

# Remaining Neutral in the Quality Payment Program (MIPS) in 2018

In order to remain neutral and avoid a penalty under MIPS, a providers overall MIPS Composite Score must be **15**. In order to obtain this final score, a provider has multiple options to do this:

- Attest through submission to CMS or submission to a registry that you performed Clinical Practice Improvement Activities for a minimum of 90 days, **OR**
- Report your Advancing Care Information for 90 days + 1 Quality Measure that meets Data Completeness for the entire year, **OR**
- Report 6 Quality Measures that meet Data Completeness (60%) for the entire year

For Clinical Practice Improvement Activities, a user needs to attest to:

- High-weighted activities, **OR**
- 1 High weighted and 2 Medium-weighted activates, **OR**
- At least 4 Medium-weighted activities

## ARE YOU DESIGNATED AS A SMALL PRACTICE?

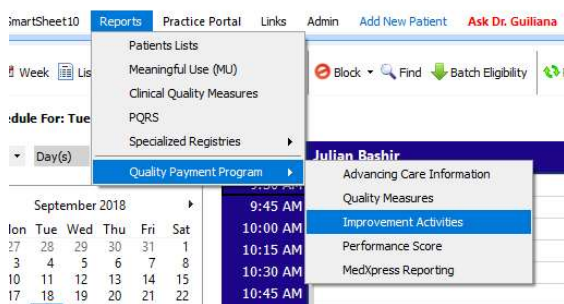


If you are a designated as a small practice (<15 providers), the weight on any measure is *doubled* so you only need one High-weighted activity to earn the full points under Clinical Practice Improvement area.

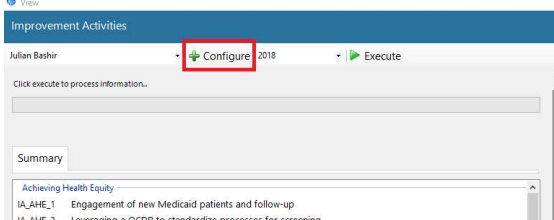


In order to indicate your specific activity for 2018, please follow the following steps:

### 1. Reports → Quality Payment Program → Improvement Activities



### 2. Click Configure



3. Find the Improvement Activity you will perform in 2018
4. Check off the Select box next to the activity you will perform
5. Click Save

Configure Improvement Activity

Configure Improvement Activities Save Close

Select Reporting Year: 2018 Select Reporting Period: 10/ 1/2018 to 12/31/2018

Select	Activity Id	Activity Name	Activity Description	Activity Weig...	Performed
<input type="checkbox"/>	IA_CC_9	Implementation of practices/processes for developing regular individual care plans	Implementation of practices/processes to develop regularly updated individual care plans for at-risk patients that are shared with the beneficiary or caregiver(s).	Medium	<input type="radio"/> Yes <input checked="" type="radio"/> No
Subcategory Name: Emergency Response And Preparedness					
<input type="checkbox"/>	IA_ERP_1	Participation on Disaster Medical Assistance Team, registered for 6 months.	Participation in Disaster Medical Assistance Teams, or Community Emergency Responder Teams. Activities that simply involve registration are not sufficient. MIPS eligible clinicians and MIPS eligible clinician groups must be registered for a minimum of 6 months as a volunteer for disaster or emergency response.	Medium	<input type="radio"/> Yes <input checked="" type="radio"/> No
<input type="checkbox"/>	IA_ERP_2	Participation in a 60-day or greater effort to support domestic or international humanitarian needs.	Participation in domestic or international humanitarian volunteer work. Activities that simply involve registration are not sufficient. MIPS eligible clinicians attest to domestic or international humanitarian volunteer work for a period of a continuous 60 days or greater.	High	<input type="radio"/> Yes <input checked="" type="radio"/> No
Subcategory Name: Expanded Practice Access					
<input checked="" type="checkbox"/>	IA_EPA_1	Provide 24/7 access to eligible clinicians or groups who have real-time access to patient's medical record	Provide 24/7 access to MIPS eligible clinicians, groups, or care teams for advice about urgent and emergent care (e.g., eligible clinician and care team access to medical record, cross-coverage with access to medical record, or protocol-driven nurse line with access to medical record) that could include one or more of the following: Expanded hours in evenings and weekends with access to the patient medical record (e.g., coordinate with small practices to provide alternate hour office visits and urgent care); Use of alternatives to increase access to care team by MIPS eligible clinicians and groups, such as e-visits, phone visits, group visits, home visits and alternate locations (e.g., senior centers and assisted living centers); and/or Provision of same-day or next-day access to a consistent MIPS eligible clinician, group or care team when needed for urgent care or transition management	High	<input type="radio"/> Yes <input checked="" type="radio"/> No
<input type="checkbox"/>	IA_EPA_2	Use of telehealth services that expand practice access	Use of telehealth services and analysis of data for quality improvement, such as participation in remote specialty care consults or teleaudiology pilots that assess ability to still deliver quality care to patients.	Medium	<input type="radio"/> Yes <input checked="" type="radio"/> No
<input type="checkbox"/>	IA_EPA_3	Collection and use of patient experience and satisfaction data on access	Collection of patient experience and satisfaction data on access to care and development of an improvement plan, such as outlining steps for improving communications with patients to help understanding of urgent access needs.	Medium	<input type="radio"/> Yes <input checked="" type="radio"/> No
<input type="checkbox"/>	IA_EPA_4	Additional improvements in access as a result of QIN/QIO TA	As a result of Quality Innovation Network-Quality Improvement Organization technical assistance, performance of additional activities that improve access to services (e.g., investment of on-site diabetes educator).	Medium	<input type="radio"/> Yes <input checked="" type="radio"/> No
Subcategory Name: None					

### 24/7 ACCESS USERS



For those TRAKnet users who allow your patients to have 24/7 access to you and you have 24/7 access to TRAKnet, the improvement activity you can choose will be under the 6th subsection:

**Expanded Practice Access section: Provide 24/7 access to eligible clinicians or groups who have real-time access to patient's medical records.**