



## IQR Quality Reporting Program

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### Support Contractor

### Hospital Inpatient Quality Reporting (IQR) Program Reconsideration Process

#### Q&A Transcript

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**Question 1:** Does this include CAH?

**Answer 1:** The IQR program and reconsideration process does not apply to Critical Access Hospitals.

**Question 2:** If you send your reconsideration request via email, should there be something specific included in the subject line?

**Answer 2:** There is no specific verbiage that needs to be included in the subject line. It would be helpful if you included that "This is for the Reconsideration Process" and your CCN.

**Question 3:** If our reason for reconsideration request does not fit in the provided space on the form, should we complete the rest of [the] request on a separate form?

**Answer 3:** Yes, you can include additional information on a separate PDF document.

# IQR Quality Reporting Program

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## Support Contractor

- Question 4:** Do we get warnings that something is due before it is too late and have to do a reconsideration?
- Answer 4:** The Support Contractor sends a targeted email to those hospitals that have not submitted one or more of their requirements. Additionally, the hospital will receive a phone call three days prior to the deadline.
- Question 5:** Our QIO used to send reminders when the deadline was nearing and data was not yet submitted. Does the VIQRC send such reminder emails?
- Answer 5:** 30 and 15 day reminders are sent out through the ListServe. Targeted emails are sent at seven days, and then phone calls are made if they have not submitted their data three days prior to the deadline.
- Question 6:** Do we need to send the missing data with our request?
- Answer 6:** No, you would not send the missing data with your request. Your request should contain specific details as to why the data was not entered.
- Question 7:** [If a] hospital submitted to NHSN successfully, however *QualityNet* does not see it, could this be credited to [the] hospital?
- Answer 7:** It would not automatically be credited to your hospital. You will want to include that information in the reconsideration.
- Question 8:** If a facility failed requirements due to non-submission of PC-01, in [an] attempt to appeal for reconsideration, does it require for the requirement to be re-submitted? If so, will the quarter in question be reopened for submission?
- Answer 8:** No, you would not submit the actual data with your reconsideration as the submission deadlines are over and the warehouse locked. It will not be re-opened.
- Question 9:** If we have no perinatal patients and have never had these patients, can this be removed as a requirement?
- Answer 9:** If you do not treat OB patients or have an OB unit, the requirement is that you have to enter zeros in all of the data fields for the PC-01 measure.
- Question 10:** Is there someone I should speak to privately after the meeting?
- Answer 10:** You can contact our support helpline at 844.472.4477 or 866.800.8765.

# IQR Quality Reporting Program

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## Support Contractor

- Question 11:** If we have the emails that she is referring to, is this documentation enough for the reconsideration?
- Answer 11:** You would want to include all applicable information with the reconsideration. This would include emails, reports, supporting documentation, etc.
- Question 12:** We submitted all the required data but there seems to be an issue with the uplink from CDC to CMS. We had to submit repeatedly before it goes through. Apparently, our Question 2 never did. Is there a way to track our submission?
- Answer 12:** There are several reports, such as the Provider Participation Report, that you can run through the Secure Portal of *QualityNet* that would allow you to track your submissions.
- Question 13:** Remind us of the deadline date, please.
- Answer 13:** Reconsiderations are due to CMS within 30 days of receipt of the reconsideration letter.
- Question 14:** We submitted our data and have verification that it was submitted. Is this part of the reconsideration process?
- Answer 14:** You would want to include that information in your reconsideration [request].
- Question 15:** Has the deadline passed to comply with Phase II requirements? I know that we have had problems with the NHSN in CY 14 4th quarter because the NHSN had changed from digital certification to secure access, and additional paperwork was required.
- Answer 15:** Phase 2 will include 4Q2014 discharges for Population and Sampling (deadline is May 1, 2015) and Clinical and HAI data for 4Q2014 discharges (deadline is May 15, 2015).
- Question 16:** After the reconsideration form has been submitted, when can we expect to hear if the request has been granted? If the request was approved, is there another step to take?
- Answer 16:** CMS expects the process to take no longer than approximately 90 days from receipt of the Reconsideration Request Form.
- Question 17:** As far as PC-01 – Our facility does not perform any of these services and had no data to submit and will not be performing any of these services. Is there any way that our facility can be flagged that these measures do not apply to us?

# IQR Quality Reporting Program

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## Support Contractor

- Answer 17:** If your hospital does not have an OB unit or treat OB patients, the requirement, at this time, is that the hospital must enter zeros in the data fields to meet the IQR requirements for IQR.
- Question 18:** Are we able to submit additional information along with the reconsideration form; for example emails from *QualityNet*?
- Answer 18:** If you would like to include additional information or documentation, please attach a PDF file with your Reconsideration Request Form.
- Question 19:** Our facility had two requirements that were not met. After we submit our reconsideration, if one of the two requirements is accepted, will our APU still be affected with just one requirement not met?
- Answer 19:** All requirements must be met to receive the full annual payment update. If CMS accepted one requirement and not the other, you would still receive the APU reduction.
- Question 20:** We do not deliver babies at our facility. Why do we have to complete Perinatal Care Measure?
- Answer 20:** Per the IPPS Final Rule, hospitals must submit the aggregate data for the PC-01 measure. At this time, the requirement is that the hospital must submit zeros for the data fields if they do not treat OB patients or have an OB unit.
- Question 21:** Will the list of hospitals penalized on their APU be published, as was the case with the HAC penalties?
- Answer 21:** CMS posted on *QualityNet* a list of the hospitals that passed APU, who failed APU, and those that chose not to participate.
- Question 22:** Our issue is that the HAI data wasn't submitted for the 1st quarter. Do we include that data with our reconsideration request?
- Answer 22:** No, you do not include the actual data in the reconsideration. You will want to include all documentation as to why you did not meet the requirement(s) and why you should receive the full APU.
- Question 23:** Is there a date when the Reconsideration Form needs to be in?
- Answer 23:** The reconsideration [request] is due 30 days from the receipt of the letter.
- Question 24:** Can you please repeat the FAX number to send the Appeal to?
- Answer 24:** 877.789.4443

# IQR Quality Reporting Program

## Support Contractor

- Question 25:** The IQR does not apply to Inpatient Psychiatric Facilities. Is this a correct statement?
- Answer 25:** If the Inpatient Psychiatric Facility (IPF) is not paid under the IPPS Payment System, then they are not included in the IQR program.
- Question 26:** If we received [a] letter regarding sampling, do we need to submit those numbers?
- Answer 26:** No, you do not have to provide the actual data.
- Question 27:** What is the date in May that the reconsideration letter/forms are to be submitted?
- Answer 27:** It will be in late May that Phase II letters will be sent out.
- Question 28:** Could you please clarify who was this sent to?
- Answer 28:** The APU At-Risk letters were mailed to the CEO/Administrator of the facility.
- Question 29:** How many letters were sent out for Phase I notifications?
- Answer 29:** There were 154 hospitals that received At-Risk letters.
- Question 30:** Some challenges have occurred for reporting related to version of browser. Any pending updates?
- Answer 31:** We do not have an update at this time.
- Question 32:** Are we able to submit additional information along with the reconsideration form?
- Answer 32:** Yes, you can submit attachments along with your request form.
- Question 33:** How can you check and see who the reminder emails are going to?
- Answer 33:** You can contact the support contractor at 1.866.800.8765 to check who is listed as the contacts for your facility
- Question 34:** Is the Reconsideration Request Form downloadable and able to be completed electronically?
- Answer 34:** The Reconsideration Request Form is in a fillable PDF format and can be completed electronically.
- Question 35:** I did not receive the 30, 15, 7 day emails or three day phone call you mentioned. Would that have gone to our security administrator?

# IQR Quality Reporting Program

## Support Contractor

- Answer 35:** The 30-day and 15-day reminders are sent via the ListServe system. You must be subscribed to the QualityNet hiqrimprove-poc-notify group to receive these notifications. The 7-day reminders are generally sent to the CEO, Hospital IQR, Quality Management and/or the Infection Preventionist contacts we have on file.
- Question 36:** Will you all get to the questions in the Q&A tool?
- Answer 36:** No, the Q & A's from this session will not be entered into the Q & A Tool.
- Question 37:** How do we update our contacts with the VIQRC outreach?
- Answer 37:** You can send your changes by email to: [QRSupport@hcgis.org](mailto:QRSupport@hcgis.org) or by fax at 877.789.4443.
- Question 38:** Was there a transition from the local contact to the national contact methods during the submission period for 2nd quarter 2014 data? We did not receive targeted emails until 3 days before the deadline and never received a phone call.
- Answer 38:** The transition took place in June of 2014. You can contact the support contractor at 866.800.8765 to verify who is listed as the contacts for your facility.
- Question 39:** Is the second letter also a FedEx letter, or just regular mail?
- Answer 39:** All APU determination letters are sent through FedEx.
- Question 40:** While we are talking about waiving things such as PC-01, can we please have a box to check if we don't sample, so we don't have to submit population and sampling numbers when we do not sample?
- Answer 40:** We will take this into consideration for future releases.
- Question 41:** Are there any reasons that CMS will still deny payment after the reconsideration process?
- Answer 41:** CMS will review the reconsideration and review the reasons why the hospital felt that they met the IQR requirements. If CMS does not feel that the rationale is sufficient, they will uphold their decision to reduce payment.
- Question 42:** I put a question in the queue but it is not coming up. We submitted our data via NHSN and see it there, so we are not sure why our data did not go through. What do we need to submit for the reconsideration process?

# IQR Quality Reporting Program

## Support Contractor

- Answer 42:** You will need to include specific and detailed information or documentation to support that you submitted the data to NHSN.
- Question 43:** Where can I find the date our HAI data was submitted?
- Answer 43:** You can run your Provider Participation Report and/or access the NHSN site to determine when your HAI data was submitted.
- Question 44:** Is there a website to locate the process of withholding the APU if re-validation is found unfavorable?
- Answer 44:** Information regarding the Reconsideration Process can be found on *QualityNet* ([www.qualitynet.org](http://www.qualitynet.org)). Place the cursor over the [Hospitals – Inpatient] tab, select the “Hospital Inpatient Quality Reporting Program” link, and select “APU Reconsideration” from the left-side navigation bar.
- Question 45:** Good morning. Generally, are the results submitted accepted for approval, or what are the reasons they are not accepted? Thank you.
- Answer 45:** There are no specific criteria that CMS uses for the APU determinations. CMS will review the reconsideration and review the reasons why the hospital felt that they met the IQR requirements. If CMS does not feel that the rationale is sufficient they will uphold their decision to reduce payment.
- Question 46:** Why did I receive a letter from CMS stating I did [not] submit data when I have proof I did. This is the second time this has happened.
- Answer 46:** If you received an At-Risk letter, then per CMS’ review, you did not meet one or more of the Hospital Inpatient Quality Reporting Program requirements. If you have documentation that you did submit the data, then you will want to include that with your reconsideration.
- Question 47:** My facility's data was entered into NHSN long before the deadline. Not sure why CMS can't see it. What are some supporting documentation examples that can be submitted? Are analysis reports showing the entry dates?
- Answer 47:** You will want to include any supporting documentation, such as analysis reports, in your reconsideration.
- Question 48:** We were under the impression that non-ICU hospitals were not required to begin reporting HAI until July 2014?
- Answer 48:** HAI data was required for 2014 discharges. If you do not have an ICU, you would have needed to file a waiver for the CAUTI and

# IQR Quality Reporting Program

## Support Contractor

CLABSI measures. CAUTI and CLABSI will be required for all wards beginning with 01/01/2015 discharges.

**Question 49:** My new manager was not aware that HAI had to be submitted through NHSN and was told as long as data was submitted through *QualityNet* we would be "ok." This was from our former vender, Primaris. Will this situation be "adequate" for reconsideration of APU?

**Answer 49:** CMS will review all information that is submitted with the reconsideration and then make their determination.

**Question 50:** I thought it had to be sent through secure transfer on *QNet* or secure fax?

**Answer 50:** The completed Reconsideration Form can be submitted via the *QualityNet Secure Portal*, by secure fax at 877.789.4443 or by email at [QRSupport@hcqis.org](mailto:QRSupport@hcqis.org).

**Question 51:** How do you find the State and National reports?

**Answer 51:** The Facility, State, and National report can be accessed through the *QualityNet Secure Portal* under the IQR Feedback report category.

**Question 52:** If, after talking to NHSN, we determine that the error was on the NHSN database, should NSHN turn in the reconsideration request or some kind of correction to their data?

**Answer 52:** NSHN cannot submit the reconsideration request. You will need to submit the Reconsideration Form and include any supporting documentation that you have.

**Question 53:** If our letter states that we failed two different quarters, one for Question 2 PN, IMMe, VTE, and also Question 1 HAI, do we submit separate requests for reconsideration for each quarter, or does one request cover all quarters referred to in our letter?

**Answer 53:** You would only have to submit one reconsideration and address all quarters in the reconsideration.

**Question 54:** So you are recommending a copy of all correspondence with *QNet*, CMS, etc. [be sent] with the reconsideration form?

**Answer 54:** You will want to submit any correspondence, emails, documents, etc. that you have with your reconsideration.

**Question 55:** How do we all get a confirmation to our data being entered?



# IQR Quality Reporting Program

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## Support Contractor

**Answer 55:** To get confirmation that your data has been entered, you will want to run your *QualityNet* reports, such as the Provider Participation Report, Submission Detail Report, etc.

**Question 56:** Do we submit our Reconsideration Form now?

**Answer 56:** Yes, you can submit your Reconsideration Form now. You have 30 days from the receipt of the At-Risk letter to submit your reconsideration.

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