

Spotlight: Finding Merit-based Incentive Program (MIPS) Efficiencies

One of the promising practices that have emerged this month is the process of finding “MIPS efficiencies.” In other words, clinicians can **leverage a single quality improvement effort to meet multiple goals**. For instance, clinicians can focus on a single effort that earns credit across all three 2017 MIPS performance categories (i.e., Quality Measures, Improvement Activities, and Advancing Care Information Measures). Two specific examples of this approach are demonstrated in the table below, adapted from a recent webinar hosted by HealthInsight and Mountain Pacific Quality Health.¹

Clinicians can also unlock other benefits in their quality improvement efforts, such as complementary technical assistance from Quality Improvement Organizations (e.g., the B1: Improving Cardiac Health And Reducing Cardiac Healthcare Disparities initiative for a quality improvement effort focused on hypertension), credit towards Patient-Centered Medical Home recognition, or better positioning for future participation in an Advanced Alternate Payment Model.

Overall, this approach to find MIPS efficiencies may help to ease the burden of reporting so that clinicians can focus on their patients and avoid burnout.

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This newsletter is produced by IMPAQ International who is functioning as the QPP SURS Central Support contractor. Questions or suggestions about the newsletter can be sent to OPPSURS@IMPAQINT.COM.

Quality Improvement Effort	Quality Measures	Improvement Activities	Advancing Care Information Measures
Ensure that hypertension is addressed at each patient visit	Controlling High Blood Pressure (Quality ID 236; eCQM CMS165v5) Improvement in Blood Pressure (Quality ID 373; eCQM CMS165v5)	Chronic care and preventative care for empaneled patients (Improvement Activity IA_PM_13)	Use certified EHR technology (CEHRT) to attest on improvement activity IA_PM_13 to earn a 10% bonus score in the ACI category
Set up EHR alerts for diabetes mellitus patients being seen who are due for a foot exam; send secure reminder messages to patients	Diabetes: Foot Exam (Quality ID 163; eCQM CMS123v5)	Use of decision support and standardized treatment protocols (Improvement Activity IA_PSPA_21)	Secure Messaging (ACI_CCTPE_2)

¹Slides for this webinar can be found here: http://healthinsight.org/files/Quality%20Payment%20Program/Webinars/2017-07-11%20MIPS%20Improving%20Your%20Score%20with%20eCQI_FINAL.pdf

MIPS Milestone: Begin Data Collection by October 2 for 90 Consecutive Days of Participation

It's not too late to participate in the first year of the [Merit-based Incentive Payment System \(MIPS\)](#)—one of the two tracks in the [Quality Payment Program](#). The transition year of MIPS has been underway since January 1, 2017 and runs until December 31, 2017.

Transition year (2017) Participation:

For 2017, you can participate in one of three ways:

- Submit data covering a full year, or
- Submit data covering at least a consecutive 90-day period, or
- Submit a minimum amount of data (<90 days)

Remember: You should begin data collection no later than October 2, 2017, to report 90 consecutive days of data for the transition year. For example: If you are planning to submit 90 days or more of your quality data via your claims, you would need to begin adding the applicable quality data codes to your claims no later than October 2nd.

If you submit data for at least 90 days, you avoid the negative payment adjustment, and may be eligible for a **positive payment adjustment**.

Are you planning to submit less than 90 days of data?

If so, you can begin data collection as late as Dec 31st and still avoid the negative payment adjustment. However, more data increases your likelihood of earning a positive payment adjustment.

When is data submission?

This is a reminder to begin data collection. You will begin submitting your 2017 MIPS performance data on January 2 through March 31, 2018. If you are eligible to participate but choose not to submit data, you'll get a **negative 4% payment adjustment** which will go into effect on January 1, 2019.

Need Help Participating?

- Use the [MIPS Look-Up Tool](#) on the [Quality Payment Program website](#) to determine if you should participate in MIPS.
- Review resources available in the [Resource Library](#) including A Quick Start Guide to Participating in MIPS.
- Call for **FREE Technical Assistance** available to clinicians, especially those in [small, underserved, and rural practices](#).
- Contact the Quality Payment Program at QPP@cms.hhs.gov or 1-866-288-8292 (TTY: 1-877-715-6222).

WEBSITES**Centers for Medicare and Medicaid Services**[cms.gov](https://www.cms.gov)**Quality Payment Program**[qpp.cms.gov](https://www.qpp.cms.gov)**Healthcare Communities**[healthcarecommunities.org](https://www.healthcarecommunities.org)**For FREE assistance sponsored by CMS, clinicians in small practices can contact their Direct Support Organization**[qpp.cms.gov/about/small-underserved-rural-practices](https://www.qpp.cms.gov/about/small-underserved-rural-practices)**CONTACT US****QPP SURS Central Support Team**

(202) 774-1060

qppsurs@impaqint.com**CMS QPP Service Desk**

1 (866) 288-8292

1 (877) 715-6222 (TTY)

qpp@cms.hhs.gov

Emerging News: CMS Exceptions Due to Weather

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs – including the Quality Payment Program (QPP) and Merit-based Incentive Payment System (MIPS) – to certain providers located in areas affected by Hurricane Harvey and Hurricane Irma. The exceptions are being granted to assist these providers while they direct their resources toward caring for their patients and repairing structural damages to facilities.

Qualifying providers include acute care hospitals, Prospective Payment System (PPS)-exempt cancer hospitals, inpatient psychiatric facilities, skilled nursing facilities, home health agencies, hospices, inpatient rehabilitation facilities, Renal Dialysis Facilities, long-term care hospitals, and ambulatory surgical centers.



Clinicians will be granted exceptions without having to submit an extraordinary circumstances exception request if they are located in one of the areas designated by the Federal Emergency Management Agency (FEMA) as a major disaster county. Visit <https://www.cms.gov/About-CMS/Agency-Information/Emergency/Hurricanes.html> for the latest information from CMS, and contact your Direct Support Organization (DSO) for additional assistance (see the next article, “Direct Support Organization Contact Information” for your DSO’s contact information).

Register NOW for the next Quality Payment Program—MIPS LAN Webinar by clicking on the date you plan to participate:

[Tuesday, October 17, 3:30—4:30 pm. ET](#)

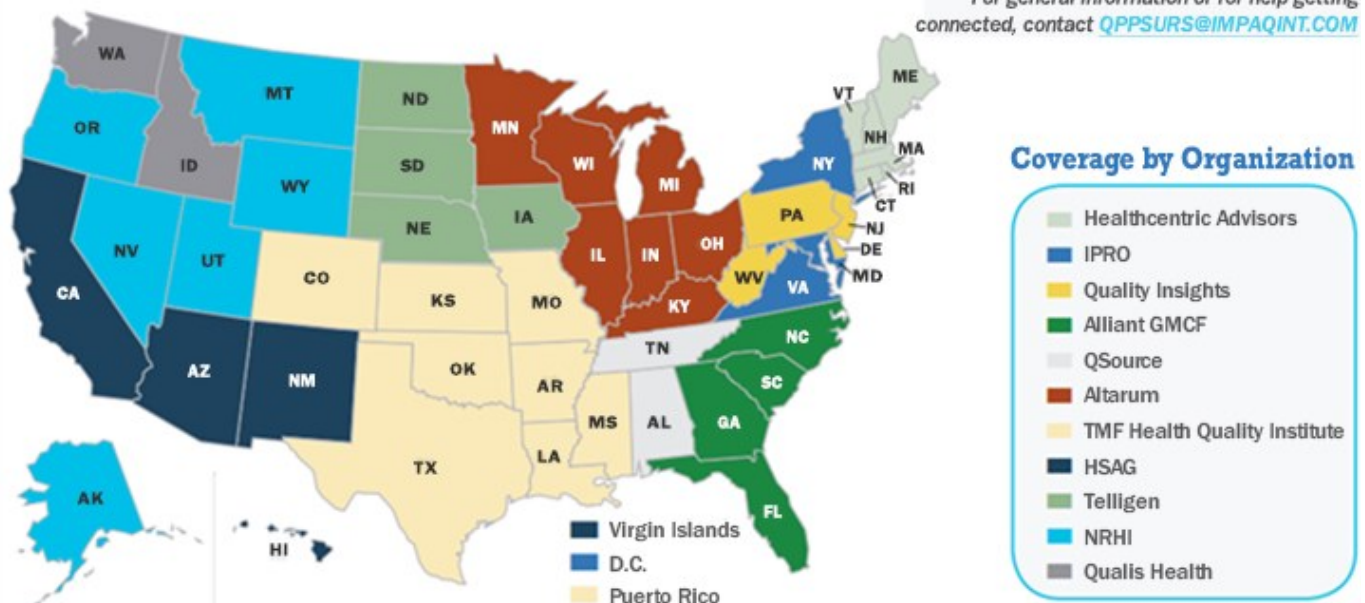
[Thursday, October 19, 11:00 a.m.—12:00 p.m. ET](#)

Direct Support Organization Contact Information

Each QPP SURS-eligible practice has access to free support and technical assistance from a Direct Support Organization (DSO) in their region to help them transition to the Quality Payment Program. The table and map below provide additional information on the DSO available in your state.

Direct Support Organization	States Covered	Contact Information
Altarum https://www.qppresourcecenter.com/	IL, IN, KY, MI, MN, OH, WI	qppinfo@altarum.org
Alliant GMCF http://www.alliantquality.org/content/quality-payment-program-qpp	FL, GA, NC, SC	QPPSURS@alliantquality.org
Healthcentric Advisors http://www.healthcarefornewengland.org/initiatives/macra/	CT, MA, ME, NH, RI, VT	NEQPPSURS@healthcentricadvisors.org
Health Services Advisory Group (HSAG) https://www.hsag.com/en/medicare-providers/quality-payment-program/	AZ, CA, NM, HI, VI	HSAGQPPSupport@hsag.com or Toll Free at 1-844-472-4227
IPRO https://ipro.org/for-providers/medicare-qpp	DC, MD, NY, VA	NY: ny-qppsupport@atlanticquality.org DC: dc-qppsupport@atlanticquality.org MD: md-qppsupport@atlanticquality.org VA: va-qppsupport@atlanticquality.org or Toll Free at 1-866-333-4702
Network for Regional Healthcare Improvement (NRHI) http://www.nrhi.org/news/small-practices-can-access-qpp-surs-support-qualified-payment-program-small-underserved-rural-support/	AK, MT, NV, OR, UT, WY	UT, OR, and NV: qpp@healthinsight.org MT, WY, AK: QualityPaymentHelp@mpqhf.org
Qsource http://www.qsource.org/initiatives/qpp/	AL, TN	techassist@qsource.org
Qualis Health http://medicare.qualishealth.org/projects/QPP-resource-center	ID, WA	QPP-SURS@qualishealth.org or Toll Free at 1-877-560-2618
Quality Insights (WVMI) https://qppsupport.org/Home.aspx	DE, NJ, PA, WV	qpp-surs@qualityinsights.org or Toll Free at 1-877-497-5065
Telligen https://telligenqpp.com/	IA, ND, NE, SD	qpp-surs@telligen.com or Toll Free at 1-844-358-4021
TMF Health Quality Institute https://www.tmf.org/Health-Care-Providers/Physicians/Population-Health-Management/Quality-Payment-Program	AR, CO, KS, LA, MO, MS, OK, PR, TX	QPP-SURS@tmf.org

For general information or for help getting connected, contact QPPSURS@IMPAQINT.COM



New Tools on CMS QPP Website

New QPP resources are now available! The Centers for Medicare & Medicaid Services (CMS) has recently posted the following new and updated resources on the QPP website (<https://qpp.cms.gov/>):

- [Quality Payment Program Strategic Objectives \(updated\)](#): Offers a summary of CMS’s seven strategic objectives for the Quality Payment Program (QPP).
- [A Quick Start Guide to the Merit-based Incentive Payment System \(MIPS\)](#): Provides a high-level overview of the MIPS and the larger QPP initiative.
- [Quality Performance Category Fact Sheet](#): Provides an overview of the Quality performance category under the Merit-based Incentive Payment System, including how to submit Quality performance data for the 2017 transition year.
- [2017 CMS-Approved Qualified Registries](#): Includes the list of qualified registries for the 2017 MIPS performance period, along with detailed information for those interested in their services.
- [2017 CMS-Approved Qualified Clinical Data Registries](#): Includes the list of qualified clinical data registries (QCDRs) for the 2017 MIPS performance period.
- [How to Design an Alternative Payment Model Design Toolkit \(updated\)](#): Provides a detailed and comprehensive set of resources for organizations or individuals interested in developing ideas for Alternative Payment Models (APMs).
- [Past QPP SURS Webinars and Programs](#): Provides a list of past Webinar Events, transcripts, slides, and recordings.

Additional resources are available in the [Resource Library](#) section of the Quality Payment Program website. For email notifications about QPP updates or approaching deadlines, go to the website and “Subscribe to Updates” by entering your email address at the bottom of the page.

Calling SURS Providers to Test the CMS QPP Website

CMS is looking for individuals to participate in Quality Payment Program website testing. To ensure the voice of small, underserved and rural practices is considered as a part of this process, we encourage SURS providers to participate in user testing.

CMS would like the Quality Payment Program website to meet the needs of the clinician community, by providing streamlined access to information and minimizing undue burdens for program participation. CMS invites representatives from organizations of all sizes, including small practices in rural and underserved areas, to assess current and future functionality of the website, as well as make recommendations for improvements. CMS is looking for:

- ◆ Medicare clinicians;
- ◆ Practice managers;
- ◆ Administrative staff; and
- ◆ EHR and Registry vendors.

If interested, please email Partnership@cms.hhs.gov to participate in a one-on-one feedback session.

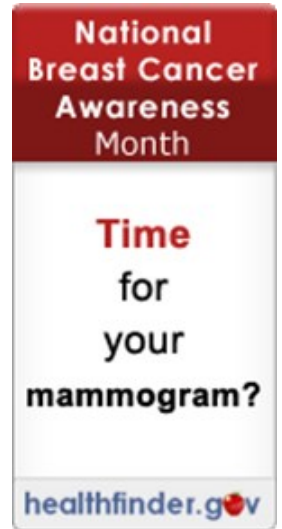
Monthly Observance: National Breast Cancer Awareness

October is National Breast Cancer Awareness Month

Approximately 1 in 8 women get breast cancer at some point in their lives. The good news is that most women can survive breast cancer if it's found and treated early.

Make Breast Cancer Awareness Month Count

MIPS rewards providers for activities that support the goals of Breast Cancer Awareness Month. Providers can earn points on their MIPS scores by conducting the activities shown in the table below, and opting to report on the corresponding measures.



Learn more about National Breast Cancer Awareness Month on HealthFinder.gov.

What Clinicians Can Do	Corresponding MIPS Measures
Conduct outreach to increase breast cancer screening rates among women age 50-74.	Quality Measure 112: Breast Cancer Screening Description: Percentage of women 50-74 years of age
Identify women due for breast cancer screening through panel support tools. Use reminders and outreach (e.g., phone calls, emails, postcards, patient portals and community health workers where available) to alert and educate patients.	Improvement Activity Measure IA_PM_13: Chronic Care and Preventive Care Management for Empaneled Patients Description: Proactively manage chronic and preventive care for empaneled patients that could include one or more activities listed on the
Report breast cancer data to a public health registry.	Advancing Care Information, ACI_PHCDRR_4: Public Health Registry Reporting Description: The MIPS eligible clinician is in active engagement with a public health agency to submit data to public health registries. Earn a 5% bonus in the advancing care information performance category score for submitting to one or more public health or
Electronically submit case reporting of breast cancer cases.	Advancing Care Information, ACI_PHCDRR_3: Electronic Case Reporting Description: The MIPS eligible clinician is in active engagement with a public health agency to electronically submit case reporting of reportable conditions. Earn a 5% bonus in the advancing care information performance category score for submitting to one or more public health or clinical data registries.