



# Hospital Outpatient Quality Reporting Program

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## Support Contractor

### Improving Quality with the Hospital Outpatient Quality Reporting (OQR) Program

#### P.M. Questions and Answers

##### **Moderator:**

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##### **Speaker:**

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**2 p.m.**

- Question 1: How do we get the slides so we can take notes on them?
- Answer 1: You can find the slides for today's event at: [www.qualityreportingcenter.org](http://www.qualityreportingcenter.org). In the Upcoming Events area on the right side of the page, click the link for today's presentation. The slides are available on the bottom of the page.
- Question 2: Where can we find information on the webinar given last month for the QualityNet reporting information?
- Answer 2: All webinars presented by the Support Contractor are posted on the [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com) website. The recorded version, as well as the written transcripts, is available approximately three weeks after the actual event. Archived events are located at <http://www.qualityreportingcenter.com/hospitaloqr/events/>. The first webinar listed is the April 15 webinar, and the recording and transcripts are available.
- Question 3: Where can we find the OP measures that have retired?
- Answer 3: Please refer to the OPPS Final Rule. There is a link to the Final Rule available on the QualityNet website for your convenience.
- Question 4: Can you tell me what the maximum penalty is for non-submission of Hospital OQR Program required measures for CY 2015? How about CY 2016 and 2017? Thanks!

# Hospital Outpatient Quality Reporting Program

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## Support Contractor

- Answer 4: The amount is stated in the Final Rule on a yearly basis. Generally, a facility will lose two percent of their annual payment update for non-participation.
- Question 5: Why is it important to view our data on *Hospital Compare* if I already know what our performance was?
- Answer 5: The data reported on *Hospital Compare* is for retrospective review. It provides a means by which your hospital can compare its performance with other facilities within your state. Also, it may help to identify quality improvement opportunities if issues are reported over the rolling quarters that are posted.
- Question 6: When is the last quarter the surgery data is required to be abstracted?
- Answer 6: OP-6 and OP-7 were required to be abstracted until December 31, 2014. These data were due no later than May 1, 2015. Beginning with January 1, 2015, facilities no longer are required to submit surgery data.
- Question 7: Is the Question and Answer tool on QualityNet working? I have had very poor return from my questions.
- Answer 7: Yes, the tool is still active; however, due to the large number of questions that are submitted, a time delay should be expected. If you have additional questions, you are more than welcome to contact the Support Contractor at 866.800.8756.
- Question 8: Are OP-6 and OP-7 voluntary after January 2015? Please elaborate on the topic.
- Answer 8: No, OP-6 and OP-7 have been removed effective with January 1, 2015, encounters. Neither measure will be available for voluntary data entry moving forward.
- Question 9: Why does the OQR Program Provider Participation Report contain OP surgery cases for 1Q 2015 since we no longer abstract OP-6 and OP-7?
- Answer 9: This is due to programing, The surgical cases will remain on the reports until a new program release in October 2015. Although the cases are seen on the reports, the surgical cases OP-6 and OP-7 are no longer to be reported. If a facility uses the CART tool, the surgical measures also will be noted there but will not be submitted.
- Question 10: What qualifications did the greeter in the ED example have?
- Answer 10: For this particular facility we are unsure. From my experience in the ED, the greeter can be a volunteer or an ED tech. They are only assisting with the patient flow, generally not making any medical decisions.
- Question 11: Will a facility receive the two percent APU increase if OP-29 and OP-30 measures did not achieve a 100 percent compliance rate?

# Hospital Outpatient Quality Reporting Program

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## Support Contractor

- Answer 11: Yes. Facilities will not receive a reduction in their APU even if they do not achieve a 100 percent compliance rate for OP-29 and OP-30. As long as you report any data on these measures, you will receive full APU, that is, if all other program requirements are met as well.
- Question 12: Are ED or Outpatient experience measures expected to be part of OQR?
- Answer 12: We are unclear what you mean by experience measures. Please give the Support Contractor a call at 866.800.8756 so we can accurately respond to your questions.
- Question 13: Are there any abstraction certification programs available? If yes, where can these programs be found? Thank you.
- Answer 13: The Support Contractor is presenting an Abstraction 101 webinar on June 17, 2015. Otherwise, we do not offer, nor are we aware of, any abstraction certification programs.
- Question 14: Since AHRQ has developed inpatient CAHPS and pediatrics CAHPS measures, are ED or outpatient CAHPS measures expected any time soon?
- Answer 14: The HCAPS survey is planned for the future. But at this time, there is no involvement in the surveys for the Hospital OQR Program.
- Question 15: I'm trying to register on [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com) but keep getting the error message "the login information you have entered is incorrect."
- Answer 15: This website does not require registration. If you are having difficulties entering the secure QIO section of the website, please contact the Support Contractor to have your account reset.

END

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