

Action Planning: MIPS 2020 Checklist

January – March Wrap Up & New Plans

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| <ul style="list-style-type: none"> ➤ January 1st: Year 4 Quality & Cost Performance Period Begins ➤ January 1st: Payment Adjustments based on 2018 Program Year Begin ➤ January 2nd: QPP Submission Portal Opens for Year 3 (2019) Submissions ➤ January: CMS Releases preliminary ➤ March 31st: QPP Portal Submission Closes for Program Year 3 | <ul style="list-style-type: none"> <input type="checkbox"/> Check & Capture Eligibility for Previous Year <input type="checkbox"/> Attest for Previous Program Year (If Applicable) <input type="checkbox"/> Begin Conversations w/ Your Vendor on Capabilities for Data, Reporting for you, Generating QRDA III Files <input type="checkbox"/> Set Goals & Expectations for the Coming Year <ul style="list-style-type: none"> ○ Minimize Penalty (0-44.9 MIPS Points) ○ Avoid Penalty (\geq 45 Points) ○ Be an Exceptional Performer (\geq 85 Points) <input type="checkbox"/> Establish Planned Submission Level & Method(s) <input type="checkbox"/> Pull Specifications for Quality Measures <input type="checkbox"/> Finalize Quality Measures (Begin Tracking) <input type="checkbox"/> Pull Data & Review for Accuracy Monthly |
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April – June Monitor & Improve

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| <ul style="list-style-type: none"> ➤ Early April: 1st Eligibility Snapshot for the 2020 MIPS Program Year is Made Available within the QPP Portal and NPI Lookup at qpp.cms.gov ➤ April 1st – July 1st: Registration for CMS Web Interface & CAHPS for MIPS Opens | <ul style="list-style-type: none"> <input type="checkbox"/> Plan Improvement Activities (Must have \geq 50% of ECs Performing Activity in Group) <input type="checkbox"/> Begin Capturing Improvement Activities (IA) Documentation <input type="checkbox"/> Check & Capture Eligibility for Current Year w/in QPP Portal <input type="checkbox"/> Pull Data & Review for Accuracy Monthly |
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July – September Review & Participate

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| <ul style="list-style-type: none"> ➤ Late July – August: Feedback Reports & 2021 Associated Payment Adjustments Finalized ➤ Notice for Proposed Rule Making (NPRM) for Program Year 5 (2021) is Released & Open for Comments | <ul style="list-style-type: none"> <input type="checkbox"/> Review Feedback Reports <input type="checkbox"/> Review NPRM Proposals & Submit Comments <input type="checkbox"/> Review Available Hardship Exceptions as They Become Available <input type="checkbox"/> Pull Data & Review for Accuracy Monthly |
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October – December Prepare & Capture

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| <ul style="list-style-type: none"> ➤ October 3rd: Last Date to Begin a 90 Day Data Collection Period (PI & IA) ➤ Mid-October: Deadline to Submit Targeted Review for Year 3 (2019) ➤ Final Rule for Program Year 5 (2021) Released ➤ December: Final Eligibility Snapshot Released for Program Year 4 (2020) ➤ December 31st: <ul style="list-style-type: none"> ○ End of 2020 Program Year ○ Virtual Group Election Period Ends for Program Year 5 (2021) ○ Last Day to file for any Hardship or Exception Applications | <ul style="list-style-type: none"> <input type="checkbox"/> Review QPP Final Rule Changes <input type="checkbox"/> Final Program Year Eligibility Check <input type="checkbox"/> Prepare for MIPS 2020 Attestation/Data Submission <input type="checkbox"/> Create Documentation to Retain/2020 MIPS Audit File <input type="checkbox"/> Develop 2021 MIPS Program Year Action Plan <input type="checkbox"/> Pull Data & Review for Accuracy Monthly |
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Terminology to Consider:

- **“Pulling Data”**: Process of retrieving a report from your EHR, or manual tracking if that is your only capability, to review for accuracy validity.
- **Data**: Looking for numerators and denominators for Quality & Promoting Interoperability measures. Can also include exclusions and exceptions.
- **Review for Accuracy**: Make sure the numbers (numerators & denominators) look and feel right for your patient population. You may need to assure the accuracy of these reports by backing into how the numerators and denominators are being generated within your EHR.
- **Documentation to Retain**: Documentation that should be kept for a minimum of 6 years on all data that is submitted to CMS for the QPP. Additionally, you will want to keep a record of any hardships that are filed and accepted as well as eligibility and special statuses.
- **NPRM**: The Notice for Proposed Rule Making (NPRM) is the proposed legislation that is available for public comments from stakeholders regarding the proposed changes to the QPP for the upcoming program year. Rule Makers then use these comments to adjust the proposed legislation as possible/necessary before passing a final ruling for the upcoming program year of the QPP.

Helpful Links & Resources:

- **QPP Resource Library**: <https://qpp.cms.gov/about/resource-library>
- **QPP Individual NPI Lookup**: <https://qpp.cms.gov/about/resource-library>
- **QPP Submission Portal/Account Sign In**: <https://qpp.cms.gov/login>
- **Register for HARP Account**: <https://harp.qualitynet.org/register/profile-info>
- **Sign In/Modify HARP Account**: <https://harp.qualitynet.org/login/login>
- **CHPL Lookup/Verification**: <https://chpl.healthit.gov/#/search>