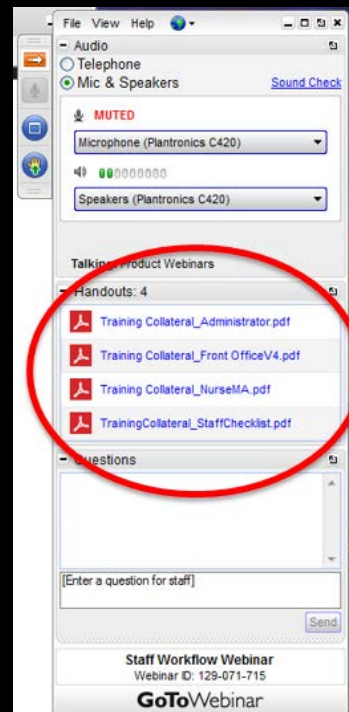


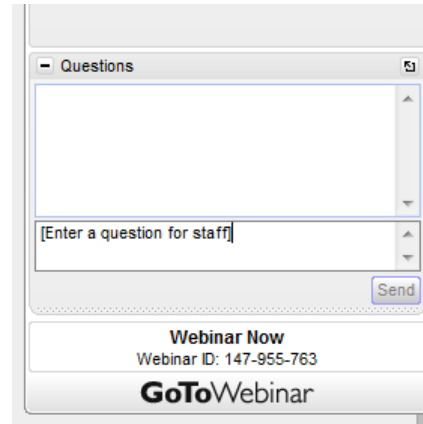
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## + Submitting questions for Q&A:

- Send questions to Practice Fusion webinar staff using the Chat module at the bottom of the webinar toolbar

# Moving Beyond Meaningful Use: Getting Started with the Quality Payment Program in 2017

- Help understanding the Quality Payment Program tracks
- Learn how the changes affect you and your practice
- Feel better prepared to get started

- What Practice Fusion provides:
  - Comprehensive Quality Payment Program (QPP) Resource Center
  - Ongoing live webinars
  - Learning Center video tutorials & recorded webinars
  - Detailed Knowledge Base articles
  - Phenomenal Practice Fusion EHR Support Team

*We are also continuing to actively work to further enhance our product functionality for MIPS and we will be giving updates as they become available*

- The Practice Fusion EHR offers intuitive tools and workflows to simplify participation in MIPS.
- Get started with Practice Fusion today.
  - [www.practicefusion.com/signup](http://www.practicefusion.com/signup)

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- MACRA → the Quality Payment Program (QPP)
- QPP Structure and Timeline
- MIPS Eligibility
- 2017 Participation Paces
- MIPS and Advanced APMs
  - MIPS Performance Categories
  - Comprehensive Primary Care Plus (CPC+) Overview
- Practice Fusion EHR Functionality
- Resources
- Recap and live Q&A



Alyssa Mompoint

- Medicare Access & CHIP Reauthorization Act of 2015 (MACRA)
  - Ends Sustainable Growth Rate (SGR) formula
  - Ends existing Medicare Quality reporting programs
- Quality Payment Program (QPP)
  - Fee-for-value payment system replacing fee-for-service
  - Consists of two tracks:
    - Merit-based Incentive Payment System (MIPS)
    - Advanced Alternative Payment Models (Advanced APMs)



# Quality Payment Program (QPP)

Two tracks to choose from

## Merit-based Incentive Payment System (MIPS)

Advancing Care  
Information  
(ACI)

Quality

Cost

Improvement  
Activities

## 2017 Advanced Alternative Payment Models (APMs)

Comprehensive ESRD Care  
(CEC) – Two-Sided Risk

ACO Shared Savings  
Program Track 3

Comprehensive Primary  
Care Plus (CPC+)

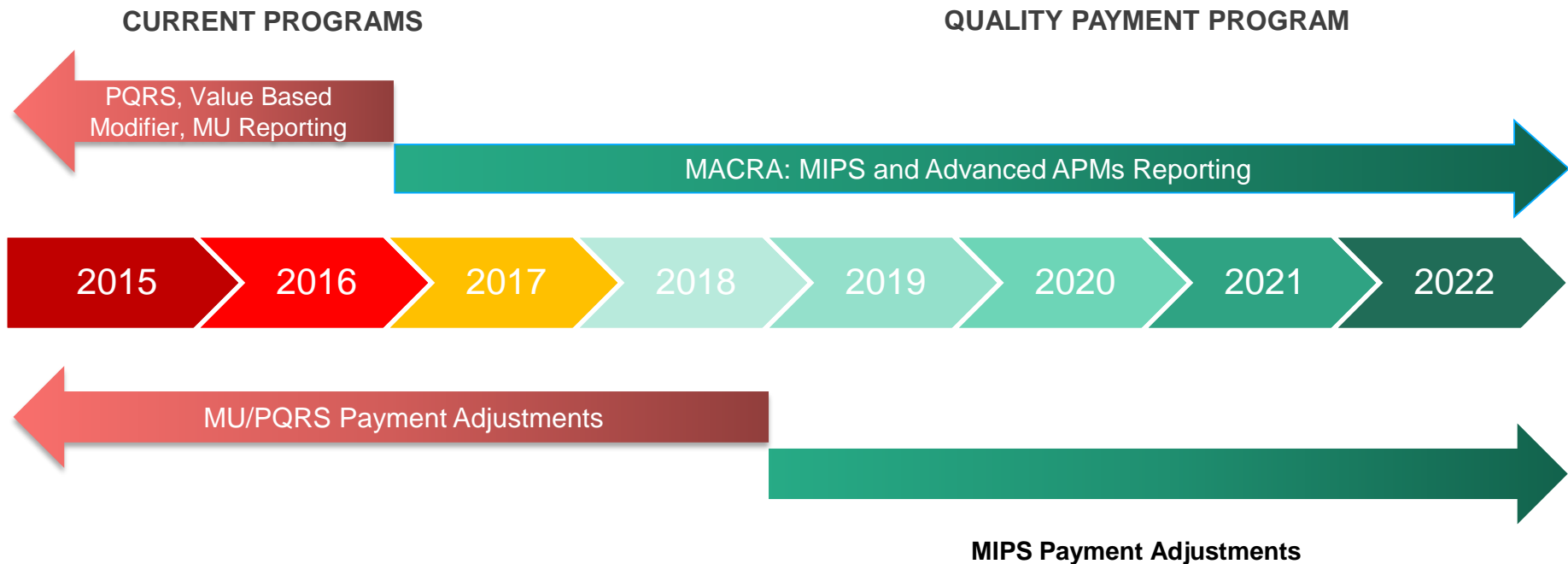
Oncology Care Model  
(OCM) – Two-Sided Risk

Next Generation ACO  
Model

ACO Shared Savings  
Program Track 2

Comprehensive Care for  
Joint Replacement (CJR)  
Payment Model (Track 1  
– CEHRT)

# Changing Payment Landscape



*\*Maximum MIPS Payment Adjustment (+/-)*

## Medicare Part B MIPS Eligible Clinicians

Doctors of Medicine (MD)

Doctors of Osteopathy (DO)

Doctors of Dental Surgery/Dental Medicine (DMD/DDS)

Doctors of Podiatry

Clinical Nurse Specialists

Doctors of Optometry

Chiropractors

Physician Assistants (PA)

Nurse Practitioners (NP)

Certified Registered Nurse Anesthetists

## Exemptions

### Newly enrolled in Medicare

Enrolled in Medicare for the first time during the performance period (exempt until the following performance year).

### Below the low-volume threshold


Medicare Part B allowed charges less than or equal to \$30,000 a year OR see 100 or fewer Medicare Part B patients a year.

### Significantly participating in an Advanced APM

# Pick Your Pace: 2017 MIPS Participation

# MIPS Participation in 2017

- Pick your pace for participation
- Practice Fusion supports all levels of participation

Participate in an Advanced APM	Test Pace	Partial Year	Full Year
	0	+%	+%
Some practices may have chosen to participate in an Advanced Alternative Payment Model in 2017.	Submit a minimum amount of 2017 data (for example 1 quality measure or 1 improvement activity) and avoid a downward payment adjustment.	Submit 90 days of 2017 data and you may earn a neutral or positive payment adjustment.	Submit a full year of 2017 data and you may earn a positive payment adjustment.

*Not participating in the Quality Payment Program for the Transition Year will result in a negative 4% payment adjustment.*

# MIPS: Test Pace Participation for 2017

- Submit a minimum amount of 2017 data to Medicare
- No downward payment adjustment

**1**  
**Quality  
Measure**

OR

**1**  
**Improvement  
Activity**

OR

**4**  
**Required  
Advancing Care  
Information  
Measures**

- Submit 90 days of 2017 data to Medicare
- Potential to earn a positive payment adjustment
- Submit performance data between January 1, 2018 and March 31, 2018



Start your performance period any time between  
**January 1<sup>st</sup>** and **October 2<sup>nd</sup>**



- Submit a full year of 2017 data to Medicare
- Start your reporting period on January 1, 2017
- Potential to earn a positive payment adjustment
- Submit performance data between January 1, 2018 and March 31, 2018



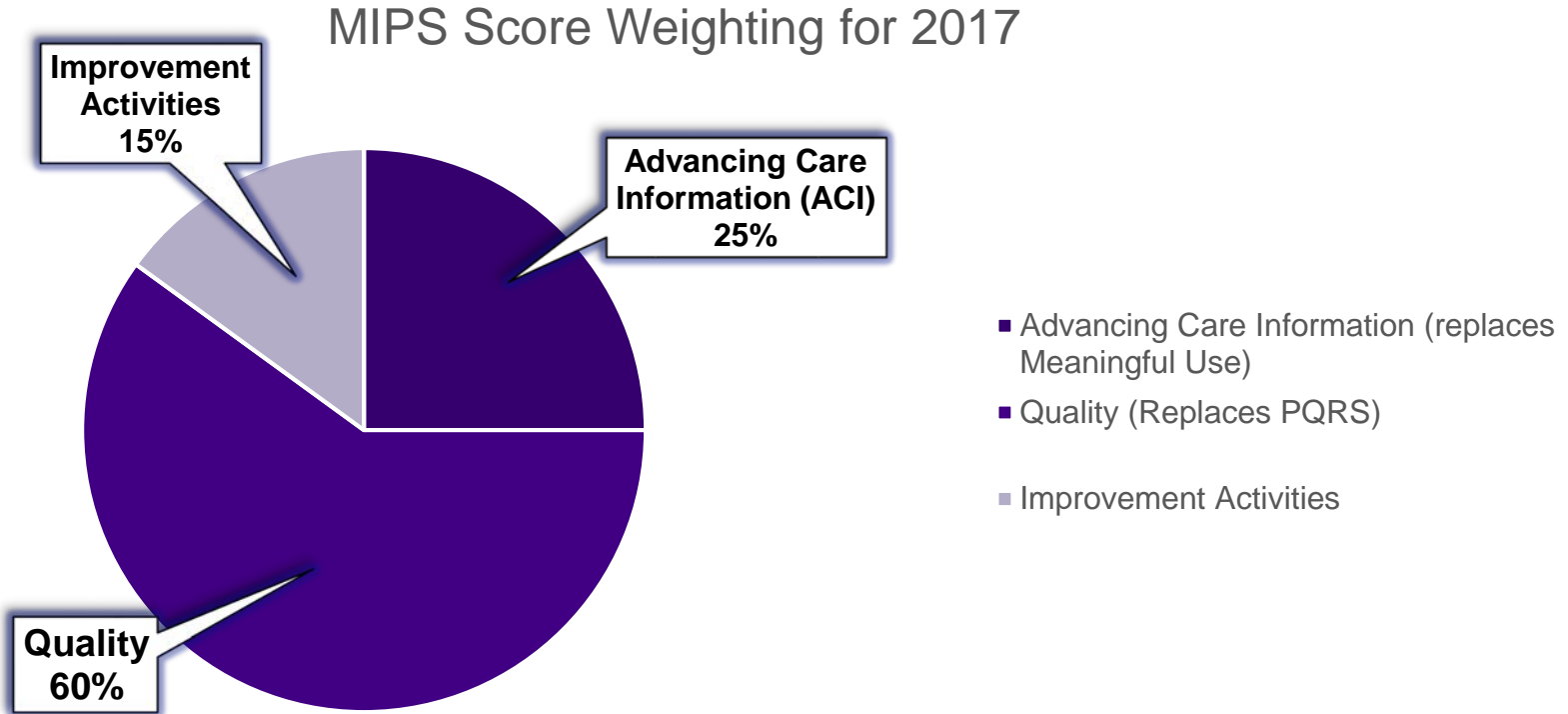
Positive adjustments are based on **overall performance** on the data submitted, not the **amount** of information or **length of time submitted**.





# MIPS Performance Categories

# Merit-based Incentive Payment System (MIPS)



*The Cost performance category (not pictured) will not be counted in MIPS scoring for the 2017 Transition Year, but will be added in MIPS scoring beginning in the 2018 performance year. This category replaces the Physician Value-Based Modifier program.*

# Quality

60% of MIPS final score

- Replaces PQRS and the Quality Portion of the Value Modifier
- Select and report up to 6 quality measures\*
  - Include at least one outcome measure OR high-priority measure
- Submit data for a Partial Year (90 days) or Full Year

**60%** of MIPS final score

\*Test pace participants have the option of selecting 1 quality measure

# Advancing Care Information

25% of MIPS final score

# Advancing Care Information Performance Category practice fusion

- Replaces the Medicare EHR Incentive Program (Meaningful Use)
- Practice Fusion supports the 2017 ACI Transitional Measure Set
  - 4 Base Score Measures
  - Additional Performance Measures
- Submit data for a Partial Year (90 days) or Full Year

**25%** of MIPS final score

\*Test pace participants must report data for all four of the Base Score measures to earn credit for this category.

- Required Base Score measures (50% of ACI category score)
  - ✓ Security Risk Analysis
  - ✓ e-Prescribing
  - ✓ Provide Patient Access
  - ✓ Health Information Exchange

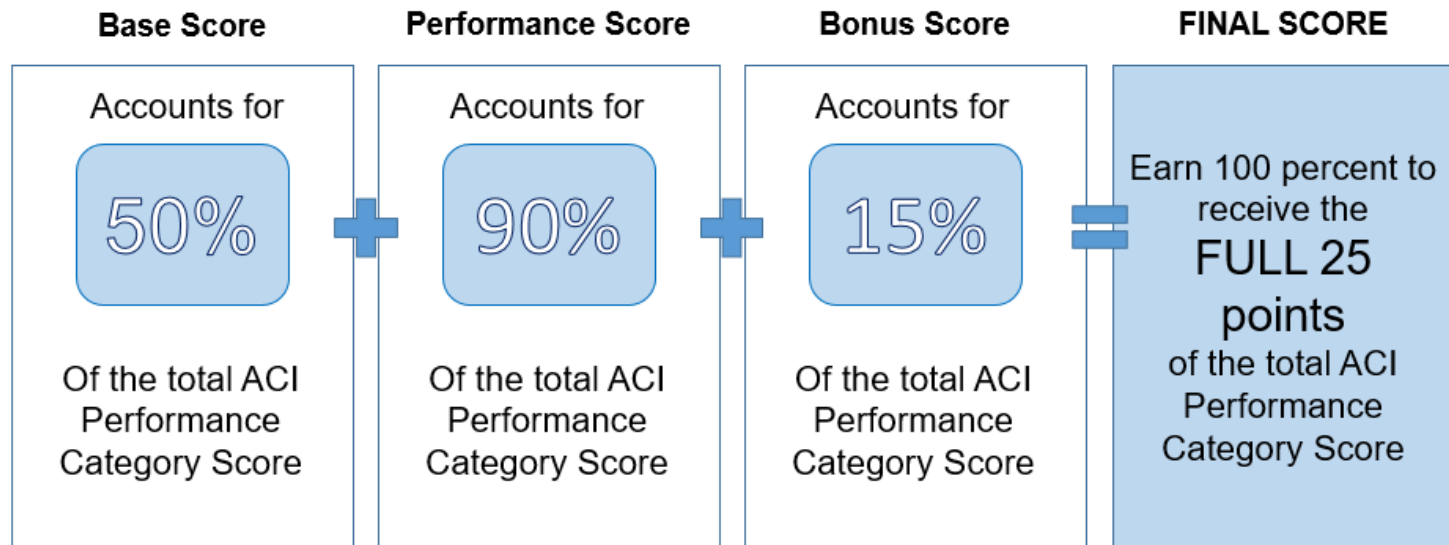
- Additional Performance Score Measures (up to 90% of ACI category score):
  - ✓ Provide Patient Access (up to 20%)
  - ✓ View, Download or Transmit (up to 10%)
  - ✓ Health Information Exchange (up to 20%)
  - ✓ Secure Messaging (up to 10%)
  - ✓ Medication Reconciliation (up to 10%)
  - ✓ Patient-Specific Education (up to 10%)
  - ✓ Immunization Registry Reporting (0 or 10% - yes/no measure)
- Bonus credit (up to 15% of ACI category score)
  - Report to one or more additional public health and clinical data registries beyond the Immunization Registry Reporting measure (5% bonus).
  - Use certified EHR technology (CEHRT) to complete certain improvement activities in the Improvement Activities performance category (10% bonus).



# ACI Category Scoring Methodology

Advancing Care Information Transition Measures		Performance Rate 1-10	1%
Measure	Performance Score	Performance Rate 11-20	2%
		Performance Rate 21-30	3%
Provide Patient Access	Up to 20%	Performance Rate 31-40	4%
Health Information Exchange	Up to 20%	Performance Rate 41-50	5%
View, Download, or Transmit	Up to 10%	Performance Rate 51-60	6%
Patient-Specific Education	Up to 10%	Performance Rate 61-70	7%
Secure Messaging	Up to 10%	Performance Rate 71-80	8%
Medication Reconciliation	Up to 10%	Performance Rate 81-90	9%
Immunization Registry Reporting	0 or 10%	Performance Rate 91-100	10%

# ACI Category Scoring Methodology (continued)



The overall ACI score will be made up of the base score, additional performance score, and optional bonus score for a maximum score of 100 percentage points.

# Improvement Activities

15% of MIPS final score

# Improvement Activities Performance Category

- 92 available improvement activities from 9 subcategories
- Submit data for a Partial Year (90 days) or Full Year
- View the complete list at:
  - [www.practicefusion.com/qpp/mips-improvement-activities](http://www.practicefusion.com/qpp/mips-improvement-activities)

**15%** of MIPS final score

\*Test pace participants have the option of selecting 1 improvement activity

- Select one of the following combinations for a maximum 40-point score:
  - 2 high-weighted activities
  - 1 high-weighted and 2 medium-weighted activities
  - At least 4 medium-weighted activities

## Activity weight flexibilities

Activity Weights	Alternative Activity Weights*	Full Credit
Medium = <b>10 points</b> High = <b>20 points</b>	Medium = <b>20 points</b> High = <b>40 points</b>  *For clinicians in small, rural, and underserved practices or with non-patient facing clinicians or groups.	For clinicians in a patient-centered medical home, Medical Home Model, or similar specialty practice.

# Advanced Alternative Payment Models

## Overview

- An APM is a payment approach that gives incentives for providing high-quality and cost-efficient care.
- A sub-set of APMs, Advanced APMs let practices earn incentives for taking on risk related to patient outcomes.
- Path for providers who go the furthest in delivering coordinated and efficient care.
- Applications for the 2017 performance year have closed.

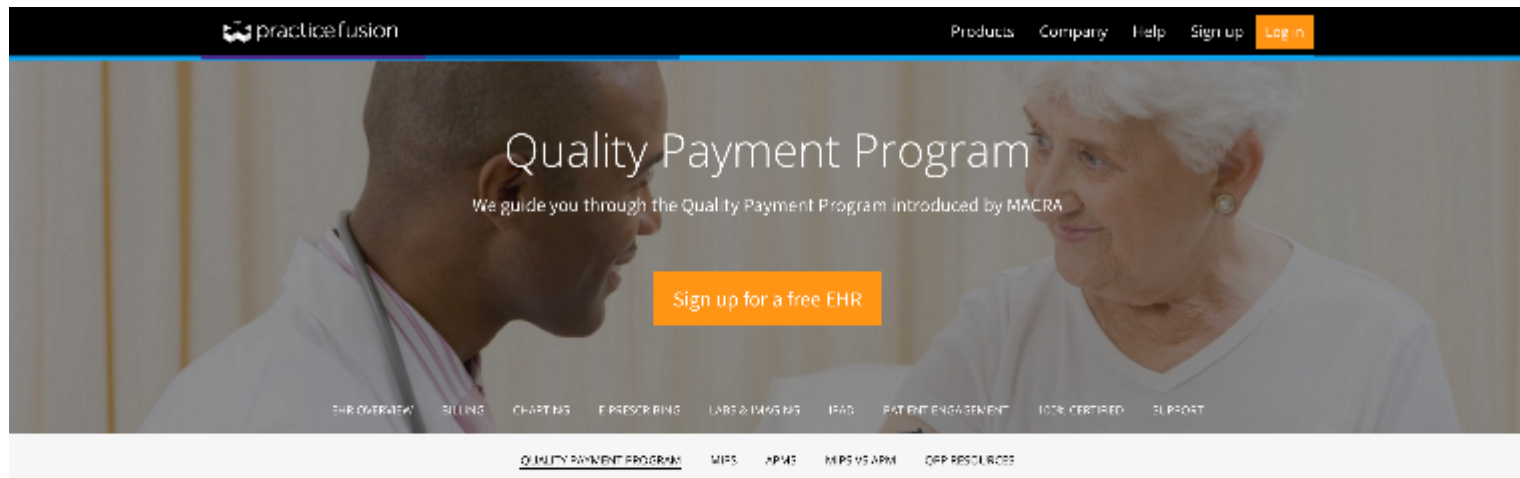
- Comprehensive ESRD Care (CEC) – Two-Sided Risk
- Comprehensive Primary Care Plus (CPC+)
- Next Generation ACO Model
- Shared Savings Program – Track 2
- Shared Savings Program – Track 3
- Oncology Care Model (OCM) – Two-Sided Risk
- Comprehensive Care for Joint Replacement (CJR) Payment Model (Track 1 - CEHRT)



Practice Fusion is here to support you!

# Practice Fusion's Quality Payment Program Center

<http://www.practicefusion.com/qpp/>




In 2015, the Medicare Access and CHIP Reauthorization Act (MACRA) was signed into law. MACRA replaces the previous Medicare reimbursement schedule to a new pay-for-performance program that's focused on quality and accountability. This program is the latest in a series of steps the Centers for Medicare and Medicaid Services (CMS) has taken to incentivize care quality over volume.

Starting on January 1, 2017, it's proposed that all Medicare Part B providers\* will enter a new payment framework called the Quality Payment Program (QPP), replacing the Sustainable Growth Rate formula.

The Program has two paths for participation:






- The Merit-based Incentive Payment System (MIPS)
- Advanced Alternative Payment Models (APMs)

<http://knowledgebase.practicefusion.com/>

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



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-  [Where do I access the Meaningful Use dashboard and PQRS Clinical Quality Measures \(CQM\) report?](#)
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-  [How do I attest for Meaningful Use?](#)
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**Live Webinar:** Optimizing your Patient Portal Workflow in Practice Fusion

(Previously Recorded)

Recorded Webinar: Optimizing your EHR workflow with the patient portal

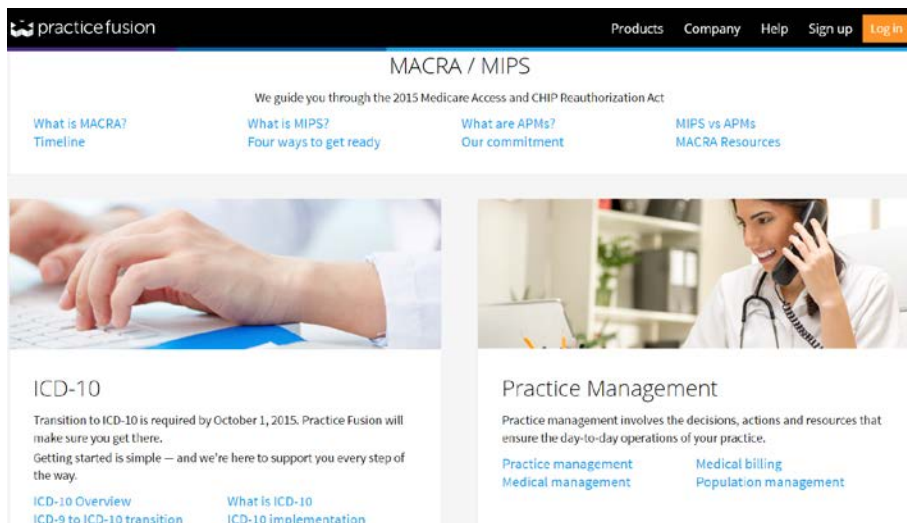
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## + Practice Resource Center

- [www.practicefusion.com/practice-resource-center/](http://www.practicefusion.com/practice-resource-center/)

## + Our **Phenomenal Support** team is here to help:

- [Phone](tel:415-346-7700) – 415-346-7700
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# Recap

- + **Can Practice Fusion be used to participate in the Quality Payment Program in 2017?**
- + **Yes.** *Practice Fusion is currently certified as a 2014 Edition EHR, which can be used to participate in MIPS and Advanced APMs in 2017.*
  - <http://www.practicefusion.com/certified-meaningful-use-ehr/>

## + What are the participation options for MIPS in 2017?

- *Test pace: avoid a downward payment adjustment*
- *Partial Year (90 days): potential to earn a neutral or positive payment adjustment*
- *Full Year: potential to earn a positive payment adjustment*
- *Meet participation requirements as part of an Advanced APM*

## + When do I start participating in MIPS in 2017?

- *Test Participation and Partial Year (90-day) Participation have the flexibility to start as late as October 2, 2017*
- *Full Year: January 1, 2017*



- + What are the performance **categories** for MIPS in the 2017 reporting year?
- + Quality – *Select up to 6 quality measures, including at least one outcome or high-priority measure.*
- + **ACI** – *Track performance on 4 required base score measures, with optional additional performance score measures and bonus points.*
- + Improvement Activities – *Select weighted activities by relevance to your practice, with a maximum available category score of 40 points.*

## + What do I need to do next for MIPS?

- *Determine eligibility*
- *Pick your participation pace*
- *Review program timeline*
- *Get started on your performance period!*

*Remember: MIPS participation does not require registration - you can start anytime.*

## *Live Q & A*

Submit your questions using chat