

# MIPS

# Improvement Activities

# & Cost

## A SHP Lunch 'n' Learn Series

Aaron Higgins

Data & Quality – Project Manager



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## Performance Analytics

We offer real-time data dashboard backed by a team of analysts to deliver actionable information for better financial, operational, and population health management.



## Provider Enrollment

Maintaining provider enrollment is an important and often time consuming process. We can get you enrolled and take the burden off your practice with ongoing enrollment maintenance.



## Managed Care Contracting

Our contracting team has relationships with insurance companies and can help you negotiate the best fee schedules.



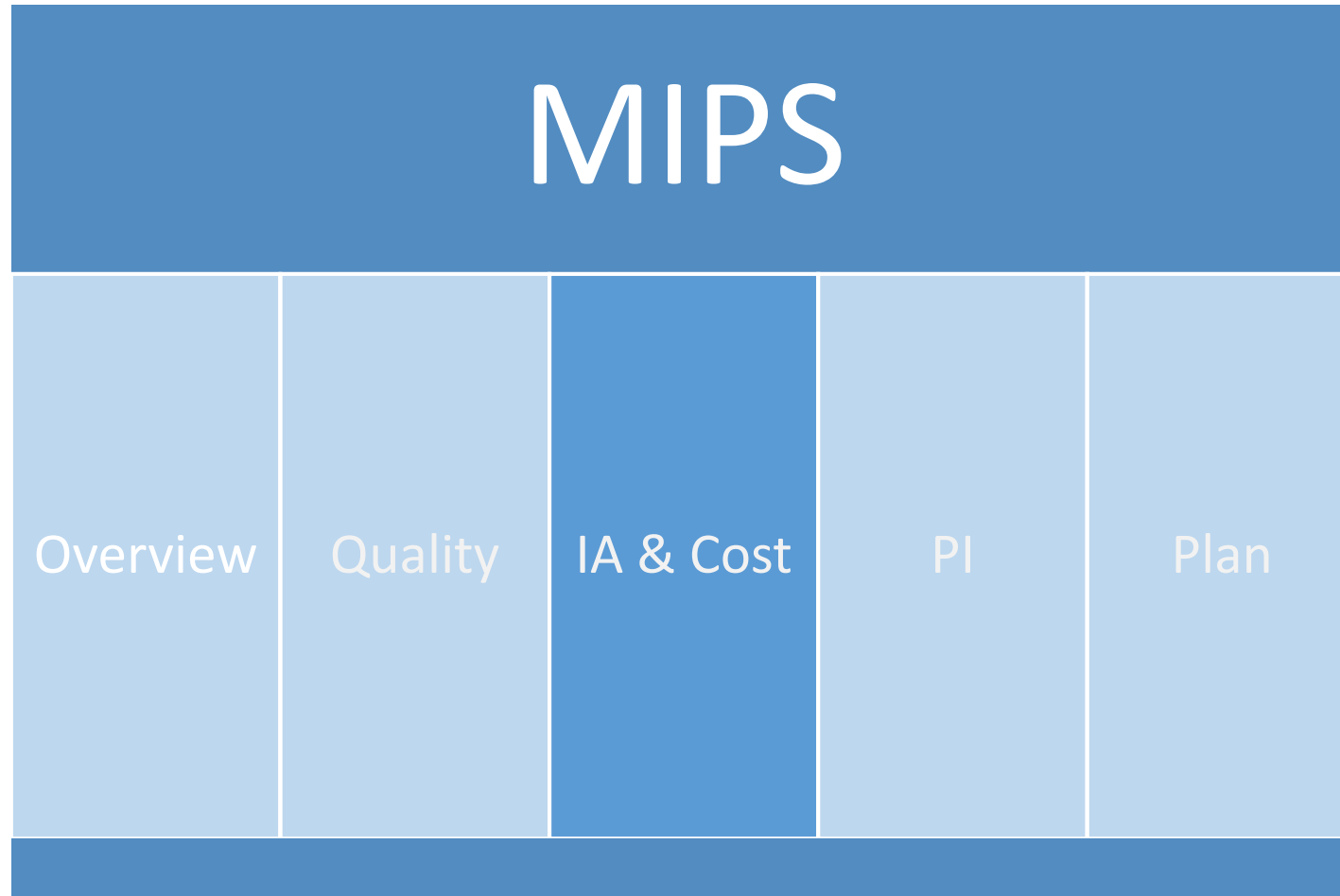
## IPA & CIN Management

We manage four IPAs across the state of Georgia and provide consultation and management services for CINs nationwide.



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# SHP Lunch 'n' Learn Series



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# Speaker – Aaron Higgins

- Quality & Data Project Manager - SHP
- 10 years experience with Federal Quality programs, including Meaningful Use, PQRS, & MACRA/MIPS
- Joined SHP in the Spring 2019



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Strategic Healthcare Partners

# Improvement Activities



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# Poll – Difficulty



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# Improvement Activities – An Overview

- Unique to MIPS
- 118 Activities
- Goal to drive innovation and new practice methods
- APMs may have activities



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# IA Sub-Categories

1. Achieving Health Equity (AHE)
2. Beneficiary Engagement (BE)
3. Care Coordination (CC)
4. Emergency Preparedness and Response (EPR)
5. Expanded Practice Access (EPA)
6. Integrated Behavioral and Mental Health (BMH)
7. Participation in an APM
8. Patient Safety and Practice Assessment (PSPA)
9. Population Management (PM)





# IA Weights & Completeness

- Two weight classes:
  - High
  - Medium
- Must complete:
  - 2 High-weight **OR** 1 High-weight & 2 Medium-weight **OR** 4-Medium-weight
- No bonus points for extra activities



# Performance & Scoring

- IA is worth 15% of your total MIPS score
- It is impossible to hit a perfect MIPS score without IA
- Activities are attestation only, but require documentation



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# Poll - Activities



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# IA and the Proposed Rule



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# Proposed Rule

- Read the Proposed Rule Summary
  - <https://qpp.cms.gov/about/resource-library>
  - 2020 Quality Payment Program Proposed Rule Overview Fact Sheet (28 pg)
- **Final Rule due early November**
- Attend the next webinars for more details



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# RY 2020 and Beyond

- Updating Rural Area definition
  - Changing definitions from the Health Resources and Services Administration (HRSA) data to the Federal Office of Rural Health Policy (FORHP) data
- Updating Patient-Centered Medical Home Criteria
- New/changed Activities
  - 2 New Activities
  - 7 Changed Activities
  - 15 Removed Activities



# New/Changed Improvement Activities

- NEW - Drug Cost Transparency (Weight: HIGH Subcategory: Beneficiary Engagement)
- NEW - Tracking of clinician's relationship to and responsibility for a patient by reporting MACRA patient relationship codes (Weight: HIGH Subcategory: Care Coordination)
- Changed - Completion of an Accredited Safety or Quality Improvement Program
- Changed - Anticoagulant Management Improvements
- Changed - Expanded Practice Access



# New/Changed Improvement Activities Cont

- Changed - Implementation of formal quality improvement methods, practice changes, or other practice improvement processes
- Changed - Participation in a QCDR, that promotes use of patient engagement tools
- Changed - Use of QCDR data, for ongoing practice assessment and improvements in patient safety.
- Changed - Completion of Collaborative Care Management Training Program





# Removed Activities

- Participation in Systematic Anticoagulation Program (reason: duplicative)
- Implementation of additional activity as a result of TA for improving care coordination (reason: duplicative)
- Participation in Quality Improvement Initiatives (reason: duplicative)
- Annual Registration in the Prescription Drug Monitoring Program (reason: duplicative)
- Initiate CDC Training on Antibiotic Stewardship (reason: duplicative)
- Unhealthy alcohol use (reason: duplicative)



# Removed Activities Cont.

- Participation in a QCDR, that promotes use of processes and tools that engage patients for adherence to treatment plan (reason: duplicative)
- Use of QCDR to support clinical decision making (reason: duplicative)
- Use of QCDR patient experience data to inform and advance improvements in beneficiary engagement (reason: duplicative)
- Participation in a QCDR, that promotes implementation of patient self-action plans (reason: duplicative)
- Use of QCDR to promote standard practices, tools and processes in practice for improvement in care coordination (reason: duplicative)



# Removed Activities Cont.

- Leveraging a QCDR for use of standard questionnaires (reason: duplicative)
- Leveraging a QCDR to standardize processes for screening (reason: duplicative)
- Use of QCDR data for quality improvement such as comparative analysis reports across patient populations (reason: duplicative)
- Participation in CMS Transforming Clinical Practice Initiative (reason: the TCIP program is ending on Sept 28, 2019)



# RY 2020 and Beyond Cont.

- Retirement of the CMS Study on Quality Measures (alternative IA option)
- Adoption of an Activity Removal policy
- Participation levels
  - 50% of the group must participate/perform activity



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# Improvement Activities Questions?



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# The “Mystery Category” aka Cost



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# Cost – What is it?

- Formerly known as the Physician Value-Based Modifier Program
  - Echoes of the QRUR reports
- In 2018, 2 measures (TPCC & MSPB). In 2019, 2 + 8 measures.
- Reporting is via Administrative Claims data (Parts A & B)
  - CMS auto-selects Group/Individual based on other categories' submission types
- Case minimums based on each measure
- No bonus points available



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# Poll – Past Scores



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# Measures

- **Medicare Spending Per Beneficiary (MSPB)**
- **Total Per Capita Costs (TPCC)**
- New for 2019
  - Elective Outpatient Percutaneous Coronary Intervention (PCI)
  - Intracranial Hemorrhage or Cerebral Infarction
  - Knee Arthroplasty
  - Revascularization for Lower Extremity Chronic Critical Limb Ischemia
  - Continued...



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# Measures Cont.

- New for 2019
  - Routine Cataract Removal with Intraocular Lens (IOL) Implantation
  - Screening/Surveillance Colonoscopy
  - Simple Pneumonia with Hospitalization
  - ST-Elevation Myocardial Infarction (STEMI) with Percutaneous Coronary Intervention (PCI)
- See the details for each measure
  - <https://qpp.cms.gov/mips/explore-measures/cost>



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# Risky Business

- All of the Cost Measures take into account the patient's risk
- To achieve maximum points, patients must be properly HCC coded
- Attribution matters! Patients *need* a PCP
- Improvements needed starting in 2022



# Controlling Cost

- Score is a surprise for most practices
- CMS offers no feedback until after score is assigned
- Population Health is the tool of choice to help



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# Proposed Changes

- Cost weight increases by 5% taking from Quality
  - 20% in 2020, 25% in 2021, & 30% in 2022
- 10 new measures in 2020
  - Summary next slide
- MSPB & TPCC getting modifications:
  - Assign responsibility for services to a larger number of clinicians
  - Improve risk adjustment timelines
  - Avoid assigning costs that are incurred before a clinician begins providing services to a patient



# New Cost Measures

1. Acute Kidney Injury Requiring New Inpatient Dialysis
2. Elective Primary Hip Arthroplasty
3. Femoral or Inguinal Hernia Repair
4. Hemodialysis Access Creation
5. Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation
6. Lower Gastrointestinal Hemorrhage
7. Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels
8. Lumpectomy Partial Mastectomy, Simple Mastectomy
9. Non-Emergent Coronary Artery Bypass Graft (CABG)
10. Renal or Ureteral Stone Surgical Treatment



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# What Should My Practice Do?

- Find a solution to get insight into Cost
- Create a plan to implement change
- The Final Rule could or could not have these changes
- The Final Rule could have entirely different changes than what was proposed



# Poll – Cost Insight



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# Next Webinars

- Promoting Interoperability – 10/10 @ 12:00pm
- Game Plan – 10/17 @ 12:00pm
- Final Rule Overview – Date TBD



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# Got Questions?

Send us your MIPS questions:  
[quality@shpllc.com](mailto:quality@shpllc.com)



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