

Quality Payment PROGRAM

**2017 CMS Web Interface Quality Reporting
for MIPS Groups and ACOs**

**CMS Web Interface
Q&A Session**

March 14, 2018



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.

Reminders



- **January 22 – March 16, 2018 - Submission Period**
 - The CMS Web Interface will close promptly at 8:00 p.m. Eastern Daylight Time (EDT) this Friday, March 16, 2018.
 - Accessible via the “Sign In” link on the QPP web site at <https://qpp.cms.gov>
- **CMS Approved Reasons**
 - To request a CMS Approved Reason, submit an email to the QPP Service Center at QPP@cms.hhs.gov and include patient rank, measure, and a detailed reason for the request.
 - 2017 CMS Approved Reason Requests should be submitted as soon as possible.
 - When submitting a request, never include PII (Personally identifiable information) or PHI (Protected Health information).

Presenter: Jessica Schumacher, CMS Contractor

FREQUENT MEASURES QUESTIONS

Frequent Measure Questions



No.	Measure	Question	Answer
1	IVD-2	If we find an anti-coagulant for IVD-2, are we supposed to still look for an active diagnosis of IVD or can we stop since the patient will be excluded at this point anyways?	<p>*Clarification from 3/7/18 Webinar*</p> <p>You would confirm the diagnosis first as the patient must have had an AMI, CABG, or PCI during the 12 months prior to the measurement year or had a diagnosis of IVD during the measurement year to be included in the Initial Population. If you are unable to confirm this, select “Not Confirmed - Diagnosis”.</p> <p>If you confirmed the diagnosis but the patient had documentation of use of anticoagulant medication during the measurement year, select “Denominator Exclusion”. Either way the patient will be “skipped” and another patient must be reported in their place, if available.</p>
2	IVD-2	For the IVD measure, if you have a patient that was on aspirin at the beginning of the measurement period, but was on an excluded medication later in the year, do I submit “Yes” for the Numerator? Or do I submit as a Denominator Exclusion?	<p>You would submit “Denominator Exclusion”.</p> <p>Patients who have documented use of anticoagulant medications during the measurement year are excluded from the measure whether they had been on aspirin or antiplatelet during the year or not.</p>

Frequent Measure Questions



No.	Measure	Question	Answer
3	PREV-7	For PREV-7, what dates are included when looking at visits?	<p>For 2017 reporting, the Denominator includes patients seen for a visit within the ACO or group between October 1, 2016 and March 31, 2017.</p> <p>You would answer “Yes” for the Numerator when the patient received an influenza immunization OR reported previous receipt of an influenza immunization between August 1, 2016 through March 31, 2017.</p>
4	PREV-12	Would documentation of the PHQ 9 score in a progress note be enough to pass the measure and an audit?	<p>*Clarification from 3/7/2018 Webinar*</p> <p>If the medical record documentation does not include the provider’s assessment of whether the patient is positive or negative for depression based on the screening, then you would select “NO” to question “Was the patient screened for depression using an age appropriate standardized tool during the measurement period”.</p>

Presenter: Ralph Trautwein, CMS Contractor

CMS WEB INTERFACE HELPFUL GUIDANCE

PII and PHI



- In the screens displayed in the following slides, no Protected Health Information (PHI) or Personally Identifiable Information (PII) is present.
- All the data shown is fake data created for testing purposes.
- There are no real beneficiaries or Medicare IDs shown in any of the slides.
- Organizations shown in any slides are fake, test organizations created for testing purposes.

Excel File Guidance



- Please do not include blank rows between the headers and the first rows of data in the spreadsheet.

	A	B	C	D	E	F	G	H	I
1	Beneficiary Demographics								
2	Medicare ID	First Name	Last Name	Gender	Date of Birth (MM/DD/YYYY)	Medical Record Number	Clinic ID	Provider Name 1 (First Name Last Name)	Provider Name 2 (First Name Last Name)
3									
4									
5									
6									
7	637220926956126	Santos	Huels	FEMALE	01/01/1948		000009047	Ada Strosin	Orlo Adams
8	381821075242448	Branson	Schaefer	FEMALE	01/01/1935		000667480	Prince Rempel	
9	491322455143969	Elody	Connelly	FEMALE	01/01/1949		000347059	Rocio Lynch	Jarvis Bergnaum
10	803732033104658	Trinity	Strosin	FEMALE	01/01/1939		000667480	Prince Rempel	Marcelina Wyman
11	205258957359214	Vilma	Koch	MALE	01/01/1943		000347059	Laury Sanford	Dudley Grimes

Excel File Guidance



- Submitting the spreadsheet with 4 blank rows before the data starts results in these errors:

ERRORS 4 errors		TOTAL 3434 beneficiaries	COMPLETE 0 beneficiaries	INCOMPLETE 3434 beneficiaries	SKIPPED 0 beneficiaries
MEDICARE ID	MEASURE FAILED TO UPLOAD		COLUMN (EXCEL)	ROW (EXCEL)	ERROR DESCRIPTION
			A	3	The Medicare ID is missing for this beneficiary. We are not able to upload any of the data for this beneficiary.
			A	4	The Medicare ID is missing for this beneficiary. We are not able to upload any of the data for this beneficiary.
			A	5	The Medicare ID is missing for this beneficiary. We are not able to upload any of the data for this beneficiary.
			A	6	The Medicare ID is missing for this beneficiary. We are not able to upload any of the data for this beneficiary.

Excel File Guidance

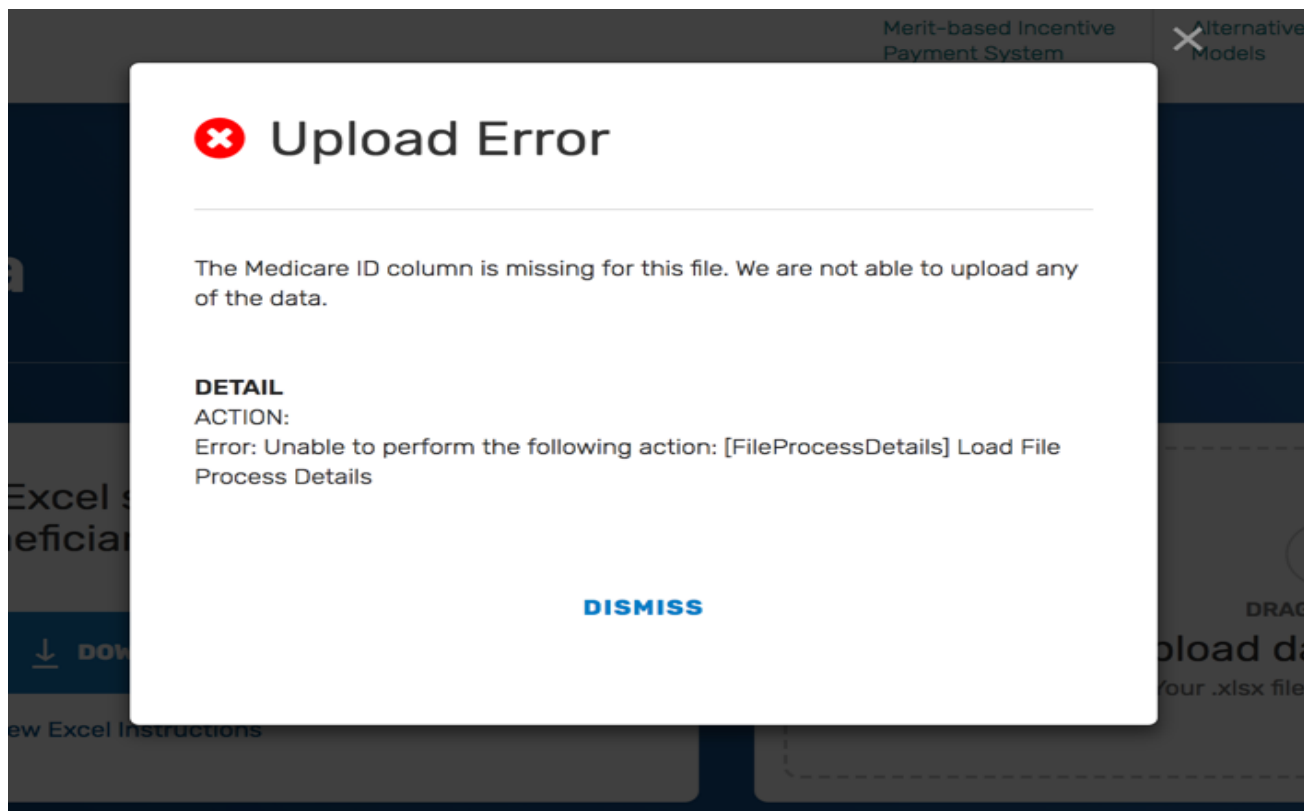


- Do not delete the top header of the excel template. The template requires two headers on row 1 and row 2. In this example, the top header has been deleted.

	A	B	C	D	E	F	G	H
1	Medicare ID	First Name	Last Name	Gender	Date of Birth (MM/DD/YYYY)	Medical Record Number	Clinic ID	Provider Name 1 (First Name Last Name)
2	128031189944931	Randall	Windler	FEMALE	01/01/1949		000522916	Celine Paucek
3	036331025657165	Darby	Purdy	MALE	01/01/1949		000401292	Brielle Mertz
4	429494286086671	Gail	Muller	FEMALE	01/01/1940		000667480	Shanel Runte
5	756335820022782	Isabell	McCullough	FEMALE	01/01/1951		000522916	Leonel Rodriguez
6	942306796765807	Cristopher	Hessel	MALE	01/01/1927		000347059	Jewell Rolfson
7	471417835226533	Ludie	Zemlak	MALE	01/01/1930		000347059	Edgar Connelly
8	159998418368915	Felipa	Schaefer	MALE	01/01/1941		000309940	Everette Howell
9	099226339179607	Elsie	Robel	MALE	01/01/1946		000667480	Domenica Ritchie
10	765091123835498	Deron	Parker	MALE	01/01/1945		000347059	Delphine Bartell

Excel File Guidance

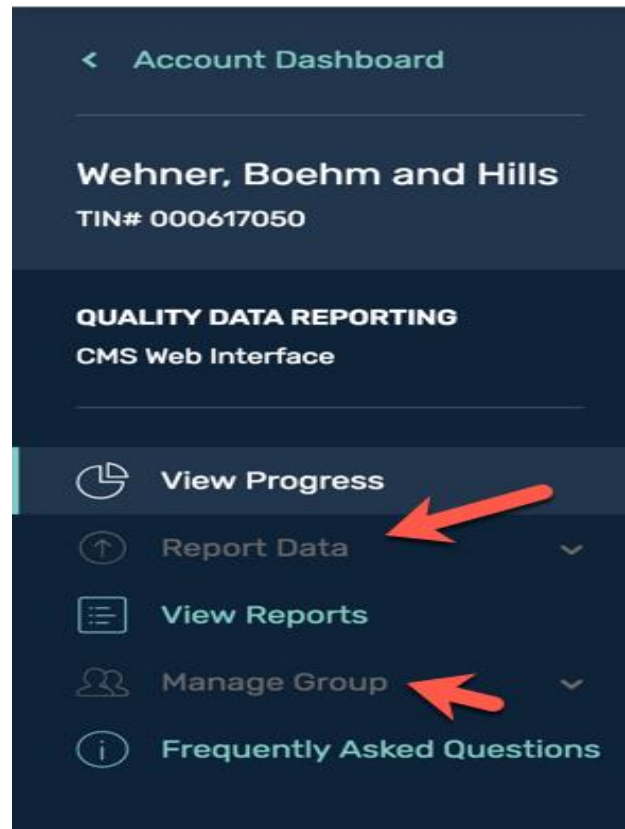
- Upon submission of the template missing the top header, we receive the following error message.



When the Submission Window Closes



- When the submission window closes, the application will automatically disable the features that allow data to be submitted. Notice the change in the left hand navigation.



When the Submission Window Closes





- View Progress will change to show your submission status.


Note that the dates were altered in our test system to close early and so are blacked out here to avoid confusion.


You're done!

Last account activity: a few seconds ago | [View Details](#)


Measures available
Nov 14


Sample ready
Jan 8
















Start reporting
Jan 22


Submission due
[REDACTED]

Page visited: 03/13/2018 11:14 AM EDT

CMS received your quality reporting data on [REDACTED] PM Eastern Time. [VIEW CONFIRMATION](#)


Here is a summary of your submission for this measurement period:

 HTN-2	 CARE-2	 IVD-2	 PREV-5	 DM	 MH-1
 CARE-1	 PREV-6	 PREV-7	 PREV-8	 PREV-9	 PREV-10
 PREV-12	 PREV-13				

When the Submission Window Closes

- Although report data is disabled a link has been provided to download the data you reported from the view progress screen in the excel template:

Here is a summary of your submission for this measurement period:

✓ HTN-2	✓ CARE-2	✓ IVD-2	✓ PREV-5	✓ DM	✓ MH-1
ⓘ CARE-1	ⓘ PREV-6	ⓘ PREV-7	ⓘ PREV-8	ⓘ PREV-9	ⓘ PREV-10
ⓘ PREV-12	ⓘ PREV-13				
			VIEW MEASURE RATES REPORT	 DOWNLOAD YOUR 2017 REPORTING DATA	

When the Submission Window Closes



- The Data Confirmation Report becomes available.

View Reports

Reports provide detailed information about your reporting data.
You can download or print reports for your records.

Measure Rates

View in-depth statistics per measure for the data you reported.

[DOWNLOAD](#)

[VIEW REPORT](#)

CARE-2
Screening for Future Fall Risk

Activity Log

Track your team's activities in the CMS Web Interface over time.

[VIEW REPORT](#)

DATE

2017 Data Confirmation

Review the CMS receipt of your data for this reporting year.

[DOWNLOAD](#)

[VIEW REPORT](#)

MEASURE

When the Submission Window Closes




- The Data Confirmation Report



2018 Data Confirmation

↓ DOWNLOAD REPORT

Review the CMS receipt of your data for this reporting year. Page visited: 03/13/2018 11:31 AM EDT

ORGANIZATION NAME Wehner, Boehm and Hills	ORGANIZATION ID 000617050	ORGANIZATION TYPE ACO
---	-------------------------------------	---------------------------------

 CMS successfully collected your reporting data on [REDACTED]
Time. You have not met the minimum reporting requirement for all measures.

MEASURE	STATUS
CARE-1 Medication Reconciliation Post-Discharge	 Minimum not met
CARE-2 Screening for Future Fall Risk	 Minimum requirement met

When the Submission Window Closes



- There is no submit button to worry about pressing.
- Everything regarding the submission of your data happens automatically at the close of the submission window.
- If a file is being processed at the moment the submission window closes it will complete processing. However, do not wait until the last minute as you will not be able to see errors or make adjustments past the close of the submission window.

Presenter: Jessica Schumacher, CMS Contractor

RESOURCES & WHERE TO GO FOR HELP

Resources



- [QPP Help and Support](#) website:
 - Provides support videos, webinars, online courses, learning network, in-person assistance, APM learning systems, and developer tools
- QPP Resource Library contains the following CMS Web Interface materials:
 - [2017 Web Interface Measures & supporting documents](#)
 - [CMS Web Interface Support Webinars flyer](#)
 - [CMS Web Interface Excel template user guide](#)
 - [CMS Web Interface Excel template](#)
 - [CMS Web Interface & CAHPS for MIPS survey assignment methodology](#)
 - [CMS Web Interface sampling methodology](#)
 - [CMS Web Interface fact sheet](#)
 - [MIPS Scoring fact sheet](#)
 - [Medicare Shared Savings Program & MIPS Interactions](#)
 - [Scoring Guide for Medicare Shared Savings Program and Next Generation ACOs](#)
- [QPP Webinar & Events](#) web site contains 2017 CMS Web Interface webinar materials
 - [Questions & Answers document](#) (posted with 1/24/2018 webinar materials)

Resource Continued

Videos



CMS Web Interface instructional videos

- [CMS Web Interface: Manually Entering Data by Measure](#)
- [CMS Web Interface: Resolving Excel Errors](#)
- [CMS Web Interface: Testing Your Data](#)
- [CMS Web Interface: Submitting Without a Submit Button](#)
- [CMS Web Interface: An Introduction to the CMS Web Interface](#)
- [CMS Web Interface: Manually Entering Data by Beneficiary](#)
- [CMS Web Interface: Viewing Your Reporting Progress](#)
- [CMS Web Interface: Planning Your Work](#)

Resources for ACOs



- Medicare Shared Savings Program ACO:
 - Website: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/index.html>
 - Program Guidance & Specifications: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/program-guidance-and-specifications.html>.
 - ACO Portal: <https://portal.cms.gov/>
 - Resource: 2017 Quality Measurement and Reporting Guides
 - Resource: 2017 Quality Reporting Resource Map
 - Resource: 2017 Quality Reporting Checklist
 - Weekly ACO Spotlight Newsletter
- Next Generation ACO Model:
 - Website: <https://innovation.cms.gov/initiatives/Next-Generation-ACO-Model/>
 - Connect Site: <https://app.innovation.cms.gov/NGACOConnect/>
 - Weekly Newsletter

Get Help from CMS



- QPP Service Center
 - E-mail: QPP@cms.hhs.gov
 - Phone: (866) 288-8292 (TTY 1-877-715-6222)
- Medicare Shared Savings Program ACO
 - E-mail: sharedsavingsprogram@cms.hhs.gov
- Next Generation ACO Model
 - E-mail: NextGenerationACOModel@cms.hhs.gov
- Physician Compare
 - E-mail: PhysicianCompare@westat.com

- To ask a question, please dial:
1-866-452-7887
- Press *1 to be added to the question queue.
- You may also submit questions via the chat box.
- Speakers will answer as many questions as time allows.
- Ask most important questions first.