



# Inpatient Quality Reporting (IQR) Program

## Support Contractor

### Common Errors for QRDA Category I Test and Production Files – Session II

#### Questions & Answers

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**November 30, 2016**

**2 p.m. ET**

**Question 1:** We have submitted files via the PSVA tool. The files were submitted to the test folder, validated, and accepted. The files were submitted to the production folder and submitted successfully. We got an email that the files were rejected. What do we review to see why the files were rejected?

*Data submitters should run the submission detail report in the QualityNet Secure Portal for electronic Clinical Quality Measures (eCQMs). This report identifies errors related to the Quality Reporting Document Architecture (QRDA) Category I file submissions. If you have further questions, please reach out to the QualityNet Help Desk [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 2:** I was also wondering if the submission of QRDA Category I files using the Pre-Submission Validation Application (PSVA) tool is acceptable for EHR and IQR submission. How do we verify that the Meaningful Use requirements have been met, and what do we need to have on file for audit purposes?

*From a QRDA submission perspective, data submitters can look at the eCQM submission status report through the QualityNet Secure Portal. This report will*



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*indicate both IQR and meaningful use status for data submission, but does not include all requirements outside of QRDA submissions. Meeting meaningful use and IQR reporting requirements includes other objectives for overall program success. Visit the [CMS.gov](http://CMS.gov) website to review the full reporting requirements for the EHR Incentive Program. The [QualityNet.org](http://QualityNet.org) website provides all IQR program reporting requirements. In regards to the types of documentation needed to support the audit process, we defer to the hospital's policy regarding the type of data to retain, timeframe, etc.*

**Question 3:** **If we have warnings when we submit QRDA Category I files that we don't fix, will the system reject the file? We have only been focusing on fixing the errors at this point.**

*At this time, that is the appropriate approach. Warning messages will not cause the QRDA Category I file to be rejected by the system.*

**Question 4:** **Are there standard error codes defined for each of these errors, and is there a standard Application Program Interface (API) for returning those error codes back to the submitter?**

*Standard error codes are provided and they are defined on each of these slides with a conformance number in parentheses. Once the files are submitted through QualityNet, there is no API, per se. You're able to run reports that will return errors related to any file rejection. The submission detail report on QualityNet for eCQMs will provide that level of information.*

**Question 5:** **We are two months into the submission period. Until last week, we were not able to consistently receive the 2nd email after submitting a file to indicate the file was processed. We are still not able to run reports for what we do submit. Considering these issues, has there been discussion on pushing out the submission deadline? If so, when will the decision be made? If not, will that discussion take place considering we've lost two months of submission time?**

*We're actively triaging any issues that we're aware of in regard to submissions and reports. CMS has not indicated that an extension will be made to the submission deadline for Calendar Year (CY) 2016 eCQM reporting for the IQR and the EHR Incentive programs. Any discussion will take place at a later date and any determinations will be communicated to the data submitter community.*



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**Question 6:** For conformance statement CMS\_0062, we have an insurance that requires us to use the ED arrival date / time as the admission date / time, so we are encountering errors. How do we correct this given our insurance contract's requirement?

*To receive additional assistance researching the issue, please contact the QualityNet Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 7:** For Error 3, if the dates in the file matched what is in the EHR, they shouldn't be changed in the QRDA I file, correct?

*This is correct. If a data submitter is having issues with the mapping of the admit/discharge date, that should be corrected within your system.*

**Question 8:** Some of my test files passed validation through the PSVA tool, but were then rejected when submitted to the *QualityNet Secure Portal* with the CMS\_0072 conformance error. Why didn't the PSVA tool catch them?

*The PSVA tool currently does not perform the comparison with the Clinical Document Architecture (CDA) that is performed by the CMS data receiving system. Therefore, CMS\_0072 is one of the errors that can be generated in the CMS data receiving system that you would not receive when submitting the file for validation in the PSVA tool. This is something being addressed to achieve greater alignment in the future.*

**Question 9:** Are most of the 3.8 million QRDA Category I files received through Medicare?

*At this time, specific payer information related to the submissions is not currently tracked, so we do not have those details. The statistic is strictly in regard to the volume of submissions.*

**Question 10:** If a hospital is reporting data for Medicare Access and CHIP Re-Authorization Act of 2015 (MACRA), will they need to report the eCQMs?

*MACRA is the legislation that authorizes the establishment of the Quality Payment Program (QPP), which includes the Merit-Based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (APMs), which will*



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*launch in 2017. The QPP requirements are currently limited to eligible clinicians (ECs) (formerly referred to as eligible professionals or EPs). Please refer to the recently launched Quality Payment Program website for detailed program information and program requirements at <https://qpp.cms.gov/>.*

**Question 11: Is reporting of eCQMs required for physician practices?**

*eCQM reporting for physician practices is outside the scope of information for the Hospital IQR and Hospital EHR Incentive Program webinars. Please review the information on the [CMS.gov](https://www.cms.gov) website that is specific to the Physician Quality Reporting System (PQRS) and the recently launched Quality Payment Program website for detailed program information and program requirements at <https://qpp.cms.gov/>.*

**Question 12: Will 2017 submission still require a full year of reporting for both the EHR and IQR compliance?**

*If there are any modifications to CY 2017 eCQM reporting, this will be communicated to the data submitter community by CMS.*

**Question 13: If we have no patients for a measure, how do we submit a zero denominator declaration?**

*Zero denominator declarations can be submitted through QualityNet. Within the QualityNet Secure Portal, under IQR Hospital Reporting, there is a denominator declaration screen. This denominator declaration screen is where data submitters can enter the case threshold or zero denominator. If you need help accessing those screens, please reach out to the QualityNet Help Desk [qnetssupport@hcqis.org](mailto:qnetssupport@hcqis.org) or 1-866-288-8912.*

**Question 14: When we report for one quarter, can we report using either the PSVA tool or the Quality Net site? Or do we need to do our final submission using only the QualityNet site?**

*The submission process can take place either through the PSVA tool or directly into the QualityNet Secure Portal. Please ensure that you are successfully submitting your files through the production link or into the production folder for program credit.*



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**Question 15: If there are no patients for that quarter, will the file just pull with the appropriate headers and time frame but without patient data?**

*We suggest reaching out to your IT Department or to your vendor for additional details.*

**Question 16: Is there any way of ensuring that we have a successful submission? How do we verify that the file was submitted and received successfully?**

*As part of the submission process, two emails are distributed. The first email indicates the submission was received. A second email is sent confirming that processing is complete. If you've received the second email and your files have been accepted, go ahead and run the eCQM submission status report to confirm that the QRDA Category I reporting requirements have been met. If the second email is not received, please contact the QualityNet Help Desk, [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 17: What is the penalty of not completing the QRDA Category I process?**

*Please keep in mind that this is a method of electronic reporting for two programs: the IQR and the EHR Incentive Program. We are here specifically discussing the electronic reporting requirement portion of the IQR Program. A penalty is assessed, if a hospital does not fulfill the electronic reporting requirement, because it affects your overall performance for IQR. Hospitals will receive a one-fourth reduction of the applicable percentage increase in their annual payment update (APU).*

*There is an electronic reporting requirement for the EHR Incentive Program as well. It has two options regarding how to report that data. If you want additional details as to possible penalties or other repercussions for not reporting, please contact the EHR Information Center using the contact information offered in the reference section of today's presentation (1-888-134-6433, Monday through Friday, 7:30 a.m. – 6:30 p.m. CT, except holidays).*

**Question 18: What is the difference between validating via the PSVA tool or through QualityNet? Does one provide more useful feedback on errors?**

*There are some differences between validating QRDA Category I files through the PSVA tool and then validating the same files in the CMS data receiving*



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*system. The CMS data receiving system performs some additional checks, such as the CDA schema, submission period dates, and authorization for a vendor to submit on a hospital's behalf. CMS also includes measure outcome information that a hospital may want to review prior to final file submissions. The PSVA is a good starting point for initial validation and will help hospitals and their vendors to work through many issues in regards to file format. Both validation methods provide value; but ultimately, the hospital wants to ensure that files are being accepted through the CMS data receiving system.*

**Question 19: Is there a plan to validate eCQM accuracy?**

*In the Inpatient Prospective Payment System (IPPS) rule, CMS has finalized that eCQM validation will begin with CY 2017 discharges. Therefore, CY 2016 data will not be validated at a clinical data element level.*

**Question 20: Can we use the PSVA tool to test QRDA III files?**

*At this time, the PSVA tool is utilized to review HQR QRDA Category I files. That tool has been developed to expand its usage in the future, but is currently in place to validation hospital QRDA I files.*

**Question 21: When submitting a zip file with multiple QRDA files, how are error codes returned if there are multiple errors present? How do submitters know what errors occur in which QRDA file?**

*Hospitals can generate the eCQM submission detail report for a specific batch of QRDA Category I files. When that report is generated, it will list the specific errors by file name. This should help hospitals and their vendors differentiate what error messages apply to which file.*

**Question 22: Where can we locate the eCQM Preparation Checklist for CY 2017?**

*The CY 2017 eCQM Preparation Checklist has not been published yet. When the checklist becomes available, a ListServe will be distributed to the data submitter community.*



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**Question 23: Where is the HL7 Guide located?**

*The Health Level Seven International (HL7) website posts the guide on their website. There is a link to the site under the eCQM Technical Specifications and Resources portion of the [QualityNet.org](http://QualityNet.org) website. The specific title and link is [Health Level Seven \(HL7\) Version 3 Implementation Guide: Quality Data Model \(QDM\)-based Health Quality Measure Format \(HQMF\), Release 1 – US Realm](#).*

**Question 24: If we have some QRDA I files with the discharge date prior to the admission date, is it acceptable to modify the XML code to correct?**

*It appears this is a mapping issue within the EHR, which would prevent correction to individual files. Please review this issue with your EHR vendor and/or hospital IT team.*

**Question 25: We have been experiencing numerous problems with the PSVA Submission of test files to CMS. Today, I am receiving no confirmation email listing the batch number. When I look in the [QualityNet.org](http://QualityNet.org) Secure File Transfer Data Upload folder, the uploaded file is listed, but the filename is appended with antivirus scanning. It has been almost two hours since the upload. Is there a known problem today?**

*At this time, we are not aware of any production issues. If you have received the first email indicating the file was received, please allow up to 24 hours for file processing. If the 24 hours has passed and you have not received the confirmation email, please contact the QualityNet Help Desk [qnet-support@hcqis.org](mailto:qnet-support@hcqis.org) or 1-866-288-8912.*

**Question 26: I have successfully submitted my test files. How do I access my measure calculations and measure data checks? The Q&A transcript from the 1/20/2016 presentation makes it sound like this is available.**

*The Submission and Performance and the Submission Summary reports referenced in the January 20, 2016 webinar materials are available for hospitals to generate within the [QualityNet](http://QualityNet.org) Secure Portal to review the performance data for test file submissions. The archived eCQM webinar materials are available on the [QualityReportingCenter.com](http://QualityReportingCenter.com) website.*



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**Question 27: Our hospital is moving to a new EHR in November 2017. We are wondering if there is an exemption for this type of issue. We know that it will be necessary to report the 1st 3 Quarters of 2017 since we will be on the same EHR; however, for the 4th Quarter of 2017, we are wondering if there is some sort of exemption for 4th Quarter since we will be in a transition period?**

*Please review the information for the Extraordinary Circumstances Extension/Exemption (ECE) on the [QualityNet.org](http://QualityNet.org) website under the eCQM tab to determine if your facility meets the criteria to submit an ECE. We also want to draw your attention to the ECE policy clarification updated November 22, 2016, posted in the same location.*

**Question 28: Where do we get answers to the errors we are seeing? We are getting errors CONF:1140-2831 and CONF:1098-7525? We have 12 errors out of 1246 records and all are rejected.**

*Based on the format of the given conformance errors, they should be outlined in the Health Level Seven International base standard. Please visit the [HL7](http://HL7) website to obtain a copy of the documentation.*

**Question 29: Can you tell me the time frame that we can expect a response back once we submit our files in Production?**

*If the data submitter is anticipating feedback via EHR Reports, CMS suggests feedback should be available within 24 hours. If the reports are pending in process or are not generating, please contact the QualityNet Help Desk for additional support [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 30: If we submit a file through the QualityNet Secure Portal as a test, does that file need to be removed before another test file is submitted?**

*Hospitals can submit an unlimited number of test files. Test files cannot be deleted from the CMS data receiving system by the hospital or vendor. CMS does not consider test files as production files, and they are not processed for program reporting.*





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**Question 31: Is it necessary to use the PSVA tool if we just want to test on QualityNet?**

*Hospitals have the option to test QRDA Category I files utilizing the QualityNet Secure Portal without using the PSVA tool. However, hospitals have found the PSVA tool to be useful as an initial tool to locate and troubleshoot validation errors, which would cause the file to be rejected by the CMS data receiving system within the QualityNet Secure Portal.*

**Question 32: What is the maximum % of rejected files allowed (PSVA and CMS rejects)?**

*We appreciate that there are continuing challenges with eCQM reporting as we transition to the required reporting for IQR. However, there is not a hard and fast threshold we can provide in terms of what is acceptable at this point. We have expanded data validation to include eCQMs, and these validation scores on the eCQMs would not impact hospital payments. We finalized this policy in order to encourage the continued collaboration between CMS, hospitals, and vendors during this transition period. Also, the policy to delay public reporting of eCQMs for the CY 2017 reporting period is in recognition of the fact that we are still gaining experience with eCQM reporting. We recognize the challenges with eCQM reporting in these early years and understand that data quality is a key area in which we all need to work together to improve.*

**Question 33: I cannot locate the conformance statement tool following the instructions in the slide.**

*The Conformance Statement Resource is posted in two locations. The first is on the [QualityNet.org](http://QualityNet.org) website within the Technical Specifications section of the eCQM tab. The second location is on the [QualityReportingCenter.com](http://QualityReportingCenter.com) website under the Inpatient>Hospital IQR Program> Resources and Tools> eCQM Resources>CY 2016.*

**Question 34: Where could we find directions to the full process of getting an error feedback file after validating via the PSVA? I receive a confirmation of submission, but can't find how to get the error feedback file.**

*A webinar entitled Pre-Submission Validation Application (PSVA) for 2016 was held January 2016. Within the webinar materials is a slide deck. On Slide 34, there is a screenshot that shows you how to access the feedback*



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*file. The file is generated for each of the zip files and a hyperlink to the file provides access to the file validation. Visit the archived eCQM webinars on the [QualityReportingCenter.com](http://QualityReportingCenter.com) website to obtain published webinar materials.*

**Question 35: Why would my *QualityNet* EHR Hospital Reporting - eCQM Performance Summary Report return “no data returned for selected criteria”? I received two accepted emails, so not sure why this report states no data.**

*The Performance Summary Report can be generated for production data only. Based on the scenario, it is unclear if you were attempting to generate the report based on test data. If that is not the case, please contact the QualityNet Help Desk for additional support [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 36: If there is an ERROR on one patient file, will this keep the entire zip file from processing, or will it just reject that one patient file?**

*Conformance errors are specific to the QRDA Category I file for each patient-level file. Multiple files can be captured in a zip file, but the system can reject individual patient-level files. If there are issues with your zip file being accepted, please contact the QualityNet Help Desk for additional support [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 37: Is there any discussion with The Joint Commission to allow the CMS QRDA file submission to satisfy TJC requirements?**

*The Joint Commission (TJC) and CMS are in alignment to receive QRDA Category I files for eCQM reporting. However, there are different format requirements in order to submit the files. Note that the format requirements are specific to each program. Please review the information on TJC’s website to determine the proper file format for submission.*

**Question 38: I submitted Test Files on 11/28 and got the emails back. I ran the reports, but they are still showing as "In Process" today. How long should it take to process them?**

*When the reports are generated in the QualityNet Secure Portal, reports may take up to 24 hours. Please reach out to the QualityNet Help Desk for additional support [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*



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**Question 39:** We have errors with conformance statements CONF 81-7291, and CONF81-7292. Can you help us identify what this is looking at?

Conformance statements 81-7291 and 81-7292 are associated with patient contact information. Please refer to the [QRDA Supplementary Implementation Guide for 2016](#) and the [QRDA Appendix](#) and the [HL7 CDA® R2 Implementation Guide: Quality Reporting Document Architecture - Category I \(QRDA I\) DSTU Release 3 \(US Realm\)](#) available on the HL7 website. These materials can assist you to determine which components of the patient’s contact information are required (identified in the conformance statements with the keyword ‘SHALL’).

In summary, for QRDA Category I file acceptance, the following address components are required. If the specific component is not included in the test file, the associated CONF number for the error messages are indicated in the table below:

Patient Contact Information Component	Associated CONF # in ERROR Message
No address (‘addr’) tag <i>US Realm Address</i> addr (identifier: urn:oid:2.16.840.1.113883.10.20.22.5.2)	CONF:1098-5271
No ‘streetAddressLine’ tag	CONF:81-7291
No ‘city’ tag	CONF:81-7292
No ‘state’ tag	CONF:81-10024 A state is required if the country is US. If country is not specified, it's assumed to be US.
No ‘postalCode’ tag	CONF:81-10025 A Postal Code is required if the country is US. If country is not specified, it's assumed to be US.
No ‘country’ tag	The information passed without any Error. If country is not specified, it's assumed to be US.
No ‘telecom’ tag	CONF: 1198-5280



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**Question 40: What should be kept on file in the event of filing a request for reconsideration?**

*Hospitals that fail to meet the IQR Program requirements are at risk of failing their APU. The requirements include the successful reporting of at least four eCQMs from either quarter three or quarter four of 2016 by February 28, 2017. CMS will notify hospitals subject to an APU reduction and hospitals will have an opportunity to request a re-consideration. Hospitals must include the CMS-identified reason for not meeting the APU requirement and identify the reason(s) for believing the requirements were met and why the hospital should receive the full APU. Finally, all documentation and evidence that supports the hospital's reconsideration request should be submitted. For additional information on the reconsideration process, please visit [QualityNet.org](http://QualityNet.org).*

**Question 41: If we have a data upload role for manually abstracted charts via CART, do we also have the EHR Data Upload Role?**

*Hospitals and their vendors are required to have the EHR data upload role assigned by the QualityNet Help Desk. Vendors also have to be permitted by the hospital to report on their behalf. Please contact the QualityNet Help Desk for additional details [qnetssupport@hcqis.org](mailto:qnetssupport@hcqis.org) or 1-866-288-8912.*

**Question 42: We may not have 100% of coding done for December patients by the time our certified vendor needs us to finalize our eCQMs for submission. Any penalty for this? In other words, not all of our December patients will be able to be submitted.**

*CMS expects that all patients who represent the patient population will be reported for quarter three or quarter four CY 2016 discharge data. The deadline is February 28, 2017, so please work with your vendor to make any adjustments needed to meet the reporting deadline.*

**Question 43: When working through *QualityNet* and working with test data and test files, are we able to run reports for the EHR Hospital Reporting? If so, how is the test data kept separate from production data when running reports?**

*The designation of test versus production files is determined by the data submitter who determines where the files are placed, either the testdata or the proddata file. When the submitter submits test files for processing, the following*



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*reports are available to generate to review data submission outcomes: Submission Summary Report, the Submission Detail Report, and the eCQM Submission and Performance Report. A webinar was held October 14, 2016, entitled, A Demonstration for Submitting QRDA Category I Files for CY 2016 Reporting. Please visit the [QualityReportingCenter.com](http://QualityReportingCenter.com) website to review the webinar materials.*

**Question 44: If we submit 11,000 records successfully, but there are 5 files that fail with errors, would this submission be sufficient or do we have to figure out how to resolve the errors for the 5 files?**

*If the hospital believes those files are intended to be part of the patient population submitted for reporting, then the expectation from CMS is that the facilities will work with their vendors to resolve the issues with the identified files.*

**Question 45: If we submit a production file and it is rejected by CMS, can we resubmit before the deadline date?**

*Hospitals are able to resubmit their data until the applicable submission deadline.*

**Question 46: Will the 2016 data be publicly reported?**

*The IPPS Final Rule states CY 2016 eCQM data will not be publicly reported. A future CMS Final Rule will signal when eCQM data will be publicly reported.*

**Question 47: If we submitted a zero denominator declaration in error, will that declaration be overridden when we submit our QRDA files for our 4 eCQMs?**

*If this information is entered in error, please go to the QualityNet Secure Portal and make revisions on the denominator declaration screen to remove the zero denominator declarations and submit the production QRDA Category I files. We recommend generating the appropriate production reports, such as the Submission Status Report, to ensure the changes are displaying correctly. If there are additional questions, please contact the QualityNet Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*



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**Question 48:** Has *QualityNet* hired additional personnel in anticipation of greater calls for eCQM submission?

*Additional training and staffing has been in place for several months to assist hospitals preparing for the first year of mandatory electronic reporting.*

**Question 49:** Have been having issues with reports rendering on *QualityNet* since Monday. Several tickets opened with the help desk. Do you have an ETA of when the issues will be resolved?

*Given that they are addressing your issue, please follow up with the QualityNet Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 50:** I opened a *QualityNet* ticket for the CMS\_0078 error (file larger than 5MB) three weeks ago and have yet to hear back from them. Is there anyone else I can contact to help resolve this issue?

*Given that they are addressing your issue, please follow up with the QualityNet Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 51:** Regarding Error 3 – encounter performed admission date, may we edit the XML file to fix the issue? We have approximately 500 patients affected by this error.

*Slide 15 of the presentation shows the hospital and their vendor how to correct the XML code error. The examples provide guidance regarding the end result for system output. Adjustments should be made within the EHR to produce the appropriate format within the file. Please contact the QualityNet Help Desk for additional assistance: [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 52:** We are getting a CMS\_0072 error. The one file example I sent to JIRA revealed that there was an error on line 411 where the value element does not have a specified xsi:type. Per the schema, the value element can be ANY type and since ANY is abstract, the type must be specified on the value element. If you add any valid xsi:type declaration to the value element it will pass schema validation.

*If your system is continuing to generate the error after making the modification to the type within the EHR, please contact the QualityNet Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912 for additional assistance.*



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**Question 53:** In the *QualityNet* Portal Feedback- Submission & Performance report, we have instances where admit dates do not match our EHR. Is this an issue with the *QualityNet* report since our XML is pulling appropriately?

*For additional assistance, please contact the QualityNet Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org) or 1-866-288-8912.*

**Question 54:** I used the PSVA tool to load QRDA Category I files for 3rd quarter (production files). Do I also need to put in additional data into the *QualityNet* Reporting portal if there are no denominator or exclusion declarations?

*If QRDA Category I production files were successfully submitted to CMS through the PSVA tool to fulfill the CY 2016 electronic reporting requirement, you do not need to enter additional submissions regarding denominator or exclusion declarations. Please confirm the submission status for the production files through report options, such as the Submission Status and Performance Summary reports, in the QualityNet Secure Portal.*

**Question 55:** We have EHR test patients (fake patient files) that have loaded into our eCQM scorecard. We cannot remove them from our EHR, can we delete these fake, test patients from the QRDA file prior to submission? (Test patients are used to test new modules in the system prior to going live).

*When reporting production data, the submitter would submit a zip file to the QualityNet Secure Portal which contains QRDA Category I patient-level files. If the hospital is aware they have fake/test patient files within the zip files, it is in the hospital's best interest to work with their vendor to remove the false QRDA Category I files from the zip file(s) before submitting production files for eCQM reporting. One recommendation is to submit fake patient files as test submissions only to reduce the likelihood of submitting test files as part of production reporting.*