

#### Submitting Voluntary Hybrid Measure Data

August 11, 2023

#### **Speakers**

Veronica Dunlap, BSN, RN, CCM

Lead

Alignment of Electronic Clinical Quality Measure (eCQM) Reporting Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor

#### Michael Cocchiola, MPA

**Project Coordinator** 

Yale New Haven Health Services Corporation (YNHHS)/ Center for Outcomes Research & Evaluation (CORE)

#### **Alexandra Arndt**

Project Manager Inpatient VIQR Outreach and Education Support Contractor

2

#### Purpose

This presentation provides the reporting requirements and *Hospital Quality Reporting (HQR) Secure Portal* submission processes for the 2024 voluntary reporting of Hybrid Hospital-Wide Readmission (HWR) and Hybrid Hospital-Wide Mortality (HWM) measure data.

3

### **Objectives**

Participants will be able to:

- Summarize the 2024 voluntary reporting requirements for the Hybrid HWR and/or Hybrid HWM measures for the Hospital Inpatient Quality Reporting (IQR) Program.
- Navigate to the HQR User Interfaces (UIs) for hybrid measure data submission.
- Understand the steps to upload and review hybrid measure data accuracy in the HQR Secure Portal.
- Understand the answers to some commonly asked questions.

### **Acronyms and Abbreviations**

САН	critical access hospital	HICN	Health Insurance Claim Number
CCDE	core clinical data elements	HQR	Hospital Quality Reporting
CCN	CMS Certification Number	HSR	Hospital-Specific Report
CCSQ	Center for Clinical Standards and Quality	нwм	Hospital-Wide Mortality
CMS	Centers for Medicare & Medicaid Services	HWR	Hospital-Wide Readmission
CORE	Center for Outcomes Research & Evaluation	IG	implementation guide
CSV	Comma-Separated Value	IQR	Inpatient Quality Reporting
eCQI	electronic clinical quality improvement	MBI	Medicare Beneficiary Identifier
eCQM	electronic clinical quality measure	MFT	Managed File Transfer
EHR	electronic health record	ONC	Office of the National Coordinator for Health Information Technology
FFS	Fee for Service	QRDA	Quality Reporting Document Architecture
FY	fiscal year	UI	User Interface
HARP	Healthcare Quality Information System Access Roles and Profile	YNHHS	Yale New Haven Health System

#### **Webinar Questions**

- Please email questions pertinent to this webinar topic to <u>WebinarQuestions@hsag.com</u>.
- Write the webinar title in the subject line.
- If your question pertains to a specific slide, include the slide number in the body of the email.

6

Michael Cocchiola, MPA Project Coordinator, YNHHS/CORE

**Reporting Requirements** 

### Fiscal Year (FY) 2025 Hybrid HWR and Hybrid HWM Measures

CMS Program	Hospital IQR Program
Reporting Period	2024 Voluntary Reporting
Measurement Period	7/1/2022–6/30/2023
Data Submission Deadline	October 2, 2023
Hospital-Specific Report Distribution	Anticipate Spring 2024
Public Reporting/Annual Payment Update	N/A
Certified Electronic Health Record (EHR) Technology	2015 Edition Cures Update Criteria

**Specifications:** Hybrid HWR (CMS529v2): <u>Core Clinical Data Elements (CCDEs) for the Hybrid</u> <u>HWR Measure with Claims and Electronic Health Record Data</u> and Hybrid HWM (CMS844v2): <u>CCDEs for the Hybrid HWM Measure</u>

#### **Reporting Resources:**

- Electronic Clinical Quality Improvement (eCQI) Resource Center: Eligible Hospital/Critical Access Hospital (CAH) eCQMs <u>page</u>, Hybrid Measures tab, 2022 reporting period
- QualityNet.CMS.gov: <u>Hospitals-Inpatient/Measures (Hybrid)</u>

8

### Voluntary Reporting of the Hybrid HWR Measure

Hospitals participate by submitting 13 CCDEs (6 vital signs + 7 laboratory test results) and 6 linking variables by October 2, 2023.

6 Vital Signs	7 Laboratory Test Results	6 Linking Variables
Heart rate	Hematocrit	CMS Certification Number
Treattrate	Tiematoent	(CCN)
		Health Insurance Claim
Respiratory rate	White blood cell count	Number (HICN) or Medicare
		Beneficiary Identifier (MBI)
Temperature	Sodium	Date of Birth
Systolic blood pressure	Potassium	Sex
Oxygen saturation	Bicarbonate	Admission Date
Weight	Creatinine	Discharge Date
	Glucose	

https://ecqi.healthit.gov/sites/default/files/ecqm/measures/CMS529v2.html

9

### Voluntary Reporting of the Hybrid HWM Measure

Hospitals participate by submitting 10 CCDEs (4 vital signs + 6 laboratory test results) and 6 linking variables by October 2, 2023.

4 Vital Signs	6 Laboratory Test Results	6 Linking Variables
Heart rate	Hematocrit	CCN
Temperature	White blood cell count	HICN or MBI
Systolic blood pressure	Sodium	Date of Birth
Oxygen saturation	Bicarbonate	Sex
	Creatinine	Admission Date
	Platelet	Discharge Date

https://ecqi.healthit.gov/ecqm/hybrid/2022/cms844v2#quicktabs-tab-tabs\_hybrid\_measure-1

### Mandatory Reporting Submission Requirements

Hybrid HWR Measure	Hybrid HWM Measure
Submit 13 CCDEs (6 vital signs + 7 laboratory test results) + six linking variables via Quality Reporting Document Architecture (QRDA) Category I files	Submit 10 CCDEs (4 vital signs + 6 laboratory test results) + six linking variables via QRDA Category I files

To successfully meet Hospital IQR Program participation requirements for the hybrid measures, hospitals will need to:

- Submit linking variables on 95% or more of discharges with a Medicare Fee for Service (FFS) claims for the same hospitalization during the measurement period.
- Report vital signs for 90% or more of the hospital discharges for Medicare FFS patients, 65 years or older (between 65 and 94 years for the Hybrid HWM measure) in the measurement period (as determined from the claims submitted to CMS for admissions that ended during the same reporting period).
- Submit the laboratory test results for 90% or more of discharges for non-surgical patients, meaning those not included in the surgical specialty cohort of the Hybrid HWR measure (or the surgical divisions of the Hybrid HWM measure).

## **QRDA Category I Files**

Information	Details
Submit	One file, per patient, per quarter
Each patient-level file	Includes all CCDEs and linking variables for each eligible hospital discharge
Maximum individual file size	10 MB
Upload via zip file (.zip).	<ul><li>Verify the zip file does not contain other zip files.</li><li>Hospitals may submit more than one zip file.</li></ul>
Max number of files within zip file	14,999
Five Key Elements	<ol> <li>CCN</li> <li>CMS Program Name: HQR_IQR_VOL</li> <li>EHR Patient ID</li> <li>Reporting Period specified in Reporting Parameters section</li> <li>EHR Submitter ID</li> </ol>
The <i>HQR Secure Portal</i> assigns EHR Submitter ID to submitters registering for system access to upload files.	<ul> <li>Vendor EHR Submitter ID = Vendor ID</li> <li>Hospitals EHR Submitter ID = CCN</li> </ul>
08/11/2023	Assemuma 12

### **Implementation Timeline**

Im	plementation Tir	meline for the H	lybrid HWR/HV	VM Measures	
Reporting Period	Measure	Performance Period	Data Submission Deadline	Hospital- Specific Report (HSR) Distribution	Public Reporting
2023 Voluntary Reporting	Hybrid HWR	Hospitalizations 7/1/21–6/30/2022	September 30, 2022	May 15, 2023	N/A
2024 Voluntary Reporting	Hybrid HWR and/or Hybrid HWM	Hospitalizations 7/1/22–6/30/2023	October 2, 2023	Spring 2024	N/A
2025 Mandatory Reporting*	Hybrid HWR <u>and</u> Hybrid HWM	Hospitalizations 7/1/23–6/30/2024	October 1, 2024	Spring 2025	Summer 2025

\*Mandatory for all subsection (d) hospitals participating in the Hospital IQR Program. These data will impact the FY 2026 payment determination and measure results will be publicly reported.

08/11/2023

Michael Cocchiola, MPA Project Coordinator, YNHHS/CORE

#### **Technical Resources and Tools**

#### Voluntary Reporting Key Dates and Resources Document

2022 Reporting Period Eligible Hospital / Critical Access Hospital Resources

Implementation Checklist eCQM Annual Update

eCQM Specifications for Hybrid CMS529v2 (ZIP)

eCOM Specifications for CMS844v2 (ZIP)

eCQM and Hybrid Measure Value Sets

Binding Parameter Specification (BPS) (ZIP)

Technical Release Notes Hybrid for CMS529v2 (Excel)

2022 CMS QRDA I Implementation Guide for Hospital

2022 CMS QRDA I Schematrons and Sample Files (ZIP)

2024 Voluntary Reporting Key Dates and Resources:

eCQM Annual Update Pre-Publication Document (PDF)

Hybrid HWR and Hybrid HWM Measures (PDF)

Quality Reporting (PDF)

Short Description

**(i)** 

í

Measures (i)

terminology (i)

samples (i)

Value set metadata (i)

Implementation checklist (i) Hybrid measure technical specifications

Hybrid measure technical specifications

Value sets used with eCQMs and Hybrid

Year over year changes to eCQM logic and

Format for reporting eCQMs to CMS (i)

Rules to validate eCQM reports with

Key dates and resources for hybrid

Standards and code system versions for

measure reporting (i)

the eCQM Annual Update (i)

Published 🔶

May 2021

May 2021

May 2021

May 2021

May 2021

Nov 2021

Nov 2021

Jan 2022

Feb 2021

eCQM Resources

For Use 🔶

2022 Q3-2023 Q2

2022 03-2023 02

2022 Q3-2023 Q2

2022 Q3-2023 Q2

2022 03-2023 02

2022 03-2023 02

2022 Q3-2023 Q2

2022 Q3-2023 Q2

2022 Q3-2023 Q2

2022 03-2023 02

This document summarizes key d the Hybrid HWR or the Hybrid HW	Introducti ates and resources for hospit /M Measure, For the 2024 V	on tals participatio oluntary Repo	ng in the 2024 Voluntary Reporting of ting, hospitals can voluntarily submit
data for (i) the Hybrid HWR Meas Hybrid HWM Measures.	ure only, (ii) the Hybrid HWN	A Measure onl	y, or (iii) both the Hybrid HWR and
Option 1 Hybrid HWR Only Submit information on: 13 CCDEs (6 vital signs and 7 laboratory test results) 6 linking variables	2024 Voluntary Repo Option 2 Hybrid HWM Only Submit information 0 • 10 CCDEs (4 vital 6 laboratory test • 6 linking variable	orting Option on: signs and results) es	15 Option 3 Hybrid HWR and Hybrid HWM Submit information on: • 14 CCDEs (6 vital signs and 8 laboratory test results) • 6 linking variables
For the 2024 Voluntary Reportin For discharges occurring b By October 2, 2023 Hospitals will receive Hospital-S	Key Date ag of the Hybrid Measures, p etween July 1, 2022 – June 3 pecific Reports (HSRs) in Spri	es articipating ho 30, 2023 ing 2024.	spitals should submit data:
Please submit hybrid measure qu https://cmsqualitysupport.service Quality Reporting under "Progran submit your questions via JIRA <u>ht</u>	Question estions to the QualityNet Qu nowservices.com/qnet_qa? h", and then (ii) Hybrid Meas tps://oncprojectracking.heal	s? lestion and Ans id=ask_a_ques ures under "To thit.gov/suppo	swer tool at <u>tion</u> by selecting: (i) IQR - Inpatient ppic" or <u>rtt/browse/CHM</u> .
eCQI Resource Center https://ecqi.healthit.g tabs_eh=3&year=2021≷ 2022 Reporting Period [Pw eCQM Specifications for Cl (version 2.0.000) eCQM Specifications for Cl (version 2.0.000) Hybrid HWR and Hybrid H Reference Codes Hybrid HWR and Hybrid H Specifications Hybrid HWR Technical Rel eCOM Appual Urdate Imo	r – Hybrid Page tov/eh-cah?qt- obalyearfilter=2022 blished May 2021] MS529v2 (Hybrid HWR) MS844v2 (Hybrid HWM) WM Value Sets and Direct WM Binding Parameter ease Notes lementation Checklist	eCQI http 2022 CM Guide fe 2022 CM Files for	Resource Center – QRDA is://ecqi.healthit.gov/qrda AS QRDA Category I Implementation or Hospital Quality Reporting AS QRDA I Schematrons and Sample Hospital Quality Reporting
and Pre-Publication Docur	nent		
Annual oppose imp and Pre-Publication Docur Resources on Qua     2024 Claims-based HWR N	nent lityNet <u>https://www.qual</u> feasure Updates and Specifi	itynet.org/inj	patient/measures/hybrid (to be posted in spring 2024)

- 2024 Hybrid HWR and HWM Frequently Asked Questions (to be posted in spring 2024)
- 2024 Hybrid HWR and HWM Fact Sheets (to be posted in spring 2024)

#### **Resources for Voluntary Reporting**

Eligible Hospital / ECQMs Receive updates on this topic Select Period 2022 Filter By Hybrid Measures App Find older eCQM specifications in the eCQM Standards and Tools Version tab EH/CAH eCQMs About	Critical Access Hospita		
2022 Reporting Period Eligible Hospital / Critical Access Hospital Resource	eCQM Resources	Short Description	Published 🗢
Filter Desources by	Implementation Checklist eCQM Annual Update	Implementation checklist (j	
	eCQM Specifications for Hybrid CMS529v2 (ZIP)	Hybrid measure technical specifications (3)	May 2021
- Any - (Implementation Guidance) (Reporting References)	eCQM Specifications for CMS844v2 (ZIP)	Hybrid measure technical specifications ③	May 2021
	eCQM and Hybrid Measure Value Sets [2]	Value sets used with eCQMs and Hybrid Measures	May 2021
	Binding Parameter Specification (BPS).(ZIP)	Value set metadata 🚯	May 2021
	Technical Release Notes Hybrid for CMS529v2 (Excel)	Year over year changes to eCQM logic and terminology (i)	May 2021
	2022 CMS QRDA I Implementation Guide for Hospital Quality Reporting (PDF)	Format for reporting eCQMs to CMS ③	Nov 2021
	2022 CMS QRDA I Schematrons and Sample Files (ZIP)	Rules to validate eCQM reports with samples (j)	Nov 2021
	2024 Voluntary Reporting Key Dates and Resources: Hybrid HWR and Hybrid HWM Measures (PDF)	Key dates and resources for hybrid measure reporting ④	Jan 2022
	eCQM Annual Update Pre-Publication Document (PDF)	Standards and code system versions for the eCQM Annual Update ④	Feb 2021

Electronic specifications of the measure are on the eCQI Resource Center: https://ecqi.healthit.gov/eh-cah?qt-tabs\_eh=0&globalyearfilter=2022&global\_measure\_group=3721

## Use 2022 IG: Hybrid Measure/ CCDE Voluntary Submission

- The Implementation Guide (IG) for 2022 must be used for hybrid measure/CCDE voluntary submission for reporting 2022–2023 data.
  - Measurement period: July 1, 2022–June 30, 2023
  - Submission deadline:
     October 2, 2023
- Refer to Section 6:
   *Hybrid Measure/CCDE Voluntary Submission*



CMS IG QRDA Category I for HQR, Schematrons and Sample Files are on the eCQI Resource Center: <u>https://ecqi.healthit.gov/eh-cah?qttabs\_eh=0&globalyearfilter=2022&global\_measure\_group=3721</u>

### **Resources for Voluntary Reporting**

Claims-based specifications of the measure are/will be located on the QualityNet website at these pages:

<u>https://qualitynet.cms.gov ></u> <u>Hospitals - Inpatient > Measures ></u> <u>Hybrid Measure > Methodology</u>

#### ome / Hospitals - Inpatient / Measures / Hybrid Measure / Methodology Overview Methodology Reports Resources Hybrid Measure Methodology The measure methodology for the Hybrid Hospital-Wide Readmission (HWR) and Hybrid Hospital-Wide Mortality (HWM) measures contains claims-based specifications and electronic specifications. This is because the Hybrid measures merge electronic health record (EHR) data elements with claims data to calculate the risk-standardized rates. The measure specifications reports contain all the specifications for the Hybrid measures. The electronic measure specifications documents describe how the electronic core clinical data elements (CCDEs) should be extracted from the EHR for the risk model for the Hybrid measures. Additional rationale of CMS' methodological decisions during development and reevaluation of the complication measure is available in the Frequently Asked Questions and Fact Sheet documents. 2023 Hybrid Measure Claims-Based Updates Date File Type File Name Posted File Size 2023 All-Cause Hospital-Wide Measure Updates and Specifications 05/15/23 PDF 1 MB Download Report: Hospital-Wide Readmission 2023 Hospital-Wide Readmission Measure Code Specifications 05/15/23 XLSX 612 KB Download Supplemental File Present on Admission (POA)-Exempt Codes Considered Always POA for 05/15/23 XLSX 835 KB Download 2023

Provides information on codes always considered to be POA for claims-based measures.

<u>https://qualitynet.cms.gov ></u> <u>Hospitals - Inpatient > Measures ></u> <u>Readmission Measures > Methodology</u>

	odology								
Overview	Methodology	Reports	Reducing Readr	missions F	Resources				
	Readmission	Measure	es Methodo	logy					
	The methodology an measures, and the 2	nd updates rep 1023 measure i	orts listed below updates and quali	describe the m ity assurance ad	ethods us ctivities.	ed to deve	lop the risk-s	standardized re	admission
	Additional rationale of CMS methodological decisions during development and reevaluation of the readmission measures is available in the Frequently Asked Questions and Measure Development Background Fact Sheet documents.								
	2023 Readmission Measures Updates								
	2023 Readmissio	on Measures	s Updates						
	2023 Readmissio CMS contracted with Outcomes Research 2023 reports describ	on Measures a team of clin and Evaluation be the measure	s Updates nical and statistica n (YNHHSC/CORE) es' re-evaluation a	l experts from ` to develop, an activities condu	Yale New id annuall cted in pro	Haven Hea y re-evalua eparation f	lth Services te and upda or 2023 pub	Corporation - C te the readmiss lic reporting.	enter for slon measures. T
	2023 Readmissio CMS contracted with Outcomes Research 2023 reports describ File Name	on Measures a a team of clin and Evaluation be the measure	s Updates nical and statistica n (YNHHSC/CORE) es' re-evaluation a	l experts from \ ) to develop, an activities condu	Yale New Id annuall cted in pro	Haven Hea y re-evalua eparation f Date Posted	lth Services te and upda or 2023 pub File Type	Corporation - C te the readmiss lic reporting. File Size	enter for slon measures. T
	2023 Readmissio CMS contracted with Outcomes Research 2023 reports descrite File Name 2023 Condition-Spi Specifications Repo (HF), and Chronic C Pneumonia	on Measures a team of clin and Evaluatio be the measure the measure ecific Readmis ort: Acute Myo Obstructive Pul	s Updates hical and statistica n (YNHHSC/CORE) es' re-evaluation a sion Measure Upo cardial Infarction Imonary Disease (	l experts from ' to develop, an ctivities condu- dates and (AMI), Heart Fal COPD), and	Yale New Id annuali cted in pro	Haven Hea y re-evalua eparation f Date Posted 05/03/23	Ith Services of the and update or 2023 public services of the service of the serv	Corporation - C te the readmiss lic reporting. File Size 1.8 MB	enter for slon measures. T Download
	2023 Readmissio CMS contracted with Outcomes Research 2023 reports describ File Name 2023 Condition-Spp Specifications Repc (HF), and Chronic C Pneumonia 2023 AMI Readmis	on Measures a team of cliri and Evaluation be the measure ecific Readmiss ort: Acute Myo Obstructive Pull sion Measure	s Updates iical and statistica n (YNHSC/CORE) es' re-evaluation a sion Measure Upp cardial Infarction Imonary Disease ( Code Specification	l experts from 1 to develop, an cctivities conduc dates and (AMI), Heart Fai COPD), and ns Supplementa	Yale New Ind annually cted in pro-	Haven Hea y re-evalua eparation f <b>Date</b> <b>Posted</b> 05/03/23	Ith Services ite and upda or 2023 pub	Corporation - C te the readmiss lic reporting. File Size	enter for sion measures. T Download Download
	2023 Readmissio CMS contracted with Outcomes Research 2023 reports describ File Name 2023 Condition-Spp Specifications Repc (HF), and Chronic C Pneumonia 2023 AMI Readmis 2023 COPD Readm File	on Measures a a team of clir and Evaluatio be the measure ecific Readmis ort: Acute Myo Distructive Pul sion Measure	s Updates iical and statistica n (YNHSC/CORE) es' re-evaluation a sion Measure Upp cardial Infarction Imonary Disease ( Code Specification e Code Specification	l experts from ' to develop, an ictivities condui dates and (AMI), Heart Fai COPD), and ns Supplementa	Yale New Id annuall cted in pro ilure al File ntal	Haven Hea y re-evalua eparation f Date Posted 05/03/23 05/03/23	Ith Services I te and upda or 2023 pub File Type PDF XLSX XLSX	Corporation - C te the readmiss lice reporting. <b>File Size</b> 1.8 MB 727 KB 701 KB	enter for sion measures. T Download Download

### Hybrid Measure HSRs

- Available in Spring 2024
- Display detailed measure results, discharge-level data, and data submission requirements
- Available by logging into HQR System
  - Health Care Quality Information Systems Access Roles and Profile (HARP) account with Managed File Transfer (MFT) permission required
  - Video tutorial: <u>https://www.youtube.com/watch?v=3DEE8lcuf\_w</u>
- HSR User Guide and Mock HSR on QualityNet: <u>https://qualitynet.cms.gov/inpatient/measures/hybrid/reports</u>
- Contact CCSQ Service Center for assistance

Veronica Dunlap, BSN, RN, CCM Lead, Alignment of eCQM Reporting, Inpatient VIQR Support Contractor

**Data Submission Process** 

### Steps to Submit Hybrid Measure Data

- Log Into the HQR System via HARP at <u>https://hqr.cms.gov</u>.
- Access the HQR landing page.
- Assign/Edit User Permission.
  - Users will require the eCQM permission
- Complete Vendor Authorization process.
- Upload QRDA Category I Files.
- Review File Upload History UI and export.
- Review Submission Accuracy UI and export.

# Log in to the HQR System

You will need to log into the HQR system.

- 1. Go to <u>https://hqr.cms.gov/hqrng/login</u>.
- 2. Enter your HARP user ID and password.
- 3. Click the hyperlink below the Password field to view the Terms & Conditions for accessing the HQR system.

	Sign up
	Log in Enter your HARP user ID and password
	User ID
Welcome to	Password
	Password
	Having trouble logging in? By logging in, you agree to the Terms & Conditions

### Two-Factor Authentication Security Code

Complete two-factor authentication process.

 Select an option for two-factor authentication to be sent to verify your account. Then, click Next.



2. Enter the code received. Then, click Next.

Two-fac	tor authentication
Code sent via	a SMS to +
Enter code	
	de 🛛 🛱 Change method
Next	Cancel

#### Access the HQR Landing Page

Once logged in, you will see the HQR landing page.

- 1. Hover your mouse on the left side of the screen to expand the menu options.
- 2. Click the Lock Menu symbol to read the options.



Basic users will need to add/edit the <u>eCQM permission</u> to upload/edit hybrid measure data.

1. From landing page, click on Username in the top-right corner. Then, select My Profile.

CMS.gov Hospital Quality Reporting	My Profile	•
Are you expecting to receive facility-specific or dams-detail reports in Managed File Transfer MFT2 Users who historically received these reports through ther AutoRouse Intous in Secure File Transfer may need to request permissions in the Hospital Quality Reporting system to commute to receive these reports for their trainies. Refer to the <u>important: Request Access to Managed File Transfer (MFT) &amp; Auto-Baner Now to Ensure You Receive Your Reports</u> , notification to learn more about requesting permissions to access your reports!      The New HQR is Coming      We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many	Logout	
exciting their textures to thely you execute your responsibilities taster, and with those combence.  New Check out the navigation on the left:		
Here are some of the key features of the new Hospital Quality Reporting Intuitive Interfaces Simple Submissions Advanced Security Reliable Calculations		

# 2. Under your Organization, click on the three vertical dots and select Request Change in Access.

Letter Password	1 🗹 🔍 Update 2-Facto	or Authentication 🗹	? Update Challenge Q	uestion 🗹		
Organization Acc	ess				Create Acce	ess Request
My Organizations	Access Requests					
Here are the organizati you to view your permi	ons to which you currer ssions at that organizati	ntly have access. Navig ion.	ate to any organizatior	's page by clicking on t	the organization's name. The "View Access"	button allows
Search Search		Q	]			
Organization 🔺	(	Organization ID	User Type	Status		
HSAG			Basic	Active	View Access	<u>:</u>
			« Previous 1	Next »		Request Change in Access 🕑 🍦

3. Under <u>each</u> Permission Type (Data Submissions and Submission Results) for eCQM, click Add under Program Access.

Vorider • 876543	
User Type	
<b>⊘</b> Basic	
What Permissions do you need?	
Please specify the Program(s) that you need to access to submit data.	
Data Submissions	Program Access
Chart Abstracted	None Add
DACA	None Add
eCQM	None Add
HCAHPS (File Upload)	None Add
Population & Sampling	None Add
Web-Based Measures	None Add
Submission Results	Program Access

#### 4. Next to the IQR, select your permission level. Then, click Apply & Close.

Vorter • 876543 Provider • 876543				
User Type				
Basic				
What Permissions do you need?				_
lease specify the Program(s) that you need to access to submit data.	eCQM			× Close
ata Submissions	Choose the programs and permission	n level that you	need access	to.
	Program	No Access	View	Upload / Edit
hart Abstracted		0	0	
ACA	Inpatient Quality Reporting (IQR)	0	0	۳ ۲
COM	Promoting Interoperability (PI)	0	0	0
	Apply & Close Gancel			
ICAHPS (File Upload)				
opulation & Sampling				None Add
Veb-Based Measures				None Add
ubmission Results				Program Acce

#### 5. Scroll to the bottom of the page and click Review.

Validation	None Add	
Authorizations	Access	
Auto-Route (IQR)		
Auto-Route (OQR)		
Managed File Transfer (MFT)		
MFT CDAC Form (Requires MFT Access)		
Notice of Participation	None Add	
PI Registration	None Add	
Vendor Management		
Back Review		
CMS.gov QualityNet Support CCSQ Support Center		

#### 6. Review your Access Request for accuracy. Then, click Submit.

Jser Type	
<b>Đ</b> Basic	
Permissions	
ata Submissions	Program Access
hart Abstracted	None
ACA	None
CQM	IQR (Upload / Edit)
ICAHPS (File Upload)	None
opulation & Sampling	None
Veb-Based Measures	None
ubmission Results	Program Access
hart Abstracted	None
CQM	None

 A green pop-up box will display indicating your Access Request was submitted successfully. The status will display as Pending.

(2)				Access Request	
Update Password 🗗 🔍 Update 2:	Factor Authentication 🗹	? Update Challenge Q	uestion 🗹	Submitted	
Organization Access				Create Acce	ss Request
My Organizations Access Reque	sts				
Search					
Search	С	l			
Organization 🔺	Organization ID	User Type	Status		
<b>Q</b> ABC HOME CARE	237798	Security Official	Pending	View Request	:
COFFEE MEDICAL CENTER	44E335	Basic	Pending	View Request	ı
V PEACE HARBOR HOSPITAL	380013	Basic	Pending	View Request	i
😲 Sample Provider 2	CO8002	Basic	😑 Pending	View Request	:
U Test HybridProvider 8765	876543	Basic	🔶 Pending	View Request	:
		« Previous 1	Next »		

8. You will receive an email confirmation that your Access Request was submitted. Click View Pending Access Request to view your pending Access Request.

Your HQR Access Request Was Submitted         Image: No-reply@hqr.cm.sgov         To Band Byzer         () This sender no-repl@hqr.cm.gov is from outside your organization.         () It is sender no-repl@hqr.cm.gov is thom outside your organization.	eply ≪ Reply All → Forward Mon 5/U/2023 ≥ 15 PM	CMS.gov   Hospital Quality Reporting	
		My Profile	
Hello BRANDI, Access Request Submitted Your Access Request for the following organization has been submitted and is pending review: Organization: Test HybridProvider 876543 Submission Date: 05/08/2023 View Pending Access Request		< Account Info Access Request Very Test HybridProvider 876543 Pending Provder • 876543 User Type Sasic Berningfore	:
		Date Submissions	Program Access
		Chart Abstracted	None
For further assistance regarding the information contained in this message, please contact the QualityNet Help Desk at opersupport@cms.hhs.gov, or by calling, toil-free 866.288.89121	(TTY: 877.715.6222), weekdays from 7 a.m. to 7 p.m.	DACA	None
α.		eCQM	IQR (Upload / Edit)
CMS.gOV Hospital Quality Reporting			
You received this message because you are a user of the Hospital Quality Reporting system.			

You will need to authorize your vendor(s).

1. From the landing page, Click Administration and Select Vendor Management.

CN		Quality Reporting
	Dashboard	
۵	Data Submissions	ecting to receive facility-specific or claims-detail reports in Managed File Transfer (MFT)? Users who historically received these reports through their nbox in Secure File Transfer may need to request permissions in the Hospital Quality Reporting system to continue to receive these reports for their
	Data Results	fer to the Important: Request Access to Managed File Transfer (MFT) & Auto-Route Now to Ensure You Receive Your Reports notification to learn more about permissions to access your reports!
E.	Program Reporting	
•	Administration	HOD is Coming
	DACA	HQK IS COMING
	Access Management	behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many
L	Vendor Management	navigation on the left:
	Notice of Participation	nctions are now available in the navigation
	PI Registration	vided - move from one to another with ease
		Here are some of the key features of the new Hospital Quality Reporting

2. Search for a new vendor and click Add Vendor.



Visit the <u>HQR YouTube playlist</u> for additional assistance on adding a new vendor.

3. Click the three vertical dots menu to allow the vendor to submit hybrid measure data on the hospital's behalf. Then, select Edit Access.

	Vendor Management				
V	Your Vendors				
~	Search Status				
	2 Vendors		🗒 Add V	'endor	
	Name 🔺	Vendor ID	Status		
	H		Active	•	Edit Access
	H (1997)		<ul> <li>Active</li> </ul>	:	Suspend User
臣		« Previous 1 Next »			Remove User

4. Click Add under eCQM data submissions for Inpatient Quality Reporting (IQR).

 4	< Vendor Management	
⊻	Assign Access	
Ê	Active	
	Permissions	
	Data Submissions	
	Inpatient Psychiatric Facility Quality Reporting (IPFQR)	None Add
	Inpatient Quality Reporting (IQR)	None Add
	eCQM	Measure Access
	Inpatient Quality Reporting (IQR)	None Add

5. A pop-up box will display two different measure sets: eCQM and Hybrid Measures. Click Add for Hybrid Measures.

Data Submissions - e	CQM			× Close		
Inpatient Quality Reporting (IQR)						
By assigning IQR permissions, you	u are also assigning permission f	or File Accuracy (for the specified	measure set only).			
Measure Sets	Discharge Quarter	Submission Date	Permission Level	Actions		
eCQM	-	-	-	Add		
Hybrid Measures	-	-		Add		
Apply & Close Cancel						

 Select a permission level of View or Upload/Edit. Complete the Discharge Quarters and Submission Date fields. Click Confirm.

	Permissions						
	🔿 No Access 🥑	Upload / Edit 🔿 View					
	Discharge Quart	ers					
	* Start Quarter	* Start Year			End Quarter	 End Year	
		<b>♦</b> Year	\$	to	Quarter	\$ Year	\$
	Submission Date  * Start Date MM/DD/YYYY Do not include a Confirm	to MM/DD/YYYY in end date Cancel	i				
Appl	y & Close Cance	I					

#### 7. Click Apply & Close. For additional changes, Click Edit and then Click Apply & Close.

Data Submissions - eCQM									
Inpatient Quality Reporting (IQR)									
By assigning IQR permissions, yo	ou are also assigning permission f	or File Accuracy (for the specified m	neasure set only).						
Measure Sets	Discharge Quarter	Submission Date	Permission Level	Actions					
eCQM	-	-		Add					
Hybrid Measures	Q1:01-01-2020 - Ongoing	06-27-2022 - Ongoing	Upload / Edit	Edit					
Apply & Close Cancel									

8. Hybrid measure permissions will now appear next to <u>eCQM</u> for Inpatient Quality Reporting (IQR). Click Review at the bottom of the page.

eCQM		Measure Access
Inpatient Quality Reporting (IQR)	<u>Hybrid</u> <u>Measures</u>	(Edit/Upload) 🚯
Web-Based Measures		Measure Access
Inpatient Psychiatric Facility Quality Reporting (IPFQR)		None Add
Inpatient Quality Reporting (IQR)		None Add
Outpatient Quality Reporting (OQR)		None Add
Cancel Review		

#### 9. Click Save & Close.



#### 1. From the main menu, Select Data Submissions.

CN		Quality Reporting			# Test
	Dashboard				
۵	Data Submissions	ecting to receive facil nbox in Secure File Ti	ity-specific or claims-detail reports in Manage ransfer may need to request permissions in t	ed File Transfer (MFT)? Users who histo he Hospital Quality Reporting system (	prically received these reports through their to continue to receive these reports for their
Ŋ	Data Results	fer to the <u>Important:</u> permissions to access	Request Access to Managed File Transfer (MFT) & syour reports!	Auto-Route Now to Ensure You Receive	Your Reports notification to learn more about
₽	Program Reporting				
-	Administration		oming		
	DACA	TUK IS C	oming		
	Access Management	behind the scenes to	modernize Hospital Quality Reporting. Over t	he next year you will see many	
	Vendor Management	navigation on the lef	ft:	d	
	Notice of Participation	nctions are now avail	able in the navigation		
	PI Registration	vided - move from or	e to another with ease		
		Here are	some of the key features of	the new Hospital Qualit	ty Reporting
invasoriat	which the	terfaces	Simple Submissions	Advanced Security	Reliable Calculations

# Select the Hybrid Measures tab. It is important to select either Test or Production.

								Change O	rganization		
	Dashboard										
۵	Data Submissions	eCQM	Program Management	Web- based Measures	Population & Sampling	Chart Abstracted	Public Reporting	HCAHPS	Hybrid Measures		
V	Data Results										
~	Program Reporting	Choose Select	t Files to browse yo mission Type	ur computer or	<i>Drag and Drop</i> th	e files into the hig	ghlighted area.				
Ê	Administration	Test			>	Production			>		
⊡	Unlock Menu										

3. To search for files on your computer, click the blue Select Files button. (You can also drag and drop.)

۵	eCQM	Web-based Measures	Population & Sampling	Chart Abstracted	HCAHPS	Hybrid Measures	
Ø	Choose Sele	ct Files to browse your comp	uter or <i>Drag and Drop</i> the file	es into the highlighted a	area.		
~	🖋 Chan	ge Selection					
â	Test						
	Search						
	Search	Q	Reset				Select Files

4. Verify your zip file does not contain other zip files. Select files to upload.



5. A file processing message will appear on your screen.



#### 6. You will receive an email on the file processing status.

CMS.gov   Hospital Quality Reporting		
File Processing Complete		
Batch 3092901 finished processing.		
Batch File Name: 876543.zip Accepted Files: 105 Rejected Files: 0 Processing Start Time (PT): 06/17/2022 11:59:23 AM Processing End Time (PT): 06/17/2022 12:03:20 PM		
	View File Accuracy Details	

7. You can view uploaded file(s) by clicking on the column header to filter. A status of Accepted or Rejected will display.

•	eCQM	Web-based Measures	Population & Sampling	Chart Abstracted	HCAHPS	Hybrid Measures					
Ø	Choose Selec	t Files to browse your com	puter or <i>Drag and Drop</i> the	files into the highlighted	area.						
M	🖋 Chang	ge Selection									
۵	Test										
	Search										
	Search	Q	Reset				Select Files				
	Batch Fi	le Name Bat	ch ID File Siz	e Upload	Date <b>v</b> U	iploaded By	Status				
	🗋 смs5	29QRDA105 309	2311 61 kB	6/16/20	22 T	est HybridProvi	Accepted				
	🗋 Failur	<b>es.zip</b> 309	3903 16 kB	6/27/202	22 Te	est HybridProvi	🔀 Rejected				
							L				

#### 1. From the main menu, select Data Results.



#### 2. Click on the Files tab to review the processing status.

•	Files Accuracy	/							
$\checkmark$	Hybrid Measu	res Upload H	listory						
~	Submission								
÷	Test		♦ The bate	table below displays a ch can either be one fil	ill batch uploads. Yo e or contain a numb	u can view batches f per of files). Here, yo	or either test or product u can search batches or s	ion submissions (A sort the results to view	
•	Change Selection			the batch status and download results. Only batches applicable to the current reporting period can be deleted.					
	Search	Q Re	iset						
	Batch File Name	Batch ID	File Size	Upload Date 🔻	Uploaded By	Status	Errors	Actions	
	876543.zip	3092901	476 kB	06/17/2022	Test Hybrid	💽 Ready	🛓 <u>Download</u>	:	
	CMS529QRD	3092885	18 kB	06/17/2022		💽 Ready	🛓 <u>Download</u>	Delete Batch   💼	
	CMS529QRD	3092311	61 kB	06/16/2022	Test Hybrid	💽 Ready	🛓 <u>Download</u>	:	

3. After you click on Download under the Errors column, a CSV file will display the errors for each batch.

1	FileName	CCN	BatchID	UploadDate	UploadedBy	Status	ErrorDetails
2	CMS529QRDA15.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted
3	CMS529QRDA74.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted
4	CMS529QRDA97.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted
5	CMS529QRDA32.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted
6	CMS529QRDA83.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted

#### 4. Click the Accuracy tab. Select the submission type and quarter.



5. Under the Accuracy tab, the user can locate rejected files for revision and resubmission.

	Files Accura	су						
	Hybrid Measu	ures Subm	ission					
₩ Ê	The table below displays all file uploads for test or production submissions. Here, you can delete an individual file(s), search or sort results to view the file status and download results. Only files applicable to the current reporting period can be deleted.          Submission       Quarter         Test       Q4 2021         Change Selection		ds for test or n delete an s to view the files riod can be	108	<b>106</b> Accep	<b>106</b> Accepted Files		ed Files
				Total Files	<b>O</b> Delete	<b>0</b> Deleted Files		
			<b>\$</b>					
	Search							
	Search	Q	Reset				Ехро	rt Results
	Patient File Name	Batch ID	Batch File Name	Upload 🗸 Date	Uploaded By	Status	Errors	Actions
	CMS529QR	3092901	876543.zip	06/17/2022	Test HybridP	Accepted	0*	i
	CMS529QR	3092901	876543.zip	06/17/2022	Test HybridP	Accepted	0*	:

6. Click on a card for a closer review of the submitted files that will display below.

	Files Accura	су							
	Hybrid Measu	ures Submis	sion					Ļ	
₩	The table below displays all file uploads for test or production submissions. Here, you can delete an individual file(s), search or sort results to view the file status and download results. Only files applicable to the current reporting period can be deleted. Submission Quarter		for test or delete an o view the es			106 2 Accepted Files Re		ected Files	
			od can be	<b>108</b> Fotal Files	<b>0</b> Delete	<b>0</b> Deleted Files			
	Test Cha	Q4 2021	<b></b>						
	<b>Search</b> Search	Q	Reset				Expor	t Results	
	Patient File Name	Batch ID	Batch File Name	Upload 🚽 Date	Uploaded By	Status	Errors	Actions	
	CMS529QR	3092885	CMS529QRD	06/17/2022		Rejected	1*	I	
	CMS529QR	3092310	CMS529QRD	06/16/2022		Rejected	1*	:	

# 7. After you click on the Export Results button, a CSV file will display the error details.

E5 $\checkmark$ : $\times \checkmark f_x$								~
A	В	С	D		Е	F	G	
1 FileName	CCN	BatchID	UploadDate	UploadedBy		Status	ErrorDetails	
2 VendorNotAllowedProviderGoodProvider.xml		3024034	11/13/2020			REJECTED	Submitter ( %s ) is not authorized to submit for this provider ( %s ) (CONF:CMS_0067).	
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23		-						_
< ▶		(+)						Þ
Eo								0%

Alexandra Arndt, Project Manager Inpatient VIQR Support Contractor

#### **Frequently Asked Questions**

#### **Q: Will hybrid measures become mandatory for CAHs?**

A: CAH's are not required to participate in the Hospital IQR Program and therefore are not required to submit on hybrid measures.

CAHs may choose to voluntarily submit these data and CMS encourages CAHs to submit these data to support patient care improvement. Please note CAHs will need to complete the optional Public Reporting Notice of Participation via the *HQR Secure Portal* to have data publicly reported.

- Q: When does CMS plan to publicly report hybrid measure data results?
- A: CMS anticipates these data will be publicly displayed in the July 2025 release. Public reporting of hybrid measure data will begin with data from the July 1, 2023, through June 30, 2024, reporting period. These data will impact the FY 2026 payment determination.

- Q: When can our hospital expect to receive a confidential Hybrid Measure HSR?
- A: CMS expects to release HSRs to participating hospitals in the spring following the submission deadline. CMS will distribute an announcement when HSRs are released.

Sign up for Listserve notifications at <u>https://qualitynet.cms.gov/listserve-signup</u>. HSRs for the 2023 voluntary reporting period became available on May 15, 2023.

- Q: How can I view my hospital's confidential Hybrid Measure HSR?
- A: Once CMS announces HSRs are available, you may log into the HQR system with your HARP account. You will need the MFT permission assigned to your role to view the HSR.

For additional guidance, view the following tutorial video:

https://www.youtube.com/watch?v=3DEE8lcuf\_w

- Q: Will a sample hybrid measure HSR become available for hospitals that did not participate in the last year's voluntary reporting for the 2023 reporting period?
- A: Yes. Like the publicly reported claims-based measures, a mock HSR and accompanying HSR User Guide are posted on QualityNet's <u>Hybrid Measure Hospital-Specific Reports page</u>.

#### Hybrid HWR Mock HSR:

https://qualitynet.cms.gov/files/646244da3da56f001c0fc6c5?filename=9999999\_ HybridHWR\_HSR.xlsx

#### HSR User Guide:

https://qualitynet.cms.gov/files/645d678b3da56f001c0fc684?filename=CY2023 Hybrid HWR HUG.pdf

- Q: How can my hospital assess whether it is on track to meet the Hospital IQR Program participation requirements?
- A: Hospitals that participate in 2024 voluntary reporting will receive a confidential HSR that provides a summary of the hospital's submission of CCDEs from the EHR for the Hybrid HWR and/or Hybrid HWM measures.

While this information will not impact hospital payment during voluntary reporting, it will help hospitals assess whether they are on track to meet reporting requirements for when the measure becomes mandatory.

Alexandra Arndt, Project Manager Inpatient VIQR Support Contractor

#### Resources

### eCQM and Hybrid Measure Support Resources

Торіс	Contact
<ul> <li>HQR System, HARP, vendor roles, uploading files, reports, troubleshooting file errors)</li> <li>Medicare Promoting Interoperability Program (attestation, objectives, policy)</li> </ul>	CCSQ Service Center (866) 288-8912 <u>qnetsupport@hcqis.org</u>
Hospital IQR Program and Policy	Hospital Inpatient Support Team (844) 472-4477 https://cmsqualitysupport.servicenowservices.com/qnet_qa
<ul> <li>eCQM Specifications (code sets, measure logic, measure intent)</li> <li>QRDA-related Questions (CMS IG, Sample Files and Schematrons)</li> <li>Hybrid Measures – Technical (specifications, logic, value sets, QRDA)</li> </ul>	Office of the National Coordinator for Health Information Technology (ONC) JIRA eCQM Issue Tracker https://oncprojectracking.healthit.gov/support/projects/CQM/ Summary ONC JIRA QRDA Issue Tracker https://oncprojectracking.healthit.gov/support/projects/QRDA/ Summary ONC JIRA CMS Hybrid Measure Issue Tracker https://oncprojectracking.healthit.gov/support/browse/CHM
Hybrid Measures – Non-Technical (policy, measure methodology)	YNHHS/CORE https://cmsqualitysupport.servicenowservices.com/qnet_qa
eCQM Data Validation	Validation Support Team (validation@telligen.com)

#### **Webinar Questions**

- Please email questions pertinent to this webinar topic to <u>WebinarQuestions@hsag.com</u>.
- Write the webinar title in the subject line.
- If your question pertains to a specific slide, include the slide number in the body of the email.

Submitting Voluntary Hybrid Measure Data

Thank You

#### Disclaimer

This presentation was current at the time of publication and/or upload onto the Quality Reporting Center and QualityNet websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to this presentation change following the date of posting, this presentation will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included in the presentation are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the presentation and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.