

RamSoft

MACRA Resource



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Disclaimer

This documentation is created to provide guidelines to physicians to achieve MIPS scoring using the RamSoft platform. Information posted in this document does not represent an endorsement by the U.S. Department of Health and Human Services.

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1 Executive Summary

This document outlines Ramsoft's guidance for MACRA Resources based on ACR guidelines. It details MIPS, QCDR and Improvement activity measures that are currently supported by RamSoft products.

Our products have been designed to enable eligible providers/practioners, who do significant Medicare work to qualify for full reimbursement. RamSoft has identified a number of quality performance measures and improvement activities appropriate for imaging operations, reporting for which is currently support by RamSoft.

What is MACRA?

MACRA is a federal law that stands for the Medicare Access and CHIP Reauthorization Act of 2015. MACRA repealed the broken Medicare sustainable growth rate formula and reformed Medicare's reimbursement system with two new payment pathways for physicians: the MIPS and Alternate Payment Models (APM).

What is MIPS?

The Merit-based Incentive Payment System (MIPS) is part of the Centers for Medicare & Medicaid Services (CMS) Quality Payment Program (QPP). The Quality Payment Program reforms Medicare by receiving and validating physician-submitted data, providing performance feedback, determining MIPS scores, and adjusting payments.

MIPS focuses on four categories, assigning providers a final score based on their performance and will serve as a modifier on their Medicare Part B reimbursements.


The categories and the proposed weightage has been outlined below:

MIPS Performance Category	Category Weight	Highlights of the performance category in Year 3 (2019)
Quality	45%	<ul style="list-style-type: none"> Assess the quality of care to ensure patients get the right care at the right time Groups can submit measures via multiple collection types Facility-based scoring is available to groups that qualify for facility-based measurement
Cost	15%	<ul style="list-style-type: none"> Helps create efficiencies in Medicare spending No data submission requirement (other than administrative claims submission) Facility-based scoring is available to groups that qualify for facility-based measurement
Improvement Activities	15%	<ul style="list-style-type: none"> Supports expanded practice access, population management, care coordination, beneficiary engagement, patient safety and practice assessment, participation in an Alternative Payment Model (APM), achieving health equity, emergency preparedness and response, and integrated behavioral and mental health.
Promoting Interoperability*	25%	<ul style="list-style-type: none"> Supports the secure exchange of health information and use of 2015 Edition certified EHR technology Implements a new scoring methodology

*This MIPS category has no weight (does not apply) to Non-patient Facing physicians. This applies to most radiologists:
<https://qpp.cms.gov/mips/special-statuses?py=2020#non-patient-facing-2020>

2 QCDR Measures

RamSoft recommends using the ACR National Radiology Data Registry (NRDR™) to report quality measures: <https://www.acr.org/Practice-Management-Quality-Informatics/Registries/Qualified-Clinical-Data-Registry>


Measure	: Report Turnaround Time: Radiography				
Measure ID	: ACRad15	Measure Type	: Outcome	Inverse Measure	: 
Priority	: High	Submission	: ACR G.R.I.D		
NQS Domain	: Communication and Care Coordination				
NRDR Database	: General Radiology Improvement Database				

Measure Description:

Mean Radiography Reporting turn around time

Required Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	-

Measure	: Report Turnaround Time: Ultrasound (Excluding Breast Us)				
Measure ID	: ACRad16	Measure Type	: Outcome	Inverse Measure	: 
Priority	: High	Submission	: ACR G.R.I.D		
NQS Domain	: Communication and Care Coordination				
NRDR Database	: General Radiology Improvement Database				


Measure Description:

Mean Ultrasound RTAT

Applicable Software:

RamSoft Core Application(s)	PowerServer
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RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	-


Measure	: Report Turnaround Time: MRI				
Measure ID	: ACRad17	Measure Type	: Outcome	Inverse Measure	: 
Priority	: High	Submission	: ACR G.R.I.D		
NQS Domain	: Communication and Care Coordination				
NRDR Database	: General Radiology Improvement Database				

Measure Description:

Mean MRI Reporting turn around time

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	-


Measure	: Report Turnaround Time: CT				
Measure ID	: ACRad18	Measure Type	: Outcome	Inverse Measure	: 
Priority	: High	Submission	: ACR G.R.I.D		
NQS Domain	: Communication and Care Coordination				
NRDR Database	: General Radiology Improvement Database				

Measure Description:

Mean CT Reporting turn around time

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	-


Measure	: Report Turnaround Time: PET				
Measure ID	: ACRad19	Measure Type	: Outcome	Inverse Measure	: 
Priority	: High	Submission	: ACR G.R.I.D		
NQS Domain	: Communication and Care Coordination				
NRDR Database	: General Radiology Improvement Database				

Measure Description:

Mean PET reporting turn around time

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	-

Measure	: Report Turnaround Time: Mammography				
Measure ID	: ACRad25	Measure Type	: Outcome	Inverse Measure	: 
Priority	: High	Submission	: ACR G.R.I.D		
NQS Domain	: Communication and Care Coordination				
NRDR Database	: General Radiology Improvement Database				

Measure Description:

Mean Mammography reporting turn around time

Applicable Software:	
RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	-

3 MIPS Measures

Measure	:	Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for Procedures Using Fluoroscopy			
Category	:	Diagnostic Radiology			
Measure ID	:	145	Measure Type	:	Process
Priority	:	High	Submission	:	Manual Submission via CMS Website/QCQR
NQS Domain	:	Patient Safety			
NRDR Database	:	General Radiology Improvement Database			

Measure Description:

Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available)

Numerator:

Number of fluorographic images (Custom Fields for Exposure Time) and image count for the study. Exposure Time at the end of the study, when we finish the Fluro and exposure Time on Custom field.

Denominator:

All final reports for procedures using fluoroscopy

Applicable Software:

RamSoft Core Application(s)	PowerServer
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RamSoft Ancillary Application(s)	-
3 rd Party Application(s)	-

Link to Measure:

https://www.acr.org/-/media/ACR/NOINDEX/Measures/2020_Measure_145_MIPSCQM.pdf

4 Improvement Activities

4.1 Measures Facilitated by RamSoft

Measure	:	Regularly assess the patient experience of care through surveys, advisory councils and/or other mechanisms			
Sub Category	:	Beneficiary Engagement			
Activity ID	:	IA_BE_13			
Weighting	:	Medium	Submission	:	Manual Submission via CMS Website/QCQR

Measure Description:

Regularly assess the patient experience of care through surveys, advisory councils and/or other mechanisms

ACR Recommended Activities:

- Formal mechanisms in place to continually assess and improve patient focused care
- Embedded in ACR RO Accreditation

Ramsoft Compatible Activities:

- Formal mechanisms in place to continually assess and improve patient focused care

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	Patient Survey
3 rd Party Application(s)	-

Measure	:	Implementation of Use of Specialist Reports Back to Referring Clinician or Group to Close Referral Loop		
Sub Category	:	Care Coordination		
Activity ID	:	IA_CC_1		
Weighting	:	Medium	Submission	: Manual Submission via CMS Website/QCDR

Measure Description:

Performance of regular practices that include providing specialist reports back to the referring individual MIPS eligible clinician or group to close the referral loop or where the referring individual MIPS eligible clinician or group initiates regular inquiries to specialist for specialist reports which could be documented or noted in the EHR technology

ACR Recommended Activities:

- Implementation of critical and incidental findings communication system to directly inform referring clinicians
- Use of standardized radiology imaging or procedural reports and language or EHR notes
- ACR RO Accreditation requires treatment summary/follow up communication to referring physician

Ramsoft Compatible Activities:

- Implementation of critical and incidental findings communication system to directly inform referring clinicians
- Use of standardized radiology imaging or procedural reports and language or EHR notes
- ACR RO Accreditation requires treatment summary/follow up communication to referring physician

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	RapidResults + Fax Service + Messaging
3 rd Party Application(s)	-

Measure	:	Care transition standard operational improvements			
Sub Category	:	Care Coordination			
Activity ID	:	IA_CC_11			
Weighting	:	Medium	Submission	:	Manual Submission via CMS Website/QCDR

Measure Description:

Establish standard operations to manage transitions of care that could include one or more of the following:

- Establish formalized lines of communication with local settings in which empaneled patients receive care to ensure documented flow of information and seamless transitions in care; and/or
- Partner with community or hospital-based transitional care services

ACR Recommended Activities:

- Use of Health Information Exchange or other structured system for sharing of images across institutions, entities and geographic area
- Provision of consultation for outside images; develop mechanism for formal consult/opinion on outside images
- Example: <https://www.acr.org/Membership/Young-Physician-Section/Articles/Management-of-Outside-Imaging>
- Implementation of critical and incidental findings communication system to directly inform referring clinicians
- ACR RO Accreditation requires treatment summary/follow up communication to referring physician

Ramsoft Compatible Activities:

- Use of Health Information Exchange or other structured system for sharing of images across institutions, entities and geographic area
- Provision of consultation for outside images; develop mechanism for formal consult/opinion on outside images
- Implementation of critical and incidental findings communication system to directly inform referring clinicians
- ACR RO Accreditation requires treatment summary/follow up communication to referring physician

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	RapidResults + Fax Service + Messaging + HL7 Integration
3 rd Party Application(s)	-

Measure	:	Implementation of improvements that contribute to more timely communication of test results			
Sub Category	:	Care Coordination			
Activity ID	:	IA_CC_2			
Weighting	:	Medium	Submission	:	Manual Submission via CMS Website/QCDR

Measure Description:

Timely communication of test results defined as timely identification of abnormal test results with timely follow-up

ACR Recommended Activities:

- Implementation of critical and incidental findings communication system to directly inform referring clinicians
- ACR RO Accreditation requires treatment summary/follow up communication to referring physician
- Outcome tracking or follow up: track and document all the alerts created by the radiologists that required follow-up care or imaging such as follow-up of incidental pulmonary nodules; follow up with patients to facilitate obtaining appropriate follow-up of incidental findings discovered on imaging

Ramsoft Compatible Activities:

- Implementation of critical and incidental findings communication system to directly inform referring clinicians
- ACR RO Accreditation requires treatment summary/follow up communication to referring physician

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	RapidResults + Fax Service + Messaging
3 rd Party Application(s)	-

Measure	:	Provide 24/7 Access to MIPS Eligible Clinicians or Groups Who Have Real-Time Access to Patient's Medical Record		
Sub Category	:	Expanded Practice Access		
Activity ID	:	IA_EPA_1		
Weighting	:	High	Submission	: Manual Submission via CMS Website/QCDR

Measure Description:

Provide 24/7 access to MIPS eligible clinicians, groups, or care teams for advice about urgent and emergent care (e.g., MIPS eligible clinician and care team access to medical record, cross-coverage with access to medical record, or protocol-driven nurse line with access to medical record) that could include one or more of the following:

- Expanded hours in evenings and weekends with access to the patient medical record (e.g., coordinate with small practices to provide alternate hour office visits and urgent care);
- Use of alternatives to increase access to care team by MIPS eligible clinicians and groups, such as e-visits, phone visits, group visits, home visits and alternate locations (e.g., senior centers and assisted living centers); and/or
- Provision of same-day or next-day access to a consistent MIPS eligible clinician, group or care team when needed for urgent care or transition management

ACR Recommended Activities:

- Onsite 24/7 coverage
- Radiation Oncology facilities provide access for emergency treatment on 24/7 basis (ACR RO Accredited facilities)

Ramsoft Compatible Activities:

- Ability to access patient studies 24/7

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	RapidResults
3 rd Party Application(s)	-

Measure	:	Collection and use of patient experience and satisfaction data on access			
Sub Category	:	Expanded Practice Access			
Activity ID	:	IA_EPA_3			
Weighting	:	Medium	Submission	:	Manual Submission via CMS Website/QCDR

Measure Description:

Collection of patient experience and satisfaction data on access to care and development of an improvement plan, such as outlining steps for improving communications with patients to help understanding of urgent access needs

ACR Recommended Activities:

Use of patient surveys to identify and improve access issues in areas such as appointment or exam wait times, distance to available imaging facility

Ramsoft Compatible Activities:

Use of patient surveys to identify and improve access issues in areas such as appointment or exam wait times, distance to available imaging facility

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	Patient Survey
3 rd Party Application(s)	-

Measure	:	Chronic Care and Preventative Care Management for Empaneled Patients			
Sub Category	:	Population Management			
Activity ID	:	IA_PM_13			
Weighting	:	Medium	Submission	:	Manual Submission via CMS Website/QCDR

Measure Description:

Proactively manage chronic and preventive care for empaneled patients that could include one or more of the following:

- Provide patients annually with an opportunity for development and/or adjustment of an individualized plan of care as appropriate to age and health status, including health risk appraisal; gender, age and condition-specific preventive care services; and plan of care for chronic conditions;
- Use condition-specific pathways for care of chronic conditions (e.g., hypertension, diabetes, depression, asthma and heart failure) with evidence-based protocols to guide treatment to target; such as a CDC-recognized diabetes prevention program;
- Use pre-visit planning to optimize preventive care and team management of patients with chronic conditions;
- Use panel support tools (registry functionality) to identify services due;
- Use predictive analytical models to predict risk, onset and progression of chronic diseases; or
- Use reminders and outreach (e.g., phone calls, emails, postcards, patient portals and community health workers where available) to alert and educate patients about services due; and/or routine medication reconciliation

ACR Recommended Activities:

Use of reminder system for mammograms that allows for notifying patients of due date for exam

Ramsoft Compatible Activities:

Use of reminder system for mammograms that allows for notifying patients of due date for exam

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	Stana
3 rd Party Application(s)	-

Measure	:	Participation in MOC Part IV			
Sub Category	:	Patient Safety and Practice Assessment			
Activity ID	:	IA_PSPA_2			
Weighting	:	Medium	Submission	:	ACR RADPEER

Measure Description:

In order to receive credit for this activity, a MIPS eligible clinician must participate in Maintenance of Certification (MOC) Part IV. Maintenance of Certification (MOC) Part IV requires clinicians to perform monthly activities across practice to regularly assess performance by reviewing outcomes addressing identified areas for improvement and evaluating the results. Some examples of activities that can be completed to receive MOC Part IV credit are: the American Board of Internal Medicine (ABIM) Approved Quality Improvement (AQI) Program, National Cardiovascular Data Registry (NCDR) Clinical Quality Coach, Quality Practice Initiative Certification Program, American Board of Medical Specialties Practice Performance Improvement Module or American Society of Anesthesiologists (ASA) Simulation Education Network, for improving professional practice including participation in a local, regional or national outcomes registry or quality assessment program; specialty- specific activities including Safety Certification in Outpatient Practice Excellence (SCOPE); American Psychiatric Association (APA) Performance in Practice modules.

ACR Recommended Activities:

- American Board of Radiology MOC Part IV Practice Quality Improvement activities
- ACR National Radiology Data Registry (NRDR) participation meets ABR Part IV requirements
- Participation in ACR'S RADPEER peer review program

Ramsoft Compatible Activities:

Participation in ACR'S RADPEER peer review program

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	Peer Review Module
3 rd Party Application(s)	ACR RADPEER

Measure	:	Use of QCDR data for ongoing practice assessment and improvements			
Sub Category	:	Patient Safety and Practice Assessment			
Activity ID	:	IA_PSPA_7			
Weighting	:	Medium	Submission	:	ACR G.R.I.D

Measure Description:

Participation in a Qualified Clinical Data Registry (QCDR) and use of QCDR data for ongoing practice assessment and improvements in patient safety, including:- Performance of activities that promote use of standard practices, tools and processes for quality improvement (for example, documented preventative screening and vaccinations that can be shared across MIPS eligible clinician or groups);- Use of standard questionnaires for assessing improvements in health disparities related to functional health status (for example, use of Seattle Angina Questionnaire, MD Anderson Symptom Inventory, and/or SF-12/VR-12 functional health status assessment);- Use of standardized processes for screening for social determinants of health such as food security, employment, and housing;- Use of supporting QCDR modules that can be incorporated into the certified EHR technology; or- Use of QCDR data for quality improvement such as comparative analysis across specific patient populations for adverse outcomes after an outpatient surgical procedure and corrective steps to address adverse outcomes.

ACR Recommended Activities:

ACR National Radiology Data Registry (NRDR) provides participants performance feedback to assess practice and identify areas for improvement:

- Dose Index Registry (DIR) allows assessment for optimizing dose from CT exams to improve patient safety
- Interventional Radiology Registry (IR) allows assessment of procedural quality and safety
- Lung Cancer Screening Registry (LCSR) allows assessment of dose level of low dose CT for screening
- General Radiology Improvement Database (GRID) allows assessment of safety areas such as wrong patient/wrong site, unattended falls.

Ramsoft Compatible Activities:

- General Radiology Improvement Database (GRID) allows assessment of safety areas such as wrong patient/wrong site

Applicable Software:

RamSoft Core Application(s)	PowerServer
RamSoft Ancillary Application(s)	ACR GRID Integration
3 rd Party Application(s)	

4.2 Measures Met by Radiology Practice

Measure	:	Financial Navigation Program		
Sub Category	:	Beneficiary Engagement		
Activity ID	:	IA_BE_24		
Weighting	:	Medium	Submission	: Manual Submission via CMS Website

Measure Description:

In order to receive credit for this activity, MIPS eligible clinicians must attest that their practice provides financial counseling to patients or their caregiver about costs of care and an exploration of different payment options. The MIPS eligible clinician may accomplish this by working with other members of their practice (for example, financial counselor or patient navigator) as part of a team-based care approach in which members of the patient care team collaborate to support patient-centered goals. For example, a financial counselor could provide patients with resources with further information or support options, or facilitate a conversation with a patient or caregiver that could address concerns.

Measure	:	Participation in Joint Commission Evaluation Initiative		
Sub Category	:	Patient Safety and Practice Assessment		
Activity ID	:	IA_PSPA_13		
Weighting	:	Medium	Submission	: Manual Submission via CMS Website

Measure Description:

Participation in Joint Commission Ongoing Professional Practice Evaluation initiative.

Measure	:	Cost Display for Laboratory and Radiographic Orders		
Sub Category	:	Patient Safety and Practice Assessment		
Activity ID	:	IA_PSPA_25		
Weighting	:	Medium	Submission	: Manual Submission via CMS Website

Measure Description:

Implementation of a cost display for laboratory and radiographic orders, such as costs that can be obtained through the Medicare clinical laboratory fee schedule.