Outpatient Surgery Quality and Access Act of 2023

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Outpatient Surgery Quality and Access Act

- CPI-U to HMB
- ASC representation on payment panel
- Comparable quality data (ASCs and HOPDs)
- Transparency re: ASC-approved procedures list
- Co-pay cap
Outpatient Surgery Quality and Access Act

- CPI-U to Hospital Market Basket
HOPD versus ASC Conversion Factor: 2008 – 2023F
Outpatient Surgery Quality and Access Act

- CPI-U to HMB
- Comparable quality data (ASCs and HOPDs)
Public Reporting of Facility-Specific Quality Reporting

- CMS publicly reports ASC data here: https://data.cms.gov/provider-data/

- A facility comparison dashboard is available here: https://www.qualityreportingcenter.com/en/facility-compare-dashboard/
Search

ambulatory surgical center

3 datasets found for "ambulatory surgical center" in Tags: National

Ambulatory Surgical Center Quality Measures - National
This file contains the national averages for all measures reported through the Ambulatory Surgical Center Quality Reporting (ASCQR) Program.
Last updated: Jan 6, 2023 • Released: Jan 25, 2023 • Download CSV

Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) survey for ambulatory surgical centers - National
The file contains the national average for the OAS CAHPS survey responses. The OAS CAHPS survey collects information about patients' experiences of care in hospital outpatient departments (HOPDs) and Ambulatory Surgical Centers (ASCs).
Last updated: Jul 7, 2022 • Released: Jan 25, 2023 • Download CSV

Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) survey for hospital outpatient departments - National
The file contains the national average for the OAS CAHPS survey responses. The OAS CAHPS survey collects information about patients' experiences of care in hospital outpatient departments (HOPDs) and Ambulatory Surgical Centers (ASCs).
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Facility Compare Dashboard

The Facility Compare Dashboard displays facility and state specific data published as part of the Hospital Outpatient and Ambulatory Surgical Center Quality Reporting Programs. The charts and graphs utilize data from the Centers for Medicare and Medicaid Services (CMS) Provider Data Catalog (PDC). The latest publicly reported data displayed can be found on PDC using links in the program-specific sections below.

You can find helpful explanations of each component of the dashboard in the Facility Compare Tool User Guide [1].

CMS QUALITY MEASURES SCORECARD
Overview

What do you want to do? Click a button below to select a desired report to view.

- Explore all measures reported by a single facility.
- Compare facility performance by measure.
- Explore overall national scores by state and measure.
- Explore state comparisons for related measures across programs.
- Compare state and city performance by measure.
- Explore state comparison for all ASC measures.
- Explore state comparison for all OQR measures.
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ASC-CPL Nomination Process Changes

- Name Change – “Pre-Proposed Rule CPL Recommendation Process”
- Stakeholders submit codes for consideration by March 1 (starts January 1, 2024)
- CMS will review whether codes meet exclusionary criteria
- If not added, CMS would have to indicate rationale for exclusion in the final rule
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Medicare Cost Transparency Tool for Certain Surgical Procedures

- Mandated by the 21st Century Cures Act (signed into law December 13, 2016)
  - [https://www.medicare.gov/procedure-price-lookup/](https://www.medicare.gov/procedure-price-lookup/)
  - Also a hospital and ASC look up tool
Cost Transparency Tool: ASC to HOPD Comparison

<table>
<thead>
<tr>
<th>Procedure Description</th>
<th>Ambulatory Surgical Centers</th>
<th>Hospital Outpatient Departments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification); without endoscopic cyclophotocoagulation</td>
<td>Patient pays (average) $320</td>
<td>Patient pays (average) $532</td>
</tr>
</tbody>
</table>

This includes facility and doctor fees. You may need more than one doctor and additional costs may apply.

<table>
<thead>
<tr>
<th>More cost information</th>
<th>Ambulatory Surgical Centers</th>
<th>Hospital Outpatient Departments</th>
</tr>
</thead>
<tbody>
<tr>
<td>All costs are national averages</td>
<td>Total Cost $1,606</td>
<td>Total Cost $2,664</td>
</tr>
<tr>
<td>Doctor Fee $544</td>
<td>Facility Fee $1,062</td>
<td>Doctor Fee $544</td>
</tr>
<tr>
<td>Medicare Pays $1,284</td>
<td></td>
<td>Facility Fee $2,120</td>
</tr>
<tr>
<td>Patient pays $320</td>
<td></td>
<td>Medicare Pays $2,131</td>
</tr>
</tbody>
</table>

Patient pays $532
Co-Pay Cap Issue

Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural
Code: 63655

<table>
<thead>
<tr>
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<th>Hospital outpatient departments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient pays (average)</td>
<td>Patient pays (average)</td>
</tr>
<tr>
<td>$3,600</td>
<td>$1,728</td>
</tr>
</tbody>
</table>

This includes facility and doctor fees. You may need more than one doctor and additional costs may apply.

More cost information

- Total Cost: $18,004
- Doctor Fee: $862
- Facility Fee: $17,142
- Medicare Pays: $14,403
- Patient pays: $3,600

More cost information

- Total Cost: $21,774
- Doctor Fee: $962
- Facility Fee: $20,912
- Medicare Pays: $20,045
- Patient pays: $1,728

Next Steps: Use this checklist to talk to your doctor about your costs and options, find hospitals in your area, or get data on ambulatory surgical centers.
Questions?

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