

### **Support Contractor**

# Measure by Measure: Data for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program

#### **Questions & Answers**

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#### February 28, 2018 2 PM ET

**Question:** How is the anesthesia time defined? Do we start in pre-op when they give

Versed? They also put anesthesia start and end time on their paper.

However, the end could be a while after in PACU. Start time is when they

touch the patient, not when the first medication is given.

**Answer:** The focus of the measure is on the period of time the patient is at risk for

hypothermia due to anesthetic-induced impairment of normal

thermoregulatory control mechanisms. This measure includes not only general anesthesia but also spinal and epidural anesthesia; therefore, it is important to use the definition of duration in the specifications, which references the time from anesthesia start to anesthesia end. We recommend working with anesthesia providers to gain an understanding of the practices of

administration of general/spinal/epidural anesthesia within your center. Anesthesia providers understand when this period of time begins and ends based on their approach to the administration of anesthetics and the processes

in their center.

**Question:** Is there a way to check that the NHSN document has been completed?

**Answer:** Yes, you can email NHSN directly at NHSN@cdc.com and request

confirmation.

**Question:** Where can I get the slides again?



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**Answer:** You can find the slides for today's event on our website under the

Archived Events tab for this program. You can also use this direct link:

http://www.qualityreportingcenter.com.

**Question:** For ASC-11, if you choose not to report, do you need to put "0" as you

need to do for ASC-9 and -10?

**Answer:** Inserting "zeros" is not mandatory for ASC-11, as it is a voluntary

measure. You may enter zeros or leave the measure incomplete; either

option is acceptable.

**Ouestion:** The measures ASC-11, -13, and -14 are only pertinent to cataract surgery,

correct?

**Answer:** ASC-11 is the cataracts measure, ASC-13 is Normothermia, and ASC-14

is Unplanned Anterior Vitrectomy. Please see the ASC Specifications Manual, v7.0a found on QualityNet for more details on the ASC quality

reporting measures.

**Question:** Will this slide show be available online?

**Answer:** Yes, all educational webinars can be found under the Archived Events tab

for this program. You can also use this direct link:

http://www.qualityreportingcenter.com.

**Ouestion:** Are you required then to enter the flu data in NHSN and into SAMS and

CMS?

**Answer:** You enter your ASC-8: Influenza Vaccination Coverage among

Healthcare Personnel into NHSN with your SAMS grid card. Your data is

sent from the NHSN to CMS for the reporting requirements for this

program.

Question: So just one required reporting?

Answer: You will report ASC-8 through NHSN for this program. However, some

states have different criteria which we are unable to speak to.

Additionally, there are other web-based measures for this program as we are discussing here. If you need further clarifications, by all means, give

us a call and we can assist you. Our number is 866.800.8756.

**Question:** Do we receive a response that the new agreement is signed?



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**Answer:** You will not receive an email response that your new agreement is signed,

but you can email NHSN and ask for confirmation that you have completed your re-consent form. The NHSN help desk email is

NHSN@cdc.gov.

Question: Just want to clarify that those non-reporting facilities are not included in

the healthcare influenza vaccination rates by state and nation.

**Answer:** The data displayed is based on facilities that report data for the ASC-8:

Influenza Vaccination Coverage among Healthcare Personnel measure.

**Question:** Where do we call for help? I have transferred centers but can't log onto the

NHSN website.

**Answer:** NHSN does not have a phone number. To contact the NHSN, please email

them directly at NHSN@cdc.gov.

**Question:** Why can't you just have a template with the year and date to eliminate the

issue of people not adding a reporting plan?

**Answer:** The NHSN platform is used for multiple measures across numerous

programs. To assist ASCs specifically, we have several webinars on entering data for the ASC-8 measure. NHSN also has some training

available on their website.

**Question:** What is the best way for a facility to view their completed annual

reporting including ASC-1 through -4, which is not self-reported?

**Answer:** Measures ASC-1 through -4 are reported by the ASC in Medicare Fee-for-

Service (FFS) claims. To check your own performance, utilize the Remittance Advice Form. You can also run the Claims-Detail Report on QualityNet's Secure Portal. If you need additional assistance, please

contact our help desk at 866-800.8756.

**Question:** What date do measures need to be reported yearly?

**Answer:** Your web-based measures are reported annually with a submission

deadline of May 15th.

**Question:** Do the ASC-9 and ASC-10 measures only apply to ASCs that perform

colonoscopies? Otherwise, are you exempt from these measures if you do

not perform colonoscopies?



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**Answer:** No. If your ASC does not perform these measures, then you will enter

zeros into QualityNet. If you leave these categories blank, the system will

interpret that as you did not report data.

Question: I am starting a new surgery center. I tried to contact you guys to see if I

can start this process early, but I don't have a CMS Certification Number (CCN) because we have not yet been inspected by the state or Medicare.

Am I trying to start this too early?

**Answer:** Once you obtain your CCN, you can contact our help desk at 866-800-

8756, and we will help guide you through the process of reporting for this

program.

**Question:** I have submitted for the ASC-8 measure, but it is not showing on the

QualityNet completion list or the Lookup tools on QualityNet. I have submitted for all measures, and I am not sure why this is not showing on

the QualityNet completion list.

**Answer:** Depending on when you submitted your web-based measures, the Lookup

Tool on <a href="www.qualityreportingcenter.com">www.qualityreportingcenter.com</a> may not reflect your recent data entry. Please check the "Last Updated" date just above where you enter your NPI. This will let you know how recent that data is. The ASC-8 measure is reported through NHSN and would not be reflected on the

entry page in QualityNet for web-based measures.

**Question:** The ASC-10 exclusion criteria: In regards to being able to exclude patients

due to a medical reason, is there a strict set of medical reasons that are approved for exclusion, or is it at the discretion of the physician? I am aware that examples of medical reasons are provided on several

documents, but they are not indicated as the only accepted reasons, just as

examples.

**Answer:** For measure-specific questions, please enter your question into the Q&A

tool through QualityNet. The measure writers can respond to you directly.

**Question:** We are no longer reporting ASC-6 and -7, correct?

**Answer:** You are correct; you will not be reporting on either ASC-6 or ASC-7.

**Question:** So this quality data is not published for the public?

**Answer:** All data reported for this program is subject to public display. If you have

reported data for this program, you can view your data on Hospital



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Compare at: <a href="https://www.medicare.gov/hospitalcompare/search.html">https://www.medicare.gov/hospitalcompare/search.html</a>.

You will find the link for ASCs under the Spotlight section.

**Question:** Can an appropriate visual function tool be shared?

**Answer:** You can find recommended tools in the Specifications Manual. This

information is located in the Additional Instructions section within the

measure information form for this measure.

Question: Has there been any discussion with regard to ASC-12 being more selective

regarding cases included in this measure, specifically, closer assessment of post-op complications leading to hospital visits? We have had a number of

cases counted in the measure that were obviously unrelated to the colonoscopy procedure performed (for example, fainting after trying a

family member's medical marijuana and injured head).

**Answer:** The ASC-12 measure is a facility-level rate of risk-standardized, all cause,

unplanned hospital visits within seven days of the outpatient colonoscopy. For any further clarifications, please place your question in the Q&A tool in QualityNet, as the measure writers will be able to respond directly to

you.

**Ouestion:** What do the rates actually represent: the actual number of ASCs

reporting? Or in this measure, is it the percent of patients showing

improvement in vision post-cataract?

**Answer:** The ASC-11 data is based upon ASCs that report data and represents a

percentage of patients with improvement in visual function within 90 days

following cataract surgery.

**Question:** For ASC-12, do you take into consideration those procedures that are

cancelled or aborted as indicated with modifiers? Are these cases

excluded?

**Answer:** For additional information regarding this measure, you can access the link

on QualityNet:

https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228775181731. For additional

questions, you can enter your question into the Q&A tool via QualityNet.

The measure writers can then respond directly to you.

**Question:** What is the final date for submitting for influenza vaccine?



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**Answer:** The submission deadline for the ASC-8 measure is May 15, 2018.

**Question:** I have looked at the report for ASC-12 and found that more than half of

the seven day post colonoscopy hospital admissions were not related to the colonoscopy, i.e., the patient is admitted for orthopedic surgery, patient is admitted for ankle pain, patient went to ER for migraine, etc. Is there

going to be a "fix" for this?

**Answer:** The ASC-12 measure is a facility-level rate of risk-standardized, all cause,

unplanned hospital visits within seven days of the outpatient colonoscopy. To contact the measure writers directly, you may choose to enter your inquiry into the Q&A tool via QualityNet. This gives the measure writers

the ability to answer you directly.

Question: I am at the site but am uncertain what you mean by the Q&A tool. Where

would I find it?

**Answer:** From the home page of QualityNet, you will go to the right-hand side

margin and go to the Ask a Question section. You will then choose the

Ambulatory Surgical Center link. The direct link is https://cms-

ocsq.custhelp.com/app/homeasc/p/360.

**Question:** I am new to quality reporting. I am confused about how I determine my

population size for ASC-9 and ASC-10. Is that the total cases for my facility? Or is that the total GI cases for my facility? Or the total GI cases

that fall within the certain criteria?

**Answer:** Yes, it can be confusing. Your sample would be dependent on the cases

that have the specified CPT/HCPCS codes as outlined in the

Specifications Manual. You will refer to the QDC/Sampling Section, Table 3 in the Specifications Manual to determine your sample size. If you need any further information, please call our help desk; we will be glad to

help. Our number is 866.600.8756.

**Question:** Will you show us how to run these reports?

**Answer:** We have covered this in-depth in previous webinars which you can find on

our website, www.qualityreportingcenter.com, under the Archived Events

tab for this program. You are welcome to call our help desk at 866.800.8756, and we will walk you through how to run reports.



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Question: When I pull data and review the patient charts for ASC-9 and ASC-10, I

organize the information on spreadsheets and attach the operative report and other data I've pulled. I've kept this data in binders for the past several years. Should this detail be downloaded into QualityNet in some way

when I enter the web-based measures?

**Answer:** No, you will only be entering the required numeric data on the entry page.

**Question:** Are ASC Claims Detail Reports available and updated through the

calendar year? Can claims without codes be resubmitted?

**Answer:** You can run a Claims Detail Report on demand on the secure side of

QualityNet. Claims cannot be resubmitted for the sole purpose of applying

QDCs after the claim has been adjudicated.

**Question:** Where do you find the Claims Detail Report and Provider Participation

Report on QualityNet?

**Answer:** These reports are on the secure side of QualityNet. If you need us to walk

you through the process, feel free to call our help desk at 866.800.8756. We have also covered this in previous webinars, and you can access them on our website at <a href="https://www.qualityreportingcenter.com">www.qualityreportingcenter.com</a> under the Archived

Events tab for this program.

**Question:** Is there a preview report for ASC-8?

**Answer:** Data for the ASC-8: Influenza Vaccination Coverage among Healthcare

Personnel measure is included in the annual ASC Preview Report.

**Question:** For ASC-11, do I have to put zeros on the form or can it be skipped, since

it is voluntary?

**Answer:** For ASC-11, you may leave that measure blank or you can enter zeros;

either way is acceptable.

**Question:** Will the recorded webinar be available for review in the future?

**Answer:** Yes, all webinars are stored under the Archived Events tab for this

program on our website, www.qualityreportingcenter.com.

**Ouestion:** With regard to the ASC-13 measure, how do we record and report it?



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**Answer:** ASC-13 is a web-based measure which will be reported via QualityNet

this time next year for encounter dates beginning January 1, 2018.

**Question:** What will the sample size be for the Normothermia measure?

**Answer:** Sampling for ASC-13 will be the same as for ASC-9, -10, and -11. If your

yearly population is 0-900, the sample size is 63. For a yearly population size equal to or greater than 901, the sample size is 96. This information can be found in the QDC/Sampling Section of the Specifications Manual.

**Question:** For ASC-9, are you saying if the patient is 66 years or older without a

biopsy, the doctor is required to include in the report no follow-up required unless issues due to age? If this is not documented, then this

would not be in compliance?

**Answer:** A reason would not have to be documented. Having documentation no

follow-up colonoscopy is needed would be sufficient to exclude the case if the patient was documented as >=66 years old. We encourage you to enter your question into the Q&A tool via QualityNet, as they will be able to

respond directly to you.

**Question:** If you discharge a patient stable then admit for observation, do you have to

report that?

**Answer:** If you are talking about ASC-4, Hospital Transfer/Admission, you would

report this only if the patient is transferred from your facility.

**Question:** Is ASC-8 entered in NHSN?

**Answer:** Yes, ASC-8 is reported through NHSN, not QualityNet.

**Question:** Can you discuss ASC-13 and -14?

**Answer:** Please see the ASC Specifications Manual, v7.0a on QualityNet.org.

There you will find the measure information forms with measure specifics.

You will also be able to find additional resources for ASC-13 on

www.qualityreportingcenter.com under the Tools and Resources tab for this program. Please submit any specific questions through the Q&A tool

on QualityNet.

**Question:** What is the best way to sign up another administrator?



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**Answer:** 

Go to the QualityNet home page and click on the Registration link in the left-hand navigation pane. This will direct you to the SA sign-up page for QualityNet. Additionally, you would have to follow the appropriate steps to gain access to the NHSN platform, which is separate from QualityNet. As always, if you need further clarification, please call our help desk.