



**Hospital IQR Program
APU Reconsideration Process
Reconsideration Requests - Phase 1
FY 2020 Payment Determination**

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Speakers

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Purpose

The purpose of today's presentation is to provide information regarding the Centers for Medicare & Medicaid Services (CMS) Hospital Inpatient Quality Reporting (IQR) Program annual payment update (APU) reconsideration process.

CMS is currently making APU decisions that will affect a hospital's Medicare reimbursement between **October 1, 2019 and September 30, 2020**. This time frame is known as fiscal year (FY) 2020.

Objectives

By the end of today's presentation, participants will be able to:

- Understand the Hospital IQR Program requirements and the APU reconsideration process.
- File an APU Reconsideration Request Form with CMS.

FY 2020 Hospital IQR Program Payment Decisions

For FY 2020, CMS is notifying hospitals subject to Hospital IQR Program payment reductions under the inpatient prospective payment system (IPPS) in two phases.

| Phase 1 March 2019 | Phase 2 May 2019 |
|---|---|
| Population and Sampling Quarters 1–3 of calendar year (CY) 2018 | Population and Sampling Quarter 4 of CY 2018 |
| Clinical and Perinatal Care (PC-01) Quarters 1–3 of CY 2018 | Clinical and Perinatal Care (PC-01) Quarter 4 of CY 2018 |
| Healthcare-associated infection (HAI) reported via National Healthcare Safety Network (NHSN) Quarters 1–3 of CY 2018 | HAI reported via NHSN Quarter 4 of CY 2018 |
| Influenza Vaccination Coverage Among Healthcare Personnel (HCP) reported via NHSN Quarter 4 of CY 2017 and Quarter 1 of CY 2018 | electronic Clinical Quality Measure (eCQM) data Submit 4 of the 15 CY 2018 measures for one self-selected quarter (Quarter 1, 2, 3, or 4) |
| | All other requirements for FY 2020 |

Phase 1

Program Requirements

- Submit aggregate Population and Sample size counts for Quarters 1 through 3 by the submission deadlines.
- Submit clinical process of care measure data, including PC-01, for Quarters 1 through 3 by the submission deadlines.
- Submit HAI measure data for Quarters 1 through 3 by the submission deadlines.
- Submit HCP measure data for Quarter 4 2017 and Quarter 1 2018 by May 15, 2018.

Phase 1 Notification

CMS sent APU determination notification letters on March 7, 2019, to hospitals not meeting one or more of Phase 1 requirements:

- APU reconsideration requests for Phase 1 decisions are due to CMS **30** days from the date of receipt of the notification letter.
- Hospitals filing an APU reconsideration request based on the March 2019 Phase 1 notification letters will be mailed the CMS decision in **May 2019**.

APU Reconsideration Process

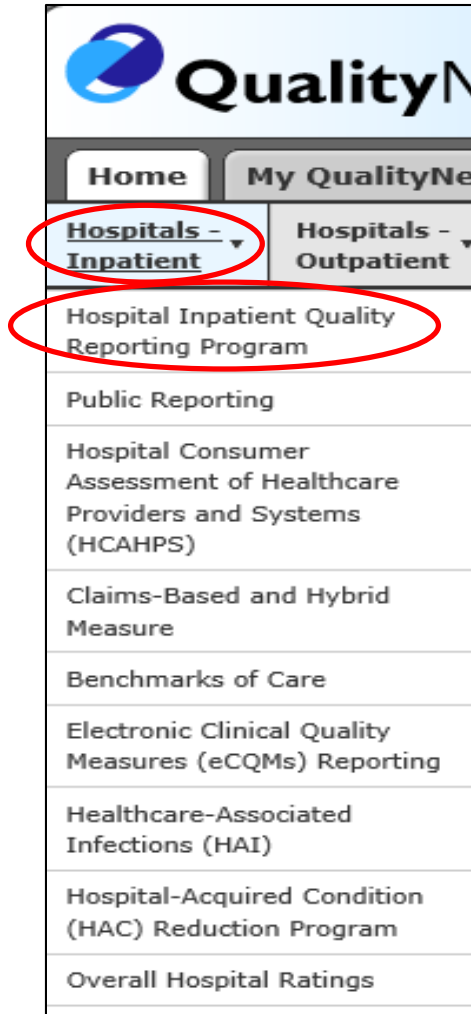
QualityNet Location

The overview for the APU reconsideration process for the Hospital IQR Program and the APU Reconsideration Request Form are available on the [Reconsideration Overview](#) web page on *QualityNet*.

<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1184627418989>

QualityNet

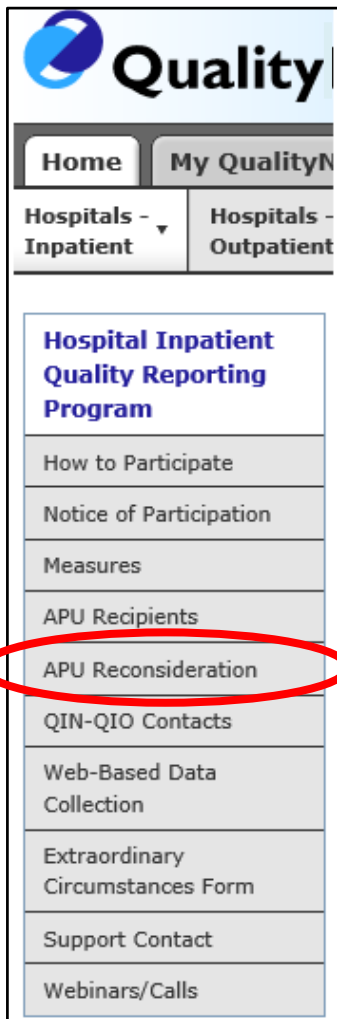
Hospital Inpatient Location



- From the *QualityNet* Home page, select the **Hospitals–Inpatient** drop-down.
- In the drop-down menu, select the **Hospital Inpatient Quality Reporting Program** link. This will direct you to the *Hospital IQR Program Overview* web page for inpatient hospital information.

QualityNet

APU Reconsideration Process Location



Access the Hospital IQR Program APU reconsideration information on *QualityNet* by selecting the **APU Reconsideration** link from the left-side navigation pane. This will direct you to the *Reconsideration Overview* web page.

Reason for APU Reconsideration Request

- Provide the CMS-identified reason your facility did not meet the APU requirements.
- State the specific reason(s) for believing your facility did meet the quality reporting program requirement(s) and should receive the full APU.
- Fill out the APU Reconsideration Request Form **completely** and **accurately**; all fields with an (*) are mandatory.
- Include any additional information or documentation by attaching a PDF file with the request form.
- Submit the request form via the *QualityNet Secure Portal* to the Secure File Transfer “APU” group, secure fax to (877) 789-4443, or email to QRSupport@hcqis.org.

Filing a Provider Reimbursement Review Board (PRRB) Appeal

When a hospital is dissatisfied with the result of the CMS APU reconsideration, the hospital may file an appeal with the PRRB.

- The appeal may be filed **only** after the hospital has submitted a request for reconsideration and then received an adverse decision on the request.
- A hospital may file an appeal up to **180 days** following the Hospital IQR Program reconsideration determination notification date.
- Details about the PRRB appeal process can be found on the CMS website at www.cms.gov/Regulations-and-Guidance/Review-Boards/PRRBReview/index.html?redirect=/PRRBReview.

Questions

Please submit all questions regarding the APU reconsideration process and the Hospital IQR Program to:

InpatientSupport@viqrc1.hcqis.org