The Centers for Medicare & Medicaid Services (CMS) is granting exceptions[1] under certain Medicare quality reporting and value-based purchasing programs located in areas affected by the Texas Severe Winter Storm to assist these providers while they direct their resources toward caring for their patients and repairing structural damages to facilities.

Affected counties designated by the Federal Emergency Management Agency (FEMA) under the Texas Severe Winter Storm (DR-4586-TX) disaster declarations are located at Designated Areas: Disaster 4586 under sections Public Assistance PA-A and PA-B of the FEMA website. If FEMA expands the current emergency disaster declarations to include additional counties, sections PA-A and PA-B will be updated to reflect the newly designated counties.

This exception is for acute care hospitals, ambulatory surgical centers (ASCs), Prospective Payment System (PPS)-exempt Cancer Hospitals (PCHs), inpatient psychiatric facilities (IPFs), inpatient rehabilitation facilities (IRFs), Long-Term Care Hospitals (LTCHs), and skilled nursing facilities (SNFs) and affects the following programs and deadlines:

Program	Affected Measure/Requirement(s)	Reporting Period(s)*
Hospital Outpatient Quality Reporting (OQR) Program	Population and Sampling	Q1 2021 (January 1, 2021-March 31, 2021)
	Patient-level chart-abstracted clinical data: OP-2, OP-3, OP-18, OP-22, OP-23	Q1 2021
Ambulatory Surgical Centers Quality Reporting (ASCQR) Program	ASC-9 Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients ASC-11 Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary) ASC-13 Normothermia ASC-14 Unplanned Anterior Vitrectomy	Q1 2021
Hospital Inpatient Quality Reporting (IQR) Program	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)	Q1 2021
	Population and Sampling	Q1 2021

[1] The terminology "exception" is used as a general term intended for ease of reference, to collectively refer to policies established under separate programs, and may not be consistent with the specific terminology established under each individual program.

	Patient-level, chart-abstracted clinical data: SEP-1 and PC-01	Q1 2021
Data Validation/ HAI Validation Templates	HAC Reduction-HAI	Q1 2021
Data Validation/ CDAC Record Requests	Hospital IQR, HAC Reduction-HAI, Hospital OQR	Q1 2021
Hospital-Acquired Condition (HAC) Reduction Program	Healthcare-Associated Infection (HAI) data: CLABSI, CAUTI, Colon and Abdominal Hysterectomy SSI, MRSA, CDI	Q1 2021
Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program	Chart-abstracted measures: Hospital-Based Inpatient Psychiatric Services (HBIPS)-2, -3, and -5; Screening for Metabolic Disorders; Substance Use (SUB)-2/-2a and -3/-3a; Tobacco Treatment (TOB)-2/-2a and -3/-3a; Transition Record with Specified Elements Received by Discharged Patients; Timely Transmission of Transition Record; Influenza Immunization (IMM-2); and non-measure data	Q1 2021
PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program	HAI data: CLABSI, CAUTI, Colon and Abdominal Hysterectomy SSI, MRSA, CDI, Flu Vaccination Coverage Amongst HCP, CY 2020 OCM (PCH-15) Measure (web-based)	Q1 2021
	HCAHPS	Q1 2021
Post-Acute Care Quality Reporting Programs: IRFs, LTCHs, and SNFs	All Quality Reporting Program (QRP) reporting requirements, including the reporting of data on measures and any other data requested by CMS for the post-acute care (PAC) quality reporting programs	IRFs – Q1 2021 LTCs – Q1 2021 SNFs – Q1 2021
Merit-based Incentive Payment System (MIPS) Eligible Clinicians	Electronic Clinical Quality Measures (eCQMs), MIPS Clinical Quality Measures (CQMs), Qualified Clinical Data Registry (QCDR) Measures, Medicare Part B claims measures, CMS Web Interface measures, and; Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS survey.	2021 Performance Period

*Q1 2021 is January 1, 2021-March 31, 2021

End-Stage Renal Disease Quality Incentive Program (ESRD QIP)
Dialysis facilities should note that CMS has not issued exceptions for ESRD QIP to address the impact of the Texas Severe Winter Storm due to the current suspension of clinical data submission requirements. Impacted dialysis facilities should submit ECE requests according to the process and form found on www.QualityNet.cms.gov. Forms should be submitted to esrdqip@cms.hhs.gov within 90 days of the event.

Extraordinary Circumstances Exceptions (ECE)
Providers located outside the counties listed in the FEMA disaster declaration are not covered by

this communication, but they may request an exception to the reporting requirements under one or more Medicare quality reporting or value-based purchasing programs they participate in using the applicable ECE procedure for the respective program(s). In addition, providers located within a county listed in the FEMA disaster declaration who seek an exception for a reporting requirement not covered by this communication may request an individual exception using the applicable ECE procedure for the respective program(s). CMS will assess and decide upon each extraordinary circumstances exception request on a case-by-case basis.

Hospitals should be aware of the potential impact to reporting requirements and payment programs when deciding whether or not to report data included in the exceptions. If data is submitted, it may be publicly reported or used in scoring.

Please refer to the ECE request process and form specific to the program for additional information.

Program	ECE Email Contact for Inquiries	Website link to ECE Information
Hospital Quality Reporting Programs (IQR, IPFQR, PCHQR, HVBP, ASCQR, OQR, HACRP, HRRP, Validation)	QRFormsSubmission@hsag.com	Hospital Quality Reporting (HQR) ECE Information
ESRD QIP	ESRDQIP@cms.hhs.gov	End Stage Renal Disease Facilities / ESRD Quality Incentive Program (QIP) / Information
SNF VBP	SNFVBPinquires@cms.hhs.gov	Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program ECE Information
Promoting Interoperability (PI) Program for Hospitals	qnetsupport@hcqis.org	Promoting Interoperability (PI) ECE Information
MIPS/Quality Payment Program (QPP)	qpp@cms.hhs.gov	Quality Payment Program (QPP) Quality Payment Program (QPP) Resource Center
IRF	IRFQRPReconsiderations@cms.hhs.gov	Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP) ECE Information
LTCH	LTCHQRPReconsiderations@cms.hhs.gov	Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) ECE Information
SNF	SNFQRPReconsiderations@cms.hhs.gov	Skilled Nursing Facility (SNF) ECE Information
Home Health	HHAPUreconsiderations@CMS.hhs.gov	Home Health Quality Reporting (HHQR) Program ECE Information
Hospice	HospiceQRPReconsiderations@cms.hhs.gov	Hospice Quality Reporting Program ECE Information

Additional information regarding CMS' response to the Texas winter storms is located at

https://www.cms.gov/newsroom/press-releases/cms-offers-comprehensive-support-state-texas-combat-winter-storm.

Please do not respond directly to this email. For assistance regarding the information contained in this message, please contact the Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Team at https://cmsqualitysupport.servicenowservices.com/qnet_qa, or (844) 472-4477. For questions regarding technical issues, contact the *QualityNet* Help Desk at: qnetsupport@hcqis.org.