Specifications Manual Update: Ambulatory Surgical Center Quality Reporting (ASCQR) Program

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ASCQR Program Support Contractor
January 30, 2019
ASCQR Program Support Contractor Presents “Touring the Hall of Specifications” January 30, 2019

Starring: Melissa “SpecMaster” Thompson RN, BSN, Specifications Manual Lead

Featuring: The Ambulatory Surgical Center Quality Reporting (ASCQR) Program Specifications Manual Versions 8.0 and 8.0a

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ASCQR Program Support Contractor
Learning Objectives

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

✓ Identify changes to the Specifications Manual through version 8.0a.
✓ List changes in the measure information forms.
✓ Describe how these changes will impact abstracting and reporting for this program.
The Final Rule Wing

CMS Presents
The CY 2019
OPPS/ASC Final
Rule Wing

Starring
“The Federal
Register”

Proposed
changes
include the
“Patients Over
Paperwork”
initiative to
enhance the
patient care
experience
<table>
<thead>
<tr>
<th>Measure</th>
<th>Last Time You Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASC-1: Patient Burn</td>
<td></td>
</tr>
<tr>
<td>ASC-2: Patient Fall</td>
<td></td>
</tr>
<tr>
<td>ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant</td>
<td>December 31, 2018</td>
</tr>
<tr>
<td>ASC-4: All-Cause Hospital Transfer/Admission</td>
<td></td>
</tr>
<tr>
<td>ASC-8: Influenza Vaccination Coverage among Healthcare Personnel</td>
<td>No longer reported</td>
</tr>
<tr>
<td>ASC-10: Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps–Avoidance of Inappropriate Use</td>
<td>May 15, 2019</td>
</tr>
</tbody>
</table>
The Manual Process

Changes are made and recorded in Release Notes

Edits are highlighted in yellow

Manual is posted on Quality Net

Older versions are removed
Choose a Version

Ambulatory Surgical Center Quality Reporting Specifications Manual

The Ambulatory Surgical Center Quality Reporting Program Quality Measures Specifications Manual provides measure information and specifications for Medicare’s ASC Quality Reporting Program. These standardized measures were selected by the Centers for Medicare & Medicaid Services (CMS) to measure the quality of care for patients in the ASC setting.

<table>
<thead>
<tr>
<th>Data Collection Time Period</th>
<th>Specifications Manual</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/01/19 - 12/31/19</td>
<td>Version 8.0a</td>
</tr>
<tr>
<td>01/01/18 - 12/31/18</td>
<td>Version 7.0a</td>
</tr>
<tr>
<td>01/01/17 - 12/31/17</td>
<td>Version 6.0a</td>
</tr>
<tr>
<td>07/01/16 - 12/31/16</td>
<td>Version 5.1</td>
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<tr>
<td>01/01/16 - 06/30/16</td>
<td>Version 5.0a</td>
</tr>
<tr>
<td>10/01/15 - 12/31/15</td>
<td>Version 4.1</td>
</tr>
<tr>
<td>01/01/15 - 09/30/15</td>
<td>Version 4.0a</td>
</tr>
<tr>
<td>01/01/14 - 12/31/14</td>
<td>Version 3.0c</td>
</tr>
<tr>
<td>01/01/13 - 12/31/13</td>
<td>Version 2.0</td>
</tr>
<tr>
<td>10/01/12 - 12/31/12</td>
<td>Version 1.0b</td>
</tr>
</tbody>
</table>

Timelines for Specifications Manuals
Choose a Section
Museum Polling Questions

We invite all guests to participate in the polling questions to test your knowledge and provide valuable feedback!
Table of Contents

• Version 8.0
  ▪ No changes

• Version 8.0a
  ▪ **Removed** claims-based measures ASC-1, ASC-2, ASC-3, and ASC-4
  ▪ **Removed** web-based measures ASC-8 and ASC-10
Program Background and Requirements

• Version 8.0
  ▪ No changes

• Version 8.0a
  ▪ Background
    • Added “Measures ASC-1 through ASC-4 have been retained in the ASC Quality Reporting Program; however, data collection has been suspended beginning with the CY 2021 payment determination until further action in rulemaking with the goal of updating the data submission method.”
Program Background and Requirements (cont.)

- **Measures Submitted via a Web-Based Tool**
  - **Added** Submission Instructions for measures submitted via a web-based tool
  - **Added** the Paperwork Reduction Act (PRA) disclosure statement after Measures Management Systems text
Section 1

Measure Information Forms
Claims-Based Measures

Using Quality Data Codes (QDCs):

- 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

Outcome Measure:

- ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy
Measures Submitted via a Web-Based Tool

• ASC-8: Influenza Vaccination Coverage among Healthcare Personnel
• ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
• ASC-10: Appropriate Follow-up Interval for Patients with a History of Adenomatous Polyps—Avoidance of Inappropriate Use
• ASC-11: Cataracts—Improvements in Patient’s Visual Function within 90 Days Following Cataract Surgery
• ASC-13: Normothermia
• ASC-14: Unplanned Anterior vitrectomy
ASC-1 through ASC-4

• Measures were retained in the program but data collection was suspended
  • Beginning with the Calendar Year (CY) 2021 Payment Determination to update measures, including data submission methods

1/30/2019
ASC-1 through ASC-4

• Version 8.0
  ▪ Changes

• Version 8.0a
  ▪ Removed
ASC-8

• Version 8.0  
  ▪ No changes

• Version 8.0a  
  ▪ Removed
ASC-9

• Versions **8.0** and **8.0a**
  ▪ No changes
ASC-10

• Versions 8.0
  ▪ No changes

• Version 8.0a
  ▪ Removed
ASC-11

• Version 8.0
  ▪ Description
    • Added “based on completing a pre-operative and post-operative visual function survey”
  ▪ Numerator Statement
    • Added 18 years and older
  ▪ Denominator Statement
    • Changed “instrument” to “survey”
ASC-11 (cont.)

- **Definitions of Performance Met**
  - *Added* Definitions of performance met, not met, and denominator exception by Healthcare Common Procedure Coding System (HCPCS) code

- **Version 8.0a**
  - No changes
ASC-12

- **Version 8.0**
  - No changes
- **Version 8.0a**
  - **Cover Page**
    - **Changed** to reference CY 2016 through CY 2018 as the performance period for CY 2020 payment determination to reflect that the performance period has been extended from one year to three years and text to reflect the performance period for CY 2021 payment determination
    - **Changed** text to reference the latest measure specifications and direct users to the new Question and Answer (Q&A) tool
ASC-12 (cont.)

- **Included Population**
  - *Changed* language to include explicit mention of Current Procedural Terminology (CPT®) codes and link to direct users to the Measure Updates and Specifications Report on QualityNet

- **CPT® Codes**
  - *Removed* CPT® codes that define the patient cohort

- **Cohort Exclusions**
  - *Added* explicit mention of cohort exclusions and diagnosis codes to a link directing users to the measure specifications
  - *Removed* bullet points, Table 1 and Table 2

- **Selected References**
  - *Changed* reference to the 2016 measure specifications with reference to the latest specifications
ASC-13

• Version 8.0
  ▪ **Added** Rationale section to the Measure Information Form (MIF)

• Version 8.0a
  ▪ No changes
ASC-14

• Version 8.0
  ▪ Added Rationale section to the MIF
• Version 8.0a
  ▪ No changes
Museum Polling Questions

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Sampling Specifications

- **Version 8.0**
  - No changes

- **Version 8.0a**
  - **Removed** Quality-Data Coding from Section 2 title
  - **Removed** language referencing Quality-Data Coding and ASC-1 through ASC-4
Section 3

Quality Data Transmission
Quality-Data Transmission

• Version 8.0
  ▪ File Layout
    • Added ASC-13 and ASC-14 to comma-separated values (CSV) file layout

• Version 8.0a
  ▪ Quality-Data Transmission
    • Removed ASC-10 from Ambulatory Surgical Center Web-Based Measure Batch Submission File Layout
Appendices
Appendix A

- **Version 8.0**
  - No changes
- **Version 8.0a**
  - **Removed** Glossary of Terms
  - **Added** Appendix A placeholder for future use
Appendix B

• Version 8.0
  ▪ Preview Section
    • Added ASC-17 and ASC-18

• Version 8.0a
  ▪ No changes
Resources

• To locate the Specifications Manual: www.qualitynet.org

• Have a question? Use the Questions & Answers tool in QualityNet:
  ▪ https://cms-ocsq.custhelp.com/

• Contact the support contractor helpdesk:
  ▪ 866.800.8756
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.
CE Credit Process: Survey

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.

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-d6f6b9cccb1ae

Existing User Link:
https://lmc.hshapps.com/feast/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9cccb1ae

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
CE Credit Process: Existing User
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.