



Ambulatory Surgical Center Quality Reporting Program

Support Contractor

CY 2019 OPPTS/ASC Proposed Rule: Ambulatory Surgical Quality Reporting (ASCQR) Program

Questions & Answers

Moderator:

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2 p.m.

Question: Can you please explain why a change to HCAHPS, the inpatient survey, is included in the outpatient surgery proposed rule instead of the inpatient proposed rule?

Answer: There are components of the survey that pertain to the outpatient setting. We cannot speak to the Inpatient Proposed Rule. You can submit your question in the QualityNet Question and Answer Tool. You can also visit numerous resources available by accessing the CMS website at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HospitalQualityInits/HospitalHCAHPS.html>. You can also view the HCAHPS website at: <https://www.hcahpsonline.org/>.

Question: The National Healthcare Safety Network (NHSN) measure isn't that difficult. Removing this important measure for this reason seems absurd.

Answer: CMS looks forward to feedback from providers on all these proposals. You can submit your comment to CMS regarding this Proposed Rule. How to submit comments will be covered at the end of this webinar.

Question: Do you anticipate adding any measures in the future that would need access to NHSN? I ask because getting access to report there was



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extremely involved, and I don't want to have to go through that again if we don't access the site and lose that function.

Answer: Please remember that this is a Proposed Rule. The Final Rule will be posted sometime in November 2018. Only at that time will we know if this measure will be removed. But at this time, there is nothing additional in the 2019 Proposed Rule that would require NHSN registration for this program. Any changes or proposals for this program will be communicated through the rule process. State and local requirements also vary for the reporting of influenza vaccination data.

Question: If the proposed removal of the ASC-8 measure is finalized for CY 2020, which actual calendar years, or flu season, will the ASCs stop reporting this data?

Answer: If the removal of ASC-8 is finalized in November, the last time ASCs would be required to report data for this measure was the last submission deadline of May 15, 2018. ASCs would no longer report for this measure for the ASCQR Program.

Question: ASC-11 is currently voluntary, correct?

Answer: Yes, that is correct. Currently, the ASC-11 is still voluntary for the program.

Question: In reference to the chart summary of changes, when a measure is noted as being removed for CY 2020, does that mean in the beginning of 2020 it would be removed and we would not need to collect it? Or does this mean we would still collect data for that measure in 2019?

Answer: If the removal of ASC-1, -2, -3, and -4 is finalized in November, the last time ASCs would be required to include QDCs on at least their 50% of their claims would be December 31, 2018.

If the removal of ASC-8 is finalized in November, the last time ASCs would be required to report data for this measure was the last submission deadline of May 15, 2018. ASCs would no longer report for this measure.

If the removal of ASC-9, -10, and -11 is finalized in November, the last time ASCs will be required to report data for these measures would be May 15, 2019 for calendar year 2018 encounters.



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Question: Since the 2018/2019 flu season starts on October 1st, would the ASCs still be able to report their data by May 15, 2019 if they still have access to NHSN even though it would not be required if they chose to?

Answer: As this is only the Proposed Rule, any and all finalized proposals will be communicated through the Final Rule in November. At this time, we have not been given any information that this measure could be reported voluntarily for this program. Please be aware of your state's mandate on reporting this information.

Question: Very big measures are being removed. Are all these based on comments? If people want to keep them, they stay; is that correct?

Answer: Submitting your comments is your opportunity to influence this program. CMS is always evaluating comments, and they want your comments regarding these proposals. Please comment by September 24. All comments are addressed and will be included in the Final Rule.

Question: So, patients that show up on ASC-4 will also show up on ASC-12?

Answer: The ASC-4 and ASC-12 measures address completely different data elements. The data for ASC-12 is calculated through paid Medicare claims. This measure is for all-cause, unplanned hospital visits within seven days of an outpatient colonoscopy. The ASC-4 measure is a claims-based measure that calculates the percentage of ASC patients who are transferred or admitted to a hospital upon discharge from the ASC, regardless of what procedure was done.

Question: We continue to report until final, correct?

Answer: Yes. All proposals, finalized or not, will be discussed in the Final Rule due to be published in November 2018.

Question: When the removal occurs, do we stop collecting data the year before the Calendar year stated? For example, for proposed removal of CY 2020, do we stop collecting data in 2020?

Answer: No, the Proposed Rule refers to Payment Determination years. If the removal of ASC-1, -2, -3, and -4 is finalized in November, the last time ASCs would be required to include QDCs on at least their 50% of their claims would be December 31, 2018. If the removal of ASC-8 is finalized in November, the last time ASCs would be required to report data for this



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measure was the last submission deadline of May 15, 2018. ASCs would no longer report for this measure. If the removal of ASC-9, -10, and -11 is finalized in November, the last time ASCs will be required to report data for these measures would be May 15, 2019 for calendar year 2018 encounters.

Question: How is the data for the Normothermia and Unplanned Anterior Vitrectomy measures being collected?

Answer: The Normothermia and Unplanned Anterior Vitrectomy measures are web-based and will be collected by the facility and submitted via the online submission tool in QualityNet. These measures have a submission deadline of May 15, 2019, using patient encounters from January 1, 2018 through December 31, 2018.

Question: When I reviewed our results on ASC-12 as compared to the state and nation, the results were all within a narrow range. I have also noted that admissions on the same day, not necessarily after the procedure, count as do admissions that have absolutely nothing to do with the procedure. Also, patients who go to the ED for pain, for example, and are discharged without treatment also count. Can you explain the purpose of this measure?

Answer: This measure will reduce adverse patient outcomes associated with preparation for colonoscopy, the procedure, and follow-up care by capturing and making more visible to providers and patients all the unplanned hospital visits following the procedure. To communicate directly with the measure steward of this measure, you can enter your question in the Question and Answer Tool in QualityNet.

Question: Please explain the calendar year we collect the measure and the covered year of payment determination. I am a little confused.

Answer: If the removal of ASC-1, -2, -3, and -4 is finalized in November, the last time ASCs would be required to include QDCs on at least their 50% of their claims would be December 31, 2018. If the removal of ASC-8 is finalized in November, the last time ASCs would be required to report data for this measure was the last submission deadline of May 15, 2018. ASCs would no longer report for this measure. If the removal of ASC-9, -10, and -11 is finalized in November, the last time ASCs will be required to report data for these measures would be May 15, 2019 for calendar year 2018 encounters.



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- Question:** What is CY 2021 Payment Determination with respect to a normal calendar year?
- Answer:** The Payment Determination Year refers to the year a facility receives payment updates from CMS. So, for the CY 2021 payment determination, the ASC would be using 2019 patient encounters, with the data being reported in 2020, for payment in 2021.
- Question:** Will you be sending this presentation to us?
- Answer:** All educational material can be found under the Archived Events tab for this program on our website, www.qualityreportingcenter.com. You can also use the direct link to this page: <https://www.qualityreportingcenter.com/asc/events/>.
- Question:** So, proposed removal for CY 2021 means data is last collected in 2018 and submitted in 2019? I thought there was a 2-year difference in data collection and payment.
- Answer:** No, for the CY 2021 Payment Determination, the ASC would be using 2019 patient encounters, with the data being reported in 2020, for payment in 2021. With regards to the proposals put forth today, if the removal of ASC-1, -2, -3, and -4 is finalized in November, the last time ASCs would be required to include QDCs on at least their 50% of their claims would be December 31, 2018. If the removal of ASC-9, -10, and -11 is finalized in November, the last time ASCs will be required to report data for these measures would be May 15, 2019 for calendar year 2018 encounters.