



# Ambulatory Surgical Center Quality Reporting Program

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## Support Contractor

### Understanding Web-Based Measures for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program

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- Question 1:** Please repeat when the web-based submission period ends.
- Answer 1:** The web-based measure deadline ends on August 15, 2015, at 11:59 p.m. PT.
- Question 2:** I'm trying to enter ASC-7 procedure numbers. However, the table on QualityNet does not match the table updated for ASCs in the v4.0a table for 2014 encounters. I have inquired about this several times, and as of today, QualityNet still has not been updated; it does not include cardiovascular procedures, for example. Can you speak to this?
- Answer 2:** We are sorry for the confusion. Please just answer the categories that are currently listed on QualityNet.
- Question 3:** Is the influenza reported only on "employed" persons that have been at the ASC one or more days? It asks about students, etc.
- Answer 3:** All of these categories are answered separately. If you do not have such persons in your ASC, then you should just submit a zero in those sections.
- Question 4:** Not many ASCs use a vendor to collect the ASC-9 and -10 data. It must be very difficult to gather the aggregate numerators and denominators for both of these measures.
- Answer 4:** You will use the ICD-9 and HCPCS codes in the Specifications Manual to determine your population. You will have to evaluate the chart to determine if the denominator and numerator have been met. Thus, these are chart-abstracted measures.

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- Question 5:** Is there a contact person you can refer me to? I'm trying to see if my new ASC is a part of this submission.
- Answer 5:** The new ASC shares a license with the hospital. If the ASC operates under their own NPI/CCN, then they are responsible to fulfill the ASC program requirements. If the ASC operates and bills from the CCN/NPI of the hospital, then they will be under the hospital outpatient program.
- Question 6:** I see on page 9 of the slides that ASC-11 is mentioned. This measure was suspended, correct?
- Answer 6:** No, this is not suspended. It will be a voluntary measure. You may choose to report this measure or not, without APU penalty. This will be discussed during the presentation.
- Question 7:** When is ASC-8 due?
- Answer 7:** The submission date for ASC-8 is August 15, 2015.
- Question 8:** The QualityNet table includes multi-system procedures not included on the v4.0a table. So you're saying to use the table from the v3.0b manual which would have been 2013 encounters if we had submitted numbers last year, which ended up being not required.
- Answer 8:** You should continue to utilize Specifications Manual 4.0a to submit your ASC-7 data. If there are categories that are not included, submit a zero.
- Question 9:** Can the record include the data, or does it need to say this is why the interval is less than 10 years?
- Answer 9:** For ASC-9, the physician must document the follow-up interval on the colonoscopy report. If it is less than 10 years, there must be a medical reason for that shorter interval.
- Question 10:** We have three endo centers under one NPI number but with different CCN numbers—are they all reported under the one NPI number? I don't have the option of choosing a center for reporting with an individual CCN number, and the help desk cannot seem to fix it.
- Answer 10:** For ASC-8, this is reported to the NHSN/CDC under the CCN and would be reported separately under each CCN. For further assistance from the NHSN, please contact their helpdesk at: [NHSN@cdc.gov](mailto:NHSN@cdc.gov). All other web-based measures are entered into the QualityNet website and by NPI. We are not affiliated with QualityNet or their helpdesk. If you need further assistance from us, please call our number at 866.800.8756.
- Question 11:** Is the population count for -9 and -10 just Medicare patients?
- Answer 11:** The population that meets the denominator requirements for ASC-9 and ASC-10 can be either Medicare or non-Medicare.

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- Question 12:** How do we know, based on fictitious patient 1, that they have used the ICD-9 and ICD-10 codes correctly?
- Answer 12:** The patients used as examples assume these patients met that ICD-9 and ICD-10 inclusion criteria.
- Question 13:** If an ASC chooses not to submit ASC-11, must that ASC select a Measure Designation piece out on QualityNet, or is there an area to mark “not submitting ASC-11”?
- Answer 13:** The voluntary reporting of ASC-11 will begin for Payment Year 2017. This will be entered into the QualityNet Secure Portal along with the other web-based measures.
- Question 14:** What is the time frame for data collection?
- Answer 14:** For ASC-6 and ASC-7, the collection time frame is the entire calendar year of 2014. For ASC-9 and ASC-10, the data collection period is from April 1 through December 31, 2014. For ASC-8 the data collection period is from October 1, 2014 through March 31, 2015. All web-based measures are due on August 15, 2015, at 11:59 p.m. PT.
- Question 15:** What is the best recommended way of keeping track of measure ASC-9?
- Answer 15:** CMS does not dictate how facilities keep track of their cases. Each facility is different; you should decide what makes the most sense based on your environment.
- Question 16:** Is there a contact person you can refer me to? I'm trying to see if my new ASC is a part of this submission.
- Answer 16:** Please call the Support Contractor at 866.800.8756 after the webinar.
- Question 17:** Would patient 3 be excluded even if they have met the codes?
- Answer 17:** For ASC-9, fictitious patient 3 is excluded because the patient had a biopsy during the colonoscopy. In order to meet denominator criteria, the patient has to be 50 years or older with no biopsy or polypectomy.
- Question 18:** What is the submission date for ASC-9 and ASC-10?
- Answer 18:** All web-based measures are due on August 15, 2015 at 11:59 p.m. PT.
- Question 19:** Do ASC 6 and ASC-7 need to be reported yearly? If so, by what date? ASC 1-5 are captured in our state reports that are sent to CMS, correct...no other reporting due on those? Thank you for clarifying.
- Answer 19:** All web-based measures are reported yearly. All web-based measures for this year are due on August 15, 2015 at 11:59 p.m. PT. Also, ASC-1 through ASC-5 are submitted and collected through your billing. Beyond the

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claims-based measures and the yearly submission of your web-based measures, you should be compliant.

**Question 20:** If we do not perform colonoscopies at our ASC, do we still report 0/0?

**Answer 20:** You are correct; please answer 0/0 if your facility does not perform colonoscopies.

**Question 21:** Is the population count for ASC-9 or -10 the actual charts you reviewed (including the exclusionary ones) or the total count of the annual colonoscopy patients for our facility prior to any abstraction?

**Answer 21:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. Once you obtain the population, you will determine the sample size required.

**Question 22:** For measure ASC-8 if we have zero to report, would I just put 0 in the last month then for my reporting? I am still really confused with the ASC-8. I already am registered and everything, just confused about the reporting.

**Answer 22:** You should not be submitting a zero count for ASC-8 as this relates to the employees of your facility. You need to report on the number of employees who received or did not receive the influenza vaccination.

**Question 23:** Current rectal bleeding [is listed] as a symptom but not associated with less than 3 years. Is that a medical reason for exclusion?

**Answer 23:** If the physician documents the reason for the current colonoscopy is rectal bleeding and had documented less than 3 years, then this is acceptable as a denominator exclusion.

**Question 24:** Please repeat the scenario for patient #1 for measure 10.

**Answer 24:** The presentation slides, recording, and transcripts are on <http://www.qualityreportingcenter.com>.

**Question 25:** Can a nurse ask the patient when the last colonoscopy was and document it in the medical record, or does it need to be written by the physician?

**Answer 25:** The date of the last colonoscopy can be documented anywhere in the medical record episode by anyone.

**Question 26:** For ASC-9 and ASC-10, does at least one patient in the denominator have to be Medicare?

**Answer 26:** For ASC-9 and ASC-10, the patient in the denominator can be either Medicare or non- Medicare.

**Question 27:** As far as I know, zero have received the influenza vaccination. We only have three employees at our facility. So if one did, how would I report it then?

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- Answer 27:** You will need to correct your data on the NHSN website where you submitted your original zero.
- Question 28:** What do we do with the sample size?
- Answer 28:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria.
- Question 29:** If a patient has had a prior colonoscopy, are they excluded from the denominator for ASC 9? Example, someone who had a problem at age 35, resulting in a normal colonoscopy now having a colonoscopy at age 55.
- Answer 29:** Since this will not be the patient's first colonoscopy (screening), this will not be in the ASC-9 population. You may need to check how the physician documented this procedure.
- Question 30:** I didn't hear your response to the question. Can we use just the year for the date of the last colonoscopy?
- Answer 30:** You can use just the year if that is all that is available to you.
- Question 31:** Please give abstraction tools.
- Answer 31:** Our abstraction tools are available at <http://www.qualityreportingcenter.com>. Look under the ASC program.
- Question 32:** Please clarify the denominator. Is it all meeting the criteria during the period, or is it the 96 that you look at?
- Answer 32:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria.
- Question 33:** For ASC-9, does the physician need to link the medical reason to the follow-up time frame, or can it be inferred based on the finding of the colonoscopy?
- Answer 33:** Ideally, the physician should link the medical reason to the follow-up interval; however, if the medical reason can be easily established in the medical record, then that is acceptable.
- Question 34:** Please verify if ASC-11 is mandatory or voluntary.

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- Answer 34:** ASC-11 is voluntary.
- Question 35:** We have been reporting since 2012 and meeting the requirements, but our Medicare reimbursement does not seem to reflect our payment increase incentive payment. In fact, the allowed has gone down a few dollars in the past few years. Shouldn't we be seeing an increase?
- Answer 35:** Please refer to the Medicare Intermediary for your state. Please call our center if you need further assistance at 866-800-8756.
- Question 36:** We are a multi-specialty center that only does about 50-60 per year that would even qualify. I am confused about the published information related to sample size. Could you please review this?
- Answer 36:** For the measures ASC-9 and ASC-10, you will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria. If you do not have 63, then abstract the cases that you do have.
- Question 37:** Is there more specific information regarding how to check your reporting compliance on the claims-based measures?
- Answer 37:** You can run a PPR report on QualityNet. This will provide you with a percentage of compliance on your claims.
- Question 38:** The ASC-10 tool states "history of adenomatous polyps." However, below it states "patients with a history of colonic polyps." This is very confusing. Are we looking for patients with a history of adenomatous polyps or colonic polyps?
- Answer 38:** For the patient to be in the population of ASC-10, the patient must have a history of polyps. Adenomatous and colonic polyps are being used synonymously.
- Question 39:** Is the population per year for total colonoscopies only, or does it include upper endoscopies as well?
- Answer 39:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria.
- Question 40:** I have not submitted anything. So then in the last month, 03/31/15, I would just enter 1 then?

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- Answer 40:** The submission does not go by month - you can report monthly, but it is a total aggregate count of all employees. If you still have questions regarding the submission of this measure, the NHSN provides a PDF powerpoint that provides step-by-step directions on how to submit your data.
- Question 41:** Will these same measures, ASC-9 and ASC-10, be reported on again next year, and if so, in the same manner?
- Answer 41:** Yes, unless there are changes in the *Federal Register* Final Rule.
- Question 42:** What if we don't do 63? Do I just report everyone that we do?
- Answer 42:** If you do not have 63, abstract all the cases you do have.
- Question 43:** Is the total population the number of all colonoscopies completed in the ASC?
- Answer 43:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria.
- Question 44:** Can we use the sample size for the cataract reporting?
- Answers 44:** ASC-11 is a voluntary measure, but if you choose to submit the data, you should follow all of the measure guidelines, including utilizing a sample (similar to ASC-9 and ASC-10).
- Question 45:** Will there be a recording of today's webinar?
- Answer 45:** Yes, the webinar it will be at: <http://www.qualityreportingcenter.com>. Also, the slides are there now.
- Question 46:** Please restate the year we record...e.g., flu recorded in August 2015...the drop-down would be 2016?
- Answers 46:** You will select the month and year from the drop-down menus. The user should check the box next to "Influenza Vaccination Summary" under the "Healthcare Personnel Vaccination Module".
- Question 47:** What if the physician documents a screening colonoscopy for a patient who had a prior colonoscopy 20 years ago? Do I include them in ASC-9?
- Answer 47:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. You will then evaluate the denominator criteria, then numerator criteria.
- Question 48:** Please describe the visual function instrument tool.

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- Answer 48:** The visual function instrument tool is a collection instrument that is used to gather data on patients' visual improvement within 90 days following cataract surgery.
- Question 49:** Who, in particular, is normally responsible to submit this information?
- Answer 49:** The facility is responsible. The specific individual is up to the discretion of the facility. You must have secure access to QualityNet to enter this data.
- Question 50:** What browser is best to use to access the website?
- Answer 50:** We are not aware of a specific browser that must be used. For all technical issues, please contact QualityNet at 866.288.8912.
- Question 51:** The denominator can be no greater than 96 – is that correct?
- Answer 51:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria. There is no penalty for over-submitting data.
- Question 52:** Is the ASC-11 measure on cataracts mandatory or voluntary? We thought this measure was voluntary only.
- Answer 52:** According to the 2015 Final Rule, the reporting of ASC-11 is voluntary.
- Question 53:** Since we are only reporting on three quarters for 2014, April–January, will our sample size only be 72 patients for 2014 measures -9 and -10?
- Answer 53:** No, you will still need to report at the full year size, 96 total, for each individual measure.
- Question 54:** Please give us information about the flu vaccination measure.
- Answer 54:** This information is in the Specifications Manual. There is a webinar just presented, which the presentation slides are available on our website: [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com), or you can go directly to the CDC/NHSN website at [www.nhsn.cdc.gov](http://www.nhsn.cdc.gov). Also, the training web site for this measure at CDC/NHSN is <http://www.cdc.gov/NHSN/PDFS/TRAINING/HCP-FLU-VACCINATION-SUMMARY-REPORTING-ASC-TRAINING-SLIDES.PDF>.
- Question 55:** Is there a benchmark for results?
- Answer 55:** The reporting of ASC-9 and ASC-10 have not yet been benchmarked, as the reporting of this measure is new and data is just now being collected.

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- Question 56:** I could not hear clearly. Is ASC-11 voluntary reporting?
- Answer 56:** Yes, ASC-11 is a voluntary measure. Should your facility choose to submit these data, submission would begin January 1, 2016.
- Question 57:** For ASC-9 and ASC-10, is the denominator the population count or is the sample size determined by the population count?
- Answer 57:** Select your population from all colonoscopy patients who meet the denominator criteria in the Specifications Manual. From this number select your population of for 0-900, 63 patients, or for 901- and greater, 96 patients. Your denominator will be the number of patients who meet the criteria for 63 or 96. You should submit a full count of 63 or 96, whatever your population calls for.
- Question 58:** Will these same measures -9 and -10 be reported on again next year, and if so, in the same manner?
- Answer 58:** Yes, these measures will be reported with the web-based measures annually.
- Question 59:** We have a colonoscopy annual count, then we have a sampling count of that annual number to submit to CMS via aggregate numerator/denominator. From this knowledge, what would CMS consider the initial population count for the aggregate entry?
- Answer 59:** You will first obtain your population for each measure by utilizing your ICD-9/HCPCS codes listed on the MIF. When you know the number in the population, you will determine the sample size required (which will be on the chart in your Specifications Manual). Again, this sample size will be either 63 or 96, based on the size of your population. All cases in the final sample size will be in your denominator. The last step is to decide if those cases fit the numerator criteria.

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