.33%
6	XX	XX1204			5	7	71.43%
7	XX	XX1205	145	2	8	10	80.00%
8	XX	XX1206					#VALUE!
9	XX	XX1207			9	9	100.00%
10	XX	XX1208	30	3	6	7	85.71%
11	XX	XX1209			3	6	50.00%
12	XX	XX1210			4	6	66.67%
13	XX	XX1211			5	7	71.43%
14	XX	XX1212	80	1	8	8	100.00%
15	XX	XX1213			9	9	100.00%
16	XX	XX1214			2	2	100.00%
17	XX	XX1215					#VALUE!

After creating rates for each of the measures in which you are interested, delete any cells displaying *#DIV/0!* instead of a rate. A rate cannot be calculated for these because the denominator is 0 and you cannot divide by 0. You can also delete any cells displaying *#VALUE!* instead of a rate. *#VALUE!* is displayed because there is no data in the numerator and/or in the denominator.



Instead of manually deleting the *#VALUE!* or *#DIV/0!* messages, another option is to use formulas so that the *#VALUE!* or *#DIV/0!* message doesn't appear. For example, in the instruction step on page 5, instead of entering the formula =N2/O2, you can enter the formula =IF(ISERR(N2/O2)," ",N2/O2).

Calculating weighted state averages for median measures

A median is the middle value in a list of numbers that are ordered sequentially. In other words, half of the numbers in the list are smaller and half are larger. Medians do not provide an indication of how much larger, or smaller, the other values of the numbers are.

Median measures do not have numerators. There are several approaches to calculate a state average, depending on the data available to you. The MBQIP hospital reports calculate state average for timing measures by multiplying the median by the denominator, summing all of those values and dividing by the sum of all the denominators.

Note: There is a different process for calculating state rates for rate measures (e.g., OP-4). For more information on how to begin using data for rate measures, see <u>Calculating rates</u>.

To begin, determine the measure for which you wish to create a state average. Select the column to the right of the denominator for that measure by clicking on the letter that represents that column. Right click on the column and select Insert. A new column will appear to the left of the column selected.

	А	В	Т	U	V	ж	Cut	
			OP18b			Ē	<u>С</u> ору	
1	State	Provider ID	Median	OP18b Count	OP20 Med	Ē	Paste Options:	nt E
2	XX	XX1200	94	55	25		ĥ	
3	XX	XX1201					Paste <u>Special</u>	
4	XX	XX1202	72	54	9		Insert	
5	XX	XX1203	88	48	9		<u>D</u> elete	20
6	XX	XX1204	81	51	16	_	Clear Co <u>n</u> tents	20
7	XX	XX1205	113	131	37	8- 0-	Format Cells	
8	XX	XX1206					Hide	
9	XX	XX1207	118	50	28		<u>U</u> nhide	65
0.	XX	XX1208	110	71	20		70	72
1	XX	XX1209	120	42	10		44	59
.2	XX	XX1210	168	40	14		52	
.3	XX	XX1211	80	55	10		51	
.4	XX	XX1212	85	58	23		62	
.5	XX	XX1213	100	41	20		25	
16	XX	XX1214	84	40	15		70	24
.7	XX	XX1215	70	78	10		65	

Enter a name for the column. For this example the name is $OP18b_medXdenom$. In the cell below the new header name, enter a formula for the calculation. For this example the formula is =T2*U2, where T2 represents the cell containing the median and U2 represents the cell containing the denominator.

	А	В	Т	U	V	
			OP18b		OP18b_medX	
1	State	Provider ID	Median	OP18b Count	denom	(
2	XX	XX1200	94	55	=T2*U2	2
3	XX	XX1201				
4	XX	XX1202	72	54		ę
5	XX	XX1203	88	48		ę
6	XX	XX1204	81	51		1
7	XX	XX1205	113	131		3
8	XX	XX1206				
9	XX	XX1207	118	50		2
10	XX	XX1208	110	71		2
11	XX	XX1209	120	42		1
12	XX	XX1210	168	40		1
13	XX	XX1211	80	55		1
14	XX	XX1212	85	58		2
15	XX	XX1213	100	41		2
16	XX	XX1214	84	40		1
17	XX	XX1215	70	78		1

Click on the cell with the formula. Click on the plus sign (+) that appears when you hover over the bottom right corner of the cell and drag down to copy the formula to the cells below.

	А	В	Т	U	V	
			OP18b		OP18b_medX	
1	State	Provider ID	Median	OP18b Count	denom	(
2	XX	XX1200	94	55	5170	2
3	XX	XX1201			#VALUE!	
4	XX	XX1202	72	54	3888	ę
5	XX	XX1203	88	48	4224	ę
6	XX	XX1204	81	51	4131	1
7	XX	XX1205	113	131	14803	3
8	XX	XX1206			#VALUE!	
9	XX	XX1207	118	50	5900	2
10	XX	XX1208	110	71	7810	2
11	XX	XX1209	120	42	5040	1
12	XX	XX1210	168	40	6720	1
13	XX	XX1211	80	55	4400	1
14	XX	XX1212	85	58	4930	2
15	XX	XX1213	100	41	4100	2
16	XX	XX1214	84	40	3360	1
17	XX	XX1215	70	78	5460	1
18				·		Ļ

Click on the cell immediately below the denominator for the first measure. Enter a formula for summing the denominators. For this example the formula is =SUM(U2:U17), where U2 represents the cell containing the first denominator and U17 represents the cell containing the last denominator.

	А	В	Т	U	V	
1	State	Provider ID	OP18b Median	OP18b Count	OP18b_medX	e
2	XX	XX1200	94	55	5170	2
3	XX	XX1201			#VALUE!	Ē
4	xx	XX1202	72	54	3888	9
5	XX	XX1203	88	48	4224	9
6	XX	XX1204	81	51	4131	1
7	XX	XX1205	113	131	14803	3
8	XX	XX1206			#VALUE!	
9	XX	XX1207	118	50	5900	2
10	XX	XX1208	110	71	7810	2
11	XX	XX1209	120	42	5040	1
12	XX	XX1210	168	40	6720	1
13	XX	XX1211	80	55	4400	1
14	XX	XX1212	85	58	4930	2
15	XX	XX1213	100	41	4100	2
16	XX	XX1214	84	40	3360	1
17	XX	XX1215	70	78	5460	1
18				=SUM(U2:U17)		
10						

Click on the cell immediately to the right of the formula you just entered (the cell below the final OP18b_medXdenom value). Enter a formula for summing values in this column. For this example the formula is =SUM(V2:V17), where V2 represents the cell containing the first value and V17 represents the cell containing the last value.

	А	В	Т	U	V	
			OP18b		OP18b_medX	
1	State	Provider ID	Median	OP18b Count	denom	(
2	XX	XX1200	94	55	5170	2
3	XX	XX1201			#VALUE!	
4	XX	XX1202	72	54	3888	9
5	XX	XX1203	88	48	4224	9
6	XX	XX1204	81	51	4131	1
7	XX	XX1205	113	131	14803	3
8	XX	XX1206			#VALUE!	
9	XX	XX1207	118	50	5900	2
10	XX	XX1208	110	71	7810	2
11	XX	XX1209	120	42	5040	1
12	XX	XX1210	168	40	6720	1
13	XX	XX1211	80	55	4400	1
14	XX	XX1212	85	58	4930	2
15	XX	XX1213	100	41	4100	2
16	XX	XX1214	84	40	3360	1
17	XX	XX1215	70	78	5460	1
18				<u>(</u> 4	#VALUE!	

Notice that column V in row 18 shows the error message #VALUE! – this is because there are errors in some cells in the range being added together (see row 3 and row 8). To correct this, you can manually delete the two #VALUE! messages:

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	А	В	Т	U	V	
			OP18b		OP18b_medX	
1	State	Provider ID	Median	OP18b Count	denom	(
2	XX	XX1200	94	55	5170	2
3	XX	XX1201				
4	XX	XX1202	72	54	3888	S
5	XX	XX1203	88	48	4224	S
6	XX	XX1204	81	51	4131	1
7	XX	XX1205	113	131	14803	3
8	XX	XX1206				
9	XX	XX1207	118	50	5900	2
10	XX	XX1208	110	71	7810	2
11	XX	XX1209	120	42	5040	1
12	XX	XX1210	168	40	6720	1
13	XX	XX1211	80	55	4400	1
14	XX	XX1212	85	58	4930	2
15	XX	XX1213	100	41	4100	2
16	XX	XX1214	84	40	3360	1
17	XX	XX1215	70	78	5460	1
18				814	79936	
19	1					۰.

\mathbf{A}

Instead of manually deleting the *#VALUE!* message, another option is to use formulas so that the *#VALUE!* message doesn't appear. For example, in the instruction step on page X, instead of entering the formula =T2*U2, you can enter the formula =IF(ISERR(T2*U2)," ",T2*U2).

Click on the cell immediately below the formula you just entered in the OP_1_medXdenom column. Enter a formula for calculating the weighted state average. For this example the formula is =V18/U18, where V18 represents the cell containing the sum of the medXdenom calculations and U18 represents the cell containing the sum of the denominators.

	А	В		U	V
			OP18b		OP18b_med
1	State	Provider ID	Median	OP18b Count	denom
2	XX	XX1200	94	55	5170
3	XX	XX1201			
4	XX	XX1202	72	54	3888
5	XX	XX1203	88	48	4224
6	XX	XX1204	81	51	4131
7	XX	XX1205	113	131	14803
8	XX	XX1206			
9	XX	XX1207	118	50	5900
10	XX	XX1208	110	71	7810
11	XX	XX1209	120	42	5040
12	XX	XX1210	168	40	6720
13	XX	XX1211	80	55	4400
14	XX	XX1212	85	58	4930
15	XX	XX1213	100	41	4100
16	XX	XX1214	84	40	3360
17	XX	XX1215	70	78	5460
18				814	7993
19					=V18/U18

Digging deeper

If you see any cells that display *#VALUE!* instead of a rate or average, consider doing some further investigation.

	А	В	L	Μ	Ν	0	Р	
1	State	Provider ID	OP3b Median	OP3b Count	OP4 NUM	OP4 DENOM	OP4_RATE	
2	XX	XX1200	51	4	5	5	100.00%	
3	XX	XX1201			3	3	100.00%	
4	XX	XX1202		<			#VALUE!	>
5	XX	XX1203			2	6	33.33%	
6	XX	XX1204			5	7	71.43%	

No data in this case means that the CAH did not submit data for this measure. However, this could be because the CAH did not have any eligible cases for the population.

To discover if this is what happened, look at the Total Pop column(s) associated with the measure. In this example, scroll right and look at the AMI Total Pop column as well as the Chest Pain Total Pop column, since OP4 is part of both the AMI and the Chest Pain measure sets. No data has been entered in these columns either.

	А	В	N	0	Р	Q	R	S	Т	U
								AMI Total	Chest Pain	AMI + Chest Pain
1	State	Provider ID	OP4 NUM	OP4 DENOM	OP4_RATE	OP5 Median	OP5 Count	Рор	Total Pop	Total Pop
2	XX	XX1200	5	5	100.00%	2	5			
3	XX	XX1201	3	Э	100.00%	20	2	3		3
4	XX	XX1202			#VALUE!	>	(C		
5	XX	XX1203	2	0	33.33%	9	5	0		7
6	XX	XX1204	5	7	71.43%	6	7	1	0	1
7	XX	XX1205	8	10	80.00%	18	8			

This CAH would be treated as a Nonsubmission. Verify this by looking at this CAH in your state's Nonsubmission list, under measure OP4. You can also look at this CAH's Patient Safety & Outpatient report - this particular measure should display an "N/A."

HCAHPS Excel data files

Understanding the data files

HCAHPS data files should look similar from quarter to quarter. A screenshot showing part of a sample data file is below:

	А	В	С	D	E	F	G	н	Ι	
1	STATE	PROVIDER_ID	COMPLETED_ SURVEYS	TEXTUAL_CO MPLETED_SU RVEYS	QUESTION_ID	SOMETIMES_ TO_NEVER	USUALLY	ALWAYS	YES	
2	xx	XX1200	72	Fewer than 100	Star Rating	N/A	N/A	N/A	N/A	N/A
3	хх	XX1200	72	Fewer than 100	Q 21	N/A	N/A	N/A	N/A	N/A
4	хх	XX1200	72	Fewer than 100	Q9	4	23	73	N/A	N/A
5	хх	XX1200	72	Fewer than 100	Q8	9	22	69	N/A	N/A
6	хх	XX1200	72	Fewer than 100	Composite 6	N/A	N/A	N/A	88	12
7	хх	XX1200	72	Fewer than 100	Composite 5	20	21	59	N/A	N/A
8	xx	XX1200	72	Fewer than 100	Composite 4	6	25	69	N/A	N/A
9	XX	XX1200	72	Fewer than 100	Composite 3	7	13	80	N/A	N/A
10	хх	XX1200	72	Fewer than 100	Composite 2	5	14	81	N/A	N/A
11	хх	XX1200	72	Fewer than 100	Composite 1	3	14	83	N/A	N/A
12	ХХ	XX1200	72	Fewer than 100	Composite 7	5	39	56	N/A	N/A
13	хх	XX1200	72	Fewer than 100	Q 22	N/A	N/A	N/A	N/A	N/A
14	NC	XX1201	140	and 299	Star Rating	N/A	N/A	N/A	N/A	N/A
15	NC	XX1201	140	and 299	Q 21	N/A	N/A	N/A	N/A	N/A

As was the case in the OP data files, the first and second columns contain your state's abbreviation and ID numbers for each CAH. The first row (in blue) contains variable names – be sure to scroll all the way to the right in your data files to see all of the variables. Each row after the first contains data for one CAH.

Beyond the first two columns, HCAHPS files are arranged differently than the other MBQIP files. Each HCAHPS measure included in the MBQIP HCAHPS files gets its own row for each hospital – meaning that <u>each hospital</u> has 12 rows of data (one each for Composite 1 through 7, Q8, Q9, Q21, Q22, and the Star Rating). The measure name can be found in Column E, named **QUESTION_ID**.

The exact number of surveys completed by each hospital is located in Column C, **COMPLETED_SURVEYS**, and the category of completed surveys is located in Column D, **TEXTUAL_COMPLETED_SURVEYS**. For each hospital, the contents of both of these columns should remain the same for each of the 12 rows.

HCAHPS survey questions that are part of MBQIP have different response categories. Depending on the question, the patient responding to the survey might respond by selecting:

• Yes or No

- A rating, on a scale from 0 (worst) to 10 (best)
- Never, Sometimes, Usually, or Always
- Definitely no, Probably yes, or Probably no

In the HCAHPS Excel data files, these types of responses are shown as follows:

- Yes (Column I) or No (Column J) in **purple** in the image below
- Rating from 0 to 6 (Column K), from 7 to 8 (Column L), or from 9 to 10 (Column M) in blue
- Sometimes or Never (Column F), Usually (Column G), or Always (Column H) in red
- Definitely no (Column N), Probably yes (Column O), Definitely yes (Column P) in orange

E	F	G	Н	I	J	К	L	М	N	0	Р	1
QUESTION_ID	SOMETIMES_ TO_NEVER	USUALLY	ALWAYS	YES	NO	RATING_0_6	RATING_7_8	RATING_9_10	DEFINITELY_N O	PROBABLY_Y ES	DEFINITELY_Y ES	s
Star Rating	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Q 21	N/A	N/A	N/A	N/A	N/A	6	25	69	N/A	N/A	N/A	N
Q9	4	23	73	۱/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Q8	9	22	69	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Composite 6	N/A	N/A	N/A	88	12	V/A	N/A	N/A	N/A	N/A	N/A	N
Composite 5	20	21	59	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Composite 4	6	25	69	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Composite 3	7	13	80	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Composite 2	5	14	81	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Composite 1	3	14	83	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Composite 7	5	39	56	I/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N
Q 22	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	3	14	83	N

Depending on the HCAHPS survey question, a given column in the range of Column F through Column P will contain an N/A (if the response type does not fit the survey question) or numbers. The numbers should be interpreted as percentages without the percentage symbol – for example, the number 88 translates to 88%, the number 3 translates to 3%, and so forth. If a hospital has an N/A in Column D (number of completed surveys) then no surveys were returned, and Columns F through P will <u>all</u> show an N/A.

Moving through the remainder of the data file, Column Q shows the star rating the hospital was assigned, if at least 100 surveys were returned. If fewer than 100 surveys were returned, then a star rating could not be calculated and Column Q will display N/A. In this case, Column R will also display footnote 6. (For more details on other possible footnotes and their meanings, visit https://www.medicare.gov/hospitalcompare/data/Footnotes.html).

Columns S, T, U, and V provide the start and end dates of the data included in the HCAHPS data file. Columns S and U display this as calendar year quarters, while Columns T and V display this as calendar year dates.

Column W shows the survey response rate. This is the percentage of surveys that had a response, out of the number that were administered. As before, these numbers should be interpreted as percentages without the percentage symbol. In the example that follows, the number 30 translates to 30%.

Q	R	S	Т	U	V	W
STAR_RATING	FOOTNOTES	START_QUAR TER	START_DATE	END_QUARTE R	END_DATE	H_RESP_RAT E_P
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30
N/A	6	3Q2015	07/01/2015	2Q2016	06/30/2016	30

Non-Submission list

The non-submission list for HCAHPS is quite straightforward: for a given reporting period, all of the hospitals listed in the non-submission list are non-submitters. If a hospital is not listed in the non-submission list, then they are considered reporting. If you would like, you can verify the non-submission list by double-checking the HCAHPS data file for your state to ensure that the hospitals on that list display an "N/A" in Column D (number of completed surveys).

Working with HCAHPS data

Because of the way HCAHPS data is organized, some manipulation is helpful in order to more easily work with and analyze the data.

Select all of the data (click the top-left triangle to do so):





Click "Sort & Filter" and then select "Custom Sort..."

In the "Sort By" dropdown, select QUESTION ID and then click OK.

							Ŧ	* *	V Clear	Filte
	_	Sort							? <mark>×</mark>	liting
j		<u>A</u> dd	Level X Delete	Level	Level	Option	ns	🔽 My d	ata has <u>h</u> eaders	
		Column		Sort On			Order			
h	_	Sort by	QUESTION_ID	 Values 		-	A to Z			
()_6	<	STATE PROVIDER_ID COMPLETED_SURI TEXTUAL_COMPLETED_SURI SOMETIMES_TO_N USUALLY ALWAYS YES NO RATING 0.6 RATING 7.8					ОК	Cancel	
		N/A	IN/A	N/A	IN/A		/A	11/2	4	5

You'll notice that the order of the HCAHPS data has now changed. Rather than all 12 of a hospital's rows being located together, they are now ordered so that all of the questions of a similar type are together. To illustrate, see the "before" and "after" screenshots below that compare the first 5 rows of our example dataset (note that our example dataset only contains 3 hospitals):

Be	fore:				Α	fte	r:				
	А	В	С	D			Α		В	C	D
1	STATE	▼ PROVIDER_ ▼	COMPLETED_ SURVEYS	TEXTUAL_CO MPLETED_SU RVEYS	1		STATE	•	PROVIDER_	COMPLETED_ SURVEYS	TEXTUAL_CO MPLETED_SU RVEYS
2	xx	XX1200	72	Fewer than 10(2	xx			XX1200	72	Fewer than 100
3	xx	XX1200	72	Fewer than 10(3	xx			XX1201	140	Between 100 and 299
4	xx	XX1200	72	Fewer than 10(4	xx			XX1202	180	Between 100 and 299
5	xx	XX1200	72	Fewer than 10(5	xx			XX1200	72	Fewer than 10(

From here, you can more easily pull out and summarize the data by question type. As one example, if you wanted to understand the range of "Always" responses for Composite 1 among your hospitals, you could copy all of the Composite 1 data into a new spreadsheet and easily work with it there.

Select the rows of interest (be sure to select the entire row, all the way through the last column), rightclick, and choose "Copy":

	A	В	С	D	E	F	G	Н	
			COMPLETED	TEXTUAL_CO		SOMETIMES			
1	STA	Arial, He - 10 - A	Ă\$ ▼ % »	RVEYS -	QUESTION1	TO_NEVEF	USUALLY 🗸	ALWAYS 🖵	
2	хх	B I = 👌 - A -	₩ • 0.0 0.0 • • • •	ver than 100	Composite 1	3	14	83	N/A
2	vv	V. c.	140	Between 100	Composito 1	2	22	74	NUA
3	~~	💑 Cu <u>t</u>	140	and 299	Composite 1	3	23	14	IN//F
4	xx	🗈 Сору	180	and 299	Composite 1	10	22	68	N/A
		Paste Options:							
5	XX	Ê	72	Fewer than 100	Composite 2	5	14	81	N/A

Open up a new Excel document. You can also add a new tab to the document you're currently working in. Right-click in cell A1 and then choose "Paste":



From here, you can manipulate the data for Composite 1. If you'd like to understand the range of "Always" responses, you can:

• Sort the data by Column H (ALWAYS). The lowest response will be at the top, and the highest response will be at the bottom.

		ſ	Sort	? 💌
	Α	В	*Add Level ∑ Delete Level ⊆ Copy Level ✓ Options	Wy data has <u>h</u> eaders
			Column Sort On Order	
		PROVII	Sort by ALWAYS Values Small	est to Largest 📃 👻
1	STATE	R_ID		
2	xx	XX1200	COMPLETED_SURVEYS TEXTUAL_COMPLETED_SURVE QUESTION_ID SOMETIMES_TO_NEVER	
3	xx	XX1201		
4	xx	XX1202	NO RATING_0_6 RATING_7_8	OK Cancel
5				
6				
7				

• Use the equations MIN() and MAX() to find the minimum (lowest) and maximum (highest) responses in the range:

A	В	С	D	E	F	G	н	I
STATE	PROVIDE R_ID	COMPLE TED_SUR VEYS	TEXTUAL _COMPL ETED_SU RVEYS	QUESTIO N_ID	SOMETI MES_TO _NEVER	USUALL Y	ALWAYS	YE
xx	XX1200	72	Fewer than 100	Composit e 1	3	14	83	N/A
xx	XX1201	140	Between 100 and 299	Composit e 1	3	23	74	N/A
xx	XX1202	180	Between 100 and 299	Composit e 1	10	22	69	NVA
							=MIN(H2:I	H4)

EDTC Excel data files

Understanding the data files

EDTC Excel data files are actually the templates that each state uses to compile hospital-level EDTC measures each quarter. An example of the template follows, hypothetically completed by the state Flex team with sample data:

	А	В	С	D	E	F	G	Н	I	J
1 Emergency Department Transfer Communication State Report										
2	State	XX								
3	Reporting Period	1Q2016								
4	# CAHs in State	24								
	Submitting data this									
5	quarter	18								
6										
		# Records	EDTC-1:	EDTC-2:	EDTC-3:	EDTC-4:	EDTC-5:	EDTC-6:	EDTC-7:	
		Reviewed	Administrative	Patient	Vital	Medication	Practitioner	Nurse	Procedures and	All EDTC
7	Hospital CCN#	(denominator)	Communication	Information	Signs	Information	Information	Information	Tests	Measures
8	XX1200	45	45	45	45	45	45	43	45	43
9	XX1201	40	35	34	35	40	36	30	34	13
10	XX1202	40	35	34	35	40	36	30	34	13
11	XX1203	45	45	44	45	43	41	40	43	30

The state Flex team enters data into this template each quarter. Rows 1 through 5 hold overall details related to the state's EDTC reporting for the quarter. Row 7 contains variable names for EDTC. Hospital-level data begins starting in Row 8: for each hospital, the Flex team enters the number (not a percent) of records reviewed in Column B, and also enters the number (not a percent) of records meeting each EDTC measure in Column C through J.

Working with the data

The <u>EDTC Comparison Template</u> is intended to assist Flex Programs in calculating EDTC rates and producing comparison graphs for critical access hospitals (CAHs) for hospital and state Emergency Department Transfer Communication (EDTC) performance – this can be a useful resource in working with EDTC data. The EDTC data templates are protected, which means that you cannot add calculations to work with the data in the template itself. By copying the EDTC template data into the EDTC Comparison Template, it's possible to interact with the data.

Tips & Tricks for Manipulating Data in Excel



While this is by no means an exhaustive list, here are some additional functions and tips & tricks for working in Excel. Note that the example screenshots are not based on MBQIP data, but are included to illustrate what you might expect to see regardless of the data you're working with.

Find the average (mean) of a range of numbers

Click in an empty cell, then type =**AVERAGE**(and select the full range of the numbers you are interested in. Close the parentheses, then hit "Enter" on your keyboard to see the average.



Find the median of a range of numbers

You can use a function, or you can sort from smallest to largest and then identify the middle point. Read on to learn how to sort. To use a function, click in an empty cell, then type =**MEDIAN**(and select the full range of the numbers you are interested in. Close the parentheses, then hit "Enter" on your keyboard to see the average.



Sort by rate or median

Sorting by rate or median can make it simpler to quickly identify high performers and those with opportunity for improvement on individual measures. Whether you are sorting by a rate or by a median, the steps are exactly the same and equally valuable. To begin, select the entire cell range you wish to sort. Include the header row.

н	I	J
	Sample Data	
	5	
	9	
	12	
	0	
	6	
	7	
	9	

On the Data tab, select *Sort & Filter* and then choose *Custom Sort*. Make sure that the box next "My data has headers" is checked, and then choose the order for sorting (Smallest to Largest is selected). Click "OK."

Nrap Text General Werge & Center \$ ~ % \$ ~ % \$ ~ % Number rs Number Number <	enen or	. .														
Merge & Center \$ + % + % + % + % + % + % Number Image & Center Sort Sort Sort Sort Image & Center Number Sort Sort </td <td>Wrap Text</td> <td>General</td> <td></td> <td>-</td> <td>≠ I</td> <td>Norr</td> <td>nal</td> <td>Bad</td> <td>G</td> <td>bod</td> <td>Neutral</td> <td>Calculation</td> <td>]_ #</td> <td>• 🖹 🊺</td> <td>≥ AutoSum</td> <td>ZY</td>	Wrap Text	General		-	≠ I	Norr	nal	Bad	G	bod	Neutral	Calculation]_ #	• 🖹 🊺	≥ AutoSum	ZY
I J K L M N O P Sample Data I I I I I My data has header 9 I I I I I I I 12 I I I I I I I 0 I I I I I I I 12 I I I I I I I 0 I I I I I I I 12 I I I I I I I 0 I I I I I I I 12 I I I I I I I 13 I I I I I I I 14 I I I I I I I 15 I I I I I I I 14 I I I I I I I 15 I I I I I I I 16 I I I I I I I 17 I I I I I I I 16 I I I I I I I 17 I I I I I I I 19 I I I I I I I 17 I I<	Merge & Center 🔹	\$ • %	9. 0.→ ← 00.	Condit	ional Forma ting ▼ Tabl	at as Chec	k Cell	Explanat	ory <u>Fo</u>	llowed Hy	<u>Hyperlink</u>	Input	Tinse	rt Delete Forma	t	Sort & F Filter ≠ Si
I J K L M N O P Sample Data	5	Nur	nber	rsi					Sort						? ×	liting
I J K L M N O P Sample Data I <									(<mark>*</mark> ▲↓ <u>A</u> d	d Level 🗙 🖸	elete Level	opy Level	Options.	My d	ata has <u>h</u> eaders	
I J K L M N O P Sample Data A 5 A A 9 A A A A A A A A A A A A A A A A A									Colum		Sort	On	C	order		
Sample Data	I	J	к	L	м	N	0	Р	Soft by	Sample Data	▼ Valu	les	▼ 5	mallest to Largest		Z A
5	Sample Data															
9 12 0 6 7 9 0 0 0 0 0 0 0 0 0 0 0 0 0	5															
12 0 6 7 9	9															
0 6 7 9	12															
6 7 9	0															
	6													ОК	Cancel	
	7														curreer	
	9								-							

Finally, check to make sure that your data looks to be sorted correctly based on the ordering you selected.

I						
Sample Data						
0						
5						
6						
7						
9						
9						
12						

Systematically remove error messages

If Excel displays error messages such as #VALUE! or #DIV/0!, you can use formulas so that these do not appear. Examples of how to do this are described in the text above, both <u>here</u> and again <u>here</u>.

Expand your toolkit

Here are a handful of other Excel functions that can help save you time – try a quick online search to learn about these options, and don't be afraid to search for other functions too!

- Filters these limit your data so that you only see the rows you're most interested in
- New functions such as =COUNT (to count up the number of records in a certain range of data) or =IF (to conditionally format) or =MIN and =MAX (to find the minimum and maximum in a certain range of data)
- **Shortcuts** keyboard shortcuts such as CTRL-A (to select everything), or timesavers such as how to add more than one new row or column at once
- **Remove Duplicates** to systematically remove duplicate items within a certain range of data
- Find/Replace to systematically change everything of a certain value to a different value

Appendix 1: Reporting scenarios

Denominator or Count	Population	Displayed in Data Report	Displayed on Non- submission List	Case Explanation
Blank	Blank	N/A	Ν	Did not submit cases to Quality Net warehouse via CART or other vendor tool and did not submit population to QualityNet via secure login
Blank	#>0	N/A	Ν	Did not submit cases to the Quality Net warehouse via CART or other vendor tool and submitted population greater than 0 to QualityNet via secure login
Blank	0	0		Did not submit cases to Quality Net warehouse via CART or other vendor tool and submitted a population of 0 to QualityNet via secure login
#>0	Blank	Average/rate		Submitted eligible cases to Quality Net warehouse via CART or other vendor tool and did not submit population to QualityNet via secure login
#>0	#>0	Average/rate		Submitted eligible cases to Quality Net warehouse via CART or other vendor tool and submitted a population greater than 0 to QualityNet via secure login
#>0	0	Average/rate		Submitted eligible cases to Quality Net warehouse via CART or other vendor tool and submitted a population of 0 to QualityNet via secure login
0	Blank	D/E		Submitted to Quality Net warehouse via CART or other vendor tool, but no eligible cases for measure, and did not submit population to QualityNet via secure login
0	#>0	D/E		Submitted to Quality Net warehouse via CART or other vendor tool, but no eligible cases for measure, and submitted a population greater than 0 to QualityNet via secure login
0	0	D/E		Submitted to Quality Net warehouse via CART or other vendor tool, but no eligible cases for measure, and submitted a population of 0 to OualityNet via secure login