Quality Innovation Network-Quality Improvement Organizations (QIN-QIOs) and the Quality Payment Program (QPP): Who Does What?

Quality Improvement Organizations
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CMS promotes exceptional customer service and a "no wrong door" approach for Quality Payment Program technical assistance. No matter the point of entry, the eligible clinician will be connected to the appropriate technical assistance contractor. The process for ensuring that eligible clinicians are being supported by the appropriate technical assistance source may initially require one contractor to refer a clinician to another contractor via a warm hand-off.

	Quality Innovation Network-Quality Improvement Organizations: Quality Payment Program (QIN-QIOs: QPP)	Quality Payment Program Small, Underserved & Rural Support Contractors (QPP SURS Contractors)	Quality Innovation Network-Quality Improvement Organizations: Transforming Clinical Practice Initiative (QIN-QIOs: TCPI)[1]	Practice Transformation Networks: Transforming Clinical Practice Initiative (PTNs: TCPI)
Providers served	Eligible Clinicians (ECs)[2] in large groups (16 or more clinicians) in the QIN's region.	ECs in **S**mall groups (15 or fewer clinicians) in the QPP-SURS's region, especially those in medically **U**nderserved, **R**ural or health professional **S**hortage areas.	Practices in the QIN's region that are enrolled in a PTN.	Physician practices in the PTN's service area desiring assistance in transforming clinical and operational processes to deliver better value.
Providers excluded	ECs participating in **advanced** Alternative Payment Models[3] (APMs)** or in a Practice Transformation Network (PTN). ECs in small practices.	ECs participating in **advanced** APMs or a PTN. ECs in large practices.	Practices in the QIN's region that are not enrolled in a PTN.	Clinicians participating in **any** APM[4], including any type of Medicare Accountable Care Organization (ACO).
Primary objectives	Increase EC awareness and understanding of QPP. Support successful participation in QPP, particularly the Merit-based Incentive Payment System (MIPS).	Increase EC awareness and understanding of QPP. Support successful participation in QPP, particularly MIPS.	Assist PTNs with practice recruitment. In coordination with PTNs, perform baseline and follow-up assessments of a sample of PTN practices to measure transformation progress.	Prepare clinicians for successful participation in APMs. Increase EC awareness and understanding of QPP. Support successful participation in QPP, particularly MIPS.
Key QPP services	Education and information about program structure, requirements, timelines. Response to EC inquiries, whether direct or through CMS help desk.	Education and information about program structure, requirements, timelines. Response to EC inquiries, whether direct or through CMS help desk.	Some elements of practice assessment may be proxies for QPP readiness.	Education and information about program structure, requirements, timelines. Response to PTN participant inquiries about QPP.

[1] CMS' Transforming Clinical Practice Initiative; its two primary components are 1) Practice Transformation Networks and 2) Support and Alignment Networks.

[2] Eligible Clinicians in 2017 are physicians, physician assistants, nurse practitioners, clinical nurse specialists and certified registered nurse anesthetists who bill more than $30,000 to Medicare and provide care to more than 100 Medicare patients per year.

[3] Advanced APMs require clinicians to assume some financial risk for patient outcomes.

[4] CMS does not designate all APMs as "advanced"; refer to this table for guidance.

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Key QPP services *(continued)*	Promotion of educational resources available from CMS. General technical assistance to understand potential financial impact of participation/non-participation, select "pace" of QPP participation, understand options for advanced APM participation. Focused technical assistance, such as: **MIPS Quality Category**: Assistance for selecting PQRS measures, reporting data, using data to improve performance. **MIPS Advancing Care Information Category**: Referral to best practices, resources for optimizing EHR systems for better care and efficiency. **MIPS Improvement Activity Category**: Help selecting and documenting activities. EC participation in certain QIN improvement initiatives counts toward this category's requirements. **MIPS Cost Category**: Help obtaining and understanding the QRUR.	Intensive outreach, networking to ensure SURS ECs are aware of QPP, help CMS makes available. Promotion of educational resources available from CMS. General technical assistance to understand potential financial impact of participation/non-participation, select "pace" of QPP participation, understand options for advanced APM participation. Focused technical assistance, such as: **MIPS Quality Category**: Assistance for selecting PQRS measures, reporting data, using data to improve performance. **MIPS Advancing Care Information Category**: Referral to best practices, resources for optimizing EHR systems for better care and efficiency. **MIPS Improvement Activity Category**: Help selecting and documenting activities. **MIPS Cost Category**: Help obtaining and understanding the QRUR.		Promotion of educational resources available from CMS. General technical assistance to understand potential financial impact of participation/non-participation, select "pace" of QPP participation, understand options for advanced APM participation. Focused technical assistance, such as: **MIPS Quality Category**: Assistance for reporting data on PQRS measures and using data to improve performance. **MIPS Advancing Care Information Category**: Assistance optimizing EHR systems, workflows, for better care and efficiency. **MIPS Improvement Activity Category**: PTN participation allows ECs to meet half of the requirements in this MIPS category. **MIPS Cost Category**: Technical assistance implementing processes that deliver better care at lower cost (transitional care management, chronic care management, annual wellness visit, specialty referrals based on data about performance).
How success is measured	**Clinicians**: Enroll in QPP, report data, avoid negative payment adjustment, earn positive payment adjustment. **QIN-QIO**: Deliver excellent customer service by responding to QPP inquiries within 1 business day, contribute to CMS' QPP reach.	**Clinicians**: Enroll in QPP, report data, avoid negative payment adjustment, earn positive payment adjustment. **QPP-SURS**: Reach at least 75% of SURS practices, demonstrate both good customer service and high customer satisfaction.	**Clinicians**: Enroll in PTN, receive PTN services targeted to their current stage and level of need. **QIN-QIO**: Deliver timely, thorough and accurate practice assessments.	**Clinicians**: Move through the 5 stages of transformation, "graduate" to ACO and benefit from shared savings. **PTN**: Demonstrate improved quality and decreased cost as a result of focusing improvement activities on PTN measure set. Graduate practices.