How to Succeed at Ambulatory Surgical Center Quality Reporting: A Program Review

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Agenda

Content	Speaker
• Introduction • Policy Goals and Drivers • Code of Federal Regulations	**Karen VanBourgondien, RN, BSN** Outpatient Quality Program Systems and Stakeholder Support Team
• Program Requirements • Verifying Your Data Submission • Public Reporting • Program Resources	**Danielle Leffler, MS** Outpatient Quality Program Systems and Stakeholder Support Team
• Question and Answer Session	**Danielle Leffler and Karen VanBourgondien**

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Objectives

By the end of the presentation, participants for the ASCQR Program will be able to:

- State policy goals and drivers.
- Identify program requirements and recall processes to verify data submission.
- Locate your facility's publicly displayed data and list the refreshed measures.
- Describe resources on the QualityNet and Quality Reporting Center websites.

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Policy Goals & Drivers

- Last year, CMS announced the CMS strategic vision and six strategic pillars:

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Regulations

- ASCs that do not meet the ASCQR Program requirements will receive a 2.0 percentage point reduction in their payment update for the applicable payment year.
- ASCs with fewer than 240 Medicare claims per year during an annual reporting period for a payment determination year are not required to participate for that subsequent payment determination.

Click Here to view the Code of Federal Regulations.

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Program Requirements

Data System Account Managers

Security Official (SO) in Hospital Quality Reporting (HQR)

- Facilitates the registration and account management process
- Manages users at the organization
- Submits data via the HQR web-based tool

Facility Administrator (FA) in National Healthcare Safety Network (NHSN)

- Facilitates the enrollment and account management process.
- Manages other users at the organization
- Submits data in the NHSN web-based tool

Click Here for directions to register your Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) credentials and register in the HQR system.

Click Here for directions to set up your Secure Access Management Services (SAMS) credentials and enroll in NHSN.

Measure Types

- Web-based measures in HQR
- Web-based measure in NHSN
- Claims-based measures

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Web-Based Measures in HQR: **New**

CY 2025 Payment Determination Year			
Number	**Measure**	**Reporting Period**	**Submission Period**
ASC-1	Patient Burn	Jan 1 – Dec 31, 2023	Jan 1 – May 15, 2024
ASC-2	Patient Fall		
ASC-3	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant		
ASC-4	All Cause Hospital Transfer/Admission		

Quick Notes

For the ASC-1 through ASC-4 measures, the:

- Denominator is “All ASC Admissions.”
- Definition of **Admission** is “Completion of registration upon entry into the facility.”
- Data for these measures are collected and submitted annually.

Access the program Specifications Manual on the QualityNet website.

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Web-Based Measures in HQR

CY 2025 Payment Determination Year			
Number	**Measure**	**Reporting Period**	**Submission Period**
ASC-9	Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	Jan 1 – Dec 31, 2023	Jan 1 – May 15, 2024
ASC-11*	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery **(Voluntary)***		
ASC-13	Normothermia		
ASC-14	Unplanned Anterior Vitrectomy		

*ASC-11 remains a voluntary measure. ASCs that do not submit data will not be subject to a payment penalty.

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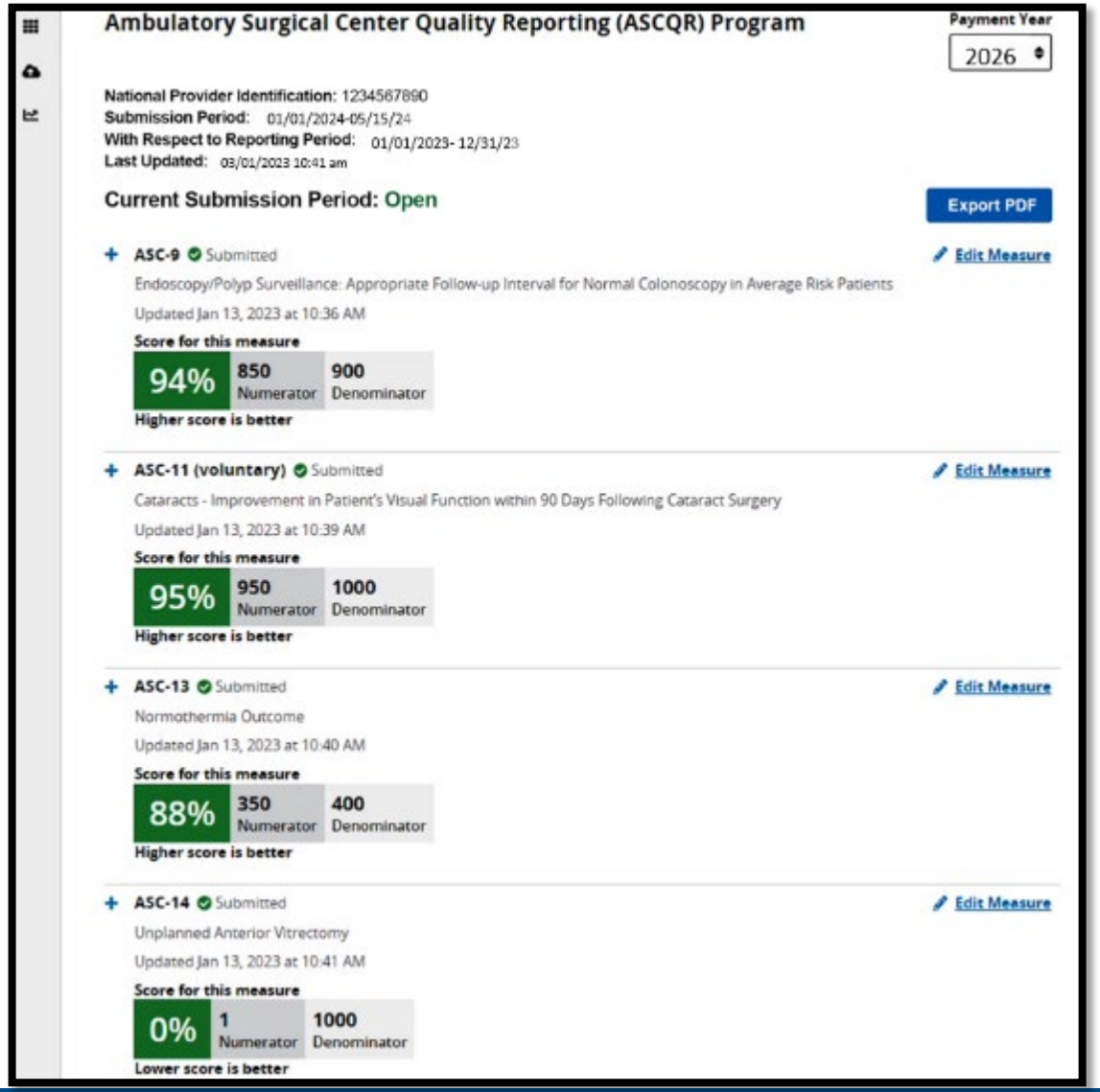
HQR Reminders

- If your ASC has **no data** to submit for a measure, do not leave it blank! You **must** either:
  - Check the attestation box ; **or**
  - Enter zeros into the fields.
- Log in **at least** every 60 days to keep your account active.
- It is highly recommended that each facility have two SOs.
- Web-based measures in HQR are due on **May 15, 2024.**

IMPORTANT

HQR Updates: Previous View



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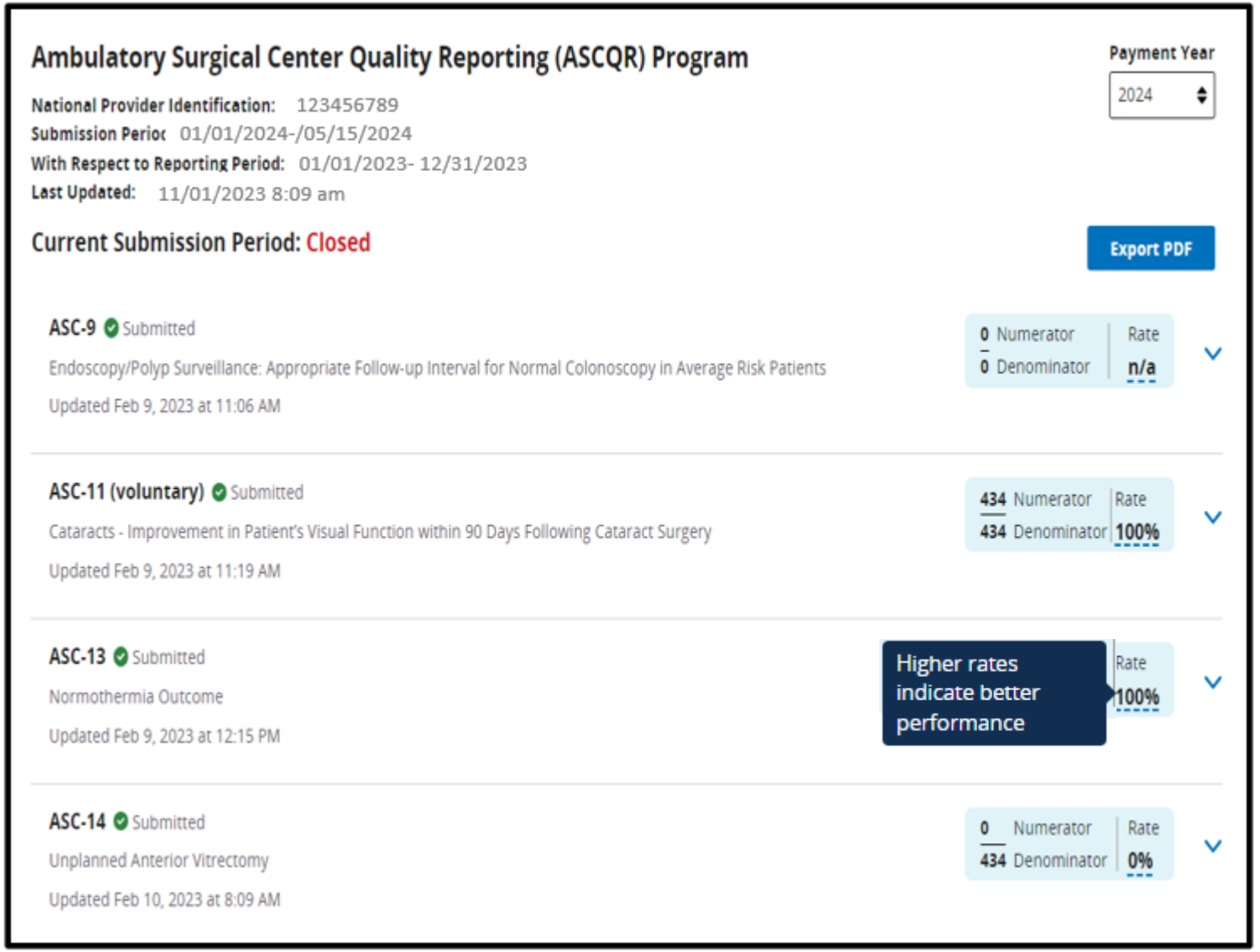
IMPORTANT

HQR Updates: New View



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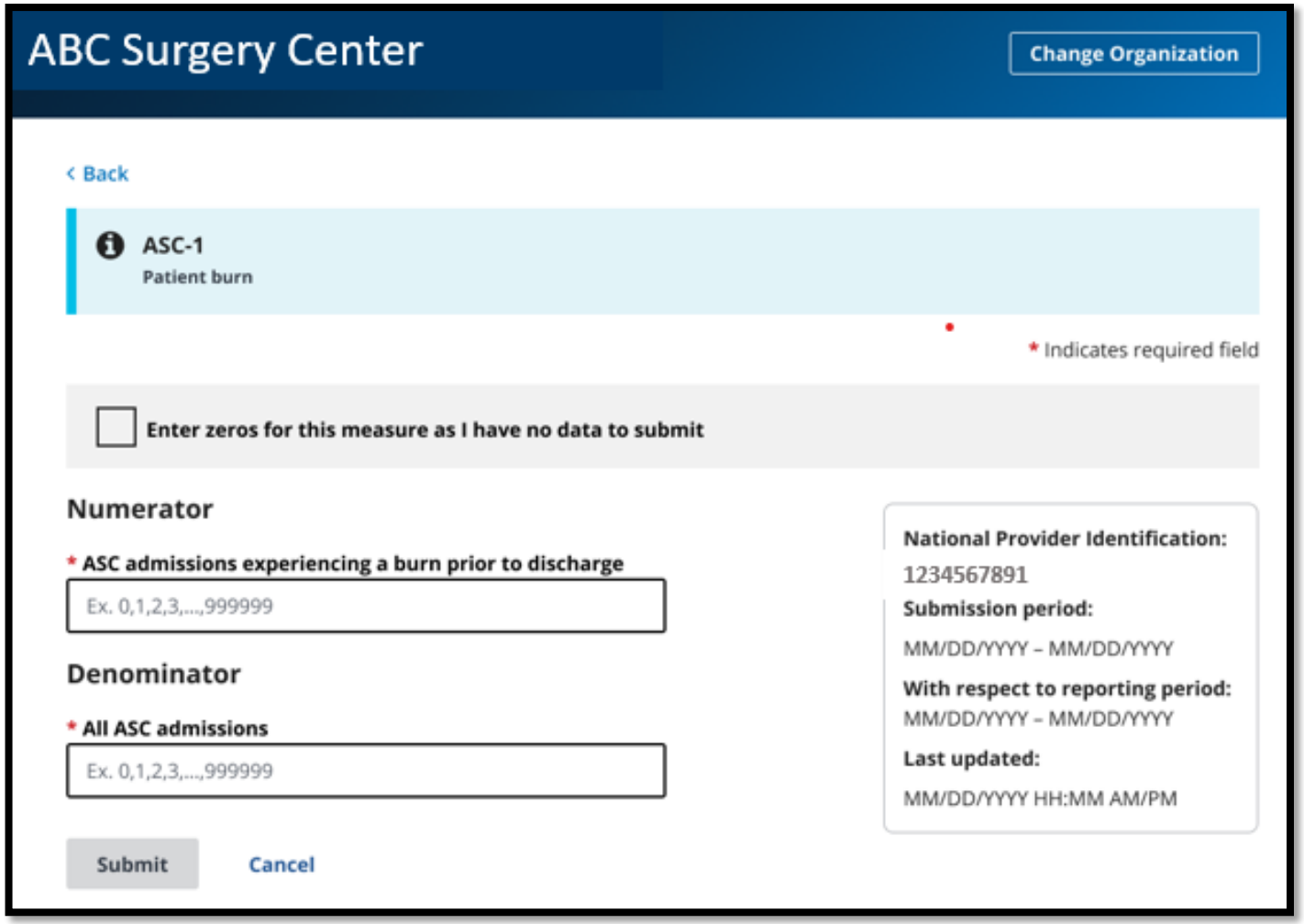
Sneak Peek

Example of the data entry page for the ASC-1 measure.

To submit data, enter the:

1. Numerator
2. Denominator; select **Submit**



Click Here for detailed measure information in the ASCQR Program Specifications Manual.

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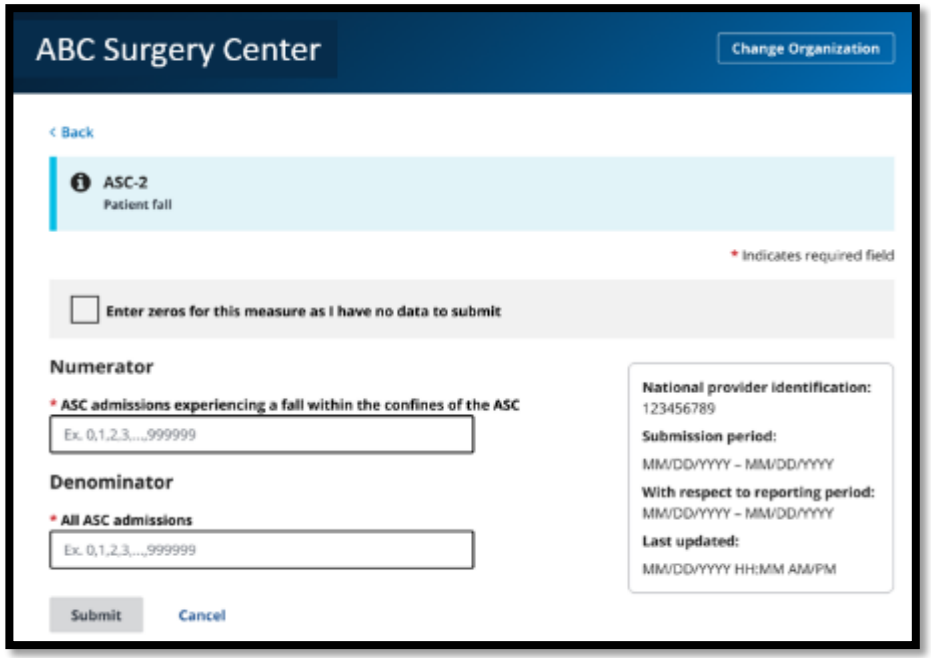
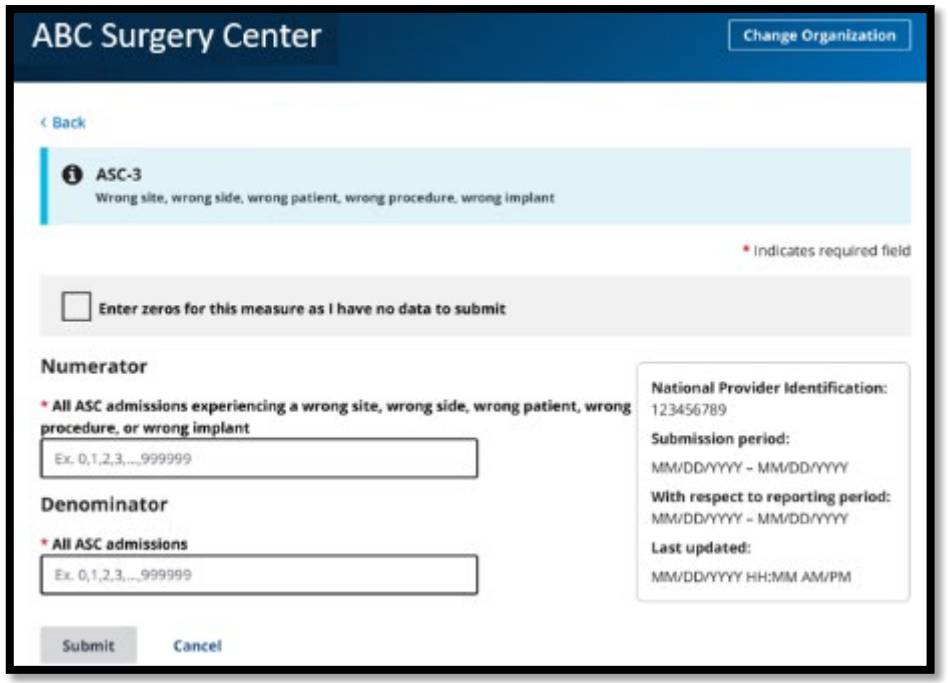
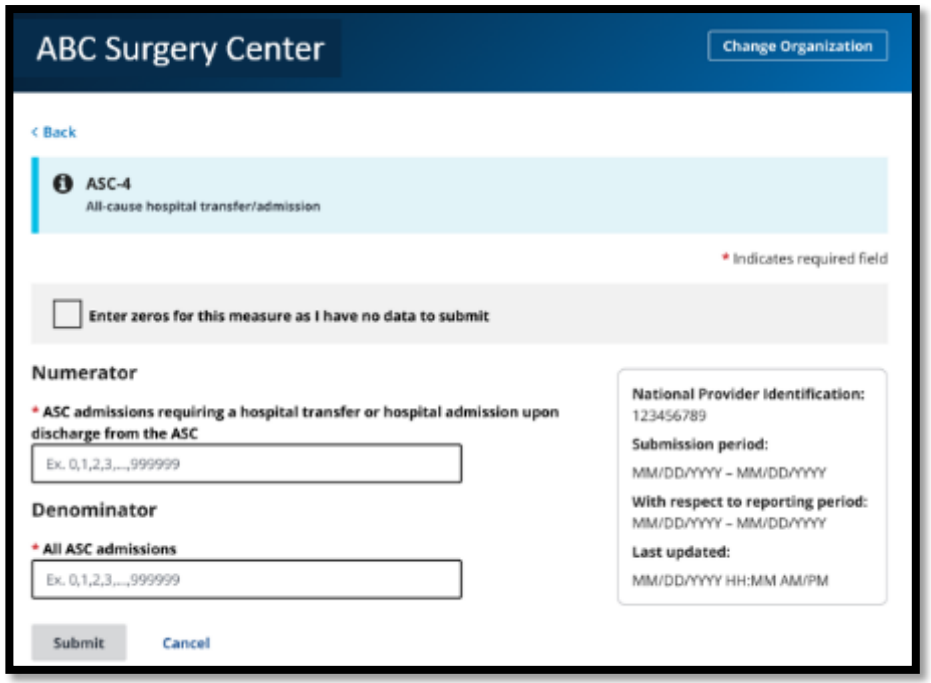
The ASC-2, ASC-3, and ASC-4 measures have the same format.

To submit data, enter the:

1. Numerator
2. Denominator; select **Submit**







Web-Based Measure in NHSN

CY 2025 Payment Determination Year			
Number	**Measure**	**Reporting Period**	**Submission Period**
ASC-20	COVID-19 Vaccination Coverage Among Healthcare Personnel	Q1 2023: Jan 1 – Mar 31, 2023	☑ Q1: August 15, 2023
		Q2 2023: Apr 1 – Jun 30, 2023	Q2: November 15, 2023
		Q3 2023: Jul 1 – Sep 30, 2023	Q3: February 15, 2024
		Q4 2023: Oct 1 – Dec 31, 2023	Q4: May 15, 2024

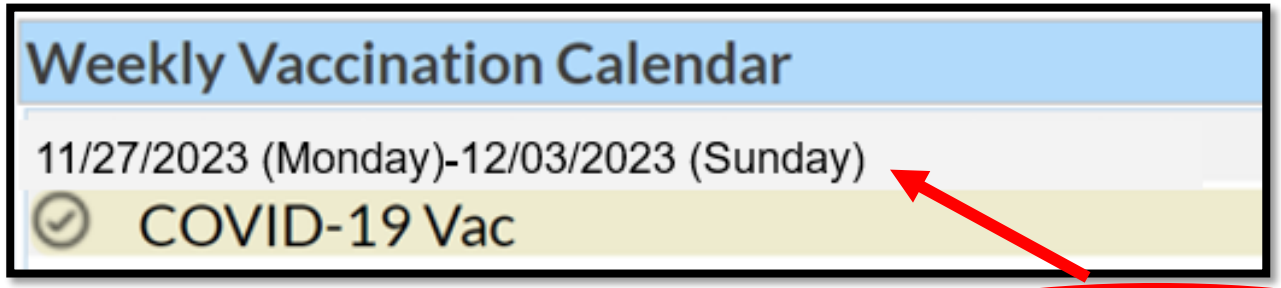
NHSN Reminders

- All data must be entered in **one session.**
- Red asterisks indicate mandatory fields.
- The sum of questions 2 and 3 must equal question 1.
- Be sure to log in **at least** every 60 days to keep your account active.
- It is recommended to designate at least two additional Users.
- The next submission deadline is **November 15, 2023.**

NHSN Reminders

- For accuracy, ensure your one self-selected week each month ends in the month you are intending to report.

Example:



Data entered for this week would be applied to the month of December

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NHSN Resources

- Click here for Archived Events.
- Click here for the COVID-19 Vaccination Modules: Understanding Key Terms and Up to Date Vaccination document.
- Click here for NHSN resources.

Claims-Based Measures

CY 2025 Payment Determination Year		
Number	**Measure**	**Reporting Period**
ASC-12	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Jan 1, 2021 – Dec 31, 2023
ASC-17	Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures	Jan 1, 2022 – Dec 31, 2023
ASC-18	Hospital Visits after Urology Ambulatory Surgical Center Procedures	
ASC-19	Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers	

Claims-based Measures are calculated from paid Medicare Fee-for-Service final action claims; no additional data submission is required from the ASC for these measures.

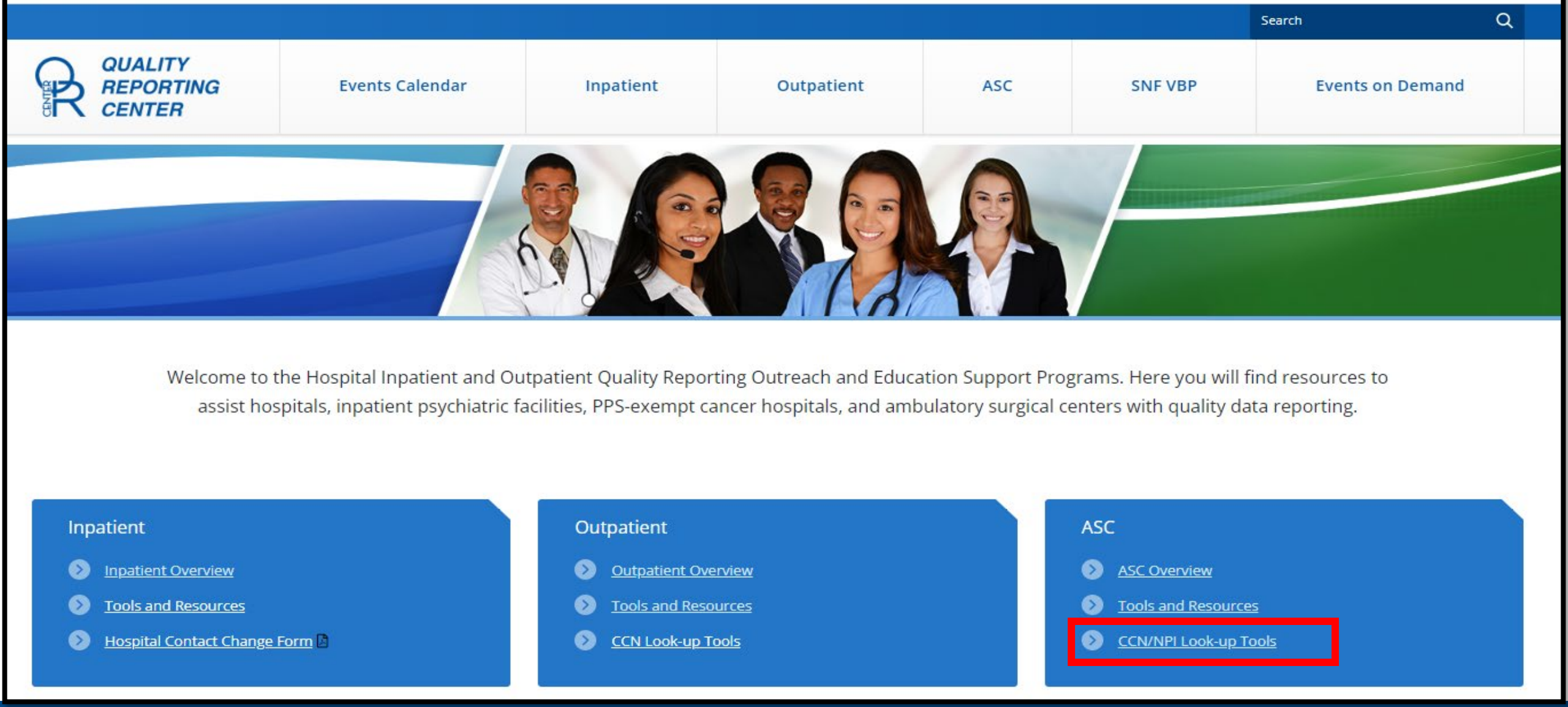
Upcoming*: Survey Measure

CY 2027 Payment Determination Year		
Measure	**Reporting Period**	**Submission Deadline**
Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) **ASC-15a:** About Facilities and Staff **ASC-15b:** Communication About Procedure **ASC-15c:** Preparation for Discharge and Recovery **ASC-15d:** Overall Rating of Facility **ASC-15e:** Recommendation of Facility	Jan 1 – Mar 31, 2025	July 2025
	Apr 1 – Jun 30, 2025	October 2025
	Jul 1 – Sep 30, 2025	January 2026
	Oct 1 – Dec 31, 2025	April 2026

*Voluntary reporting begins with the CY 2024 reporting period. Mandatory reporting begins with the CY 2025 reporting period

Click here for news and information about the OAS CAHPS Survey.

Verifying Your Data Submission



QualityReportingCenter.com

Select *CCN/NPI Look-up Tools*

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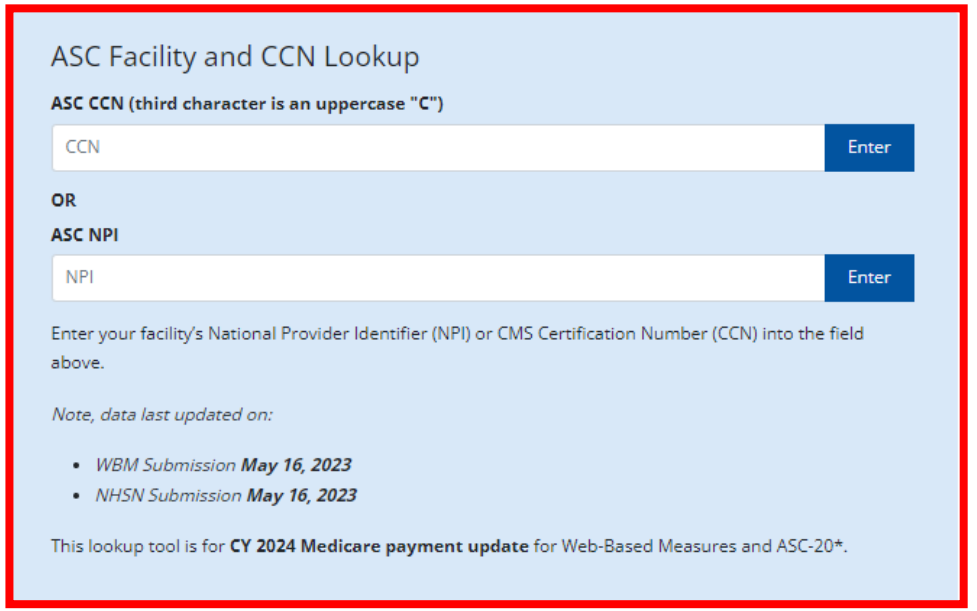
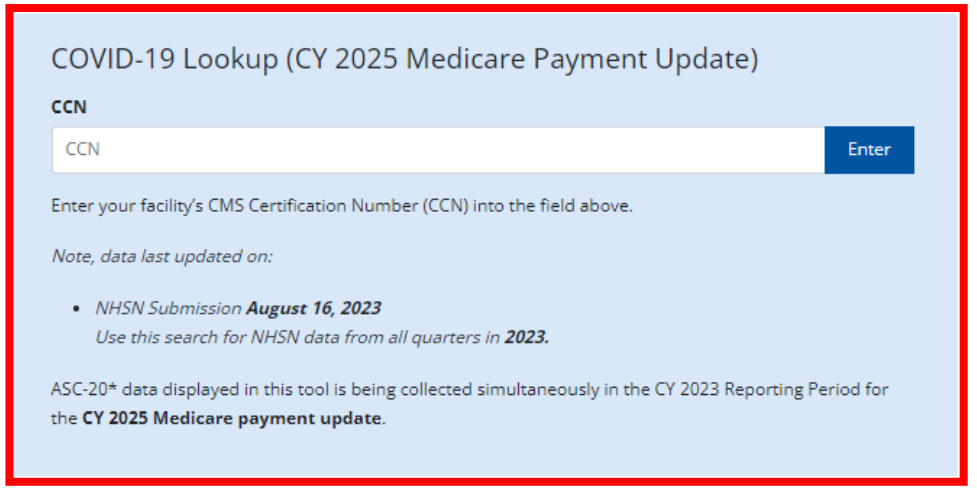
ASC Facility and CCN Lookup

- Web-based measures in HQR
- Web-based measure in NHSN (CY 2022 reporting period)



COVID-19 Lookup (CY 2025 Medicare Payment Update)

- Web-based measure in NHSN (CY 2023 reporting period)



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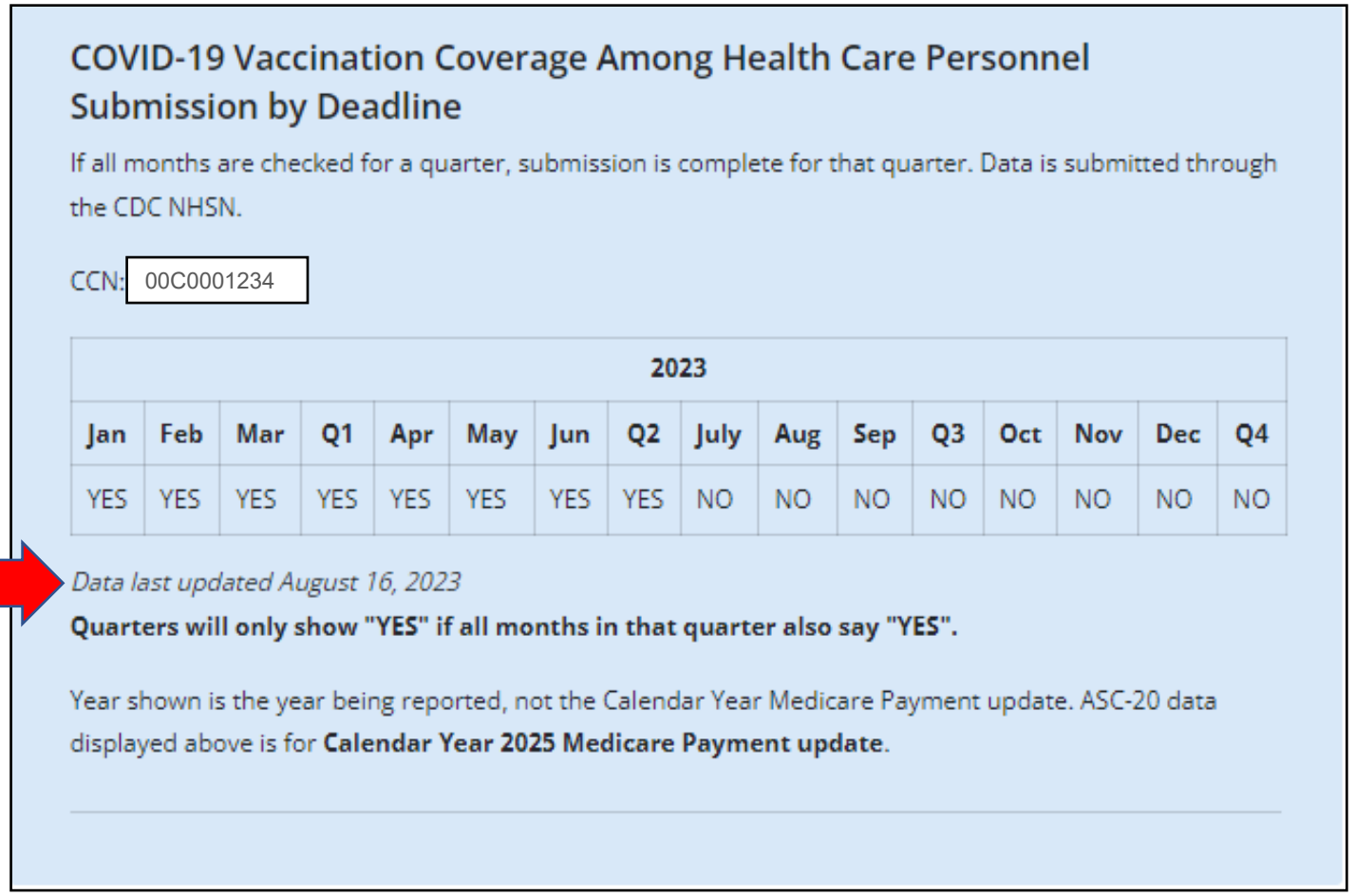
COVID-19 Lookup (CY 2025 Medicare Payment Update)

- Web-based measure in NHSN (CY 2023 reporting period)
  - **YES** indicates a successful data submission.
  - **NO** indicates no data were submitted for that measure.



COVID-19 Vaccination Coverage Among Health Care Personnel
Submission by Deadline

If all months are checked for a quarter, submission is complete for that quarter. Data is submitted through the CDC NHSN.

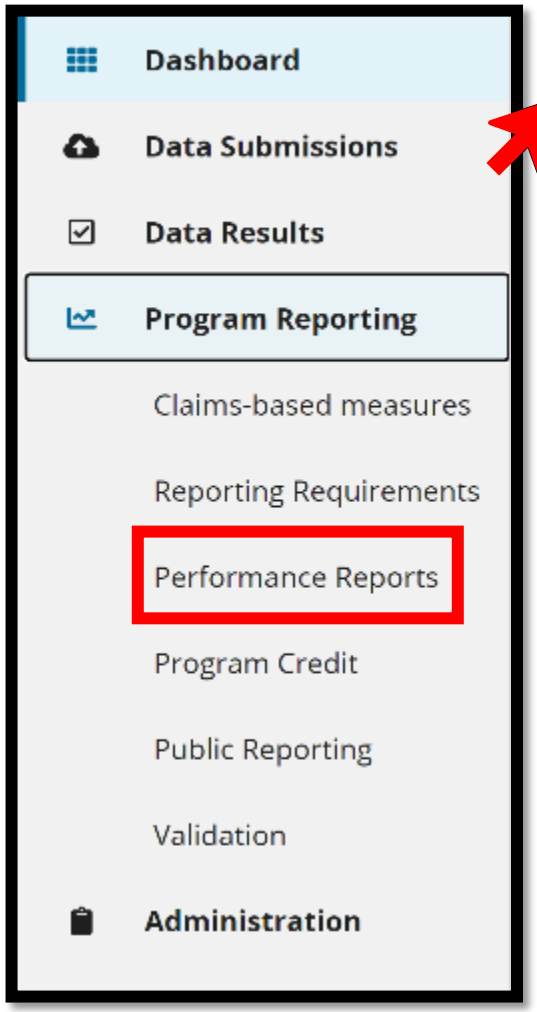
CCN: 00C0001234

2023															
Jan	**Feb**	**Mar**	**Q1**	**Apr**	**May**	**Jun**	**Q2**	**July**	**Aug**	**Sep**	**Q3**	**Oct**	**Nov**	**Dec**	**Q4**
YES	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO	NO	NO	NO	NO

Data last updated August 16, 2023

Quarters will only show "YES" if all months in that quarter also say "YES".

Year shown is the year being reported, not the Calendar Year Medicare Payment update. ASC-20 data displayed above is for **Calendar Year 2025 Medicare Payment update**.



My Tasks page is still available for PRS.

Thank you for your patience as we make changes to HQR. PRS is still on the My Tasks page.

My Tasks

Are you expecting to receive facility-specific or claims-detail reports in Managed File Transfer (MFT)? Users who historically received these reports through their AutoRoute Inbox in Secure File Transfer may need to request permissions in the Hospital Quality Reporting system to continue to receive these reports for their facilities. Refer to the *Important: Request Access to Managed File Transfer (MFT) & Auto-Route Now to Ensure You Receive Your Reports* notification to learn more about requesting permissions to access your reports!

The New HQR is Coming

We are hard at work behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many exciting new features to help you execute your responsibilities faster, and with more confidence.

***New!* Check out the navigation on the left:**

← All features and functions are now available in the navigation

← Tasks are clearly divided - move from one to another with ease

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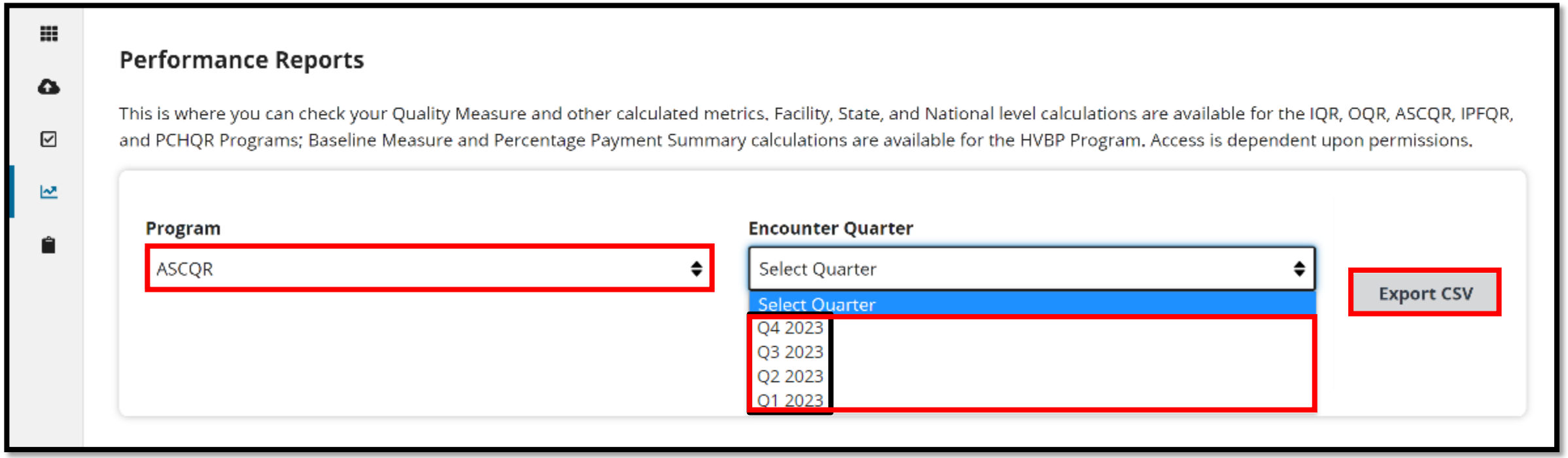

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A	B	C	D	E	F	G	H	I	J	K
TYPE	PROVIDER_ID	STATE_CODE	QUARTER	MEASURE	NUMERATOR	DENOMINATOR	ADHPCT	ADHPCT_CI_LOWER	ADHPCT_C	LAST_NHSN_UPDATE_DATE
PROVIDER_SUMMARY	1234567890	CA	2023Q1	COVID19HCP	21	23	91.2	90.6	91.7	8/16/2023
STATE_SUMMARY		CA	2023Q1	COVID19HCP	24589	26649	92.3	92.2	92.4	8/16/2023
NATIONAL_SUMMARY		NATION	2023Q1	COVID19HCP	273629	307478	89	88.5	89.4	8/16/2023

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Public Reporting

Data Refreshed: Web-Based Measures

Number	Measure	Reporting Period
ASC-9	Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	Jan 1 – Dec 31, 2022
ASC-11	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery **(Voluntary)**	
ASC-13	Normothermia	
ASC-14	Unplanned Anterior Vitrectomy	
ASC-20	COVID-19 Vaccination Coverage Among Healthcare Personnel	Q4 2022

Next Year: Public Reporting Overview

Measures	Refresh Months			
COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP) **January Reporting Period:** Q1 2023 **April Reporting Period:** Q2 2023 **July Reporting Period:** Q3 2023 **October Reporting Period:** Q4 2023	**January**	**April**	**July**	**October**
ASC-20: COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP)	✓	✓	✓	✓
Claims-Based Measures	**January**	**April**	**July**	**October**
ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy (Reporting Period: 1/1/2020 through 12/31/2022)	✓	--	--	--
ASC-17: Hospital Visits after Orthopedic Ambulatory Surgical Center (ASC) Procedures (Reporting Period: 1/1/2021 through 12/31/2022)	✓	--	--	--
ASC-18: Hospital Visits after Urology Ambulatory Surgical Center Procedures (Reporting Period: 1/1/2021 through 12/31/2022)	✓	--	--	--
ASC-19: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers (Reporting Period 1/1/2021 through 12/31/22)	✓	--	--	--
Web-Based Measures **Reporting Period:** January 1 through December 31, 2023	**January**	**April**	**July**	**October**
ASC-1: Patient Burn	--	--	--	✓
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	--	--	--	✓
ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary)	--	--	--	✓
ASC-13: Normothermia	--	--	--	✓
ASC-14: Unplanned Anterior Vitrectomy	--	--	--	✓

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Finding Your Data

Publicly displayed information for ASC measures can be found on the data.cms.gov website.

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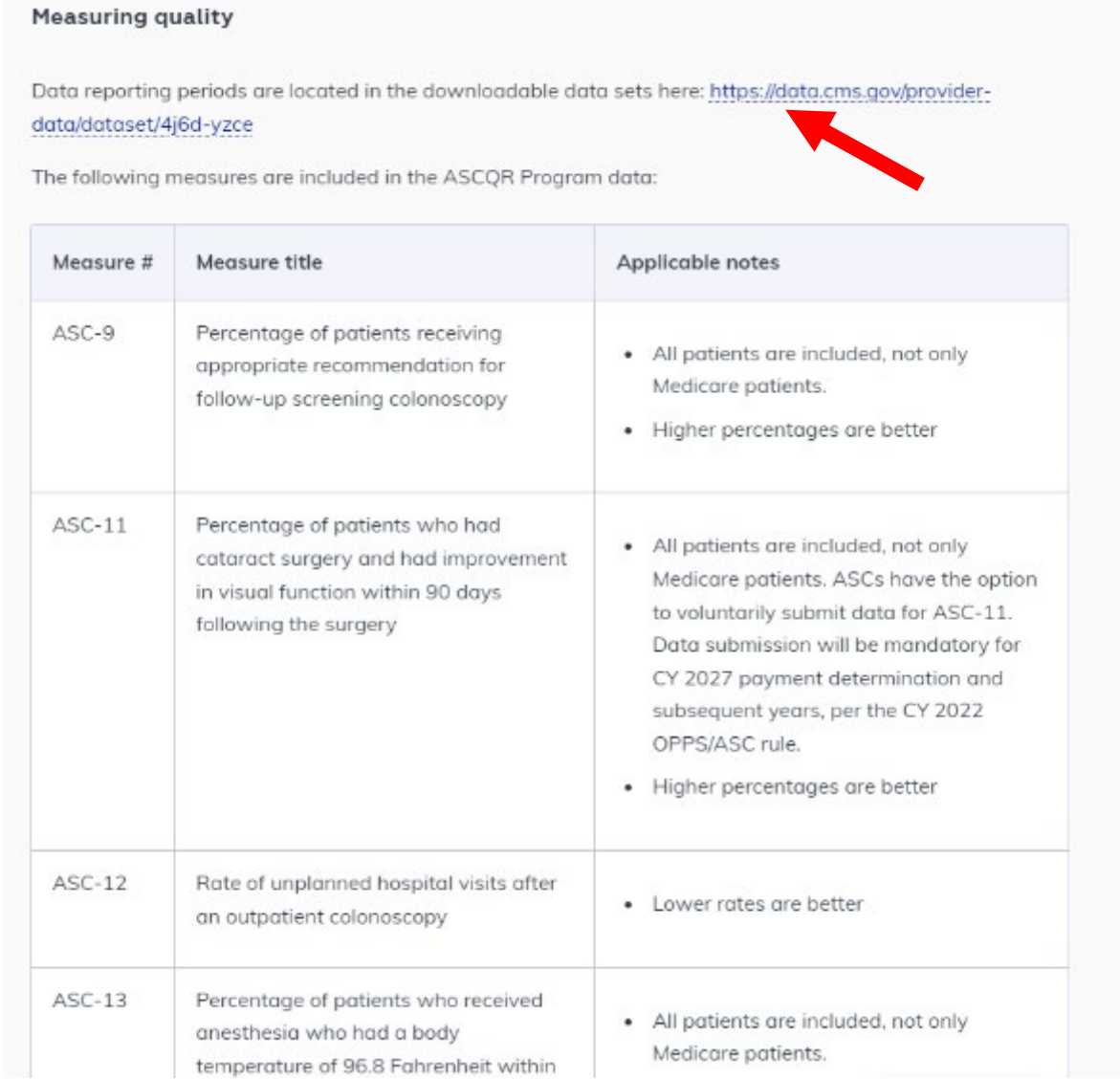
[Hospitals - Ambulatory surgical centers (ASCs) | Provider Data Catalog (cms.gov)]

You will see a description of the measures.

To access the Dataset explorer option, you will select the link under *Measuring quality.*



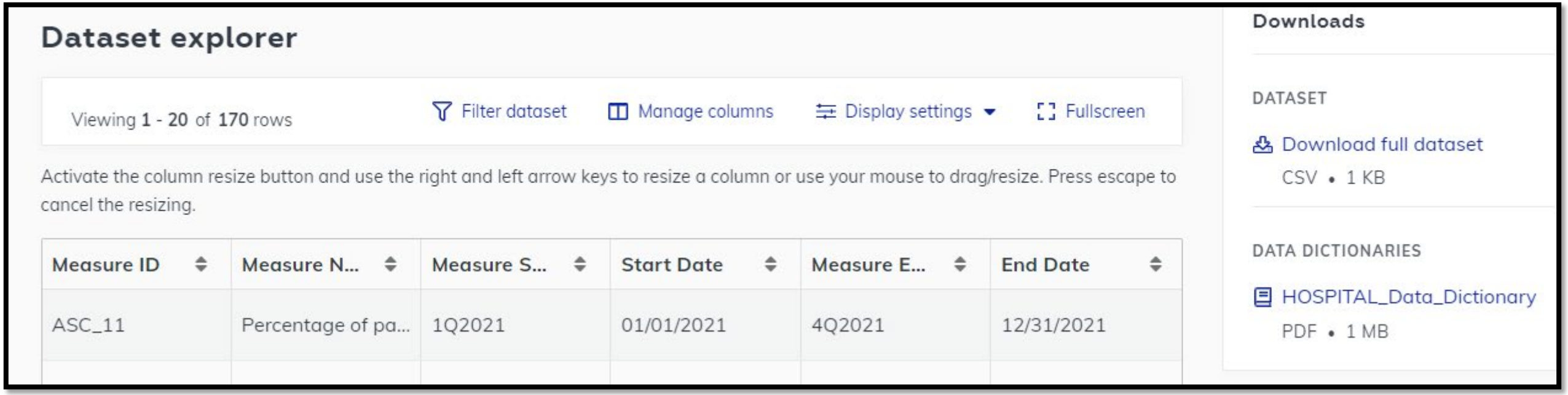
Measuring quality

Data reporting periods are located in the downloadable data sets here: https://data.cms.gov/provider-data/dataset/4j6d-yzce

The following measures are included in the ASCQR Program data:

Measure #	Measure title	Applicable notes
ASC-9	Percentage of patients receiving appropriate recommendation for follow-up screening colonoscopy	• All patients are included, not only Medicare patients. • Higher percentages are better
ASC-11	Percentage of patients who had cataract surgery and had improvement in visual function within 90 days following the surgery	• All patients are included, not only Medicare patients. ASCs have the option to voluntarily submit data for ASC-11. Data submission will be mandatory for CY 2027 payment determination and subsequent years, per the CY 2022 OPPS/ASC rule. • Higher percentages are better
ASC-12	Rate of unplanned hospital visits after an outpatient colonoscopy	• Lower rates are better
ASC-13	Percentage of patients who received anesthesia who had a body temperature of 96.8 Fahrenheit within	• All patients are included, not only Medicare patients.

A View to Your Data



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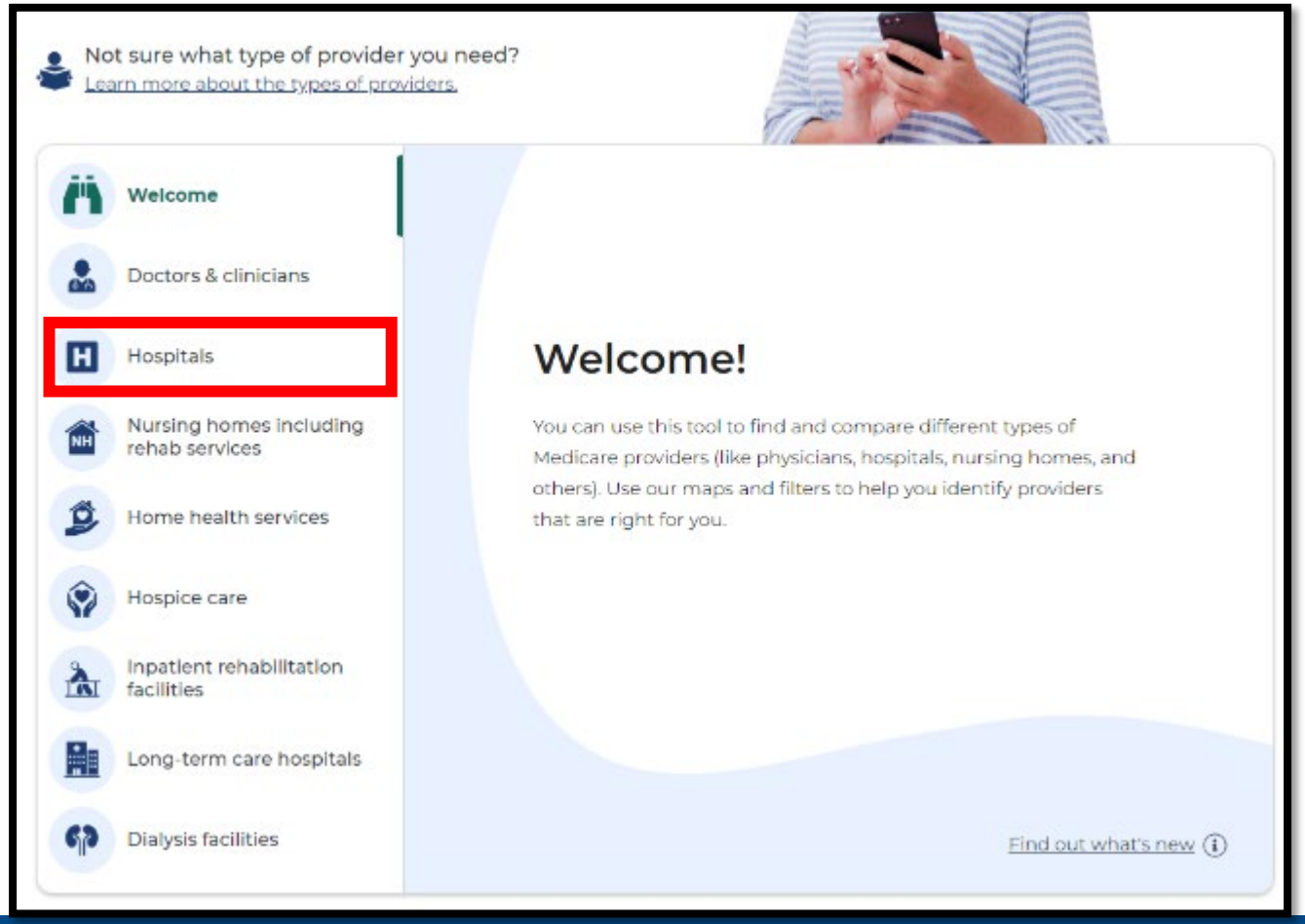
CMS Care Compare Website

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

From the *Care Compare* home page, select **Hospital.**



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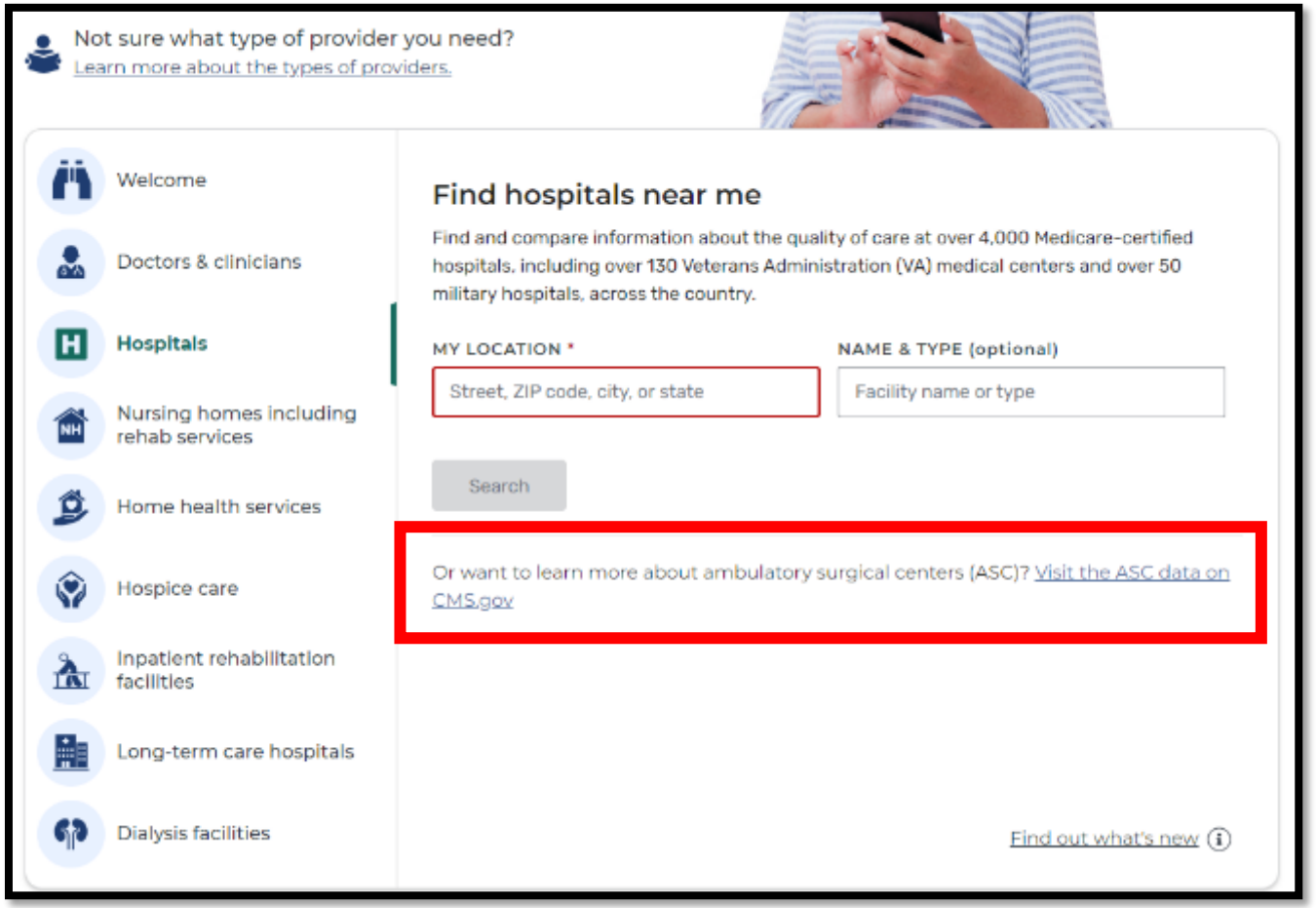
Select the ASC Option

Select **Visit the ASC data on CMS.gov** link.



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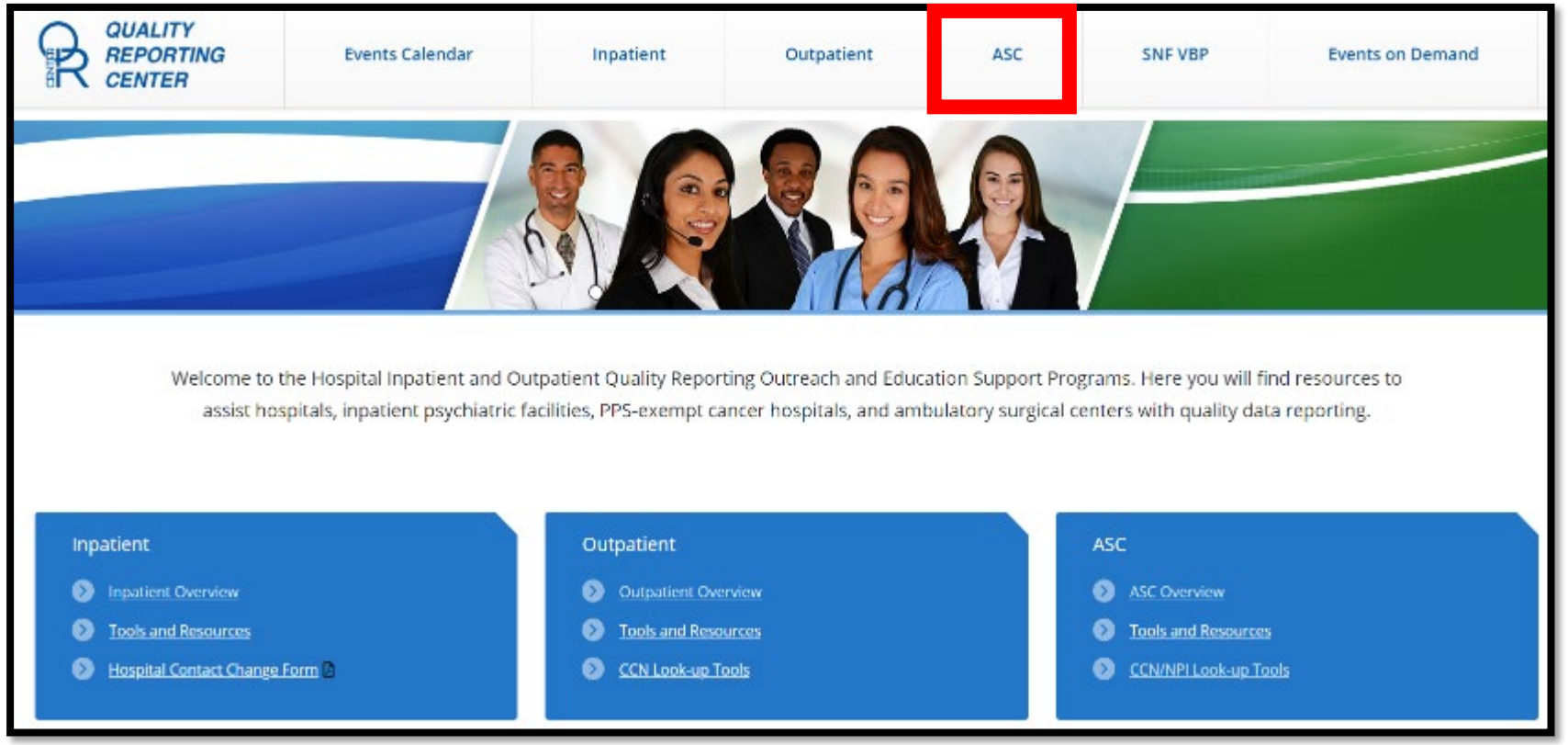
Quality Report Center Home Page

QualityReportingCenter.com

Select the **ASC** option at the top of the page.



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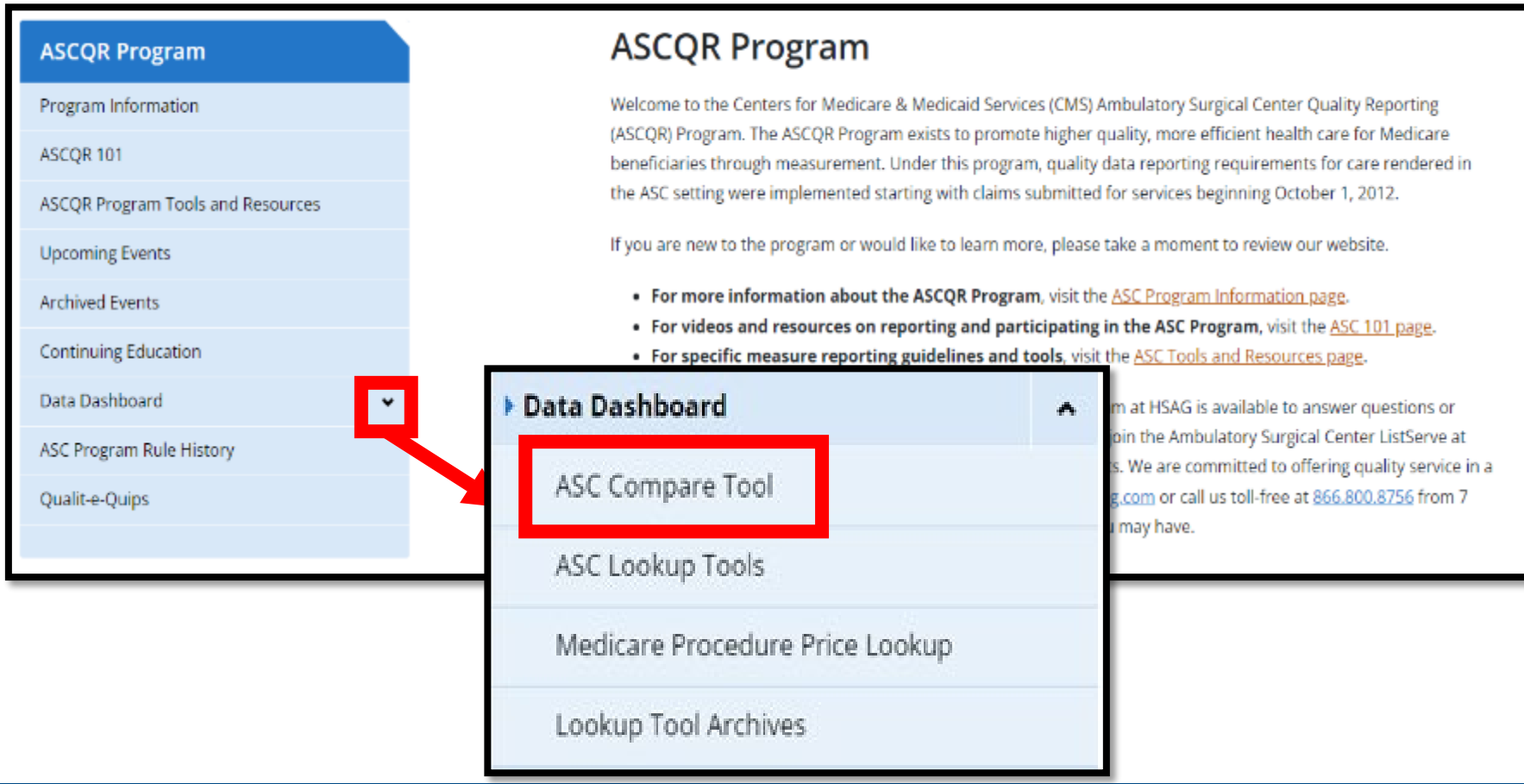
ASC Compare Tool

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



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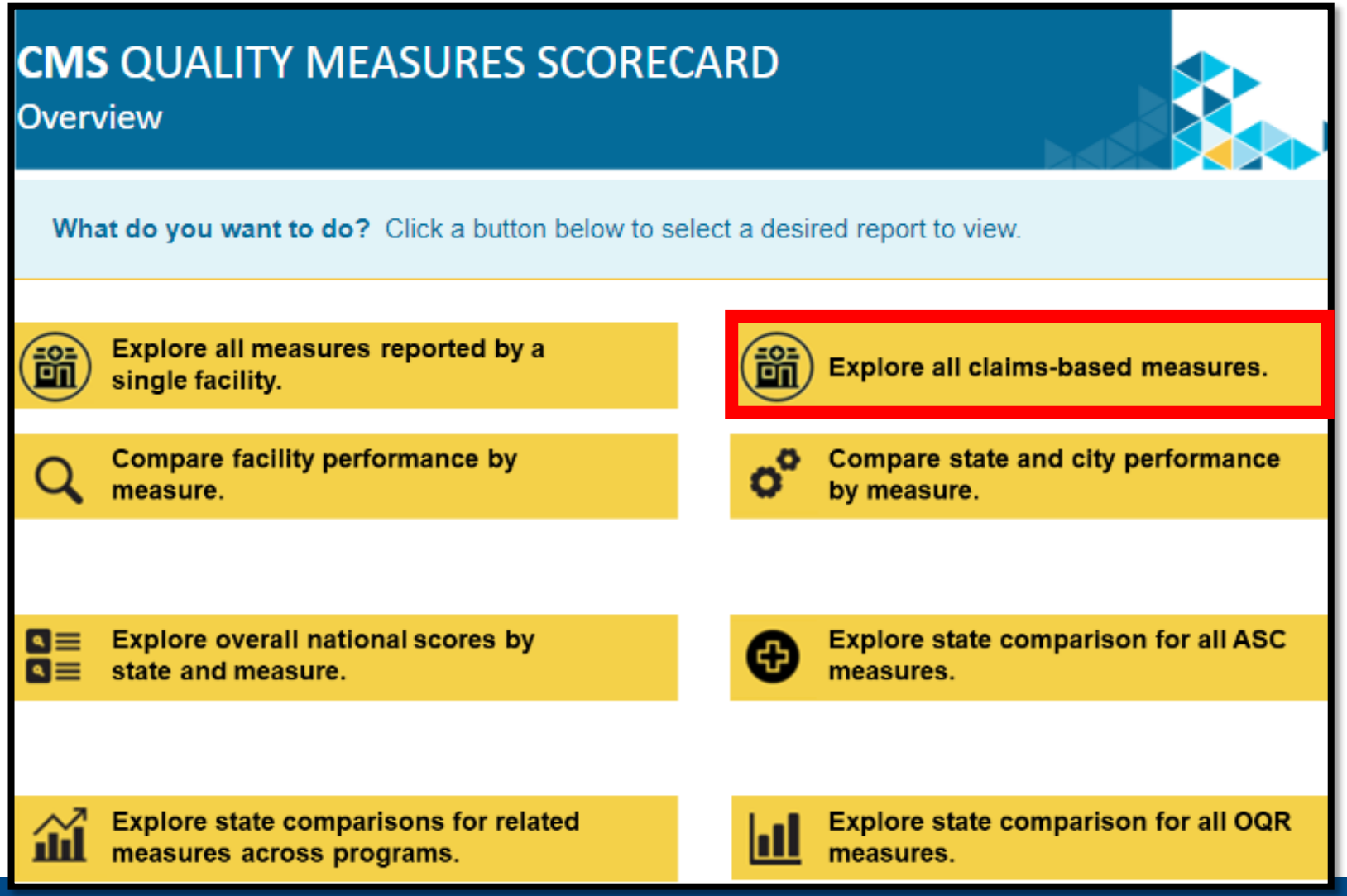
Scorecard

From the Scorecard options, select: **Explore all claim-based measures**.



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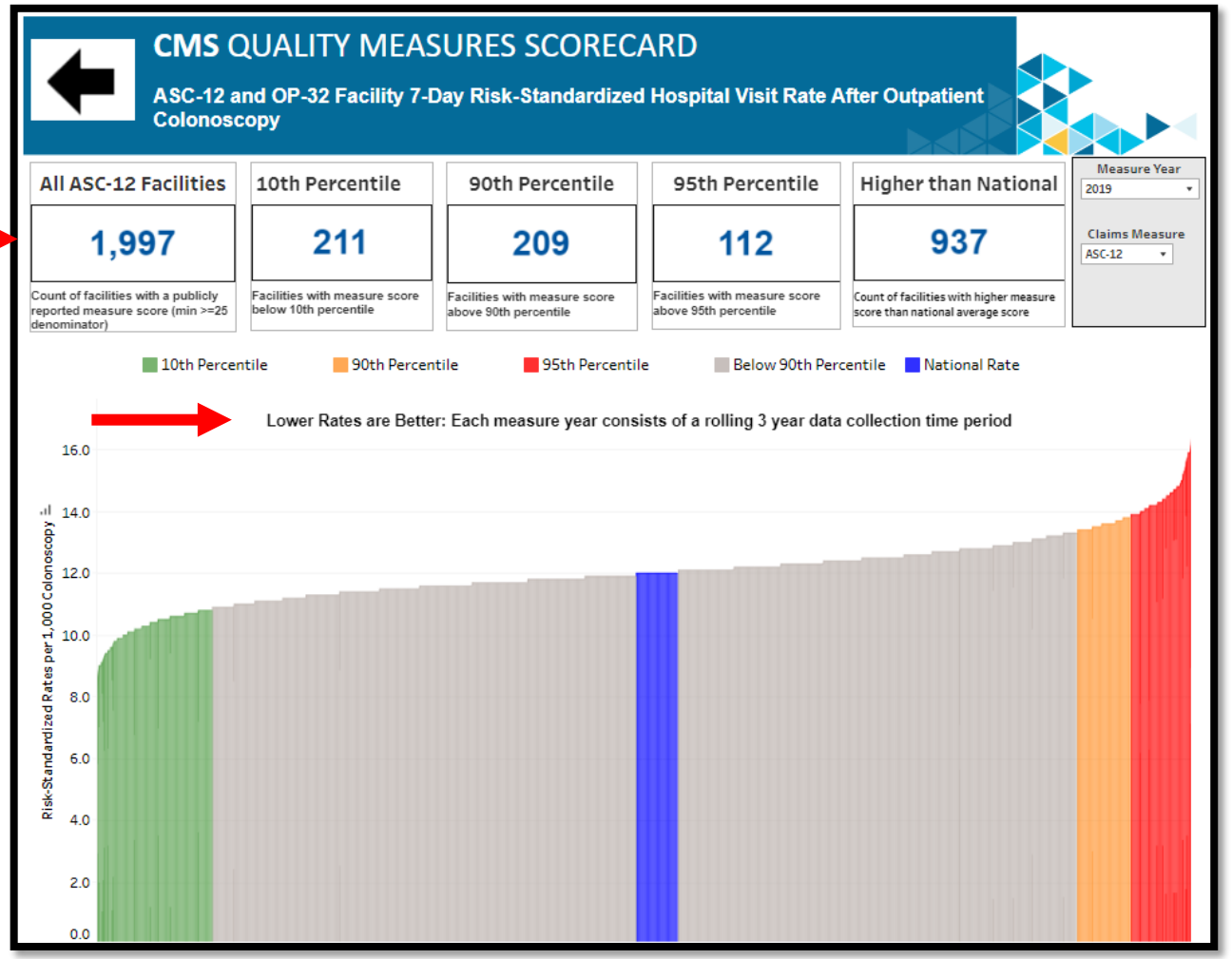
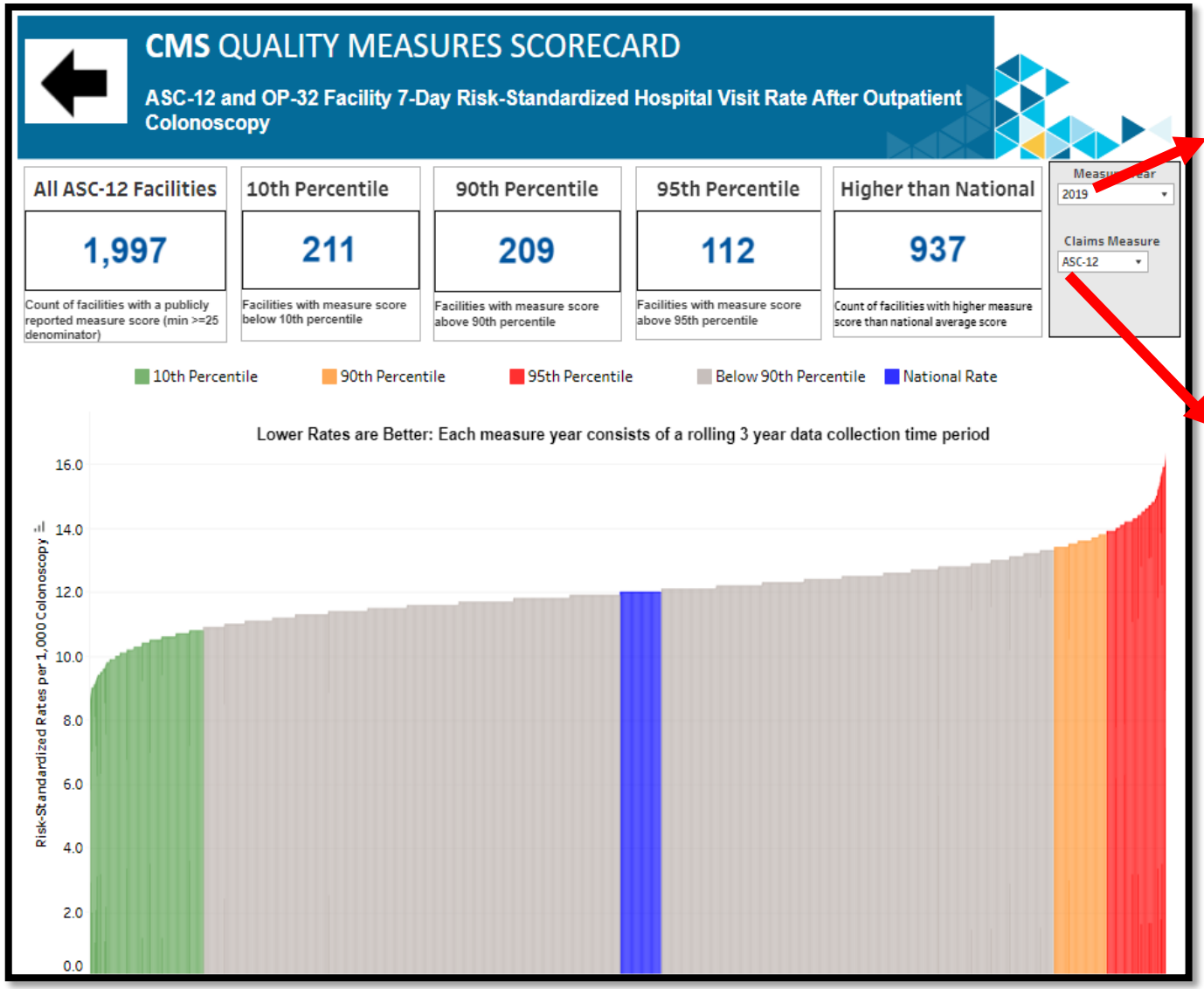
New Feature: Claims-Based Measures

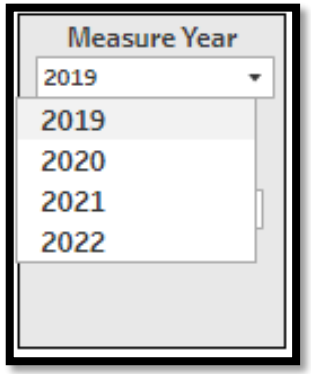
The tool provides national percentiles.

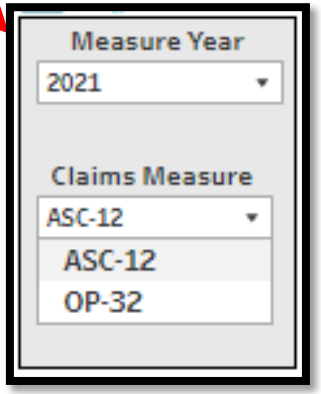


Choose the measure year by clicking on the drop-down arrow under **Measure Year**.

Select the measure by clicking the drop-down arrow under **Claims Measure**.







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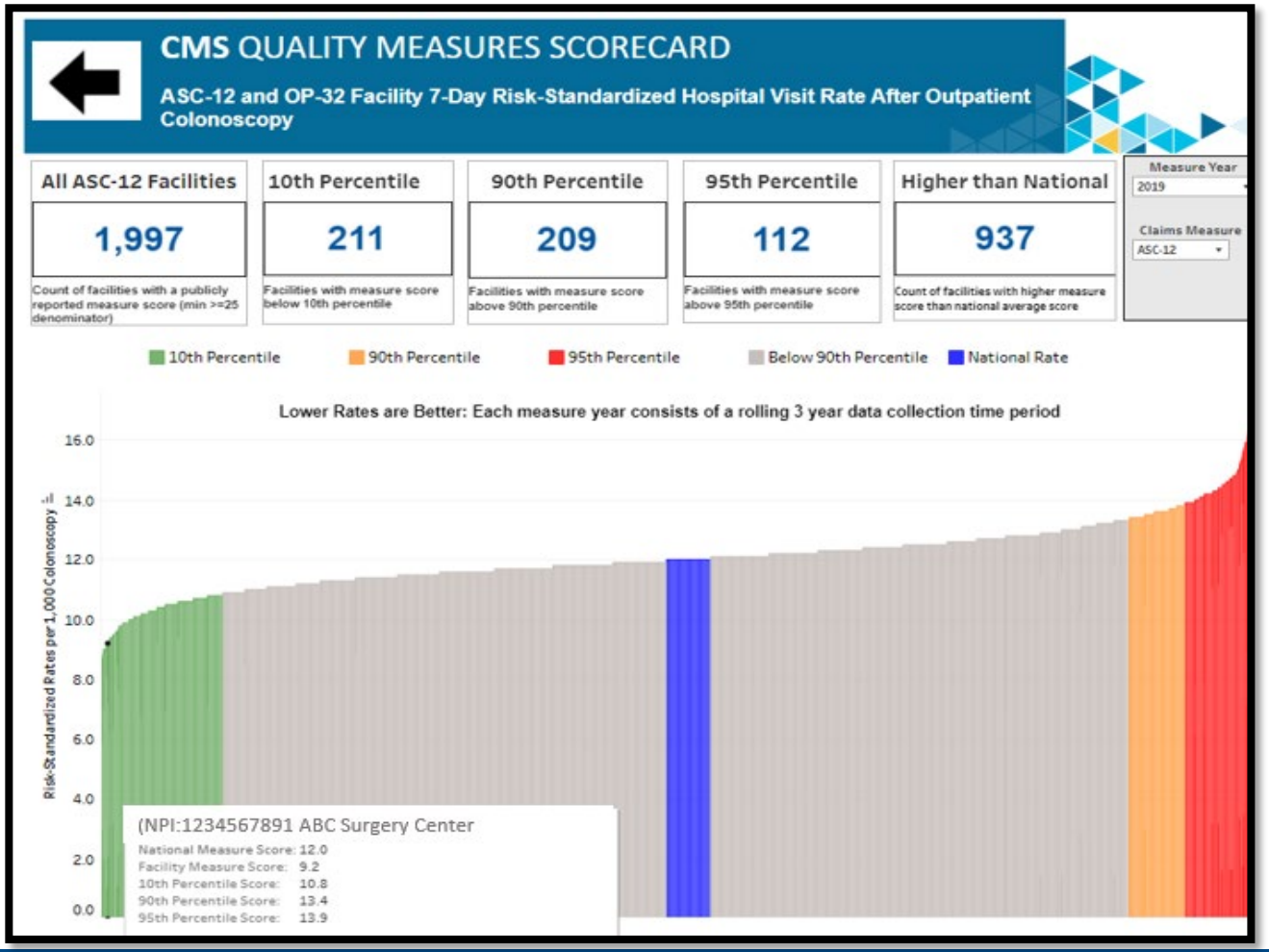
Accessing Individual ASCs

To access an individual ASC's data, move your cursor over the area you wish to explore.



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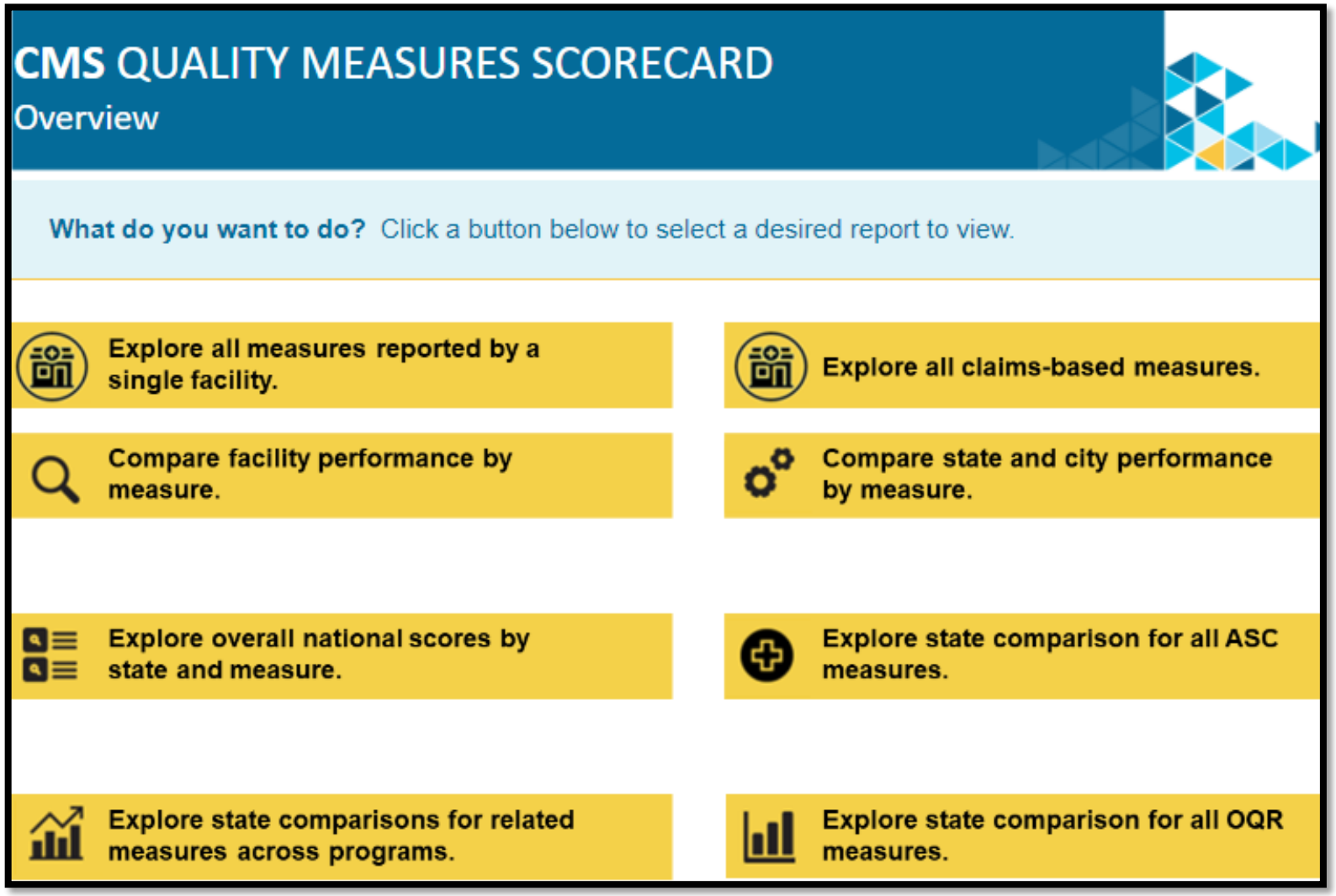
Other Options

Additional data can be accessed by choosing one of the categories on the Scorecard.



Program Resources

Quality Reporting Center Home Page

Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist hospitals, inpatient psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting.

Inpatient

- Inpatient Overview
- Tools and Resources
- Hospital Contact Change Form

Outpatient

- Outpatient Overview
- Tools and Resources
- CCN Look-up Tools

ASC

- ASC Overview
- Tools and Resources
- CCN/NPI Look-up Tools

Program Specific Resources

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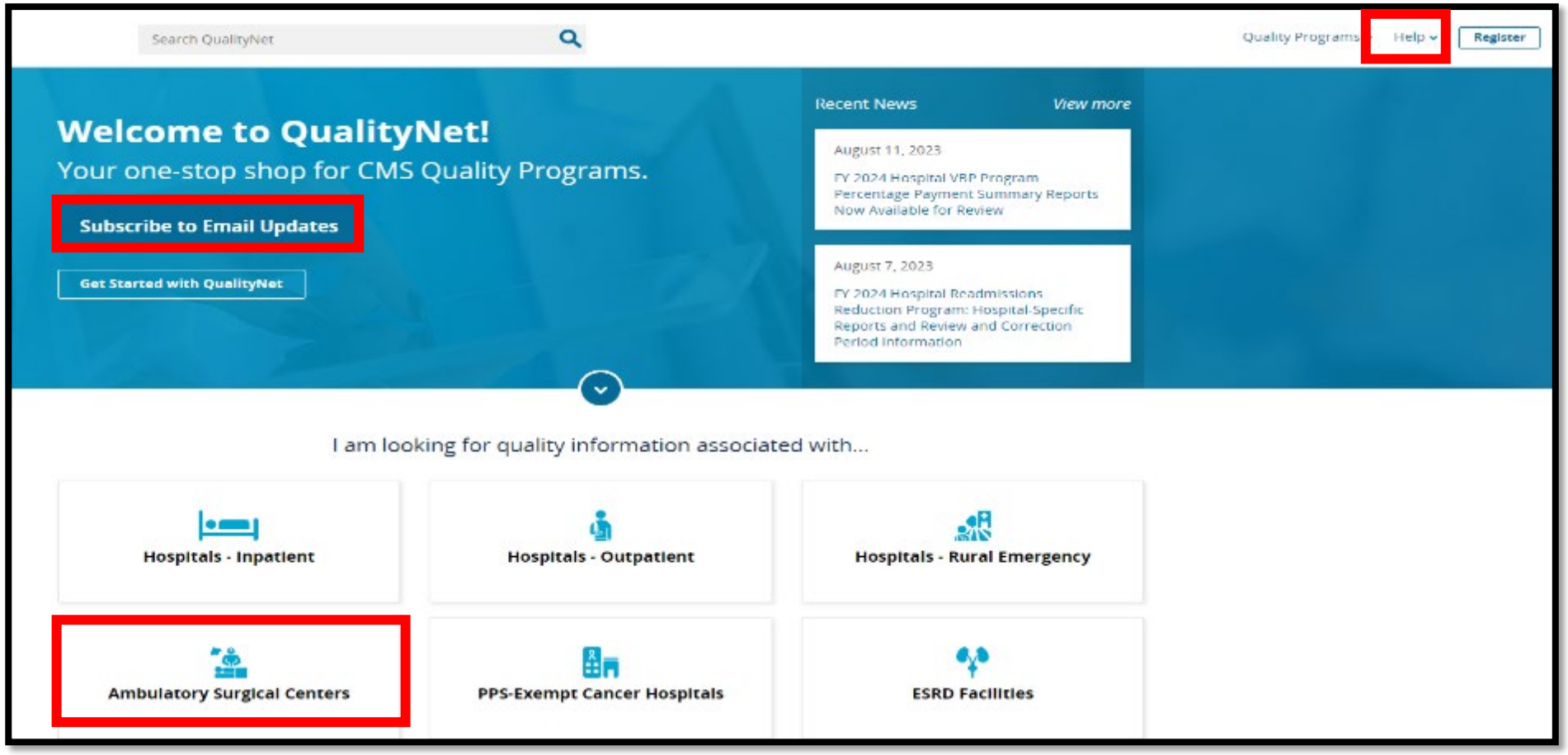
QualityNet Home Page



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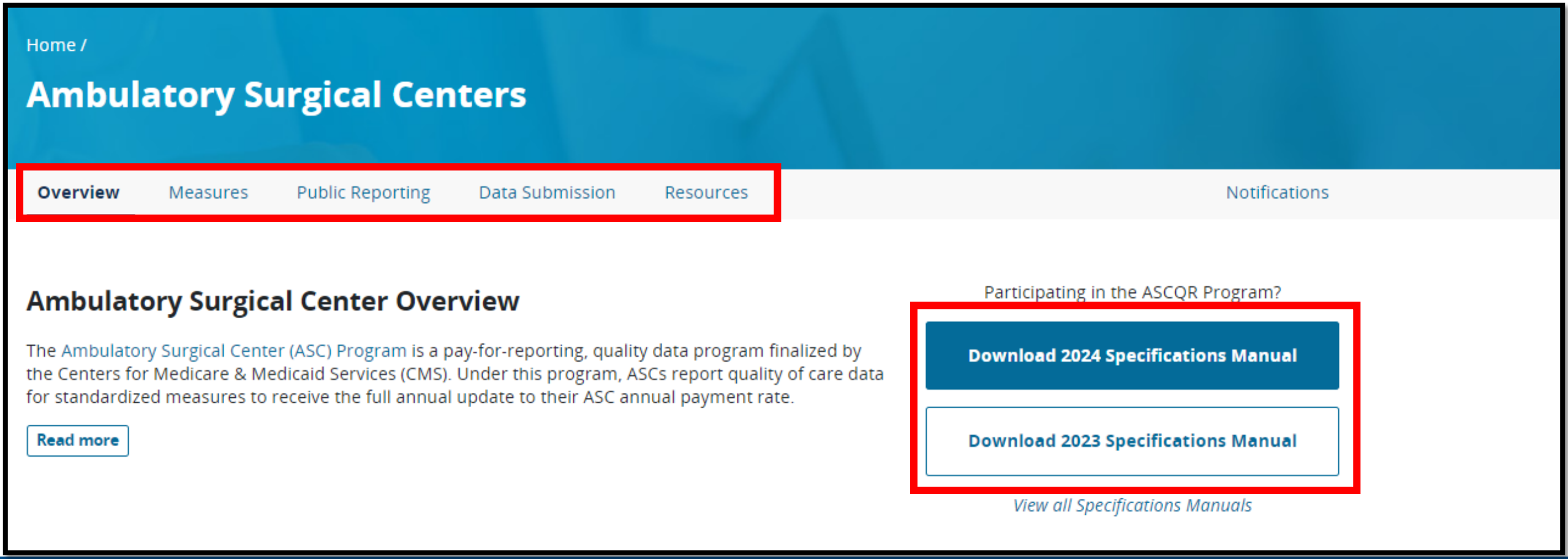
Overview Page



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Main Take-Aways

- Have active HQR and NHSN system accounts to submit data
  - Assign more than one person as an SO for HQR; and
  - Add at least two additional users besides your FA for NHSN
- Submit data for all required measures by the designated submission deadlines.
- Keep your accounts active for HQR and NHSN systems.

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Addressing Your Questions

Keep Your Facility Updated

- Stay Informed of program news by:
  - Signing up for communications by subscribing to email updates on the QualityNet website.
  - Accessing the **Staying Informed** page of the QualityReportingCenter website.
- Changes in facility staff can be updated by accessing the **ASC Contact Change Form** on the QualityReportingCenter website.

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Program Resources

- **ASCQR Program Support Team**
  - 866.800.8756
- **Center for Clinical Standards and Quality (CCSQ) Service Center**
  - 866.288.8912
  - qnetsupport@cms.hhs.gov
- **Secure Access Management Services (SAMS) Help Desk**
  - 877.681.2901
- **National Healthcare Safety Network (NHSN)**
  - nhsn@cdc.gov

Acronyms

ASC	ambulatory surgical center	**NHSN**	National Healthcare Safety Network
ASCQR	Ambulatory Surgical Center Quality Reporting	**NPI**	National Provider Identifier
CMS	Centers for Medicare & Medicaid Services	**OAS CAHPS**	Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems
CCN	CMS Certification Number	**NHSN**	National Healthcare Safety Network
CCSQ	Center for Clinical Standards and Quality	**OQR**	Outpatient Quality Reporting
CY	calendar year	**PY**	payment year
FA	Facility Administrator	**SAMS**	Secure Access Management Services
HCQIS	Healthcare Quality Information System	**SO**	Security Official
HQR	Hospital Quality Reporting		

Continuing Education Approval

This program is 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 CE approval for any other state, license, or certification, check with your licensing or certification board.

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