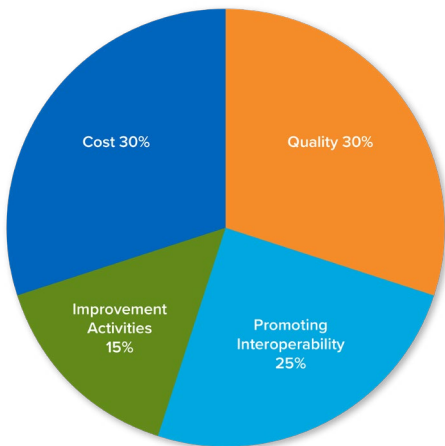


# 2024 TRADITIONAL MIPS IMPROVEMENT ACTIVITIES CATEGORY GUIDE

➤ Step-By-Step Success

# Overview of Traditional MIPS Improvement Activities Category



## CHOOSE AND REPORT 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.

+ ADD TO LIST

Subcategory Name	Activity Weighting
Beneficiary Engagement	Medium

+ View Details

### 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.

#### ↓ 2023 MIPS Data Validation Criteria

ZIP 2MB | PY 2023 | MIPS, APMs | Technical Guides and User Guides

Lists the 2023 criteria used to audit and validate data submitted for the Merit-based Incentive Payment System (MIPS) performance categories.

### 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

PTS

/ 40 × 100 = IA

IA

For MIPS Total Score  
× .15 = MTS IA

## 2024 Changes to Improvement Activities:

### New (4)

1. Improving Practice Capacity for Human Immunodeficiency Virus (HIV) Prevention Services
2. Use of Computable Guidelines and Clinical Decision Support to Improve Adherence for Cervical Cancer Screening and Management Guidelines
3. Behavioral/Mental Health and Substance Use Screening & Referral for Pregnant and Postpartum Women
4. Behavioral/Mental Health and Substance Use Screening & Referral for Older Adults

### Changed (1)

1. Use of Decision Support and Standardized Treatment Protocols

### Removed (3)

1. Implementation of Co-Location PCP and MH Services
2. Obtain or Renew an Approved Waiver for Provision of Buprenorphine as Medication-Assisted Treatment for Opioid Use Disorder
3. Consulting Appropriate Use Criteria (AUC) Using Clinical Decision Support when Ordering Advanced Diagnostic Imaging

New MVP Only Improvement Activity: Practice-Wide Quality Improvement in MIPS Value Pathways (See MVP Guide for details).

## 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 2024 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 AdvancedMD telemedicine 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 the AdvancedMD consent forms 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 activities overlap with other MIPS Category's

Activity Title	Activity Weighting	Documentation Suggestions within AdvancedMD
<b>Improvement Activity IA_CC_1</b> Implementation of use of specialist reports back to referring clinician or group to close referral loop	Medium	<b>Quality Measure: CMS 50</b> Follow procedures using the eCQM CMS 50 "Closing the Referral Loop" subnote to document efforts to coordinate care between clinicians
<b>Improvement Activity IA_PSPA_21</b> Implementation of fall screening & assessment programs	Medium	<b>Quality Measure CMS 139</b> 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
<b>Improvement Activity IA_BMH_4</b> Depression Screening	Medium	<b>Quality Measure: CMS 2</b> Utilize the eCQM Depression Screening CMS 2 notes/subnotes to document depression screening and follow-up plans
<b>Improvement Activity IA_AHE_3</b> Promote Use of Patient-Reported Outcome Tools	High	<b>Quality Measure: CMS 90</b> 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
<b>Improvement Activity IA_BMH_2</b> Tobacco use	Medium	<b>Quality Measure: CMS 138</b> Utilize the eCQM CMS 138 Tobacco Screening note/subnote to document required fields for the measure