

What is MIPS?

Effective January 1, 2017, the Meaningful Use (MU) Electronic Health Record Incentive Program, Physician Quality Reporting System (PQRS), and Value-Based Modifier (VBM) program will be consolidated into the new Merit-Based Incentive Payment System (MIPS) program. This new program will merge and strengthen the financial impact of the various measurement and reporting tools, along with claims-based financial considerations that have become familiar since the adoption of digital health records. According to CMS, "to implement the quality category of the MIPS, CMS will be using the measures in the existing quality programs (PQRS, VM and MU)."

MIPS

- Ranks peers nationally & reports scores publicly
- MIPS is budget neutral; Incentives to high-performers funded by penalties applied to low-performers
- 100-point scale composite of multiple programs
- Leverages PQRS, Value-Based Modifier (VBM) and Meaningful Use rules

Significant Financial Impact Over Time

(Adjustment based on reporting two years prior)

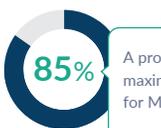
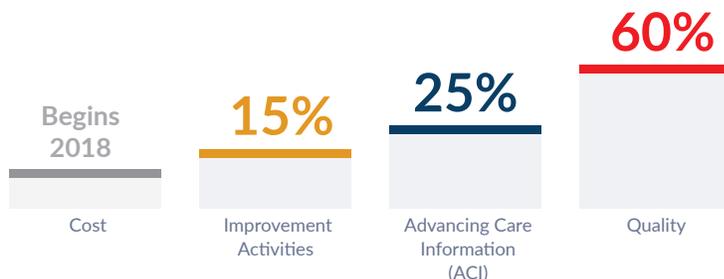
Minimum and Maximum Adjustment



*Potentially up to 3 times these rates plus up to a 10% exceptional performance bonus

How will MIPS be scored?

A provider's MIPS composite performance score will be calculated on a scale from 0 to 100 and will significantly influence their Medicare reimbursement payment each year. The composite score will be aggregated from the following components: 60% Quality (PQRS optimized), 25% Advancing Care Information (previously Meaningful Use), and 15% Improvement Activities. The point values for the 2017 performance year are:



A provider's 2017 performance in two categories, ACI and Quality, will comprise 85% of their maximum possible score. Providers' scores will be publicly available to consumers via the Centers for Medicare & Medicaid Services (CMS) Physician Compare website.

Every MIPS point counts

CMS will set a performance threshold score each year that equals the mean or median of all eligible clinicians (EC's) MIPS scores from a prior period.

Scores exactly equal to the performance threshold score = Zero payment adjustments

Scores progressively above the threshold ↑ Progressively increasing incentive

Scores progressively below the threshold ↓ Progressively increasing penalty

Who is Eligible?



Providers who have met a minimum volume threshold of >\$30,000 and >100 Part B-enrolled Medicare enrolled beneficiaries

Who is Exempt?



- Qualifying advanced APM participant
- Below the CMS low volume threshold (does not apply to all categories)
- First year NPIs

For more information, visit mipspro.com

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