

2012 Physician Quality Reporting System (Physician Quality Reporting)

for the

Group Practice Reporting Option (GPRO)

Kickoff Meeting March 28, 2012

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Agenda



- ❖ Welcome
- ❖ Program Overview
- ❖ Modules and Measures
- ❖ Assignment and Sampling
- ❖ Mechanism and Reporting Period
- ❖ Criteria for Satisfactory Reporting
- ❖ Resources

Legislative History



❖ Physician Quality Reporting System

- Originally created under the Tax Relief and Health Care Act of 2006 as a voluntary program

❖ The Medicare Improvements for Patients and Providers Act (MIPPA) of 2008

- Made the program permanent
- Authorized incentive payments through 2010

❖ Patient Protection and Affordable Care Act

- Extended incentive payments through 2014
- Established mandatory reporting beginning in 2015

Physician Quality Reporting



- ❖ Purpose of the program
 - Promote physician quality practices consistent with mandates on the adoption of Health Information Technology (HIT)
- ❖ Provides an incentive payment to eligible professionals who satisfactorily report data on quality measures for covered professional services provided to Medicare Part B fee-for-service beneficiaries
- ❖ Eligible professionals can participate
 - As individuals, if not participating as a group
 - As part of a group practice under the same tax identification number (TIN) under the Group Practice Reporting Option (GPRO) (as of 2010)

Selecting the Group Option



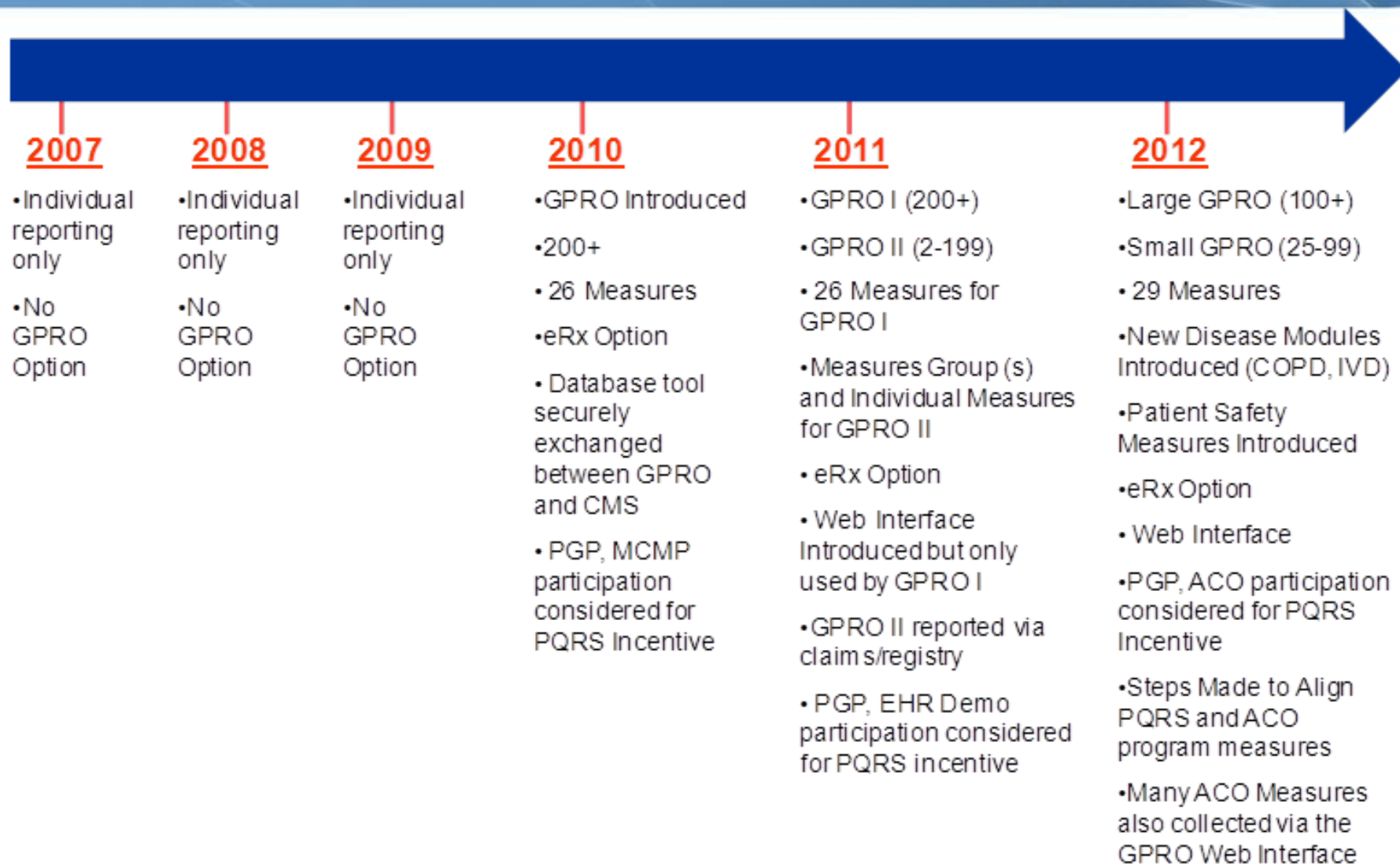
- ❖ If an individual eligible professional has assigned billing rights to a group TIN, then (s)he must report via GPRO and CANNOT participate as an individual using that TIN/NPI combination
- ❖ If the eligible professional also reports through a different TIN that is not participating as a GPRO, then (s)he may report measures individually through that alternate TIN

GPRO Background



- ❖ Modeled after CMS demonstration projects
 - Physician Group Practice (PGP)
 - Medicare Care Management Performance (MCMP)
- ❖ Group practices that satisfactorily report data on measures can earn an incentive payment
 - Incentive is 0.5% of the group practice's total estimated Medicare Part B Physician Fee Schedule allowed charges for covered professional services furnished during the reporting period

Evolution of PQRS GPRO



2012 GPRO Participation Options

- ❖ GPRO participation options
 - Physician Quality Reporting only
 - Physician Quality Reporting and Electronic Prescribing (eRx) Incentive Program
- ❖ GPRO categories
 - Large GPRO: 100+ providers
 - Small GPRO: 25-99 providers

Participation Requirements



- ❖ Self-nominated by January 31, 2012
- ❖ Met technical and other requirements, including:
 - Provided the group practice's tax identification number (TIN), name of group practice, and contact information
 - Agreed to participate in all mandatory training sessions/support calls
 - Have billed Medicare Part B on or after January 1, 2011 and prior to the last Friday in October 2011
- ❖ Selected by CMS to participate

Do Not Change the Group's TIN



- ❖ Once a group practice (TIN) is selected to participate in the GPRO, this is the only method of reporting available to the group and all eligible professionals who bill Medicare under the group's TIN for 2012
- ❖ Changing TINs after selection will have consequences for incentive payments
 - If the TIN changes mid-year, the sample will not be available for the new TIN
 - If the TIN changes and the group submits a self-nomination letter the following year, the group may not be eligible the second year

2012 GPRO Measures



❖ 29 measures

○ 6 disease modules

- Diabetes Mellitus (DM), 8 measures
- Heart Failure (HF), 5 measures
- Coronary Artery Disease (CAD), 3 measures
- Hypertension (HTN), 1 measure
- Chronic Obstructive Pulmonary Disease (COPD), 1 measure
- Ischemic Vascular Disease (IVD), 2 measures

○ 2 patient care modules (individually sampled measures)

- Care Coordination/Patient Safety (Care), 2 measures
- Preventive Care (Prev), 7 measures

❖ Complete list available at:

http://www.cms.gov/PQRS/22_Group_Practice_Reporting_Option.asp

Narrative Specifications



- ❖ Allow group practices an opportunity to review each of the 29 quality measures included in 2012 GPRO
- ❖ Specifications are posted on the GPRO section of the CMS Physician Quality Reporting website
 - Narrative Specifications/Measures List posted at:
https://www.cms.gov/PQRS/22_Group_Practice_Reporting_Option.asp#TopOfPage

Narrative Specifications, cont.



2012 Physician Quality Reporting Hypertension Disease Module Narrative Measure Specification for GPRO Use ONLY

➡ ♦ GPRO HTN-2 (NQF 0018): Hypertension (HTN): Controlling High Blood Pressure

➡ **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

➡ **DENOMINATOR:**

Patients aged 18 through 85 years with the diagnosis of hypertension

➡ **EXCLUDED FROM PERFORMANCE DENOMINATOR POPULATION:**

(Exclusions only applied if patient did not receive a blood pressure measurement)

- Documentation of medical reason(s) for not recording a blood pressure measurement (diagnosis for End-Stage Renal Disease [ESRD] and pregnancy are the only acceptable exclusions)

➡ **NUMERATOR:**

Patients whose most recent blood pressure $< 140/90$ mmHg

Narrative Specifications, cont.



RATIONALE:

This measure assesses the percentage of patients demonstrating adequate control of systolic and diastolic blood pressure levels. Over 50 million Americans warrant treatment for high blood pressure, according to the National Health and Nutrition Examination Survey (NHANES) survey Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (JNC-7 2003). Financially, hypertension and associated disorders and health complications, such as coronary heart disease and congestive heart failure, cost the U.S. economy more than \$100 billion each year. The United States Preventive Services Task Force (USPSTF) recommends that clinicians screen adults 18 and older for high blood pressure (2007). This guideline is further endorsed by research studies and clinical trials that have demonstrated decline in costly health outcomes as a direct result of improved blood pressure control. This measure is important in efforts to promote blood pressure control and improve quality of life.



CLINICAL RECOMMENDATION STATEMENTS:

The U.S. Preventive Services Task Force (USPSTF) recommends screening for high blood pressure in adults age 18 years and older. JNC-7: Treating systolic blood pressure (SBP) and diastolic blood pressure (DBP) to targets that are < 140/90 mmHg is associated with a decrease in cardiovascular disease (CVD) complications.

Assignment and Sampling



- ❖ GPROs will receive a sample of Medicare beneficiaries assigned to one or more disease modules or patient care measures
- ❖ The CMS Integrated Data Repository (IDR) is used to review all Part A and B claims for each of the assigned beneficiaries regardless of where the service was performed to determine if the beneficiary qualifies for any of the disease modules
- ❖ The IDR is also used to review Part A and B claims for extraction of any information that may be useful in completing measure information

Beneficiary Sampling



❖ Large GPROs

- 616 beneficiaries are sampled (the required 411 plus a 50% oversample) for each of the 6 disease modules and the 9 patient care measures (15 samples in all)
- If sampled beneficiaries do not overlap, the group may have to review a minimum of 6,165 patient records (15 x 411) over a 4 to 6 week period of data collection

❖ Small GPROs

- 327 beneficiaries are sampled for each of the 6 disease modules and the 9 patient care measures
- If sampled beneficiaries do not overlap, the group may have to review a minimum of 3,270 patient records (15 x 218) over a 4 to 6 week period of data collection

Reporting Burden



- ❖ Note that the reporting burden has nearly doubled from 2011 as a result of the additional modules and measures

Program Year	Group Size	Potential Beneficiary Samples
2011 (GPRO I)	199 + Eligible Professionals	(411 beneficiaries) x (4 modules + 4 Preventive Care Measures) = 3,288
2012 Small GPRO	25-99 Eligible Professionals	(218 beneficiaries) x (6 modules + 9 Patient Care Measures) = 3,270
2012 Large GPRO	100 + Eligible professionals	(411 beneficiaries) x (6 modules + 9 Patient Care Measures) = 6,165

Beneficiary Assignment



- ❖ Assignment of beneficiaries to a GPRO
 - Claims submitted by the GPRO from January through October of the measurement period are analyzed by CMS
 - CMS assigns Medicare beneficiary to group practice if practice provides the plurality of office/other outpatient services (minimum 2 visits)
 - Beneficiaries are excluded from the sample if they meet high level exclusion criteria such as the patient is in hospice care
- ❖ CMS randomly selects a sample from the GPRO TIN's qualified Medicare beneficiaries
 - Limited to beneficiaries with Medicare Parts A and B for whom Medicare is primary payer
 - Beneficiaries with more than 1 office visit
 - Excludes Medicare Advantage enrollees

Reporting Mechanism



- ❖ GPROs will have access to a partially pre-populated database early in 2013
 - Claims from Parts A and B used to pre-populate fields
 - Includes demographic and utilization data for assigned set of beneficiaries for services provided during the 2012 reporting period
- ❖ Group practice will populate the remaining data fields via the Web Interface

Satisfactorily Reporting

❖ Large GPROs

- Report all GPRO measures
- Group will receive a sample of 616 beneficiaries per module
 - Complete data for 411 beneficiaries per measure
 - Complete for 100% of beneficiaries if there are < 411 in the sample

❖ Small GPROs

- Report all GPRO measures
- Group will receive a sample of 327 beneficiaries per module
 - Complete data for 218 beneficiaries per measure
 - Complete for 100% of beneficiaries if there are < 218 in the sample

The Incentive



- ❖ 0.5% of a group practice's total estimated Medicare Part B Physician Fee Schedule allowed charges for covered professional services furnished during the reporting period
- ❖ An individual eligible professional who is a member of a group practice selected to participate in Physician Quality Reporting GPRO is not eligible to separately earn a Physician Quality Reporting incentive payment as an individual eligible professional under that same TIN (that is, for the same TIN/National Provider Identifier combination)

2012 Public Reporting



- ❖ Posted on the Physician Compare web site
<http://www.medicare.gov/find-a-doctor/provider-search.aspx>
- ❖ Names of PQRS GPROs who satisfactorily report Physician Quality Measures
- ❖ Performance rates for PQRS GPRO measures

Supporting Documentation



- ❖ Supporting documentation includes
 - Electronic Health Record (EHR) Specifications
 - Data Guidance
 - Topic Evaluation Codes
 - Topic Medical Exclusions
 - Topic Drug Codes
- ❖ XML format can be used to both export and upload data

GPRO Web Interface

Disclaimer: Some of the following slides use screen shots from the 2011 GPRO web interface and are based on a small sample of data. Data collection for 2012 will use the GPRO web interface that is currently under development.

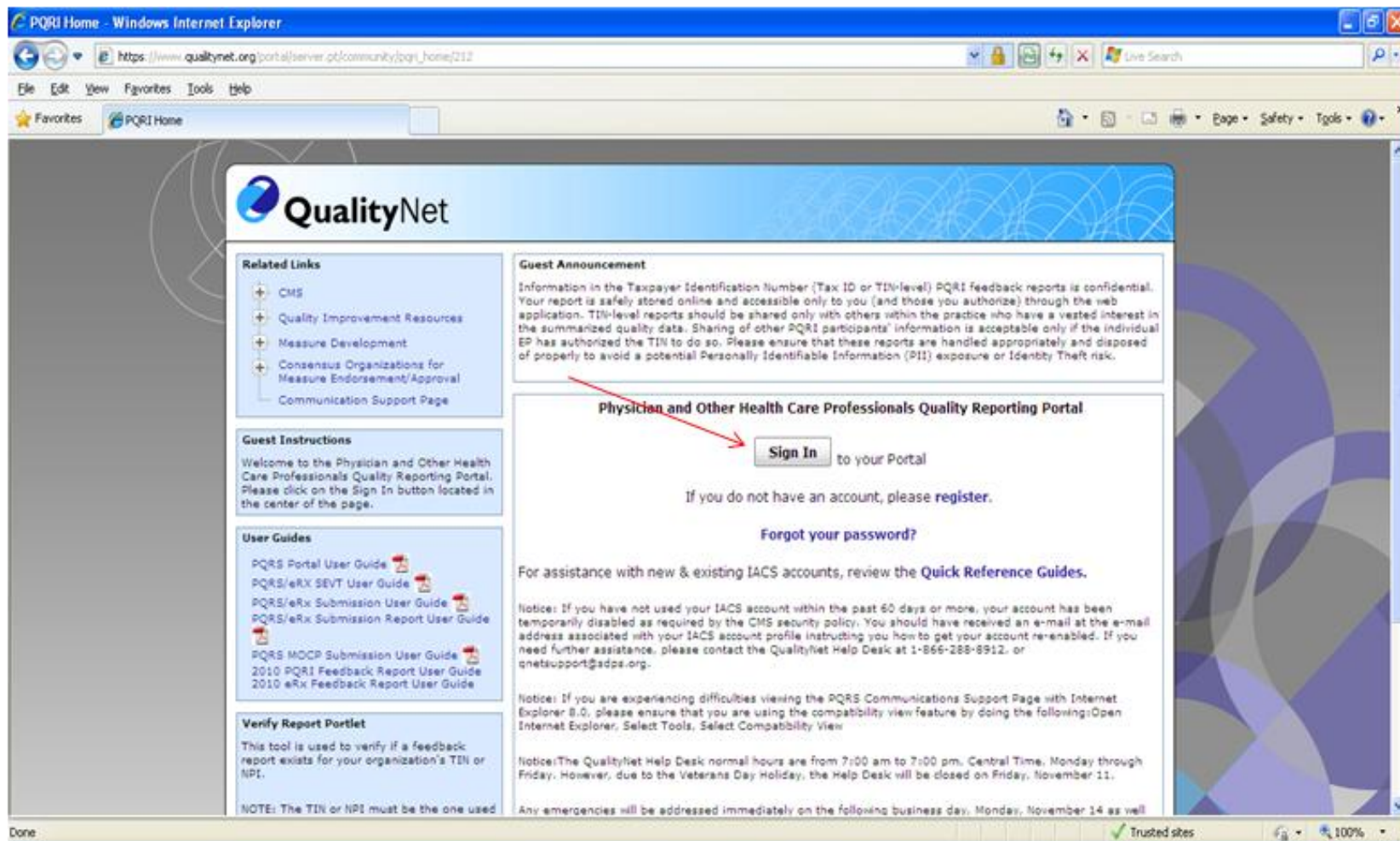
Web Interface



- ❖ The pre-populated sample is made available to the GPRO on the web interface after the close of the measurement year
- ❖ The GPRO will have approximately six weeks to complete the measure information for their sample
- ❖ The GPRO is expected to complete measure information for at least the first 218 (small GPRO) and 411 (large GPRO) consecutively ranked beneficiaries
 - GPROs do not have to enter the measure data in consecutively ranked order, but at least the required number of consecutively ranked beneficiaries must be completed for satisfactory reporting
- ❖ GPROs may export (via XML) their beneficiary list in order to assist with chart abstraction

Logging In

Navigate to <http://qualitynet.org/pqrs> click Sign In



The screenshot shows the QualityNet PQRS portal in a Windows Internet Explorer browser window. The address bar shows the URL https://www.qualitynet.org/portal/server.pt/community/pqrs_home/212. The page features a blue header with the QualityNet logo. On the left, there are several navigation sections: 'Related Links' with links to CMS, Quality Improvement Resources, Measure Development, Consensus Organizations for Measure Endorsement/Approval, and Communication Support Page; 'Guest Instructions' welcoming users to the Physician and Other Health Care Professionals Quality Reporting Portal; 'User Guides' listing various guides for PQRS Portal, eRx SEVT, eRx Submission, eRx Submission Report, MOCR Submission, and Feedback Reports; and a 'Verify Report Portlet' section. The main content area is titled 'Physician and Other Health Care Professionals Quality Reporting Portal' and contains a 'Sign In' button with a red arrow pointing to it, followed by a 'to your Portal' link. Below this, it says 'If you do not have an account, please register.' and 'Forgot your password?'. There are also links to 'Quick Reference Guides' and several notices regarding account security and help desk hours. The status bar at the bottom shows 'Done' and 'Trusted sites'.

QualityNet

Related Links

- + CMS
- + Quality Improvement Resources
- + Measure Development
- + Consensus Organizations for Measure Endorsement/Approval
- + Communication Support Page

Guest Instructions

Welcome to the Physician and Other Health Care Professionals Quality Reporting Portal. Please click on the Sign In button located in the center of the page.

User Guides

- PQRS Portal User Guide
- PQRS/eRx SEVT User Guide
- PQRS/eRx Submission User Guide
- PQRS/eRx Submission Report User Guide
- PQRS MOCR Submission User Guide
- 2010 PQRS Feedback Report User Guide
- 2010 eRx Feedback Report User Guide

Verify Report Portlet

This tool is used to verify if a feedback report exists for your organization's TIN or NPI.

NOTE: The TIN or NPI must be the one used

Guest Announcement

Information in the Taxpayer Identification Number (Tax ID or TIN-level) PQRS feedback reports is confidential. Your report is safely stored online and accessible only to you (and those you authorize) through the web application. TIN-level reports should be shared only with others within the practice who have a vested interest in the summarized quality data. Sharing of other PQRS participants' information is acceptable only if the individual EP has authorized the TIN to do so. Please ensure that these reports are handled appropriately and disposed of properly to avoid a potential Personally Identifiable Information (PII) exposure or Identity Theft risk.

Physician and Other Health Care Professionals Quality Reporting Portal

[Sign In](#) to your Portal

If you do not have an account, please [register](#).

[Forgot your password?](#)

For assistance with new & existing IACS accounts, review the [Quick Reference Guides](#).

Notice: If you have not used your IACS account within the past 60 days or more, your account has been temporarily disabled as required by the CMS security policy. You should have received an e-mail at the e-mail address associated with your IACS account profile instructing you how to get your account re-enabled. If you need further assistance, please contact the QualityNet Help Desk at 1-866-288-8912, or qnetisupport@adps.org.

Notice: If you are experiencing difficulties viewing the PQRS Communications Support Page with Internet Explorer 8.0, please ensure that you are using the compatibility view feature by doing the following: Open Internet Explorer, Select Tools, Select Compatibility View.

Notice: The QualityNet Help Desk normal hours are from 7:00 am to 7:00 pm, Central Time, Monday through Friday. However, due to the Veterans Day Holiday, the Help Desk will be closed on Friday, November 11.

Any emergencies will be addressed immediately on the following business day, Monday, November 14 as well.

Home Page

GPRO Web Interface

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences Help

Patients List

Medicare ID	First Name	Last Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank
001256891A	BEAR	VOSS	Male	08/08/1954	1	✓	0
001414800A	ARURU	KRUK	Female	01/01/1937	2	✓	0
001572709A	MENA	MOROSS	Female	02/01/1941	3	✓	0
001730618B	STEVEUS	JAKU	Female	04/06/1942	4	✓	0
001888527B	MEGO	NOORAM	Female	07/11/1943	5	✓	0
000000000	STARR	CADENA	Female	12/01/1947	6	✓	0

Group Status

Patient Status

	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Analysis	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗	0 ✗
Complete	5	5	5	5	2	1	1	5	1	2	1	1	5	5	5

Demographics

CARE COPD CAD DM HF HTN IVD PREV

Abstraction Date

Abstraction Date

Demographics

Medicare ID

* First Name

* Last Name

Gender

* Date of Birth

Medical Record Number (Optional)

Other ID (Optional)

Provider Name (Optional)

Clinic Name (Optional)

General Comments (Optional)

* Required field

Demographics

GPRO Web Interface

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences Help

Patients List

Medicare ID	First Name	Last Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank
001730618B	JOHN	DOE	Female	02/01/1900	4	✓	0
001888527B	MOROSS	MENA	Female	02/01/1900	5	✓	0
002046436B	CARENA	STARR	Female	12/21/1900	6	✗	0
002204345B1	LILLY	GINN	Female	07/12/1935	7	✗	382
002362254B1	BLANCK	DANABOM	Male	12/15/1900	8	✗	0
002520163R1	XHAI	HYDIE	Male	08/13/1900	9	✗	0

Patient Status

Group Status **Save Patient** Cancel **Check Entries** 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing		--	

Complete	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
✗	✗	✗	✗	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Rank	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics

CARE COPD CAD DM HF HTN IVD PREV

Abstraction Date

Abstraction Date 2/13/2012

Demographics

Medicare ID 002204345B1

* First Name

* Last Name

Gender

* Date of Birth

Medical Record Number (Optional)

Other ID (Optional)

Provider Name (Optional)

Clinic Name (Optional)

General Comments (Optional)

* Required field

Care Coordination (CARE)

GPRO Web Interface

Home Reports Export Data Upload Data Add/Edit Locked Records List Users Submit Preferences Help

Patients List

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001256891A	BEAR	VOSS	Male	08/08/1954	1	✓	0
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002046436C	STARR	CARENA	Female	12/01/1947	6	✓	0

Patient Status

Group Status **Save Patient** **Cancel** **Check Entries** 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By							
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing		--								
	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Complete	✖	✖	✖	✖	✔	✔	✔	✔	✔	✔	✔	✔	✔	✔	✔
Rank	20	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics

CARE

COPD

CAD

DM

HF

HTN

IVD

PREV

Medical Record Found

Medical Record Found

Reason

Date

CARE-2: Falls

Screening for Future Fall Risk

CARE-1: Medication Reconciliation

Edit

Discharge Date	Office Visit	Reconciliation

Comments (Optional)

Chronic Obstructive Pulmonary Disease (COPD)



GPRO Web Interface

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002362254B1	BLANCK	DANABOM	Male	12/15/1900	8	✗	0
002520163B1	XHAI	HYDF	Male	08/13/1900	9	✗	0

Patient Status

Group Status: Save Patient Cancel Check Entries 00:00:00 ?

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing	--	--	--

Complete	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Rank	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics CARE **COPD** CAD DM HF HTN IVD PREV

COPD Confirmation

COPD Confirmed

Reason

Date

COPD-1: Bronchodilator Therapy

Spirometry Test

FEV1/FVC < 70%

Symptoms

Inhaled Bronchodilator

Comments (Optional)

Coronary Artery Disease (CAD)

GPRO Web Interface

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Patient Status

Group Status **Save Patient** Cancel Check Entries 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
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	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Complete Rank	✗	✗	✗	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Dx	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics CARE COPD **CAD** DM HF HTN IVD PREV

CAD Confirmation

CAD Confirmed

Reason

Date

CAD-1: Antiplatelet Therapy

Aspirin/Clopidogrel

CAD-2: Lipid Control

LDL-C Controlled

CAD-7: Diabetes/LVSD and ACE-I/ARB

Has Diabetes

Has LVSD

ACE-I/ARB

Comments (Optional)

Diabetes Mellitus (DM)

GPRO Web Interface

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Complete	✗	✗	✗	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Rank	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics CARE COPD CAD **DM** HF HTN IVD PREV

DM Confirmation

DM Confirmed
Reason
Date

DM-2 and DM-10: Most Recent HbA1c Result

HbA1c Test
Date Drawn
HbA1c Value

DM-3: Blood Pressure Management

Most Recent BP
Date Taken
Systolic
Diastolic

DM-5: Most Recent LDL-C Result

LDL-C Test
Date Drawn
LDL-C Value

DM-7: Eye Exam

Eye Exam Performed

DM-8: Foot Exam

Foot Exam Performed

DM-11: IVD/Aspirin Use

Has IVD
Daily Aspirin Use

DM-12: Tobacco Non Use

Tobacco Use

Comments (Optional)

Heart Failure (HF)

GPRO Web Interface

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences Help

Patients List

Medicare ID	First Name	Last Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank
001730618B	JOHN	DOE	Female	02/01/1900	4	✓	0
001888527B	MOROSS	MENA	Female	02/01/1900	5	✓	0
002046436B	CARENA	STARR	Female	12/21/1900	6	✗	0
002204345B1	LILLY	GINN	Female	07/12/1935	7	✗	382
002362254B1	BLANCK	DANABOM	Male	12/15/1900	8	✗	0
002520163B1	XHAI	HYDE	Male	08/13/1900	9	✗	0

Patient Status

Group Status **Save Patient** **Cancel** **Check Entries** 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing		--	

Complete	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Rank	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics CARE COPD CAD DM **HF** HTN IVD PREV

HF Confirmation

HF Confirmed

Reason

Date

HF-1: LVEF Assessment Results

LVEF Result

HF-2: LVF Testing

Hospitalized

LVF Performed

HF-5: Patient Education

HF Education

HF-6 and HF-7: LVSD and BB and ACE-I/ARB

Has LVSD

Beta Blocker

ACE-I/ARB

Comments (Optional)

Hypertension (HTN)

GPRO Web Interface

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences Help

Patients List

Medicare ID	First Name	Last Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank
001730618B	JOHN	DOE	Female	02/01/1900	4	✓	0
001888527B	MOROSS	MENA	Female	02/01/1900	5	✓	0
002046436B	CARENA	STARR	Female	12/21/1900	6	✗	0
002204345B1	LILLY	GINN	Female	07/12/1935	7	✗	382
002362254B1	BLANCK	DANABOM	Male	12/15/1900	8	✗	0
002520163B1	XHAI	HYDE	Male	08/13/1900	9	✗	0

Patient Status

Group Status **Save Patient** Cancel **Check Entries** 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing		--	

	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Complete	✗	✗	✗	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Rank	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics CARE COPD CAD DM HF **HTN** IVD PREV

HTN Confirmation

HTN Confirmed
Reason
Date

HTN-2: Controlling High Blood Pressure

Most Recent BP
Date Taken
Systolic
Diastolic

Comments (Optional)

Ischemic Vascular Disease (IVD)

GPPO Web Interface

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences Help

Patients List

Medicare ID	First Name	Last Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank
001730618B	JOHN	DOE	Female	02/01/1900	4	✓	0
001888527B	MOROSS	MENA	Female	02/01/1900	5	✓	0
002046436B	CARENA	STARR	Female	12/21/1900	6	✗	0
002204345B1	LILLY	GINN	Female	07/12/1935	7	✗	382
002362254B1	BLANCK	DANABOM	Male	12/15/1900	8	✗	0
002520163B1	YHAI	HYDE	Male	08/13/1900	9	✗	0

Patient Status

Group Status **Save Patient** Cancel Check Entries 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing		--	

Complete Rank	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
Dx	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics

CARE

COPD

CAD

DM

HF

HTN

IVD

PREV

IVD Confirmation

IVD Confirmed

Reason

Date

IVD-1: Complete Lipid Panel and LDL-C Control

Lipid Profile Performed

Date Drawn

LDL-C Value

IVD-2 Use of Aspirin or Another Antithrombotic

Aspirin/Antithrombotic Therapy

Comments (Optional)

Preventive Care Measures (PREV)



GPRO Web Interface

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Patients List

Medicare ID	First Name	Last Name	Gender	Birth Date	CARE-1 Rank	CARE-1 Complete	CARE-2 Rank
001730618B	JOHN	DOE	Female	02/01/1900	4	✓	0
001888527B	MOROSS	MENA	Female	02/01/1900	5	✓	0
002046436B	CARENA	STARR	Female	12/21/1900	6	✗	0
002204345B1	LILLY	GINN	Female	07/12/1935	7	✗	382
002362254B1	BLANCK	DANABOM	Male	12/15/1900	8	✗	0
002520163B1	XHAI	HYDE	Male	08/13/1900	9	✗	0

Patient Status

Group Status: Save Patient Cancel Check Entries 00:00:00

First Name	Last Name	Gender	Date of Birth	Medicare ID	Current Mode	Locked By	Updated	Updated By
LILLY	GINN	Female	7/12/1935	002204345B1	Browsing			

Complete	CARE-1	CARE-2	COPD	CAD	DM	HF	HTN	IVD	PREV-5	PREV-6	PREV-7	PREV-8	PREV-9	PREV-10	PREV-11
✗	✗	✗	✗	✗	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Rank	7	382	10	7	0	0	0	0	0	0	0	0	0	0	0
Dx	Yes	Yes	Yes	Yes	No	No	Yes	Yes	---	---	---	---	---	---	---

Demographics CARE COPD CAD DM HF HTN IVD **PREV**

Medical Record Found

Medical Record Found
Reason
Date

PREV-5: Screening Mammography

Mammography Performed

PREV-6: Colorectal Cancer Screening

Screening Is Current

PREV-7: Influenza Immunization

Immunization Received

PREV-8: Pneumonia Vaccination

Vaccination Received

PREV-9: BMI Screening and Follow-Up

Calculated BMI
BMI Normal
Follow-Up Plan

PREV-10: Tobacco Use: Screening and Cessation Intervention

Screened for Tobacco Use
Cessation Counseling Intervention

PREV-11: Screening for High Blood Pressure

Blood Pressure Screening

Comments (Optional)

Patient Summary Report Selection



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Summary Report



Medicare ID	First Name	Last Name	Birth Date
121221927A	ZEF	EETH	08/23/1941
121221928A	STONEHEART	TINTO	05/25/1942
121221929A	STANZA	ARIEL	05/05/1942
121221930A	VARSIN	BENDIX	01/01/1943
121221931A	FOLLNOR	VON	11/04/1943
121221932A	SHOL	LESHON	09/05/1942
121221933A	JOSHUA	ZIVEN	09/04/1938
121221934A	KOTH	DEOVA	04/23/1942
121221935A	TERSEN	RENCI	02/05/1941
121221936A	KLUSTO	HYDE	10/19/1942
121221937A	TELON	ROBERT	02/06/1941
121221938A	AVERY	MOZH	10/18/1945
121221939A	AUUGU	SEBASTIAN	09/04/1942
121221940A	KAISER	FORDYCE	12/13/1943
121221941A	VIULA	VAJ	11/23/1942
121221942A	MAGNUS	WOKBINLAU	03/04/1942
121221943A	BEN	JESSA	09/29/1942
121221944A	QUALTO	MORAES	10/24/1941

[Preview](#)

[Print Selected](#)

[Print Patient Summary](#)

Patient Summary Report Selection (cont.)



[Print Patient Summary](#)

PATIENT SUMMARY REPORT

Patient TINTO , STONEHEART **Total Time** 00:00:15 **Patient Data** Complete

Demographics

Abstraction Date 2/27/2012
Medicare ID 121221928A
Gender Female
Birth Date 05/25/1942
Medical Record Number
Other ID
Provider Name Physician B Physician B
Clinic Name

Last User JANE SCHIEMER
Last Update 02/27/2012 17:54:11

Module	Rank	Status
CAD	0	Complete
DM	0	Complete
HF	0	Complete
HTN	0	Complete
PREV-5	0	Complete
PREV-6	191	Complete
PREV-7	0	Complete
PREV-8	0	Complete

PREV: Preventive Care

Medical Record Found

Medical Record Found Yes

PREV-6: Colorectal Cancer Screening

Screening Is Current Yes

Totals Report: Module Status



PREV-8: Pneumonia Vaccination

Report Title	Total	Details	Comments
All Ranked Patients	4	Details >>	
All Completed	4	Details >>	
All Incomplete	0	Details >>	
Consecutively Completed	4	Details >>	
Medical Record Not Found	0	Details >>	
Not Confirmed	0	Details >>	
Not Qualified For Sample	0	Details >>	
In Hospice	0	Details >>	
Moved Out of Country	0	Details >>	
Deceased	0	Details >>	
Not Qualified - Medical Reasons	0	Details >>	
No Qualifying Visits	0	Details >>	
For Analysis	4	Details >>	OK! Minimum requirement met.

Totals Report: Details



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Totals Report

[Patient List](#)[View Printable Report](#)[Totals Summary](#)[Details](#)

Details for PREV-8: All Ranked Patients

Medicare ID	Last Name	First Name	Gender	Birth Date	Rank	Status	Medical Record Found
666666655A	ENDEL	IRRIS	Male	11/09/1912	1	Complete	Yes
599881111A	EDOR	ORDEN	Female	03/04/1931	2	Complete	Yes
765998888B	EDEA	LEE	Female	10/12/1942	3	Complete	Yes
111223333A	SIM	ALEXANDRE	Male	02/16/1933	4	Complete	Yes

Pre-Filled Elements

Pre-filled Elements Report



Medicare ID	Last Name	First Name	Birth Date
911223333A	DREIZ	ALYSIA	6/5/1940
765998888B	EDEA	LEE	10/12/1942
599881111A	EDOR	ORDEN	3/4/1931
444445555A	THORN	SEYDA	12/15/1941
333331111A	DREIZ	NICOLE	7/4/1943
777449999A	LETO	AREN	7/16/1943
603333111B	BOLEN	JONAS	7/23/1912
999887777A	AALTO	SHODON	5/15/1944
888776666A	GRIL	CALMAN	1/1/1937
987004444B	ALA	NATAYA	3/30/1941

Measure	Element	Pre-filled Value	Current Value	Changed
	First Name	NATAYA	NATAYA	No
	Last Name	ALA	ALA	No
	Gender	Female	Female	No
	Birth Date	Mar 30 1941	Mar 30 1941	No
	Provider Name	LAURENT SAALIA	LAURENT SAALIA	No
DM1	HbA1c	Yes	Yes	No
DM2	Date Drawn	06/12/2011	11/15/2011	Yes
DM5	LDL-C Test	Yes	Yes	No
DM5	Date Drawn	06/12/2011	11/15/2011	Yes
DM6	Medical Attention Nephropathy	Yes	Yes	No
DM7	Eye Exam Performed	Yes	Yes	No
DM9	Lipid Profile Performed		Yes	Yes
HF2	Hospitalized			No
HF2	LVF Performed			No
HF8	Atrial Fibrillation			No
PREV5	Mammography Performed			No
PREV7	Immunization Received			No
PREV8	Vaccination Received			No

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Activity Logs: All Activity



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Activity Logs Report

Filter

Name

Log Date	Username	Patient	Action	Description
01/18/2012 09:17:57:17...	JM34	NATAYA ALA - 03/30/1941	Record Updated	Data Status Incomplete
01/18/2012 09:45:07:45...	JM34	ALEXANDRE SIM - 02/16/1933	Record Updated	Data Status Incomplete
01/18/2012 09:46:17:46...	JM34	ALEXANDRE SIM - 02/16/1933	Record Updated	Data Status Incomplete
01/18/2012 09:48:09:48...	JM34	ALEXANDRE SIM - 02/16/1933	Record Updated	Data Status Completed
01/18/2012 10:03:49:03...	JM34	CALMAN GRIL - 01/01/1937	Record Updated	Data Status Incomplete
01/18/2012 10:11:20:11...	JM34	CALMAN GRIL - 01/01/1937	Record Updated	Data Status Completed
01/20/2012 06:04:53:04...	JM34	LAN KYMBER - 04/27/1901	Record Added	Visit Date: 12/15/2011
01/20/2012 06:09:15:09...	JM34	LAN KYMBER - 04/27/1901	Record Updated	Data Status Incomplete
01/23/2012 11:03:44:03...	JM34	ALYSIA DREIZ - 06/05/1940	Record Updated	Data Status Incomplete
01/23/2012 05:47:40:47...	JM34	LAN KYMBER - 04/27/1901	Record Added	Visit Date: 11/16/2011
01/23/2012 05:51:19:51...	JM34	LAN KYMBER - 04/27/1901	Record Added	Visit Date: 11/23/2011
01/23/2012 06:03:33:03...	JM34	LAN KYMBER - 04/27/1901	Record Deleted	Visit on 12/15/2011 deleted
01/23/2012 06:16:10:16...	JM34	JONAS BOLEN - 07/23/1912	Record Added	Visit Date: 12/15/2011
01/23/2012 06:16:54:16...	JM34	JONAS BOLEN - 07/23/1912	Record Added	Visit Date: 12/16/2011
01/23/2012 06:18:22:18...	JM34	JONAS BOLEN - 07/23/1912	Record Updated	Data Status Incomplete
01/23/2012 06:20:54:20...	JM34	JONAS BOLEN - 07/23/1912	Record Updated	Data Status Incomplete
01/23/2012 06:26:05:26...	JM34	JONAS BOLEN - 07/23/1912	Record Updated	Data Status Incomplete

[View Printable Report](#)

Export Patient Data



GPRO Web Interface

Home Reports ▾ Export Data Upload Data Add/Edit ▾ Locked Records List Users Submit Preferences Help

Export Data



* List to Export **Patients** ▾

* Export Patients Under These Topics

- ☒ CAD: Coronary Artery Disease
- ☒ DM: Diabetes Mellitus
- ☒ HF: Heart Failure
- ☒ HTN: Hypertension
- ☒ PREV-5: Screening Mammography
- ☒ PREV-6: Colorectal Cancer Screening
- ☒ PREV-7: Influenza Immunization
- ☒ PREV-8: Pneumonia Vaccination

Export

Upload Patients



GPRO Web Interface

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Upload Data

* Upload Data Set **Patients** ▾

Upload Options: ☐ Overwrite existing values *
☐ Overwrite all dates **

* Checking this option will overwrite any values in the database with both NULL and non-NULL values from the source file. The default behavior is to not overwrite values in the database.

** Checking this option will overwrite all dates in the database with valid dates from the source file. The default behavior is to only overwrite earlier dates in the database with more current dates from the source file. This option does not apply to Patient Visit dates.

Note: No other users should be using the database while data is being uploaded.

* Source File

Note: The name of the file can not exceed 35 characters.

Help



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Quick search

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- Quality Measures
- Abstracting Visits
- Definition of Terms

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- Pre-filled Indicators
- Data Status
- Timer

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- Group Status
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- Cancel Patient
- Check Entries
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- Coronary Artery Disease
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- Hypertension

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Favorites

You are here: Welcome

Welcome

Welcome to the GPRO Web Help. This online help describes the features of the GPRO Web Interface and is divided into the following major topics:

Topic	Description
Abstraction Guides	General guidelines on how to abstract patient information.
Features	Lists the features that are not covered under the menus.
Dashboard	Describes the parts of the main data entry form.
Navigation	Describes the different features and options that are accessible from the menu items.
Measure Data Definition	Definition of measure elements.
Medication List	List of medications.

Using GPRO Web Help

- Use the menus on the left pane to navigate the topics.
- The left and right panes can be resized by pointing the cursor over the line between the scroll bar and the right pane and dragging it to the left or right.

Centers for Medicare & Medicaid Services, 7500 Security Boulevard Baltimore, MD 21244

Training



- ❖ Training is provided throughout the year; topics include:
 - Supporting Documents useful for abstraction from either an EHR or a paper chart
 - Procedures for registering and setting up an Individuals Authorized Access to CMS Computer Services (IACS) account
 - XML specifications for export/import of beneficiary data
 - Use of the GPRO Web Interface
- ❖ GPROs receive expedited help desk assistance and weekly technical assistance support during the abstraction period

Opting Out of GPRO



- ❖ The deadline for opting out of GPRO is April 27, 2012
- ❖ If a group decides to opt out of the group practice option, eligible professionals associated with the group may still participate as an individual
 - See the following to help get started:
https://www.cms.gov/PQRS/03_How_To_Get_Started.asp
- ❖ Eligible professionals who decide to opt out of GPRO should send an email to the Helpdesk: qnetsupport@sdps.org

Resources/Where to Begin



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Physician Quality Reporting System

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Group Practice Reporting Option

In accordance with section 1848(m)(3)(C) of the Social Security Act (the Act), CMS created a new group practice reporting option (GPRO) for the Physician Quality Reporting System in 2010. Group practices that satisfactorily report data on Physician Quality Reporting System measures for a particular reporting period are eligible to earn a Physician Quality Reporting System incentive payment equal to a specified percentage of the group practice's total estimated Medicare Part B PFS allowed charges for covered professional services furnished during the reporting period.

2012 Physician Quality Reporting System GPRO Requirements

A document titled "2012 Group Practice Reporting Option (GPRO) Requirements" has been posted in the "Downloads" section below. This document describes the GPRO Requirements for submission of 2012 Physician Quality Reporting System and Electronic Prescribing (eRx) Incentive Program data.

2012 Physician Quality Reporting System GPRO Measures

For purposes of determining whether a group practice satisfactorily submits Physician Quality Reporting System quality measures data for 2012, each group practice selected to participate in the 2012 Physician Quality Reporting System GPRO will be required to report 29 quality measures. A list of the 29 2012 Physician Quality Reporting System GPRO measures can be found in the "2012 Physician Quality Reporting System (Physician Quality Reporting) Group Practice

Resources/Where to Begin



nomination letter to CMS, and be selected to participate in the 2011 Physician Quality Reporting System (GPRO). The GPRO requirements and instructions for submitting the self-nomination letter can be found in the "Downloads" section below.

Downloads

[2012 Group Practice Reporting Option \(GPRO\) Requirements \[PDF 70 KB\]](#) 

[2012 Physician Quality Reporting GPRO I Measure Specifications and Release Notes \[ZIP 352KB\]](#) 

[GPRO I Self Nomination Requirements \[PDF 49KB\]](#) 

[GPRO II Self Nomination Requirements \[PDF 54KB\]](#) 

[2011 Physician Quality Reporting GPRO I Measure Specifications and Release Notes \[ZIP 218KB\]](#) 

[2011 Physician Quality Reporting System GPRO I Measures List \[PDF 59KB\]](#) 

Related Links Inside CMS

There are no Related Links Inside CMS

For Remaining Questions...



QualityNet Help Desk

Monday – Friday: 7:00 am - 7:00 pm CT

E-mail: qnetsupport@sdps.org

Phone: (866) 288-8912 (TTY 1-877-715-6222)

Fax: (888) 329-7377