Why is Leapfrog moving into rating outpatient and ambulatory procedures?

- Today, the majority of surgeries are performed in hospital outpatient or ambulatory surgery center settings.

- Because these settings offer the opportunity for improved patient experience and greater cost-efficiency, the trend is growing rapidly.

- Unfortunately, the availability of independent, publicly reported information about patient safety and quality within these settings is lacking.

- This new information collected via the Leapfrog ASC Survey and Leapfrog Hospital Survey (Section 10 Outpatient Procedures) will assist consumers in decision-making and assist purchasers and payors in network design, direct contracting, bundled payment models, and other innovative value-based payment strategies.
Initiatives launched on April 1

Section 10: Outpatient Procedures
Find the Right Survey

Leapfrog Ambulatory Surgery Center Survey

For ASCs

• A distinct entity that exclusively provides same-day surgical services to patients not requiring hospitalization
• If certified by Medicare, the facility is certified as an ASC and has a 10-digit CCN
• Provides surgical services that do not exceed 24 hours
• May or may not be affiliated with a hospital
• Often specialty-specific

Section 10: Outpatient Procedures of the Leapfrog Hospital Survey

For Hospital Outpatient Departments (HOPD)

• A location that provides hospital outpatient services and operates under the license of a hospital – even if not located near or within the hospital
• If certified by Medicare, the facility is certified as a hospital and has a 6-digit CCN
• Provides outpatient hospital services, meaning preventive, diagnostic, therapeutic, rehabilitative, or palliative services that are furnished to outpatients
• May be co-located with a hospital (e.g., a unit within the building) or separately located (e.g., separate on/off campus location)
Goals for Both Surveys

• Compare ASCs and HOPDs on patient safety and quality measures that are meaningful to purchasers and consumers
  - Include cutting-edge measures not collected or publicly reported by any other national organization
• Keep the reporting burden as low as possible
  - Align with other performance measurement groups (such as the CDC/NHSN, CMS, accreditation organizations, and applicable registries)
• Include measures that facilities can use for quality improvement
• Maintain consistent measurement structure for benchmarking
How Responses will be Used in 2019

Leapfrog will not score or publicly report responses submitted to Section 10 Outpatient Procedures in 2019.

• Hospitals that submit the section will receive a free individual **Benchmarking Report** that includes information from the Leapfrog ASC Survey and Section 10 of the Leapfrog Hospital Survey
  - First Benchmarking Report: September (submit by June 30)
  - Second Benchmarking Report: February (submit by November 30)

• Leapfrog will not publish the Benchmarking Reports externally. However hospitals can share the information internally or externally.

• Aggregated responses from the 2019 Leapfrog ASC Survey and Section 10 of the 2019 Leapfrog Hospital Survey will be used in a **national report**.

• Leapfrog plans to score Survey responses and publicly report individual Hospital (Section 10 Outpatient Procedures) and ASC Survey Results in 2020.
Is Section 10 Outpatient Procedures applicable to your hospital?
Focus on High Volume Procedures in 2019

Leapfrog worked with the Health Care Cost Institute (HCCI) to identify the most commonly billed surgical procedures in Ambulatory Surgery Centers and Hospital Outpatient Departments for commercially insured adult and pediatric patients.

Leapfrog’s technical experts then assessed the list of procedures based on their frequency and type of anesthesia used during the procedure.

Those selected for the Survey represent the highest volume procedures nationally requiring moderate to general anesthesia (including nerve blocks).
## Types of Procedures (Section 10C) included in 2019

<table>
<thead>
<tr>
<th>Specialty</th>
<th># of Adult Procedures</th>
<th># of Pediatric Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gastroenterology</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>General Surgery</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Orthopedic</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Urology</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Dermatology</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Neurological Surgery</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Obstetrics &amp; Gynecology</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Plastic &amp; Reconstructive Surgery</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>
Is Section 10 Outpatient Procedures applicable to your hospital?

### General Information

| 1) 12-month reporting time period used: | □ 01/01/2018 – 12/31/2018  
□ 07/01/2018 – 06/30/2019 |

| 2) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis in the hospital or at a facility co-located with the hospital? | Yes  
No |

| 3) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis outside of the hospital at a separate hospital outpatient location that shares your hospital’s license and CMS Certification Number? | Yes  
No |

*If “no” to question #3, skip questions #4-5 and continue on to question #6.*
Is Section 10 Outpatient Procedures applicable to your hospital?

1) 12-month reporting time period used:
   - □ 01/01/2018 – 12/31/2018
   - □ 07/01/2018 – 06/30/2019

2) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis in the hospital or at a facility co-located with the hospital?
   - Yes
   - No

3) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis outside of the hospital at a separate hospital outpatient location that shares your hospital’s license and CMS Certification Number?
   - Yes
   - No

If “no” to question #3, skip questions #4-5 and continue on to question #6.
Hospitals with Multiple Outpatient Procedure Locations

Example A:

• Hospital performs the outpatient procedures listed in Section 10C at the hospital (location 1) and in a separate outpatient surgery center down the street (location 2).

• The outpatient surgery center (location 2) shares a CCN with the hospital and is considered a part of the hospital (location 1).

• For the purposes of reporting on Section 10, the hospital can choose to report on the hospital (location 1) OR the separate outpatient surgery center (location 2), but cannot combine the data for both locations.

• All questions in Section 10 should be responded to based on the selected location (either location 1 or location 2).
Example A – Responses to Questions #2-6

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>2) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis in the hospital or at a facility co-located™ with the hospital?</td>
<td>Yes</td>
</tr>
<tr>
<td>3) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis outside of the hospital at a separate hospital outpatient location that shares your hospital’s license and CMS Certification Number?</td>
<td>Yes</td>
</tr>
<tr>
<td>If “no” to question #3, skip questions #4-5 and continue on to question #6.</td>
<td>No</td>
</tr>
<tr>
<td>4) How many separate hospital locations that perform the procedures listed in Section 10C (questions #2-11) on an outpatient basis share the hospital’s license and CMS Certification Number?</td>
<td>1</td>
</tr>
<tr>
<td>5) Please provide the name and physical address of one of the separate hospital outpatient locations from question #3 where the hospital is performing the procedures listed in Section 10C (questions #2-11) on an outpatient basis.</td>
<td>Outpatient Surgery Center, 1 Main Street, Washington 20878</td>
</tr>
<tr>
<td>6) For the purposes of responding to the questions in Section 10 Outpatient Procedures, please select a location to report on: Hospitals should either choose to report on their hospital (including all outpatient departments/procedures in the hospital and/or at outpatient locations co-located with the hospital) OR one separate hospital outpatient location listed in question #5.</td>
<td>Hospital Separate hospital location listed in question #5</td>
</tr>
</tbody>
</table>
Hospitals with Multiple Outpatient Procedure Locations

Example B:

- Multi-campus hospital performs outpatient procedures listed in Section 10C at two hospitals (location 1 and location 2) and one endoscopy center down the street (location 3).

- All 3 locations share the same CCN.

- For the purposes of reporting on Section 10, only one of the two hospitals (either location 1 or location 2) can choose to report on the endoscopy center (location 3). The other hospital must report on their own facility.

- All questions in Section 10 should be responded to based on the selected location (either location 1 or location 2 or location 3).
### Example B – Responses to Questions #2-6

#### Location 1:

<table>
<thead>
<tr>
<th>Question</th>
<th>Location 1</th>
<th>Location 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>2) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis in the hospital or at a facility co-located with the hospital?</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>3) Does your hospital perform any of the procedures listed in Section 10C (questions #2-11) on an outpatient basis outside of the hospital at a separate hospital outpatient location that shares your hospital’s license and CMS Certification Number? If “no” to question #3, skip questions #4-5 and continue on to question #6.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>4) How many separate hospital locations that perform the procedures listed in Section 10C (questions #2-11) on an outpatient basis share the hospital’s license and CMS Certification Number?</td>
<td>I</td>
<td>I</td>
</tr>
<tr>
<td>5) Please provide the name and physical address of one of the separate hospital outpatient locations from question #3 where the hospital is performing the procedures listed in Section 10C (questions #2-11) on an outpatient basis:</td>
<td>Endoscopy Center 1 Main Street Washington 2678</td>
<td>Endoscopy Center 1 Main Street Washington 2678</td>
</tr>
<tr>
<td>a) Name</td>
<td>Hospital</td>
<td>Hospital</td>
</tr>
<tr>
<td>b) Street Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) City</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Zip Code</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6) For the purposes of responding to the questions in Section 10 Outpatient Procedures, please select a location to report on: Hospitals should either choose to report on their hospital (including all outpatient departments/procedures in the hospital and/or at outpatient locations co-located with the hospital) OR one separate hospital outpatient location listed in question #5.</td>
<td>Hospital Separate hospital location listed in question #5</td>
<td>Hospital Separate hospital location listed in question #5</td>
</tr>
</tbody>
</table>

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Hospitals with Multiple Outpatient Procedure Locations

Example C:

• Hospital performs the outpatient procedures listed in Section 10C at the hospital (location 1) \textbf{and} in a separate outpatient surgery center down the street (location 2) and at an ambulatory surgery center (location 3), which is a joint venture with a local physician group.

• The hospital (location 1) and outpatient surgery center (location 2) share a CCN. The ambulatory surgery center (location 3) does NOT share a CCN with the hospital. It has a 10-digit CCN (nn-Cnnnnnnnn) indicating it is an ambulatory surgery center.

• For the purposes of reporting on Section 10, the hospital can choose to report on the hospital (location 1) \textbf{OR} the separate outpatient surgery center (location 2), but cannot combine the data for both locations.

• The ASC (location 3) must submit a Leapfrog ASC Survey. The hospital cannot choose location 3 when responding to questions in Section 10 on the Leapfrog Hospital Survey.
Survey Content Organization

Each section of the Survey is organized in the same format in the hard copy of the Hospital Survey and the Online Hospital Survey Tool:

**General information** about The Leapfrog Group standard (included in the hard copy only).

**Reporting periods** to provide hospitals with specific periods of time for each set of questions.

**Survey questions** which may include references to endnotes. The Hospital Survey questions and endnotes match the Online Hospital Survey Tool exactly.

**Affirmation of accuracy** by your hospital’s CEO or by an individual that has been designated by your hospital’s CEO. These statements affirm the accuracy of your hospital’s responses.

**Reference information** which includes ‘What’s New’ and ‘Change Summaries,’ important measure specifications, answers to frequently asked questions, and other notes that must be carefully reviewed before providing responses to any of the Hospital Survey questions (included in the hard copy only).
10A: Basic Outpatient Department Information

Questions about locations that perform outpatient procedures in Section 10C

• Number of locations performing outpatient procedures, if applicable
• Number of operating rooms
• Number of endoscopic procedure rooms
• Transfer policies and agreements, if applicable
10A FAQs

How should our facility report on the number of operating rooms and endoscopic procedure rooms in questions #7-8 if our operating/procedure rooms are used for both inpatient and outpatients?

Facilities should report on the total number of adult and pediatric operating rooms or procedure rooms if these rooms are used for both inpatient and outpatients. Otherwise, facilities should only report on the number of operating/procedure rooms that are used for outpatients.
10B: Medical, Surgical, and Clinical Staff

Questions about the training and education of medical, surgical, and clinical staff

- Advanced Cardiovascular Life Support (ACLS) certification
- Pediatric Advanced Life Support (PALS) certification
- Board certification for physicians, anesthesiologists, and certified nurse anesthetists
10B FAQs

How does Leapfrog define board certified and board eligible?

For physicians:

• **Board certified** means that the physician has been awarded certification from the American Board of Medical Specialties (ABMS) or the American Osteopathic Association (AOA).

• **Board eligible** indicates that the physician has completed their initial training/fellowship, but has not yet passed an existing board-certifying exam in a specialty. Leapfrog adheres to the ABMS and AOA Board Eligibility Policy for all specialties, which may be reviewed here: [https://www.abms.org/media/176507/abms-board-eligibility-overview-and-faqs-abmsorg20180511.pdf](https://www.abms.org/media/176507/abms-board-eligibility-overview-and-faqs-abmsorg20180511.pdf) and [https://certification.osteopathic.org/about/](https://certification.osteopathic.org/about/), respectively. These eligibility periods provide the physician with an adequate window to take her/his boards and re-take if necessary.

For CRNAs:

• **Board certified** means that the RN has been awarded certification from The National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA).

• **Board eligible** indicates that the registered nurse (RN) has completed their nurse anesthesia education program accredited by the Council on Accreditation of Nurse Anesthesia Education Programs (COA), but has not yet passed their board-certifying exam. Leapfrog adheres to the NBCRNA Board Eligibility Policy, which states that RNs are eligible to take the National Certification Exam (NCE) within 2-years of completing their accredited nurse anesthesia education program. This policy may be reviewed here (p.8): [https://www.nbcrna.com/docs/default-source/initialcertification/program-administration/nce_hb.pdf](https://www.nbcrna.com/docs/default-source/initialcertification/program-administration/nce_hb.pdf). These eligibility periods provide RNs with an adequate window to take her/his boards and re-take if necessary.
In Section 10B questions #1-4, what staff should be included when reviewing ACLS/PALS certification? Would this include inpatient staff as well?

Questions #1-4 refer to the staff that are present when patients are recovering from the outpatient procedures specified in Section 10C Volume and Safety of Procedures. You should only select a staff type in questions #2 and #4 if all staff of that type that are present when patients are recovering are required to maintain certification.

In Section 10B questions #5-6, should we include all physicians and anesthesiologists/nurse anesthetists that work in our outpatient areas when determining how many are board certified or board eligible?

No. Questions #5-6 are only asking about board certification/board eligibility for those physicians and anesthesiologists/nurse anesthetists that are authorized to perform the outpatient procedures specified in Section 10C Volume and Safety of Procedures.
10C: Volume and Safety of Procedures

Questions about the volume of procedures and processes and structures in place to ensure patient safety

- Volume of adult and pediatric procedures
- Patient follow-up and after-hours communication
- Patient selection and consent to treat
- Safe surgery checklist
10C FAQs

We do procedures within the specialties that Leapfrog has included, but the CPT codes are not listed. What should we do?

Please reach out to the Leapfrog Help Desk if you believe additional CPT Codes Ranges from the AHRQs CCS should be added to the Survey; Leapfrog will take these suggestions to our technical experts.

When counting patients for the purposes of identifying total volume in Section 10C, should we only include patients with scheduled outpatient procedures? Should we include patients with scheduled outpatient procedures that had to be admitted or transferred? Should we include patients with urgent/emergent procedures?

When counting patients for the purposes of identifying total volume in Section 10C, you should include all patients with procedures performed at the facility selected in Section 10A question #6 (your hospital or a separate hospital outpatient location) if their procedure was scheduled as an outpatient procedure and can be identified using the CPT codes provided in the measure specifications on pages 230-248 of the hard copy of the Survey. You should include scheduled outpatient procedures where the patient had to be admitted as an inpatient or for observation, as well as scheduled outpatient procedures where the patient had to be transferred to another location.

All emergent/urgent cases should be excluded, such as procedures for patients that come through the emergency department.
10C FAQs (cont.)

How should we answer the Safe Surgery checklist questions if we are not using one of the standard tools (WHO Surgical Safety Checklist, TJC Universal Protocol, AORN Comprehensive Surgical Checklist)?

In 2019, please answer the questions in Section 10C regarding the Safe Surgery Checklist according to the checklist you are currently using. If you are unable to answer the questions because your checklist does not include the steps we are asking about, please go back to question #32 and answer "no." Leapfrog is accepting examples of modified checklists and will be reviewing them with our technical experts for 2020.

Does the safe surgery checklist referenced in Section 10C questions #31-37 apply to all procedures, including colonoscopies, endoscopies, etc.?

Yes, it applies to all procedures in Section 10C questions #2-11. If your facility does not utilize a safe surgery checklist for colonoscopy and/or endoscopy, respond “no” to question #32.
Patient Safety Practices

Section 10D in the Leapfrog Hospital Survey:

Medication and allergy documentation (Section 4A in the Leapfrog ASC Survey)

Section 4 in the Leapfrog ASC Survey:

Medication Safety
- Medication and allergy documentation
- Antimicrobial Stewardship Practices (Section 7C in the Leapfrog Hospital Survey)

NHSN Outpatient Procedure Component (OPC) Module (Section 7B in the Leapfrog Hospital Survey)

Hand Hygiene (Section 6F in the Leapfrog Hospital Survey)

Select NQF Safe Practices
- Culture of Safety Leadership Structures and Systems (Section 6A in the Leapfrog Hospital Survey)
- Culture Measurement, Feedback, and Intervention (Section 6B in the Leapfrog Hospital Survey)
- Risks and Hazards (Section 6C in the Leapfrog Hospital Survey)

Policies related to Never Events (Section 7A in the Leapfrog Hospital Survey)
10E: Patient Experience (OAS CAHPS)

Questions about domain scores and selected aggregated question responses from the Outpatient and Ambulatory Surgery (OAS) CAHPS Survey

• Leapfrog will accept responses from hospitals administering the OAS CAHPS Survey regardless of whether they are submitting the data to CMS
• Leapfrog will accept responses from hospitals administering the OAS CAHPS Survey using modes not yet approved by CMS, such as electronic administration

Only applicable for facilities with at least 300 eligible discharges (adult patients who had both medically and non-medically necessary surgeries and/or procedures) and at least 100 returned surveys during a 12-month reporting period

Facilities that are not yet administering the OAS CAHPS Survey can still report to Section 10 Outpatient Procedures. They will simply answer “no” to the corresponding questions.
10E FAQs

Why is Leapfrog asking for results of the OAS CAHPS Survey, given that it is not required by CMS and many facilities are not currently administering it?
While we understand that the OAS CAHPS Survey is still a voluntary component of the CMS ASC Quality Reporting Program, this survey is the only nationally standardized instrument designed to compare patient experience in both HOPDs and ASCs. No other survey has been tested and validated for this purpose. All measures included in Leapfrog’s programs are predicated on the latest evidence and recommended by Leapfrog’s panels of experts. They are also selected because of their importance to consumers, employers, and other purchasers. Leapfrog will continue to include these questions on the Leapfrog Hospital Survey/Leapfrog ASC Survey and would welcome additional feedback from participating facilities.

Isn’t 300 returned surveys the minimum sample size recommended by CMS?
Yes; however, Leapfrog has received feedback that many hospitals and ambulatory surgery centers have only recently started to administer the survey. In order to ensure as many hospitals and ambulatory surgery centers as possible are able to report on this subsection, we have reduced the minimum sample size for reporting results to the Leapfrog Hospital and ASC Surveys to 100 returned surveys. This will help ensure that hospitals and ASCs that have made the investment to administer the Survey are able to earn credit for doing so. Additionally, this minimum sample size aligns with Section 9A of the Leapfrog Hospital Survey, which asks about CAHPS Child Hospital Survey, and with the CMS requirement for the CAHPS Hospital Survey. If possible, however, it is recommended that facilities (or their survey vendor) administer the survey to a large enough sample in order to achieve 300 returned surveys in a 12-month reporting period.

We administer our own patient experience survey to collect specific information about our patient’s experience. Can we report the results from our facility’s patient experience survey?
No; facilities can only report the results of the official OAS CAHPS Survey on Section 10E of the Leapfrog Hospital Survey. However, according to the OAS CAHPS Protocols and Guidelines Manual, survey vendors and ASCs/HOPDs may choose to add up to 15 supplemental questions after the ‘core’ OAS CAHPS Survey questions that are personalized to the facility/vendor. More information on these supplemental questions, including restrictions and required approval, may be reviewed on pages 21-22 of the CMS OAS CAHPS Survey Protocols and Guidelines Manual, which is available for download here: https://oascahps.org/Survey-Materials. Please note, the responses to these supplemental questions will not be reported on the Leapfrog Hospital Survey.
Upcoming Events


- The Leapfrog Group, in partnership with DHG Healthcare, will be holding an in-person training and orientation for hospital and ambulatory surgery center leaders during the 2019 DHG Symposium on June 4 and 5 in Orlando, FL.
Technical Assistance

Survey Webpages

• www.leapfroggroup.org/hospital

Leapfrog Help Desk

• https://LeapfrogHelpdesk.zendesk.com
Questions?