

MIPS 2020 Final Rule

A SHP Lunch 'n' Learn Series

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Data & Quality – Project Manager



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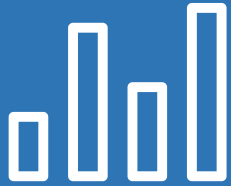
Speaker – Aaron Higgins

- 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 Lunch 'n' Learn Series

MIPS

Overview

Quality

IA & Cost

PI

Plan

MIPS 2020 FINAL RULE



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Topics

1. Final Rule Summary
2. Category Changes
3. Score Changes
4. MVPs
5. APMs



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Final Rule Summary



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10,000 Ft View

1. CMS seeks to simplify MIPS with the MIPS Value Pathways (MVPs)
2. MVPs will be phased in, starting in 2021
3. Category Weights will not change for 2020.
4. Category Weights may change for 2021, TBD
5. The performance threshold will move to 45 points in 2020
6. Exceptional performance will be 85 points
7. For 2021, the performance threshold will be 60 points
8. Exceptional performance in 2021 will be 85 points



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Category Changes



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Quality Category Changes

1. Data Completeness goes to 70%
2. Removal of “low-bar” measures & creation of new ones
3. Adjusting measure’s benchmarks
4. Re-focusing on High-Priority/Outcome Measures
5. New Specialty Measure Sets



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Measure Changes Detail

- New Measures

- 476, 477, 478
- Adult Immunization Status (no #)

- Removed Measures

- 68, 91, 109, 131, 160, 165, 166, 179, 192, 223, 255, 262, 271, 325, 328, 329, 330, 343, 345, 346, 347, 352, 353, 361, 362, 371, 372, 388, 411, 417, 428, 442, 446, 449, 454, 456, 467, 474

- Changed Measures

- 1, 5, 7, 8, 9, 19, 66, 76, 102, 107, 110, 111, 112, 113, 117, 119, 128, 134, 143, 144, 176, 177, 178, 180, 181, 182, 191, 217, 218, 219, 220, 221, 222, 226, 236, 238, 240, 243, 268, 282, 282, 286, 288, 290, 305, 317, 326, 332, 335, 336, 337, 342, 348, 370, 377, 378, 379, 382, 385, 391, 392, 393, 394, 405, 415, 416, 418, 438, 439, 440, 441, 448, 450, 459, 460, 461, 462, 469, 470, 471, 472, 473, 475



Where to Find the Final Rule

- The Final Rule “published edition” is available via download
<https://www.federalregister.gov/documents/2019/11/15/2019-24086/medicare-program-cy-2020-revisions-to-payment-policies-under-the-physician-fee-schedule-and-other>
- This published document is “only” 996 pages long, making it easier to search than the original Final Rule released in November.



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Cost Category Changes

1. Ten new “episode” measures:

[Section III.K.3.c.(2)(b)(ii-ii)]

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 (groups only)
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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Cost Category Changes Continued

2. Revising the MSPB and TPCC measures [Section III.K.3.c.(2)(b)(V)(A-B)]

1. Total Per Capita Cost

1. Changes to the risk-window to not allow pre-visit costs association
2. Certain non-PCP specialists will be auto-excluded from PCP-related costs
3. Risk-Adjustment model will be 1-month instead of 1-year
4. Costs will be evaluated monthly instead of yearly

2. Medicare Spending Per Beneficiary

1. Team-based attribution
2. Service exclusions for costs unlikely influenced by a clinician



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Improvement Activities Changes [Section III.K.3.c.(3)(b-f)]

1. Removed specific example of entity names for PCMHs.
2. Increased the amount of participants in an activity from 1 clinician to 50%
3. Created rules for removal of Activities & promptly removed some
4. Added/changed several Activities
5. Complete the Study on FARQM



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Improvement Activities Changes

- 2 New Activities
- 7 Changed Activities
- 15 Removed Activities
- Page 947 – Published Final Rule



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Promoting Interoperability Changes [Section III.K.3.c.(4)(b-f)]

1. Kept Query of PDMP with Bonus intact for 2019, but kept it optional and as an attestation measure
2. Removed Verify Opioid Treatment Agreement for 2020
3. Reduced the threshold of hospital-based clinicians from 100% to 75%
4. If an exclusion is claimed for the Support Electronic Referral Loops by Sending Health Information measure the points are instead reassigned to the Provide Patients Electronic Access to Their Health Information measure
5. Clinicians eligible for auto-reweight remain the same as prior years.



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QCDR/Registry Changes [Section III.K.3.g.(3)]

1. Require QCDRs & Registries to support all Categories (Quality, PI & IA) by 2021
2. Require QCDRs & Registries to provide “enhanced” performance feedback that compares them against other providers in the QCDR/Registry by 2021
3. Require QCDR Measures be fully-developed and tested before nomination by 2021
4. Require QCDRs to harmonize measures that are similar to one another



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Questions?



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Score Changes



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Proposed 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% |



Final Category Weight Changes

| 2019 | 2020 | 2021 | 2022* |
|---|---|---|--|
| Quality = 45% PI = 25% IA = 15% Cost = 15% | Quality = 45% PI = 25% Cost = 15% IA = 15% | Quality = ??% PI = 25% Cost = ??% IA = 15% | Quality = 30% Cost = 30% PI = 25% IA = 15% <small>*Required by MACRA</small> |



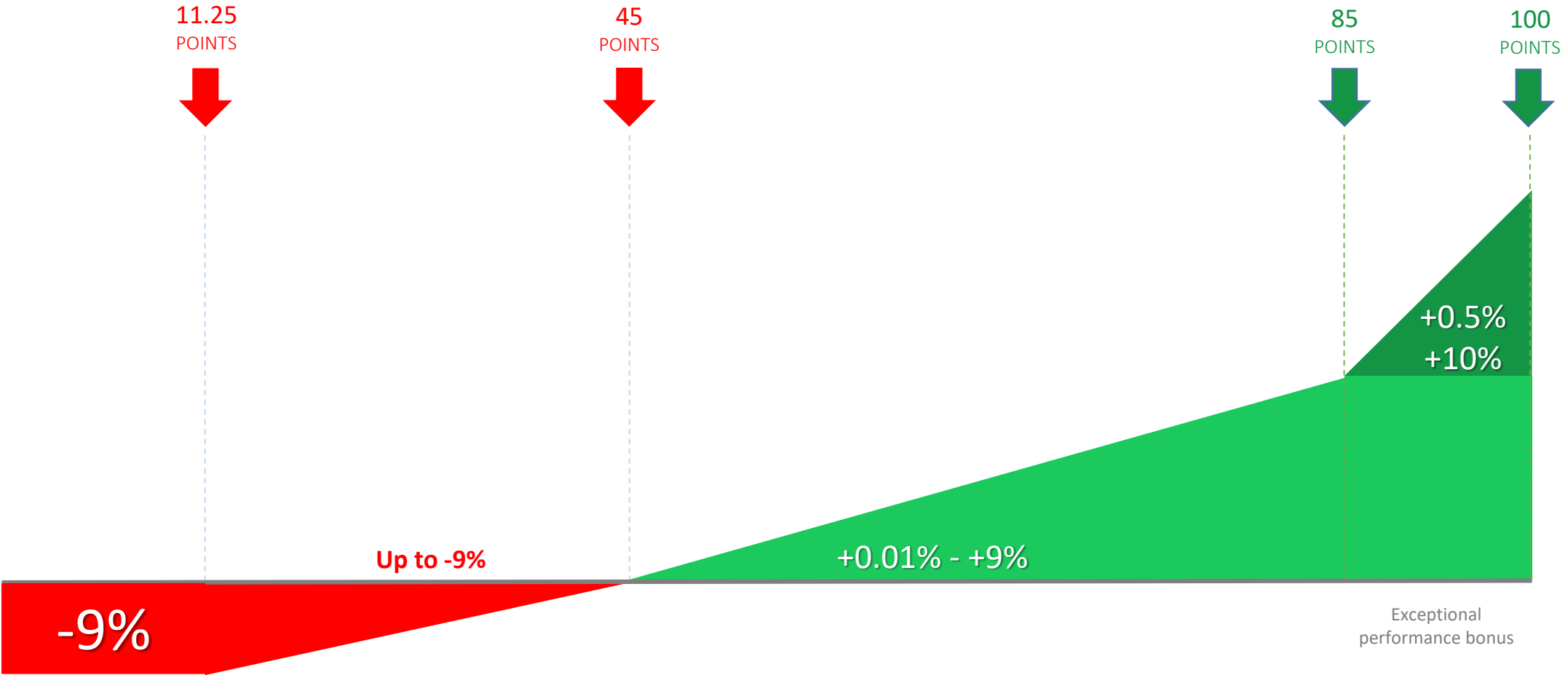
Final Performance Threshold Changes

| 2020 | 2021 | 2022+ |
|-----------------------|----------------------|--|
| 0 – 11.5 = -9% | 0 – 15 = -9% | Mean or Median average of final scores of all MIPS clinicians in prior year. |
| 11.6 – 45 = Up to -9% | 15 – 60 = Up to -9% | |
| 45 – 100 = Up to +9% | 60 – 100 = Up to +9% | Guessitmate = 76-83 |
| 85 – 100 = +.5%-10% | 85 – 100 = +.5%-10% | Guessitmate = 90 |



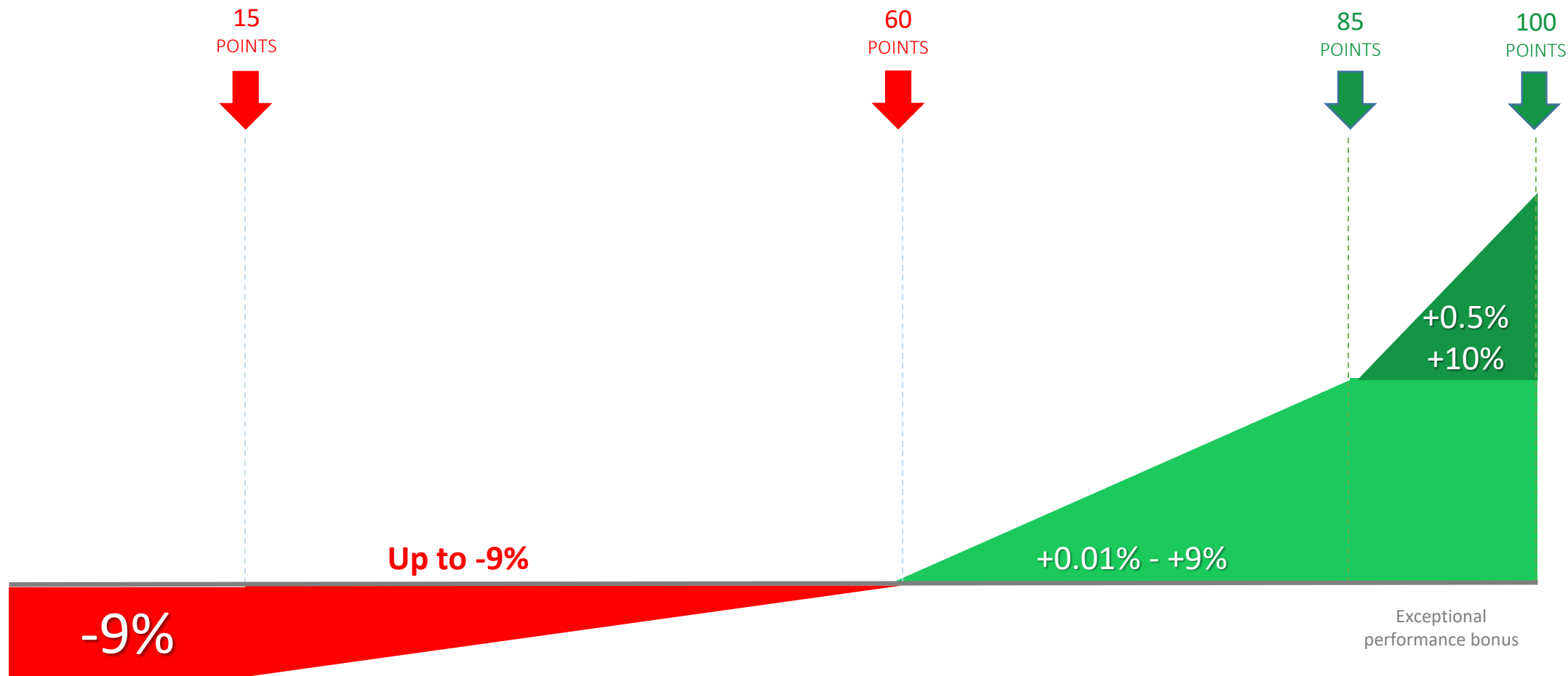
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R.Y. 2020 Point Thresholds – Final Rule



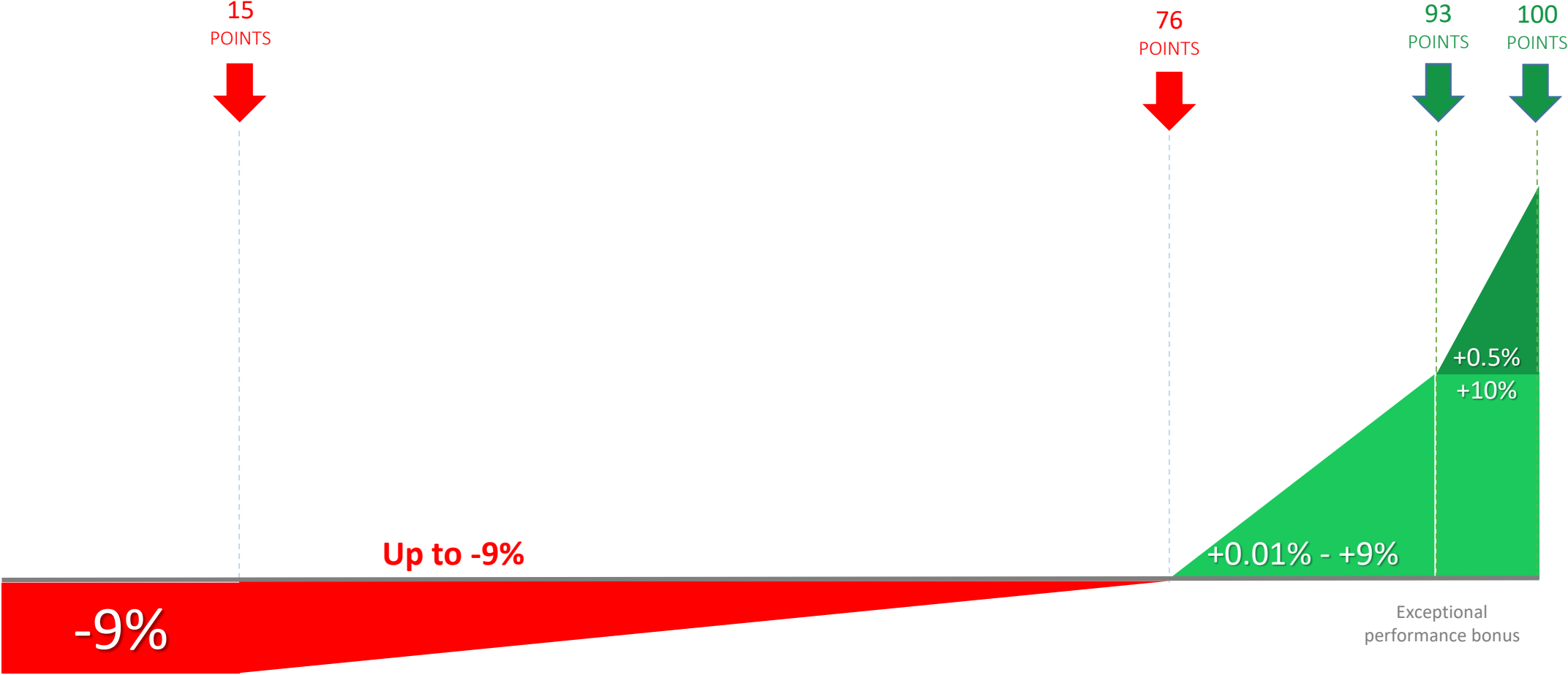
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RY 2021 Point Thresholds – Final Rule



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R.Y. 2022 Point Thresholds – Best Guess



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Poll – Scoring Changes



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~~Most Valuable Player~~ MIPS Value Pathways



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Genesis of the MVP

- Complaints that MIPS...
 - ...has too many choices
 - ...has confusing performance requirements
 - ...categories are not aligned/too siloed
 - ...performance comparability is not fair across practice types
 - ...excludes the patient's experience
- CMS Introduced Patients Over Paperwork



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MVPs Framework

- Changes the way clinicians will participate in MIPS [Section III.K.3.a.(2)]
- Framework to be fleshed out over 2020 [Section III.K.3.a.(2)]
- 2021 is when the program will start [Section III.K.3.a.(2)]



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Have We Reached Nirvana?

- Maybe?
- MVPs are untested and are more ridged than current MIPS
- CMS has said the MVPs program is structured like an APM on purpose



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Let's stop for some Questions

- Does MVPs leave you confused?
- Will MVPs make it easier for your practice?



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APMs and Advanced APMs



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A Quick Review of APM/AAPM Changes

- New definition for a new type of Medical Home Model
- Marginal Risk Rate Averages
- MIPS APMs and the Quality Category



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What You Need to Do Next

- Read the FAQ (in Handouts)
- Provide Feedback to CMS
- Need a lot of help or don't know what to do next? Contact us for a consult!



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Got Questions?

Send us your MIPS questions:
quality@shpllc.com



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