



Outpatient Quality Program Systems and Stakeholder Support Team

A Guide to Successful Reporting in the Ambulatory Surgical Center Quality Reporting (ASCQR) Program Question and Answer Summary Document

Speakers

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



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Question 1: **If our ASC uses the Data Tracing Worksheet for the COVID-19 Vaccination Among Healthcare Personnel (HCP) measure does that spreadsheet calculate the most current up to date definition?**

The spreadsheet calculates the measure based on the data you enter. Therefore, the facility should make sure they are entering data on the spreadsheet that uses the most current up-to-date definitions. You can find additional information on the Data Tracking Worksheet on the [NHSN website](#).

Question 2: **I thought we could enter the data for the web-based measures in the Hospital Quality Reporting (HQR) system for a quarter and not the full year. Is this no longer an option?**

Data for web-based measures 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; ASC-13: Normothermia; and ASC-14: Unplanned Anterior Vitrectomy are entered in the HQR system annually. Your facility may internally collect data quarterly using all four quarters of the reporting period. However, the actual submission of the data cannot be done until the submission period opens from January 1 through May 15.

Question 3: **Is submitting data for the flu vaccine still required?**

No. Reporting data for the flu vaccine is not a measure in the Ambulatory Surgical Center Quality Reporting (ASCQR) Program. The measure was removed in the [CY 2019 ASC final rule](#).

Question 4: **If our ASC submits the ASC-20: COVID-19 Vaccination Coverage Among Healthcare Personnel measure data in the National Healthcare Safety Network (NHSN) system, do we also submit that data in the HQR system?**

No. The submission of data for the ASC-20 measure is submitted through the NHSN system only.

Question 5: **If the claims-based measures do not apply to our ASC, are we required to report data?**

Data for the claims-based measures are collected automatically from paid Medicare claims for cases that meet measure criteria. There is no manual abstraction or reporting for these measures on the part of the ASC. Therefore, if your ASC does not have applicable claims-based measure cases, you will not have reported data for the ASCQR Program.



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Question 6: **If our ASC does not report the ASC-20 measure, is there a 2-percent Medicare payment reduction like the measures reported in HQR?**

If an ASC does not report data for all required measures in the ASCQR Program, including ASC-20, it will not meet the program requirements. Failure to meet program requirements will result in a 2-percent payment reduction to the ASC's Annual Payment Update (APU).

Question 7: **For the ASC-13 measure, are the numerator and denominator data totals for each month from 2022?**

The total population is the sum of all cases that meet denominator criteria during the reporting period of January 1 through December 31, 2022.

Question 8: **If required reporting is not completed by the submission deadlines, how long does the 2-percent payment reduction last?**

The payment penalty is applied to the full calendar year. For example, if a facility fails the calendar year (CY) 2024 payment determination, the payment penalty will apply to Medicare claims from January 1 through December 31, 2024.

Question 9: **If our ASC does not bill 240 Medicare primary and secondary total cases, do we submit any data (including ASC-20 data)?**

No, not for the ASCQR Program. If a facility has fewer than 240 Medicare claims during a given calendar year, the facility is not required to collect data the following calendar year, for the subsequent payment determination year. Therefore, ASC-20 data would also not be required for the purposes of the ASCQR Program. However, facilities may need to submit ASC-20 data due to other (such as state or organizational level) COVID-19 Vaccination Coverage Among HCP data submission requirements. For details on the 240 Medicare claims threshold, review page 2 of the [Successful Reporting in ASC Quality Reporting Program Guide](#).

Question 10: **Will we sample ASC-1: Patient Burn; ASC-2: Patient Fall; ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant; and ASC-4: All-Cause Hospital Transfer/Admission measures?**

No. The ASC-1 through ASC-4 measures are not sampled. You will enter your full population for each of these measures for the denominator and then enter your numerator. Measure details can be found in the [ASCQR Specifications Manual](#).



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Question 11: Is there a minimum population sampling for ASC 9?

Yes, if your annual population for ASC-9 is between 0-900, the minimum sample size to submit is 63 cases. If your annual population is under 63, then you will not sample and will submit all cases in your population for this measure. Please refer to the ASCQR [Specifications Manual](#), Section 2, to see the full population and sampling specifications.

Question 12: The ASC-13 measure is for surgical patients. Would endoscopy centers need to complete this measure?

Yes. The ASC-13 measure is a required measure and must have a value entered for cases that meet measure criteria. If your facility has no data that meet the measure criteria for ASC-13, select: *Please enter zeros for I have no data to submit*. Measure criteria can be found in the ASCQR [Specifications Manual](#).

Question 13: Will we still report data for ASC-20 after the Public Health Emergency (PHE) ends in May?

Yes, reporting for ASC-20 will continue even after the PHE ends. Any measures added or removed from the ASCQR Program must go through the rule making process.

Question 14: Are the ASC-1 through ASC-4 measures mandatory? Does ASC-2 include all falls inside the facility?

Yes, reporting for the ASC-1 through ASC-4 measures is mandatory for the ASCQR Program, beginning with the CY 2023 reporting period for the CY 2025 payment determination. ASC-2 includes all ASC admissions that experience a fall inside the ASC. The ASCQR [Specifications Manual](#) provides details on these measures.

Question 15: When I log into NHSN, it shows an alert that states: Missing Weekly Summary Data. What does this mean?

The NHSN system allows for weekly data submissions, and the system automatically issues this soft reminder if weekly data are not submitted. However, for purposes of the ASCQR Program, facilities are only required to submit data for one self-selected week per month. As long as you have submitted at least one self-selected week of data per month, these soft reminders can be disregarded. Ensure the week you are reporting ends in the month you are intending to report.



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Question 16: How can I print a copy of the NHSN data I reported?

Right click inside the data form you submitted to view the option to print a copy.

Question 17: Where can I find the 2023 ASC-20 submission deadlines?

All program measures with associated deadlines can be found on QualityNet.cms.gov.

Question 18: Does a facility's staff vaccination rate affect payment?

No. The ASCQR Program is a pay-for-reporting program. If you accurately submit data for the required measures by the submission deadline, your annual payment will not be reduced.

Question 19: Can all three weeks in a quarter go into the NHSN system at the same time, instead of inputting the data monthly?

Yes, you can submit all quarterly data at one time as long as those data are entered by the submission deadline for that quarter.

Question 20: Where do I find steps to add another Security Official (SO)?

The individual will first need an HCQIS Access Roles and Profile (HARP) account. Once a HARP account is established, log into the HQR system, and click on the *Create Access Request* button.

Question 21: As a new administrator, where is the best place to go to make sure I am meeting all requirements?

You can access numerous resources on the [New to Reporting page of QualityReportingCenter.com](#). Feel free to call our help desk at any time at **866.800.8756**. We are always glad to help.

Question 22: Our facility has been entering data for the ASC-20 measure every week. Is that acceptable?

Yes, however, for purposes of the ACSQR Program, only the last week of the reporting month will be used.