A Review of Regional Data for Ambulatory Surgical Centers: Are You Ready for 2018?

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Our Speakers Today

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Objectives

• Recognize areas for improvement through review of existing data
• List the new measures required for 2018 data collection for the 2020 annual payment updates
• Identify measures impacting reporting and data collection for 2018
• Determine National Healthcare Safety Network (NHSN) readiness
Quality Innovation Network-
Quality Improvement Organization
(QIN-QIO) Program
About the Program

Leading rapid, large-scale change in health quality:

- Goals are bolder
- The patient is at the center
- All improvers are welcome
- Everyone teaches and learns
- Greater value is fostered
HSAG: Your Partner in Healthcare Quality

• HSAG is the Medicare QIN-QIO for Arizona, California, Florida, Ohio and the U.S. Virgin Islands.

• QIN-QIOs in every state/territory are united in a network under the Centers for Medicare & Medicaid Services (CMS).

• The Medicare QIO Program is the largest federal program dedicated to improving healthcare quality at the community level.
Nearly 25 percent of the nation’s Medicare beneficiaries

HSAG is the Medicare QIN-QIO for Florida, California, Ohio, Arizona and the U.S. Virgin Islands.
The TMF QIN-QIO works with health care providers in a region encompassing Arkansas, Missouri, Oklahoma, Puerto Rico and Texas.

TMF has subcontracted with strong, experienced quality improvement partners to provide expert technical assistance and quality improvement support for participating health care providers across this region.

- Arkansas Foundation for Medical Care
- Primaris (Missouri)
- QIPRO and Ponce Medical School Foundation (Puerto Rico)
- TMF Health Quality Institute (Texas and Oklahoma)
Join the TMF QIN-QIO Website

• Provides targeted technical assistance and will engage providers and stakeholders in improvement initiatives through numerous Learning and Action Networks (LANs).

• The networks serve as information hubs to monitor data, engage relevant organizations, facilitate learning and sharing of best practices, reduce disparities and elevate the voice of the patient.

• Visit www.TMFQIN.org to join.
ASC Quality Report QIN-QIO Results: HSAG and TMF
ASC–4 (lower rate preferred)
ASC–5 (higher rate preferred)
ASC–8 (higher rate preferred)
The Centers for Disease Control Prevention estimates that influenza has resulted between 9.2 million and 60.8 million illnesses, between 140,000 and 710,000 hospitalizations and between 12,000 and 56,000 deaths annually since 2010. [https://www.cdc.gov/flu/about/disease/2015-16.htm](https://www.cdc.gov/flu/about/disease/2015-16.htm)
ASC–8: Influenza Vaccination Coverage Among Health Care Personnel

**Description:** Percentage of health care personnel (HCP) who receive the influenza vaccination

**Denominator:** Number of HCP who are working in the health care facility for at least one working day between Oct. 1, 2017, and March 31, 2018, **regardless of clinical responsibility or patient contact.** Denominators are to be calculated separately for employees, licensed independent practitioners, students, trainees, and volunteers.

**Numerator:** HCP in the denominator population who:
- Received an influenza vaccination
- Have a medical condition of allergic reaction or history of Guillain-Barre Syndrome within six weeks after a previous flu vaccination
- Declined influenza vaccination
- Are persons with unknown vaccination status or who do not otherwise meet any of the definitions above
ASC–8: Enroll in NHSN

Getting Started in the HPS Component (cont.)

- Is your facility enrolled in NHSN?
  - no: Enrollment
    - Choose an NHSN Facility Administrator
    - Five-Step Enrollment Process
  - yes: Activation
    - NHSN Facility Administrator activates the HPS Component
    - Facility Administrator adds Administrative User

- Are you unsure of your facility’s status with NHSN?
  - E-mail nhsn@cdc.gov
Step 1: Training and Preparation

- Print and follow a [detailed checklist, from June 2015](https://www.cdc.gov/nhsn/pdfs/asc/ASC-EnrollmentChecklist.pdf) to ensure successful and efficient enrollment.


- Time to complete step 1: 2 hours, 45 minutes
ASC–8: Improve Your Rates

- Educate
- Provide access
- Process/Policies
ASC-8 Improve Your Rates

Educate:
• Offer influenza vaccination education multiple times during the flu season
• Educate and vaccinate staff as part of new employee orientations

Provide Access:
• Offer opportunities to be vaccinated at multiple times and locations convenient to all workers on all shifts during the flu season
• Work with pharmacy consultants to offer influenza vaccination for facility staff as a standard procedure

Process/Policies:
• Determine and track influenza vaccinations yearly for each employee
• Establish a written influenza vaccination policy for employees
• Be sure your data is complete and updated monthly with NHSN
ASC–9 (higher rate preferred)

![ASC-9 Endoscopy/Polyp Surveillance, Appropriate Follow-up Interval (Higher Score Preferred)](chart)

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<th>2016 Rate</th>
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TMF
Health Quality Institute
HSAG HEALTH SERVICES ASSOCIATION GROUP
ASC–10 (higher rate preferred)
ASC–12

- Facility 7–Day Risk-Standardized Hospital Visit Rate After Outpatient Colonoscopy
- Reports
  - CMS makes claims detail reports (CDRs) available at three stages prior to the final measure calculation and public reporting of measure results.
  - CMS distributes facility specific reports (FSRs) to facilities with final calculations based on the 2016 performance period.
Utilization of Data
Linking Quality Reporting and Quality Improvement

• The Ambulatory Surgical Center Quality Reporting (ASCQR) Program requires ASCs to gather and report specific measure data to be eligible for annual payment updates.

• Data are essential to quality improvement.
  – Identify and describe system and process problems
  – Establish baselines and goals
  – Compare your performance to other units/facilities
  – Track changes/trends over time
  – Garner support for quality improvement initiatives
Data

- ASCQR measure data has been collected and reported.
- Certification and accreditation agencies require quality improvement studies as part of their quality programs.

You have the data...use it!
Analyze Your Data

- Review your previous reporting periods.
  - Describe the findings.
  - Where are your best opportunities for improvement?
- Presenting data graphically may be helpful.
  - Your QIN-QIOs can provide assistance with this.
- After review of the data, you should have a good reference point of where to begin.
Design and Implement Interventions: Plan-Do-Study-Act (PDSA)

Plan
What small change(s) could be made to increase vaccination among HCPs?

Do
Test the implemented change(s).

Study
Did the intervention work? What issues/barriers were encountered?

Act
Make modifications to the intervention(s) and consider implementing on a larger scale.
Re-measure, Re-analyze the Data

Gather
Analyze
Improve
Share Your Results

- Report your findings to:
  - Staff
  - Leadership
  - Facility’s governing body
- Reinforce the need for continued quality improvement efforts.
Projects

- Are there any projects you are working on?
- Please share!
- Need help getting started?
Final Rule Changes and Requirements

Is Your Facility Ready?
ASC-13: Normothermia Outcome
ASC–14: Unplanned Anterior Vitrectomy
ASC–15: Survey-Based Measures

- Implementation Delayed Until Further Action in Future Rule Making
- Five measures via one survey:
  - ASC–15a: About Facilities and Staff
  - ASC–15b: Communication About Procedure
  - ASC–15c: Preparation for Discharge and Recovery
  - ASC–15d: Overall Rating of Facility
  - ASC–15e: Recommendation of Facility
Measures Removed

Three measures for the CY 2019 payment determination have been removed:

- ASC–5: Prophylactic Intravenous (IV) Antibiotic Timing
- ASC–6: Safe Surgery Checklist Use
- ASC–7: ASC Facility Volume Data on Selected Procedures
“Be On the Lookout”

• Expansion of the CMS online data submission tool has been approved.
  – Beginning with data from CY 2017 for the CY 2019 payment year
  – Will allow for batch submission of data for multiple facilities

• Potential inclusion in future rule making
  – Ambulatory Breast Procedure Surgical Site Infection Outcome
Resources

- Quality Net:
  - www.qualitynet.org
  - Outpatient and ASC Question and Answer tool
- Quality Reporting Center: www.qualityreportingcenter.com
- HSAG: www.hsag.com
- TMF: www.TMFQIN.org
- NHSN: www.cdc.gov/nhsn
- Support Contractor:
  - 866.800.8756
  - email ([https://cms-ocsq.custhelp.com](https://cms-ocsq.custhelp.com))
Thank you!

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