Primary Care First

Clinical Quality Measures and Health IT

Office Hour Session

Center for Medicare and Medicaid Innovation

Introduction and Purpose

Goal: Primary Care First (PCF), a 5-year model, aims to improve quality, improve patient experience of care, and reduce expenditures.

The PCF Model Options accommodate a continuum of providers that specialize in care for different patient populations. **Note:** The three PCF model options are PCF Only, Hybrid, and Seriously Ill Population (SIP) Only.

A set of clinical quality and patient experience measures is used to assess quality of care delivered at the practice. **Note:** The measure set varies depending on practice's participation component.

Primary Care First practices must meet standards that reflect quality care and model requirements in order to be eligible for a positive performance-based adjustment (PBA).

The measures were selected to be actionable, clinically meaningful, and aligned with CMS's broader quality measurement strategy.

Clinical Quality Measures

Clinical Quality Measures Based on Practice Designation

The clinical quality measures included in the Quality Gateway for the 2021 Performance Year are listed below for each Primary Care First practice type:

Measure	PCF Only and Hybrid Practice Risk Group		SIP Only
	1 – 2	3 – 4	
Electronic Clinical Quality Measures (eCQMs) • CMS165v9 Controlling High Blood Pressure • CMS122v9 Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) • CMS130v9 Colorectal Cancer Screening	✓	Not Applicable	Not Applicable
MIPS Clinical Quality Measure (CQM) • 047 Advance Care Plan	✓	✓	✓
Patient Experience of Care Survey (PECS)	✓	✓	✓
Acute Hospital Utilization (AHU) Measure – HEDIS claims measure	✓	Not Applicable	Not Applicable
Total Per Capita Costs- MIPS claims measure	Not Applicable	✓	✓

CQMs vs eCQMs

How Do CQMs and eCQMs Differ?

CQMs

- Manual chart review allows data to be captured from any documentation (paper or electronic; narrative or structured data)
- Inconsistent documentation in patient record
- Human review and interpretation of record documentation against measure requirements
- EHR updates not required for annual measure revisions/ submissions
- Must be reported via a qualified registry or a qualified registry or a qualified data registry (QCDR)

eCQMs

- Designed to use data elements from electronic health records/other health IT sources
- Structured data fields promote documentation consistency
- Measure data automatically captured as information entered into patient record
- eCQM calculated without additional data entry
- Data should be captured as part of regular workflow
- Must use Certified Health IT or Certified EHR Technology (CEHRT) to capture and report data

Clinical Quality Measure Reporting Requirements

eCQM and MIPS CQM Reporting Requirements

Clinical Measure Reporting Requirements	eCQM Reporting	MIPS CQM Reporting
Defined Measurement Period: Practices must collect clinical measures for the entire performance year defined as January 1, 2021-December 31, 2021.	✓	✓
Tentative Reporting Period: Practices must report during the reporting period January 3-February 28, 2022.	✓	✓
Practice site level: Practices must report all measures at the PCF practice site level, which is identified by the PCF Practice ID. PCF practice site-level reporting includes all patients (including patients that are insured by payers other than Medicare and the uninsured) who were seen one or more times at the practice site location during the performance year by one or more clinicians who were active on the PCF Practitioner Roster at any point during the performance year and who meet the criteria as specified in each measure.	✓	✓
Updated Clinical Measure Specifications: Practices must use the 2021 measure versions. The 2021 eCQM versions are found on the eCQI Resource Center here. The 2021 MIPS CQM version is found on the QPP Resource Library.	✓	✓

eCQM and MIPS CQM Reporting Requirements, continued

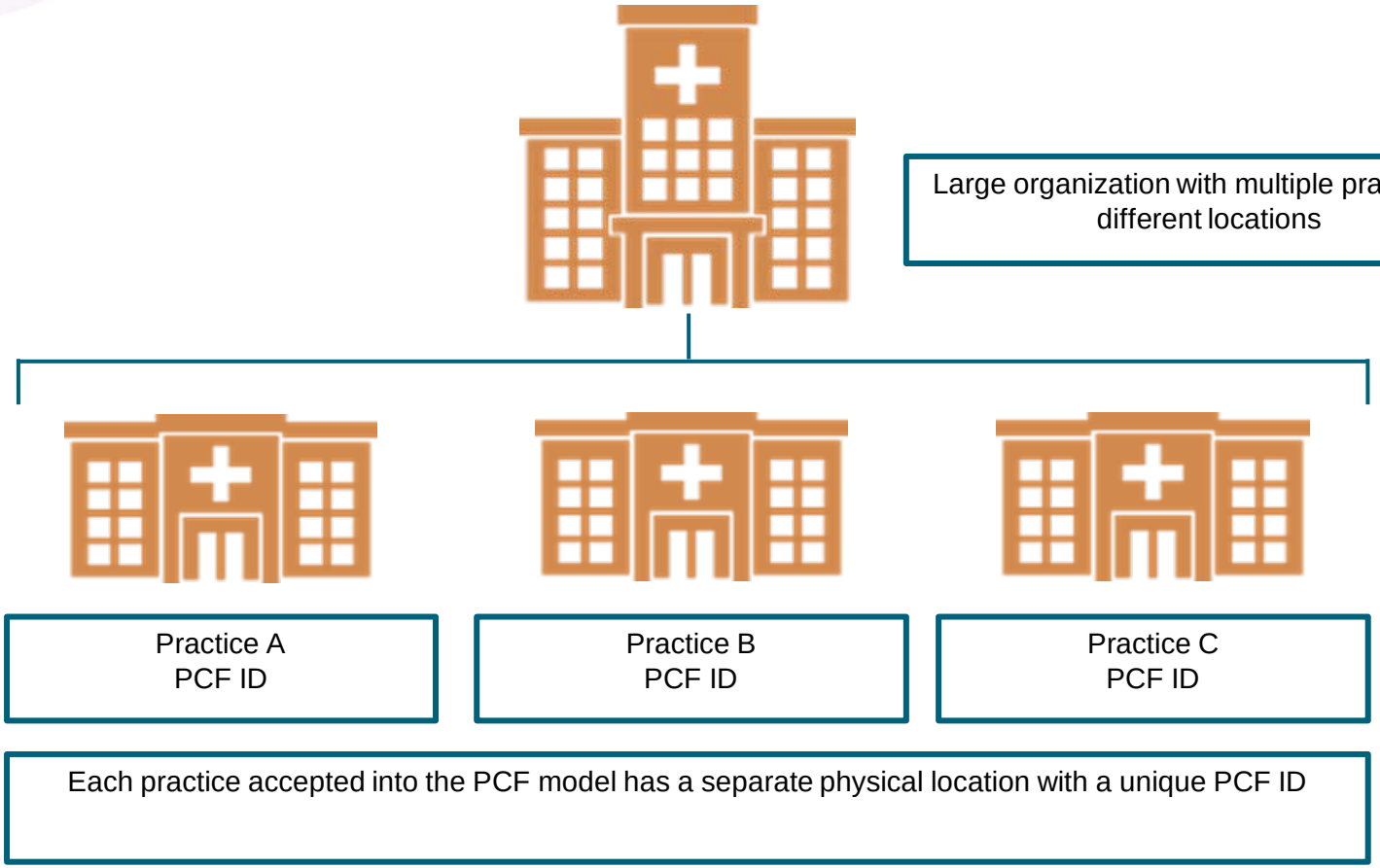
Clinical Measure Reporting Requirements	eCQM Reporting	MIPS CQM Reporting
CMS EHR Certification ID: All PCF QRDA III submissions must include the CMS EHR Certification ID, indicating the CEHRT the practice used during the MP.	✓	Not Applicable
PCF QRDA III Format: Practices must report eCQMs electronically on the QPP Website (qpp.cms.gov), in the QRDA III format specified by the 2021 CMS QRDA III Implementation Guide (IG) for Eligible Clinicians and Eligible Professionals Programs.	✓	Not Applicable
PCF QPP JSON Format: Practices must employ a qualified registry (QR) or qualified clinical data registry (QCDR) from the MIPS Final approved list to compile MIPS CQM data in PCF QPP JSON format. The MIPS CQM data may be submitted one of the following ways: ▪ The QR or QCDR sends a PCF QPP JSON message via the QPP Submissions API ▪ The QR or QCDR uploads a PCF QPP JSON file via the QPP Website (qpp.cms.gov) ▪ The practice uploads a PCF QPP JSON file via the QPP Website (qpp.cms.gov)	Not Applicable	✓

eCQM and CQM Reporting at the Practice Site Level

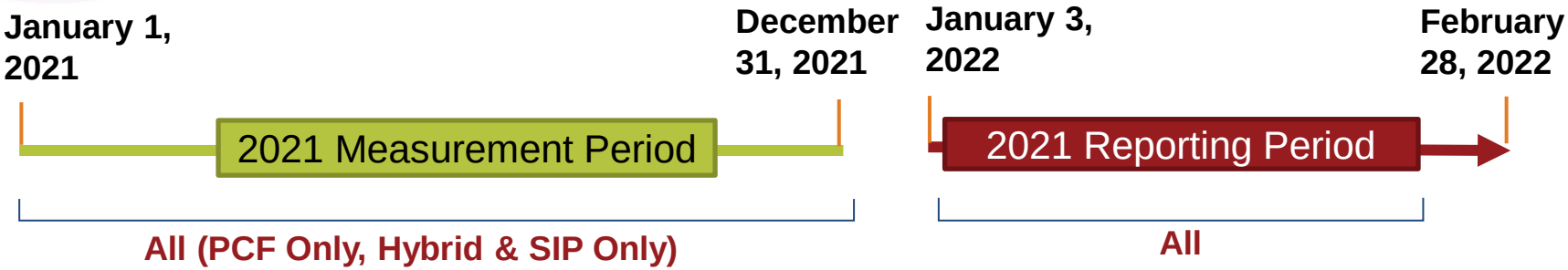
- All practices must report all measures at the Primary Care First practice site level, which is identified by the PCF Practice ID. PCF practice site-level reporting includes all patients (including all payers and the uninsured) who were seen one or more times at the practice site location during the performance year by one or more clinicians who were active on the PCF Practitioner Roster at any point during the performance year and who meet the criteria as specified in each measure.
  - All Primary Care First Practices have a distinct Practice ID
  - Practices should confirm this capability with their health IT and registry vendors

PCF does **NOT ALLOW** practitioner-level reporting, where only a **single PCF practitioner's (TIN/NPI) results are included.** Averaging or summing practitioner level results is not the same as practice site-level reporting.

Practice Site Level Definition – Large Organization



eCQM and MIPS CQM Reporting Timeline



For eCQM reporting, verify the following with your health IT vendor:

- ✓ Your PCF QRDA III file conforms to the 2021 CMS QRDA III IG
- ✓ Your PCF Practitioner Roster is accurate and matches what is provided in your PCF QRDA III file
- ✓ You can submit 12 months of continuous data in one PCF QRDA III file
- ✓ If your practice or your certified health IT vendor will submit your practice's QRDA III file

For MIPS CQM reporting, verify the following with your QR/QCDR:

- ✓ The registry is designated as a MIPS qualified registry or a QCDR
- ✓ Your submission conforms to the PCF QPP JSON format
- ✓ You can submit 12 months of continuous data
- ✓ MIPS CQM 047 is reported at the practice level

Health IT Requirements

Health IT Requirements (1 of 5)

All Primary Care First Practices will **benefit from interoperable health IT systems** and **gain value from data sharing** between providers and suppliers as well as with patients.

Health IT Requirements Summary	PCF Only & Hybrid	SIP Only	Adoption Timeline
Overall CEHRT Adoption			
Overall CEHRT Adoption: By the start of the first Performance Year, and ongoing, adopt and maintain, at a minimum, health IT needed to meet the CEHRT definition required by the Quality Payment Program (QPP) at 42 CFR 414.1305.	✓	✓	PCF Component - January 1, 2021 SIP Component - April 1, 2021

Health IT Requirements (2 of 5)

Health IT Requirements Summary	PCF Only & Hybrid	SIP Only	Adoption Timeline
Health IT for eCQM Reporting			
CEHRT and eCQM Reporting: Adopt and maintain, at a minimum, health IT meeting the definition of CEHRT required by the Quality Payment Program (QPP) at 42 CFR 414.1305 and the certification criteria found at 45 CFR 170.315(c)(1) - (3)** for electronic clinical quality measure (eCQM) reporting, using the most recent update available on January 1 of the Measurement Period, for the eCQMs in the Primary Care First measure set.	✓ (Practice Risk Group 1 – 2 Only)	Not Applicable	January 1, 2021
QRDA III format: Submit eCQMs in the Quality Reporting Document Architecture Category III (QRDA III) format via qpp.cms.gov.	✓ (Practice Risk Group 1 – 2 Only)	Not Applicable	Planned for January 3, 2022
Capability to filter at Practice site level: Adopt and maintain health IT with the capability to filter quality measure data for reporting at the PCF practice site level	✓ (Practice Risk Group 1 – 2 Only)	Not Applicable	Planned for January 3, 2022

Health IT Requirements (3 of 5)

Health IT Requirements Summary	PCF Only & Hybrid	SIP Only	Adoption Timeline
Health IT for MIPS CQM 047 Advance Care Plan Reporting			
MIPS QR or QCDR: By the first expected Reporting Period, tentatively scheduled from January 3 to February 28, 2022, adopt and maintain a qualified registry or a qualified clinical data registry (QCDR) from the Merit-based Incentive Payment System (MIPS) Final approved lists to report the Advance Care Plan measure.	✓	✓	Planned for January 3, 2022
MIPS QR or QCDR with capability to filter at practice site level: By the first expected Reporting Period, tentatively scheduled from January 3 to February 28, 2022, adopt and maintain a qualified registry or a QCDR with the capability to filter CQM measure data to report at the PCF practice site level [practice site location, TIN(s)/NPI(s)].	✓	✓	Planned for January 3, 2022

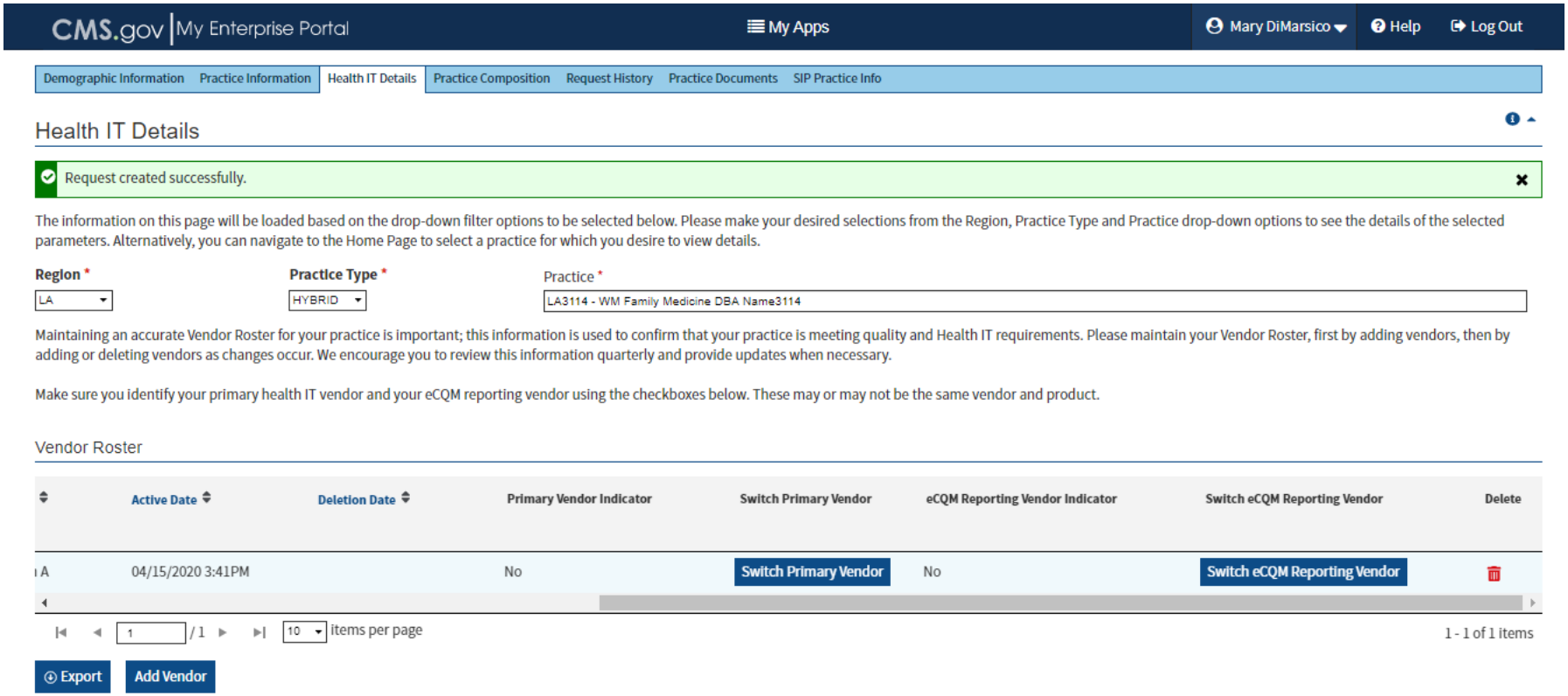
Health IT Requirements (4 of 5)

Health IT Requirements Summary	PCF Only & Hybrid	SIP Only	Adoption Timeline
Interoperability Requirements			
Access to Health Information: Give patients and their designated representative access to electronic health information within 1 business day.	✓	✓	PCF Component - January 1, 2021 SIP Component - April 1, 2021
Information Blocking: Refrain from information blocking as defined by section 3022(a) of the Public Health Service Act (PHSA), which was added by section 4004 of the 21st Century Cures Act.	✓	✓	PCF Component - January 1, 2021 SIP Component - April 1, 2021
Health Information Exchange (HIE): Adopt and maintain participation in a Health Information Exchange (HIE).	✓	✓	January 1, 2021

Health IT Requirements (5 of 5)

Health IT Requirements Summary	PCF Only & Hybrid	SIP Only	Adoption Timeline
Model Reporting			
Health IT Details Tab: Maintain Health IT Details Tab in Practice Portal.	✓	✓	PCF Component - January 31, 2021 SIP Component – May 1, 2021

Health IT Details Tab in the Primary Care First Practice Portal



Primary Care First
Quality and Health IT Resources

PCF Quality and Health IT Resources	
Primary Care First Preliminary Clinical Measure and Health IT Reporting Requirements	Upcoming
Frequently asked questions for health IT vendors	Primary Care First website
PCF Practice Portal Health IT User Guide	Upcoming
PCF Reporting Guide	Upcoming

Other Resources	
Health IT vendor certification information	Certified Health IT Product List (CHPL) Website
eCQM information	eCQI Resource Center
CQM information	Explore Measures Tool
QRDA III information	eCQI Resource Center: QRDA
MIPS Qualified Registry and Qualified Clinical Data Registry List	QPP Resource Library

We’re Here to Help!
Primary Care First Support

For questions related to Primary Care First, please contact Primary Care First Support:

PCF@telligen.com

1- 888-517-7753