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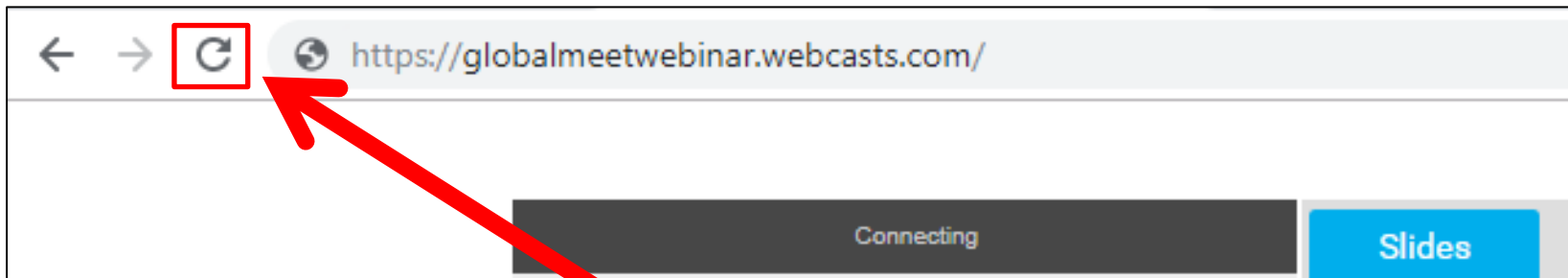
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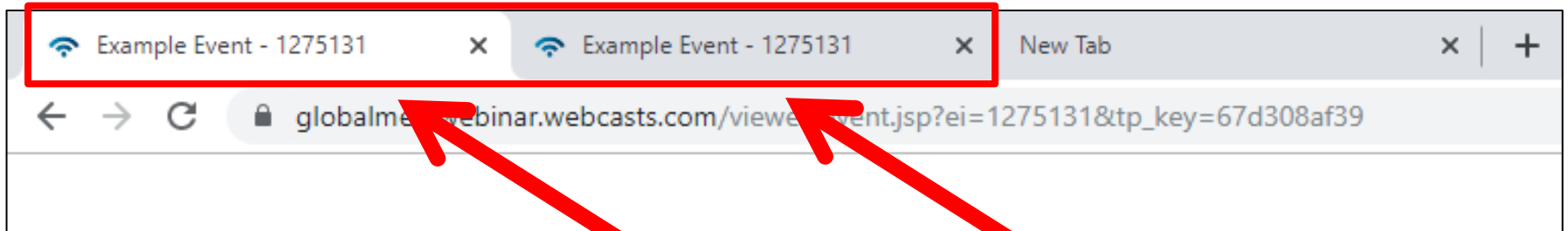
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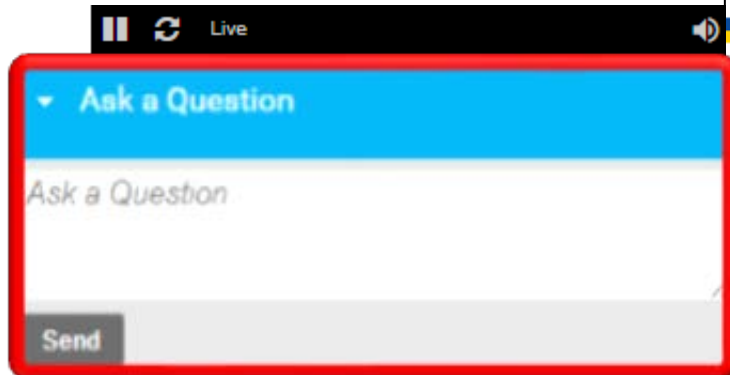
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**Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor**



**Today's Presentation**



# **Hospital IQR Program CY 2020 (FY 2023 Payment Determination) eCQM Validation Overview for Selected Hospitals**

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**January 25, 2022**

# Speakers

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Outreach and Education Support Contractor (SC)

# Purpose

This webinar will share information regarding the Centers for Medicare & Medicaid Services (CMS) Hospital Inpatient Quality Reporting (IQR) Program validation process for electronic clinical quality measures (eCQMs) for fiscal year (FY) 2023, which validates calendar year (CY) 2020 data.

# Objectives

Participants will be able to:

- Understand the Hospital IQR Program eCQM data validation process for CY 2020, impacting FY 2023 payment determination.
- Identify the deadlines and required activities relating to CY 2020 eCQM data validation for FY 2023 payment determination.
- Submit medical records requested by the CMS Clinical Data Abstraction Center (CDAC).
- Receive and interpret validation results.



# Acronyms and Abbreviations

<b>APU</b>	annual payment update	<b>HQR</b>	Hospital Quality Reporting
<b>CCN</b>	CMS Certification Number	<b>ID</b>	identification
<b>CDAC</b>	Clinical Data Abstraction Center	<b>IQR</b>	Inpatient Quality Reporting
<b>CMS</b>	Centers for Medicare & Medicaid Services	<b>MFT</b>	Managed File Transfer
<b>CPOC</b>	clinical process of care	<b>PC</b>	Perinatal Care
<b>CY</b>	calendar year	<b>PDF</b>	Portable Document Format
<b>ECE</b>	Extraordinary Circumstances Exception	<b>Q</b>	quarter
<b>eCQM</b>	electronic clinical quality measure	<b>QRDA</b>	Quality Reporting Document Architecture
<b>ED</b>	emergency department	<b>STK</b>	stroke
<b>EHR</b>	electronic health record	<b>VIQR</b>	Value, Incentives, and Quality Reporting
<b>FY</b>	fiscal year	<b>VIQR C</b>	Value, Incentives, and Quality Reporting Center
<b>HAI</b>	healthcare-associated infection	<b>VSC</b>	Validation Support Contractor
<b>HAC</b>	hospital-acquired condition	<b>VTE</b>	Venous Thromboembolism

# eCQM Validation Process



# Synopsis

- CMS uses an annual validation process to assess the accuracy of eCQM data. (CMS has used this process to assess chart-abstracted measure data for years.)
- The validation process also verifies that the eCQM data submitted to the CMS Clinical Warehouse align with the measure specifications.
- For FY 2023 eCQM data validation efforts, CMS will require hospitals to participate in one of the two inpatient validation processes, chart-abstracted validation or eCQM validation.

# Synopsis (Continued)

- In June of 2021, up to 200 hospitals were randomly selected to participate in the eCQM validation process for FY 2023 payment determination.
- The accuracy of submitted eCQM data will not impact the pass-fail results for eCQM validation used to determine the Hospital IQR Program annual payment update (APU).
- Hospitals will pass or fail validation based on the timely and complete submission of at least 75 percent of the medical records CMS requested.

# CY 2020 eCQMs

## EHR-Based Clinical Process of Care Measures (eCQMs)

Short Name	Measure Name	National Quality Forum #	CMS #
ED-2	Median Admit Decision Time to ED Departure Time for Admitted Patients	0497	111
PC-05	Exclusive Breast Milk Feeding	0480	9
STK-02	Discharged on Antithrombotic Therapy	0435	104
STK-03	Anticoagulation Therapy for Atrial Fibrillation/Flutter	0436	71
STK-05	Antithrombotic Therapy by End of Hospital Day Two	0438	72
STK-06	Discharged on Statin Medication	0439	105
VTE-1	Venous Thromboembolism Prophylaxis	0371	108
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	0372	190

# Hospitals to Submit Data for One Quarter

Hospitals selected for eCQM validation will have their data validated for the most recently submitted calendar quarter, regardless of the number of quarters submitted.

## eCQM Validation Quarters for FY 2023

First quarter 2020 (Jan–March 2020)

Second quarter 2020 (April–June 2020)

Third quarter 2020 (July–Sep 2020)

Fourth quarter 2020 (Oct–Dec 2020)

# Hospital Selection

- Random selection of up to 200 hospitals in June 2021
- Criteria to exclude hospitals from FY 2023 random selection:
  - Fewer than five discharges for one eCQM
  - Selected for chart-abstracted data validation
  - eCQM Extraordinary Circumstances Exception (ECE) approved waivers

# Notification of Hospital Selection

Notification of hospital selection occurs annually via the following methods:

- News article posted on QualityNet, with the list of selected hospitals
- Listserve to the community
- Email communication from the VSC directly to the selected hospitals



# Notification of Hospital Selection (Continued)

- Hospitals selected for Hospital IQR Program eCQM validation are notified by email communication. This communication is sent to the following hospital contacts listed within the official CMS contact database:
  - Chief Executive Officer / Administrator
  - Hospital IQR
  - CDAC Medical Records
  - Quality Improvement
- The VSC monitors the email communications to ensure all hospitals were notified of selection. Undeliverable emails are researched, and hospital contacts are updated in the CMS system to ensure accurate delivery of future notifications.

# Update Contact Information

- Regularly update hospital contact information to ensure receipt of eCQM validation-related communications and reminders.
- Hospitals may check and update contacts by sending an email with their six-digit CMS Certification Number (CCN)/Provider ID number to the Hospital Inpatient Support Contractor at [QRFormsSubmission@hsag.com](mailto:QRFormsSubmission@hsag.com).

# Selected Hospital List

The list of the hospitals selected for FY 2023 eCQM validation are on the QualityNet website.

To access the list:

1. Navigate to the QualityNet website:  
<https://www.qualitynet.cms.gov>
2. Select **Hospitals-Inpatient**.
3. Select **Data Management**.
4. Select **Data Validation**.
5. Select **Resources**.

Direct Link: <https://qualitynet.cms.gov/inpatient/data-management/data-validation/resources>

# Case Selection

- CMS selects two cases at random from each of the four measures reported.
- If fewer than two cases are available for a given measure, more than two will be selected from another measure, not to exceed a total of eight cases selected.
- Case selection is limited to those that met the denominator eligibility criteria, as reported by the hospital.

# Medical Records Request



- The CDAC will FedEx hospitals a written request to “Medical Records Director” to submit a patient medical record for each case that CMS selected for eCQM validation.
- It is important that the packet be routed to the correct individual(s) (those responsible for fulfilling the request) as soon as possible before the medical record submission deadline.

**Important:** The medical records request will be delivered to the address listed under the Medical Records contact type in the official CMS contact database. Hospitals may check the address and make updates to the address by sending an email with their six-digit CCN/Provider ID to the Hospital Inpatient SC at: [QRFormsSubmission@hsag.com](mailto:QRFormsSubmission@hsag.com).

# Medical Records Request (Continued)

## Case Selection Report

Each hospital's list of cases selected for eCQM validation, including all available patient identifiers, can be accessed via the Hospital Quality Reporting (HQR) Secure Portal by a registered user with the Validation role. To access the report:

1. Log in to the HQR Secure Portal: <https://hqr.cms.gov/hqrng/login>
2. Select **Program Reporting**, then **Validation**.
3. Under Program, select **Inpatient**.
4. Under Report, select **eCQM Case Selection**.
5. Under **Period**, select the applicable period.
6. Under **Provider(s)**, select the applicable hospital(s).

# Medical Records Request (Continued)

## Prior to Submission

- Once the CDAC has received the record, hospitals are not allowed to send records or additional documentation; this applies even if the wrong record is sent, or if pages are missing, or pages are illegible, etc. The CDAC will abstract every case with the applicable documentation that the hospital **originally** sent.
- All medical records should be carefully reviewed prior to submitting them to the CDAC.
  - Consider having an abstractor review your medical records prior to submission to ensure the Portable Document Format (PDF) file submitted to the CDAC contains the information relevant to the case that will be abstracted.

# Medical Records Request (Continued)

## Prior to Submission (Continued)

The objective of measure validation is to verify eCQM data submitted by the hospital to the clinical warehouse aligns with the measure specifications.

When validating cases, the CDAC reviews data found in both **discrete and non-discrete fields** in the medical records submitted as PDF files.

When reviewing medical records prior to submission, hospitals are encouraged to:

- Compare extracted data with other information in the medical record to ensure Quality Reporting Document Architecture (QRDA) submissions report quality in alignment with the measure specifications.
- Closely examine the accuracy of time-stamps (e.g., arrival times and medication administration times).



# Medical Records Request (Continued)

## Submission

- Hospitals have until the date listed on the request to send their records to the CDAC.
- Hospitals must submit medical records as PDF files via the CMS Managed File Transfer (MFT) web-based application.
- Inpatient medical records must be received within 30 days of the request date in order to be considered eligible for validation.
- Detailed instructions on how to submit medical records are provided within the packet delivered by the CDAC.

# Medical Records Request (Continued)

Additional information about the request for medical records can be found on the QualityNet website.

To access:

1. Navigate to the QualityNet website: <https://qualitynet.cms.gov>
2. Select **Hospitals-Inpatient**.
3. Select **Data Management**.
4. Select **Data Validation**.
5. Select **CDAC Information**.

Direct Link: <https://qualitynet.cms.gov/inpatient/data-management/data-validation/cdac-information>

# Receipt of Results

- Hospital staff will receive an email notification when the eCQM Validation Case Detail Report is available for download from the HQR Secure Portal.

# FY 2023 Payment Determination

- CMS will notify hospitals via targeted emails whether they passed or failed eCQM validation.
- The accuracy of eCQM data and the validation of measure reporting will not affect the payment determination.
- Hospitals will pass or fail validation based on the timely and complete submission of at least 75 percent of the medical records CMS requested.
  - For example, if eight medical records are requested, at least six complete medical records must be submitted to meet the 75 percent requirement. If a hospital does not meet the overall validation requirement, the hospital may not be eligible to receive the full APU.

# eCQM Validation Reports

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- eCQM Case Selection Report
- eCQM Validation Case Detail Report

# eCQM Case Selection Report

- The Case Selection Report lists hospital cases selected for eCQM validation, including all available patient identifiers.
- This report displays the **Medical Record Request Date**, the **Due to CDAC Date**, and the **Record Received Date** (after the CDAC has received hospital's records).
- It could take 24 hours for the **Record Received Date** to populate.
- To verify receipt of records, contact the CDAC directly via email at [CDAC\\_Provider\\_Helpdesk@tistatech.com](mailto:CDAC_Provider_Helpdesk@tistatech.com) or phone at (717) 718-1230, ext. 201.

# eCQM Case Detail Report

- The eCQM Validation Case Detail Report becomes available after all the CDAC validation processes have completed.
- The Case Detail Report lists all abstracted elements compared to the CDAC re-abstraction on each case.

# Educational Reviews

Within 30 days of validation results posted on the HQR Secure Portal, if a hospital has a question or needs further clarification on a particular outcome, the hospital may request an educational review.

The educational review process and educational review forms can be found on the CMS QualityNet website. Navigate to the QualityNet website. To access:

1. Navigate to the QualityNet website: <https://qualitynet.cms.gov>
2. Select **Hospitals-Inpatient**.
3. Select **Data Management**.
4. Select **Data Validation**.
5. Select **Educational Reviews**.

Direct Link: <https://qualitynet.cms.gov/inpatient/data-management/data-validation/educational-reviews>



# Reconsiderations

- Within the Hospital IQR Program, if a hospital does not successfully submit at least 75 percent of requested medical records, the hospital will receive a letter in late spring indicating it has failed to meet the validation requirement of the Hospital IQR Program and will be subject to a reduction of their APU.
- After receiving the notification of failure, a hospital may request a reconsideration.
- Additional information, as well as the reconsideration request form, can be found on the QualityNet website. To access:
  1. Navigate to the QualityNet website: <https://qualitynet.cms.gov>
  2. Select **Hospitals-Inpatient**.
  3. Select **Hospital Inpatient Quality Reporting (IQR) Program**.
  4. Select the **APU** tab.
  5. Select **APU Reconsideration**.

Direct Link: <https://qualitynet.cms.gov/inpatient/iqr/apu>

# Validation Changes Affecting FY 2024 Validation Efforts

The following four slides include information that does **NOT** affect your current FY 2023 eCQM validation efforts; it is included here to make you aware of a change to future fiscal year validation processes.

# Validation Changes Affecting FY 2024 Validation Efforts

To align data submission quarters, CMS will use Q1–Q4 data of the applicable calendar year for validation of both chart-abstracted measures and eCQMs.

## Example: Quarter Alignment Used for Validation Affecting the FY 2024 Validation Efforts

Measures Submitted	Required Quarters of Data for Validation
Chart-Abstracted Measures	Q1 2021
	Q2 2021
	Q3 2021
	Q4 2021
eCQMs	Q1 2021–Q4 2021

# Validation Changes Affecting FY 2024 Validation Efforts

Finalized proposals affecting hospital selection:

- Use one single sample of hospitals selected through random selection and one sample of hospitals selected using targeting criteria, for both chart-abstracted measures and eCQMs.
- Expand targeted validation to include eCQMs, not just chart-abstracted measures.
- Reduce number of randomly selected hospitals from 400 to up to 200.

# Validation Changes Affecting FY 2024 Validation Efforts

Under the aligned validation process, any hospital selected for validation will be expected to submit data to be validated for both chart-abstracted clinical process of care (CPOC) measures, healthcare-associated infections (HAIs), and eCQMs.

## Validation Process Beginning with FY 2024 Validation Efforts

Selection Process	Number of Hospitals	Measure type
Random Selection	Up to 200	Chart-Abstracted CPOC, HAI, and eCQM
Targeted Selection	Up to 200	Chart-Abstracted CPOC, HAI, and eCQM
Total	Up to 400	Chart-Abstracted CPOC, HAI, and eCQM

# Validation Changes Affecting FY 2024 Validation Efforts

## Combining scoring processes:

- Under the Hospital IQR Program, there will be a combined score for the validation of chart-abstracted clinical process of care and eCQM measure types, with the eCQM portion of the combined score weighted at zero.
- HAIs will continue to be scored separately, under the Hospital-Acquired Condition (HAC) Reduction Program.

## Finalized Process for FY 2024 Validation Efforts and Subsequent Years

	Quarters of Data Required for Validation	Validation Pass/Fail Criteria
COMBINED Process (Chart-abstracted and eCQM Validation): Up to 200 Random Hospitals + Up to 200 Targeted Hospitals	1Q 2021–4Q 2021	Chart-abstracted Measures: At least 75% validation score (weighted at 100%) <b>AND</b> eCQM: Successful submission of at least 75% of requested medical records

# Resources

- eCQM validation resources available on the CMS QualityNet website:
  - Selected provider lists
  - eCQM validation fact sheet
  - Important dates and deadlines
- To access resources:
  1. Navigate to the QualityNet website: <https://qualitynet.cms.gov>
  2. Select **Hospitals-Inpatient**.
  3. Select **Data Management**.
  4. Select **Data Validation**.
  5. Select **Resources**.

Direct Link:  
<https://qualitynet.cms.gov/inpatient/data-management/data-validation/resources>
- For assistance with QualityNet (including logging into the HQR Secure Portal):
  - Contact the QualityNet Service Center at (866) 288-8912 8 a.m. to 8 p.m. Eastern Time, Monday through Friday, or email [qnet support@hcqis.org](mailto:qnet support@hcqis.org).

# Validation Questions

- Validation Support Contractor (VSC) email:
  - [validation@telligen.com](mailto:validation@telligen.com)
- CMS Hospital Inpatient Questions and Answers Tool:
  - [https://cmsqualitysupport.servicenowservices.com/qnet\\_qa](https://cmsqualitysupport.servicenowservices.com/qnet_qa)
  - When submitting a question, include the hospital six-digit CCN/Provider ID to expedite a reply with information specific to your hospital.



# Hospital IQR Program CY 2020 (FY 2023 Payment Determination) eCQM Validation Overview for Selected Hospitals

## Question and Answer Session

# Continuing Education Approval

This program has been approved for [continuing education credit](#) for the following boards:

- **National credit**

- Board of Registered Nursing (Provider #16578)

- **Florida-only credit**

- Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
- Board of Registered Nursing
- Board of Nursing Home Administrators
- Board of Dietetics and Nutrition Practice Council
- Board of Pharmacy

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