

QCDR Support Office Hours

February 21, 2019

What we will cover

- Dates/Timeline
- CMS Submission
- Q&A

Key Dates

- Jan. 31, 2019: This was the deadline to complete submission of measure data to QCDR. Data can still be submitted, but time is running out.
- March 15, 2019: MIPS fees are due. Invoices were sent in January and the fees can be paid via the NRDR portal.
 - We would also recommend that you have your submission finalized and submitted to CMS by this date in order to have this completed with plenty of time to spare.
- April 2, 2019: Submission period for 2018 MIPS closes at 8pm ET. Measures, IAs and PI **must** be submitted before then in order to receive credit for 2018 MIPS participation.

CMS Submission Portal

- CMS Submission portion of the MIPS portal is now available
- This tab will allow users to submit their data directly to CMS
- ACR receives performance feedback from CMS in real-time; users can see their preliminary CMS scores in the MIPS portal
- Data can be resubmitted after initial submission; in other words, you can change your submission, submit new data, etc.

CMS Submission Walkthrough

Reporting Year: 2018 ▼

Refresh Data

CMS Score Reports ▼

+ CMS Submission Instructions

+ GPRO/Non GPRO Management

+ Attestation

+ Select Quality Measures  GPRO  NON-GPRO

+ Improvement Activities

+ Promoting Interoperability

GPRO/Non GPRO Management

This tab allows you to indicate which of your TINs will be submitting as a group (GPRO) and which will be submitting as individual NPIs (non-GPRO).

+ CMS Submission Instructions

- GPRO/Non GPRO Management

ATTENTION FOR SUBMISSION AS INDIVIDUAL NPI(s) (not GPRO): In order to meet CMS requirements for QCDR participation, when agreeing and attesting to each item above on behalf of NPIs participating in MIPS as individuals and not as a group (GPRO) you must provide written, signed consent by each NPI confirming agreement to the above and authorizing the selection and transfer of performance data to CMS. Documentation may be uploaded in the Attestation section below.

Physician Group TIN: 232323232 GPRO NonGPRO

Physician Group TIN: 676767676 GPRO NonGPRO

Physician Group TIN: 787878787 GPRO NonGPRO

Attestation

- Users must complete attestation to confirm that they have permission to submit MIPS data on behalf of a group or individual physicians.
- GPRO submitters only need to complete the online attestation; non-GPRO (individual) submitters must upload a document signed by each physician whose NPI is included in your submission.

Selecting Quality Measures


- All available measures will be displayed below, with an estimated score based on measure performance/benchmark status.
- GPRO facilities will select measures for the entire group; non-GPRO will select measures by NPI.
- “Submit to CMS” will submit your selections directly to CMS. “View Score” will display the CMS score report.

The screenshot shows the 'Select Quality Measures' interface. At the top, there is a navigation bar with a minus sign, the text 'Select Quality Measures', and two icons: 'GPRO' and 'NON-GPRO'. Below this is the section 'Facility - TIN/Measure Selection'. Under 'Resources:', there are two links: 'Quality Performance Category Requirements' and 'MIPS Quality Performance Scoring'. A red note states: 'Note: changes made on your selections will be reflected on the Performance Report page on the following day.' Below the note is a table with three rows, each representing a Physician Group. The first two columns of each row are highlighted with a red box. The first column contains a plus sign icon and the text 'Physician Group TIN : [TIN]'. The second column contains the text '(GPRO)' and a green icon. The third column contains two buttons: 'Submit to CMS' and 'View Score', which are also highlighted with a red box. The fourth column contains the text 'Last Submitted to CMS on [Date] [Time]'. The table is partially obscured by a dark grey bar at the bottom.

Physician Group TIN	Group Type	Actions	Last Submitted to CMS
232323232	(GPRO)	Submit to CMS, View Score	Jan 11 2019 9:14AM
676767676	(GPRO)	Submit to CMS, View Score	Jan 11 2019 9:10AM
787878787	(GPRO)	Submit to CMS, View Score	Jan 16 2019 2:39AM

Selecting Quality Measures

- To select a measure reporting:
 - Check the “I am selecting this measure...” box.
 - Indicate your completeness by entering your total exam volume OR marking that you’ve submitted 100% of relevant exams.
 - Click the “Save” button.

Measure # 76	You have submitted 114 Exams to NRDR for year 2018	<input checked="" type="checkbox"/> I am selecting this measure for MIPS reporting. <input checked="" type="checkbox"/> I am submitting 100% of exams relevant to this measure for 2018. OR Enter the total number of exams relevant to this measure that you performed in 2018. <input type="text"/> <input type="checkbox"/> End to End Reporting All facilities under this TIN must be submitting data for this measure via certified EHR technology without any manual interference	Performance rate:100.00 % Decile 10  CMS Benchmark: Decile 3: 91.85 - 96.14 Decile 4: 96.15 - 98.88 Decile 5: 98.89 - 99.99 Decile 10: 100.00	Completeness 100.00 %
		Your selection was last saved on 2/13/2019 10:33:22 AM <input type="button" value="Save"/>		

Selecting Improvement Activities

- “Review Improvement Activities” button will allow you to edit selections.
- GPRO facilities will select IAs for the entire group; non-GPRO will select measures by NPI.
- “Submit to CMS” will submit your selections directly to CMS. “View Score” will display the CMS score report.

- Improvement Activities

Instructions

- Select your TIN below to begin adding Improvement Activities.
- TINs which are registered as GPRO (Group Practice Reporting Option) will select activities for the entire group, while TINs reporting as individuals will have the option to apply activities to all physicians or select activities for each individual physician.
- **Resource:**
 - [2018 IA Measures Supported](#)
 - [IA Performance Category Requirements](#)

+ Physician Group TIN : 232323232 (GPRO) Last Submitted to CMS on

+ Physician Group TIN : 676767676 (GPRO)

+ Physician Group TIN : 787878787 (GPRO)

Selecting Improvement Activities

TIN: 1 selected

Physician: 1 selected

CMS Year: 2018

Selected TIN 67676766 (GPRO)

Save

Go Back

Selected Physician:
Charles Bowkley

Show All Activities

Clear All

Total Activities meeting criteria : 113

Add All Activities

IA_AHE_1: Engagement of new Medicaid patients and follow-up

Start Date 01/01/2018 End Date 04/01/2018

Remove

Read More...

IA_AHE_2: Leveraging a QCDR to standardize processes for screening

Start Date 01/01/2018 End Date 04/01/2018

Remove

Read More...

IA_AHE_3: Leveraging a QCDR to promote use of patient-reported outcome tools

Start Date End Date

Add

Read More...

Selected Activities

2 Activities Added

Clear All

IA_AHE_1: Engagement of new Medicaid patients and follow-up

IA_AHE_2: Leveraging a QCDR to standardize processes for screening

Filter by:

Activity

- IA_AHE: Achieving Health Equity
- IA_BMH: Behavioral and Mental Health
- IA_BE: Beneficiary Engagement
- IA_CC: Care Coordination
- IA_EPA: Expanded Practice Access
- IA_PSPA: Patient Safety &

Promoting Interoperability

- Originally called “Advancing Care Information” and requires measures to be submitted using CEHRT (Certified Electronic Health Record Technology).
- Requires attestation before selecting measures.
- Most radiologists will be exempt from this category; do not attest unless you intend to submit Promoting Interoperability measures.
- P.I. measure selection is similar to Improvement Activities selection.

CMS Score Report

Score Details

Note: All the data is received from CMS

TIN : 232323232

Category : QM

CMSYear : 2018

Total TIN Score (QM, IA, PI): 27.5000

Original Score: 25.0000 (Unweighted Score)

Contribution Score: 12.5000 (Weighted Score)

Max Contribution : 50.0000

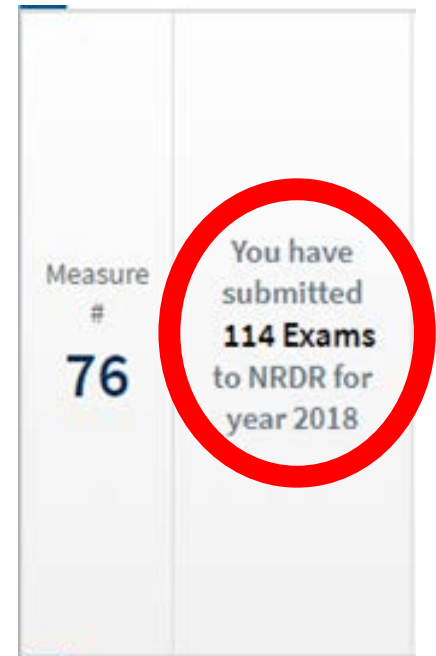
QM Weight : Scoring based on weight of 50%.

Detail : Picked the highest scoring measurement set registry

Measure Name	Measurement Score Value	Processing Status	Total Bonus Points	Measurement Picker	Feedback - Quality	End To End Bonus	Outcome Or Patient Experience Bonus	High Priority Bonus	Decile Score	Decile
023	3.0000	PICKED	0.0000	Picked at 1	Focus on improving measure 023	0.0000	0.0000	0.0000	3.0000	NA
012	3.0000	PICKED	0.0000	Picked at 2	Focus on improving measure 012	0.0000	0.0000	0.0000	3.0000	NA
145	3.0000	PICKED	0.0000	Picked at 3	Focus on improving measure 145	0.0000	0.0000	0.0000	3.0000	NA
146	3.0000	PICKED	0.0000	Picked at 4	Not Available	0.0000	0.0000	0.0000	3.0000	NA
225	3.0000	PICKED	0.0000	Picked at 5	Not Available	0.0000	0.0000	0.0000	3.0000	NA

Reminder: Check Your Data

- Make sure to review your data in the performance report and the exam count on your CMS Submission tab before submitting to CMS.
- Discrepancies between your records and the numbers in your overall exam count may be related to several factors, including:
 - TIN/NPIs/registries not correctly linked under Manage Physicians in the NRDR portal
 - Cases submitted without MIPS numerators
 - NPI data missing from NRDR submissions
- If you encounter any data discrepancies, please open a ticket with nrdrsupport@acr.org so we can investigate.



Final 2018 QCDR Webinar

□ QCDR Support Office Hours

Thursday, March 14, 2pm - 3pm ET | [Register »](#)

Review past QCDR webinars at www.acr.org/qcdr

Contact Us

Submit a Ticket

<https://nrdrsupport.acr.org>

Email

nrdrsupport@acr.org

Phone

1-800-227-5463 x3535

