Quality Payment PROGRAM

CMS Web
Interface Support
Call: 2024 Data
Submission

February 05, 2025



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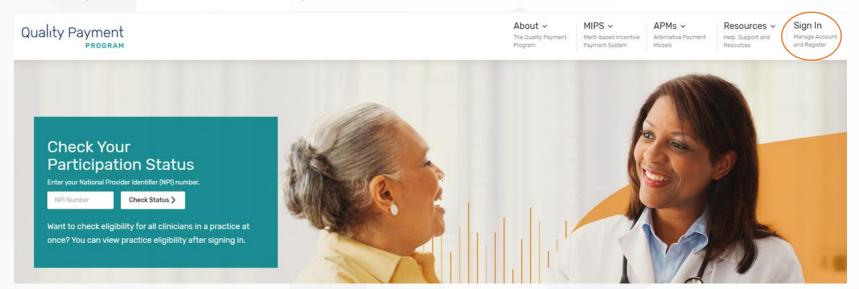


Announcements and Reminders

Key Dates

2024 Submission Period (January 2, 2025 – March 31, 2025)

- The CMS Web Interface will close at 8 p.m. ET on March 31, 2025.
 - Any data within the CMS Web Interface as of this date and time will be considered your final submission.
 - You won't be able to input or change any information after 8 p.m. ET on March 31, 2025.
 - The CMS Web Interface is accessible via the "Sign In" link on the <u>Quality Payment Program (QPP)</u> website. If you're a Medicare Shared Savings Program ACO's QPP Security Official or QPP Staff User contact in the ACO Management System (ACO-MS), then you can sign in to the QPP website using your ACO-MS username and password.





Upcoming CMS Web Interface Support Calls

- Bi-Weekly Support Calls
 - Note: All bi-weekly Support Calls listed below will be held on Wednesdays from 1 p.m. 2:30 p.m. ET.
 - February 19, 2025
- For more information and registration links, please review the <u>2024 CMS Web Interface Support Flyer</u> (PDF, 210 KB).
- If you encounter any issues with registration or technical issues with your computer during the Support Call, please email CMSQualityTeam@Ketchum.com.



CMS Web Interface Application Programming Interface

• 2024 CMS Web Interface Application Programming Interface (API) is available all year for testing in the Developer Preview Environment. There's <u>narrative documentation</u> and <u>swagger documentation</u> for users reporting the CMS Web Interface measures via an API.





Other CMS Approved Reason Requests

Submitting Requests to Skip Patients

- Submitting your request(s) for an "Other CMS Approved Reason" during the last days of the submission period could cause your request to not be processed.
 - Submit your request(s) for an "Other CMS Approved Reason" as soon as possible.
 - "Other CMS Approved Reason" Request(s) submitted after Monday, March 24, 2025, may not be processed prior to the close of submission.
- For more information on how to submit an "Other CMS Approved Reason" request, please review page 45 of the 2024 CMS Web Interface User Guide (PDF, 5MB).





Measure Overview and Frequently Asked Measure Questions

Measures to be Discussed

- DM-2: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)
- CARE-2: Falls: Screening for Future Fall Risk
- HTN-2: Controlling High Blood Pressure
- PREV-7: Preventive Care and Screening: Influenza Immunization



DM-2: DIABETES: HEMOGLOBIN A1C (HBA1C) POOR CONTROL (>9%)

Overview

- Intent: For patients 18 75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.
- 2024 DM-2 Use of Telehealth:
 - Documentation of most recent HbA1c result may be completed during a telehealth encounter.



DM-2: DIABETES: HEMOGLOBIN A1C (HBA1C) POOR CONTROL (>9%) (cont.)

#	Question	Response
1	For the 2024 CMS Web Interface DM-2: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) (2024 CMS Web Interface DM-2) measure, will patients only be included in the measure if they have a diagnosis of diabetes during the measurement year, or will they be included if they have a prior diagnosis, but no diagnosis in the measurement year?	The patient must have an active diagnosis of diabetes during the measurement period OR an active diagnosis of diabetes during the year prior to be included in the measure.
2	For the 2024 CMS Web Interface DM-2 measure, do I use the date the blood was drawn or the date of the lab results?	It's appropriate to use the following priority ranking for the numerator of the 2024 CMS Web Interface DM-2 measure: Lab report draw date Lab report date Flow sheet documentation Practitioner notes Other documentation
3	Will HbA1c results from any setting be acceptable for the numerator for the 2024 reporting period?	Yes. The measure doesn't limit the numerator to a specific setting. To meet the intent of the measure, there must be medical record documentation of the following: Diagnosis of diabetes as defined by the 2024 CMS Web Interface DM-2 measure, a distinct HbA1c value, and the date the blood was drawn.



DM-2: DIABETES: HEMOGLOBIN A1C (HBA1C) POOR CONTROL (>9%) (cont.)

#	Question	Response
4	Is an HbA1c result reported during a telehealth visit acceptable?	Yes. Documentation of the most recent HbA1c result may be completed during a telehealth encounter.
5	Are Continuous Glucose Monitoring (CGM) system results acceptable for the numerator for the 2024 CMS Web Interface DM-2 measure?	No. The 2024 CMS Web Interface DM-2 measure doesn't include CGM results as a way to meet performance for the measure. Report the most recent HbA1c value documented in the medical record. Documentation must include a distinct numeric HbA1c result and the date the blood was drawn.
6	Some patients have at home HbA1c testing kits, meaning the patient is checking their lab values at home. Is this allowed for the 2024 CMS Web Interface DM-2 measure?	No. Don't include HbA1c levels reported by the patient. The 2024 CMS Web Interface DM-2 measure doesn't allow patient-reported HbA1c values as qualification to meet the numerator.
7	Are patients with a diagnosis of secondary diabetes eligible for the denominator of the 2024 CMS Web Interface DM-2 measure?	Yes. The 2024 CMS Web Interface DM-2 Measure Specification specifies to include all patients with any diagnosis of diabetes.



Overview

- Intent: To screen patients 65 years of age and older for future fall risk during the measurement period.
- 2024 CARE-2 Use of Telehealth:
 - Screening for future fall risk may be completed during a telehealth encounter.



CARE-2: FALLS: SCREENING FOR FUTURE FALL RISK (cont.) Quality Payment

#	Question	Response
1	Who can perform the screening for future fall risk for the 2024 CMS Web Interface CARE-2: Falls: Screening for Future Fall Risk (2024 CMS Web Interface CARE-2) measure?	The measure isn't limited to a particular clinician type. The quality action can be completed by anyone the organization considers qualified.
2	Is documentation of an inpatient or emergency department falls screening acceptable for the 2024 CMS Web Interface CARE-2 measure?	Yes. The measure isn't limited to a particular setting.
3	Is a falls screening performed during a phone call with the patient where no encounter is billed acceptable for the 2024 CMS Web Interface CARE-2 measure?	Yes. The screening and documentation of results for future fall risk may be completed during a telehealth encounter. Telehealth encounters for the CMS Web Interface aren't limited to Medicare billable encounters (information may be obtained over the phone, email, etc.). Medical record documentation of any history of falls screening during the measurement period is acceptable to determine performance for the numerator.
4	What documentation needs to be captured for this measure for non-ambulatory patients to be excluded from the 2024 CMS Web Interface CARE-2 measure?	Non-ambulatory patients aren't excluded from the measure. The expectation is that a falls screening is completed during the measurement period for each patient qualified for the measure.



CARE-2: FALLS: SCREENING FOR FUTURE FALL RISK (cont.) Quality Payment

experienced a fall or problems with gait or balance. A specific screening tool isn't required for this measure; however, potential screening tools include the Morse Fall Scale and the timed Get-Up-And-Go test. Numerator Guidance: Documentation of no falls is sufficient. Medical record must include documentation of screening performed. Any history of falls screening during the measurement period is acceptable as meeting the intent of the measure. A gait or balance assessment meets the intent of the measure. If, after reviewing the medical record, you find supporting documentation	#	Question	Response
	5	reflect to meet the intent of the 2024 CMS Web	Screening for future fall risk is an assessment of whether an individual has experienced a fall or problems with gait or balance. A specific screening tool isn't required for this measure; however, potential screening tools include the Morse Fall Scale and the timed Get-Up-And-Go test. Numerator Guidance: Documentation of no falls is sufficient. Medical record must include documentation of screening performed. Any history of falls screening during the measurement period is acceptable as meeting the intent of the measure. A gait or balance assessment meets the intent of the measure.
of this measure.			that meets the numerator guidance criteria, then it would meet the intent



Overview

• Intent: For patients 18 - 85 years of age who had a diagnosis of essential hypertension starting before and continuing into the first 6 months, or starting during the first 6 months of the measurement period, and whose most recent blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.

2024 HTN-2 Use of Telehealth:

- A blood pressure reading may be taken by either a clinician, or a remote monitoring device and conveyed by the patient to their clinician during a telehealth encounter.
 - Do not include blood pressure readings taken by the patient using a nondigital device such as with a manual BP cuff and a stethoscope.



HTN-2: CONTROLLING HIGH BLOOD PRESSURE (cont.)

#	Question	Response
1	For the 2024 CMS Web Interface HTN-2: Controlling High Blood Pressure (2024 CMS Web Interface HTN-2) measure, if a clinician enters a blood pressure reading from a telehealth/telephone visit based on numbers from the patient's remote home blood pressure (BP) device, would this count?	The measure allows for telehealth encounters. Please refer to the encounter codes found within the 2024 CMS Web Interface HTN Coding Document. Blood pressure readings taken by a remote monitoring device and conveyed by the patient to the clinician are acceptable. Don't include BP readings taken by the patient using a non-digital device such as
2	What is the definition of a "remote monitoring device?"	with a manual BP cuff and a stethoscope. The 2024 CMS Web Interface HTN-2 Measure Specification doesn't define a remote monitoring device. It's the clinician's responsibility and their discretion to confirm the remote monitoring device used to obtain the BP is considered acceptable and reliable.
3	For the 2024 CMS Web Interface HTN-2 Measure Specification, is a BP reading taken during an urgent care visit acceptable?	Yes. Blood pressure readings from urgent care visits are acceptable for this measure if it's the most recent BP documented in the medical record. Urgent care visits are included in sampling based on the Encounter Codes tab of the 2024 CMS Web Interface HTN-2 Coding Document.



#	Question	Response
4	Can we use a calculated average of multiple BP values taken over the course of a week via a remote monitoring device?	No, it isn't acceptable to submit a BP average (average of 2 or more BP readings). The measure requires the most recent BP documented within the medical record during the measurement period be reported for the numerator. If there are multiple BP readings on the same day, use the lowest systolic and the lowest diastolic reading as the most recent BP reading. For example, BP readings of 110/80, 130/70, and 125/60 are documented in the medical record during a single day and could be reported as 110/60. Ranges and thresholds don't meet criteria for this measure. A distinct numeric result for both the systolic and diastolic BP reading is required for numerator compliance. Please ensure you're using the 2024 CMS Web Interface HTN-2 Measure Specification for the program for which you're reporting.



PREV-7: PREVENTIVE CARE AND SCREENING: INFLUENZA IMMUNIZATION

Overview

• Intent: For patients aged 6 months and older seen for a visit during the measurement period to receive an influenza immunization OR who reported previous receipt of an influenza immunization.

2024 PREV-7 Use of Telehealth:

 Report of previous receipt of an influenza immunization during the flu season may be completed during a telehealth encounter. The influenza immunization itself can't be completed during a telehealth encounter.



PREV-7: PREVENTIVE CARE AND SCREENING: INFLUENZA IMMUNIZATION (cont.)

#	Question	Response
1	For the 2024 CMS Web Interface PREV-7: Preventive Care and Screening: Influenza Immunization (2024 CMS Web Interface PREV-7) measure, can we report a patient's influenza immunization status for a flu season prefilled with "Not sampled for this season" if we locate it in our medical records?	No, it isn't possible to update "Not sampled for this season" even if evidence of the flu vaccine is located in the medical records. This is in alignment with all of the measures included in the CMS Web Interface. For example, for the PREV-6: Colorectal Cancer Screening measure if a patient wasn't attributed to that measure, but documentation was located that the patient received the appropriate screening, the patient couldn't be added to the sample for the PREV-6 measure.





Resources and Where To Go For Help

2024 CMS Web Interface Resources

- QPP Resource Library
 - 2024 CMS Web Interface Support Call Flyer (PDF, 210 KB)
 - Performance Year 2024 APM Performance Pathway: CMS Web Interface Measure Specifications and Supporting Documents for ACOs (ZIP, 6 MB)
 - 2024 CMS Web Interface Data Dictionary (PDF, 659 KB)
 - 2024 CMS Web Interface User Demo Videos (Playlist)
 - 2024 CMS Web Interface FAQs (PDF, 924 KB)*
 - 2024 CMS Web Interface User Guide (PDF, 4 MB)
 - Performance Year 2024 APM Performance Pathway: CMS Web Interface Measure Benchmarks for ACOs (PDF, 1 MB)
 - 2024 Shared Savings and Losses, Assignment and Quality Performance Standard Methodology
 Specifications (Version #12) (PDF, 2.1 MB)
 - 2024 CMS Web Interface Sampling Methodology (PDF, 288 KB)
- Shared Savings Program Website
- Quality Resources and Information
- ACO Spotlight Newsletter



Where To Go For Help

- Contact the QPP Service Center by email at <u>QPP@cms.hhs.gov</u>, by <u>creating a QPP</u>
 <u>Service Center ticket</u>, or by phone at 1-866-288-8292 (Monday-Friday, 8 a.m. 8 p.m.
 ET).
 - To receive assistance more quickly, please consider calling during non-peak hours—before 10 a.m. and after 2 p.m. ET.
 - People who are deaf or hard of hearing can dial 711 to be connected to a Telecommunications Relay Services (TRS) Communications Assistant.
- Shared Savings Program:
 - Email: <u>sharedsavingsprogram@cms.hhs.gov</u>



Question and Answer Session

- To ask a question, raise your hand and we'll unmute your line, or submit your question via the Q&A box.
- To ask a question live, you must have a working microphone.
- Speakers will address as many questions as time allows.

