

# The Hospital OQR Times Newsletter



Hospital Outpatient Quality Reporting Program

Issue: Spring 2023

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## Data Submission Deadlines

**Reminder!** The submission **deadline** for **Quarter 4 2022** reporting period (October 1—December 31, 2022) of **clinical data** into the Hospital Quality Reporting (HQR) system is **May 1, 2023, 11:59 p.m. Pacific Time (PT)**. Submission of Hospital OQR Program Population and Sampling data is voluntary.

The submission **deadline** for **CY 2022** reporting period (January 1—December 31, 2022) of **web-based measures** OP-22, OP-29, and OP-31 is due by **May 15, 2023 11:59 p.m. PT**. Submission of OP-31 data is voluntary.

The submission **deadline** for **Quarter 4 2022** reporting period (October 1—December 31, 2022) OP-38: **COVID-19 Vaccination Coverage Among Health Care Personnel (HCP)** measure data are due by **May 15, 2023, 11:59 p.m. PT** on the National Healthcare Safety Network (NHSN) website.

More information on data submission is on the Measure Deadlines and Tools page of the [Quality Reporting Center Measure Deadlines and Tools web page](#).

## Rural Emergency Hospital Quality Reporting Program

A new quality reporting program for a new Medicare provider type, Rural Emergency Hospitals (REHs), has been implemented by the Centers for Medicare & Medicaid Services (CMS).

The REH Quality Reporting (REHQR) Program seeks to gather and publicly report information on care provided by these hospitals so that such information is available to inform patient choice for choosing where to obtain care as well as toward improving quality and efficiency of care.

For CY 2023, Critical Access Hospitals (CAHs) and subsection (d) hospitals with not more than 50 beds located in a rural area are eligible to convert to an REH as of January 3, 2023. Once converted, the REH may receive the adjusted payment fee schedule.

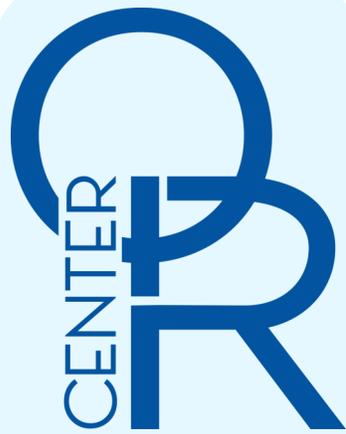
Additional information regarding the program and initial implementation can be found here: [CY 2023 Hospital Outpatient Prospective Payment System \(OPPS\)/Ambulatory Surgical Center \(ASC\) Payment System Final Rule](#)

## Public Reporting News

The next refresh for publicly reported OQR measure data on Care Compare and the Provider Data Catalog (PDC) is in April 2023! A listserv will be issued when the refreshed data is publicly available. The following data will display for this release:

- Chart-Abstracted measures OP-2, OP-3b, OP-18b, OP-18c, and OP-23 will display 3Q 2021 – 2Q 2022 data. Data for OP-18c this measure will be displayed on PDC only.
- Outpatient Imaging Efficiency (OIE) claims-based measures OP-8, OP-10, OP-39 and Other claims-based measures OP-32, OP-35, and OP-36 will not be refreshed in this release. Exception: OIE measure OP-13 will have recalculated data that was released in July 2022, displayed in April 2023.
- Web-based measures OP-22, OP-29, and OP-31 will not be refreshed in this release. These measures refresh annually in January.

The COVID-19 Vaccination Coverage Among HCP measure will display data for 2Q 2022.



The Outpatient Quality Reporting Program Support Team is available by calling **866-800-8756** weekdays from 7 a.m. to 6 p.m. ET.

You can also contact the OQR Program Support Team using the [QualityNet Q&A Tool](#), and choosing Program: **OQR – Outpatient Quality Reporting**.



## OP-40 ST-Elevation Myocardial Infarction (STEMI)

The new measure OP-40 was finalized in the [CY 2022 OP/ASC Final Rule](#) (beginning on page 63837) and is the first electronic clinical quality measure (eCQM) for the Hospital OQR Program. The eCQM is collected via the hospitals certified Office of the National Coordinator for Health Information Technology (ONC) EHR/Health IT system and data is submitted through the HQR system.

OP-40 captures the percentage of emergency department (ED) encounters for patients 18 years and older with a diagnosis of a STEMI that received appropriate treatment, which is defined as either fibrinolytic therapy within 30 minutes of ED arrival, percutaneous coronary intervention (PCI) within 90 minutes of ED arrival, or transfer within 45 minutes of ED arrival.

Submission into the HQR system of any Quarters of OP-40 data is voluntary for CY 2023 Reporting Period/CY 2025 Payment Determination. Mandatory reporting begins with CY 2024 Reporting Period/CY 2026 Payment Determination, utilizing an incremental approach to implementing the measure, allowing hospitals time to implement workflow changes to better prepare for submitting data.

Reporting Period / Payment Determination Year	Number of Self-selected Quarters Required to Submit
CY 2024/CY 2026	One Quarter of Data
CY 2025/CY 2027	Two Quarters of Data
CY 2026/CY 2028	Three Quarters of Data
CY 2027/CY 2029	Four Quarters of Data

**Visit** the official Electronic Clinical Quality Improvement (eCQI) website for additional [specifications, data elements, and value sets for OP-40](#).

**Get Started** with [eCQMs](#).

## Program Support

To find additional information, tools, and resources—such as the data submission checklist to meet Hospital OQR Program deadlines—visit [QualityNet.cms.gov](https://www.qualitynet.org/qualitynet.cms.gov).

More tools and resources can be found on [QualityReportingCenter.com](https://www.qualityreportingcenter.com). You can also view past webinars by visiting the QRC’s [Archived Events](#) page.