

Quality Reporting Office Hours

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March 13, 2018

Agenda

AQI Update

- 2017 CMS Data Submission
 - Deadlines
 - Dashboard Lockdown
- 2018 Registration Process

Agenda

- **QRA Update**
 - 2018 QPP Requirements
 - Reporting Mechanisms

Purpose of 2017 MIPS Reporting Deadlines

AQI differs from CMS deadlines in order to allow practices to ensure all requirements are met and data is corrected before CMS final submission

2017 NACOR Quality Reporting Deadlines	
12/15/2017	Enrollment in Merging and/or Formatting Services
01/31/2018	January – November 2017 Data Submission
02/01/2018	Fully Executed Participation Agreement for 2017 Pick Your Pace Limited Service (i.e., NACOR Quality Concierge 90-day or 1 measure/1 case option, determined on a case-by-case basis depending on the complexity of the practice)
02/19/2018	All Data Submissions; In NACOR Dashboard: CMS Opt-Out TIN/NPI Reconciliation
02/28/2018	Individual Quality Reporting Consent Submission Improvement Activity Attestation
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.

NACOR Dashboard Update

- In order to prepare the final submission to CMS, AQR has locked the dashboard
 - Users will no longer be able to make any changes to their data, improvement activities or practices
- The dashboard will be unlocked on April 1, 2018 in preparation for 2018 MIPS Reporting
- Practices may still submit data, however, the NACOR dashboards will be unavailable until then

2018 Registration Process

- In order to renew your practice's quality reporting with AQI, all practices will need to complete an order form. <https://form.jotform.com/80196575850162>
 - Participation Agreements auto-renew
- Once order form is completed, practice will receive an invoice (if applicable) from ASA billing
- Upon payment, the practice champion will be contacted confirming the registration is complete
- If a practice does not owe an invoice to AQI, after completion of the order form the practice champion will receive confirmation of the quality reporting registration

2018 MIPS – Eligibility

- Not first year enrolled in Medicare
 - Not significantly participating in Advanced APMs
 - Exceeds low-volume threshold – ***Increased for 2018***
 - Bills at least \$90,000 Medicare Part B allowed charges
- AND***
- Sees 200 Medicare Part B patients per year
 - QPP Participation Tool update coming soon

2018 MIPS – Special Status

- Non-patient facing
- Hospital-based
- Small Practice
- Rural Practice
- Health Professional Shortage Area
- Ambulatory Surgical Center-based – **NEW in 2018**

CMS special status definitions/calculations: <https://qpp.cms.gov/participation-lookup/about>

2018 MIPS – Performance Period

- There are **no** “Pick-Your-Pace option” for 2018
 - Quality: 12 months
 - Cost: 12 months
 - Improvement Activities: 90 days
 - Advancing Care Information: 90 days

2018 MIPS – Quality Component

- Eligible clinician/group must report six (6) measures including one outcome or high-priority measure if an outcome does not apply
 - If fewer than 6 measures apply, the EC/group must report all applicable measures
- Anesthesiology Specialty Measure Set – ***Measure Added***
 - MIPS #463: Prevention of Post-Operative Vomiting (POV) – Combination Therapy (Pediatrics)*
- Data Completeness Requirements – ***Increase for 2018***
 - Report at least 60% of denominator-eligible cases for each measure

2018 MIPS – Cost Component

- MIPS ECs/groups will be evaluated on two cost measures in 2018:
 - Medicare Spending per Beneficiary
 - Total Per Capita Cost
- Calculated automatically by CMS, using administrative claims data
 - If data minimums are not met and no Cost component score can be calculated, Cost component will be reweighted to Quality
- Weighted at **10%** of total MIPS score

2018 MIPS – Improvement Activities

- ECs/groups must complete activities worth 40 points
- Special reweighting for the following providers:
 - Small, rural, HPSA and non patient-facing ECs/groups
- Perform activities for 90 days
- Yes/No attestation ***through AQI***
- Maintain documentation for six years
- Activities supported by AQI:
 - https://www.aqihq.org/files/MIPS/2018/CMS_POSTING_2018_Recommended_Improvement_Activities_for_Anesthesiology.pdf

2018 MIPS – Advancing Care Information

- **In 2018**, new exemptions were added in addition to the current exemptions (non-patient facing, hospital-based):
 - Ambulatory Surgery Center (ASC) based ECs – *automatic*
 - *Retroactively applied for 2017 performance year*
 - Small practices (15 or under ECs) – *application required*
 - *Only applies for 2018 and beyond*
- Apply for hardship exemption by December 31:
 - <https://qpp.cms.gov/mips/advancing-care-information/hardship-exception>
- AQI NACOR is ***not supporting*** ACI Component in 2018

2018 MIPS – Threshold and Payment Adjustment

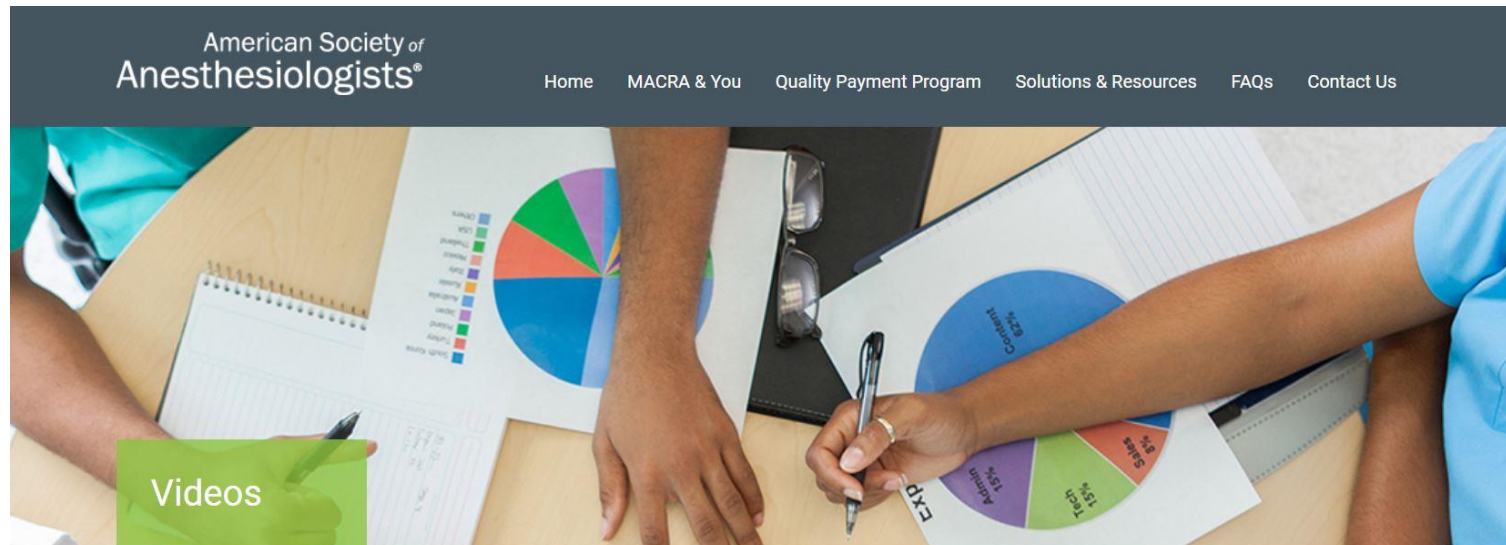
- Minimum threshold at 15 points
 - Submit at least 5 quality measures that meet data completeness criteria
 - Report required Improvement Activities
 - Meet ACI base score measures and one Improvement Activity
- Exceptional performer threshold at 70 points
- Payment adjustment at +/- 5%

Reporting Mechanisms

- Qualified Registry
 - Report MIPS measures **only**
- Qualified Clinical Data Registry (QCDR)
 - Report any combination of MIPS and QCDR measures
- If an EC/group cannot find six measures and reports via Qualified Registry they will go through the Eligible Measures Applicability (EMA)
- QCDR participants that do not have six measures are not subject to EMA

Check out ASA's 2018 MACRA Modules

- <http://www.asahq.org/macra/solutionsresources/macramodules>



MACRA Modules

ASA staff have produced several modules that detail how MACRA rules and regulations will impact anesthesiologists and anesthesia providers.



MACRA Module: Quality Payment Program Overview
2018 Performance Year / 2020 Payment Year



**MACRA Module:
MIPS Eligible Clinicians**

Quality and Regulatory Affairs (QRA) Update (March 2018)

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

Quality and Regulatory Affairs (gra@asahq.org)

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

ASA MACRA Webpage:

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

CMS Quality Payment Program Website:

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

Next Quality Reporting Office Hours

Tuesday, April 10th

11am CST

11am: <https://attendee.gotowebinar.com/register/7251915090744405762>

Q&A

