

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

Agenda

Content	Speaker
<ul style="list-style-type: none">• Introduction• Policy Goals and Drivers• Code of Federal Regulations	Karen VanBourgondien, RN, BSN Outpatient Quality Program Systems and Stakeholder Support Team
<ul style="list-style-type: none">• Program Requirements• Verifying Your Data Submission• Public Reporting• Program Resources	Danielle Leffler, MS Outpatient Quality Program Systems and Stakeholder Support Team
<ul style="list-style-type: none">• Question and Answer Session	Danielle Leffler and Karen VanBourgondien

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.

Policy Goals & Drivers

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



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.

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

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](#).

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.

IMPORTANT

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

Ambulatory Surgical Center Quality Reporting (ASCQR) Program Payment Year: 2026

National Provider Identification: 1234567890
Submission Period: 01/01/2024-05/15/24
With Respect to Reporting Period: 01/01/2023- 12/31/23
Last Updated: 03/01/2023 10:41 am

Current Submission Period: Open [Export PDF](#)

- ASC-9** Submitted [Edit Measure](#)
Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients
Updated Jan 13, 2023 at 10:36 AM
Score for this measure: **94%** (850 Numerator / 900 Denominator)
Higher score is better
- ASC-11 (voluntary)** Submitted [Edit Measure](#)
Cataracts - Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery
Updated Jan 13, 2023 at 10:39 AM
Score for this measure: **95%** (950 Numerator / 1000 Denominator)
Higher score is better
- ASC-13** Submitted [Edit Measure](#)
Normothermia Outcome
Updated Jan 13, 2023 at 10:40 AM
Score for this measure: **88%** (350 Numerator / 400 Denominator)
Higher score is better
- ASC-14** Submitted [Edit Measure](#)
Unplanned Anterior Vitrectomy
Updated Jan 13, 2023 at 10:41 AM
Score for this measure: **0%** (1 Numerator / 1000 Denominator)
Lower score is better

IMPORTANT

HQR Updates: New View

Ambulatory Surgical Center Quality Reporting (ASCQR) Program

Payment Year

2024

National Provider Identification: 123456789

Submission Period: 01/01/2024-/05/15/2024

With Respect to Reporting Period: 01/01/2023- 12/31/2023

Last Updated: 11/01/2023 8:09 am

Current Submission Period: **Closed**

Export PDF

ASC-9 ✔ Submitted

Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Updated Feb 9, 2023 at 11:06 AM

0 Numerator | Rate
0 Denominator | n/a

ASC-11 (voluntary) ✔ Submitted

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

Updated Feb 9, 2023 at 11:19 AM

434 Numerator | Rate
434 Denominator | 100%

ASC-13 ✔ Submitted

Normothermia Outcome

Updated Feb 9, 2023 at 12:15 PM

Higher rates indicate better performance

Rate
100%

ASC-14 ✔ Submitted

Unplanned Anterior Vitrectomy

Updated Feb 10, 2023 at 8:09 AM

0 Numerator | Rate
434 Denominator | 0%

Sneak Peek

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

To submit data, enter the:

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

The screenshot shows a web interface for ABC Surgery Center. At the top right is a "Change Organization" button. Below the header is a navigation link "< Back". The main content area features a light blue header for "ASC-1 Patient burn" with an information icon. A red asterisk indicates a required field. Below this is a checkbox labeled "Enter zeros for this measure as I have no data to submit". The form is divided into two sections: "Numerator" and "Denominator". The Numerator section is labeled "* ASC admissions experiencing a burn prior to discharge" and has a text input field with the example "Ex. 0,1,2,3,...,999999". The Denominator section is labeled "* All ASC admissions" and also has a text input field with the example "Ex. 0,1,2,3,...,999999". At the bottom are "Submit" and "Cancel" buttons. On the right side, there is a box containing provider information: "National Provider Identification: 1234567891", "Submission period: MM/DD/YYYY - MM/DD/YYYY", "With respect to reporting period: MM/DD/YYYY - MM/DD/YYYY", and "Last updated: MM/DD/YYYY HH:MM AM/PM".

[Click Here](#) for detailed measure information in the ASCQR Program Specifications Manual.

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

To submit data, enter the:

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

ABC Surgery Center Change Organization

< Back

ASC-2
Patient fall

* Indicates required field

Enter zeros for this measure as I have no data to submit

Numerator
* ASC admissions experiencing a fall within the confines of the ASC
Ex. 0,1,2,3,...999999

Denominator
* All ASC admissions
Ex. 0,1,2,3,...999999

Submit **Cancel**

National provider identification:
123456789
Submission period:
MM/DD/YYYY - MM/DD/YYYY
With respect to reporting period:
MM/DD/YYYY - MM/DD/YYYY
Last updated:
MM/DD/YYYY HH:MM AM/PM

ABC Surgery Center Change Organization

< Back

ASC-3
Wrong site, wrong side, wrong patient, wrong procedure, wrong implant

* Indicates required field

Enter zeros for this measure as I have no data to submit

Numerator
* All ASC admissions experiencing a wrong site, wrong side, wrong patient, wrong procedure, or wrong implant
Ex. 0,1,2,3,...999999

Denominator
* All ASC admissions
Ex. 0,1,2,3,...999999

Submit **Cancel**

National Provider Identification:
123456789
Submission period:
MM/DD/YYYY - MM/DD/YYYY
With respect to reporting period:
MM/DD/YYYY - MM/DD/YYYY
Last updated:
MM/DD/YYYY HH:MM AM/PM

ABC Surgery Center Change Organization

< Back

ASC-4
All-cause hospital transfer/admission

* Indicates required field

Enter zeros for this measure as I have no data to submit

Numerator
* ASC admissions requiring a hospital transfer or hospital admission upon discharge from the ASC
Ex. 0,1,2,3,...999999

Denominator
* All ASC admissions
Ex. 0,1,2,3,...999999

Submit **Cancel**

National Provider Identification:
123456789
Submission period:
MM/DD/YYYY - MM/DD/YYYY
With respect to reporting period:
MM/DD/YYYY - MM/DD/YYYY
Last updated:
MM/DD/YYYY HH:MM AM/PM

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	<input checked="" type="checkbox"/> 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

IMPORTANT

NHSN Reminders

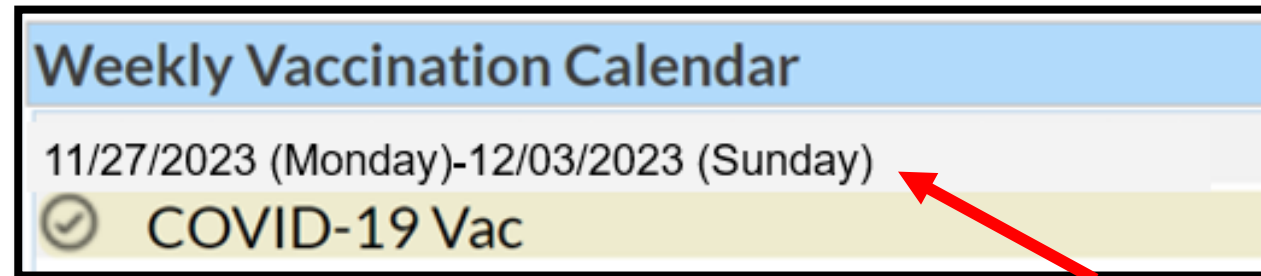
- All data must be entered in **one session**.
- Red asterisks indicate mandatory fields.
- The sum of questions 2 and 3 must equal question 1.
- Be sure to log in **at least** every 60 days to keep your account active.
- It is recommended to designate at least two additional Users.
- The next submission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

IMPORTANT

NHSN Reminders

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

Example:



Weekly Vaccination Calendar

11/27/2023 (Monday)-12/03/2023 (Sunday)

☑ COVID-19 Vac

A red arrow points from the date range to a red oval containing explanatory text.

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

IMPORTANT

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



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](#)

ASC Facility and CCN Lookup

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

ASC Facility and CCN Lookup

ASC CCN (third character is an uppercase "C")

CCN Enter

OR

ASC NPI

NPI Enter

Enter your facility's National Provider Identifier (NPI) or CMS Certification Number (CCN) into the field above.

Note, data last updated on:

- WBM Submission **May 16, 2023**
- NHSN Submission **May 16, 2023**

This lookup tool is for **CY 2024 Medicare payment update** for Web-Based Measures and ASC-20*.

COVID-19 Lookup (CY 2025 Medicare Payment Update)

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

COVID-19 Lookup (CY 2025 Medicare Payment Update)

CCN

CCN Enter

Enter your facility's CMS Certification Number (CCN) into the field above.

Note, data last updated on:

- NHSN Submission **August 16, 2023**

Use this search for NHSN data from all quarters in 2023.

ASC-20* data displayed in this tool is being collected simultaneously in the CY 2023 Reporting Period for the **CY 2025 Medicare payment update**.

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:

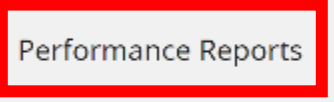
2023															
Jan	Feb	Mar	Q1	Apr	May	Jun	Q2	July	Aug	Sep	Q3	Oct	Nov	Dec	Q4
YES	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO	NO	NO	NO	NO

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**.

-  **Dashboard**
-  **Data Submissions**
-  **Data Results**
-  **Program Reporting**
- Claims-based measures
- Reporting Requirements
- Performance Reports**
- Program Credit
- Public Reporting
- Validation
-  **Administration**



i 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](#)


i 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



Performance Reports

This is where you can check your Quality Measure and other calculated metrics. Facility, State, and National level calculations are available for the IQR, OQR, ASCQR, IPFQR, and PCHQR Programs; Baseline Measure and Percentage Payment Summary calculations are available for the HVBP Program. Access is dependent upon permissions.

Program

ASCQR

Encounter Quarter

Select Quarter

Select Quarter

Q4 2023

Q3 2023

Q2 2023

Q1 2023

Export CSV

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_CI_UPPER	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

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	--	--	--	✓

Finding Your Data

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

[Hospitals - Ambulatory surgical centers \(ASCs\) | Provider Data Catalog \(cms.gov\)](https://www.cms.gov/provider-data/dataset/4j6d-yzce)

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	<ul style="list-style-type: none">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	<ul style="list-style-type: none">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 OP/ASC rule.Higher percentages are better
ASC-12	Rate of unplanned hospital visits after an outpatient colonoscopy	<ul style="list-style-type: none">Lower rates are better
ASC-13	Percentage of patients who received anesthesia who had a body temperature of 96.8 Fahrenheit within	<ul style="list-style-type: none">All patients are included, not only Medicare patients.

A View to Your Data

Dataset explorer

Viewing 1 - 20 of 170 rows

 Filter dataset

 Manage columns

 Display settings ▼

 Fullscreen

Activate the column resize button and use the right and left arrow keys to resize a column or use your mouse to drag/resize. Press escape to cancel the resizing.

Measure ID	Measure N...	Measure S...	Start Date	Measure E...	End Date
ASC_11	Percentage of pa...	1Q2021	01/01/2021	4Q2021	12/31/2021

Downloads

DATASET

 Download full dataset

CSV • 1 KB

DATA DICTIONARIES

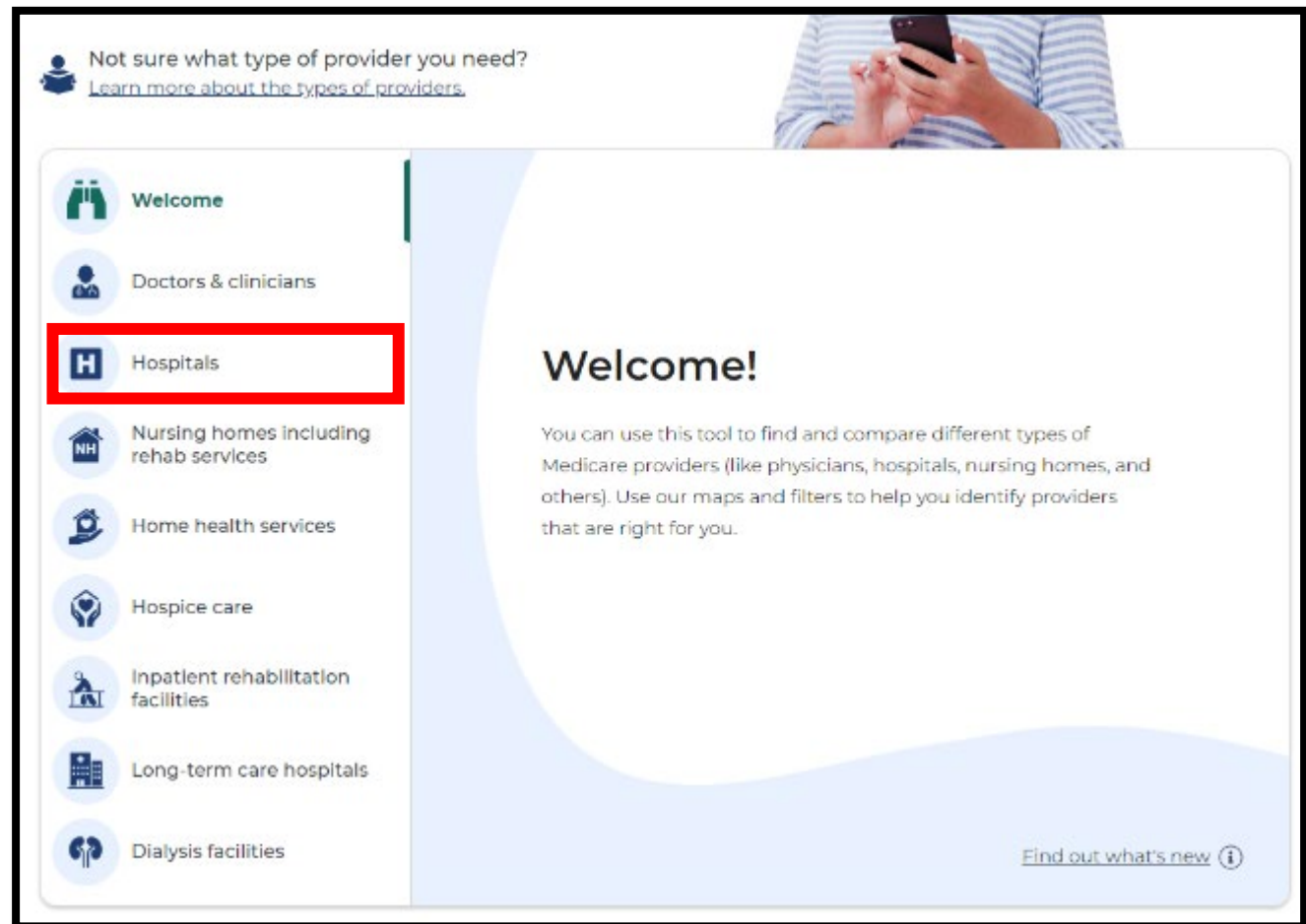
 HOSPITAL_Data_Dictionary

PDF • 1 MB

CMS Care Compare Website

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

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



Select the ASC Option

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

Not sure what type of provider you need?
[Learn more about the types of providers.](#)

Welcome

Doctors & clinicians

Hospitals

Nursing homes including rehab services

Home health services

Hospice care

Inpatient rehabilitation facilities

Long-term care hospitals

Dialysis facilities

Find hospitals near me

Find and compare information about the quality of care at over 4,000 Medicare-certified hospitals, including over 130 Veterans Administration (VA) medical centers and over 50 military hospitals, across the country.

MY LOCATION *

NAME & TYPE (optional)

Search

Or want to learn more about ambulatory surgical centers (ASC)? [Visit the ASC data on CMS.gov](#)

[Find out what's new](#) ⓘ

Quality Report Center Home Page

QualityReportingCenter.com

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

QUALITY REPORTING CENTER

Events Calendar Inpatient Outpatient **ASC** SNF VBP Events on Demand

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](#)

ASC Compare Tool

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

The screenshot shows the ASCQR Program website. On the left is a navigation menu with the following items: ASCQR Program, Program Information, ASCQR 101, ASCQR Program Tools and Resources, Upcoming Events, Archived Events, Continuing Education, Data Dashboard, ASC Program Rule History, and Qualit-e-Quips. A red box highlights the 'Data Dashboard' item, and a red arrow points to a drop-down menu that is open. This menu contains the following items: Data Dashboard, ASC Compare Tool (highlighted with a red box), ASC Lookup Tools, Medicare Procedure Price Lookup, and Lookup Tool Archives. The main content area on the right is titled 'ASCQR Program' and contains a welcome message and a list of links for more information, videos, and reporting guidelines.

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](#).

Data Dashboard









- ASC Compare Tool
- ASC Lookup Tools
- Medicare Procedure Price Lookup
- Lookup Tool Archives

Scorecard

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

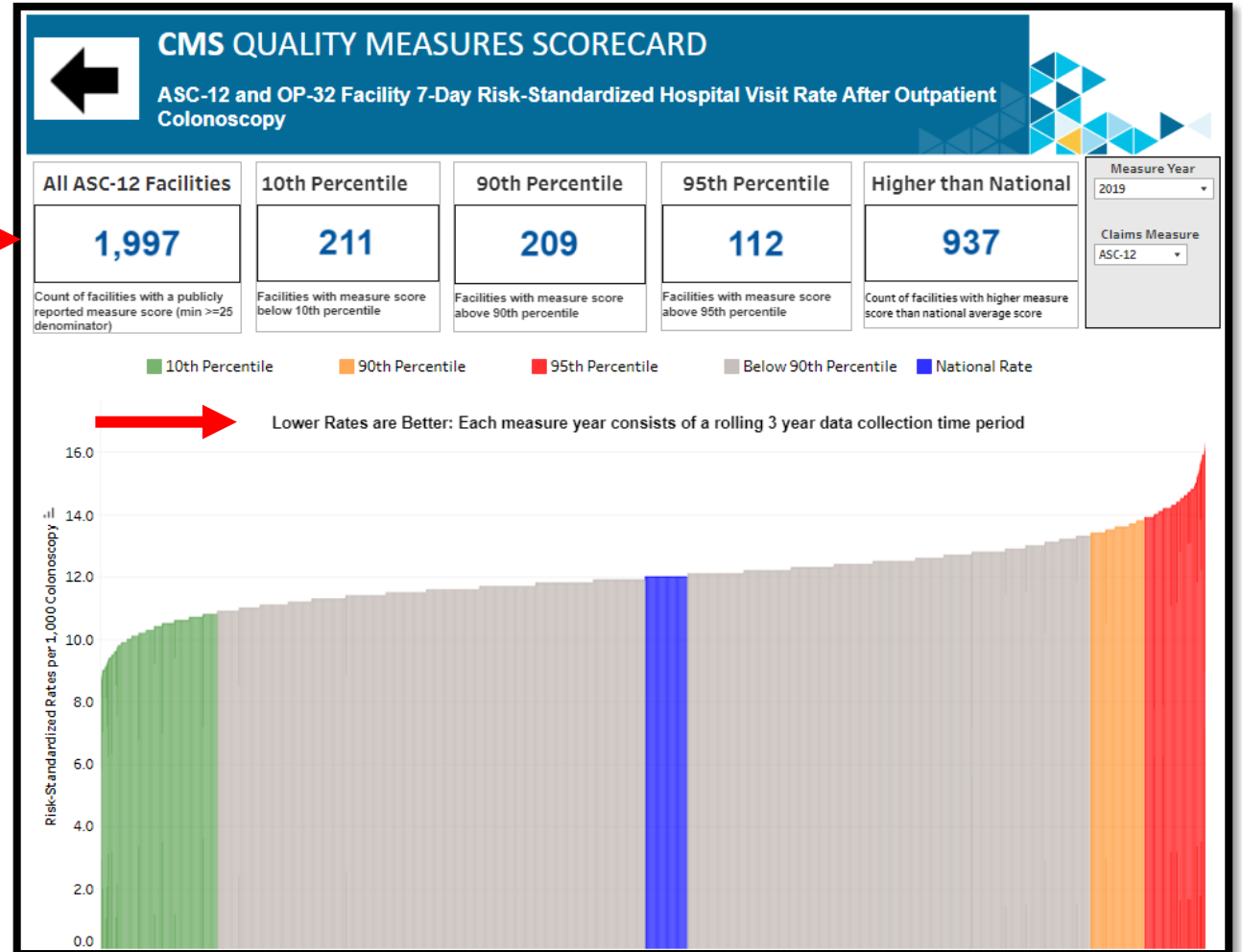
CMS QUALITY MEASURES SCORECARD
Overview

What do you want to do? Click a button below to select a desired report to view.

-  Explore all measures reported by a single facility.
-  **Explore all claims-based measures.**
-  Compare facility performance by measure.
-  Compare state and city performance by measure.
-  Explore overall national scores by state and measure.
-  Explore state comparison for all ASC measures.
-  Explore state comparisons for related measures across programs.
-  Explore state comparison for all OQR measures.

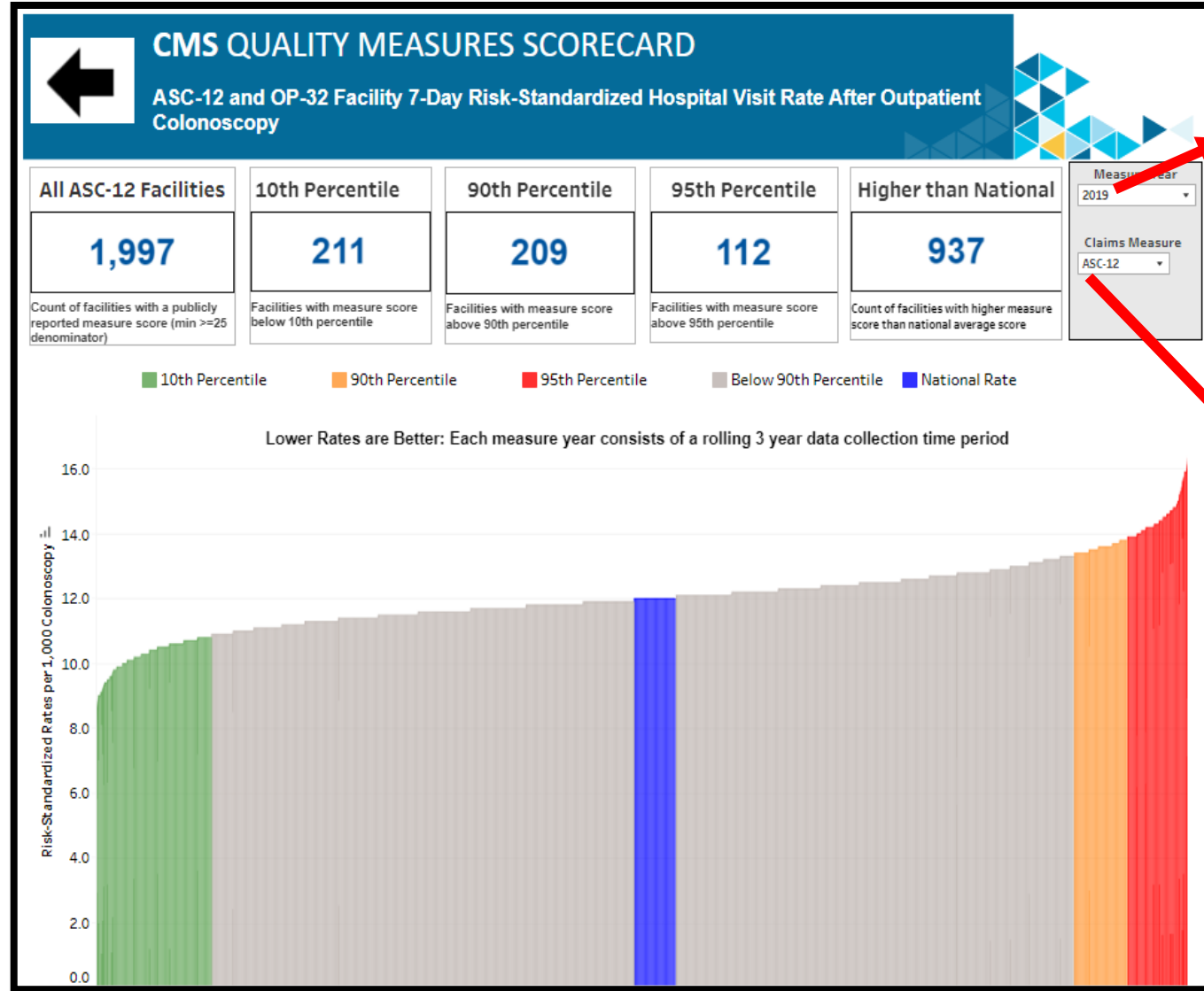
New Feature: Claims-Based Measures

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**.



Measure Year

2019

2019

2020

2021

2022

Measure Year

2021

Claims Measure

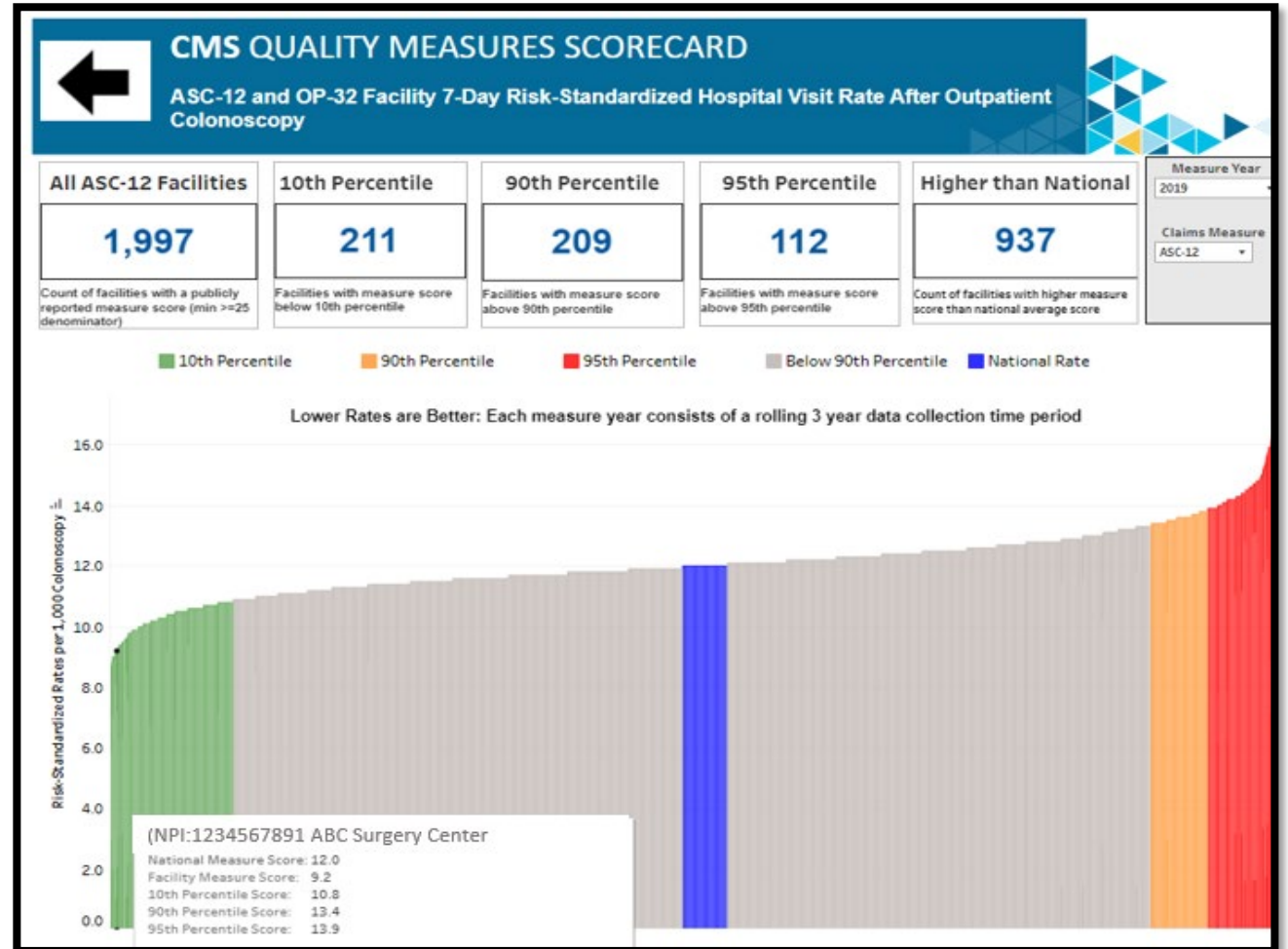
ASC-12

ASC-12

OP-32

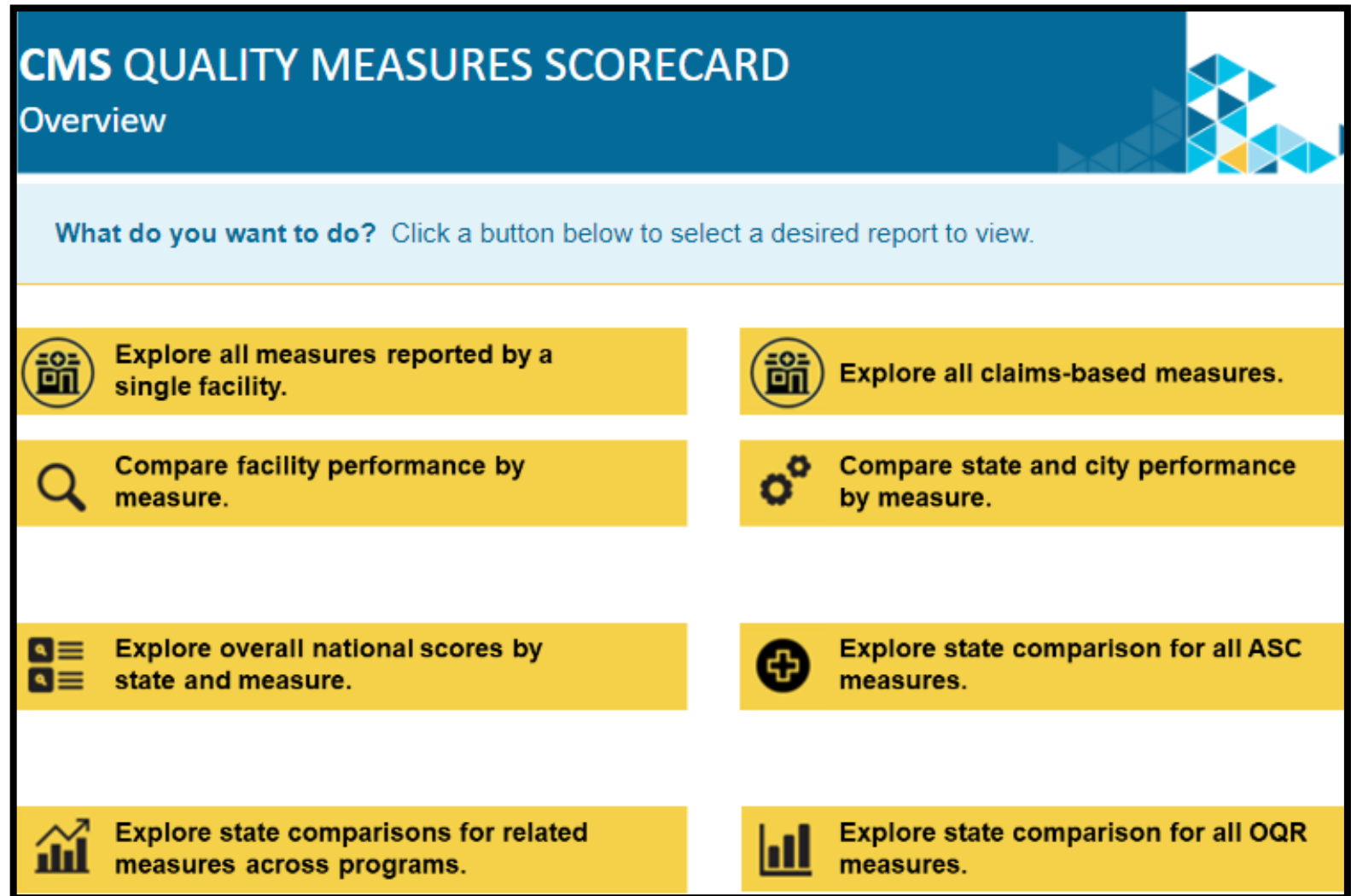
Accessing Individual ASCs

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



Other Options

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



CMS QUALITY MEASURES SCORECARD
Overview

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Program Resources

Quality Reporting Center Home Page



[Events Calendar](#)

[Inpatient](#)

[Outpatient](#)

[ASC](#)

[SNF VBP](#)

[Events on Demand](#)

Search



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

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- [Tools and Resources](#)
- [Hospital Contact Change Form](#)

Outpatient

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ASC

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Program Specific Resources

ASCQR Program

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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 in the ASC setting for Medicare beneficiaries through quality of care measurement, quality improvement, and information transparency through public reporting. 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](#).
- **To receive ASCQR Program Updates**, sign up for ASCQR [email](#) notifications.

As the national support contractor for the ASCQR Program, our team is available to answer questions or supply any additional information you may need. We are committed to offering quality service in a timely and effective manner. Please contact us via the [QualityNet Question and Answer Tool](#) or call us toll-free at [866.800.8756](tel:866.800.8756) from 7 a.m. to 6 p.m. ET.

QualityNet Home Page

The screenshot shows the QualityNet Home Page. At the top left is a search bar labeled "Search QualityNet". At the top right are links for "Quality Programs", "Help" (highlighted with a red box), and "Register". The main header area has a blue background with the text "Welcome to QualityNet! Your one-stop shop for CMS Quality Programs." Below this are two buttons: "Subscribe to Email Updates" (highlighted with a red box) and "Get Started with QualityNet". To the right is a "Recent News" section with two news items, each with a date and a title. Below the header is a section titled "I am looking for quality information associated with..." with six category buttons: "Hospitals - Inpatient", "Hospitals - Outpatient", "Hospitals - Rural Emergency", "Ambulatory Surgical Centers" (highlighted with a red box), "PPS-Exempt Cancer Hospitals", and "ESRD Facilities".

Overview Page

Home /

Ambulatory Surgical Centers

Overview

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Ambulatory Surgical Center Overview

The Ambulatory Surgical Center (ASC) Program is a pay-for-reporting, quality data program finalized by the Centers for Medicare & Medicaid Services (CMS). Under this program, ASCs report quality of care data for standardized measures to receive the full annual update to their ASC annual payment rate.

[Read more](#)

Participating in the ASCQR Program?

[Download 2024 Specifications Manual](#)

[Download 2023 Specifications Manual](#)

[View all Specifications Manuals](#)

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.

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](#).

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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