



SDPS MEMORANDUM

MEMO NBR: 12-364-GN

DATE: November 27, 2012

SUBJECT: **Revised:** Disaster Waiver for Hurricane Sandy

TO: SDPS HRI Point of Contact, SDPS IIPC Point of Contact, SDPS ICPC Point of Contact, SDPS MEDPCC Point of Contact, Analytical Point of Contact, CEO Point of Contact

FROM: James Poyer
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Quality Improvement Group
Center for Clinical Standards and Quality
Centers for Medicare & Medicaid Services

The purpose of this SDPS memorandum is to notify Quality Improvement Organizations (QIOs) of the Centers for Medicare & Medicaid Services' (CMS') intent to grant data submission and validation waivers to the Inpatient Prospective Payment System (IPPS) and Outpatient Prospective Payment System (OPPS) hospitals required to submit hospital quality measure data and medical records to meet validation requirements due to the devastating impact of hurricane Sandy.

CMS is exercising its authority to waive data submission and validation requirements under Section 1886(b) (A)(vii)(II) of the Act for the Hospital IQR Program and under Section 1833(t)(17)(B) of the Act for the Hospital Outpatient Quality Reporting (OQR) program of the Social Security Act for FEMA designated "major disaster" counties within the states listed below:

- **Connecticut**
Fairfield County, Mashantucket Pequot Indian Reservation, Middlesex County, New Haven County, and New London County
- **New Jersey**
Atlantic County, Cape May County, Essex County, Hudson County, Middlesex County, Monmouth County, Ocean County, and Union County
- **New York**
Bronx County, Kings County, Nassau County, New York County, Queens County, Richmond County, Rockland County, Suffolk County, and Westchester County
- **Rhode Island**
Bristol County, Newport County, and Washington County

CMS is issuing waivers for the following Hospital IQR and OQR submission and validation requirements because hospital medical records or data systems may have been destroyed or hampered due to the adverse weather. Further, hospitals have experienced physical damage requiring evacuation and/or closing, or hospitals are overwhelmed with patients from other hospitals. Thus, hospitals in affected areas may be unable to report data, submit selected medical record documentation, or contact patients sampled for HCAHPS.

Please note that hospitals located outside of the counties covered under this memo in need of a waiver of IQR or OQR program requirements are required to follow the waiver submission process described at the end of this memo.

CMS is NOT waiving any Ambulatory Surgical Center Quality Reporting (ASCQR) and Inpatient Psychiatric Facility Quality Reporting (IFPQR) data submission requirements at this time. We ask that facilities directly impacted by Sandy's damage to submit individual disaster waiver request to our national support contractor within the required timeframe.

Hospital Inpatient Quality Reporting (IQR) program requirements

For the Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS), for hospitals in covered counties, patient experience of care requirements are waived as follows:

- January 2, 2013 HCAHPS submission for discharge period July 1, 2012 – September 30, 2012 (3rd Quarter 2012).
- April 3, 2013 HCAHPS submission for discharge period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

For IQR Chart Abstracted Data, including clinical process of care data, clinical population and sampling data, and National Health Safety Network (NHSN) Healthcare Associated Infection (HAI) data, for hospitals in covered counties, submission requirements are waived as follows:

- November 1, 2012 and November 15, 2012 submissions for discharge period April 1, 2012 – June 30, 2012 (2nd Quarter 2012).
- February 1, 2013 and February 15, 2013 submissions for discharge period July 1, 2012 – September 30, 2012 (3rd Quarter 2012).
- May 1, 2013 and May 15, 2013 submissions for discharge period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

For IQR Chart Abstracted Data validation medical record requests, records are normally due to the Clinical Data Abstraction Center (CDAC) within 30 days of the date identified on the written request letter. For hospitals in covered counties, medical record submission requirements are waived as follows:

- CDAC record requests for discharge period January 1, 2012 – March 31, 2012 (1st Quarter 2012).
- CDAC record requests for discharge period April 1, 2012 – June 30, 2012 (2nd Quarter 2012).
- CDAC record requests for discharge period July 1, 2012 – September 30, 2012 (3rd Quarter 2012).

- CDAC record requests for discharge period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

For IQR CLABSI Validation Blood Culture Templates, for hospitals in covered counties, submission requirements are waived as follows:

- November 1, 2012 submissions for discharge period April 1, 2012 – June 30, 2012 (2nd Quarter 2012).
- February 1, 2013 submissions for discharge period July 1, 2012 – September 30, 2012 (3rd Quarter 2012).
- May 1, 2013 submissions for discharge period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

For the IQR CAUTI Validation Urine Culture Templates (a new requirement), for hospitals in covered counties, the first submission requirement is waived as follows:

- May 1, 2013 submissions for discharge period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

When considering non-submission using the Hospital Inpatient Quality Reporting (IQR) Program disaster waiver, hospitals should be aware of the potential impact to Hospital Value Based Purchasing (VBP) program Fiscal Year (FY) 2014 minimum case threshold counts for inclusion in the program for FY 2014 payment. The Hospital VBP program does not provide a disaster waiver process for hospitals eligible for inclusion in the program under Section 1886(o) of the Social Security Act (i.e., the Act).

Hospital Outpatient Quality Reporting (OQR) program

For OQR Chart Abstracted Data, for hospitals in covered counties, submission requirements are waived as follows:

- November 1, 2012 submissions for encounter period April 1, 2012 – June 30, 2012 (2nd Quarter 2012).
- February 1, 2013 submissions for encounter period July 1, 2012 – September 30, 2012 (3rd Quarter 2012).
- May 1, 2013 submissions for encounter period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

For OQR Chart Abstracted Data validation medical record requests, records are normally due to the CDAC within 45 days of the date identified on the written request letter. For hospitals in covered counties, medical record submission requirements are waived as follows:

- CDAC record requests for discharge period April 1, 2012 – June 30, 2012 (2nd Quarter 2012).
- CDAC record requests for discharge period July 1, 2012 – September 30, 2012 (3rd Quarter 2012).
- CDAC record requests for discharge period October 1, 2012 – December 31, 2012 (4th Quarter 2012).

Waiver Process

Hospitals in other states and counties are authorized to submit requests for hospital submission waiver based on individual circumstances.

- IQR Waiver requests:
Hospital IQR Program Support Contractor
Telligen
1776 West Lakes Parkway
West Des Moines, Iowa 50266
- OQR Waiver requests by conventional mail:
Hospital OQR Program Support Contractor
FMQAI
5201 West Kennedy Blvd. Suite 900
Tampa, Florida 33609
by email: hopqdrp@fmqai.com
- IPFQR Waiver requests should be directed to the Telligen help desk at (888) 961-6425 or by sending an e-mail to IPF-PCHQRSupport@telligen.org
- ASCQR Waiver requests should be directed to FMQAI by calling, toll-free, (866) 800-8756 weekdays from 7 a.m. to 6 p.m. Eastern Time.

Please refer to the waiver process located on *QualityNet* for additional information regarding the waiver process and/or the waiver request form located on *QualityNet*:

- IQR program - select “Hospital Inpatient Quality Reporting Program” from the [**Hospitals – Inpatient**] tab drop-down list followed by selecting the “Disaster Waiver” link in the left side navigation bar (direct link):
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1228762258913>.
- OQR program - select “Hospital Outpatient Quality Reporting Program” from the [**Hospitals – Outpatient**] tab drop-down list followed by selecting the “Extraordinary Circumstances Form” link in the left side navigation bar (direct link):
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1192804531069>.

For questions regarding this SDPS memorandum, contact your internal point of contact. If the QIO staff member has additional questions, their contact resources include:

- The Hospital IQR Program support contractor e-mail address:
hrpqiosc@iaqio.sdps.org.
- The Hospital OQR program support contractor e-mail address:
oqrsupport@fmqai.com or telephone: (866) 800-8756 weekdays from 7 a.m. to 6 p.m. Eastern Time.

- The Hospital IPFQR Program support contractor e-mail address:
E-mail: IPF-PCHQRSupport@telligen.org or by calling, toll-free, (888) 961-6425 weekdays from 8 a.m. to 5 p.m. Central Time:
- ASCQR Program support contractor questions should be submitted to FMQAI at ASC-Questions/Answers or by calling, toll-free, (866)800-8756 weekdays from 7 a.m. to 6 p.m. Eastern Time.

For questions regarding technical issues, contact the QualityNet Help Desk at the following email address: qnetssupport@sdps.org.