

Welcome!

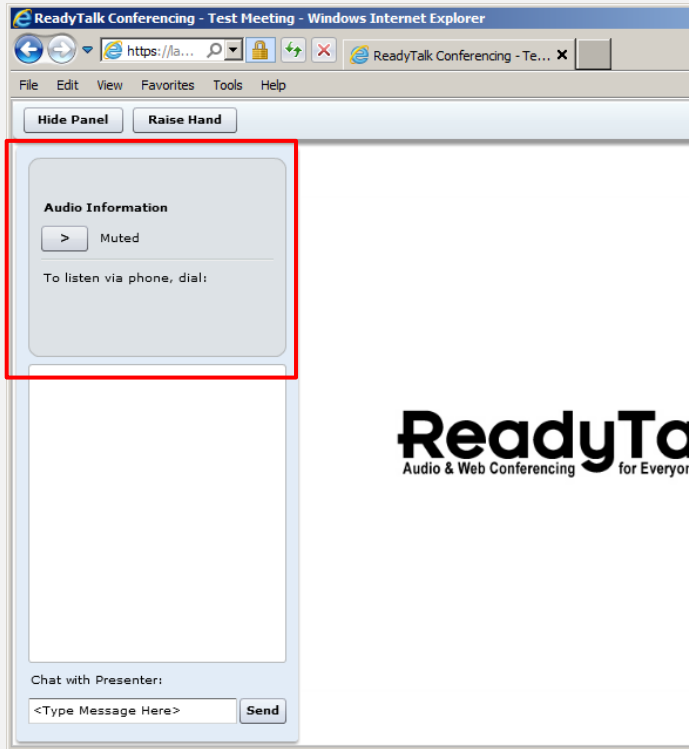
- **Audio for this event is available via ReadyTalk® Internet Streaming.**
- **No telephone line is required.**
- **Computer speakers or headphones are necessary to listen to streaming audio.**
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- **This event is being recorded.**



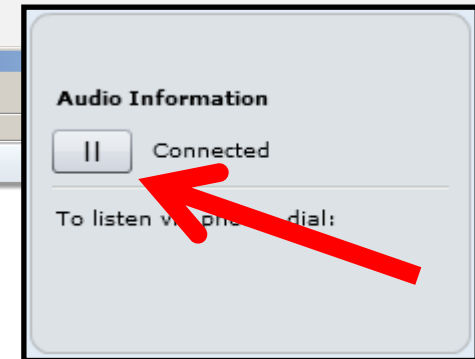
Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stop?

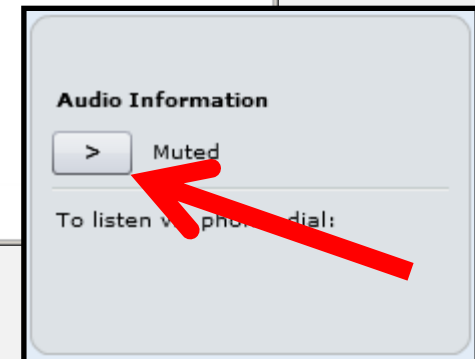
- Click Pause button
- Wait 5 seconds
- Click Play button



Location of audio controls



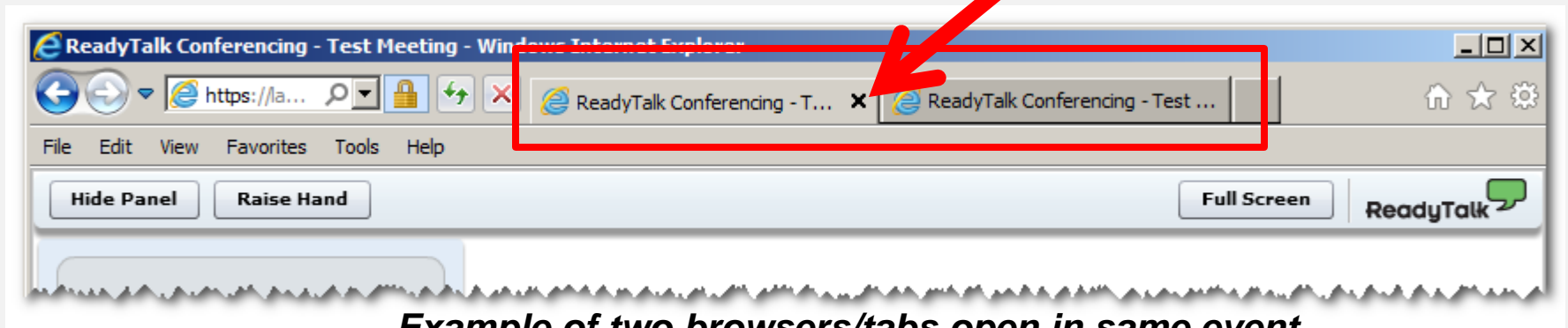
Step 1



Step 2

Troubleshooting Echo

- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.
- Close all but one browser/tab and the echo will clear up.



Example of two browsers/tabs open in same event

Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



A screenshot of a web application interface. On the left, there is a vertical chat window with a title bar containing "Hide Chat" and "Raise Hand". The chat area is mostly empty. At the bottom of the chat window, there is a section titled "Chat with Presenter" containing a text input field with the placeholder "Type questions here." and a "Send" button. A yellow arrow points to this input field. The main content area on the right shows a presentation slide with the CMS logo (Centers for Medicare & Medicaid Services) at the top. The slide text reads "Welcome to Today's Event" in large blue letters, followed by "Thank you for joining us today! Our event will start shortly." in smaller blue italicized text. The top of the window has a dark header with "Full Screen" and "ReadyToGo" buttons.



CY 2016 OPPS/ASC Final Rule: Ambulatory Surgical Center Quality Reporting (ASCQR) Program

Anita Bhatia, PhD, MPH

*Centers for Medicare & Medicaid Services
(CMS)*

December 9, 2015

Announcements

- December 16, 2015 – CMS measure development and the importance of public involvement, presented by CMS' Elizabeth Bainger
- January 27, 2016 – ASC Specifications Manual update

Learning Objectives

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

- Locate the Calendar Year (CY) 2016 OPPS/ASC Final Rule in the *Federal Register*
- Recognize the changes to the ASCQR Program in the CY 2016 Final Rule
- Assess how the changes will impact their facility



CY 2016 OPPS/ASC Final Rule



ASCQR Program

*Anita Bhatia, PhD, MPH
Program Lead, ASCQR
Program, CMS*

December 9, 2015

Final Rule CY 2016

Locating the Rule

ASCQR Program Rule History

Rule	Federal Register (FR) Reference	Program Highlights
CY 2016 OPPS/ASC	80 FR 70526	No additional measures
CY 2015 OPPS/ASC	79 FR 41044	1 new claims-based measure
CY 2014 OPPS/ASC	78 FR 75122	3 web-based measures
CY 2013 OPPS/ASC	77 FR 68492	No additional measures
FY 2013 IPPS/LTCH PPS	77 FR 53637	Finalized requirements
CY 2012 OPPS/ASC	79 FR 74492	Finalized 8 measures
CY 2011 OPPS/ASC	75 FR 72109	Discussed, not implemented
CY 2010 OPPS/ASC	74 FR 60656	Discussed, not implemented
CY 2009 OPPS/ASC	73 FR 68780	Discussed, not implemented

Navigating the Federal Register(1 of 6)

The screenshot shows the Federal Register website. At the top, there is a navigation bar with links for Home, Sections, Browse, Search, Policy, Learn, Blog, My FR, and a search box containing '80 FR 70526'. Below the navigation bar is the Federal Register logo and the text 'FEDERAL REGISTER The Daily Journal of the United States Government'. A blue banner indicates the date 'Friday, November 13th'. A green bar shows statistics for the current issue: 85 Notices, 6 Proposed Rules, 9 Rules, 2 Presidential Documents, 1 Significant Document, and 519 Pages. The main content area features a 'WORLD' category with a featured article titled 'Certain Welded Carbon Steel Pipes and Tubes From Turkey' by Mike Atherton. To the right, there are 'RECENT BLOG POSTS' including 'Digitizing the Federal Register', 'Updates to PKCS7Sign tool', and '2nd Annual PKI Conference'. At the bottom, there are sections for 'ABOUT THE FEDERAL REGISTER' with a video player for 'Master the CFR' and 'MOST VIEWED MOST E-MAILED' with a list of top articles.

80 FR 70526

FEDERAL REGISTER
The Daily Journal of the United States Government

Friday, November 13th

Current Issue 85 Notices 6 Proposed Rules 9 Rules 2 Presidential Documents 1 Significant Document 519 Pages

MONEY
ENVIRONMENT
WORLD
SCIENCE & TECHNOLOGY
BUSINESS & INDUSTRY
HEALTH & PUBLIC WELFARE

Certain Welded Carbon Steel Pipes and Tubes From Turkey
A Notice by International Trade Administration on 11/13/2015


Mike Atherton

The Department of Commerce is amending the Final Results of the administrative review of the countervailing duty order on certain welded carbon steel pipe and tube from Turkey.

16 NEW DOCUMENTS IN THIS ISSUE 15 COMMENT PERIODS ENDING SOON

RECENT BLOG POSTS

Digitizing the Federal Register
Posted by Ben Jordi on October 2, 2015

If you have ever tried to search our site for Federal Register documents published prior to 1994, you've realized that there is nothing online from 1936 to 1994. Then you may...
[Continue reading →](#)

Updates to PKCS7Sign tool
Posted by Ben Jordi on September 15, 2015

2nd Annual PKI Conference
Posted by Ben Jordi on August 27, 2015

ABOUT THE FEDERAL REGISTER

Federal Register Videos

Master the CFR

PLAY ALL

MOST VIEWED MOST E-MAILED

- 1 Improving and Expanding Training Opportunities for F-1 Nonimmigrant Students With STEM Degrees and Cap-Gap...
- 2 Employment Authorization for Nepali F-1 Students Experiencing Severe Economic Hardship as a Direct Result...
- 3 Annual Update of the HHS Poverty Guidelines
- 4 Medicare and Medicaid Programs; Electronic Health Record Incentive Program-Stage 3 and Modifications to...
- 5 Agency Information Collection Activities: Application To Replace Permanent Resident Card, Form I-90;...

Navigating the Federal Register (2 of 6)

The screenshot shows the Federal Register website interface. At the top, there is a navigation bar with links for Sections, Browse, Search, Policy, Learn, Blog, and My FR. A search bar on the right contains the text 'Search Documents'. Below the navigation bar is the Federal Register logo and the text 'FEDERAL REGISTER The Daily Journal of the United States Government'. A blue banner with the text 'Search Documents' is visible. Below the banner, there are tabs for Documents, Public Inspection, Events, and Unified Agenda Items. A search bar contains the text '80 FR 70526' and a search icon. To the right of the search bar, it says '1 matching citation, 17 search results'. There are also links for 'Show Advanced Search', 'Learn More', and 'Other Formats: CSV/Excel, JSON'. Below the search bar, there is a table of results. The first result is a 'Proposed Rule' with 9 documents. Below the table, there is a section for 'AGENCY' with a list of agencies and their respective document counts. The 'Centers for Medicare & Medicaid Services' has 12 documents. The 'Health and Human Services Department' has 12 documents. The 'Federal Emergency Management Agency' has 2 documents. The 'Homeland Security Department' has 2 documents. The 'Management and Budget Office' has 2 documents. Below the table, there is a section for 'DOCUMENTS FOUND' with the number '17'. To the right of this section, there are buttons for 'RELEVANT', 'NEWEST', and 'OLDEST'. A red box highlights the text 'Jump directly to page 70526.' in the search results.

Sections ▾ Browse ▾ Search ▾ Policy ▾ Learn ▾ Blog ▾ My FR ▾ Search Documents

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0 Sign in Sign up
MANET

Search Documents

Documents Public Inspection 0 Events 0 Unified Agenda Items 0

Find **1 matching citation, 17 search results** **SUBSCRIBE**

[Show Advanced Search](#) [Learn More](#) **Other Formats: CSV/Excel, JSON**

TYPE

Proposed Rule	9
Rule	6
Notice	2

AGENCY

Centers for Medicare & Medicaid Services	12
Health and Human Services Department	12
Federal Emergency Management Agency	2
Homeland Security Department	2
Management and Budget Office	2

It looks like you were searching for the citation **80 FR 70526**. We've found the following 1 document on page 70526 of volume 80.

[Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment...](#)

This final rule with comment period revises the Medicare hospital outpatient prospective payment system (OPPS) and the Medicare ambulatory surgical center (ASC) payment system for CY 2016 to...

Rule [11/13/2015](#) [Centers for Medicare & Medicaid Services](#) Pages 70297 - 70607

[Jump directly to page 70526.](#) PDF

DOCUMENTS FOUND **17** **RELEVANT** [NEWEST](#) [OLDEST](#)

Navigating the Federal Register (3 of 6)

XIV. Requirements
for the Ambulatory
Surgical Center
Quality Reporting
(ASCQR) Program
[Back to Top](#)

A. Background

1. Overview

We refer readers to section XIII.A.1. of this final rule with comment period for a general overview of our quality reporting programs.

2. Statutory History of the Ambulatory Surgical Center Quality Reporting (ASCQR) Program

We refer readers to section XIV.K.1. of the CY 2012 OPPS/ASC final rule with comment period ([76 FR 74492](#) through 74494) for a detailed discussion of the statutory history of the ASCQR Program.

3. Regulatory History of the ASCQR Program

We refer readers to section XV.A.3. of the CY 2014 OPPS/ASC final rule with comment period ([78 FR 75122](#)) for an overview of the regulatory history of the ASCQR Program, and to section XIV.4. of the CY 2015 OPPS/ASC final rule with comment period ([79 FR 66966](#) through 66987) for subsequently enacted policies.

In the CY 2016 OPPS/ASC proposed rule ([80 FR 39340](#)), we proposed to establish a new Subpart H under [42 CFR part 416](#) to codify many of the administrative policies regarding the ASCQR Program. We proposed to codify our statutory authority for the ASCQR Program in new proposed [42 CFR 416.300\(a\)](#). In that proposed section, we state that section 1833(i)(2)(D)(iv) and (i) (7) of the Act authorizes the Secretary to implement a revised ASC payment system in a manner so as to provide for a 2.0 percentage point reduction in any annual update for an ASC's failure to report on quality measures in accordance with the Secretary's requirements. In new proposed [42 CFR 416.300\(b\)](#),

Navigating the Federal Register (4 of 6)

The screenshot shows the Federal Register website interface. At the top, there is a navigation bar with links for Sections, Browse, Search, Policy, Learn, Blog, and My FR. A search bar on the right contains the text 'Search Documents'. Below the navigation bar is the Federal Register logo and the text 'FEDERAL REGISTER The Daily Journal of the United States Government'. A blue banner with the text 'Search Documents' is positioned below the logo. The main content area features a search bar with the query '80 FR 70526' and a search button. To the right of the search bar, it indicates '1 matching citation, 17 search results' and provides options to 'SUBSCRIBE' and view results in 'Other Formats: CSV/Excel, JSON'. On the left side, there are filters for 'TYPE' and 'AGENCY'. The 'TYPE' filter shows 'Proposed Rule' (9), 'Rule' (6), and 'Notice' (2). The 'AGENCY' filter lists 'Centers for Medicare & Medicaid Services' (12), 'Health and Human Services Department' (12), 'Federal Emergency Management Agency' (2), 'Homeland Security Department' (2), and 'Management and Budget Office' (2). The main search results area displays a message: 'It looks like you were searching for the citation 80 FR 70526. We've found the following 1 document on page 70526 of volume 80.' Below this message, the title of the document is shown: 'Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment...'. A brief description follows: 'This final rule with comment period revises the Medicare hospital outpatient prospective payment system (OPPS) and the Medicare ambulatory surgical center (ASC) payment system for CY 2016 to...'. The document details are: 'Rule 11/13/2015 Centers for Medicare & Medicaid Services Pages 70297 - 70607'. A link to 'Jump directly to page 70526' and a PDF icon are also present. At the bottom of the search results area, it shows 'DOCUMENTS FOUND 17' and sorting options: 'RELEVANT', 'NEWEST', and 'OLDEST'.

Sections ▾ Browse ▾ Search ▾ Policy ▾ Learn ▾ Blog ▾ My FR ▾ Search Documents

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Search Documents

Documents Public Inspection 0 Events 0 Unified Agenda Items 0

Find 80 FR 70526 1 matching citation, 17 search results **SUBSCRIBE**

[Show Advanced Search](#) [Learn More](#) Other Formats: CSV/Excel, JSON

TYPE

Proposed Rule	9
Rule	6
Notice	2

AGENCY


Centers for Medicare & Medicaid Services	12
Health and Human Services Department	12
Federal Emergency Management Agency	2
Homeland Security Department	2
Management and Budget Office	2

17

Navigating the Federal Register (5 of 6)

ALTERNATIVE U.S. DEPARTMENT INFORMATION GPO

Find
70526
Previous Next



FEDERAL REGISTER

Vol. 80 Friday,
No. 219 November 13, 2015

Part II

Navigating the Federal Register (6 of 6)

70526

Federal Register / Vol. 80, No. 219 / Friday, November 13, 2015 / Rules and Regulations

and “U” (other than new technology APCs to which we have proposed status indicator assignment of “S” and “T”). We note that, discussed in sections I.A.2.e. of the CY 2015 OPPS/ASC final rule with comment period (79 FR 66962), we finalized our proposal to develop status indicator “J1” as part of our CY 2015 comprehensive APC policy, and to apply the reporting ratio to the comprehensive APCs. We proposed to continue to exclude services paid under New Technology APCs. We proposed to continue to apply the reporting ratio to the national unadjusted payment rates and the minimum unadjusted and national unadjusted copayment rates of all applicable services for those hospitals that fail to meet the Hospital OQR Program reporting requirements. We also proposed to continue to apply all other applicable standard adjustments to the OPPS national unadjusted payment rates for hospitals that fail to meet the requirements of the Hospital OQR Program. Similarly, we proposed to continue to calculate OPPS outlier eligibility and outlier payment based on the reduced payment rates for those hospitals that fail to meet the reporting requirements.

We invited public comments on these proposals.

We did not receive any public comments on these proposals. Therefore, we are finalizing our proposal to apply the Hospital OQR Program reduction in the manner described above. We also are finalizing our proposal to reflect the CY 2016 OPPS status indicators to which the adjustment would apply. For the CY 2016 OPPS, the final reporting ratio is 0.980, calculated by dividing the final reduced conversion factor of \$72,251 by the final full conversion factor of \$73,725.

XIV. Requirements for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program

A. Background

1. Overview

We refer readers to section XIII.A.1. of this final rule with comment period for a general overview of our quality

3. Regulatory History of the ASCQR Program

We refer readers to section XV.A.3. of the CY 2014 OPPS/ASC final rule with comment period (78 FR 75122) for an overview of the regulatory history of the ASCQR Program, and to section XIV.4. of the CY 2015 OPPS/ASC final rule with comment period (79 FR 66966 through 66987) for subsequently enacted policies.

In the CY 2016 OPPS/ASC proposed rule (80 FR 39340), we proposed to establish a new Subpart H under 42 CFR part 416 to codify many of the administrative policies regarding the ASCQR Program. We proposed to codify our statutory authority for the ASCQR Program in new proposed 42 CFR 416.300(a). In that proposed section, we state that section 1833(i)(2)(D)(iv) and (i)(7) of the Act authorizes the Secretary to implement a revised ASC payment system in a manner so as to provide for a 2.0 percentage point reduction in any annual update for an ASC’s failure to report on quality measures in accordance with the Secretary’s requirements. In new proposed 42 CFR 416.300(b), we state that this subpart contains the specific requirements and standards for the ASCQR Program. We note that we have previously referenced the statutory basis for the ASCQR Program in 42 CFR part 416, subpart F (42 CFR 416.160(a)) and the 2 percentage point reduction for ASCs that do not meet ASCQR Program requirements at 42 CFR 416.171(a)(2)(iii).

We invited public comment on our proposals to codify the scope and basis for the ASCQR Program.

Comment: Several commenters supported CMS’ proposals to codify the scope and basis for the ASCQR Program. Some commenters expressed concerns that codification was not warranted for a program that was still under development and that codification could make program changes in the future more difficult.

Response: We thank the commenters that supported our proposals to codify the scope and basis for the ASCQR Program. While some commenters believe codification could make

After consideration of the public comments we received, we are finalizing our proposals to establish a new Subpart H under 42 CFR part 416 to codify many of the administrative policies regarding the ASCQR Program, and to codify the scope and basis of the ASCQR Program in 42 CFR 416.300.

B. ASCQR Program Quality Measures

1. Considerations in the Selection of ASCQR Program Quality Measures

We refer readers to the CY 2013 OPPS/ASC final rule with comment period (77 FR 68493 through 68494) for a detailed discussion of the priorities we consider for ASCQR Program quality measure selection. In the CY 2016 OPPS/ASC proposed rule (80 FR 39341), we did not propose any changes to this policy. However, we received several comments on our priorities for measure selection.

Comment: One commenter stated that outcome reporting is the most direct way to measure clinical improvements in the quality of care provided to patients and expressed support for the ASCQR Program’s use of outcome measures.

Response: We thank the commenter for its support. We also believe that outcome measures are important and are a direct way to measure clinical improvement.

2. Policies for Retention and Removal of Quality Measures From the ASCQR Program

We previously adopted a policy that quality measures adopted for an ASCQR Program measure set for a previous payment determination year be retained in the ASCQR Program for measure sets for subsequent payment determination years, except when they are removed, suspended, or replaced as indicated (76 FR 74494 and 74504; 77 FR 68494 through 68495; 78 FR 75122; 79 FR 66967 through 66969). In the CY 2016 OPPS/ASC proposed rule (80 FR 39341), we did not propose any changes to this policy. However, we proposed to codify this policy at proposed new 42 CFR 416.320(a).

In the CY 2015 OPPS/ASC final rule with comment period (79 FR 66967 through 66969), we finalized a process

Measures for the CY 2017 Payment Determination

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
ASC-5	Prophylactic Intravenous (IV) Antibiotic Timing
ASC-6	Safe Surgery Checklist Use
ASC-7	ASC Facility Volume Data on Selected ASC Surgical Procedures
ASC-8	Influenza Vaccination Coverage among Healthcare Personnel
ASC-9	Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
ASC-10	Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps—Avoidance of Inappropriate Use
ASC-11 (voluntary)	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

Measures Under Consideration

- Normothermia Outcome
- Unplanned Anterior Vitrectomy
- Received conditional support from the Measures Application Partnership (MAP), pending the completion of reliability testing and National Quality Forum (NQF) endorsement
http://www.qualityforum.org/setting_priorities/partnership/measure_applications_partnership.aspx
- CMS invited public comment

Normothermia Outcome (1 of 2)

Percentage of patients having surgical procedures under general or neuraxial anesthesia of 60 minutes or more in duration who are normothermic within 15 minutes of arrival in the post-anesthesia care unit

- Impairment of thermoregulatory control due to anesthesia may result in perioperative hypothermia
- Perioperative hypothermia is associated with adverse outcomes, including cardiac complications, surgical site infections, impaired coagulation, and colligation of drug effects
- Maintenance of intraoperative normothermia leads to fewer adverse outcomes and lower overall costs

Normothermia Outcome (2 of 2)

- Significant area of medical care provided by ASCs
- Addresses the MAP-identified priority measure gap of anesthesia-related complications
- Used in ASC Quality Collaboration's public reporting program
- Specifications for the ASC setting:
http://ascquality.org/documents/ASC_QC_ImplementationGuide_3.0_January_2015.pdf
- CMS invited public comment

Unplanned Anterior Vitrectomy (1 of 2)

Percentage of cataract surgery patients who have an unplanned anterior vitrectomy (removal of the vitreous present in the anterior chamber of the eye)

- Performed when vitreous inadvertently prolapses into the anterior segment of the eye during cataract surgery
- Rates are relatively low, but this complication may result in poor visual outcome, retinal detachment, and other complications

Unplanned Anterior Vitrectomy (2 of 2)

- Significant area of medical care provided by ASCs
- Addresses the MAP-identified priority measure gap of procedure complications
- Specifications for the ASC setting:
http://ascquality.org/documents/ASC_QC_ImplementationGuide_3.0_January_2015.pdf
- Used in ASC Quality Collaboration's public reporting program
- CMS invited public comment

Final Rule CY 2016

Existing Policies, Proposed, and Final Changes

Codification

- Scope and basis of the program (regulatory history)
- Administrative policies (Security Administrators, participation status, data submission, etc.)
- Measure adoption and removal processes
- Posting technical specifications on QualityNet website
- Opportunity to view data before data are made public
- Indian Health Services hospital outpatient departments not considered ASCs

Public Reporting

- Data will be displayed by National Provider Identifier (NPI) when submitted by NPI
- Data will be displayed by CMS Certification Number (CCN) when submitted by CCN
- CCN's value will **not** be assigned to all NPIs associated with that CCN

QualityNet Accounts/Security Administrators

- QualityNet accounts needed for:
 - Submitting data
 - Running and reviewing data reports
 - Sending and receiving messages via Secure File Exchange
 - Creating and editing user accounts (Security Administrator)
- Recommend submitting required documentation 4 to 6 weeks prior to any data submission deadline
- Existing requirements codified

Participation Status

- An ASC is considered participating once the ASC submits any quality measure data (via Quality Data Codes (QDCs) on claims or via an online tool) to the ASCQR Program
- ASCs may withdraw at any time up to August 31 of the year preceding a payment determination
- ASCs that withdraw will incur a 2.0 percentage point reduction in the annual payment update for that payment determination year and any subsequent payment determination in which it has withdrawn
- Existing requirements codified

Participation Status and Claims Threshold

- ASCs with fewer than 240 Medicare claims per year for a reporting period **are not** required to participate, meaning that they...
 - Would not have to submit QDCs on claims
 - Would not have to submit measure data via an online tool
- ASCs with greater than 240 Medicare claims per year **are** required to report data for the following year.

Claims Threshold Example

- ABC Surgical Center has:
 - 280 Medicare claims in 2013, so they would have to submit QDCs on the calendar year 2014 claims, this would affect their 2016 payment determination.
 - 200 Medicare claims in 2014, so they would not have to submit QDCs on calendar 2015 claims, this would affect the 2017 payment determination.
 - 250 Medicare claims in 2015, so now they would have to submit QDCs on their calendar year 2016 claims, this will affect their 2018 payment determination.
- The simple solution? Report QDCs on claims each year, and claims volume will not be a cause for concern.

Data Submission

- Registries
 - Not in place yet
 - Will explore further if available in future
- Electronic Health Records (EHRs)
 - None specified for ASC quality measures
 - Will examine EHR adoption and capability if measures emerge

Data Collection for Measures Using QDCs

- Data collection period is the calendar year two years prior to the payment determination year
- 50% of claims meeting measure specifications must contain appropriate QDCs
- Minimum threshold allows ASCs that have reporting issues time to recover and still meet program requirements
- Existing requirements codified

Data Submission via Web-based Tool

- Proposed May 15 deadline for all data submitted via a web-based tool to reduce administrative burden
 - ASC-6, ASC-7, ASC-8, ASC-9, ASC-10, and ASC-11
- Commenters noted concerns about technical issues
- Moved deadline to August 15 for all measures submitted via **CMS'** online data submission tool
- Kept May 15 deadline for ASC-8 that is submitted via the **NHSN's*** online data submission tool
 - Allows ASCs to set targets and plan for next season
 - Allows for public reporting before next season begins
 - Aligns with Hospital Outpatient and Inpatient Quality Reporting Programs

*National Healthcare Safety Network

Data Collection for ASC-12

- Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy
- Previously finalized to begin with CY 2018 payment determination
- Does not require any additional data submission
- Uses claims for services furnished in each calendar year that have been paid by the MAC by April 30 of the following year of the ending data collection time period
- Existing requirements codified

Extraordinary Circumstances

- CMS may grant an extension or exemption for data submission in the event of extraordinary circumstances beyond the control of the ASC
 - Act of nature
 - Systemic problem with one of CMS' data collection systems that directly or indirectly affects data submission
- Instructions for requesting an extension or exemption are on the QualityNet website
- Existing requirements codified

Reconsideration Procedures

- Deadline to submit requests moved to the first business day on or after March 17 of the affected payment year
- Begins with CY 2017 payment determination
- Deadline change finalized

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
 - California Board of Registered Nursing (Provider #16578) nationally approved CEs
- 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 a separate registration from ReadyTalk.
 - 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 account you used in the Learning Management Center, a firewall is blocking the link contained in the email response.
- Please go back to the **New User** link and register your personal email account.
 - Personal emails are not blocked by firewalls.

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.

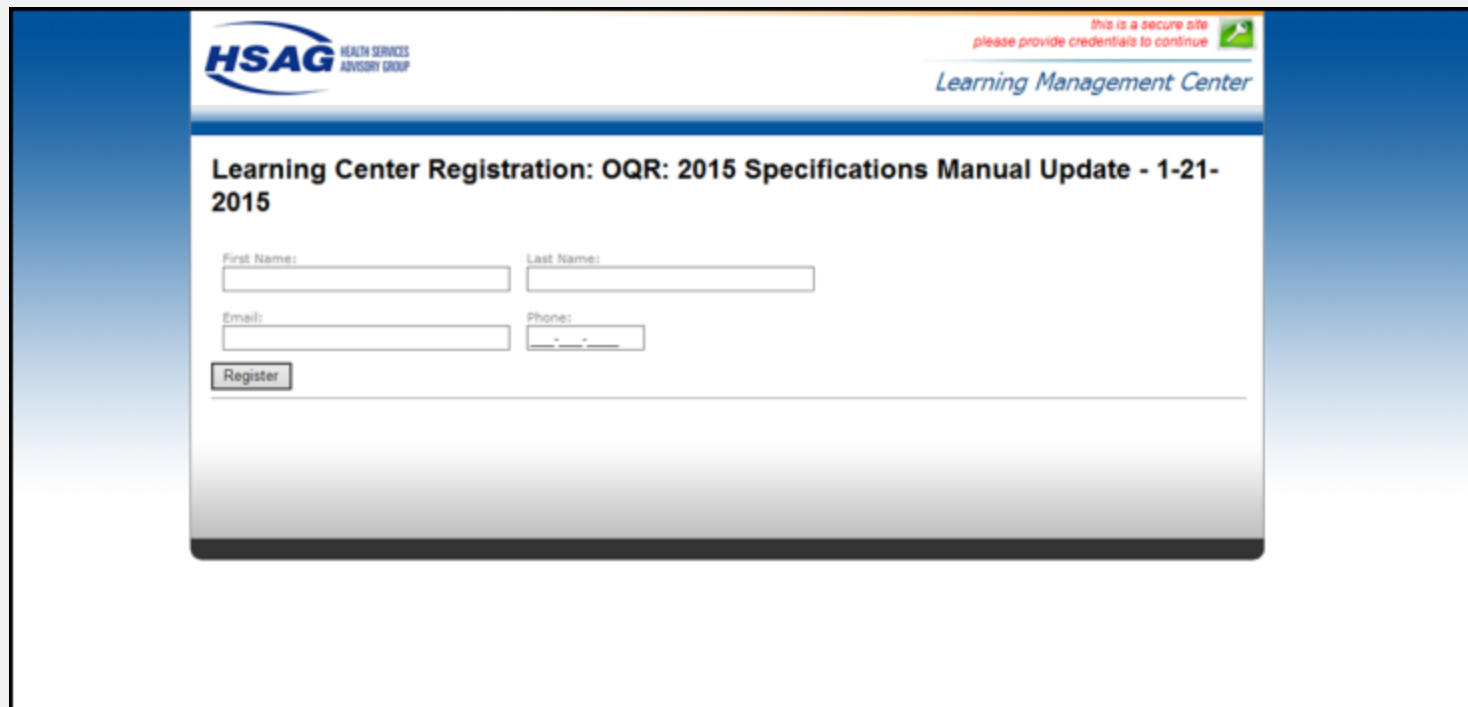
New User Link:
<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Existing User Link:
<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-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.

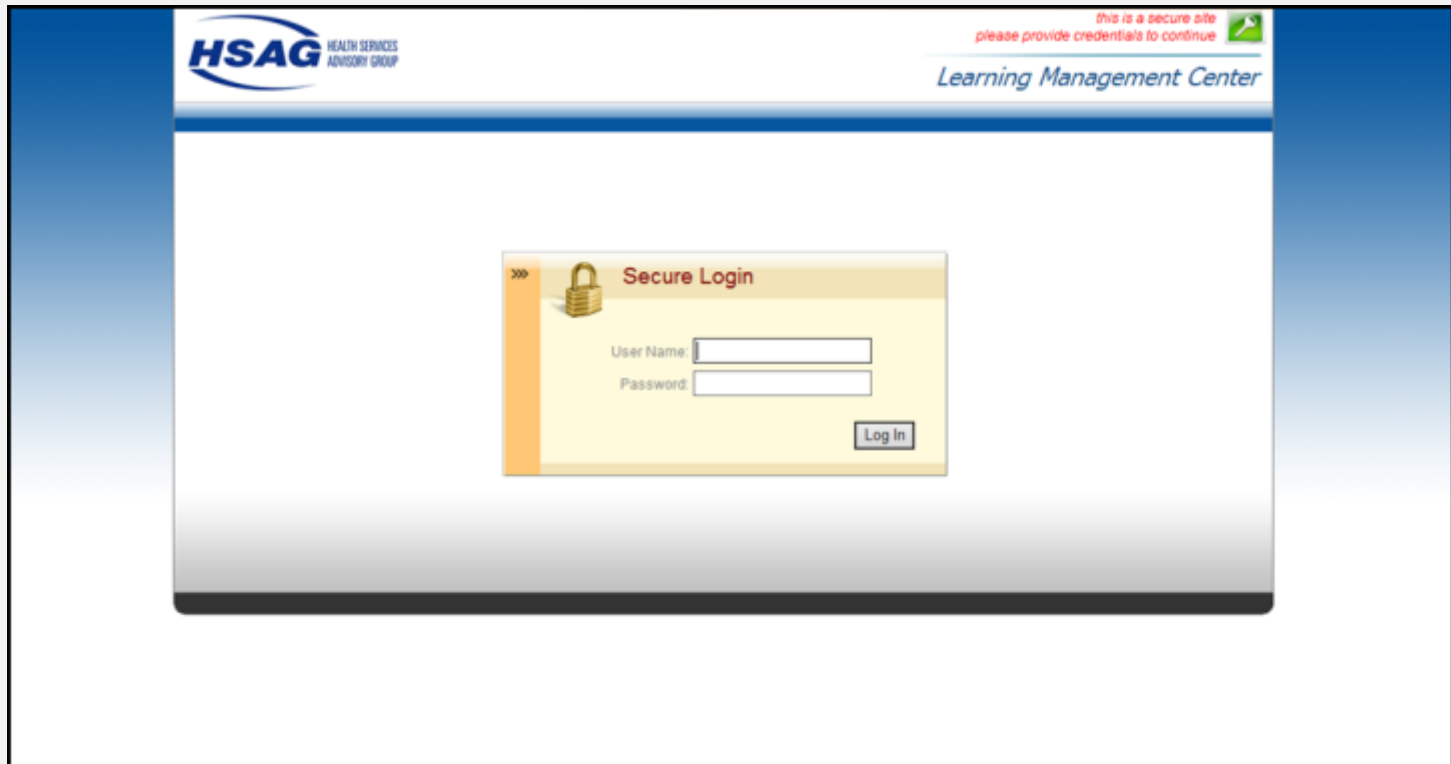
Done

CE Credit Process: New User



The screenshot displays the registration interface for a new user on the HSAG Learning Management Center. The page features the HSAG logo (Health Services Advisory Group) in the top left corner. In the top right, there is a security notice: "this is a secure site please provide credentials to continue" accompanied by a small green padlock icon. Below this, the text "Learning Management Center" is displayed. The main heading for the registration page is "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The registration form includes four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field has a small icon of a telephone handset. A "Register" button is located below the input fields. The entire registration form is enclosed in a white box with a blue border.

CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left, the HSAG logo is accompanied by the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a security notice reads "this is a secure site please provide credentials to continue" next to a green padlock icon. Below this, the text "Learning Management Center" is displayed. The central focus is a "Secure Login" box with a yellow background and a gold padlock icon. Inside this box, there are two input fields: "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.

Thank You for Participating!

Please contact the ASCQR Support Contractor if you have any questions:

- Submit questions online through the QualityNet Question & Answer Tool at www.qualitynet.org

Or

- Call the ASCQR Support Contractor at 866.800.8756.