

Introduction to Clinigence ACO Registry PY2018

Agenda

- The ACO Reporting Timeline
- The Clinigence MSSP Submission Process
- The Clinigence MSSP Registry
- The Collection Process
 - Entering the data
 - Approving the data
- CMS Support Calls
- Next Steps



November 20, 2018 – December 7, 2018

- ACO completes the organization census of providers, practices, TINs and NPIs.
- ACO and Clinigence establish the EIDM Web Interface Submitter roles.

January 7, 2019

 Clinigence downloads the Beneficiary Sample file from the CMS Web Interface.

January 10, 2019

Clinigence MSSP Registry end-user training



January 7 - January 22, 2019

- Clinigence loads the sample list into the Registry.
- Clinigence assigns beneficiaries to practices and providers using the sample list 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 data feeds.
- ACOs train the registry users and set up user credentials.

January 11 – January 22, 2019

Clinigence MSSP Registry becomes available for chart abstraction.
 Clinigence will notify each ACO as their Registry becomes available.

January 22, 2019

 CMS Web Interface becomes available. Clingence Registry users do not need to log in to the CMS Web Interface, but can do so to monitor their progress.



• January 11-22 - March 22, 2019

- ACO's use the Clinigence 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 <u>support@clinigence.com</u>.

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 Patient ID, not the HICNO.



February 1, February 15, March 1, 2019

- Clinigence uses the data in the Registry and the CMS-provided claims-based data to test export and submission to CMS.
- Clinigence provides interim submission reports and performance reports.

March 12, 2019

 Target date for ACOs to complete chart abstractions. This gives us a few days to confirm that all chart abstractions needed are complete and resolve any errors found during submission.

March 12 – 22, 2019

- Clinigence performs 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's have this period to correct any errors they may notice.



March 22, 2019, 8 pm ET

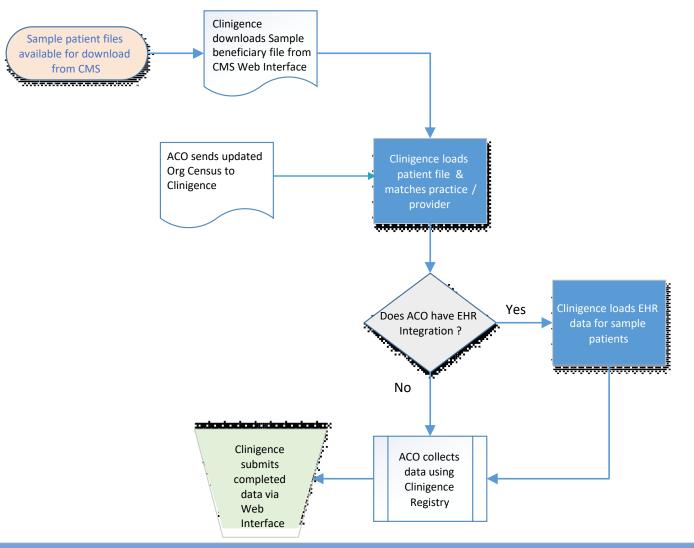
All data must be submitted in the CMS Web Interface.

March 22 - March 31, 2019

- Clinigence exports all data and reports from CMS Web Interface for future reference.
- Clinigence generates and delivers final submission packets.
- CMS Web Interface access is disabled.



The ACO Submission Process



Clinigence

Loading the Patient File/Patient Assignments

- Clinigence loads the Sample Beneficiary file.
- Based on CMS claims data, each patient is assigned to:
 - 1 practice: The sample TIN is matched to that in the organization census. For TINs with more than 1 practice the sample NPIs are matched against the organizational census NPI to identify the specific practice.
 - and 1 provider: The sample NPIs are matched to those in the organization census.
- <u>Optional</u>: If the practice has integrated its EHR with Clinigence or if the ACO provides alternative data feeds, then that clinical data is used to prepopulate the MSSP Registry.



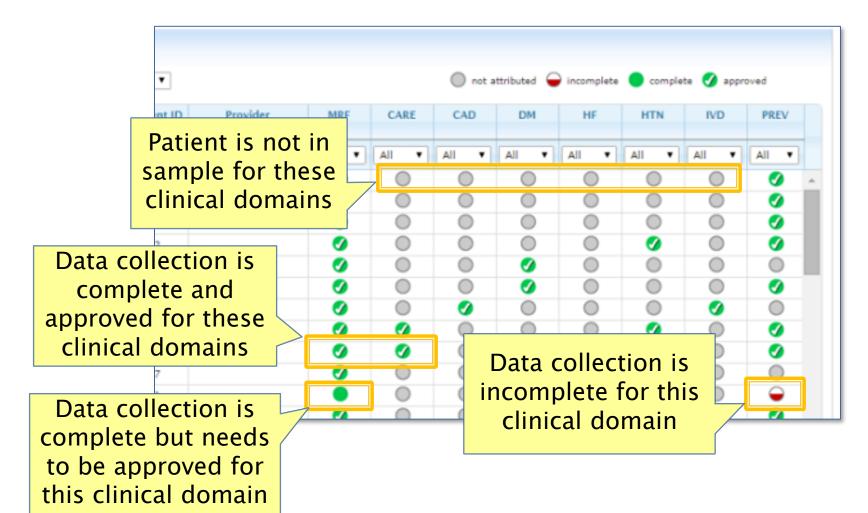
- The Clinigence MSSP Registry is used to collect and confirm the answers to the clinical questions CMS asks.
- The tool takes the user through a step-by-step wizard for each clinical domain.
- The MSSP Registry is updated every year to reflect the latest CMS requirements.



- Accessing the Registry:
 - 1. Login to Clinigence (solution.clinigence.com)
 - 2. Select ACO Tools
 - 3. Select Attributed Registries
 - 4. Select Q1 2019 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)



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Consecutive, Ranked Patients

- For reporting year 2018 CMS is again requiring the ACOs to complete 248 consecutive, ranked patients.
- If the sample contains fewer than 248 patients for a clinical domain, the ACO must complete 100% of the patients in the sample for that domain.
- If a patient ranked <248 is "skipped" (Medical Record not found, patient not qualified for measure, Other CMS Reason) then the next ranked patient must be completed.



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	148440924 Spalding Medic		684984705 60891		Ø	0	0	0	0	0	0	0
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Working with the Registry

inigence

- Based on the data in their EMR and/or paper charts users validate pre-populated data and select the answers to questions which are not populated.
- Sort the list of patients by those with incomplete data to get started.

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2	9	954505159	Greensburg C	linic	Andrade, Mike	125596551	89664		•	0	0	0	0	۲	-	0
2	9	982898001	Floyd Clinic		Atkinson, Cherie	743336945	60464		•	-	0	0	0	0	0	-
AGE	5	542764364	Greensburg C	linic	Avery, Lashonda	898843608	64340		0	-	0	0	0	•	0	-
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Entering the Data

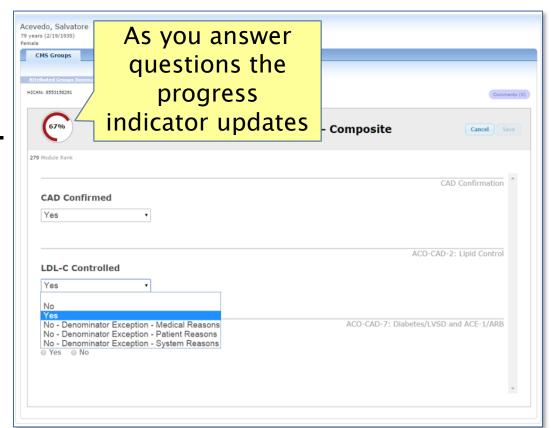
Select the patient name and the summary for that patient appears. This shows which clinical domains include the selected patient in the sample and the completeness of

for each.	Acevedo, Salvatore 79 years (2/19/1935) Female EMR ID(s):	
	CMS Groups Attributed Groups Summary HICAN: 8553158291 Comments (0)	
Data collection is complete for this	Comments (0)	
clinical domain	CAD - Coronary Artery Disease - Composite	
	Complete IVD - Ischemic Vascular Disease	
	© 2010-2015 Clinigence, Inc. About Us Contact Version 3.5	7



Entering the Data

- Select Edit for the clinical domain you want to update.
- Each measure group has a 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.

hoted Croups Summary Edd Croup in 8553150291	AD - Coronary /	Use the Comments button to recor relevant	Cancel Sav
CAD Confirmed Yes	·	information	CAD Confirmation
LDL-C Controlled	•		ACO-CAD-2: Lipid Control



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 LDL-C of 0-500 mg/dl. If the patient's latest LDL-C is 600 mg/dl, you will not be able to enter 600.



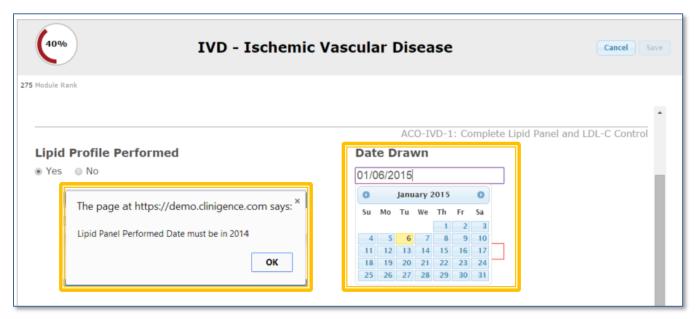
Entering Values

Clinigence

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vevedo, Salvatore years (2/19/1935) male EMR ID(s):	gives you the acceptable range.	
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Attributed Groups Summary Edit Group Heasures	you can enter 500	Comments (
[60%] IVD - Ischemic Va	and add a Comment giving	Cancel Save
275 Module Rank	the actual value.	
	ACO-IVD-1: Complete Lipid Panel and	LDL-C Control
Ves No	Date Drawn 11/10/2014	
The page at https://demo.clinigence.com says: × LDL-C Value must be between 0 and 500	LDL-C Value	
ОК	ACO-IVD-2: Use Over the	e field to
	see the valid v	alues.

Entering Dates

 Certain clinical domains require you to enter a date or date range for an item. Most require that the date falls within the measurement period (Jan. 1, 2018 through Dec. 31, 2018).





Sorting the Lists

In addition to sorting the rows, you can sort on each clinical domain column.

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Export	Ro	vs containing: Incomplete	e Deta		•				🔘 not at	tributed 🧲) incomplete	🔵 comple	te 🕜 appr	oved
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AGO	982898001	Floyd Clinic	Everett, Rex	102710527	230049		0	0	-	0	-	0	-	0
2	954505159	Greensburg Clinic	Fuller, Darcy	491138171	124136		•	0	-	0	0	0	0	0
2	982898001	Floyd Clinic	Gamble, Mandy	591530921	63039		•	0	-	0	0	0	-	0
2	766910698	Moultrie Family Medicin	Gibson, Donna	666379723	214197		•	0	-	0	0	0	-	0
2	766910698	Moultrie Family Medicin	Green, Joan	531343643	66081		•	0	-	0	0	-	-	0
2	954505159	Greensburg Clinic	Hansen, Julio	754194792	89430		•	0	-	0	0	0	0	0
2	954505159	Greensburg Clinic	Hart, Chad	872803457	126127		•	0	-	0	-	0	-	0
2	954505159	Greensburg Clinic	Juarez, Gustavo	670619219	64626		•	0	-	0	0	0	0	0
2	954505159	Greensburg Clinic	Lam, Nick	021727549	64685		•	0	-	0	0	0	0	0
2	954505159	Greensburg Clinic	Massey, Dwight	320004360	89355		٠	0	-	0	0	0	0	0
2	954505159	Greensburg Clinic	McClure, Guy	331778684	89766		•	-	-	0	0	-	0	-
,2	054505150	Greensburn Clinic	Ramirez Antoine	040101524	126167			0	-	0	0	0	0	0



Approving the Data

 As data collection progresses, you can sort by Unapproved Groups to quickly find those patients who need approval.

Reports	Revis	containing: Unapprove			•				🔘 not a	ttributed 🧲	incomplete	o comple	ta 👩 appr	oved
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•		nsburg Clinic	Massey, Dwight	320004360				•	-	0	0	0	0	0
-		nsburg Clinic	McClure, Guy	331778684				-	-	0	0	-	0	-
-		nsburg Clinic	Ramirez, Antoine	040191824				0		0	0	0	0	0
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Approving the Data

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

Everett, Rex 68 years (6/8/1946) Male CMS Groups		R ID(s): 15841	
Attributed Groups Su HICAN: 1027105273	mmary	Everett, Rex 68 years (6/8/1946) Male EMR ID(s): 15841 CMS Groups	
	Medical Record Foun CAD - Coronary Arte	Attributed Groups Summary Edit Group Measures HICAN: 1027105273	Comments (0)
	HF - Heart Failure	Medical Record Found	Cancel Save
0% complete	IVD - Ischemic Vascu	Medical Record Found Yes	Medical Record Confirmation



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.
- Clinigence recommends targeting completion for about 2 weeks prior to the CMS Web Interface shutdown (shut-down for 2019 is March 22, 2019). This allows the ACO to identify and react to any unexpected submission results such as low scores and make any corrections.



CMS Support Calls

- CMS Weekly Support Calls will begin Jan. 9, 2019 and are held each Wednesday at 1 pm EST during the collection period.
- These calls allow ACO personnel to ask questions of CMS subject matter experts.
- An FAQ from previous years' calls can be found here: qpp.cms.gov/about/resource-library



CMS Web Interface FAQ

An example from the FAQ...

ID	Question	Answer
3.	When can I use "No - Medical Record Not Found?"	 The "No - Medical Record Not Found" option should be used only if there is truly an inability to locate and access the beneficiary's medical record. By virtue of being sampled into the CMS Web Interface, CMS has identified claims for this beneficiary submitted by your organization. CMS expects organizations to make a concerted effort to obtain medical records for their assigned and sampled beneficiaries. This includes collaborating with physicians and/or other clinic staff both inside and outside the organization (including but not limited to the three NPIs provided in the CMS Web Interface), as well as facilities both inside and outside the organization attempts being repeated throughout the course of the data collection period, if needed. CMS encourages organizations to put systems and processes in place so that patient care is more coordinated for the dual purposes of patient safety and quality improvement. It is likely that data for sampled patients are available from medical records maintained by the organization's providers because sampled patients are those with: The largest share of their primary care services provided by the organization (i.e., they have been assigned to the organization) At least 2 primary care office or other outpatient visits billed by the organization³ during the reporting period.
		locate and access a medical record, but are unable to locate certain data within it. Refer to Appendix B, <u>Table B-1</u> for examples.



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:
 - MSSP performance and submission reports
 - MSSP final submission exports
 - MSSP claims pre-population exports
 - Clinigence performance, comments, and diff reports
 - Clinigence files used for the final MSSP submission



Next Steps

- The steps required to prepare the Registry for collection will vary by ACO.
- The key data sources are:
 - Beneficiary Sample Excel file
 - EHR or data feeds for pre-population (optional)
 - CMS discharge dates and influenza immunization answers
- The MSSP Registry should be available for collection January 11-22 to March 22. The start date will depend on several factors such as complexity of the organizational census and whether data integration is required.



Next Steps

- The ACO Administrator sets 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 MSSP Registry materials on the support site at support.clinigence.com (ACO MSSP Registry)
- Each ACO prepares a plan with daily and/or weekly goals for data collection.



Questions



