

# Quality Insights Quality Innovation Network Participation Agreement

## Physician Practice Quality Improvement Projects

### Cardiovascular Health, Meaningful Use (MU), Value-Based Modifier (VBM), and Physician Quality Reporting System (PQRS)

Our practice agrees to participate in the Physician Practice Quality Improvement Project noted below which addresses cardiac health, PQRS measures, Meaningful Use, Value-Based Modifier Payment, and the Physician Feedback Reporting Program. This project is part of the five year contract that Quality Insights Quality Innovation Network has with the Centers for Medicare & Medicaid Services (CMS) and can reduce time, costs, and improve the quality of healthcare delivered to patients in the physician office setting.

Below are the responsibilities in this collaborative project. The effective date of the participation agreement shall commence on the date signed below and will remain in effect until July 31, 2019.

#### **Through active participation in the Physician Practice Quality Improvement Project, the QIN-QIO agrees to the following:**

- Provide consultation to enhance electronic health record (EHR) optimization
- Provide assistance to align reporting for quality and financial incentive programs, such as PQRS, MU, and VBM, to prevent decreased reimbursement, avoid future penalties, and take advantage of financial incentives
- Provide assistance with generating reports and analyzing data on patients with special conditions, including use of alerts and reminders to maximize services
- Provide assistance in identification of best practices and intervention tools and resources to improve performance on cardiac health measures and chronic disease and prevention measures
- Provide assistance in office efficiency in EHR reporting of clinical quality measures
- Promote improved patient communication and patient and family engagement to improve patient health and self-management
- Facilitate opportunities for practices from DE, LA, NJ, PA, and WV (the Quality Insights QIN-QIO network) to work together in collaborative workshops and peer mentoring programs for learning and sharing

#### **Through active participation in the Physician Practice Quality Improvement Project, the practice agrees to the following:**

- Actively participate in educational programs, teleconferences, webinars, and online forums
- Join the Meaningful Use of Health Information Technology Improvement Project for physician practices online sharing group provided by Tomorrow's Healthcare™
- Share best practices related to improving cardiac health and increasing patient engagement in management of chronic diseases
- Implement evidence-based system changes and process improvement plans to enhance the care of patients
- Provide measurement data (numerators and denominators) for analysis on a **quarterly** basis for the following four PQRS measures:
  1. Aspirin therapy (PQRS #204, NQF #0068) – Increase the percentage of patients with ischemic vascular disease who have documented use of aspirin
  2. Blood pressure control (PQRS #236, NQF #0018) – Increase the percentage of patients who had a diagnosis of hypertension and whose blood pressure was adequately controlled
  3. Cholesterol control (PQRS #316) – Increase the percentage of Fasting Low Density Lipoprotein (LDL-C) Test Performed and Risk-Stratified Fasting LDL
  4. Smoking/Tobacco Use (PQRS #226, NQF #0028) – Increase the percentage of patients screened and who receive smoking cessation counseling

**Confidentiality Statement**

*Under federal regulations, a healthcare quality improvement project is considered a quality review study as defined in 42 CFR Section 480.101(b) as being "an assessment, conducted by or for Quality Insights Quality Innovation Network, of a patient care problem for the purpose of improving patient care through peer analysis, intervention, resolution of the problem and follow-up." Further, federal regulations at 42 CFR Section 480.140 protect the identities of individual patients, practitioners, and institutions that participate in such studies, and prohibits, with few exceptions, Quality Insights Quality Innovation Network from disclosing any specific information about their work on quality review studies. Quality Insights Quality Innovation Network cannot disclose information or data about participants in a quality review study to any party unless the information identifies only physicians, other practitioners, or practices, and those parties must consent to the release of information.*

By affixing my signature, I agree to adhere to the responsibilities of the practice and abide by the above terms.

Practice Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Name of Authorized Practice Representative: \_\_\_\_\_

Title of Authorized Practice Representative: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please send this signed Participation Agreement AND a completed Practice Agreement Enrollment Form to:**

QIN-QIO Staff Name: \_\_\_\_\_

Via E-mail: \_\_\_\_\_ OR

Via Fax: \_\_\_\_\_



This material was prepared by Quality Insights, the Medicare Quality Innovation Network-Quality Improvement Organization for West Virginia, Pennsylvania, Delaware, New Jersey and Louisiana under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication number QI-B4-082014A



