Adult Congenital & Pediatric Cardiology Quality Network™ Program Requirements
Updated September 30, 2024

PROGRAM OBJECTIVES

The Adult Congenital & Pediatric Cardiology (ACPC) Quality Network™ aims to provide the congenital heart disease (CHD) and pediatric cardiology community an avenue to develop quality metrics and collect data in an effort to promote quality improvement in patient care. Data from participating medical facilities ("Participant") will be used to produce quarterly summary reports which will allow for blinded, aggregate performance comparisons across Participant sites and will serve to inform CHD-related quality improvement initiatives. In addition to identifying opportunities to improve the quality of CHD care, a secondary goal is to leverage data collection and reporting to assist participating physicians with fulfilling Maintenance of Certification (MOC) Self-Assessment of Practice requirements of physician certifying boards (together the "Program"). The Program launched in 2016.

QUALITY METRIC PORTFOLIO

Participants will be responsible for collecting and submitting data for a set of quality metrics. Participants will have the option to report on all or a subset of the quality metrics based on the metrics they identify as relevant for their practice and corresponding quality improvement efforts. The current set of quality metrics includes measures which assess the quality of care related to adult congenital and pediatric cardiology. A list of approved metrics can be found at the following ACC website: www.acc.org/qnet.

REQUIREMENTS OF PARTICIPANTS

General Requirements

Medical facilities are eligible to participate in the Program by meeting the following criteria:

- A Participant shall be defined as a hospital, group practice, solo physician practice, or clinic with an inpatient-only, outpatient-only or combined inpatient/outpatient cardiology unit that is participating in the Program.
- Participant must have an executed and current *Participation Agreement* which authorizes The American College of Cardiology Foundation (ACCF) to use the data to create aggregated benchmarks for quarterly and annual reports to be shared across all participating medical facilities.
- Participant must designate and provide contact information for the Registry Site Manager. The Registry Site Manager is the primary point of contact and will supervise the data collection and confirm the accuracy of the data. This individual will act as the primary contact liaison for the Program.
- Participant is required to maintain an accurate and up-to-date Site Profile at all times.
- Participant agrees to have their name, city and state made available as a Participant in the Program, on their facility's profile on Find Your Heart a Home/CardioSmart.org, in the list of site participants on NCDR.com and/or on www.acc.org/qnet, to be determined by ACCF.

Annual Fees

- Participating facility is required to pay an annual fee.
- The annual fee covers the period of January 1 through December 31 and does not extend past December 31 for any purpose.
- ACCF will provide the Participant with an invoice of fees via email when annual fees are due. Renewal emails will be sent to the Registry Site Manager.
- The annual fee is non-refundable even if your participation in the NCDR is terminated for any reason.

Data Collection

Participants must meet the following criteria in order to submit data for any metric:

- Participant will report data for at least one (1) of the ACPC approved quality metrics on a quarterly basis according to ACCF determined submission deadlines.
- Participants will understand the metric specification(s) for the metric(s) they wish to report.
- Participant will only report numerator(s) and denominator(s) and will not provide any patient's personal health information (PHI).
- Participant must follow the eligible population[1] sampling methods as outlined in the ACPC Quality Network Data Collection Instructions and Diagram and as described below:
    - Participants with more than twenty (20) patients in the eligible population may use random sampling to report data for at least twenty (20) patients, or report entire eligible population.
    - Participants with a total of five (5) to twenty (20) patients in the eligible population must report data for all patients in the eligible population.
    - Participants with fewer than five (5) patients in the eligible population should still submit data for the measure for that quarter. Please see requirements for the ACC data access and reporting section (below) for how these low volume populations will be handled.
- Participant will maintain an independent local data collection tool to track the data needed for submission.
- If necessary, Participant will aggregate data within their own facility in order to report one (1) numerator(s) and denominator(s) per metric per Site. Aggregating data per metric should occur prior to submitting data via the web-based data collection tool.
- Questions regarding metric specifications or data collection should be submitted via email to acpcqnet@acc.org.

Data Access and Reporting

- Participants who do not comply with the terms outlined in these program requirements or *Participation Agreement* will no longer be able to participate in the Program and will not be able to access the quality metric reports.
- All exports will be delivered in a tab delimited format.

[1] The "eligible population" is defined as all patients who meet the denominator criteria for each metric.

System Requirements

For optimal functionality, particularly for the online data collection tools, the following are required:

- Operating System - Microsoft Windows 10 or higher
- Browser - Currently supported version of Microsoft's Edge
- Microsoft Excel version 2011 or higher
- Adobe PDF Reader

Training and Education

- Participants are expected to have their staff participate in webinar-based Quality Improvement Learning Sessions where Participants will have the opportunity to share experiences and best practices in implementing ACPC quality metrics, data collection, data reporting, and Quality Improvement (QI) initiatives that helped improve performance.
- Participants are expected to stay current with all instructions sent via e-mail or posted on NCDR.com and the QII Learning Center from ACC staff or published by the ACCF and posted on the Program's website.

Withdrawing Participation

- Participants may withdraw consent for participating in the network at any time by providing a written request pursuant to the terms outlined in the *Participation Agreement* and on the organization's letterhead. Such request must be signed by an individual deemed to have appropriate authority to terminate the *Participation Agreement*. Requests must be sent to the mailing address designated on the *Participation Agreement*.
- In the event a Participant withdraws participation from the Program, the *Participation Agreement* will be considered terminated pursuant to the terms outlined therein.
- ACCF will remove the Participant from the Program and make a reasonable effort to remove Participant data from any pending reports in a timely manner.
- Participants understand that data included in past reports (i.e. reports that have already been sent to all Participants) will not be able to be removed.

REQUIREMENTS OF THE AMERICAN COLLEGE OF CARDIOLOGY FOUNDATION (ACCF)

General Requirements

- ACCF will maintain a list of ACPC Quality Network metrics which will be posted at www.acc.org/qnet. Metric specifications are available to Participants on NCDR.com. Metrics may be modified on a periodic basis.
- ACCF reserves the right, at its sole discretion, to remove or add quality metrics as needed, which may occur on an annual basis or more frequently.
- ACCF will communicate changes made to the metric specifications, data collection and reporting, and new or retired metrics.
- ACCF will respond to questions regarding participation, measure specification, data collection and reporting from emails received at acpcqnet@acc.org.

Data Collection

- ACCF will provide Participants with a unique, site-specific link to a web-based survey tool along with an assigned, coded identifier that will only be known to each individual medical facility.
- ACCF will maintain Call for Data deadlines on NCDR.com. In general, data for each reporting quarter will be due no later than six (6) weeks past the end of each quarter.

Data Access and Reporting

- ACCF will not link any participant site names to performance rates on any reports in order to protect the identity of all Participants.
- ACCF will only include metrics with data from at least five (5) Participants in the quarterly performance reports.
- ACCF reports will include blinded performance rates per metric per site (i.e. Participant A will be able to see Participant B's performance rate but will not know the identity of that Participant).
- ACCF reports will also include a 'reference line' to reflect the median 50th percentile performance of all Participants per metric.

Support

- ACCF provides business operation support via telephone and email during ACCF's business hours posted on the NCDR private (log-in) website. Access the "Contact Us" option located on the left navigation bar on the registry home page.
- The Program provides support via mail (acpcqnet@acc.org) during normal business hours Monday through Friday, 9:00 a.m. to 5:00 p.m. Eastern Time, excluding major holidays.