



The Calendar Year (CY) 2024 Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Payment System Final Rule

Discussing the Impacts to the Ambulatory Surgical Centers Quality Reporting (ASCQR) Program

Speakers

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By the end of the presentation, participants will be able to:

- Locate the Calendar Year (CY) 2024 Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Payment System Final Rule in the *Federal Register*.
- List the ASCQR Program finalized proposals included in the CY 2024 OPPS/ASC Payment System Final Rule.
- Recall submission deadlines as they relate to the finalized proposals.

Locating the Final Rule



- Publication in the [*Federal Register*](#) (88 FR 82012)
- [PDF version](#)
 - ASC Quality Reporting Program: Section XV, page 82012.
- [Correction Notice](#)



ASCQR Program Finalized Proposals

Anita J. Bhatia, PhD, MPH
ASCQR Program Lead, CMS

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Finalized Decisions Related to Proposals to Existing Measures

Measures With Proposed Modifications



Proposed modification beginning with CY 2024 reporting period/CY 2026 payment determination to:

- COVID–19 Vaccination Coverage Among Healthcare Personnel (HCP) measure (COVID-19 Vaccination Among HCP);
- Endoscopy/Polyp Surveillance: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients (Colonoscopy Follow-Up Interval) measure;
- Cataracts: Improvement in Patient’s Visual Function within 90 Days Following Cataract Surgery (Cataracts Visual Function) measure.

COVID–19 Vaccination Coverage Among HCP



Proposed to:

- Modify the term “Up to Date” to meet the Center for Disease Control and Prevention’s (CDC’s) set of criteria
- Update the numerator to specify timeframes which an HCP would be up to date.
- Publicly report the modified version beginning with the Fall 2024 refresh, or as soon as technically feasible (quarterly rate as calculated by the CDC).

Access the [ASCQR Specifications Manual](#) for details.

Finalized as proposed

Colonoscopy Follow-Up Interval



Proposed to:

- Amend the measure’s denominator language by replacing the phrase “aged 50 years” with the phrase “aged 45 years” to read “all patients aged 45 years to 75 years receiving screening colonoscopy without biopsy or polypectomy.”

Access the [ASCQR Specifications Manual](#) for details.

Finalized as proposed

Proposed to limit allowable survey collection instrument use to:

- The National Eye Institute Visual Function Questionnaire-25 (NEI VFQ-25)
- The Visual Functioning Patient Questionnaire (VF-14)
- The Visual Functioning Index Patient Questionnaire (VF-8R)

Finalized as proposed

*This measure remains voluntary

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Finalized Proposals to Measure Set Additions

Proposed adoption of two measures:

- ASC Facility Volume Data on Selected ASC Surgical Procedure (ASC Procedure Volume)
- Risk-Standardized Patient Reported Outcome-Based Performance Measure (PRO-PM) Following Elective Primary Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA) in the ASC Setting (THA/TKA PRO-PM)

Proposed to re-adopt with modification to collect data on selected surgical procedures in eight categories

Not finalized

- Additional analysis will be conducted when evaluating the categories most frequently performed.
- Methodology will be reassessed.
- How the data will be publicly displayed will be reconsidered.
- Further consideration in future rulemaking as there is significant evidence linking volume to quality of care.

Proposed to adopt beginning with:

- **Voluntary** reporting for CYs 2025 and 2026 reporting periods
- **Mandatory** reporting beginning with CY 2027 reporting period/CY 2030 payment determination
- A three-year gap between the reporting period and payment determination due to the delay from time of procedure and the reported results

- Clinical improvement measured by using one of the two validated joint-specific PRO instruments:
 - Hip dysfunction and Osteoarthritis Outcome Score for Joint Replacement (HOOS, JR) for completion by THA recipients
 - Knee injury and Osteoarthritis Outcome Score for Joint Replacement (KOOS, JR) for completion by TKA recipients

Measure Specifics (cont.)



- Pre-operative assessment data collected from 90 to 0 days before surgery.
- Post-operative data collected 300 to 425 days after surgery.
 - ASCs would submit these assessments for at least 45 percent of eligible procedures

Data sources for calculation:

1. PRO data
2. Claims data
3. Medicare enrollment and beneficiary data
4. United States Census Bureau survey data

Pre-operative mental health scores from one of two instruments:

1. Patient-Reported Outcomes Measurement Information System (PROMIS)-Global Mental Health subscale
2. Veterans RAND 12-Item Health Survey (VR-12) Mental Health subscale

Details on measure methodology can be found on the [CMS.gov website](https://www.cms.gov).

Finalized Modification



- CMS will delay mandatory reporting by one year.
 - **Voluntary** reporting would begin with the CY 2025 reporting period and continue through CY 2027 reporting period
 - **Mandatory** reporting will begin with the CY 2028 reporting period for the CY 2031 payment determination
- The additional year will allow time to monitor progress.

Finalized Reporting Dates



THA/TKA: Pre-Operative and Post Operative Periods for Reporting

| Reporting Cycle | Reporting Period | Pre-Procedure Data Collection | Pre-Procedure Data Submission Date | Post-Procedure Data Collection | Post-Procedure Data Submission | Preview/ Public Reporting |
|----------------------------|--------------------|-------------------------------|------------------------------------|--------------------------------|--------------------------------|---------------------------|
| Voluntary Reporting | | | | | | |
| CY 2025 | Jan 1–Dec 31, 2025 | Oct 3, 2024– Dec 31, 2025 | May 15, 2026 | Oct 28, 2025– Mar 1, 2027 | May 15, 2027 | CY 2028 |
| CY 2026 | Jan 1–Dec 31, 2026 | Oct 3, 2025– Dec 31, 2026 | May 15, 2027 | Oct 28, 2026– Feb 29, 2028 | May 15, 2028 | CY 2029 |
| CY 2027 | Jan 1–Dec 31, 2027 | Oct 3, 2026– Dec 31, 2027 | May 15, 2028 | Oct 28, 2027– Feb 28, 2029 | May 15, 2029 | CY 2030 |
| Mandatory Reporting | | | | | | |
| CY 2028 | Jan 1–Dec 31, 2028 | Oct 3, 2027– Dec 31, 2028 | May 15, 2029 | Oct 28, 2028– Feb 28, 2030 | May 15, 2030 | CY 2031 |

All deadlines occurring on a Saturday, Sunday, or legal holiday, or on any other day all or part of which is declared to be a non-workday for Federal employees by statute or Executive order would be extended to the first day thereafter. Public reporting of information on facility results in the Mandatory Reporting periods would occur in CY 2031 for CY 2028 reporting period/CY 2031 payment determination.



Reviewing Program Measures

Karen VanBourgondien, RN, BSN
Outpatient Quality Program Systems and
Stakeholder Support Team

Web-Based Measures: HQR



Calendar Year 2025 Payment Determination

| Measure | Reporting Period | Submission Period |
|--|----------------------|----------------------|
| ASC-1: Patient Burn | Jan 1 – Dec 31, 2023 | Jan 1 – May 15, 2024 |
| ASC-2: Patient Fall | | |
| ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant | | |
| ASC-4: All Cause Hospital Transfer/Admission | | |
| ASC-9: Endoscopy/Polyp Surveillance: Appropriate Follow-up Interval for Normal Colonoscopy in Average Risk Patients | | |
| ASC-11: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery (Voluntary) | | |
| ASC-13: Normothermia Outcome | | |
| ASC-14: Unplanned Anterior Vitrectomy | | |

Web-Based Measures: HQR



Calendar Year 2026 Payment Determination

| Measure | Reporting Period | Submission Period |
|--|----------------------|----------------------|
| ASC-1: Patient Burn | Jan 1 – Dec 31, 2024 | Jan 1 – May 15, 2025 |
| ASC-2: Patient Fall | | |
| ASC-3: Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant | | |
| ASC-4: All Cause Hospital Transfer/Admission | | |
| ASC-9: Colonoscopy Follow-up Interval | | |
| ASC-11: Cataracts Visual Function (Voluntary) | | |
| ASC-13: Normothermia Outcome | | |
| ASC-14: Unplanned Anterior Vitrectomy | | |

Finalized modifications
begin for ASC-9 and ASC-11

For the ASC-1 through ASC-4 measures, the:

- Denominator is “All ASC Admissions.”
- Definition of **Admission** is “Completion of registration upon entry into the facility.”

Access the [ASCQR Specifications Manual](#) for details.

Calendar Year 2025 Payment Determination

| Measure | Reporting Period | Submission Deadline |
|--|---------------------------|---|
| ASC-20: COVID-19 Vaccination Coverage Among Healthcare Personnel | Q1: Jan 1 – Mar 31, 2023 | <input checked="" type="checkbox"/> August 15, 2023 |
| | Q2: Apr 1 – Jun 30, 2023 | <input checked="" type="checkbox"/> November 15, 2023 |
| | Q3: Jul 1 – Sept 30, 2023 | <input checked="" type="checkbox"/> February 15, 2024 |
| | Q4: Oct 1 – Dec 31, 2023 | May 15, 2024 |

Calendar Year 2026 Payment Determination

| Measure | Reporting Period | Submission Deadline |
|--|-----------------------|---------------------|
| ASC-20: COVID-19 Vaccination Coverage Among Healthcare Personnel | Jan 1 – Mar 31, 2024 | August 15, 2024 |
| | Apr 1 – Jun 30, 2024 | November 15, 2024 |
| | Jul 1 – Sept 30, 2024 | February 15, 2025 |
| | Oct 1 – Dec 31, 2024 | May 15, 2025 |

Finalized modification
begins for ASC-20

Claims-Based Measures



Calendar Year 2025 Payment Determination

| Measure | Reporting Period |
|--|----------------------------|
| ASC-12: Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy | Jan 1, 2021 – Dec 31, 2023 |
| ASC-17: Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures | Jan 1, 2022 – Dec 31, 2023 |
| ASC-18: Hospital Visits after Urology Ambulatory Surgical Center Procedures | Jan 1, 2022 – Dec 31, 2023 |
| ASC-19: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers | Jan 1, 2022 – Dec 31, 2023 |

No changes proposed for these measures

Survey Measures: This Year



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

Voluntary Reporting begins with CY 2024 Reporting Period

| Measure | Reporting Period | Submission Deadline |
|---|----------------------|---------------------|
| ASC-15a: About Facilities and Staff | Jan 1 – Mar 31, 2024 | July 2024 |
| ASC-15b: Communication About Procedure | Apr 1 – Jun 30, 2024 | October 2024 |
| ASC-15c: Preparation for Discharge and Recovery | Jul 1 – Sep 30, 2024 | January 2025 |
| ASC-15d: Overall Rating of Facility | Oct 1 – Dec 31, 2024 | April 2026 |
| ASC-15e: Recommendation of Facility | | |

No changes proposed for these measures

Survey Measures: Next Year



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

Mandatory Reporting begins with CY 2027 Payment Determination

| Measure | Reporting Period | Submission Deadline |
|---|----------------------|---------------------|
| ASC-15a: About Facilities and Staff | Jan 1 – Mar 31, 2025 | July 2025 |
| ASC-15b: Communication About Procedure | Apr 1 – Jun 30, 2025 | October 2025 |
| ASC-15c: Preparation for Discharge and Recovery | Jul 1 – Sep 30, 2025 | January 2026 |
| ASC-15d: Overall Rating of Facility | Oct 1 – Dec 31, 2025 | April 2026 |
| ASC-15e: Recommendation of Facility | | |

No changes proposed

[Click Here](#) for more information about OAS CAHPS

Finalized Reporting Dates



THA/TKA PRO-PM Measure Pre-Operative and Post Operative Periods for Reporting

| Reporting Cycle | Reporting Period | Pre-Procedure Data Collection | Pre-Procedure Data Submission Date | Post-Procedure Data Collection | Post-Procedure Data Submission | Preview/ Public Reporting |
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| CY 2027 | Jan 1–Dec 31, 2027 | Oct 3, 2026– Dec 31, 2027 | May 15, 2028 | Oct 28, 2027– Feb 28, 2029 | May 15, 2029 | CY 2030 |
| Mandatory Reporting | | | | | | |
| CY 2028 | Jan 1–Dec 31, 2028 | Oct 3, 2027– Dec 31, 2028 | May 15, 2029 | Oct 28, 2028– Feb 28, 2030 | May 15, 2030 | CY 2031 |

- Stay informed by signing up for communications by subscribing to email updates on the [QualityNet website](#).
- Have active HQR and NHSN system accounts to submit data.
 - Assign more than one person as a Security Official for HQR
 - Add at least two additional users besides your Facility Administrator for NHSN
- Keep your accounts active for HQR and NHSN systems.
- Submit data for all required measures by the designated submission deadlines.

Program Resources

- **ASCQR Program Support Team**

 866.800.8756

- **Center for Clinical Standards and Quality (CCSQ) Service Center**

 866.288.8912

 qnetsupport@cms.hhs.gov

- **Secure Access Management Services (SAMS) Help Desk**

 877.681.2901

- **National Healthcare Safety Network (NHSN)**

 nhsn@cdc.gov

Acronyms



| | | | |
|-----------------|--|------------------|---|
| ASC | Ambulatory Surgical Center | NHSN | National Healthcare Safety Network |
| ASCQR | Ambulatory Surgical Center Quality Reporting | OAS CAHPS | Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems |
| CCN | CMS Certification Number | OPPS | Outpatient Perspective Payment System |
| CDC | Centers for Disease Control and Prevention | PROMIS | Patient-Reported Outcomes Measurement Information System |
| CMS | Centers for Medicare & Medicaid Service | PRO-PM | Patient-Reported Outcome-Based Performance Measure |
| CY | Calendar Year | Q | Quarter |
| HCP | healthcare personnel | THA/TKA | Total Hip Arthroplasty/Total Knee Arthroplasty |
| HOOS, JR | Hip dysfunction and Osteoarthritis Outcome Score for Joint Replacement | VF | Visual Functioning |
| HQR | Hospital Quality Reporting | VFQ | Visual Functioning Questionnaire |
| KOOS, JR | Knee injury and Osteoarthritis Outcome Score for Joint Replacement | VR | Veterans RAND |

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