

2019 Merit-based Incentive Payment System Improvement Activities Performance Category Quick Start Guide

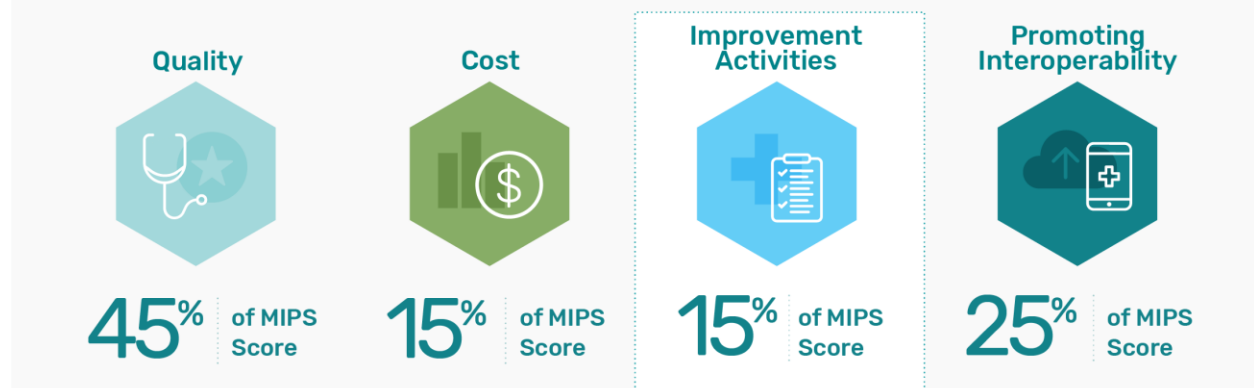
What is the Merit-based Incentive Payment System?

The Merit-based Incentive Payment System (MIPS) is one way to participate in the Quality Payment Program, a program authorized by the Medicare and CHIP Reauthorization Act of 2015 (MACRA) that rewards clinicians for value and outcomes.

Under MIPS, there are four performance categories that could affect your future Medicare payments. Each performance category is scored by itself and has a specific weight that contributes to your MIPS final score. Your MIPS payment adjustment is based on your final score.

This guide focuses on the Improvement Activities performance category.

MIPS performance category weights in 2019:



Please note that for MIPS APM participants, scored under the APM scoring standard, the performance categories have the following weights:



If you participate in MIPS through your APM Entity and are scored under the APM Scoring Standard, your participation in the APM may fulfill your requirements for the Improvement Activities performance category. [Learn more.](#)

What is the MIPS Improvement Activities Performance Category?

The Improvement Activities category assesses your participation in clinical activities that support the improvement of clinical practice, care delivery, and outcomes. With over 100 activities to choose from, you can select from the [2019 MIPS Improvement Activities Inventory](#) to find those that best fit your practice and support the needs of your patients by improving patient engagement, care coordination, and patient safety.

Getting Started with Improvement Activities in Three Steps



Step 1. Understand Your Reporting Requirements

Most clinicians must **submit two to four activities** to receive the **maximum score of 40 points** in this performance category.

- Each improvement activity is classified as either medium-weighted (10 points) or high-weighted (20 points).
- Clinicians, groups and virtual groups with certain **special statuses** (small practice, rural, health professional shortage area, or non-patient facing) **earn two times the points** for each activity.¹

Activity Weight	Standard Scoring	Special Status Scoring Rural Health Professional Shortage Area (HPSA) Non-Patient Facing Small Practice
Medium-Weighted Activity	10 points	20 points
High-Weighted Activity	20 points	40 points

¹ Check the [QPP Participation Status Tool](#) for more information about your special statuses.

You can also receive credit in this performance category from your participation in certain activities or payment models:

Other Ways to Earn Improvement Activity Points	Points Received	Action Required? ²
Participation in a certified or recognized patient-centered medical home (PCMH) or comparable specialty society ³	40 points	Yes – You must attest to this during the submission period.
Successful participation in the 2019 CMS Study on Factors Associated with Reporting Quality Measures	40 points	No – Credit awarded automatically.
Participation in an Alternate Payment Model (APM) x Not scored under the APM scoring standard	At least 20 points (out of 40 possible)	No action is required to receive the points awarded for APM participation – credit is awarded automatically. You must attest to additional activities to achieve the maximum 40 points.
Participation in a MIPS APM ✓ Scored under the APM scoring standard	At least 20 points (out of 40 possible) ⁴	No action is required to receive the points awarded for MIPS APM participation – credit is awarded automatically. You will only need to attest to additional activities if the CMS-assigned Improvement Activities score is below the maximum score of 40 points.

➤ Check the [QPP Participation Status Tool](#) for more information about your special statuses and APM participation.

² When credit is automatically awarded, this information is added to gpp.cms.gov as it becomes available. In certain scenarios, you may not see your Improvement Activities credit awarded on gpp.cms.gov until the submission period has closed.

³ Please see p. 5 of the [2019 Improvement Activities Performance Category Fact Sheet](#) for more information.

⁴ To date, all MIPS APMs have qualified for the maximum Improvement Activities score.

Step 2. Select and Perform Your Improvement Activities

Use the following resources to help you find improvement activities relevant to your practice:

- The [2019 Improvement Activities Inventory](#) on the Resource Library or the [Explore Measures & Activities](#) tool on [qpp.cms.gov](#)
- The 2019 Specialty Guides on the [Resource Library](#) (**TIP:** filter by “Resource Type”)
- The [2019 MIPS Data Validation Criteria](#) on the Resource Library to understand improvement activity documentation requirements (documentation must be retained for six years).

- Perform each activity for at least a **continuous 90-day period, unless otherwise stated in the activity description, in CY 2019** (activities don't have to be performed concurrently).
- The last 90-day performance period begins **October 3, 2019**.
- If you're reporting to MIPS as a group, **only one clinician needs to have performed the activity for the group** to attest and receive credit.
- You can attest to improvement activities you performed last year unless otherwise indicated in the activity description.

Step 3. Submit Your Data

You will need to attest to completion of your Improvement Activities or PCMH participation during the submission period (1/2/2020 – 3/31/2020). To submit data, you or your third-party representative will need QPP credentials and authorization. See the [QPP Access User Guide](#) for more information.

There are three ways to submit your Improvement Activities attestation:

Who	How
You	Sign in to qpp.cms.gov and attest to the activities you've performed.
You or a third party	Sign in to qpp.cms.gov and upload a file with your activity attestations.
Third party	Perform a direct submission on your behalf, using our submissions API.

No supporting documentation is required when you attest to completing an improvement activity, but **you must keep documentation for six years** subsequent to submission.

Documentation guidance for each improvement activity can be found in the [MIPS Data Validation Criteria](#). We suggest reviewing this validation document as you select your improvement activities for the MIPS performance year to ensure you document your work appropriately.

Technical Assistance

Technical assistance is available to clinicians in small practices and in rural or underserved areas. Check out our [SURS page](#) for more information. For questions, contact the QPP at 1-866-288-8292 (TTY 1-877-715-6222), available Monday through Friday 8:00 AM-8:00 PM Eastern Time, or via e-mail at QPP@cms.hhs.gov.

Additional Resources

The [QPP Resource Library](#) houses fact sheets, specialty guides, technical guides, user guides, helpful videos, and more.

Resource	Description
2019 Improvement Activities Performance Category Fact Sheet 2019 Improvement Activities Guide	More detailed information about the Improvement Activities performance category
QPP Access User Guide	Step-by-step instructions (with screenshots) for obtaining QPP credentials and authorization
2019 MIPS 101 Guide	Overview of the 2019 MIPS requirements
2019 MIPS Scoring Guide	Detailed information about scoring (all four performance categories, bonuses, and final score)
2019 MIPS Data Validation Criteria	Audit and validation criteria for MIPS performance categories
2019 Scores for Improvement Activities for MIPS APMs	Identifies the improvement activities attributed to each MIPS APM for the 2019 performance period