CY 2026 Hospital OPPS/ASC Payment System Proposed Rule and ASCQR Program Requirement Highlights

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Objectives

Participants will be able to:

- Locate the calendar year (CY) 2026 Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Payment System proposed rule in the *Federal Register.*

- Recall CMS' cross-program Request for Information (RFI).

- List the ASCQR Program proposals.

- State the timeline and methods for submitting public comments to CMS regarding the CY 2026 Hospital OPPS/ASC proposed rule.

Guidance

- CMS will discuss the proposals for the Program in the CY 2026 Hospital OPPS/ASC Payment System proposed rule, published July 17, 2025.

- The information provided is offered as an informal reference and does not constitute official CMS guidance.

- CMS encourages interested parties to refer to the proposed rule.

Locating the Proposed Rule

The CY 2026 Hospital OPPS/ASC Payment System proposed rule can be found in the *Federal Register*.

https://www.federalregister.gov/documents/2025/07/17/2025-13360/medicare-and-medicaid-programs-hospital-outpatient-prospective-payment-and-ambulatory-surgical

Cross-Program: RFI for Well-Being and Nutrition

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RFI: Tools and Measures

CMS seeks input on well-being and nutrition measures for consideration in future rulemaking.

- **Well-being:** CMS seeks comment on tools and measures and constructs that assess the following:
  - Overall health, happiness, and satisfaction in life
  - Complementary and integrative health, skill building, and self-care

RFI: Tools and Measures

CMS is also seeking comments on tools and measures assessing optimal nutrition and preventive care.

Nutrition: Assessments for nutritional status may include strategies, guidelines, and practices that promote healthy eating.

- The assessments may include aspects of health that support nutritional status. Preventative care plays a vital role in supporting nutrition and preventing conditions that could hinder a person's health.

CMS will no be responding to specific comments but intends to use input to inform future measure development efforts.

Cross-Program: Proposed Measure Removals

Proposed Removal

- ASC-20: COVID-19 Vaccination Coverage Among Healthcare Personnel (HCP) Measure

- ASC-22: Screening for Social Drivers of Health (SDOH)

- ASC-23: Screen Positive Rate for SDOH

- ASC-24: Facility Commitment to Health Equity (FCHE)/Hospital Commitment to Health Equity (HCHE) for hospitals

Removal Factor 8: the costs associated with these measures outweigh the benefits of their continued use in CMS quality reporting programs.
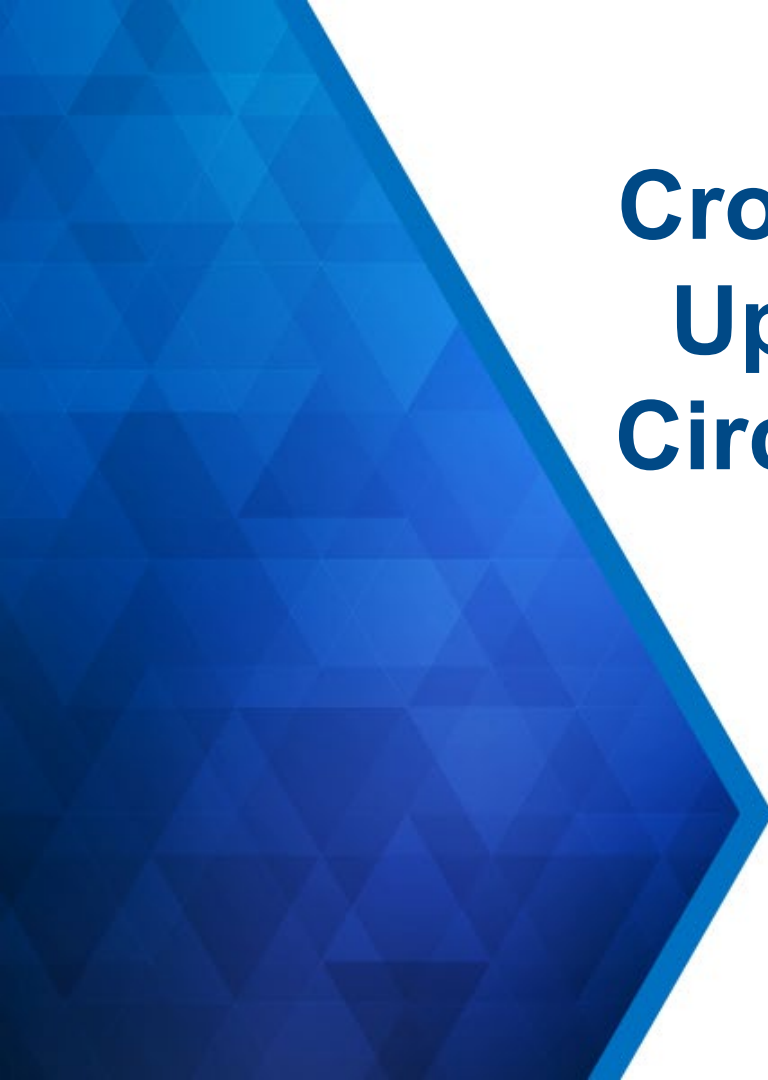
Proposed Removal: COVID -19 HCP

CMS is proposing the removal of the **COVID-19 Vaccination Coverage Among HCP measure** from Hospital Outpatient Quality Reporting (OQR), Rural Emergency Health Quality Reporting, and ASCQR Programs beginning with the **CY 2024 Reporting Period/CY 2026 Payment Determination.**

- If finalized as proposed, hospitals and ASCs that do not report COVID-19 HCP measure data monthly for the CY 2024 reporting period would **not** be penalized for CY 2026 payments due to this measure, and any measure data submitted would **not** be used for public reporting or payment purposes.

Proposed Removal: Health Equity

CMS is proposing to remove the **HCHE/FCHE and both SDOH** measures from the Hospital OQR, REHQR, and ASCQR Programs beginning with the **CY 2025 Reporting Period/CY 2027 Payment or Program Determination.**

- If finalized as proposed, facilities that do not report HCHE/FCHE data for the CY 2025 reporting period by May 15, 2026, would **not** be penalized for CY 2027 payment determination, and any measure data submitted would **not** be used for public reporting or payment purposes.

- SDOH measures are voluntary for the CY 2025 reporting period and any measure data submitted would not be used for public reporting or payment purposes.

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Cross-Program Proposed Updates: Extraordinary Circumstances Exception (ECE) Policy

Proposed Guidelines

Per current regulations, exceptions to data submission deadlines and requirements can be granted in the event of an extraordinary circumstance beyond the control of a facility (e.g., flood, bombing, etc.).

CMS is proposing to update regulations to specify ECE relief could take the form of an extension of time for a facility to comply with a reporting requirement, if appropriate.

ECE regulations for Hospital OQR, REHQR, and ASCQR regulations at 42 CFR 419.46(e); 419.95(g); 416.310(d), respectively.

Proposed Guidelines

- A facility may request an ECE within 30-calendar days (instead of 90 days under the current policy) of the date the extraordinary circumstance occurred.

- CMS will notify the requestor in writing and will specify whether the facility is exempted from one or more reporting requirements or CMS has granted the facility an extension of time.

- CMS may grant an ECE to one or more facilities that have not requested an ECE if it is determined that there is a systemic problem or that an extraordinary circumstance has affected an entire region or locale.

Polling Question

ASCQR Program: Proposed Changes to the Measure Set

Proposed Adoption

CMS is proposing to adopt the Patient Understanding of Key Information Related to Recovery After a Facility-Based Outpatient Procedure or Surgery, Patient Reported Outcome-Based Performance Measure (Information Transfer PRO–PM)

- Beginning with voluntary reporting for the CY 2027 and CY 2028 reporting periods followed by mandatory reporting beginning with the CY 2029 reporting period/CY 2031 payment determination.

- Using a 9-question survey via vendor or facility administered.

Measure Calculation

- **Numerator:** The sum of all individual scores received from eligible respondents

  o Scores are calculated by taking the sum of items for which the respondent gave the most positive response (**Yes or Very Clear**) and dividing by the number of respondent deemed applicable.

- **Denominator:** The total number of patients 18 years or older who had a procedure or surgery in an ASC, left the ASC alive, and responded to the survey

Data Collection

- Data are calculated based on PRO data collected by the ASCs directly or through a vendor via the Information Transfer PRO–PM survey instrument distributed to patients/caregivers by electronic mail or text.

- The survey would be distributed within 2 to 7 days post-procedure/surgery.

- There will be a 65-day window for patient response to the survey.

Data Submission

- The reporting period could include data collection for procedures performed from January 1 through and including December 31 of the year that is two years prior to the applicable payment determination.

- Data will be submitted by May 15 in the calendar year preceding the applicable payment determination year.

- For ASCs that anticipate receiving more than 200 completed surveys, these ASCs would either:

  o Survey and report data on their entire eligible population; or

  o Randomly sample their eligible population to collect and report data from 200 completed surveys.

Polling Question

Commenting

Karen VanBourgondien, RN, BSN
Outpatient Quality Reporting Support Team

Comment Period

- Comments must be received or postmarked no later than September 15, 2025.

- CMS encourages electronic submission of comments.

  - Comments may also be submitted by regular mail, express mail, or overnight mail to the designated addresses provided.

- Comment responses will be included in the final rule.

Accessing the Rule

From the *Federal Register*, select the green **Submit A Public Comment** box.

Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems; Quality Reporting Programs; Overall Hospital Quality Star Ratings; and Hospital Price Transparency

A Proposed Rule by the Centers for Medicare & Medicaid Services on 07/17/2025

This document has a comment period that ends in 56 days. (09/15/2025)

SUBMIT A PUBLIC COMMENT

9 comments received. View posted comments

PUBLISHED DOCUMENT: 2025-13360 (90 FR 33476)

PDF

Document Details

Document Dates

Table of Contents

DOCUMENT HEADINGS

Department of Health and Human Services
Centers for Medicare & Medicaid Services
Office of the Secretary
42 CFR Parts 410, 412, 413, 415, 416, and 419
45 CFR Part 180
[CMS-1834-P]
RIN 0938-AV51

Entering Your Comment

Enter your comment in the **Comment** field. You can also attach files.

Submitting Your Comment

- Select an option under "Tell us about yourself!".
- Select the box: "I read and understand the statement above."
- Select the **Submit Comment** box.

ASCQR Program Requirement Highlights

Data Submission: OAS CAHPS

Survey Measure: CY 2025 Reporting Period/CY 2027 Payment Determination

Measure	Reporting Period	Submission Deadline	Payment Determination
ASC-15a: About Facilities and Staff	**Quarter (Q)1:** Jan 1–Mar 31, 2025	Jul 9, 2025	Jan 1–Dec 31, 2027
ASC-15b: Communication About Procedure	**Q2:** Apr 1–Jun 30, 2025	Oct 8, 2025	
ASC-15c: Preparation for Discharge and Recovery	**Q3:** Jul 1–Sep 30, 2025	Jan 14, 2026	
ASC-15d: Overall Rating of Facility	**Q4:** Oct 1–Dec 31, 2025	Apr 8, 2026	
ASC-15e: Recommendation of Facility			

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

For information on CMS-approved vendors, visit the oascahps website.

Participation Exemption Request

Participation Exemption Request (PER) forms are submitted if an eligible ASC served fewer than 60 survey-eligible patients during the reporting period.

- Example: If your ASC served fewer than 60 survey-eligible patients between January 1 and December 31, 2025, you may request an exemption.

  - PER forms are accepted through December 31 of the reporting period.

- A form should be submitted each year for which you qualify and wish to seek an exemption from participation.

- Information, instructions, and the PER form are located on the OAS CAHPS website.

OAS CAHPS Frequent Question

The person who registered as the OAS CAHPS Survey Administrator for our facility left, and we do not know the login credentials. What do we do?

If the person who was registered as the Survey Administrator did not designate a Backup Administrator for your facility, you should contact the OAS CAHPS Survey Coordination Team at oascahps@rti.org and request the deletion of the existing registration. This will allow someone else to register as the new OAS CAHPS Survey Administrator. Remember to designate a Backup Administrator as soon as possible.

OAS CAHPS Frequent Question

I received an email saying our OAS CAHPS data have not been submitted, but we have been sending the data to our vendor. What should we do?

This type of targeted message is letting you that your ASC's quarterly data has not yet been submitted.

If you are working with a CMS-approved survey vendor and want to verify real-time data submission details, log into the OAS CAHPS website to access the Data Submission Reports

If you are not yet participating in OAS CAHPS, you may find information on how to get started under the **Quick Links** section of the OAS CAHPS website home page

ECE Process

An extraordinary circumstance is beyond the control of a facility.

- Submit the ECE form **after** the deadline for a qualifying extraordinary circumstance.

- Download a copy of the ECE Quick Reference Guide from the [QualityNet website](#).

- For ECEs related to the survey measure, include the name of your vendor and the date they began or will begin submitting your data.

Polling Question

Appendix: Proposed ASCQR Program Measure Set

Web-Based Measures: HQR

CY 2025 Reporting Period/CY 2027 Payment Determination

Measure	Reporting Period	Submission Deadline	Payment Determination
ASC-1: Patient Burn	Jan 1–Dec 31, 2025	May 15, 2026	Jan 1—Dec 31, 2027
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			

Health Equity Measures: HQR

CY 2025 Reporting Period/CY 2027 Payment Determination

Measure	Reporting Period	Submission Deadline	Payment Determination
ASC-22: Screening for Social Drivers of Health **(voluntary)**	Jan 1–Dec 31, 2025	May 15, 2026	Jan 1—Dec 31, 2027
ASC-23: Screen Positive Rate for Social Drivers of Health **(voluntary)**			
ASC-24: Hospital Commitment to Health Equity			

These measures are proposed for removal for CY 2025 reporting period for the CY 2027 payment determination.

Web-Based Measures: NHSN

CY 2025 Reporting Period/CY 2027 Payment Determination

Measure	Reporting Period	Submission Deadline	Payment Determination
ASC-20: COVID-19 Vaccination Coverage Among HCP	Q1 2025 Jan 1–Mar 31, 2025	Aug 15, 2025	Jan 1—Dec 31, 2027
	Q2 2025 Apr 1–Jun 30, 2025	Nov 17, 2025	
	Q3 2025 Jul 1–Sept 30, 2025	Feb 16, 2026	
	Q4 2025 Oct 1–Dec 31, 2025	May 15, 2026	

ASC-20 is proposed for removal for CY 2024 reporting period for the CY 2026 payment determination.

Claims-Based Measures

CY 2025 Reporting Period/CY 2027 Payment Determination

Measure	Calculated Encounter Dates	Payment Determination
ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Jan 1, 2023–Dec 31, 2025	Jan 1—Dec 31, 2027
ASC-17: Hospital Visits after Orthopedic ASC Procedures **ASC-18:** Hospital Visits after Urology ASC Procedures **ASC-19:** Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at ASCs	Jan 1–Dec 31, 2025	Jan 1—Dec 31, 2027

No proposed changes to claims-based measures.

PRO-PM Measures

CY 2025 Voluntary Reporting Period

Measure	Reporting Period	Pre-Procedure Data Collection	Pre-Procedure Submission Deadline	Post Procedure Data Collection	Post-Procedure Submission Deadline	Payment Determination
ASC-21: THA/TKA PRO-PM	Jan 1– Dec 31, 2025	Oct 3, 2024- Dec 31, 2025	May 15, 2026	Oct 28, 2025 -Mar 1, 2027	May 17, 2027	Jan 1—Dec 31, 2027

CY 2027 Voluntary Reporting Period Begins

Measure	Reporting Period	Submission Deadline
Information Transfer PRO-PM* **Newly Proposed**	Jan 1—Dec 31, 2026	May 15, 2027

*Proposed voluntary reporting for the CY 2027 and CY 2028 reporting periods followed by mandatory reporting with the CY 2029 reporting period/CY 2031 payment determination.

OAS CAHPS

CY 2025 Reporting Period/CY 2027 Payment Determination

Measure	Reporting Period	Submission Deadline	Payment Determination
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	**Q1:** Jan 1—Mar 31, 2025	Jul 9, 2025	Jan 1—Dec1, 2027
	Q2: Apr 1—Jun 30, 2025	Oct 8, 2025	
	Q3: Jul 1—Sep 30, 2025	Jan 14, 2026	
	Q4: Oct 1—Dec 31, 2025	Apr 8, 2026	

Using Your Resources

Use all the resources available to you, and:

- Make a binder of important program documents.

- Create a checklist for yourself or others that come after.

- Ensure your facility always has at least two Security Officials for the Hospital Quality Reporting system.

- Download the program Specifications Manual.

- Complete the ASC Contact Change Form for changes in staff.

Resources

Outpatient Quality Reporting Support Team

- Phone: 866.800.8756

- Ask a question via QualityNet Question and Answer Tool

Center for Clinical Standards and Quality Service Center

- Phone: 866.288.8912

- Email: qnetsupport@cms.gov

OAS CAHPS

- Phone: 866.590.7468

- Email: oascahps@rti.org

Survey

Please [click here](#) to complete a short survey.

Acronyms

ASC	ambulatory surgical center	**OPPS**	Outpatient Prospective Payment System
ASCQR	Ambulatory Surgical Center Quality Reporting	**OQR**	Outpatient Quality Reporting
CMS	Centers for Medicare & Medicaid Services	**PD**	payment determination
CY	calendar year	**PER**	Participation Exemption Request
ECE	Extraordinary Circumstances Exception	**PRO-PM**	Patient-Reported Outcome-Based Performance Measure
FCHE	Facility Commitment to Health Equity	**Q**	quarter
HCHE	Hospital Commitment to Health Equity	**RFI**	Request for Information
HCP	healthcare personnel	**SDOH**	Social Drivers of Health
HQR	Hospital Quality Reporting	**THA/ TKA**	Total Hip Arthroplasty/ Total Knee Arthroplasty
OAS CAHPS	Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems		

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.

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