

## Merit-based Incentive Payment System (MIPS)

2021 Facility-Based Measurement Quick  
Start Guide



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**Purpose:** This resource focuses on the improvement activities performance category under traditional MIPS, providing high-level requirements about data collection and submission for the 2021 performance year for individual, group, virtual group, and Alternative Payment Model (APM) Entity participation. This resource does not address improvement activity requirements under the APM Performance Pathway (APP).





## 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

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You can also click on the icon on the bottom left to go back to the table of contents.

## Hyperlinks

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



# Facility-based Measurement Overview

## What is the Facility-based Measurement?

Facility-based measurement offers MIPS eligible clinicians and groups the opportunity to receive scores in the MIPS quality and cost performance categories based on the FY 2022 score for the Hospital Value-Based Purchasing (VBP) Program earned by their assigned facility.

**Individual MIPS eligible clinicians** qualify for facility-based measurement in the 2021 MIPS performance period when they:

- Billed at least 75% of their covered professional services in a hospital setting (inpatient hospital (Place of Service (POS)=21), on-campus outpatient hospital (POS=22), or emergency room (POS=23)) between October 1, 2019 and September 30, 2020;
- Billed at least one service in an inpatient hospital or emergency room between October 1, 2019 and September 30, 2020; and
- Can be assigned to a facility with a FY 2022 Hospital VBP Program score. (**Note that we won't know if a facility has a FY 2022 score until Fall 2021 at the earliest.**)

**Groups** qualify for facility-based measurement in the 2021 MIPS performance period when:

- More than 75% of the clinicians in the practice qualify for facility-based measurement as individuals

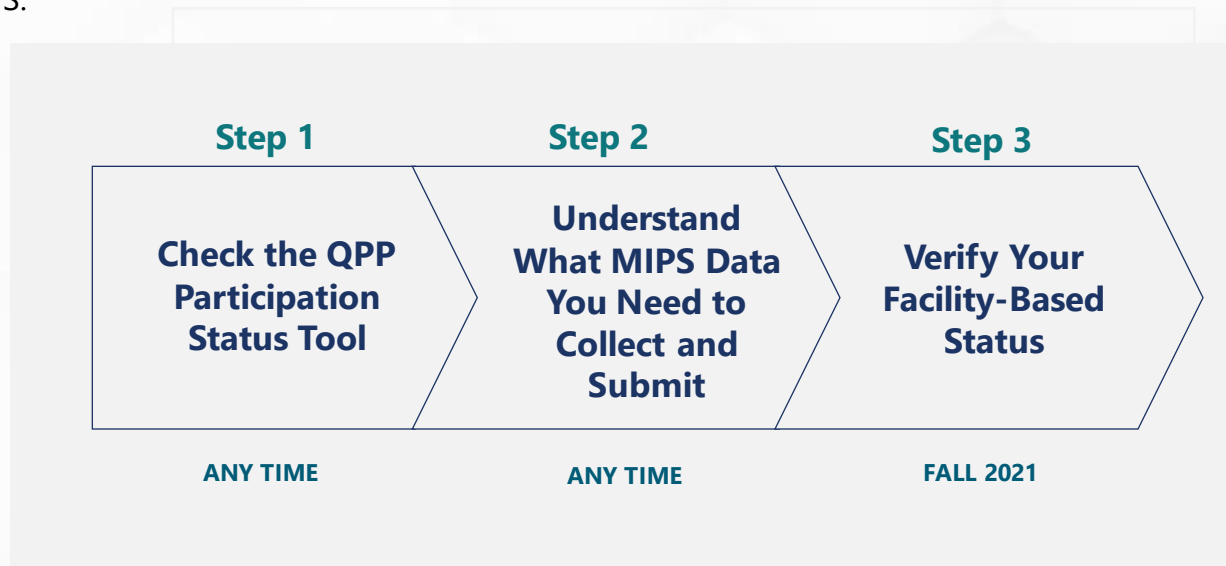
# Get Started with MIPS Facility-based Measurement in 3 Steps



# Getting Started with MIPS Facility-based Measurement in 3 Steps

## Getting Started with MIPS Facility-based Measurement in 3 Steps

This guide outlines 3 steps to understanding whether facility-based measurement applies to you, and what it means for your participation in MIPS.





# Getting Started with MIPS Facility-based Measurement in 3 Steps

## Step 1: Check the QPP Participation Status Tool

We've updated the [Quality Payment Program Participation Status Tool](#) to identify facility-based clinicians and groups and their assigned facility for the 2021 MIPS performance period. **The facility-based status is predictive until late 2021 when we determine which facilities have a FY 2022 Hospital VBP Program score.**

From the Quality Payment Program Participation Status Tool, click **Expand Details** below your MIPS eligibility at a given practice, and scroll down to **Other Reporting Factors**, which provides information about special statuses at the "Clinician Level" and "Practice Level."

Other Reporting Factors	
Learn more about <a href="#">how other reporting factors are determined</a>	
<b>Clinician Level</b>	
SPECIAL STATUS Hospital-based	Yes
SPECIAL STATUS Non-patient facing	Yes
SPECIAL STATUS Small practice	Yes
Facility-based	Yes - BAYFRONT HEALTH - ST PETERSBURG

Assigned facility

### What You Need to Know

1. We will only identify you as facility-based if your assigned facility has a FY 2021 Hospital VBP Program score.
  - **Important: The FY 2021 score is used for this predictive designation.** We can't confirm whether your assigned facility has a FY 2022 score, used for MIPS facility-based scoring in 2021, until Fall 2021 at the earliest.
2. We don't evaluate MIPS eligible clinicians for facility-based measurement eligibility during the 2nd segment of the MIPS determination period. If you aren't identified as facility-based now, you won't become facility-based for the 2021 performance period when we update eligibility in November/December 2021.

## Step 2: Understand What MIPS Data You Need to Collect and Submit

Facility-based clinicians and groups whose assigned facility has a FY 2022 Hospital VBP Program score will not need to submit additional quality data. FY 2022 Hospital VBP Program scores will be available in fall 2021 at the earliest.

### Facility-based clinicians:

- Automatically receive quality and cost performance category scores as an individual based on their facility's FY 2022 Hospital VBP Program score, **even if:**
  - They don't submit data for the Promoting Interoperability or improvement activities performance categories; or
  - Their practice chooses to participate in MIPS as a group. (In this instance, the clinician will get the higher of the two final scores – their individual final score from facility-based measurement OR the group's final score.)

### Facility-based groups:

- Must submit data for the improvement activities and/or Promoting Interoperability performance categories to be able to receive quality and cost scores based on their attributed facility's FY 2022 Hospital VBP Program score.
  - **Why?** The submission signals the intent to participate as a group.

# Getting Started with MIPS Facility-based Measurement in 3 Steps

## Step 2: Understand What MIPS Data You Need to Collect and Submit *(continued)*

If you choose to collect and submit additional MIPS quality measure data, we will use whichever submission results in a higher combined score for the quality and cost performance categories:

**The quality and cost performance category scores based on your facility's FY 2022 Hospital VBP Program score**

OR

**The quality performance category score based on the data you collect and submit to MIPS, and the cost performance category score based on the performance we collect and calculate for you**

If you do not submit data for the MIPS improvement activities or Promoting Interoperability performance categories, you will receive 0 points in those categories unless you qualify for reweighting.

Your MIPS quality and cost performance category scores, based on your assigned facility's FY 2022 Hospital VBP Program score, will not be available until final performance feedback is released in July 2022.

# Getting Started with MIPS Facility-based Measurement in 3 Steps

## Step 3: Verify Your Facility-based Status

Facility-based clinicians and groups should verify their facility-based status on the Quality Payment Program Participation Status Tool in late Fall 2021. You can lose your facility-based status if your assigned facility doesn't have a FY 2022 Hospital VBP Program Score.

### What You Need to Know:

**It is possible for a facility to have a FY 2021 Hospital VBP score, but not receive a FY 2022 Hospital VBP score.**

This can occur if the facility doesn't meet one or more of the Hospital VBP Program's exclusion/eligibility criteria. Some examples of these criteria include:

- Hospital is subject to payment reductions under the Hospital Inpatient Quality Reporting (IQR) Program.
- Hospital has an approved extraordinary circumstance exception specific to the Hospital VBP Program.
- Hospital did not meet the minimum number of cases, measures, or surveys, as determined by program requirements.
- Hospital was cited for deficiencies during the applicable fiscal year performance period(s) that pose an immediate jeopardy (IJ) to patients' health or safety.

This can also occur when a hospital closes or otherwise has its CMS Certification Number (CCN) terminated, which can result from a merger between two facilities, or the transition from an acute care hospital to a critical access hospital (CAH).

In March 2020 CMS granted blanket exceptions for the submission of HVBP data for Q1 (first quarter), Q2 2020 data, but restarted data collection with Q3, Q4 2020 data. The Hospital VBP Program continues to examine the impact of COVID-19 on Q3, Q4 2020 data. (CY 2020 data is associated with the FY2022 payment determination for the Hospital VBP Program.)

### If this happens:

- We will remove your facility-based status in the [Quality Payment Program Participation Status Tool in Fall 2021](#);
- You will no longer be eligible for facility-based measurement; and
- You will need to submit quality measure data to MIPS (we will still calculate your cost measures for you).

If you have questions or concerns about your assigned facility's continued compliance with the Hospital VBP Program, please contact your hospital administrator.








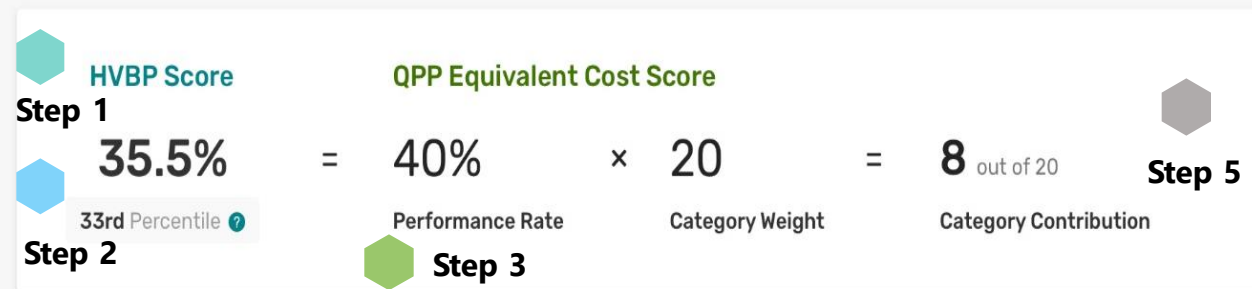
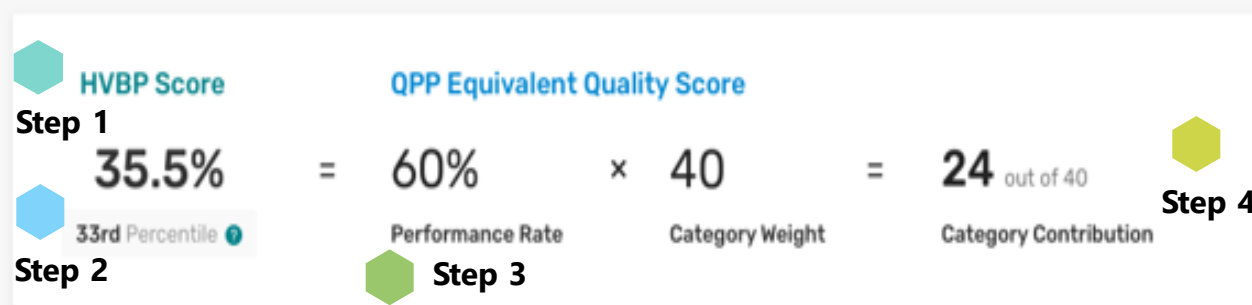


## Facility-based Measurement FAQs

# Facility-based Measurement FAQs

## How Does Facility-based Measurement and Scoring Work?

-  **Step 1.** We will look at your facility's FY 2022 Hospital VBP Program score.
-  **Step 2.** We will determine how your facility's FY 2022 Hospital VBP Program score compares to all other facilities with a FY 2022 Hospital VBP Program score and arrive at a percentile.
-  **Step 3.** We will look at the range and distribution of unweighted PY 2021 MIPS quality and cost performance category percentile scores for MIPS participants, and identify which 2021 MIPS quality (percentile) score and cost (percentile) score maps to the percentile associated with your FY 2022 Hospital VBP Program score. Note that we will not assign a quality percentile score below 30%.
-  **Step 4.** We will multiply the mapped 2021 MIPS quality percentile score by the 2021 quality performance category weight to determine the quality performance category points contributing to your final score.
-  **Step 5.** We will multiply the mapped 2021 MIPS cost percentile score by the 2021 cost performance category weight (20%) to determine the cost performance category points contributing to your final score.



## Facility-based Measurement FAQs

### **Does the Small Practice Bonus Apply to Facility-based Scoring?**

No. We will not add the small practice bonus to a MIPS quality performance category score derived from facility-based measurement.

### **Does Quality Improvement Scoring Apply to Facility-based Scoring?**

No. We will not add improvement scoring points to a MIPS quality performance category score derived from facility-based measurement because the Hospital VBP Program already measures improvement.

### **Do “hospital-based” and “facility-based” mean the same thing?**

No. In MIPS, “hospital-based” and “facility-based” have different definitions and reporting implications, but clinicians and groups identified as facility-based are often identified as hospital-based as well.

“Hospital-based” is a special status that affects your Promoting Interoperability reporting requirements. If you’re identified as hospital-based on the [Quality Payment Program Participation Status Tool](#), you qualify for automatic reweighting of the Promoting Interoperability performance category to 0%. The 25% category weight will be redistributed to another performance category (or categories) unless you choose to submit Promoting Interoperability data.

Learn more about the [hospital-based special status](#).

### **What Happens if I’m Facility-based as an Individual, but Our Practice is Participating in MIPS as a Group?**

We will use facility-based measurement to calculate quality and cost performance category scores for all individual facility-based clinicians. These scores will be based on the FY 2022 Hospital VBP Program score of the hospital to which you are assigned as an individual. If your practice also participated as a group, we’ll assign you the higher final score – your individual score (using facility-based measurement) or your group’s score.

## Facility-based Measurement FAQs *(continued)*

### **I'm a Facility-based Clinician and No Longer Affiliated with the Facility I'm Assigned to on the Quality Payment Program Participation Status Tool, but I am Still with the Same Practice. Am I Still Eligible for Facility-based Scoring at This Practice?**

Yes. You are still eligible for facility-based scoring as long as your assigned facility has a FY 2022 Hospital VBP Program score. Even though you are no longer affiliated with the facility (in the 2021 performance period), you were assigned to that facility based on services you furnished between October 1, 2019 and September 30, 2022, which generally aligns with the FY 2022 Hospital VBP Program measure performance period. Please make sure you check the [Quality Payment Program Participation Status Tool](#) in late November 2021 when final MIPS eligibility is released to verify your MIPS eligibility at this practice and confirm that you're still identified as facility-based (which means that your assigned facility has a FY 2022 Hospital VBP Program score).

### **Will Facility-based Measurement be Publicly Reported?**

We're developing an indicator for public reporting to display if a MIPS eligible clinician is scored using facility-based measurement. This would begin with the 2019 performance period data available for public reporting in 2021 and for all future years.

### **Does Facility-based Measurement Under MIPS Affect my Assigned Hospital's Payment Adjustment Under the Hospital VBP Program?**

No. A clinician's MIPS payment adjustment is distinct from, and does not affect, any payment adjustment the hospital receives through the Hospital VBP Program





## 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 a.m.-8 p.m. Eastern Time 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 [Quality Payment Program Resource Library](#).

## Additional Resources

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

Resource	Description
<a href="#">2021 Quality Quick Start Guide</a>	A high-level overview and practical information about quality measure selection, data collection, and submission for the 2021 MIPS quality performance category.
<a href="#">2021 Cost Quick Start Guide</a>	A high-level overview of cost measures, including calculation and attribution, for the 2021 MIPS cost performance category.
<a href="#">2021 Eligibility and Participation Quick Start Guide</a>	A high-level overview and actionable steps to understand your 2021 MIPS eligibility and participation requirements.

## Version History

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

Date	Description
03/16/2021	Original posting