

Using the Mental & Behavioral Health Registry (MBHR) to Boost Quality & Reimbursement

Performance Year 2019



AMERICAN
PSYCHOLOGICAL
ASSOCIATION
Services, Inc.

M·B·H·R

MENTAL & BEHAVIORAL
HEALTH REGISTRY



Healthmonix



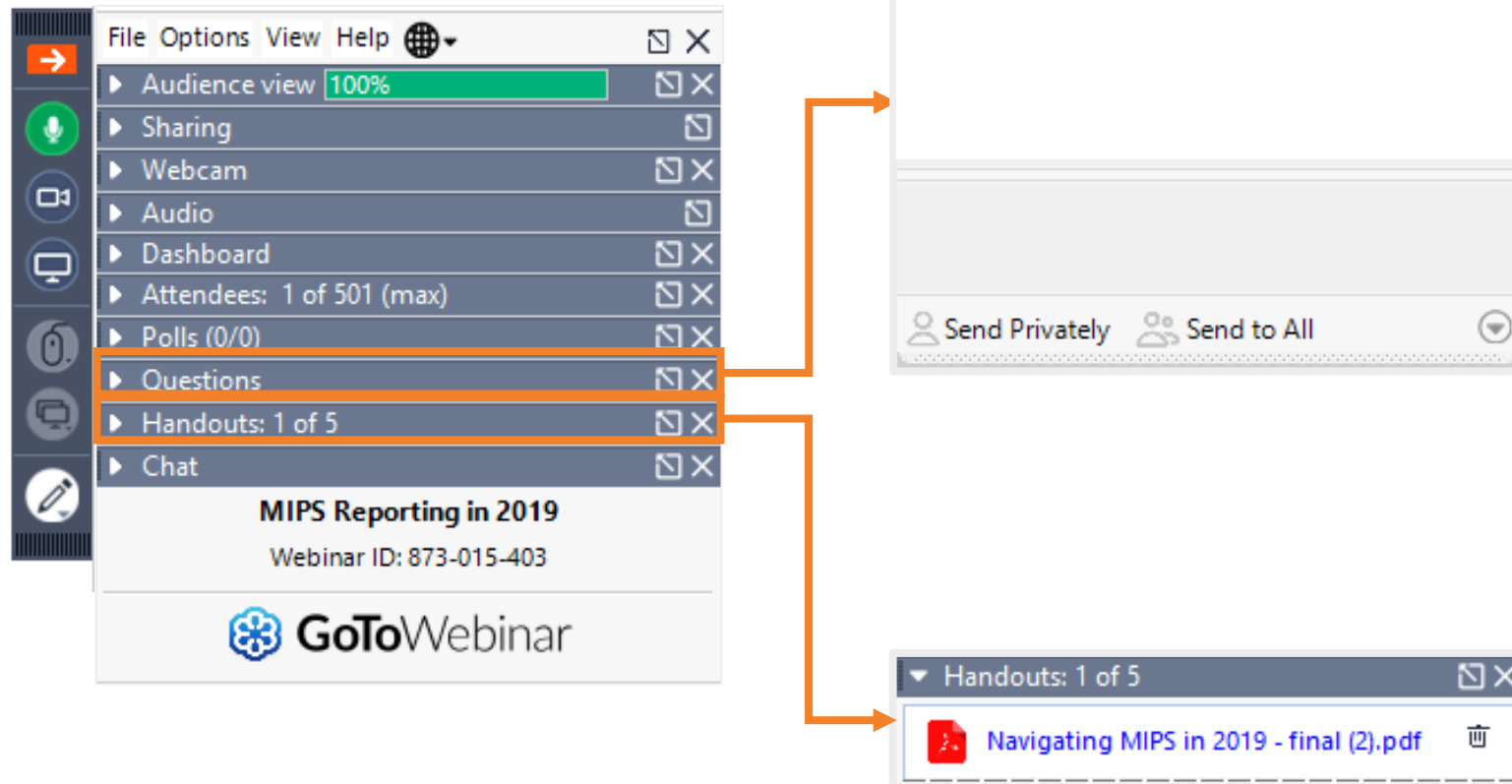
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Past President of APA

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MIPS Specialist



Handouts and Questions

GoToWebinar Widget



1. Questions can be submitted throughout via the questions section of the GoToWebinar widget.
2. To download handouts, go to the handout section of the GoToWebinar widget. Click the .pdf file to download.

OUR VISION

We are dedicated to advancing psychology as the leading profession in determining how to measure high quality mental healthcare and receive optimal payment for that care. We deliver through providing solutions for measuring, tracking, and improving financial, operational, and quality outcomes.



**PSYCHOLOGY
LEADERSHIP**



**BETTER
REIMBURSEMENT**



**TRACK
OUTCOMES**



**DEMONSTRATE
QUALITY OF
CARE**



**MARKET
YOURSELF**

2019 MIPS Roadmap to Success

1

**Take steps to
make you a MIPS
expert**

2

**Determine how
you will report
to CMS**

3

**Discover how the
MBHR will lead
you to success**

Who is eligible?

Eligible Clinician Types

- Physicians
- Physician Assistants
- Nurse Practitioners
- Clinical Nurse Specialists
- Certified Registered Nurse Anesthetists

New for QPP 2019:

- **Clinical Psychologists**
- Physical Therapists
- Occupational Therapists
- Qualified Speech-Language Pathologists
- Qualified Audiologists
- Registered Dietitians Nutrition Professionals

Exemption Categories

Check your eligibility here - <http://healthmonix.com/mips-pro/qpp-mips-eligibility/>



Newly Enrolled in Medicare



Low Volume Threshold
 $\leq$ **\$90,000** in Medicare Part B Charges **-or-** $\leq$ **200** Medicare Part B patients **-or-** $\leq$ **200** covered professional services.



Advanced APM Participation

Who can be eligible?

Pathway to “Opt-In”



Opt-In Option

Meet at least one of these variables

≥\$90,000 in Medicare Part B Charges **-or-** **≥ 200** Medicare Part B patients **-or-** **≥ 200** covered professional services.

Benefits of Opting-In

- Potential for increased return on investment
- Little to no-risk introduction to the program

Example: Maximizing ROI by Opting-In

	Not Opting-In Solo Provider	Opting-In Solo Provider
2019 Medicare Charges	\$80,000	\$80,000
Est. 3.0% Incentive	+\$0	+\$2,400
Vendor Costs	-\$0	-\$314
Total	\$80,000	\$82,086
Estimated Return on Investment	\$0	\$2,086

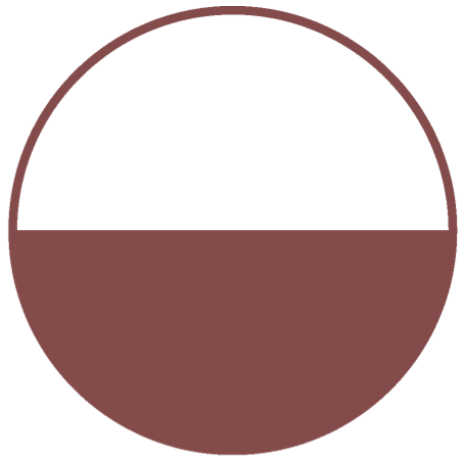
Benefits of Group Reporting

- Potential for increased return on investment
- Measure optimization by avoiding 20 instance minimum
- High performers are not penalized
- Low performers will benefit by the team score

Example: Maximizing ROI by Reporting as a Group

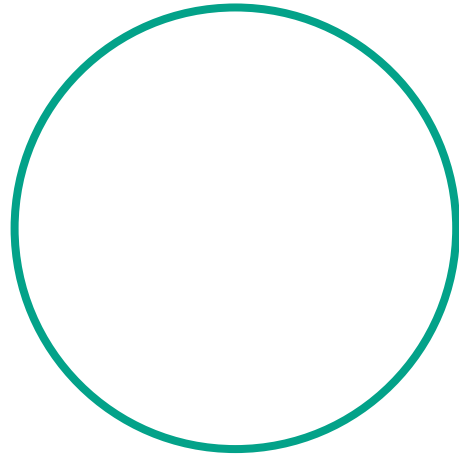
	Individual Reporting (2 Eligible Providers)	Group Reporting (Whole TIN 15 NPIs)
2019 Medicare Charges	\$160,000	\$1,000,000
Est. 3.0% Incentive	+\$4,800	+\$30,000
Vendor Costs	-\$628	-\$4,710
Total	\$164,172	\$1,025,290
Estimated Return on Investment	\$4,172	\$25,290

2019 Transition Year Pacing Options



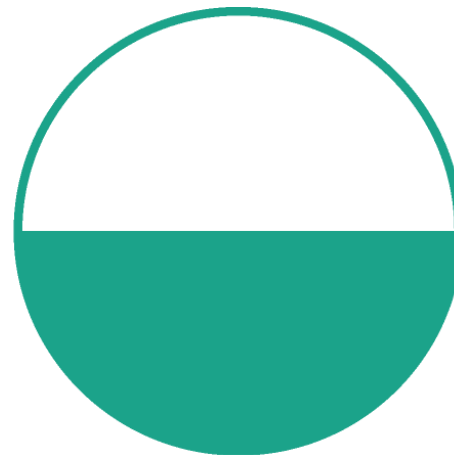
<30 points

Up to -7% Penalty



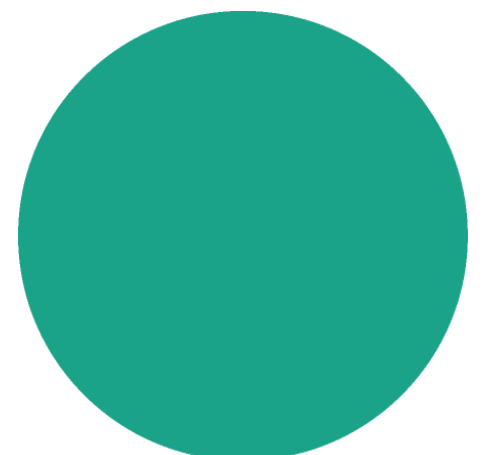
30 points

Penalty Avoidance



31-74 points

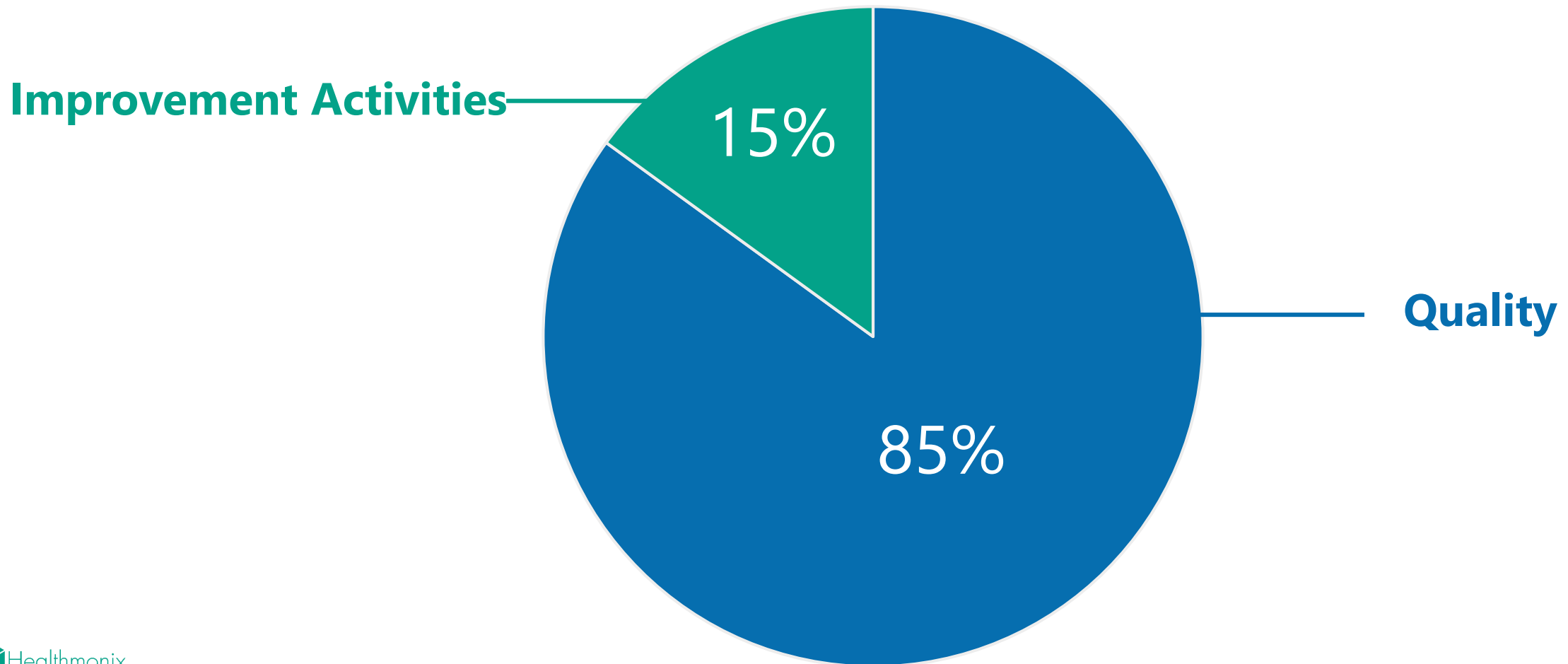
Some Incentive

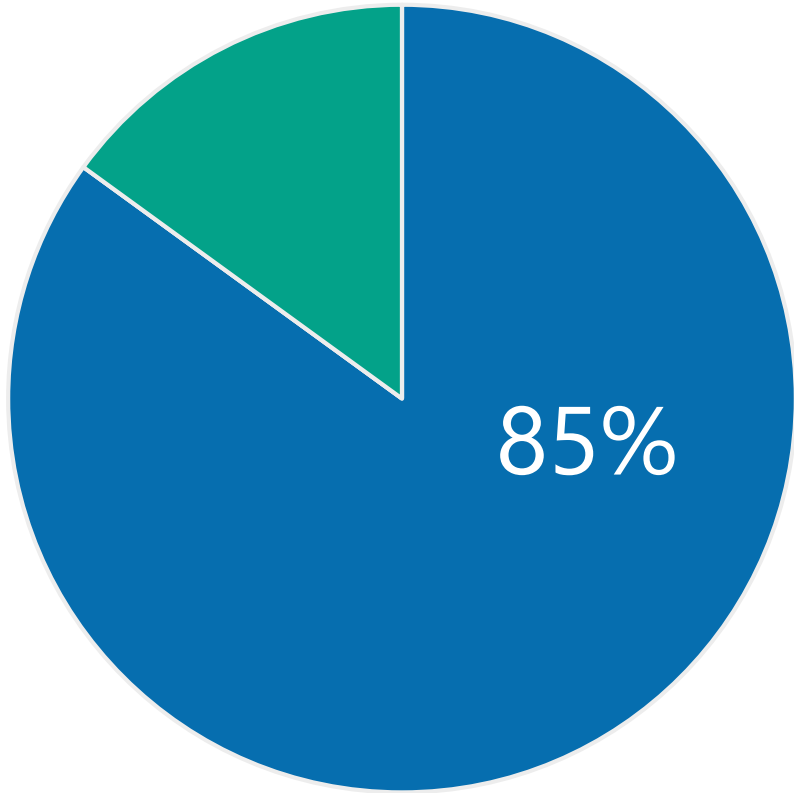


75-100 points

Max Incentive

Performance Category Weights





Quality Reporting Requirement Basics

- 6 measures to be reported
- 1 must be an **outcome measure**
 - **High-priority measure** if outcome is unavailable
- Report data on at least 60% of ALL patients seen in 2019
 - That includes ALL payors, not just Medicare
- Practices larger than 15 providers CANNOT report via claims

Psychology Recommended Quality Measures

Full list of recommendations
available [on our website](#).

- 6 measures to be reported
- 6 MBHR-specific measures developed by the APA for psychology and other mental health providers

ID	Name	
MBHR1	Anxiety Utilization of the GAD-7 Tool	Process
MBHR2	Anxiety Response at 6-months	Outcome
MBHR3	Pain Interference Response utilizing PROMIS	Outcome
MBHR4	Social Role Functioning Outcome utilizing PROMIS	Outcome
MBHR5	Screening and monitoring for psychosocial problems among children and youth	Outcome
MBHR6	Sleep Quality Screening and Sleep Response at 3-months	Outcome
181	Elder Maltreatment Screen and Follow-Up Plan	High-Priority
325	Adult Major Depressive Disorder (MDD): Coordination of Care of Patients with Specific Comorbid Conditions	High-Priority
370	Depression Remission at Twelve Months	Outcome
391	Follow-Up After Hospitalization for Mental Illness (FUH)	High-Priority
411	Depression Remission at Six Months	Outcome

Survey Tools and Outcome Measures



These survey tools and outcome measures are from existing MIPS measures and measures unique to the MBHR. They can be found as PDFs on the Measures page.

Generalized Anxiety Disorder Screener (GAD-7) (PDF, 26KB)

Used with MBHR1 Anxiety Screen – Utilization of GAD-7 tool and MBHR2 Anxiety Response at six months.

Insomnia Severity Index (ISI) (PDF, 31KB)

Used with MBHR6 Sleep Quality Screening and Sleep Response at 3-months.

Patient Health Questionnaire (PHQ-9) (PDF, 40KB)

Used with MIPS measure 370 Depression Remission and Twelve Months and 411 Depression Remission at Six Months.

Pediatric Symptom Checklist (PSC-17) (PDF, 133KB)

Used with MBHR5 Screening and monitoring for psychosocial problems among children and youth.

PROMIS Ability to Participate in Social Roles and Activities Short Form 8a (PDF, 33KB)

Used with MBHR4 Social Role Functioning Outcome utilizing PROMIS.

PROMIS Pain Interference Short Form 8a (PDF, 41KB)

Used with MBHR3 Pain Interference Response utilizing PROMIS.

Market your practice on your website with our badge logos

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I track patient outcomes

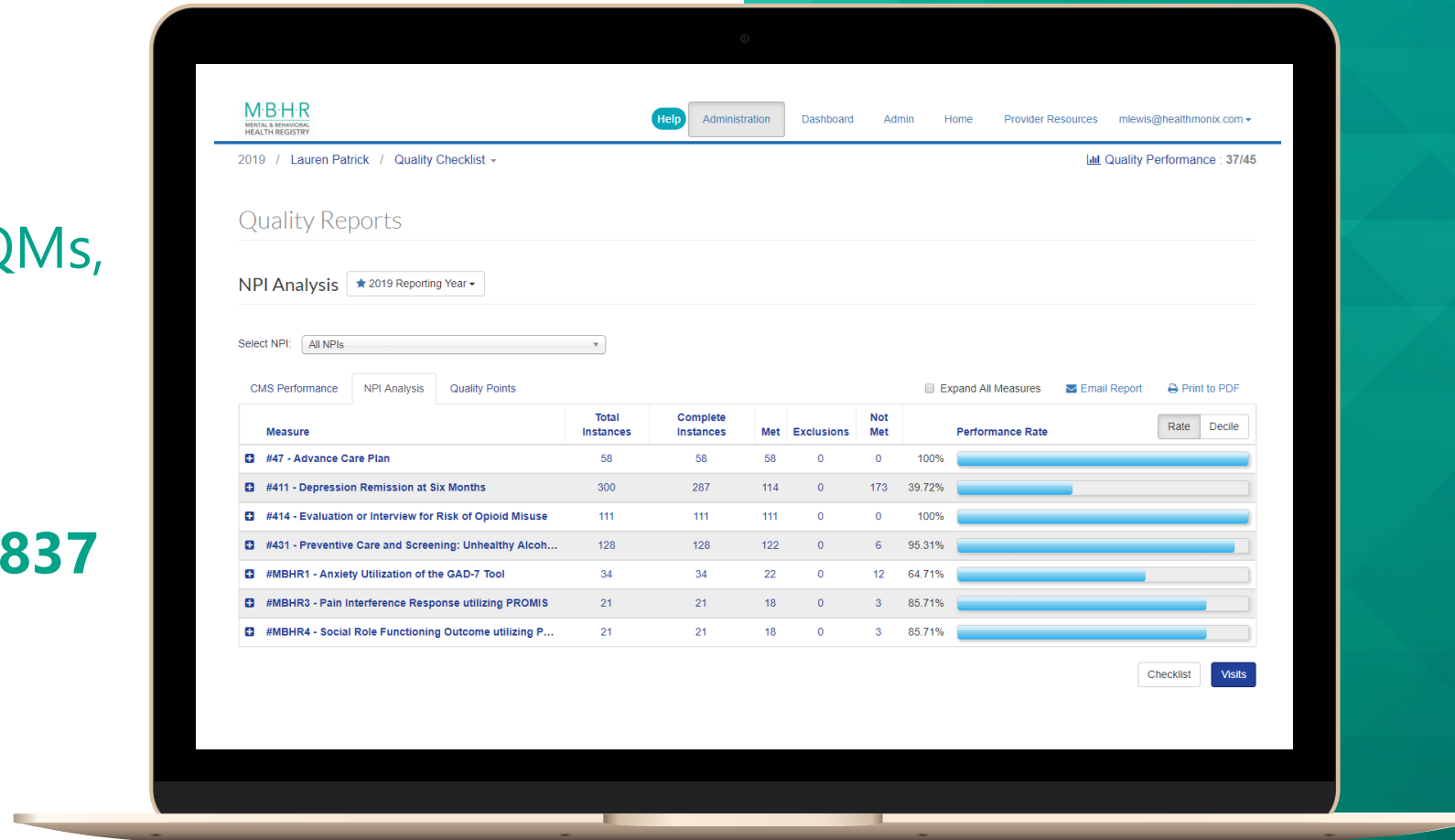
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HEALTH REGISTRY

We track patient outcomes

How The MBHR Helps You Report *Quality*

- Supports all MIPS CQMs, eCQMs, and some QCDR measures
- Ability to upload custom spreadsheets or industry-standard files (**HL7, QRDA I, 837 / 835 billing files, etc.**)
- Direct integrations exist for certain EHRs



Quality Reports

NPI Analysis ★ 2019 Reporting Year ▾

Select NPI: All NPIs ▾

CMS Performance

NPI Analysis

Quality Points

☐ Expand All Measures

 Email Report

 Print to PDF

Measure	Total Instances	Complete Instances	Met	Exclusions	Not Met	Performance Rate	Rate	Decile
 #47 - Advance Care Plan	58	58	58	0	0	100%		
 #411 - Depression Remission at Six Months	300	287	114	0	173	39.72%		
 #414 - Evaluation or Interview for Risk of Opioid Misuse	111	111	111	0	0	100%		
 #431 - Preventive Care and Screening: Unhealthy Alcoh...	128	128	122	0	6	95.31%		
 #MBHR1 - Anxiety Utilization of the GAD-7 Tool	34	34	22	0	12	64.71%		
 #MBHR3 - Pain Interference Response utilizing PROMIS	21	21	18	0	3	85.71%		
 #MBHR4 - Social Role Functioning Outcome utilizing P...	21	21	18	0	3	85.71%		

Checklist

Visits

Actual Predicted

"Actual" Quality Points: 52.74 / 60Top 6 Actual Points: **50.74** ⓘExtra Actual Bonus Points: **2** ⓘImprovement bonus: **Incomplete**

TOP 6 MEASURES BASED ON "ACTUAL" DECILE POINTS

These measures have the highest decile points of your selected measures. Decile points are first determined by benchmarks which are linked to measure performance rate. Reporting requirements for each measure (20 completed instances and 60% completion threshold) are then applied and if not satisfied, will reduce decile score.

#47

Decile: **10.00**

Advance Care Plan

Required measure: No [more...](#)Outcome / HP bonus: 1 [more...](#)CEHRT bonus: 1 [more...](#)Total **Actual** points: 12

#111

Decile: **10.00**

Pneumococcal Vaccination Status for Older Adults

Required measure: No

Outcome / HP bonus: No

CEHRT bonus: 1

Total **Actual** points: 11

#236

Decile: **10.00**

Controlling High Blood Pressure

Required measure: Yes

Outcome / HP bonus: No

CEHRT bonus: 1

Total **Actual** points: 11

#117

Decile: **4.71**

Diabetes: Eye Exam

Required measure: No

Outcome / HP bonus: No

CEHRT bonus: 1

Total **Actual** points: 5.71

#110

Decile: **4.03**

Influenza Immunization

Required measure: No

Outcome / HP bonus: No

CEHRT bonus: 1

Total **Actual** points: 5.03

#1

Decile: **3.00**

A1c Poor Control

Required measure: No

Outcome / HP bonus: 2

CEHRT bonus: 1

Total **Actual** points: 6

Visits

Add, edit, and review visits.

Notifications

- i** This page lists the raw data entered for each measure and organizes that data by visit. Reporting frequency and specific CMS reporting rules for certain measures are not reflected on this page. To see reporting frequency and reporting rules applied to your raw data, see the performance rate report.
- i** You have incomplete measures. This can affect your reporting rate. [CLICK HERE](#) to filter for incomplete measures.

Filters

Showing 21 of 1,851

Visits Per Page

25 ▾

Add Visit

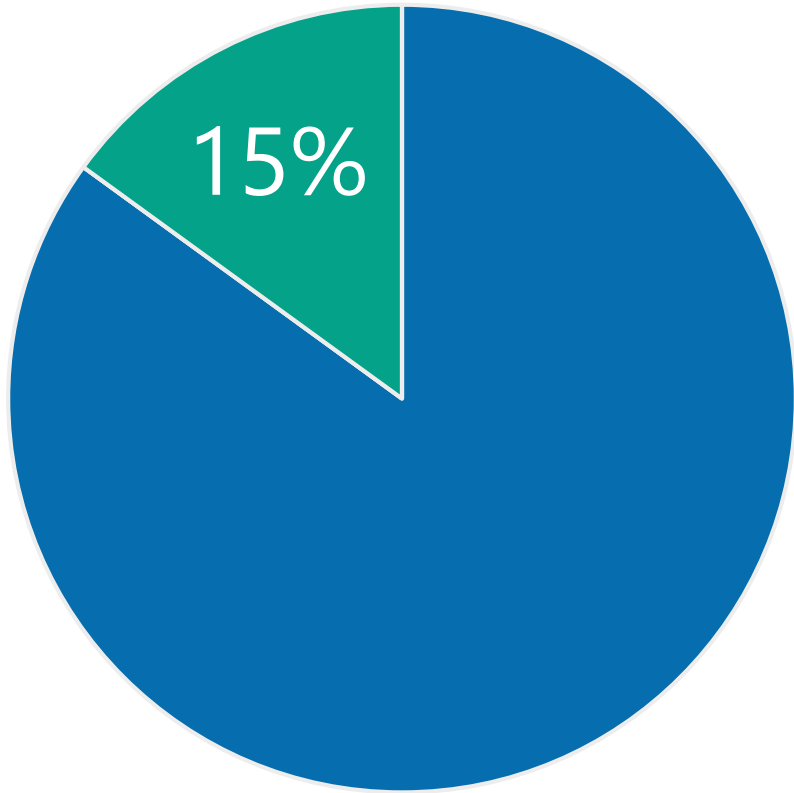
- Patient ID +
- Date of Service +
- Last Updated Date +
- NPI +
- Has NPI +
- Primary Insurer +
- Secondary Insurer +
- Measure Status -

MBHR4 ▾ Met ▾ ✕

Visits In Performance Report ▾

MBHR4 ▾ Not Met ▾ ✕

Patient	DOS	Updated	#47	#411	#414	#431	#MBHR1	#MBHR3	#MBHR4
5454858552	1/15/2019	8/29/2019	⊘			⊘	✓	✓	✓
5454858551	1/15/2019	8/29/2019				⊘	✓	✓	✓
5454858550	1/15/2019	8/29/2019				⊘	✓	✓	✓
5454858549	1/15/2019	8/29/2019				⊘	✓	✓	✓
5454858548	1/15/2019	8/29/2019				⊘	✓	✓	✓
5454858547	1/15/2019	8/29/2019				⊘	✓	✓	✓
5454858546	1/15/2019	8/29/2019				⊘	✓	✓	✓
5454858545	1/15/2019	8/29/2019				⊘	✓	✓	✓



Improvement Activities Reporting Basics

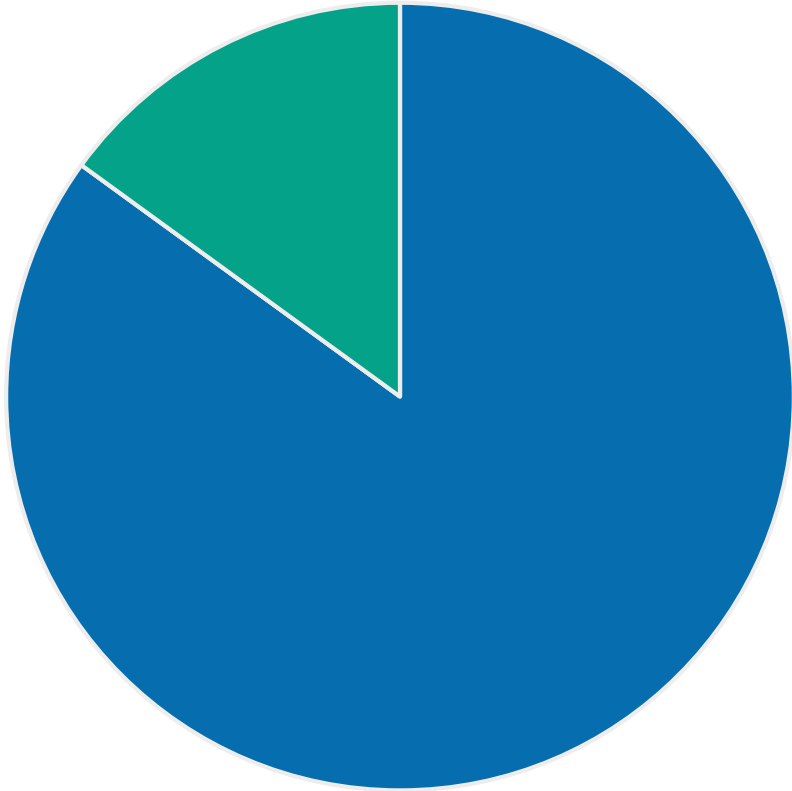
- 90-day minimum reporting period
- More than 100 Improvement Activities available
- Improvement Activities can be tracked and submitted in MBHR
- 40 points total required through selection of high-weighted (20 point) and medium-weighted (10 point) activities
- 20 points required for rural, HPSAs, non-patient facing clinicians, small practices

Psychology Recommended Improvement Activities

- 40 points total required through selection of high-weighted (20 point) and medium-weighted (10 point) activities
- 20 points required for rural, HPSAs, non-patient facing clinicians, small practices

Activity Id	Activity Name	Activity Weighting	Activity Description
IA_EPA_3	Collection and use of patient experience and satisfaction data on access	Medium	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.
IA_CC_2	Implementation of improvements that contribute to more timely communication of test results	Medium	Timely communication of test results defined as timely identification of abnormal test results with timely follow-up.
IA_CC_8	Implementation of documentation improvements for practice/process improvements	Medium	Implementation of practices/processes that document care coordination activities (e.g., a documented care coordination encounter that tracks all clinical staff involved and communications from date patient is scheduled for outpatient procedure through day of procedure).
IA_BE_14	Engage Patients and Families to Guide Improvement in the System of Care	High	Engage patients and families to guide improvement in the system of care by leveraging digital tools for ongoing guidance and assessments outside the encounter, including the collection and use of patient data for return-to-work and patient quality of life improvement. Platforms and devices that collect patient-generated health data (PGHD) must do so with an active feedback loop, either providing PGHD in real or near-real time to the care team, or generating clinically endorsed real or near-real time automated feedback to the patient, including patient reported

If exempt from Cost, Quality will be re-weighted to include the 15%



15% → 0%

Cost Requirement Basics

- Automatically calculated from **administrative claims** data
- Performance period is the **calendar year**
- 2 measures on Medicare spending for Part A and Part B beneficiaries
- 8 episode-based cost measure for those who may qualify

How We Are Going to Help YOU

Real-time Dashboards

Identify and respond to data you capture to maximize your reimbursement



All MIPS Categories

The MBHR can report for MIPS Quality, PI, and IA, as well as track cost performance.



Adapt to your practice

Whether you are a hospital or a small practice, MBHR scales to meet your needs.



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Powered by
MIPS PRO



Data Validation & Support

Our quality experts validate your data before submission to ensure your reporting success.



Choose your pace

Whether you are reporting to achieve maximum incentives or just avoid the penalties, the MBHR scales to your needs.



Integrated data

Sending us your data is easy with our API, data upload, and transmission services

Questions?

For More Information...

- Feel free to ask any questions at the contact information below:
 - contact@healthmonix.com
 - 888-720-4100 x3
- To sign up, visit mbhregistry.com
- Contact APA at: mbhr@apa.org
- <https://www.apaservices.org/practice/reimbursement/health-registry/index>

