



Quality
Insights

QPPLive!

Transcript from Live Session

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Shanen Wright:

Welcome to QPPLive! This is our August 2017 edition of the Q&A Session brought to you by Quality Insights, the Quality Innovation Network, for West Virginia, Pennsylvania, Delaware, New Jersey and Louisiana and the Quality Payment Support Center for West Virginia, Delaware, Pennsylvania and New Jersey. Today we've got a panel of experts ready to answer your questions. Our primary folks today answering questions will be Kathy Wild, who is the director of QPP for Quality Insights. Lisa Sagwitz will also be answering questions. Keep an eye on the chat window because Joe Pinto will be providing your web links today. A lot of the resources that we refer to and the places we talk about, you can find directly there in the chat window. You can go to them automatically.

In addition to those folks, I'm Shanen Wright. I work on the QPP Support Center. Our producer today is Laurie Fink. We're also joined by Andrea Lefkay, Crystal Welch, Julie Williams, Lisa Sherman, Matt Armstrong and Shirley Sullivan and would like to thank all of them for participating today.

Now, you'll have an opportunity over today's edition of QPP Live! to ask questions using the Q&A feature in the WebEx player. You can go ahead and start typing those questions now. We'll get them lined up and answer as many as we can. If you're not seeing it already, the little question mark on the top right side of the screen, you can click on for Q&A. Make sure you're choosing All Panelists in the Ask dropdown menu. It should default there, but if not, select All Panelists. You can type in your question and then hit Send and we'll answer as many as time will allow for on today's episode of QPP Live!

As I mentioned before, Joe Pinto's going to be providing us web links in the chat feature. Please use that feature just to refer to other sources. It's a lot easier for us if you type all of your questions in the Q&A box and that way we can keep track of them. Again, you can start typing those right now if you would like. We'll start addressing that.

In addition to the Q&A box, we will open the phone lines periodically during today's episode of QPP Live! That will allow you to ask your questions and provide your comments verbally. We will go state by state with this to make

sure that everybody's not stepping on one another. We ask that if you don't have a verbal question, please make sure to keep your phone line muted on your end so we're not hearing background noise and if you don't mind, refrain from putting us on hold, or else we're going to hear your hold music while we're doing the session today.

After we get through some of our written questions, we will open up the phone lines several times and give you the opportunity to ask your questions and provide your comments and speak with our team of experts one on one.

With that being said, let's get started with the August edition of QPP Live! We go out for our first question here. It is from Shanthi. It says, "MIPS patients encounters include E/M services performed at facilities, including hospitals. For the year 2017, individual practitioners are unable to do MIPS reporting for hospital patients since they have their own charting system." It appears this is a little longer question. It may not have had all of the information included in it. We do have a limit on the number chat characters that can go in the box. I'll throw this out to our panel of experts first, to see if that's enough information to address or if we might need additional information from Shanthi.

Lisa Sagwitz:

Hi. It's Lisa Sagwitz. Good morning, everyone. I'll start to answer this question. Yes, you're correct that hospital patients do not count for MIPS. Now, I think a first step would be go to the [QPP.cms.gov](https://www.cms.gov/qpp) website and on that homepage, on the right hand side is a white box to enter the provider or provider's NPI numbers. By doing that, you'll be able to establish, by the detail that provided, if the provider is a hospitalist or if they do need to attest for MIPS. If you get an indication that they need to attest for MIPS, then that would be for the patients that are seen at the practice level and whatever's charted in that EHR system, not the hospital patients.

I can see that the question is partially cut off. If there's more to it, please type that in and we'll address it.

Shanen Wright:

All right. A little more information. I'm not sure if this is additional to what we already have or if this is a separate question. This also comes from Shanthi who says, "How will CMS list these physicians on its website for quality of care for those who have barriers for MIPS reporting for hospital patients since they have their own charting system? Some EHR and some still on paper dictation. Can they do quality reporting," I believe it was going on to say via claims.

Lisa Sagwitz:

Okay. Give me one minute to think about this and get a response together for you.

Shanen Wright:

Okay. While you're doing that, Lisa, I will mention we had another question from Jill who was asking about the call in number. We provided that on the screen. Thank you, Laurie for that. Anyone who is interested in the call in number, it is 1-877-668-4493. The access code is 666746420#. That's also in

your Q&A window if you would like to see that at any time. Keep in mind, while Lisa's working on a response for that, and you can type in your questions at any time, keep in mind that we're here to help any time, not just during the one hour QPP Live! each and every month.

A lot of you are already working with Quality Insights. We appreciate all of your engagement with us. If you don't know who the individual is that you're working with here at quality insights, you can always use our general QPP inbox for inquiries. That's www.qpp-support@qualityinsights.org. Keep in mind, again, we're going to do the best we can to answer all questions today. Sometimes these are very, very complicated and in depth questions that do require a little bit of research. We might need to follow up with you at a later time. Since you registered for this session, we've got your email address and we'll be able to do that.

Also, please keep in mind that if you're listening to a recording of this session, that rules and interpretations do change over time. You might want to ensure that the information you're hearing is always up to date, but 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.

All right, I see a few other questions coming in. I'll go back to you first, Lisa, to see if we have additional information about our last question about MIPS reporting for hospital patients.

Lisa Sagwitz:

Yes, again, I'm going to say, the starting point is to check the NPI number. If the provider is listed as a hospitalist, that means at least 75% of their visits are seen in the hospital, then it's going to indicate that they're exempt from MIPS. If that's not the case, again, there's nothing with hospital patients that needs to be reported. It would strictly be with the patients that are seen in the office on the EHR system. I see here something about paper and dictation. If the practice would be without an EHR, there are a few things that you could do with improvement activities or if the biller is reporting extra codes via the claims that could qualify for MIPS. We could talk in more detail about that if you would like following the webinar. Just, please type in your contact information and I'd be happy to give you more details.

Shanen Wright:

All right. Thank you so much, Lisa. Next up we have a question from Mindy. I see that Kathy's typed in the answer, but for those of us listening on the phone, we'll go ahead and share this verbally and Kathy may want to share her answer as well. Mindy's question says, "We are an out-patient physical therapy provider. We're wondering the best resource to see when therapists will become eligible to send quality reporting and if claims reporting is still an option? We did participate using PQRI all of the last two years." Kathy?

Kathy Wild:

Yes, right now CMS releases new legislation every year. We really don't know exactly when physical therapists will be one of those clinicians that will be responsible for reporting. When they started the program, it was stated that

they thought that perhaps in 2019, which is two more years, they will include some additional clinicians, besides the ones that currently have to report. Physical therapists, occupational therapists, dietitians and some others were noted in that category, but we really won't know until CMS makes that rule, which will come out late fall of 2018.

As far as having claims as a possible option, that probably will be one of the options for the quality categories. For the other categories, claims reporting is not an option, for the advancing care information, which is basically meaning for use or for the improvement activity category. I hope that answers your question, Mindy.

Shanen Wright: Thanks so much, Kathy. Let's go to another question we've got coming in from Marci. Let's see. She says, "Please clarify. Hospitals don't count since they're, so there are no denominators with 99251 in patient codes, other in patient visits 99221, 99233?" Please let me know if we need additional information. We can ask Marci to type that in the Q&A box if we need that.

Lisa Sagwitz: Hi. It's Lisa. Marci, I am not a biller and don't have expertise in that. I would say I'm not comfortable answering that question at this time. We could find some resources to help guide you. Billing is just a different entity.

Kathy Wild: This is Kathy. Yeah, I'll add on to that. That CMS has contracted us to provide basic QPP education, talking about the categories, what they need to do to report this year so that they don't have a penalty. We definitely do not have the expertise about billing and coding and things like that. I would suggest that the best resources to actually contact the QPP Service Center. If you go on to their website, there is a place at the bottom where you can send a question. They are staffed by CMS employees and they can, if the staff at the customer service level don't have the answer, they can reach out to CMS people that could probably point you in the right direction for correct resources.

Shanen Wright: All right. Thank you so much. Next up we have a question from Ricky, who says, "When I search my providers NPI, the address on the QPP site that shows for him is incorrect and does not match the NPPES website. How can I get this corrected?"

Lisa Sagwitz: Hi, it's Lisa. Hi, Ricky. Most likely in the [inaudible 00:14:00] system, it needs to be correct. That would be what I suspect and why it's not matching up.

Kathy Wild: I'll add that if you call the QPP service center, which is on the QPP website, they can walk you through that process and tell you exactly what you need to do. The things that are on the website are based on what is in [inaudible 00:14:26] and PPS. That's why they can add it. We can't assist you and neither can they, but you'll have to ... They can direct you to exactly where you need to go to get that corrected.

Shanen Wright: We also have a comment in here from Paula who has encountered a similar situation as Ricky with the incorrect direct. I'll add Paula's comment to that at this time. We also have a thank you from Ricky for the answer to Lisa for that. I just wanted to share that information. Another quick comment. I do have a communication from Shanthi also who would like to have a follow-up call one on one with us because we couldn't quite fit all that in the chat window. We have the telephone number documented here and I'm sure a member of the Quality Insights team will follow up shortly after this session so we can help with Shanthi 's question and as I mentioned, keep in mind, we are here to help at any time, not just during our QPP Live! Session that we do the third Thursday of every month at 9:30AM.

Next up we have a question from Janet who says, "We employ speech pathologists and audiologists in our physician practice. As I understand it, we do not have to report for these providers in 2017, correct?"

Kathy Wild: Hi, Janet, this is Kathy. You are correct. Speech pathologists and audiologists do not need to report for MIPS for this year and next year, we know. We won't find out about if they'll have to report in 2019 until CMS releases the rule next year.

Shanen Wright: Okay. A thank you also from Janet who says, "Just wanted to confirm that." It's nice to hear the appreciation on the line today. Another question from Ricky right now who asks, "After you have chosen the measures that you want to report on, where do we find the reporting codes for claim submission?"

Lisa Sagwitz: Hi, it's Lisa. Hi, again, Ricky. I know I sent you a lot of information late yesterday. That's really all that I have. If you're not finding what you need in those reporting codes, I'm thinking the next step would be to either call or email the QPP Help Desk, see if they would be of any assistance. Then I think I had heard that there was some type of billing or coding book that could be purchased. I wonder if that might be another resource to help billers and coders that it's not something that I have access too.

Kathy Wild: Lisa this is Kathy. The codes that are on the Quality Measures specification sheets that they are not the ones that Ricky's looking for?

Lisa Sagwitz: Ricky, on measures specification sheets that I sent yesterday, and I know it was later in the day when I sent those to you, is that information not what you need? Okay, influenza. Okay. Likely, okay. You're not sure. There was, and we can talk about this after the call and get into detail. On the QPP website, if you go to about the QPP, that's the last thing on the right on the homepage and then go to the resource library. You're going to be looking for quality measures specifications. That got released on December 29th.

Then underneath that, you're going to look for claims registry measures. They'll be listed by measure number. That takes a long time to download. It could be

five to 10 minutes to download. You might want to save it. Again, we can talk after this call in more detail if you'd like and talk through specific measures.

Shanen Wright: Thank you, Lisa. Next up we're going to go to question for Deborah. Then for those of you who are patiently waiting on the phone with a question, after we hear from our panel of experts with Deborah's response then we'll open up the telephone lines after that. Deborah says, "I have an," excuse me, "oculoplasty doctor that comes to our office once a month. I have not attested for him under the old meaningful use. Do I need to include him with the new MIPS program? We have five ophthalmologists and four optometrists in our group."

Kathy Wild: I am going to try to answer that for Deborah. Kathy. I'm going back and forth between some resources. The physician that comes to your office once a month, what I suggest you need to do is find out number one, does he work anywhere else, and even though you do not attest for him under meaningful use in previous years, you need to find out if anyone else did or did not attest for him. The reason I am saying that is because there is a hardship application that is now open. This applies to clinicians that did not attest to meaningful use ever before, including 2016. They can fill this hardship out so that they do not have the penalty applied in 2018, which is next year.

Remember, there is always a delay of two years between what you report and when that penalty or incentive is applied. You need to find out if he's ever attested before. The deadline for this application is October 1, 2017. We do have links for the hardship instructions and the applications which I'll see if Joe can put in there, otherwise we will definitely include those links when we finalize the questions after today's session.

What that is saying is that if you are going to include him with your group, then he would be eligible to not be penalized for that. The other thing is, I'm looking at your practice, MIPS is different from meaningful use in the past in that in meaningful use you had to report each eligible clinician, all their data individually. This year, you have the option to determine whether you want to report them individually again or you can report everybody under your tin as a group and include all their data together.

You have to make those decisions and decide if you want to include him or not. I hope that answers your question. If not, please submit another one and we'll try to get that clarified for you.

Shanen Wright: Thanks so much, Kathy. Keep in mind, everybody can continue submitting their questions in the Q&A box while we open up the telephone lines now. Please, if you don't have a question, make sure your phone is muted on your end. Lori, at this time, if you could unmute our telephone lines for any comments or questions from our participants today. Doesn't look like we have so many callers that we'll have to go state by state. Once the lines are unmuted, please jump in if you have a comment or question for our experts. We would love to hear from

you. Okay, no telephone comments or questions at this time. Laurie, can you re-mute the lines for us?

Let's go into our archives for one of our frequently asked questions while we wait a moment to see if anyone else has a question in the Q&A box. Please, if you do, type it now so that we can address it before today's episode of QPP Live! wraps up. This question asks, "Where will practices submit attest for the ACI category? Will it be as it was before through the registration and attestation site? Where will practices submit attest for IA category?" A multi-part FAQ there for our experts.

Kathy Wild: This is Kathy, I can take that one. CMS will be posting a link directly on their QPP website once they develop it. The platform will be accessed from the QPP website. I imagine there will be a place that will say attestation for the advancing care information category and there will probably be another section that will be attestation for the improvement activity category.

As I stated, none of that is available yet. We know that nobody will be able to attest until at least January 1st. Then the deadline to submit anything for 2017 is March 31st of next year.

Shanen Wright: Thank you Kathy. One more FAQ, then we'll open the lines one more time. Again, if you have that question, make sure to get it in there or we'll be wrapping up at 10:00 today.

This next FAQ says, "If a health system is participating in group reporting when attesting to the improvement activities, can it be just one practice participating, or do all have to participate or a percentage in order to qualify?"

Lisa Sagwitz: Hi, it's Lisa. I'll take that question. If you're doing group reporting, one provider performing that activity satisfies it. That's definitely a benefit of doing group reporting.

Shanen Wright: Okay. Thank you, Lisa for that response. Lori, let's give everyone one more chance in case anyone on our phone lines has any comments or questions today. Please, be advised that phone lines are now unmuted and we'd love to hear from you. Okay, hearing nothing, I will toss it back to our experts for any closing remarks before we wrap up today's edition of QPP Live!

Lisa Sagwitz: Hi, it's Lisa. I'll just let Shanthi know that I will give him or her a call. You're another Pittsburgher with a 412 area code like me. Ricky, I will also reach out to you following today's call and make sure I get you the appropriate measures that you're looking for.

Shanen Wright: Thank you, Lisa. Before we wrap up, actually, one more question has rolled in. I wanted to jump in and share that with our group. This is from Darci, who says, "Regarding the hardship application for 2017 EHR incentive program, I am

confused as to what scenario this would be applicable. I thought the EHR program ended in 2016."

Kathy Wild:

Okay, the 2016, okay, there's two hardship applications out there right now. One is the 2016 hardship for clinicians that have never ever attested to meaningful use before. Joe, I just sent you an email, if you can post that link, also. It's a little different than the one you previously posted. That one was for the clinician that was in the practice that had never reported meaningful use before. What that is it's telling CMS that this clinician is going to [inaudible 00:28:09] participate in MIPS this year, therefore please don't penalize them for 2018.

There is another application that's out there for 2017. What that is for, besides one of the extenuating circumstances of a tornado or something like that where you aren't able to participate due to these extenuating circumstances, that application is also for clinicians who choose to not report the advancing care information category because they are optional this year. That would be for nurse practitioners, physician assistants, certified registered nurse, anesthetists, and the clinical nurse specialists. Under the old meaningful use program, those clinician types, they could participate in the Medicaid EHR program but not Medicare. CMS determined because this is their first year of performing any type of advancing care information, they can fill out that form if they want to have that ACI category reweighted, which means they don't have to report that. However, their quality score, their quality category would be worth 85 points instead of just 60 points.

There's two different things out there. To clarify it we sent a newsletter just this past week to all of our clinicians that are on our email distribution list, which means that you are already working with us. Please reach out to us now in the chat box or Q&A if you have not received that newsletter, which might make it a little bit clearer. We have the two applications in there with their descriptions. If anybody is on the call that is not working with us yet, now would be a good time for Joe, if you could post the links where they can go ahead and register for our assistance. I hope that answers the question.

Shanen Wright:

One follow-up from Darci as she says, "If the provider is considered hospital based, this application wouldn't be necessary, correct?"

Kathy Wild:

Okay. For hospital based, correct. CMS has determined based on their definition of having 75% or more of their services in the hospital. They are on the NPI lookup tool, they are identified as that. You are correct that they do not need to do it. Please note that if you're doing group reporting, all of the NPI numbers under that tin are included in that. Even though he wouldn't have any data so it really wouldn't even matter, but you are correct that you do not have to fill it out for someone that is optional such as them.

Shanen Wright:

Thank you, Kathy. Leave in mind a lot of these ... Oh, we have a comment for Lisa?

Lisa Sagwitz: I was just going to ...

Kathy Wild: Yeah, Lisa. I just want to make sure that I'm correct about that. I think I am?

Lisa Sagwitz: You are. I think what makes it confusing with hardship forms is I don't ever remember two being available at the same time. If you need more clarification on that, definitely reach out to us, Darci and we'll make sure that you're filling out the correct one. Another thing that's confusing on those hardship forms is the year at the top. Again, we'll make sure you're following the correct path.

Kathy Wild: This is Kathy again. One thing we did just post up there, Joe, thank you, is one of our process transformation specialists in the field found a [inaudible 00:32:16] source one of our EHR vendors. We are completely vendor neutral. We found that this resource was very helpful because it listed different specific measured documents. It seems like this tool that's easily downloadable doesn't take as long as getting the one from the QPP website. It's the same information that is on the QPP website, just the vendor put it in a, what do I want to say - a more user-friendly format. The link to that is out there.

Lisa Sagwitz: Kathy is that the mdinteractive.com one?

Kathy Wild: Yes, it is.

Lisa Sagwitz: Okay.

Kathy Wild: Do you find that helpful also?

Lisa Sagwitz: I have never used it. I did not know about that. I'm going to definitely have to jot that down.

Shanen Wright: That's the great thing about QPP Live! Even our experts learn from one another in this interactive format. I believe that has taken care of all the questions in our Q&A box. If you have any, please type them quickly now. You may also want to refer to the chat box where you can see links to a lot of this information we're talking about. We are recording today's session and will also be sending out a transcript of it as well. If you heard an answer to a question that you didn't jot down quick enough, don't worry about it, we'll take care of that for you with both the recording and the transcript as well.

Any other parting remarks from our experts today?

Kathy Wild: This is Kathy. I just want to say thank you to everybody. We will also prepare a quality, oh, I'm sorry, a question and answer document to follow up everything that was discussed today. During that time, we will make sure that the answers are correct and accurate. We may give more of a description and answer at that time. We do apologize we know that last month's Q&As document has not been posted yet. That was a very lengthy call. We had a lot of questions on there that

required some research. It will be coming out in the next week or two. Thank you for your patience.

Shanen Wright:

Thank you, Kathy. Thank you all for joining us today with the great questions we had from Shanthi, Jill, Mindy, Ricky, Marci, Janet, Deborah, thank you so much for sending in your questions today. Keep in mind, as I said, we're here to help any time. You can contact any member of the Quality Insights team and we'll provide help for you. If you don't know that person's contact information, you can contact us at qpp-support@qualityinsights.org or 1-877-497-5065. Make sure and mark your calendar because coming up next month on the third Thursday, 9:30AM Eastern, that will be September 21st, we'll be doing another edition of QPP Live! You can join us for this live interactive session where we all come together and ask questions and learn from one another in a fun, fast paced, interactive format. On behalf of Joe Pinto, Lisa Sagwitz, Kathy Wild, Lori Fink and the entire Quality Insights team, we all hope you have a great day. Thanks so much for joining us for QPP Live!



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