

System Updates: Hospital Outpatient Quality Reporting (OQR) Program

Karen VanBourgondien, BSN, RN

Outpatient Quality Program Systems
and Stakeholder Support Team



Program-Related Changes

Announcements

- The most current public reporting release was January 27, 2021.
- Quarter (Q)4 data (October 1 – December 31, 2020) are due May 3, 2021
- The web-based data submission deadline is May 17, 2021.
 - You can make any edits or changes up to the deadline. After the deadline passes, no changes can be made.


Learning Objectives

Attendees will be able to:

- List the steps involved in registering for the Hospital Quality Reporting (HQR) platform.
- Describe the steps necessary to enter Hospital OQR data.
- Locate reports in Managed File Transfer (MFT).
- Locate the new public reporting platform and download data for hospitals.

Topics We Will Cover

- *QualityNet* migrated from a **.org** to a **.gov** URL
 - New address: <https://qualitynet.cms.gov/>
- New HQR platform: <https://hqr.cms.gov/hqrng/login>
 - HARP
 - Registration for Security Official (SO)
 - Access Management
 - Data submission
 - Reports
 - Vendor Management (VM)
 - Managed File Transfer (MFT)
- Public Reporting
 - Care Compare



Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP)

HARP:

- Provides a secure portal with a single location for users.
- Streamlines identity management by allowing access to all CMS quality organizations with one login.
 - You will have a HARP ID and password.
- Uses two-factor authentication.
 - You will select two devices to use for authentication.

Registering For HARP

QualityNet Home Page: <https://qualitynet.cms.gov>

CMS.gov | QualityNet

Search QualityNet

Quality Programs ▾ Help ▾

Log into Secure Portal

Register

Welcome to QualityNet!

Your one-stop shop for CMS Quality Programs.

Subscribe to Email Updates

Log into QualityNet Secure Portal

Recent News

[View more](#)

Dec 17, 2020

CMS extends third quarter (Q3) 2020 submission deadlines for select programs

Dec 16, 2020

Axway Secure File Transfer (Data Exchange) Has Been Decommissioned

Available Resources

You can access HARP resources to assist you in registering for your HARP account

[Getting Started](#)[Training & Guides](#)[Known Issues & Maintenance](#)[QualityNet Support](#)

Registration
[I am an HQR user](#)
[I am an EQRS User](#)

Can't find what you're looking for?
Visit the [Question & Answer Tools](#).

Registering for HARP

QualityNet Secure Portal (QSP) has officially been retired and replaced with **hqr.cms.gov** and **eqrs.cms.gov** for Hospital Quality Reporting (HQR) and End Stage Renal Disease (ESRD) Quality Reporting, respectively.

To log into HQR or EQRS, you must create a [HCQIS Access Roles and Profile \(HARP\)](#) account. HARP is a secure identity management portal provided by the Centers for Medicare and Medicaid Services (CMS). Creating a HARP account provides you with a user ID and password that can be used to sign in to many CMS applications, including HQR and EQRS.

For information on registering for [HARP](#), please view the following resources:

Resource Name	
HARP User Guide	View
HARP Frequently Asked Questions (FAQ)	View
HARP Registration Training Video	View
HARP Manual Proofing Training Video	View

Creating Your HARP Account

1. Access the link:

<https://harp.cms.gov/register>

2. Follow the steps beginning with *Create An Account*.

Create an Account

HCQIS Access Roles and Profile

1

2

3

4


Profile InformationAccount InformationRemote ProofingConfirmation

Profile Information

Enter your profile information for identity proofing. HARP uses Experian to help verify your identity. Already called Experian? [Enter Reference Number](#)

Want to retry a previously failed registration attempt? [Retry Remote Proofing](#)

All fields marked with an asterisk (*) are required.

Legal First Name *	Legal Last Name *
<input type="text"/>	<input type="text"/>
Middle Name	Date of Birth *
<input type="text"/>	<input type="text" value="mm/dd/yyyy"/> 
Email Address *	Confirm Email Address *
<input type="text"/>	<input type="text"/>
Personal Phone Number	Is your address in the United States? *
<input type="text" value="() - -"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No
Home Address Line 1 *	Home Address Line 2
<input type="text"/>	<input type="text"/>

Requesting Access

Registration

I am an HQR user

I am an EQRS User

1

1. Select the *I am an HQR user icon*, scroll down the page.

2. Log into hqr.cms.gov with your HARP ID and follow the instructions to register as a Security Official (SO) or a basic user.

To register as a Basic User or Security Administrator/Official in the new Hospital Quality Reporting (HQR) System:

****NEW USERS TO HQR:** New users (those with no current affiliation to any organization) must contact the QualityNet Help Desk to request access to their organization.**


Effective November 13, 2020, the new **Access Management** feature makes requesting and assigning access for current users much quicker.

All current users should follow these steps to request access:

1. Log onto hqr.cms.gov with your HARP User ID and Password
 - (No **HARP** account? Create one [here](#).)
2. Go to **My Profile** (Under your **User Name** in the upper right)
 - *From this page, you can Request Access or View Current Access*
3. Select either **Basic User** or **Security Administrator/Official** when prompted to **Choose Your User Type**
4. **Select** your required permissions, **Review** them, and click **Submit** when ready
5. You will be notified by email when your request has been approved

2

PLEASE NOTE: If you are new user to HQR and requesting to be the first SA/O for your organization, you can submit requests using the Electronic Access Request (EAR) [here](#). (Ambulatory Surgery Center's must continue to submit via the EAR. Future HQR enhancements may enable the ASC community to utilize Access Management resources.



Accessing the Hospital Quality Reporting (HQR) Platform

<https://hqr.cms.gov/hqrng/login>



Enter Your HARP Information

Enter your HARP User ID and password.

Hospital Quality Reporting

1. Insert your User ID (HARP ID)
2. Enter your HARP Password
3. Select the *Login* icon

HARP Sign In

Enter your User ID and Password to login.

User ID

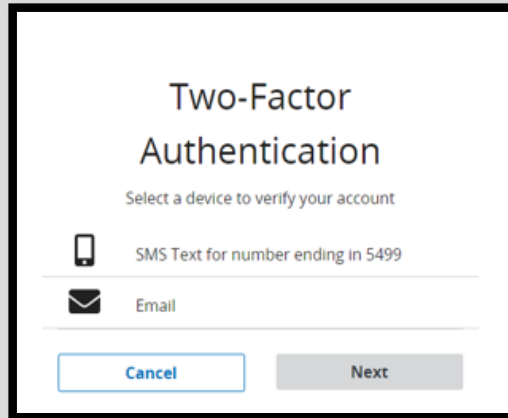
Password

Login

Need a HARP account? Create one [here](#).


Signing In


1. Choose the device you will use for the two-factor authentication.



Two-Factor Authentication

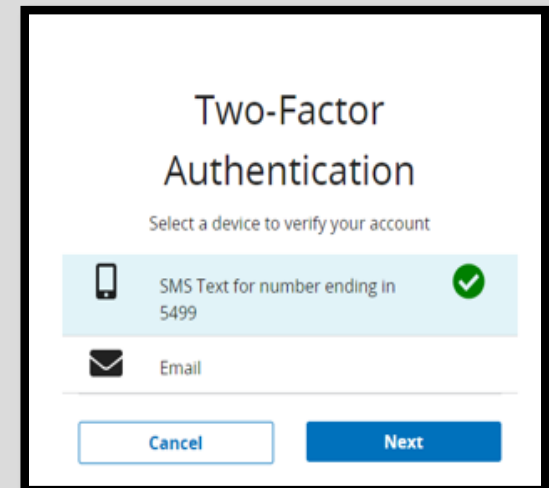
Select a device to verify your account

 SMS Text for number ending in 5499

 Email



[Cancel](#) [Next](#)


2. The check will display your choice. Select *Next*.



Two-Factor Authentication

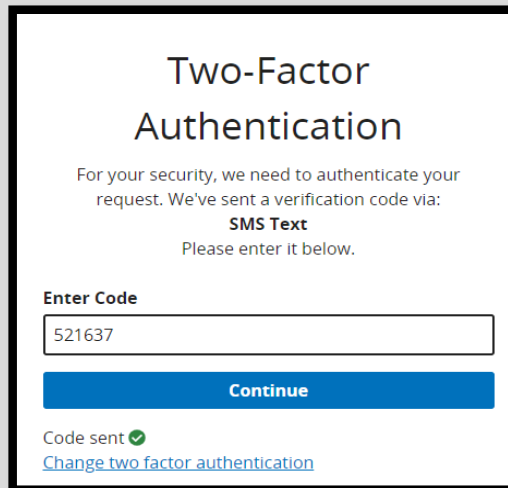
Select a device to verify your account

 SMS Text for number ending in 5499 

 Email

[Cancel](#) [Next](#)

3. Enter the code you were sent. Select *Continue*.




Two-Factor Authentication

For your security, we need to authenticate your request. We've sent a verification code via:

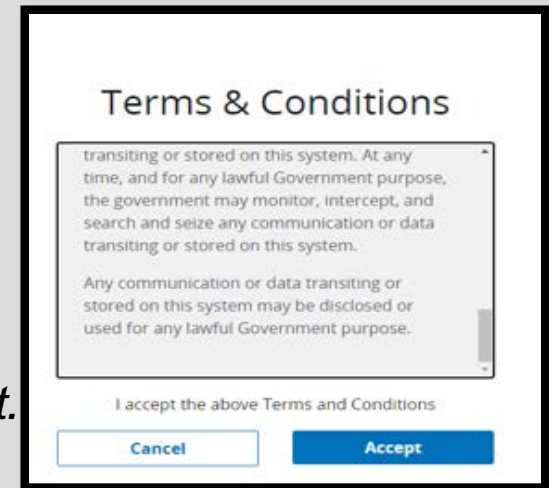
SMS Text
Please enter it below.

Enter Code

[Continue](#)

Code sent 
[Change two factor authentication](#)

4. If you agree with Terms and Conditions, select *Accept*.



Terms & Conditions

transiting or stored on this system. At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this system.

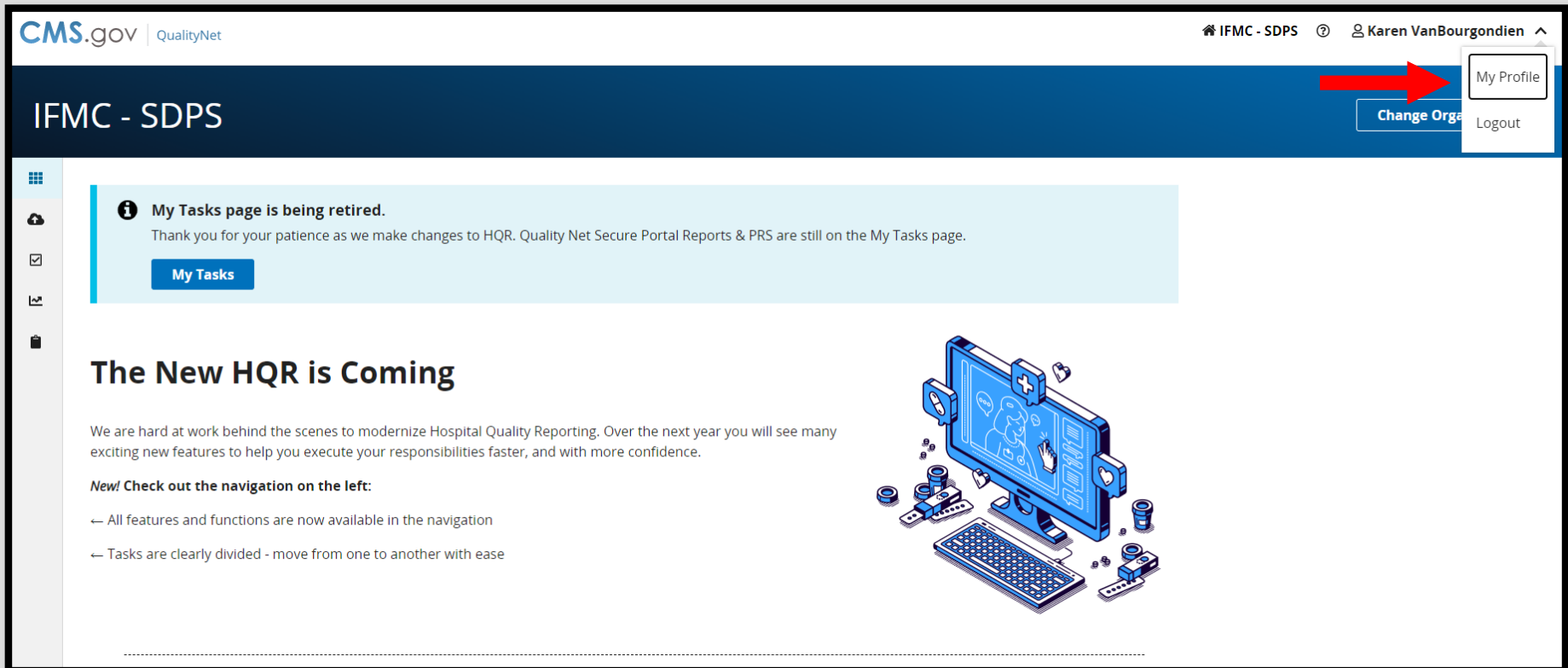
Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

I accept the above Terms and Conditions

[Cancel](#) [Accept](#)

Home Page

To manage your access, you will log into *My Profile* from the drop-down box under your name.



The screenshot shows the CMS.gov QualityNet interface. The top navigation bar includes the CMS.gov logo, the QualityNet logo, and the text "IFMC - SDPS". On the right side of the navigation bar, the user's name "Karen VanBourgondien" is displayed with a dropdown arrow. A red arrow points to the "My Profile" link in the dropdown menu. Below the navigation bar, there is a section titled "IFMC - SDPS". To the left of the main content area is a sidebar with a grid icon and several icons representing different functions. The main content area features a light blue banner with an information icon and the text "My Tasks page is being retired. Thank you for your patience as we make changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page." Below this banner is a blue button labeled "My Tasks". Further down, there is a section titled "The New HQR is Coming" with a paragraph of text and a list of new features. To the right of the text is an illustration of a computer monitor displaying a medical interface, surrounded by various medical and technological icons.

CMS.gov | QualityNet

IFMC - SDPS

Karen VanBourgondien

My Profile

Logout

Change Org

i My Tasks page is being retired.
Thank you for your patience as we make changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page.

My Tasks

The New HQR is Coming

We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence.

New! Check out the navigation on the left:

- ← All features and functions are now available in the navigation
- ← Tasks are clearly divided - move from one to another with ease

Your Access Options

You can make updates, create an access request, or view your current access.

The screenshot shows a user profile for Karen VanBourgondien. A red box highlights three update links: 'Update Password', 'Update 2-Factor Authentication', and 'Update Challenge Question'. Another red box highlights the 'Create Access Request' button. Below, the 'Organization Access' section has tabs for 'My Organizations' and 'Access Requests'. A search bar is present. A table lists the user's access to 'ABC Hospital'. A red box highlights the 'View Access' button for this organization.

User Profile: Karen VanBourgondien, Harp user and email

Update Links: [Update Password](#), [Update 2-Factor Authentication](#), [Update Challenge Question](#)

Organization Access: [Create Access Request](#)

My Organizations / Access Requests

Here are the organizations to which you currently have access. Navigate to any organization's page by clicking on the organization's name. The "View Access" button allows you to view your permissions at that organization.

Search:

Organization	Organization ID	User Type	Status	
ABC Hospital	A000064	Basic	Active	View Access

Exploring the Home Page

You can select *Change Organization* and access the dashboard.

The screenshot shows the ABC Hospital Home Page. At the top, a blue header bar contains the text "ABC Hospital" on the left and a "Change Organization" button on the right, with a red arrow pointing to it. On the far left, a vertical navigation menu is highlighted with a red box, containing icons for a dashboard, a bell, a document, a person, and a gear. Below the header, a light blue banner contains an information icon, the text "My Tasks page is being retired. Thank you for your patience as we make changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page.", and a "My Tasks" button. The main content area features a section titled "The New HQR is Coming" with a paragraph about modernizing Hospital Quality Reporting and a list of navigation changes. To the right of this text is an illustration of a computer monitor displaying a dashboard, with a keyboard and mouse in front of it. Below this, a section titled "Here are some of the key features of the new Hospital Quality Reporting" lists four features: Intuitive Interfaces, Simple Submissions, Advanced Security, and Reliable Calculations, each with a brief description.

ABC Hospital

Change Organization

My Tasks page is being retired.
Thank you for your patience as we make changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page.


My Tasks

The New HQR is Coming

We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence.

Now! Check out the navigation on the left:

- All Features and functions are now available in the navigation
- Tasks are clearly divided - move from one to another with ease

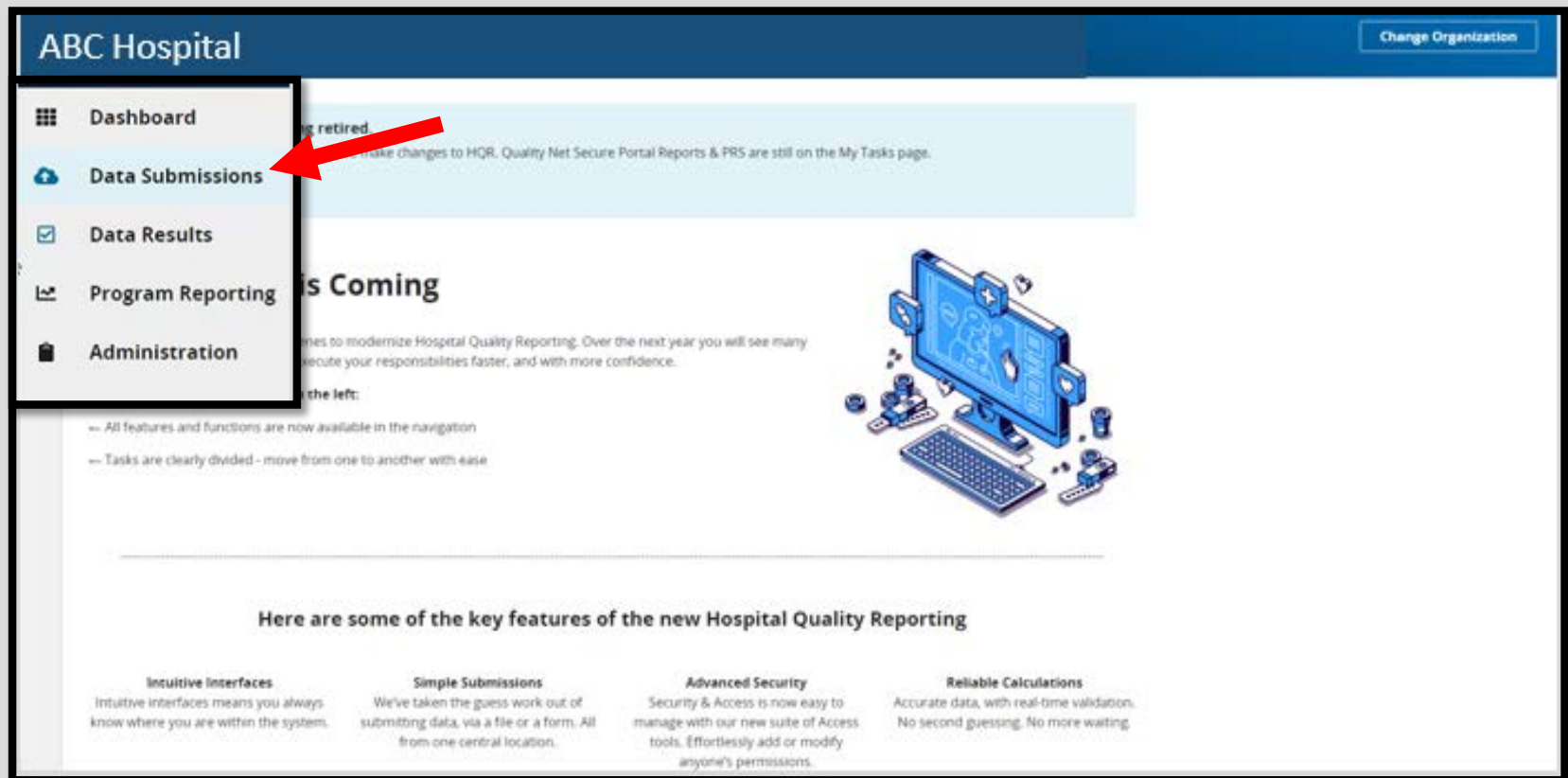


Here are some of the key features of the new Hospital Quality Reporting

Intuitive Interfaces	Simple Submissions	Advanced Security	Reliable Calculations
Intuitive Interfaces means you always know where you are within the system.	We've taken the guess work out of submitting data, via a file or a form. All from one central location.	Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.	Accurate data, with real-time validation. No second guessing. No more waiting.

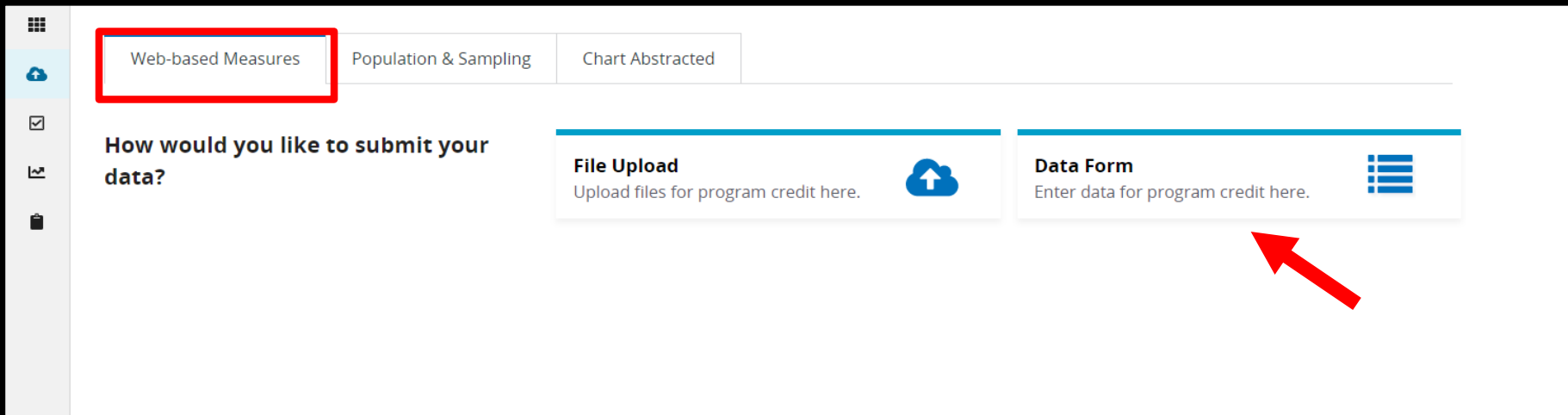
Data Submission

To enter your data, click on the Dashboard toggle to open your menu.
Select *Data Submission*.



Choose Data Form

The landing page will be for web-based measures.
Hospitals will select the *Data Form* option.

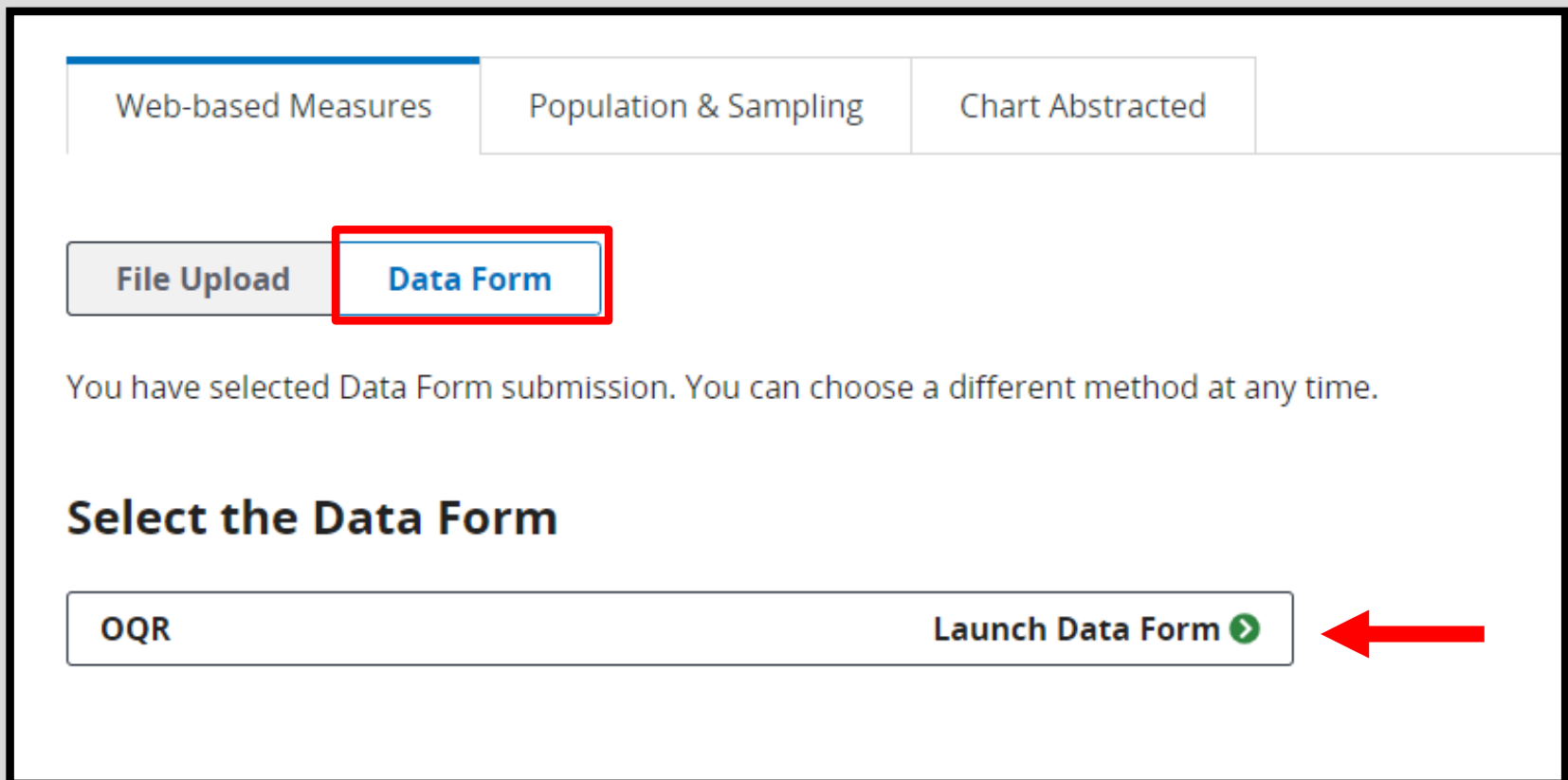


The screenshot shows a web interface for selecting data submission methods. On the left is a vertical sidebar with icons for a menu, a cloud with a plus sign, a checkmark, a line graph, and a clipboard. The main content area has a top navigation bar with three tabs: 'Web-based Measures' (highlighted with a red rectangle), 'Population & Sampling', and 'Chart Abstracted'. Below the tabs, the heading 'How would you like to submit your data?' is followed by two options. The 'File Upload' option includes a cloud upload icon and the text 'Upload files for program credit here.' The 'Data Form' option includes a list icon and the text 'Enter data for program credit here.' A red arrow points to the 'Data Form' option.

Web-based Measures	Population & Sampling	Chart Abstracted
How would you like to submit your data?		
File Upload Upload files for program credit here.		
Data Form Enter data for program credit here.		

Data Form

In choosing the Data Form option, you will select the *Launch Data Form*.



The screenshot shows a web interface for selecting a data submission method. At the top, there are three tabs: 'Web-based Measures' (selected), 'Population & Sampling', and 'Chart Abstracted'. Below these, there are two buttons: 'File Upload' and 'Data Form'. The 'Data Form' button is highlighted with a red rectangular border. Below the buttons, a message states: 'You have selected Data Form submission. You can choose a different method at any time.' Underneath this message is the heading 'Select the Data Form'. At the bottom, there is a horizontal container with 'OQR' on the left and 'Launch Data Form' with a green right-pointing arrow on the right. A large red arrow points from the right towards the 'Launch Data Form' button.

Web-based Measures

Population & Sampling

Chart Abstracted

File Upload

Data Form

You have selected Data Form submission. You can choose a different method at any time.

Select the Data Form

OQR

Launch Data Form ➤

Enter Your Data

To enter your data, you can:

1. Check the Payment Year.
2. Click on *Start Measure*.

The screenshot shows the 'Outpatient Quality Reporting (OQR)' interface. At the top right, a red circle with the number '1' highlights the 'Payment Year' dropdown menu, which is currently set to '2022'. Below this, the interface displays various reporting details: CMS Certification Number (123456), Submission Period (01/01/2021- 05/17/2021), and With Respect to Reporting Period (01/01/2020- 12/31/2020). The 'Current Submission Period' is marked as 'Open'. A progress bar at the top indicates three steps: 'Enter' (checked), 'Preview' (checked), and 'Submit' (checked). Below the progress bar, three measures are listed: 'OP-22' (Left Without Being Seen), 'OP-29' (Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients), and 'OP-31 (Voluntary)' (Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery). Each measure has a checkbox for 'Please enter zeros for this measure as I have no data to submit' and a green 'Start Measure' button. A red circle with the number '2' highlights the 'Start Measure' button for the 'OP-22' measure. At the bottom right, there is a button labeled 'I'm ready to submit'.

Outpatient Quality Reporting (OQR)

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

CMS Certification Number: 123456
Submission Period: 01/01/2021- 05/17/2021
With Respect to Reporting Period: 01/01/2020- 12/31/2020

Current Submission Period: **Open**

✓ Enter ———— ✓ Preview ———— ✓ Submit

OP-22
Left Without Being Seen

☐ Please enter zeros for this measure as I have no data to submit

OP-29
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

☐ Please enter zeros for this measure as I have no data to submit

OP-31 (Voluntary)
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery

☐ Please enter zeros for this measure as I have no data to submit

Start Measure

I'm ready to submit

Enter Your Data

Enter the numerator
and the denominator.

Once you have entered
your data, select
Save & Return.

OP-22
Left Without Being Seen

☐ Please enter zeros for this measure as I have no data to submit

Numerator
* What was the total number of patients who left without being evaluated by a physician/APN/PA?

Denominator
* What was the total number of patients who presented to the ED?



Adding Zeros

If your facility does not perform a procedure, select the box to enter zeros.

Outpatient Quality Reporting (OQR)

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Payment Year: 2022

CMS Certification Number: 010535 123456
Submission Period: 01/01/2020 - 05/17/2021
With Respect to Reporting Period: 01/01/2020 - 12/31/2020

Current Submission Period: **Open**

Enter Preview Submit

OP-22
Left Without Being Seen

☐ Please enter zeros for this measure as I have no data to submit

Start Measure

OP-29
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

☒ Please enter zeros for this measure as I have no data to submit

Start Measure

Confirmation

If your facility does not have patients that meet criteria for OP-29, you will select the blue *Confirmed* box.

The screenshot shows a web interface for submitting data. At the top, it says "Current Submission Period: Open". Below this are two tabs: "Enter" (active) and "Preview". The main content area lists three measures:

- OP-22**
Left Without Being Seen
☐ Please enter zeros for this measure as I have no data to submit.
- OP-29**
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients
☒ Please enter zeros for this measure as I have no data to submit.
- OP-31 (Voluntary)**
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery
☐ Please enter zeros for this measure as I have no data to submit.

On the right side of the interface, there are "Start Measure" buttons for each measure. At the bottom right, there is a button that says "I'm ready to submit".

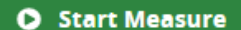
A modal dialog box is open in the center, titled "No patients meet criteria for measure: OP-29". It contains the text: "Please confirm that you have no data to submit for this measure: OP-29. Zeros will be entered in the absence of any data." Below the text are two buttons: "Cancel" and "Confirmed".

Data Entry Results

Verify a successful data entry with the check mark.

OP-22

Left Without Being Seen

 Start Measure

☐ Please enter zeros for this measure as I have no data to submit

+ **OP-29** ✓ Complete



 Edit Measure

Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Score for this measure

n/a	0	0
	Numerator	Denominator

Higher score is better

Adding Data

If your facility does perform the procedures, select *Start Measure*.

Outpatient Quality Reporting (OQR)

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Payment Year: 2022

CMS Certification Number: 010535
Submission Period: 01/01/2020 - 05/17/2021
With Respect to Reporting Period: 01/01/2020 - 12/31/2020

Current Submission Period: **Open**

Enter Preview Submit

OP-22
Left Without Being Seen

☐ Please enter zeros for this measure as I have no data to submit

Start Measure

OP-29
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

☐ Please enter zeros for this measure as I have no data to submit

Start Measure

OP-31 (Voluntary)
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery

☐ Please enter zeros for this measure as I have no data to submit

Start Measure

I'm ready to submit

Entering More Data

The numerator and denominator fields are required fields.

Once you have entered your data, select *Save & Return*.

☐ Please enter zeros for this measure as I have no data to submit

Numerator
* Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report

Denominator
* All patients aged 50 to 75 years of age receiving screening colonoscopy without biopsy or polypectomy

Population
What was your hospital's Total Population?

What was your hospital's sample size?

What was your hospital's sampling frequency?

☐ Monthly
☐ Quarterly
☐ Not Sampled
☒ N/A



Correcting Errors

Any errors may be corrected by re-entering the data and selecting *Save & Return*.

Numerator

* Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report

Numerator cannot be greater than the denominator

Denominator

* All patients aged 50 to 75 years of age receiving screening colonoscopy without biopsy or polypectomy

Numerator cannot be greater than the denominator

Population

What was your hospital's Total Population?

What was your hospital's sample size?

What was your hospital's sampling frequency?

☐ Monthly

☐ Quarterly

☐ Not Sampled

☒ N/A



Partial Submissions

If you have only partially submitted data, you will not be able to select the *I'm ready to submit* box.

OP-29
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

☐ Please enter zeros for this measure as I have no data to submit

OP-31 (Voluntary)
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery

☐ Please enter zeros for this measure as I have no data to submit

Start Measure

Start Measure

✓ I'm ready to submit

Last Measure

For OP-31, enter the:

1. Numerator
2. Denominator
3. Click on *Save & Return*.

☐ Please enter zeros for this measure as I have no data to submit

Numerator

* Patients 18 years and older who had improvement in visual function achieved within 90 days following cataract surgery, based on completing both a pre-operative and post-operative visual function survey

 1

Denominator

* All patients aged 18 years and older who had cataract surgery and completed both a pre-operative and post-operative visual function survey

 2

Population

What was your hospital's Total Population?

What was your hospital's sample size?

What was your hospital's sampling frequency?

☐ Monthly
☐ Quarterly
☐ Not Sampled
☒ N/A

3

Submit Your Data

Once you have entered all the data, select the blue *I'm ready to submit*.

Current Submission Period: **Open**

✓ Enter ————— ✓ Preview ————— ✓ Submit

+ OP-22 ✓ Complete [Edit Measure](#)
Left Without Being Seen

Score for this measure

6%	67	1153
	Numerator	Denominator

Lower score is better

+ OP-29 ✓ Complete [Edit Measure](#)
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Score for this measure

95%	60	63
	Numerator	Denominator

Higher score is better

+ OP-31 (Voluntary) ✓ Complete [Edit Measure](#)
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery

Score for this measure

99%	186	188
	Numerator	Denominator

Higher score is better

[✓ I'm ready to submit](#)

Retain a Copy

You can print a screen shot or use the *Export Data* feature to keep a copy for your records.

The green check next to *Submitted* indicates a successful submission of your data.

CMS Certification Number: 010535
Submission Period: 01/01/2020 - 05/17/2021
With Respect to Reporting Period: 01/01/2020 - 12/31/2020
Last Updated: 1/13/2021 12:14 PM

Current Submission Period: **Open**

Enter — Preview — **Submit**

OP-22 ✓ Complete
Left Without Being Seen
[Edit Measure](#)

Score for this measure

6%	67	1153
	Numerator	Denominator

Lower score is better

OP-29 ✓ Complete
Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients
[Edit Measure](#)

Score for this measure

95%	60	63
	Numerator	Denominator

Higher score is better

OP-31 (Voluntary) ✓ Complete
Improvement in Patients's Visual Function within 90 Days Following Cataract Surgery
[Edit Measure](#)

Score for this measure

99%	186	188
	Numerator	Denominator

Higher score is better

Population & Sampling

From the Population & Sampling tab:

1. Select the File Upload tab.
2. Choose Production from the drop-down menu and choose Change Selection.
3. Select Files you want to upload, or
4. Drag and drop your files.

The screenshot shows a web interface with three tabs at the top: 'Web-based Measures', 'Population & Sampling' (highlighted with a red box and labeled 1), and 'Chart Abstracted'. Below the tabs are two buttons: 'File Upload' (highlighted with a red box and labeled 1) and 'Data Form'. A text instruction reads: 'Choose Select Files to browse your computer or Drag and Drop the files into the highlighted area.' Below this is a 'Submission' section with a dropdown menu showing 'Production' (labeled 2) and a 'Change Selection' button. To the right of the dropdown is a red circle with the number 2. Below the Submission section is a dark blue bar containing a 'Search' input field with a magnifying glass icon, a 'Reset' button, and a 'Select Files' button (labeled 3). Below the dark blue bar is a large dashed rectangular area for file upload. Inside this area is a blue cloud icon with an upward arrow, the text 'Drag files here to upload', the word 'or', and another 'Select Files' button (labeled 4).

Checking Your Upload

You will choose your program in the pop-up window and then view the results of your upload.

Program Designation

What program are you uploading population & sampling data for?

OQR - Outpatient Quality Reporting

[Close](#)

Submission

Production

[Change Selection](#)

Search

Search



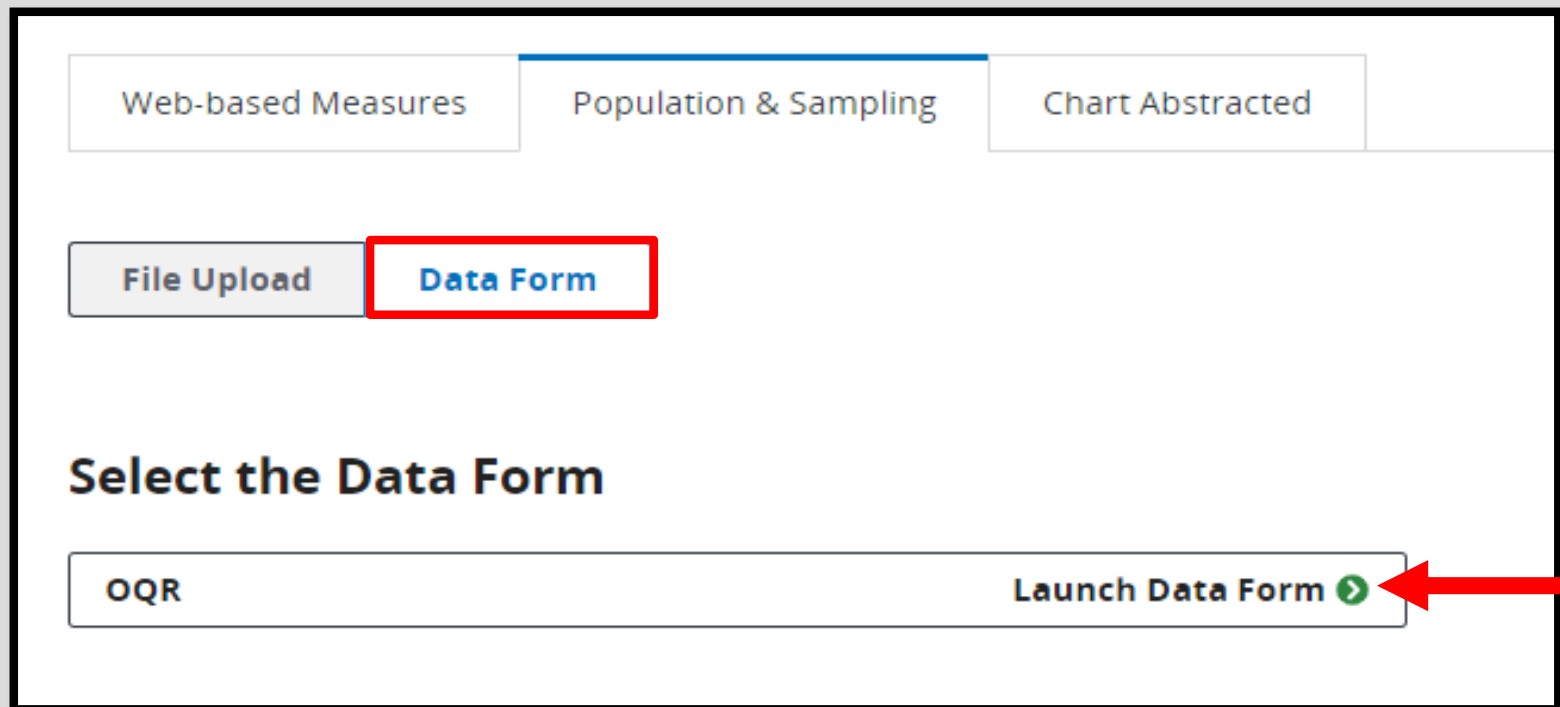
Reset

[Select Files](#)

Batch File Name	Batch ID	Program	File Size	Upload Date	Uploaded By	Status
POP_SAMP_010...	3037386	OQR	2.8 KB	1/27/2021	CRENSHAW COMMUNI...	Received
OQR_Pop_and_...	3026606	OQR	3.9 KB	12/23/2020	CRENSHAW COMMUNI...	Failed

Data Form

Under the Data Form selection, select *Launch Data Form*.



The screenshot shows a web interface for selecting a data form. At the top, there are three tabs: 'Web-based Measures', 'Population & Sampling' (which is selected and has a blue underline), and 'Chart Abstracted'. Below these tabs, there are two buttons: 'File Upload' and 'Data Form'. The 'Data Form' button is highlighted with a red rectangular border. Below the buttons, the text 'Select the Data Form' is displayed. At the bottom, there is a horizontal bar containing the text 'OQR' on the left and 'Launch Data Form' followed by a green right-pointing arrow on the right. A red arrow points from the right edge of the image towards the 'Launch Data Form' button.

Web-based Measures Population & Sampling Chart Abstracted

File Upload **Data Form**

Select the Data Form

OQR Launch Data Form ➤

Select The Measure

To begin entering your data:

1. Choose your Reporting Period.
2. Click on the green *Start Measure* next to the measure you wish to enter your data for.

[< Data Submission](#)

Hospital Outpatient: Population & Sampling

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Reporting Period: Q3 2020

CMS Certification Number: 010535
Submission Period: 07/01/2020 - 02/01/2021
With Respect to Reporting Period: 07/01/2020 - 09/30/2020

Current Submission Period: **Open**

Enter Preview Submit

OQR-AMI (Voluntary)
Acute Myocardial Infarction **Start Measure**

OQR-ED-Throughput (Voluntary)
ED-Throughput **Start Measure**

OQR-Stroke (Voluntary)
Stroke **Start Measure**

I'm ready to submit

ED Throughput

For the ED Throughput measure set, select your sampling option from the drop-down menu, enter your data and select *Save & Return*.

Sampling Option

* **Sampling Option** (Sampling Option)

Sampled
Not Sampled
N/A submission not required

Population

All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	July	August	September	Total
Medicare	1083	1122	1016	3221
Non-Medicare	987	886	882	2755
Total	2070	2008	1898	5976

Sampling

All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	July	August	September	Total
Medicare	90	86	96	272
Non-Medicare	6	10	0	16
Total	96	96	96	288

Data Result

You can enter data for another measure
or select *I'm ready to submit*.

[< Data Submission](#)

Hospital Outpatient: Population & Sampling

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Reporting Period
Q3 2020

CMS Certification Number: 010535
Submission Period: 07/01/2020 - 02/01/2021
With Respect to Reporting Period: 07/01/2020 - 09/30/2020
Last Updated: 1/13/2021 11:01 AM

Current Submission Period: **Open**

✓ Enter

✓ Preview

✓ Submit

OQR-AMI (Voluntary)
Acute Myocardial Infarction

▶ Start Measure

+

OQR-ED-Throughput (Voluntary) ✓ Complete
ED-Throughput

[✎ Edit Measure](#)

OQR-Stroke (Voluntary)
Stroke

▶ Start Measure

✓ I'm ready to submit

Retain a Copy

You can enter data for the other measure sets, edit your current data, or use the *Export Data* Feature to retain a copy of your submission.

Hospital Outpatient: Population & Sampling

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Reporting Period: Q3 2020

✓ Hospital Outpatient: Population & Sampling Measure Sets Successfully Submitted

CMS Certification Number: 010535
Submission Period: 07/01/2020 - 02/01/2021
With Respect to Reporting Period: 07/01/2020 - 09/30/2020
Last Updated: 1/13/2021 11:01 AM

Current Submission Period: Open

✓ Enter ————— ✓ Preview ————— ✓ Submit

OQR-AMI (Voluntary) [Start Measure](#)
Acute Myocardial Infarction

+ OQR-ED-Throughput (Voluntary) ✓ Complete [Edit Measure](#)
ED-Throughput

OQR-Stroke (Voluntary) [Start Measure](#)
Stroke

Chart Abstracted Tab

Under the Chart Abstracted tab:

1. Choose Production from the drop-down menu and choose Change Selection.
2. Select Files to upload, or
3. Drag and drop your files.

The screenshot shows the 'Chart Abstracted' tab selected in a navigation bar. Below the navigation bar, there is a 'Submission' section with a dropdown menu showing 'Production' and a 'Change Selection' button. To the right of this section is a red circle with the number '1'. Below the 'Submission' section is a 'Search' bar with a 'Reset' button and a 'Select Files' button. To the right of the 'Select Files' button is a red circle with the number '2'. Below the 'Search' bar is a large dashed box containing a cloud icon with an upward arrow, the text 'Drag files here to upload', the word 'or', and another 'Select Files' button. To the right of this dashed box is a red circle with the number '3'.

Web-based Measures Population & Sampling **Chart Abstracted**

Choose *Select Files* to browse your computer or *Drag and Drop* the files into the highlighted area.

Submission

Production

Change Selection

Search

Search Reset **Select Files**

Drag files here to upload

or

Select Files

Checking Your Upload

After uploading your data, you will see the results.

Submission

Production

Change Selection

Search

Search

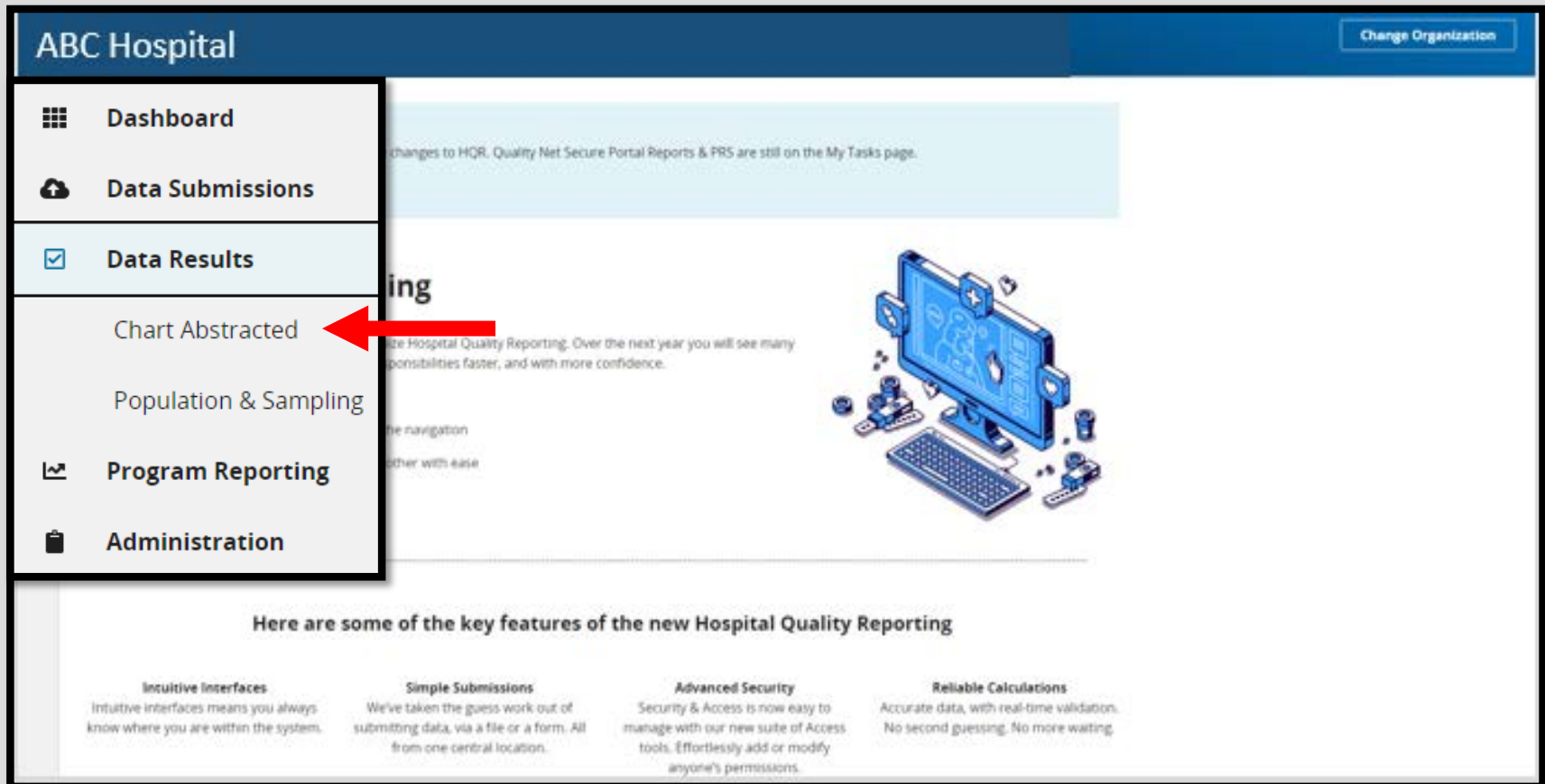
Reset

Select Files

Batch File Name	Batch ID	Program	File Size	Upload Date ▼	Uploaded By	Status
AMI Q220 .xml	134107	OQR	2.2 KB	8/5/2020	CRENSHAW COMMUNI...	✓ Received
2Q 2020 AMI.xml	134106	OQR	2.3 KB	8/5/2020	CRENSHAW COMMUNI...	✓ Received

Chart Abstracted

Under the Data Results option, choose *Chart Abstracted*.



File Accuracy

Under the File Accuracy tab, select the program, a report, and an encounter quarter. Select *Export CSV*

Data Results - Chart Abstracted

File Accuracy

Claims Details

File Accuracy

This is where you see the accuracy of your files, and potential duplicates. It encompasses data from the Quality Net legacy reports, including: Case Status Summary, Submission Detail, and Potential Duplicate Records.

Program
OQR

Report

Select Report

Select Report

Case Status Summary

Submission Detail

Potential Duplicate

Encounter Quarter

Select Quarter

Select Quarter

Q4 2020

Q3 2020

Q2 2020

Q1 2020

Export CSV

Claims Detail

Under the Claims Detail tab, you will choose the program and the encounter quarter. Then, select *Export CSV*.

Data Results - Chart Abstracted

File Accuracy

Claims Details

Claims Details

This is where you see the submission results of your Chart Abstracted measures. It encompasses data from the Quality Net legacy reports, including: Claims Detail.

Program

OQR

Encounter Quarter

Select Quarter

Q4 2020

Q3 2020

Q2 2020

Q1 2020

Export CSV

Population & Sampling

Under the Data Results option, choose *Population & Sampling*.



Choose Your Options

Under the Population & Sampling tab, you will choose the program and the encounter quarter. Then, select *Export CSV*.

Data Results - Population & Sampling

File Accuracy

This is where you see the accuracy of your Population & Sampling files. It encompasses data from the Quality Net legacy reports, including: Population Submission.

Program

OQR

Encounter Quarter

Select Quarter

Q4 2020

Q3 2020

Q2 2020

Q1 2020

Export CSV

Reporting Requirements

The screenshot displays the ABC Hospital Quality Reporting system interface. The top navigation bar includes the hospital name and a 'Change Organization' button. The left sidebar menu is expanded, showing options: Dashboard, Data Submissions, Data Results, Program Reporting, Reporting Requirements (highlighted with a red arrow), Performance Reports, Public Reporting, Validation, and Administration. The main content area features a blue header with a message about changes to HQR, a central graphic of a computer monitor with medical icons, and a section titled 'Some of the key features of the new Hospital Quality Reporting' with three columns: Simple Submissions, Advanced Security, and Reliable Calculations.

ABC Hospital Change Organization

- Dashboard
- Data Submissions
- Data Results
- Program Reporting
- Reporting Requirements**
- Performance Reports
- Public Reporting
- Validation
- Administration

changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page.

ing

ize Hospital Quality Reporting. Over the next year you will see many possibilities faster, and with more confidence.

the navigation

other with ease

Some of the key features of the new Hospital Quality Reporting

- Simple Submissions**
We have taken the guess work out of submitting data, via a file or a form. All from one central location.
- Advanced Security**
Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.
- Reliable Calculations**
Accurate data, with real-time validation. No second guessing. No more waiting.

Reporting Requirements

To run your report, you will choose the program and the encounter quarter. Then, select *Export CSV*

Reporting Requirements

This is where you check to see if your organization is meeting reporting requirements. This encompasses data from Quality Net reports, including: eCQM Submission Status, Provider Participation (IQR, OQR, IPFQR). Access is dependent upon permissions.

Program

OQR

Encounter Quarter

Q4 2020

Select Quarter

Q4 2020

Q3 2020

Q2 2020

Q1 2020

Export CSV

Next Option

ABC Hospital Change Organization

- Dashboard
- Data Submissions
- Data Results
- Program Reporting**
 - Reporting Requirements
 - Performance Reports**
 - Public Reporting
 - Validation
- Administration

Changes to HQR, Quality Net Secure Portal Reports & PRS are still on the My Tasks page.

ng

Hospital Quality Reporting. Over the next year you will see many possibilities faster, and with more confidence.

navigation

of the key features of the new Hospital Quality Reporting

- Simple Submissions**
Taken the guess work out of submitting data, via a file or a form. All from one central location.
- Advanced Security**
Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.
- Reliable Calculations**
Accurate data, with real-time validation. No second guessing. No more waiting.

Performance Report

To run your Performance Report, you will choose the program and the encounter quarter. Then, select *Export CSV*.
You will receive the display disclaimer.

Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

Program

OQR

Encounter Quarter

Q3 2020



State and National Rates are subject to change

Data is not final until both the Submission Period and the Comparative Analysis Phase end for this program and period.

Export CSV

Next Option

ABC Hospital Change Organization

- Dashboard**
- Data Submissions**
- Data Results**
- Program Reporting**
 - Reporting Requirements
 - Performance Reports
 - Public Reporting**
 - Validation
- Administration**

Changes to HQR, Quality Net Secure Portal Reports & PRS are still on the My Tasks page.

ng

Hospital Quality Reporting. Over the next year you will see many possibilities faster, and with more confidence.

navigation

er with ease

of the key features of the new Hospital Quality Reporting

- Simple Submissions**
Taken the guess work out of submitting data, via a file or a form. All from one central location.
- Advanced Security**
Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.
- Reliable Calculations**
Accurate data, with real-time validation. No second guessing. No more waiting.


Public Reporting

You can access your publicly displayed data from this page.

Measure Data

Star Rating

Measure Data

Explore your measure data benchmarks for the current or previous release period(s). Use the filters below to refine your feedback, and access supplemental info for any value with the info icon () or an asterisk (*).

Export Data

Search

Release

Level

Performance

Clear Filters

April 2021

Select

Select

+ Survey of Patients' Experience

+ Timely and Effective Care

+ Complications & Deaths

+ Unplanned Hospital Visits

+ Payment & Value of Care

+ Use of Medical Imaging

Next Option

Under the Program Reporting option, choose *Validation*.

The screenshot displays the 'ABC Hospital' Quality Reporting application. A left-hand navigation menu is open, listing several options: Dashboard, Data Submissions, Data Results, Program Reporting, and Administration. The 'Program Reporting' option is selected, and its sub-menu is displayed, containing 'Reporting Requirements', 'Performance Reports', 'Public Reporting', 'Validation', and 'Administration'. A red arrow points to the 'Validation' option in this sub-menu. The main content area of the application shows a header with 'ABC Hospital' and a 'Change Organization' button. Below the header, there is a section titled 'Hospital Quality Reporting' with a paragraph of text and an illustration of a computer monitor displaying a medical chart. At the bottom, there are three columns of text describing key features: 'Simple Submissions', 'Advanced Security', and 'Reliable Calculations'.

ABC Hospital

Change Organization

Dashboard

Data Submissions

Data Results

Program Reporting

Reporting Requirements

Performance Reports

Public Reporting

Validation

Administration

Hospital Quality Reporting. Over the next year you will see many possibilities faster, and with more confidence.

Simple Submissions

Advanced Security

Reliable Calculations

Validation

You will select the program, type of report, and the encounter quarter. Then, select *Export CSV*.

Validation

This is where you see validation data for the following Quality Net Legacy reports: Confidence Interval, Case Detail, Case Selection, Validation Summary, eCQM Case Selection, eCQM Validation Case Detail, eCQM Validation Case Summary.

Program

OQR

Report

Validation Case Selection

Encounter Quarter

Q4 2020

Select Quarter

Q4 2020

Q3 2020

Q2 2020

Q1 2020

Q4 2019

Q3 2019

Q2 2019

Q1 2019

Export CSV

Administration

The screenshot displays the 'ABC Hospital' web application. A left-hand navigation menu is open, listing several options: Dashboard, Data Submissions, Data Results, Program Reporting, Administration, Vendor Management, and Notice of Participation. The 'Administration' option is highlighted with a red arrow. The main content area shows a header with 'Change Organization', a message about HQR updates, a section titled 'Simplifying' with a paragraph about streamlining reporting, an illustration of a computer monitor with data icons, and a section titled 'Here are some of the key features of the new Hospital Quality Reporting' with four sub-points: Intuitive Interfaces, Simple Submissions, Advanced Security, and Reliable Calculations.

ABC Hospital Change Organization


- Dashboard
- Data Submissions
- Data Results
- Program Reporting
- Administration**
- Vendor Management
- Notice of Participation

...ke changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page.

Simplifying

...ermize Hospital Quality Reporting. Over the next year you will see many responsibilities faster, and with more confidence.

...n the navigation
...another with ease



Here are some of the key features of the new Hospital Quality Reporting

Intuitive Interfaces	Simple Submissions	Advanced Security	Reliable Calculations
Intuitive Interfaces means you always know where you are within the system.	We've taken the guess work out of submitting data, via a file or a form. All from one central location.	Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.	Accurate data, with real-time validation. No second guessing. No more waiting.

Access Management

- Process for granting user access for Basic Users and Security Officials:
 - Ability to choose the user type
 - Select required permissions
- Benefits:
 - Faster requesting and assigning access
 - Ability to request, assign, modify, and approve access directly from the system

To register as a Security Official, you must have a HARP account.

Access Management Options

If you are the Security Official, you can add and manage users for your facility.


[New Feature Tour](#)

Access Management

Users


Access Requests

Search




User Type

Select









Status

Select



3 Users

 Add User

<input type="checkbox"/>	Name	Email	User Type	Status
<input type="checkbox"/>	Jane Doe	Contact email	Security Administrator	 Active
<input type="checkbox"/>	IPF_PERF_010008+	Contact email	Transition Pending	 Active 
<input type="checkbox"/>	STR_010008 PERF_010008	Contact email	Transition Pending	 Active 

Vendor Management (VM)

- Vendor Management is a new process for managing vendors directly in HQR.
- Registration and vendor authorization tools will no longer be required.
- Benefits to the new VM include:
 - The ability to assign, modify, and remove vendor access for data submission from one page.
 - Instant confirmation when vendors are added, suspended, or removed.

Select Vendor Management

ABC Hospital [Change Organization](#)

- Dashboard
- Data Submissions
- Data Results
- Program Reporting
- Administration**
- Vendor Management**
- Notice of Participation

Welcome

Here are some of the key features of the new Hospital Quality Reporting

- Intuitive Interfaces**
Intuitive interfaces means you always know where you are within the system.
- Simple Submissions**
We've taken the guess work out of submitting data, via a file or a form. All from one central location.
- Advanced Security**
Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.
- Reliable Calculations**
Accurate data, with real-time validation. No second guessing. No more waiting.

Choose Your Option

You can:

1. Search or Filter By Status.
2. Add a Vendor.
3. Click on the toggle to Edit Access, Suspend Access, or Remove a vendor.

The screenshot shows a 'Vendor Management' interface. At the top, there's a tab labeled 'Your Vendors'. Below it, there's a search bar with a magnifying glass icon and a status filter dropdown labeled 'Filter By Status'. A red circle with the number '1' is placed over the search bar. To the right of the search bar, there's a blue button labeled 'Add Vendor' with a plus icon. A red circle with the number '2' is placed over this button. Below the search bar, there's a table with 3 vendors. The table has columns for 'Name', 'Vendor ID', and 'Status'. The vendors listed are 'ABC Vendor', 'XYZ Vendor', and '123 Vendor', all with status 'Active'. A red circle with the number '3' is placed over the three-dot menu icon at the end of the first row. A dropdown menu is open from this icon, showing options: 'Edit Access' (with a pencil icon), 'Suspend Access' (with a power icon), and 'Remove' (with a trash icon). At the bottom of the table, there's a pagination bar with 'Previous', '1', and 'Next' links.

Vendor Management

Your Vendors

Search Status

3 Vendors

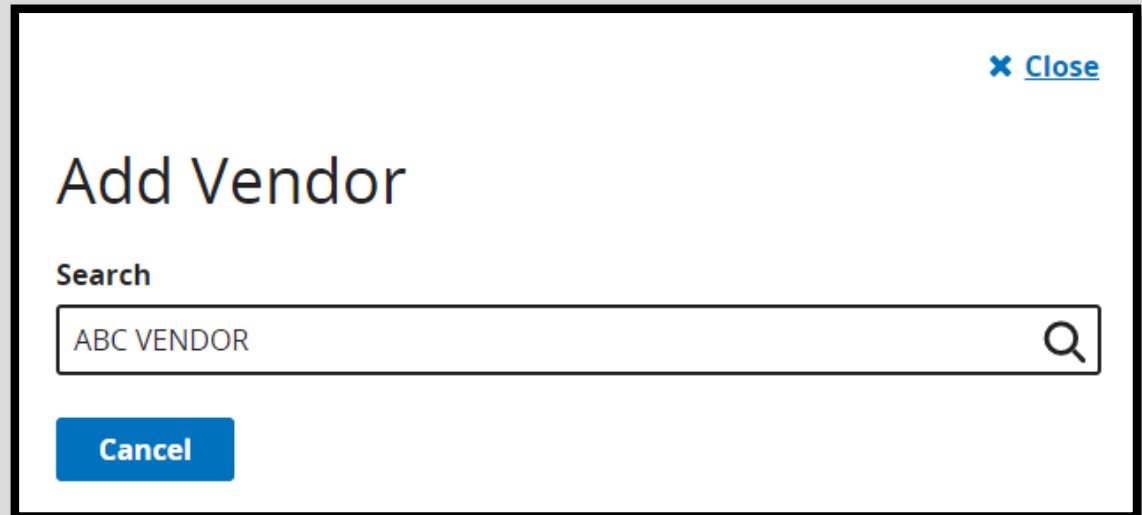
Name	Vendor ID	Status
ABC Vendor	J010501	Active
XYZ Vendor	V100359	Active
123 Vendor	J051101	Active

« Previous 1 Next »

- Edit Access
- Suspend Access
- Remove

Adding a Vendor

1. Enter the vendor name and click on the search icon.



A dialog box titled "Add Vendor" with a "Close" link in the top right corner. It features a "Search" label above a text input field containing "ABC VENDOR". A magnifying glass icon is on the right side of the input field. Below the input field is a blue "Cancel" button.

[< Vendor Management](#)

Assign Access



ABC VENDOR

● Active

Vendor • V123456

Permissions

Cancel

Review

2. You can review your permissions by selecting the *Review* box

Editing a Vendor

To edit an existing vendor:

1. Click on the toggle next to the vendor you wish to edit.
2. Select the *Edit Access* option.

The screenshot displays the 'Vendor Management' interface. At the top, there's a 'Your Vendors' tab. Below it, a search bar and a 'Status' filter dropdown are visible. A table lists three vendors: 'ABC Vendor' (ID: J010501), 'XYZ Vendor' (ID: V100359), and '123 Vendor' (ID: J051101). All are marked as 'Active'. A red arrow points to the toggle icon next to 'XYZ Vendor', which has opened a context menu with three options: 'Edit Access' (with a pencil icon), 'Suspend Access' (with a pause icon), and 'Remove' (with a trash icon). The 'Edit Access' option is highlighted.

Vendor Management

Your Vendors

Search Status

3 Vendors

Name ^	Vendor ID	Status
<input type="checkbox"/> ABC Vendor	J010501	● Active
<input type="checkbox"/> XYZ Vendor	V100359	● Active
<input type="checkbox"/> 123 Vendor	J051101	● Active

« Previous 1 Next »

- Edit Access
- Suspend Access
- Remove

Editing Permissions

You can edit any permissions by selecting *Edit*.

Permissions

Data Submissions

Chart Abstracted

Measure Access

Inpatient Quality Reporting (IQR)

None

Add

Outpatient Quality Reporting (OQR)

OQR (Edit/Upload) ⓘ

Edit

Web-Based Measures

Measure Access

Inpatient Quality Reporting (IQR)

None

Add

Outpatient Quality Reporting (OQR)

OQR (Edit/Upload) ⓘ

Edit

Choosing to Edit

If you wish to change any permission, select the *Edit* box.

✕ Close

Data Submissions - Chart Abstracted

Outpatient Quality Reporting (OQR)

By assigning OQR permissions, you are also assigning permission for File Accuracy (for the specified measure set only).

Measure Sets	Encounter Quarter	Submission Date	Permission Level	Actions
OQR-ED	Q2:04-01-2019 - Ongoing	12-03-2020 - Ongoing	Upload / Edit	Edit
OQR-AMI	Q3:07-01-2019 - Ongoing	12-03-2020 - Ongoing	Upload / Edit	Edit
OQR-STK	-	-	-	Add

Apply & Close Cancel

Edit Options

To edit permissions:

1. Choose *No Access* or *Upload/Edit*.
2. Choose the encounter quarters for this edit.
3. Select the submission date.
4. Confirm your changes.
5. Select *Apply & Close*.

Data Submissions - Chart Abstracted

Outpatient Quality Reporting (OQR)

By assigning OQR permissions, you are also assigning permission for File Accuracy (for the specified measure set only).

Measure Sets	Encounter Quarter	Submission Date	Permission Level	Actions
OQR-ED	Q2:04-01-2019 - Ongoing	12-03-2020 - Ongoing	Upload / Edit	<button>Edit</button>

Permissions

☒ No Access ☐ Upload / Edit

Encounter Quarters

* Start Quarter * Start Year to End Quarter End Year

☐ Do not include an end date

Submission Date

* Start Date to End Date

☐ Do not include an end date

Confirm Cancel

OQR-AMI	Q3:07-01-2019 - Ongoing	12-03-2020 - Ongoing	Upload / Edit	<button>Edit</button>
OQR-STK	-	-	-	<button>Add</button>

Apply & Close Cancel


Additional Editing Options

From the toggle, you can choose Suspend Access or Remove a vendor.


Vendor Management

Your Vendors








Search

Search 


Status


Filter By Status 


3 Vendors [Add Vendor](#)

Name ^	Vendor ID	Status	
 ABC Vendor	J010501	 Active	
 XYZ Vendor	V100359	 Active	
 123 Vendor	J051101	 Active	

« Previous **1** Next »

Edit Access 

Suspend Access 

Remove 

Results of the Options

With either option, you will have to confirm your selection.

[✕ Close](#)

Remove Vendor?

WARNING: Removing this Vendor will disable the Vendor in ALL of your programs. Please be certain this is your intent before removing the Vendor. Removing this Vendor will:

- Terminate all active permissions
- Remove them from Your Vendors list

You may re-add this vendor to Your Vendors list at any time. You may also remove a vendor from individual programs by manually removing their permissions.

[Remove Vendor](#) [Cancel](#)

[✕ Close](#)

Suspend Vendor Access?

Suspending Vendor ACADIA HEALTHCARE will:

- Pause all active permissions

You may resume access for this Vendor at any time.

[Suspend Vendor Access](#) [Cancel](#)



Managed File Transfer (MFT)

<https://qnetmft.cms.gov>

Secure Exchange

- Secure Exchange
 - Replaces Secure File Transfer (SFT) in *QualityNet*.
 - Manages file transfers.
 - Allows file sharing and secure email with a single interface.
 - Requires a HARP account to access.
- Hospitals will use Secure Exchange:
 - To submit Request for Reconsideration.
 - To access Preview Reports and Facility-Specific Reports (FSRs).
- For assistance, contact the *QualityNet* Help Desk at (866) 288-8912 or email: qnetsupport@hcqis.org.



Care Compare:

The New Public Reporting Site

<https://www.medicare.gov/care-compare/>



Care Compare

- Care Compare is a streamlined redesign of eight existing CMS compare tools on Medicare.gov at <https://www.medicare.gov/care-compare/>
 - Provides a single user-friendly interface
 - Simple design optimized for mobile and tablet use
 - Enhancements for mobile use will give benefits like accessing the tool using smartphone and initiating phone calls by a simple click

Additional improvements:

- Procedure Price Look Up (PPL)
 - Includes facility and physician fees
- Provider Data Catalog (PDC)
 - Provides detailed CMS data and interactive downloadable datasets

Home Page

<https://www.medicare.gov/care-compare/>









Enter the zip code or city of your facility.
Enter the provider type and the name of your facility.
Select *Search*.

Find & compare nursing homes, hospitals & other providers near you.

[Learn more about the types of providers listed here](#)

MY LOCATION	PROVIDER TYPE	NAME OF FACILITY (optional)	
<input type="text" value="Tampa, FL 33612"/>	<input style="background-color: #f0f0f0; border: 1px solid #ccc;" type="text" value="Hospitals"/>	<input type="text" value="ABC Hospital"/>	<input type="button" value="Search"/>

Or, select a provider type to learn more:

 Doctors & clinicians	 Hospitals	 Nursing homes including rehab services	 Home health services
 Hospice care	 Inpatient rehabilitation facilities	 Long-term care hospitals	 Dialysis facilities

Your Results

You can choose the data you wish to review by clicking on any of the options available.

RATINGS

Overall rating

★★★★☆

The overall rating is based on how well a hospital performs across different areas of quality, like treating heart attacks and pneumonia, readmission rates, and safety of care.

[Learn how Medicare calculates this rating](#)

View Rating Details

Patient survey rating

★★★★☆

The patient survey rating measures patients' experiences of their hospital care. Recently discharged patients were asked about important topics like how well nurses and doctors communicated, how responsive hospital staff were to their needs, and the cleanliness and quietness of the hospital environment.

[Learn how the patient survey rating is measured](#)

View Survey Details

QUALITY

Choose a category to see how this hospital scores on quality topics:

Timely & effective care	>
Complications & deaths	>
Unplanned hospital visits	>
Psychiatric unit services	>
Payment & value of care	>

Data Examples

Timely & effective care



These measures show how often or how quickly hospitals provide care that research shows gets the best results for patients with certain conditions, and how hospitals use outpatient medical imaging tests (like CT scans and MRIs). This information can help you compare which hospitals give recommended care most often as part of the overall care they provide to patients.

[Find out why these measures are important](#)

[Get more information about the data](#)

[Get current data collection period](#)

Sepsis care

Sepsis is a complication that occurs when your body has an extreme response to an infection. It causes damage to organs in the body and can... [Read more](#)

Percentage of patients who received appropriate care for severe sepsis and septic shock

↑ Higher percentages are better

84% [↗]

of 506 patients

National average: 60%

Florida average: 68%

Cataract surgery outcome

Cataracts affect your vision and are very common in older people. Cataracts can make your vision blurry and can impact your ability to see a... [Read more](#)

Percentage of patients who had cataract surgery and had improvement in visual function within 90 days following the surgery

↑ Higher percentages are better

Not available [↗]

National average: 99%

Florida average: 97%

Emergency department care

Timely and effective care in hospital emergency departments is essential for good patient outcomes. Delays before getting care in the emerg... [Read more](#)

Percentage of patients who left the emergency department before being seen

↓ Lower percentages are better

1%

of 94823 patients

National average: 2%

Florida average: 1%

Percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival

↑ Higher percentages are better

45%

of 11 patients

National average: 72% [↗]

Florida average: 73% [↗]

Emergency department volume

Very High

60,000+ patients annually

Average (median) time patients spent in the emergency department, after the doctor decided to admit them as an inpatient before leaving the emergency department for their inpatient room

↓ A lower number of minutes is better

72 minutes [↗]

Other Very High volume hospitals:

Nation: 134 minutes [↗]

Florida: 114 minutes [↗]

Number of included patients: 1366

Average (median) time patients spent in the emergency department before leaving from the visit

↓ A lower number of minutes is better

149 minutes

Other Very High volume hospitals:

Nation: 169 minutes [↗]

Florida: 150 minutes [↗]

Number of included patients: 1024

Volume legend (patients annually):

Low: 0 - 19,999

Medium: 20,000 - 39,999

High: 40,000 - 59,999

Very High: 60,000+

Summary

- Data is entered in the Data Submission tab in HQR.
- New options and enhancements are on the way.
 - Program Reporting will allow you to check your organizations program requirement status, availability of reports, and public reporting information.
 - Administration will have a streamlined Access Management Process to allow you to manage vendor status, SO and basic user access and status.
- Care Compare is the new redesigned compare tool which contain improvements and additional tools

Resources

- Today's presentation can be found on:
www.QualityReportingCenter.com
- For HQR login issues, contact *QualityNet* Support:
 - E-mail: qnetsupport@hcqis.org
 - Phone: 866.288.8912
- For program-related questions, call the support contractor help desk.
 - Phone: 866.800.8756



Thank You!

Continuing Education (CE)

This program has been approved for one CE credit for the following boards:

- **National credit**
 - Board of Registered Nursing (Provider #16578)
- **Florida-only credit**
 - Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
 - Board of Registered Nursing
 - Board of Nursing Home Administrators
 - Board of Dietetics and Nutrition Practice Council
 - Board of Pharmacy

Note: To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.

Disclaimer

This presentation was current at the time of publication and/or upload to the Quality Reporting Center or *QualityNet* websites. If Medicare policy, requirements, or guidance changes following the date of posting, this presentation will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials are provided as summary information. No material contained herein is intended to replace either written laws or regulations. In the event of any discrepancy between the information provided by the presentation and any information included in any Medicare rules and/or regulations, the rules or regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

Acronyms

ASC	Ambulatory Surgery Center	OP-29	Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
CE	Continuing Education	OP-31	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery
CMS	Centers for Medicare & Medicaid Services	OQR	Outpatient Quality Reporting
CSV	Comma-Separated Value	PDC	Provider Data Catalog
ED	Emergency Department	PPL	Procedure Price Look Up
FSR	Facility-Specific Report	Q	Quarter
HARP	HCQIS Access Roles and Profile	SFT	Secure File Transfer
HCQIS	Healthcare Quality Information System	SO	Security Official
HQR	Hospital Quality Reporting	VM	Vendor Management
MFT	Managed File Transfer		