

Guide to Successful Reporting in the Rural Emergency Hospital Quality Reporting (REHQR) Program

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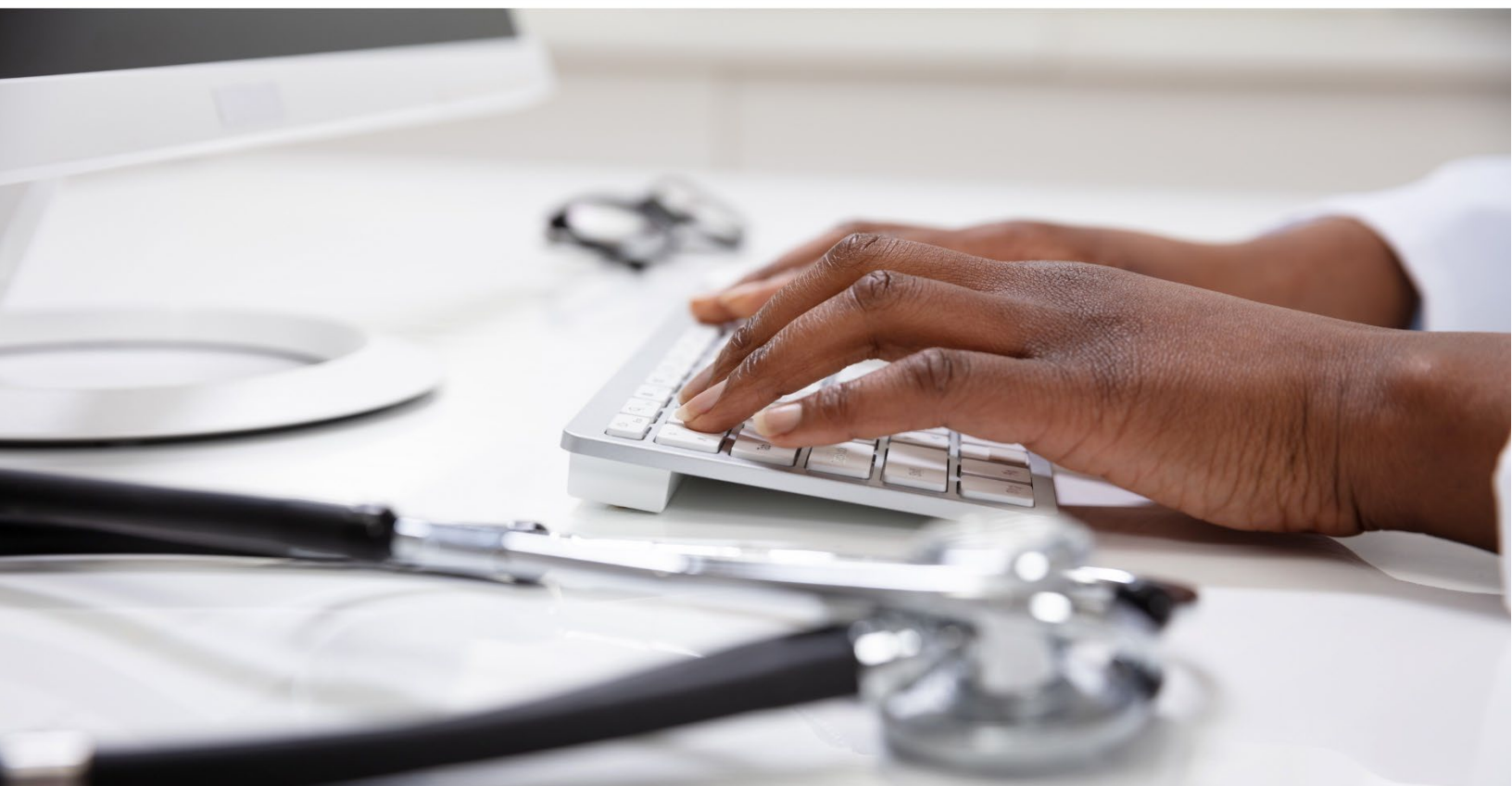


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REHQR Program

Welcome to this guide for successful reporting under the Centers for Medicare & Medicaid Services (CMS) Rural Emergency Hospital Quality Reporting (REHQR) Program!

CMS has established quality data reporting requirements for rural emergency hospitals (REHs) in accordance with the [Consolidated Appropriations Act of 2021](#).

As part of the administrative requirements of the REHQR Program, an REH must have a data submission account with CMS' Hospital Quality Reporting (HQR) system and designate a Security Official (SO) to oversee that account. If a Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) account already exists for a user of the REH, this existing account may be used; however, a new SO or Basic User must be established under the hospital's new REH CMS Certification Number (CCN). This initial REHQR Program requirement was finalized in the [CY 2023 OPPS/Ambulatory Surgical Center \(ASC\) final rule](#).

Quality measure information collected through the REHQR Program will be publicly reported in accordance with CMS minimum case thresholds and [statutory requirements](#).

REHs Newly Designated as Open

Administrative requirements apply to all REHs designated as operating in the CMS Internet Quality Improvement Evaluation System (iQIES), Medicare's database for survey and certification purposes. An REH must begin submitting data to the REHQR Program on the first day of the quarter following the date the hospital was designated as converted to an REH. For example, if an REH is designated as newly operating in Quarter 1 2026, the REH would begin collecting and submitting data in Quarter 2 2026 for the CY 2028 program determination. The REHQR Program measure set for the CY 2028 program determination is located in the Reporting Deadlines section of this guide.

More information regarding the program, reporting thresholds, and implementation is available in the [CY 2026 Hospital OPPS/ ASC Payment System final rule](#).

Hospitals should contact the Outpatient Quality Reporting Support Team with questions regarding data and for technical support at **866.800.8756** or through the [QualityNet Question and Answer Tool](#).

REHQR Program Checklist

Participation

Once a hospital has converted to REH status it is considered participating in the REHQR Program. The REHs must have or [create a HARP account](#) if they have not previously done so in order to submit data to meet program requirements for participation.

Account Registration

- Register for a **Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) account** to report measure data submitted via the HQR system.
 - Identify a **Security Official (SO)** for reporting in the secure HQR system. More information regarding the roles, responsibilities, and registration for SOs can be found in the *Hospital Quality Reporting (HQR) Registration* section of this guide.
 - Log into your HQR account **every 60 days** to keep it active.

Data Submission

- Data submissions must be timely, complete, and accurate. A complete submission is determined based on whether submitted data, as applicable per measure specifications:
 - Corresponds to both the aggregate number of patient encounters submitted by an REH; or
 - Satisfies the sampling criteria published and maintained in the REHQR **Specifications Manual** (found on the [QualityNet website](#)).
- REHs must collect chart-abstracted clinical data for each quarter and submit these data by the deadline.
 - For the CY 2028 program determination, the applicable patient encounter quarters for chart-abstracted data are as follows:

Reporting Period	Submission Deadline
Q1 2026 (January 1–March 31)	Aug 3, 2026
Q2 2026 (April 1–June 30)	Nov 2, 2026
Q3 2026 (July 1–September 30)	Feb 1, 2027
Q4 2026 (October 1–December 31)	May 3, 2027

Note: Data submission deadlines on a federal holiday or weekend (Saturday/Sunday) will default to the first business day thereafter and are reflected in this document where applicable.

- Data for claims-based measures (see page 10) are derived from an REH's paid Medicare Fee-for-Service (FFS) claims; no additional data submission is required from REHs for these measures.

Data Reporting and Submission Details

Details on REHQR Measures

Data submitted under the REHQR Program can be made publicly available after REHs have had an opportunity to preview their data. CMS will announce the preview period timeframes on a CMS-designated website, such as QualityNet, or on applicable listservs.

Quality measures applicable for a program determination can be found in the Measures section of the REH page on the [QualityNet website](#). Specifically:

1. Select the **Rural Emergency Hospitals** program option.
2. Select **Measures** from the navigation bar at the top of the page.
3. Select the **Rural Emergency Hospital Quality Reporting Program Measures** option.
4. Select **Learn More**.

Details on Data Submission

Clinical data submission is accomplished by using one of two methods in the HQR system: the Data Form option in HQR [formerly the CMS Abstraction & Reporting Tool (CART)] data form or via third-party vendors.

- The HQR system is the only CMS-approved method for the electronic transmission of private data between healthcare providers and CMS for the purposes of the REHQR Program.
- Information on submitting clinical data directly into HQR's Data Form Option is available by viewing [this video](#).

All files and data exchanged with CMS via the HQR system are encrypted during transmission and are stored in an encrypted format. The HQR system meets all current Health Insurance Portability and Accountability Act (HIPAA) requirements for information transfer

- Data are stored in the Clinical Warehouse.
 - Cases in the Clinical Warehouse may be updated until the data submission deadline each quarter. After the deadline, no further updates are accepted for cases in that quarter.
- Third-party vendors can meet the specifications for measure data transmission (XML file format) via the HQR system. SOs can access the online authorization process from the HQR system to authorize a third-party vendor to submit data on an REH's behalf. Vendor authorizations remain in effect until the REH modifies the authorization.
 - REHs using the HQR Data Form option will not need to complete a vendor authorization form to report data.
 - Additional details on vendor authorization can be found on page 6.

Data Submission Sampling Requirements

Hospitals must submit complete data regarding the quality measures in accordance with the sampling requirements described in the appropriate version of the **Specifications Manual** located on the [QualityNet website](#).

Aggregate Population and Sampling Data Submission

Population and Sampling is **voluntary** for the REHQR Program, even if reporting data for a measure is required. If an REH chooses to report aggregate population and sample size counts for Medicare and non-Medicare outpatient encounters for REHQR [clinical data](#) measures, these data must be submitted to CMS via the HQR system on the same quarterly submission schedule as chart-abstracted measures.

Access Management (AM) and Vendor Management (VM)

AM is a process for granting user access requests for both Basic Users and SOs. VM is a process for managing vendors directly within the HQR system.

To register as a Basic User or SO, follow the steps below:

1. Log into the [HQR system](#) with your HARP¹ User ID and password.
2. Select **Administration** and then **Access Management**.
3. Select **Add User** (to add a user), then select **Security Official** or **Basic User** when prompted.
4. Select the required permissions and select **Submit Request**.

You will be **notified by email** when your request has been **approved**.

Note: If a hospital has a pre-existing HQR account, access must be requested to the new hospital's REH CMS Certification Number (CCN) for REHQR Program use.

To begin managing your vendors, follow the steps below:

1. Log into the [HQR system](#) with your HARP User ID and password.
2. Go to **Administration** and then **Vendor Management**.
3. On the **Vendor Management** page, you can add, search, or filter your vendor(s).

For questions regarding Vendor Management, contact the Center for Clinical Standards and Quality (CCSQ) Service Desk at 866.288.8912 or qnetsupport@cms.hhs.gov.

¹ If you do not have a HARP account, one can be created at harp.cms.gov.

Additional Information

Extraordinary Circumstances Exceptions (ECE) Process

If an REH is unable to submit data or access medical records due to an extraordinary circumstance, such as a natural disaster, the REH may request an ECE. REHs will need to complete the ECE request form on the [QualityNet website](#) and submit the form with any supporting documentation within 60 days of the date of the extraordinary circumstance. An ECE could take the form of an exception or an extension of time to comply with data reporting requirements if CMS determines that this type of relief would be appropriate under the circumstances. If CMS grants an ECE, the written decision will specify whether the facility is exempted from one or more reporting requirements or whether CMS has granted the facility an extension of time to comply with one or more reporting requirements.

These documents must be submitted to the Outpatient Quality Reporting Support Team via one of the following:

- Email to: QRFormsSubmission@hsag.com
- Secure fax: 877.789.4443

CMS strives to complete its review of each request within 90 days of receipt. REHs included under a blanket exception by CMS will not be required to submit an individual ECE form. Notifications of blanket ECEs are distributed through the QualityNet Mailer service. Information on how to receive QualityNet Mailer notifications can be found in the [Additional Resources](#) section of this guide. Subscribe to listservs on the [QualityNet website](#).

Hospital Quality Reporting (HQR) Registration

Security Official (SO) Roles

REHs submitting data via the HQR system (or using a vendor to submit data on their behalf) are required to designate an SO. The SO facilitates the registration process for other users at the organization, can submit data via the web-based tool, and access secure reports in HQR.

It is highly recommended that at least two people are designated as SOs for the REH. For example, one to serve as the primary SO and the other to serve as a back-up SO.

Security Official Registration

To register as an SO, first complete the registration form to [create a HARP account](#). Users must enter their profile information, account information, and successfully complete proofing (identity verification). Registration could take anywhere from five to 15 minutes, depending on how quickly user data are proofed and verified. HARP uses a third-party service to verify user identities. To complete the account setup:

1. Log into [the HQR system](#) with your HARP² User ID and password.
2. Go to **My Profile** (under your username in the upper right).
 - a. From this page, you can **Request Access** and **View Current Access**.
3. Select **Security Official** or **Basic User** when prompted to select a usertype.
4. Select your required permissions, then **Submit an Access Request**.
 - a. Your request should appear as a new line item in the *Pending Request* section. If your application is not using HARP for role requests, follow the application's instructions on how to request user roles.
5. Review the information on the SO request and select **Continue**.

You will be notified by email when your request has been approved. If you encounter issues requesting access or have questions about using the online process, please contact the CMS Center for Clinical Standards and Quality (CCSQ) Service Center at 866.288.8912 or qnetsupport@cms.hhs.gov.

For common questions and general account set-up information, visit the [CMS HARP Help page](#).

² If you do not have a HARP account, one can be created at harp.cms.gov.

Reporting Deadlines

CMS has established quarterly submission deadlines for the REHQR Program. The required data must be submitted via the HQR system and successfully accepted into the Clinical Warehouse by 11:59 p.m. Pacific Time on the submission deadline date. Submission deadlines for CY 2028 program determination are in the **REHQR Measures and Dates** table on the following page.

Early data submission is recommended in case there are issues that need to be rectified. Quarterly data in the Clinical Warehouse may be updated *until* the data submission deadline. No updates to cases for the quarter will be accepted *after* the submission deadline.

Best Practice: Allow ample time, at least 15 calendar days prior to the submission deadline, to correct errors identified from the review reports of the **Program Reporting** option in HQR. The HQR system does not allow data to be submitted after the deadline. CMS allows ample time for hospitals to submit, re-submit, change, add new data, and delete existing data up until the submission deadline. **Please verify Data Submission Deadline dates on the [QualityNet website](#).**

REHQR Important Dates

CY 2026 Reporting Period/CY 2028 Program Determination

The chart below summarizes the Rural Emergency Hospital (REH) measure reporting dates as outlined in the REHQR Specifications Manual, v.3.0.

Please verify Data Submission Deadline dates on the [QualityNet website](#).

Hospital Quality Reporting (HQR) Clinical Data Measures	Encounter Dates	Submission Deadline
OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients	Jan 1–Mar 31, 2026 (Q1 2026)	Aug 3, 2026
	Apr 1–Jun 30, 2026 (Q2 2026)	Nov 2, 2026
	Jul 1–Sept 30, 2026 (Q3 2026)	Feb 1, 2027
	Oct 1–Dec 31, 2026 (Q4 2026)	May 3, 2027
Claims-Based Measures: Imaging Efficiency*	Calculated Encounter Dates	
OP-10: Abdomen Computed Tomography (CT) – Use of Contrast Material	Jan 1, 2026–Dec 31, 2026	
Claims-Based Measures: Outcome*	Calculated Encounter Dates	
OP-32: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Jan 1, 2024–Dec 31, 2026	
OP-36: Risk-Standardized Hospital Visits Within 7 Days after Hospital Outpatient Surgery	Jan 1, 2025–Dec 31, 2026	

NOTE: Data submission deadlines on a federal holiday or weekend (Saturday/Sunday) will default to the first business day thereafter and are reflected in this document where applicable.

*Calculated from paid Medicare Fee-for-Service (FFS) claims; no additional data submission is required from REHs for these measures.

Additional Resources

CMS

[cms.gov](https://www.cms.gov)

CMS is the U.S. Department of Health and Human Services' agency responsible for administering Medicare, Medicaid, the State Children's Health Insurance Program, and several other health-related programs.

REHQR Program Support

Outpatient Quality Reporting Support Team assists activities under the REHQR Program, including provision of technical support and feedback to support REHs with quality data reporting.

REHQR Program Support Website

qualityreportingcenter.com

This site contains resources concerning reporting requirements, including reference and training materials, tools for data collection and submission, educational presentations, timelines, and data submission deadlines.

REHQR Program Support Team Contact

oqrsupport@hsag.com

866.800.8756

Call the Hospital OQR Program Support Team with any questions about the program using the toll-free number weekdays, from 9 a.m. to 5 p.m. Eastern Time.

QualityNet

QualityNet Website

qualitynet.cms.gov

Established by CMS, the QualityNet website provides healthcare quality improvement news, resources, and data reporting tools and applications used by healthcare providers and others.

Center for Clinical Standards and Quality (CCSQ) Service Desk

qnetsupport@cms.hhs.gov

866.288.8912

The CCSQ service desk can assist users with HQR account issues and CMS systems questions.

REHQR QualityNet Mailer

qualitynet.cms.gov/listserv-signup

Notices generated on the QualityNet Mailer are used to disseminate timely information related to quality initiatives. QualityNet and HQR users are urged to register for these email notifications to receive information on enhancements and new releases, timeline or process/policy modifications, and alerts about applications and initiatives.

QualityNet Q&A Tool

cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question

The Outpatient Quality Reporting Support Team maintains the REH Questions/Answers knowledge database, which allows users to ask questions, obtain responses from all resolved questions, and search the entire database by keywords or phrases.

Federal Register

[federalregister.gov](https://www.federalregister.gov)

Published by the Office of the Federal Register, National Archives and Records Administration, the *Federal Register* is the official daily publication for rules, proposed rules, and notices of federal agencies and organizations, as well as executive orders and other presidential documents.

Compare Tool

[medicare.gov/care-compare](https://www.medicare.gov/care-compare)

The Compare Tool displays hospital performance data in a consistent, unified manner to ensure the availability of credible information about the care delivered in the nation's hospitals.