



# **Hospital IQR Program Phase 1 APU Reconsideration Process**

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**Candace Jackson, ADN, RN**

Project Coordinator, Hospital Inpatient Quality Reporting (IQR) Program  
Inpatient Value, Incentives, and Quality Reporting (VIQR)  
Outreach and Education Support Contractor

**March 20, 2024**

# 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, 2024, and September 30, 2025**. This time frame is known as fiscal year (FY) 2025.

# Objectives

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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 with CMS.

# Acronyms and Abbreviations

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

# 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<br>Q1–3 of calendar year   | Population and Sampling<br>Q4 of calendar year   |
| Sepsis (SEP-1) and Perinatal Care (PC-01)<br>Q1–3 of calendar year   | Sepsis and Perinatal Care (PC-01)<br>Q4 of calendar year   |
| COVID-19 Vaccination Coverage Among HCP<br>Q1-3 of calendar year   | COVID-19 Vaccination Coverage Among HCP<br>Q4 of calendar year   |
| Influenza Vaccination Coverage Among HCP reported via<br>NHSN<br>Q4 of calendar year and Q1 of calendar year | Hospital Consumer Assessment of Healthcare Providers and<br>Systems (HCAHPS)<br>Q1 – Q4 of calendar year   |
| Validation, if selected  | eQMs: Submit Safe Use of Opioids – Concurrent Prescribing,<br>Cesarean Birth, and Severe Obstetrics Complications and three self-<br>selected measures for the calendar year for three self-selected<br>quarters<br>(Q1, 2, 3, or 4) |
|  | Maternal Morbidity and Hospital Commitment to Health Equity<br>Structural Measures<br>Calendar Year  |
|  | All other requirements   |

# Phase 1

## Program Requirements

- Submit aggregate Population and Sample size counts for Quarter 1 through 3 by the submission deadlines.
- Submit clinical process of care measure data, including PC-01, for Quarters 1 through 3 by the submission deadline.
- Submit COVID-19 HCP Vaccination measure data for Quarter 1 through 3 by the submission deadline.
- Submit HCP-Influenza Vaccination measure data for Quarter 4 2022 and Quarter 1 2023 by May 15, 2023.
- Pass validation requirements, if selected.

# Phase 1 Notification

CMS sent APU determination notification letters on March 14, 2024, to hospitals not meeting one or more of Phase 1 requirements:

- APU reconsideration requests for Phase 1 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 March 2024 Phase 1 notification letters will be mailed the CMS decision in **May 2024**.

# 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) web page of QualityNet:

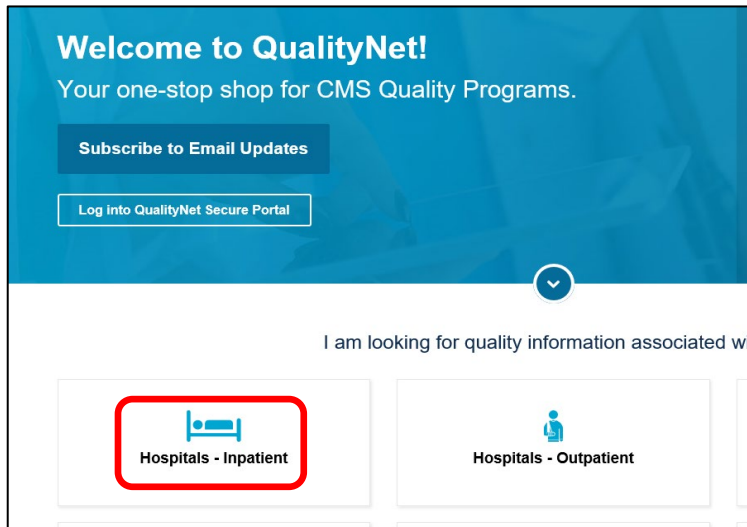
<https://www.qualitynet.org/inpatient/iqr/apu#tab2>



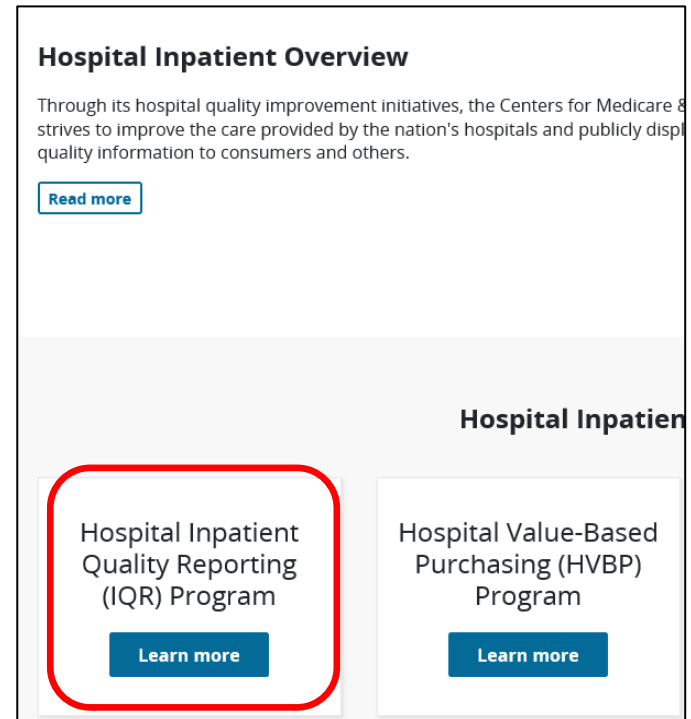
# QualityNet

## 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.

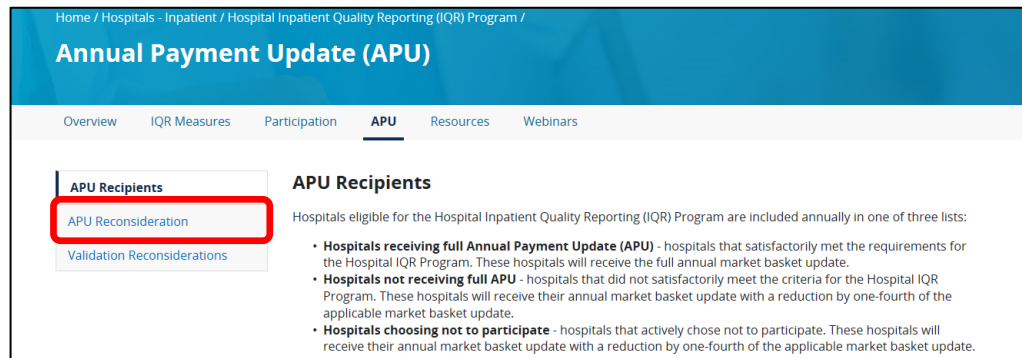


# QualityNet APU Reconsideration Process Location

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 an 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](mailto:QRFormsSubmission@hsag.com)
- Direct questions about the reconsideration process to National Support Team for the Hospital IQR Program at [InpatientSupport@hsag.com](mailto:InpatientSupport@hsag.com) or (844) 472-4477
- Direct questions about a reconsideration request you have already submitted to Shannon Kerr at [Shannon.Kerr1@cms.hhs.gov](mailto:Shannon.Kerr1@cms.hhs.gov).

# APU Reconsideration Request: Chart-Abstracted Validation

If your facility did not meet the validation requirement, due to chart-abstracted validation, 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](https://www.cms.gov/Regulations-and-Guidance/Review-Boards/PRRBReview/index.html?redirect=/PRRBReview)

# Questions

POWERPOINT SLIDE SHOW - CMS\_Reconsideration Process\_ET 2024 Phase 1 - POWERPOINT



**Hospital IQR Program  
Phase 1  
APU Reconsideration Process**



The image shows a PowerPoint slide titled "Hospital IQR Program Phase 1 APU Reconsideration Process". The slide features the CMS logo (Centers for Medicare & Medicaid Services) at the top. On the left side, there is a vertical navigation bar with four icons: a back arrow, a microphone, a document, and a hand icon. The hand icon is highlighted with a red rectangle.



# 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.

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