

Definitions



MACRA

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). A law introduced to move toward value-based payments. The law mandates that providers will be paid based on quality and effectiveness according to the Quality Payment Program.

OPP

Quality Payment Program - Defines the reporting criteria required to meet the MACRA requirements. You must choose one of the following two tracks:

- Advanced Alternative Payment Models (APMs) or
- The Merit-based Incentive Payment System (MIPS)

MIPS

The Merit-based Incentive Payment System (MIPS). Most people will choose to report up to 6 quality measures, (including an outcome measure), and attest that they completed up to 4 improvement activities, for a minimum of 90 days.

CMS official site Click Here

1. Know the Criteria:

Clinicians and Hospitalists who meet the two criteria below are part of the Quality Payment Program:

\$30,000

 any hospital-employed clinician who bills Medicare more than \$30,000 in Part B allowed charges per year

AND

 any hospital-employed clinician who provides care for more than 100 Medicare patients per year

2. Determine who at your facility is required: If they meet the above criteria, and appear on this chart — they are required to participate in the QPP.

Hospitalists
Hospital-employed eligible clinicians
Hospitalists for outpatients
Emergency department
Radiologists
Pathologists
Anesthesia
Hospital-owned physical therapists

3. Choose your track:

APMs

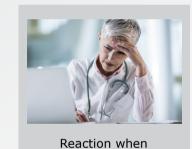
A payment approach that gives added incentive payments to provide high-quality and cost-effective care.

MIPS

Report up to 6 quality measures (from possible 271) and attest that you completed up to 4 improvement activities — for a minimum of 90 days.

More info on who is required

Click Here



Requirements

clinicians find out that they are actually required to submit for MACRA. Don't be this person!

Reporting



Readiness:

of Providers **Unprepared**

Health IT Industry Outlook Survey, Stoltenberg Consulting

Click Here

for MACRA

January 1, 2017 The earliest timeframe to start tracking data to submit a

full year for maximum payout

March 31, 2018 The deadline for submitting MACRA data (any level)

send in any 2017 data

on six measures for 2018

-9%

The potential downward Medicare payment penalty per

-4%

year for not reporting any data

The number of Quality Metrics to choose from to report

The negative percentage payment adjustment if you don't

preparation and compliance with MACRA should be a combined effort across clinical, financial, and IT departments.

*A majority - **68%** of participants - indicated

MACRA Assist can help with:

Get help now. Click Here

Gap

Identification

Documentation

of eligible **Participants**

Analysis

Plan for **Data Capture**

Needed

Attestation Plan

Education

Improvement Activities

Choosing **Quality Metrics**

Getting Help











