Welcome!

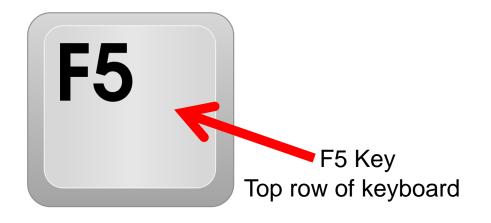
- Presentation slides can be downloaded from <u>www.qualityreportingcenter.com</u> under Upcoming Events on the right-hand side of the page.
- Audio for this event is available via ReadyTalk[®] Internet streaming. No telephone line is required.
- Computer speakers or headphones are necessary to listen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

ReadyTalk

Troubleshooting Audio

Audio from computer speakers breaking up? Audio suddenly stops?

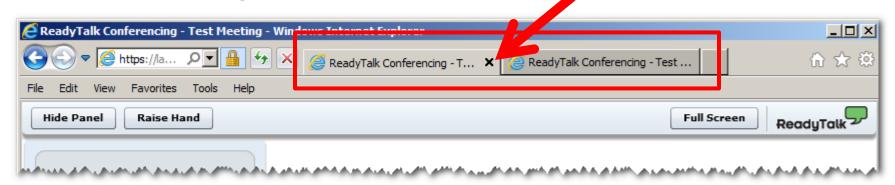
- Click Refresh icon or
- Click F5





Troubleshooting Echo

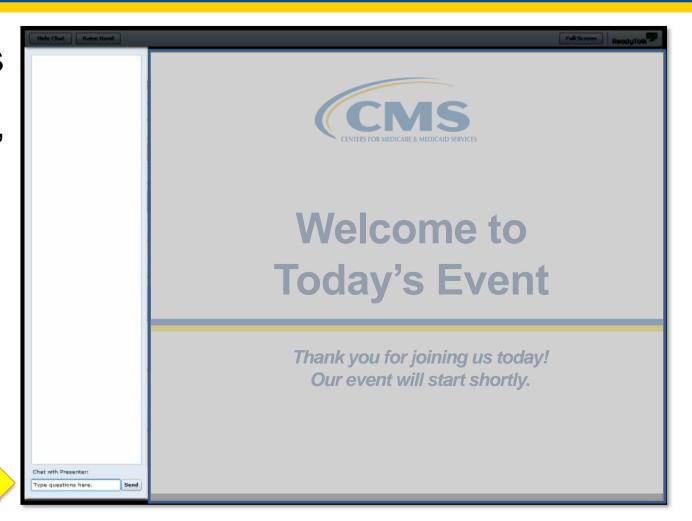
- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event (multiple audio feeds).
- Close all but one browser/tab, and the echo will clear up.



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.





Your Data Is Showing: Public Reporting for ASCs

Karen VanBourgondien, BSN, RN, Education Coordinator Ambulatory Surgical Center Quality Reporting (ASCQR) Program Support Contractor

September 27, 2017

Save the Date

- Upcoming ASCQR Program educational webinars:
 - October 25, 2017: The Express Train to Success: The Reporting of ASC-8
 - November TBA: The CY 2018 OPPS/ASC Final Rule
- Notifications of additional educational webinars will be sent via ListServe

Learning Objectives

At the conclusion of this program, attendees will be able to:

- ✓ Identify the measures that are reported publicly for the ASCQR Program.
- ✓ Access and interpret the preview report for their facility.
- ✓ State the data timeline for public reporting.
- ✓ Find their facility's data on the Hospital Compare website.

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Reminders

- Please keep your QualityNet and National Healthcare Safety Network (NHSN) passwords current.
 - Log into the system every 90 days to prevent password problems.
- It is recommended that the facility have at least two QualityNet Security Administrators (SAs).
- Make sure you are signed up for the ListServe.



Where It All Started

Public Reporting: Background

- Calendar Year (CY) 2012 OPPS/ASC Final Rule
- Industry was eager to have ASC quality data publicly reported
- Public would have access to ASC quality data just as they have access to a hospital's quality data

Why Display Publicly?

- Your ASC's hard work is displayed for public reference.
- These data can be used to compare your facility with other facilities.

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Minimum Case Volume

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

Claims-Based Measures

- Using QDCs:
 - ASC-1: Patient Burn
 - ASC-2: Patient Fall
 - ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant
 - ASC-4: All-Cause Hospital Transfer/Admission
 - ASC-5: Prophylactic Intravenous (IV) Antibiotic Timing
- Outcome Measure:
 - ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy

Measures Submitted Using a Web-Based Tool (1 of 2)

Measures entered via QualityNet:

- ASC-6: Safe Surgery Checklist Use
- ASC-7: ASC Facility Volume Data on Selected Surgical Procedures
- ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
- ASC-10: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use

Measures Submitted Using a Web-Based Tool (2 of 2)

 ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary)

Measure entered via NHSN:

 ASC-8: Influenza Vaccination Coverage among Healthcare Personnel

How to Withdraw

- To withdraw, an ASC must complete the ASCQR Withdrawal of Participation Form.
 - This form is located on QualityNet at https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier4&cid=1228773123755.
- The deadline to withdraw is August 31, 2018 for the CY 2019 payment determination.
- The ASC will incur a 2.0 percentage point reduction to its annual payment update.



Points of Interest

- Notification will be sent when the preview period opens and when it closes. Preview reports are:
 - Available for approximately 30 days.
 - Transmitted via Secure File Transfer through QualityNet.
- The preview period does not serve as a correction period.
- Data are refreshed annually in December.

Quick Reference Guide

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:

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

Preview reports can be downloaded by:

- Selecting "Secure File Transfer" in the blue ribbon at the top of the screen.
- Selecting "AutoRoute_Inbox" in the left-side menu.
- 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.

Footnotes

- Footnote 1 (FN1): The number of cases/patients is too few to report.
- Footnote 5 (FN5): Results are not available for this reporting period.
- Footnote 7 (FN7): No cases met the criteria for this measure.
- Footnote 23 (FN23): The data are based on claims that the facility submitted to CMS.
 The facility has reported discrepancies in their claims data.

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Preview Report Example

Ambulatory Surgical Center Preview Report xxx Surgery Center (NPI 100xxxxxxx)

Claims-Based Measures in CY2016 (per 1,000 Claims)

	2016								
Measure	Numerator	Denominator	Rate	National Rate	State Rate				
ASC-1 Patient Burn	0	0	N/A(5)	0.181	0.183				
ASC-2 Patient Fall	0	0	N/A(5)	0.095	0.079				
ASC-3 Wrong Site/ Side/Patient/ Procedure/Implant	0	0	N/A(5)	0.022	0.011				
ASC-4 Hospital Transfer/Admission	0	0	N/A(5)	0.41	0.247				
ASC-5 Prophylactic Intravenous Antibiotic Timing	0	0	N/A(5)	956.44	961.11				

Web-Based Measures in Calendar Years 2016 (Reported in 2017)

			ASC-7 (Data on Selected Surgical Procedure)								y:		
	ASC-6	Respiratory	Eye	Genitourinary	Multi-System	Musculoskeletal	GI	Nervous	Skin	ASC-8	ASC-9	ASC-10	ASC-11
Facility	Yes	0	14	0	0	0	0	0	0	N/A(5)	N/A(5)	N/A(5)	N/A(5)
State	100.00%	183	1184	165	324	688	2863	1544	113	75.68%	74.98%	73.58%	94.07%
National	99.81%	206	1745	452	274	816	3552	1751	146	76.13%	80.98%	79.90%	96.54%

Footnote Legend:

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

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

Note: ASC-12 (Facility 7-day Risk-Standardized Hospital Visit after Outpatient Colonoscopy) data for CY2016 will be provided in the Facility Specific Report via QualityNet.

ASC-12 Facility-Specific Report (FSR)

- The FSR will be sent via Secure File Transfer through QualityNet.
 - You will receive a ListServe announcement when the FSRs are released.
 - You can check the availability of this report on our Lookup Tool. Information about the report is available at this direct link http://www.qualityreportingcenter.com/asc/ccn/.
- For more information on ASC-12, visit https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228775182443.

Timeline and Display

For the 2017 display:

- ASC-8 data submitted via the NHSN web-based tool
 - October 1, 2016–March 31, 2017 flu season
 - May 15, 2017 submission deadline
- ASC-6, -7, -9, -10, and -11 data submitted via the QualityNet web-based tool
 - January 1–December 31, 2016 encounters
 - August 15, 2017 submission deadline
- Preview reports available in October
- Public display will be in December



Locating Your Data

What Can You Find?

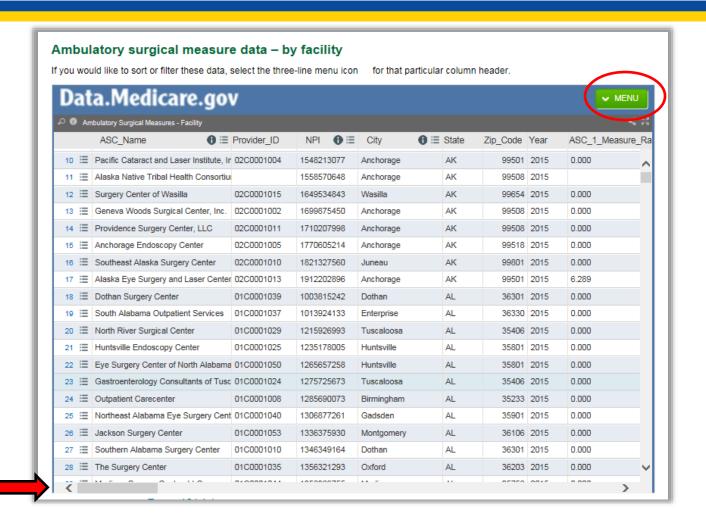
We will talk about how to:

- Find your ASC and other ASCs on Hospital Compare.
- Download databases.
- Access the data archive.

Beginning Your Search



Choosing Your Measure Data



Choosing Your Download



Back to Download

Medicare.gov | Hospital Compare The Official U.S. Government Site for Medicare

Ambulatory Surgical Center Quality Reporting Program

The Ambulatory Surgical Center Quality Reporting (ASCQR) Program is a quality measure data reporting program implemented by the Centers for Medicare & Medicaid Services (CMS). Data collected through the ASCQR Program is publicly reported. Quality measures for ambulatory surgical centers are aligned with quality measures reported for other clinical settings when possible and appropriate. Ambulatory surgical centers that meet ASCQR Program requirements for reporting measure data during a given calendar year (CY) receive their full payment update for the upcoming CY: ambulatory surgical centers that do not participate or fail to meet those requirements may receive a two percent reduction of their annual payment update.

Program measures drive quality improvement and track to CMS priorities including safety, readmissions, and patient experience of care to align with National Quality Strategy and CMS Quality Strategy priorities. Publication of ASCQR Program data also allows Medicare beneficiaries and other consumers to find and compare the quality of care given at ambulatory surgical centers; this information can inform patient decisions on where to get care and can foster improvement by facilities by providing benchmarks for selected clinical areas and public view of facility data.

Data for the following measures are displayed in the tables below:

- · Quality Data Code-based Measures:
 - Patient Burn (ASC-1)
 - Patient Fall (ASC-2)
 - . Wrong Site, Side, Patient, Procedure, Implant (ASC-3)
 - · Hospital Transfer/Admission (ASC-4)
 - · Prophylactic Intravenous (IV) Antibiotic Timing (ASC-5)
- · Safe Surgery Checklist Use (ASC-6)
- ASC Facility Volume Data on Selected ASC Surgical Procedures (ASC-7)*
- Influenza Vaccination Coverage among Healthcare Personnel (ASC-8)**
- · Endoscopy/Polyp Surveillance Measures:
 - Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients (ASC-9)
- Colonoscopy Interval for Patients with a History of Adenomatous Polyps-Avoidance of Inappropriate Use (ASC-10)
- Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (ASC-11)***

*Get details about the selected procedures, including the procedure category, the corresponding Surgical Procedure Codes and short descriptions for ASC-7

**Data for this measure are from the 2015/2016 flu season (October 1, 2015-March 31, 2016)

*** ASCs were permitted to voluntarily submit data for this time period.

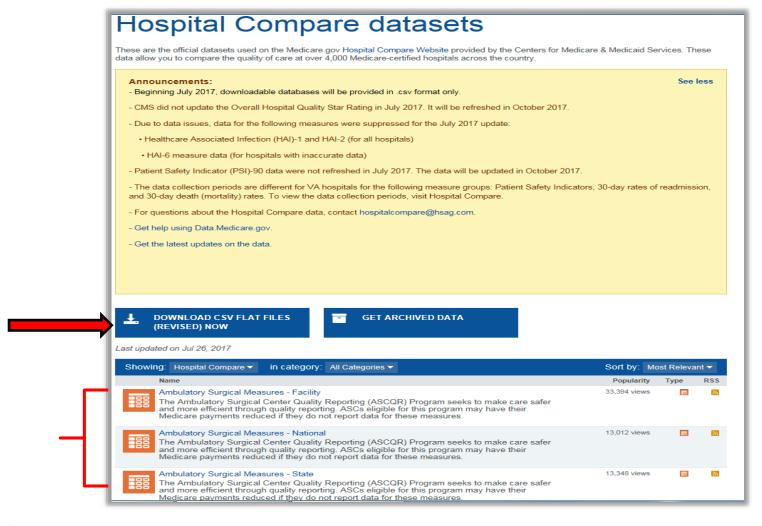
View more details External Link icon for more details about these measures and specifications on QualityNet.org External Link icon (click "Accept" at the bottom of the page to proceed to the Specifications Manuals).

The tables that follow contain facility (provider) results, state results, and national results. Visit data.medicare.gov to download these datasets in

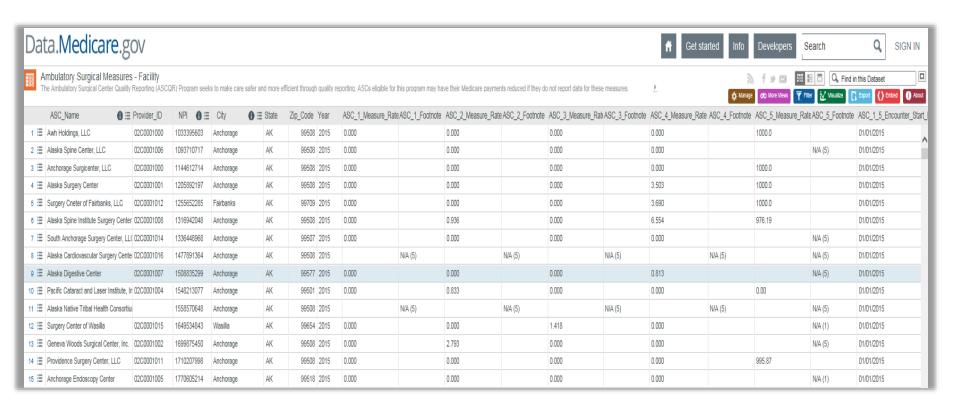
Results for measures ASC-1, ASC-2, ASC-3, ASC-4, and ASC-5 are rates per 1,000 patients. For ASC-1, ASC-2, ASC-3, and ASC-4, lower rates are better. For ASC-5, higher rates are better. All patients are included in measures ASC-6, ASC-7, ASC-9, ASC-10, and ASC-11, not only Medicare patients. Data for these measures are from CY 2015 (January 1, 2015-December 31, 2015). Additional information on procedures used in data collection for the ASCQR Program can be found by downloading this Frequently Asked Questions document. The quality data codehased data published below are for services provided in CY 2015



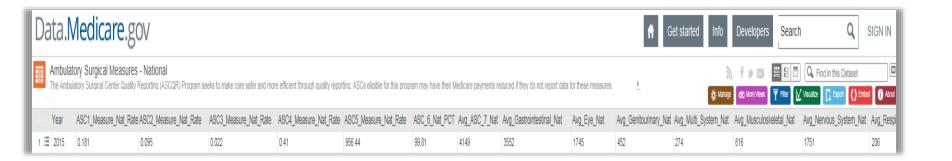
Interactive View



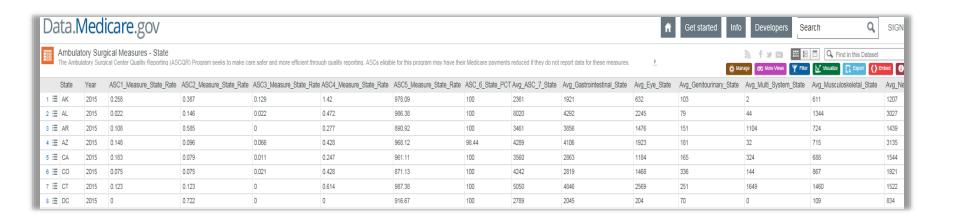
Viewing by Facility



Viewing by Nation

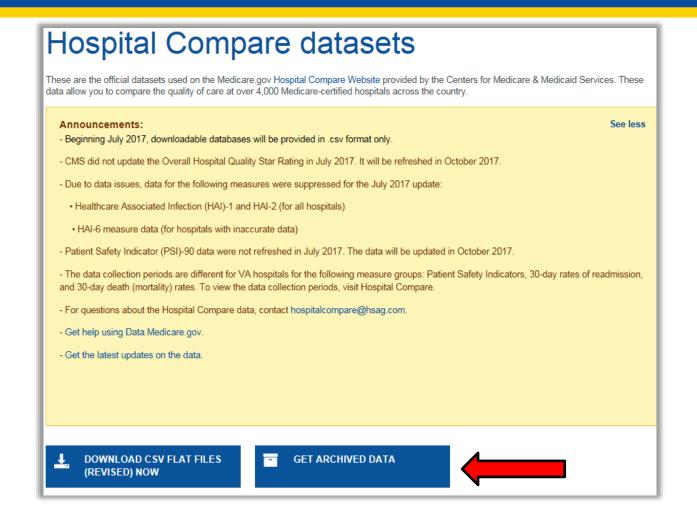


Viewing by State



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Archived Data



Looking in the Past

Hospital Compare data archive

2017 Annual Files

- HOSArchive_20170428.zip (04/28/2017, Zip File, 50684 KB)
- HOSArchive_Revised_Flatfiles_20170428.zip (04/28/2017, Zip File, 14930 KB)

2016 Annual Files

- HOSArchive_20161219.zip (12/19/2016, Zip File, 41114 KB)
- HOSArchive_Revised_Flatfiles_20161219.zip (12/19/2016, Zip File, 15608 KB)
- Hospital 20161110.zip (11/10/2016, Zip File, 52138 KB)
- Hospital_Revised_FlatFiles_20161110 (11/10/2016, Zip File, 15473 KB)
- VA_Data_10.19.2016 (10/19/2016, Zip File, 342 KB)
- HOSArchive 20160810.zip (08/10/2016, Zip File, 43096 KB)
- HOSArchive_Revised_FlatFiles_20160810.zip (08/10/2016, Zip File, 14900 KB)
- HOSArchive 20160504.zip (05/04/2016, Zip File, 41767 KB)
- HOSArchive Revised FlatFiles 20160504.zip (05/04/2016, Zip File, 14377 KB)

2015 Annual Files

- HAI_CDIFF_Revised_2015.zip (12/18/2015, Zip File, 72 KB)
- HOSArchive 20151210.zip (12/10/2015, Zip File, 35,082 KB)
- HOSArchive_Revised_FlatFiles_20151210.zip (12/10/2015, Zip File, 13,891 KB)
- HOSArchive 20151008.zip (10/08/2015, Zip File, 33,659 KB)
- HOSArchive_Revised_FlatFiles_20151008.zip (10/08/2015, Zip File, 12,942 KB)
- MSPB_archives.zip (10/08/2015, Zip File, 838 KB)
- HOSArchive 20150716.zip (07/16/2015, Zip File, 35,727 KB)
- HOSArchive Revised FlatFiles 20150716.zip (07/16/2015, Zip File, 12,076 KB)
- HOSArchive 20150506.zip (05/05/2015, Zip File, 38577 KB)
- HOSArchive Revised Flatfiles 20150506.zip (05/05/2015, Zip File, 13101 KB)
- HOSArchive_20150416.zip (04/16/2015, Zip File, 37240 KB)
- HOSArchive Revised Flatfiles 20150416.zip (04/16/2015, Zip File, 13105 KB)
- HOSArchive 20150122.zip (01/22/2015, Zip File, 34298 KB)
- HOSArchive Revised Flatfiles 20150122.zip (01/22/2015, Zip File, 12195 KB)

What Do We Do with the Data?

Quality Improvement Objectives:

- Quality Improvement and Performance
 - Best Practices
 - Evidence-Based Practices
- Better Patient Outcomes
 - Patient-Centered Care
- Cost Effective Care



Summary

- Be aware that the data reported for this program will be displayed publicly
- Evaluate your preview report
- Access your publicly displayed data
- Compare your data to other ASCs
 - Utilize all of the tools to evaluate, implement changes, and improve quality
- Continue in your successful path

Questions



Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
 - It is your responsibility to submit this form to your accrediting body for credit.

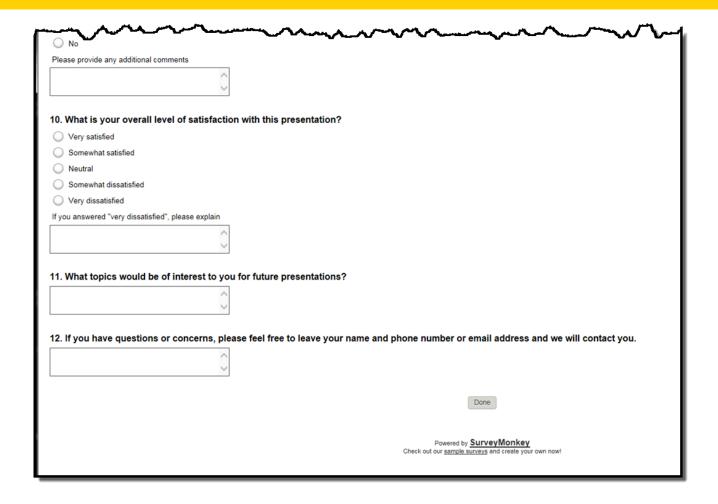
CE Credit Process

- Complete the ReadyTalk® survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click "Done" at the bottom of the screen.
- Another page will open that asks you to register in HSAG's Learning Management Center.
 - This is separate from registering for the webinar. If you have not registered at the Learning Management Center, you will **not** receive your certificate.
 - Please use your personal email so you can receive your certificate.
 - Healthcare facilities have firewalls that block our certificates.

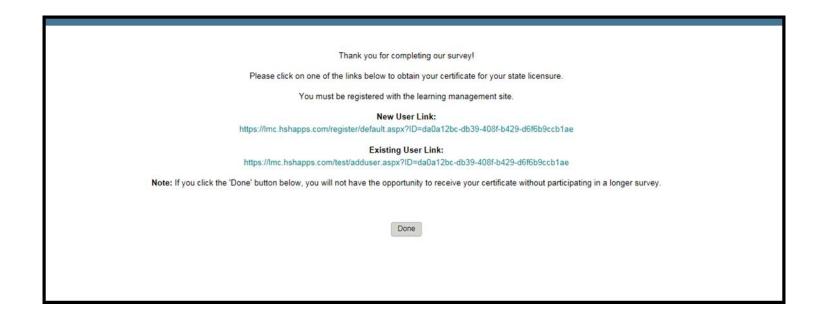
CE Certificate Problems?

- If you do not immediately receive a response to the email you used to register in the Learning Management Center, a firewall is blocking the survey link.
- Please go back to the New User link and register your personal email account.
- If you continue to have problems, please contact Deb Price at dprice@hsag.com.

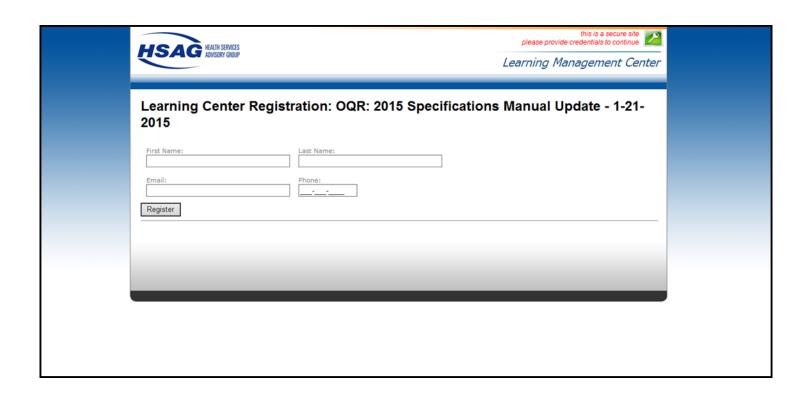
CE Credit Process: Survey



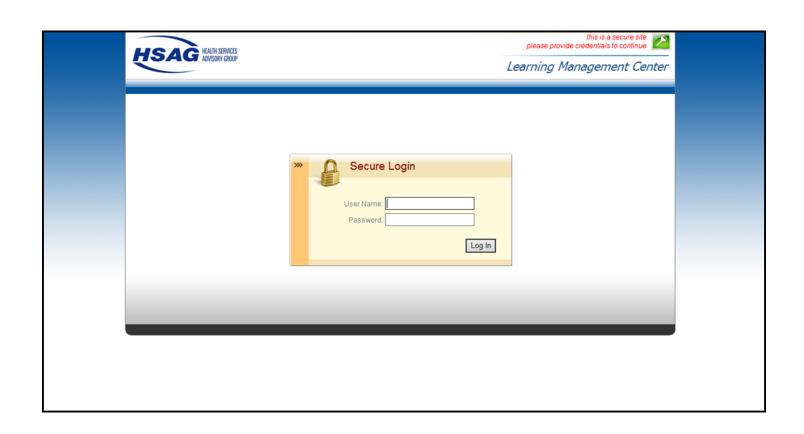
CE Credit Process



CE Credit Process: New User



CE Credit Process: Existing User



Thank You for Participating!

Please contact the Support Contractor if you have any questions:

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

Or

 Call the Support Contractor at 866.800.8756.