



Outpatient Quality Reporting Program

Support Contractor

Hospital OQR Imaging Efficiency Measures

Questions & Answers

Moderator:

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Question: Trauma was one of the denominator exclusions for OP-8. Is injury from a fall an example of trauma?

Answer: Yes, many trauma codes are excluded from the measure; for example, a fall leading to a lower limb fracture would be excluded. The full list of excluded conditions for OP-8 is listed on the QualityNet website, available at the following link:
<http://qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228695266120>.

Question: As a CAH (Critical Access Hospital) that is not required to participate with OQR, how do we participate voluntarily? We believe we have participated in the past but have not been receiving data. Do we need to elect annually?

Answer: Providers that are non-subsection (d) or are not paid under OPSS can indicate if the data they submit will be used for public reporting or for quality improvement only. This designation must be established by July 31 of the applicable year. Designations will be carried forward along with the NOP. Providers need only modify their NOP if they wish to change their commitment to the program. Please visit the QualityNet website for details on NOP:
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1192804530878>



Outpatient Quality Reporting Program

Support Contractor

Question: How does CMS assure these measures are incorporated into the available Appropriateness Use Criteria tools to help facilitate compliance with the Protecting Access to Medicare Act?

Answer: CMS performs an annual literature review and environmental scan to ensure that the measure specifications reflect current clinical practice guidelines.

Question: When there is a geographic area with a higher incidence of cancer, is the follow-up rate for mammography adjusted based on population risk and impact?

Answer: OP-9 accounts for differences in imaging technologies and incidence rates for cancer by noting facilities with outlying performance (close to zero or higher than 14 percent), rather than providing a specific benchmark for performance.

Question: Where specifically do hospitals go to find their data?

Answer: Patient-level claims data for the OIE measures are only provided to facilities during a one-time dry run reporting period that occurs before the first year that the measures are publicly reported on Hospital Compare. Once public reporting for OIE measures has begun, only facility-level data are made available. The dry run for OIE measures OP-8, OP-9, OP-10, and OP-11 reported patient-level claims data from calendar year 2007 and was released to facilities' QualityNet inboxes in February 2010. These dry run reports can be accessed by facilities through their QualityNet inboxes. The dry run for OIE measures OP-13 and OP-14 reported claims from calendar year 2009 and was released to facilities in April 2011. Facility-level preview period data is also released to facilities through their QualityNet inboxes. If you are not familiar with how to access your inbox, please contact the QualityNet Help Desk from 7 a.m. to 7 p.m., Monday through Friday – email: qnetssupport@sdps.org; phone: (866) 288-8912; fax: (888) 329-7377.

Question: Imaging is performed in large part at OP departments not affiliated with hospitals. When is that data going to become public?

Answer: The Outpatient Imaging Efficiency measures are reported as part of the Hospital Outpatient Quality Reporting program. As a result, these measures only report on imaging occurring in hospital outpatient settings.

Question: Is there a way in the future to present findings to compare facilities with similar payer mixes and demographics?



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- Answer:** While Hospital Compare does not identify comparable facilities for the OIE measures, if you are aware of facilities with similar characteristics, you can search for the performance scores for these facilities on the Hospital Compare website.
- Question:** Will these measures be chart-abstracted or claims-based only?
- Answer:** The OIE measures are calculated using claims data submitted to CMS for payment purposes; they are not chart-abstracted measures.
- Question:** How is 3-D mammography incorporated into OP-9?
- Answer:** CPT codes for 3-D mammography are not currently captured in the measure specifications. Each year, CMS reevaluates the measure specifications (including additional imaging modalities) based on changes in clinical practice guidelines and coding behavior.