



Privia eCQM Preparation

Electronic Clinical Quality Measures (eCQM)

- Beginning with the 2025 Performance Year, all ACOs must report quality to CMS using electronic clinical quality measure reporting (eCQM)
 - Only three measures are currently mandated by the CMS:
 - Diabetes Mellitus: Hemoglobin A1c Poor Control
 - Hypertension: Controlling High Blood Pressure
 - Screening for Depression and Follow-up Plan
 - CMS eCQMs mandates a 100% completeness threshold to cover:
 - All ACO Participants
 - All Payor data
 - eCQMs also require all practices to be on a 2015 CURES CHERT EHR
 - eCW is a compliant EHR
 - eCW may require that you ‘activate’ the eCQM module
 - The only acceptable sources that currently meet the ‘data traceability’ mandate are QRDA1 files and FHIR connections

eCQM Objective & MSSP Quality Reporting Options

Integrate electronic Clinical Quality Measures (eCQMs) vendor into Privia's electronic health record (EHR) system and data warehouse to improve our ability to monitor and meet required reporting regulatory compliance for our Medicare Shared Savings Program (MSSP) for PY 2025. Implementing an eCQM vendor will allow our organization to ensure accurate data collection, calculation, and reporting of eCQMs for Privia integrated ACOs and Privia Care Partners.

Performance Year 2023 & 2024:

- **Group Reporting Option (GPRO):** Chart Auditing – Random sample of 616 patients provided by CMS. ACO must report a measure minimum of 248.
- **Electronic Clinical Quality Measures (eCQM):** Electronic Submission - All Patients/ All Payers that fall into the measure denominator, except any exclusions.
- **Medicare Clinical Quality Measures (M CQM):** Electronic Submission **MEDICARE ONLY** – Patients that fall into the measure denominator, except any exclusions.

For PY 2023 and 2024, ACOs are allowed to submit GPRO and eCQM or Medicare CQMs and CMS will take the **best quality score of the two reported rates**.

Performance Year 2025 and Beyond: **Electronic Clinical Quality Measures (eCQM) ONLY**

Electronic Clinical Quality Measures (eCQM)

Privia Health has contracted with MDInteractive to connect to our non-platform Medical Group providers (Privia Care Partners providers) to gather this information and complete the submission to CMS.

- To ensure readiness for CMS reporting for PY2025, Privia will begin connecting providers now and run a parallel quality test for PY2024.
 - Benefits:
 - We will have access to better quality data throughout the year to help drive better provider performance.
 - We will be able to provide open gaps in the Privia Insights Sidecar to react to at the point of care
 - All 2015 CHERT EHRs are already capable of producing the necessary data and files for the eCQM submission, so no additional work is required from the EHR
 - If you have the eCQM module already enabled, then there is no additional cost and the reporting can be ran overnight by anyone with access to that module.

MSSP Measure Set – PY 2025

<u>Measure</u>	<u>Category</u>	<u>Reporting Type</u>
Diabetes - A1c Poor Control	eCQM (Clinical)	EHR-eCQM
Controlling Blood Pressure	eCQM (Clinical)	EHR-eCQM
Depression Screening & Follow Up	eCQM (Clinical)	EHR-eCQM
CAHPS for MIPS	Patient Experience	Surveys
Hospital Wide 30-day Readmission (HWR)	Clinical	Administrative/ Claims Based
Risk Standardized - All Cause Unplanned Admission for Multiple Chronic Conditions (MCC)	Clinical	Administrative/ Claims Based

NOTE: This is for PY 2025. CMS has the right to include additional measures in subsequent years.

Electronic Clinical Quality Measures (eCQM)

Our high-level workplan for the 1Q24 is:

1. Conduct data platform inventory
2. Collect measure data
 - a. After the GPRO submission work is complete, we will reach out to collect the first QRDA1 file
 - b. Our vendor will help troubleshoot issues with producing the file and we will be here to support (or produce the file for you if granted EHR access) you to make this as seamless as possible
3. Deduplicate and aggregate data
4. Review metrics
 - a. The initial QRDA1 file will help us understand if data is being recorded correctly for electronic reporting in the EHR and help you with any workflow improvements needed if it isn't
5. Connect with FHIR (between February - April 2024)
 - a. The FHIR connection will allow us to produce monthly reporting with no additional QRDA1 reporting needed from the practice
 - b. The FHIR connection will likely just require an authorization form with eCW to connect