



# Hospital Inpatient Quality Reporting (IQR) Program

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## Support Contractor

### Question and Answer Discussion: CY 2018 Voluntary Reporting of the Hybrid Hospital-Wide Readmission Measure

#### Presentation Transcript

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**Artrina Sturges:** Thank you very much, Matt, and good afternoon, everyone. My name is Artrina Sturges and I'm your host for today's event. We have just a few announcements for you. This presentation is being recorded and the transcript of the presentation, along with the questions and answers, will be posted to the inpatient website, which is the *QualityReportingCenter.com* website, and also posted to *QualityNet* in the coming weeks. If you've registered for the event, a reminder email, as well as the link to the slides, was distributed on Tuesday. If you did not receive the email, the slides are available for download on our inpatient website, again *QualityReportingCenter.com*. Next slide, please.

Now, in addition to Tamara Mohammed and Juliet Rubini joining us today, we have a number of subject-matter experts available to address your questions during the call. Next slide, please.

Today's webinar will be focused on addressing your specific questions related to the voluntary reporting of the Hybrid Hospital-Wide Readmission measure to the Hospital IQR Program by the submission deadline. Next slide, please.

Our intent for today is that, by the end of this discussion, you'll be able to troubleshoot the QRDA Category I file submission errors; locate and use the tools and reference materials to support your efforts for success data submission of the Hybrid Hospital-Wide Readmission measure. Next slide, please.

Now, we would just like to take a few moments to address the most frequently asked questions associated with voluntary reporting of the Hybrid Hospital-Wide Readmission measure. Next slide, please.

So, for our first question, the person asked, they've been creating QRDA Category I files to report the hybrid measure for that specific date range of January 1st through June 30th. And they've received the error message that's indicated here, the CMS\_0079. And they just wanted to clarify what that specific error message means. And so, all that means is that the reporting period for the QRDA Category I files needs to align with the applicable calendar year quarters that we spoke to earlier, so that these are quarter one or

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quarter two. And, of course, just a quick reminder that the reporting requirement is one patient per QRDA Category I file per quarter. Next slide, please.

Question number two has to do with the CMS EHR certification ID number that's required in the QRDA Category I files when hospitals and vendors are voluntarily reporting for the Hybrid Hospital-Wide Readmission measure. And so, we just wanted to provide clarification that on page 17 of the 2018 CMS Implementation Guide that it does indicate that CMS EHR certification ID number is indeed required. And then, of course, we have information listed on the CHPL website, if you would like any other overview information and also to access that CHPL Public User Guide, which provides instructions on how to create the CMS EHR certification ID. Next slide, please.

And one of the last frequently asked questions we have was in regards to testing those QRDA Category I files. So, of course, folks are submitting their files and they're receiving error messages, and they just wanted to discuss that there are ways to reduce the errors before submission. And, as most of you are aware, we really encourage you—strongly encourage you—to download the Pre-Submission Validation Application, or the PSVA, tool from the *QualityNet Secure Portal* to help you more quickly identify and troubleshoot the errors. And, of course, if you ever have any questions about using the PSVA tool, we encourage you to visit the *Quality Reporting Center* website to review archived materials from August 8th that gives you additional details on a webinar that we hosted at that time. Next slide, please.

And then, as always, we want to provide a table that is just to locate support resources for any questions that you may have that's associated with the voluntary reporting of the Hybrid HWR measure. Next slide, please.

Now, at this time, before we start the question-and-answer discussion, our friend, Chandni, will be joining us to provide an update to the group. I'll hand the call to you, Chandni.

**Chandni Vasisht:** Thanks, Artrina. Good afternoon, everyone. I wanted to update stakeholders on a resource that we're planning on providing for hospitals. CMS has

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created a hybrid measures tutorial video. This video outlines the purpose and structure of the hybrid measures and provides the necessary—the basic necessary information for hospitals that are preparing to submit data. We're hoping to upload this video to the CMS YouTube page. Our goal is to have the video posted before the end of the submission period. But we think this tool will be helpful beyond the submission period, if CMS moves to forward with future hybrid measures. I'd also like to point stakeholders to an additional resource that CMS is providing. This is a sample Hybrid Hospital-Wide Readmission QRDA file for hospitals in the IQR voluntary reporting program. The sample file that you can find on the eCQI Resource Center. You can navigate to the eCQI Resource Center and *QualityNet* for more information. That's it for me. So, we can turn it over for the Q&A now.

**Artrina Sturges:** Thank you very much, Chandni. We appreciate it. And, at this time, Veronica will join us to begin the question-and-answer session. Now, what we're noticing—we're taking a peek at our little menu here that lets us know that questions are coming in. And, at this time, I'm not seeing any questions come in. So, again, if you have any questions related to reporting the measure, please go ahead and put your question into the chat box and then we'll go ahead and read that out to the group so that we can share information across everyone. So, what we'd like to do is just give you a couple of minutes to put the questions into the chat box. And then we'll go ahead and we'll start the session. So, thanks very much, all. We'll await your questions coming in.

**Veronica Dunlap:** Thank you, everyone. It looks like we are getting some questions here. If you'll just allow us another minute or two and we'll go ahead and start the question-and-answer session. So, thank you for your patience. All right. It looks like we have a couple of questions here. We'll get started. Our first question: Is the deadline for the Hybrid Hospital-Wide Readmission submission still December 14, 2018?

**Artrina Sturges:** Hi, this is Artrina. I'll take that one, really quickly. At this time, CMS has not announced to us that there will be any change or an extension for the submission deadline. But, as soon as any information is made available, the community will be notified immediately, always through ListServe and any

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other communications that we can get out to you at that time. So, we will be sure to let you know as soon as we hear any updates from CMS. Thank you.

**Veronica Dunlap:** Thank you, Artrina. Our next question: When will the reports be available for the measure?

**Tamara Mohammed:** Hi, this is Tamara from Yale. At this point in time, we're hoping to make reports available sometime next summer. That's a tentative date, but that's what we're aiming to do.

**Veronica Dunlap:** Thank you. Our next question: If we submitted test files using the PSVA tool and received an email that there were no issues, will there be any additional follow-up that's required?

**Jennifer Seeman:** So, there is—this is Jen from PM3. So, there is a Hospital-Wide Hybrid measure detail report. So, if your submissions are accepted, you can review the data elements that were stored for your submission, using that report through *QualityNet*. It's in the EHR Hospital Reporting category there. And, so you can review those, if you choose, prior to the measure-specific reports coming out later next year.

**Veronica Dunlap:** Okay. And I'm not sure if this is in addition to that question, but there is a question here about when can we anticipate the report to be provided on the combined resources?

**Tamara**

**Mohammed:** Hi, this is Tamara again from Yale. I presume that's the same question asking when they can get a report on the hybrid measure, and the response is the same. We're anticipating or hoping to have something by next summer.

**Veronica Dunlap:** Great, thank you. Our next question: Will this hybrid voluntary measure be part of calendar year 2019 reporting?

**Tamara**

**Mohammed:** This is Tamara again from Yale. If, by 2019 reporting, the stakeholder is asking whether or not CMS will ask hospitals to resubmit information in 2019 for discharges that are created in 2019, at this point CMS has not

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signaled any intent to require further data collection from hospitals in 2019. And, if CMS does decide to do so, they will likely communicate that in the rule or via ListServe.

**Veronica Dunlap:** Thank you. Our next question: How does the process for uploading the hybrid measure compare to the regular QRDA files for eCQM?

**Jennifer Seeman:** The submission process is the same as other QRDA files for eCQM, just the differences in the information included. But the actual submission process is the same.

**Veronica Dunlap:** Okay. Our next question: Currently, I see this as a voluntary reporting. Is there any indication of when this will be a required measure for IQR?

**Tamara**

**Mohammed:** Hi, this is Tamara again from Yale. Again, at this point in time, CMS has not indicated or communicated any information about the future use of this measure. And so, if CMS does decide to require the measure for the IQR program, they will likely indicate that in a future rule. So, I think, if you take a look at the rules that come out, you might see whether or not CMS has decided to use this measure in the IQR program.

**Veronica Dunlap:** Thank you. Our next question: Besides the PSVA tool, does CMS have any other suggestions to create a QRDA file?

**Jennifer Seeman:** Roni, I think that's something that facilities would work with either their IT departments or their EHR vendors on. The PSVA doesn't really create QRDA files. It's a testing aid. So, that might be something they would want to inquire at a facility level.

**Veronica Dunlap:** Okay, great. Thank you, Jen. It looks like our next question: If our organization is not currently voluntarily submitting the Hybrid Hospital-Wide Readmission measure, when will we be required to do so? I think Tamara just answered that. That will be announced in a future final rule upcoming. We do know, at this time, that there is no reporting of the voluntary hybrid measure for calendar year 2019. But we would have to wait for CMS to announce that in a possible upcoming final rule.

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**Veronica Dunlap:** Our next question: Will there be any communication to clients about encounters not submitted because they are admitted in quarter one and discharged in quarter two, since the files need to be separated by quarters?

**Tamara**

**Mohammed:** This is Tamara again from Yale. And, certainly, I think other subject-matter experts can weigh in here. But I think that, as I understand it, it's based solely on the discharge date. So, if a patient was discharged in Q2, then they should be, I think, submitted under Q2. So, I think you can include them—include the QRD under the quarter two in the submission system. So, you should be able to actually include that encounter for the voluntary reporting of the measure.

**Veronica Dunlap:** Okay, great. Thank you. Our next question: I did not participate in the pilot, but was curious, was the requirement that only one patient encounter required for the test? I'm curious on how this hybrid measure compares to the current claims-based measure.

**Tamara**

**Mohammed:** This is Tamara again from Yale. So, in essence, the hybrid measure looks almost exactly like the claims-only version of the measure. The only real difference between the two measures lies in the risk adjustment that we used for the measure. So, the hybrid measures are additional risk variables that are taken from hospitals, EHRs. When we calculate the measure, we take into consideration that information as well. And that adds to the information in the claims-only version of the measure. With regards to the part of their question about the encounters, you can include any—however many encounters a particular patient has, as long as those encounters occur within the performance period for the measure. And so, for the voluntary reporting of the hybrid measure, we have a six-month period, as opposed to one year for the claims-only version of the measure. And so, for the hybrid measure, you can include every encounter for a single patient that occurs between January 1st and June 30th, 2018.

**Veronica Dunlap:** Thank you. Our next question: Is there a guide that provides insight to reading and understanding the report that is provided with the report?

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**Tamara**

**Mohammed:** Hi, this is Tamara again from Yale. And yes, the intent is that if we give you an HSR as a report, in the form of the hospital-specific report, then certainly it will be accompanied by a hospital-specific report user guide.

**Veronica Dunlap:** Okay. And our next question: Will there be any additional future hybrid measures added?

**Tamara**

**Mohammed:** This is Tamara again from Yale. And my response is always the same as previous responses. This is something to be decided by CMS and communicated by them, likely through a future final rule.

**Veronica Dunlap:** Okay, thank you. Is the use of the PSVA tool the same as when we report our eCQMs?

**Jennifer Seeman:** Yes, it's the same tool.

**Veronica Dunlap:** Okay, thank you. Next question: Are there any incentives to an organization for submitting the voluntary hybrid measure?

**Tamara**

**Mohammed:** This is Tamara again from Yale. I think there are a number of incentives to actually positively report everything in this voluntary reporting. I think it's beneficial for the hospitals to sort of get a sense, by submitting the data, of how to submit data for hybrid measures, how to submit data from the EHRs to CMS. I think, in this voluntary phase, it provides hospitals with the chance to set up the processes and systems they need to participate and engage in those types of activities. And do so really in an environment where there is almost no risk to them, rather than wait for any sort of future mandatory reporting of measures and then try and work out the kinks in the process at that time. I think that's definitely one benefit. I think it's also useful to see what performance might look like on a hybrid measure and see how the—how the measure responds to stakeholders' feedback and requests really to include EHR-based information into the measure.



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**Veronica Dunlap:** Our next question: Is there an exhaustive list of hospitals that are being selected for this program?

**Tamara**

**Mohammed:** This is Tamara again from Yale. At this point, the participation in this is voluntary and there is no real list of hospitals who are participating. It is certainly up to every hospital to choose to participate in it.

**Veronica Dunlap:** And, in addition to that question, could you please provide the benefits of participating in submitting the hybrid measures?

**Tamara**

**Mohammed:** This is Tamara from Yale. I think we just addressed that two questions ago. Did you want me to go through it again?

**Veronica Dunlap:** No, that's okay. Next question: How do I find a vendor that calculates the hybrid measure?

**Tamara**

**Mohammed:** This is Tamara from Yale. Unfortunately, I don't have an answer for how a hospital sort of selects a vendor. I don't know if anyone else, any of the other experts on the line, have any insight into this.

**Jennifer Seeman:** Tamara, this is Jen. I would agree. I'm not sure how we would answer that, either.

**Tamara**

**Mohammed:** So, I think, if you'd like, we can sort of take some time to look into the answer and then we'll probably post a response to this question, when the Q&A is posted later.

**Veronica Dunlap:** Thank you. That sounds good. Our next question: Will the error report be similar to the eCQM error report?

**Jennifer Seeman:** This is Jen. Yes, the eCQM submission detail report will show all the QRDA errors submitted for either hospital-wide readmission or eCQM. So, as far as file format, that report is the same.

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**Veronica Dunlap:** Okay. Our next question: Where can we obtain additional information about the hybrid measure?

**Tamara**

**Mohammed:** Hi, this is Tamara from Yale. If you're looking for information on the hybrid measure, I think that, on slide 13, Artrina listed a number of resources that will provide you information on the hybrid measure. You can certainly go to the *QualityNet* website. There is a page dedicated to the measure. The eCQI Resource Center has a number of resources to help with the measure as well. And you can certainly go to the QRDA Implementation Guide as well for help in developing and formatting your QRDA.

**Veronica Dunlap:** Next question: Are there data deficiencies—for example, testing not ordered, etc.—that we should look for in the detailed report? Or is the intent only to see if the data can be transmitted?

**Tamara**

**Mohammed:** This is Tamara again from Yale. I think certainly the primary purpose here for us is trying to be able to test part of it—test the extraction of information from the EHR and the submission of that information to CMS. And so, if as part of that you find that you think it warrants insight into your hospital's data deficiencies, I think that's up to you. But I don't think it is the primary purpose in why we are trying—engaging in the voluntary reporting.

**Veronica Dunlap:** Okay. Our next question: For those patients that are admitted in quarter one and then discharged in quarter two, when the data is reviewed, will the two encounters be connected? Or will they only look at the discharge data from quarter two?

**Tamara**

**Mohammed:** This is Tamara again from Yale. And again, as others on the phone who are more experts in this can weigh in. But I believe that the patient should only be submitted in the Q2 file. It's sort of linked to the discharge date for every encounter. So, if a patient is encountered in Q2, I think they should be submitted in the Q2 file and not necessarily submitted in the Q1 file. But please—if others are more expert in this and would like to weigh in, please do.

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- Jennifer Seeman:** This is Jen. I'm not more of an expert, but I will confirm you're correct. It's driven by the discharge date.
- Veronica Dunlap:** Okay, thank you. The next question: Will individual hospital reports be made public concerning the hybrid measure?
- Tamara Mohammed:** This is Tamara again from Yale. No, the confidential reports will certainly not be made public and results for the voluntary reporting of the measure will not be publicly reported, either. So, everything about this is entirely confidential.
- Artrina Sturges:** Thank you. And on top of that—this is Artrina. I also wanted to add that, if there was ever any intent of information being made public in terms of public reporting or anything along those lines, CMS would signal that in a future proposed rule for public feedback. Okay? Thank you.
- Veronica Dunlap:** Okay. It looks like we just have a couple more questions here. We are submitting information for eCQMs. Is this an additional measure we need to send as part of the Hospital-Wide Readmission?
- Artrina Sturges:** Hi, this is Artrina. Again, as we indicated, this is a voluntary reporting of this measure. And so, this is not associated with the eCQM reporting requirements that you have, as of calendar year 2016. So, this is a separate project that's strictly voluntary. Thank you.
- Veronica Dunlap:** Thank you, Artrina. And it looks like our last question here: Are there any other voluntary measures available?
- Artrina Sturges:** Hi, this is Artrina. At this time, there are not. Again, if there are any indications of future opportunities for voluntary reporting, CMS will indicate that and provide that information to the public.
- Veronica Dunlap:** Great, thank you. At this time, it looks like it concludes our questions for today. We want to thank you very much for taking time out of your busy schedule and joining us today. And, if there are any questions that were outstanding and we need to do further research, we will have them published and posted at a later date. So, thank you so much and have a great day. Bye-bye.