



2018 Quality Measures Guide for ONCOCHART

This is the latest information we have obtained in regards to Quality for 2018. This document will be periodically updated as more information becomes available.

The PQRS program was replaced by the Quality Performance category in the [Merit-Based Incentive Program \(MIPS\)](#)

Quality Measures

ONCOCHART has made recording Quality data simple by aggregating the necessary questions onto tabs located in some E&M narratives. Answer the questions, and the Quality calculator will calculate the outcomes.

ONCOCHART has a [tool](#) to help you track your progress in regards to Quality.

It is highly recommended you answer **all** designated Quality measures, so that CMS can gather the information. This will also help you in not having to plan out which measures for which you want to collect data. It is **required** that you submit Quality data, or you may incur payment adjustments in future years.

It is very important you answer the questions and provide the healthcare quality information for which CMS is looking.

For example, if the patient is over or under weight, and you don't document your plan to get their weight back on track, it may count against the eligible clinician in terms of numerator/denominator calculations.

Another example is if the patient hasn't received a flu shot, and you did not indicate the patient hasn't received a flu shot, it may count against the EP in terms of numerator/denominator calculations.

Measure Implementation

Please note that 100% compliance for each measure is not the expected outcome, given that patients may not receive recommended care for reasons such as refusal or contraindications to treatment, which are not currently captured as exclusions in this set of measures.

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Quality Performance Category Requirements

Eligible clinicians will need to report [up to 6 measures](#), including at least one outcome measure. If an outcome measure is not available, choose a high priority measure.

To give yourself flexibility, we suggest you answer all of the below Quality measures in ONCOCHART. This will give you more options come attestation time.

Names and locations of all certified Quality Measures contained in ONCOCHART

Breast Cancer Screening (NOF 2372): Percentage of women age 50 - 74 who had a mammogram to screen for breast cancer. The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up: INI > *Sys Review* > *PQRS #112* > *Brst CA Screen*. **E, C, R**

Childhood Immunization Status (NOF 0038): The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up > *Clinical Quality Measure* > *Immunizations* > *Immunization Status*. **E**

Colorectal Cancer Screening (NOF 0034): Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer. The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up > *System Review* > *PQRS 113*. **E, C, R**

Controlling High Blood Pressure (NOF 0018): Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled during the measurement period. The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up > *Clinical Quality Measures* > *Control High BP*. **E, H, C, O, R**

Documentation of Current Medications in the Medical Record (NOF 0419): Percentage of specified visits for patients ages 18 years and older for which the eligible professional attests to documenting a list of current medications to the best of his/her knowledge and ability. The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up > *Allergy/Rx/Chemo* > *PQRS 130 Meds*. **E, H, C, R**

Falls: Screening for Future Fall Risk (NOF 0101): Percentage of patients 65 years of age and older who were screened for future fall risk during the measurement period. The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up > *Performance Indicators* > *Measure 154*. **E, H**

Oncology: Medical and Radiation - Pain Intensity Quantified (NOF 0384): Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently *receiving chemotherapy or radiation therapy* in which pain intensity is quantified. The question(s)/answer(s) associated with this measure can be found under *Weekly Progress Note* > *Pain* > *Measure #143*. **E, H, R**

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Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF

0421): Percentage of patients aged 18 years and older with an encounter during the reporting period with a documented calculated BMI during the encounter or during the previous 6 months, **AND** when the BMI is outside of normal parameters, follow-up is documented during the encounter or during the previous six months of the encounter with the BMI outside of normal parameters. **Normal parameters: Age 18 years and older; BMI ≥ 18.5 and <25 .** The question(s)/answer(s) associated with this measure can be found under Initial Evaluation and Follow-Up > *Clinical Quality Measures* > *Weight Screen #128*. **E, C, R**

Preventive Care and Screening: Influenza Immunization for Patients 6 months or older (NQF

0041): Percentage of patients aged 6 months and older who received an influenza immunization during the flu season (October through March). The question(s)/answer(s) associated with this measure can be found under INI and FUE > *Clinical Quality Measures* > *Flu Screen #110*. **E, C, R**

Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF

0028): Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months **AND** who received cessation counseling intervention if identified as a tobacco user. The question(s)/answer(s) associated with this measure can be found under INI and FUE > *Soc Hist* > *Measure #226*. **E, C, R**

Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer

Patients (NQF 0389): Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low risk of recurrence receiving interstitial prostate brachytherapy, or external beam radiotherapy to the prostate, or radical prostatectomy, or cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer. The question(s)/answer(s) associated with this measure can be found under WPN > *Prostate PQRS* > *PQRS #102*. **E, H, R**

Use of Imaging Studies for Low Back Pain (NQF 0052): Percentage of patients 18-50 years of age with a diagnosis of low back pain who did not have an imaging study (plain X-ray, MRI, CT scan) within 28 days of the diagnosis. The question(s)/answer(s) associated with this measure can be found under INI and FUE > *Clinical Quality Measures* > *Back Pain*. **E, H**

Quality Measures Submission Options

For the 2018 reporting period, eligible clinicians have the option to submit Quality measures via Medicare Part B Claims or via the QPP website (**recommended method**). (**The submission methods are subject to change at any time.**) (Verify all measure submission methods at <https://qpp.cms.gov/mips/quality-measures>)



PQRS Portal Submission (EHR Direct)

If you would like to submit Quality measure data via the QPP website, please contact the QPP Help Desk at 1-866-288-8292 or QPP@cms.hhs.gov in order to get help with creating the necessary CMS accounts and obtaining the appropriate account roles. Contact [ONCOCHART Technical Support](#) for help in generating your Quality category data file *after* the appropriate CMS accounts/roles are in place.

When contacting the QPP Help Desk, tell them ***“I would like to submit MIPS data generated from my EHR, and I need help/information on setting up the appropriate CMS accounts and obtaining the appropriate roles.”***

The reporting period for Quality Measures for 2018 is **the entire calendar year**.

Important Information for Quality

The recommended method of PQRS submission is via the PQRS Portal. Make sure you contact the PQRS helpdesk as soon as possible if you choose this option. If you choose another submission option, you'll need to make sure you've researched what that entails and make sure everything you need is in place.

Reference pages 2 and 3 to find out the submission methods available for each measure in ONCOCHART.

E – Indicates a measure that is electronically reportable via EHR.

C – Indicates a measure that is reportable via claims. (Also see page 10)

H – Indicates a high priority measure.

O – Indicates an outcome measure.

R – Indicates a measure that is reportable via a Registry.

You may only choose one submission option for the Quality performance category. If you choose to submit some measures via claims and some via EHR, CMS will **not** combine the two submission method to calculate an aggregated performance category score. They will score each submission and use the higher results.

If you have any questions about any of this, you can contact [ONCOCHART Technical Support](#).

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Screenshots of each Quality Measure question are on pages 6, 7 and 8.

If your questions and answers do not look **exactly** as they are displayed on pages 6, 7 and 8, please contact ONCOCHART Support.

MIPS Quality IDs

Breast Cancer Screening (NQF 2372): Quality ID 112

Childhood Immunization Status (NQF 0038): Quality ID 240

Colorectal Cancer Screening (NQF 0034): Quality ID 113

Controlling High Blood Pressure (NQF 0018): Quality ID 236

Documentation of Current Medications in the Medical Record (NQF 0419): Quality ID 130

Falls: Screening for Future Fall Risk (NQF 0101): Quality ID 318

Oncology: Medical and Radiation - Pain Intensity Quantified (NQF 0384): Quality ID 143

Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF 0421): Quality ID 128

Preventive Care and Screening: Influenza Immunization for Patients 6 months or older (NQF 0041): Quality ID 110

Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF 0028): Quality ID 226

Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients (NQF 0389): Quality ID 102

Use of Imaging Studies for Low Back Pain (NQF 0052): Quality ID 312



Quality Measure Screenshots

Breast Cancer Screening (NQF 2372): Childhood Immunization Status (NQF 0038):

Brst CA Screen 50-74yr cpt ▼

Patient age between 50 and 74 years
Screening mammography documented
Screening mammogram not performed/
Screening mammogram not performed/

***Immunization Status** ▼

2 years old ▲
4 DTaP
3 PV
1 MMR
2 HiB ▼

Colorectal Cancer Screening (NQF 0034):

Fecal Occ Bd last 12mo cpt ▼

▼

Flex Sig with 4 years cpt ▼

▼

Colonoscopy last 9 yrs cpt ▼

▼

▼

Documented and reviewed
Not performed, medical reason
Not performed, no reason documented

Controlling High Blood Pressure (NQF 0018):

*Control High BP

Diagnosed with hypertension
Diastolic BP < 90 mmHg
Diastolic BP >= 90 mmHg
Documentation of end stage renal disease (ESRD), dialysis, renal transplant or pregnancy
No documentation of BP, reason not given
Systolic BP < 140 mmHg
Systolic BP >= 140 mmHg

Documentation of Current Medications in the Medical Record (NQF 0419):

***Meds Documented 18...** cpt ▼

▼

Medications documented
Not Eligible, Patient Refuses
Not Eligible, Urgent Situation
Not Eligible, Cognitively Impaired
Not Eligible, medical reason
Not Documented, Reason not Specified



Falls: Screening for Future Fall Risk (NQF 0101):

Fall Risk Assess Doc. cpt ▼

▼

- Fall risk assessment documented
- Not completed, Medical Reason, Reduced Mobility
- Not Completed, Reason Not Specified

Oncology: Medical and Radiation - Pain Intensity Quantified (NQF 0384):

Pain intensity cpt ▼

▼

- Pain severity quantified; pain present
- Pain severity quantified; no pain present
- Pain severity not documented, reason not otherwise specified

Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up(NQF 0421):

BMI and Plan cpt ▼

▼

- Calculated BMI within normal parameters & documented
- BMI above upper level, FU Plan documented
- BMI below lower level, FU Plan documented
- BMI not calculated, No Reason
- BMI outside limits, no FU Plan documented, no reason
- Not eligible, overweight & managed by other physician
- Not eligible, terminal illness, < 6 months life expectancy
- Not eligible, patient is pregnant
- Not eligible, patient refuses BMI measurement
- Not eligible, medical reason
- Not eligible, emergent medical situation.
- Not eligible, reason documented

Preventive Care and Screening: Influenza Immunization for Patients 6 months or older (NQF 0041):

*Flu immunization cpt ▼

▼

- 6 months or older
- Influenza immunization administered
- Ordered but not given, med unavailable
- Not ordered or given, reason documented
- Not ordered or given, reason not given

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Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF 0028):

Tobacco Screen & Inter cpt ▼

- Screened & identified as tobacco non-user
- Tobacco user, received tobacco cessation counseling
- Tobacco screening not performed for medical reasons.
- Tobacco screening not performed reason not specified

Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients (NQF 0389):

*Bone Scan Use cpt ▼

- Bone Scan Done Pre treatment or Post Diagnosis
- Bone Scan Done, Medical Reason
- Bone Scan Done, System Reasons
- Bone Scan Not Done Pre Treatment or Post Diagnosis

Risk of Recurrence cpt ▼

- Low risk PSA <= 10 and GL <= 6 and T1c, T2a
- Intermediate risk PSA > 10-20 or GL 7 or T2b
- High risk PSA > 20 or GL 8-10 or T3a
- Undetermined recurrence risk

Use of Imaging Studies for Low Back Pain (NQF 0052):

Lower Back Pain ▼

- Diagnosed with cancer
- Diagnosed with recent trauma, IV drug
- Did not have an imaging study (X-Ray,
- Lower Back Pain
- Previously diagnosed with lower back p



Medicare Part B Claims Submission Method (Claims)

If you would like to submit Quality measures via Medicare Part B Claims, it is our recommendation that you speak with your billing company/personnel to inform them of your intent and to verify that all necessary CPTs below are correct, have pricing, are being generated and are being billed to CMS in a timely manner.

The reporting period for Quality Measures for 2018 **is the entire calendar year.**

CPTS Associated with Medicare Part B Claims Eligible Quality Measures

Breast Cancer Screening (NQF 2372): Colorectal Cancer Screening (NQF 0034):

3014F, 3014F-1P, 3014F-8P

3017F, 3017F-1P, 3017F-8P

Controlling High Blood Pressure (NQF 0018):

G8752, G8753, G8754, G8755, G8756, G9231

Documentation of Current Medications in the Medical Record (NQF 0419):

G8427, G8428, G8430

Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up (NQF 0421):

G8417, G8418, G8419, G8420, G8421, G8422

Preventive Care and Screening: Influenza Immunization for Patients 6 months or older (NQF 0041):

G8482, G8483, G8484

Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF 0028):

1036F, 4004F, 4004F-1P, 4004F-8P