

# QPP RY 2021 Proposed Rule

## SHP Lunch 'n' Learn Fall Series

Aaron Higgins

Data & Quality Manager

Strategic Healthcare Partners



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## **August 20 – QPP 2021 Proposed Rule**

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# Speaker – Aaron Higgins

- Data & Quality Manager - SHP
- 11+ years experience with Federal Quality programs:
  - Meaningful Use
  - PQRS
  - QPP/MIPS
- Joined SHP in the Spring 2019



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**SHP**  
Strategic Healthcare Partners

# Topics

1. Recap & What's to Come
2. Proposed Rule
  1. MVPs
  2. Scoring Changes
  3. Category Changes
  4. APMs
3. Initiative to Transform Rural Health
4. Q&A



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# Recap & What's to Come



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# Alphabet Soup

- ACO
  - Accountable Care Organization
- APMs
  - Alternative Payment Models
- APP
  - APM Performance Pathway
- MACRA
  - Medicare Access and CHIP Reauthorization Act of 2015
- MIPS
  - Merit-based Incentive Payment System
- MVP
  - MIPS Value Pathways
- QPP
  - Quality Payment Program



# Types of APMs

- Advanced APM
  - A track of the QPP that offers a 5% incentive for achieving thresholds
  - Most ACOs are an Advanced APM
  - <https://qpp.cms.gov/apms/advanced-apms>
- Advanced APMs & MIPS APMs
  - Many Advanced APMs are also MIPS APMs
- All-Payer/Other-Payer Option
  - Clinicians participate in APM(s) run by private payer(s) AND a Adv. APM
  - <https://qpp.cms.gov/apms/all-payer-advanced-apms>
- MIPS APMs
  - Has MIPS-eligible clinicians as participants
  - Receive special scoring
  - Requires an agreement w/ CMS
  - <https://qpp.cms.gov/apms/mips-apms>



# MIPS Categories

- Quality

- At least 6 measures
- Pick from a list of hundreds
  - CQM, eCQM, QCDR, Administrative Claims, Medicare Part B Claims, ~~CMS~~ Web Interface, and CAHPS for MIPS

- Cost

- Reported from claims data
- No insight until after scoring

- Promoting Interoperability

- Formerly known as Advancing Care Information
- Formerly known as Meaningful Use

- Improvement Activities

- 2-4 Activities
- 50% of clinicians must participate





# QPP Goals & Future

- A strong push towards APMs
- Less changes than planned for due to COVID-19
- Introducing Alternative Payment Model (APM) Performance Pathway (APP)
- Final Rule in November



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# Let's pause...

- Any questions?
- Quick Poll 1. How do you participate in QPP today?



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# Proposed Rule RY 2021



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# MVPs

- Proposed in 2020 as an opt-in option
- “Lite” APM model
- Pre-selected, complementary measures & activities in all 4 categories

## *Proposed Changes:*

- Start MVPs in 2022
- Revise Guiding Principles
- Create MVP development criteria for the public
- Create a process to create/propose MVPs



# Participation & Reporting Options

- Participation as:
  - An individual
  - A group
  - A virtual group
  - An APM Entity
  
- End of APM Scoring Standard



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# Scoring Changes



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# Weights & Performance Threshold

- Weights
  - Decreasing Quality from 45% - 40%
  - Increasing Cost from 15% to 20%
  - No change to PI (25%) and IA (15%)
- Performance Threshold
  - Penalty avoidance score will be moved up to 50 points from 45
  - Exceptional performance remains at 85 points



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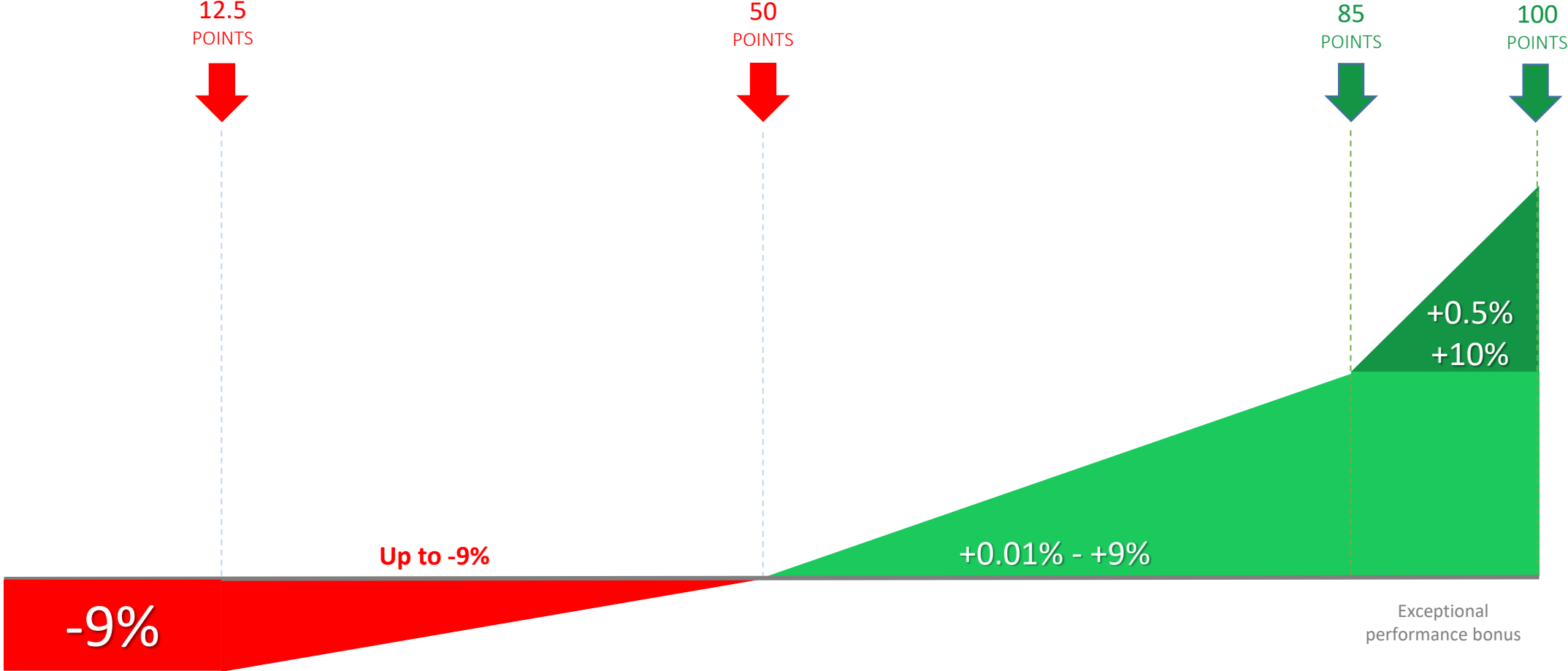
# Proposed Weight Changes

2020	2021	2022*
Quality = 45%	Quality = 40%	Quality = 30%
PI = 25%	PI = 25%	Cost = 30%
Cost = 15%	Cost = 20%	PI = 25%
IA = 15%	IA = 15%	IA = 15%
		*Required by MACRA





# RY 2021 Performance Thresholds



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# A quick poll

- Any questions?
- Quick Poll – 2. With the change in scoring, do you think you'll score higher or lower in 2021?



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# Category Changes



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# Quality Category Changes

1. 206 measure changes, including 14 removals
2. Changes to specialty sets
3. Changes to Collection Types
4. Benchmarks & Scoring Flexibilities



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# Measure Changes Detail

- **New Measures** (Admin Claims only, no CQM #)
  - Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate
  - Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)
- **Removed Measures** (CQM #)
  - 24, 48, 69, 146, 333, 337, 348, 390, 408, 412, 414, 435, 437, & 458



# Changed Measures

- **Substantively changed** (CQM #)

- 001, 005, 006, 007, 008, 012, 014, 019, 047, 052, 065, 066, 093,  
107, 110, 112, 116, 117, 118, 119, 126, 127, 128, 130, 134, 137,  
141, 143, 144, 145, 147, 176, 178, 180, 181, 182, 191, 195, 217,  
218, 219, 220, 221, 222, 226, 236, 238, 243, 265, 268, 277, 281,  
282, 283, 286, 288, 290, 291, 293, 305, 309, 317, 318, 326, 331,  
332, 335, 336, 364, 370, 374, 377, 378, 379, 382, 383, 385, 386,  
387, 391, 394, 395, 400, 405, 410, 415, 416, 418, 419, 431, 438,  
439, 444, 450, 451, 452, 453, 455, 457, 459, 460, 461, 462, 464,  
468, 469, 470, 471, 473, 476, & 478

# Collection Types

## Keep:

- Electronic Clinical Quality Measures (eCQMs)
- Medicare Part B Claims Measures
- MIPS Clinical Quality Measures (MIPS CQMs)
- QCDR Measures

## Remove:

- CMS Web Interface Measures



# Benchmarks & Scoring Flexibilities

## Representative sample

- COVID-19 Impacted Data Submission for 2019
- 2021 Reporting Period vs 2021 Performance Period

## Flexibilities

- Truncate 12-month measure periods to 9



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# Improvement Activities

- **Modifying:**

- IA\_BE\_4 - Engagement of patient through implementation of improvements in patient portal
  - Adding in caregivers as qualified users of the portal
- IA\_AHE\_7 - Comprehensive Eye Exams
  - Clarifying that this activity is for:
    - Non-ophthalmologists / optometrists
    - Ophthalmologists/optometrists caring for underserved patients at no cost; or
    - Any clinician providing literature and/or resources on the importance of comprehensive eye exams



# Promoting Interoperability Change

1. Query of PDMP – Optional worth 10 Points
2. Changed Support Electronic Referral Loops by Receiving and Incorporating Health Information to Support Electronic Referral Loops by Receiving and *Reconciling* Health Information
3. Adding Health Information Exchange Bidirectional Data Exchange as an alt. measure



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# Cost Category Changes

- **Total Per Capita Costs (TPCC)**
  - Adding Telehealth services



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# A Couple of Polls

Any questions?

Quick Poll – 3. Have you reviewed your 2019 Score on the QPP Portal?

Quick Poll – 4. What category did you have the most trouble with in 2019?



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# Complex Patient Bonus

- **For 2020 Only**
  - Worth 10 bonus points
- “Complex” = higher HCC coding levels
  - You are coding HCC appropriately, right?



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# Exclusions/Exemptions

- Extreme and Uncontrollable Circumstances Reweighting
  - Burden of proof lies on applicant
  - Was applied automatically for 2019 submissions, will not be for 2020
- Changes for 2020+
  - Allow APMs to apply for EUCR
  - Change would be also for 2021 and beyond



# APMs and Advanced APMs



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# APM Performance Pathway

- “APP”
- Requires valid participation in a MIPS APM
- Reportable on the individual, group or APM-level
- Fixed set of measures
- Cost category weighted at 0%
- IA auto-completed
- PI required
- Quality would be 6 measures only, no extras



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# Adv. APMs

- Threshold Scoring
  - Tweaking the formula to allow a more-fair attribution of patients in an APM entity
- Targeted Review of Qualifying APM Participants
  - Introducing a process that will allow APMs to request a review of an eligible clinician's participation status



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# Questions About APMs?

Any questions?

Quick Poll – 5. Do you or have you considered participating in QPP via an APM?



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# Initiative to Transform Rural Health



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# CHART

- Community Health Access and Rural Transformation Model
  - Announced last week
  - 15 Rural “Pilot” Communities
  - \$75m in seed funding
  - Assists Rural Providers in joining ACOs
  - Starts in 2021
- Additional information to be released here:  
<https://innovation.cms.gov/innovation-models/chart-model>



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# What You Need to Do Next

- Read the Proposed Rule Fact Sheet (in Handouts)
- Provide Feedback to CMS via the Formal Comment Process no later than Oct 5<sup>th</sup> @ 5pm:

<https://www.federalregister.gov/documents/2020/08/17/2020-17127/medicare-program-cy-2021-payment-policies-under-the-physician-fee-schedule-and-other-changes-to-part>

- Don't know what to do next? Contact us for a consult!



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# Got Questions?

Send us your QPP questions:  
[quality@shpllc.com](mailto:quality@shpllc.com)

Complete our webinar survey!



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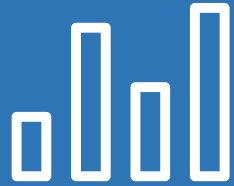
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# Who is SHP?



## Performance Analytics

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## Provider Enrollment

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## Managed Care Contracting

Our contracting team has relationships with insurance companies and can help you negotiate the best fee schedules.



## IPA & CIN Management

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