

Quality Reporting Office Hours

Claire Ostarello, Quality Associate

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September 8, 2020



American Society of **Anesthesiologists**[®]

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Agenda



QRA

CMS Overview:

- Cost Component Review
 - 2019 MIPS Final Score Feedback Period
 - 2020 MIPS Cost Component

AQI

- Registration Deadlines
- Data Export Report
- 2020 Reconciliation
- Improvement Activity Audit
- Reporting Adverse Events
- Internal Improvement Measures

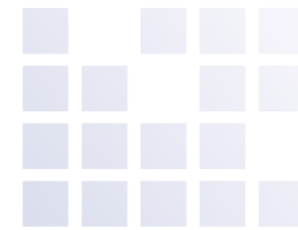
Quality and Regulatory Affairs Update

Claire Ostarello | September 8, 2020



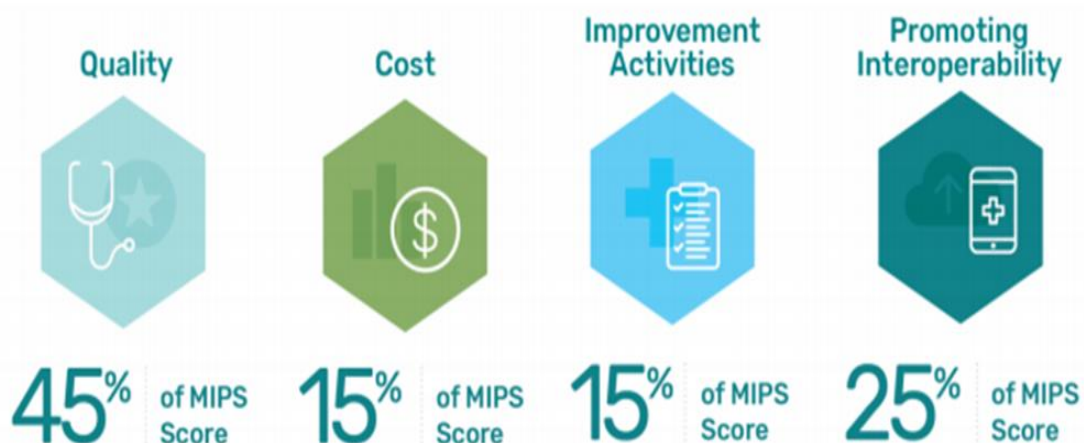
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2019 MIPS Final Score Feedback - Cost

MIPS performance category weights in 2019:



Please note that for MIPS APM participants, scored under the APM scoring standard, the performance categories have the following weights:



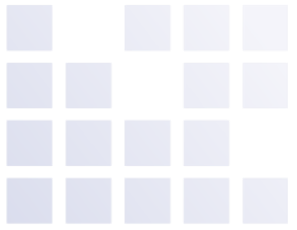
- Cost makes up 15% of the MIPS Final Score
- Anesthesiologists are *typically* not scored on cost measures
- **Targeted Review Due: October 5, 2020**

In some cases the following may apply:

- Medicare Spending Per Beneficiary (MSPB)
 - based on the plurality of service (first) and then the cost of services
- Facility-based scoring - uses a Hospital's Value Based Purchasing score from a previous year to serve as a proxy for your cost and in some cases, quality score. CMS will always use the higher score of the two when assessing your MIPS performance.

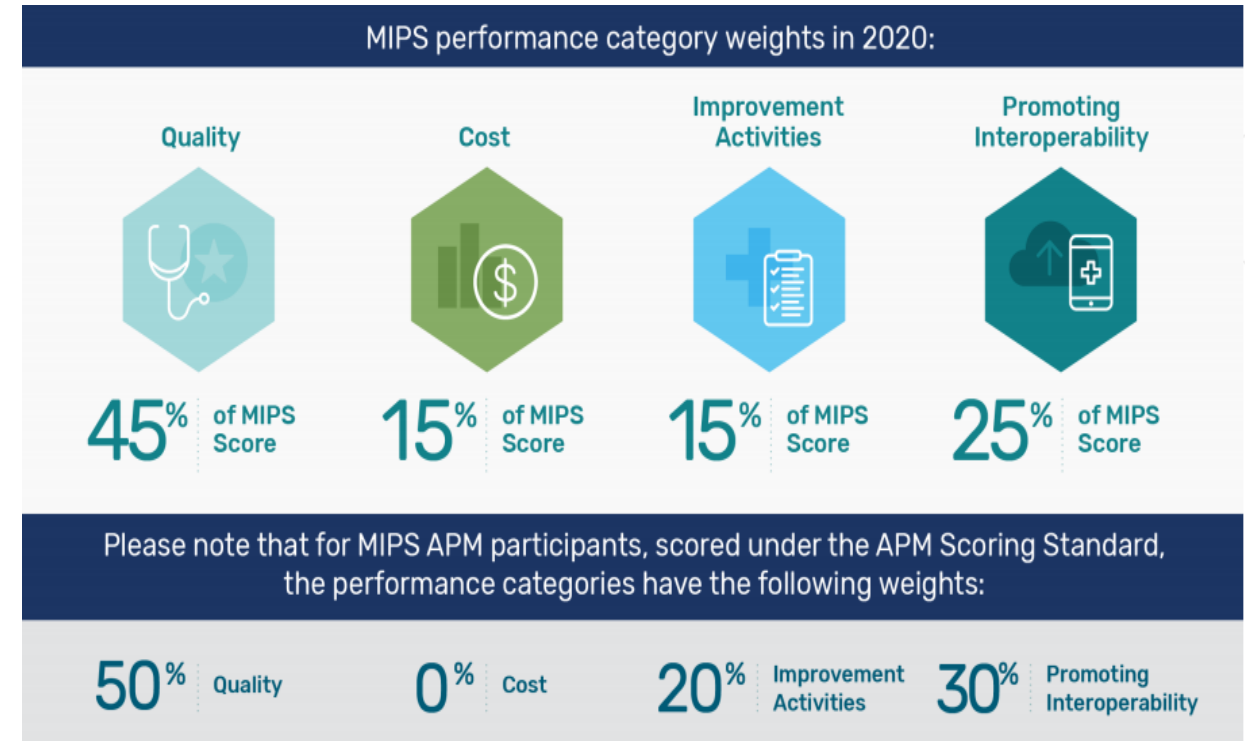
Additional Information on Cost for 2019 See the QPP Resource Page:

<https://qpp.cms.gov/mips/cost?py=2019>

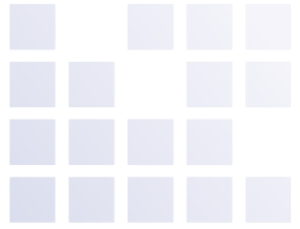


2020 MIPS Cost Category

- Cost makes up 15% of the MIPS Final Score for 2020
 - 20 Cost measures available for Performance Year (PY) 2020
- Much like 2019, Facility-based Scoring is applicable
- Hardship-Exemption applications are being accepted for PY 2020.
Due: December 31, 2020
- Scores for 2020 will be released on July/August of 2021.



Additional Information on Cost for PY 2020 See the QPP Resource Page: <https://qpp.cms.gov/mips/cost?py=2020>



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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2020 ASA Membership Renewal Deadline

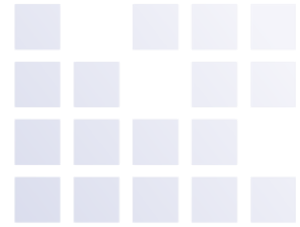
- Deadline to renew membership is Thursday, *October 1, 2020*
 - Physicians who do not renew will be charged the NACOR non-member rates
 - For assistance with membership status send a list of providers with NPI numbers to askaqi@asahq.org no later than close of business *September 28, 2020*.
- 

2020 NACOR Reporting Registration Deadline

- Deadline to register is Friday,
October 30, 2020
- A registration form is required for practices registering for Basic, Benchmarking and Quality.
- Quality Concierge practices do not need to register.
- [Registration Form](#)
- [2020 Fees](#)



Data Export



Registry System x +

aqi.epreop.com/data-export

NACOR
Anesthesia Quality Institute

ORS Test Practice x

XXXXX3333(ABC TIN) x

Dashboard

Quality Measures

Data

Data Export

Historic Submissions

Resources

Admin

Account

QCDR - Group

2018 2019 2020

Powered by ePreop v1.6.0

Data Export

Excel PDF

TIN Measure Include IIM Reported Measures All Measures

Provider Measure Include IIM Reported Measures All Measures

Select Provider(s)...

Measure Case List

Select Measure...

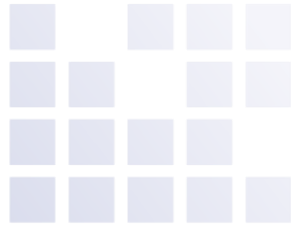
Select Provider(s)...

Results to Include

(All) Exclusion
 Met Exception
 NotMet Unreported

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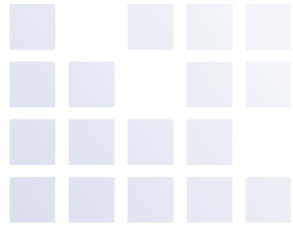


Data Export- TIN Measure Report

TIN Measure Include IIM **Reported Measures**

ORS Test Practice								
AQI: 999999								
TIN: XXXXX3333								
Year: 2020								
Criteria: Reported Measures excluding IIM								
Exported on: 09/03/2020								
Measure	Met	Not Met	Exclusions	Exceptions	Unreported	Reporting Rate	Performance Rate	NACOR Benchmark**
AQI56	220	0	28	7	173	56.75%	100.00%	92.19%
AQI62	28393	41	305	0	287	99.00%	99.86%	88.76%
AQI68	28687	52	0	0	0	100.00%	99.82%	87.25%
MIPS 044	54	0	0	3	94	37.75%	100.00%	99.14%
MIPS 076	145	0	0	0	184	44.07%	100.00%	99.85%

- The TIN measure export will provide you with a list of measures reported by the group. If you switch the toggle to all measures the report will show additional measures that the group could be eligible to report based off the CPT codes they billed.



Data Export- Provider Measure Report

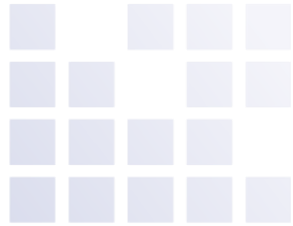
Provider Measure Include IIM **Reported Measures**

Bolt , King - 300000077 x

ORS Test Practice
AQI: 999999
TIN: XXXX3333
Year: 2020
Criteria: Reported Measuresexcluding IIM
Exported on: 09/03/2020

Provider Name	NPI	Provider Type	Measure	Met	Not Met	Exclusions	Exceptions	Unreported	Reporting Rate	Performance Rate	NACOR Benchmark**	Practice Benchmark
ROSTAD, ALEJANDRO	300000048	Anesthesiologist	AQI56	7	0	0	0	3	70.00%	100.00%	92.19%	100.00%
ROSTAD, ALEJANDRO	300000048	Anesthesiologist	AQI62	120	0	1	0	0	100.00%	100.00%	88.76%	99.86%
ROSTAD, ALEJANDRO	300000048	Anesthesiologist	AQI68	121	0	0	0	0	100.00%	100.00%	87.25%	99.82%
ROSTAD, ALEJANDRO	300000048	Anesthesiologist	MIPS 424	61	0	0	0	0	100.00%	100.00%	97.57%	93.32%
ROSTAD, ALEJANDRO	300000048	Anesthesiologist	MIPS 430	24	0	0	0	0	100.00%	100.00%	98.21%	99.87%
ROSTAD, ALEJANDRO	300000048	Anesthesiologist	MIPS 463	1	0	0	0	0	100.00%	100.00%	96.09%	99.69%

- The provider measure export will provide you with a list of measures reported by an individual provider. If you switch the toggle to all measures the report will show additional measures that the provider could be eligible to report based off the CPT codes they billed.



Data Export- Measure Case List Report

Measure Case List

MIPS 44 CABG: Preop Beta Blocker x

Duhart , Bobby - 3000000082 x

Results to Include

(All) Exclusion
 Met Exception
 NotMet Unreported

MIPS 424 Perioperative Temperature Management
Practice: ORS Test Practice
AQI: 999999
TIN: XXXXX3333
Year: 2020
Exported on: 09/04/2020

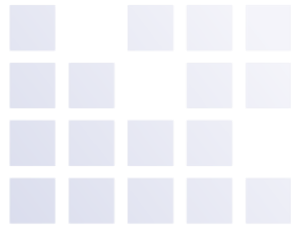
Case ID	Patient ID	Date of Se	Facility	Patient Se: Age	Result	NPI
0.019715	0.073588	2/6/2020	Facility	Male 35	Performance Met	3000000077
0.02061	0.073588	2/6/2020	Facility	Male 53	Performance Met	3000000077
0.020647	0.073588	2/6/2020	Facility	Female 34	Performance Met	3000000077
0.022137	0.073588	2/7/2020	Facility	Male 48	Performance Met	3000000077
0.022436	0.073588	2/7/2020	Facility	Female 59	Performance Met	3000000077
0.026721	0.073588	#####	Facility	Female 62	Performance Met	3000000077
0.026889	0.073588	#####	Facility	Female 24	Performance Met	3000000077

- The measure case list report will provide the case ID/ patient ID that was submitted by measure you can check which result to include.

2020 Reconciliation

- To assist with the reconciliation process AQI is proactively reaching out to practices who:
 - Have submitted data for 2020
 - Provider counts in the data do not match the provider counts on the 2020 registration form.





2020 Improvement Activity Audits

- New for 2020 the Improvement Activity component will be audited prior to data submission to CMS.
- To prepare for the audits, practices should:
 - Perform the same activity during any continuous 90-day period, or as specified in the activity description, within the same performance period.
 - Review the 2020 MIPS Data Validation Criteria for the Improvement Activities to validate that your practice is collecting the required documentation.
 - Maintain a list of NPIs of the clinicians who performed the Improvement Activity for up to six years as well as the documentation.
- AQI will randomly select practices for audits in January or February 2021 (must be completed before CMS Submission).

Reporting Adverse Events

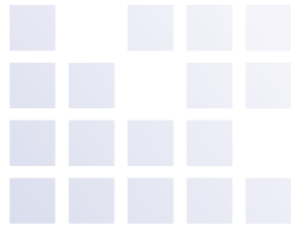
- 103 adverse events to choose (e.g. Airway obstruction, anaphylaxis, coma)
- National Benchmarks for those registered for NACOR Benchmarking and NACOR Quality
- Help demonstrate quality to hospital administrators and payers



Internal Improvement Measures

- 25 Internal Improvement Measures
 - IIM004: Perioperative Care: Timing of Prophylactic Antibiotic – Administering Physician
 - IIM003: Perioperative Cardiac Arrest
 - IIM005: Perioperative Mortality Rate
- National Benchmarks for NACOR Benchmarking and Quality
- Not reported to CMS for MIPS
- As MIPS and QCDR measures are retired they are transferred to IIM measures for use with local quality improvement initiatives and for contract negotiations
- [IIM Measure Specifications](#)





Next Office Hours

Tuesday, October 13th, 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.