

## CMS Data Submission System for Clinicians in the Quality Payment Program is Open!

The data submission system for the Quality Payment Program (QPP) is now open on the [qpp.cms.gov](http://qpp.cms.gov) website. No need to wait: If you don't have all of your data yet, you can enter what you have and finish later. Submit as many measures as you like, and the data submission system will pick the



combination of measures that maximizes your score for this year. You'll see your predicted score, updated each time you enter data.

To log in, you'll need an Enterprise Identity Management (EIDM) account. You can set it up on this website: <https://portal.cms.gov/wps/portal/unauthportal/home/>. Detailed instructions are available here: <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/Enterprise-Identity-Data-Management-EIDM-User-Guide.pdf>. Having an EIDM account will allow you to submit data, or to view data submitted on your behalf by your electronic health records/health IT vendor, Qualified Clinical Data Registry, or Qualified Registry.

Not sure if you need to submit data under MIPS? You can check on that here: <https://qpp.cms.gov/participation-lookup>. If you are part of an Accountable Care Organization (ACO) that is submitting Quality Measures and Improvement Activities data on your behalf, you will still need to submit your own data in the "Advancing Care Information" category to get extra points for your use of electronic health records.

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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 [QPPSURS@IMPAQINT.COM](mailto:QPPSURS@IMPAQINT.COM).

### Need Free Help?

Contact your Direct Service Organization (DSO). Find your DSO here: <https://qpp.cms.gov/about/small-underserved-rural-practices>

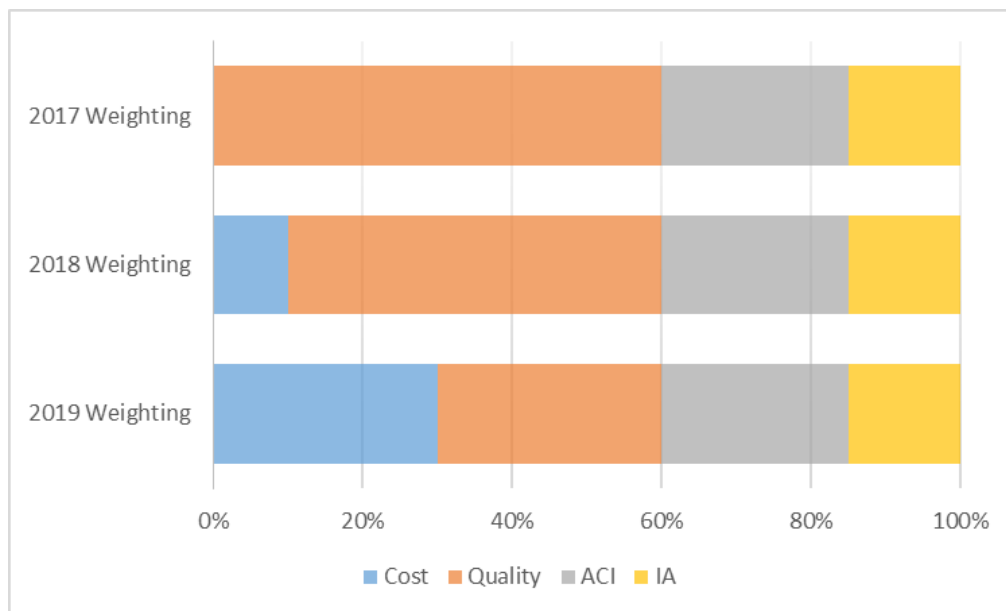
## Cost Category: What to Expect in 2018 and Beyond

Each year under the Quality Payment Program (QPP), CMS will automatically calculate each eligible clinician's cost score based on Medicare Spending per Beneficiary (MSPB) and total per capita cost measures. No action is required on your part to obtain a cost score.

For the QPP transition year of 2017, you will receive a cost score from CMS, but the cost score will NOT factor in to your Merit-based Incentive Payment System (MIPS) score. In 2017, the cost score is just provided to let you know how you're doing. Quality will account for 60% of your MIPS score, Advancing Care Information (ACI) will account for 25%, and Improvement Activities (IAs) will account for 15%. This is illustrated by the first bar in the graph below.

In the coming year, CMS will begin using the Cost category to determine physician payment adjustments that will take effect in 2020. In 2018, cost will account for 10% of your MIPS score while quality weighting will decrease to 50%. By 2019, cost will account for 30% and quality will account for 30% of your score to determine payment adjustments that will take effect in 2021. The other categories will remain at stable at 25% (ACI) and 15% (IAs).

When you get your cost score for 2017, take a look and start thinking about long-term strategies to improve your performance in this area.



### For more information on this and other QPP changes for 2018:

- Read the CMS fact sheet on Year 2 of the QPP: <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/QPP-Year-2-Final-Rule-Fact-Sheet.pdf>
- Watch for upcoming events from your Direct Service Organization (DSO). You can find your regional DSO here: <https://qpp.cms.gov/about/small-underserved-rural-practices>

## WEBSITES

## Centers for Medicare and Medicaid Services

[cms.gov](https://www.cms.gov)

## Quality Payment Program

[qpp.cms.gov](https://qpp.cms.gov)

## Healthcare Communities

[healthcarecommunities.org](https://healthcarecommunities.org)

For FREE assistance funded by CMS, clinicians in small practices can contact their Direct Support Organization

[qpp.cms.gov/about/small-underserved-rural-practices](https://qpp.cms.gov/about/small-underserved-rural-practices)

## CONTACT US

## QPP SURS Central Support Team

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## CMS QPP Service Desk

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[qpp@cms.hhs.gov](mailto:qpp@cms.hhs.gov)

# MIPS New Year's Resolutions

Happy New Year! Consider these activities for 2018 to start the year off strong.

- **2017 Data Submission:** Mark your calendars! The deadline to submit 2017 data is March 31, 2018.
- **2018 Data Collection:** Reach out to your Direct Support Organization (DSO) for help strategizing on your plan to collect and report 2018 data.

Dr. Jason Evans, of the Madison Chiropractic Center in South Dakota, also offered this advice:



“By doing a little bit every day, watching MIPS videos and leveraging my DSO’s technical assistance, I’m getting there. I’ll admit I was ready to throw in the towel several times, but my advice to others is: **If you're in it, don't quit. Do a little bit every day, watch a webinar, take a seminar.**”

So be encouraged! There are resources available to help you set goals and achieve them. Find your DSO contact information here and connect today: <https://qpp.cms.gov/about/small-underserved-rural-practices>.

If you reach out to your DSO for FREE assistance, your questions will be answered quickly! As of October 31, 2017, 99.9% of referrals for technical assistance were followed-up by DSOs within 1 business day. In addition, clinicians and small group practices report high satisfaction with the support they receive. You can contact your regional DSO for free technical assistance here: <https://qpp.cms.gov/about/small-underserved-rural-practices>. The QPP Service Center is also available at [qpp@cms.hhs.gov](mailto:qpp@cms.hhs.gov) or 1-866-288-8292.

# January is Cervical Health Awareness Month

January is Cervical Health Awareness Month, a time to promote ways women can protect against human papillomavirus (HPV) and cervical cancer. Around 79 million Americans currently have HPV and more than 11,000 women in the U.S. are diagnosed with cervical cancer each year, but the disease is almost always preventable with vaccination and appropriate screening (Pap and HPV tests).<sup>1, 2, 3</sup>

The Quality Payment Program rewards providers for activities that support cervical health, as well as other important screenings for women's health. For example, clinicians can earn MIPS points and positive payment adjustments by conducting and reporting on the activities in the table below.

What Clinicians Can Do	Corresponding MIPS Measures
Offer cervical cancer screenings as appropriate	<p><b>Quality Measure 309:</b> Cervical Cancer Screening</p> <p><b>Description:</b> Percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria:</p> <ul style="list-style-type: none"> <li>* Women age 21-64 who had cervical cytology performed every 3 years</li> <li>* Women age 30-64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years</li> </ul>
Offer other important screenings for women's health	<p><b>Quality Measure 310:</b> Chlamydia Screening for Women</p> <p><b>Description:</b> Percentage of women 16-24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement period</p> <p><b>Quality Measure 112:</b> Breast Cancer Screening</p> <p><b>Description:</b> Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer</p> <p><b>Quality Measure 039:</b> Screening for Osteoporosis for Women Aged 65-85 Years of Age</p> <p><b>Description:</b> Percentage of female patients aged 65-85 years of age who ever had a central dual-energy X-ray absorptiometry (DXA) to check for osteoporosis</p>

<sup>1</sup><https://www.cdc.gov/std/hpv/stdfact-hpv.htm>

<sup>2</sup><https://www.cdc.gov/cancer/hpv/statistics/cervical.htm>

<sup>3</sup><https://www.cdc.gov/cancer/cervical/statistics/index.htm>

## 2017 Transition Year FAQs

If you have QPP-related questions, you might find answers in the Frequently Asked Questions (FAQs) CMS has compiled. The FAQs explain who needs to participate, how you can participate, and how 2017 MIPS scores will be used to determine payment adjustments for 2019.

Since we are now in the data submission window (January 1-March 31, 2018), we are sharing some of the FAQs that focus on data submission for the 2017 transition year. See all 2017 FAQs at <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/2017-Quality-Payment-Program-Frequently-Asked-Questions.pdf>.

### **Q: Do I have to register to report data under MIPS?**

A: You don't have to register to report data under MIPS unless you're reporting data via the CMS Web Interface (a data submission option only available for groups of 25 or more eligible clinicians) or the Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS Survey for the Quality performance category. In other cases, when you submit data either through Medicare Part B claims, CEHRT, qualified registry, qualified clinical data registry (QCDR), or attestation (Improvement Activities or Advancing Care Information performance categories), you're demonstrating your participation in MIPS. No registration is required!

### **Q: What are the different ways I can submit MIPS data by performance category?**

A: If you're participating individually or as a group, you can submit data in these ways:

- **Quality performance category:** Claims (individuals only), qualified registry, QCDR, or CEHRT
- **Cost performance category:** no submission required
- **Improvement Activities (IA) performance category:** Attestation, qualified registry, QCDR, or CEHRT
- **Advancing Care Information (ACI) performance category:** Attestation, qualified registry, QCDR, or CEHRT

In addition, if you're reporting as a group, you can submit in these ways:

- **Quality performance category:** Administrative claims, CMS Web Interface (for groups of 25 or more eligible clinicians) or CMS-approved vendor for the CAHPS for MIPS Survey
- **IA and ACI performance categories:** CMS Web Interface

Eligible clinicians can select different data submission mechanisms for each performance category, but should only use one mechanism per category.

## Resource Roundup: Newly Available MIPS Tools

CMS continues to create new guides, tools, and tip sheets related to the Quality Payment Program. See below for a few newly released resources you may find useful.

### Accredited Online Courses: MLN Learning Management System

<https://learner.mlnlms.com/Default.aspx>

Looking to earn American Medical Association (AMA) Physician Recognition Award (PRA) Category Credits? Online, self-paced courses on the Quality Payment Program are available through the Medicare Learning Network® (MLN) Learning Management System. First time participants will need to register, but after that, you can access other courses without having to register. The latest course to be added is “Merit-based Incentive Payment System Advanced Payment Models.”

### MIPS Advancing Care Information Blocking, uploaded October 2017

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/ACI-Information-Blocking-fact-sheet.pdf>

To earn a score for the Advancing Care Information (ACI) performance category, you need to make sure your Certified Electronic Health Record Technology (CEHRT) has the necessary capabilities. This five-page fact document walks the reader through the actions needed in order to make sure information in your EHR is correctly shared.

### Eligible Measure Applicability (EMA) materials, uploaded September 2017

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/QPP-Eligible-Measure-Applicability-EMA-Materials.zip>

If you do not submit enough measures under the Quality performance category, CMS will use the EMA process to look at your claims or qualified registry data to see if there are additional measures you could have submitted. This toolkit includes 1) a five-page fact sheet with an overview of the EMA process, 2) a list of measures used in EMA for claims data submission, and 3) a list of measures used in EMA for registry data submission.

### Quality Payment Program Call: Audio Recording and Transcript

An [audio recording](#) and [transcript](#) are available for the November 30 call on the Quality Payment Program. During this call, learn about the Year 2 provisions in the final rule with comment and interim final rule with comment.

There are also **MIPS Measure Guides by provider type**. See if your specialty is listed!

- MIPS Measures for Anesthesiologists & Certified Registered Nurse Anesthetists, 9/7/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Anesthesiologists-and-Certified-Registered-Nurse-Anesthetists.pdf>
- MIPS Measures for Cardiologists, 6/15/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Cardiologists.pdf>

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## Resource Roundup: Newly Available MIPS Tools (Cont'd from Page 6)

- MIPS Measures for Emergency Medicine Clinicians, 9/7/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Emergency-Medicine-Clinicians.pdf>
- MIPS Measures for Ophthalmologists, 9/7/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Ophthalmologists.pdf>
- MIPS Measures for Optometrists, 11/17/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Optometrists.pdf>
- MIPS Measures for Orthopedists, 9/7/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Orthopedists.pdf>
- MIPS Measures for Podiatrists, 11/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Podiatrists.pdf>
- MIPS Measures for Primary Care Clinicians, 6/15/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Primary-Care-Clinicians.pdf>
- MIPS Measures for Radiologists, 11/2017 <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/MIPS-Measures-for-Radiologists.pdf>

To see the full list of resources available via the CMS website, please visit the QPP Resource Library at <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/Resource-library.html>.

### Information regarding upcoming events, along with registration information, can be found below:

#### January 2018 LAN Webinar: MIPS Data Submission: Practical Advice for Small Group Practices

Date: **Tuesday, January 23, 2018** at 11:00 am ET: [Register here](#)

Date: **Thursday, January 25, 2018** at 3:30 pm ET: [Register here](#)

#### February 2018 LAN Webinar: Implications of the Final Rule for Small Group Practices

Date: **Tuesday, February 20, 2018** at 7:00 pm ET

Date: **Thursday, February 22, 2018** at 11:00 am ET

Registration forthcoming

#### March 2018 LAN Webinar: How to Prepare for MIPS Cost Sharing

Date: **Tuesday, March 20, 2018** at 11:00 am ET

Date: **Thursday, March 22, 2018** at 7:00 pm ET

Registration forthcoming