



Quality
Insights

QPPLive!

Transcript from Live Session

Thursday, March 15, 2018

Shanen Wright:

Welcome to the March edition of QPP Live. We are pleased that so many of you have joined us today to get all of your QPP-related questions answered. We've got a team of experts here lined up to address those as they come in. Keep in mind that you can start submitting your questions using the Q&A box at any time. If this is your first time joining us, here in a little bit we'll have some instructions on how everything works here in QPP Live. First, it's my great pleasure to turn things over to my friend, Joe Pinto, for today's breaking news and announcements. Joe?

Joe Pinto:

Thank you very much, Shanen, and a good morning everyone. Glad to have everyone back again for the March installment of QPP Live. Couple of items that we just want to make you aware of. The MIPS submission deadlines are coming up very quick. Those of you, if you plan to submit data for the 2017 MIPS reporting year, you need to make sure that you meet the deadlines coming up. Don't wait until the last minute to submit. Submit early and often. That means that you can go in and you can make as many changes as you want, as often as you need, right up until the deadlines.

For those of you that are using the CMS web interface option for group reporting, that deadline is coming up very quick. It is tomorrow night at 8:00. The deadline for that submission is 8:00 p.m. tomorrow evening. For the rest of you, if you are doing MIPS reporting via the QPP.com web portal, individual reporting, that deadline is coming up on March the 31st. If you do need help with any of your submission needs, please reach out to your assigned quality insights practice transformation specialist. He or she will assist you through the process.

Now there are performance scores for 2017 claims data available now on the QPP website. If you were an eligible clinician who submitted your 2017 quality performance data for MIPS via the claims submission method, you're now able to view the performance scores through the MIPS data submission feature. The claims data submission is only available, remember, if you are participating in MIPS as an individual. You cannot submit via claims if you are submitting as a group.

If you've already submitted your quality data via claims, you don't have to take any additional action. There's nothing else that you need to do, unless you want to try to achieve a higher score, then via the EHR reporting option to your registry. That, we suggest, that you report your ACI and improvement activities to, or either way to get the bonus. Claims-based quality measures are calculated automatically by CMS based on the G codes that are submitted on the claims from 2017. Then, you can log in to the QPP.cms.gov website and you can view your calculated individual measures, and scores, and category score for the program year of 2017.

Performance scores for 2017 claims data, as I mentioned, already available on the QPP website. The scoring of claims data is subject to change, however, and it's changing monthly due to the processing of any additional 2017 claims and adjustments that were made up to 90 days after the end of 2017. It is possible that the claims or adjustments that were submitted towards the end of 2017 have not yet been processed. Make sure you check back after March 31st to see if all of the claims have been counted, and what your score will be.

Some of the mixed resources that we do have available to you, the QPP data submission through the CMS portal guide is available. It was developed by the New England QPP support center. We also have the 'MIPS Reporting Deadlines Fast Approaching: 10 Things to Do and Know'. Also, 'Quality Payment Program Frequently Asked Questions', which is dated just recently, as of March the 5th, 2018. That's updated pretty much as many of the update queues that we have available to you at the moment.

EIDM accounts. This becomes a hot topic lately for us. For assistance with your EIDM account, please call the CMS service center at 1-866-288-8292. We also have below the links for the user guides to use as a reference. The enterprise identity data management user guide, the EIDM user guide which was dated 2/7 of 2018. Also from the same date, the enterprise identity data management ACO user guide for those of you that are reporting via the ACO APM track model.

Finally, some upcoming webinars to make you aware of. In March, there will be a webinar available called 'How to Prepare for MIPS Cost Sharing.' This webinar is actually going to be available on two separate dates and times. It will be the same webinar presentation, but if you can't make one, you can schedule for the other. The registration links are available to you on the screen that you see. That will be coming up on March 20th at 11:00 a.m., and also on March 22nd at 7:00 p.m. for those of you, especially clinicians, that can't make the earlier webinars. They do have that available as a second option.

Finally, the quality insights 2018 QPP reporting requirements webinar will be coming up next Wednesday, March the 21st at 2:00 p.m. The registration link is available at the bottom of your screen.

Now I'll turn things back over to Shanen Wright for an introductory of today's panelists. Shanen?

Shanen Wright:

Thanks so much, Joe. Appreciate today's morning news. I hope you all found that helpful. We will be chatting out all of the links in the chat box if this is your first time on QPP Live. Those webinars that Joe was speaking of, you can register for those now. Today's panelists, we've assembled lots of folks here from quality insights, starting with our project director, Kathy Wild, who's joining us from Delaware.

I'm Shanen Wright. I'm in at our corporate headquarters in Charleston, West Virginia. Serving Delaware, we have Cathy Browning and Roxanne Fletcher. For Louisiana, we have Lisa Sherman with us. New Jersey, we have Maureen Kelsey, Dianna Haniak, Amy and Amy Weiser. Then looking into Pennsylvania, we have Matt Armstrong, Rebecca Dase. Rebecca is the one who send you all those great chat links in that window so you can access resources right offhand. Of course, Joe Pinto, who delivered today's breaking news and announcements. We also have Lisa Sagwitz and Shirley Sullivan, all serving the commonwealth of Pennsylvania. For here in West Virginia, we have both Julie Williams and Debbie Hennen with us.

If this is your first time joining us for QPP Live, welcome. We hope you enjoy today's presentation. You can use the Q&A box in your WebEx player. It's right on the right hand side. If you're not seeing it, you can go up to the top to the little question mark icon to open that up. When you go to the ask area, choose 'all panelists,' type in your question, and hit 'send.' It's that simple. Your questions will be addressed in the order in which they are asked. You can start submitting those now. I see we've already got one lined up from our friend Bobby who joins us every month. Thank you, Bobby.

Note that that chat feature I talked about that it is used for web links, so please refrain from asking questions in that, if you don't mind. That way everybody can have all of the links they can access right away. Keep in mind as well that we have emailed the slide deck for today's session to all registrants, so you should have received that. You'll also have links to resources in there as soon as you open that information.

Now, some of you have called in on your telephones. Others are listening through your computer speakers. If you're called in via the phone and you'd like to talk with us and ask your question, or provide your feedback verbally, several times during today's QPP Live, we will unmute the line so that everyone can have a chance to speak and talk with us. Sometimes it's easier to talk rather than type, so we want to offer that opportunity. We will give you a head's up on that. We do ask that if you're not asking any questions verbally to make sure to keep your phone line muted on your end so we're not inadvertently hearing your conversation.

Keep in mind that we here at Quality Insights are here to help you any time, not just during QPP Live, which is the third Thursday of every month at 9:30 Eastern, 8:30 Central. You may not realize who your contact is here, who you're working with. If so, you can use our general QPP inbox for inquiries any time. Keep in mind that we'll do the best we can to answer all the questions we can today, but sometimes the questions require a little more research. You guys really come up with some good ones. We might need to follow up with you at a later time, but not to worry, we will make sure and get a response to you. Keep in mind that we also are recording today's session. If you want to refer back to any of the information contained within it, you can certainly do so. There will also be a transcript of it as well if you'd like to read any of the responses to the question.

Another thing, since we are recording this to keep in mind that rules and interpretations do change over time. If you are viewing an archive of this session, the answers that are given on it may not necessarily be the most up to date. Most of all, we here at Quality Insights want to establish a relationship with you, so that you can succeed in the quality payment program. With that being said, let's jump into today's Q&A, starting with Bobby's question.

Bobby says, "Last year we had access to the MIPS calculator to monitor our progress. I know you all were working on getting this revived. Is it available yet?"

Amy Weiser: Hi, good morning, Bobby. This is Amy. Thanks for the great question. We do not have the updated calculator yet, but we hope to have it soon. We will post it on our website when it becomes available.

Shanen Wright: Okay. Thank you so much, Amy. As we wait for some more questions to roll in, go ahead, start typing now. We'll get to one of them.

Let's go to one of our frequently asked questions that we have here that says, "Can you please explain about the second NPI look-up that I've heard about?"

Lisa Sagwitz: Hi, it's Lisa. I can answer that question. Yes, if you are a practice or organization that's in an accountable care organization and you'll be doing the APM reporting, there is a second look-up tool. While many practices use QPP.CMS.gov and type in their NPI number, the second look-up site is <https://data.CMS.gov/QPLookup>. This second look-up, for practices that are in ACOs, supersedes the other one. That will tell you what ACO you're a member of and how you should do your reporting; which is typically just the advancing care information.

Shanen Wright: Okay. Thank you, Lisa. Next question we have.

"For the improvement activities category, I understand I simply attest 'yes,' but how does CMS know that I did these?"

Amy Weiser: Hi, thank you for question. This is Amy. Yes, that is correct. You do attest 'yes' in the portal. What CMS suggests is that you have the documentation in your files to support the improvement activity that you selected for the time period that you selected in case you are audited.

Kathy Wild: Hi, this is Kathy. I just want to add to that, that we did receive notification this morning to provide clarification to everybody that the QPP portal, the product team that has developed that for CMS. They are still creating some functionalities that will be added, such as the special status factors. If you are a small practice with 15 or fewer clinicians, or you are located in a rural area, when you do get some special status scoring differences, please note that that scoring will not be visible yet in the QPP portal when you submit that data. However, it definitely will be applied once the performance period ends on March 31st. That will be included in the scoring method. We just wanted to make sure that everyone is rest assured that that will be done.

The other thing that they wanted to tell us about is that you can continue to make changes to the data you have in the QPP portal up through and including March 31st. Updates to your MIPS scores, which will include the application of the special status and other things, such as new benchmarks, and that benchmarking requirements for this year will be fully reflected in the final scores. CMS says they anticipating that they will have MIPS scores available in July of 2018. That will be provided via a feedback report and probably is sent to your account that you'd have to log in through your EIPM login.

Shanen Wright: Thank you so much, Kathy. Here in a little bit, we're going to unmute the phone line, see if anybody has a verbal question for us on today's QPP live. If you're waiting for that, that's coming up right. First, let's find out on the quality category measures, if I submit more than the required six, will I get extra points for the additional outcome or high priority measures?

Lisa Sagwitz: Hi, it's Lisa. That's a great question and a great strategy to use because while you know you need to report six quality measures and one does need to be an outcome or high priority, if you would report more additional outcome or high priorities, you could get a higher score. Each outcome measure that's additional is worth two more points, and each additional high priority measure is worth one more point. You'd want to be sure that that's good data. As far as your reputational impact, when that's posted on physician compare that you have a nice score. You could get up to 10% or six extra points for taking that strategy. Definitely something that's recommended if it works out with your quality measures.

Shanen Wright: Thank you, Lisa.

Kathy Wild: Excuse me, Shanen. This is Kathy. Just to confirm that CMS will actually calculate your quality category score based on the highest ... the measures with the highest score. You can still collect those extra bonus points even though those measures were not in the top six with the highest scores.

Shanen Wright: Okay. Thank you, Kathy. This time, let's unmute the phone lines. We have about four or five people who are listening on their telephones and may have verbal questions. If you don't, make sure to mute on your end. I will unmute the lines now and see if anyone has any questions or comments that they would like to share verbally.

Shanen Wright: All right, well hearing none. We'll go ahead and re-mute the lines. Let's go back out to the questions. You can still submit them in the Q&A box at any time. While we're waiting on that, here's a frequently asked question that we hear at Quality Insights.

"When I log into the QPP.cms.gov site for MIPS testing and look at the connected clinician section on the left, some of my providers are missing and there are providers that are no longer with the practice. What should I do?"

Lisa Sagwitz: Hi, it's Lisa. Definitely even if you have not attested yet, I recommend you logging in to QPP.cms.gov, entering your EIDM account information and looking at your connected clinicians. You want to be sure that everyone is there. If there would be any problem that someone's missing, you can contact the QPP help desk and let them know. That phone number is 866-288-8292. I know I've been hearing a lot from the practices I work with that maiden names are coming up for many of the females. That's not so much of an issue, as long as the name is correct from the past and the NPI number is okay. It's fine that that person would get credit.

If you find that somebody's not there, definitely mention it. Think back, did you report them to PECOS if they've recently been added? If someone has left your practice and you're still reporting on them, that is okay. That's not a problem to report on someone. Usually with the group attesting in the larger practices, that's often the case.

Shanen Wright: All right. Thank you, Lisa. Next up, we hear from another Bobbi we have joining us. I believe this is a new person. Welcome, Bobbi.

She says, "We have a single physician practice and are reporting via claims using G codes. Is this all that is needed to report to CMS? Or is there something in addition we need to do? We reported in 2017 as 'test.'"

Amy Weiser: Hi Bobbi, thanks for your question. This is Amy. I guess it depends on what your goal is for submitting. Yes, submitting by G codes with a claim is appropriate and it does meet the minimum requirements for the test submission. However, if you wanted to submit more data, if you had EHR and you wanted to submit advancing care information, you could still do that. If you wanted to get more points on top of that, you could submit improvement activities. Those would give you more points. More points would give you an opportunity to earn an incentive. You've done the minimum, but you are certainly, up until March 31st,

able to submit more data if you would like to. I hope that answers your question.

Shanen Wright: Thank you, Amy.

Next up we hear from Jay, who asks, "How and when will we be reimbursed for 2017?"

Kathy Wild: Hi Jay, this is Kathy. I can try to answer your question. The way that the quality payment program is set up is that for every performance period every year, CMS needs time for you to submit the data and for them to analyze it before they can prepare what your reimbursement would be; whether it's neutral or a negative payment adjustment or a positive one. Therefore, they are anticipating that they will have the analysis done by mid to end of summer. You would be notified at that time.

That means that they cannot apply anything until the next calendar year, which would be January 19. There's always that two year gap from your performance period, which is 2017, and then the payments are always applied not the next year, but the other one because the CMS needs time to look at your data.

For the data that you're submitting right now for 2017, the payment adjustments will be applied to all of your Medicare Part B claims on an ongoing basis through the entire 2019 calendar year. Now, just to give you another example, we are now in the 2018 reporting year. You'll be collecting data, submitting it to CMS next year at this time. They'll analyze it next year and then the payment adjustments for what you're doing now are applicable in 2020. There's no lump sums. Everything will be an adjustment, a percentage adjustment based on every claim you submit and the reimbursement. I hope that clarifies it.

Shanen Wright: Thank you, Kathy. If you have questions, make sure and type them in the Q&A box now before we run out of time in today's QPP Live.

Next question we have, this person says, "I'm having trouble getting my EIDM account set up in the correct user roles. Can you help?"

Lisa Sagwitz: Hi, it's Lisa. Yes, this is a question that I often get. We do have some tip sheets or cheat sheets that we can send you. Definitely reach out to your Quality Insights person to get those. Then, the quality net health desk is a great resource. Their phone number is 866-288-8912. They're open Monday through Friday from eight to eight. I have gotten wonderful feedback when practices have phoned that they stay with them screen by screen to help get that set up.

Just some things that sometimes I don't think about that the practices I work with have asked me. In the past for Medicare, each provider needed a username and a password to do the meaningful use attesting. For MIPS, that's

different. You're going to have at least one or two people in the practice who get set up with an EIDM account. Then, they get connected to your organization. You do not need to have a username and password for everyone as you were used to. It's just one or two people in your organization being able to attest for MIPS. Then, ultimately look at physician feedback reports around October of this year. It's a simpler process.

Shanen Wright:

Thank you, Lisa. Please note in the chat box, you have some links and the telephone number for the quality net help desk, courtesy of Rebecca Dase. Thank you so much, Rebecca, for providing that information. Still have about four more minutes left in today's episode if you have a question and would like to sneak it in.

Next up, we hear from someone who says, "We have a small practice with fewer than 15 providers and are only required to attest to one or two improvement activities. However, we are not getting the 15 points when MIPS attesting. Why is this?"

Amy Weiser:

Okay. Sorry about that. Yes, we are aware that, and CMS is aware that when you submit your improvement activities in the portal, it is not crediting you with the full points for submitting the appropriate improvement activities as a small practice, so 15 or fewer. CMS will be adjusting that information after the submission is closed on March 31st. They will be calculating all of that at that time. It will not show in the portal this year, as they are continuing to update that functionality. They have assured us that it will occur after the submission period ends on March 31st.

Shanen Wright:

Thank you, Amy.

Next person we hear from says, "We are a small practice and we're wondering if we need an EHR to participate in MIPS?"

Lisa Sagwitz:

Hi, it's Lisa. Go ahead, Kathy. I'll save my voice.

Kathy Wild:

Oh okay, sorry. Absolutely, you do not have to an EHR. That would prevent you, if you don't have any HR, you cannot receive any points in the advancing care information category. There are three other categories that you could report on. There are still the quality categories, the improvement activities, and then this year, the cost category. Once again, the new cost category for 2018, you do not have to do anything. CMS will be collecting that data, administrative claims data from behind the scenes. It is still important that you understand how that data is being collected.

Just to let you know that Quality Insights is planning a webinar to help explain that. That is one of the webinars I believe next week that CMS will be giving also. Once again, you do not need an EHR to go ahead and get some MIPS points.

Shanen Wright:

Thank you, Kathy. We'd like to thank all of you for joining us for today's episode of QPP Live. Please keep in mind that we are here to help you any time, not just during this program. If you don't realize who contact is at Quality Insights, please use our general QPP inbox that you see right there on your slide right now for any inquiries. Most of all, we just want to establish a relationship with you so that we can help you succeed in the quality payment program. Please mark your calendar for our next episode of QPP Live, which will take place on April 19th at 9:30 a.m. Eastern, and 8:30 a.m. Central.

Just a reminder, you will also be directed to an evaluation following this. Please fill that out and give us your feedback so that we can continue to improve our offerings here at Quality Insights. On behalf of the entire QPP team, I'd like to thank you for joining us today and hope you have an excellent rest of your day. Goodbye.



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