

MIPS 2019 Final Rule

WHITE PAPER

MACRA BACKGROUND

The Medicare Access & CHIP Reauthorization Act of 2015 (MACRA) places each Medicare Part B provider into the following categories:

- Merit-based Incentive Payment System (MIPS)
- Advanced Alternative Payment Models (Advanced APMs)

THE MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

- MIPS replaces PQRS, Value-Based Modifier (VBM) and Meaningful Use reporting programs
- A Clinician's composite performance score for 2019 will be the basis for a positive, negative, or neutral payment adjustments



MIPS Eligible Clinicians

Only eligible clinicians (ECs) who exceed of the following thresholds are required to participate in MIPS

- EC or group ≤\$90K in Medicare Part B reimbursement, OR
- provide care to ≤ 200 beneficiaries
- provide ≤ 200 covered professional services under the Physician Fee Schedule (PFS)

2019 MIPS COMPONENTS AND WEIGHTS



45%
QUALITY



15%
COST

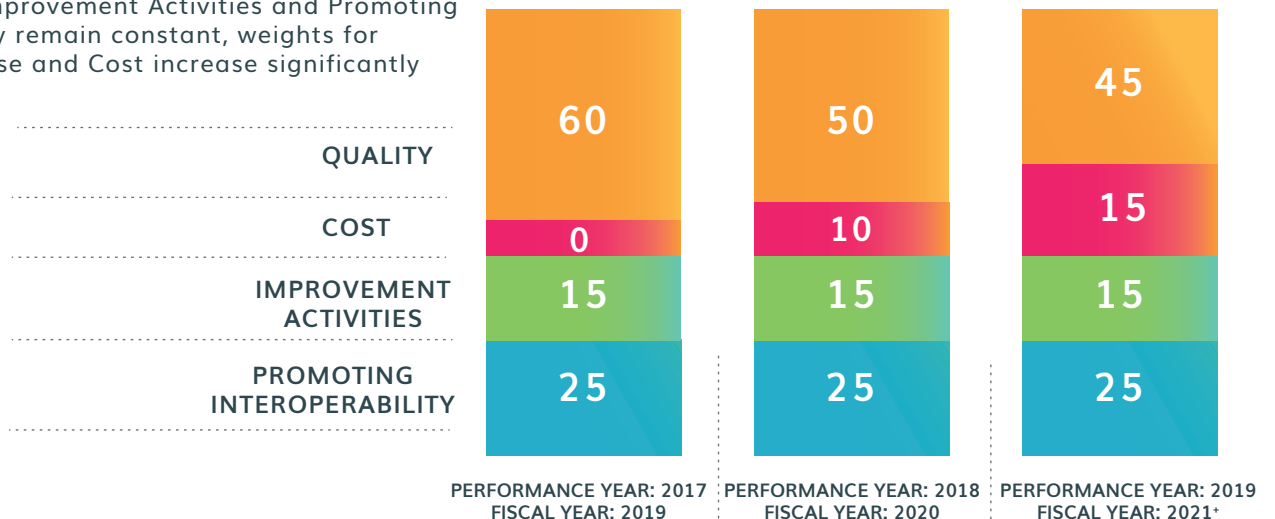


15%
IMPROVEMENT
ACTIVITIES



25%
PROMOTING
INTEROPERABILITY

MIPS becomes increasingly difficult in subsequent years. While Improvement Activities and Promoting Interoperability remain constant, weights for Quality decrease and Cost increase significantly over time.





MINIMUM SCORE REQUIRED TO AVOID A PENALTY IS HIGHER THAN THE PREVIOUS PERFORMANCE YEAR

MIPS 2018

- 15 - Minimum score necessary to Avoid a Penalty
- 70+ - Minimum point threshold for sharing the \$500 million Bonus Payments

MIPS 2019

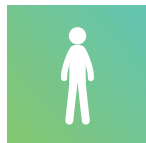
- 30 - Minimum score necessary to Avoid a 7% Penalty
- 80+ - Minimum point threshold for sharing the \$500 million Bonus Payments

WHAT IS YOUR OBJECTIVE?



IGNORE

Receive a 7% negative 2021 pay adjustment



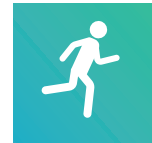
WALK

Earn 30 Points (avoid pay adjustment)



JOG

Earn 31 - 79 Points (0 - 7%) upward adjustment



RUN

Earn 80-100 Points (0.5- 10%) includes Bonus

HOW ARE YOU GOING TO REPORT?



INDIVIDUAL LEVEL:

Every EC reports & earns own MIPS Score (low-volume exclusion applies)



GROUP REPORTING:

All ECs participate and earn the Group's MIPS score



GROUP & INDIVIDUAL:

Report as Group, and higher performing ECs also report Individually

MIPS COMPONENTS

2019 PERFORMANCE PERIOD REQUIREMENTS

Quality	12 months
Cost	12 months
Promoting Interoperability	90 Days
Improvement Activities	90 Days

2019 QUALITY MEASURES

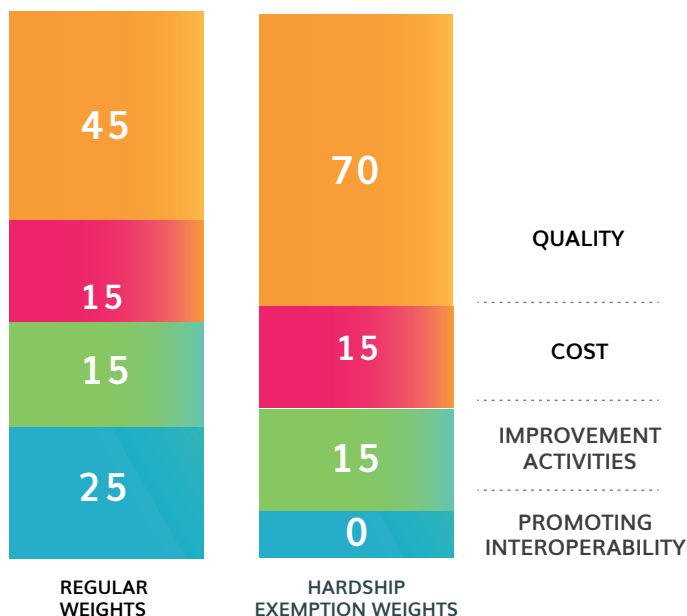
There are no QMs intentionally developed for use in Nursing Facilities. ECs and groups electing to participate in MIPS by use of individual QMs, must find 6 Measures that include CPT® codes they commonly employ. GEHRIMED's Regulatory Team compiled a complete list of 2018 QMs for use in LT-PAC Medicine. The list includes the CPT® codes associated with the measure, the quality domain, and allowable reporting options. Click Here to view GEHRIMED's complete list of LT-PAC-Specific Quality Measure <http://info.gehrimed.com/2018-quality-measures>



HARDSHIP EXEMPTION

Clinicians facing significant hardship and are unable to report Promoting Interoperability Measures, can apply to have the PI category score weighted to zero. However, doing so will re-weight the Quality Component to 75% of the total MIPS score. The points from PI will be redistributed to the Quality Component.

For an in-depth look at the PI Hardship Exemption, view our MIPS 2019 Webinar: <https://www.gehrimed.com/webinar/2019-mips-final-rule-webinar/>



SMALL GROUPS

Small Groups: ≤ 15 NPIs

- Quality – Activate 6 QM – 18 to 60 points
- IA - One High Weighted Activity - 15
- Five points for complex-patient bonus
- Cost – CMS Calculated – LTPAC will score poorly
- Automatically qualify for Promoting Interoperability Hardship Exemption

Bonus Points

- Six points added to Quality
- Five points for Complex-Patient Bonus
- Six points for End-to-End Electronic Reporting

LARGE GROUPS

Large Groups: ≥ 16 NPIs

- Quality – Activate 6 QM – six to 60 points
- IA - Two High Weighted Activity - 15
- Cost – CMS Calculated – LTPAC will score poorly
- "7th Measure" Administrative Claims Measure: All cause Readmissions; Medicare Calculates. Only if Group size ≥ 16 and ≥ 200 attributed patients are Hospitalized

Bonus Points

- OPX–additional outcome or high priority measures
- Five points for Complex-Patient Bonus
- Six points for End-to-End Electronic Reporting

MIPS DASHBOARDS

As the stakes get higher and the program increases in complexity, GEHRIMED has made MIPS as easy to understand as possible, now you can track your MIPS progress with the GEHRIMED MIPS Dashboards. The MIPS Dashboards are easy-to-manage tools that allow you to track your progress in the following MIPS categories: Promoting Interoperability, Quality, Improvement Activities, and a MIPS overview dashboard.



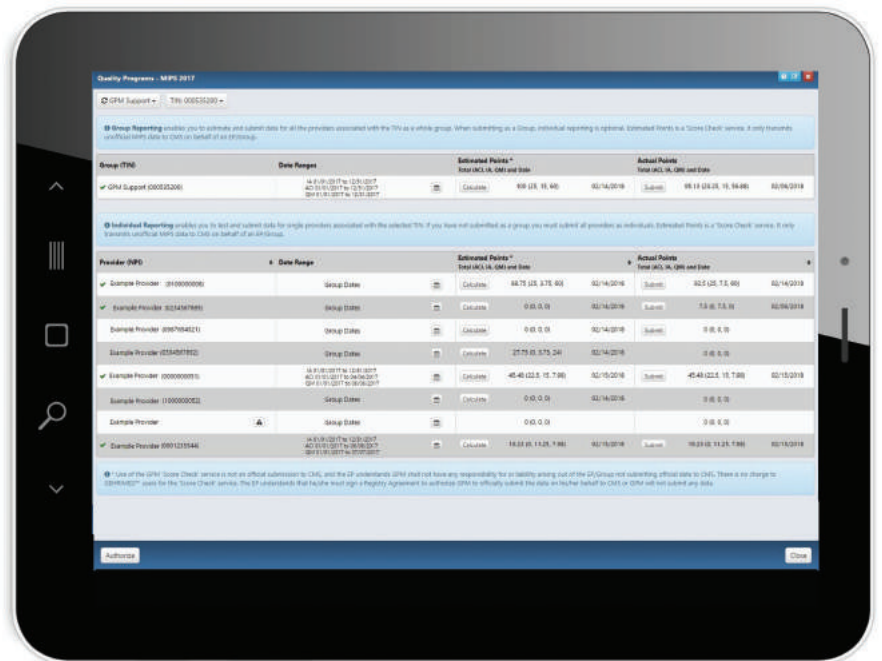
PI DASHBOARD

MIPS OVERVIEW

QUALITY DASHBOARD

MIPS SCORE CHECK

Now Practitioners and Groups have unlimited access, via the GPM registry, to CMS's MIPS Score Calculator to unofficially send data and preview their MIPS score free of charge. GEHRIMED enables practitioners and groups to test submission data and receive an estimate score that will provide some insight into your final submission score. Calculating estimated points is free of charge and is not recorded by CMS.



BONUS POINT OPPORTUNITIES

- Six-Point Small practice bonus (≤ 15 clinicians)
- Five-Point complex patient bonus (dual eligibility ratio & HCC risk score)
 - Based on Risk Score year prior to performance year
 - Patient attribution overlapping performance year (Sept-Aug)
- Submit extra outcome or high priority measures
 - Two points for each additional outcome measure
 - One point for each additional high priority measure
 - if reporting > six measures, CMS scores performance and QM Bonus awards independently
- Submit data via end-to-end CEHRT
 - Additional one point per measure will be awarded (up to ten percent)
 - Registry Electronic Submission using CEHRT Data also qualifies



KEY TAKEAWAYS

- 2015 Certified EHR required
- The performance threshold increases to 30 points in 2019 (from 15 points in 2018).
- LTPAC practitioners will receive five bonus points for treating complex patients
- If a practice or EC takes the PI hardship exemption, their Quality Score will be re-weighted to 75% of their total MIPS score
- Large Groups have bigger challenges achieving high performance scores
- Small groups receive an automatic six bonus points added to their Quality score
- GEHRIMED is a CEHRT and a Registry
- GEHRIMED compiled a list of Quality Measures specific for LT-PAC practitioners info.gehrimed.com/2018-quality-measures

For more information visit www.gehrimed.com



MIPS STRATEGY & NEXT STEPS

To learn more about MIPS access our on-demand webinar. Throughout the webinar our Clinical Regulatory Team will guide you through a better understanding of MIPS and share LTPAC-specific insights and strategies. Our Regulatory Team dissects the MIPS 2019 Final Rule and analyzes how it specifically impacts LTPAC practitioners.

<https://www.gehrimed.com/webinar/2019-mips-final-rule-webinar/>

GEHRIMED'S REGULATORY TEAM

GEHRIMED's in-house Regulatory Team helps keep your practice compliant in an ever-changing regulatory environment, from avoiding penalties to earning incentives, GEHRIMED has you covered. Contact a specialist for more information:

www.gehrimed.com/contact/

