# ALPHA MIPS UNIVERSITY Your Guide to MIPS Reporting in 2023



**Participation Options** 

**Individual** A clinician submits their own individual performance data. Can Report:

- Traditional MIPS,
- APM Performance Pathway (APP) (must be a MIPS APM Participant)
- MIPS Value Pathway (MVP)

A practice submits performance data on behalf of all clinicians billing under the tax identification number (TIN). Can Report:

- Traditional MIPS,
- APM Performance Pathway (APP) (must be a MIPS APM Participant)
- MIPS Value Pathway (MVP)

A CMS-approved virtual group is a number of providers not under any given TIN, but come together "virtually" to form a group for reporting purposes only.

Traditional MIPS

A subgroup is a subset of clinicians in a group (at least 2 clinicians) which contains at least one individually eligible MIPS eligible clinician.

MIPS Value Pathway (MVP) (requires advance registration)

MIPS eligible providers that are MIPS APM participants.

- Traditional MIPS,
- APM Performance Pathway (APP) (must be a MIPS APM Participant)
- MIPS Value Pathway (MVP)

# **Eligible Clinician Types**

Physicians (including doctors of medicine, osteopathy, dental surgery, dental medicine, podiatric medicine, and optometry)

Osteopathic practitioners • Chiropractors • Physician assistants • Nurse practitioners • Clinical nurse specialists

Certified registered nurse anesthetists • Physical therapists

Occupational therapists • Clinical psychologists

Qualified speech-language pathologists

Qualified audiologists • Registered dietitians or

nutrition professionals • Clinical social workers

**Certified nurse midwives** 



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## **Low Volume Threshold (LVT)**

Eligible clinician types must participate in MIPS if they meet all three of the following criteria:

**\$90,000** 

Bill more than \$90,000 for Medicare Part B covered professional services **200** 

See more than 200 Medicare Part B patients **200** 

Provide more than 200 covered professional services to Medicare Part B patients

Eligible clinicians and groups may opt-in if they meet at least one of the LVT criteria

If a clinician opts-in (and is eligible), the following apply:

- Be considered a MIPS eligible clinician and be required to report data to MIPS,
- Receive performance feedback,

Reminder: More than 75% of the clinicians in a group with a special status must be MIPS-eligible clinicians

- Receive a MIPS payment adjustment (positive, negative, or neutral),
- Be eligible to have your data publicly reported on the Doctors and Clinicians section of Care Compare (formerly "Physician Compare"), and
- Be assessed in the same way as MIPS eligible clinicians who are required to participate in MIPS.

Verify eligibility: https://qpp.cms.gov/participation-lookup

# Automatic reweighting continues to apply to MIPS eligible clinicians, groups and virtual groups with following special statuses: 1 Ambulatory Surgical Center (ASC) – based 2 Hospital – based 3 Non patient facing 4 Small practices 5 RURAL/HPSA? (not mentioned in the proposed rule)



### **Performance Thresholds**

75 points

to avoid a negative adjustment of -9%

Final Score 2023	Payment Adjustment 2025
<b>75.01-100</b> points	Positive adjustment greater than 0% Not eligible for additional payment for exceptional performance
<b>75</b> points	Neutral payment adjustment
18.76-74.99 points	Negative payment adjustment between -9% and 0%
<b>0-18.75</b> points	Negative payment adjustment of -9%

Exceptional bonus no longer available (2022 reporting year the last year)

# **Data Completeness**

**70**%

- (1) Greater than 70% for maximum scoring
- Less that 70% renders no scoring for large practices, 3 point floor for small practices

## **Available Bonus Points**



- 6 Small practice (must submit at least one measure)
- Up to 10 based on your improvement in the quality performance category from the previous year