

DEPARTMENT: Clinical Operations Group – Clinical Data & Analytics	POLICY DESCRIPTION: Purging of COMET Core Measure Records
PAGE: 1 of 3	REPLACES POLICY DATED: 11/1/09, 4/1/10, 8/1/14, 1/1/17, 3/1/19
EFFECTIVE DATE: June 1, 2022	REFERENCE NUMBER: COG.COM.003 (formerly QM.COM.003 & CSG.COM.003)
APPROVED BY: Ethics and Compliance Policy Committee	

SCOPE: All Company-affiliated colleagues responsible for performing, supervising or monitoring the Core Measure abstraction process within COMET.

This policy applies to purging of Core Measure records. For information related to correction of non-editable Core Measure data elements, see the Correction of Non-editable Core Measure Data Elements in COMET, COG.COM.002.

PURPOSE: To define a standardized process for purging Core Measure records that do not meet the International Classification of Diseases, (ICD) population definition for the measure in accordance with The Joint Commission (TJC) Data Quality guidelines and the Centers for Medicare & Medicaid Services (CMS) Specifications Manuals.

POLICY: Core Measure records can only be purged in accordance with TJC’s contractual agreement and CMS requirements. Consideration will be given to remove a record from Clinical Outcome Measure Evaluation and Transmission (COMET) when it does not meet the criteria for inclusion. The HCA Healthcare Clinical Data & Analytics Department can approve a facility’s request to purge a record only if it meets the criteria for purging.

1. All purge requests must be:
 - a. approved by the Corporate Clinical Analytics Manager;
 - b. tracked within the COMET application; and
 - c. supporting documentation for the purge request must be attached to the COMET purge record at the time the request is made.
2. Missing or lost medical records do not meet criteria for deleting a record from the COMET database.
3. Records not meeting the ICD population definition and thereby meeting the criteria for purging from COMET are categorized as follows:
 - a. Exempt Status: COMET sources data from the Casemix database that includes all acute care and non-acute care admissions (e.g., Skilled Nursing Facilities, Swing Bed, Residential Psychiatric Units, Inpatient Rehabilitation Facilities, or Hospice). Non-acute care patients are excluded from the ICD population of Core Measures. When the care was provided in a unit which is exempted from Core Measures, the entire record should be purged from all of the Core Measure sets.
 - b. Duplicate Registration: Core Measure data must be abstracted for a single episode of care. When a record is in COMET more than once for the same episode of care, the case

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- with the account number which reflects the care provided during that episode of care should be maintained in COMET and the additional record in COMET should be purged.
- c. Incorrect Status: COMET sources data from the Casemix database that includes all levels of care. Each Core Measure set defines the population it should include and is specific to the level of care in which the services were provided. Records for services provided in an outpatient level of care (e.g., Same Day Surgery, Emergency Department, Endoscopy, Cath Lab, Radiology, etc.) are specifically excluded from all Hospital Inpatient (IP) and Hospital Based Inpatient Psychiatric Services (HBIPS) Core Measures. Records final-billed with Inpatient Status are specifically excluded from all Hospital Outpatient (OP) Core Measures. Records final-billed under the Inpatient Psychiatric Facility Prospective Payment System (IPF PPS) are excluded from IP and OP Core Measures by CMS. Exception: Records final billed under the IPF PPS may still be required by TJC depending on the measure set.
 - d. Other: Each Core Measure has defined criteria for inclusion of a record in the ICD population. COMET sources data from claims data in the Casemix database. A variety of other factors can result in a record falling into a measure set for which it does not meet the ICD population. When this occurs, in order to meet TJC and CMS requirements to include only records meeting the population definitions, the record must be purged. Two common “other” reasons for purging records are:
 - i. Records which have fallen into inappropriate measure sets as the result of a merged outpatient to inpatient claim.
 - ii. Third party payer contractual agreements (e.g., TriCare, Medicare Part B) which requires split billing for a single episode of care.
4. The record will remain in open status until it is either approved or denied and completed in COMET.
 5. Purging a Core Measure record could result in the addition of another case being added during the normalization process. Normalization is a monthly process conducted within the COMET application to ensure that a facility meets the population requirements due to the decision to sample their Core Measure population. If another case is added into the sampling population, the routine abstraction process must be followed.

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PROCEDURE:

Abstractor Responsibilities

1. The COMET abstractor will complete the COMET Record Purge Request within the COMET application.
2. Within the data abstraction screen for the patient, the COMET abstractor will link to a screen in which they will indicate the measure sets(s) from which the record should be purged.
3. The requester will note the purge request category (Exempt, Duplicate Registration, Incorrect Status, Other) and document the reason for the purge in the comments section.
4. The requester will attach a copy of billing, coding, or other medical record documentation that supports the need for the requested purge in the automated COMET Purge/Data Correction Tool attached to the COMET purge record.
5. Purge requests submitted without receipt of the required supporting documentation will be denied.

All purge requests are subject to audit by Clinical Operations Group (COG) and Regulatory Compliance Support.

Corporate Responsibilities

The COG Clinical Analytics Department will:

1. Review all COMET purge requests.
2. Document within COMET the final purge determination.
3. Monitor and trend all purge requests.
4. Maintain a record of purged cases within the COMET application, making it available to TJC, CMS, HCA Healthcare Internal Audit, and other oversight entities upon request.

REFERENCES:

1. The Joint Commission Data Quality Manual
2. CMS Specifications Manual for National Hospital Quality Measures