

18 Improvement Activities That You Can Report via the IRIS Registry in 2017

Table 7: 18 Improvement Activities—At a Glance

	Improvement Activity (Activity ID)	Weighting	Eligible for ACI Bonus?	Credit for IRIS/EHR Integration?
See page 21	Provide 24/7 access to eligible clinicians or groups who have real-time access to patient’s medical record. (IA_EPA_1)	High	Yes	
	Engagement of new Medicaid patients and follow-up. (IA_AHE_1)	High		
	Use of QCDR [Qualified Clinical Data Registry] for feedback reports that incorporate population health. (IA_PM_7)	High		Yes
See page 22	Collection and follow-up on patient experience and satisfaction data on beneficiary engagement. (IA_BE_6)	High		
	Participation in CAHPS [Consumer Assessment of Healthcare Providers and Systems] or other supplemental questionnaire. (IA_PSPA_11)	High		
	Regularly assess the patient experience of care through surveys, advisory councils, and/or other mechanisms. (IA_BE_13)	Medium		
	Measurement and improvement at the practice and panel level. (IA_PSPA_18)	Medium		Yes
	Use of QCDR data for ongoing practice assessment and improvements. (IA_PSPA_7)	Medium		Yes
See page 23	Implementation of an antibiotic stewardship program. (IA_PSPA_15)	Medium		
	Collection and use of patient experience and satisfaction data on access. (IA_EPA_3)	Medium		
	Use of QCDR data for quality improvement such as comparative analysis reports across patient populations. (IA_PM_10)	Medium		Yes
	Implementation of use of specialist reports back to referring clinician or group to close referral loop. (IA_CC_1)	Medium	Yes*	
	Implementation of improvements that contribute to more timely communication of test results. (IA_CC_2)	Medium		
	Implementation of documentation improvements for practice/process improvements. (IA_CC_8)	Medium	Yes	
See page 24	Practice improvements for bilateral exchange of patient information. (IA_CC_13)	Medium	Yes*	
	Use of tools to assist patient self-management. (IA_BE_17)	Medium		
	Use of QCDR to promote standard practices, tools, and processes in practice for improvement in care coordination. (IA_CC_6)	Medium		Yes
	Participation in MOC Part IV. (IA_PSPA_2)	Medium		Yes

* In the regulations, the list of ACI measures related to this improvement activity includes measures from the ACI measures set but none from the 2017 ACI transition measures set.

Select Your Improvement Activities

You can use the web portal of the IRIS Registry (aao.org/iris-registry) to manually attest that you performed any of the 18 improvement activities listed above. (To review all activities, visit <https://qpp.cms.gov/measures/ia>.)

Will you max out with 4, 3, 2, or 1 activities? Your improvement activities score is capped at 40 points, with medium- and high-weighted activities each contributing 10 and 20 points, respectively (20 and 40 points, if you score double; see “How You’ll Be Scored,” page 18).

Select your improvement activities. Start by reviewing the “At a Glance” summary (Table 7), and use “Detailed Listings” (Table 8) for activity descriptions, suggestions for documenting your performance of improvement activities (so you’ll be ready for an audit), and more.

Earn an ACI bonus for using CEHRT. Four of the improvement activities listed in Table 7 boost your ACI score if you use CEHRT in carrying them out (see “Consider the

ACI bonus for using CEHRT,” on page 19 of *MIPS Manual 2017*). Table 7 flags those 4 activities. See their detailed listings in Table 8 for lists of related 2017 ACI transition measures and ACI measures that can help you complete those 4 activities. (If you don’t have CEHRT, you can still do those 4 activities, but you won’t get the ACI bonus.)

Get credit for IRIS Registry/EHR integration. There are 5 activities for which you can get credit by integrating your EHR system with the IRIS Registry and then using the IRIS Registry’s dashboard. A sixth—the MOC Part IV activity—also requires you to participate in an ABO pilot program.

How CMS suggests you document activities. The documentation suggestions in Table 8 were published by CMS in April. CMS states that the documentation should be inclusive of dates during the selected continuous 90-day (or longer) performance period.