

CENTERS FOR MEDICARE & MEDICAID SERVICES CONTINUING EDUCATION (CMSCE)

2015 Medicare PFS Proposals for PQRS, Value Modifier, EHR Incentive Program, and the Physician Compare Website

MLN Connects™ National Provider Call, 24JULY2014

CE Activity Information & Instructions

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Activity Information

Activity Description:

This MLN Connects™ National Provider Call provides an overview of the 2015 Physician Fee Schedule (PFS) Proposed Rule. This presentation will cover potential program updates to the Physician Quality Reporting System (PQRS). The topics covered include changes to reporting mechanisms, individual measures, measures groups for inclusion in 2015, criteria for satisfactorily reporting for incentive, criteria for avoiding future payment adjustments, requirements for Medicare incentive program alignment, and satisfactory participation under the qualified clinical data registry option.

The presentation also provides an overview of the proposals for the value-based payment modifier, including how CMS proposes to continue to phase in and expand application of the value-based payment modifier in 2017 based on performance in 2015. The presentation also describes how the value-based payment modifier is aligned with the reporting requirements under the PQRS.

Lastly, this presentation will cover proposals related to the Shared Savings Program (SSP) quality policies. Topics covered include updates to the quality measures, revisions to quality measure benchmarks, and a proposal to include a quality improvement reward for ACOs. Updates to Physician Compare and the Electronic Health Record (EHR) Incentive Program will also be provided.

Target Audience:

Physicians, practitioners, therapists, medical group practices, practice managers, medical and specialty societies, payers, insurers.

Learning Objective:

By the end of this session, participants should be able to:

- Recognize the proposed updates and changes to the Physician Quality Reporting System (PQRS);
- Recognize the proposed updates and changes to the Electronic Health Record (EHR) Incentive program;
- Identify the purpose of a Value-Based Payment Modifier (VM) and recognize the proposed VM policies for 2017; and
- Recognize the regulatory updates to the Medicare Shared Savings Program.

Participation:

Register for the teleconference, participate in the teleconference and access and complete the assessment and evaluation, per the [Instructions for Continuing Education Credit](#), at the end of this document.

Speaker Bios & Disclosures:

No one in a position to control the content of this activity has anything to disclose. The planners/developers of this activity have signed a disclosure statement indicating that he/she has no relevant financial interests. This activity was developed without commercial support.

Sandra Adams, presenter/developer, works with the Performance Based Policy Group, Division of Shared Savings on Accountable Care Organization (ACO) quality and compliance. Ms. Adams has a background in nursing and has worked in acute care, behavioral health, case management and training.

Sarah Arceo, presenter, is a Nurse Specialist with the Centers for Medicare & Medicaid Services (CMS). She presently works in the Seamless Care Models Group, serving in various roles for the Comprehensive Primary Care Initiative, including functioning as the Quality Lead. Prior to her employment with CMS in July 2013, she was a Clinical Trials Coordinator at the National Institutes of Health (NIH). Ms. Arceo also practiced in various clinical settings, including the Blood Bank at NIH, community hospital, public school system, and outpatient clinic.

Sophia Autrey, presenter, is the current lead for quality measures in the Physician Quality Reporting System (PQRS) at the Centers for Medicare & Medicaid Services (CMS). From December, 2008- August, 2013, she was research evaluator at the VA Maryland Healthcare Center in Baltimore, Maryland where she performed evaluations of clinical programs and research projects for the Mental Illness, Research, Education, and Clinical Center (MIRECC). From August 2001 to December 2008, Ms. Autrey evaluated public health program performance in the Georgia Division of Public Health.

Christine Estella, presenter, is an attorney for the Centers for Medicare & Medicaid Services' (CMS) Center for Clinical Standards and Quality (CCSQ), which is a CMS component that develops, tests, evaluates, adopts, and supports performance measurement systems to evaluate care provided to CMS beneficiaries. Ms. Estella drafts regulations under the Physician Fee Schedule related to various CMS quality reporting programs, more notably the Physician Quality Reporting System (PQRS). In addition, Ms. Estella facilitates the development and implementation of the PQRS informal review process. Prior to joining CMS, Ms. Estella was a General Attorney at the Department of Veteran's Affairs Board of Veterans' Appeals, where she addressed veteran benefit claims presented before the Board.

Daniel Green, MD, developer/presenter, helped develop two electronic medical records while in private practice, and has participated in many quality improvement activities before coming to the Centers for Medicare & Medicaid Services (CMS). These activities include lectures, hands-on lab teaching, precepting new physicians and serving on multiple quality assurance (QA) committees. Currently Dr. Green is a medical officer in the Quality Measurement Group

at CMS. He has worked on the PQRS and Electronic Prescribing (eRx) programs since their inception. Additionally, Dr. Green heads the registry and Electronic Health Records (EHR) reporting for these programs.

Patrice Holtz, presenter, has been employed by the Centers for Medicare & Medicaid Services (CMS) as a Health Insurance Specialist since November 2009. She has over four years of experience in the areas of health care quality performance.

Molly MacHarris, presenter, has been with the Centers for Medicare & Medicaid Services (CMS) since June, 2010 as a Health Insurance Specialist within the Center for Clinical Standards & Quality. She is the lead for the Physician Quality Reporting System (PQRS) and Electronic Prescribing (eRx) Incentive Program. In this capacity, Ms. MacHarris provides leadership and input to a variety of aspects of the programs, including operations, policy and alignment with other quality programs. Ms. MacHarris has five years of experience working on these programs.

Alexandra Mugge, presenter, is a Program Lead in the Center for Clinical Standards and Quality at the Centers for Medicare & Medicaid Services. She has been with CMS since 2010 and has worked on multiple CMS quality reporting programs during that time, including the Medicare Electronic Health Records (EHR) Incentive Program, Physician Quality Reporting System (PQRS), PQRS Group Practice Reporting Option (GPRO), Value Based Modifier (VBM), Shared Savings Program (SSP) Accountable Care Organization (ACO), Pioneer ACO and Comprehensive Primary Care Initiative (CPC).

Terri Postma, MD, presenter, is a neurologist and currently serves as Medical Officer in the Center for Medicare (CM) at the Centers for Medicare & Medicaid Services (CMS). Before joining CMS, Dr. Postma completed a public policy fellowship with the Senate Finance Committee during the health care reform debate. Following the fellowship, Dr. Postma took up her post at CMS where she advises leadership on policy issues related to Medicare's payment systems and quality initiatives, particularly value-based purchasing initiatives, such as the Medicare Shared Savings Program.

LaTonya Smith, presenter/developer, is a Health Insurance Specialist with the Centers for Medicare & Medicaid Services (CMS). She presently works in the Division of Value Based Payment on the Physician Feedback/Value-based Payment Modifier Program, a confidential feedback program providing performance data on quality and costs of care to physicians that will evolve into a value-based payment modifier for the Physician Fee Schedule. She is a licensed Family Nurse Practitioner and presently holds a position in an internal medicine practice. Prior to her employment with CMS in January 2011, Ms. Smith practiced in various clinical settings, including Internal Medicine, Pain Management and Diabetes Management and Endocrinology.

Kimberley Spalding Bush, presenter, presently works as the Acting Division Director for in the Division of Value Based Payment for the Centers for Medicare & Medicaid Services (CMS). She oversees teams to implement value-based purchasing for physicians and hospitals so that Medicare rewards value rather than volume. As part of these responsibilities, Ms. Bush also directs the program that provides feedback reports to physicians about the quality of care furnished compared to cost for Medicare beneficiaries. Ms. Bush has been employed by CMS since 2005, with previous experience in medical review, education and Medicare appeals.

Continuing Education Credit Available:

The Centers for Medicare & Medicaid Services is evaluating this activity for continuing education (CE) credit. The number of credits awarded will be calculated following the activity based on the actual learning time and will be reflected on the post activity continuing education announcement. Final CE information on the amount of credit and post activity assessment and evaluation instructions will be forwarded to participants after the activity is finished.

Accreditation Statements

[Please click here for accreditation statements](#)

Instructions for Continuing Education Credit

Learning Management System (LMS) Instructions

In order to receive continuing education credits for this teleconference, you must pass the session post-assessment and complete the evaluation. The continuing education post-assessments and evaluations are being administered through the Medicare Learning Network®.

Registering To Take a Post-Assessment

If you have previously taken Medicare Learning Network® (MLN) web-based training courses, you may use the login ID and password you created for those courses. If you are a new user, you will need to register.

To register:

1. Go to <http://go.cms.gov/MLNProducts> on the CMS website.
2. Under “Related Links” click on “Web-Based Training (WBT) Courses”.
3. Click on a course title (not the icon next to the title) to open a Course Description Window.
4. At the top of the Course Description Window, click “Register”.
5. You will be redirected to a page that instructs you to enter an e-mail address and click “Submit.”
6. The screen returned will read: No account was found matching your search criteria. Please click **here** to proceed with registration. Click the word “Here” to continue with

registration. After completing this registration, you will be re-directed to your home page.

To login if you already have an account:

1. Go to <http://go.cms.gov/MLNProducts> on the CMS website.
2. Under “Related Links” click on “Web-Based Training (WBT) Courses.”
3. Click on a course title (not the icon next to the title) to open a Course Description Window.
4. At the top of the Course Description Window, click “Login.”
5. Enter your login ID and password. You will be re-directed to your home page.

Finding the Post-Assessment

Once you are logged into the LMS:

1. Click on the Web-Based Training Courses link.
2. At the top of the page on the right-hand side, you will see “**MLN Connects™ Call**” Scroll through the topics and select “**MLN Connects™ Call**” and click “Search.”
3. Select “**24JULY2014 2015 Medicare PFS Proposals for PQRS, VBM, EHR, and Physician Compare**” in the left column.
4. Scroll to the bottom of the page. Use the radio buttons to select Certification of Completion or Certificate of Continuing Education.
5. Click the “Take Course” button. The post assessment will appear in a new pop-up window.

Viewing Your Transcript and Certificates

1. Go to <http://go.cms.gov/MLNProducts> on the CMS website.
2. Click on Web-Based Training Modules link at the bottom of the page.
3. Click on the title of a course and click on Login.
4. Log in using your CMS LMS credentials.
5. To access your certificate, click on “My Homepage” in the left hand menu.
6. Click on “Transcript/Certificate.”
7. Click on the Certificate link next to the course title. The course evaluation will display. Once you complete the course evaluation, your certificate will display.

Hardware/Software Requirements

[Please click here for hardware and software requirements](#)

CMS Privacy Policy

[Please click here for CMS' Privacy Policy](#)

Help

- For help with registration or technical teleconference assistance e-mail us at cms-mlnconnectsnpc@blhtech.com or view the HELP page frequently asked questions at <http://www.eventsvc.com/blhtechnologies/apage/faq.html>.
- For assistance with the Medicare Learning Network® (MLN) Learning Management System, your assessment or certificate, contact [CMSCE at CMSCE@cms.hhs.gov](mailto:CMSCE@cms.hhs.gov) via e-mail.

