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Visit <https://ccaco.org/login> and log in using your provided credentials.

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Login form

Username

Password

* Please email us at info.ccaco@gmail.com if you forgot your username and password

login

Patient Confirmation

- Confirm the patient was seen during the performance year.
- Select 'Yes' only if the patient had a qualifying visit within the timeframe.
- If the patient was not seen, select 'No'.

Patient Confirmation

Medical Record Found

Yes

Has the patient visited in 2023?

Yes - The patient has visited this year

Reason for Disqualification:

Select an Option

Date of Disqualification: mm/dd/yyyy

Comments

SUBMIT

Access Medicare CQMs

Click on 'Medicare CQMs' from the left-hand sidebar to access your reporting dashboard. From there, select the provider for whom you are submitting quality data.

CCACO SOMOS

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MIPS eCQM

Practice Overview

Provider Overview

Care Coordination

Annual Wellness Visit

GPRO Reporting

MIPS CQM

PREV-5: Breast Cancer Screening

- Women age 40-74 with at least one encounter in 2025.
- Screening valid if done between Oct 1, 2023 - Dec 31, 2025.
- CPT: 77067
- Exclude hospice or bilateral mastectomy patients.

PREV-5: Breast Cancer Screening

Is the patient qualified for this measure?

Select an Option

Was the screening for breast cancer performed between October 1, 2023 and December 31, 2025?

Select an Option

Date screened (Leave in comment if invalid date format): mm/dd/yyyy

Comments

SUBMIT

DM-2: Diabetes HbA1c Poor Control

- Patients aged 18-75 with diabetes.
- Most recent HbA1c test > 9% counts as not controlled.
- CPT: 83036 or 83037
- If no value entered, defaults as uncontrolled.

DM-2: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)

Does the patient have an active diagnosis of diabetes during the measurement period OR an active diagnosis of diabetes during the year prior (January 1, 2024 - December 31, 2025)?

Select an Option

Did the patient have one or more HbA1c tests performed during the measurement period (January 1 - December 31, 2025)?

Select an Option

Date drawn (Leave in comment if invalid date format): mm/dd/2025

HbA1c Value (Note: if undocumented, enter 0 for the value):

Comments

SUBMIT

PREV-12: Depression Screening

- Patients 12+ with a visit in 2025.
- Use CPT: 96127 (e.g., PHQ-2, PHQ-9).
- If positive, follow-up must be documented same day.
- Examples: counseling, medication, referral.

PREV-12: Preventive Care and Screening: Screening for Depression and Follow-Up Plan

Is the patient qualified for this measure?

Select an Option

Was the patient screened for depression using an age appropriate standardized tool during the measurement period (January 1 - December 31, 2025)?

Select an Option

Was the screen positive for depression during the measurement period (January 1 - December 31, 2025)?

Select an Option

Was a follow-up plan for depression documented on the date of the positive screen?

Select an Option

Comments

SUBMIT

HTN-2: Controlling High Blood Pressure

- Adults 18+ with hypertension diagnosis.
- Most recent BP must be < 140/90 mmHg.
- Clinical reading only (not home/self-reported).
- Enter systolic/diastolic value and date.

HTN-2: Controlling High Blood Pressure

Does the patient have a documented diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period (January 1, 2025 - June 30, 2025)?

Select an Option

Was the patient's most recent blood pressure reading documented during the measurement period (January 1 - December 31, 2025)?

Select an Option

Date drawn (Leave in comment if invalid date format): mm/dd/2025

Systolic Value (mmHg)

Diastolic Value (mmHg)

Comments

SUBMIT

eCQM Upload

To upload a QRDA I file with exported eCQMs from your EHR system:

The screenshot shows a web application interface for uploading eCQM files. On the left is a dark sidebar with the header 'CCACO SOMOS'. Below the header is a pink button labeled 'MIPS eCQM' with a grid icon. Further down are five menu items, each with an icon and text: 'Practice Overview' (two people icon), 'Provider Overview' (two people icon), 'Care Coordination' (two people icon), 'Annual Wellness Visit' (person with bar chart icon), and 'GPRO Reporting' (calendar icon). The main content area has a light gray header with the breadcrumb 'Home / / MIPS-eCQM'. On the right side of this header is the text 'APP Quali' in a large, bold, dark blue font, with 'For more informatio' (partially cut off) below it. Below the header is a light gray box containing a 'Choose File' button, the text 'No file chosen', and a pink 'SUBMIT' button. Below this box is a section titled 'Grab quality measure results:' in bold dark blue text. This section contains two identical rows, each with a 'Choose File' button and a pink 'SUBMIT' button.

- Click on 'MIPS eCQM' from the sidebar
- Click on 'Choose File' and select your eCQMs exported from your EHR
- Our team can assist practices with exporting eCQM reports if needed