

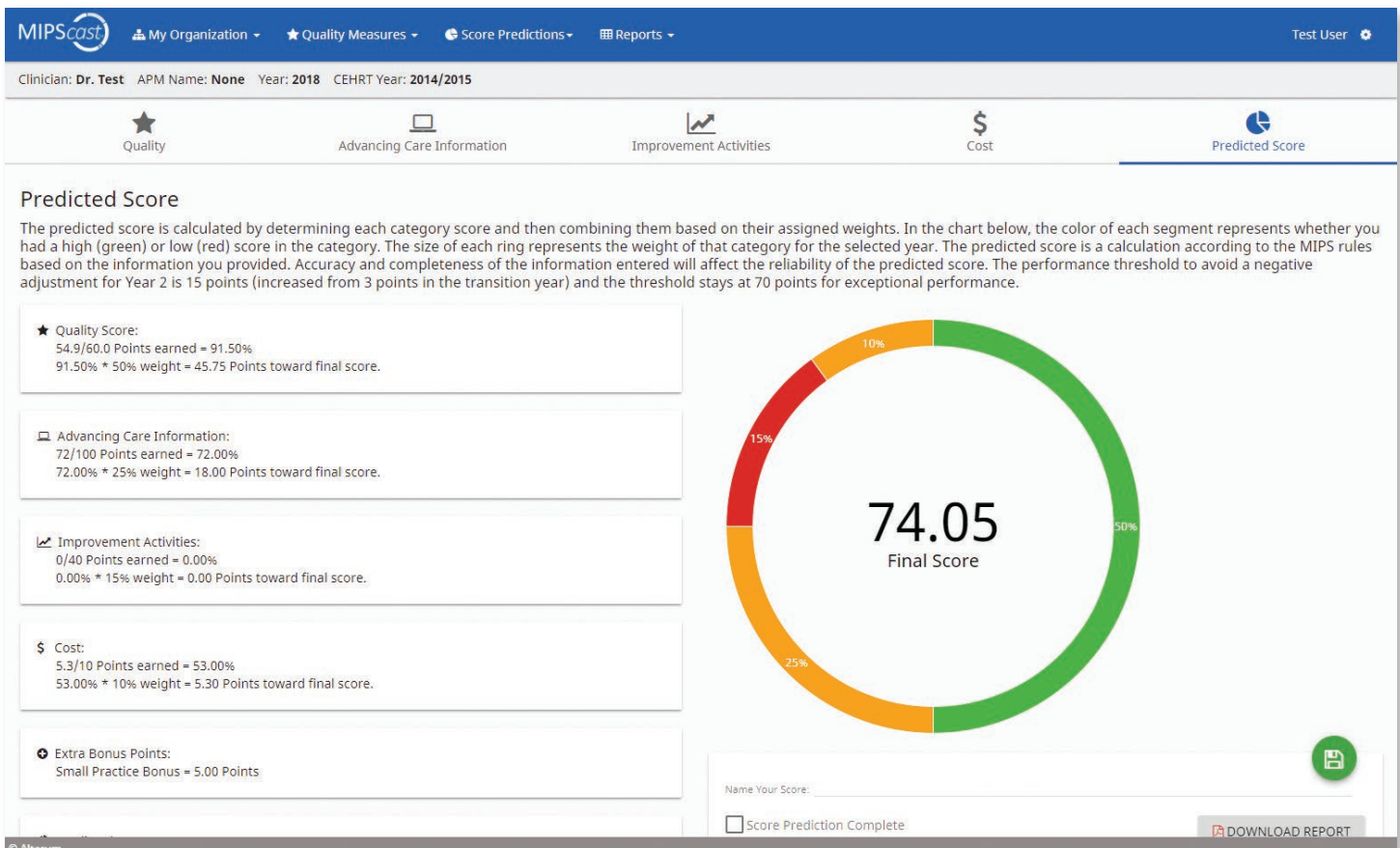
Prioritize Your Quality Improvement Efforts with MIPS^{cast}®

The Quality Payment Program Resource Center® for the Midwest has integrated Altarum's MIPS^{cast}® into our web portal. MIPS^{cast}® is an easy-to-use, interactive web-app that helps you prioritize your quality improvement efforts so they will make the greatest impact. MIPS^{cast}® is designed to easily import Quality Measures, calculate points earned, and accurately estimate your Merit-based Incentive Payment System, or MIPS, Final Score under the Centers for Medicare & Medicaid Services' (CMS) Quality Payment Program (QPP).

The MIPS rules are complicated. MIPS^{cast}® provides you with simple score comparisons so you can pick the quality measures, specialty set, and reporting methods

(e.g. EHR, Registry, Claims) that yield the highest scores. With usability in mind, MIPS^{cast}® allows you to see which MIPS categories are scoring the highest and lowest, save your work and continue later, and save multiple scoring scenarios for a single practice/clinician.

If you are a small practice who provides Medicare Part B services, the QPP Resource Center® can help you make the most of your QPP participation utilizing MIPS^{cast}®. Get started today at qppresourcecenter.org click **Join Now** to register or **Login** if you are already a member. After you have completed your Readiness Assessment you will have access to our helpful tools and resources including MIPS^{cast}®!



Prioritize Your Quality Improvement Efforts with



MIPScast® uses a practice's actual data to calculate their points earned in each MIPS category and accurately estimate their Final Score. We have made numerous updates to MIPScast® for 2018, including:

- Updated Quality measures, benchmarks, ACI scoring, and Improvement Activities.
- Improved Quality measure logic and easier, more efficient data entry.
- New visibility into how Quality measures are scored and how performance rates and data completeness are calculated so you can better understand how to improve your scores.
- New Cost category scoring that allows you to include your historical cost data to better predict future performance.
- Inclusion of new scoring rules, including bonuses for small practices and use of 2015 CEHRT, capped scoring for topped out Quality Measures, and more.

Quality

The Quality category replaces PQRS and the Quality Portion to the Value Modifier. The category is worth 50% of your final score. Practice or clinicians select up to 6 measures (or fewer based on specialty or reporting method) including at least one outcome or high priority measure. MIPScast® automatically reviews your entered quality measures and calculates your best combination of quality measures in order to maximize your score.

Date Range: 01/01/2018 to 03/31/2018

Scores based on all measures

Measure ID	N	D	%	Decile	★ Bonus	📄 Bonus
1★ (E)	155	210	73.80%	3.6	0	1
119 (E)	207	210	98.57%	10.0	0	1
128 (E)	1071	1097	97.62%	10.0	0	1
134 (E)	619	721	85.85%	10.0	0	1
163 (E)	127	210	60.47%	8.1	0	1

Scores based on specialty set: Gastroenterology

Measure ID	N	D	%	Decile	★ Bonus	📄 Bonus
EHR	2711	4000	67.75%			
130 (E)	1735	1822	95.22%	5.2	0	1
128 (E)	1071	1097	97.62%	10.0	0	1
317 (E)	139	585	23.76%	4.9	0	1
226 (E)	0	916	0.00%	3.0	0	1

Category Score: 91.50%

Predicted Score: 91.50%

Base Points: 43, Bonus Points: 0, Total Points: 43

Reporting Method Compare

CMS views Quality measures reported via different reporting methods (e.g. Quality ID #1 reported from a registry vs. an EHR) as entirely different measures. Measures with the same Quality ID reported via different reporting methods may have different benchmarks, measure specifications, and patient populations. The information below is only predictive of your performance for a given reporting method insofar as the effects of the specification and population differences have a minimal impact on the measure performance. The reporting method comparisons below are not applicable as part of your MIPScast™ score prediction and are for your information only.

Advancing Care Information

This performance category replaces the Medicare EHR Incentive Program for eligible professionals, also known as Meaningful Use. The category is weighted at 25% of the final score. The total points available in this category exceed 100, but any score above 100% will be capped at 100%. The score is comprised of a Base Score, Performance Points, and Bonus Points. All required measures must be completed in order to earn the Base Score. If not completed, a score of 0 will be earned.

Practice/Clinician is eligible to have ACI category reweighted to 0%

Security Risk Analysis* BONUS POINTS: 10

Report certain improvement Activities using CEHRT

Immunization Registry Reporting PERFORMANCE POINTS: 15

Syndromic Surveillance Reporting BONUS POINTS: \$

Electronic Case Reporting

Public Health Registry Reporting

Clinical Data Registry Reporting

Measure totals for Benedict Go clinician

Measure	Numerator	Denominator	%	Performance Points
e-Prescribing*	5	99	5.05	N/A
Send a Summary of Care*	2	99	2.02	1

Cost

The Cost category is weighted 10% in 2018 and is scored based on two measures: Per Capita Costs for all Attributed Beneficiaries and Per Capita Costs for Medicare Spending per Beneficiary. Enter your most recent data below (from either your most recent MIPS results or your most recent QRR) and MIPScast™ will score that data against the most recent national benchmarks (using mean and standard deviation). If you do not meet the minimum case requirement for one of the measures, your score will be based completely on the remaining measure. If neither measure meets the minimum, the category will be re-weighted.

Category Score: 53.00%

Predicted Score: 5.3 / 10

Measure	Min Cases	Eligible Cases	Per Capita Costs	Measure Benchmark (2016 Mean)	Standard Deviation	Decile Points
Per Capita Costs for All Attributed Beneficiaries	20	20	12000	\$12,380.00	\$3,631.00	6.4
Per Capita Costs for Medicare Spending per Beneficiary	35	35	21000	\$20,411.00	\$1,220.00	4.2

Contact Us

The Quality Payment Program Resource Center® provides free help to eligible clinicians in small practices as they navigate participation in the QPP.

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