

Welcome!

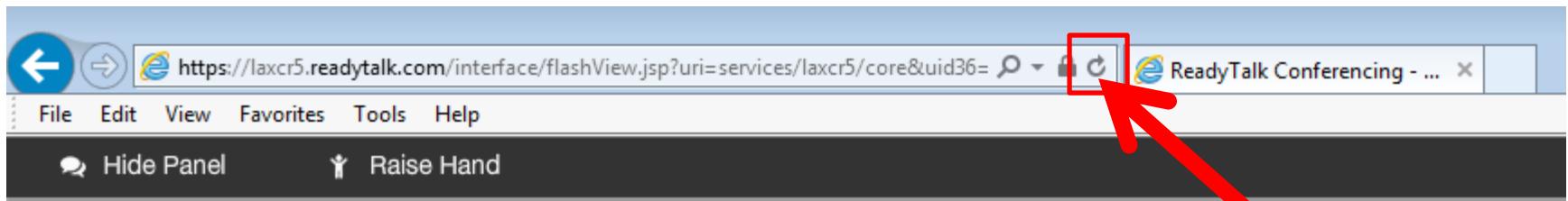
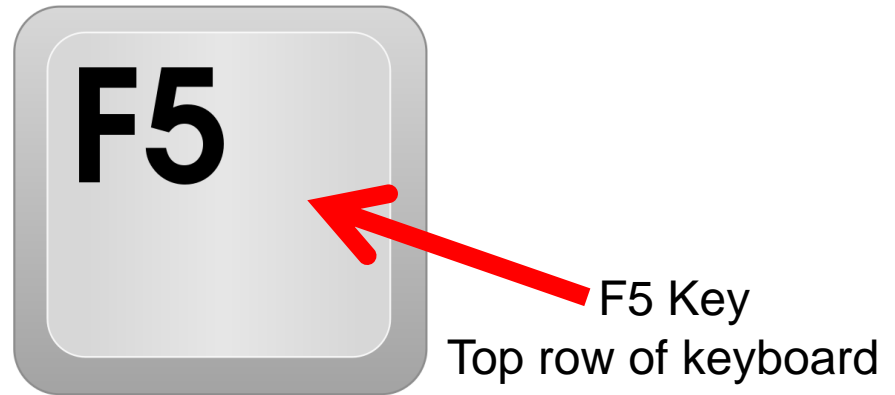
- Presentation slides can be downloaded from www.qualityreportingcenter.com under Upcoming Events on the right-hand side of the page.
- Audio for this event is available via ReadyTalk® Internet streaming. No telephone line is required.
- Computer speakers or headphones are necessary to listen to streaming 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**

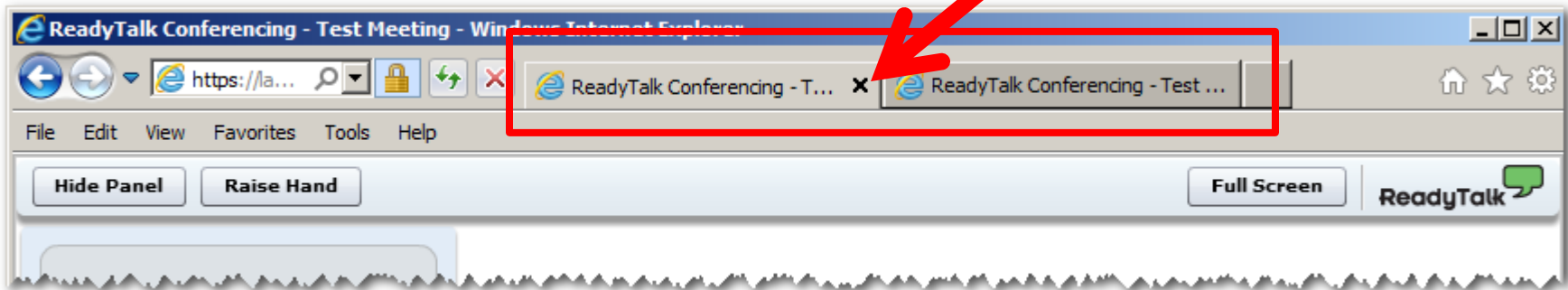


Location of buttons

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.



A screenshot of a web browser window. The window title bar shows "Hide Chat", "Return Home", "Full Screen", and "Ready100". The main content area has a light gray background. At the top center is the CMS logo (Centers for Medicare & Medicaid Services). Below the logo, the text "Welcome to Today's Event" is displayed in a large, bold, blue font. A horizontal yellow line separates this from the bottom section, which contains the text "Thank you for joining us today! Our event will start shortly." in a smaller, italicized blue font. On the left side of the window, there is a vertical white chat box. At the bottom of the chat box, there is a text input field with the placeholder "Type questions here." and a "Send" button. The text "Chat with Presenter" is visible above the input field.

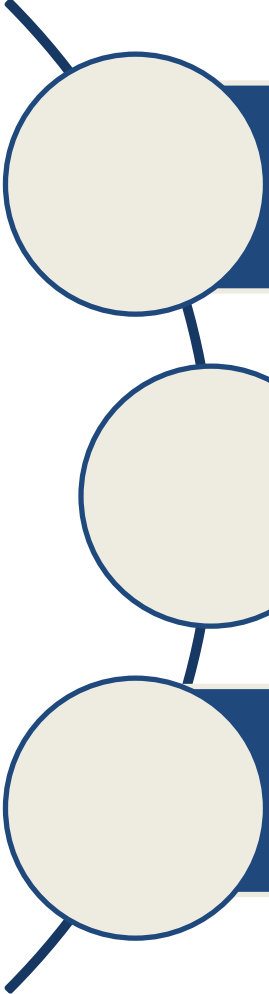


Website Walk-through: Tools and Resources for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program

Pam Harris, RN, BSN
Project Coordinator
ASCQR Program Support Contractor

April 25, 2018

Announcements



May 15, 2018: Measures submitted via a web-based tool are due to QualityNet and the National Healthcare Safety Network (NHSN).

Please keep your QualityNet and NHSN passwords current by logging in every 90 days.

Sign up for the ListServe on QualityNet.org.

Learning Objectives

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

- Locate at least five resources available for the reporting of this program.
- Identify where to find archived webinars.
- List at least two places to find data publicly displayed.

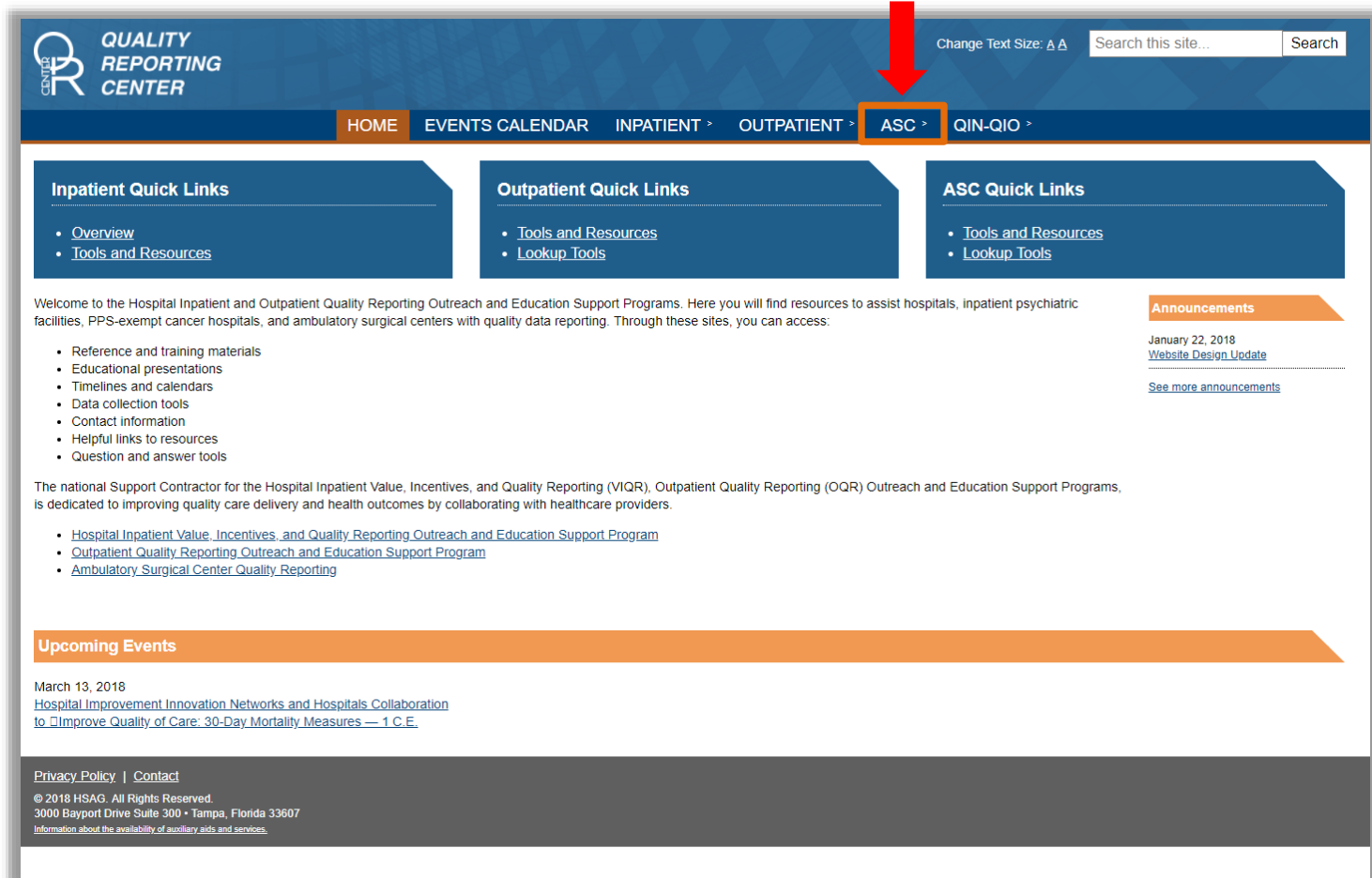
WEBSITE

The background image shows a person's hands typing on a laptop keyboard. The screen is filled with various digital icons and data visualizations, including a network diagram, a bar chart, a line graph, and several hexagonal icons containing symbols like a globe, a gear, a dollar sign, and a question mark. The overall theme is technology and data analysis.

Quality Reporting Center Website

Home Page

www.qualityreportingcenter.com



QUALITY REPORTING CENTER

Change Text Size: [A](#) [A](#) Search this site...

[HOME](#) [EVENTS CALENDAR](#) [INPATIENT >](#) [OUTPATIENT >](#) **[ASC >](#)** [QIN-QIO >](#)

Inpatient Quick Links

- [Overview](#)
- [Tools and Resources](#)

Outpatient Quick Links

- [Tools and Resources](#)
- [Lookup Tools](#)

ASC Quick Links

- [Tools and Resources](#)
- [Lookup Tools](#)

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- 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 Support Program](#)
- [Outpatient Quality Reporting Outreach and Education Support Program](#)
- [Ambulatory Surgical Center Quality Reporting](#)

Announcements

January 22, 2018
[Website Design Update](#)

[See more announcements](#)

Upcoming Events

March 13, 2018
[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

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[Information about the availability of auxiliary aids and services.](#)

ASC Options

The screenshot displays the Quality Reporting Center website interface. At the top left is the logo for the Quality Reporting Center. To the right of the logo is the text "QUALITY REPORTING CENTER". Further right is a search bar with the placeholder text "Search this site..." and a "Search" button. Below the search bar is a navigation menu with the following items: HOME, EVENTS CALENDAR, INPATIENT >, OUTPATIENT >, ASC >, and QIN-QIO >. The "ASC >" item is highlighted, and a dropdown menu is visible, listing the following options: PROGRAM INFORMATION, ASC 101, PROGRAM RULE HISTORY, UPCOMING EVENTS, ARCHIVED EVENTS, DATA DASHBOARD, Lookup Tools, AGENT (VENDOR) AUTHORIZATION FORMS, TOOLS AND RESOURCES, DATA SUBMISSION, and QUALIT-E-QUIPS. Below the navigation menu, there are two "Quick Links" boxes: "Inpatient Quick Links" with links for Overview and Tools and Resources, and "Outpatient Quick Links" with links for Tools and Resources and Lookup Tools. Below these boxes is a welcome message and a list of resources available on the site.

Change Text Size: A A

Search this site... Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > ASC > QIN-QIO >

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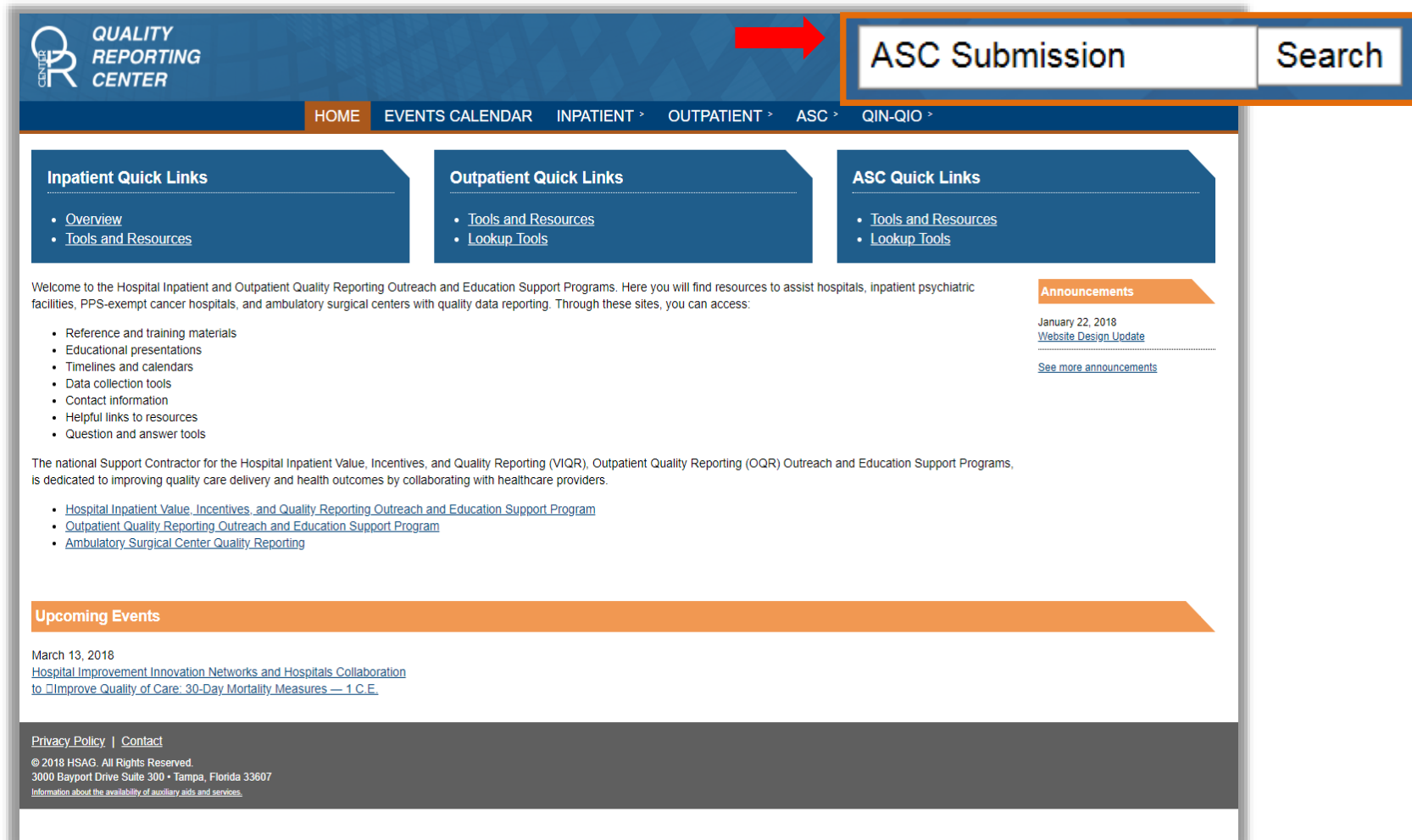
Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Center. Here you will find resources to assist acute care hospitals, critical access hospitals, inpatient psychiatric facilities, exempt cancer hospitals, and ambulatory surgical centers with quality data reporting. Through these site access:

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ASC >

- PROGRAM INFORMATION
- ASC 101
- PROGRAM RULE HISTORY
- UPCOMING EVENTS
- ARCHIVED EVENTS
- DATA DASHBOARD
- Lookup Tools
- AGENT (VENDOR) AUTHORIZATION FORMS
- TOOLS AND RESOURCES
- DATA SUBMISSION
- QUALIT-E-QUIPS

Site Search



The screenshot shows the Quality Reporting Center website. At the top left is the logo for the Quality Reporting Center. To its right is a search bar with the text "ASC Submission" and a "Search" button. A red arrow points from the logo area towards the search bar. Below the search bar is a navigation menu with links for HOME, EVENTS CALENDAR, INPATIENT >, OUTPATIENT >, ASC >, and QIN-QIO >. The main content area is divided into three columns: "Inpatient Quick Links" with links for Overview and Tools and Resources; "Outpatient Quick Links" with links for Tools and Resources and Lookup Tools; and "ASC Quick Links" with links for Tools and Resources and Lookup Tools. Below these columns is a welcome message and a list of resources. To the right of the welcome message is an "Announcements" section with a link for a website design update. At the bottom of the page is an "Upcoming Events" section with a link for a hospital improvement innovation network collaboration. The footer contains a privacy policy and contact link, copyright information for 2018 HSAG, and a link for auxiliary aids and services.

QUALITY REPORTING CENTER

ASC Submission Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > ASC > QIN-QIO >

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Search Results

The screenshot shows the Quality Reporting Center website interface. At the top left is the logo for the Quality Reporting Center. To the right of the logo is the text "QUALITY REPORTING CENTER". Further right is a search bar with the text "Search this site..." and a "Search" button. Below the search bar is a navigation menu with links for "HOME", "EVENTS CALENDAR", "INPATIENT >", "OUTPATIENT >", "ASC >", and "QIN-QIO >".

The main content area is titled "Search Results for 'ASC Submission'". Below this title is a list of search results, each with a blue underlined link:

- [Event: ASC: The Ins and Outs of Measure Submission Via a Web-Based Tool](#)
- [ASCQR Program Tools and Resources](#)
- [Lookup Tools \(PY 2018\)](#)
- [Data Dashboard](#)
- [Agent \(Vendor\) Authorization Forms](#)
- [Lookup Tools \(Archive\)](#)
- [Lookup Tools \(PY 2016\)](#)
- [Lookup Tools \(PY 2017\)](#)
- [Hospital OQR Program Tools and Resources](#)
- [Ambulatory Surgical Center Quality Reporting 101](#)

A red arrow points to the "Ambulatory Surgical Center Quality Reporting 101" link.

On the right side of the page, there are several additional elements:

- A link: [Log In to Access QIO Section](#)
- A search bar: "Search this page..."
- An "Upcoming Events" section with a list of events:
 - March 27, 2018: [Improving the Patient Experience of Care — 1.5 C.E.](#)
 - March 28, 2018: [Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM — 1 C.E.](#)
 - March 29, 2018: [Hospital Readmissions Reduction Program: Early Look Hospital-Specific Reports — 1 C.E.](#)
- A link: [See the full calendar](#)
- A "CMS Tweets" section.

Make Your Selection

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
Logging In to QualityNet	Learn how to log in to the QualityNet.org website to access and report ASC data
Filing for Annual Payment Update (APU) Reconsideration	Learn about the APU reconsideration process and walk through the Reconsideration Request Form

Resources

Guides for getting started with the ASCQR Program.

Successful Reporting in the ASCQR Program: A Step-by-Step Guide for New Facilities	Essential information for those new to the ASCQR Program
Resources for New Staff	Qualit-e-Quips Newsletter: Helpful Links for Important ASCQR Program Information
ASCQR ListServe Registration	Email sign-up to receive the most up-to-date information and education
ASCQR on QualityNet	Program information and access to data submission portal and reports
CY 2019 ASC Measure Reporting Dates	Submission dates for the current year's Payment Determination
CY 2020 ASC Measure Reporting Dates	Submission dates for the current year's Payment Determination

Search this page:

Upcoming Events

March 27, 2018
[Improving the Patient Experience of Care — 1.5 C.E.](#)

March 28, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM — 1 C.E.](#)

March 29, 2018
[Hospital Readmissions Reduction Program: Early Look Hospital-Specific Reports — 1 C.E.](#)

[See the full calendar](#)

CMS Tweets



The #Medicare #EHR Incentive Program is constantly evolving and currently looking for stakeholder measure proposals. Visit our website to learn how you can submit a proposed new measure:

Selected Document

AMBULATORY SURGICAL CENTER MEASURE REPORTING DATES

CY 2019 PAYMENT DETERMINATION YEAR

Number	Claims-Based Measures	Data Submission Dates	
ASC-1	Patient Burn	Claims submitted for services furnished between January 1, 2017 and December 31, 2017	
ASC-2	Patient Fall	Claims submitted for services furnished between January 1, 2017 and December 31, 2017	
ASC-3	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	Claims submitted for services furnished between January 1, 2017 and December 31, 2017	
ASC-4	All-Cause Hospital Transfer/Admission	Claims submitted for services furnished between January 1, 2017 and December 31, 2017	
Number	Outcome Claims-Based Measure	Data Submission Dates	
ASC-12	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy*	Claims submitted for services furnished between January 1, 2017 and December 31, 2017	
Number	Measures Submitted via a Web-Based Tool	Data Collection Period	Submission Period
ASC-8	Influenza Vaccination Coverage among Healthcare Personnel†	October 1, 2017– March 31, 2018	October 1, 2017– May 15, 2018
ASC-9	Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients	January 1, 2017– December 31, 2017	January 1, 2018– May 15, 2018
ASC-10	Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	January 1, 2017– December 31, 2017	January 1, 2018– May 15, 2018
ASC-11	Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery (Voluntary)††	January 1, 2017– December 31, 2017	January 1, 2018– May 15, 2018

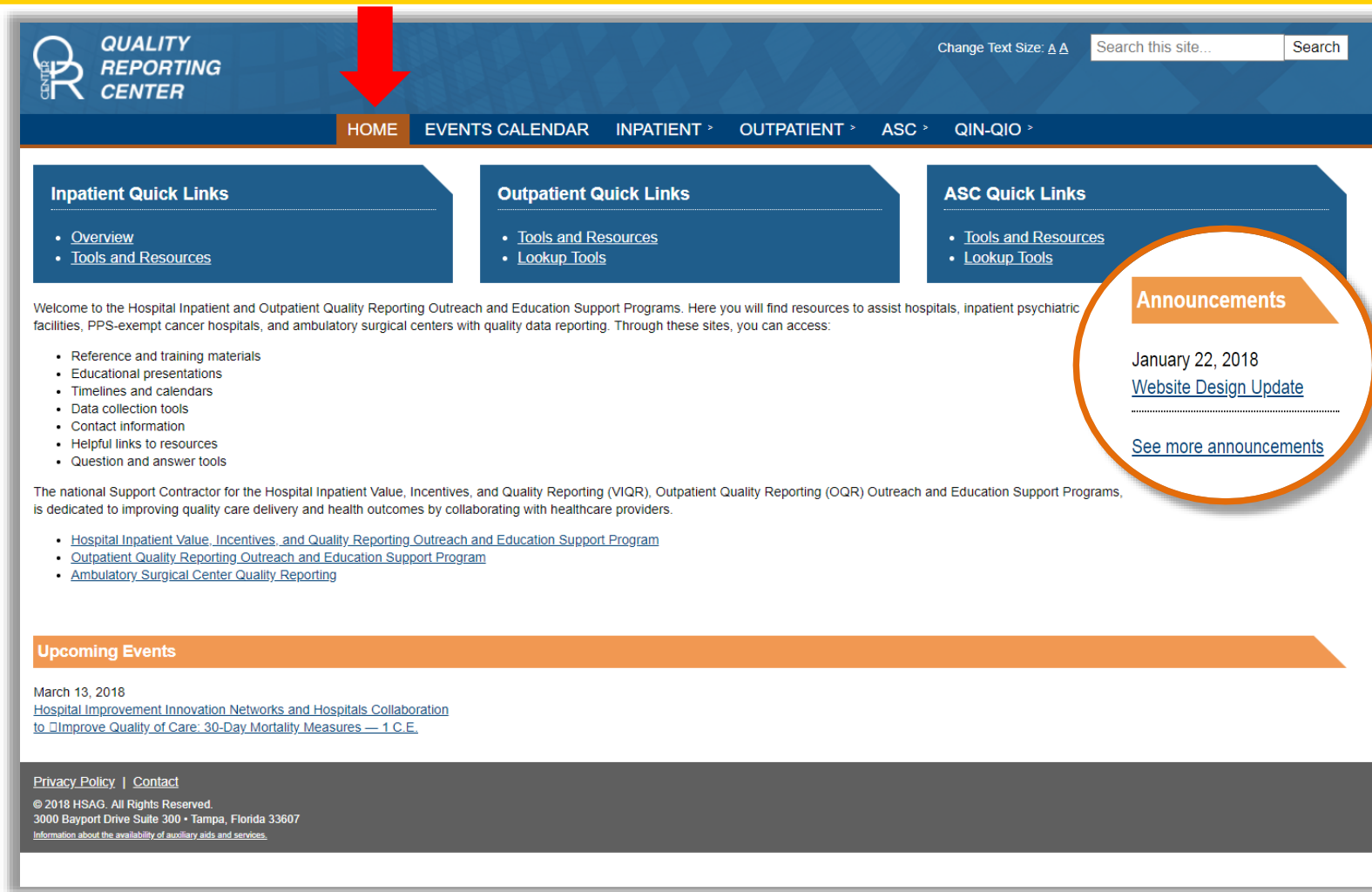
*Does not require any additional data submission apart from standard Medicare Fee-for-Service claims.

**See www.qualitynet.org for procedure categories and corresponding HCPCS codes.

† Collected data for this measure will be submitted to the National Healthcare Safety Network (NHSN).

†† ASCs may voluntarily submit data for CY 2018 but will not be subject to a payment reduction with respect to this measure during the voluntary reporting period.

Site Announcements



QUALITY REPORTING CENTER

Change Text Size: [A](#) [A](#) Search this site...

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > ASC > QIN-QIO >

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- [Ambulatory Surgical Center Quality Reporting](#)

Announcements

January 22, 2018
[Website Design Update](#)
.....
[See more announcements](#)

Upcoming Events

March 13, 2018
[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

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Quick Links

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QUALITY REPORTING CENTER

Change Text Size: A A Search this site... Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > ASC > QIN-QIO >

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Upcoming Events

<p>March 13, 2018</p> <p>Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.</p>	<p>March 19, 2018</p> <p>CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting — 1 C.E.</p>	<p>March 21, 2018</p> <p>Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- OQR — 1 C.E.</p>
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Upcoming Events

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Events Calendar



HOME **EVENTS CALENDAR** INPATIENT > OUTPATIENT > ASC > QIN-QIO >

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March 13, 2018 Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.	March 19, 2018 CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting — 1 C.E.	March 21, 2018 Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- OQR — 1 C.E.
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More Options

Events

To filter events by a particular group or groups, please select the group(s) from the options below:

All
 Hospital OQR
 ASC
 IPF
 VBP
 IQR
 PCH
 eCQM

March 2018
today < >

Mon	Tue	Wed	Thu	Fri	
26	SEP-1 Early Management Bundle, Severe Sepsis/Septic Shock: v5.3a Measure Updates - 1.5 C.E.	27	Measure by Measure: Data for the Ambulatory Surgical Center (ASC) Quality Reporting Program - 1 C.E.	28	
5		6	7	8	
12	Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures - 1 C.E.	13	14	15	
CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting - 1 C.E.	19	Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting-OQR - 1 C.E.	20	PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report - 1 C.E.	21
26	Improving the Patient Experience of Care - 1.5 C.E.	27	Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting-	28	

[Log In to Access QIO Section](#)

Search this page:

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March 13, 2018
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March 19, 2018
[CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting — 1 C.E.](#)

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March 22, 2018
[PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report — 1 C.E.](#)

[See the full calendar](#)

CMS Tweets

CMSGov

@CMSGov

ATTN clinicians! The ACI call for measures submission period is open now through June 29. Read the fact sheet and then download the submission form today!

go.cms.gov/2lcJu1c #QPP #MACRA



Events Calendar Filter

Events

To filter events by a particular group or groups, please select the group(s) from the options below:

All Hospital OQR ASC IPF VBP IQR PCH eCQM

March 2018 today < >

Mon	Tue	Wed	Thu	Fri
26	27	28 Measure by Measure: Data for the Ambulatory Surgical Center (ASC) Quality Reporting Program - 1 C.E.	1	2
19	20	21	22	23
26	27 Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM - 1 C.E.	28	29	30

Upcoming Events

March 22, 2018
[PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report](#) — 1 C.E.

March 27, 2018
[Improving the Patient Experience of Care](#) — 1.5 C.E.


March 28, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM](#) — 1 C.E.

March 29, 2018
[Hospital Readmissions Reduction Program: Early Look Hospital-Specific Reports](#) — 1 C.E.

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CMS Tweets

CMSGov Retweeted

 **Administrator See...** @SeemaCMS

Our policies at @CMSGov are intended to relieve unnecessary regulatory burden on states, avoid increasing administrative costs for taxpayers, and refocus time and resources on improving the health outcomes of Medicaid beneficiaries.

#TransformingMedicaid
go.cms.gov/2IYUV1



To filter events by a particular group or groups, please select the group(s) from the options below:

All Hospital OQR ASC IPF VBP IQR PCH eCQM

New Sidebar Feature

Events

To filter events by a particular group or groups, please select the group(s) from the options below:

All
 Hospital QQR
 ASC
 IPF
 VBP
 IQR
 PCH
 eCQM

Filter

March 2018

today
<
>

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5	6	7	8	9
12	13 Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures - 1 C.E.	14 Hospital IQR Program APU Reconsideration Process/Reconsideration Requests—Phase 1FY 2019 Payment Determination	15	16
19 CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting - 1 C.E.	20	21 Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- OQR - 1 C.E.	22 PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report - 1 C.E.	23
26	27 Improving the Patient Experience of Care - 1.5 C.E.	28 Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM - 1 C.E.	29 Hospital Readmissions Reduction Program: Early Look Hospital-Specific Reports - 1 C.E.	30

Upcoming Events

April 18, 2018
[Website Walk-through: Tools and Resources for the Hospital Outpatient Quality Reporting \(OQR\) Program — 1 C.E.](#)


[See the full calendar](#)

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CMSGov

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See you Tuesday, 4/3 at CMS Central Office or via webinar for the 1PM #TechTopics session! go.cms.gov/2J4E3f5 #CMSConverge

Upcoming Events

Events

To filter events by a particular group or groups, please select the group(s) from the options below:

All
 Hospital OQR
 ASC
 IPF
 VBP
 IQR
 PCH
 eCQM

March 2018

Mon	Tue	Wed
26	27	28
	SEP-1 Early Management Bundle, Severe Sepsis/Septic Shock: v5.3a Measure Updates - 1.5 C.E.	Measure by Measure: Data for the Ambulatory Surgical Center (ASC) Quality Reporting Program - 1 C.E.
5	6	7
12	13	14
	Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures - 1 C.E.	
19	20	21
CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting - 1 C.E.		Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- OQR - 1 C.E.
26	27	28
Improving the Patient Experience of Care - 1.5 C.E.	Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting-	

Upcoming Events

March 13, 2018
[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

March 19, 2018
[CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting — 1 C.E.](#)

March 21, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- OQR — 1 C.E.](#)

March 22, 2018
[PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report — 1 C.E.](#)

[See the full calendar](#)

[Log In to Access QIO Section](#)

Search this page:

Upcoming Events

March 13, 2018
[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

March 19, 2018
[CMS QRDA Category I Implementation Guide Changes for CY 2018 for Hospital Quality Reporting — 1 C.E.](#)

March 21, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- OQR — 1 C.E.](#)


March 22, 2018
[PCHQR Program Refresher: Utilizing the Web-Based Data Collection Tool and PCH Report — 1 C.E.](#)

[See the full calendar](#)

CMS Tweets

 **CMSGov** @CMSGov

ATTN clinicians! The ACI call for measures submission period is open now through June 29. Read the fact sheet and then download the submission form today!
[#QPP #MACRA](http://go.cms.gov/2lcJu1c)





Archived Events

The screenshot displays the Quality Reporting Center website interface. At the top left is the logo for the Quality Reporting Center. The navigation bar includes links for HOME, EVENTS CALENDAR, INPATIENT, and OUTPATIENT. A search bar is located in the top right corner. Below the navigation bar, there are two sections: 'Inpatient Quick Links' and 'Outpatient Quick Links'. The main content area features a welcome message and a list of resources. A red arrow points to the 'ARCHIVED EVENTS' option in a dropdown menu that is open on the right side of the page. The dropdown menu lists various program information and tools.

QUALITY REPORTING CENTER

Change Text Size: A A Search this site... Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT >

ASC > QIN-QIO >

PROGRAM INFORMATION

ASC 101

PROGRAM RULE HISTORY

UPCOMING EVENTS

ARCHIVED EVENTS

DATA DASHBOARD

Lookup Tools

AGENT (VENDOR) AUTHORIZATION FORMS

TOOLS AND RESOURCES

DATA SUBMISSION

QUALIT-E-QUIPS

Inpatient Quick Links

- [Overview](#)
- [Tools and Resources](#)

Outpatient Quick Links

- [Tools and Resources](#)
- [Lookup Tools](#)

Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist you in reporting quality data for your facility, 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) Program 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 Support Program](#)
- [Outpatient Quality Reporting Outreach and Education Support Program](#)
- [Ambulatory Surgical Center Quality Reporting](#)

Upcoming Events

March 13, 2018
[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

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Information about the availability of auxiliary aids and services.

Data Dashboard

QUALITY REPORTING CENTER

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ASC > QIN-QIO >

- PROGRAM INFORMATION
- ASC 101
- PROGRAM RULE HISTORY
- UPCOMING EVENTS
- ARCHIVED EVENTS
- DATA DASHBOARD
- Lookup Tools
- AGENT (VENDOR) AUTHORIZATION FORMS
- TOOLS AND RESOURCES
- DATA SUBMISSION
- QUALIT-E-QUIPS

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- [Tools and Resources](#)
- [Lookup Tools](#)

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Upcoming Events

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[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

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National Maps

QUALITY REPORTING CENTER

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Search this site... Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > **ASC >** QIN-QIO >

Data Dashboard

You are logged in | [Logout](#)

Search this page:


Lookup Tools

The Lookup Tools allow program participants to view the CMS Certification Number assigned to their National Provider Identifier, if their facility has completed data submission for selected measures, and if certain data reports are available through QualityNet.

Please click here to access the [Lookup Tools](#).

National Maps

The National Maps allow you to view the state and national rates for ASCQR Program measures.

Please click here to access the [National Maps](#). 

Upcoming Events

March 27, 2018
[Improving the Patient Experience of Care — 1.5 C.E.](#)

March 28, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM — 1 C.E.](#)

March 29, 2018
[Hospital Readmissions Reduction Program - Early Look Hospital-Specific Reports — 1 C.E.](#)

[See the full calendar](#)

Your Choices in Data

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Search this site... Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > ASC > QIN-QIO >

National Maps

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Search this page:
Search this page...

Upcoming Events

March 27, 2018
[Improving the Patient Experience of Care — 1.5 C.E.](#)

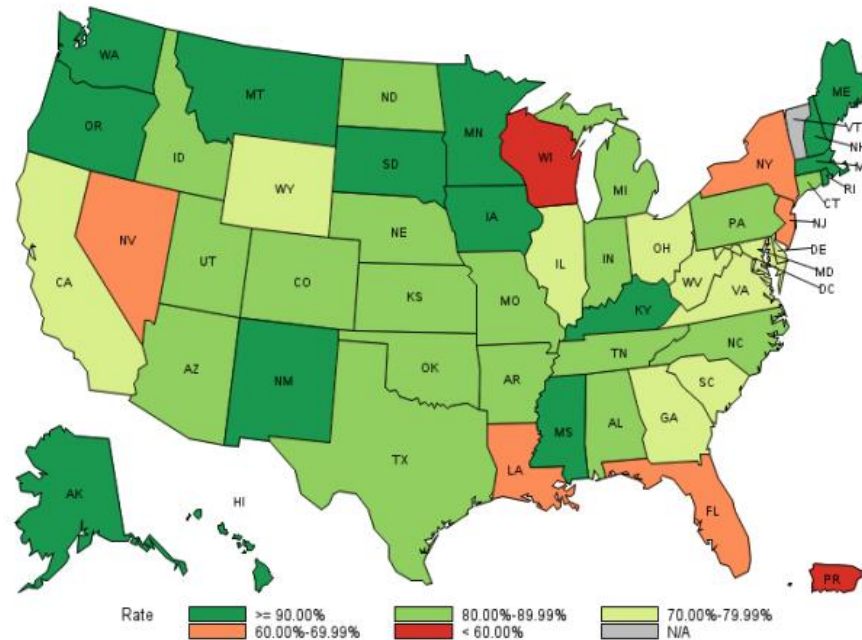
March 28, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting, ASC 2PM — 1 C.E.](#)

Claims-Based Data Rates (by State)	Data Rates for ASC-8 (by State)	Data Submitted via QualityNet Rates (by State)
<ul style="list-style-type: none">ASC-1 Rate (2016)ASC-2 Rate (2016)ASC-3 Rate (2016)ASC-4 Rate (2016)ASC-5 Rate (2016)	<ul style="list-style-type: none">ASC-8 Rate (2016/2017)	<ul style="list-style-type: none">ASC-9 Rate (2016)ASC-10 Rate (2016)

Data Map

ASC-9: Rate by State (2016)

ASC-9: Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy for Average Risk Patients



- National rate: 77.78%
- Data source: Medicare Fee-for-Service claims January 1–December 31, 2016

Lookup Tools

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Data Dashboard

You are logged in | [Logout](#)

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Upcoming Events

March 27, 2018
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March 29, 2018
[Hospital Readmissions Reduction Program - Early Look Hospital-Specific Reports — 1 C.E.](#)

[See the full calendar](#)

Enter Your Facility

The screenshot shows the Quality Reporting Center website. At the top left is the logo for the Quality Reporting Center. To the right of the logo is the text 'QUALITY REPORTING CENTER'. Further right is a search bar with the text 'Search this site...' and a 'Search' button. Below the logo and search bar is a navigation menu with links for 'HOME', 'EVENTS CALENDAR', 'INPATIENT >', 'OUTPATIENT >', 'ASC >', and 'QIN-QIO >'. The 'ASC >' link is highlighted in orange. Below the navigation menu is a section titled 'Lookup Tools'. To the right of this section is a link that says 'Log In to Access QIO Section'. Below 'Lookup Tools' is a section titled 'Web-Based Status Listing (PY 2019)'. This section contains a paragraph explaining the tool and a list of measures: ASC-8: Influenza Vaccination Coverage among Healthcare Personnel*, ASC-9: Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients, ASC-10: Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use, and ASC-11: Cataracts – Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery (Voluntary). Below the list is a paragraph about data submission requirements and a note about ASC-8 data. To the right of the 'Web-Based Status Listing' section is a search bar labeled 'Search this page:'. Below this search bar is a section titled 'Upcoming Events' with three entries: March 27, 2018: Improving the Patient Experience of Care — 1.5 C.E., March 28, 2018: Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM — 1 C.E., and March 29, 2018: Hospital Readmissions Reduction Program: Early Look Hospital-Specific Reports — 1 C.E. Below the 'Upcoming Events' section is a link that says 'See the full calendar'. Below the 'Upcoming Events' section is a section titled 'CMS Tweets' with a tweet from CMSGov: 'The #Medicare #EHR Incentive Program is constantly evolving and currently looking for stakeholder measure proposals. Visit our website to learn how you can submit a proposed new measure: go.cms.gov/2IsIjFT'. Below the 'Web-Based Status Listing' section is a section titled 'Data Archives' with a paragraph about visiting archive pages. Below the 'Data Archives' section is a section titled 'Use the Lookup Tool' with a paragraph about entering NPI or CCN. Below the 'Use the Lookup Tool' section is a form with a note: 'Note: Data last updated February 16, 2018'. The form has two input fields: 'NPI: [input]' and 'or CCN: [input]'. Below the input fields is a 'Search' button.

QUALITY REPORTING CENTER

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Search this site...

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > **ASC >** QIN-QIO >

Lookup Tools

[Log In](#) to Access QIO Section

Web-Based Status Listing (PY 2019)

The Web-Based Measure Status Listing is provided as a quick way to determine if your facility has completed data submission using a web-based tool for the following measures for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program:

- ASC-8: Influenza Vaccination Coverage among Healthcare Personnel*
- ASC-9: Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients
- ASC-10: Endoscopy/Polyp Surveillance: 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)

Data submission for these measures is required by the Centers for Medicare & Medicaid Services (CMS) in order to be eligible for the calendar year (CY) 2019 payment determination. ASCs may voluntarily submit data for ASC-11 and are not subject to a payment reduction during the voluntary reporting period.

* Data submission results for ASC-8 represent the 2017/2018 influenza season (October 1, 2017 – March 31, 2018). These data will not change after the May 15, 2018 deadline.

Log in to the [QualityNet website](#) for complete details on your data submission and to print a screenshot for your records.

Data Archives

Visit the [Archive](#) pages via the links below to review a previous year’s web-based data submission.

Use the Lookup Tool

Enter your facility’s National Provider Identifier (NPI) or CMS Certification Number (CCN) into the field below. Your facility will not be visible in the database if no data have been submitted. NPIs are cross-referenced with the facility CCN to indicate if data were submitted for ASC-8 and will not update after the May 15 deadline.

Note: Data last updated February 16, 2018

NPI: or CCN:

Search this page:

Upcoming Events

March 27, 2018
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March 28, 2018
[Getting Your Ducks in a Row: Addressing Common Issues in Quality Reporting- ASC 2PM — 1 C.E.](#)

March 29, 2018
[Hospital Readmissions Reduction Program: Early Look Hospital-Specific Reports — 1 C.E.](#)

[See the full calendar](#)

CMS Tweets

CMSGov [@CMSGov](#)

The #Medicare #EHR Incentive Program is constantly evolving and currently looking for stakeholder measure proposals. Visit our website to learn how you can submit a proposed new measure: go.cms.gov/2IsIjFT

Search Results

Data Archives

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Note: Data last updated February 16, 2018

NPI: or CCN:

Res

Loca

CCN

Facil

Addr

Facil

Facil

Cont

Web

WBM

Your

Web-Based Measures Information:

WBM Data last updated February 16, 2018

Your NPI submission contains the following data:

- ASC-8 Submitted: **No**
- ASC-9 Submitted: **No**
- ASC-10 Submitted: **No**
- ASC-11 Submitted: **No**

• ASC-11 Submitted: **No**

[Program: Early Look Hospital-Specific Reports](#)
— 1 C.E.

[See the full calendar](#)

CMS Tweets

 **CMSGov** 
@CMSGov

Maybe you can take it with you? Learn how.
go.cms.gov/2FXpnjL
#MyHealthEData
#BlueButton
#InnovateNYC2018 #CMSRO

Eventbrite

CMS NYC Innovation...
The CMS New York R...
eventbrite.com

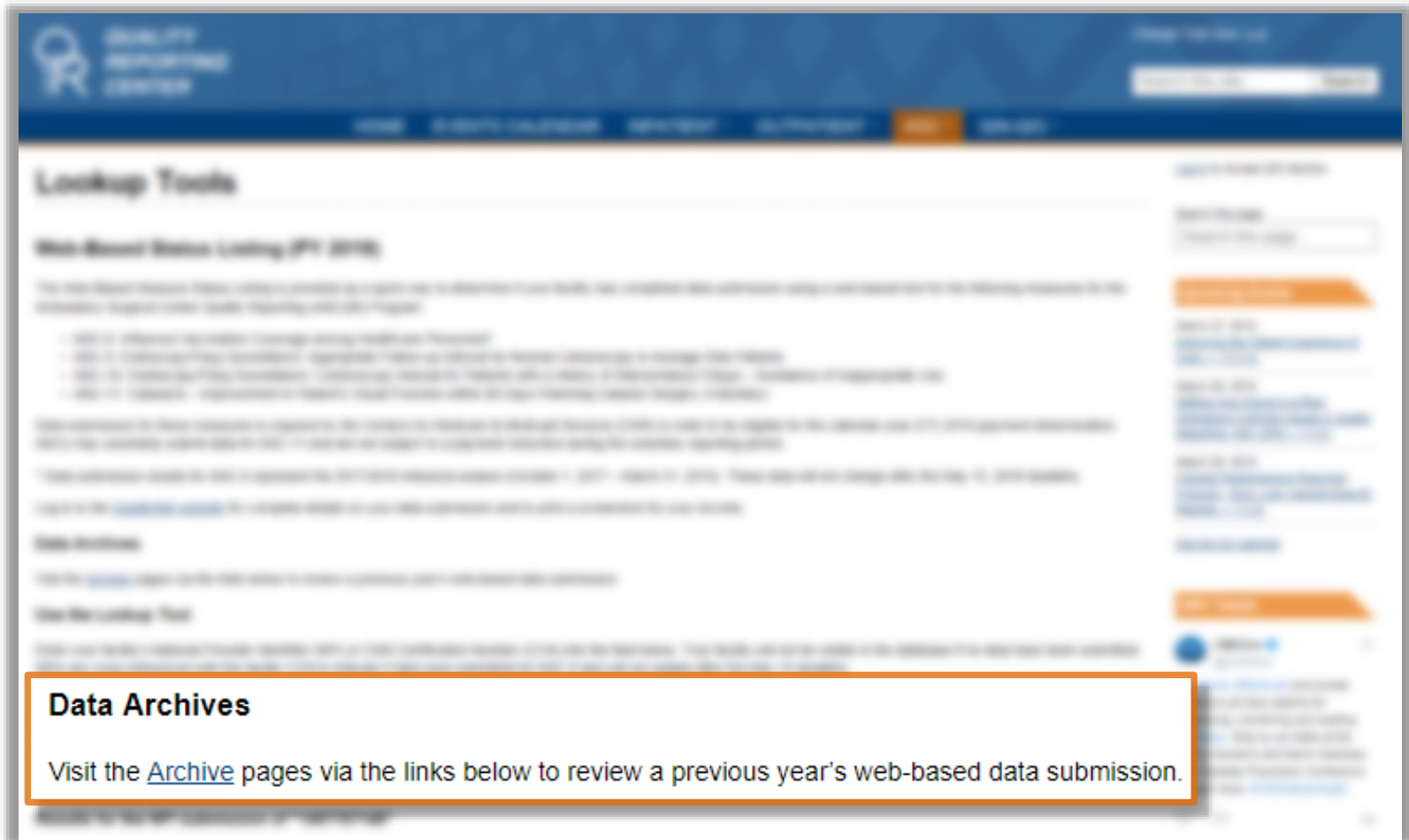
  46m

 **CMSGov** 
@CMSGov

Expanded #Medicare coverage for cancer patients:
go.cms.gov/2pzpZkl
#MLNConnects #CMSMLN

 **mlnconnects**
In this week's issue...

Archived Data



The image shows a screenshot of a web portal with a blue header and navigation menu. The main content area is titled "Lookup Tools" and contains several sections of text and links. A callout box with an orange border is overlaid on the bottom left of the screenshot, containing the text "Data Archives" and "Visit the [Archive](#) pages via the links below to review a previous year's web-based data submission."

Data Archives

Visit the [Archive](#) pages via the links below to review a previous year's web-based data submission.

Tools and Resources

The screenshot displays the Quality Reporting Center website interface. At the top left is the logo for the Quality Reporting Center. The navigation bar includes links for HOME, EVENTS CALENDAR, INPATIENT, and OUTPATIENT. A search bar is located in the top right corner. Below the navigation bar, there are two columns of quick links: 'Inpatient Quick Links' (Overview, Tools and Resources) and 'Outpatient Quick Links' (Tools and Resources, Lookup Tools). A main content area contains a welcome message and a list of resources including reference materials, educational presentations, timelines, data collection tools, contact information, helpful links, and question/answer tools. Below this is a section for 'Upcoming Events' with a date of March 13, 2018, and a link to a report on 30-Day Mortality Measures. A footer contains a privacy policy link, contact information, and copyright details. A large orange navigation menu is overlaid on the right side of the page, listing various program and tool categories. A red arrow points to the 'TOOLS AND RESOURCES' option in this menu.

QUALITY REPORTING CENTER

Change Text Size: A A Search this site... Search

HOME EVENTS CALENDAR INPATIENT > OUTPATIENT >

ASC > QIN-QIO >

PROGRAM INFORMATION

ASC 101

PROGRAM RULE HISTORY

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QUALIT-E-QUIPS

Inpatient Quick Links

- [Overview](#)
- [Tools and Resources](#)

Outpatient Quick Links

- [Tools and Resources](#)
- [Lookup Tools](#)

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- [Outpatient Quality Reporting Outreach and Education Support Program](#)
- [Ambulatory Surgical Center Quality Reporting](#)

Upcoming Events

March 13, 2018
[Hospital Improvement Innovation Networks and Hospitals Collaboration to Improve Quality of Care: 30-Day Mortality Measures — 1 C.E.](#)

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Make Your Selection



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[HOME](#) [EVENTS CALENDAR](#) [INPATIENT >](#) [OUTPATIENT >](#) **[ASC >](#)** [QIN-QIO >](#)

ASCQR Program Tools and Resources

[Log In](#) to Access C

Search this page:

Search this p


Upcoming Eve

April 17, 2018
[Hospital IQR and V](#)
[Reviewing Your Cl](#)
[Measures Hospita](#)
[1 C.E.](#)

April 18, 2018
[Website Walk-thro](#)
[Resources for the](#)
[Quality Reporting,](#)
[C.E.](#)

- [Public Reporting +](#)
- [Program Resources +](#)
- [Measure Resources +](#)
- [Measure Guidelines and Tools +](#)
- [Helpful Resources from CMS +](#)

More Resources



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HOME EVENTS CALENDAR INPATIENT > OUTPATIENT > ASC > QIN-QIO >

ASCQR Program Tools and Resources

[Log In to Access QIO Section](#)

Search this page:

Public Reporting	
ASCQR Preview Report Quick Reference Guide	A quick reference guide for your facility's publicly reported data
Program Resources	
Successful Reporting in the ASCQR Program: A Step-by-Step Guide for New Facilities	Essential information for those new to the ASCQR Program
ASCQR Reference Checklist	Summary of the current year's program requirements
ASCQR Questions & Answers Tool	Immediate feedback to your questions and a searchable database of past responses
ASCQR Frequently Asked Questions	FAQs about the ASCQR Program
ASC ListServe Registration	Email sign-up to receive the most up-to-date information and education
ASCs on QualityNet	Program information and access to data submission portal and reports
CMS Extraordinary Circumstances Exceptions Guidelines and Form	Please visit QualityNet.org
ASC Contact Change Form	Update your facility's contact information
Ambulatory Surgical Center Quality Reporting Program 101	Resources for new quality reporting professionals
National Healthcare Safety Network Registration	Register to enter data in for the ASC-8 Influenza vaccination measure
Measure Resources	
NHSN: Preparing for Data Submission	Learn how to add new users and Facility Administrators
Fact Sheet for Remittance Advice: Tips for Accurate Reporting	Guide for understanding RAs with examples
CY 2019 Ambulatory Surgical Center Measure Reporting Dates	Data collection and submission deadlines
CY 2020 Ambulatory Surgical Center Measure Reporting Dates	Data collection and submission deadlines

Upcoming Events


March 27, 2018
[Improving the Patient Experience of Care — 1.5 C.E.](#)

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[See the full calendar](#)

CMS Tweets



#Medicare, #Medicaid and private insurance all have options for diagnosing, monitoring and treating #diabetes. Stop by our table at the Native Women's and Men's Wellness and Diabetes Prevention Conference to learn more.
[#CMSNativeHealth](#)

Quick Reference

ASC Public Reporting Preview Report Quick Reference Guide

December 2017 Release – Preview Period October 2 through October 31, 2017

Preview Report Access

Preview Period

Preview reports will be available to participating ASC facilities via the QualityNet Secure Portal from **October 2–October 31, 2017**.

Preview reports can be viewed by:

1. Accessing the public website for QualityNet at <https://www.qualitynet.org> and selecting **[Login]** under the “Log in to QualityNet Secure Portal” header.
2. Entering your QualityNet User ID, Password, and Security Code, and selecting **[Submit]**.
3. Reading the Terms and Conditions statement and selecting **[I Accept]** to proceed.

Preview reports can be downloaded by:

1. Selecting “Secure File Transfer” in the blue ribbon at the top of the screen.
2. Selecting “AutoRoute_Inbox” in the left-side menu.
3. Selecting “ASC Preview Report” also identified by your facility’s NPI.
4. Selecting “Download.”
5. Selecting “Save” in the pop-up box.
6. Saving and opening the report.

Security Administrator Required

An active QualityNet Security Administrator (SA) is required to access your December 2017 report. It is highly recommended that each organization designate two people as QualityNet SAs.

Data Highlights

Measures Using Quality Data Codes

- Section includes: ASC-1, ASC-2, ASC-3, ASC-4, and ASC-5
- Aggregate rates are based on 1Q 2016 – 4Q 2016 encounters

Measures from Administrative Claims

Data from January 1–December 31, 2016 encounters

- ASC-12: Facility 7-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy
- Data for this measure can be found on the Facility-Specific Report (FSR) located on the QualityNet Secure Portal under Secure File Transfer. This FSR will be available for all facilities to download and will serve as the preview report for ASC-12. ASCs may use this report as a tool for previewing data prior to public display on Hospital Compare in December 2017.

Measures Submitted via Web-Based Tool

Data submitted to QualityNet

- Section includes: ASC-6, ASC-7, ASC-9, ASC-10, ASC-11 (voluntary measure)
- Data based on calendar year 2016 encounters submitted from January 1–August 15, 2017

Data submitted to the National Healthcare Safety Network (NHSN) website

- Section includes: ASC-8
- Data based on October 1, 2016–March 31, 2017 flu season submitted from October, 2016–May 15, 2017

Footnotes (FN)

- FN 1** The number of cases/patients is too few to report.
- FN 5** Results are not available for this reporting period.
- FN 7** No cases met the inclusion criteria for this measure.
- FN 23** The data are based on claims that the hospital or facility submitted to CMS. The hospital or facility has reported discrepancies in their claims data.

Questions

For further assistance regarding your preview report, questions may be submitted to ASCQR Support through the Outpatient Questions and Answers tool at <https://cms-ocsq.custhelp.com>, or by calling, toll-free, 866.800.8756 weekdays from 7 a.m. to 6 p.m. ET.

Program Resources

Program Resources

Successful Reporting in the ASCQR Program: A Step-by-Step Guide for New Facilities	Essential information for those new to the ASCQR Program
ASCQR Reference Checklist	Summary of the current year's program requirements
ASCQR Questions & Answers Tool	Immediate feedback to your questions and a searchable database of past responses
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Measure Resources

Measure Resources	
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Fact Sheet for Remittance Advice: Tips for Accurate Reporting	Guide for understanding RAs with examples
CY 2019 Ambulatory Surgical Center Measure Reporting Dates	Data collection and submission deadlines
CY 2020 Ambulatory Surgical Center Measure Reporting Dates	Data collection and submission deadlines

NHSN Information

Scenario 1: Facility Administrator Adds New User

1. After logging into the NHSN facility, click **Users** and then **Add** on the left-hand navigation bar.
2. On the **Add User** screen, enter the new user's information, completing all fields that are marked with the red asterisk as required.
 - a. The "User ID" can be any combination of letters and numbers as decided upon by your facility. Common examples are first initial and last name or the employee's facility ID number.
 - b. If the user has more than one email address (i.e., hospital email address and ASC email address), confirm with the new user which email address they prefer to use for NHSN purposes. The user must use the same email address throughout NHSN and SAMS.
 - c. Click the grey **Save** button once the user information has been entered.
3. On the **Add User Rights** screen, select the appropriate level of rights for the new user.
 - a. For the majority of purposes, it is easier for all users to have Administrative Rights.
 - b. Make the following selection, then click the grey **Save** button:

Rights	Healthcare Personnel Safety
Administrator	<input checked="" type="checkbox"/>
All Rights	<input checked="" type="checkbox"/>
Analyze Data	<input type="checkbox"/>
Add, Edit, Delete	<input type="checkbox"/>
View Data	<input type="checkbox"/>
Customize Rights	<input type="checkbox"/>

Advanced

Effective Rights Save Back



WEBSITE



QualityNet Website

Home Page

www.qualitynet.org

QualityNet

Log in to QualityNet Secure Portal (formerly MyQualityNet) Search

Log In

Home My QualityNet Help

Hospitals - Inpatient Hospitals - Outpatient Physician Offices **Ambulatory Surgical Centers** PPS-Exempt Cancer Hospitals ESRD Facilities Inpatient Psychiatric Facilities Quality Improvement

QualityNet Registration

- Hospitals - Inpatient
- Hospitals - Outpatient
- Physician Offices
- ASCs
- Cancer Hospitals
- ESRD Facilities
- Inpatient Psychiatric Facilities
- QIOs

Getting Started with QualityNet

- Registration
- Sign-In Instructions
- Security Statement
- Password Rules
- QualityNet System Security Policy, PDF

QualityNet News

Hospital VBP FY 2020

The Hospital Value-Based Purchasing (VBP) Program is now available from the QualityNet Secure Portal. Hospitals can monitor their baseline performance and track progress against the program. Hospitals can also access the program's resources and support contact information.

[Full Article »](#)

Headlines

- [New CMS HSR t](#)
- [CMS releases A](#)
- [FY 2018 progra](#)
- [site](#)
- [Hospitals select](#)
- [CY 2018 OPPS/](#)
- [site](#)
- [CY 2018 OPPS/](#)
- [site](#)
- [CMS grants exe](#)
- [Northern Califor](#)
- [CY 2017 eCQM](#)

Ambulatory Surgical Center (ASC) Program

Public Reporting

E-mail Notifications

Specifications Manuals

Measures

Resources

Support Contact

Data Submission

Registration

Webinars

Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)

Training

[More News »](#)

Now Available

Fiscal Year 2020 Baseline Measures Reports are now available from the QualityNet Secure Portal. This report allows hospitals to track their performance against the measures and metrics required for the Hospital VBP Program. Reports are available through the QualityNet Secure Portal.

[View reports](#)

[Purchasing programs updated on Hospital Compare](#)

[Reporting chart-abstracted data validation](#)

[Participants in FEMA disaster areas affected by](#)

[for the Hospital IQR and Medicare EHR Incentive](#)

Log in to QualityNet Secure Portal

Login

- Download Symantec ID (**required for login**)
- Portal Resources
- Secure File Transfer Resources

Questions & Answers

- Ambulatory Surgical Centers
- End-Stage Renal Disease (ESRD) QIP
- Hospitals - Inpatient
- Hospitals - Outpatient
- Inpatient Psychiatric Facilities
- PPS-Exempt Cancer Hospitals

Public Reporting

Home	My QualityNet	Help						
Hospitals - Inpatient ▾	Hospitals - Outpatient ▾	Physician Offices ▾	Ambulatory Surgical Centers ▾	PPS-Exempt Cancer Hospitals ▾	ESRD Facilities ▾	Inpatient Psychiatric Facilities ▾	Quality Improvement ▾	

Public Reporting

Public Reporting

Ambulatory Surgical Center Quality Reporting Program

The Centers for Medicare & Medicaid Services' (CMS') [Hospital Compare](#) website publishes information on the quality of care provided to patients; this information is made available to inform consumers and to encourage healthcare facilities to make continued improvements in care quality. Data for ambulatory surgical centers (ASCs) are updated annually in December and include facility-level data as well as state and national rates for each of the measures.

Hospital Compare Preview Period

Prior to each December release, data due to be displayed are made available to providers for a 30-day preview period approximately two months in advance of being made available to the public on *Hospital Compare*. **This preview period does not serve as a review and correction period for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program.**

Preview reports are available via the *QualityNet Secure Portal* in the AutoRoute Inbox. A news story is posted on QualityNet and a ListServe is sent to subscribed users when the preview period opens.

Hospital Compare Preview Report Reference Documents

The following reference document, updated annually, is made available to assist facilities in accessing and interpreting their Ambulatory Surgical Center (ASC) Hospital Compare preview reports:

- [ASC Hospital Compare Preview Report Quick Reference Guide](#), (PDF-280 KB)

CMS posted [a public reporting training video](#) in September of 2017. This video includes information on understanding data refresh timeframes, headers, footnotes, and much more.

Specifications Manual

The screenshot displays the QualityNet Secure Portal interface. At the top, the QualityNet logo is on the left, and the text 'Log in to QualityNet Secure Portal (formerly MyQualityNet)' is on the right, accompanied by a search bar and a 'Log In' button. Below this is a navigation bar with tabs for 'Home', 'My QualityNet', and 'Help'. A secondary navigation bar contains dropdown menus for various facility types: 'Hospitals - Inpatient', 'Hospitals - Outpatient', 'Physician Offices', 'Ambulatory Surgical Centers', 'PPS-Exempt Cancer Hospitals', 'ESRD Facilities', 'Inpatient Psychiatric Facilities', and 'Quality Improvement'. The 'Ambulatory Surgical Centers' dropdown is currently open, showing a list of links: 'Ambulatory Surgical Center (ASC) Program', 'Public Reporting', 'E-mail Notifications', 'Specifications Manuals' (highlighted with a red box), 'Measures', 'Resources', 'Support Contact', 'Data Submission', 'Registration', 'Webinars', 'Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)', and 'Training'. The main content area is divided into several sections: 'QualityNet Registration' with a list of facility types; 'Getting Started with QualityNet' with a list of registration steps; 'QualityNet News' with a 'Hospital VBP FY 2019' article snippet and a 'Full Article' link; 'Headlines' with several news items; 'Now Available' with information about 'Fiscal Year 2020 Baseline Measures Reports'; 'Log in to QualityNet Secure Portal' with a 'Login' button and a list of resources; and 'Questions & Answers' with a list of topics.

Choose a Version

QualityNet Log in to QualityNet Secure Portal (formerly MyQualityNet) Search

Home My QualityNet Help

Hospitals - Inpatient Hospitals - Outpatient Physician Offices Ambulatory Surgical Centers PPS-Exempt Cancer Hospitals ESRD Facilities Inpatient Psychiatric Facilities Quality Improvement

Specifications Manuals

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.

Data Collection Time Period	Specifications Manual
01/01/18 - 12/31/18	Version 7.0a ←
01/01/17 - 12/31/17	Version 6.0a
07/01/16 - 12/31/16	Version 5.1
01/01/16 - 06/30/16	Version 5.0a
10/01/15 - 12/31/15	Version 4.1
01/01/15 - 09/30/15	Version 4.0a
01/01/14 - 12/31/14	Version 3.0c
01/01/13 - 12/31/13	Version 2.0
10/01/12 - 12/31/12	Version 1.0b

Timelines

Version 7.0a

Version 6.0a

Version 5.1

Previous Manuals

Section Two

Specifications Manuals

Timelines

Version 7.0a

Version 6.0a

Version 5.1

Previous Manuals

Ambulatory Surgical Center Quality Reporting Specifications Manual, v7.0a

For use in submitting data for encounters from **01/01/18 through 12/31/18**.

Please note: Measures ASC-5, -6, and -7 have been removed from the program beginning with January 1, 2017 encounters. For more information regarding the removal of these measures, please see the 7.0a Release Notes or review the CY 2018 OPPS/ASC Final Rule.

View and/or download individual sections of the Specifications Manual, (PDF documents, unless noted), listed below.

▶Release Notes

▶Introductory Materials

▶Section 1: Measure Information Forms

▼ Section 2: Quality-Data Coding & Sampling Specifications

[Quality-Data Coding and Sampling Specifications](#)

▶Section 3: Quality Data Transmission

▶Appendices

▶Download Entire Manual

Sample Size Table

Quality-Data Coding & Sampling Specifications

ASC-1 through ASC-4 – A Quality-Data Code (QDC) has been established to report that the patient did **not** experience the events for the four claims-based outcome measures. If this code is used, none of the other QDCs should be used for these four measures.

G8907: Patient documented **not** to have experienced any of the following events: a burn prior to discharge; a fall within the facility; wrong site, wrong side, wrong patient, wrong procedure, or wrong implant event; or a hospital transfer or hospital admission upon discharge from the facility.

For more information on measures ASC-1–ASC-4, see individual measure specifications in this manual.

ASC-9, ASC-10, ASC-11*, and ASC-13 – The sampling size specifications for ASC-9, ASC-10, ASC-11*, and ASC-13 have been established and are specified in the table below.

Table 3: Sample size requirements per year per ASC for Endoscopy/Polyp Surveillance (ASC-9 and ASC-10) or Cataracts (ASC-11*) measures, or Normothermia (ASC-13).**

Population Per Year	0-900
Yearly Sample Size	63
Quarterly Sample Size	16
Monthly Sample Size	6
Population Per Year	≥ 901
Yearly Sample Size	96
Quarterly Sample Size	24
Monthly Sample Size	8

*Voluntary submission of data for ASC-11 began January 2015.

**For ASCs with fewer than 63 cases, the total population of cases is required.

Measures

The screenshot shows the QualityNet website interface. At the top left is the QualityNet logo. To its right is a login prompt: "Log in to QualityNet Secure Portal (formerly MyQualityNet)" with a "Log In" button and a search box. Below this is a navigation bar with tabs for "Home", "My QualityNet", and "Help". Underneath are several category menus: "Hospitals - Inpatient", "Hospitals - Outpatient", "Physician Offices", "Ambulatory Surgical Centers", "PPS-Exempt Cancer Hospitals", "ESRD Facilities", "Inpatient Psychiatric Facilities", and "Quality Improvement". The "Ambulatory Surgical Centers" menu is expanded, showing a list of links: "Ambulatory Surgical Center (ASC) Program", "Public Reporting", "E-mail Notifications", "Specifications Manuals", "Measures" (highlighted with an orange box), "Resources", "Support Contact", "Data Submission", "Registration", "Webinars", "Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)", and "Training".

On the left side of the page, there are two main sections:

- QualityNet Registration**
 - Hospitals - Inpatient
 - Hospitals - Outpatient
 - Physician Offices
 - ASCs
 - Cancer Hospitals
 - ESRD Facilities
 - Inpatient Psychiatric Facilities
 - QIOs
- Getting Started with QualityNet**
 - Registration
 - Sign-In Instructions
 - Security Statement
 - Password Rules
 - QualityNet System Security Policy, PDF

In the center, under "QualityNet N", there is a section for "Hospital VBP FY 2018" with a "Full Article »" link and a "Headlines" section containing several news items with links.

On the right side, there is a "Log in to QualityNet Secure Portal" section with a "Login" button and a list of resources: "Download Symantec ID (required for login)", "Portal Resources", and "Secure File Transfer Resources". Below that is a "Questions & Answers" section with a list of topics including "Ambulatory Surgical Centers", "End-Stage Renal Disease (ESRD) QIP", "Hospitals - Inpatient", "Hospitals - Outpatient", "Inpatient Psychiatric Facilities", and "PPS-Exempt Cancer Hospitals".

Choose Your Measure

The screenshot shows the QualityNet website interface. At the top left is the QualityNet logo. To its right is a login section with the text "Log in to QualityNet Secure Portal (formerly MyQualityNet)" and a "Log In" button. Further right is a search bar with a "Search" button. Below the header is a navigation menu with tabs for "Home", "My QualityNet", and "Help". Under "My QualityNet", there are several dropdown menus: "Hospitals - Inpatient", "Hospitals - Outpatient", "Physician Offices", "Ambulatory Surgical Centers", "PPS-Exempt Cancer Hospitals", "ESRD Facilities", "Inpatient Psychiatric Facilities", and "Quality Improvement". The "Ambulatory Surgical Centers" dropdown is selected, leading to a page titled "Measures". On the left side of the page, there is a sidebar with a "Measures" section containing three items: "ASCQR Program Measures", "Colonoscopy Measure", and "Colonoscopy Measure". The main content area is titled "Measures" and "Ambulatory Surgical Center Quality Reporting (ASCQR) Program". It contains a paragraph about CMS's goal to develop quality measures for ASC settings, a paragraph about ASC claims data, and a bulleted list of measures. A red arrow points to the "Colonoscopy Measure" item in the list. The list includes: "Measures ASC-1 through ASC-5 utilize Quality Data Codes placed by the ASC on the Form CMS-1500, version 02/12, or associated electronic data set where Medicare is the primary or secondary payer." and "Colonoscopy Measure - This outcome measure for the ASC settings is meant to provide facilities with information on patient outcomes that will allow them to improve quality of care for patients undergoing low-risk colonoscopy." Below the list, there is a paragraph stating: "Data for other measures are reported via an online tool, either directly to CMS through the QualityNet Secure Portal or to the National Healthcare Safety Network."

QualityNet Log in to QualityNet Secure Portal (formerly MyQualityNet) Search

Home My QualityNet Help

Hospitals - Inpatient Hospitals - Outpatient Physician Offices Ambulatory Surgical Centers PPS-Exempt Cancer Hospitals ESRD Facilities Inpatient Psychiatric Facilities Quality Improvement

Measures

ASCQR Program Measures

Colonoscopy Measure

Measures
Ambulatory Surgical Center Quality Reporting (ASCQR) Program

The Centers for Medicare & Medicaid Services (CMS) seeks to develop a comprehensive set of quality measures to be available for widespread use for making informed decisions and quality improvement in the ambulatory surgical center (ASC) setting. CMS uses a variety of data sources to determine the quality of care that Medicare beneficiaries receive.

Ambulatory Surgical Centers (ASC) claims data submitted by facilities for Medicare Part B fee-for-service patients are used for the measure sets listed below. Each measure is calculated using a separate, distinct methodology and, in some cases, separate encounter periods.

- Measures ASC-1 through ASC-5 utilize Quality Data Codes placed by the ASC on the Form CMS-1500, version 02/12, or associated electronic data set where Medicare is the primary or secondary payer.
- [Colonoscopy Measure](#) - This outcome measure for the ASC settings is meant to provide facilities with information on patient outcomes that will allow them to improve quality of care for patients undergoing low-risk colonoscopy.

Data for other measures are reported via an online tool, either directly to CMS through the QualityNet Secure Portal or to the National Healthcare Safety Network.

Additional Information

The screenshot shows the My QualityNet website interface. At the top, there is a navigation bar with tabs for Home, My QualityNet, and Help. Below this is a secondary navigation bar with dropdown menus for various facility types: Hospitals - Inpatient, Hospitals - Outpatient, Physician Offices, Ambulatory Surgical Centers, PPS-Exempt Cancer Hospitals, ESRD Facilities, Inpatient Psychiatric Facilities, and Quality Improvement. The main content area is titled "Colonoscopy Measure (ASC-12)". On the left, a sidebar menu lists "Measures" with sub-items: ASCQR Program Measures, Colonoscopy Measure, Measure Methodology, Reports, Resources, and Archived Resources. The "Measure Methodology" item is highlighted with an orange border. The main content area contains the following text:

Colonoscopy Measure (ASC-12)

The Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy measure will report patient outcomes so facilities can improve quality of care for patients undergoing low-risk colonoscopy at Ambulatory Surgical Centers (ASCs) and Hospital Outpatient Departments (OPDs). The Centers for Medicare & Medicaid Services (CMS) conducted a dry run of the measure in July 2015. The colonoscopy measure will be publicly reported beginning in December 2017, and it will be used for payment determination beginning payment year (PY) 2018.

For more information on the measure, refer to the [Measure Methodology](#) page and [Frequently Asked Questions](#) document. For the measure updates and specification report and additional information, refer to the [Resources](#) page. For information about the July 2015 dry run, refer to the [Archived Resources](#) page.

Reports

Each year, CMS will make claims detail reports (CDRs) available at three stages prior to the final measure calculation and public reporting of measure results. The CDRs will provide facilities subject to the measure with information on their colonoscopy cases that will be included in the measure calculation. In September 2017, CMS will distribute the first CDR for the 2017 performance period, which will include claims detail information for early 2017. The information in this CDR will be part of the measure calculations used for public reporting in December 2018 and payment determination in 2019.

On the right side of the page, there is a box titled "About the Colonoscopy Measure" with the following links:

- [Measure Methodology](#)
- [Frequently Asked Questions, PDF](#)
- [Colonoscopy Measure Fact Sheet, PDF](#)

Ask a Question

The screenshot displays the QualityNet website interface. At the top left is the QualityNet logo. To its right is a login link for the 'QualityNet Secure Portal (formerly MyQualityNet)' with a 'Log In' button and a search box. Below the header is a navigation bar with tabs for 'Home', 'My QualityNet', and 'Help'. A secondary navigation bar lists various facility types: 'Hospitals - Inpatient', 'Hospitals - Outpatient', 'Physician Offices', 'Ambulatory Surgical Centers', 'PPS-Exempt Cancer Hospitals', 'ESRD Facilities', 'Inpatient Psychiatric Facilities', and 'Quality Improvement'. The main content area is divided into several sections:

- QualityNet Registration:** A list of links for different facility types: Hospitals - Inpatient, Hospitals - Outpatient, Physician Offices, ASCs, Cancer Hospitals, ESRD Facilities, Inpatient Psychiatric Facilities, and QIOs.
- Getting Started with QualityNet:** A list of links: Registration, Sign-In Instructions, Security Statement, Password Rules, and QualityNet System Security Policy, PDF.
- Join Listserves:** A link to sign up for notifications and discussions.
- Known Issues - Hospital Reporting:** A section for reporting issues.
- QualityNet News:** A section with a 'More News >' link. It features a news item titled 'New CMS HSR tutorial video released' with a brief description and a 'Full Article >' link. Below this is a 'Headlines' section with a list of news items, each with a date and a link to the full article.
- Log in to QualityNet Secure Portal:** A section with a 'Login' link and a list of resources: Download Symantec ID (required for login), Portal Resources, and Secure File Transfer Resources.
- Questions & Answers:** A section with a red arrow pointing to it. It contains a list of topics: Ambulatory Surgical Centers, End-Stage Renal Disease (ESRD) QIP, Hospitals - Inpatient, Hospitals - Outpatient, Inpatient Psychiatric Facilities, and PPS-Exempt Cancer Hospitals. Below the list is a note: 'Note: First-time registration required'.
- Downloads:** A section with a link to 'CART - Inpatient'.

Resources

- CMS website: <https://www.cms.gov/>
 - Medicare Learning Network:
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html>
- Hospital Compare:
<https://www.medicare.gov/hospitalcompare/search.html>

Contact Us

- Support Contractor
 - Help Desk: 866.800.8756
 - www.qualityreportingcenter.com
- Have a question? Use the Questions & Answers tool
 - <https://cms-ocsq.custhelp.com/>

Thank You



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

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.

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 shows the HSAG Learning Management Center login interface. At the top left is the HSAG logo with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, there is a security notice: "this is a secure site please provide credentials to continue" with a small icon. Below this is the text "Learning Management Center". The main content area features a "Secure Login" box with a padlock icon, a "User Name:" label and input field, a "Password:" label and 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

Or

- Call the Support Contractor at 866.800.8756.