

Support Contractor

You have Reached Your Destination: CY 2020 OPPS/ASC Final Rule

Questions & Answers

Moderator:

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Question: Please clarify the last calendar year we will gather and submit data for OP-

33?

Answer: The last time you will report data for OP-33 will be this May. The

deadline for that submission is May 15, 2020. This will be using the reporting period (patient encounters) of January 1, 2019 through

December 31, 2019.

Question: I thought OP-29 went away?

Answer: No, OP-29 was proposed for removal but was not finalized for removal in

the calendar year (CY) 2019 rulemaking cycle. OP-29 was retained in the Hospital OQR program and reporting for this measure remains a program

requirement.

Question: Is OP-32 claims based?

Answer: Yes, OP-32 is claims-based and does not require any manual

abstraction/reporting on the part of the hospital.

Question: For CY 2021 payment determination, why are some measures applicable

starting from 2Q, instead of 1Q?



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Answer: Web-based measures (WBMs) are collected annually whereas chart

abstracted measures are quarterly. For example, for CY 2021 Payment Determination, WBM reporting period is January 1-December 31, 2019

and the clinical chart-abstracted quarters for CY 2021 payment

determination are 2Q2019 through 1Q2020.

Ouestion: For OP-36, we have found that many cases were included for observation

status after surgery. Each case only has one encounter. Why was it

counted as a hospital visit after outpatient surgery?

Answer: For OP-36, the Numerator Statement states: The outcome is all-cause

unplanned hospital visits defined as an inpatient admission directly following surgery or ED visit, or observation stay. However, there are exclusions. Please review the measure information form for details on how this measure is calculated. This can be found in the Specifications Manual

found on QualityNet.

Question: For OP-36, we also had an ED account, the patient had relocation of

shoulder in ED. The patient was discharged from ED. Why this patient was counted as hospital visit within 7 days after outpatient surgery?

Answer: Data is obtained from paid Medicare claims that meet specific measure

criteria. For further explanation specific to your hospital, you can submit your question to the measure writers via the QualityNet Q&A tool. Make sure you include Hospital Name, CCN number, Contact Name and Contact Number. Only identify the patient from your Facility Specific Report by the reports ID number, under column A. Do not send any Protected Health Information (PHI) or Personal Identifying Information (PII) please. The measure writers will send the answer directly to you.

Question: How do I find out if my facility would have to abstract the ASC-19

measure? We do have outpatient surgery, does this qualify us?

Answer: The ASC-19 measure is a claims-based measures and does not require

manual abstraction or reporting by the facility. Data for these measures are collect by paid CMS through administrative claims and enrollment data.

Question: We do not report data for CY 2020 for ASC-19, correct?

Answer: Correct, the ASC-19 is a claims-based measure, there is no manual

reporting required on the part of the facility. Data is calculated via paid



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Medicare claims. This measure will be included in the ASC program

beginning with CY 2024 Payment Determination.

Question: For ASC-19, is there a guide outlining what procedures are considered

"general surgery?"

Answer: There are multiple resources referenced in the Final Rule. This

information will also be included in the program Specifications Manual.

Question: For the measures ASC-1 through ASC-4, are they retained for ASCs?

What exactly is the status for required reporting?

Answer: These measures were suspended in the CY 2019 rulemaking cycle pending

future rulemaking. In this current rulemaking cycle, CMS sought comment on an alternate submission method. At this time, no new methodology has been proposed. Any further decisions will be brought forth through the

rulemaking process.

Question: Are we still submitting Quality Data Codes (QDCs) for the measures

ASC-1 through ASC-4 on our claims this year? The slide said suspended.

Answer: No, you are no longer required to submit QDCs for the ASC-1 through -4

measures. These were suspended in the CY 2019 rulemaking cycle

beginning with January 1, 2019 encounters.

Question: How can we get a copy of the slides

Answer: Slides can be found on our website, or by this direct link:

https://www.qualityreportingcenter.com/globalassets/2020/01/oqr/cy-

2020-final-rule-final-508.pdf.

Question: What encounter dates does CY 2021 Payment Determination year

include?

Answer: For web-based measures, the reporting period for CY 2021 Payment

Determination is January 1 through December 31, 2019. This data must be

submitted by May 15, 2020. Chart-abstracted measures for CY 2021

Payment Determination is 2Q2019 through 1Q2020.



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Question: What if the hospital visit is not related to the general surgery that was

performed? For example, an ex-patient fell over their dog and broke their

wrist 2 days after a hernia repair in an outpatient ASC?

Answer: The outcome for this measure is all-cause, unplanned hospital visits within 7-

days of an outpatient colonoscopy. The measure defines a hospital visit as any emergency department (ED) visit, observation stay, or unplanned inpatient admission and is risk-adjusted. However, there are exclusions. Please review the measure information form for details on how this measure is calculated. This can be found in the specifications manual found on QualityNet. If you have specific questions related to your hospital, you can submit your question to the measure writers via the QualityNet Q&A tool. Make sure you include Hospital Name, CCN number, Contact Name and Contact Number. And only identify the patient from your Facility Specific Report by the reports ID number, under column A. Do not send

any Protected Health Information (PHI) or Personal Identifying Information (PII) please. The measure writers will send the answer

directly to you.

Question: Are there any plans for OP-31 and ASC-11 to become required versus

voluntary?

Answer: At this time both OP-31 and ASC-11 remain voluntary until proposed and

finalized otherwise, as required in future rulemaking.