



# Outpatient Quality Program Systems and Stakeholder Support Contractor Team

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## Quality Reporting for Hospital Outpatient Departments and Ambulatory Surgical Centers: CY 2021 Program Proposals

### Questions & Answers

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**This document answers provider questions submitted during the live webinar.  
Subject-matter experts developed the responses.**



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**Question 1:** Please direct to me the site where our surgical center can register to report the mandatory web-based measures? Where are instructions to register?

If you or the facility are new to the Ambulatory Surgical Center Quality Reporting (ASCQR) Program, I recommend reviewing the successful reporting guide on [QualityReportingCenter.com](https://www.qualityreportingcenter.com/globalassets/2020/01/asc/successful-reporting-in-the-ascqr-program-2020.pdf) at <https://www.qualityreportingcenter.com/globalassets/2020/01/asc/successful-reporting-in-the-ascqr-program-2020.pdf>. You can also contact us by phone at (866) 800-8756 for assistance with questions and for registering for a Security Administrator account.

**Question 2:** Will we submit ASC measures on Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) or *QualityNet* in 2021?

You will submit your data on the *QualityNet* website. HARP is just the two-factor security required to access the secure side of *QualityNet*. This is another way to look at it: HARP just took the place of the Symantec Virtual and Identity Protection (VIP) access.

**Question 3:** Is abstraction for OP-2, Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival, and OP-3, Median Time to Transfer to Another Facility for Acute Coronary Intervention, required or voluntary?

Both the OP-2 and OP-3 measures are required Acute Myocardial Infarction (AMI) measures in the Hospital Outpatient Quality Reporting (OQR) Program. The only voluntary measure currently is the web-based measure OP-31, Cataracts – Improvement in Patient’s Visual Function Within 90 Days Following Cataract Surgery.

**Question 4:** Is an ASC within a Critical Access Hospital (CAH) subject to reporting the ASC measures?

It would depend on the way the ASC bills. If the ASC bills independently under a National Provider Identifier (NPI) number, then it would need to report as an ASC. If the ASC bills under the hospital’s CMS Certification Number (CCN), then its data should be reported as part of the Hospital OQR Program. However, any reporting by CAHs for the Hospital OQR Program is voluntary.



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**Question 5:** If a patient visits the hospital after an ASC general surgery for an unrelated issue, like a broken ankle, should that be reported? How does that reflect on the ASC?

There are no reporting requirements on the part of the facility. This is a claims-based measure. The data for this measure are collected by paid Medicare claims for cases that meet measure criteria. You can find details on this measure in the calendar year (CY) 2019 final rule at <https://www.govinfo.gov/content/pkg/FR-2019-11-12/pdf/2019-24138.pdf>. This measure will also be included in future versions (CY 2022) of the Specifications Manuals.

**Question 6:** If there is no difference in role function between a Security Administrator (SA) and a Security Official (SO), why is this change needed?

This is a change in terminology to align across programs and platforms. This proposed update in terminology would not change the individual's responsibilities or add burden. The term "security official" refers to the individual(s) who have responsibilities for security and account management requirements for a facility's *QualityNet* account. Note that for both the Hospital OQR and ASCQR Programs, the SA/SO is an administrative requirement for setting up accounts and roles for data submission and report access; it is not a program requirement toward payment determinations.

**Question 7:** Where can I find more information on OP-37a? This does not sound familiar to me.

OP-37a–e are the Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey Measures. These measures were delayed in the CY 2018 final rule and remain in that status. You can find information in this rule on the [Federal Register](#), specifically, pages 59432–59433.

**Question 8:** Will this presentation be available after this live session?

The slides, recording, and transcripts can be found on [QualityReportingCenter.com](https://QualityReportingCenter.com).



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**Question 9:** Will exempted data for 1Q 2020 and 2Q 2020 be excluded from the Star Ratings calculation?

Communications on 1Q 2020 and 2Q 2020 voluntarily submitted data and public reporting will be sent by CMS via Listserve when available. Please be sure to sign up for Listserves if you have not.

**Question 10:** Do the ASC requirements apply to hospital-based outpatient surgery centers with the same CCN/NPI as the main hospital?

Only facilities who bill as an ASC, using the facility NPI for billing purposes to Medicare, should review and determine participation in the ASCQR Program. Please feel free to contact our help desk with further inquiries at (866) 800-8756.

**Question 11:** When you covered the slide for the Overall Star Ratings change you failed to outline the major changes. Please elaborate.

CMS is still working on Star Rating and reporting methodology. Details will be communicated by CMS via Listserve. Please make sure you are registered to receive Listserves on *QualityNet*. Any specific questions to Star Ratings should be submitted via the Q&A tool on *QualityNet*, and the appropriate subject matter expert can respond:

[https://cmsqualitysupport.servicenowservices.com/qnet\\_qa?id=ask\\_a\\_question](https://cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question)

**Question 12:** Is OP-36, Hospital Visits after Hospital Outpatient Surgery, currently required even though ASC-19, Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers, is in a dry run status.

Yes, OP-36 is a required measure in the Hospital OQR Program for the CY 2021 Payment Determination and subsequent years.

**Question 13:** What is the last quarter in 2020 that OP-33, External Beam Radiotherapy for Bone Metastases, must be reported?

OP-33 was removed from the Hospital OQR Program beginning with January 1, 2020, encounters and therefore no longer collected or reported in the Hospital OQR Program. The last required submission was May 15, 2020.



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**Question 14:** Must the ASC-19 measure be seven days?

Yes, ASC-19 captures visits within seven days of any general surgery procedure performed at an ASC. The information and specifics can be found on *QualityNet* at <https://qualitynet.org/asc/measures/surgery>.

**Question 15:** Are facilities who have not met the 240 rule for Medicare cases still exempt from reporting?

Reporting requirements have remained the same for the ASCQR Program. If a facility has less than 240 Medicare claims in a calendar year, it is not required to collect data the following year, but it can do so voluntarily. Please feel free to contact us with any additional program questions at (866) 800-8756.