



Keeping you “in the know” in the ASC industry

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## CMS Quality Reporting for ASCs

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Ambulatory Surgery Center Association (ASCA)

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## Learning Objectives

- Participants will:
  - Define the quality reporting that is required by Centers for Medicare and Medicaid Services (CMS) for ambulatory surgery centers (ASCs)
  - Identify the different reports and look-up tools available for participants to utilize
  - Discuss future implications in the ambulatory surgery center quality reporting (ASCQR) program

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## CMS Ambulatory Surgical Center Quality Reporting Program

- CMS ASC Quality Reporting Program Quality Measures Specifications Manual
  - **Verify you have the latest versions**
    - **8.0a** 1Q19-4Q19 (released 12/18)
    - **7.0a** 1Q18-4Q18 (released 4/12/18)
- Located @ [www.qualitynet.org](http://www.qualitynet.org) under ASC tab
- Included in this manual:
  - Measure specifications
  - Data collection and submission
  - Quality Data Codes (QDCs)

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## 2019 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment *Final* Rule

- Released on November 2, 2018
- <https://s3.amazonaws.com/public-inspection.federalregister.gov/2018-24243.pdf>
- ASC Quality Reporting Program begins on page 937:  
*Section XIV. Requirements for the Ambulatory  
Surgical Center Quality Reporting (ASCQR) Program*

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## 2019 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment *Final* Rule

- **Removed** a total of **two** measures and **suspended** four measures across CY 2020 and CY 2021 payment determinations:
  - CY 2020 Payment Determination (Data Collection 2018)
    - ASC-8: Influenza Vaccination Coverage Among Healthcare Personnel
  - CY 2021 Payment Determination (Data Collection 2019)
    - ASC-10: Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps-Avoidance of Inappropriate Use

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## 2019 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment *Final* Rule

- **Removed** a total of **two** measures and **suspended** four measures across CY 2020 and CY 2021 payment determinations:

### CY 2021 Payment Determination (Data Collection 2019)

- 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 1- ASC 4: suspended data collection starting January 1, 2019 until further rulemaking)

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## 2019 Medicare Hospital Outpatient Prospective Payment System (OPPS)/ASC Payment *Final* Rule

- ASC-11: Cataracts- Improvement in Patient's Visual Function within 90 days Following Cataract Surgery **remains** voluntary
- Continued delayed implementation of (ASC 15a-e): OAS CAHPS Survey measures
- Change the reporting period for ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy from 1 year to 3 years. For example, for CY 2020 payment determination claims data from January 1, 2016 through December 31, 2018 would be utilized.

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## 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)

**Final:** Beginning January 1, 2019 and subsequent years, for ASC-1, ASC-2, ASC-3 and ASC-4, quality data codes will be **suspended** and **NOT** be reported for Medicare Part B Fee for Service Patients until further rulemaking.

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## 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](http://www.qualitynet.org))**

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

**Final:** Beginning January 1, 2019 and subsequent years, data for ASC-10, will **NOT** be collected January 1 through December 2019 and **NOT** reported January 1 through May 15, 2020.

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## 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](http://www.cdc.gov/nhsn/index.html))~~

- ~~• Data **collection** begins with immunizations for the flu season October 1, 2018 through March 31, 2019~~
- ~~• Deadline for data **reporting** for the 2018-2019 flu season is May 15, 2019.~~

**Final: No data collection in 2018 and subsequent years and no data reporting in 2019 and subsequent years.**

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## ASC Quality Reporting Program Measure Removal Factors (*final*)

- Factor 1: Measure performance among ASCs is so high and unvarying that meaningful distinctions and improvements in performance can no longer be made (“topped-out” measures).
- ~~• Factor 2: Availability of alternative measures with a stronger relationship to patient outcomes. *delete this factor*~~
- Factor 2: Performance or improvement on a measure does not result in better patient outcomes. *add this factor*
- Factor 3: A measure does not align with current clinical guidelines or practice.
- Factor 4: The availability of a more broadly applicable (across settings, populations, or conditions) measure for the topic.
- Factor 5: The availability of a measure that is more proximal in time to desired patient outcomes for the particular topic.
- Factor 6: The availability of a measure that is more strongly associated with desired patient outcomes for the particular topic.
- Factor 7: Collection or public reporting of a measure leads to negative unintended consequences other than patient harm.
- Factor 8: The costs associated with a measure outweigh the benefit of its continued use in the program. *add this factor*

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## ASC Quality Reporting Program- Reason for the Measure Removal

### CY 2020 Payment Determination (Data Collection 2018)

- ASC-8: Influenza Vaccination Coverage Among Healthcare Personnel
  - Reason for Removal: Factor 8: The costs associated with a measure outweigh the benefit of its continued use in the program.

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## ASC Quality Reporting Program- Reason for the Measure Removal

### CY 2021 Payment Determination (Data Collection 2019)

- ASC-10: Endoscopy/Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps-Avoidance of Inappropriate Use
  - Reason for Removal: Factor 8: The costs associated with a measure outweigh the benefit of its continued use in the program.

(Beginning January 1, 2019 and subsequent years, data for ASC-10, will NOT be collected January 1 through December 2019 and NOT reported January 1 through May 15, 2020.)

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## 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.

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## ASC Quality Reporting Program Measures

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

- ***Finalized*** to change the reporting period for ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy from 1 year to 3 years. For example, for CY 2020 payment determination claims data from January 1, 2016 through December 31, 2018 would be utilized.

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## 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](http://www.qualitynet.org))

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

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## 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

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## ASC 13: Normothermia Outcome

### Definitions:

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

### Population Per Year 0-900

Yearly Sample Size 63

### Population Per Year $\geq 901$

Yearly Sample Size 96

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

Beginning January 1, 2019 and subsequent years, data for ASC 10, will NOT be collected January 1 through December 2019 and NOT reported January 1 through May 15, 2020.

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## 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

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## 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

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## 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.

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## 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

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## 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”

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## 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.

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## 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 an urology procedure performed at an ASC.
- **Claims Detail Reports (CDR)** will be uploaded to QualityNet secure portal for facility review.

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## ASC 17 and ASC 18

- Reports will be uploaded to QualityNet secure portal for ASCs to review and will include:
  - patient-level data for each hospital visit
  - the type of visit (emergency department visit, observation stay, or unplanned inpatient admission),
  - the admitting facility, and
  - the principal discharge diagnosis.
- These reports enable ASCs to see their facility specific data.
- General information about the confidential facility-specific reports will be available at: <http://www.qualitynet.org>
- Again, because CMS uses paid, final action Medicare claims, ASCs would **not need** to submit any additional data

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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

Beginning January 1, 2019 and subsequent years, data for ASC-10, will NOT be collected January 1 through December 2019 and NOT reported January 1 through May 15, 2020.

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## 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](http://www.qualitynet.org) secure portal and enter zero for the numerator and denominators in both measures.

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## 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

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## 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](http://www.qualitynet.org) secure portal and enter zero for the numerator and denominator in both measures.

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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](http://www.qualitynet.org); click on ambulatory surgery center and click on email notification
  - Click on listserv registration (right sides of page)
  - Only check ambulatory surgical centers

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## ASCQR Program Measures Summary 2019

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-1	Patient Burn	Claims-Based	No data collection (QDCs) starting January 1, 2019	No reporting starting January 1, 2019	Measures suspended for CY 2021	Medicare Part B fee for service patients
ASC-2	Patient Fall	Claims-Based	No data collection (QDCs) starting January 1, 2019	No reporting starting January 1, 2019	Measures suspended for CY 2021	Medicare Part B fee for service patients
ASC-3	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	Claims-Based	No data collection (QDCs) starting January 1, 2019	No reporting starting January 1, 2019	Measures suspended for CY 2021	Medicare Part B fee for service patients
ASC-4	Hospital Transfer/ Admission	Claims-Based	No data collection (QDCs) starting January 1, 2019	No reporting starting January 1, 2019	Measures suspended for CY 2021	Medicare Part B fee for service patients

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## ASCQR Program Measures Summary 2019

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, 2019	January 1-May 15, 2020	CY 2021	Sampling
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	Measure has been removed starting January 1, 2019	No reporting in 2020		Sampling
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, 2019	January 1-May 15, 2020	CY 2021	Sampling

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## ASCQR Program Measures Summary 2019

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-12	Facility Seven-Day Risk Standardized Hospital Visit Rate after Outpatient Colonoscopy	Administrative Claims-Based	Paid Medicare Fee for Service Claims January 1, 2016 - December 31, 2018 and subsequent years	Paid Medicare Fee for Service Administrative Claims Preview Reports were available for review on QualityNet	CY 2020	Paid Medicare Fee for Service Claims
ASC-13	Normothermia	Web-based via QualityNet secure portal	January 1-December 31, 2019	January 1-May 15, 2020	CY 2021	Sampling
ASC-14	Unplanned Anterior Vitrectomy	Web-based via QualityNet secure portal	January 1-December 31, 2019	January 1-May 15, 2020	CY 2021	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

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## ASCQR Program Measures Summary 2019

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-17	Hospital Visit After Orthopedic Ambulatory Surgery Procedures	Administrative Claims Based	Paid Medicare Fee for Service Claims January 1, 2019 - December 31, 2020	Paid Medicare Fee for Service Administrative Claims	CY 2022	Paid Medicare Fee for Service Claims
ASC-18	Hospital Visit After Urology Ambulatory Surgery Procedures	Administrative Claims Based	Paid Medicare Fee for Service Claims January 1, 2019 - December 31, 2020	Paid Medicare Fee for Service Administrative Claims	CY 2022	Paid Medicare Fee for Service Claims

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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)

- **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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## ASC Quality Reporting Program Tools and Resources

<http://www.qualityreportingcenter.com/asc/resources/>

Program Resources	
<a href="#">Successful Reporting in the ASCQR Program: A Step-by-Step Guide for New Facilities</a>	Essential information for those new to the ASCQR Program
<a href="#">ASCQR Reference Checklist</a>	Summary of the current year's program requirements
<a href="#">ASCQR Questions &amp; Answers Right Now Tool</a>	Immediate feedback to your questions and a searchable database of past responses
<a href="#">ASCQR Frequently Asked Questions</a>	FAQs about the ASCQR Program
<a href="#">ASC ListServe Registration</a>	Email sign-up to receive the most up-to-date information and education
<a href="#">ASCs on QualityNet</a>	Program information and access to data submission portal and reports
<a href="#">CMS Extraordinary Circumstances Extension/Exemption Guidelines and Form</a>	Please visit <a href="http://QualityNet.org">QualityNet.org</a>
<a href="#">ASC Contact Change Form</a>	Update your facility's contact information
<a href="#">Ambulatory Surgical Center Quality Reporting Program 101</a>	Resources for new quality reporting professionals
<a href="#">National Healthcare Safety Networks Registration</a>	Register to enter data in for the ASC-8 Influenza vaccination measure

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## ASCQR Program: Public Reporting of Facility Specific Data

- Currently ASC 1-12 Facility Specific Data submitted for calendar year **2016** was publicly reported in December 2017.
- CMS reports ASC data on *Hospital Compare*, the CMS website for Medicare beneficiaries and the general public at <https://www.medicare.gov/hospitalcompare/asc-ambulatory-surgical-measures.html>
- Facility, state, and national data is displayed.
- ASC 1-12 Facility Specific Data submitted for calendar year **2017** will be publicly reported February 2019

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## ASC Quality Reporting Program- ASC Facility Compare

- <https://www.qualityreportingcenter.com/asc/data/compare/>
- ASC Facility Compare allows the research and comparison of ASCQR Program quality measure information for the past payment year.
- Allows searches by city and state or ZIP code to compare data for all facilities.
- Additionally, comparisons of up to three individually selected facilities, regardless of city, state, or ZIP code, can be made by entering a facility's National Provider Identifier (NPI).
- Data uploaded to the ASC Facility Compare page are taken directly from the *Hospital Compare* website.

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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 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

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## References

- ▶ Federal Register / Vol. 76, No. 230 / Wednesday, November 30, 2011 / Rules and Regulations. Available at <http://www.gpo.gov/fdsys/pkg/FR-2011-11-30/pdf/2011-28612.pdf>
- ▶ 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>
- ▶ Federal register/ Vol. 81, No. 219/ Monday, November 14, 2016/ Rules and Regulations. Available at <https://www.gpo.gov/fdsys/pkg/FR-2016-11-14/pdf/2016-26515.pdf>
- ▶ Federal register/ Vol. 82, No. 217/ Monday, November 13, 2017/ Rules and Regulations. Available at <https://www.gpo.gov/fdsys/pkg/FR-2017-11-13/pdf/2017-23932.pdf>
- ▶ Federal register/ Vol. 83, No. 225/ Wednesday, November 21, 2018/ Rules and Regulations. Available at <https://www.govinfo.gov/content/pkg/FR-2018-11-21/pdf/2018-24243.pdf>
- ▶ ASC Quality Collaboration Implementation Guide, Version 5.0, December 2017. Available at <http://ascquality.org/documents/ASC-QC-Implementation-Guide-5.0-December-2017.pdf>
- ▶ CMS ASC Quality Reporting Program Quality Measures Specifications Manuals, Versions 7.0a, 8.0 Available at [www.qualitynet.org](http://www.qualitynet.org)
- ▶ QualityNet at [www.qualitynet.org](http://www.qualitynet.org)
- ▶ QualityReportingCenter at [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com)
- ▶ National Healthcare Safety Network [www.cdc.gov/nhsn/](http://www.cdc.gov/nhsn/)

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## Contact Information

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## Available on eSupport

- [Compliance/Quality Reporting/Overview](#)



[HOME](#) [ESUPPORT](#) ▾ [BLOG](#) ▾ [FORUM](#) [ACCOUNT](#) ▾

### 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) 2012 OPPI/ASC Final Rule with Comment Period (CMS-1525-FC). 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

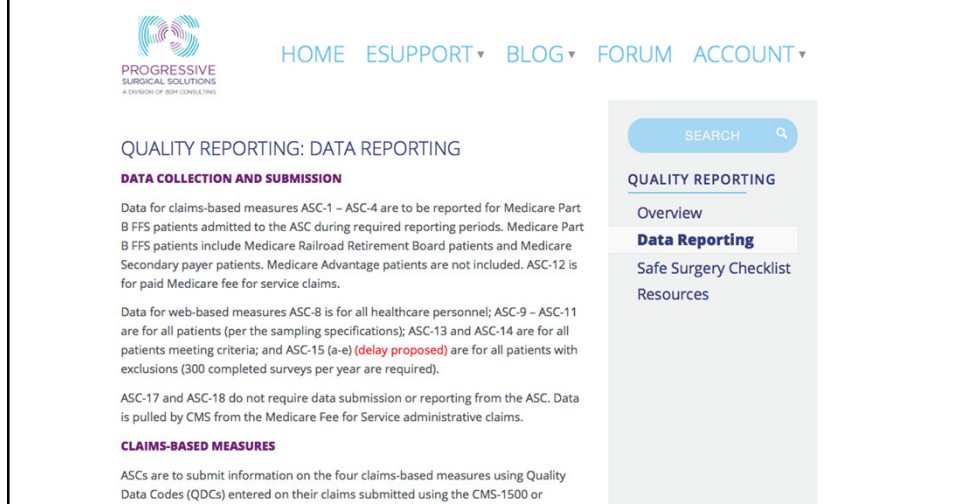
#### Overview

[Data Reporting](#)  
[Safe Surgery Checklist](#)  
[Resources](#)

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## Available on eSupport

- Compliance/Quality Reporting/Data Reporting



The screenshot shows the Progressive Surgical eSupport website. At the top, there is a navigation menu with links for HOME, ESUPPORT, BLOG, FORUM, and ACCOUNT. The main heading is 'QUALITY REPORTING: DATA REPORTING'. Below this, there is a section titled 'DATA COLLECTION AND SUBMISSION' which contains two paragraphs of text. The first paragraph discusses claims-based measures (ASC-1 to ASC-4) and Medicare Part B FFS patients. The second paragraph discusses web-based measures (ASC-8 to ASC-15) and reporting requirements. A third paragraph states that ASC-17 and ASC-18 do not require data submission. Below this is a section titled 'CLAIMS-BASED MEASURES' which states that ASCs submit information on four claims-based measures using Quality Data Codes (QDCs). On the right side of the screenshot, there is a search bar and a sidebar menu with options for 'Overview', 'Data Reporting', 'Safe Surgery Checklist', and 'Resources'.

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## Join The Community!

- For the resources referenced today and SO MUCH MORE...
- Request your free web demo today [www.progressivesurgicalsolutions.com/esupport](http://www.progressivesurgicalsolutions.com/esupport)
- Email us at [info@pss4asc.com](mailto:info@pss4asc.com)
- Or call us! (855) 777-4272



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## Mark Your Calendars! 60 minute Half Time Webinars in 2019:

February 22, 2019  
**LIFE SAFETY CODE COMPLIANCE  
BLUEPRINT**

John L. Crowder, Jr, PG, CHFM, CFPS

April 26, 2019  
**DEVELOPING THE LEADER WITHIN:  
PART I**

Laura Baldwin, RN  
Terre Thomas

June 28, 2019  
**DEVELOPING THE LEADER WITHIN:  
PART II**

Laura Baldwin, RN  
Vanessa Sindell, MSN, BSN, RN

August 30, 2019  
**STERILIZATION BEST PRACTICES**

Phenelle Segal, RN, CIC

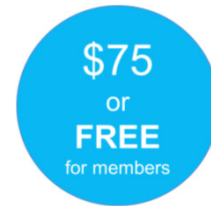
October 25, 2019  
**DOCUMENTATION BEST PRACTICES**

Crissy Benze, MSB, BSN, RN

December 20, 2019  
**INFORMED CONSENT IN THE ASC**

Debra Stinchcomb, MBA, BSN, RN, CASC  
Will Miller

Coming soon! For a limited time, register  
for the entire 2019 Half Time series  
for \$250 (\$200 savings)



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## Mark Your Calendars! FREE 20 minute Huddle Webinars in 2019:

January 28, 2019  
**CMS QUALITY REPORTING  
UPDATE FOR ASCS**

Gina Throneberry, MBA, RN, CNOR, CASC

March 25, 2019  
**HOW TO TALK TO SURVEYORS**

Vanessa Sindell, MSN, BSN, RN

May 20, 2019  
**CULTURE OF SAFETY**

Crissy Benze, MSN, BSN, RN

July 29, 2019  
**CULTURAL SENSITIVITY**

Debra Stinchcomb, MBA, BSN, RN, CASC

September 30, 2019  
**MEDICATION SHORTAGES AND  
HOW TO HANDLE THEM**

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