QPP 2021
Participation Results At-A-Glance

Quality Payment PROGRAM

In the 2021 performance year for the Quality Payment Program (QPP)

93.85% were engaged in QPP in 2021

MORE clinicians achieved QP status than in 2020

4.95% received reweighting of one or more Merit-based Incentive Payment System (MIPS) performance categories[1]

Snapshot of 2023 Payment Adjustments for MIPS Eligible Clinicians

78% will receive a positive adjustment and an additional adjustment for exceptional performance

8% will receive a positive payment adjustment (no exceptional performance adjustment)

11% will receive a neutral adjustment (no increase or decrease)

3% will receive a negative payment adjustment

General Participation Numbers in 2021

698,859 Total clinicians who will receive a MIPS payment adjustment[2]

655,850 Total engaged clinicians who will receive a MIPS score & payment adjustment[2]

271,231 Total number of Qualifying Alternative Payment Model (APM) Participants (QPs)

3,365 Total number of Partial QPs

Payment Adjustment Highlights for MIPS Eligible Clinicians Who Participated in QPP

Percent of participating clinicians who will receive that relevant payment adjustment**	Negative* 0–59.99 pts **3%**	Neutral 60.00 pts **11%**	Positive 60.01–84.99 pts **8%**	Exceptional 85.00–100.00 pts **78%**
Min Adjustment	0.00%	0.00%	0.00%	0.18%
Max Adjustment	-9.00%	0.00%	0.07%	2.34%
Min Final Score	0.00	60.00	60.01	85.00
Max Final Score	59.99	60.00	84.99	100.00

Payment Adjustment Highlights for MIPS Eligible Clinicians Who Were Engaged in QPP

Percent of participating clinicians who will receive that relevant payment adjustment**	Negative* 0–59.99 pts **4%**	Neutral 60.00 pts **5%**	Positive 60.01–84.99 pts **9%**	Exceptional 85.00–100.00 pts **83%**
Min Adjustment	0%	0.00%	0.00%	0.18%
Max Adjustment	-9.00%	0.00%	0.07%	2.34%
Min Final Score	0.00	60.00	60.01	85.00
Max Final Score	59.99	60.00	84.99	100.00

1 ***Note:*** *This percentage is based on the participants who had an Extreme and Uncontrollable Circumstances Exception. It excludes the cost performance category as that category was reweighted for all participants in PY 2021.*
2 ***Note:*** *positive, neutral, or negative*
** Clinicians with a 2021 MIPS final score below the performance threshold of 60 points receive a negative payment adjustment in the 2023 payment year.*
*** These percentages have been rounded to whole numbers for this infographic*

Overall MIPS Participation Numbers in 2020 vs. 2021

The following chart outlines the performance threshold distribution in MIPS among eligible individuals, groups, virtual groups[3], and those who participated in MIPS through their APM Entity. It also includes data on the number of QPs that were excluded from MIPS and on the total number of Partial QPs, some of whom elected to participate in MIPS.

Note: The Centers for Medicare & Medicaid Services (CMS) defines participating clinicians as those who receive a score greater than 0, including clinicians whose score is based solely on an Extreme and Uncontrollable Circumstances Exception and those reporting as individuals whose score is based solely on measures calculated by CMS.

	2020[4]	vs	2021
Total clinicians receiving a MIPS payment adjustment (positive, neutral[5], or negative)	933,545		698,859
Percent of clinicians with a final score at or above the exceptional performance threshold	80.60%		77.86%
Percent of clinicians with a final score above the performance threshold and below the exceptional performance threshold	10.34%		8.26%
Percent of clinicians with a final score at the performance threshold	7.18%		10.57%
Percent of clinicians with a final score below the performance threshold	1.88%		3.31%
Total number of QPs	235,225		271,231
Total number of Partial QPs	10,328		3,365

MIPS Eligible Clinicians[6] Who Engaged in QPP:

- **93.85%** of MIPS eligible clinicians engaged in QPP
- **74.87%** of MIPS eligible clinicians in small practices engaged in QPP
- **486,510** received their final scores from individual or group participation
- **169,230** received their final score from Alternative Payment Model (APM) Entity participation

3 Under MIPS, an individual is a single Taxpayer Identification Number/National Provider Identifier (TIN/NPI); a group is 2 or more NPIs billing under a single TIN.

*4 **Note:** Data in the 2020 QPP Participation Results Infographic was pulled prior to the targeted review process. The data in this infographic reflects updates after the targeted review process.*

5 In 2020, a final score of 45 resulted in a neutral adjustment. In 2021, this increased to a final score of 60.

*6 **Note:** Clinicians are identified under QPP by their unique TIN/NPI.*

Overall Engaged Participation Numbers in 2020 vs. 2021

The following chart outlines the performance threshold distributions in MIPS among **engaged individuals, groups, virtual groups, and those who participated through a MIPS APM.**

Note: CMS defines engaged clinicians as those who have submitted some data to the program at the individual, group, virtual group, or APM Entity level (submitted one or more quality measures, attested to one more improvement activities, etc.)

	2020[7]	vs	2021
Total engaged clinicians receiving a MIPS score and payment adjustment (positive, neutral, or negative)	838,464		655,850
Percent of engaged clinicians with a final score at or above the exceptional performance threshold	84.20%		82.81%
Percent of engaged clinicians with a final score above the performance threshold and below the exceptional performance threshold	11.00%		8.73%
Percent of engaged clinicians with a final score at the performance threshold	2.74%		4.96%
Percent of engaged clinicians with a final score below the performance threshold	2.07%		3.50%

MIPS Eligible Clinicians Who Were Engaged in QPP:

93.85%
of MIPS eligible clinicians were engaged in QPP

74.87%
of MIPS eligible clinicians in small practices were engaged in QPP

7 ***Note:*** *Data in the 2020 QPP Participation Results Infographic was pulled prior to the targeted review process. The data in this infographic reflects updates after the targeted review process.*

Mean and Median National Final Scores in 2020 vs. 2021

The following table outlines the mean and median scores in MIPS among eligible **clinicians and small practices**. Mean is the sum of all Final Scores divided by count of Final Scores by unique TIN/NPI; median is the midpoint in distribution of all Final Scores.

	2020[8]	vs	2021
Mean Score (out of 100 points)	**89.47**		**89.22**
Mean score for small practices	**69.56**		**73.71**
Mean score for engaged small practices	**75.11**		**78.28**
Median score (out of 100 points)	**96.82**		**97.22**
Median score for small practices	**75.33**		**66.36**
Median score for engaged small practices	**86.78**		**91.52**

Individual and Group Participation Numbers in 2020 vs. 2021 (excluding MIPS APM participants)

The following table outlines the performance threshold distribution in MIPS among eligible **individuals and groups**. It does not include data for those who participated through a MIPS APM.

	2020[9]	vs	2021
Total clinicians receiving a MIPS score and payment adjustment (positive, neutral, or negative)	**534,791**		**528,962**
Percent of clinicians with a final score at or above the exceptional performance threshold	**69.20%**		**71.30%**
Percent of clinicians above the performance threshold and below the exceptional performance threshold	**17.60%**		**10.51%**
Percent of clinicians with a final score at the performance threshold	**9.91%**		**13.83%**
Percent of clinicians with a final score below the performance threshold	**3.28%**		**4.36%**

8 ***Note:*** *Data in the 2020 QPP Participation Results Infographic was pulled prior to the targeted review process. The data in this infographic reflects updates after the targeted review process.*

9 ***Note:*** *Data in the 2020 QPP Participation Results Infographic was pulled prior to the targeted review process. The data in this infographic reflects updates after the targeted review process.*

Overall Engagement Participation Numbers in 2020 vs. 2021

The following data outlines the performance threshold distribution in MIPS among **those who participated through a MIPS APM**. It does not include data for individuals and groups.

	2020[10]	vs	2021
Total clinicians receiving a MIPS score and payment adjustment (positive, neutral, or negative)	**398,758**		**169,787**
Percent of clinicians with a final score at or above the exceptional performance threshold	**95.88%**		**98.28%**
Percent of clinicians with a final score above the performance threshold and below the exceptional performance threshold	**0.61%**		**1.26%**
Percent of clinicians with a final score at the performance threshold	**3.51%**		**0.44%**
Percent of clinicians with a final score below the performance threshold	**0.00%**		**0.02%**

Note

The MIPS Extreme and Uncontrollable Circumstances policy doesn't affect the Quality Payment Program's budget neutrality requirement. MIPS payment adjustments are required by law to be budget neutral. Generally stated, budget neutrality means that the projected positive payment adjustments must be balanced by the projected negative payment adjustments. Given the performance threshold is lower than the mean and median scores for 2021, the majority of clinicians receiving the maximum negative payment adjustment to date have been individually eligible clinicians who didn't submit data.

- Under the Automatic Extreme and Uncontrollable Circumstances policy, we assigned these individual clinicians a neutral adjustment instead of the maximum negative payment adjustment.

As a result, MIPS eligible clinicians with a final score between 60.01 – 84.99 points are seeing a 2023 payment adjustment of 0.00% to 0.07% displayed in performance feedback. MIPS eligible clinicians with a final score above the performance threshold (85.00 points for the 2021 performance year) are eligible for an additional positive adjustment for exceptional performance. This additional positive payment adjustment is not subject to budget neutrality, but we do apply a scaling factor to account for available funds. For 2021, clinicians with a final score above 85.00 points will receive a positive adjustment ranging from 0.18% to a maximum of 2.34%.

Need Help?

To learn more about the Quality Payment Program:

- Visit QPP.CMS.GOV.
- Small, underserved, and rural practices: Learn about CMS's flexible options to help you actively participate in QPP.
- Contact the Quality Payment Program at 1-866-288-8292 or by e-mail at: QPP@cms.hhs.gov. People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant.

10 ***Note:*** *Data in the 2020 QPP Participation Results Infographic was pulled prior to the targeted review process. The data in this infographic reflects updates after the targeted review process.*