



Hospital Inpatient Quality Reporting (IQR) Program

Support Contractor

Hospital VBP Program: Navigating the New *QualityNet* Website

Presentation Transcript

Speaker

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Bethany Bunch: Hello and thank you for tuning into the Hospital VBP Program On Demand webinar focused on navigating the new *QualityNet* website.

My name is Bethany Bunch, and I am the Hospital VBP Program Lead at CMS's Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Contractor. I will be your virtual host for the webinar and today's speaker.

This event will provide an overview of the CMS Hospital VBP Program resources on the updated *QualityNet* website and show the steps to use the *QualityNet* [Inpatient Questions & Answers tool](#) and retrieve reports.

At the conclusion of the webinar, you should be able to find Hospital VBP Program *QualityNet* pages and other available resources, ask a question in the Inpatient Q&A tool on *QualityNet*, run Hospital VBP Program reports, and retrieve Hospital VBP Program Hospital-Specific Reports, known as HSRs, from your Auto Route Inbox.

This slide displays a list of acronyms that will be referenced during the webinar.

If you have questions during the webinar, you may submit them to the following email address, WebinarQuestions@hsag.com. When sending questions, please use the webinar title in the subject line. The webinar title is *Hospital VBP Program: Navigating the New QualityNet Website*. In the email body, please include your question and, if your question pertains to a specific slide, please include the slide number for us to more efficiently assist you. We will answer your questions as soon as possible. If you have questions unrelated to the current webinar topic, we recommend searching for the topic in the *QualityNet* Inpatient Q&A tool. If you do not find a similar topic, feel free to use the tool to submit a new question.

Okay, now we will begin the presentation and start with the public pages on *QualityNet*.

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For those unfamiliar or new to *QualityNet*, the *QualityNet* website is located at www.QualityNet.org. As the landing page states, the *QualityNet* website is your one-stop shop for CMS quality programs, especially at the hospital level. There are specific pages for the Hospital VBP Program, HAC Reduction Program, Hospital Readmissions Reduction Program, Hospital IQR Program, pages for each of the measures, and much more. Over the next few slide, I'll cover what options and information are available to you on the home page of *QualityNet*. This first slide shows the very top of the page that you'll see when first navigating. Up at the top, there is a search bar that will produce results based on keywords, a link to hover over to view a quick link to all of the quality programs, a link to hover if you need help or have questions, and a link to login to the *QualityNet Secure Portal*. We'll cover many of these in more detail later in the presentation. Also at the top portion of the page, you'll see an option to subscribe to email updates and a quick look at recent news stories for the programs.

Scrolling down on the home page, there are quick links to navigate further into the programs for specific facility types. For our purposes today, we would select the Hospitals-Inpatient option to navigate to the Hospital VBP Program, which is one of CMS's inpatient hospital programs.

If you continue to scroll on the home page, you will see additional quick summaries of recent news stories.

At the bottom of the home page, there is a quick overview about *QualityNet*. To stay up to date with program news and information coming from CMS, we recommend joining a few Listserve groups. You can click the Join Now button here to sign up.

When you are at the sign-up page for Listserve and program notifications, you can directly sign up for the HARP Notify notifications. In order to sign up to see Hospital IQR Program and Hospital VBP Program notifications, which is what I recommend for the Hospital VBP Program, you'll need to email InpatientSupport@hsag.com and request to be added to the Hospital Inpatient Quality Reporting (IQR) Program and Hospital Inpatient Value-Based Purchasing (HVBP) Program notification groups.

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Now, we'll start taking a look at the information and resources directly available for the Hospital VBP Program.

To get to the Hospital VBP Program pages, go to the home page, www.QualityNet.org.

From the home page, you will hover over the Quality Programs link. At the top of the page, click Hospital Value-Based Purchasing (HVBP) when the menu appears.

Another way to access the Hospital VBP Program pages from the home page is to scroll down.

When you see the "I am looking for quality information associated with..." options, select Hospitals-Inpatient.

The Hospitals-Inpatient section has information regarding the measures, public reporting of the data, data management, and copies of the specifications manuals.

If you keep scrolling, the page also has quick links to the hospital inpatient quality programs. Select Learn More under Hospital Value-Based Purchasing (HVBP) Program.

Here are the pages and resources available for the Hospital VBP Program.

On the Hospital VBP Program landing page, we have quick links at the top to get to key aspects of the program, such as HVBP measures, participation, reports, and resources. This page also gives a quick overview and purpose of the program. On the right side of the screen, there is a quick link to key documents that are frequently requested, a spotlight section for recent program activities, and steps to contact support for the program. On the next slide, I'll show you what the FY 2022 Hospital VBP Program Guide looks like. To get there, click the top box under Key Documents on the right side of the screen.

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This is the FY 2022 guide. It's a one-page document that contains all of the measures included in each of the domains. For each measure, we have the baseline and performance period, the achievement threshold, and benchmark. This is our most requested and downloaded resource document.

We're just going to go tab by tab from the left to the right. Once you click on the HVBP Measures section, this page will display. There are tables for each of the domains and measures included in those domains. For each fiscal year, we have listed Yes or No to state if the measure was included in that fiscal year. For example, the bottom measure on this slide, COMP-HIP-Knee, was first included in FY 2019, so the column for FY 2018 says No. If you are interested in seeing measure inclusions for fiscal years previous to FY 2018, you can select the Previous Measures option on the left navigation pane.

Now, I clicked on the next tab, Participation. This first page describes the eligibility and exclusions for participating in the Hospital VBP Program. A participating hospital is a subsection (d) hospital, generally known as an inpatient acute care hospital located in the 50 states and the District of Columbia. Here are some examples listed of why hospitals could be excluded from the Hospital VBP Program: If they are subject to payment reductions under the Hospital Inpatient Quality Reporting Program in the same fiscal year; if they do not meet the minimum number of calculated domains for a Total Performance Score; or if they have been cited for deficiencies during the applicable fiscal year performance period that posed an Immediate Jeopardy, an IJ, to patients' health or safety. From this page, click on the Immediate Jeopardy hyperlink in the fourth bullet under Exclusions.

If your hospital has been cited for an Immediate Jeopardy citation through the Medicare state survey and certification process, we realize that understanding the impact to your Hospital VBP Program reimbursement can be confusing. So, we developed a quick reference guide to assist you in determining the impact. If you have questions determining the impact after reviewing this quick reference guide, please do not hesitate to contact our team. Generally speaking, there are a very small number of hospitals that are excluded for this reason in a fiscal year, so this information will not be needed for many people watching today's webinar.

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Navigating back to the last page, you will now select Baseline and Performance Periods from the left pane. The baseline and performance periods for each measure or domain are listed. Here is an example of the table displaying the FY 2025 dates.

The next tab down is Minimum Cases and Measures. This page describes the minimum data requirements for calculation of individual measures, domains, and the Total Performance Score. A few slides back, I mentioned that a hospital is excluded from the Hospital VBP Program if they do not meet the minimum domains calculated to receive a Total Performance Score. This page will provide the specific information for each fiscal year. For example, this slide displays the requirements for fiscal year 2020. A hospital must have at least three of the four domains calculated in fiscal year 2020 in order to receive a Total Performance Score. In order to have the Clinical Outcomes domain calculated, a hospital must have at least 25 cases in at least two of the four measures included in that domain. Please be aware that the requirements at the domain level may change from year to year, based on the measures included in the domain. For example, in fiscal year 2021, the 30-day mortality measure for COPD was added to the Clinical Outcomes domain. So, a hospital must have at least 25 cases in at least two of the five measures, which you would also be able to find on this page when you scroll down.

The next tab, Scoring, provides information regarding the domain weights for each fiscal year. FY 2020–FY 2022 have the same domain weights assigned, 25 percent to each domain. There is also a section that describes and provides an example of a scenario in which a hospital receives scores in three of the four domains.

The Extraordinary Circumstances Exception page provides information on how to submit a request to CMS. If requesting an ECE due to an extraordinary circumstance or event that impacted your hospital, hospitals must submit the request form and any supplemental documentation within 90 days of the event. Hospitals with granted ECE requests will be excluded from the fiscal year that their performance was impacted.

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Moving to the next tab on the top navigation menu, we will review what information is included under Performance. Under Performance, each fiscal year's performance standards are listed on the page for easy access. The performance standards are first published in the proposed or final rules and, once finalized, updated on these *QualityNet* pages. Please note that the Medicare Spending per Beneficiary measure performance standards are based on performance data and are first published in your hospital's Percentage Payment Summary Reports.

Some performance standards with earlier baseline periods and earlier starting performance periods have performance standards published years prior to the calendar year measures. We try to update these pages as frequently as we can, but, when we do those early updates, we won't have information for all measures at the time the page is first published. We include notes on the page when we anticipate CMS will release additional performance standards.

Moving over to the next tab, Reports. The Reports page contains information on when each of the reports for the fiscal year were released or are anticipated to be released. For example, the FY 2022 baseline report was released in February 2020, as stated in the first bullet point under FY 2022 Program Reports.

The next tab, Payments, provides information on how payment adjustments are calculated in the Hospital VBP Program. The Hospital VBP Program is funded by a 2 percent reduction to hospital base operating DRG payments in FY 2017 and subsequent years. The estimated amount of the 2 percent to fund the program, in addition to all eligible hospital Total Performance Scores, are inputted into a linear exchange function slope calculation. That slope value is then used to translate a hospital's Total Performance Score to their payment adjustment factor for the fiscal year. The 2 percent reduction and any earned incentive payments are not made or reduced in a lump sum, but are made through each eligible claim during that fiscal year.

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Scrolling down on the same page, we have a list of links to a table called 16B. What this actually is, is a list of every eligible CCN for the fiscal year with that CCN's payment adjustment factor in the Hospital VBP Program.

Also on the Payment tab, we have an option for more information regarding the review and corrections and appeals. This page displays how to submit a review and correction, appeal, or independent CMS review request following the release of the Percentage Payment Summary Report.

Scrolling down on that page, the forms for each of those requests are listed with quick reference guides and help guides for completing and submitting the form.

On the Resources tab, we provide a handful of documents for each fiscal year. Some of these documents are added to the website around the time that the Percentage Payment Summary Reports are released, so you may not see all of the documents for FY 2021 or FY 2022 until it gets closer to that time. On this Resources page, we provide a *How to Read Your Percentage Payment Summary Report* help guide, a program summary, the *How to Read Your Baseline Measures Report* guide, the program guide that we looked at earlier in the presentation, and a scoring quick reference guide.

The *How to Read Your Percentage Payment Summary Report* walks through the report page by page and provides descriptions of the values that you are seeing on your report. At the end of the document, there is also a list of the formulas used in the Hospital VBP Program.

If the *How to Read Your [Percentage Payment Summary] Report* is too much in the weeds for you, I recommend the program summary. If you want to know the high-level information on a fiscal year of the program, this is your document.

Here is a copy of the program guide again, it contains the measures, domains, baseline and performance periods, achievement thresholds, and benchmarks.

The scoring quick reference guide is a great document if you are trying to replicate or understand in more detail how the scores are calculated in the Hospital VBP Program.

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Also on the Resources page, there is a tab for CMS final rules with the links to the rules that included the Hospital VBP Program.

Now, we're going to move to navigating the [QualityNet Inpatient Q&A tool](#).

To navigate to the tool from the *QualityNet* home page, hover over Help and then select Hospitals-Inpatient from the menu.

To ask a question, select Ask a Question.

This form will be displayed. In order to receive the response to your question, you'll need to include your email address where you would like to receive the response.

If you are submitting a question for the Hospital VBP Program, under the Program drop-down, select HVBP – Hospital Value-Based Purchasing.

Under the Topic drop-down, select the topic that is most appropriate for your question. If none of them fit well, please select General Information.

Once you've added a subject and typed your question, select the "I'm not a robot." box, and click Submit Question.

You will receive a summary confirmation of your question via the email you provided in your question form.

Once the question has been responded to, you will receive another email with the response under the Close Notes section.

In the Inpatient Q&A tool, there is functionality to check the status of your previously asked questions or review the responses that were provided.

When navigating to the Q&A tool, instead of selecting Ask a Question, select My Questions. To review your questions, either submit the case or reference number. This will return just that case or reference, or you can select your email address that was used to submit the questions. The email option should return a list of all cases that you have submitted using that email address.

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For the case that I just submitted, I will use the case or reference number. I then entered the case number that I received in my conformation.

You will receive this confirmation on the screen after selecting Submit.

After a few minutes, I received the following email with the information regarding that case. It had not been resolved or responded to when I ran this case, so there are no Close Notes yet. If your question was responded to, the status should list either Resolved or Closed, and the answer should be listed under Close Notes at the bottom. If you selected your email address instead of the individual case number, you will receive a list of cases that you've submitted. To get this individual view, please review the list and identify which case you want to inquire about. Then, use the case or reference number search to retrieve the individual case information like that displayed on this screen.

We'll now transition to running reports in the new *QualityNet Hospital Quality Reporting Secure Portal* using your new HARP ID. For those that haven't established a HARP ID and linked their existing *QualityNet* accounts to that HARP ID, please do so as soon as possible by logging into the *QualityNet Secure Portal* and following the prompts.

When the Baseline Measures Report or the Percentage Payment Summary Report is available for the Hospital VBP Program, we send a Program Listserve to let you know that you can now run the report for your hospital. These were the same program notification groups that we walked through how to sign up at the beginning of the presentation. Once you receive one of these messages, follow the next steps to login and run the report.

First, navigate to the new *QualityNet HQR Secure Portal* at <https://hqr.cms.gov/hqrng/login>. The link is available on this slide. Enter your new HARP ID and password. Then, select Login.

You will now enter your two-factor authentication code. You could have set this up to come via text message, email, or Google Authenticator, for example. Once you've entered the code, select Continue.

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Scroll through Terms & Conditions. Once you are at the bottom of the scroll bar, the Accept option will become blue, and you can select Accept.

At the top-left navigation pane, select My Reports.

In the Report screen, select Run Reports.

Select Inpatient in the Report Program and Hospital Value-Based Purchasing – Feedback Reports in the Report Category drop-downs, and click View Reports.

The report links will then display in the bottom table. Click Hospital Value-Based Purchasing –Value-Based Percentage Payment Summary Report to run the performance report or the Baseline Measures Report to run the baseline report.

In the Run Reports tab, select the parameter to run your hospital's report for the applicable fiscal year. Then, click Run Report.

You will receive a confirmation that the report request has been submitted. To view the report, select Search Reports.

Once the report is available to download, the status will appear as a green check mark. To download the report, select the green arrow in the Action menu.

You will receive a dialogue box. You can either open or save the report.

Here is a list of those steps, if you would like to print this off for future reference.

The reports that the Report Run interface is applicable to in the Hospital VBP Program are the Percentage Payment Summary Reports and the Baseline Measures Reports. In the Hospital VBP Program, your hospital also receives Hospital-Specific Reports through your Auto Route Inbox in Secure File Transfer. These are the steps to access those reports.

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When you receive a report via Auto Route, you will receive an email notification similar to the one listed on the screen.

To access the report, go to the *QualityNet* website then click Log into the Secure Portal.

This is a different login process from the new *HQR Secure Portal*. You will select Secure File Transfer from the destination. Then, when you login, enter your *QualityNet Secure Portal* user ID, password, and VIP Security Code. This may not be the same as your HARP ID.

Once logged in, select Secure File Transfer at the top menu.

Select Auto Route Inbox. Your files should be displayed in the screen. Select the file you would like to access, and then click Download.

If you have questions about the webinar, you may submit them to the following email address, WebinarQuestions@hsag.com. When sending questions, please use the webinar title in the subject line. The webinar title is *Hospital VBP Program: Navigating the New QualityNet Website*. In the email body, please include your question, and, if your question pertains to a specific slide, please include the slide number for us to more efficiently assist you. We will answer your questions as soon as possible.

This concludes our On Demand webinar. We hope this was valuable to you as you navigate the new *QualityNet* website, new Inpatient Q&A tool, and new *HQR Secure Portal* using your new HARP ID. We realize that any change can be confusing when new, and we are here to help if you have any questions regarding the Hospital VBP Program and the information contained on the website.

We appreciate hearing your feedback as we determine what education to provide in the future. Please help shape our education to your needs by completing this quick survey. Thank you and have a great day!