IPPS Measure Waivers and Extraordinary Circumstances Exemptions

Questions and Answers

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Question 1: Since Quarter (Q)3 2015 is already completed and we did "abstract" Emergency Department (ED) for our non-ED hospital and entered "0" for our Perinatal Care (PC) numbers for that hospital, can we choose to fill out the waiver for only Q4 2015?

In cases such as this one, in which Quarter 3 2015 data have already been submitted, hospitals may choose to submit the IPPS Measure Exception Form for PC-01 and ED for Quarter 4 2015 only. The deadline for submission of the form for Quarter 4 is May 15, 2015.

Question 2: Since this starts with 3Q 2015, when is this form due in since 3Q 2015 data is currently being submitted?

Providers may utilize the Measure Exception Form starting with Quarter 3 2015. For Quarter 3 2015, the form is due by February 15, 2016.
Question 3: Will the Inpatient Vendor Authorization be reflective of waivers for PC and/or ED?

No, the Vendor Authorization will not be reflective of waivers for PC and/or ED. If you have authorized a vendor for PC and/or ED, you have submitted a Measure Exception Form for either of those, and you no longer want the vendor authorized, you will then have to go into the Vendor Authorization application and enter a transmission and discharge end date.

Question 4: Is SSI for acute patients?

Yes, the Surgical Site Infection (SSI) measure applies to acute inpatient discharges.

Question 5: Where is the Measure Exception Form found for us to print and submit?

The Measure Exception Form is located on the Quality Reporting Center website under the Inpatient > Hospital IQR Program > Resources and Tools tab at http://www.qualityreportingcenter.com/inpatient/iqr/tools/. Under the IPPS Measure Exception Form section, click the IPPS Measure Exception Form link.

The form is also located on QualityNet under the Hospitals – Inpatient > Hospital Inpatient Quality Reporting Program tab at https://www.qualitynet.org/dcs/ContentServer?c=Page&pageName=OnetPublic%2FPage%2FQnetTier2&cid=1138115987129. Under the Inpatient Prospective Payment System (IPPS) Measure Exception Form section, click the IPPS Measure Exception Form link.

Question 6: Does this include colonoscopies?

The Measure Exception Form does not include colonoscopies.

Question 7: If two facilities share a CMS Certification Number (CCN #) and one hospital is a specialty hospital that typically would submit an exception form but the other facility would not, how do you handle that? The National Health Safety Network (NHSN) collects data by hospital, not CCN #.

As both facilities are under one CCN, you would be expected to submit all of the requirements that are required for IQR. You would not submit a Measure Exception Form for the specialty hospital.
Question 8: Will there be a similar webinar pertaining to exemption from 2016 Meaningful Use reporting?

At this time, there are no similar webinars planned. Please watch the ListServes that are distributed for notification of any future webinars.

Question 9: I already submitted the Inpatient Prospective Payment System (IPPS) Measure Exception Form for all four quarters of 2016. Is this a problem? Should I resubmit?

We are unable to provide a response from the information that was provided. We do not know for which measures you submitted the Measure Exception Form.

Question 10: For the electronic Clinical Quality Measure (eCQM) Extraordinary Circumstances Exemption (ECE), would hospitals undergoing Electronic Health Record (EHR) transition in 2017 and 2018 – multiple hospitals (switching EHR vendors) qualify for ECE in 2017 and 2018?

We cannot confirm whether or not your facility would qualify for an ECE. If you believe that you have experienced a hardship that would affect your submission of the eCQMs, then you can submit an ECE. CMS will review and make a determination on an individual basis.

Question 11: For eCQM ECE, do we need to apply for this twice in February and in August, too?

No, you would not need to apply twice; you will only need to submit the eCQM ECE once.

Question 12: When filling out the Measure Selection form, what is the calendar year (CY) we put for PC-01 and ED-1, 2015 or 2016?

If you are submitting the form for Quarter 3 2015 and/or Quarter 4 2015, you would enter CY 2015. If you are submitting the form for any quarters in 2016, then you would enter CY 2016.

Question 13: So, if we change EHRs in the middle of Quarter 4 to an Office of the National Coordinator- (ONC-) certified EHR and requiring a merge of data, then could we request an extension or exemption?

Yes, you can submit an ECE; however, we cannot confirm whether or not your ECE will be granted. If you believe that you have experienced a hardship that would affect your submission of the eCQMs, then you can submit an ECE. CMS
Inpatient Quality Reporting (IQR) Program

will review and make a determination on an individual basis.

Question 14: If we do not have an Intensive Care Unit (ICU) location but do have the med/surg locations for Catheter-Associated Urinary Tract Infections (CAUTI) and Central Line-Associated Blood Stream Infections (CLABSI) reporting, do we need to submit an exception form for the ICU location?

No, as you have mapped medical-surgical locations, you would not submit a Measure Exception Form for the ICU locations.

Question 15: Can you further explain the possible exemption to facilities participating in IQR eCQMs whose vendor is upgrading?

If your vendor is upgrading and you feel that this has created a hardship that is outside the control of your hospital and that would prohibit you from submitting the required eCQMs, then you can submit an ECE. However, we cannot confirm whether or not your ECE will be granted. CMS will review each ECE on an individual basis and make a determination.

Question 16: eCQM for most hospitals are not due to be submitted until 2/28/17. When would be the deadline for submitting an ECE.

The deadline would be within 30 days of the time that the event occurred. For instance, if the event occurred on February 28, 2016, then the deadline would be 30 days from that event, or March 29, 2016.

Question 17: Will the Centers for Medicare & Medicaid Services (CMS) issue additional guidance on specific vendor issues that may qualify for ECE, e.g., hospital changing EHR vendor, eCQM module health IT vendor issues, and others?

CMS will not be providing additional guidance at this time. If you feel that your hospital has experienced a hardship due to vendor issues outside of your hospital’s control that would prohibit you from submitting the required eCQMs, then you can submit an ECE. CMS will review and make a determination on an individual basis.

Question 18: Please repeat the circumstance you referenced on slide 22 regarding a request due to upgrading or changing the EHR.

Such hardships could include but are not limited to infrastructure challenges in which hospitals must demonstrate that they are in an area without sufficient Internet access or face insurmountable barriers to obtaining infrastructure, or unseen circumstances, such as vendor issues outside of the hospital’s control,
including a vendor product losing certification. In addition, hospitals newly participating in the Hospital IQR Program that are required to begin data submission under Hospital IQR Program procedural requirement at 42 CFR 412.140(c)(1), which describes submission and validation of Hospital IQR data, may also be considered undergoing hardship and can apply for an exemption.

**Question 19:** Do you have to complete an IPPS Exception for each quarter, or can it be for the year?

You do not have to complete a Measure Exception Form for each quarter; it can be submitted for the whole year. We recommend that facilities submit a Measure Exception Form by August 15 for the applicable calendar year. For example, for Calendar Year 2016, we recommended that facilities submit the Measure Exception Form by August 15, 2016, which is the deadline for submission of Quarter 1 2016 HAI, PC-01, and clinical data.

**Question 20:** Are all hospitals that participate in the IQR Program required to submit through the eCQMs?

For Fiscal Year (FY) 2018 (CY 2016), all eligible IQR hospitals are required to submit four eCQMs for either Quarter 3 2016 or Quarter 4 2016.

**Question 21:** If a hospital has opted out of the IQR Program, what reporting does this automatically include?

If a hospital has opted out of the IQR Program, then it would not have to report on any of the IQR requirements, e.g., submission of population and sampling, submission of clinical data, submission of eCQMs, etc.

**Question 22:** Can we just submit zeros for our population and sampling instead of completing an exception form?

If you do not have an Obstetrics (OB) Unit and/or treat OB patients, you can still enter zeros into the web-based application for PC-01. If you do not have an ED department, you will still have to enter the Global population and sampling given that it includes both ED and IMM.

**Question 23:** If you are upgrading your system in Calendar year (CY) 2016, but this will not be completed until 2017 (or late 2016), can you claim an exemption?

Yes, you can submit an ECE; however, we cannot confirm whether or not your ECE will be granted. If you believe that you have experienced a hardship that would affect your submission of the eCQMs, then you can submit an ECE. CMS
will review and make a determination on an individual basis.

Question 24: If the hospital does not have an ED and PC population and they fill out the waiver form for 2016, can they still submit a "0" denominator for the electronic Clinical Quality Measure eED-1, eED-2, and ePC-01 in order to meet the requirement for eCQM of four required eCQMs?

Yes, you can still submit a “0” denominator for those measures.

Question 25: So, once the exception form is completed and submitted, then data does not have to be entered for that particular measure, correct? I always feel I still need to put in zeros.

If you complete and submit a Measure Exception form for PC-01, you would not have to enter zeros into the web-based measure application. If you complete and submit a Measure Exemption Form for HAI, then you would not have to submit the applicable HAI measures to NHSN. For ED, if you submit a Measure Exemption Form, you would not have to submit the ED clinical data; however, you would still have to submit the Global population and sampling.

Question 26: When will we be able to start inputting fourth quarter Outpatient and Inpatient data into the CMS Abstraction and Reporting Tool (CART)?

Guidance regarding the inputting of fourth quarter data into CART will be provided in the near future.

Question 27: How long is an eCQM ECE good for, a quarter, a year? Is it determined by circumstance by CMS?

For eCQMs, the ECE is good for the reporting year for which you fill it out. If you are not able to submit eCQMs in 2016, you would fill the form out for 2016.