Reference #	: 2025-21-IP
From:	Inpatient & Outpatient Healthcare Quality Systems Development
	& Program Support
Sent:	February 27, 2025
To:	IQR, OQR, ASC, EHR, REH, IPF, and PCH ListServ Recipients Lists
Subject:	Action Needed: Update Your Facility's Vendor Authorizations Today

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Announcement from the Centers for Medicare & Medicaid Services (CMS):

Your facility's data security starts with controlling who can access your information and make submissions on your behalf. We urge you to review and updated your vendor authorizations in the **HOR System** to ensure all current vendor access is up-to-date and necessary.

Please follow these steps to manage access:

- After logging into HQR, navigate to the sidebar and select **Administration**, then *Vendor Management*
- Here you will see a list of all currently authorized vendors. Review each vendor currently in your list.
- If a vendor should no longer have access, navigate to the right-side end of each vendor row and select the utility menu (3 dots stacked vertically). You can use this menu to edit, suspend, or remove vendor access.
- For each vendor that should no longer have access to your data in HQR, click the utility menu and select **Remove**.
- Regularly repeat this process for all vendors to ensure your list always remains current, but please be sure not to inadvertently remove a vendor who will be submitting on your behalf.

Routine reviews of your vendor list are critical to securing your data and preventing unauthorized users from submitting data on your behalf. **Please complete this review promptly to mitigate any potential risks.**

Need help? You can also watch a video about the process.

As the HQR System continues to improve, any changes will be communicated.

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For further assistance regarding the information contained in this message, contact the CCSQ Support Center:

<u>QNetSupport@cms.hhs.gov</u> 866.288.8912 TTY: 877.715.6222 Mon. - Fri., 8 a.m. to 8 p.m. ET





You are receiving this message because you are a user of the Hospital Reporting system.