Financial Disclosures

- We have no financial interests or relationships to disclose.

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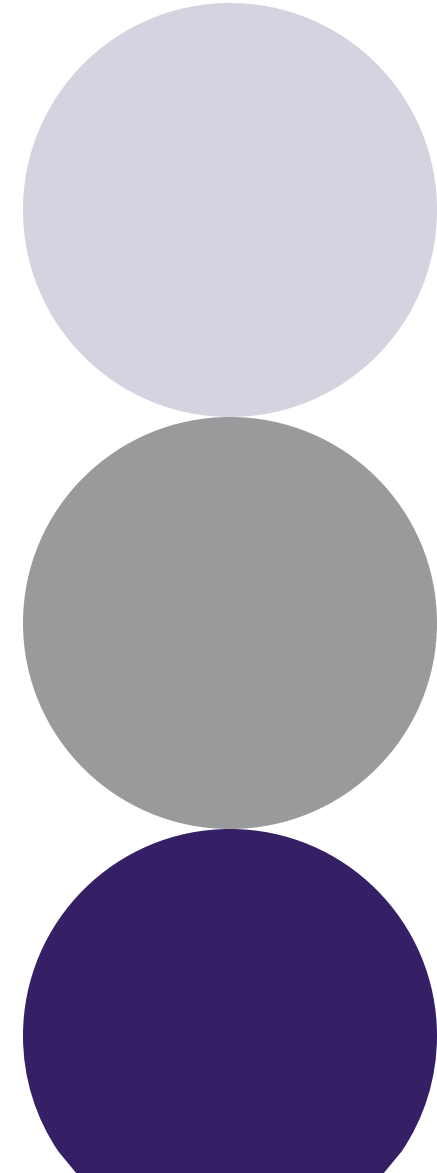
IRIS® Registry

Optimize Your 2022 MIPS Reporting Using the IRIS Registry
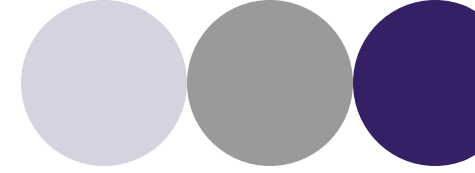
Brandy Keys, MPH,
Director, Health Policy

Flora Lum, MD,
Vice President, Quality and Data Science

Joy Woodke, COE, OCS, OCSR,
Director, Coding & Reimbursement

Questions for the Panel?

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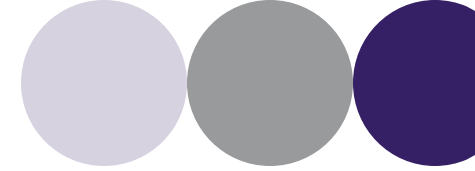
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2022 MIPS

MIPS 2022

- Four key questions:
  1. Will you be retired by 2024?
  2. Are you or your group exempt from 2022 MIPS?
  3. Was your practice significantly affected by extreme and uncontrollable circumstances?
  4. Define your goal: Avoid a penalty or try for a bonus?

- 9% penalty in 2024: estimated **$36,156** for average ophthalmologist

- Maximum bonus identified from 2021 reporting: 2.33%

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CMS Extreme and Uncontrollable Circumstances Exception

We've extended the 2022 MIPS EUC Exception application to allow individuals, groups, virtual groups, and APM Entities to submit an application requesting MIPS performance category reweighting due to the ongoing COVID-19 PHE. 2022 MIPS EUC Exception applications citing COVID-19 as the triggering event can be submitted until 8 p.m. ET on Friday, March 3, 2023.

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Quality Category - 30%

- Reporting requirements:
  - 6 measures
  - At least 1 outcome measure (or high priority if outcome not available)
  - **70** percent of qualifying patients for full year, no fewer than 20 patients

- No more bonus points
  - No bonus points for additional high priority or outcome measures
  - No bonus points for end-to-end electronic reporting

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Quality scoring

- Getting a perfect Quality category score will be challenging

- Some measures are subject to scoring limitations, including:
    - Topped out measures
    - Measures with "stalled" benchmarks
    - Measures with no benchmark

- These measures may impact your quality score and bonus, even if you have very high or perfect performance rates

- QCDR Measures:
    - The Academy has been preparing for these issues by developing QCDR measures for IRIS Registry as alternatives topped out and other QPP measures with scoring limitations

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Quality

- IRIS Registry – EHR Integration:
  - Provides flexibility
  - You select the measures you want to report
  - CMS will choose best six measures for scoring
  - Encourage submit all available measures because no negative impact
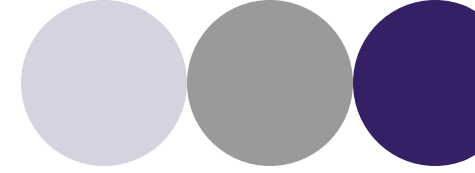 - Submit QCDR measures to establish a scoring benchmark

Registry-Related Improvement Activities for 2022 (15% total weight)

- IRIS – EHR Integration Required
  - IA_PM_7: Use of QCDR Feedback Reports that Promote Population Health (High)
  - IA_CC_6: Use of QCDR to Promote Improvements in Quality and Care Coordination (Medium)
  - IA_PM_10: Use of QCDR for Quality Improvement Across Patient Populations (Medium)
  - IA_PSPA_7: Use of QCDR for Practice Assessment and Improvements in Patient Safety (Medium)
  - IA_PSPA_2 Participation in MOC Part IV (Medium)
    - IRIS Registry users can complete an improvement project to count toward requirements for MOC *and* MIPS IA.
    - For 2022 MIPS, projects must have been submitted to ABO by Aug. 31 and started by Oct. 3.

COVID-19 Improvement Activity for 2022

- IRIS – EHR Integration Required
  - IA_ERP_3: COVID-19 Clinical Trials, High-weighted activity
  - Treat patients diagnosed with COVID-19 and simultaneously submit relevant, clinical data to a clinical data registry for the purposes of ongoing or future study

Registry-Related Promoting Interoperability Measure for 2022 (25% total weight)

- Clinical Data Registry Reporting Measure
  - Practices with IRIS Registry – EHR integration can report this measure
  - No longer required measure, optional reporting for 5 bonus points towards PI score

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Competing PI Submissions Result in 0 Score

- If you submit PI both though IRIS Registry and your EHR or QPP website:

- CMS will not aggregate multiple PI submissions
  - Different time periods
  - Different numerators
  - Different denominators
  - Different measures

- CMS considers partial/incomplete PI submissions through the QPP website to be competing

- Work together as a practice to be sure no competing submissions

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Provider to Patient Exchange

- Provide patient electronic access to their health information (40 points)

- Key steps to success:
  - Access to view online, download and transmit information within 4 business days
  - Confirm with your EHR vendor how to capture the action of providing timely access
  - Develop an internal workflow
  - Patients opt out after access provided – confirm with EHR still counted in numerator
  - Check EHR PI reports frequently, identify unusually low numbers
  - If functionality is available to auto offer patient access, confirm system setup and pitfalls
  - Start early!

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IRIS Registry

What is the IRIS Registry?

IRIS Registry (Intelligent Research in Sight) is the nation's first comprehensive eye disease clinical database, started March 25, 2014

- Improve care delivery and patient outcomes

- Provides individual feedback on performance and comparison to benchmarks

- Helps practices meet Merit-based Incentive Payment System requirement (MIPS)

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2021 Preliminary MIPS Performance: Ophthalmologists in the IRIS Registry

- IRIS Registry submitted for a total of 6,556 ophthalmologists

- 83% of ophthalmologists submitting through the IRIS Registry earned a score of 85 points or more

- 4,517 ophthalmologists are eligible to earn an exceptional performance bonus in 2023 ($26.4 million)

- 2,354 (31.7%) had the top score of 100 points and are eligible to earn the highest bonus

- 1,799 ophthalmologists are also eligible to earn a small bonus in 2022

- 6,556 ophthalmologists avoided the 9% penalty ($237.0 million in aggregate)

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IRIS Registry Main MIPS Reporting Tool for Ophthalmologists, 2017-2021

- Higher average score for ophthalmologists than average MIPS participant

- Majority of ophthalmologists earned an exceptional performance bonus

- 0.10% - 1.88% of Medicare Fee Schedule (based on 2017-2021 reporting years)

- Translates to $402 - $7,191 bonus per ophthalmologist/year

- $1,608 - $28,764 bonus per ophthalmologist for 2017-2021 reporting years
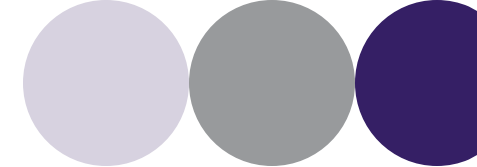
Total Savings in Avoided Penalties 2017-2020

$1.05 Billion

$102,963/ophthalmologist

IRIS Registry will continue to be the best option for ophthalmology practices

2022 MIPS IRIS Registry Deadlines

- IRIS-EHR Integration:
  - ~~June 15, 2022, register for IRIS-EHR integration~~
  - ~~Aug. 1, 2022, complete the IRIS-EHR integration process~~
  - ~~Sept 30, 2022, request mapping refinements for selected measures~~
  - ~~Dec. 31, 2022, complete all patient encounters~~
  - <mark>Jan. 31, 2023</mark>, enter all data in IRIS Registry for PI and IA, and sign Data Release Consent Form and submit to CMS if possible
  - <mark>March 31, 2023</mark>, final deadline to complete submissions to CMS through IRIS Registry dashboard

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Optimize Reporting

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- 2022 IRIS Registry Preparation Kit
  - Reference
  - Roles
  - Roadmaps
  - User Guide
  - Data Integrity
  - Reporting

- https://www.aao.org/iris-registry/user-guide/getting-started

- AAO Store: store.aao.org

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Misconceptions

- Integrating with the IRIS Registry takes care of everything

- Data in the IRIS Registry doesn't require regular review

- Quality measures are all that need to be reported to comply with MIPS

- The office administrator can handle everything, the clinicians need not play a role.

- MIPS is too much work (it's easier to just accept the penalty).

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Roadmaps

- Participation Status: qpp.cms.gov

- Reweighting the Performance Categories

- For the Small/Solo Practice

- Large Practice

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Roadmaps

- What 2022 MIPS Reporting is Worth

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Your Role & Responsibilities

- Regardless of Reporting Method
  - Start early in the year
    - Pick your Quality Measures
  - Establish your calendar of tasks
  - Establishing your Improvement Activity and Promoting Interoperability action plans.
  - Avoid pitfalls

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Your Role & Responsibilities

- EHR Integrated Practices
  - o Is the data kept current?
  - o Ensure mapping is correct
  - o Ensure EHR entry is correct
  - o Ensure providers & staff are aware

Your Role & Responsibilities

- Manually Reporting Practices
    - Set up workflow with staff for the new year
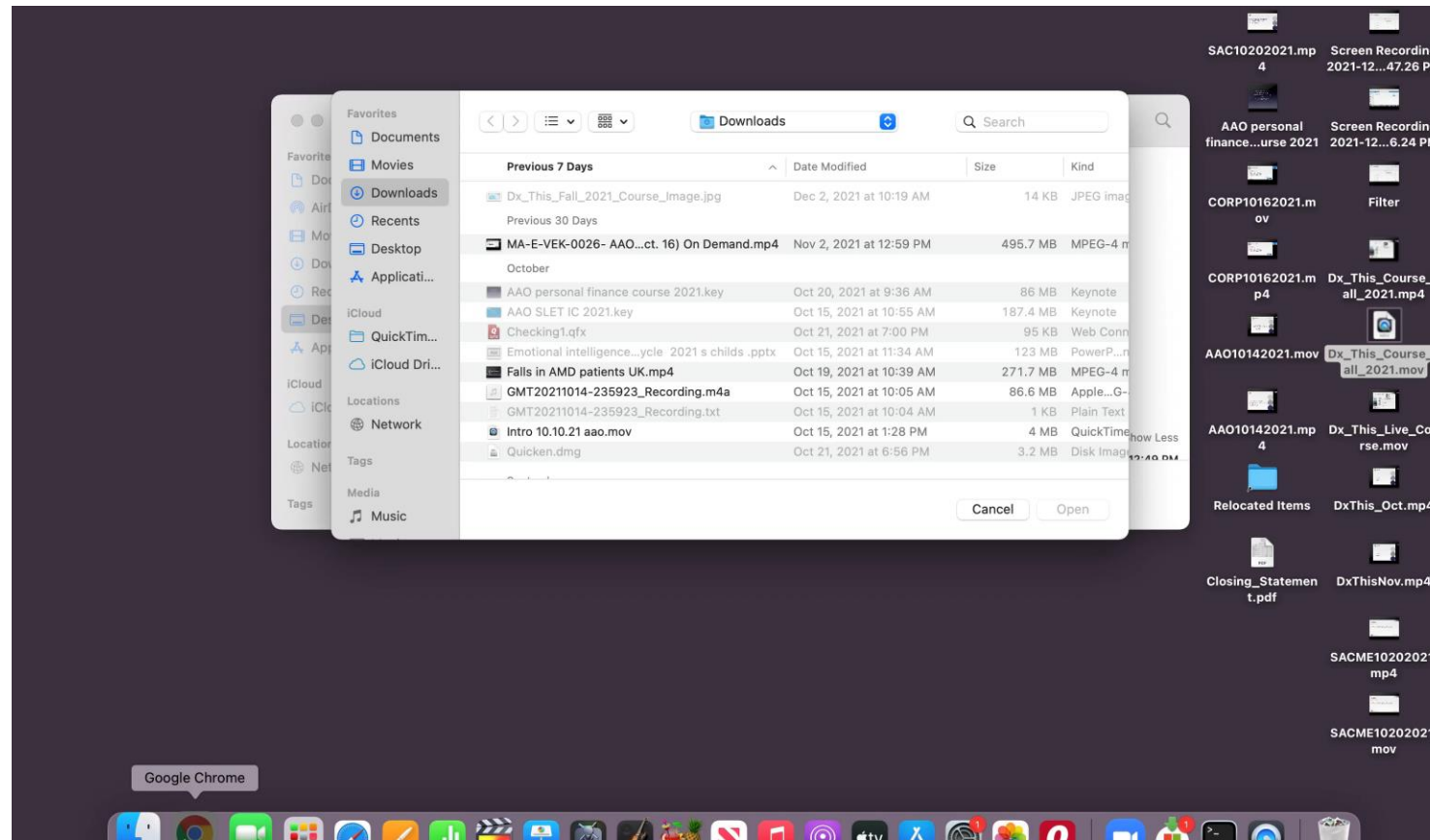   - Use the IRIS Registry to review quality performance

User Guide

Quality Performance Dashboard - Filter

Quality Performance Dashboard - Performance

Quality Performance Dashboard – Reviewing

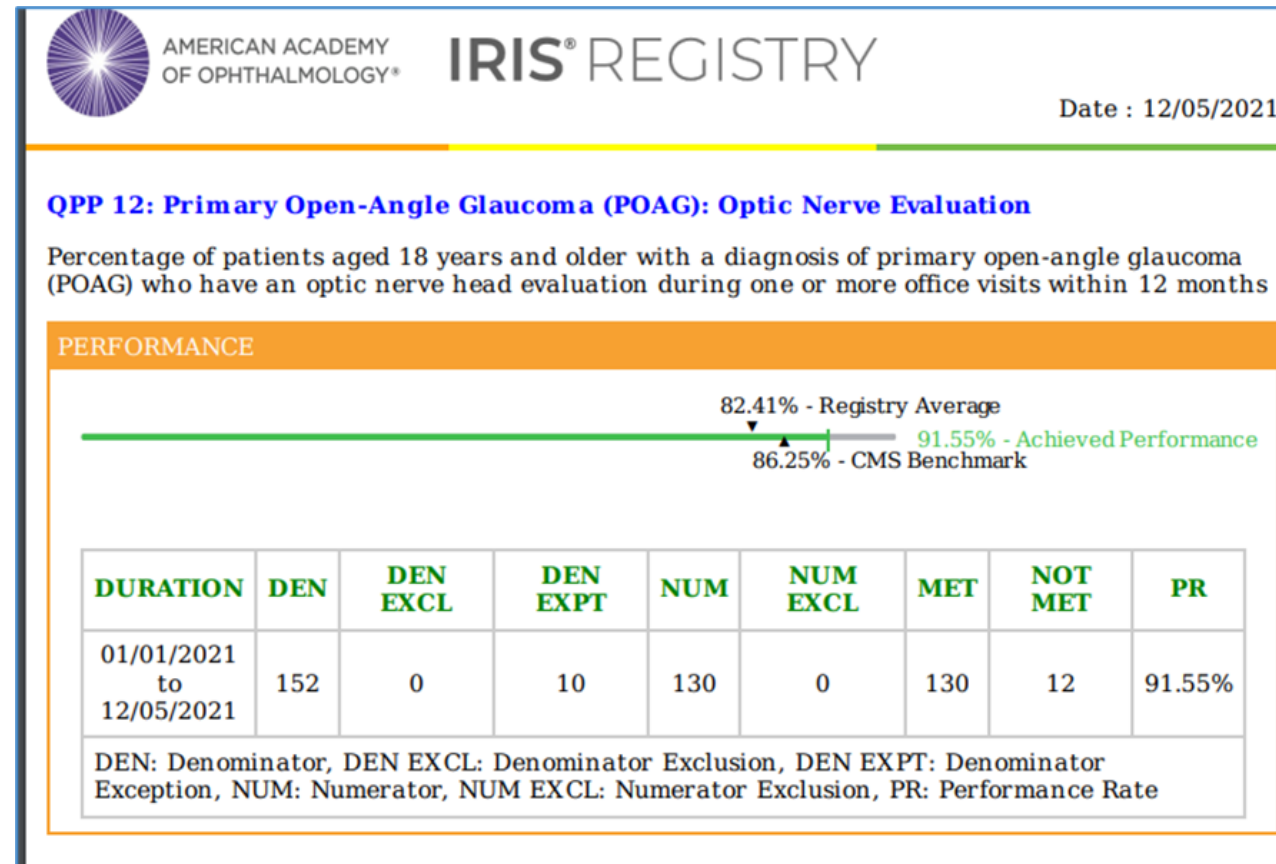
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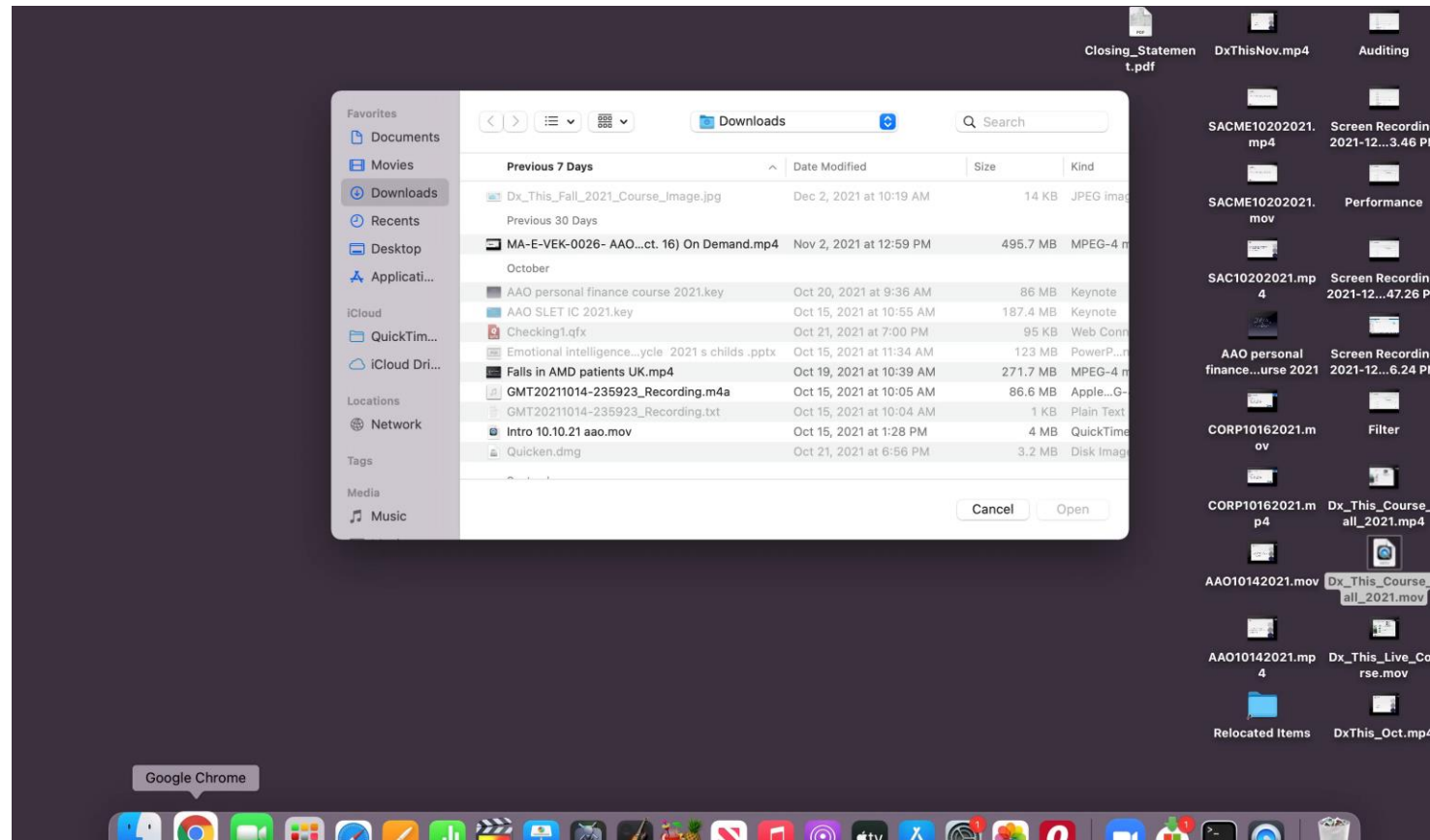
Quality Performance Dashboard – Discrepancies

- Catch Early:

    o Mapping Between the EHR and the IRIS Registry

    o Data Entry through the Web Portal

    o Staff Training

    o Clinician Awareness

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Quality Performance Dashboard - Reporting

Quality Performance Dashboard – Reporting

Academy MIPS Resources

- EyeNet MIPS 2022: A Primer & Reference
  - https://www.aao.org/eyenet/mips-manual-2022

- Practice Management
  - https://www.aao.org/medicare/mips

- Advocacy
  - https://www.aao.org/advocacy-overview
  - Washington Report Emails – Every Thursday

- MIPS@aao.org

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