

QUALITY PAYMENT PROGRAM

### CMS 2022 FINAL RULE



KEY THINGS TO KNOW

**MIPS 2022** 

ONE

# General Program Changes

#### MIPS Eligible Clinicians

## CMS is adding the following MIPS eligible clinician types beginning with the 2022 performance year:

- Clinical social workers
- Certified nurse midwives

#### The Start of the MVPs Program

- CMS is phasing in the MIPS Value Pathways (MVPs) program starting in 2023.
- MVP participation will be optional for 2023, 2024 and 2025.

#### The Start of the MVPs Program

There are 7 initial MVPs and participants must register for the MVP between April 1 and November 30 of the performance year.

- Rheumatology
- 2. Stroke Care & Prevention
- 3. Heart Disease
- 4. Chronic Disease Management
- 5. Emergency Medicine
- 6. Lower Extremity Joint Repair
- 7. Anesthesia

#### The Start of the MVPs Program

MVP Reporting Requirements

## MVP works similarly to the traditional MIPS program, but it gives you specific measures according to the MVP you are in.

- Quality category: Select 4 measures, one must be an outcome measure.
- Improvement Activities: Select 2 medium-weight or 1 high-weight measure(s).
- Cost: Calculated exclusively on the cost measures that are included in the MVP using administrative claims data.
- New Foundational Layer (MVP agnostic):
  - Public Health: Report 1 of 2 available public health measures, which is added to your quality score
  - Promoting Interoperability: Report on the same PI measures required under traditional MIPS.
    - PI will be reported at the group/TIN level, not subgroup/specialty level.

#### **APP Reporting Option**

- The new APM Performance Pathway (APP) reporting option is available in 2022.
- Quality measures reported through the APP are automatically used for the Medicare Shared Savings Program quality scoring, satisfying the requirements for both programs.

TWO

## Increasing Performance Threshold

#### Increasing Performance Threshold

The performance threshold will increase from:

60 points to 75 points

This is based on the mean average from previous years. Eligible Clinicians need to score at least 75 points to avoid a penalty in 2022.

#### **Increasing Performance Threshold**

Also, you must score a minimum of

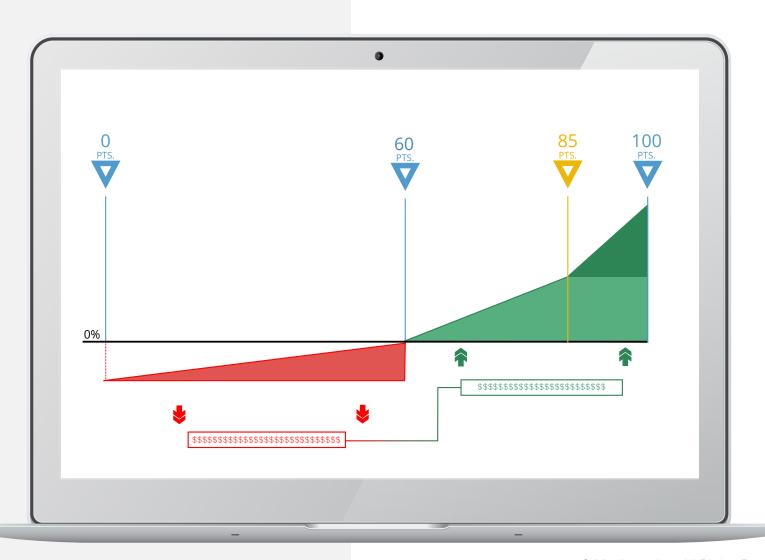
89 points

To receive the *Exceptional Performance* bonus money. This is the last year to receive an exceptional performance bonus payment.



#### Minimum Score by Year

#### **2021 Performance Threshold**



#### **2022 Performance Threshold**





#### **Penalties & Incentives**

#### What can you lose, what can you gain?

-9%-0%

For not meeting the minimum score (75)

<9%

For the top performers (89)

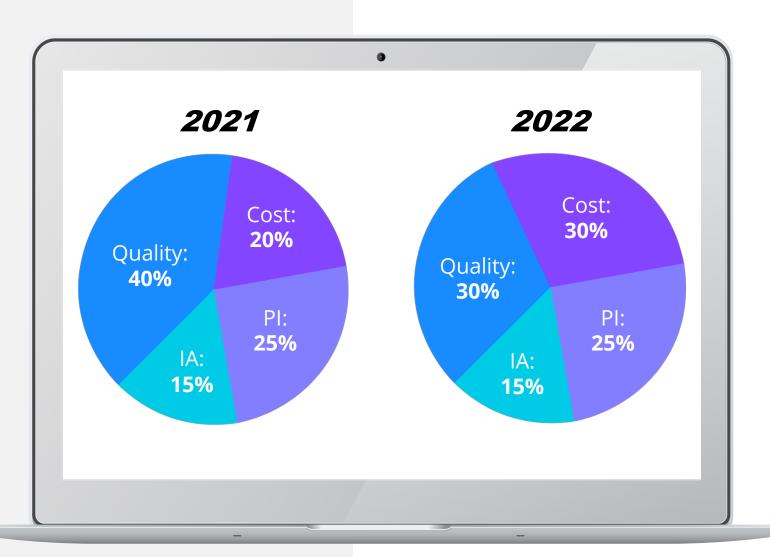
THREE

# Revising Category Weights

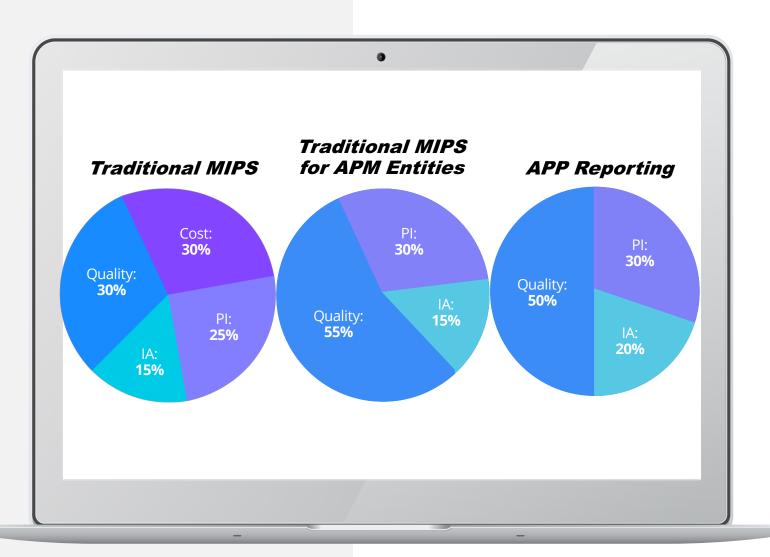


The category weights have been modified.

#### **Traditional MIPS**



#### 2022 Weights



FOUR

# Modifications to the Category Requirements

#### **2022 Quality Category**





**Category weight:** 

30%

**Performance Period:** 

365 days



CMS has extended the time to allow for CMS Web Interface submissions.

This reporting option is available 2022-2024

BUT



Starting in 2025 **MSSP ACOs must** submit 3 eCQMs/CQMs. The CMS Web **Interface measures** will no longer be available.

#### Measure Adjustments

- Removing 13 quality measures
- Significantly change 87 existing MIPS quality measures
- Add 4 new quality measures (including 1 new administrative claims measure)
  - Clinician and Clinician Group risk-standardized hospital admission rates for patients with multiple chronic conditions.
    - 18-case minimum, 1 year performance period, applies to MIPS Groups with at least 16 Eligible Clinicians.

Data Completeness

 Originally CMS proposed to up the data completeness threshold to 80% starting in 2023 but they backed off of that. They will continue to accept 70% completeness in 2022 and 2023.

#### Scoring

- In the past, CMS has put a 3-point floor on scoring for all quality measures.
   This floor is eliminated. You can now score between 1-10 points.
- However, new quality measures, in their first performance period, will have a 7point floor.

Scoring

- CMS removed the bonus points for:
  - Reporting an additional outcome or highpriority measure beyond the one required
  - Reporting using end-to-end electronic reporting

#### **2022 Cost Category**





**Category weight:** 

30%

**Performance Period:** 

365 days



## Like in 2021, CMS will use these measures for Cost:

- Total Per Capita Cost (TPCC)
- Medicare Spending Per Beneficiary (MSPB)
- 18 episode-based measures



#### In 2022:

- 5 new episode-based measures
  - 2 procedural measures: Melanoma Resection and Colon and Rectal Resection.
  - 1 acute inpatient measure: sepsis
  - 2 chronic condition measures: Diabetes and Asthma/COPD

#### 2022 Improvement Activities Category





**Category weight:** 

15%

**Performance Period:** 

90 days



# CMS did not make any changes to Improvement Activity category requirements but they did finalize some measure changes in this category:

- Add 7 new Improvement Activities (IA) measures, 3 of which are related to promoting health equity
- Modify 15 IA measures
- Remove 6 IA measures

#### 2022 Promoting Interoperability Category





**Category weight:** 

25%

**Performance Period:** 

90 days

#### Measures

- In the past, you could choose which two public health and clinical data exchange measures to submit from a list of 5. And for 2022 CMS is requiring you to submit these two measures:
  - 1. Immunization Registry Reporting
  - 2. Electronic Case Reporting
  - 3. If you report "yes" on any of the other 3

    Public Health and Clinical Data Exchange
    Objective measures you'll receive a 5-point bonus. No more than 5 bonus points will be awarded.

Measures

 CMS did not finalize their proposal to modify the Providing Patient Electronic access measure to require health information to remain available to the patient indefinitely.

#### Measures

- CMS finalized a new measure in this category. Eligible Clinicians must attest to conducting an annual assessment of the High-Priority Guide of the SAFER Guides.
  - Safety Assurance Factors for EHR Resilience (SAFER) Guide.

#### Measures

- CMS is modifying the Prevention of Information Blocking Attestation Statements and
- **Modifying the Complex Patient Bonus** in 2022.
  - Limiting the bonus to clinicians who have a median or higher value for at least 1 of the 2 risk indicators
  - Updating the formula to standardize the distribution of **2 two risk indicators** so that the policy can target clinicians who have a higher share of socially and/or medically complex patients.
  - Increasing the bonus to a maximum of 10.0 points.

#### Scoring

- For some Eligible Clinicians, CMS
   automatically reweights this category to
   0 points and adds that percentage weight
   to their quality score.
- CMS will include Clinical Social Workers and Small Practices to the list of Eligible Clinicians whose score will be automatically reweighted.



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