



Outpatient Quality Program Systems and Stakeholder Support Team

The Escape Room: The Search for Clues in Your Data Abstraction

Question & Answer Summary Document

Speakers

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Subject-matter experts researched and answered the following questions during the live webinar. The questions may have been edited for grammar.



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Question 1: **If our facility submitted our data early in the year (February) will the system changes that caused the submission delay require us to go back and resubmit?**

No. You will not need to resubmit any data. The extension was offered to accommodate system changes related to the Security Official access process. You can check your data submission on our Look Up Tool: <https://www.qualityreportingcenter.com/en/ascqr-program/data-dashboard/ccn/>.

Question 2: **Is OP-29 the same measure as ASC-9?**

The OP-29 and ASC-9 measures are similar: OP-29 is for the Hospital Outpatient Quality Reporting (OQR) Program and ASC-9 is for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program.

Question 3: **Are you picking a random sample of 63 patients?**

Yes, the random selection comes from your total population.

Question 4: **For ASC-9, if you have 6000 cases, can you enter all 6000, or do you default to 96 cases?**

You can submit all 6000, or 100 percent.

Question 5: **You mentioned the age of 66 as a denominator exclusion for ASC-9. Where in the Specifications Manual can I find more information for this exclusion?**

This guidance can be found under the denominator exclusions in the ASC-9 Measure Information Form (MIF).

Question 6: **Regarding ASC-9, you noted an example of a patient included in the denominator even though the physician documented that the cecum wasn't reached. Doesn't documentation of an incomplete colonoscopy create an exclusion, just as if there was documentation of poor prep?**

To exclude a case based on a medical reason, there must be documentation in the colonoscopy report that the recommended follow-up interval is less than 10 years.



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Question 7: Where can I find my Facility-Specific Report (FSR)?

FSRs are accessible by logging into the Managed File Transfer (MFT) dashboard and entering your Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) username and password. The MFT dashboard link is <https://qnetmft.cms.gov/>. Please note, FSRs are available for a 30-day period. If you have any issues with accessing your FSR, please contact the QualityNet Service Center at (866) 288-8912.