

# MIPS Value Pathways

Current Structure of MIPS (In 2020)	New MIPS Value Pathways Framework (In Next 1-2 Years)	Future State of MIPS (In Next 3-5 Years)
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- Many Choices
- Not Meaningfully Aligned
- Higher Reporting Burden

- Cohesive
- Lower Reporting Burden
- Focused Participation around Pathways that are Meaningful to Clinician's Practice/Specialty or Public Health Priority

- Simplified
- Increased Voice of the Patient
- Increased CMS Provided Data
- Facilitates Movement to Alternative Payment Models (APMs)

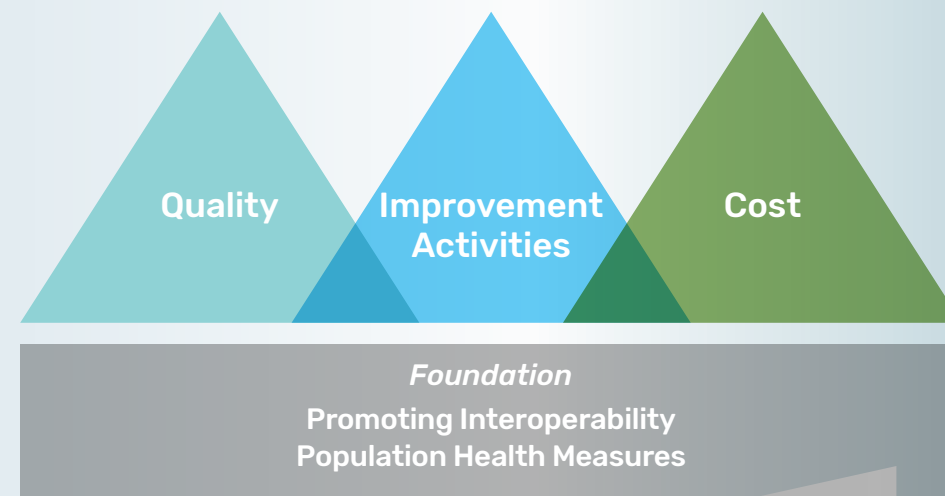
## Building Pathways Framework

### MIPS Pathways

Clinicians report on fewer measures and activities based on specialty and/or outcome within a MIPS Value Pathway

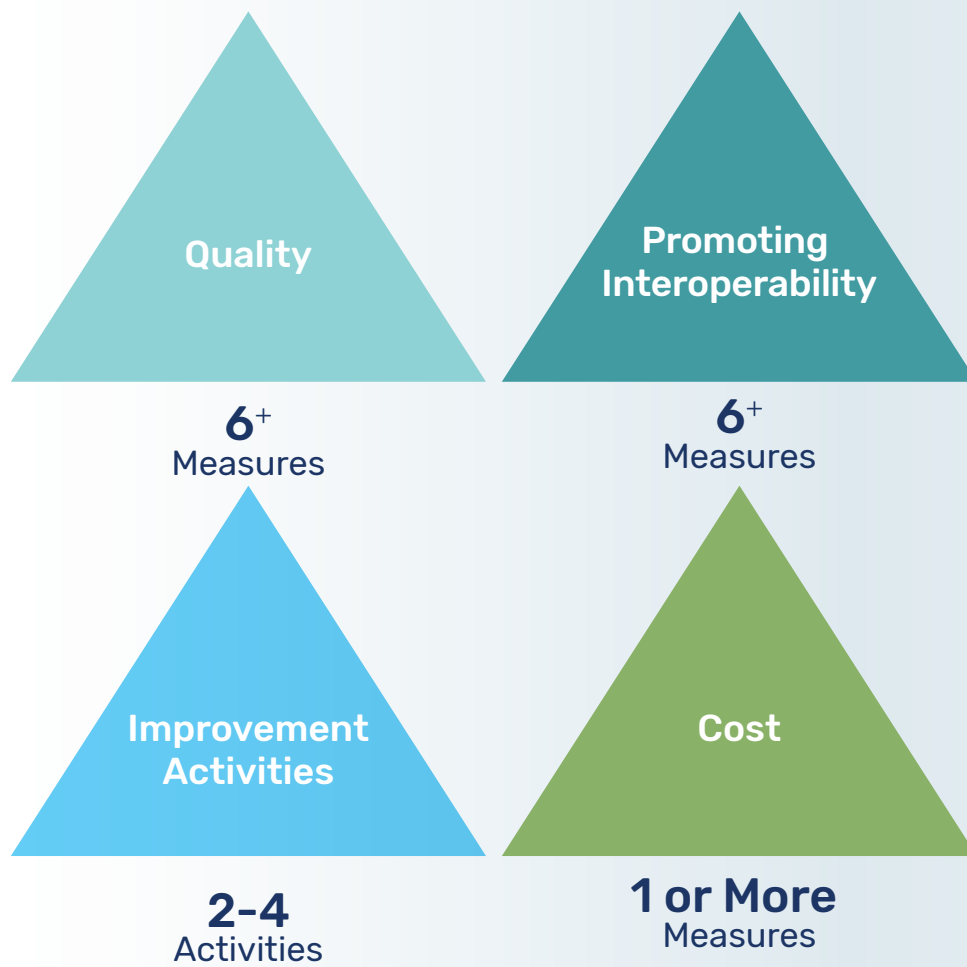
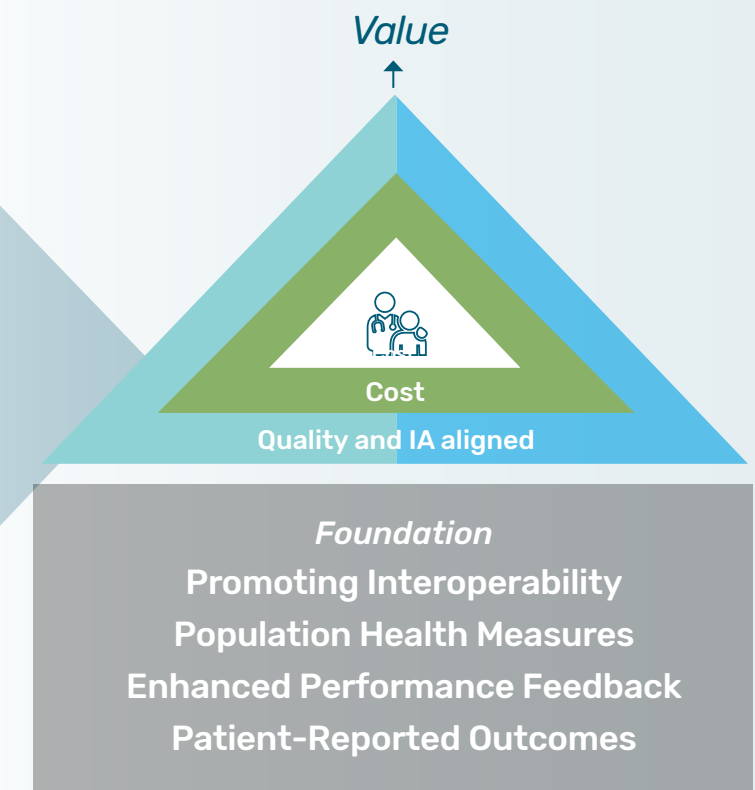
### Moving to Value

Implementation to begin in 2021



## Fully Implemented Pathways

Continue to increase CMS provided data and feedback to reduce reporting burden on clinicians



**Population Health Measures:** a set of administrative claims-based quality measures that focus on public health priorities and/or cross-cutting population health issues; CMS provides the data through administrative claims measures, for example, the All-Cause Hospital Readmission measure.



Goal is for clinicians to report less burdensome data as MIPS evolves and for CMS to provide more data through administrative claims and enhanced performance feedback that is meaningful to clinicians and patients.