CMS Updates

AMA – Integrated Physician Practice Session
November 9, 2021
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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**

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