



# **Hospital Outpatient Quality Reporting (OQR) Program Reconsideration Process CY 2017**

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# Purpose

To provide information regarding:

- The Centers for Medicare & Medicaid Services' (CMS') Hospital OQR Program Reconsideration Process for the Calendar Year (CY) 2017 Payment Determination.

# Objectives

At the end of the presentation, participants will be able to:

- Identify the Hospital OQR Program requirements and the Reconsideration Process.
- Submit a Reconsideration request with CMS.
- Locate the process for filing an appeal.

# OPPS-Eligible Hospitals

There are currently 3,228 Outpatient Prospective Payment System (OPPS) hospitals eligible to participate in the CY 2017 Hospital OQR Program to receive the Annual Payment Update (APU).

# Measures for the CY 2017 Hospital OQR Payment Determination

Measures	Reference Period
Chart-abstracted	Quarter 3 (July 1–September 30) 2015 Quarter 4 (October 1–December 31) 2015 Quarter 1 (January 1–February 29) 2016
Web-based submitted via QualityNet	January 1–December 31, 2015
Web-based submitted via National Healthcare Safety Network (NHSN)	October 1, 2015–March 31, 2016

# Program Requirements

- Register and maintain a Security Administrator for the QualityNet Secure Portal.
- Complete and submit a Notice of Participation (NOP) through the Secure Portal.
- Submit Clinical Data for Q3 2015, Q4 2015, and Q1 2016.
- Submit all web-based measures by May 15, 2016.
- Obtain at least a 75% validation score, if selected.

# Notification

Notification letters were sent on October 19, 2016, to hospitals not meeting one or more of the Hospital OQR Program requirements.

# Reconsideration Process: *QualityNet* Location

The Reconsideration Overview process for the Hospital OQR Program is available on the Reconsideration Overview page on *QualityNet*:

<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1228694343441>



# QualityNet: Hospital OQR Location



- From the *QualityNet* home page, select the **Hospitals – Outpatient** drop-down menu.
- In the drop-down menu, select the **Hospital Outpatient Quality Reporting Program** link. This will direct you to the Hospital OQR Program Overview page.

# QualityNet:

## Reconsideration Process Location

Hospitals - Inpatient	Hospitals - Outpatient
<b>Hospital Outpatient Quality Reporting Program</b>	
How to Participate	
Outpatient Quality Reporting Measures	
Deadlines	
APU Determinations	
<b>APU Reconsideration</b>	
Support Contact	
Extraordinary Circumstances Form	

Access the Hospital OQR 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 page.

# Submitting Your Reconsideration Request (1 of 2)

- The form is due by **February 1, 2017**.
- Fill out the form **completely** and **accurately**.
  - All fields with an asterisk (\*) are mandatory.
- Provide the CMS-identified reason why your facility did not meet the APU requirement (from the CMS notification letter).

# Submitting Your Reconsideration Request (2 of 2)

- Include the specific reason(s) for believing that your facility did meet the program requirement(s) and should receive the full APU.
- Submit the signed Reconsideration Request Form via the QualityNet Secure Portal to the Secure File Transfer “APU” group.
- Alternatively, the form may be submitted via secure fax to 877.789.4443 or by email to [QRSupport@hcqis.org](mailto:QRSupport@hcqis.org).

# CMS Response

- Following receipt of a request for Reconsideration, CMS will:
  - Send an email acknowledgement to the designated contact.
  - Provide a formal response notifying the hospital of the outcome of the Reconsideration process.
- CMS expects the process to be completed within 90 days following the deadline for submitting Reconsiderations.

# Filing a PRRB Appeal

If a hospital is dissatisfied with the result of CMS' Reconsideration decision, the hospital may file a Provider Reimbursement Review Board (PRRB) appeal.

- A PRRB appeal can only be submitted after the hospital has submitted a request for Reconsideration and received a decision on the request.
- Hospitals can submit PRRB appeals up to 180 days following the Hospital OQR Reconsideration notification date.
- Details about the PRRB process can be found on the CMS website at:

[https://www.cms.gov/Regulations-and-Guidance/Review-Boards/PRRBReview/index.html?redirect=/PRRBReview/02\\_PRRB\\_Instructions.asp](https://www.cms.gov/Regulations-and-Guidance/Review-Boards/PRRBReview/index.html?redirect=/PRRBReview/02_PRRB_Instructions.asp)

# Questions

Please submit all questions regarding the Reconsideration process and the Hospital OQR Program by phone at 866.800.8756 or via email at: <https://cms-ocsq.custhelp.com/>.

