AOA MORE
Status Update and Future Direction

Zachary McCarty, OD
AOA Registry Committee, Chairman
What is a Registry?

• Private
• Secure database
• Systematically integrates patient data from multiple electronic health record ("EHR") systems and facilitates secondary uses of the data.
Why Did AOA Create a Registry?

• Initiated by the AOA Board of Trustees
• Developed in response to the growing emphasis on quality-reporting and quality measurement.
Who Says Registries Are Important?
PUBLIC LAW 114–10—APR. 16, 2015

“(ii) ENSURING COMPREHENSIVENESS OF GROUP PRACTICE ASSESSMENT.—The process established under clause (i) shall to the extent practicable reflect the range of items and services furnished by the MIPS eligible professionals in the group practice involved.

“(E) USE OF REGISTRIES.—Under the MIPS, the Secretary shall encourage the use of qualified clinical data registries pursuant to subsection (m)(3)(E) in carrying out this subsection.
Who Says Registries Are Important?

SEC. 4005. LEVERAGING ELECTRONIC HEALTH RECORDS TO IMPROVE PATIENT CARE.

(a) REQUIREMENT RELATING TO REGISTRIES.—

(1) IN GENERAL.—To be certified in accordance with title XXX of the Public Health Service Act (42 U.S.C. 300jj et seq.), electronic health records shall be capable of transmitting to, and where applicable, receiving and accepting data from, registries in accordance with standards recognized by the Office of the National Coordinator for Health Information Technology, including clinician-led clinical data registries, that are also certified to be technically capa-
Who Says Registries Are Important?
What Professions are Using Registries?

• Anesthesiology (3+)
• Cardiology (3+)
• Emergency Physicians
• Hospitalists
• Neurology
• Oncology
• Osteopathy

• Ophthalmology
• Orthopedics
• Plastic Surgeons
• Radiology
• Urology
• Over 69 QCDRs
Vendor Integration Status
✓ Initial integration is complete
✓ User should be receiving email indicating that their data is being moved to production in the coming weeks
✓ It is our goal to be able to report 2016 PQRS measures for Compulink users through AOA MORE
✓ Reminder: Doctors using Compulink must visit the Compulink website to enable connectivity to AOA MORE
✓ Initial integration is complete
✓ User should be receiving email indicating that their data is being moved to production in the coming weeks
✓ It is our goal to be able to report 2016 PQRS measures for MaximEyes users through AOA MORE
✓ No additional steps need to be taken with MaximEyes to get connected to AOA MORE
✓ Initial integration is complete
✓ User should be receiving email indicating that their data is being moved to production in the coming weeks
✓ It is our goal to be able to report 2016 PQRS measures for RevolutionEHR users through AOA MORE
✓ No additional steps need to be taken with Revolution to get connected to AOA MORE
Initial integration is complete
User should be receiving email indicating that their data is being moved to production in the coming weeks
It is our goal to be able to report 2016 PQRS measures for Practice Director users through AOA MORE
Users will need to ensure they have made the latest Practice Director software update to report 2016 PQRS measures through AOA MORE
• Currently in integration process
• Working to complete integration in early 2017
• No additional steps need to be take with Crystal Practice Management to get connected to AOA MORE
• Will **not** be available for 2016 PQRS reporting through AOA MORE.
• Currently in integration process.
• Working to complete integration in early 2017
• No additional steps need to be take with ExamWRITER to get connected to AOA MORE
• Will **not** be available for 2016 PQRS reporting through AOA MORE
2017 Potential Vendor Integrations

EyeCare

ELI GLOBAL

eyefinity

NEXTGEN
### Top Registry Users by Profession (2013)

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Eligible Professionals</th>
<th>Eligible Professionals who Participated</th>
<th>Percent of Eligible Professionals who Participated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registry Individual Measures</td>
<td></td>
<td>--</td>
<td>--</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>5,041</td>
<td>5,942</td>
<td>7.8%</td>
</tr>
<tr>
<td>Physical/Occupational Therapy</td>
<td>5,006</td>
<td>5,499</td>
<td>11.2%</td>
</tr>
<tr>
<td>Family Practice</td>
<td>3,441</td>
<td>4,566</td>
<td>5.8%</td>
</tr>
<tr>
<td>Dermatology</td>
<td>7,91</td>
<td>3,617</td>
<td>36.9%</td>
</tr>
<tr>
<td>Nurse Practitioner</td>
<td>216</td>
<td>3,050</td>
<td>4.9%</td>
</tr>
<tr>
<td>Other Eligible Professional</td>
<td>38,052</td>
<td>2,599</td>
<td>6.8%</td>
</tr>
<tr>
<td>Radiology</td>
<td>31,213</td>
<td>2,284</td>
<td>7.3%</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>17,468</td>
<td>1,604</td>
<td>9.2%</td>
</tr>
<tr>
<td>Cardiology</td>
<td>16,892</td>
<td>1,550</td>
<td>8.1%</td>
</tr>
</tbody>
</table>
How Does AOA MORE Help Me?

• Clinical Feedback
  • Glaucoma/Glaucoma Suspect (VF, OCT)
  • Laser Outcomes
  • PQRS satisfaction rate
  • Medication Rx’s
  • ICD codes
  • Constantly evolving
How Does AOA MORE Help Optometry?

• Answering Optometry’s Questions:
  • Kids under 5?
  • Most common K ulcer?
  • Diabetics?
  • Myopia Progression

• Optometry advocating for Optometry!!
• 30,000+ ODs working together
How Does AOA MORE Work?
• Your cost to use AOA MORE?
  • You **DESERVE** to be at the value-based purchasing table
  • $0 to members
    • Registries cost upwards of $100 per month per doctor
• QUESTION:
  • Am I automatically enrolled if my vendor is integrated?
  • No. You must sign up to authorize your data integration
    • Register at aoa.org/MORE
• QUESTION:
  • What part of MIPS will AOA MORE help me with?
  • AOA MORE will help with:
    • Quality
      • Building in 9-12 measures
    • Advancing Care Information
      • Bonus Points but not submit data
    • Cost
      • Nothing to submit
    • Clinical Practice Improvement Activities
      • This is attestation (yes/no) for 2017 Performance
      • AOA MORE activities are reported yes/no by you
**Gender**

Distribution of gender among patients seen in the past 12 months.

- Female: 49%
- Male: 51%

**Age (years)**

Distribution of ages (in years) among patients seen in the past 12 months.

- 0-2: 3%
- 3-5: 10%
- 6-12: 14%
- 13-18: 17%
- 19-39: 13%
- 40-64: 20%
- 65+: 21%
Top 10 Medications Prescribed

Distribution of glaucoma and glaucoma suspect diagnoses among patients seen in the past 12 months.

<table>
<thead>
<tr>
<th>Your Patients</th>
<th>Registry Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restasis</td>
<td>Pred Forte</td>
</tr>
<tr>
<td>Pred Forte</td>
<td>Pred Forte</td>
</tr>
<tr>
<td>Pataday</td>
<td>Restasis</td>
</tr>
<tr>
<td>Doxycycline</td>
<td>Doxycycline</td>
</tr>
<tr>
<td>Tobradex</td>
<td>Tobradex</td>
</tr>
<tr>
<td>Latanoprost</td>
<td>Latanoprost</td>
</tr>
<tr>
<td>Zithromax Z Pak</td>
<td>Ciprofloxin</td>
</tr>
<tr>
<td>Zymaxid</td>
<td>Zithromax Z Pak</td>
</tr>
<tr>
<td>Lascitafo</td>
<td>Pol'Trim</td>
</tr>
<tr>
<td>Latisse</td>
<td>Latisse</td>
</tr>
</tbody>
</table>

1,231 Patients
4,546 Encounters

How to read these charts:
- YOUR PATIENTS
- REGISTRY AVERAGE

Percentages are calculated according to patients encountered in the last 12 months.
Registry counts reflect an average per provider.
<table>
<thead>
<tr>
<th>Clinical Process / Effectiveness</th>
<th>Rate</th>
<th>Count</th>
<th>Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CMS131</strong> Diabetes: Eye Exam</td>
<td>86%</td>
<td>599 / 680</td>
<td>5</td>
</tr>
<tr>
<td><strong>CMS68</strong> Documentation of Current Medications in the Medical Record</td>
<td>55%</td>
<td>520 / 992</td>
<td>18</td>
</tr>
</tbody>
</table>

**Reporting year: 2015**
For **MORE** information:

Visit [www.aoa.org/MORE](http://www.aoa.org/MORE)