



How to enter data into HARP

This is what your HCQIS
Access Roles and
Profile page looks like.

[https://harp.cms.gov/
login/login](https://harp.cms.gov/login/login)

Here is where you
make an initial login,
update your password,
and add new
members if needed.

CMS.gov | HARP
HCQIS Access Roles and Profile

Login

Enter your HARP, EIDM, or EUA credentials to log into HARP.

User ID *

Password *

[Having trouble logging in?](#)

By logging in, you agree to the [Terms & Conditions](#)

Login

OR

CMS EUA PIV Card

[Don't have an account? Sign Up](#)

[See all applications that use HARP](#)

Your Username and Login are the
same for both access/roles page as
Hospital Quality Reporting page.

Here is where you enter data, it is a separate weblink =

<https://hqr.cms.gov/hqrng/login>

This is where you want to be to enter your data, **NOT** the Access and Roles login.

CMS.gov | Hospital Quality Reporting

Sign up

Welcome to
CMS.gov | Hospital Quality Reporting

Log in

Enter your HARP user ID and password

User ID

lbryan305

Password

.....

Having trouble logging in?

By logging in, you agree to the Terms & Conditions.

Log in Sign up

CMS.gov | Hospital Quality Reporting

CMS.gov QualityNet Support CCSQ Support Center

Accessibility Privacy Policy Terms of Use Vulnerability Disclosure Policy

DEPARTMENT OF HEALTH & HUMAN SERVICES

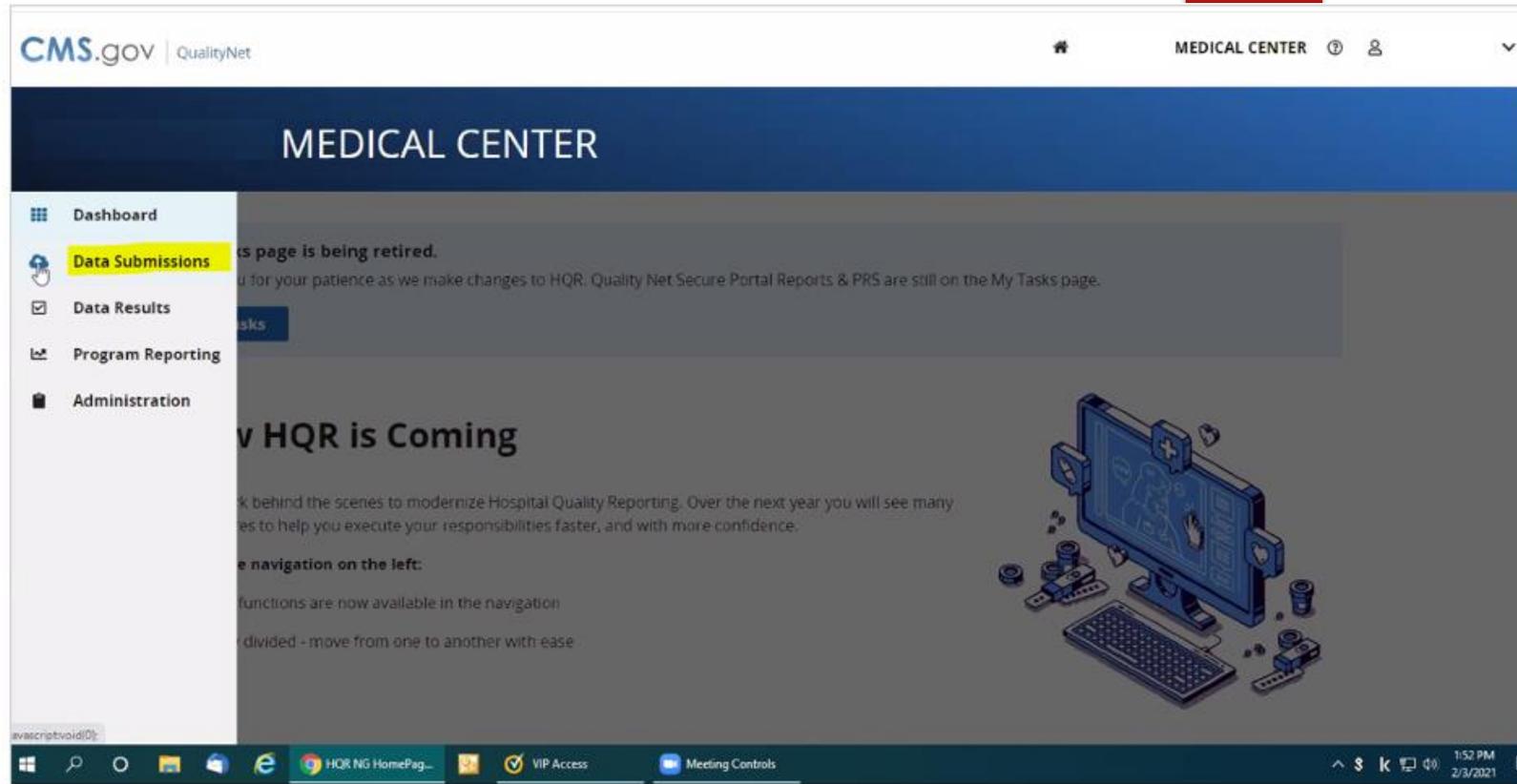
Your Username and Login are the **same** for both access/roles page as Hospital Quality Reporting page.

 **South Dakota**
Association of Healthcare Organizations

This is what your initial page will look like when you first login.

The screenshot shows the CMS.gov Hospital Quality Reporting interface. At the top, there is a navigation bar with several tabs: eCQM, Web-based Measures, Population & Sampling (which is currently selected), Chart Abstracted, HCAHPS, Structural Measures, and Hybrid Measures. Below the tabs, there are two buttons: File Upload and Data Form. A message below the buttons reads: "Choose *Select Files* to browse your computer or *Drag and Drop* the files into the highlighted area." Below this message, there is a section titled "Select a Submission Type" with two buttons: Test and Production. The footer of the page contains the CMS.gov logo and the text "Hospital Quality Reporting". Below the footer, there are links for CMS.gov, QualityNet, Support, CCSQ Support Center, Accessibility, Privacy Policy, Terms of Use, and Vulnerability Disclosure Policy.

Click on Data Submissions on the left side bar to start



Next, you will enter your numbers into Population and Sampling. This page is NOT where you upload your data from CART.

The screenshot shows the CMS.gov QualityNet interface for a Medical Center. At the top, the navigation bar includes 'eCQM', 'Web-based Measures', 'Population & Sampling' (highlighted in yellow), 'Chart Abstracted', and 'HCAHPS'. Below this, there are buttons for 'File Upload' and 'Data Form' (highlighted in yellow). A red arrow labeled 'Click #1' points to the 'Data Form' button. Below these buttons is a section titled 'Select the Data Form' with two options: 'IQR' and 'OQR' (highlighted in yellow). A red arrow labeled 'Click #2' points to the 'Data Form' button, and another red arrow labeled 'Click #3' points to the 'OQR' option. A large blue arrow points from the 'Data Form' button down to the 'OQR' option. The interface also shows 'Launch Data Form' buttons next to each option.

Currently, the MBQIP program is only entering **Outpatient Quality Reporting (OQR)** data.

Check your reporting period on the top right and ensure you are on the right quarter. Then, click “Start Measure” for section you are reporting on.

< Data Submission

Hospital Outpatient: Population & Sampling

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Reporting Period: Q4 2020

CMS Certification Number:
Submission Period: 10/01/2020 - 05/03/2021
With Respect to Reporting Period: 10/01/2020 - 12/31/2020

Current Submission Period: **Open**

Enter Preview Submit

OQR-ED-Throughput (Voluntary)
ED-Throughput **Start Measure**

OQR-Stroke (Voluntary)
Stroke **Start Measure**

[] []

Sampling Option Dropdown:

Sampled = you only entered a portion of your ER patients

Not Sampled = you entered all your ER patients

NA Submission not required = only use if this is not a required measure for you. You will not use this option for OP-18.

Refer to [Outpatient Specification Manuals](#). Scroll down to section 4 and click on hyperlink “Population, Sampling and Transmission” for details.

MEDICAL CENTER

< Hospital Outpatient: Population & Sampling

OQR-ED-Throughput
ED-Throughput

* Indicates required measure

Sampling Option

* Sampling Option (Sampling Option)

Sampled
Not Sampled
N/A submission not required

All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	October	November	December	Total
Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Non-Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>	0

CMS Certification Number:
Submission Period:
10/01/2020 - 05/03/2021
With Respect to Reporting Period:
10/01/2020 - 12/31/2020
Last Updated:
-

Remember this slide from the CART presentation?

Most of you will be in the 0-900 category. You will need to do a minimum quarterly sample size of 63. We recommend 25 per month as an easy more rounded number. Plus, if a few of your entries get rejected, you don't need to worry about it. We will show you how to see potential entry rejections on a later slide.

For **OP-18** sample size requirements click here: [Outpatient Specification Manuals](#). Scroll down to section 4 and click on hyperlink Population, Sampling and Transmission for details. See table 3 on page 4-6 of document.

Table 3: Sample Size Requirements per Quarter per Hospital for OP-18

Population Per Quarter	0–900
Quarterly Sample Size	63
Monthly Sample Size	21
Population Per Quarter	≥ 901
Quarterly Sample Size	96
Monthly Sample Size	32

REMINDER: OP-18 population is ED patients who left your facility, do not include any that were admitted to your facility, even if your policy is to discharge from ER and readmit to your facility.

Population = All ER patients seen
Sampling = Portion of your patients for each month. For OP-18 it is a minimum of 63 patients/quarter

Enter your numbers here. If you can sample, put total population numbers under Population section and number of sampled patients under Sampling section.

If you cannot or choose not to sample, then put **SAME** numbers in Population and Sampling sections. Click Save & Return when done.

An example of how to enter sampled population is shown on the next slide.

Population
All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	October	November	December	Total
Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Non-Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Total	0	0	0	0

Sampling
All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	October	November	December	Total
Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Non-Medicare	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Total	0	0	0	0

Cancel Save & Return

With Respect to Reporting Period:
10/01/2020 - 12/31/2020

Last Updated:
-

Here is an example only for OP-18 if you decide to sample.

You may want to sample or do all the encounters if you choose.

For sampling, you pick “Sampled” under Sampling Option.

Then under Population, list total amount of Medicare and Non-Medicare patients you saw each month.

Under Sampling, you list how many patients you sampled for the month. Listing how many were Medicare and how many were Non-Medicare – minimum is **63/quarter**. You may use as many Medicare and as many Non-Medicare as you choose

Click on Save & Return when complete.

< Hospital Outpatient: Population & Sampling

OQR-ED-Throughput
ED-Throughput

Sampling Option

* Sampling Option

Sampled

Population

All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	April	May	June	Total
Medicare	21	31	25	77
Non-Medicare	15	13	20	48
Total	36	44	45	125

Sampling

All fields must be filled in. If you have no data for a particular item, you must put in '0'.

	April	May	June	Total
Medicare	12	12	12	36
Non-Medicare	13	13	13	39
Total	25	25	25	75

* Indicates required measure

CMS Certification
Number:

Submission Period:

04/01/2023 -
11/01/2023

With Respect to
Reporting Period:

04/01/2023 -
06/30/2023

Last Updated:

-

Cancel

Save & Return

Example of Sampling:

In this example, you have more than 21 patients to sample in July and September, but the August population is not sufficient for sampling. You can adjust your numbers for July and September to get to a full sample of 63 patients/quarter

Direct verbiage from Quality Net: abstract all the cases for the month that has fewer than 21 eligible cases. For the other 2 months, it is recommended to abstract all of the cases. But sampling is still allowed by abstracting at least **63 total** for the quarter. The abstractor would randomly choose cases from the other 2 months so that the total number of cases abstracted for the quarter is at least 63.

Total population:	JULY	
	Medicare	15
	Non-Medicare	19
	Total	34
Sampled		
	Medicare	10
	Non-Medicare	11
	Total	21

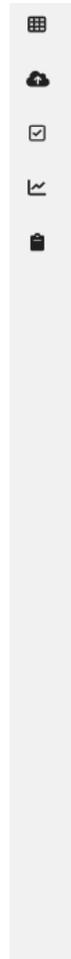
Total population:	SEPTEMBER	
	Medicare	13
	Non-Medicare	15
	Total	28
Sampled		
	Medicare	11
	Non-Medicare	10
	Total	21

Total population:	AUGUST	
	Medicare	9
	Non-Medicare	10
	Total	19
Sampled		
	Medicare	9
	Non-Medicare	10
	Total	19

Once data is in, you will now see “Edit Measure” and a green checkmark and “Complete” next to the measure. I highlighted them both on this slide.

It is important you click on “I’m ready to submit” **AFTER** you are finished entering **all** the data from each measure for the full quarter.

Reminder: You are not required to report on the OQR – Stroke measure currently, so if that measure still says “Start measure” here, that is ok.



< Data Submission

Hospital Outpatient: Population & Sampling

Reporting Period

Q2 2023

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

CMS Certification Number: 431305
Submission Period: 04/01/2023 - 11/01/2023
With Respect to Reporting Period: 04/01/2023 - 06/30/2023
Last Updated: 10/23/2023 12:08 PM

Current Submission Period: **Open**

Enter Preview Submit

+ OQR-ED-Throughput (Voluntary) **Complete**
ED-Throughput

Edit Measure

OQR-Stroke (Voluntary)
Stroke

Start Measure

I'm ready to submit

Once you click on “I am ready to submit”, (as listed on previous slide) you should see green checkmarks where blue arrows are when done! Make sure this is correct before moving on.

< Data Submission

Hospital Outpatient: Population & Sampling

Reporting Period: Q3 2020

NOTE: Proceeding with data submission will change a Providers status to **Participating** if they are currently **Not Participating** or **Withdrawn**.

Hospital Outpatient: Population & Sampling Measure Sets Successfully Submitted

CMS Certification Number:
Submission Period: 07/01/2020 - 03/01/2021
With Respect to Reporting Period: 07/01/2020 - 09/30/2020
Last Updated: 11/27/2020 3:03 PM

Export Data

Current Submission Period: **Open**

Enter Preview Submit

Edit Measure

+ OQR-ED-Throughput (Voluntary) Complete Edit Measure

Now, it is time to upload data from CART

Click on areas specified in this snapshot.

DO NOT click on TEST here, it will not get your data to the correct place.

The screenshot shows the CMS.gov QualityNet interface for a Medical Center. The top navigation bar includes the CMS.gov logo, QualityNet, and a user profile icon labeled 'MEDICAL CENTER'. Below this is a dark blue header with 'MEDICAL CENTER' in white. The main content area features a horizontal menu with tabs: 'eCQM', 'Web-based Measures', 'Population & Sampling', 'Chart Abstracted' (highlighted in yellow), and 'HCAHPS'. A green arrow labeled 'Click #1' points to the 'Chart Abstracted' tab. Below the menu, there is a text prompt: 'Choose Select Files to browse your computer or Drag and Drop the files into the highlighted area.' Underneath, a 'Select a Submission Type' section contains two buttons: 'Test' and 'Production' (highlighted in yellow). A red arrow labeled 'Click #2' points to the 'Production' button. A red arrow labeled 'Click #3' points to the right arrow on the 'Production' button. The footer contains the CMS.gov logo, 'Hospital Quality Reporting', and links for 'CMS.gov', 'QualityNet.org', 'Support', 'Accessibility', 'Privacy Policy', and 'Terms of Use'. The Department of Health & Human Services logo is also present in the bottom right corner.

Click on “select files” and upload your file from your computer here.

You will need to locate the CART file on your computer. If you saved directly from CART **without** changing the name of the file, do these steps to find your file on your computer:

- Click into C-drive
- QMS30 folder
- Workspace folder
- Outpatient folder
- Export folder
- you will see your file there –check the date and verify have the correct file.
- Click open

Choose *Select Files* to browse your computer or *Drag and Drop* the files into the highlighted area.

[Change Selection](#)

Production

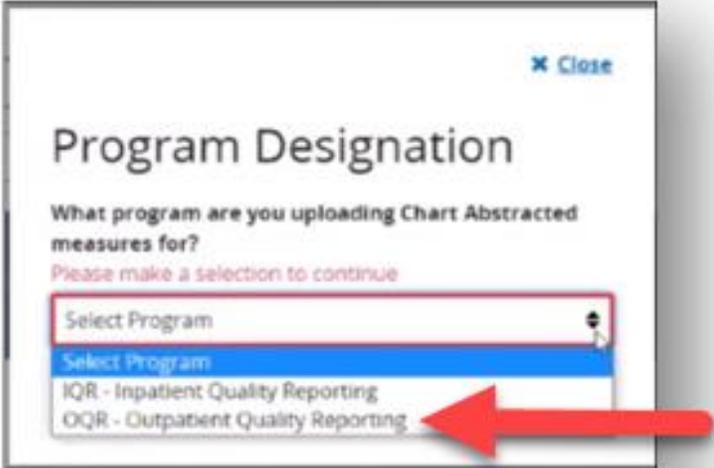
Search

Search

Batch File Name	Batch ID	Program	File Size	Upload Date	Uploaded By	Status
Outpatient.zip	3229698	OQR	448 kB	4/26/2021		Accepted
Outpatient.zip	3074634	OQR	447 kB	1/29/2021		Received
Outpatient.zip	604345	OQR	366 kB	10/30/2020		Received

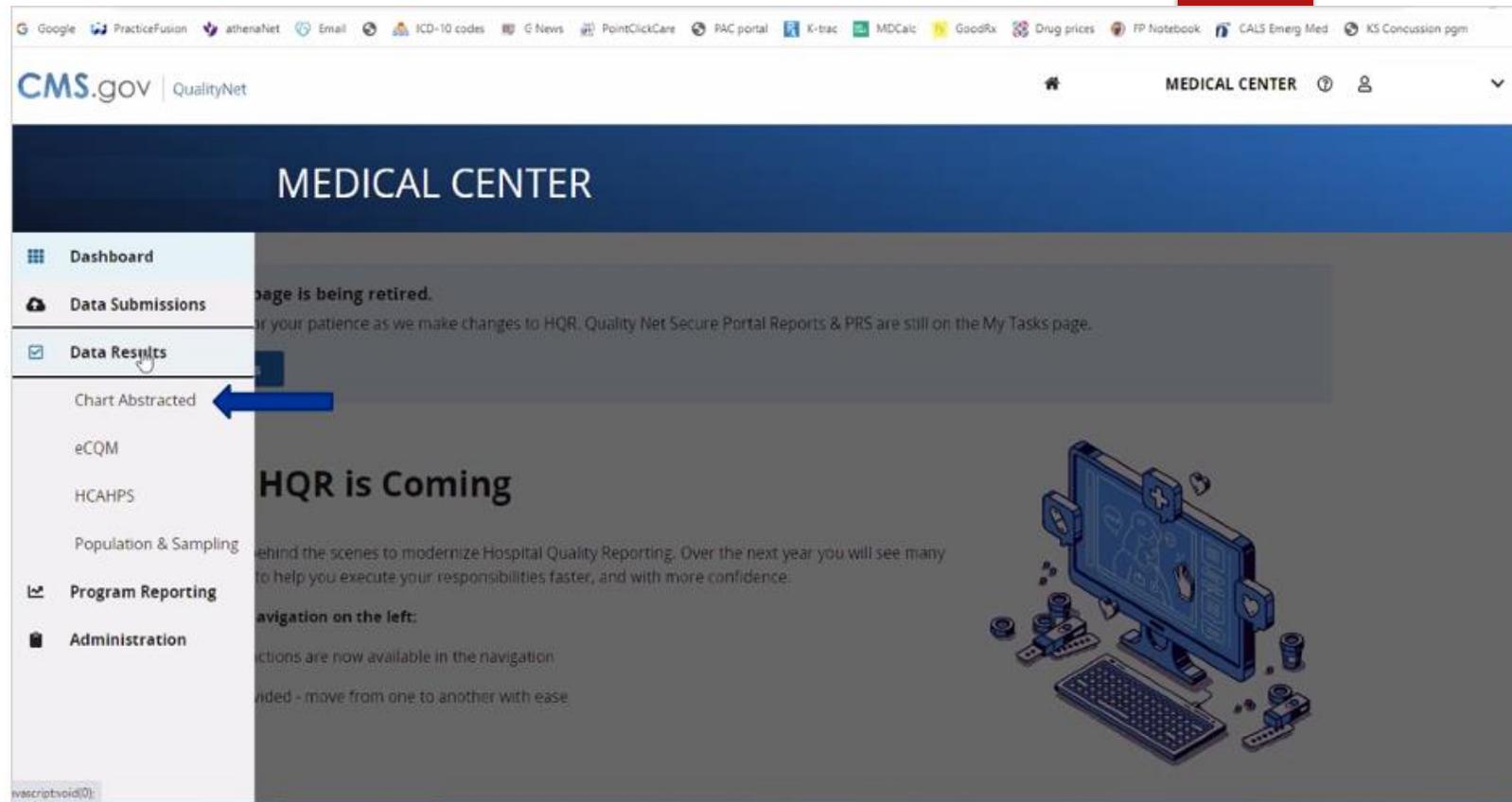
« Previous 1 Next »

You will see this popup appear, choose **OQR – Outpatient Quality Reporting** to upload the file.



Once all your data is uploaded, last step is important to verify the data was accepted at the warehouse.

Click on Data results, then Chart abstracted.



The first report called a Case Summary Report you MUST run is found here under File Accuracy.

Pick Selections as listed on slide:

Program: OQR

Report: Case Status Summary

Then put in the quarter you just entered or are going to verify.

Lastly, click on Export CVS.

The screenshot displays the 'Data Results - Chart Abstracted' interface on CMS.gov. It features a navigation sidebar on the left with icons for a grid, home, checkmark, left arrow, and folder. The main content area has two tabs: 'File Accuracy' (selected) and 'Claims Details'. Below the tabs, the 'File Accuracy' section includes a descriptive paragraph: 'This is where you see the accuracy of your files, and potential duplicates. It encompasses data from the Quality Net legacy reports, including: Case Status Summary, Submission Detail, and Potential Duplicate Records.' A configuration box contains three dropdown menus: 'Program' set to 'OQR', 'Report' set to 'Case Status Summary', and 'Encounter Quarter' set to 'Q3 2022'. To the right of these dropdowns is a blue 'Export CSV' button. The footer of the interface shows the CMS.gov logo and the text 'Hospital Quality Reporting'.

This is what the Case Status Summary Report looks like. You want to ensure your cases you submitted here are all **accepted**.

Watch your numbers to make sure they match how many patients you entered CART but also what you entered under population and sampling earlier on the HARP website.

If you have any cases rejected, you can run a submission detail report to see what was rejected. We show you how to run a submission detail report on the next slides.

OQR - Case Status Summary Report				
Quarter: 07/01/2022 - 09/30/2022				
Provider(s): ██████████				
Provider	Measure S	Unique Cases	Cases Accepted	Cases Rejected
	OQR-AMI	1	1	0
Footnote:				
Unique Cases (patient medical records) that were abstracted and submitted to the CMS Clinical Data Warehouse. Identical cases that are resubmitted are only counted once.				
Accepted Cases met the acceptance criteria and were successfully submitted and stored in the CMS Clinical Data Warehouse.				
Rejected Cases DO NOT count toward successful submission. For specific information on this case detail, please see the Hospital Reporting - Submission Detail Report.				
Deleted cases and test cases have been removed from all case counts.				

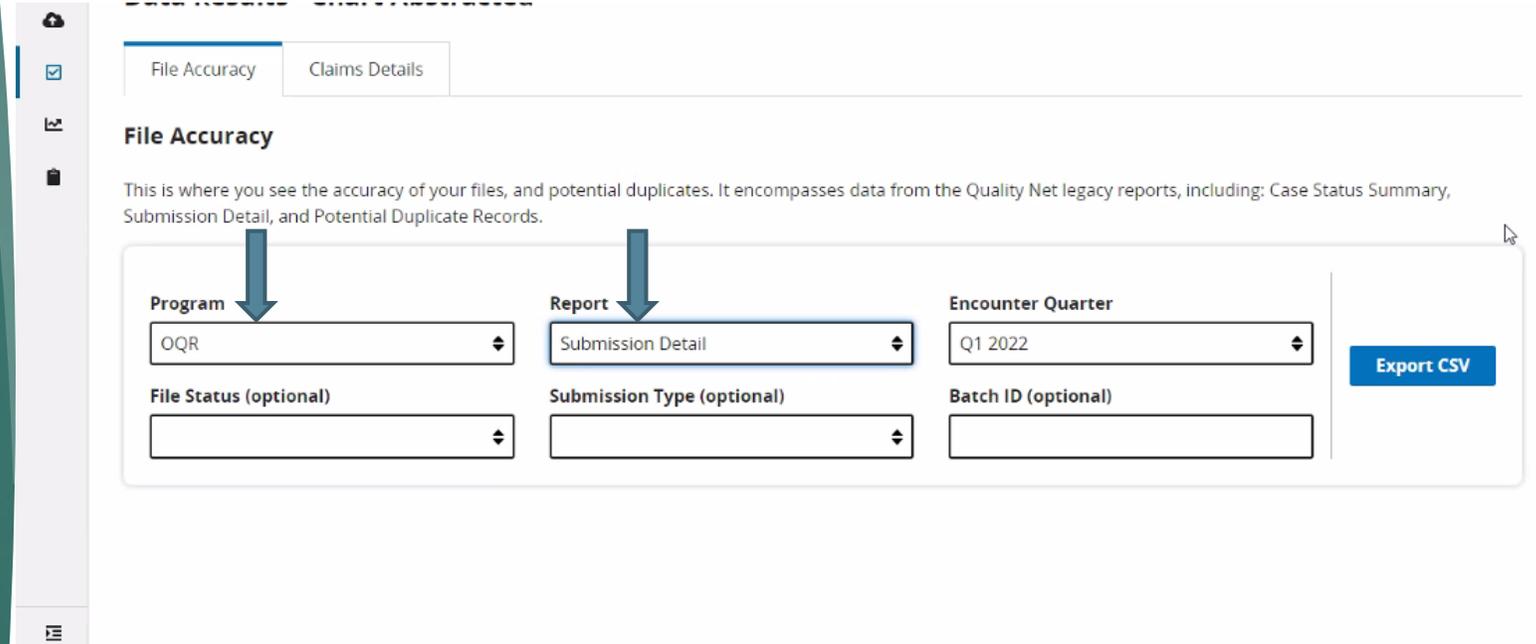
The 2nd report we recommend you run is the Submission Detail Report.

Pick sections as listed on slide:
Program: OQR
Report: Submission Detail

Then put in the quarter you just entered or are going to verify.

You do not need to fill out the optional sections

Click on Export CSV



The screenshot shows a web interface with two tabs: "File Accuracy" (selected) and "Claims Details". Below the tabs is the heading "File Accuracy" and a descriptive paragraph: "This is where you see the accuracy of your files, and potential duplicates. It encompasses data from the Quality Net legacy reports, including: Case Status Summary, Submission Detail, and Potential Duplicate Records." Below this is a form with several dropdown menus and a button. Two blue arrows point to the "Program" and "Report" dropdowns. The "Program" dropdown is set to "OQR" and the "Report" dropdown is set to "Submission Detail". The "Encounter Quarter" dropdown is set to "Q1 2022". There are also three optional dropdowns: "File Status (optional)", "Submission Type (optional)", and "Batch ID (optional)". A blue "Export CSV" button is located to the right of the form. A sidebar on the left contains icons for home, checkmark, list, and trash. A red vertical bar is visible in the top right corner of the overall image.

You should get an excel spreadsheet document that looks like this slide.

You want to see Accepted under File Status.

If it says Rejected there, then you need to read the message section and see why it may have been rejected and fix as needed.

Also check section under “Test Case” – if this says YES, then you clicked on Test earlier instead of production. If it says “YES” here, then your data will **not be** accepted into HARP. You want this section to say “NO” for all the entries.

OQR - Submission Detail Report
Quarter: 07/01/2021 - 09/30/2021
Provider(s): [REDACTED]

Provider ID	Measure S	Patient ID	Batch ID	Encounter [Arrival Tim	Upload Da	Action Cor	File Name	File Status	Test Case	Message
[REDACTED]	OQR-AMI	[REDACTED]	3326282	7/27/2021 12:37	#####	ADD	431305_7	ACCEPTED	No	37260 Informational Message: OP-2: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation o
[REDACTED]	OQR-AMI	[REDACTED]	3326282	7/27/2021 12:37	#####	ADD	431305_9	ACCEPTED	No	37265 Informational Message: OP-3: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation o
[REDACTED]	OQR-AMI	[REDACTED]	3326282	8/6/2021 23:23	#####	ADD	431305_8	ACCEPTED	No	37260 Informational Message: OP-2: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation o
[REDACTED]	OQR-AMI	[REDACTED]	3326282	8/6/2021 23:23	#####	ADD	431305_8	ACCEPTED	No	37265 Informational Message: OP-3: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation o

You want to see all “**Accepted**” under File Status and all “**NO**” under Test Case.

Case Summary Report

OQR - Case Status Summary Report
Quarter: 07/01/2022 - 09/30/2022
Provider(s): [REDACTED]

Provider	Measure S	Unique Case	Cases Accepted	Cases Rejected
[REDACTED]	OQR-AMI	1	1	0

Footnote:
Unique Cases (patient medical records) that were abstracted and submitted to the CMS Clinical Data Warehouse. Identical cases that are resubmitted are only counted once.
Accepted Cases met the acceptance criteria and were successfully submitted and stored in the CMS Clinical Data Warehouse.
Rejected Cases DO NOT count toward successful submission. For specific information on this case detail, please see the Hospital Reporting - Submission Detail Report.
Deleted cases and test cases have been removed from all case counts.

Submission Detail Report

OQR - Submission Detail Report
Quarter: 07/01/2021 - 09/30/2021
Provider(s): [REDACTED]

Provider ID	Measure S	Patient ID	Batch ID	Encounter (Arrival Tim	Upload Da	Action	Coc	File Name	File Status	Test Case	Message
[REDACTED]	OQR-AMI	[REDACTED]	3326282	7/27/2021	12:37	#####	ADD	431305_9	ACCEPTED	No	37260 Informational Message: OP-2: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation c
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[REDACTED]	OQR-AMI	[REDACTED]	3326282	8/6/2021	23:23	#####	ADD	431305_8	ACCEPTED	No	37260 Informational Message: OP-2: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation c
[REDACTED]	OQR-AMI	[REDACTED]	3326282	8/6/2021	23:23	#####	ADD	431305_8	ACCEPTED	No	37265 Informational Message: OP-3: EXCLUDED - Initial ECG Interpretation [INITECGINT] indicates there was no documentation c

If you have any cases rejected in your Case Summary Report, you can run the Submission Detailed Report to see exactly what patients were rejected.

If you only have a few rejected patients under the Submission Detail Report, you can look at the dates and months of the rejected patient. If you have 63 accepted patients for the quarter, you don't need to go back and change things in CART. If you don't have at least 63 accepted patients per quarter, then you will need to change data in CART and start the upload process all over.

Congratulations!

You have completed
your HARP data for the
quarter.



► For more information Contact:



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