The PRIME Registry Helps Thousands of Primary Care Clinicians Liberate EHR Data and Prepare for MIPS

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The PRIME Registry is a population health and performance improvement tool for clinicians and practices. It extracts patient data from the physician’s electronic health record and turns it into actionable measures. PRIME is registered as a qualified clinical data registry and specialty registry open to all primary care physicians in Family Medicine, Pediatrics, Internal Medicine; to obstetricians/gynecologists, and to physician assistants and nurse practitioners. Nearly 3000 primary care clinicians are now using their PRIME Dashboard to track 46 different quality measures for their patient panel, identify patients with gaps in care, and report their data as necessary. The early PRIME users were mostly small and rural practices that would otherwise have struggled to report for the Physician Quality Reporting System in 2017 and the Merit-Based Incentive Payment System (MIPS) in 2018. A family physician at a micropractice in Winter Park, Colorado, said “It is quick, it is easy and saves money in the long run—it is slick.” PRIME supports the Comprehensive Primary Care Plus model and several other federal payment or practice transformation programs. It is also being configured to support new National Committee for Quality Assurance patient-centered medical home reporting requirements. The American Board of Family Medicine’s (ABFM’s) practice improvement modules will migrate into the PRIME Registry this summer and have been submitted to the Centers for Medicare & Medicaid Services as MIPS-qualified practice improvement activities so diplomates can look at their quality measures, move directly into planning a practice improvement activity, and then report it for MIPS. The ABFM is making every effort to enable PRIME to reduce burden, namely burdens of creating measures from their EHR data, reporting measures for Continuous Certification, reporting to payors, and of identifying gaps in care. PRIME works with >100 electronic health records and has 46 measures available. The ABFM is planning to submit new measures more valuable to primary care, such as continuity and comprehensiveness, so that PRIME users can choose measures they feel are more meaningful and use those MIPS. For more information, go to www.primenavigator.org or E-mail PRIME@theabfm.org.

Conflict of interest: The author is an employee of the ABFM.