April 2023 Release Preview Period: January 26 through February 24, 2023 Inpatient Public Reporting Preview Quick Reference Guide

Preview User Interface (UI) Access

Preview Period

Preview data will be available to participating inpatient facilities **January 26–February 24**, **2023**, via the *Hospital Quality Reporting Secure Portal* January 26 through February 24, 2023.

Access Preview Data

- 1. Navigate to the HQR page: <u>https://hqr.cms.gov/hqrng/login</u>
- 2. Enter your Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) User ID and Password. By logging in, you agree to the terms and conditions. Select Log In.
- 3. The **Two-Factor Authorization page appears**. Select **Text** or **Email**. Select **Next**.
- 4. Enter the code you received. Then, select **Next**.
- 5. On the **HQR landing** page, hover over **Lock Menu** on the left side.
- 6. Select Program Reporting.
- 7. From the drop-down menu, select **Public Reporting.**
- 8. The page will refresh, and the preview data will be available.

Note: CMS will not use data that reflect services provided January 1, 2020–June 30, 2020 (Q1 and Q2 2020) in its calculations for Medicare quality reporting. For more information, please refer to this <u>Listserve</u>.

Preview Content

Overall Hospital Quality Star Rating

Please see the Help Guide for details.

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey

- Results reflect Q3 2021–Q2 2022 discharges.
- You can preview individual questions from the HCAHPS composite measures in the downloadable database in the Provider Data Catalog (<u>PDC</u>); they are not displayed on Care Compare.
- HCAHPS scores based on fewer than 25 completed surveys will not be reported on Care Compare.

Timely and Effective Care Measures

- Influenza Vaccination Coverage Among Healthcare Personnel (HCP) displays 2021–2022 flu season data (Q4 2021–Q1 2022).
- COVID-19 Vaccination Coverage Among HCP displays the most recent quarter (Q2 2022).
- SEP-1 and PC-01 measure results include Q3 2021–Q2 2022 data. (Sepsis 3-hour & 6-hour bundles data are included on <u>PDC</u>.)
- Electronic Clinical Quality Measures (eCQMs) for VTE-1, VTE-2, STK-02, STK-03, STK-05, STK-06, PC-05, ED-2, and Safe Use of Opioids display data submitted via EHRs for CY 2021.

Structural Measure

The Maternal Morbidity Structural Measure displays Q4 2021 provider response.

Complication and Deaths

- The 30-Day Death Rate measure results reflect Q3 2018–Q4 2019 & Q3 2020–Q2 2021.
- CMS PSI measures results reflect Q3 2019–Q4 2019 & Q3 2020–Q2 2021.
- Healthcare-associated Infection (HAI) measure rates reflect Q3 2021–Q2 2022.
- Surgical complications rates reflect Q2 2018–Q4 2019 & Q3 2020–Q1 2021 discharges.

Unplanned Hospital Visits

- Condition-specific readmission rates reflect Q3 2018–Q4 2019 & Q3 2020–Q2 2021 discharges.
- Procedure-specific readmission rates reflect Q3 2018–Q4 2019 & Q3 2020– Q2 2021 discharges.
- Hospital-wide readmission rates reflect Q3 2020 and Q2 2021 discharges.
- Excess Days in Acute Care (EDAC) measure results reflect Q3 2018–Q4 2019 & Q3 2020–Q2 2021 discharges.

Payment and Value of Care

- Acute myocardial infarction (AMI), heart failure, and pneumonia (PN) payment measure results reflect Q3 2018–Q4 2019 & Q3 2020–Q2 2021 discharges.
- 90-day hip/knee payment measure results reflect Q2 2018–Q4 2019 & Q3 2020–Q1 2021 discharges.
- Medicare Spending per Beneficiary (MSPB) measure performance scores display for Q1 2021–Q4 2021 discharges.

Detailed measure information in the Preview UI may be found in the <u>Help Guide</u> on QualityNet. For those hospitals eligible to withhold data, the <u>Request for Withholding Data from Public Reporting</u> <u>Form</u> must be received by the Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor no later than February 24, 2023.