



Quality Reporting Cram Session: Web-Based Measures, Initial Data Review, and the Reconsideration Process

Reneé Parks RN, BSN Project Coordinator, FMQAI

Upcoming Program Dates

- Claims-based measure reporting using Quality Data Codes (QDCs) will be ongoing for calendar year 2013.
- The web-based measures reporting window will be July 1, 2013 August 15, 2013.
- Proposed changes to the ASCQR Program are scheduled for display July 2 and will be available for comment for a period of 60 days.







Continuing Education Available

- This presentation is approved for 1.0 continuing education credit to be provided by CE Provider #50-747 for the following professions:
 - Florida Board of Nursing
 - Florida Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling
 - Florida Board of Nursing Home Administrators
 - Florida Council of Dietetics
 - Florida Board of Pharmacy
- To receive your certificate of completion, send your name, state, license number, and profession to theron@fmqai.com for Florida professionals; for other state professionals, submit your certificate to your state licensing board.





Objectives

After this presentation, attendees will be able to:

- Identify the web-based measures
- Understand the submission process, including how to locate and report the measures
- Describe the process for filing for an Annual Payment Update (APU) Reconsideration
- View the preliminary national data for the program





Web-Based Measures

• ASC-6: Safe Surgery Checklist Use

• ASC-7: ASC Facility Volume Data on Selected ASC Surgical Procedures







ASC-6: Safe Surgery Checklist Use

- Annual Data Submission Period:
 July 1, 2013 August 15, 2013
- Data Collection Time Period:
 January 1, 2012 December 31, 2012
- Web-based tool located on QualityNet: <u>www.qualitynet.org</u>





ASC-6 Description

- The use of a safe surgery checklist for surgical procedures that includes safe surgery practices during each of the three critical perioperative periods:
 - The period prior to the administration of anesthesia
 - The period prior to skin incision
 - The period prior to the patient leaving the operating room





Examples for Safe Surgery Practices*

First critical point (period prior to administering anesthesia)	Second critical point (period prior to skin incision)	Third critical point (period of closure of incision and prior to patient leaving the operating room)
 Verbal confirmation of patient identity Mark surgical site Check anesthesia machine/medication Assessment of allergies, airway and aspiration risk 	 Confirm surgical team members and roles Confirm patient identity, procedure and surgical incision site Administration of antibiotic prophylaxis within 60 minutes before incision Communication among surgical team members of anticipated critical events Display of essential imaging as appropriate 	 Confirm the procedure Complete count of surgical instruments and accessories Identify key patient concerns for recovery and management of the patient

^{*}Safe Surgery Checklist items are not limited to the examples listed in this table.

Ambulatory Surgical Center Quality Reporting Program Quality Measures Specifications Manual, Version 2.0; https://www.qualitynet.org/





Safe Surgery Checklist Example



THIS CHECKLIST IS NOT INTENDED TO BE COMPREHENSIVE ADDITIONS AND MODIFICATIONS TO FIT LOCAL PRACTICE ARE ENCOURAGED.

Source: World Health Organization; http://www.who.int/patientsafety/safesurgery/en/





ASC-7: ASC Facility Volume Data on Selected ASC Surgical Procedures

- Annual Data Submission Period:
 - July 1, 2013 August 15, 2013
- Designated Time Period:
 January 1, 2012 December 31, 2012
- Web-based tool on QualityNet





ASC-7 Description

- The aggregate count of selected surgical procedures
- Most ASC procedures fall into one of six categories: Gastrointestinal, Eye, Nervous System, Musculoskeletal, Skin, and Genitourinary
- All payer data





ASC-7 Categories and HCPCS Table

Procedure Category	Corresponding HCPCS Codes	
Gastrointestinal	40000 through 49999, G0104, G0105, G0121, C9716,	
	C9724, C9725, and 0170T	
Eye	65000 through 68999, G0186, 0124T, 0099T, 0017T,	
	0016T, 0123T, 0100T, 0176T, 0177T, 0186T, 0190T,	
	0191T, 0192T, 76510, and 0099T	
Nervous System	61000 through 64999, G0260, 0027T, 0213T, 0214T,	
	0215T, 0216T, 0217T, 0218T, and 0062T	
Musculoskeletal	20000 through 29999, 0101T, 0102T, 0062T, 0200T, and	
	0201T	
Skin	10000 through 19999, G0247, 0046T, 0268T, G0127,	
	C9726, and C9727	
Genitourinary	50000 through 58999, 0193T, and 58805	

Source: CY 2014 OPPS/ASC Final Rule; http://www.gpo.gov/fdsys/pkg/FR-2012-11-15/pdf/2012-26902.pdf





ASC-7

- Aggregate counts include all payers and all procedures billed.
- There will be one numerical entry for each organ system.
- The count will include all procedures from January 1, 2012 December 31, 2012.







Process for Entering Web-Based Measures

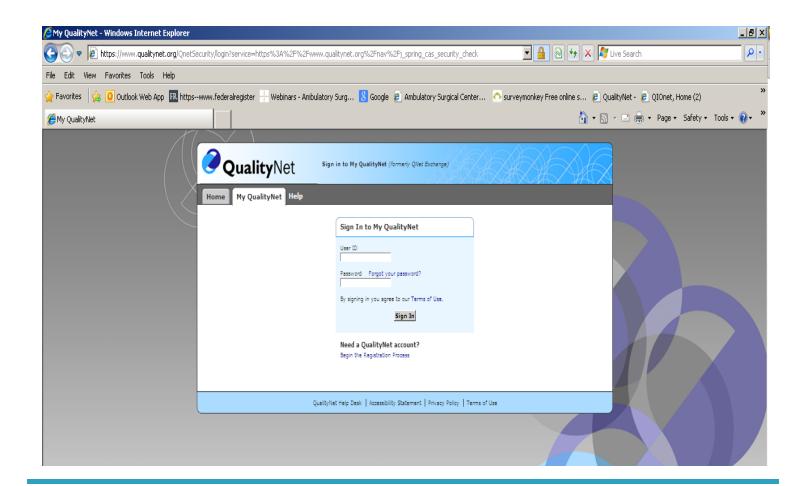
- Have an active Security Administrator
- Collect the aggregate number for each organ system prior to logging in to the secure webbased tool on QualityNet
- Log in to My QualityNet
- Enter the data for ASC-6 and ASC-7







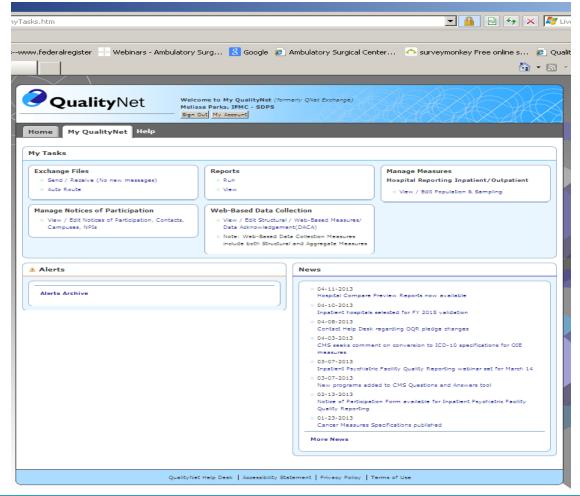
My QualityNet Account







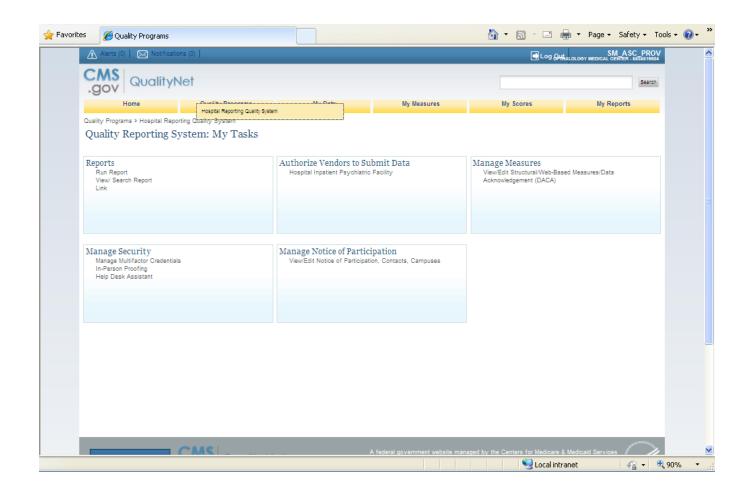
My QualityNet: My Tasks Page







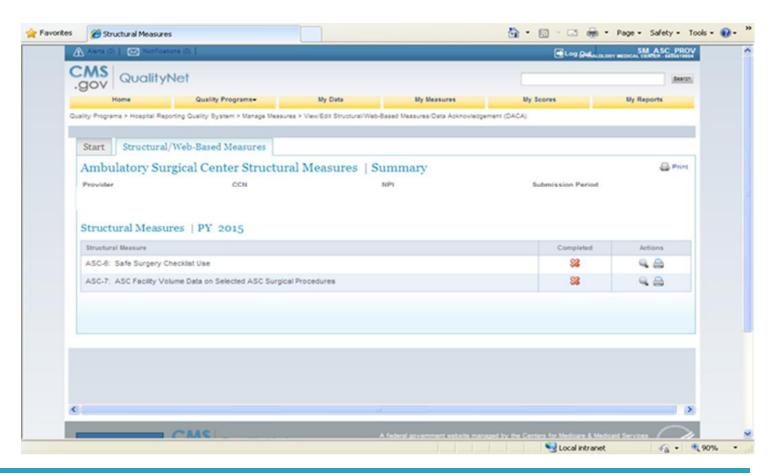
My QualityNet: Manage Measures Page







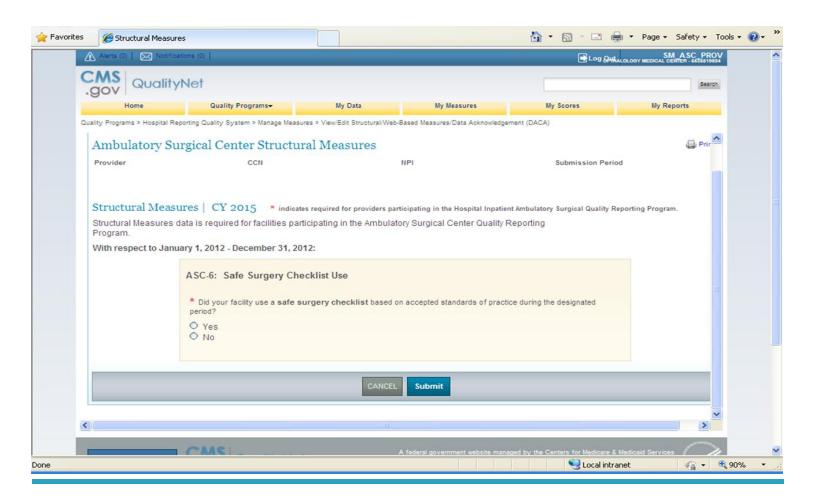
ASC Structural (Web-Based) Measures: Summary Page







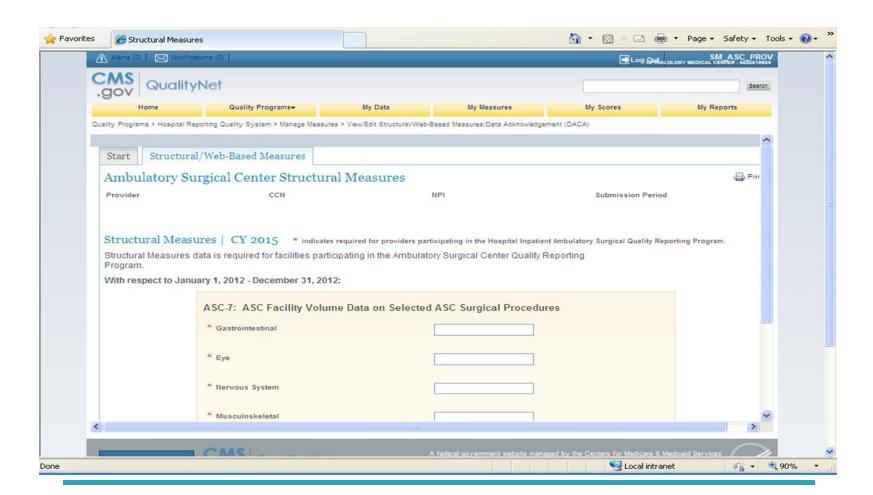
ASC-6







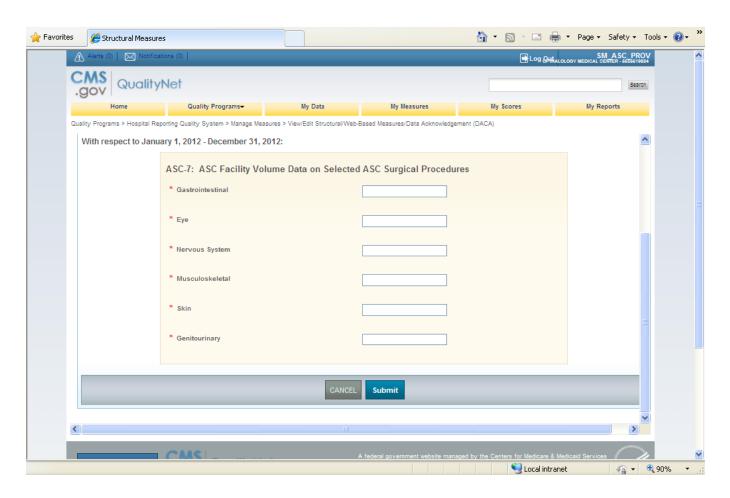
ASC-7: Part 1







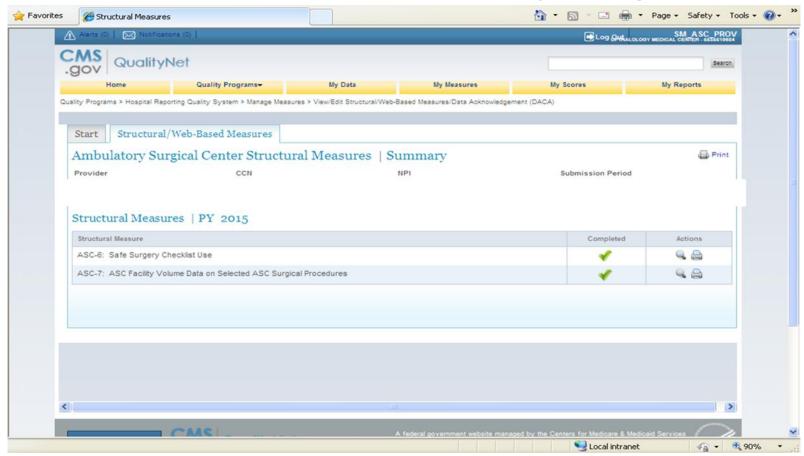
ASC-7: Part 2







ASC Structural (Web-Based) Measures: Summary Page







Reconsideration Process

- Complete the form that will be placed on the QualityNet website later in the year. The form will be posted once the Annual Payment Determinations for CY 2014 have been made in September 2013.
- For the CY 2014 payment determination, submit the completed form by March 17, 2014.
- This information is located in the FY 2013 IPPS/LTCH final rule (77 FR page 53643).





ASCQR Data

- The data are presented in two parts: QDC use and ASC Measures 1-5.
- Overall data for QDC use and ASC are shown.
- Data are divided by facility characteristic (e.g., location, size, and claim time period).



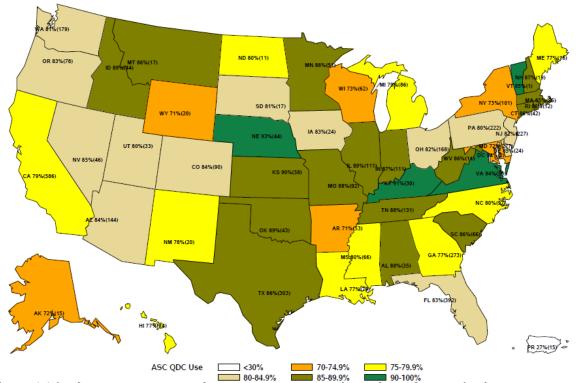




National ASC Participation Data

ASC QDC Use by State

Data Source: Medicare FFS Claims 10/01/2012 - 12/31/2012



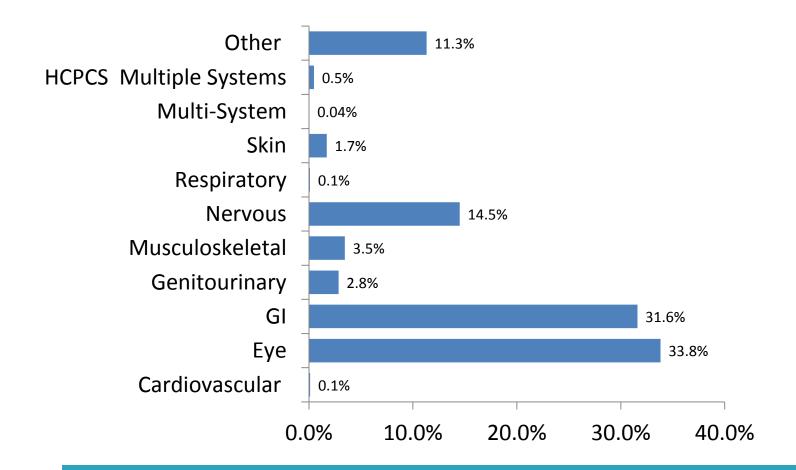
The % (#) in the map represent the ASC QDC use and number of ASCs in the state FMQAI, Mar 2013





ASC Claim Volume by Procedure

(1.25 million ASC claims in 2012Q4)



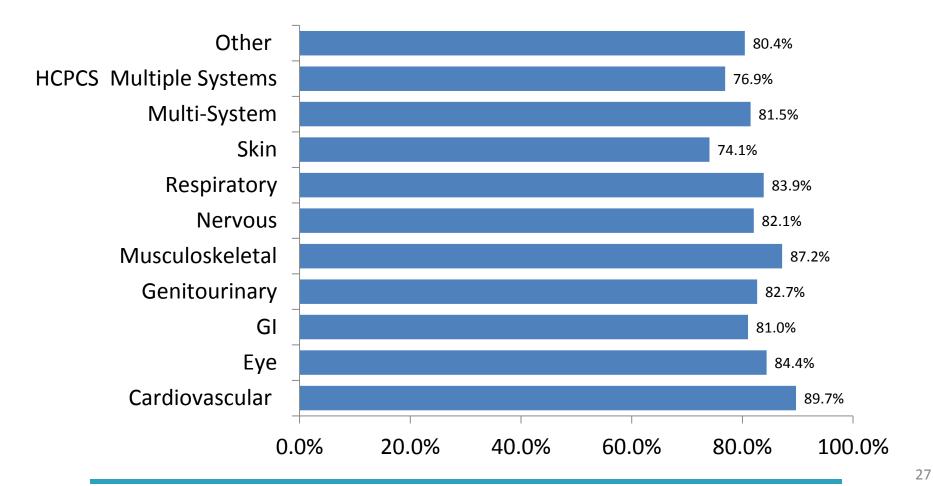






QDC Rates by HCPCS

(1.25 million ASC claims in 2012Q4)

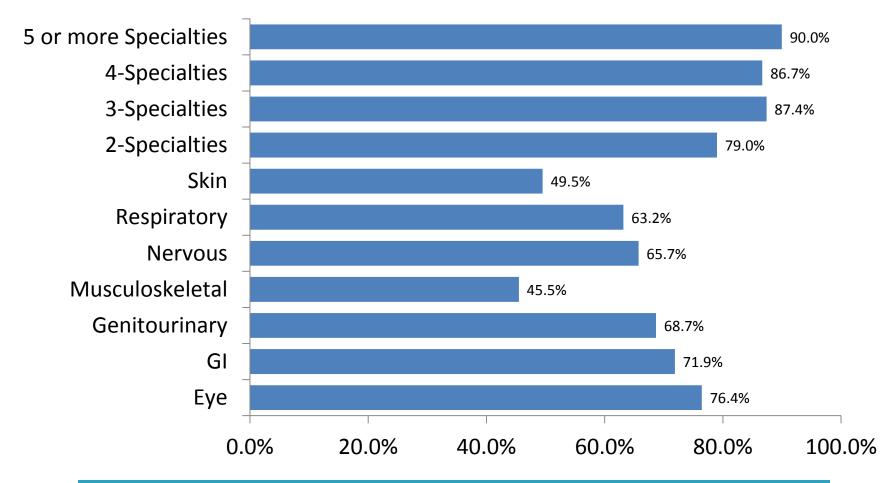








QDC Rates by ASC Specialty Type and Number

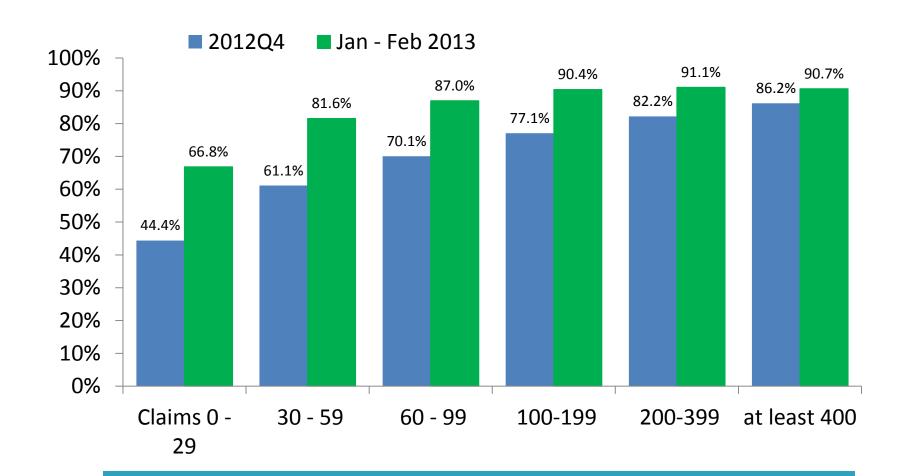








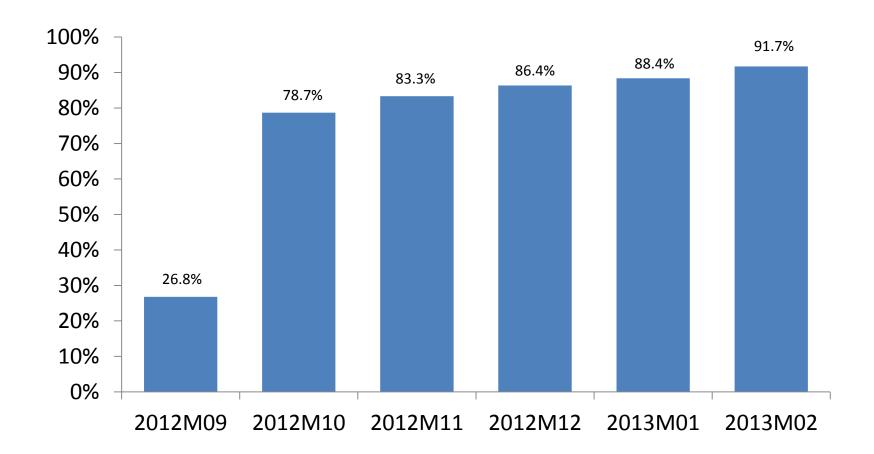
QDC Rates by ASC Size







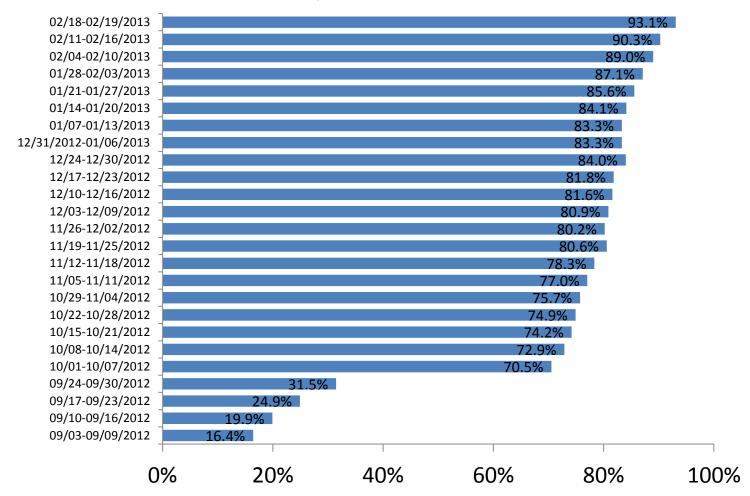
QDC Rates by Date of Service







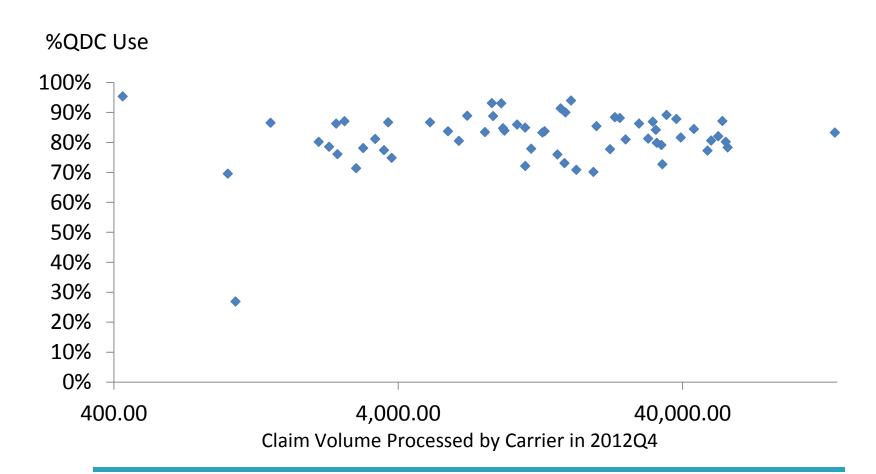
Weekly QDC Rates







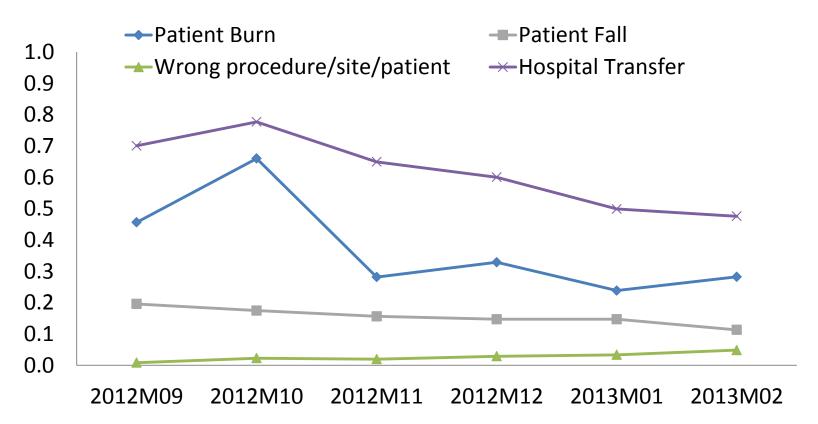
QDC Rates by Carrier and the Carrier's Claim Volume







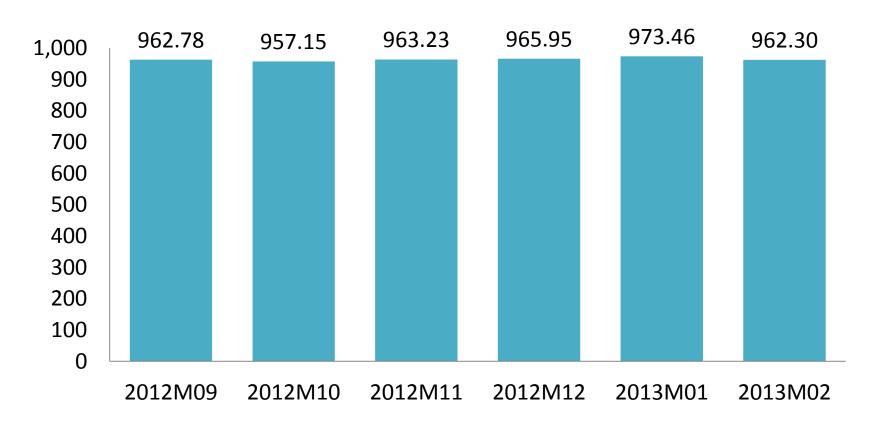
Measures 1 - 4 Rates by Month Per 1,000 Visits







Timely Prophylactic IV by Month Per 1,000 Visits

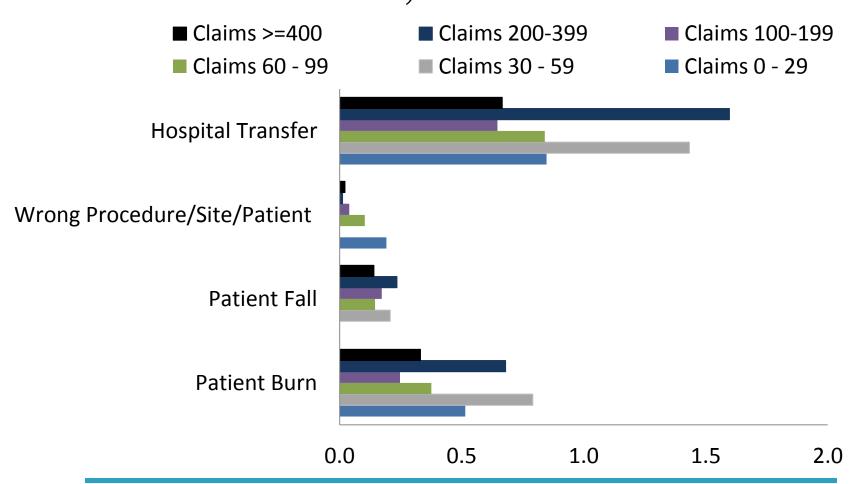








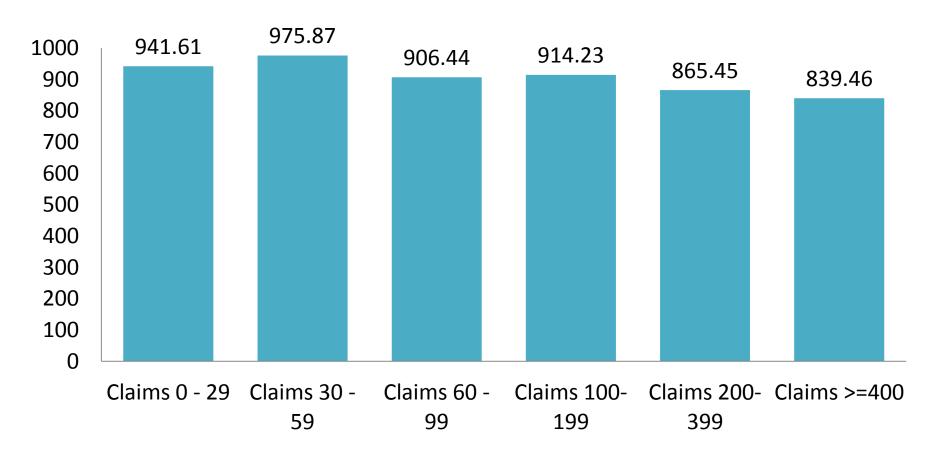
Measure 1 - 4 Rates by ASC Size Per 1,000 Visits







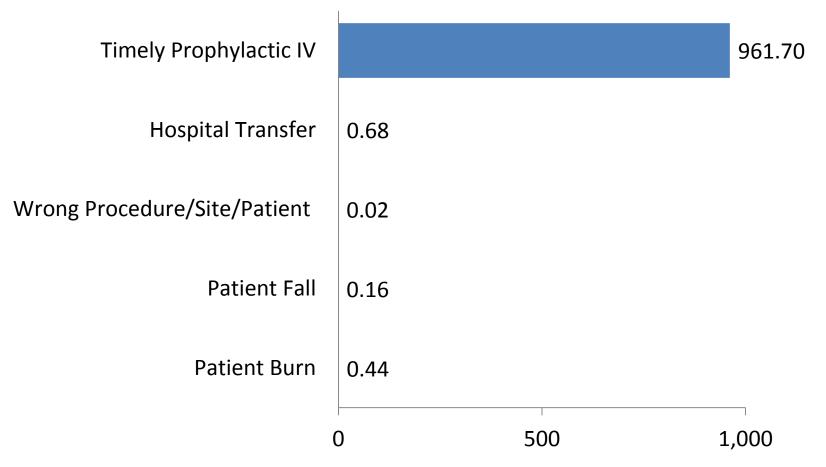
Timely Prophylactic IV by ASC Size Per 1,000 Visits







Overall Measure Rates 2012Q4 Per 1,000 Visits

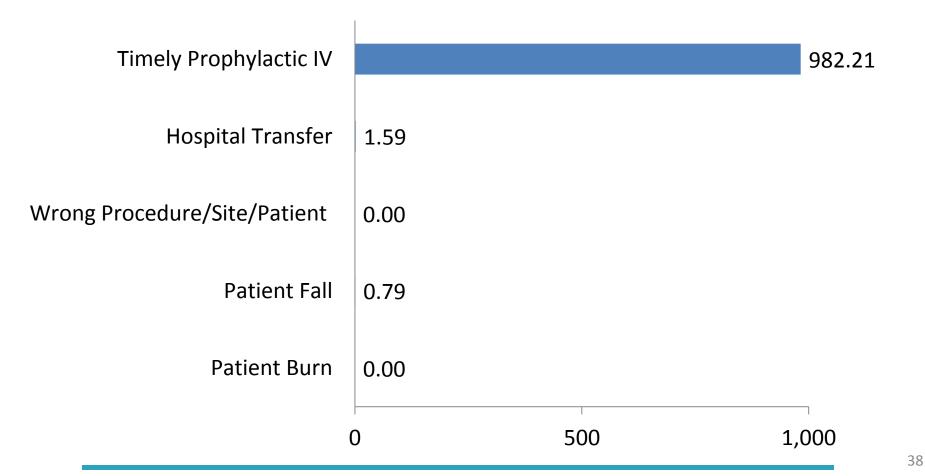








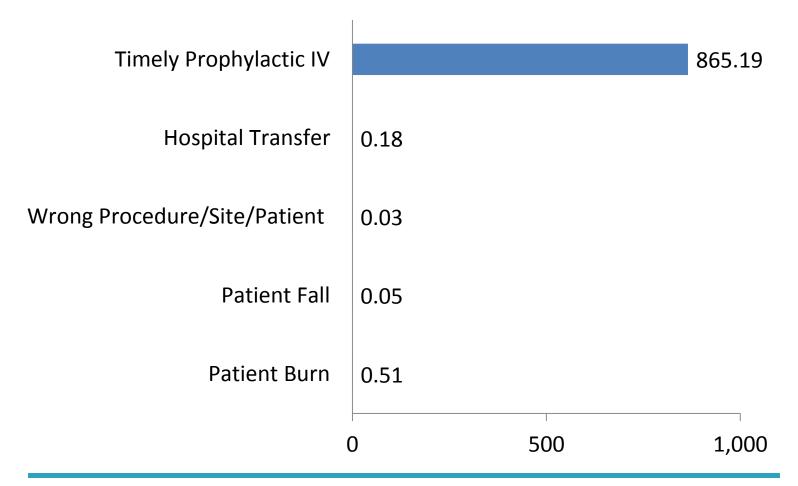
Measure Rates by Cardiovascular System 2012Q4 Per 1,000 Visits







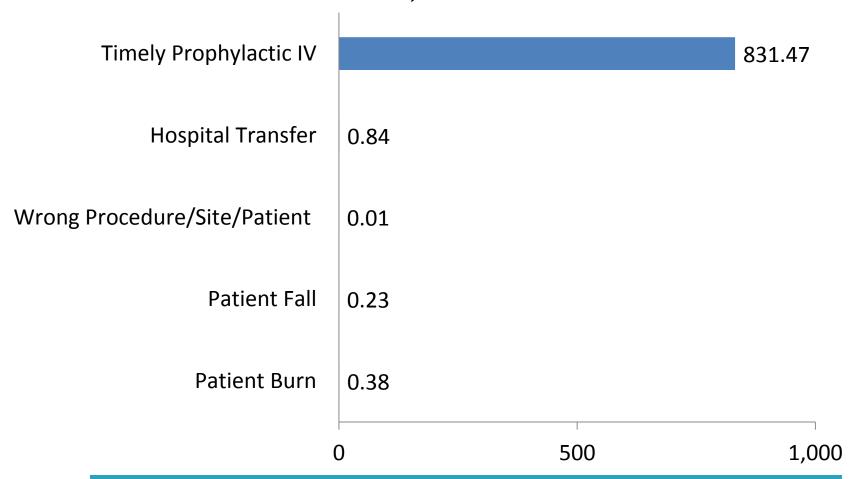
Measure Rates by Eye System 2012Q4 Per 1,000 Visits







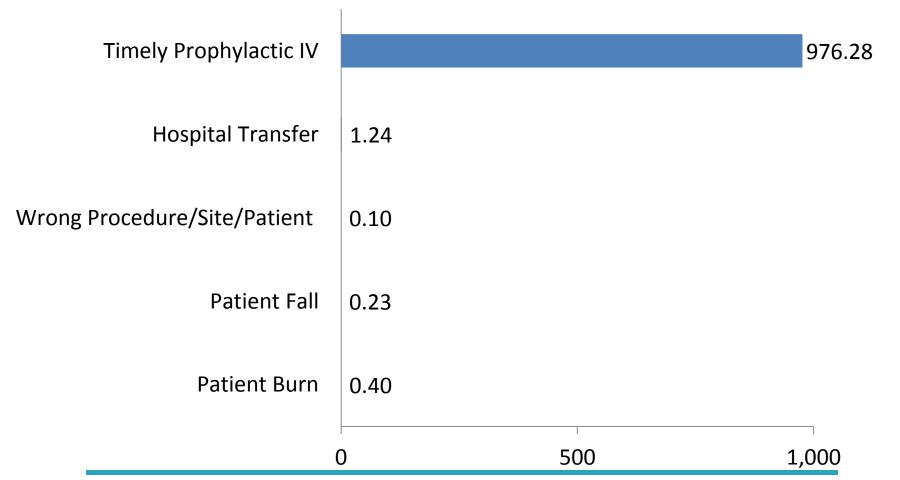
Measure Rates by GI System 2012Q4 Per 1,000 Visits







Measure Rates by Genitourinary System 2012Q4 Per 1,000 Visits

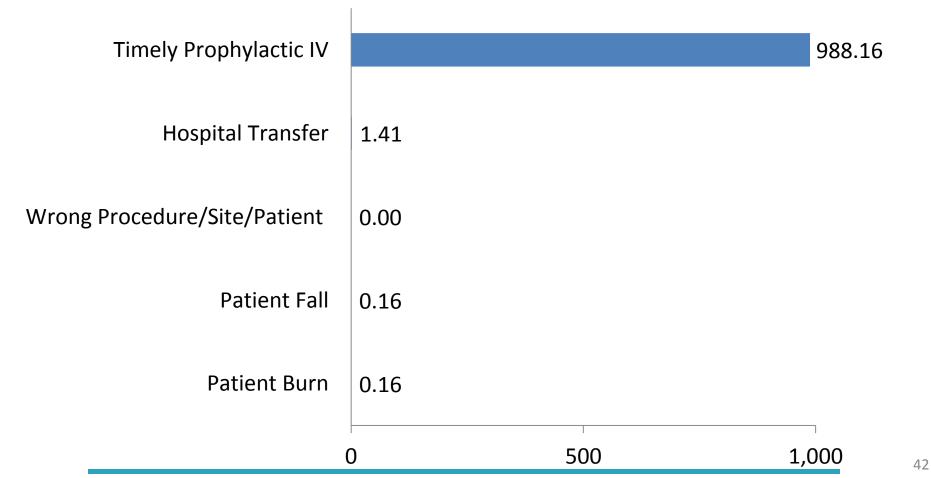








Measure Rates by Musculoskeletal System 2012Q4 Per 1,000 Visits

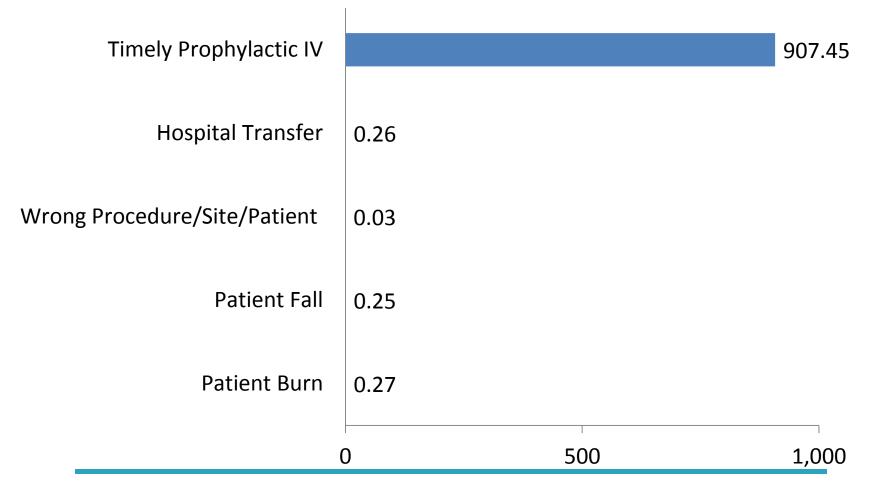








Measure Rates by Nervous System 2012Q4 Per 1,000 Visits

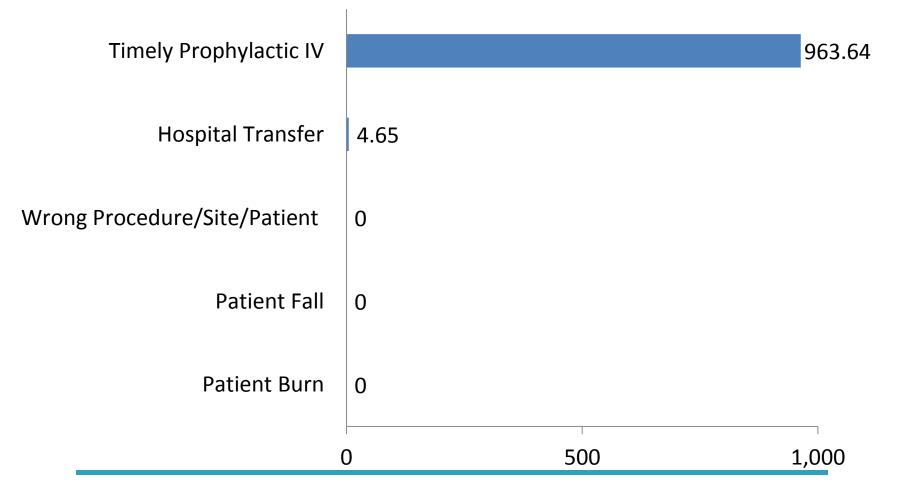








Measure Rates by Respiratory System 2012Q4 Per 1,000 Visits

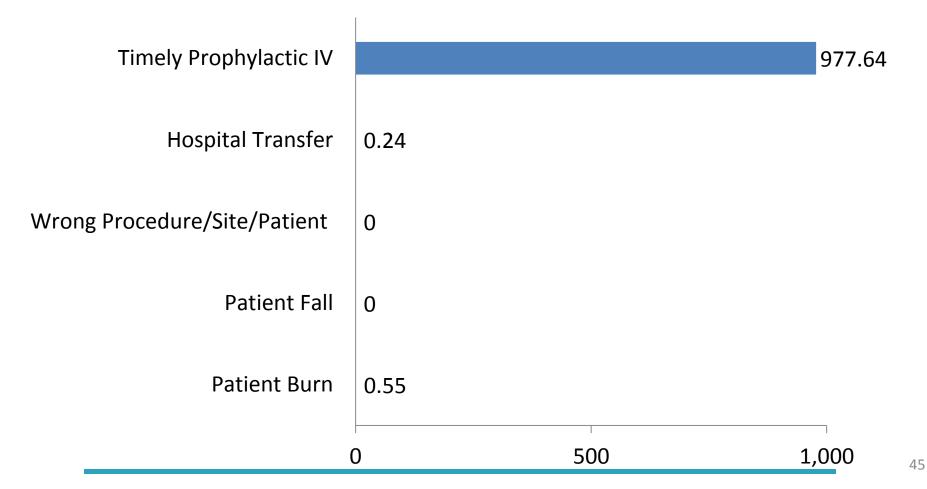








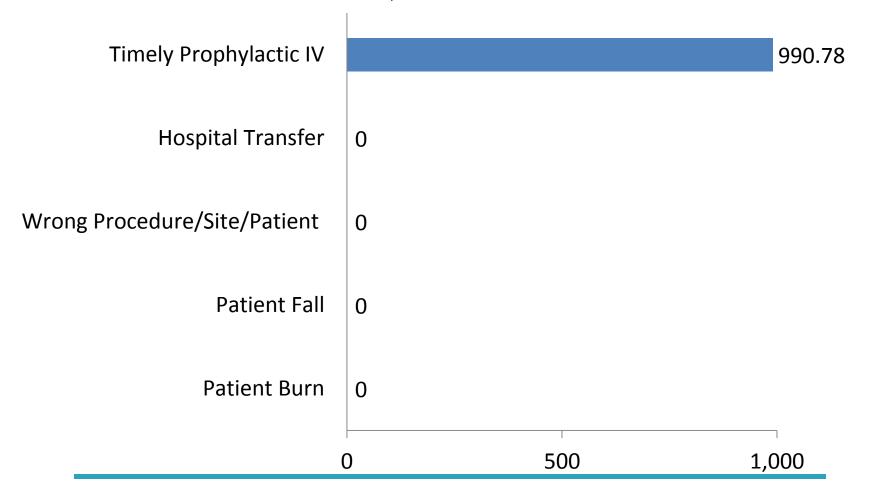
Measure Rates by Skin System 2012Q4 Per 1,000 Visits







Measure Rates by Multi-System 2012Q4 Per 1,000 Visits

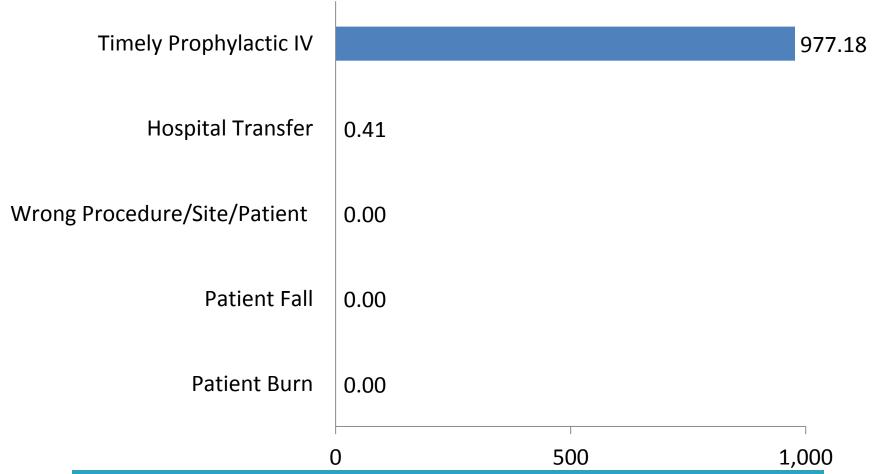








Measure Rates by Multiple Systems 2012Q4 Per 1,000 Visits

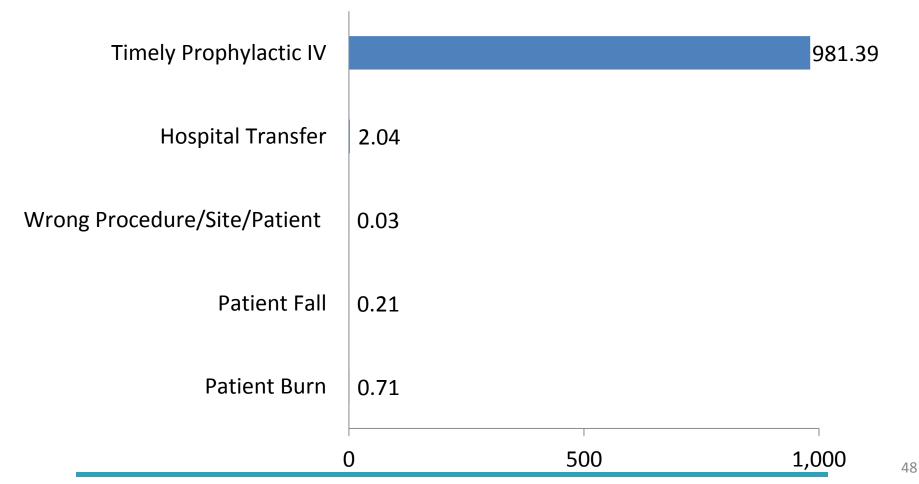








Measure Rates by Other System 2012Q4 Per 1,000 Visits









ASCQR Program Newsletter



ListServe Registration

Subscribing to the ASC ListServe can help you stay current on all things ASCQR. On https://www. qualitynet.org under the main ASC section, the ListServe registration link is located on the righthand side of the website in a blue box entitled "ASC Notifications." On the ListServe Registration page you will select the list(s) you would like to subscribe to and enter your full name (first and last) with spaces as well as your full e-mail address (ismith@myasc. com), then click on the Submit button. A successful subscription will return a confirmation e-mail requesting a response to confirm the list(s) you have subscribed to. The notification list is a hidden list, which means that the list of members is only available to the list administrator. Examples of notifications include webinar information and deadline reminders

Coding Corner

Is your understanding that your facility has been submitting QDCs appropriately? The following are possible reasons why your claims are not capturing

- Use of rendering physician's NPI
- Not utilizing a minimum of two or a maximum of five G-codes per claim
- Split claims from the Medicare Carrier
- Inappropriate Remittance Advice Remark Codes (RARCs)

We recommend you perform regular audits of your remittance advices to ensure that QDCs not only continue to be submitted, but that your claims are being processed appropriately.

Measure Reporting Start Dates

Number	Claims-Based Measures for CY 2015 Payment Year		Dates for CY 2015 Payn
ASC-1	Patient Burn	Claims submitted for services furnished betweer January 1, 2013 and December 31, 2013	
ASC-2	Patient Fall	Claims submitted for services furnished between January 1, 2013 and December 31, 2013	
ASC-3	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	Claims submitted for services furnished between January 1, 2013 and December 31, 2013	
ASC-4	Hospital Transfer/Admission	Claims submitted for services furnished between January 1, 2013 and December 31, 2013	
ASC-5	Prophylactic Intravenous (IV) Antibiotic Timing	Claims submitted for services furnished betwee January 1, 2013 and December 31, 2013	
	Web-Based M	Measures	
Number	Measures for CY 2015 Payment Year	Reference Period	Submission Perio
ASC-6	Safe Surgery Checklist Use	January 1, 2012 – December 31, 2012	July 1, 2013 – August 1 2013
ASC-7	ASC Facility Volume Data on Selected ASC Surgical Procedures	January 1, 2012 – December 31, 2012	July 1, 2013 – August 1 2013
Number	Measures for CY 2016 Payment Year	Reference Period	Submission Perio
ASC-8	Influenza Vaccination Coverage among Healthcare Personnel	TBA	October 1, 2014 – March 2015*



Ambulatory Surgical Center Quality Reporting Program



ASCQR Program Newsletter (continued)



ASC Newsletter Link
 <u>www.oqrsupport.com/medi</u>
 <u>a/newsletters/ASC-</u>
 Newsletter_Spring

2013.pdf





We Will Now Open the Phone Lines for Q&A

- This program is approved for 1.0 continuing education unit.
- Please send your name, state, license number, and profession to theron@fmqai.com to receive continuing education credit.
 - Professionals that are licensed by approved Florida Boards will have their CE credit submitted to CE Broker.
 - Professionals licensed in other states will receive a Certificate of Completion to submit to their boards.





Thank You!

Please contact the ASCQR Support Contractor if you have questions.

Submit questions online through the Question & Answer tool at www.QualityNet.org

OR

Call the ASCQR Program Support Contractor at 866-800-8756

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