



CMS

2017 Hospital IQR Program Reporting Requirements

PROGRAM REQUIREMENTS

◀ HOSPITALS ▶

Report 6 Chart-Abstracted Measures	
ED-1	VTE-6
ED-2	IMM-2
PC-01	SEP-1

Submission: QualityNet Secure Portal

Report Data: See reporting section on page four.

[AND]

Select 4 Electronic Clinical Quality Measures (eCQMs)	
AMI-8a	STK-5
CAC-3	STK-6
ED-1	STK-8
ED-2	STK-10
PC-01	VTE-1
PC-05	VTE-2
STK-2	EHDI-1a
STK-3	

Submission: QualityNet Secure Portal

Report Data: See reporting section on page four.

Note: This also meets CQM requirement for the EHR Incentive Program.



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[AND]

Report 6 NHSN Measures	
CAUTI	Colon & Abdominal Hysterectomy SSI
CDI	HCP
CLABSI	MRSA Bacteremia

Submission: NHSN

Report Data: See reporting section on page four.

[AND]

Report 1 Patient Experience of Care Survey Measure	
HCAHPS	

Submission: QualityNet Secure Portal

Report Data: See reporting section on page four.

[AND]

Report 2 Structural Measures	
Patient Safety Culture	Safe Surgery Checklist

Submission: QualityNet Secure Portal

Report Data: See reporting section on page four.



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[AND]

Report 20 Claims-Based Outcome Measures	
MORT-30-AMI	READM-30-HWR
MORT-30-CABG	READM-30-PN
MORT-30-COPD	READM-30-STK
MORT-30-HF	READM-30-THA/TKA
MORT-30-PN	AMI Excess Days
MORT-30-STK	HF Excess Days
READM-30-AMI	PN Excess Days
READM-30-CABG	Hip/Knee Complications
READM-30-COPD	PSI 04
READM-30-HF	PSI 90

Submission: No additional submission is required. Enrollment data, Part A and Part B claims data is used to calculate measure results.

Report Data: See reporting section on page four.

[AND]

Report 11 Claims-Based Payment Measures	
AMI Payment	GI Payment
HF Payment	Kidney/UTI Payment
PN Payment	AA Payment
THA/TKA Payment	Chole and CDE Payment
MSPB	SFusion Payment
Cellulitis Payment	

Submission: No additional submission is required. Enrollment data, Part A and Part B claims data is used to calculate measure results.

Report Data: See reporting section on page four.



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REPORTING QUARTER DEADLINES

Clinical, HAI, PC-01:	Quarterly submission
Population & Sampling for Chart-Abstracted measures:	Quarterly submission
HCAHPS:	Quarterly submission
eCQMs:	Submit one quarter of information by the February 28, 2018 deadline.
Structural:	Submit full year's worth of data. Reporting of structural data completed between April 1 – May 15, 2018.
DACA:	Complete the Data Accuracy and Completeness Acknowledgement between April 1 – May 15, 2018.

◀ HOSPITALS WITH MODIFIED REQUIREMENTS ▶

There are many different circumstances that would qualify a hospital to have either modified requirements or to be excluded from the IQR program altogether. We've included a link here to the 2017 IPPS Final Rule starting with the section on excluded hospitals. However, the best way to understand your requirements is to speak with a Medisolv representative who can walk you through your hospital's specific needs.

<https://www.federalregister.gov/d/2016-18476/p-981>

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