

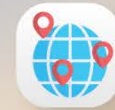


CY 2020 OPPTS/ASC Proposed Rule: Ambulatory Surgical Center Quality Reporting (ASCQR) Program

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Centers for Medicare & Medicaid
Services (CMS)

GPS Navigation

CMS: Navigating Success





Learning Objectives

At the conclusion of the program, attendees will be able to:

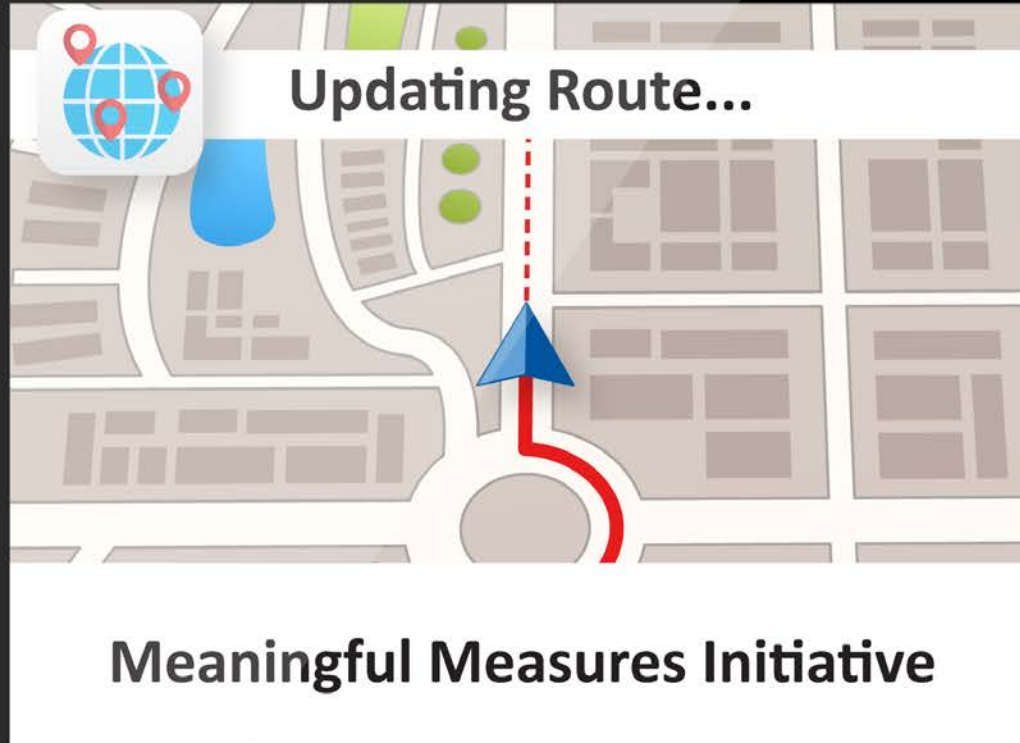
- ✓ Locate the Calendar Year (CY) 2020 Outpatient Prospective Payment System (OPPS)/ASC Proposed Rule in the *Federal Register*.
- ✓ Identify the changes to the ASCQR Program in the CY 2020 OPPS/ASC Proposed Rule.
- ✓ Submit comments to CMS regarding the CY 2020 OPPS/ASC Proposed Rule.



Question and Answer Limitations

- During the course of this webinar, CMS:
 - Can address only procedural questions and comment submissions.
 - Cannot address **any** rule-related questions.
- Your understanding of these constraints is appreciated.
- CMS looks forward to your formal comments on the Proposed Rule.

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Updating Route...

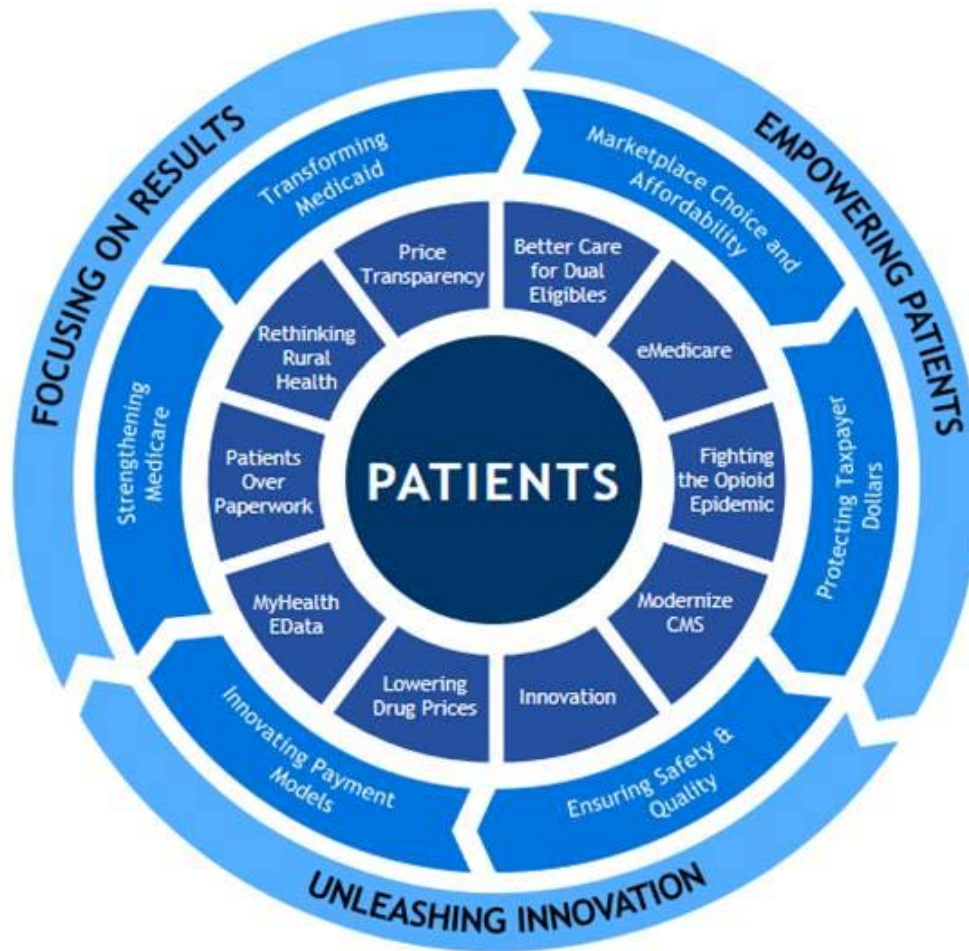
Meaningful Measures Initiative



Purpose and Benefits

- Improve patient outcomes
- Reduce quality data reporting burden and costs to clinicians and other healthcare providers
- Focus CMS quality measurement and improvement on efforts that are meaningful to patients

Goals





Objectives



Address high-impact measure areas that safeguard public health



Are patient-centered and meaningful to patients, clinicians and providers



Are outcome-based where possible



Fulfill requirements in programs' statutes



Minimize level of burden for providers



Identify significant opportunity for improvement



Address measure needs for population based payment through alternative payment models



Align across programs and/or with other payers

Framework



● Promote Effective Communication & Coordination of Care

Meaningful Measure Areas:

- Medication Management
- Admissions and Readmissions to Hospitals
- Transfer of Health Information and Interoperability

● Promote Effective Prevention & Treatment of Chronic Disease

Meaningful Measure Areas:

- Preventive Care
- Management of Chronic Conditions
- Prevention, Treatment, and Management of Mental Health
- Prevention and Treatment of Opioid and Substance Use Disorders
- Risk Adjusted Mortality

● Work with Communities to Promote Best Practices of Healthy Living

Meaningful Measure Areas:

- Equity of Care
- Community Engagement

● Make Care Affordable

Meaningful Measure Areas:

- Appropriate Use of Healthcare
- Patient-focused Episode of Care
- Risk Adjusted Total Cost of Care

● Make Care Safer by Reducing Harm Caused in the Delivery of Care

Meaningful Measure Areas:

- Healthcare-associated Infections
- Preventable Healthcare Harm

● Strengthen Person & Family Engagement as Partners in their Care

Meaningful Measure Areas:

- Care is Personalized and Aligned with Patient's Goals
- End of Life Care according to Preferences
- Patient's Experience of Care
- Functional Outcomes



Current and Removed Measures

Meaningful Measures Area	National Quality Priority	Program Measure
Preventable Healthcare Harm	Make Care Safer by Reducing Harm Caused in the Delivery of Care	Suspended: ASC-1, ASC-2, ASC-3, and ASC-4
Preventive Care	Promote Effective Prevention and Treatment of Chronic Disease	ASC-9 Removed: ASC-10
Seamless Transfer of Health Information	Promote Effective Communication and Coordination of Care	ASC-11
Admissions and Readmissions to Hospitals	Promote Effective Communication and Coordination of Care	ASC-12
Preventable Healthcare Harm	Make Care Safer by Reducing Harm Caused in the Delivery of Care	ASC-13, ASC-14, ASC-17, ASC-18
Patient's Experience and Functional Outcomes	Strengthen Person and Family Engagement as Partners in Their Care	Delayed: ASC-15a-e

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Scheduled Construction



Proposed Rule



Proposed New Measure

ASC-19: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers

- Begins with the **CY 2024 payment determination** and subsequent years
- Anticipates quality improvement activities to reduce unplanned hospital visits and track quality over time



ASC-19: Overview

- Developed in conjunction with ASC-17 and ASC-18
 - Uses the same risk-adjustment methodology
- Aligns with the Admissions and Readmissions to Hospitals and Preventable Healthcare Harm domain of the Meaningful Measures Initiative
- Included on the List of Measures under Consideration



ASC-19: Specifics

- Claims-based using Part A and Part B Medicare claims and enrollment data
 - Data would be collected from the two calendar years ending two years prior to the applicable payment determination year
- Reported as a risk-standardized ratio
- Examines all-cause, unplanned hospital visits within seven days of any general surgery procedure performed at an ASC



ASC-19: Cohort

- Medicare beneficiaries ages 65 and older enrolled in Medicare for at least 12 months
- Targeted group of procedures
 - Performed routinely at ASCs
 - Involve some increased risk of post-surgery hospital visits
 - Are within the scope of general surgery



ASC-19: Procedure and Visit Types

- Procedures from Medicare's list of covered ASC procedures
- Unplanned hospital visits
 - Emergency Department (ED) visits
 - Observation stays
 - Unplanned inpatient admissions



ASC-19: Exclusion

- Patients who survived at least seven days following the procedure but were not continuously enrolled in Medicare Fee-for-Service (FFS) Parts A and B during the seven days



ASC-19: Public Display

- Facilities with sufficient case numbers only that meet moderate reliability standards
- Reliability will be calculated at different case sizes by using the ratio of true variance to observed variance
 - Using dry run data for calculation



ASC-19: Dry Run

- Will be provided to all ASCs
- Enables ASCs to review their measure results and ask questions
- Uses the most current two-year set of complete claims
- Data are
 - Confidential
 - Not publicly reported
 - Do not affect payment

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Updating System



**Measures and Topics for Future
Consideration**



ASC-1 Through ASC-4

- Previously submitted via Quality Data Codes (QDCs)
 - ASC-1: Patient Burn
 - ASC-2: Patient Fall
 - ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant
 - ASC-4: All-Cause Hospital Transfer/Admission
- Unable to make corrections



Requesting Public Comment

- Propose to make future updates to the submission method
 - CMS online submission tool
- Allows ASCs to correct data submission errors
 - Data can be submitted and modified throughout the data submission period
 - No QDCs required



ASCQR Measure Set

CY 2021 Payment Determination (PD) Year

Measure	Status
ASC-1: Patient Burn	Suspended Beginning CY 2021 PD year
ASC-2: Patient Fall	
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	
ASC-4: All-Cause Hospital Transfer/Admission	
ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	Continues



ASCQR Measure Set (cont.)

CY 2021 Payment Determination Year

Measure	Status
ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (voluntary)	Continues
ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Continues
ASC-13: Normothermia	Continues
ASC-14: Unplanned Anterior Vitrectomy	Continues
ASC-15a-15e: OAS CAHPS	Delayed



ASCQR Measure Set (cont.)

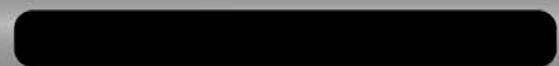
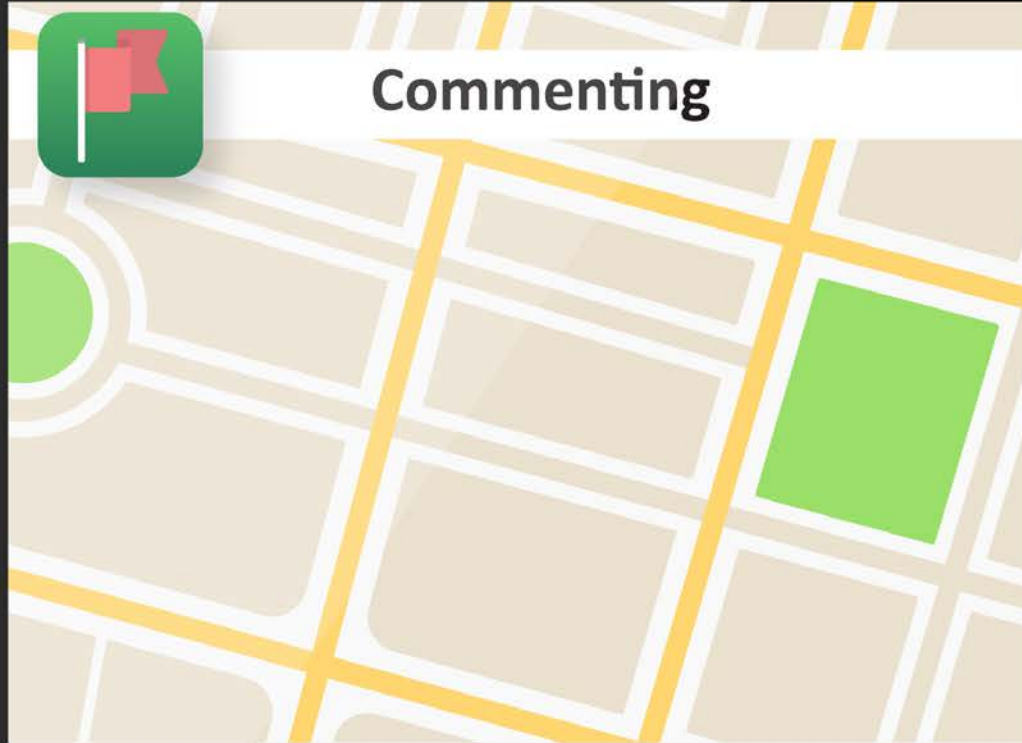
CY 2022 Payment Determination Year

Measure	Status
ASC-17: Hospital Visits After Orthopedic Ambulatory Surgery Center Procedures	Begins with CY 2022 PD year
ASC-18: Hospital Visits After Urology Ambulatory Surgery Center Procedures	Begins with CY 2022 PD year

CY 2024 Payment Determination Year

Measure	Status
ASC-19: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers	Proposed beginning CY 2024 PD year

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Submitting Comments

- Comments must be received by September 27, 2019. This includes electronic submission, regular mail, express or overnight mail.
- CMS encourages submission of electronic comments to <https://www.regulations.gov>.
- Responses to comments will be in the Final Rule.



References

- Proposed Rule
 - PDF version, page 164
<https://www.govinfo.gov/content/pkg/FR-2019-08-09/pdf/2019-16107.pdf>
- To comment
 - Direct link: <https://www.regulations.gov/>



Questions





Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
 - It is your responsibility to submit this form to your accrediting body for credit.



CE Credit Process

- Complete the ReadyTalk® survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “Done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
 - This is separate from registering for the webinar. If you have not registered at the Learning Management Center, you will **not** receive your certificate.
 - Please use your **personal** email so you can receive your certificate.
 - Healthcare facilities have firewalls that block our certificates.



CE Certificate Problems?

- If you do not immediately receive a response to the email you used to register in the Learning Management Center, a firewall is blocking the survey link.
- Please go back to the New User link and register your personal email account.
- If you continue to have problems, please contact Artrina Sturges at asturges@hsag.com.



CE Credit Process: Survey

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by [SurveyMonkey](#)
Check out our [sample surveys](#) and create your own now!



CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-d6f6b9ccb1ae>

Existing User Link:

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-d6f6b9ccb1ae>

Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done



CE Credit Process: New User

The screenshot shows a web registration form for the Learning Management Center. At the top left is the HSAG logo (Health Services Advisory Group). At the top right, there is a security notice: "this is a secure site please provide credentials to continue" with a lock icon. Below this is the text "Learning Management Center". The main heading of the form is "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". Below these fields is a "Register" button.

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this is a secure site
please provide credentials to continue

Learning Management Center

Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015

First Name: Last Name:

Email: Phone:



CE Credit Process: Existing User

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site
please provide credentials to continue

Learning Management Center

»» **Secure Login**

User Name:

Password:

Log In



Resources

- Slides 7, 8 and 9: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Downloads/Meaningful-Measures-webinar-slides-11-30-17.pdf>. Accessed on July 19, 2019.
- Slide 10: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/CMS-Meaningful-Measures_Overview-Fact-Sheet_508_2018-02-28.pdf. Accessed on August 28, 2019.

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