



# Outpatient Quality Reporting Program

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## Support Contractor

### Measure by Measure: Data for the Hospital Outpatient Quality Reporting (OQR) Program

#### Questions & Answers

**Moderator:**

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**Speaker:**

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**10:00 am**

- Question:** How do we find the preview report for our hospital?
- Answer:** A Security Administrator can access and run this report via the Secure Portal of QualityNet. As a reminder, the preview period closes on March 2nd, so please run and download this report prior to 11:59 p.m. PST on March 2.
- Question:** Is there a way to verify that your NHSN Reconsent Form has been completed?
- Answer:** To confirm that your NHSN Reconsent Form has been signed, please email NHSN directly at [NHSN@cdc.gov](mailto:NHSN@cdc.gov).
- Question:** What is reported on OP 27—total compliance scores (received vaccination and declined or medical contraindication) or just employees who got the vaccine? So, what is Medicare data reporting? We input all of the metrics (received, refused/medically not able to take vaccination), but CMS only seems to publish the numbers for vaccinations received which is not the measure specified thing that should be reported.
- Answer:** The adherence percent reported for OP-27 includes only healthcare personnel who were vaccinated, either onsite or off-site. The measure is for "Influenza Vaccination Coverage" which would be best reflected by the adherence percentage.
- Question:** Would you please repeat the quarter that OP-1, OP-4, OP-20, and OP-21 clinical data collection stops?



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- Answer:** The last quarter you will collect this data is Q1. This will include encounters from January 1 through March 31, 2018 and is due to be reported by August 1, 2018.
- Question:** Regarding slide 30, a surveillance colonoscopy is defined as the colonoscopy performed after a colonic polyp(s) has been detected and removed. Therefore, a virtual colonoscopy would not meet this definition; however, the patient may be coded with history of colonic polyps due to the polyps seen on virtual colonoscopy. If there is no prior procedural colonoscopy and procedural colonoscopy follows the virtual colonoscopy within a week, the encounter will fall out. Is there further guidance as to how to handle such situations when there is no prior procedural colonoscopy in upcoming manuals?
- Answer:** Please enter your question into the Q&A tool through QualityNet so that the measure writers can respond to you directly.
- Question:** Is your recommendation that a hospital enter zeros into the Secure Portal for OP-31 if they do not do this measure? Or can they leave it blank?
- Answer:** OP-31 is voluntary, so either course of action is acceptable.
- Question:** Our abstractor did attempt to contact the Outpatient Q&A and has been told it was for Inpatient questions and closed her question; would you please provide a current Outpatient question contact?
- Answer:** The Outpatient email address is: [qcrsupport@hsag.com](mailto:qcrsupport@hsag.com), or you can call 866.800.8756.
- Question:** I am looking for the most recent updated webinar for the EBRT measure. Could you please provide the date of the webinar from the Quality Reporting Center?
- Answer:** In January 2018, we presented updates to the Specifications Manual which does include updates for OP-33. You can find this in the Archived Events for this program on [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com).
- Question:** These reports can only be run by the Security Administrator, correct?
- Answer:** If you are a Basic User, the SA can give you that role.
- Question:** Where do we get the Provider Participation Report?



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**Answer:** The Provider Participation Report (PPR) is available on the secure side of QualityNet. We have presented comprehensive webinars in the past that can be found on [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com) under the Archived Events tab for this program. You may also choose to call us at 866-800-8756; we will be glad to walk you through the process.

**Question:** Regarding slide 47, this sounds as if CDAC abstracts every case (even those not selected for validation). Is this true?

**Answer:** No, this report is only for hospitals currently undergoing data validation. This report provides a comparison of the hospital abstraction to the Adjudication Value (CDAC re-abstraction) results. It also provides a list of all elements abstracted on each case.

**Question:** If you are no longer on the CDAC validation list, are you still able to see results on the Case Detail Report to compare your abstraction with that of CDAC?

**Answer:** No, CDAC only re-abstracts records they request during the validation year. So, if your facility is not in the validation process, there will be no data results in the Case Detail Report.

**Question:** Please repeat the outpatient measures that are being discontinued and when the abstracting period ends; is it March 31, 2018?

**Answer:** The clinical chart-abstracted measures removed from this program are OP-1, OP-4, OP-20, and OP-21. You can stop collecting data after March 31 this year. This is Q1 2018 data (encounter period January 1 through March 31, 2018). These data are due to be submitted by the August 1, 2018 submission deadline. You are collecting that quarter because that quarter is connected to the **2019** payment determination.

**Question:** We've found some unexpected results in the Hospital Compare data for OP-9 Mammography Follow Up. Can you help us answer the following: 1-If a patient has multiple procedures, would this count once toward the numerator since it is one patient, or twice since it's two procedures? 2-The data pulled at the hospital is showing that they are at a rate of about 10%, but it shows around 20% on Hospital Compare. Is there a way to request additional details on the data that led to Hospital Compare's calculation of 20%? Maybe the preview report (even though it's retrospective now) for the time period on Hospital Compare? 3-When will the next preview report be available for the next batch of data that will update to Hospital Compare?



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**Answer:**

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