

ASC CMS Quality Reporting Update

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Learning Objectives

- Participants will:
 - Identify what quality reporting is required by Centers for Medicare and Medicaid Services (CMS) for ambulatory surgery centers (ASCs)
 - Define the quality measure requirements for ambulatory surgery centers
 - Understand future implications in the ambulatory surgery center quality reporting program

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ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Affected Groups
ASC-1	Patient Burn	Claims-Based	January 1- December 31, 2015	January 1- December 31, 2015	CY 2017	Medicare Part B fee for service patients
			January 1-December 31, 2016	January 1-December 31, 2016	CY 2018	
ASC-2	Patient Fall	Claims-Based	January 1- December 31, 2015	January 1- December 31, 2015	CY 2017	Medicare Part B fee for service patients
			January 1-December 31, 2016	January 1-December 31, 2016	CY 2018	
ASC-3	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	Claims-Based	January 1- December 31, 2015	January 1- December 31, 2015	CY 2017	Medicare Part B fee for service patients
			January 1-December 31, 2016	January 1-December 31, 2016	CY 2018	
ASC-4	Hospital Transfer/ Admission	Claims-Based	January 1- December 31, 2015	January 1- December 31, 2015	CY 2017	Medicare Part B fee for service patients
			January 1-December 31, 2016	January 1-December 31, 2016	CY 2018	
ASC-5	Prophylactic Intravenous (IV) Antibiotic Timing	Claims-Based	January 1- December 31, 2015	January 1- December 31, 2015	CY 2017	Medicare Part B fee for service patients
			January 1-December 31, 2016	January 1-December 31, 2016	CY 2018	

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ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Affected Groups
ASC-6	Safe Surgery Checklist Use	Web-Based via QualityNet secure portal	January 1- December 31, 2015	January 1- August 15, 2016	CY 2017	All patients
			January 1- December 31, 2016	January 1- August 15, 2017	CY 2018	
ASC-7	ASC Facility Volume Data on Selected ASC Surgical Procedures	Web-Based via QualityNet secure portal	January 1- December 31, 2015	January 1- August 15, 2016	CY 2017	All patients
			January 1- December 31, 2016	January 1- August 15, 2017	CY 2018	
ASC-8	Influenza Vaccination Coverage among Healthcare Personnel	Web-Based via National Healthcare Safety Network (NHSN)	October 1, 2015- March 31, 2016	Through May 15, 2016	CY 2017	Health Care Personnel
			October 1, 2016- March 31, 2017	Through May 15, 2017	CY 2018	

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ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Affected Groups
ASC-9	Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients	Web-Based via QualityNet secure portal	January 1-December 31, 2015	January 1-August 15, 2016	CY 2017	Sampling
			January 1-December 31, 2016	January 1-August 15, 2017	CY 2018	
ASC-10	Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	Web-Based via QualityNet secure portal	January 1-December 31, 2015	January 1-August 15, 2016	CY 2017	Sampling
			January 1-December 31, 2016	January 1-August 15, 2017	CY 2018	
ASC-11 Voluntary	Cataracts-Improvement in Patient's Visual Function within 90 days following Cataract Surgery	Web-Based via QualityNet secure portal	January 1-December 31, 2015	January 1-August 15, 2016	Will not affect payment; voluntary	Sampling
			January 1-December 31, 2016	January 1-August 15, 2017	CY 2018	
ASC-12	Facility Seven-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy	Administrative Claims-Based	Paid Medicare Fee for Service Claims January 1-December 31, 2016	Paid Medicare Fee for Service Claims Dry Run was July 1, 2011 through June 30, 2014	CY 2018	Paid Medicare Fee for Service Claims

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CMS Ambulatory Surgical Center (ASC) Quality Reporting Program

- CMS ASC Quality Reporting Program Quality Measures Specifications Manual
 - Verify you have the latest versions
 - **5.1** 3Q16-4Q16
 - **5.0a** 1Q16-2Q16
 - **4.1** 4Q15
 - **4.0a** 1Q15-3Q15
- Located @ www.qualitynet.org under ASC tab
- Included in this manual:
 - Measure specifications
 - Data collection and submission
 - Quality Data Codes (QDCs)

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CMS ASC Quality Reporting Program Measures

- ASC-1: Patient Burn
- ASC-2: Patient Fall
- ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant
- ASC-4: Hospital Transfer/Admission
- ASC-5: Prophylactic Intravenous (IV) Antibiotic Timing

Medicare Part B Fee for Service Patients

Claims Based Reporting–Quality Data Codes (QDCs)

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CMS ASC Quality Reporting Program Measures

- ASC-6: Safe Surgery Checklist Use
- ASC-7: ASC Facility Volume Data on Selected ASC Surgical Procedures

Data submitted is for *All Patients*

**Web Based Reporting via QualityNet Secure Portal
(www.qualitynet.org)**

- Data **collection**: January 1 through December 31, 2015
- Data **reporting**: January 1 through August 15, 2016
- Data **collection**: January 1 through December 31, 2016
- Data **reporting**: January 1 through August 15, 2017

CMS ASC Quality Reporting Program Measures

- ASC- 8: Influenza Vaccination Coverage among Healthcare Personnel

Web Based Reporting Via Centers for Disease Control and Prevention (CDC) National Health Care Safety Network (NHSN) (www.cdc.gov/nhsn/index.html)

- Data ***collection*** begins with immunizations for the flu season October 1, 2015 through March 31, 2016
- Deadline for data ***reporting*** for the 2015-2016 flu season is May 15, 2016

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ASC 8: Influenza Vaccination Coverage Among Healthcare Personnel (HCP)

- CDC's NHSN website for 5 step ***Enrollment***:
www.cdc.gov/nhsn/ambulatory-surgery/enroll.html
“NHSN facility administrator enrollment guide”
- Need to complete the 3 step ***Set-up***
(<http://www.cdc.gov/nhsn/ambulatory-surgery/setup.html>) before reporting!
- ***Report*** data to CDC's National Healthcare Safety Network (NHSN): [https:// sams.cdc.gov](https://sams.cdc.gov)

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NHSN Questions

- For questions on HCP influenza vaccination summary reporting, please send an e-mail to: NHSN@cdc.gov and include “HPS Flu Summary-ASC” in the subject line
- For assistance with Secure Access Management Services (SAMS), contact the SAMS Help Desk @ 1-877-681-2901 or samshelp@cdc.gov

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CMS ASC Quality Reporting Program Measures

- ASC-9: Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients
- ASC-10: Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps-Avoidance of Inappropriate Use

Sample size for each measure is determined by the number of patients that meet the denominator criteria

Web Based Reporting via QualityNet Secure Portal
(www.qualitynet.org)

- Data ***collection***: January 1 through December 31, 2015
- Data ***reporting***: January 1 through August 15, 2016
- Data ***collection***: January 1 through December 31, 2016
- Data ***reporting***: January 1 through August 15, 2017

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Sample Size (ASC 9, 10, {11 voluntary})

Each measures volume will determine the sample size:

Population Per Year 0-900

Yearly Sample Size 63

Population Per Year ≥901

Yearly Sample Size 96

If you performed 950 Screening Endoscopies

Sample size would be 96

If you performed 43 Screening Endoscopies

Sample size would be 43

If you performed 800 Biopsy or Polypectomy Endo

Sample size would be 63

If you performed 1200 Cataracts

Sample size would be 96

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How Your Data Is Reported

- **Claims Based Reporting—Quality Data Codes (QDCs)**
 - Patient Burn
 - Patient Fall
 - Wrong Site, Side, Patient, Procedure, Implant
 - Hospital Admission/Transfer
 - Prophylactic IV Antibiotic Timing
- **Web Based Reporting via QualityNet Secure Portal (www.qualitynet.org)**
 - Safe Surgery Checklist Use
 - ASC Volume of Selected Procedures for all-patients
 - Endoscopy Surveillance: Appropriate follow-up for Normal Colonoscopy
 - Endoscopy Surveillance: Colonoscopy Interval for History Adenomatous Polyps
- **Web Based Reporting Via Centers for Disease Control and Prevention (CDC)**

National Health Care Safety Network (NHSN)
(www.cdc.gov/nhsn/index.html)

 - Influenza Vaccination Coverage Among Health Care Personnel

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ASC Program Measurement Set for CY 2018 Payment Determination

- ASC-12: Facility Seven-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy

Data is pulled by CMS from the Medicare Fee for Service claims that were submitted by the center

- **No data submission** or reporting required from the ASC
- **Planned data collection:** January 1 through December 31, 2016
- Data will be **publicly reported**

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Key Points To Remember

- ASC 6, 7, 9 & 10:
 - Active Security Administrator to access QualityNet Secure Portal
 - Recommended to have two Security Administrators if possible
 - Sign in to QualityNet secure portal frequently (every 60 days) to keep the account active
- ASC 7 (volume data measure):
 - need to fill in all procedure categories listed in QualityNet even if your volume is zero

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Key Points To Remember

- ASC 8 (influenza vaccination):
 - need to enroll with CDC NHSN, complete set up and report; **Need CCN field completed and not N/A**

 - NHSN status listing @ <http://www.qualityreportingcenter.com/asc/nhsn-listing/> :
Insert the CMS Certification Number (CCN) for a display of your facility's enrollment and facility's report submission status

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Key Points To Remember

- ASC 8 (influenza vaccination):
 - A users Secure Access Management Services (SAMS) account will be deactivated if they do not log in at all within a 12 month period (1 year).
 - SAMS sends 2 email notifications to users that have not been active approaching a year:
 - 30 days before the account is removed from SAMS
 - 10 days before the account is removed from SAMS
 - If an account is deactivated they will have to re-register with SAMS.

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Key Points To Remember

- ASC 9 and 10 (colonoscopy measures):
 - sample size for each measure is determined by the number of cases that meet the denominator criteria
 - if you do not perform endoscopy procedures you STILL need to log into www.qualitynet.org secure portal and enter zero

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Key Points To Remember

- ASC-11 (cataract visual function):
 - is a voluntary measure
 - if you elect to collect the information (Jan 1- Dec 31, 2015) and report (January 1- August 15, 2016)
 - if you elect to collect the information (Jan 1- Dec 31, 2016) and report (January 1- August 15, 2017)
 - any data submitted will be publicly reported
 - if you elect to not collect the information or report the data, recommend enter “0” in order for data entry to say “complete”

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Key Points To Remember

- ASC-12:
 - no additional data submission from ASCs
 - *administrative* Claims based measure utilizing paid Medicare Fee for Service (FFS) claims from January 1-December 31, 2016
 - confidential reports included patient level data that could identify potential gaps for quality improvement efforts on QualityNet Secure Portal:
 - patient
 - type of visit
 - admitting facility
 - discharge diagnosis

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Key Points To Remember

- Each facility should have at least two people signed up for the QualityNet **email** notifications
 - Go to www.qualitynet.org; click on ambulatory surgery center and click on email notification

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Status Listing Look Up Tools

<http://www.qualityreportingcenter.com/asc/asc-status-listing-lookup-tools/>

- **CCN Lookup Tool**
In order to find your facility's CMS Certification Number (CCN) enter your facility's National Provider Identifier (NPI)

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Status Listing Look Up Tools

<http://www.qualityreportingcenter.com/asc/asc-status-listing-lookup-tools/>

Status Listing Lookup Tools

Home » ASC Program » Status Listing Lookup Tools

Note: The deadline for ASCs to submit online data through NHSN and QualityNet has been extended to September 30, 2015. To submit these data, ASCs must begin enrolling immediately in NHSN and QualityNet to meet all ASCQR Program requirements.

CCN Lookup Tool
Click [here](#) to find your facility's CMS Certification Number (CCN) by entering your facility's National Provider Identifier (NPI).

ASC-12 Dry Run
Click [here](#) to see if your facility has a report for the ASC-12 (Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy) dry run.

NHSN Status Listing
Click [here](#) to see if your facility has completed the National Healthcare Safety Network (NHSN) enrollment and submission of data for ASC-8 (Influenza Vaccination Coverage Among Healthcare Providers).

Web-Based Status Listing
Click [here](#) for information on your facility's web-based measures data submission.

Calendar:

- August 27, 2015
PCH FY 2016 IPPSA TCH Final Rule - I.C.E.
- September 1, 2015
HIF: Keys to Implementing and Abstracting the Substance Use Measure Set SUB-1, SUB-2/2a - I.C.E.
- September 2, 2015
FY 2016 IPPSA TCH Final Rule - I.C.E.
- September 11, 2015
eCOM CMS 2015 OBDa Submissions for Eligible Hospital/Outpatient Access Hospitals
[See the full calendar](#)

Status Listing Look Up Tools

<http://www.qualityreportingcenter.com/asc/asc-status-listing-lookup-tools/>

- **Web-Based Status Listing**

For information on your facility's web-based measures data submission for ASC 6, 7, 9 and 10.

- *For example:*

ASC-6 Submitted: yes (or no)

ASC-7 Submitted: yes (or no)

ASC-9 Submitted: yes (or no)

ASC-10 Submitted: yes (or no)

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Status Listing Look Up Tools

<http://www.qualityreportingcenter.com/asc/asc-status-listing-lookup-tools/>

- **NHSN Status Listing**

To see if your facility has completed the National Healthcare Safety Network (NHSN) enrollment and submission of data for ASC-8 (Influenza Vaccination Coverage Among Healthcare Providers)

- *NHSN enrolled: yes (or no)*

- *Flu data submitted: yes (or no)*

- *Does not appear in the NHSN status listing*

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QualityNet Reports

- Webinar presented on October 22, 2014 “Secure File Transfer and QualityNet Reports”
- Slides and transcript can be accessed at <http://www.qualityreportingcenter.com/events/archive/asc/>
- *Active* Secure Administrator
- Log on to secure portal
- Go to ‘My Tasks’ page and the ‘My Reports’
- Two types of reports:
 - Claims Detail report
 - Provider Participation report

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Running Reports in Quality Net Secure Portal

Alerts (0) Notifications (3) Set Transfer User Profile Log Out #MC - SDPS

CMS.gov QualityNet

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Home
Welcome

QualityNet Secure Portal Provided by Center for Clinical Standards and Quality (CCSQ), Centers for Medicare and Medicaid Systems. Providers, vendors supporting providers, support contractors, and other participating in CCSQ Quality Reporting Programs can access data exchange and submission tools, measures tools, scoring support tools, and reporting services in this portal.

Run Reports
Search Reports
Analytics Report

QualityNet News

- Hospital VBP Percentage Payment Summary Report review and corrections requests due Aug. 25
- QualityNet Secure Portal enrollment for QIO community now available
- Hospital VBP Program FY 2015 Percentage Payment Summary Report now available

More News.....

Announcements from QualityNet Team

- Maintenance downtime scheduled for August 22-25
- Maintenance downtime scheduled
- My QualityNet, Secure Portal unavailable

More Announcements.....

QualityNet Events

The QualityNet Event Center provides a schedule of upcoming (live) training sessions, as well as trainings hosted by QIOs for healthcare providers in their respective states. Also listed are details, including date, time, duration of the event, and panelists/moderators. To view the schedule, visit QualityNet Event Center

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Claims Detail and Participation Reports

Alerts (0) Notifications (3) Secure File Transfer User Profile Log Out IFMC - SDPS

CMS .gov QualityNet

Home - Quality Programs - My Data - My Reports - My Tools - Help -

My Reports > Run Reports

Start Run Report(s) Search Report(s) Favorites

Select Program, Category and Report Report Parameters Confirmation

Select Program, Category and Report

The available reports are grouped by program and category combination. If you have access to a single program, your program is pre-selected, and if the category related to the selected program has a single value, then it too will be pre-selected. Choose a program, then category, and then click on VIEW REPORTS to view your report choices. Select the report you wish to run from the table below by clicking on its name.

Report Program: ASCQR Report Category: Ambulatory Surgical Center Reports - Feedback VIEW REPORTS

> Search Report

REPORT NAME	REPORT DESCRIPTION
ASC - Claims Detail Report	The ASC Claims Detail Report identifies claims in final action status in the Data Warehouse.
ASCQR Participation Report	The ASCQR Participation Report displays a summary of the data submissions required for the ASC Quality Reporting Program.
Hospital Reporting - Vendors Authorized to Upload Data	The Vendors Authorized to Upload Data report displays a list of vendors authorized by a hospital's behalf.

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Claims Detail Reports Select parameters (dates) for your report

Claims Detail

- Provide a list of claims submitted with and without Quality Data Codes (QDCs)
- Lists claims that have been successfully submitted to the Medicare Administrative Contractor (MAC) in accordance with program requirements

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Claims Detail Report from QualityNet Secure Portal

Report Run Date: 06/23/2015	ASC Claims Detail Report Date of Service Range: 04/01/2015 - 06/23/2015	Page: 1 of 33					
Data As Of: 06/03/2015							
Patient's Medicare Health Insurance Claim Number (HICN)	Claim Receipt Date	Date of Service	Quality Data Codes	Last Name	First Name	Date of Birth	Claim Control Number (ICN)
	04/06/2015	04/01/2015	G8907, G8918			11/20/1935	
	04/06/2015	04/01/2015	G8907, G8918			09/29/1930	
	04/06/2015	04/01/2015	G8907, G8918			10/25/1937	
	04/06/2015	04/01/2015	G8907, G8918			10/28/1937	
	04/06/2015	04/01/2015	G8907, G8918			03/08/1941	
	04/06/2015	04/01/2015	G8907, G8918			08/15/1937	
	04/06/2015	04/01/2015	G8907, G8918			02/09/1947	
	04/06/2015	04/01/2015	G8907, G8918			11/08/1943	
	04/06/2015	04/01/2015	G8907, G8918			03/13/1966	
	04/06/2015	04/01/2015	G8907, G8918			05/20/1945	

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Participation Reports: Select parameters (dates) for your report

Participation

- Security Administrator (active: yes or no)
- Participation Status (participating or withdrawn)
- CMS Threshold (%)

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Participation Report from QualityNet Secure Portal

Report Run Date: 06/03/2015		ASCQR Participation Report		Page 1 of 1
		Payment Year: 2016		
State: MD		Active QualityNet Security Administrator: Yes		
National Provider Identifier (NPI):		Participation Status:		
ASC Name:				
ASC City:				
Total Number of Claims with QDC ¹ :	460	Web - Based Measures:		Submission Status:
Total Number of Claims:	476	ASC-6: Safe Surgery Checklist Use		No
Data Completeness:	97%	ASC-7: ASC Facility Volume Data		No
CMS Required Threshold:	50%	ASC-8: Endoscopy: Follow-up Interval for Average Risk Patients		No
		ASC-10: Endoscopy: Interval for Patients with History of Polyps		No
		HAI Measures:		
		ASC-8: Influenza Vaccination Coverage among Healthcare Personnel		
		No		
Claims-Based Measures				
	Quarter 1 – 2014 Dates of Service	Numerator	Denominator	Measure Value
ASC-1: Patient Burn	0	103	0.000	Per 1000 Admissions
ASC-2: Patient Fall	2	104	19.231	Per 1000 Admissions
ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	0	103	0.000	Per 1000 Admissions
ASC-4: Hospital Transfer/Admission	0	103	0.000	Per 1000 Admissions
ASC-5: Prophylactic Intravenous (IV) Antibiotic Timing	7	8	88%	
¹ The "Total Number of Claims with QDC" field displays a count of claims containing at least one Quality Data Code (QDC) relevant to each of the required measures. **Disclaimer: This report does not confirm or deny whether an ASC qualifies for the full annual payment update.				

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ASCQR Program: Public Reporting of Facility Specific Data

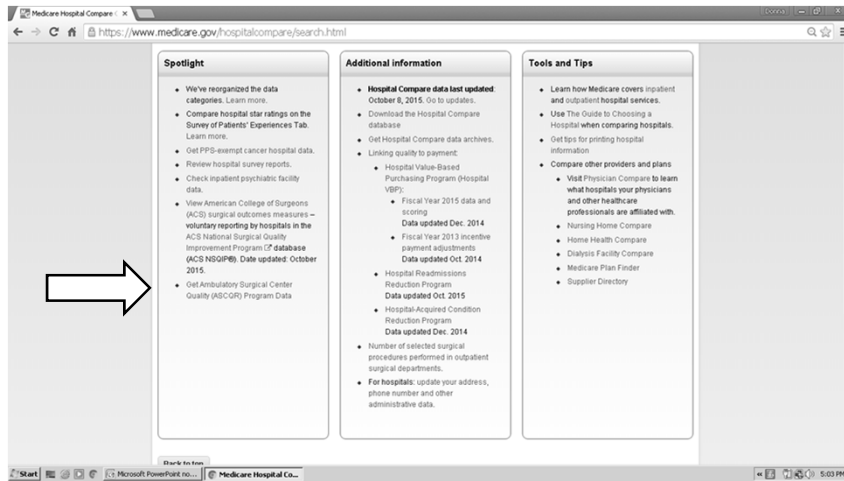
- ASC 6-7 Facility Specific Data submitted for calendar year 2012 was publicly reported on October 9, 2015
- ASC 1-5 (2013 & 2014), ASC 6-10 (2014) Facility Specific Data submitted for calendar year 2013 and 2014 is scheduled to be publicly reported in April 2016
- CMS is reporting ASC data on *Hospital Compare*, the CMS website for Medicare beneficiaries and the general public

Hospital Compare www.medicare.gov/hospitalcompare



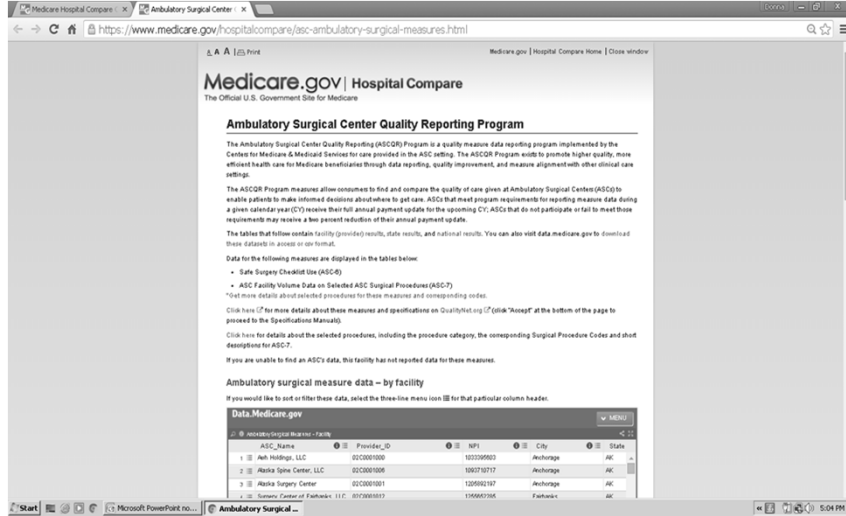
<https://www.medicare.gov/hospitalcompare/search.html>

Hospital Compare: Spotlight



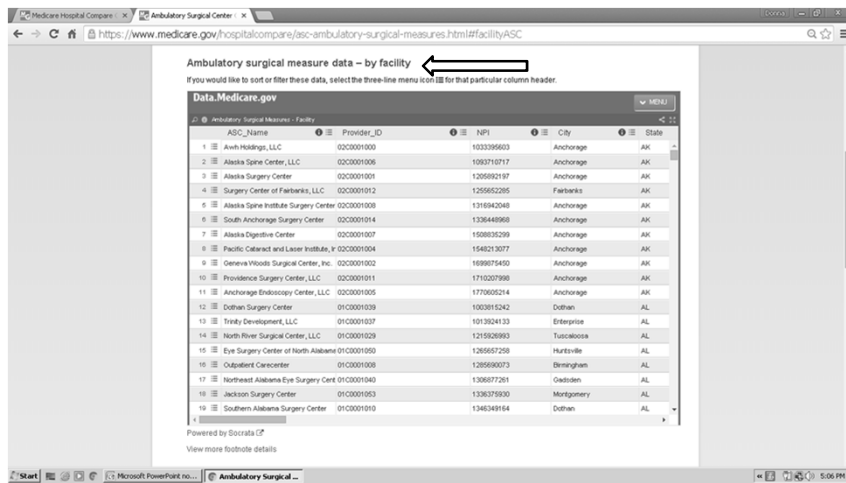
<http://www.medicare.gov/hospitalcompare/search.html>

Hospital Compare www.medicare.gov/hospitalcompare



<https://www.medicare.gov/hospitalcompare/asc-ambulatory-surgical-measures.html>

Hospital Compare www.medicare.gov/hospitalcompare



<https://www.medicare.gov/hospitalcompare/asc-ambulatory-surgical-measures.html#facilityasc>

Hospital Compare

www.medicare.gov/hospitalcompare

Ambulatory surgical measure data - by state

The average and median are calculated based on those ASCs that perform a set of services, i.e. the volume for the service category is not zero. If you would like to sort or filter these data, select the three-line menu icon for that particular column header.

State	ASC6_Measure_State	Avg_ASC7_Gastrointestinal_state	Avg_ASC7_Eye_state	Avg_ASC7_Nervous_System_state	Avg_ASC7_Musculoskeletal_state
1 AK	1	1,601.86	449.8	1,247.57	
2 AL	1	3,516.92	2,118	2,594.06	
3 AR	1	3,357	1,383.35	1,294.44	
4 AZ	0.9482	3,262.52	1,435.65	3,022.93	
5 CA	0.9938	2,477.11	1,516.56	1,558.01	
6 CO	0.988	2,698.57	1,237.02	1,798.89	
7 CT	1	4,771.91	2,243.45	1,584.63	
8 DC	1	4,544			
9 DE	1	2,911.69	1,271.82	1,954.62	
10 FL	0.9647	3,784.29	1,716.89	1,714.36	
11 GA	0.9959	3,265.79	1,550.82	1,842.83	
12 GU	1	747	632	11	
13 HI	1	3,081.78	1,359.25	557	
14 IA	1	2,951.73	1,436.54	632.2	
15 ID	0.9737	1,945.24	1,051.67	1,396.6	
16 IL	1	2,209.3	1,323.41	1,053.46	
17 IN	1	2,186.74	1,487.52	1,062.41	
18 KS	1	1,839.88	1,209.84	771.3	
19 KY	0.963	4,245.8	1,974.89	2,350.4	
20 LA	0.9857	3,533.03	1,335.85	2,278	

<https://www.medicare.gov/hospitalcompare/asc-ambulatory-surgical-measures.html#stateASC>

Hospital Compare

www.medicare.gov/hospitalcompare

Ambulatory surgical measure data - national

The average and median are calculated based on those ASCs that perform a set of services, i.e. the volume for the service category is not zero. If you would like to sort or filter these data, select the three-line menu icon for that particular column header.

ASC6_Measure_Nat	Avg_ASC7_Gastrointestinal_nat	Avg_ASC7_Eye_nat	Avg_ASC7_Nervous_System_nat	Avg_ASC7_Musculoskeletal_nat
1	0.9893	3,451.39	1,537.07	1,601.39

<https://www.medicare.gov/hospitalcompare/asc-ambulatory-surgical-measures.html#nationalASC>

Additional Questions

Contact HSAG (formerly FMQAI) for **Program Questions** at <https://cms-ocsq.custhelp.com/>

or via phone (866) 800-8756

Monday through Friday,

7 a.m. to 6 p.m. Eastern Time

Contact the QualityNet Help Desk for **Technical Issues** at gnetsupport@hcqis.org

or via phone (866) 288-8912

Monday through Friday,

7 a.m. to 7 p.m. Central Time

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CMS/Health Services Advisory Group (HSAG) Webinars (Archived)

- March 24, 2016: "Pieces of the Puzzle –
Understanding Quality Data Codes"
- February 24, 2016: "Making it Work: A Quality Reporting Toolkit
for the ASCQR Program"
- January 27, 2016: "2016 Specifications Manual Update"

- December 9, 2015: "Final Rule"
- October 28, 2015: "Public Reporting Presentation"
- September 30, 2015: "The ASCQR Program: Recipe for
Success" {This presentation is a tutorial for those
new to the ASCQR program}

Handouts and recorded transcripts are posted at
www.qualityreportingcenter.com ; click on ASC; archived events

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CMS/Health Services Advisory Group (HSAG) Webinars (Upcoming)

- April 27, 2016: Pieces of the Puzzle (part 2)
- May 25, 2016: Data and Quality Improvement for the ASCQR Program

Registration and handouts are posted at

www.qualityreportingcenter.com

Click on ASC; upcoming events

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2016 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment Final Rule

- Released on October 30, 2015
<https://s3.amazonaws.com/public-inspection.federalregister.gov/2015-27943.pdf>
- ASC Quality Reporting Program begins on *page 553*: Section XIV. Requirements for the ASC Quality Reporting
- *Previous* measures ASC 1- ASC 12
- No new measures
- Web based measure submission is August 15, 2016 for Quality Net data submission
- NHSN data submission *remains* May 15, 2016 for ASC 8

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Measures Under Consideration

- 2014
 - Outpatient and Ambulatory Patient Experience of Care Survey Instrument
 - Normothermia
 - Unplanned anterior vitrectomy

- 2015
 - Toxic Anterior Segment Syndrome

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Outpatient/Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)

The Centers for Medicare & Medicaid Services (CMS) awarded contract to Research Triangle Institute (RTI) to develop an outpatient surgery patient experience of care and patient reported outcomes survey instrument for patients who had surgery or a procedure at an ambulatory surgery centers (ASCs) and Hospital Outpatient Departments (HOPDs) in 2012.

Patient Satisfaction Surveys

- Measure patients' **perceptions** of how well health care is delivered
- Satisfaction surveys' focus on how services meet or exceed patient's **expectations**
- Response choices are focused on *ratings*, impressions
How well are we doing in the following areas:
 - Answering questions
 - Convenience
 Patient *rates*:
 - Excellent Good Average Fair Poor

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Patient Experience of Care Surveys

- Collects information from patients about their actual **experiences** of care
- Experience of care surveys' focus on key things happening during patient's health care
- Response choices are focused on *how much/how often* events occurred :

Did the doctors, nurses and other staff explain things about your procedure in a way that was easy for you to understand?
1 Yes, definitely 2 Yes, somewhat 3 No

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Patient Experience of Care Surveys

- Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this facility?
Zero to Ten Scale : 0 = Worst facility possible
10 = Best facility possible
- Would you recommend this facility to your friends and family?
1 Definitely no
2 Probably no
3 Probably yes
4 Definitely yes

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Outpatient/Ambulatory Surgery Consumer Assessment of Healthcare Personnel and Services (OAS CAHPS)

The final survey has 37 questions that measures patients' experiences on topics that are important when choosing a place for their surgery or procedure, such as:

- communication and care provided by health
- care providers and office staff,
- preparation for the surgery or procedure,
- post-surgical care coordination, and
- patient-reported outcomes.

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Outpatient/Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)

- Official OAS CAHPS website <https://oascahps.org/>
(This is the official website for news, training and information about the OAS CAHPS survey.)
- The survey instrument was available for voluntary use in January 2016
- A list of approved OAS CAHPS vendors can be found at the OAS CAHPS website
- Toll-free number: 1-866-590-7468 for questions

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2016 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment *Final* Rule

CMS requested feedback on two new measures for future consideration:

- **Normothermia** –
Intent: To capture whether patients having surgical procedures under general or neuraxial anesthesia of 60 minutes or more in duration are normothermic within 15 minutes of arrival in PACU
- **Unplanned Anterior Vitrectomy** –
Intent: To determine the number of cataract surgery patients who have an unplanned anterior vitrectomy

Normothermia Outcome

Description: This measure is used to assess the percentage of patients having surgical procedures under general or neuraxial anesthesia of 60 minutes or more in duration are normothermic within 15 minutes of arrival in PACU.

Numerator: Surgery patients with a body temperature equal to or greater than 96.8 Fahrenheit/36 Celsius recorded within fifteen minutes of Arrival in PACU

Denominator: All patients, regardless of age, undergoing surgical procedures under general or neuraxial anesthesia of greater than or equal to 60 minutes duration

Numerator Exclusions: None

Denominator Exclusions: Patients who did not have general or neuraxial anesthesia; patients whose length of anesthesia was less than 60 minutes; patients with physician/APN/PA documentation of intentional hypothermia for the procedure performed

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Normothermia Outcome

Definitions:

Anesthesia duration: the difference, in minutes, between the time associated with the start of anesthesia for the principal procedure and the time associated with the end of anesthesia for the principal procedure

Arrival in PACU: Time of patient arrival in PACU

Intentional hypothermia: A deliberate, documented effort to lower the patient's body temperature in the perioperative period

Neuraxial anesthesia: Epidural or spinal anesthesia

Temperature: A measure in either Fahrenheit or Celsius of the warmth of a patient's body. Axillary, bladder, core, esophageal, oral, rectal, skin surface, temporal artery, or tympanic temperature measurements may be used.

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Unplanned Anterior Vitrectomy

Description: This measure is used to assess the percentage of cataract surgery patients who have an unplanned anterior vitrectomy.

Numerator: All cataract surgery patients who had an unplanned anterior vitrectomy

Denominator: All cataract surgery patients

Numerator Exclusions: None

Denominator Exclusions: None

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Unplanned Anterior Vitrectomy

Definitions:

Cataract surgery: for purposes of this measure, CPT code 66982 (Cataract surgery, complex), CPT code 66983 (Cataract surgery w/IOL, 1 stage) and CPT code 66984 (Cataract surgery w/IOL, 1 stage)

Unplanned anterior vitrectomy: an anterior vitrectomy that was not scheduled at the time of the patient's admission to the ASC

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Toxic Anterior Segment Syndrome (TASS) Outcome

Description: This measure is used to assess the number of ophthalmic anterior segment surgery patients diagnosed with TASS within 2 days of surgery.

Numerator: All anterior segment surgery patients diagnosed with TASS within 2 days of surgery

Denominator: All anterior segment surgery patients

Numerator Exclusions: None

Denominator Exclusions: None

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Toxic Anterior Segment Syndrome (TASS) Outcome

Definitions:

Anterior segment surgery: for purposes of this measure, CPT codes 65400-65756, 65760-66986, and 66999

Toxic Anterior Segment Syndrome (TASS): an acute, sterile post-operative anterior segment inflammation that develops following anterior segment surgery

Within 2 days of surgery: within 2 days of surgery, where the day of surgery is day 0

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ASC Quality Collaboration Implementation Guide www.ascquality.org



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Measures for *Future Consideration*

- All cause hospital admission within 1 day of discharge
- All cause emergency department visit within 1 day of discharge
- Postoperative nausea and vomiting
- Surgical Site Infection (SSI) after breast procedures
- Culture of safety survey

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Websites with Additional Information

- ASC Quality Collaboration website (measure summary and implementation guide)
<http://ascquality.org/qualitymeasures.cfm>
- Ambulatory Surgery Center Association (ASCA) website
<http://www.ascassociation.org>
- QualityNet website
(CMS Specifications Manual & Email Notifications)
<http://qualitynet.org>
- Quality Reporting Center FMQAI/HSAG (CMS national support contractor) <http://www.qualityreportingcenter.com/>

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Questions?

- **For ASC Quality Reporting Program Questions:**
Contact Health Services Advisory Group (HSAG) (formerly FMQAI) at <https://cms-ocsq.custhelp.com/>
or via phone (866) 800-8756 Monday through Friday,
7 a.m. to 6 p.m. Eastern Time
 - **For Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) Influenza Vaccination Questions:**
Contact NHSN@cdc.gov and include “HPS Flu Summary-ASC” in the subject line
- For assistance with SAMS, contact the SAMS Help Desk @ 1-877-681-2901 or samshelp@cdc.gov

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References

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- ▶ Federal Register / Vol. 77, No. 221 / Thursday, November 15, 2012 / Rules and Regulations. Available at <http://www.gpo.gov/fdsys/pkg/FR-2012-11-15/pdf/2012-26902.pdf>.
- ▶ Federal Register / Vol. 78, No. 237 / Tuesday, December 10, 2013/ Rules and Regulations. Available at <http://www.gpo.gov/fdsys/pkg/FR-2013-12-10/pdf/2013-28737.pdf>
- ▶ Federal Register / Vol. 79, No. 217 / Monday, November 10, 2014/ Rules and Regulations. Available at <http://www.gpo.gov/fdsys/pkg/FR-2014-11-10/pdf/2014-26146.pdf>
- ▶ Federal register/ Vol. 80, No. 219/ Friday, November 13, 2015/ Rules and Regulations. Available at <http://www.gpo.gov/fdsys/pkg/FR-2015-11-13/pdf/FR-2015-11-13.pdf>
- ▶ CMS 1633 FC / Friday, October 31, 2015/ Rules and Regulations. Available at <https://s3.amazonaws.com/public-inspection.federalregister.gov/2015-27943.pdf>

References

- ▶ ASC Quality Collaboration Implementation Guide, Version 3.2, October 2015. Available at <http://ascquality.org/documents/ASC-QC-Implementation-Guide-3.2-October-2015.pdf>
- ▶ CMS ASC Quality Reporting Program Quality Measures Specifications Manual, Version 5.1, (updated 1/15/16). Available at www.qualitynet.org
- ▶ CMS ASC Quality Reporting Program Quality Measures Specifications Manual, Version 5.0a, (updated 1/15/16). Available at www.qualitynet.org
- ▶ CMS ASC Quality Reporting Program Quality Measures Specifications Manual, Version 4.1, March 2015. Available at www.qualitynet.org
- ▶ CMS ASC Quality Reporting Program Quality Measures Specifications Manual, Version 4.0a, December 2014. Available at www.qualitynet.org
- ▶ QualityNet at www.qualitynet.org
- ▶ QualityReportingCenter at www.qualityreportingcenter.com
- ▶ National Healthcare Safety Network www.cdc.gov/nhsn/

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QUESTIONS?



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