Centricity CPS & CEMR Clinical Quality Reporting

MIPS and CPC+ Group FAQ (2019)

This FAQ answers questions specific to group reporting for the 2019 performance year. Please reference our Customer Portal at https://centricity.athenahealth.com for additional information.

- Quality Reporting Resource page (<u>CPS</u>, <u>CEMR</u>)
- Quality Submission Services (QSS) page (<u>CPS, CEMR</u>)

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Q: Do you have to enroll in Quality Submission Services (QSS)?

Yes, the ability to configure groups for aggregated measure results is only available if you enroll in QSS. If all you want is access to QRDA files, QSS enrollment is still required, as group QRDA files require the aggregated measure results that QSS allows for.

Q: What are the costs for enrolling as a group in Quality Submission Services (QSS)?

- MIPS groups are \$400/provider, which allows for any combination of performance categories: Promoting Interoperability, Quality, and Improvement Activities.
- CPC+ practices are \$500/provider.

Note: If supported by a Value-Added Reseller, contact them for pricing.

Q: Does enrollment in Quality Submission Services (QSS) require athenahealth to submit my data?

No. A customer can choose to enroll and not authorize athenahealth to submit. QSS costs remain the same whether you choose to authorize or not.

- Choosing to enroll in QSS provides the ability to configure your groups, calculate aggregated measure results, and receive access to group QRDA files.
- Choosing to authorize your groups during the CMS reporting period (i.e. Q1) will automatically kick-off our athenahealth CMS submission process and a QSS bookmark will be generated in CQR. A CMS submission confirmation number will also be populated in CQR for your long-term reference. If you choose not to authorize, athenahealth will not submit any data to CMS.

Q: What are the software requirements to report by group in CQR?

In 2019, CPS 12.3 & CEMR 9.12 are required for MIPS or CPC+ Groups.

CPS 12.3 / CEMR 9.12 or higher:

Performance Year	Performance Category	MIPS	CPC+	Multiple Locations of Care	Multiple Tax Ids
2019	Promoting Interoperability	Yes	N/A	Yes*	Yes*
	Quality	Yes	Yes	Yes*	Yes*
	Improvement Activity	Yes	N/A	N/A	N/A

^{*} See next question for resending requirements

Q: Do I need to resend my data to CQR after I upgrade?

If in 2019, you upgraded from a release lower than CPS 12.0 / CEMR 9.8 SP13, you must resend CCDA data to CQR using your Clinical Quality Measures Reporting subscription starting from January 1, 2019.

Resend instructions on our Customer Portal: CQR Data Resend Instructions

Q: What is required for a provider to be included in a CPC+ or MIPS group?

An Encounter Order is required for quality measures. PI measures require either an encounter order or document type to identify encounters for 'seen by' or an office visit.

Providers are associated w/ a location of care based on the encounter order location or the document location when using document type. The location of care should be associated with the group Tax ID for MIPS or CPC+ in CQR's Organizational Structure and QSS when creating the group practice.



Q: Can I submit as part of a group and as an individual?

Yes, CMS allows dual submissions if one is as a group and the other is as an individual. CMS will use the results that are more favorable to the clinician. In QSS, enroll each clinician that will dual submit as both group and individual. After authorizing the group, you can then authorize the individual clinician.

Q: Can I delete a group after I've created it in QSS?

There is a delete button on the group enrollment screen that will inactivate the group. Please understand that we bill for access to group reporting so deleting a group does not prevent an invoice for that group. To understand billing ramifications, please refer to the QSS Agreement and QSS order signed when you enrolled.

Document Changes

May 20, 2019	Initial 2019 version
Oct 16, 2019	Updated links to reference new athenahealth customer portal Updated question on dual submissions