

## Quality Reporting Office Hours

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**April 10, 2018**

# Agenda

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## AQI Update

- 2018 MIPS Quality Reporting Registration
- Housekeeping Items

## QRA Update

- MIPS Eligibility Tool
- Improvement Activities Materials
- Measure Coding Review – Quantum 31
- 2017 Benchmarking/Score Reports

# 2018 MIPS Eligibility Tool

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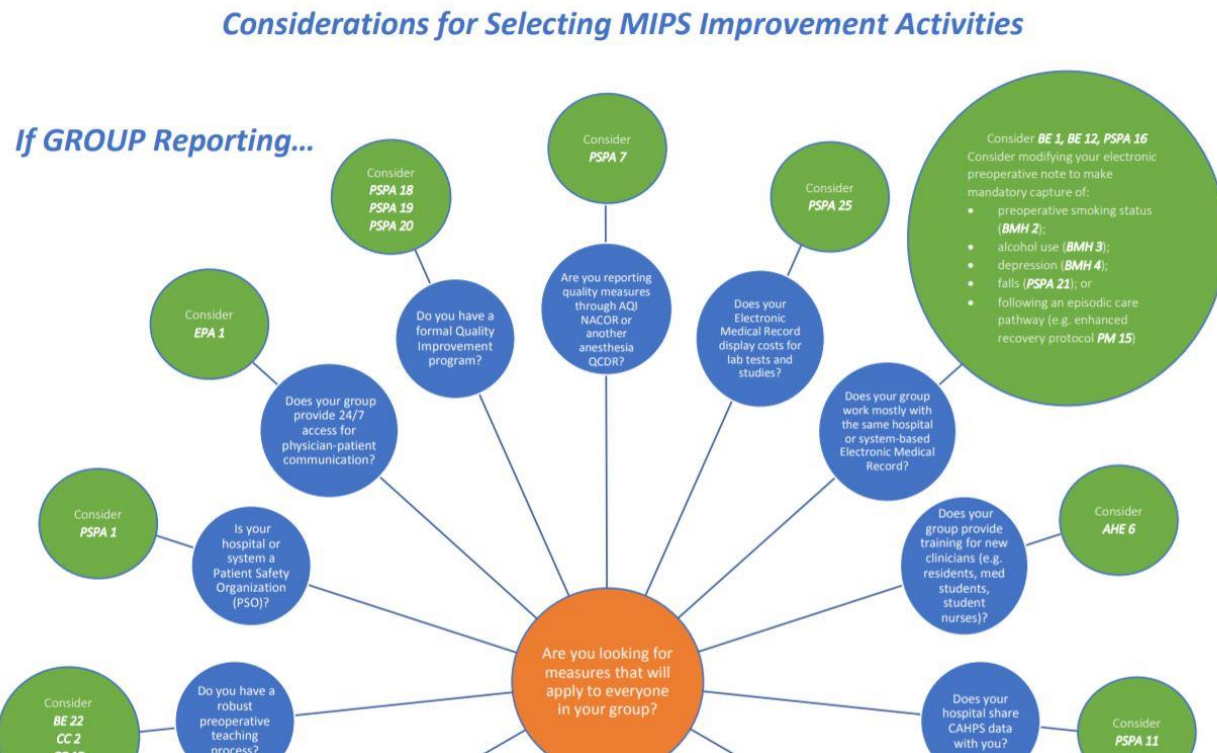
- The 2018 MIPS eligibility tool is now **live!**
- Visit the tool to determine if you are eligible for MIPS reporting at the individual and group levels.

<https://qpp.cms.gov/participation-lookup>

*Reminder: Reporting period for Quality component is **12 months**.*

# Additional ASA Guidance on Improvement Activities

- ASA released additional guidance on Improvement Activities this week.
- o [Considerations for Selecting Improvement Activities Flowchart](#)



# Additional ASA Guidance on Improvement Activities

## ○ Downloadable Guidance Templates (10)

### 2018 SUGGESTED DOCUMENTATION GUIDANCE FOR MIPS IMPROVEMENT ACTIVITY (IA\_BE\_6)

The template and recommended actions below contains suggestions from the American Society of Anesthesiologists® (ASA) for physician anesthesiologists and their practices to use when documenting a specific Merit-based Incentive Payment System Improvement Activity. Practices may use this template to document certain actions described by [CMS Validation Criteria](#).

This template has **not** been validated or approved by the Centers for Medicare & Medicaid Services (CMS). Practices may also wish to include additional data or actions not listed below to meet CMS validation criteria.

#### IA\_BE\_6: Collection and follow-up on patient experience and satisfaction data on beneficiary engagement

Part 1: Documentation Background	
Name	
Date	
Practice Name	
Practice Mailing Address	
City, State, Zip Code	
Phone Number	
National Provider Identifier(s)	
Individual or Group Reporting	
If group, number of Eligible Clinicians (ECs) in the group	
Attestation Period (Include Year)	

Part 2: IA_BE_6, CMS Specifications	
Activity ID and Name	IA_BE_6, Collection and follow-up on patient experience and satisfaction data on beneficiary engagement
Activity Description	Collection and follow-up on patient experience and satisfaction data on beneficiary engagement, including development of improvement plan.
Activity Weighting	High
CMS Validation Criteria	Patient experience and satisfaction data on beneficiary engagement is

### 2018 SUGGESTED DOCUMENTATION GUIDANCE FOR MIPS IMPROVEMENT ACTIVITY (IA\_PSPA\_1)

The template and recommended actions below contains suggestions from the American Society of Anesthesiologists® (ASA) for physician anesthesiologists and their practices to use when documenting a specific Merit-based Incentive Payment System Improvement Activity. Practices may use this template to document certain actions described by [CMS Validation Criteria](#).

This template has **not** been validated or approved by the Centers for Medicare & Medicaid Services (CMS). Practices may also wish to include additional data or actions not listed below to meet CMS validation criteria.

#### IA\_PSPA\_1, Participation in an AHRQ-listed patient safety organization

Part 1: Documentation Background	
Name	
Date	
Practice Name	
Practice Mailing Address	
City, State, Zip Code	
Phone Number	
National Provider Identifier(s)	
Individual or Group Reporting	
If group, number of Eligible Clinicians (ECs) in the group	
Attestation Period (Include Year)	

Part 2: IA_PSPA_1, CMS Specifications	
Activity ID and Name	IA_PSPA_1; Participation in an AHRQ-listed patient safety organization
Activity Description	Participation in an AHRQ-listed patient safety organization.
Activity Weighting	Medium
CMS Validation Criteria	Participation in an AHRQ-listed patient safety organization
CMS Suggested Documentation	Documentation from an AHRQ-listed patient safety organization (PSO)

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# Measure Coding Review – Quantum 31

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- Licensed measure from MEDNAX
- No AQI Measure ID
- Denominator includes CPT procedure codes, NOT ASA codes
  - Should be reported by providers who actually *place* the central line, NOT by providers who provide anesthesia for central line placement
- Further questions should be directed to MEDNAX (the measure steward)

# 2017 MIPS – Score Reports

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- CMS will be releasing final 2017 MIPS scores **on July 1, 2018**.
- Current reports in the CMS portal may not be reflective of your final MIPS score.
- Benchmarks for several measures are expected to be calculated using data submitted during 2017.
  - We expect the calculation of benchmarks using 2017 performance data to result in a modest improvement of final MIPS scores.

# Quality and Regulatory Affairs (QRA) Update (April 2018)

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Questions and comments on quality measures and regulatory information (e.g. reporting requirements, CMS regulation) should be sent to Quality and Regulatory Affairs staff.

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Quality and Regulatory Affairs ([gra@asahq.org](mailto:gra@asahq.org))

<https://www.asahq.org/quality-and-practice-management/quality-and-regulatory-affairs>

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ASA MACRA Webpage:

<http://www.asahq.org/macra>

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CMS Quality Payment Program Website:

<http://www.qpp.cms.gov>



# AQI - 2018 Quality Reporting

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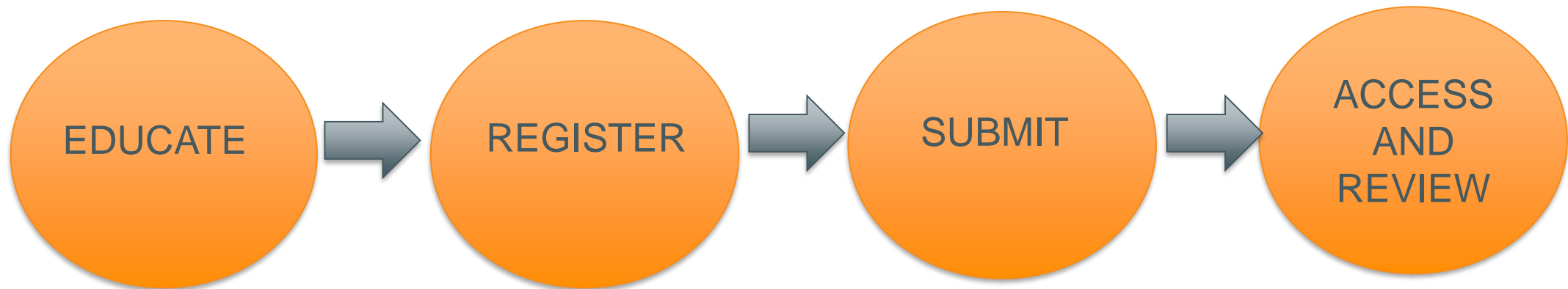
- Registration is now open!
  - o All practices (*new and returning*) interested in 2018 MIPS reporting need to complete the [2018 order form](#)

2018 NACOR Quality Reporting Deadlines	
10/31/2018	2018 NACOR registration deadline
12/15/2018	Enrollment in Merging and/or Formatting Services
01/31/2019	January – November 2018 Data Submission
02/15/2019	All Data Submissions; In NACOR Dashboard: CMS Opt-Out TIN/NPI Reconciliation Improvement Activity Attestation
02/28/2019	Individual Quality Reporting Consent Submission

# AQI - Prepare for Success

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- Understand the roles and responsibilities of the practice champion
- Review 2018 updates to the MIPS program as well as the 2018 resources on the AQI website
- Schedule a conference call with your account manager



# AQI - 2018 Quality Reporting Resources

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- [2018 QCDR Measure Booklet](#)
- [2018 MIPS Measures](#)
- [2018 Recommended Improvement Activities](#)

## Additional Resources:

- [QPP Website](#)
- [AQI Developers Resources](#)

# 2018 AQI Participant Survey

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- Survey emailed to AQI Champions week of March 26 and April 2nd
  - 12 Questions regarding AQI Participation, NACOR Dashboard and educational resources
  - Survey closes Friday, April 13<sup>th</sup>



# AQI - NACOR DASHBOARD

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- Dashboard was unlocked April 1
- Ability to view 2017 reports and make updates to the provider lists
- 2018 dashboard changes are in progress – Completion date TBD

# Next Quality Reporting Office Hours

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Tuesday, May 8th

11am CST

11am: <https://attendee.gotowebinar.com/register/6864633012486406659>

Do you have any feedback? We would love to hear how we can improve office hours! Let us know what you would like us to cover by emailing your suggestions to [askaqi@asahq.org](mailto:askaqi@asahq.org)!

# Q&A

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