



QPP Resource Center: MACRA Minute November 2017



It's Never Too late To Reach Out!

Nervous that the end of the year is rapidly approaching? Feeling behind in your MIPS preparations? We're here to talk you through your options at this stage in a practical, reassuring manner. Don't hesitate to reach out and start a conversation - you'll be glad you did!

Call the Telligen QPP Resource Center at 844-358-4021 or email us at qpp-surs@telligen.com.

Take Action: Apply Now for Virtual Groups Reporting

Solo practitioners and groups have the option to participate in MIPS as a virtual group for the 2018 performance period. To form a virtual group for 2018, solo practitioners and groups ***must submit their election to CMS by December 31, 2017.***

What is a Virtual Group?

As outlined in the QPP Year 2 Final Rule, a virtual group is a combination of two or more Taxpayer Identification Numbers (TINs) consisting of: 1) one or more solo practitioners; 2) groups with 10 or fewer eligible clinicians (including at least 1 MIPS eligible clinician); 3) or a combination of both.

To join a virtual group, you must be a:

- Solo practitioner who exceeds the low-volume threshold; is not a newly Medicare-enrolled eligible clinician (EC), a Qualifying APM Participant (QP), or a Partial QP choosing not to participate in MIPS.
- Group that exceeds the low-volume threshold at the group level (i.e., the NPIs within the TIN collectively exceed the low-volume threshold) with 10 or fewer clinicians (including at least 1 MIPS eligible clinician).

How Do I Form a Virtual Group?

There's a two-stage election process:

- **Stage 1 (optional):** If you're a solo practitioner or group with 10 or fewer ECs, you can contact your QPP Technical Assistance representative. Your representative can help determine whether you're eligible to join or form a virtual group before:
 - Making any formal written agreements
 - Sending in your formal election registration
 - Budgeting your resources for your virtual group

For groups that don't participate in stage 1, CMS will determine virtual group eligibility during stage 2 of the election process.

- **Stage 2 (required):** Submit a formal written agreement between each of the virtual group members prior to submitting an election to CMS.
 - Each virtual group must name an official representative responsible for submitting the group's election via e-mail to MIPS_VirtualGroups@cms.hhs.gov by **December 31, 2017.**

If all the criteria are met, CMS will contact the virtual group's representative and provide the group's performance identifier.

Learn More About Virtual Groups

For more about participating as a virtual group, including the election process and formal agreements, please reference the Virtual Groups Toolkit containing:

- [Virtual Group Participation Overview Fact Sheet](#)
- [Virtual Groups Election Process Fact Sheet](#)
- [Virtual Groups Agreement Checklist](#)

- [Virtual Groups Sample Agreement Template](#)

Need Help with the Election Process?

Contact the QPP Service Center at QPP@cms.hhs.gov or 1-866-288-8292 (TTY: 1-877-715-6222) or contact Telligen at 844-358-4021.

Events: Mark Your Calendar

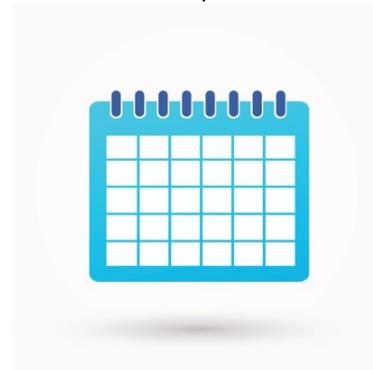
[Tuesday, December 12 & Wednesday, December 14](#)

What:

December LAN Webinar: Overcoming Challenges to MIPS Participation

Description:

Solo practitioners and small practices have time and resource constraints making it challenging to prepare for MIPS submission by March 2018. This event will focus on what can be done now to prepare for MIPS even if your practice has done little so far and/or lacks a certified EHR.



This event will feature a panel of experts that work regularly with small practices without a certified EHR and limited resources. The panel will focus on ways to avoid 2017 penalties, preparing practices without a certified EHR, and strategies for meeting minimum requirements.

Participants will learn how to:

- Avoid a penalty, even if no 2017 data has been collected
- Submit data through your EHR or registry
- Submit claims data without an EHR
- Meet the minimum MIPS test pace requirements
- Address frequent challenges encountered by solo practitioners and small group practices
- Access free technical assistance and locate a direct support organization funded by CMS

Register Now:

[Tuesday, December 12, 3:30 p.m. to 4:30 p.m., EST](#)

[Thursday, December 14, 11:00 a.m. to Noon, EST](#)

[Wednesday, December 6](#)

What:

Telligen QPP-SURS Webinar: QPP Year 2 Final Rule

Are there changes from the first year? What's new in year 2? What else do you need to know?

Did You Know . . . The QPP Year 2 Final Rule includes flexibilities to help MIPS-eligible clinicians prepare for full implementation in year 3?

We're Here To Help: Telligen's Michelle Brunsen and Sandy Swallow will be helping small- & solo-practice clinicians better understand the rule and its potential impact.

Key Objectives:

1. Learn about the key changes between 2017 and 2018.
2. Understand what the changes mean for Eligible Clinicians.
3. Explore which changes will be effective for 2017 reporting and what actions you may need to take.

Register Now:

[Wednesday, December 6, 12:00 - 1:00 p.m., CST.](#)

Deadline: CAH EHR hardship Exception

The deadline for Critical Access Hospitals (CAHs) to submit a [hardship exception application](#) to avoid the 2016 payment adjustment based on the 2016 reporting year is **November 30**.

- Electronic Submission: ehrhardsip@provider-resources.com
- Paper Submission: Fax to 814-456-7132

All hardship exception determinations will be returned via email. If approved, the exception is valid for the 2016 payment year only.

For More Information:

- [CAH Payment Adjustment and Hardship Exception Tips](#)
- [Payment Adjustments and Hardship Information Webpage](#)

QPP Resources: New Location on CMS.gov

To make it easier for QPP clinicians to search and find information, CMS has moved its library of [QPP resources to CMS.gov](#). Here clinicians can search the library for QPP resources by title, topic, or year.

Resources include fact sheets, user guides, and other materials to help clinicians successfully participate in MIPS and Advanced Alternative Payment Models (APMs) in 2017.

New Resources

In addition to existing QPP resources, CMS has posted the following new materials:

- [QPP final rule with comment & interim final rule with comment:](#)
 - Learn more using the [Year 2 Overview Fact Sheet](#) and the [Final Rule Executive Summary](#).

- [MIPS Measures for Optometrists](#) (11/17/17)
- [2017 QPP Frequently Asked Questions](#) (11/16/17)
- [2017 MIPS Participation Infographic](#) (11/16/17)
- [All-Payer Combination Option & Other Payer Advanced APMs](#) (11/16/17)
- [2017 Medicare Shared Savings Program and MIPS Interactions](#): Describes track 1 ACO status for the MIPS performance categories & the MIPS APM scoring standard.
- [Advancing Care Information - Information Blocking Fact Sheet](#): Details process for demonstrating MIPS EC's have not knowingly & willfully limited or restricted the compatibility or interoperability of their EHR technology.
- [CMS Web Interface Fact Sheet \(updated\)](#): Overview of the internet-based MIPS data submission option for groups of 25 or more ECs.
- [CMS Web Interface & CAHPS for MIPS Survey Assignment Methodology](#): Process for assigning beneficiaries to a group participating in MIPS.
 - Assigned beneficiaries are used in CMS Web Interface reporting, the CAHPS for MIPS survey, & in cost measure calculations.
- [CMS Web Interface Sampling Methodology](#): Explains sampling methodology for the 15 clinical quality measures reported via the CMS Web Interface.
 - Applies to ACOs in the Medicare Shared Savings Program & the Next Generation ACO Model, and MIPS group participants who elected and registered to report as a group using the CMS Web Interface.
- [MIPS Scoring 101 Guide](#): Summarizes scoring for the MIPS performance categories, and how the final score affects payment adjustments.
- MIPS Specialty Guides for [Podiatrists](#) and [Radiologists](#): Highlights non-exhaustive samples of measures & activities for the Quality, Improvement Activities, & Advancing Care Information performance categories that may apply to podiatry and radiology in 2017.

In case you missed it . . . CMS recently posted the [MIPS Claims Data Submission Fact Sheet](#).

For More Information

- Visit qpp.cms.gov to check your participation status, explore measures, and to review guidance on MIPS, APMs, what to report, and more.

Subscribe to the [QPP Listserv](#) to receive reminders of important QPP

deadlines and program updates.

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.

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