

### Use ACEP Tools to meet your Improvement Activity requirement

#### What is MIPS?

Participating in MIPS will earn you performance-based payment adjustments of **up to 9%** of your Medicare payment. There are four required categories as part of MIPS but most emergency clinicians will only be measured on Quality and CPIA for 2017.

#### E-QUAL Learning Collaboratives

[Sepsis](#): Improving outcomes  
[Reducing avoidable imaging](#) through implementation of ACEP's Choosing Wisely

[Chest Pain](#): Improving value by reducing avoidable admissions in low risk patients



## What is CPIA?

CPIA stands for Clinical Practice Improvement Activities (CPIA) and is one of the four required categories of MIPS. CPIA must be attested to by groups and clinicians as evidence of active efforts to improve quality and reduce the cost of care.



Participating in an E-QUAL learning collaborative can assist with meeting the CPIA credit requirement for 2017

E-QUAL Activities	Points
<b>Completion of all Core Activities in E-QUAL Learning Collaborative will complete three CPIAs</b>	
▶ Implementation of formal QI methods or practice improvement processes (PSPA 19)	30 points
▶ Measurement and improvement at the practice and panel level (PSPA 18)	
▶ Leadership Engagement in practice improvement (PSPA 20)	
<b>Additional CPIA points available by implementing each E-QUAL Core Activity Best Practices</b>	
▶ Use of decision support and standardized treatment protocols (PSPA 16)	10 points
▶ Engage patients and families in system of care (BE 14)	10 points
▶ Implement Analytic capabilities to manage total cost of care (PSPA 17)	10 points
▶ Disseminate patient self-management and engagement materials (BE 21)	10 points
▶ Develop standard care coordination agreements and operational improvements (CC 11, CC 12)	10 points
▶ Use evidence-based decision aids for shared decision making (BE 12)	10 points



## Improve Outcomes for patients with sepsis

### Sepsis Portal Activities

Participating sites will be receiving their benchmark report from Activity 2. Use your benchmark report to complete Activity 4 in the E-QUAL portal. Activity 4 requires the completion of the several survey questions attesting to resource progress on your local sepsis quality improvement project.

For questions on the portal or the activities, please contact the E-QUAL team at [equal@acep.org](mailto:equal@acep.org)

### Sepsis Webinar

Make sure to register for the upcoming May webinar! The presentation will focus on fluid and pressors management including challenging cases and exceptions.

**Wednesday, May 24th**

**12:00-1:00 pm ET**

[Register](#)

### Sepsis Rural ED Toolkit Materials

The REQS is a series of webinars that go hand-in-hand with the EQUAL collaboratives, which are combination of webinars and Ready-To-Use Tools to help you more easily implement QI projects in rural EDs. Each REQS will feature a rural experts and a rural ED - or rural academic center of excellence (ACE) - who has already successfully implemented a QI project on these topics.

Our first webinar reviews EQUAL, outlines the rural sepsis toolkit, and introduces our ACE - Tsehootsooi Medical Center in Fort Defiance, Arizona.

[Webinar 1: "Welcome to REQS"](#)

Our second webinar discusses the implementation and initiation of a rural sepsis QI initiative for your rural ED. We hear from our ACE about their process and lessons they learned along the way.

[Webinar 2: "Foundations for Rural Sepsis QI"](#)

Our third webinar is focused on the transfer of sepsis patients from your rural ED and features one of our rural experts - Dr. Nicholas Mohr. Dr. Mohr is an Emergency Medicine-Critical Care trained physician at the University of Iowa and is a national expert on rural sepsis transfers. In

this webinar, he discusses the current literature on rural sepsis transfers - and what your small ED can do to improve sepsis outcomes prior to transfer.

[Webinar 3: "Rural Sepsis Transfers"](#)

[Sepsis Wave II learning collaborative](#)



## Reduce Avoidable Testing

for low risk patients through implementation of Choosing Wisely Recommendations

### **Avoidable Imaging Portal Activities**

If your site is participating in the Avoidable Imaging Wave II learning collaborative please make sure you active your portal account in order to have access to the learning collaborative activities. For questions on the portal or the activities, please contact the E-QUAL team at [equal@acep.org](mailto:equal@acep.org)

### **Avoidable Imaging Webinar**

Make sure to register for the upcoming May webinar! The presentation will focus the clinical topics of reducing abdominal CT for renal colic and reducing chest CT for pulmonary embolus.

**Thursday, May 25th**

**1:00-2:00 pm ET**

[Register](#)

[Avoidable Imaging Wave II learning collaborative](#)



## Improve The Value

of ED chest pain evaluation by reducing avoidable testing and admissions of low risk patients

### **Sign up Today!**

Interested in participating in the Chest Pain Wave I Learning Collaborative?

**Chest Pain Goal-** Improving the value of ED chest pain evaluation by reducing avoidable admissions in low risk patients with chest pain.

## **Deadline to sign up for the learning collaborative is May 31st.**

Step 1: Complete E-QUAL [Quality Improvement Readiness Assessment Survey](#)- 10 minutes  
(Please note that a survey needs to be completed for each ED site)

Step 2: Contact the [E-QUAL team](#) with any questions or to confirm registration

## **Chest Pain Webinar**

The Chest Pain learning collaborative will be kickoff on Tuesday May 30th! Join us for an introductory webinar on what to expect during the Chest Pain Wave I learning collaborative.

**Tuesday, May 30th**

**12:00-1:00 pm ET**

[Register](#)

## **[Chest Pain Wave I learning collaborative](#)**

## **Free CME Credit!**

Don't forget to take advantage of the FREE CME credit the E-QUAL network is offering!

### **Sepsis:**

[Get the BP Up! The Who, When and Why of Today's Sepsis Fluid Therapy](#)

[Rapid Fire: Surviving Sepsis Today - Critical Endpoints or Just Common Sense](#)

[Vascular Access and Treatment of Shock in Children](#)

[CMS SEP-1 measure—Early Insights and Experience](#)

### **Avoidable Imaging:**

[Avoiding Unnecessary X-Rays: Evidence-Based Rules for Radiography](#)

[ED MRI: Magnetic Solution or Dangerous Delusion?](#)

[Evaluation and Management of Back Pain](#)

[Skip the Scan! Effective Diagnostic Trauma Imaging](#)

[The ACEP Guide to Completing ABEM MOC PI Activities, Module 4: Imaging in Patients with Mild Traumatic Brain Injury](#)

[Avoidable Imaging- Head Trauma](#)

[Emergency Quality Network Avoidable Imaging Initiative- PECARN](#)

[Emergency Quality Network Avoidable Imaging Initiative - Drivers of Over Ordering](#)

[How to engage clinicians to reduce avoidable imaging](#)



