

Quality Reporting Office Hours

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asahq.org

Agenda

AQI Update

- NACOR News
- NACOR Dashboard Updates
 - Summary of Updates/Enhancements
 - Improvement Activity Attestation
- ePreop and ArborMetrix Roles
 - Data Submission Notifications
- Account Management

Agenda

QRA Update

- **MIPS Special Status**
- **Why should I submit data?**
- **Measure Review: Multiple Visits**
 - **MIPS 110, 226, 435**

AQI - NACOR News

- AQI Newsletter
 - Sent every Friday
 - AQI Participant ListServ
 - Important Topics for the week

If you are not receiving the
Newsletter email

askaqi@asahq.org

NACOR News

CMS releases MIPS Special Status information

The Centers for Medicare & Medicaid Services (CMS) has released new information that indicates whether clinicians have "[special status](#)" for the Merit-based Incentive Payment System (MIPS). Special status refers to patient facing and hospital-based clinicians, as well as those considered a small or rural practice and/or in a Health Professional Shortage Area (HPSA). Special status affects EC/group reporting requirements for Advancing Care Information and Improvement Activities components.

Physician anesthesiologists may look up their patient facing and hospital-based status by looking up their National Provider Identifier (NPI) in the [CMS eligibility tool](#).

Participating in NACOR is considered a MIPS Improvement Activity

Eligible clinicians (ECs) who are performing quality reporting in NACOR can choose their participation in the registry as a MIPS Improvement Activity. AQI's NACOR is an [AHRQ-listed](#) patient safety organization, which falls under Improvement Activity - PSPA_1.

This medium-weighted activity equals 10 out of the required 40 points for ECs/groups. If an EC or group is considered non-patient facing, the activity is worth 20 points.

Last call for feedback on proposed quality measures


The public comment period on several American Society of Anesthesiologists proposed quality measures closes **Monday, August 7**. The public comment is an opportunity to provide early input on draft quality measures and to ensure that proposed quality measures are meaningful and relevant to clinical practice.

Provide comments on the [2017 Measure Comment webpage](#). For more information, email the Department of Quality and Regulatory Affairs at gra@asahq.org.

Take advantage of AQI's Virtual Office Hours

Looking for answers to your quality reporting questions? AQI is hosting its regularly scheduled [Virtual Office Hours](#) at 11 a.m. Central, Tuesday, August 8. AQI & ASA staff members issue quality reporting general announcements and participate in a question-and-answer session. [Register now](#).

AQI - NACOR Dashboard Updates/Enhancements

- Summary of Updates- *In Progress*
 - New Practice Dashboard upon login
 - New Icon for CMS Quality Reports 
 - 2017 CMS Quality Reports
 - Historic CMS Quality Reports (2015 and 2016 data)
 - New Reports – *Quality Reporting*
 - Measure Performance – specific measure performance by TIN or NPI
 - Provider Performance – performance by individual NPI
 - Practice Performance – performance by the TIN

AQI - NACOR Dashboard Updates

- New Reports – continued
 - Data Submission Status
 - Practice Level Data Completeness
 - Provider Level Data Completeness
 - File Level Data Completeness

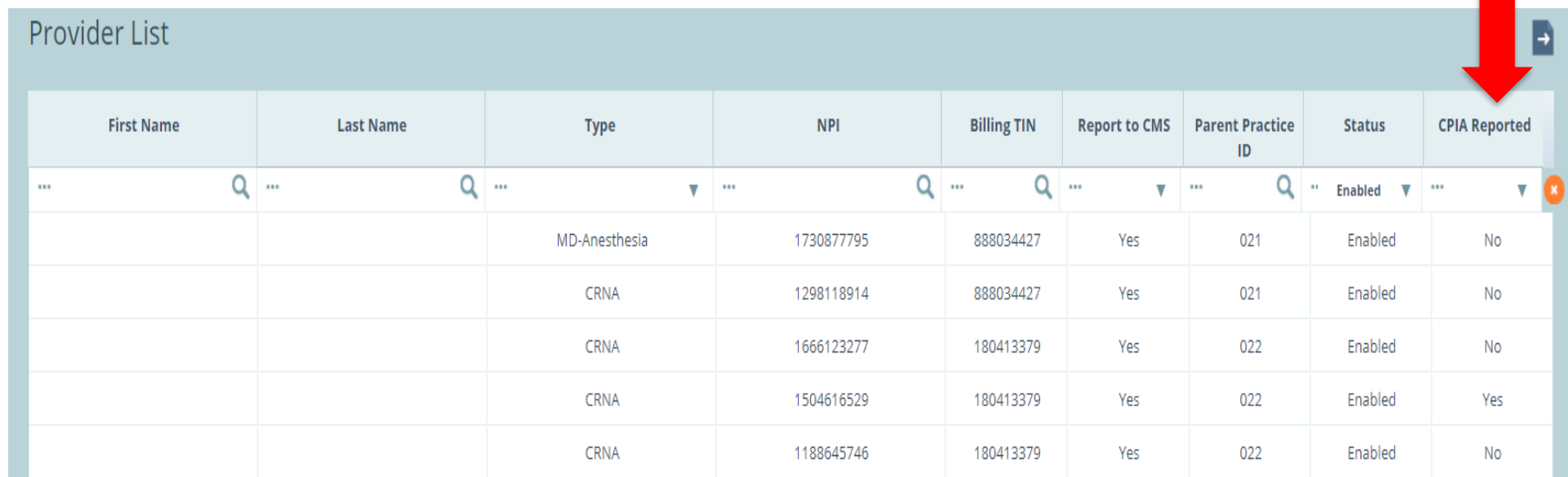


	Patient Demographics	Case Characteristics	Procedure Level	Provider Level
	Summary	Summary	Benchmark	Benchmark
	Trends	Trends	Pivot	Pivot
	Distribution	Distribution		
	Historical NACOR Outcomes	AQI Administrator Reports	Data Submission Status	
	NACOR Outcomes	Benchmark	Practice Level	
		Pivot	Provider Level	
		CMS Quality Reporting Summary	File Level	

AQI - Improvement Activities (IA) - Attestation

- Attest through the Provider List in the NACOR Dashboard
 - Column added to show IA Status (Reported - Yes/No)

Provider List



First Name	Last Name	Type	NPI	Billing TIN	Report to CMS	Parent Practice ID	Status	CPIA Reported
...	...	MD-Anesthesia	1730877795	888034427	Yes	021	Enabled	No
		CRNA	1298118914	888034427	Yes	021	Enabled	No
		CRNA	1666123277	180413379	Yes	022	Enabled	No
		CRNA	1504616529	180413379	Yes	022	Enabled	Yes
		CRNA	1188645746	180413379	Yes	022	Enabled	No

AQI - Improvement Activities (IA) - Attestation

- To attest to an activity for a provider
 - Provider List/Edit Provider
 - Scroll to bottom of page
 - Click on the pencil
 - List of IAs will appear



AQI - Improvement Activities (IA) - Attestation

- Activity ID
- Activity Name
- Activity Description

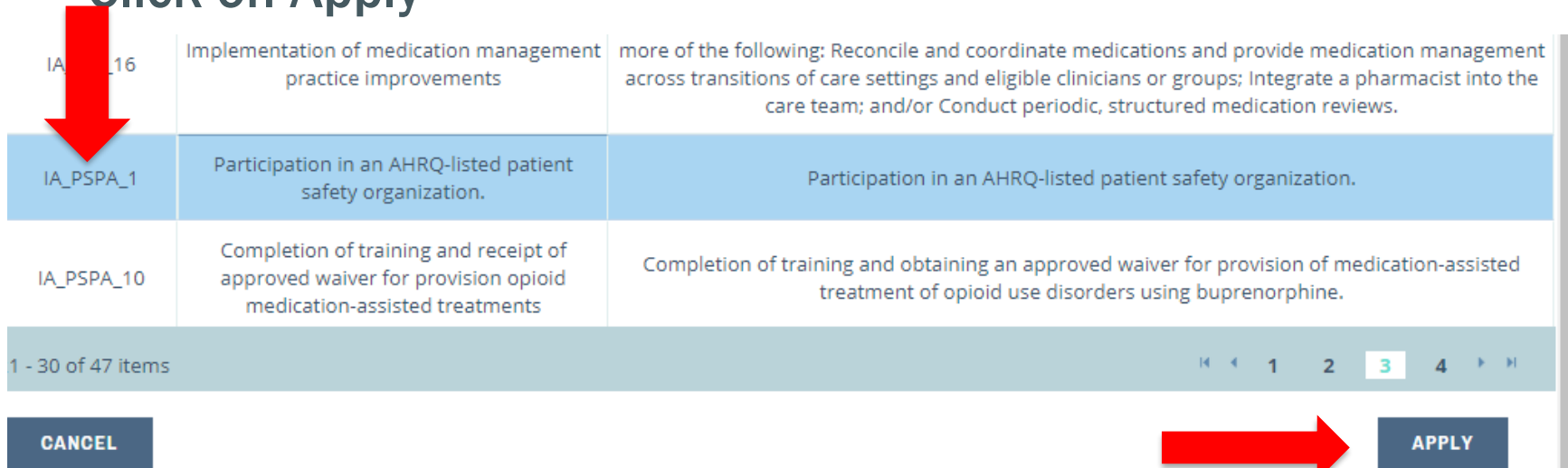
CMS Clinical Practice Improvement Activities ✕

0 Selected

Activity ID	Activity Name	Activity Description
IA_EPA_1	Provide 24/7 access to eligible clinicians or groups who have real-time access to patient's medical record	Provide 24/7 access to MIPS eligible clinicians, groups, or care teams for advice about urgent and emergent care (e.g., eligible clinician and care team access to medical record, cross-coverage with access to medical record, or protocol-driven nurse line with access to medical record) that could include one or more of the following: Expanded hours in evenings and weekends with access to the patient medical record (e.g., coordinate with small practices to provide alternate hour office visits and urgent care); Use of alternatives to increase access to care team by MIPS eligible clinicians and groups, such as e-visits, phone visits, group visits, home visits and alternate locations (e.g., senior centers and assisted living centers); and/or Provision of same-day or next-day access to a consistent MIPS eligible clinician, group or care team when needed for urgent care or transition management
IA_EPA_2	Use of telehealth services that expand practice access	Use of telehealth services and analysis of data for quality improvement, such as participation in remote specialty care consults or teleaudiology pilots that assess ability to still deliver quality care to patients.
IA_EPA_3	Collection and use of patient experience and satisfaction data on access	Collection of patient experience and satisfaction data on access to care and development of an improvement plan, such as outlining steps for improving communications with patients to help understanding of urgent access needs.

AQI - Improvement Activities (IA) - Attestation

- Select the Activity
- Click on Apply



IA_PSPA_16	Implementation of medication management practice improvements	more of the following: Reconcile and coordinate medications and provide medication management across transitions of care settings and eligible clinicians or groups; Integrate a pharmacist into the care team; and/or Conduct periodic, structured medication reviews.
IA_PSPA_1	Participation in an AHRQ-listed patient safety organization.	Participation in an AHRQ-listed patient safety organization.
IA_PSPA_10	Completion of training and receipt of approved waiver for provision opioid medication-assisted treatments	Completion of training and obtaining an approved waiver for provision of medication-assisted treatment of opioid use disorders using buprenorphine.

1 - 30 of 47 items

1 2 3 4

CANCEL APPLY

AQI - Improvement Activities (IA) - Attestation

- Activity will show as complete
- Click “Save” before exiting the provider



Clinical Practice Improvement Activity Attestation

Click on the pencil icon to attest to CPIA activities for 2017. Use CTRL + click to select multiple activities. To see a complete list of activities from the CMS website, click [here](#).

IA_PSPA_1



AQI – ePreop and ArborMetrix Roles


- **ePreop**
 - Data Intake
 - Data Validation
 - Data File Feedback Reports
- **ArborMetrix**
- Data Processing
- Data Analysis and Reporting
- Data Submission to CMS

AQI – Data File Submission


- Once data file has been uploaded
 - Email – **1 Business Day after upload**


○ File Passed Notification

Thank you for submitting your data file to NACOR for processing.

 Your file successfully passed validation and will be incorporated into NACOR. Data analytics will be completed and reports available in the [NACOR Dashboard](#) within 24 hours.

1 of 1 records were valid for submission in the file: **NACOR (Pass)_PID(20619)_DOSSTART(20170201)_DOSEND(20170228).xml**.

 This validation checks whether your file adheres to the 2017 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.


Additional information and support resources:

[NACOR Data Submission Guide](#) | [NACOR Support](#) | [AQI Developer Website](#) | [NACOR Reporting Portal](#)

AQI – Data File Submission

- File Failed Notification

Thank you for submitting your data file to NACOR for processing.



Your file failed validation and will not be incorporated into NACOR. Please see the full validation error log on the NACOR Data Submission Portal which identifies failed cases. You may fix errors for those cases and resubmit your file to NACOR.

This validation checks whether your file adheres to the 2017 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 issues:

- The element 'RecordHeader' in namespace 'https://www.aqihq.org/AQIXMLResources/AQISchema.xsd' has invalid child element 'EmailSet' in namespace 'https://www.aqihq.org/AQIXMLResources/AQISchema.xsd'. List of possible elements expected: 'CreateDate' in namespace 'https://www.aqihq.org/AQIXMLResources/AQISchema.xsd'.

Additional information and support resources:

[NACOR Data Submission Guide](#) | [NACOR Support](#) | [AQI Developer Website](#) | [NACOR Reporting Portal](#)

AQI – ePreop/ArborMetrix Questions

- All questions regarding the following should be sent to nacorsupport@arbormetrix.com
 - File Upload
 - FTP access
 - Data Validation feedback reports
 - Deleting/Reloading Files
 - CMS Quality Reports

AQI – Account Management

- Designated Account Reps – Coming Soon!
- Emails will be sent with your account reps contact information to new practices and practices that have renewed for 2017
- Tentative Date: 8/31/17
 - Continue to submit your questions to askaqi@asahq.org

AQI – 2017 Quality Reporting Deadlines

	Deadline
Registration/Renewal Deadline	October 31, 2017
January-November 2017 Data	January 31, 2018
December 2017 Data	February 15, 2018
Eligible Clinician (EC) Opt-Out of 2017 Quality Reporting	February 15, 2018

QRA - MIPS Special Status

- **Check your status:** <https://qpp.cms.gov/participation-lookup>

Special Status At This Practice

[View descriptions of each special status](#)

For this clinician at this practice		For this practice	
Non-Patient Facing	Yes	Non-Patient Facing	Yes
Hospital Based	Yes	Hospital Based	No
Small Practice	No	Small Practice	No
Rural	No	Rural	No
Health Professional Shortage Area (HPSA)	No	Health Professional Shortage Area (HPSA)	No

QRA - MIPS Special Status

Quality

- Accounts for 60% of total score; if non-patient facing or hospital-based status accounts for 85%
- Requirements remain the same for all statuses (6 measures incl. 1 outcome, all payers, 50% of eligible cases)

Improvement Activities

- Accounts for 15% of total score; All statuses must attest to activities equaling 40 points
- Points are doubled for non-patient facing, small, rural, HPSAs; Medium = 20 points, High = 40 points

Advancing Care Information

- Accounts for 25% of total score; Non-patient facing and/or hospital-based are **exempt** from ACI
- Review and apply for other exemptions here: <https://qpp.cms.gov/about/hardship-exception>

QRA - Why Submit Data at All?

- Get the most out of the transition year when risks are minimal
- The size of your 2019 payment adjustment will depend **both** on how much data you submit and your quality results
- Data you submit this year can inform your submission choices for future years

QRA - MIPS Measure Review – Multiple Visits

DENOMINATOR:

All patients aged 6 months and older seen for **at least two visits or at least one preventive visit** during the measurement period

- **MIPS 110, 226, and 435 include requirements for at least two visits with a patient before they are included in the denominator**
- **Intent is ensure appropriate physician attribution**
- **In order to report these measures via NACOR, you need to include a patient ID in your data**

Quality and Regulatory Affairs (QRA) Update (July 2017)

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)

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

ASA MACRA Webpage:

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

CMS Quality Payment Program Website:

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

Next Quality Reporting Office Hours

Tuesday, September 12, 2017

11 a.m. CST or 5 p.m. CST

11 a.m. registration URL:

<https://attendee.gotowebinar.com/register/2632614946814861314>

5 p.m. registration URL:

<https://attendee.gotowebinar.com/register/5269924429776660739>