



## MIPS Year 6 (2022) Improvement Activity Performance Category

### **Requirements:**

- Select activities that will yield a total of 40 points to receive full credit for the category
- Performance period is a minimum of 90 days unless otherwise stated in the activity description

### **Requirement for IA Credit for Groups:**

Group or virtual group can attest to an improvement activity when at least 50% of the clinicians in the group perform the same activity during any continuous 90-day period within the same performance period.

### **Scoring:**

- **15% of Final Score:** This percentage can change due to Exception Applications or APM participation
- **Small Practice/Rural Clinics/HPSA/Non-Patient Facing Clinicians**
  - Medium Weighted Activities = 20 points
  - High Weighted Activities = 40 points
- **Large Group Practice**
  - Medium Weighted Activities = 10 points
  - High Weighted Activities = 20 points
- **Patient Center Medical Home (PCMH)**
  - EC or group must attest to their PCMH status to receive full credit. For organizations with multiple practice sites, at least 50% of these locations must be recognized or certified PCMH.
- **Alternative Payment Models (APM)**
  - EC or group must attest to their APM status to receive ½ credit, but can report additional activities to earn the maximum of 40 points.

### **Submission Type:**

There are 3 submission types you can use, depending on which submitter type you are:

- Sign-In and Attest: MIPS EC; Virtual Group, APM Entity, or representative of a practice
- Sign-in and Upload: MIPS EC; Virtual group, APM Entity, or representative of a practice
- Direct Submission (API): Third-Party Intermediaries Only

## **Inventory Changes from 2021 to 2022:**

- Modified 15 existing Improvement activities
  - Enhance Engagement of Medicaid and Other Underserved Populations (IA\_AHE\_1)
  - MIPS Eligible Clinician Leadership in Clinical Trials or Community-Based Participatory Research (CBPR) (IA\_AHE\_5)
  - Use of Certified EHR to Capture Patient Reported Outcomes (IA\_BE\_1)
  - Regularly Assess Patient Experience of Care and Follow Up on Findings (IA\_BE\_6)
  - Promote Self-Management in Usual Care (IA\_BE\_16)
  - Drug Cost Transparency (IA\_BE\_25)
  - Practice Improvements that Engage Community Resources to Support Patient Health Goals (IA\_CC\_14)
  - PSH Care Coordination (IA\_CC\_15)
  - Provide 24/7 Access to MIPS Eligible Clinicians or Groups Who Have Real-Time Access to Patient's Medical Record (IA\_EPA\_1)
  - Use of Telehealth Services that Expand Practice Access (IA\_EPA\_2)
  - Use of Toolsets or Other Resources to Close Health and Health Care Inequities Across Communities (IA\_PM\_6)
  - Regular Review Practices in Place on Targeted Patient Population Needs (IA\_PM\_11)
  - Consultation of the Prescription Drug Monitoring Program (IA\_PSPA\_6)
  - Measurement and Improvement at the Practice and Panel Level (IA\_PSPA\_18)
  - COVID-19 Clinical Data Reporting with or without Clinical Trial (IA\_ERP\_3)
- Removed 6 Improvement activities
  - Regularly Assess the Patient Experience of Care through Surveys, Advisory Councils and/or Other Mechanisms (IA\_BE\_13)
  - Participation in CAHPS or Other Supplemental Questionnaire (IA\_PSPA\_11)
  - Use of Tools to Assist Patient Self-Management (IA\_BE\_17)
  - Provide Peer-Led Support for Self-Management (IA\_BE\_18)
  - Implementation of Condition-Specific Chronic Disease Self-Management Support Programs (IA\_BE\_20)
  - Improved Practices that Disseminate Appropriate Self-Management Materials (IA\_BE\_21)
- Add 7 New Improvement activities
  - Create and Implement an Anti-Racism Plan (IA\_AHE\_8)
  - Implement Food Insecurity and Nutrition Risk Identification and Treatment Protocols (IA\_AHE\_9)
  - Implementation of a Trauma-Informed Care (TIC) Approach to Clinical Practice (IA\_BMH\_11)
  - Promoting Clinician Well-Being (IA\_BMH\_12)
  - Implementation of a Personal Protective Equipment (PPE) Plan (IA\_ERP\_4)
  - Implementation of a Laboratory Preparedness Plan (IA\_ERP\_5)
  - Application of CDC's Training for Healthcare Providers on Lyme Disease (IA\_PSPA\_33)