

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-02-01
Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality

May 12, 2023

Matthew Whaley
Community Hospital of Huntington Park
2623 East Slauson Avenue
Huntington Park, CA 90255

**NOTICE OF QUALITY REPORTING PROGRAM NONCOMPLIANCE DECISION
UPHELD**

Re: Fiscal Year 2024 Annual Payment Update for **Community Hospital of Huntington Park**
CMS Certification Number **050091**
Hospital Inpatient Quality Reporting Program

Dear Mr. Matthew Whaley:

Thank you for requesting reconsideration of the decision made by the Centers for Medicare & Medicaid Services (CMS) to reduce the **Fiscal Year (FY) 2024 Annual Payment Update (APU)** for Community Hospital of Huntington Park by one-fourth.

In a letter dated March 9, 2023, CMS stated that Community Hospital of Huntington Park was subject to a penalty because it did not meet requirements of the Hospital Inpatient Quality Reporting (Hospital IQR) Program. **The requirement that facilities participating in the Hospital IQR Program report quality data to CMS is set forth in 42 Code of Federal Regulations (CFR) Part 412, Subpart H.** The FY 2024 Hospital IQR Program Final Rule can be found in the Federal Register (FR) at 87 FR 48780, and annual updates to program requirements can be found at www.federalregister.gov. CMS's decision was based on noncompliance with the following Hospital IQR Program requirement(s):

- **Submit complete data for each required clinical process measure by the posted submission deadlines - 2022 [PC-01 - Q1]**

We reviewed your reconsideration request and decided to uphold the decision to reduce the FY 2024 APU. Under 42 CFR Part 405, Subpart R, Community Hospital of Huntington Park may appeal this decision through the Provider Reimbursement Review Board (PRRB) within 180 days of the date of this letter. The PRRB is an independent panel to which a certified Medicare service provider that is dissatisfied with a final determination of its Medicare Administrative Contractor or CMS may appeal. Instructions for requesting a hearing with the PRRB are available at www.cms.gov/Regulations-and-Guidance/Review-Boards/PRRBReview. Please direct any questions you have regarding the filing of a PRRB review to the Board. Board representatives can be reached by phone at (410) 786-2671 or by email at PRRB@cms.hhs.gov.

I appreciate the opportunity to respond to your request regarding the Hospital IQR Program. Please address any questions or concerns regarding this reconsideration decision to the Appeals and Reconsiderations Program Lead, Shannon Kerr, by telephone at (410) 786-0666 or by email at Shannon.Kerr1@cms.hhs.gov.

Thank you for your participation in the Hospital IQR Program.

Sincerely,

/s/

Lee A. Fleisher, MD
Chief Medical Officer and Director, Center for Clinical Standards and Quality
Centers for Medicare & Medicaid Services