Web-Based Measure:
Left Without Being Seen

Cassie Jo Watson, PhD, MSN
Quality Improvement Specialist
Health Services Advisory Group (HSAG)
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Today’s Objectives

Review the causes of patients leaving without being seen.

Discuss best practices and strategies used to reduce the “Left Without Being Seen” measure rate.

Demonstrate how to submit OP-22.

OP = Hospital Outpatient Measure
Reasons for Leaving Without Being Seen (LWBS): Identify the Reasons Why

• Triage process
• Long wait times due to ED overcrowding
• Change their minds due to resolved symptoms or other reasons
• Perceived difficulties with the ED staff

Sources:

Consequences for Patients

• Delayed treatment can mean:
  – Sustained illness
  – Pain
  – Death

Source:
Strategies to Reduce LWBS

• After identifying the reason why:
  – Tailor a plan of action.
  – Decrease time to provider by conducting a staffing analysis.
  – Expand the ED with triage and "fast track" lanes.
  – Focus on the patient experience.

Sources:


### Review of the Outpatient Quality Reporting Web-Based Measures

<table>
<thead>
<tr>
<th>Measure Code</th>
<th>Web-Based Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>OP-12</td>
<td>Able to Receive Lab Results Electronically</td>
</tr>
<tr>
<td>OP-17</td>
<td>Able to Track Patients’ Results and Referrals Electronically Between Visits</td>
</tr>
<tr>
<td>OP-22</td>
<td>Patient Left Without Being Seen</td>
</tr>
<tr>
<td>OP-25</td>
<td>Safe Surgery Checklist</td>
</tr>
<tr>
<td>OP-26</td>
<td>Hospital Outpatient Volume on Selected Outpatient Surgical Procedures</td>
</tr>
<tr>
<td>OP-27</td>
<td>Influenza Vaccination Coverage Among Healthcare Personnel</td>
</tr>
<tr>
<td>OP-29</td>
<td>Appropriate Follow-up Interval for Normal Colonoscopy</td>
</tr>
<tr>
<td>OP-30</td>
<td>Colonoscopy Interval for Patients with a History of Adenomatous Polyps</td>
</tr>
<tr>
<td>OP-31</td>
<td>Visual Function within 90 days of Cataract Surgery (Voluntary)</td>
</tr>
<tr>
<td>OP-33</td>
<td>External Beam Radiotherapy for Bone Metastases</td>
</tr>
</tbody>
</table>
OP–22: Left Without Being Seen

• This measure is in the Hospital Outpatient ED—Throughput set.

• Data entry is achieved through the secure side of QualityNet.org via an online tool available to authorized users.

• Is a chart abstracted annual measure

• Submission period is January 1, 2019–May 15, 2019 for 2018 ED visits.
**OP–22 Measure Population**

<table>
<thead>
<tr>
<th>Inclusion Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Numerator: The total number of patients who left the ED without being evaluated by a Physician/Advanced Practice Nurse, or Physician Assistant</td>
</tr>
<tr>
<td>• Denominator: The total number of patients who presented to the ED</td>
</tr>
</tbody>
</table>

Patients who presented to the ED are those who signed in to be evaluated for emergency services.

2017 State and National Percent of LWBS

(Lower percentages are better.)
National Average = 2 Percent

How to Submit OP–22

• Log into the QualityNet Secure Portal
How to Submit OP–22 Pt.2

Choose Your QualityNet Destination

Please select your QualityNet destination to reach the correct login screen for your QualityNet portal.

Select Your QualityNet Destination

Let's Go  Cancel

A federal government website managed by the Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244
Choose Your QualityNet Destination

Please select your QualityNet destination to reach the correct login screen for your QualityNet portal.

Select Your QualityNet Destination

- Secure File Transfer
- CMS Data Element Library
- End-Stage Renal Disease Quality Reporting System
- Ambulatory Surgical Center Quality Reporting Program
- PPS-Exempt Cancer Hospital Quality Reporting Program
- Inpatient Hospital Quality Reporting Program
- Inpatient Psychiatric Facility Quality Reporting Program
- **Outpatient Hospital Quality Reporting Program**
- Quality Improvement Organizations
- QIES Business Intelligence Center
- HQR Next Generation
How to Submit OP–22, Pt.4

Choose Your QualityNet Destination

Please select your QualityNet destination to reach the correct login screen for your QualityNet portal.

Outpatient Hospital Quality Reporting Program

Let's Go  Cancel

A federal government website managed by the Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244
How to Submit OP–22, Pt.5
How to Submit OP–22, Pt.7
How to Submit OP–22, Pt.8

View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)

A structural measure reflects the environment in which providers care for patients. Structural measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes requesting structural measures information will encourage facilities to increase the use of tools, ultimately improving the quality of care provided to Medicare beneficiaries.

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

The Centers for Medicare & Medicaid Services (CMS) Promoting Interoperability Program promotes the meaningful use of certified electronic health record technology (CEHRT) to support patient engagement and the electronic exchange of health information. The program highlights CMS’s commitment to interoperability, patient access to health information to make fully informed health care decisions, and reducing provider burden.

Select a Program

- Inpatient Structural Measures/DACA
- Inpatient Web-Based Measures
- Outpatient Web-Based Measures
- Ambulatory Surgical Center Web-Based Measures
How to Submit OP–22, Pt.9

Outpatient Web-Based Measures

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

Payment Year: Please select a Payment Year

- Select -

- Select -

2020
2019
2018
2017
2016
2015
2014
2013
2012

For more information on the Patient Protection and Affordable Care Act Notice, see Specifications Manual.
How to Submit OP–22, Pt.10

Outpatient Web-Based Measures

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.

Payment Year: Please select a Payment Year

2020

Continue

For Paperwork Reduction Act Notice, see Specifications Manual.
How to Submit OP–22, Pt.11

Web-Based Measures | 2020

Provider Selection
Select one or more providers.

Clear  Back  Continue
How to Submit OP–22, Pt.13

For Hospital Outpatient Quality Reporting participating providers, the Web-Based Measures question(s) and their applicable child question(s) are required in order to fulfill the Annual Payment Update (APU) requirement. The Centers for Medicare & Medicaid Services (CMS) is requesting these items be available for all providers.

**OP-22: Left Without Being Seen**

**Numerator**

- What was the total number of patients who left without being evaluated by a physician/APN/PA?

**Denominator**

- What was the total number of patients who presented to the ED?
How to Submit OP–22, Pt.14

For Hospital Outpatient Quality Reporting participating providers, the Web-Based Measures question(s) and their applicable child question(s) are required in order to fulfill the Annual Payment Update (APU) requirement. The Centers for Medicare & Medicaid Services (CMS) is requesting these items be available for all providers.

**OP-22: Left Without Being Seen**

**Numerator**
- What was the total number of patients who left without being evaluated by a physician/APN/PA?

16

**Denominator**
- What was the total number of patients who presented to the ED?

645
How to Submit OP–22, Pt.15
Thank You!

For more information, contact:

Cassie Jo Watson, PhD, MSN
HSAG Quality Specialist
cjwatson@hsag.com | 813.865.3453
References, Pt.1


References, Pt. 2


References, Pt.3


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