

Physician Quality Reporting System (PQRS) 2013 Group Practice Reporting Option (GPRO) and SSP Accountable Care Organization (ACO)



***GPRO Web Interface
(WI) Assignment and
Sampling***

Program Year 2013

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Agenda

- Introduction to Assignment and Sampling
 - Web Interface Assignment Overview
 - Web Interface Sampling Overview
- Reporting on Sampled Patients
- List of Helpful Specifications Documents

About this Presentation

- This presentation will cover information related to the GPRO Web Interface Reporting Mechanism. If you are submitting data through another reporting mechanism for PQRS reporting, please visit the PQRS website on CMS.gov for more information on how to submit data for PQRS.
- Please refer to the **2013 GPRO Assignment Specifications** and **2013 GPRO Sampling Supplement** for detail about the assignment and sampling process covered in the following slides at:
 - http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html

Assignment and Sampling Overview

- The GPRO Web Interface (WI) allows ACOs and PQRS GPROs to report data on a pre-determined population of patients
- Patients are first **assigned** to an ACO or PQRS GPRO
- Patients are then put into a **sample** for quality measure reporting

ACO and PQRS GPRO Assignment

- CMS assigns a Medicare beneficiary to an ACO or PQRS GPRO based on current program rules
 - SSP ACO assignment algorithm
 - Use beneficiaries assigned for the 2013 3rd quarter report
 - PQRS GPRO (WI reporters) assignment algorithm
 - Use beneficiaries assigned using claims from 1/1/13 through 10/31/13
 - A patient assigned in one year of the program may or may not be assigned to the same ACO or PQRS GPRO in the following or preceding years
- Assigned beneficiaries who meet additional quality eligibility criteria may be sampled into GPRO WI modules through a three-step process
 - CMS analyzes Medicare claims submitted and captured in the Integrated Data Repository (IDR) from January 1, 2013 through October 31, 2013 of the calendar year measurement period (i.e., reporting period)
 - Patients are sampled using a methodology that would increase the likelihood of a patient being sampled into multiple modules

ACO and PQRS GPRO Sampling

Step 1: Exclusions

Sampling step 1: Determine assigned beneficiaries' eligibility for quality measurement:

- Keep only assigned beneficiaries with two or more primary care office visits during the reporting period (by services, not provider type)
 - Note: CMS only will have 10 months of data
- Exclude assigned beneficiaries in the following cases:
 - Beneficiaries with partial-year Medicare Parts A and B enrollment or for whom Medicare is not the primary payer
 - Medicare Advantage enrollees
 - Entered the Medicare hospice benefit during the measurement period
 - Not living in the US during the measurement period

ACO and PQRS GPRO Sampling

Step 2: Module Inclusion

Sampling step 2: Determine remaining assigned beneficiaries' eligibility for inclusion into modules:

- The GPRO Web Interface includes 22 GPRO quality measures, which span three domains and 15 modules
 - Care coordination/patient safety domain (2 GPRO measures, each its own module)
 - Preventive health domain (8 GPRO measures, each its own module)
 - At-risk population domain:
 - Diabetes (1 individual measure + 5 component measures scored as 1 composite measure)
 - Hypertension (1 GPRO measure)
 - Ischemic Vascular Disease (2 GPRO measures)
 - Heart Failure (1 GPRO measure)
 - Coronary Artery Disease (2 component measures scored as 1 composite measure)

PQRS GPRO Sampling

Step 3: Beneficiary Sampling

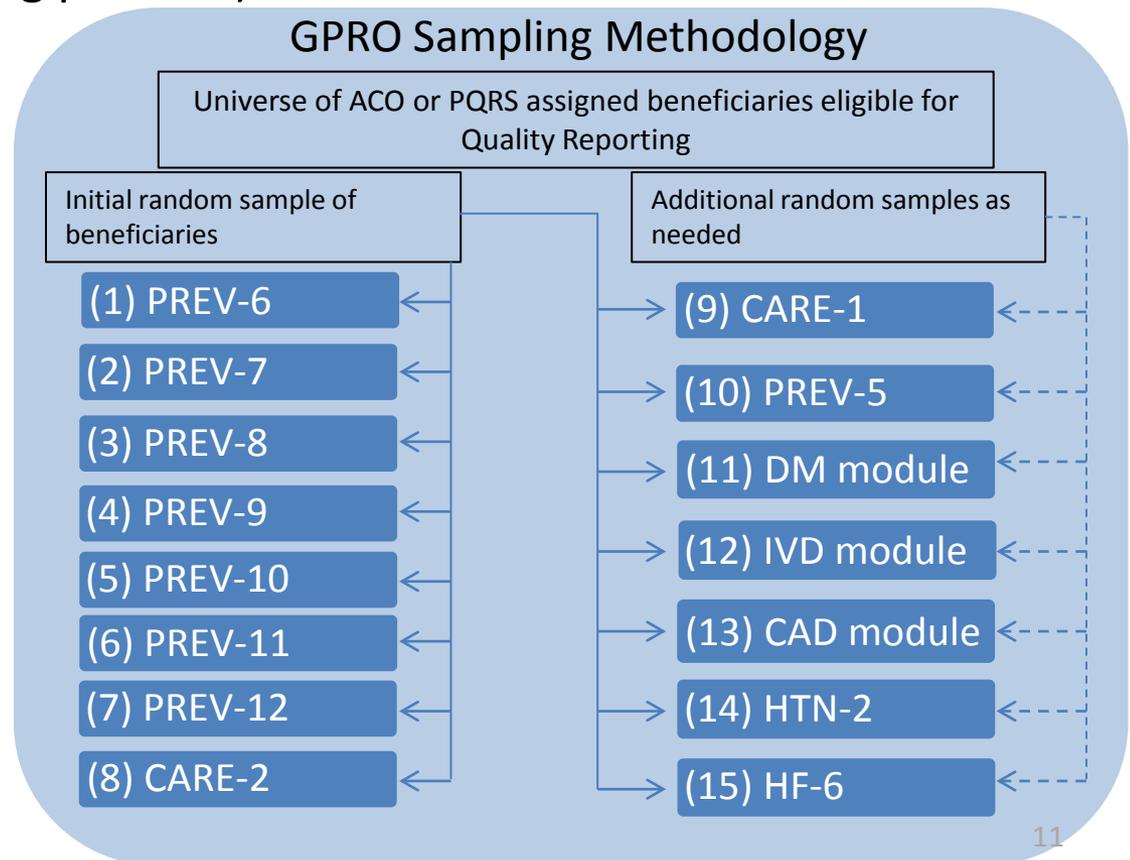
Sampling step 3: Sample beneficiaries for each module:

- Beneficiaries are flagged to indicate whether they are eligible for each module based on measure criteria (e.g., DM diagnosis)
- Beneficiaries are sampled for each module
 - 616 beneficiaries are sampled for large GPROs with 100+ EPs (the required 411 patients plus a 50% oversample) for each module
 - 327 beneficiaries are sampled for medium GPROs with 25-99 EPs (the required 218 patients plus a 50% oversample) for each module
- When beneficiaries are selected for the sample, they are assigned a rank
 - The rank is the order in which the patient is randomly selected from the qualified pool of patients for a group
 - Patients are ranked from 1 to 616 for large GPROs (100+ EPs)
 - » For modules with fewer than 616 patients available from the GPRO, 100% of eligible patients are ranked for the module
 - Patients are ranked from 1 to 327 for medium GPROs (25-99 EPs)
 - » For modules with fewer than 327 patients available from the GPRO, 100% of eligible patients are ranked for the module

ACO and PQRS GPRO Beneficiary Sampling

To reduce the burden on practices, CMS has adopted a two-step process to reduce the number of medical records a SSP ACO and a PQRS GPRO is required to abstract (maximize overlapping patients):

1. An initial random sample of beneficiaries is pulled and used to sample into measures on the general population without chronic disease (i.e., most PREV measures and CARE-2)
 - Overlapping patients with similar but not identical ranks
2. Use the initial random sample to sample into other modules (i.e., DM, IVD, HTN, HF, CAD) or measures (i.e., PREV-5, CARE-1) that have more elaborate criteria;
 - When a module/measure has fewer than 616 (for ACOs and large GPROs) or 327 (for medium GPROs) beneficiaries after the initial pull, additional beneficiaries are randomly sampled from the group of beneficiaries eligible for that module



Reporting on Sampled Patients

- Patients will be assigned a rank between 1 and 616 (for ACOs and large GPROs) or 1 and 327 (for medium GPROs) based on the random order they are populated into each denominator sample
 - This represents a 50% oversample of the target sample size to allow for cases in which sampled patients are not qualified for a particular module (e.g., the ACO or GPRO could not find the patient's medical record). In these cases the ACO or GPRO will move on to the next consecutively ranked patient until they have completely reported on the target sample for each module or until there are no additional patients to abstract in the module.

Reporting on Sampled Patients (cont.)

- ACOs and GPROs will be required to report on the required number of consecutively ranked Medicare patients with respect to services furnished during the measurement period
 - ACOs and large GPROs (100+ EPs) will be required to report on 411 consecutively ranked patients
 - Medium GPROs (25-99 EPs) will be required to report on 218 consecutively ranked patients
- Denominator inclusion and exclusion criteria for some modules may mean that reaching the target sample size is not possible for an ACO or GPRO
 - In this case, the organization must complete abstraction on 100% of sampled patients

Helpful Specifications Documents

- 2013 GPRO WI Measures List
- 2013 GPRO WI Assignment Document
 - Separate documents for ACOs and PQRS GPROs
- 2013 GPRO WI Sampling Document
- 2013 GPRO WI Narrative Specifications
- 2013 GPRO WI Supporting Documents
- 2013 GPRO WI Performance Calculation Flow
- These documents are available here:
 - http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html

Helpful Specifications Documents (cont.)

- 2013 GPRO WI Measures List (PQRS Only)
 - List of all measures and modules to be reported in the WI
 - Measure Title
 - Measure Steward Identification
 - GPRO WI Measure Number
 - NQF Measure Number
 - PQRS Claims/Registry Measure Number
 - This measures list is available here:
 - http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html
- The 2013 ACO measures are available here:
 - http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Quality_Measures_Standards.html

Helpful Specifications Documents (cont.)

- 2013 GPRO Assignment Specifications (PQRS Only)
 - Details on the Assignment Methodology Used to Determine the Population of Medicare Patients that May be Used for the GPRO WI Sample
 - List of Provider Types
 - List of Primary Care Visit Codes
 - Describes Data Sources Used for Analysis
- This assignment document for PQRS GPROs is available here:
 - http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html

Helpful Specifications Documents

- SSP ACO Shared Savings, Losses, and Assignment Document (SSP ACOs Only)
 - Details on the Assignment Methodology Used to Determine the Population of Medicare Patients that are Assigned to an ACO and May be Used for the GPRO WI Sample
 - List of Provider Types
 - List of Primary Care Visit Codes
 - Describes Data Sources Used for Analysis
- This SSP ACO document is available here:
 - <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Financial-and-Assignment-Specifications.html>

List of 2013 GPRO Webinars

- Look out for these other 2013 PQRS GPRO Webinars on the CMS YouTube site: <http://go.cms.gov/GPROPlaylist>
 - 2013 PQRS GPRO 101 Part 1
 - 2013 PQRS GPRO 101 Part 2
 - 2013 GPRO Reporting Mechanisms Part 1
 - 2013 GPRO Reporting Mechanisms Part 2
 - 2013 GPRO Value-Based Modifier
 - Measures Overview
 - Public Reporting
 - 2013 PQRS GPRO and ACO Web Interface Submission – IACS
 - 2013 PQRS GPRO and ACO Web Interface Measure Specifications/
Supporting Documents Part 1
 - 2013 PQRS GPRO and ACO Web Interface Measure Specifications/
Supporting Documents Part 2
 - 2013 PQRS GPRO and ACO Web Interface Measure Specifications/
Supporting Documents Part 3

Upcoming Webinars

- Please also check the CMS YouTube site for this upcoming webinar:
 - CAHPS Overview

Resources/Where to Begin

- GPRO Section of CMS PQRS Website:
http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/GPRO_Web_Interface.html
- Medicare Shared Savings Program Website:
<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html>
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