Help, I'm New: The Why, Who, What, Where, and When of the ASCQR Program

Presentation

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Karen VanBourgondien: Hello, and welcome to the Ambulatory Surgical Center Program webinar. Thank you for joining us today. My name is Karen VanBourgondien, an education coordinator for the ASCQR Program. If you have not yet downloaded today's handouts, you can get them from our website at www.qualityreportingcenter.com. Just click on today's event, and you should be able to download the handouts. They are also attached to the invite you received for this webinar. As you can see, we are live streaming in lieu of using only phone lines. However, phone lines are available should you need them.

Our speaker today is Melissa Thompson. Melissa is a Project Nurse Manager for the ASC and OQR Programs. She's a certified med-surg nurse with a diverse background in healthcare.

But before we begin today's program, I would like to just highlight some important dates and announcements. January 1st began the submission period for the web-based measures that are entered through QualityNet. The submission deadline is August 15th, 2017. Remember, though, that the submission deadline for the ASC-8 measure, the flu vaccination measure, is May 15th.

As a reminder, please be sure to keep your QualityNet and NHSN passwords active. You can do that by logging into your accounts on a routine basis. If you do not do this routinely, sometimes the account can be locked. The easiest way to avoid that issue, of course, is to just log in, you know, say, every 60 days or so. If you have any problems with your log-in capability on QualityNet, you would need to call their Help Desk directly, and their number is here on the slide. And for any problem with the NHSN account, you would want to contact the NHSN directly, and you would resource the email address you see here.

Please join us on February 22nd; we will be presenting a comprehensive webinar on the web-based measures. This will be a great presentation for folks that are new and trying to figure out these measures. We will be sharing important information that will assist you in the abstracting and reporting of these measures.

On March 22nd, we will be presenting a webinar reviewing all of the program requirements and making sure that you have everything you need to meet the program requirements.

Any information regarding program updates or educational opportunities will be sent via ListServe. If you are not signed-up for this automatic email service, you can do so on the QualityNet home page. For those of you who are not familiar with that, Melissa will talk about that during the presentation.

The learning objectives for this program are listed here on this slide. The program is being recorded. A transcript of today's presentation, including the questions and answers received in the chat box and the audio portion of today's program, will be posted on www.qualityreportingcenter.com at a later date.

During the presentation, as stated earlier, if you have a question, please put that question in the chat box located on the left side of your screen. We have various subject matter experts available, and they will respond to your questions directly.

So without further ado, let me turn things over to our speaker for today, Melissa Thompson. Melissa?

Melissa Thompson: Thank you, Karen, and hello to everyone. Before we get started in the depths of things, let me just start with a brief history of the program.

The ASC Quality Reporting Program, also referred to most commonly as the ASCQR Program, is a quality measure data reporting program that was

implemented by the Centers for Medicare & Medicaid Services for care provided in the ASC setting.

ASCs that meet program requirements during a given calendar year will receive their full payment update for the upcoming calendar year. ASCs that meet program requirements but, however, do not participate or failed to meet those requirements may receive up to a two percent payment reduction of their payment update. To participate in the program, an ASC submits quality measure data. Now keep in mind that once an ASC submits any quality measure data under the ASCQR Program, the ASC is considered to be participating in the program.

Now let's take a closer look at the program. We're going to basically talk about the why, who, what, where and when of the program.

Let's start with, "Why is an ASC reporting quality data?" It's all about quality. The existence of the ASCQR Program is to promote higher quality, more efficient healthcare for Medicare beneficiaries, and the way that's done is through quality data reporting. It is also through creating quality improvement initiatives and alignment of measures with other clinical care settings to promote the continued highest quality of care. Notice the common thread right here is quality, but there's more to why you are reporting.

All data reported will be publicly displayed. It is important to CMS to provide the public access to the data you report. It's also important to facilities because they can use this data to compare themselves to other, like facilities. The intention of CMS is to have transparency for their quality reporting programs, and as such, the public has access to the quality and great work performed in the ASCs across the nation. That data will be displayed on the Hospital Compare website, so let's go over that. Hospital Compare is the CMS Website that lets consumers compare the quality of ambulatory surgical center services by comparing their quality data. This data is updated quarterly, and by updated, that means that the new data will be added or replaced on that quarter while other data will stay the same. That's because different measures are reported and updated in various times throughout. This will become more clear as we proceed in discussing the measures themselves. This display allows the public access and freedom to evaluate and compare facilities.

Stepping back, before your data is displayed publicly, CMS will send your ASC a preview report of the data that will be posted on Hospital Compare. Previous reports will be sent via your QualityNet Secure File Transfer, and the reports are available for approximately 30 days. Please make sure you print or copy this report from your Secure File inbox because after 30 days, this report is removed from your Secure File Transfer and you will not be able to retrieve

it. Keep in mind you will have to have appropriate secure access on QualityNet to receive this report, and, hold on, we'll discuss that in just a moment.

So who exactly does participate in the ASCQR Program? Facilities who participate that have 240 or more Medicare claims, which can be primary and secondary payer, per year should report. And with that, 50 percent of their submitted Medicare claims must have appropriate Quality Data Codes, or QDCs, and they also have been referred to as G-codes. The current QDCs are all G-codes, but other types of codes are possible as well. We'll go further into the QDCs a little bit later in the presentation, so just hold on to that. On the flipside, facilities with fewer than 240 Medicare claims per year for a reporting period are not required, but still can provide data voluntarily.

Facilities are also required to submit a set of measures via a web-based tool through the QualityNet Secure Portal and then one measure to the CDC's National Healthcare Safety Network, or NHSN, portal. Having secure access is a priority, and you will need this in order to submit your data. There are two different websites you will have to have access to, and we'll discuss each one of those in detail.

I'm going to review participation status now. Again, an ASC is considered participating once the ASC submits any quality measure data, like the QDCs on claim forms or via the online tools to the ASCQR Program. There is no form needed to fill up that says, "Hey, I'm participating." You are simply participating once you submit those QDCs.

ASCs may withdraw, though, at any time up to August 31st of the year preceding a payment determination. ASCs that withdraw may incur up to a two percentage point reduction in their annual payment update, or APU, for that payment determination year and any subsequent payment determinations in which it has withdrawn.

So, what happens if a facility meets the minimum threshold of 240 or more Medicare claims but fails to provide the data? That's a good question. If a facility meets the 240 or greater Medicare claims threshold but does not meet one or more of the program requirements, they are at a risk of a two percent reduction of their annual payment update. That being said, not all is lost; this reduction only affects that payment year determination and not future APUs, so long as the program requirements are met in subsequent years. We'll provide an example. If an eligible ASC did not meet the program requirements, then the facility stands to lose the two percent reduction in payment for the upcoming calendar year, but facilities always have the option of filing a request for Reconsideration. This process is set forth to provide facilities the opportunity to demonstrate to CMS why, in fact, they should

receive their full payment update. CMS will communicate their decision in writing within 90 days following the deadline for submitting reconsiderations. This process and the appropriate forms are found on the QualityNet website.

So, what exactly do you absolutely need to know about the ASCQR Program? Well, there's a lot to learn, but we're going to start with what drives the program first, and that is the Final Rule.

The Final Rule is essentially the CMS document that tells you what the requirements for the program are. Okay, so a closer look at how rule-making works. CMS first proposed a new requirement for the program, and then asked for the public and any interested organizations to provide their opinions about the proposal through what's called the comment period. It's a very interactive process. CMS wants your comments. It's your opportunity to have an impact on the program and offer your thoughts and recommendations. The Proposed Rule is usually published in early July, and any comments that are made or sent to CMS, all of them are read and considered before changes are finalized for the publication of the Final Rule later in the year.

Providers are highly encouraged by CMS to submit comments on the proposed regulations affecting the rule-making for the current year and future years. CMS does address each comment and does respond to each comment. This is a time when facilities can be involved in policy-making. This process is essentially the place to allow feedback and exchange of ideas. The comment period is open for 60 days following the release of the Proposed Rule, and keep in mind, you do have the option to remain anonymous when you're leaving your comments. Once all the comments are obtained and reviewed, CMS makes decisions regarding the Proposed Rule, and that's when those decisions become the Final Rule. The Final Rule is then published annually around November, and by law, it must be displayed in the *Federal Register*.

And speaking of the Final Rule – here on this slide, we're looking at the Final Rule. The direct links to the main *Federal Register*, as well as the direct link to the part of the Final Rule that pertains to this program, are listed on the slide. I do recommend that you check out our webinar from November. It covered the 2017 OPPS/ASC Final Rule in detail. You can find that at www.qualityreportingcenter.com. When you go there, you hover over the **ASC** tab and then click on **Archived Events**. CMS representatives presented this information regarding the Final Rule and did so in much detail. We are now going to move on to the actual measures themselves that are reported in the program.

Now, remember a little bit earlier in the presentation I was talking about QDCs and told you we would talk about them? Well, here they are. On this

slide are the claims-based measures. You will notice here that they are a bit divided. ASC-1 through -5 are QDCs that are placed on Medicare Fee-for-Service claims. ASCs submit information on these measures using the QDCs entered on the claim via the CMS 1500 paper form or an equivalent electronic form.

The last measure on the slide, ASC-12 – now this is an outcome measure. These are calculated from CPT codes on paid Medicare Fee-for-Service claims. Your facility does not have to actively report or abstract this data. This information is extracted from paid Medicare claims using certain criteria. And again, I have mentioned Quality Data Codes, or QDCs, several times, so let's look closer at those.

Okay. QDCs are specified CPT Category II codes or Level II G-codes that describe the presence or absence of an event, for example, a patient burn or fall. The Medicare claims submitted must have a minimum of two QDCs on them. Again, to ensure compliance with the program requirements, claims submitted to Medicare must include the appropriate code with a minimum of two and a maximum of five QDCs. And with that, there's also a line-item charge entered, and even the numeral zero works. Keep in mind that some systems do not allow a zero line-item charge. A nominal amount of just one penny can be substituted, and, of course, the beneficiary is not going to be liable for that penny.

Going back to program requirements, 50 percent of your submitted Medicare claims to the Medicare Administrative Contractor, or MAC for short, must have the correct codes and appropriate number of QDCs – and that's 50 percent of them – have to have the correct codes and appropriate number of QDCs. You can find more on QDC submission guidelines in the link provided on this slide.

One other note, QDCs must be included on the claim when submitted to the MAC. Claims cannot be resubmitted just for the sole purpose of adding QDCs after the claim has been adjudicated or paid. We presented a very comprehensive two-part webinar on QDCs back in March of 2016, and again you can find that under the ASC **Archived Events** at www.qualityreportingcenter.com.

So, let's review – if your facility does not always meet the 240 or greater Medicare claims in a year, what happens if you vacillate a little bit back and forth: some years you're over, some years you're under? What you're seeing on this slide was taken directly from the 2017 OPPS/ASC Final Rule. It's basically saying that your current claims, or QDC codes, will be the basis of your abstraction requirement for the following year. If your facility does fluctuate above or below this 240, it can cause some confusion, which we

want to avoid. So, what's the solution if the volume with your Medicare claims varies from year to year?

Well, you can see here on the slide what the solution is: just report the QDCs. You do not want to be at the end of the year and have gone over that 240 mark and have not reported in the QDCs, because at that point you cannot compensate, and the facility is at risk of losing two percent of their annual payment. In essence, just report QDCs on all your claims all the time, and that's never going to be a cause for concern. Now that we've covered claim-based measures, we're going to move on to the measures that are submitted via an online tool.

The measures listed here on this slide are the measures submitted via the web-based tool and entered into the QualityNet Secure Portal.

We're going to start with ASC-6. This question asks, "Does your facility use a safe surgery checklist based on accepted standards of practice?" And this is just a simple yes or no answer into the portal.

ASC-7 – with this measure you're counting the number of surgical procedures that your ASC performed that match the codes provided to you in the Specifications Manual. It is divided into organ systems, and if you have no procedures done under an organ system, you would then enter zero. Do not leave any blank organ systems. You'll have to use your resources in your Specs Manual to get these codes.

ASC-9 – this measure looks at the recommended follow-up documented by the physician for patients who have a screening colonoscopy. To meet the measure requirements, the physician must document a recommended follow-up of at least 10 years on the colonoscopy report.

ASC-10 – this measure looks at the interval since the last surveillance colonoscopy. ASC-10 is a measure designed to look at inappropriate use of the colonoscopy procedure.

And then lastly here we have ASC-11 – this measure monitors the patient's visual improvement post-cataract surgery through a visual assessment tool. This is a voluntary measure. You do not have to report on this measure, and it will not impact your annual payment update. Be advised though, if you do report data, this data is subject to public reporting.

This measure is presented separately from the measures we just talked about on the previous slide. This measure is submitted using an NHSN web-based tool. This is the only measure submitted via web-based tool that is not reported to QualityNet. This is completely separate from the QualityNet

reporting tool, and thus it requires a separate registration and a separate password. The encounter dates follow the flu season. Basically, for the current reporting period, the encounter dates are October 1, 2016 through March 31st of 2017. This data needs to be reported no later than May 15 of 2017. Now since the registration is different from QualityNet, let's talk briefly about that process and how you access the CDC or NHSN website, and then after that we'll go further into detail about QualityNet.

Again, there will be two websites that you will need to secure access to and this is where you're going to submit that data to as well. And since we were just talking about NHSN, we're going to start there. First, just a very brief background on NHSN, the National Healthcare Safety Network, referred to as the NHSN, provides facilities, states, and the nation with data needed to identify some problem areas. It measures the progress of prevention efforts and important healthcare process measures, such as healthcare personnel influenza vaccination status. And it is this last point, the measuring of healthcare personnel influenza vaccination status, which we call ASC-8, is all about, and this is the site where you will enter that data.

Remember, again, this is a completely different site, a different enrollment, and a different submission portal than the QualityNet. If your facility has not enrolled within NHSN, this is where you would start, where it's circled here in red. A facility only needs to enroll one time. You do not re-enroll each year.

Here again in red is the enrollment portal for ASCs. It cannot be stressed enough how important it is to enroll a facility, as well assign a Facility Administrator, well in advance in the due date for submitting ASC-8, which again this year is May 15, 2017 for the calendar year 2018 payment determination. I stress this because, even if the facility is already registered with NHSN, it still takes several weeks to process an application and become a Facility Administrator. And no one wants to go through that whole process and then find you can't get your application completed in time to provide the data submitted by the due date.

Going back to facility enrollment, this is basically a five-step process with very specific details and timelines associated with most of the steps. Just be sure to carefully review the enrollment process and follow it. Now if the facility is already enrolled, you do not need to enroll again. And if you are unsure if your facility is enrolled, you can email them directly at nhsn@cdc.gov to find out.

Let's talk about the required Facility Administrator for the NHSN for the submission of ASC-8. So, let's say you find out that your facility is already enrolled, but you need to change the person assigned to the Facility

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Administrator role. This request to change can be submitted by fax on facility letterhead. I'm going to provide you with that number. That fax is 404-929-0131. Include on that letter the name of the new Facility Administrator, their email address, the facility's name, facility address, and facility phone number. And if you happen to have the facility's five-digit NHSN ID, include that also, but it's not required. And again, that fax number is 404-929-0131. Also, I want to mention that the NHSN website has lots of videos and tutorials with regard to reporting. Additionally, NHSN did present a webinar for the ASCs, and that webinar is posted on the qualityreportingcenter.com website. Toward the end of this presentation, I'll review and provide the links to these sites as well as other sites mentioned throughout this presentation.

So now we're going to switch gears and talk about QualityNet. You're going to need to know this website well. QualityNet is the only CMS-approved website for secure communication and healthcare quality data exchange among ASCs, QIOs, hospitals, physician offices, end-stage renal disease networks, and other facilities and vendors. That site can be accessed at www.qualitynet.org. Now let's take a look at that site.

The QualityNet website is the CMS website where you will find not only information on this program and others, but you will also submit your data for some of the measures on the secure side of this website. To access the secure side and enter data, you will need the appropriate access, and we'll talk about that in just a minute. What you're looking here on this slide is a screenshot of the QualityNet home page. We've circled the ASC program here in red. If you simply hover your cursor over that tab, you'll see a drop-box come down. I'm first going to point out – shown here where the red arrow is – a very, very important document, one that you're going to reference often, and that's the Specifications Manual. You will always refer to the Specifications Manual to guide you in abstracting and reporting of the measures for the program.

This manual is developed to provide a uniformed set of quality measures that reflect what is in the Final Rule. It's pretty handy. If you click on the Specifications Manual, you'll be brought to this page. It will let you choose whatever version you want. A word about versions: you will notice there is also a data collection time period next to each version. That will tell you what version of the Specifications Manual you should be looking at for specified data collection time period. For example, January 1 was the start of the new manual, version 6.0, or the data collection period of January 1 to December 31st of 2017. Let's just check on that and see what it looks like.

After you scroll down and agree to the terms of use – which I skipped that screenshot – this is what you will see. Now, I chose to click on Section 1, which is the Measure Information Forms. And as you can see, it opens another drop box where you have a link to each measure. It's a good idea to

go into the menu and really look it over and become really comfortable using it. We're not going to get any deeper, as there's just too much to cover. In fact, I recommend you to review another one of our webinars, and that was in December, and that was completely dedicated to this Specifications Manual. A link to that webinar is here on this slide. The important thing to take away from this is that the Specifications Manual will guide you on the measures and how to abstract them.

Now the next thing and very important topic is Security Administrator, and again, this is in the qualitynet.org site. Now, so far on the previous slides, what we've looked at on QualityNet is available to anyone in the general public to view. But we're going to turn our attention to the part of the QualityNet and the ASCQR Program that requires more clearance, and that is the Security Administrator for your facility.

A Security Administrator, or SA, is the person who will have access to and the ability to submit the measures that are done via a web-based tool. He can also run reports from the QualityNet Secure Portal and also has access to the Secure File Transfer. It is highly recommended, although not required, that a facility assign two Security Administrators so if in any event that an SA, for whatever reason, is no longer available, there's a back-up. Unfortunately, we do have people call on some of the last days of the data submission saying that their SA is no longer there and the facility has no back-up. Please do not be that facility. You do not want to fail the program requirements because you did not have someone available to enter the data.

So, what exactly is the role of the Security Administrator? Before we walk you through becoming a Security Administrator, let's talk about the role of the Security Administrator and the Basic User, which is another option. Some distinctions between the SA and the Basic User are shown on the slide. To summarize, the Security Administrator is the one who submits the data, handles the registration process for other users in the facility, which is the Basic User. They create, edit, terminate, and review the user accounts, and they can also have the access to resetting Basic User passwords. Another important role is the ability to access the Secure File Transfer on QualityNet. These are reports specific to your facility that will be sent to this file. Occasionally, though, you'll also be uploading files in certain circumstances.

You can see that the role of the Security Administrator is very important. And that is why, on the previous slide, we were saying it's so highly recommended that ASCs designate at least two people as their QualityNet Security Administrators; one to serve the primary QualityNet Security Administrator and the other that serves as a back-up or designee. And, of course, earlier in the slide, I mentioned Basic Users. So, let's look at that.

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What is a Basic User? This is someone that has limited access to the QualityNet secure website, and what access they do have is determined by the Security Administrator. It could be someone just to run reports, so the SA would then assign that Basic User only the right to download reports. Now there is still a registration process for the Basic User, and you can find the registration form and information on that on the same qualitynet.org registration page. Okay. So how do you become an SA?

We're going to go back to the home page of QualityNet, and you'll find several blue text boxes to the right and left of the screen. To register, you will click on **Registration** located where you see the red box on the slide. After you click on **Registration**, you will need to select the user classification, and in this instance, we're going to want to select **ASC**.

At the next screen, we're going to choose between Security Administrator or Basic User, so you're going to click on the SA hyperlink shown here in the red box. When you click on **Security Administrator**, you will come to this screen. This page is going to explain the registration process and have a link to the registration packet. Please make sure you follow instructions and fill this paperwork out appropriately, and you're going to mail it to the address seen here. It's also on the application. Again, the registration packet will walk you through how you register.

Once you complete the registration process, it will take at least two weeks to become registered with QualityNet, but you aren't done yet. Once you receive notice of being registered – which will be sent to you via email – and that process has been completed, you're going to receive two emails: one with your username and the other with a temporary password.

Be on the lookout, though, because this could sometimes end up in your spam. That email that comes to you with the temporary password – it's only valid for 48 hours after it's issued, so you want to make sure you look for it and find it before it expires. Then you're going to need to complete a new user enrollment process that involves answering some security questions and then changing your initial password.

And while we're on the subject of registering for a new SA, it's good for us all to show you how to sign up for email communications. If you haven't done this already, I very much recommend that you do it right away. Anyone can sign up. It's not just for SAs, but certainly SAs will want these notifications. The email notifications are delivered through ListServe. Users that register for one or more of these notification lists will receive the latest updates, including documentation, technical information, when reports are available, new downloads, and anything pertinent to the program or programs selected when registering. Keep in mind this is not a two-way communication

email, meaning you will not be allowed to reply to these email communications. So, again, from the home page and to the left side panel, you will see the link as circled here in red. Simply follow the steps. It's easy to do, and then you'll be in the loop.

So far we've covered the why, who, what, and where. So how about we talk about when do you submit?

Remember, an ambulatory surgical center must submit QDCs for ASC measures 1 through 5 on the Medicare claim form 1500 or electronic equivalent for services furnished when Medicare is the primary or secondary payer. They must be submitted correctly and completely, and again, we're going to emphasize there needs to be a minimum of two QDCs and a maximum of five QDCs on at least 50 percent of the ASC Medicare claims. Now this percentage will be based on the number of claims for calendar year 2016 paid by the Medicare Administrative Contractor by April 30th, 2017.

ASC-12, which is the Facility 7-day Risk-Standardized Hospital Visit Rate After Outpatient Colonoscopy is also a claims-based measure and will be calculated from 2016 Medicare administrative claims and enrollment data for patients aged 65 and older that meet the measure requirement. There is no data abstraction responsibility on the part of the facility for ASC-12.

ASC-6, -7, -9, -10, and -11 – the data submission period for these measures, which are submitted via a web-based tool to QualityNet, began on January 1st, 2017 and will extend through August 15th, 2017. Data submitted for these measures will reference the clinical encounter time period of January 1st, 2016 through December 31st, 2016. Again, as a reminder, submission of data for ASC-11 is voluntary.

The ASC-8 data submission period – which is also submitted via a web-based tool, but it is through the National Healthcare Safety Network, or NHSN, and not QualityNet – the ASC-8 submission period began on October 1st, 2016 and will extend through May 15th, 2017. This is a different date than the other measures. May 15th, 2017 is the very last day that this data can be submitted for ASC-8. And the data submitted for this measure is referencing the influenza season of October 1st, 2016 through March 31st, 2017.

Now, throughout this presentation, we have mentioned several websites and references. In addition to QualityNet, there is a Support Contractor website that we mentioned that has an immense amount of information to assist you in your success, and you can see that address here on this slide. We're also going to show it again at the end of the presentation. We will not have time to cover this site in detail today, but I will hit some highlights anyway to what we've already been talking about.

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When you go to the home page of www.qualityreportingcenter.com, if you hover your cursor over the **ASC** tab – you can see that highlighted in white here, which is how it's going to appear when you hover it – and a menu will open up to your right. There are a lot of tabs filled up with a lot of information. And as I said, we're not going to go over all the tabs. I just want to point out some of the more important ones, the ones you might want to look at first.

Okay. So let's start with the **Program Rule History** tab. If you click on that, you'll have access to all the past Final Rules, including the most recent Final Rule that pertains to this program.

Then there's the **Tools and Resources** tab, and it is full of information. It has information on program resources, measure resources, and so much more. This is like a treasure trove for anyone, but especially for those new to the program.

Another tab is the **ASC 101** tab which is enclosed in the red box that you see on the screen. That tab will take you to somewhere very important and show you some resources that are especially good for those of you that are new.

So, let's go ahead and take a look at that tab. If you click on **ASC 101**, this is the page that would come up. On the top, you can see all the videos available. These are just short six- to eight-minute videos on subjects listed here on the slide. And then under the resource section are valuable informational documents to assist you in starting out in the right direction. I suggest you access and print the "Step-By-Step Guide For New Facilities." This is a great starting point to familiarize yourself with the program.

Okay. Now if we go back to the home page, if you were to choose the **Archived Events** tab which is circled here in red, you would be directed to a page that stores years of informational webinars. I mention this specifically because I referenced previous webinars several times during this presentation, and this is exactly where you can find them. You can also choose **Upcoming Events**, which is right above **Archived Events**, to view what is coming your way.

We've talked about both QualityNet and Quality Reporting Center websites. I do want to mention again the ListServe, or email notifications, that we talked about. Updates and important information about the program is sent directly to the email you signed up with. It's a great and easy way to stay informed about the program.

Once you get going and you find you have questions, feel free to call our helpline listed here on this slide, or enter your questions into the question-and-

answer tool. Your answer will be sent via email. This tool can also be accessed through QualityNet.

Well, that's going to do it for me, so I'm going to hand you back over to Karen. Karen?

Karen VanBourgondien: Thank you, Melissa. That was all great information. Thank you so much for sharing all that with us.

What I'd like to do is just go over some questions and hopefully provide some good answers to help clarify some of the information that you provided today. So I have some questions here, and let's start with this, and this is actually a pretty frequent question.

The question is this: "I know our facility is enrolled with NHSN, so I only have to fax in the new name of the Facility Administrator on letterhead to have this person activated? Can you elaborate on that a little bit?"

Melissa Thompson: Yes, Karen. That is actually a great question. So, after you've faxed the required information on that facility letterhead, you're going to be on the lookout for a welcome email, and you're not done. From there, you're going to have to follow the process in the email to register for a SAMS grid card. Basically, it's identity verification documentation.

And once that's done, you'll receive another email notifying you that your SAMS access has been approved. Keep in mind – the SAMS grid card is also delivered to your home address, not to the facility, so it doesn't just end with sending that letter. There are a couple of more steps.

Karen VanBourgondien: Thank you, Melissa. I appreciate that. I have another question here, and this person said: "You mentioned email notifications. I'm not the SA for our facility, but I would like to be involved in quality and think it would be helpful to receive these notifications. Is that possible?"

Melissa Thompson: Absolutely. Registration to the ListServe is open to anyone. It's not just for the Security Administrators. It's basically a great way for anyone to get reminders of the upcoming reporting deadlines, educational opportunities, newsletters that communicate topics that are important to the ASC community, and, of course, the notification of reports when they become available. But, no, anyone can register for those email notifications. That's a good question.

Karen VanBourgondien: And they would see that from the QualityNet home page where you showed them, basically. They can review that. Okay.

Melissa Thompson: Exactly.

Karen VanBourgondien: Another question here is: "I'm confused about what and when Hospital Compare is updated."

Melissa Thompson: I completely understand that question because it is – it is – it can be very confusing. And that's because some of the quality data have different reporting timelines, so I recommend that people visit the Hospital Compare website, which is at www.medicare.gov/hospitalcompare, and from there you can get a lot more detailed information. It's too hard to cover here. There's just – there is a lot to it. There's also a quick reference guide available on QualityNet's website that outlines the public reporting of the measures.

Karen VanBourgondien: Okay. I have another question here, Melissa: "Where can I find the list of procedure codes for ASC-7? I don't see them in the current manual."

Melissa Thompson: Okay. This is also a very common question, and the reason you don't see the procedure codes in the current version of the Specifications Manual is because they aren't there yet. The reason they aren't there yet is because the surgical procedure codes – they are updated annually, around late November. For encounters from January 1st, 2017 to December 31st, 2017, you'll see the procedure codes updated on the ASC-7 measure information form posted on QualityNet sometime in late November. So, just watch for a ListServe notification indicating that the measure has been updated on QualityNet; it's ready for you to view. So again, another reason why that ListServe is so important.

Karen VanBourgondien: Oh, great point. Thank you. Another question: "I can't seem to log into my QualityNet secure access account. Where do I go to fix this issue?"

Melissa Thompson: Okay. This is also a very common question, especially at the beginning of any submission period. So, for all log-on issues, please contact QualityNet directly, and their number – I have it here – is 866-288-8912. Again, that number is 866-288-8912.

Karen VanBourgondien: Thank you, Melissa. I appreciate that. Here is another question: "Is the reporting of the measures for ASC-1 through ASC-5 Medicare patients only, or all patients?" Do Medicare patients include Medicare Advantage patients, I guess, too, is what they want to know.

Melissa Thompson: This is a great question. Okay. These measures include all Medicare Fee-for-Service beneficiaries, and that's where Medicare is the primary, or it can be secondary. It does not include the Medicare Advantage or HMO replacement beneficiaries. It does include Medicare Railroad beneficiaries, though. So that is a great question.

Karen VanBourgondien: Okay. And back to what you were talking about during the presentation about the different roles, this person wants to know: "I don't know what assigning the Basic User role really means."

Melissa Thompson: Okay. So, let's see, assigning a Basic User role means that the Security Administrator has to assign that person certain user-specific roles. An example would be like – say, the Basic User is only able to log in to the secure portal on QualityNet and enter data. They might not have access to reports. And again, it goes back to the Security Administrator is the one who assigns what access a Basic User has to the site.

Karen VanBourgondien: Okay. Thank you. And this – I'm just going to ask this question and answer it both because we get – we get asked this a lot and the question is: "Will this presentation be available for reference?"

The answer to that is, yes, all educational webinars are always posted on our website at www.qualityreportingcenter.com. They are always there prior to a webinar under **Upcoming Events**, and then after the presentation day, it would be listed under the **Archived Events** tab. And of course, Melissa, as you mentioned, there are years' worth of educational webinars under that **Archived Events** tab. Okay.

Melissa, I have another question here. It's actually a few questions asked by the same person. They want to know which payment year is affected by ASC-9 and ASC-10. "For 2016 submission, is the payment year 2017? And is there a two percent decrease in payment for less than a 100 percent compliance per year? Does it accrue, or is it just two percent per year?" Let me know if I need to repeat any of that. That's a lot of questions. Melissa?

Melissa Thompson: Okay, Karen. First of all, the ASCQR Program is a pay for reporting program, not a pay for performance program. As such, the requirements for ASC and QDC reporting are at least 50 percent of the Medicare Fee-for-Service claims and submitting measures that are entered via web-based tool. This is regardless of what the results of the measures are as far as the ones that are submitted via a web-based tool. If you do not submit the required data, then your facility is subject to that two percent payment reduction, and it's only for the payment year you did not report data.

Karen VanBourgondien: Okay. Thank you, very good. I think we have time just for one more question, and that question is: "On one of the slides, you mentioned that there is a question-and-answer tool available. Is this site part of the secure portal where we report the data?"

Melissa Thompson: Okay. That's a really good question, and one I actually didn't cover on those slides, so this is a great question.

Okay. So, the Q&A site is not part of the QualityNet Secure Portal. Basically, anyone can have an account for this site, and it does not require a Security Administrator to get access. This requires a different user name and a different password than the secure portal, so it is completely separated. And then you can access it directly from the home page on QualityNet.org.

So, no, anybody can sign up for that Q&A tool, and it is a different user name and password than the secure portal.

Karen VanBourgondien: Okay. Thank you, Melissa. I think that's all the time we have today for questions.

Again everybody, we really appreciate you joining us. Melissa, thank you for all the great information.

I'm going to turn things over to our host again to explain the CE process. Thanks again to everybody, and have a great day.