



QUALITY PAYMENT PROGRAM

CMS 2022 PROPOSED RULE



KEY THINGS TO KNOW

MIPS 2022



REMEMBER

Remember, these proposed changes are not finalized yet.

ONE

General Program Changes

MIPS Eligible Clinicians

CMS is proposing to add 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.**

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.

1. Rheumatology
2. Stroke Care & Prevention
3. Heart Disease
4. Chronic Disease Management
5. Emerging 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).
- **Promoting Interoperability:** Report on the same PI measures required under traditional MIPS.
- **Cost:** Calculated exclusively on the cost measures that are included in the MVP using administrative claims data.
- **New Foundational Layer (MVP agnostic):** Report 1 (of 2) new Population Health measures, which is added to your Quality score.

APP Reporting Option

- **CMS is proposing a new APM Performance Pathway (APP) reporting option 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:

50 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.



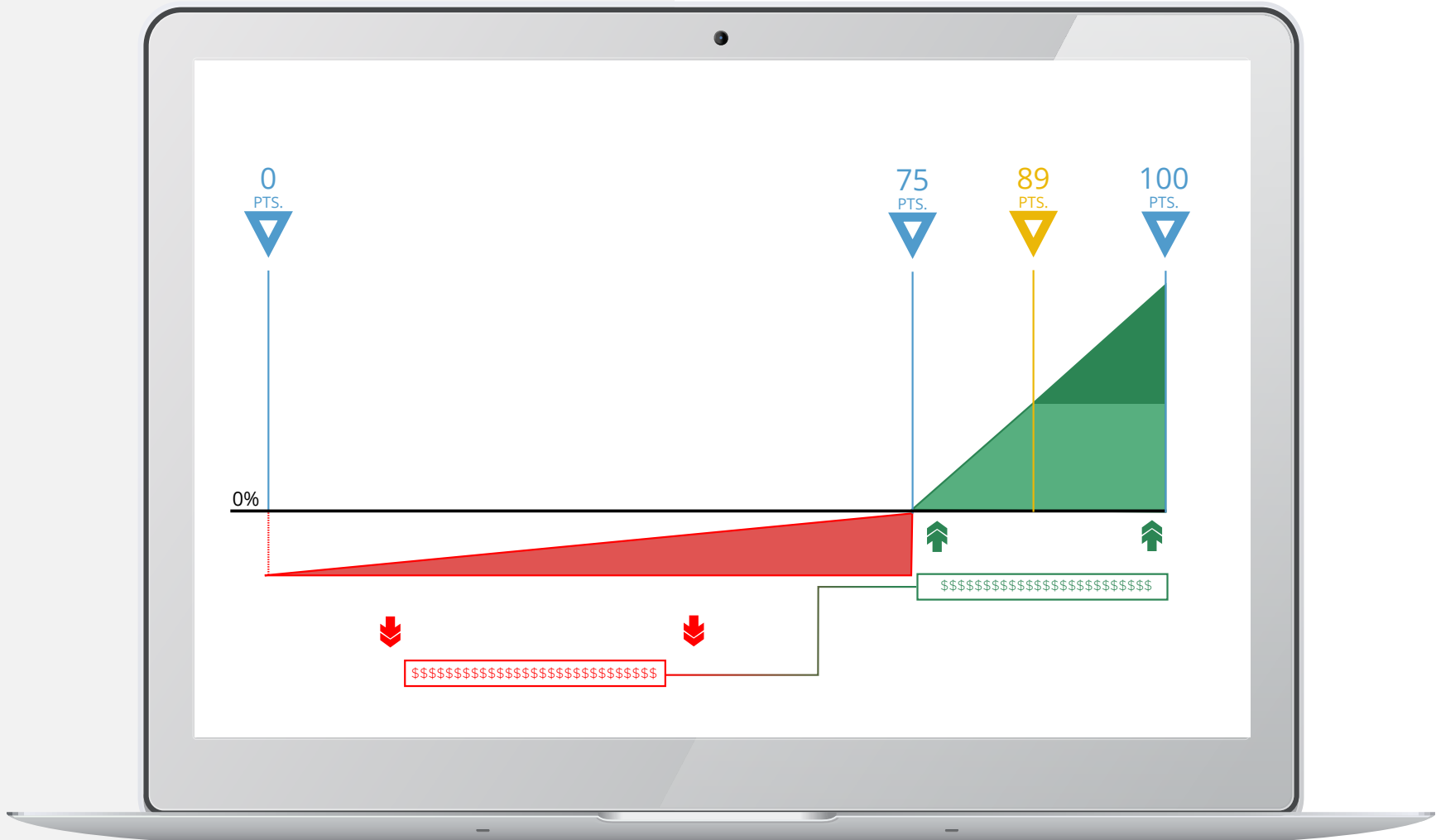
Minimum Score by Year

The graph illustrates the relationship between marginal utility and total utility. The horizontal axis represents quantity (0 to 100) and the vertical axis represents utility (0% to 100%).

- Marginal Utility (Red Area):** This area is below the 0% line. It is divided into two sections: a smaller section from 0 to 50 and a larger section from 50 to 100. The red area is labeled "Marginal Utility".
- Total Utility (Green Area):** This area is above the 0% line. It is divided into two sections: a smaller section from 0 to 50 and a larger section from 50 to 100. The green area is labeled "Total Utility".

The graph shows that marginal utility is negative (red area) when total utility is increasing (green area) and positive (green area) when total utility is decreasing (red area). The red area is labeled "Marginal Utility" and the green area is labeled "Total Utility".

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

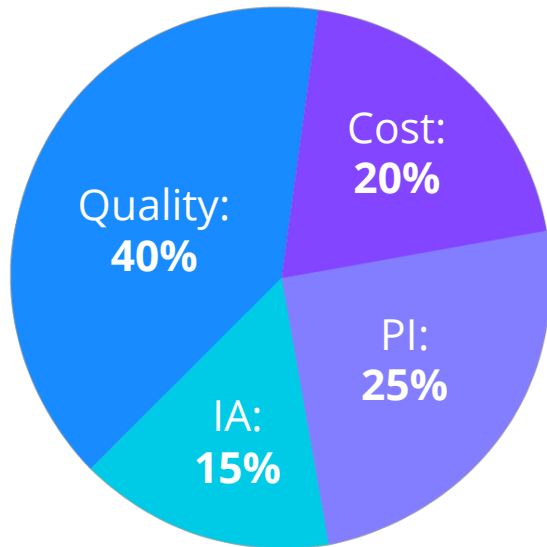
Revising Category Weights



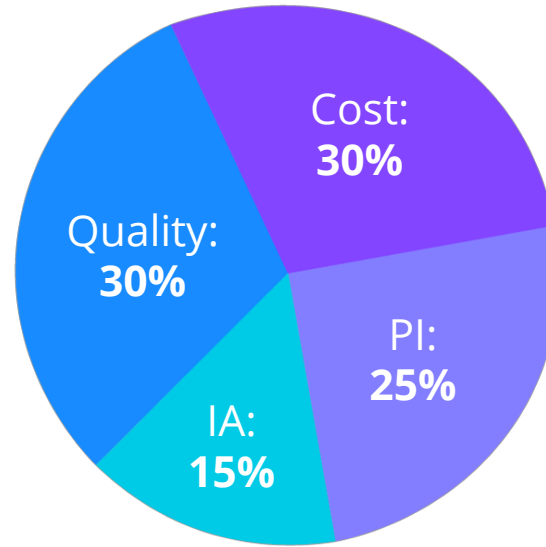
**The
category
weights
have been
modified.**

Traditional MIPS

2021

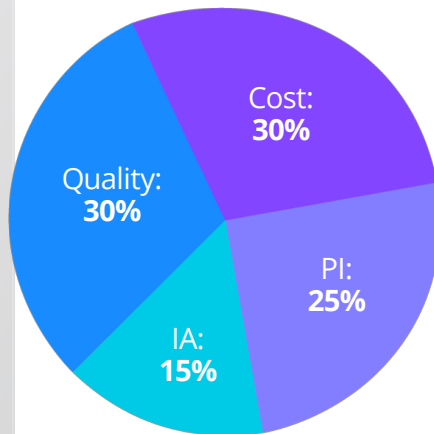


2022

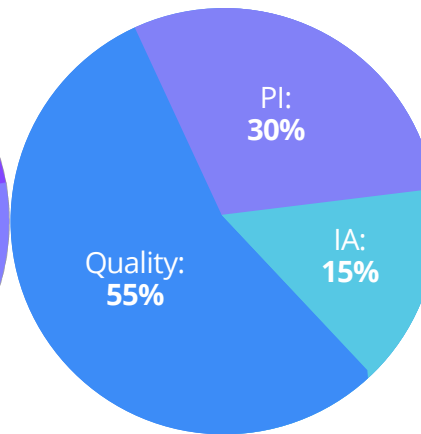


2022 Weights

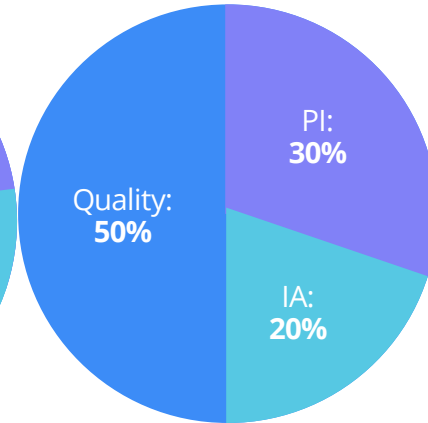
Traditional MIPS



***Traditional MIPS
for APM Entities***



APP Reporting



FOUR

Modifications to the Category Requirements

2022 Quality Category



Category weight:

30%



Performance Period:

365 days



CMS will allow the CMS Web Interface Submission Option in 2022 & 2023

BUT



Starting in 2023
MSSP ACOs can
still submit the
CMS Web Interface
Measures but they

MUST submit 1
eCQM/CQM in
2023.



Starting in 2023
CMS Web Interface
will no longer be
available to all
other APM Entities.

They MUST submit
eCQMs or CQMs in
2023.

Quality Category Changes

Measure Adjustments

- **Removing 19 quality measures**
- **Significantly change 84 existing MIPS quality measures**
- **Add 5 new quality measures (2 of which are administrative claims measures)**
 - Risk-standardized acute unplanned cardiovascular-related admission rates for patients with heart failure for MIPS.
 - 21-case minimum, 1 year performance period, applies to MIPS Eligible Clinicians, Groups and Virtual Groups.
 - 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.

Quality Category Changes

Data Completeness

- **CMS is proposing to move the data completeness threshold from 70% (current state) to 80% starting in 2023.**

Quality Category Changes

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 5-point floor.**

Quality Category Changes

Scoring

- **CMS is proposing to remove the bonus points for:**
 - Reporting an additional outcome or high-priority measure
 - Reporting using end-to-end electronic reporting

2022 Cost Category



Category weight:

30%



Performance Period:

365 days



Like 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
 - 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 is proposing 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

PI Category Changes

Measures

- **In the past, you could choose which two public health and clinical data exchange measures to submit (from a list of 5), CMS proposes to require you to submit these two measures:**
 1. Immunization Registry Reporting
 2. Electronic Case Reporting

PI Category Changes

Measures

- **CMS wants to modify the Providing Patient Electronic Access measure to require patient health information to remain available to the patient indefinitely.**

PI Category Changes

Measures

- **CMS is proposing 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.

PI Category Changes

Measures

- **CMS is modifying the Prevention of Information Blocking Attestation Statements and**
- **Modifying the Complex Patient Bonus in 2022.**

PI Category Changes

Scoring

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



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