**FY 2021 Inpatient Prospective Payment System Rule: Summary of Updates on Hospital Quality Reporting Information Collection Forms**

**NOTE:** Several forms reference the “*QualityNet Secure Portal*, Secure File Transfer ‘xxx’ Group.” This terminology and name of the “groups” will be changing but has not yet been finalized by our Information Systems Group; we will include finalized terminology with the final rule PRA package.

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| **Form** | **Notes on Updates** |
| Hospital Inpatient Quality Reporting Notice of Participation | Form resubmitted to change references to Hospital Compare to the public reporting website and to specify the use of optional quality measure data for publicly reporting summary information such as star ratings. |
| Hospital Quality Reporting Data Accuracy and Completeness Acknowledgement (DACA) | Form resubmitted to reflect updated list of measures. |
| Hospital Compare Request Form for Withholding/Footnoting Data for Public Reporting | Form resubmitted to change references to Hospital Compare to the public reporting website, updated the measure tables, and provided clarification related to the withholding of public reporting for the star ratings for those hospitals with an optional public reporting notice of participation. |
| Centers for Medicare & Medicaid Services (CMS) Inpatient Prospective Payment System (IPPS) Quality Reporting Programs Measure Exception Form for PC and HAI Data Submission | No updates/changes to previously submitted form. Form still in use. Will need to update the reference to the *QualityNet Secure Portal*. |
| CMS Quality Reporting Program APU Reconsideration Request Form | Updated reference to Security Administrator to Security Administrator/Official and to more clearly delineate signature area. Form still in use. Will need to update the references to the *QualityNet Secure Portal*. |
| CMS Hospital IQR Program Validation Review for Reconsideration Request Form | Form resubmitted to remove the inapplicable columns (i.e., Measure Set as the only measure is now sepsis and NHSN Event ID Number for HAI Measures as they are no longer in the IQR program), add a column for Discharge Quarter, and clarify the Element Name column. Additionally, a line was added for the submitters email address. Will need to update the reference to the *QualityNet Secure Portal*. |
| Centers for Medicare & Medicaid Services (CMS) Quality Program Extraordinary Circumstances Exceptions (ECE) Request Form | Form resubmitted to clarify instructions, list Population and Sampling to the Data Requirement(s) Affected section, and to update the email address for the SNF VBP program. Will need to update the reference to the *QualityNet Secure Portal*. |
| CMS Quality Reporting Validation Educational Review Form | Updated to add applicability of the form for HAI validation under the Hospital-Acquired Condition Reduction Program. |
| Hospital Value-Based Purchasing (VBP) Program Review and Corrections Request Form | Updated reference to Security Administrator to Security Administrator/Official. Will need to update the reference to the *QualityNet Secure Portal*. |
| Hospital Value-Based Purchasing (VBP) Program Appeal Request Form | Updated reference to Security Administrator to Security Administrator/Official. Will need to update the reference to the *QualityNet Secure Portal*. |
| Hospital Value-Based Purchasing (VBP) Program Independent CMS Review Request Form | Updated reference to System Administrator to Security Administrator/Official. Will need to update the reference to the *QualityNet Secure Portal*. |