

Quality Reporting for Hospital Outpatient Departments and Ambulatory Surgical Centers: CY 2021 Program Finalized Proposals

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We Have Reached Our Destination: The CY 2021 Final Rule





Learning Objectives

Attendees will be able to:

- Locate the Calendar Year (CY) 2021 Outpatient Prospective Payment System/Ambulatory Surgical Center (OPPS/ASC) Final Rule in the *Federal Register*.
- List the finalized changes to the Hospital Outpatient Quality Reporting (OQR) and Ambulatory Surgical Center Quality Reporting (ASCQR) Programs final rule.
- State the impact the finalized changes will have on each program.

Program Announcements





Announcements

- All data will be submitted through the Hospital Quality Reporting (HQR) platform.
- The original *Hospital Compare* was “retired,” effective December 1, 2020.
 - Use Care Compare on Medicare.gov
- An upcoming webinar will cover these subjects, system changes, and more.

Finalized Proposals Aligned for Hospital OQR and ASCQR Programs





Administrative Requirements

To use the term Security Official (SO) instead of Security Administrator (SA) and codify this change.

This will:

- Denote the authority invested in the role.
- Refer to the individual(s) who have responsibilities for security and account management requirements for the facility's *QualityNet* account.
- Not add any additional burden.

This proposal has been finalized.

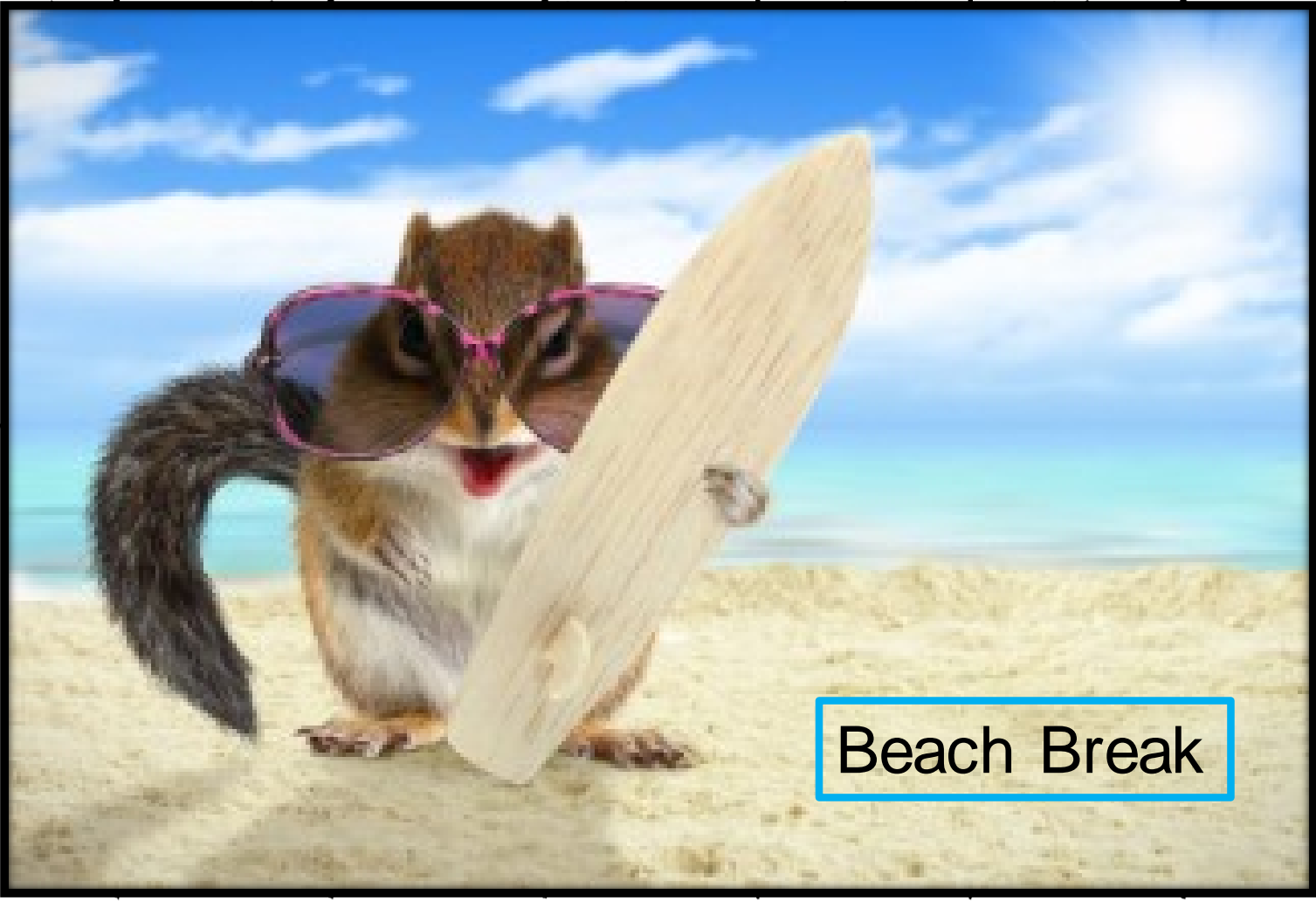


Data Submission Deadlines

All program deadlines falling on a nonwork day be moved forward consistent with the Social Security Act beginning with the effective date of this rule.

- CMS will codify this policy by adding a new paragraph: “All deadlines occurring on a Saturday, Sunday, or legal holiday, or on any other day all or part of which is declared to be a nonwork day for Federal employees by statute or Executive order are extended to the first day thereafter which is not a Saturday, Sunday, or legal holiday or any other day all or part of which is declared to be a nonwork day for Federal employees by statute or Executive order.”

This proposal has been finalized.



Beach Break

Finalized Proposals for Hospital OQR Program





Public Display of Quality Measures

Codify the existing policy by adding language. This new paragraph would specify:

“Hospitals sharing the same CMS Certification Number (CCN) must combine data collection and submission across their multiple campuses for all clinical measures for public reporting purposes.”

This proposal has been finalized.



Participation Status

Remove the phrase “submit a new participation form” from regulatory language.

- This aligns with previously finalized policy as submission of this form was removed as a program requirement.
- New language would state, “A withdrawn hospital will not be able to later sign up to participate in that payment update, is subject to a reduced annual payment update, and is required to renew participation in order to participate in any future year of the Hospital OQR Program.”

This proposal has been finalized.



Reconsideration

Remove “the first business day on or after” from existing language.

- This is in alignment with the finalized proposal to change the submission deadlines
- Reconsideration Requests are to be made by March 17.
 - If March 17 is a nonwork day, it will be the first day *after* March 17 that is not a nonwork day.

This proposal has been finalized.



Review and Corrections Period

Expand and codify the review and corrections policy to apply to measures submitted via the CMS web-based tool beginning with data submitted for the CY 2023 payment determination and subsequent years.

- Hospitals will have a review and corrections period, which will run concurrently with the data submission period.
 - This period is from the time the submission period opens until the submission deadline.
- No changes can be made **after** the submission deadline.

This proposal has been finalized.



Educational Review

Codify the previously finalized policy by adding a new paragraph.

- A paragraph will be added to address these processes and procedures.
 - Hospitals that are selected and receive a score for validation may request an educational review 30 calendar days from the date the validation results are made available. If the results indicated an incorrect score, the corrected score will be used.

This proposal has been finalized.



Overall Star Rating

Update the current methodology to calculate the Overall Hospital Quality Star Rating.

- The methodology will use data collected for outpatient and inpatient measures that are publicly reported beginning in CY 2021 and subsequent years.

This proposal has been finalized.

Claims-Based Measures

Measure	Status
OP-8: MRI Lumbar Spine for Low Back Pain	No Changes
OP-10: Abdomen CT – Use of Contrast Material	No Changes
OP-13: Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac, Low Risk Surgery	No Changes
OP-32: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	No Changes
OP-35: Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy	No Changes
OP-36: Hospital Visits after Hospital Outpatient Surgery	No Changes

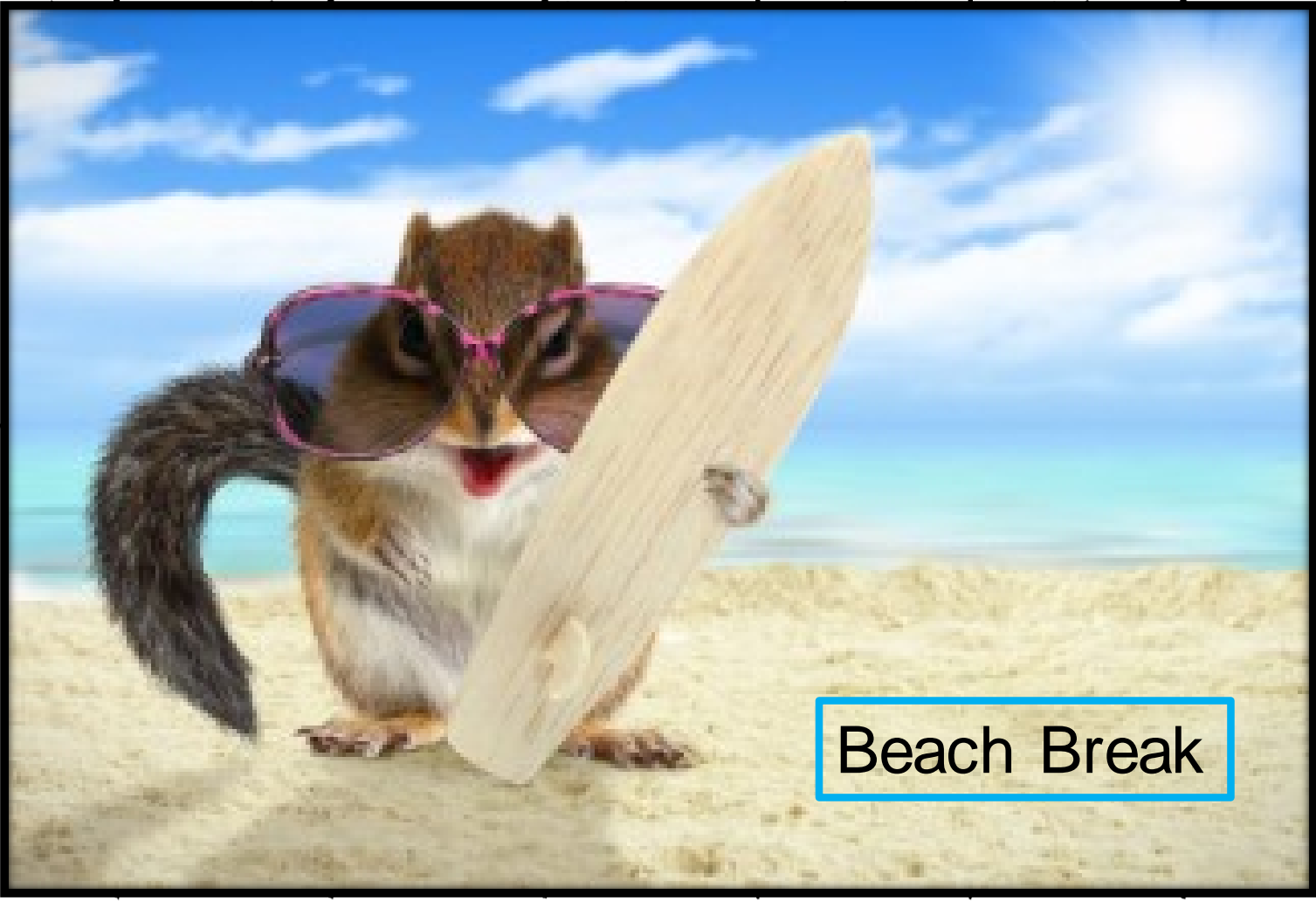


Measures via a Web-Based Tool

Measure	Status
OP-22: Left Without Being Seen	No Changes
OP-29: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	No Changes
OP-31: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary)	No Changes

Chart-Abstracted Measures

Measure	Status
OP-2: Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival	No Changes
OP-3: Median Time to Transfer to Another Facility for Acute Coronary Intervention	No Changes
OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients	No Changes
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	No Changes
OP-37a–37e: Consumer Assessment of Healthcare Providers and Systems Outpatient and Ambulatory Surgery Survey (OAS CAHPS)	Remains Delayed



Beach Break

Finalized Proposals for the ASC Quality Reporting Program





Update of Language

Remove the phrase “data collection time period” and replace with “data collection period” for language consistency.

This proposal has been finalized.



Review and Corrections Period

Implement and codify a review and corrections period running concurrently with the data submission period beginning with the effective date of the rule.

- During the review and corrections period, ASCs can enter, review, and correct any data submitted to CMS.
- These data cannot be changed **after** the submission deadline.

This proposal has been finalized.

ASCQR Program Measure Set

Measure	Status
ASC-1: Patient Burn	Suspended
ASC-2: Patient Fall	
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	
ASC-4: All-Cause Hospital Transfer/Admission	
ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	No change

ASCQR Program Measure Set (cont.)

Measure	Status
ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary)	No Change
ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	No Change
ASC-13: Normothermia	No Change
ASC-14: Unplanned Anterior Vitrectomy	No Change

ASCQR Program Measure Set (cont.)

Measure	Status
ASC-15a–15e: OAS CAHPS	Delayed
ASC-17: Hospital Visits After Orthopedic Ambulatory Surgery Center Procedures	No change
ASC-18: Hospital Visits After Urology Ambulatory Surgery Center Procedures	No change
ASC-19*: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers	No change

* Begins with CY 2024 payment determination

Resources



Surf's Up!

Federal Register

Boardwalk Open

Final Rule



Resources

- Final Rule PDF version in the [*Federal Register*](#)
 - OQR, starts on page 314
 - ASC, starts on page 322
- Today's presentation can be found on:
www.QualityReportingCenter.com
 - [Outpatient Archived Events tab](#)
 - [ASC Archived Events tab](#)





Thank You!

Acronyms

ASC	Ambulatory Surgical Center
ASCQR	Ambulatory Surgical Center Quality Reporting
CCN	CMS Certification Number
CE	continuing education
CMS	Centers for Medicare & Medicaid Services
CY	Calendar Year
HQR	Hospital Quality Reporting
OAS CAHPS	Consumer Assessment of Healthcare Providers and Systems Outpatient and Ambulatory Surgery Survey
OP	outpatient
OPPS	Outpatient Prospective Payment System
OQR	Outpatient Quality Reporting
SA	Security Administrator
SO	Security Official



Continuing Education (CE) Approval

This program has been approved for one CE credit for the following boards:

- **National credit**

- Board of Registered Nursing (Provider #16578)

- **Florida-only credit**

- Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
- Board of Registered Nursing
- Board of Nursing Home Administrators
- Board of Dietetics and Nutrition Practice Council
- Board of Pharmacy

Note: To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.



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