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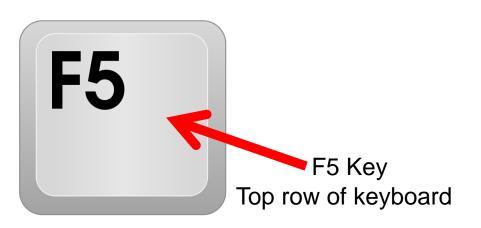
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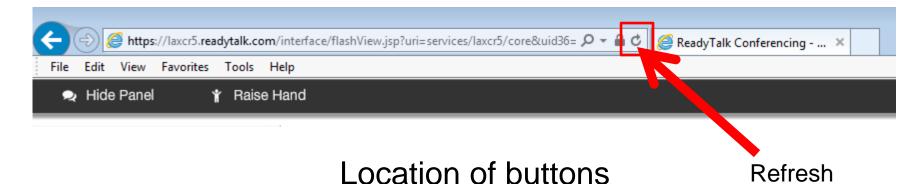
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or

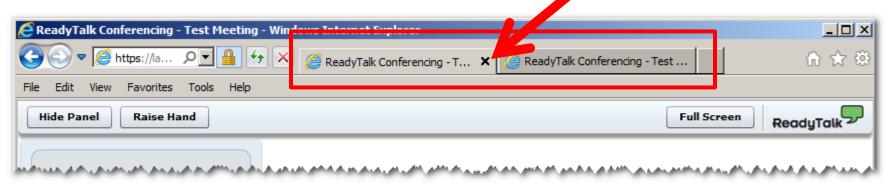
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Troubleshooting Echo

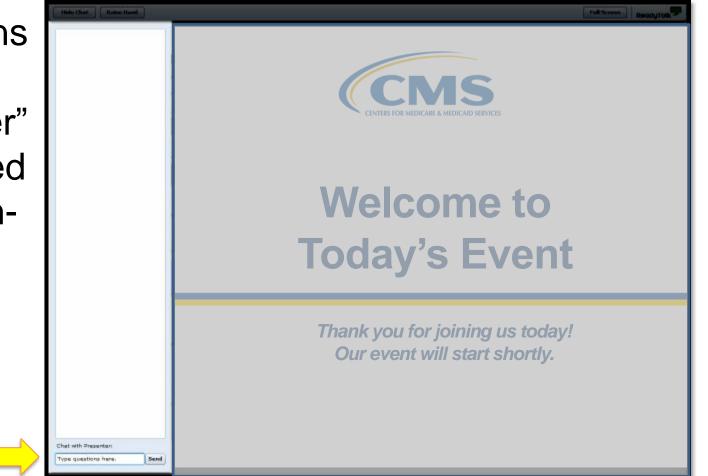
- Hear a bad echo on the call?
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Example of two browsers/tabs open in same event

Submitting Questions

Type questions in the "Chat with Presenter" section located on the bottomleft corner of your screen.





The Ins and Outs of Measure Submission Via a Web-Based Tool

Laurie Ciannamea, MBA Project Coordinator, Outpatient Outreach and Education Support Contractor

February 22, 2017

Reminders

January 1–August 15, 2017 is the data submission period for the measures submitted using the web-based tool on *QualityNet*.

Access your *QualityNet* and National Healthcare Safety Network (NHSN) accounts routinely to ensure your passwords stay active.

For *QualityNet* password problems, contact *QualityNet* at 866-288-8912. For NHSN account issues, contact the NHSN Help Desk at nhsn@cdc.gov.

Save the Date

- Upcoming Ambulatory Surgical Center Quality Reporting (ASCQR) Program educational webinars:
 - March 22–Review of the program requirements and successful reporting
 - April 26–Utilizing tools and resources available to optimize your reporting
- Notifications of additional educational webinars will be sent via ListServe

Learning Objectives

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

- Name the measures submitted via a web-based tool.
- Identify how to collect and report the measure data.
- List the submission periods and the population size for each measure.

Data Submission Requirements

- Claims-based measures:
 - Using Quality Data Codes (QDCs) on claims: ASC-1–ASC-5
 - Outcome Measure: ASC-12
- Measures submitted via a web-based tool:
 - QualityNet
 - NHSN

QualityNet Basic User

- Any user not designated as a Security Administrator (SA) or Security Designee is considered a Non-Administrative or Basic User
- Access is determined by the SA or Security Designee

QualityNet SA

- Submits data and accesses reports via the Secure Portal
- Facilitates the registration process for other users
- Creates, edits, and/or terminates QualityNet user accounts
- Monitors QualityNet usage to maintain proper security and confidentiality
- Serves as the point of contact for information regarding QualityNet

Registering with QualityNet (1 of 3)

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	Facilities • QIOs	A list of the selected hospita on <i>QualityNet</i> .	als is available on the <u>Hospitals - Inpatie</u>	nt Data Validation Overview page	Questions & Answers • Hospitals - Inpatient
	Getting Started with QualityNet • Registration	Full Article » Headlines • CMS issues blanket exen	nption for providers adversely affected	by Hurricane Matthew	Hospitals - Inpatient Hospitals - Outpatient Ambulatory Surgical Centers Inpatient Psychiatric
	Sign-In Instructions Security Statement Password Rules	CMS to release December	rule with comment period published er 2016 Hospital Compare Preview Repo on SEP-1 validation, public reporting for		Facilities • PPS-Exempt Cancer Hospitals
	QualityNet System Security Policy, PDF	Reporting	address CDI risk-adjustment error		Note: First-time registration required
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	Sign up for Notifications and Discussions.	About QualityNet			CART - Inpatient CART - Outpatient
	Known Issues – Hospital Reporting	quality improvement news,	for Medicare & Medicaid Services (CMS), resources and data reporting tools and		CART Module Designe
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	Outpatient ASCs PPS-Exempt Cancer	More »			Enrollment Training, WMV • Question and Answer

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	Ad	ministrators.	-						
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		3000	ASCQR Program Bayport Drive, Suite 3 a, Florida 33607-8415						
	You will be notified by e-mail when registration is complete and your QualityNet account has been activated. The e-mail will also contain your User ID . A Temporary Password will be sent in a separate e-mail. You will need both to complete enrollment for access to the QualityNet Secure Portal.								
	For	access to the Q		complete the <u>New User</u> password and answer a					
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SA Registration Form

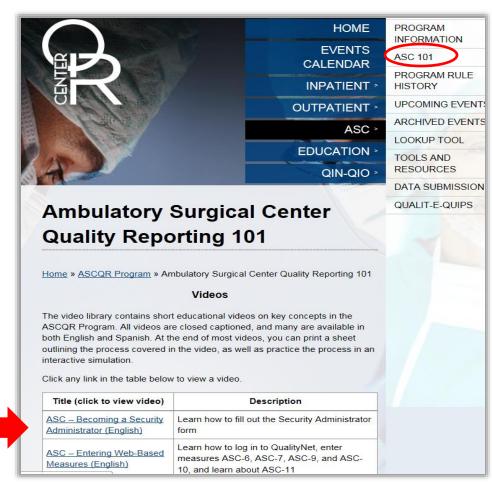
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;	*Note: All fields marked with an aste	risk are red	quired and must be com	pleted to obtain approval.				
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The Go-To Guide

Understanding the Measures

Specifications Manual (1 of 4)

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Specifications Manual (2 of 4)

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Specification Manuals Timelines Version 6.0a	ns	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.							
Version 5.1		Data Collection Time Period Specifications Manual							
Previous Manu	ials	01/01/17 - 12/3	1/17	(Version 6	5.0a			
		07/01/16 - 12/3	1/16		Version 5	5. <u>1</u>			
		01/01/16 - 06/3	0/16		Version 5.0a				
		10/01/15 - 12/3	1/15		Version 4.1				
		01/01/15 - 09/3	0/15		Version 4	<u>4.0a</u>			
		01/01/14 - 12/3	1/14		Version 3.0c				
		01/01/13 - 12/3	1/13		Version 2.0				
		10/01/12 - 12/3	1/12		Version 1	<u>1.0b</u>			
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		Section 1: Mea	sure Information For	ms			
		Section 2: Qua	lity-Data Coding & Sa	mpling Specifications			
		Appendices					
►Download Entire Manual							

Specifications Manual (4 of 4)

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Previous Man	uals	Release Notes					
		▶Introductory №	laterials				
			easure Information F	orms			
ASC-1: Patient Burn ASC-2: Patient Fall ASC-3: Mrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant ASC-3: All Cause Hospital Transfer/Admission ASC-4: All Cause Hospital Transfer/Admission ASC-5: Strophylactic Intravenous (IV) Antibiotic Timing ASC-5: Strophylactic Intravenous (IV) Antibiotic Timing ASC-6: Stafe Surgery Checklist Use ASC-7: ASC Facility Volume Data on Selected ASC Surgical Procedures (available by year end 2017) 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-11: Cataracts - Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy VSection 2: Quality-Data Coding & Sampling Specifications							
		Download Enti	re manual				
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Measure Information Form

	Measure Information Form						
Measure Title: Safe Surgery Chec	eklist Use						
Measure ID #: ASC-6							
Quality Reporting Option: Meas	ure submitted via a web-based tool						
during each of the three critical per		es that includes safe surgery practices o the administration of anesthesia, the ior to the patient leaving the					
 Measure ascertains response to t Does/did your facility use a sat designated period? Yes/No 	the following question: fe surgery checklist based on accepted	l standards of practice during the					
and then Data Submission in the da	Annual data submission period: See the timeline posted to QualityNet.org for this measure; select ASCs and then Data Submission in the drop-down menu. Data entry will be achieved through the secure side of QualityNet.org via an online tool available to authorized users.						
First critical point (period prior to administering anesthesia)	Second critical point (period prior to skin incision)	Third critical point (period of closure of incision and prior to patient leaving the operating room)					
anesthesia) prior to skin incision) patient leaving the operating							
*Safe surgery checklist items are n	ot limited to the examples listed in th	is table.					

www.qualitynet.org

Measures Submitted via the QualityNet Web-Based Tool

Measures Input via QualityNet

Data are:

- Collected for the entire encounter year.
- Reported annually.
- Can be reported at any time between January 1 and August 15, 2017.

ASC-6: Description

Safe Surgery Checklist Use

 Description: The use of a Safe Surgery Checklist for surgical procedures that includes safe surgery practices in each of the three critical perioperative periods

ASC-6: Details

- Yes or no answer to Safe Surgery Checklist Use
- No mandated format or form
- Must include safe surgery practices in each of the three perioperative periods:
 - Period prior to administering anesthesia
 - Period prior to skin incision
 - Period of closure of incision and prior to the patient leaving the operating room

ASC-7: Description

ASC Facility Volume Data on Selected ASC Surgical Procedures

- Description: Aggregate count of selected surgical procedures
- Most ASC procedures fall into 1 of 8 categories:
 - 1. Eye
 - 2. Gastrointestinal
 - 3. Genitourinary
 - 4. Musculoskeletal
 - 5. Nervous System
 - 6. Respiratory
 - 7. Skin
 - 8. Multi-System

ASC-7: Included Procedures

Table 2: Categories and HCPCS for ASC-7

Organ System	CMS Procedure Category	Surgical Procedure Codes		
Eye	Cornea	65756		
	Anterior chamber	65855, 66250		
	Anterior sclera	66170, 66180, 0191T		
	Iris, ciliary body	66711, 66761,		
	Lens	66710, 66821, 66986		
	Intraocular lens (cataract)	66982, 66984		
	Vitreous	67036, 67040, 67041, 67042		
	Retina or choroid	67108, 67113		
	Eyelids	67840, 67900, 67904, 67917, 67924, 67950		
Gastrointestinal	GI endoscopy	43239, 43251, 45331, 45380, 45382, 45384, 45385, 45388, 45390		
	Hernia repair	49505		
	Laparoscopic cholecystectomy	47562		
Genitourinary	Endoscopy	52204, 52224, 52234, 52235, 52287		
	Hysteroscopy	58558		
	Transurethral surgery	52281, 52310, 52356		
	Prostate biopsy	55700		

ASC-7: Details

- Includes all patients, all payers
- Reflects total number of specified surgical procedures performed by the ASC
- Top 100 procedure codes based on last year's claims data
- Reported as a total by organ system

ASC-9: Description

Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients

 Description: Percentage of patients aged 50 to 75 years of age receiving a screening colonoscopy without biopsy or polypectomy who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report

ASC-9: Details

- Denominator
 - All patients aged 50 to 75 years of age receiving screening colonoscopy without biopsy or polypectomy
- Numerator
 - Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report

ASC-10: Description

- Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use
- Description: Percentage of patients aged 18 years and older receiving a surveillance colonoscopy, with a history of a prior colonic polyp(s) in previous colonoscopy findings, who had a follow-up interval of 3 or more years since their last colonoscopy

ASC-10: Details

- Denominator
 - All patients aged 18 years and older receiving a surveillance colonoscopy with a history of a prior colonic polyp(s) in previous colonoscopy findings
- Numerator
 - Patients who had an interval of 3 or more years since their last colonoscopy

ASC-11: Description

- Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery
- Description: Percentage of patients aged 18 years and older who had cataract surgery and had improvement in visual function achieved within 90 days following the cataract surgery

ASC-11: Details

- Denominator
 - All patients aged 18 years and older who had cataract surgery and completed **both** a pre-operative and post-operative visual function instrument
- Numerator
 - Patients who had improvement in visual function achieved within 90 days following cataract surgery, based on completing **both** a pre-operative and postoperative visual function instrument

ASC-11: Survey

Definition for Survey: An appropriate data collection instrument is an assessment tool that has been validated for the population for which it is being used; this measure uses a visual function survey.

Population

Sample size specifications:

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	0

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Entering Data

Logging into QualityNet

CMS.gov QualityNet Centers for Medicare & Medicaid Services	
Log In to QualityNet *Required Field Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit. *User ID	Help Start/Complete New User Enrollment Forgot your password?
* Password	Trouble with your Security Code? Need to register for a
* Security Code CANCEL SUBMIT	QualityNet account?

Choose a Program

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CMS .gov QualityNe	et				Search QualityNet.org
Home 🗸	Quality Programs	My Reports → 🗸	Help 👻		
and healthcare qualit Physician offices, Nu To Request Access	Physician Quality Report QMARS - Quality Manag End Stage Renal Diseas Quality Improvement Org Oviders and outers, Quality y data exchange between: rsing homes, End Stage R	emnt and Review System e Quality Reporting System anizations verify the only CMS-approve Quality Improvement Organ enal Disease (ESRD) netwo application select Access Ir	ticaid Services (CN tools and applicati or secure communi izations (QIOs), Hospitals, rks, facilities, and data vend	ions for cations	QualityNet News • Hospitals randomly selected for FY 2019 inpatient data validation • CMS issues blanket exemption for providers adversely affected by Hurricane Matthew • CY 2017 OPPS/ASC final rule with comment period published More News
Quality Programs					 Announcements from QualityNet Team Maintenance downtime scheduled for Dec. 8-12 Maintenance downtime scheduled for Nov. 18-21 Maintenance downtime scheduled
Hospital Quality Report Physician Quality Report	gram use the menu above ing: IQR, OQR, ASCQR, IPFQF rting System				for Oct. 21-24 More Announcements
QMARS - Quality Mana End Stage Renal Disea Quality Improvement O	igemnt and Review System ise Quality Reporting System rganizations				QualityNet Events The QualityNet Event Center provides a schedule of upcoming (live) training sessions, as well as trainings hosted by QIOs for healthcare providers in their respective states. Also listed are details, including date, time, duration of the event, and panelists/moderators. To view the schedule, visit QualityNet Event Center

Finding the Data Input Page

1 Alerts (0) 🖂 Notifications (42)	Secure File Transfer User Profile 🗸	📑 Log Out	Laurie Cianname
gov QualityNet		Sea	rch QualityNet.org
Home - Quality Programs -	My Reports - Help -		
ome>Quality Programs>Hospital Quality Reporting: IQR, Quality Reporting System: My Task:	5		
Hospital Reporting Inpatient / Outpatient	Manage Measures View/Edit Structural/Web-Based Measures/Data Acknowledgement (DACA)	Manage Security Manage Multifactor Credentials My Account	
Manage Notice of Participation lew/Edit Notice of Participation. Contacts. Campuses	Vendor Authorization Authorize Vendors to Submit Data	Hospital Reporting Inpatient View / Edit Measure Designation	

Selecting the Program

Start Structural/Web-Based Measures	, IPFQR, PCHQR>Manage Measures>View/Edit Structural/Web-Based Measures/Data Acknow 12/08/2010	6 06:49:05 PT
View/Edit Structural/Web-Based Measures/Data A structural measure reflects the environment in which providers care for patients. Structural measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes requesting structural measures information will encourage facilities to increase the use of tools, ultimately improving the quality of care provided to Medicare beneficiaries. Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.	Select a Program Inpatient Structural Measures/DACA Inpatient Web-Based Measures Outpatient Web-Based Measures Inpatient Psychiatric Facilities Web-Based Measures/DACA Ambulatory Surgical Center Web-Based Measures PPS Exempt Cancer Hospitals Web-Based Measures PPS Exempt Cancer Hospitals DACA	

Selecting the Payment Year

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Submitting the Data (1 of 3)

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Submitting the Data (2 of 3)

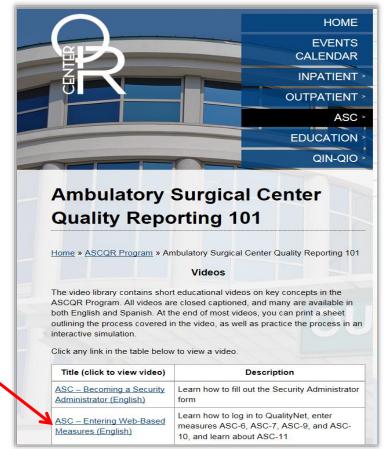
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Submitting the Data (3 of 3)

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For More Information

www.qualityreportingcenter.com



www.cdc.gov/nhsn

Measure Reported to NHSN

ASC-8

Influenza Vaccination Coverage among Healthcare Personnel

- Reports the number of facility employees who received flu immunization
- Requires separate registration
- Data collection period: 10/01/16–3/31/17
- Data submission period: 10/01/16–5/15/17
- More information: <u>www.cdc.gov/nhsn</u>

Where Do I Submit Data?

NHSN		<u>CDC</u> > <u>NHSN</u>		
NHSN Login		New to NHSN? Enroll Facilit	y Here.	
About NHSN	+	Select Your Facility Type		
Enroll Here	-	f ⊻ 🕂		
Enrollment for Ambulatory Surgery Centers	+	Acute Care Hospitals / Facilities	Ambulatory Surgery Centers	Long-term Acute Care Facilities
Acute Care Hospitals/Facilities	+			
Enrollment for Long- term Acute Care Hospitals/Facilities	+			
Enrollment for Inpatient Rehabilitation Facilities	+	Enrollment for urgent care or other short-term stay facilities (e.g. critical	Enrollment for outpatient surgery centers.	Enrollment for long-term acute care hospitals (LTACs).
Enrollment for Inpatient Psychiatric Facilities	+	access facilities, oncology facilities, military/VA facilities	More >	More >
Enrollment for Long- term Care Facilities	+	More >		

Helpdesk: NHSN@cdc.gov

For More Information

www.qualityreportingcenter.com

ASC: Influenza Vaccination Summary for ASCs - 1 C.E.

Date: October 26, 2016

Topic:

This webinar will be presented by NHSN/CDC and will review the process for accessing and entering the NHSN/CDC on-line tool. They will review data entered and the verification process of that data as well as updated tips and tricks to the timely and effective reporting of the ASC-8 measure.

Time:

2:00 – 3:00 PM EST

Objectives:

- · Provide an overview of the NHSN and the Vaccination Module
- Describe reporting requirements for the Vaccination Module
- Review entering data and data for the Vaccination Module and verification in NHSN

Target Audience:

Individuals within the Ambulatory Surgical Centers setting who report data to the NHSN/CDC and/or the ASC Quality Reporting Program.

Checking on Your Data

Look-Up Tool

- Located on the support contractor website: <u>www.qualityreportingcenter.com</u>
- Allows you to check:
 - Web-Based Status Listing for all measures entered using an online submission tool
 - Availability of a Claims Detail Report for the ASC-12 measure
 - CCN for your facility

Mid-Year Report

- Sent through the Secure File Transfer in *QualityNet*
- Provides a snapshot of your facility's QDC submission rate
- Contains graphics comparing state and national QDC percentage of claims
- Shows QDC percentage by county for your state
- Provides measure rates per 1,000 claims by quarter

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 <u>dprice@hsag.com</u>.

CE Credit Process: Survey

Please provide any additional comments	
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~	
10. What is your overall level of satisfaction with this pr	resentation?
◯ Very satisfied	
Somewhat satisfied	
O Neutral	
Somewhat dissatisfied	
Very dissatisfied	
If you answered "very dissatisfied", please explain	
^	
~	
11. What topics would be of interest to you for future pro	recentations?
The what topics would be of interest to you for future pro-	esentations?
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12. If you have questions or concerns, please feel free to	o leave your name and phone number or email address and we will contact you.
12. If you have questions or concerns, please feel free to	to leave your name and phone number or email address and we will contact you.
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12. If you have questions or concerns, please feel free to	

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

Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21- 2015
Email: Phone:

CE Credit Process: Existing User

HSAG HEALTH SERVICES ADVISORY GROUP		this is a secure site please provide credentials to continue
	Secure Login User Name: Password: Log In	

Thank You for Participating!

Please contact the Support Contractor if you have any questions:

 Submit questions online through the QualityNet Question & Answer Tool at <u>www.qualitynet.org</u>

Or

• Call the Support Contractor at 866.800.8756.