Comprehensive Primary Care Plus (CPC+)

A new model for primary care in America

CPC+ Electronic Clinical Quality Measure Reporting Overview
for the 2018 Measurement Period

This document covers the reporting requirements for the CPC+ electronic clinical quality measures (eCQMs) for the 2018 Measurement Period of January 1, 2018 to December 31, 2018 and provides the final list of measures for this period. This overview also contains key information about eCQMs for CPC+ practices, CPC+ health IT vendor partners, CPC+ payers, and other CPC+ stakeholders to assist with their planning for the 2018 Measurement Period.

There are 19 eCQMs in the 2018 CPC+ measure set. For each, information is given about the area of focus, measure type, and CMS quality domain. Measures were selected using a comprehensive process that prioritized continuity from 2017, suitability for primary care, coverage of clinical domains (including behavioral health), opportunities for improvement, and resolution of known issues. This list is consistent with the Merit-Based Incentive Payment System (MIPS) measures included in the 2018 Quality Payment Program (QPP) Final Rule, which was released in early November of 2017. CPC+ aligns its eCQMs with MIPS in order to decrease the reporting burden on providers that need to report to both programs. Practices should note that these measures are reported by a range of providers and are not limited to primary care. More information about historical performance on these measures and their benchmarks is available on the QPP Resource Library (information about the benchmarks is in a zipped file named "Quality Benchmarks" under the Quality section in the middle of the page).

To assess quality performance and eligibility for the CPC+ Performance Based Incentive Payment (PBIP), both Track 1 and Track 2 practices will be required to report eCQMs annually at the CPC+ practice-site level.

Requirements for the 2018 Measurement Period are as follows:

1. Practices must successfully report 9 of the 19 measures from the CPC+ eCQM set below for the 2018 Measurement Period that begins on January 1, 2018, and ends on December 31, 2018. Practices must report both outcome measures, and at least seven of the remaining 17 measures.

   All data elements for the eCQMs, including numerator, denominator, exclusions and exceptions (if applicable), and performance rates must be submitted to meet the requirements. For measures with multiple data elements, all elements must be reported (e.g., two performance rates, two numerators).

   Practices must submit their 2018 eCQM reports to CPC+ during the submission window, which is expected to be January 1, 2019 to February 28, 2019.

2. Practices must report via one of the following submission methods:

- Attestation in the CPC+ submission portal
- Electronic submission of a QRDA III file through the QPP website

CMS will provide the website links and instructions prior to the submission period.

3. All measures must be reported at the <u>CPC+ practice-site level that is identified by the CPC+ Practice ID</u>. Practice-site level reporting should include all patients (includes all payers and the uninsured) who were seen one or more times at the practice site location during the performance period by one or more <u>CPC+ clinicians</u> (TIN/NPI), and who meet the inclusion criteria for the initial patient population (IPP) as specified in each measure.

4. Practices must comply with CPC+ Certified Health IT Requirements. Practices must also adopt and maintain the **2015 Edition** certification criterion found at 45 CFR 170.315(c)(4) to filter eCQMs for reporting at the CPC+ practice-site level (CPC+ practice ID, TIN(s), NPI(s)) **no later than December 31, 2018**.

5. All eCQMs must be reported using the May 2017 version of the electronic measure specifications as identified in the CPC+ eCQM set below. The versions released in May 2017 are those used in the 2018 performance period. The measure specifications are updated annually and can be accessed by selecting '2018 Performance Period EP/EC eCQMs' in the Performance/Reporting Period drop down menu at the eCQI Resource Center. Practices should work with their vendors to secure necessary support to report using specifications in the eCQM version released in 2017, for use during 2018.

6. While not required, practices are **strongly** encouraged to develop capabilities to report <u>all</u> CPC+ measures. Although this is not required, it is encouraged because it will give practices the ability to report nine measures if one or more eCQMs are removed from the list due to future events, such as changes to clinical guidelines. Failure to report nine eCQMs as specified may impact eligibility for the quality portion of the PBIP and ongoing participation in the model.

Questions about quality reporting may be submitted to CPCPlus@telligen.com or at 1-888-372-3280.

CPC+ eCQM Requirements Summary

eCQM Measurement Period	January 1, 2018 - December 31, 2018
eCQM Submission Period	January 1, 2019 - February 28, 2019
eCQM Version	eCQM version published in May 2017: • For specifications, see eCQM Specifications for Eligible Professionals and Clinicians, May 2017 • For value sets, see Value Sets Addendum, September 2017
eCQM Reporting Method	Attestation or QRDA III submission.

CPC+ eCQM Set – 2018 Measurement Period

CMS ID#	NQF #	Measure Title	Measure Type/ Data Source	Domain
Group 1: Outcome Measures – Report both outcome measures				
CMS165v6	0018	Controlling High Blood Pressure	Outcome/eCQM	Effective Clinical Care
CMS122v6	0059	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)	Outcome/eCQM	Effective Clinical Care
Group 2: Other Measures – Report at least 7 Other Measures				
Cancer				
CMS125v6	2372	Breast Cancer Screening	Process/eCQM	Effective Clinical Care
CMS130v6	0034	Colorectal Cancer Screening	Process/eCQM	Effective Clinical Care
CMS124v6	0032	Cervical Cancer Screening	Process/eCQM	Effective Clinical Care
Diabetes				
CMS131v6*	0055	Diabetes: Eye Exam	Process/eCQM	Effective Clinical Care
CMS134v6	0062	Diabetes: Medical Attention for Nephropathy	Process/eCQM	Effective Clinical Care
Care Coordination				
CMS50v6	N/A	Closing the Referral Loop: Receipt of Specialist Report	Process/eCQM	Communication and Care Coordination
Medication Management				
CMS156v6	0022	Use of High Risk Medications in the Elderly	Process/eCQM	Patient Safety
Mental Illness/Behavioral Health				
CMS2v7	0418	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Process/eCQM	Community/Population Health
CMS160v6	0712	Depression Utilization of the PHQ-9 Tool	Process/eCQM	Effective Clinical Care
CMS149v6	2872	Dementia: Cognitive Assessment	Process/eCQM	Effective Clinical Care
Substance Abuse				
CMS138v6	0028	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Process/eCQM	Community/Population Health
CMS137v6	0004	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	Process/eCQM	Effective Clinical Care
Safety				
CMS139v6	0101	Falls: Screening for Future Fall Risk	Process/eCQM	Patient Safety

(continued)

CMS ID#	NQF #	Measure Title	Measure Type/ Data Source	Domain
Infectious Disease				
CMS147v7	0041	Preventive Care and Screening: Influenza Immunization	Process/eCQM	Community/Population Health
CMS127v6	N/A	Pneumococcal Vaccination Status for Older Adults	Process/eCQM	Community/Population Health
Cardiovascular Disease				
CMS164v6	0068	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	Process/eCQM	Effective Clinical Care
CMS347v1	N/A	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	Process/eCQM	Effective Clinical Care

* Please note: eCQM labeled as "topped-out" benchmarks based on the 2017 Merit-Based Incentive Program (MIPS) definition. For further information please visit:
http://www.ascrs.org/sites/default/files/CMS%20QPP%20Benchmarks%20V2_Remediated.pdf