

MIPS MEASURES FOR ALLERGISTS/IMMUNOLOGISTS

What is MIPS?

The Merit-based Incentive Payment System (MIPS) is one of the two tracks of the Quality Payment Program, which implements provisions of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). For more information visit the new CMS Quality Payment Program page at <u>www.qpp.cms.gov.</u>

Who is eligible for MIPS?

For year 2018/payment adjustment year 2020)

- Physicians (MD, DO, DDS)
- Physician Assistant (PA) -> do not report to Advanced Care Information
- Nurse Practitioner (NP) -> do not report to Advanced Care Information
- Certified Nurse Specialist (CNS)
- Certified Registered Nurse Anesthetics (CNRA)

Who is exempt from MIPS?

- Providers with < \$90,000 in Medicare Part B charges <u>OR</u> treating < 200 Medicare patients a year.
- Providers newly enrolled in Medicare for the first time during the performance period are exempt until the following performance year.
- Providers participating in an advanced APM, see list.
- Hospitals and Federally Qualified Health Centers (FQHCs).

Additional Resources:

CMS Quality Payment Program <u>Year 2 Overview fact sheet</u> Videos, fact sheets, and other educational resources – <u>CMS 2018 Resources Page</u>

The Quality Payment Program Service Center is available to help: Email: <u>QPP@cms.hhs.gov</u> Phone: 1-866-288-8292 or TTY: 1-877-715-6222 Available Monday – Friday, 8:00AM – 8:00PM Eastern Time MIPS is composed of four weighted performance categories on a 0-100 point scale. Below are the measures that may apply to Allergist/Immunologists and the percentage score of each category:

QUALITY	ADVANCED CARE INFORMATION	IMPROVEMENT ACTIVITIES	COST
Formerly Physician Quality Reporting System (PQRS)	Formerly Meaningful Use (MU)	New category	Claims-based
Report up to 6 quality measures (see MIPS measures list), including an outcome measure, for full calendar year. <u>OR</u> report a set of the MIPS specialty-specific measures set available if applicable. <u>Individual reporting:</u> May report via a third-party vendor, via EHR vendor, via a quality registry or a Quality Clinical Data Registry (QCDR), or via claims data. The <u>AAAAI QCDR</u> * is the only specialized registry for allergy/immunology. Registration fee varies based on the reporting mechanism you choose to report. <u>Group reporting:</u> Groups > 2 providers may use the CMS Web Interface and report on all <u>15 measures</u> included in the interface for a full year. The group must register their TIN on the <u>CMS</u> <u>Enterprise Portal</u> between April 1 and June 30 every year. Virtual Groups , a new way to participate. Can be made up of solo practitioners and groups of 10 or fewer eligible clinicians who come together "virtually" (no matter what specialty or location) to participate in MIPS for a performance period of a year. Check out the <u>2018 Virtual Groups Toolkit</u> For additional credit: Report on additional quality measures. Note: Report quality measures through your APM. You do not need to do anything additional for this category. Check with your APM entity.	 Fulfill the 5 required measures or objectives listed below for a minimum of 90 days using a certified EHR system 2014/2015 edition: Security Risk Analysis e-Prescribing Provide Patient Access Send Summary of Care Request/Accept Summary of Care <i>Check HERE if your EHR vendor is</i> <i>certified to the 2014/2015 edition</i>. Learn more. For additional credit: Fulfill more than the measures listed above. There are 15 total, see list Use of a QCDR will earn a 5% bonus. The <u>AAAAI QCDR</u>* is the only specialized registry for allergy/immunology. Register at www.aaaai.org/qcdr 	 Groups < 15 providers: (<i>includes solo practitioners</i>) attest that you completed at least 2 improvement activities for a minimum of 90 days. Groups > 15 providers: attest that you completed up to 4 improvement activities for a minimum of 90 days. Activities that may apply to allergists: Annual registration in the Prescription Drug Monitoring Program (PDMP). Chronic care and preventive care management for empaneled patients (e.g. asthma). Engagement of patients and families (several activities) Implementation of antibiotic stewardship program. Implementation of practice/process improvement (several activities). Implementation of medication management. Provide 24/7 access to clinicians/groups who have real-time access to patient's medical record. Use of tools to assist patient-self management. Leveraging/participating in/use of a QCDR (several activities). The AAAAI QCDR* is the only specialized registry for allergy/immunology. Register at www.aaaai.org/qcdr See list of improvement activities available For additional credit: Providers participating in an advanced APM (Alternative Payment Model – see list) will automatically earn full credit in this category. Providers participating in other APMs, will automatically earn half credit and may report additional activities for full credit. Learn more. 	Report on the episode-based measures: Medicare Spending Per Beneficiary measures <u>OR</u> Total Per Capita Costs for All Attributed Beneficiaries measures. Cost Measures details available on the <u>CMS</u> <u>Resource Page -</u> <u>Cost Section</u>

*You can fulfill the three MIPS performance categories by reporting via the AAAAI QCDR. For more information email us at quality@aaaai.org