



Program Information, Tips, News, and System Updates: Ambulatory Surgical Center Quality Reporting (ASCQR) Program

Outpatient Quality Program Systems
and Stakeholder Support Team

Learning Objectives

At the conclusion of this program, attendees will be able to:

- ✓ Describe the Next Generation platform.
- ✓ List the steps necessary to enter web-based measures.
- ✓ Describe the new system updates and how it will affect the program moving forward.

Next Generation

Next Generation Changes

The changes include the following:

- A redesigned, interactive format based on stakeholder insight
- Consistency across programs
- A universal platform across multiple programs

Entering Your Data

Log Into Secure Portal

www.qualitynet.org

The screenshot shows the QualityNet website homepage. At the top, there is a search bar with the text "Search QualityNet" and a magnifying glass icon. To the right of the search bar are navigation links for "Quality Programs" and "Help". The "Log into Secure Portal" button is highlighted with a red rectangular box. To its right is a "Register" button. Below the navigation bar is a blue banner with the text "Welcome to QualityNet! Your one-stop shop for CMS Quality Programs." and two buttons: "Subscribe to Email Updates" and "Log into QualityNet Secure Portal". To the right of the banner is a "Recent News" section with two news items: "Dec 10, 2019 Coming Soon: CMS Plans to Streamline QualityNet Account Management and Access" and "Dec 2, 2019 ESRD QIP Final PSRs and PSCs for PY 2020 Now Available Online". Below the banner is a section titled "I am looking for quality information associated with..." with six icons representing different facility types: "Hospitals - Inpatient", "Hospitals - Outpatient", "Ambulatory Surgical Centers", "PPS-Exempt Cancer Hospitals", "ESRD Facilities", and "Inpatient Psychiatric Facilities".

Choose Your Destination

CMS.gov | QualityNet

Choose Your QualityNet Destination

Please select your QualityNet destination to reach the correct login screen for your QualityNet portal.

Select Your QualityNet Destination ▾

- Select Your QualityNet Destination
- Secure File Transfer
- CMS Data Element Library
- End-Stage Renal Disease Quality Reporting System
- Quality Improvement Organizations
- QIES Business Intelligence Center
- Hospital Quality Reporting**

A federal government website managed by the Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244



Sign In

Log In to QualityNet *** Required Field**

Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit.

*** User ID**

*** Password**

*** Security Code**

CANCEL

SUBMIT

? Help

Start/Complete New User Enrollment

[Forgot your password?](#)

[Trouble with your Security Code?](#)

[Need to register for a QualityNet account?](#)

Click On The New Icon

Select the new *View the new Hospital Quality Reporting* icon

The screenshot shows the CMS.gov Hospital Quality Reporting interface. At the top left is the CMS.gov logo and "Hospital Quality Reporting". At the top right is "ABC Surgery" and a "Change Organization" button. Below this is a yellow navigation bar with "My Tasks", "My Reports", and "Help" with a dropdown arrow. The main content area is titled "Hospital Quality Reporting: My Tasks" and contains a paragraph of text. On the right side, there is a callout box with the text "View the new Hospital Quality Reporting" and "Access the new and improved Hospital Quality Reporting functions." A blue icon of a right-pointing arrow with a curved tail is next to the text. A red arrow points from the yellow navigation bar to this icon.

Select Data Entry

Select the *Data Entry* option

ABC Surgery Center [Change Organization](#)

Home

Welcome to Hospital Quality Reporting

The cards below display the features available to you. Please select the card that aligns with your task.

- Public Reporting**
Preview and analyze measure benchmarks for your facility.
- eCQM**
Track status and validation of EHR patient files.
- Program Credit Report**
Review how uploaded data applies toward program credit.
- Data Entry**
Enter data for program credit.

My Tasks Page
Return to the new HQR My Tasks page.

Choose Your Option

There are two options for data submission: File Upload and Data Form

The screenshot displays the 'ABC Surgery Center' web application. At the top left, the title 'ABC Surgery Center' is visible, and at the top right, there is a 'Change Organization' button. Below the title bar is a navigation menu with 'Home' selected. A 'Web-based Measures' tab is active, leading to a page titled 'Web-based Measures'. The main content area asks 'How would you like to submit your data?' and offers two choices: 'File Upload' (marked with a red circle '1') and 'Data Form' (marked with a red circle '2'). The 'File Upload' option includes a cloud icon with an upward arrow and the text 'Upload files for program credit here.' The 'Data Form' option includes a list icon and the text 'Enter data for program credit here.'

Upload Your Data

1. Select the *File Upload* icon
- You can select:**
2. The *Select Files* icon, or
 3. Use the *Drag Files* option

The screenshot displays the 'ABC Surgery Center' web interface. At the top right, there is a 'Change Organization' button. Below the header, a 'Home' tab is visible. The main content area features a 'Web-based Measures' section. A red circle with the number '1' highlights the 'Web-based Measures' text. Below this, there are two buttons: 'File Upload' (highlighted with a red box) and 'Data Form'. A red circle with the number '2' points to the 'Select Files' button in the search bar area. Below the search bar, a dashed box contains a cloud icon with an upward arrow and the text 'Drag files here to upload', with a red circle and the number '3' pointing to it. A red arrow also points from the 'Select Files' button to the 'Drag files here to upload' area.

Data Form Option

Select the *Launch Data Form*.

The screenshot displays the ABC Surgery Center web application. At the top left, the text 'ABC Surgery Center' is visible, and at the top right, there is a 'Change Organization' button. Below the header, a 'Home' tab is active. The main content area features a 'Web-based Measures' section with two buttons: 'File Upload' and 'Data Form'. The 'Data Form' button is highlighted with a red rectangular border. Below this section, a message states: 'You have selected Data Form submission. You can choose a different method at any time.' Further down, under the heading 'Select the Data Form', there is a button labeled 'ASC' and a button labeled 'Launch Data Form' with a green right-pointing arrow. A red arrow points to the 'Launch Data Form' button.

Adding Zeros

1. Check the PY
To enter data you can:
2. Begin by Selecting the green *Start Measure* icon, or
3. Select the box to enter zeros

The screenshot shows the ABC Surgery Center dashboard. At the top right is a 'Change Organization' button. Below the header is a 'Home' tab. The main content area is titled 'ASC Web-Based Measures' and includes a description of these measures and a link to the Specification Manual. Below this, there are fields for 'National Provider Identification', 'Submission Period', 'With Respect to Reporting Period', and 'Last Updated'. To the right of these fields is a 'Payment Year' dropdown menu set to '2021', with a red circle '1' around it and an arrow pointing to it. Below the submission information, there is a section for 'ASC-9' with a description: 'Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients'. This section has a 'Start Measure' button (a green button with a play icon) circled in red with a '2', and a checkbox labeled 'Please enter zeros for this measure as I have no data to submit' which is also circled in red with a '3'. Below the ASC-9 section is a section for 'ASC-11 (Voluntary)' with a description: 'Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery'. This section also has a 'Start Measure' button and a checkbox for entering zeros.

No Measure Data Available

ASC Web-Based Measures

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.
*For Paperwork Reduction Act Notice, see Specification Manual.

National Provider Identification: 1234567890
Submission Period: 1/1/2020 - 5/15/2020
With Respect to Reporting Period: 01/01/2019 - 12/31/2019
Last Updated: 3/25/2020 12:00 PM

Payment Year
2021

Current Submission Period: Open

ASC-9

Endoscopy/Polyp Surveillance: Appropriate Patients

Please enter zeros for this measure as I have no data to submit

Start Measure

No patients meet criteria for measure: ASC-9 [Close](#)

Please confirm that you have no data to submit for this measure: ASC-9. Zeros will be entered in the absence of any data.

ASC-11 (Voluntary)

Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

Please enter zeros for this measure as I have no data to submit

Start Measure

ASC-13

Normothermia Outcome

Please enter zeros for this measure as I have no data to submit

Start Measure

Data Entry Result

Verify a successful submission with the check mark

ASC

ASC Web-Based Measures

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.
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National Provider Identification: 1234567890
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With Respect to Reporting Period: 01/01/2019 - 12/31/2019
Last Updated: 3/25/2020 12:00 PM

Payment Year
2021

Current Submission Period: Open

✓ **ASC-9 (Done)** ← [Edit Measure](#)

Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Score for this measure

n/a	0	0
	Numerator	Denominator

Higher score is better

Adding Data

If your ASC performs the procedures, you will select the green *Start Measure* icon to enter your data.

ABC Surgery Center Change Organization

Home

ASC Web-Based Measures

Web-Based measures assess characteristics linked to the capacity of the provider to deliver quality healthcare. CMS believes reporting Web-Based measures information will encourage facilities to improve the quality of care provided to all patients.
*For Paperwork Reduction Act Notice, see Specification Manual.

National Provider Identification: 1234567890 Payment Year: 2021
Submission Period: 1/1/2020 - 5/15/2020
With Respect to Reporting Period: 01/01/2019 - 12/31/2019
Last Updated: 03/25/2020 12:00 PM

Current Submission Period: **Open**

ASC-9

Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Please enter zeros for this measure as I have no data to submit

Start Measure

ASC-11 (Voluntary)

Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

Please enter zeros for this measure as I have no data to submit

Start Measure

Entering Your Data

The numerator and denominator fields are required fields.

Once you have entered Your data, select the *Save & Return* icon

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

* Indicates required measure

Please enter zeros for this measure as I have no data to submit

National Provider Identification:
1234567890

Submission Period:
1/1/2020 - 5/15/2020

With Respect to Reporting Period:
01/01/2019 - 12/31/2019

Last Updated:
3/25/2020 12:00 PM

* Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report. (Numerator)

* All patients aged 50 to 75 years of age receiving screening colonoscopy without biopsy or polypectomy. (Denominator)

What was your facility's Total Population?

What was your facility's sample size?

What was your facility's sampling frequency?

Monthly

Quarterly

Not Sampled

N/A



Partial Submissions

If you have only partially submitted data, you will not be able to select the *I'm ready to submit* icon.

The screenshot displays a user interface for data submission. It features two sections, each for a different measure:

- ASC-13**: Normothermia Outcome. A green button labeled "Start Measure" is visible. Below the measure name is a checkbox with the text "Please enter zeros for this measure as I have no data to submit".
- ASC-14**: Unplanned Anterior Vitrectomy. A green button labeled "Start Measure" is visible. Below the measure name is a checkbox with the text "Please enter zeros for this measure as I have no data to submit".

At the bottom right of the interface, a grey button labeled "I'm ready to submit" with a checkmark icon is highlighted with a red border, indicating it is disabled.

Entering Data

Enter the:

1. Numerator
2. Denominator
3. Total population
(voluntary data point)
4. Sample size
(voluntary data point)
5. Sampling frequency
(auto-selected, N/A)

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

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

What was your facility's Total Population?

What was your facility's sample size?

What was your facility's sampling frequency?

Monthly

Quarterly

Not Sampled

N/A



Correcting Errors

Any errors may be corrected by re-entering the data.

* Surgery patients with a body temperature equal to or greater than 96.8 Fahrenheit/36 Celsius recorded within fifteen minutes of Arrival in PACU?
(Numerator)
Ex. 0,1,2,3,....,9999999999
Numerator cannot be greater than the denominator

63

* All patients, regardless of age, undergoing surgical procedures under general or neuraxial anesthesia of greater than or equal to 60 minutes duration
(Denominator)
Ex. 0,1,2,3,....,9999999999
Numerator cannot be greater than the denominator

60

What was your facility's Total Population?

400

What was your facility's sample size?

63

What was your facility's sampling frequency?

Monthly

Quarterly

Not Sampled

N/A

Another Measure

1. Enter the Numerator
2. Enter the Denominator
3. Click on *Save & Return*

* All cataract surgery patients who had an unplanned anterior vitrectomy.
(Numerator)

* All cataract surgery patients. (Denominator)

Retain a Copy

You should:

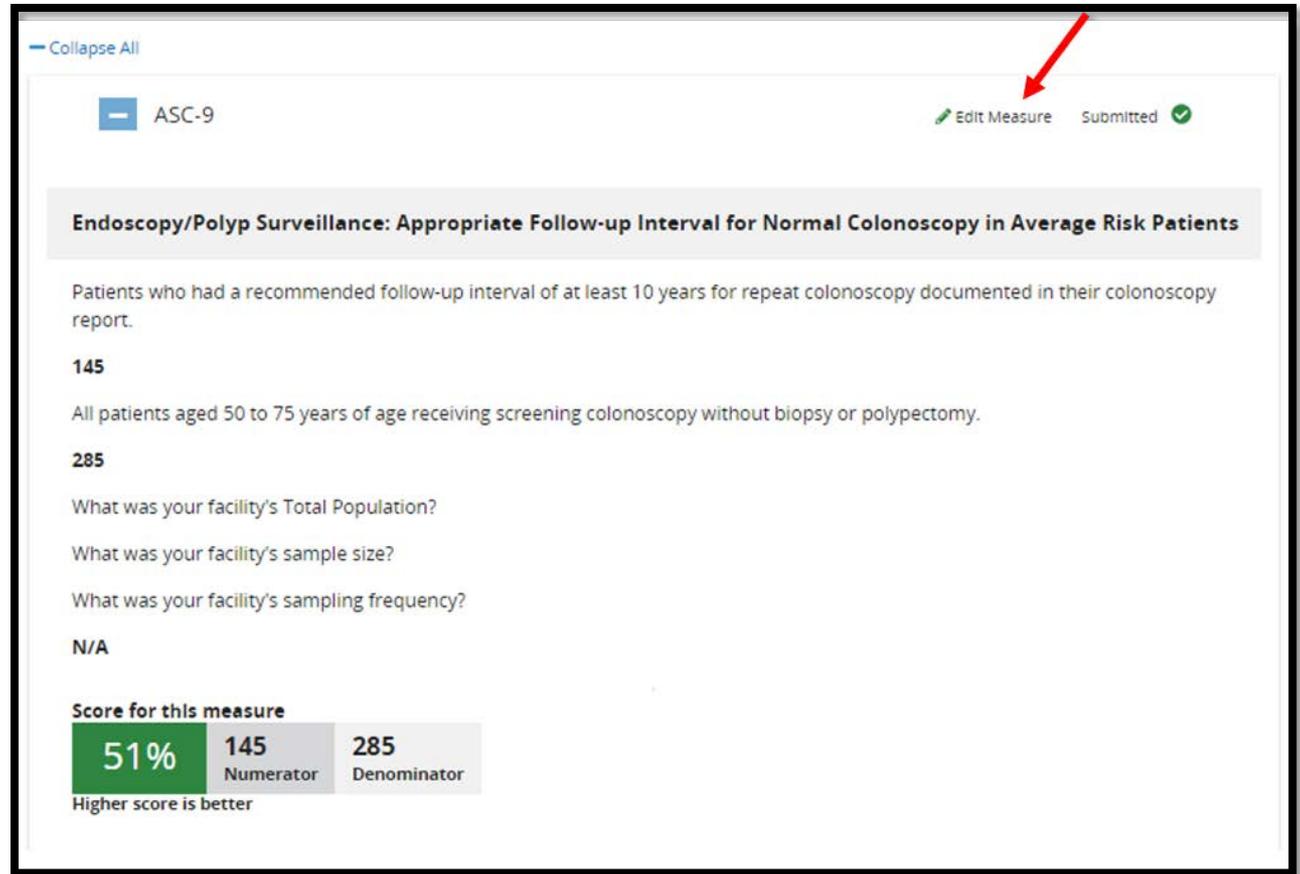
1. See the green check mark indicating a successful submission.
2. Use the data export feature or a screen shot for your records.

The screenshot displays the 'ASC Web-Based Measures' dashboard. At the top, it shows the provider's National Provider Identification (1234567890), submission period (1/1/2020 - 5/15/2020), reporting period (01/01/2019 - 12/31/2019), and last updated time (3/25/2020 12:00 PM). A 'Payment Year' dropdown menu is set to 2021. A prominent green checkmark icon is accompanied by the text 'All Measures Successfully Submitted!', which is highlighted by a red rectangular box. To the right, a blue 'Export Data' button is indicated by a red arrow. Below this, a list of measures is shown, each with a plus icon and a 'Submitted' status with a green checkmark. A red bracket on the right side of the list groups these four items: ASC-9, ASC-11 (Voluntary), ASC-13, and ASC-14.

Measure ID	Status
ASC-9	Submitted ✓
ASC-11 (Voluntary)	Submitted ✓
ASC-13	Submitted ✓
ASC-14	Submitted ✓

Further Edits

You can still edit any data by selecting the *Edit Measure* icon



— Collapse All

— ASC-9 Edit Measure Submitted ✓

Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients

Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report.

145

All patients aged 50 to 75 years of age receiving screening colonoscopy without biopsy or polypectomy.

285

What was your facility's Total Population?

What was your facility's sample size?

What was your facility's sampling frequency?

N/A

Score for this measure

51%	145 Numerator	285 Denominator
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Higher score is better

Summary

- Log into *QualityNet Secure Portal*.
- Access the new Hospital Quality Reporting link, not Manage Measures.
- Partial submissions will not cross over into *QualityNet*.
 - The *I'm ready to submit* icon should be blue.
- After you submitted data, ensure the system reflects the green check mark.
 - Print or save a copy for your records.

Upcoming Deadline

Web-based measures must be reported by the next submission deadline of May 15, 2020.

- Measures are reported annually via the *QualityNet Secure Portal*.
 - Use data from the reporting period of January 1—December 31, 2019.
- Data to be entered using your existing credentials.
 - Early submission is recommended.
- Data includes the measures: ASC-9, ASC-11 (voluntary), ASC-13, and ASC-14.

Checking Your Submission

- The Provider Participation Report (PPR) is no longer available.
- You can access the Lookup tool on the www.QualityReportingCenter.com website
 - Check the Date Last Updated.
- You will see:
 - **Yes**, if data is submitted for *all* measures.
 - **No**, if you have additional data to submit.

Home Page

QualityReportingCenter.com

QUALITY REPORTING CENTER

Events Calendar Inpatient Outpatient **ASC** SNF VBP

Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist hospitals, inpatient psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting.

Inpatient	Outpatient	ASC
Inpatient Overview	Outpatient Overview	ASC Overview
Tools and Resources	Tools and Resources	Tools and Resources
Hospital Contact Change Form	CCN Look-up Tools	CCN/NPI Look-up Tools

Data Dashboard

QUALITY REPORTING CENTER

Events Calendar Inpatient Outpatient **ASC** SNF VBP

ASCQR Program

Welcome to the Centers for Medicare & Medicaid Services (CMS) Ambulatory Surgical Center Quality Reporting (ASCQR) Program. The ASCQR Program exists to promote higher quality, more efficient health care for Medicare beneficiaries through measurement. Under this program, quality data reporting requirements for care rendered in the ASC setting were implemented starting with claims submitted for services beginning October 1, 2012.

If you are new to the program or would like to learn more, please take a moment to review our website.

- **For more information about the ASCQR Program**, visit the [ASC Program Information page](#).
- **For videos and resources on reporting and participating in the ASC Program**, visit the [ASC 101 page](#).
- **For specific measure reporting guidelines and tools**, visit the [ASC Tools and Resources page](#).

As the national support contractor for the ASCQR Program, the team at HSAG is available to answer questions or supply any additional information you may need. We invite you to join the Ambulatory Surgical Center ListServe at qualitynet.org to receive notifications about program developments. We are committed to offering quality service in a timely and effective manner. Please contact us at qgrsupport@hsag.com or call us toll-free at [866.800.8756](tel:866.800.8756) from 7 a.m. to 6 p.m. ET with any comments, suggestions, or concerns you may have.

Choose Lookup Tools

The screenshot shows the ASCQR Program website interface. At the top, there is a navigation bar with the following tabs: Events Calendar, Inpatient, Outpatient, ASC (highlighted in yellow), and SNF VBP. On the left side, there is a sidebar menu with the following items: ASCQR Program (highlighted in blue), Program Information, ASCQR 101, ASCQR Program Tools and Resources, Upcoming Events, Archived Events, and Continuing Education. Below the sidebar menu, a dropdown menu is open, listing the following options: Data Dashboard, ASC Compare Tool, ASC Lookup Tools (indicated by a red arrow), Medicare Procedure Price Lookup, National and State Rate Data, and Lookup Tool Archives. The main content area displays the title "ASCQR Program" and a welcome message: "Welcome to the Centers for Medicare & Medicaid Services (CMS) Ambulatory Surgical Center Quality Reporting (ASCQR) Program. The ASCQR Program exists to promote higher quality, more efficient health care for Medicare beneficiaries through measurement. Under this program, quality data reporting requirements for care rendered in the ASC setting were implemented starting with claims submitted for services beginning October 1, 2012." Below the welcome message, there is a paragraph: "If you are new to the program or would like to learn more, please take a moment to review our website." followed by a bulleted list of links: "For more information about the ASCQR Program, visit the [ASC Program Information page](#)." "For videos and resources on reporting and participating in the ASC Program, visit the [ASC 101 page](#)." "For specific measure reporting guidelines and tools, visit the [ASC Tools and Resources page](#)." Below the list, there is a paragraph: "As the national support contractor for the ASCQR Program, the team at HSAG is available to answer questions or supply any additional information you may need. We invite you to join the Ambulatory Surgical Center ListServe at qualitynet.org to receive notifications about program developments. We are committed to offering quality service in a timely and effective manner. Please contact us at qgrsupport@hsag.com or call us toll-free at [866.800.8756](tel:866.800.8756) from 7 a.m. to 6 p.m. ET with any comments, suggestions, or concerns you may have."

Enter Your Facility

ASC Facility and CCN Lookup

ASC CCN (third digit is a "C")

OR

ASC NPI

Enter your facility's National Provider Identifier (NPI) or CMS Certification Number (CCN) into the field above.

Note: Data updated March 18, 2020



Healthcare Quality Information System (HCQIS)
Access Roles and Profile (HARP)

HARP

Overview

HARP:

- Provides a secure portal providing a single location for users.
- Allows registration through *QualityNet*
 - Uses two-factor authentication.
- Users will log in to the new reporting portal.
- Currently does not have a release date.

More Changes

Public Reporting:

- There are plans to launch a simplified online experience:
 - New Provider Data Catalog
 - Hospital Compare becomes Medicare Compare
 - Streamlined experience to access information

Resources

- To contact the Support Team Helpline:
 - 866.800.8756
- To access today's presentation:
 - www.qualityreportingcenter.com, under the Archived Events tab
- To ask a question via the *QualityNet* Q&A tool:
 - https://cmsqualitysupport.service-now.com/qnet_qa
- To access *QualityNet*:
 - www.qualitynet.org

Questions



References

- **Slides 6-24:** <https://www.qualitynet.org/>.
Accessed on February 3, 2020.
- **Slides 28-31:**
<https://www.qualityreportingcenter.com/en/>.
Accessed on February 3, 2020.

Disclaimer

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