

MIPS Highlights

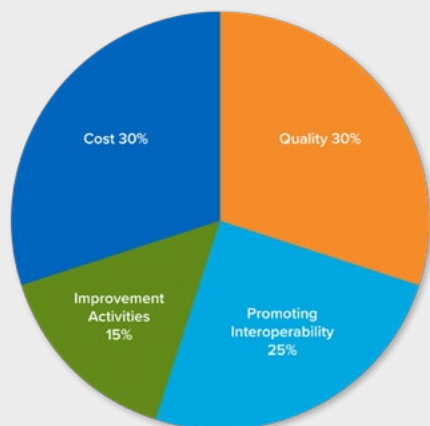
2023 Updates

New: Quality measures (CMS 147) Preventive Care and Screening Influenza Immunization and (CMS 127) Pneumococcal Vaccination Status for Older Adults available for MVP only

New: 2022 performance year was the final year for an additional performance threshold/additional MIPS adjustment for exceptional performance

New: Query of Prescription Drug Monitoring Program (PDMP) measure is Required for the PI Category and has been removed from the Improvement Activities Category

New: Discontinued the Promoting Interoperability automatic re-weighting for Nurse Practitioners, Physician Assistants, CRNA and CNS



MIPS Performance Categories

Quality – 12 months – 30% Final Score

- Choose 6 Quality Measures
- Measures can be submitted with multiple collection types
- At least 1 Outcome Measure (or High Priority Measure)
- Measures without a benchmark or do not meet case minimum (20 cases) will earn 0 points (Except small practices)
- 70% Data Completeness

PI (Promoting Interoperability) – 90 consecutive days – 25% Final Score

Scoring methodology for performance period CY 2023.

Objective	Measure	Maximum Points
Electronic Prescribing	e-Prescribing*	10 points
	Query of PDMP*	10 points
Health Information Exchange	Support Electronic Referral Loops by Sending Health Information*	15 points
	Support Electronic Referral Loops by Receiving and Reconciling Health Information*	15 points
	Health Information Exchange Bi-Directional Exchange	30 points
	Participation in TEFCA	30 points
Provider to Patient Exchange	Provide Patients Electronic Access to Their Health Information	25 points
Public Health and Clinical Data Exchange	Report the following 2 measures: <ul style="list-style-type: none"> • Immunization Registry Reporting* • Electronic Case Reporting* 	25 points
	Report on any of the following measures: <ul style="list-style-type: none"> • Syndromic Surveillance Reporting • Public Health Registry Reporting • Clinical Data Registry Reporting 	5 points (bonus)

Notes: The Security Risk Analysis measure and the SAFER Guides measure are required, but will not be scored.

* Exclusions Available

IA (Improvement Activities) – 90 consecutive days – 15% Final Score

- Choose from 100+ activities
- Complete 1 to 4 IAs for up to 40 points
 - High = 20 points, Medium = 10 points
- For group reporting, at least 50% of the clinicians in the group must perform the same improvement activity for any continuous 90-day period

Cost – 12 months – 30% Final Score

CMS calculates using claims submitted.

Maximum cost improvement score of 1 percentage point out of 100 percentage points available for the cost performance category starting with the CY 2022 performance period/2024 MIPS payment year.

Small Practice Benefits

Automatic reweighting of Promoting Interoperability category

Quality 40%, Cost 30%, IA 30%

Permissible to submit claim based measures

Submit at least one quality measure and you will also receive 6 bonus points in the quality performance category

Receive 2x the points for each improvement activity submitted

Who is eligible to participate?

Physician, Osteopathic Practitioner, Chiropractor, PA, NP, CNS, CRNA, PT, OT, Clinical Psychologist, Qualified speech-language pathologist, Qualified audiologist, Registered dietitian or nutrition professional, Clinical social workers, Clinical nurse midwives

Go to <https://qpp.cms.gov/participation-lookup>, enter your NPI to see participation requirements.

Have you exceeded these low volume thresholds?

\$90,000 in Medicare Part B allowable charges

200 Medicare Part B beneficiaries

200 Medicare Part B covered professional services

If you:

exceed all 3 thresholds you **MUST** participate

exceed at least 1 you **MAY OPT IN**

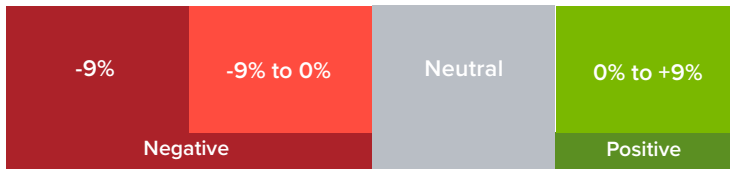
don't exceed any thresholds you **MAY NOT** participate

How many points do you need in 2023?

75 points to avoid a negative adjustment in 2025

Final score will equal $Q + PI + IA + Cost$

Based on your final score your payment adjustment in 2025 could be



Where can you find details for what you need to do?

QPP.CMS.gov