

Merit-based Incentive Payment System

Small to mid-sized practice



Specialty practice achieves exceptional performer status in a MIPS submission – a perfect 100

The administrative burden on a specialty practice can be daunting when managing a Merit-based Incentive Payment System (MIPS) submission process under the Quality Payment Program (QPP). Practices can place themselves at serious financial risk if they choose not to participate (and receive a negative payment adjustment) or do poorly on the performance measures.

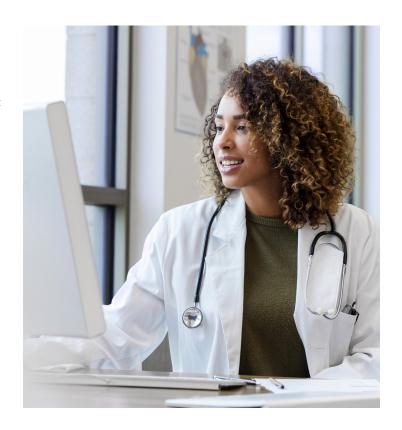
A specialty practice in the Midwest was able to achieve a composite performance score of 100 in their first year of submitting measures, well above the composite score of 70 or higher, to receive the status of exceptional performer and a perfect score in the MIPS submission process.

The challenge

A smaller to mid-sized specialty practice needed to ensure they would receive the best possible reimbursement percentage under the QPP. With more than half of their patient base on Medicare and a handful of eligible clinicians who would participate in a MIPS submission, the positive adjustment would make a significant difference to their practice. As the administrator noted, "When the bottom line affects the providers' paychecks, they will own this process."

With the help of consultants from the Quality Reporting Engagement Group, the practice constantly evaluated their processes for reporting. In the first year of performance measures, the practice and its eligible clinicians received a score of 100, a perfect score.

In the past, the practice administrator spent Friday afternoons looking at claims and denials, trying to get the best return on their billings. That routine became impossible as further government regulations and additional work for the payers took more time. The practice knew they needed help. They turned to the Quality Reporting Engagement Group to help with the attestations and submissions for their MIPS performance.



The solution

The practice administrator found less time to keep up with the government reporting regulations as the daily needs of the practice had to take priority. As the practice had been using various services provided by IntrinsiQ Specialty Solutions for nearly a decade, the administrator reached out to the team of experts for help.

The Quality Reporting Engagement Group has a multi-layered process and assigns a team of consultants to investigate a practice's electronic health record (EHR) and generate reporting data. "We place the data into a proprietary spreadsheet to calculate values into the decile level," mentioned a consultant on the team. "Data is analyzed as if it were to be submitted that day. The process allows for the team to understand where there may be opportunities to improve processes within the practice and generate reports supporting their conclusions."

The results

The practice administrator receives reports monthly – although some practices prefer to use just a quarterly composite score report. A monthly meeting with the practice administrator and the eligible clinicians helps reveal the positive results as well as the opportunities for improvement. Typically reports generate questions from the practice and a consultant works with the practice administrator to resolve any issues.

The practice administrator was thrilled with their results – the perfect 100 score. "The physicians and clinicians worked hard and owned the process. Yet we discussed this so often that there was no undue pressure on any of the providers. The entire process just became routine."

With their positive performance, the practice plans to continue enlisting the help of the Quality Reporting Engagement Group, especially as measures and performance goals change year after year. "As soon as we finish one year, we as a team will go over the results and begin working on the following year," said the practice administrator.

Benefits of using the Quality Reporting Engagement Group

- Practices work with a professional team of consultants who have decades of experience working on government reporting like attestations and submissions for Meaningful Use, Physician Quality Reporting System, and MIPS.
- With this particular practice, the Quality Reporting Engagement Group compiled a Book of Evidence with all the data and submission records, in case the practice is audited.
- The Quality Reporting Engagement Group continually monitors changes in the reporting regulations considered by CMS and prepares practices to meet those measures.
- In 2018, 99.8 percent of the eligible clinicians helped by the team were "exceptional performers."

Successes and qualifications of the Quality Reporting Engagement Group

- More than 30 years of combined industry experience on the team
- Two HIPAA compliance officers, certification in QRUR and a MACRA-certified project manager
- More than 125 successful CMS audits conducted, with 100% success rate
- More than 8,000 successful MU/PI attestations completed
- More than 6,000 successful Quality submissions
- Client retention rate of more than 92%

NOTE: Exceptional performers are those who receive 70 or more points in MIPS reporting; making them eligible for an additional bonus pool of \$500M for all clinicians who are in this category.



A small to mid-sized specialty practice in the Midwest with several locations with a few eligible clinicians needing to report under the MIPS payment model.



Patient demographics are approximately: 55% Medicare, 30% commercial payer and the balance under some sort of public aid.



This practice received a perfect score – 100 points – in this MIPS performance year.

Conclusion

Specialty practices have many external pressures on them to try to remain financially viable. With more private payers requiring more information and CMS establishing the QPP, practices can be overwhelmed with processes and the accurate recording of those processes. Without the resources of an associate dedicated to continuous improvement in quality and cost containment, practices may place themselves at financial risk – especially as their government reimbursements drop.

It is a partnership with a dedicated team of experts, who are on call, where practices can benefit in this era of healthcare transformation. The Quality Reporting Engagement Group is prepared to assist practices with value-based care needs and help avoid costly missteps that your practice may encounter when trying to meet these demands.

Our Quality Reporting Engagement Group can assist your practice with your reporting requirements and value-based care needs.

For more information, email us at sales@intrinsiq.com or call 877.570.8721, x2.



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