

Q3 2018 Hospital Inpatient Quality Reporting (IQR) Program Checklist

Due	Task	✓						
01/03/19	<p>Checking Submission of Q3 2018 HCAHPS Data HCAHPS Survey Data should display as “Yes” for July, August, and September on the Provider Participation Report (PPR). Instructions on how to run your PPR can be found in the PPR Reference Guide.</p>	<input type="checkbox"/>						
02/01/19	<p>Submitting Q3 2018 Inpatient Population and Sampling Counts Through the QualityNet Secure Portal (applies to chart-abstracted measures only)</p> <ol style="list-style-type: none"> 1. Log in to the <i>QualityNet Secure Portal</i>. 2. Select [Hospital Quality Reporting: IQR, OQR, ASCQR, IPFQR, PCHQR] from the <i>Quality Programs</i> drop-down menu. 3. Look for <i>Hospital Reporting Inpatient/Outpatient</i>; select [View/Edit Population & Sampling]. 4. Select [Inpatient Population & Sampling]. 5. Enter your facility’s CCN; click [Continue]. 6. Select Reporting Period [Q3 2018]; click [Continue]. 7. Check [boxes] for completion: The GLB, SEP, and VTE measure sets contain required measures, and no boxes should be blank. (All boxes are required even if submitting eQMs.) Be sure to correctly identify the Initial Patient Population (IPP) as defined in the specifications manual to ensure your sample selection includes patients appropriate to the measure population/sub-population. NOTE: There is only one sub-population within the VTE measure set, which includes only the counts for patients in the Other VTE Only sub-population. 	<input type="checkbox"/>						
02/15/19	<p>Checking Submission of Q3 2018 Inpatient Data</p> <ol style="list-style-type: none"> 1. Log in to the <i>QualityNet Secure Portal</i>. 2. Select [Run Reports] from the <i>My Reports</i> drop-down menu; then select the [Run Report(s)] option. 3. Select [IQR] from the <i>Report Program</i> drop-down menu; then select [Hospital Reporting - Feedback Reports] from the <i>Report Category</i> drop-down menu; then select [View Reports]. 4. Run and review the <i>Case Status Summary Report</i> for Q3 2018 to ensure all submitted cases were accepted. 5. Run the <i>Submission Detail Report</i> to review specific cases; resubmit any applicable cases. 6. Run and review your hospital’s PPR to ensure all IQR requirements have been met: <ol style="list-style-type: none"> A. Go to [Run Reports]; then select <i>IQR Program</i> and <i>Report Category</i> [Hospital Reporting - Annual Payment Update Reports]; then select [View Reports]. B. Run the <i>Hospital Reporting - Provider Participation Report</i> for Q3 2018. C. View the PPR for the following: <ul style="list-style-type: none"> <input type="checkbox"/> <i>Active QualityNet Security Administrator</i> should display as “Yes.” <input type="checkbox"/> <i>Data Accuracy and Completeness Acknowledgement</i> should display as “No.” <input type="checkbox"/> <i>Total Patient Population</i> and <i>Total Sample Size</i> columns case counts will display using Population and Sampling data. “No” means no counts have been submitted. Hospitals with no discharges for any of the measure sets must enter a zero (0). (This only applies to chart-abstracted measures.) <input type="checkbox"/> <i>Total Cases Accepted</i> column should be ≥ your <i>Total Patient Population</i> and/or <i>Total Medicare Claims</i> column, unless you are electing to sample. If your hospital is sampling, ensure the <i>Total Cases Accepted</i> are ≥ the minimum sample requirement. <input type="checkbox"/> Measure Set: IQR-ED* and IQR-IMM Case Counts <ol style="list-style-type: none"> i. IMM and ED should each have at least the minimum number of cases as the <i>Global Population</i>. ii. If your report displays “No” in the <i>Total Patient Population</i> and <i>Total Sample Size</i> columns, then you have not entered your <i>Global Population and Sampling</i> data. iii. If the <i>Total Cases Accepted</i> column is blank, then you have not submitted IMM and/or ED data. <input type="checkbox"/> PC-01 Elective Delivery* (<i>Clinical Web-Based Measure</i>): Numbers or zeroes are acceptable. If your report displays “No,” these data have not been entered (unless you filed an IPPS Measure Exception Form). <input type="checkbox"/> “Yes” should display for all IQR HAI (Healthcare-Associated Infection) Quality Measure Data: <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> <i>C. difficile</i></td> <td><input type="checkbox"/> CLABSI</td> <td><input type="checkbox"/> SSI – Abdominal Hysterectomy</td> </tr> <tr> <td><input type="checkbox"/> CAUTI</td> <td><input type="checkbox"/> MRSA Bacteremia</td> <td><input type="checkbox"/> SSI – Colon Surgery</td> </tr> </table> If “Yes” is not displayed, check that your hospital has correctly entered all IQR HAI data. Refer to the Q3 2018 HAI Checklist or contact the NHSN Help Desk. <input type="checkbox"/> <i>Healthcare Personnel Influenza Vaccination</i> should display as “N/A” during non-flu season quarters. 	<input type="checkbox"/> <i>C. difficile</i>	<input type="checkbox"/> CLABSI	<input type="checkbox"/> SSI – Abdominal Hysterectomy	<input type="checkbox"/> CAUTI	<input type="checkbox"/> MRSA Bacteremia	<input type="checkbox"/> SSI – Colon Surgery	<input type="checkbox"/>
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02/28/19	<p>Submitting CY 2018 eCQM Data - Hospitals must report on a minimum of four eQMs for one self-selected quarter of data (Q1, Q2, Q3, or Q4). The CMS data receiving system in the <i>QualityNet Secure Portal</i> is open for Test and Production QRDA Category I File Submissions. For further information, please refer to the CY 2018 Preparation Checklist – Test and the CY 2018 Preparation Checklist – Production.</p>	<input type="checkbox"/>						

*Hospitals that do not have an ED and/or do not deliver babies may submit an [IPPS Measure Exception Form](#).
 For questions, contact the Hospital IQR Program Support Contractor at (844) 472-4477, (866) 800-8765, or <https://cms-ip.custhelp.com>.