Program changes under the Medicare Access and CHIP Reauthorization Act (MACRA) will begin on January 1, 2017, and will transform Medicare reimbursement and care delivery for oncology practices throughout the U.S. ASCO is your partner in preparing for these changes and will be your resource in meeting your quality reporting requirements for the Centers for Medicare & Medicaid Services (CMS).

You Can Use the QOPI® Platform to Transition from PQRS to MIPS in 2017
Under the CMS Quality Payment Program (QPP)—the new reimbursement system that MACRA authorizes—the Physician Quality Reporting System (PQRS) will be replaced with the Merit-Based Incentive Payment System (MIPS), which also replaces the EHR Incentive Program (“Meaningful Use”). Eligible professionals (EPs) will receive a score and payment adjustments based on a Final Score, which factors in performance on (1) quality, (2) cost, (3) improvement activities, and (4) advancing care information (formerly meaningful use of certified electronic health records (EHRs)). Fortunately, CMS has given practices 2017 to prepare for these changes, even dubbing the year as “Pick Your Pace.” To give physicians time to adapt to this new system, in 2017 CMS is requiring practices to report on only ONE measure to avoid a 4% Medicare reimbursement penalty in 2019.

In 2016, physicians were able to meet their PQRS requirements using ASCO’s Quality Oncology Practice Initiative (QOPI®) platform. In 2017, practices will also be able to use the QOPI platform to meet the MIPS reporting requirement of one measure through manual reporting. (While one measure is the minimum requirement to avoid the 2019 penalty, ASCO encourages practices to report on at least four measures to become fully acquainted with the system and ensure that the CMS requirements are met.)

Don’t Stop with One Measure: Get Ready for QCDR in 2018
For reporting in both 2017 and 2018, CMS encourages practices to consider use of the Qualified Clinical Data Registry (QCDR) reporting mechanism that was introduced in 2014. QCDRs can pull quality measures data directly from the electronic health record (EHR) on behalf of the EP. Through some QCDRs, practices will be able to meet the following MIPS requirements:

- Quality measure reporting
- Improvement activities attestation
- Advancing care information reporting

In 2018, practices will be required to report on 60% of their eligible charts for ALL measures to avoid a Medicare reimbursement penalty in 2020. ASCO is using 2017 as a transition year to modify the QOPI QCDR to allow practices to meet this requirement and will provide updates on our progress throughout 2017. In the meantime, ASCO encourages all oncology practices to use 2017 to ensure they are positioned to report at the significantly higher volume requirement in 2018.

Finally, if any practice has the capability to electronically report on 50% of their eligible charts for six measures in 2017, they can report to CMS via alternative mechanisms and try for a positive adjustment for 2019. To learn more about this opportunity, please go to: www.qpp.cms.gov.

ASCO will continue to provide a wide range of updated resources and tools designed to help you meet your QPP requirements and move toward a value-based practice environment. If you have any questions or comments about MACRA implementation, go to www.asco.org/MACRA or contact macra@asco.org.