



# 2014 PQRS Group Practice and ACO GPRO Web Interface Reporting Method



**Question & Answer  
Session  
Support Call**

*Program Year 2014*

# Disclaimer

*This presentation was current at the time it was published or uploaded onto the web. Medicare policy changes frequently so links to the source documents have been provided within the document for your reference.*

*This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. This presentation may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.*

# Announcements

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1. We ask that you wait until we have completed any announcements before you submit questions through the Q&A box, and that you submit your question only once.
2. Review the GPRO Web Interface measure specifications and supporting documents on the [GPRO Web Interface](#) page of the CMS website.
3. Reference the [2014 GPRO Web Interface User Manual](#) for information on how to customize and navigate the system.

# Announcements (cont.)

- 4. Upcoming planned system outages:** The Portal will be unavailable for scheduled maintenance; therefore, the GPRO Web Interface will not be accessible during the following periods:
- **Every Tuesday** starting at 8:00 pm ET–Wednesday at 6:00 am ET
  - **Every Thursday** starting at 8:00 pm ET–Friday at 6:00 am ET
  - **Third weekend of each Month** starting Friday at 8:00 PM ET–Monday at 6:00 AM ET
  - See the [Physicians and Other Health Care Professionals Quality Reporting Portal](#) (Portal) for the complete list of scheduled system outages

# Announcements (cont.)

5. **Submit measures questions** for daily and weekly support calls through the QualityNet Help Desk, [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org), by 12:00pm ET the day prior to the support call:
- Include in the subject line:
    - Date of the support call
    - Include “2014 GPRO Web Interface”
    - Type of organization you are representing (i.e., Pioneer ACO, PQRS group practice, MSSP ACO)
    - An example of the subject line for a measures question submitted for the January 26<sup>th</sup> Daily Support call by a PQRS group practice:  
    “1/26/15 2014 GPRO WI Support Call - PQRS group practice”
  - Questions that are submitted will be answered as time allows during the support call
  - All inquiries opened through QualityNet will receive a written resolution

# Announcements (cont.)

6. [2014 EHR Incentive Program](#) attestation extended until **11:59pm ET on 3/20/2015**
- Group practices that successfully complete the PQRS GPRO Web Interface will also satisfy the CQM component of the Medicare EHR Incentive Program as long as the EHR product is CEHRT
    - EPs are required to individually report the other meaningful use objectives through attestation
  - Note the following time difference for the GPRO Web Interface submission and attestation deadline on 3/20/15:
    - GPRO Web Interface submission – **8:00pm ET**
    - Meaningful use attestation – **11:59pm ET**

# Announcements (cont.)

7. CMS reports indicate that there are still some ACOs/PQRS group practices that have not logged into the WI
  - Reminder that ACOs and PQRS group practices should log in and start reporting as soon as possible

# Reminders

## 1. GPRO Web Interface Key Dates

Action Required	Dates
Enter and Submit 2014 quality data through the GPRO Web Interface	1/26/2015 – 3/20/2015 <i>Closes at 8:00pm ET / 7:00pm CT / 6:00pm MT / 5:00pm PT</i>
Generate, view, and print reports	3/30/2015 – 4/24/2015

## 2. 2014 EHR Incentive Program Key Date

Action Required	Dates
Attestation	3/20/2015 <i>Closes at 11:59pm ET</i>

# Reminders (cont.)

## 2. Upcoming 2014 GPRO Web Interface Support Calls

Date	Time	Topic
3/12/2015	1:00 - 3:00pm ET	Weekly GPRO Web Interface Q&A Session
3/16/2015 - 3/20/2015	1:00 - 2:00pm ET	Daily GPRO Web Interface Q&A Sessions
4/8/2015	1:00 - 2:00pm ET	GPRO Web Interface Lessons Learned

# Reporting Requirement Reminders

- ACOs and PQRS group practices with 100 or more EPs must completely report:
  - a minimum of 411 consecutively ranked beneficiaries in each module; OR
  - 100 percent of beneficiaries if they have fewer than 411 beneficiaries available in the sample
- PQRS group practices with 25-99 EPs must completely report:
  - a minimum of 218 consecutively ranked beneficiaries in each module; OR
  - 100 percent of beneficiaries if they have fewer than 218 beneficiaries available in the sample

# Satisfactory Reporting Reminders

- Satisfactorily reporting all 22 GPRO Web Interface quality measures qualifies PQRS EPs and ACO participating EPs to:
  - earn the 2014 PQRS incentive payment and
  - avoid the 2016 PQRS payment adjustment
  - avoid the 2016 VM downward adjustment\*
- EPs participating in an ACO or PQRS group practice who meet 2014 GPRO Web Interface submission requirements will satisfy their CQM reporting for the EHR Incentive Program.
  - EPs must still individually attest separately to the EHR Incentive Program for other program requirements

*\*Indicates PQRS group practices only because ACO participating EPs are exempt for this reporting year*

**Presenter: Peggy Freeburn, CMS Contractor**

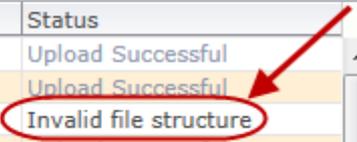
# **FINDING AND CORRECTING ERRORS**

# XML File Errors

- If the XML file is valid, the **Status** will display **Upload Successful** when processing is complete
- If there are errors in the XML file, the **Status** will display **Invalid file structure**
- The **Invalid file structure** text will be a hyperlink, which can be selected to display the associated errors

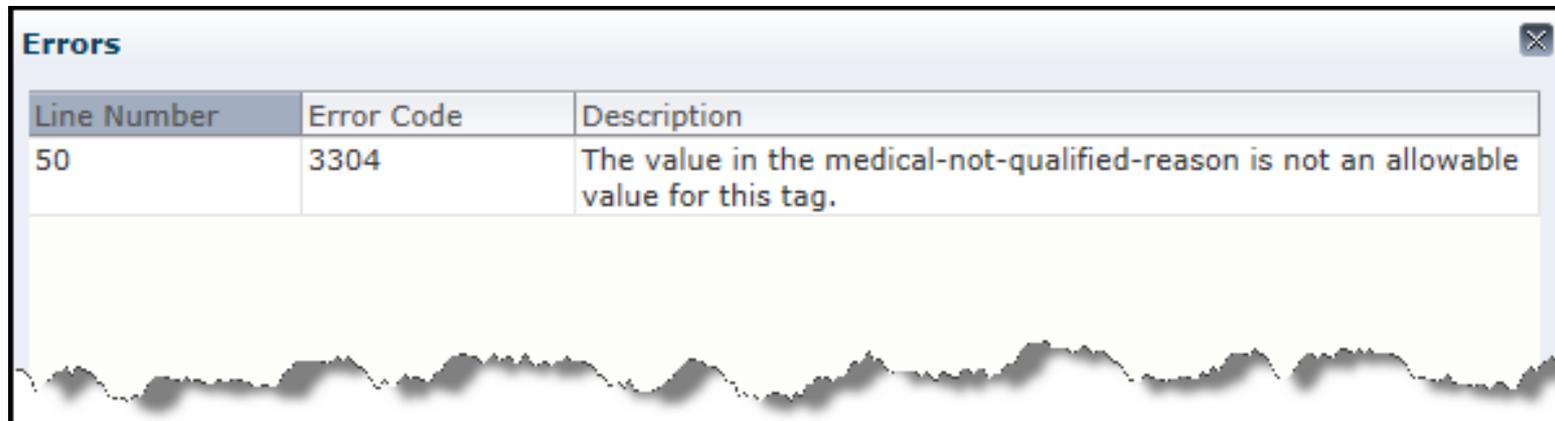
Date	User Name	File Name	File Type	Status
10/13/2014 01:43PM	Fakefirst1 FakeLast1	patient-discharge_10132015.xml	Patient Discharge	Upload Successful
09/15/2014 11:55AM	Fakefirst1 FakeLast1	patients_411_final.xml	Patient	Upload Successful
09/15/2014 11:47AM	Fakefirst1 FakeLast1	patients_411_final.xml	Patient	Invalid file structure
09/15/2014 11:29AM	Fakefirst1 FakeLast1	patientsdm3update.xml	Patient	Upload Successful

Upload Data Results [View GPRO Web Interface XML Specification](#) [Refresh](#) 



# XML File Errors (cont.)

- Up to 1000 errors appear in a grid with the **Line Number** of the error, the **Error Code**, and a **Description** of the error
- The error codes and valid values for each tag are detailed in the XML Specifications



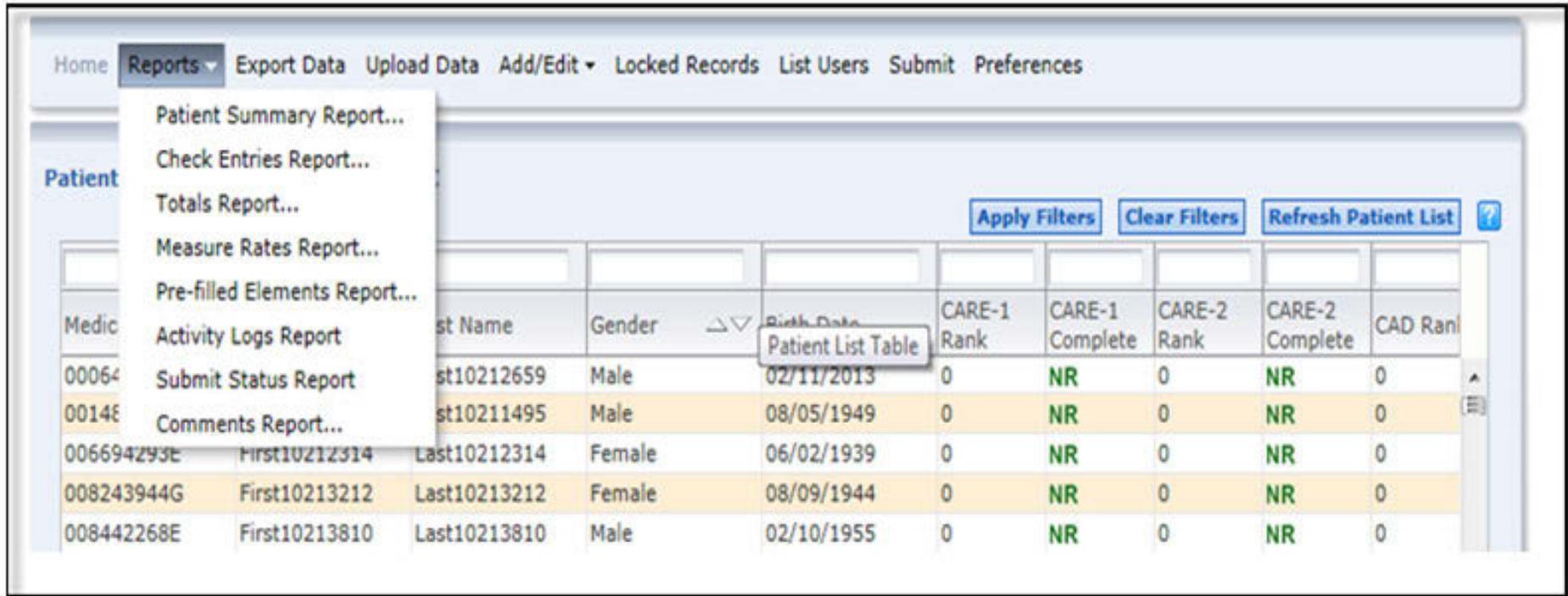
Line Number	Error Code	Description
50	3304	The value in the medical-not-qualified-reason is not an allowable value for this tag.

# Check Entries Report

- This report enables you to find errors and warnings for all patients
- The report will list
  - The patient's **Medicare ID**
  - The **Type** of message (error or warning)
  - The **Measure** and **Element** within the measure with the error or warning
  - **Message** describing the error or warning
  - Up to three **Provider Names** for the patient
- Information for all reports is available in the [2014 GPRO Web Interface User Manual](#), or the 12/4/14 Detailed Web Interface Training and Q&A Session [Presentation](#)

# Check Entries Report (cont.)

Click on the Reports drop-down arrow and select the “Check Entries Report”



The screenshot displays a software interface with a navigation bar at the top containing 'Home', 'Reports', 'Export Data', 'Upload Data', 'Add/Edit', 'Locked Records', 'List Users', 'Submit', and 'Preferences'. The 'Reports' menu is open, showing a list of report options: 'Patient Summary Report...', 'Check Entries Report...', 'Totals Report...', 'Measure Rates Report...', 'Pre-filled Elements Report...', 'Activity Logs Report', 'Submit Status Report', and 'Comments Report...'. A red arrow points to the 'Check Entries Report...' option. Below the menu, a table titled 'Patient List Table' is visible. The table has columns for 'st Name', 'Gender', 'Birth Date', 'CARE-1 Rank', 'CARE-1 Complete', 'CARE-2 Rank', 'CARE-2 Complete', and 'CAD Rank'. The data rows are as follows:

st Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank	CARE-2 Complete	CAD Rank
st10212659	Male	02/11/2013	0	NR	0	NR	0
st10211495	Male	08/05/1949	0	NR	0	NR	0
006694293E First10212314 Last10212314	Female	06/02/1939	0	NR	0	NR	0
008243944G First10213212 Last10213212	Female	08/09/1944	0	NR	0	NR	0
008442268E First10213810 Last10213810	Male	02/10/1955	0	NR	0	NR	0

# Check Entries Report (cont.)

Type of message  
(Error or Warning)

Message describing  
the error or warning

Check Entries Report - 09/09/2014 06:58PM -- <Your Organization Name Here>

[View Printable Report](#)

Medicare ID	Type	Measure	Element	Message	Provider Name 1	Provider Name 2	Provider Name 3
214718869E	ERROR	PREV-5	PREV-5 Confirma...	The value is missing.	PLNAME040455, PFNAME040455	PLNAME060950, PFNAME060950	
605510586E	ERROR	PREV-11	PREV-11 Confirma...	The value is missing.	PLNAME020974, PFNAME020974	PLNAME013728, PFNAME013728	
210386374E	ERROR	IVD Confirma...	IVD Confirmed	The value is missing.	PLNAME017336, PFNAME017336	PLNAME047799, PFNAME047799	PLNAME018694, PFNAME018694
217141785E	ERROR	CAD Confirma...	CAD Confirmed	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-13	Most Recent BP	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-14	LDL-C Test	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-16	Has IVD	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434
217141785E	ERROR	DM-17	Tobacco Non-Use	The value is missing.	PLNAME026975, PFNAME026975	PLNAME079489, PFNAME079489	PLNAME038434, PFNAME038434

# Check Entries Report (cont.)

- Generate the report after uploading your XML files or manually editing the patients to find any missing or inconsistent data
- The report will list errors and warning for all patients, so generating the report before you begin abstraction will create a large file
- The missing data is based on the required data using the parent/child relationship

# Check Entries Report (cont.)

- An error appears if the **Medical Record Found** does not have an answer
  - No other values for the patient will be checked until an answer is provided for **Medical Record Found**
- If **Medical Record Found** is **Yes**
  - The **Confirmation** for each module in which the patient is ranked will be checked and an error will appear for each confirmation missing a value
  - Measure values will not be checked in a module until the **Confirmation** for the module is set to **Yes**
- If **Confirmation** is **Yes** for the module, required values for the measures in that module are checked

2014 GPRO Web Interface

**RESOURCES & WHERE TO GO FOR  
HELP**

# Resources

- **GPRO Web Interface:** [http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO\\_Web\\_Interface.html](http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html)
  - PQRS group practice and ACO support call presentations
  - 2014 XML Specification
    - *updated on 2/5/2015 to version 1.3*
  - 2014 Supporting Documents (in the Downloads section)
    - *Data Guidance is included as a separate tab in each of the supporting documents' workbooks*
  - 2014 GPRO Web Interface assignment specifications and sampling document
- **Shared Savings Program:** <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html>
- **Pioneer ACO Model:** <http://innovation.cms.gov/initiatives/Pioneer-ACO-Model/>
- **PQRS Portal:** <https://www.qualitynet.org/portal>

# Resources (cont.)

- Slide presentations will be posted on the [GPRO Web Interface](#) page under the 2014 GPRO Web Interface Support Calls section

## 2014 GPRO Web Interface Support Calls:

In addition to the training presentations, CMS will host [support calls](#) for those PQRS group practices who registered to report 2014 PQRS via the GPRO Web Interface and ACOs submitting data via the GPRO Web Interface. Support calls will be held on the following dates:

- 11/05/14: GPRO Web Interface Overview and Q&A Session ([Presentation](#))
- 11/12/14: IACS Overview and Q&A Session ([Presentation](#))
- 11/13/14: Assignment and Sampling Overview and Q&A Session ([Presentation](#))
- 11/19/14: Measures Specification Overview and Q&A Session (ACOs only)
- 11/20/14: Measures Specifications Overview and Q&A Session (PQRS group practices only)([Presentation](#))
- 12/04/14: Detailed Web Interface Training and Q&A Session ([Presentation](#))
- 12/11/14: Detailed XML Training and Q&A Session ([Presentation](#))
- 01/15/15: GPRO Web Interface Q&A Session ([Presentation](#))
- 01/26/15 – 01/30/15: Daily GPRO Web Interface Q&A Sessions ([01/26/15 Presentation](#), [01/27/15 Presentation](#), [01/29/15 Presentation](#), [1/30/3015 Presentation](#))
- 02/05/15: Weekly GPRO Web Interface Q&A Session ([Presentation](#))
- 02/12/15: Weekly GPRO Web Interface Q&A Session
- 02/19/15: Weekly GPRO Web Interface Q&A Session ([Presentation](#))
- 02/26/15: Weekly GPRO Web Interface Q&A Session ([Presentation](#))
- 03/05/15: Weekly GPRO Web Interface Q&A Session
- 03/12/15: Weekly GPRO Web Interface Q&A Session
- 03/16/15 – 03/20/15: Daily GPRO Web Interface Q&A Sessions (weekdays only)
- 04/08/15: GPRO Web Interface Lessons Learned

*Note: Only presentations that have updated content will be posted; therefore, presentations from the 1/28/15 and 2/12/15 support calls will not be posted.*

# Resources (cont.)

- Please refer to the final Q&A document available in the 2014 GPRO web Interface quality Reporting Questions & Answers Document section of the [GPRO Web Interface](#) page

- 03/16/15 – 03/20/15: Daily GPRO Web Interface Q&A Sessions (weekdays only)

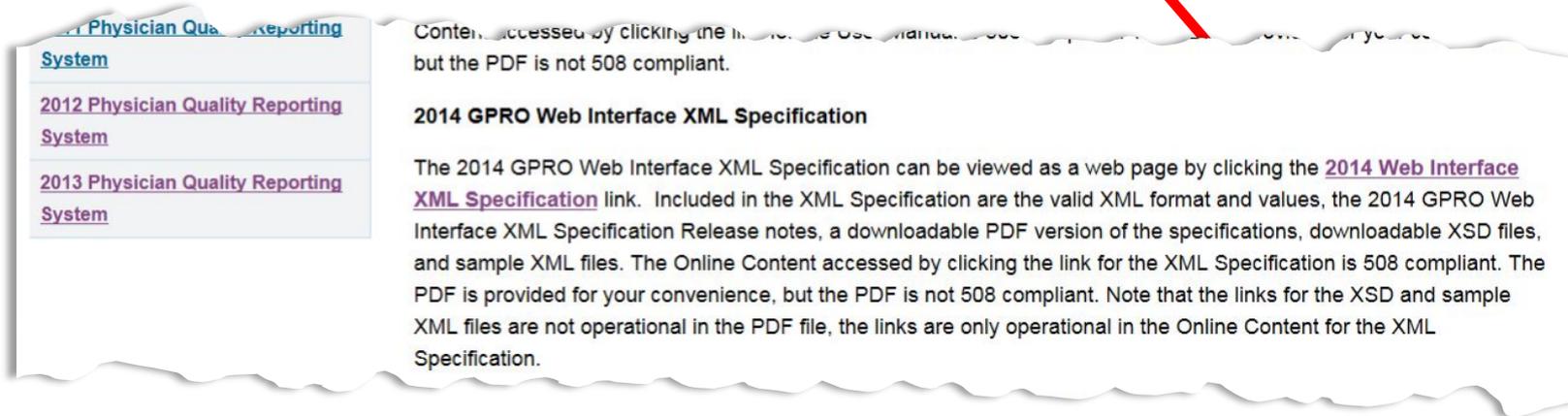
- 04/08/15: GPRO Web Interface Lessons Learned

## **2014 GPRO Web Interface Quality Reporting Questions & Answers Document**

The 2014 GPRO Web Interface Quality Reporting Q&A document provides answers for commonly asked questions about measures reported through the GPRO Web Interface, sampling and assignment for the measures, and use of the GPRO Web Interface (system features). To view click on the following link: [2014 GPRO Web Interface Quality Reporting Q&A document](#)

# Resources (cont.)

- Version 1.3 of the 2014 GPRO Web Interface XML Specification is available on the [GPRO Web Interface](#) page



The screenshot shows a web page with a navigation menu on the left and a main content area on the right. The navigation menu includes links for "2011 Physician Quality Reporting System", "2012 Physician Quality Reporting System", and "2013 Physician Quality Reporting System". The main content area features a section titled "2014 GPRO Web Interface XML Specification". A red arrow points to the "2014 Web Interface XML Specification" link in the text. The text describes the XML specification, including valid XML format and values, release notes, downloadable PDF, XSD files, and sample XML files. It notes that the online content is 508 compliant, while the PDF is not.

Content accessed by clicking the link for the Use manual... but the PDF is not 508 compliant.

**2014 GPRO Web Interface XML Specification**

The 2014 GPRO Web Interface XML Specification can be viewed as a web page by clicking the [2014 Web Interface XML Specification](#) link. Included in the XML Specification are the valid XML format and values, the 2014 GPRO Web Interface XML Specification Release notes, a downloadable PDF version of the specifications, downloadable XSD files, and sample XML files. The Online Content accessed by clicking the link for the XML Specification is 508 compliant. The PDF is provided for your convenience, but the PDF is not 508 compliant. Note that the links for the XSD and sample XML files are not operational in the PDF file, the links are only operational in the Online Content for the XML Specification.

# Resources (cont.)

The QualityNet Portal is located at <https://www.qualitynet.org/portal>

**CMS.gov** | QualityNet  
Centers for Medicare & Medicaid Services

**Related Links**

- CMS
- Quality Improvement Resources
- Measure Development
- Consensus Organizations for Measure Endorsement/Approval
- Communication Support Page

**Guest Instructions**

Welcome to the Physician and Other Health Care Professionals Quality Reporting Portal. Please click on the Sign In button located in the center of the page.

[Download and install Adobe Reader](#) to view User Guides in accessible PDF format.

**User Guides**

- PQRS Portal User Guide
- PQRS SEVT User Guide
- PQRS Submissions User Guide
- PQRS Submission Reports User Guide
- PQRS GPRO Web Interface User Guide
- PQRS Feedback Report User Guide
- eRx Feedback Report User Guide
- eRx Payment Adjustment Feedback User Guide
- PQRS Feedback Dashboard User Guide

**PQRS Verify Report**

Enter a TIN or NPI to verify that a feedback report exists for your organization. The TIN or NPI must be one used to submit Medicare claims and valid PQRI quality data codes.

TIN  NPI

Lookup

TIN: e.g. 01-2123234 or 012123234  
NPI: e.g. 012123234

**Guest Announcement**

Information in the Taxpayer Identification Number (Tax ID or TIN-level) PQRI feedback reports is confidential. Your report is safely stored online and accessible only to you (and those you authorize) through the web application. TIN-level reports should be shared only with others within the practice who have a vested interest in the summarized quality data. Sharing of other PQRI participants' information is acceptable only if the individual EP has authorized the TIN to do so. Please ensure that these reports are handled appropriately and disposed of properly to avoid a potential Personally Identifiable Information (PII) exposure or Identity Theft risk.

**Physician and Other Health Care Professionals Quality Reporting Portal**

[Sign In](#) to your Portal

If you do not have an account, please register.

[Forgot your password?](#)

For assistance with new & existing IACS accounts, review the Quick Reference Guides.

Notice: If you have not used your IACS account within the past 60 days or more, your account has been temporarily disabled as required by the CMS security policy. You should have received an e-mail at the e-mail address associated with your IACS account profile instructing you how to get your account re-enabled. If you need further assistance, please contact the QualityNet Help Desk at 1-866-288-8912, or [qnetssupport@hcqis.org](mailto:qnetssupport@hcqis.org).

Notice: If you are experiencing difficulties viewing the PQRS Communications Support Page with Internet Explorer 9.0, please ensure that you are using the compatibility view feature by doing the following: Open Internet Explorer, Select Tools, Select Compatibility View

**For support**, please contact the QualityNet Help Desk at 866-288-8912, TTY 877-715-6222, or via email at [qnetssupport@hcqis.org](mailto:qnetssupport@hcqis.org)

**Scheduled System Outages**

PQRS system and applications will be down for maintenance during the dates below. For questions, contact the QualityNet Helpdesk.

Every Tuesday starting at 8:00 PM ET through Wednesday at 6:00 AM ET  
Every Thursday starting at 8:00 PM ET through Friday at 6:00 AM ET  
Third weekend of each month starting at 8:00 PM ET through Monday at 6:00 AM ET

# Resources (cont.)

## The QualityNet Portal

### CMS.gov | QualityNet

Centers for Medicare & Medicaid Services

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TIN  NPI

#### PQRS Look Up

Enter a TIN or NPI to check if your organization has...

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Information in the Taxpayer Identification Number (Tax ID or TIN-level) PQRI feedback reports is confidential. Your report is safely stored online and accessible only to you (and those you authorize) through the web application. TIN-level reports should be shared only with others within the practice who have a vested interest in the summarized quality data. Sharing of other PQRI participants' information is acceptable only if the individual EP has authorized the TIN to do so. Please ensure that these reports are handled appropriately and disposed of properly to avoid a potential Personally Identifiable Information (PII) exposure or Identity Theft risk.

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to your Portal

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Every Thursday starting at 8:00 PM ET through Friday at 6:00 AM ET  
Third weekend of each Month starting Friday at 8:00 PM ET through Monday at 6:00 AM ET

Upcoming Maintenance weekend schedule:

- January (01/23 - 01/25)
- February (02/20 - 02/22)
- March (03/20 - 03/22)
- April (04/17 - 04/19)

# Resources (cont.)

- IACS Quick Reference Guides are provided on the Portal

**Physician and Other Health Care Professionals Quality Reporting Portal**

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[Forgot your password?](#)

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# Where to Go for Help

- **QualityNet Help Desk (PQRS and IACS)**
  - E-mail: [gnetsupport@hcqis.org](mailto:gnetsupport@hcqis.org)
  - Phone: (866) 288-8912 (TTY 1-877-715-6222)
  - Fax: (888) 329-7377
- **CAHPS for PQRS Survey Project Team**
  - E-mail: [pqrscahps@hcqis.org](mailto:pqrscahps@hcqis.org)
- **EHR Incentive Program Information Center**
  - Phone: (888) 734-6433 (TTY 888-734-6563)
- **VM Help Desk**
  - Phone: (888) 734-6433 Option 3 or [pvhelpdesk@cms.hhs.gov](mailto:pvhelpdesk@cms.hhs.gov)
- **Medicare Shared Savings Program ACO**
  - Information is available on the Shared Savings Program website at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html>.
  - E-mail: [SharedSavingsProgram@cms.hhs.gov](mailto:SharedSavingsProgram@cms.hhs.gov)
- **Pioneer ACO**
  - E-mail: [PIONEERQUESTIONS@cms.hhs.gov](mailto:PIONEERQUESTIONS@cms.hhs.gov)

# Acronyms

- **ACO** – Accountable Care Organization
- **CAHPS** – Consumer Assessment of Healthcare Providers and Systems summary surveys
- **CMS** – Centers for Medicare & Medicaid Services
- **CQMs** – Clinical Quality Measures [for attestation]
- **eCQMs** – Electronic Clinical Quality Measures [for PQRS Portal submission]
- **EHR** – Electronic Health Record
- **EP** – Eligible Professional
- **FFS** – Fee-for-Service
- **GPRO** – Group Practice Reporting Option
- **NPI** – National Provider Identifier
- **ONC** – Office of the National Coordinator
- **PQRS** – Physician Quality Reporting System
- **PFS** – Physician Fee Schedule
- **VM** – Value-based Payment Modifier

Time for

# QUESTION & ANSWER SESSION