



Hospital Outpatient Quality Reporting Program

Support Contractor

CY 2018 OPPTS/ASC Final Rule: Hospital Outpatient Quality Reporting (OQR) Program

Questions & Answers

Moderator:

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- Question:** If these measures are removed for the calendar year (CY) 2020 payment determination, does that mean chart abstraction would stop for discharges in calendar year 2018?
- Answer:** No; you will collect and report data for the clinical measures through the first quarter of 2018, which are encounter dates January 1 through March 31, 2018. This is due to 1Q 2018 being part of the **2019** payment determination. For the web-based measures OP-25 and OP-26, you will report your 2017 data. However, you will no longer collect data beginning January 1, 2018 on these two web-based measures.
- Question:** Can someone tell me where in print I can find the collecting and reporting information so that I can read what quarters comprise the CY 2020 payment determination?
- Answer:** This information is currently being updated, and you can find this information on our website, www.qualityreportingcenter.com, shortly.
- Question:** Did I read that slide correctly that the chart-abstracted measures are being removed for CY 2020 (not payment year 2020)?
- Answer:** The chart-abstracted measures are finalized for removal for the **CY 2020 payment determination** and subsequent years. As such, OP-1, -4, -20, and -21 data should be collected through Q1 2018 for encounter dates of January 1 through March 31, 2018. Data will no longer need to be collected for these measures after March 31, 2018. Additionally, you can listen to this webinar again on our website within 24 hours. Go to the



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Archived Events tab for the Hospital OQR Program on our website, qualityreportingcenter.com, or use this direct link:
<https://www.qualityreportingcenter.com/hospitaloqr/events/>.

- Question:** Do the validation quarters match payment determination years? I see on QualityNet validation quarters for CY 2019 include Q1, 2, 3, and 4 of 2017, so one would assume CY 2020 includes Q1, 2, 3, and 4 of 2018.
- Answer:** Yes, you are correct.
- Question:** Have the quarters applicable to the payment determination been changed recently?
- Answer:** No; there have been no recent changes to the payment determination quarters.
- Question:** Have these changes to the OQR Program been communicated to the Medicare Beneficiary Quality Improvement Project (MBQIP) folks? CAHs report on many of these for MBQIP.
- Answer:** The MBQIP program is separate and independent of the Hospital Outpatient Quality Reporting Program. However, they are aware of the finalized changes for this program.
- Question:** If the measures removed are effective with CY 2020, why would OP -1,-4, -20, and -21 need to have data collected for 1st Q 2018?
- Answer:** The changes are finalized beginning with the CY 2020 payment determination. Quarters 2, 3, and 4 2017 and quarter 1 2018 affect the **2019** payment determination.
- Question:** Is OP-31 voluntary or mandatory?
- Answer:** OP-31 remains voluntary. There were no finalized changes for this measure.
- Question:** Does the CY payment determination relate to CY 2018 data?
- Answer:** Yes; OP-1, -4, -20, and -21 data should be collected through Q1 2018 (encounter dates of January 1 through March 31, 2018). These data affect the CY 2019 payment determination. Clinical data submission for CY 2020 will include Q2, Q3, Q4 2018 and Q1 2019.



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- Question:** Does this mean we need to collect and submit the removed measures for Q1 2018 discharges?
- Answer:** Yes; you are correct. You will abstract data for OP-1, -4, -20, and -21 for **1Q 2018**, as this quarter is part of the **2019** payment determination.
- Question:** When will the Specifications Manual be updated to reflect the new finalized Hospital OQR Program measures for the CY 2020 payment determination? Currently, version 11.0 is the only version available on the QualityNet website.
- Answer:** The updated manual will be posted to QualityNet on or before January 1, 2018. A ListServe will be sent out to notify you when the v11.0a manual has been posted.
- Question:** Please remind me of the time frame of data that would be reflected in the CY 2020 payment determination.
- Answer:** For the clinical data, the CY 2020 payment determination includes 2Q 2018, 3Q 2018, 4Q 2018, and 1Q 2019.
- Question:** Our vendor told us that OP-20 and OP 21 will be turned off in their system on 12/31/17 and that we do not need to collect for the first quarter of 2018.
- Answer:** For clinical data and population and sampling: OP-1, -4, -20, and -21 data should be collected through Q1 2018 for encounter dates of January 1 through March 31, 2018. The reason for this is that Q1 is the last quarter associated with the CY **2019** payment determination. Data will no longer need to be collected for these measures after March 31, 2018.
- Question:** We need to know now if there are any changes that must be implemented as of January 1, 2018 in order to satisfy program requirements for collection beginning on January 1, 2018.
- Answer:** For clinical data and population and sampling: OP-1, -4, -20, and -21 data should be collected through Q1 2018 for encounter dates of January 1 through March 31, 2018. Data will no longer need to be collected for these measures after the Q1 submission. For web-based measures submitted to QualityNet: OP-25 and OP-26 data for encounters occurring in 2017 should be submitted to QualityNet in 2018 by the submission deadline of May 15, 2018. Data will no longer need to be collected for these measures after that time.



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- Question:** This is surprising to me that we include Q1 of 2018. Can you explain why we are including Q1 2018?
- Answer:** We include Q1 2018 because it is the last quarter associated with the CY **2019** payment determination.
- Question:** What is the best way to get a password reset with NHSN if it has been over 60 days?
- Answer:** First, try to log in to the system. If you are unable to log in, please contact their helpdesk directly at NHSN@cdc.gov.
- Question:** Where can I find a chart or information which shows CY payment determination encounter and reporting dates for chart review?
- Answer:** You can find this information on qualityreportingcenter.com at: <https://www.qualityreportingcenter.com/hospitalogr/information/>.
- Question:** What about OP-26 and OP-25; when do we stop reporting them?
- Answer:** For the measures OP-25 and OP-26, data for encounters occurring in 2017 should be submitted via the online submission tool through QualityNet by May 15, 2018. Data will no longer need to be collected for these measures after that time.
- Question:** What is the acute facility performance year for the CY 2020 determination?
- Answer:** The clinical data submission for the CY 2020 payment determination includes Q2 2018, Q3 2018, Q4 2018, and Q1 2019.
- Question:** What is the time frame for a patient to receive pain meds for long bone fractures?
- Answer:** For measure-specific questions, please use the Question and Answer tool in QualityNet. The measure writers will then be able to directly respond to your question.
- Question:** Will chart abstraction for all the measures being discontinued begin with January 1, 2018 discharges?
- Answer:** For clinical data and population and sampling: OP-1, -4, -20, and -21 data should be collected through Q1 2018 for encounter dates of January 1 through March 31, 2018. Data will no longer need to be collected for these



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measures after that Q1 submission. For the web-based measures submitted to QualityNet: OP-25 and OP-26 data for encounters occurring in 2017 should be submitted to QualityNet in 2018 by the submission deadline of May 15, 2018. Data will no longer need to be collected for these measures after that time.

- Question:** Will CMS be turning off the retired measures for all hospitals?
- Answer:** The system will update according to the submission requirements.
- Question:** Will MBQIP align with removal of measures and time frames?
- Answer:** You will need to contact the MBQIP Program directly. Here is their web address: <https://www.ruralcenter.org/tasc/mbqip>.
- Question:** Is OP-18c an eCQM or abstracted measure?
- Answer:** OP-18c is a chart-abstracted measure.
- Question:** How would a patient declining fibrinolytic therapy be pulled electronically?
- Answer:** The OP-2 measure as a possible eCQM has not yet been developed.
- Question:** How does Hospital Compare differ from data.medicare.gov?
- Answer:** Great question! All data that is on Hospital Compare is also on data.medicare.gov. The difference is that Hospital Compare is a public site that emphasizes consumer-friendly language with easily understandable graphs, definitions, etc. The data on data.medicare.gov is only provided in downloadable formats such as csv with no graphs, consumer-friendly descriptions, etc.
- Question:** Confirming that OP-1, OP-4, OP-21, and OP-26 will need to be collected and submitted through March 31, 2018?
- Answer:** Yes. OP-1, -4, -20, and -21 data should be collected through Q1 2018 for encounter dates of January 1 through March 31, 2018. Data will no longer need to be collected for these measures after that Q1 submission.