## Ambulatory Surgical Center Quality Reporting (ASCQR) Program (CMS



## **QUALITY DATA CODES (QDCS) SUBMISSION GUIDELINES**

Quality Data Codes for measures ASC-1 through ASC-4 should be placed on all claims where Medicare is either the primary or secondary payer. The calendar year (CY) 2020 payment determination will be based on claims submitted for services January 1 through December 31, 2018, paid by the Medicare Administrative Contractor (MAC) by April 30, 2019.

- To begin reporting QDCs, ASCs may need to consult with their Practice Management System (PMS) vendor to program their system to accept or auto-populate their Super Bill with the QDCs since they must be submitted electronically to your Medicare carrier or clearinghouse on the Form CMS-1500 version 02/12 (Health Insurance Claim Form) or electronic equivalent.
- QDCs must appear on the Form CMS-1500 version 02/12 or associated electronic data set with an associated billable charge within the first six line-items to receive credit for this program requirement.
- These codes will populate Fields 24D and 24F on the form.
  - o The submitted charge field cannot be blank.
  - The line-item charge should be the numeral "0" (zero). Please note that dollar signs (\$) or decimal points are not accepted.
  - If a system does not allow a zero line-item charge, a nominal amount can be substituted; the beneficiary is not liable for this nominal amount. If you used a one cent charge, the remark code on the RA will display as N572.
  - o Entire claims with a zero or one cent charge will be rejected. The total charge for the claim cannot be zero or one cent.
  - When a zero charge or a nominal amount is submitted to the carrier or MAC, payment for the amount included in the ASC QDC line will be seen along with the Remittance Advice Remark Code (RARC) of N620.
- Claims may not be resubmitted for the sole purpose of adding or correcting QDCs.
- The rendering provider ID in box 24J must be the facility National Provider Identifier (NPI). If a physician NPI is used, the G-codes will be dropped and will not be submitted to the ASCQR Program.
- All QDCs for an encounter must be reported on the same beneficiary for the same date of service (DOS). Should a claim require more than one Form CMS-1500 version 02/12, such as the seventh or thirteenth line-item, these line items will automatically go onto another claim. Each claim must contain a billable line-item charge and appropriate QDC in order to receive credit for the ASCQR Program requirement.
- Claims should have a minimum of one QDCs or a maximum of four QDCs on each claim affiliated with a billable procedure code.

• If measures ASC-1 through ASC-4 indicate that no event occurred, the composite G8907 may be used in lieu of answering these measures individually.

AMBULATORY SURGICAL CENTER MEASURE G-CODES (QDCs)		
Measure	Measure Description	QDC
ASC-1	Patient Burn	G8908: Patient documented to have received a burn prior to discharge G8909: Patient documented <b>not</b> to have received a burn prior to discharge
ASC-2	Patient Fall	G8910: Patient documented to have experienced a fall within the ASC G8911: Patient documented <b>not</b> to have experienced a fall within the ASC
ASC-3	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	G8912: Patient documented to have experienced a wrong site, wrong side, wrong patient, wrong procedure, or wrong implant event G8913: Patient documented not to have experienced a wrong site, wrong side, wrong patient, wrong procedure, or wrong implant event
ASC-4	Hospital Transfer/Admission	G8914: Patient documented to have experienced a hospital transfer or hospital admission upon discharge from ASC G8915: Patient documented <b>not</b> to have experienced a hospital transfer or hospital admission upon discharge from ASC

G8907: Patient documented not to have experienced any of the following events: a burn prior to discharge; a fall within the facility; wrong site, wrong side, wrong patient, wrong procedure, or wrong implant event; or a hospital transfer or hospital admission upon discharge from the facility. This can be used in lieu of the other four codes if all are negative.

If you have any questions, please contact the ASCQR Program Support Contractor at <a href="mailto:oqrsupport@hsag.com">oqrsupport@hsag.com</a> or call us toll-free at 866.800.8756.

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