



## What Surgeons Can Do in 2016 to Prepare for 2017

### Quality

**Successfully participate in the Physician Quality Reporting System (PQRS) for 2016.** Although quality measure options and reporting thresholds might change in 2017, PQRS will continue to form the foundation of the quality component of MIPS. It is important to familiarize yourself with the current set of PQRS measures and reporting mechanisms (claims, registry, EHR, and so on). Understanding which measures are most applicable to your practice and learning how to incorporate data collection into your practice workflow now will improve your chances of success under MIPS.

If you already participate in PQRS, review your PQRS Feedback Report. Understanding your measure reporting and performance rates under PQRS will help you determine the best strategy for reporting under MIPS. Information about accessing your report is available on the CMS website.

If you currently are not participating in PQRS, it is not too late to start. ACS has two registries that can be used for PQRS reporting in 2016: the Surgeon Specific Registry (SSR) and the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP).

### Resource Use

**Review your Quality and Resource Use Report (QRUR) report from CMS.** This report will help you to better understand your performance on both quality and cost measures compared with other Medicare providers and consider how your practice patterns might be impacting your score. CMS intends to use much of the same cost data it currently collects under the Physician Value-Based Payment Modifier for calculating the Resource Use component score of MIPS.

### Advancing Care Information (ACI)

**Confirm that your electronic health record (EHR) system is certified by the Office of the National Coordinator for Health IT (ONC), and determine whether it is the 2014 or 2015 edition.**

**Review the list of measures and objectives for the current EHR Incentive Program (also known as Meaningful Use).**

Although reporting thresholds will likely change, CMS intends to maintain most of the current objectives and measures in the EHR Meaningful Use program as the basis of calculating ACI scores under MIPS.

A few things you can do to prepare:

- Make sure you are able to conduct a security risk analysis since CMS has proposed that clinicians must meet this current requirement to receive any score under the proposed ACI category.
- Set up the groundwork for patient engagement through your patient portal since some objectives focus on encouraging patients to use these portals to view, download, and transmit health information in 2017.
- If you do not have an ONC-certified EHR and/or have not participated in Meaningful Use, review the ACS Basic EHR Starter Guide at [www.facs.org/advocacy/regulatory/ehr/basic-ehr-starter-guide](http://www.facs.org/advocacy/regulatory/ehr/basic-ehr-starter-guide).

### Clinical Practice Improvement Activities (CPIA)

CPIA is a new component in MIPS where clinicians will be scored on their level of engagement in activities intended to advance clinical practice, such as care coordination, shared decision making, safety checklists, and expanded access for patients. **In order to prepare, you can review the list of proposed CPIA activities and begin to identify a potential six activities that you could perform in 2017.** Although this list will not be finalized until after November 2016, reviewing the current list will help you understand what type of activities are most likely to qualify. You can view the list of proposed CPIA activities at [www.facs.org/qpp/mips2016](http://www.facs.org/qpp/mips2016).