



PUTTING THE PIECES TOGETHER PRACTICAL SOLUTIONS FOR THE GI PRACTICE



Quality Payment Program 2017 Participation Pick Your Pace

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| 1) Test the Program | <ul style="list-style-type: none">◆ Report on a single MIPS category:<ul style="list-style-type: none">◇ One Quality Measure◇ One Improvement Activity Measure◇ Four Advancing Care Information Measures◆ No bonus, however also no penalty |
| 2) Report for 90 Days | <ul style="list-style-type: none">◆ Report on a single MIPS category or all three categories:<ul style="list-style-type: none">◇ Six Quality Measures◇ Four Improvement Activity Measures◇ Five Advancing Care Information Measures◆ No penalty, however also the possibility of a slight bonus◆ Must report on all measures for minimum of 90 days◆ If all measures are reported on for 90 days |
| 3) Report for Full Year | <ul style="list-style-type: none">◆ Report on all three MIPS categories:<ul style="list-style-type: none">◇ Six Quality Measures◇ Four Improvement Activity Measures◇ Five Advancing Care Information Measures◆ No penalty, possibility of highest bonus |
| 4) Participate in an APM | <ul style="list-style-type: none">◆ Exempt from MIPS◆ Receive 5% incentive bonus◆ No currently approved gastroenterology specific APMs |

MIPS applies to all eligible clinicians with 3 exceptions: 1) those newly enrolled in Medicare; 2) those with \leq \$30,000 in Medicare charges and \leq 100 Part B enrolled Medicare patients; and 3) those significantly participating in an Advanced Alternative Payment Model (APM). MIPS eligible clinicians include: physicians, nurse practitioners, physician assistants, clinical nurse specialists, and certified registered nurse anesthetists. MIPS does not apply to facility payments.