



# **CY 2019 OPPS/ASC Final Rule: Ambulatory Surgical Center Quality Reporting (ASCQR) Program**

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CY **2019** OPPS/ASC Final Rule:  
Ambulatory Surgical Center  
Quality Reporting (ASCQR)  
Program

January 10,  
2019

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*Centers for Medicare & Medicaid Services (CMS)*

# Save the Date

- Upcoming ASCQR Program educational webinars:
  - **January 30, 2019:** The Annual Specifications Manual Update
- Notifications of additional educational webinars will be sent via **ListServe**

# Learning Objectives

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

- ✓ Locate the Calendar Year (CY) 2019 Outpatient Prospective Payment System (OPPS)/ASC Final Rule in the *Federal Register*.
- ✓ List the finalized changes to the ASCQR Program in the CY 2019 OPPS/ASC Final Rule.
- ✓ Identify changes that were not finalized for the ASCQR Program.



# Final Rule CY 2019

## Locating the Rule

# Federal Register Link

To access the Final Rule:



- [www.federalregister.gov](http://www.federalregister.gov)
  - The ASCQR Program section begins on p. 59110 of the *Federal Register*.
- <https://www.gpo.gov/fdsys/pkg/FR-2018-11-21/pdf/2018-24243.pdf>

# Accessing the Federal Register


[www.federalregister.gov](http://www.federalregister.gov)


83 FR 59110

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Friday, November 30th





 **Current Issue** 122 documents from 43 agencies (732 Pages)  
98 Notices 9 Proposed Rules 15 Rules

 **Public Inspection**

Special Filing	Regular Filing
<i>updated on 11:15 AM on Friday, November 30, 2018</i>	<i>updated on 8:45 AM on Friday, November 30, 2018</i>
11 documents from 6 agencies	109 documents from 44 agencies
8 Notices 1 Proposed Rule 2 Rules	90 Notices 4 Proposed Rules 15 Rules

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# Navigating the Federal Register

The screenshot shows the Federal Register website interface. At the top, there is a navigation bar with links for Sections, Browse, Search, Reader Aids, and My FR. A search bar on the right contains the text 'Search Documents'. Below the navigation bar is the Federal Register logo, which includes the National Archives logo and the text 'FEDERAL REGISTER The Daily Journal of the United States Government'. To the right of the logo is the seal of the National Archives and Records Administration. A blue bar below the logo contains a 'Document Search' button. Below this bar, there are tabs for 'Documents' and 'Public Inspection 0'. A search input field contains '83 FR 59110' and a search button. To the right of the search button, it says '9 documents'. There are also links for 'Show Advanced Search', 'Learn More', and 'Subscribe'. Below the search results, there is a table with columns for 'TYPE' and 'AGENCY'. The table lists 'Rule' (4), 'Notice' (3), and 'Proposed Rule' (2) under the 'TYPE' column, and 'Health and Human Services Department' (4) under the 'AGENCY' column. A red box highlights the title of the document: 'Medicare Program: Changes to Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs'. Below the title, there is a description of the rule and its effective date.

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It looks like you were searching for the citation **83 FR 59110**.

We've found the following document on page 58818 of volume 83.

**Medicare Program: Changes to Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs**

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 2019 to...

A Rule by the Centers for Medicare & Medicaid Services on 11/21/2018  
Pages 58818-59179 (362 pages)

TYPE	
Rule	4
Notice	3
Proposed Rule	2

AGENCY	
Health and Human Services Department	4



# Finding the Correct Page

X Find: 59110 Previous Next Options No matches found

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Rule

Medicare Program: Changes to Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs

A Rule by the Centers for Medicare & Medicaid Services on 11/21/2018

Comments on this document are being accepted at Regulations.gov. [SUBMIT A FORMAL COMMENT](#)

**PUBLISHED DOCUMENT**

**AGENCY:**  
Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:**  
Final rule with comment period.

**SUMMARY:**  
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 2019 to implement changes arising from our continuing experience with these systems. In this final rule with comment period, we describe the changes to the amounts and factors used to determine the payment rates for Medicare services paid under the OPPS and those paid under the ASC payment system. In addition, this final rule with comment period updates and refines the requirements for the Hospital Outpatient Quality Reporting System (OPPS) and the Medicare ASC Quality Reporting System (ASCQR).

**DOCUMENT DETAILS**

**Printed version:**  
[PDF](#)

**Publication Date:**  
11/21/2018

**Agencies:**  
[Centers for Medicare & Medicaid Services](#)

**Dates:**  
Effective date: This final rule with comment period is effective on January 1, 2019.

**Effective Date:**  
01/01/2019

**Comments Close:**  
12/03/2018

# PDF Version

59110 Federal Register / Vol. 83, No. 225 / Wednesday, November 21, 2018 / Rules and Regulations

Program reporting requirements. We also proposed to continue to apply all other applicable standard adjustments to the OPSS national unadjusted payment rates for hospitals that fail to meet the requirements of the Hospital OQR Program. Similarly, we proposed to continue to calculate OPSS outlier eligibility and outlier payment based on the reduced payment rates for those hospitals that fail to meet the reporting requirements.

We did not receive any public comments on these proposals. For the CY 2019 OPSS, the final reporting ratio is 0.980, calculated by dividing the final reduced conversion factor of 77.900 by the final full conversion factor of 79.490. We also are finalizing the remainder of our proposals regarding the payment reduction for hospitals that fail to meet the Hospital OQR Program requirements for CY 2019 payment determination without modification.

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

rule with comment period (78 FR 75122), section XIV. of the CY 2015 OPSS/ASC final rule with comment period (79 FR 66966 through 66987), section XIV. of the CY 2016 OPSS/ASC final rule with comment period (80 FR 70526 through 70538), section XIV. of the CY 2017 OPSS/ASC final rule with comment period (81 FR 79797 through 79826) and section XIV. of the CY 2018 OPSS/ASC final rule with comment period (82 FR 59445 through 59476) for an overview of the regulatory history of the ASCQR Program.

### **4. Meaningful Measures Initiative**

In the proposed rule, we proposed a number of new policies for the ASCQR Program. We developed these proposals after conducting an overall review of the Program under our new Meaningful Measures Initiative, which is discussed in more detail in section I.A.2. of the proposed rule and this final rule with comment period. The proposals reflected our efforts to ensure that the ASCQR Program measure set continues to promote improved health outcomes

program do not outweigh the benefits of improving beneficiary care.

### **B. ASCQR Program Quality Measures**

#### **1. Considerations in the Selection of ASCQR Program Quality Measures**

We refer readers to the CY 2013 OPSS/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 2019 OPSS/ASC proposed rule (83 FR 37193), we did not propose any changes to these policies.

#### **2. Accounting for Social Risk Factors in the ASCQR Program**

In the CY 2018 OPSS/ASC final rule with comment period (82 FR 59445 through 59447), we discussed the importance of improving beneficiary outcomes including reducing health disparities. We also discussed our commitment to ensuring that medically complex patients, as well as those with social risk factors, receive excellent care. We discussed how studies show

# Social Risk Factors

- Risk factors are associated with poor health outcomes.
- The National Quality Forum (NQF) is extending the socioeconomic status trial.
- CMS continues to consider options to address equity and disparities.

<CY Year>

CY 2019 OPPS/ASC  
Final Rule

<Topic>

Removal Factors



Uploading...

<Program>

ASCQR Program

# Finalized: Removal Factor 2

- Removed old Factor 2: “availability of alternative measures with a stronger relationship to patient outcomes”
- Added new Factor 2: “performance or improvement on a measure does not result in better patient outcomes”

# Finalized: Removal Factors 1 and 8

- Added new Factor 8: “The costs associated with a measure outweigh the benefit of its continued use in the program.”
- Clarified Factor 1: “topped-out measures”
  - Process for calculating the truncated coefficient of variation (TCOV)
- Finalized beginning with the effective date of the **CY 2019** OPPS/ASC Final Rule

<CY Year>

CY 2019 OPPS/ASC  
Final Rule

Measures Proposed for Removal



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<Program>

ASCQR Program

# Claims-Based Measures

Measure	Payment Determination Year for Proposed Removal
ASC-1: Patient Burn	CY 2021
ASC-2: Patient Fall	CY 2021
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	CY 2021
ASC-4: All-Cause Hospital Transfer/Admission	CY 2021



# Web-Based Measures

Measure	Payment Determination Year for Proposed Removal
ASC-8: Influenza Vaccination Coverage among Healthcare Personnel	CY 2020
ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	CY 2021
ASC-10: Colonoscopy Interval for Patients with a History of Adenomatous Polyps—Avoidance of Inappropriate Use	CY 2021
ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (voluntary)	CY 2021

<CY Year>

CY 2019 OPPS/ASC  
Final Rule

Measures Being Removed



Uploading...

<Topic>

<Program>

ASCQR Program

# ASC-8

## Influenza Vaccination among Healthcare Personnel

- Challenges with administrative requirements
- Benefits of the measure outweighed by costs and burdens of reporting
- Finalized for removal beginning with the **CY 2020** Payment Determination

# ASC-10

## Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps– Avoidance of Inappropriate Use

- Cost of data collection and submission is burdensome
- Availability of this measure in other programs
- Adverse patient outcomes tracked by ASC-12
- Finalized for removal beginning with the **CY 2021** Payment Determination

<CY Year>

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Final Rule

Measures Being Retained



Uploading...

<Topic>

<Program>

ASCQR Program

# ASC-1–ASC-4

- Are applicable to all ASCs, regardless of specialty
- Measures will remain in the program
- Suspend data collection beginning with the **CY 2021** Payment Determination to update measures, including data submission methods

# ASC-9

## Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

- Promotes adherence to clinical guidelines
- Provides important information to beneficiaries
- Evaluates overutilization

# ASC-11

## Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

- Meaningful to beneficiaries
- Optional for ASCs
- Balances measure set
- Addresses gap in clinical area



# Brief Summary

Measure	Last Time You Report
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	December 31, 2018
ASC-8: Influenza Vaccination Coverage among Healthcare Personnel	No longer reported
ASC-10: Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps—Avoidance of Inappropriate Use	May 15, 2019

# Future Consideration: Validation

Requested comment on Hospital Outpatient Quality Reporting Program validation policy as a model

- Will consider comments in future policy determinations

# Reporting Period

## ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy

- Reporting period will be three years prior to the payment determination year
- Finalized beginning with the **CY 2020** Payment Determination

The background is a solid blue color. On the left side, there is a complex graphic of white lines. A horizontal line enters from the left edge, then turns upwards and rightwards, then downwards and rightwards, ending in a small white circle. To the right of this, several parallel white lines of varying lengths and angles radiate outwards. On the right side of the slide, there is another graphic consisting of a vertical white line starting from a small white circle at the top, extending downwards, then turning leftwards, then downwards again, ending in a small white circle. There are also some faint, thin white lines and circles scattered across the background.

# Summary

# ASCQR Measure Set

Measure	Payment Determination
ASC-1: Patient Burn	Suspend Beginning CY 2021
ASC-2: Patient Fall	Suspend Beginning CY 2021
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	Suspend Beginning CY 2021
ASC-4: All-Cause Hospital Transfer/Admission	Suspend Beginning CY 2021
ASC-8: Influenza Vaccination Coverage among Healthcare Personnel	Removed for CY 2020

# ASCQR Measure Set (cont.)

Measure	Payment Determination
ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	Continues
ASC-10: Colonoscopy Interval for Patients with a History of Adenomatous Polyps– Avoidance of Inappropriate Use	Removed for CY 2021
ASC-11: Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery (voluntary)	Continues
ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Continues

# ASCQR Measure Set (cont.)

Measure	Payment Determination
ASC-13: Normothermia Outcome	Continues
ASC-14: Unplanned Anterior Vitrectomy	Continues
ASC-15a-15e: OAS CAHPS	Delayed
ASC-17: Hospital Visits After Orthopedic Ambulatory Surgery Center Procedures	Begins with CY 2022
ASC-18: Hospital Visits After Urology Ambulatory Surgery Center Procedures	Begins with CY 2022

# References

- PDF link to the Final Rule:  
<https://www.gpo.gov/fdsys/pkg/FR-2018-11-21/pdf/2018-24243.pdf>
- Link to the Final Rule:  
<https://www.federalregister.gov/documents/2018/11/21/2018-24243/medicare-program-changes-to-hospital-outpatient-prospective-payment-and-ambulatory-surgical-center>



# 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
- 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.
- If you continue to have problems, please contact Deb Price at [dprice@hsag.com](mailto:dprice@hsag.com).

# 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>

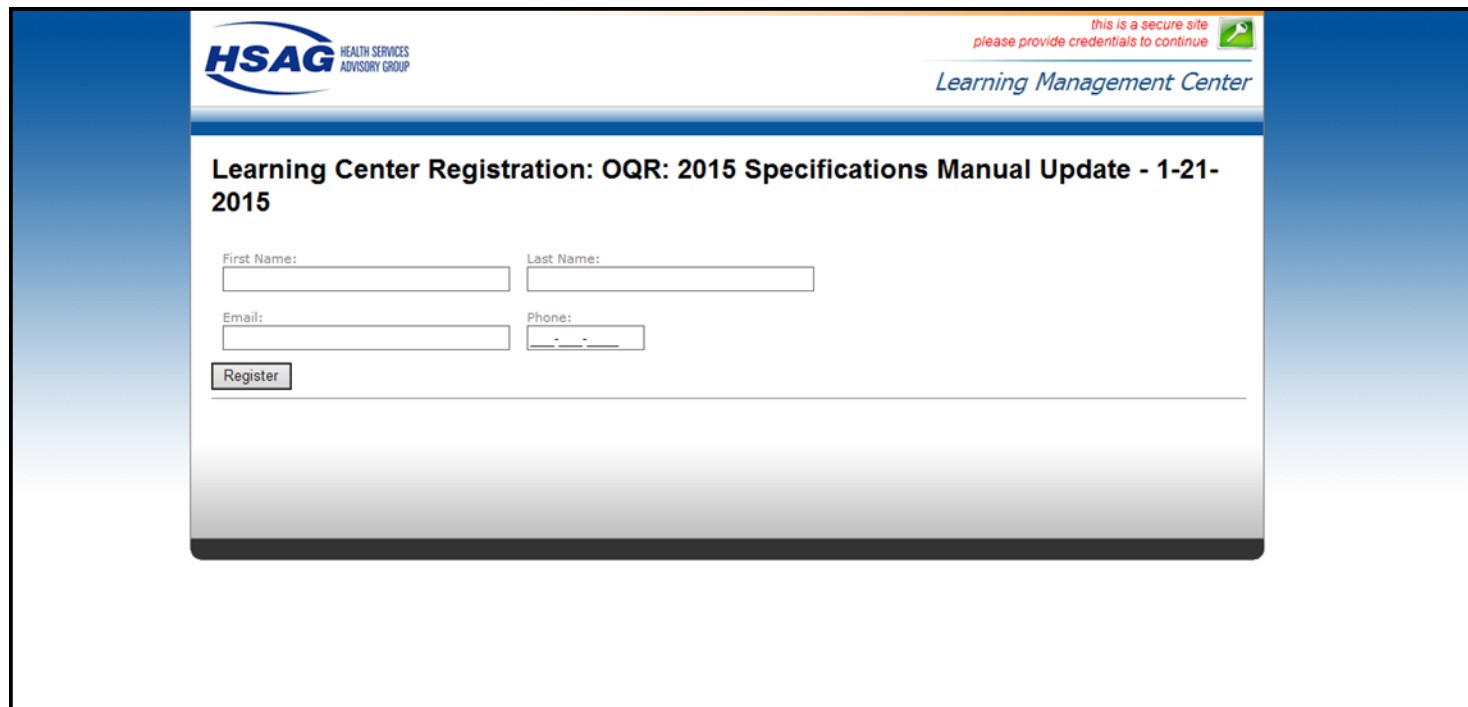
**Existing User Link:**

<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.

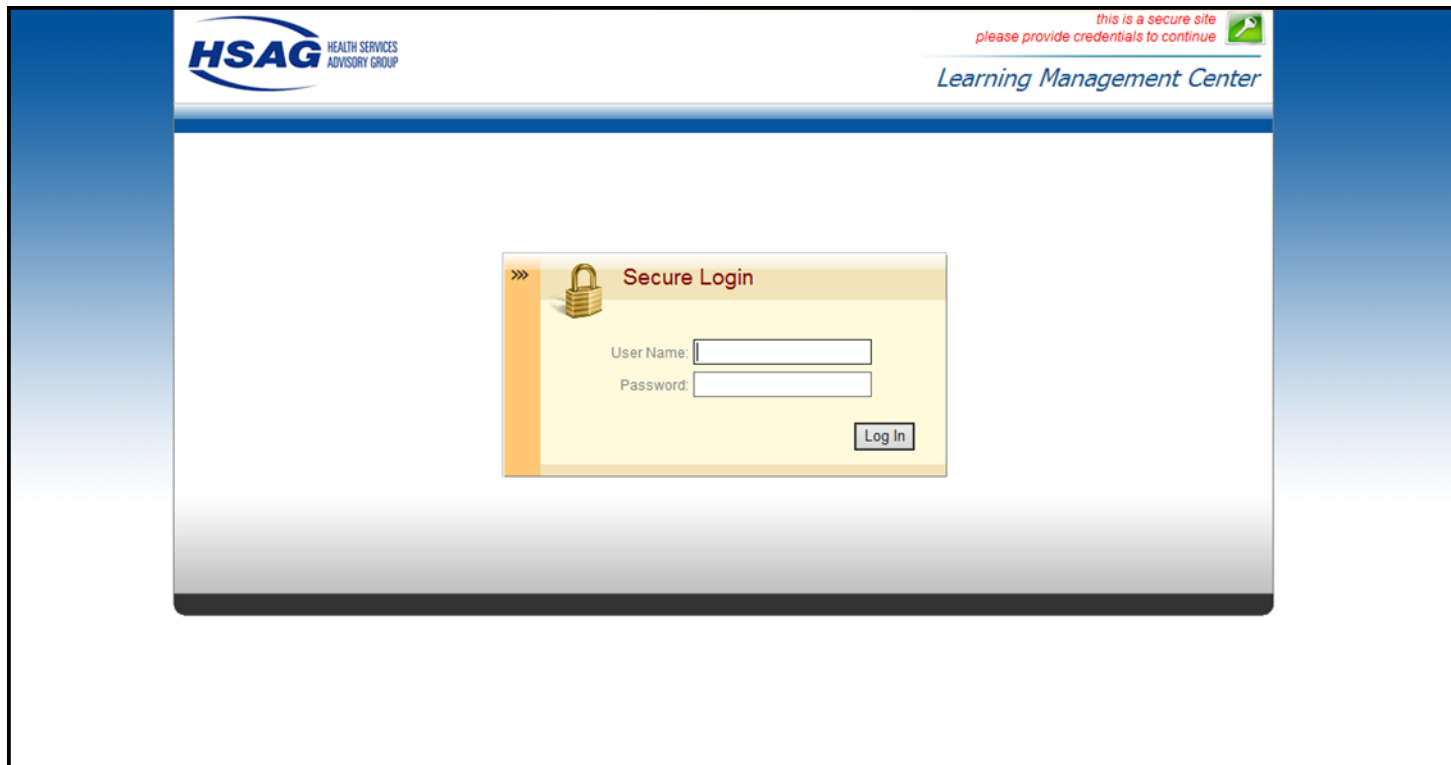
Done

# CE Credit Process: New User



The screenshot shows a web browser window displaying the registration page for a new user. The page header includes the HSAG logo (Health Services Advisory Group) on the left and a security notice on the right: "this is a secure site please provide credentials to continue" with a lock icon. Below the header, the page title is "Learning Management Center". The main content area is titled "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The registration form contains 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 page is framed by a blue border on the left and right sides.

# 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" next to 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.