



How PQRS Decisions Significantly Impact Your Value-Based Modifier (VBM) Score and Reimbursement

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About Tom Lee, Ph.D. Founder & CEO of SA Ignite

Tom is a technology innovator and leader who brings his unique world view and compassion to create health IT solutions for the business of caring for people. He is the father of two small children and after a frightening personal experience, it was his concern for their future in the world that inspired him to create a company that matched his personal passion: driving innovation in the public healthcare system.

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Key Takeaways From Webinar 2

MIPS Financial Impact: Potential 30% Difference in Part B Payments Between Winners & Losers

The **PQRS/VBM Quality Score** will comprise 30% of the MIPS score. MIPS starts CY2017.

MIPS (0 - 100 pts)			
MU (25%)	PQRS/VBM Quality (30%)	VBM Cost (30%)	Clinical Practice Improvement (15%)

How PQRS Decisions Significantly Impact Your VBM Score and Reimbursement

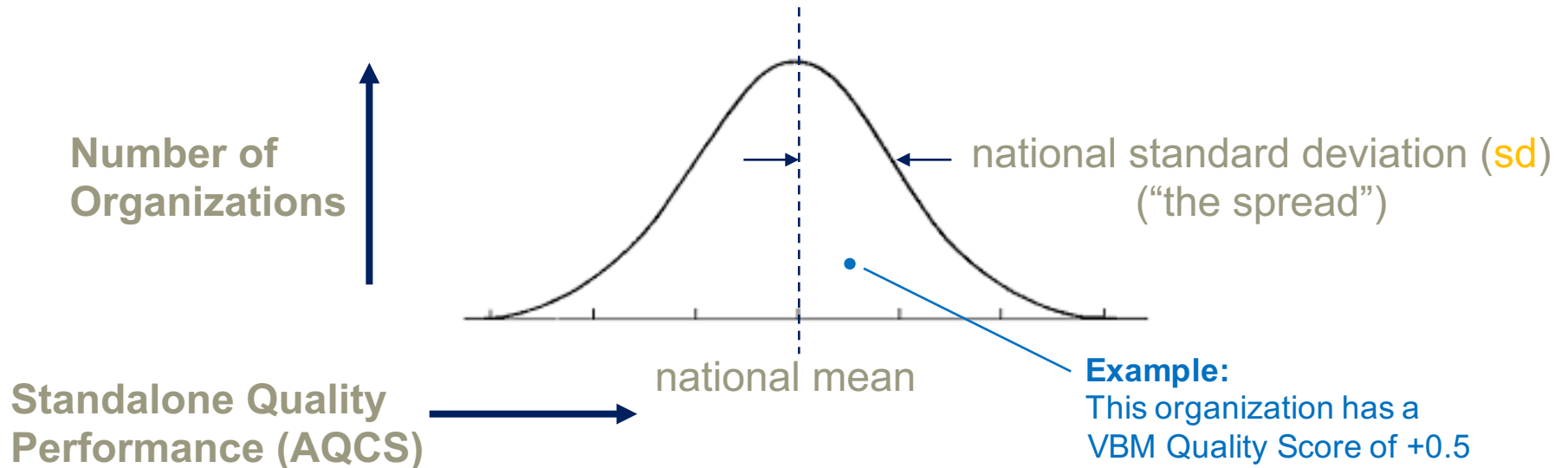
Today's Agenda

- Primer on the VBM Quality Score
- Real Examples of Sub-Optimal PQRS Decisions
- Four Recommendations
- Free Opportunity to Identify Your VBM Quality Score Vulnerabilities and Opportunities
- Other Resources (MIPS LinkedIn Group)

- Open Q&A (20 Minutes)

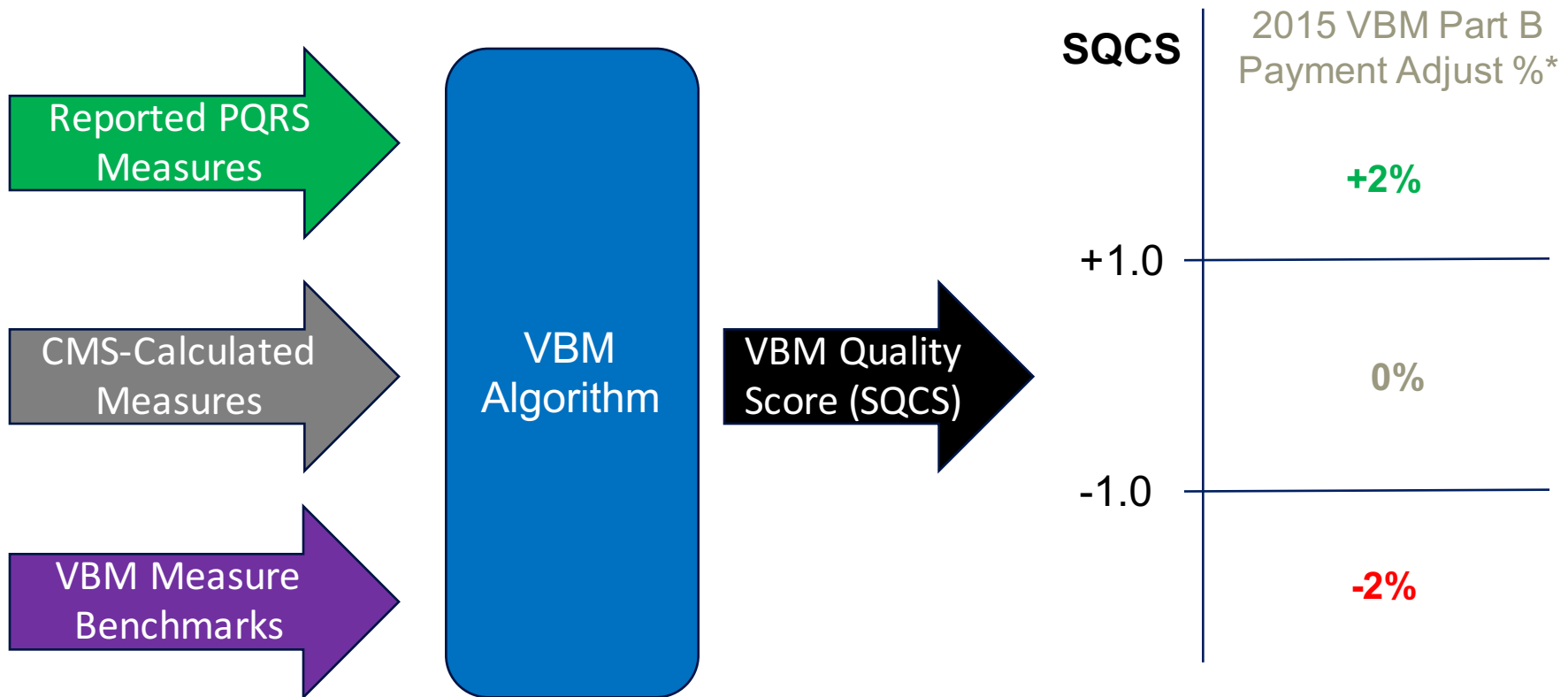
Primer on the VBM Quality Score: What It Is

National Distribution of VBM Quality Performance



VBM Quality Score (SQCS): How far above or below the national mean an organization's quality performance is in terms of number of standard deviations (sd's). Reported on org's annual QRUR report from CMS.

Primer on the VBM Quality Score: How It is Calculated and Impacts \$



New for 2015: MSSP ACO providers also subject to VBM

*For organizations with 10+ PQRS-eligible professionals

Primer on the VBM Quality Score: PQRS Measure & Method Selections Matter

- **Measure Selection**

- **Example:** PQRS registry requires 9 measures across 3 quality domains
- Pick measures that exceed VBM measure benchmarks
- VBM quality score highly sensitive to outlier measures
- Choose quality domains containing above-benchmark measures

- **Method Selection**

- **Example:** Whether to report providers individually or as a group (GPRO)
- For individual-provider reporting, score highly sensitive to outlier providers
- Measure values often different across reporting methods for the same PQRS measure, e.g. registry vs EHR (CQM)

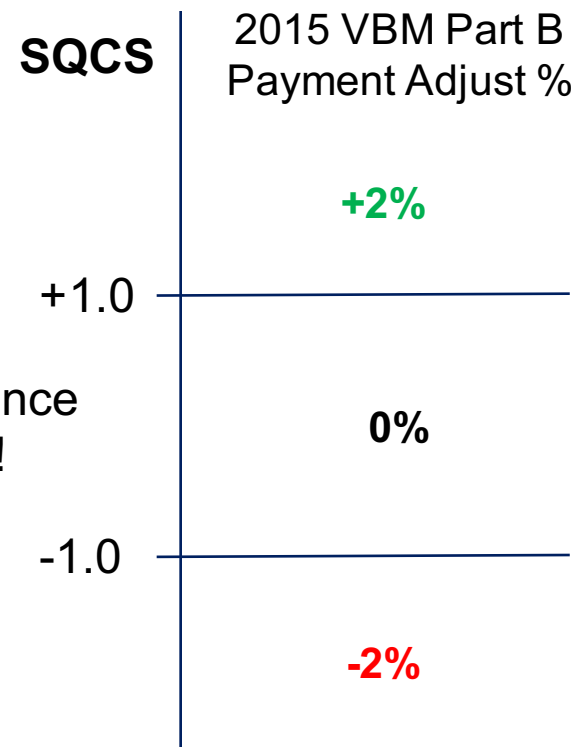
Real Examples of Sub-Optimal PQRS Decisions: Choosing Sub-Optimal PQRS Measures to Report

Based on the same available patient data,
vary only the selection of measures to report.

Selected measures to
maximize VBM score

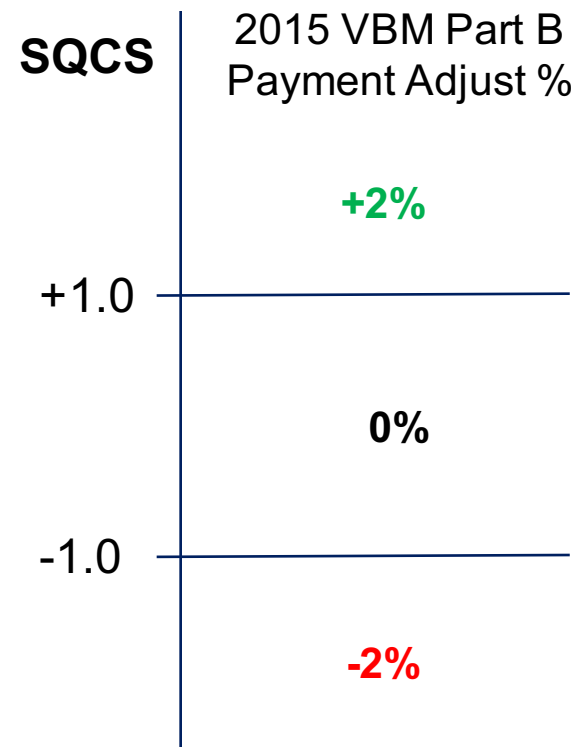
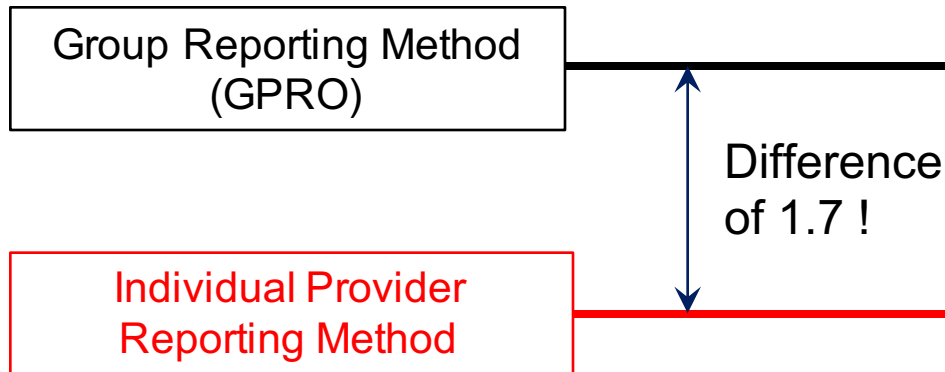
Selected measures without
evaluating VBM score impacts

Difference
of 2.0 !



Real Examples of Sub-Optimal PQRS Decisions: Choosing Sub-Optimal PQRS Reporting Method

Based on the same available patient data,
vary only the selection of reporting method.



Note: The opposite can occur where GPRO results in a lower VBM score than what an individual-provider reporting method results in.










Recommendation 1 (Scenario Analysis): Estimate & Compare the VBM Scores Resulting from Different Measure Selections

Quality Domain	PQRS Measure #	Set 1	Set 2	Set 3	Set 4
Care Coordination	374	✓	✓	✓	✓
Population Health	110	✓			
	128		✓	✓	✓
Clinical Effectiveness	1	✓	✓	✓	✓
	2	✓	✓	✓	✓
	5	✓	✓	✓	✓
	7	✓	✓	✓	
	8				✓
Efficient Use	65	✓	✓	✓	✓
	66	✓	✓	✓	✓
Patient Safety	130	✓	✓		
	192				
Engagement	143			✓	
	375				✓
VBM Score		0.5	0.8	-1.2	1.1
VBM Payment Adjustment %		0%	0%	-2%	+2%

Recommendation 2:

Find Measures with the Highest Leverage on the VBM Score, then Focus on Improving Them

Scenario Analysis: “Stretch” each measure’s performance rate above its actual value, leaving other measures at baseline, then re-estimate VBM score. Repeat for each successive measure.

Quality Domain	PQRS Measure #	VBM Score vs Measure Stretched
Care Coordination	374	
Population Health	110	
Clinical Effectiveness	1	
	2	
	5	
	7	
Efficient Use	65	
	66	
Patient Safety	130	
VBM Score		-1 0 1
VBM Payment Adjustment %		-2% 0% +2%

Note: This analysis is particularly useful for MSSP ACOs because they must report all 17 mandated quality measures.

Greatest leverage, focus improvement efforts on this measure

Recommendation 3:

Estimate & Compare the VBM Scores Resulting from Selecting Different Reporting Methods

- Registry vs EHR Direct vs Web Interface, etc
- Individual Provider reporting vs group reporting (GPRO)

Recommendation 4:

Recognize and Weigh the Tradeoffs

- Competing considerations when selecting PQRS measures
 - Alignment with other quality initiatives
 - Provider engagement
 - Reputational impacts due to consumers viewing measure values
- Competing considerations when selecting PQRS reporting method
 - Administrative burden and costs
 - EHR or other IT limitations
 - Available measures to select from
- **Key:** Identify major pros & cons (data-driven, whenever possible), then educate decision-makers well ahead of government deadlines

Free Opportunity to Identify Your VBM Quality Score Vulnerabilities and Opportunities

For the first 10 provider orgs registering at the link below and satisfying implementation requirements set by SA Ignite:

SA Ignite will deliver a free set of VBM analysis reports using your 2014 reported and unreported PQRS measure values to identify VBM score vulnerabilities and opportunities, e.g. the reports in Recommendations 1 & 2

<http://tinyurl.com/p3v3gt6>

(or email tom@saignite.com to have the link emailed to you)

Other Resources

- Join the open LinkedIn Group “**Merit-Based Incentive Payment System**”
- Go to www.saignite.com and click Resources
 - FAQs About MIPS (see FAQ #7 for link to free MIPS Financial Calculator)
 - Questions to Ask Your PQRS, VBM & MU Managers

Open Q & A