

Modified Stage 2 Meaningful Use: Clinical Quality Measures (CQMs) Massachusetts Medicaid EHR Incentive Payment Program

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Today's presenter:

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The attestation deadline for
Program Year 2015 is
August 14, 2016

Agenda

- What are Clinical Quality Measures (CQMs) all about?
- The Expanding CQM Landscape
- Reporting on CQMs
- Common Issues
- Questions and Answers

What are CQMs all about?

CMS Measure Selection Process

- Conditions that contribute to the morbidity and mortality of the most Medicare and Medicaid beneficiaries
- Conditions that represent national public health priorities
- Conditions that are common to health disparities
- Conditions that disproportionately drive healthcare costs and could improve with better quality management
- Measures that would enable CMS, States, and the provider community to measure quality of care in new dimensions, with a stronger focus on parsimonious measurement
- Measures that include patient and/or caregiver engagement

What are CQMs all about?

National Quality Strategy (NQS) domains:

- Patient and Family Engagement
- Patient Safety
- Care Coordination
- Population and Public Health
- Efficient Use of Healthcare Resources
- Clinical Processes/Effectiveness

What are CQMs all about?

Clinical Process and Effectiveness

Initiation and Engagement of Alcohol & Other Drug Dependence Treatment	Hemoglobin A1c Test for Pediatric Patients	Major Depressive Disorder (MDD): Suicide Risk Assessment	Cataracts: 20/40 or Better Visual Acuity within 90 days Following Cataract Surgery
Controlling High Blood Pressure (A)	Diabetes: Urine Protein Screening	Anti-depressant Medication Management	Pregnant women that had HBsAg testing
Breast Cancer Screening	Diabetes: Low Density Lipoprotein (LDL) Management	ADHD: Follow-Up Care for Children Prescribed ADHD Medication (P)	Depression Remission at Twelve Months
Cervical Cancer Screening	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	Depression Utilization of the PHQ-9 Tool
Colorectal Cancer Screening	Coronary Artery Disease (CAD): Beta Blocker Therapy – Prior MI or LVEF <40%	Colon Cancer: Chemotherapy for AJCC Stage III Colon Cancer Patients	Children who have dental decay or cavities (P)
Use of Appropriate Medications for Asthma (P)	Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control	Breast Cancer: Hormonal Therapy for Stage IC-IIIC ER/PR Positive Breast Cancer	Primary Care Prevention Intervention as Offered by Primary Care Providers, including Dentists
Pneumonia Vaccination Status for Older Adults	Heart Failure (HF): ACE Inhibitor or ARB Therapy for LVSD	HIV/AIDS: Medical Visit	Preventive Care and Screening: Cholesterol – Fasting LDL-C Test Performed
Diabetes: Eye Exam	Heart Failure (HF): Beta Blocker Therapy for LVSD	HIV/AIDS: Pneumocystis pneumonia (PCP) Prophylaxis	Preventive Care and Screening: Risk-Stratified Cholesterol – Fasting LDL-C Test Performed
Diabetes: Foot Exam	Primary Open Angle Glaucoma (POAG): Open Nerve Evaluation	HIV/AIDS: RNA control for Patients with HIV	Dementia: Cognitive Assessment
Diabetes: Hemoglobin A1c Poor Control	Diabetic Retinopathy: Documentation of Presence /Absence of Macular Edema and Level of Severity of Retinopathy	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	Hypertension: Improvement in blood pressure

What are CQMs all about?

Efficient Use of Healthcare Resources

Appropriate Testing for Children with Pharyngitis (P)

Use of Imaging Studies for Low Back Pain (A)

Appropriate Treatment for Children with Upper Respiratory Infection (URI) (P)

Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients

Patient & Family Engagement

Functional status and assessment for knee replacement

Functional status assessment for hip replacement

Function status assessment for complex chronic conditions (A)

Oncology: Medical and Radiation – Pain Intensity Quantified

Patient Safety

Use of High-Risk Medication in the Elderly (A)

Falls: Screening for Future Fall Risk

Documentation of Current Medications in the Medical Record (A)

Cataracts: Complications within 30 days Following Cataract Surgery Requiring Additional Surgical Procedures

Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment

ADE Prevention and Monitoring: Warfarin Time in Therapeutic Range

Care Coordination

Closing the referral loop: receipt of specialist report (A)

Population and Public Health

Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents (P)

Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (A)

Chlamydia Screening for Women (P)

Childhood Immunization Status (P)

Preventive Care and Screening: Influenza Immunization

Maternal depression screening

Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan (A) (P)

Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (A)

What are CQMs all about?

Adult Recommended List

- Effective Use Of Healthcare Resources
 - Use of Imaging Studies for Low Back Pain
- Clinical Process/Effectiveness
 - Controlling High Blood Pressure
- Patient Safety
 - Use of High-Risk Medication in the Elderly
 - Documentation of Current Medications in the Medical Record
- Population/Public Health
 - Preventive Care and Screening: Tobacco Use: Screening & Cessation Intervention
 - Preventive Care and Screening: BMI Screening and Follow-Up
 - Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan
- Patient And Family Engagement
 - Functional status assessment for complex chronic conditions
- Care Coordination
 - Closing the referral loop: receipt of specialist report

What are CQMs all about?

Pediatric Recommended List

- Effective Use Of Healthcare Resources
 - Appropriate Testing for Children with Pharyngitis
 - Appropriate Treatment for Children with Upper Respiratory Infection (URI)
- Clinical Process/Effectiveness
 - Use of Appropriate Medications for Asthma
 - ADHD: Follow-Up Care for Children Prescribed ADHD Medication
 - Children who have dental decay or cavities
- Population/Public Health
 - Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents
 - Chlamydia Screening for Women
 - Childhood Immunization Status
 - Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan

What are CQMs all about?

Example: CQM Details

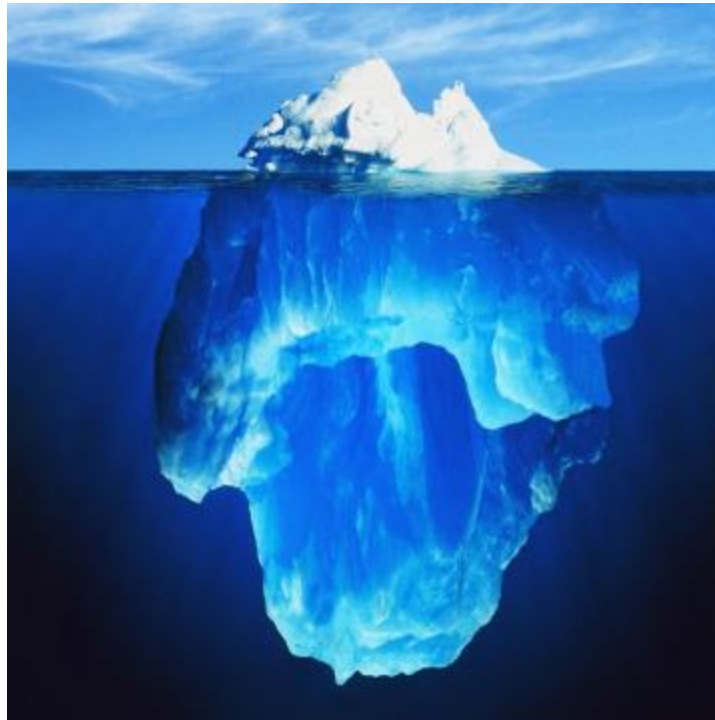
CMS eMeasure ID	NQF #	Measure Title and NQS Domain	Measure Description	Numerator Statement	Denominator Statement	Measure Steward	PQRS#
CMS125v5	2372	Breast Cancer Screening Domain: Clinical Process/ Effectiveness	Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer	Women with one or more mammograms during the measurement period or the 15 months prior to the measurement period	Women 51-74 years of age with a visit during the measurement period	National Committee for Quality Assurance	112 GPRO PREV-5

The Expanding CQM Landscape

The Expanding CQM Landscape

For the Medicaid EHR Incentive Payment Program, EPs must report on 9 out of 64 CQMs across 3 NQS domains.

However, that's just the tip of the iceberg...



The Expanding CQM Landscape

- Connections with MU Objectives
 - Objective #2: Clinical Decision Support
 - Objective #10: Public Health Reporting

- How does reporting CQMs through attestation relate to pay for performance or other CQM reporting programs?

- How does performance on CQMs impact reimbursements under alternative payment models?

- What role do CQMs play in quality improvement?

- How do I choose the right CQMs for me?

Reporting on CQMs

Reporting on CQMs

- Ensure CEHRT can report the data correctly (EHR dashboard)
- Test EHR reports (or check EHR dashboard) to ensure accuracy

The screenshot displays the 'Meaningful Use dashboard' for 'Sophie Scheidlinger MD | Union Square Practice'. The dashboard is filtered for the year 2015, Stage 1, Medicare, and a custom period from 10/3/2014 to 01/01/2015. The dashboard lists several measures with their current status and goals.

MEASURE	STATUS	GOAL	CURRENT	NUM/DEN	REPORT
1. CPOE for Medication Orders	1 to satisfy	>30%	0%	0/0	<input checked="" type="checkbox"/> Included
<input checked="" type="radio"/> CPOE for Medication Orders	1 to satisfy	>30%	0%	0/0	<input checked="" type="checkbox"/> Included
<input type="radio"/> CPOE for Medication Orders (Alternate)	1 to satisfy	>30%	0%	0/0	<input checked="" type="checkbox"/> Included
2. Drug-Drug & Drug-Allergy Interaction Checks	Incomplete	n/a	Incomplete	n/a	
3. Maintain Problem List	1 to satisfy	>80%	0%	0/0	
4. e-Prescribing	Excluded	>40%	0%	0/0	<input type="checkbox"/> Excluded
5. Active Medication List	1 to satisfy	>80%	0%	0/0	
6. Medication Allergy List	1 to satisfy	>80%	0%	0/0	
7. Record Demographics	1 to satisfy	>50%	0%	0/0	

Menu

All measures are included in the attestation. To claim an exclusion for a measure, switch the toggle to Exclude, and select your exclusion reason.

MEASURE	STATUS	GOAL	CURRENT	NUM/DEN	REPORT
Drug Formulary Checks	Incomplete	n/a	Incomplete	n/a	<input checked="" type="checkbox"/> Included
Clinical Lab Test Results	1 to satisfy	>40%	0%	0/0	<input checked="" type="checkbox"/> Included

Reporting on CQMs

MAPIR - CQM set selection screen

Manual Clinical Quality Measures

Please select one of the following three Clinical Quality Measure set options.

Only one Clinical Quality Measure (CQM) set can be completed. If you would like to switch to a different CQM set after one is started, use the **"Clear All"** button on the previously selected CQM set to enable the **"Begin"** button on a different CQM set. *Please note that the previously entered information will be cleared once the **"Clear All"** button is selected.*

Clinical Quality Measure - General	<input type="button" value="Begin"/>
Clinical Quality Measure - Adult Set	<input type="button" value="Begin"/>
Clinical Quality Measure - Pediatric Set	<input type="button" value="Begin"/>
Cancel and Choose Electronic	<input type="button" value="Cancel"/>

Reporting on CQMs

MAPIR - CQM measure selection screen

Meaningful Use Clinical Quality Measure Worklist Table

You have chosen the general Clinical Quality Measure (CQM) set. Select a minimum of nine (9) CQMs from at least three (3) different domains. There are six (6) domains and sixty-four (64) CQMs from which to choose. The domain of each CQM is shown in the title bar of each individual CQM. If you wish to select the adult recommended CQMs or the pediatric recommended CQMs select the **"Return to Main"** button and then choose the recommended CQM option you wish to answer. Please note, as a minimum you must select nine (9) CQMs from three (3) different domains before proceeding to the next screen.

If you do not want to complete these nine measures then select the **"Return to Main"** button below and use the **"Clear All"** button on the previously selected Clinical Quality Measure General set line to enable the **"Begin"** button on a different CQM set. The previously entered information will be cleared once the **"Clear All"** button is selected. When all CQMs have been edited and you are satisfied with the entries, select the **"Return to Main"** button to access the main attestation topic list.

Please Note: Clinical quality measures are sorted by Domain category and then by Measure Number.

Clinical Quality Measure list Table

Measure#	Title	Domain	Selection
CMS50 v4.0.000	Closing the Referral Loop: Receipt of Specialist Report	Care Coordination	<input type="checkbox"/>
CMS52 v4.1.000	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS61 v5.1.000	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS62 v4.0.000	HIV/AIDS: Medical Visit	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS64 v5.1.000	Preventive Care and Screening: Risk-Stratified Cholesterol - Fasting Low Density Lipoprotein (LDL-C)	Clinical Process/Effectiveness	<input type="checkbox"/>
CMS65 v5.1.000	Hypertension: Improvement in Blood Pressure	Clinical Process/Effectiveness	<input type="checkbox"/>

Reporting on CQMs

MAPIR - CQM selected measures list

Meaningful Use Clinical Quality Measures

To edit information, select the **"EDIT"** button next to the measure that you would like to edit. All progress on entry of measures will be retained if your session is terminated.

When all measures have been edited and you are satisfied with the entries, select the **"Return"** button to access the main attestation topic list.

Meaningful Use Clinical Quality Measure List Table


Measure#	Title	Domain	Entered	Select
CMS50 v4.0.000	Closing the Referral Loop: Receipt of Specialist Report	Care Coordination		<input type="button" value="EDIT"/>
CMS52 v4.1.000	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS61 v5.1.000	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS62 v4.0.000	HIV/AIDS: Medical Visit	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS129 v5.0.000	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS146 v4.0.000	Appropriate Testing for Children with Pharyngitis	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS154	Appropriate Treatment for Children	Efficient Use of		<input type="button" value="EDIT"/>

Reporting on CQMs

Example Data Entry Screen #1

Attestation Meaningful Use Measures

Clinical Quality Measure 1

 Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain: Efficient Use of Healthcare Resources
Measure Number: CMS146 v3
Measure Title: Appropriate Testing for Children with Pharyngitis
Measure Description: Percentage of children 2-18 years of age who were diagnosed with pharyngitis, ordered an antibiotic and received a group A streptococcus (strep) test for the episode.

Numerator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%): A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.
Exclusion: A positive whole number, including zero. Use the "Click HERE" above for a definition.


* Numerator: * Denominator: * Performance Rate (%): * Exclusion:

Reporting on CQMs

Example Data Entry Screen #2

Attestation Meaningful Use Measures

Clinical Quality Measure 24

 Click [HERE](#) to review CMS Guidelines for this measure.

When ready click the **Save & Continue** button to review your selection, or click **Previous** to go back. Click **Reset** to restore this panel to the starting point.

(*) Red asterisk indicates a required field.

Responses are required for the clinical quality measure displayed on this page.

Domain: Clinical Process/Effectiveness
Measure Number: CMS145 v3
Measure Title: Coronary Artery Disease (CAD): Beta-Blocker Therapy - Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%)
Measure Description: Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12 month period who also have a prior MI or a current or prior LVEF <40% who were prescribed beta-blocker therapy.

Numerator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Denominator: A positive whole number, including zero. Use the "Click HERE" above for a definition.
Performance Rate(%): A percent value between 0.0 and 100.0. Use the "Click HERE" above for a definition.
Exception: A positive whole number, including zero. Use the "Click HERE" above for a definition.

Population Criteria 1: Patients with left ventricular systolic dysfunction (LVEF<40%)

* Numerator 1: * Denominator 1: * Performance Rate 1(%): * Exception 1:

Population Criteria 2: Patients with a prior (resolved) myocardial infarction

* Numerator 2: * Denominator 2: * Performance Rate 2(%): * Exception 2:

Reporting on CQMs

Meaningful Use Clinical Quality Measures

To edit information, select the **"EDIT"** button next to the measure that you would like to edit. All progress on entry of measures will be retained if your session is terminated.

When all measures have been edited and you are satisfied with the entries, select the **"Return"** button to access the main attestation topic list.

Meaningful Use Clinical Quality Measure List Table

Measure#	Title	Domain	Entered	Select
CMS50 v3	Closing the referral loop: receipt of specialist report	Care Coordination	Numerator = 25 Denominator = 100 Performance Rate (%) = 10.0	<input type="button" value="EDIT"/>
CMS52 v3	HIV/AIDS: Pneumocystis jiroveci pneumonia (PCP) Prophylaxis	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS61 v4	Preventive Care and Screening: Cholesterol - Fasting Low Density Lipoprotein (LDL-C) Test Performed	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS125 v3	Breast Cancer Screening	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS126 v3	Use of Appropriate Medications for Asthma	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS127 v3	Pneumonia Vaccination Status for Older Adults	Clinical Process/Effectiveness		<input type="button" value="EDIT"/>
CMS129 v4	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS146 v3	Appropriate Testing for Children with Pharyngitis	Efficient Use of Healthcare Resources		<input type="button" value="EDIT"/>
CMS179 v3	ADE Prevention and Monitoring: Warfarin Time in Therapeutic Range	Patient Safety		<input type="button" value="EDIT"/>

Reporting on CQMs

Manual Clinical Quality Measures

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<input checked="" type="checkbox"/>	Clinical Quality Measure - General	9/9	<input type="button" value="EDIT"/> <input type="button" value="Clear All"/>
<input type="checkbox"/>	Clinical Quality Measure - Adult Set		
<input type="checkbox"/>	Clinical Quality Measure - Pediatric Set		
Cancel and Choose Electronic			<input type="button" value="Cancel"/>

Note:

When all topics are marked as completed, select the **"Save & Continue"** button to complete the attestation process.

Common Issues

Common Issues: CQMs



- EHR vendor does not provide CQMs that are relevant to the EP's scope of practice
- Confusion over which quality measures apply to which program(s)

Questions?

- [CMS 2015 Program Requirements page](#)
- [MeHI Medicaid EHR Incentive Program page](#)
- [MeHI 2015 Supporting Documentation Requirements Guide](#)
- [CMS Clinical Quality Measures Tipsheet](#)
- [CMS Recommended Pediatric CQMs](#)
- [CMS Recommended Adult CQMs](#)
- [CMS 2016 CQM Measures Table](#)

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