

Successful Reporting in the Hospital OQR Program

2020

Hospital OQR Program Support Team
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Successful Reporting in the Hospital OQR Program

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Welcome to the Centers for Medicare & Medicaid Services' (CMS') Hospital Outpatient Quality Reporting (OQR) Program!

The Hospital OQR Program Support Team, under contract with CMS, has been notified that your facility recently received a new CMS Certification Number (CCN) or has staff new to the Hospital OQR Program. We want to ensure that you are aware of the Hospital OQR Program and its requirements.

Subsection (d) hospitals paid by Medicare under the Outpatient Prospective Payment System (OPPS) participate in the Hospital OQR Program by submitting data on measures of outpatient quality of care. Hospitals that meet Hospital OQR Program requirements during a given calendar year receive a full OPPS payment update, also called the Outpatient Department (OPD) fee schedule increase factor, for the upcoming calendar year. Eligible hospitals that do not participate, or participate but fail to meet program requirements, receive a **2 percentage point reduction** of their payment update for the applicable payment year.

To participate in the Hospital OQR Program, hospitals must register on the QualityNet website before beginning to report data, identify and register at least one QualityNet Security Administrator, and submit data. The measures in the Hospital OQR Program assess outpatient process of care, imaging efficiency patterns, care transitions, ED throughput efficiency and patient safety.

Hospitals with a Medicare acceptance date (the effective date of a hospital's CCN) on or after January 1 to December 31 of one year would be required to submit data beginning with the first quarter encounters of the following year. The deadline to submit data for these first quarter encounters would be August 1 of that year. For example, if a hospital's Medicare acceptance date is March 17, 2019, the first time it would be required to submit data would be August 1, 2020 for January 1–March 31, 2020 encounters. Once a hospital has submitted data, the facility is a participant in the Hospital OQR Program until a withdrawal form is submitted to CMS.

If your facility has applied to become a Long Term Acute Care Hospital (LTCH), but currently has a short term acute care CCN, please continue the process to certify the hospital as an LTCH. Once you have completed the demonstration period and receive your LTCH Certification Letter from CMS, your facility's CCN will change to designate it as an LTCH. The last four digits of your CCN will be 2000–2299. Please notify the Hospital OQR Support Team of the facility's change in status and its new CCN. This will prevent you from receiving notification that your facility failed to meet program requirements and incurring a financial penalty to any OPPS payments. Until you obtain an LTCH CCN, the hospital will be viewed as a Short Term Acute Care Hospital for the purposes of payment determinations and may receive a payment penalty if the LTCH CCN is not obtained before payment determinations are made.

Participation in the Hospital OQR Program is voluntary for Critical Access Hospitals. CAHs represent a separate provider type with their own Medicare Conditions of Participation (CoP) as well as a separate payment method.

The Hospital OQR Program is authorized by Section 1833(t)(17) of the Social Security Act, and program requirements are operationalized via the *Federal Register*. If you would like to review

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the current *Federal Register* document governing Hospital OQR Program requirements, please visit the November 12, 2019 publication of the *Federal Register* located at <https://www.govinfo.gov/content/pkg/FR-2019-11-12/pdf/2019-24138.pdf>. The Hospital OQR Program requirements begin on page 61410.

This packet has been designed to assist you in meeting the requirements for the Hospital OQR Program and includes: The Hospital OQR Program Reference Checklist outlining the four mandatory steps for Hospital OQR participation, details concerning QualityNet registration, participation information, important dates and reporting deadlines, and additional resources.

Note that Hospital OQR Program dates and deadlines are subject to change. Please verify dates and deadlines on the QualityNet website (www.qualitynet.org).

We hope you find this information helpful. Please contact us if you have any questions.

Contact Information:

Hospital OQR Program Support Team

3000 Bayport Drive, Suite 300

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866.800.8756

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HOSPITAL OUTPATIENT QUALITY REPORTING (OQR) PROGRAM REFERENCE CHECKLIST

HOSPITAL OQR PROGRAM REQUIREMENTS SUMMARY

This information outlines the requirements for subsection (d) hospitals, paid by Medicare under the Outpatient Prospective Payment System (OPPS), to receive a full Medicare OPPS payment update. Hospitals that do not meet Hospital OQR Program requirements receive a reduction of 2.0 percentage points in their OPPS payment update for the applicable calendar year (CY).

Under Section 1833(t)(17)(E) of the Social Security Act, the Centers for Medicare & Medicaid Services (CMS) makes data collected under the Hospital OQR Program available to the public. Hospitals have an opportunity to review their data prior to publication in their Public Reporting Preview reports. The data are displayed on the Public Reporting website at <https://www.medicare.gov/hospitalcompare/search.html>. All data are aggregated as determined by CMS; currently, CMS publishes Hospital OQR data by CMS Certification Number (CCN).

Eligible hospitals must follow requirements outlined in the applicable OPPS/ASC Final Rule with Comment Period. The CY 2020 requirements were published in the *Federal Register* in November 2019 (<https://www.govinfo.gov/content/pkg/FR-2019-11-12/pdf/2019-24138.pdf>).

Participation in the Hospital OQR Program is voluntary for Critical Access Hospitals. CAHs represent a separate provider type with their own Medicare Conditions of Participation (CoP) as well as a separate payment method.

Hospitals should contact the Hospital OQR Program Support Team with questions regarding data or for technical support. Contact the Hospital OQR Program Support Team by email at oqrsupport@hsag.com or by telephone at 866.800.8756.

HOSPITAL OQR PROGRAM REFERENCE CHECKLIST

Four Mandatory Steps for Hospital OQR Program Participation

To avoid a reduction in payment update, hospitals **must** adhere to the following requirements:

- 1. Register with QualityNet** before beginning to report data, regardless of the method used for data submission.
- 2. Identify and maintain a QualityNet Security Administrator (SA)** as outlined in the registration process located in the [QualityNet Registration](#) section of www.qualitynet.org. Existing SAs for the CMS Hospital Inpatient Quality Reporting (IQR) Program may also register as the SA for the Hospital OQR Program. Although it is not required to have more than one Hospital OQR SA, we highly recommend designating more than one SA for back-up purposes.
- 3. Collect chart-abstracted clinical data for each quarter and submit these data by the deadline.** For the CY 2021 payment update, the applicable patient encounter quarters for chart-abstracted data are as follows:

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Patient Encounter Quarter	Clinical Data Submission Deadline
Q2 2019 (April 1–June 30)	11/01/2019
Q3 2019 (July 1 – September 30)	02/01/2020
Q4 2019 (October 1 – December 31)	05/01/2020
Q1 2020 (January 1 – March 31)	08/01/2020

- a. To calculate claims-based measures, CMS uses a hospital’s Medicare claims data. Data submissions must be timely, complete, and accurate. A complete submission is determined based on whether submitted data:
 - i. Satisfy the sampling criteria published and maintained in the Hospital OQR Specifications Manual (found on the QualityNet website).
 - ii. Correspond to both the aggregate number of encounters submitted by a hospital and the number of Medicare claims the hospital submits for payment.
- b. Hospitals that have five or fewer cases in a quarter (both Medicare and non-Medicare) for any measure set (e.g., Stroke) will not be required to submit patient-level data for the entire measure set for that quarter, but they may voluntarily submit data.

4. Collect data for measures to be submitted via a web-based tool and submit these data by the deadline.

- The data submission period for measures submitted via the CMS QualityNet website opens on January 1, 2020 and extends through May 15, 2020 for encounters dated January 1–December 31, 2019.

Outpatient Measures

Please find the quality measures applicable for the current Hospital OQR Program year at the Hospital OQR Measures section of the QualityNet website at www.qualitynet.org.

You can also find these measures by following these instructions:

1. From the QualityNet website (www.qualitynet.org), locate the **Hospitals-Outpatient** program option.
2. Select **Measures** from the navigation bar at the top of the page.
3. From this page, **Hospital Outpatient Program Measures** option at the bottom of the page.

ADDITIONAL INFORMATION

Data Submission

Clinical data submission is accomplished in one of two ways:

- **CMS Abstraction & Reporting Tool (CART)**

OR

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- **Third party vendor** able to meet the measurement specifications for data transmission (XML file format) via the Secure Portal to the OPPS Clinical Warehouse.

SAs can access the online authorization process from the Secure Portal to authorize a third-party vendor to submit data on a hospital's behalf. Vendor authorizations remain in effect until the hospital modifies the authorization. Hospitals using CART do not need to complete a vendor authorization to report data.

- The Secure Portal is the only CMS-approved method for the electronic transmission of private data between healthcare providers and CMS for the purposes of the Hospital OQR Program. Data are stored in the OPPS Clinical Warehouse.
- All files and data exchanged with CMS via the Secure Portal are encrypted during transmission and are stored in an encrypted format until the recipient downloads the data. The Secure Portal meets all current Health Insurance Portability and Accountability Act (HIPAA) requirements.
- Cases in the OPPS Clinical Warehouse may be updated until the data submission deadline each quarter. After the deadline, no further updates are accepted for cases in that quarter.
- Zeros should be used to answer web-based measure questions in the Secure Portal about procedures not provided by your hospital.
- The Hospital OQR Data Upload role is required to upload data. Registered users can log in to the Secure Portal at: https://cportal.qualitynet.org/QNet/pgm_select.jsp.

Click the **Log into Secure Portal** then select **Secure File Transfer** option from the drop-down menu, located on QualityNet Destination page and enter your User Name, Password, and Security Code to log in to QualityNet. Select **Secure File Transfer** from the QualityNet Secure Portal homepage header bar to access Secure File Transfer. The user is then transferred to the Secure File Transfer application user interface screen.

1. If your role requires you to have the ability to upload data files, you will see a Data Upload folder under Remote in the Secure Transport section of the main menu.
2. Select a folder in the main menu to see the subfolders it contains. Subfolder and file details display in the work area. Text in the lower left corner of the work area displays the current location within the folder structure.
3. Select the arrow in front of the folder name in the main menu to open additional subfolders.
4. Select the folder name in the main menu to open subfolder and file details in the workspace. *Note: Regardless of your role, you will see all four data warehouse subfolders. Carefully choose the correct folder to avoid errors.*
 - ehrqrda
 - hcahps
 - iqrclinical
 - oqrclinical

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5. Select the warehouse folder into which you wish to upload your file – **oqrclinical**. We recommend selecting the folder from the main menu to more easily keep track of where you plan to upload the file. The path displays in the lower left of the Secure Transport workspace.
6. Select the **Upload** button in the Secure Transport workspace. We recommend using the **Upload** button in the workspace to ensure the file uploads to the intended folder.
7. A Choose File to Upload window will open. Browse to the folder location of the file you wish to upload. Select the file you wish to upload. You can only select one file per upload.
8. The file name shows in the File Name box at the bottom. Select the **Open** button to upload the file.
9. The file is uploaded for data submission and a virus scan begins. While the scan is running, the file name will appear with “antivirus.scanning” appended to the end of the file name.
10. When the virus scan is completed, the file is sent for data upload processing. The system creates a Sent folder within the warehouse folder and places the file in it.
11. When uploading additional files, be sure to select the data warehouse folder you wish to upload the file to, and not the Sent folder.
12. For each file you upload, an email is sent notifying you the file has been successfully uploaded. The subject line of the email will identify the name of the file and the folder to which you uploaded it.
13. A subsequent email is sent informing you whether the uploaded file has been accepted or rejected. It includes information about reports you can run, including specific reasons for rejection.
14. User guides are located on QualityNet at www.qualitynet.org. Select the **Portal Resources** link under the Log in to QualityNet Secure Portal section.

Data Submission Sampling Requirements

Hospitals must submit complete data regarding the quality measures in accordance with the sampling requirements located in the appropriate version of the Specifications Manual located on the QualityNet website www.qualitynet.org. These requirements specify that hospitals must submit a sample or a complete population of cases for each of the outpatient populations (AMI, ED-Throughput, and Stroke). Hospitals must meet sampling requirements for these quality measures for each quarter. One Endoscopy Surveillance measures and the External Beam Radiotherapy Measure must meet the specified sampling guidelines on an annual basis.

Aggregate Population and Sampling Data Submission

Reporting aggregate population and sample size counts is **voluntary**. If a hospital chooses to report aggregate population and sample size counts for Medicare and non-Medicare outpatient encounters for Hospital Outpatient AMI, ED-Throughput, and Stroke measures, these data must be submitted to CMS via the Secure Portal on the same quarterly submission schedule as chart-abstracted measures. Enter the data using the online tool (QualityNet Secure Portal >My Tasks Page> Hospital Reporting Inpatient/Outpatient: View/Edit Population & Sampling).

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Population and sampling data for measures submitted via a web-based tool are not to be entered in the population and sampling grid for submission.

The deadlines for Hospital OQR Program Population and Sampling submission can be found on the QualityNet website at www.qualitynet.org.

Chart Audit Validation

Validation is intended to provide assurance of the accuracy of a hospital's chart-abstracted data. CMS selects hospitals from a list of hospitals participating in the Hospital OQR Program that year. CMS randomly selects approximately 450 hospitals from the list of participating hospitals and an additional 50 hospitals on a targeted basis, for an estimated total of approximately 500 hospitals selected for validation annually.

More detailed information about the validation process can be found in the Data Validation section of QualityNet that is accessible by clicking on the **Hospitals-Outpatient** option at www.qualitynet.org and selecting **Data Management>Data Validation**.

Reconsideration Process

A reconsideration process is available for hospitals that did not meet Hospital OQR Program requirements and are, therefore, did not receive the full payment update. The procedural rules that govern the Hospital OQR Program reconsiderations are posted on the QualityNet website at www.qualitynet.org. If a hospital fails to submit a Reconsideration Request by the applicable deadline, then the hospital will not be eligible to file an appeal with the Provider Reimbursement Review Board.

Extraordinary Circumstances Exception (ECE) Process

In the event that a hospital is unable to submit data or access medical records due to an extraordinary circumstance, such as a natural disaster, the hospital may request an ECE. Hospitals will need to complete the ECE form found on QualityNet and submit the form with any supporting documentation within 90 days of the date of the extraordinary circumstance. These documents must be submitted to the Hospital OQR Support Team via one of the following:

- QualityNet Secure Portal, Secure File Transfer–Waiver Exception Withholding group
- Email to: QRSupport@hcqis.org
- Secure fax to: 877.789.4443
- Conventional mail to:
Hospital OQR Support Team
3000 Bayport Drive, Suite 300
Tampa, FL 33607

CMS will strive to complete its review of each request within 90 days of receipt.

Hospitals that are included under a blanket exception by CMS (due to widespread natural disasters such as hurricanes, tornadoes, etc.) will not be required to submit the ECE form. These hospitals will be notified via the ListServe.

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QUALITYNET REGISTRATION

Security Administrator/Security Designee Roles

Hospitals are required to maintain an active QualityNet SA at all times. The SA facilitates the registration process for other users at the organization. Hospitals submitting data via the Secure Portal (or using a vendor to submit data on their behalf) are required to designate a SA. It is highly recommended that hospitals designate at least two people as SAs—one to serve as the primary SA and the other to serve as back-up.

The QualityNet Security Designee assists the SA with creating, editing, terminating, and viewing user accounts, as well as resetting passwords.

Security Administrator/Security Designee Registration

Facilities can obtain SA registration information at the QualityNet website at <https://www.qualitynet.org/getting-started>, or they may contact the QualityNet Help Desk at 866.288.8912 to request an SA Registration Packet.

Once your completed registration materials have been received by the QualityNet Help Desk, the SA there will enter your registration information. You will be notified by email when the registration process is complete, and the Secure Portal is accessible to you. The email will also contain your User ID. You will be notified of your initial password in a separate communication.

Non-Administrative User

Any user who is not designated as a SA or a Security Designee is considered a Non-Administrative (Basic) User.

To register as a QualityNet Basic User:

1. Notify the QualityNet SA or Security Designee for your organization that you need to become a registered user for QualityNet.
2. Provide the required registration information to your QualityNet SA or Security Designee, who will complete an online registration for you, following the instructions on the registration and authorization forms.
3. Mail the required registration materials (keeping a copy for your records) to the QualityNet Help Desk at this address:

QualityNet Help Desk
12000 Ridgmont Drive
Urbandale, IA 50323-2317

The QualityNet Help Desk will process the registration. You will be notified by email when your registration is complete, and you can sign in to QualityNet. The email will also contain your log-in ID.

To sign in to QualityNet for the first time, use the temporary password provided by the SA or Security Designee at your organization who created your account (contact your SA or Designee

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if you have not received a temporary password). After logging in, you will immediately be prompted to change your password and answer six security questions.

PARTICIPATION

To participate in the Hospital OQR Program, hospitals must register on the QualityNet website before beginning to report data, identify and register at least one QualityNet SA, and submit data. Submission of any Hospital OQR Program data indicates a hospital's status as a participant in the program, including the submission of just one data element.

<https://www.qualitynet.org/outpatient/oqr/participation>

REPORTING DEADLINES

CMS has established the following quarterly deadlines for hospitals participating in the Hospital OQR Program. The required data for each facility must be submitted (via the Secure Portal) and successfully accepted into the OPSS Clinical Warehouse by 11:59 PM Pacific Time on the dates shown on the following page presented in a one-page format for ease of reference.

Early submission is recommended so that transmission problems can be rectified. Quarterly data in the OPSS Clinical Warehouse may be updated *until* the data submission deadline; no updates to cases for the quarter will be accepted *after* the submission deadline.

Best Practice: Allow ample time, at least 15 calendar days prior to the submission deadline, to correct problems identified from the review of the Provider Participation and Feedback Reports. The QualityNet Secure Portal does not allow data to be submitted after the deadline. CMS allows ample time for hospitals to submit, resubmit, change, add new, and delete existing data up until the submission deadline.

Please Note: Dates are subject to change—please verify Population and Sampling and Data Submission Deadline dates on the QualityNet website.

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IMPORTANT DATES FOR THE CY 2021 PAYMENT DETERMINATION

Clinical Data Submission Deadlines	Reporting Period	Encounter Quarter
Nov. 1, 2019	Apr. 1–June 30, 2019	Q2 2019
Feb. 1, 2020	July 1–Sept. 30, 2019	Q3 2019
May 1, 2020	Oct. 1–Dec. 31, 2019	Q4 2019
Aug. 1, 2020	Jan. 1–March 31, 2020	Q1 2020
Population and Sampling Deadlines	Reporting Period	Encounter Quarter
Nov. 1, 2019*	April 1–June 30, 2019	Q2 2019
Feb. 1, 2020*	July 1–Sept. 30, 2019	Q3 2019
May 1, 2020*	Oct. 1–Dec. 31, 2019	Q4 2019
Aug. 1, 2020*	Jan. 1–March 31, 2020	Q1 2020
Scheduled Clinical Data Abstraction Center (CDAC) Record Requests (approximate)	Reporting Period	Encounter Quarter
Sept. 2019	Jan. 1–Mar. 31, 2019	Q1 2019
Dec. 2019	Apr. 1–June 30, 2019	Q2 2019
March 2020	July 1–Sept. 30, 2019	Q3 2019
June 2020	Oct. 1–Dec. 31, 2019	Q4 2019
QualityNet Web-Based Measures Submission Period	Reporting Period	Measures
Jan. 1–May 15, 2020	Jan. 1–Dec. 31, 2019	OP-22, OP-29, OP-30, OP-31**

*Submission of Population and Sampling is voluntary.

** Hospitals may voluntarily submit data but will not be subject to a payment reduction for this measure.

OPPS PAYMENT UPDATE–APPLICABLE QUARTERS FOR CLINICAL DATA

CY 2021	CY 2022
Data Submission	Data Submission
Q2 2019, Q3 2019, Q4 2019, Q1 2020	Q2 2020, Q3 2020, Q4 2020, Q1 2021
Validation Results	Validation Results
Q1 2019, Q2 2019, Q3 2019, Q4 2019	Q1 2020, Q2 2020, Q3 2020, Q4 2020

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ADDITIONAL RESOURCES

- **Hospital OQR Program Support Team**

As the Hospital OQR Program Support Team, Health Services Advisory Group (HSAG) supports activities under the Hospital OQR Program, including provision of technical support and feedback to assist hospitals with quality data reporting.

- **Hospital OQR Program**

- www.qualityreportingcenter.com

- This site contains numerous resources concerning reporting requirements including reference and training materials, tools for data collection and submission, educational presentations, timelines, and data submission deadlines.

- **Hospital OQR Program Support Team**

- 3000 Bayport Drive, Suite 300

- Tampa, FL 33607

- 866.800.8756

- oqrsupport@hsag.com

- Call the Hospital OQR Program Support Team with any questions about the program using the toll-free number weekdays from 7 a.m. to 6 p.m. Eastern Time.

- **QualityNet**

- www.qualitynet.org

- Established by CMS, the QualityNet website provides healthcare quality improvement news, resources, and data reporting tools and applications used by healthcare providers and others. The QualityNet website is the only CMS-approved website for secure communications and healthcare quality data exchange.

- **QualityNet Help Desk**

- QualityNet Help Desk

- 12000 Ridgmont Drive

- Urbandale, IA 50323-2317

- qnetsupport@hcqis.org

- [866.288.8912](tel:866.288.8912)

- **Hospital OQR ListServe**

- <https://www.qualitynet.org/listserv-signup> Notices generated on the ListServe are used to disseminate timely information related to quality initiatives. QualityNet users are urged to register for these email notifications to receive information on enhancements and new releases, timeline or process/policy modifications, and alerts about applications and initiatives.

- **Hospitals-Outpatient Questions/Answers**

- https://cmsqualitysupport.service-now.com/qnet_qa The Hospital OQR Program Support Team maintains the Hospitals-Outpatient Questions/Answers knowledge database, which allows users to ask questions, obtain responses from all resolved questions, and search the entire database by keywords or phrases.

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Federal Government Websites

- **CMS**
www.cms.gov
CMS is the U.S. Department of Health and Human Services' agency responsible for administering Medicare, Medicaid, the State Children's Health Insurance Program, and several other health-related programs.
- **Federal Register**
www.federalregister.gov
Published by the Office of the Federal Register, National Archives and Records Administration, the *Federal Register* is the official daily publication for rules, proposed rules, and notices of federal agencies and organizations, as well as executive orders and other presidential documents.