

Quality Reporting Office Hours

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August 11, 2020



American Society of **Anesthesiologists**[®]

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Agenda



QRA

- CMS Announcements:
 - 2019 MIPS Final Scores Released
 - 2021 QPP Proposed Rule Released
- QRA Updates
 - In Progress: 2021 QCDR Self-Nomination Period

AQI

- Provider Lists (JA)
 - Unknown Provider Types
 - Submit to CMS Checkbox
- Individual Reporting Consents (JA)
- Data Validation Emails add the screenshots into a slide (JA)
- FTP Access
- Improvement Activity for Group Reporting
- MIPS 076

Quality and Regulatory Affairs Update

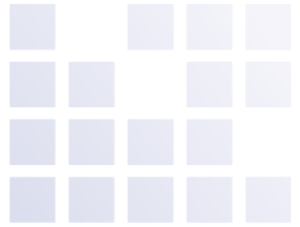
Claire Ostarello | August 11, 2020



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CMS Announcements



2019 MIPS Final Scores Released

- Performance feedback summary includes important information about your scores.
- MIPS ECs and groups are encouraged to review this information.
- If you feel there is a discrepancy in the feedback summary, you can submit a targeted review by **October 5, 2020 at 8:00 pm ET**

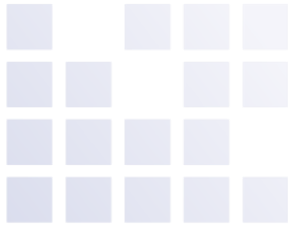
PERFORMANCE YEAR 2019

QPP Performance Feedback Is Available

Final performance feedback is available, including your final score and payment adjustment information. If you believe an error has been made, you can submit a targeted review until October 5, 2020 at 8:00 PM (EDT). Sign in to review your feedback or request a targeted review.

Sign in >

<https://qpp.cms.gov/>



CMS Announcements (cont.)

2021 QPP Proposed Rule Released:

CMS is proposing the following updates to MIPS in the 2021 proposed rule:

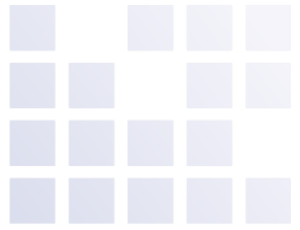
- Out of 100 MIPS points available, 40% will be allocated to Quality, 20% to Cost, 25% to Promoting Interoperability (formerly Advancing Care Information) and 15% to Improvement Activities.
- The proposed performance threshold for 2021 is 50 MIPS Total Points. Eligible Clinicians or practices who fail to participate, when required, or fail to meet the 50-point threshold, may incur up to a negative 9% payment adjustment in 2022.
- CMS proposed no changes to the MIPS Anesthesiology Measure Set.
- CMS has delayed the implementation of MIPS Value Pathways (MVPs) until the 2022 performance period.

Check the CMS QPP website for additional information: <https://qpp.cms.gov/>

PERFORMANCE YEAR 2021

2021 QPP Proposed Rule

The [2021 QPP Proposed Rule](#) is now available for viewing and commenting. Additional resources are available on the [QPP Resource Library](#).

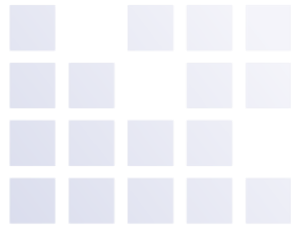


Quality and Regulatory Affairs Update

2021 QCDR Self-Nomination Period:

- The self-nomination period is open until September 1st
- Current set of QCDR measures PLUS four new measures that were developed during the 2019-2020 measure development period.
- The new measures can be reviewed here: <https://www.asahq.org/standards-and-guidelines/resources-from-asa-committees> (under Performance Outcomes and Measurement)
 - **Intraoperative Antibiotic Redosing**
 - **Perioperative Anemia Management**
 - **Ambulatory Glucose Management**
 - **Prevention of Arterial Line Related Bloodstream Infections**





Contact Quality and Regulatory Affairs

- 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

(qra@asahq.org)

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

AQI Update

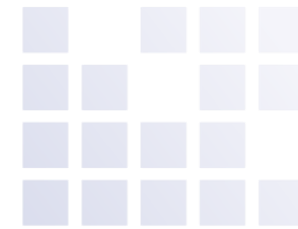
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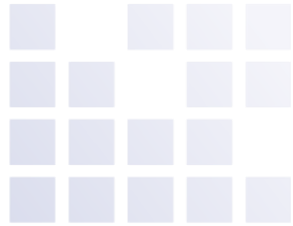
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Provider List Update

- Provider Status
 - Active
 - Inactive - Providers that are on a temporary leave and will be coming back to the practice
 - Remove- Providers that have retired or are no longer with the practice
- Provider Types
 - When reconciling your provider lists, make sure all NPIs are assigned the proper provider type (MD-Anesthesia, CRNA, DO, AA, SRNA, Resident, etc.).
 - In many instances Residents and SRNAs are being listed as “Other.” All providers with a provider type of “Other” will have their data submitted to CMS if enrolled in Quality Reporting.
 - Provider names are not submitted in the data so the names must be entered manually
- Please refer to this guide to audit your provider lists:
 - [Updating Provider Lists on the NACOR Dashboard \(PDF\)](#)



Provider List-Submit to CMS

The screenshot shows the NACOR Anesthesia Quality Institute web application interface. The left sidebar contains navigation options: Dashboard, Quality Measures, Data, Data Export, Historic Submissions, Resources, Admin (highlighted with a blue box), Practice Admin, User Admin, Provider Search, and System Settings. The main content area has a top navigation bar with tabs: Practice, Reporting Options, Facilities, Vendors, Contacts, and Providers (highlighted with a blue box). Below the tabs, the page title is 'Provider For - ORS Test Practice' with a 'Practice' dropdown. The form contains the following fields:

- NPI: 3000000312
- Status: Active
- First Name: John
- Email: (empty)
- Last Name: Smith
- Phone: (empty)
- Middle Initial: (empty)
- Phone Ext: (empty)
- Provider Type: Anesthesiologist
- ASA Membership Number: (empty)
- Consent Received:
- Submit to CMS: (highlighted with a blue box)
- IA Attested:

At the bottom left, there is a logo and the text 'Powered by ePreop v1.0.0'.

- For practices that have chosen Individual Reporting **only**, will have to manually check the Submit to CMS check box for each provider that is individually reporting



Individual Reporting Consents

- For practices reporting as individuals AQL is now collecting provider consents.
- Consents with missing fields will not be processed
- [2020 Individual Quality Reporting Consent](#)

ADDENDUM – EXHIBIT A

ELIGIBLE CLINICIAN CONSENT FORM FOR INDIVIDUAL PROVIDER QUALITY REPORTING [NOT REQUIRED FOR GROUP REPORTING]

PARTICIPANT GROUP/FACILITY MUST OBTAIN A SIGNED COPY OF THIS CONSENT FORM FROM EACH OF ITS INDIVIDUAL PRACTITIONERS THAT WILL BE REPORTING DATA AND PROMPTLY RETURN SUCH FORMS TO AQL, BUT IN NO CASE LATER THAN JANUARY 31ST IMMEDIATELY FOLLOWING EACH CALENDAR REPORTING YEAR. THIS FORM IS NOT APPLICABLE IF PARTICIPANT HAS ELECTED TO REPORT AS A GROUP.

The undersigned clinician ("EC") represents and warrants that s/he:

- has reviewed the Addendum for Quality Reporting to the National Anesthesia Clinical Outcomes Registry Participation Agreement presented to _____ ("Group/Facility");
- voluntarily consents to the terms of the Addendum, including the submission of data on behalf of the EC by The Anesthesia Quality Institute ("AQI") to the Centers for Medicare and Medicaid Services ("CMS") in accordance with the quality reporting option selected by the Group/Facility, which has been disclosed by the Group/Facility to the EC;
- has authorized the Group/Facility to consent on his/her behalf and bind him/her to the terms stated in the Addendum, including, but not limited to, the waiver and release in Section 13 of the Addendum;
- grants permission to AQI to submit this signed Consent Form to CMS in order to demonstrate compliance with CMS guidelines; and
- understands that CMS requires the public reporting of his/her data in accordance with CMS guidelines.

EC understands that this Consent Form shall remain in full force and effect unless EC provides Group/Facility with written notice of termination.

EC Name: _____ EC Individual NPI #: _____

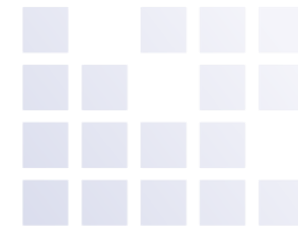
EC TIN(s) #: _____

EC Phone #: _____

EC Email Address: _____

EC Signature: _____ Signature Date: _____

Data Validation Email



NACOR
Anesthesia Quality Institute®

ORS Test Practice x

XXXXX3333(ABC TIN) x

- Dashboard
- Quality Measures
- Data
- Data Export
- Historic Submissions
- Resources

Admin

Practice Admin

User Admin

Provider Search

System Settings

CMSC Institution

2018 2019 2020



Powered by ePreop v1.0.0

ORS Test Practice

Practice Reporting Options Facilities Vendors Contacts Providers **File**

NOTE: Validation emails can only be viewed for files submitted within the last 45 days.

File Name	Date Received	Status
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Thank you for submitting your data file to NACOR for processing.

Your file successfully passed minimum validation criteria; however, not all cases were able to be processed. Cases passing validation will be incorporated into NACOR. Data analytics will be completed and reports available in the [NACOR Dashboard](#) within 48 hours. We are currently working to decrease the processing time to 24 hours. Cases that did not pass validation will not be incorporated into NACOR. You may fix errors for those cases and resubmit your file to NACOR.

10889 of 11225 (97.01%) records were valid for submission in the file: 004/AQI Anesthesia_01112020_PID (004)_DOSSTART(20200401)_DOSEND(20200430).xml.

This validation checks whether your file adheres to the NACOR XML schema and performs certain basic logic checks. **It does not confirm the completeness of measures reported (i.e., numerator and denominator codes).**

To review accuracy of the data provided and, if applicable, whether your data meet QCDR/QR reporting and performance thresholds, please review the data and CMS Quality Reporting reports within the [NACOR Dashboard](#).

Below is a summary of any issues:

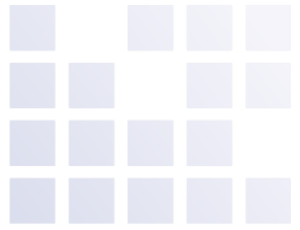
- The <https://www.aqihq.org/AQIXMLResources/AQISchema.xsd:AnesthesiaCategory> element is invalid - The value 'Other' is invalid according to its datatype '<https://www.aqihq.org/AQIXMLResources/AQISchema.xsd:AnesthesiaCategory>

Can now view the data validation email in the NACOR dashboard

FTP Access

- Datawarehouse updated security policy
- All FTP accounts will be disabled if no activity occurs within a 90-day window.
- To enable your account submit a help desk ticket to nacorsupport@asahq.org.
- **No impact** on user access for the NACOR dashboard

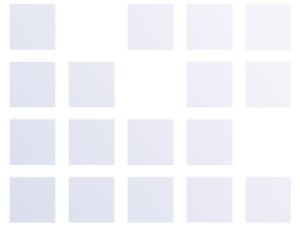




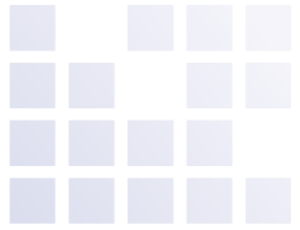
Improvement Activity-Group Reporting

- For groups to attest to an activity **at least 50% of the clinicians** (in the group) must perform the same activity during any continuous 90-day period, or as specified in the activity description, within the same performance period
- ****NEW****: This category will be audited for the 2020 MIPS reporting year
 - Practices should maintain a list of NPIs of the clinicians who performed the improvement activity for up to 6 years as well as documentation that the IA was completed.
 - Practices will be randomly selected and will need to provide a roster of clinicians who completed the IA to AQL.
 - Audits will take place in **January or February 2021** (must be completed before CMS Submission)
- IA attestation process will be updated in the NACOR dashboard – **more details to come!**

MIPS 076: Prevention of Central Venous Catheter (CVC)-Related Bloodstream Infections



- Reporting either one of these measures is intended for clinicians who attempt central venous cannulation insertions.
- From the ASA CROSSWALK: Anesthesiologists may report codes for diagnostic or therapeutic procedures in addition to the anesthesia code for the primary operative procedure. ***When an anesthesia provider administers anesthesia in support of procedures like an insertion of a central venous access device, the appropriate anesthesia code should be reported.***
 - Anesthesiologist ***places the line*** the surgical CPT should be placed in the <CPTValue> section of the xml data file
 - Anesthesiologist ***provides anesthesia for the line*** placement the anesthesia CPT code should be placed in the <CPTAnesValue>.



2020 Quality Reporting Deadlines

Date	Deadline
October 1, 2020	ASA Membership Renewal
October 30, 2020	NACOR Reporting Registration
January 29, 2021	Submission of January - November 2020 data Individual Quality Reporting Consent Submission Improvement Activity Attestation CMS opt-out for Individual Reporting TIN/NPI Reconciliation
February 15, 2021	Submission of December 2020 data and any corrected files





Next Office Hours

Tuesday, September 15th, 2020
11am CST

To register click here

If you have any topics that you would like us to cover during office hours,
please email askaqi@asahq.org

Slides will be sent out after the webinar. The slides and a recording of
today's presentation will be available on the AQI website soon.