



# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

### Tools to Help You Build a Successful Reporting Program

#### Presentation Transcript

**Moderator:**

Pam Harris, BSN, RN  
Project Coordinator, Education and Support Contractor

**Speaker(s):**

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

**April 26, 2017**

**2:00 PM**

**Pam Harris:** Good afternoon, and welcome to the Ambulatory Surgical Centers Quality Reporting Program webinar. Thank you for joining us today. My name Pam Harris, a Project Coordinator for the ASCQR Program.

If you have not yet downloaded today's handouts, you can get them from our website at [qualityreportingcenter.com](http://qualityreportingcenter.com). Just click on today's event and you should be able to download the handouts. They were also attached to the invite you received for this webinar.

Today's speaker is Karen VanBourgondien, an Education Coordinator with the ASCQR program.

Before we begin today's presentation, let me just mention our upcoming events. Please join us on June 26, 2017, where we will be presenting a Q&A type presentation covering the measures reported for this program. In July, a representative from CMS will discuss the Proposed Rule. The exact date for this presentation will be determined by the date when the Proposed Rule is posted. This presentation will be a great way to let you know the proposed changes for this program.

ASCs will be notified via ListServe when the date of the July webinar has been set so keep any eye out, you don't want to miss this informative presentation.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

Any information regarding program updates or educational opportunities will be sent via ListServe. If you are not signed up for this automatic email service, you can do so on the QualityNet home page.

The learning objectives for the this program are listed here on this slide This program is being recorded. A transcript of today's presentation including the questions and answers received in the chat box, and the audio portion of today's program will be posted at [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com) at a later date.

During the presentation, as stated earlier, if you have a question, please put that question in the chat box located on the left side of the screen. One of our subject matter experts will respond. By having live chat, we hope to accommodate your questions timely and have real-time feedback. Now, let me turn things over to our speaker; Karen VanBourgondien. Karen.

Karen  
VanBourgondien:

Thank you, Pam. Hello everyone; so glad you could join us today. Before we get into the tools and resources available to you, I thought we would begin today's presentation by briefly touching on what's required in order to meet the requirements of the ASCQR Program.

There are three elements that make up the ASCQR program. First, there is the submission of Quality Data Codes, or QDCs, which are placed on the Medicare fee-for-service claims that the facility submits to Medicare for payment. These codes are used to report measures ASC-1 through ASC-5, which define the patient's experience while in your ASC. The QDCs, also referred to as G-codes, are category II CPT Codes, and the program requires that they are reported on a minimum of 50% of the claims submitted by the facility. Second, there are measures entered via the QualityNet on-line submission tool. There are four required measures and one voluntary measure. Those measures are ASC-6 -7, -9, and -10 that must be reported once per year in order to be compliant with the program. ASC-11 is a voluntary measure which, if the facility chooses to report it, it is also reported annually. Although this measure is voluntary at this time, facilities that choose to report should be aware that the data will be publicly displayed. The collection period for all of the measures input via the QualityNet web-based tool is January 1 through December 31 of the year prior to reporting period, which currently extends from January 1 to August 15. Please note that beginning in 2018, the submission deadline is moving up to May 15. Finally, there is one measure, ASC-8: Influenza Vaccination Coverage among Healthcare Personnel that is reported via the NHSN web site. The measure reports the number of ASC staff who did

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

and who did not receive a flu vaccination. We will talk more about ASC-8 later in the presentation. Generally speaking, if you have questions about the measures, please refer to the Specifications Manual located on the *QualityNet* web site. The Measure Information Forms or MIFs are found in the Specifications Manual describe in detail each of the measures to be reported. Remember, the manuals are specific to the encounter period for which you are reporting, so be sure to select the version that covers that timeframe. There is another claims-based measure, ASC-12, that is not listed here. This measure is extracted automatically from Medicare claims that meet the measure criteria. Although it is part of the program, the facility does not have to manually or actively report this data.

Now that we've discussed the various components of the program, let's move on to explore some of the tools and resources that are available to help pave the way to successful reporting. We will begin on the homepage of the *QualityNet* website.

The ListServe, which is basically a large email distribution, is the primary method used by the Support Contractor to share news and pertinent information about the program with the ASC community. Joining the ListServe is one of the best and easiest ways for facilities to keep abreast of program-related updates and deadlines, the proposed and final rule release dates, educational opportunities and more. We will not flood your mailbox with emails, but we do want you to be "in the know," so to speak, about program developments.

Alright, so how do you sign up to receive these notices? Well, it's easy. From the QualityNet Home page, simply follow the link to Join ListServes by double clicking where it says Sign-Up for Notifications and Discussions. And you can see that here on this slide, outlined in red.

That will bring you to the *ListServe Registration* page. Enter your name and contact information at the top of the page. The password is case-sensitive, so you'll have to closely follow the key on how to set up your password. Next, choose the ListServe you want to receive by clicking in the box next to **Ambulatory Surgical Centers**. You can sign up for additional ListServes if you choose to do so. Scroll down to the very bottom of the page and then click on submit. You will receive a message stating that you have successfully registered. And voila, you have joined the ListServe! There is no limit to the number of people from the same facility that can join ListServe and it is always a good idea to have more than one person join so that you don't miss any important information that has been sent out.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

The next *QualityNet* tool that I want to make you aware of is the **Questions & Answers** tool. This tool allows you to ask a question about any topic related to the program. Whether it's about the measures, submission deadlines, or anything else, you will receive a response from a subject matter expert, either the Support Contractor or the Measure Writer. It also allows you the opportunity to search the catalogue of previous questions and answers regarding any given topic. We did do a comprehensive webinar in September on this tool. If you are interested, you can view that webinar on our website.

Now, to start, you will click on the **Ambulatory Surgical Centers** icon circled here in red.

This page will display. In order to submit a question, the user does need to have an account. If you don't already have an account which, by the way, is separate from your QualityNet Security Administrator or Basic User account, you can sign up by selecting the link found in the upper right-hand corner of the page, circled here in red. Once you've set up your user's account, select the **ASC Quality Reporting Program** as the one about which you are inquiring. You can submit a question, or you can search the database for previously asked and answered questions on a topic of interest related to the program. You can also set up your own library of question and answer sets that you want to be able to refer to time and again. It's important to note that under no circumstances, absolutely never, should a patient's personal health information, commonly referred to as PHI, be included in any question using this tool. Examples of PHI include the patient's name, date of birth, HIC number, etc. Basically, it includes anything that would identify a person who received healthcare services at your facility.

Also, please be aware we are unable to open attachments. So, if you submit a question with an attachment, we will not be able to respond, so just kind of keep that in mind as well. Also, found on the QualityNet web site is training tools video produced by the QualityNet Help Desk and walks the user through the input of measures via the web-based tool. To access the video, from the QualityNet Home page, hover your mouse over the ASC tab at the top of the page and a drop down menu will appear. You see that here on this slide. Select **Training** at the bottom of the menu; that is here in red.

That brings you to the video, and this video runs about 13 minutes. You can access the training session by following the link seen here boxed here in red. Now, let's talk about some reports that will be available to you and will assist you in keeping track of your own performance.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

Now, let's switch gears and talk about that. There are three reports accessible via the QualityNet web site, but in the interest of time, we will only be discussing two of them today: The Claims Detail Report, or CDR, and the Participation Report. Just as an FYI, the other report, which we will not be reviewing, is the vendor authorization report, which is only relevant to facilities that use vendors to report their data. The Claims Detail Report is a comprehensive report of all of the claims that a facility has submitted within a defined time period. The participation report allows the facility to see how it is performing with regard to the program requirements. We will be exploring both of these reports in detail in upcoming slides. But, before we do that, let's see how go about running these very useful reports.

Before we walk through running the reports, I want to explain an assumption that I've made for purposes of this webinar. Rather than take you, step-by-step, through the log in process, I've taken the liberty of assuming that you have access to the secure side of QualityNet and that you know how to sign on. But if you do need assistance with logging in, I would encourage you to view the video, **Entering Web-Based Measures**, that we also have available on the qualityreportingcenter.com web site. We'll be talking more about that web site later in the presentation, if you're unfamiliar with it, and I'll be sure to point out the video I just referred to at that time.

Alright, so you've signed in to the secure portal and you've landed on the home page. If you hover your mouse over the **My Reports** tab at the top of the page, a drop-down box will display. Select **Run Reports** by double clicking on it, and you can see that here in red.

When this page opens, double click on Run Reports. Again, you can see this here in red

The Select Program, Category and Report page will open. In the Report Program drop down box, select the **ASCQR program**. In the report category, select **Ambulatory Surgical Center Reports – Feedback**, then click on the blue **View Reports** box. A list of the available reports will then display.

For this example, select the **ASC — Claims Detail Report** by double-clicking.

That will take you to the Reports Parameters page. The State in which the facility is located and the name of the ASC will be pre-filled. Enter the

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

timeframe for which you want to run the report by entering the start and end dates. You can either key in the dates or use the calendar to choose the dates. Then, at the bottom of the page, click on **Run Reports**.

That will bring you to this page. In order to find the report you just ran, click on the **Search Reports** box at the bottom of the page. You can see that here in red.

A list of all of the reports that you've run in the past 30 days, if any, will display. You will see on this slide that the report we just ran is at the top of the page. When it is ready to view, the file folder that appears in the Status column next to the report name will change to a green check mark. When that happens, you can open the report by clicking on the magnifying glass in the Action column to the right of the report. That will allow you to view the report, save it, print it or whatever meets your needs. But remember, the report will only be available at this location for 30 days, so if it's something you're going to want to refer to after that, you should keep it in another file.

Now that your report is ready to view, let's talk about the information it's providing. The Claims Detail Report is a listing of all of the fee-for-service claims submitted by your facility to Medicare for payment during the time period you designated. Each line provides details about a claim, including the patient's Medicare Health Insurance Claims Number, or HIC number, the date the claims were received by Medicare, the date of service, the Quality Data Codes that appeared on the claim, the patient's last and first name, date of birth and the Claims Control number, which is a system-generated number. This is an excellent auditing tool when used in conjunction with the remittance advice that you receive with your payment. The report allows you to see what QDCs are being applied most frequently, or if there are claims that were without QDCs, either because they were absent from the claim or because they were not accepted into the warehouse. And those are the claims that you will want to research because if a claim goes into the warehouse without associated QDCs, your facility is not getting credit for reporting those QDCs. And remember, in order to meet the program requirements and receive the full annual payment update, your facility must meet or exceed the 50% QDC submission threshold set by CMS. Now let's move on to discuss the Participation Report.

Look familiar? Well, there's another very helpful report that we need to talk about, we're back on that same area we referenced before and we are going to click on the ASCQR Participation Report. And, once again, you are going to access it by double-clicking.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

On this page, the State where the facility is located and the name of the ASC will appear. Enter the payment year that you want to review, then click on Submit button at the bottom of the page. To view the report, follow the Search Reports steps that we discussed earlier.

The Participation Report is a very useful report that is rich with information about how your facility is performing relative to the program requirements. On the upper left side of the report, you will see the State in which the facility is located, the facility's NPI, its name and the city in which it resides. Below that you will see the total number of claims with QDCs, the total claims volume and the QDC reporting percentage, or Data Completeness rate. To the right, the report indicates whether or not the facility has reported its web-based measures and the ASC-8 influenza vaccination data.

On the lower portion of the report, each of the claims-based measures is listed. For ASC-1 through ASC-4, the numerator is the number of occurrences that were reported, followed by the total number of claims submitted during this particular quarter. For example, had the facility reported a patient burn during the second quarter of 2015, the numerator would appear as 1, followed by the total claims volume of 59. The Measure Value is the number of times per 1000 cases that an event was reported. Now, for ASC-5, the numerator, in short, is the number of admissions with an order for a prophylactic IV antibiotic for prevention of SSI (Surgical Site Infection). The denominator is all ASC admissions with a pre-op order for a prophylactic IV antibiotic for prevention of SSI. The Measure Value is calculated as the numerator divided by the denominator.

Next, let's talk in a little more detail about the measure ASC-8, the influenza vaccination measure, which you'll recall I told you earlier, is the sole measure reported via the NHSN, web site. We are going to spend a little time on this measure, specifically, as it tends to cause ASCs some difficulties. So, we will try to assist you in avoiding any problems.

The NHSN, which is part of the Centers for Disease Control and Prevention, or CDC, and is a totally an unconnected platform to QualityNet and it requires a separate registration, which we will talk about in a little more detail shortly. ASC-8 reports the number of the facility's employees, not the patients, who either received an influenza immunization, or who were not immunized. The measure does not mandate facilities to offer the vaccination to its employees, nor does it necessitate an employee to be vaccinated. It does not require any personal information about your staff. All that is reported are the numbers. Data for

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

this measure reflects the flu season, which runs from October 1 through March 31. Data submission can be completed at any time between the 1<sup>st</sup> of October and the 15 of May. The flu season ends on March 31, but you will have until May 15 to enter that data. For more information about the measure itself, please visit the web site shown here on this slide.

You'll remember that I said that the NHSN web site requires a separate registration from that of QualityNet. First, the facility must be enrolled with the NHSN. Then, the person, or persons, at your facility who will be entering the data will need to undergo an identity verification process, as all users of a federal web site are mandated by statute to do so and receive their Secure Access Management Services, or SAMS, grid card. The SAMS grid card belongs to the user, not the facility, and can follow that person from one ASC to another, should that situation occur. The NHSN Enrollment Checklist, seen here on this slide, provides a step-by-step guide to the registration packet for facilities starting the process from the beginning. The checklist is available on the NHSN web site by following the **New to NHSN? Enroll Facility** link.

Ok, so the facility is enrolled but the authorized user leaves for some reason, do you have to start the whole enrollment process over from scratch? No, you don't. Instead, a letter on the facility letterhead should be sent to the NHSN by an official of the ASC including the information outlined on this screen. The letter should be faxed to the secure fax number provided here. Once the NHSN has received and processed the information, the new user will receive a "Welcome to NHSN" email outlining the steps they will need to follow to be authorized, including obtaining a SAMS grid card.

This slide displays the top part of the NHSN home page and the link to the Ambulatory Surgery Centers reporting process.

There are several common reasons why facilities fail to complete submission for their data. I'm hoping that by bringing them to your attention that you will be able to circumvent some of these issues. The enrollment process for new facilities is a lengthy one. If you do not start it well in advance of the submission deadline, it is possible that you will not have completed the process in time to report the measure. We strongly encourage facilities to begin enrolling as soon as possible to allow ample time for the process to be completed well before the submission deadline.

We frequently hear from facilities that they were unable to report the measure because their authorized user left and they did not get another user authorized in time to report. Don't get caught in this situation! It is

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

easily avoidable. Earlier in this presentation we talked about the steps to be taken to add a new user, so please use them as necessary. Facilities are permitted to have multiple users and we strongly encourage you to do so. During enrollment, facilities are allowed to use their NHSN facility number if they don't know or don't have their Medicare Certification Number or CCN. If you do that though, you have to go back and edit your entry with the correct CCN or you will not receive credit for reporting your data. If you don't know your CCN but have your NPI, you can access the *CCN Look-Up Tool* on [qualityreportingcenter.com](http://qualityreportingcenter.com) and this will allow you to find your CCN for your facility. We will explore the Look-Up Tool in a little more detail later in this presentation, so just keep that in the back of your mind. Another stumbling point for facilities in reporting their data is that they don't add a new reporting plan for the new flu season. As a result, while they think they're being compliant by entering their data, it's being attributed to the wrong flu season, which means they won't receive credit for submitting their data for the current flu season. Each new flu season you will need to add a new reporting plan in order for the data to be correctly associated to the flu season for which you are entering data for.

For additional information about ASC-8 and reporting of the measure, we refer you to the excellent presentation by members of the NHSN staff in October 2016. This archived webinar is available on [qualityreportingcenter.com](http://qualityreportingcenter.com) and to find it, you're going to hover your cursor over the ASC tab and then it will open on your right and you can click on the Archived Event tab; all of the webinars are posted by date.

Let's move this, now, along to explore the [qualityreportingcenter.com](http://qualityreportingcenter.com) toolbox. Think of the web site as a chest of tools that will help to ensure your facility meets the requirements of the program and is successful in its quality reporting.

[Qualityreportingcenter.com](http://Qualityreportingcenter.com) is the Support Contractor's web site and is a rich source of information, tools, and resources for you to use to make sure your facility's quality reporting is on target. To start, hover your cursor over the ASC tab and a menu of selections will display to the right. Keep this page in mind as we continue exploring the tools and resources available to assist you in meeting program requirements. Each time we move from one section to the next, we will be returning to this page and choosing one of the tabs found in this menu option box you see here.

While we do not have time today to discuss all of the terrific tools found on this web site, I'd like to highlight a few that I hope you will find helpful. And I do encourage you to explore the web site, check out the different resources and tools that are here and available, and put to use

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

those that will work best for you in your facility. The first group of tools we are going to talk about are found under the **ASC 101** tab in the drop-down box. Clicking on that tab, it will bring you to the page displayed here. At the top of the page you will see several videos that you can choose from. Each is about 5-8 minutes long and provides a short, easy-to-understand explanation of its topic. You will see that there is a video here about entering your web-based measures. Now, just to clarify, this is a different video than the one I showed you earlier on QualityNet. This particular video is a shorter version and is structured a little bit differently.

As you scroll down the ASC 101 page that we selected from the home page of the web site, you will find under the *Program Resources* option, several great tools, especially for those of you who are new to the program. We're going to be looking at several of the tools listed here: the Guide for New Facilities, the Calendar Year 2018 Measure Reporting Dates, and The Fact Sheet for Remittance Advice. With each new tool we discuss, recall that access will be made from this page.

So, let's begin by opening the **Guide for New Facilities**, which is the first available choice in this section.

I've taken the liberty of by-passing the title page of the document to show you just the table of contents. As you can see, the program guide offers an overview of the program and provides new facilities with information to help them navigate the early stages of their participation in this program. Even if your facility is not new, but you are new to quality reporting, this guide is well worth reading to ensure that you're not missing out on any information that will help you succeed in meeting the program requirements. Now, let's move on to the Calendar Year 2018 reporting dates.

Next up, let's look at the data submission dates for the 2018 payment determination year. This document provides, measure-by-measure, the timeframe of data to be reported and, for measures submitted via web-based tool, it provides the data submission period. We encourage you to keep this document at your fingertips so that you are always attuned to what's due to be reported and when. Next, let's talk about the Fact Sheet for Remittance Advice. Remember this tool is accessible under that **Resources** tab on the ASC 101 page.

But while we are looking at these dates, remember that when you report your measures entered through QualityNet next year (2018), the submission deadline will not be the same. ALL of the measures will be due on that May 15 deadline.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

So, now, let's move to the Remittance button. This tool, the Fact Sheet for Remittance Advice, is a helpful auditing tool that provides lots of great tips to ensure that you are correctly applying and receiving credit for submitting QDCs on your claims. Although you are only seeing a portion of this tool here on this slide, it provides a lot of great tips for accurate reporting that you will want to share with anyone involved with billing or posting payments from Medicare. This will help you keep an eye on your QDC submissions.

Alright, so we've looked at several of the ASC 101 tools, so let's move on from the home page to **Lookup Tools** indicated here in the red box.

There are three lookup tools available, depending on what you are looking for. The first tool allows users to check the status of submission of their measures reported via the QualityNet and NHSN. The facility can either enter their NPI number or their CCN number to check their reporting for these measures. Please use this tool after you have submitted your data. You can use this tool to ensure your data has been successfully received. Please do note that there is a date "last updated" note just above where you enter your NPI or your CCN. This will tell you how current the data is. So let's say, for example, if you entered your data on February 16 and you look at this tool and it says last updated February 16, it may just be a data cross. The point being, your data might not be here at that point so please just check back when the update is beyond your last check. By all means, if it is still not showing, call us!

The second look-up tool enables users to check to see if their facility has a Detail Report available for the ASC-12 Measure. That's the Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy. That measure is claims-based, which means that CMS garners the data directly from the claims submitted by the facility for payment. There is no further action required by the ASC to report that data. In other words, it is not manually entered by you. Now, this Detailed Report provides a listing of all of the patients who are included in this measure for your facility.

Last, is the CCN Lookup Tool; and this tool allows users to find the ASC's CCN if you do not know what it is. So, you would just enter the facility's NPI, then click on **Enter** and that will in turn it into provide you your facility's CCN.

Just a reminder, always be sure to check the date that the tool you are using what the last update was.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

Now that we've explored the Lookup Tool, let's see what is available under the **Tools and Resources** tab. While we don't have time today to delve into all of the available tools, I want to mention two that are found under the **Program Resources** section that I think may be particularly helpful. While we don't have a slide showing the Reference Checklist, it is a tool that I think you would want to review. It's broken down by categories including mandatory steps for participation, administrative requirements for new facilities, National Provider Identification or NPIS, minimum thresholds, case volumes, withdrawal from the program, all of that. It's basically a snapshot of the Step-by-Step Guide for New Facilities. The Reference Checklist contains an abundance of information and I would encourage you to peruse it as it is updated for each new payment determination year. Also in the Program Resources section, let's take a look at the **Frequently Asked Questions** tool.

This document contains general questions and answers about the ASC Quality Reporting Program. It is intended to provide facilities with basic program information. It does not address measure-specific questions, but it does provide broad program-related information and is a really good starting place if you have a question about the program.

As you scroll down the **Tools and Resources** page, under the Tools and Resources tab, you will find the **Measure Resources** menu. Again, in the interest of time, we will not be reviewing all of the tools found here. But I do encourage you to look at them for yourself to see what, if anything, will be useful for you. Today we will be talking about the QDC Fact Sheet.

As you continue down the **Tools and Resources** page, you will find the **Measure Resources** heading. So, let's take a look at some of the tools found here. We'll start with the **QDC Fact Sheet** and the **CMS Form-1500**. This tool provides information and helpful hints for successful submission of Quality Data Codes on your claims. It explains what the QDCs are and how they are to be applied to the CMS Form-1500, whether you submit your claims electronically or hard copy. It also provides sample claims that you can follow to make sure that you are correctly applying the QDCs so that you receive credit for reporting. This document also provides a brief explanation of what to look for on the remittance advice you receive with your payments to be sure that the QDCs you submitted have been accepted into the CMS warehouse.

Continue to scroll down the **Tools and Resources** page and you will find several more sections. So, now let's talk about the two seen here: **Measure Guidelines and Tools** and **Endoscopy Tools**. For the purposes of today's discussion, we will be only be reviewing three of the tools

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

found in these sections. First, we'll talk about the Eligible Denominator Populations for Cataract and Endoscopy Measures, and then we will talk about the Fact Sheets for ASC-9 and ASC-10.

So, let's talk about the Eligible Denominator Populations for ASC-9, -10 and -11. This tool documents the case volume thresholds required to be reported for those measures. For ASC-9 and ASC-10, the colonoscopy measures, as well as ASC-11, the cataract measure, right now, as you know, remains a voluntary measure at this time. It also provides the criteria used to determine the denominator for ASC-9 and -10.

Next up is the Fact Sheet for ASC-9. It provides a summary of the measure specifications and provides some helpful hints about data collection and submission for this measure.

Finally, like the slides before it, this slide shows another Fact Sheet, but this time it's for ASC-10. Again, it includes the measure specifications as well as helpful hints to ensure that your data for this measure is correctly gathered and submitted.

Now, we are once again back at the beginning. This time, let's choose to talk about Qualit-e-Quips found in the menu under the **ASC** tab. The Support Contractor introduced this bi-weekly newsletter a couple of years back as a way to provide ASCs with useful information in a quick, easy-to-read and easy-to-digest way. All of these newsletters from the beginning are archived here in date order. Feel free to read up on any topic we have covered to date at your convenience.

We have talked about the program requirements and some of the tools and resources that are available to assist you in successful reporting. Now let's briefly discuss some of the benefits to the facility for reporting quality data.

So now, let's talk about the benefits to the facility of reporting quality data. The process of collecting data to report for each of the measures, analyzing the data provided on the various reports available to you, and looking at the comparative data reported on the Hospital Compare web site allows the ASC to identify quality improvement opportunities. The data can be used to pinpoint areas within your organization that can be tightened or improved, either clinically or operationally. Also, the data that is being gathered, for purposes of this program, can prove helpful when you are preparing studies for State Licensure and Certifications. And, finally, the data that is publicly reported on the Hospital Compare web site

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

is a valuable tool for promoting the quality service your facility provide to prospective patients and the community at large.

Now that we're entering the conclusion of this presentation, let's review what we've covered today.

CMS wants ASCs to be successful with their quality data reporting and hopes that the tools and resources presented here will help to make the process of reporting as smooth and trouble-free as possible. In today's presentation, we discussed the requirements of the ASC program. We looked at numerous tools and explored the resources that are available on the QualityNet web site, the qualityreportingcenter.com web site and the NHSN web site. We hope you will put these tools and resources to good use as you continue to build your quality reporting expertise!

Well, that concludes my portion of the presentation. Thanks again for joining us. I hope you found that we covered today helpful. And with that, I'll turn it back to Pam.

Pam Harris:

Thank you Karen for that great presentation. That was a lot of information! We hope that this will be helpful to you and be successful in reporting for this program.

We thank you for joining us today. And, now I'm going to turn things back over to our host to go over the CE process. Thank you everyone, and have a great day!