

Merit-based Incentive Program System (MIPS) Data Validation and Audit Factsheet

Performance Years 2017 & 2018

Guidehouse has been contracted by Centers for Medicare & Medicaid Services (CMS) to conduct the data validation and audit (DVA) work for the Merit-based Incentive Payment System (MIPS). MIPS eligible clinicians, groups, and virtual groups are required to provide substantive, primary source documents as requested by the Centers for Medicare and Medicaid (CMS). MIPS DVA will be conducted in 2019 for the 2017 and 2018 Performance Years (PY).

What the Data Validation and Audit (DVA) will Cover

The DVA will be conducted for the 2017 and 2018 performance years. It will cover the Quality, Improvement Activities (IA), and Advancing Care Information (ACI)/Promoting Interoperability (PI) performance categories.

MIPS Performance Measures/Activities Included in the DVA

Approximately forty Performance Measures/Activities will be selected for MIPS DVA. A methodology has been developed to select MIPS Measures/Activities with the highest identified risk that would prevent the QPP, specifically MIPS, from achieving strategic goals. The number of Measures/Activities selected for DVA from each MIPS component will mirror the weighting for scoring, i.e., for PY 2017 approximately 60% of the total audits in a submission category will be for Quality Measures/Activities, 15% for IA, and 25% for ACI (now PI), and for PY2018 approximately 50% of the total audits in a submission category will be for Quality Measures/Activities, 15% for IA, and 25% for PI. We will not conduct data validation and audit on the Cost category.

Selecting MIPS Participants for DVA

MIPS participants will be selected randomly for DVA. However, there will be some judgment included in the sample selection to enable us to include a variety of clinician types (urban, rural, large groups, small practices), and submission methods (EHR, QCDR, Claims, Registry, Web-Interface, CAHPS). If you are selected for DVA, you will be requested to respond to requests related to at least one and up to all performance Measures/Activities you submitted.





DVA Timeline

MIPS participants selected for data validation and audit can expect notification of selection and initial requests for information in June 2019 or July 2019. There may also be ad hoc data validation and audit work that is conducted through December 2019. Responses including both the initial population and the follow-up requests for individual selections are required to be provided within 45 calendar days of the request. Once the information is received we will review it and work with the MIPS participant to discuss any questions.

How to Submit Information for MIPS DVA

The MIPS participant can submit information through a secure file sharing platform or via secure fax. The MIPS participant can also designate someone to submit information on their behalf (including other office staff, Electronic Health Record (EHR), Qualified Registry (QR), Qualified Clinical Data Registry (QCDR), other contractors, etc.).

Resources

The following data validation and audit resources are now available on the Quality Payment Program Resource Library:

- [2017 MIPS Data Validation Criteria](#) - Lists the 2017 criteria used to audit and validate data submitted in each performance category
- [2018 MIPS Data Validation Criteria](#) - Lists the 2018 criteria used to audit and validate data submitted in each performance category

Please be sure to subscribe to the QPP listserv by entering your email at the bottom of the Quality Payment Program website so that you receive notifications about the most up to date MIPS Data Validation and Audit information available.

Contact Information

The Quality Payment Program can be reached at QPP@cms.hhs.gov or 1-866-288-8292 (TTY 1-877-715- 6222), Monday through Friday, 8:00 AM-8:00 PM Eastern Time.