The Physicians Advocacy Institute’s
Medicare Quality Payment Program (QPP)
Physician Education Initiative

2020 Merit-Based Incentive Payment System Alternative Payment Model (MIPS APM) Overview
What is MIPS?

Under MACRA’s Quality Payment Program (QPP), physicians may choose to participate in an Advanced Alternative Payment Model (APM) or submit data to the Merit-Based Incentive Payment System (MIPS).

MIPS is now in its fourth year and consolidates and sunsets the previous quality reporting programs by the Centers for Medicare and Medicaid Services (CMS), including the Physician Quality Reporting System (PQRS), Value-based Payment Modifier (VM), and the Electronic Health Records (EHR) Incentive program (Meaningful Use), into one program. In 2020 MIPS has four weighted performance categories: 1) quality (building off PQRS); 2) promoting interoperability (PI) (previously called Advancing Care Information, or ACI), building off Meaningful Use; 3) cost (building off the VM); and 4) improvement activities (a new category that rewards engagement in clinical quality improvement activities).

What are MIPS APMs?

MIPS APMs are a hybrid between the MIPS pathway and the Advanced APM pathway and have different reporting requirements and scoring than if physicians were participating in exclusively one pathway. There are two ways physicians can be in a MIPS APM:

- If you are participating in an APM Entity¹ that is participating in an Advanced APM but the APM Entity does not meet the Medicare patient or payment count thresholds for a qualifying Advanced APM participant (QP) or a partially qualifying Advanced APM participant (PQ).

  OR

- If you are participating in an APM Entity that is participating in an APM that is not considered an Advanced APM.

Examples of 2020 Medicare Advanced APMS

- Bundled Payments for Care Improvement Advanced Model (BPCI Advanced)

¹ Participation in APMs is through an APM Entity, which can be a separate entity like an Accountable Care Organization, or could be the practice itself, as is the case with Comprehensive Primary Care Plus (CPC+).
• Comprehensive ESRD Care Model (CEC) - Large dialysis organization (LDO) arrangements and Non-LDO one-sided or two-sided risk arrangements
• Comprehensive Primary Care Plus (CPC+)
• Medicare Shared Savings Program Tracks 1+, 2, 3, Basic Level A/B/C/D/E, and ENHANCED Track
• Next Generation ACO Model
• Oncology Care Model - One-sided & two-sided risk arrangements
• Vermont Medicare ACO Initiative (as part of the Vermont All-Payer ACO Model)
• Maryland Primary Care Program
• Independence at Home

How do I know if I am in a MIPS APM?

CMS has 4 snapshot dates, or assessment dates, during which it makes determinations about whether physicians and other clinicians are in a MIPS APM. To be considered participating in a MIPS APM, physicians and other eligible clinicians must be on an APM Entity’s Participant List on one of the following dates:

<table>
<thead>
<tr>
<th>Snapshot</th>
<th>Release on OPP Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predictive Snapshot</td>
<td>April 2020</td>
</tr>
<tr>
<td>Covers January 1, 2019 - August 31, 2019</td>
<td></td>
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<tr>
<td>Snapshot 1</td>
<td>July 2020</td>
</tr>
<tr>
<td>Covers January 1, 2020 – March 31, 2020</td>
<td></td>
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<tr>
<td>Snapshot 2</td>
<td>October 2020</td>
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<tr>
<td>Covers January 1, 2020 – June 30th, 2020</td>
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<tr>
<td>Snapshot 3</td>
<td>December 2020</td>
</tr>
<tr>
<td>Covers January 1, 2020 – August 31, 2020</td>
<td></td>
</tr>
<tr>
<td>Snapshot 4 (Shared Savings Program Only)</td>
<td>March 2021</td>
</tr>
<tr>
<td>Covers January 1, 2020 – December 31, 2020</td>
<td></td>
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</tbody>
</table>
A decision tree is available on the last page of this resource to help you determine whether you are participating in MIPS, an Advanced APM, or MIPS APM.

**How am I scored under a MIPS APM?**

All MIPS APMs are subject to the same standardized scoring and category weights and only three categories will be scored for MIPS APM: quality, promoting interoperability (PI), and improvement activities.

![2020 Scoring Standard for ALL MIPS APMs](image)

Under this scoring standard, physicians’ MIPS APM scores are determined on their APM Entity’s overall performance in each of the three scored MIPS categories compared to the CMS performance threshold score for a given year. The APM Entity will receive a score in each category, and its MIPS final score will be the sum of the weighted score of each category. Physicians will receive the same MIPS final score as the APM Entity.
# MIPS APM Scoring Standard

<table>
<thead>
<tr>
<th>Category</th>
<th>Submission Requirements</th>
<th>Scoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality</td>
<td>The APM Entity will submit quality measures to CMS as required by the MIPS APM. If the APM does not submit measures by the MIPS submission deadline, the APM will receive a score of 0 for the quality category.</td>
<td>If the MIPS APM requires the APM Entity to use a MIPS submission mechanism to submit the quality data, the same APM Entity score will apply to each TIN/NPI. CMS will derive an aggregate APM Entity score based on the available APM measures, and the same quality category performance score will apply to each TIN/NPI in the APM Entity. If the MIPS APM does not require the APM Entity to use a MIPS submission mechanism but a MIPS submission mechanism was sued, then the APM Entity will receive a 50% credit for the quality category score which will be added to the APM Entity’s quality category performance. If the APM Entity does not use a MIPS submission mechanism to submit the quality data, then the score for each MIPS eligible clinician is the higher of either the TIN level aggregate score OR the individual level score.</td>
</tr>
<tr>
<td>PI</td>
<td>Each MIPS eligible clinician, through individual or group TIN, report the PI information to MIPS.</td>
<td>The same APM Entity score will apply to each MIPS eligible clinician. CMS will take the highest score attributable to each MIPS eligible clinician, which may be derived from either group or individual reporting, and then average these scores for a single APM Entity score that will apply to each MIPS eligible clinician in the APM Entity.</td>
</tr>
<tr>
<td>Improvement Activities</td>
<td>CMS will use evaluate the category score based on activities already required for participation in the MIPS APM. If CMS determines the score is below 40 points, APM Entities will have the opportunity to submit additional improvement activities to raise the APM Entity improvement activity score.</td>
<td>The same APM Entity score will apply to each MIPS eligible clinician in the APM Entity based on the activities involved in participation in the MIPS APM. CMS has determined that APM Entities participating in any of the MIPS APMs listed on page 3 of this document will receive a full score for the Improvement Activities category.</td>
</tr>
</tbody>
</table>
For additional details on the scoring, please see the MIPS APM Scoring Overview available on PAI’s QPP Resource Center.

**Where can I go for more information?**

Additional resources and materials are available on PAI’s QPP Resource Center and the CMS QPP Resource Library.

If you are unsure where you stand, CMS recommends you talk to your CMS Innovation Center team or practice administrator managing your APM participation. You can also contact the QPP Service Center by email at qpp@cms.hhs.gov or by phone at 1-866-288-8292.
QPP Participation Options Tree

Are you participating in an APM through an APM Entity (e.g., ACO)?

Yes

Is the APM you are participating in considered an Advanced APM?

Yes

Ensure that you are on the APM Entity Participation List and check with the APM Entity or use the CMS lookup tool to determine your status.

PQ - exempt from MIPS but the APM Entity could elect to participate in MIPS APM

Neither QP or PQ - subject to MIPS Participation

No

Is the APM you are participating in considered a MIPS APM?

Yes

No. Then you are not in a MIPS APM and you can participate in MIPS as an individual or as part of a group. Use the CMS lookup tool to check your MIPS participation status at.

No. You are subject to participate in MIPS as an individual or as part of a group. Use the CMS lookup tool to check your MIPS participation status at.

No. You are subject to MIPS APM participation and scoring.

QP - exempt from MIPS and MIPS APM participation