



Hospital IQR Program Phase 2 APU Reconsideration Process

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Purpose

The purpose of today's presentation is to provide information regarding the CMS Hospital IQR Program annual payment update (APU) reconsideration process.

CMS is currently making APU decisions that will affect a hospital's Medicare reimbursement between **October 1, 2022, and September 30, 2023**. This time frame is known as fiscal year (FY) 2023.

Objectives

By the end of today's presentation, participants will be able to:

- Understand the Hospital IQR Program requirements and the APU reconsideration process.
- File an APU Reconsideration Request Form with CMS.

Acronyms and Abbreviations

APU	Annual Payment Update	IQR	Inpatient Quality Reporting
CDAC	CMS Data Abstraction Center	NHSN	National Healthcare Safety Network
CMS	Centers for Medicare & Medicaid Services	PC	Perinatal Care
eCQM	electronic clinical quality measures	PDF	Portable Document Format
FY	fiscal year	PRRB	Provider Reimbursement Review Board
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	Q	quarter
HCP	Healthcare Personnel	SEP	sepsis
HVBP	Hospital Value-Based Purchasing	VIQR	Value, Incentive, and Quality Reporting

Hospital IQR Program

Payment Decisions

CMS notifies hospitals subject to Hospital IQR Program payment reductions under the IPPS in two phases.

Phase 1 - March	Phase 2 - May
Population and Sampling Q1–3 of calendar year	Population and Sampling Q4 of calendar year
Sepsis (SEP-1) and Perinatal Care (PC-01) Q1–3 of calendar year	Sepsis and Perinatal Care (PC-01) Q4 of calendar year
Influenza Vaccination Coverage Among HCP reported via NHSN Q4 of calendar year and Q1 of calendar year	COVID-19 Vaccination Coverage Among HCP Q4 of calendar year
	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Q1 – Q4 of calendar year
	eCQMs: Submit 4 of the 8 calendar year measures for two self-selected quarters (Q1, 2, 3, or 4)
	Maternal Morbidity Structural Measure Calendar Year
	All other requirements, including validation if selected

Phase 2

Program Requirements

- Submit aggregate Population and Sample size counts for Quarter 4 by the submission deadline.
- Submit clinical process of care measure data, including PC-01, for Quarter 4 by the submission deadline.
- Submit COVID-19 Vaccination Coverage Among Healthcare Personnel measure data by the submission deadline.
- Submit Maternal Morbidity Structural Measure data for calendar year (Quarter 4) 2021 by the submission deadline.

Phase 2

Program Requirements cont'd

- Submit Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey data for Q1 through Q4 2021.
- Submit four of the eight CY 2021 eCQM measures for two self-selected quarters (Quarter 1, 2, 3 or 4) by March 31, 2022.
- Complete a Notice of Participation.
- Register with the *QualityNet Secure Portal* and identify a Security Official.
- Pass validation requirements, if selected.

Phase 2 Notification

CMS sent APU determination notification letters on June 1, 2022, to hospitals not meeting one or more of Phase 2 requirements:

- APU reconsideration requests for Phase 2 decisions are due to CMS **30** days from the date of receipt of the notification letter.
- Hospitals filing an APU reconsideration request based on the June 2022 Phase 2 notification letters will be mailed the CMS decision in **July 2022**.

APU Reconsideration Process

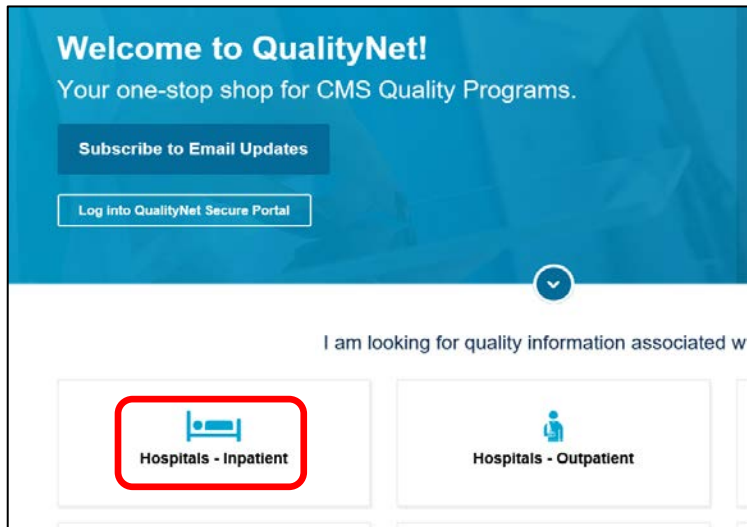
QualityNet Location

The overview for the Hospital IQR Program APU reconsideration process and the APU Reconsideration Request Form are available on the [APU Reconsideration](https://www.qualitynet.org/inpatient/iqr/apu#tab2) page on *QualityNet*.
<https://www.qualitynet.org/inpatient/iqr/apu#tab2>

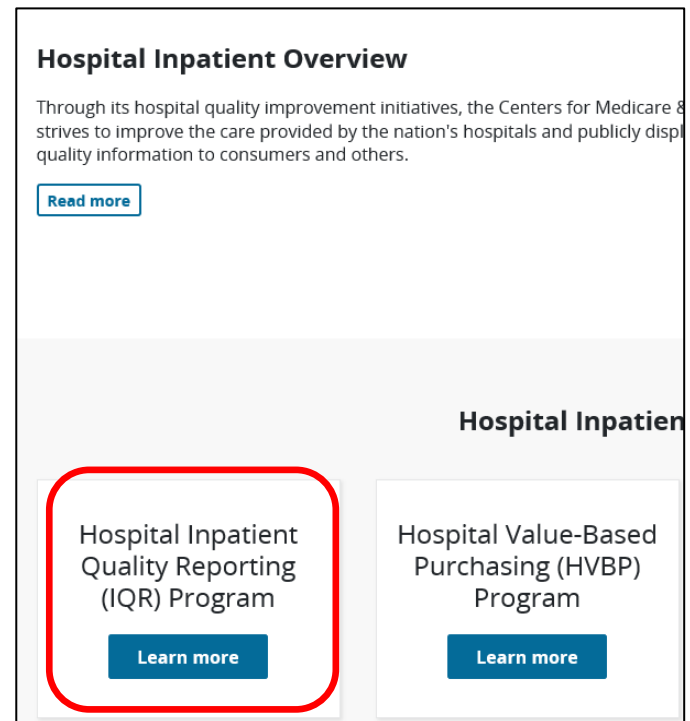
QualityNet

Hospital Inpatient Location

From the QualityNet home page, select **Hospitals - Inpatient**.

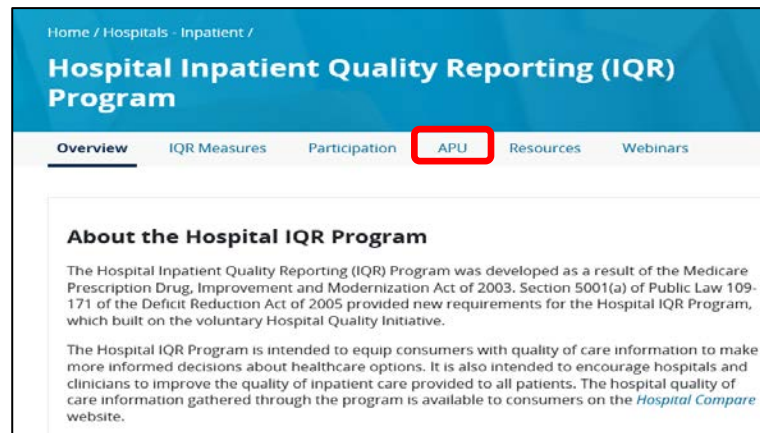


Then, select Learn More under **Hospital Inpatient Quality Reporting (IQR) Program** for the About the Hospital IQR Program page.

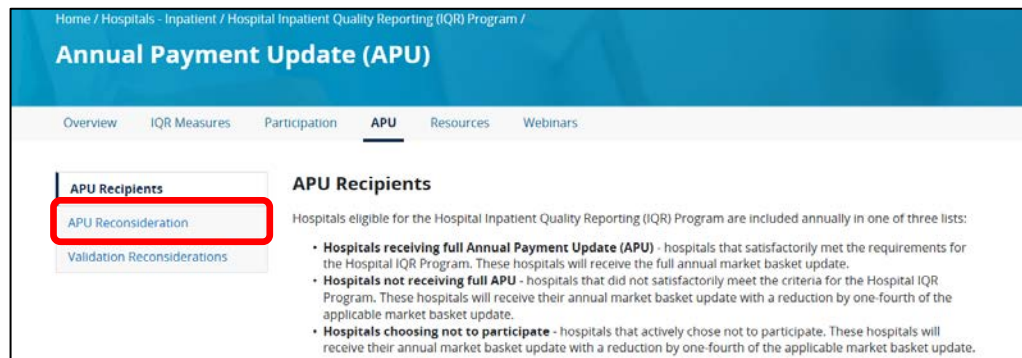


QualityNet APU Reconsideration Process Location

Access the Hospital IQR Program APU reconsideration information on QualityNet by selecting the **APU** link from the upper task bar.



This will direct you to the *APU Recipients* page. Select **APU Reconsideration**.



Reason for APU Reconsideration Request

- Provide the CMS-identified reason your facility did not meet the APU requirements.
- State the specific reason(s) for believing your facility did meet the quality reporting program requirement(s) and should receive the full APU.
- Fill out the APU Reconsideration Request Form **completely** and **accurately**; all fields with an (*) are mandatory.
- Include any additional information or documentation by attaching a PDF file with the request form.

Submitting APU Reconsideration Request

- Submit the request form using one method listed below:
 - *Hospital Quality Reporting Secure Portal*
Managed File Transfer
 - Secure fax: (877) 789-4443
 - Email: QRFormsSubmission@hsag.com
- Direct reconsideration questions to Shannon Kerr at Shannon.Kerr1@cms.hhs.gov.

APU Reconsideration Request: Chart-Abstracted Validation

If your facility did not meet the chart-abstracted validation requirement and would like to request a validation reconsideration, a Validation Review for Reconsideration Request Form must be completed **in addition** to the APU Reconsideration Request Form.

- Fill out the Validation Review for Reconsideration Request Form **completely** and **accurately**; all fields with an asterisk (*) are mandatory.
- Include a copy of the medical record as previously sent to the Clinical Data Abstraction Center (CDAC); a copy must be submitted for each appealed abstraction control number.
- Submit the Validation Review for Reconsideration Request Form and medical record(s) via the *Hospital Quality Reporting Secure Portal* to the Managed File Transfer Validation Contractor group.
 - Alternatively, the Validation Review for Reconsideration Request and medical record(s) may be mailed to the address listed on the request form.
 - The form and the medical record, as previously submitted to the CDAC, must be received by the Validation Support Contractor, within 30 days following the date of receipt of the APU notification letter.

APU Reconsideration Request: eCQM Validation

If your facility did not meet the eCQM validation requirement and would like to request a validation reconsideration:

- Complete and submit the Reconsideration Request Form by the deadline.

No other form or submission of the medical record is required.

Filing a Provider Reimbursement Review Board (PRRB) Appeal

When a hospital is dissatisfied with the result of the CMS APU reconsideration, the hospital may file an appeal with the PRRB.

- The appeal may be filed **only** after the hospital has submitted a request for reconsideration and then received an adverse decision on the request.
- A hospital may file an appeal up to 180 days following the Hospital IQR Program reconsideration determination notification date.
- Details about the PRRB appeal process can be found on the CMS website: www.cms.gov/Regulations-and-Guidance/Review-Boards/PRRBReview/index.html?redirect=/PRRBReview

Questions

Please submit all questions regarding the APU reconsideration process and the Hospital IQR Program to InpatientSupport@hsag.com.