

Quality Reporting Office Hours

Claire Ostarello, Senior Quality and Regulatory Affairs Associate, QRA

Javeria Ali, AQI Registry Operations Associate

January 11, 2022



American Society of **Anesthesiologists**[®]

aqihq.org

Agenda



QRA

AQI

- **Reporting Deadlines**
- **Consents**
- **Provider List Update**
- **Dashboard Lockdown**
- **Improvement Activity**

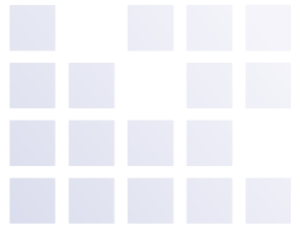
AQI Update

Javeria Ali, AQI Registry Operations Associate



American Society of **Anesthesiologists**[®]

aqihq.org



2021 Quality Reporting Deadlines

Date	Deadline
January 31, 2022	<ul style="list-style-type: none">• Submission of January - November 2021 data• Improvement Activity Attestation• Individual Quality Reporting Consent Submission• CMS opt-out for Individual Reporting• TIN/NPI Reconciliation
February 15, 2022	<ul style="list-style-type: none">• Submission of December 2021 data and any corrected files



Individual Reporting Consents

- For practices reporting as individuals AQL is now collecting provider consents.
- Consents with missing fields will not be processed and will be sent back to the practice for corrections
- [2021 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 AQL 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.

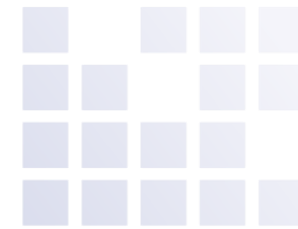
EC Name: _____ EC Individual NPI #: _____

EC TIN(s) #: _____

EC Phone #: _____

EC Email Address: _____

EC Signature: _____ Signature Date: _____



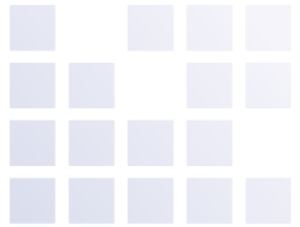
Provider List Update

- Updating your list makes your practice reports easier to understand, clears up clutter and assists with the reconciliation billing process that will occur after the new year
 - Provider names are not submitted in the data so the names must be entered manually
- 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
- Please refer to this guide to audit your provider lists:
 - [Updating Provider Lists on the NACOR Dashboard \(PDF\)](#)



**Dashboard
Lockdown**

Improvement Activities Category



Improvement Activities component is still 15% of the total MIPS score



ECs/groups must complete activities worth 40 points

High Weighted Activities worth **20 points**

Medium Weighted Activities worth **10 points**



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



Special reweighting for the following providers: Small, rural, HPSA and non-patient-facing ECs/groups

High Weighted Activities worth **40 points**

Medium Weighted Activities worth **20 points**



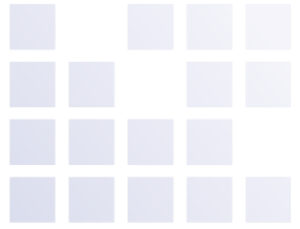
Perform activities for minimum of **90 days and maintain documentation for six years**



Complete attestation through NACOR dashboard

Improvement Activity Attestation Demo- Group Reporting





Group Reporting Attestation

Reminder: This process should be followed for practices who are group reporting

- Log in to the NACOR, and select Quality Measure then select Improvement Activity List located on the left side menu

2021 Group Improvement Activities

Export the provider list to track 50% of the providers participated in the IA. The provider list can be maintained for documentation.

NPI List Export

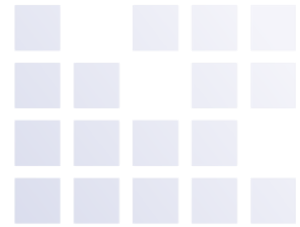
0 total

No data to display

Step 1. Click Quality Measures then Improvement Activity List

Step 2. Click this button to begin attesting




Group Reporting Attestation



— To add a new Improvement Activities (IA) click 

Improvement Activity

IA_AHE_5 - MIPS Eligible Clinician Leadership in Clinical Trials or CBPR x

Start Date	End Date	Documentation Date	Weight
01/01/2021 	03/31/2021 	06/17/2021 	Medium

Comment

Optional field (e.g. record documentation type and where you saved it)

All three checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

- I attest that 50% of the clinicians who have a National Provider Identifier (NPI) in this group participated and/or completed the IA during a continuous 90-day period (or the time period as specified in the activity description) in the same 2020 performance year.
- I attest that I have documentation that confirms (1) those NPIs that completed this IA; (2) that at least 50% of the NPIs within the group completed this IA; and (3) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the CMS Quality Payment Program [website](#).
- I understand this documentation must be maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

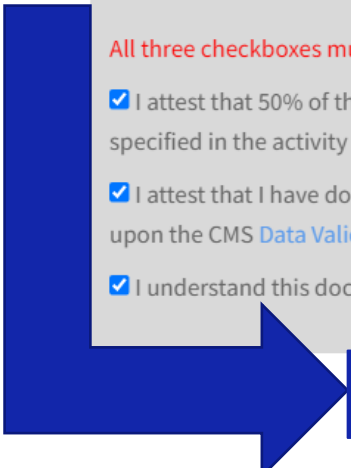
Step 6. Click to save IA

Step 3. Select the IA from the drop-down list

Step 4. Enter the start, end, and documentation dates (min. 90-day period)

Optional field (e.g. record documentation type and where you saved it)

Step 5. Check each box



Group Reporting Attestation



– To view or edit the list of Improvement Activities (IA) that the group is attesting for:

NACOR
Anesthesia Quality Institute®

ORS Test Practice x
XXXXX3333(ABC TIN) x

Dashboard
Quality Measures
Improvement Activity List
Provider Performance List
TIN Performance Summary

Data
Data Export
Historic Submissions
Resources
Admin
Account

QCQR - Group

2019 2020 2021

2021 Group Improvement Activities

Export the provider list to track 50% of the providers participated in the IA. The provider list can be maintained for documentation.

NPI List Export

The IA list will show here

To make any edits select icon on left and select again to save

Improvement Activity	Start Date	End Date	Documentation Date	Weight
IA_AHE_5 - MIPS Eligible Clinician Leadership in Clinical Trials or CBPR	01/01/2021	03/31/2021	06/17/2021	Medium

All three checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

- I attest that 50% of the clinicians who have a National Provider Identifier (NPI) in this group participated and/or completed the IA during a continuous 90-day period (or the time period as specified in the activity description) in the same 2020 performance year.
- I attest that I have documentation that confirms (1) those NPIs that completed this IA; (2) that at least 50% of the NPIs within the group completed this IA; and (3) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the CMS Quality Payment Program [website](#).
- I understand this documentation must be maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

1 total



Group Reporting Attestation

2021 Group Improvement Activities

Export the provider list to track 50% of the providers participated in the IA. The provider list can be maintained for documentation.



Npi	First Name	Last Name	Provider Type	Provider Status	Completed IA_AHE_6 - Provide Education Opportunities for New Clinician	Completed IA_BE_13 - Regularly assess the patient experience of care
3000000039	Abdul	Grennan	Anesthesiologist	Active	Yes	Yes
3000000069	Ahmad	Wark	Registered Nurse	Active	Yes	Yes
3000000068	Alan	Mitchel	Anesthesiologist	Active	Yes	Yes
3000000074	Alberto	Mohr	Certified Registered Nurse Anesthetist (CRNA)	Active	Yes	Yes
3000000048	Alejandro	Rostad	Anesthesiologist	Active	Yes	
3000000094	Alvin	Nuckols	Anesthesiologist	Active	Yes	
3000000066	Arden	Platt	Anesthesiologist	Active	Yes	Yes
3000000072	Arnold	Denicola	Certified Anesthesiologist Assistant (AA)	Active	Yes	Yes

Improvement Activity Attestation Instructions- Individual Reporting





Individual Provider Attestation

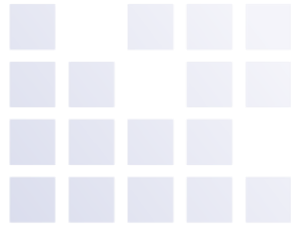
Reminder: This process should be followed for practices who are reporting individually

- Log in to the NACOR dashboard and select Quality Measure then select Improvement Activity List located on the left side menu

The screenshot shows the NACOR Anesthesia Quality Institute® dashboard. At the top, there is a logo and a header with a drop-down menu currently set to "ORS Test Practice x". Below this is a text input field containing "XXXXX3333(DCAA) x". The main sidebar menu includes the following items: "Dashboard", "Quality Measures", "Improvement Activity List", "Provider Performance List", and "TIN Performance Summary".

Annotations on the screenshot:

- A blue callout box with an arrow pointing to the "XXXXX3333(DCAA) x" field contains the text: "Use the drop-down menu to select TIN* (For practices that may be reporting multiple TINs)".
- A blue callout box with an arrow pointing to "Quality Measures" contains the text: "Step 1: Select".
- A blue callout box with an arrow pointing to "Improvement Activity List" contains the text: "Step 2: Select".



Individual Provider Attestation

– To add a new Improvement Activities (IA) click 
2021 Individual Improvement Activities Multiple Add

Step 1:
Select your
IA from the
drop-down
menu

Improvement Activity

Select Activity

Start Date End Date Documentation Date

Comment

Both checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

I attest that I have documented (1) the NPI that completed this IA; and (2) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the [Patient Program website](#).

I understand this documentation is maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

Step 2: Enter the
start, end, and
documentation dates
(min. 90-day period)

**Optional field (e.g. record
documentation type and
where you saved it)**

Step 3: Select
both
checkboxes.

Step 4: Select
the box for the
provider(s) for
which you are
attesting for

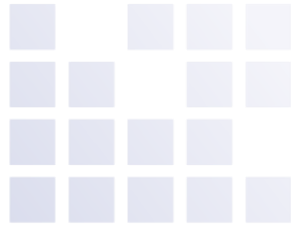
Providers

- Select all
- 3000000109
- 3000000110

Add

**For Individual Reporting
make sure not to select all.
This will result in an
incorrect attestation**

Step 5: Select to save IA



Individual Provider Attestation

- To view IA by provider select the provider from the drop-down menu

2021 Individual Improvement Activities

Providers

Bolt , King - 3000000077

Select the drop down and select the provider to view their IA list

IA list will appear in this box

Select the icon on the left to make any changes, and select again to save changes

Improvement Activity	Start Date	End Date	Documentation Date	Weight
IA_AHE_5 - MIPS Eligible Clinician Leadership in Clinical Trials or CBPR	01/01/2021	03/31/2021	06/17/2021	Medium

Comment

Both checkboxes must be checked in order for the Improvement Activity to be submitted to CMS

I attest that I have documentation that confirms (1) the NPI that completed this IA; and (2) that the IA was completed based upon the CMS [Data Validation criteria](#) for this improvement activity available on the CMS Quality Payment Program [website](#).

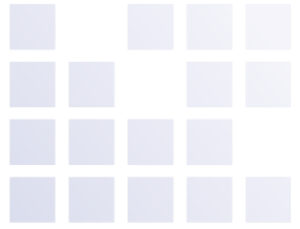
I understand this documentation must be maintained for 6 years and is subject to audit by AQI, CMS and/or CMS contractors. I will provide this documentation if selected for an audit.

Improvement Activity

IA_BE_4 - Engagement of patients through implementation of improvements in patient portal

Start Date	End Date	Documentation Date	Weight
01/01/2021	03/31/2021	06/17/2021	Medium

Comment



Next Office Hours

The next office hour slides will be posted to the AQI website the week of February 17th.

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