



Ambulatory Surgical Center Quality Reporting Program

Support Contractor

The Question and Answer Show

Questions & Answers

Moderator:

Pam Harris, BSN, RN
Project Coordinator, Education and Support Contractor

Speaker(s):

Karen VanBourgondien, BSN, RN
Education Coordinator, Education and Support Contractor

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- Question:** For ASC 1-5, if missed, can a claim be re-submitted?
- Answer:** Once the claim has been adjudicated, you cannot resubmit a claim for the sole purpose of applying QDCs.
- Question:** We are a GI facility so we do not have "surgical sites." If we give prophylactic antibiotics due to a previous heart valve surgery or previous joint replacement, which G-code should we be reporting?
- Answer:** Antibiotic orders for prevention of infections other than surgical site infections, such as bacterial endocarditis, are excluded from the denominator or excluded from the measure. G8918 is reported for patients with no indication for, or no order for IV antibiotic prophylaxis for surgical site infection. This does not place a case with this code in the denominator, but is necessary for calculating the completeness of reporting.
- Question:** When will CMS address the excessive additional expense of implementing the OAS CAHPS survey in an ASC when that ASC is paid 50% of that which Hospital Outpatient Departments (HOPDs) and Hospitals are paid for doing the exact same procedure? When will that be a webinar?
- Answer:** CMS is continuously gathering information and striving to improve the quality of care for beneficiaries. Any new proposals for this program will be forthcoming in the CY 2018 Proposed Rule. This is your opportunity to impact the program proposals. CMS will be presenting this information in a webinar on August 3, 2017. Please access our website for the most



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current information regarding educational webinars at:
<http://www.qualityreportingcenter.com/asc/events/>

Question: What is a good contact for you?

Answer: You may call our helpdesk at 866.800.8756. You may also choose to enter any question into the Question & Answer Tool through *QualityNet*.