



Hospital Value-Based Purchasing (VBP) Program
Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor

July 2022 Public Reporting Claims-Based Measures
Hospital-Specific Report Overview
Question and Answer Summary Document

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This document answers the questions that providers submitted during the event and after the event to WebinarQuestions@hsag.com. Subject-matter experts developed the responses.

Question 1: Can you provide additional information about the updates CMS plans to implement for the pneumonia mortality and readmission measures to account for COVID-19? How will those updates differ from the addition of the history of COVID-19 risk factor that was added to all the measures in the current Hospital-Specific Report (HSR)?

You can find information about the way CMS plans to implement the pneumonia mortality and readmission measures in the Fiscal Year (FY) 2023 Inpatient Prospective Payment System (IPPS)/Long-term Care Hospital Prospective Payment System (LTCH PPS) proposed rule.

Question 2: Why do some coefficients for a risk factor have a negative number? What does the negative number mean? For example, I see Years Over 65 (continuous) for COPD is -0.004024954725195, while AMI is 0.010502573526692. Another example is Depression for COPD is -0.003563203

A negative (-) indicates risk variables where patients with these variables have a lower likelihood of the outcome (compared to those without the risk variable). Risk factors without a negative indicate that patients with the variable have a higher likelihood of the outcome.

Question 3: Slide 31. Why is there an overlap? If my hospital's rate is 13.6 percent, for example, is our hospital better or no different?

It depends on your hospital's interval estimate. If the interval estimate crosses the national rate, then your hospital will be categorized as "no different." If the interval estimate is less than the national rate, it will be categorized as "better than national." You will find your hospital's categorization for each measure in your HSRs.

Question 4: Are these only updated once per year?

The claims-based outcome measure results discussed on this presentation are calculated and reported once a year.

Question 5: Will CMS refresh the PSI measures on Care Compare in July? Will Care Compare retain current PSI values, or will "N/A" appear?

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N/A will be reported for the July 2022 Care Compare refresh. We are reviewing options for reporting PSI measure results. More information about the impacts of the COVID-19 Public Health Emergency on the CMS PSI 90 measure can be found in the FY 2023 IPPS/LTCH PPS proposed rule.

Question 6: Why did our PSI section on the Preview Report display “N/A”? Do you know when the PSI result will be available?

CMS has not scheduled the public reporting of PSI. We are reviewing options for reporting PSI measure results and will post information when a decision has been made. More information about the impacts of the COVID-19 Public Health Emergency on the CMS PSI 90 measure can be found in the FY 2023 IPPS/LTCH PPS proposed rule.

Question 7: Will the next star rating occur in January 2023?

CMS will publicly report the July 2022 Overall Star Ratings in late July. We have not determined an exact date yet. CMS has not determined the release in which the subsequent Star Ratings refresh will appear.

Question 8: We were provided the July 2022 report, but July 2021 reported data were used for the hospital star rating. Can you explain this?

CMS made the decision to use July 2021 measure data, although the measure reporting periods were impacted by measurement reporting exceptions announced by CMS. After examining several other Care Compare refreshes, CMS determined that the July refresh was the most appropriate refresh: It included updated measurement periods to several key measures, and it was less impacted by the CMS exceptions.

Question 9: When will the Hospital Readmissions Reduction Program (HRRP) HSR become available?

HRRP HSRs are currently scheduled to become available in mid-August 2022.

Question 10: Why is the OP-10 measure only including July–December 2019 data? Why does it use older data than all the other measures?

OP-10 calculates the percentage of CT abdomen or abdominopelvic studies performed with and without contrast out of all CT abdomen or

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abdominopelvic studies performed (those with contrast, those without contrast, and those with both).

In response to your inquiry, CMS identified an error in the calculation of OP-10 measure results used for calendar year (CY) 2021 public reporting under the Hospital Outpatient Quality Reporting (OQR) Program. As a result of this issue and a commitment to data accuracy, CMS released two Facility-Specific Reports (FSRs) in 2022:

The OP-10-only FSR contains data for OP-10 only for 2021 public reporting. The data collection period is July 1, 2019–December 1, 2019. The results in the OP-10-only FSR, which are associated with CY 2022 payment determination under the Hospital OQR Program, are expected to be publicly reported in summer 2022. The OP-10-only FSR was distributed to correct the measure calculation error and reflect accurate results.

The Spring 2022 FSR contains data for 2022 public reporting. The data collection period is July 1, 2020–June 30, 2021. The OP-10 results in the spring 2022 FSR, which are associated with CY 2023 payment determination under the Hospital OQR Program, are expected to be publicly reported in fall 2022.

Please also note that CMS did not collect data from January 1, 2020, through June 30, 2020, for the Hospital OQR Program due to the Extraordinary Circumstance Exception issued for this reporting period at the beginning of the COVID-19 Public Health Emergency.

Please reference the following news release for more information on the OP-10 data error: <https://qualitynet.cms.gov/files/62067971cc1c060016e034df?filename=2022-07-OP.pdf>. You may also access Version 15.0a of the Hospital OQR Specifications Manual for more information: https://qualitynet.cms.gov/files/61ae404730ffbc00229c3659?filename=OQR_v15.0a_SpecsManual.zip.