Clinigence

Clinigence MSSP Registry – Train-the-Trainer PY2019

Agenda

- The ACO Reporting Timeline
- The Clinigence MSSP Submission Process
- The Clinigence MSSP Registry
- The Collection Process
  - Entering the data
  - Approving the data
- Data Entry Reports (new)
- CMS Support Calls
- Next Steps

ACO Reporting Timeline

- **November 8, 2019 – November 21, 2019**
  - ACO completes the organization census of providers, practices, TINs and NPIs.
  - ACO and Clinigence establish the EIDM Web Interface Submitter roles.
- **January 2, 2020**
  - Clinigence downloads the Beneficiary Sample file from the CMS Web Interface.
- **January 2, 2020**
  - 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.

ACO Reporting Timeline

- **January 9, 2020**
  - Clinigence MSSP Registry end-user training
- **January 2 - January 20, 2020**
  - 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.

ACO Reporting Timeline

- **January 11 – January 20, 2020**
  - Clinigence MSSP Registry becomes available for chart abstraction. **Clinigence will notify each ACO as their Registry becomes available.**
- **January 11-20 - March 31, 2020**
  - 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 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 Patient ID, not the CMS Id.*

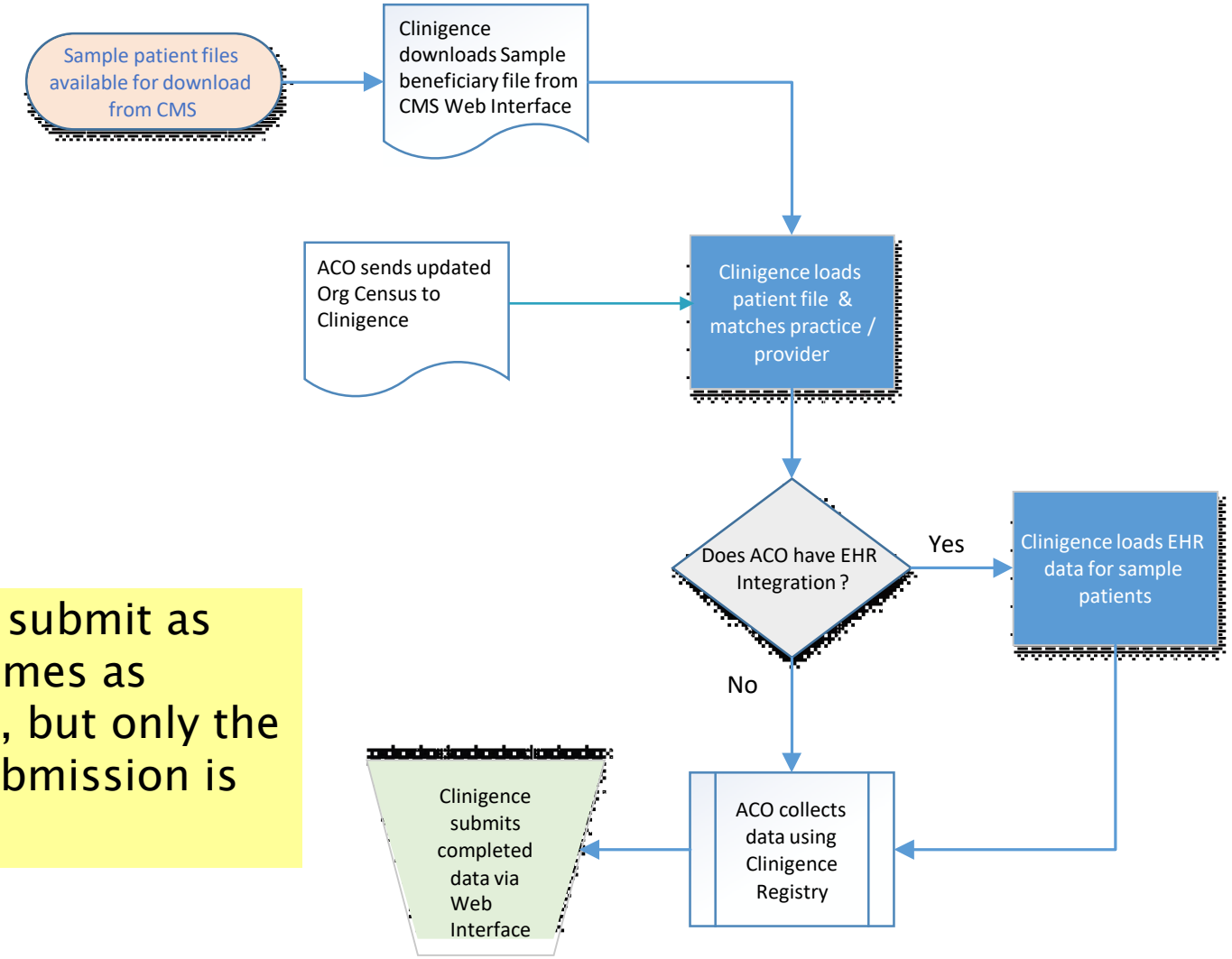
ACO Reporting Timeline

- **February 3, February 17, March 2, 2020**
  - 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 17, 2020**
  - 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 17 – 31, 2020**
  - 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.

ACO Reporting Timeline

- **March 31, 2020, 8 pm ET**
  - All data must be submitted in the CMS Web Interface.
- **April 1 - 30, 2020**
  - 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



We can submit as many times as needed, but only the final submission is used.

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.
- Optional: 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 Clingence Registry

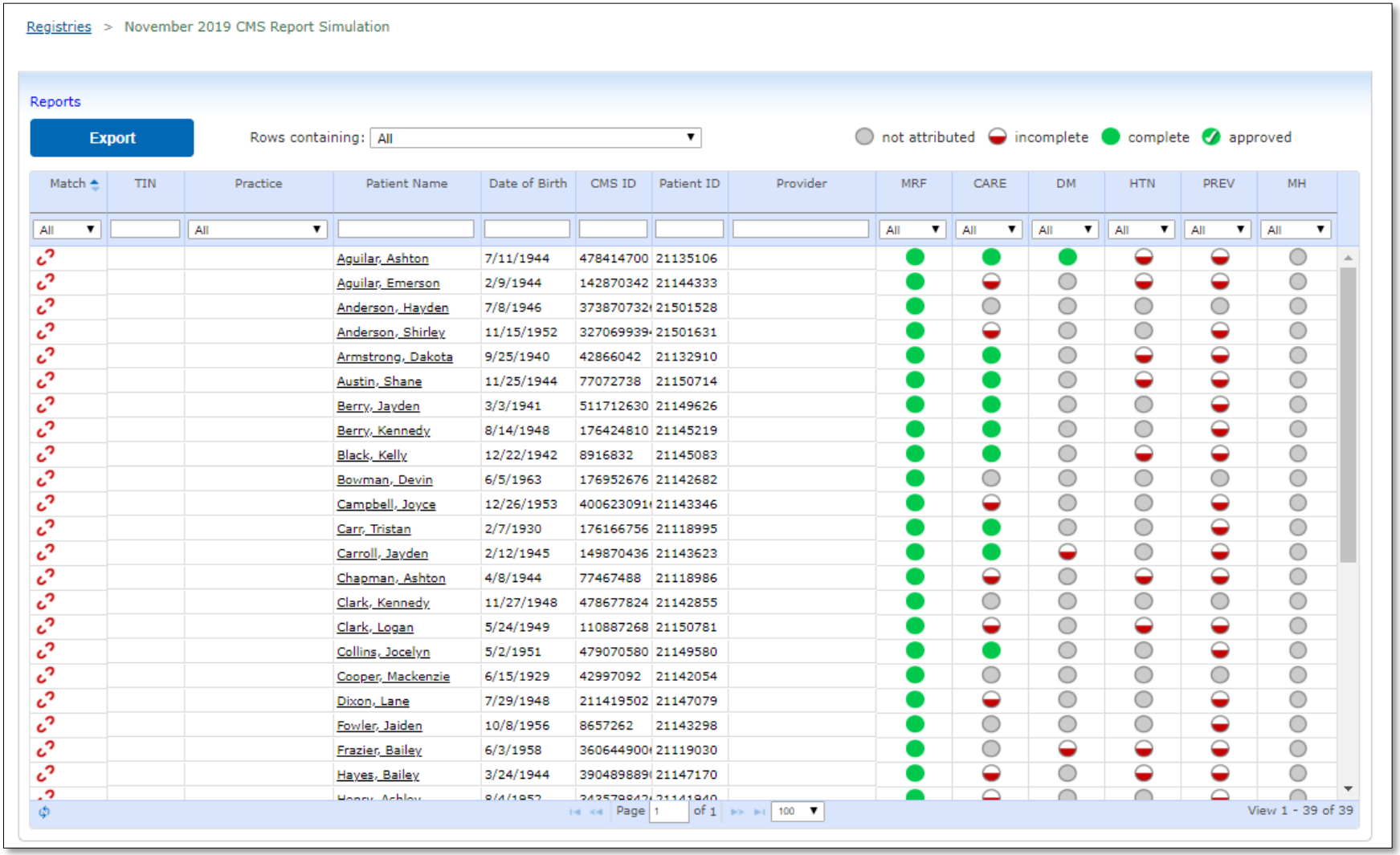
- The Clinigence MSSP Registry is used to collect and confirm the answers to the clinical questions CMS asks.
- The tool takes the user through a step-by-step wizard for each clinical domain.
- The MSSP Registry is updated every year to reflect the latest CMS requirements.

The Clinigence Registry

- Accessing the Registry:
  1. Login to Clinigence (solution.clinigence.com)
  2. Select ACO Tools
  3. Select Attributed Registries
  4. Select Q1 2020 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)

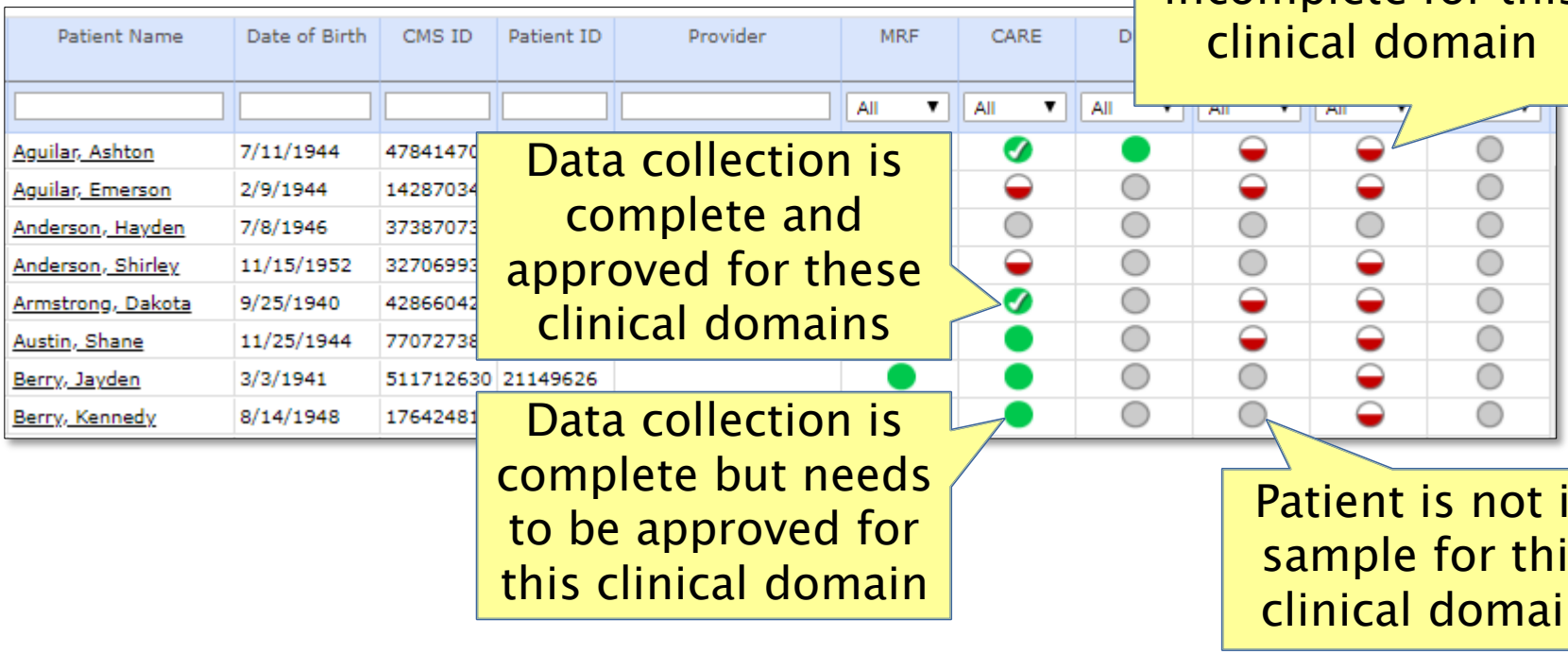
The Clinigence Registry



Match	TIN	Practice	Patient Name	Date of Birth	CMS ID	Patient ID	Provider	MRF	CARE	DM	HTN	PREV	MH
All		All						All	All	All	All	All	All
			Aguilar, Ashton	7/11/1944	478414700	21135106							
			Aguilar, Emerson	2/9/1944	142870342	21144333							
			Anderson, Hayden	7/8/1946	373870732	21501528							
			Anderson, Shirley	11/15/1952	327069939	21501631							
			Armstrong, Dakota	9/25/1940	42866042	21132910							
			Austin, Shane	11/25/1944	77072738	21150714							
			Berry, Jayden	3/3/1941	511712630	21149626							
			Berry, Kennedy	8/14/1948	176424810	21145219							
			Black, Kelly	12/22/1942	8916832	21145083							
			Bowman, Devin	6/5/1963	176952676	21142682							
			Campbell, Joyce	12/26/1953	400623091	21143346							
			Carr, Tristan	2/7/1930	176166756	21118995							
			Carroll, Jayden	2/12/1945	149870436	21143623							
			Chapman, Ashton	4/8/1944	77467488	21118986							
			Clark, Kennedy	11/27/1948	478677824	21142855							
			Clark, Logan	5/24/1949	110887268	21150781							
			Collins, Jocelyn	5/2/1951	479070580	21149580							
			Cooper, Mackenzie	6/15/1929	42997092	21142054							
			Dixon, Lane	7/29/1948	211419502	21147079							
			Fowler, Jaiden	10/8/1956	8657262	21143298							
			Frazier, Bailey	6/3/1958	360644900	21119030							
			Hayes, Bailey	3/24/1944	390489889	21147170							
			Henry, Ashley	8/4/1952	342579842	21141940							

Clinigence

The Clinigence Registry

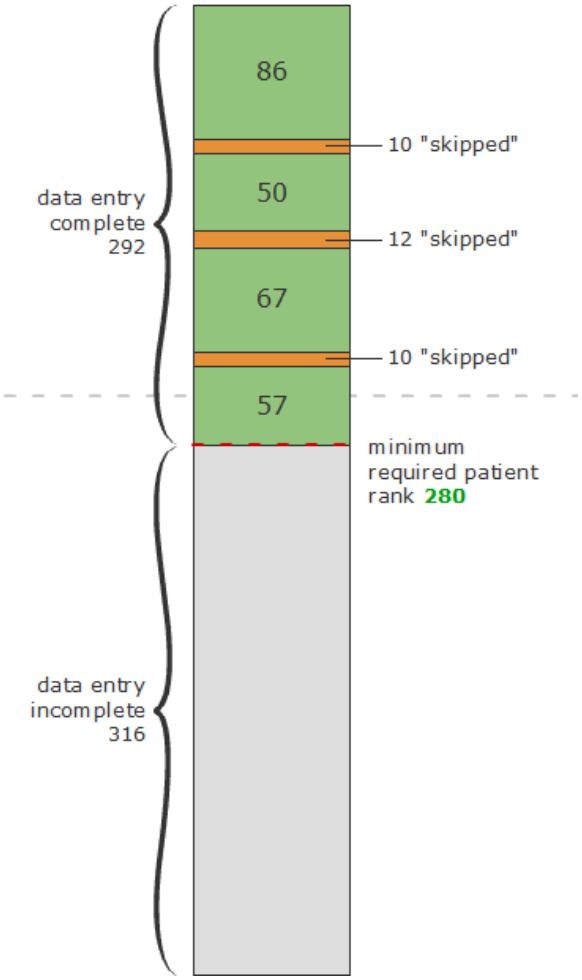


Consecutive, Ranked Patients

- For reporting year 2019 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.

Consecutively Ranked Patients

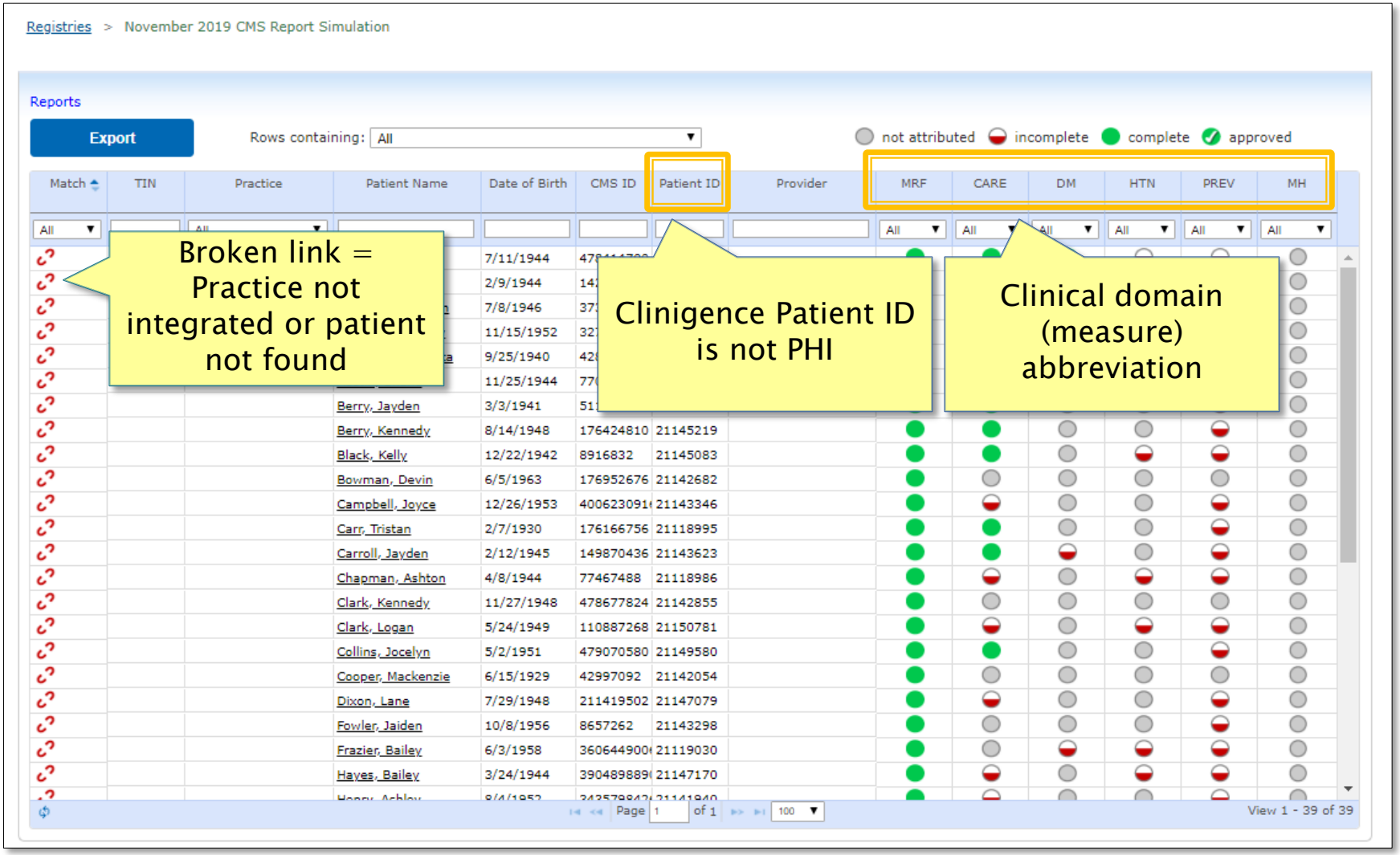
- In this example, data entry is complete for 292 patients.
- The number of *consecutively completed* patients is 260
  (292 complete – 32 skipped)



Consecutively Ranked Patients

- If you complete data entry for *consecutively ranked* patients above the minimum, CMS will include those patients in it's performance calculation.
- If you complete data entry for *non-consecutively ranked* patients above the minimum, CMS will **not** include those patients in it's performance calculation.

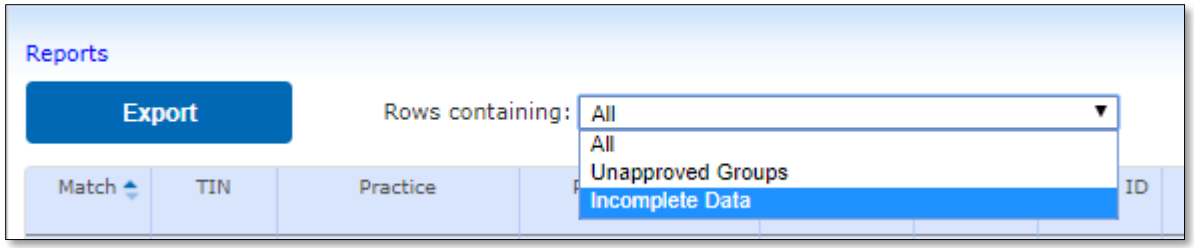
The Clinigence Registry



Clinigence

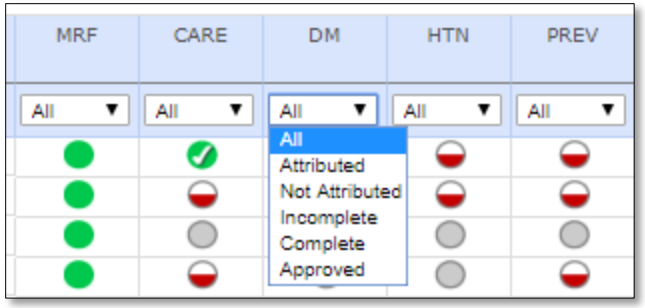
Working with the Registry

- 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.



Sorting the Lists

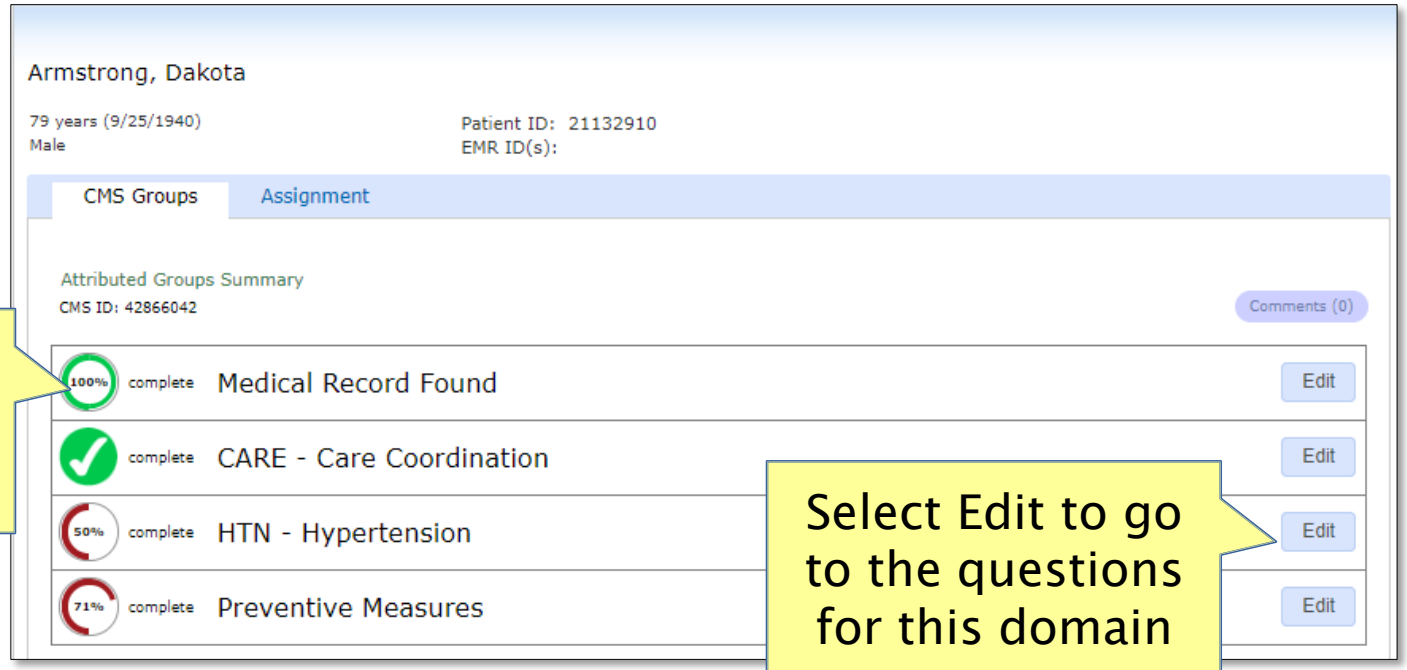
- In addition to sorting the rows, you can sort on each clinical domain column.



- You can also sort by Practice or Provider.

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 the data for each.

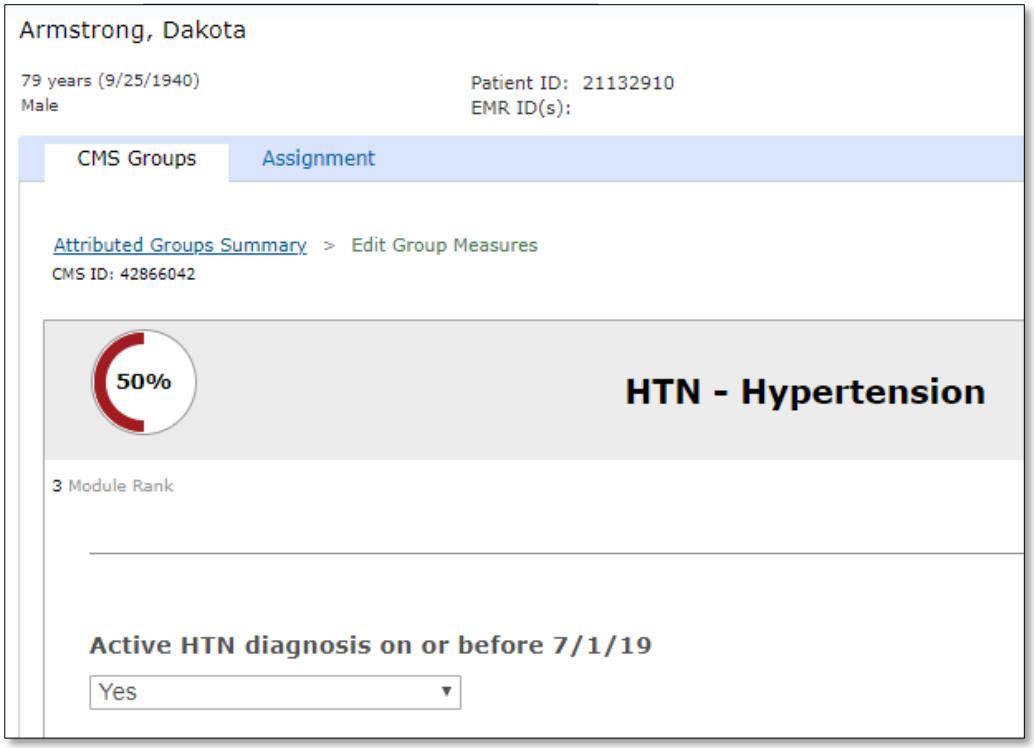


Data collection is complete for this clinical domain

Select Edit to go to the questions for this domain

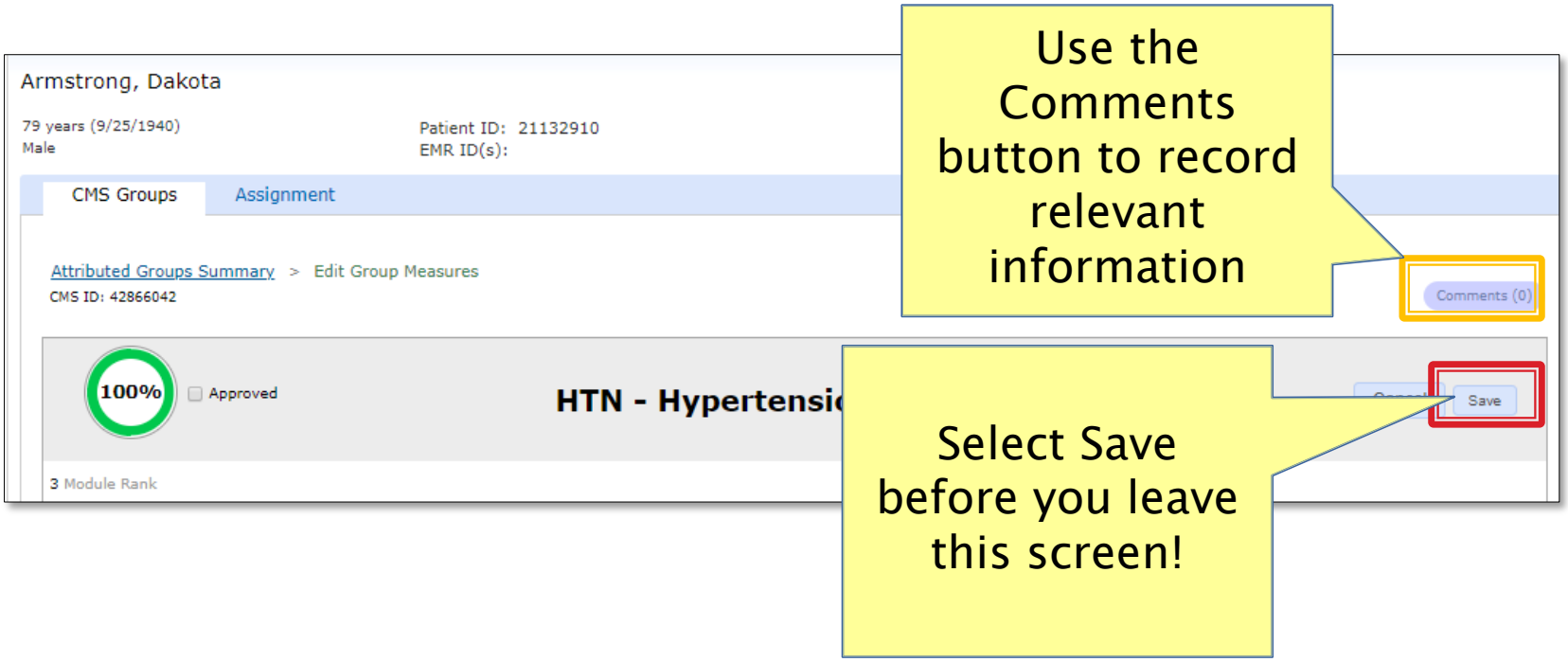
Entering the Data

- 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

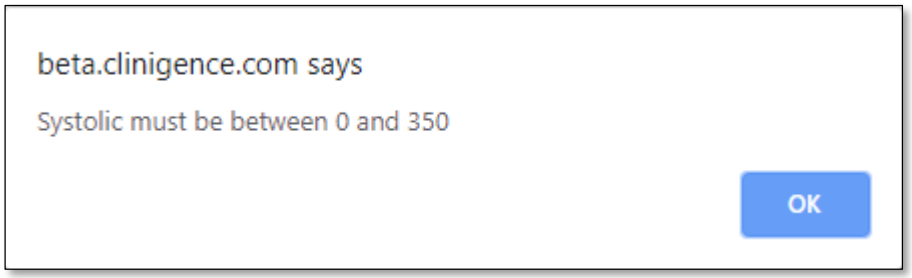
- When all the questions have been answered for a clinical domain, the progress indicator will show 100%.



Entering Values

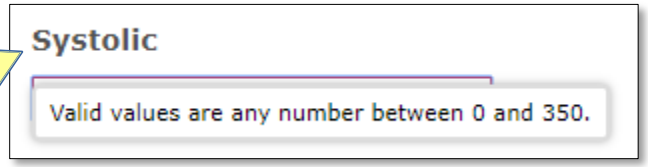
- Certain questions require you to enter values, such as lab results or vital signs. CMS has provided a range of “valid values” for each item and you will not be able to enter a value that is outside that range.
- For example, CMS has established a range for systolic blood pressure of 0 to 350. Even if the patient’s most recent BP was 352/200 you will not be able to enter 352.

Entering Values



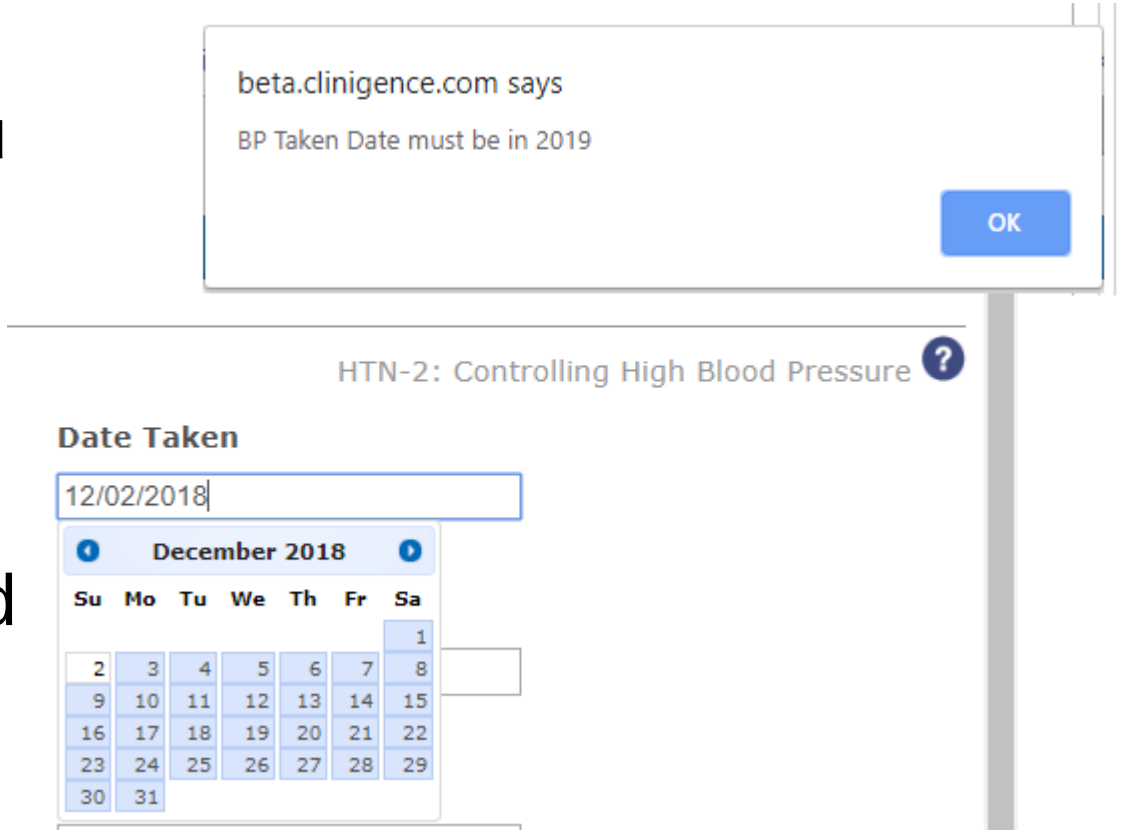
If you enter an invalid value, an error message gives you the acceptable range. In this example, you could enter 350 and add a Comment giving the actual value.

Hover the mouse over the field label to see the range of valid values



Entering Dates

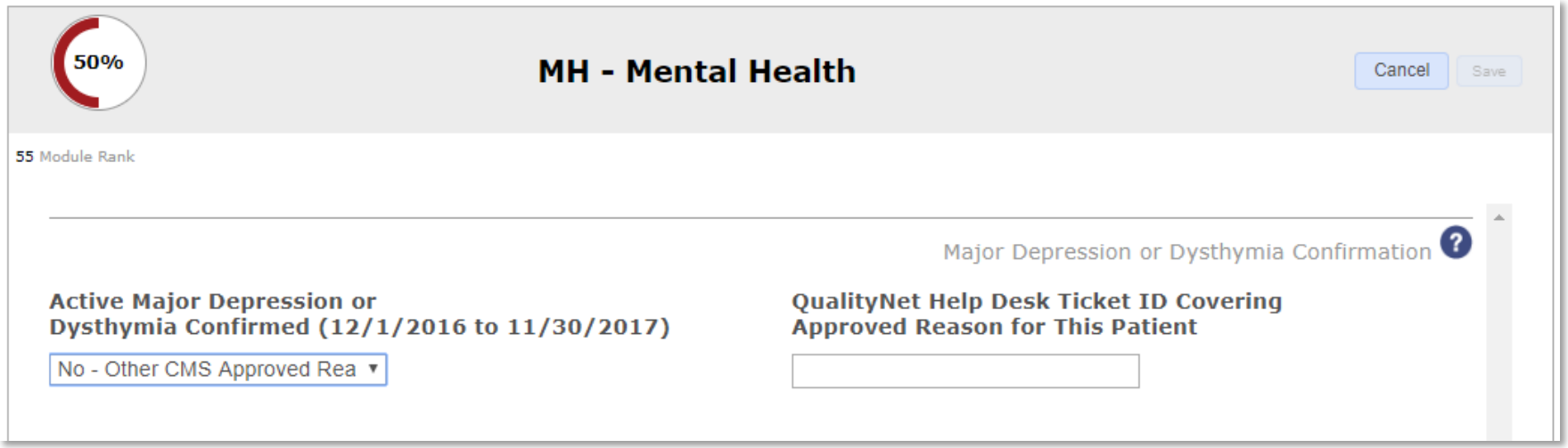
- Certain clinical domains require you to enter a date or date range for an item. Most require that the date falls within the measurement period (Jan. 1, 2019 through Dec. 31, 2019).



Other CMS Approved Reason

- **New for PY 2019** - requests to use CMS Other Approved Reason must be manually entered in the CMS Web Interface.
- Clinigence personnel will handle that task as long as you have selected this option as the answer and given details needed to support this request in the Comments for that specific measure.

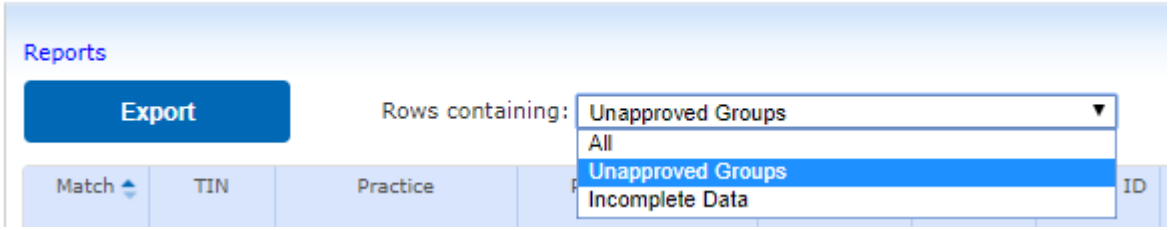
Other CMS Approved Reason



- When CMS approves your reason, Clinigence will add the CMS ticket number to the appropriate field.
- If CMS rejects the request, Clinigence will remove that answer and notify the ACO.

Approving the Data

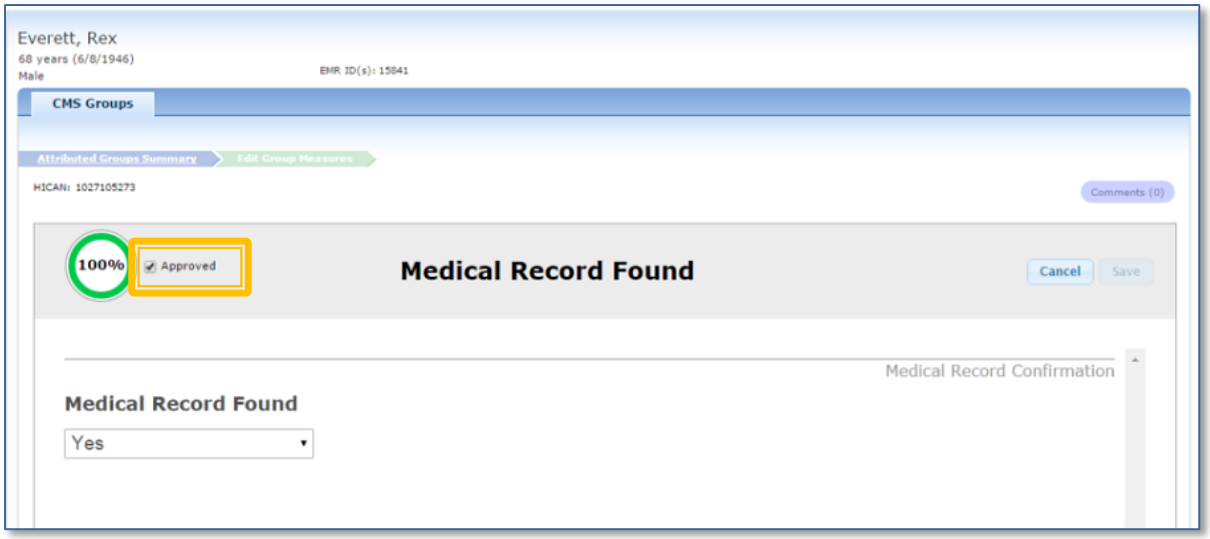
- As data collection progresses, you can sort by Unapproved Groups to quickly find those patients who need approval.



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.



MSSP Data Entry Reports

- There are 2 new reports available for PY2019 to help you track your progress and compare performance across the ACO.
  - Data Entry Summary Report
  - Data Entry Provider Report
- These reports are accessible all year, even after the Q1 2020 Registry is locked.

NOTE: These 2 reports replace the MSSP Performance Report from previous years.

Data Entry Summary Report

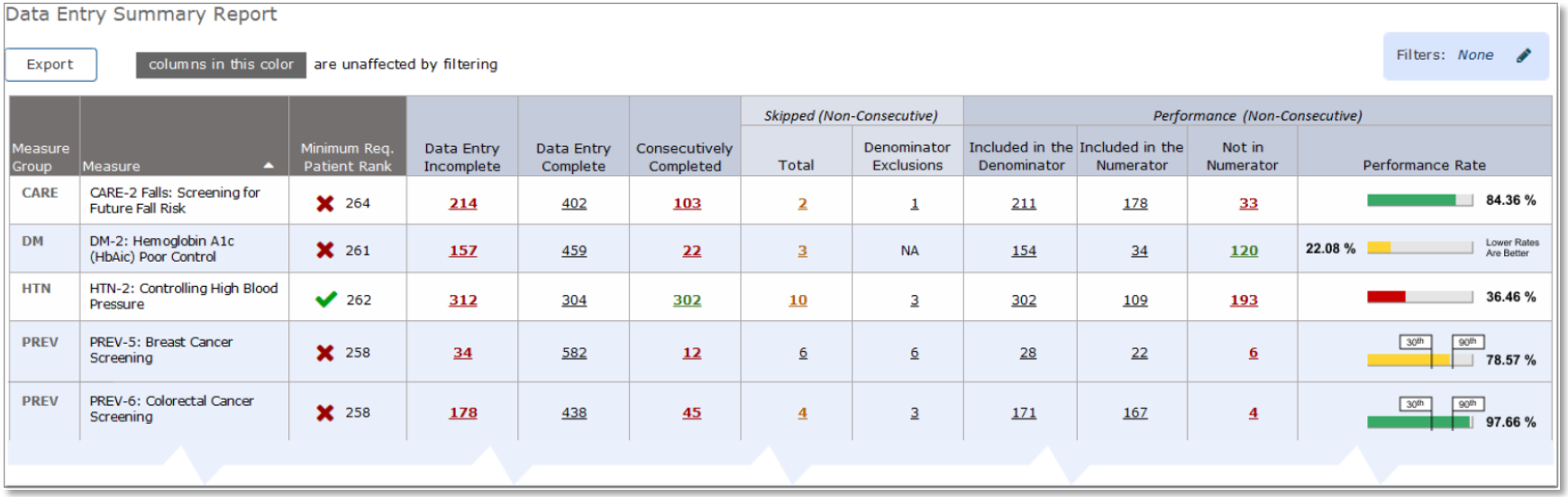
- This report is designed to let the ACO track it's progress in data collection.
- There is a row per measure that shows the following for data collection:
  - Minimum required patient rank to meet CMS minimum
  - Number of ranked patients with incomplete data
  - Number of patients with complete data (can filter for completed and approved)
  - Consecutively complete (starting at rank #1)
  - Skipped patients

Data Entry Summary Report

- The following data is shown for performance:
  - Included in the denominator (Eligible population)
  - Included in the numerator (Meets criteria)
  - Not in Numerator (Does not meet criteria)
  - Performance Rate

NOTE: Performance numbers are not based on the rank or consecutively completed patients, only those with 100% data completed for that measure. This is a departure from how CMS will calculate the rate.

Data Entry Summary Report



Data Entry Summary Report

Export | columns in this color are unaffected by filtering | Filters: None

Measure Group	Measure	Minimum Req. Patient Rank	Data Entry Incomplete	Data Entry Complete	Consecutively Completed	Skipped (Non-Consecutive)		Performance (Non-Consecutive)			
						Total	Denominator Exclusions	Included in the Denominator	Included in the Numerator	Not in Numerator	Performance Rate
CARE	CARE-2 Falls: Screening for Future Fall Risk	✖ 264	214	402	103	2	1	211	178	33	84.36 %
DM	DM-2: Hemoglobin A1c (HbAic) Poor Control	✖ 261	157	459	22	3	NA	154	34	120	22.08 % (Lower Rates Are Better)
HTN	HTN-2: Controlling High Blood Pressure	✔ 262	312	304	302	10	3	302	109	193	36.46 %
PREV	PREV-5: Breast Cancer Screening	✖ 258	34	582	12	6	6	28	22	6	30th 90th 78.57 %
PREV	PREV-6: Colorectal Cancer Screening	✖ 258	178	438	45	4	3	171	167	4	30th 90th 97.66 %

Data Entry Summary Report

- Select any non-zero number to drill-down to a list of those patients.

Measure Group	Measure	Minimum Req. Patient Rank	Data Entry Incomplete	Data Entry Complete	Consecutively Completed	Skipped (Non-C) Total
CARE	CARE-2 Falls: Screening for Future Fall Risk	✖ 264	214	402	103	2
DM	DM-2: Hemoglobin A1c (HbAic) Poor Control	✖ 261	157	459	22	3

Data Entry Patient List

List Category: ***Skipped (Total)***

Approval Status: *Include all patients in data sample*

Practices and Providers: *By Practice(s)*

Cornerstone Family Clinic, Dane Wellness Clinic, Valley Family Practice

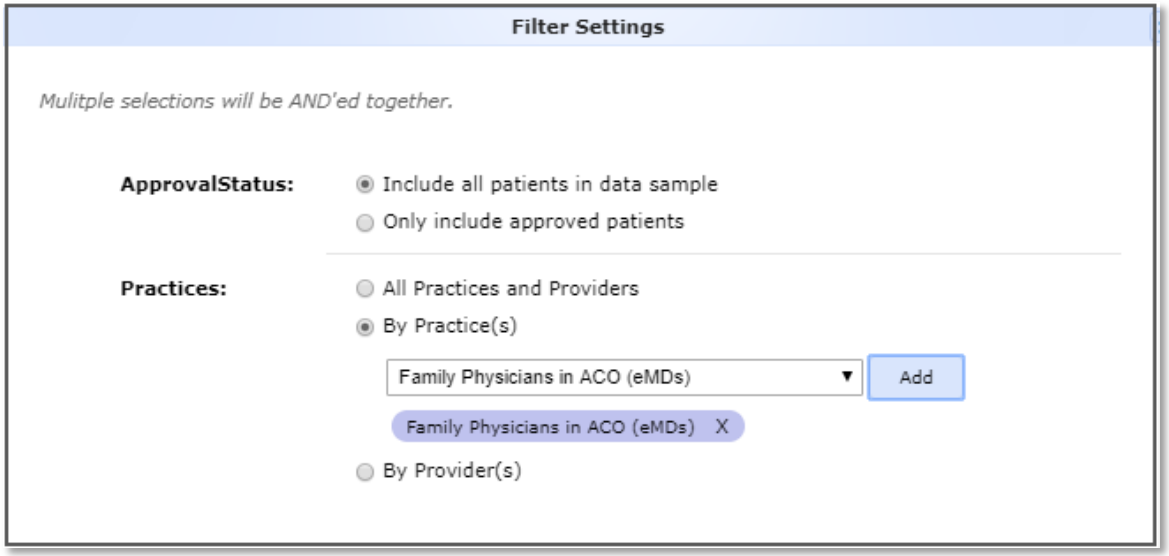
[view criteria details]

Export

CMS ID	Last Name	First Name	DOB	Gender	CARE-2 Rank	Help Desk Ticket ID Covering Approved Reason	Patient Marked As Qualified for the Measure	Patient was Screened for Future Fall Risk	Practice	Provider
5AA6BB5CC55	Able	John	8/2/1946	M	9	XXXXXXXX	No	No	Cornerstone Family Clinic	Jean Stackwell, MD
9AA6BB9CC99	Ackerman	Tilly	10/12/1950	F	234	YYYYYYYY	No	No	Valley Family Practice	Alex Chu, MD
5AA6BB5CC55	Baker	Sarah	3/6/1948	F	34		No	No	Cornerstone Family Clinic	Ralph Carter

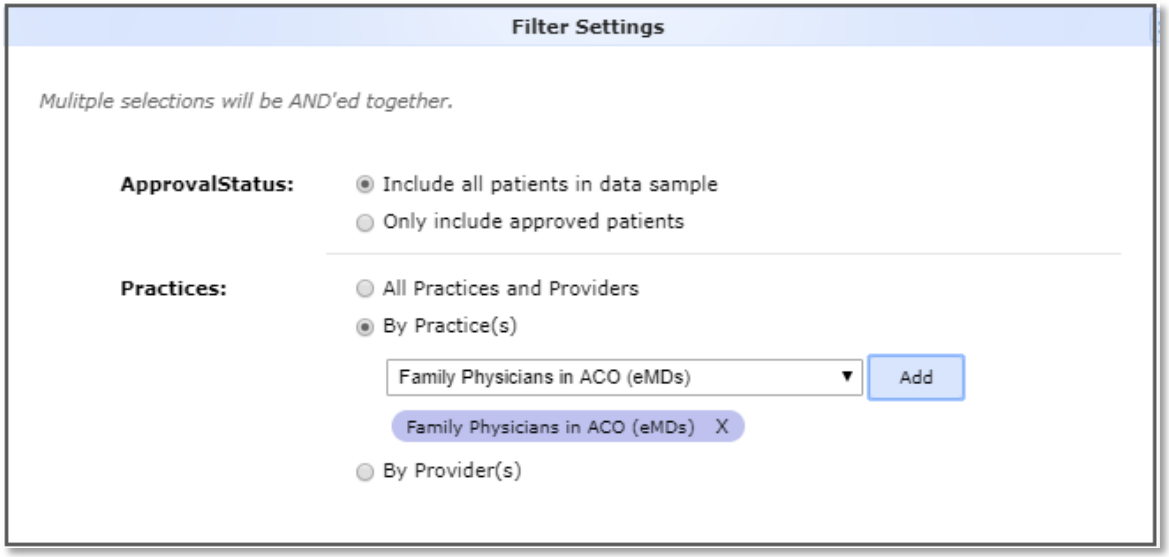
Data Entry Summary Report - Filtering

- You can filter by approval status and only include patients with all data approved. The default is to include all patients regardless of approval status.



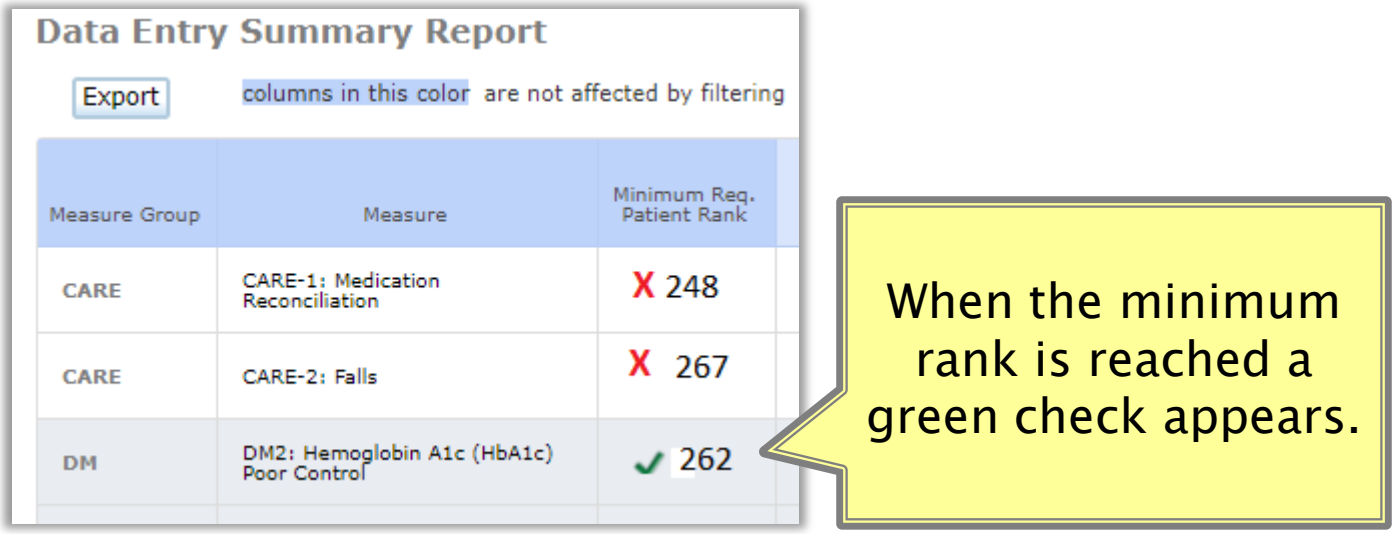
Data Entry Summary Report - Filtering

- You can filter by practice and/or provider. The default is to include all practices and providers.



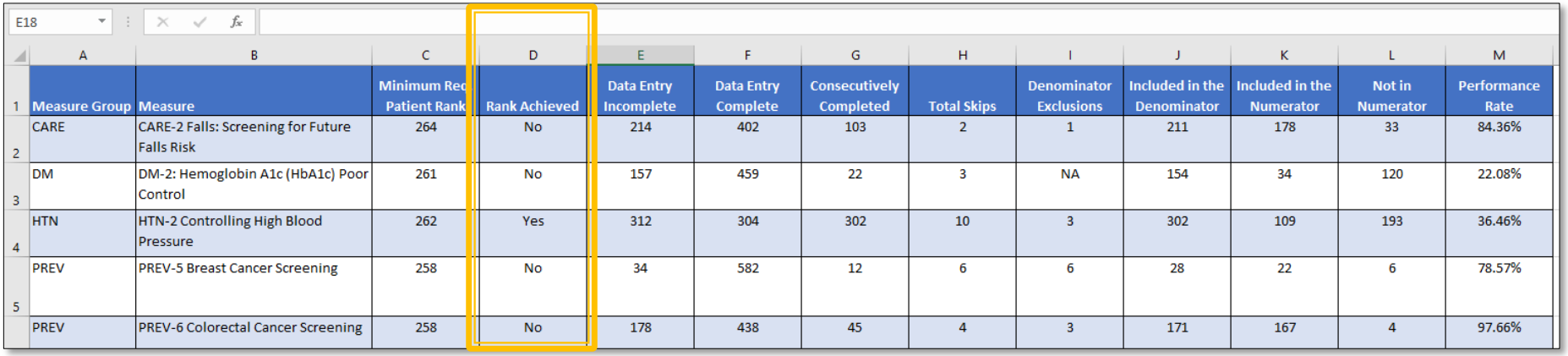
Data Entry Summary Report - Filtering

NOTE: The Measure Group, Measure, and Minimum Required Patient Rank columns are not affected by filtering.



Data Entry Summary Report - Exporting

- After you have filtered the report as needed, you can export the report to a .XLSX file.
- The measure data appears on the second sheet. You will see the addition of a Rank Achieved column.



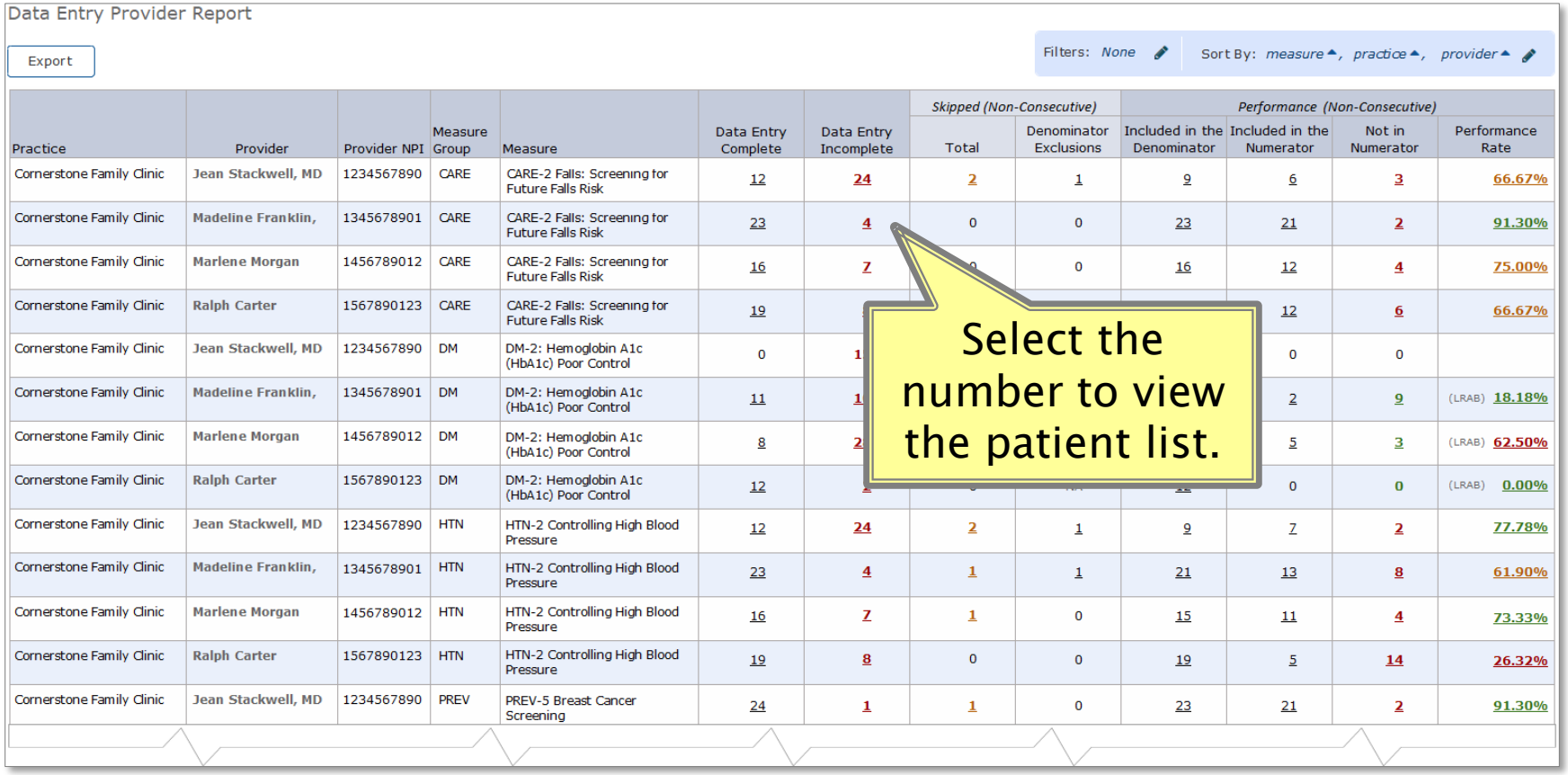
E18

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Measure Group	Measure	Minimum Rec Patient Rank	Rank Achieved	Data Entry Incomplete	Data Entry Complete	Consecutively Completed	Total Skips	Denominator Exclusions	Included in the Denominator	Included in the Numerator	Not in Numerator	Performance Rate
2	CARE	CARE-2 Falls: Screening for Future Falls Risk	264	No	214	402	103	2	1	211	178	33	84.36%
3	DM	DM-2: Hemoglobin A1c (HbA1c) Poor Control	261	No	157	459	22	3	NA	154	34	120	22.08%
4	HTN	HTN-2 Controlling High Blood Pressure	262	Yes	312	304	302	10	3	302	109	193	36.46%
5	PREV	PREV-5 Breast Cancer Screening	258	No	34	582	12	6	6	28	22	6	78.57%
	PREV	PREV-6 Colorectal Cancer Screening	258	No	178	438	45	4	3	171	167	4	97.66%

Data Entry Provider Report

- The Data Entry Provider Report is a new report that is provided in addition to the Summary Report.
- It was driven by user feedback pertaining to how ACOs like to arrange more detailed information not only for the data entry process, but for their own internal reporting.

Data Entry Provider Report



Clinigence

Data Entry Provider Report

- The Provider report removes the data entry progress columns related to ranking.
- The Provider report adds columns for Practice, Providers and NPIs.
- Performance Rates are shown in Green, Orange, or Red based on the thresholds for each measure.
- As with the Summary report, select any non-zero number to drill-down to a list of those patients.

Data Entry Provider Report - Filtering

- The same filters offered for the Summary view are offered for this view: Approved Status and Practice/Provider.
- Multi-level sorting is offered for this view. All columns in the grid are offered as sorting elements in the sort menu in the order that they appear in the grid.
  - The default sort for this screen is measure, then practice, and then provider all ascending order.

Data Entry Provider Report - Exporting

- After you have filtered the report as needed, you can export the report to a .XLSX file. The default sorting is used for the exported report.
- The practice data appears on the second sheet.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N
1	Practice	Provider	Provider NPI	Measure Group2	Measure	Data Entry Incomplete	Data Entry Complete	Total Skips	Denominator Exclusions	Included in the Denominator	Included in the Numerator	Not in Numerator	Performance Rate	Lower Rates Are Better
2	Cornerstone Family Clinic	Jean Stackwill, MD	1234567890	CARE	CARE-2 Falls: Screening for Future Falls Risk	12	24	2	1	9	6	3	66.67%	No
3	Cornerstone Family Clinic	Madeline Franklin	1345678901	CARE	CARE-2 Falls: Screening for Future Falls Risk	23	4	0	0	23	21	2	91.03%	No
4	Cornerstone Family Clinic	Marlene Morgan	1456789012	CARE	CARE-2 Falls: Screening for Future Falls Risk	16	7	0	0	16	12	4	75.00%	No
5	Cornerstone Family Clinic	Ralph Carter	1567890123	CARE	CARE-2 Falls: Screening for Future Falls Risk	19	8	1	0	18	12	6	66.67%	No
6	Cornerstone Family Clinic	Jean Stackwill, MD	1234567890	DM	DM-2: Hemoglobin A1c (HbA1c) Poor Control	0	15	0	NA	0	0	0		

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 2020 is March 31, 2020). 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:
  - MSSP performance and submission reports
  - MSSP final submission exports
  - MSSP claims pre-population exports
  - Clinigence data entry, comments, and diff reports
  - Clinigence files used for the final MSSP submission

CMS Support Calls

- CMS Weekly Support Calls will begin Jan. 8, 2020 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, with such collaboration 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: 1. The largest share of their primary care services provided by the organization (i.e., they have been assigned to the organization) 2. At least 2 primary care office or other outpatient visits billed by the organization[3] during the reporting period. "Medical Record Not Found" is not an appropriate response when you are able to locate and access a medical record, but are unable to locate certain data within it. Refer to Appendix B, Table B-1 for examples.

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-provided influenza immunization answers
- The MSSP Registry should be available for collection January 11-20 to March 31. 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