



ASC Quality Reporting Program – 2025/2026

How to Prepare for the Various Deadlines!!
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Learning Objectives



- ▶ Understand the Quality Reporting Process for ASCs.
- ▶ Recognize the Significance of the Program.
- ▶ Examine the Individual Measures.

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ASC Quality Reporting 2025

2012 CMS established the ASCQR Program

- ▶ Changes every year.
- ▶ Deadlines/rules are subject to change.
- ▶ Currently there are 18 measures, 4 of the measures are voluntary.



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Goal of the ASCQR Program

- ▶ Consumer awareness.
- ▶ Currently no “reimbursement” for performance, only for reporting.



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General Rules

- ▶ All ASC's reimbursed under the ASC fee schedule for Medicare are subject to the ASCQR Program requirements.
- ▶ In business at least 4 months prior to Jan1 of the data collection period.
- ▶ Magic number is 240 Medicare claims (primary plus secondary).

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Payment Determination

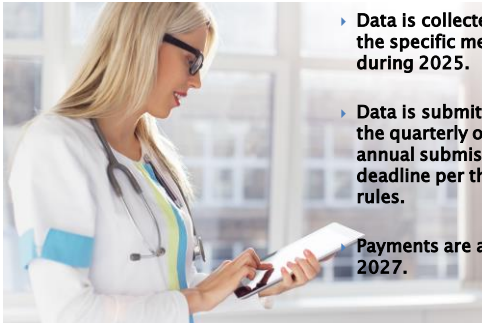
ASC Quality Reporting Overview

- ▶ The Ambulatory Surgical Center Quality Reporting (ASCQR) Program is a pay-for-reporting, quality data program finalized by the Centers for Medicare & Medicaid Services (CMS). Under this program, ASCs report quality of care data for standardized measures to receive the full annual update to their ASC annual payment rate, beginning with Calendar Year (CY) 2027 payments.



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Data Collection/Reporting/Payments



- ▶ Data is collected for the specific measures during 2025.
- ▶ Data is submitted on the quarterly or annual submission deadline per the rules.
- ▶ Payments are affected 2027.








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4 Methods to Report

- ▶ <https://hqr.cms.gov> (hospital quality reporting)
- ▶  <https://qualitynet.cms.gov>
- ▶  <https://www.cdc.gov/nhsn/ambulatory-surgery/index.html>
- ▶ CMS connects the dots for you! No submission required.

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Quality Reporting Center

			
REFERENCE AND TRAINING MATERIALS	EDUCATIONAL PRESENTATIONS	TIMELINES AND CALENDARS	DATA COLLECTION TOOLS
			
CONTACT INFORMATION	HELPFUL LINKS TO RESOURCES	QUESTION AND ANSWER TOOLS	

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How To Stay Informed

- ▶ <https://www.qualityreportingcenter.com/en/ascqr-program/ascqr-program-tools-and-resources/>
- ▶ <https://www.qualityreportingcenter.com/en/ascqr-program/data-dashboard/ccn/>
- ▶ www.ascquality.org
- ▶ https://qualitynet.cms.gov/files/675333cefef025ccdcb4b382?filename=ASC_v14.0a_SpecsManual.pdf



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Pitfalls to Avoid

- ▶ Staff changes. Security Official (SO) – HQR, Facility Administrator (FA) NHSN.
- ▶ Quality reporting change form does NOT effect NHSN, HQR, CMS or CDC.
- ▶ Whenever possible, list 2 individuals.
- ▶ Register with HARP for HQR and SAMS as well as NHSN. Log in every 60 days.



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ASC-1 Patient Burn

- ▶ Submit via the HQR secure portal.
- ▶ Due date May 15, 2026.
- ▶ All patients, not just Medicare.
- ▶ Use your medical records, incident reports.
- ▶ Scalds, contact, fire, chemical, electrical, or radiation.



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ASC-2 Patient Fall

- ▶ Submit via the HQR secure portal.
- ▶ Due date May 15, 2026.
- ▶ Inside the ASC.
- ▶ Medical records, incident reports.
- ▶ All patients, not just Medicare.



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ASC-3 Wrong Site, Side, Patient, Procedure, Implant

- ▶ Submit via the HQR secure portal.
- ▶ Due date May 15, 2026.
- ▶ All patients, not just Medicare.
- ▶ Endorsed by all of the accreditation organizations.
- ▶ Some states require reporting.



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ASC-4 All Cause Hospital Transfer/Admission

- ▶ Submit via the HQR secure portal.
- ▶ Due date 5-15-26.
- ▶ Include all patients, not just Medicare.
- ▶ Admissions/transfers upon discharge from the ASC to acute care hospital including ERs.

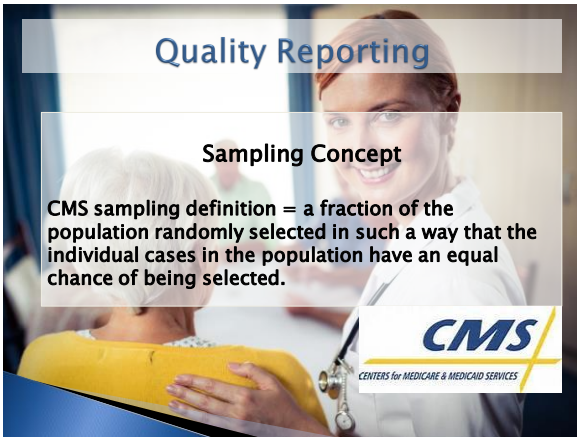


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ASC 9/11/13
Sampling Concept
(any payer, specific to procedure)

Population Per Year	0-900
Yearly Sample Size	63
Quarterly Sample Size	16
Monthly Sample Size	6
Population Per Year	≥ 901
Yearly Sample Size	96
Quarterly Sample Size	24
Monthly Sample Size	8

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Quality Reporting

Sampling Concept

CMS sampling definition = a fraction of the population randomly selected in such a way that the individual cases in the population have an equal chance of being selected.

CMS
CENTERS for MEDICARE & MEDICAID SERVICES

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ASC-9 Endoscopy/Polyp Surveillance

- ▶ Submit via the HQR secure portal.
- ▶ May sample. Due date 5-15-26.
- ▶ Check box if you do not do endoscopy!
- ▶ All patients 45 to 75.



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ASC-9 Endoscopy /Polyp Surveillance

- ▶ Eligible Cases: ICD 10 CM Z12.11
- ▶ And CPT or HCPCS 44388, 45378, G0121

Without:

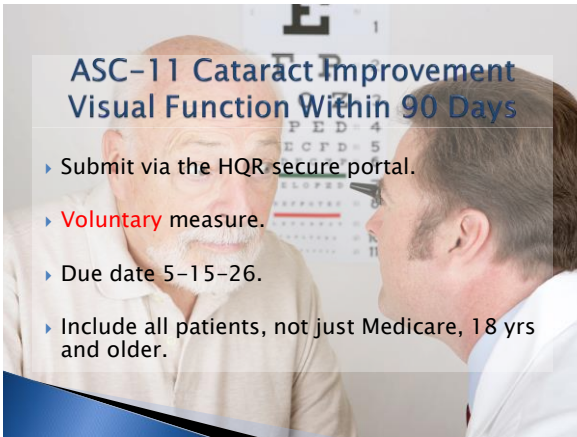
- ▶ Category I Modifiers 52, 53, 73, 74
- ▶ Diagnosis codes: Z83.710, Z83.711, Z83.718, Z83.719, Z86.010, Z80.0, Z85.038



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ASC-11 Cataract Improvement Visual Function Within 90 Days

- ▶ Submit via the HQR secure portal.
- ▶ Voluntary measure.
- ▶ Due date 5-15-26.
- ▶ Include all patients, not just Medicare, 18 yrs and older.



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ASC-12 Facility Hospital Visit Rate After Outpatient Colonoscopy

- ▶ Calculated via claims.
- ▶ Only Medicare patients, fee for service, 65 years and older.



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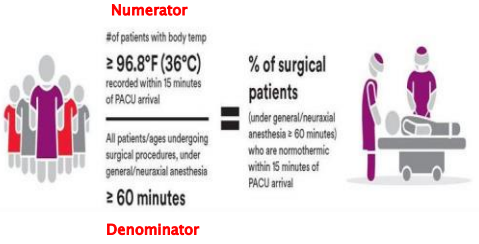
ASC-13 Normothermia Outcome

- ▶ Submit via HQR secure portal by 5/15/26.
- ▶ This measure is used to assess the percentage of patients having surgical procedures under general or neuraxial anesthesia of 60 minutes or more in duration who are normothermic within 15 minutes of arrival in PACU.
- ▶ If your center does not perform procedures related to this measure, no worries, just select the box under the measure name and description that states: "Please enter zeros for this measure as I have no data to submit." You have to answer so it is clear.
- ▶ Include all patients.



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ASC-13





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ASC-14 Unplanned Anterior Vitrectomy

- ▶ Submit via HQR secure portal.
- ▶ If your center 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."
- ▶ Due date 5-15-26.
- ▶ Include all patients, not just Medicare.



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July 9, 2025



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ASC-15 (a-e) Patient Satisfaction

- ▶ Vendor submits report, you must pick a Medicare approved vendor. (currently 17 vendors)
- ▶ First Q of 2025 due 7/9/25. 10/8/25, 1/14/26, 4/8/26
- ▶ Extraordinary Circumstances Exception not a generally acceptable reason.
- ▶ Call 866 590 7468 to discuss.

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ASC 15 - Patient Satisfaction

- ▶ 34 questions
- ▶ #21 Possible signs of infection include fever, swelling, heat, drainage or redness. Before you left the facility, did your doctor or anyone from the facility give you information about what to do if you had possible signs of infection? 1 YES 2 NO
- ▶ #22 At any time after leaving the facility, did you have any signs of infection? 1 YES 2 NO

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ASC-17 Hospital Visit After Ortho Surgery Within 7 Days

- ▶ Calculated via claims.
- ▶ Only Medicare fee for service 65 years or older.



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ASC-18 Hospital Visit After Urology Procedure

- ▶ Calculated via claims.
- ▶ Medicare fee for service 65 years or older.



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ASC-19 Seven Day Hospital Visit After General Surgery

- ▶ Calculated via claims.
- ▶ Medicare fee for service patients aged 65 years and older.



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ASC-20 Covid 19 Vaccinations

- ▶ Submit via NHSN healthcare at the personnel safety component

2024 Q3 Data (July 1-September 30, 2024)	February 15, 2025
2024 Q4 Data (October 1-December 31, 2024)	May 15, 2025
2025 Q1 Data (January 1-March 31, 2025)	August 15, 2025
2025 Q2 Data (April 1-June 30, 2025)	November 17, 2025



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ASC - 20 Covid Vaccinations

Q3 2025 (Jul 1-Sept 30)
Submit 2/16/26

Q4 2025 (Oct 1-Dec31)
Submit 5/15/26



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ASC - 20 COVID Reports

- ▶ Currently only measure involved with NHSN.
- ▶ Self select 1 week each month. Enter by the required quarterly deadlines.
- ▶ Must submit all data for the selected week, if all information is not entered the data will not be saved!



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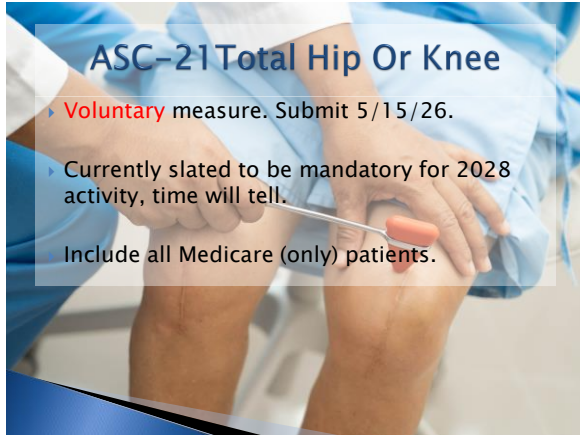
COVID –19 Vaccination

- ▶ Number of HCP who worked at the ASC for at least one day of the self-selected week in each month of quarterly data reporting
- ▶ Includes FT/PT/PRN/owners/etc.
- ▶ Floaters are to be counted at each facility

1. Employees
2. LIPs
3. Students/trainees/volunteers
4. Contract (optional)



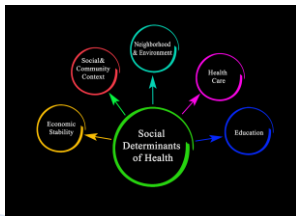
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ASC-22 Screening For Social Drivers of Health

- ▶ Submit via HQR secure portal 5/15/26.
- ▶ **Voluntary** measure – mandatory CY 2026 at this point. Will have to submit 5/15/27.
- ▶ Include all patients.



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ASC -22

▶ FIVE SOCIAL RISK FACTORS

- ▶ Food insecurity
- ▶ Housing instability
- ▶ Transportation needs
- ▶ Utility difficulties
- ▶ Interpersonal safety during their ambulatory surgical care



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ASC-23 Social Drivers

- ▶ Submit via HQR secure portal by 5/15/26.
- ▶ Currently **Voluntary** - mandatory CY 2026 at this point with a due date of 5/15/27.
- ▶ Same measures as ASC 22.



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ASC-24 Facility Commitment To Health Equity

- ▶ Submit via HQR secure portal.
- ▶ Due date 5/15/26.
- ▶ 5 Domains of commitment. Yes and no questions. All must be a yes.



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ASC-24 Facility Commitment to Health Equity

Positive attestations for all 5 domains

Domain 1 Equity is a Strategic Priority

- ▶ Facility identifies priority populations who currently experience health disparities.
- ▶ Facility identifies equity goals and discrete action steps to achieve goals from the first element.
- ▶ Facility identifies resources to achieve equity goals.
- ▶ Facility describes how to engage stakeholders and community based organizations.



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ASC-24 Facility Commitment to Health Equity

Positive attestations for all 5 domains

Domain 2 Data Collection

- ▶ Our facility collects information re race, national origin, primary language, and ethnicity.
- ▶ Staff are trained on the collection of data. identifies resources to achieve equity goals.
- ▶ The facility collects data into a structured program.



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ASC-24 Facility Commitment to Health Equity

Positive attestations for all 5 domains

Domain 3 Data Analysis

- ▶ Our facility reviews & collects information re race, national origin, primary language, and ethnicity.
- ▶ Staff are trained on the collection of data. Identifies resources to achieve equity goals.
- ▶ The facility collects data into a structured program.



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ASC-24 Facility Commitment to Health Equity

Positive attestations for all 5 domains

Domain 4 Quality Improvement

- ▶ Our facility participates in local, regional, or national quality improvement activities focused on reducing health disparities.
- ▶ You may need to focus on national.



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ASC-24 Facility Commitment to Health Equity

Positive attestations for all 5 domains

Domain 5 Leadership Engagement

- ▶ Annual review of plan.
- ▶ Annual review of key performance indicators.



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Reconsideration Request Form

- ▶ *Reason for Reconsideration Request: Please state your facility's reason for requesting reconsideration. This must identify the specific reason(s) for believing your facility did meet the Quality Reporting Program requirements and should receive the full APU. Please Note: A facility must submit all documentation and evidence that supports its request for reconsideration at the time that it submits its request. This includes copies of any communications, such as emails that the facility believes demonstrate its compliance with the program requirements.



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Extraordinary Circumstances Exceptions (ECE)

- ▶ If an ASC is unable to submit data or access medical records due to an extraordinary circumstance, such as a natural disaster, the ASC may request an ECE. ASCs will need to complete the ECE form and submit the form with any supporting documentation within 90 days of the date of the extraordinary circumstance. These documents must be submitted to the Outpatient Quality Reporting Support Team via one of the following:
 - Email to: QRFormsSubmission@hsag.com
 - Secure fax: 877.789.4443.



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ECE Exception

- ▶ **Extraordinary Circumstances Exception (ECE)**
- ▶ For most facilities, starting late or missing data collection for Quarter 1, 2025, is not a qualified reason to submit an Extraordinary Circumstances Exception (ECE).
- ▶ Please contact the OAS CAHPS Survey Coordination Team via e-mail at oascahps@rti.org or call toll-free (866) 590-7468, if you have any questions.



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Please email your questions and comments to:



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