Welcome to Today’s Expert Webinar for the 2020 MQii Learning Collaborative: “QCDR Malnutrition Measures Increase Opportunities to Document Standardized Malnutrition Care”

November 10, 2020
We will start promptly at 3:00 PM ET
(2:00 PM CT; 1:00 PM MT; 12:00 PM PT)

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## Today’s Agenda

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Presenter</th>
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<tr>
<td>Welcome and introduction to the webinar</td>
<td>Christina Badaracco, MPH, RD, LDN Research Scientist at Avalere Health</td>
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<tr>
<td>Introduction to QPP and MIPS; Overview of QCDRs and available malnutrition measures</td>
<td>Angel Valladares, MPH MQii Data and Measures Lead at Avalere Health</td>
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<tr>
<td>Guidance for reporting measures to Premier and the U.S. Wound Registry</td>
<td>Catherine D’Andrea, RDN, LDN Manager of Quality Initiatives at the Academy of Nutrition and Dietetics</td>
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Questions – 15 min
Learning Objectives

- Understand how the QPP and MIPS influence practice by RDNs
- Describe the MQii Malnutrition Quality Measures included in the Premier Clinician Performance Registry and the U.S. Wound Registry
- Identify the steps involved in reporting the malnutrition quality measures using the Premier Clinician Performance Registry and the U.S. Wound Registry
• Brief overview of the Quality Payment Program and QCDR reporting option

• Overview of malnutrition measures adopted by Premier and US Wound registries

• RDN participation requirements for the QPP
Brief Overview of the QPP and MIPS

This program replaces the long-standing provider-level payment system with a 2-track system for provider payment and reporting based on performance.

This track of the program scores participants on 4 categories (quality measures, use of HIT, quality improvement activities, and cost of care).

This track allows providers to get participation credit for taking on more financial risk and participating in an approved Alternative Payment Model (APM) in which payment is impacted by performance.

In 2020, CMS announced that approximately 84% of the more than 800,000 MIPS participating providers will receive a +1.97% payment adjustment in 2021 based on their performance in the 2019 MIPS performance period.

HIT: Health Information Technology
The MIPS is compartmentalized into four separately-scored categories of performance. Each category's score is combined into one overall MIPS Score ranging from 0—100. Payment adjustments are applied to future payments based on performance.

- **Quality**: 40%
- **Cost**: 20%
- **Promoting Interoperability**: 25%
- **Improvement Activities**: 25%

*RDNs specifically are not required to report data for promoting interoperability and are not scored on the cost category. As a result, their scores will be redistributed across quality (85%) and improvement activities (15%) categories.*
MIPS-Eligible Clinicians Can Report Individually or as Part of a Clinical Practice or Group

**Individual Reporting**
- Qualified Clinical Data Registry (QCDR) Measures
- Qualified CMS Registry (MIPS Measures Only)
- Electronic Health Record Measure Reporting
- Medicare Part B Claims Measures

**Group Reporting**
- Qualified Clinical Data Registry (QCDR) Measures
- Qualified CMS Registry (MIPS Measures Only)
- Electronic Health Record Measure Reporting
- CAHPS for MIPS Survey
- Administrative Claims for All-Cause Readmission Measure

All providers must report 6 quality measures to meet reporting criteria for the Quality Performance Category (85% of the Total MIPS Score for RDNs)

CAHPS: Consumer Assessment of Healthcare Providers and Systems
QCDRs Expand Provider Options for Quality Measure Reporting

What is a QCDR?
– QCDRs are clinical registries that have been approved by CMS to collect performance data from MIPS participants and report quality measures on a provider’s behalf to meet MIPS reporting requirements

Why choose the QCDR reporting option?
– Simplifies data collection and reporting for MIPS participants
– Delivers quarterly feedback reports on reported measures
– Provides benchmarking information
– Provides access to a more expansive set of available measures to report for MIPS credit not available in other reporting options

Given that there are ZERO nutrition-specific MIPS measures in the standard set, QCDRs provide an option to report specialty measures more relevant to a nutrition professional’s daily practice.
QCDRs Adopting Academy Malnutrition Measures

Premier Clinician Performance Registry
- Large Practices
- All Specialties
- Includes All 2020 MIPS Measures

U.S. Wound Registry
- Small Practices or Individuals
- Surgical, Wound Care, Podiatry Specialties
- Includes All 2020 MIPS Measures
Each QCDR Has Integrated 4 Measures and CMS Has Approved 2 Measures Per QCDR for MIPS Credit

Quality Measures Included and Proposed in Each QCDR

<table>
<thead>
<tr>
<th>Premier Clinical Performance Registry</th>
<th>U.S. Wound Registry</th>
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<tbody>
<tr>
<td>Measure #1: <strong>Measure Title:</strong> Completion of a Screening for Malnutrition Risk and Referral to a Registered Dietitian Nutritionist for At-Risk Patients</td>
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<tr>
<td>Measure #2: <strong>PINC56:</strong> Assessment of Nutritionally At-Risk Patients for Malnutrition and Development of Nutrition Recommendations/Interventions by a Registered Dietitian Nutritionist</td>
<td><strong>USWR27:</strong> Assessment of Nutritionally At-Risk Patients for Malnutrition and Development of Nutrition Recommendations/Interventions by a Registered Dietitian Nutritionist</td>
</tr>
<tr>
<td>Measure #3: <strong>PINC55:</strong> Appropriate Documentation of Malnutrition Diagnosis</td>
<td><strong>USWR28:</strong> Obtaining Preoperative Nutritional Recommendations from a Registered Dietitian Nutritionist (RDN) in Nutritionally At-Risk Surgical Patients</td>
</tr>
<tr>
<td>Measure #4: <strong>Measure Title:</strong> Nutrition Care Plan Communicated to Post-Discharge Provider</td>
<td><strong>Measure Title:</strong> Appropriate Documentation of Malnutrition Diagnosis</td>
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QCDR participants receive performance feedback on all measures including those that are not selected for MIPS credit. These non-MIPS measures may serve as a useful tool to advance quality improvement across multiple areas.
Case Study: Successful MIPS Participation as an RDN

QUALITY

MIPS Participating RDN Must Choose 6 Measures:

- **USWR27**: Assessment of Nutritionally At-Risk Patients for Malnutrition and Development of Nutrition Recommendations / Interventions by a Registered Dietitian Nutritionist
- **USWR28**: Obtaining Preoperative Nutritional Recommendations from a Registered Dietitian Nutritionist (RDN) in Nutritionally At-Risk Surgical Patients
- **MIPS128**: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan
- **MIPS239**: Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents
- **MIPS431**: Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling
- **MIPS374**: Closing the Referral Loop: Receipt of Specialist Report

IMPROVEMENT ACTIVITIES

2 high-weight activities or 4 medium-weight activities

High-weight activities that satisfy this category include:

- Use of QCDR for feedback reports that incorporate population health
- Provide 24/7 access to eligible clinicians or groups who have real-time access to patient’s medical record

RDN selects the QCDR reporting option for his/her MIPS participation
RDNs are only scored on quality and improvement activities

Catherine D’Andrea, RDN, LDN
Manager of Quality Initiatives
Academy of Nutrition and Dietetics

- Available nutrition quality measures for RDNs
- Description of QCDRs and how to participate in measure reporting
- Review of MQii resources for QCDR malnutrition quality measures
MIPS Updates Impacting RDNs

Merit Based Incentive Payment System (MIPS)

2019: RDNs added as eligible clinicians

2020: Nutrition/dietitian specialty measure set introduced
QCDR Collaborations Provide Opportunities for RDNs
MQii Malnutrition Quality Measures in the Premier Clinician Performance Registry (PCPR) and U.S. Wound Registry (USWR)

<table>
<thead>
<tr>
<th>2020 QCDR Measure ID</th>
<th>Measure Title</th>
<th>MIPS Eligible</th>
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<tbody>
<tr>
<td>PINC 55</td>
<td>Appropriate Documentation of a Malnutrition Diagnosis</td>
<td>Yes</td>
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<tr>
<td>PINC 56</td>
<td>Assessment of Nutritionally At-Risk Patients for Malnutrition and Development of Nutrition Recommendations/Interventions by a Registered Dietitian Nutritionist</td>
<td>Yes</td>
</tr>
<tr>
<td>USWR 27</td>
<td>Assessment of Nutritionally At-Risk Patients for Malnutrition and Development of Nutrition Recommendations/Interventions by a Registered Dietitian Nutritionist</td>
<td>Yes</td>
</tr>
<tr>
<td>USWR 28</td>
<td>Obtaining Preoperative Nutritional Recommendations from a Registered Dietitian Nutritionist (RDN) in Nutritionally At-Risk Surgical Patients</td>
<td>Yes</td>
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Measure Specifications:
https://uswoundregistry.com/quality-measures/
PCPR Enrollment

<table>
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<tr>
<th>Current PCPR Organization</th>
<th>New PCPR Organization</th>
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<tr>
<td>Touch base with the current PCPR “point of contact” to within your organization to discuss adding malnutrition measures to the Premier contract.</td>
<td>If your organization has recently contracted with PCPR, note there are 2 PCPR staff “points of contacts” to assist with:</td>
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<tr>
<td></td>
<td>• Expectations and Onboarding to the Registry</td>
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<td>• Data Integration</td>
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<td></td>
<td>In addition, an onboarding webinar is also available to new PCPR users.</td>
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Premier Clinician Performance Registry is available to assist with MIPS reporting: [https://solutions.premierinc.com/cpi/full-service/](https://solutions.premierinc.com/cpi/full-service/)
# USWR Enrollment

<table>
<thead>
<tr>
<th>Step 1: Enroll</th>
<th>Step 2: Log In</th>
<th>Step 3: Purchase</th>
<th>Step 4: Complete IA</th>
<th>Step 5: Quality Measures</th>
</tr>
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</table>
| • There is no cost to join.  
• Complete enrollment on the USWR website. | • After enrolling, username and password will be emailed to log in to the Registry.  
• Review MIPS package options. | • Select MIPS package that best fits needs.  
• May contact a USWR representative prior to making a purchase. | • Select “Improvement Activities” from an easy drop-down menu.  
• Complete 1 or more of the Improvement Activities. | • Choose the quality measures to report from EHR.  
• Submit the Quality Measures you wish to report to the US Wound & Podiatry Registries. |

**USWR support is provided during every step of the MIPS reporting process:** [www.uswoundregistry.com](http://www.uswoundregistry.com)
Summary of Next Steps for Enrollment

Premier Clinician Performance Registry

✓ Determine if a current contract exists
✓ If a contract exists, discuss adding measures with Premier contact for organization
✓ For a new contract, email Clara_Dantonio@PremierInc.com
✓ Work with assigned Premier staff to select measures and prepare for data integration

U.S. Wound Registry

✓ Complete the enrollment form on USWR website
✓ Choose enrollment package that best meets your needs
✓ Select Quality Measures for MIPS reporting and Improvement Activities
✓ Prepare to upload data to USWR

More Information on Preparing to Enroll

✓ Review Academy resources
✓ Identify and resolve barriers by emailing questions to quality@eatright.org
Academy as a Measure Steward

Overview of Malnutrition Quality Measures

The Centers for Medicare and Medicaid Services (CMS) employ quality measures in a variety of quality incentive programs to publicly report data, including the Hospital Inpatient Quality Reporting (HIQR) Program and track of the Quality Payment Program (QPP), the Merit-based Incentive Payment System (MIPS). The Academy of Nutrition and Dietetics serves as measure steward to the below Malnutrition Quality Measures in order to document standardized malnutrition care as well as support RDN participation in CMS quality incentive programs.

### Electronic Clinical Quality Measures – Inpatient Reporting

The four (4) malnutrition eCQMs have been adopted by numerous health systems and hospitals throughout the nation as a part of the Malnutrition Quality Improvement Initiative (MQii) Learning Collaborative. The four malnutrition measures were reviewed by the National Quality Forum (NQF) and remain on the Centers for Medicare and Medicaid Services (CMS) Measures under Consideration List (MUC List) for consideration into the CMS Hospital Inpatient Quality Reporting (HIQR) Program.

- **NQF #3087/MUC16-294**: Completion of a Malnutrition Screening within 24 hours of Admission
- **NQF #3088/MUC16-296**: Completion of a Nutrition Assessment for Patients Identified as At-Risk for Malnutrition within 24 hours of a Malnutrition Screening
- **NQF #3089/MUC16-372**: Nutrition Care Plan for Patients Identified as Malnourished after a Completed Nutrition Assessment
- **NQF #3090/MUC16-344**: Appropriate Documentation of a Malnutrition Diagnosis

### Global Malnutrition Composite Score Measure – Inpatient Reporting

The Global Malnutrition Composite Score Measure (composite measure) focuses on adults 65 years and older admitted to inpatient service who receive care appropriate to their level of malnutrition risk/and or malnutrition diagnosis if properly identified. The Academy continues to pursue the adoption of the composite measure into the CMS Hospital Inpatient Quality Reporting (HIQR) Program and is seeking endorsement from the NQF Prevention and Population Health Portfolio Standing Committee.

### Malnutrition Measures Approved for Inclusion in QCDRs – Outpatient Reporting

New Malnutrition Quality Measures included in two Qualified Clinical Data Registries (QCDRs) provides physicians and RDNs who bill outpatient Medicare Part B, increased opportunity to participate in the Merit-Based Incentive Payment System (MIPS). The Premier Clinician Performance Registry and the U.S. Wound Registry offer Quality Measures for MIPS.
Academy’s QCDR Webpage

Qualified Clinical Data Registry
Academy’s QCDR Microlearning Series

Qualified Clinical Data Registry Microlearning Series: What RDNs Need to Know about Qualified Clinical Data Registries

Member Price: $0.00
Nonmember Price: $0.00
Qty: 1

Details

Discover what RDNs need to know about Qualified Clinical Data Registries (QCDR), understand the benefits of MIPS reporting via QCDRs, find out about the Academy and QCDR collaborations, and recognize the significance of Malnutrition Quality Measures for RDN Reporting. This 4-part microlearning series consists of 15 minute modules on the following topics:

- Microlearning 1 – QCDRs Support MIPS Participation for Reporting Malnutrition Quality Measures: An Overview
- Microlearning 2 – Onboarding and Enrollment in Premier Clinician Performance Registry: Reporting the New Malnutrition Quality Measures
- Microlearning 3 – Onboarding and Enrollment in U.S. Wound Registry: Reporting the New Malnutrition Quality Measures
- Microlearning 4 - Post Enrollment: Measure Selection, Data Collection and Submission Review

CPEU: 1.0
CPE Level: 2
Learning Need Codes: 7160, 5390, 1020, 5020
Spotlight on Malnutrition Recorded Webinar

Malnutrition Alert!
Focus on nutrition optimization, surgery, recovery and outcomes

Quality Measures Across Practice Settings: Malnutrition Alert! Focus on Nutrition Optimization, Surgery, Recovery and Outcomes
Email additional questions to:

quality@eatright.org
Questions?

15 mins
CPEU Credit

CPE Accredited Provider

Commission on Dietetic Registration

Continuing Professional Education Certificate of Attendance
- Attendee Copy-

Participant Name: ____________________________

Registration Number: __________________________

Activity Title: QCDR Malnutrition Measures Increase Opportunities:
to Document Standardized Malnutrition Care

Activity Number: 159048

Date Completed: 11/10/2020

Number of CPEUs Awarded: 1.0

*Performance Indicator(s): ____________________________

CPE Level: 2

Provider Code: AM003

Provider Signature: ____________________________

RETAINT ORIGINAL COPY FOR YOUR RECORDS
*Refer to your Professional Development Portfolio Guide For PIs
CPEU Credit (continued)
Appendix
# The Academy Stewards 3 Sets of Malnutrition-Focused Quality Measures

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<th>Individual Hospital eCQM Set</th>
<th>Global Malnutrition Composite Score</th>
<th>QCDR Nutrition Measures</th>
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</table>
| - Hospital-focused and guide QI efforts focused on: 1. improving timing of malnutrition screening; 2. improving timing of nutrition assessment for those at risk; 3. document nutrition care plan for those with malnutrition; 4. medical diagnosis of malnutrition for those assessed | - Hospital-focused composite measure consisting of 4 components  
- Provides overall performance score for completing the nutrition care process to identify and treat malnutrition in hospitalized patients  
- Being considered for adoption into the CMS Hospital IQR Program | - Two separate sets of measures that correspond to the PCPR and USWR focused on care coordination between RDNs, physicians, and specialists (such as surgeons)  
- Reportable measures via the 2 available QCDRs for MIPS participation credit |

For more information on the specific details for each measure set, visit the Academy website [here](#).