Information, Tips and Updates: The Hospital Outpatient Quality Reporting (OQR) Program

Hosted by:
Outpatient Quality Program Systems
and Stakeholder Support Team

Learning Objectives

Attendees will be able to:

- ✓ List the steps necessary to enter web-based measures.

- ✓ State how to find your hospital's publicly displayed data.

- ✓ Describe the new system updates and how it will affect the program moving forward.
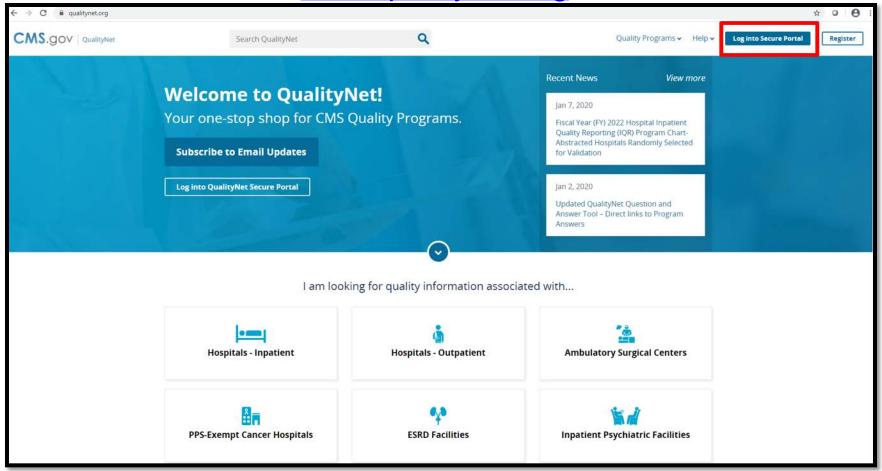
Next Generation

Next Generation Changes

The changes include the following:

- A redesigned, interactive format based on stakeholder insight

- Consistency across programs

- A universal platform across multiple programs

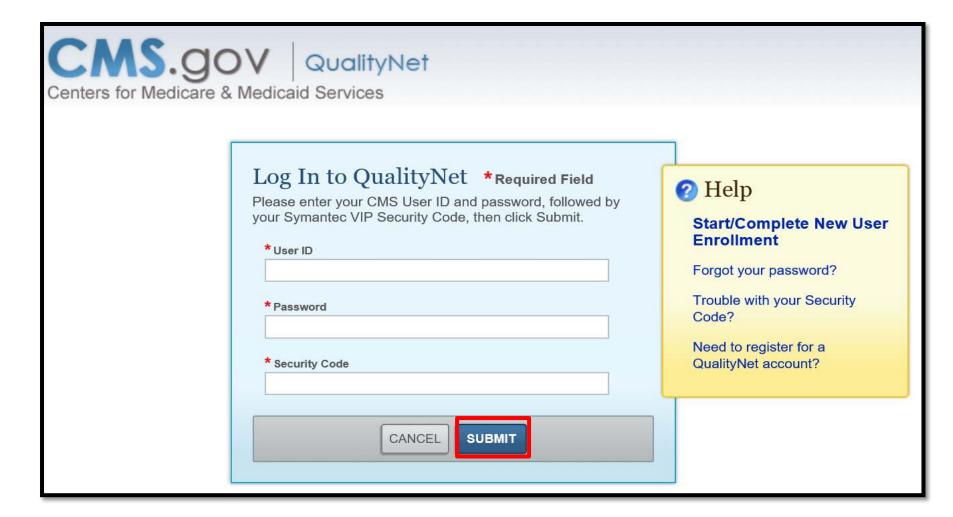# Data Submission Review
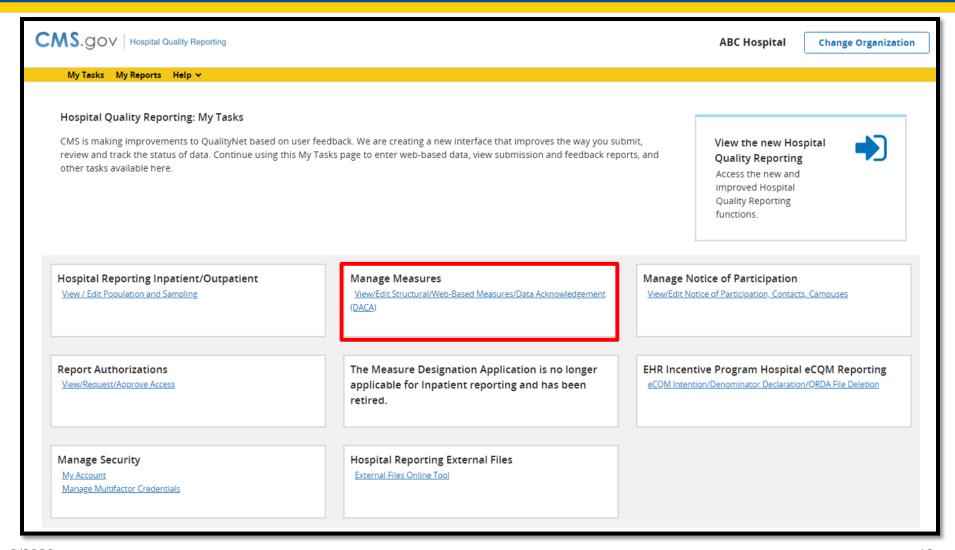
Log Into *QualityNet*
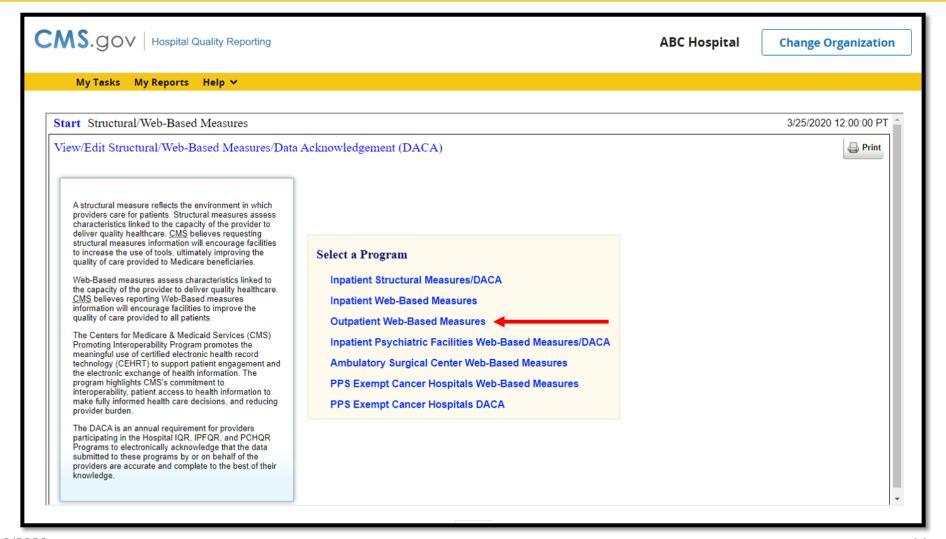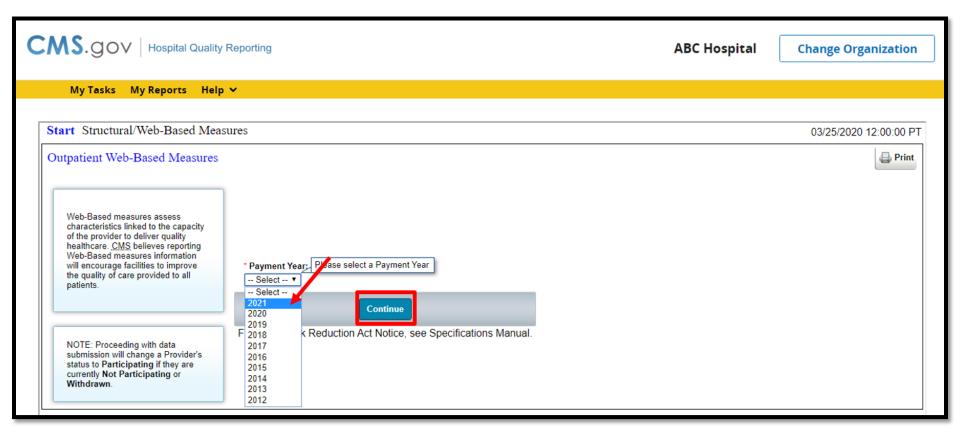
www.qualitynet.org

Choose Your Destination

Sign In
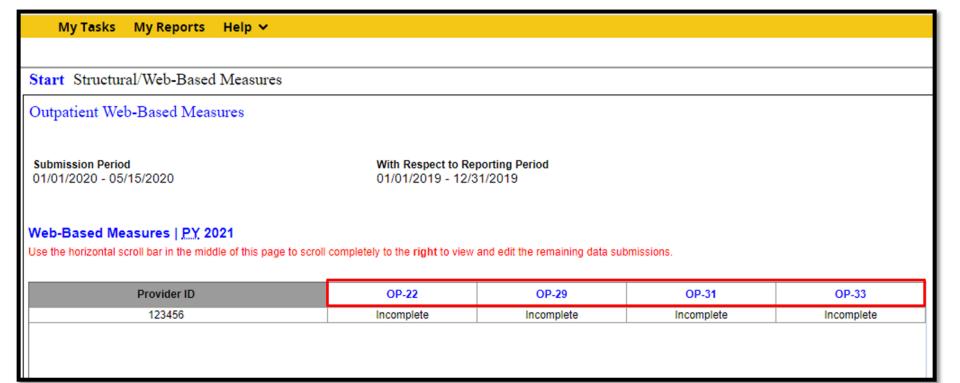
Choose Your Task

Choose Your Program

Choose the Payment Year

Choose Each Measure

Data Entry Page

OP-29: Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Population (Not Required)

What was your hospital's Total Population?

> 0

What was your hospital's sample size?

> 0

What was your hospital's sampling frequency?

- ⭘ Monthly
- ⭘ Quarterly
- ⭘ Not Sampled
- 🔵 N/A - Submission not required

Numerator

* Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report

> 0

Denominator

* All patients aged 50 years and older receiving screening colonoscopy without biopsy or polypectomy

> 0

Polling Question

Upcoming Deadlines

- Clinical Data (*reported quarterly*)
  - The deadline is **May 1, 2020.**
  - You will use Q4 2019 data. (October 1–December 31, 2019)
  - The required measure sets include:
    - ED Throughput, Stroke, and AMI

More Deadlines

- Web-Based measures (*reported annually*)
  - The deadline is **May 15, 2020.**
  - You will use the reporting period of January 1–December 31, 2019.
  - The required measures are:
    - OP-22, OP-29, OP-31* and OP-33

*Voluntary

Checking Your Submission

- Access the Lookup tool on the www.QualityReportingCenter.com website.
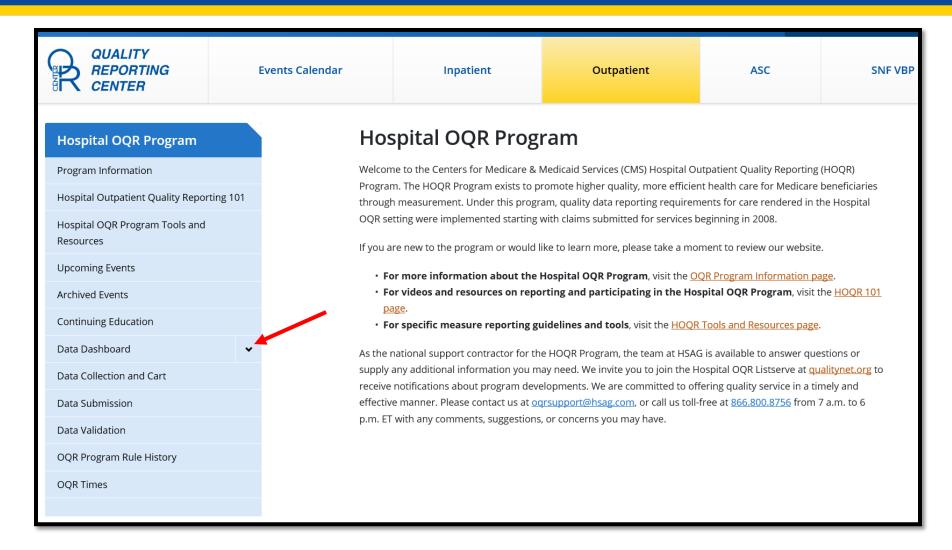 - Check the Date Last Updated.
- You will see:
  - **Yes**, if data is submitted for *all* measures.
  - **No**, if you have additional data to submit.
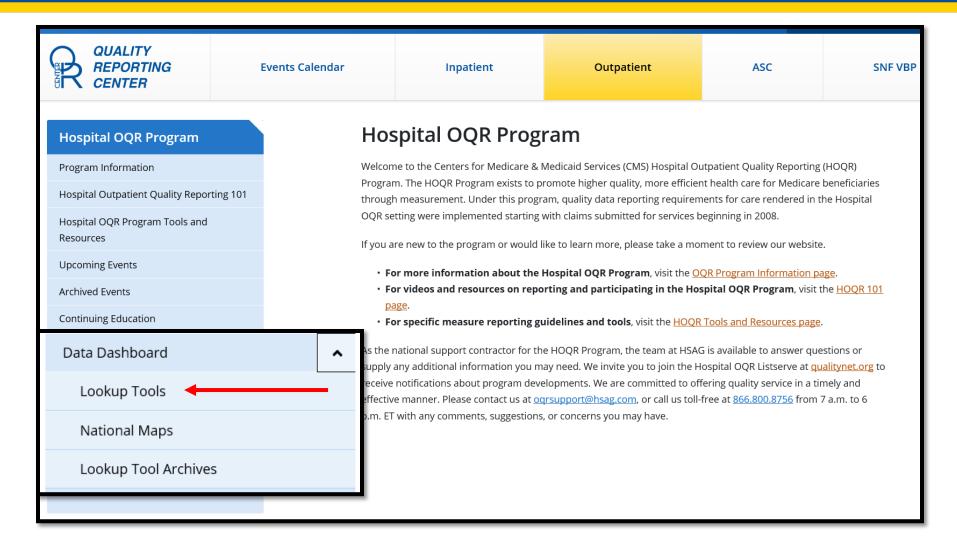
Home Page

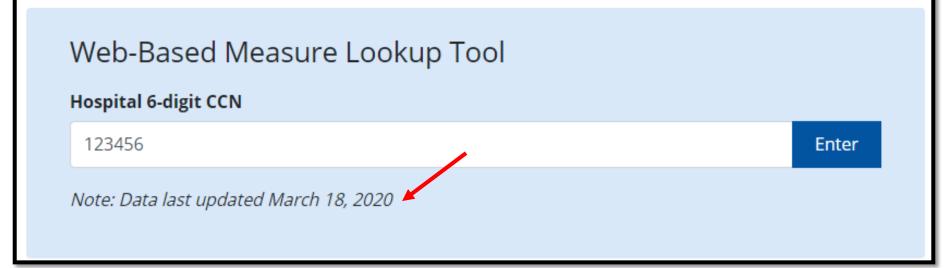QualityReportingCenter.com

Data Dashboard

Choose Lookup Tools

Enter You Facility

Web-Based Measures (PY2021)

The Web-Based Measure Status Listing is based on the most current information submitted to the Centers for Medicare & Medicaid Services (CMS). Enter the CMS Certification Number (CCN) for your facility to receive the status of your facility's data submission for all of the web-based measures submitted via the QualityNet web-based tool as of the date indicated. However, to document that all data submission requirements for the measures are complete, please log in to the QualityNet website and print a screenshot of the data submitted for your records.

Web-Based Measure Lookup Tool

Hospital 6-digit CCN

123456 | Enter |

Note: Data last updated March 18, 2020

Running Reports

- Provider Participation Report (PPR)
- Case Status Summary Report
- Submission Summary Report

Public Reporting

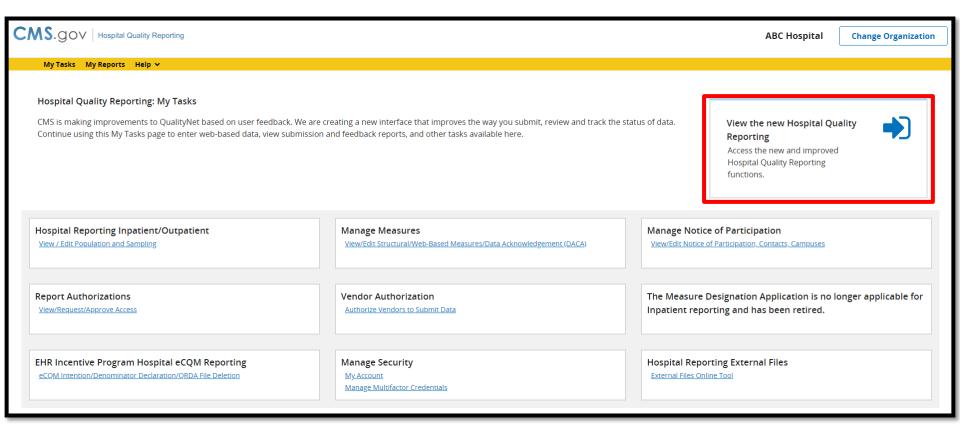# Coming Soon

Public Reporting:

- Plans to launch a simplified online experience
    - A new Provider Data Catalog on Data.Medicare.gov
    - Hospital Compare will be Medicare Care Compare
        - Streamlined experience to access information

Accessing Your Public Data

What's New?

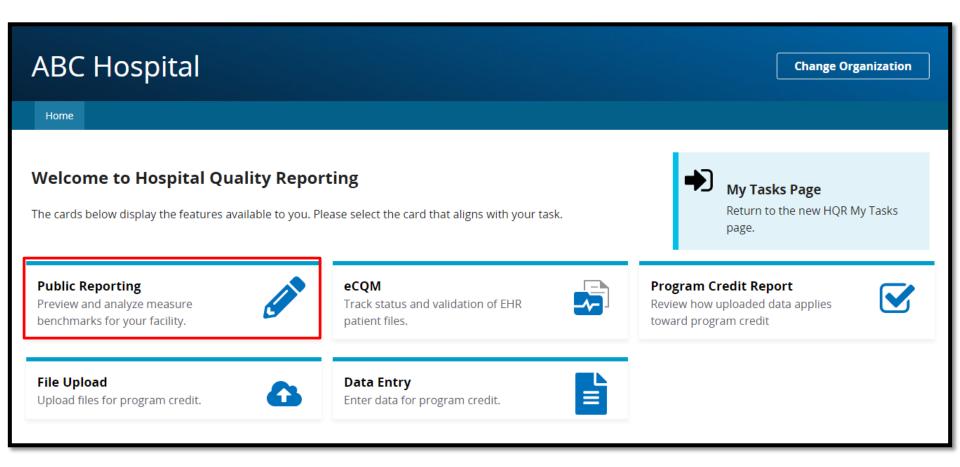- Data refresh was in January.
  - Chart-abstracted measures were updated.
  - This is the last data refresh for OP-5.
  - OP-32 was moved to a two-year data collection cycle using data from 2016–2018.
  - OP-35 and OP-36 are being displayed for the first time.
- April preview period was available February 10 through March 10, 2020.

Accessing Your Data

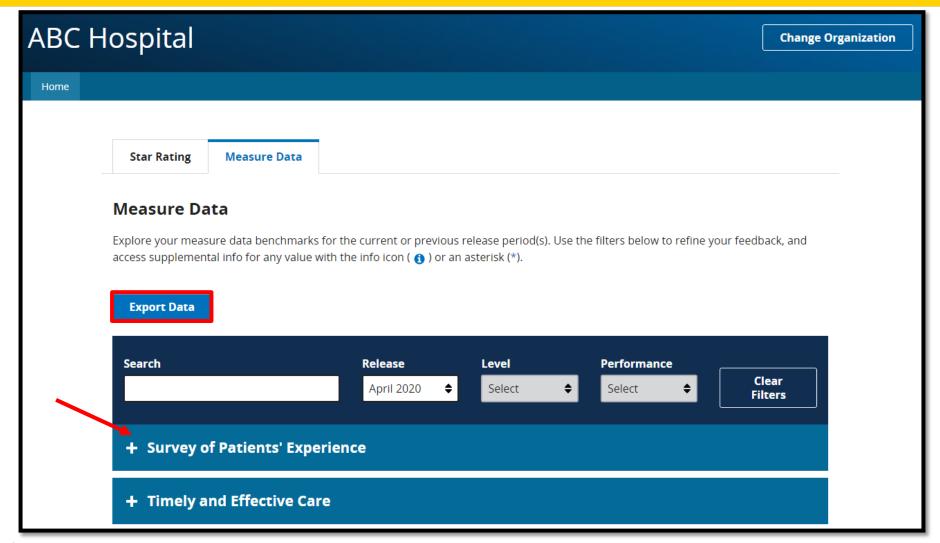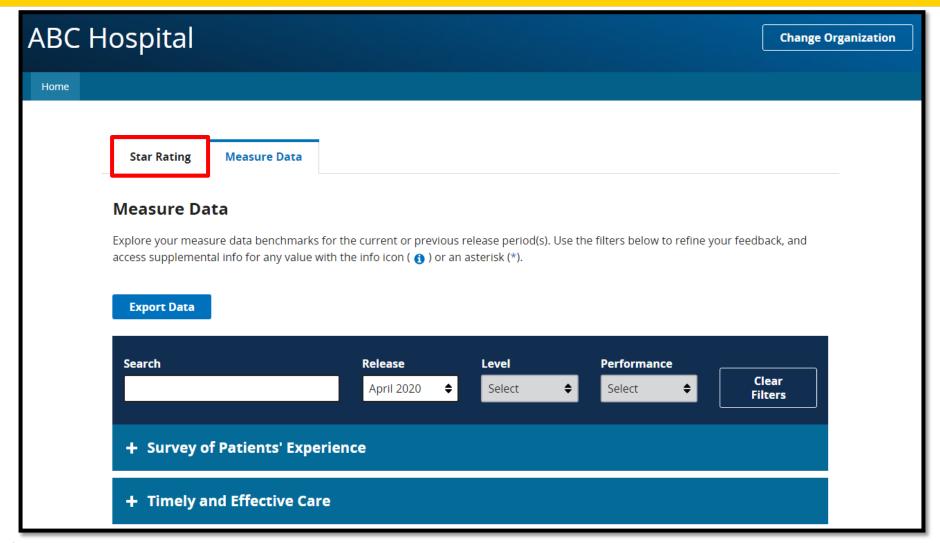# Select Public Reporting

Measure Data Tab

Available Tabs

+ **Survey of Patients' Experience**

+ **Timely and Effective Care**

+ **Structural Measures**

+ **Complications & Deaths**

+ **Unplanned Hospital Visits**

+ **Payment & Value of Care**

+ **Continuity of Care**

+ **Substance Use Treatment**

+ **Patient Experience**

+ **Preventive Care and Screening**

+ **Use of Medical Imaging**

Star Rating Tab

ABC Hospital — Change Organization

Home

Star Rating | Measure Data

Measure Data

Explore your measure data benchmarks for the current or previous release period(s). Use the filters below to refine your feedback, and access supplemental info for any value with the info icon (🛈) or an asterisk (*).

Export Data

Search	Release	Level	Performance	
	April 2020	Select	Select	**Clear Filters**

+ Survey of Patients' Experience

+ Timely and Effective Care

Star Rating

Star Rating Weight

Understanding Star Ratings

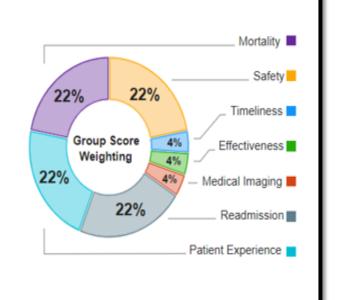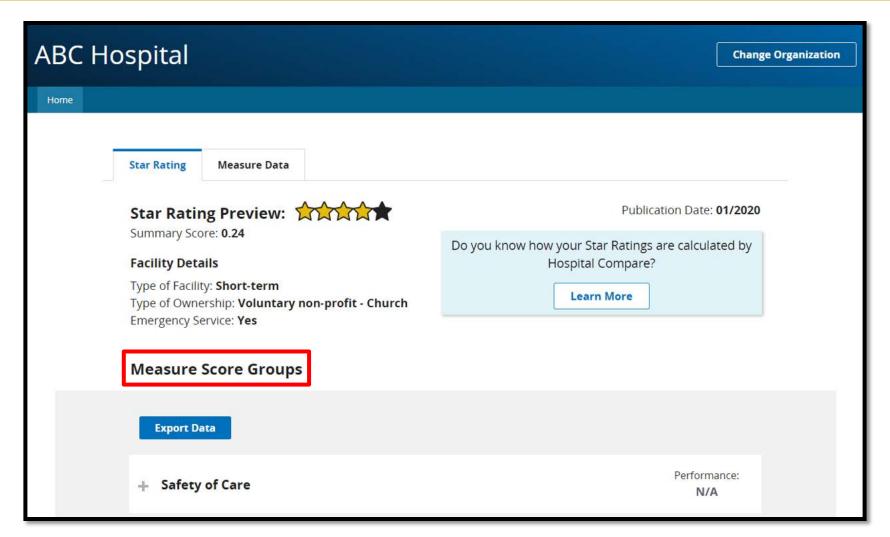Hospital Compare reports data from a wide variety of quality measures that cross many domains of care, including safety, patient experience, and other patient outcomes. Star Ratings are a way of summarizing the information contained in these quality measures, with a goal of helping patients and hospitals interpret the information contained in the individual measures.

Similar measures are grouped together into one of seven areas (e.g., safety or patient experience), and each of these groups is given a score. Group scores higher than the national average indicate better performance against national benchmarks. The group scores are then assigned a weight, and the weighted group scores are used to calculate a summary score. The summary score determines the hospital star rating.

Find more information here.

Group Score Weighting: Mortality 22%, Safety 22%, Timeliness 4%, Effectiveness 4%, Medical Imaging 4%, Readmission 22%, Patient Experience 22%

More Selections

Star Rating Groups

Upcoming System Updates

Healthcare Quality Information System (HCQIS)
Access Roles and Profile (HARP)

HARP

Overview

HARP:

- Provides a secure portal providing a single location for users.

- Registration is through *QualityNet.*
  - Uses two-factor authentication.

- Users will log in to the new reporting portal.

- Currently does not have a release date.

Polling Question

Resources

- To contact the Support Team Helpline:
  - 866.800.8756
- To access today's presentation:
  - www.qualityreportingcenter.com under the Archived Events tab
- To ask a question: <u>Quality Q&A Tool</u>
- To access *QualityNet*:
  - www.qualitynet.org

Questions

Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
  - It is your responsibility to submit this form to your accrediting body for credit.
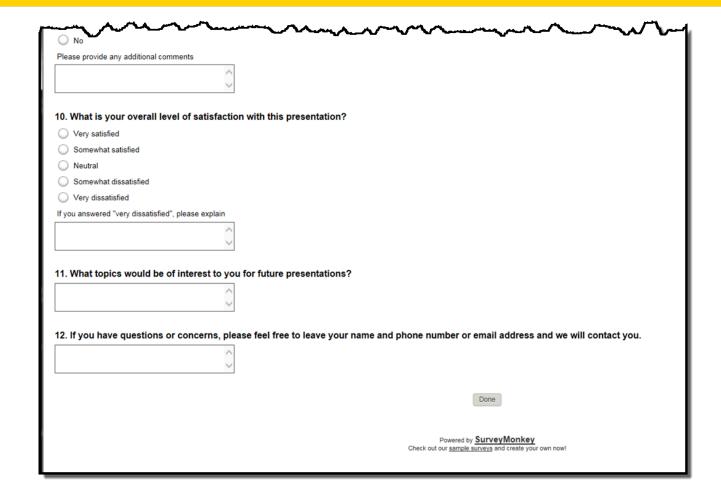
CE Credit Process

- Complete the GlobalMeet® survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.

- After completion of the survey, click "Done" at the bottom of the screen.

- Another page will open that asks you to register in HSAG's Learning Management Center.

  - This is separate from registering for the webinar. If you have not registered at the Learning Management Center, you will **not** receive your certificate.

  - Please use your **personal** email so you can receive your certificate.

  - Healthcare facilities have firewalls that block our certificates.

CE Certificate Problems?
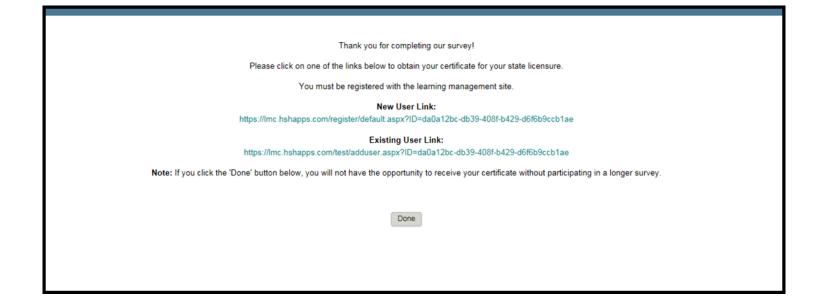
- If you do not immediately receive a response to the email you used to register in the Learning Management Center, a firewall is blocking the survey link.

- Please go back to the New User link and register your personal email account.

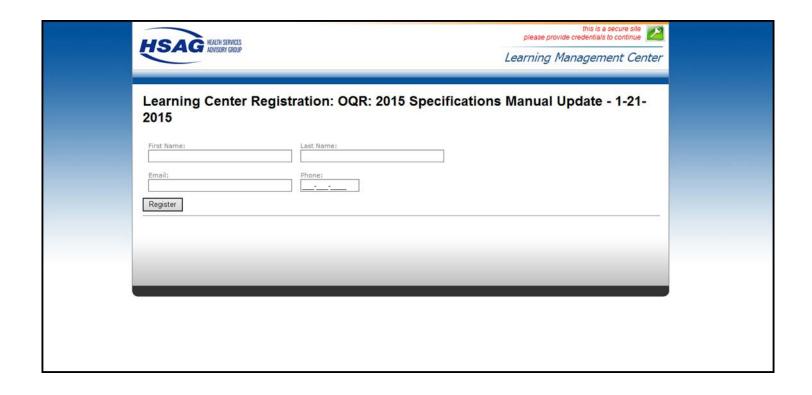- If you continue to have problems, please contact Artrina Sturges at asturges@hsag.com.

CE Credit Process: Survey

CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:
https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae

Existing User Link:
https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae

Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.
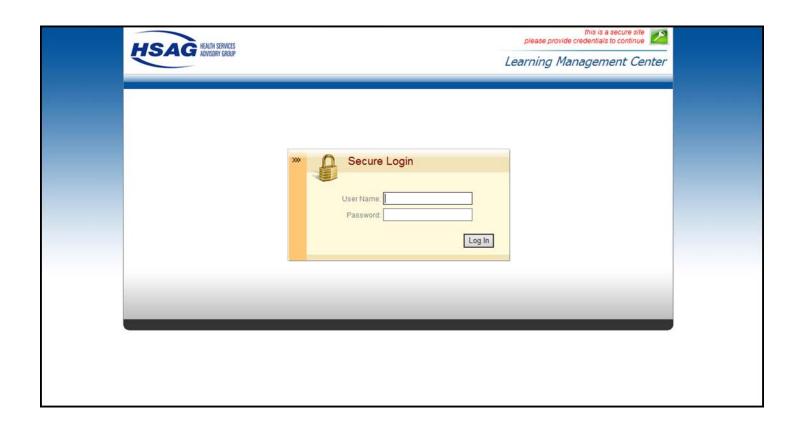
Done

CE Credit Process: New User

CE Credit Process: Existing User

References

- **Slides 6–13 and 27–34:** https://www.qualitynet.org/. Accessed on February 3, 2020.

- **Slides 18–21:** https://www.qualityreportingcenter.com/en/. Accessed on February 3, 2020.

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