

The Hospital OQR Times Newsletter



Hospital Outpatient Quality Reporting (OQR) Program

Issue: Winter 2024

In This Issue

Mandatory Hospital outpatient survey measure (OAS CAHPS) data collection begins with CY 2024.

OPPS/ASC CY 2024

Final Rule has published.

Data Deadlines

February 1, 2024:
Q3 2023 Clinical Data
via HQR

February 15, 2023:
COVID-19 Vaccination
Coverage Among
Healthcare Personnel
via NHSN

Hospital Outpatient Survey Measure

Beginning with CY 2024, the Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) survey becomes **mandatory** for the Hospital OQR Program.

OAS CAHPS is a standardized survey instrument used to assess patient experience with outpatient surgical care received at hospital outpatient departments and provides important information to beneficiaries and providers. More specifically, the survey measures:

- Communication and care provided by health care providers and office staff;
- Preparation for the surgery or procedure; and
- Preparations for discharge and recovery.

Hospitals contract with a CMS-approved survey vendor to conduct the survey. A list of approved survey vendors and additional information about the survey is available on the [OAS CAHPS website](#).

Check it Out - CY 2024 Final Rule

The Calendar Year (CY) 2024 Medicare Hospital Outpatient Prospective Payment System (OPPS) and Ambulatory Surgical Center (ASC) Payment System Final Rule published on the [Federal Register](#) November 22, 2023.

The information and requirements applicable to the Hospital OQR Program begin on page 81961 of the [PDF version](#) of the document.

Data Submission Deadlines

Reminder!

The submission **deadline** for the **Quarter 3 2023** reporting period (July 1—September 30, 2023) of **chart-abstracted measure data** into the Hospital Quality Reporting (HQR) system is **February 1, 2024, 11:59 p.m. Pacific Time (PT)**. Submission of Hospital OQR Program Population and Sampling data is voluntary.

The submission **deadline** for the **Quarter 3 2023** reporting period (July 1—September 30, 2023) **OP-38: COVID-19 Vaccination Coverage Among Healthcare Personnel** measure data into the National Healthcare Safety Network (NHSN) system is **February 15, 2024, 11:59 p.m. PT**.

More information on data submission is on the *Measure Deadlines and Tools* page on the [QualityReportingCenter website](#).

Public Reporting

Next scheduled release is January 2024 on Care Compare and the Provider Data Catalog.

Program Support and Resources

The Outpatient Quality Reporting Program Support Team is available by calling **866-800-8756** weekdays from 7 a.m. to 6 p.m. ET.

Also, contact the Hospital OQR Program Support Team online and browse FAQs using the [QualityNet Question and Answer Tool](#).

The next refresh for publicly reported Hospital OQR measure data on *Care Compare* and the Provider Data Catalog occurs in January 2024! The following data will display for this release:

Claims-based measures will display: CY 2020 – 2022 reporting period (January 1, 2020 – December 31, 2022) data for Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy*; and **will display CY 2022 data for Admissions and ED Visits for Patients Receiving Outpatient Chemotherapy and Hospital Visits after Hospital Outpatient Surgery.**

*The first two Quarters of 2020 data for this measure were excluded due to the COVID-19 Public Health Emergency Waiver.

Hospital Outpatient Imaging Efficiency claims-based measures will display for the 3Q 2021 – 2Q 2022 reporting period (July 1, 2021 – June 30, 2022): MRI Lumbar Spine for Low Back Pain, Abdomen CT–Use of Contrast Material, Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac Low-Risk Surgery, and Breast Cancer Screening Recall Rates.

Chart-abstracted measures will display for the 2Q 2022 – 1Q 2023 reporting period (April 1, 2022 – March 1, 2023) data: Fibrinolytic Therapy Received Within 30 Minutes of Emergency Department (ED) Arrival, Median Time to Transfer to Another Facility for Acute Coronary Intervention, Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 minutes of Arrival, Median Time from ED Arrival to ED Departure for Discharged ED Patients Reported Rate, and Median Time from ED Arrival to ED Departure for Discharged ED Patients Psychiatric/Mental Health Patients.**

**Data for the Median Time from ED Arrival to ED Departure for Discharged ED Patients Psychiatric/Mental Health Patients is displayed on Provider Data Catalog only.

Web-based measures reported via HQR will display CY 2022 reporting period data: Patient Left Without Being Seen, Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients, and Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery.

COVID-19 Vaccination Coverage Among Healthcare Personnel will display data for 3Q 2022.

An email notification will be released when the refreshed data are publicly available.

Program Support

To find additional information, tools, and resources—such as the data submission checklist to meet Hospital OQR Program deadlines—visit the [QualityNet](#) and [Quality Reporting Center](#) websites.

You can also view past webinars by visiting the Archived Events page of the [Quality Reporting Center website](#).