

CMS Quality Payment Program

Merit-based Incentive Payment System (MIPS)

Am I required to report QPP?

- Applies to PA-C, MD, DO and ARNP
- > \$30,000 Medicare Income
- > 100 Medicare Patients
- > First Year Seeing Medicare Patients

Meet criteria?

Yes

Part of Advanced APM?

Yes

Use reporting structures already in place

Contact APM Administration

Earn

5% Payment in 2019

No

Exempt in 2017

Put system in place for Value-based Payment System

You qualify for the MIPS program. How is your score calculated?

Clinical Quality

Cost

Advancing Care Information

Improvement Activities

(Similar to PQRS)

60% of Score
(Possible 70 points)

271 Available Measures

Must report 6 measures;
Can report up to 9 for extra points

EMR Vendor or Registry

0% of Score
(Possible 40 points)

No Measures for 2017

Nothing to report in 2017

100% Claims-based Submission

(Similar to Meaningful Use)

25% of Score
(Possible 100 points)

15 Total Measures

Report on 5 measures to earn 50 points; Report on remaining 10 for bonus points

EMR Vendor or Registry

15% of Score
(Possible 60 points)

93 Total Activities

40 points possible with up to 4 measures

EMR Vendor or Registry

\$ -4%

Median

My MIPS Score?

\$ +4%