

# How We Know Our Work Makes A Difference

HQR USABILITY REPORT

# Promoting Interoperability



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# What is HQR?

- Hospital Quality Reporting
- The Centers for Medicare and Medicaid Services (CMS) collects quality data from healthcare provider organizations, with the goal of driving quality improvement through measurement and transparency by publicly displaying data to help consumers make more informed decisions about their health care.

**“Better Hospital Quality Data =  
Better Care”**

# What is Promoting Interoperability (PI)?

- A program within HQR
- Used as an incentive to encourage facilities to move towards using electronic health records (EHR).
- In PI, providers submit clinical quality measures to meet program credit through web-based or file upload submissions as a delivery method.



# **We conducted a usability test and measured**

## **1. Efficiency and effectiveness**

- We want to minimize the number of errors and time it takes for users to complete the PI data form

## **2. Confidence after submitting quality measure for the PI program**

- We want our prototype to allow users to feel confident in the accuracy and submissions of their data in the PI form

## **3. Satisfaction**

- We want to have a high user satisfaction upon completion of the form

# Core interactions tested well, but there was still work to be done

## 1 Starting PI submission is super easy for users

All users (experienced submitters / non-experienced submitters) knew exactly what to do (100% usability)

## 2 Registering for PI has a slight learning curve, but was mostly usable

Most users were able to figure out how to register for PI. (70% usability)

Once on the registration page, completed with no problem. (90% usability)

## 3 Nomenclature used during completion and submission of web-based data confused users

“Meaningful Use” on attestation disclaimer. (75% usability)

## 4 Most users failed to complete and submit data via file upload submissions

Didn't remember to go to back data submissions to complete the attestation and objectives. One successful completion. (45% usability)



# Focus on finding #3

- 1 Starting PI submission is super easy for users**  
All users (experienced submitters / non-experienced submitters) knew exactly what to do (**100%** usability)
- 2 Registering for PI has a slight learning curve, but was mostly usable**  
Most users were able to figure out how to register for PI. (**70%** usability)  
Once on the registration page, completed with no problem. (**90%** usability)
- 3 Nomenclature used during completion and submission of web-based data confused users**  
“Meaningful Use” on attestation disclaimer. (**75%** usability)
- 4 Most users failed to complete and submit data via file upload submissions**  
Didn’t remember to go to back data submissions to complete the attestation and objectives. One successful completion. (**45%** usability)

**What does that mean?**

# Backstory

- Meaningful Use is the old program name for Promoting Interoperability
- Nothing about the program itself changed except for its name

# We ask users to submit data on the prototype

Carroll Community Hospital

CCN: #####

Change Organization

Dashboard

Data Submissions

Data Results

Performance

Payments

Administration

< Data Submissions

Program Year

2019

Promoting Interoperability

Submission Period: 01/01/20 – 02/28/20

With Respect to Reporting Period: 01/01/19 – 12/31/19

Current Submission Period: Open

1 Enter

2 Preview

3 Submit

Attestation/ Disclaimer

Promoting Interoperability

Objectives

Promoting Interoperability

Start

Start

Task: Complete and submit your data to CMS

1. Web-based submissions
2. File upload submissions

Start

Pain points

# Seeing “Meaningful Use” was something users did not want to see 🤔

On both pathways, users experienced confusion with the verbiage of the *Attestation Disclaimer*

← PI Data Form

## Promoting Interoperability

### 1 Attestation Information

\* Provide your EHR Certification Number

1234567890

\* Please select the method that will be used for ALL Meaningful Use Objectives

An eligible hospital must choose one of two methods to designate how patients admitted to the Emergency Department (ED) will be included in the denominators of certain Meaningful Use Objectives.

☒ Observation Service Method

☐ All ED Visits Method

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"I had trouble the past year with the language. Some websites are still using meaningful use instead of PI."

- Data Analyst

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"I had trouble the past year with the language. Some websites are still using meaningful use instead of PI."

- Data Analyst

"Language changes are difficult. I may have made a \$4 million mistake for us, but we were granted a hardship exception."

- Data Analyst



**A \$4M cost from old program  
language**

**A mistake that wasn't the user's  
fault**

**Luckily their facility was granted  
a hardship exception**

# So we fixed that right away 🧐

Carroll Community Hospital  
CCN: #####

Change Organization

< PI Data Form

Promoting Interoperability

1

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\* Indicates required field(s)

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E.g. ABC99999999999999

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☐ All ED Visits Method

# Up-to-date program language 📡😊

No more  
“Meaningful Use”  
verbiage

Carroll Community Hospital

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Change Organization

< PI Data Form

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Ad Hoc

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# Up-to-date program language 📡

No more  
“Meaningful Use”  
verbiage

No more old  
program  
language.

Making it very  
clear to users  
what program  
they are  
submitting for.

Carroll Community Hospital

CCN: #####

Change Organization

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Ad Hoc

22



# Lesson from this one finding

**Small things can have big impacts, and sometimes that impact can cost you.**

# Key numbers after usability study

“Very Easy” to understand  
Objective Scores and CQM  
Measure Requirement

**4.6/5**

“Much Easier” to use  
than Legacy

**4.4/5**

“Less” time on task than legacy

**3.2/5**

Aggregate usability  
score

**79%**

**“We listen to our users because  
we know our work makes a  
difference.”**