

# CMS Quality Reporting for ASCs

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## 2022 Medicare Hospital Outpatient Prospective Payment System (OPPS/ASC) Final Rule

- Released on November 2, 2021

<https://www.govinfo.gov/content/pkg/FR-2021-11-16/pdf/2021-24011.pdf>

- ASC Quality Reporting Program begins on page 418 Section XVI. *Requirements for the Ambulatory Surgical Center Quality Reporting (ASCQR) Program*

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## 2022 Medicare Hospital Outpatient Prospective Payment System (OPPS/ASC) Final Rule

- New (and Previous) Quality Measures
  - Adopt ASC-20: *COVID-19 Vaccination Coverage Among Health Care Personnel (HCP) Measure*
  - Resume data collection for ASC-1, ASC-2, ASC-3 and ASC-4
  - Require ASC-11: *Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery*
  - Require ASC-15a-e: *Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey-Based Measures*

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## QualityNet

- New website address- <https://qualitynet.cms.gov>  
*Using Internet Explorer to access QualityNet is **not** recommended. It is suggested to use FireFox, Chrome or Edge.*
- Two parts of QualityNet- “non-secure” and “secure”
  - Non-secure:
    - Subscribe to email updates and listserv: Each facility should have at least two people signed up for the QualityNet email notifications.
    - Download the Specifications Manual
    - Information about the measures, public reporting, data submission and other resources
  - Secure: QualityNet Secure Portal has officially been retired and replaced by the Hospital Quality Reporting (HQR) Secure Portal.

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## CMS Ambulatory Surgical Center Quality Reporting Program

- Ambulatory Surgical Center Quality Reporting Specifications Manual
  - **Verify you have the latest version**
    - **11.0** 1Q22-4Q22
- Located @ <https://qualitynet.cms.gov>
- Scroll down and click “Ambulatory Surgical Centers” box
- Included in this manual:
  - Background and requirements
  - Measure information
  - Sampling specifications
  - Tools and resources

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## Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) and Security Official Registration

- QualityNet Secure Portal has officially been retired and replaced by the Hospital Quality Reporting (HQR) Secure Portal.
  - *Even though ASCs are not hospitals, they are included under the category of hospital quality reporting.*
- <https://hqr.cms.gov/hqrng/login> (The ASC may need to use Google Chrome for this application as problems have been reported with the platform through other browsers.)
- To log into HQR, a HARP account and a security official or basic user must be created.
- *Educational material for registering for HARP and becoming a security official is located at <https://qualitynet.cms.gov/getting-started>*

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## ASC Quality Reporting Program (ASCQR) Requirements

In the 2022 ASC Quality Reporting Program, there are eight measures which must be reported for facilities to avoid a reduction in the following year's Medicare reimbursement.

Three Web Based Measures:

- ASC-9
- ASC-13
- ASC-14

Four Claims Based Measures:

- ASC-12
- ASC-17
- ASC-18
- ASC-19

Reported through National Healthcare Safety Network (NHSN):

- ASC-20

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## ASC Quality Reporting Program (ASCQR) Requirements

\*\* ASCs that have fewer than 240 Medicare claims (primary plus secondary payer) per year during a reporting period for a payment determination year are not required to participate in the ASCQR Program for the subsequent reporting period for that subsequent payment determination year. This includes all program requirements, both claims-based measures and measure data entered via a web-based tool.

For example, an ASC with fewer than 240 Medicare claims in 2020 would not be required to submit 2021 data in 2022 which impacts the calendar year (CY) 2023 payment determination.

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## WEB BASED MEASURES

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### ASC Quality Reporting Program Measures

#### ASC-9: Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients

- Web Based Reporting via HQR Secure Portal (<https://hqr.cms.gov/hqrng/login>)
- If an ASC does perform colonoscopies, select the green “Start Measure” icon next to ASC-9. *Remember: Any area with red asterisks indicates a mandatory field.*
- The numerator and denominator must be completed.
- If an ASC does not perform colonoscopies, select the box under the measure name and description that states, *“Please enter zeros for this measure as I have no data to submit.”*

Data collection: January 1-December 31, 2021

Data submission: January 1-May 16, 2022 (May 15, 2022, is a Sunday)

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## ASC Quality Reporting Program Measures

### ASC-13: Normothermia Outcome

- Data submitted for **a sampling** that meets the denominator criteria
- Web Based Reporting via HQR Secure Portal (<https://hqr.cms.gov/hqrng/login>)
- If an ASC **does** perform procedures related to this measure, select the green "Start Measure" icon next to ASC-13. *Remember: Any area with red asterisks indicates a mandatory field.*
- The numerator and denominator must be completed.
- If an ASC **does not** perform procedures related to this measure, select the box under the measure name and description that states, "Please enter zeros for this measure as I have no data to submit."

Data collection: January 1-December 31, 2021

Data submission: January 1-May 16, 2022 (May 15, 2022, is a Sunday)

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## Examples of Sample Size ASC-9 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.

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## ASC Quality Reporting Program Measures

### ASC-14: Unplanned Anterior Vitrectomy

- Data submitted for ***all patients*** that meet the denominator criteria
- Web Based Reporting via HQR Secure Portal (<https://hqr.cms.gov/hqrng/login>)
- If an ASC ***does*** perform procedures related to this measure, select the green “Start Measure” icon next to ASC-14. *Remember: Any area with red asterisks indicates a mandatory field.*
- The numerator and denominator must be completed.
- If an ASC ***does not*** perform procedures related to this measure, select the box under the measure name and description that states, “Please enter zeros for this measure as I have no data to submit.”

Data collection: January 1-December 31, 2021

Data submission: January 1-May 16, 2022 (May 15, 2022, is a Sunday)

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## Key Points To Remember

- ASC-9, ASC-11 (presently voluntary) ASC-13 and ASC-14:
  - Active Security Official to access HQR Secure Portal
  - Recommended to have two security officials if possible
  - Sign in to HQR Secure Portal frequently (every 60 days) to keep the account active

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## CLAIMS BASED MEASURES

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### ASC Quality Reporting Program Measures

#### ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy

- Data is pulled by CMS from the Medicare Fee for Service claims previously submitted by the hospital that the patient visits within seven days of the colonoscopy for January 1, 2016-December 31, 2018, and subsequent years.
    - *Claims submitted between January 1, 2018-December 24, 2019, and July 1-December 31, 2020, for CY 2022 payment determination*
    - *Claims submitted between January 1, 2019-December 31, 2021, for CY 2023 payment determination*
  - **No data submission** or reporting required from the ASC
  - Claims Detail Reports (CDR) and Facility-Specific Reports (FSR) will be made available to facilities via the HQR Secure Portal prior to public reporting.
- \*\* Information regarding this measure and timelines for the CDRs and FSRs is located at <https://qualitynet.cms.gov/asc/measures>.

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## ASC Quality Reporting Program Measures

### ASC-17: Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures

- 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.
- Data is pulled by CMS from the Medicare Fee for Service claims previously submitted by the hospital that the patient visits within seven days of the orthopedic procedure.
  - *Claims submitted between January 1-December 24, 2019, and July 1-December 31, 2020, for CY 2022 payment determination*
  - *Claims submitted between January 1, 2021-December 31, 2022, for CY 2024 payment determination*
- **No data submission** or reporting required from the ASC
- Claims Detail Reports (CDR) and Facility-Specific Reports (FSR) will be made available to facilities via the HQR Secure Portal prior to public reporting.

\*\* Information regarding this measure and timelines for the CDRs and FSRs is located at <https://qualitynet.cms.gov/asc/measures>.

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## ASC Quality Reporting Program Measures

### ASC-18: Hospital Visits after Urology Ambulatory Surgical Center Procedures

- 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.
- Data is pulled by CMS from the Medicare Fee for Service claims previously submitted by the hospital that the patient visits within seven days of the urology procedure.
  - *Claims submitted between January 1-December 24, 2019, and July 1-December 31, 2020, for CY 2022 payment determination*
  - *Claims submitted between January 1, 2021-December 31, 2022, for CY 2024 payment determination*
- **No data submission** or reporting required from the ASC
- Claims Detail Reports (CDR) and Facility-Specific Reports (FSR) will be made available to facilities via the HQR Secure Portal prior to public reporting.

\*\* Information regarding this measure and timelines for the CDRs and FSRs is located at <https://qualitynet.cms.gov/asc/measures>.

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## ASC Quality Reporting Program Measures

### ASC-19: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers

- The measure outcome is all-cause, unplanned hospital visits (Emergency Department Visit, Observation Stays, Unplanned Inpatient Admission) within seven days of a general procedure performed at an ASC.
  - Data is pulled by CMS from the Medicare Fee for Service claims previously submitted by the hospital that the patient visits within seven days of the general surgery procedure.  
*- Claims submitted between January 1, 2021-December 31, 2022, for CY 2024 payment determination*
  - **No data submission** or reporting required from the ASC
  - Claims Detail Reports (CDR) and Facility-Specific Reports (FSR) will be made available to facilities via the HQR Secure Portal prior to public reporting.
- \*\* Information regarding this measure and timelines for the CDRs and FSRs is located at <https://qualitynet.cms.gov/asc/measures>.

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## ASC-20: COVID-19 VACCINATION COVERAGE AMONG HEALTHCARE PERSONNEL

Data is reported via the National Healthcare Safety  
Network (NHSN)

\*\*The collection and submission of data for ASC-20 is **NOT** affected by either of the two COVID-19 vaccine mandates (OSHA and CMS). This presentation will **not** discuss these two mandates.

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## NHSN/Secure Access Management Services (SAMS)

**To prepare for the COVID 19 vaccination status measure into NHSN, two things need to occur:**

1. The facility must have an active NHSN account.  
**AND**
2. The facility must have a NHSN Facility Administrator with a current SAMS security profile.

### Key Roles

- NHSN Facility Administrator (this doesn't have to be the Center Administrator):
  - The person enrolling the facility in NHSN
  - Only person who can activate additional components for a facility
  - Has add/edit/delete data, users and users' access
  - Has authority to nominate/join groups for data sharing
  - Only person who can re-assign the role of the NHSN Facility Administrator to another user
  - There is only one NHSN Facility Administrator per facility
- Users:
  - Rights are determined by the NHSN Facility Administrator: view data, data entry and data analysis, custom & all rights
  - May be given administrative rights

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## NHSN/Secure Access Management Services (SAMS)

For information regarding NHSN Facility Enrollment and registering with SAMS:

- NHSN Facility Enrollment & Set-Up Checklist  
<https://www.cdc.gov/nhsn/pdfs/asc/ASC-EnrollmentChecklist.pdf>

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## Important Information Regarding NHSN/SAMS

\*\*If facilities need assistance with registering and enrolling in NHSN, please email [NHSN@cdc.gov](mailto:NHSN@cdc.gov) and include “**Registering and Enrolling for ASC COVID Reporting**” in the subject line.

- *The facilities’ CMS Certification Number (CCN) will need to be provided in the email. The facility can look-up the CCN using the following link <https://qcor.cms.gov/main.jsp>.*

\*\*NHSN’s primary method of contacting facilities is through email. It is critical to review the contact information for each Primary Component that a facility is enrolled. Additionally, NHSN highly recommends that facilities include an additional user with administrator “rights”.

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## ASC Quality Reporting Program Measures

### ASC-20 COVID-19 Vaccination Coverage Among Health Care Personnel (HCP)

- Numerator: Number of HCP eligible to work in the ASC for at least one day during the reporting period who received a complete vaccination course against COVID-19
- Denominator: Number of HCP eligible to work in the ASC for at least one day during the reporting period, excluding persons with contraindications that are described by the CDC
  - Three required categories of HCP (fourth category is optional):
    1. Employee on facility payroll (regardless of clinical responsibility or patient contact)
    2. Licensed independent practitioners, e.g., physicians (MDs, DO), advance practice nurses and physician assistants who are affiliated with the facility who do not receive a direct paycheck from the facility
    3. Adult students/trainees and volunteers who do not receive a direct paycheck from the facility
    4. Other contract personnel (optional)

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## ASC Quality Reporting Program Measures

### ASC-20 COVID-19 Vaccination Coverage Among Health Care Personnel (HCP)

- Begin reporting data beginning January 1, 2022, for the CY 2024 payment determination
- Report the measure through the CDC NHSN web-base surveillance system
- Collect the numerator and denominator for **at least one, self-selected week during each month of the reporting quarter** and submit the data before the **quarterly** deadline
- The CDC would calculate a single quarterly rate for each ASC by taking the average from the three submission periods for that quarter. CMS would publicly report each quarterly rate as calculated by the CDC.
- Data collection forms, instructions, resources and FAQs are available at <https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html>

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## COVID-19 Vaccination Reporting

<https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html>

September 2021

**Healthcare Personnel COVID-19 Vaccination Cumulative Summary**  
(CDC 57.219, Rev 5)

2 Pages  
\*Required for scoring

Facility ID# \_\_\_\_\_  
\*Vaccination type: COVID-19 \_\_\_\_\_  
\*Week of data collection (Monday – Sunday): \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\*Date Last Modified: \_\_\_\_/\_\_\_\_/\_\_\_\_

	Cumulative Vaccination Coverage			
	All Care HCP*	All HCP**	Employee HCP *Employees (staff on facility payroll)	Non-Employee HCP * Licensed independent practitioners, physician assistants, nurse practitioners, & advanced practice nurses * "Other Contract Personnel"
1. * Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection				
2. * Cumulative number of HCP in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere since December 2020				
2.1. * Only dose 1 of COVID-19 vaccine				
2.2. * Dose 1 and dose 2 of Pfizer/BioNTech COVID-19 vaccine				
2.3. * Only dose 1 of Moderna primary COVID-19 vaccine				
2.4. * Dose 1 and dose 2 of Janssen COVID-19 vaccine				
2.5. * Dose 1 and dose 2 of AstraZeneca COVID-19 vaccine				
2.6. * Other COVID-19 vaccine series, unspecified manufacturer				

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## COVID-19 Vaccination Reporting

<https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html>

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## ASC-20 Reporting Deadlines

Quarterly Data Submission	Deadline
Quarter 1 2022 (January 1 – March 31, 2022)	August 15, 2022
Quarter 2 2022 (April 1 - June 30, 2022)	November 15, 2022
Quarter 3 2022 (July 1 – September 30, 2022)	February 15, 2023
Quarter 4 2022 (October 1 – December 31, 2022)	May 15, 2023
Quarter 1 2023 (January 1 – March 31, 2023)	August 15, 2023

<https://qualitynet.cms.gov/asc/ascqr/resources>

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## Webinar Regarding ASC-20

The next Ambulatory Surgical Center Quality Reporting (ASCQR) Program webinar, *Successful Reporting for the COVID-19 Vaccination Among Healthcare Personnel (HCP) Measure*, is **Wednesday, February 2, 2022, at 2:00 p.m. Eastern Time (ET)**.

The **Outpatient Quality Program Systems and Stakeholder Support Team** will discuss the program requirements for the new COVID-19 measure and walk participants through the process of registering, enrolling and reporting data. Experts from the Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN) will be available to answer your questions.

*This presentation has been approved for one Continuing Education (CE) Unit.*

- Registration is required. To register  
<https://www.qualityreportingcenter.com/en/ascqr-program/2022/asc-02022022/>

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## 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 HQR Secure Portal	January 1-December 31, 2021	January 1-May 16, 2022	CY 2023	Sampling
ASC-11 (presently voluntary)	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery	Web-Based via HQR Secure Portal	January 1-December 31, 2021	January 1-May 16, 2022	CY 2023	Sampling
ASC-12	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	Administrative Claims-Based	Paid Medicare Fee for Service Claims January 1, 2019-December 31, 2021		CY 2023	Paid Medicare Fee for Service Claims
ASC-13	Normothermia Outcome	Web-Based via HQR Secure Portal	January 1-December 31, 2021	January 1-May 16, 2022	CY 2023	Sampling
ASC-14	Unplanned Anterior Vitrectomy	Web-Based via HQR Secure Portal	January 1-December 31, 2021	January 1-May 16, 2022	CY 2023	All Patients Meeting the Denominator Criteria

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## ASCQR Program Measures Summary

Number	Measure Title	Type of Measure	Data Collection Dates	Data Reporting Dates	Payment Determination Year	Measure Applies To
ASC-17	Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures	Administrative Claims-Based	Paid Medicare Fee for Service Claims January 1, 2021-December 31, 2022		CY 2024	Paid Medicare Fee for Service Claims
ASC-18	Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures	Administrative Claims-Based	Paid Medicare Fee for Service Claims January 1, 2021-December 31, 2022		CY 2024	Paid Medicare Fee for Service Claims
ASC-19	Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers	Administrative Claims-Based	Paid Medicare Fee for Service Claims January 1, 2021-December 31, 2022		CY 2024	Paid Medicare Fee for Service Claims
ASC-20	COVID-19 Vaccination Coverage Among Healthcare Personnel	Web-Based via NSHN	January 1-December 31, 2022	January 1-December 31, 2022	CY 2024	HCP that meets the measure definition

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## ASC Quality Reporting Program Measures (Final)

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

- These measures were suspended in 2019.
- Data collection will resume for these measures beginning with the **CY 2023 reporting period/CY 2025 payment determination** and subsequent years.
- Data would be submitted via the HQR secure portal.
- **These measures will now apply to ALL ASC PATIENTS, not just Medicare Fee-For-Service patients.**

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## ASC Quality Reporting Program Measures (Final)

### ASC-11 Cataracts- Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

- Assesses the percentage of patients aged 18 years and older who had cataract surgery and had improvement in visual function achieved within 90 days following the cataract surgery
- Voluntarily reported since 2015
- Administration of two visual function patient questionnaires- one completed by the patient prior to surgery and the other completed by the patient during the 90-day period after surgery
- Data submission via a CMS web-based tool
- **Reporting beginning with the CY 2025 reporting period/CY 2027 payment determination (was 2023/2025) and subsequent years**

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## ASC Quality Reporting Program Measures (Final)

### ASC-15 (a-e) Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey

*The five 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
- Official OAS CAHPS website <https://oascahps.org/>  
(This is the official website for news, training and information about the OAS CAHPS survey.)

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## ASC Quality Reporting Program Measures (Final)

### ASC-15 (a-e) Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey

- **Voluntary** reporting begins with CY 2024 reporting period.
- **Mandatory** reporting begins with CY 2025 reporting period/CY 2027 payment determination.
- The survey now contains 34 questions (2022 version) instead of 37 questions (2021 version).
  - 22 questions related to the patient, the facility, communication, and patient reported outcomes
  - 12 demographic questions
  - ASCs may add up to 15 supplemental questions
- Need to have 200 completed surveys (previously proposed 300 surveys)

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## ASC Quality Reporting Program Measures (Final)

### ASC-15 (a-e) Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey

#### Current administration methods:

- Mail-only;
- Telephone-only; and
- Mixed mode (mail with telephone follow-up)

#### Additional administrative modes added in 2022:

- Web with mail follow-up;
- Web with telephone follow-up

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## ASC Quality Reporting Program Measures (Final)

### ASC-15 (a-e) Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey

- A CMS-approved survey vendor will be required for survey administration (currently 17).
- ASCs will authorize and register a CMS-approved vendor on the survey website, <https://oascahps.org/>
- Vendors will need to submit data by the specified submission deadlines.

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## ASC Quality Reporting Program Measures and Topics for Future Consideration

- Potential adoption of the total hip arthroplasty/total knee arthroplasty measure
- Potential adoption of a pain management measure
- Health equity
- Future of Digital Quality Measurement (dQMs)

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## Questions?

- For ASC Quality Reporting Program Questions:  
<https://qualitynet.cms.gov/>

OR via phone (866) 800-8756 Monday through Friday,  
7am-6pm Eastern Time

- If facilities need assistance with registering and enrolling in NHSN, please email [NHSN@cdc.gov](mailto:NHSN@cdc.gov)

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## Contact Information

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