

CMS Updates

AMA – Integrated Physician Practice Session

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Agenda

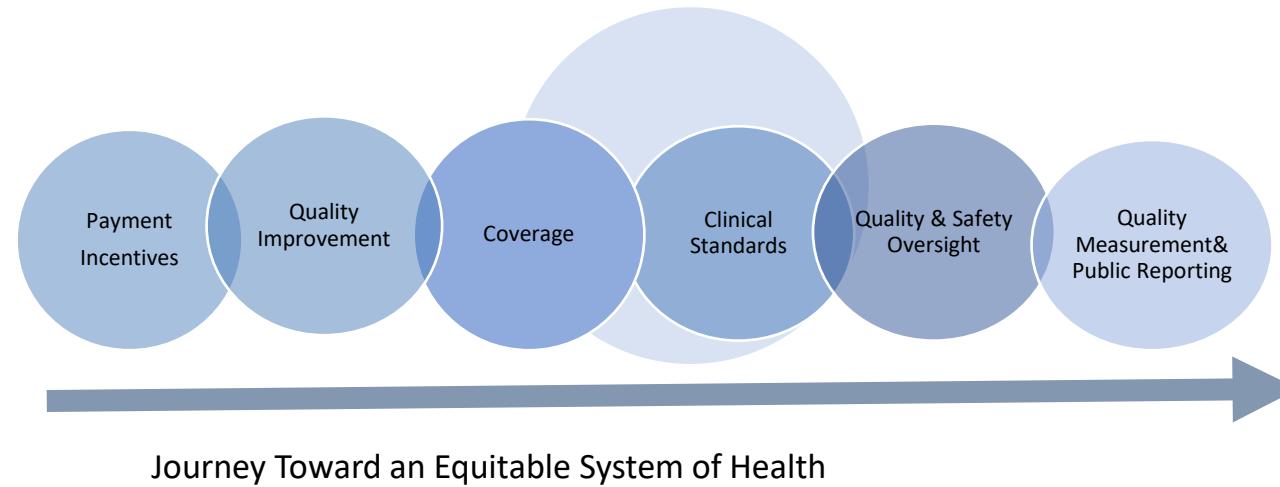
- CMS Strategic Priorities
- Covid Impact to Value Based Programs
- Key Topics in New Rules – Hospital and Clinicians
- MIPS and MIPS Value Pathways
- ACO Quality Reporting

CMS Strategic Priorities

Vision: CMS serves the public as a trusted partner and steward, dedicated to advancing health equity, expanding coverage, and improving health outcomes

Pillar 1	Advance health equity by addressing the health disparities that underlie our health system
Pillar 2	Build on the Affordable Care Act, expand access to quality and affordable health coverage
Pillar 3	Engage our partners and communities we serve throughout the policymaking and implementation process
Pillar 4	Drive innovation to tackle our health system challenges and promote high-value, person-centered care
Pillar 5	Protect our programs' sustainability for future generations by serving as a responsible steward of public funds
Pillar 6	Foster a positive and inclusive workplace and workforce, and promote excellence in all aspects of CMS's operations

Aligning on the Journey Towards Equity



What are some of the policy/program issues to address?

What are we doing now?

What are some outstanding policy/program questions?

Potential Next Steps for Equity

- Data
 - Direct collection
 - Imputed Models
- Quality Measurement
 - Risk Adjustment
 - Stratification
- Access

Covid impact to Value Based Programs

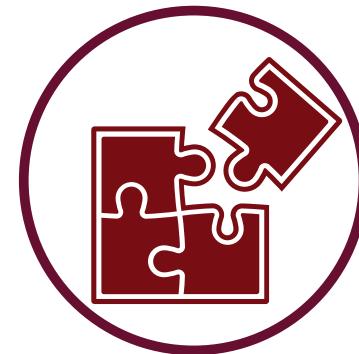
- THANK YOU for heroic efforts to care for all (patients, staff, others)
- Trend of worsening quality and safety performance being evaluated
- Future focus of resiliency, emergency preparedness; workforce
- Value Based Programs proposed (and finalized IPPS) measure suppression and other actions to limit financial impact while still preserving, where appropriate, public reporting
 - IPPS programs
 - MIPS program
- Covid HCP vaccination measures; Covid HCP vaccination mandate under evaluation

Provider discussions highlighted key enablers and challenges influencing implementation of response



Key enablers for implementation

- 1 Leadership, culture, & governance
- 2 Infection prevention & control expertise
- 3 Local planning & coordination



Key challenges faced during implementation

- 4 Planning for underserved & vulnerable pop.
- 5 Data reporting
- 6 Technical assistance
- 7 Managing federal & STLT (state, tribal, local, and territorial) guidance

What is new in Rules?

Hospital – IPPS

Clinician – PFS (MIPS)

IPPS (Inpatient) - Final

- Measure suppression and payment impacts
 - HVBP all hospitals neutral; measure suppression HCAHPS, HAI, MSPB, PNU Mortality
 - HAC program used 2019 data; did not use 2020 data due to Covid impact
 - HRRP (readmissions) suppression of PNU; removed Covid from denominator
- 5 new measures: maternal morbidity structural; hybrid hospital wide mortality, Covid HCP vaccination; electronic hyper and hypoglycemia

Hospital Promoting Interoperability

- Public Health Reporting – mandatory reporting of 4 public health electronic data – syndromic surveillance, immunization registry, electronic case reporting and electronic lab results
- Bidirectional HIE
- eCQM measures to be publicly reported; expands quarters needed to report
- Attestation to review of SAFER guidelines (EMR safety)

MIPS – PROPOSED in PFS

- Add certified social workers and midwives to MIPS eligible
- Set new performance threshold at 75; exceptional performance at 89
- 5 new episode based cost measures
- Attestation to annual assessment of High Priority Guide of SAFER guidelines (EMR safety)
- Automatic EUC (extreme and uncontrollable circumstances) under consideration
- Reminder: 2022 is last year of additional \$500M for exceptional performance

MIPS Value Pathways (MVP) - proposed

- Aligned and cohesive sets of measures around a condition/specialty/goal
- Retain the 4 MIPS categories: Quality, Improvement, Cost and a Foundational Layer of Promoting Interoperability and Population Health; Equity
- 7 MVP proposed
- Sub group reporting
- Start as voluntary; eventually mandatory with sunsetting of traditional MIPS
- Reduced burden (fewer reporting requirements)

ACO Quality Measures - proposed

- Had proposed move to reporting only 3 eCQM with sunset of Web Interface
- However concerns with data aggregation from disparate EMR systems
- Further evaluation of reporting to allow for additional flexibility under consideration for final rule

Future Directions

- Equity – performance measure stratification; direct data collection
- Maternal safety
- Mental Health
- Improved Access
- Promoting Interoperability
- CMMI Models of focus on primary care
- Covid vaccination mandates
- Utilizing all levers of CMS – conditions of participation, payment, quality programs, quality improvement

Thank You

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