Reg-ent MIPS Quality Performance Category Reporting Webinar

September 21, 2017
1:00 – 2:00 PM ET

- Welcome

- Introduction of Speakers
  - Cathlin Bowman, MBA
    - Director, Reg-ent, AAO-HNSF

  - Laura McQueen, RN MSN
    - Senior Manager, Reg-ent, AAO-HNSF

  - Siddhi Baralay
    - COO, FIGmd

- Review the features and functionality of the Reg-ent MIPS Dashboard

- Facilitate interaction with the Reg-ent Dashboard

- Increase knowledge and understanding of how to use the Reg-ent Dashboard to report MIPS 2017

- Illuminate the Reg-ent MIPS 2017 reporting process and timeline

- Increase understanding of the MIPS 2017 Quality Performance reporting options and requirements

- Share additional training and resources to be provided by Reg-ent for Advancing Care Information (ACI) and Improvement Activities (IA) reporting in 2017

- Opening Remarks
  - Cathlin Bowman

- Reg-ent Dashboard Overview
  - Cathlin Bowman & Laura McQueen

- Demonstration of the Reg-ent MIPS Quality Dashboard
  - Siddhi Baralay

- Open Question & Answer Session
  - Siddhi Baralay & Cathlin Bowman

- Closing Remarks
  - Cathlin Bowman & Laura McQueen

- Conclusion of Webinar

- How to navigate the Reg-ent MIPS Dashboard and access components and modules

- MIPS 2017 Quality reporting process and timeline

- MIPS 2017 Quality Performance measures available in Reg-ent

- MIPS 2017 Quality Performance reporting options and requirements

- Reg-ent MIPS Dashboard Modules:
  - Quality
  - Advancing Care Information (ACI)
  - Improvement Activities (IA)
- Additional MIPS Dashboard Components:
  - Welcome screen – MIPS reporting information
  - Clinician screen (if a group practice)
  - MIPS summary screen
- MIPS Submission Module

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F O U N D A T I O N

- MIPS Dashboard:
  - Access provided to MIPS Dashboard module
  - Verify clinician eligibility
  - Quality Performance data
    - Review Quality performance
    - Select measures applicable to your patient profiles
    - Select measures for Quality Performance reporting
  - Enter ACI data
  - Select IAs to attest to
  - Select reporting period
  - All practices set to group reporting in Reg-ent registry

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F O U N D A T I O N

- MIPS Submission Module:
  - Complete selection of measures and data to submit to CMS, including reporting period
  - Sign Data Release and Consent Form (DRCF)
  - Review submission
  - Submit data to Reg-ent
  - FIGmd team reviews data submission with each practice
  - Data submitted to CMS on your behalf by Reg-ent

- October – December 2017
  - Receive access to the Reg-ent MIPS Dashboard
  - Refine and finalize measures data mapping
  - Confirm MIPS eligibility for each clinician
  - Review Tax ID and NPI numbers for accuracy
  - Review Quality performance data with your Reg-ent Client Account Manager (CAM)
  - Select reporting timeframe: Test, Partial, Full
  - Select Quality measures to submit
  - Review final measures data for submission to CMS with your Reg-ent CAM

- January - March 2018
  - Receive access to MIPS Submission module
  - Complete DRCF
  - Review and finalize submission data and time periods for each category
  - Complete submission to Reg-ent
  - FIGmd reviews submission with the practice and then submits to CMS

MIPS 2017 Quality Performance Measures Available in Reg-ent

QPP Measures Available for 2017 MIPS Reporting

Adult Sinusitis	I. Antibiotic Prescribed for Acute Sinusitis (Overuse) II. Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use) III. Computerized Tomography (CT) for Acute Sinusitis (Overuse) IV. More than One Computerized Tomography (CT) Scan Within 90 Days for Chronic Sinusitis (Overuse)	Surgery	I. Unplanned Reoperation within the 30 Day Postoperative Period** II. Unplanned Hospital Readmission within 30 Days of Principal Procedure** III. Surgical Site Infection** IV. Patient-Centered Surgical Risk Assessment and Communication
Acute Otitis Externa	I. Topical Therapy II. Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	Asthma	I. Optimal Asthma Control**
Preventive Care & Screening	I. Influenza Immunization II. Pneumococcal Vaccination Status for Older Adults III. Body Mass Index (BMI) Screening and Follow-Up Plan IV. Tobacco Use: Screening and Cessation Intervention V. Screening for High Blood Pressure and Follow-Up Documented VI. Unhealthy Alcohol Use: Screening & Brief Counseling	Sleep Apnea	I. Assessment of Sleep Symptoms II. Severity Assessment at Initial Diagnosis III. Positive Airway Pressure Therapy Prescribed IV. Assessment of Adherence to Positive Airway Pressure Therapy
Peri-operative Care	I. Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	Opioid Therapy	I. Opioid Therapy Follow-up Evaluation II. Documentation of Signed Opioid Treatment Agreement III. Evaluation or Interview for Risk of Opioid Misuse
Falls	I. Risk Assessment II. Plan of Care	Other	I. Medication Reconciliation Post-Discharge II. Care Plan III. Appropriate Treatment for Children with Upper Respiratory Infection (URI) IV. Appropriate Testing for Children with Pharyngitis V. Documentation of Current Medications in the Medical Record VI. Pain Assessment and Follow-Up VII. Use of High-Risk Medications in the Elderly VIII. Biopsy Follow-Up IX. Tobacco Use and Help with Quitting Among Adolescents X. Anesthesiology Smoking Abstinence XI. Quality of Life Assessment for Patients with Primary Headache Disorders**

** Denotes an outcome measure.

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Non-QPP Measures

Otitis Media with Effusion	I. Antihistamines or Decongestants – Avoidance of Inappropriate Use II. Systemic Corticosteroids – Avoidance of Inappropriate Use III. Systemic Antimicrobials – Avoidance of Inappropriate Use IV. Avoidance of Topical Intranasal Corticosteroids

Validation and Gap Analysis

Tonsillectomy	I. Tonsillectomy: Primary post-tonsillectomy hemorrhage in children II. Tonsillectomy: Primary post-tonsillectomy hemorrhage in adults III. Tonsillectomy: Secondary post-tonsillectomy hemorrhage in children IV. Tonsillectomy: Secondary post-tonsillectomy hemorrhage in adults
Otitis Media with Effusion	I. OME: Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility II. OME: Hearing Testing III. OME: Resolution of Otitis Media with Effusion in children IV. OME: Resolution of Otitis Media with Effusion in adults

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MIPS 2017 Quality Reporting Options and Requirements

- Identify your "pace" for reporting:
  - Test: minimum 1 measure for 1 patient or 1 improvement activity; no minimum time period
  - Partial: One or more quality measures/improvement activities for a minimum of 90 consecutive days
  - Full: Report on all categories for at least 90 days and up to a full year:
    - 6 measures, including 1 outcome measure or 1 high priority measure for at least 90 days, up to a full year **AND** report ACI and IA categories for 90 days, up to a full year

  - For Partial and Full paces required to submit 50% of patients that meet the denominator requirements (data is for all payers)

  - Note: while you identify your reporting pace, CMS will place your submission within one of the three pace options based on data submitted and if you use multiple submission mechanisms CMS will select the best performance data submitted for each MIPS category

- If 2 or more clinicians are reporting, Reg-ent is set to report data as GPRO

Demonstration of the Reg-ent
MIPS Quality Dashboard

Questions & Answers

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F O U N D A T I O N

- Thank you

- Upcoming webinars
  - Tuesday, October 10, 12 – 1 pm ET
    - Web entry tool
  - Wednesday, October 25, 2 – 3 pm ET
    - Reporting ACI and IA Categories
  - Friday, December 15, 12 – 1 pm ET
    - MIPS DRCF and Submission Module

- Additional resources
  - User Guide
  - Quick Guide
  - www.reg-ent.org
  - www.qqp.cms.gov
  - Reg-ent communications
- Contact information
  - Reg-ent@entnet.org
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