CMS Quality Reporting for ASCs

Discussing the CY 2023
Hospital OPPS/ASC Payment
System Final Rule



Work Plan for Today

Topic	Speaker
Welcome	Karen VanBourgondien, RN, BSN Outpatient Quality Program Systems and Stakeholder Support Team
 CY 2023 OPPS/ASC Payment System Final Rule Finalized ASCQR Program Proposals and RFCs Question and Answer Session 	Anita J. Bhatia, PhD, MPH Program Lead, ASCQR Program, CMS
Public ReportingHospital ASC Compare ToolsProgram Measures and Deadlines Review	Karen VanBourgondien, RN, BSN

Learning Objectives

At the conclusion of this event, attendees will be able to:

- List the Ambulatory Surgical Center Quality Reporting (ASCQR) Program related finalized proposals in the Calendar Year (CY) 2023 Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Payment System final rule.
- Recall the Requests for Information (RFI) and Request for Comment (RFC) topics related to the ASCQR Program included in the CY 2023 OPPS/ASC final rule.
- Summarize the January public reporting refresh and be able to locate your facility's data.
- State the program deadlines, current and in the future.

Locating the CY 2023 OPPS/ASC Rule

- Publication in the Federal Register
 - https://www.federalregister.gov/documents/2022/11/23/2022 23918/medicare-program-hospital-outpatient-prospective-payment-and-ambulatory-surgical-center-payment
- PDF Version
 - https://www.govinfo.gov/content/pkg/FR-2022-11-23/pdf/2022-23918.pdf
 - Ambulatory Surgical Center Quality Reporting (ASCQR) Program begins at Section XV, page 370.



ASC Quality Reporting in This Year's Final Rule

Anita J. Bhatia

ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

Proposed:

Change ASC-11 from mandatory to voluntary reporting beginning with the CY 2025 reporting period/CY 2027 payment determination.

- Facilities would not be subject to a payment reduction for failing to report during the voluntary reporting periods.
- Centers for Medicare & Medicaid Services (CMS) will consider mandatory reporting of this important cross-setting patient reported outcome measure of functional status in future rulemaking.

Considerations

- Concerns of reporting burden due to the COVID-19 pandemic include the following:
 - Ongoing staffing and medical supply shortages
 - Changes in patient case volumes
- The previously finalized 2-year delay for mandatory reporting is no longer sufficient.

Decision

Finalized:

- The ASC-11 measure will change from mandatory to voluntary reporting beginning with the CY 2025 reporting period/CY 2027 payment determination.
- Voluntary reporting will remain for CY 2023 and CY 2024 reporting periods.



Gathering Information

Request For Comment (RFC) on Measures and Topics for Future Consideration

RFC Summary

- The potential readoption of the ASC Facility Volume Data on Selected ASC Surgical Procedures measure or another volume indicator in the ASCQR Program
- Specialty center approach for ASC quality measures
- Interoperability and Electronic Health Record (EHR) use

RFC: ASC Facility Volume Data

- Reimplementation of ASC-7: ASC Volume on Selected ASC Surgical Procedures Measure or another volume measure
 - Collects surgical procedure volume data on seven categories of procedures
 - Tracks volume changes
 - Serves as an indicator for patients with facilities experienced with certain procedures
- Will assist in the development of a pain management measure

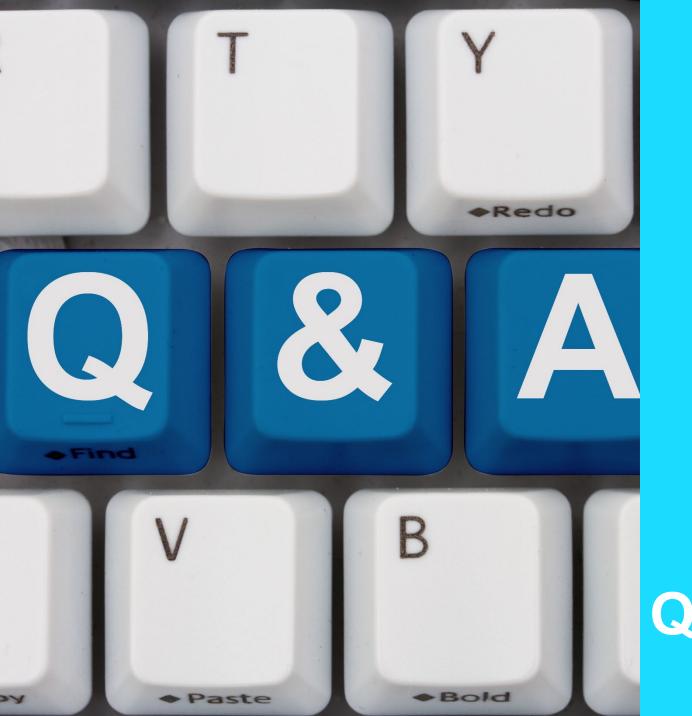
RFC: Specialty Center Approach

- A set of measures related to different specialties from which ASCs could choose a combination of measures
- Specialized tracks within a specialty area
 - Would allow ASCs to focus on practice-specific measures
 - Could benefit patients with relevant information on quality and safety

Interoperability and EHR Initiatives

Information on how ASCs are moving towards the goal of interoperability

- Barriers in the ASC setting
- Impact of Health Information Technology (HIT)
- Ability of ASCs to participate in interoperability or EHR-based activities including electronic clinical quality measures (eCQMs)



Questions & Answers



Using the Tools on Hand

Public Reporting

January Refresh: Claims-Based Measures

- ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy (with respect to January 1, 2019, through December 31, 2021)
- ASC-17: Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures (with respect to July 1, 2020, through December 31, 2021)
- ASC-18: Hospital Visits after Urology Ambulatory Surgical Center Procedures (with respect to July 1, 2020, through December 31, 2021)

These measures are calculated from paid Medicare Fee for Service (FFS) claims and do not require any manual abstraction and submission.

January Refresh: Web-Based Measure (ASC-20)

The data will reflect a single quarter of data in each quarterly release.

- The January 2023 release displays Quarter 1 2022 data.
 - ASC-20: The percent of healthcare personnel who completed COVID-19 primary vaccination series

Not Refreshed: Web-Based Measures

The other web-based measures were <u>not</u> refreshed in January as they were refreshed in the October 2022 release:

- ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
- ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary)
- ASC-13: Normothermia
- ASC-14: Unplanned Anterior Vitrectomy

Finding Your Data

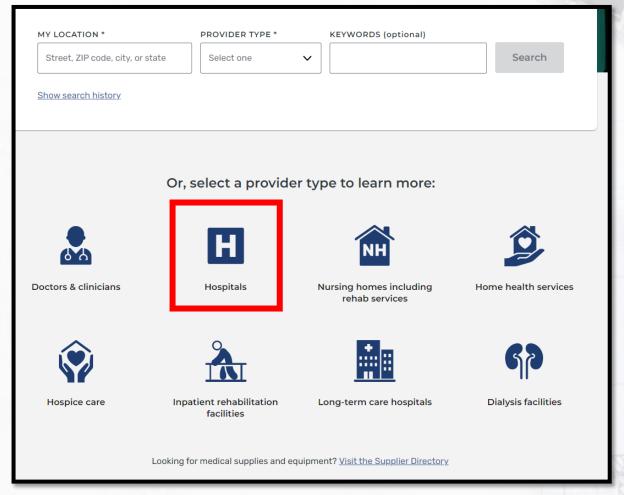
Publicly displayed information for ASC measures can be found on the Provider Data Catalog (PDC):

https://data.cms.gov/provider-data/topics/hospitals/ambulatory-surgical-centers

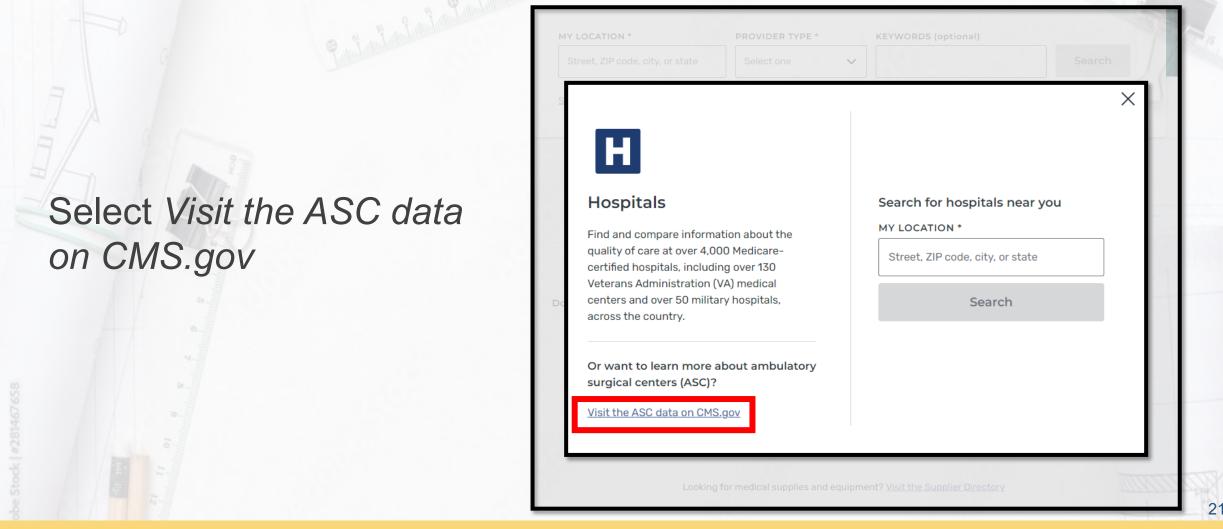
Care Compare

https://www.medicare.gov/care-compare/

From the Care Compare home page, select Hospital.



Select the ASC Option

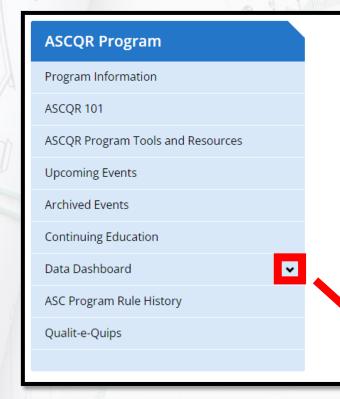


Home Page



Facility Compare Dashboard

Select ASC Compare Tool from the Data Dashboard drop-down.



ASCQR Program

Welcome to the Centers for Medicare & Medicaid Services (CMS) Ambulatory Surgical Center Quality Reporting (ASCQR) Program. The ASCQR Program exists to promote higher quality, more efficient health care for Medicare beneficiaries through measurement. Under this program, quality data reporting requirements for care rendered in the ASC setting were implemented starting with claims submitted for services beginning October 1, 2012.

If you are new to the program or would like to learn more, please take a moment to review our website.

- For more information about the ASCQR Program, visit the ASC Program Information page.
- For videos and resources on reporting and participating in the ASC Program, visit the ASC 101 page.
- For specific measure reporting guidelines and tools, visit the ASC Tools and Resources page.

As the national support contractor for the ASCQR Program, the team at HSAG is available to answer questions or supply any additional information you may need. We invite you to join the Ambulatory Surgical Center ListServe at qualitynet org to receive notifications about program developments. We are committed to offering quality service in a tact us at oqrsupport@hsag.com or call us toll-free at s66.800.8756 from 7

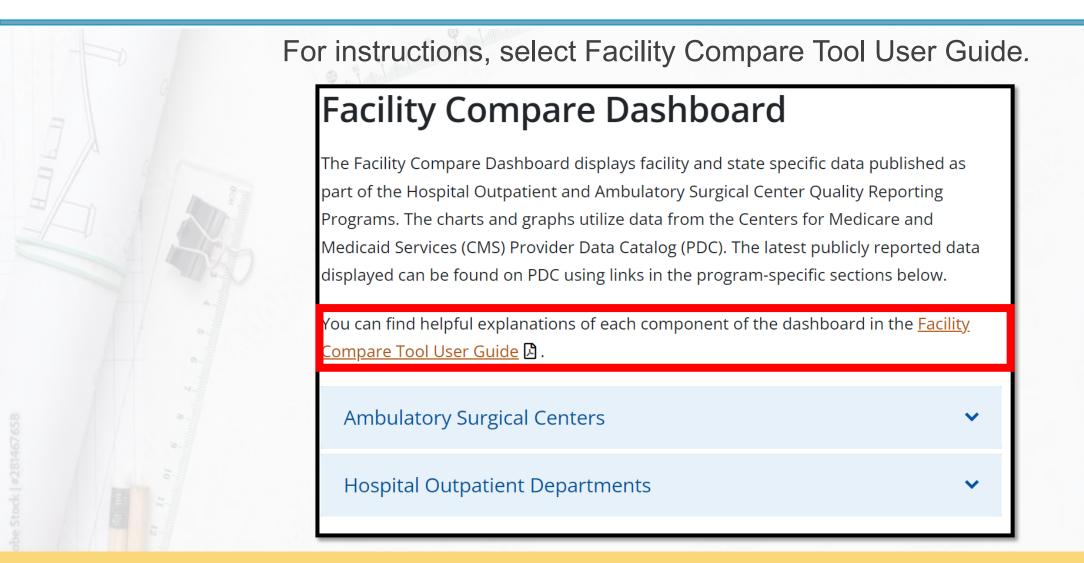
ASC Compare Tool

ASC Lookup Tools

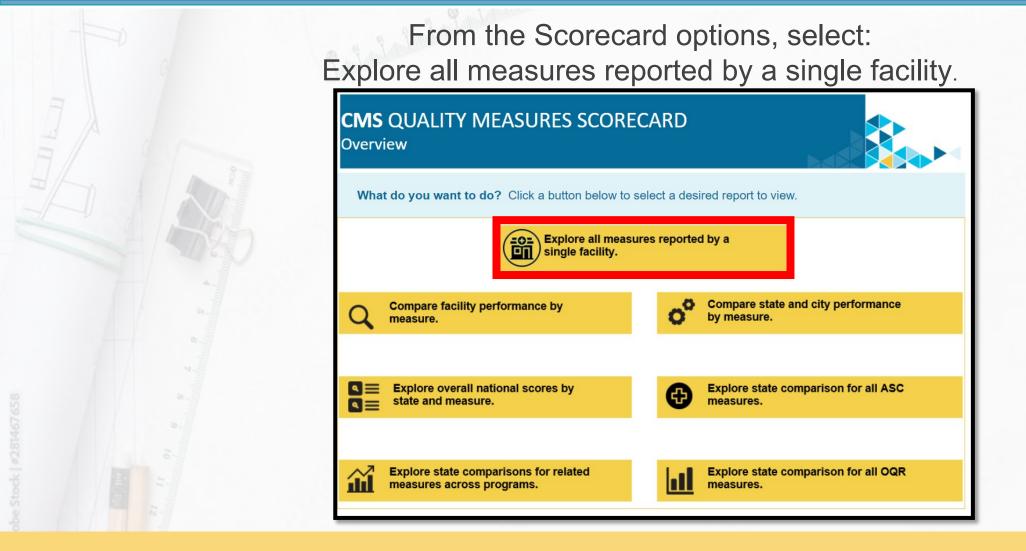
Medicare Procedure Price Lookup

Lookup Tool Archives

User Guide and Quality Measures Scorecard

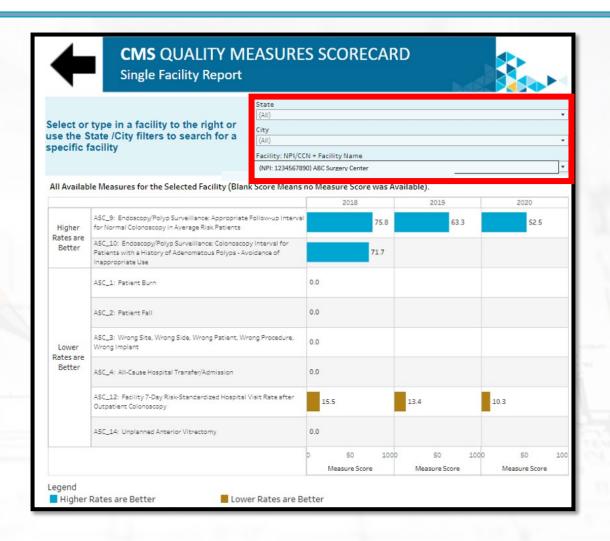


Scorecard



Single Facility Search

Make your selections in the light blue area to filter your search options.



Single Facility Report View





Checking on Project Planning

Program Review: Measures and Deadlines

Claims-Based Measures

Payment Year 2024

Measure	Reporting Period
ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy*	Jan 1, 2020-Dec 31, 2022
ASC-17: Hospital Visits After Orthopedic Ambulatory Surgery Center Procedures	Jan 1, 2021–Dec 31, 2022
ASC-18 : Hospital Visits After Urology Ambulatory Surgery Center Procedures	Jan 1, 2021–Dec 31, 2022
ASC-19: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers	Jan 1-Dec 31, 2022

^{*}Remember: CMS did not use data reflecting services provided January 1, 2020, through June 30, 2020 (Q1 and Q2 2020) in its calculations for Medicare quality reporting.

Web-Based Measure: NHSN

Payment Year 2024

Measure	Reporting Period	Submission Deadline
	Jan 1–Mar 31, 2022	August 15, 2022
ASC-20: COVID-19 Vaccination Coverage Among Healthcare Personnel	Apr 1-Jun 30, 2022	November 15, 2022
	Jul 1-Sept 30, 2022	February 15, 2023
	Oct 1-Dec 31, 2022	May 15, 2023

Your next deadline

NHSN=National Healthcare Safety Network

Web-Based Measures: HQR

Payment Year 2024

Measure	Reporting Period	Submission Period
ASC-9: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients		
ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery*	Jan 1-Dec 31, 2022	Jan 1–May 15, 2023
ASC-13: Normothermia Outcome		
ASC-14: Unplanned Anterior Vitrectomy		

*Voluntary Reporting HQR=Hospital Quality Reporting

Web-Based Measures: New Measures

Payment Year 2025

Measure	Reporting Period	Submission Period
ASC-1: Patient Burn		
ASC-2: Patient Fall		
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	Jan 1-Dec 31, 2023	Jan 1-May 15, 2024
ASC-4: All-Cause Hospital Transfer/Admission		

You will begin reporting these measures for the May 15, 2024, deadline.

Survey Measures: In the Future

ASC-15a-e: OAS CAHPS Measures Payment Year 2026

Measure Measure	Reporting Period
ASC-15a: About Facilities and Staff	Voluntary reporting begins with CY 2024
ASC-15b: Communication About Procedure	reporting period.
ASC-15c: Preparation for Discharge and Recovery	
ASC-15d: Overall Rating of Facility	Mandatory reporting begins with CY 2025
ASC-15e: Recommendation of Facility	reporting period for the 2027 payment year.

OAS CAHPS=Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems

Support

- For program-related questions, contact the support team at 866.800.5756
- Question & Answer Tool:
 https://cmsqualitysupport.servicenowservices.com/qnet_qa
- For questions related to the National Healthcare Safety Network (NHSN), contact the support team at NHSN@cdc.gov.
- Center for Clinical Standards and Quality (CCSQ) Service Center: (866) 288-8912

Thank You



Continuing Education Approval

This program has been approved for one 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 approval for any other state, license, or certification, please check with your licensing or certification board.

Acronyms

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	ASC	Ambulatory Surgical Center	HQR	Hospital Quality Reporting
	ASCQR	Ambulatory Surgical Center Quality Reporting	IT	Information Technology
	CMS	Centers for Medicare & Medicaid Services	NHSN	National Healthcare Safety Network
	CY	Calendar Year	OAS CAHPS	Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems
	eCQM	Electronic Clinical Quality Measure	OPPS	Outpatient Prospective Payment System
	EHR	Electronic Health Record	PDC	Provider Data Catalog
	FFS	Fee for Service	RFC	Request for Comment

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