Clinigence

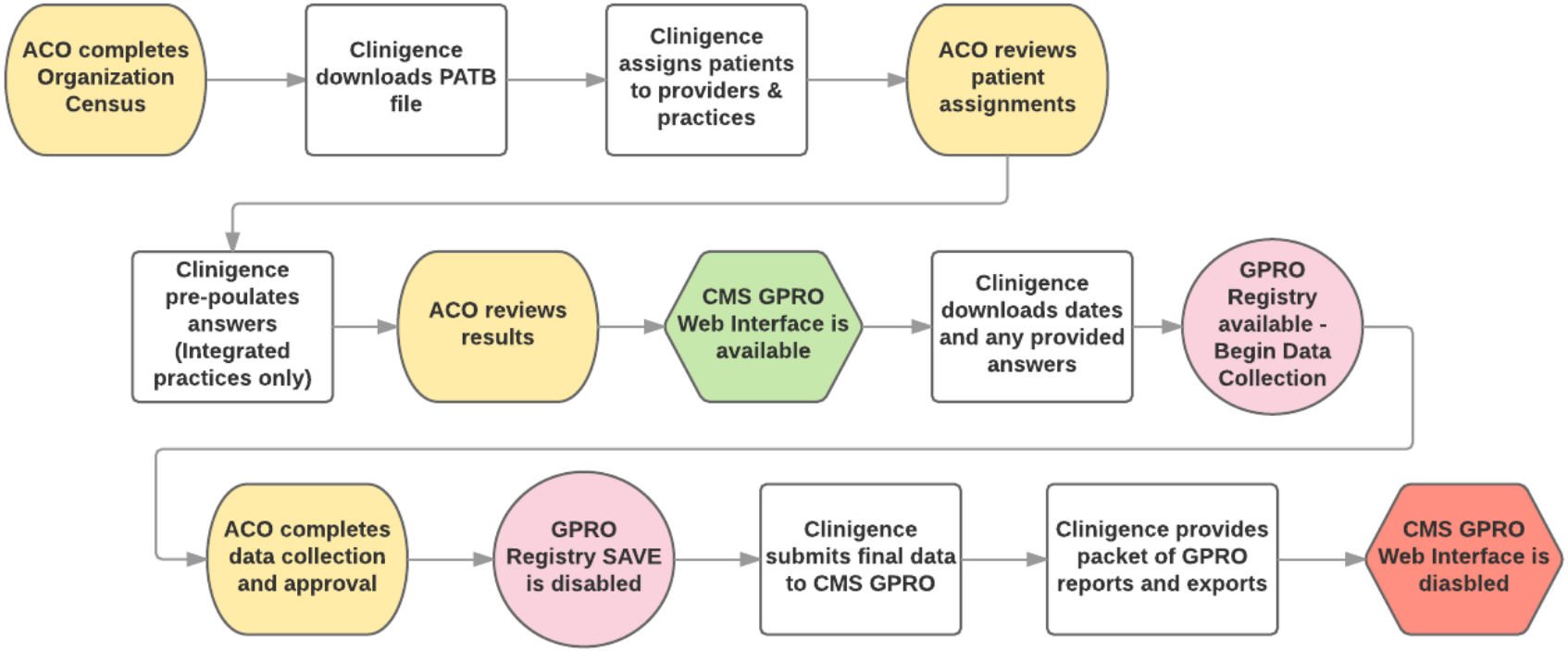
Introduction to Clinigence ACO Registry PY2016

Agenda

- Annual Collection Cycle
- The ACO MSSP Reporting Timeline
- The Clinigence GPRO Registry tool
- Next Steps
- Questions

Annual Collection Cycle The ACO MSSP

Annual Collection Process



The ACO MSSP Reporting Timeline

ACO Reporting Timeline

- **December 1 – 16, 2016**
  - ACO completes the organization census of providers, practices, TINs and NPIs.
  - ACO and Clinigence establish the IACS PQRS Submitter role and the GPRO ACO Submission role.
- **December 2, 2016 – January 7, 2017**
  - Test and training version of the Clinigence GPRO Registry is available
- **January 3 – 6, 2017**
  - Patient ranking (PATB sample) files are available to the ACO for download via the MFT Interface and the CMS GPRO Web Interface.
  - Clinigence will retrieve the PATB from the CMS GPRO Web Interface.

ACO Reporting Timeline

- **January 5 - January 17**
  - Clinigence loads the PATB into the Clinigence GPRO Registry.
  - Clinigence assigns beneficiaries to practices and providers using the PATB data, the ACO-provided organization census, and for integrated practices - clinical data.
  - Integrated practices only: Clinigence pre-populates the responses in the registry using the extracted EMR data or other pre-approved data feeds.
  - ACOs train the registry users and set up user credentials.
- **January 17, 2017**
  - CMS GPRO Web Interface becomes available.
  - Clinigence will pull the pre-populated claims data (discharge dates and influenza Y/N response) and load them into the Clinigence GPRO Registry.

ACO Reporting Timeline

- **January 17 – 30, 2017**
  - Clinigence GPRO Registry becomes available. Availability will vary by ACO based on data load timelines.
  - You will be notified when the GPRO Registry is available for your organization.

ACO Reporting Timeline

- **January 17/30 – March 1, 2017**
  - ACO's use the Clinigence GPRO Registry to collect and approve their data.
  - If there are problems during the collection phase, submit your issues at support.clinigence.com or via email to support@clinigence.com.

***NOTE**: If the issue pertains to a specific patient you **must** go to the support site to enter patient information. Email is not HIPAA-compliant. Please identify the patient using the Clinigence Patient ID, not the HICNO.*

ACO Reporting Timeline

- **March 1 – 17, 2017**
  - Clinigence uses the data in the Registry and the claims-based data to submit to CMS.
  - We provide submission reports and performance reports.
  - ACO's have this period to correct any errors they may notice.
  - Once completed, Clinigence does the final submission and disables the Save feature in the Registry. We can submit as many times as needed, but only the final submission is used.

ACO Reporting Timeline

- **March 17, 2017 at 8 pm ET**
  - All data must be submitted in CMS GPRO Web Interface.
- **March 24 – April 1, 2017**
  - Clinigence exports all data and reports from CMS GPRO Web Interface for future reference.
  - Clinigence generates and delivers submission packets
- **April 21, 2017**
  - CMS GPRO Web Interface access is disabled April 21, 2017.

Organizational Census

- Each ACO must complete an organizational census so that we can assign the sample patients to the appropriate provider and practice.
- The census includes:
  - The list of all practices within the ACO
  - The TIN for each practice
  - The list of providers for each practice
  - The NPI for each provider

Beneficiary Sample Patient File (PATB)

- Starting Jan. 3, 2017, CMS makes available to each ACO a list of patients to be used for reporting for each measure. These are the "Sample Patients."
- CMS will provide up to 616 patients for each measure.
- CMS tries to identify and use patients who qualify for multiple clinical domains (measures) and "ranks" them. A rank of 0 means the ACO does not need to report for this patient for this measure.
- Other than indicating that the patient is to be reported, the non-zero value of the ranking has no meaning in the Clinigence application.
- CMS requires the ACO to report for 248 *consecutively ranked* beneficiaries. Clinigence recommends that you report on them all!

What is a Consecutively Completed Beneficiary?

- "**Consecutively Completed**" means that:
  - Data has been entered for patients, in order, by rank
  - Confirmed Medical Record Found
  - Confirmed the patient's eligibility for the sample
  - Confirmed the patient's eligibility for the module/measure in which they are ranked
  - Provided all the information required in the GPRO Web Interface.
- "**Skipping**" you can skip a patient for any of the following reasons:
  - a) the medical record was not found;
  - b) the patient is not eligible for the sample for one of the following reasons: – Patient died, is in hospice, a non-US resident, or HMO-enrolled;
  - c) the patient is not eligible for the measure/module in which they are ranked *then an additional patient, on a one to one basis, must be completed.*

What is a Consecutively Completed Beneficiary?

- When you are trying to determine if you have met the 2016 requirement of 248 "consecutively completed" patients, do not count the skipped patients as completed.
- Any skipped patients must be replaced by the next ranked patient.
- In cases where you have a smaller sample size or a large number of skipped patients, it may not be possible to reach the 248 consecutive completed patients threshold. In that case, you must answer the questions (complete or skip) for 100% of the patients in the CMS Sample Patient file for that measure.

Patient-Provider Assignments

- Clinigence loads the PATB sample patient file.
- Based on CMS-provided claims data, each patient is assigned to:
  - **1 practice**: The PATB TIN is matched to that in the organization census. For TINs with more than 1 practice the PATB NPIs are matched against the organizational census NPI to identify the specific practice.
  - **and 1 provider**: The PATB NPIs are matched to those in the organization census.

- If the ACO Administrator finds that a patient should be assigned to a different provider, that change can be performed using the Assignment tab in the GPRO Registry.

Pre-populating Answers

- **If the practice has integrated its EHR with Clinigence** or if the ACO provides alternative data feeds*, then that data is used to prepopulate Registry questions.
- Additionally, CMS provides the answer for the PREV-7 Influenza Immunization.

* Alternate data feeds must be agreed upon with Clinigence in advance of the December time frame.

The Clinigence GPRO Registry tool

The Clingence Registry

- The Clinigence ACO Annual Reporting Registry is used to collect and confirm the answers to the clinical questions CMS asks.
- The tool takes the user through a step-by-step wizard for each clinical domain.
- There are two levels of data access available:
  - Access to all beneficiaries in the ACO
  - Access to only beneficiaries assigned to a single practice
- The Registry is updated every year to reflect the latest CMS requirements.
- Clinigence Registry remains available even after the CMS GPRO Web Interface is shut down.

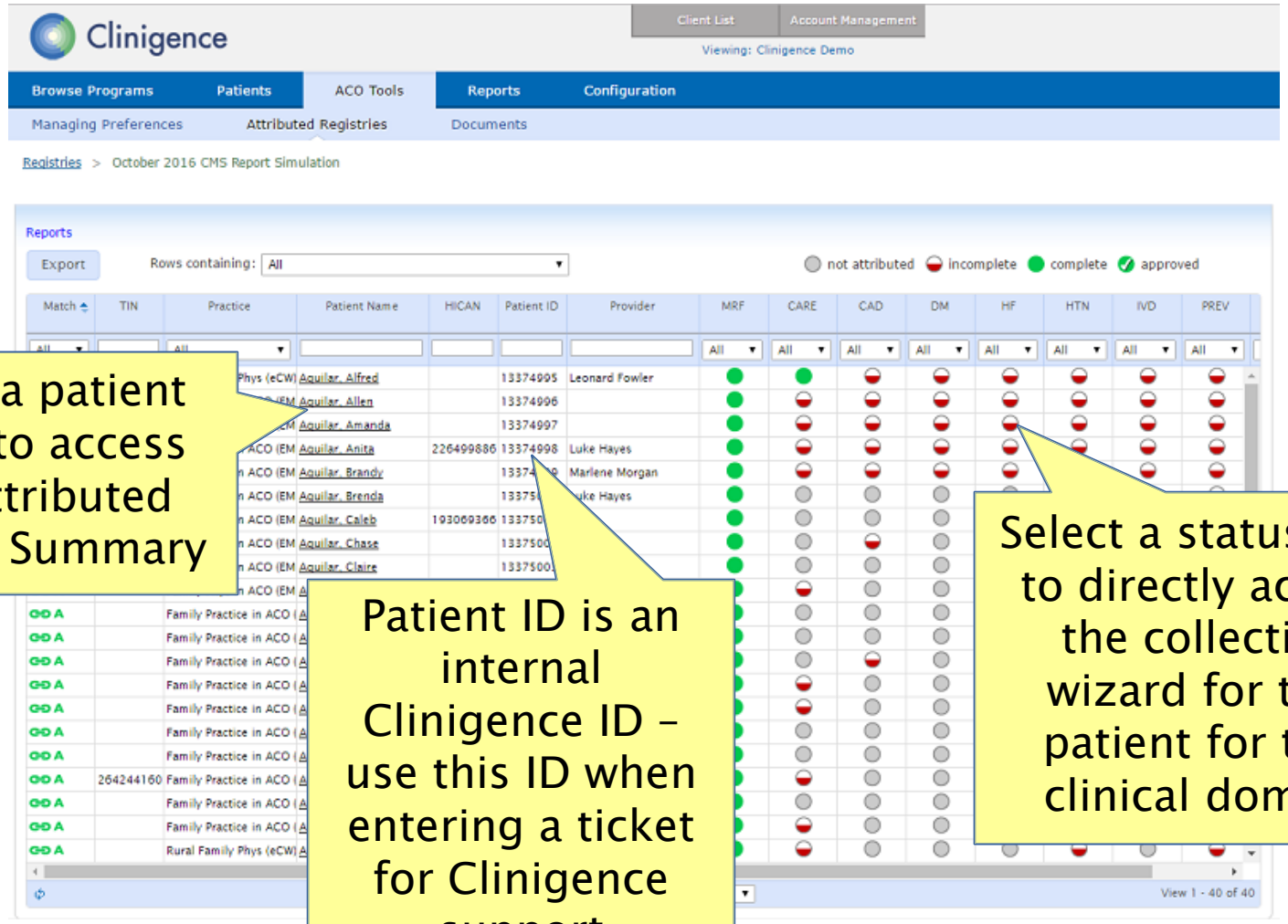
Accessing the Clinigence Registry

1. Login to Clinigence (solution.clinigence.com)
2. Select ACO Tools
3. Select Attributed Registries
4. Select Q1 2016 ACO Reporting to CMS

Setting up Registry Credentials

1. Login to Clinigence (solution.clinigence.com)
2. Select Configuration
3. Select either:
   - Create Administrator Account (All practices)
   - Create Practice Administrator Account (Single Practice)
4. Enter the required information (marked with *).
5. Create a temporary password. (Minimum 8 characters including at least 1 number and 1 special character).
6. Select Create.
   Be sure to let the user know his/her temporary password.

The Clinigence Registry – Front Page

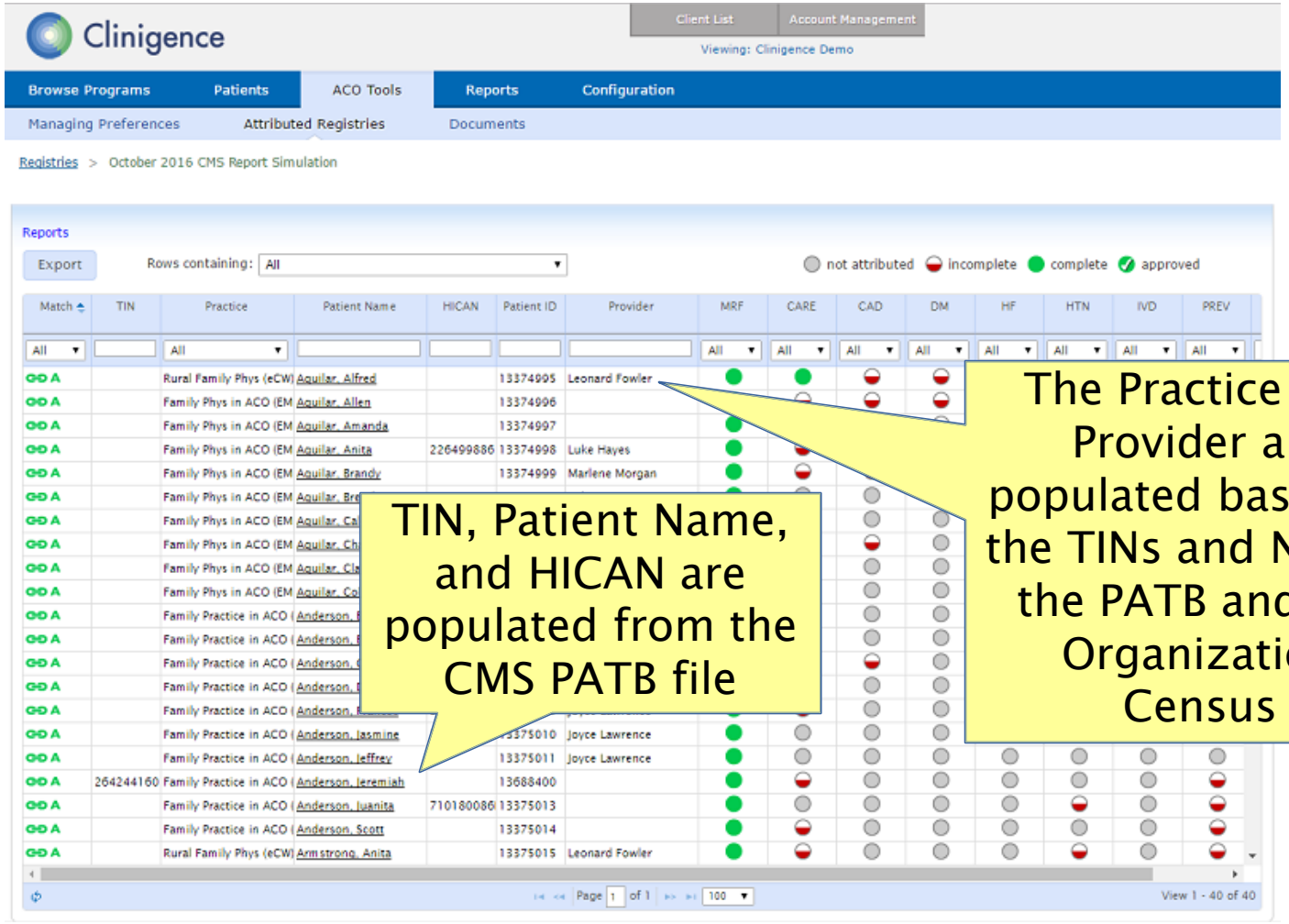


Select a patient name to access the Attributed Groups Summary

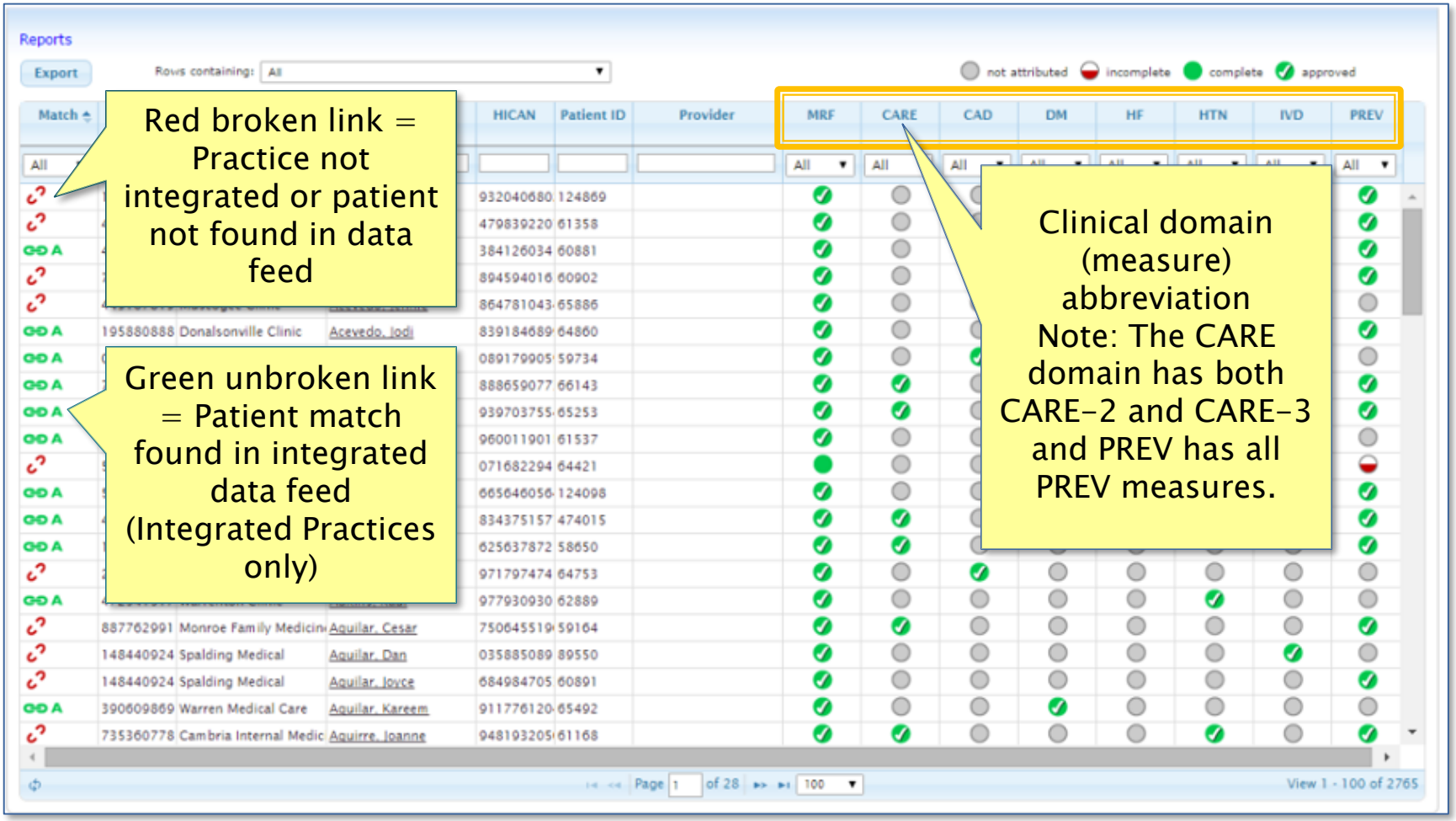
Patient ID is an internal Clinigence ID – use this ID when entering a ticket for Clinigence support

Select a status icon to directly access the collection wizard for that patient for that clinical domain

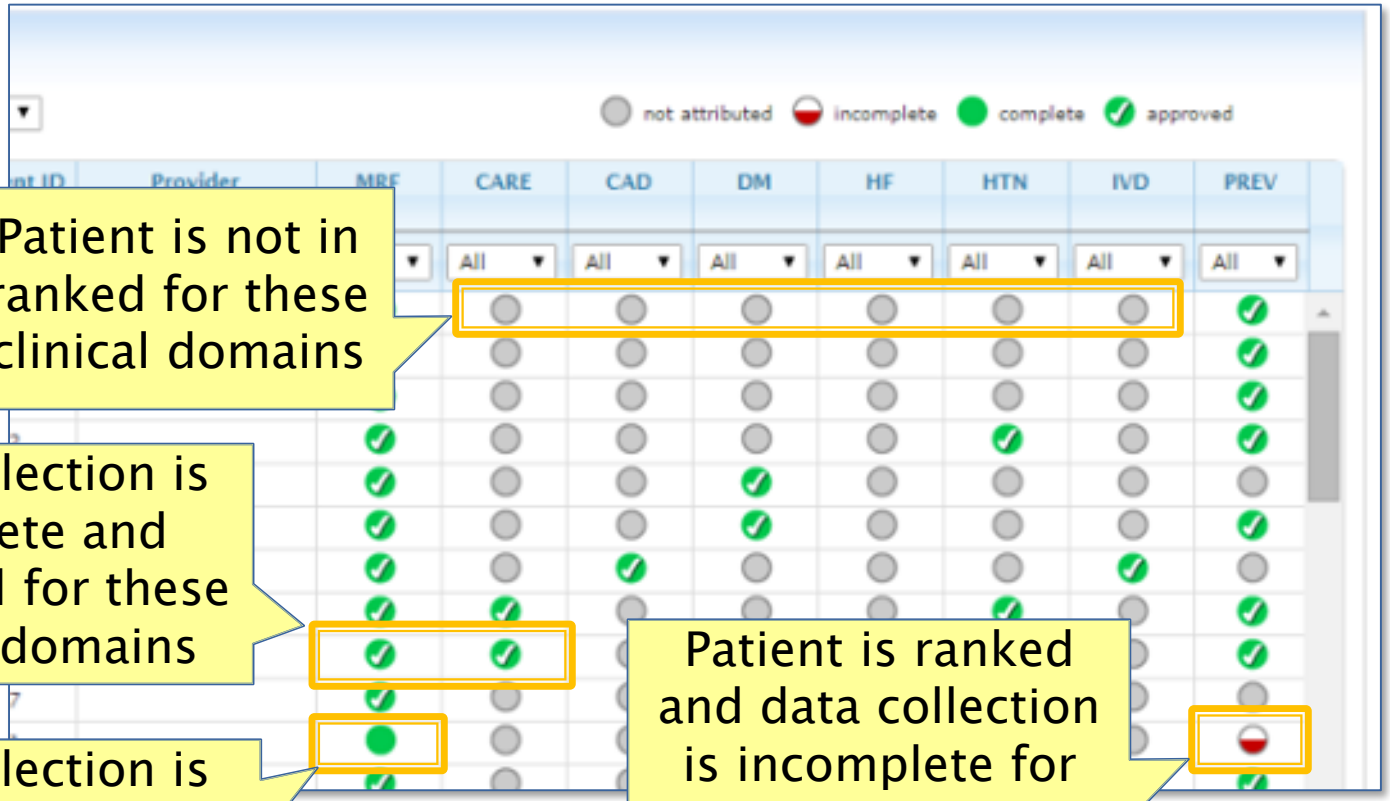
The Clinigence Registry – Front Page



The Clinigence Registry

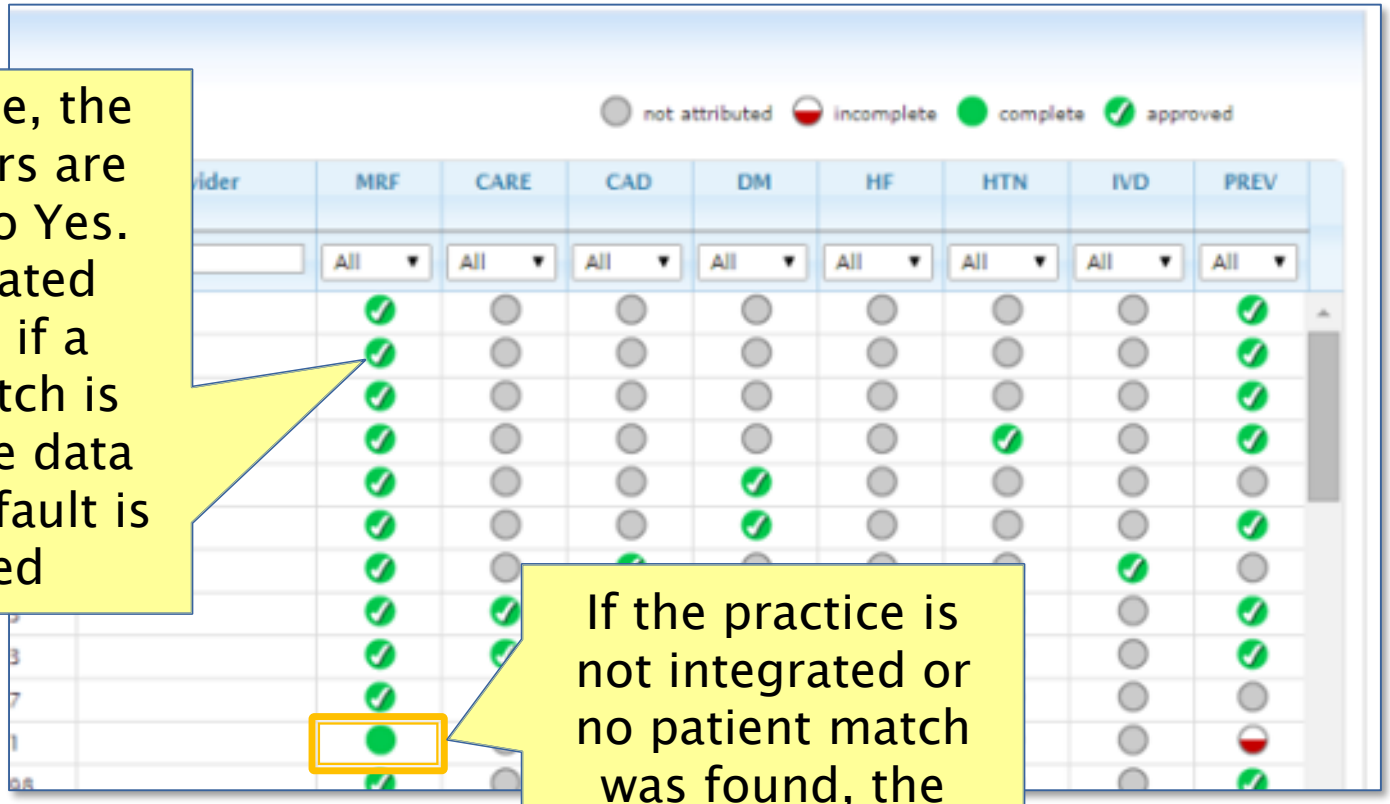


The Clinigence Registry – Status Icons



Medical Record Found

To save time, the MRF answers are defaulted to Yes. For integrated practices, if a patient match is found in the data feed, the default is Approved

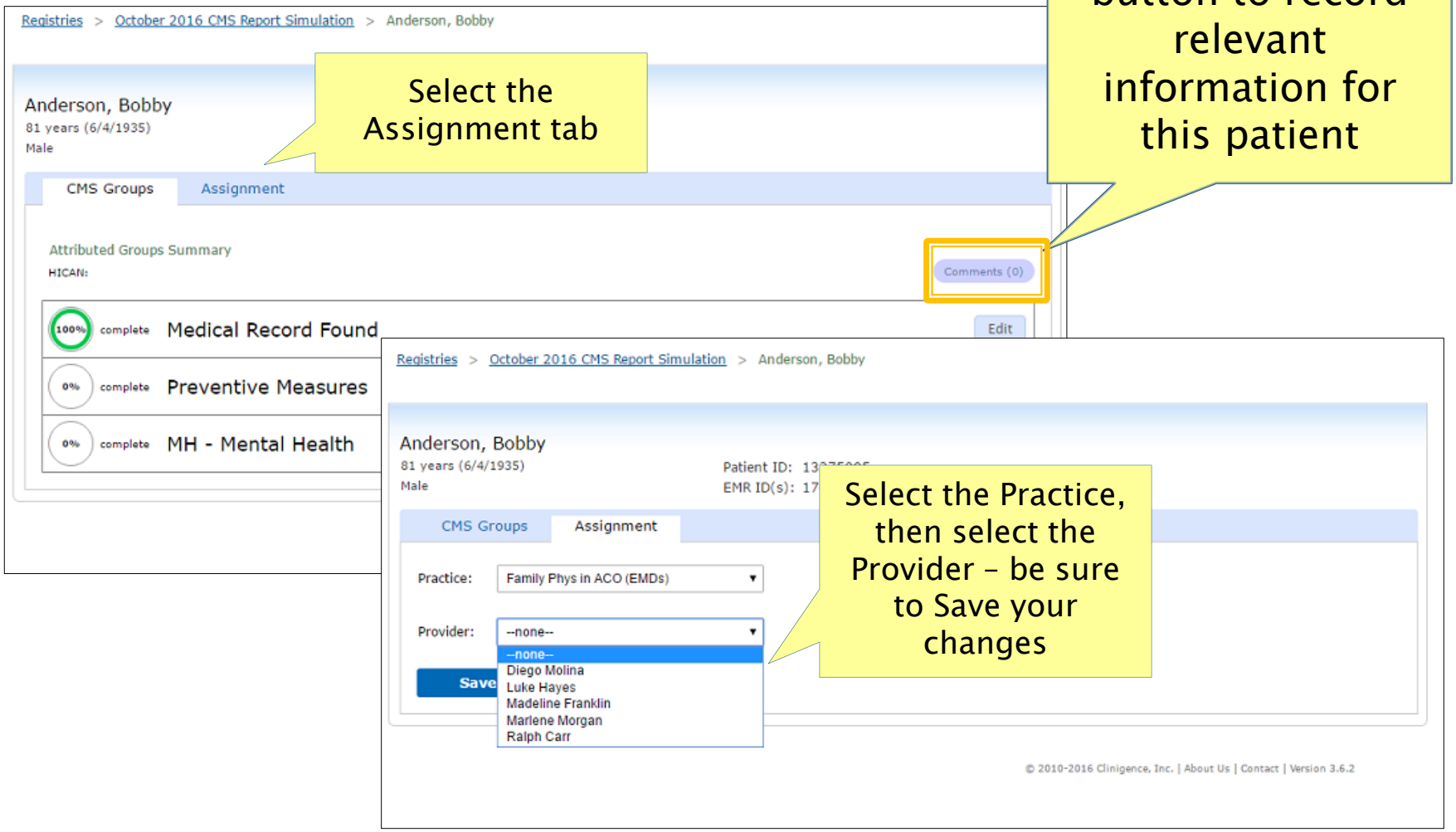


If the practice is not integrated or no patient match was found, the default is Yes, but it still needs to be approved

NEW Feature
Changing Patient-Provider Assignments

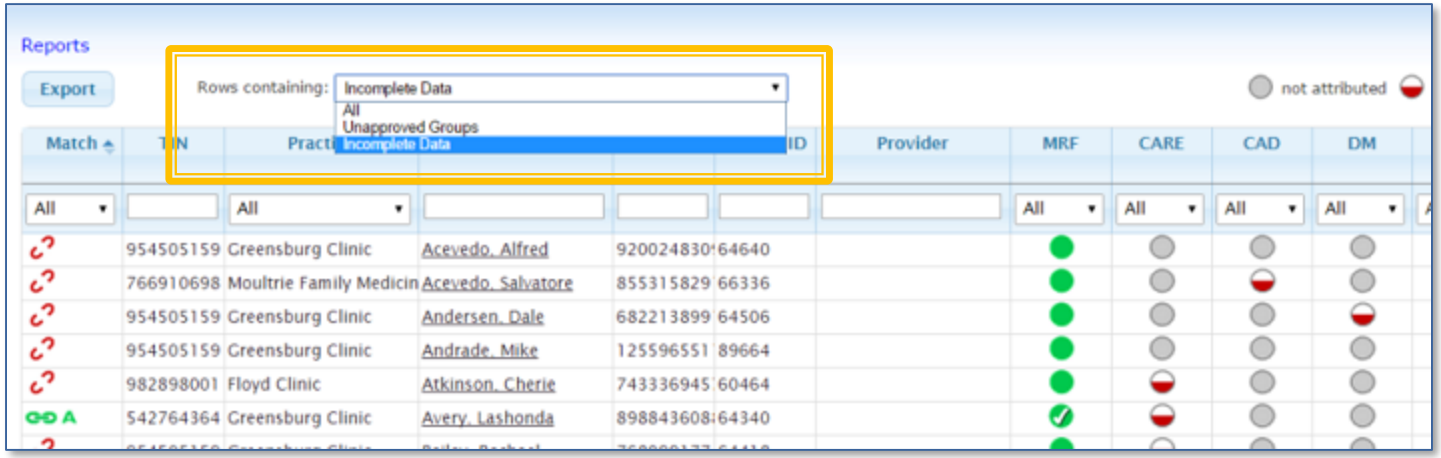
- Clinigence will use the information provided in the PATB file and the Organizational Census to assign patients to the most appropriate provider and practice.
- If the Organization Administrator finds that a patient should be assigned to a different provider, that function is available on the Assignments tab.

Assignment tab



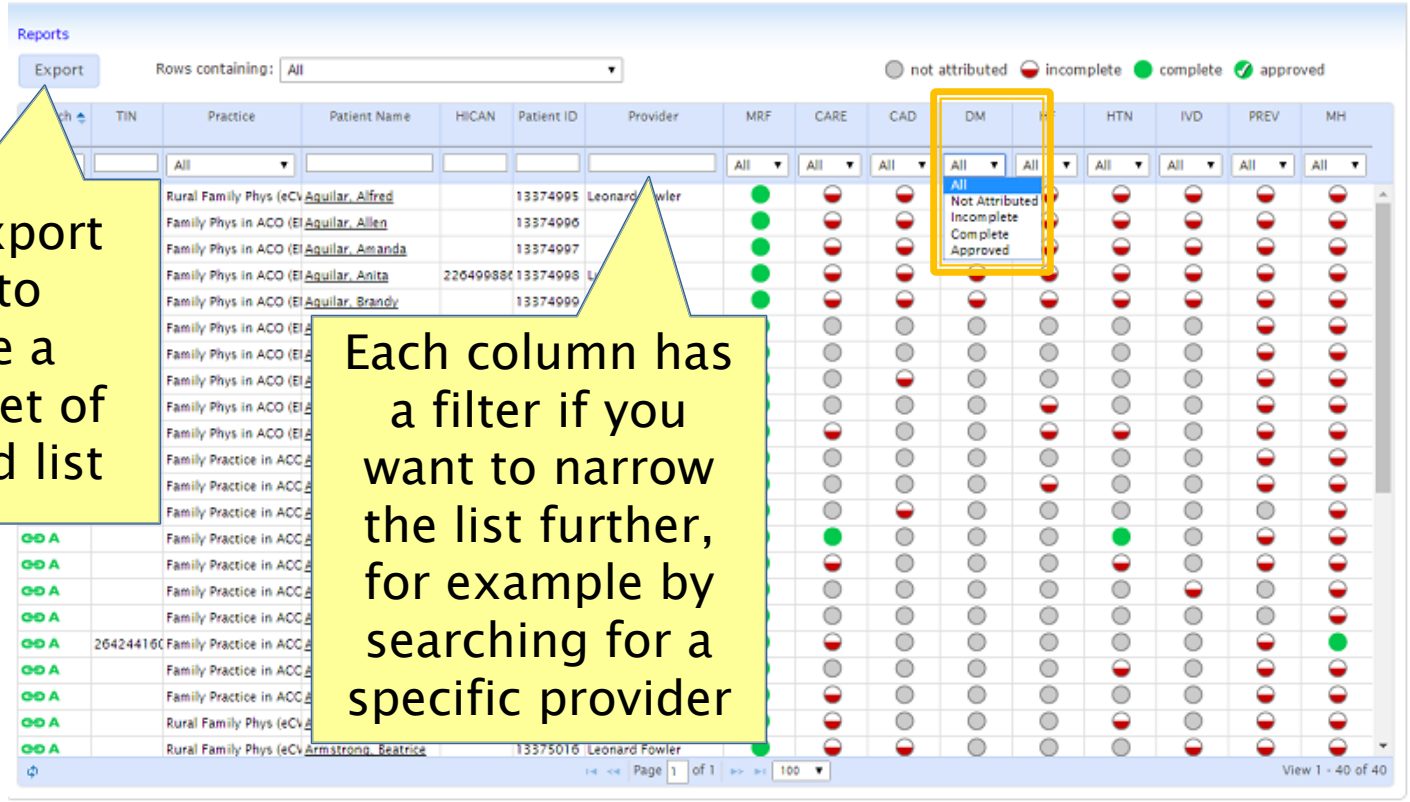
Filtering the Patient List

- Sort the list of patients by those with incomplete data to get started.
- As data collection proceeds you can filter to show only patients with Unapproved data.
- Admin-level users can filter by specific practice, as needed.



Filtering by Clinical Domain

- In addition to sorting the rows, you can filter each clinical domain column.



Use the Export button to generate a spreadsheet of the filtered list

Each column has a filter if you want to narrow the list further, for example by searching for a specific provider

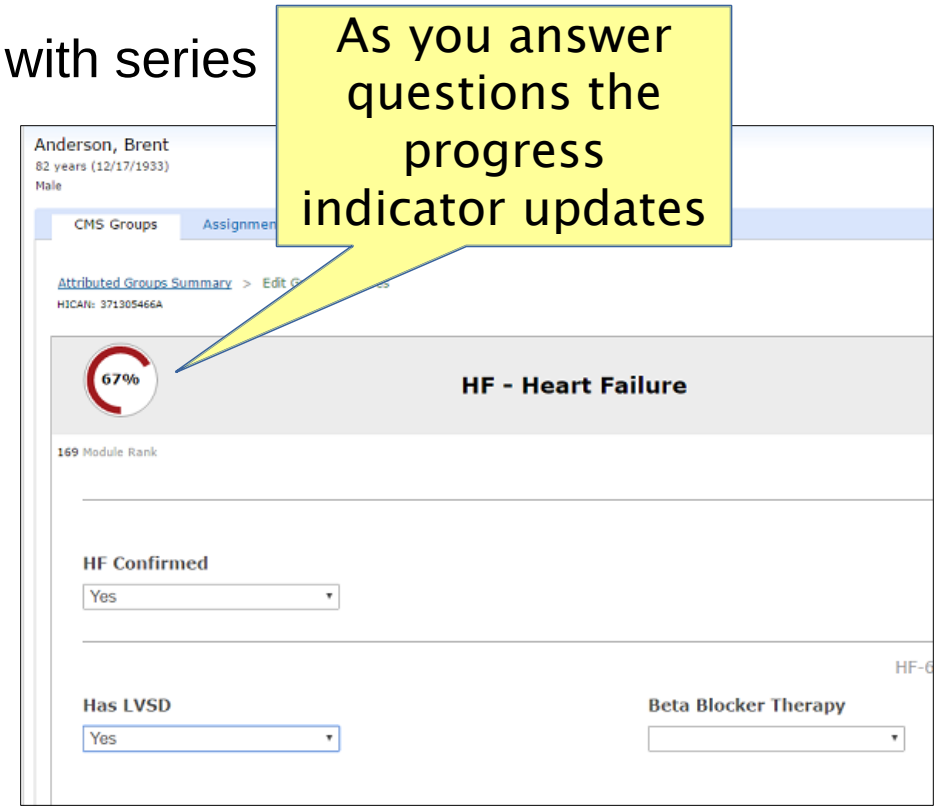
Attributed Groups Summary

- Select the patient name and the Attributed Groups Summary for that patient appears. This shows which clinical domains include the selected patient in the sample and the completeness of the data for each.

Data collection is complete for this clinical domain

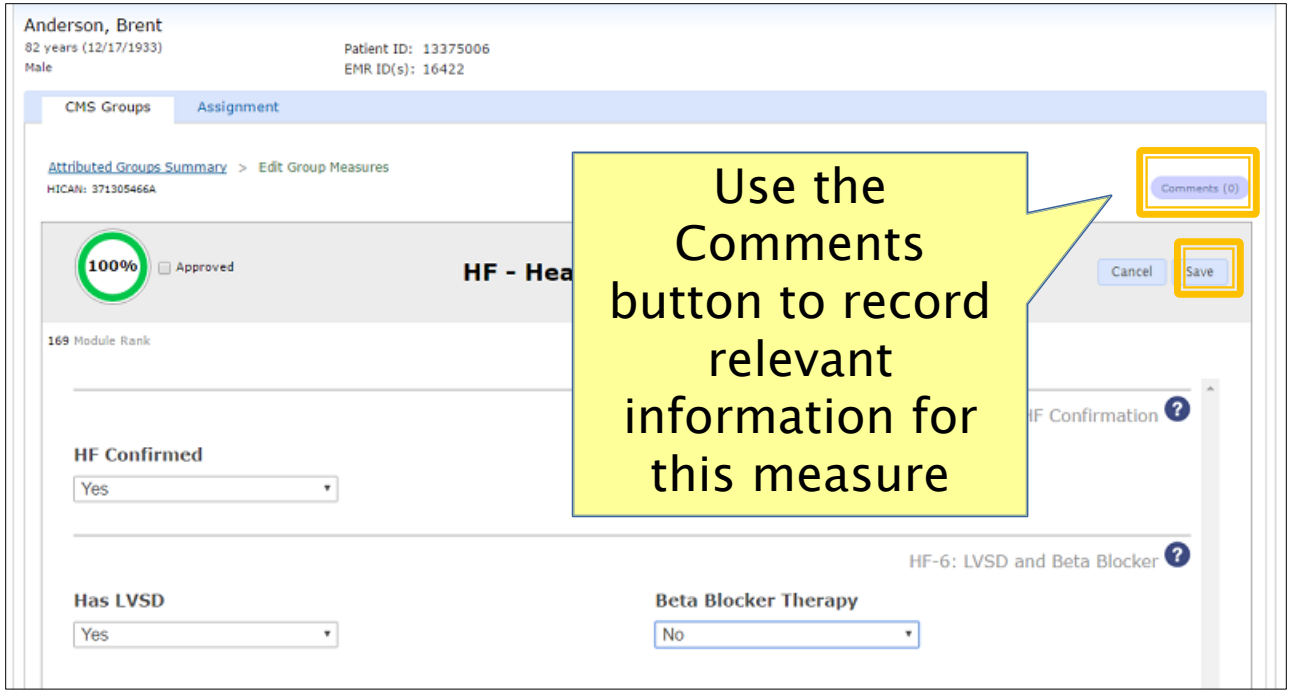
Entering the Data

- Select Edit for the clinical domain you want to update.
- Each measure group has a collection wizard with series of questions with answer drop-downs.
- The number of questions for each clinical domain will depend on the answers you select.



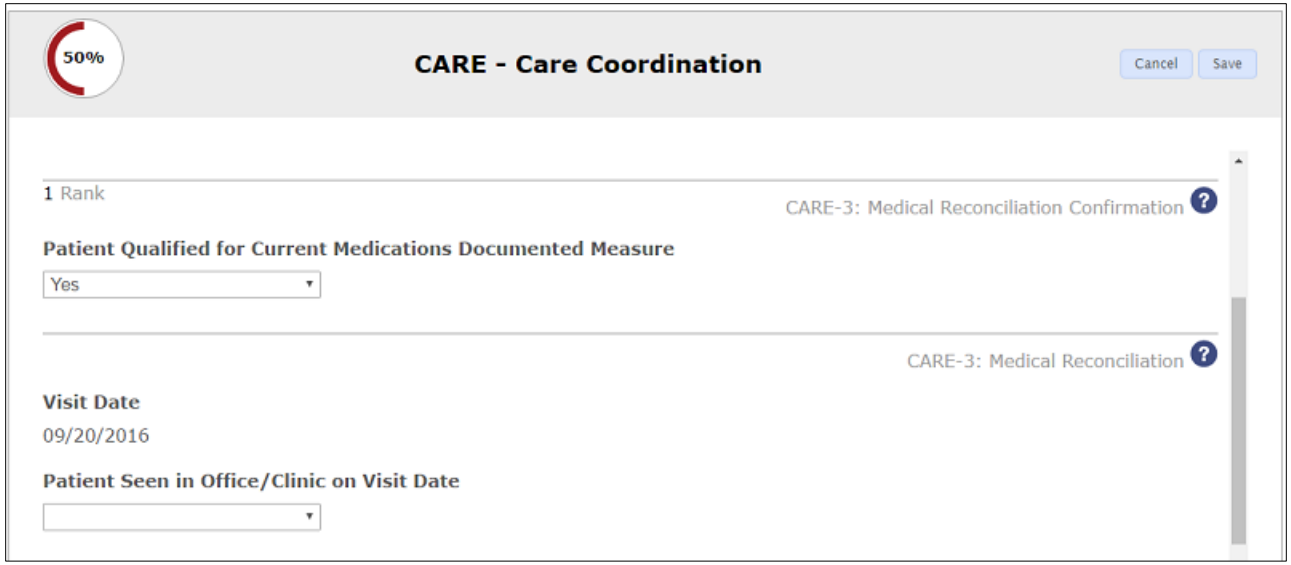
Entering the Data

- When all the questions have been answered for a clinical domain, the progress indicator will show 100%.
- Select Save at any point to save your work.



CARE-3 Visit Dates

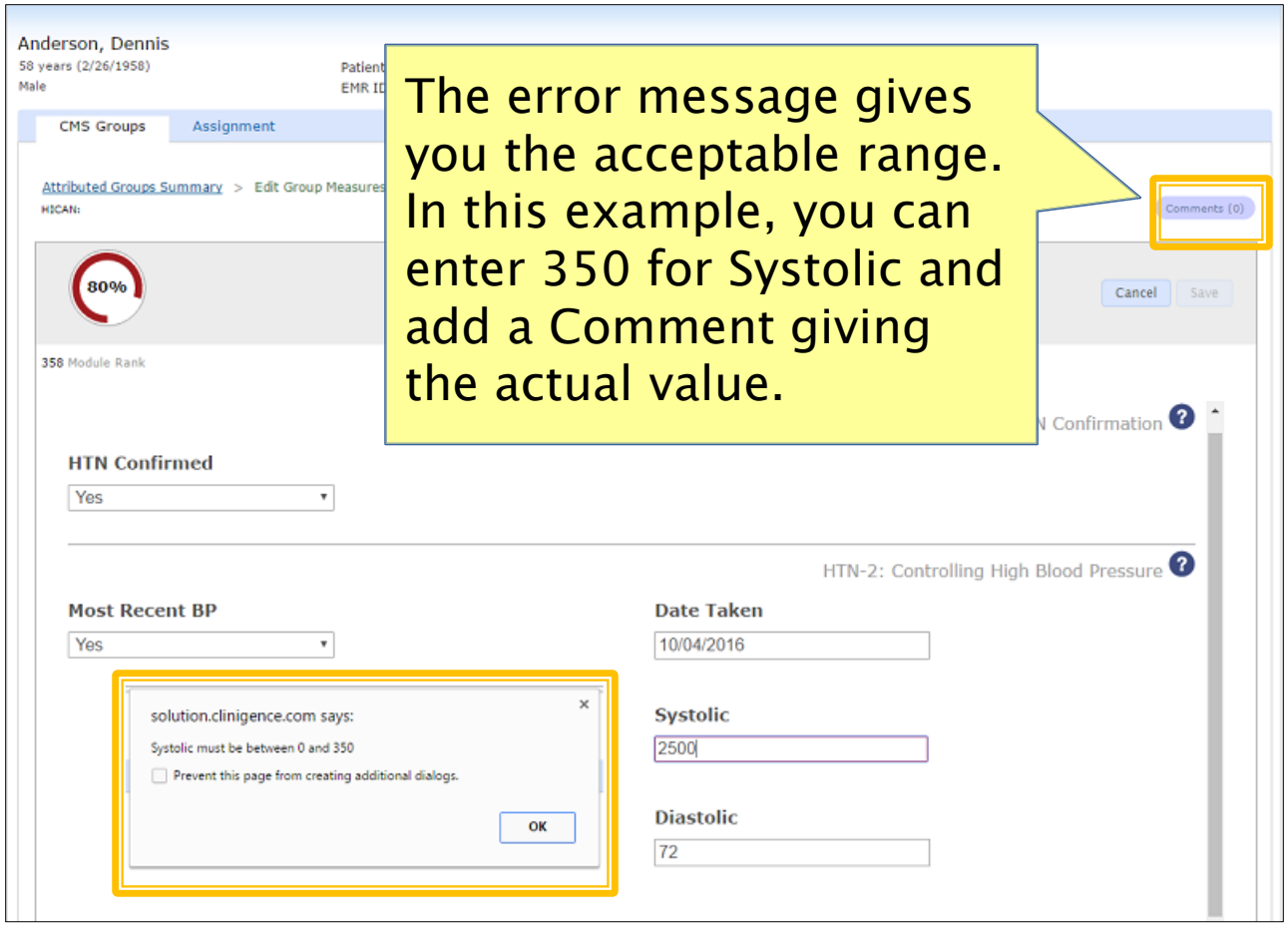
- CMS provides the visit dates for the CARE-3 measure.
- Clinigence downloads this information from the CMS GPRO Web Interface and loads it into the Registry. These dates are not editable.
- Patients can have multiple visit dates for this measure.



Entering Values

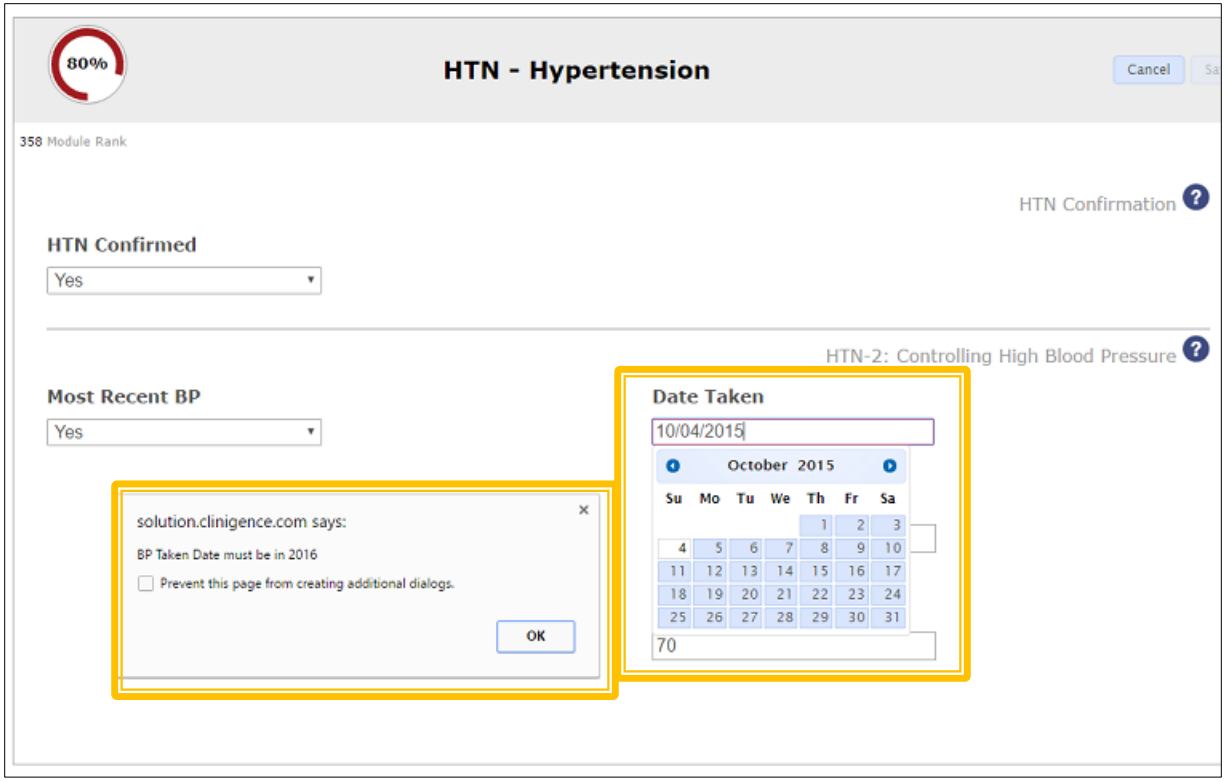
- Certain questions require you to enter values, such as lab results. CMS has provided a range of “valid values” for each item and you will not be able to enter a value that is outside that range.
- For example, CMS has established a range for Systolic blood pressure of 0-350 mm Hg. If the patient’s latest Systolic was 400 mm Hg you will not be able to save the measure with 400 in the Systolic field.

Entering Values



Entering Dates

- Certain clinical domains require you to enter a date or date range for an item. Most items require that the date falls within the measurement period (Jan. 1 through Dec. 31, 2016).
- If you attempt to enter an invalid date, an error message appears.

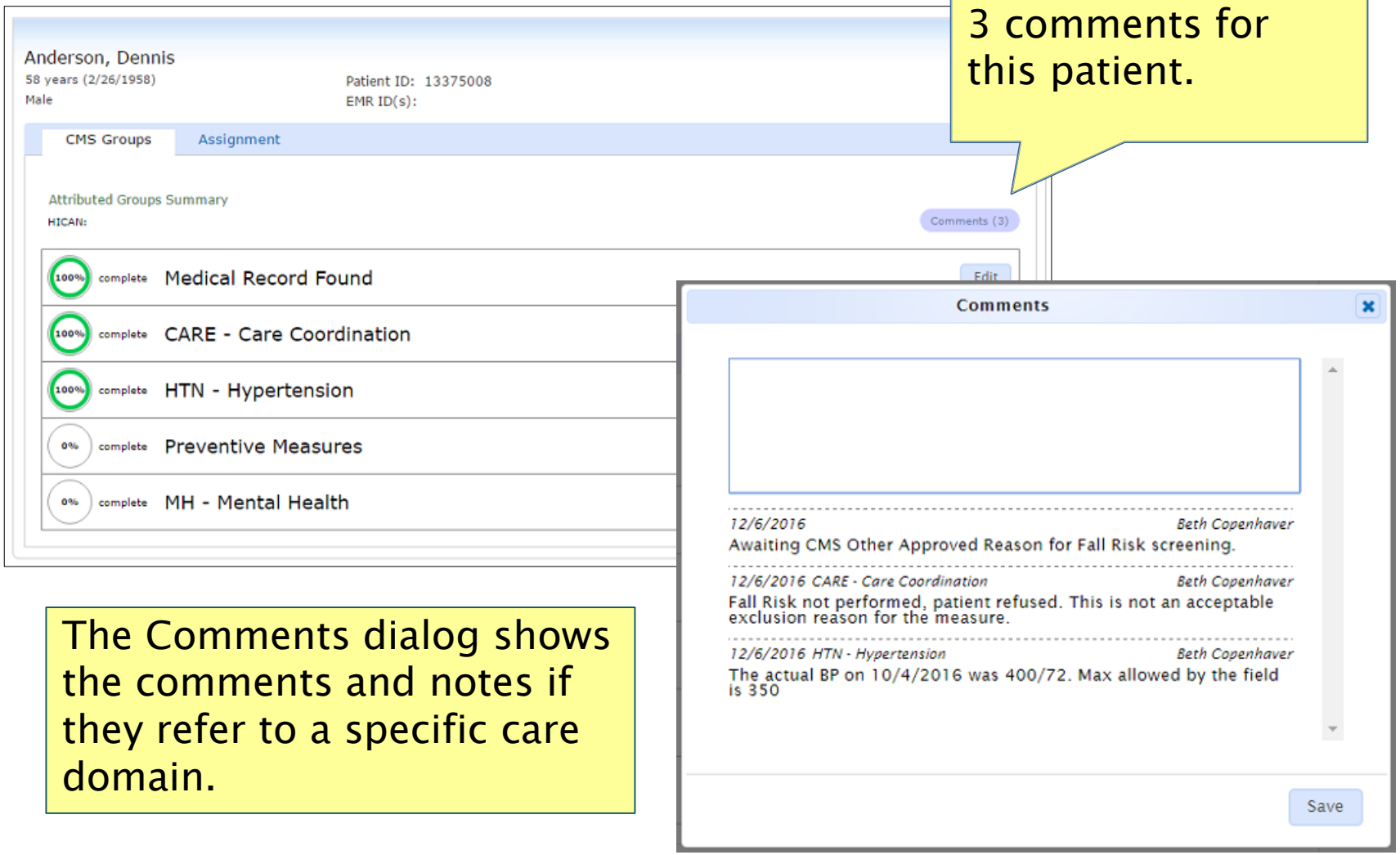


Entering Comments

- You can enter Comments at the patient level and at the measure level.
- Comments are NOT uploaded to the CMS GPRO Web Interface.
- You can generate a report of the Comments for the entire organization or a specific practice.

Comments

There are a total of 3 comments for this patient.



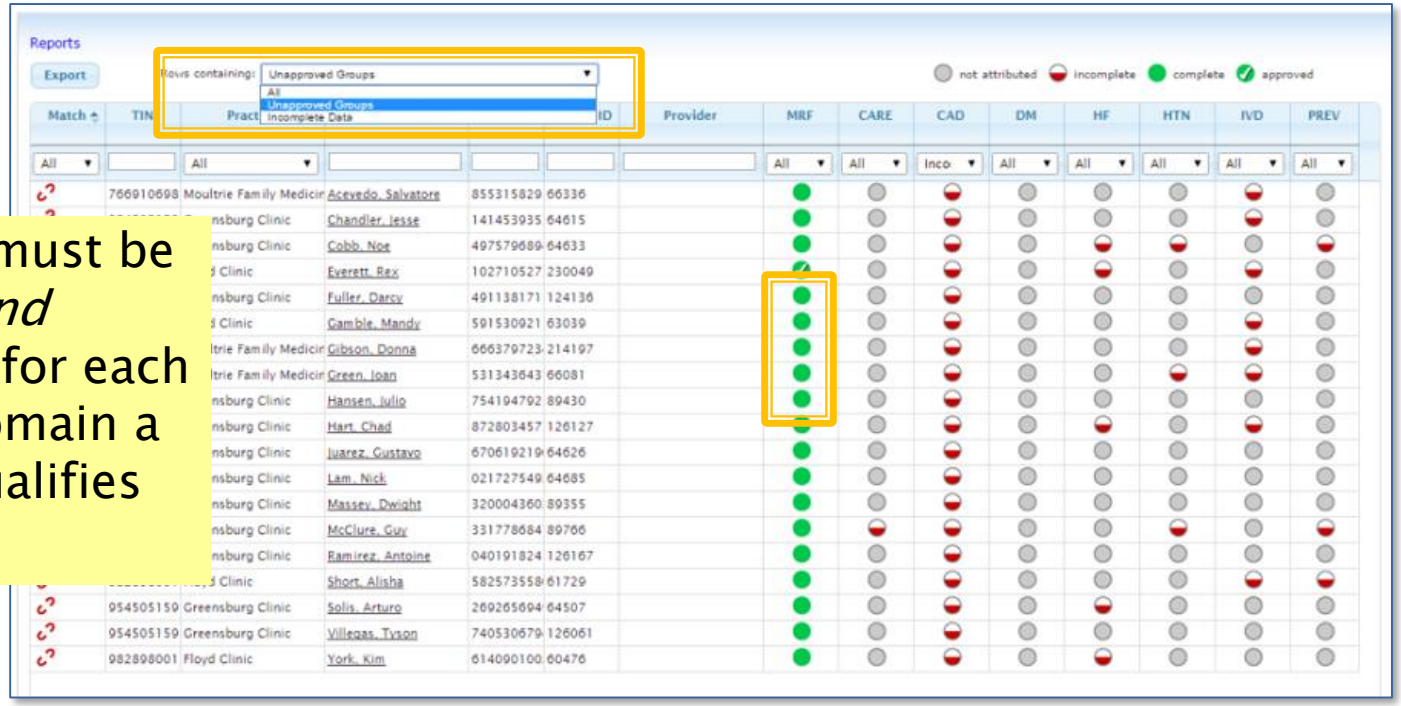
The Comments dialog shows the comments and notes if they refer to a specific care domain.

"Other CMS Approved Reason"

- *This option should only be selected when an approval has been received from CMS in the form of a response to a QualityNet Help Desk inquiry. CMS has requested that a help Desk Ticket # be provided in the Help Desk Ticket # field.*
- If you have created an incident/ticket with QualityNet to have a specific patient excluded for "Other CMS Approved Reason" enter a support ticket with Clinigence at support.clinigence.com so that we can enter that information manually in the GPRO Web Interface.
  You must provide the patient name, HICAN, CMS Incident number, and which measure this reason applies to.

Approving the Data

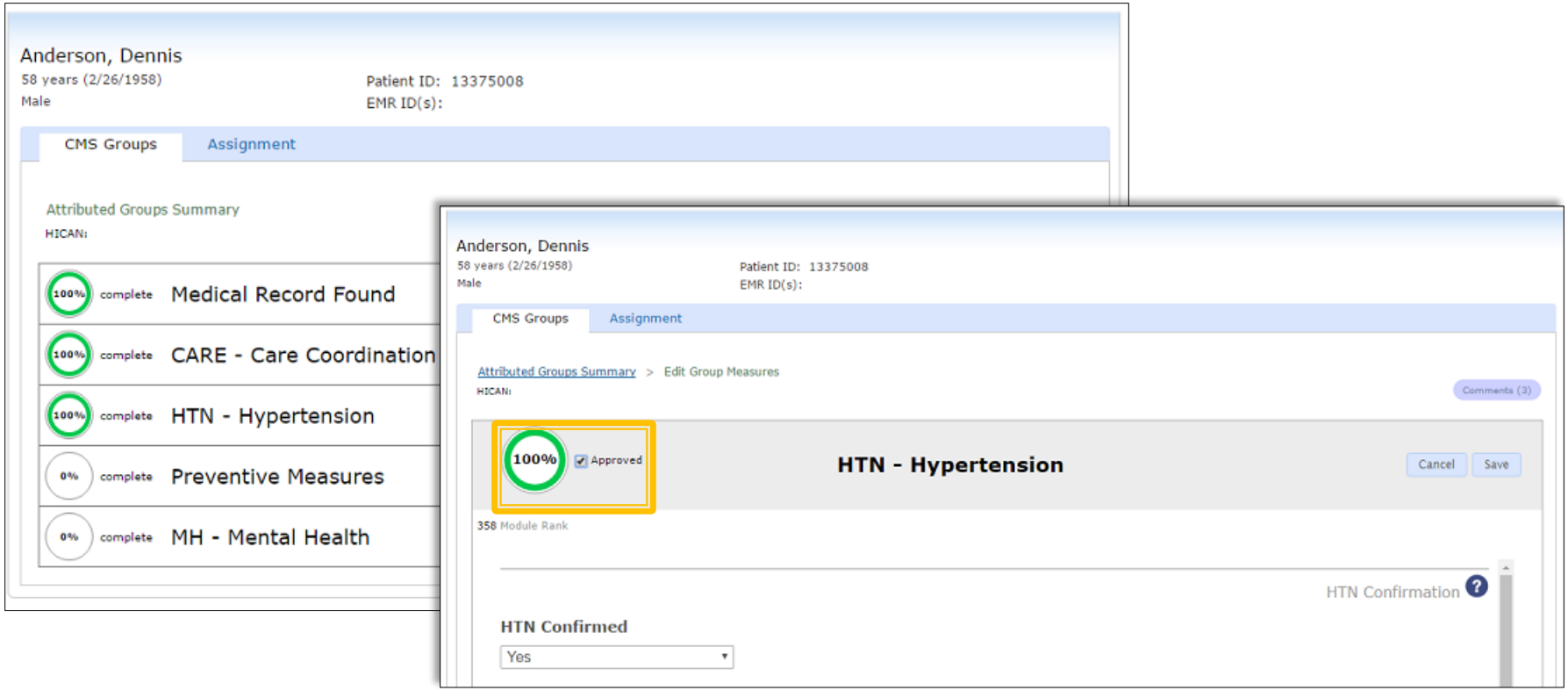
- As data collection progresses, you can sort by Unapproved Groups to quickly find those patients with data awaiting approval.



The data must be entered *and approved* for each clinical domain a patient qualifies for.

Approving the Data

- Drill down to the patient and clinical domain and select the Approved box for each clinical domain.



Clinigence Registry Reports

- There are 3 reports available in the GPRO Registry:
  - Performance Report - Shows the ACO and practice-level performance scores for each clinical domain
  - Diff (Difference) - For integrated practices, this report shows the pre-populated answer for each question and the current answer which was either populated from CMS or manually entered.
  - Comments Report – A compilation of all comments, this report can be generated for the entire organization or a selected practice.

Performance Report

- To view the Performance Report:

1. Select the Reports link in the upper left of the GPRO Registry screen.
2. Select Performance Report. The report appears.
3. If you had a filter active for a specific practice before selecting Reports, the report will display the scores for the pre-selected practice, otherwise, it will display the scores for the entire ACO.
   If you want to select a specific practice or select a different practice, select it from the dropdown list for Practice.

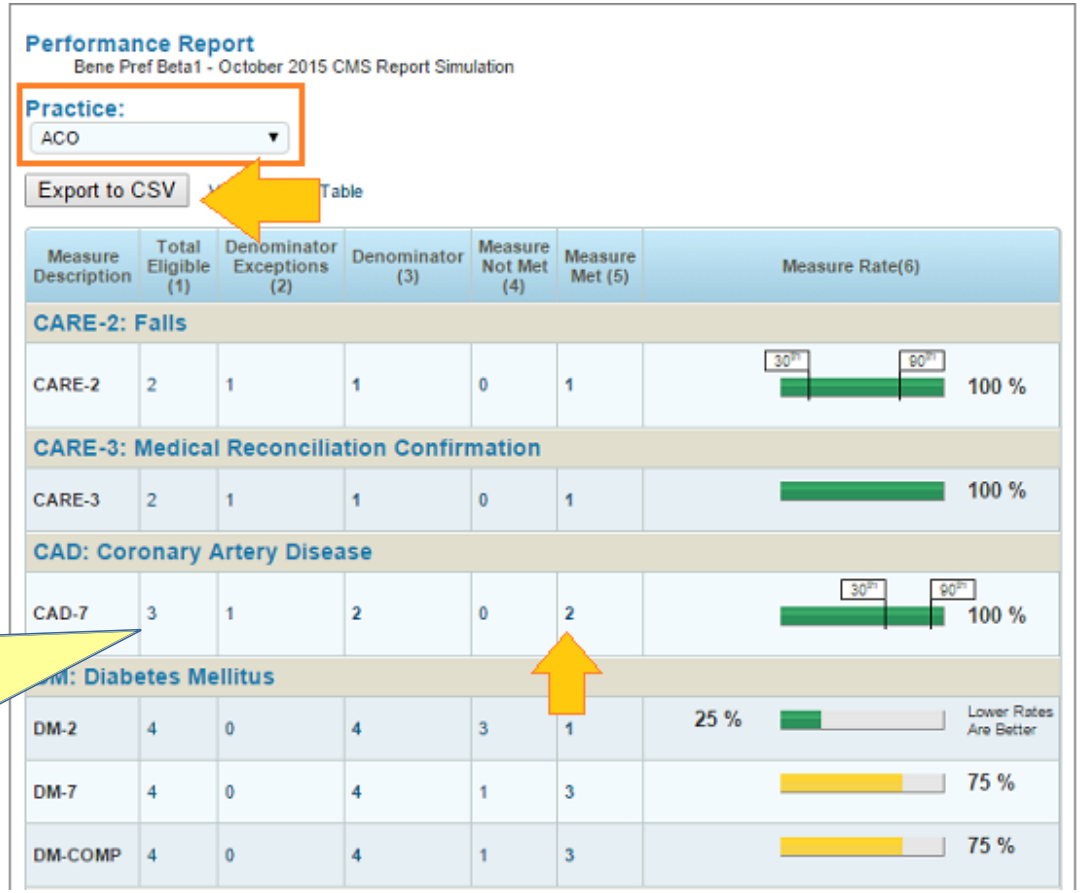
Performance Report

- Shows the number of patients eligible for the measure, those in the denominator, those who did not meet the measure numerator criteria, and those who did meet the numerator criteria.
- The Measure Rate is shown as a percentage and a progress bar.
- You can save the report to a .CSV file for use in a spreadsheet program like Microsoft Excel, by selecting the Export to CSV button.

Performance Report Example

Save the report to a .CSV file for use in a spreadsheet program like Microsoft Excel

Select any of the numbers to view the list of patients included in that count.



Performance Report

Bene Pref Beta1 - October 2015 CMS Report Simulation

Practice: ACO

Export to CSV | Table

Measure Description	Total Eligible (1)	Denominator Exceptions (2)	Denominator (3)	Measure Not Met (4)	Measure Met (5)	Measure Rate(6)
CARE-2: Falls						
CARE-2	2	1	1	0	1	100 %
CARE-3: Medical Reconciliation Confirmation						
CARE-3	2	1	1	0	1	100 %
CAD: Coronary Artery Disease						
CAD-7	3	1	2	0	2	100 %
M: Diabetes Mellitus						
DM-2	4	0	4	3	1	25 % (Lower Rates Are Better)
DM-7	4	0	4	1	3	75 %
DM-COMP	4	0	4	1	3	75 %

Next Steps

You're Done Collecting Data – Now What?

- When the ACO has finished data collection, Clinigence "locks" the Registry, essentially allowing access in read-only mode.
- As a best practice Clinigence recommends targeting completion for 2 weeks prior to the CMS GPRO Web Interface shutdown (shut-down is March 17, 2017). This allows the ACO to identify and react to any unexpected submission results such as low scores and make any corrections.

You're Done Collecting Data – Now What?

- Clinigence performs the final submission to CMS. Based on this final submission Clinigence provides several supporting pieces of documentation including:
  - GPRO performance and submission reports
  - GPRO final submission exports
  - GPRO claims pre-population exports
  - Clinigence performance and diff reports
  - Clinigence XML used for the final GPRO submission

Next Steps

- The steps required to prepare the Registry for collection will vary by ACO.
- The key data sources are:
  - Patient sample (PATB)
  - ACO Organization Census
  - EHR or data feeds for pre-population (optional)
  - GPRO discharge dates and influenza immunization answers
- The Clinigence GPRO Registry should be available for collection January 17 – 30, 2017 through March 1*.

** Clinigence recommends you plan to have all data entered by March 1 to allow for corrections and re-submissions prior to the cut-off on March 17.*

Next Steps

- The ACO Administrator needs to set up credentials for all users who will be involved in the data collection.
- Each ACO schedules a training session for their data collection users. Feel free to use any of the Clinigence GPRO Registry materials on the help desk. ACO MSSP Registry
- Each ACO prepares a plan with daily and/or weekly goals for data collection.

Questions