



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



**Web Interface  
Measure Specifications/  
Supporting Documents  
Part 2**

***Program Year 2013***

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# Agenda

- Part 1
  - 2013 GPRO Web Interface Helpful Specifications Documents
  - Patient Confirmation
  - The Patient Care Module
  - The Coronary Artery Disease (CAD) Composite Module

# Agenda (cont.)

- Part 2
  - The Diabetes Module
  - The Heart Failure Module
  - The Hypertension Module
  - The Ischemic Vascular Disease Module
- Part 3
  - The Preventive Care Measures

# 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, please visit the PQRS website on CMS.gov for more information on how to submit data for PQRS.

# The Diabetes Module

- The Diabetes Module contains one measure and one composite measure made up of five component measures:
  - DM-2: Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent hemoglobin A1c greater than 9.0%
  - Optimal Diabetes Care (All or Nothing Scoring)
    - DM-13: Diabetes Mellitus: High Blood Pressure Control
    - DM-14: Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control
    - DM-15: Diabetes Mellitus: Hemoglobin A1c Control (< 8%)
    - DM-16: Diabetes Mellitus: Daily Aspirin or Antiplatelet Medication Use for Patients with Diabetes and Ischemic Vascular Disease
    - DM-17: Diabetes Mellitus: Tobacco Non-Use

# The Diabetes Module (cont.)

- Patients are eligible for random sampling into the Diabetes Module if
  - They have been assigned to the GPRO
  - They are age 18 through 75 years of age at the beginning of the measurement period
  - They have a documented history of diabetes during the measurement period or year prior to the measurement period
  - Patients with a diagnosis of polycystic ovaries, gestational diabetes or steroid induced diabetes are excluded from the module

# The Diabetes Module (cont.)

## Web Interface Data (XML or Manual Data Entry)

### *History of DM?*

- **Yes** – Select if the patient does have a history of DM
- **Not Confirmed** – Select if the patient does not have a history of DM
- **Not Confirmed – Medical Reasons** – Select this option if the patient has polycystic ovaries, gestational diabetes or steroid induced diabetes
- **Other CMS Approved Reason** – Select this option if there is an “other” CMS-approved reason for patient disqualification from the module

# The Diabetes Module

DM-2: Diabetes Mellitus: Hemoglobin A1c Poor Control

DM-15: Diabetes Mellitus: Hemoglobin A1c Control (< 8%)

## DM-2 Measure Description

Percentage of patients aged 18 through 75 years with diabetes mellitus who had most recent hemoglobin A1c greater than 9.0%

## DM-15 Measure Description

Percentage of patients ages 18 to 75 years of age with diabetes mellitus who had HbA1c < 8.0 percent

## Web Interface Data (XML or Manual Data Entry)

*Did the patient have one or more A1c tests performed in the measurement period?*

- **No** – Select if the patient does not have one or more A1c tests documented
- **Yes** – Select if the patient does have one or more A1c tests documented - **enter date of most recent test and value**

# The Diabetes Module

## DM-2: Diabetes Mellitus: Hemoglobin A1c Poor Control

## DM-15: Diabetes Mellitus: Hemoglobin A1c Control (< 8%) (cont.)

### Guidance

- At a minimum, documentation in the medical record must include a note indicating the date on which the HbA1c test was performed and the result
- Use the following priority ranking:
  - Lab report draw date
  - Lab report date
  - Flow sheet documentation
  - Practitioner notes
  - Other documentation
- If test was performed but result is not documented, record "0" (zero) value
- Use the DM Evaluation tab in the Supporting Document to find laboratory testing codes specific to this measure

# The Diabetes Module

## DM-13: Diabetes Mellitus: High Blood Pressure Control

### Measure Description

Percentage of patients ages 18 to 75 years of age with diabetes mellitus who had a blood pressure < 140/90 mmHg

### Web Interface Data (XML or Manual Data Entry)

*Was one or more of the patient's blood pressure (BP) readings documented during the measurement period?*

- **No** – Select if the patient does not have one or more BP readings documented
- **Yes** – Select if the patient has one or more BP readings documented - **enter date of most recent test, systolic and diastolic values**

# The Diabetes Module

## DM-13: Diabetes Mellitus: High Blood Pressure Control

### Guidance

- Both the systolic and diastolic blood pressure measurements are required for inclusion. If there are multiple BPs on the same date of service, use the lowest systolic and lowest diastolic BP on that date as the representative BP
- Identify the most recent visit to the practitioner's office or clinic that occurred during the measurement period in which a BP reading was noted
- To be eligible, the representative BP must have been obtained during a visit to the practitioner's office or other non-emergency outpatient facility, such as a clinic or urgent care center. Outpatient visits for the sole purpose of having a diagnostic test or surgical procedure performed (e.g., sigmoidoscopy, removal of a mole) are not eligible

# The Diabetes Module

## DM-14: Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control

### Measure Description

Percentage of patients ages 18 to 75 years with diabetes mellitus who had  
LDL-C < 100 mg/dL

### Web Interface Data (XML or Manual Data Entry)

*Did the patient have one or more LDL-C tests performed in the measurement  
period?*

- **No** – Select if the patient does not have one or more LDL-C tests documented
- **Yes** – Select if the patient does have one or more LDL-C tests documented - **enter date of most recent test, and value**

# The Diabetes Module

## DM-14: Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control (cont.)

### Guidance

- At a minimum, documentation in the medical record must include a note indicating the date on which the LDL-C test was performed and the result documented
- If test was performed but result is not documented, record a "0" (zero) value
- Use the following priority ranking:
  - Lab report draw date
  - Lab report date
  - Flow sheet documentation
  - Practitioner notes
  - Other documentation
- If laboratory unable to calculate LDL-C value due to high triglycerides, record 0 (zero). If the test result is labeled "unreliable" and a result is provided, also record 0 (zero). Do not enter a ratio as a value (it is not a valid value)
- A calculated LDL may be used for LDL-C screening and control indicators

# The Diabetes Module

## DM-16: Diabetes Mellitus: Daily Aspirin or Antiplatelet Medication Use for Patients with Diabetes and Ischemic Vascular Disease

### Measure Description

Percentage of patients ages 18 to 75 years of age with diabetes mellitus and ischemic vascular disease with documented daily aspirin or antiplatelet medication use during the measurement year unless contraindicated

### Web Interface Data (XML or Manual Data Entry)

#### *History of Ischemic Vascular Disease (IVD)?*

- **No** – Select if the patient does not have a history of IVD
- **Yes** – Select if the patient does have a history of IVD

#### *Taking Aspirin or Antiplatelet Medication?*

- **No** – Select if the patient is not taking aspirin or antiplatelet medication
- **Yes** – Select if the patient is taking aspirin or antiplatelet medication
- **No-Medical Reasons** – Select if the patient is not taking aspirin or an antiplatelet medication for medical reasons

# The Diabetes Module

## DM-16: Diabetes Mellitus: Daily Aspirin or Antiplatelet Medication Use for Patients with Diabetes and Ischemic Vascular Disease (cont.)

### Guidance

- The coding supplied by the measure owners to identify ischemic vascular disease (IVD) is not the same in the IVD module as it is for this component measure (DM-16). The DM-16 list does not include cardiac surgery procedure codes. In addition, the Drug Codes may differ, as these measures have different measure owners.
- Accepted contraindications:
  - Anticoagulant use, Lovenox (Enoxaparin) or Coumadin (Warfarin)
  - Any history of gastrointestinal (GI)\* or intracranial bleed (ICB)
  - Allergy to aspirin (ASA)
- Gastroesophageal reflux disease (GERD) is not automatically considered a contraindication but may be included if specifically documented as a contraindication by the physician
- The following may be exclusions if specifically documented by the physician:
  - Use of non-steroidal anti-inflammatory agents
  - Documented risk for drug interaction
  - Uncontrolled hypertension defined as > 180 systolic, > 110 diastolic
  - Other provider documented reason for not being on ASA therapy

# The Diabetes Module

## DM-17: Diabetes Mellitus: Tobacco Non-Use

### Measure Description

Percentage of patients ages 18 to 75 years of age with a diagnosis of diabetes who indicated they were tobacco non-users

### Web Interface Data (XML or Manual Data Entry)

*Was the patient screened and identified as a tobacco non-user during the measurement period?*

- **No** – Select if the patient was screened and identified as a tobacco user
- **Yes** – Select if the patient was screened and identified as a tobacco non-user
- **Not screened** – Select if the patient was not screened for tobacco use

# The Heart Failure Module

The Heart Failure Module contains one measure:

HF-6: Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)

- Patients are eligible for random sampling into the Heart Failure Module if
  - They have been assigned to the GPRO
  - They are age 18 or older at the beginning of the measurement period
  - The patient has a documented diagnosis of HF (active or history of) at anytime in the patient's history up through the last day of the measurement period

## Web Interface Data (XML or Manual Data Entry)

### *Documented diagnosis or history of HF?*

- **Yes** – Select this option if the patient has a documented history of HF anywhere in the medical record
- **Not Confirmed** – Select this option if you are unable to confirm the diagnosis of HF for the patient
- **Other CMS Approved Reason** – Select this option if there is an "other" CMS-approved reason for patient disqualification from the module

# The Heart Failure Module

## HF-6: Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)

### Measure Description

Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12 month period when seen in the outpatient setting OR at **each** hospital discharge

### Web Interface Data (XML or Manual Data Entry)

*Does the patient have LVSD (LVEF <40% or documented as moderate or severe)?*

- **No** – Select this option if the patient does not have LVSD
- **Yes** – Select if the patient has LVSD

# The Heart Failure Module

## HF-6: Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) (cont.)

*Was the patient prescribed a beta-blocker therapy at any time during the measurement period?*

- **No** – Select if the patient is not prescribed beta-blocker therapy
- **Yes** – Select if the patient is prescribed beta-blocker therapy
- **No-Medical Reasons** – Select if the patient is not prescribed beta-blocker therapy for medical reasons
- **No-Patient Reasons** – Select if the patient is not prescribed beta-blocker therapy for patient reasons
- **No-System Reasons** – Select if the patient is not prescribed beta-blocker therapy for system reasons

# The Heart Failure Module

## HF-6: Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) (cont.)

### Guidance

- If the patient has ever had an LVEF < 40% or a documented LVEF as moderate or severe answer “Yes” to the presence of LVSD
- A list of synonyms representing heart failure, LVSD, beta-blocker medications lists and clinical codes sets can be found in the Supporting Documents for the HF module
- Bisoprolol, carvedilol, or sustained release metoprolol succinate are the **ONLY** beta-blockers allowed for this measure
- If multiple diagnostic studies were performed on the same day to measure ejection fraction, use the following hierarchy to determine if LVSD is present:
  - cardiac catheterization
  - echocardiogram
  - MUGA or other cardiac scan

# The Heart Failure Module

## HF-6: Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) (cont.)

### Guidance

- ***Prescribed Outpatient Setting*** may include prescription given to the patient for beta-blocker therapy at one or more visits in the measurement period OR patient already taking beta-blocker therapy as documented in the current medication list
- ***Prescribed Inpatient Setting*** may include prescription given to the patient for beta-blocker therapy at discharge OR beta-blocker therapy to be continued after discharge as documented in the medication list

# The Hypertension Module

The Hypertension Module contains one measure:

HTN-2: Hypertension (HTN): Controlling High Blood Pressure

- Patients are eligible for random sampling into the HTN Module if
  - They have been assigned to the GPRO
  - They are age 18 through 85 at the beginning of the measurement period
  - They have a diagnosis of hypertension

Web Interface Data (XML or Manual Data Entry)

*History of HTN?*

- **Yes** – Select if the patient does have a history of HTN
- **Not Confirmed** – Select if the patient does not have a history of HTN
- **Other CMS Approved Reason** – Select this option if there is an “other” CMS-approved reason for patient disqualification from the module

# The Hypertension Module

## HTN-2: Hypertension (HTN): Controlling High Blood Pressure

### Measure Description

Percentage of patients aged 18 through 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (< 140/90 mmHg) during the measurement year

### Web Interface Data (XML or Manual Data Entry)

*Most recent BP taken during the measurement period?*

- **No** – Select if the patient's most recent BP measurement was not taken during the measurement period
- **Yes** – Select if the patient's most recent BP measurement was taken during the measurement period – **enter date of BP, systolic and diastolic values**
- **No-Medical Reasons** – Select if the patient's BP was not taken for medical reasons

# The Ischemic Vascular Disease Module

- The Ischemic Vascular Disease Module contains two measures:
  - IVD-1: Ischemic Vascular Disease (IVD): Complete Lipid Panel and Low Density Lipoprotein (LDL-C) Control
  - IVD-2: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
- Patients are eligible for random sampling into the IVD Module if
  - They have been assigned to the GPRO
  - They are age 18 or older at the beginning of the measurement period
  - They have a diagnosis of ischemic vascular disease

## Web Interface Data (XML or Manual Data Entry)

### *History of IVD?*

- **Yes** – Select this option if the patient has a documented history of IVD or was discharged alive for AMI, CABG or PCI anywhere in the medical record
- **Not Confirmed** – Select if the patient does not have a history of IVD or was not discharged alive for AMI, CABG or PCI anywhere in the medical record
- **Other CMS Approved Reason** – Select this option if there is an “other” CMS-approved reason for patient disqualification from the module

# The Ischemic Vascular Disease Module

## IVD-1: Ischemic Vascular Disease (IVD): Complete Lipid Panel and Low Density Lipoprotein (LDL-C) Control

### Measure Description

Percentage of patients aged 18 years and older with Ischemic Vascular Disease (IVD) who received at least one lipid profile within 12 months and whose most recent LDL-C level was in control (less than 100 mg/dL)

### Web Interface Data (XML or Manual Data Entry)

*At least one lipid profile (or ALL component tests) during the measurement period?*

- **No** – Select if the patient's most recent lipid profile was not taken during the measurement period
- **Yes** – Select if the patient's most recent lipid profile was taken during the measurement period – **enter date of most recent test and value**

# The Ischemic Vascular Disease Module

## IVD-1: Ischemic Vascular Disease (IVD): Complete Lipid Panel and Low Density Lipoprotein (LDL-C) Control (cont.)

### Guidance

- If laboratory unable to calculate LDL-C value due to high triglycerides, record 0 (zero). If the test result is labeled "unreliable" and a result is provided, also record 0 (zero). Do not enter a ratio as a value (it is not a valid value)
- If LDL-C could not be calculated due to high triglycerides, count as complete lipid profile
- Use the IVD Evaluation tab in the Supporting Document to find laboratory testing codes specific to this measure
- There are no medical exclusions for this measure

# The Ischemic Vascular Disease Module

## IVD-2: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic

### Measure Description

Percentage of patients aged 18 years and older with Ischemic Vascular Disease (IVD) with documented use of aspirin or another antithrombotic

### Web Interface Data (XML or Manual Data Entry)

*Documented use of aspirin or another antithrombotic during the measurement period?*

- **No** – Select this option if the patient does not use aspirin or another antithrombotic
- **Yes** – Select this option if the patient uses aspirin or another antithrombotic

# The Ischemic Vascular Disease Module

## IVD-2: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic (cont.)

### Guidance

- Oral antithrombotic therapy includes: Aspirin, clopidogrel or combination of aspirin and extended release dipyridamole
- Use the IVD Drug Codes tab in the Supporting Document to find aspirin or other antithrombotic codes specific to this measure
- There are no medical exclusions for this measure

# List of 2013 GPRO Webinars

- Look out for these other 2013 PQRS GPRO Webinars on the CMS YouTube site:  
<http://www.youtube.com/user/CMSHHSgov>
  - 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
  - Public Reporting
  - Measures Overview
  - Individuals Authorized Access to the CMS Computer Services (IACS)

# Upcoming Webinars

- Please also check the CMS YouTube site for these upcoming webinars:
  - Web Interface: Assignment and Sampling
  - CAHPS Overview
- Note: CMS will host live training sessions on GPRO Web Interface reporting.

# Resources

- For assistance with questions related to ACO GPRO and PQRS GPRO quality Measure Specifications, please contact the QualityNet Help Desk:
  - Monday – Friday: 7:00 am - 7:00 pm CT
  - E-mail: [qnetsupport@sdps.org](mailto:qnetsupport@sdps.org)
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