

2023 MIPS Promoting Interoperability Performance Category Hardship Exception Application Guide

Quality Payment

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**Purpose:** This guide will provide general information about the MIPS Promoting Interoperability Performance Category Hardship Exception application and provide step-by-step instructions on how to complete the application.







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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.

### **Hyperlinks**

Hyperlinks to the <u>Quality Payment Program website</u> are included throughout the guide to direct the reader to more information and resources.

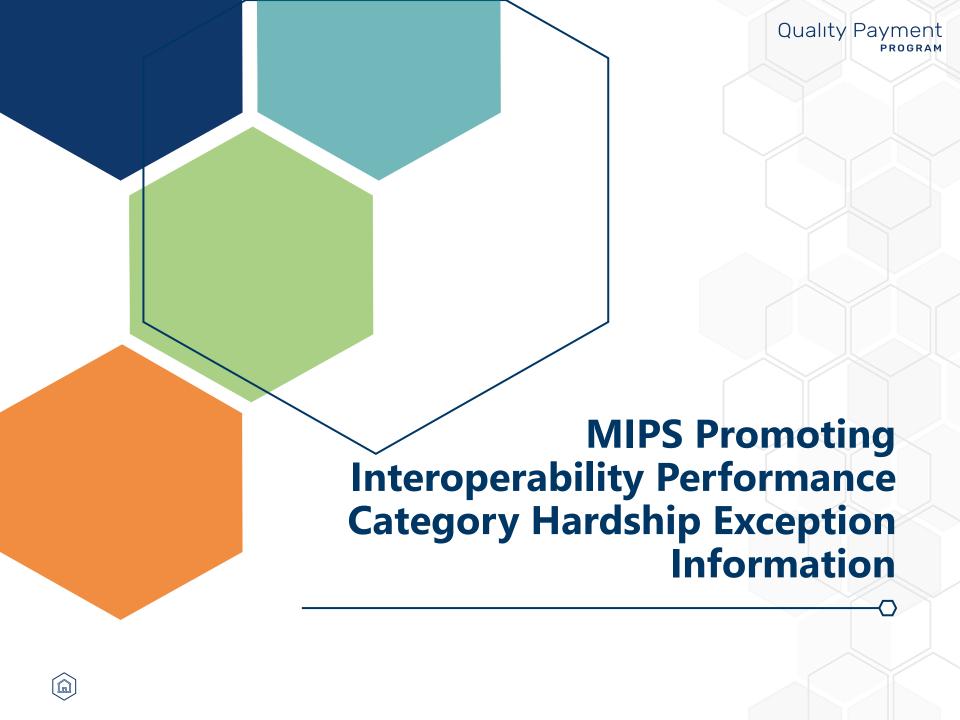




## MIPS Promoting Interoperability Performance Category Hardship ment Exception Application Overview

#### **Overview**

	MIDC Droposting Intercongrability Handship Evention applications allowed to a secret that your MIDC Dropost's Later and M	
What	MIPS Promoting Interoperability Hardship Exception applications allow you to request that your MIPS Promoting Interoperability performance category be reweighted to 0%.	
Who	<ul> <li>Individual clinicians, groups, and virtual groups reporting via traditional MIPS, MIPS Value Pathways (MVPs) or the APM Performance Pathway (APP).</li> <li>Third party intermediaries can submit an application with permission from the clinician or practice.</li> <li>Some clinicians, groups and virtual groups automatically qualify for reweighting of the Promoting Interoperability performance category. If you qualify for automatic reweighting, you don't need to apply for a MIPS Promoting Interoperability Hardship Exception.</li> <li>See Appendix A for information about the clinicians, groups, and virtual groups that automatically qualify for reweighting of this performance category.</li> </ul>	
	You can submit an application to have your MIPS Promoting Interoperability performance category reweighted to 0% if:	
W/I	<ul> <li>You have insufficient Internet connectivity</li> <li>You have decertified electronic health record (EHR) technology</li> <li>You lack control over the availability of certified EHR technology (CEHRT)</li> </ul> Note: We automatically reweigh Promoting Interoperability for small practices. See page 8 for more information.	
Why	<ul> <li>Lacking 2015 Edition CEHRT doesn't qualify as a reason to submit an exception application</li> <li>You face extreme and uncontrollable circumstances such as a disaster, practice closure, severe financial distress or vendor issues</li> <li>If you experience an extreme and uncontrollable circumstance that impacts multiple performance categories, the <a href="Extreme and Uncontrollable Circumstances">Exception application may be more suitable for your given circumstance.</a></li> </ul>	
When	The Promoting Interoperability Hardship Exception application will close at 8 p.m. ET on January 2, 2024.	
Where	Sign in to <a href="mailto:qpp.cms.gov">qpp.cms.gov</a> with your HCQIS Access and Roles Profile (HARP) account.  • For more information on HARP accounts, please refer to the <b>Register for a HARP Account</b> document in the <a href="mailto:QPP Access">QPP Access</a> <a href="mailto:User Guide (ZIP)">User Guide (ZIP)</a> .	
How	<ol> <li>Register for a HARP account</li> <li>Sign in to the QPP website</li> <li>Select 'Exceptions Application' on the left-hand navigation</li> <li>Select 'Add New Exception'</li> <li>Select 'Promoting Interoperability Hardship Exception'</li> <li>Complete the application for individual, group or virtual group participation</li> </ol>	



#### **Overview**

#### You may automatically qualify for reweighting in this performance category.

**Reminder:** Small practices qualify for automatic reweighting.

- See Appendix A.
- If you automatically quality for reweighting, you don't need to submit an exception application.

#### You'll complete the Hardship Exception application at the level for which you'll report data to MIPS.

- If you're reporting data at the individual level, complete the Hardship Exception application at the individual level.
- If you're reporting data at the group level, complete the Hardship Exception application at the group level.
- Note, a group Hardship Exception application will **only** apply at the group level.
  - o If your practice is participating in MIPS at the individual level, don't complete the Hardship Exception application at the group level. You'll complete the Hardship Exception application at the individual level for each clinician (who doesn't automatically qualify for reweighting) to be considered for reweighting.
  - o If you're reporting as an MVP as a subgroup, the group level Hardship Exception will apply to the subgroup participants.

#### You can still submit data for the MIPS Promoting Interoperability performance category.

- If your circumstances change and you're able to collect and submit your Promoting Interoperability data, we'll disregard your Hardship Exception application and you'll be scored in this performance category.
- You'll also be scored in this performance category if you attest to any data, such as selecting performance period dates or responding to attestation statements, during the submission period.
- Small practices qualify for automatic reweighting of the Promoting Interoperability performance category.



**Overview** (Continued)

#### You aren't required to submit documentation with your application.

 However, clinicians, groups, and virtual groups should retain documentation of their circumstances supporting their application for their own records in the event they're selected by CMS for data validation or audit. See our 2023 MIPS Data Validation Criteria (ZIP) for details on the data validation process.

## You can apply for a MIPS Promoting Interoperability performance category hardship exception if you switch CEHRT vendors during the performance period.

• You would indicate an extreme and uncontrollable circumstances hardship exception and select vendor issues within the application.

## The following circumstances qualify as extreme and uncontrollable circumstances for a MIPS Promoting Interoperability performance category hardship exception:

- A natural disaster resulting in damage to or destruction of your CEHRT
- Practice closure
- Severe financial distress resulting in bankruptcy or debt restructuring
- Vendor issues (such as a change in vendors during the performance period or errors with your CEHRT that your vendor is unable to address)

#### You may still be able to report if your EHR product is decertified during the 2023 performance year.

- You can still submit your Promoting Interoperability performance category measures collected in your nowdecertified EHR product if your performance period ended before the decertification occurred.
- If your performance period ended after the EHR decertification occurred, you can <u>apply</u> for a MIPS Promoting Interoperability performance category hardship exception and select decertified EHR technology.



### **Groups and Virtual Groups**

To submit an application on behalf of a group, every office location/practice site within the taxpayer identification number (TIN) must experience the hardship for the group to qualify for the Promoting Interoperability performance category hardship exception.

• For example, if one office location is within a broadband availability area but the other office(s) for the practice is not, the office with broadband availability would not qualify for the MIPS Promoting Interoperability performance category hardship and must report for those clinicians for whom they have data.

To submit an application on behalf of a virtual group, every office location/practice site for each TIN within the virtual group must experience the hardship for the virtual group to qualify for the Promoting Interoperability performance category hardship exception.

• For example, if one TIN is within a broadband availability area but the other TIN(s) in the virtual group is not, the TIN with broadband availability would not qualify for the MIPS Promoting Interoperability performance category hardship and must report for those clinicians for whom they have data.

### **MIPS APM Participants**

MIPS eligible clinicians and groups with MIPS eligible clinicians participating in a MIPS APM can apply for hardship exceptions and qualify for automatic reweighting just like other MIPS eligible clinicians.

If you're participating in MIPS at the APM Entity level (either reporting traditional MIPS or the APP), you would complete the application as an individual or group.

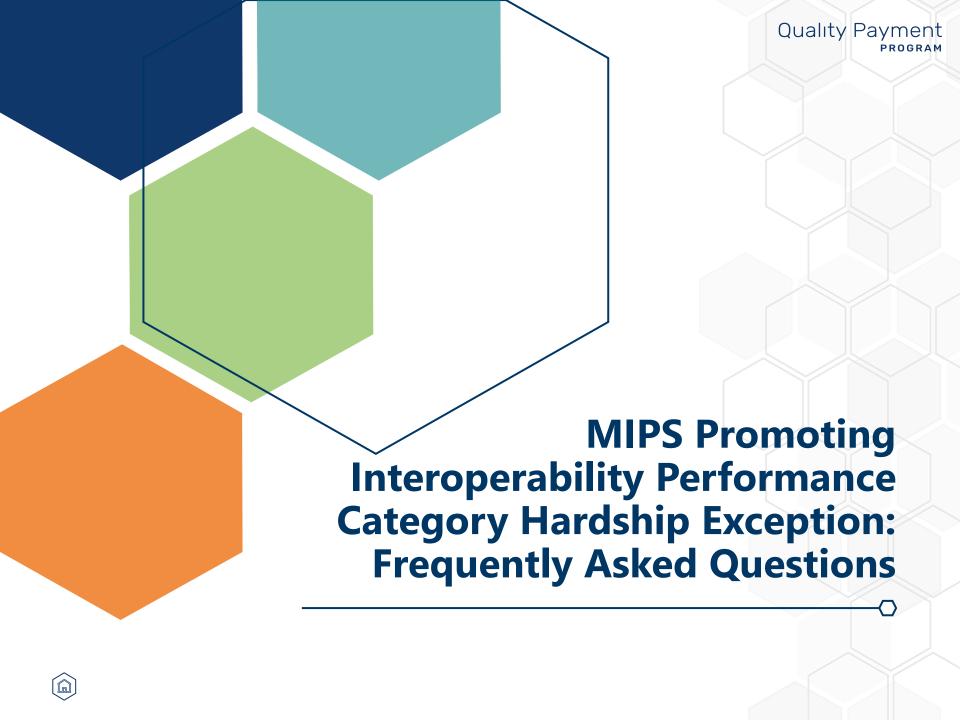
• If approved, the clinician will receive the APM Entity's score, but will be excluded from the calculation when we create an average Promoting Interoperability score for the APM Entity.

APM Entities reporting the APP or traditional MIPS can't submit a Promoting Interoperability Hardship Exception application on behalf of the entire Entity.

 When participating in MIPS as an APM Entity, the Promoting Interoperability performance category is still reported at the individual or group level.

A MIPS Promoting Interoperability performance category hardship exception doesn't exempt you from reporting on any CEHRT activities required for participation in your APM.





## MIPS Promoting Interoperability Performance Category Quality Payment Hardship Exception: Frequently Asked Questions

Question	Answer		
Where Can I Look for a Status Update on Our MIPS Promoting Interoperability Performance Category Hardship Exception Application?	You can monitor your application status in your QPP Account on the QPP website.		
Can Additional Staff Members Access/Receive Notifications About the Status of the MIPS Promoting Interoperability Performance Category Hardship Exception Application?	Yes, you can add additional staff or representatives who should receive notifications about the status of the application.  In the Additional Access section of the application, provide the email address(es) of additional staff or representatives who would like to receive email notifications.  Please note: the additional staff or representatives must have HARP credentials in order to see the application on the <a href="QPP website">QPP website</a> .		
How Can I Correct a Mistake Made on Our MIPS Promoting Interoperability Performance Category Hardship Exception Application?	If you identified an error with your exception application, please contact the Quality Payment Program Service Center by email at <a href="QPP@cms.hhs.gov">QPP@cms.hhs.gov</a> , create a <a href="QPP Service Center ticket">QPP Service Center ticket</a> , or by phone at 1-866-288-8292 (Monday-Friday, 8 a.m 8 p.m. ET).		

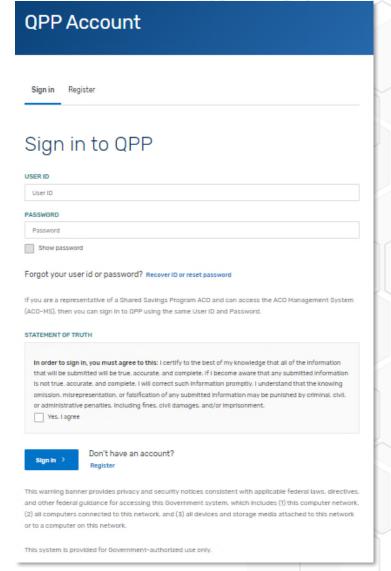




### **Step 1: Sign in to Your QPP Account**

With your HARP credentials, sign in to your QPP Account on the QPP website.

**Note:** If you haven't signed in on the <u>QPP website</u> before, you must register for an account to obtain your HARP credentials. See our <u>QPP Account Access Guide</u> (<u>ZIP</u>) for information on creating an account.

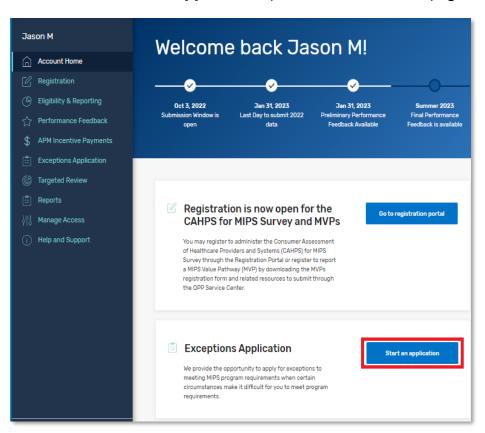




### **Step 2: Navigate to Your Exception Applications**

Once you're signed into your account, select:

- The Exception Application tab in the left-hand navigation menu, then click + Add New QPP Exception
   OR
  - The **Start an Application** quick link on the home page.



You can create and submit a new exception request until 8 p.m. ET on January 2, 2024.



**Step 3: Select the Exception Application** 

Select the MIPS Promoting Interoperability Performance Category Hardship Exception, then Continue.

\*The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the QPP website.

#### Add New Exception

Exception Type \*

 MIPS Promoting Interoperability Performance Category Hardship Exception

The MIPS Promoting Interoperability Performance Category Hardship Exception applications allows you to request reweighting specifically for the Promoting Interoperability performance category if you qualify for one of the reasons identified below.

- · You have decertified EHR technology
- · You have insufficient internet connectivity
- You face extreme and uncontrollable circumstances such as disaster, practice closure, severe financial distress or vendor issues
- · You lack control over the availability of CEHRT

Extreme and Uncontrollable Circumstances Exception

The Extreme and Uncontrollable Circumstances Exception application allows you to request reweighting for any or all performance categories if you encounter and extreme and uncontrollable circumstance or public health emergency, such as COVID-19, that is outside of your control.

All other events such as vendor issues, decertification of EHR, etc. should be filed as a Promoting Interoperability Hardship Exception.

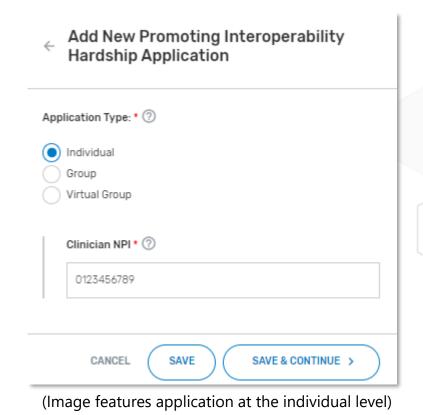
CANCEL

CONTINUE >



**Step 4: Select Application Type** 

Select the **participation level** at which you intend to participate in MIPS, then select **Save** & **Continue**.



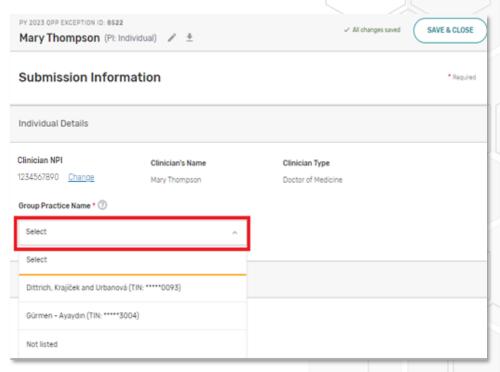
<sup>\*</sup>The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the <a href="QPP website">QPP website</a>.

### **Step 5: Enter Participation Level Information**

Enter the required participation level information.

The required information for each participation level is as follows:

Participation Level	Required Information			
Individual Clinician	<ul><li>National Provider Identifier (NPI)</li><li>Practice Affiliation</li></ul>			
Group	<ul> <li>Taxpayer Identification Number (TIN)</li> </ul>			
Virtual Group	Virtual Group Identifier			



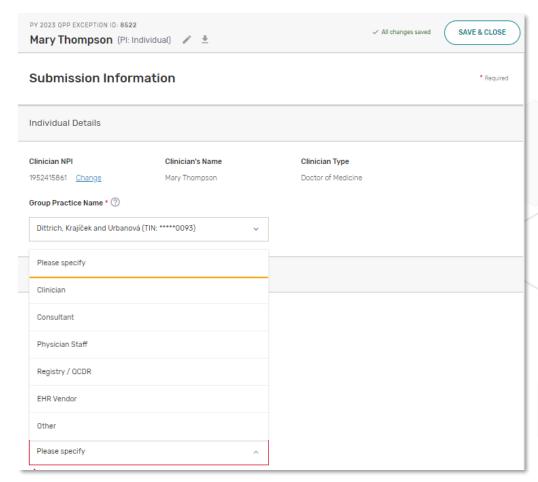
(Image features application at the individual level)

<sup>\*</sup>The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the <a href="QPP website">QPP website</a>.

### **Step 6: Enter Submitter Details**

Enter your contact information (as the submitter) and identify your relationship to the party identified in the

application.

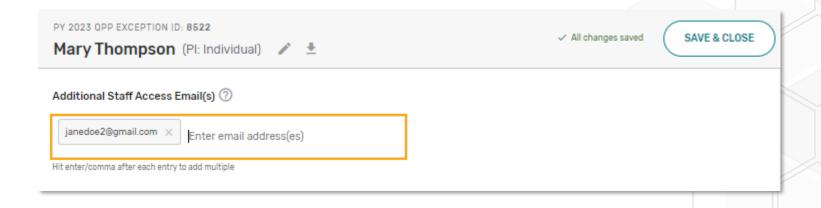


<sup>\*</sup>The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the <a href="QPP website">QPP website</a>.

### **Step 7: Enter Additional Staff in Additional Access Section**

You can identify additional users to receive notifications about the application in the **Additional Access** section.

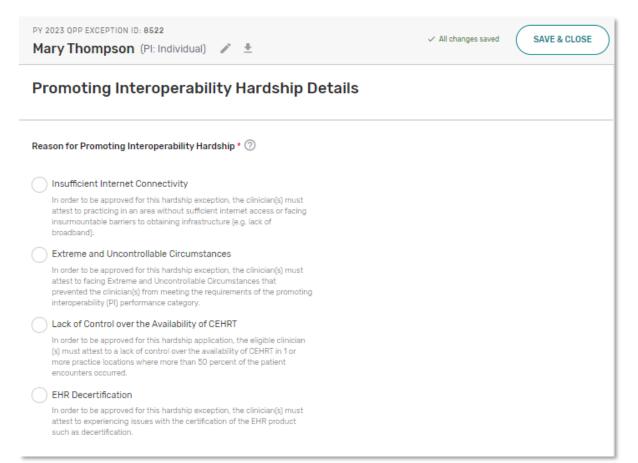
If there's a HARP account associated with the email address(es) you provide, the person will be able to sign into their own account on the QPP website and access the application.



<sup>\*</sup>The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the <a href="QPP website">QPP website</a>.

### Step 8: Select the Reason for the MIPS Promoting Interoperability Hardship

Select the option that aligns with your reason for submitting an MIPS Promoting Interoperability Hardship Exception application.



Note: You don't need to submit supporting documentation with your application. However, you should retain documentation of the circumstances supporting your application for your own records in case you are selected by CMS for data validation or an audit. See our 2023 MIPS Data Validation Criteria for details on the data validation process,



### **Step 9: Complete Attestation and Provide Event Description**

Before submitting your application, you must **complete the attestation** (differs for each reason option).

- Insufficient Internet Connectivity
- Extreme and Uncontrollable Circumstances
- Lack of Control Over the Availability of CEHRT
- EHR Decertification

You also can provide an optional **brief description** on the hardship you experienced and how performance data is impacted.

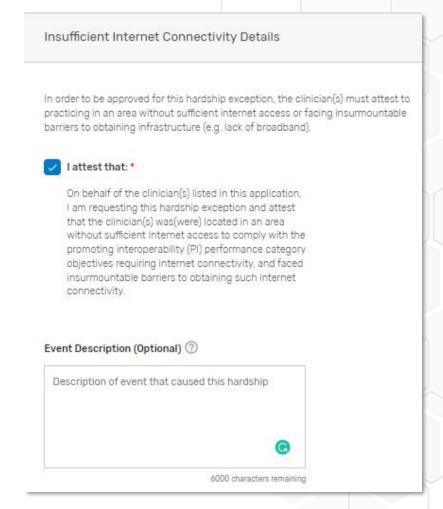
<sup>\*</sup>The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the <a href="QPP website">QPP website</a>.

**Step 9: Complete Attestation and Provide Event Description** (Continued)

#### **Reason Option 1:** Insufficient Internet Connectivity

Review the attestation statement and select "I attest."

You can provide an optional description of the hardship event.



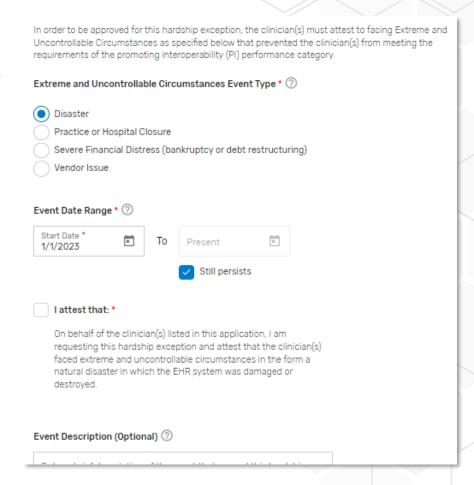


### **Step 9: Complete Attestation and Provide Event Description** (Continued)

## <u>Reason Option 2:</u> Extreme and Uncontrollable Circumstances

Select the extreme and uncontrollable circumstances event type that applies to you, enter the event dates, then review the attestation statement and select "I attest."

You can provide an optional description of the hardship event.





### **Step 9: Complete Attestation and Provide Event Description** (Continued)

## Reason Option 3: Lack of Control Over the Availability of CEHRT

Review the attestation statement and select "I attest." You can provide an optional description of the hardship event.

#### Lack of Control over the Availability of CEHRT

In order to be approved for this hardship application, the eligible clinician(s) must attest to a lack of control over the availability of CEHRT in 1 or more practice locations where more than 50 percent of the patient encounters occurred.

#### I attest that: \*

On behalf of the clinician(s) listed in this application, I am requesting this hardship exception and attest that the clinician(s) lacked of control over the availability of CEHRT in 1 or more practice locations where more than 50 percent of the patient encounters occurred.

#### Event Description (Optional) ②

Enter a brief description of the event that caused this hardship

6000 characters remaining

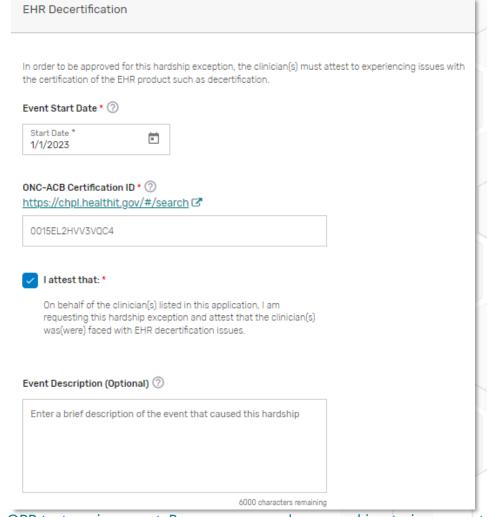


### **Step 9: Complete Attestation and Provide Event Description** (Continued)

#### **Reason Option 4:** EHR Decertification

Enter the date that your EHR was decertified and your ONC-ACB Certification ID. Then, review the attestation statement and select "I attest."

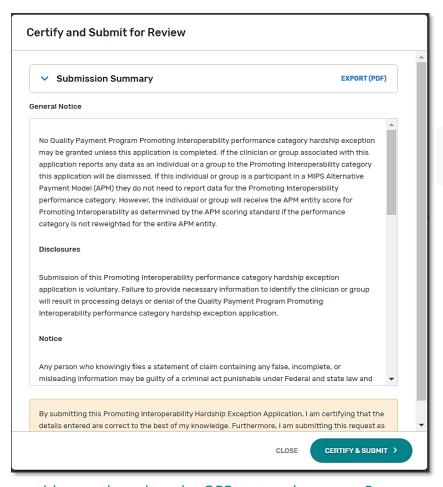
You can provide an optional description of the hardship event.





### **Step 10: Submit MIPS Promoting Interoperability Hardship Application**

Once you're done with your application, review the disclosures, then select Certify & Submit.

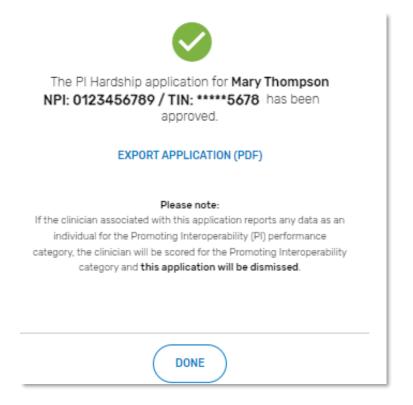




### **MIPS Promoting Interoperability Hardship Application Submission Confirmation**

After you submit your MIPS Promoting Interoperability Hardship application, you will receive a message stating that your hardship application has been successfully submitted and is pending review.

You'll also receive an email notification.



See <u>Appendix D</u> for information on the various application statuses.





## Help, Acronyms, and Version History

### Where Can You Go for Help?

Contact the Quality Payment Program Service Center by email at <u>QPP@cms.hhs.gov</u>, create a <u>QPP Service Center ticket</u>, or by phone at 1-866-288-8292 (Monday through Friday, 8 a.m. - 8 p.m. ET).

 People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant. Visit the <u>Quality Payment</u>
<u>Program website</u> for other <u>help</u>
<u>and support information</u>, to learn
more about <u>MIPS</u>, and to check
out the resources available in the
<u>Quality Payment Program</u>
<u>Resource Library</u>.

## Help, Acronyms, and Version History

### **Version History**

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

Date	Description
09/29/2023	Updated Appendix A to add clinical social workers as individual clinicians eligible for reweighting and Appendix D to adjust the reporting entities for whom the table is applicable.
05/01/2023	Original Posting.





## Appendix A. Automatic Reweighting in the MIPS Promoting Interoperability Performance Category

Reason for Reweighting (Individual Clinicians)	Action Needed by the Individual
<ul> <li>You have one of these Special Statuses:</li> <li>Small Practice;</li> <li>Ambulatory Surgical Center (ASC)-based;</li> <li>Hospital-based; or</li> <li>Non-patient facing</li> </ul>	None – You're automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so.  You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.
<ul> <li>You are one of these clinician types:</li> <li>Physical therapist</li> <li>Occupational therapist</li> <li>Qualified speech-language pathologist</li> <li>Qualified audiologist</li> <li>Clinical psychologist</li> <li>Registered dietitian or nutrition professional</li> <li>Clinical social worker</li> </ul>	None – You're automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so.  You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.
<ul> <li>Reason for Reweighting (Groups and Virtual Groups)</li> <li>You have one of these Special Statuses: <ul> <li>Ambulatory Surgical Center (ASC)-based.</li> <li>Small Practice</li> <li>Hospital-based: Group or virtual group must have more than 75% of clinicians designated as hospital-based.</li> <li>Non-patient facing: Group or virtual group must have more than 75% of clinicians designated as non-patient facing.</li> </ul> </li> </ul>	Action Needed by the Group or Virtual Group  You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.
All of the MIPS eligible clinicians in your group or virtual group qualify for reweighting as individuals (through any combination of special statuses, clinician type, and approved hardship exceptions).	You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.



## Appendices Appendix B.

# MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Individual Clinicians, Groups and Virtual Groups

The table below illustrates the 2023 performance category weights and reweighting policies that CMS will apply to clinicians, groups, and virtual groups reporting via traditional MIPS.

Refer to Appendix D

Refer to <u>Appendix D</u> for reweighting policies that apply to APM Entities.

ity

#### **Important Reminders:**

o Individual Clinicians, Groups, Virtual Groups: If fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100%, or all performance categories are weighted at 0%), the clinician, group, or virtual group will receive a final score equal to the performance threshold and the MIPS eligible clinicians will receive a neutral payment adjustment in the 2025 payment year.

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperabili Category Weig
No Reweighting				
Standard Weighting under traditional MIPS	30%	30%	15%	25%
Reweight 1 Performance Category				
No Cost (Cost → Quality and Promoting Interoperability)	55%	0%	15%	30%
No Improvement Activities (Improvement Activities → Quality)	45%	30%	0%	25%
No Promoting Interoperability (Promoting Interoperability → Quality)	55%	30%	15%	0%
No Quality (Quality → Promoting Interoperability)	0%	30%	15%	55%

Note: Small practices have a different distribution policy than individual clinicians, larger groups, and virtual groups.

Appendix B.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Individual Clinicians, Groups and Virtual Groups (Continued)

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
Reweight 2 Performance Categories				
No Cost + No Promoting Interoperability (Cost + Promoting Interoperability → Quality)	85%	0%	15%	0%
No Cost + No Quality (Cost + Quality → Promoting Interoperability)	0%	0%	15%	85%
No Cost + No Improvement Activities (Cost + Improvement Activities → Promoting Interoperability + Quality)	70%	0%	0%	30%
No Promoting Interoperability + No Quality (Promoting Interoperability + Quality → Cost + Improvement Activities)	0%	50%	50%	0%
No Promoting Interoperability + No Improvement Activities (Promoting Interoperability + Improvement Activities → Quality)	70%	30%	0%	0%
No Quality + No Improvement Activities (Quality + Improvement Activities → Promoting Interoperability)	0%	30%	0%	70%

**Note:** If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not submitted. See next slide for additional information.



Appendix B.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Individual Clinicians, Groups and Virtual Groups (Continued)

MIPS Performance Category Reweighting Scenario

**Quality Category Weight** 

Cost Category Weight Improvement
Activities
Category Weight

Promoting Interoperability Category Weight

#### **Reweight 3 Performance Categories**

If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not and receive a neutral payment adjustment.

#### **Reweight 4 Performance Categories**

If all performance categories are reweighted to 0%, you'll receive a score equal to the performance threshold regardless of any data submitted or not and receive a neutral payment adjustment.



### **Appendix C.**

## MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Small Practices

The table below illustrates the 2023 performance category weights and reweighting policies that CMS will apply to small practices.

Refer to <u>Appendix D</u> for reweighting policies that apply to APM Entities reporting the APP. APM Entities reporting traditional MIPS or MVPs can **only** request reweighting for **all** performance categories.

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under traditional MIPS for small practices	30%	30%	15%	25%
	Reweight 1 Perform	nance Category		
No Cost (Cost → Quality and Promoting Interoperability)	55%	0%	15%	30%
No Improvement Activities (Improvement Activities → Quality)	45%	30%	0%	25%
No Promoting Interoperability (Promoting Interoperability → Quality and Improvement Activities)	40%	30%	30%	0%
No Quality (Quality → Promoting Interoperability)	0%	30%	15%	55%



### Appendix C.

## MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Small Practices

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
Reweight 2 Performance Categories				
No Cost + No Promoting Interoperability (Cost + Promoting Interoperability → Quality and Improvement Activities)	50%	0%	50%	0%
No Cost + No Quality (Cost + Quality → Promoting Interoperability)	0%	0%	15%	85%
No Cost + No Improvement Activities (Cost + Improvement Activities → Promoting Interoperability + Quality)	70%	0%	0%	30%
No Promoting Interoperability + No Quality (Promoting Interoperability + Quality → Cost + Improvement Activities)	0%	50%	50%	0%
No Promoting Interoperability + No Improvement Activities (Promoting Interoperability + Improvement Activities → Quality)	70%	30%	0%	0%
No Quality + No Improvement Activities (Quality + Improvement Activities → Promoting Interoperability)	0%	30%	0%	70%

**Note:** If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not submitted. See next slide for additional information.



### Appendix D.

### MIPS Performance Category Weight Redistribution Policies for APM Entities and the APP Finalized for the 2023 Performance Year

The table below illustrates the 2023 performance category weights and reweighting policies that apply to individual clinicians, groups and APM Entities reporting the APP.

#### Reminders:

- Cost is not scored under the APP.
- There are no reporting requirements for the improvement activities performance category under the APP for the 2023 performance year. Participants reporting via the APP will automatically receive full credit for the improvement activities performance category for the 2023 performance year.
- Participants reporting via the APP will follow the same reporting requirements as traditional MIPS for the Promoting Interoperability performance category.

MIPS Performance Category Reweighting Scenario under the APP	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under the APP	50%	0%	20%	30%
Reweight 1 Performance Category				
No Promoting Interoperability	75%	0%	25%	0%
(Promoting Interoperability → Quality)				
No Quality				
	0%	0%	25%	75%
(Quality → Promoting Interoperability)				
Reweight 2 + Performance Categories				

If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not and receive a neutral payment adjustment.



# Appendix E. MIPS Promoting Interoperability Hardship Exception Application Status Descriptions

The table below provides a description of each application status in the order of which they occur.

Draft in Progress	Submitted – Pending Approval	Approved / Denied	Withdrawn
Draft in Progress	Submitted - Pending Approval	Approved	
	,	We completed our review of your application and approved your request.	You've withdrawn your application. You can withdraw your application
	your application.  Applications are reviewed	Denied	at any point in the process.  An application can't be reopened after being
working on your application.	in the order of which they're received.	We completed our review of your application and denied your request.	withdrawn. You'll need to complete a new application.

