Hospital Inpatient Quality Reporting Quick Start Guide

Accessing and Using Your Provider Participation Report

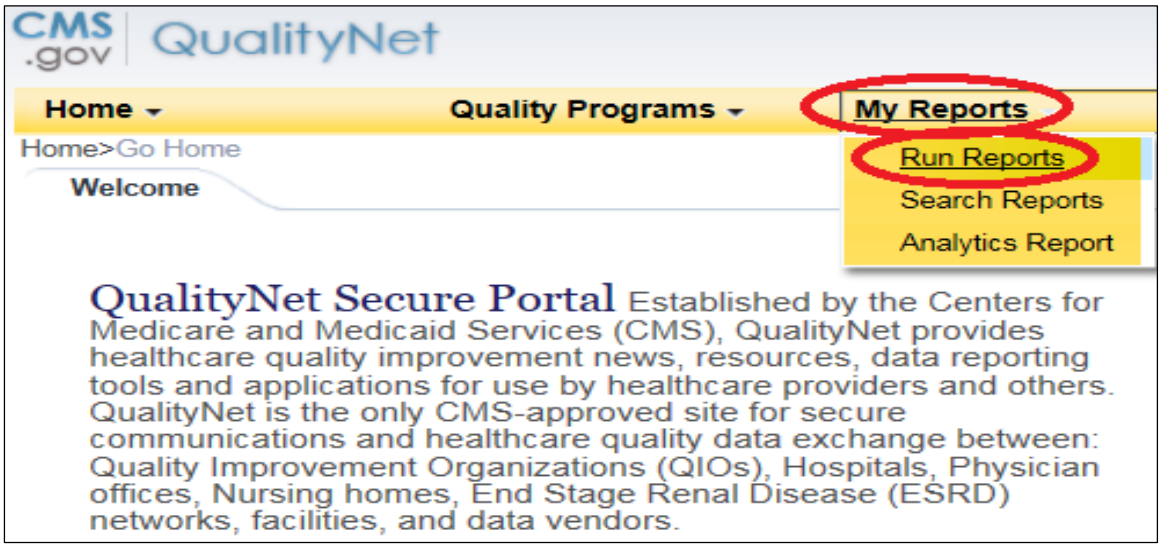
Provider Participation Report Overview

The Hospital Inpatient Quality Reporting (IQR) Program Provider Participation Report (PPR) summarizes a provider's data submission. The data assist Quality Innovation Network-Quality Improvement Organizations (QIN-QIOs), inpatient hospitals, and hospital vendors in determining hospital participation status in the IQR Program. However, the information provided does not guarantee that the provider will receive the full annual payment update (APU). The PPR updates nightly with all data submitted and successfully processed for the previous day. Healthcare systems, inpatient hospitals, and vendors may request authorization to view the reports for affiliated hospitals.

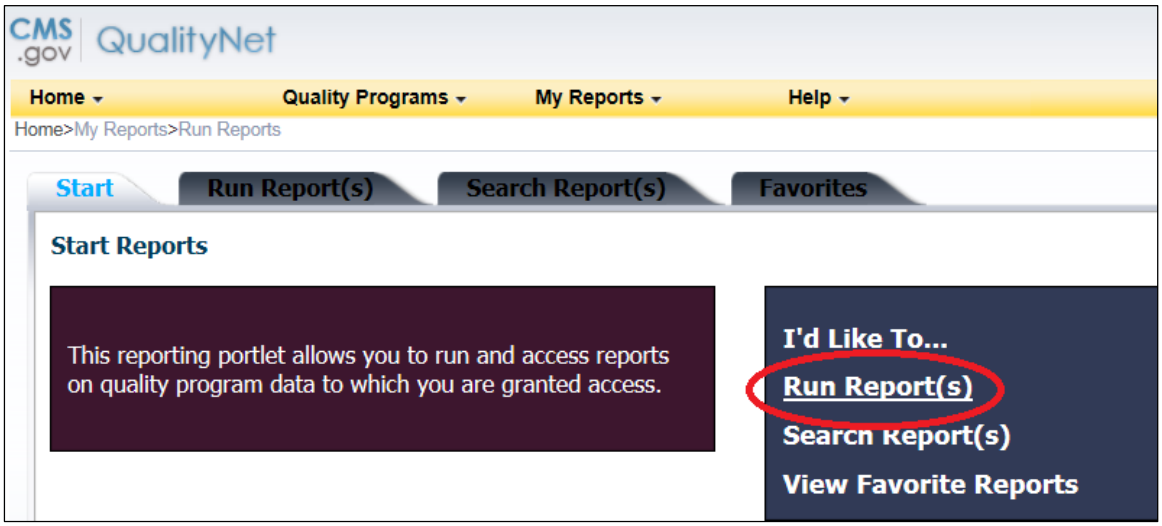
Running and Viewing Your Hospital's Provider Participation Report

After logging in to the *QualityNet Secure Portal*:

1. On the Home page, select **My Reports**; then select the **Run Reports** link.



2. On the **Start Reports** screen, in the **I'd Like To…** section, select the **Run Report(s)** link.



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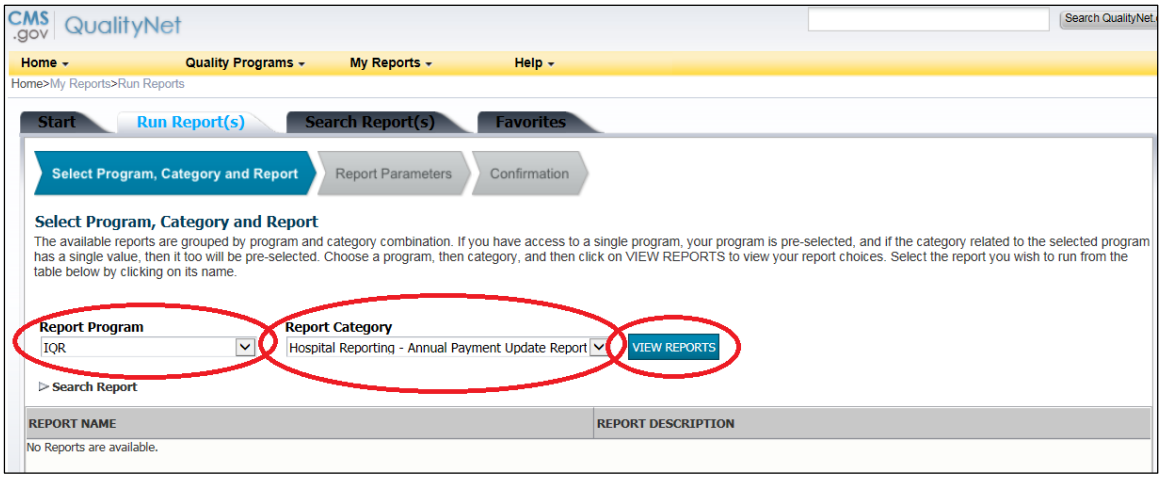
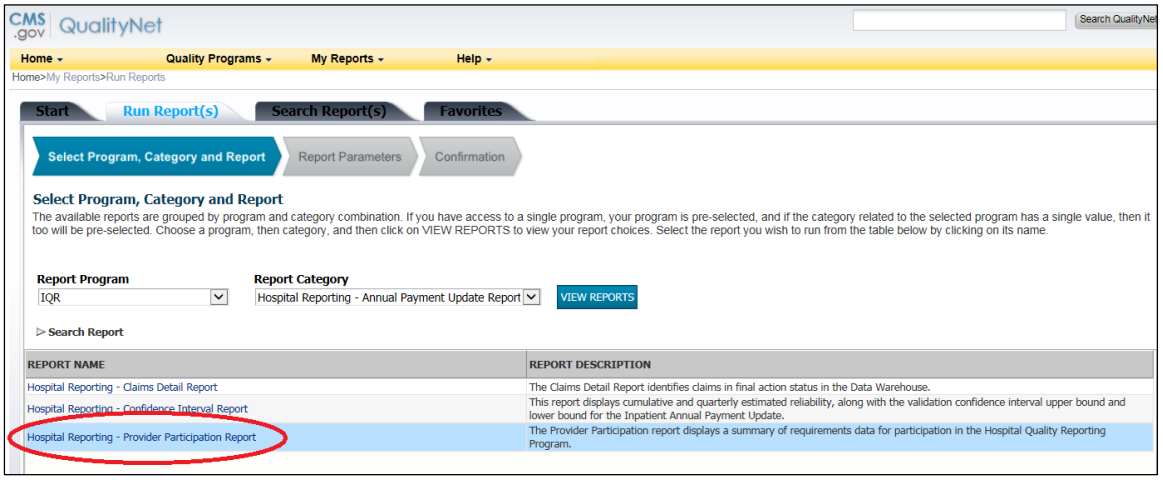
3. On the **Run Report(s)** tab in the **Select Program, Category and Report** screen:
   a. Select **IQR** from the drop-down menu under **Report Program**.
   b. Select **Hospital Reporting – Annual Payment Update Report** from the drop-down menu under **Report Category**.
   c. Click on **VIEW REPORTS** to view your report choices.



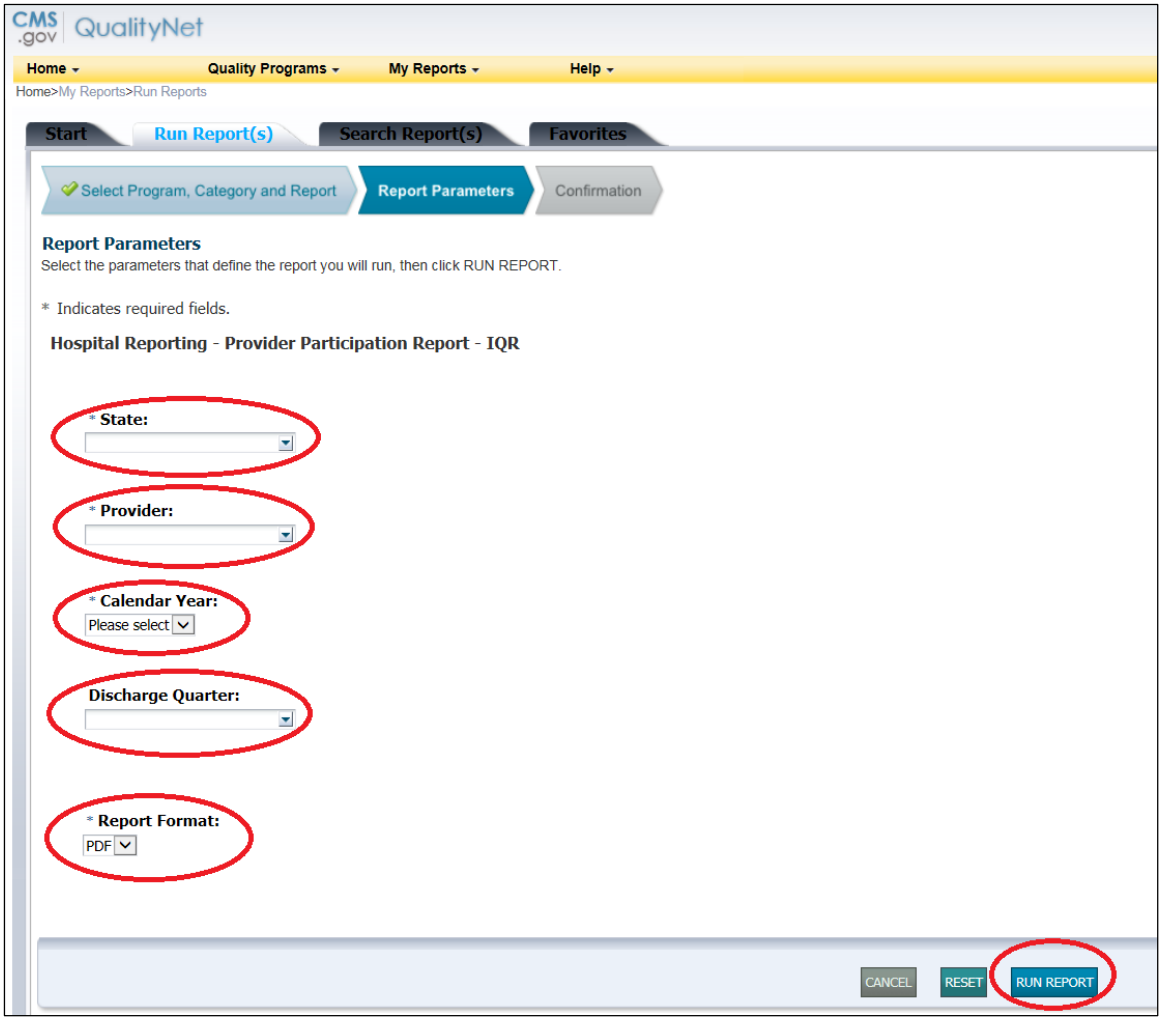
4. Under **REPORT NAME**, select **Hospital Reporting – Provider Participation Report**.



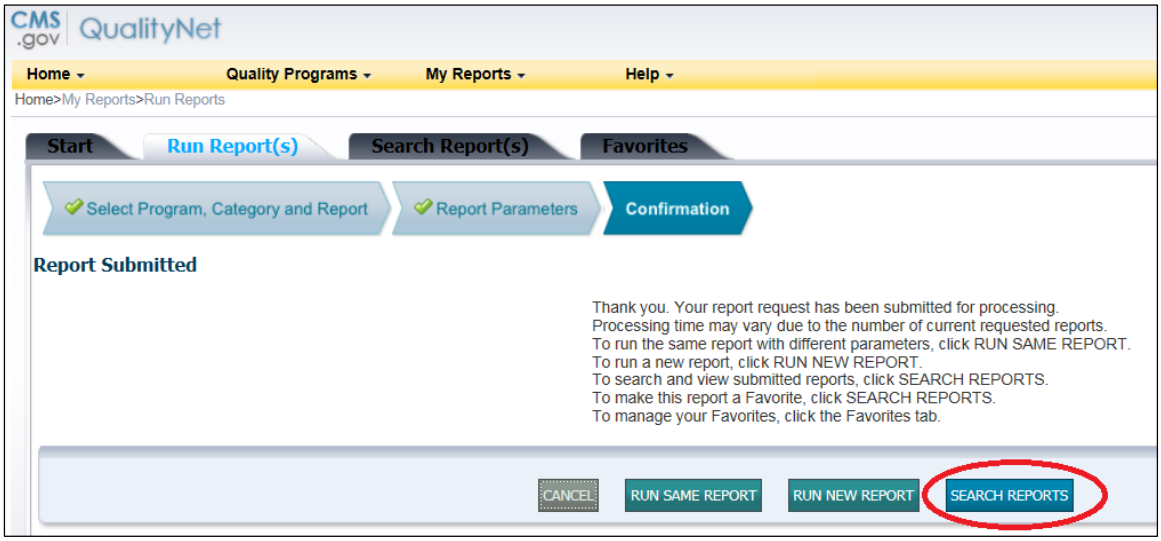
5. In the **Report Parameters** section, enter the **State**, **Provider** (depending on the role you have), **Calendar Year**, and **Report Format**. You will also have the option to enter **Discharge Quarter.**

   NOTE: The role determines the parameters that you have to select. If you are a provider, you will not have to select the Provider parameter; however, if you are a QIN-QIO, Vendor, or Healthcare System, you will have to select the Provider parameter. Because the screen view will vary depending on which role you are assigned, not everyone will see this screen exactly as it is depicted here.

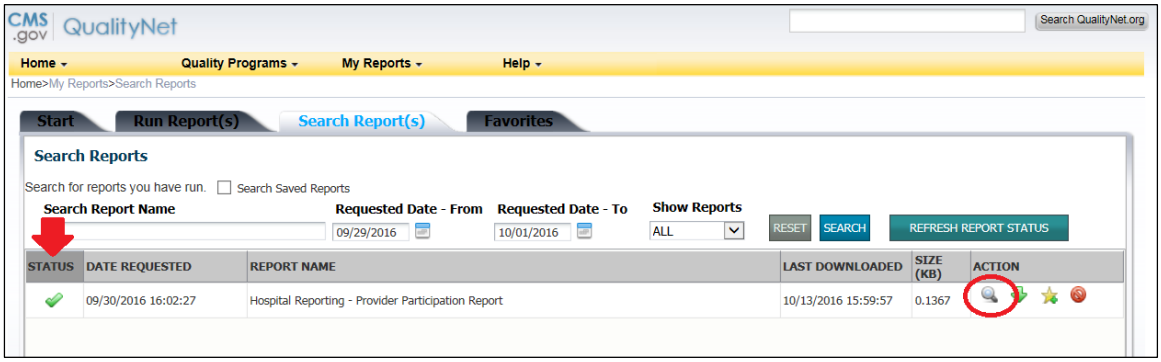
6. Then click the **RUN REPORT** button.



7. To search and view the submitted reports, click on the **SEARCH REPORTS** button.



8. On the **Search Report(s)** screen, wait for the system to process the request (**STATUS** column displays green check mark), then select the **View Report** icon (magnifying glass).



Provider Participation Report Information

Page 1 of the PPR displays Clinical Measure Sets information, as indicated in the sample report below, and includes:

- Total Cases Accepted
- Total Medicare Claims
- Total Patient Population
- Total Sample Size
- Discharge Quarter Sample Frequency

NOTE: The data displayed in the screen shot below are shown only as an example. Actual data will vary by facility.

State :
Provider ID:
Provider Name:
Provider City:

CEO Name:
Medicare Accept Date:
Notice of Participation Date:
Withdrawal or Non-Participation Date:

Active QualityNet Security Administrator: Yes
Completed Structural Measures: No
Data Accuracy and Completeness Acknowledgement: No
Intent to Submit EHR Measures:
EHR Measures Submitted: N/A - Please refer to eCQM Submission Status Report

Selected for Validation: No

Measure Sets[1]	Total Cases Accepted[2]	Total Medicare Claims[3]	Total Patient Population[4]	Total Sample Size[4]	Discharge Quarter Sample Frequency[4]
IQR-AMI	0	0	No	No	No
IQR-SEP	0	81	No	No	No
IQR-STK - Ischemic sub-population	0	13	No	No	No
IQR-VTE - Other VTE Only Patient sub-pop	0	2	No	No	No
IQR-VTE - Principal VTE Patient sub-pop	0	0	No	No	No
		Total Medicare Claims[3]	Total Patient Population[4]	Total Sample Size[4]	Discharge Quarter Sample Frequency[4]
Global Population		346	No	No	No

	Total Cases Accepted[2]
Measure Set: IQR-ED	0
Measure Set: IQR-IMM	0

Associated Footnotes

[1]Note: The Measure Set column contains Measure Set, Strata and Sub-population data. Hospitals that have five or fewer discharges (Medicare and non-Medicare, combined) within a measure set in a quarter are not required to submit patient-level data for that measure set for that quarter, but must still submit the aggregate population and sampling data even if the population is zero.

[2]"Accepted" is defined as including all Medicare and non-Medicare cases submitted to the Data Warehouse that met all data submission requirements.

[3]Total Medicare Claims column will be updated monthly with a cumulative total until approximately 15 days prior to the submission deadline for that quarter.

[4]"No" indicates that data has not been submitted for aggregate population and sampling or the provider intends to submit eligible EHR measures.

*Vendor is not authorized to submit data for this measure set.

Note: Claims-based measures do not require data submission by the hospital and are calculated based on Medicare claims data.

Disclaimer: This report provides a snapshot of pertinent information for overall monitoring of Hospital IQR program requirements. It does not confirm or deny whether a provider qualifies for the annual payment update.

PPR Page 1 Clarifications

- The "Intent to Submit EHR Measures" field is not applicable and can be disregarded.
- "IQR-AMI" is not a measure for CY 2016 and can be disregarded.
- The portion of footnote No. 4 stating "or the provider intends to submit eligible EHR measures," is not applicable and can be disregarded.

Page 2 of the PPR displays information related to the Clinical Web-Based Perinatal Care Measure (PC-01) Data, the Healthcare-Associated Infection (HAI) Quality Measure Data, and the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey Data, as indicated in the sample report below.

NOTE: The data displayed in the screen shot below are shown only as an example. Actual data will vary by facility.

Provider ID:
Provider Name:

Intent to Submit EHR Measures:
EHR Measures Submitted: N/A - Please refer to eCQM Submission Status Report

Clinical Web-Based Measures

Measure Set: PC	Total Numerator[11]	Total Denominator[11]	Total Mother Population	Total Sample Size	Discharge Quarter Sample Frequency	Total Exclusions[11]
PC-01 Elective Delivery	No	No	No	No	No	No

Exclusion	Count
ICD-10-CM Principal or Other Diagnosis Code for elective delivery[11]	No
Enrolled in a Clinical Trial[11]	No
Gestational age patients < 37 or >= 39 weeks gestation [11]	No

IQR-HAI Quality Measure Data[7]	IQR-HAI Data Submitted	Last NHSN File Update to CMS[8]
C.difficile	Yes	09/21/2016
CAUTI	Yes	09/21/2016
CLABSI	Yes	09/21/2016
Healthcare Personnel Influenza Vaccination	N/A	
MRSA Bacteremia	Yes	09/21/2016
SSI - Abdominal Hysterectomy	Yes	09/21/2016
SSI - Colon Surgery	Yes	09/21/2016

HCAHPS Survey Data[5]	Unverified Files Accepted to Date			Unverified "Zero Cases" Information Accepted to Date[6]		
	Apr	May	Jun	Apr	May	Jun
HCAHPS	Yes	Yes	Yes	No	No	No

Associated Footnotes

[5]Hospitals that have five or fewer HCAHPS-eligible discharges in a month are not required to conduct and submit HCAHPS surveys for that month; however, they must submit the total number of HCAHPS-eligible cases that they had for that month as part of their quarterly HCAHPS data submission.

[6]Hospitals that have zero HCAHPS-eligible discharges and have submitted a file indicating zero cases will display a "Yes" in the "Unverified 'Zero Cases' Information Accepted to Date" field.

[7]HAI (Healthcare-Associated Infection) data is updated monthly until the submission deadline for the respective quarter. For more information regarding HAI data, please access the NHSN website: http://www.cdc.gov/nhsn/acute-care-hospital/index.html

[8]The Last NHSN file update to CMS date is the date the HAI data was last updated for the Provider for the discharge quarter.

[9]The HAI Data Submitted is N/A for the Healthcare Personnel Influenza Vaccination measure during non-flu season quarters.

[11]No indicates that data has not been submitted for Clinical Web Based Measures or the provider intends to submit eligible EHR measures.

*Vendor is not authorized to submit data for this measure set.

Note: Claims-based measures do not require data submission by the hospital and are calculated based on Medicare claims data.

Disclaimer: This report provides a snapshot of pertinent information for overall monitoring of Hospital IQR program requirements. It does not confirm or deny whether a provider qualifies for the annual payment update.

PPR Page 2 Clarifications

- The "Intent to Submit EHR Measures" field is not applicable and can be disregarded.
- The portion of footnote No. 11 that states "or the provider intends to submit eligible EHR measures," is not applicable and can be disregarded.

NOTE: Please check the Known Issues – Hospital Reporting document on *QualityNet* for any issues affecting the PPR.