



**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 3**

***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 Preventive Care Measures

- There are eight preventive care measures:
  - PREV-5: Preventive Care and Screening: Breast Cancer Screening
  - PREV-6: Preventive Care and Screening: Colorectal Cancer Screening
  - PREV-7: Preventive Care and Screening: Influenza Immunization
  - PREV-8: Preventive Care and Screening: Pneumococcal Vaccination for Patients 65 Years and Older
  - PREV-9: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up
  - PREV-10: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
  - PREV-11: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
  - PREV-12: Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan
- Each preventive care measure is sampled separately

# The Preventive Care Measures

## PREV-5: Preventive Care and Screening: Breast Cancer Screening

### Measure Description

Percentage of women aged 40 through 69 years who had a mammogram to screen for breast cancer within 24 months

- Patients are eligible for random sampling into the PREV-5 measure if
  - They have been assigned to the GPRO
  - They are female and age 40 through 69 at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-5: Preventive Care and Screening: Breast Cancer Screening (cont.)

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

*Breast cancer screening performed during the measurement period or year prior to the measurement period?*

- **No** – Select if the patient was not screened for breast cancer
- **Yes** – Select if the patient was screened for breast cancer
- **No-medical reasons** – Select this option if there was any documentation the patient had a bilateral mastectomy or two unilateral mastectomies

### Guidance

- If there is evidence of two separate mastectomies, this patient may be excluded from the measure. The bilateral mastectomy must have occurred by the end of the measurement period
- Screening includes breast imaging, breast x-ray, breast cancer screening, diagnostic mammography, digital mammography, mammogram, screening mammography
- Use the Evaluation and Exclusions tabs in the Supporting Document to find codes specific to this measure

# The Preventive Care Measures

## PREV-6: Preventive Care and Screening: Colorectal Cancer Screening

### Measure Description

Percentage of patients aged 50 through 75 years who received the appropriate colorectal cancer screening

- Patients are eligible for random sampling into the PREV-6 measure if
  - They have been assigned to the GPRO
  - They are age 50 through 75 years at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-6: Preventive Care and Screening: Colorectal Cancer

### Screening (cont.)

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

*Colorectal cancer screening is current during the measurement period?*

- **No** – Select this option if colorectal cancer screening is not current
- **Yes** – Select this option if colorectal cancer screening is current
- **No-medical reasons** – Select this option if colorectal cancer screening is not current due to medical reasons

#### Guidance

- Note: Current colorectal cancer screening is defined as performing fecal occult blood test (FOBT) within 12 months, flexible sigmoidoscopy during the reporting period or the four years prior to the reporting period, or colonoscopy during the reporting period or the nine years prior to the reporting period
- FOBT includes ColoCARE, Coloscreen, EZ Detect, Fecal occult blood test, flushable reagent pads, flushable reagent stool blood test, guaiac smear test, Hemoccult, Seracult, stool occult blood test
- Medical Reasons may include: Diagnosis of colorectal cancer, total colectomy, terminal illness, other reason documented by practitioner for not performing colorectal cancer screening – refer to Supporting Document tabs

# The Preventive Care Measures

## PREV-7: Preventive Care and Screening: Influenza Immunization

### Measure Description

Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization

- Patients are eligible for random sampling into the PREV-7 measure if
  - They have been assigned to the GPRO
  - They are age 6 months or older at the beginning of the measurement period
  - They were seen for a visit between October 1, 2012 and March 31, 2013
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-7: Preventive Care and Screening: Influenza Immunization

(cont.)

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

*Was the patient seen for an office visit between October 1, 2012 and March 31, 2013 and received an influenza immunization OR reported receipt of an influenza immunization?*

- **No** – Select this option if the patient did not receive an influenza immunization
- **Yes** – Select this option if the patient received an influenza immunization or reported previous receipt
- **No – Medical Reasons:** Select this option if the patient did not receive an influenza immunization for medical reasons
- **No – Patient Reasons:** Select this option if the patient did not receive an influenza immunization for patient reasons
- **No – System Reasons:** Select this option if the patient did not receive an influenza immunization for system reasons

# The Preventive Care Measures

## PREV-7: Preventive Care and Screening: Influenza Immunization

(cont.)

### Guidance

- Previous receipt is defined as receipt of the current season's influenza immunization from another provider OR from same provider prior to the visit to which the measure is applied (typically, prior vaccination would include influenza vaccine given since August 1, 2012)
- Patients are not sampled in to the measure unless a primary care office visit was found attributed to the ACO or PQRS GPRO between October 1, 2012 and March 31, 2013

# The Preventive Care Measures

## PREV-8: Preventive Care and Screening: Pneumococcal Vaccination for Patients 65 Years and Older

### Measure Description

Percentage of patients aged 65 years and older who have ever received a pneumococcal vaccine

- Patients are eligible for random sampling into the PREV-8 measure if
  - They have been assigned to the GPRO
  - They are age 65 years or older at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-8: Preventive Care and Screening: Pneumococcal Vaccination for Patients 65 Years and Older (cont.)

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

*Has patient ever received a pneumococcal vaccination?*

- **No** – Select this option if the patient has never received a pneumococcal vaccination
- **Yes** – Select this option if the patient has ever received a pneumococcal vaccination
- **No-medical reasons** – Select this option if the patient has never received a pneumococcal vaccination for medical reasons

### Guidance

- Refer to the Supporting Document Evaluation, Exclusions and Drug tabs for coding for this measure

# The Preventive Care Measures

## PREV-9: Preventive Care and Screening: Body Mass Index (BMI)

### Screening and Follow-Up (cont.)

#### Measure Description

- Percentage of patients aged 18 years and older with a calculated BMI in the past six months or during the current visit documented in the medical record AND if the most recent BMI is **outside of normal parameters**, a follow-up plan is documented within the past six months or during the current visit

**Normal Parameters:** Age 65 years and older BMI  $\geq 23$  and  $< 30$

Age 18 – 64 years BMI  $\geq 18.5$  and  $< 25$

- Patients are eligible for random sampling into the PREV-9 measure if
  - They have been assigned to the GPRO
  - They are age 18 years or older at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-9: Preventive Care and Screening: Body Mass Index (BMI)

### Screening and Follow-Up (cont.)

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

*BMI calculated within the past six months or during the current visit?*

- **No** – Select this option if the patient has not had a BMI calculated
- **Yes** – Select this option if the patient has had a BMI calculated
- **No-medical reasons** – Select this option if the BMI measurement was not performed for medical reasons
- **No-patient reasons** – Select this option if the BMI measurement was not performed for patient reasons

*Most recent BMI is within normal parameters?*

- **No** – Select this option if the most recent BMI is outside of normal parameters
- **Yes** – Select this option if the most recent BMI is within normal parameters

*Was a follow-up plan documented if the BMI is outside of normal parameters?*

- **No** – Select this option if there was no follow-up plan documented
- **Yes** – Select this option if there was a follow-up plan documented

# The Preventive Care Measures

## PREV-9: Preventive Care and Screening: Body Mass Index (BMI)

### Screening and Follow-Up (cont.)

#### Guidance

- Body mass index (BMI) expressed as weight/height (BMI; kg/m<sup>2</sup>), is commonly used to classify weight categories
- Calculated BMI requires an eligible professional or their staff to measure both the height and weight. Self-reported values cannot be used. BMI is calculated either as weight in pounds divided by height in inches squared multiplied by 703, or as weight in kilograms divided by height in meters squared
- Medical Reasons may include patient is pregnant, patient is receiving palliative care, or patient is in an urgent or emergent medical situation where time is of the essence and to delay treatment would jeopardize the patient's health status
- Patient Reasons may include patient refuses BMI measurement or if there is any other reason documented in the medical record by the provider explaining why BMI measurement was not appropriate

# The Preventive Care Measures

## PREV-9: Preventive Care and Screening: Body Mass Index (BMI)

### Screening and Follow-Up (cont.)

#### Guidance

- Follow-up may include, but is not limited to: documentation of a future appointment, education, referral (such as, a registered dietician, nutritionist, occupational therapist, physical therapist, primary care provider, exercise physiologist, mental health professional, or surgeon), pharmacological interventions or dietary supplements, exercise counseling or nutrition counseling
- Refer to the Supporting Document Evaluation, Exclusions and Drug tabs for coding for this measure

# The Preventive Care Measures

## PREV-10: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

### Measure Description

Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months **AND** who received cessation counseling intervention if identified as a tobacco user

- Patients are eligible for random sampling into the PREV-10 measure if
  - They have been assigned to the GPRO
  - They are age 18 years or older at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

## The Preventive Care Measures

### PREV-10: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (cont.)

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

*Was the patient screened for tobacco use at least once within 24 months and identified as a tobacco user?*

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

*If “Yes”, did the patient receive tobacco cessation intervention?*

- **No** – Select if the patient did not receive tobacco cessation intervention
- **Yes** – Select if the patient did receive tobacco cessation intervention

# The Preventive Care Measures

## PREV-10: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

### Guidance

- Tobacco use may include any type of tobacco: tobacco smoking, cigarette/tobacco/pipe smoking/smoker, cigarette dependence, tobacco use disorder, chew tobacco, smokeless tobacco, snuff
- *Within 24 months* is defined as the 24-month look-back period of time from the measurement period end date
- If there is more than 1 patient query regarding tobacco use, use the most recent
- Cessation counseling includes brief counseling (3 minutes or less), and/or pharmacotherapy
- Refer to the Drug Code tab in the PREV Supporting Document for list of tobacco cessation agents

# The Preventive Care Measures

## PREV-11: Screening for High Blood Pressure and Follow-Up Documented

### Measure Description

Percentage of patients aged 18 years and older seen during the measurement period who were screened for high blood pressure AND a recommended follow-up plan is documented based on the current blood pressure reading as indicated

- Patients are eligible for random sampling into the PREV-11 measure if
  - They have been assigned to the GPRO
  - They are age 18 years or older at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-11: Screening for High Blood Pressure and Follow-Up

### Documented (cont.)

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

##### *Screened for high blood pressure (BP) and follow-up recommended?*

- **No** – Select if the patient was not screened for high blood pressure
- **Yes** – Select if the patient was screened for high blood pressure
- **No-medical reasons** – Select if the patient was not screened for high blood pressure for medical reasons
- **No-patient reasons** - Select if the patient was not screened for high blood pressure for patient reasons

# The Preventive Care Measures

## PREV-11: Screening for High Blood Pressure and Follow-Up

### Documented (cont.)

#### Guidance

- Patients with a Medicare claim indicating a history of hypertension prior to the first day of the measurement period (1/1/2013) will not be included in your sample for this measure
- A normal blood pressure reading (<120 systolic and < 80 diastolic) requires no documentation of follow-up
- Recommended follow-up based on BP classification includes: recommending screening interval follow-up, lifestyle modifications, referrals to alternative/primary care provider, anti-hypertensive pharmacological therapy, laboratory tests, or an electrocardiogram
- Need to link the recommended follow-up to the elevated blood pressure using guidance provided
- Pre-hypertensive BP reading, First hypertensive BP reading and Second hypertensive BP reading are defined and appropriate follow-up noted for each in the Narrative Specifications and Data Guidance provided
- Recommended follow-up has been explained in much more detail. This information is in both the Narrative Specifications and Data Guidance

# The Preventive Care Measures

## PREV-12: Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan

### Measure Description

Percentage of patients aged 12 years and older screened for clinical depression during the measurement period using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen

- Patients are eligible for random sampling into the PREV-12 measure if
  - They have been assigned to the GPRO
  - They are age 12 years or older at the beginning of the measurement period
- Patients may be removed from the measure if a “CMS Approved Reason” has been granted

# The Preventive Care Measures

## PREV-12: Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan (cont.)

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

*Was patient screened for clinical depression using an age appropriate standardized tool during the measurement period?*

- **No** – Select this option if the patient was not screened for clinical depression using a standardized tool
- **Yes** – Select this option if the patient was documented as having been screened for clinical depression using one of the standardized tools
- **No-medical reasons** – Select this option if the patient was not screened for clinical depression using a standardized tool due to a medical reason
- **No-patient reasons** - Select this option if the patient was not screened for clinical depression using a standardized tool due to a patient reason

*If the patient was screened, was the screen positive?*

- **No** – Select this option if the patient's screen was not positive for clinical depression
- **Yes** – Select this option if the patient's screen was positive for clinical depression

# The Preventive Care Measures

## PREV-12: Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan (cont.)

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

*If the screen was positive for clinical depression, was a follow-up plan for depression documented during the measurement period?*

- **No** – Select this option if a follow-up plan for depression is not documented
- **Yes** – Select this option if a follow-up plan for depression is documented

### Guidance

- Screening includes completion of a clinical or diagnostic tool used to identify people at risk of developing or having a certain disease or condition even in the absence of symptoms
- This measure requires the screening to be completed in the office of the provider filing the code
- Follow-up plan may include a proposed outline of treatment to be conducted as a result of positive clinical depression screening

# The Preventive Care Measures

## PREV-12: Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan (cont.)

### Guidance

- Follow-up for a positive depression screening must include one (1) or more of the following: Additional evaluation, Suicide Risk Assessment, Referral to a practitioner who is qualified to diagnose and treat depression, Pharmacological interventions, or other interventions or follow-up for the diagnosis or treatment of depression
- Use a normalized and validated depression screening tool developed for the patient population where it is being utilized. Examples of depression screening tools include but are not limited to:
  - Adolescent Screening Tools (12-17 years)
  - Patient Health Questionnaire for Adolescents (PHQ-A), Beck Depression Inventory-Primary Care Version (BDI-PC), Mood Feeling Questionnaire, Center for Epidemiologic Studies Depression Scale (CES-D) and PRIME MD-PHQ-2
- Refer to the Supporting Document Evaluation, Exclusions and Drug tabs for coding 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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