The Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) has been approved as a Qualified Clinical Data Registry (QCDR) for 2015.
# Table of Contents

- **Welcome** ........................................................................................................................................... 2
- **Medicare Quality Programs** .................................................................................................................. 3
- **MBSAQIP QCDR** .................................................................................................................................... 4
  - What Is PQRS? ......................................................................................................................................... 5
  - What Is a QCDR? ....................................................................................................................................... 5
  - Public Reporting ........................................................................................................................................ 5
  - What are the requirements for successful participation in PQRS using a QCDR? ........................................ 5
- **MBSAQIP Participating Centers** ........................................................................................................... 6
- **Consideration Checklist** ......................................................................................................................... 7
  - How do our metabolic and bariatric surgeons participate in the MBSAQIP QCDR? ................................. 8
  - Our center has decided to **participate** in the MBSAQIP QCDR. ............................................................. 8
  - Our center has decided **NOT** to participate in the MBSAQIP QCDR. .................................................... 8
- **MBSAQIP Surgeons** ................................................................................................................................. 9
  - What are the benefits of our surgeon submitting data through the MBSAQIP QCDR? ......................... 10
  - 2015 MBSAQIP QCDR Outcome Measures: ......................................................................................... 10
  - 2015 MBSAQIP QCDR Process Measure: ............................................................................................... 10
  - I have decided to **participate** in the MBSAQIP QCDR. ........................................................................ 11
  - I have decided **NOT** to participate in the MBSAQIP QCDR. ............................................................... 11
- **How to Submit My Measures** ............................................................................................................... 12
- **Process Steps** ......................................................................................................................................... 13
- **Resources** ............................................................................................................................................... 14
  - **MBSAQIP Staff Contact Information** ................................................................................................. 14
  - **QCDR Participation Scenarios** ............................................................................................................ 15
Welcome

A message from the Program Administrator

Centers participating in the Metabolic and Bariatric Surgery Accreditation and Quality Improvement (MBSAQIP) program capture 100% of metabolic and bariatric cases into the MBSAQIP data registry. The efforts by participating centers have allowed the MBSAQIP data registry to successfully participate in the Center of Medicare & Medicaid Services (CMS) Physician Quality Reporting System (PQRS) as a Qualified Clinical Data Registry (QCDR).

The MBSAQIP offers one of several options at the American College of Surgeons (ACS) whereby an eligible professional (EP) can elect to submit their quality data measures for successful PQRS participation. The QCDR reporting option now enables MBSAQIP to develop its own quality measures thereby allowing bariatric surgeons to choose what is reported to CMS. These measures can be more relevant, clinically appropriate, and actionable for metabolic and bariatric surgeons when compared to traditional PQRS measures. We are pleased to provide this PQRS participation option through the MBSAQIP for all EPs whose data is captured in the MBSAQIP data registry.

Public reporting of outcomes data will begin in 2016. We are providing Feedback Reports to all EPs who have cases collected in the MBSAQIP data registry as a means to improve their outcomes before final submission of the Risk-Standardized data to the CMS and reporting data publicly.

Within this guide you will find timelines, requirements for participation, and be given specific guidance based on your role at the center to use the MBSAQIP QCDR for PQRS participation. Whether you are the MBS Coordinator, MBSCR, MBS Director or bariatric surgeon, we hope the information provided is useful and the self-selection process easy.

As always, we thank you for your support of the MBSAQIP and all that you do to meet the needs of our patients served in the metabolic and bariatric surgery community.

Sincerely,

Teresa Fraker, MS, RN
Program Administrator, MBSAQIP
Division of Research and Optimal Patient Care
American College of Surgeons
Medicare Quality Programs

The Value-Based Payment Modifier (VM), authorized under the Affordable Care Act (ACA), provides either bonus payments, penalties, or no bonus or penalties (neutral adjustment) to a physician’s Medicare fee-for-service payments based on the quality and cost of the care they provide. To avoid 2017 VM penalties, surgeons must participate in the Physician Quality Reporting System (PQRS) program.

Beginning in 2015, the CMS PQRS program will apply a negative payment adjustment to surgeon EPs and PQRS group practices who did not satisfactorily report data on quality measures for covered professional services in 2013. Penalties are applied to EPs two years following the current calendar year. Those who report satisfactorily for the 2015 program year will avoid the 2017 PQRS negative payment adjustment.

If reporting for PQRS through another CMS program (such as the Surgeon Specific Registry, Medicare Shared Savings Program, Comprehensive Primary Care Initiative, and Pioneer Accountable Care Organizations) centers and surgeon EPs should contact those programs directly for additional information. Requirements for reporting quality data to earn PQRS incentive and/or avoid the PQRS payment adjustment will be specific to each qualified program.

For additional information around ACS’ efforts to assist surgeons with PQRS participation visit: https://www.facs.org/advocacy/quality/medicare-programs.
MBSAQIP’s journey toward participation in PQRS as a QCDR embarked initially in 2013 when it became apparent that the QCDR option could perhaps be a viable PQRS route for metabolic and bariatric surgeons who practice at MBSAQIP-affiliate centers. Applying as a QCDR is important in fulfilling a strategic initiative at the ACS in that the ACS promotes the use of clinical data for not only quality improvement, but for participation in surgeon payment and reimbursement options as well.

The benefits of submitting data through MBSAQIP for the purposes of QCDR are numerous and are outlined on page #10 of this information packet, but most particularly the approved MBSAQIP measures speak directly to the care of patients provided by metabolic and bariatric surgeons.
What Is PQRS?

The Physician Quality Reporting System (PQRS) is a CMS quality reporting program that encourages individual EPs and group practices to report information on quality of care to CMS.

Beginning in 2015, the PQRS program will apply a negative payment adjustment to individual EPs and PQRS group practices who did not report data on quality measures for Medicare Part B Physician Fee Schedule (MPFS) covered professional services in 2013. Those who report satisfactorily for the 2015 program year will avoid the 2017 PQRS negative payment adjustment.

What Is a QCDR?

A QCDR is a CMS-approved entity (registry) that collects clinical data for the purpose of patient and disease tracking to improve quality of care provided to patients in a particular population.

As noted above, individual surgeons who satisfactorily participate in 2015 PQRS through a QCDR may avoid the 2017 negative payment adjustment (-2.0%) on total Medicare Part B covered professional services in 2015.

If a center participates in a 2015 Group Practice Reporting Option (GPRO), individual surgeons cannot also participate in 2015 PQRS via MBSAQIP QCDR.

Additionally, participating in 2015 MBSAQIP QCDR will not satisfy clinical quality measures (CQMs) component of Medicare EHR Incentive Program (Meaningful Use).

Public Reporting

Public reporting is now required for 2015 QCDR measures results by the end of 2016. MBSAQIP will publically report the MBSAQIP QCDR measures results via the MBSAQIP website if the EP participates in the MBSAQIP QCDR and approves data submission to CMS 2015 PQRS program.

What are the requirements for successful participation in PQRS using a QCDR?

To earn the PQRS incentive by participating in QCDR in 2015, a physician must successfully report at least 9 individual measures including at least two outcome measures, covering at least 3 National Quality Strategy (NQS) domains, and report each measure for at least 50 percent of provider’s applicable patients seen during the reporting period to which the measure applies.
MBSAQIP Participating Centers

All centers entering data within the MBSAQIP data registry are eligible to participate in the MBSAQIP QCDR if an addendum to the ACS MBSAQIP Hospital Participation Agreement (PA) including Business Associate and Data Use Agreement (BA/DUA) has been fully executed.

The addendum to the PA and BA/DUA are sent via email to the primary contact (PC) of the center for electronic signature. The addendum can be sent to an authorized signatory, if necessary.

If your center previously participated in the MBSAQIP QCDR, a current version of the addendum must be signed due to CMSs’ requirement that QCDRs publicly report individual surgeon quality measures data in 2016. Please note that surgeons who practice at multiple MBSAQIP Participating Centers MUST have an addendum signed for each center in order to participate.
# Consideration Checklist

<table>
<thead>
<tr>
<th>What you need to do:</th>
<th>Note:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step 1:</strong>&lt;br&gt;☐ Check with your MBS Director and/or Center’s Administrator designated to submit PQRS measures data whether the MBSAQIP QCDR is the best option to participate in the 2015 PQRS program.</td>
<td>If a center participates in a 2015 Group Practice Reporting Option (GPRO), individual surgeons cannot also participate in 2015 PQRS via MBSAQIP QCDR. Participating in 2015 MBSAQIP QCDR will not satisfy clinical quality measures (CQMs) component of Medicare EHR Incentive Program (Meaningful Use).</td>
</tr>
<tr>
<td><strong>Step 2:</strong>&lt;br&gt;☐ Confirm that participating surgeons have the National Provider Identifier (NPI) and the Taxpayer Identification Number (TIN) used for Medicare Part B participation and billing.</td>
<td>A EPs TIN must match field 25 of the CMS-1500 claim form. Medicare billing. Incorrectly submitting a TIN will result in unsuccessful participation in PQRS. Individual NPIs must be used for reporting PQRS. Some group NPIs will result in unsuccessful participation in PQRS. Data submitted to CMS via a QCDR covers quality measures across multiple payers and is not limited to Medicare beneficiaries.</td>
</tr>
<tr>
<td><strong>Step 3:</strong>&lt;br&gt;☐ Review the specifications of the approved MBSAQIP QCDR quality measures which include patients with Laparoscopic Sleeve Gastrectomy (LSG) and Laparoscopic Roux-En-Y Gastric Bypass (LRYGB) procedures.</td>
<td>2015 MBSAQIP QCDR Non-PQRS measure specifications are posted on the MBSAQIP website. <a href="https://www.facs.org/quality-programs/mbsaqip/resources">https://www.facs.org/quality-programs/mbsaqip/resources</a></td>
</tr>
<tr>
<td><strong>Step 4:</strong>&lt;br&gt;☐ Confirm that each measure has at least 50 percent of applicable procedures during January 1, 2015–September 15, 2015 &lt;br&gt;For example, if the individual surgeon performed 40 LSG and/or LRYGB procedures during the timeframe of January 1, 2015–December 31, 2015, then at least 20 (which is calculated at 50 percent of the 40 total) of those procedures have to be performed during January 1, 2015 – September 15, 2015. <strong>See possible scenarios under Resources.</strong></td>
<td>Due to the MBSAQIP data registry *150 day “lock” date and CMS deadlines, the MBSAQIP QCDR is unable to include cases for PQRS reporting during the period of September 16, 2015- December 31, 2015. Please verify that at least 50 percent of LSGs and/or LRYGBs were performed during the time frame of January 1, 2015 - September 15, 2015. *The reporting period for participating in PQRS 2015 includes data from the registry prior to the change of the 150 day “lock” date to 90 days.</td>
</tr>
<tr>
<td><strong>Step 5:</strong>&lt;br&gt;☐ Should you determine that the MBSAQIP QCDR is the best option to participate in the 2015 PQRS program; your hospital/center must sign the Addendum to the ACS MBSAQIP Hospital Participation Agreement including BA/DUA for PQRS electronically by December 1st, 2015.</td>
<td></td>
</tr>
</tbody>
</table>
How do our metabolic and bariatric surgeons participate in the MBSAQIP QCDR?

MBSAQIP surgeons will have the opportunity to voluntarily elect that their individual MBSAQIP QCDR quality measures results be submitted to CMS for PQRS program participation.

Surgeons will be provided with Feedback Reports of their results of the QCDR measures to track their performance throughout the year. The MBSAQIP will submit approved measures from the Final Risk Standardized Report during the first quarter of 2016 on behalf of MBSAQIP participants only if individual surgeons authorize to have their data submitted to CMS.

Our center has decided to participate in the MBSAQIP QCDR.

Centers deciding to participate in the 2015 PQRS program through the MBSAQIP QCDR must ensure the following before successfully completing the next steps:

1. The individual surgeons’ NPI number for each surgeon used in the data registry is accurate.
2. The center is not participating in the Group Practice Reporting Option (GPRO). If a center participates in a GPRO, individual surgeons cannot also participate in 2015 PQRS via MBSAQIP QCDR.
3. Your surgeon who participates at another center has an addendum fully executed for that center as well.

What happens next?

<table>
<thead>
<tr>
<th>What happens next?</th>
<th>Complete by</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Centers</td>
<td></td>
</tr>
<tr>
<td>PC receives username and password and electronically sign the Addendum. (Unauthorized PCs can forward email to other authorized signatory).</td>
<td>Dec. 1st, 2015</td>
</tr>
<tr>
<td>New participants only - PC (and authorized signatory if provided) receives confirmation email that the Addendum has been received.</td>
<td>(Not applicable. Confirmation email is sent immediately)</td>
</tr>
<tr>
<td>MBSAQIP QCDR site is automatically unlocked for the center.</td>
<td>(Not applicable. Confirmation email is sent immediately)</td>
</tr>
<tr>
<td>PC logs into the MBSAQIP QCDR site to provide surgeon emails (and phone numbers).</td>
<td>Mar. 1st, 2015 (Recommended to complete immediately)</td>
</tr>
<tr>
<td>Surgeon email with Consent to Disclose Data Form is sent immediately and PC confirms receipt of email with surgeon.</td>
<td>Mar. 1st, 2015 (Recommended to complete immediately)</td>
</tr>
<tr>
<td>Center is complete with their task.</td>
<td>Mar. 1st, 2015</td>
</tr>
</tbody>
</table>

Our center has decided NOT to participate in the MBSAQIP QCDR.

CMS requires surgeons to review their outcomes data continually for quality improvement purposes. Feedback Reports and the Risk Standardized Report will be made available to ALL surgeons who have data in the MBSAQIP data registry.

Centers deciding NOT to participate in the 2015 PQRS program through the MBSAQIP QCDR should still consider having the addendum to the BA/DUA and PA fully executed.
All surgeons who have data within the MBSAQIP data registry are eligible to participate in the MBSAQIP QCDR if their center fully executes the addendum to the BA/DUA for the ACS and PA for the MBSAQIP and the surgeon has signed the Consent to Disclose Data Form. If the surgeon’s center participated in the MBSAQIP QCDR previously, a current version of the addendum will need to be signed due to the CMS requirement for QCDRs to publicly report data in 2016.

Surgeons who practice at multiple MBSAQIP Participating Centers MUST have an addendum signed for each center prior to being sent the Consent to Disclose Data Form.

For Example

If you are a surgeon who participates at multiple centers but one of your centers does not collect data within the MBSAQIP data registry, only an addendum for those who submit data within the MBSAQIP data registry is required.

If you are a surgeon who participates at multiple centers and all centers collect data within the MBSAQIP data registry, an addendum is required for all centers.

The Consent to Disclose Data Form is sent via email for electronic signature after the addendum to the BA/DUA and PA have been fully executed and the PC has provided the surgeon’s email address to the MBSAQIP. The Consent to Disclose Data Form must be submitted on an annual basis. If a surgeon has participated in the MBSAQIP QCDR previously, a new Consent to Disclose Data Form must be signed.

Submission of the Consent to Disclose Data Form does not submit quality measures to the CMS.

Responsible Person(s):

☐ MBSAQIP Primary Contact – Fully execute the addendum to the BA/DUA and PA and submit your surgeon(s) email address within the MBSAQIP QCDR site.

☐ Surgeon EP – Check your email for the Consent to Disclose Data Form and electronically sign to receive your username and password.
What are the benefits of our surgeon submitting data through the MBSAQIP QCDR?

- Data is already being collected at your center as part of participation in the MBSAQIP, whereas other options to satisfy PQRS may require additional data burden on the physician,
- We offer more relevant, clinically appropriate and actionable measures that help achieve meaningful quality improvement.
- There is greater potential to meet the reporting requirement of 9 measures across 3 National Quality Strategy (NQS) domains.
- CMS continues implementation of the Physician Value-based Payment Modifier (VM) using PQRS performance rates for the quality portion of the VM calculation. Physicians who are successful PQRS reporters will avoid penalties under the VM.
- We provide an opportunity for metabolic and bariatric surgeons to engage in quality improvement initiatives and fulfill Part IV of the American Board of Surgery Maintenance of Certification (MOC) program.

### 2015 MBSAQIP QCDR Outcome Measures:

1. Risk Standardized 30-Day Postoperative Complication Rate
2. Risk Standardized 30-Day Readmission Rate
3. Risk Standardized 30-Day Reoperation Rate
4. Risk Standardized 30-Day Anastomotic/Staple Line Leak Rate
5. Risk Standardized 30-Day Perioperative Bleeding Rate
6. Risk Standardized 30-Day Postoperative Surgical Site Infection Rate
7. Risk Standardized 30-Day Postoperative Nausea, Vomiting or Fluid/Electrolyte/Nutritional Depletion Rate
8. Risk Standardized Extended Length of Stay (> 7 days)

### 2015 MBSAQIP QCDR Process Measure:

9. 30-Day Postoperative Follow-Up Rate

<table>
<thead>
<tr>
<th>Feedback Report</th>
<th>Operation Dates</th>
<th>Lock Date</th>
<th>Data Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Jan 1, 2015 - Feb 28, 2015</td>
<td>28-Jul-15</td>
<td>2 months</td>
</tr>
<tr>
<td>2</td>
<td>Mar 1, 2015 - Apr 30, 2015</td>
<td>27-Sep-15</td>
<td>2 months</td>
</tr>
<tr>
<td>3</td>
<td>May 1, 2015 - June 30, 2015</td>
<td>27-Nov-15</td>
<td>2 months</td>
</tr>
<tr>
<td>Risk Adjusted Report</td>
<td>Jan 1, 2015 - Sep 15, 2015</td>
<td>12-Feb-16</td>
<td>8.5 months</td>
</tr>
<tr>
<td>4</td>
<td>July 1, 2015 - Dec 31, 2015</td>
<td>29-May-16</td>
<td>6 months</td>
</tr>
</tbody>
</table>
I have decided to **participate** in the MBSAQIP QCDR.

Surgeons deciding to participate in the 2015 PQRS program through the MBSAQIP QCDR must ensure the following **before** successfully completing the next steps:

1. Your TIN/NPI combination is correct. The TIN is found on field 25 of the CMS-1500 claim form.
2. Your center is **not** participating in the Group Practice Reporting Option (GPRO). If a center participates in a GPRO, individual surgeons cannot also participate in 2015 PQRS via MBSAQIP QCDR.
3. You have a fully executed addendum for ALL centers that collect data under your NPI in the MBSAQIP data registry.

I have decided **NOT** to participate in the MBSAQIP QCDR.

CMS requires surgeons to review their outcomes data continually for quality improvement purposes. Feedback Reports and the Risk Standardized Report will be made available to ALL surgeons who have data in the MBSAQIP data registry. To view any data or reports an addendum to the BA/DUA and PA must be on file.

---

**What happens next?**

<table>
<thead>
<tr>
<th>New</th>
<th>Complete by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon receives email with link to the Consent to Disclose Data form, confirms NPI/TIN, and electronically signs the form.</td>
<td>Dec. 31st, 2015</td>
</tr>
<tr>
<td>Surgeon receives email with username and password to view reports.</td>
<td>(Not applicable. Username and password email is sent immediately after PC provides surgeon’s email)</td>
</tr>
<tr>
<td>Surgeon MUST login into QCDR site, review the Final Risk Adjusted (risk standardized) report and select Option A or B.</td>
<td>Mar. 28th, 2016</td>
</tr>
<tr>
<td>Surgeon is complete with their task.</td>
<td>Mar. 28th, 2016</td>
</tr>
</tbody>
</table>

Surgeons deciding NOT to participate in the 2015 PQRS program using the MBSAQIP QCDR should consider participating through the ACS Surgeon Specific Registry to avoid penalty.
How to Submit My Measures

THE SUBMISSION DEADLINE IS MARCH 28TH, 2016. The MBSAQIP will not submit any quality measures outcomes data to the CMS without Surgeons’ authorization.

Submission steps for March 2016.

**Step 1:** Log in with your username and password.

![MBSAQIP Logo]

**Step 2:** Select Reports from the menu bar.

![Select Reports Menu]

**Step 3:** Select the hyperlinked Risk Standardized MBSAQIP QCDR Quality Measure Outcomes Report 2014.

![Risk Standardized Report]

**Step 4:** Review your data.

![Review Your Data]

**Step 5:** Provide your electronic signature after reading the attestation and submit your option (A or B) to the MBSAQIP by clicking “Submit to MBSAQIP”.

If you are a surgeon who is submitting as GPRO or using another Medicare Quality Program to fulfill the CMS requirement for quality measure data submission, select Option B.
CMS approves MBSAQIP as a QCDR for the PQRS program
CMS reviews data submission and audit material from the MBSAQIP on behalf of the EP
If deemed successful EP avoids penalty for Medicare Part B claims

Center reviews the Consideration Checklist and selects the MBSAQIP QCDR as the reporting option for PQRS program
Center’s PC receives invitation to participate
Center signs Addendum to the PA including BA/DUA
Center’s PC provides surgeon emails who should receive Consent to Disclose Data Form

Surgeons gets an addendum to the BA/DUA and PA signed by all necessary centers
Surgeon receives Consent to Disclose Data Form via email
Surgeon receives username and password to view reports
Surgeon views Feedback Reports and Risk Adjusted Report
Surgeon selects to submit data for PQRS through the MBSAQIP QCDR

MBSAQIP QCDR Process
## MBSAQIP Staff Contact Information

<table>
<thead>
<tr>
<th>Name/Role</th>
<th>Phone Number</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>General QCDR Inquiries</td>
<td>312-202-5646</td>
<td><a href="mailto:mbsaqipquality@facs.org">mbsaqipquality@facs.org</a></td>
</tr>
<tr>
<td>Rasa Krapikas Data Registry Manager</td>
<td>312-202-5646</td>
<td><a href="mailto:rkapikas@facs.org">rkapikas@facs.org</a></td>
</tr>
<tr>
<td>Jennifer Bradford Project Manager</td>
<td>312-202-5576</td>
<td><a href="mailto:jbradford@facs.org">jbradford@facs.org</a></td>
</tr>
<tr>
<td>Teresa Fraker Program Administrator</td>
<td>312-202-5654</td>
<td><a href="mailto:tfra@facs.org">tfra@facs.org</a></td>
</tr>
<tr>
<td>Bianca Agregado Surgeon Specialty Registry Manager</td>
<td>312-202-5635</td>
<td><a href="mailto:bagregado@facs.org">bagregado@facs.org</a></td>
</tr>
</tbody>
</table>
QCDR Participation Scenarios

Scenario 1: Surgeon Eligible to Participate

During January 1, 2015 – December 31, 2015 Surgeon performs:
- 25 LSGs
- 15 LRYGBs
  **Total: 40 LSGs and LRYGBs**

During January 1, 2015 – September 15, 2015 Surgeon performs:
- 15 LSGs
- 10 LRYGBs
  **Total: 25 LSGs and LRYGBs**

At least 50 percent of applicable procedures (25 out of 40 LSGs and LRYGBs) were performed during January 1, 2015 – September 15, 2015; therefore, a surgeon is eligible to participate.

Scenario 2: Surgeon **NOT** Eligible to Participate

During January 1, 2015 – December 31, 2015 Surgeon performs:
- 25 LSGs
- 15 LRYGBs
  **Total: 40 LSGs and LRYGBs**

During January 1, 2015 – September 15, 2015 Surgeon performs:
- 10 LSGs
- 5 LRYGBs
  **Total: 15 LSGs and LRYGBs**

Less than 50 percent of applicable procedures (15 out of 40 LSGs and LRYGBs) were performed during January 1, 2015 – September 15, 2015; therefore, a surgeon is not eligible to participate.

Scenario 3: Surgeon **NOT** Eligible to Participate

During January 1, 2015 – December 31, 2015 Surgeon performs:
- **40** Laparoscopic Adjustable Gastric Band (LAGB) procedures

The specifications of the approved MBSAQIP QCDR quality measures only include patients with Laparoscopic Sleeve Gastrectomy (LSG) and Laparoscopic Roux-En-Y Gastric Bypass (LRYGB) procedures (CPT codes: 43644, 43645, and 43775)