NACOR Vendor News
Monday, February 19, 2018

Final quality reporting deadline today
The final deadline to report the following quality components is today:

- Selecting a 90-day reporting period in the NACOR dashboard. Click here for instructions.

- Selecting a Pick Your Pace option

- Reconciling provider lists: ensuring all NPIs are assigned the proper provider type (MD-Anesthesia, CRNA, DO, AA, SRNA, Resident, etc.) all NPIs are correct and the TIN is correct

- December 2017 data submissions and corrected files for dates of service prior to December 2016

Note: The deadline to attest to Improvement Activities (IAs) is extended until February 28.

See below for detailed explanations regarding each item.

Review your NACOR dashboard
Remember to review your 2017 quality reports in the NACOR dashboard. Reviewing reports helps identify measure gaps and monitor providers' performances in meeting 2017 reporting requirements. For more information, email askaqi@asahq.org.

Improvement Activity Attestation – Date range required in NACOR dashboard
CMS requires all QR and QCDR data submissions for Improvement Activities to include a date range in which ECs performed their activities. This functionality has been added to the NACOR dashboard. Please review instructions on how to enter the date range for which the EC performed the activity. If you have attested to Improvement Activities, you must go to the dashboard and enter the date range.

For those practices that have selected the Test Option and are attesting to one Improvement Activity please enter the date range for which you performed the activity (one day, one week or a month).

MIPS pace for Quality Component in NACOR dashboard
Practices electing to report for a specific MIPS pace (Test, Partial (90 days) or Full Year) can select their pace option in the NACOR dashboard. Click here for instructions on selecting your pace. The select your pace option is not mandatory. No selection will indicate that all data received by NACOR will be submitted to CMS. Selecting Partial Year reporting will require a date range.

Reporting for 90 consecutive days
Many practices have asked about reporting for 90 days consecutively for a number of MIPS measures, then a second 90 days consecutively for the remaining MIPS measures to total six measures based on information in the 2017 final rule. AQI sought clarification and received the following information:

"*When it comes to reporting the categories for MIPS, you may not report one category for different 90-day time frames. You must report them in 90-consecutive-day time periods. You may submit Quality for one 90-day time frame, and then ACI for another and same for IA.*"
– QPP Service Center

Individual Quality Reporting? Check provider lists before February 28

If your eligible clinicians (ECs) are enrolled in 2017 **individual** quality reporting, please review your provider lists. All ECs should either have "Yes" or "N/A" listed in the Consent Received column. If you see "No" in this column, you must take action. If you are planning to send data for these ECs, AQI needs a signed consent form for each of them by February 28. If you are not planning to send data, go into your NACOR dashboard and change the Report to CMS field to "No." AQI's NACOR will not be able to submit quality reporting data to CMS if the consent form is not complete by February 28. For more information email Margaret Bussan.

Report to CMS field for Group Reporting practices

For practices that have elected Group Reporting for 2017, the Report to CMS field on the provider list in the NACOR dashboard is defaulted to "Yes." Practices do not have the ability to edit this field because, according to CMS, "a group electing to submit data at the group level will have its performance assessed and scored across the TIN, which could include items and services furnished by individual NPIs within the TIN who are not required to participate in MIPS. For example, excluded clinicians are part of the group, and therefore, would be considered in the group's score." Failing to report on all the group's clinicians could adversely impact the group's score.

Provider type "Other"

While reconciling provider lists, make sure all NPIs are assigned the proper provider type (MD-Anesthesia, CRNA, DO, AA, SRNA, Resident, etc.). AQI has discovered in many cases Residents and SRNAs are listed as "Other." All providers with a provider type of "Other" will have their data submitted to CMS. This guide will help in updating your list. Provider lists must be reconciled by today.

Submit all measures under MIPS

Last year AQI helped practices choose their best nine measures for PQRS because reporting more than nine measures could have adversely affected the Value Modifier. For 2017 MIPS reporting, *this is no longer true*. Reporting more than the required six measures may benefit your group if you report more than one outcome measure or high-priority measure. CMS will choose the best six measures and evaluate any additional measures appropriately to achieve the best score for the MIPS Quality Component based on data submitted. For more information, refer to the MIPS Scoring 101 Guide.

2017 NACOR Quality Reporting Deadlines

~~01/31/2018~~   ~~January – November 2017 Data Submission~~

02/19/2018   All Data Submissions;

                   In NACOR Dashboard:

                        CMS Opt-Out

                        TIN/NPI Reconciliation

02/28/2018   Individual Quality Reporting Consent Submission

03/16/2018   If a practice does not pay its final invoice in full by this date, the practice's data may not be submitted to CMS.