





ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC 1	Patient Burn	Claims Based	January 1-December 31, 2017	January 1-December 31, 2017	CY 2019	Medicare Part B fee for service patients
			January 1-December 31, 2018	January 1-December 31, 2018	CY 2020	
ASC 2	Patient Fall	Claims Based	January 1-December 31, 2017	January 1-December 31, 2017	CY 2019	Medicare Part B fee for service patients
			January 1-December 31, 2018	January 1-December 31, 2018	CY 2020	
ASC 3	Wrong Site, Wrong Site, Wrong Patient, Wrong Procedure, Wrong Implant	Claims Based	January 1-December 31, 2017	January 1-December 31, 2017	CY 2019	Medicare Part B fee for service patients
			January 1-December 31, 2018	January 1-December 31, 2018	CY 2020	
ASC 4	Hospital Transfer/ Admission	Claims Based	January 1-December 31, 2017	January 1-December 31, 2017	CY 2019	Medicare Part B fee for service patients
			January 1-December 31, 2018	January 1-December 31, 2018	CY 2020	
ASC 5	Prophylactic Intravenous (IV) Antibiotic Timing	Claims Based	January 1-December 31, 2017	January 1-December 31, 2017	Measure removed for CY 2019	Medicare Part B fee for service patients
				No reporting in 2018		

ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-6	Safe Surgery Checklist Use	Web-Based via QualityNet secure portal	January 1-December 31, 2017	January 1-May 15, 2018 No reporting in 2018	Measure Removed for CY 2019	All patients
ASC-7	ASC Facility Volume Data on Selected ASC Surgical Procedures	Web-Based via QualityNet secure portal	January 1-December 31, 2017	January 1-May 15, 2018 No reporting in 2018	Measure Removed for CY 2019	All patients
ASC-8	Influenza Vaccination Coverage among Healthcare Personnel	Web-Based via National Healthcare Safety Network (NHSN)	October 1, 2017-March 31, 2018	Through May 15, 2018	CY 2019	Health Care Personnel
			October 1, 2018-March 31, 2019	Through May 15, 2019	CY 2020	Health Care Personnel

ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
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, 2017	January 1-May 15, 2018	CY 2019	Sampling
			January 1-December 31, 2018	January 1-May 15, 2019	CY 2020	
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, 2017	January 1-May 15, 2018	CY 2019	Sampling
			January 1-December 31, 2018	January 1-May 15, 2019	CY 2020	
ASC-11	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery	Web-Based via QualityNet secure portal	January 1-December 31, 2017	January 1-May 15, 2018	CY 2019	Sampling
			January 1-December 31, 2018	January 1-May 15, 2019	CY 2020	
ASC-12	Facility Seven-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy	Administrative - Claims-Based	Fed Medicare Fee for Service Claims January 1-December 31, 2017 and subsequent years	Fed Medicare Fee for Service Administrative Claims Preview Reports were available for review on QualityNet	CY 2019	Fed Medicare Fee for Service Claims

ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-13	Normothermia	Web-based via QualityNet secure portal	January 1-December 31, 2018	January 1-May 15, 2019	CY 2020	Sampling
ASC-14	Unplanned Anterior Vitrectomy	Web-based via QualityNet secure portal	January 1-December 31, 2018	January 1-May 15, 2019	CY 2020	All Patients Meeting Criteria
ASC-15 (15 a-e)	Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS)	Survey Administered by an approved vendor	January 1-December 31, 2018 Delayed	Quarterly by CMS approved vendor	CY 2020 Delayed	All Patients with Exclusions 300 Completed Surveys via Approved Vendor

ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-16 <i>Not Finalized</i>	Toxic Anterior Segment Syndrome (TASS)	Web-based via QualityNet secure-portal	January 1– December 31, 2019	January 1–May 15, 2020	CY 2021	All Patients Meeting Criteria
ASC-17 <i>Final</i>	Hospital Visit After Orthopedic Ambulatory Surgery Procedures	Administrative Claims Based	Paid Medicare Fee for Service Claims January 1, December 31, 2020	Paid Medicare Fee for Service Administrative Claims	CY 2022	Paid Medicare Fee for Service Claims
ASC-18 <i>Final</i>	Hospital Visit After Urology Ambulatory Surgery Procedures	Administrative Claims Based	Paid Medicare Fee for Service Claims January 1, December 31, 2020	Paid Medicare Fee for Service Administrative Claims	CY 2022	Paid Medicare Fee for Service Claims

CMS Ambulatory Surgical Center Quality Reporting Program

- CMS ASC Quality Reporting Program Quality Measures Specifications Manual
 - **Verify you have the latest versions**
 - 7.0a 1Q18-4Q18 (released 12/8/17)
 - 6.0a 1Q17-4Q17
- Located @ www.qualitynet.org under ASC tab
- Included in this manual:
 - Measure specifications
 - Data collection and submission
 - Quality Data Codes (QDCs)

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 (no reporting in 2018)**

*Medicare Part B Fee for Service Patients
Claims Based Reporting–Quality Data Codes (QDCs)*

ASC Quality Reporting Program Measures

- **ASC-6: Safe Surgery Checklist Use (no reporting in 2018)**
- **ASC-7: ASC Facility Volume Data on Selected ASC Surgical Procedures (no reporting in 2018)**
- 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

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

- Data **collection**: January 1 through December 31, 2017
- Data **reporting**: January 1 through **May 15**, 2018
- Data **collection**: January 1 through December 31, 2018
- Data **reporting**: January 1 through **May 15**, 2019

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, 2017 through March 31, 2018
- Deadline for data **reporting** for the 2017-2018 flu season is May 15, 2018.

ASC Quality Reporting Program Measures

ASC- 8: Influenza Vaccination Coverage among Healthcare Personnel

- In December 2017 NHSN users needed to accept an updated NHSN Agreement to Participate and Consent, even if you had submitted one previously.
- This new form should have been submitted electronically through NHSN.
- Your facility's primary contact was required to accept the new form by **April 14, 2018** or you would **not** be able to submit data in NHSN for ASC-8.
- NHSN functionality will be disabled until the consent form is accepted by your facility's primary contact.

ASC Quality Reporting Program Measures

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

- Data is pulled by CMS from the Medicare Fee for Service *administrative* claims that were billed by the center starting January 1-December 31, 2016 and subsequent years.
- **No data submission** or reporting required from the ASC
- Colonoscopy Claims Detail Reports (CDR) will be periodically uploaded to the QualityNet secure portal throughout the year.

ASC Quality Reporting Program Measures

- ASC 13 Normothermia Outcome
Data submitted for *a Sampling* that meet the denominator criteria.
- ASC 14 Unplanned Anterior Vitrectomy
Data submitted for *All Patients* that meet the denominator criteria.

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

- Data **collection**: January 1 through December 31, 2018
- Data **reporting**: January 1 through **May 15**, 2019

ASC 13: Normothermia Outcome

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

Examples of Sample Size
ASC-9, ASC-10, and ASC-13

Population Per Year 0-900
Yearly Sample Size 63

Population Per Year ≥901
Yearly Sample Size 96

For each measure use the denominator/population to calculate the sample size.

ASC 14: 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

ASC 14: Unplanned Anterior Vitrectomy

Definitions:

Admission: completion of registration upon entry into the facility

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

**ASC 15: Outpatient/Ambulatory Surgery
Consumer Assessment of Healthcare
Providers and Systems (OAS CAHPS)**

The five survey-based measures (ASC-15a-e) are collected via one survey (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; and
- ASC-15e: Recommendation of Facility

Data collection of these measures has been delayed.

ASC 15: OAS CAHPS Survey Website

- Official OAS CAHPS website <https://oascahps.org/>
(This is the official website for news, training and information about the OAS CAHPS survey.)
- The survey has three administration methods:
 - mail-only;
 - telephone-only; and
 - mixed mode (mail with telephone follow-up of non-respondents)
- Toll-free number: 1-866-590-7468 for questions

ASC 15: OAS CAHPS Survey Website

- The survey instrument became available for voluntary use in January 2016 and can be located at <https://oascahps.org/Survey-Materials>
- Pages 12-14 of the guide “Ambulatory Surgery Centers’ Responsibilities”

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

Key Points To Remember

- ASC 8 (influenza vaccination):
 - Need to enroll with CDC NHSN (5 step process),
 - Complete set up (3 step process) and
 - A user's Secure Access Management Services (SAMS) account will be deactivated if they do not log in at all within a 12 month period (1 year). You will receive an email notification.

Key Points To Remember

- ASC 9 and 10 (colonoscopy measures):
 - The 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 for the numerator and denominators in both measures.

Key Points To Remember

- ASC-12: (facility seven-day risk-standardized hospital visit rate after outpatient colonoscopy)
 - no data submission or reporting required from ASCs
 - for ASCs performing colonoscopy, confidential reports include patient level data and will be uploaded to the QualityNet Secure Portal
 - patient (medical record number), date of birth, date of service
 - type of hospital visit (ED, observation, hospital)
 - admitting facility
 - diagnosis code of hospital visit and hospital ID

Key Points To Remember

- ASC 13 and 14 (Normothermia and Unplanned Anterior Vitrectomy)
 - Normothermia Outcome- data submitted for **a Sampling** that meet the denominator criteria.
 - Unplanned Anterior Vitrectomy- data submitted for **All Patients** that meet the denominator criteria.
 - If you do not perform these procedures you **STILL** need to log into www.qualitynet.org secure portal and enter zero for the numerator and denominator in both measures.

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

2018 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment
Final Rule

- Released on November 1, 2017
- <https://s3.amazonaws.com/public-inspection.federalregister.gov/2017-23935.pdf>
- ASC Quality Reporting Program begins on page 922: Section XIV. *Requirements for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program*

2018 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment
Final Rule

- Maintained previous measures ASC 1-4; 8-14
- Removed three measures from the ASCQR Program measure set:
 - ASC-5: Prophylactic Intravenous (IV) Antibiotic Timing,
 - ASC-6: Safe Surgery Checklist Use and,
 - ASC-7: Ambulatory Surgical Center Facility Volume Data on Selected Ambulatory Surgical Center Surgical Procedures.
 Beginning with the CY 2019 payment determination (data collection 2017)
- Delayed implementation of (ASC 15a-e): OAS CAHPS Survey measures beginning with the CY 2020 payment determination (data collection 2018)

2018 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment
Final Rule

- Did not adopt the new measure for the CY 2021 payment determination (data collection 2019) and subsequent years:
 - ASC-16: Toxic Anterior Segment Syndrome (TASS)
- Adopted two new measures for the CY 2022 payment determination and subsequent years:
 - ASC-17: Hospital Visit after Orthopedic Ambulatory Surgery Procedures
 - ASC-18: Hospital Visit after Urology Ambulatory Surgery Procedures
- Expansion of the CMS online tool to allow for batch submission beginning with data submitted during CY 2018 for the CY 2020 payment determination and subsequent years

ASC 17: Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures

- Data is *pulled by CMS* from the Medicare Fee for Service *administrative* claims billed by the center.
- **No data submission** or reporting required from the ASC
- Data collection period for the CY 2022 payment determination would be CY 2019 to 2020 (two calendar years).
- The measure outcome is all-cause, unplanned hospital visits (Emergency Department Visit, Observation Stays, Unplanned Inpatient Admission) within seven days of an orthopedic procedure performed at an ASC.
- **Claims Detail Reports (CDR)** will be uploaded to QualityNet secure portal for facility review.

ASC 18: Hospital Visits after Urology Ambulatory Surgical Center Procedures

- Data is *pulled by CMS* from the Medicare Fee for Service *administrative* claims billed by the center.
- **No data submission** or reporting required from the ASC
- Data collection period for the CY 2022 payment determination would be CY 2019 to 2020 (two calendar years).
- The measure outcome is all-cause, unplanned hospital visits (Emergency Department Visit, Observation Stays, Unplanned Inpatient Admission) within seven days of a urology procedure performed at an ASC.
- **Claims Detail Reports (CDR)** will be uploaded to QualityNet secure portal for facility review.

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

Contact Information

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QUALITY REPORTING OVERVIEW

A quality reporting program for ASCs was finalized by the Centers for Medicare and Medicaid Services (CMS) in the Calendar Year (CY) 2013 OPPIASAC Final Rule with Comment Period (CMS-1525-FG). To meet Ambulatory Surgical Center Quality Reporting (ASCQR) Program requirements, ASCs must meet administrative, data collection, and data submission requirements. ASCs submit data for quality measures by:

- Reporting quality data codes (QDCs) for claims-based measures on the Form CMS-1500 or associated electronic data set.
- Answering Web-based (structural) measure questions.

ASCs that do not meet program requirements for ASC Quality Reporting will receive a 2% reduction in their ASC annual payment update.

Click here to see the published quality data code based data. These are for services provided in CY 2013 and CY 2014. If an ASC chose to suppress data for CY 2013, CY 2014, or both years, a footnote (FN 5) will display. There were 331 requests to suppress these data for one or both years.

SEARCH

QUALITY REPORTING

- Overview**
- Data Reporting
- Safe Surgery Checklist
- Resources

Mark Your Calendars!



Monday March 19, 2018 11AM PT/2PM ET
**DEA CONTROL SUBSTANCES: TRACKING
AND DIVERSION PREVENTION**
Greg Tertes R.Ph

Monday May 21, 2018 11AM PT/ 2PM ET
LIFE SAFETY CODE SURVEY WATCH
John Crowder, PG, CHFM, CFPS

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