

QPP: 2018 Improvement Activities

Under the Merit-Based Incentive Payment System (MIPS), Improvement Activities (IAs) is one of four categories on which eligible clinicians are scored. Clinicians can maximize their points in the IA category by participating in specified activities, which intend to improve clinical practice or care delivery, such as care coordination, beneficiary engagement, patient safety and expanded access for patients.

Basics of Improvement Activities

- 15% of total MIPS score
- Total Category Points Needed: 40 Points
 - Highly= 20 points
 - Medium= 10 points
- 112 Activities across 9 subcategories
- Must perform activities for at least 90 consecutive days during the performance year
 - **Can begin prior to performance year, and/or continue after*
- Data submission requirement, must attest “Yes”
- **Keep documentation for 6 years*

Special Considerations

- CMS Designation of Small, Rural, HPSAs, & Non
- Patient Facing MIPS ECs qualifies for increased weighting
- Highly-Weighted activities = 40 points
- Medium-Weighted Activities = 20 points

Classifications

- **Rural**= Zip codes using most recent HRSA Area
- **Small**= ≤ 15 ECs
- **HPSA**= Areas as designated under Public Health Service Act
- **NPF**= An individual who bills 100 or less patient-facing encounters annually

Patient Centered Medical Home/Patient Centered Specialty Practice – ***NEW for Year 2**

At least 50% of practice sites within the TIN must be certified/recognized as a PCMH or comparable specialty practice to receive full IA category credit

** A practice site is the physical location where services are delivered, and the practice address that is available within PECOS (Provider Enrollment, Chain, & Ownership System)*

Bonus Points Opportunity

- Potential to earn bonus points using specified PI/IA cross cutting measures
 - Completing at least 1 CEHRT designated IA will earn up to a 10% Bonus in the PI performance category

APMs & MIPS APMs Scoring

- QPs in an Advanced APM should receive full credit
- All current APM designated Medical Home Models should receive full credit
- Any other APM participants will earn 50% credit, and have the ability to perform additional IAs to increase the score

Submission Methods

Same for both Individual & *Group reporting

**Group submissions, including Virtual Groups, only require one MIPS EC in a TIN to perform an IA for 90 days for the entire TIN to receive credit*

➤ **Qualified Registry** ➤ **EHR** ➤ **QCDR** ➤ **CMS Web Interface** ➤ **Attestation**

Funding for this document was provided by Funding Opportunity Number CMS-1L1-15-003 from the U.S. Department of Health & Human Services, Centers for Medicare & Medicaid Services. The contents provided are solely the responsibility of the authors and do not represent the official views of HHS or any of its agencies. The information contained in this presentation is for general information purposes only. The information is provided by UK HealthCare's Kentucky Regional Extension Center and while we endeavor to keep the information up to date and correct, we make no representations or warranties of any kind, express or implied, about the completeness, accuracy, reliability, suitability or availability with respect to content.