

# Traditional MIPS Year 7 (2023) Quality Performance Category

## **Requirements:**

- 12-Month Reporting Period (January 1<sup>st</sup>-December 31<sup>st</sup>)
- Report on 6 Individual Measures
  - 1 must be an outcome measure OR a high-priority measure (if an outcome is not available) OR

Report a specialty measure set. If the set contains fewer than 6 measures, you must submit all measures within the set.

## **Collection Type:**

Refers to the way you collect quality measure data. You can submit measures from different collection types:

- eCQMs (Electronic Clinical Quality Measures)
- Medicare Part B Claims (Small Practice Only)
- MIPS CQMs (MIPS Clinical Quality Measures)
- QCDR (Qualified Clinical Data Registry Measures)

## **Scoring**

• 30% of Final Score

Scoring Policies for Quality Measures:

**Existing Measures** – That can be reliably scored against a benchmark (historical or performance period), meet data completeness (70%) and case volume (20) will be scored on a scale from 1-10 or 1-7 for Topped-out measures.

- Measures without a benchmark (historical or performance period) will earn 0 points, except for small practice will continue to earn 3 points.
- Measures that do not meet case volume or data completeness will earn 0 points, except for a small practice will continue to earn 3 points.

**New Measures** – When a performance period benchmark can be created, and data completeness (70%) and case volume (20) is met:

1<sup>st</sup> Year: Measure will be scored on a scale from 7-10 points.

2<sup>nd</sup> Year: Measure will be scored on a scale from 5-10 points.

If a performance period benchmark cannot be established and/or case volume was not met:

1<sup>st</sup> Year: Measure will earn 7 points.

2<sup>nd</sup> Year: Measure will earn 5 points.

### **Bonus Points:**

- Small Practice Bonus (15 EC or less)
  - 6 bonus points will be added to the quality category for clinicians in small practices who submit at least 1 measure, either individually or as a group or virtual group. This bonus is not added to clinicians or groups who are scored under facility-based scoring.

### **Improvement Scoring:**

- Will be based on the rate of improvement such that higher improvement results in more points for those who have not previously performed well.
- Improvement will be measured at the performance category level.
- Up to 10 percentage points available.

### **Measure Inventory:**

- Substantive changes to 76 existing quality measures, 5 of which won't have a historical benchmark
- Removal of 11 quality measures, and partially removed 2 quality measures from traditional MIPS but retained for MVPs
- 9 New quality measures, including 1 administrative claim measure.