## Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR

Cardiac Care (Acute Myocardial Infarction and Chest Pain)	Implementation*
<b>OP-2:</b> Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival	2008
<b>OP-3:</b> Median Time to Transfer to Another Facility for Acute Coronary Intervention	2008
ED-Throughput	Implementation*
<b>OP-18:</b> Median Time from ED Arrival to ED Departure for Discharged ED Patients	2012
OP-22: Left Without Being Seen	2012
Stroke	Implementation*
<b>OP-23:</b> Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 minutes of ED Arrival	2012
Imaging Efficiency	Implementation*
<b>OP-8:</b> MRI Lumbar Spine for Low Back Pain	2008
<b>OP-10:</b> Abdomen CT–Use of Contrast Material	2008
OP-13: Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac, Low-Risk Surgery	2013
Submitted Via a Web-Based Tool	Implementation*
OP-29: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients	2014
OP-30: Colonoscopy Interval for Patients with a History of Adenomatous Polyps-Avoidance of Inappropriate Use	2014
OP-31: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery**	2015
OP-33: External Beam Radiotherapy for Bone Metastases	2016
Outcome Claims-Based	Implementation*
OP-32: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	2016
OP-35: Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy	2020
<b>OP-36</b> : Hospital Visits after Hospital Outpatient Surgery	2020

\*The implementation date indicates the beginning of initial data collection for this measure.

\*\*Hospitals may voluntarily submit data but will not be subject to a payment reduction with respect to this measure during the voluntary reporting period.

Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR						
Cardiac Care (AMI) Measures						
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request, Approximate (Records Due 45 Days After Request)	Public Reporting Quarters	Hospital Compare Release, Approximate
OP-2: Fibrinolytic Therapy Received Within 30 Minutes of			Q1 2019	September 2019	Q3 2019–Q2 2020	April 2020
<b>ED Arrival</b> Emergency Department acute	Q2 2019	11/01/2019	Q2 2019	December 2019	Q4 2019–Q3 2020	July 2020
myocardial infarction (AMI) patients with ST-segment	Q3 2019	02/01/2020	Q3 2019	March 2020	Q1 2020–Q4 2021	October 2020
elevation on the ECG closest to arrival time receiving fibrinolytic therapy during the ED stay and	Q4 2019	05/01/2020	Q4 2019	June 2020	Q2 2020–Q1 2020	January 2021
having a time from ED arrival to fibrinolysis of 30 minutes or less.	Q1 2020	08/01/2020				

	(	Cardiac Care (AM	l) Measures			
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request, Approximate (Records Due 45 Days After Request)	Public Reporting Quarters	Hospital Compare Release, Approximate
OP-3a: Median Time to Transfer to Another Facility for Acute Coronary			Q1 2019	September 2019	Not Publicly Reported (NPR)	N/A
Intervention–Overall Rate This rate looks at all AMI patients who were transferred out for acute coronary	Q2 2019	11/01/2019	Q2 2019	December 2019	NPR	N/A
intervention at another facility. It calculates the time from the patient arrival to patient departure. OP-3a is the rate for <i>all</i> cases transferred for acute coronary intervention (OP-3b +	Q3 2019	02/01/2020	Q3 2019	March 2020	NPR	N/A
	Q4 2019	05/01/2020	Q4 2019	June 2020	NPR	N/A
3c). OP-3a <i>is not</i> publicly reported.	Q1 2020	08/01/2020				
OP-3b: Median Time to Transfer to Another Facility for Acute Coronary			Q1 2019	September 2019	Q3 2018–Q2 2019	April 2020
Intervention–Reporting Measure This rate looks at all AMI patients who	Q2 2019	11/01/2019	Q2 2019	December 2019	Q4 2018–Q3 2019	July 2020
were transferred out for acute coronary intervention at another facility and <i>did</i>	Q3 2019	02/01/2020	Q3 2019	March 2020	Q1 2019–Q4 2019	October 2020
<i>not</i> have a contraindication to fibrinolytics. OP-3b <i>is</i> publicly	Q4 2019	05/01/2020	Q4 2019	June 2020	Q2 2019–Q1 2020	January 2021
reported.	Q1 2020	08/01/2020				
OP-3c: Median Time to Transfer to Another Facility for Acute Coronary			Q1 2019	September 2019	NPR	N/A
Intervention–Quality Improvement Measure	Q2 2019	11/01/2019	Q2 2019	December 2019	NPR	N/A
This rate looks at all AMI patients who were transferred out for acute coronary	Q3 2019	02/01/2020	Q3 2019	March 2020	NPR	N/A
intervention at another facility and <i>did</i> have a contraindication to fibrinolytics.	Q4 2019	05/01/2020	Q4 2019	June 2020	NPR	N/A
OP-3c <i>is not</i> publicly reported.	Q1 2020	08/01/2020				

Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR						
ED-Throughput Measures						
Measure Name and Description	Chart- Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request, Approximate (Records Due 45 Days After Request)	Public Reporting Quarters	Hospital Compare Release, Approximate
OP-18a: Median Time from ED Arrival to ED Departure for			Q1 2019	September 2019	NPR	N/A
<b>Discharged ED Patients–Overall</b> <b>Rate.</b> Median time from emergency	Q2 2019	11/01/2019	Q2 2019	December 2019	NPR	N/A
department arrival to time of departure from the emergency room	Q3 2019	02/01/2020	Q3 2019	March 2020	NPR	N/A
for patients discharged from the emergency department. OP-18a <i>is</i>	Q42019	05/01/2020	Q4 2019	June 2020	NPR	N/A
<i>not</i> publicly reported.	Q1 2019	08/01/2020				
OP-18b: Median Time from ED Arrival to ED Departure for			Q1 2019	September 2019	Q3 2018–Q2 2019	April 2020
Discharged ED Patients– Reporting Measure. OP-18b is publicly reported.	Q2 2019	11/01/2019	Q2 2019	December 2019	Q4 2018–Q3 2019	July 2020
	Q3 2019	02/01/2020	Q3 2019	March 2020	Q1 2019–Q4 2019	October 2020
	Q42019	05/01/2020	Q4 2019	June 2020	Q2 2019–Q1 2020	January 2021
	Q1 2019	08/01/2020				

Measures and Timelir	Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR						
ED-Throughput Measures							
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request, Approximate (Records Due 45 Days After Request)	Public Reporting Quarters	Hospital Compare Release, Approximate	
OP-18c: Median Time from ED Arrival to ED Departure for			Q1 2019	September 2019	Q3 2018–Q2 2019	*	
Discharged ED Patients– Psychiatric/Mental Health	Q2 2019	11/01/2019	Q2 2019	December 2019	Q4 2018–Q3 2019	*	
Patients OP-18c is publicly	Q3 2019	02/01/2020	Q3 2019	March 2020	Q1 2019–Q4 2019	*	
available*	Q4 2019	05/01/2020	Q4 2019	June 2020	Q2 2019–Q1 2020	*	
	Q1 2020	08/01/2020					
OP-18d: Median Time from ED Arrival to ED Departure for			Q1 2019	September 2019	NPR	N/A	
Discharged ED Patients–Transfer Patients OP-18d <i>is not</i> publicly	Q2 2019	11/01/2019	Q2 2019	December 2019	NPR	N/A	
reported.	Q3 2019	02/01/2020	Q3 2019	March 2020	NPR	N/A	
	Q4 2019	05/01/2020	Q4 2019	June 2020	NPR	N/A	
	Q1 2020	08/01/2020					

\*OP-18c measure data displayed on preview reports will be available through the download process at data.medicare.gov and excluded from display on Hospital Compare.

Measures and Timeline	Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR						
ED-Throughput Measures							
Measure Name and Description	Reporting Period	Submission Period	Hospital Compare Quarters	Hospital Compare Release, Approximate			
<b>OP-22: Left Without Being Seen*</b> Percent of patients who leave the Emergency Department (ED) without being evaluated by a physician/advanced practice nurse/physician's assistant (physician/APN/PA).	January 1–December 31, 2019	January 1–May 15, 2020	CY 2019	January 2021			

\*OP-22 is a chart-abstracted measure reported via a web-based tool in the secure portion of QualityNet.

Hospital OQR Quality Measures and Timelines for the CY 2021 Payment Determination							
Stroke Measure							
Measure Name and Description	Chart-Abstracted Clinical Data Quarters Required	Clinical Data and Population and Sampling Due in OPPS Clinical Warehouse	Record Validation Quarter	Record Validation Request, Approximate (Records Due 45 Days After Request)	Public Reporting Quarters	Hospital Compare Release, Approximate	
OP-23: Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI			Q1 2019	September 2019	Q3 2018–Q2 2019	April 2020	
Scan Interpretation Within 45 minutes of ED Arrival	Q2 2019	11/01/2019	Q2 2019	December 2019	Q4 2018–Q3 2019	July 2020	
Emergency Department Acute Ischemic Stroke or Hemorrhagic Stroke patients who arrive at the ED within 2 hours of the onset of	Q3 2019	02/01/2020	Q3 2019	March 2020	Q1 2019–Q4 2019	October 2020	
symptoms who have a head CT or MRI scan performed during the stay and having a time from ED arrival	Q4 2019	05/01/2020	Q4 2019	June 2020	Q2 2019–Q1 2020	January 2021	
to interpretation of the head CT or MRI scan within 45 minutes of arrival.	Q1 2020	08/01/2020					

## Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR

Imaging Efficiency Measures (No additional data are required for the imaging measures.)							
Measure Name and Description	Reporting Period	Hospital Compare Quarters	Hospital Compare Release, Approximate				
<b>OP-8: MRI Lumbar Spine for Low Back Pain</b> The percentage of MRI (Magnetic Resonance Imaging) of the Lumbar Spine studies with a diagnosis of low back pain on the imaging claim and for which the patient did not have prior claims- based evidence of antecedent conservative therapy.	July 1, 2018–June 30, 2019	Q3 2018–Q2 2019	July 2020				
<b>OP-10: Abdomen CT–Use of Contrast Material</b> The percentage of abdomen studies that are performed with and without contrast out of all abdomen studies performed (those with contrast, those without contrast, and those with both). The measure is calculated based on a one-year window of claims data.	July 1, 2018–June 30, 2019	Q3 2018–Q2 2019	July 2020				
<b>OP-13: Cardiac Imaging for Preoperative Risk Assessment for</b> <b>Non Cardiac, Low Risk Surgery</b> The percentage of Stress Echocardiography, Single Photon Emission Computed Tomography, Myocardial Perfusion Imaging (SPECT MPI) or Stress Magnetic Resonance Imaging (MRI) studies performed at a hospital outpatient facility in the 30 days prior to a low-risk, non-cardiac surgery performed anywhere.	July 1, 2018–June 30, 2019	Q3 2018–Q2 2019	July 2020				

## Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR

Measures Submitted Via a Web-Based Tool						
Measure Name and Description	Reporting Period	Submission Period	Hospital Compare Quarters	Hospital Compare Release, Approximate		
<b>OP-29: Appropriate Follow-Up Interval for Normal</b> <b>Colonoscopy in Average Risk Patients</b> The percentage of patients aged 50 to 75 years of age receiving a screening colonoscopy without biopsy or polypectomy who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report.	January 1–December 31, 2019	January 1–May 15, 2020	CY 2019	January 2021		

\*For HCPCS codes affected, see <u>QualityNet</u>.

Measures Submitted Via a Web-Based Tool							
Measure Name and Description	Reporting Period	Submission Period	Hospital Compare Quarters	Hospital Compare Release, Approximate			
<b>OP-30:</b> Colonoscopy Interval for Patients with a History of Adenomatous Polyps–Avoidance of Inappropriate Use The percentage of patients aged 18 years and older receiving a surveillance colonoscopy, with a history of a prior colonic polyp(s) in previous colonoscopy findings, who had a follow- up interval of 3 or more years since their last colonoscopy.	January 1–December 31, 2019	January 1–May 15, 2020	CY 2019	January 2021			
<b>OP-31: Cataracts: Improvements in Patient's Visual</b> <b>Function within 90 Days Following Cataract Surgery*</b> The percentage of patients aged 18 years and older who had cataract surgery and had improvement in visual function achieved within 90 days following the cataract surgery.	January 1–December 31, 2019	January 1–May 15, 2020*	CY 2019	January 2021			
<b>OP-33: External Beam Radiotherapy for Bone Metastases</b> The percentage of patients, regardless of age, with a diagnosis of painful bone metastases and no history of previous radiation who receive external beam radiation therapy (EBRT) with an acceptable fractionation scheme.	January 1–December 31, 2019	January 1–May 15, 2020	CY 2019	January 2021			

\*Hospitals may voluntarily submit data but will not be subject to a payment reduction with respect to this measure during the voluntary reporting period.

Measures and Timelines for the Calendar Year (CY) 2021 Payment Determination: Hospital OQR						
Outcome Claims-Based Measures (No additional data are required for the outcome claims-based measures.)						
Measure Name and DescriptionReporting PeriodHospital Compare QuartersHospital Compare Release, Approximate						
<b>OP-32: Facility 7-Day Risk-Standardized Hospital Visit</b> <b>Rate after Outpatient Colonoscopy</b> Estimates a facility-level rate of risk-standardized, all-cause, unplanned hospital visits within 7 days of an outpatient colonoscopy among Medicare fee-for-service (FFS) patients aged 65 years and older.	January 1, 2017–December 31, 2019	CY 2017-CY 2019	January 2021			
<b>OP-35: Admissions and Emergency Department (ED) Visits</b> <b>for Patients Receiving Outpatient Chemotherapy</b> Estimates hospital-level, risk-adjusted rates of inpatient admissions or ED visits for cancer patients ≥18 years of age for at least one of the following diagnoses—anemia, dehydration, diarrhea, emesis, fever, nausea, neutropenia, pain, pneumonia, or sepsis—within 30 days of hospital-based outpatient chemotherapy treatment.	January 1–December 31, 2019	CY 2019	January 2021			
<b>OP-36: Hospital Visits after Hospital Outpatient Surgery</b> Facility-level, post-surgical risk-standardized hospital visit ratio (RSHVR) of the predicted to expected number of all-cause, unplanned hospital visits within 7 days of a same-day surgery at a hospital outpatient department (HOPD) among Medicare fee- for-service (FFS) patients aged 65 years and older.	January 1–December 31, 2019	CY 2019	January 2021			