

## Quarter 2 (Q2) 2023 Hospital Inpatient Quality Reporting (IQR) Program Checklist

Due	Task	✓
10/4/23	<p><b>Checking Submission of Q2 2023 Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Data</b></p> <p><i>HCAHPS Survey Data</i> should display as <b>“Submitted”</b> for <i>April, May, and June</i> on the Provider Participation Report (PPR). See below, under Checking Submission of Q2 2023 Inpatient Data, for guidance on how to run reports.</p>	<input type="checkbox"/>
11/1/23	<p><b>Submitting Q2 2023 Inpatient Population and Sampling Counts Through the <i>Hospital Quality Reporting (HQR) Secure Portal</i> (applies to chart-abstracted measures only)</b></p> <ol style="list-style-type: none"> <li>1. <b>Log in</b> to the <i>Hospital Quality Reporting Secure Portal</i> using your HARP User ID and Password.</li> <li>2. Go to the Dashboard located on the left-hand side of the screen.</li> <li>3. <b>Click</b> Data Submissions from the navigation on the left-hand side of the screen.</li> <li>4. <b>Select</b> the Population and Sampling tab.</li> <li>5. <b>Click</b> Data Form.</li> <li>6. <b>Click</b> IQR.</li> <li>7. Verify that the Reporting Period is Q2 2023 and <b>Click</b> on Enter.</li> </ol> <p><b>Submitting Q2 2023 Inpatient Population and Sampling XML Files Via Simple File Submissions Through the <i>Hospital Quality Reporting Secure Portal</i> (applies to chart-abstracted measures only)</b></p> <ol style="list-style-type: none"> <li>1. <b>Log in</b> to the <i>Hospital Quality Reporting Secure Portal</i> using your HARP User ID and Password.</li> <li>2. Go to the Dashboard located on the left-hand side of the screen.</li> <li>3. <b>Click</b> Data Submissions from the navigation on the left-hand side of the screen.</li> <li>4. <b>Select</b> the Population and Sampling tab.</li> <li>5. <b>Click</b> File Upload.</li> <li>6. <b>Click</b> IQR.</li> <li>7. <b>Select</b> Production. Data submitted under Test will not be stored in the HQR Secure Portal and will not count as meeting program requirements.</li> <li>8. Verify that the Reporting Period is Q2 2023 and <b>Click</b> on Enter.</li> </ol>	<input type="checkbox"/>
11/15/23	<p><b>Checking Submission of Q2 2023 Inpatient Data</b></p> <ol style="list-style-type: none"> <li>1. <b>Log in</b> to the <i>Hospital Quality Reporting Secure Portal</i> using your HARP User ID and Password.</li> <li>2. Go to the Dashboard located on the left-hand side of the screen.</li> <li>3. <b>Select</b> Program Reporting from the navigation on the left-hand side of the screen.</li> <li>4. <b>Select</b> Reporting Requirements from the dropdown. This is where you check to see if your organization is meeting reporting requirements. This encompasses data from <i>QualityNet</i> reports, including eCQM Submission Status, Provider Participation Report (IQR, OQR, IPFQR). Access is dependent upon permissions.</li> <li>5. <b>Select</b> IQR from the Program dropdown.</li> <li>6. <b>Select</b> Q2 2023 from the Quarter dropdown.</li> <li>7. <b>Click</b> Export CSV.</li> <li>8. <b>View</b> the PPR for the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> Column M “measure_set” (<i>Measure Set</i>): IQR-SEP</li> <li><input type="checkbox"/> Column Q “population” (<i>Total Patient Population</i>) and column P “sample” (<i>Total Sample Size</i>) case counts will display using Population and Sampling data. <b>“Not Submitted”</b> means Population and Sampling counts have not been submitted. If submitting, this must be done before the Population and Sampling deadline. Please see the Population and Sampling directions above.</li> <li><input type="checkbox"/> Column N “total-cases” (<i>Total Cases Accepted</i>) column should be <math>\geq</math> your <i>Total Patient Population</i> and/or column O “total_claims” (<i>Total Medicare Claims</i>) unless you are electing to sample. If your hospital is sampling, ensure the <i>Total Cases Accepted</i> are <math>\geq</math> the minimum sample requirement.</li> <li><input type="checkbox"/> <i>PC-01 Elective Delivery</i> (Clinical Web-Based Measure): Numbers or zeroes are acceptable. If your report displays <b>“Not Submitted,”</b> these data have not been entered. “Not Submitted” is acceptable if you filed an <a href="#">IPPS Measure Exception Form</a>. The PC-01 data are located under columns T through AC.</li> <li><input type="checkbox"/> <i>HCAHPS Survey Data</i> is located under columns AD through AF.</li> </ul> </li> </ol>	<input type="checkbox"/>

**Quarter 2 (Q2) 2023 Hospital Inpatient Quality Reporting (IQR) Program Checklist**

Due	Task	✓
11/15/22	<p><b>Submitting Q2 2022 HCP COVID-19 Vaccination Measure</b></p> <p><b>NOTE: Data is entered in the <a href="#">National Healthcare Safety Network (NHSN)</a>.*</b></p> <ol style="list-style-type: none"> <li><b>Log in</b> to NHSN.</li> <li><b>Select</b> the Healthcare Personnel Safety (HPS) component.</li> <li><b>Select</b> Vaccination Summary on the left-hand navigation bar.</li> <li><b>Select</b> COVID-19 Weekly Vaccination Summary.</li> <li><b>Click</b> on the week you wish to enter data.</li> <li>Enter the required vaccination summary data.</li> <li>Use the Analysis tool, within NHSN, to generate summary reports.</li> </ol> <p><b>Checking Submission of Q2 2022 HCP COVID-19 Vaccination Measure</b></p> <ol style="list-style-type: none"> <li><i>HCP COVID-19 Vaccination</i> data should display as “<b>Submitted</b>” on the PPR. See steps 1 through 5 above for guidance on how to access and run the PPR.</li> <li>To verify your <i>HCP COVID-19 Vaccination</i> rate, run the Facility, State, and National (FSN) Report. * Refer to the Hospital IQR Program NHSN Checklist for additional information on the NHSN enrollment and data submission processes.</li> </ol>	

For questions, contact the IQR Program Support Contractor at (844) 472-4477, (866) 800-8765, or via the Hospital Inpatient Questions and Answers tool at [https://cmsqualitysupport.servicenowservices.com/qnet\\_qa](https://cmsqualitysupport.servicenowservices.com/qnet_qa).