

Quality Payment PROGRAM

USER GROUP ON VIRTUAL GROUPS

AUGUST 18, 2017



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Proposed Rule for Year 2

MIPS: Virtual Groups

- Definition of a Virtual Group:
 - A combination of two or more Taxpayer Identification Numbers (TINs) composed of a solo practitioner (individual MIPS eligible clinician who bills under a TIN with no other NPIs billing under such TIN), **or**
 - A group with 10 or fewer eligible clinicians under the TIN that elects to form a virtual group with at least one other such solo practitioner or group for a **performance period for a year**.
- All MIPS eligible clinicians within a TIN must participate in the virtual group.
- Virtual groups must elect to participate in MIPS as a virtual group prior to the beginning of the performance period and such election cannot be changed once the performance period starts.
- If TIN/NPIs move to an APM, we propose to use waiver authority to use the APM score over the virtual group score.

Proposed Rule for Year 2

MIPS: Virtual Groups

- Generally, policies that apply to groups would apply to virtual groups with a few exceptions for the definitions of:
 - Non-patient facing MIPS eligible clinician
 - Small practice
 - Rural area
 - Health Professional Shortage Area (HPSA) designations.
- Virtual groups use same submission mechanisms as groups.
- Virtual groups may determine their own composition without restrictions based on geographic area or specialty.
- Initially, there will be no restriction on overall virtual group size.
- CMS will define a “Model Agreement” and will provide a template through additional communication guidance for virtual groups that choose to use it.

What Might the Composition of a Virtual Group Look Like?

- Several rules would apply to those forming a virtual group:
 - Eligible clinicians can only participate in one virtual group in a given performance period.
 - The decision to participate in a virtual group must occur prior to the performance period and may not change during the performance period.
 - A virtual group must be comprised of a combination of two or more groups or solo practitioners.
 - If a group elects to join a virtual group, all eligible clinicians must be included in the virtual group and the group size (of 10 or fewer) would be determined prior to the performance period, as part of the virtual group election process.
 - Initially, there will be no limits on the number of groups and eligible clinicians that can join a virtual group.

- CMS proposes a two-stage virtual group election process:
 - **Stage 1 (optional):** Solo practitioners or groups with 10 or fewer clinicians may contact their designated Technical Assistance representative or the Quality Payment Program Service Center to determine eligibility before executing formal written agreements, submitting a formal election registration, and allocating resources for implementation.
 - **Stage 2:** For groups that do not choose to participate in Stage 1 of the election process, we will make an eligibility determination during Stage 2 pertaining to virtual group formation.
 - TINs comprising a virtual group must establish a written formal agreement between each member.
 - Official virtual group representative must submit a virtual group election by December 1, 2017 prior to the performance period to the Quality Payment Program Service Center at MIPS_VirtualGroups@cms.hhs.gov.

- For 2018 and 2019, CMS will use an election process through MIPS_VirtualGroups@cms.hhs.gov.
- For Quality Payment Program Year 3, we hope to offer an electronic election process.
- Election Process assistance will be available through our Technical Assistance representatives and the Quality Payment Program Service Center.
- Due to the short timeframe between the publication of the final rule and the start of the 2018 MIPS performance period, CMS will allow virtual groups to make an election between mid-September/mid-**October and December 1, 2017**.
- Note that the proposed policies at the time of election could change once the final rule is published.

Virtual Group Agreements

Sample Template



- See an Agreement Template on the right of this slide.
- A virtual group must establish a written formal agreement between each member of a virtual group prior to an election that is submitted by the official designated virtual group representative by December 1.
- CMS will provide further guidance prior to the election process.

Virtual Group Agreement Template

Sample Introductory Paragraph:

This Virtual Group Agreement ("Agreement") is by and between Virtual Group Identifier provided by the Centers for Medicare & Medicaid Services, and XYZ Group Practice P.C. ("virtual group member") and is effective [Month, Day, Year] ("Effective Date").

<Body of Agreement>

Sample Signature Page:

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by the duly authorized representatives as of the dates below.

Virtual Group Member/National Provider Identifier

Signature

Virtual Group Member/National Provider Identifier

Signature

Virtual Group Member/National Provider Identifier

Signature

Virtual Group Member/National Provider Identifier

Signature

Virtual Group Agreements

Agreement Checklist



- Individual clinicians and groups who choose to form a virtual group to participate in MIPS are required to develop a formal written agreement.
- This agreement must be completed by each virtual group member, and executed for at least one performance period.
- Note: If an NPI joins or leaves the TIN, or a change is made to the TIN that affects the agreement itself (e.g., a legal business name change), during the applicable performance year, a virtual group would need to update the agreement and submit the changes to the Quality Payment Program Service Center.

Virtual Group Agreements

Agreement Checklist



The formal written agreement must:

- Expressly state the only parties to the agreement are the TINs and NPIs of the virtual group.
 - The agreement may not be between a virtual group and another entity, and virtual groups should not use existing contracts between TINs that include third parties.
- Be executed on behalf of the TINs and the NPIs by individuals who are authorized to bind the TINs and the NPIs.
- Expressly require each member of the virtual group (including each NPI under each TIN) to agree to participate in MIPS as a virtual group and comply with the requirements of the MIPS and all other applicable laws and regulations.
- Require each TIN within a virtual group to notify all NPIs associated with the TIN of their participation in the MIPS as a virtual group.

Virtual Group Agreements

Agreement Checklist



- State the NPI's rights and obligations in, and representation by, the virtual group, including without limitation, the reporting requirements and how participation in MIPS as a virtual group affects the ability of the NPI to participate in MIPS outside of the virtual group.
- Describe how the opportunity to receive payment adjustments will encourage each member of the virtual group (including each NPI under each TIN) to adhere to quality assurance and improvement.
- Require each member of the virtual group to update its Medicare enrollment information, including the addition and deletion of NPIs billing through a TIN that is part of a virtual group, on a timely basis in accordance with Medicare program requirements and to notify the virtual group of any such changes within 30 days after the change.
- Require completion of a close-out process upon termination or expiration of the agreement that requires the TIN (group part of the virtual group) or NPI (solo practitioner part of the virtual group) to furnish all data necessary in order for the virtual group to aggregate its data across the virtual group.

Feedback Opportunity



- CMS will now accept your feedback on:
 - Proposal for the definition of a virtual group
 - Policies
 - Submission methods
 - Agreement checklist
 - Election process

Proposed Rule: Comments Due 8/21/2017



- See the proposed rule for information on submitting these comments by the close of the 60-day comment period on **August 21, 2017**. When commenting **refer to file code CMS 5522-P**.
- Instructions for submitting comments can be found in the proposed rule; FAX transmissions will not be accepted. You must officially submit your comments in one of the following ways: electronically through
 - Regulations.gov
 - by regular mail
 - by express or overnight mail
 - by hand or courier
- For additional information, please go to: qpp.cms.gov

