

# The Quality Payment Program and Antibiotic Stewardship

How the Antibiotic Stewardship program can help you meet the 2017 Quality Payment Program Requirements. This document reflects three of the Quality Payment Program Performance Categories, Quality , Improvement Activities, and Advancing Care Information - and how they relate to Antibiotic Stewardship.

## Quality Measures

Measure Name	Measure Description	Quality ID	NQS Domain	Measure Type	High Priority Measure	Data Submission Method	Specialty
Adult Sinusitis: Antibiotic Prescribed for Acute Sinusitis (Overuse)	Percentage of patients, aged 18 years and older, with a diagnosis of acute sinusitis who were prescribed an antibiotic within 10 days after onset of symptoms	331	Efficiency and Cost Reduction	Process	Yes	Registry	Allergy/Immunology, Internal Medicine, Otolaryngology, General Practice/Family Medicine
Adult Sinusitis: Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use)	Percentage of patients aged 18 years and older with a diagnosis of acute bacterial sinusitis that were prescribed amoxicillin, with or without clavulanate, as a first line antibiotic at the time of diagnosis	332	Efficiency and Cost Reduction	Process	Yes	Registry	Allergy/Immunology, Internal Medicine, Otolaryngology, General Practice/Family Medicine
Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy-Avoidance of Inappropriate Use	Percentage of patients aged 2 years and older with a diagnosis of AOE who were not prescribed systemic antimicrobial therapy	93	Efficiency and Cost Reduction	Process	Yes	Claims, Registry	Emergency Medicine, Otolaryngology, General Practice/Family Medicine, Pediatrics
Appropriate Testing for Children with Pharyngitis	Percentage of children 3-18 years of age who were diagnosed with pharyngitis, ordered an antibiotic and received a group A streptococcus (strep) test for the episode	66	Efficiency and Cost Reduction	Process	Yes	EHR, Registry	Emergency Medicine, General Practice/Family Medicine, Pediatrics
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	The percentage of adults 18-64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription	116	Efficiency and Cost Reduction	Process	Yes	Registry	Internal Medicine, Emergency Medicine, General Practice/Family medicine
Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Percentage of children 3 months-18 years of age who were diagnosed with upper respiratory infection (URI) and were not dispensed an antibiotic prescription on or three days after the episode	65	Efficiency and Cost Reduction	Process	Yes	EHR, Registry	General Practice/Family Medicine, Pediatrics
Chlamydia Screening and Follow Up	The percentage of female adolescents 16 years of age who had a chlamydia screening test with proper follow-up during the measurement period	447	Community/ Population Health	Process	No	Registry	Obstetrics/Gynecology
Acute Otitis Externa (AOE): Topical Therapy	Percentage of patients aged 2 years and older with a diagnosis of AOE who were prescribed topical preparations	91	Effective Clinical Care	Process	Yes	Claims, Registry	Emergency Medicine, Otolaryngology, Pediatrics
Perioperative Care: Selection of Prophylactic Antibiotic-First OR Second Generation Cephalosporin	Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for a first OR second generation cephalosporin prophylactic antibiotic who had an order for a first OR second generation cephalosporin for antimicrobial prophylaxis	21	Patient Safety	Process	Yes	Claims, Registry	General Surgery, Orthopedic Surgery, Otolaryngology, Thoracic Surgery, Plastic Surgery
Appropriate Treatment of Methicillin-Sensitive Staphylococcus Aureus (MSSA) Bacteremia	Percentage of patients with sepsis due to MSSA bacteremia who received beta-lactam antibiotic (e.g. nafcillin, oxacillin or cefazolin) as definitive therapy	407	Effective Clinical Care	Process	Yes	Claims, Registry	Hospitalists

## Improvement Activities

Improvement Activity	Activity Description	Activity ID	Sub Category	Activity Weight
Use of toolsets or other resources to close healthcare disparities across communities	Take steps to improve healthcare disparities, such as Population Health Toolkit or other resources identified by CMS, the Learning and Action Network, Quality Innovation Network, or National Coordinating Center. Refer to the local Quality Improvement Organization (QIO) for additional steps to take for improving health status of communities as there are many steps to select from for satisfying this activity. QIOs work under the direction of CMS to assist eligible clinicians and groups with quality improvement, and review quality concerns for the protection of beneficiaries and the Medicare Trust Fund.	IA_PM_6	Population Management	<b>Medium</b>
Implementation of formal quality improvement methods, practice changes or other practice improvement processes	Adopt a formal model for quality improvement and create a culture in which all staff actively participates in improvement activities that could include one or more of the following: Train all staff in quality improvement methods; Integrate practice change/quality improvement into staff duties; Engage all staff in identifying and testing practices changes; Designate regular team meetings to review data and plan improvement cycles; Promote transparency and accelerate improvement by sharing practice level and panel level quality of care, patient experience and utilization data with staff; and/or Promote transparency and engage patients and families by sharing practice level quality of care, patient experience and utilization data with patients and families.	IA_PSPA_19	Patient Safety & Practice Assessment	<b>Medium</b>
Measurement and improvement at the practice and panel level	Measure and improve quality at the practice and panel level that could include one or more of the following: Regularly review measures of quality, utilization, patient satisfaction and other measures that may be useful at the practice level and at the level of the care team or MIPS eligible clinician or group(panel); and/or use relevant data sources to create benchmarks and goals for performance at the practice level and panel level.	IA_PSPA_18	Patient Safety & Practice Assessment	<b>Medium</b>
Use of decision support and standardized treatment protocols	Use decision support and standardized treatment protocols to manage workflow in the team to meet patient needs.	IA_PSPA_16	Patient Safety & Practice Assessment	<b>Medium</b>
Implementation of antibiotic stewardship program	Implementation of an antibiotic stewardship program that measures the appropriate use of antibiotics for several different conditions (URI Rx in children, diagnosis of pharyngitis, Bronchitis Rx in adults) according to clinical guidelines for diagnostics and therapeutics	IA_PSPA_15	Patient Safety & Practice Assessment	<b>Medium</b>

**Activity Weights:**

- Medium Weight = 10 Points
- High Weight = 20 Points

Clinicians must choose from 1 of the following combinations:

- 2 high-weighted activities
- 1 high-weighted activity and 2 medium-weighted activities
- At least 4 medium-weighted activities.

**Special Consideration Activity Weights:**

- Medium Weight = 20 Points
- High Weight = 40 Points

Clinicians must choose from 1 of the following combinations:

- 1 high-weighted activity
- 2 medium-weighted activity

\* Special considerations are applied to:

Practices with 15 or fewer clinicians,  
Clinicians in Rural or geographic HPSA, Non-Patient facing clinicians

## Advancing Care Information Measures

Advancing Care Information Performance Category is broken into three sections: Base Score, Performance Score, and Bonus Score. You are REQUIRED to fulfil all of the Base Measures in order to receive any points in this category.

Advancing Care Information Measures and Scores	2017 Advancing Care Information Transition Measures and Scores
<p style="text-align: center;"><b><u>Required Measures for 50% Base Score</u></b></p> <ul style="list-style-type: none"> <li>Security Risk Analysis</li> <li>e-Prescribing</li> <li>Provide Patient Access*</li> <li>Send a Summary of Care*</li> <li>Request/Accept Summary Care*</li> </ul>	<p style="text-align: center;"><b><u>Required Measures for 50% Base Score</u></b></p> <ul style="list-style-type: none"> <li>Security Risk Analysis</li> <li>e-Prescribing</li> <li>Provide Patient Access*</li> <li>Health Information Exchange*</li> </ul>

\*Note that these measures are also included as performance score measures and will allow a clinician to earn a score that contributes to the performance score category

<p style="text-align: center;"><b><u>Measures for Performance Score</u></b></p> <ul style="list-style-type: none"> <li>Provide Patient Access* ----- Up to 10%</li> <li>Send a Summary of Care* ----- Up to 10%</li> <li>Request/Accept Summary of Care* -- Up to 10%</li> <li><b>Patient Specific Education</b> ----- <b>Up to 10%</b></li> <li>View, Download or Transmit (VDT) --- Up to 10%</li> <li>Secure Messaging ----- Up to 10%</li> <li>Patient-Generated Health Data ----- Up to 10%</li> <li>Clinical Information Reconciliation --- Up to 10%</li> <li>Immunization Registry Reporting ----- 0 or 10%</li> </ul>	<p style="text-align: center;"><b><u>Measures for Performance Score</u></b></p> <ul style="list-style-type: none"> <li>Provide Patient Access* ----- Up to 20%</li> <li>Health Information Exchange* ----- Up to 20%</li> <li>View, Download, or Transmit (VDT) --- Up to 10%</li> <li><b>Patient-Specific Education</b> ----- <b>Up to 10%</b></li> <li>Secure Messaging ----- Up to 10%</li> <li>Medication Reconciliation ----- Up to 10%</li> <li>Immunization Registry Reporting ----- 0 or 10%</li> </ul>
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**Patient Specific Education and Antibiotic Stewardship:** The MIPS eligible clinician must use clinically relevant information from certified EHR technology to identify patient-specific educational resources and provide electronic access to those materials to at least one unique patient seen by the MIPS eligible clinician.

<p style="text-align: center;"><b><u>Requirements for Bonus Score</u></b></p> <ul style="list-style-type: none"> <li>Syndromic Surveillance Reporting</li> <li>Electronic Case Reporting</li> <li>Public Health Registry Reporting</li> <li>Clinical Data Registry Reporting</li> </ul> <div style="text-align: right; margin-left: 20px;"> <p>} 5%</p> <p>} 10%</p> </div>	<p style="text-align: center;"><b><u>Requirements for Bonus Score</u></b></p> <ul style="list-style-type: none"> <li>Syndromic Surveillance Reporting</li> <li>Specialized Registry Reporting</li> </ul> <div style="text-align: right; margin-left: 20px;"> <p>} 5%</p> <p>} 10%</p> </div> <ul style="list-style-type: none"> <li>Report certain Improvement Activities using CEHRT</li> </ul>
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Use of decision support and standardized treatment protocols	Use decision support and standardized treatment protocols to manage workflow in the team to meet patient needs.	IA_PSPA_16	Patient Safety & Practice Assessment	<b>Medium</b>
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By implementing an Antibiotic Stewardship Program you can attest that you are performing improvement activity IA\_PSPA\_16. This improvement activity qualifies for the bonus score in the Advancing Care Information Performance Category.