

2020 MIPS Reporting: What You Need to Know

We're here to help you understand what's new in Year 4 of the Centers for Medicare & Medicaid Services (CMS) Merit-based Incentive Payment System (MIPS) program so you can improve patient care, satisfy MIPS regulatory requirements and avoid a negative payment adjustment.

Who Qualifies to Report for MIPS?

- + Physicians*
- + Physician Assistants
- + Nurse Practitioners
- + Clinical Nurse Specialists
- + Certified Registered Nurse Anesthetists
- + Speech-Language Pathologists
- + Occupational Therapists
- + Physical Therapists
- + Audiologists
- + Clinical Psychologists
- + Registered Dietitians or Nutrition Professionals

**With respect to certain specified treatment, a doctor of chiropractic must be legally authorized to practice by a State in which he/she performs this function. For more information about MIPS 2020 eligibility, [Click Here](#).*

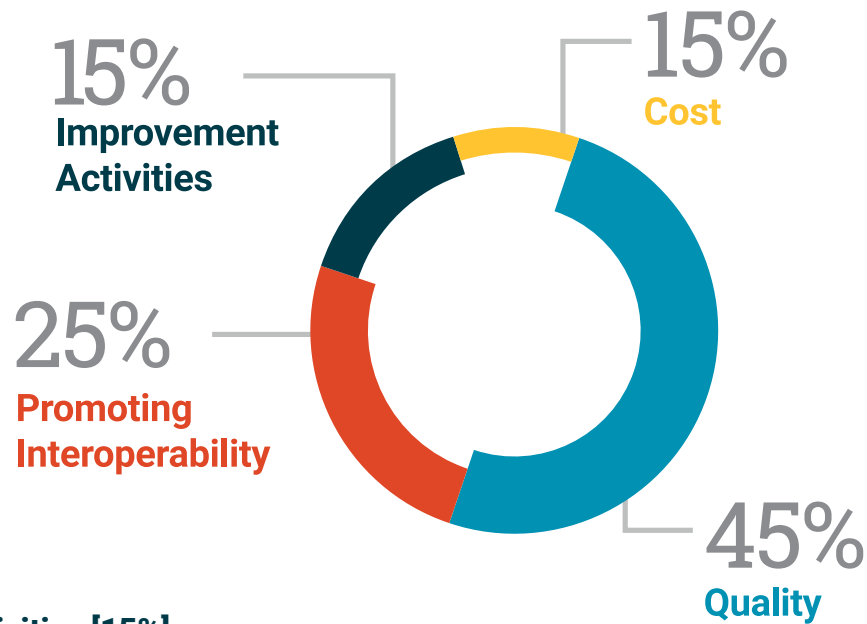
How Does the Eligibility Work?

MIPS Year 4 Eligibility:

If, as an individual clinician, you bill more than \$90,000 for Part B covered professional services, and see more than 200 Part B patients, and provide 200 or more covered professional services to Part B patients, you may be subject to MIPS and should satisfy requirements to avoid up to a 9% negative payment adjustment. In 2020 the minimum performance threshold is 45 points, so developing a MIPS strategy early is key. Premier's MIPS solution guides you through steps to report data, review your performance, select measures for reporting, identify areas for improvement, and track progress to meeting 2020 requirements.



Note: Reporting as a group is optional.



Improvement Activities [15%]

Individuals or Groups:

Most participants require 40 total points for satisfactory category submission of a minimum of 90-day participation.

- High Weight Activities = 20 points
- Medium Weight Activities = 10 points
- PCMH participants satisfy category without additional attestations

Cost [15%]

- Category calculated via Administrative Claims
- No data submission is required

MIPS Year 3 (2019)	MIPS Year 4 (2020)
15% of MIPS Final Score	Unchanged in 2020
<p>In PY19 there are:</p> <ul style="list-style-type: none"> • 6 New Activities • 5 Activities Modified • 1 Activity Removed 	<p>Increasing the participation threshold for group reporting from a single clinician to 50% of the clinicians in the practice needing to perform the same improvement activity</p> <p>CMS is finalizing our proposal with modification, such that instead of requiring that a group must perform the same activity for the same continuous 90 days in the performance period as proposed, CMS is requiring that a group must perform the same activity during any continuous 90-day period within the same performance year</p>

MIPS Year 3 (2019)	MIPS Year 4 (2020)
15% of MIPS Final Score	Unchanged in 2020
<p>Unchanged in 2019 (TPCC and MSPB)</p> <p>8 new episode-based measures added</p> <ul style="list-style-type: none"> • Case Min = 10 for procedural episodes • Case Min = 20 for acute inpatient medical condition episodes 	<p>Unchanged in 2020 (TPCC and MSPB)</p> <p>10 new episode-based measures added</p> <p>CMS revising the existing Medicare Spending Per Beneficiary Clinician and Total Per Capita Cost measures</p>

continued

Quality [45%]

Individuals or Groups:

- Collect measure data for the 12-month performance period (Jan. 1, 2020 - Dec. 31, 2020)
- Report on at least 6 Quality Measures, including at least one Outcome Measure (High Priority if Outcome is Unavailable) OR report a Specialty Measure Set

MIPS Year 3 (2019)	MIPS Year 4 (2020)
45% of MIPS Final Score	Unchanged in 2020
Reweighting available for: <ul style="list-style-type: none"> • Score unable to be calculated due to no applicable or available measures • Extreme or uncontrollable circumstances 	Unchanged in 2020
Eligible Clinicians may submit using multiple collection types of measures	Unchanged in 2020
Data Completeness = 60% of patients across all payers for performance period	Data Completeness = 70% of patients across all payers for performance period
Extremely topped Out Measures include those with average mean within 98th to 100th percentile and may be proposed for removal	Unchanged in 2020

Promoting Interoperability [25%]

Individuals or Groups:

- Report data for all required measures for at least 90 continuous days of calendar year 2020
- Only use 2015 edition Certified EHR Technology
- Receive a score based on the six required measures in addition to required attestations

MIPS Year 3 (2019)	MIPS Year 4 (2020)
25% of MIPS Final Score	Unchanged in 2020
Some eligible clinicians and groups do not have to report this category and the category weight is assigned to the Quality category	Unchanged in 2020
Eligible clinicians and groups must use CEHRT Edition 2015	Unchanged in 2020
Performance-based scoring at Individual measure Level Security Risk Analysis measure required 100 possible points for the PI category (Exclusions will reweight other measures)	Including the Query of Prescription Drug Monitoring Program (PDMP) measure as an optional measure to earn bonus point Removing the Verify Opioid Treatment Agreement measure Reducing the threshold for a group to be considered hospital-based (more than 75% of the clinicians in a group must be a hospital-based individual MIPS eligible clinician in order for the group to be excluded)

Is Your MIPS Final Score Important?

Your MIPS final score has a significant impact on both the reputation and the finances of your practice.

- **Reputation** – CMS publishes MIPS results to Physician Compare to help consumers evaluate and compare clinicians.
- **Financial** – The MIPS final score results determine a negative, neutral or positive financial adjustment for clinicians on each Medicare Part B claim.

Be aware that not participating in MIPS in 2020 could result in a 9 percent negative payment adjustment in 2022.

On the other hand, successful MIPS data reporting means you will avoid the 9 percent penalty and could potentially earn a small incentive. Top performers will find themselves eligible for additional bonus money.

Checkout these additional resources for information about MIPS 2020.

» [Eligible for MIPS 2020 Fact Sheet](#)

» [Ebook: MIPS 2020 and Beyond: Clear Path to Quality Improvement](#)

LEARN MORE:

For more information about the Premier's MIPS Registry Portfolio, contact registryolutions@premierinc.com.