MIPS Reporting Tips and Tricks

1) Every Visit measures:

- a. The following measures require that you perform the numerator action for EVERY VISIT within the reporting period.
 - USWR QCDR 1 (Adequate Off-loading of Diabetic Foot Ulcers at Each Visit)
 - 2. MIPS 130 (Documentation of Current Medications in the Medical Record)
 - 3. MIPS 131 (Pain Assessment and Follow-Up)
 - 4. MIPS 138 (Melanoma: Coordination of Care)
- b. Entering cases for these measures is slightly different.
 - 1. You will enter the first case as normal.
 - 2. For the second and any additional cases, you will use the Add Visit feature to add a linked visit:



- Click Add Visit to enter subsequent cases. The demographic information will pre-populate and you will start from the procedure tab.
- 4. Follow the same process for reporting the measures on the QCDR tab.
- 5. When you submit this case, it will appear right below the first case (or "parent" case). The Add Visit button will not appear for "child" cases.
- 6. Use the Add Visit button next to the first (or "parent") case to enter any additional cases.

2) Measures that require ICD-10 codes:

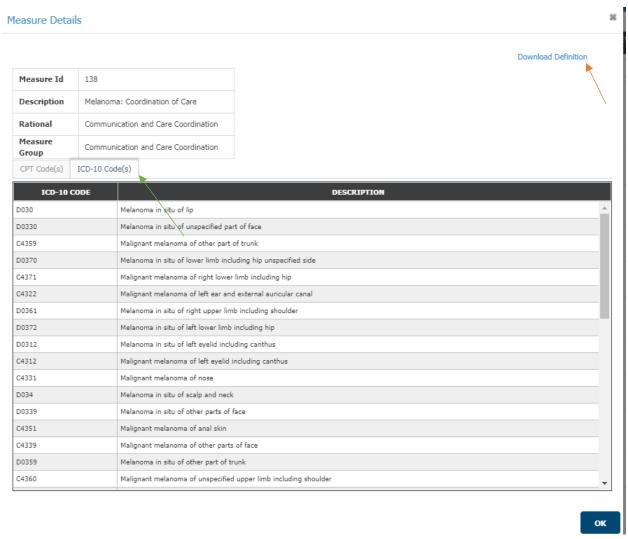
- a. The following measures require ICD-10 codes in addition to CPT codes.
 - 1. MIPS 137 (Melanoma: Continuity of Care Recall System)
 - MIPS 138 (Melanoma: Coordination of Care):
 - MIPS 224 (Melanoma: Overutilization of Imaging Studies in Melanoma)
 - 4. MIPS 236
 - 5. USWR QCDR 1 (Adequate Off-loading of Diabetic Foot Ulcers at Each Visit)

Tips:

On the QCDR Quality Dashboard, click Details next to any measure title.



Once in the Details Screen, you can view the relevant ICD codes there or click Download Definition to view the actual specification from CMS (or ASPS).



3) There are some "tricky" measures:

- a. Measure 110- Preventive Care and Screening: Influenza Immunization
 - 1. Requires 2 visits in order to report the measure in 2017 (this 2 visit restriction has been lifted for 2018)
 - a) At least one visit must happen between Jan 1, 2017-March 31, 2017 OR Oct 1, 2017-Dec 31, 2017.
 - b) The second visit can be anytime during 2017, but must be part of your reporting period. If you are only reporting 90 days, you will have to see the patient twice in that same 90-day period and bill a second visit outside of the Global Billing Period in order to report this measure.

- 2. Requires that the immunization be given during influenza season and that the reporting is done during influenza season.
 - a) If reporting this measure between January 1, 2017 and March 31, 2017, the measure can be reported for immunizations given in August, September, October, November, and December of 2016 or January, February, and March of 2017.
 - b) If reporting this measure between October 1, 2017 and December 31, 2017, the measure can be reported when the influenza immunization is administered to the patient during the months of August, September, October, November, and December of 2017.
 - c) Influenza immunizations administered during the month of August or September of a given flu season (either 2016-2017 flu season OR 2017-2018 flu season) can be reported when a visit occurs during the flu season(October 1 March 31).
- 2) Measure 226- Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
 - a. Requires 2 visits in order to report the measure in 2017
 - b. If you are only reporting 90 days, you will have to see the patient twice in that same 90-day period and bill a second visit outside of the Global Billing Period in order to report this measure.
- 3) Measure 236- Controlling High Blood Pressure
 - a. Requires that BOTH the systolic and diastolic pressures be controlled in order to report it. Make sure you check a box to represent both values.
 - b. We understand that the actual control of the blood pressure is not generally attributable to a plastic surgeon. However, this is an outcome measure that you can report if you need an additional measure.