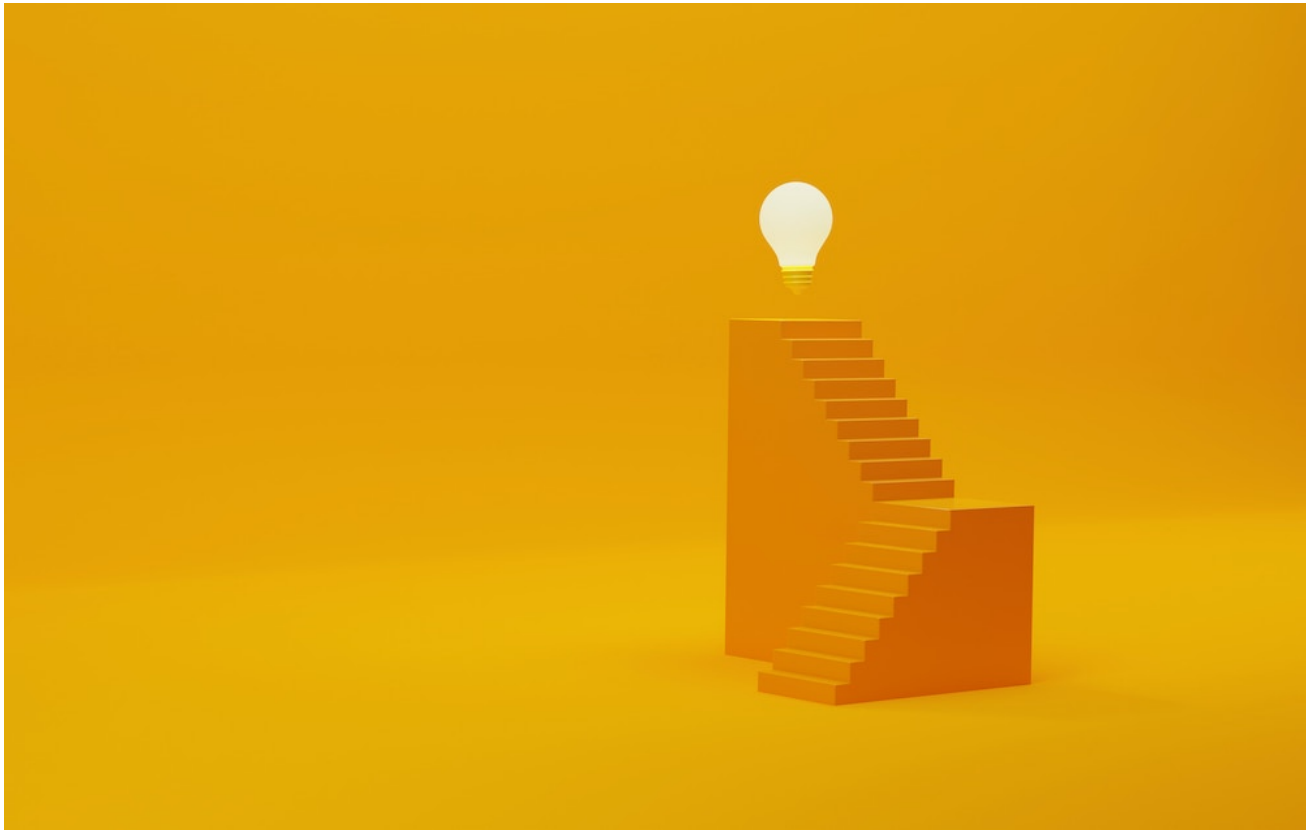# New for ACOs: Roji TIPS for Implementing APP Reporting

written by Theresa Hush | July 27, 2023

With the advent of APP Reporting, ACOs face a fundamental change in not only how they report quality measures, but also how they use data to drive results. That's true whether APP Reporting involves reporting quality for all patients or for Medicare-only patients via Medicare CQMs.

Data is an asset that ACOs have never had. But data has the potential to influence all ACO functions and its success. Rather than depending on past admissions and ER utilization to retrospectively contact patients, ACOs that initially aggregate data will be able to use it to proactively identify patients who need more specific help. From development of high-risk patient registries to managing the cost of care for specific patient cohorts, your ACO is about to learn how data can be your most effective resource for changing the future of health care.

If that's the dream, how does your ACO get there? ACOs are struggling right now to make sense of APP Reporting requirements and how to make the process easier and efficient.

However, the landscape for [APP Reporting implementation has traps](#) that are easy to fall into. We are seeing ACOs complicate their process because of lack of familiarity with all-patient reporting (like MIPS and the APP) and with data sourcing.

That's why we're developing a series of tips for ACOs about key steps in APP implementation. Beginning with how to organize your effort, we'll cover all the details of your APP implementation process, sharing the knowledge from our years of experience in data aggregation and CMS Quality Reporting. Each Roji TIPS sheet will be a quick read that highlights a particular point in the implementation process or a decision you must make. We are providing these as free downloadable resources for sharing among ACO leadership and administrators.

Will Your ACO Need to Aggregate Data?

Let's say you've already decided to report via Medicare CQMs. Will you need to aggregate data to do this? While the [2024 Proposed Rule](#) states that CMS will provide patients meeting eligibility for measures based on claims data, it doesn't state how it will address the three-month claims run-out period after the end of the year. Patients will continue to become eligible as a result of those visits, so unless this gap is clarified by CMS guidance, it may still be necessary to aggregate data to identify eligible patients.

After that step, ACOs will need to populate measure numerators, which will not be in CMS claims. Despite CMS's proposed alternative to limit reporting to Medicare patients, a larger practice could have thousands of patients meeting eligibility, an impractical amount for culling medical records for measure values. The more practical— and lower cost—approach is to aggregate the data to fulfill the measures.

Introducing Your First Roji TIPS Sheet: Five Tips to Organize Your APP Reporting for Lowest Cost

Is your ACO ready to kickoff APP Reporting with data aggregation? Then you already know that your first step will be to aggregate patient data from physician systems. Data collection know-how, security, storage needs, and patient matching requirements will likely lead you to acquire expertise to accomplish the task.

Many ACOs are searching for an APP Reporting vendor. This is new territory. We see ACOs struggling through the RFP bidding process. These are tips for ACOs to get top vendors and the best proposal.

The Best Proposal Depends on Confidence in Your Approach

Achieving lowest price and best vendor for APP reporting will largely depend on three factors:

Assessment of the complexity and difficulty of data aggregation for your ACO.
Responsibility for working with practices directly; and
Flexibility in data formats to make it both do-able and cost-effective.

Note that none of these issues have to do with the reporting platform itself but, instead, with collecting data.

Five Actions to Get Best Proposal

Here's what you need to do to address the factors that influence price:

Before the RFP, organize your practice and system information.
Identify an ACO intermediary to be central point of contact with practices.
Adopt a process to educate practices on all aspects of APP Reporting, from data collection to quality performance requirements.
Be flexible with data sources to achieve quick progress.
Get the best value for your data.

[To get more details on these action steps, download your free Roji TIPS sheet HERE.](#)

About Roji Health Intelligence and APP Reporting

As you undertake this journey, contact Roji Health Intelligence to be your guide for APP Reporting implementation:

We have 21 years in aggregating data from a variety of EHRs and other systems, and integrating other sources of data, using a variety of formats.
Roji Heath Intelligence has ONC-Certified technology for reporting eCQMs. We also report MIPS CQMs, quality measures to health plans.
Roji Health Intelligence is a CMS-qualified Registry for MIPS Reporting and will be performing APP Reporting.
In addition to quality reporting, Roji provides other services for cost and quality

performance improvements. Our most advanced services and analytics are Roji Episodes, which use condition- and procedure-based Episodes of Care to fuel population health, clinical interventions for patients, and cost improvement programs.

Founded in 2002, Roji Health Intelligence guides health care systems, providers and patients on the path to better health through [Solutions](#) that help providers improve their value and succeed in Risk.