

# MIPS 2019 FINAL RULE TOP 15 CHANGES

Don't have time to search through the hundreds of pages of the 2019 MACRA Final Rule and resources to find the most important changes for MIPS in 2019? No worries—we did that for you and here are the Top 15 changes that you need to know as a clinician of a small practice.

## TOP 15 CHANGES TO MIPS FOR 2019 FOR SMALL PRACTICES

### 1 NEW CLINICIAN TYPES

In addition to Physicians, PAs, NPs, CNAs, CRNAs, these new clinician types have been added for 2019:

Clinical Psychologists, Physical Therapists, Occupational Therapists, Speech-Language Pathologists, Audiologists, Registered Dietitians/Nutrition Professionals.

### 2 NEW LOW VOLUME THRESHOLD

There are now 3 Low Volume Thresholds for required participation in 2019\*

At least \$90,000 in Medicare Part B allowed charges for covered professional services.

At least 200 Medicare Part B beneficiaries receive covered professional services.

New for 2019 – At least 200 Medicare Part B covered professional services.

\*CMS looks at two MIPS determination periods for these thresholds for the 2019 performance year – 1st 10/1/17 to 9/30/18, 2nd 10/1/18 to 9/30/19.

### 3 OPT-IN OPTION FOR MIPS

Based on the Low Volume Thresholds:

If you exceed all 3 thresholds you **MUST** participate.

If you exceed at least 1 threshold you **MAY OPT IN** (New in 2019).

If you don't exceed any thresholds you **MAY NOT** participate.

### 4 30 POINTS TO AVOID NEGATIVE

You need at least 30 points in your MIPS Final Score for 2019 Performance Year to avoid a negative adjustment in your 2021 Medicare payments.

### 5 -7% TO +7% MEDICARE PAYMENT ADJUSTMENT

2021 payment adjustments will be between -7% to +7% based on 2019 Performance Year

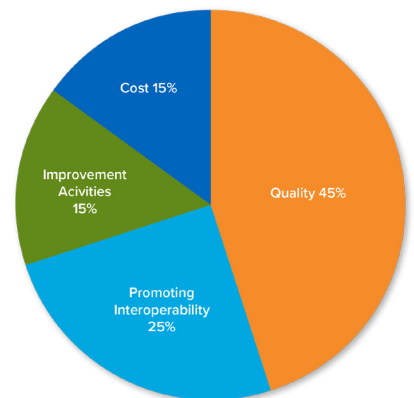
0-7.5 points in MIPS Final Score guarantees -7% adjustment.

### 6 75+ NEEDED FOR EXCEPTIONAL PERFORMER

Bonus of 0.5% will be given in 2021 for 75+ points MIPS Final Score for 2019.

### 7 MIPS CATEGORY PERFORMANCE WEIGHTS OF MIPS FINAL SCORE IN 2019

During 2018 ACI category was renamed "Promoting Interoperability" (PI).



### 8 SMALL PRACTICE BONUS

Moved from Final Score to Quality Category and is now 6 points.

6 points will be added to the numerator of the Quality category for small practices that submit at least 1 Quality measure.

Small Practices are those with 15 or fewer clinicians

## 9 PROMOTING INTEROPERABILITY

Category has new performance-based scoring

Removed required Base and previous Bonuses  
No bonus for doing certain Improvement Activities using your EHR.

Now has 4 Objectives with 6 required Performance Measures (or exclusions) & 2 new Bonus Measures.

Must be using an EHR that is certified as a 2015 Edition CEHRT—there is a reweighting option for this category you can apply for as a small practice, if needed.

## 10 QUALITY CATEGORY CAN BE SUBMITTED VIA MULTIPLE COLLECTION TYPES

You no longer have to have a full set of 6 measures using only 1 collection type (all EHR, all Registry, etc.).

And if you submit any of your 6 measures via multiple collection types, CMS will use the type that gives YOU the better score.

## 11 CLAIMS-BASED QUALITY MEASURES ONLY ALLOWED FOR CLINICIANS OF SMALL PRACTICES

## 12 CMS ADDED 8 NEW QUALITY MEASURES AND REMOVED 26 QUALITY MEASURES

If you are planning to continue doing the Quality Measures you done for previous years—make sure that they are not one of those CMS has removed.

## 13 CMS ADDED 6 NEW IMPROVEMENT ACTIVITIES, MODIFIED 5, AND REMOVED 1 ACTIVITY

## 14 8 EPISODE-BASED MEASURES ADDED TO THE PREVIOUSLY USED COST MEASURES

Medicare Spending per Beneficiary (MSPB)  
Total Per Capita Cost (TPCC)  
8 episode-based measures (New in 2019)

## 15 FACILITY-BASED SCORING FOR QUALITY AND COST PERFORMANCE

Available for eligible clinicians based on performance of the hospitals at which they work (using Hospital's VBP Program Performance Score)—no data submission requirement for Quality and Cost if:

MIPS eligible clinician furnishes 75% or more of their covered professional services in inpatient hospital, on-campus outpatient hospital, or emergency room (POS 21, 22, 23).  
Must have at least 1 service billed with POS 21 or 23.

Note: If you are doing MIPS and this change results in a higher score in Quality and Cost for you, CMS will automatically apply facility-based measurement and give you the higher score starting in 2019.

## DO YOU NEED TO PARTICIPATE?

Go to <https://qpp.cms.gov/participation-lookup>, enter your individual NPI to get your QPP Participation Status (keep checking back if CMS hasn't updated the site with 2019 participation data).

## REGISTER FOR OUR 2019 MACRA MIPS HIGHLIGHTS WEBINAR

### ADDITIONAL DETAILS:

[2019 QPP Final Rule Overview Factsheet](#)

[2019 QPP Final Rule Executive Summary](#)

[2019 MACRA/MIPS Final Rule](#)

[Highlights for Year 3 \(2019\)](#)

[CMS offers free resources](#): direct, one-on-one support and technical assistance for small, underserved, and rural practices.

