



# Quality Reporting Program

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## Support Contractor

### Public Reporting and You

#### Presentation Transcript

##### Speakers:

The ASCQR Program Support Contractor Team

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##### **Broadcast**

**Announcer:** Good Evening, and welcome to this special edition of the Daily News. Tonight's topic: Public Reporting and You.

During tonight's special report we will be covering how to access and interpret your ASC's Preview Report, how to find your ASC's data on the Hospital Compare website, and we will also cover how to download and filter this publicly displayed data. As always, our chat box is open. If you have a question, please put that in the chat box located on the left side of the screen. One of our subject matter experts will respond. Now here's the host of tonight's broadcast, Angela Anchor.

##### **Angela**

**Anchor:** Hello everyone! Thank you for joining us here on the Daily News. I am your host Angela Anchor. Today we will cover public reporting in quite a bit of detail, and we have special correspondents on the scene to bring you the most up-to-date information on this important topic.

There are many reasons why the data for your facility are displayed publicly. So, let's boil it down to a few here. By having publicly displayed data your facility can compare its performance against other facilities to encourage quality improvement within your organization. You can use this information to compare your ASC with others in your area that are the same size or bigger or smaller, whatever you want to compare. This is a great tool to assist you in setting goals toward improved patient care. The public can also use this information to assist them in determining which ASC they should choose when they're deciding where to have their procedures done.

Making this information available to consumers empowers them in their healthcare decisions. Your ASC works incredibly hard, and that hard work should be displayed. One of the places CMS displays the excellent care provided by ASCs is on Hospital Compare. The preview period for the next data update for Hospital Compare will begin next month. Here to give us a more detailed and up-close perspective on Preview Reports and help guides, we have Betty Newsbreak on the scene. Betty, what can you tell us?

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**Betty**

**Newsbreak:** Thank you Angela. We're trying to inform ASCs of the Preview Report and what they need to know prior to its release next month. Let me go into further details of what ASCs can expect.

Through the Preview Report ASCs are given the opportunity to preview the data that is due to be displayed on Hospital Compare. The Hospital Compare Preview Report is sent to each facility through the QualityNet Secure Portal and are made available to providers for approximately a 30-day preview period. In the near future your ASC will receive a notice when your Preview Report is available via the Secure File Transfer in QualityNet. You must be a Security Administrator to access the Secure File Transfer in order to obtain the Preview Report. This report is for your information only. This preview period is not a correction period. The information displayed here is based on the information provided and obtained by your facility.

As I stated a few moments ago, your ASC will be notified when your Preview Report is available. The communication you will receive will be very similar to the one displayed here on this slide. Once you receive notification that your Preview Report is available you will access the Secure File Transfer. In case you're not familiar with that let me show you how to access the Secure File Transfer through QualityNet.

Once you log in to the secure side of QualityNet you will see the Secure File Transfer icon at the top of the page. You will click on that icon. You will click on the Inbox, and this page will display. When your Inbox opens, you'll see the email and the attachment. In this example, the Preview Report. To open the message, click on the report title under Subject. From there you can print the report or save it, whatever is your preference. But please be advised that this report is available for only approximately 30 days. For now, let's open this Preview Report so we can discuss it.

This is an example of a Preview Report, and it is a completely fictitious report. First, let me just discuss this report in general terms, and then we'll proceed in more detail. Beginning at the top you will see the box that includes your ASC's name, NPI number, and CCN number. You will also see the ASC Compare Preview Report for January 2019. This means that the data contained within this report will be displayed on Hospital Compare in January of 2019. Now let's discuss the data sections. The first section listed is Claims-Based Measures, and here you can see ASC-1 through ASC-4 measures. Underneath that you will see the Web-Based Measure ASC-8 which is entered into NHSN. The next section refers to the Web-Based Measures ASC-9, ASC-10, and ASC-11 entered through QualityNet, and then finally you have information on ASC-12. You will also notice there are footnotes at the bottom of this report, and I'll cover this in a few

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minutes. So, let me show these sections individually so I can provide our viewers with more detail.

Starting at the top section of this report you can see the Claims-Based Measures (per 1,000 claims) in blue. Underneath the blue header is the Reporting Period sub-header which is the First Quarter 2017 through Fourth Quarter 2017 for ASC-1 through ASC-4. These are the Quality Data Codes or, QDCs, that are applied to your Medicare claims. As the Security Administrator, you may not be the one that actually applies these codes. These are applied by the biller in your office, or you may have an external billing contractor. In any event, that is where this information is coming from, QDCs applied to your Medicare claims.

Below this area you will see the ASC-1 through ASC-4 measures listed. These are Quality Data Codes displayed as a rate. The rate here is your ASC's rate of incidence as it pertains to each measure. ASC-1 through ASC-4 are displayed per 1,000 claims, and I'll explain this aspect of the report in more detail in just a moment. Moving to the right you can see your Numerator, Denominator, Facility Rate, as well as, your State and National Rate. Remember, ASC-5 was previously removed from the program beginning with Payment Year 2018. So, you will not find that measure on this report. An important fact to remember is only the Facility, State, and National Rate will appear on Hospital Compare for these measures. You will not see a numerator or a denominator for your facility displayed on Hospital Compare as this is to protect patient confidentiality for rates. As you will see, there is a note at the bottom of this report letting you know this. So, let's stop here for a minute before we talk about the rest of the report because many people get confused about the rate associated with these measures.

So, some of the questions we are asked are "What does this rate mean?" and "How do I know how many patients had this event?" Remember, I just mentioned that the rate is per 1,000 claims, and for ASC-1 through ASC-4 lower rates are better. It's important to note that rounding rules are applied in this calculation, and a description of these are found in the Specifications Manual. So, if you're calculating yourself, your rate may be slightly different than the rate on this report due to the rounding rules that are applied. This is also important to note that the rate is calculated using only the Medicare claims in which QDCs were submitted which may not be all the Medicare claims that were billed. Now, remember, you can track your QDC rate through the year via the Provider Participation Report located on QualityNet. This report will show you quarterly how many QDCs or, g-codes, were applied, your total claim count, and how many patients had an incident documented.

**Betty**

**Newsbreak:** Now, let's move on to the next section just under the Claims-Based Measures, Web-Based Measures. First, you see ASC-8 measure-Influenza Vaccination Coverage Among Healthcare Personnel, and you'll see the reporting period which corresponds with this measure. For this measure, that is the Fourth Quarter 2017 through the First Quarter 2018, and why is that you ask? Because that translates

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to October 1, 2017 to March 31, 2018 which corresponds to the flu season and the period of time you're collecting information for this measure. This is the only web-based measure for ASCs that is not reported into QualityNet. This measure is reported through the online submission tool via the National Healthcare Safety Network or, NHSN. These data are reported by the CMS Certification Number or, CCN number. Under the ASC-8 flu vaccination measure you will find the rest of the web-based measures for this program, ASC-9, ASC-10, and ASC-11. You will see the corresponding reporting period is the First Quarter of 2017 through Fourth Quarter 2017. This means patient encounters January 1, 2017 through December 31, 2017. You would have reported these data by May 15, 2018. Again, as previously discussed, the Numerator and Denominators will not be published on Hospital Compare, only the Facility, State, and National Percentage Rates. Also, as a general reminder, that ASC-11 is a voluntary measure, and many of you may not report data for this measure. However, if you report data, it will be displayed publicly.

Our last section for discussion of this report is for ASC-12. ASC-12: Facility 7-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy. The goal of this measure is to reduce adverse patient outcomes associated with preparation for colonoscopy, the procedure itself, and follow-up care by capturing all unplanned hospital visits following an outpatient colonoscopy. This is new for the ASC Preview Report this year and includes data from January 1, 2017 through December 31, 2017. Data is collected from paid Medicare claims; therefore, there is no manual abstraction necessary on the part of the ASC.

Starting from the far left the first column is your Facility Performance which, in this case, is No Different than National Rate. Moving to the right is the Number of Eligible Cases. These are the cases that fit the measure criteria. Then, next, is the Rate. Again, this rate is per 1,000 claims. In the parenthesis you will be given a Lower and an Upper Limit of the 95% Confidence Interval. It's important to note that a lower rate indicates better performance for this measure. Moving over to the right you will see the National Rate followed by the State and National breakout of facilities that performed Better than the National Rate, No Different than the National Rate, Worse than the National Rate, and finally you will see Number of Cases that were too Small. That is the information for ASC-12 that you will see included on this Preview Report. Of note, you will be provided a Facility Specific Report or, FSR, to coincide with this Preview Report for ASC-12. On that note let's talk about this a little bit further.

As we've been discussing for our viewers, CMS will publicly report results for ASC-12–Facility 7-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy measure, or the colonoscopy measure, on Hospital Compare in January 2019. These results will be used for Calendar Year 2019 Payment Determination for both the OQR and ASC programs. Prior to public reporting CMS will make available via the QualityNet Secure Portal two different types of reports to facilities, a ASC-12 Facility Specific Report and a ASC-12 Claims Detail Report or, CDR. The Facility Specific Report includes measure

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performance results, state and national results, detailed patient-level data used to calculate measure results, and a summary of each facility's case mix. The anticipated Facility Specific Report release date is October 2018 including information on colonoscopies performed between January 1, 2017 and December 31, 2017. The measure results from the Calendar Year 2017 performance period is the Facility Specific Report will be publicly reported on Hospital Compare in January 2019 for Calendar Year 2019 Payment Determination. The Claims Detail Report includes patient-level data for the colonoscopy measure, but do not include any measure calculations. The purpose of sharing this information with facilities is to allow facilities to observe and correct coding errors in the claims used to calculate the measure, to increase transparency about the way cases are chosen for inclusion in the measure, and to provide facilities with an opportunity to improve the quality of care provided to patients receiving outpatient surgeries prior to measure calculation for payment determination and public reporting. For Calendar Year 2019 Payment Determination CMS distributed the Claims Detail Reports based on Calendar Year 2017 performance periods in September of 2017, December of 2017, and March 2018, and, of course, for additional information you can visit [www.qualitynet.org](http://www.qualitynet.org). The direct path is seen on this slide.

I said earlier that I would cover footnotes, so here we are. Footnote 1 the number of cases or patients is too few to report. This footnote would be applied to the numerator, denominator, and the rate and is intended to protect patient confidentiality for measures with low case count. Again, recall the numerators and the denominators will not be displayed on Hospital Compare, only the facility rate. Footnote 5 results are not available for this reporting period. This footnote is applied when there is no data to display. For example, if a facility did not enter data for ASC-11, the value on preview would be not available and a Footnote 5. The same is true if a facility entered a zero numerator and zero for denominator.

Footnote 7; there are no cases that met the criteria for this measure. So, this footnote would be used for ASC-12. For example, if your facility performs colonoscopies but none of these colonoscopies met the measure criteria, so there essentially was no data to report. Finally, Footnote 23; this is a new footnote that applies only to claims-based measures, and that, of course, is ASC-1 through -4 and ASC-12. It states that data are based on claims that the facility submitted to CMS. The facility has reported discrepancies in their claims data, and this data will still be displayed. Well, you might wonder how you will keep all of this straight. Good thought. We have a help guide available on QualityNet, as well as, our website [qualityreportingcenter.com](http://qualityreportingcenter.com).

Let's start with QualityNet, and our first step will be to go to the [qualitynet.org](http://qualitynet.org), and see the gray tabs at the top of the page? Well, put your mouse over the Ambulatory Surgery Center tab. This white drop-down menu will appear and click on Public Reporting and this page will display. This is a great page to find information regarding public reporting and the ASC Hospital Compare Preview Report. But what I want to show our viewers right now is the ASC Hospital Compare Preview Report Quick Reference Guide. Click on that link. You can

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also find the same document on our website [qualityreportingcenter.com](http://qualityreportingcenter.com). Let me show you that link. From the home page of [qualityreportingcenter.com](http://qualityreportingcenter.com) you will hover your cursor over the ASC, and this dropdown menu will display. You will click on the Tools and Resources icon as shown here. And this page will display, and you will click on the Public Reporting option, and the accordion feature for this section will open. You can then click on the ASCQR Preview Report Quick Reference Guide link. And this displays your ASC Preview Report Quick Reference Guide.

Now this guide is an excellent source of information, so have this guide handy when you access your Preview Report. As we stated previously, the Preview Reports are available for about 30 days. Then the Preview Reports are removed. So, please go in and copy, print, download this report while you have the opportunity to do so. Now, let's take a brief look at this guide. In the first column on the left, Preview Report Access column, you will find the dates of the preview period and information about how to access and download this report. Now, moving to middle section, which is Data Highlights, you will find a brief explanation of each measure set's data which will appear in the same order of your Preview Report and your display on ASC Hospital Compare. And in the third column, Footnotes, is where there are definitions of the footnotes that you may see within this report. This mirrors what we discussed just a few moments ago. This is Betty Newsbreak signing off for the ASC Preview Report. Angela, back to you.

**Angela**

**Anchor:**

Thanks for filling us in on the Hospital Compare Preview Report and the help guide available for our viewers. Here with a look on how to use the Hospital Compare website is our own Dale E. Buzz. Dale?

**Dale E Buzz:** Angela, there's a lot to tell. I've a considerable amount of information. I suggest we get started. To find the ASC section of Hospital Compare start with the website [medicare.gov/hospitalcompare](http://medicare.gov/hospitalcompare). The exact link is placed at the top of this slide for reference. Here is a partial view of the opening page. To find the ASC section look under the Spotlight column on the far left. Scroll down until you see the Ambulatory Surgical Centers heading and select that link. Here you will see December 2017. However, once the preview period is completed your data will say January 2019.

This next page will open on the first option for the ASC program. You will select the link for the Ambulatory Surgical Center Quality Reporting Program which will direct you to the ASC Quality Reporting Program section.

This is the next page you will see. I want to bring your attention to the different sections in blue at the bottom of the page. Each heading that you see here has an accordion feature. When you click on the heading, the options for that section will open up below. We will be clicking on the Data Details in a moment. However, if

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you wanted to view Measuring Quality, you would simply click on that heading link.

This information will display below the selected heading. This is only a partial view of the information available. You can view the Measure Number, Measure Title, and any Applicable Notes. Additionally, you may also search the archives. You may ask yourself “why would you ever want to search the archives?” Well, by accessing this feature you are able to locate, analyze, and trend data that may be different than another facility. Another question you may want to know is “where does the data that is currently displayed on Hospital Compare go when the data gets refreshed?” Well, it all gets archived and stored on Hospital Compare. If you are looking for data from 2016 to compare your facility trends, look no further. Now, let’s talk a little bit more about the archive search function. By returning to the previous page we can view the same options as before. Now, we would select the Data Details link.

Once you access the link you will see the accordion feature open and display the option. You will then select the link titled download these datasets in csv format. This will direct you to the medicare.gov website where the data are stored.

From here you can download files in csv or you can access archived data. In a moment we will show you another way to get your facility’s data, but for now let me show you how to access the archives. You can access this feature by clicking on the blue box titled Get Archived Data.

Shown here is a partial view of that page. Here you can access the year you want to research. For those of you that may not be aware, this program has not always had all the measures it currently does and did not start publicly reporting until 2015. So, if you want to access 2014 data, you will access the 2016 Annual File. You can access, filter, arrange, and track this data. You can use this information to trend your facility’s performance and set quality improvement goals. If you want to take a short cut to the archives, the link is provided at the bottom of this slide.

Now, let’s go back to the ASCQR page on ASC Compare. You can obtain and sort data by accessing the Ambulatory Surgical Measure Data – by Facility heading. By clicking on this heading, you will see the display search options. At the top of this display you will see data.medicare.gov. This is where the information is stored. Within this displayed information the columns are collapsed. If you would like to view the content of what is in any single box, just hover your mouse over the box, and the entire contents will be displayed. There are several different ways to find your ASC’s data. You can scroll down the page until you find your ASC, and then use the slide bar at the bottom to read your data. To make it easier for you to find your facility click on the magnifying glass at the top, enter your facility, and just hit your enter key.

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Once the data displays you will also have the ability to sort. At the top of the web page it is stated if you would like to sort or filter these data, select the three-line menu icon for that particular column header. This means, in order to sort in ascending or descending order, you may do so by clicking on the column header. In the example here, we are clicking on ASC.

If you want the various filter or download options, you can access them by simply clicking on the green menu button. For our purposes today, we're going to select the Download option.

You are now given options on how you would like to download your data. In this demonstration we will select the CSV for Excel. This will give you a very large document with all of the information for participating facilities. Once you click on this download option it will take you to the [data.medicare.gov](http://data.medicare.gov) website. This is where you will download your data. We viewed this link earlier when we were discussing the archive data options. Take the time to familiarize yourself with the Hospital Compare and [data.medicare.gov](http://data.medicare.gov) websites. It's a great help in keeping up with data. Not only yours, but if you want to compare other ASC facilities as well. Once you do that a window will open below asking if you want to open or save as demonstrated here, and you will choose your option. The excel spreadsheet would then open displaying all of the information for the facilities. You can sort any way that works best to meet your particular needs. Another place you can obtain a quick peek at some of the measures publicly displayed is our website [qualityreportingcenter.com](http://qualityreportingcenter.com).

So, if you go back to that website, and from that same dropdown menu I showed you earlier, this time you will select the ASC Facility Compare Tool or the Data Dashboard. Selecting the Data Dashboard will provide you with the National Maps that will show a state-by-state comparison by measure based on publicly reported data on Hospital Compare. We hope to continue to add data and information within this area over time. If you select the ASC Facility Compare Tool, you can search ASCs by city, state, or zip code, or, if you want to compare ASCs by NPI. We had just covered these options last month, so we will not go into detail again here today. Just know that you can access the same information from our website, and you may find it a little easier to use.

It's important to realize that by reporting, evaluating, and comparing your facility, you can improve quality for patients. Having information on your facility and how your facility measures up, so to speak, on a state and national level is important. Trending data reported by your ASC, whether for quality improvement initiatives or not, is always a benefit. Just as important to having the data is making use of it. Using data whether it is obtained by the sources we had mentioned or by your own internal data analysis can really provide a platform for you to initiate quality improvement.

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Take the time to get to know the Hospital Compare and data.medicare.gov websites, access the information available, and utilize the tools to gather information, and put them into action to implement changes when needed in order to improve the quality of care for your patients. Continue to monitor your data and improve quality within your particular facility. These steps will ensure your continued success. Well, that's all I have for you today. I appreciate you joining us, and I hope we were able to provide you with some useful information. Angela, back to you.

**Angela  
Anchor:**

Thank you, Dale, for drilling down and to how to use these sites. I'm sure, however, that our viewers are going to have questions. So, we have two subject matter experts in the studio with me today, Keshia Arlinghaus and Krissy Cockman. Both are intricately involved in public reporting for the ASCQR program. Ladies, let me ask you a few questions so that we can clarify some things for our viewers.

Krissy, let me start with you. Many of our viewers want to know about the Security Administrator in the Preview Report. Earlier Betty discussed the Preview Report being accessible by the ASC's Security Administrator only. That could be a problem if your facility's Security Administrator isn't available for some reason. Can a facility have more than one Security Administrator?

**Krissy  
Cockman:**

Great question. The role of the Security Administrator is essential accessing reports, entering data, verifying submission status, etc. So, we highly recommend designating at least two people to be the QualityNet Security Administrators. You do not ever want to find yourself in a situation where you're trying to submit data or obtain a report and there's no SA available to do so. So, please, have at least two active Security Administrators at all times, and be sure to keep the accounts active by logging in and updating your password.

**Angela  
Anchor:**

Thank you, Krissy. Now, Keshia, let me direct this to you. How long does the preview period last, and what happens if we don't download or print our report?

**Keshia  
Arlinghaus:**

Another good question. The preview period is generally 30 days. This preview period will open on November 9 and closes December 8, and if you do not download the report during that timeframe, the report will expire from Secure File Transfer. If this occurs, please reach out to the ASC help desk to obtain a copy. Remember, even if you do not have time to review it fully during the preview period, please ensure that you log on to Secure File Transfer and save the file, so you can easily come back to it when time allows.

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**Angela**

**Anchor:** As a follow-up to that Keshia, is there a way for ASCs to check their performance prior to when the Preview Report is sent?

**Keshia**

**Arlinghaus:** Yes, absolutely, and we encourage it. The Security Administrator can run the Provider Participation Report or, PPR, in QualityNet, and this report displays a summary of the data submission required for the selected Payment Year along with data completeness percent. This data completeness percent or, the QDC percent, is the percent you want to keep above 50. It is very important to run the PPR routinely throughout the year. We have seen changes to an EHR or a PM system or staff turnover cause a facility to fall below the 50% threshold placing a facility at risk of receiving that 2% reduction to their payment. Also, on this report, you will find the web-based measures and NHSN submission status. So, this report serves as a really nice, all-inclusive view of your data and can help ensure your data is complete.

**Angela**

**Anchor:** Ok, Krissy, back to you. Someone wants to know how often the data are refreshed on Hospital Compare?

**Krissy**

**Cockman:** Well, Angela, for ASCs the data on Hospital Compare is refreshed annually in January. That means, the data you will view on your Preview Report in the upcoming weeks will be published on Hospital Compare in January 2019 and will remain there until January 2020.

**Angela**

**Anchor:** So, there's a lot of data out there. Who uses the information that's published?

**Krissy**

**Cockman:** Oh, wow, Angela, this is a great question! Well, the data is publicly available on Hospital Compare, and anyone can access this data. We have heard that a variety of users access and review this data including Medicare beneficiaries, commercial consumers, healthcare researchers, insurance companies to name a few. CMS believes it is important for the public to be able to make informed decisions regarding their healthcare and that providing facility-specific data is a way to do it. This gives the public a platform to view and compare ASCs in the same manner. They can view and compare facilities. Also, facilities use this information to compare themselves against other ASCs in their state or region and to build internal benchmarking goals.

**Angela**

**Anchor:** You mention benchmarking. Does CMS set benchmarking goals for each of the measures?

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**Keshia**

**Arlinghaus:** I can respond to that Angela. At this time, there are no specific benchmarking goals for the ASC measures. As Krissy mentioned, a facility can use the state or national rates or even a rate of a facility they admire to set their own benchmarking goals.

**Angela**

**Anchor:** Thank you, all good information. Let me ask you. What is the most important advice you can provide to ASCs in relation to the Preview Report?

**Keshia**

**Arlinghaus:** The most important advice I can give actually begins prior to the Preview Report. It begins with entering the data and then reviewing the submission. I tell ASCs to please allow themselves enough time to enter the data on one day, take a break, and then come back the next day to review the data and see what they have entered. Ask yourself, does the data make sense? Are the rates accurate? Did I answer all of the web-based measures' questions? Remember, the Preview Report does not serve as a correction period, but rather as a preview of what will be published on Hospital Compare for a year. So, again, allow yourself time prior to the submission deadline to enter the data and check it the next day. It's amazing what fresh eyes will see.

**Angela**

**Anchor:** Excellent advice, Keshia. Thank you so much. Well, ladies, I think that's all the time we have today to respond to questions. We appreciate your being here and sharing with us this important information. As a reminder, we always post a full transcript of all of the questions and answers on our website. That's all we have for you today. This is Angela Anchor with the Daily News signing off. Have a great day.