QPP Roundup: April 2019

Providing monthly updates on PAI’s activities and QPP news for you and your practice.

QPP Tip of the Month: Check Your Eligibility for 2019

With the close of the reporting period for submission of your 2018 MIPS performance data, physicians and groups should check their eligibility for the 2019 MIPS participation year using the QPP Participation Status tool. You will need to know your National Provider Identification to view your participation status.

As a reminder, physicians are exempt from participation in MIPS if they: 1) are newly enrolled in Medicare for the first time during the performance year; 2) are participating in an Advanced Alternative Payment Model (APM); or 3) fall below the low-volume threshold. For 2019, CMS finalized a new third criterion for the low-volume threshold. These exemptions are summarized in the infographic below.
For 2019, CMS also finalized a new opt-in policy permitting physicians and groups to participate in MIPS if they meet or exceed at least one of the low-volume threshold criteria. To opt-in, physicians and groups must log into the CMS QPP website and select the opt-in option. Physicians must elect to opt-in to receive a score and be eligible to receive a positive payment adjustment; those who do not manually select this option but report data will be considered as voluntarily reporting and will receive a MIPS score but will not be eligible for a positive payment adjustment. For additional information, visit the QPP MIPS Participation page and the MIPS Opt-In and Voluntary Reporting Policy Fact Sheet.

Additional resources on the QPP, MIPS, and Advanced APMs are also available on PAI’s MACRA QPP Resource Center. Please note that resources are being updated for 2019 MIPS participation and will be made available by PAI in May. A summary of the key changes for the 2019 QPP performance year is available here.

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**CMS Releases QPP Year 1 Experience Report**

On March 20, CMS released the 2017 QPP Reporting Experience Report with an appendix providing an overview of the participation results from the first year of the QPP. PAI does not believe the report comprehensively reflects the experience of QPP participation, which is of great concern. For example, the report does not reflect the disproportionate number of small and rural practices who received a penalty under MIPS (details below), which underscores PAI’s ongoing concern about the burden placed on these practices that often results in a shift into employed status. In response, PAI is working to develop a thoughtful response to policymakers highlighting our concerns and providing recommendations to improve the report to accurately and fully capture the 2017 QPP experience. Additionally, PAI wants to ensure a report portraying an incomplete picture of QPP participation is not utilized to make adjustments to the program in future rulemaking. A few of CMS’ key findings are shared below in addition to initial observations from PAI.

**CMS’ Key Findings**

- Ninety-five percent of all eligible clinicians participated in MIPS and avoided a negative payment adjustment
- Ninety-three percent of those who participated in MIPS earned a positive payment adjustment
- Fifty-four percent of eligible clinicians participated as a group, 12 percent as individuals, and 34 percent through MIPS APMs
- A majority of eligible clinicians opted to report data for 90 days or longer
- MIPS eligible clinicians who were in small or rural practices had participation rates of 81 and 94 percent, respectively

**PAI’s Observations**
Ninety-nine percent of individual participants submitted their quality measures data using claims emphasizing the importance of retaining this submission mechanism for small practices.

Seventy-one percent of eligible clinicians received a positive adjustment with the additional adjustment for exceptional performance; however, the range for the overall payment adjustment for this group was low at 0.28-1.88 percent, indicating the marginal reward for participation in the program.

It appears that the participation rate includes eligible clinicians who actively participated as well as those who did not submit any data but were deemed as meeting the minimum threshold for avoiding a negative payment adjustment (i.e. automatically received three points as their final score) due to the 2017 Extreme and Uncontrollable Circumstances Policy.

About 83 percent of negative payment adjustments were collected from individual and small practices (15 or fewer eligible clinicians), indicating how the positive payment adjustments are mostly being funded off the backs of those in individual and small practices who may be disadvantaged and face barriers to successful participation in MIPS.

Only 37 percent of eligible clinicians participated in the Promoting Interoperability (formerly ACI) category which requires use of Certified Electronic Health Records (CEHRT), indicating the continued challenges and barriers with CEHRT requirements.

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**CMS QPP Updates**

Several CMS webinars on 2019 MIPS and Advanced APMs are available on the QPP Webinar Library, including 2019 Cost Category Overview, 2019 Quality Category Overview, 2019 Improvement Activities Overview, 2019 APMs Overview, etc.

CMS also posted several new resources in its QPP Resource Library:

- **2019 QPP Infographic** – highlighting key dates for the 2019 participation year for MIPS and Advanced APMs
- **2019 MIPS Quick Start Guide**
- **2019 Promoting Interoperability Category Overview** – providing an overview on the new requirements and scoring methodology

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