OEIS NATIONAL REGISTRY

Frequently Asked Questions-FAQs

What is the OEIS National Registry?

It is an open, inclusive National Registry that was formed to collect and report data for all office and outpatient based interventions involving a fluoroscopic suite. It is originated and operated through the Outpatient Endovascular and Interventional Society (OEIS) which is a nonprofit, multispecialty, medical society.

Why should I join a National Registry? Demonstrating your clinical outcomes in certified Registry is increasingly important and adds to a national database. There is a need for data collection and reporting in a unified, time and cost-efficient format with established outcomes measures designed for the unique needs of office and outpatient interventions and satisfying the MIPS Quality Reporting requirements under MACRA.

1. **What are some of the features?**
    - Data fields tailored for office and outpatient same day interventions
    - Data Essentials –First phase of roll out with an efficient, intuitive, user-friendly entry of core elements of your PVI
    - Data Enhanced version to be rolled out as an option for sites to participate in collaborative or industry sponsored research

- Dashboard and benchmarking your site or a grouping of sites (upon request) to national database
- Cloud-based Electronic Data Capture allows for data entry across multiple devices with internet access
- QCDR – Qualified Clinical Data Registry Status*
- Incorporates CMS certified Quality Measures
- Can select 6 of 10 Quality Measures to satisfy and report MIPS Quality of Care Score (60% of MIPS Total Score to start reporting in 2017)*
- Plan for dashboard and benchmarking to assist in your CPIA (Clinical Practice Improvement Activities) which may contribute to an additional 15% of your MIPS Score)*
- Sites -- Individual labs are contracted with OEIS (based on the TIN #)
- Global IRB -- Allows for automatic patient consent
- De-identified data reporting for patient, operator and site privacy
- Focus on outpatient and same day interventions, but all sites of service can enroll patients- Office, ASC, Hospital Outpatient and Hospital Inpatient

2. **How do I sign up?** Visit the OEIS website at oeisociety.com and go to: **OEIS National Registry >> Become an OEIS Registry Participant Site**

   There you will see detailed instructions for How to Enroll as an OEIS Registry Participant Site.

   - **It is <u>very important</u> that you correctly identify the NPI #'s for each physician entering data into the Registry and the TIN # (Tax Id Number) for the practice/entity that**

you will want CMS to give you credit for your Quality Score. It will be <u>your</u> responsibility to record these numbers accurately. CMS cannot process the reported Quality Measures if these numbers are inaccurately posted.

3. **How do my partners or other physicians in my lab enter their data into the Registry?** ALL of the physicians (interventionists) that you wish to add and submit data into the Registry **must fill out** the one page form provided on our website under the Registry tab. No new contracts need to be signed if they are members of the lab with a signed membership and business associate agreement. Please ensure the accuracy of the lab's info on our application form and that all members of your lab are signed up similarly. We also have added a "Business Affiliation" entry to a grouping of labs who have a common business association that can be reported as a cohort data set.

4. **Is a special dedicated computer or database access required?** No. All that's required is internet access to submit data. Therefore, entry can start in the pre-procedure location and continue in the cath lab and finished in the recovery unit. Any IPad, laptop or desktop computer with internet access can be used.

5. **Is there training available?** Yes. An approx. 15 min. training webinar has been produced and is ready for you to use once you have signed up as a Registry subscriber. The webinar will tour you through the entry data fields and instruct you and staff how to enter your data along with suggestions and requirements for the Quality Measures. Even if you don't choose ultimately to submit the OEIS National Registry Quality Measures to CMS (6 are required), we <u>strongly</u> encourage you to input these data into the Registry. There

will be a simple online training manual for future reference always available after the initial online training.

6. **How do I get started?** To protect the integrity of the Registry, only after you complete the training, will access be granted. At that point you can enter your cases. Any persons you designate to have input into the Registry (nurses, techs, fellows, etc) will have to individually complete the short training (approx. 15 mins) and then will be assigned an individual sign on access to the Registry. This will allow an audit trail for any entries into the database.

7. **What if I don't have all the data available on a case to enter into the Registry?** There are specific fields that will be required to enter before the case can be completed and submitted into the Registry, however, we recognize that there will be data missing from the record or not obtainable. Every opportunity should be made for entering a completed record, but the Registry will have some flexibility. Of course, the more correct and complete the data that is supplied, the more powerful and meaningful the database and information that we can return back to you.

8. **Who owns the data?** All centers will have full access to their own data. OEIS will always maintain a copy of the data and use it in an aggregated form for research purposes at their discretion. The data will always be de-identified in publications.

9. **Can I publish my data or a group of labs' data independently?** Publishing your data or a group of labs' data is possible but will require written consent from the OEIS National Registry Research Committee.

10. **Is my and my lab's data private? Who will see these data?** All data entries are patient de identified. All of your cases and outcomes are private and cannot be reviewed by others outside of the OEIS Registry. All benchmark reporting will be against aggregated national or regional datasets, so individual labs will not be identifiable. The OEIS National Registry Committee will be able to have discretionary access for research or other purposes. Any release of aggregated data will be at the sole discretion of the OEIS National Registry.

11. **How will I see my data?** Dashboards will be created and sent to your lab's designee on a periodic basis beginning in approximately March 2017 or when there are enough datapoints to perform a meaningful benchmark. You will receive a regular **dashboard** of all your lab's data which will be provided in a .csv format, compatible with Excel spreadsheets. This will enable you to query your database as you choose and provide internal Quality Improvement. You will also have your lab's data benchmarked to the national average in the Registry. The more sites that participate the greater the power of the data....so spread the word! We plan on rolling out our first benchmarks to you as early as March.

12. **Can we manipulate our data when it's reported back to me?** Yes. An advantage of participating in the OEIS National Registry is that all your lab's data will be provided in a .csv format which is compatible with Excel spreadsheets. This will enable you to extract raw data for each doctor in your lab, query your database as you choose and provide internal Quality Improvement.

13. **I am a part of a group of labs with a common business affiliation. Can we obtain an aggregated dataset for our internal QI reviews and analyses?** Yes. Please ensure the

accuracy of the lab's info on our application form and that all members of your lab are signed up similarly. We also have added a "Business Affiliation" entry to a grouping of labs who have a common business association that can be reported as a cohort data set. You will receive a regular **dashboard** of all your lab's data which will be provided in a .csv format, compatible with Excel spreadsheets. This will enable you to query your database as you choose and provide internal Quality Improvement. There may be an additional fee to program and support specific data reporting needs for your group.

14. **Is there an auditing process?** Yes. CMS requires an audit process of the database to verify accuracy and integrity (and to grant the QCDR status). In that regard, we have submitted a routine random audit plan. Once accepted by CMS, we will notify you of the details. The plan would require you to randomly submit a few charts and studies (that we will request) as source documents for an independent review. Independent auditing also ensures the highest quality standards for our Registry.

15. **What Quality Measures are offered?** See the oeisociety.org website and click under the Registry tab to view the Quality Measures in detail. There are 10 Quality Measures which include emergency transfer rates, the presence of a noninvasive diagnostic study prior to performing PVI on a claudicant or CLI patient, antiplatelet and anti-lipid med use in a PVI pt, tobacco cessation counseling, screening for HTN in a PVI pt, optimal vascular care for the PVI pt (combination of antiplt, lipid meds, tob cessation), flu shot and pneumovax performance documentation.

16. **Does CMS recognize these Quality Measures for MACRA/MIPS?** Yes. CMS has approved all 10 of the OEIS National

Registry Quality Measures and recognizes them for the Quality Score reporting under MIPS/MACRA criteria. (The Measures were submitted and are currently under review by CMS as of Jan 31, 2017 with impending approval expected)

17. **How and when do I choose my Quality Measures to submit to CMS?** The QM's data fields are labeled in our Registry so there should be easy entry identification to ensure accuracy and completeness. Please review the QM's we have posted on the OEIS National Registry Overview Page of the website.

    - There are 10 QM's and we suggest that you input data on **all** of them even if you ultimately choose not to report them for your MIPS/MACRA score. At the end of 2017, we will contact you to have you select which of the minimum 6 Quality Measures you desire to have the OEIS National Registry submit on your behalf*. There will be a separate one time nominal fee for each of your physician's individual submissions to CMS (by NPI and TIN#s).

18. **What are my and my lab's responsibilities for entering data for Quality Measures?** It's imperative that the TIN and NPI numbers are accurate for the physicians performing the procedures as this will be the identification (and the only way CMS will key in the QM's). It is <u>your</u> responsibility to ensure the accuracy of your TIN and NPI number entries. The Quality Measures are calculated with numerator and denominators that are then reported to CMS on your behalf. You are responsible for the accuracy and of these data entries on which CMS will then provide your quality score*

19. **Can I report Quality Measures from different sources?** No. CMS, as the regulations exist now, will only receive inputs from a

single source for the Quality Measure portion of the Quality Score in the MIPS program (MACRA)*. For example, you cannot send CMS two different registry submissions (sources) for the Quality Measures. Even if you don't choose ultimately to submit the OEIS National Registry Quality Measures to CMS (only 6 are required), we strongly encourage you to input these data into the Registry. You can always decline (by the end of the year) to use the OEIS National Registry inputs for your submission, but the data obtained will be helpful for the overall value of the Registry.

20. **What other Registry modules are planned?** The Peripheral Vascular Intervention (PVI) module is the first launched in Jan 2017. There are plans to roll out Venous, Cardiac, AV Access, Other Peripheral Vascular Interventions, and Nonvascular Interventions (Rad. Onc.) in the future. The OEIS National Registry is open-ended by design and will expand and grow as new procedures are added in the future.

21. **What is the current fee?** The cost of Registry participation/subscription is $175/month per individual lab for OEIS Members. The monthly fees are fixed regardless of the number of physician/providers. The fee is $250/month per individual lab for all others (OEIS nonmembers), therefore there is a substantial savings with OEIS Membership. OEIS Membership can be in the Active or Associate Member categories. Monthly fees are charged to the lab and are the same regardless of the number of physician/providers who are subscribers/participants in the Registry.

22. **Are there initiation costs? What are the billing options?** No, there are no initiation or start up fees. Billing will be on a monthly basis unless termination occurs in the Registry on a written basis per the Business Agreement**.** Payments can be made

electronically through our secure portal (PREFERRED FORM OF PAYMENT). Payments can also be made by check (please remit payment to the OEIS office see below).

23. **I have an office interventional suite/lab but can I also enter my hospital or ASC based procedures into the Registry?** Yes. All sites of service where you perform peripheral interventions can (and should be) entered once you are launched. That is, all of your cases done in the hospital inpatient, hospital outpatient, and ASC can also be entered, in addition to the office lab. These data will be very helpful for us to have our own comparative site of service database.

24. **I do not have an office lab. Can I participate in the OEIS National Registry?** Yes. The Registry was developed to provide outcomes-based data gathering for lower extremity PVI at any location of practice. All sites of service where you perform peripheral interventions can (and should be) entered once you are launched. That is, all of your cases done in the hospital inpatient, hospital outpatient, and ASC can be entered, in addition to an office lab. These data will be very helpful for us to have our own comparative site of service database.

25. **Is there a discount for being an OEIS member?** Yes. There is an overall cost savings to become an OEIS member that more than covers the cost of OEIS membership. Go to the OEIS website to join today oeisociety.org

26. **Is there a separate fee for reporting Quality Measures to CMS?** Yes. There will be a separate one time nominal fee for each of your physician's individual submissions to CMS (by NPI and TIN#s

that will cover the formatting costs necessary to deliver the data within the CMS requirements. **The fee will be determined.** You will elect to have the Registry submit the QMs for your physician(s) at the end of the year.

27. **Can I evaluate my Quality Measures performance before I submit to CMS?** Yes. You will receive a dashboard with your QM performance once there are enough meaningful data points so you can track your performance throughout the year. At the end of the year, you will select which (6 minimum) Quality Measures you wish the OEIS National Registry to submit on your behalf to CMS*.

28. **Do I need to obtain informed consent from any of my patients that I enter into the Registry?** No. The OEIS National Registry has obtained a global consent waiver from a centralized IRB on your behalf. All patients are de identified in the database. If you become a part of separate research trials that utilize the Registry's EDC, separate IRB consent may and likely will be necessary.

To view and sign up for the OEIS National Registry: Visit the OEIS Website at oeisociety.com **Click on the Registry tab**

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***Subject to changes in CMS Regulations and Guidelines**