



## MACRA AND MIPS- MOVING INTO 2017

The Medicare Access and Chip Reauthorization Act (**MACRA**) was signed into law in 2015. This was to achieve the following:

- Repeal the Sustainable Growth Rate (SGR) formula for calculating the Medicare Physician Fee schedule
- Improve Quality of care-thru outcomes
- Link payments to performance
- Reduce fraud
- Share risk thru Advanced payment models
- **Go Live January 1<sup>st</sup> 2017**

In the initial rollout, it is affecting 600,000 clinicians and is a major step to move to pay for performance versus fee for service.

The track that most clinicians will use to report to CMS will be the Merit Based Incentive Payment System (**MIPS**).

Eligible clinicians must bill Medicare Part B charges of at least \$30,000 or see 100 or more Medicare beneficiaries.

Participation is vital to avoid the penalties as shown below in the coming years.

### **MIPS Incentives and Penalties**

<b>Report MIPS in</b>	<b>Payment Adjustment in</b>	<b>Qualify for Incentives of</b>	<b>Avoid Penalty of</b>
2017	2019	Modest to Moderate	<b>-4%</b>
2018	2020	+5% to up to 3X	<b>-5%</b>
2019	2021	+7% to up to 3X	<b>-7%</b>
2020	2022	+9% to up to 3X	<b>-9%</b>

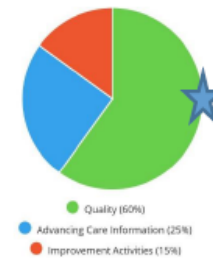
For 2017, 60% of the reporting score is for the Quality category which replaces the current PQRS reporting system.

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# Quality Performance Category

- ❖ In 2017 you can Pick Your Pace
  - ❖ Submit Something
    - ❖ 1 Quality Measure or
    - ❖ 1 Clinical Practice Improvement Activity or
    - ❖ Base Advancing Care Information Measures
  - ❖ Submit a Partial Year
    - ❖ 90-Days of Quality (6 Measures)
    - ❖ Along with ACI and CPIA information
  - ❖ Submit a Full Year
    - ❖ Quality (6 Measures)
    - ❖ Along with ACI and CPIA information
  - ❖ Don't participate = -4%

2017 MIPS Performance



Session 1

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For the 2017 reporting year- 3 options are available to choose from on how to report as shown above.

Reporting periods are for a full year or for 90 days

Individual Measures- 271 available

Outcome Measures- 71 available

Available options to report will be thru Claims, Electronic Health Record systems or a qualified Data Registry

## Websites for additional information

CMS Quality Payment Program Website

<https://qpp.cms.gov/>

CMS Fact Sheet

[https://qpp.cms.gov/docs/Quality\\_Payment\\_Program\\_Overview\\_Fact\\_Sheet.pdf](https://qpp.cms.gov/docs/Quality_Payment_Program_Overview_Fact_Sheet.pdf)

CMS Web Based Measure Search Tool

<https://pqrs.cms.gov/>

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## 2016 PQRS Implementation Guide

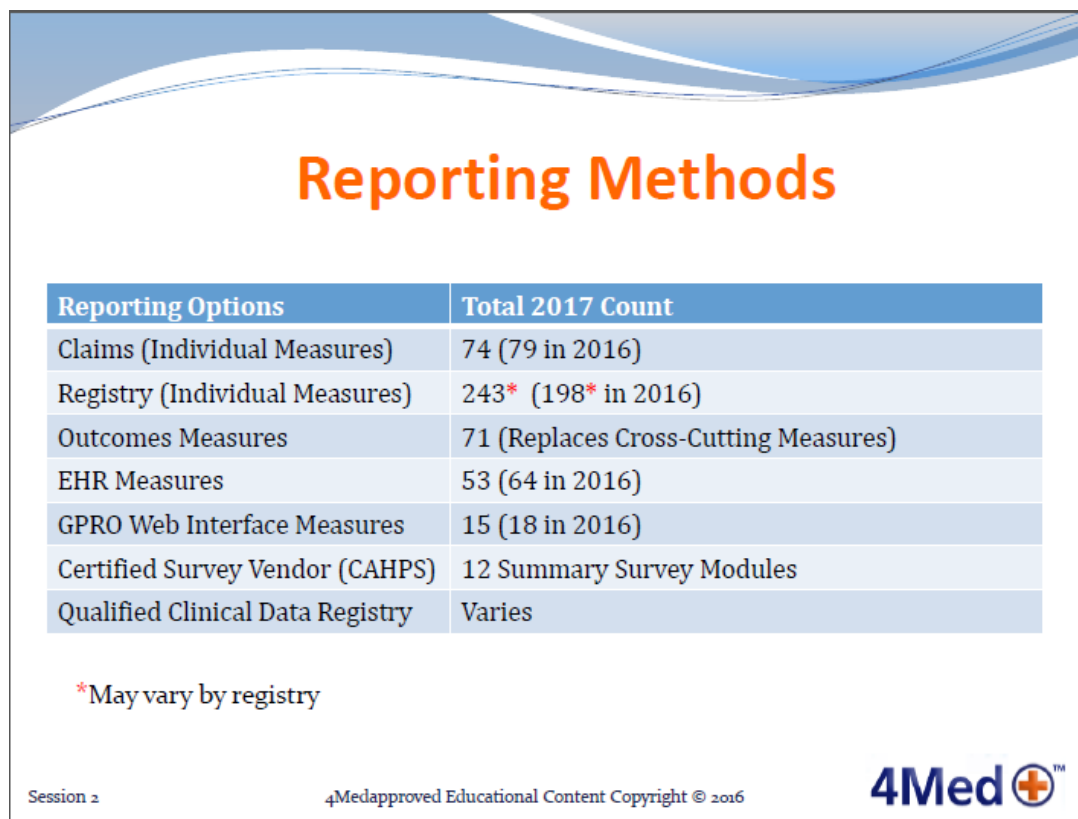
[https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2016\\_PQRS\\_ImplementationGuide.pdf](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2016_PQRS_ImplementationGuide.pdf)

## Registries

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2015QualifiedRegistries.pdf>

## Qualified Clinical Data Registries


<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/2015QCDRPosting.pdf>



# Reporting Methods

Reporting Options	Total 2017 Count
Claims (Individual Measures)	74 (79 in 2016)
Registry (Individual Measures)	243* (198* in 2016)
Outcomes Measures	71 (Replaces Cross-Cutting Measures)
EHR Measures	53 (64 in 2016)
GPRO Web Interface Measures	15 (18 in 2016)
Certified Survey Vendor (CAHPS)	12 Summary Survey Modules
Qualified Clinical Data Registry	Varies

\*May vary by registry

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Physician Compare is coming to the Medicare.gov website that will be available to Medicare beneficiaries

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# Public Reporting

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