

2014 Qualified Clinical Data Registry (QCDR)

April 25, 2014 Kick-Off

Questions and Answers

| Benchmarking | |
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| Question | Answer |
| 1. When a measure is new to PQRS how is benchmarking done the first year it is released? | <p>CMS is working on a proposal for benchmarking of new PQRS measures. If a measure is new, we will be unable to calculate a benchmark, and hence, performance on that measure will not be included in the quality composite.</p> <p>If the measure is a non-PQRS measure, the QCDR will be responsible for providing the benchmarking data to CMS.</p> |
| 2. What is the process for QCDRs for sending benchmarking data to CMS? | QCDRs will need to provide benchmarking data for the non-PQRS measures they are reporting. This will be accomplished by providing the data in the QCDR XML format. |

| CMS Audit of QCDR Data | |
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| Question | Answer |
| 1. QCDRs must report all payer data, not just Medicare data. If CMS requests an audit of the QCDRs data, how will QCDRs be able to provide CMS the non Medicare data without violating HIPAA patient privacy laws? | CMS has the ability to access Medicare patient data through CMS oversight authority. For non Medicare data, CMS may request the QCDR to mask the personal health information (PHI) should an audit be requested. |

| Feedback Reports | |
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| Question | Answer |
| 1. We would like to be compliant in sending out our quarterly feedback reports to our EPs; however, we are still waiting to hear whether or not we qualify as 2014 QCDR. Can we combine our first and second quarter feedback into one report? | CMS requires QCDRs to provide the required four feedback reports throughout the reporting and submission period to make the reporting meaningful to your EPs. Reports are not required to be sent quarterly. If you are combining data for the first and second quarter, this will count as only one of the four required feedback reports. CMS would expect 4 reports to be issued between the time of QCDR acceptance notification and one year from that date. |
| 2. If we have online systems that our EPs can use to request their own feedback reports as needed, do we still need to send our four feedback reports? | QCDRs may have feedback reports that are readily available via the web or other communication mechanism that allows EPs to generate reports on demand in order to fulfill this requirement. |

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| Measures Specifications | |
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| Question | Answer |
| 1. When will a communication be sent to the QCDRs to notify us whether our non-PQRS measures have been accepted by CMS? | The measure contractor has completed their review of the non-PQRS measures. Communications should be sent shortly. |
| 2. Does the 0% performance rate requirement still apply to data reported by 2014 QCDRs? | Yes, if there are no quality actions performed for any denominator eligible patients of an EP for a single measure, that measure will not qualify for incentive eligibility nor will it be counted toward avoiding the payment adjustment for that EP. Please note this requirement does not apply to inverse measures, where a lower performance rate in a measure means better performance. |
| 3. When an EP wants to avoid the payment adjustment, does the 0% performance rate requirement also apply when there are less than 9 measures that can be reported by an EP? | Yes, the 0% performance rate applies to EPs who report less than 9 measures and/or less than 3 domains as well. |
| 4. Can we still use the ICD-10 codes, even though ICD-10s are not required for PY 2014 submission? | ICD-10 diagnosis codes are not required in PY 2014. This level of data is not collected in the QRDA Category III or QCDR XML file formats. |
| 5. What can we communicate to our clients at this point related to the non-PQRS measures pending review and acceptance? | The measure contractor has completed their review of the non-PQRS measures. Notification of the accepted measures should be sent shortly. |

| Program Requirements | |
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| Question | Answer |
| 1. If an EP fails to meet the Meaningful Use (MU) requirements, can they submit their eQMs for PQRS? | <p>Yes, eQMs will count for PQRS. Please note when files are submitted through the attestation system, they are not processed for PQRS. However, files submitted electronically through the PQRS portal with 12-months worth of data are automatically processed for both PQRS and the EHR Incentive Program.</p> <p>Note: To submit eQMs for MU, the EP must be using an ONC certified system and the QCDR must also be ONC certified to submit QRDA files to CMS.</p> |

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| QCDR Qualified Posting Document | |
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| Question | Answer |
| 1. If a QCDR is listed on the qualified posting document, will we have the ability to take on new clients? | <p>QCDRs that are in a partnership with a specialty board, foundation or collaborative (e.g., XYZ Collaborative <u>in partnership with ABC QCDR</u>) will not be able to add additional clients. These QCDRs would be able to add new eligible professionals for the partnerships already approved. That is, more members of the partnered collaborative or specialty board, for example.</p> <p>QCDRs (not in partnership) can add more eligible professionals as clients for the purpose of QCDR participation including submitting for PQRS or the EHR Incentive Program.</p> |

| QCDR XML Format | |
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| Question | Answer |
| 1. Will there be separate data elements for measure exceptions and exclusions? | The QCDR XML will have separate data elements for your measure exceptions and exclusions totals. However, not all measures have exceptions and exclusions, so this will be dependent on the measure requirements. |
| 2. What is the process for QCDRs to send benchmarking data to CMS? | QCDRs will need to provide benchmarking data only for the non-PQRS measures they are reporting. This will be accomplished by providing the data in the QCDR XML format. |
| 3. Can we still use the ICD-10 codes, even though ICD-10s are not required for PY 2014 submission? | ICD-10 diagnosis codes are not required in PY 2014. This level of data is not collected in the QRDA Category III or QCDR XML file formats. |

| Submission | |
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| Question | Answer |
| 6. The QCDR timeline shows two submission deadlines. What is the correct submission deadline? | There are two separate submission deadlines. One is for PQRS and the other is for the EHR Incentive Program. If data is submitted for PQRS and the EHR Incentive Program, the submission deadline is 2/28/2015 due to the EHR Incentive Program requirements. The PQRS only submission deadline is 3/15/2015. |

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| Value-based Payment Modifier (VM) | |
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| Question | Answer |
| <p>1. When reporting 9 measures across 3 domains, if one of the three domains has only one measure in it, will that one domain be weighted equally for the quality composite score?</p> | <p>Each domain is weighted equally for the three or more domains being reported. Within each domain, the score would be calculated as an equally weighted average of all measures reported for each domain.</p> <p>If an EP reports 9 measures across 3 domains split as follows:</p> <p>Domain 1: 3 measures Domain 2, 5 measures Domain 3, 1 measure</p> <p>In the above example, the measures in Domain 1 would each count as one-third (for 3 measures) of that domain's score, the measures in Domain 2 will count as one-fifth (for 5 measures) of that domain's score, and the measures in Domain 3 will count as 100 percent (for 1 measure) of that measure's domain.</p> <p>Then the score for all domains reported are calculated to come up with the quality composite score. The overall score for each domain would be used to calculate the complete score with each domain counting as 1/3 of the composite.</p> |