Welcome!

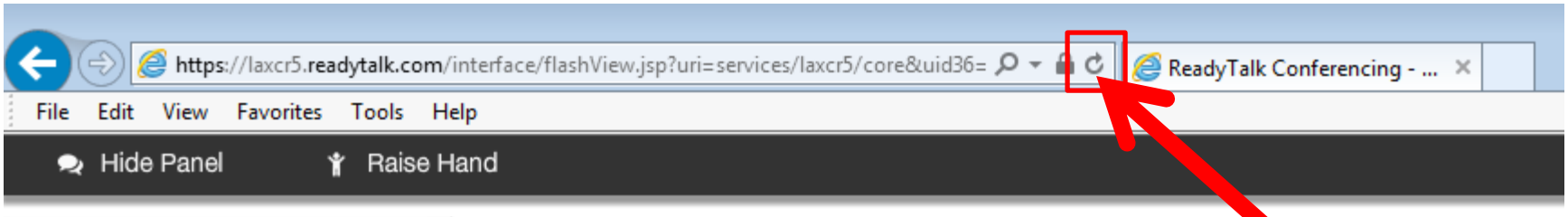
- Presentation slides can be downloaded from www.qualityreportingcenter.com under Upcoming Events on the right-hand side of the page.
- Audio for this event is available via ReadyTalk® Internet streaming. No telephone line is required.
- Computer speakers or headphones are necessary to listen to streaming audio.
- Limited dial-in lines are available. Please send a chat message if a dial-in line is needed.
- This event is being recorded.

Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stops?

- Click **Refresh** icon
  or
- Click F5

F5 Key
Top row of keyboard

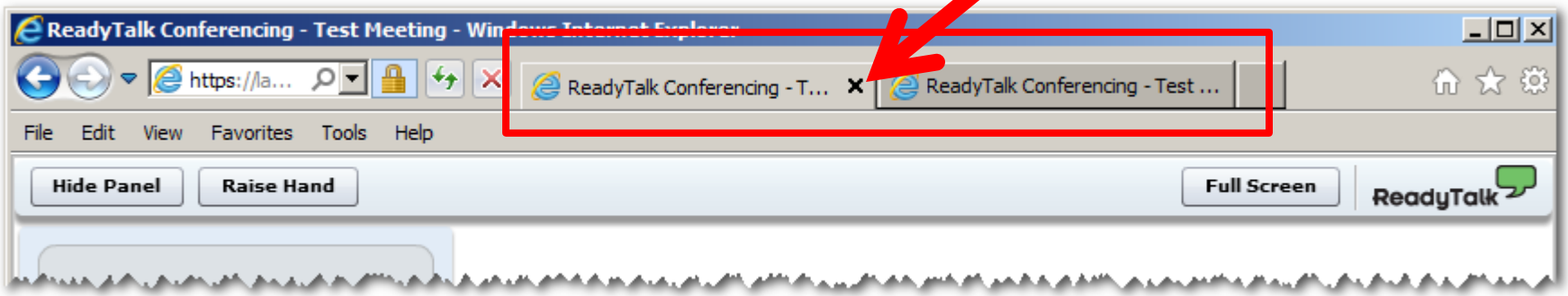


Location of buttons

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 on the bottom-left corner of your screen.

Staying the Course: Sailing Toward Quality Reporting Success

Laurie Ciannamea, MBA
Project Coordinator
Ambulatory Surgical Center Quality Reporting Program Support Contractor

March 22, 2017

Save the Date

- Upcoming Ambulatory Surgical Center Quality Reporting (ASCQR) Program educational webinar:
  - April 26, 2017: Utilizing tools and resources available to optimize reporting
- Notifications of additional educational webinars will be sent via ListServe

Learning Objectives

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

- ✓ Define the program requirements for the ASCQR Program.
- ✓ Identify and run *QualityNet* reports that help them monitor their progress.
- ✓ Locate and use the tools located on the Quality Reporting Center website.
- ✓ Describe the three most common obstacles/hurdles to successful reporting.

Charting the Course

Minimum Case Volume

"ASCs with fewer than 240 Medicare claims per year during an annual reporting period for a payment determination year are not required to participate in the ASCQR Program for the subsequent annual reporting period for that applicable payment determination year." (42 CFR 416.305(c))

Claims-Based Measure

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

- Data collection began with claims submitted in 2016 to affect payment year (PY) 2018
- No data abstraction responsibility for the facility

Claims-Based (QDC) Measures

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
- ASC-5: Prophylactic Intravenous (IV) Antibiotic Timing

What Are These Codes?

QDCs are:

- Required to be reported on a minimum of 50 percent of the facility's claims
- Non-payable specified Category II and/or G-codes Current Procedural Terminology (CPT) codes
- Reported via Medicare Fee-for-Service claims

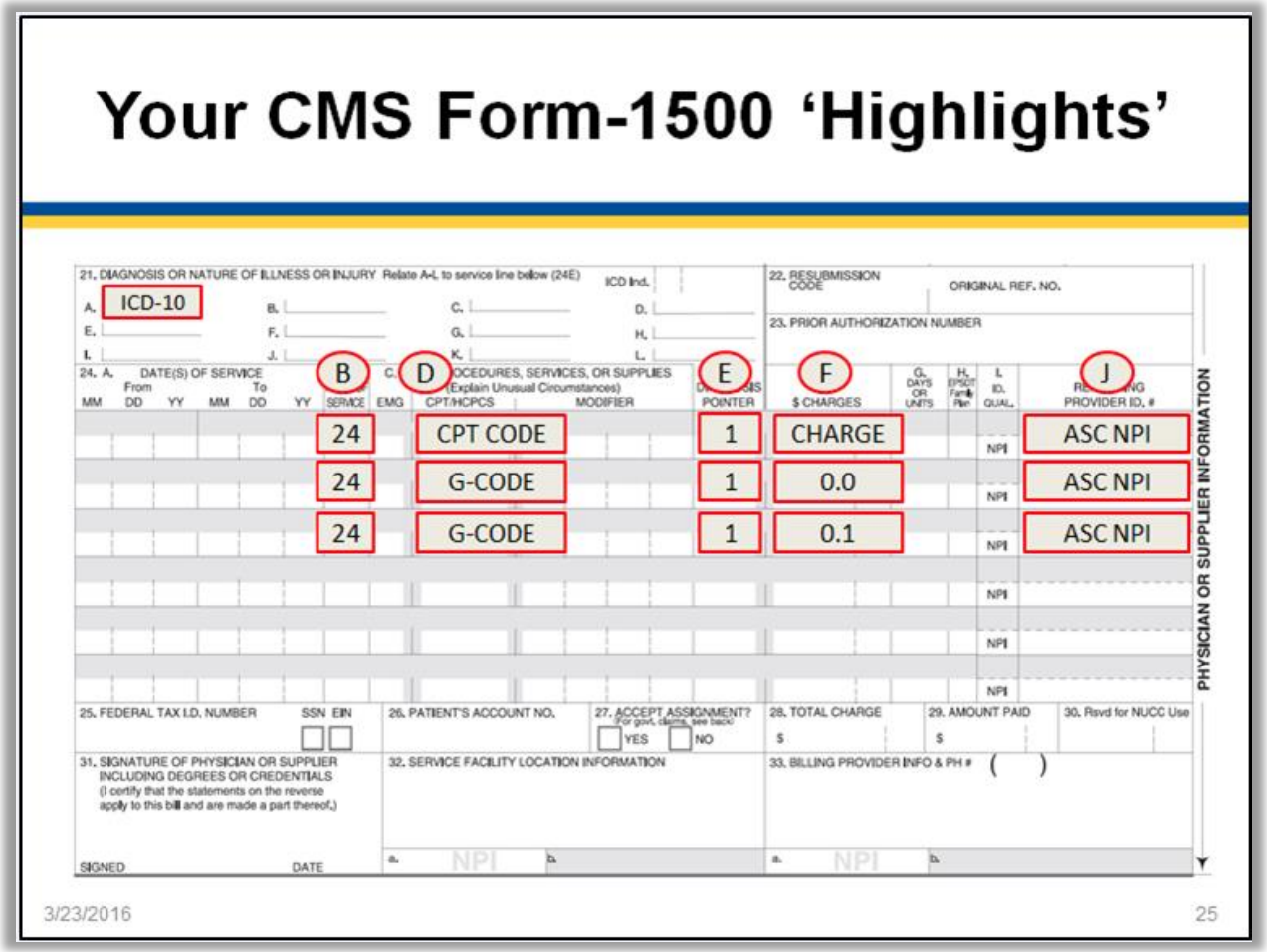
Helpful Hints

Your claims should:

- Contain a minimum of two, a maximum of five, QDCs per claim.
- Have a billable charge and the QDCs on each page – *Don't bill the QDC by itself!*
- Position the billable charge above the QDCs.
- Have the facility's National Provider Identifier (NPI), not the physician's, in position 24J.

Submitting Your Claims

Your CMS Form-1500 'Highlights'



3/23/2016 25

Measures Submitted Using the *QualityNet* Web-Based Tool

- ASC-6: Safe Surgery Checklist Use
- ASC-7: ASC Facility Volume on Selected ASC Surgical Procedures
- ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
- ASC-10: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use
- ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary)

Additional Facts

Measures submitted via *QualityNet*:

- Reporting data for the period January 1 through December 31, 2016
- Submitted annually between January 1 and August 15, 2017
  - The 2017 Final Rule signaled a change in the deadline submission date from August 15 to May 15. This change is set begin in 2018 for the CY 2019 payment determination and subsequent years.

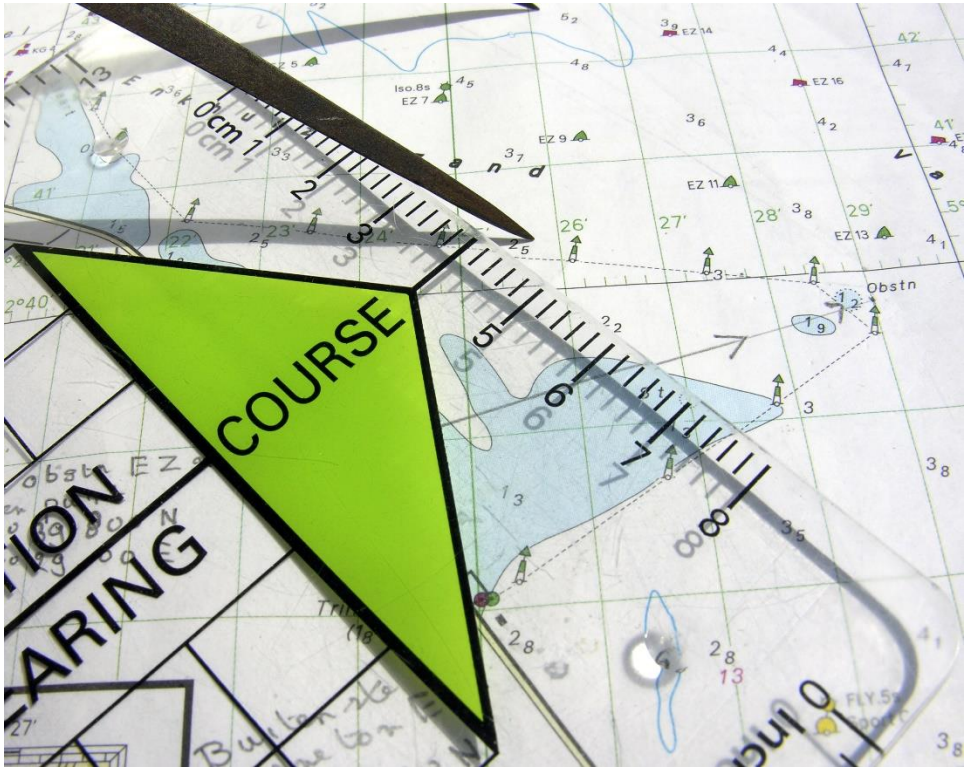
Measure Submitted Using the NHSN Web-Based Tool

ASC-8: Influenza Vaccination Coverage among Healthcare Personnel

- Reported via the National Healthcare Safety Network (NHSN), not through *QualityNet*
- Requires a separate enrollment process
- Collected for the current flu season:

  October 1, 2016 through March 31, 2017
- Submitted between:

  October 1, 2016 and May 15, 2017



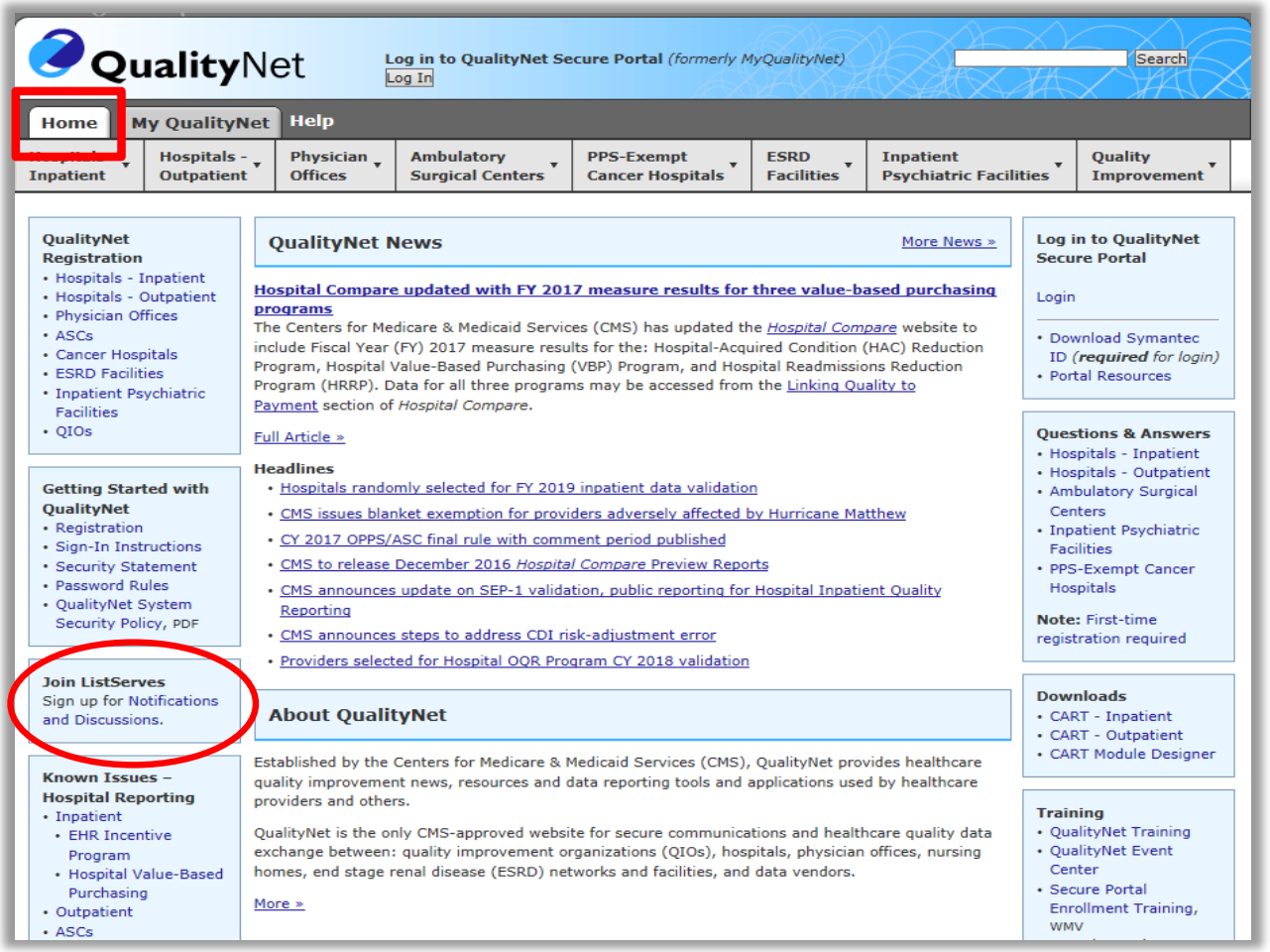
Staying on Course

ListServe

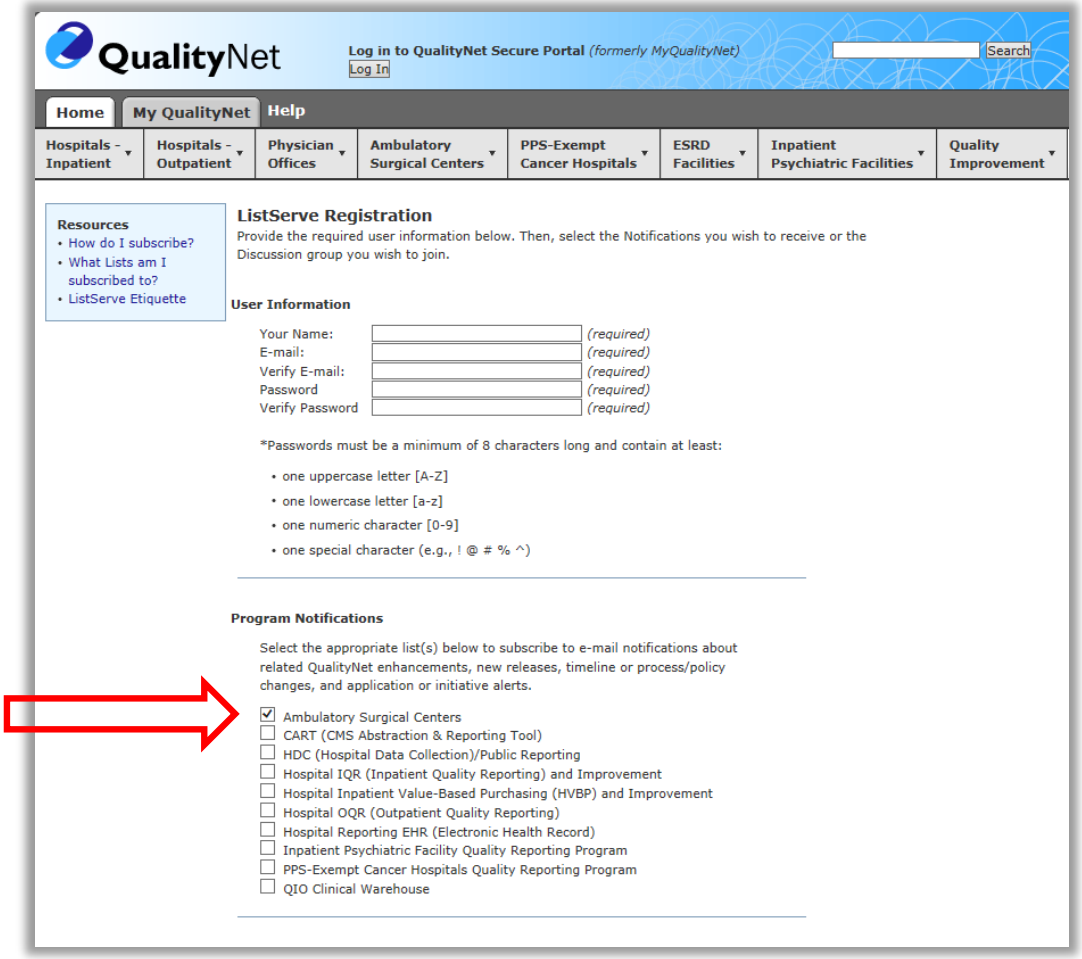
Why should I join?

- Program updates
- Submission deadlines
- Proposed and Final Rule releases
- Educational opportunities

Subscribing to the ListServe (1 of 2)

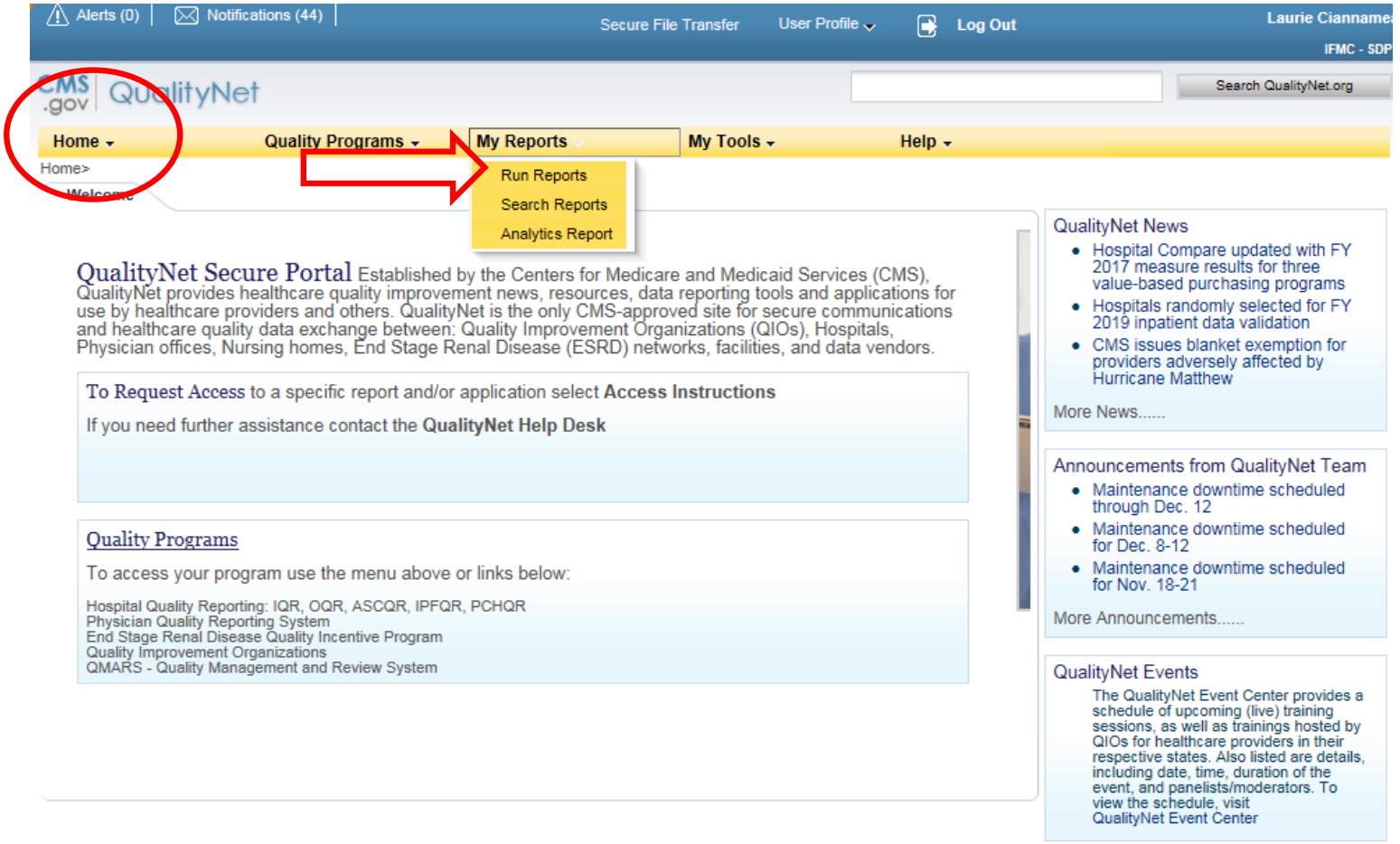


Subscribing to the ListServe (2 of 2)

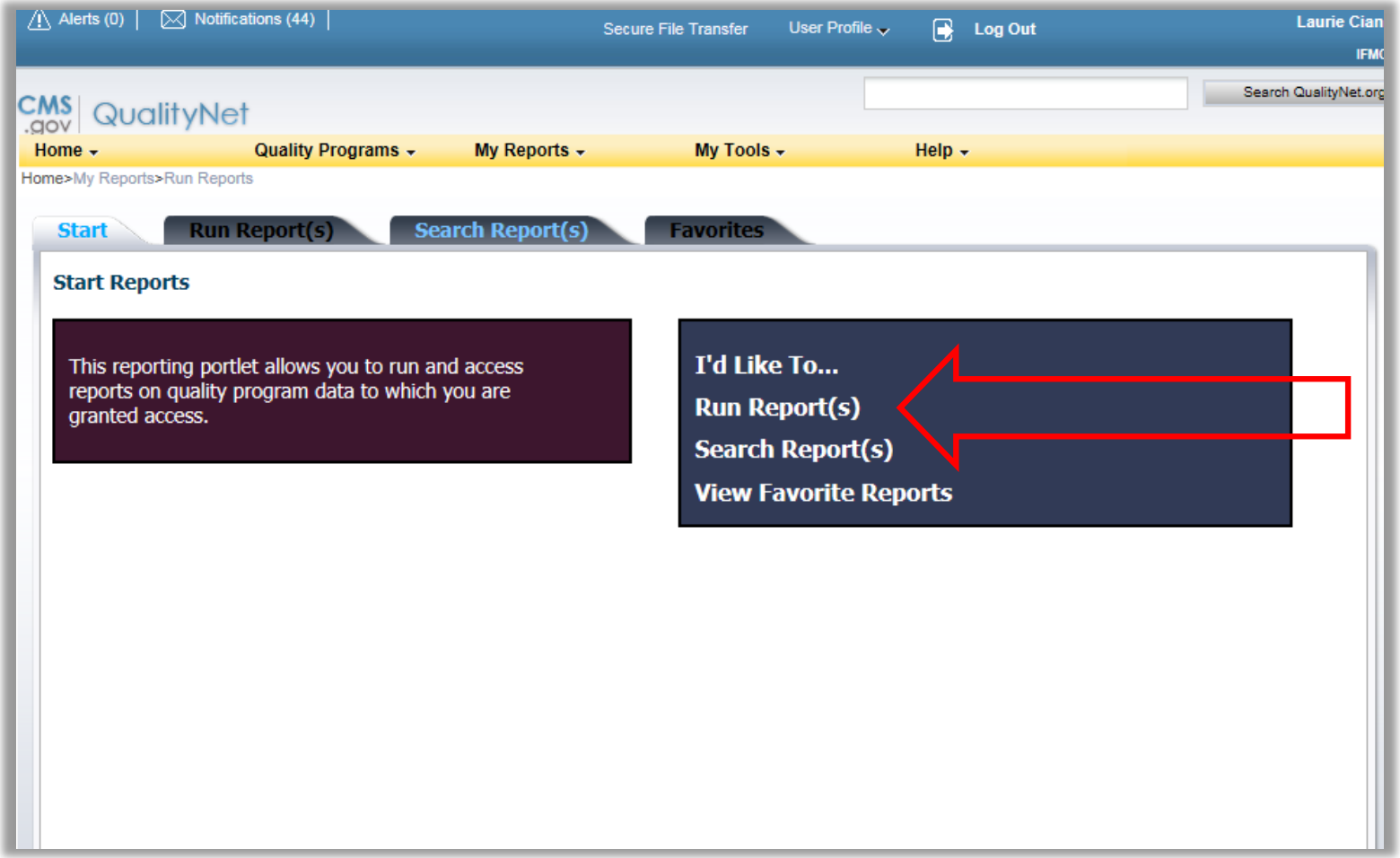


Reading the Compass

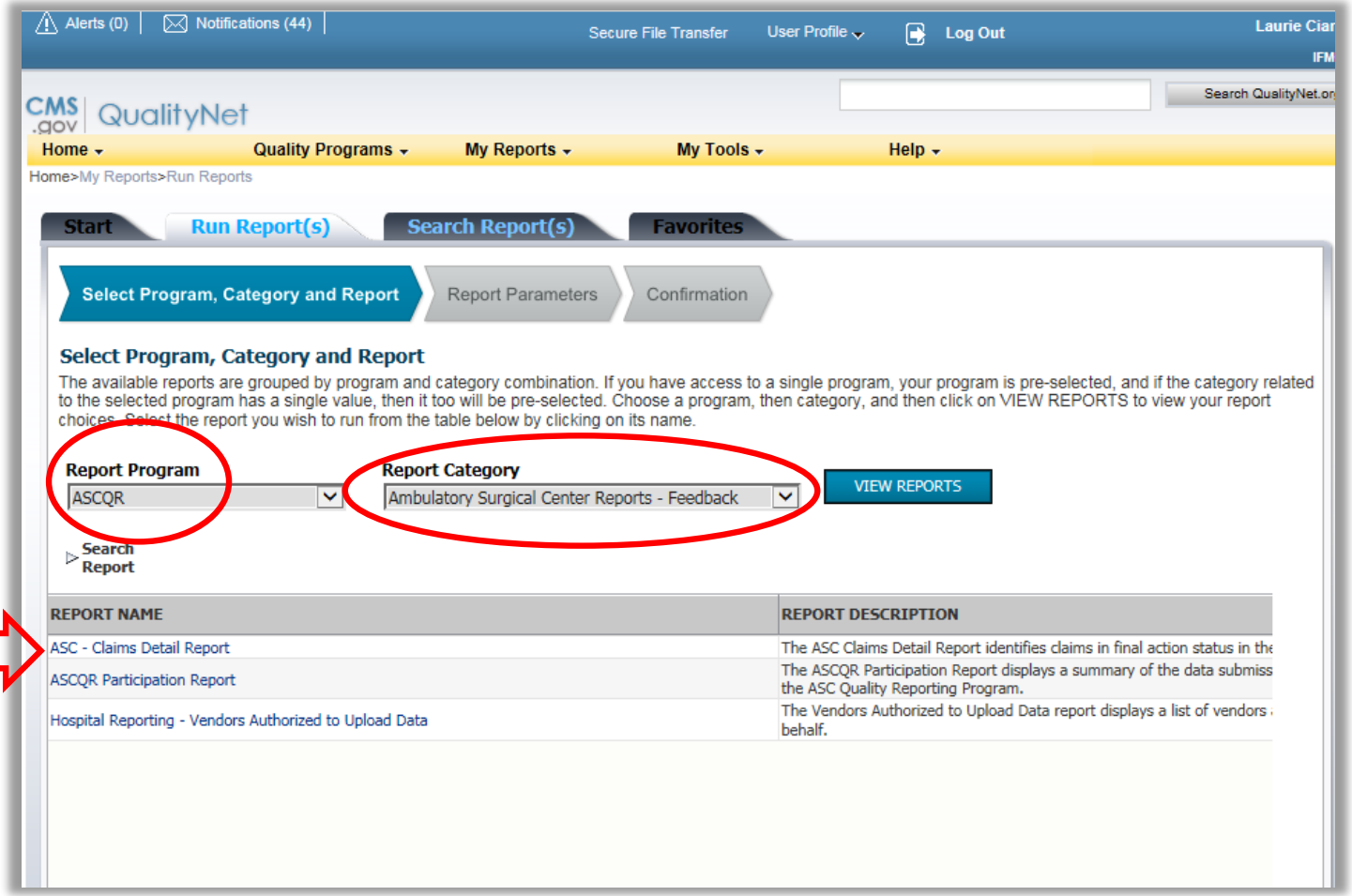
Running Reports (1 of 4)



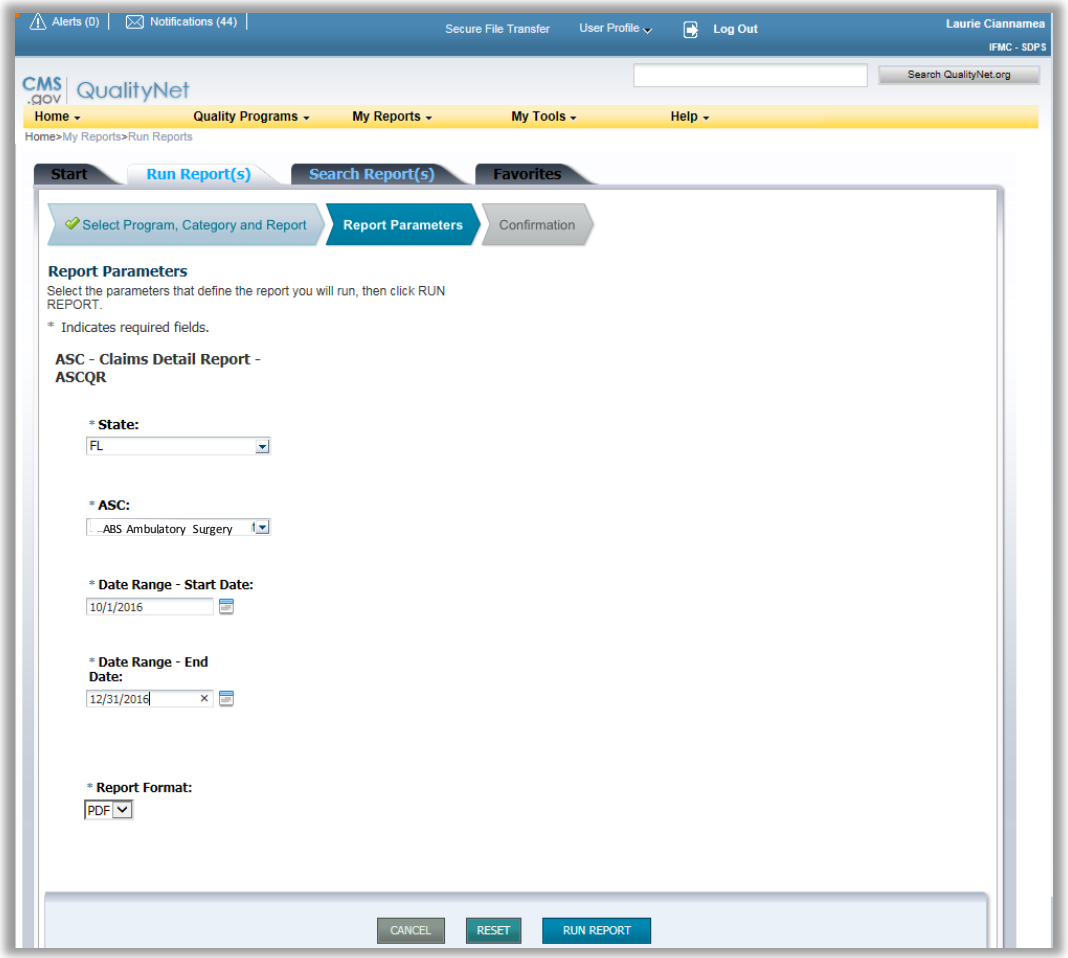
Running Reports (2 of 4)



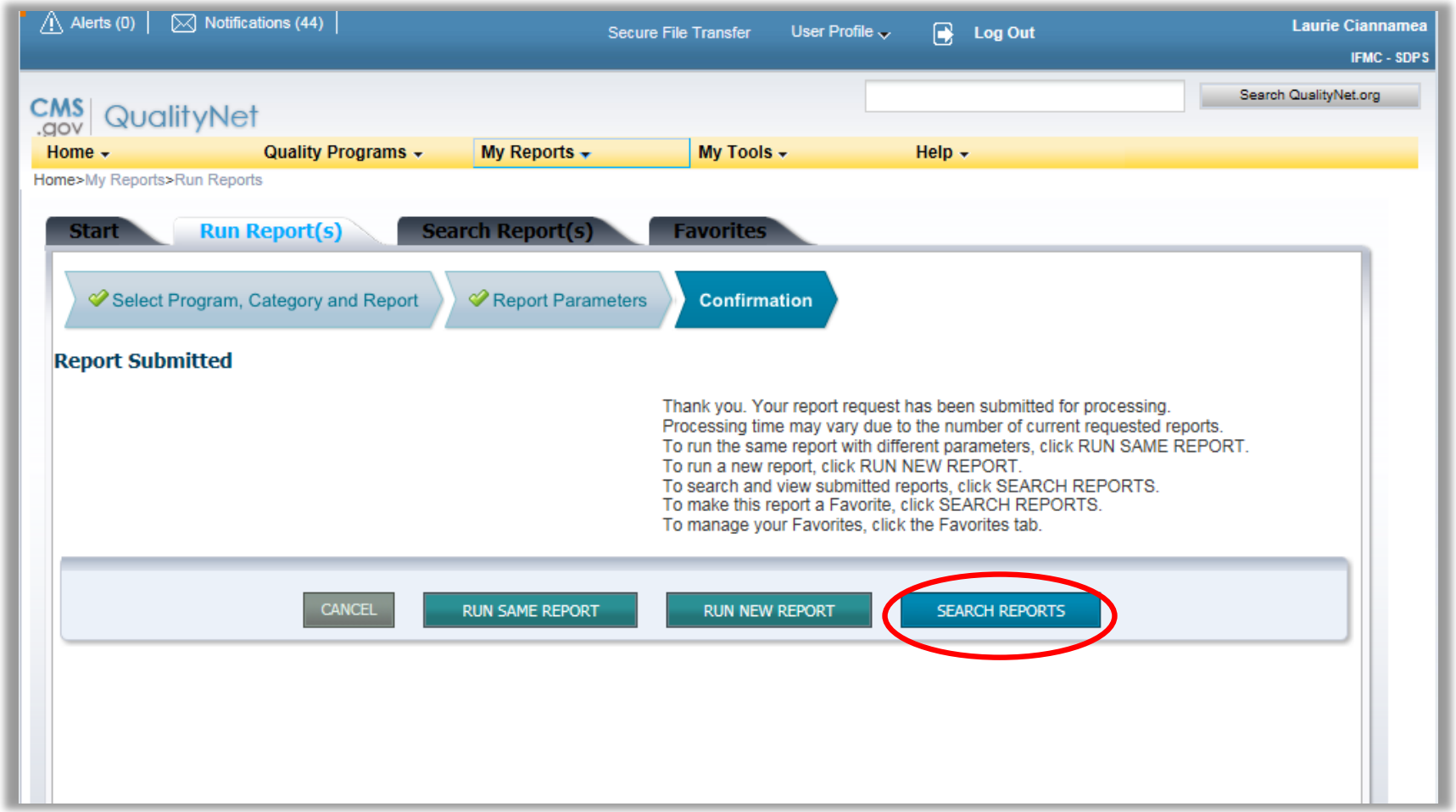
Running Reports (3 of 4)



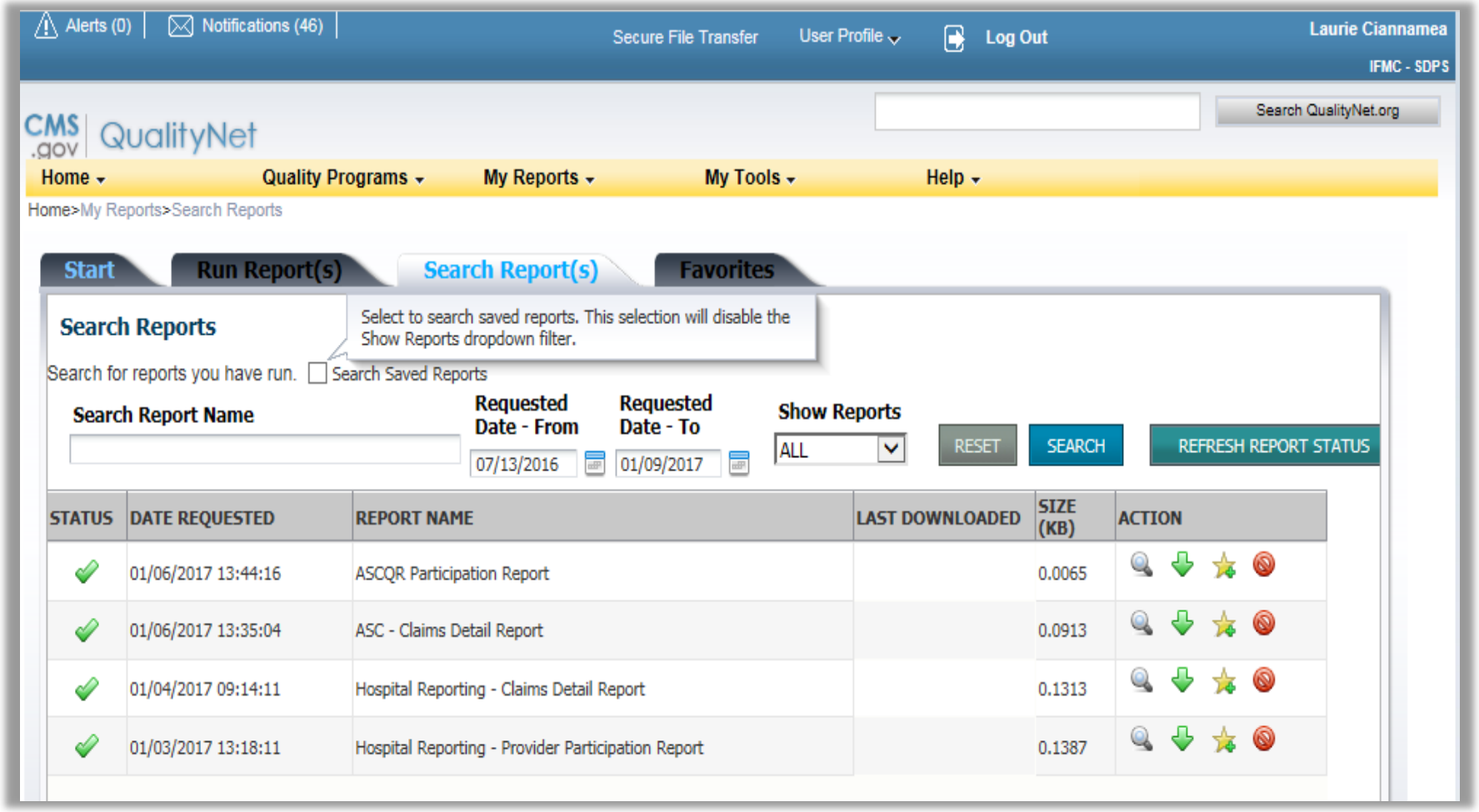
Running Reports (4 of 4)



Viewing Reports (1 of 2)



Viewing Reports (2 of 2)



Claims Detail Report

Report Run Date: 01/06/2017

ASC Claims Detail Report
Date of Service Range: 10/01/2016 - 12/31/2016

Data As Of: 01/05/2017

1234567890, ABC Ambulatory Surgery Center

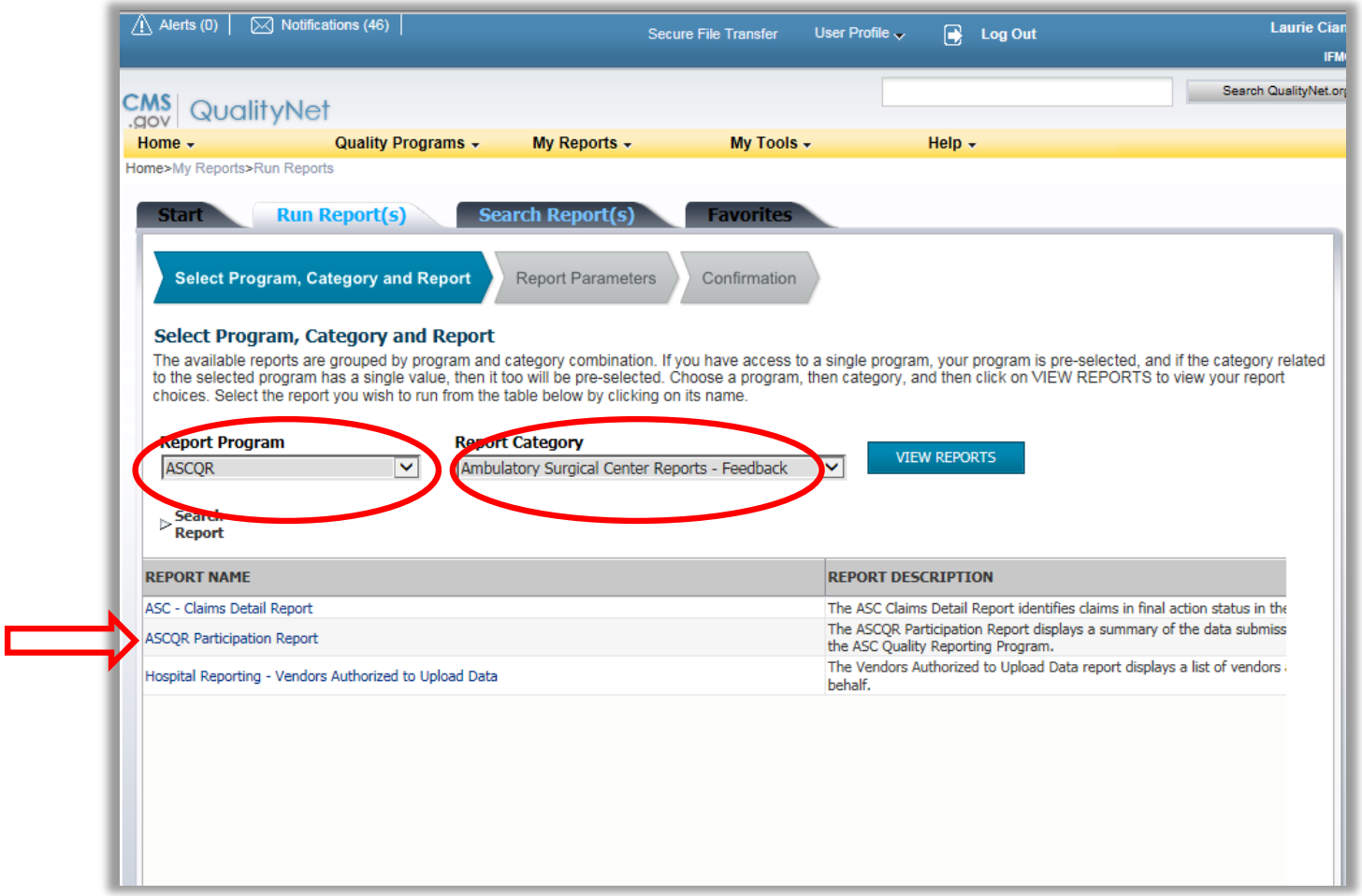
Patient's Medicare Health Insurance Claim Number (HICN)	Claim Receipt Date	Date of Service	Quality Data Codes	Last Name	First Name	Date of Birth	Claim Control Number (ICN)
XXXXXXXX	10/14/2016	10/12/2016	G8918, G8907	Cortez	Hernan	11/29/1940	XXXXXXXX
XXXXXXXX	10/14/2016	10/12/2016	G8918, G8907	Smith	John	06/11/1938	XXXXXXXX
XXXXXXXX	10/14/2016	10/11/2016	G8918, G8907	Lewis	Clark	10/14/1949	XXXXXXXX
XXXXXXXX	10/14/2016	10/12/2016	G8918, G8907	Drake	Francis	07/27/1950	XXXXXXXX
XXXXXXXX	10/14/2016	10/11/2016	G8907, G8918	Jones	Davy	10/10/1949	XXXXXXXX

What Went Wrong?

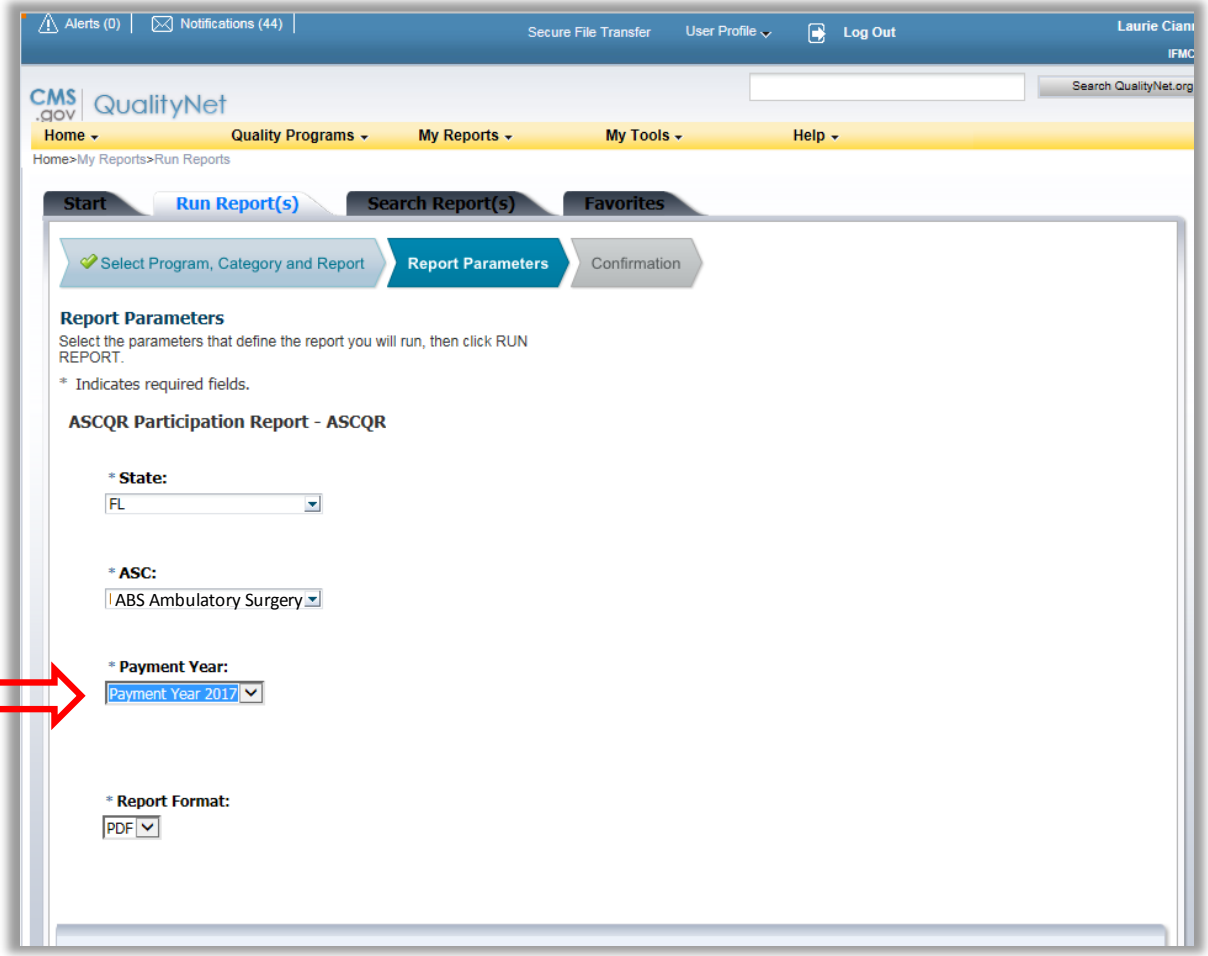
To research claims without QDCs:

- Ensure that QDCs were on the claim when it was submitted.
- Check with your software vendor regarding processing of zero charge line items.
- Be sure your clearinghouse is receiving and transmitting the QDCs.
- Verify the Medicare Administrative Contractor (MAC) is processing the QDCs along with the claims.

Running the Participation Report



Report Parameters



Participation Report

Report Run Date: 01/06/2017

ASCQR Participation Report

Payment Year: 2017

State: FL

National Provider Identifier (NPI): 1234567890

ASC Name: ABC Ambulatory Surgery Center

ASC City: Tampa

Active QualityNet Security Administrator: Yes

Participation Status: Participating

Total Number of Claims with QDC[1]:	193
Total Number of Claims:	199
Data Completeness:	97%
CMS Required Threshold:	50%

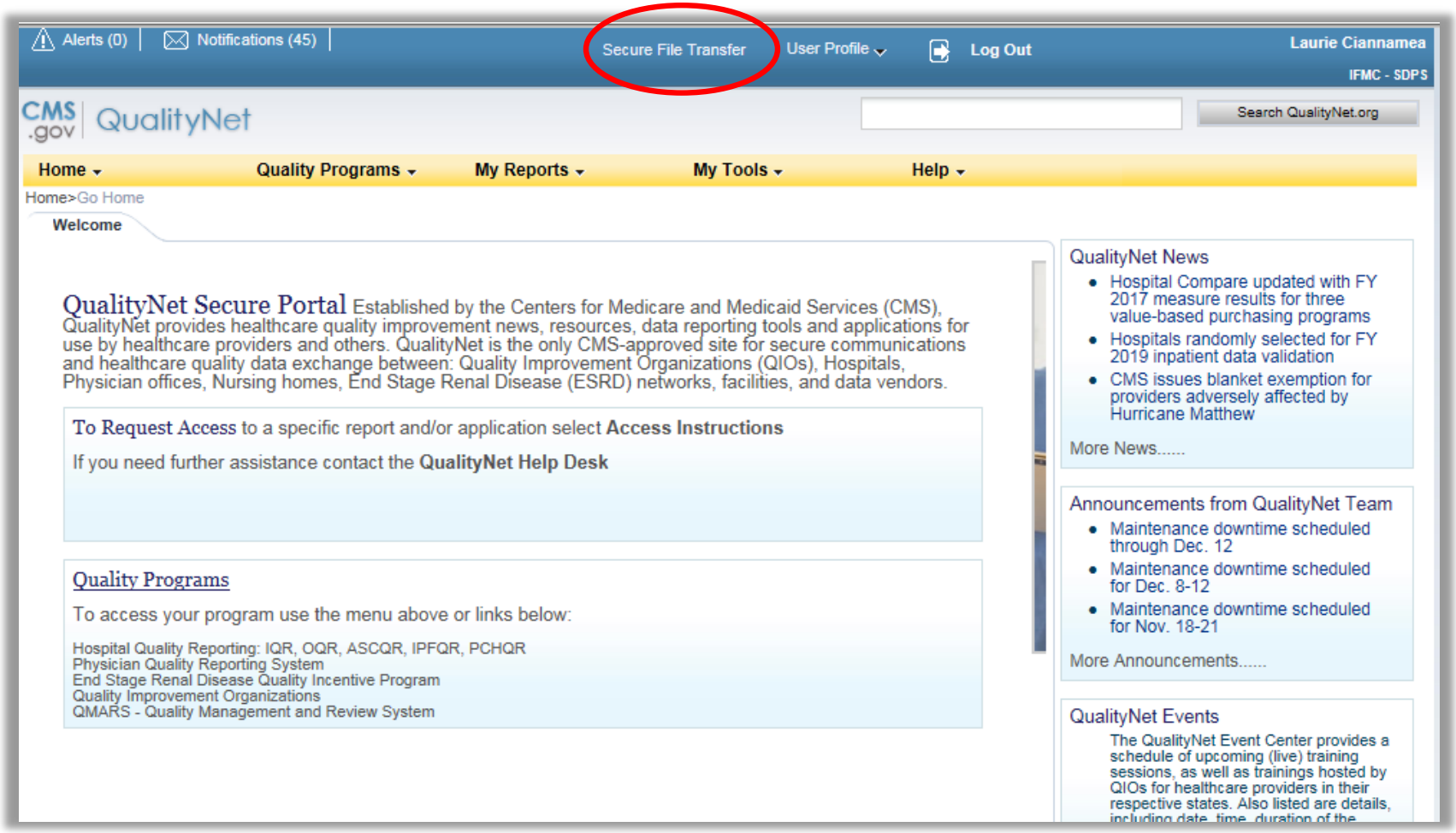
Web - Based Measures:	**Submission Status:**
ASC-6: Safe Surgery Checklist Use	Yes
ASC-7: ASC Facility Volume Data	Yes
ASC-9: Endoscopy: Follow-up Interval for Average Risk Patients	Yes
ASC-10: Endoscopy: Interval for Patients with History of Polyps	Yes
ASC-11: Cataracts: Improvement in Patient's Visual Function (Voluntary)	Yes
HAI Measures:	
ASC-8: Influenza Vaccination Coverage among Healthcare Personnel	Yes

Quarter 2- 2015 Dates of Service

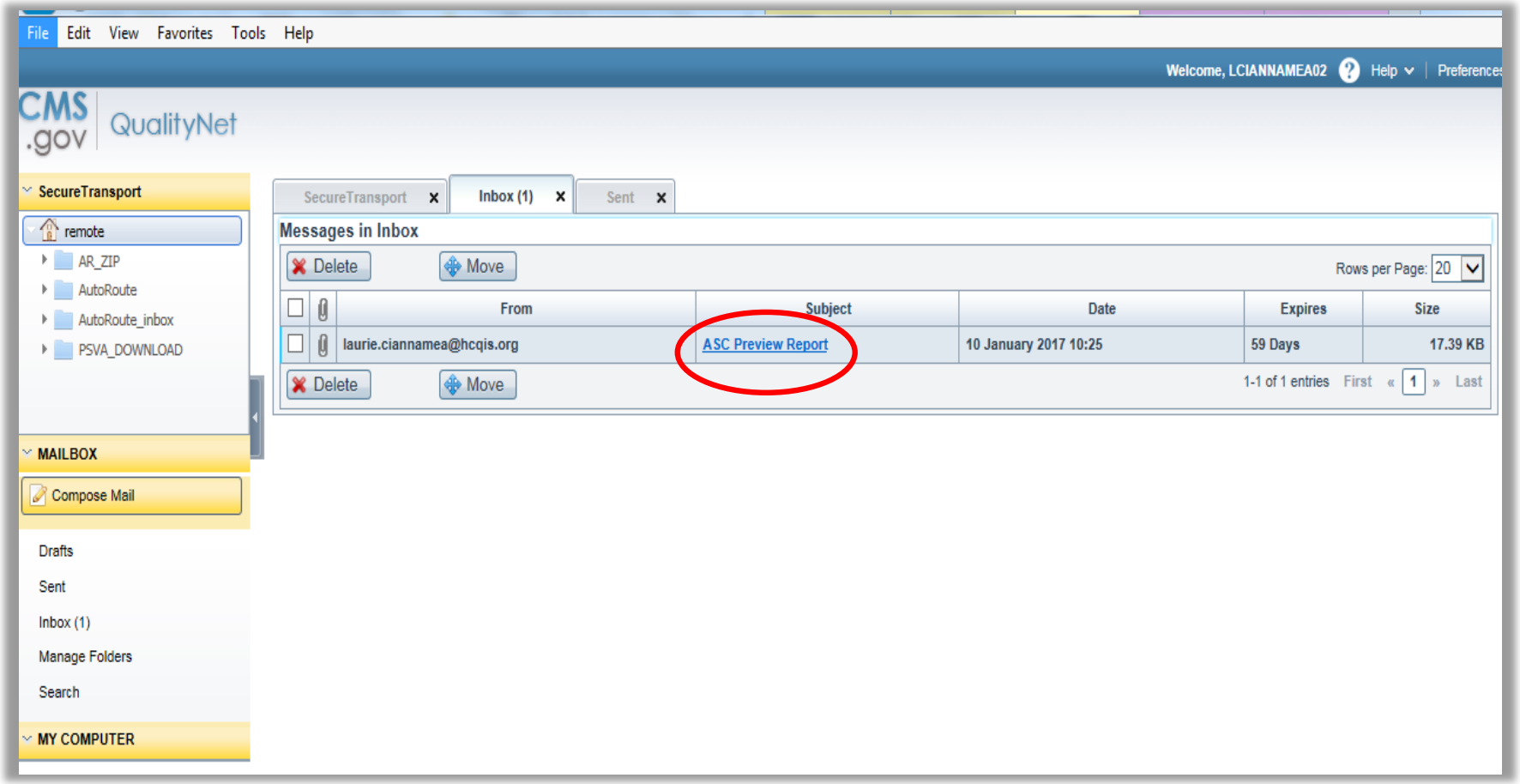
Claims-Based Measures	Numerator	Denominator	Measure Value	
ASC-1: Patient Burn	0	59	0.000	Per 1000 Admissions
ASC-2: Patient Fall	0	59	0.000	Per 1000 Admissions
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	0	59	0.000	Per 1000 Admissions
ASC-4: Hospital Transfer/Admission	0	59	0.000	Per 1000 Admissions
ASC-5: Prophylactic Intravenous (IV) Antibiotic Timing	4	5	80%	

Studying the Maps

Accessing Your Mailbox



Receiving Secure Mail



Preview Report

Ambulatory Surgical Center Preview Report
1234567890, ABC Ambulatory Surgery Center
Claims-Based Measures in CY2015 (per 1,000 Claims)

	2015				
Measure	Numerator	Denominator	Rate	National Rate	State Rate
ASC-1 Patient Burn	0	377	0	0.181	0.18
ASC-2 Patient Fall	0	377	0	0.095	0.094
ASC-3 Wrong Site/ Side/Patient/ Procedure/Implant	0	377	0	0.022	0.029
ASC-4 Hospital Transfer/Admission	0	377	0	0.41	0.338
ASC-5 Prophylactic Intravenous Antibiotic Timing	282	282	1000	956.44	911.88

Web-Based Measures in Calendar Years 2015 (Reported in 2016)

		ASC-7 (Data on Selected Surgical Procedure)											
	ASC-6	Respiratory	Eye	Genitourinary	Multi-System	Musculoskeletal	GI	Nervous	Skin	ASC-8	ASC-9	ASC-10	ASC-11
Facility	Yes	0	0	0	0	2167	0	1697	2	N/A(5)	N/A(5)	N/A(5)	N/A(5)
State	100.00%	243	1935	1085	152	961	3670	1971	140	70.45%	80.82%	77.52%	97.78%
National	99.81%	206	1745	452	274	816	3552	1751	146	76.13%	80.98%	79.90%	96.54%

Footnote Legend:

1. The number of cases is too few to report (Denominators greater than 0 and less than 11 will display on the Preview Report, but will not be reported on ASC Compare.)

5. Results are not available for this reporting period (Applied when no data are available for display for the measure).

Claims Detail Report for ASC-12

Table 1. Patient-Level Information for 7-Day Risk-Standardized Hospital Visit Rate After Outpatient Colonoscopy
FACILITY NAME
Performance period: January 1, 2016 through August 31, 2016
Do NOT email the contents of this file. This file contains Personally Identifiable Information (PII) and Protected Health Information (PHI). Emailing these data is a security and HIPAA violation. When referring to the data on this document only use the ID numbers from Column A.

ID Number	Facility Provider ID [a]	HICNO	Medical Record Number [b]	Beneficiary DOB	Date of Colonoscopy	In Measure Calculation	Inclusion/ Exclusion Reason [c]	Unplanned Hospital Visit within 7 Days	Type of Hospital Visit
4	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
5	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
6	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
7	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
8	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
9	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
10	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
11	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
12	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
13	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
14	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
15	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
16	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
17	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
18	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
19	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
20	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
21	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
22	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
23	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
24	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
25	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
26	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
27	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
28	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
29	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
30	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A
31	9999999999	999999999A	--	99/99/9999	99/99/9999	YES	0	NO	N/A

Mid-Year Report

Medicare Part B FFS ASC claims from January 1 - May 13, 2016 comprise the QDC data source for calendar year (CY) 2018 payment determinations.

Data submission for ASC-6, ASC-7, ASC-8, ASC-9, and ASC-10 aftects CY 2017 payment determinations.

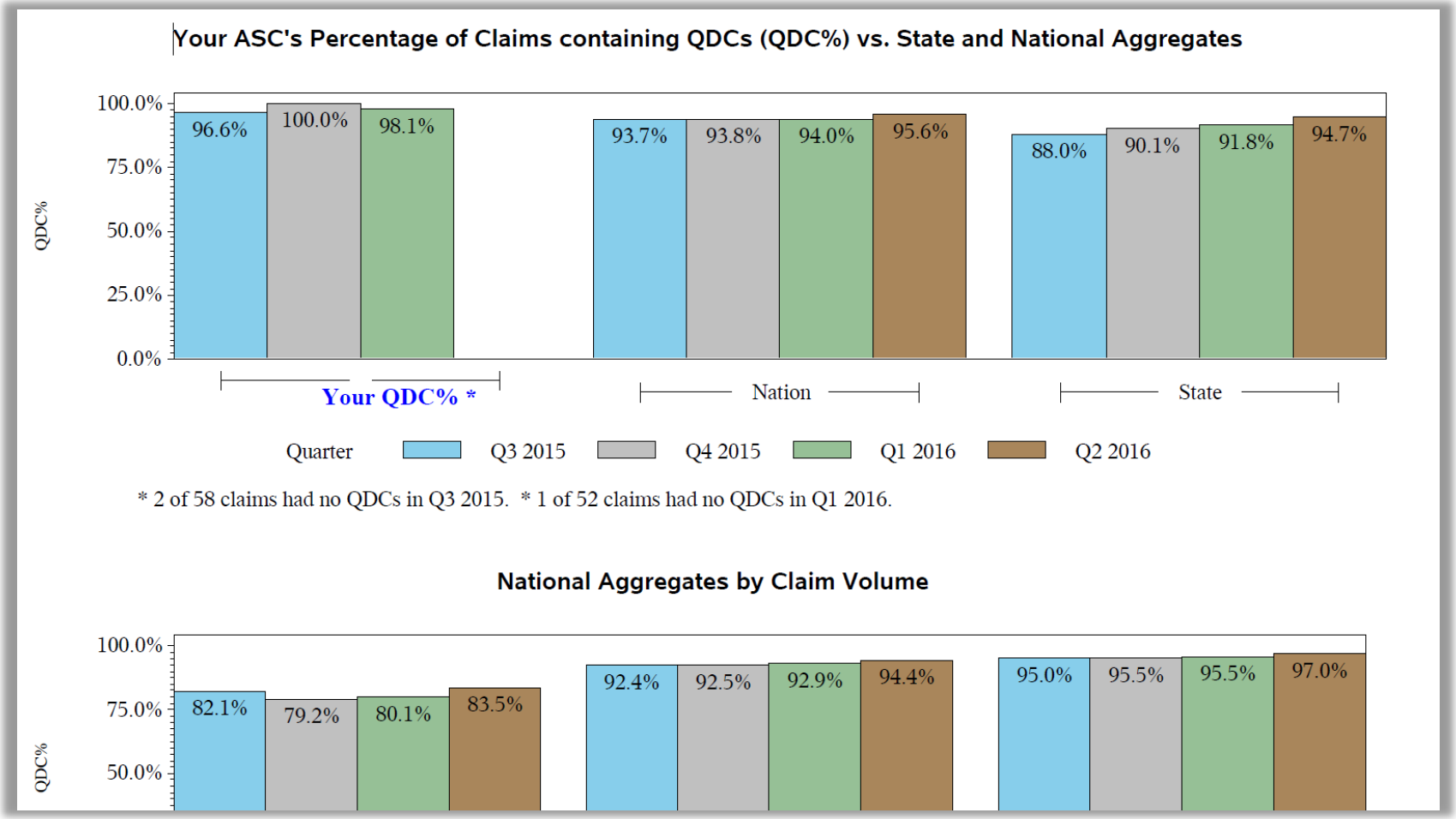
Your ASC Quality Reporting Information

NPI Number	State	CMS Region	ASC Specialty	# Claims 2016	# QDCs 2016	2016 QDC %	2015 QDC Rate	ASC-6* ASC-7* ASC-9* ASC-10*	ASC-8** Submitted
1234567	GA	4	Multiple	52	51	98.08%	98.16%	No	No

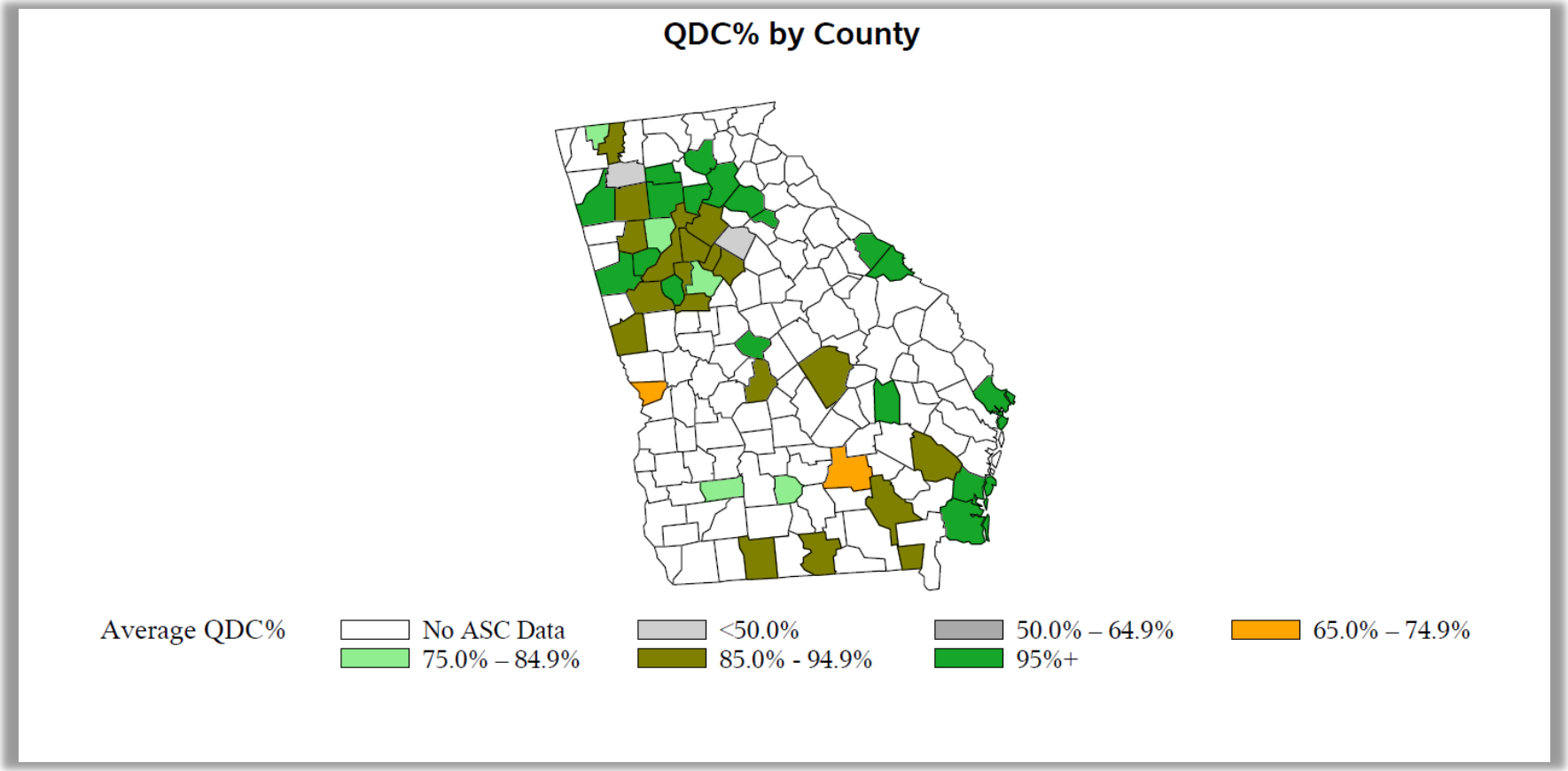
*Data are submitted via the QualityNet Secure Portal (Due August 15, 2016); ASC-11 submission is not included.

**Data submitted to the National Healthcare Safety Network (NHSN) was due May 15, 2016.

Mid-Year Report: QDC Percentage



Mid-Year Report: By County



Mid-Year Report: Comparison

Measure Rates per 1,000 Claims

	Q3 2015			Q4 2015			Q1 2016			Q2 2016		
Measure	Claims with QDCs	Rate*	National Rate**	Claims with QDCs	Rate*	National Rate**	Claims with QDCs	Rate*	National Rate**	Claims with QDCs	Rate*	National Rate**
ASC-1	56	0.000	0.180	55	0.000	0.198	51	0.000	0.223	.	.	0.156
ASC-2	56	0.000	0.080	55	0.000	0.089	51	0.000	0.084	.	.	0.081
ASC-3	56	0.000	0.025	55	0.000	0.027	51	0.000	0.022	.	.	0.018
ASC-4	56	0.000	0.390	55	0.000	0.360	51	0.000	0.375	.	.	0.317
ASC-5	41	1000.0	954.03	43	1000.0	956.71	40	1000.0	966.06	.	.	967.38

*** Your ASC's measure rate per 1,000 claims; ** National rate per 1,000 claims.**

National Rates per 1,000 Claims by Specialty

	ASC Specialty	# Facilities	ASC-1	ASC-2	ASC-3	ASC-4	ASC-5
Q3 2015	Eye	847	0.146	0.064	0.032	0.128	593.20
	GI	951	0.185	0.068	0.011	0.567	578.38
	Multiple	2,011	0.208	0.077	0.027	0.488	974.21
	Nervous	330	0.073	0.132	0.044	0.102	843.22

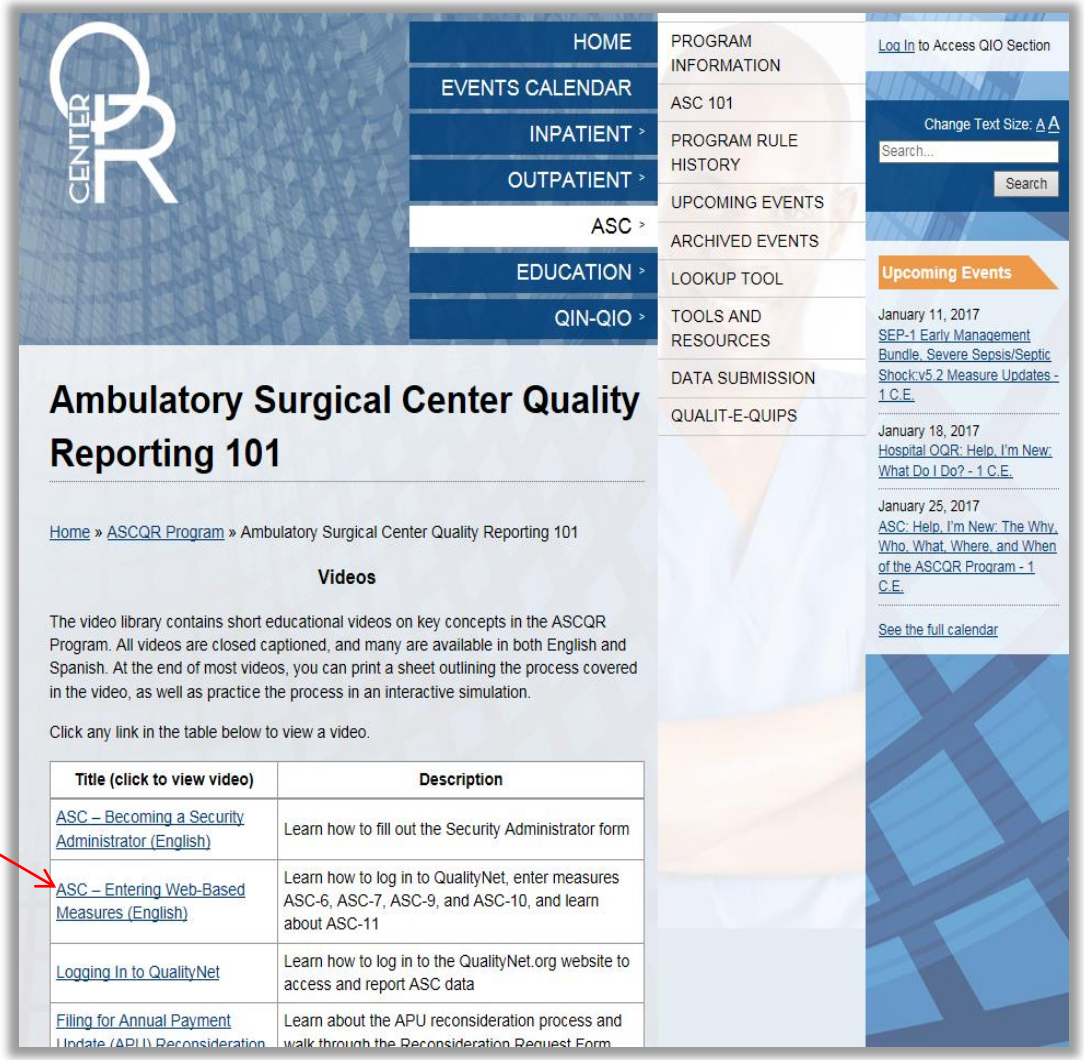
www.qualityreportingcenter.com

Using Navigational Tools

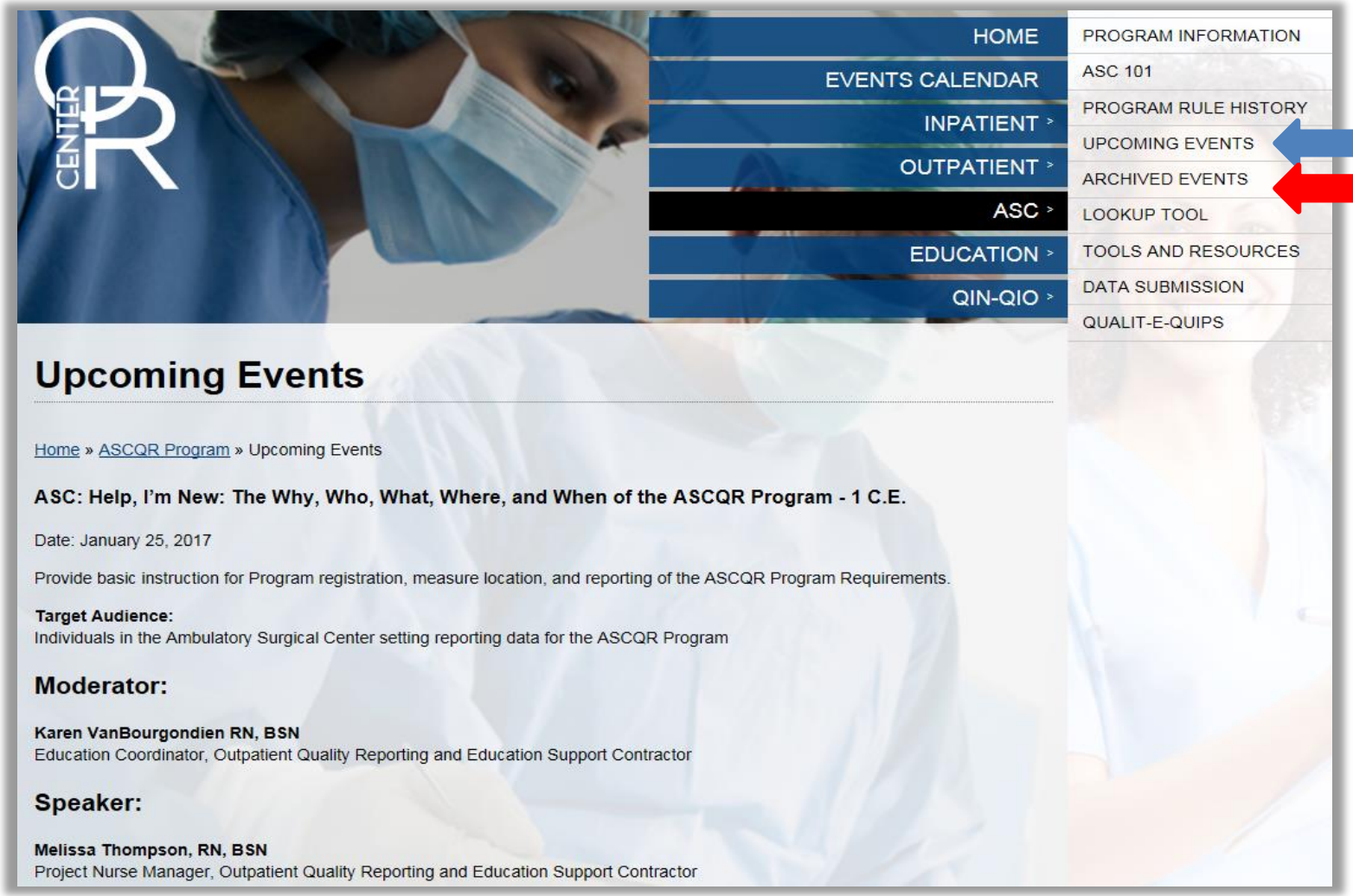
From the Home Page

www.qualityreportingcenter.com

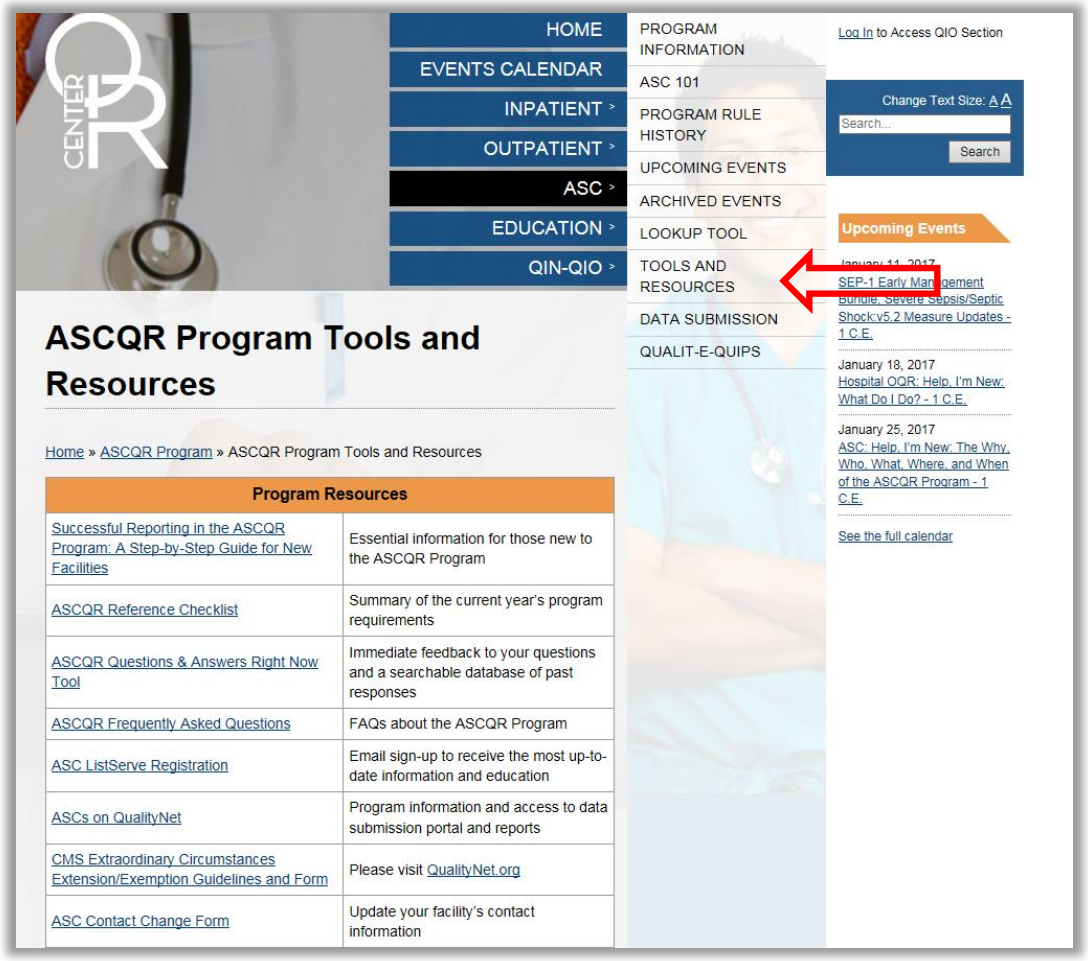
ASC 101 Tab


HOME
EVENTS CALENDAR
INPATIENT
OUTPATIENT
ASC
EDUCATION
QIN-QIO
PROGRAM INFORMATION
ASC 101
PROGRAM RULE HISTORY
UPCOMING EVENTS
ARCHIVED EVENTS
LOOKUP TOOL
TOOLS AND RESOURCES
DATA SUBMISSION
QUALIT-E-QUIPS
Log In to Access QIO Section
Change Text Size: A A
Search...
Search
Upcoming Events
January 11, 2017
SEP-1 Early Management Bundle, Severe Sepsis/Septic Shock:v5.2 Measure Updates - 1 C.E.
January 18, 2017
Hospital OQR: Help, I'm New: What Do I Do? - 1 C.E.
January 25, 2017
ASC: Help, I'm New: The Why, Who, What, Where, and When of the ASCQR Program - 1 C.E.
See the full calendar
Ambulatory Surgical Center Quality Reporting 101
Home » ASCQR Program » Ambulatory Surgical Center Quality Reporting 101
Videos
The video library contains short educational videos on key concepts in the ASCQR Program. All videos are closed captioned, and many are available in both English and Spanish. At the end of most videos, you can print a sheet outlining the process covered in the video, as well as practice the process in an interactive simulation.
Click any link in the table below to view a video.
Title (click to view video)
Description
ASC – Becoming a Security Administrator (English)
Learn how to fill out the Security Administrator form
ASC – Entering Web-Based Measures (English)
Learn how to log in to QualityNet, enter measures ASC-6, ASC-7, ASC-9, and ASC-10, and learn about ASC-11
Logging In to QualityNet
Learn how to log in to the QualityNet.org website to access and report ASC data
Filing for Annual Payment
Learn about the APU reconsideration process and

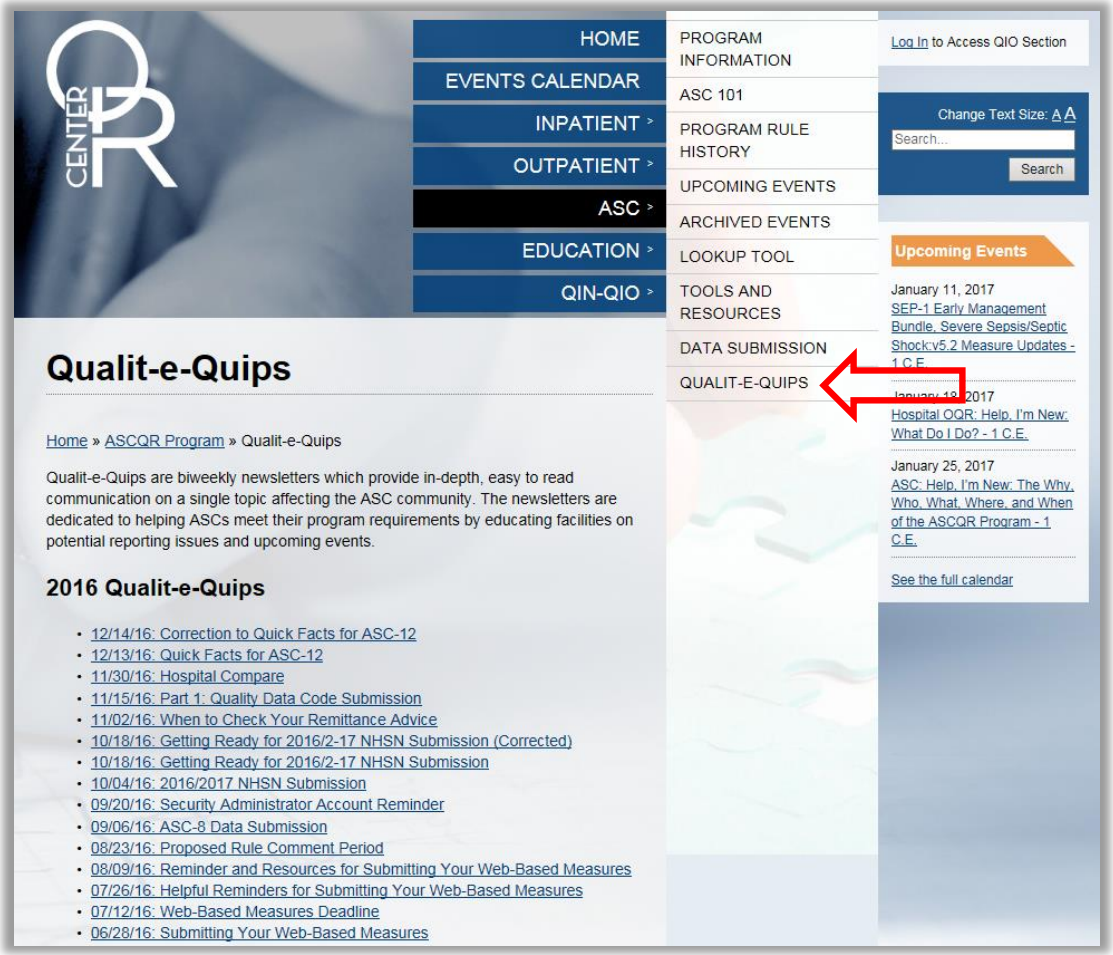
Educational Opportunities



Tools and Resources



Bi-Weekly Newsletter



Avoiding the Sand Bars

Monitoring QDC Submission

On the Remittance Advice (RA) look for:

- A billable charge and a minimum of 2 QDCs on every claim
- Facility's NPI on the claim, not the physician's NPI
- Place of service code 24
- A remark code of N620 or N572

Changes in Software

Make sure your billing software and/or electronic health record is capable of processing QDCs.

- Zero amount charge
- Confirm that any changes in your software do not prevent transmission of QDCs

Changes in Personnel

Not having someone available to report your data is not an acceptable reason to miss a deadline.

- Always have a minimum of two active QualityNet Security Administrators
- Always have at least two users with active NHSN accounts

Look-Up Tools

- Located on the support contractor website: www.qualityreportingcenter.com
- Allows you to check:
  - Status of measures entered using a web-based tool
  - Availability of a Claims Detail Report for the ASC-12 measure
  - The CCN for your facility

Journey to Success

Here is what we have covered:

- Measures
- Participating in the program
- Reports
- Helpful tools

Here’s to a successful journey!

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.

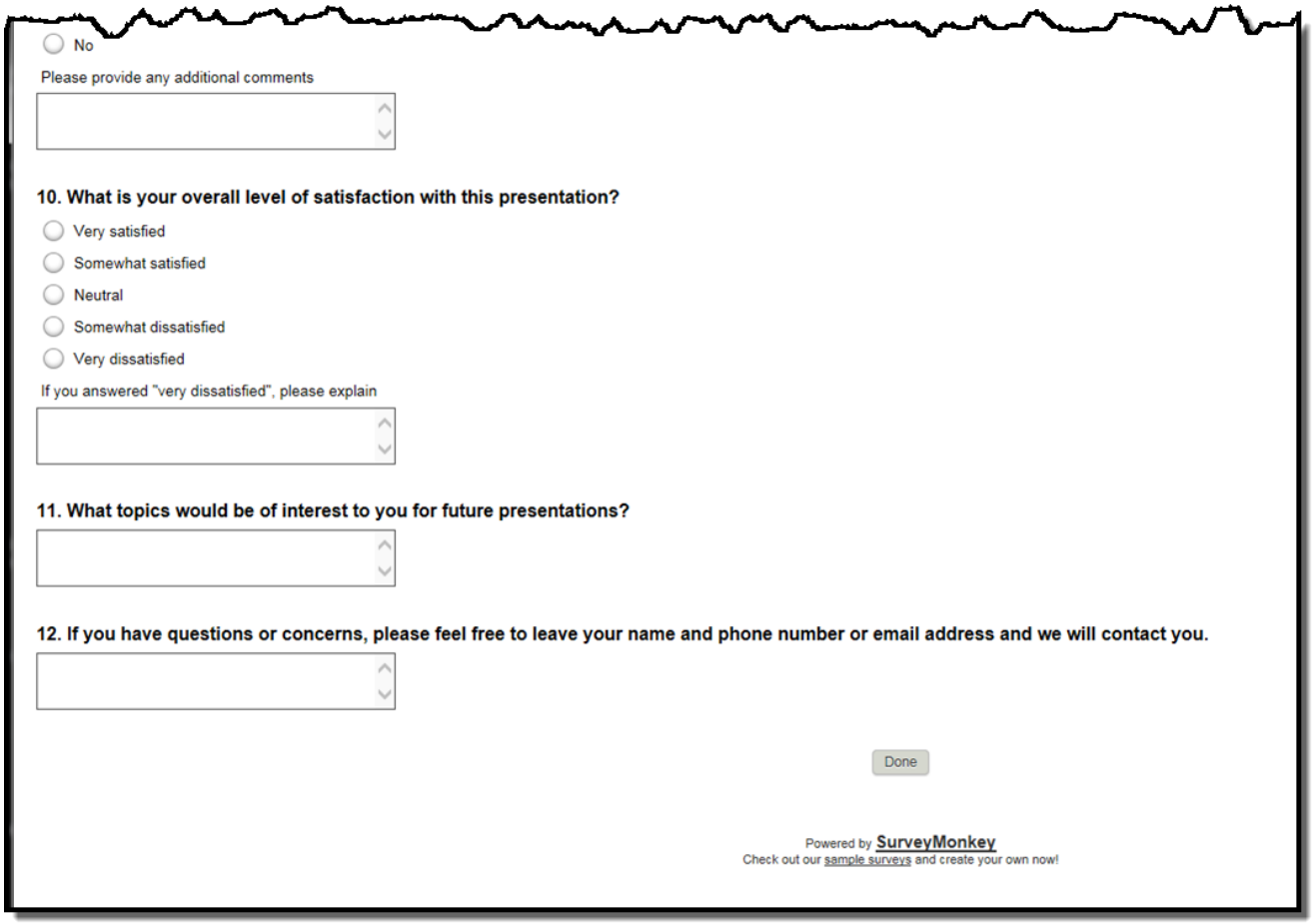
CE Credit Process

- 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



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

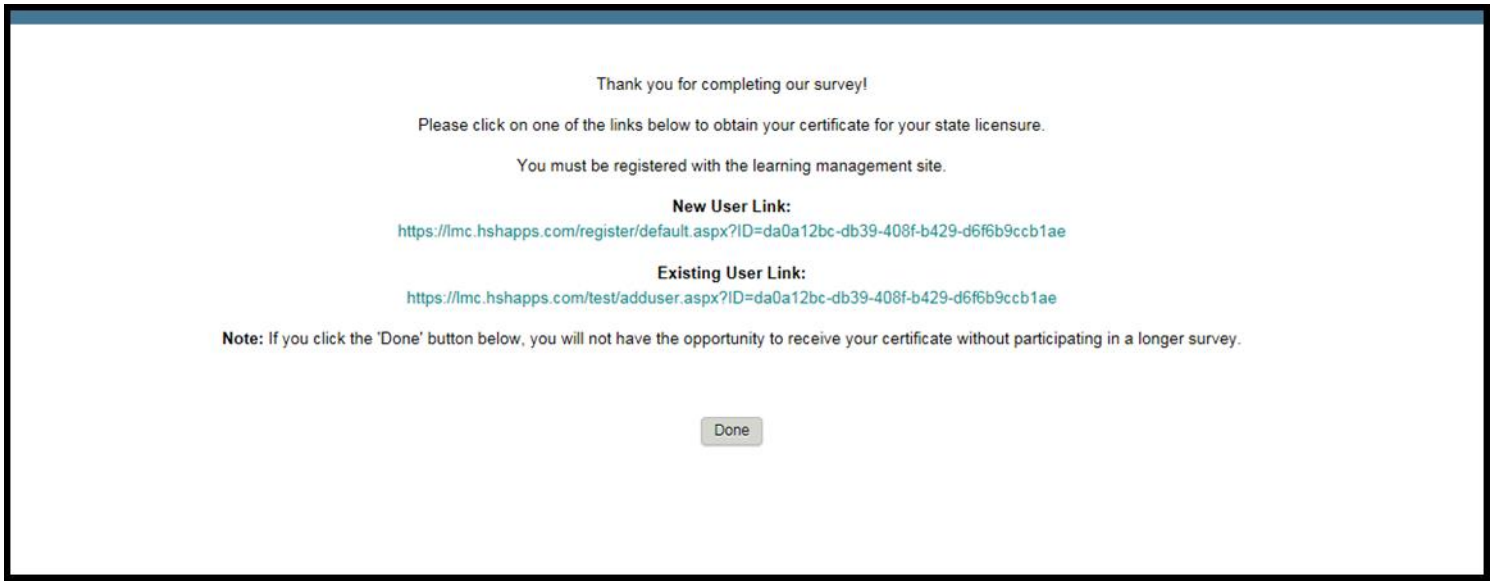
11. What topics would be of interest to you for future presentations?

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

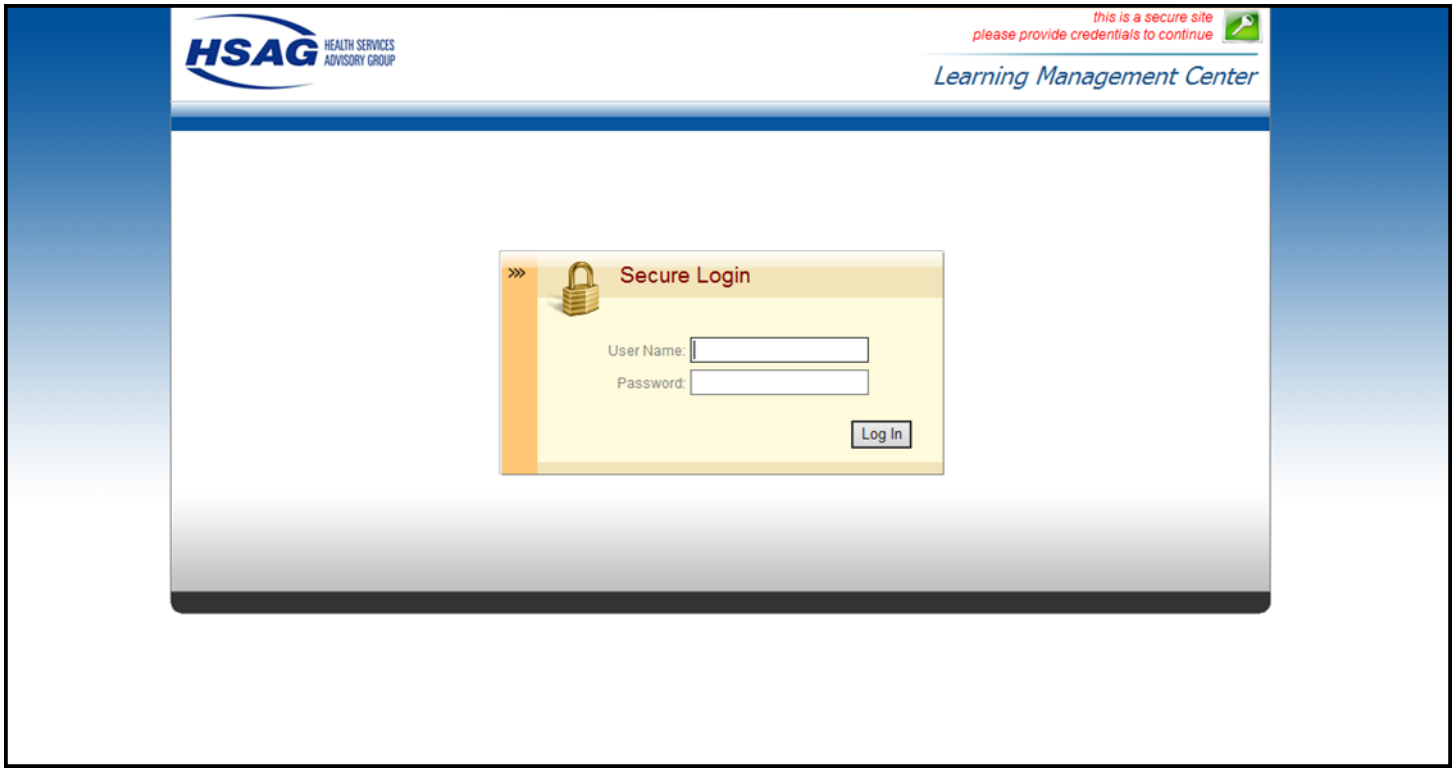
Powered by SurveyMonkey
Check out our sample surveys and create your own now!

CE Credit Process



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

Or

- Call the Support Contractor at 866.800.8756.