Advanced **MD** 

# MIPS Attestation

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## **MIPS** Attestation

New users to QPP.CMS.GOV – Register now for a HARP Account. You will need to register with HARP to obtain the necessary credentials to log in. This should take 5-15 minutes depending on how quickly your identity can be verified. HARP works with Experian for this process.

Log into the QPP website		About ~ The Quality Payment Program	MIPS ~ Morit based Incentive Payment System	APMs ~ Alternative Payment Models	Resources ~ Help, Support and Resources	Sign In Manage Account and Register
	Home /					
	QPP Account					
	SION IN REGISTER					
	Sign in to QPF	0				
	USER ID					
	PASSWORD					
	Show password					
	Forgot your user id or password?	Recover ID or reset (	password			
	STATEMENT OF TRUTH					
	In order to sign in, you must agree to that will be submitted will be true, accu is not true, accurate, and complete, I w omission, misrepresentation, or falsific or odministrative penalties, including fit Yes. I agree	this: I certify to the best urate, and complete. If I b ill correct such informati ation of any submitted in ines, civil damages, and/o	of my knowledge that all ecome aware that any si ion promptly. Lunderstan formation may be punish pr imprisonment.	of the information ubmitted information d that the knowing ned by criminal. civil.		
	Sign in > Don't have Register	an account?				
Not Registered yet? Click on ' <b>Register</b> '	Home V& Reporting	back				
는 enguent 슈 Perform 전 Doctors 는 Exceptio	ance Feedback & Clinicians Preview submission Mindow is spen	Mar Last Day	r to submit data	Apr Preliminary Performa Feedback Available	nce	Summer Final Performance Feedback is available
Once logged in to (응 Targets QPP click on 응 Manage	Access					
	1 Support Berforman Now Open You are now able t	nce Year (PY)	Submission Repo	rting Window is	STA	ART REPORTING

Eligibility & Reporting	
Performance Vesr u	
Eligibility Status for Performance Year     MIPS Eligibility. APM Eligibility and Qualifying APM Participant (OP) Status is final.     SOP participation will be finalized in March for participants that joined Between September 1 and December 31.  Practices	Select the Reporting option
	for the Practice/Provider – GROUP or INDIVIDUALS
Practice Details & Clinicians	
Performance Year — 🗸 🗸	
MIPS ELIGIBLE Health Professional Shortage Area (HPSA). Small practice     View complete eligibility details	
Clinicians The following is a list of all clinicians who submitted claims data to CMS for Performance Year for this practice. Here you can view their MIPS Participation, APM Participation, and Special Status details.	You can view eligibility details if needed
Search by last name Q. 1 Clinician   & Download	Click on REPORT AS GROU or REPORT AS INDIVIDUAL
Report as individual	
Extreme and Uncontrollable Circumstances     You have an approved application and qualify for 0% weighting in one or more performance     categories, or you qualify for automatic reweighting in all performance categories. Click     Report as Individual for more information about your performance category-specific     requirements.	
REPORTINO REQUIREMENTS	
This clinician is required to report because they are a MIPS eligible clinician type, have been enrolled in Medicare for greater than a year, and exceed the individual low-volume threshold.	
REPORTING OPTIONS    View complete eligibility details	
Reporting Overview	
Performance Year V	Do not click on UPLOAD A FILE to report the
Start reporting You can start reporting by uploading properly formatted OPP JSON an ORDA III fies that can contain Quality measures. UPLOAD A FILE UPLOAD A FILE	data, scroll down to the individual categories

on REPORT AS GROUP

Remember: These files will be calculated immediately and the page below will update with your preliminary scoring information.

category separately.

The Preliminary Category Scores are indicated in each category section

### **Promoting Interoperability**

#### Click on 'View & Edit'

Enter the Performance Period Start and End Date

Enter the CEHRT ID – to locate this ID follow guidance in HUB article 'How to find the EHR Certification ID' <u>https://advancedmd-hub.knowledgeowl.com/home/</u> advancedmds-ehr-certification-id-cehrt-id

Print the Promoting Interoperability report from the PM and enter the totals.

Complete the three Attestation Statements with a Yes or No

Promoting interoperability	6	.23/25
Promoting Interoperability counts for 25%	of your score.	
SUBMITTED	View	/ & Edit >
ves ation Statements		
Measure Name Expend Al	Attestation Complet	
ONC Direct Review Attestation Measure ID: PL_ONCOR_1		e
Prevention of Information Blocking Attestation Measure ID: PL_RFBLD_1.		۲
ONO 100 Company Manufacture		

#### **Improvement Activities**



Click on '**View & Edit**' to select the IA choices for the reporting period

Enter the Performance Period Start and End Date

Search or scroll through the list to select all the IA performed during the reporting period

Search For Activities				
Filter By		Search		
Select Filters	~	Q. fobacco		0
ctivities				2 Activities Show
iehavioral And Mental Health				
Tobacco use			Activity Score	20/20
Activity ID: IA_8MH_2				
Tobacco use: Regular engagement of MIPS eligible clinicians o treatment interventions, including tobacco use screening and for patients with co-occurring conditions of behavioral or mer	r groups in integ cessation interv tal health and al	rated prevention and entions (refer to NQF #0028) trisk factors for behavior	Completed	
the hearing process and an analysis of period and an and				-

Cost/15	Cost Click on the link to discover more about how the Cost Measures are calculated
Cost will be scored after the submission window closes and all Claims data is processed. Remember, Cost may count for 15% of your score.	
LOST Measures Lo	Quality
Quality	CORRECT OF CORRECT.
Click on 'View & Edit'	Performance Year 🗸
	The Quality score is based on the highest scoring Quality measures among your collection methods. Learn more about Quality
Quality will require you to upload a QRDA III file	No Quality measures have been submitted for this profile. Please choose a submission option below to get started.
Quality / 45	OPTION 1 OPTION 2
	Manually Upload Data Using a Third Party Agency Submit OPP Quality Data via file unload Contact your Third Party of Third Party
Quality counts for 45% of your score.	This method allows the upload of EHR export data in either QPP (JSON) format ant QRDAIII files there are six required measures, including one High priority measure.
NOT REPORTED View & Edit >	UPLOAD FILE(S)

Generate QRDA III files from AdvancedMD Clinical Quality Reporting

Create a final eCQM report for attestation

Click on 'View' to open the report with all the measures you want to submit to  $\mathsf{CMS}$ 

6 measures are required. Submit more than 6 and CMS will calculate them all. They will keep the 6 best scored measures for your Quality Score

Click on the QRDA tab	Home	Create Report	Administration -	Audit Log	Help
	Ad	vanced	ND.		
	Dashboard	Summary	QRDA		



Once the files are saved return to the QPP website (logging back in if needed)

MIPS ¥	APMs ¥	About ~	Sign In
Merit-based Incentive	Alternative Payment	The Quality	Submit and
Payment System	Models	Payment Program	Manage Data

Navigate to the Quality category

Click on UPLOAD FILE(S)

In the dialogue box click on UPLOAD FILE



Drag and drop the file from the computer to the dialogue box on the QPP website

OR click on browse and select the file from the computer

The file name will appear in the  $\ensuremath{\mathsf{FILE}}(\ensuremath{\mathsf{S}})$  TO UPLOAD dialogue box

Click on UPLOAD





If the file has an error, the system will indicate that immediately Click on VIEW SUBMISSION to review the specific error Download the error report to submit to AdvancedMD Client Support Services

Upload successful

and Category Details pages.

Measure data that you've left blank will not be updated.

UPLOADMORE

Your files were successfully uploaded. You can

now review your submitted data on the Overview

Uploading this fite will overwrite the submission data you've submitted. A maximum of 50 files can be processed in a single upload request.

VIEW SUBMISSION

If no error occurred the dialogue box will indicate 'Upload successful'

Click on VIEW SUBMISSION to see the calculated results of ALL the measures you submitted

The list of measures that count toward Quality Performance Score, including bonus points will be listed in detail along with measures submitted that do not count towards Quality

Submitted Measures		
Measures that count toward Quality Performance Score Your Measure Score includes both performance points and bonus points.	Values listed bel examples of how da	ow are only ata will appear
Measure Name Expand All	Performance Rate	Measure Score
Colorectal Cancer Screening Measure ID: 113   End-to-End Reporting	58.42%	8.39
Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan Measure ID: 128   End-to-End Reporting	94.15%	11.00

Using the Navigation on the left-hand side of the screen navigate back to the Overview to see the Preliminary Total Score.

All changes are saved automatically, there is no submission or save button. Files and data can be changed and updated as many times as necessary. The file and data that are present on thee deadline will be what CMS takes as the submission.

			_
reliminary Total Score		Ouality	/45
(100		Promoting Interoperability	/ 25
7100		<ul> <li>Improvement Activities</li> </ul>	/ 15
our Final Score won't be available until Summer		• Cost	/ 15
		Awarded Bonus Points	5
ninary Performance Category Scores			
Juality	/ 45	Promoting Interoperability	<b>23.25</b> / 25
			_
uality counts for 45% of your score.		Promoting Interoperability counts for 25% of your	score.
NOT REPORTED	View & Edit >	SUBMITTED	View & Edit >
mprovement Activities	15.00 / 15	Cost	/ 15
	-	Cost will be scored after the submission window o processed. Remember, Cost may count for 15% of	closes and all Claims data is your score.
nprovement Activities counts for 15% of your score.		Cost Measures (2*	
ou have a special circumatances inspicting your scores.			
SUBMITTED	View & Edit >		
Additional Awarded Bonus Points			5
omplex Patient Bonus:			
he Complex Patient Bonus is based on the level of complexit 0 may be available for your practice.	y and risk of a clinician	s or practice's patient population seen during the 2020 c	alendar year. A score of 0-
uality Improvement Bonus:			
you were eligible for the previous performance year and ma his will be included as part of your Quality Score.	de an eligible Quality su	bmission, you may be eligible for an additional bonus. On	ce Feedback is available,
earch the Descurse Library for more information			



(800) 825-0224 advancedmd.com

🕒 Eligibility & Reporting

Quality

Promoting

Interoperability

Improvement Activities

Practice Details & Clinicians Individual Reporting Overview