



Service. Technology. Innovation.

MIPS Year 3 (2019) Quality Performance Category

Requirements:

- Report on 6 Quality Measures: One of the 6 must be an Outcome (if available for specialty) or High Priority Measure
- Performance Period is for 12 months

Scoring

- 45% of the MIPS final score
- Each measure will be scored on a scale from 1-10 or 1-7 for Topped Out measures if the following criteria is met: Data Completeness, Case Volume and measure Benchmark.
Data Completeness is 60%
Failure to meet data completeness on a quality measure:
 Large Practice receives 1 point for the measure
 Small Practice receives 3 points for the measure
Case Volume = 20 Cases
Failure to meet case volume but data completeness is met on a quality measure:
 Practice of any size receives 3 points for the measure
Benchmark: If there is NO benchmark for the quality measure but data completeness is met:
 Practice of any size receives 3 points for the measure
- Bonus Points:
Report on additional Outcome or High Priority measures beyond the required 1:
 Outcome measure = 2 bonus points
 High Priority measure = 1 bonus point
Quality measures submitted thru EHR reporting
 1 Point for each measure submitted
Small Practice Bonus (15 EC or less)
 6 bonus points will be added to the numerator of the quality category if the EC or group submits data on at least one quality measure
- Improvement Scoring:
 Will be based on the rate of improvement such that higher improvement results in more points for those who have not previously performed well.
 Improvement will be measured at the performance category level.
 Up to 10 percentage points available.

Submission Type

Individual Eligible Clinician: Direct; Log-in & Upload; Medicare Part B Claims (Small Practice Only)

Groups: Direct; Log-in & Upload; CMS Web Interface (Groups of 25 or more); Medicare Part B Claims (Small Practice Only)