PCQI Changes and Related Tariff Information

Q1. What updates are being made to the Primary Care Quality Indicators, and why?

Manitoba Primary Care Quality Indicator Advisory Committee (MPAC) reviewed suggestions from clinicians, current best practice and clinical evidence to develop and revise the clinical indicators. MPAC recommended the following approved changes and updates to the Primary Care Quality Clinical Indicators and Guide in version 4.0.

Summary of the Changes to Primary Care Quality Indicators:

- a. <u>New Indicator Cluster</u>: The Mental Health and Addiction Management indicators have been developed that are focusing on Generalized Anxiety Disorder (ICD-9 code: 300.02) and Major Depressive Disorder (ICD-9 code: 296.3) for Mental Health, and Substance Use Disorder (ICD-9 code: 303, 304) for Addiction Management. Each of these conditions have corresponding indicators related to ongoing assessment and utilization of management services. The Substances Use Disorder indicator excludes the following substances: caffeine, tobacco and cannabinoids
- b. Update for Lipid Reduction Counselling in Coronary Artery Disease (CAD) Management indicator
 - Added an inclusion of 'OR' criteria for non-HDL levels as baseline requirement for Lipid Reduction Counselling
- c. Update for **Nephropathy Screening** in Diabetes Management and Renal Dysfunction Screening in Hypertension Management indicator
 - Added an upper age restriction criteria of 75 years to these indicators
- d. Removed the **Diabetes Screening** indicator in Hypertension, Congestive Heart Failure and Coronary Artery Disease Management.
- e. Updated the Smoking Cessation Counselling for COPD Management indicator
 - Removed the inclusion criteria of former smoker
- f. Update for Asthma Management indicator
 - Added the 'OR' condition to the existing indicator to be read as "asthma action plan reviewed OR asthma care reviewed"
- g. Update for Colon Cancer Screening
 - Added the inclusion of 'OR' criteria for flexible sigmoidoscopy once in last 10 years as baseline requirement for Colon Cancer screening

Please follow the link for the most recent version of the <u>Quick Reference Summary Guide</u> or the <u>Manitoba Primary Care Quality Indicator Guide version 4.0</u> for full PCQI standards and calculations.

Q2. How do these changes affect charting in my EMR and the Primary Care Data Extract?

Vendors with an EMR certified against the Primary Care Quality Indicator Reminders and Data Extract Specification are certifying to the <u>new specification</u> that aligns to the PCQI v. 4.0. Contact your EMR Vendor to confirm what changes they will be making in support of the updated PCQIs.

Your EMR should capture the information required for the PCQIs. This may be in the form of a discrete field or date, and/or with the Patient Treatment Forms (CDM Tariff) in the EMR, if applicable. Contact your Vendor on how to capture this information and ensure that required fields

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are populated. The Primary Care / Community Information Systems (PCIS) Office of Digital Health Manitoba is also available to answer questions.

Q3. What if I am using an EMR that is not certified against the Primary Care Quality Indicator Reminders and Data Extract Specification?

Physicians should follow the guidelines in the Manitoba Primary Care Quality Indicators Guide version 4.0 until their EMR is certified against the latest Primary Care Quality Indicator Reminders and Data Extract Specification. Continue to ensure that your EMR contains documentation supporting related tariffs. This includes recording applicable diagnoses, recording PCQI-related care provided to the patient in addition to the initial qualifying minimum and ongoing management requirements (as outlined in the Manitoba Physician's Manual). To learn more about the status of your EMR certifying to the Primary Care Quality Indicator Reminders and Data Extract Specification, review the <u>Manitoba EMR Certification Status</u> webpage and contact your EMR Vendor.

Q4. How do these changes impact claiming the Comprehensive Care Management Tariffs?

These changes may impact the claiming of the CCM Tariffs if you cannot submit the required patient care information. However, once your clinic's EMR has implemented the updated PCQI Reminders and Data Extract specifications, the process for claiming the CCM tariff and providing supporting documentation continues as before.

Please see the <u>CCM FAQ on the addition of Mental and Addiction Management</u> as an included chronic disease for consideration with the CCM Tariffs starting September 1, 2020.

Q5. How do these changes impact claiming the Chronic Disease Management Tariffs?

The Patient Care Treatment forms are updated and available as fillable PDF forms for online or paper submission. Please follow this link to the <u>MHSAL Chronic Disease Management (CDM) Tariffs</u> <u>web page</u> for the updated forms and submission information. Changes to the CDM forms include the applicable revised indicators listed above.

Q6. How can I make suggestions for development and changes to the Primary Care Quality Indicators?

Contact the Primary Care Quality Indicator Lead: Email - <u>MBPCIndicators@gov.mb.ca</u> Tele

Telephone – 204-788-6391

CCM and CDM Claims	https://www.gov.mb.ca/health/claims/index.html
MHSAL Claims Processing System	Claims Unit – Claims Enquiry: 204-786-7355
EMR Certification and Support	https://sharedhealthmb.ca/health-providers/digital-
Digital Health - Primary Care / Community	health/pcis-office/
Information Systems Office	
Primary Care Quality Indicators	https://www.gov.mb.ca/health/primarycare/providers/
MHSAL Primary Care Provider Portal	<u>pcqi.html</u>

For More Information: