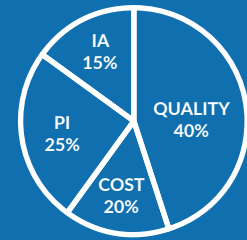


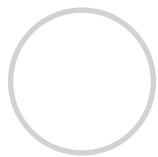
# REPORTING MIPS IN 2021

The Merit-based Incentive Payment System (MIPS) determines quality and efficiency of care through four performance categories: Quality, Promoting Interoperability (PI), Improvement Activities (IA), and Cost. Performance in these four categories during the 2021 calendar year will aggregate into a final score used to determine a payment adjustment for a MIPS-eligible clinician or group in the 2023 payment year.



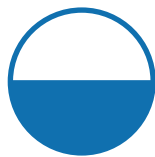
## MIPS Final Score Impact on Payment Adjustments (2023)

Scored out of a possible 100 points



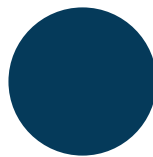
### 0-59 Points

Deciding not to participate in the Quality Payment Program, or receiving a low MIPS final score will result in up to a -9% penalty.



### 60-84 Points

Achieving a moderate MIPS final score will provide the potential for penalty avoidance and a slight incentive.



### 85+ Points

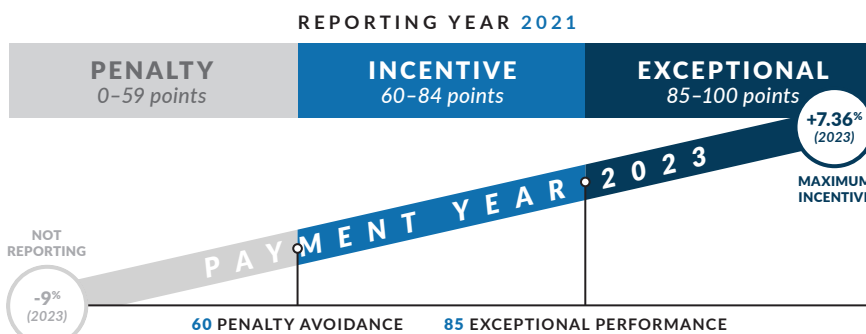
High performers will be eligible for the 9% incentive and an exceptional performance bonus of up to 10%.

## What's New for 2021 Reporting?

- The performance threshold is increasing from 45 points to 60 points, making it more difficult to avoid the penalty. This will increase the incentive payment for those who achieve a high score.
- With this move, CMS predicts that exceptional performers will receive up to a 7.36% increase on 2023 Medicare payments.
- Quality performance category will be 40% of your overall score in 2021, down from 45% in 2020.
- Introduction of the the APM Performance Pathway (APP) as a new reporting option for participants in an APM.
- Cost performance category is increasing to 20% of your overall score and CMS has confirmed that Cost will be 30% in 2022.
- The addition of an optional Health Information Exchange (HIE) measure to the Promoting Interoperability performance category.

## 2021 Performance Year & 2023 Adjustments

Adjustments occur two years after performance year



## Quality Measure Changes

- 13 Registry Quality measures removed
- 94 Changes to existing registry measures

## An Eye on 2022

Proposed Rules that will be pushed back due to feedback and COVID concerns.

- Introduction of the MIPS Value Pathways (MVPs): measures and activities that more closely relate to a provider's specialty and patient base.
- Elimination of the CMS Web Interface: an ACO and MIPS reporting method.

## Who is Exempt?

- ★ Qualifying Advanced APM participants
- ★ Clinicians who have:
  - ≤ \$90,000 in Medicare Part B charges
  - OR-
  - ≤ 200 Medicare Part B beneficiaries
  - OR-
  - ≤ 200 covered professional services under the Physician Fee Schedule (PFS)
- ★ Clinicians newly enrolled in Medicare

For more information, visit [mipspro.com](http://mipspro.com)

A CMS Qualified Registry & QCDR



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