



Outpatient Quality Reporting Program

Support Contractor

Help, I'm New: What Do I Do?

Questions and Answers

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- Question:** As a Critical Access Hospital (CAH), we do not bill based on OPPS guidelines. What is our obligation towards this reporting and possible reduction in payments?
- Answer:** For the purposes of the Hospital OQR Program, CAHs are not obligated to participate, and all reporting is voluntary. CAHs are not obligated to submit data and are not subject to a reduction in payment update if they elect not to do so.
- Question:** Do you anticipate there will be a change to that policy? I am asking because we got behind the “eight ball” with PQRS, as that went from being exempt to being required to participate, and we were not prepared to do so.
- Answer:** CMS has given us no indication of their intentions with regard to requiring CAHs to participate.
- Question:** On page 11 as it relates to the preview report, are we notified when the report is available on the website? If so, I am not being notified.
- Answer:** A ListServe notification is sent out to notify the hospital community that their Preview Report is available via the QualityNet Secure File Transfer in their inbox. You will need the appropriate credentials to access the Secure File Transfer. Also, a reminder ListServe is sent out 15 days prior to the close of the preview period. This report is only available for preview for 30 days.

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- Question:** The NOP is only done once, right?
- Answer:** You are correct; the NOP is only done once and is active until a facility submits a withdrawal form which can be found on the QualityNet Secure Portal. The deadline for withdrawing from the Hospital OQR Program for the applicable calendar year is August 31.
- Question:** Will a presentation of this nature be provided for IPQM as well in the near future?
- Answer:** We apologize; we cannot speak to any program other than the Hospital OQR Program.
- Question:** What does it mean by mismatched data elements?
- Answer:** During validation, the CMS Clinical Data Abstraction Center (CDAC) re-abstracts the records submitted by the hospital. A mismatch occurs when the data abstracted by the hospital and the data abstracted by the CDAC are different.
- Question:** Where do you find the top ten mismatched data elements again?
- Answer:** Other than the list found on the slide for this presentation, there is not a published list of the top ten mismatches.
- Question:** So to clarify, I am a CAH hospital. If I have fewer than five inpatient cases and five outpatient cases that qualify, I do not have to abstract them; all I have to do is complete the population and sampling, keeping in mind that CP and MI are combined?
- Answer:** For the Hospital Outpatient Program, submission by a CAH is voluntary, and this includes the population and sampling. You may have other requirements, such as the MBQIP Program. The five or fewer rule applies to the Outpatient Program. You are correct that AMI and CP are combined for the five or fewer rule. We cannot advise on the Inpatient Program, but you may choose to contact them at 844.472.4477.
- Question:** It would be helpful to have a list of the measures and which entity requires their submission, i.e., CMS, Joint Commission, or both. Is this somewhere on QualityNet?
- Answer:** For the OQR Program, there are no measures submitted to The Joint Commission. For a list of the measures, submission dates, and how they are reported, you can access the following link:
<http://www.qualityreportingcenter.com/hospitaloqr/information>

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Question: Regarding what the Security Administrator does in monitoring QualityNet usage, how would an SA do this?

Answer: The SA would assign roles, maintain proper security and confidentiality, and has the ability to reset passwords.

Question: Are we required to report all of the measures mentioned here, or can we choose which ones to report on?

Answer: To meet the program requirements, hospitals report all of the measures for this program with the exception of OP-31, which is voluntary.

Question: Where on QualityNet are the submission deadlines posted?

Answer: On QualityNet, they will be under Hospitals-Outpatient, under the Data Submission tab or at this link: <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1228765194893>. On our website, qualityreportingcenter.com, they will be under Outpatient and the Program Information tab or at this link: <http://www.qualityreportingcenter.com/hospitaloqr/information/>

Question: Where can I find instructions on using the web-based tool for OP 12-33?

Answer: Please feel free to call our Help Desk at any time if you need us to walk you through this process at 866.800.8756.

Question: How long are the previously recorded events kept on the website?

Answer: The archived webinars are not deleted.

Question: Can you give me a contact number for CMS who is in charge of measure selection/enrollment?

Answer: You can call the Support Contractor at 866.800.8756, and they can, based on your problem, get you in touch with the most appropriate person.

Question: Didn't we just get an email saying that web-based measures can't be entered until sometime in March?

Answer: Yes, CMS just sent a ListServe stating that the Calendar Year 2018 Payment Determination for submission of Hospital Outpatient Quality Reporting (OQR) Program measure data into the web-based tool is currently unavailable in the QualityNet Secure Portal due to the inability to select Payment Year 2018. A second ListServe will be sent when this function is available. But remember, the OP-27 measure is submitted to the NHSN platform and is unaffected by this issue.