Quality Payment Program

Quality Improvement through the Merit-based Incentive Payment System and Advanced Alternative Payment Models

The Centers for Medicare & Medicaid Services (CMS), with its continued focus on the measurement of quality of care and value physicians and clinicians provide, replaced the Sustainable Growth Rate formula with the Quality Payment Program (QPP). The first QPP performance year began January 2017 and is a new approach to paying clinicians who treat Medicare beneficiaries.

Under the Quality Payment Program, eligible clinicians choose from two payment paths: the Merit-based Incentive Payment System (MIPS) and the Advanced Alternative Payment Models (APMs). Eligible clinicians are required to participate in one of these two programs, which will allow them to choose measures and activities that are applicable to the type of care they provide. Quality Innovation Networks Quality Improvement Organizations (QIN-QIOs), under contract with CMS, will assist eligible clinicians report MIPS measures by incorporating a service-oriented approach when providing technical assistance, education and providing outreach. The QIN-QIOs support MIPS-eligible clinicians in practices of 16 or more clinicians, in coordination with other contractor types. Technical assistance for small (15 or fewer clinicians in a practice) and rural practices is provided by QPP Small, Underserved and Rural Support contractors.

MIPS

CMS has merged aspects of the former Physician Quality Reporting System (PQRS), the Value Modifier Program and the Medicare Electronic Health Record (EHR) Incentive Program to create MIPS. If participating in MIPS, eligible clinicians can receive a positive, negative or zero payment adjustment. MIPS contains four performance categories; each is worth a certain point value that adds up to the MIPS total score.

Quality:
In 2018, 50 percent of the total score will be based on reporting six quality measures of a clinician’s choice. This replaces PQRS reporting and the quality component of the Value Modifier program.

Improvement Activities:
Fifteen percent of the total score will be given for improvement activities. Clinicians will have flexibility to choose activities that match their organization’s goals.

Promoting Interoperability:
Twenty-five percent of the total score will be given to clinicians who use their EHR functionality and can attest to those measures. This category replaces the Medicare EHR Incentive Program and will give more flexibility to clinicians on the measures they report.

Cost:
Starting in 2018, 10 percent of a clinician’s total score will be based on 40 episode-specific measures using Medicare claims. This replaces the cost component of the Value Modifier Program (Resource Use).

Visit [www.TMFQIN.org](http://www.TMFQIN.org) to join the Quality Payment Program network and work with industry experts to successfully make the transition to MIPS.

Source: The Centers for Medicare & Medicaid Services
Eligible clinicians for MIPS are Medicare Part B clinicians including physicians, physician assistants, nurse practitioners, clinical nurse specialists and certified registered nurse anesthetists. Clinicians will not be required to participate in MIPS individually if they are

- Newly enrolled in Medicare for the first time during the performance period
- Below the low-volume threshold. In 2018, the threshold is Medicare Part B allowed charges of less than or equal to $90,000 a year or 200 or fewer Medicare Part B patients a year
- Significantly participating in an Advanced APM, which is defined as receiving 25 percent of Medicare payments or seeing 20 percent of Medicare patients through an Advanced APM

A Community-Based Approach

TMF Health Quality Institute has partnered with the Arkansas Foundation for Medical Care, Primaris in Missouri, the Quality Improvement Professional Research Organization Inc. in Puerto Rico to form the TMF QIN-QIO, under contract with CMS. Through the Quality Payment Program Learning and Action Network, the TMF QIN-QIO works with practices with 16 or more clinicians throughout Arkansas, Missouri, Oklahoma, Puerto Rico and Texas to help them make the transition to MIPS and successfully advance through the program's performance categories. Practices with 15 or fewer clinicians are supported in this region by the TMF Quality Payment Program Small, Underserved and Rural Support (QPP-SURS) initiative; for technical assistance if you are in a small or rural practice, contact QPP-SURS@tmf.org or visit https://tmf.org/qpp.

Our Goals

By establishing a robust exchange of best practices and providing expert consultation, the TMF QIN-QIO seeks to help clinicians across our region successfully advance through the MIPS performance categories. The TMF QIN-QIO consultants also work with physicians and clinicians who are members of our network with quality reporting and identifying opportunities to improve care coordination and performance improvement on measures that will be used in MIPS, which will enable them to later make a smooth transition into the Advanced APMs.

Key Strategies and Interventions

TMF QIN-QIO consultants provide technical assistance to physicians, clinicians and other health care settings to help them better understand new reporting requirements to improve quality and cost of care, meet performance goals and sustain reimbursement. TMF QIN-QIO consultants

- Provide assistance to network members participating in MIPS, including understanding the new program, how to report, the scoring structure and assistance with quality improvement activities
- Host live webinars with subject matter experts and thought leaders to help network members learn more about MIPS, encourage an exchange of best practices with peers and TMF QIN-QIO consultants via our online forums and provide access to case studies, articles, tip sheets and other helpful tools and resources
- Help clinicians access and use the free TMF MIPS Toolbox, an online application for managing MIPS requirements by tracking measures and calculating the clinician’s projected score

Join the Quality Payment Program Network

Visit the TMF QIN-QIO website and locate the Quality Payment Program Network, under the Networks tab, to learn more about this initiative and how you and other clinicians within your practice or facility setting can benefit: http://www.tmfqin.org.

Contact Us

Please email QualityReporting@tmf.org for more information. You can reach a consultant Monday through Friday, 8 a.m. to 5 p.m. CT, by phone at 1-844-317-7609 or via live chat, or you can also submit a Request for Support form at any time.