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MIPS Payment Adjustment in 2019

Payment adjustment made up of four parts shown below.

1. Quality - This will be gleaned off of the CQMs that we report which are the new PQRS. Measures are physician selected and we have many very good ones to report.
2. Advancing Care Information - This is the next phase of Meaningful Use. All of our providers meet these measures and will continue to do so.
3. Clinical Improvement Activities – “Clinicians participating in medical homes earn ***full credit*** in this category.” We meet this.
4. Cost – The will be gleaned off of claims data. There is nothing to do on our part for this.

So, in summary, we have all of the pieces under control already.

MIPS: Scoring System		
Summary of MIPS Performance Categories		
Performance Category	Maximum Possible Points per Performance Category	Percentage of Overall MIPS Score (Performance Year 1 - 2017)
 Quality: Clinicians choose six measures to report to CMS that best reflect their practice. One of these measures must be an outcome measure or a high-value measure and one must be a crosscutting measure. Clinicians also can choose to report a specialty measure set.	80 to 90 points depending on group size	50 percent
 Advancing Care Information: Clinicians will report key measures of interoperability and information exchange. Clinicians are rewarded for their performance on measures that matter most to them.	100 points	25 percent
 Clinical Practice Improvement Activities: Clinicians can choose the activities best suited for their practice; the rule proposes over 90 activities from which to choose. Clinicians participating in medical homes earn “full credit” in this category, and those participating in Advanced APMs will earn at least half credit.	60 points	15 percent
 Cost: CMS will calculate these measures based on claims and availability of sufficient volume. Clinicians do not need to report anything.	Average score of all cost measures that can be attributed	10 percent