

MIPS: Know Where You Stand!



2018 MIPS Performance Feedback and Final Score Now Available

After the end of the reporting year, clinicians and practices receive a MIPS performance score based on their score in each category in which they submitted measures. Each category is weighted differently for a total of 100 possible MIPS performance points. The performance category weights for 2019 are as follows:

- **Cost: 15 percent of the final score, up from 10 percent in 2018.**
- **Quality: 45 percent of the final score, down from 50 percent in 2018.**
- **Promoting interoperability: 25 percent of the final score, the same as 2018.**
- **Improvement activities: 15 percent of the final score, the same as 2018.**

Nephrology practitioners who participated in the 2018 Merit-based Incentive Payment System (MIPS) can now view their performance feedback and MIPS final score on the [Quality Payment Program website](https://qpp.cms.gov/). <https://qpp.cms.gov/>
You can access your 2018 MIPS performance feedback and final score by:

1. Going to cms.gov/login

2. Logging in using your HCQIS Access Roles and Profile (HARP) system credentials; these are the same credentials that allowed you to submit your 2018 MIPS data

MIPS Eligible Clinicians Participating in MIPS Alternative Payment Model (APM) Entities

If you participated in one of the models below in 2018, your MIPS performance feedback is now available via the Quality Payment Program website:

- Medicare Shared Savings Program Accountable Care Organization (ACO)
- Next Generation ACO
- Comprehensive Primary Care Plus
- Oncology Care Model
- Comprehensive ESRD Care

Under the MIPS APM Scoring Standard, the performance feedback will be based on the APM Entity score, and is applicable to all MIPS eligible clinicians within the APM Entity. This feedback and score does not have any impact on assessments performed by the specific model.

Targeted Review Requests

If you believe an error has been made in your 2020 MIPS payment adjustment factor(s) calculation, you can [request a targeted review](#) until **September 30, 2019**. The following are examples of circumstances in which you may wish to request a targeted review:

- Errors or data quality issues for the measures and activities you submitted
- Eligibility and special status issues (e.g., you fall below the low-volume threshold and should not have received a payment adjustment)
- Being erroneously excluded from the APM participation list and not being scored under the APM scoring standard
- Performance categories were not automatically reweighted even though you qualify for automatic reweighting due to extreme and uncontrollable circumstances

For more information about how to request a targeted review, please refer to the [2018 Resource Library](#).

New Access for Individual Clinicians

CMS has created a new QPP role that lets individual clinicians access MIPS performance feedback for all of their practices, virtual groups, and APM Entities. For more information please review the Connect as a Clinician document in the [QPP Access User Guide](#).