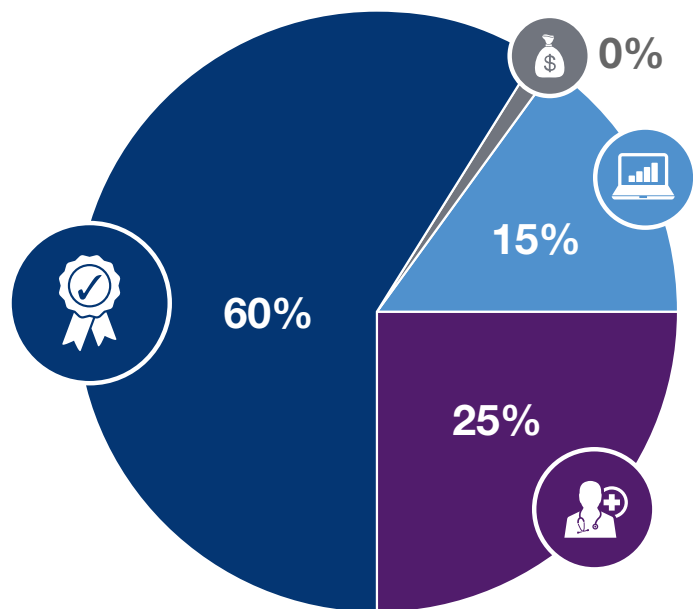


QUALITY PAYMENT PROGRAM PATHWAYS

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

YEAR ONE PERFORMANCE CATEGORY WEIGHTS FOR MIPS



● QUALITY

REPORT 6 MEASURES ON 80-90 PERCENT OF PATIENTS

● COST

CONTINUES USE OF VBM COST MEASURES

● IMPROVEMENT ACTIVITIES

90+ ACTIVITIES CAN BE COMPLETED TO ACCRUE 60 POINTS

● ADVANCING CARE INFORMATION

MEASURES REPORTS TO COMPUTE BASE AND COMPOSITE SCORES

PICK YOUR PACE FOR PARTICIPATING FOR THE TRANSITION YEAR

MIPS

TEST PACE

- Submit **some** data after January 1, 2017
- Neutral or small payment adjustment

PARTIAL YEAR

- Report for 90-day period after January 1, 2017
- Small positive payment adjustment

FULL YEAR

- Fully participate starting January 1, 2017
- Modest positive payment adjustment

PARTICIPATING IN AN ADVANCED ALTERNATIVE PAYMENT MODEL



Some practices may choose to participate in an Advanced Alternative Payment Model in 2017

NOT PARTICIPATING IN THE QUALITY PAYMENT PROGRAM FOR THE TRANSITION YEAR WILL RESULT IN A NEGATIVE 4% PAYMENT ADJUSTMENT.

QUALITY PAYMENT PROGRAM PATHWAYS

ALTERNATIVE PAYMENT MODELS (APMS)

REQUIREMENTS AND PAYMENTS FOR APM PARTICIPANTS

ADVANCED APMS	
REQUIREMENTS	QUALIFYING PROGRAMS
<p>At least 50% of participants must use certified EHR technology</p> <p>Payment based on quality measures comparable to MIPS</p> <p>Must bear more than a nominal amount of financial risk</p>	<p>Shared Savings Program (Tracks 2 and 3)</p> <p>Next Generation ACO Model</p> <p>Comprehensive ESRD Care (Two-sided risk arrangement)</p> <p>Comprehensive Primary Care Plus</p> <p>Oncology Care Model (Two-sided risk arrangement)</p>
<p>ADVANCED APMS RECEIVE 5% BONUS 2019-2024 <small>NOTE: Excludes participants from MIPS</small></p>	

IF YOU DO NOT MEET ADVANCED APM REQUIREMENTS, YOU HAVE OTHER OPTIONS.

PARTIAL QUALIFYING APM PARTICIPANTS	MIPS APM
<p>Providers in APMs with at-risk revenue and patient volume below the advanced APM threshold that meet slightly reduced requirements</p> <ul style="list-style-type: none"> • May choose not to participate in MIPS and will not receive a payment adjustment that year • May opt to participate in MIPS and will then be considered a MIPS APM that year 	<p>Entities participate in the APM under an agreement with CMS</p> <p>Include one or more MIPS eligible clinicians on their participation list</p> <p>Performance evaluated collectively at the APM level</p> <p>Cost category not scored</p> <p>MIPS APMs model and have the ability to use quality reporting in the APM to meet the MIPS quality reporting requirement</p>