

QPP: 2019 Improvement Activities

Under the Merit-Based Incentive Payment System (MIPS), Improvement Activities (IAs) is one of four categories on which eligible clinicians (ECs) are scored. ECs can maximize their points in the IA category by participating in specified activities, which are intended 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 pts; Medium= 10 pts
- Over 100 activities across 9 subcategories
- Must perform activities for at least 90 consecutive days during the performance year
- Data submission requirement, must attest “Yes”
- Keep documentation for 6 years

Submission

- Same for both Individual, Group & Virtual Group
- Group submissions only require one MIPS EC in a TIN to perform IA 90 days for entire TIN to receive credit

Special Considerations

- CMS Designation of Small, Rural, HPSAs, & Non-Patient Facing MIPS ECs qualify for increased weighting

APMs & MIPS APMs Scoring

- QPs in an Advanced APM receive full credit
- Any other APM participants will earn 50% credit, and have the ability to perform additional IAs to increase the score

Patient Centered Medical Home/Patient Centered Specialty Practice

- 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

6 New Measures for Year 3

- Comprehensive Eye Exams
- Financial Navigation Program
- Completion of Collaborative Care Management Program
- Relationship-Centered Communication
- Patient Medication Risk Education
- Use of CDC Guideline for Clinical Decision Support to Prescribe Opioids for Chronic Pain versus Clinical Decision Support

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