



Ambulatory Surgical Center Quality Reporting Program

Support Contractor

Influenza Vaccination of Healthcare Personnel: ASCQR Program

Chat Box Questions and Answers

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- Question 1: How do NHSN and QNET differ?
- Answer 1: NHSN is a division of the CDC. QNET is a CMS website for all of the quality reporting programs.
- Question 2: So, does HCP influenza data get submitted through NHSN, QNET, or both?
- Answer 2: You must report HCP flu vaccination data through NHSN, and CDC will transmit the data to CMS.
- Question 3: What number can we call to verify that we are enrolled in NHSN?
- Answer 3: You can email nhsn@cdc.gov to determine whether your facility is enrolled.
- Question 4: We have two licensed facilities. Do I need to report separately?
- Answer 4: Yes, each ASC must separately enroll in NHSN, and the data must be reported to each facility.
- Question 5: When you have completed through step 3b for enrollment but nothing has been sent concerning your user ID or password, what do you do then?
- Answer 5: Please allow 30 days for SAMS identity proofing.

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- Question 6: It has been over 30 days since we enrolled, and we have not received an ID or password. What do we do?
- Answer 6: You can contact SAMS at samshelp@cdc.gov or 877.681.2901.
- Question 7: I am unable to choose the 2014-2015 flu season year because I have not put in a reporting plan. Am I able to report all at one time, or do I have to separate the data into months during the reporting period?
- Answer 7: You only need to enter one monthly reporting plan since this will auto-populate all other reporting plans for the current flu season. Therefore, you can enter your monthly plan and report your data at once for the flu season.
- Question 8: We have gotten to the step of signing and sending the consent to the CDC, but how do I then enter data?
- Answer 8: You should allow at least 30 days for SAMS identity proofing. You can contact SAMS at samshelp@cdc.gov or 877.681.2901.
- Question 9: Do we consider vendors?
- Answer 9: No, data on vaccination of vendors should not be included in your reports as they are not considered to be healthcare personnel for the purposes of this reporting.
- Question 10: I have specific questions as to how to decide who should be in the denominator for our facility. I have read the category descriptions. Should I direct my questions to the NHSN@cdc.gov email address?
- Answer 10: Yes, please email NHSN@cdc.gov and include your facility type in the subject line of your email.
- Question 11: PAs at our facility do not act on LIPs, only under the supervision of the surgeon. Are they to be included?
- Answer 11: Yes, the definition of LIP includes all non-employee physicians, advanced practice nurses, and physician assistants, regardless of their specific role at your facility.
- Question 12: What happens when your facility administrator leaves? Do you have to re-enroll?

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- Answer 12: If your facility administrator leaves, you do not need to re-enroll your facility in NHSN. Please send an email to NHSN2cdc.gov asking for the steps to reassign the NHSN facility administrator to another person.
- Question 13: Do RN First Assists' status get reported? If so, which category would they fall under?
- Answer 13: Are these RNs paid directly by your facility or employed under a contract/at will?
- Question 14: Do we include a consulting pharmacist in contract personnel?
- Question 13: They are not paid by the facility. They work specifically with their provider, but they are not an Independent licensed practitioner either.
- Answer 13: If these personnel are not employees and do not meet the definition of LIPs, they should not be counted in your facility's vaccination report.
- Answer 14: Yes, if this individual is not considered an employee, and does not meet criteria for the other denominator categories, then you may include him/her in this optional category.
- Question 15: How will we know when the vaccine becomes available?
- Answer 15: "When the vaccine becomes available," just means whenever it is available at your facility to be administered to personnel.
- Question 16: Would anesthesia (CRNA) be considered as Licensed Independent Practitioners?
- Answer 16: Yes, CRNAs are considered advanced practice nurses, so they would be LIPs unless they are employed directly by your facility, in which case they are considered employees.
- Question 17: Are we required to offer the vaccination to non-employees who come to our facility (i.e., residents)? We were asking if they had the vaccination, and some had not but who were planning on getting it at a later time from their educational institution.
- Answer 18: You should follow the policies and procedures of your facility regarding administration of the influenza vaccination. CDC is asking that you only report the vaccination status of the HCP in your facility.
- Question 19: Do we include contracted IT?

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Answer 19: Currently, contract personnel are optional. You do not need to report data on contract personnel at this time.

Question 20: Do medical students who are in the facility observing procedures required to be vaccinated?

Answer 20: You should follow the policies and procedures of your facility regarding administration of influenza vaccination. CDC is asking that you only report the vaccination status of the HCP in your facility.

Question 21: Once you have reported your data and nothing has changed, you are done – correct? I entered my data in January; no one new has been here; am I done?

Answer 21: Yes, as long as you have saved your final data for the flu season in NHSN, there is no further action required.

Question 22: What happens if we have not reported monthly?

Answer 22: You are not required to report HCP flu vaccination data on a monthly basis. Submitting one summary data report for the entire season will fulfill data reporting requirements.

Question 23: Regarding slide #38, is this for the users or every individual?

Answers 23: Each facility must complete the monthly reporting plan and the flu summary form once per influenza season. The flu summary form is a single report of flu vaccination for all personnel in your facility.

Question 24: If we created a vaccination form for October 2014 and entered (modified) summary data only once in May 2015–have we appropriately completed submission?

Answers 24: Yes, if you have entered a flu summary form that accurately reflects the vaccination status of your personnel for the 2014–2015 influenza season, no further action is required.

Question 25: What do we do if we can't get a signed statement or form from our physicians, since verbal confirmation is not accepted?

Answers 25: If you cannot get a signed statement or other written confirmation, you will have to report their vaccination status as unknown. If you do not want

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to use a specific form, you can ask the physicians to send an email, as this is considered acceptable documentation.

Question 26: So, I do not have to report on the monthly reporting plan? Can I just report one time on the HCP Influenza Vaccination summary?

Answer 26: You still need to enter a monthly reporting plan for one month from the current influenza season (e.g., May 2015). After this, you will be able to enter your final HCP flu summary counts for the flu season.

Question 27: If the files are overwritten, is existing information retained, or should it all be entered again?

Answers 27: Once data are overwritten, you will not be able to retrieve this information. Therefore, we recommend that you keep a separate count of your data throughout the flu season.

Question 28: Is the only way to switch administrators for NHSN?

Answers 28: If your NHSN facility administrator leaves, please email NHSN@cdc.gov for the steps to reassign that role to another person within your facility

Question 29: Do you have to do a Plan Summary before you are able to report?

Answer 29: You have to enter a reporting plan before you can enter your influenza vaccination summary data. The NHSN system will not let you save data without establishing a monthly reporting plan first.

Question 30: Is there any penalty for not getting information on physician flu shots and reporting it as “unknown”? This is when physicians don't cooperate and provide the information.

Answer 30: Currently, the requirement is to report vaccination data, not to achieve a certain level of vaccination coverage. Therefore, there is not a penalty for reporting HCP with status unknown at this time.

Question 31: Do you have to do the monthly reporting plan only once?

Answer 31: Yes, once your monthly reporting plan is entered into NHSN, you will not need to enter any other reporting plans for HCP flu vaccination reporting.

Question 32: There are several other options we can report on. Is it required to report on any of the other selections at this point in time, or no?

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- Answer 32: Currently, the healthcare personnel influenza vaccination summary data measure is the only data ASCs need to enter into NHSN for CMS reporting at this time.
- Question 33: If I have some of the contractors' vaccination status but not all of them, should I enter this information?
- Answer 33: Yes, you may report the vaccination status of your other contract personnel. However, please note that reporting for this category is not required at this time.
- Question 34: I have two facilities, with the same staff and MD. How do I register the second facility?
- Answer 34: Contact nhsn@cdc.gov for assistance with enrollment.
- Question 35: Our CRNAs and surgeons receive paychecks from our company. Which category should they be documented in?
- Answer 35: If these personnel are paid directly by your facility, they are counted as employees.
- Question 36: We use a contracted anesthesia group. This group consists of both CRNAs and anesthesiologists. Do I have to report on both CRNAs and anesthesiologists, or is the contracted group of employees considered "optional"?
- Answer 36: Contract personnel are optional, but licensed independent practitioners are required to be reported. Since this group falls under the definition of LIP, (non-employee physicians, advanced practice nurses, and PAs), you would need to report data on these personnel.
- Question 37: Do we have to go back to 2011 and report all years?
- Answer 37: For the ASCQR Program the requirement begins with the 2014/2015 flu season.
- Question 38: Under what category would we report surgical supply reps that spend at least a day at our facility in an OR?
- Answer 38: Vendors are not considered HCP for the purposes of this reporting, so they should not be included in your vaccination reports.

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- Question 39: Where is the proof we have completed the submission of required data so that we know the process is complete and CMS-eligible?
- Answer 39: You can run a report within NHSN that can be used as proof that you've entered the data on time. Details about how to run this report within NHSN can be found here: http://www.cdc.gov/nhsn/PDFs/CMS/ASC-CMS_IPPS_HCPFluVacc_LineList-8-2014.pdf.
- Question 40: Why do we have to have documentation regarding where the vaccine was obtained (if it was not at our facility)? Do we have to enter this information in the system?
- Answer 40: NHSN requires documentation for these HCP since they are receiving vaccination outside of their healthcare facility. The documentation is not entered into NHSN.
- Question 41: Should non-clinical employees include registration and administrative staff?
- Answer 41: Yes, all employees who physically work in the facility for one day or more during influenza season should be counted.
- Question 42: Is there a penalty if we do not enroll on NHSN?
- Answer 42: This is a program requirement, and if the facility does not register and report, then they would be subject to a two percent reduction to APU.
- Question 43: Should an employee be counted if they exit the organization before March 31?
- Answer 43: Yes. The denominator consists of the total number of healthcare personnel who physically worked in the facility for at least one working day from October 1 through March 31. All employees, non-employee licensed independent practitioners, and non-employee students/trainees and volunteers aged 18 and older who physically work at the facility for at least one working day from October 1 through March 31, regardless of exact stop and start dates, should be counted.
- Question 44: What other data is reported monthly on the monthly reporting plan?
- Answer 44: The monthly reporting plan indicates to the NHSN system which modules and protocols a user intends to follow for surveillance purposes in a

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specific month. The plan must be completed before data are entered for that month. Monthly reporting plans must be created or updated to include healthcare personnel influenza vaccination summary reporting, i.e., healthcare personnel influenza vaccination must be “in-plan,” in order for data to be shared with CMS. Once the “Influenza Vaccination Summary” box is checked on a single monthly reporting plan, then the system will auto-check that same box on every monthly reporting plan throughout the entire NHSN-defined influenza season (defined as the 12 months from July 1 – June 30). Therefore, you only need to enter one monthly reporting plan to report healthcare personnel influenza vaccination summary data for the entire influenza season.

Question 45: What about vendors who come into the facility daily? Do we report them? Also, do you need written documentation for each? If they just check off a form that they have had it, is that useable?

Answer 45: We do not consider medical sales representatives or vendors to be contract employees because their primary purpose in the facility is to demonstrate or sell their product rather than to provide care, treatment, or services for patients or the facility. Therefore, you would not report vaccination data for these individuals in any category, including the optional contract personnel category.

Question 46: We have occasional students that we classify as visitors, not really affiliated or providing care. Should these individuals be included in the denominator?

Answer 46: If these students are any kind of health professional student aged 18 years or older (such as medical, nursing, physical/occupational therapy, EMT, nurses’ aide, etc.), you should count them in your healthcare personnel influenza vaccination report in the “adult students/trainees and volunteers” category. However, if individuals are not students—for example, if they are observing a surgeon in anticipation of applying to a medical school but are not currently enrolled in school—you would not include them in your

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NHSN summary report, although they are, of course, encouraged to be vaccinated.

Question 47: That only puts the burden on us. Where is the confirmation from you guys to ensure you agreed with us?

Answer 47: If a facility has entered and saved their healthcare personnel influenza vaccination data in the Healthcare Personnel Vaccination Module of NHSN by August 15, 2015, there is no further action required. CDC will automatically transmit the data to CMS after the August 15 reporting deadline. Please note that NHSN does not provide an emailed confirmation of data submission. For your reference, you can view the data report for the facility that will be sent to CMS. To locate this report, you should log in to the Healthcare Personnel Safety Component. After generating the data set for your facility, go to "Output Options" under "Analysis" on the navigation bar. You will see several folders on the screen. Next, click on the folders for "CMS Reports," "Ambulatory Surgery Centers (ASCQR)," and "CDC-Defined Output." You will then see a line listing for "HCP Flu Vaccination Data for CMS ASC PPS," and you can click on "Run" to view the report. In addition, a few guides to help facilities check their own data for CMS healthcare personnel influenza vaccination reporting are posted on the CDC website at: <http://www.cdc.gov/nhsn/cms/index.html#hpiv1>.

Question 48: About how long is it going to take for the numbers to show up on the QualityNet website?

Answer 48: This question should be answered by CMS. The ASC healthcare personnel influenza vaccination summary data will be sent to CMS on the first business day after the August 15 deadline (Monday, August 17).

Question 49: Do we count medical vendors or representatives that come into our facility to bring supplies for a surgical case?

Answer 49: We do not consider medical sales representatives or vendors to be contract employees because their primary purpose in the facility is to demonstrate or sell their product rather than to provide care, treatment, or services for

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patients or the facility. Therefore, you would not report vaccination data for these individuals in any category, including the optional contract personnel category.

Question 50: I have one employee who is allergic to eggs and received flu vaccine for the season. Where do you want that to be entered?

Answer 50: As long as a healthcare worker receives a current seasonal influenza vaccine, it does not matter what formulation of vaccine (inactivated egg-based, live attenuated, recombinant, etc.) is used. Since the individual received flu block, you would count him/her as receiving influenza vaccination. The medical contraindication category should only be used to report personnel who did not receive any influenza vaccine due to a severe allergic reaction (i.e., anaphylaxis) to eggs or other vaccine components or a history of Guillain-Barre Syndrome within six weeks after a previous influenza vaccination.

Question 51: Is it required for Critical Access Hospitals to report on employee influenza vaccination?

Answer 51: Reporting of healthcare personnel influenza vaccination is required for the 2014–2015 influenza season for the following four types of facilities if the facility is part of the Centers for Medicare & Medicaid Services (CMS) quality reporting program for that facility type: a) acute care hospitals; b) ambulatory surgery centers; c) inpatient rehabilitation facilities; and d) long-term acute care hospitals. If you are unsure as to whether your facility is required to participate in the NHSN reporting, please contact the VIQR SC at IQR@hsag.com (for inpatient reporting) and oqrsupport@hsag.com (for outpatient reporting). They should be able to help you determine whether a particular facility must report, or direct you to someone who can answer your question.

Question 52: If the employee received an influenza vaccine, you should report them as vaccinated. It does not matter what kind of vaccine it is, as long as it is for the current influenza season.

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- Answer 52: That is correct. If the employee received influenza vaccination for the current influenza season, you would classify the individual as either receiving influenza vaccination at the healthcare facility or outside the healthcare facility (provided they supplied written documentation of vaccination received elsewhere).
- Question 53: Please clarify. I thought you said that monthly data was not a requirement, and then I think you said that it had to be implemented before you could enter summary data.
- Answer 53: Even though monthly data reporting is not required, you must still add a monthly reporting plan before entering your healthcare personnel influenza vaccination summary data. Once the “Influenza Vaccination Summary” box is checked on a monthly reporting plan, then the system will auto-check that same box on every monthly reporting plan throughout the entire NHSN-defined influenza season (defined as the 12 months from July 1–June 30). Therefore, you only need to enter a single monthly reporting plan to report healthcare personnel influenza vaccination summary data. After you enter a monthly reporting plan, entering a single influenza vaccination summary report at the end of the reporting period for the influenza season will meet the minimum data requirements for NHSN participation.
- Question 54: I have sent two emails to SAMS and have not received an answer. I am still waiting for my invitation to register or log in to SAMS.
- Answer 54: The invitation to register with SAMS email should be sent to your inbox 1-3 business days after completing the NHSN registration process (Step 2 of Enrollment). If you have not received the “Welcome to NHSN!” email or the SAMS “Invitation to Register” email, please complete Step 2 of Enrollment again. Please keep in mind that the entire enrollment process takes on average 30–60 days. The majority of that time is spent waiting for the SAMS group to process your identity proofing information during Step 3. This process sometimes takes longer when a large number of individuals are going through SAMS processing at the same time. For

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your reference, the NHSN Enrollment and Set-Up Checklist for ASCs can be found here: <http://www.cdc.gov/nhsn/PDFs/ACS/ASC-EnrollmentChecklist.pdf>.

Question 55: At this time we don't have to report vaccine status on any vendors correct?

Answer 55: That is correct. We do not consider medical sales representatives or vendors to be contract employees because their primary purpose in the facility is to demonstrate or sell their product rather than to provide care, treatment, or services for patients or the facility. Therefore, you would not report vaccination data for these individuals in any category, including the optional contract personnel category.

END

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