



Outpatient Quality Program Systems and Stakeholder Support Team

System Updates: Ambulatory Surgical Center Quality Reporting (ASCQR) Program Presentation Transcript

Moderator

Karen VanBourgondien, BSN, RN
Outpatient Quality Program Systems and Stakeholder Support Team

Speaker

Pamela Rutherford, BSN, RN
Outpatient Quality Program Systems and Stakeholder Support Team

February 17, 2021

DISCLAIMER: This presentation document was current at the time of publication and/or upload onto the *Quality Reporting Center* and *QualityNet* websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance change following the date of posting, this document will not necessarily reflect those changes; this information will remain as an archived copy with no updates performed.

This document was prepared as a service to the public and are not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by this document and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.

Outpatient Quality Program Systems and Stakeholder Support Team

Karen

VanBourgondien: Hello, and welcome to today's webinar. Thank you for joining us. Our speaker today is Pam Rutherford, and she will be providing you with the newest information surrounding system updates such as HARP, data submission, public reporting, and other pertinent information.

If you've not yet downloaded today's handouts, you can get them from our website at QualityReportingCenter.com. Just click on today's event, and you should be able to download the slides.

There are a lot of changes and system updates taking place. So please note that the screen shots we will be sharing with you today may vary slightly from the ones you may see. This is because your view depends on your roles and access permissions. Additionally, there are ongoing updates. So, just keep that in mind as we move forward when you are viewing the screen shots, we will be sharing with you today.

Before Pam kicks us off with things you need to know and how to keep you current with the avalanche of changes, let me first cover a few program-related topics.

The most current public reporting update was last month on January 27. ASC-12 data are the only information that was updated in January.

The next data submission for web-based measures is May 17 of this year. It is the 17th and not the 15th because this year the 15th falls on a weekend. Therefore, we pushed the deadline to the 17th. Now, please do not wait until the last minute to get your data in. As a reminder, you can update, edit, or change any of your data up until the deadline. Once that deadline passes, the warehouse locks and you will not be able to alter your data. So, please make sure you take the time to make sure that it is accurate.

The learning objectives for this presentation are listed here on the slide.

Outpatient Quality Program Systems and Stakeholder Support Team

This program is being recorded. A transcript of today's presentation, including the questions and answers received in the chat box, and the audio portion of today's program will be posted at QualityReportingCenter.com.

During the presentation, if you have a question, please put that question in the chat box located on your screen. One of our subject matter experts will respond. If your question does NOT get answered for some reason, please know that ALL questions and answers will be posted .

Well, let's get started, and I am going to turn things over to Pam. Pam?

Pam Rutherford: Thanks, Karen. Yes, you are so right, there are a lot changes going on. The first thing we would like to bring to your attention is that the QualityNet web address has changed. The new address is QualityNet.cms.gov. We have this new address here on the slide. If you were to put in the old QualityNet.org web address, it will currently redirect you. However, that redirection will be removed in the near future.

Next on our list is the new Hospital Quality Reporting, or HQR, platform, which also has a new address. The new address is hqr.cms.gov. You can see that here on the slide, as well. Today, I will be talking about the new HQR changes to include HARP; registration for Security Official, or the SO; Access Management; Data submission; Vendor Management (VM); and Managed File Transfer.

We will also be covering public reporting and the new Care Compare and the Provider Data Catalog. So, hang on. Here we go.

Everything is going to start with your Healthcare Quality Information System, HCQIS, for short, Access Roles and Profile, which that whole thing is short for HARP. You must have a HARP account.

Outpatient Quality Program Systems and Stakeholder Support Team

HARP is a security identity management portal provided by the Centers for Medicare & Medicaid Services, or CMS. In other words, HARP is the security system that protects the patient data you submit to CMS.

A HARP account is the key that opens the gate to a secure area. So, you must have a HARP account in order to view and submit data.

Creating an account via HARP provides users with a user ID and password that can be used to sign into many CMS applications. It also provides a single location for users to modify their user profile, change their password, update their challenge question, and add or remove the two-factor authentication devices.

All HARP accounts are required to have the two-factor authentication for security purposes. It is an extra layer of security on top of a user ID and password that requires a piece of information only accessible by the user. When setting up your HARP account for the first time, users will be prompted to setup their two-factor authentication by entering one or more authentication devices, and I am going to show you what this looks like shortly. So, hang on.

If you do not have a HARP account, to get started, you will go to the *QualityNet* home page, using the web address here on the slide, QualityNet.cms.gov.

On the top right-hand side of the screen, you will click on the *Register* icon, right next to the arrow.

Then, this page will display, and you can see all of the HARP resources available to you, which you see here on the screen, boxed in red. These resources will direct you, in detail, how to initiate your HARP account.

You must have a HARP account before you can move forward with any other registration process, including becoming a Security Official.

Outpatient Quality Program Systems and Stakeholder Support Team

Now, I want to draw your attention to the left-hand side of the slide, where it says *Registration*. I am going to be talking about that in just a moment, so remember where that is. For now, we are going to set up a HARP account.

You will begin your HARP account by accessing the link seen here on the slide, harp.cms.gov/register. This will take you step-by-step, so we are not going to go through every page. *QualityNet* has all of those resources for you, should you need them.

To create an account, users must enter their profile information, account information, and successfully complete proofing, or identify verification. Registration could take anywhere from five to fifteen minutes, depending on how quickly user data are proofed and verified. HARP uses a third-party service provided by Experian to verify user identities.

Now, once you have your HARP account, you can then register to be your ASC's Security Official. Remember, Security Official is the updated name for Security Administrator, just a name change.

So, now we are going back to the previous slide after you first selected *Register* from the *QualityNet* homepage, the one I told you to remember. Under *Registration*, you are going to select the *I am an HQR user* tab. It will open the *To Register* page, and if you scroll down that page, you will have the view here.

For now, ASCs must continue to submit their Security Official, or SO, application via the Electronic Access Request (EAR). This may change in the future, but for right now ASCs follow a little different process than the other programs.

To begin the Security Official registration, select the link to the word *here* to access the Electronic Access Request, or EAR. Look at where the second red arrow is pointing.

Outpatient Quality Program Systems and Stakeholder Support Team

Believe me when I say, this object appears larger than it is. It is, okay. It is difficult to see, but that blue *here*, is what you are going to click on to access the Electronic Access Request form.

Here is a partial view of the application. It is a simple process, just follow the instructions. Be aware that the instructions will tell you that you must already have your HARP ID in order to be eligible to become a Security Official, and, no, you cannot print the form and email it in. *QualityNet* requires this electronic form.

Follow the instructions and ensure that you are accurate and complete. You can then use the DocuSign or the Adobe Digital ID to complete your application. Instruction for both Adobe Digital ID and Adobe Digital ID are on page five of this application.

Please make sure the registration form is electronically completed and both signature fields are digitally signed. *QualityNet* will reject any hand signatures, which will delay your application significantly. Also, make sure you email this completed form to the correct email address. There is a unique address for ASCs. I have the red arrow pointing to the correct email address, ogrsupport@hsag.com. If you email your application to the wrong email address, it will delay your application.

Once the application process is complete, the *QualityNet* helpdesk will manually verify and approve the first Security Official for your facility. Once the first Security Official has been given access, that individual can login and manage other access requests and users in the HQR platform, and I will show you that in a few minutes.

Okay, so now you have a HARP account, and you are either a Security Official or a Basic User.

Outpatient Quality Program Systems and Stakeholder Support Team

You are ready to log into the HQR platform. We understand that ASCs are not hospitals, but ASCs are under the category of Hospital Quality Reporting. The web address on the slide can be used or you can just enter hqr.cms.gov and it will take you to the initial login page

This is the landing page for your HARP login. By the way, you should be using Google Chrome for this application. This platform will not work on most other browsers.

Here you will enter your HARP ID, and notice here it says User ID. It is the same thing. HARP ID and HARP username are used interchangeably.

You will also enter your password and then select the blue *Login* box.

I have combined these steps together on one slide. So, after you enter your HARP ID and password, under Number 1 here, you will be given the option to choose the device you want to use for the two-factor authentication code. You would have set this up during the HARP ID process. When I started my HARP account my two choices were for the code to be sent to me via text to my cell phone or to my email. You see these options here.

Under Number 2, you can see I chose SMS Text via cell phone and there is a little green check mark indicating that choice. This means the SMS verification code is going to be sent to my cell phone. You will then select the blue *Next* box

Third, you will enter the code you were sent. Enter that code and then select the blue *Continue* box.

Lastly, the terms and conditions page will open, of course. You must scroll all the way through the Terms & Conditions by using the scroll bar so that the *Accept* box will turn from gray to blue. If you agree to the terms and conditions, select the blue *Accept* box.

Outpatient Quality Program Systems and Stakeholder Support Team

You will be taken to the Hospital Quality Reporting, or HQR, dashboard. What you see here now will change in the near future. The *My Tasks* page has been “retired.” If you were to click on the *My Tasks* icon, not a lot is going to happen.

Once any user is given an HQR role and can sign into the HQR, you can manage your access. To do so, you will access the *My Profile* page. See the red arrow?

From the home page, you will click on the drop-down arrow under your name and select *My Profile*.

From here, you can update your password, your two-factor authentication, and update your challenge questions. It will also list the organizations you have access to. For example, I only have access to ABC ASC.

You can also view the permissions you have for the organization and then also submit a request for a change in access or permissions.

Okay, we are going back to the home page of HQR, so I can show you all the new functions of this platform.

Let me just point out a couple of things here though. On the top right, there is a *Change Organization* box. This is what you would use if you report data for more than one facility.

The second thing I want to draw your attention to are the icons on the left, which are boxed in red. This is your dashboard.

If you click on the dashboard toggle, these options will open. These are the current options for ASCs: Data Submissions, Program Reporting, and Administration.

I am going to take you through these one at a time. So, to learn how to enter your data, let’s begin at the top with Data Submission.

Outpatient Quality Program Systems and Stakeholder Support Team

Once you click on that *Data Submissions* icon, this will be the next page. Now, this page is asking how you would like to submit your data and provides two options. These are the two methods you have for data submission. You can use *File Upload* or *Data Form*.

Let's talk about the first choice, the *File Upload* icon. You would select this option if you are a vendor or report data for more than one ASC and want to use the CSV upload option. This allows you to upload external files for the web-based measures for multiple ASCs at a time. The approved CSV file template must be used for this option.

So, if you select the *File Upload* icon. You will be directed here.

With this method, you can select the *Submit Files* option and access your files through the search or browse feature on your computer; or you can use the *Drag and Drop* feature.

The vast majority of you will not use this feature. So, if you are entering data for your ASC, you will select the *Data Form* tab.

If you select the *Data Form* icon, this will be your view.

To open the submission application, you will click on *Launch Data Form*. This will direct you to the ASC web-based submission form, where you can enter your data.

This is a partial view of the web-based measures submission page. You will notice on the left side of the page, you will see your ASC's NPI number, the Submission Period, and the Reporting Period.

You will ensure you have the correct Payment Year selected in the box, at the top right side of the page. See the number 1? You are currently submitting data for the payment determination year 2022.

Outpatient Quality Program Systems and Stakeholder Support Team

To enter your data, you will begin by selecting the green *Start Measure* icon. This will open the data entry page. I will show you that, in detail, in just a moment.

So, let's look at ASC-9 first. This is a required measure, meaning you must report data; but, what if your ASC does not perform colonoscopies? Well, great question.

If your ASC does not perform procedures related to the measure, you can just click on the box under the measure name and description, where it says, "*Please enter zeros for this measure as I have no data to submit.*" If you select that box, the system will auto-fill zeros in that measure for you.

So, if your ASC does not perform any colonoscopies and you check that box, you will be prompted by this pop-up box. It's a safety mechanism within the system.

If your ASC does not perform these procedures and you want to keep the zeros, you will click on the blue *Confirmed* box. This will enter the zeros.

This is what that result will look like. Notice the check mark and the word *Complete* next to ASC-9. That reflects a successful entry.

Now, what if your facility does perform colonoscopies?

Well, you will not check that box we just discussed. You will select the green *Start Measure* box next to ASC-9.

You will then be taken to the data entry page. Any area with red asterisks indicates a mandatory field. You will see these red asterisks on each data entry page.

For ASC-9, you must fill in the numerator and denominator. The total population and sample sizes are not mandatory.

Outpatient Quality Program Systems and Stakeholder Support Team

The N/A option under sampling frequency is auto-selected. You can change that if you wish.

You will enter your data and select the green *Save & Return* icon.

Let's say you have successfully entered your data for ASC-9 and ASC-11, but you do not have your data yet for ASC-13 and ASC-14.

If you have a partial submission, you will not be able to click on the "*I'm ready to submit*" box. This icon will remain gray. Any data you have entered will stay in the data collection tool. You won't have to reenter that data, but it will not cross over into the warehouse and show as submitted until that *I'm ready to submit* box turns blue. No one but you will know that data are there.

So, let's go ahead and look at ASC-13 and ASC-14, specifically.

Here we are looking at the data entry page for ASC-13. As a reminder, a red asterisk indicates a required field. The facility's total population, sample size, and facility's sampling frequency do not have red asterisks, so you do not have to enter this data.

You will enter the numerator for this measure, and it says right on the page, "Surgery patients with a body temperature equal to or greater than 96.8 recorded within 15 minutes of arrival in PACU"

Next, enter your denominator, all patients, regardless of age, undergoing surgical procedures under general or neuraxial anesthesia of greater than or equal to 60 minutes duration.

Once you enter your data, you will select the green *Save & Return* icon.

Oops. The data are incorrect. Here, our numerator is larger than our denominator, which of course cannot be. Well, we just got in a hurry and accidentally reversed that. So, the system let us know, "Hey, you know, there is something wrong."

Outpatient Quality Program Systems and Stakeholder Support Team

Just simply re-enter the data and click on the *Save & Return* box again. It will take you back to the main page where the measures are listed, Then you can move on and select the green *Start Measure* next to ASC-14.

Here is a quick look at ASC-14. This measure only has a numerator and denominator. Those will be the only data points you will enter if this measure applies to your ASC.

The numerator is All Cataract Surgery Patients who had an Unplanned Anterior Vitrectomy. This number should be very small. The denominator is All Cataract Surgery Patients.

Once again, you would enter the information and click on *Save & Return*.

Okay, once you have submitted all of your data, that *I'm ready to submit* box will turn blue. Select that blue box. This is what moves your data into the warehouse. It is not submitted until you select that blue *I'm ready to submit* box.

Happy days, you have entered all your data.

You will see a green check mark with the word *Complete* next to all of the measures.

This view allows you to view the numbers that you entered. You are able to quickly check the data you entered. If you did make a mistake, you can just click on the blue *Edit Measure* icon next to each measure and the data entry page will open allowing you to revise your data. A word of caution though, if you edit your data, make sure that you hit that blue *I'm ready to submit* button again.

To make sure it has actually been submitted, you will look at the green banner at the top of the screen. You want to make sure you see the green check mark next to *Submit*.

Outpatient Quality Program Systems and Stakeholder Support Team

You can print off a screen shot for your records, or you may choose to click the *Export Data* icon and save the information that way.

Data submission complete!

If we go back to the dashboard and click on the next category, which is Program Reporting, you will see three subcategories: Reporting Requirements, Performance Reports, and Public Reporting. Eventually, meaning it is not here yet, this is where you would go to obtain the status of the facility in terms of program requirements, run reports, and obtain publicly available data.

So, stay tuned. There is a lot of new enhancements coming with this HQR platform.

Next up is the last category, Administration. We can see two subcategories of Vendor Management and Notice of Participation.

However, if you are a Security Official for your ASC, you will also have an Access Management subcategory, which is not displayed on this slide. This is where you will go to view and manage your users for the ASC. You will be able to review and approve any access requests you may have received.

As far as the Notice of Participation subcategory for the ASC program, if your ASC has 240 or more paid Medicare claims in a year, then you are required to report data in order to meet program requirements. So, there is no action needed under the Notice Of Participation option for ASCs.

The vendor management category allows you to add or manage vendors that submit data on behalf of your facility.

Before I show you Vendor Management, let's assume you are a Security Official and you do have the Access Management subcategory.

Outpatient Quality Program Systems and Stakeholder Support Team

Access Management is a new process for granting user access requests for both the Basic Users and Security Administrators or Officials.

The benefits of access management make requesting and assigning access much faster; request, assign and modify and approve access for Basic Users and Security Administrators/Officials right from the system; and its easy-to-understand permission levels mean you will always have confidence that your team has just the right permissions. New interfaces are easy to follow and guide you to complete your task.

This is the view of what your Access Management page looks. Again, this is where you will manage the users for your facility, like adding users and approving access requests.

So, now let's talk about vendor management in general terms before we look at what's in this category.

This is a new process for managing vendors directly within HQR. As a result, the *QualityNet* registration form and the vendor authorization tool will not be required. The new system will save time and provide much more transparency into who can access what programs.

An ASC's Security Official has the ability to authorize and assign specific permissions to the vendor of their choosing. Vendors no longer have the ability to request access directly. Only the facility can approve a vendor's access.

The benefits of the HQR's new Vendor Management system are you can assign, modify, and remove vendor access for data submission from one page and you can receive an instant confirmation when vendors are added, suspended, or removed. So, you always know your coverage levels and resume access for vendors previously associated with your organization with the click of a button. Now, let's take a closer look at it in the system.

Outpatient Quality Program Systems and Stakeholder Support Team

From the dashboard, under the Administration category, we are going to select Vendor Management.

From this initial page, you can search, filter by status up at the top left. You can add a vendor, which is next to the number 2 on the top right of the page. By number 3, you can edit, suspend, or remove an existing vendor.

The search options are relatively self-explanatory. So, let's start with how you would add a vendor. To start, you will select on the blue *Add Vendor* box. This top box will display. You would enter either the name of the vendor or the vendor ID number. On this slide, we have a fictitious vendor name. You would then click on the search icon. You would then be able to review your permissions by selecting the blue *Review* box.

Let's go back to the landing page under Vendor Management, but this time, we are going to edit permissions for an existing vendor. You would click on the toggle next to the vendor you wish to edit and then select the *Edit Access* icon.

For ASCs, the vendor permissions would be the web-based measures because right now, there are no other data that need to be entered manually. The other measures for this program are outcome based and the data are collected via paid Medicare claims.

You can see here that this vendor, for Data Submission of web-based measures can edit and upload data. For Submission Results, the permission is for read and view only. If you were to select the blue *Review* box, you would be provided the same information. Remember, this system is for all programs. So, for other programs there would be other options there.

If, for some reason, you wanted to edit your vendors permission, you can choose the *Edit* box. Let's click on the *Edit* box

Outpatient Quality Program Systems and Stakeholder Support Team

This view will display and provide data submission information for encounter quarters and submission dates. My view and permissions for HQR are different, so the dates you will see will not be the same.

Again, you will see here the permission level for this vendor is to Upload/Edit Data. If you want to change that, you will simply select the blue *Edit* box.

This page will open, and you can see the permissions and the options to change. Under Permissions, you can select No Access, which you can see here with the blue check mark, or you can select Upload/Edit. You then need to fill in the encounter quarters and the submission date.

You can choose or enter a quarter and submission end date, or you can select the boxes to not include an end date.

Once you make your edits, you will select the blue *Confirm* box, and then *Apply & Close*.

Let's go back to the landing page under vendor management. You will click on the toggle next to the vendor you wish to edit. You can either suspend access or remove a vendor.

Whether you select to remove a vendor or suspend a vendor's access, the boxes shown here will display and you will need to confirm this action.

That's it, the quick tour of the new HQR system. There will be on-going changes with this system and there will be more options and functionality in the future.

Moving on. Currently, ASCs only manually enter data in the form of the web-based measures. Therefore, the only report to run would be with regard to the export of that data. All other reports are sent to you.

Outpatient Quality Program Systems and Stakeholder Support Team

Some of you may remember Secure File Transfer. That is how you received secure reports like your facility's Preview Report. That was in the old system, which is no longer active. So, in its place is the Manage File Transfer, or MFT. The link to this application is here on the slide.

As I stated, this system replaces Secure File Transfer in *QualityNet* and manages file transfers. It provides file sharing and secure email with a single interface. As with the other applications, you must have a HARP account to access.

ASCs will use this for Submission of Request for reconsideration and to access to Preview Reports and Facility-Specific Reports (FSRs).

If you have a question, or there are issues, or you need assistance for this, you will need to contact the *QualityNet* Help Desk at the contact information here on the slide.

For those of you not aware, Hospital Compare has retired. The new public reporting site is Care Compare.

Now, this fall, CMS launched Care Compare, a streamlined redesign of eight existing CMS healthcare compare tools available on [Medicare.gov](https://www.medicare.gov).

Care Compare provides a single user-friendly interface that patients and caregivers can use to make informed decisions about healthcare based on cost, quality of care, volume of service, and other data. With just one click, patients can find information that is easy to understand for various providers and healthcare services instead of searching through multiple tools.

This offers a simple design that is optimized for mobile and tablet use. Enhancements for mobile use will give practical benefits like accessing the tool using a smartphone that can initiate a phone call to providers simply by clicking on the provider's phone number.

Outpatient Quality Program Systems and Stakeholder Support Team

In conjunction with the launch of Care Compare, additional improvements have been made to other CMS data tools to help Medicare beneficiaries compare costs. The Procedure Price Look Up tool now includes physician fees in addition to facility fees, offering people with Medicare a more accurate prediction of the true out-of-pocket costs.

The Provider Data Catalog (PDC) better serves individuals who are interested in detailed CMS data and can use interactive and downloadable files. The PDC now makes quality datasets available through an improved Application Programming Interface, or API, allowing innovators in the field to easily access and analyze the CMS publicly reported data and make it useful for patients. The Provider Data Catalog site is where ASC data are publicly displayed and can be viewed and downloaded.

ASCs will not be able to view their data on the Care Compare site. However, you can access the Provider Data Catalog site from Care Compare, and we will show you how to get there on the following slide.

From the homepage of Care Compare, using the link here on the top of this slide, the next page you see will be the shaded image here on the slide. If you scroll down that page, you will see the three boxes, here on the slide. To find information about your facility, you will click on that blue link, next to the red arrow, under these three boxes.

By clicking on this link, it will take you to the area where data for ASCs are stored.

This slide is a snapshot of the page you will see when you clicked on that link. The direct link to that site is at the top of the slide. So, you can just access that link and bypass Care Compare.

You will scroll down the page a bit and select the *Hospitals* icon. Again, this the category in which ASCs have been placed in this platform.

Outpatient Quality Program Systems and Stakeholder Support Team

If you were to scroll down this page, there would be a lot of categories and measure sets available. To obtain ASC-specific data, select *ASC* from the tag options

This page will display, and you will scroll down a little until you see this view, which is a snapshot of the ASC data available. To download your data, select *Download CSV*.

Okay, I just wanted to just point out a few things and let you know how to obtain data for your ASC.

We have covered so much information today. In summary, we have reviewed how data are entered for web-based measures in the Data Submission tab in HQR. New options and enhancements are on the way like Program Reporting that will allow you to check your organizations program requirement status, availability of reports, and public reporting information.

The Administration category has a streamlined Access Management process to allow you to manage vendor status, Security Official and basic user access and status, and Care Compare is the new redesigned compare tool which contains improvements and additional tools.

Stay tuned for changes in the future specific to ASCs.

I think that's all the time we have today. We thank for attending the webinar and I certainly hope we provided everyone something. Thank you.