

**Analysis of the Outcome of Leapfrog Comment Letter to
The Centers for Medicare & Medicaid Services (CMS)
Regarding the CMS Proposed Rule on Hospital Outpatient Prospective
Payment & Ambulatory Surgical Center Payment Systems (OPPS)**

Based on CY 2022 Final Rule Issued by CMS November 2, 2021

Leapfrog Group Recommendation	Page # in Leapfrog Letter	Are We Satisfied With the Outcome?	CMS Final Ruling
<p>Leapfrog supported removing two measures from the Outpatient Quality Reporting (OQR) Program when data is available to report the ST-Segment Elevation Myocardial Infarction (STEMI) Electronic Clinical Quality Measures (eCQM).</p> <p><i>Note: A STEMI is a very serious type of heart attack</i></p>	4	Somewhat	<p>CMS will remove these two measures beginning with CY23 reporting period / CY25 payment determination.</p> <p>The STEMI eCQM will begin with voluntary reporting in CY23 reporting period and mandatory reporting beginning CY24 reporting period.</p> <p>CMS's full response to Leapfrog's recommendation can be found on page 865.</p>
<p>Leapfrog supported adding five measures to the OQR Program:</p> <ul style="list-style-type: none"> • COVID-19 Vaccination Coverage Among Health Care Personnel (HCP) measure • Breast Screening Recall Rates measure • STEMI eCQM • Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey-Based Measures • Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery 	4	Yes	<p>CMS will add five measures to the OQR Program.</p>
<p>Leapfrog provided recommendations across the OQR & Ambulatory Surgery Center Quality Reporting (ASCQR) Programs including:</p> <p><u>Add four specific measures:</u></p> <ul style="list-style-type: none"> • Volume of select procedures • Ambulatory Breast Procedure Surgical Site Infection (SSI) outcome measure • Endoscopy/Polyp Surveillance • Mandatory infection reporting through NHSN <p><u>Act on five specific topics / concepts:</u></p> <ul style="list-style-type: none"> • Improve alignment of measurement between hospital outpatient and ASCS • Report by individual bricks-and-mortar facility and not by CCN • Address medication safety in OQR • Take advantage of patient reported outcome performance measure (PRO-PM) 	4, 9	NA	<p>As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action.</p> <p>CMS responded to Leapfrog's recommendations on pp. 944, 945, 1082, and 1083.</p>

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<p>Leapfrog provided recommendations on the following key steps to a hip & knee PRO-PM for the OQR & the ASCQR Programs:</p> <ul style="list-style-type: none"> • Adopt a hip & knee PRO-PM for all settings including inpatient, hospital outpatient and ASCs • Three methodology improvements to increase measure reliability: <ul style="list-style-type: none"> ○ Use three-year measurement period ○ Use all-payer population ○ Base the denominator on all ages 	6, 11	NA	<p>As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action.</p> <p>CMS responded to Leapfrog's recommendations on pp. 951 & 1087.</p>
<p>Leapfrog provided recommendations on health equity as it relates to the OQR and ASCQR Program including:</p> <ul style="list-style-type: none"> • Expansion of measure stratification based on dual eligibility • Short-term stratification by social risk factors using indirect rate estimation • Avoidance of risk adjustment based on social risk factors in calculating quality measures 	7, 12	NA	<p>As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action.</p> <p>CMS responded to Leapfrog's recommendations on p. 955.</p>
<p>Leapfrog provided recommendations regarding Outpatient Ambulatory Surgery (OAS) CAHPS across the OQR & ASCQR Programs including:</p> <ul style="list-style-type: none"> • Add two web-based modes to complete the survey • Clarify if use of a smart phone is considered a web-based response • Report the domain score with the current pain question, or omit the pain question & report the domain score with the existing questions 	8, 9	<p>Somewhat</p> <p><i>CMS only responded to one of the three areas outlined.</i></p>	<p>CMS will add the two web-based modes to complete the OAS CAHPS survey.</p> <p>The final rule did not respond to our request to clarify smart phone use or report domain score with or without the current question on pain.</p>
<p>Leapfrog provided the recommendation that no eCQMs should be removed until there is sufficient data available for the added measures. Regarding the STEMI OQR, Leapfrog only supports adding that OQR on the condition that the eCQM is also implemented.</p>	8	<p>Somewhat</p> <p><i>Leapfrog recommended no eCQMs be removed until there is sufficient data, but there will be a one year gap.</i></p>	<p>CMS will remove the two OQR measures beginning with CY23 reporting period / CY25 payment determination. The STEMI eCQM will begin mandatory reporting beginning CY24 reporting period.</p>

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Leapfrog suggested that CMS require providers to submit a minimum of one year of data for the STEMI eCQM at the onset of mandatory OQR Program reporting.	8	No	Data submission for the STEMI eCQM will begin with one quarter in the first year, two quarters in the second year, three quarters in the third year and four quarters in the fourth year.
<p>Leapfrog supported adding seven measures to the ASCQR Program:</p> <ul style="list-style-type: none"> • COVID-19 Vaccination Coverage Among Health Care Personnel • Patient Burn • Patient Fall • Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant • All-Cause Hospital Transfer/Admission • Cataracts - Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery • Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems Survey-Based Measures <p>Require use of NHSN Outpatient Procedure Component (OPC) for reporting of ASC-1 through ASC-4 measures & draw on an all-payer population.</p>	9	<p>Somewhat</p> <p><i>CMS only responded to the measures for consideration and not to Leapfrog's other request to use NSHN OPC.</i></p>	<p>CMS will add all seven measures to the ASCQR Program.</p> <p>The ASC-1 through ASC-4 measures will be applied to an all-payer population.</p> <p>CMS did not respond to Leapfrog's recommendation to require use of the NHSN Outpatient Procedure Component (OPC) for reporting of ASC-1 through ASC-4 measures.</p>
<p>Leapfrog provided recommendations regarding developing a pain management measure for the ASCQR Program including:</p> <ul style="list-style-type: none"> • Measure outcomes by use of a PRO-PM • Gauge health equity as measured within & across facilities. 	12	NA	<p>As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action.</p> <p>CMS responded to Leapfrog's recommendations on page 1107.</p>
<p>Regarding changes to the criteria used to decide whether to remove a service from the Inpatient Only (IPO) list, Leapfrog recommended that CMS:</p> <ul style="list-style-type: none"> • Be transparent in its decision-making process when services are removed from the IPO list • Employ complication measures for procedures to be added to the IPO list 	13	No	CMS adopted the five criteria as proposed.

Leapfrog recommended that CMS develop methods to evaluate outcomes for procedures under consideration for removal from the IPO list.	14	NA	As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action. CMS responded to Leapfrog's recommendations on page 633.
Leapfrog recommended CMS require ASCs to submit data to an independent entity, which will publicly report ASC level performance.	14	No	CMS will reinstate its historic criteria to add services to the ASC Covered Procedures List.
Leapfrog recommended CMS include cases assessing mental health services remotely in the denominator of relevant measures.	15	NA	As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action. CMS did not respond to Leapfrog's comment.
Leapfrog recommended CMS fully utilize fast healthcare interoperability (FHIR) & digital quality measures (dQMs) in outpatient quality programs.	15	NA	As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action. CMS responded to Leapfrog's recommendation on page 857.
Leapfrog recommended that CMS continue to include the Safe Use of Opioids – Concurrent Prescribing eCQM in the IQR Program and asked that CMS identify the specific four eCQMs for mandatory reporting by providers.	15	NA	As this was a solicitation for comments, CMS summarized comments and did not commit to a given course of action. CMS responded to Leapfrog's recommendations on page 1286.
Regarding CMS's approval process for Rural Emergency Hospital (REH) status, Leapfrog recommended they create safeguards to avoid the potential for reduced access to maternity care.	16	NA	The REH section was a RFI in the draft rule. Typically such RFIs appear in the final rule to summarize comments received & provide CMS' response. However, in this case the REH section was omitted in the final rule.