

Quality Payment PROGRAM

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

2020 Facility-Based Measurement
Quick Start Guide



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Purpose: *This resource provides a high-level overview of how facility-based measurement applies to MIPS eligible clinicians and their participation in MIPS.*



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.

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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 Facility-based Measurement?

Facility-based measurement offers clinicians and groups the opportunity to receive scores in the MIPS Quality and Cost performance categories based on the FY 2021 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 2020 MIPS performance period when they:

- Billed at least 75% of their covered professional services in a hospital setting (inpatient hospital (POS=21), on-campus outpatient hospital (POS=22), or emergency room (POS=23)) between October 1, 2018 and September 30, 2019;
- Billed at least one service in an inpatient hospital or emergency room between October 1, 2018 and September 30, 2019; and
- Can be assigned to a facility with a FY 2021 Hospital VBP Program score. (Note that FY 2021 scores will not be available before December 2020.)

Groups and virtual groups qualify for facility-based measurement in the 2020 MIPS performance period when:

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

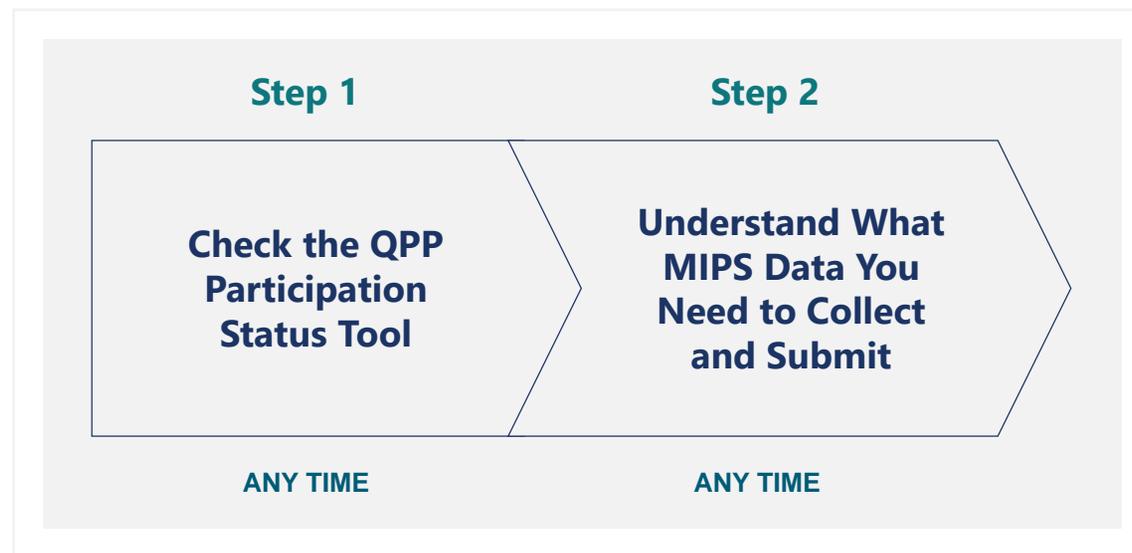


Getting Started with MIPS Facility-based Measurement in 2 Steps

Getting Started with MIPS Facility-based Measurement in 2 Steps

Getting Started with MIPS Facility-based Measurement in 2 Steps

This guide outlines 2 steps to understanding whether facility-based measurement applies to you, and what it means for your participation in MIPS.



Step 1: Check the QPP Participation Status Tool

We updated the [QPP Participation Status Tool](#) in March 2020 to identify facility-based clinicians and groups and their attributed facility for the 2020 MIPS performance period. Virtual groups will need to sign in to [qpp.cms.gov](#) to check their status.

From the lookup 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 [how other reporting factors are determined](#)

Clinician Level

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 a facility-based if your assigned facility has a FY 2020 Hospital VBP Program score.

- **Important:** We can't confirm whether your assigned facility has a FY 2021 score, used for MIPS facility-based scoring in 2020, until the end of, or after, the 2020 MIPS performance period.

2. This is your **final facility-based status** for the 2020 MIPS performance period – we do not evaluate MIPS eligible clinicians for facility-based measurement eligibility during the 2nd segment of the MIPS determination period.

- **Exception:** Your status could change if you are identified as an APM participant in one of the APM snapshots. We do not apply facility-based measurement to eligible clinicians participating in MIPS through an APM Entity.

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

Facility-based clinicians, groups and virtual groups whose attributed facility has a FY 2021 Hospital VBP Program score will not need to submit additional quality data.

Facility-based clinicians:

Automatically receive Quality and Cost performance category scores based on their facility's FY 2021 Hospital VBP Program score, **even if:**

- They do not submit data for the Promoting Interoperability or Improvement Activities performance categories; or
- Their practice chooses to participate in MIPS as a group.

Facility-based groups:

Must submit data for the Improvement Activities and/or Promoting Interoperability performance category to be able to receive Quality and Cost scores based on their attributed facility's FY 2021 Hospital VBP Program score.

- **Why?** The submission signals the intent to participate as a group.

Facility-based virtual groups:

Automatically receive Quality and Cost performance category scores based on their facility's FY 2021 Hospital VBP Program score, **even if** they do not submit data for the Promoting Interoperability or Improvement Activities performance categories.

- **Why?** These clinicians have already elected (and been approved) to participate in MIPS as a virtual group.

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 2021 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 2021 Hospital VBP Program score, will not be available until final performance feedback is released in July 2021.

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

What You Need to Know:

It is possible for a facility to have a FY 2020 Hospital VBP score but not receive a FY 2021 Hospital VBP score.

This can occur if the facility does not meet one or more of the Hospital VBP Program's exclusion/eligibility criteria. Some examples of this 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).

If this happens:

- We will update your facility-based status in the [QPP Participation Status Tool](#);
- You will no longer be eligible for facility-based measurement; and
- You will need to submit quality measure data to MIPS.

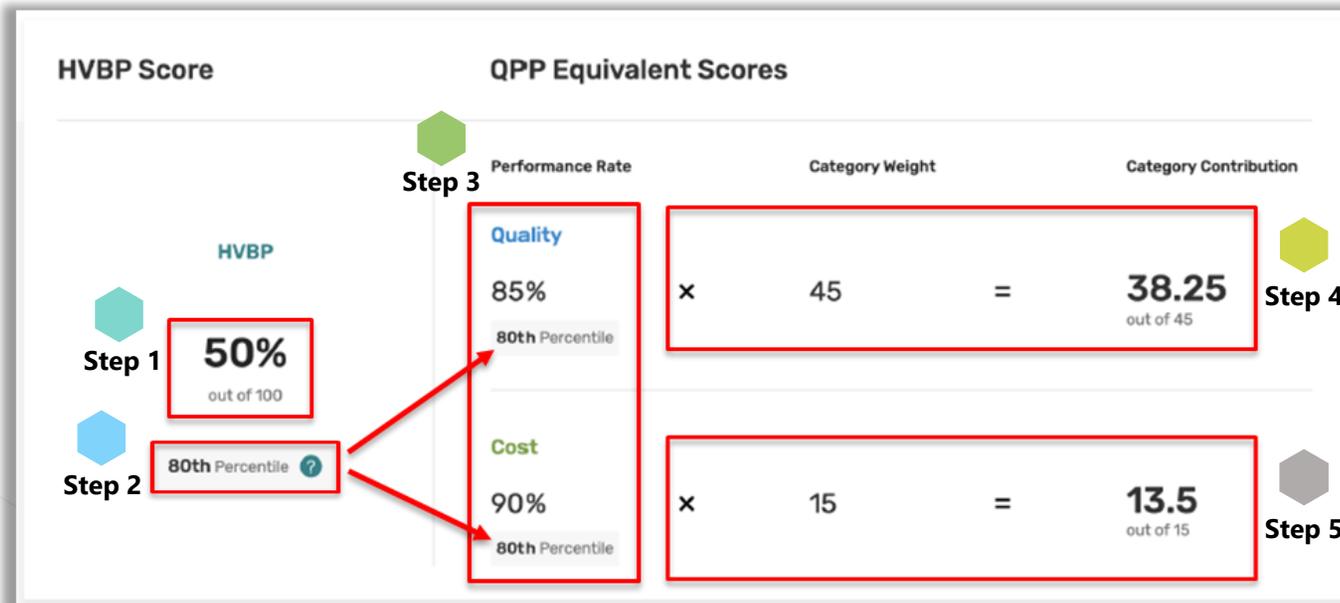
If you have questions or concerns about your assigned facility's continued compliance with the Hospital VBP Program, please contact your hospital administrator.



Facility-based Measurement FAQs

How Does Facility-based Measurement and Scoring Work?

- Step 1.** We will look at your facility's FY 2021 Hospital VBP Program score.
- Step 2.** We will determine how your facility's FY 2021 Hospital VBP Program score compares to all other facilities with a FY 2021 Hospital VBP Program score and arrive at a percentile.
- Step 3.** We will look at the range and distribution of unweighted PY 2020 MIPS Quality and Cost performance category percentile scores for MIPS participants, and identify which 2020 MIPS Quality (percentile) score and Cost (percentile) score maps to the percentile associated with your FY 2021 Hospital VBP Program score. Note that we will not assign a Quality percentile score below 30%.
- Step 4.** We will multiply the mapped 2020 MIPS Quality percentile score by the 2020 Quality performance category weight to determine the Quality performance category points contributing to your final score. (Note, this would be 70% for those who qualify for reweighting in the Promoting Interoperability performance category.)
- Step 5.** We will multiply the mapped 2020 MIPS Cost percentile score by the 2020 Cost performance category weight (15%) to determine the Cost performance category points contributing to your final score.



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.

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 2021 Hospital VBP Program score of the hospital to which you are assigned as an individual. If your practice also participated as a group, we will assign you the higher final score – your individual score (using facility-based measurement) or your group's score.

I'm a Facility-based Clinician and No Longer Affiliated with the Facility I'm Assigned to on the QPP 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 the facility has a FY 2021 Hospital VBP Program score.

Even though you are no longer affiliated with the facility (in the 2020 performance period), you were assigned to that facility based on services you furnished between October 1, 2018 and September 30, 2019, which generally aligns with the FY 2021 Hospital VBP Program performance period. Please make sure you check the [QPP Participation Status Tool](#) in late November when final MIPS eligibility is released to confirm your MIPS eligibility at this practice.

Are any Other Settings or Programs Used for Facility-based Measurement?

Not at this time. However, Section 1848(q)(2)(C)(ii) of the Social Security Act provides that the Secretary may use measures used for payment systems other than for physicians, such as measures for inpatient hospitals, for purposes of the Quality and Cost performance categories. Accordingly, we have requested comments on a number of issues and topics related to whether we should expand the facility-based scoring option to other facilities and programs in future years, particularly the use of end-stage renal disease (ESRD) and post-acute care (PAC) settings, each of which has their own VPB Programs. In addition, as value-based programs across different healthcare settings become more widespread, we will consider expanding this opportunity to other facility types and programs, as appropriate, in the future.

Will Facility-based Measurement be Publicly Reported?

We are 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 late 2020 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 You Can Go for Help

- Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 AM-8:00 PM ET or by e-mail at: 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 [QPP Resource Library](#).

Additional Resources

The [QPP Resource Library](#) 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
2020 MIPS Quality Performance Category Quick Start Guide	A high-level overview and practical information about quality measure selection, data collection, and submission for the 2020 MIPS Quality performance category.

Version History

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

Date	Change Description
3/10/2020	Original posting