

# Quality Reporting Office Hours

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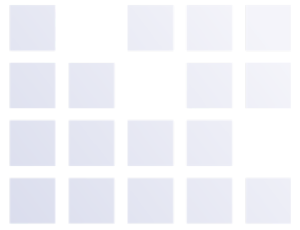
Leslie Kociemba, Senior Quality Associate

April 9, 2019



American Society of **Anesthesiologists**<sup>®</sup>

[aqihq.org](http://aqihq.org)



# Agenda

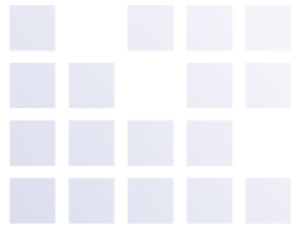
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## AQI

- 2018 MIPS Scores
- NACOR Dashboard
- Lessons Learned from Reconciliation
- Provider List Clean Up

## QRA

- 2017 MIPS Experience Report
- Opting In vs Voluntary reporting
- Internal Improvement Measures



# AQI - 2018 MIPS Scores

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- CMS will be releasing final 2018 MIPS scores in July 2019
- Current scores in the CMS portal may not be reflective of your final MIPS score.
- Practice will need a [HARP account](#) in order to access the preliminary and final scores in the Quality Payment Program Portal.
  - [CMS Video](#) on creating a QPP Account

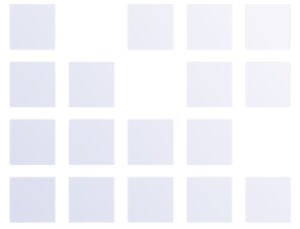
# AQI – NACOR Dashboard

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- Dashboard was unlocked April 8, 2019
- Make updates to your provider and facility lists
- 2019 Updates
  - NACOR Basic Reports
  - Data Completeness Reports
  - 2019 CMS Quality Reports will not be available until transition to new dashboard



# 2018 Lessons Learned from Reconciliation



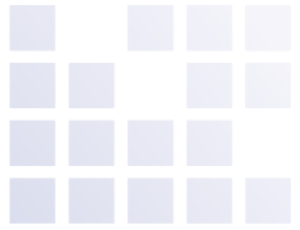
Groups who practice in a care team model but do not employ the CRNAs should make sure the billing/software company does not submit the CRNA data to AQI/NACOR



Update your provider list  
- Use the remove function



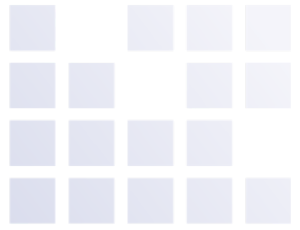
Locum Tenens – should not appear in your data if the billing is done correctly. Locums should be billed using the NPI for the provider they are covering and the Q6 modifier



# AQI – Provider List Clean Up

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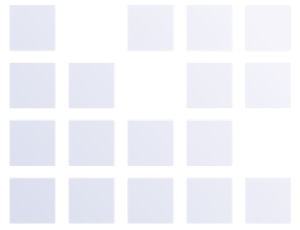
- Important to review providers lists quarterly
  - NPI numbers are inserted in the list based upon NPIs in the data file
  - Proactively identify errors prior to CMS submission and reconciliation
- Any providers who have left or retired from your practice prior to 1/1/19 should be removed
  - Select Provider List
  - Select a provider – edit provider screen
  - Scroll down the page to Status
  - Click on arrow for drop down menu
  - Select Remove



# 2017 MIPS Experience Report

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- CMS released its 2017 Quality Payment Program experience report in March. It includes general information on eligibility, performance and other metrics across the MIPS program in reporting year 2017.
  - Experience Report: <https://qpp-cm-prod-content.s3.amazonaws.com/uploads/491/2017%20QPP%20Experience%20Report.pdf>
  - Experience Report Appendix: <https://qpp-cm-prod-content.s3.amazonaws.com/uploads/492/2017%20QPP%20Experience%20Report%20Appendix.zip>
    - Includes some general information by specialty



# Opting In vs. Voluntary Reporting

- You can ***opt-in*** to MIPS if you are an eligible clinician or group who exceeds 1 or 2 (but not all 3) of the low-volume threshold criteria during either review period. If you are an eligible clinician or group who opts-in to MIPS, you will receive a MIPS final score and a payment adjustment in 2021.
- You can ***voluntarily report*** if you are a clinician or group that is not MIPS eligible. If you report voluntarily, you will receive a MIPS final score but no payment adjustment.

## 2019

Bills at least **\$90,000**  
Medicare Part B charges

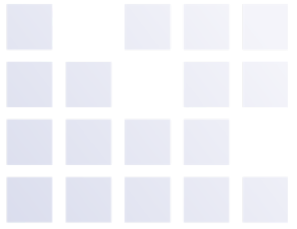
## AND

sees **200** Medicare Part  
B patients in a year

## AND

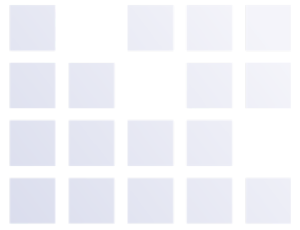
Provides **200** or more  
covered professional  
services under the  
Physician Fee Schedule  
(PFS)





# Internal Improvement Measures

- Updated Internal Improvement Measures available **NOW!**
  - [https://www.aqihq.org/files/IIM/2019%20IIM/2019\\_Internal\\_Improvement\\_Measures\\_Book.pdf](https://www.aqihq.org/files/IIM/2019%20IIM/2019_Internal_Improvement_Measures_Book.pdf)
- These are additional, **optional** measures for reporting for tracking quality metrics not used for MIPS or sent to CMS
- New additions include:
  - Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU)
  - Post-Anesthetic Transfer of Care: Use of Checklist or Protocol for Direct Transfer of Care from Procedure Room to Intensive Care Unit (ICU)
  - New Corneal Injury Not Diagnosed Prior to Discharge
  - Geriatric Cognitive Assessment
  - Lung-Protective Ventilation during General Anesthesia
  - Ambulatory-specific measures – **NEW!**



# Updated Resources

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- QPP Resource Library
  - <https://qpp.cms.gov/about/resource-library>
- MIPS Eligibility Tool
  - <https://qpp.cms.gov/participation-lookup>
- ASA MACRA webpage – ***up to date with 2019 information***
  - <https://www.asahq.org/macra>
- AQI Quality Reporting Materials
  - <https://www.aqihq.org/MACRAOverview.aspx>
- Latest measure specs + corrections
  - [https://www.aqihq.org/files/MIPS/2019/2019\\_QCDR\\_Measure\\_Book.pdf](https://www.aqihq.org/files/MIPS/2019/2019_QCDR_Measure_Book.pdf)
  - [https://www.aqihq.org/files/MIPS/2019/2019\\_QCDR\\_Measure\\_Book\\_Change\\_Log.pdf](https://www.aqihq.org/files/MIPS/2019/2019_QCDR_Measure_Book_Change_Log.pdf)
- QPP Help Desk
  - [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov)

# Contact Quality and Regulatory Affairs (QRA)



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

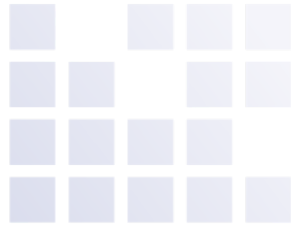
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Quality and Regulatory Affairs  
([qra@asahq.org](mailto:qra@asahq.org))

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

Q&A





# Next Office Hours

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Tuesday, May 14, 2019  
11am CST

Registration Link:

[https://asahq.zoom.us/webinar/register/WN\\_B\\_76YfrrRH6S-tBxxfYERQ](https://asahq.zoom.us/webinar/register/WN_B_76YfrrRH6S-tBxxfYERQ)

If you have any topics that you would like us to cover during office hours please email [askaqi@asahq.org](mailto:askaqi@asahq.org)

Slides and a recording of today's presentation will be available on the AQI website the week of April 15th