



Regulatory Success Through Partnership

Quality Programs (QP) Subscription

A dedicated team of QP Specialists

The Quality Programs (QP) team provides tailored services to help your practice integrate the most efficient solutions for regulatory reporting and achieving measurable success. The QP Team consists of a group of dedicated specialists with backgrounds in public policy, public health, health administration, and more. With a QP subscription, you will be assigned a specialist that is focused on your practice's needs.*

Benefit from handcrafted guidance on Centers for Medicare & Medicaid Services (CMS) reporting tracks (MIPS, APMs, MVPs), best practices on submissions through the NexGen® HQM reporting module, and ongoing thought leadership on the latest regulatory updates from CMS via 1:1 check-in calls, a monthly newsletter, and recorded webinars.

Quality Program Success

From registration to submission

- ✓ Dedicated QP Services Specialist
- ✓ 1-on-1 Guidance via Check-in Calls
- ✓ Curriculum for All Four Categories of the Quality Payment Program
- ✓ Specialty Content - Rheumatology, Pulmonology, Cardiology
- ✓ Annual Feedback Review & Cost Category Analysis
- ✓ Monthly Newsletter
- ✓ Measure Selection Assistance
- ✓ Customized Reports
- ✓ Category Overview Webinars, Fact Sheets, and Workflow Recommendations
- ✓ MIPS Data Validation/Audit Assistance

GOALS OF THE PROGRAM

- Help your practice achieve measurable success
- Find efficient solutions for your reporting needs
- Become an extension of your practice's team

A QP subscription provides tailored services to help your practice find the most efficient solutions for regulatory reporting and achieving measurable success.

*All QP specialists are trained and certified by NextGen Healthcare

SERVICE	QP LITE	QP+	QP+ with CQM
Monthly 1:1 Check-in Call with a QP Specialist		✓	✓
Quarterly 1:1 Check-in Call with a QP Specialist	✓		✓
Full Access to QP Central <i>Includes overview webinars, factsheets, workflow recommendations, HQM Guides and more!</i>	✓	✓	✓
QP Webinars	✓	✓	✓
QP Newsletter	✓	✓	✓
HQM Training	✓	✓	✓
Quality Category <i>Overview, measure selection, practice-specific performance review</i>	✓	✓	✓
Promoting Interoperability Category <i>Overview, practice-specific performance review</i>	✓	✓	✓
Improvement Activities Category <i>Overview, measure selection, supporting documentation assistance</i>	✓	✓	✓
Cost Category <i>Overview, annual analysis of practice-specific cost data</i>		✓	✓
Measure Troubleshooting	✓	✓	✓
Submission Assistance through NextGen HQM	Self-Service Guide available*	✓	✓
Audit Assistance		✓	✓
Annual MIPS Feedback Report Download and Review		✓	✓
CQM Dashboard: Trend measure performance, benchmark against national performance			✓

*Services not included in QP Lite can be purchased at \$225/hour – please reach out to your Account Manager for a quote.

Hands-On MIPS Approach

- 1 **Analysis**
 - Personalized measure selection
 - Evaluation and goal setting
- 2 **Training**
 - Regulatory education
 - Workflow recommendations
- 3 **Outreach**
 - 1-on-1 check-in calls
 - Documentation templates
- 4 **Reporting**
 - Pre-submission review
 - Assisted submission to CMS*
- 5 **Monitor and Improve**
 - CQM Dashboard



Leverage NextGen Health Quality Measures (HQM) module

- Seamlessly report the Quality, Promoting Interoperability, and Improvement Activities categories of MIPS from a single online portal directly to CMS
- Run reports at the group, provider, and patient level
- Get detailed reports for all qualifying visits for each measure
 - Patient level reports provide a list of all qualifying encounters and which visits passed or failed
- Compose custom reports based on time period, payer, patient sex, ethnicity, race, age, and other categories

HOME ADMIN ▾ REPORTS ▾ CONFIG ▾

Quality Program Report

1 of 2

Customer: Practice A

Practice Patient Report

Program Name : 2024 eCQM Group						
Measure StartDate: 1/1/2024		Measure EndDate: 12/31/2024		Evaluation Date : 3/12/2024		
Person Number	GPRO_TIN	Alias	Measure	Patient Status	Practice	Encounter No
<input type="checkbox"/> TIN - 123456786						
<input type="checkbox"/> CMS 68v13 Documentation of Current Medications in the Medical Record Denominator - 6209, Performance Met - 5266, Denominator Exception - 0, Treatment Opportunity - 943, Denominator Exclusion - 0, Numerator Exclusion - 0						
111	123456789	CMS 68v13 Documentation of Current Medications in the Medical Record	CMS 68v13 Documentation of Current Medications in the Medical Record	Performance Met	Practice A	34567
222	123456789	CMS 68v13 Documentation of Current Medications in the	CMS 68v13 Documentation of Current	Treatment Opportunity	Practice A	98765

*QP Plus only. There will be Self-Service Guides available for for QP Lite.

Check-ins and analysis

Notes	Measure ID	Performance Score	Decile	Numerator	Denominator	Topped out/Capped at	Measure Name
Top 6	eCOM 138	98.97	10	96	97		Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
Top 6	eCOM 139	99.73	10	734	736		Falls: Screening for Future Fall Risk
Top 6	eCOM 165	84.53	10	388	473		Controlling High Blood Pressure
Top 6 Run Treatment Opportunity Report	MIPS CQM 47	99.47	8	754	758		Advance Care Plan
Top 6 Run Treatment Opportunity Report	MIPS CQM 48	99.81	8	539	540		Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older
Top 6	MIPS CQM 178	100.00	7	299	299	Yes	Rheumatoid Arthritis (RA): Functional Status Assessment
Top 6 Measures		53					
Small Practice Bonus		6					
Projected Quality Score		59	out of 60				

- Access predetermined topics based on curriculum, lessons learned, and knowledge gained from other practices like yours
- Get a personalized review of reports and performance

End-of-year guidance

Program Submissions View, Download and Approve Submission Files

2023 Improvement Activities Group
Open for Submission Until Mar 31, 2024 8:00 pm EST
1 FILES | 1 APPROVED
View Files | QPP | [Download]

2023 Medicare PI GROUP
Open for Submission Until Mar 31, 2024 8:00 pm EST
1 FILES | 1 APPROVED
View Files | QPP | [Download]

2023 Quality Group
Open for Submission Until Mar 31, 2024 8:00 pm EST
0 FILES | 0 APPROVED
View Files | QPP | CAT III

Pre-submission review

- Final check of measures
- Audit documentation suggestions

Submission assistance

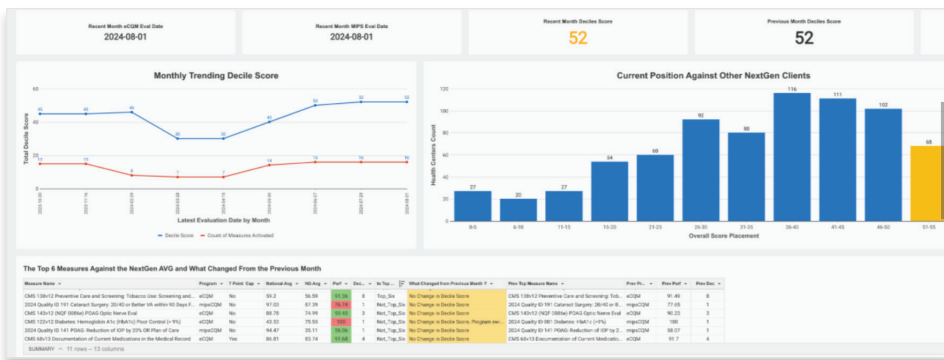
- Measure configuration
- Submission verification and tracking

On-going assistance

Receive assistance with any MIPS-related questions

- Whether that's specific workflow questions or providing clarification on regulatory changes and updates

Continuously monitor performance of MIPS and eCQM measures



How you can get started today

Upon subscribing, your QP Specialist will jump right into current reporting requirements and determine what measures would be best for your practice to track and submit. This may include reviewing workflows and troubleshooting measure calculations or issues. We'll provide guidance on data submission and finally, we'll ensure you're up to date on regulatory changes!



BY THE NUMBERS

\$6+ MM

Est. Incentives Earned

Expected incentives for clients having completed MIPS submission

\$20+ MM

Est. Penalties Avoided

Penalties avoided from MIPS submission

TOP VENDORS

Ranking among “vendors most capable of assisting clients to achieve incentives bonus”.¹

AVERAGE 2022 MIPS SCORE

90.01

QP Services Clients

AVERAGE 2022 PAYMENT ADJUSTMENT

4.00%

QP Services Clients

BETTER STARTS HERE.

Call us at **855-510-6398** or email results@nextgen.com

¹ According to Coker Group Consulting, 2022 Performance Year