

MIPS

Overview & Changes

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.



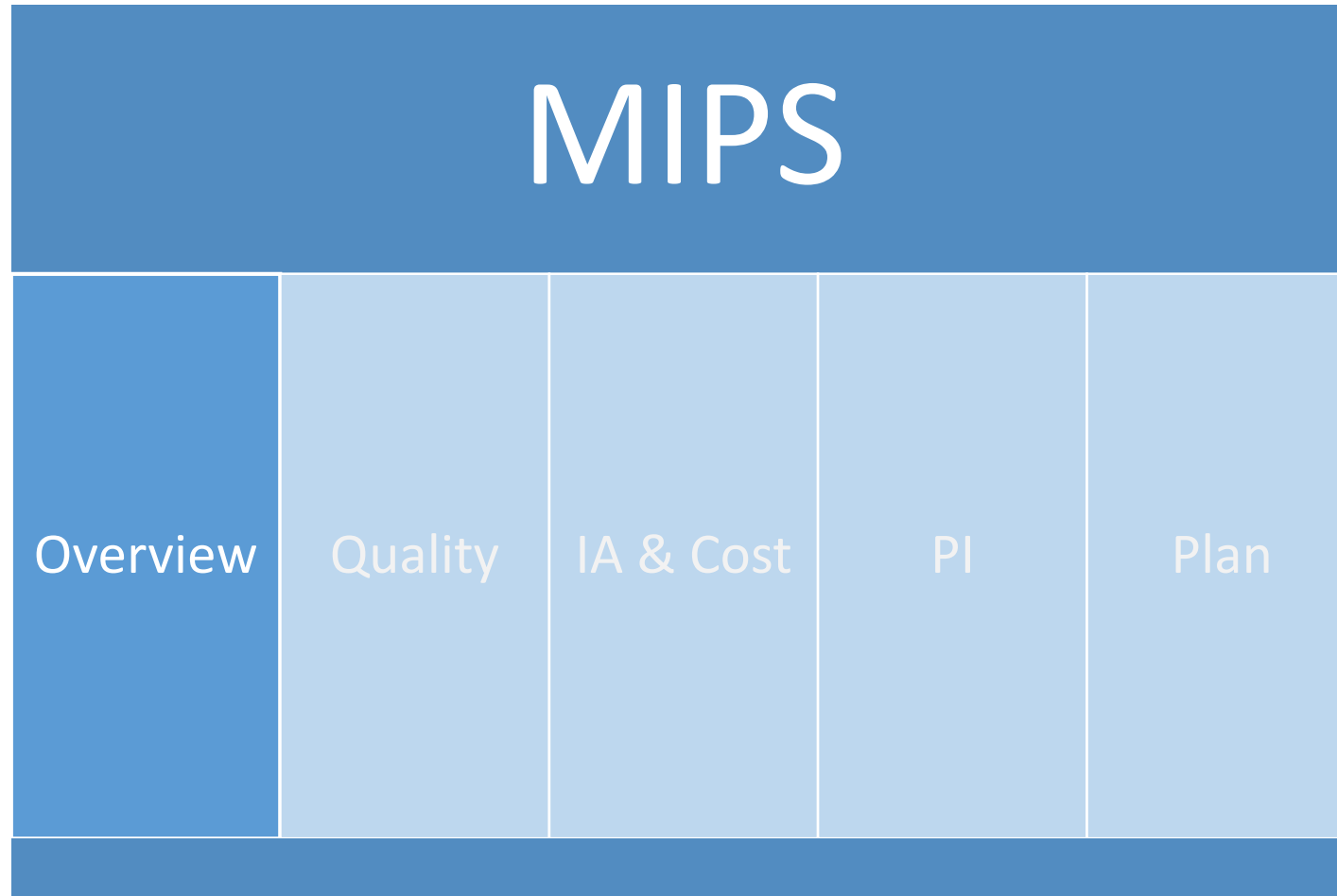
IPA & CIN Management

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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SHP
Strategic Healthcare Partners

Poll – Participation



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Past Participation

- New to MIPS
 - ACO ending
 - Ignored it
- Failed prior years
 - Not a forever penalty
- In First Year
- In Second or Third Year
 - Changes keep happening
- ACO or APM
 - Program changes may apply



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What is MIPS



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What is MIPS?

1. Merit-based Incentive Payment System
2. Passed in 2015 as a part of the MACRA (Medicare Access and CHIP Reauthorization Act)
3. Consolidated all the Quality programs into one program administered by CMS
4. Consists of four categories
5. MIPS is now in its third Reporting Year (RY)
6. Applies to more providers
7. Continuing to evolve



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MIPS Categories



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Overview of the Categories

1. **Quality** – Consists of over 250 different measures of which a provider/practice needs to only report six (they can report >6).
2. **Promoting Interoperability** – Consists of measures focused on using EHR technology to share data with other practices and organizations.



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Categories cont.

- 3. **Improvement Activities** – Consists of over 115 “activities” that a practice can do to improve their organization
- 4. **Cost** – Introduced in 2018, Cost is a challenge for organizations to affect directly.



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Poll – Categories



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What is Next for MIPS?



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Changes Overview

- 1. Proposed Rule Change** – Proposed ≠ Final
- 2. New Framework** – MIPS Value Pathways (MVPs)
- 3. Performance Threshold** – Min. score for incentives
- 4. Category Mix** – Weight of Cost increases, others decrease
- 5. Measure Changes** – Changes, creation, and retirement in all categories



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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)
- Provide feedback to CMS before Sept 27
 - www.regulations.gov
 - Search for: CMS-1715-P
- Attend the next four webinars for more details



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MVPs Framework

- CMS considering major changes to MIPS participation
- Framework only, details to be fleshed out in future rules
- 2021 is the earliest the program will start



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Measure Changes



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Proposed Changes for 2019

- PI Opioid Measures Change
 - Query Prescription Drug Monitoring Program (yes/no)
 - Removal of Verify Opioid Treatment Agreement
- Targeted Review
 - The request for review must be submitted within 60-days of score release



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Quality & Measure Changes for 2020+

- Quality measures not meeting goals will be removed
- Focused on high-priority & outcome measures
- New Specialty Sets



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Other Measure Changes & Comments

- Ten new Cost measures
- Updating Improvement Activities
- Promoting Interoperability comments



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APMs



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Alternative Payment Models

- Advanced APMs – ACOs Tracks 1-3
- MIPS APMs – MSSP ACOs & ESCOs
- All-Payer/Other Payer Option - MMHM



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Poll – Past Participation



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Scoring



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MIPS Scoring RY 2019

- Each category is scored separately, then scaled to the final score
- In 2019, the score mix is:
 - Quality – 45%
 - Promoting Interoperability – 25%
 - Improvement Activities – 15%
 - Cost 15%
- Your score determines your final incentive bonus or penalty



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Category Weight Changes

2019	2020	2021	2022
Quality = 45% PI = 25% IA = 15% Cost = 15%	Quality = 40% PI = 25% Cost = 20% IA = 15%	Quality = 35% PI = 25% Cost = 25% IA = 15%	Quality = 30% Cost = 30% PI = 25% IA = 15%



MIPS Bonus RY 2019

- **Quality Improvement** – Up to 10 points in Quality
- **End-to-End Submission** – Up to 6 points in Quality
- **Additional Measures** – Up to 6 points in Quality for submitting more than 6 measures that are High or Outcome



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MIPS Bonus RY 2019 cont.

- **Opioid Measures** – Up to 10 points in PI
- **Complex Patients** – Up to 5 points to the Final Score
- **Small Practice** – 6 points to the Final Score



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Scoring Thresholds

- Score higher than the threshold earn incentive, lower get a penalty
- In 2017, CMS gave everyone a “gimmie”
- In 2018, threshold was a mere 15 points
- In 2019, that point marker is now 30 points



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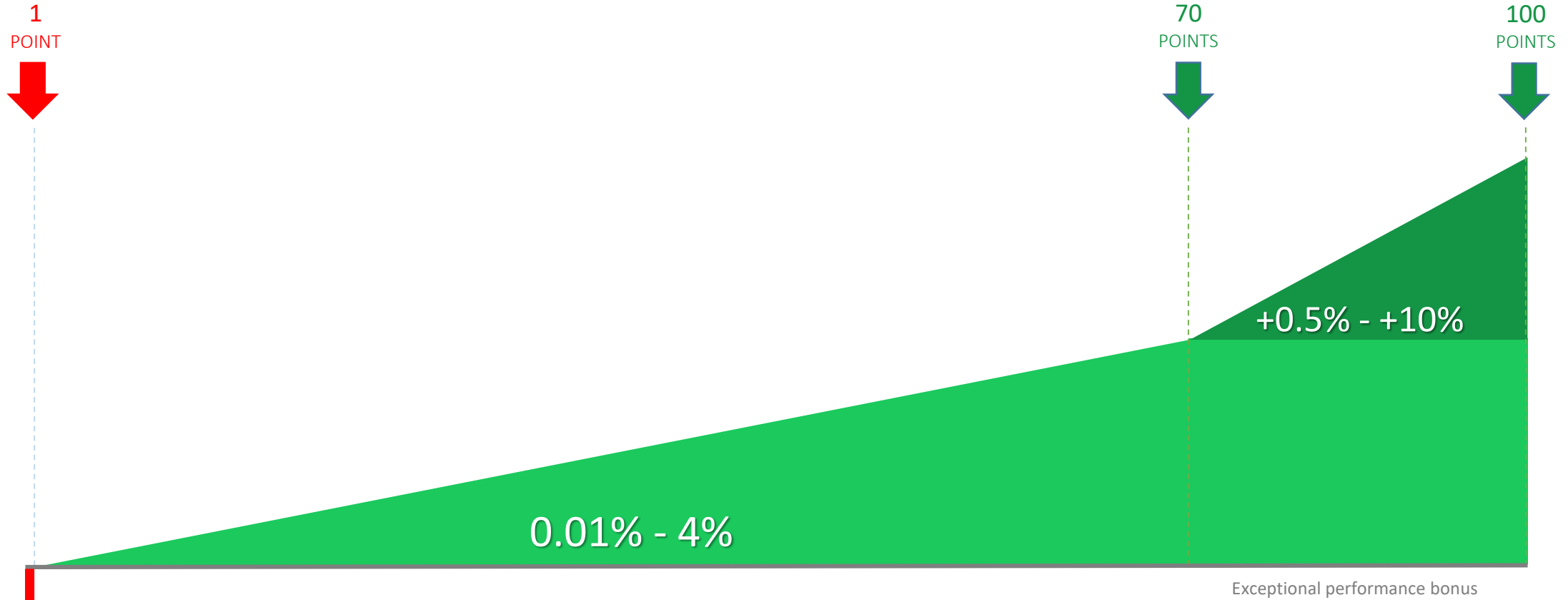
Proposed Performance Threshold Changes

2019	2020	2021	2022+
0-30 = -7%	0- 45 = -9%	0- 60 = -9%	Mean or Median average of final scores of all MIPS clinicians in prior year.
30-100 = Up to +7%	45-100 = Up to +9%	60-100 = Up to +9%	
75-100 = +.5%-10%	80-100 = +.5%-10%	85-100 = +.5%-10%	



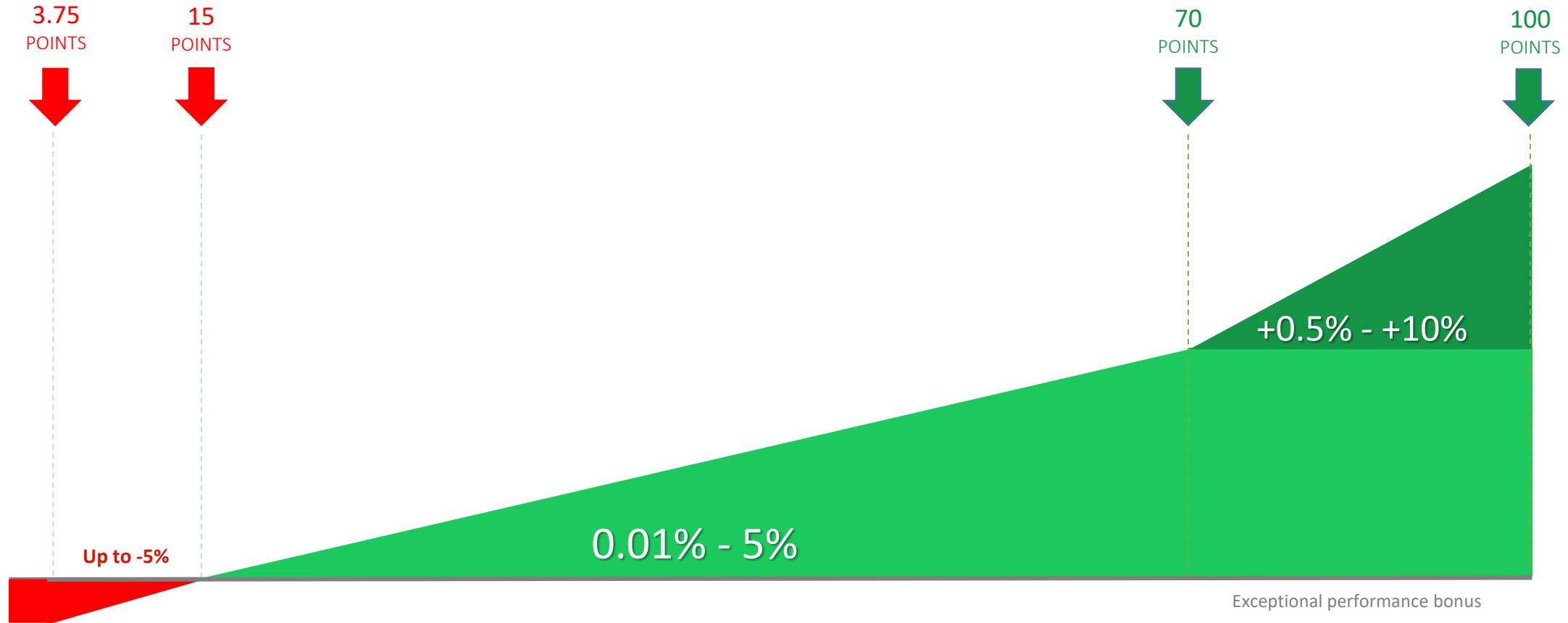
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RY 2017 Point Thresholds



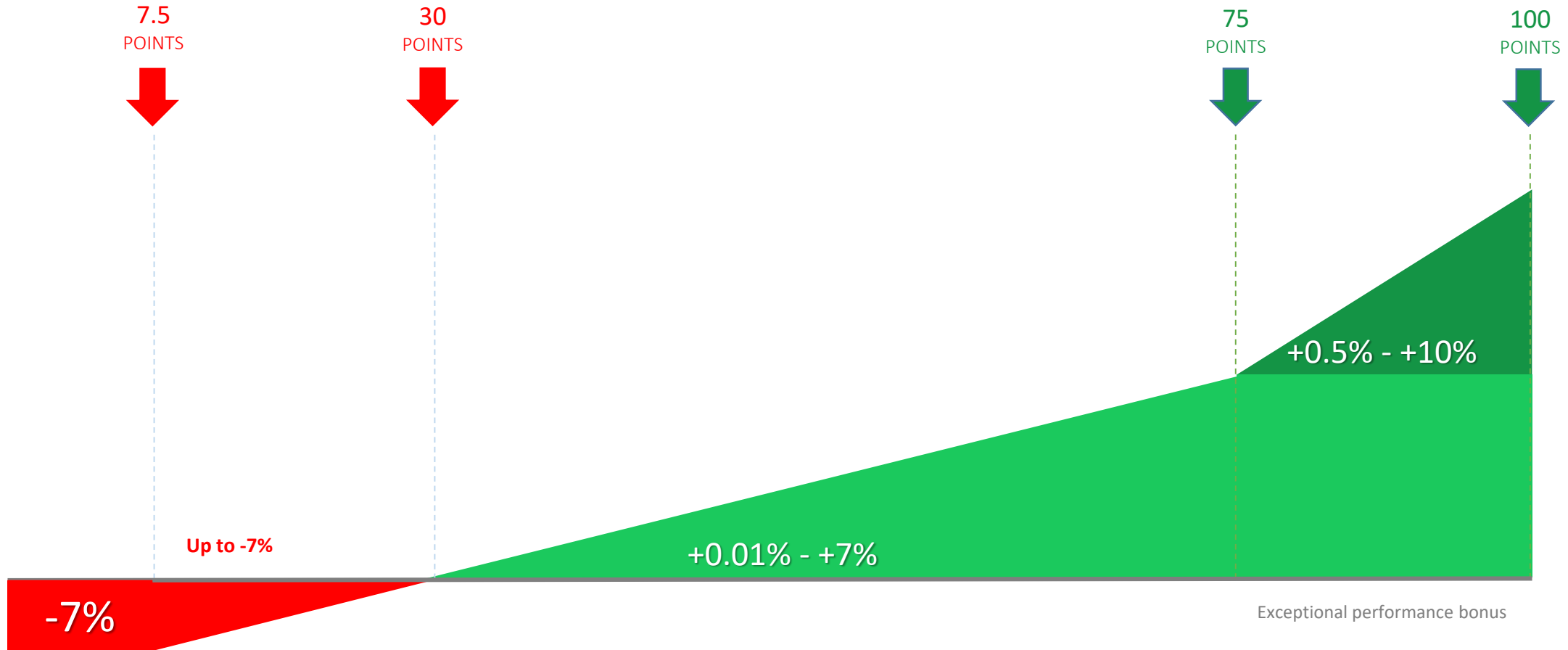
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RY 2018 Point Thresholds



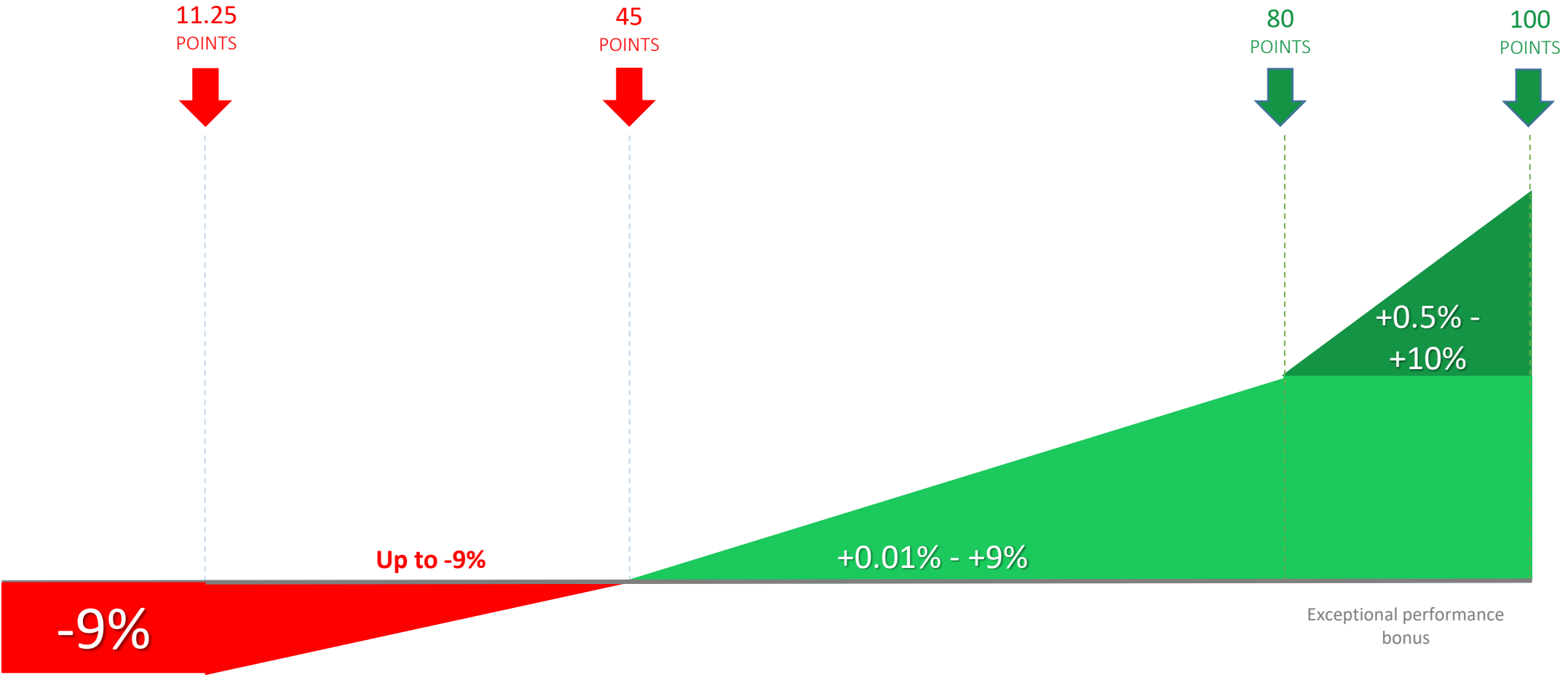
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RY 2019 Point Thresholds



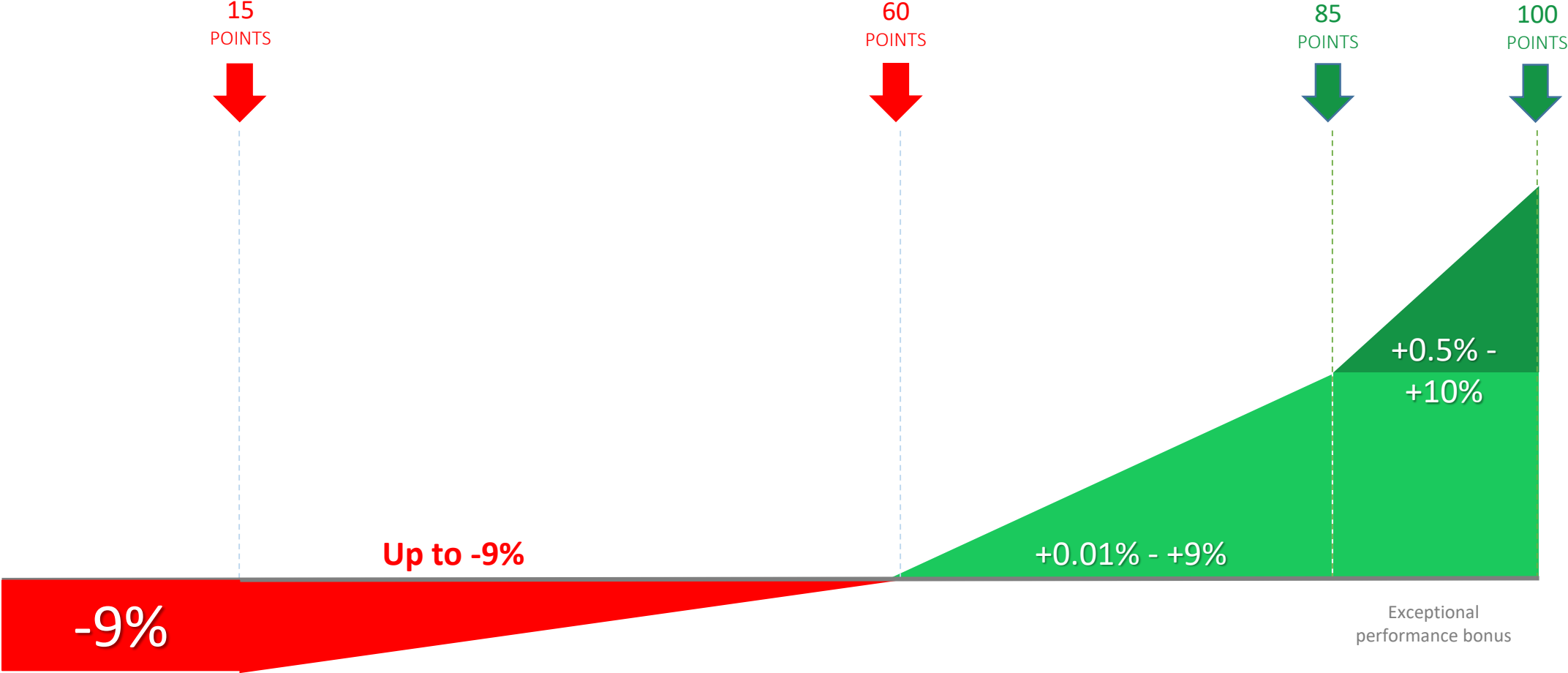
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RY 2020 Point Thresholds



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RY 2021 Point Thresholds



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Poll - Confidence



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QPP – Eligibility & Score Checking



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Changes to Eligibility

- No new providers will be MIPS eligible in 2020
- Exclusions for non-patient facing groups
- **No changes to Low-Volume Threshold, Opt-in, or determination period**



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QPP.CMS.GOV

- **Check your status** – eligibility, submission, and more
- **View Score Details** – drill into your details to learn more about your score in each category
- **Search for Measures** – measures are updated and revised whenever changes are announced



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Welcome back

Account Home

Eligibility & Reporting

Facility Based Preview

Performance Feedback

Manage Access

Help and Support



Final 2018 Performance Feedback Available

Your final 2018 performance year feedback is now available.

[VIEW FEEDBACK](#)



2018 Submission Window has Closed

As of Tuesday, April 2nd at 8:10 p.m. EDT, you are no longer able to submit your information, 2019 submission window will open January 2, 2020.

[VIEW ELIGIBILITY DETAILS](#)

→← COLLAPSE



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NOT A REAL PRACTICE, LLC

TIN: #123456789 | 123 Main St., Doctorville, GA 12345-5555

✓ **MIPS ELIGIBLE**

Exceeds Low Volume Threshold: Yes

Medicare Patients at this Practice: 3,822

Allowed Charges at this Practice: 4,612,944

Special Statuses, Exceptions and Other Reporting Factors: none

APM Participation at the Practice Level: 1 APM Entity

[+ View APM entity details](#)

Reporting for PY 2018 is closed



[VIEW CLINICIAN ELIGIBILITY](#)

[View PY 2018 performance feedback](#)



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Practices

Select one of the Practices below to view its performance details.


Enter full or partial TIN

Q


Showing 1 - 4 of 4 Practices

NOT A REAL PRACTICE, LLC

TIN: 12356789 | 123 Main St., Doctorville, GA 12345-5555



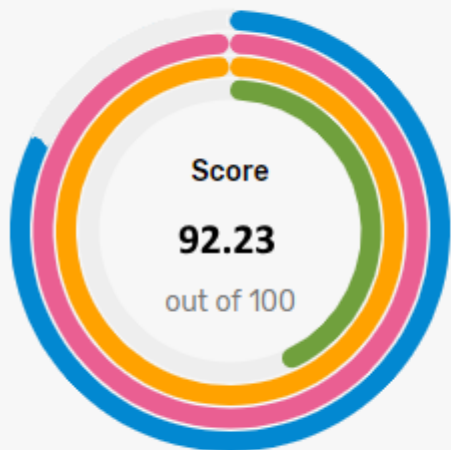
VIEW PRACTICE DETAILS

Download Data 

Final Score	Total Payment Adjustment	Payment Adjustment Date
92.23 out of 100	+1.25	Jan. 1, 2020



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Performance Category Scores

● Quality	45 of 50
● Promoting Interoperability	25 of 25
● Improvement Activities	15 of 15
● Cost	4.64 of 10
● Additional Awarded Bonus Points	2.59

MIPS Adjustment(s)

Payment Adjustment	0.3%
Exceptional Performance Adjustment	0.95%

Total	+1.25%
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Payment Adjustment Date
January 1, 2020

[Learn More](#)



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RY 2018 By the Numbers

- Greater % of providers hitting positive payment adjustments in MIPS
- More exemptions, fewer participants in MIPS
- More providers in APMs, shielded from MIPS penalties
- CMS has lowered the “ramp”



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RY 2019 Participation

- Updated exclusions, but new clinician types added
- “Opt-in” option now available
- APMs are shifting still
- Goal is Exceptional Performance



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Poll – Increased Participation



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Final Poll – How Ready Are You?



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What You Need to Do Next

- Ready to rock? Attend the November Final Rule webinar.
- Need tweaks or a little bit of help? Attend our other four webinars.
- Need a lot of help or don't know what to do next? Contact us for a consult!



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Lunch 'n' Learn Webinar Schedule

- Quality – 9/26 @ 12:00pm
- IA & Cost – 10/3 @ 12:00pm
- 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



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