



Outpatient Quality Program Systems and Stakeholder Support Team

Laying the Foundation to Transform Quality Reporting: Discussing the CY 2023 Hospital OPps/ASC Payment System Final Rule Question and Answer Summary Document

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Subject-matter experts researched and answered the following questions during the live webinar. The questions and responses may have been edited for clarification and grammar.



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Question 1: If a Critical Access Hospital (CAH) changes to a Rural Emergency Hospital (REH), can they change back to a CAH?

Yes, REHs can convert back to a CAH or rural hospital. At that time, CMS would consider the CAH or rural hospital as a new CAH or rural hospital, and the facility would lose any “grandfathered” privileges it received. For example, if CMS grandfathered in a CAH as a necessary provider and that CAH converts to an REH, that REH would lose its necessary provider designation. The REH may not regain that designation if it reverts back to a CAH. Facilities would follow the existing enrollment and certification procedures for the initial certification of the elected provider type, including the completion of a new CMS-855A and payment of any applicable fees.

Question 2: Is the Hospital Outpatient Quality Reporting (OQR) Program adding OP-26: Hospital Outpatient Volume on Selected Outpatient Surgical Procedures measure?

During the calendar year (CY) 2023 rulemaking cycle, CMS put forth a Request For Comment (RFC) on the potential future implementation of OP-26 or another volume indicator. CMS will use this feedback for future decision making. If CMS adopted OP-26 or another volume indicator into the Hospital OQR Program, it would follow the rulemaking process.

Question 3: Is submitting data for the OP-37 measure voluntary?

Reporting for the OP-37a–e: Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) survey measure is voluntary for the CY 2023 reporting period. Mandatory reporting begins with the CY 2024 reporting period for the CY 2026 annual payment determination. Detailed information on this measure can be found at <https://oascahps.org/Data-Submission/Data-Submission-Deadlines>.

Question 4: Can you share the date of the January *Care Compare* refresh?

The January refresh went live January 26, 2023. A notification was sent announcing this refresh.



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Question 5: When will we start submitting data for the OP-40 measure?

Voluntary reporting for the OP-40: ST-Segment Elevation Myocardial Infarction (STEMI) electronic clinical quality measure (eCQM) begins with the voluntary reporting for the CY 2023 reporting period for the CY 2025 payment year and a May 15, 2024, submission deadline. Mandatory reporting begins the following year, CY 2023 reporting period for the CY 2026 payment year. Submission of one quarter of data is mandatory. Facilities will gradually work up to submitting a full calendar year of data by the CY 2027 reporting period for the CY 2029 payment year. See the final rule for additional details ([FR 87 71748](#)).