WELCOME!

We will begin at 12:30 PM EST

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Quality Payment Program Year 4:

MIPS APMS

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Kentucky Regional Extension Center Services

UK's Kentucky REC is a trusted advisor and partner to healthcare organizations, supplying expert guidance to maximize quality, outcomes and financial performance.

Kentucky REC Description

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To date, the Kentucky REC's activities include:

- Assisting more than 5,000 individual providers across Kentucky, including primary care providers and specialists
- Helping more than 95% of the Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) within Kentucky
- Working with more than 1/2 of all Kentucky hospitals
- Supporting practices and health systems across the Commonwealth with practice transformation and preparation for value based payment

Physician Services

1. **Promoting Interoperability (MU) & Mock Audit**
2. **HIPAA SRA, Project Management & Vulnerability Scanning**
3. **Patient Centered Medical Home (PCMH) Consulting**
4. **Patient Centered Specialty Practice (PCSP) Consulting**
5. **Value Based Payment & MACRA Support**
6. **Quality Improvement Support**
7. **Telehealth Services**

Hospital Services

1. **Promoting Interoperability (Meaningful Use)**
2. **HIPAA Security Analysis & Project Management**
3. **Hospital Quality Improvement Support**

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Your REC Advisors & Presenters

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QIA

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QIA

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Objectives

- Understanding the QPP Tracks & Participation
- Differences Between APMs & MIPS APMs
- MIPS APMs
- Next Steps

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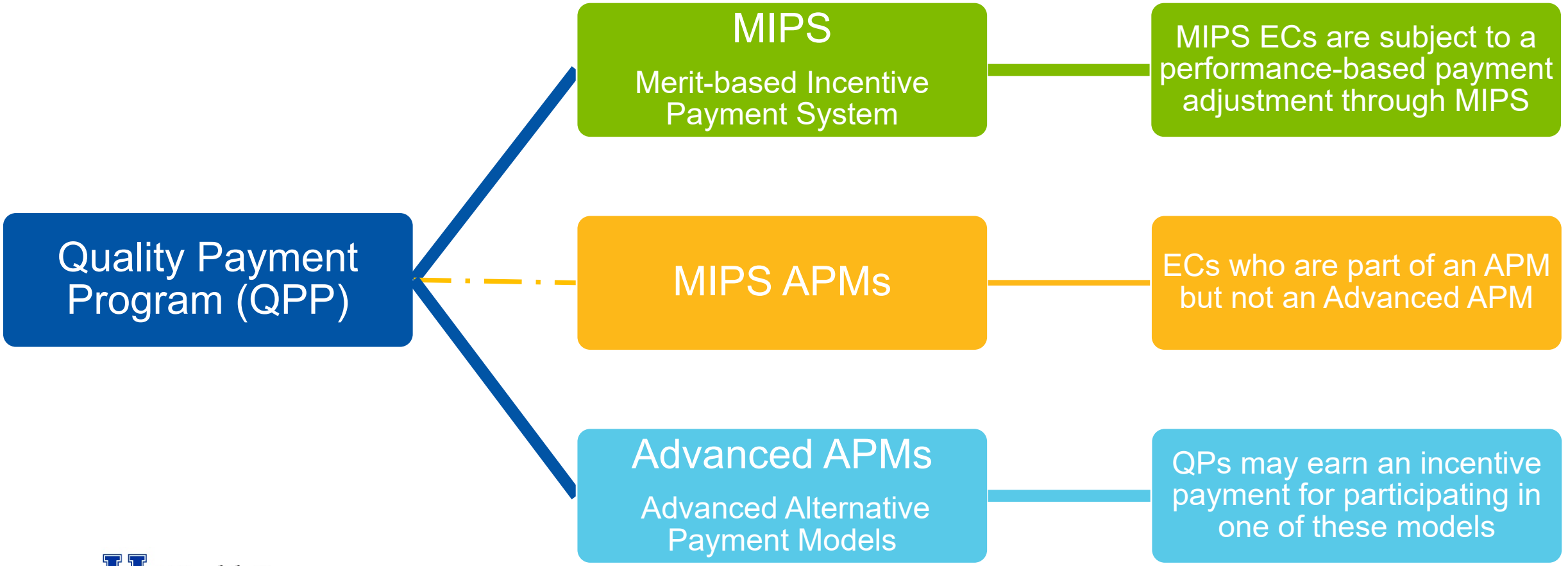
Understanding the QPP Tracks & Participation

QPP Y4: Program Tracks

By law, MACRA requires CMS to implement an incentive program, referred to as the Quality Payment Program, which provides two participation tracks for clinicians:



QPP Y4: QPP Clinician Eligibility

Eligible Clinician Types: Physician (MD, DO, DDS, DMD, DPM, OD), PA, NP, CNS, CRNA, PT, OT, Qualified Speech-Language Pathologist, Qualified Audiologist, Clinical Psychologist, Registered Dietitian or Nutrition Professionals

QPP Track Eligibility Requirements

Merit-Based Incentive Program (MIPS)

- $90K Part B
- 200 Medicare Patients
- 200 PFS

Advanced Alternative Payment Model (APMs)

- Advanced APM Participant
- 50% Payment **OR** 35% Medicare Patients

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QPP Y4: MIPS & APM Track Comparison

ECs must score at least 45 points to avoid penalty

APM Standard Scoring

Quality	PI	IA	Cost
50%	30%	20%	0%

Practices under an APM must submit Quality Data to APM; PI & IA data at the NPI/TIN level

MIPS Standard Scoring

Quality	PI	IA	Cost
45%	25%	15%	15%

Practices under MIPS must submit Quality, PI & IA

QPP Y4: Reporting Options

Individual

- Under an NPI number & TIN where they reassign benefits

Group

- ≥ 2 clinicians (NPIs) who have reassigned their billing rights to a single TIN
- As an APM Entity

Virtual Group

- Combination of ≥ 2 TINs assigned to ≥ 1 individual MIPS ECs, or to ≥ 1 groups consisting of ≤ 10 ECs with ≥ 1 MIPS EC

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Differences Between APMs & MIPS APMs

QPP Y4: APM Track Flow

QPP Y4: 2020 APM Track

APMs

Added incentive payment approach to provide high-quality & cost-efficient care

Applies to specific clinical condition, a care episode, or population

MIPS APMs

Eligible Clinicians (ECs) in Advanced APMs that do not meet Qualified Participant (QP) thresholds

Subject to different performance category weights/Scoring Standards

Advanced APMs

5% Incentive for achieving threshold levels through Advanced APMs

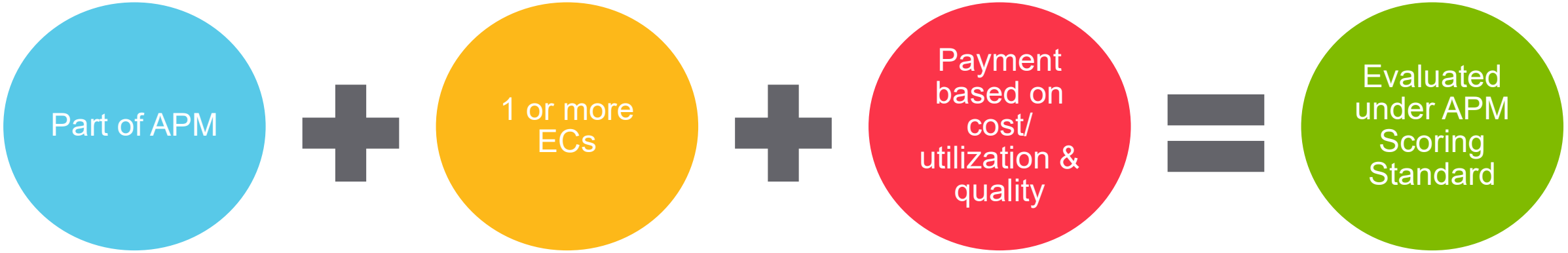
A subset of APMs with upside & downside risk related to costs/outcomes

QPP Y4: APM Scoring Standard

Program Year	Payment Year	Quality	Improvement Activities	Promoting Interoperability	Cost
2020 (Y4)	2022	50%	20%	30%	0%
Reporting Timeframes		365-Days	90-Day Minimum	90-Day Minimum	365-Days

ECs under an APM entity that is **both** an Advanced & MIPS APM that **are not** QPs or Partial Qualifying APM Participants (Partial QPs) are scored under the APM Scoring Standard.

QPP Y4: MIPS APM Requirements



Low-Volume Threshold (LVT) is $90,000+ in Part B Billing **OR** Furnishing Covered Services to 200+ Beneficiaries

If EC participates in MIPS APM & the MIPS APM exceeds LVT, the EC is required to participate in MIPS under the APM Standard Scoring

EC is suggested to submit Quality data as a precaution; EC will receive a score ≥ 50% of the Quality category total points

QPP Y4: Advanced APM Requirements

Qualified Participant (QP)

- ☐ 50% Payments APM
  OR
- ☐ 35% Patients
- ☐ Part of Advanced APM

Partial QP

- ☐ 40% Payments
- ☐ 25% Patients
- ☐ Part of Advanced APM

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MIPS APMs

QPP Y4: Basics of MIPS APMs

Basics of MIPS APMs

- **MIPS APMs are APMs that meet these 3 criteria:**
  - APM entities that participate in the APM under an agreement with CMS
  - APM enitities that include ≥ 1 MIPS EC on the APM Participation List
  - APM provides payment incentives based on performance for cost/utilization & quality measures at either the APM entity or EC level
- **APM Scoring Standard:**

Quality: 50%	Promoting Interoperability: 30%	Improvement Activities: 20%	Cost: 0%

- Low Volume Thresholds (LVTs) are calculated at the APM Entity level/Accountable Care Organization (ACO) Level:
  - **If the EC or group participates in a MIPS APM, they will be subject to MIPS if the APM Entity exceeds the MIPS eligibility LVT, which may require seperate submission(s) outside of APM**

QPP Y4: MIPS APMs

- Maryland Primary Care Program (MD PCP)
- Oncology Care Model (OCM; all Tracks)
- Next Generation Accountable Care Organization (NGACO) Model
- Comprehensive End-Stage Renal Disease Care (CEC) Model (all Tracks)
- Bundled Payments for Care Improvement (BPCI) Advanced
- Independence at Home (IAH) Demonstration
- Comprehensive Primary Care Plus (CPC+) Model (all Tracks)
- Vermont All-Payer ACO (VT ACO) Model
- Medicare Shared Savings Program (MSSP) (all Tracks, including the Medicare ACO Track 1+ Model)

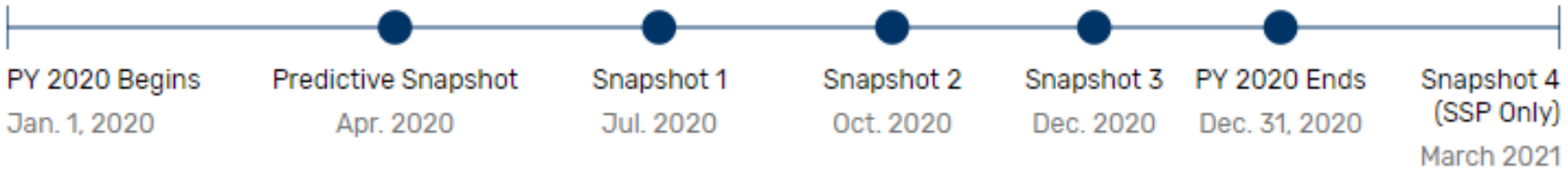
QPP Y4: Determination Dates

Eligibility Data Release Dates

MIPS Determination Period

MIPS APM Low-Volume Threshold Determination Period

APM QP Determination & Participant Snapshots



Review past and current Part B claims & PECOS for clinicians & practices as part of MIPS APMs

Each segment is a 12-month period

MIPS APM entity as a whole must exceed the LVT during both segments to be eligible

QPP Y4: MIPS APM Impacts

MIPS APM IMPACTS

Quality	PI	IA	Cost
ECs in the MIPS APM get a Quality performance score based on the CMS Web Interface and CAHPS for MIPS APM Quality measures that are reported by the MIPS APM	ECs in the ACO report at the group or individual level. Data is aggregated and weighted to get a single MIPS APM score that applies to all ECs in the MIPS APM	APM Entities participating in this list of MIPS APMs will receive a full score for the Improvement Activities performance category in performance period 2020 & therefore will not need to submit additional Improvement Activities All MIPS APMs will receive 50% points for IA automatically	ECs in a MIPS APM are NOT scored under the Cost category due to the APM Scoring Standard

QPP Y4: MIPS APM Quality

APM Entity must submit Quality measures

Must use the CAHPS for APM Quality Measure

If an APM fails to submit Quality data, CMS will evaluate the TIN/NPI level submission; will receive at least 50% credit

MIPS APMs Quality will make up 50% of Final Score

QPP Y4: MSSP Quality Measures

ACO ID	CMS ID	Measure Title
ACO 13	CMS 139v8	Falls: Screening for Future Fall Risk
ACO 27	CMS 122v8	Diabetes: Hemoglobin A1c Poor Control (>9%)
ACO 28	CMS 165v8	Hypertension (HTN): Controlling High Blood Pressure
ACO 40	CMS 159v8	Depression Remission at Twelve Months
ACO 20	CMS 125v8	Breast Cancer Screening
ACO 19	CMS 130V8	Colorectal Cancer Screening
ACO 14	CMS 147v9	Preventive Care and Screening: Influenza Immunization
ACO 17	CMS 138v8	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
ACO 18	CMS 2v9	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan
ACO 42	CMS 347v3	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

QPP Y4: MIPS APM Promoting Interoperability

MIPS APM participants must submit PI

Score aggregation-CMS will take organization or ECs submitted score for the MIPS APM

All MIPS APMs & APMs PI will be weighted at 30% of Final Score

QPP Y4: MIPS APM Improvement Activities

All MIPS APMs will receive at least 50% points for IA automatically

ECs participating in certain MIPS APMs will receive full credit for the Improvement Activities performance category in 2020, therefore will not need to submit additional Improvement Activities

QPP Y4: MIPS APM Cost

If you are in an APM you will not be scored on Cost

The expectation is that Cost containment/performance is evaluated within the APM participation requirements

For year 4 Cost will remain at 0% for all MIPS APMS & APMs

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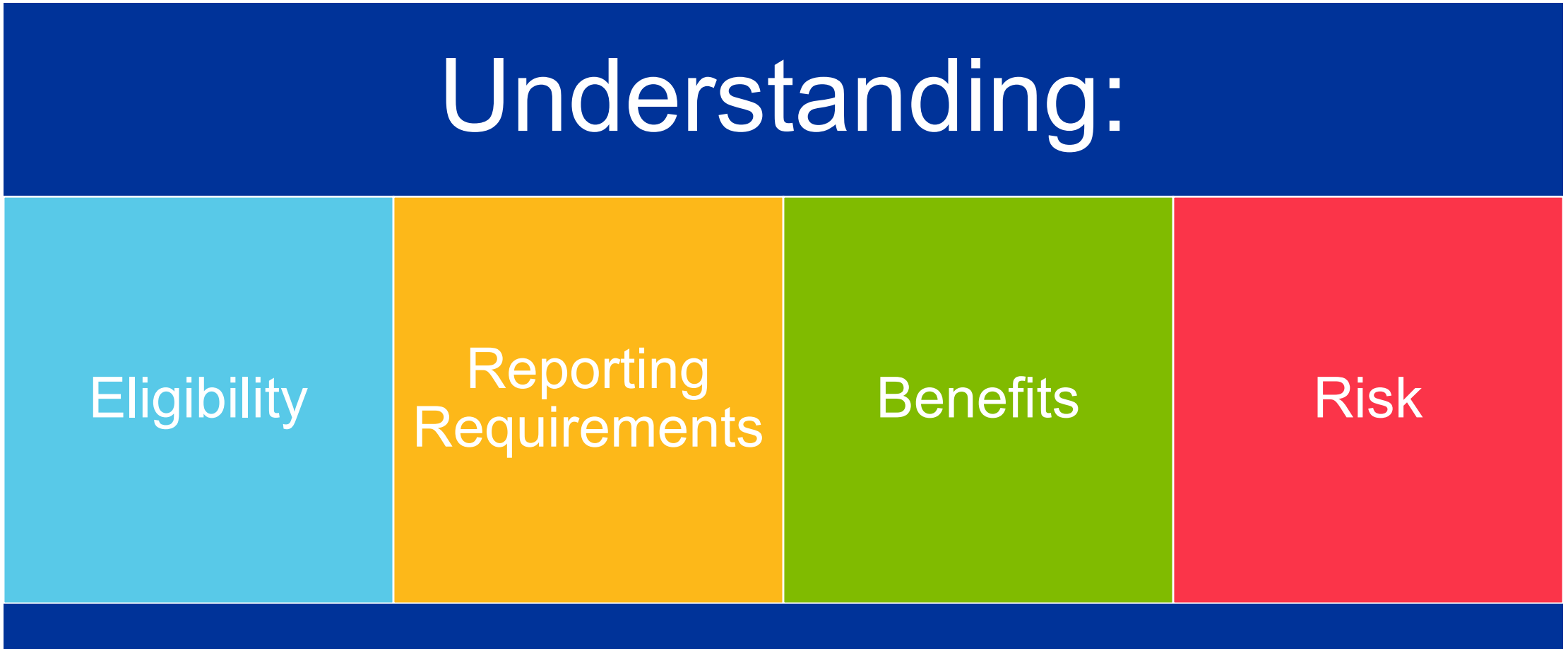
QPP Y4: MIPS APM Next Steps



Questions

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COVID-19 Update

In the midst of COVID-19, Kentucky REC is here for you!

Here are resources for your information:

- https://ukhealthcare.uky.edu/about/questions-answers-covid-19-coronavirus
- https://chfs.ky.gov/agencies/dph/pages/covid19.aspx

Upcoming QPP Webinars

QPP Y4: Cost

5.21.20

Client Only

QPP Y4: Improve your QPP Performance

6.18.20