Outpatient Quality Program Systems and Stakeholder Support Team

Springtime Refresh:
Exploring the Specifications Manual
and Other Important Resources

Questions & Answers

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Subject-matter experts answered the following questions during and after the live webinar. Questions and answers may have been edited for grammar.

Outpatient Quality Program Systems and Stakeholder Support Team

Question 1:   **When will the validation summary and detail reports for the Hospital Outpatient Quality Reporting (OQR) Program from previous quarters be available in Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP)?**

You will need to contact the validation team for information on validation. Contact information should have been provided with record request.

Question 2:   **When will the outpatient validation scores for Quarter (Q)1 2020 and Q2 2020 be ready?**

You will need to contact the validation team for information on validation scores. The contact information should have been provided with the record request.

Question 3:   **Will CMS make OP-31 a required measure?**

Currently, OP-31 remains voluntary. Any changes to the program or the measures will go through the rulemaking process. The proposed rule will likely be published in July.

Question 4:   **If we only submit six months of data for OP-22, will the denominator be used to determine the annual Emergency Department Volume (EDV) category?**

The data you submit as the denominator for the OP-22 measure will be used to calculate your EDV categories (low, medium, high, very high) on Care Compare.

Question 5:   **If we are not reporting data for OP-31, do we leave it blank or do we enter zeros?**

Either option is acceptable. You can either leave OP-31 unanswered or click "Please enter zeros for this measure as I have no data to submit." If you select this box, the system will enter zeros for this measure.

Question 6: **The calendar on *QualityNet* states Clinical Submission is due May 17 for Q4 2020. This presentation states it is due May 3. Which is correct?**

The document posted on *QualityNet* indicates the Q4 2020 submission deadline as May 3, 2021. It also states the web-based measures submitted via the online submission tool have a submission deadline of May 17, 2021.

Question 7: **Are data for the outcome measures from submitted claims?**

Yes, for the outcome measures, CMS obtains data from paid Medicare claims and administrative enrollment for cases that meet the measure criteria.

Question 8: **For OP-29, if you sample and a case which ends up meeting exclusion criteria after abstraction, does that case count toward your minimum sample or do you need to then abstract additional cases until your denominator meets the minimum sample size?**

Your sample size is determined by the total population. Your total population is all cases that met the denominator criteria (including the inclusions and exclusions listed in the Specifications Manual). Once you obtain the population, you will refer to the Table 4 in the Specifications Manual. Table 4 states that for 0–900 cases, your minimum sample size is 63. For 901 or more cases, your minimum sample size will be 96. If somehow a case that didn't meet the denominator criteria was pulled into the population and subsequently into the sample, you may need to pull another case(s) until your sample size meets the guidelines of 63 or 96 cases, depending on population size.

Question 9: **When will the next update be for the Look Up Tools on Quality Reporting Center? The last update was March 29.**

For the OP-32, OP-35, and OP-36 measures, the Look Up Tool was last updated on April 14, 2021. For the web-based measures, the tool was last updated on April 26, 2021.

Question 10: **If population and sampling is voluntary for the Hospital OQR Program, do we upload files for OP-29?**

The population and sampling aspect for the clinical data reported quarterly is voluntary for this program. The OP-29 measure is a web-based measure reported annually via the online submission tool and is required to meet the program requirements. You are only required to enter a denominator and numerator for the web-based measures. Population and sampling is also voluntary for web-based measures.

Question 11: **Is the COVID-19 exception applicable to the outcome measures for the encounter dates of January 1 through June 30, 2020?**

Yes, the exception applies to the outcome measures (OP-32, OP-35, and OP-36) for encounter dates from January 1 through June 30, 2020.

Question 12: **Will you have a webinar on how to enter the data in the new Hospital Quality Reporting (HQR) system?**

In February, we presented a webinar to demonstrate the step-by-step process of entering your data into the HQR system. You can access that at https://www.qualityreportingcenter.com/en/hospital-oqr-program/2021/oqr-02242021/.

Question 13: **Is data submission for OP-29 for encounters January through June optional? In HQR, when entering data for this measure, it still shows inclusion for the entire calendar year.**

Correct on both comments. The reporting period is from January 1 through December 31, 2020. However, the COVID-19 exception offered by CMS provided an exception for encounters from January 1 through June 30, 2020. You can submit data for those months voluntarily.