Inpatient Quality Reporting (IQR) Program

Support Contractor

A Demonstration for Submitting
QRDA Category I Files for CY 2016 Reporting

Questions and Answers

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Question 1:   **Will a vendor be able to access the secure files?**

If a vendor is authorized to submit Quality Reporting Document Architecture (QRDA) Category I files for a hospital, then that vendor would also have report authorization, which would allow the vendor to run submission and feedback reports within the *QualityNet Secure Portal* (QSP).

Question 2:   **How does a hospital or a vendor obtain the special permission to be able to upload their data?**

If they need a new *QualityNet* account or a change to a role, you can either work through an existing security administrator for a facility or reach out to the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912).

Question 3:   **Can you submit test and production files through the Pre-Submission Validation Application (PSVA) tool?**

You can submit both test and production files through the PSVA tool. Initially, data submitters could only submit test files; the ability to also submit production files began October 1, 2016.

Question 4: **How long can we submit test QRDA Category I files?**

The test QRDA Category I files can be submitted until the end of the submission period deadline, which is February 28, 2017.

Question 5: **What is the purpose of sending test data?**

It is very important to submit test data to ultimately ensure your QRDA Category I files are correctly formatted. You also want to verify the measure outcomes are as you expected from your system. So, it's going to be very important to verify that through testing, as opposed to taking for granted that your production files will meet system requirements.

Question 6: **I have been submitting test files via the PSVA tool. Your demonstration is different than what I have been doing. Is the end result the same?**

That is correct. Files that come in through PSVA are basically placed in the data upload system within the QSP. Using the PSVA tool bypasses the secure portal aspect of the submission process. If you submit the files and you receive a successful submission message through PSVA, the end result is the same. In addition, when you submit through PSVA, you will also receive the email notifications from the CMS data receiving system, just as if you submitted it directly into the QSP.

Question 7: **Will a notification email be sent if a vendor is uploading files through the *QualityNet Secure Portal* or the PSVA?**

The email notifications are sent to the email address associated with the user uploading the files. So, if a vendor uploads for a hospital, the hospital will not receive that notification. It will go to the user. The outcome is the same whether the user is submitting the files through the QSP or via the PSVA tool.

Question 8: **Should we validate our reports before sending our files?**

If the term, *reports*, is referring to QRDA Category I files as reports or exports from the EHR system, then yes, the files should be validated, either through the CMS test system within the QSP or through use of the PSVA tool.

Question 9: **We have three facilities; can we submit for all three facilities at once in the PSVA tool, or do we need to submit each facility separately? Can we do this if we submit in the same method to the *QualityNet Secure Portal*?**

Data can be submitted for all three facilities together within a batch via either method; the PSVA tool or to the QSP. Some facilities have reported that they separate individual facilities by batch but it's not necessary; the files will come in and be processed appropriately.

Question 10: **I'm uploading test files successfully using the PSVA tool. Is it okay to upload the production files using PSVA?**

Yes, data submitters can upload production files using the PSVA tool. Submitters should select the production folder in PSVA, and it will correlate with the production folder in the QSP.

Question 11: **Are there are any size requirements for the ZIP file uploaded?**

A maximum of 15,000 files can be submitted per ZIP file. Each individual file limit is five megabytes (MB). If a data submitter has more than 15,000 files to report, then multiple ZIP files can be submitted. If a QRDA Category I file is larger than five MB, please contact the *QualityNet* Help Desk for assistance (qnetsupport@hcqis.org; 1-866-288-8912).

Question 12: **What is the difference between submitting files through the PSVA tool and the *QualityNet Secure Portal*?**

The PSVA is testing only the validation rules, which means it is looking at the formatting of the files and the required aspects within each template. There are additional validations performed by the CMS data receiving system related to authorization of the user submitting the file for that particular CMS Certification Number (CCN). Additional validations are performed regarding acceptable dates and submission periods, as well as, measure outcomes. At this time, the PSVA tool does not validate any levels of clinical data.

Question 13: **Is the run report feature live yet?**

The run report feature within the QSP is available. If you are having issues generating reports, please contact the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912).

Question 14: **If the QRDA Category I file has not processed, whom should we contact? Should we resubmit the file?**

If you have submitted a file and received the first email indicating the file was received, but have not received the second email within 24 hours indicating it was processed, the first step is to contact the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912). If you have not received an update, I suggest contacting the Help Desk prior to resubmitting the QRDA file, unless they've given you that guidance. At times they may be troubleshooting a system issue.

Question 15: **The submission report gives numerator-denominator, pass-fail status, but is there a report that gives more data on which specific data element causes the fallout? For example, the anticoagulant medication is missing.**

At this time, a report is not available to provide that level of detail. This feedback has been received and is being evaluated for potential development for a future release.

Question 16: **Is a QRDA Category I file considered the one file, per patient, for the quarter?**

Yes, a QRDA Category I file is patient-level data. That file should include one patient, per file, and all encounters for that patient for the quarter.

Question 17: **Can you filter and only see the file status of rejected? I ran a Submission Detail Report and it is not showing my rejected files; is there a known issue with this?**

When viewing the screen to define report parameters within the QSP, there is a file-status parameter, which defaults to all; however, if the user clicks the drop-down for selected reports, the user can select accepted, rejected, or both. This will also depend on the report being viewed. For additional assistance, please contact the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912). Please provide the batch IDs from your second email and the parameters that you're using to run the reports so the Help Desk can more quickly assess the issue.

Question 18: **What if the report comes back and says, "No files have been processed?"**

If a data submitter has received the second email confirming that your files have been uploaded and processed, but you are not able to view information in your report, please contact the *QualityNet* Help Desk for further assistance (qnetsupport@hcqis.org; 1-866-288-8912). There may be a parameter issue or something else that may be an issue within the file.

Question 19: **If we use a vendor to submit QRDA Category I files on our behalf, are we able to view this data in *QualityNet*, based on the hospital ID? Will this show in the submission and feedback reports?**

Yes, hospital users should be able to view reports through the feedback category.

Question 20: **How much time does it take for hospitals to upload all of their patient files? We are trying to assess our staffing to handling the file upload process.**

Unfortunately, the time is dependent on each facility's specific process and could vary widely across organizations.

Question 21: **When reviewing the screenshots of the *QualityNet* submission reports in this presentation, how do you know what file the patient is associated with?**

For the presentation, the patient ID is blocked out on this particular example of a report. But you can see the file name is listed just below that area; and the measures for that patient are listed, as well.

Question 22: **Can we submit our production files in the test folder before sending to our vendor?**

Yes, if you are generating your own QRDA Category I files but your vendor is submitting the files on your behalf, yes, you should be able to test your files through the test system in the QSP. As a note, the QSP is secure, so there is no need to worry about personal health information (PHI) with either the test or production QRDA Category I files.

Question 23: **What utility is used to display the XML QRDA file in this format?**

In the presentation, the particular format shown in the screenshot is just an Extensible Markup Language (XML) Notepad. CMS doesn't endorse the use of any particular XML editor application. Several options are available; some provide more details, others are more basic, like the one shown in the screenshot.

Question 24: **You mentioned making the corrections to the QRDA Category I file. How and where do we make these corrections?**

This response depends on a few things. If this is a field that is entered through your EHR and you're finding that the information is not coming into the file correctly, we suggest working with either your vendor or your information technology (IT) department to understand the mapping, and make sure the information is correct. If it's something with the header, you may be able to look at changes outside of that, or how your system is building the files, and that's very dependent on each individual facility's situation. It just depends on what process you're using to build the QRDA Category I file.

Question 25: **If a vendor is authorized, will that vendor need further action by its *QualityNet* Security Administrator to access these files for troubleshooting?**

If the vendor is authorized and has report access through *QualityNet*, that vendor can view the reports within our system. The QRDA Category I files that are submitted would be on an individual facility level and the vendor would access any of those files, either prior to sending, or as they're submitted.

Question 26: **What is the difference between the feedback and submission report? When do you use one over the other?**

A vendor has to be authorized to see feedback reports. Submission reports are available to submitters, and the parameters are a little bit different. There are some occasions when the submission category could be preferred, as in the example that was used for the electronic Clinical Quality Measure (eCQM) Submission Detail Report. The ability to submit a batch of QRDA Category I files and only review specific errors is sometimes helpful. Although there are a few differences in parameters, the data that shows on the reports, through either category, should be the same.

Question 27: **Should we expect that the feedback messages we receive using the PSVA tool will be the same as those received by submitting files through the *QualityNet Secure Portal*?**

For the most part, yes, they should be relatively the same as those received by submitting files through the QSP. If you receive different feedback messages and are unclear why, please contact the *QualityNet* Help Desk for additional assistance (qnetsupport@hcqis.org; 1-866-288-8912).

Question 28: **If I use the PSVA tool to submit test or production files, can I still run the EHR feedback report?**

The reports that are available on *QualityNet* will only show data that has been received into the system either via the secure file transfer (SFT) option or PSVA. If you just test QRDA Category I files in the PSVA on your desktop, the CMS reports are not available.

Question 29: **If this is for submission for the Hospital IQR Program, how do we submit the meaningful-use data?**

QRDA Category I files being submitted for meaningful use (MU), or the EHR Incentive Program, is the exact same process as for Hospital IQR Program credit. If you report on four measures, and you're submitting the same four eCQMs for IQR and MU, you only need to perform one submission.

Question 30: **My vendor says it will not be ready until the deadline for eCQM submission. Will I still be able to submit test files?**

All test and production file submissions must be completed by the 2016 QRDA Category I submission deadline, which is February 28, 2017. Due to the differences between the 2016 and 2017 reporting standards, there would be limited value in testing 2016 QRDA Category I files after the submission period closes. Once the test system for CY 2017 eCQM reporting is available, you will be able to submit test files for the 2017 submission period.

Question 31: **Are the steps you've identified for production data the same steps you would use for test data? If not, what is the difference?**

The steps are the same. Please visit the *Quality Reporting Center* website, which has an area for resources and tools specific to eCQM reporting. The website also offers a checklist for test and production QRDA Category I file submissions. The documents are structured to step you through the process, whether you're using the PSVA tool to submit your files or if you're going straight into the QSP to submit your files.

Question 32: **Will reporting the four measures for one quarter in 2016 fulfill the requirement for the eCQM portion of IQR and the EHR Incentive Program?**

That is correct. For eCQM, successfully reporting on a minimum of four eCQMs for either third- or fourth-quarter 2016 discharges will fulfill the reporting requirement for the IQR and the EHR Incentive programs. Successful reporting is defined as, submitting a combination of QRDA Category I files, zero denominator declarations, and/or case threshold exemptions

Question 33: **Do you have to download the PSVA tool to submit your file?**

You do not have to use PSVA to test. Submitters are highly encouraged to use the PSVA tool because it is helpful in identifying validation errors within the file, but you can certainly also test by submitting files directly to the *QualityNet Secure Portal*.

Question 34: **Are errors corrected in a template or on each individual file?**

The response comes back to the process for the individual facility and how it's building the QRDA Category I files, and what template is impacted.

Question 35: **Can more than one user have access to review reports? For example, can you have access to just look at the reports generated from submitting files, whether test or actually submission?**

Report access is, in part, tied to the EHR data upload role.

Question 36: **For calendar year (CY) 2016 reporting, can files be submitted monthly, quarterly, or annually?**

For 2016, only one quarter of data from either third quarter or fourth quarter is required by February 28, 2017. The CMS data receiving system opened October 1, 2016, and will remain open and available to accept both test and production files until the deadline.

Question 37: **Which version of the PSVA tool are we required to use?**

Version 1.2 of the PSVA tool is currently available for download. When a user logs into PSVA, the tool performs a version check, and will require the user to validate against the most up-to-date version before allowing the user to submit QRDA Category I files.

Question 38: **How does *QualityNet* know how many patient files should have been submitted? If 1,000 files are submitted and only 999 files are successfully submitted with one rejected file, what will occur?**

In terms of the expectations, CMS expects that the file that you're submitting will be representative of your total patient population. In your example, you know that you have 1,000 files that should be submitted because they represent your population for that quarter for CY 2016 reporting. And, if you have one file that is rejected, then the expectation is that, you would continue to rework that file to have that file successfully resubmitted for reporting.

Question 39: **We received 20 invalid files using the PSVA tool. We submitted only the valid files to the *QualityNet Secure Portal* and it showed five additional rejected files. Why didn't the PSVA tool find these?**

Some aspects of the validation process are not in alignment. For instance, the PSVA does not perform validations of clinical data; however, the QSP performs those validations. In order to determine what may have caused those additional rejected files to display in the Submission Detail Report, please contact the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912).

Question 40: **Are statuses of warnings considered a successful submission?**

Yes, warnings will not prevent a QRDA Category I file from being accepted by the CMS data receiving system.

Question 41: **In regards to errors received, how do we know what the error is, and how to fix it?**

If you receive a message that your file has been rejected from *QualityNet*, the eCQM Submission Detail Report, for that file, is what you would want to look at to determine what errors were on the file, and review file-level validations.

Question 42: **In your example, you uploaded two documents: one was ZIP and the other was an XML. What is the difference?**

QualityNet will accept either a ZIP file containing multiple QRDA Category I files or an individual QRDA Category I file. Most facilities might find it beneficial to submit as many files in a batch, in a ZIP, as they could. Processing-wise, there is no difference.

Question 43: **If we submit quarter-three data because we are concerned about not having enough time to get the fourth-quarter data in, if then, we are able to submit fourth quarter by the deadline, which quarter will CMS use?**

In this scenario, the third quarter would be utilized by CMS because it fulfilled the reporting requirement.

Question 44: **When I try to generate the Performance Feedback Report within the *QualityNet Secure Portal*, it does not run, and actually disappears from my report queue.**

Please contact the *QualityNet* Help Desk for additional assistance on troubleshooting the report feature in the QSP (qnetsupport@hcqis.org; 1-866-288-8912).

Question 45: **Is the QSP ready to handle this amount of activity? We have noted that it can take up to three hours for the files to process. To just submit charts for validation can take us up to three hours.**

The CMS data receiving system is open and available to accept both test and production file submissions. Users should receive an initial email from Axway, which indicates that the file has been delivered. A second email will be sent, indicating that the file has been received and processed into the CMS clinical warehouse. If a user has not received the second email within 24 hours, please contact the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912).

Question 46: **Please refer to slide 41. When will we be able to submit test files in regards to the CY 2017 specifications?**

At this time, a time frame has not been communicated regarding the availability of the CMS data receiving system to accept test files for CY 2017 reporting. CMS will communicate system availability via ListServe in the coming months. Please visit *QualityNet* to ensure you are receiving ListServe notifications.

Question 47: **You had a great reference tool for CY 2016, the preparation checklist (direct link). Will one be forthcoming for CY 2017?**

Thank you for your feedback. Plans are in place to release a preparation checklist for CY 2017 reporting, as well. We will continue to notify data submitters of the availability of these types of reference tools through future ListServe notifications. Please visit *QualityNet* to ensure you are receiving ListServe notifications.

Question 48: **Will you be showing a presentation on using the PSVA tool to submit QRDAs?**

A webinar on the PSVA tool, including a live demonstration, was completed on March 10, 2016, titled, *PSVA Demonstration and eCQM Question and Answer Session*. The event resources, including presentation slides, event recording, and questions-and-answers transcript, can be located on the *Quality Reporting Center* website.

Question 49: **Can we use the same QRDA Category I file to upload to The Joint Commission (TJC)?**

Facilities intending to submit the same QRDA Category I files to CMS and to TJC for eCQM reporting would need to modify the file according to the specific formatting requirements outlined in each program's implementation guide. If converting a QRDA Category I file for submission to CMS, it is highly recommended to utilize the PSVA tool to identify any potential errors before formal submission of the production files to the CMS data receiving system. TJC has a separate receiving system to process submitted QRDA Category I files for their eCQM reporting activities. Please visit The Joint Commission website for additional details.

Question 50: **Is there a QRDA Category I test file that we can use to test our PSVA tool?**

Data submitters may use dummy data or a current patient file for test submissions through the PSVA tool. The PSVA tool is on a secured site. As a reminder, files submitted as test files will not count for production reporting and will not meet program requirements.

Question 51: **Are the performance reports only available for production files, or are they also available for test files so we can see what our overall aggregate scores are before submitting to production?**

The eCQM Performance Summary Report can be generated for production files only and offers summary-level measure performance calculations. The eCQM Submission and Performance Feedback Report can be generated for test and production QRDA Category I files, and evaluates patient-level measure calculations.

Question 52: **Should we register for login IDs and passwords after this webinar?**

In order to submit eCQM data through the PSVA tool and/or the QSP, users must contact the *QualityNet* Help Desk to obtain a QSP account and the EHR data upload role (qnetsupport@hcqis.org; 1-866-288-8912).

Question 53: **Where can I find the document that shows the specifications on how the files should be formatted prior to uploading them?**

Facilities submitting eCQM data will need to utilize an EHR system certified to the 2014 or 2015 Office of the National Coordinator for Health Information Technology (ONC HIT) standards.

In addition, they must format QRDA Category I files according to the CMS Implementation Guide for Quality Reporting Document Architecture Category I and Category III: Eligible Professional Programs and Hospital Quality Reporting (HQR) Supplementary Implementation Guide for 2016 and the 2016 CMS QRDA Implementation Guide for Eligible Professional Programs and Hospital Quality Reporting (HQR) Appendix.

Electronic Clinical Quality Measure (eCQM) specifications used for CY 2016 submissions must be the version with the June 2015 update. Please visit the CMS eCQM Library to quickly locate the items identified above.

Question 54: **Does the vendor have to meet any specific requirements to submit QRDA Category I files?**

Vendors must have a QSP account, as well as, obtain the EHR data upload role in order to submit data on the hospital's behalf. Hospitals must authorize their vendor(s) in the QSP prior to data submission. Please contact the *QualityNet* Help Desk for additional questions (qnetsupport@hcqis.org; 1-866-288-8912).

Question 55: **Where can the criteria needed for reporting to CMS for hip arthroplasty and/or knee arthroplasty (HPRO/KPRO) be found? Do the surgical site infection (SSI) measures get re-baselined with updated data as compared to the 2006 – 2008 SSI NHSN baseline data?**

The HPRO/KPRO measure is not included, nor required, under the Hospital IQR Program. For more information on this measure, we recommend contacting the NHSN support team at nhsn@cdc.gov.

CMS announced in the FY 2016 hospital inpatient prospective payment system (IPPS) proposed rule that the Centers for Disease Control and Prevention (CDC) is updating the standard population data as part of routine measure maintenance to ensure each NHSN measure's number of predicted infections reflects the current state of healthcare-associated infections (HAIs) in the United States.

Currently, the CDC calculates the standard population data for the central line-associated bloodstream infection (CLABSI) and the colon and abdominal hysterectomy SSI measures, based on data collected in 2006 to 2008. Beginning in 2015, the CDC will collect data in order to update the standard population data for all of these NHSN measures, including catheter-associated urinary tract infection (CAUTI), Methicillin-resistant *Staphylococcus aureus* (MRSA) Bacteremia, and *Clostridium difficile* infection (CDI).

For more information on the re-baselining of the NHSN measures, we recommend referencing the FY 2016 IPPS final rule (80 FR 49554 – 49555, 49578 – 49579, and 49652). We also hosted a webinar on the re-baselining of the NHSN measures on October 26, 2016. The event resources for this webinar are available on the *Quality Reporting Center* website.

Question 56: **How do I correct error CONF:CMS_0062?**

The conformance error, CMS_0062, is the Encounter Performed Admission Date. The system shall reject QRDA Category I files if the Encounter Performed Admission Date (effectiveTime/low value) is after the Encounter Performed Discharge Date (effectiveTime/high value). Possible conditions resulting in this error include the following: Encounter Performed Admission Date really is after the Encounter Performed Discharge Date; or, if either the Admission Date or Discharge Date values are null or have an invalid format.

For additional assistance on correcting this error, please refer to the webinar, *Common Errors for QRDA Category I Test Files Session 1* from July 25, 2016, located on the *Quality Reporting Center* website. Slides 14 and 15 provide further information.

In addition, please reference the CMS Implementation Guide (IG) for Quality Reporting Document Architecture Category I and Category III: Eligible Professional Programs and Hospital Quality Reporting (HQR) Supplementary Implementation Guide for 2016, available on the CMS eCQM Library web page.

If you are unable to locate the specific conformance error using the search feature within the IG, search by using keywords, such as, *encounter performed admission date*.

Question 57: **Does submitting QRDA Category I files through the QSP for the Hospital IQR Program meet the CQM requirements for meaningful use 2016?**

For CY 2016 reporting, hospitals are able to successfully submit at least four eCQMs from either quarter three or quarter four by February 28, 2017. This will meet the eCQM reporting requirement for the Hospital IQR Program. This will also meet the Clinical Quality Measure (CQM) requirement for the EHR Incentive Program. Please keep in mind there are additional requirements for each program.

Question 58: **If a test file submission to the QSP was successful by receiving both emails with "0" files rejected, does that mean the format was correct?**

To ensure no files were rejected, or other issues were identified within the files, it would be in the facility's best interest to generate one or more of the reports available for test submissions, e.g., the Submission Summary Report, the eCQM Submission and Performance Feedback Report, and/or the Submission Detail Report.

Question 59: **Our hospital is changing electronic health records (EHRs) mid-quarter. Can we have the old vendor send us the eCQM files and then, we can upload all of the files from the new system and old system?**

Your scenario is very specific to organizational needs and mitigating factors may be at play, that are not present in this example. Please work with your vendor to determine the best course of action. Also contact the *QualityNet* Help Desk to address additional questions (qnetsupport@hcqis.org; 1-866-288-8912).

Question 60: **Are the permissions needed to upload these files the same as those required to upload from CART?**

Submitting data for the CMS Abstraction and Reporting Tool (CART) is unrelated to the steps needed for QRDA Category I reporting for the Hospital IQR Program. For hospitals and vendors to submit eCQM data, they must contact the *QualityNet* Help Desk and request the EHR data upload role (qnetsupport@hcqis.org; 1-866-288-8912).

Question 61: **If it is one file per patient, per submission, is it possible you can have numerous submissions and therefore, thousands of numerous email notifications? How do we organize this to handle this amount of information?**

CMS is expecting one QRDA Category I file per patient, per quarter, which includes all episodes of care and applicable measures associated with that file. The individual QRDA Category I file for each patient can be submitted as part of a batch of files within a ZIP file. Maximum individual file size is five MB. A maximum of 15,000 files can be submitted per ZIP file. Multiple ZIP files can be submitted per facility, as needed. Facilities can work with their vendors or IT staff to develop a naming convention in order to track the submitted files.

Question 62: **If we submit the test files directly in the secure file transfer and there is one error message out of 1,000 files, do we only have to resubmit that one case, or how do you fix the one error?**

Test files are not required to be resubmitted; however, CMS expects the facility to address the error if the facility intends to submit those same QRDA Category I files for production. CMS would expect the errors in the rejected production file to be modified and resubmitted. The intent is, the submitted production QRDA Category I files should represent the total inpatient population to receive program credit.

Question 63: **What is the PSVA tool?**

The Pre-Submission Validation Application (PSVA) tool is a downloadable tool that can be used to identify any potential errors before submission of the test and production files to the CMS data receiving system. It is not required; however, CMS highly encourages the use of the PSVA tool, which validates the QRDA Category I file structure.

Question 64: **Will we receive feedback files on our test/production submissions via PSVA (or do we need to run reports from the portal)?**

A feedback file is available for review within the PSVA tool. Greater details can be found when the user generates the feedback and summary reports within the QSP. Please remember, certain reports are only available when submitting production data, such as the eCQM Performance Summary Report and eCQM Submission Status Report. All others associated with eCQM reporting on the report menu are available for test or production file submission feedback.

Question 65: **Where do we mark on the IQR Program that we want our upload to be used for meaningful use?**

Facilities are not required to indicate which program the eCQM data will be submitted to for CY 2016 reporting. All eCQM data successfully submitted as production files from the PSVA tool and/or the QSP will count towards program requirements for the IQR and the EHR Incentive Programs (referred to as meaningful use).

Question 66: **Is there a summary report that provides overall measure compliance by eCQM?**

The eCQM Submission and Performance Report, available for test and production submissions, reports patient-level measure calculations. The eCQM Performance Summary Report, available for production submissions only, provides summary-level measure performance calculations.

Question 67: **Do facilities have to complete a notice of participation (NOP) for eCQM submission? Or does the notice of participation selected for core measures (IQR) meet the eCQM requirement, too?**

Facilities that are eligible for the Hospital IQR Program and have an active NOP on file, are required to electronically submit at least four eCQMs from either quarter three or quarter four 2016 by February 28, 2017. Those eligible facilities that do not participate, or participate but fail to meet the Hospital IQR Program requirements, receive a one-fourth reduction of the applicable percentage increase in their annual payment update (APU) for the applicable fiscal year.

Question 68: **Can we upload production files multiple times if we find some issues in the file? Will the latter file overwrite the previous file?**

CMS expects the reporting of eCQMs to be representative of the entire patient population for the time frame in question. All applicable patients should be reported on, so if the cases in rejected files meet criteria to be included in the hospital's selected eCQMs, they should be submitted in an acceptable QRDA Category I file. Therefore, rejected cases should be evaluated and then resubmitted accordingly.

CMS highly recommends and encourages hospitals/vendors to submit early to avoid any potential issues with uploading files and/or files being overwritten. For more detailed information, please review the Succession Management portion (section 4.2, page 7) of the CMS Implementation Guide for Quality Reporting Document Architecture Category I and Category III: Eligible Professional Programs and Hospital Quality Reporting (HQR) Supplementary Implementation Guide for 2016 available on the CMS eCQM Library web page, under QRDA Resources.

Question 69: **I have authorization and access to the PSVA tool and ability to submit test and production files; however, I don't see the EHR reports in my category selection. Do I need additional access for this?**

Data submitters should contact the *QualityNet* Help Desk to ensure they have the EHR data upload role, as well as, access to the EHR report categories (qnetsupport@hcqis.org; 1-866-288-8912).

Question 70: **Are critical access hospitals (CAHs) required to submit eCQM data?**

The Hospital IQR Program, with respect to any impacts on payment adjustment, only applies to eligible hospitals under the inpatient prospective payment system (IPPS). Critical access hospitals (CAHs) are not required to participate in the Hospital IQR Program, but are encouraged to voluntarily report quality data, including eCQM data.

CAHs are required, however, to report on CQMs to the EHR Incentive Programs, and will be subject to a payment adjustment due to lack of participation. Please visit the CMS.gov website for information pertaining to the Medicare and Medicaid EHR Incentive Programs.

Question 71: **Earlier, you said the IQR and QRDA submission reports are the same. There are separate [iqrclinical] and [ehrqrda] upload folders. Does it matter which folder they use?**

Facilities submitting eCQM data through the SFT in the QSP should select the [ehrqrda] folder, and then select Upload.

Question 72: **If you can submit files for multiple sites at once, does the vendor submitting those files need *QualityNet* access to each separate hospital site?**

Each individual hospital operating under a separate CCN number must authorize the vendor to submit eCQM data on that hospital's behalf. For additional assistance, please contact the *QualityNet* Help Desk (qnetsupport@hcqis.org; 1-866-288-8912).

Question 73: **When will the PSVA tool be updated to be able to report eCQMs for CY 2017?**

A ListServe notifying data submitters that a new version of the PSVA tool will be available to report CY 2017 eCQMs will be distributed in the future. Please visit *QualityNet* to ensure you are receiving ListServe notifications.

Question 74: **If I have six months' data in one EHR and the other half in a new EHR CY 2017, can we do partial submission, half manual attestation and half QRDA file?**

It appears your question is related to the EHR Incentive Program reporting requirements. Please contact the EHR Information Center (EHRIC) for assistance (1-888-734-6433, 7:30 a.m. – 6:30 p.m. CT, Monday through Friday, except federal holidays.) Attestation is not available as an option for meeting the Hospital IQR Program eCQM reporting requirements.

Question 75: **If we zip up files to submit and they are rejected, will the report identify the individual file that was rejected?**

The Submission Detail Report can be generated for test or production file submissions; this report identifies errors within rejected files and provides file-level validation.

Question 76: **How soon when submitting to CMS for the final submission before you know the outcomes?**

Once the eCQM data has been uploaded and processed within the QSP, data submitters will be able to run their Submission Summary Report approximately 24 hours after processing to review the outcomes. Please contact the *QualityNet* Help Desk if you find there are issues determining successful reporting (qnetsupport@hcqis.org; 1-866-288-8912).