

Hospital Outpatient Quality Reporting Program Newsletter



Issue: Winter 2025

Hospital Outpatient Quality Reporting (OQR) Program

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The Outpatient Quality Reporting Support Team is available by calling **866-800-8756** weekdays from 7 a.m. to 6 p.m. ET or online using the [QualityNet Q&A Tool](#).

Data Submission Deadlines

Reminder!

The **submission deadline** for reporting **Quarter (Q) 3 2024** (July 1–September 30, 2024) *Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)* survey data in the [Hospital Quality Reporting \(HQR\)](#) system is **January 8, 2025, 11:59 p.m. Pacific Time (PT)**. Hospitals can confirm OAS CAHPS submissions by contacting their Centers for Medicare & Medicaid Services (CMS)-approved survey vendor or by reviewing the quarterly Submission Requirements Report in [HQR](#).

The **submission deadline** for reporting **Q3 2024** (July 1–September 30, 2024) clinical data for *OP-18: Median Time from Emergency Department (ED) Arrival to ED Departure for Discharged ED Patients* and *OP-23: 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* in the [HQR](#) system is **February 3, 2025, 11:59 p.m. PT**. Submission of Hospital OQR Program Population and Sampling data is voluntary.

The **submission deadline** for reporting **Q3 2024** (July 1–September 3, 2024) for *OP-38: COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP)* in the [National Healthcare Safety Network \(NHSN\)](#) system is **February 18, 2025, 11:59 p.m. PT**.

To find more information on data submission, visit the [QualityNet website](#).

Don't Miss It

Join us for the **Calendar Year (CY) 2025 Outpatient Prospective System (OPPS)/Ambulatory Surgical Center (ASC) Payment System Final Rule webinar** on January 8, 2025. All program webinars are available on the [Quality Reporting Center website](#). You can access the final rule in the [Federal Register](#).

Public Reporting News

The next release for publicly reported Hospital OQR Program measure data on [Compare Tool on Medicare.gov](#).

occurs in January 2025. The following data will refresh for this release:

- **Web-based measures (HQR):** *OP-22: Left Without Being Seen*, *OP-29: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients*, and *OP-31: Cataracts – Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery* (voluntary) will display data for the **CY 2023** reporting period (January 1–December 31, 2023).
- **Web-based measure (NHSN):** *OP-38: COVID-19 Vaccination Coverage Among HCP* measure will display data for the **Q1 2024** reporting period (January 1 – March 31, 2024).
- **Outcome claims-based measures:** *OP-35: Admissions and ED Visits for Patients Receiving Outpatient Chemotherapy* and *OP-36: Risk-standardized Hospital Visits Within 7 Days After*

Hospital Outpatient Surgery will display data for the **CY 2023** reporting period (January 1–December 31, 2023). *OP-32: Facility 7-Day Risk-standardized Hospital Visit Rate after Outpatient Colonoscopy* will display data for the **Q1 2021–Q4 2023** reporting period (January 1, 2021 – December 31, 2023).

- **Chart-abstracted measures:** *OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients* and *OP-23: 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* will display data for the **Q2 2023–Q1 2024** reporting period (April 1, 2023–March 31, 2024).

To find more information on public reporting, visit the [QualityNet website](#).

Measure Spotlight: Health Equity Measures

CMS is committed to advancing health outcomes through quality reporting programs. Adoption of health equity quality measures will support CMS' [National Quality Strategy](#) goal of advancing whole-person care by employing a uniform approach for gathering, reporting, and analyzing health equity data across CMS quality programs, including the Hospital OQR Program.

In the CY 2025 OP/ASC Payment System Final Rule, CMS finalized the addition of three health equity measures:

- **Hospital Commitment to Health Equity Measure**
 - This measure assesses hospital commitment to health equity using a suite of equity-focused organizational competencies aimed at achieving health equity for racial and ethnic minority groups, people with disabilities, members of the lesbian, gay, bisexual, transgender, queer, intersex, asexual community, individuals with limited English proficiency, rural populations, religious minorities, and people living near or below poverty level.
 - The measure consist of five attestation-based domains. Hospitals will receive one point for attesting affirmatively to all elements within each of the five domains, for a total of five points.
 - Mandatory reporting begins with the CY 2025 reporting period/CY 2027 payment determination.
- **Screening for Social Drivers of Health (SDOH) Measure**
 - This measure assesses the total number of patients, who were 18 years or older on the date of service, screened for health-related social needs (specifically, food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety) during their outpatient episode of care.
 - Voluntary for the CY 2025 reporting period. Mandatory beginning with the CY 2026 reporting period/CY 2028 payment determination.
- **Screen Positive Rate for SDOH Measure**
 - This measure provides information on the percent of patients receiving care at an outpatient facility who are 18 years or older on the date of admission, were screened for the five health-related social needs listed above, and who screened positive for one or more of the five health-related social needs (reported as five separate rates).
 - Voluntary for the CY 2025 reporting period. Mandatory beginning with the CY 2026 reporting period/CY 2028 payment determination.

To find more information on measure specifications, visit the [QualityNet website](#).

Program Support

To find additional information, tools, and resources – such as the data submission checklist to meet Hospital OQR Program deadlines – visit the “Participation” section of the Hospital OQR Program [QualityNet website](#). Additional tools and resources, including webinars, are also on the [Quality Reporting Center website](#).