

# Summary of the MIPS Dashboard

The Rheumatology MIPS Dashboard is a one-stop shop for documenting required data elements for Rheumatology MIPS Measures that were previously difficult to document/track. This is dashboard is simply a GUIDE to make the workflows on these measures easier (FEWER CLICKS). This template is launched from the blue quick links on the Intake template, blue quick links on the SOAP/Dictation template, the Assessment/Plan panel of the SOAP/Dictation template, and the Navigation Panel.

**DISCLAIMER:** To track ALL Quality and Promoting Interoperability measure performance please use NextGen's HQM module for further analysis.

## Intake template:

4	07/18/2018 01:35 PM : "*Intak	e-RHE" X						
»			Care Team	Contagion Risk		? TOB ? HTN ?	DM ? CAD	٠ 🖬
Na	Specialty  Rheumatolo	ogy Visit Type	<ul> <li>Office Visit</li> </ul>			Default Provider: Una:	ssigned	
/igation	fi Intake	Histories	SOAP/Dictation	Finalize	Checkout			
_	RHE MIPS Dashboard	dult Immunizations   Pe	ds Immunizations	My Plan   I	Procedures   Order	Management   RHE Sco	reCard ]	
	Care Guidelines Glo	obal Days 📔 💷 Clini	cal Trial		View Appointment	Panel Control: 🕤 Toggle	🔿 🌮 Cycle 🥩	
	General						۲	)

## SOAP/Dictation template (two places):

٩ /	07/18/2018 01:35 PM : "*SOAF	P-TSI" ×					
>>			Care Team	Contagion Risk		? TOB ? HTN ? DM	? CAD
Nav	Specialty V Rheumatolo	gy Visit Type v	Office Visit	🗌 Snowbird patient 🖓	Sar ?PH ?IPF	(?) ILD (?) Can (?) Mas (?)	Nod ? Ast
rigation	fi Intake	Histories	SOAP/Dictation	Finalize	Checkout		
_	RHE MIPS Dashboard	Immunizations	Radiology	Labs Joi	nt Injection   Order M	Aanagement   RHE ScoreCard	Outcomes
	🕞 Care Guidelines 🛛 😲 Glo	obal Days 🛛 💿 Clinica	I Trial Quick No	ote: Apply Save (	View Appointment	Panel Control: 🕤 Toggle 🍙 🦸	Cycle 🕩
	General				Default Pro	vider: Unassigned	۲

Assessment/Plan		
Assessments		
My Plan		
A/P Details		
Labs		
Diagnostics		
Referrals		
Office Procedures		
Injections: SubQ/IM		
Joint Injection		
Facet	Assessment Details:	COPY FORWARD >>
Nerve Block		
Epidural		
View Immunizations		
Office Diagnostics		
Physical Therapy Orders		
Infusion Orders   Med Orders		
Instructions		
Patient Education		
Health Promotion Plan		
MIPS Dashboard		
Treatment Flowsheet		



## Navigation Panel:



## Visual indicators to notify the user of:

- Measure Met 🥯
- Treatment Opportunity <sup>1</sup>
- Does Not Meet Denominator
  - IMPORTANT NOTE: If a measure has N/A "Does not meet denominator," it does not necessarily mean you don't need to document for it. It simply means that the patient at this time during this encounter does not meet all of the measure denominator criteria. Please make sure to revisit these measures after the patient has been seen by the provider.
- Measure Information Button

## Two panels:

- Per Encounter Measures
  - The measures listed under this panel are to be reported at each eligible visit during the performance period.
- Per Performance Period Measures
  - The measures listed under this panel are to be reported a minimum of once per performance period.

😈 TSI for Rheumatology - MIPS Dashboard	***DISCLAIMER: This dashboard is simply a guide. To track all Quality and F measure performance please check NextGen's HQM module for further and	Y Age: 68 Years
Measure Met = 🥝 Treatment Opportunity = 🦺 Does Not Meet	t Denominator = 🛤 Measure Information Button = 🕕	
IMPORTANT NOTE: If a measure has N/A "Does not meet denominat It simply means that the patient at this time duriu Please make sure to revisit these measures after t	or," it does not necessarily mean you don't need to document for it. ng this encounter does not meet all of the measure denominator criteria. the patient has been seen by the provider.	✓ Toggle
Per Encounter Measures		$\odot$
Per Performance Period Measures		$\odot$
		Save & Close



## **Per Encounter Measures**

# Quality Measure 46: Medication Reconciliation Post Discharge

**Measure Description:** The percentage of patients aged 18 and older discharged from an inpatient facility and seen within 30 days following discharge in the office by the physician, prescribing practitioner, registered nurse, or clinical pharmacist providing on-going care who had a reconciliation of the discharge medications with the current medication list in the outpatient medical record documented.

Per	Encounter Mea	sures					۲
NA	Measure 46: Medic	ation Reconciliation Po	st Discharge 🕕				
	Document Discha	arge					
	Submit Code to In Discharge Medica	ndicate ations Reconciled	ubmit Code				
	Discharge Date	EncounterType	Problem	Management	Outcome	Comments	
	•						F
_							

- 1. Document a facility discharge within 30 days by selecting the *Document Discharge* hyperlink. The *Interim History* pop-up will come up and you will need to enter the **Encounter type** and **D/C date**.
  - a. **Please note:** Hospitalization and Hospital are the only two options that will pull the patient into the measure denominator.
- 2. Then click **Save** and **Close**.

Measure Met = 💟 Treatment Opportunity = 🚺 N				
er Encounter Measures	Encounter type:	Problem:	Management:	Date:
Measure 46: Medication Recognitiation Post Discharge 🕕				11
Document Discharge	Provider:	Hospital:	Admit date: D/C date:	
Submit Code to Indicate Submit Code			11 11	
Discharge Medications Reconciled	Outcome/detail:			
Discharge Date EncounterType Problem				
05/03/2018 hospitalization	Comments:			
	N			
Measure 109: OA Function & Pain Assessment 🛞	r.a			
Opt 1: MDHAQ Detailed Opt 2: MDHAQ Brief				
Measure 131: Pain Assessment and Follow Up 🔞				
Date Assessment/Disc of Course Datestant	( 44	Clear For Add Delete	Save Close >	>>> )

- 3. Document a medication reconciliation completed by submitting the qualifying CPT Code (1111F) by using the Submit Code button or via the Procedures Module.
  - a. Important Note: This must be by an MD/DO, midlevel provider or RN.
  - b. Once you complete this step, it will populate in the grid below and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon.

NA	Measure 46: Medication Reconciliation Post Discharge 🕦 -
	Document Discharge
	Submit Code to Indicate Discharge Medications Reconciled Submit Code



# Quality Measure 131: Pain Assessment & Follow Up

**Measure Description:** Percentage of visits of patients aged 18 and older with documentation of a pain assessment using a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present.

Pain Assessment/Plan of Care: Exclusions			
Pain scale:		Follow-up plan of care:	Sort By: • Summary · O Phrase My Phrases   Manage My Phrase
Method:	🗌 See HPI		
Location:			
Onset: / /			
Duration:			
Quality:		Characters left: 300	

- 1. For patients with a documented pain score greater than zero, complete all fields in the pain management section in the fields below:
  - a. Pain scale
  - b. Method
  - c. Location
  - d. Onset
  - e. Duration
  - f. Quality
  - g. Follow-up plan of care

Pain Assessm	ent/Plan of Care: Exclusions	]		
Pain scale:	2/10		Follow-up plan of care:	Sort By:  Summary  Phrase My Phrases   Manage My Phrases
Method:	Numeric Pain Intensity Scale	🗌 See HPI	please see note for more details.	
Location:	in the knee			
Onset:	07/01/2018			
Duration:	5 Days			
Quality:	throbbing, discomforting		Characters left: 267	



## Quality Measure 418: Osteoporosis Management in Women Who Had a Fracture

**Measure Description:** Percentage of women aged 50-85 who suffered a fracture and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis in the six months after the fracture.

NA	Measure 418 DXA Quick E Order: Test: Result:	B: Osteoporos intry : O DXA, As	sis Manageme xial O DXA	ent in Women Who Had a	a Fracture 🕕				
	Perform	ed today Pe	erformed: /	/ Result:			Detail Ir	nterpretation:	Add
		cutoday re		7					Add
	Status	Ordered	Completed	Order	Interpretation	Result/Report		Comments	
	•								Þ

#### Measure Workflow:

- 1. For female patients 50-85 years old with osteoporosis, for each active fracture document the DXA scan results using the DXA Quick Entry section within 6 months of the fracture occurrence. Document in all the following fields:
  - a. Study type (axial/peripheral)
  - b. Diagnosis
  - c. Interpretation or Result field
  - d. Date performed (DXA ever performed)
  - 2. Select the Add button.
    - a. Once you complete this step, it will populate in the grid below and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon.

Measure 418	Aleasure 418: Osteoporosis Management in Women Who Had a Fracture 🛞										
DXA Quick E	XXA Quick Entry										
Order: Test:	Irder: Test: 💿 DXA, Axial 🔿 DXA, Peripheral site CPT: 🛛 77080										
Result:											
Perform	ed today P	erformed: 07	/11/2018 Resu	ult:		Detail Int	terpretation: abnormal	Add			
	1	1	1		1			4			
Status	Ordered	Completed	Order	Interpretation	Result/Report	(	Comments				
Status	Ordered	Completed	Order	Interpretation	Result/Report		Comments				
Status	Ordered	Completed	Order	Interpretation	Result/Report	(	Comments				
Status	Ordered	Completed	Order	Interpretation	Result/Report		Comments				

## OR

3. Document a qualifying osteoporosis medication in the Medications Module within 6 months of the fracture occurrence



## **Per Performance Period Measures**

## Quality Measure 39: Screening for Osteoporosis for Women Age 65-85

**Measure Description:** Female patients aged 65-85 years of age who ever had a central dual-energy x-ray absorptiometry (DXA) to check for osteoporosis.

NA	Measure 39:	Screening fo	or Osteoporos	is for Women Age 65-85	<b>()</b>				
	DXA Quick E	intry							
	Order: Test:	C DXA, A	xial C DXA	, Peripheral site CPT:					
	Result:								
	Perform	ned Today P	erformed: 📝	/ Result:			Detail I	Add	
	Status	Ordered	Completed	Order	Interpretation	Result/Report		Comments	1
			J			- <u>-</u>			

#### Measure Workflow:

- 1. Document the DXA scan results using the DXA Quick Entry section. Document in all the following fields:
  - a. Study type (axial/peripheral)
  - b. Date performed (DXA ever performed)
  - c. Interpretation *or* Result field
- 2. Select the **Add** button.
  - a. Once you complete this step, it will populate in the grid below and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon.

Measure 3	9: Screening fo	or Osteoporos	is for Women Age 65-85				
DXA Quick	Entry						
Order: Tes	st: O DXA, A	xial C DXA	, Peripheral site CPT:				
Result: Perfo	rmed Today Pe	erformed: 📝	/ Result:			Detail Interpretation:	Add
Status	Ordered	Completed	Order	Interpretation	Result/Report	Comments	
completed	1 //	06/29/2018	DXA Bone Density, Axial	negative			

## Quality Measure 109: Osteoarthritis (OA) Function & Pain Assessment

**Measure Description:** Percentage of patient visits for patients aged 21 years and older with a diagnosis of osteoarthritis (OA) with assessment for function and pain.

NA Measure 109: OA Function	& Pain Assessment 🕡	l
Opt 1: MDHAQ Detailed	Opt 2: MDHAQ Brief	



### Measure Workflow:

- For patients with osteoarthritis, document a functional status assessment by selecting Option 1: MDHAQ Detailed hyperlink. Answer questions A-J <u>and</u> the pain score in the *MD-HAQ* pop-up which will auto-populate the FN score <u>and</u> PN Score.
- 2. Then click Save & Close.

TSI for Rheumato	ology - MDH	IAQ©								
Multi-Dim	ensional I	Health As	ssessment C	Questionn	aire (MDH	HAQ)© 🕕		Page	1	Page 2
Please select the Ol	NE best ans	wer for you	ur abilities at t	this time:	All Zer	,				
OVER THE LAST WE	EK. were vo	u able to:				WITHOUT ANY	WITH SOME	WITH MUCH	UNABLE TO DO	EN (0.10) 3.3
A Dress yourself i	including tri	ing choelar	rer and doing	huttons?		( a	C 1	C 2	0.0	71 (0-10) 0.0
B. Get in and out	of hed?	ing motio	cer and doing	buttons.		C	C 1	0.2	0.3	PN (0-10) 4.0
C lift a full cup o	r alacs to vo	ur mouth?				C	© 1	C 2	0.3	PTGL (0-10)
D. Walk outdoors	on flat grou	und?				Co	C 1	· 2	C 3	RAPID 3 (0-30)
E Wash and dry y	our entire b	odv?				•	C 1	C 2	0.3	PTJT (0-10)
E. Bend down to p	nick up cloti	hing from t	the floor?			Co	· 1	C 2	C 3	RAPID 4 (0-40)
G Turn faucets or	and off?					C	C 1	0.2	· 3	MDGLOBAL (0-10)
H. Get in and out	of a car bu	s or airplar	ne?			C 0	· 1	C 2	C 3	BAPD 5 (0-50)
I. Walk two miles	if you wish?	, et anpiai				· •	C 1	C 2	C 3	
I. Participate in re	creational a	ctivites and	i sports as voi	u would like	if you wis	h7 C 0	· 1	C 2	C 3	
K. Get a good nig	ht's sleep?					Co	C 1	C 2	C 3	KAPID 3 (0-10)
L. Deal with feelin	os of anxiet	ty or being	nervous?			C 0	C 1	C 2	C 3	RAPID 4 (0-10)
M. Deal with feeli	ngs of depr	ession or fe	eeling blue?			C 0	C 1	C 2	0.3	RAPID 5 (0-10)
How much pain ha	ve vou had	because of	f vour conditi	on OVER TH	E PAST WE	EK? Please indicate	how severe ve	our pain has be	en:	
NOCC	0 0	C C	C C	· · ·	0.0	000	0.0	0 0	C C PAL	N AS BAD AS
PAIN 0 0.5	1 1.5	2 2.5	3 3.5	4 4.5	5 5.	5 6 6.5 7	7.5 8	8.5 9	9.5 10 TC	OULD BE
Please check in the	appropriate	spot to in	dicate the am	ount of pai	n you are h	aving TODAY in ea	ch of the joint	areas listed be	low:	
	NONE	MILD	MODERATE	SEVERE			NONE	MILD MODI	ERATE SEVER	E
LEFT FINGERS	CO	C 1	C 2	03		RIGHT FINGERS	Co	01 0	2 03	
LEFT WRIST	Co	C 1	C 2	03		RIGHT WRIST	Co	01 0	2 03	
LEFT FLBOW	Co	C 1	0.2	0.3		RIGHT FLBOW	C	C1 0		
LEFT SHOULDER	Co	C 1	0.2	0.3		RIGHT SHOULDE	0	C1 C	2 02	
LEFT HID	C n	C 1	C 2	0.3		PICHT HIP	C	C1 0		
LEET VMEE	0.0	0.1	0.2	0.2		DICHTYNEE	0.0	C		
LEFT ANVIE		C 1	C 2			DICHT ANKLE	0	C1 (	2 03	
LEFT ANKLE				~		RIGHT ANKLE		C 1 (	2 03	
LEFTICES				~		RIGHT TOES			2 03	
NECK	0 0	0.1	0 2	0.3		BACK	0	01 0	2 (3	
Considering all the	ways in wh	ich illness a	and health co	nditions m	ay affect yo	u at this time, pleas	e indicate how	w you are doing	<b>j</b> :	
VERY C C	0.0	0 0	0.0	2.0	0.0		0.0	0 0	C C VE	RY Save & Close Can
0.5	1 1.5	2 2.5	5 5.5	4 4.5		, , , , , ,	1.5 0	0.5 9	5.5 10 10	

## OR

- 3. Select Option 2: MDHAQ Brief hyperlink and the brief *MD-HAQ Brief* pop-up will show. Manually enter the **FN score** and **PN score**.
  - a. Please note: The PN score can also be documented on the Vital Sign pop-up
- 4. Then click **Save & Close**.

🔚 TSI for Rheu	umatology - MDHAQ© Brief	×
tri		
Multi-Dimen	nsional Health Assessment Questionnaire (MDHAQ	)© ()
l r	FN (0-10)	
	PN (0-10)	l
PT	FGL (0-10)	
RAPI	D 3 (0-30)	
PT	TJT (0-10)	
RAPI	D 4 (0-40)	
MDGLOB	3AL (0-10)	
RAPIC	D 5 (0-50)	
PAP	1D 3 (0.10)	
PAPE	ID 4 (0-10)	
RAPI	TD 5 (0-10)	ŀ
	Save & Close	ncel
	(Landblattic heldblattic and be	
1		

2019 RHE Content Update



# Quality Measure 110: Influenza Immunization

**Measure Description:** For patients 6 months and older seen for at least ONE visit during January-March and/or October-December: Order an influenza vaccine OR if the patient has already received a qualifying immunization, document the historical vaccine. If the patient does not receive the vaccine for a patient, system, or medical reason, document an exclusion in the Immunizations module.

🔥 Measure 110: Influenza Immunization 🔞
Last Flu Vaccination: / /
Administer or document history Influenza Vaccine

- 1. Document the administered Influenza vaccine or historically received the vaccine by selecting the "administer or document history Influenza vaccine" blue hyperlink. The *Immunizations* pop-up with come up.
  - a. Where to document historical influenza vaccine

🔡 Immunizations				
🗅 New Order 🝷 🔯 Re	efresh  😚 Sign-off	🞒 Print 🔹 🏟 Fa	x	🝷 🆧 Reconcile 🖗 Historical 🥕 Exclusions 🌾 Web Links 📼
Show Ages Given	now Chronological			Administered Only(5) Pending Only(0) 🍸 Filters
Immunization	Status	Dose 1	Dose 2	Dose 3
Influenza		04/04/2018	04/06/2018	04/10/2018
Meningococcal B	Not Applicable			
PNEUMOCOCCAL	Current	05/27/2018	06/19/2018 Exception (Rules)	
Td	PastDue			
Tdap	PastDue			
Zoster	Due Now			
Chart Recommendation	Registry			



Past Vaccines Entry Form								- 🗆 ×
Past Entry Vaccine Edit								
Select Past Vaccines to Add to P	atient's Re	cord						
Pediatrics Adult B	y Category	Quick Ent	y					Search
G (90281)	<u>г</u>	Influenza, injec	table, split virus, pr.	Meningococcal MPSV4 (	90733) Pneumococcal (Current)	Rabie	- S	
☐ IG (GamaSTAN S/D) (90281)		Influenza, live,	intranasal, quadriv	Meningococcal B	Pneumococcal polysa	accharide PP 🔲 Ra	bies, intramuscular i	injection (9
Influenza	Г	Influenza, reco	mbinant, injectable,	. meningococcal B, recom	binant, 3 Pneumococcal, PCV-	13 (90670) RIG		
Influenza virus vaccine, split	virus, 🔽	Influenza, seas	onal, injectable (90.	MMR	Polio		G (90375)	
Influenza, injectable, MDCK,	pres	Influenza, seas	onal, injectable, pr	MMR (90707)	🔲 DTaP-hepatitis B and	poliovirus ( 🔲 RI	G heat treated (9037	6)
Influenza, injectable, quadriv	alent,	Influenza, seas	onal, intradermal, p.	MMRV (90710)	DTaP-Hib-IPV (90698)	) Rotav	irus	
🔲 Influenza, injectable, quadriv	alent, M	leningococcal		Palivizumab	DTaP-IPV (90696)	E Ro	otavirus (3 dose) (906	580)
🔲 Influenza, injectable, quadriv	alent, 🗖	Meningococcal	MCV4O (90734)	RSV-Mab (90378)	polio, inactive (90713)	) 🗌 rot	avirus, monovalent (	90681)
•								Þ
Selected Vaccines Details								
Delete Vaccine						Sa		
Delete vaccine						50		
Vaccine	CVX	CPT	Date	Source	Comments		Brand	
Influenza virus vaccine, spli	135	90662	04/06/2018	Parents Recall				
Influenza virus vaccine, spli.	135	90662	04/10/2018	Other Provider				
Influenza virus vaccine, spil.	144	90654	04/04/2010	School Recolu				
* midenza, seasonal, indadet.	144	30034						
•								E
Registry: Alls						Save & New	Save & Close	Cancel

2. Once you have completed documenting these, the date when administered/historically received will populate in the Last Flu Vaccination field.



# Quality Measure 111: Pneumonia Immunization

**Measure Description:** For patient's 65 and older, document the administered pneumococcal vaccine and historically received the vaccination.

NA	Measure 111: Pneumonia Vaccination for C	lder Adults	)
	Last Pneumococcal Vaccination: //		
	Administer or document history Pneumon	iia Vaccine	



- 1. Document the administered pneumococcal vaccine or historically received the vaccine by selecting the "administer or document history pneumonia vaccine" blue hyperlink. The *Immunizations* pop-up with come up.
  - a. Where to document historical pneumococcal vaccine

🔡 Immunizations									<u>- 🗆 ×</u>
🗅 New Order 👻 🛱 Re	fresh   🈚 Sign-off	🚑 Print 🔹 🖗 Fa	ax		🍂 Reconcile	🀝 Historical	A Exclusions	🍓 Web Links	s •
Show Ages Given Sh	ow Chronological					Administered C	Only(5) Pendir	ng Only(0) 🍸	Filters -
Immunization	Status	Dose 1	Dose 2			Dose 3			
Influenza		04/04/2018	04/06/2018	04/10/2018					
Meningococcal B	Not Applicable								
PNEUMOCOCCAL	Current	05/27/2018	06/19/2018 Exception (Rules)						
Td	PastDue								
Tdap	PastDue								
Zoster	Due Now								
	Desister								
	Registry								

Past Vaccines Entry Form										_ 🗆 🗙
Past Entry Vaccine Edit										
Select Past Vaccines to Add to P	atient's Re	cord								
Pediatrics Adult B	ly Category	▼ Quick Ent	ry 🛛							Search
G (90281)	Г	Influenza, injec	table, split virus, pr 🔽	Meningococcal MPSV4 (90733	3)	Pneumococcal (Curren	nt)	Rabies		
G (GamaSTAN S/D) (90281)		Influenza, live,	intranasal, quadriv M	eningococcal B		Pneumococcal poly	saccharide PP	🔲 Rabies, i	ntramuscular i	njection (9
Influenza		Influenza, reco	mbinant, injectable, 🗖	meningococcal B, recombinar	nt, 3	Pneumococcal, PC	V-13 (90670)	RIG		
Influenza virus vaccine, split	virus,	Influenza, seas	onal, injectable (90 M	MR		Polio		RIG (903	75)	
Influenza, injectable, MDCK,	pres	Influenza, seas	onal, injectable, pr	MMR (90707)		DTaP-hepatitis Ba	nd poliovirus (	RIG heat	treated (90376	i)
Influenza, injectable, quadriv	/alent,	Influenza, seas	onal, intradermal, p	MMRV (90710)		DTaP-Hib-IPV (906	98)	Rotavirus		
Influenza, injectable, quadriv	valent, M	eningococcal	P	alivizumab		DTaP-IPV (90696)		Rotavirus	s (3 dose) (906	(08
Influenza, injectable, quadriv	/alent,	Meningococcal	MCV4O (90734)	RSV-Mab (90378)		polio, inactive (907)	13)	rotavirus	monovalent (	90681)
1		· · · ·					-			E.
Selected Vaccines Datails										
Jelected vaccines Details								-		
Delete Vaccine								Source		•
Vaccine	CVX	CPT	Date	Source	Com	nents			Brand	
Influenza virus vaccine, spli	. 135	90662	04/06/2018	Parents Recal						
Influenza virus vaccine, spli_	. 135	90662	04/10/2018	Other Provider						
Influenza virus vaccine, spli_	. 135	90662	04/04/2018	SchoolRecord						
Pneumo co ccal polysacchar.	33	90732	05/27/2018	Other Provider						
Pneumococcal, PCV-13	133	90670	06/19/2018	Other Provider						
Pneumococcal, PCV-13	133	90670								
Pneumo (2 yrs or older) (PP	33	90732			<b>—</b>					
Pneumo (2 yrs or older) (PP	33	90732								
** Pneumo (2 yrs or older) (PP	33	90732								
•										•
Registry: <all></all>		•					Save & Ne	w Sa	ve & Close	Cancel



2. Once you have completed documenting these, the date when administered/historically received will populate in the Last Pneumococcal Vaccination field.

Measure 111: Pneumonia Vaccination for Older Adults	0 -
Last Pneumococcal Vaccination: //	
Administer or document history Pneumonia Vaccine	

## Quality Measure 154: Falls: Risk Assessment

**Measure Description:** Patients aged 65 and older with a history of falls that had a risk assessment for falls completed within 12 months.

Measure	154: Falls: R	isk Assessn	nent 🕕												
Fall Risk	r														
Fall Ris	k/Plan of Ca	are: 💠 Exc	lusions												
Falls in	the last yea	ar? C No	C Yes		Follow-up plan of care: Assistive devices:					Sort By: <sup>©</sup> Summary <sup>©</sup> Phrase My Phrases   Manage My Phrases					
Numbe Did the	er of falls:	O Yes													
					Characters Balance, strer	Characters left: 300 Iance, strength, and gait training: Sort By: Summary C Phrase My Phrase   N					hrases   Mar	age My Phrases			
Postural E	BP within Vi	tals			Character	s left: 30	0								
Time	Ht (in)	Wt (lb)	BMI	BP	Position	Side	Site	Cuff Size	Pulse	Respiration	Temp (F)	Pulse Ox Rest	Pain Level	Comment	

### **Measure Workflow:**

2019 RHE Content Update

- 1. For patients 65 and older with a history of 2+ falls in the last year or a single fall with an injury, document the patient's fall history by answering the questions if they have fallen in the last year, etc.
- 2. Document balance, strength, and gait training under the follow-up plan of care section.

Measure	154: Falls: R	isk Assessr	ment 🕕											
Fall Ris	ik .													
Fall R	isk/Plan of Ca	are: 🔹 Exc	lusions											
Falls i	Falls in the last year? O No ③ Yes				Follow-up plan of care: Assistive devices: Sort By: O St					Summary O Phrase My Phrases   Manage My Phrases				
Numb Did th	Number of falls: 2 Did the fall(s) result in injury? O No O Yes													
Postural	BP within Vi	tals			Characters Balance, stren	: <i>left:</i> 30 ngth, ar s left: 30	o nd gait tr 0	raining:		Sort By:  ⓒ	Summary	O Phrase My P	hrases   Man	age My Phrases
Time	Ht (in)	Wt (lb)	BMI	BP	Position	Side	Site	Cuff Size	Pulse	Respiration	Temp (F)	Pulse Ox Rest	Pain Level	Comment
•														Þ
												Add	Edit	Remove

- 3. Selecting the **Add** button which will then bring up the *Vital Signs* pop-up.
- 4. Document the diastolic and systolic blood pressure for Standing, click Save and select Clear for Add.



- 5. Document the diastolic and systolic blood pressure for Lying, click **Save**, and **Close**.
  - a. Once you complete this step, it will populate in the grid below and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon.

06/26/2018 04:27 PM : "*MIPS Dashboard-RHE" ×		"Adult Vital Signs" - [New Record]	
Order: Test: C DXA, Axial C DXA, Peripheral Result: Performed Today Performed: 7/7 R Status Ordered Completed Order	site C71. Detail Interpretation Result/Report Comm	HeighVlength messurements:     m     total in     m     Position:       Int     in     total in     m     Position:       Last Messured     ////     Messured today     Carried form       Weight messurement:	Standing C tying     Sta
Measure 110: Influenza Immunization     J     Last Flu Vaccination: //		Temperature:         F         C         Site           Blood Pressure and pulse:         Systolic         Distolic         FITN Plan         Position:         5           Systolic         Distolic         C         String C         Standing C         Standing C	Kide:     Side:     Side:     Side:     Original C Let     Original C Let
Administer of addiment history immerita vacun Measure 111: Pneumonia Vaccination for Older Ac Last Pneumococcal Vaccination: // Administer or document history Pneumonia Vacci	e futts @	Pulse: Pulse pattern: Method: /min C Regular C Irregular C Manual C Automatic C Respiration and Pulse Ox: Respiration: //min Pulse	Cult size: Home monitor Pediatric Adurt Elsarge El Thigh Ox Rest: 59 Pulse Ox Ambi 55
Measure 154: Falls: Risk Assessment 🔞	Follow-up plan of care: Assistive device: Sort By: © Sumr	Method: Room air FIO2. % Umin M Fingu Peak flow: Umin C Pre-treatment C Post-treatmen Ste	Source C Room air C Orgene, U/min source C Pre-treatment C Post-treatment r Probe
Number of falls: 2 No @ Yes	set note for details Characters left: 280 Balance, strength, and gait training: Sort By:  Sumr see note for details	Pain score:   Comments:	
Postural BP within Vitals           Time         Ht (in)         Wt (ib)         BMI         BP           Image: the state of	Cherotters Httl: 300 Position Side Site Cuff Size Pulse Respiration  Terr	e Q (m) K Clear For Add	Delete Save Clove

# Quality Measure 155: Falls: Plan of Care

**IMPORTANT NOTE:** Measure 154 must be completed before documenting for Measure 155.

**Measure Description:** Patients aged 65 and older with a history of falls that had a plan of care for falls documented within 12 months.



## Measure Workflow:

 For patients 65 and older with a history of 2+ falls in the last year or a single fall with an injury, document the patient's fall history and strength, balance, and gait training <u>or</u> a fall plan of care in the section **above** for Quality Measure 154.



## Quality Measure 178: Rheumatoid Arthritis: Functional Status Assessment

**Measure Description:** Patients aged 18 and older with a diagnosis of rheumatoid arthritis (RA) for whom a functional status assessment was performed at least once within 12 months.

Measure 178: Rheumatoid Ar	thritis: Functional Status Assessment 🕕	
Opt 1: MDHAQ Detailed	Opt 2: MDHAQ Brief	

#### Measure Workflow:

- For patients with Rheumatoid Arthritis, document a functional status assessment by selecting Option
   1: MDHAQ Detailed hyperlink. Answer questions A-J in the *MD-HAQ* pop-up which will auto-populate the FN score.
- 2. Then click Save & Close.

Multi-Dim	ensional I	lealth As	sessment (	uestion	naire (l	MDH	AQ)© 🕕		-	Page 1		Page 2	
lease select the ON	NE best ans	wer for you	ur abilities at t	this time:		I Zero	_						
VER THE LAST WE	EK, were yo	u able to:					DIFFICULTY		DIFFIC			EN O	0-10)
A. Dress vourself i	- ncludina tvi	ng shoela	ces and doing	buttons?			C o	C 1	0	2	0 3	DN (	0.10)
B. Get in and out	of bed?						0	0.1	0	2	03	Pin (	
C. Lift a full cup or	glass to yo	ur mouth?					C 0	C 1	0	2	O 3	PIGL (	0-10)
D. Walk outdoors	on flat grou	und?					C 0	O 1	0	2	O 3	RAPID 3 (	0-30)
E. Wash and dry y	our entire b	ody?					C 0	C 1	0	2	O 3	PTJT (	0-10)
F. Bend down to p	oick up cloti	ning from t	the floor?				C 0	O 1	0	2	C 3	RAPID 4 (	0-40)
G. Turn faucets on	and off?						C 0	O 1	0	2	O 3	MDGLOBAL (	0-10)
H. Get in and out	of a car, bu	s, or airpla	ne?				C 0	O 1	0	2	O 3	RAPID 5 (	0-50)
I. Walk two miles i	f you wish?						C 0	O 1	0	2	O 3		
J. Participate in red	creational a	ctivites and	l sports as you	u would lik	e, if you	u wish	? <sup>O</sup> 0	O 1	0	2	O 3	RAPID 3 (	0-10)
K. Get a good nigi	ht's sleep?						C 0	C 1	0	2	C 3	DADID 4	0.10
L. Deal with feelin	gs of anxiet	y or being	nervous?				C 0	O 1	0	2	O 3	KAPID 4 (	0-10)
M. Deal with feelin	ngs of depr	ession or f	eeling blue?				C 0	O 1	0	2	C 3	RAPID 5 (	,0-10)
low much pain hav	ve you had	because of	f your conditi	on OVER T	HE PAST	T WEE	K? Please indicate	how severe y	our pain h	as beer			
NOCO	0 0	0 0	0 0	0.0	0	0	0 0 0	0 0	ċ (	o o	C	PAIN AS BAD AS	
PAIN 0 0.5	1 1.5	2 2.5	3 3.5	4 4.	55	5.5	6 6.5 7	7.5 8	8.5 9	9.5	10	IT COULD BE	
ease check in the	appropriate	spot to in	dicate the am	ount of pa	in you	are ha	ving TODAY in eac	h of the joint	areas list	ed belov	v:		
	NONE	MILD	MODERATE	SEVERE				NONE	MILD	MODER	ATE S	EVERE	
LEFT FINGERS	O 0	C 1	C 2	О з			RIGHT FINGERS	C 0	01	0 :		С з	
LEFT WRIST	C 0	C 1	C 2	Оз			RIGHT WRIST	C o	01	0		03	
LEFT ELBOW	C 0	C 1	C 2	Оз			RIGHT ELBOW	C 0	01	0		С з	
LEFT SHOULDER	C 0	C 1	C 2	C 3			RIGHT SHOULDER	0 0	C 1	0		Сз	
LEFT HIP	C o	C 1	C 2	C 3			RIGHT HIP	C 0	01	0		Оз	
LEFT KNEE	00	C 1	0 2	03			RIGHT KNEE	0.0	01	0	,	0 3	
LEFT ANKLE	0.0	0.1	0 2	03			RIGHT ANKLE	0.0	01	0		C 3	
LEFT TOES	0.0	C 1	0 2	C 3			RIGHT TOES	C o	0.1	0	,	0.3	
NECK	0.0	C 1	0 2	03			BACK	0.0	01	0		03	
		-											
Unsidering all the	ways in wh	C C C	and nearth co	nuitions n	ay affe	cryou	at this time, pleas	e indicate hou	w you are	uoing:	0	VEDV	
		- <b>A</b>			2000 A 10			A A A A				Y LIVI	

#### OR

- 3. Select Option 2: MDHAQ Brief hyperlink and the brief *MD-HAQ Brief* pop-up will show. Manually enter the **FN score**
- 4. Then click Save & Close.



E TSI for Rheumatology - N	1DHAQ© Brief
tri	
Multi-Dimensional Health	Assessment Questionnaire (MDHAQ)© 🕦
FN (0-10)	
PN (0-10)	
PTGL (0-10)	
RAPID 3 (0-30)	
PTJT (0-10)	
RAPID 4 (0-40)	
MDGLOBAL (0-10)	
RAPID 5 (0-50)	
RAPID 3 (0-10)	
RAPID 4 (0-10)	
RAPID 5 (0-10)	
	Save & Close Cancel

# Quality Measure 226: Tobacco Use: Screening and Cessation Intervention

**Measure Description:** Patients 18 and older who were screened for tobacco use one or more times within 24 months **AND** who received cessation counseling intervention if identified as a tobacco user.

Measure 226: Tobacco Use: Screening and Cessation Intervention 🕡
Tobacco use 🛞 🗌 Reviewed Updated: 🛛 / /
Smoking status:
Tobacco use:
Enc Date Tobacco Type Smoking Status
Tobacco Usage
Tobacco cessation discussed
Vaping Status:

#### Measure Workflow:

1. Select the Tobacco Usage hyperlink.

Tobacco use	Reviewed	Updated: / /
Tobacco use:		
Enc Date	Tobacco Type	Smoking Status
Tobacco Usag	e essation discussed	



- Once the Social History Tobacco pops up, document if the patient has ever used tobacco by selecting "Yes" or "No/never" and ensure a value populates the Smoking Status AND Tobacco Use Status field. If the patient is a tobacco user, document the tobacco type.
- 3. Click **OK**.

ol/Caffeine	0	Panel Control: 🕤 Toggle 🕢 🔹 Cycle
ses yle	Tobacco Use	۲
pation nents fistory	Have you ever used tobacco? C No/never      The C Unknown     C Exclusions	Reviewed Updated: 07/13/2018
onmental	Smoking Tobacco Use     Years     Pack     Age     Age       Tobacco type:     daily     Use years     Vears     Pack     Age     Age       Tobacco type:     daily     Cigarittes     Image     Image     Image     Image       Cigaritio     Image     digaritios     Image     Image     Image     Image       Cigaritio     Image     digaritios     Image     Image     Image     Image       Image     Image     Image     Image     Image     Image     Image	Non-Smoking Tobacco Use
	*Smoking status: Light tobacco smoker	Tobacco use status: Occasional cigarette smoker
		Click here to see tobacco history prior to 7.9.
	Encounter Date Tobacco Type Usage Per Day Years Used Pack 07/13/2018 Clgarette 2 Cigarettes	Year Status Age Started Age Stopped Light tobacco smoker
	4	<u>)</u>
	Efforts To Quit Tobacco	۲

- 4. If the patient is a tobacco user, document tobacco cessation counseling by selecting the tobacco cessation checkbox on the dashboard and the type of cessation given.
- 5. Select Save & Close.
  - a. Once you complete this step, it will populate in the grid below and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon

Discussed/recommended vitamin D supplementation	目 Tobacco Cessation Discussed 🛛 💌	
Measure 178: Rheumatoid Arthritis: Functional Statu Opt 1: MDHAQ Detailed Opt 2: MDHAQ Brie Measure 226: Tobacco Use: Screening and Cessation Tobacco use  Former smoker Tobacco use: former Enc Date Tobacco Type Smoking Status 09/30/2016 Former smoker Tobacco Usage	Tobacco cessation discussion:          Image: Second Seco	
Vaping Status:	Save & Close Cancel	



**Measure Description:** For all patients with a diagnosis of Psoriasis, Psoriatic Arthritis or Rheumatoid Arthritis on a Biological Immune Response Modifier with a negative or managed positive TB screening. If TB screening is positive, document the findings AND a Chest x-ray/CT to show evidence of INACTIVE Tuberculosis within ONE year of the start of a Biologic immune Response Modifier medication.

Measure 33	7: Tuberculo	sis (TB) Preve	ntion 🕕 ***IMPORTAN	T NOTE: For the	list of qualifying biologic	s, please refer t	o the mea	sure whitepaper	
I ackno - An a - A po durin of IN perfo	owledge that innual TB scre ositive TB scre ng the measu IACTIVE TB co ormed within	the following ening with n ening with perio rement perio nfirmed throu the year	g has been documented: egative findings OR ositive findings d with evidence Sub Igh a chest x-ray	mit Code					
TB Orders						TB Results	via Interfa	ce	
Status	JOrdered	<u>Completed</u>	Order	<u> Interpretation</u>	Results/Report	No results	were found	<u>.</u>	
Status	Ordered	Completed	Order	Interpretation	Value		ICD	Diagnosis	Comments
result received	06/29/2018	//	Chest X-ray; Complete (4 + views)	See module			M06.9	Rheumatoid arthritis	
									Þ

#### Measure Workflow:

- The grids are just to show if a TB screening was ordered, resulted, and if a Chest X-ray was ordered for a positive TB screening.
- Select the checkbox if you acknowledge that the documentation of:
  - An annual TB screening with a negative finding **OR**
  - A history of positive TB findings anytime in the patient's medical history with evidence of INACTIVE TB confirmed through a chest x-ray performed within the past year.

Measure 3	37: Tuberculo	sis (TR) Preve		T NOTE: For the	list of qualifying bi	ologics (	alease refer t	o the mea	sure whitenaner		
✓ I ack - An - A p du of 1 per	nowledge that annual TB scr positive TB scre ring the measu INACTIVE TB cc formed withir	t the followin eening with r eening with p urement perio onfirmed thro n the year	g has been documented: legative findings OR ositive findings d with evidence Cod ugh a chest x-ray	e Submitted	isc of qualitying bi	ologics, j		o die niea	sure wintepaper.		
TB Orders							TB Results	via Interfa	ce		
Status	Ordered	Completed	Order	Interpretation	Results/Report		No results	were found	L .		
completed	1 04-10-2019	04-10-2019	QuantiFERON-TB Gold	negative							
<b>▲</b>											
Chest X-Ra	ys										
Status	Ordered	Completed	Order	Interpretation	Value			ICD	Diagnosis	Comments	
result received	06/29/2018	//	Chest X-ray; Complete (4+ views)	See module				M06.9	Rheumatoid arthritis		
•											Þ

Quality Measure 408: Opioid Therapy Follow Up Evaluation

2019 RHE Content Update



**Measure Description:** Patients 18 and older prescribed opiates for longer than six weeks' duration who had a follow-up evaluation conducted at least every three months of Opioid Therapy documented in the medical record.

#### Measure Workflow:

 Confirm that the patient has a follow up visit documented in their chart within the initial 3-month period during or after the start of opiate medication therapy. Once you confirm this information, along with the start date of the opiate medication therapy, select the submit code button.

Submit Code to Indicate Follow-up visit performed     Code Submitted       Qualifying Medication     SIG       Status     Medication Name     SIG       Active     PERCOCET     take 1 tablet by oral route every 6 hours as needed for Anxiety	Code to Indicate -up visit performed	Code Submitted		
Status         Medication Name         SIG           Active         PERCOCET         take 1 tablet by oral route every 6 hours as needed for Anxiety				
Status         Medication Name         SIG           Active         PERCOCET         take 1 tablet by oral route every 6 hours as needed for Anxiety	ring Medication			
Active PERCOCET take 1 tablet by oral route every 6 hours as needed for Anxiety	Medication Name	SIG	Orig Start Date Start Date	Stop Date
	PERCOCET	take 1 tablet by oral route every 6 hours as for Anxiety	needed 05/13/2019 05/13/2019	

# Quality Measure 412: Documentation of Signed Opioid Treatment Agreement

**Measure Description:** Patients 18 and older prescribed opiates for longer than six weeks duration who signed on opioid treatment agreement at least once during Opioid Therapy documented in the medical record.

Veasure 412: Documentation of Signed Opioid Treatment Agreement 🛞			
Controlled Subst	ance Treatment Agreement		
Date Signed	Opioid Agreement Signed	Contract Reviewed	Additional Info
03-27-2018	Yes	Yes	
03-22-2018	Yes		
1			

- 1. Select the Controlled Substance Treatment Agreement blue hyperlink which will bring up the *Controlled Substance Agreement* pop-up.
- 2. Click the "Patient Signed Agreement" checkbox
- 3. Click Save & Close



a. Once you complete this step, it will populate in the grid below and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon.



Patient-Specific Education --- NOT REQUIRED! (CMS has removed this measure from MIPS, but could bring the measure back in future years. TSI recommends continuing to complete this measure as part of your workflow "just in case".)

**Measure Description:** A clinician must use clinically relevant information from CEHRT to identify patientspecific educational resources and provide access to those materials to at least one unique patient seen by the MIPS EC. If the patient has not received patient education on the current office visit, there will be the *Treatment Opportunity Missed* icon.

4	Patient-Specific Edu	ıcation 🕕		
	Patient Education		NOT REQUIRED! (CMS has removed this measure from MIPS, but could bring the measure back in future years. TSI recommends continuing to complete this measure as part of your workflow "just in case".)	
	Order Date	Patient Edu	ration	

- 1. Select the "Patient Education" blue hyperlink.
- 2. Select a patient education document from the Recommended Search Criteria section. Select the **Send to the Patient Portal** button.
  - a. If the "Send to Patient Portal" button is grayed out, this means the patient is not enrolled in patient portal.
  - b. This will populate the grid and will change the *Treatment Opportunity Missed* icon to the *Measure Met* icon.



Patient Education Browser	
Search Criteria:	🔹 🔎 Search 🆓 Internal   Term   English   Age: [19 - 24 Years]  Female 👻
10 ≈ Recommended Search Criteria	0 0 <i>P</i> 6 a
Herein Characteristics and the second s	
stanguage: English x Conditional and the standard and th	
Company and Upert Care     Company and Concerts	
Nose and Throat     N	💥 Add to Cart 🛛 🥫 Remove from Cart 🖉 Print • 🧟 Send to Patient Portal 🗔 Seve to Encounter Exit

# Important Last Steps!

- 1. Make sure to go back into the *MIPS Dashboard RHE* template at the end of the provider's workflow as there may be a measure that became a Treatment Opportunity.
  - a. Refer back to measures: 46, 109, 337, and 418
- 2. Once you finished documenting on the *MIPS Dashboard RHE* template, please make sure to click the **Save & Close** button at the bottom.

TSI for Rheumatology - MIPS Dashboard       ***DISCLAIMER: This dashboard is simply a guide. To track all Quality and J measure performance please check NextGen's HQM module for further and Measure Met = Image: Treatment Opportunity = A Does Not Meet Denominator = Image: Measure Information Button = Image: Measure Information = Image: Measure Info	ACI Age: 37 Years
IMPORTANT NOTE: If a measure has N/A "Does not meet denominator," it does not necessarily mean you don't need to document for it. It simply means that the patient at this time during this encounter does not meet all of the measure denominator criteria. Please make sure to revisit these measures after the patient has been seen by the provider.	♥ Toggle ●   Cycle
Per Encounter Measures	$\overline{\mathbf{r}}$
Per Performance Period Measures	$\overline{\mathbf{O}}$
	Save & Close