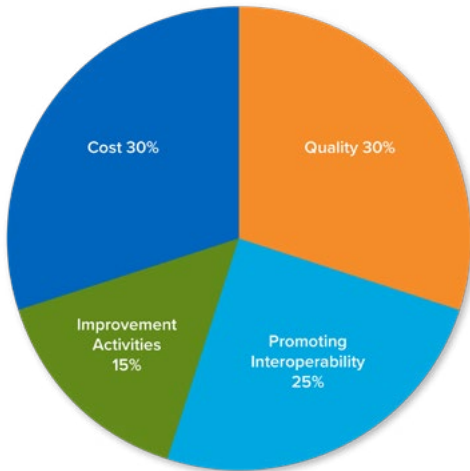


IMPROVEMENT ACTIVITIES CATEGORY GUIDE 2023

➤ Step-by-step Success

MIPS Performance

Categories for 2023



CHOOSE AND REPORT ON 1 TO 4 IMPROVEMENT ACTIVITIES (IA)

To earn the full 15% you need 40 IA points

Medium weight = 10 points*, High weight = 20 points*
 More than 100 activities to choose from
 Performance period is at least 90 consecutive days

* **Note:** Points are doubled for those granted special statuses which include: small practices, Health Professional Shortage Area (HPSA) and rural areas. - Medium = 20 points, High = 40 points

Note: If you are a participant in a certified patient-centered medical home, you will earn the maximum Improvement Activity category score by attesting to this during the submission period.

AdvancedMD Step by Step

1. Choose your Improvement Activities

Go to <https://qpp.cms.gov/mips/improvement-activities> to choose between 1 to 4 Improvement Activities. Select the appropriate performance year.

2. Click on the name of the IA to see the details

Check for details about timeframes (if longer than 90 days it will detail how long), process/improvements to be incorporated into your workflow and data to be documented.

Engagement of patients through implementation of improvements in patient portal

Access to an enhanced patient portal that provides up to date information related to relevant chronic disease health or blood pressure control, and includes interactive features allowing patients to enter health information and/or enables bidirectional communication about medication changes and adherence.



| Subcategory Name | Activity Weighting |
|------------------------|--------------------|
| Beneficiary Engagement | Medium |

+ View Details

Add to List – create a csv file (comma separated values) that you can import into excel that will have the details from this chart for each of your 'added' Improvement Activities

Activity – description of the details for this Activity – what data you need to document, process changes to incorporate into your workflow, etc.

Activity Weighting – Medium or High

3. See what each activity requires:

<https://qpp.cms.gov/about/resource-library>

↓ MIPS Improvement Activities User Guide

A guide to help clinicians participating in the improvement activities performance category of the Merit-based Incentive Payment System

4. Document as you complete each Improvement Activity

Each Improvement Activity will have different documentation needs—become familiar with the details of the activity and record what you do and any needed outcomes.

5. Your Improvement Activity Score

***Note:** Points are doubled for small, rural, and underserved practices – Medium = 20 points, High = 40 points

IMPROVEMENT ACTIVITIES (IA)

POSSIBLE: 40

*Medium

10

*High

20

$$\text{PTS} / 40 \times 100 = \text{IA}$$

For MTS

$$\text{IA} \times .15 = \text{MTS IA}$$

2023 Changes to Improvement Activities:

4 New

1. Adopt Certified Health Information Technology for Security Tags for Electronic Health Record Data
2. Create and Implement a Plan to Improve Care for Lesbian, Gay, Bisexual, Transgender, and Queer Patients
3. Create and Implement a Language Access Plan
4. COVID-19 Vaccine Achievement for Practice Staff

6 Removed

1. IA_BE_7 Participation in a QCDR, that promotes use of patient engagement tools
2. IA_BE_8 Participation in a QCDR, that promotes collaborative learning network opportunities that are interactive
3. IA_PM_7 Use of QCDR for feedback reports that incorporate population health
4. IA_PSPA_6 Consultation of the Prescription Drug Monitoring Program
5. IA_PSPA_20 Leadership engagement in regular guidance and demonstrated commitment for implementing practice improvement changes
6. IA_PSPA_30 PCI Bleeding Campaign

Modified 5 Activities

Commonly Used Improvement Activities for AdvancedMD Users

See individual IA measures <https://qpp.cms.gov/mips/improvement-activities> or refer to the complete list of 2023 measures <https://qpp.cms.gov/about/resource-library>. Here are a few of the IAs documented in your EHR:

| Activity ID | Activity Title | Activity Weighting | Documentation Suggestions within AdvancedMD |
|-------------|--|--------------------|--|
| IA_BE_25 | Drug Cost Transparency | High | Provide counseling to patients and/or their caregivers regarding: costs of medications using a real time benefit tool (RTBT) which provides to the prescriber real-time patient-specific formulary and benefit information for drugs, including cost-sharing for a beneficiary |
| IA_EPA_1 | Provide 24/7 access to eligible clinicians or groups who have real-time access to patient's medical record | High | Use AdvancedTelemedicine and connect to the patient and with other clinicians on that patient's care team – document all coordinated care in note fields in EHR |
| IA_BE_4 | Engagement of patients through implementation of improvements in patient portal | Medium | Use the Patient Portal to share patient education about the patient's chronic disease Send/receive messages about medication changes and adherence |
| IA_BE_1 | Use of certified EHR to capture patient reported outcomes | Medium | Utilize AdvancedPatient to send forms to patients through the Patient Portal to capture patient reported outcomes Patient forms are retained within the patient chart for the clinician to review and acknowledge Messages could be sent/received as needed between patient and clinician through the Patient Portal |
| IA_PM_16 | Implementation of medication management practice improvements | Medium | Utilize medication reconciliation/review feature, add pharmacist to care team field in notes, use patient reporting to identify and conduct structured medication reviews |

Multiple Category Measures

A few of the IAs meet other MIPS Category Measures:

| Activity Title | Activity Weighting | Documentation Suggestions within AdvancedMD |
|--|--------------------|--|
| Improvement Activity IA_CC_1 Implementation of use of specialist reports back to referring clinician or group to close referral loop | Medium | Quality Measure: CMS 50 Follow procedures using the eCQM CMS 50 "Closing the Referral Loop" subnote to document efforts to coordinate care between clinicians |
| Improvement Activity IA_PSPA_21 Implementation of fall screening & assessment programs | Medium | Quality Measure CMS 139 Utilize the eCQM Fall Screening CMS 139 related notes/subnotes in the Template Library for screening, assessment and follow up. Use HealthWatcher to prompt and help address modifiable risk factors |
| Improvement Activity IA_BMH_4 Depression Screening | Medium | Quality Measure: CMS 2 Utilize the eCQM Depression Screening CMS 2 notes/subnotes to document depression screening and follow-up plans |
| Improvement Activity IA_AHE_3 Promote Use of Patient-Reported Outcome Tools | High | Quality Measure: CMS 90 Use AdvancedPatient forms for patients to periodically answer patient-reported outcome questions (i.e. PHQ9) that are incorporated into their medical record and actions taken, if applicable |
| Improvement Activity IA_BMH_2 Tobacco use | Medium | Quality Measure: CMS 138 Utilize the eCQM CMS 138 Tobacco Screening note/subnote to document required fields for the measure |