Quality Payment



Merit-based Incentive Payment System (MIPS)

2022 MIPS Policies for Small Practices (15 or fewer clinicians)







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Please Note: This guide was prepared for informational purposes only and isn't intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It isn't 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.

<u>Purpose:</u> This resource provides a high-level overview of the Merit-based Incentive Payment System (MIPS) requirements for small practices (15 or fewer clinicians) to get you started with participating in the 2022 performance year.





Eligibility & Performance Category Requirements

New MIPS Eligible Clinician Types:





No other changes to eligibility criteria

Cost Performance Category:

- There are 5 new episode-based measures for 2022:
 - 2 procedural measures (Melanoma Resection, Colon and Rectal Resection)
 - o 1 acute inpatient measure (Sepsis)
 - 2 chronic condition measures (Diabetes, Asthma/Chronic Obstructive Pulmonary Disease [COPD])





Quality Measure Performance Category:

- Medicare Part B claims measures: We'll only calculate a group-level quality performance category score from claims measures if your practice also submits data for another performance category as a group (signaling your intent to participate as a group.)
- Removal of bonus points for:
 - Reporting additional Outcome, Patient Experience, and High Priority Measures beyond the 1 required
 - Measures that meet end-to-end electronic reporting criteria

NO CHANGE to the small practice bonus. If you submit at least 1 quality measure, you will continue to earn 6 bonus points in this category.



Eligibility & Performance Category Requirements (Continued)



Promoting Interoperability Performance Category:

- We'll automatically reweight this performance category to 0% for small practices beginning with performance year:
 - o You're not required to report Promoting Interoperability data.
 - You no longer need to submit a Promoting Interoperability Hardship Exception Application for this category to be reweighted.

If you choose to report data for this performance category:

- There is a new <u>SAFER Guides attestation measure</u> and changes to the <u>information blocking attestation</u>.
- Requirements for the Public Health and Clinical Data Exchange Registry objective were updated to require reporting on these measures:
 - o Immunization Registry Reporting and Electronic Case Reporting measures.
 - You will earn 5 bonus points for reporting any of the other 3, now optional, measures in this objective.

Final Score: Performance Thresholds and Payment Adjustments

Performance Thresholds for 2022*

- The performance threshold is set at **75 points**
 - This is the minimum final score needed to avoid a negative payment adjustment in 2024.
- The additional performance threshold for exceptional performance is set at 89 points
- We'll compare your final score to the performance threshold (and exceptional performance threshold) to determine your payment adjustment

*As required by statute, beginning with performance year 2022, the performance threshold must be either the mean or median of the final scores for all MIPS eligible clinicians for a prior period.



The 2022 performance year/2024 payment year is the FINAL YEAR for the additional adjustment for exceptional performance.

Final Score 2022	Payment Adjustments 2024
>= 89 points	 Positive adjustment greater than 0% Eligible for additional payment for exceptional performance
75.01-88.99 points	 Positive adjustment greater than 0% Not eligible for additional payment for exceptional performance
75 points	Neutral payment adjustment (0%)
18.76 – 74.99 points	Negative payment adjustment between -9% and 0%
0 – 18.75 points	Negative payment adjustment of -9%

Final Score Calculation – Redistribution Policies for Small Practices

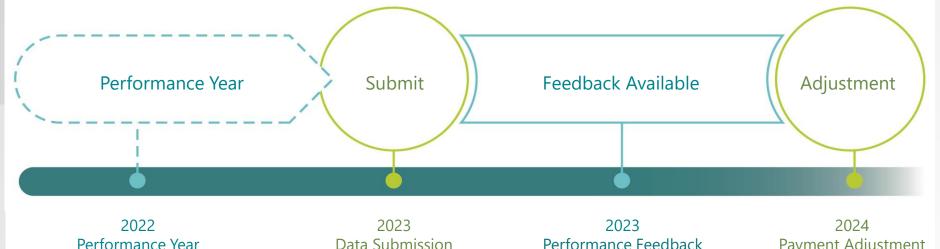
For performance year 2022, we're updating the performance category redistribution policies for small practices only **to more heavily** weight the improvement activities performance category when other performance categories are reweighted.

Standard weighting for small practices (Promoting Interoperability automatically reweighted) **Improvement Promoting** Quality Cost **Activities** Interoperability **₽** When both the **cost** and the **Promoting Interoperability** performance categories are reweighted: **Promoting Improvement** Quality Cost **Activities Interoperability &**

Final Score Calculation – Redistribution Policies for Small Practices (Continued)

NOTE: This redistribution scenario applies to everyone, not just small practices.





Jan. 1 - Dec. 31, 2022 Clinicians care for patients and record data.

To Do:

- Check initial eligibility (January 2022)
- · Collect quality measure data (January - December)
- Perform 1 high-weighted or 2 medium-weighted improvement activities (generally 90 days)
- Check final eligibility (December 2022)

Data Submission

Jan. 3 - March 31, 2023 Submit data collected in the performance year

To Do:

- Get a HARP account and QPP access (December 2022)
- Sign in to the QPP website (January - March 2023) to
 - Attest to performing improvement activities
 - Upload your quality measure file or view data submitted on your behalf
 - View any Medicare Part B claims measures you reported throughout 2022

Performance Feedback

Summer 2023 Review final score and payment adjustment

To Do:

- Sign in to the QPP website to view your performance feedback and payment adjustment information
- Submit a targeted review if you find any scoring errors (you have 60 days to do this once final performance feedback is released)

Payment Adjustment

Jan. 1 - Dec. 31, 2024 Payment adjustments applied

To Do:

- MIPS eligible clinicians will receive a positive, negative, or neutral adjustment in the 2024 payment year based on their 2022 MIPS final score.
- MIPS payment adjustments are applied on a claim-byclaim basis to covered professional services billed under the Physician Fee Schedule.





Help, Resources, and Version History

Where Can I Get Help?

Contact the Quality Payment
Program Service Center at 1-866288-8292 or by e-mail at:

QPP@cms.hhs.gov (Monday-Friday
8 a.m.- 8 p.m. ET). To receive
assistance more quickly, please
consider calling during non-peak
hours—before 10 a.m. and after 2
p.m. ET.

 Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant. Visit the <u>Small, Underserved and</u>
<u>Rural Practices page of the Quality</u>
<u>Payment Program website</u> where
you can **sign up for the monthly Small Practice Newsletter** and find
resources and information relevant
for small practices.



Help, Resources, and Version History



Additional Resources

The <u>Quality Payment Program Resource Library</u> 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
2022 MIPS Eligibility and Participation Quick Start Guide	A high-level overview and actionable steps to understand your 2022 MIPS eligibility and participation requirements.
2022 Medicare Part B Claims Reporting Quick Start Guide	A high-level overview and practical information about reporting quality measures through Medicare Part B claims.
2022 Quality Quick Start Guide	A high-level overview and practical information about quality measure selection, data collection, and submission for the 2022 MIPS quality performance category.
2022 Improvement Activities Quick Start Guide	A high-level overview and practical information about data collection and submission for the 2022 MIPS improvement activities performance category.
2022 Promoting Interoperability Quick Start Guide	A high-level overview and practical information about data collection and submission for the 2022 MIPS Promoting Interoperability performance category.
2022 Cost Quick Start Guide	A high-level overview of cost measures, including calculation and attribution, for the 2022 MIPS cost performance category.
2022 Quality Payment Program Final Rule Resources	A zip file containing 2022 QPP final rule resources, including a fact sheet, FAQs, and a table comparing finalized policies to previous policies.



Help, Resources, and Version History



Version History

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

Date	Description
2/15/2022	Original Posting.

