



MIPS Improvement Activities

With the shift to value-based care under MACRA, the Centers for Medicare and Medicaid Services (CMS) have placed a greater emphasis on reporting patient experience measures.

SurveyVitals can help your organization complete Improvement Activities to earn credit for activities related to patient experience.



www.SurveyVitals.com | 763-600-8750
info@surveyvitals.com

© 2002 - 2019. All rights reserved



Clinical Practice Improvement Activities

MIPS 2019

What are MIPS Improvement Activities

For the 2019 performance year, CMS plans to award groups working toward improvement in care coordination, beneficiary engagement, and patient safety. Eligible clinicians and groups participating in MIPS can select from a list of activities in these areas developed by CMS.

The Improvement Activity category requires clinicians to participate in a combination of measures totaling forty points to fully satisfy reporting requirements. Activities that are weighted "high" are worth 20 points, while "medium" weighted activities are valued at 10 points. Clinicians and groups considered non-patient facing and those practices with 15 or few eligible providers and/or clinicians practicing in rural areas and health professionals shortage areas may face reduced reporting requirements.

How do I determine my status?

If you bill Medicare Part B more than \$90,000 in allowed charges per year or provide care for more than 200 unique Medicare patients a year or provide care for more than 200 covered professional services under the Physician Fee Schedule (PFS), then you are part of the QPP. If you do not meet this threshold, you could be exempt from participating in the program in 2019 under the low-volume threshold exemption.

Eligible clinicians under the program include physicians, physician assistants, nurse practitioner, clinical nurse specialists, physical therapists, occupational therapists, clinical social workers, clinical psychologists, and certified registered nurse anesthetists. If you are unsure if you are required to participate in MIPS, CMS has provided a resource to check your status by entering your NPI into an eligibility "calculator" on the CMS website. Additionally, the agency will send letters to clinicians notifying them of their eligibility.

To be excluded from MIPS, clinicians or groups would need to meet one of the following three criterion: have less than \$90K in Part B allowed charges for covered professional services, provide care to more than 200 beneficiaries, or provide more than 200 covered professional services under the Physician Fee Services (PFS).

Which activities can I participate in?

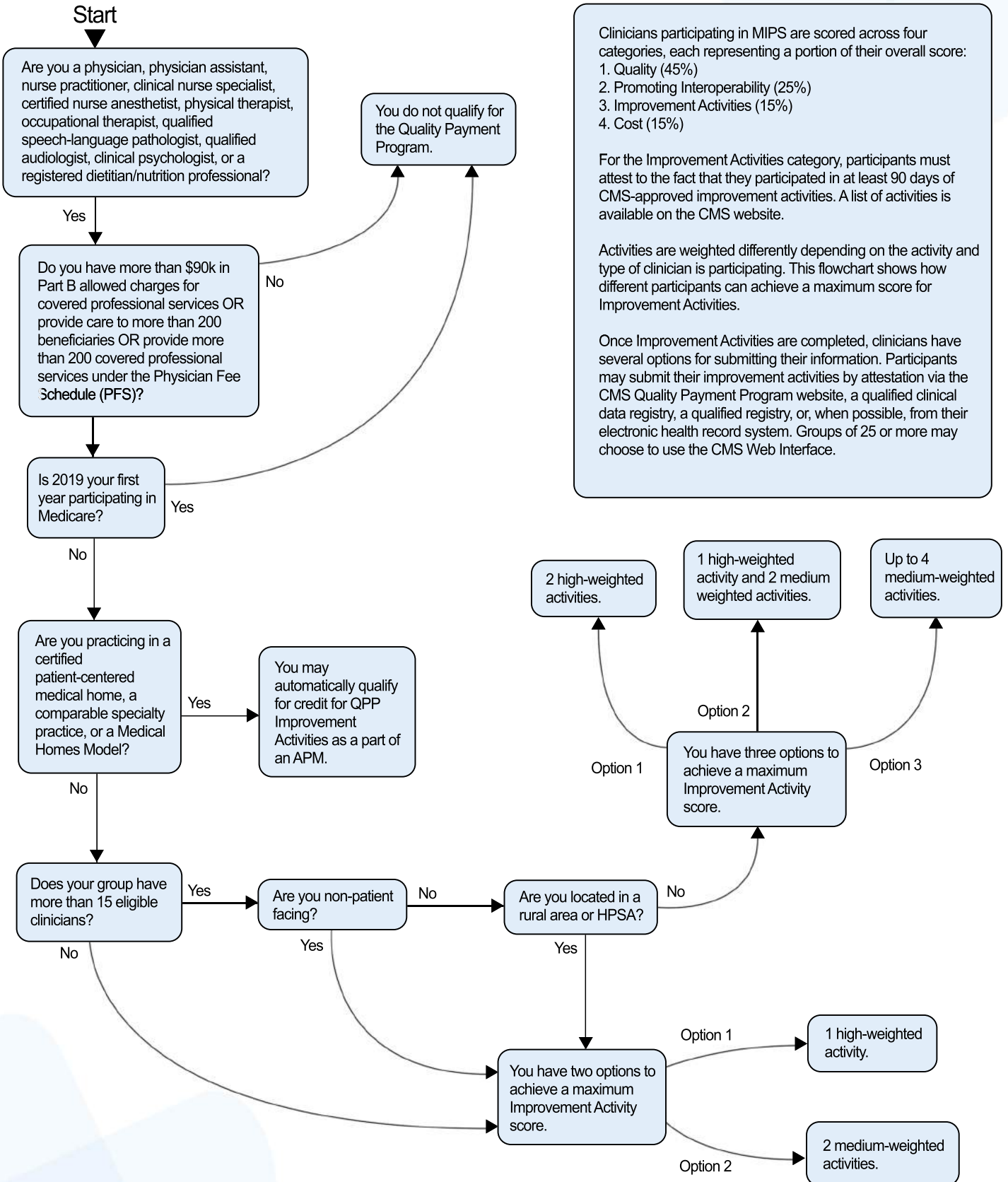
A full list of activities can be found on the Quality Payment Program website. For an overview on which activities SurveyVitals can help you satisfy, see page 4 of this document.

How do I report my activities?

There are several different options for reporting Improvement Activities. Groups or individual clinicians may report data using a QCDR, QR, EHR, if applicable - depending on the group or activity. Additionally, eligible clinicians can simply attest to these activities via a web portal made available by CMS found on the QPP website.



SurveyVitals



Clinicians participating in MIPS are scored across four categories, each representing a portion of their overall score:

1. Quality (45%)
2. Promoting Interoperability (25%)
3. Improvement Activities (15%)
4. Cost (15%)

For the Improvement Activities category, participants must attest to the fact that they participated in at least 90 days of CMS-approved improvement activities. A list of activities is available on the CMS website.

Activities are weighted differently depending on the activity and type of clinician is participating. This flowchart shows how different participants can achieve a maximum score for Improvement Activities.

Once Improvement Activities are completed, clinicians have several options for submitting their information. Participants may submit their improvement activities by attestation via the CMS Quality Payment Program website, a qualified clinical data registry, a qualified registry, or, when possible, from their electronic health record system. Groups of 25 or more may choose to use the CMS Web Interface.

*Information and program details are based solely upon SurveyVitals' experience with MIPS and our interpretation of CMS rulemaking and policy statements. The information presented does not reflect the views or policies of CMS or any other governmental agency and is not to be construed as practice management advice.



SurveyVitals

Clinical Practice Improvement Activities

Meet Improvement Activity Measures

Activity ID: IA_BE_6

Subcategory: Beneficiary Engagement

Activity Weight: High

Collection and follow-up on patient experience and satisfaction data on beneficiary engagement, including development of improvement plan.

Activity ID: IA_BE_13

Subcategory: Beneficiary Engagement

Activity Weight: Medium

Regularly assess the patient experience of care through surveys, advisory councils and/or other mechanisms.

Activity ID: IA_PSPA_4

Subcategory: Patient Safety And Practice Assessment

Activity Weight: Medium

Administration of the AHRQ Survey of Patient Safety Culture and submission of data to the comparative database .

Activity ID: IA_PSPA_11

Subcategory: Patient Safety And Practice Assessment

Activity Weight: High

Participation in the Consumer Assessment of Healthcare Providers and Systems Survey or other supplemental questionnaire items (e.g., Cultural Competence or Health Information Technology supplemental item sets).

Activity ID: IA_PSPA_18

Subcategory: Patient Safety And Practice Assessment

Activity Weight: Medium

Measure and improve quality at the practice and panel level, such as the American Board of Orthopaedic Surgery (ABOS) Physician Scorecards.

Activity ID: IA_PSPA_19

Subcategory: Patient Safety & Practice Assessment

Activity Weight: Medium

Adopt a formal model for quality improvement and create a culture in which all staff actively participates in improvement activities.

Activity ID: IA_PSPA_20

Subcategory: Patient Safety & Practice Assessment

Activity Weight: Medium

Ensure full engagement of clinical and administrative leadership in practice improvement.



Clinical Practice Improvement Activities

Best Practices

Ensure your providers and locations are authorized in the portal

Double check that all providers and locations you wish to have participate in the Improvement Activities are authorized in the portal. Administrators, those who are Organization users, can find this information and adjust settings on the 'Users' page. Contact your Account Manager with questions or to add a provider.

Develop an Improvement Plan (IA_BE_6, IA_PSPA_19)

Assess your organization's performance using the Reports page, the Location and Provider Details page, and the high-level metrics on the dashboard to identify areas needing the most improvement. Use these metrics as a starting point to create a roadmap of your strategy. Use SurveyVitals' Challenge Mode feature to incentivize providers engaged in the goal setting process and the team's mission for the most success.

Turn on 'Alerts' and 'Contact Me' as a part of your improvement plan

When alerts are enabled, you will receive regular email alerts, low score notifications, and more. Keep everyone in the loop with alerts as you strive for excellent patient satisfaction scores. Demonstrate that your organization is actively engaged in utilizing your patient feedback to not only follow-up on patient contact requests, but also as a tool to drive situational awareness and improvement. SurveyVitals alerts also include best practice tips for each question area. Turn on Alerts and utilize our growing resource library in the improvement center.

Regularly Monitor & Review Patient Experience Data at Team Meetings

Monitor performance regularly and make use of the robust reporting options to review your team's progress at the organization, division, and provider levels. Hold regular meetings to review this data with the team, discuss the improvement plan and make adjustments accordingly. It is important to keep everyone well-informed and reward progress so providers remain engaged and committed to the continuous improvement process.

Document, Document, Document!

In order to attest that your organization is actively engaged in your selected improvement activity, document each step along the way. Keep logs or minutes from team meetings where patient experience scores are discussed and have a written draft of your improvement plan handy. Raw data can be downloaded from the portal at any time to help facilitate the documentation process. When the time comes, attestation will be much easier if you keep track of your activities and progress along the way!



Connect With Us

Have questions or want more information?

info@surveyvitals.com

763-600-8750

www.SurveyVitals.com



@SurveyVitals

