

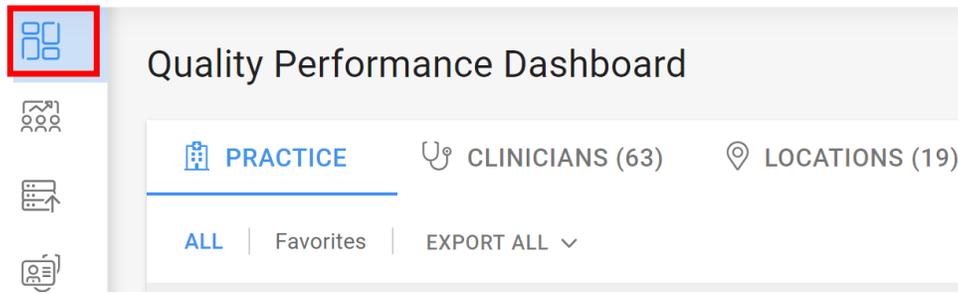
2021 Feedback Reports Training Guide

In order to attest to IA/PM_7: Use of QCDR for feedback reports that incorporate population health:

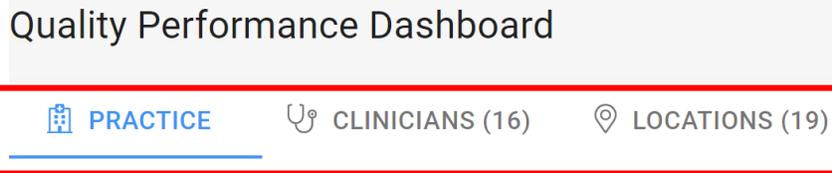
You can export feedback data reports per measure (or export all measure data) from your DataDerm Quality Performance dashboard and use benchmarking to track performance for a consecutive 90 calendar day period.

- We recommend pulling these reports at a minimum of 4 times per year.
- Ensure you discuss and document the data with relevant clinical/non-clinical staff, develop a plan for improvement, implement agreed upon changes, and note any progress.

- Upon logging in you will be brought to the 'Quality Performance Dashboard'.



- You can view measure performance scores either as a whole practice, individual clinician, or per location. You can select how you would like to view your performance scores by clicking on '**practice**', '**clinician**', or '**location**'.



- View your 2021 performance scores, ensure your dashboard is filtered for the correct dates you'd like to view. Click '**Change**' on the top right-hand side of your dashboard.

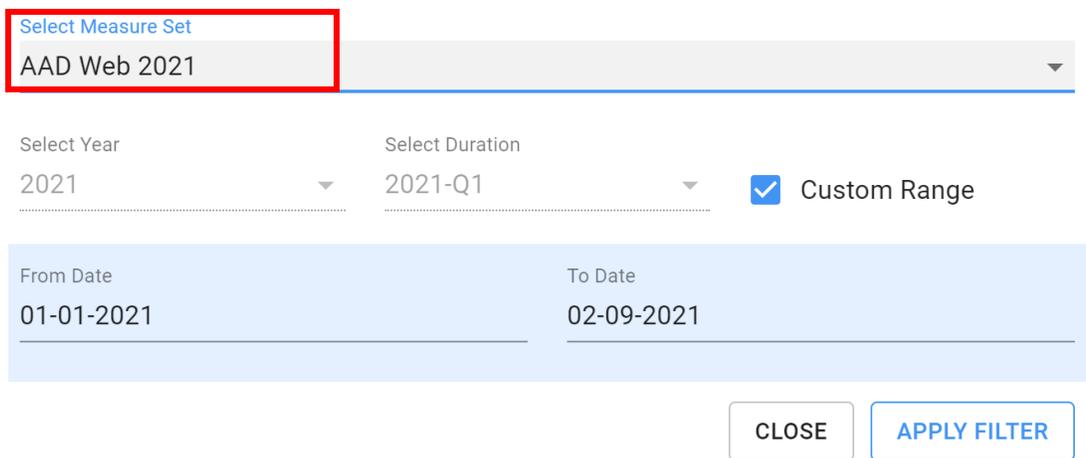


Updated on : Feb 15th, 2021 12:35 Data available till : Dec 31st, 2020

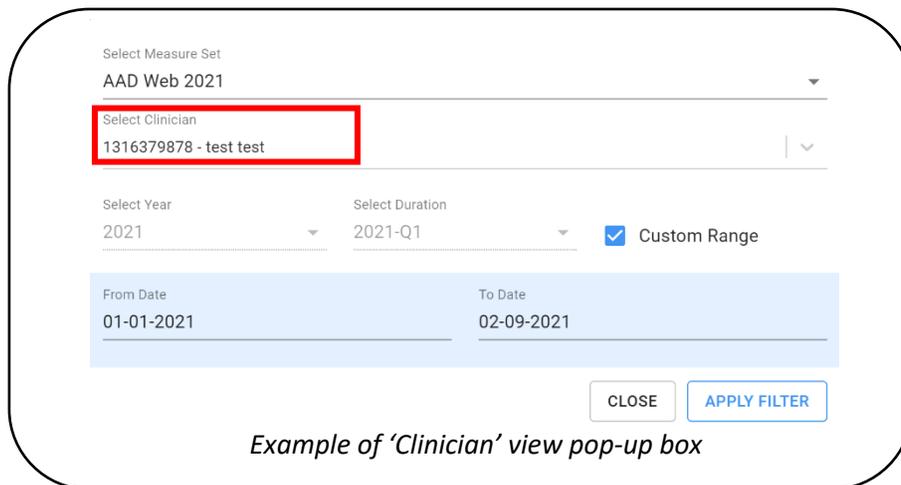
- The following pop-up will appear. You will need to select the measure set you'd like to view.
 - **For Manual Users:** Select 'AAD Web 2021'
 - This measure set will display all 2021 MIPS reportable measures.
 - **For EHR integrated Users:**
 - You can select either 'AAD Web 2021' to view 2021 MIPS reportable measures.

OR

 - '2021 AAD'--this will include all MIPS reportable measures as well as Non MIPS reportable measures (e.g. AAD 27, 28, etc. please note these measures cannot be used towards the quality category for MIPS reporting).



- If you previously selected 'Clinician' as you wanted to view measure performance scores for each individual, you will also need to select the clinician. Use the drop down and select the provider.



Example of 'Clinician' view pop-up box

- You can customize the date range by clicking on the ‘from date’ and ‘to date’.
 - The default will have the start date as 01-01-2021 and the end date will be the current date.
- Click ‘Apply Filter’.
- You can export feedback reports for each measure by clicking “export” next to the measure. Or you can export feedback report for your all measures by clicking “export all”.

EXPORT ALL ▾

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MEASURE	ACHIEVED PERFORMANCE	DC		EXPORT ▾	
Melanoma: Continuity of Care – Re... Measure Operational	<div style="display: flex; align-items: center;"> M i 📄 ↑ </div> <div style="text-align: center; margin-top: 5px;"> 97.94% 88.89 % 90.94% </div>	100 %			

- You can export the report as a PDF, CSV, or excel file. Choose one of the file types below.



- Your report will display. Keep these reports in your records in the case you are audited.


DataDerm™
Date : 02/19/2021

PRACTICE: 6 WEB DEMO PRACTICE

American Academy of Dermatology
Practice Executive Summary Quality Report

Report Type: Single Measure


DataDerm™
1.
Date : 02/19/2021

QPP 137: Melanoma: Continuity of Care - Recall System

Percentage of patients, regardless of age, with a current diagnosis of melanoma or a history of melanoma whose information was entered, at least once within a 12 month period, into a recall system that includes: • A target date for the next complete physical skin exam, AND • A process to follow up with patients who either did not make an appointment within the specified timeframe or who missed a scheduled appointment

2.

PERFORMANCE



3.

DURATION	DEN	DEN EXCL	DEN EXPT	NUM	NUM EXCL	MET	NOT MET	DC NOT MET	PR
01/01/2020 to 12/31/2020	115	0	7	96	0	96	12	0	88.89%

DEN: Denominator, DEN EXCL: Denominator Exclusion, DEN EXPT: Denominator Exception, NUM: Numerator, NUM EXCL: Numerator Exclusion, DC NOT MET: Data Completeness Not Met, PR: Performance Rate

1. ***Date feedback report was exported***
2. ***Performance scoring for the measure***
 - a. *Registry average*
 - b. *Your practice's/provider's achieved performance*
 - c. *CMS Benchmarks*
3. ***Measure patient count details***