



**Fireside Chat**  
**On APP+ and CMS Final Rule**

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December 18, 2024

# Meet the Presenters



**Tiara Swindell**  
Director of ACO Operations

- > Awarded *Modern Healthcare's* 40 Under 40 in 2024 for exceptional contributions to the healthcare industry
- > Launched 3 ACOs in 3 years
- > Leader among the earliest adopters of APP reporting since the 2022 Performance Year



**Amanda Lord**  
COO

- > Recognized QPP regulatory expert & advisor
- > National SME & advisor to Medicare
- > 10+ years in quality reporting / analytics

# Please Tell Us A Little About You

Choose the best answer that applies. When is/was your first APP reporting year:

- A. Before the 2024 Performance Year
- B. 2024
- C. 2025 Performance Year will be my first year
- D. I will not participate in APP reporting

# Fireside Chat



# 2025 Final Rule for MSSP ACOs

CMS finalized the APP Plus quality measure set for 2025 MSSP ACOs:

— eCQM, CQM, MCQM —

<b>QID 001</b> <b>Diabetes: Glycemic Status Assessment Greater Than 9%</b>	<b>QID 134</b> <b>Preventive Care and Screening: Screening for Depression and Follow-up Plan</b>
<b>QID 236</b> <b>Controlling High Blood Pressure</b>	<b>QID 112</b> <b>Breast Cancer Screening</b>

## Requirements:

- Reporting the APP Plus quality measure set
- eCQM, CQM, and/or Medicare CQM collection types: all remain available
- Complex Organizational Adjustment to incentivize eCQM reporting (1 additional point per eCQM measure)
- Flat Benchmarking will be applied for MCQMs (e.g. performance  $\geq 90$  = decile 10, 80-89.99 = decile 9)



***Patient360 supports all of the new measures and policies for registry reporting***

# Stop by our VBCExhibitHall.com Virtual Booth



Thank You! Please Reach Out to Learn More.

[john@patient360.com](mailto:john@patient360.com)





*Thank you*



# Appendix

# Quality Data Submission Options

## APP+ Quality Measure Set for 2025

### QID 001

Diabetes:  
Glycemic Status  
Assessment  
Greater Than  
9%

**Collection Type:**

- eCQM
- MIPS CQM
- Medicare CQM

### QID 134

Preventive Care  
and Screening:  
Screening for  
Depression and  
Follow-up Plan

**Collection Type:**

- eCQM
- MIPS CQM
- Medicare CQM

### QID 236

Controlling High  
Blood Pressure

**Collection Type:**

- eCQM
- MIPS CQM
- Medicare CQM

### QID 112

Breast Cancer  
Screening

**Collection Type:**

- eCQM
- MIPS CQM
- Medicare CQM

### QID 321

CAHPS for MIPS

**Collection**

- Type:**
- CAHPS for MIPS Survey

### QID 479

Hospital-Wide, 30-  
day, All-Cause  
Unplanned  
Readmission (HWR)  
Rate for MIPS  
Eligible Clinician  
Groups

**Collection**

- Type:**
- Claims

*Patient360 provides full support of CMS requirements for APP submission of registry measures, both eCQM and/or CQM.*

**eCQM/CQM/MCQM submission under APP requires data completeness on denominator eligible patients across all payers, for all patients.**

# Quality Data Submission Options

## APP+ Quality Measure Set for 2025

### eCQM, CQM, MCQM

QID 001

Diabetes: Glycemic  
Status Assessment  
Greater Than 9%

QID 134

Preventive Care and  
Screening:  
Screening for  
Depression and  
Follow-up Plan

QID 236

Controlling High  
Blood Pressure

QID 112

Breast Cancer  
Screening



*Patient360 provides full support of CMS requirements for APP submission of registry measures, including eCQM, CQM, and/or MCQM.*

### OUT OF SCOPE

QID 321

CAHPS for MIPS  
Survey

QID 479

Hospital-Wide, 30-  
day, All-Cause  
Unplanned  
Readmission (HWR)  
Rate  
(Claims-based)

APP Plus requires data completeness on denominator eligible patients across *all payers*, for *all patients*.

# 2025 APP-Specific Requirements

- ❖ eCQM, MIPS CQM, and/or Medicare CQM Collection types
- ❖ CQM 75% Data Completeness means 75% of CQM numerators and 100% CQM denominators. eCQMs are always 100%
- ❖ eCQM & CQMs when combined use CQM benchmarks
- ❖ Patient matching must occur across TINs
- ❖ PI is typically require for practices greater than 15. Verify with CMS

# Web Interface (GPRO) vs APP

Item	Web Interface	APP
Population	~2500 Medicare patients only	All patients, all payers
Measure Set	10 CQM Measures	4 eCQMs/CQMs/MCQMs
Data Source	Non-structured clinical documentation and billing codes	Granular clinical data from EHR
Data Completeness	Limited to ~2500 patients	100% of all eCQMs and 75% of CQMs
Other		<ul style="list-style-type: none"><li>- Support combining eCQM and CQMs</li><li>- Support dual submission of MCQM &amp; eCQM/CQMs</li><li>- 3% must be audited per CMS requirements</li></ul>

# Patient360 APP Patient Matching

Patient360 automatically de-duplicates patients across disparate TINs according to CMS APP requirements:

- ❖ Patient match on first name, last name, date of birth, and gender
- ❖ Criteria that has been vetted with CMS
- ❖ Option custom patient matching refinement based on customer requirements and data availability
- ❖ Patient matching is automatic and does not require remediation of matches

# Patient360 Data Completeness

- ❖ eCQMs - CMS requires 100% of denominator and 100% of numerator responses
- ❖ CQM Data Completeness requirements are 75% starting in 2024
- ❖ CQM - CMS requires 100% of denominator and 75% of numerator
- ❖ CQM Denominator can typically be derived from billing data, if needed
- ❖ Remaining CQM numerator responses above 75% can be “not reported” to accommodate undue burden of practices on paper or with EHRs that are not able to easily supply eCQM QRDAIs and CQM template data.
- ❖ Patient360 platform keeps track of data completeness to ensure compliance

# ACO Data Acquisition Methods

Option	eCQM/CQM	Transport	Features
1 QRDA I	eCQM	Portal   sFTP	<ul style="list-style-type: none"> <li>Generated by certified EHR</li> <li>Aggregated data results</li> <li>Multiple EHR system aggregation available</li> <li>Grouping/consolidation</li> </ul>
2 CSV Template	CQM	Portal   sFTP	<ul style="list-style-type: none"> <li>Report writer for MIPS CQMs</li> <li>Multiple EHR system aggregation available</li> <li>Encounter level data available</li> </ul>
3 Manual Entry	CQM	n/a	<ul style="list-style-type: none"> <li>Last mile connectivity</li> <li>Supports practices on paper or legacy EHR</li> </ul>
4 Encounter API	CQM	HTTPS	<ul style="list-style-type: none"> <li>Low level programmatic control of import</li> <li>Encounter level validation</li> <li>Standards-based API using JSON</li> <li>Provides submission level acknowledgement feedback</li> </ul>
5 Custom Interoperability	Custom	Custom	<ul style="list-style-type: none"> <li>Meet the data at its source</li> <li>Maximum flexibility to ingest data directly from EHR</li> <li>Reduced impact on practice IT staff</li> </ul>



# Implementation Process

