Quality Reporting Office Hours

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October 9, 2018
Agenda

QRA Update
- CMS Final Score Recalculation
- QRUR Update

AQI Update
- AQI Deadlines
- Provider Consents
- Annual Meeting Update
- AQI 54 & Quantum 31 Review
- Improvement Activity Attestation
CMS Final Score Recalculation

- CMS recalculated 2017 MIPS performance scores to address errors made in previous rounds (mostly affecting non-anesthesiologists)
- Practices may see a slight change in their payment adjustment
- Deadline to submit a targeted review for 2017 MIPS Performance is now October 15, 2018

More information is available on the QPP:
- Targeted review fact sheet
- Targeted review user guide
- Performance feedback fact sheet
- Payment adjustment fact sheet
QRUR Reminder

- The final payment year for the PQRS and Value Modifier program is 2018
- Practices will lose access to Quality and Resource Use Reports (QRURs) after December 31, 2018.
- Download prior to the deadline for your records.
- Visit the How to Obtain a QRUR webpage for more information.
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 (qra@asahq.org)

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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
# 2018 AQI Deadlines

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/11/18</td>
<td>2018 ASA Membership Renewal</td>
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<tr>
<td>10/31/18</td>
<td>2018 Standard Quality Reporting Registration</td>
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<tr>
<td>12/15/2018</td>
<td>Enrollment in Merging and/or Formatting Services</td>
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<tr>
<td>01/31/2019</td>
<td>January – November 2018 Data Submission</td>
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<tr>
<td>02/15/2019</td>
<td>All Data Submissions; In NACOR Dashboard: CMS Opt-Out TIN/NPI Reconciliation Improvement Activity Attestation</td>
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<tr>
<td>02/28/2019</td>
<td>Individual Quality Reporting Consent Submission</td>
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2018 Individual Quality Reporting

- CMS requires all practices who are submitting data via individual reporting to submit individual EC (eligible clinician) consent forms

- AQI cannot submit data on behalf of provider without consent

- Arbor Metrix will be sending out electronic consent forms in October & November on a bi-weekly basis
  - AQI Champions should ensure that all provider information (Name and Email Address) are up to date in Practice Provider Lists

- Practice Champions also have the option to submit manual consent forms. Please contact askaqi@asahq.org if you would like a manual consent form
Annual Meeting & AQM Update

Visit AQI at ANESTHESIOLOGY® 2018

- Have a question about NACOR or AQI? Meet your partners in quality reporting at the AQI Booth in the ASA Resource Center at ANESTHESIOLOGY® 2018 in San Francisco. The AQI team will be at the booth October 13 – 16

Quality Reporting Workshop at the Anesthesia Quality Meeting (AQM)

- Learn how to have success at MACRA reporting in the future at AQI's upcoming pre-conference workshop "MACRA and Beyond - Successfully Reporting to NACOR" before the Anesthesia Quality Meeting. The optional pre-conference meeting is scheduled on Friday, November 16, at ASA headquarters in Schaumburg, Illinois.
Improvement Activity Reminder

- Improvement Activities must be attested to for a minimum of 90 days

- The last 90 day period began on October 2\textsuperscript{nd}, 2018

- For guidance regarding improvement activities, please review the following resources:
  
  o [Recommended Improvement Activities for Anesthesiology (PDF)](https://www.aqihq.org/MACRAOverview.aspx)
  o [Improvement Activity Recommendation Flowchart (PDF)](https://www.aqihq.org/MACRAOverview.aspx)
  o [ASA MIPS Improvement Activities Templates](https://www.aqihq.org/MACRAOverview.aspx)
  o [Attesting to Improvement Activities (PDF)](https://www.aqihq.org/MACRAOverview.aspx)

This can also be found on the AQI website here: [https://www.aqihq.org/MACRAOverview.aspx](https://www.aqihq.org/MACRAOverview.aspx)
We have had multiple practices experience reporting issues with this measure.

If you have been collecting data on this measure but do not see it in your measure reports, please ensure that your data file includes the following for this measure:

```xml
<AnesthesiaMethodSet>
  <AnesthesiaMethod>
    <AnesthesiaCategory>Neuraxial</AnesthesiaCategory>
    <AnesthesiaSubCategory>Spinal</AnesthesiaSubCategory>
  </AnesthesiaMethod>
</AnesthesiaMethodSet>
```

The Anesthesia Subcategory needs to be **spinal only** in order to appear in the dashboard.
Measure Coding Review: Quantum 31

- Percentage of patients, regardless of age, in whom ultrasound guidance is used by the anesthesia clinician when placing a central line for those central lines that are placed in the internal jugular location.

- Licensed measure from MEDNAX

- No AQI Measure ID (use “Quantum31” as the value for “QCDRMeasure”)

- Denominator includes CPT procedure codes, NOT ASA codes

- AQI added NACOR Registry codes for reporting denominator / numerator conditions.

- 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)
Measure Coding Review: Quantum 31

- Denominator All patients, regardless of age, who undergo internal jugular central line placement by the anesthesia clinician. Denominator Criteria (Eligible Cases):
  - All patients, regardless of age AND Patient encounter during the reporting period (CPT):
    - 36555, 36556, 36557, 36558, 36560, 36561, 36563, 36565, 36566, +76937, 93503
    - AND Internal jugular site insertion 10A66
  - Denominator Exclusions / Exceptions
    - None
Next Quality Reporting Office Hours

Tuesday, November 13th
11am CST

Registration Link:

https://asahq.zoom.us/webinar/register/WN_NPNtdGm3ThGVeKUlLipoag