



QPP Resource Center: MACRA Minute August 2017

New: Do You Qualify for "Special Status"?

CMS recently updated its QPP website with [new information](#) clarifying whether clinicians have "special status" that would allow them to be exempt from submitting data this year. These circumstances may be applicable to individual and group clinicians who are: *non-patient facing, hospital-based, small practices, and Rural and Health Professional Shortage Area (HPSA).*

How will this impact you?

We recommend practices [search their National Provider Identifier \(NPI\)](#) on the CMS QPP site to determine which of their eligible clinicians (ECs) meet one of the above special status circumstances.



- **Hospital-Based and Non-Patient Facing Clinicians:**
Search your NPI on QPP.CMS.gov to identify ECs potentially exempt from the MIPS Advancing Care Information (ACI) category due to their "hospital-based" and/or "non-patient facing" status. CMS makes this determination by looking at claims data from September 1, 2015 through August 31, 2016.
 - **A hospital-based clinician** is one that furnishes 75 percent or more of their covered professional services in the inpatient hospital, on-campus outpatient hospital, or emergency room settings (based on place of service codes).
 - **A non-patient facing clinician** is one that has billed 100 or fewer Medicare Part B patient-facing encounters (including

Medicare telehealth services).

- **Small Practice, Rural and HPSA:** Practices can also search their NPI to identify which of their ECs qualify to receive double points for the improvement activity weights (Medium = 20 points and High = 40 points).

Important Considerations:

- Clinicians exempt from ACI:
 - Will have their ACI category score re-weighted to zero.
 - Will have their ACI category weight transferred to their Quality category score.
 - **Do not** need to submit ACI data to CMS; however, they do have the option to voluntarily submit (all data submitted will be scored).
- An EC working for multiple Tax Identification Numbers (TINs) can be considered hospital-based or non-patient facing for one TIN, but not for another TIN.
- These exemptions are *only applicable to the ACI performance category*; the Quality and Improvement Activities categories are still in play for hospital-based and non-patient facing clinicians.

New: QPP Tools & Resources

CMS has released a new set of QPP tools and resources available on qpp.cms.gov under "About/Resource Library/Documents and Downloads."

These include:

- 2017 CMS-Approved Qualified Clinical Data Registries (QCDRs)
- 2017 MIPS Quality Performance Category Scoring for MSSP and Next Generation ACOs
- 2017 Qualified Registries
- A Quick Start Guide to the Merit-based Incentive Payment System (MIPS)

QRUR Resource Sheet

Telligen's [latest online resource](#) provides background on annual Quality and Resource Reports (QRUR), highlights key report components, and instructions for accessing the reports.



For Upcoming Deadlines & Program Updates:

Subscribe to the QPP listserv by visiting the [program website](#) and

selecting "Subscribe to Updates" at the bottom of the screen.

For Program Education & Information:

The [Resource Library](#) on the CMS site is packed with important information on eligibility and participation.

Webinar: 2018 Year 2 Proposed Rule

As stated in last month's issue, significant changes have been proposed for the 2018 QPP Year 2 Proposed Rule that could impact your practice. A recording and slides of Telligen's latest QPP webinar outlining those changes is now available on the [Telligen QPP site](#).



Comments on the proposed rule must be submitted to CMS by 8/21/17 at 5:00 p.m., ET.

CMS also conducted recent webinars on the [2018 Year 2 Proposed Rule](#), which are available here:

1. QPP Year 2 Proposed Rule Listening Session ([slides](#))
2. Overview of MIPS for Small, Rural, and Underserved Practices (7/12/17)
 - [Recording](#)
 - [Slides](#)
 - [Transcript](#)

Update: New Name, New Card

To fight identity theft and safeguard taxpayer dollars, Medicare cards will no longer display Social Security Numbers. CMS is issuing members updated cards that will replace SSNs with a randomly generated Medicare Beneficiary Identifier.

Until recently, CMS referred to this as the Social Security Number Removal Initiative (SSNRI). Going forward, CMS will be referring to it as the New Medicare Card.



CMS has advised provider and practices to **be ready for this change by April 2018**. For the latest on the New Medicare Card, including how to talk to your Medicare patients about the change, bookmark and visit the [CMS' New Medicare Card homepage](#).

Upcoming: See You in South Dakota

Telligen will be at the 2017 South Dakota *MGMA fall conference August 23-25* at the Arrowwood Cedar Shore Resort in Oacoma. Visit our QPP-SURS exhibit and meet the Telligen team. For more information, including online registration, visit the [South Dakota MGMA website](#).



This material was prepared by Telligen QPP-SURS Resource Center, the Quality Payment Program for Iowa, Nebraska, North Dakota and South Dakota, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health & Human Services. The contents presented do not necessarily reflect CMS policy. HHSM-500-2017-00012C.

HealthPOINT | Dakota State University | 605.256.5555 | QPP-SURS@dsu.edu | www.healthpoint.dsu.edu

STAY CONNECTED:

