FREQUENTLY ASKED QUESTIONS

ABOUT REGISTRIES

What is a registry?
A registry is a private, secure database that systematically integrates patient data from multiple electronic health record (EHR) systems and facilitates secondary uses of the data.

What is the name of AOA’s registry?
AOA MORE (Measures and Outcomes Registry for Eyecare) by Prometheus Research.

How and why was AOA MORE developed?
The registry project was initiated by the AOA Board of Trustees in response to the growing emphasis on quality reporting and measurements through registries as part of health care. We partnered with Prometheus Research because of their experience and reputation in developing high-quality registries.

What other specialties are currently using registries?
Most health care professions are already using registries or are in development to build a registry. Some examples of professions already using registries include: cardiology, oncology, osteopathy and ophthalmology.

Where can I find additional information about AOA MORE?
Visit aoa.org/MORE to find many valuable resources that will introduce you to the benefits of AOA MORE and explain how registries are being used in health care. Additional contact information is available at aoa.org/MORE should you not find all the answers you are looking for.
VALUES AND BENEFITS OF REGISTRY USE

What are the values and benefits of participating in AOA MORE?
A registry will allow you to participate in the new value-based payment system that Medicare and other insurers are using. Your participation in a registry is one of the requirements for maximum reimbursement rates by Medicare. This new Merit-based Incentive Payment System (MIPS) includes the Physician Quality Reporting System (PQRS), EHR Meaningful Use Program and other clinical quality improvement measures. AOA MORE will allow optometry, as a profession, to analyze clinical outcomes for the benefit of improving care over time. This can apply to glaucoma care, contact lens care, pediatric care and more.

AOA MORE will offer our profession the ability to track outcomes that can be analyzed and then improved by our profession. For example, amblyopia, diabetes and contact lens complications can all be studied by using a registry.

AOA MORE seamlessly integrates data from your EHR to allow PQRS reporting and benchmarking. Benchmarking is a privately viewed comparison of your care to the profession as a whole. For example, you can see your performance rates on PQRS measures or the number (%) of glaucoma patients you diagnose compared to national registry averages in optometry. You also can see the demographics of your patient population compared to the overall population numbers. AOA MORE will show many more levels of clinical and practice information with each new program release, and we'll welcome your feedback in what you would like to see moving forward.

The AOA has recognized the movement toward quality reporting and its value in health care. The AOA Board of Trustees believes its members deserve to be at the forefront of the new health care paradigm that is requiring registry use. AOA MORE is offered as a member benefit with no additional costs to members and for a fee to nonmembers.

Will AOA MORE help advocacy efforts for the profession?
Yes! Optometrists provide a high level of eye health and vision care. AOA MORE will allow the profession to advocate on behalf of optometry. For example, with data from AOA MORE, we can advocate to the media and public about patient demographics and quality eye exams we collectively perform. AOA MORE will allow optometry to advocate to insurance regulators, state legislatures and to the public about the services and value of our profession.

How does “benchmarking” work?
ODs will be able to access statistics derived from their own patient base by viewing the AOA MORE dashboard. AOA MORE is preprogrammed to provide statistics on many topics including: your patient demographics compared to national averages; your most common diagnosis codes compared to national averages; and your most common medicines prescribed compared to national averages. Only the national numbers are visible to AOA, your personal dashboard is private for your viewing only.
In addition, ODs can access benchmarks that compare your patients and care to the profession as a whole. Initially, AOA MORE will show you benchmarks of PQRS measures, glaucoma measures and more. For example, you will see the percentage of glaucoma patients and glaucoma suspects you have seen in the past 12 months. These measures will be expanded in the future with more information about existing measures and additional measures, with each new release.

**What dashboards are available?**
AOA MORE will offer different dashboards to view your patient information. The dashboards are updated weekly and are intended to strengthen your patient care by providing you with frequent comparison feedback and reporting status.

The PQRS dashboard provides your current year-to-date performance on PQRS measures. The Practice dashboard will allow you to view aggregate statistics about your patients (e.g., demographics, diagnoses, etc.) and the care provided to them. For example, you will be able to view the number and percentage of patients in the past 12 months with either glaucoma or suspected glaucoma, or the most common medications you prescribe compared to the national averages. AOA MORE will add a feature soon that allows you to easily see how many visual fields and OCTS were ordered for those glaucoma and suspected glaucoma patients compared to national averages. For each measure, you will be able to view these numbers and percentages both within and across practices (if you are in multiple settings) as well as for the registry as a whole.

**Is there a practice-level dashboard?**
No. The viewing of dashboards is private for each doctor. If you have multiple doctors in your practice, each doctor can only view their own patients.

**Will AOA MORE help with Maintenance of Certification?**
In the future, AOA MORE will offer a service that enables providers to view their progress toward Maintenance of Certification. We are planning these services to be included in a later release.

**How easy is it to use AOA MORE?**
AOA MORE is simple to use because it integrates with your EHR. AOA MORE does not fetch data directly from your EHR; your EHR will "push" information to AOA MORE on a weekly basis. This will provide the data you view in your dashboard and reports. There is no manual entry required for AOA MORE.
SIGN UP AND COST

How do I sign up for AOA MORE?
AOA members can go to aoa.org/MORE to sign up. You will need to log in to the AOA member section of aoa.org to sign up. If you are a nonmember, the aoa.org/MORE prompts will guide you through the sign-up and payment process.

What is the cost of AOA MORE?
AOA MORE is a member benefit to those who are current with their dues. Non-AOA members will pay $1,800 per year to use AOA MORE.

Are there prorated fees for non-AOA members?
No.

Who is eligible to use AOA MORE?
Any OD using a participating partner EHR can sign up for AOA MORE.

I am in partial practice; do I have to pay full price?
AOA MORE is an AOA member benefit. There are no additional costs for AOA members. The fee for nonmembers is $1,800 per year, regardless of the number of hours you work per week.

What if I'm in multiple practices or locations?
Your Individual National Provider Identification (NPI) number is what ties you to the registry, and it can be used with multiple practices. If you work in multiple practices, each practice will need to sign up for the registry and authorize its EHR vendor to release data to the registry. The ability to view your data across locations within a practice will be added to a future version of the registry.

I am an associate in my practice (not an owner); can I sign up for AOA MORE?
Yes, associates can sign up for AOA MORE, but they will need their practice owner to sign an agreement to authorize the associate OD to use AOA MORE. The owner is not required to use AOA MORE.

Do my patients need to sign anything to be in AOA MORE?
Patients do not need to sign additional forms, i.e., additional HIPAA disclosures. Because your EHR has coordinated with the registry to remove patient identifying information (patient name, etc.), additional forms are not necessary.
Is training required to use AOA MORE?
AOA MORE is set up to be intuitive. However, like most new things, there is some learning that needs to occur. At aoa.org/MORE you will find resources, including video education and screen shots to provide you with step-by-step instructions on the use of AOA MORE. Help is also available within AOA MORE. Most measures have “How is this measure calculated?” and “HELP” dashboard displays when you are logged into AOA MORE.

What do I do if my vendor is not listed?
AOA MORE will be expanding to add additional EHR vendors. If your vendor is not currently integrated, please still sign up. When you register for AOA MORE, the form will ask you what EHR you are using, and we will track the demand of additional vendors going forward. In addition, we encourage you to let your vendor know your preference to participate in the registry.

PQRS AND MEANINGFUL USE

What is PQRS?
PQRS is the Physician Quality Reporting System. Started by Medicare in 2007 as PQRI (Physician Quality Reporting Initiative), it requested reporting of codes on their claims to indicate that specific tests, counseling or documentation was performed during a patient encounter. For example, if you saw a patient with glaucoma and documented the cup to disc ratio, then you would report code: 2027F. This told Medicare that you properly documented the cup to disc ratio. While it may seem obvious that optometrists should document a cup to disc ratio on a glaucoma patient, evidence shows that many doctor specialists in many areas of medicine do not properly document their findings.

PQRS started as a voluntary program that gave doctors bonus money for complying. Now it gives financial penalties to doctors who do not participate.

What is an eCQM?
The short answer is: electronic Clinical Quality Measure. Optometrists will see eCQMs as part of Meaningful Use Stage 2 (MU2), Meaningful Use Stage 3 (MU3) and also with PQRS.

In MU2, optometrists need to meet Core Objectives, Menu Set Objectives and also CQM Objectives. In general for CQMs, optometrists must meet 9 different CQM objectives to satisfy MU2 criteria. Examples include recording full medication lists our patients are using; screening for tobacco use; and sending a letter to a primary care physician (PCP) when our patient has diabetic retinopathy.

The same logic is now applying to PQRS—we must meet 9 different objectives to avoid a PQRS penalty.
MU2 and PQRS are separate programs. MU2 Year 1 is a 90-day reporting period and PQRS is a 365-day reporting period. Some of the ideas will overlap (sending a letter to a PCP about diabetic retinopathy is found in both PQRS and as a CQM in MU2).

Electronic Health Record vendors have internal counters to track eCQMs. For example, many vendors have a specific letter that, if you generate it for your patient, will pull all the diabetic retinopathy info from your fundus exam findings in your eye exam and populate the information into the diabetic retinopathy letter. That letter (after you generate it) is then counted toward your eCQM for sending the PCP a letter about your patient with diabetic retinopathy.

AOA MORE will help you stay compliant by tracking eCQMs, and assist with MU3 and PQRS reporting.

*I am using AOA MORE, do I still have to submit PQRS on my claims?*

Your 2017 PQRS data will be the first time AOA MORE is able to submit to CMS on your behalf (reported by the end of February 2018). This means that even though you will be using AOA MORE during 2015 and 2016, you will still need to submit your own PQRS data (either claims-based or EHR-based) during 2015 and 2016.

CMS has a rule that requires any registry to be functioning for one full year prior to applying for qualified status. Think of this CMS requirement as a registry "practice year." CMS wants to ensure that every registry is properly working for one year before they deem it an official "qualified" registry for PQRS. Furthermore, the CMS rule states that registry start dates must be January 1 of a given year. With these CMS rules in mind, AOA will get doctors integrated and acclimated to AOA MORE during 2015 and beyond. While you will be able to view your PQRS dashboard metrics in AOA MORE during this time, AOA MORE will not be officially submitting your PQRS data to CMS until early 2018 for your 2017 data collected. Continue to submit on your own for patients you see in 2015 and 2016.

Keep in mind that AOA MORE is using eCQMs to tabulate PQRS. This is a different source than the more traditional standards of "claims-based" PQRS (doctor self-reported) and "EHR-based" PQRS (EHR reports). That means that the numbers you see in your AOA MORE dashboard may vary from reports you get from your own tracking or reports that you receive from your EHR. CMS is emphasizing eCQMs as the best standard for reporting. This is why AOA MORE is built upon eCQMs! But, ODs must wait until the 2017 reporting year (see reasons above) before we can allow AOA MORE to report for us. Continue to submit your 2015 and 2016 PQRS on your own.

**What happens in 2016?**

Starting in January 2016, AOA MORE will collect your PQRS data for one full year (the CMS "practice year"). This means in 2016 PQRS data will be sent to AOA MORE (automatically done through your EHR integration) and you will also send your PQRS data to CMS by traditional claims-based or EHR-based reporting. Sending your 2016 PQRS data through AOA MORE allows us to become a qualified data registry with CMS. Also, sending your 2016 PQRS data
through traditional claims-based or EHR-based reporting will get you qualified to avoid payment penalties.

Beginning in January 2017, we expect to be a CMS-qualified registry and we will begin submitting your 2017 PQRS data (submission for 2017 data occurs in the first quarter of 2018). After January 1, 2017, as long as you are using AOA MORE and submitting your data to AOA MORE, you will no longer need to do extra written codes (i.e., 2027F, 2019F, etc.)—MORE will do it for you and you will no longer have to report through your EHR system! You will be required to formally “agree to submit” this data to PQRS when it’s time to do so, as that, too, is a requirement of CMS. AOA will notify doctors when it’s time to report and remind all AOA MORE users of the deadlines.

**How do I submit my PQRS data into the registry?**
Your EHR vendor will securely push your PQRS data to AOA MORE, which will then calculate your PQRS measures for you. Once the data is in the registry, you will simply review and formally approve the data for submission during the PQRS data submission period (typically January 1 to February 28 of the following year). Only then will AOA MORE submit the data to CMS on your behalf.

CMS is moving PQRS in the direction (for EHR users) of using eCQMs as the reporting mechanism to satisfy PQRS. The eCQMs will make documentation easier for ODs. If you have taken the recommended clinical actions (i.e., documented the optic nerve findings on a glaucoma patient), it will automatically generate the appropriate required eCQM/PQRS data. AOA MORE is designed with your EHR vendor so that eCQMs are submitted to meet PQRS needs. Most EHR vendors have a worksheet to explain what data fields in the EHR correlate to the eCQM. Your AOA MORE dashboards will give you a snapshot of how you are doing with these quality measures over time.

**Will AOA MORE satisfy MU Stage 2, Menu Set #6?**
AOA MORE is considered a “specialized registry” in the eyes of CMS. That means it will satisfy Meaningful Use Stage 2 (MU2), Menu Set #6. These rules will change in MU3 when AOA MORE will be considered a “clinical data registry.”

Additional information: For MU2, all providers must be able to accomplish all of the “Core Objectives,” 3 of the 6 “Menu Set” items and then the CQMs. AOA MORE will help to report the CQMs as well as satisfy item #6 in the Menu Set. AOA has worked with CMS to ensure that AOA MORE qualifies as a “specialized registry” for Meaningful Use.

**Do the displayed PQRS performance rates include Non-Medicare patients?**
When your practice authorizes your EHR vendor to release data to AOA MORE, it includes all patients regardless of their payer. Therefore, if you see Medicare patients in your practice and your practice’s EHR is sending data to the registry, then Medicare patients will be included in the calculation of PQRS measures prior to submitting the data to CMS.
TECHNICAL REQUIREMENTS AND SECURITY

How easy is it to use AOA MORE?
AOA MORE requires the use of one of our approved EHR vendors. The list of approved vendors is constantly expanding. AOA MORE has worked with EHR vendors to ensure that data entered into your electronic exam record flows accurately to AOA MORE. You will have to sign on with a user name and password to see data in AOA MORE and your data will only be visible to you and no one else.

How does data get from my EHR to AOA MORE?
Each week, the participating EHR vendors send clinical data from their systems to AOA MORE’s receiving area. AOA MORE is not going into your EHR to get data. The information is “pushed” from your EHR to AOA MORE by systems your EHR vendor put into place. Data is encrypted using industrial-strength encryption and remains encrypted while in transit and at rest. Once the data has been validated and processed, it is imported into the registry where it is stored securely.

Can you manually enter data into AOA MORE?
There is no plan to have manual data entry into AOA MORE. We view the success of AOA MORE to be that ODs can use their valuable time to see patients and not become data-entry technicians. Also, if you are allocating manual data entry to someone else, there is the potential for human error. By simply filling out your EHR exam form and having it linked to AOA MORE, you can participate with minimal effort.

Which EHRs are supported?
At launch in June 2015, AOA MORE will be supported by RevolutionEHR, Compulink and MaximEyes. The plan is to bring on additional EHR vendors as quickly as possible and there are many vendors already preparing to be part of the next release. If your vendor is not supported, please register with AOA MORE so we know which EHRs are most in demand.

What browsers are supported? Technical requirements
AOA MORE supports Google Chrome, Firefox, Safari and Internet Explorer (version 8 or above).

Who is Prometheus Research?
Prometheus Research is AOA’s partner in designing, building and supporting AOA MORE and its many functions. They have spent the past decade building integrated registries to address the challenges of acquiring, integrating and repurposing health data for biomedical researchers, academic health centers, philanthropic institutions, and professional societies. Staffed by a unique combination of clinical research informaticians and open-source software engineers,
they stand apart from traditional “registry” companies with a partnership model that avoids software licensing fees and vendor lock-in strategies. Instead, they embrace the model in favor of empowering their clients to the point that they will no longer need most—if not all—of Prometheus’ expert data management consultation once the registry is completely built and running. Of course, Prometheus Research will continue to house and maintain the registry for AOA into the future and make improvements as needed.

**What data is shared with AOA? Is it de-identified?**
Only de-identified aggregate data is shared with the AOA. This data is used for benchmarking, i.e., the number of diabetic eye exams you performed last year compared to your peers. No individual patient data or doctor-specific data can be seen by the AOA. Only individual doctors can see their own data.

**How is data de-identified?**
Prometheus Research and your EHR vendor have worked together to program AOA MORE. Data fields like a patient’s name, address, phone number, etc., are fields that will only be included in your reporting. All eCQMs require patient- and provider-identifying data, but Prometheus Research does not share patient-identifying data fields or individual patient records with AOA. The information about you and your practice are only used for you to see your dashboards and will not be visible to any reviewers or other users of AOA MORE. It’s very important that your information stay private to you, and therefore AOA MORE will require that you enter a user’s name and password to view your data. All other data viewed by AOA will be in aggregate/cumulative formats.

**Single Sign On (SSO)**
You can sign into AOA MORE using your aoa.org login credentials. AOA employs Single Sign On to allow access to AOA MORE. SSO is a method by which one login ID works for multiple applications. In this instance, the same username and password that is used to access areas of aoa.org also can be used to access AOA MORE.

**Do I need to install/download anything?**
No. AOA MORE is configured at the level of the EHR vendor interface to retrieve the data from an individual provider’s EHR. All setup and configuration should be handled by EHR vendors and Prometheus Research for you.

**Can my staff (other than providers) access AOA MORE?**
Yes, but only if you elect to provide access to any of your staff. Designated staff members may view your data in AOA MORE if you grant them access. Because you, the provider, grant these rights to view the data, you may elect to revoke these rights to staff members at any time, but may require password changes, etc.
What information will be captured during this first release of AOA MORE?
AOA MORE will have its first release in June 2015. During that release there will be several measures that are captured from your EHR including PQRS, optometric procedures and more. There are already plans for future releases this year and into the future, to expand on the usefulness of AOA MORE with many more features and new information. Because optometry is constantly evolving over time, AOA MORE also will evolve over time.

Where do I learn MORE?
You can get additional information at aoa.org/MORE. There you will find FAQs, videos and other resources to teach you about AOA MORE and registry use in general.

Where do I go for technical support?
If you need technical support, first go to aoa.org/MORE.

I joined and cannot see my data in my AOA MORE dashboard. What happened?
If you have just signed up for AOA MORE, it can take up to 4 weeks for your registration and verification to be finalized. This critical time period is one where AOA lets your vendor know you’ve signed up, the vendor adds your data to the registry, Prometheus tests that your data has been transmitted accurately from the EHR vendor and notifies AOA, and AOA notifies you directly. Once finalized, your data will be successfully “pushed” from your EHR to the registry and you can view AOA MORE dashboard statistics. After that, data is pushed once a week so you won’t see updates instantaneously. You will see them weekly.

For MORE information, visit aoa.org/MORE