



MIPS REPORTING 2024

# 1

# Quality Measures

## Quality Measures



Required to Report on **6** measures  
(1 High Priority or Outcome)

**20** Eligible Instances Needed

**75%** Reporting Rate

## Quality Measures



EZDERM supports the following 9 Quality measures:

- **47:** Care Plan (*High Priority*)
- **137:** Melanoma: Continuity of Care - Recall System (*High Priority*)
- **374:** Closing the referral Loop: Receipt of Specialist Report (*High Priority*)
- **130:** Documentation of Current Medications in the Medical Record
- **176:** Tuberculosis Screening Prior to First Course of Biologic and/or Immune Response Modifier Therapy
- **410:** Psoriasis: Clinical Response to Oral Systemic or Biologic Medications (Outcome measure)
- **485:** Psoriasis – Improvement in Patient-Reported Itch Severity
- **486:** Dermatitis – Improvement in Patient-Reported Itch Severity
- **487:** Screening for Social Drivers of Health

## New Measures with a **5 Point Floor** in 2024:

- **485:** Psoriasis – Improvement in Patient-Reported Itch Severity
- **486:** Dermatitis – Improvement in Patient-Reported Itch Severity
- **487:** Screening for Social Drivers of Health

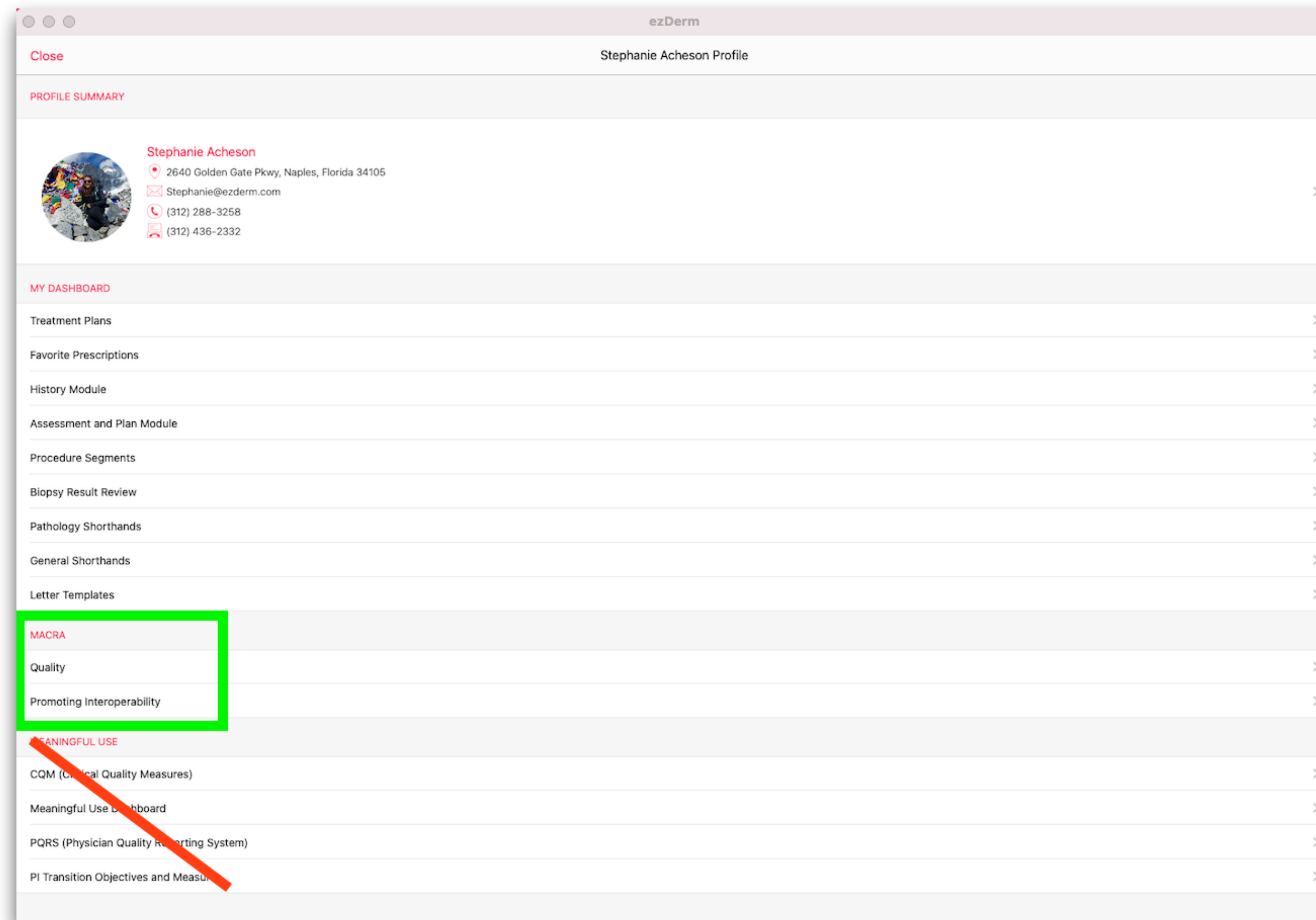
*If you meet reporting rate and eligible instances, you automatically get 5 points regardless of the performance rate.*

# 2

## Quality Report In EZDERM



# Interactive Quality Report Found Under Each Provider EHR Login



# Quality Report



Quality Reports

- Report For: Jan 1, 2024 - Dec 31, 2024  
Last Modified on Jul 1, 2024
- Report For: Jan 1, 2024 - Dec 31, 2024  
Last Modified on Feb 14, 2024
- Report For: Jan 1, 2024 - Dec 31, 2024  
Last Modified on May 22, 2024
- Report For: Jan 1, 2024 - Dec 31, 2024  
Last Modified on Jan 24, 2024
- Report For: Jan 1, 2024 - Dec 31, 2024  
Last Modified on May 14, 2024
- Report For: Jan 1, 2024 - Dec 31, 2024  
Last Modified on Jan 26, 2024
- Report For: Jan 1, 2023 - Dec 31, 2023  
Last Modified on Mar 14, 2024
- Report For: Jan 1, 2023 - Dec 31, 2023  
Last Modified on Oct 2, 2023
- Report For: Jan 1, 2023 - Dec 31, 2023  
Last Modified on Oct 4, 2023
- Report For: Jan 1, 2023 - Dec 31, 2023  
Last Modified on Oct 13, 2023
- Report For: Jan 1, 2023 - Dec 31, 2023  
Last Modified on Oct 17, 2023
- Report For: Jan 1, 2022 - Dec 31, 2022  
Last Modified on Jan 30, 2023

Modal: Create Report

Start Date: January 1, 2024

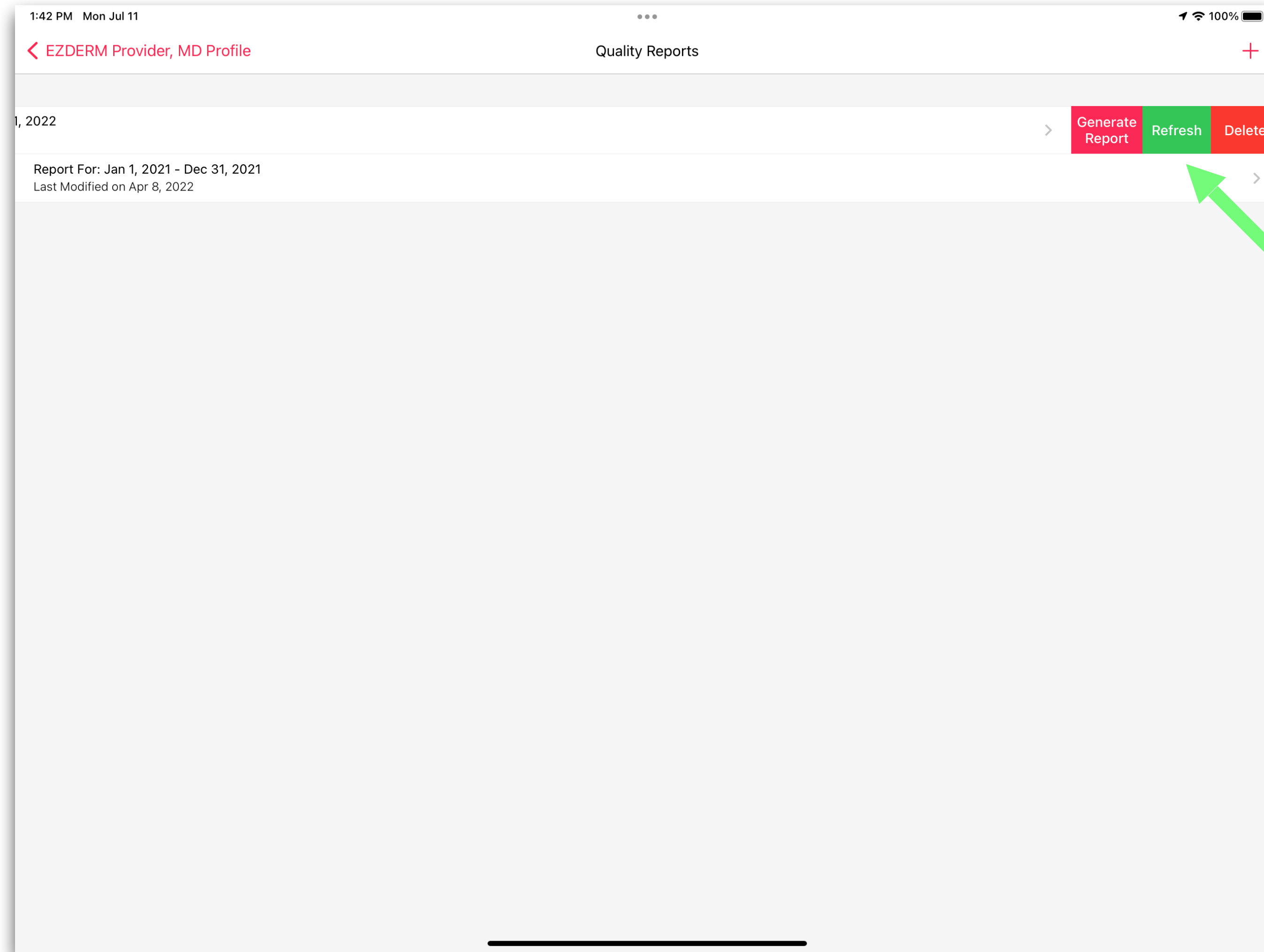
End Date: December 31, 2024

October	29	2021
November	30	2022
December	31	2023
January	1	2024
February	2	2025
March	3	2026
April	4	2027

12 Month Reporting Period



# Quality Report



Don't forget to refresh report to see updates!

# Quality Report



## Performance Rate =

All visits that met the criteria /  
(patients that have completed visits  
- patients that were excluded)

**Goal = 100%**

## Reporting Rate =

(MET + NOT MET + Exclusions) /  
visits that passed the Denominator

**Goal = Greater than 75%**

Cancel		Report For: Jan 1, 2024 - Dec 31, 2024	Personal Note Done
<b>47 - Advance Care Plan</b>			
Performance Met			2
Denominator			2
Performance Not Met			0
Performance Exclusion			0
Performance Rate			<b>100.00 %</b>
Reporting Rate			<b>100.00 %</b>
Eligible Patients			>
<b>130 - Documentation of Current Medications in the Medical Record</b>			
Performance Met			10
Denominator			21
Performance Not Met			0
Performance Exclusion			0
Performance Rate			<b>100.00 %</b>
Reporting Rate			<b>47.62 %</b>
Eligible Patient Visits			>
<b>137 - Melanoma: Continuity of Care - Recall System</b>			
Performance Met			0
Denominator			0
Performance Not Met			0
Performance Exclusion			0

# Quality Report



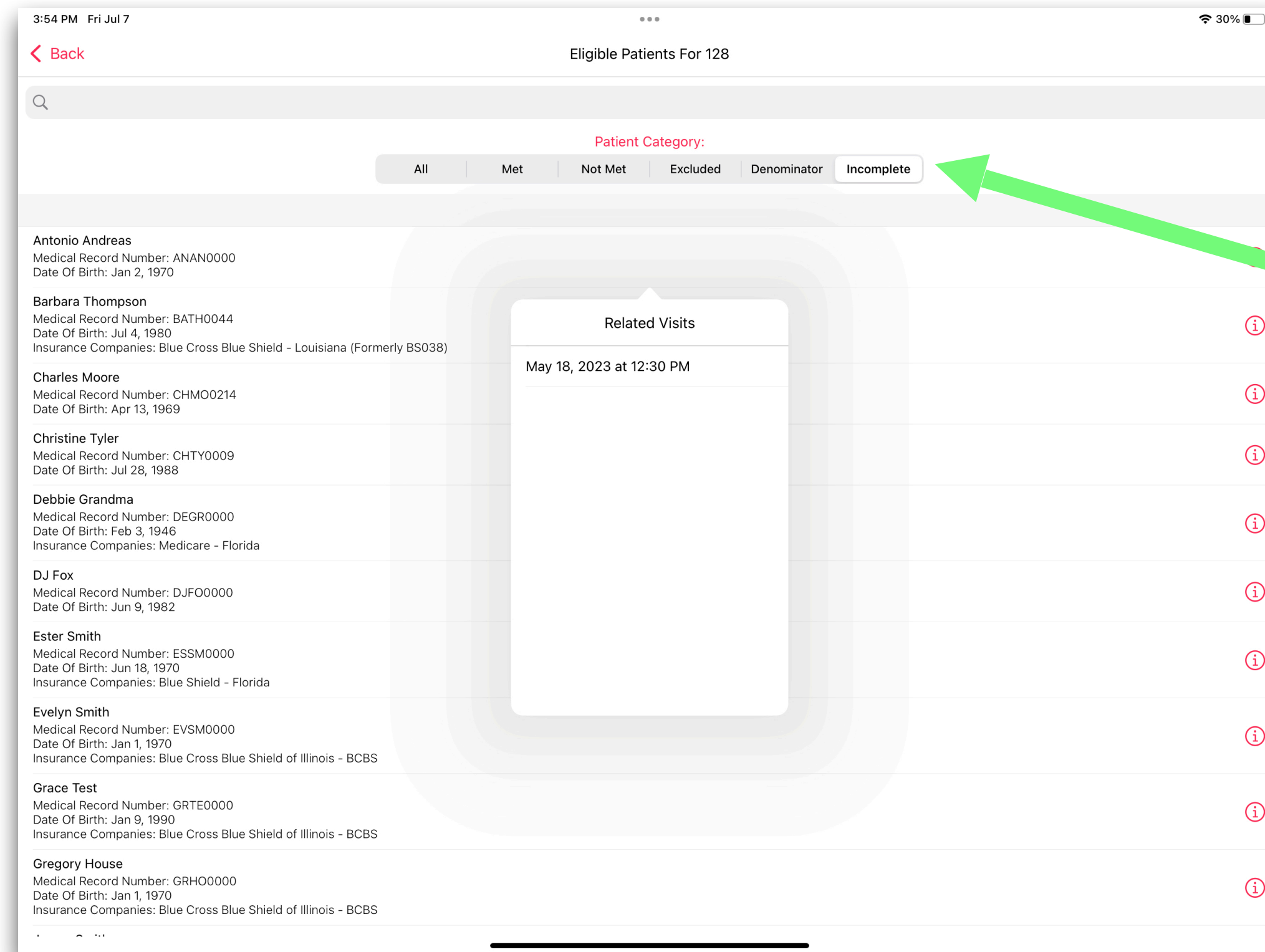
Cancel Report For: Jan 1, 2024 - Dec 31, 2024 Personal Note Done

<b>47 - Advance Care Plan</b>		
Performance Met		2
Denominator		2
Performance Not Met		0
Performance Exclusion		0
Performance Rate		<b>100.00 %</b>
Reporting Rate		<b>100.00 %</b>
Eligible Patients		
<b>130 - Documentation of Current Medications in the Medical Record</b>		
Performance Met		10
Denominator		21
Performance Not Met		0
Performance Exclusion		0
Performance Rate		<b>100.00 %</b>
Reporting Rate		<b>47.62 %</b>
Eligible Patient Visits		>
<b>137 - Melanoma: Continuity of Care – Recall System</b>		
Performance Met		0
Denominator		0
Performance Not Met		0
Performance Exclusion		0



Tap “Eligible Patients” to review patient responses contributing to the score and any incomplete measures

# Quality Report

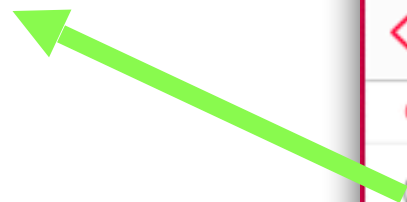


Under eligible patients, review Incomplete visits if reporting rate is low

# Quality Report

Under eligible patients, review not met visits if performance rate is low

Met



Excluded



Not Met



ezDerm

265 - Biopsy Follow-Up: Communication and Care Coordination

CHOOSE ONE:

- Biopsy results reviewed, communicated, tracked, and documented (G8883)
- Clinician documented reason that patient's biopsy results were not reviewed, [e.g., patient asks that biopsy results not be communicated to the primary care/referring physician, patient does not have a primary care/referring physician or is a self-referred patient] (G8884)
- Biopsy results not reviewed, communicated, tracked, or documented (G8885)

TIP: To satisfy this measure, the biopsying physician and/or office and medical team must:

- Review the biopsy results with the patient
- Communicate those results to the primary care/referring physician
- Track communication in a log
- Document tracking process in the patient's medical record

Definition:

Communication - Acceptable communication methods which are to be documented in the biopsy tracking log and patient medical record include:

- Directly speaking with the patient or a person designated by the patient to discuss biopsy results
- Documented telephone message or voice mail regarding the availability of biopsy results
- Mailer/fax sent to the patient indicating the availability of biopsy results or discussing the diagnosis itself
- Any HIPAA secure electronic communication with the patient discussing the biopsy results

The components of a tracking log incorporate the following -

- Initials of physician performing the biopsy
- Patient name
- Date of biopsy
- Type of biopsy
- Biopsy result
- Date of biopsy result

For Denominator Exception(s), patients are ineligible for this measure if at the time of encounter there are patient reason(s) for not communicating the results to the Primary Care or referring physician (e.g. patient self-referred or has no Primary Care Physician, etc.) as further specified below.

< Previous Question

# 3

## Quality Measure Tips

## Quality Measures



### Measure Specific Videos on Support Portal:

[Measure #176- Tuberculosis Screening Prior to First Course of Biologic and/or Immune Response Modifier Therapy](#)

[Measure #374: Closing the Referral Loop, Receipt of Specialist Report](#)

[MACRA # 485 & 486- Psoriasis/Dermatitis Improvement in Patient-Reported Itch Severity](#)

[MACRA #487- Screening for Social Drivers of Health](#)

*Email [techsupport@ezderm.com](mailto:techsupport@ezderm.com) if you don't have a login!*

# Tips

**Measure 47:** Add note under History Section regarding who is the surrogate decision maker, relationship, and phone number

The screenshot shows the EZDERM interface for Measure 47. The 'HISTORY' section is expanded, showing various travel and marital status options. A dropdown menu for 'Advance Healthcare Directive' is open, showing 'Finding' (Active living will), 'Presence' (Yes), and 'Note' (John Smith, husband, 201-456-7689). A green arrow points from the text 'Click on the word to get Note field' to the 'Note' field.

Section	Options
Travel	<input type="radio"/> Back packing vacation <input type="radio"/> European travel <input type="radio"/> Going to travel abroad <input type="radio"/> Previous foreign travel ++ <input type="radio"/> Self-catering travel <input type="radio"/> Travel abroad for business <input type="radio"/> Travels abroad widely
Marital Status	<input type="radio"/> Camping vacation <input type="radio"/> Foreign travel history finding <input type="radio"/> Non-European travel <input type="radio"/> Safari holiday <input type="radio"/> Travel abroad <input checked="" type="radio"/> Travel abroad on holiday <input type="radio"/> Engaged to be married <input checked="" type="radio"/> Married <input type="radio"/> Single, never married
Sexual Activity	<input type="radio"/> Heterosexual <input type="radio"/> Not sexually active
Advance Healthcare Directive	<input checked="" type="radio"/> Active living will <input type="radio"/> No advance directive
Family History	<input type="radio"/> Acne <input type="radio"/> Basal cell carcinoma of skin <input type="radio"/> Malignant melanoma <input checked="" type="radio"/> Skin cancer <input type="radio"/> Asthma <input type="radio"/> Eczema <input checked="" type="radio"/> Psoriasis <input type="radio"/> Squamous cell carcinoma of skin

Click on the word to get Note field

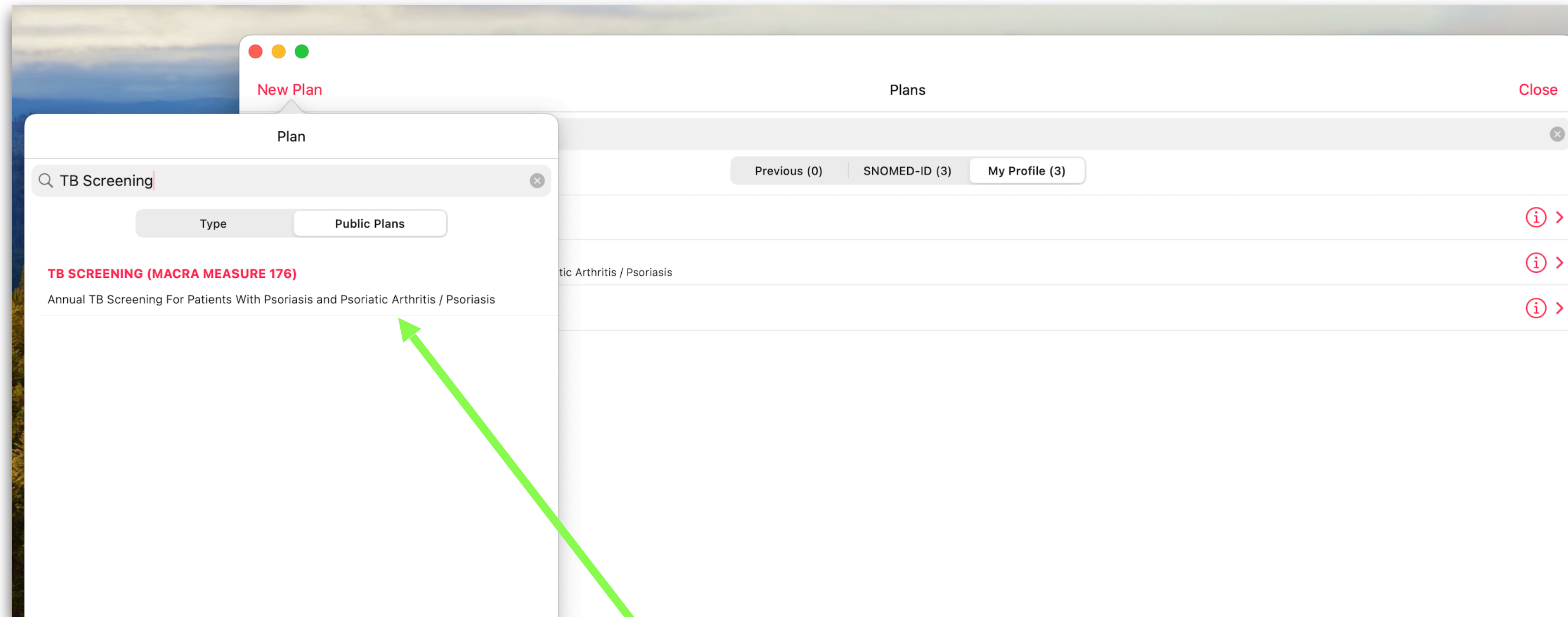


# Tips

## Measure 176: TB Screening Treatment Plan available in Public Database.

Measure is asking for patients 18 years and older for whom TB Testing is documented OR performed in the 12 months preceding the FIRST COURSE of therapy using a Biologic and/or immune response modifier prescription.

*\*To be eligible, the patient must not have been prescribed any biologic or immune response therapy in the prior 15 months.\**



# Tips



## Measure 137: Use a To Do set as a reminder as the melanoma recall

Cancel Create To-Do Done

Assignee Demo User, MD >

CC Clinical Staff >

Subject Melanoma Recall ✓

Message Schedule patient for melanoma check >

Patient Wendy Willow (WEW1000)

PROBLEM(S)

Malignant melanoma (April 21, 2020)

+ Add...

BILLING ENCOUNTER(S)

+ Add...

CLAIM(S)

+ Add...

Create Reminder

Due Jan 11, 2024 >

Calculate Activation Date >

In 3 4 5 6 7 8 9 10 11 12 13 14 15

Day(s)  
Week(s)  
Month(s)  
Year(s)

## Tips



**Measure 410:** Make sure the diagnosis in treatment plan or impression field is Psoriasis Vulgaris (not just Psoriasis), if appropriate

The screenshot displays the ezDerm interface for MIPS reporting. The window title is "ezDerm". At the top, there are buttons for "Cancel", "Report For: Jan 1, 2021 - Dec 31, 2021", and "Personal Note Done".

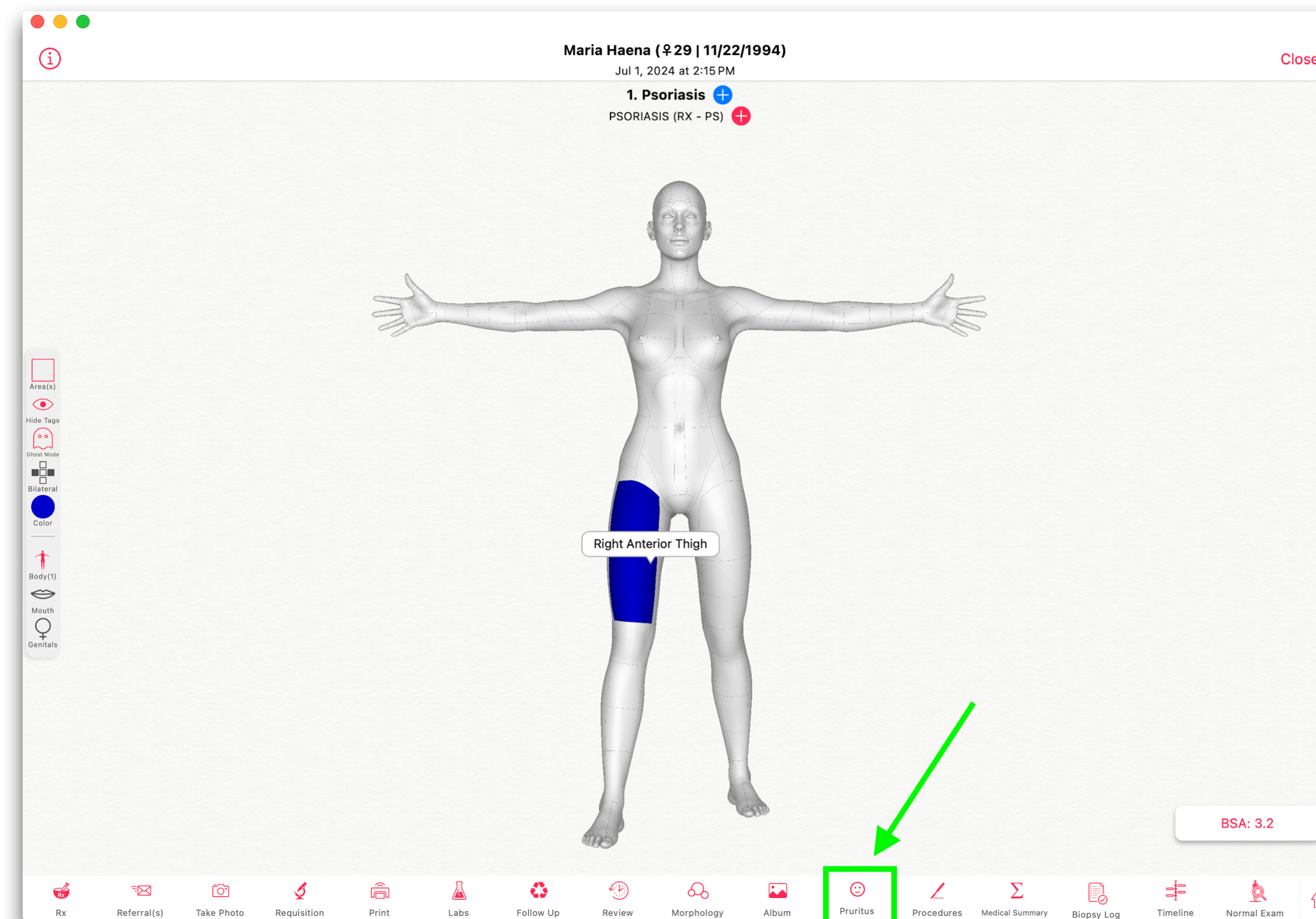
Two measures are listed:

- 337 - Psoriasis: Tuberculosis (TB) Prevention for Patients with Psoriasis, Psoriatic Arthritis and Rheumatoid Arthritis Patients on a Biological Immune Response Modifier** (with an information icon 'i').
  - Performance Met: 0
  - Denominator: 1
  - Performance Not Met: 0
  - Performance Exclusion: 1
  - Performance Rate: 0.00 %
  - Reporting Rate: 100.00 %
  - Eligible Patients: >
- 410 - Psoriasis: Clinical Response to Systemic Medications** (with an information icon 'i').
  - Performance Met: 0
  - Denominator: 1
  - Performance Not Met: 0
  - Performance Exclusion: 1
  - Performance Rate: 0.00 %
  - Reporting Rate: 100.00 %
  - Eligible Patients: >

A tooltip window is open over the information icon for Measure 337. The tooltip text reads: "Percentage of psoriasis vulgaris patients receiving systemic medication who meet minimal physician-or patient-reported disease activity levels. It is implied that establishment and maintenance of an established minimum level of disease control as measured by physician-and/or patient-reported outcomes will increase patient satisfaction with and adherence to treatment". A green arrow points from the tooltip to the information icon for Measure 410.

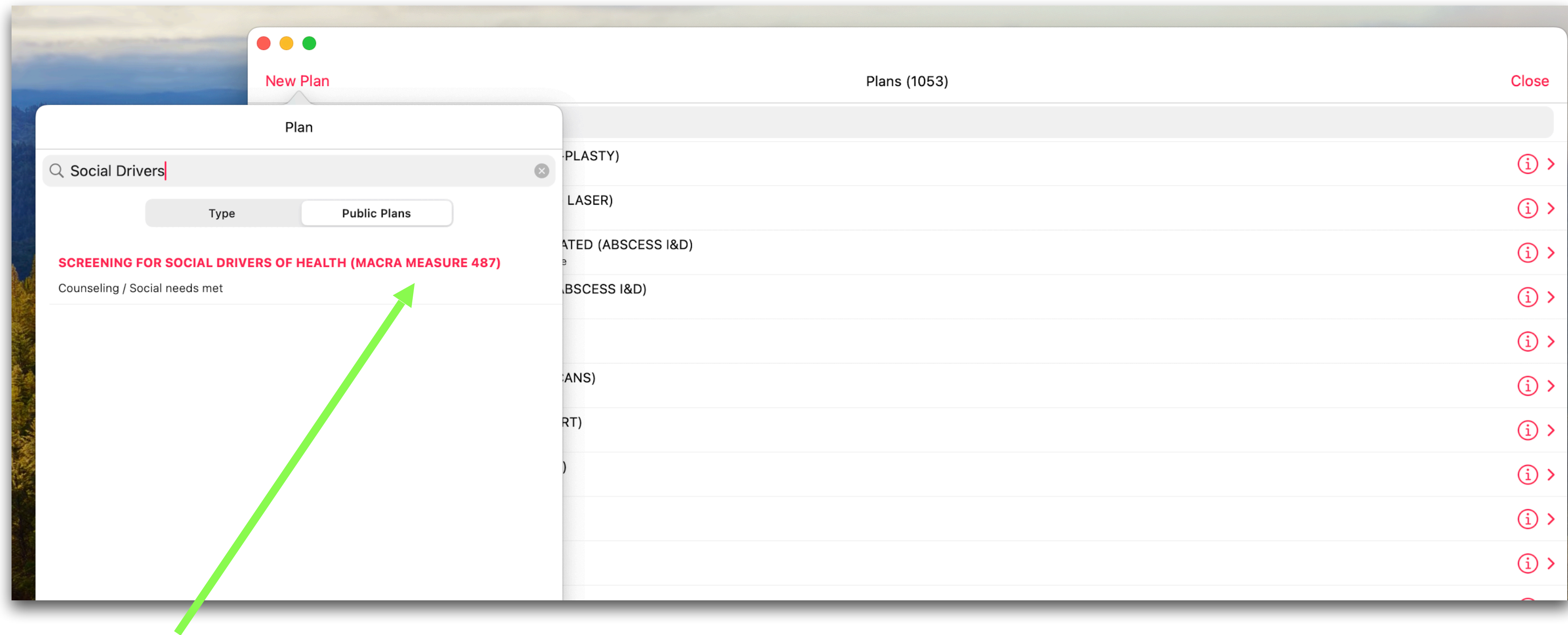
## Tips

**Measure 485 & 486:** Measure is triggered by adding Pruritus Itch Severity greater than 4 in 1st appointment. System will automatically answer the measure if you document the score in a 2nd appointment.



# Tips

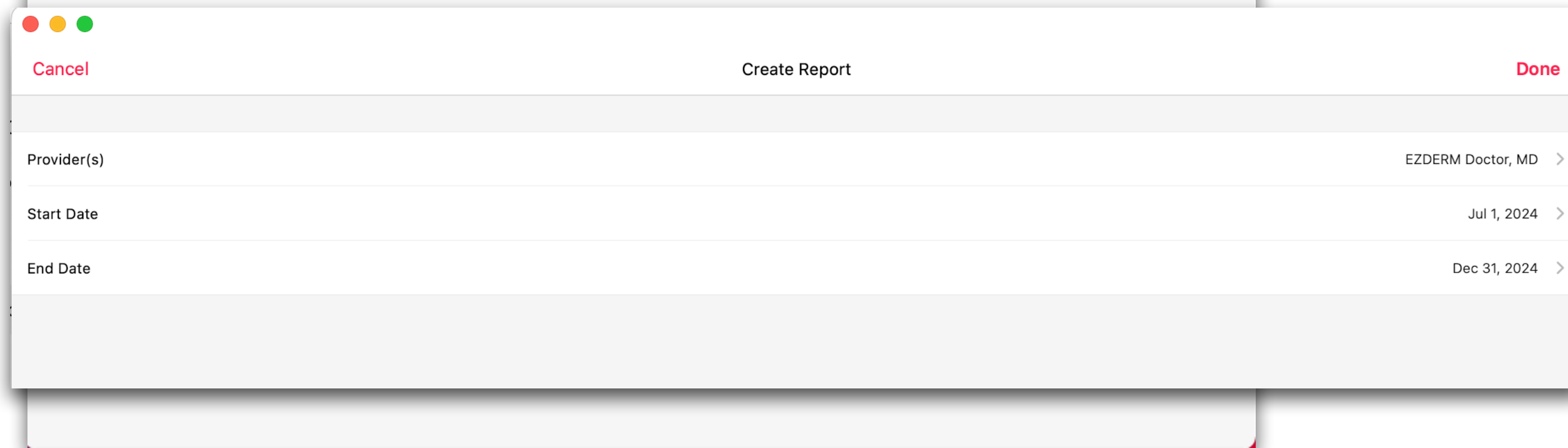
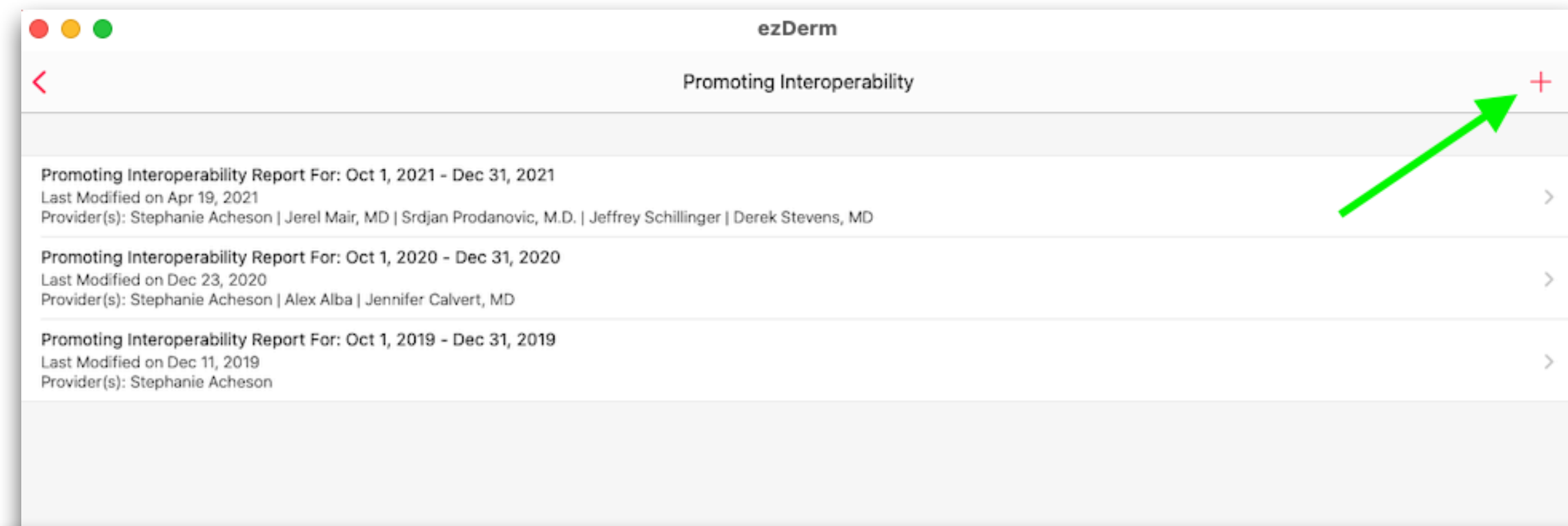
**Measure 487:** Treatment plan available under Public Plans that contains questions you or your clinical staff can verbally review and document the patient's responses.



# 4

## Promoting Interoperability Report

# How to Generate PI Report



Select multiple providers

180 Day Reporting Period

# Sample Report



Toggle on if SRA completed.  
Doesn't have to be within the 180 days, just within reporting year.

Toggle on if agree with statement listed

Cancel Promoting Interoperability Report For: Jan 1, 2023 - Apr 30, 2023 Done

Actions to Limit or Restrict the Compatibility or Interoperability of CEHRT ⓘ

\*Answer this measure as "YES" if the following statement is true for this provider:  
This provider didn't knowingly and willfully take action (such as to disable functionality) to limit or restrict the compatibility or interoperability of CEHRT.

PROTECT PATIENT HEALTH INFORMATION

Security Risk Analysis ⓘ

High Priority Practices Guide of the Safety Assurance Factors for EHR Resilience (SAFER) Guides. ⓘ

\*Answer this measure as "YES" if the following statement is true for this provider:  
This provider conducted the annual self-assessment and completed the practice worksheets in the High Priority Practices Guide during the calendar year in which the performance period occurs.

E-PRESCRIBING	NUMERATOR	DENOMINATOR	POINTS	PERFORMANCE
e-Prescribing	0	8	0/10 <span>ⓘ</span>	0% >
*Section contains a measure which is eligible for an exclusion.				
PROVIDER TO PATIENT EXCHANGE	NUMERATOR	DENOMINATOR	POINTS	PERFORMANCE
Provide Patients Electronic Access to Their Health Information	5	9	22/40 <span>ⓘ</span>	56% >

Need to be in motion on the SAFER guides to attest "Yes". No longer will accept Yes or No.



# Sample Report



HEALTH INFORMATION EXCHANGE	NUMERATOR	DENOMINATOR	POINTS	PERFORMANCE
Electronic Referral Loops By Sending Health Information	0	0	0/20	0%
Support Electronic Referral Loops by Receiving and Reconciling Health Information	0	0	0/20	0%
*Section contains a measure which is eligible for an exclusion.				
Health Information Bi-Directional Exchange				0%
*Answer this measure as "YES" if each of the following statements are true for this provider: (1) Participates in an HIE in order to enable secure, bi-directional exchange to occur for every patient encounter, transition or referral, and record stored or maintained in the EHR during the performance period in accordance with applicable law and policy. (2) The HIE that this provider participates in is capable of exchanging information across a broad network of unaffiliated exchange partners including those using disparate EHRs, and does not engage in exclusionary behavior when determining exchange partners. (3) This provider use the functions of CEHRT to support bi-directional exchange with an HIE.				
PUBLIC HEALTH AND CLINICAL DATA EXCHANGE				
Immunization Registry Reporting			Incomplete	Incomplete
Electronic Case Reporting			Incomplete	Incomplete
*Section contains a measure which is eligible for an exclusion.				
PI POINTS				0
PI SCORE				0

Swipe from R to L to exclude

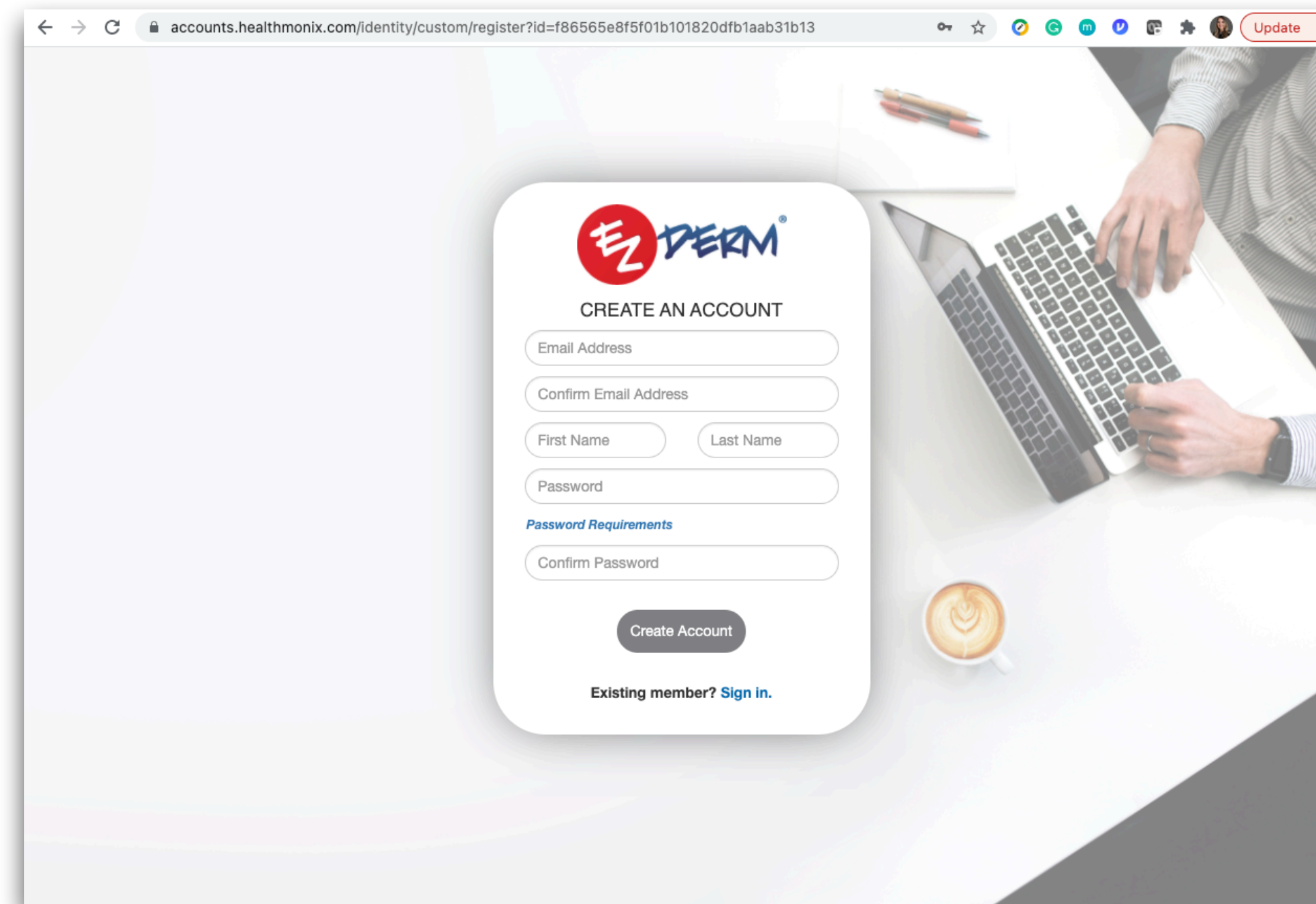
Tap each registry to indicate if you're in engagement or excluded

Download Report and enter values into Healthmonix at end of the year

# 5

## Bridge to Healthmonix

# Register & Purchase MIPSpro with Healthmonix



accounts.healthmonix.com/identity/custom/register?id=f86565e8f5f01b101820dfb1aab31b13

**EZDERM**

CREATE AN ACCOUNT

Email Address

Confirm Email Address

First Name  Last Name

Password

**Password Requirements**

Confirm Password

Create Account

Existing member? [Sign in.](#)

## HEALTHMONIX SALES CONTACT

Maura Flaherty

MIPS Specialist

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(215)-330-5253

<https://ezderm.mips.healthmonix.com/>

Bridge to HMX



Email [techsupport@ezderm.com](mailto:techsupport@ezderm.com) once you're registered with Healthmonix to request the Quality data bridge (won't be completed until end of year, but doing this now will put your practice at top of list once available)

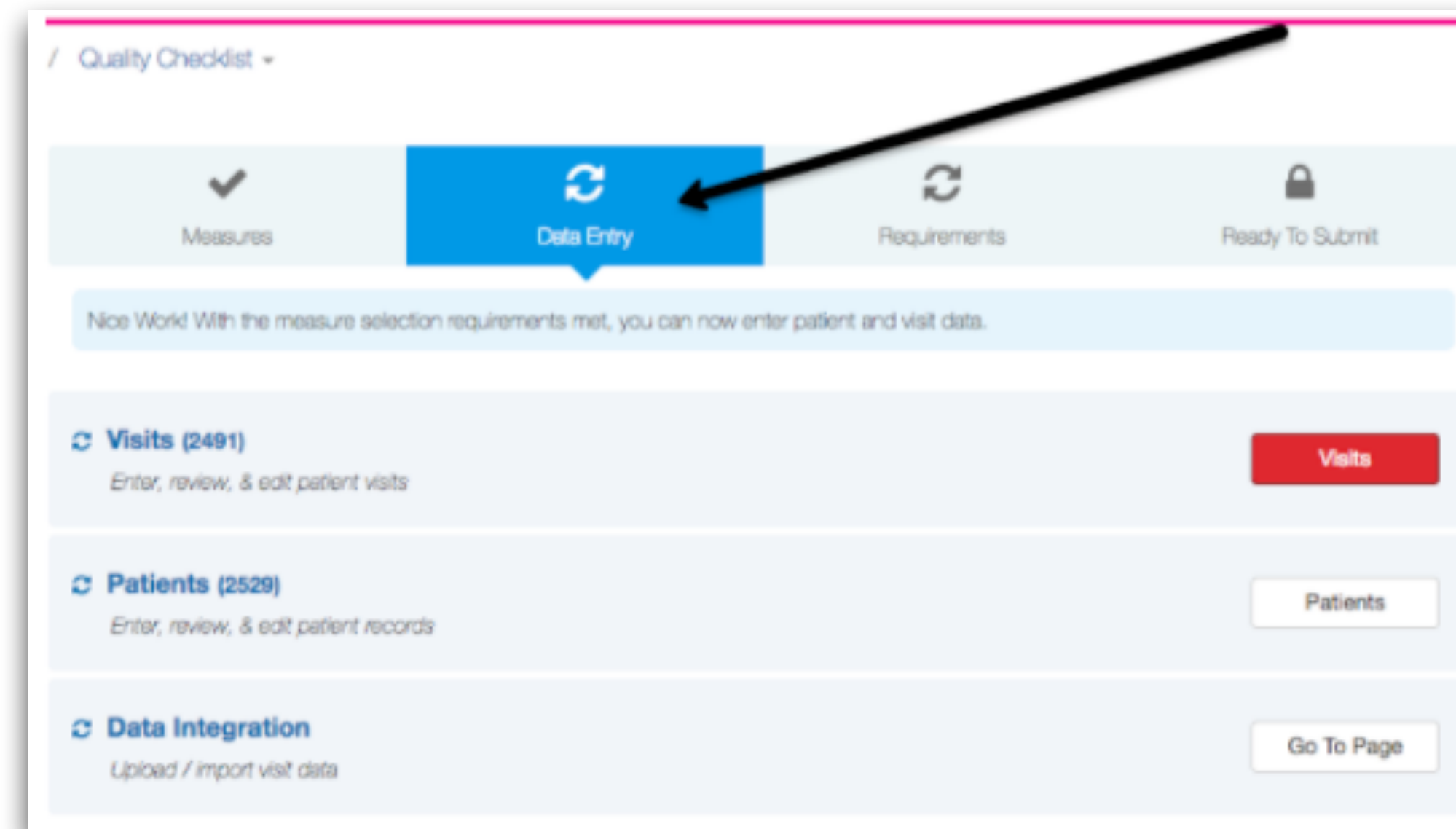
**Provide the following information:**

- Is the Practice reporting as a **group or individual**
- Individual NPI# for each provider reporting

## Bridge to HMX



**TIP:** Make sure Data Entry section is unlocked in HMX dashboard before requesting bridge (will speed up the process)



Detailed instructions: [Healthmonix Registration and Quality Bridge Activation](#)

