

# Quality Reporting Office Hours

Claire Ostarello, Quality Associate

Annette Antos, AQI Senior Registry Operations Manager

Javeria Ali, AQI Registry Operations Associate

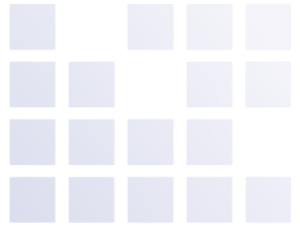
May 19, 2020



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

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

# Agenda



---

## — QRA Update

- Quality Payment Program Updates (2020)
  - ASA submitted an MVP for inclusion in Performance Year 2021
  - CMS delays the requirement for measure testing
  - No other delays in QPP for 2020 announced
  - CMS approves AQI NACOR to collect attestations for CMS COVID-19 Improvement Activity
- QPP and ASA Resources

## — AQI Update

- 2019 Data Submission
  - Final MIPS Scores for 2019
- 2020 NACOR Registration
- Opt-In Status
- 2020 Quality Payment Program Updates
  - Quality Component
  - Payment Adjustment Threshold
- Reporting Mechanism Available via NACOR
  - 2020 Anesthesiology Specialty Set
  - Quality Measures Removed for 2020

## — Q&A

# Quality and Regulatory Affairs Update

Claire Ostarello | May 19, 2020



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

[asahq.org](https://www.asahq.org)

# Quality and Regulatory Affairs Update

---

## **Quality Payment Program 2020 Updates**

- MIPS Value Pathway (MVP) Submitted for CMS Consideration in Performance Year 2021.
  - The MVP is intended for hospital in-patient and uses existing measures and Improvement Activities.
  - Additional information will be shared once further regulation guidance is released by CMS.

# Quality and Regulatory Affairs

---

## **Quality Payment Program 2020 Updates**

- CMS announced a delay in the requirement for measure testing by 1-year.
  - QRA staff are evaluating the QCDR measure testing plan to accommodate this change
- No other delays to QPP 2020 or 2021 have been announced thus far.
- For additional information please visit <https://qpp.cms.gov/>

# Quality and Regulatory Affairs

---

## Quality Payment Program 2020 Updates

- Improvement Activities Reminder
  - Validation criteria are available for your review
  - Attest to 50% of all *NPIs* in the group
  - Complete activities for any continuous 90-day period
  - Maintain documentation for six years
- CMS approved AQI NACOR to collect attestations for the **NEW** COVID-19 Improvement Activity.
  - (IA\_ERP\_3) - COVID-19 Clinical Trials

# Quality and Regulatory Affairs Update

---

## **Where to find regulatory and measure information:**

- **Now:** CMS Resource Library: <https://qpp.cms.gov/about/resource-library>
  - Rule, fact sheets and press release
  - MIPS Clinical Quality Measure specifications
  - CMS published IA Validation Criteria
  - CMS published QR and QCDR qualified postings
  - ASA MACRA Webpage updates: [www.asahq.org/macra](http://www.asahq.org/macra)
  - AQI QCDR Measure Specifications: [www.aqihq.org](http://www.aqihq.org)
  - Regulatory information specific to anesthesiology

# 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](mailto:qra@asahq.org))

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



# AQI Update

Annette Antos, AQI Senior Registry Operations Manager

Javeria Ali, AQI Registry Operations Associate



American Society of **Anesthesiologists**®

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

# 2019 Data Submission



- AQI completed data submission to CMS on March 31<sup>st</sup>, 2020
- Submitted for approximately 13,000 ECs

# 2019 Final MIPS Scores

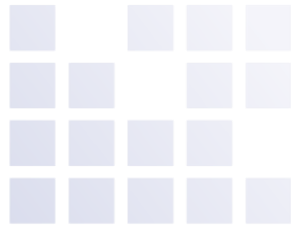
Per the Quality Payment Program website (<https://qpp.cms.gov>):

- **July 1**: Final MIPS scores will be available. Need to have a HARP account (replaces EIDM) with CMS to view results.
- [HARP accounts](#) can be obtained through the CMS enterprise portal. Click New User Application then select “PQRS: Physician Quality Reporting System” when asked to “Choose your application
- Targeted review opens after release of the performance feedback.
- Deadline to submit a targeted review is **August 31, 2020**.

# 2020 NACOR Reporting Registration

2020 Products and Services	NACOR Basic	NACOR Benchmarking	NACOR Quality Reporting	NACOR Quality Concierge
Submit data to NACOR	✓	✓	✓	✓
NACOR dashboard	✓	✓	✓	✓
MOC Part IV module	✓	✓	✓	✓
Local analytic reports	✓	✓	✓	✓
National benchmarks		✓	✓	✓
National comparative analytic reports		✓	✓	✓
MIPS Quality Reporting Component			✓	✓
MIPS Improvement Activities			✓	✓
Patient Experience Survey				✓
Mobile app				✓
Aggregation, merging, and validation of data				✓
Opioid Dependence Risk Alert				✓
Full EHR integration				✓

- Registration is now open! Review the [NACOR pricing structure](#)
- All practices (new and returning) interested in reporting to NACOR need to complete the [2020 order form](#).
  - When completing your order form, if your practice ID has three digits (Example: PID 098), then add a “0” to the beginning of your practice ID. The form requires 4 digits in the practice ID field.
- Quality Concierge Practices do not need to register!



# 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.

## 2020 Low-Volume Threshold

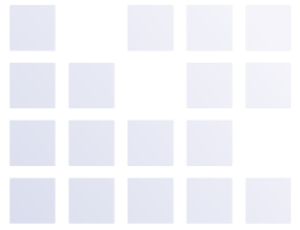
Bills at least **\$90,000** Medicare Part B charges

Or

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

OR

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



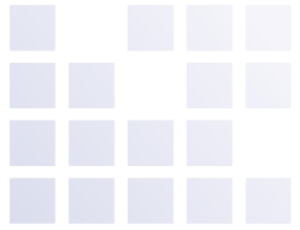
# Quality Component Category

## What is the percentage weight for the Quality component?

- Eligible clinicians will receive a Quality performance category score that accounts for 45% of their final MIPS score.

## What is the data completeness threshold for 2020?

- The data completeness threshold for 2020 was increased from 60% to **70%**.
- Items that remain the same in 2020:
  - Collecting 12 months of data reporting six quality measures with at least one measure being an outcome or high priority measures.
  - Measures reported must meet the 20-case minimum to be scored.



# Payment Adjustment for 2020

## What is the minimum amount of points required to avoid a negative adjustment?

- The performance threshold to avoid a negative adjustment has been increased from 30 points to **45 points** for 2020.
- In order to have exceptional performance clinicians/groups has been increased from 75 points to **85 points** for 2020 .

## What is the payment adjustment percentage for 2020?

- The payment adjustment has increased from +/- 7% in 2019 to **+/-9%**.

# Reporting Mechanisms

- For QR reporting = 19 MIPS measures only
- For QCDR Reporting = 19 MIPS & 13 QCDR measures

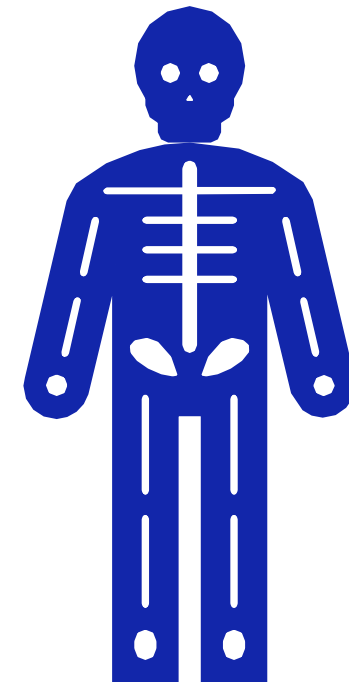
[QCDR Measure Specifications 2020 \(PDF\)](#)



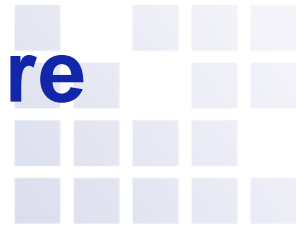
# What is the 2020 Anesthesiology Specialty-Specific Measure Set for physician anesthesiologists for performance year 2020?

- **MIPS #44: CABG: Preoperative Beta-Blocker in Patients with Isolated CABG Surgery**
- **MIPS #76: Prevention of CVC-Related Bloodstream Infections\***
- **MIPS #404: Anesthesiology Smoking Abstinence\***
- **MIPS #424: Perioperative Temperature Management\***
- **MIPS #430: Prevention of PONV - Combination Therapy\***
- **MIPS #463: Prevention of Post-Operative Vomiting (POV) – Combination Therapy (Pediatrics)\***
- **MIPS #477: Multimodal Pain Management\***

(\* designates a "high priority" measure)



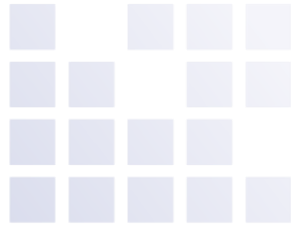
# Measures Removed from 2020 AQI QCDR Measure Set



## Measures Removed from 2020 AQI NACOR QCDR Measure Set

Please note the following measures have been removed or retired from the AQI NACOR registry for QCDR reporting.

Measure ID	Measure Title	Reason for Removal
AQI59	Multimodal Pain Management	This measure has been included in the MIPS program as a MIPS CQM. Its new measure ID is MIPS 477
AQI63	Neuromuscular Blockade: Documented Assessment of Neuromuscular Function Prior to Extubation	Rejected by CMS due to high performance rate and lack of variability for improvement – Its new measure ID for reporting the AQI NACOR as a quality improvement measure is IIM 23
AQI64	Neuromuscular Blockade: Reversal Administered	Rejected by CMS due to high performance rate and lack of variability for improvement – Its new measure ID for reporting the AQI NACOR as a quality improvement measure is IIM 24
MIPS 131	Pain Assessment and Follow-Up	CMS removed this measure as a MIPS Clinical Quality Measure.



# Next Office Hours

---

Tuesday, June 9th, 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](mailto:askaqi@asahq.org)

Slides and a recording of today's presentation will be available on the AQI  
website the week of May 26th

