

Traditional MIPS Year 7 (2023) 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.
- You do not have to submit any supporting data when you attest to completing an improvement activity, but you must keep the documentation of the efforts the clinician or practice undertook to meet the activity for 6 years after submission. Documentation guidance can be found in the 2023 MIPS Data Validation Criteria on the QPP website.

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 $\frac{1}{2}$ 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 2022 to 2023:

- 5 Modified Activities
 - o Practice Improvements to Align with OpenNotes Principles (IA_CC_13)
 - Practice Improvements that Engage Community Resources to Address Drivers of Health (IA AHE 12)
 - Use of QCDR data for ongoing practice assessment and improvements (IA_PSPA_7)
 - Obtain or Renew an Approved Waiver for Provision of Buprenorphine as Medication-Assisted Treatment for Opioid Use Disorder (IA_BMH_13)
 - o Implementation of formal quality improvement methods, practice changes, or other practice improvement processes (IA PSPA 19)
- Removed 6 Improvement Activities
 - o Participation in a QCDR, that promotes use of patient engagement tools (IA BE 7)
 - Participation in a QCDR, that promotes collaborative learning network opportunities that are interactive (IA BE 8)
 - Use of QCDR for feedback reports that incorporate population health (IA_PM_7)
 - Consultation of the Prescription Drug Monitoring program (IA PSPA-6)
 - Leadership engagement in regular guidance and demonstrated commitment for implementing practice improvement changes (IA_PSPA_20)
 - o PCI Bleeding Campaign (IA PSPA 30)
- Add 4 New Improvement Activities
 - Adopt Certified Health Information Technology for Security Tags for Electronic Health Record Data (IA_AHE_10)
 - Create and Implement a Plan to Improve Care for Lesbian, Gay, Bisexual, Transgender, and Queer Patients (IA_AHE_11)
 - Create and Implement a Language Access Plan (IA_EPA_6)
 - COVID-19 Vaccine Achievement for Practice Staff (IA ERP 6)