

# 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.**
- **Limited dial-in lines are available. Please send a chat message if needed.**
- **This event is being recorded.**



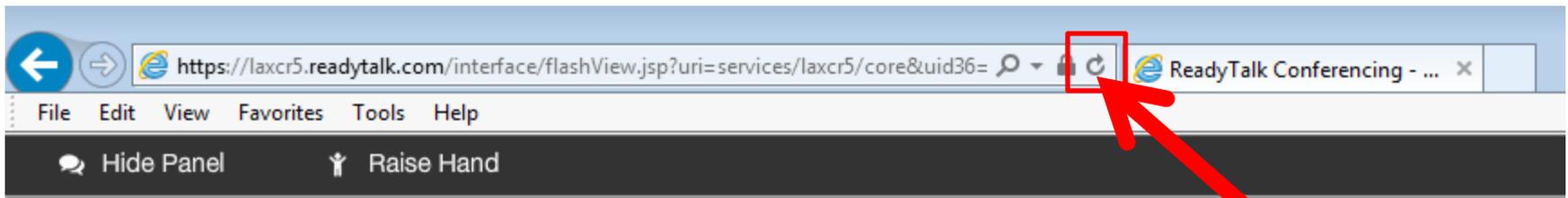
# Troubleshooting Audio

Audio from computer speakers breaking up?  
Audio suddenly stop?

- Click Refresh icon
- or
- Click F5



F5 Key  
Top row of Keyboard

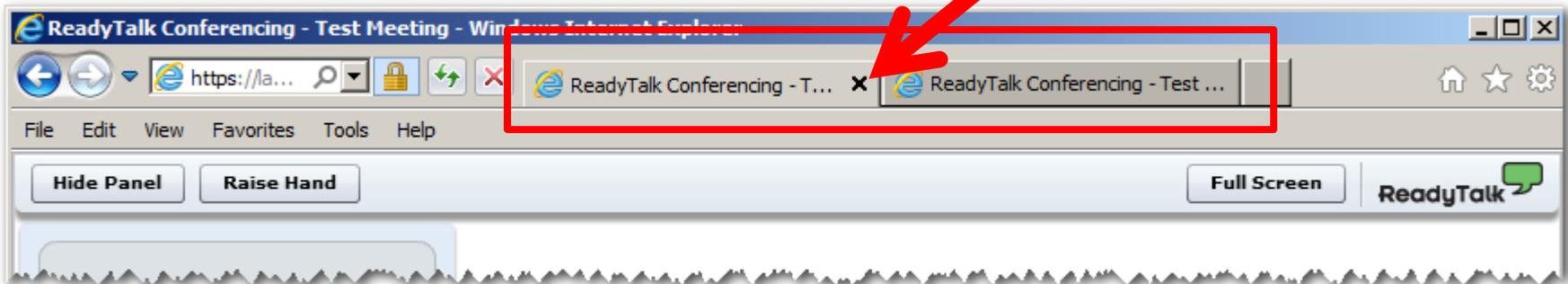


Location of Buttons

Refresh

# 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 interface for a CMS event. The main area displays the CMS logo (Centers for Medicare &amp; Medicaid Services) and a large "Welcome to Today's Event" message. Below this, it says "Thank you for joining us today! Our event will start shortly." On the left side, there is a vertical chat window titled "Chat with Presenter" with a "Type questions here" input field and a "Send" button. The chat window is highlighted by a yellow arrow from the text on the left. The top of the interface has buttons for "Hide Chat", "Raise Hand", "Full Screen", and "ReadyToGo".



# **More Pieces of the Puzzle: Troubleshooting Quality Data Codes (QDCs)**

**April 27, 2016**

# Announcements (1 of 2)

- January 1, 2016–August 15, 2016, is the data submission period for the web-based measures entered through QualityNet.
- ASC-8, entered through the Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN), has a submission deadline of May 15, 2016.

# Announcements (2 of 2)

- Access your QualityNet and NHSN accounts routinely to ensure your passwords stay active.
- For QualityNet password problems, contact QualityNet at 866.288.8912.
- For NHSN account issues, contact the NHSN Help Desk at [nhsn@cdc.gov](mailto:nhsn@cdc.gov).

# Save the Date

Upcoming Ambulatory Surgical Center Quality Reporting (ASCQR) educational webinars:

- May 25, 2016: Data and Quality Improvement for the ASCQR Program
- Notifications of additional educational webinars will be sent via the ListServe.

# Learning Objectives

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

- List at least three ways to check your facility's performance.
- Identify the appropriate information necessary for the CMS-1500 Form.
- Recognize resources available to assist you in successful reporting for this program.



# More Pieces of the Puzzle: Troubleshooting Quality Data Codes



***Karen  
VanBourgondien,  
RN***

# Pieces of the Puzzle to Review

- Program requirements
- Remittance Advice (RA)
- Explanation of Benefits (EOB)
- Problems with claims
- How you can check your progress
- Resources available to you

# Program Review

- Program requirements apply to facilities with 240 or more Medicare claims per year.
  - If you are close to this 240 threshold, you should apply QDCs.
  - Quality Data Codes (QDCs) must be applied to a minimum of 50 percent of claims to meet program requirements.
  - You will have a minimum of two QDCs and a maximum of five QDCs per claim.
- Web-based measures must also be reported.

# G-Code Reporting Requirement Timeline

**2016**

First year of  
≥ 240  
Medicare  
claims

**2017**

Report G-  
Codes on 50%  
of Medicare  
claims *and*  
collect data for  
web-based  
measures

**2018**

Report web-  
based  
measures  
Continue  
reporting G-  
Codes

**2019**

Achieve full  
Payment  
Update

A piece of the puzzle

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# CHECKING MY RA

# Remittance Advice

- Tips for accurate reporting using the RA
  - A correct RA reflects a billed charge and a minimum of two or a maximum of five QDCs for the same claim number.
  - QDCs will split into a separate claim when one of the QDCs is entered on the seventh or fourteenth line on the claim form.
  - A billed charge must be affiliated with the QDCs on each claim.

# Billing Claim Is Perfect....Sample RA

Service Provider	123456	Check Number	56789								
Tax ID	999999	Payment Date	1/12/2014								
PERF											
Recipient	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PO
NAME	DOE, JANE		HIC 1234567890	ACCT DOE 0006					ICN 1234567890123	ASG Y	
	023 021313	24		66984		5100	1030.4	0	206.08	4069.6	824.32
REM	N620		1	G8907		0	0	0			
REM	N620		1	G8918		0	0	0			
PT RESP	206.08										
CLAIM INFO	Forwarded to BCBS										

Correct! Complete with G-codes and Correct POS

Code N620

Place of Service ASC

G-Codes

# What....No QDCs?

Incorrect! Completed without G-codes

NAME	DOE, JANE		HIC 1234567890	ACCT DOEJ0006				ICN 1234567890123	ASG Y	
	023 021313	24	1	66984	5100	1030.4	0	206.08	4069.6	824.32
PT RESP	206.08									
CLAIM INFO	Forwarded to BCBS									

No Code  
N620

No  
G-Codes

# No QDCs....What Do I Do?

- Check to ensure the billable charge and the QDC are on the same claim form for the same date of service.
- Confirm that your software is transmitting the QDCs.
- Check the clearinghouse to ensure it is receiving the QDCs and it is transmitting to the Medicare Administrative Contractor (MAC).
- Check with the MAC to ensure codes came through on the same claim.

# What....Only QDCs?

## G-Codes submitted without a billable procedure code

NAME	DOE, JANE	HIC 1234567890	ACCT DOE J 0006				ICN 1234567890123	ASG Y
REM	N620	1	G8907	0	0	0		
REM	N620	1	G8918	0	0	0		

I forgot my CPT!



# Only QDCs....What Do I Do?

If the RA shows only QDCs, this could indicate the claims were split at the carrier.

- Follow the steps we talked about previously first.
- If the MAC notifies you that the claim was split at the carrier you:
  - Confirm the facility's National Provider Identifier (NPI) was entered correctly.
  - Confirm the second QDC is not on the seventh or fourteenth line item.

When things are complicated

---

# **PRACTICE SCENARIOS**

# Scenario One

A 69 year-old female has an upper stomach-intestine scope for biopsy. She has an antibiotic ordered for recurrent urinary tract infection.

- Do we have to report antibiotic usage since it is not for incisional infection?

# Scenario One: Answer

- Yes, use code G 8918. Antibiotics being given for any reason except prophylactic surgical site infection prevention are excluded from the denominator or excluded from this measure.
  - ASC-5 Denominator: All ASC admissions with a preoperative order for a prophylactic intravenous (IV) antibiotic for prevention of surgical site infection.

# Scenario One: Claim Form

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.		22. RESUBMISSION CODE		ORIGINAL REF. NO.															
A. <b>K92.2</b>		B. _____		C. _____		D. _____		E. _____		F. _____		G. _____		H. _____		I. _____		J. _____		K. _____		L. _____							
24. A. DATE(S) OF SERVICE										B. PLACE OF SERVICE		C. EMG		D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS POINTER		F. \$ CHARGES		G. DAYS OR UNITS		H. EPSDT Family Plan		I. ID. QUAL.		J. RENDERING PROVIDER ID. #	
From		To																											
MM	DD	YY	MM	DD	YY							CPT/HCPCS	MODIFIER																
01	31	16	01	31	16	24		43239		1		448.43								NPI		ASC NPI							
01	31	16	01	31	16	24		G8907		1		0								NPI		ASC NPI							
01	31	16	01	31	16	24		G8918		1		0								NPI		ASC NPI							
25. FEDERAL TAX I.D. NUMBER										SSN EIN		26. PATIENT'S ACCOUNT NO.				27. ACCEPT ASSIGNMENT? (For gov't, claims, see back)		28. TOTAL CHARGE		29. AMOUNT PAID		30. Rsvd for NUCC Use							
										<input type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> YES <input type="checkbox"/> NO		\$		\$									
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.)										32. SERVICE FACILITY LOCATION INFORMATION										33. BILLING PROVIDER INFO & PH # ( )									
SIGNED										DATE										a. NPI		b. NPI		a. NPI		b. NPI			

PHYSICIAN OR SUPPLIER INFORMATION

# Scenario Two

We had a patient who had two procedures in our facility. The patient also experienced a fall.

- Are we placing the QDCs for each procedure?

# Scenario Two: Answer

- You will bill both procedures and the applicable QDCs for that encounter.
  - Should a claim require more than one CMS Form-1500, each claim must contain a billable procedure code and appropriate QDCs to receive appropriate credit.

# Scenario Two: Claim #1

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.		22. RESUBMISSION CODE		ORIGINAL REF. NO.	
A. <b>K92.2</b>		B. _____		C. _____		D. _____		E. _____		F. _____		G. _____		H. _____	
I. _____		J. _____		K. _____		L. _____		23. PRIOR AUTHORIZATION NUMBER							
24. A. DATE(S) OF SERVICE			B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)			E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSDT Family Plan	I. ID. QUAL.	J. RENDERING PROVIDER ID. #		
MM	DD	YY	MM	DD	YY	CPT/HCPCS		MODIFIER							
01	31	16	01	31	16	43239			1	448.43		NPI	ASC NPI		
01	31	16	01	31	16	G8909			1	0		NPI	ASC NPI		
01	31	16	01	31	16	G8910			1	0		NPI	ASC NPI		
01	31	16	01	31	16	G8913			1	0		NPI	ASC NPI		
01	31	16	01	31	16	G8915			1	0		NPI	ASC NPI		
01	31	16	01	31	16	G8918			1	0		NPI	ASC NPI		
25. FEDERAL TAX I.D. NUMBER				SSN EIN		26. PATIENT'S ACCOUNT NO.			27. ACCEPT ASSIGNMENT? (For gov. claims, see back)		28. TOTAL CHARGE		29. AMOUNT PAID		30. Rsvd for NUCC Use
				<input type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> YES <input type="checkbox"/> NO		\$		\$		
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.)						32. SERVICE FACILITY LOCATION INFORMATION				33. BILLING PROVIDER INFO & PH # ( )					
SIGNED		DATE		a. NPI		b.		a. NPI		b.					

PHYSICIAN OR SUPPLIER INFORMATION

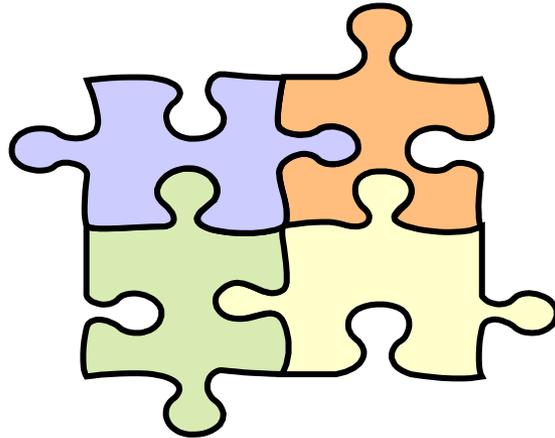
# Scenario Two: Claim #2

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.		22. RESUBMISSION CODE		ORIGINAL REF. NO.											
A. <b>K92.2</b>										B.		23. PRIOR AUTHORIZATION NUMBER		J.											
E.										F.		23. PRIOR AUTHORIZATION NUMBER		J.											
I.										J.		23. PRIOR AUTHORIZATION NUMBER		J.											
24. A. DATE(S) OF SERVICE										B. PLACE OF SERVICE		C. PROCEDURE, SERVICES, OR SUPPLIES		E. DIAGNOSIS POINTER		F. \$ CHARGES		G. DAYS OR UNITS		H. EPSDT Family Plan		I. ID. QUAL.		J. RENDERING PROVIDER ID. #	
From To										EMG		(Explain usual Circumstances) MODIFIER		POINTER		\$ CHARGES		OR UNITS		Family Plan		ID. QUAL.		RENDERING PROVIDER ID. #	
MM DD YY MM DD YY																									
01 31 16 01 31 16												43253		1		306.04						ASC NPI			
01 31 16 01 31 16												G8909		1		0						ASC NPI			
01 31 16 01 31 16												G8910		1		0						ASC NPI			
01 31 16 01 31 16												G8913		1		0						ASC NPI			
01 31 16 01 31 16												G8915		1		0						ASC NPI			
01 31 16 01 31 16												G8918		1		0						ASC NPI			
25. FEDERAL TAX I.D. NUMBER										SSN EIN		26. PATIENT'S A...		27. ACCEPT ASSIGNMENT?		28. TOTAL CHARGE		29. AMOUNT PAID		30. Rsvd for NUCC Use					
														YES NO		\$		\$							
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.)										26. PATIENT'S A...		27. ACCEPT ASSIGNMENT?		28. TOTAL CHARGE		29. AMOUNT PAID		30. Rsvd for NUCC Use							
SIGNED										DATE		a. NPI		b.		a. NPI		b.							

Different CPT Code

Same G-Codes

PHYSICIAN OR SUPPLIER INFORMATION



Checking on your facility's progress

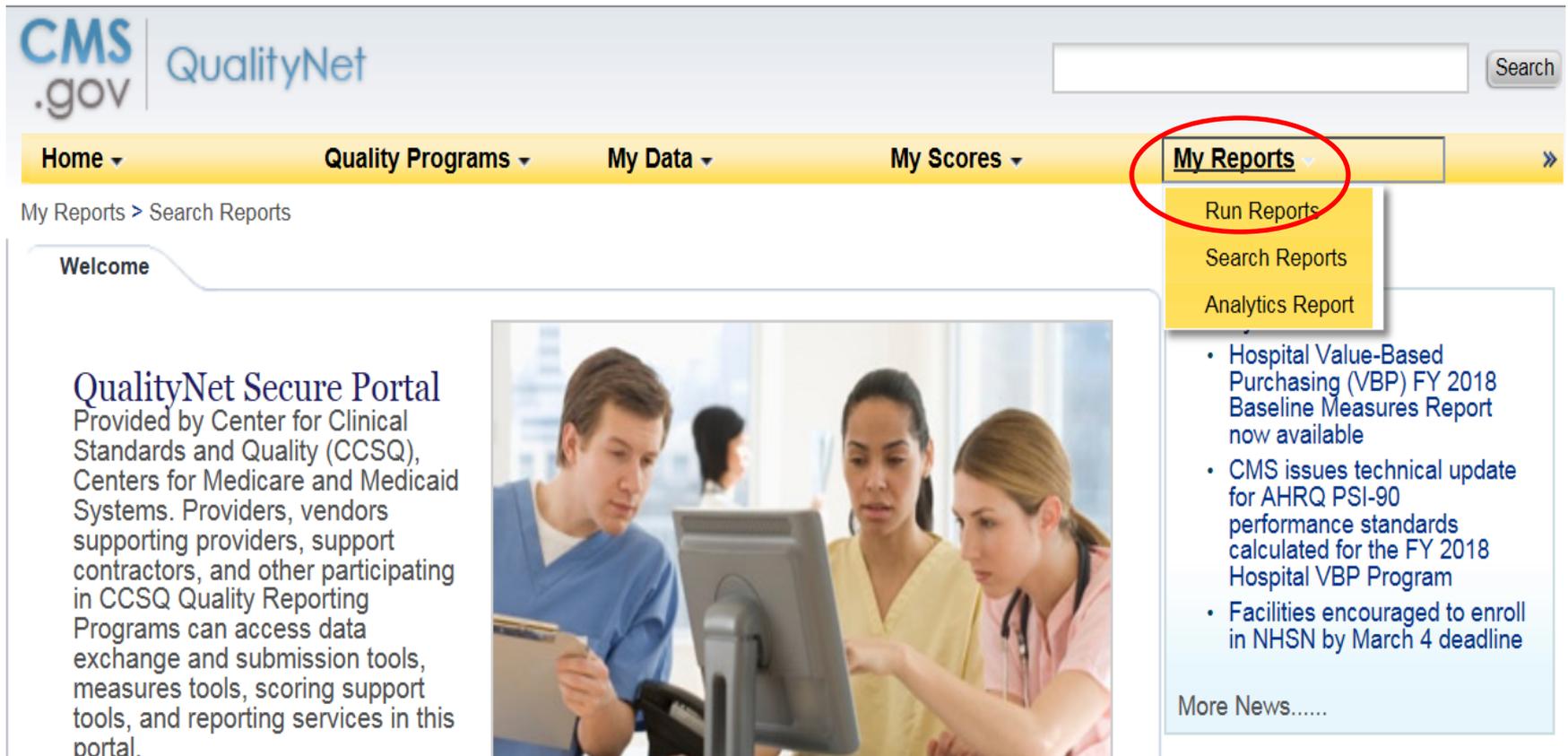
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# PUTTING YOUR PUZZLE TOGETHER

# How Can I Check My Performance?

- Evaluate your EOB/RA
- Reports you can run on QualityNet:
  - Claims Detail Report
  - Provider Participation Report
- Hospital Compare
  - Preview Report
- Access the support contractor website:  
[www.qualityreportingcenter.com](http://www.qualityreportingcenter.com)

# Reports on QualityNet (1 of 3)



The screenshot shows the CMS QualityNet website interface. At the top left is the CMS.gov logo and the QualityNet text. A search bar is located at the top right. Below the logo is a yellow navigation bar with the following items: Home, Quality Programs, My Data, My Scores, and My Reports. The 'My Reports' item is circled in red. A dropdown menu is open under 'My Reports', listing 'Run Reports', 'Search Reports', and 'Analytics Report'. Below the navigation bar, the breadcrumb 'My Reports > Search Reports' is visible. The main content area has a 'Welcome' section on the left with the heading 'QualityNet Secure Portal' and a paragraph of text. In the center is a photograph of three healthcare professionals (two women and one man) looking at a computer monitor. On the right side of the main content area is a news section with a list of three items: 'Hospital Value-Based Purchasing (VBP) FY 2018 Baseline Measures Report now available', 'CMS issues technical update for AHRQ PSI-90 performance standards calculated for the FY 2018 Hospital VBP Program', and 'Facilities encouraged to enroll in NHSN by March 4 deadline'. Below the list is a link for 'More News.....'.

**QualityNet Secure Portal**  
Provided by Center for Clinical Standards and Quality (CCSQ), Centers for Medicare and Medicaid Systems. Providers, vendors supporting providers, support contractors, and other participating in CCSQ Quality Reporting Programs can access data exchange and submission tools, measures tools, scoring support tools, and reporting services in this portal.

- Hospital Value-Based Purchasing (VBP) FY 2018 Baseline Measures Report now available
- CMS issues technical update for AHRQ PSI-90 performance standards calculated for the FY 2018 Hospital VBP Program
- Facilities encouraged to enroll in NHSN by March 4 deadline

More News.....

# Reports on QualityNet (2 of 3)

The screenshot displays the CMS.gov QualityNet user interface. At the top left is the CMS.gov logo and the QualityNet title. A search bar is located at the top right. Below this is a yellow navigation bar with menu items: Home, Quality Programs, My Data, My Scores, and My Reports. A breadcrumb trail below the navigation bar reads 'My Reports > Run Reports'. The main content area features a tabbed interface with four tabs: Start, Run Report(s), Search Report(s), and Favorites. The 'Run Report(s)' tab is currently selected. Under the 'Start Reports' heading, there is a light blue box containing the text: 'This reporting portlet allows you to run and access reports on quality program data to which you are granted access.' To the right of this box is a yellow box titled 'I'd Like To...' which contains three blue links: 'Run Report(s)', 'Search Report(s)', and 'View Favorite Reports'. The 'Run Report(s)' link is circled in red.

# Reports on QualityNet (3 of 3)

**CMS** | QualityNet

Home ▾ Quality Programs ▾ My Data ▾ My Scores ▾ My Reports ▾ »

My Reports > Run Reports

Select Program, Category and Report | Report Parameters | Confirmation

### Select Program, Category and Report

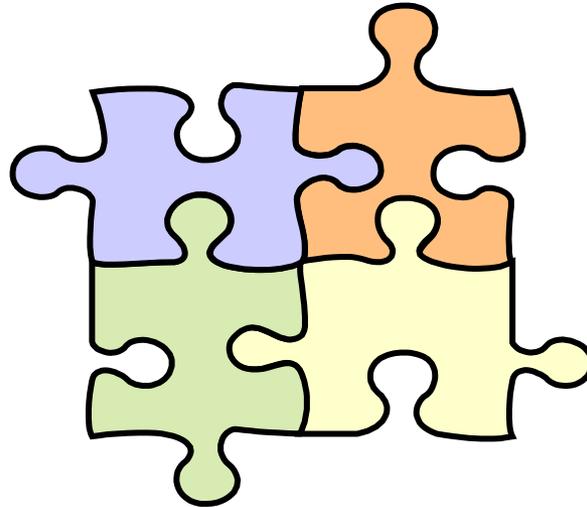
The available reports are grouped by program and category combination. If you have access to a single program, your program is pre-selected, and if the category related to the selected program has a single value, then it too will be pre-selected. Choose a program, then category, and then click on VIEW REPORTS to view your report choices. Select the report you wish to run from the table below by clicking on its name.

**Report Program**  
ASCQR ▾

**Report Category**  
Ambulatory Surgical Center Reports - Feedback ▾

**VIEW REPORTS**

▶ Search Report



Additional resources to assist you with your success

# MORE PIECES OF THE PUZZLE

# Resources Available

- There are multiple tools available on the support contractor website:  
[www.qualityreportingcenter.com](http://www.qualityreportingcenter.com)
  - QDC Submission Guidelines
  - QDC Fact Sheet
  - RA Fact Sheet
- Many other resources are available to ensure your success, including short tutorial videos.

# Accessing Tools (1 of 2)

The screenshot shows the Reporting Center website. On the left is the logo for the Reporting Center, featuring a stylized 'R' and 'Q' with the text 'CENTER' vertically. To the right of the logo is a vertical navigation menu with the following items: HOME, EVENTS CALENDAR, INPATIENT >, OUTPATIENT >, ASC >, EDUCATION, and QIN-QIO >. To the right of this menu is a secondary navigation menu with the following items: PROGRAM INFORMATION, UPCOMING EVENTS, ARCHIVED EVENTS, STATUS LISTING LOOKUP TOOLS, DATA SUBMISSION, and VIDEOS, RESOURCES, AND TOOLS. The 'VIDEOS, RESOURCES, AND TOOLS' item is circled in red. To the right of the secondary navigation menu is a search bar with the text 'Log In to Access QIO Section' above it, 'Change Text Size: A A' above the search input, and a 'Search' button. Below the search bar is an 'Upcoming Events' section with the following items: March 24, 2016, [Development and Selection of Quality Metrics for the PCHQR - 1 C.E.](#); March 28, 2016, [Annual Requirements: DACA, HCP, Structural Measures, and QualityNet SA](#); and April 20, 2016, [OQR: Hospital OQR Imaging Efficiency Measures - 1 C.E.](#). Below the 'Upcoming Events' section is a link to [See the full calendar](#). Below the navigation menu is a main content area with the following text: 'Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist hospitals, inpatient psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting. Through these sites, you can access:' followed by a bulleted list: 'Reference and training materials', 'Educational presentations', 'Timelines and calendars', 'Data collection tools', 'Contact information', 'Helpful links to resources', and 'Question and answer tools'. Below the list is a paragraph: 'The national Support Contractor for the Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR), Outpatient Quality Reporting (OQR) Outreach and Education Support Programs, is dedicated to improving quality care delivery and health outcomes by collaborating with healthcare providers.' Below the paragraph is a bulleted list with one item: [Hospital Inpatient Value, Incentives, and Quality Reporting Outreach and Education](#). At the bottom left of the page is the URL [reportingcenter.com/asc/](http://reportingcenter.com/asc/) and the text 'prt Program'.

HOME

EVENTS CALENDAR

INPATIENT >

OUTPATIENT >

ASC >

EDUCATION

QIN-QIO >

PROGRAM INFORMATION

UPCOMING EVENTS

ARCHIVED EVENTS

STATUS LISTING LOOKUP TOOLS

DATA SUBMISSION

VIDEOS, RESOURCES, AND TOOLS

Log In to Access QIO Section

Change Text Size: A A

Search...

Search

Upcoming Events

March 24, 2016  
[Development and Selection of Quality Metrics for the PCHQR - 1 C.E.](#)

March 28, 2016  
[Annual Requirements: DACA, HCP, Structural Measures, and QualityNet SA](#)

April 20, 2016  
[OQR: Hospital OQR Imaging Efficiency Measures - 1 C.E.](#)

[See the full calendar](#)

Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist hospitals, inpatient psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting. Through these sites, you can access:

- Reference and training materials
- Educational presentations
- Timelines and calendars
- Data collection tools
- Contact information
- Helpful links to resources
- Question and answer tools

The national Support Contractor for the Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR), Outpatient Quality Reporting (OQR) Outreach and Education Support Programs, is dedicated to improving quality care delivery and health outcomes by collaborating with healthcare providers.

- [Hospital Inpatient Value, Incentives, and Quality Reporting Outreach and Education](#)

[reportingcenter.com/asc/](http://reportingcenter.com/asc/) prt Program

# Accessing Tools (2 of 2)

## Measure Resources

Explanatory information and guidance for use in answering program measures

- [ASC Web-Based Measures Guidelines](#) — Tips for answering ASC-6, ASC-7, ASC-8, ASC-9, ASC-10, and ASC-11
- [Quality Data Code Submission Guidelines](#) — Helpful facts and a measure chart for QDCs
- [Quality Data Codes Fact Sheet with CMS 1500 Form](#) — Contains sample claim forms
- [World Health Organization Surgical Safety Checklist](#) — Example of form applicable for utilization with ASC-6
- [Ambulatory Surgical Center Measure Reporting Start Dates](#) — Data collection and submission deadlines
- [Antibiotic Quick Reference Card](#) — Pocket card or poster for antibiotic usage
- [Fact Sheet for Remittance Advice: Tips for Accurate Reporting](#) — Guidance for understanding remittance advice, includes examples

# Summary

- Ensure your QDCs are being applied to your Remittance Advice statements and you are receiving credit for your reporting.
- Apply QDCs on a minimum of 50 percent of Medicare claims.
- Routinely run reports to check your facility's performance.
- Utilize the resources available to you.

# More Resources

## Remittance Advice:

- <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Remit-Advice-Overview-Fact-Sheet-ICN908325.pdf>

## CMS Form-1500

- <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c26.pdf>

# Questions

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# 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
- Board of Registered Nursing (Provider #16578)
  - 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 separate from registering for the webinar. If you have not registered at the Learning Management Center, you will **not** receive your certificate.
  - 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 you used to register in the Learning Management Center, a firewall is blocking the survey link.
- 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 shows a web browser window displaying the registration page for a CE credit course. The page features the HSAG logo (Health Services Advisory Group) in the top left corner. In the top right corner, there is a security notice: "this is a secure site please provide credentials to continue" next to a small green padlock icon. Below the logo and security notice, the text "Learning Management Center" is displayed. The main heading of the 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. Below the input fields is a "Register" button. The entire form is set against a white background with a blue border.

**HSAG** HEALTH SERVICES ADVISORY GROUP

this is a secure site  
please provide credentials to continue

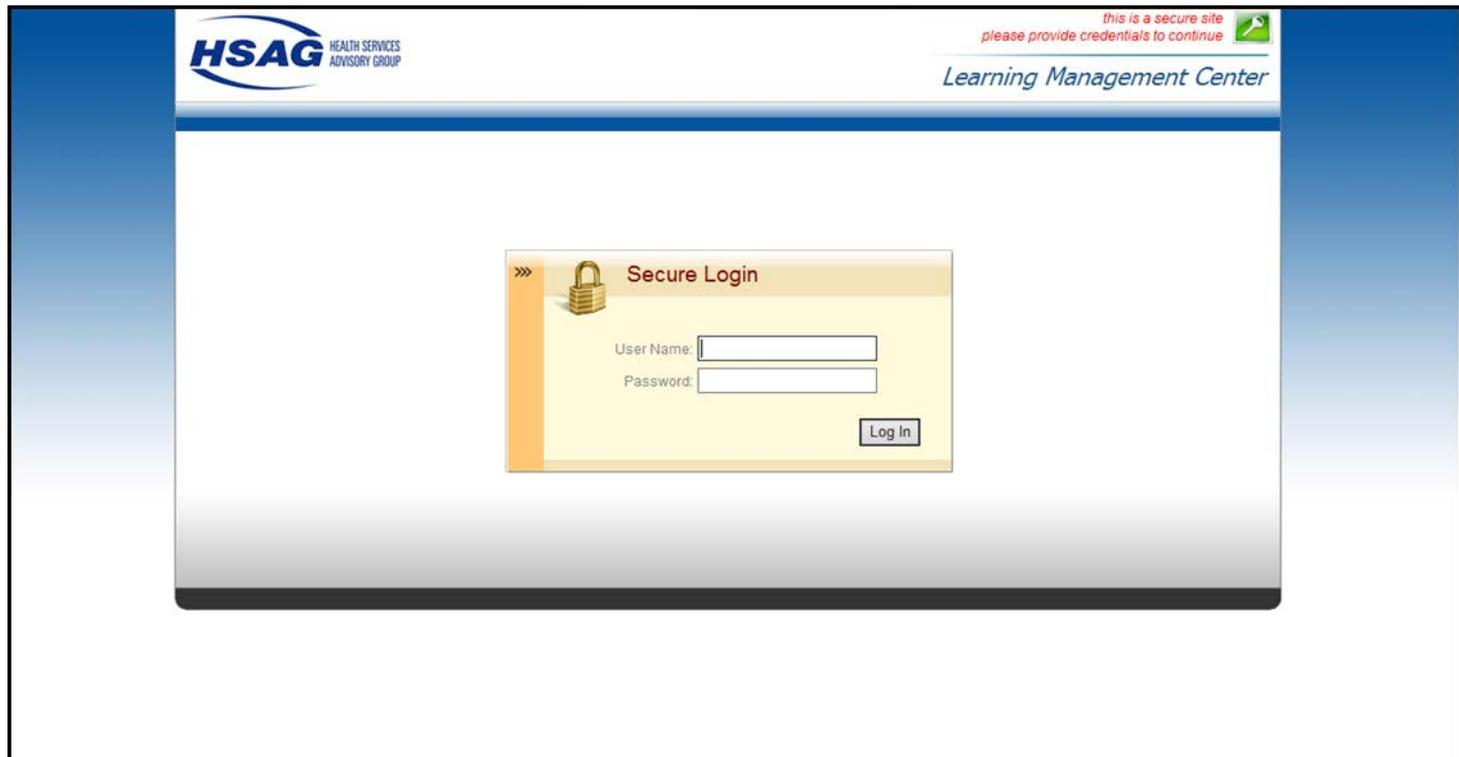
Learning Management Center

**Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015**

First Name:  Last Name:

Email:  Phone:

# CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo (Health Services Advisory Group). At the top right, a security notice reads "this is a secure site please provide credentials to continue" with a lock icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box containing a padlock icon, a "User Name:" label with an input field, a "Password:" label with an input field, and a "Log In" button.

# Thank You for Participating!

Please contact the Support Contractor if you have any questions:

- Submit questions online through the QualityNet Question & Answer Tool at [www.qualitynet.org](http://www.qualitynet.org)

*Or*

- Call the Support Contractor at 866.800.8756.