

Improvement Activity Attestation Using the NACOR Dashboard

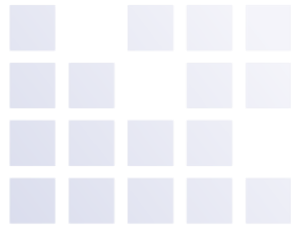
Individual and Group Reporting

December 2022



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2022 Improvement Activity Requirements

- To earn points the individual or practice needs to perform or participate in any improvement activity for a minimum of *90 consecutive days*
- For practices reporting as a group to attest to an activity at least 50% of the clinicians (under the Tax ID number (TIN)) must perform the same activity during any continuous 90-day period, or as specified in the activity description, within the same performance period.
- Practices should maintain documentation for 6 years. Documentation should include a list of the NPIs that participated in the activity as well as how the IA was completed.
- The Improvement Activity component requirement is 40 points total

AQI Resources for Improvement Activities:

- [2022 AQI Supported Improvement Activities for Anesthesiology](#)

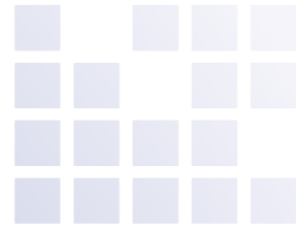
For Group Reporting Practices: How to Attest



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Group Reporting Attestation



— To add a new Improvement Activities (IA) click 

Improvement Activity

IA_AHE_5 - MIPS Eligible Clinician Leadership in Clinical Trials or CBPR x

| Start Date | End Date | Documentation Date | Weight |
|--|--|--|--------|
| 01/01/2021  | 03/31/2021  | 06/17/2021  | Medium |

Comment

Optional field (e.g. record documentation type and where you saved it)

All three checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

- I attest that 50% of the clinicians who have a National Provider Identifier (NPI) in this group participated and/or completed the IA during a continuous 90-day period (or the time period as specified in the activity description) in the same 2020 performance year.
- I attest that I have documentation that confirms (1) those NPIs that completed this IA; (2) that at least 50% of the NPIs within the group completed this IA; and (3) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the CMS Quality Payment Program [website](#).
- I understand this documentation must be maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

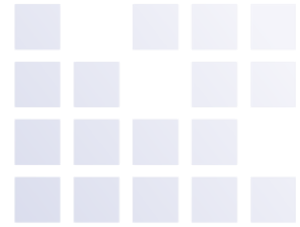
Step 6.
Click to
save IA

Step 3. Select the IA
from the drop-down
list

Step 4. Enter the start, end,
and documentation dates (
min. 90-day period)

Step 5. Check
each box

Group Reporting Attestation



– To view or edit the list of Improvement Activities (IA) that the group is attesting for:

NACOR
Anesthesia Quality Institute®

ORS Test Practice x

XXXXX3333(ABC TIN) x

Dashboard

Quality Measures

Improvement Activity List

Provider Performance List

TIN Performance Summary

Data

Data Export

Historic Submissions

Resources

Admin

Account

QCQR - Group

2019 2020 2021

2021 Group Improvement Activities

Export the provider list to track 50% of the providers participated in the IA. The provider list can be maintained for documentation.

NPI List Export

The IA list will show here

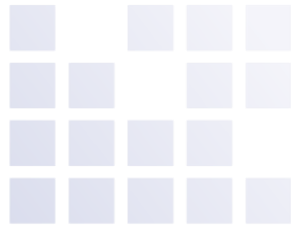
To make any edits select icon on left and select again to save

| Improvement Activity | Start Date | End Date | Documentation Date | Weight |
|--|------------|------------|--------------------|--------|
| IA_AHE_5 - MIPS Eligible Clinician Leadership in Clinical Trials or CBPR | 01/01/2021 | 03/31/2021 | 06/17/2021 | Medium |

All three checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

- I attest that 50% of the clinicians who have a National Provider Identifier (NPI) in this group participated and/or completed the IA during a continuous 90-day period (or the time period as specified in the activity description) in the same 2020 performance year.
- I attest that I have documentation that confirms (1) those NPIs that completed this IA; (2) that at least 50% of the NPIs within the group completed this IA; and (3) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the CMS Quality Payment Program [website](#).
- I understand this documentation must be maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

1 total



Group Reporting Attestation

2021 Group Improvement Activities

Export the provider list to track 50% of the providers participated in the IA. The provider list can be maintained for documentation.



| Npi | First Name | Last Name | Provider Type | Provider Status | Completed IA_AHE_6 - Provide Education Opportunities for New Clinician | Completed IA_BE_13 - Regularly assess the patient experience of care |
|------------|------------|-----------|---|-----------------|--|--|
| 3000000039 | Abdul | Grennan | Anesthesiologist | Active | Yes | Yes |
| 3000000069 | Ahmad | Wark | Registered Nurse | Active | Yes | Yes |
| 3000000068 | Alan | Mitchel | Anesthesiologist | Active | Yes | Yes |
| 3000000074 | Alberto | Mohr | Certified Registered Nurse Anesthetist (CRNA) | Active | Yes | Yes |
| 3000000048 | Alejandro | Rostad | Anesthesiologist | Active | Yes | |
| 3000000094 | Alvin | Nuckols | Anesthesiologist | Active | Yes | |
| 3000000066 | Arden | Platt | Anesthesiologist | Active | Yes | Yes |
| 3000000072 | Arnold | Denicola | Certified Anesthesiologist Assistant (AA) | Active | Yes | Yes |

For Individual Reporting Practices: How to Attest



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Individual Provider Attestation

Reminder: This process should be followed for practices who are reporting individually

- Log in to the NACOR dashboard and select Quality Measure then select Improvement Activity List located on the left side menu

The screenshot shows the NACOR Anesthesia Quality Institute dashboard. At the top, there is a logo for NACOR and the text 'Anesthesia Quality Institute'. Below the logo, there is a dropdown menu showing 'ORS Test Practice x'. Underneath that, there is a text input field containing 'XXXXX3333(DCAA) x'. A blue callout box with an arrow points to this field, containing the text: 'Use the drop-down menu to select TIN* (For practices that may be reporting multiple TINs)'. Below the input field is a sidebar menu with the following items: 'Dashboard', 'Quality Measures', 'Improvement Activity List', 'Provider Performance List', and 'TIN Performance Summary'. Two blue callout boxes with arrows point to the 'Quality Measures' and 'Improvement Activity List' items, with the text 'Step 1: Select' and 'Step 2: Select' respectively.



Individual Provider Attestation

– To add a new Improvement Activities (IA) click 
2021 Individual Improvement Activities Multiple Add

Step 1:
Select your
IA from the
drop-down
menu

Improvement Activity

Select Activity

Start Date End Date Documentation Date

Comment

Both checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

I attest that I have documented (1) the NPI that completed this IA; and (2) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the [Patient Program website](#).

I understand this documentation is maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

Step 2: Enter the
start, end, and
documentation dates
(min. 90-day period)

**Optional field (e.g. record
documentation type and
where you saved it)**

Step 3: Select
both
checkboxes.

Step 4: Select
the box for the
provider(s) for
which you are
attesting for

Providers

Select all

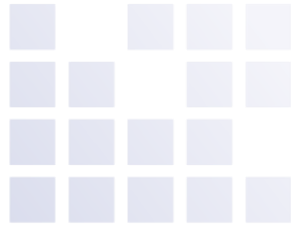
3000000109

3000000110

Add

**For Individual Reporting
make sure not to select all.
This will result in an
incorrect attestation**

Step 5: Select to save IA



Individual Provider Attestation

- To view IA by provider select the provider from the drop-down menu

2021 Individual Improvement Activities

Providers

Bolt , King - 3000000077

Select the drop down and select the provider to view their IA list

IA list will appear in this box

Select the icon on the left to make any changes, and select again to save changes

| Improvement Activity | Start Date | End Date | Documentation Date | Weight |
|--|------------|------------|--------------------|--------|
| IA_AHE_5 - MIPS Eligible Clinician Leadership in Clinical Trials or CBPR | 01/01/2021 | 03/31/2021 | 06/17/2021 | Medium |

Comment

Both checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

I attest that I have documentation that confirms (1) the NPI that completed this IA; and (2) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the CMS Quality Payment Program [website](#).

I understand this documentation must be maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

Improvement Activity

IA_BE_4 - Engagement of patients through implementation of improvements in patient portal

| Start Date | End Date | Documentation Date | Weight |
|------------|------------|--------------------|--------|
| 01/01/2021 | 03/31/2021 | 06/17/2021 | Medium |

Comment



Group Reporting Attestation

Reminder: This process should be followed for practices who are group reporting

- Log in to the NACOR, and select Quality Measure then select Improvement Activity List located on the left side menu

2021 Group Improvement Activities

Export the provider list to track 50% of the providers participated in the IA. The provider list can be maintained for documentation.

NPI List Export

ORS Test Practice x

XXXXX3333(ABC Tin) x

Dashboard

Quality Measures

Improvement Activity List

Provider Performance List

TIN Performance Summary

Data

0 total

No data to display

Step 1. Click Quality Measures then Improvement Activity List

Use the drop-down menu to select TIN* (For practices that may be reporting multiple TINs)

Step 2. Click this button to begin attesting