

Year 4 Countdown to the Merit-based Incentive Payment System (MIPS) Data Submission

- Confirm MIPS eligibility for 2020.
- Consider the Opt-in participation if not MIPS-eligible.
- Determine participation path: MIPS or Alternative Payment Model (APM).
- Choose reporting method: Individual, Group, or part of an APM.
- Determine who is overseeing the MIPS program for the practice.
- Review the Quality Payment Program (QPP) Year 4 Final Rule Overview for changes.
- Determine solo or multiple submission method per category.
- Select Quality Measures and review specification sheets for potential changes.
- Determine the 90-day reporting period for Promoting Interoperability (PI) and Improvement Activities (IA).
- Review the previous years' Performance Feedback Report.
- Maintain current Provider Enrollment, Chain, and Ownership System (PECOS) and Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) accounts throughout the year.
- Ensure the correct practice email is registered with the QPP listserv.
- Determine when electronic health record (EHR) will be upgraded to 2015 edition, if applicable.

- Review the MIPS Final Feedback Report for Year 3 (2019) via the QPP Portal.
- Review the practice's mid-year Quality measure performance rates and make adjustments, as needed.
- Make sure your EHR system is 2015 CEHRT to report for PI category for MIPS 2020
- Apply for PI reweighting, if applicable.

- **TIME TO SUBMIT 2020 DATA!**
- Keep backup documentation in a safe place in the event of an audit for a minimum of six years and three months.
- Submit early to avoid any submission issues.
- It's a new year: Let's get started with 2021!

Remember to submit your 2020 data no later than March 31, 2021!

January 2020

February 2020

March 2020

April 2020

May 2020

June 2020

July 2020

August 2020

September 2020

October 2020

November 2020

December 2020

January 2021

February 2021

March 2021

- Create a HARP account to access MIPS feedback reports.
- Review the previous year's preliminary data via the QPP Portal.
- Review the practice's first quarter Quality measure performance rates and make adjustments as needed.
- Select and work to complete selected IA.
- Upgrade EHR system to 2015 certified EHR (CEHRT) to report for PI category.
- Determine the best time to conduct the Security Risk Analysis (SRA) for the practice.
- Determine if the SRA will be done in-house or via a vendor.
- Generate monthly reports to track performance.
- Make changes to workflow, as needed.
- If participating with an APM, confirm if the APM will require PI data from the practice.
- The deadline for Web Interface or Consumer Assessment of Healthcare Providers and Systems® (CAHPS®) submission method is June 30, 2020.

- Review the practice's year-to-date Quality measure performance rates and make adjustments as needed.
- Final opportunity to complete participation for the PI and IA categories.
- The deadline to submit a PI Hardship application is December 31, 2020.
- Work closely with your EHR vendor or registry to establish your Data Submission Timeline for Year 4.
- If planning to participate in MIPS as a virtual group for MIPS 2021, submit an election to CMS by December 31, 2020.



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