NCDR eReports EMS: Customized Reporting
Program Requirements for Aggregate Identifiable Reporting
Version 1.1

NCDR eReports EMS is a web enabled business intelligence data report dashboard and quality improvement program designed to serve as an enhanced customizable reporting mechanism. The eReports EMS dashboard allows clients to tailor custom markets for comparison of quarterly outcome reports against national benchmarks, based upon the participants included in the custom markets.

A Client is defined as an entity external to the American College of Cardiology Foundation (ACCF) that has a contract in place for access to a data report dashboard. An EMS agency is a client with access to the NCDR eReports EMS Dashboard.

A Participant is defined as a legal entity with a physical location that has a valid agreement in place to allow access to an NCDR.com eReports dashboard. A Participant submits data to NCDR to be included in benchmarking and the Data Quality Review (DQR) process. In addition, all fees are paid and current and the participant offers a service that would meet inclusion for participation.

These requirements can be briefly summarized as:

Technical Requirements Supported for Optimal Functionality: *the list below details the technical elements necessary for a client to utilize the web-based reports.*
1. Microsoft Excel version 2007 or higher (will not accept versions older than 2007)
2. Adobe PDF Reader
3. Internet Explorer 11.0 and above browser is required. In addition, although it is not required, it is important to note that a disabled pop-up blocker aids in decreasing the likelihood of any download difficulties.
4. All exports will be delivered in a tab delimited format.

*NCDR eReports EMS may work with other systems and versions, but we cannot assure nor support the functionality on systems not listed in this document.

Client Participation Requirements:
1. **Management and Administrative Oversight:** Client shall identify a NCDR eReports EMS super user to receive all communications and program materials, participate in training provided by ACCF and implement the program in the practice. Client shall notify ACCF within ten
(10) working days of any change. Client manages the administrative rights to eReports EMS on NCDR.com.
2. **My Markets/My Metrics:** NCDR eReports EMS contains features that are customizable at the entity level. To view metrics in the dashboard at an individual facility or market level, the super user must establish the markets in a way that makes sense for the client. It is important to note that these features are not customizable at the individual user level. Any update to My Markets/My Metrics definitions will be reflected in the dashboard 1-2 business day(s) after the reporting data mart is updated as part of the nightly refreshing process.
3. **Current Accounts**: Clients must have all accounts current with all fees paid in full.

NCDR Participation Requirements: *the list below details the aspects of the NCDR that the client must adhere to utilize the NCDR eReports EMS dashboard.*
1. **General:** NCDR provides guidance on metrics that clients are required to adhere to. In addition, this tool grants rights to a data governed by HIPAA.
2. **Concept of Rolling Four Quarters (R4Q):** Measures and metrics are reported for a four-quarter roll-up of an unpublished aggregated timeframe and published aggregated timeframe for all data submissions with a green light submission status upon completion of the Data Quality Review (DQR) process.
3. **Concept of a Data Refresh Cycle**: On a quarterly basis ACCF shall transfer all registry data,

including indirect hospital comparison groups and US hospital benchmarking, to the client in the form of the technical specifications for all registry metrics from the NCDR Institutional Outcomes Report Executive Summary for each respective registry. The method by which metrics are calculated can be modified by the ACCF periodically with due notice sent to the client (e.g., Chest Pain MI version 2.x). ACCF reserves the right to modify, add new or remove metrics. Modifications will only affect the current rolling four quarter period subject to the business case.

4. **Data Element Changes**: The NCDR eReports EMS shall rely on current version dataset that will be updated quarterly with submissions received according to the published call for data submission schedule and meet the DQR process (i.e., green submission status) for the reporting time frame.

5. **Audit**: Auditing of the data will occur to examine patterns of ordering that may indicate Institution-based anomalies (e.g. high percentage of PCI procedures compared to other Institutions. The results of individual hospital audits or other data quality program monitoring activities are not provided to EMS Agencies.

6. **Change to the Algorithms**: If there is a change to the algorithms used for computing metrics, this data will be recalculated for all previous quarters.

General Requirements

To ensure timely and accurate reporting of data to NCDR eReports EMS, all Institutions must also adhere to the following regarding day-to-day participation, data collection, and reporting.

1. **Participant License:** Participant License (PL) fee includes data created and distributed to NCDR participants on a quarterly, semiannual, or annual basis for all or part of the calendar year, regardless of the number of registries or facilities associated with a participant.

2. **ACCF Support:** ACCF offers technical support via email at ncdrmail@acc.org or via telephone 9:00 am to 5:00 pm Monday through Friday 1 -800-257-4737.

3. The ACCF will provide support via telephone and e-mail during normal business hours Monday-Friday 9:00am - 5:00pm eastern time. Support will not be offered on the weekend or federal holidays. The ACCF will provide technical support for the utilization of the tool only. It is the responsibility of the client to handle any issue related to hardware requirements required to utilize the tool.

4. Upon notice and with the cooperation of the Client, the ACCF shall use reasonable efforts to promptly resolve any failure of the tool to perform which materially impairs the client's use of the tool or any malfunction or defect of the tool, including updates and corrections.

5. The ACCF shall deliver corrections to the tool in the form of updated versions or revisions to the tool.

Glossary of Definitions

Rolling Four Quarters (R4Q): The four (4) consecutive quarters included in this report. (Example: The 2011Q1 report includes 2010Q2, 2010Q3, 2010Q4 and 2011Q1. The "Q" in 'R4Q" indicates the last quarter of the rolling four quarters).

Reporting Timeframe: refers to the rolling four quarters for which the report is being produced.

Published Aggregation: refers to the numbers that are included in the quarterly outcomes report. NCDR publishes an outcomes report on a quarterly basis. This report aligns with the close for call for data submissions.

Not Published Aggregation: refers to the numbers that have not been published in the quarterly outcomes report. This also refers to data that may be aggregated between the close for call for data submission dates.

Aggregation Date: refers to the date of the data snapshot that was used to produce the aggregation. The aggregation timestamp is in the top right corner of the dashboard and reflects the most recent weekly aggregation.

Data Quality Review (DQR): Hospital participants submit data to the NCDR for quality review. This quality review is known as the Data Quality Reporting (DQR) process. The DQR checks submitted patient records and returns a pass/fail status for their submission. Data are first checked for errors then checked for "completeness" thresholds. Passing the DQR ensures well- formed data and a statistically significant submission. Only green light submissions will be displayed in the quarterly reports. Following successful submission to the DQR, the data are stored in the data warehouse and from there loaded to a data mart, which is the source of the data provided to the client.

Super User: The designated user of an entity that is listed as the primary point of contact and communicates internal changes to NCDR and oversees administration within the dashboard, such as adding new users and creating markets.