

Successful Reporting in the ASCQR Program

AMBULATORY SURGICAL CENTER QUALITY REPORTING (ASCQR) PROGRAM REFERENCE CHECKLIST

ASCQR PROGRAM REQUIREMENTS SUMMARY

Welcome to the ASCQR Program! Participating in this quality program allows you to showcase the high standard of care and performance your facility provides to the ASC community. The following information will outline the program requirements and the tools needed to ensure your facility succeeds.

ASCs are paid by Medicare under Part B Fee-for-Service (FFS). ASCs that do not meet ASCQR Program requirements may receive a reduction of 2.0 percentage points in their payment update for the applicable payment year. Participating ASCs that meet program requirements will not be penalized under the ASCQR Program and will receive their full Medicare payment update. This Program Reference Checklist is your resource for meeting those requirements. Our goal is your success!

Any data submitted for the ASCQR Program may be made publicly available after the Centers for Medicare & Medicaid Services (CMS) provides ASCs with an opportunity to review the data. ASCs will have approximately 30 days during the preview period to review their data before the data are published. This preview period does not serve as a correction period. More information on the public reporting requirements is available at 42 CFR 416.315.

Eligible ASCs must follow the requirements as outlined in the applicable Outpatient Prospective Payment System/Ambulatory Surgical Center (OPPS/ASC) Final Rule, published in the *Federal Register*, or may incur a payment penalty. The most recent requirements are available at <https://www.govinfo.gov/content/pkg/FR-2020-12-29/pdf/2020-26819.pdf> beginning on page 86187. Requirements to date are summarized in the **ASCQR Program Reference Checklist**.

Claims Threshold

ASCs that have fewer than 240 Medicare claims (primary plus secondary payer) per year during a reporting period for a payment determination year are not required to participate in the ASCQR Program for the subsequent reporting period for that subsequent payment determination year. This includes all program requirements, both claims-based measures and measure data entered via a web-based tool. For example, an ASC with fewer than 240 Medicare claims in 2019 would not be required to submit 2020 data for the calendar year (CY) 2022 payment determination.

ASCs Newly Designated as Open

Administrative requirements apply to all ASCs designated as operating in the CMS Certification and Survey Provider Enhanced Reporting (CASPER) system, Medicare's database for survey and certification purposes, four months prior to January 1 of the data collection period. Upon successful submission of any quality measure data, the ASC will be deemed as participating in the ASCQR Program for the upcoming payment year determination. For example, if an ASC is designated as newly operating on October 17, 2020, the ASC would begin collecting data in

2021 to enter data in the Secure Portal of Hospital Quality Reporting during the submission period of January 1–May 16, 2022 for the calendar year 2023 payment determination.

Technical Support

ASCs can contact the ASCQR Program Support Team with questions regarding data or for technical support. Contact the ASCQR Program Support Team by email at ogrsupport@hsag.com or by telephone at 866.800.8756.

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Mandatory Steps for ASCQR Program Participation

The following requirements per CY are established for participation in the ASCQR Program and for receipt of the applicable CY's payment update. The ASCQR Specifications Manual, QualityNet User Guide, and Security Official (SO) registration forms referenced below are available on the QualityNet website (<https://qualitynet.cms.gov>)

For the CY 2022 Payment Update (based on the January 1, 2020 through December 31, 2020 reporting period):

- **Collect data to be submitted via a web-based tool to CMS (ASC-9, -13, and -14) and submit these data, either directly or through an ASC agent, via the Hospital Quality Reporting (HQR) Secure Portal as directed.** See <https://qualitynet.cms.gov> for registration information, reporting dates, and submission guidelines. To submit data for these measures and access reports, the ASC must have an active SO registered with QualityNet. The deadline for submitting these measures is **May 17, 2021**.

For the CY 2023 Payment Update (based on the January 1, 2021 through December 31, 2021 reporting period):

- **Collect data to be submitted via a web-based tool to CMS (ASC-9, -13, and -14) and submit these data, either directly or through an ASC agent, via the Hospital Quality Reporting (HQR) Secure Portal as directed.** Reporting dates are available on p. 6, and submission guidelines are in the Specifications Manual, version 10.0. Deadlines are subject to change and should be verified on <https://qualitynet.cms.gov>. To submit data for these measures and access reports, the ASC must have an active SO registered with QualityNet. The deadline for submitting these measures is **May 16, 2022**.

Note: ASCs may voluntarily submit data for CY 2022 and CY 2023 for **ASC-11** but will not be subject to a payment reduction with respect to this measure during the voluntary reporting period. **ASC-12, ASC-17, and ASC-18** are calculated from paid Medicare FFS claims; no additional data submission is required.

National Provider Identifiers (NPIs)

An ASC that shares the same NPI with other ASCs must report for all such facilities; payment determinations will be made by and applied to the facility's NPI applicable to any and all facilities billing under this NPI.

Withdrawing from the ASCQR Program

Submitting any quality measure data, either by including Quality Data Codes (QDC) on at least one Medicare Part B facility claim or submitting data via a web-based tool, designates the ASC as participating in the ASCQR Program. An ASC is considered to be an ASCQR Program participant until the ASC withdraws from the program by submitting a withdrawal form to CMS. Specific instructions on how to withdraw and the withdrawal form can be found on <https://qualitynet.cms.gov>.

ASCQR Measures

The measures for the CY 2022 payment determination year and the CY 2023 payment determination year are listed on page 5 and 6 of this document. Unless these measures are removed, suspended, or replaced, the measures are retained from one CY payment determination to the next so that measures adopted for a previous payment determination year would be retained for subsequent payment determination years (42 CFR 416.320).

The measure listings for CY 2022 and CY 2023 that follow are presented on individual pages for use as a reference.

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CY 2022 AMBULATORY SURGICAL CENTER QUALITY REPORTING MEASURES AND DATES

The chart below summarizes the Ambulatory Surgical Center Measure Reporting dates as outlined in the Specifications Manual v9.0. Deadlines are subject to change and should be verified on <https://qualitynet.cms.gov>

CY 2022 PAYMENT DETERMINATION YEAR			
Number	Outcome Claims-Based Measure	Reporting Period	
ASC-12	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	January 1, 2018 to December 31, 2020	
ASC-17	Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures	January 1, 2019 and December 31, 2020	
ASC-18	Hospital Visits after Urology Ambulatory Surgical Center Procedures	January 1, 2019 and December 31, 2020	
Number	Measures Submitted via a Web-based Tool	Reporting Period	Submission Period
ASC-9	Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	January 1, 2020– December 31, 2020	January 1, 2021 – May 17, 2021
ASC-11	Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery (Voluntary)*	January 1, 2020– December 31, 2020	January 1, 2021 – May 17, 2021
ASC-13	Normothermia	January 1, 2020– December 31, 2020	January 1, 2021 – May 17, 2021
ASC-14	Unplanned Anterior Vitrectomy	January 1, 2020– December 31, 2020	January 1, 2021 – May 17, 2021

* ASCs may voluntarily submit data but will not be subject to a payment reduction with respect to this measure during the voluntary reporting period.

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CY 2023 AMBULATORY SURGICAL CENTER QUALITY REPORTING MEASURES AND DATES

The chart below summarizes the Ambulatory Surgical Center Measure Reporting dates as outlined in the Specifications Manual v.10.0. Deadlines are subject to change and should be verified on <https://qualitynet.cms.gov>.

CY 2023 PAYMENT DETERMINATION YEAR			
Number	Outcome Claims-Based Measure	Reporting Period	
ASC-12	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	January 1, 2019 to December 31, 2021	
ASC-17	Hospital Visits after Orthopedic Ambulatory Surgical Center (ASC) Procedures	January 1, 2020 and December 31, 2021	
ASC-18	Hospital Visits after Urology Ambulatory Surgical Center Procedures	January 1, 2020 and December 31, 2021	
Number	Measures Submitted via a Web-based Tool	Reporting Period	Submission Period
ASC-9	Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	January 1, 2021 – December 31, 2021	January 1, 2022 – May 16, 2022
ASC-11*	Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery (Voluntary)*	January 1, 2021 – December 31, 2021	January 1, 2022 – May 16, 2022
ASC-13	Normothermia	January 1, 2021 – December 31, 2021	January 1, 2022 – May 16, 2022
ASC-14	Unplanned Anterior Vitrectomy	January 1, 2021– December 31, 2021	January 1, 2022 – May 16, 2022–

* ASCs may voluntarily submit data for CY 2022 payment determination but will not be subject to a payment reduction with respect to this measure during the voluntary reporting period.

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Claims-Based Data Submission for the CY 2022 Payment Determination

For information on the Outcome Claims-Based measures ASC-12, ASC-17, and ASC-18 please see the [Resources page](#) available on <https://qualitynet.cms.gov> No additional data submission is required. Data for these measures are collected via paid Medicare FFS claims.

Data Submitted Via a Web-Based Tool

To meet program requirements for web-based measures, facilities should note the following:

- Data for measures submitted via a web-based tool for CY 2020 reporting period (ASC-9, ASC-13, and ASC-14) must be submitted to CMS via the HQR Secure Portal during the **submission period ending May 17, 2021**. Data for measures submitted via a web-based tool for CY 2021 reporting period (ASC-9, -13, and -14) must be submitted to CMS via the HQR Secure Portal during the submission period ending May 16, 2022.
- All files and data exchanged with CMS via the Portal are encrypted during transmission and stored in an encrypted format until the recipient downloads the data. The Portal website meets all current Health Insurance Portability and Accountability Act (HIPAA) requirements.
- ASCs must have an active Security Official (SO) registered with QualityNet to submit data via the Portal's tool and to access reports. Information about registering can be found on the next page of this document or at the [QualityNet Registration](#) section of QualityNet.
- ASCs may voluntarily submit data for ASC-11 but will not be subject to a payment reduction with respect to this measure.
- Submission instructions:
Data entry will be achieved through the secure side of <https://hqr.cms.gov/> via an online tool available to authorized users. After logging into the secure portal:
 1. Select **Data Submission** from the left side screen Lock Menu.
 2. Select **Data Form**.
 3. Select **Launch Data Form** to open the submission application.
 4. Select **Start Measures** to enter data.
 5. Enter data for a measure and then select the **Save and Return** icon. Repeat this process for each required measure until all required data is complete.
 6. Facilities that do not have data for a required measure should select the checkbox marked: **Please enter zeros for this measure, as I have no data to submit**.
 7. Select **I'm ready to submit** dial at the bottom of the page. The **All Measures Successfully Submitted** screen will display, and the data submission process is complete.
 - The dial will remain grayed out until all required measures are completed. The dial will turn blue when all required measures are completed.
 - Data are not recognized as officially submitted until the **I'm ready to submit** icon is selected and the **All Measures Successfully Submitted** screen displays.

The **File Upload** option is a new feature and requires the approved CSV template to be used. File upload may be used by vendors or corporations submitting data for more than one ASC at the same time.

QUALITYNET WEBSITE REGISTRATION

All users requesting access to the HQR Secure Portal must be individually approved and verified. ASCs should submit documentation required for the creation of an HQR account at least six weeks prior to any quality measure data submission deadline for the ASCQR Program. This mandatory registration process is required to maintain the confidentiality and security of healthcare information and data transmitted via the Portal. Please consult the QualityNet website at <https://qualitynet.cms.gov> for more information about security requirements for this process.

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SO/Security Designee Registration Process

The QualityNet Security Official (SO) is allowed to submit data via the web-based tool on HQR, access secure reports, and facilitate the registration process for other users at the organization via the HQR Secure Portal. ASCs should have more than one SO and are strongly urged to maintain the active status of another SO that is in an administrative position less likely to fluctuate. Each facility with a unique NPI must have a SO, but a SO may be approved for more than one facility.

The QualityNet SO also creates, approves, edits and/or terminates basic HQR user accounts (except the SO's) within the organization. The Security Designee assists the HQR SO with managing user accounts as well as resetting passwords.

To register:

1. sign up for a HCQIS Access Roles and Profile (HARP) account on <https://harp.cms.gov/register/profile-info>
2. Download the [QualityNet Security Official Electronic Submission Packet \(ESP\)](#) and follow the instructions within.
3. Once your account is approved for the Security Official role, you will access the Hospital Quality Reporting (HQR) site, <https://hqr.cms.gov/hqrng/login> using HARP credentials.

PUBLIC REPORTING AND RECONSIDERATION

Public Reporting

ASCs reimbursed under Medicare Part B FFS are required to meet data reporting requirements to receive their full payment update. For these ASCs, reported ASCQR Program data for selected time periods will become publicly available as required by section 1833(t)(17)(E) of the Social Security Act. ASCs will have approximately 30 days to preview any such data prior to it being made publicly available.

APU Reconsideration Process

A reconsideration process is available for the ASCQR Program for those ASCs that do not receive the full payment update. Procedural rules that govern the ASCQR Program reconsiderations can be found at 42 CFR 416.330. The reconsideration process and forms are available on the [QualityNet](#) website.

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RESOURCES

- **ASC Quality Reporting Program Support Team**

As the ASCQR Program Support Team, Health Services Advisory Group (HSAG) supports activities under the ASCQR Program, including providing technical support and feedback to assist ASCs with quality data reporting.

ASCQR Program Support Team 866.800.8756

qgrsupport@hsag.com

- **ASCQR Program Website**

www.qualityreportingcenter.com

This site contains numerous resources concerning reporting requirements, including reference and training materials, tools for data submission, educational presentations, and deadlines.

- **ASC 101**

This page includes links to essential information for those new to quality reporting for ASCs.

- **Lookup Tools**

This page allows access to databases that will provide the CCN associated with an ASC's NPI, the status of web-based measure data submitted, and the availability of data reports for other measures on QualityNet.

- **Agent (Vendor) Authorization Forms**

This page provides instructions and forms for authorizing a third party to enter data for one or multiple ASCs.

- **QualityNet**

<https://qualitynet.cms.gov>

Established by CMS, the QualityNet website provides healthcare quality improvement news, resources, and data reporting tools and applications used by healthcare providers and others. The QualityNet website is the only CMS-approved website for secure communications and healthcare quality data exchange.

- **QualityNet Help Desk**

866.288.8912

qnetsupport@hcqis.org

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- **ASCQR QualityNet Mailer**

<https://www.qualitynet.org/listserv-signup>

Notices are generated on an auto-notification list, which disseminates timely information related to quality reporting. QualityNet users are urged to register for these email notifications to receive information on enhancements and new releases, notification of timeline or process/policy modifications, and important alerts about applications and initiatives.

- **ASCQR Questions/Answers**

https://cmsqualitysupport.service-now.com/qnet_qa

The ASCQR Program Support Team maintains the ASCQR Questions and Answers database, which allows users to ask questions, obtain responses from all resolved questions, and search by keywords or phrases.

- **CMS**

www.cms.gov

CMS is the U.S. Department of Health and Human Services' agency responsible for administering Medicare, Medicaid, SCHIP (State Children's Health Insurance Program), and other health-related programs.

- **ASCQR Program section of <https://data.cms.gov/provider-data/>**