



Ambulatory Surgical Center Quality Reporting Program

Support Contractor

Telling Your Story: Public Reporting for the ASCQR Program

Questions & Answers

Moderator:

Tamara Heron, MBA
Project Coordinator, ASCQR Support Contractor

Speaker:

Karen VanBourgondien, RN, BSN
Education Coordinator, ASCQR Support Contractor

October 28, 2015

2:00 p.m. ET

- Question 1:** I only thought you could have one SA. Can you have more than one?
- Answer 1:** CMS recommends that facilities keep at least two active Security Administrators.
- Question 2:** What are the specific codes for ASC Measure 12?
- Answer 2:** ASC-12 is a claims-based measure. You can find all measure details in your Ambulatory Surgical Center Specifications Manual located on www.qualitynet.org under the ASC section.
- Question 3:** When can you submit this year's ASC-8 into NHSN?
- Answer 3:** For the flu season 2015–2016, this can be entered starting October 1, 2015. The deadline for this submission is May 15, 2016.
- Question 4:** Can you explain how a risk standardized hospital rate after outpatient colonoscopy will affect payment?
- Answer 4:** The ASC Program is a pay for reporting program. The outcome of ASC-12 does not affect payment.
- Question 5:** Can you repeat which measures will be reported publicly in April 2016?
- Answer 5:** Claims-based measures for 2013 and 2014 and web-based measures for 2014. I originally typed 2015, this was a typo. I apologize. ASC 1-5 will be 2013 and 2014 data. The web-based measures will be from 2014.
- Question 6:** I don't know what assigning basic user roles means.

Ambulatory Surgical Center Quality Reporting Program

Support Contractor

- Answer 6:** Assigning basic user roles means that the SA can assign user-specific roles. An example would be that the basic user is only able to log into the Secure Portal on QualityNet and enter data.
- Question 7:** Okay, so the Infection Control Coordinator could log in and submit flu data, correct? The business office could submit QDCs on 50 percent of our claims for Medicare claims because we have over 240 Medicare patients?
- Answer 7:** Yes, the Infection Control Coordinator can log into NHSN with the proper credentials and submit flu data.
- Question 8:** If I didn't preview data during the preview period for years 2013 and 2014, can I still see it before it is published?
- Answer 8:** Starting October 8th, this information was displayed publicly on Hospital Compare.
- Question 9:** I am asking about previews for 2013 and 2014.
- Answer 9:** The next preview period will be in January for the April display. If you miss this preview period, you can contact the Support Contractor and request a copy at 866.800.8756.
- Question 10:** If you ask to suppress ASC-3 for one year, what else will automatically be suppressed with it?
- Answer 10:** You may only request to have all data suppressed for 2013 or 2014 or both years.
- Question 11:** Will this webinar PowerPoint be available for reference?
- Answer 11:** Yes, all educational webinars are available on qualityreportingcenter.com prior to the webinars. After the presentation they are listed on that website under the **Archived Events** tab.
- Question 12:** When is the deadline to report the data for 2015/2016 flu season?
- Answer 12:** The deadline to report the data for the flu season 2015–2016 is May 15, 2016.
- Question 13:** For ASC-12, it appears that any post colonoscopy hospital admission is counted even if it is unrelated to the colonoscopy procedure. Will this data be used in terms of reimbursement?
- Answer 13:** This data will not affect reimbursement. The ASC Program is a pay for reporting program.
- Question 14:** Why would ASCs want to suppress data?

Ambulatory Surgical Center Quality Reporting Program

Support Contractor

- Answer 14:** This is an individual decision with varying reasons to be determined by the facility.
- Question 15:** Which payment year is affected by ASC-9 and ASC-10? For 2016 submission, is the payment year 2017? Is there a 2 percent decrease in payment for less than 100 percent compliance per year? Does this accrue, or is it 2 percent per year?
- Answer 15:** The ASCQR Program is a pay for reporting program, not a pay for performance program. As such, the requirements for ASC is QDC reporting on at least 50 percent of Medicare FFS claims AND submitting data on web-based measures, regardless of what the results of the web-based measures are.
- Question 16:** Is there a more consolidated report to print the facility's public data? I printed the data for my facility, and it printed one line per page on 8 pages.
- Answer 16:** Once you are on the screen that shows your facility's data, there is a green menu button in the top right-hand corner that will allow you a few different options on ways to view and print your data.
- Question 17:** Can we get the CMS website address again for Hospital Compare?
- Answer 17:** You can find Hospital Compare at:
<https://www.medicare.gov/hospitalcompare/search.html>.
- Question 18:** Why would a facility suppress their data?
- Answer 18:** A facility may have inadvertently entered data showing a quality data code such as a burn. This was a keystroke error, and the facility did not have a burn. This publicly reported burn may affect the ASC's public appearance reported on Hospital Compare; therefore, they may request to suppress their data.
- Question 19:** Is there any way to preview my 2013 and 2014 data prior to the data suppression deadline of November 16th?
- Answer 19:** This data is collected from the information reported by the facility. You should have this information, as it was submitted by your facility.
- Question 20:** What is the reasoning behind suppressing data?
- Answer 20:** These measures are submitted by utilizing quality data codes on each CMS-1500. Some ASCs reported incorrect QDCs on claims, and once a claim is adjudicated, a facility cannot resubmit a claim to correct a QDC. There is not a correction period for publicly reported data. The publicly reported data is the data an ASC has reported. Since this is the first time

Ambulatory Surgical Center Quality Reporting Program

Support Contractor

data for ASCs are being reported, CMS has made suppression an option for these measures only.

Question 21: Please clarify the reporting deadline for ASC-8: May 15, 2016 vs. March 31, 2016.

Answer 21: The NHSN data collection period is between October 1, 2015 through March 31, 2016. The reporting period is between October 1, 2015 through May 15, 2016. What this means is that all data should be collected for only those six months, and all data must be reported by the May 15 deadline.

Question 22: Whom do we contact if the menu option doesn't work on the Hospital Compare site?

Answer 22: Please email Hospital Compare at: hospitalcompare@hsag.com .

Question 23: Is there a website where you can check to see if you have completed all requirements for reporting?

Answer 23: You can check to see if your facility has completed all of the requirements for reporting two ways. The first way is to log into QualityNet and run a Provider Participation Report. This report will show you if you are meeting the requirements. The second way is to visit our website at www.qualityreportingcenter.com and look under **Status Listing**, and you can enter your NPI and CCN and it will return a status update.

Question 24: On ASC-12, I saw that about 70 percent of the events reported on my report had absolutely nothing to do with the patient's colonoscopy. Public reporting of this seems very prejudicial, as patients will perceive that the number of "complications" is much higher than it really is. How is this information useful to a patient? I assume this has happened to other facilities as well, and I would think this may even discourage some patients from having this very important test, colonoscopy, because of this reporting.

Answer 24: Please call the Support Contractor or see QualityNet for more information regarding ASC-12. (866-800-8756)

Question 25: What was that again? What video?

Answer 25: To view any educational videos, please visit our website qualityreportingcenter.com under the ASC tab and click on the **Videos, Resources, and Tools** tab.

Ambulatory Surgical Center Quality Reporting Program

Support Contractor

Question 26: For ASC-12 it says it will be used for reimbursement in 2018. It makes it sound like there will be a cut if your readmission score is too high. Do you know if it is a cut?

Answer 26: The ASCQR Program is a pay for reporting program, not a pay for performance. An ASC would only receive a reduction on payment if they do not meet all the program requirements.

Question 27: Can you explain the rate as in the preview report example? What does 0.75 mean?

Answer 27: The example rate of .75 on the preview report is the rate of burns reported on the facility's claims with QDCs.