

# Quality Payment PROGRAM

## MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

2020 MIPS Quick Start Guide



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Already know what MIPS is?  
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**Purpose:** This resource provides a high-level overview of the Merit-based Incentive Payment System (MIPS) requirements to get you started with participating in the 2020 performance period.



## How to Use This Guide



**Please Note:** This guide was prepared for informational purposes only and is not intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It is not intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

## Table of Contents

The table of contents is interactive. Click on a chapter in the table of contents to read that section.



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## Hyperlinks

Hyperlinks to the [QPP website](#) are included throughout the guide to direct the reader to more information and resources.



## Overview

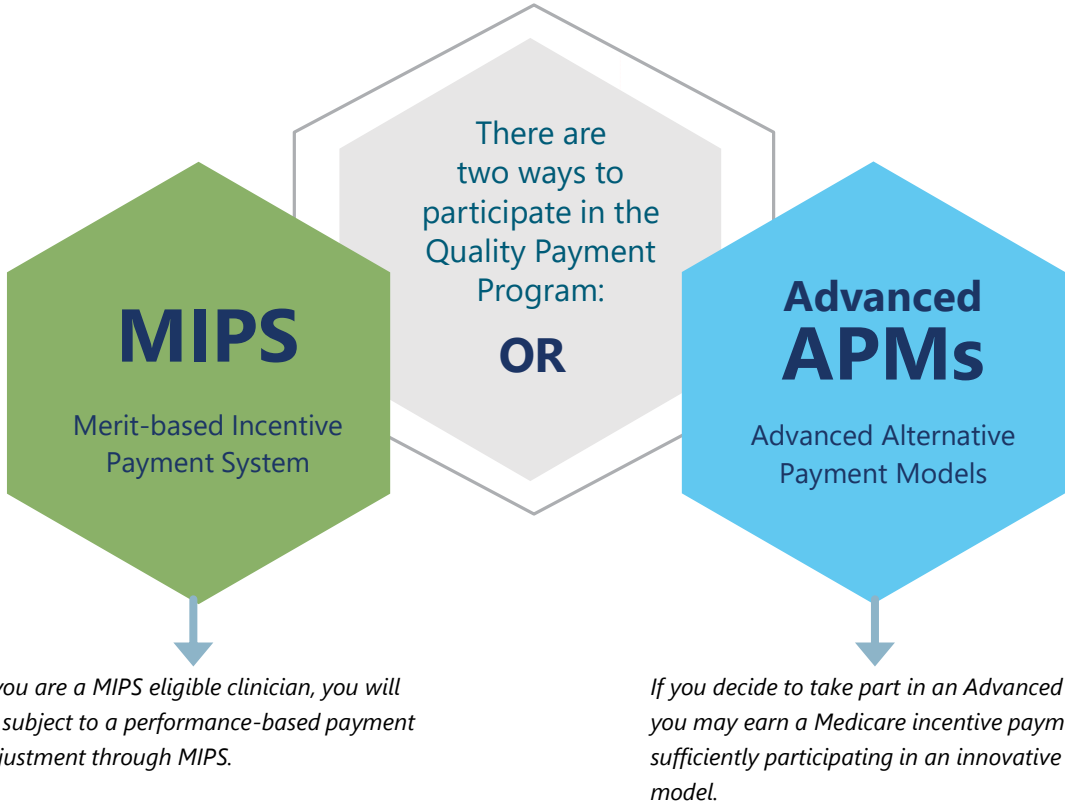


# Overview

## What is the Quality Payment Program?

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) ended the Sustainable Growth Rate (SGR) formula, which would have resulted in a significant cut to payment rates for clinicians participating in Medicare. In response to MACRA, CMS created a federally mandated Medicare program, the Quality Payment Program (QPP) that seeks to improve patient care and outcomes while managing the costs of services patients receive. Clinicians providing high value/high quality patient care are rewarded through Medicare payment increases, while clinicians not meeting performance standards will see a reduction in Medicare payments.

Clinicians may participate in the Quality Payment Program through one of two tracks:



Over time, CMS would like to see more clinicians transition from MIPS to the Advanced APMs track of the Quality Payment Program. However, this guide will only cover the **MIPS track**. For more information on participating in an APM, visit our [APMs Overview webpage](#) and check out our APMs-related resources in the [QPP Resource Library](#).

# Overview

## What is the Merit-based Incentive Payment System?

The Merit-based Incentive Payment System (MIPS) is one way to participate in the Quality Payment Program.

Under MIPS, we evaluate your performance across four categories that lead to improved quality and value in our healthcare system.

**Quality**  
Assesses the quality of care you deliver based on measures of performance.



**Promoting Interoperability**  
Focuses on the electronic exchange of health information using certified electronic health record technology (CEHRT) to improve patient access to their health information, exchange of information between providers and pharmacies, and systematic collection, analysis, and interpretation of healthcare data.

**Improvement Activities**  
Assesses your participation in clinical activities that support the improvement and patient engagement, care coordination, and patient safety.



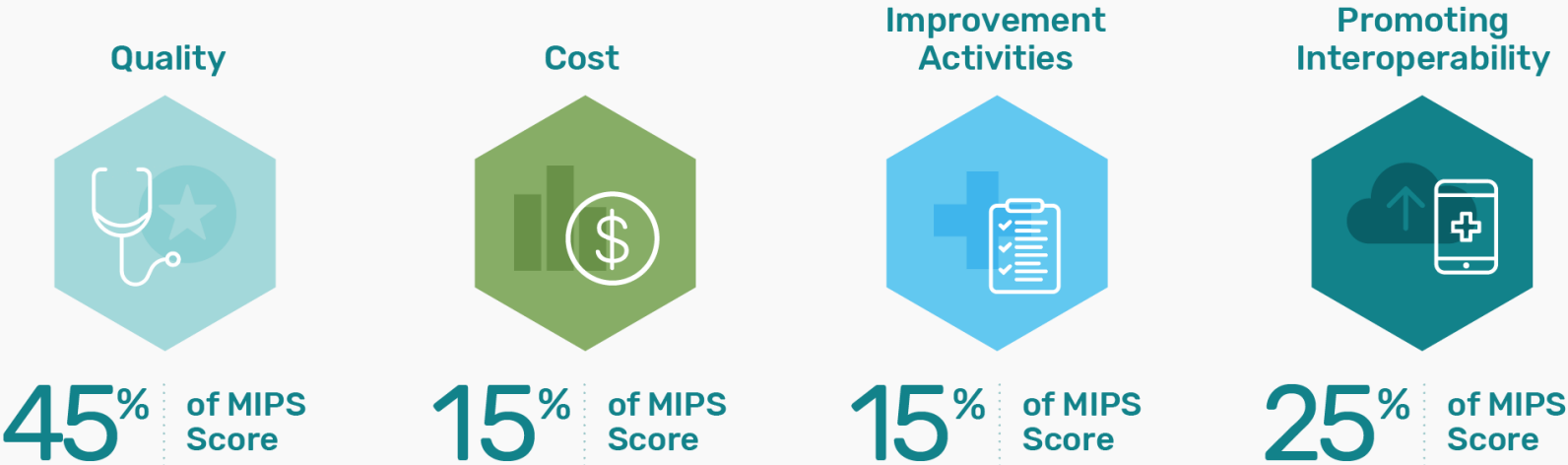
**Cost**  
Assesses the cost of the care you provide based on your Medicare claims. Cost measures are also used to gauge the total cost of patient care during the year or a hospital stay.

# Overview

## MIPS Scoring Categories

The MIPS performance categories have different “weights” and the scores from each of the categories are added together to give you a MIPS Final Score.

### MIPS performance category weights in 2020:



Please note that for MIPS APM participants, scored under the APM Scoring Standard, the performance categories have the following weights:







## Get Started with MIPS in Seven Steps

# Get Started With MIPS in Seven Steps

## 7 Steps to Get Started

The 2020 MIPS performance period is from January 1, 2020 to December 31, 2020. Following the performance period, if you submit 2020 data for MIPS by March 31, 2021, you'll receive a positive, negative, or neutral payment adjustment in the 2022 payment year, which will be based on your MIPS Final Score.

**If you're an eligible clinician and included in MIPS for the 2020 performance period you can participate:**

### Step 1. Check eligibility

- Check if you're eligible to participate in MIPS in 2020 by entering your 10-digit National Provider Identifier (NPI) in the [Quality Payment Program Participation Status Lookup Tool](#) on the QPP [website](#).
  - Note: Your preliminary eligibility will be available by January 1, 2020 and your final eligibility will be available in December 2020
- *We determine your eligibility by evaluating: your [clinician type](#), the volume of care you provide to Medicare patients ([low-volume threshold](#)), your Medicare enrollment date (you must have been enrolled before Jan 1, 2020) and the degree to which you participate in an [Advanced APM](#)\**

### Step 2. Determine how you will participate

- Individual: Collect and submit Quality, Promoting Interoperability, and Improvement Activities data for the individual clinician.
- Group/Virtual group: Collect and submit aggregated data for all clinicians in the group/virtual group for Quality, Promoting Interoperability, and Improvement Activities performance categories.
- APM: Participate with your APM Entity if you're identified as participating in a MIPS APM.

### Step 3. Select and perform your measures and activities

- [Quality](#): Most clinicians will need to select 6 measures, collecting data for each measure for the 12-month performance period (January 1 – December 31, 2020).
  - For more information, review the [2020 Quality Quick Start Guide](#)
- [Improvement Activities](#): Most clinicians will need to select between 2 and 4 activities, performing each activity for a continuous 90-day period in Calendar Year (CY) 2020 (or as indicated in the activity's description).
  - For more information, review the [2020 Improvement Activities Quick Start Guide](#)
- [Promoting Interoperability](#): Most clinicians will need to collect data on the 6 required measures for the same 90(+)-day performance period in CY 2020.
  - For more information, review the [2020 Promoting Interoperability Quick Start Guide](#)
- [Cost](#): Clinicians don't need to collect or submit any data for cost measures. We collect and evaluate this data for you.
  - For more information, review the [2020 Cost Quick Start Guide](#)

\*Advanced APM participation will be updated through the performance year, with final participation information available in December 2020.

# Get Started With MIPS in Seven Steps

## 7 Steps to Get Started *(continued)*

The 2020 MIPS performance period is from January 1, 2020 to December 31, 2020. Following the performance period, if you submit 2020 data for MIPS by March 31, 2021, you'll receive a positive, negative, or neutral payment adjustment in the 2022 payment year, which will be based on your MIPS Final Score.

**If you're an eligible clinician and included in MIPS for the 2020 performance period, you can participate:**

### Step 4. Submit your data

- Submit data yourself or with the help of a third-party intermediary, such as a Qualified Registry or Qualified Clinical Data Registry (QCDR), by March 31, 2021.
- To see the lists of CMS-approved Qualified Registries and QCDRs, visit the [QPP Resource Library](#).

### Step 5. Review your feedback

- Review your preliminary feedback, which will be provided between data submission and June 30, 2021.
- Then review your final feedback and payment adjustment information, which will be available in July 2021.

### Step 6. Note the application of payment adjustments

- You will see payment adjustments for your 2020 performance applied in 2022.

### Step 7. Review your MIPS performance data for public reporting

- Preview your 2020 MIPS performance data for public reporting in late 2021 or early 2022.



## Help, Resources, and Version History

# Help, Resources, and Version History

## Where Can You Go for Help?

- Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 AM-8:00 PM ET or by e-mail at: [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov).
  - Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.
- Connect with your [local technical assistance organization](#). We provide no-cost technical assistance to **small, underserved, and rural practices** to help you successfully participate in the Quality Payment Program.
- Visit the Quality Payment Program [website](#) for other [help and support](#) information, to learn more about [MIPS](#), and to check out the resources available in the [QPP Resource Library](#).

# Help, Resources, and Version History

## Additional Resources

The [QPP Resource Library](#) houses fact sheets, specialty guides, technical guides, user guides, helpful videos, and more. We will update this table as more resources become available.

| Resource  | Description   |
|---|---|
| <a href="#">2020 MIPS Eligibility and Participation Quick Start Guide</a>                   | A high-level overview and actionable steps to understand your 2020 MIPS eligibility and participation requirements.   |
| <a href="#">2020 MIPS Quality Performance Category Quick Start Guide</a>                    | A high-level overview and practical information about quality measure selection, data collection and submission for the 2020 MIPS Quality performance category. |
| <a href="#">2020 MIPS Promoting Interoperability Performance Category Quick Start Guide</a> | A high-level overview and practical information about data collection and submission for the 2020 MIPS Promoting Interoperability performance category.         |
| <a href="#">2020 Improvement Activities Quick Start Guide</a>                               | A high-level overview and practical information about data collection and submission for the 2020 MIPS Improvement Activities performance category.             |
| <a href="#">2020 MIPS Cost Performance Category Quick Start Guide</a>                       | A high-level overview of cost measures, including calculation and attribution, for the 2020 MIPS Cost performance category.                                     |

# Help, Resources, and Version History

## Version History

If we need to update this document, changes will be identified here.

| Date   | Change Description |
|--------|--------------------|
| 1/2/20 | Original posting   |