



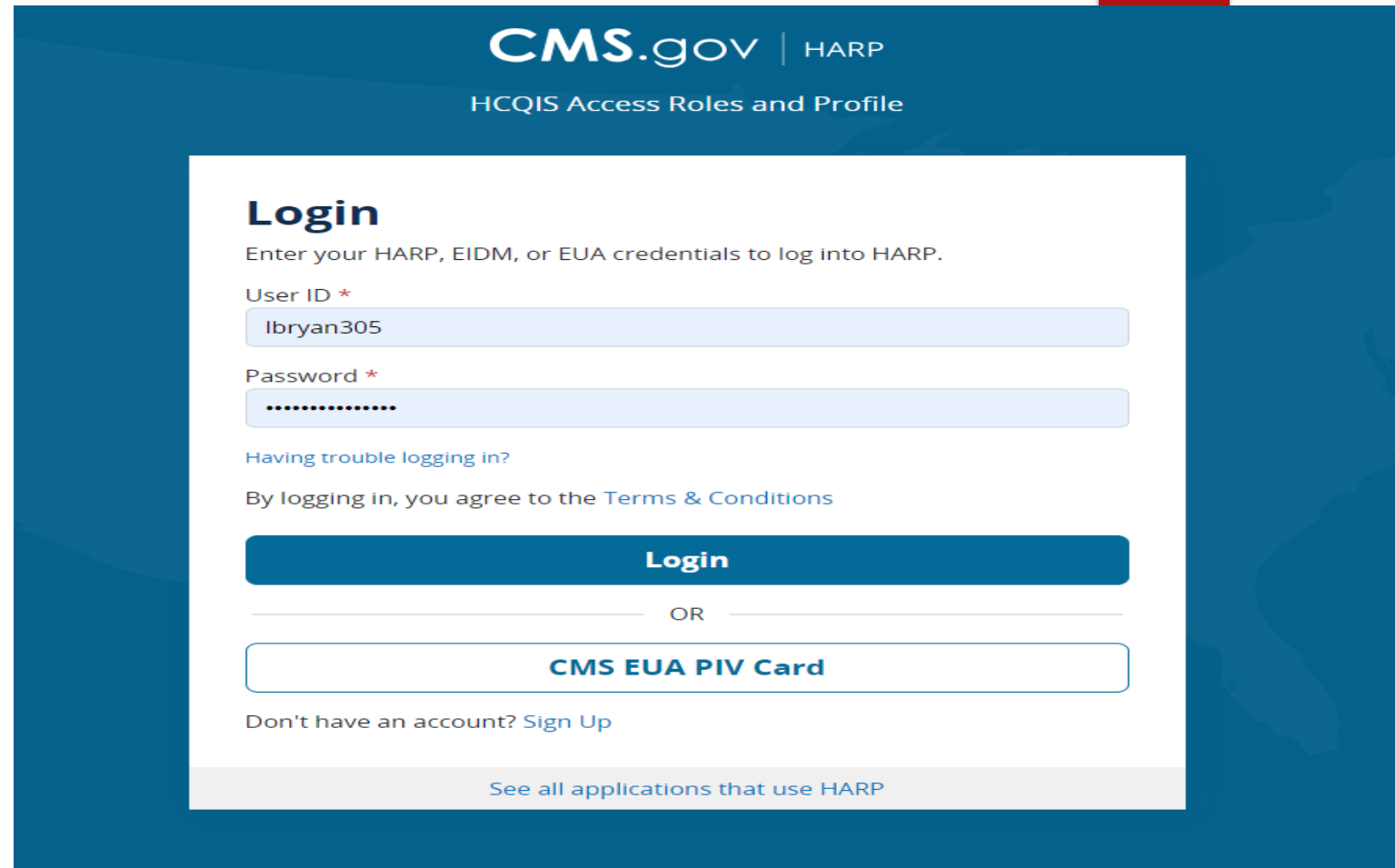
How to
enter data
for OP-18

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

<https://harp.cms.gov/login/login>

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

No data is entered here.

A screenshot of the CMS.gov HARP login page. The page has a blue header with the CMS.gov logo and 'HARP' text. Below the header, it says 'HCQIS Access Roles and Profile'. The main content area is white and contains a 'Login' section. It prompts the user to enter HARP, EIDM, or EUA credentials. There are input fields for 'User ID' (containing 'lbryan305') and 'Password' (masked with dots). Below the password field, there is a link for 'Having trouble logging in?' and a statement that by logging in, the user agrees to the 'Terms & Conditions'. A blue 'Login' button is present. Below this, there is an 'OR' separator and a button for 'CMS EUA PIV Card'. At the bottom of the login section, there is a link for 'Don't have an account? Sign Up'. A footer link says '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 - USA

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

This is what your initial page will look similar to when you first login and are ready to enter data.

The screenshot displays the CMS.gov Hospital Quality Reporting interface. On the left is a vertical sidebar with icons for a grid, a cloud, a checkmark, a list, a folder, and a menu. The main content area features a horizontal menu with tabs: eCQM, Web-based Measures, Population & Sampling (which is selected and highlighted with a blue underline), Chart Abstracted, HCAHPS, Structural Measures, and Hybrid Measures. Below this menu are two buttons: 'File Upload' and 'Data Form'. A text instruction reads: 'Choose *Select Files* to browse your computer or *Drag and Drop* the files into the highlighted area.' Below this is a section titled 'Select a Submission Type' containing two buttons: 'Test' and 'Production', each with a right-pointing chevron. The footer is a dark blue bar containing the text 'CMS.gov | Hospital Quality Reporting' and a list of links: 'CMS.gov', 'QualityNet', 'Support', 'CCSQ Support Center', 'Accessibility', 'Privacy Policy', 'Terms of Use', and 'Vulnerability Disclosure Policy'.

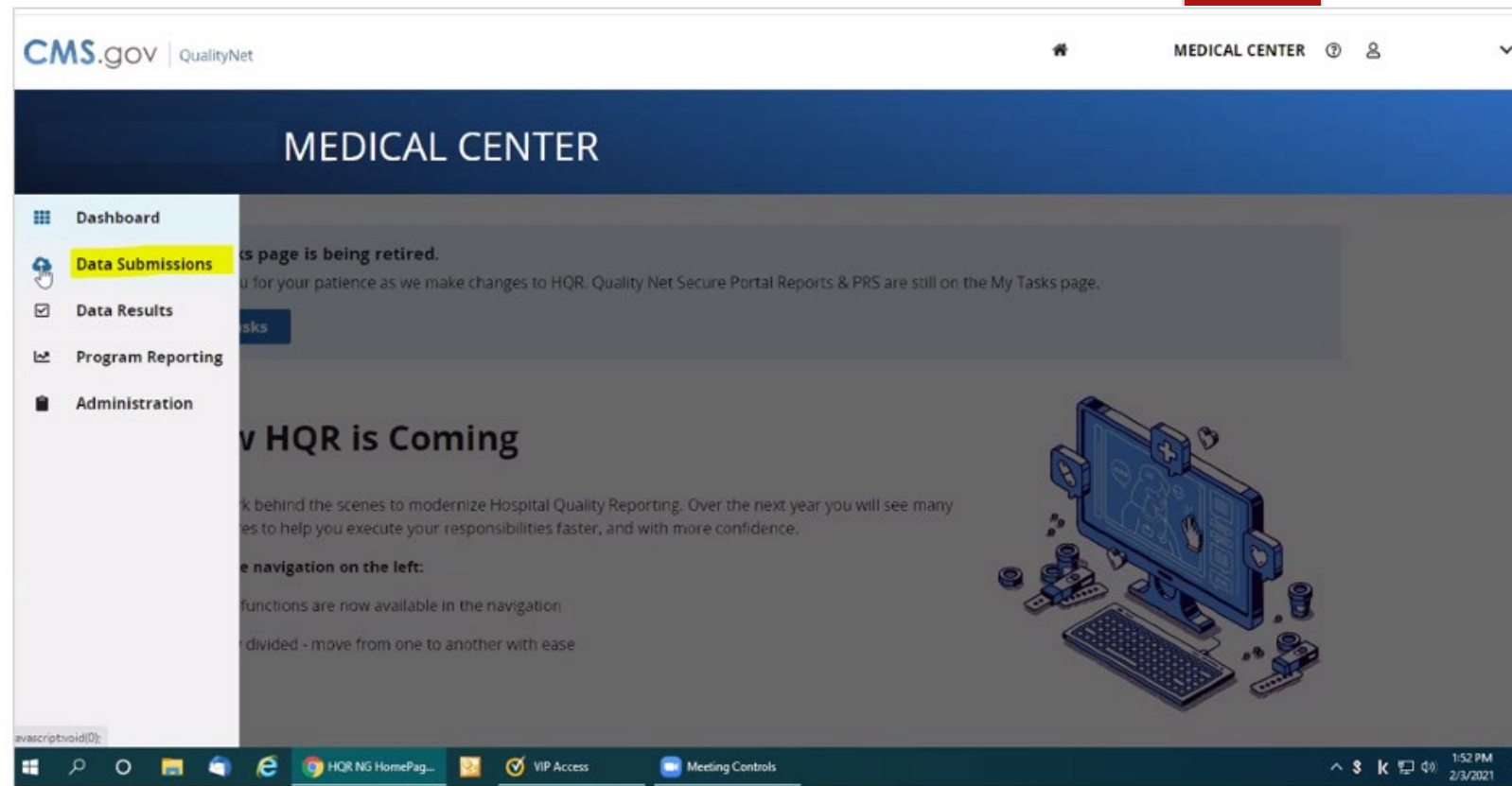
CMS.gov | Hospital Quality Reporting

CMS.gov QualityNet Support CCSQ Support Center

Accessibility Privacy Policy Terms of Use Vulnerability Disclosure Policy

First, we will start with entering Population and Sampling Data.

Click on Data Submissions on the left side bar to start



Next, you will enter your numbers into Population and Sampling.

Sampling makes it possible to not have to enter every case for the quarter.

MEDICAL CENTER

eCQM

Web-based Measures

Population & Sampling

Chart Abstracted

HCAHPS

File Upload

Data Form

Click # 1

Click #2

Select the Data Form

IQR

Launch Data Form ⓘ

OQR

Launch Data Form ⓘ

Click #3

Check your reporting period on the top right and ensure you are on the right quarter.

Then, click “Start” for section you are reporting on.

- Dashboard
- Data Submissions**
- Data Results
 - Chart Abstracted
 - eCQM
 - HCAHPS
 - Hybrid Measures
 - Population & Sampling
- Program Reporting
- Administration

Unlock Menu

[< Data Submissions](#)

Outpatient Quality Reporting

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

CMS Certification Number: 431305

Submission Period: 07/01/2025 - 02/02/2026

With Respect to Reporting Period: 07/01/2025 - 09/30/2025

Current Submission Period: **Open**

OQR-ED (voluntary) ⚠ Not Submitted

Emergency department throughput

OQR-STK (voluntary) ⚠ Not Submitted

Stroke

For Paperwork Reduction Act Notice, see Specification Manual.

Reporting Period

Q3 2025

Export PDF

Start

Start

Sampling Option Dropdown:

Sampled = you will only submit a **portion** of your ER patients for the quarter

Not Sampled = you will submit **all** your ER patients for the quarter

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.

Sampling Option

* Sampling Option (Sampling Option)



Sampled

Not Sampled

N/A submission not required

Most of you will be in the 0-900 category of total patients for the quarter. This means you will need to abstract a minimum quarterly sample size of 63. We recommend 25 per month (75 per quarter) because if a few of your entries get rejected, you likely still have enough. 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

Population = All ER patients seen
Sampling = Portion of your patients.
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 the **SAME** numbers in both Population and Sampling sections. Click Submit when done.

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

< Index Page

OQR-ED
Emergency department throughput

* Required

Population

* All fields are required. If you have no data for a particular item, please enter '0'.

	July	August	September	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

Sampling Option *

* All fields are required. If you have no data for a particular item, please enter '0'.

	July	August	September	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

Submit Cancel

Here is an example only for OP-18 if you decide to sample. This is an older slide but the concept is still the same.

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 total/quarter**. There is no specifics on how many Medicare or non-Medicare you include.

Click on **Submit** 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:

-

Example of Sampling:

In this example, you have more than 21 patients in the total population in July and September, but the August population is not sufficient for sampling (only 19.) 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

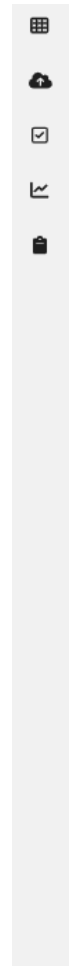
Total population:	SEPTEMBER	
	Medicare	13
	Non-Medicare	15
	Total	28
Sampled		
	Medicare	11
	Non-Medicare	10
	Total	21

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



South Dakota
Association of Healthcare Organizations

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

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

Reporting Period: Q3 2020

✓ 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 abstract patient data.

Click on areas in order specified in this snapshot.

1. Data Submissions
2. Chart Abstracted
3. Data Form
4. Production

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

The screenshot shows a web application interface for data submissions. On the left is a vertical sidebar with a light gray background and dark blue text. It contains five menu items: 'Dashboard' (with a home icon), 'Data Submissions' (with a document icon), 'Data Results' (with a bar chart icon), 'Program Reporting' (with a list icon), and 'Administration' (with a gear icon). The 'Data Submissions' item is highlighted with a pink circle and a pink number '1' to its right. To the right of the sidebar is a main content area with a white background and a blue header bar. The header bar contains a row of seven tabs: 'eCQM', 'Web-based Measures', 'Population & Sampling', 'Chart Abstracted', 'HCAHPS', 'Structural Measures', and 'Hybrid Measures'. The 'Chart Abstracted' tab is highlighted with a pink circle and a pink number '2' above it. Below the tabs is a section with two buttons: 'File Upload' and 'Data Form'. The 'Data Form' button is highlighted with a pink circle and a pink number '3' to its right. Below these buttons is a text prompt: 'Choose Select Files to browse your computer or Drag and Drop the files into the highlighted area.' Below this prompt is a section titled 'Select a Submission Type' with two buttons: 'Test' and 'Production'. The 'Production' button is highlighted with a pink circle and a pink number '4' to its right. The 'Test' button is not highlighted.

Click on Launch Data Form

Dashboard

Data Submissions

Data Results

Program Reporting

Administration

Unlock Menu

eCQM Web-based Measures Population & Sampling **Chart Abstracted** HCAHPS Structural Measures Hybrid Measures

File Upload Data Form

Select the Data Form

OQR	Launch Data Form
-----	------------------

Use the dropdown at the far right to select the correct encounter quarter you are reporting for.

Then click on “view” under **OQR-ED Emergency Department Throughput**

Dashboard

Data Submissions

Data Results

Program Reporting

Administration

< Data Submissions

Outpatient Quality Reporting (OQR)

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

CMS Certification Number [REDACTED]

Submission Period: 10/01/2024 - 05/01/2025

With Respect to Reporting Period: 10/01/2024 - 12/31/2024

Current Submission Period: **Open**

OQR-ED

Emergency department throughput

View

OQR-STK

Stroke

View

* For Paperwork Reduction Act Notice, see Specifications Manual.

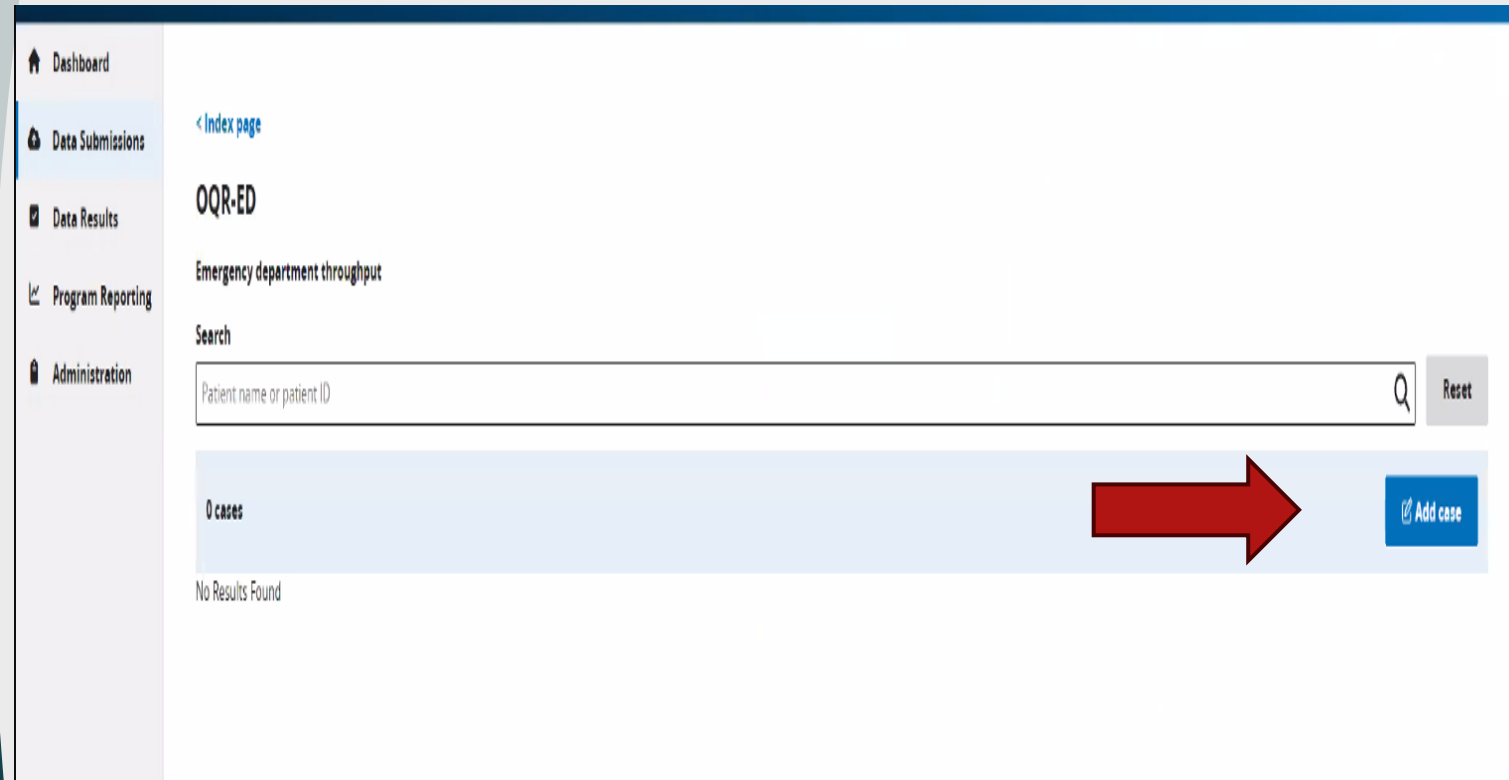
Encounter quarter

4Q2024

1Q2025

4Q2024

Click on “Add Case”



Dashboard

Data Submissions

Data Results

Program Reporting

Administration

< Index page

OQR-ED

Emergency department throughput

Search

Patient name or patient ID

Reset

0 cases

Add case

No Results Found

Here you will add information for a specific patient.

Once information has been entered then click **submit**.

You will then continue adding patient cases with specific patient information until you have added all your patients for that quarter.

The screenshot shows a web application interface for adding patient information. On the left is a sidebar with navigation links: Dashboard, Data Submissions (highlighted), Data Results, Program Reporting, and Administration. The main content area has a header with a '< Back' link and a title 'OQR-ED Emergency department throughput'. Below this is a form titled 'Patient' with the following fields: 'Patient ID *' (text input), 'First Name' (text input), 'Last Name' (text input), 'Sex Assigned at Birth *' (dropdown menu), 'Gender Identity' (dropdown menu), 'Sexual Orientation' (dropdown menu), and 'Date of Birth *' (date picker). A red asterisk indicates required fields. On the right side of the form, there is a box containing the following information: 'CMS Certification Number:' followed by a redacted black box, 'Submission Period: 01/01/2025 - 08/01/2025', 'With Respect to Reporting Period: 01/01/2025 - 03/31/2025', and 'Last Updated: -'. A legend at the top right states '* Indicates required field'. At the bottom left of the form area is a green circular icon with a white pencil.

As you continue entering patients, you will see them show up in a listing similar to this screenshot

Dashboard

Data Submissions

Data Results

Program Reporting

Administration

< Index page

OQR-ED

Emergency department throughput

Search

Patient name or patient ID

Reset

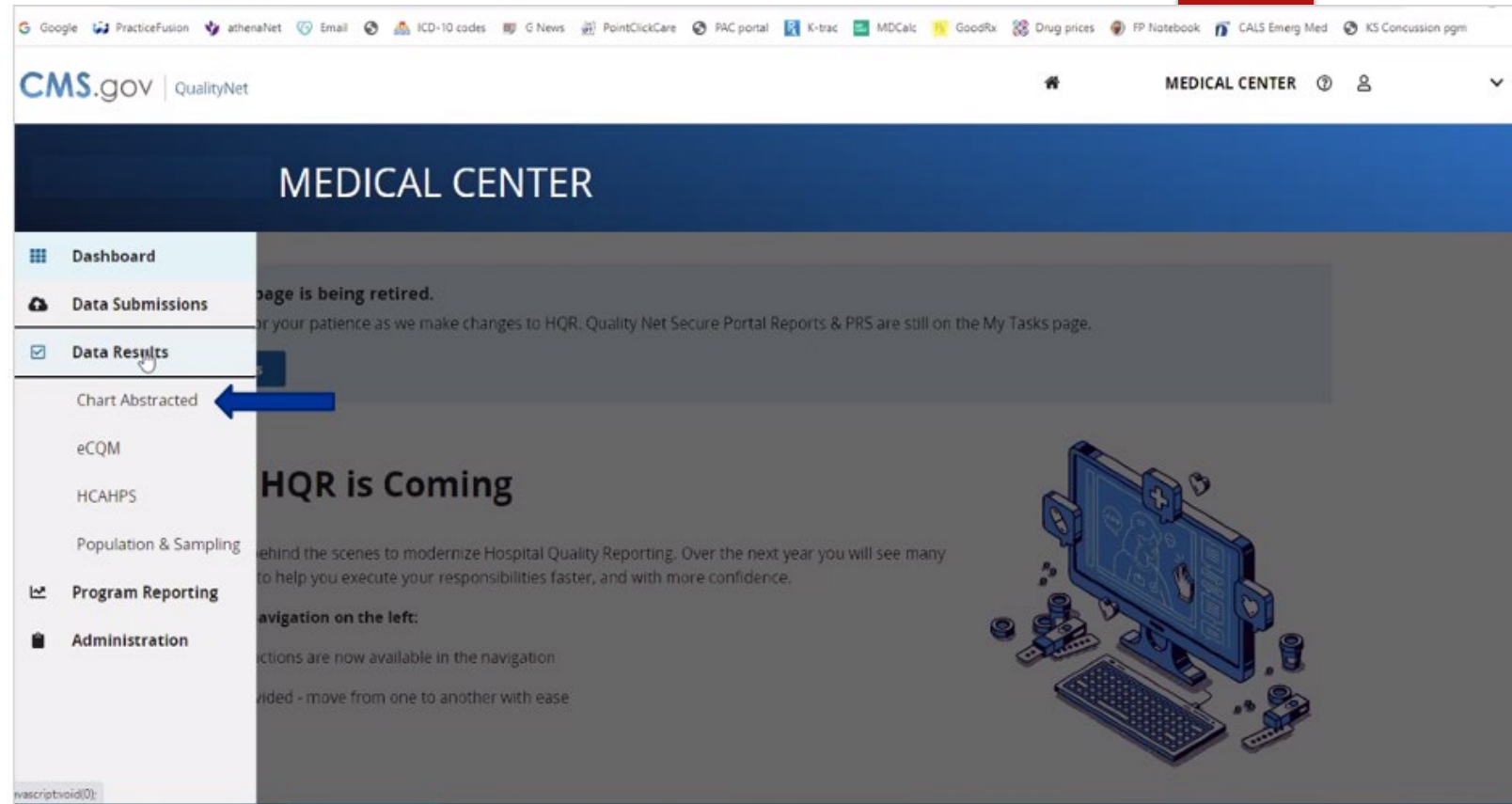
69 cases

Add case

Patient	Encounter date	Arrival time	Status	Outcome	Updated
[REDACTED]	Dec. 3, 2024	21:09	Accepted	OP-18a: 111 min. OP-18b: 111 min. OP-18c: Excluded OP-18d: Excluded	Feb. 21, 2025 11:18 AM
[REDACTED]	Dec. 19, 2024	10:21	Accepted	OP-18a: 173 min. OP-18b: 173 min. OP-18c: Excluded OP-18d: Excluded	Feb. 21, 2025 11:15 AM

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 CSV.

Data Results - Chart Abstracted

[File Accuracy](#)
[Claims Details](#)

File Accuracy

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.

Program

Report

Encounter Quarter

[Export CSV](#)

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

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): [REDACTED]				
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.

Make sure to choose **production** under submission type

Click on Export CSV

Dashboard

Data Submissions

Data Results

Chart Abstracted

eQOM

HCAHPS

Hybrid Measures

Population & Sampling

Program Reporting

Administration

Data Results - Chart Abstracted

File Accuracy

Claims Details

File Accuracy

This is where you see the accuracy of your files, and potential duplicates. It encompasses data from the Quarterly legacy reports, including: Case Status Summary, Submission Detail, and Potential Duplicate Records.

Program

Report

Encounter Quarter

File Status (optional)

Submission Type (optional)

Batch ID (optional)

Export CSV

OQR

Submission Detail

Q4 2024

Production

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 ID	Patient ID	Batch ID	Encounter ID	Arrival Time	Upload Date	Action	Corr	File Name	File Status	Test Case	Message
[REDACTED]	CC 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]	CC 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]	CC 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]	CC 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.

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 at least 63 accepted patients for the quarter, you don't need to go back and make changes** because you will have met the minimum for the quarter. If you don't have at least 63 accepted patients per quarter, then you will need to make changes to some rejected cases and resubmit.

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
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 ID	Arrival Time	Upload Date	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
[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 c
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[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

Congratulations!

You have completed
your OP18 data for the
quarter.



For more information Contact:



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