

Are You Ready?

Take the MIPS Quiz

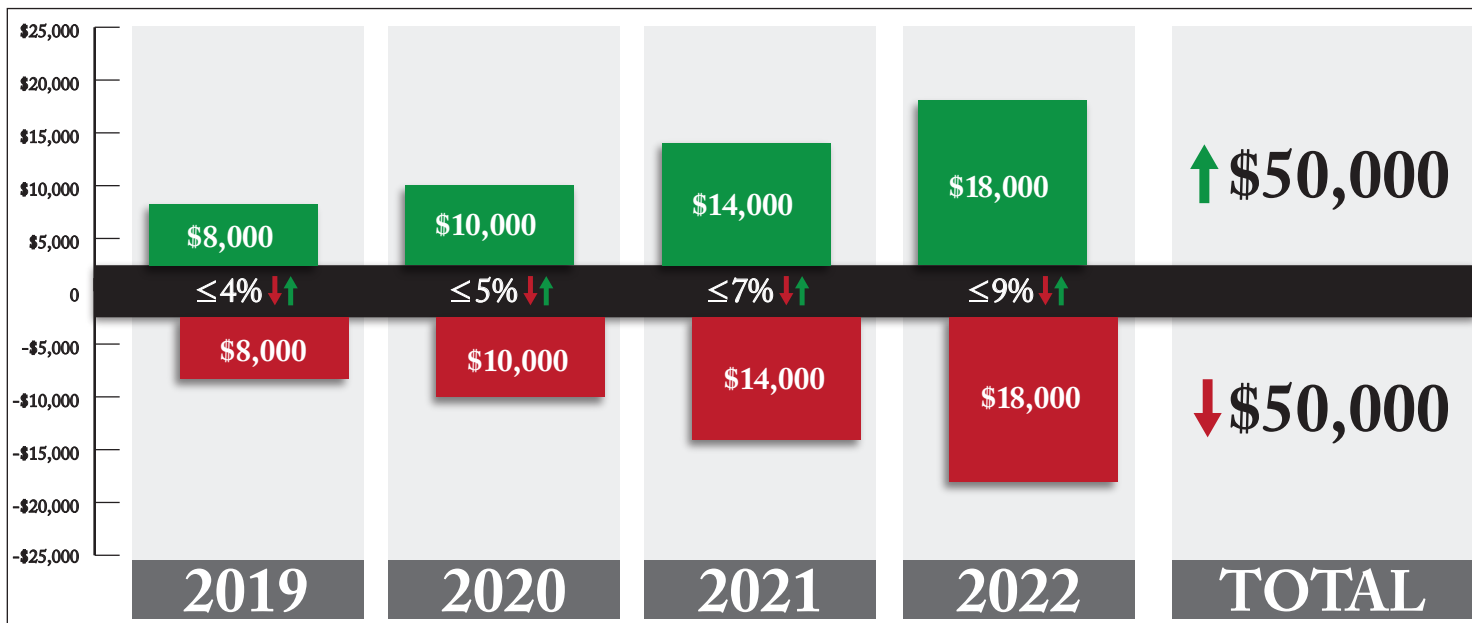
Can you meet the following MIPS-related requirements?

1. Are you participating in a health information exchange?
2. Do you know who your high risk and rising risk patients are?
3. Are you gathering data from all of your patient's providers to improve your quality scores?
4. Do you know your patient's emergency department utilization?
5. Do you have strategies in place to reduce healthcare utilization for your patients?

YES	NO

Consider This:

Based upon the new Merit-based Incentive Payment System (MIPS), there is revenue to be gained or revenue at risk based upon how you perform. If, for example, you receive **\$200,000** in Medicare Reimbursement annually, the financial impact according to the MIPS schedule is as follows the first year:



MIPs is the new proposed payment program from CMS designed to streamline three already existing independent programs (quality, resource use and improvement activities) and combine them with a fourth program to promote improvement and innovation of clinical activities (Advancing Care Information). Clinicians have the flexibility to choose the activities and measures that are most meaningful to their practice and then demonstrate performance. Year one Composite Performance Score category weighting: Quality 50%, Advancing Care Information 25%, Improvement Activities 15% and Cost 10%.

CTHealthLink Can Help You Prepare!

CTHealthLink Can Help You Prepare for MIPS

2018

Quality Dashboards Quality = 50% of MIPS Score

Sample Measures

- Influenza Immunization
- Pneumococcal Vaccination
- Osteoporosis Screening
- Breast Cancer Screening
- Diabetes A1c > 9
- Colorectal Cancer Screening
- Cervical Cancer Screening



Advancing Care Information = 25% of MIPS Score

- Secure Clinical Messaging/DIRECT
- HIE Longitudinal Patient View
 - Within EHR
 - Web-based Access
- ONC Certified Personal Health Record
 - View Download & Transmit (VDT)
 - Patient Education
 - Secure Messaging
- Public Health Interfaces
 - Immunizations
 - Syndromic Surveillance
 - Diabetes Clinical Data Registry

Improvement Activities = 15% of MIPS Score

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| <p>Connect (HIE)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Participate in HIE <input checked="" type="checkbox"/> Participate in Research | <p>Analyze (Dashboards)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Regular Reviews of Targeted Patients <input checked="" type="checkbox"/> Empanel Patients for Providers <input checked="" type="checkbox"/> Proactively Manage Patient Care <input checked="" type="checkbox"/> Identify High Risk Patients <input checked="" type="checkbox"/> Improve Health Status of Communities <input checked="" type="checkbox"/> Measure and Improve Quality | <p>Engage (PHR)</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Patient Portal <input checked="" type="checkbox"/> Patient Education Materials |
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Cost = 10% of MIPS Score

HIE Access / Use of the Longitudinal Patient Record: Reduces duplicative services, helps to eliminate delays in the care process and facilitates patient safety for overall cost reduction.