

Welcome!

- Presentation slides can be downloaded from www.qualityreportingcenter.com 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.



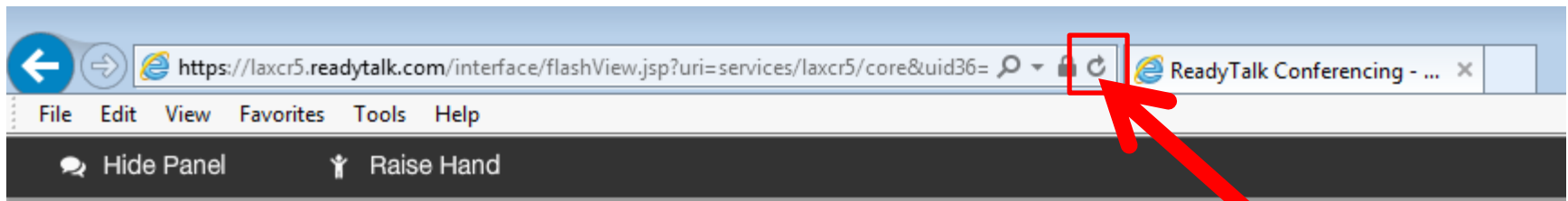
Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stops?

- Click **Refresh** icon
or
- Click F5



F5 Key
Top row of keyboard

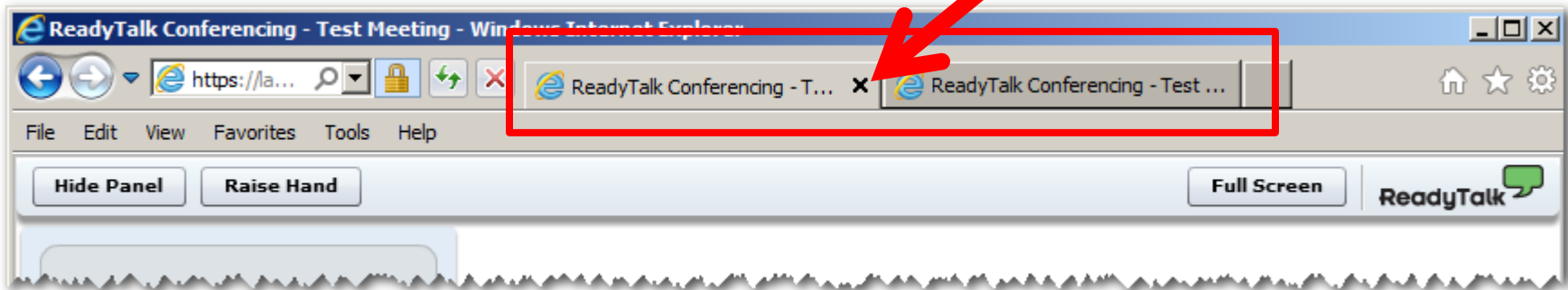


Location of buttons

Refresh

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.



A screenshot of a web browser window. The browser's address bar shows "Full Screen" and "Ready to go". The main content area features the CMS logo (Centers for Medicare & Medicaid Services) at the top. Below the logo, the text "Welcome to Today's Event" is displayed in a large, bold, blue font. A horizontal yellow line separates this from the bottom section, which contains the text "Thank you for joining us today! Our event will start shortly." in a smaller, italicized blue font. On the left side of the browser window, there is a vertical chat window titled "Chat with Presenter". At the bottom of this chat window, there is a text input field labeled "Type questions here." and a "Send" button. A yellow arrow from the text on the left points to this input field.



CY 2018 Hospital Outpatient Quality Reporting (OQR) Program Proposed Rule

Anita Bhatia, PhD, MPH

Program Lead, Hospital OQR Program

Centers for Medicare & Medicaid Services (CMS)

August 2, 2017

Save the Date

National Confidential Reporting Periods (Dry Runs)

- Upcoming dry runs of two measures for the Hospital Outpatient Quality Reporting (HOQR) program:
 - **August 15, 2017 through September 14, 2017:** Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy measure (OP-35)
 - **September 1, 2017 through September 30, 2017:** Hospital Visits after Hospital Outpatient Surgery” measure (OP-36)
- The purpose of the dry runs is to familiarize facilities with the measures in advance of public reporting and payment determination.

Dry Runs

- CMS will provide facilities with confidential Facility-Specific Reports (FSRs) for the measures via the *QualityNet* Secure Portal at the start of each dry run.
- FSRs contain patient-level data, facility-specific results, and state and national results for the measures.
- CMS will hold National Provider Calls to present measures' methodology and address questions:
 - **Wednesday, August 23, 2017 at 1pm Eastern:**
Chemotherapy (OP-35) National Provider Call
 - **Thursday, September 14, 2017 at 1pm Eastern:**
Surgery (OP-36) National Provider Call

Do NOT email your FSR nor submit patient-identifiable information (e.g., date of birth, social security number, health insurance claim number, dates, procedure codes) to this address. Sending screenshots and/or describing a patient listed in your FSR is considered Protected Health Information.

Additional Information

- Detailed information about the measures and upcoming dry runs will be available prior to the dry runs on *QualityNet* at:
 - (<https://www.qualitynet.org>) > Hospitals - Outpatient > Measures > Chemotherapy Measure Dry Run
 - (<https://www.qualitynet.org>) > Hospitals - Outpatient > Measures > Surgery Measure Dry Run
- CMS encourages facilities to review their measure results and ask questions about the measures during the dry run periods.
 - Send questions about the chemotherapy measure to CMSChemotherapyMeasure@yale.edu.
 - Send questions about the surgery measure to CMShopdsurgerymeasure@yale.edu

Learning Objectives

Locate the calendar year (CY) 2018 OPPS/ASC Proposed Rule in the Federal Register

Identify proposed changes to the Hospital OQR Program in the CY 2018 OPPS/ASC Proposed Rule

Submit comments to CMS regarding the CY 2018 OPPS/ASC Proposed Rule

Question and Answer Limitations

- During the course of this webinar, CMS:
 - Can only address procedural questions and comment submissions
 - Cannot address ANY rule-related questions
- Your understanding of these constraints is appreciated.
- CMS looks forward to your formal comments on the Proposed Rule.

Proposed Rule CY 2018

Locating the Rule

Federal Register Link


- <https://www.gpo.gov/fdsys/pkg/FR-2017-07-20/pdf/2017-14883.pdf>
- The Hospital OQR Program section begins on p. 33671 of the *Federal Register*

Accessing the Federal Register

www.federalregister.gov

Sections Browse Search Reader Aids My FR 82FR33671

Sign in Sign up

 **FEDERAL REGISTER**
The Daily Journal of the United States Government

Thursday, July 20th

Current Issue 95 documents from 36 agencies (335 Pages)
79 Notices 2 Presidential Documents 6 Proposed Rules 8 Rules 3 Significant Documents

Public Inspection

Special Filing	Regular Filing
updated on 02:00 PM, on Thursday, July 20, 2017	updated on 08:45 AM, on Thursday, July 20, 2017
3 documents from 3 agencies	113 documents from 43 agencies
1 Presidential Document	81 Notices 11 Proposed Rules
1 Proposed Rule 1 Rule	21 Rules

Search All Federal Register Documents Since 1994

Find Search term or citation 755,251 documents

Finding the Right Page

The screenshot shows the Federal Register website interface. At the top, there are navigation tabs for Sections, Browse, Search, Reader Aids, and My FR. A search bar labeled 'Search Documents' is on the right. The main header features the National Archives and Records Administration logo and the text 'FEDERAL REGISTER - The Daily Journal of the United States Government'. A 'Document Search' section is highlighted in blue. Below this, there are filters for 'Documents' and 'Public Inspection' (0). A search input field contains '82FR33671' and shows '0 documents' found. There are links for 'Show Advanced Search' and 'Learn More'. A 'Subscribe' button with an upward arrow and 'Other Formats: CSV/Excel, JSON' with a downward arrow are also present. A red box highlights the search results text: 'It looks like you were searching for the citation 82FR33671. We've found the following document on page 33558 of volume 82. Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs. This proposed rule would revise the Medicare hospital outpatient prospective payment system (OPPS) and the Medicare ambulatory surgical center (ASC) payment system for CY 2018 to implement changes... A Proposed Rule by the Centers for Medicare & Medicaid Services on 07/20/2017 Pages 33558-33724 (167 pages)'.

Sections Browse Search Reader Aids My FR Search Documents

0 Sign in Sign up

FEDERAL REGISTER
The Daily Journal of the United States Government

Document Search

Documents Public Inspection 0

Find 82FR33671 0 documents Subscribe ^

Other Formats: CSV/Excel, JSON v

Show Advanced Search Learn More

It looks like you were searching for the citation **82FR33671**.

We've found the following document on page 33558 of volume 82.

Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs

This proposed rule would revise the Medicare hospital outpatient prospective payment system (OPPS) and the Medicare ambulatory surgical center (ASC) payment system for CY 2018 to implement changes...


A Proposed Rule by the Centers for Medicare & Medicaid Services on 07/20/2017
Pages 33558-33724 (167 pages)

Navigating the Federal Register

X Find: 33671 Previous Next Options 1 match

Sections Browse Search Reader Aids My FR Search Documents

Sign in Sign up



FEDERAL REGISTER

The Daily Journal of the United States Government

Proposed Rule

Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs

A Proposed Rule by the Centers for Medicare & Medicaid Services on 07/20/2017

Comments on this document are being accepted at Regulations.gov.

SUBMIT A FORMAL COMMENT

PUBLISHED DOCUMENT

AGENCY:
Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION:
Proposed rule.

DOCUMENT DETAILS

Printed version:
[PDF](#)

Publication Date:
07/20/2017

Agencies:
Centers for Medicare & Medicaid Services

Site Feedback

Proposed Rule CY 2018

Seeking Public Comment

Social Risk Factors

CMS review of information:

- Considerations for strategies to account for social risk factors
- National Quality Forum (NQF) to undertake a two-year trial period to assess whether risk adjustment for social factors is appropriate

What Do You Think?

Seeking public comment on:

- Whether CMS should account for social risk factors in the Hospital OQR Program
 - If so, what methods would be most appropriate?
- Which social risk factors might be most appropriate for reporting stratified measure scores and/or potential risk adjustment

Proposed Rule 2018

Measures Proposed for Removal

Measure Removal Criteria

- Measure performance is so high and unvarying that meaningful improvements can no longer be made (topped out)
 - There is statistically indistinguishable performance at the 75th and 90th percentiles of national performance.
 - The measure's truncated coefficient of variation is less than or equal to 0.10.
- Performance or improvement does not result in better patient outcomes

Measure Removal Criteria (cont.)

- Measure does not align with current clinical guidelines or practice
- Availability of a more broadly applicable measure for the topic
- Availability of a measure that is more proximal in time or more strongly associated with desired patient outcomes
- Collection or public reporting leads to a negative unintended consequence such as patient harm

Measures Proposed for Removal

Beginning with the **CY 2020** payment determination:

- OP-21: Median Time to Pain Management for Long Bone Fracture
- OP-26: Hospital Outpatient Volume on Selected Outpatient Surgical Procedures

Beginning with the **CY 2021** payment determination:

- OP-1: Median Time to Fibrinolysis
- OP-4: Aspirin at Arrival
- OP-20: Door to Diagnostic Evaluation by a Qualified Medical Professional
- OP-25: Safe Surgery Checklist Use

Proposed Removal of OP-21

Median Time to Pain Management for Long Bone Fracture

- Proposed removal beginning with the **CY 2020** Payment Determination due to:
 - Misinterpretation of the intent of the measure
 - Avoiding any potential ambiguity and misinterpretation of the measure

Proposed Removal of OP-26

Hospital Outpatient Volume on Selected Outpatient Surgical Procedures

- Proposed removal beginning with the **CY 2020** Payment Determination due to:
 - Lack of evidence to demonstrate a link to improved clinical quality
 - Not demonstrating insight into facilities' overall performance or quality improvement
 - Burden of reporting outweighs the value

Proposed Removal of OP-1

Median Time to Fibrinolysis

- Proposed removal beginning with the **CY 2021** Payment Determination due to:
 - Availability of another measure more strongly associated with desired patient outcomes
 - Continuing to collect these data would be redundant

Proposed Removal of OP-4

Aspirin at Arrival

- Proposed removal beginning with the **CY 2021** Payment Determination due to:
 - Performance is high and unvarying
 - Burden of reporting outweighs the value

Analysis

Encounters	Number of Hospitals	75th Percentile	90th Percentile	Truncated COV
CY 2014	1,706	100.00	100.00	0.030
CY 2015	1,749	100.00	100.00	0.035
CY 2016	1,803	100.00	100.00	0.042

Proposed Removal of OP-20

Door to Diagnostic Evaluation by a Qualified Medical Professional

- Proposed removal beginning with the **CY 2021** Payment Determination due to:
 - Performance or improvement does not result in better patient outcomes

Proposed Removal of OP-25

Safe Surgery Checklist Use

- Proposed removal beginning with the **CY 2021** Payment Determination due to:
 - Performance is so high and unvarying that meaningful improvements cannot be made
 - Reducing administrative burden

Analysis

Encounters	Number of Hospitals	Rate	75th Percentile	90th Percentile	Truncated COV
CY 2012	3,227	0.910	100.000	100.000	0.314
CY 2013	3,184	0.949	100.000	100.000	0.232
CY 2014	3,177	0.963	100.000	100.000	0.196
CY 2015	3,166	0.970	100.000	100.000	0.176

Proposed Rule CY 2018

Changes to Existing Measures

Survey Measures

- Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) survey-based measures
- Propose to delay OAS CAHPS measures beginning with the **CY 2020** determination and subsequent years.
 - Implementation date will be determined in future rulemaking.

Proposed Rule CY 2018

Measures and Topics for Future Consideration

Future Measure Topics

CMS is seeking to:

- Develop a comprehensive set of quality measures
- Ensure that new measures achieve better health
- Align measures across programs
- Move towards outcome measures and away from clinical process measures

Possible eCQM

OP-2: Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival

- Future adoption of electronic version
- Would significantly reduce administrative burden
- Electronic Clinical Quality Measure (eCQM) has not yet been developed

Proposed Rule CY 2018

Public Display of OP-18c

Public Reporting

Median Time from ED Arrival to ED Departure for Discharged ED Patients – Psychiatric/Mental Health Patients

- Proposing to update public reporting for OP-18
- Could publicly report as early as July 2018 using patient encounters during the third quarter of 2017

Proposed Rule CY 2018

Administrative Requirements

Participation Status

- Proposing changes to the Notice of Participation (NOP) submission deadline
 - To begin with the **CY 2020** Payment Determination
 - Revise NOP submission deadlines so hospitals are required to submit an NOP any time prior to registering on *QualityNet*
 - Make conforming revisions

Annual Payment Determinations

- Proposing to revise the data submission requirements **for hospitals that did not participate the previous year**
 - To begin with the **CY 2020** Payment Determination
 - Hospitals must submit data beginning with encounters occurring during the first calendar quarter of the year prior to the affected annual payment update

Validation Requirements

- Proposing to change the validation requirements for chart-abstracted measure data submitted directly to CMS
 - To begin with the **CY 2020** Payment Determination
 - Clarifying the hospital selection process
 - Codifying the procedure for target hospitals
 - Updating the educational review process

Educational Review Changes

Proposing to formalize the process

- If results of an educational review indicate that CMS incorrectly scored a hospital, the corrected score will be used in the final validation score.
- If an educational review requested for any of the first three quarters yields incorrect validation, CMS would use the corrected score. For the last quarter, the existing reconsideration process would be used.

Process Changes

- Informal process:
 - Selected hospitals may request an educational review to better understand the results and request a review of discrepancies.
 - The hospital has 30 calendar days to contact the Validation Support Contractor to request a review.
- Use process similar to the reconsideration process:
 - To evaluate a validation score, CMS would review data elements labeled as mismatched.
 - CMS would consider the written justifications provided in the educational review request.

Extraordinary Circumstances Extensions or Exemptions (ECEs)

Five areas of variance in ECEs among CMS programs:

- Allowing the facilities to submit a form signed by CEO versus CEO or designee
- Requiring the form be submitted at varying days following the event
- Inconsistency in timelines to provide a formal response
- Variances in CMS authority to grant ECEs due to CMS system issues
- Inconsistencies in verbiage

ECEs

- Proposed changes:
 - To begin with the **CY 2020** Payment Determination
 - Change the name from Extraordinary Circumstances Extensions or Exemptions **to** Extraordinary Circumstances Exceptions
 - CMS will strive to complete review of each ECE request within 90 days of receipt

Proposed Rule CY 2018

Measures Moving Forward

Claims-Based Measures as Proposed

Measure	CY 2020 and Subsequent Payment Determinations
OP-8: MRI Lumbar Spine for Low Back Pain	Yes
OP-9: Mammography Follow-Up Rates	Yes
OP-10: Abdomen CT – Use of Contrast Material	Yes
OP-11: Thorax CT – Use of Contrast Material	Yes
OP-13: Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac, Low Risk Surgery	Yes
OP-14: Simultaneous Use of Brain CT and Sinus CT	Yes
OP-32: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Yes
OP-35: Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy	Yes
OP-36: Hospital Visits after Hospital Outpatient Surgery	Yes

Measures Submitted via a Web-Based Tool as Proposed

Measure	CY 2020 and Subsequent Payment Determinations
OP-12: The Ability for Providers with HIT to Receive Laboratory Data Electronically Directly into their ONC-Certified EHR System as Discrete Searchable Data	Yes
OP-17: Tracking Clinical Results between Visits	Yes
OP-22: Left Without Being Seen	Yes
OP-25: Safe Surgery Checklist Use	Proposed Removal CY 2021
OP-26: Hospital Outpatient Volume on Selected Outpatient Surgical Procedures	Proposed Removal CY 2020
OP-27: Influenza Vaccination Coverage among Healthcare Personnel	Yes
OP-29: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	Yes
OP-30: Colonoscopy Interval for Patients with a History of Adenomatous Polyps—Avoidance of Inappropriate Use	Yes
OP-31: Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery	Yes
OP-33: External Beam Radiotherapy for Bone Metastases	Yes

Chart-Abstracted Measures Requiring Patient-Level Data as Proposed

Measure	CY 2020 and Subsequent Payment Determinations
OP-1: Median Time to Fibrinolysis	Proposed Removal CY 2021
OP-2: Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival	Yes
OP-3: Median Time to Transfer to Another Facility for Acute Coronary Intervention	Yes
OP-4: Aspirin at Arrival	Proposed Removal CY 2021
OP-5: Median Time to ECG	Yes
OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients	Yes
OP-20: Door to Diagnostic Evaluation by a Qualified Medical Professional	Proposed Removal CY 2021
OP-21: Median Time to Pain Management for Long Bone Fracture	Proposed Removal CY 2020
OP-23: Head CT or MRI Scan Results for Acute Ischemic Stroke or Hemorrhagic Stroke Patients who Received Head CT or MRI Scan Interpretation Within 45 Minutes of ED Arrival	Yes

Proposed Rule CY 2018

Commenting

Deadline for Comments

- Comments must be received no later than 5 p.m. ET on September 11, 2017, if delivered by regular mail, express or overnight mail, or by hand or courier.
- Comments submitted electronically will be accepted until 11:59 p.m. ET.
- CMS encourages submission of electronic comments to www.regulations.gov.
- Responses to comments will be in the Final Rule, to be issued November 2017.

Submitting Comments

The screenshot shows the homepage of regulations.gov. At the top, there is a navigation bar with links for Home, Help, Resources, and Contact Us. Below this is a search bar with a magnifying glass icon and the text "Search". To the right of the search bar are buttons for "Browse" and "Learn".

The main content area features a banner with the text "Make a difference. Submit your comments and let your voice be heard." Below this is a search box with the text "SEARCH for: Rules, Comments, Adjudications or Supporting Documents:". The search box contains the text "CMS" and a blue "Search" button. Both the search box and the button are highlighted with red boxes.

Below the search box, there are three columns of content:

- What's Trending**: A list of trending regulations, including "AP44- Proposed Rule - Advanced Practice Registered Nurses" and "Elementary and Secondary Education Act of 1965, As Amended By the Every Student Succeeds Act: Accountability and State...".
- Comments Due Soon**: A list of regulations with their closing dates and the number of comments, such as "Today (19)", "Next 3 Days (58)", and "Next 7 Days (158)".
- Newly Posted**: A list of newly posted regulations, including "Today (193)", "Last 3 Days (397)", and "Last 7 Days (565)".

On the right side, there is a featured article titled "FAA Section 333" with an image of a drone. The article text reads: "For questions on the status of FAA Section 333 petitions for exemption please contact FAA directly at 333exemptions@faa.gov or call (202) 267-2999." Below the article are links for "APIs for Developers", "Browse by Category", and "DOS Regulations Twitter Page".

1. Enter *CMS* in the [Search for] box.
2. Select the [Search] button.

Submitting Comments (cont.)

3. Filter: Comment Period = Open; Document Type = Proposed Rule
4. Scroll: Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; etc.
5. Select: [Comment Now] button

The screenshot shows the regulations.gov website interface. At the top, there is a navigation bar with links for Home, Help, Resources, and Contact Us. A search bar contains the text 'CMS' and an 'Advanced Search' button. Below the search bar, it indicates '6 results for "CMS"'. On the left side, there is a 'Filter Results By...' section with two main categories: 'Comment Period' and 'Document Type'. Under 'Comment Period', the 'Open' checkbox is checked, and 'Closed (1,074)' is listed. Under 'Document Type', the 'Proposed Rule' checkbox is checked, and other options like 'Notice (29)', 'Rule (0)', 'Supporting & Related Material (0)', 'Other (1)', and 'Public Submission (400)' are listed. The main content area shows two search results. The first result is titled 'Medicare Program: End-Stage Renal Disease Prospective Payment System, Payment for Renal Dialysis Services Furnished to Individuals with Acute Kidney Injury, and End-Stage Renal Disease Quality Incentive Program CMS-1674-P'. It includes a 'Comment Now!' button, a due date of 'Aug 28, 2017 11:59 PM ET', and an 'Open Docket Folder' button. The second result is titled 'CY 2018 Hospital Outpatient PPS Policy Changes and Payment Rates and Ambulatory Surgical Center Payment System Policy Changes and Payment Rates CMS-1678-P'. It also includes a 'Comment Now!' button, a due date of 'Sep 11, 2017 11:59 PM ET', and an 'Open Docket Folder' button. Red boxes highlight the filter section on the left and the 'Comment Now' buttons for both search results.

Comment on Proposed Rule: Step 1

The system will guide you through a three-step comment process.

Step 1. Enter your comment and contact information.

- a. Required fields have (Required) next to the field name.
- b. Comments can be up to 5,000 characters.

You are commenting on:

The **Centers for Medicare Medicaid Services (CMS)** Proposed Rule: **CY 2018 Hospital Outpatient PPS Policy Changes and Payment Rates and Ambulatory Surgical Center Payment System Policy Changes and Payment Rates CMS-1678-P**
For related information, [Open Docket Folder](#)

1 Your Information **2 Your Preview** **3 Your Receipt**

Information entered will be viewable on Regulations.gov [View Commenter's Checklist \(PDF\)](#)


Comment (Required)

a.

b.


5000 characters remaining


Comment on Proposed Rule: Step 1 (cont.)

Upload file(s) (Optional) 
Choose files **c.** Drop files here **d.**

First Name Last Name

Contact Information

City State or Province (Required)  Select a State... ZIP/Postal Code (Required)

Country (Required)  United States

Email Address

I am submitting on behalf of a third party

Organization Name (Required) **e.**

f.

- c. You can upload a file if you wish.
- d. Enter your contact information.
- e. If submitting a comment on behalf of a third party, enter the organization's name.
- f. When finished entering your comment and contact information, select the [Continue] button.

Comment on Proposed Rule: Step 2

Step 2. Your Preview: Shows how your comment* and information** will appear on *regulations.gov*.

*Your Comment, files you uploaded, Country, and State or Province **will appear** on Regulations.gov.

Your Name, ZIP/Postal Code, and Organization Name **will not appear on Regulations.gov.

- a. Select the [Edit] button to edit your comment and contact information.
- b. When finished previewing, check the box to acknowledge that you have read and understand the provisions of commenting.
- c. If all information is correct, select the [Submit Comment] button.

You are filing a document into an official docket. Any personal information included in your comment and/or uploaded attachment(s) may be publicly viewable on the web.

b. I read and understand the statement above.

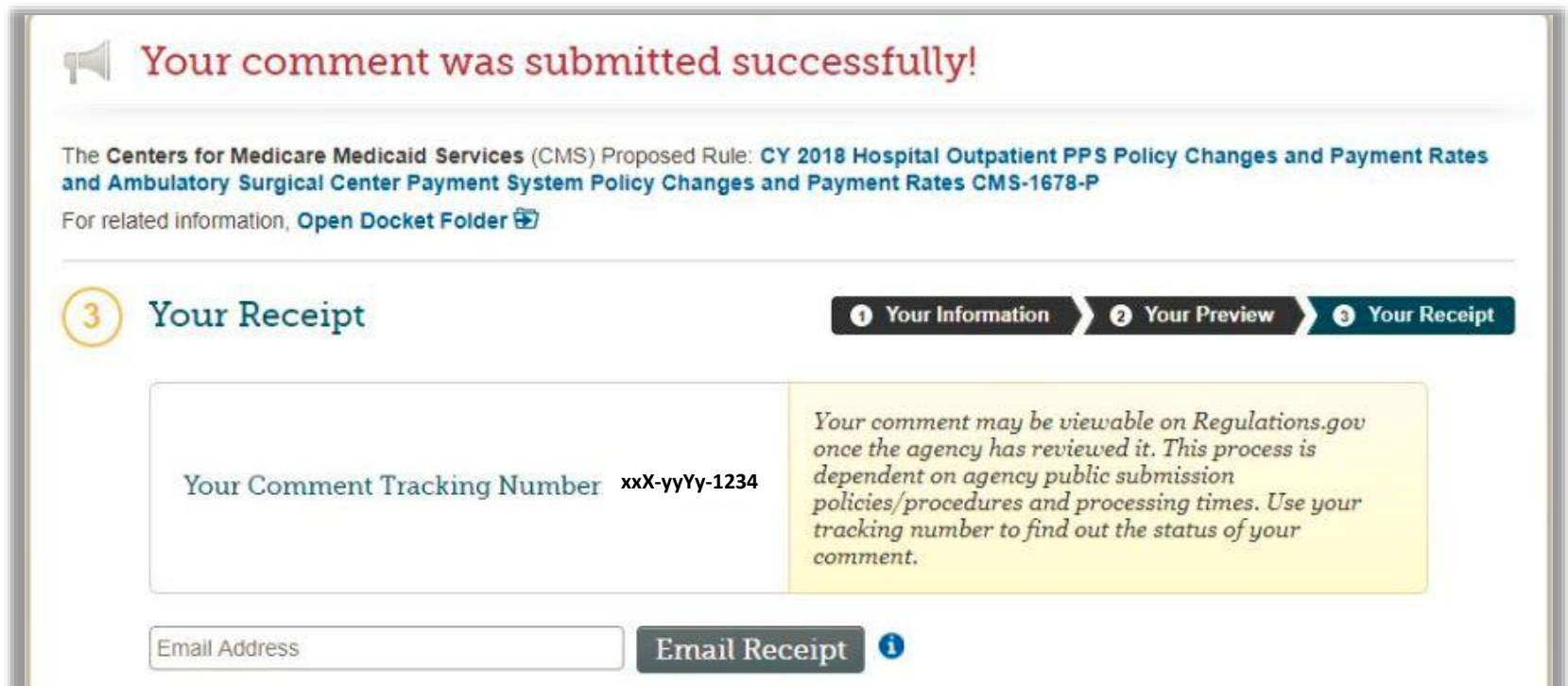
a.

c.

Comment on Proposed Rule: Step 3

Step 3. Your Receipt:

Your comment is assigned a tracking number. Take a screenshot of this page or save your tracking number. You can use your tracking number to learn the status of your comment.



Your comment was submitted successfully!

The Centers for Medicare Medicaid Services (CMS) Proposed Rule: [CY 2018 Hospital Outpatient PPS Policy Changes and Payment Rates and Ambulatory Surgical Center Payment System Policy Changes and Payment Rates CMS-1678-P](#)
For related information, [Open Docket Folder](#)

3 Your Receipt 1 Your Information 2 Your Preview 3 Your Receipt

Your Comment Tracking Number **xxX-yyYy-1234**

Your comment may be viewable on [Regulations.gov](#) once the agency has reviewed it. This process is dependent on agency public submission policies/procedures and processing times. Use your tracking number to find out the status of your comment.

Email Address **Email Receipt** ⓘ

References

- Proposed Rule:

<https://www.gpo.gov/fdsys/pkg/FR-2017-07-20/pdf/2017-14883.pdf>

- Comment Site:

<https://www.regulations.gov/document?D=CMS-2017-0091-0001>

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

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by [SurveyMonkey](#)
Check out our [sample surveys](#) and create your own now!

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

The screenshot shows a web browser window displaying the registration page for a CE credit course. The page header includes the HSAG logo (Health Services Advisory Group) on the left and a security notice on the right: "this is a secure site please provide credentials to continue" with a lock icon. Below the header, the text "Learning Management Center" is displayed. The main heading for the registration is "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The registration form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field has a small icon of a telephone handset. Below the input fields is a "Register" button. The entire form is set against a light blue gradient background.

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site
please provide credentials to continue

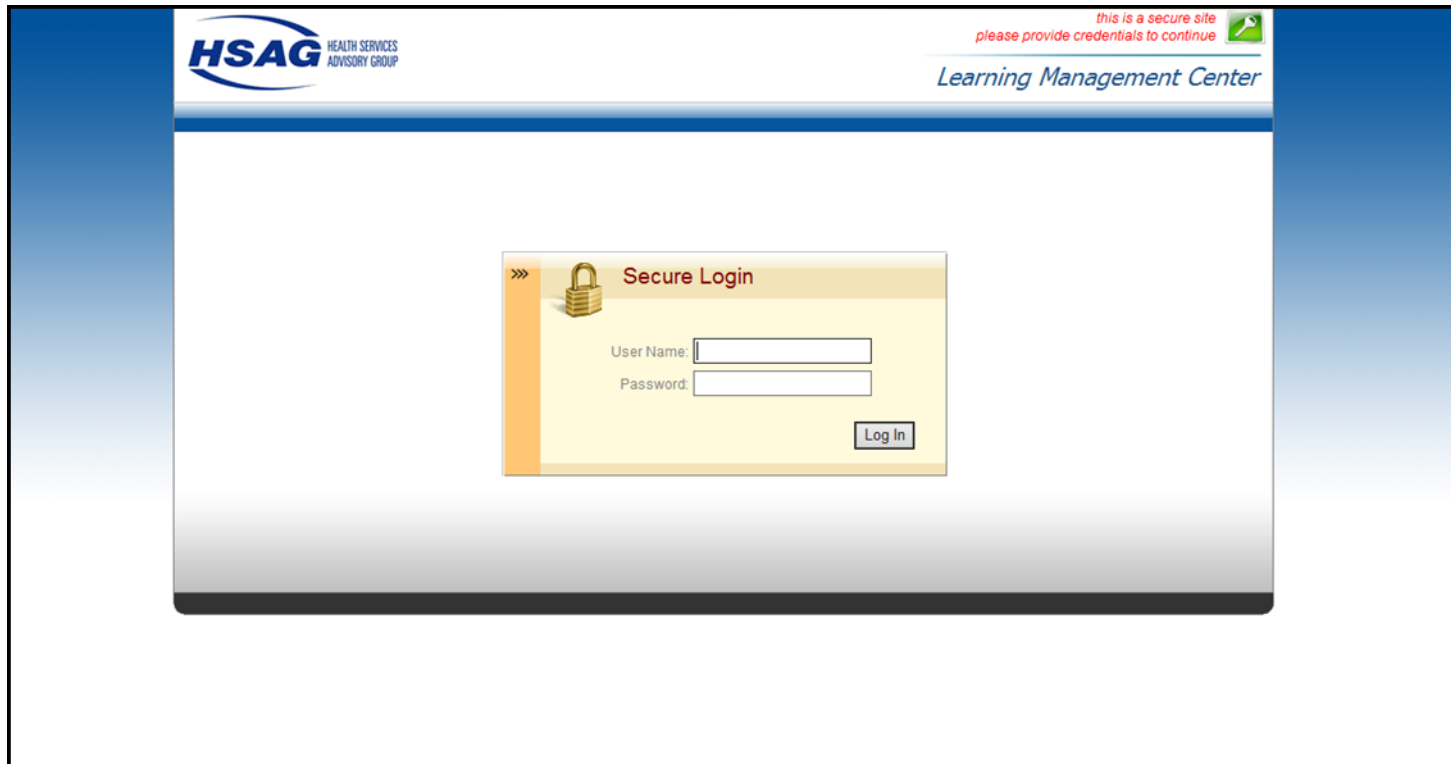
Learning Management Center

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

First Name: Last Name:

Email: Phone:

CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a red security notice reads "this is a secure site please provide credentials to continue" next to a small icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box with a yellow background and a lock icon. It contains two input fields: "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site
please provide credentials to continue

Learning Management Center

»» **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 www.qualitynet.org

Or

- Call the Support Contractor at 866.800.8756.