Hospital Outpatient Quality Reporting (OQR) Program

#### In This Issue

# Data Submission Deadlines May 1, 2024: Q4 2023 Clinical Data

May 15, 2024: Q4 2023 COVID-19 Vaccination Coverage Among Healthcare Personnel

May 15, 2024: CY 2023 Reporting Period Web-Based Measures

May 15, 2024: CY 2023 Reporting Period STEMI eCQM

# Abstraction Guidance Spotlight

CART and the Sex Data Element

**Specifications Manual 18.0** Scheduled for release in July 2024.

# Program Support and Resources

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

The Hospital OQR Program Support Team is also available online using the QualityNet Q&A Tool.

### **Data Submission Deadlines**

Issue: Spring 2024

#### Reminder!

The **submission deadline** for reporting **Quarter 4 (Q4) 2023** (October 1—December 31, 2023) clinical data for *Median Time from ED Arrival to ED Departure for Discharged ED Patients*, and *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 ED Arrival* measures into the Hospital Quality Reporting (HQR) system is **May 1, 2024**, **11:59 p.m. Pacific Time (PT)**. Submission of Hospital OQR Program Population and Sampling data is **voluntary**.

The **submission deadline** for reporting **calendar year (CY) 2023** (January 1—December 31, 2023) web-based measure data for *Left Without Being Seen, Endoscopy/Polyp Surveillance:* 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 (voluntary) into the HQR system is May 15, 2024, 11:59 p.m. PT.

The **submission deadline** for reporting **CY 2023** (January 1—December 31, 2023) *ST-elevation myocardial infarction (STEMI) Electronic Clinical Quality Measure (eCQM)* data, for any quarter(s), into the HQR system is **May 15,2024, 11:59 p.m. PT**. Submission is **voluntary** for the CY 2023 reporting period.

The **submission deadline** for reporting **Q4 2023** (October 1—December 31, 2023) *COVID-19 Vaccination Coverage Among Healthcare Personnel* data into the National Healthcare Safety Network (NHSN) system is **May 15, 2024, 11:59 p.m. PT.** 

More information on data submission can be found on the Measure Deadlines and Tools page on the Quality Reporting Center website.

# Abstraction Guidance Spotlight: CART and the Sex Data Element

Hospitals may choose one of two options for reporting clinical data beginning with the Q3 **2023 reporting period** (July 1 – September 30, 2023):

- 1. If the hospital opted to install the CMS Abstraction and Reporting Tool (CART)-Outpatient 1.23.0 **Upgrade**, then the hospital will manually modify the *Sex* data element field of the XML file exports.
- 2. If the hospital opted to install the **Initial** Installation of CART 1.23.0, then the hospital will select from the numerical values for the *Sex* data element.

Initial Installation of CART 1.23.0 is the more efficient option as future upgrades will be compatible with this version of CART.

More information about CART Version 1.23.0 is available on the QualityNet website.

For clinical data beginning with **July 1, 2023, encounters,** the *Sex* data element has the following Allowable Values: 1 – Male, 2 – Assigned/Designated Male at Birth, 3 – Female, 4 – Assigned/Designated Female at Birth, 5 – LGBTQ, 6 – Unknown.

For clinical data beginning with **July 1, 2024, encounters,** the *Sex* data element will be replaced by the *Sex assigned at birth* data element with Allowable Values: 1 – Female, 2 – Male, 3 – Intersex, 4 – None of the Above, Other, or Unable to Determine, 5 - Preferred Not to Answer.

The definition for the *Sex assigned at birth* data element is the patient's biological sex assigned at birth. Collecting the sex that is assigned at birth is useful as basic demographic information when used with the *Gender Identity* data element.

#### **Notes for Abstraction:**

- The collection of this data element can be self-administered or intervieweradministered.
- Intersex is a general term used to refer to individuals born with, or who develop naturally in puberty, biological sex characteristics that are typically male or female.
- If the patient does not describe themselves as female, male, intersex, describes themself in other terms, *or* if the medical record does not include information about the patient's biological sex assigned at birth, select value 4 None of the Above, Other, or Unable to Determine.
- If there is contradictory documentation, or if the sex assigned at birth is not documented or not available, select value 4 – None of the Above, Other, or Unable to Determine.

More information on the numerical values can be found in the Hospital OQR Program Specifications Manual on the <u>QualityNet website</u>.

## **Coming Soon: Specifications Manual Version 18.0**

The Hospital OQR Program Specifications Manual Version 18.0, for CY 2025 (January 1, 2025–December 31, 2025) encounters will be available on the <u>QualityNet website</u> in July 2024. Options are available to download the entire manual, download the release notes, or view specific sections of the manual.

### **Program Support**

To find additional information, tools, and resources—such as the data submission checklist to meet Hospital OQR Program deadlines—visit the <u>QualityNet</u> and <u>Quality Reporting Center</u> websites.