

Quality Measure & Interoperability Solutions



We are your CMS-approved Qualified Registry (QR)! This means we collect clinical data from MIPS eligible clinicians (individuals, groups and virtual groups) for submission to the Quality Payment Program (QPP). In addition to Clinical Quality Measures (CQMs), Dynamic Health IT (DHIT) can submit Promoting Interoperability (PI) metrics and practice Improvement Activities (IA).

Just click the "Submit to DHIT" button and we do the work for you. DHIT's experts can also provide project management, technical guidance and strategic support. Leverage our expertise for consulting on regulations to ensure ongoing compliance.

Features and benefits:

- Tightly integrated with our CQMsolution software
- Coupled with CQMsolution, it provides automated end-to-end processing for eCQM, PI and IA submission
- Reduces staff burden by streamlining QPP compliance
- Real-time feedback helps you choose the best CQMs from our comprehensive library.

Individual percentages and progress bars for each Measure Set: Quality, PI, AI and Cost

| Qualified Registry 🗧 | Ξ Mega ∽ 🛟 Q | | | 🛃 🌘 John Doe 🗸 |
|----------------------|-------------------------|----------------|-----------|------------------------|
| MENU | | | | |
| Dashboard | | | | C 0 |
| 🔇 Quality | | MIPS Score: 10 | 00% | |
| Improvement Activity | | | | |
| * Promoting Interope | | Quality | | |
| Administration | | 45 | | |
| Settings | | | | |
| Documentation | | | | |
| | 45/45 Points Quality | • 740 • | 15 Points | 15 / 15 Points Cost |

| 76 | % | | | ea reo |
|-----------------|-----------------|--|-------------------------|-------------------|
| Initial Patient | Population | | 50 | • Pr |
| Denominator | | | 18 | nu |
| Numerator | | | 2 | yo |
| Denominator | Exceptions | | 6 | |
| Activity Id | 11 | | Improvement Activity Re | quirements |
| IA_PCMH | Electronic subm | nission of Patient Centered Medical H | lome accreditation | |
| IA_AHE_1 | Engagement of | f New Medicaid Patients and Follow-u | р | |
| IA_AHE_2 | Leveraging a Q | CDR to standardize processes for scr | eening | |
| IA_AHE_3 | Promote Use of | f Patient-Reported Outcome Tools | | |
| IA_AHE_4 | Leveraging a Q | CDR for use of standard questionnair | es | |
| IA_AHE_5 | | | | |
| IA_AHE_6 | E-PRES | E-PRESCRIBING | | |
| IA_AHE_7 | _ | | | |
| IA_BMH_1 | (i) | At least one permissible clinician is queried for a | | |
| | \sim | using CEHRT. | arao ronnaiar) ana | cranormiced elect |

- Quality- Features collapsible Cards: Pre-• nts each Quality Measure submitted QRDA III
- provement Activities-Lets you sort ch column and check off completed uirements; shows the weighting
- omoting Interoperability- Displays merator and denominator values; lets adjust, if necessary

| tivity Id 👘 | Improvement Activity Requirements | Weighting 🕮 | | | |
|--|--|-----------------------|--|--|--|
| A_PCMH | Electronic submission of Patient Centered Medical Home accreditation | | | | |
| A_AHE_1 | Engagement of New Medicaid Patients and Follow-up | | | | |
| A_AHE_2 | Leveraging a QCDR to standardize processes for screening | | | | |
| A_AHE_3 | Promote Use of Patient-Reported Outcome Tools | | | | |
| A_AHE_4 | Leveraging a QCDR for use of standard questionnaires | Medium | | | |
| A_AHE_5 A_AHE_6 A_AHE_7 A_BMH_1 | E-PRESCRIBING – | C" (h dium dium | | | |
| | Numerator 25 Denominator 45 Up to 10% | | | | |

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