



# Outpatient Quality Reporting Program

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## Support Contractor

### Your Data Is Showing: Public Reporting

#### Questions & Answers

**Moderator:**

Dianne Glymph, MLS

**Speaker:**

Pam Harris, RN, BSN

**September 20, 2017**

**2:00 p.m.**

**Question:** Are there additional resources available for the interpretation of an organization's CMS data?

**Answer:** Absolutely. Additional resources can be found on the home page of the QualityNet.org website under **Headlines** and will be discussed coming up in this presentation. You can also contact us at 866.800.8756 if you have any specific questions you would like to discuss.

**Question:** We received a letter that NHSN data does not have to be submitted any longer for 2017 due to the hurricanes. Is this true? This will start back up in January 2018.

**Answer:** As of this date, CMS has issued blanket Extraordinary Circumstances Exemptions for counties or parishes located in Louisiana, Texas, and Florida. If you received this letter and are identified as one of the counties/parishes that has a disaster declaration, then the requirements for the NHSN have been waived for the Payment Year listed in your letter. Outpatient submission has been waived if you are in a disaster waiver area. Please call the support contractor if you have questions at 866.800.8756.

**Question:** Can you advise when the IPFQR Hospital Compare data will be ready for review?

**Answer:** The IPF preview will be released in early October. For additional information on the IPFQR Program specifications, please contact IPF Quality Reporting directly at [IPFQualityReporting@hcqis.org](mailto:IPFQualityReporting@hcqis.org).



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- Question:** For Footnote 1, does the information show on our preview report, even though it's not publicly reported on Hospital Compare? Ex: For OP-23, we had 3 cases with 66% compliance.
- Answer:** Data with a Footnote 1 will show on the preview report but will be covered with a "Not Available on Hospital Compare." This is true for all measures except the Outpatient Imaging Efficiency (OIE) measures, i.e., OP-8. On both the preview report and Hospital Compare, the OIE measure data is covered with a "Not Available" and a Footnote 1 should it meet the criteria of low case count.
- Question:** Is there more in-depth training on these abstractions through webinars or recordings?
- Answer:** We did a webinar this past June on common issues with abstraction. You can find the slides, transcripts, and recording at <http://www.qualityreportingcenter.com/hospitaloqr/events/>.
- Question:** Did I miss the process to follow if you find you did submit erroneous data?
- Answer:** The preview period does not serve as a correction period. We encourage users to submit data early in the submission process so they have ample time to review prior to the submission window closing.
- Question:** Does CMS know how frequently the public is actually reviewing the Hospital Compare website, vs. other hospitals that review the data?
- Answer:** We do not have statistical information regarding the frequency of public access to the Hospital Compare website; however, this is a good question to submit to the Hospital Compare contractor at [HospitalCompare@hsag.com](mailto:HospitalCompare@hsag.com).
- Question:** Does OP-27 include contract staff or just hospital employees?
- Answer:** Yes, it would include contract staff. For more information, please see the [NHSN website](#).
- Question:** The cataract measure is not required, correct?
- Answer:** You are correct. OP-31 remains a voluntary measure at this time.
- Question:** Where can I get the claims detail for the claims-based measures, i.e., OP-13?



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**Answer:**

For the Outpatient Imaging Efficiency Measures, please submit a question on QualityNet.org under Questions and Answers (located on the right-hand side of the QualityNet home page) and include the facility CCN along with the measure requested.