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- April Faulkner: The Quality Insights QPP Support Center team welcomes you to today's webinar, December 31 Deadlines: Learn How to File a Hardship Exception and More. My name is April Faulkner and I will be your host for this event. I'd like to take a moment to review a few items before we begin the presentation. All participants entered today's event in a listen only mode. Should you have a question during today's presentation, please type it into the Q&A box at the bottom right of your screen. We will address questions at the end of the presentation as time permits. If we do not have time to answer every question, we will provide a follow-up Q&A document to all attendees with the information.
- April Faulkner: Today's webinar is being recorded. The recording along with the slide deck and a transcript of the webinar will be posted on the Quality Insights QPP Support Center website within the next few days. These resources can be found on the archived events page. I will post the link to that webpage in the chat box momentarily. At this time, I would like to introduce our presenters. Joining us today to talk about filing exceptions are two members of the Quality Insights QPP Support Center team, Amy Weiser and Joe Pinto. I will turn the presentation over to them to get us started.
- Amy Weiser: Good afternoon everyone. It's so nice to have you with us today. Next slide please. And the next slide please. Okay, great. Thank you, April. Today we have some learning objectives listed here for you. We're going to identify the December 31st deadline requirements, review the two different hardship exception applications and demonstrate how to submit them, review how to obtain the 2015 certified EHR certification ID and review the QPP portal login access.
- Amy Weiser: Next slide. So here are some really important timeline, deadline information listed for you here. December 31st of course, is coming right up. It is the end of the performance period for 2019. January 2nd of 2020 is the first day that you can submit data for your 2019 reporting period and March 31st, 2020 is the last day of the submission period, for the 2019 reporting period. July, 2020 the preliminary 2019 feedback report should be available to you. October 1st, 2020 is the last day to request a targeted review and then late in October of 2020, you should expect to see the final 2019 feedback reports and then calendar year 2021, MIPS payment adjustments are applied to the Medicare Part B claims based on the 2019 final MIPS score.
- Amy Weiser: Next slide. All right, so for the December 31st deadlines, next slide. You can submit an application for the promoting interoperability hardship exception, if it applies to you. You can submit an application for the extreme and uncontrollable circumstances exception, if it applies to you. You can submit an application for the 2020 virtual group application. If you're interested in joining

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a virtual group, you have to apply for that the year prior to your reporting year. So for 2020, you have until December 31st to apply for a virtual group application. You also need to complete a security risk analysis, if you're reporting the promoting interoperability category, the deadline again is the 31st for that, and ensure that you have the 2015 edition of your EHR is certified by the 31st if you're reporting the promoting interoperability category.

Amy Weiser: Next slide, please. All right, so we're going to talk about the automatic exceptions. Next slide. So there are some exceptions to the MIPS requirements. CMS created exceptions in meeting some MIPS requirements to reduce clinician burden for specific circumstances, and some exceptions are applied automatically. However, others require that an application be submitted prior to the deadline.

Amy Weiser: Next slide. So this slide talks about the automatic exceptions to reporting the promoting interoperability category. And if you're not familiar with what the promoting interoperability category is, again, that is the information that you pull from your certified EHR technology. So for automatic exceptions, certified 2015 edition EHR technology is required for participating in the promoting interoperability category for 2019. Promoting interoperability measures do not have to be reported by some clinician types that CMS designates as new EHR users and the promoting interoperability category will automatically be reweighted to zero for the following clinicians in 2019 unless promoting interoperability data is reported. So you can see on the on the right hand side in the green box, there is a list of those clinicians who will automatically not be required to report promoting interoperability. And that 25 points from promoting interoperability is related to quality for the list of clinicians in the green box. So for example, your hospital based clinicians, physician assistants, nurse practitioners, physical therapists, occupational therapists, registered dietitians.

Amy Weiser: Next slide. So there's automatic exception to reporting for other categories as well. So clinicians in the CMS designated region affected by a FEMA-designated major disaster such as a hurricane or fire, will automatically be excluded from all four performance categories with the automatic extreme and uncontrollable circumstances policy. In that case, CMS will automatically weight the categories to zero and assign a MIPS score of 30 points, which results in a neutral payment adjustment.

Amy Weiser: Next slide. So there are non-automatic exceptions. So we're going to do a little deeper dive into these two. So there's two exception applications that must be submitted by December 31st of 2019 if it applies to you. So the first one is the promoting interoperability hardship exception, which I'm going to explain a little

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more to you and then the extreme and uncontrollable circumstances exception, which Joe will be explaining a little bit more in detail to you as well.

Amy Weiser: Next slide. So why should you request a promoting interoperability hardship exception? In a nutshell, it's really a win-win for you, and I'm going to explain a little bit more. The promoting interoperability category measures do not need to be reported, which is beneficial if you have a low promoting interoperability category score. So if you're not scoring very well, you definitely want to think about filing for an exception. The promoting interoperability category weight will be reduced to zero and the 25 points will be reallocated or reweighted to the quality category. So you can see the example below. Quality then becomes worth 70 points. So without having promoting interoperability reweighted, quality would be 45 points. You add the 25 points from the promoting interoperability reweight and you get 70 points. Then you add to your improvement activities, which are worth 15 points. And just a little note, if you are wanting more information about improvement activities, we're happy to help you with that.

Amy Weiser: But that's one of the really easiest ways to earn points. And then in the MIPS program, and then you have costs where it's worth 15 points and this is something that CMS automatically calculates for you. You do not submit information to CMS for costs and then you have a total MIPS score of a hundred possible points. So instead of reporting on quality promoting interoperability and improvement activities, and then CMS calculating your cost, it kind of reduces your burden to have their reweighting to the quality at 70 points.

Amy Weiser: Just a note that lacking certified EHR technology does not qualify for reweighting in itself. The clinicians in small practices and when we talk about small practices, we're talking about practices that have 15 or fewer clinicians who don't have any HR, can apply for this exception. So not having certified EHR does not automatically give you a hardship exception.

Amy Weiser: Next slide. So who can request a promoting inter-operability hardship exception? Clinicians and groups can't submit a promoting interoperability hardship exception application citing one of the following specified reasons. The first reason, you work in a small practice, again, 15 or fewer clinicians or in your practice. You have decertified electronic health record EHR technology. You have insufficient internet connectivity. You face extreme and uncontrollable circumstances such as a disaster, practice closure, severe financial distress or vendor issues such as a change in vendors during the performance period or errors with your certified EHR technology that your vendor cannot address and resolve, or you lack control over the availability of certified electronic health record technology.

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- Amy Weiser: Next slide. So here's a little bit more about the details. Supporting documentation is not submitted with the application. However it should be retained for a future possible audit or data validation request. Again, you should always keep your documentation for a minimum of six years when you are submitting information to the quality payment program. CMS notifies clinicians via email, usually within an hour if the request is approved or denied. So what we've been seeing with helping practices submit their applications is a very, very fast response from CMS. If approved, the notation will be added to your eligibility profile in the quality payment program participation status look up tool when the submission window opens on January 2nd, 2020. Please note that promoting interoperability measures can be reported after a hardship application has been approved, but the data will be scored and the promoting interoperability category weight will return to 25%. So this is that win-win that I mentioned earlier. Even if you submit an application for a hardship exception for promoting interoperability and you change your mind and you want to submit that data, you can do that.
- Amy Weiser: So just having the application approved does not mean that you cannot submit the data. However, if you do submit data for the promoting interoperability category, even with the hardship exception application approval, they will score you. So that weight of 25% will return to the promoting interoperability category. Next slide. Okay, right now I'm going to give you a little demonstration on how easy the application is for you to go through. So April, if you could make me the presenter. Okay, so this is... Can everybody hear... April can you hear me?
- April Faulkner: Yes, you sound fine. On your screen, we can see the QPP website.
- Amy Weiser: Thank you. So everybody, this is the homepage basically of the quality payment program. So I'm going to just show you how easy it is to find the promoting interoperability hardship exception. So you click under the MIPS tab here at the top and you go all the way down to underneath it says reporting factors overview, special statuses, and then the exception applications.
- Amy Weiser: And you click on that and then it takes you through some explanation about the quality payment program exceptions. And the first one that you see, first of all, you'll want to make sure that you have clicked on promoting interoperability or excuse me, promoting interoperability hardship exception, but you want to be in program year 2019 here. And then you just continue to scroll down the page a little bit and then you'll see the PII hardship exception application window is now open and you click on the button that says apply.
- Amy Weiser: Okay. Now there's different ways that you can submit an application. You can submit an application. If you click on the dropdown, the first dropdown that you
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see, you can submit as an individual, as a group or a virtual group. Again, a group is at least two clinicians in the practice, so you just click on that. And so for the sake of the demonstration, I'm going to click on individual and then it brings up the rest of the application. Also at the top of the application, you can see the different reasons why you might want to consider or the reasons why you would be accepted, excuse me, for submitting the promoting interoperability hardship exception application.

Amy Weiser: So you literally just follow the steps in the application, submitting the the NPI number of the clinician if it's an individual, their first name, their last name, the group practice name and then you just continue to go down and then the clinician themselves does not need to submit this, someone can submit on their behalf. So it does allow for that and everything in the blue box is kind of explained, what is required moving in to that area of the application.

Amy Weiser: As you get down into the section two, it talks about the circumstances of the hardship and it gives you all of the options as mentioned above in the top of the application for example. Unless you're submitting only because you're a small practice, almost all of these require some type of explanation and they will ask you for that and you will type it in once you select it. Some of them ask in this case for the extreme and uncontrollable circumstances for promoting interoperability hardship, it does ask for if it's a disaster, for example, it asks for the start date and the end date. If there's a practice or hospital closure, again, it asks for dates and those kinds of things, and you also need to check the box. But most practices are really just going on the notion and the fact, I should say, that they are a small practice.

Amy Weiser: And so you would just click on the small practice, make a check mark there, and then you would go down and attest that you understand the notice and you would certify that and it gives you the date. And then you would type your name here and then you just go down and click the green submit button. And that's all that you have to do. You will, like I said, within an hour, receive notification from CMS that you've been approved or denied of that application. So April I'll have you go ahead and take the ball back.

Joe Pinto: Okay, so now the next application that we're going to discuss is the extreme and uncontrollable circumstances exception. And that is the second of the two applications available. Next slide. So what is an extreme and uncontrollable circumstances exception? Well, CMS does define extreme and uncontrollable circumstances as rare events entirely outside of your practices control that prevents you from either being able to collect or to submit data for one or more niche categories for an extended period of time. CMS also will review both the event and the timing of the circumstances to assess a clinician's ability to submit data for each category. Keeping in mind that since the performance period for

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the quality category for 2019 is a full calendar year, that's a full 12 months, but only three months is required for both the promoting interoperability and improvement activities categories. Then the quality category will be impacted more when the event lasts for a longer period of time. But anyone impacted by extreme and uncontrollable circumstances may submit an application.

Joe Pinto: Next slide. So if you do submit the application, once you are approved, the CMS will reweight the impacted category or categories, if you do submit for more than one, to a total score of zero. A clinician or group can then report data after an application is approved, as Andy said earlier. But keep in mind that if data is submitted for two or more categories, then it then it will be scored and that will thus negate the exception. Now if you want some more information to category weights that will be applied based on the way the program works on table 54, you can find that in the 2019 final rule that was published earlier this year.

Joe Pinto: Also there is no requirement to submit supporting documentation with the application, you're just filling out the application online as Amy had reviewed just previously, but it should be saved in the event that CMS does select you for an audit or a data validation in the future and that's because in order to be in accordance with the False Claims Act, you should keep all documentation for up to six years as Amy indicated, as CMS may request any records or data retained for mixed purposes for up to six years. Now this process was finalized in the calendar year 2019 quality payment program final rule and the documentation is for all of the MIPS performance categories excluding the cost category since no data is submitted for the MIPS cost category.

Joe Pinto: Next slide. So next we're going to take a look at the actual demonstration of the extreme and uncontrollable circumstances application. I'm going to share my screen with you and I'm basically going to pick up where Amy left off with her demonstration review. Further down on that page where you first selected the hardship exception for the promoting interoperability category, you'll find the next hardship exception, which is the extreme and uncontrollable circumstances exception. Make sure before you click on apply, that the tab for program year 2019 is highlighted. So you're applying for the calendar year that you are submitting your and reporting your data for. Check on the apply box and then you'll see that in the demo here on your screen that the application form is very similar to the one that Amy just reviewed. Just a couple of different questions that are going to show up in this one.

Joe Pinto: First off, right off the top, you're going to see whether the application is for the individual group or virtual group. I'm going to check on individuals since Amy reviewed the group option. Okay, so once you click on that, you're going to see the dropdown boxes. The ones that are highlighted with the red asterisks are required to be completed, so you need to fill out the clinician NPI number. Next

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down is the clinician's first name, then last name, and then also the group practice name, if it's not listed, you would just click on that and enter the group PIN number, that's very important, that will be required.

Joe Pinto: Next now, you're going to see the submitter third party intermediary information. As Amy had mentioned in her demonstration, it is not required that the individual clinicians fill out the application for submission. Very commonly a practice manager or an assigned third party intermediary will be doing that on the clinician's behalf so that information will be completed in this section. The first name, last name, and also the email address is required so that CMS knows how to communicate with your practice and the individual who submitted the application.

Joe Pinto: Down at the bottom, you're going to see submitted third party intermediary relationship. You're going to need to select which of the third party intermediary relationships you are to that clinician, whether you are a consultant, physician staff, vendor or other, and you're required to collect that. Then check the box I certify that I'm authorized by the clinician or group identified above to submit and follow the steps below. Now this application is a little bit different than the first one there are because of the extreme and uncontrollable circumstances. If you check the box for the event, you're going to need to enter the start date and end date of the event that you are applying on behalf of.

Joe Pinto: And then as Amy indicated in her application demo, you do need to give a little bit of a description explaining the pertinent details as to why you are actually submitting an application for this particular hardship exception. Further down, you're going to see the performance categories. You need to select all that apply for the reweightings. So if you're looking to have your promoting interoperability reweighted, you need to select that box.

Joe Pinto: Then down at the bottom you're going to see the certification statement for QPP application. It's just a general notice that Amy also alluded to. Once you read through that, you must click the box or certify. It should auto-populate today's date, but if not, make sure that the date is entered into the box and it needs to be prior to the first of the year. So it needs to be no later than 12/31/2019 in the date box and then the name of the individual completing the form. And that's pretty much it with that application.

Joe Pinto: Next up, we're going to talk about reporting as a virtual group for 2020 and that's also very important because if you do decide to report as a virtual group, you do need to submit that application before the end of this year. So 12/31 of 2019 is the deadline if you intend to submit or participate as part of a virtual group for calendar year 2020.

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- Joe Pinto: Next slide. So the virtual group application is also available for solo practitioners and groups with 10 or fewer clinicians, and that would include that at least one of those clinicians is a MIPS eligible clinician. They can submit a request to participate in MIPS for 2020 as a virtual group. The submission of the application confirms the decision to report as a virtual group and once you submit that application, it cannot be changed. So just keep that in mind. If you do plan on participating as a virtual group for 2020, once that application is submitted, you cannot go back. You will be reporting as part of a virtual group next year. We've included the hyperlink in your handouts. If you click on that, it will take you directly to the 2020 virtual group application.
- Joe Pinto: Next slide. Also, I want to bring your attention to some reporters under the promoting interoperability category. One thing that you need to keep in mind. I know that Amy had already alluded to that. Next slide please, is the importance of the security risk analysis. Now for 2019 beginning for this calendar year reporting year, although a security risk analysis is no longer a standalone promoting interoperability measure, it still must be completed in order to earn any points in the promoting interoperability category. Your security risk analysis must be completed when 2015 edition of certified EHR technology is implemented or upon installation or upgrade to a new system. And the SRA, your security risk analysis can be conducted outside of the performance period. However, it must be completed and dated no later than December 31st. So make sure if you haven't already done so, you have about two weeks left if you are not applying for any of the hardships and do plan on submitting data for the promoting interoperability category, that you have your security risk analysis updated.
- Joe Pinto: Next slide. So next up is the 2015 edition certified EHR technology and it's very important beginning in 2019 for the MIPS reporting year, our clinicians and must utilize 2015 edition of certified EHR technology for the full 90 day performance period in 2019, in order to report data for the promoting interoperability category. Now the 2015 edition functionality had to be in place by the first day of the performance period, which... And we'll use as an example, if you are going to submit your data for the final 90 days of the year, then October 3rd would be the last possible day to have functionality installed for a reporting period that would consist of October 3rd through December 31st.
- Joe Pinto: Now, functionality and certification are two different things. The EHR must also be certified by the last day of the performance period. So in this case using that example, your EHR would have to have been certified no later than 12/31 of 2019, which is the last possible date will reporting period for the 2019 period. So please check with your EHR vendor on this if you're unsure and then we're going to take a look at how you can go about obtaining your EHR certification ID number.
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- Joe Pinto: Next slide. So how do you do that? Well, as I mentioned earlier, in 2019 beginning with this year, everyone must submit an EHR certification ID in order to verify that 2015 edition functionality was used for the entire performance period. Now you can ask your vendor as I mentioned, for the certification number or you can just go ahead and visit the [ONC certified health IT product lists](#). We commonly refer to that as Chapel and that website is listed at the link that is provided in your handouts. You can click on that and it will take you directly to that website where you can find your EHR certification ID.
- Joe Pinto: Next slide. Also, in order to locate that ID, quality insights has developed a handy little resource tool to help you out. It's called Find Your CMS Certified EHR ID for 2019 MIPS. If you click on the link in the slide deck handouts that were provided to you, we'll take you to that handy little guide and it will walk you through the process to show you exactly where on the Chapel website for certified health IT product lists, you can obtain your EHR certified EHR technology ID.
- Joe Pinto: Next slide. Also want to make a note here. Very important that you ensure your QPP Portal Access now. That is very, very critical. Next slide, and the reason for that is you must reset your QPP portal password every 60 days because it does expire. In order to change your password, all you have to do is to visit the QPP website @ [qpp.cms.gov](http://qpp.cms.gov), then follow the steps from the "My Profile" list to go to edit and then change the password. Very simple to do. The passwords must have a minimum of 12 characters and that would include an uppercase letter, a lowercase letter, a number of zero to nine, and then any of the available symbols that are approved for the password. Passwords cannot however, contain your user ID, first name, last name or include the following symbols which would be the comma, the greater than or lesser than symbol, as well as a plus sign. There is a challenge question that will also be used if you need to reset your password and the challenge answer, although it's not case-sensitive, it must be between four and 100 alphanumeric characters.
- Joe Pinto: Next slide. Also want to make a note here, very important that you update your PECOS and your NPPES for MIPS and that's because CMS draws all its information from the Medicare Provider Enrollment, Chain, and Ownership System, commonly referred to as PECOS and the National Plan and Provider Enumeration System known as the NPPES in order to supply participant's information for the quality payment program. You need to confirm your information as being both accurate in both of the systems as soon as possible, please don't wait. In fact, we strongly urge you to put a note in your calendar for September or October of each year so that you can go in there and make sure that all of your data for the clinicians and the group is accurate and up to date because you don't want to wait and then find out after January 2nd when the portal opens and you'd begin to submit, you're at a station and data submission

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and find out that there's an error or a problem because it may take some time in order for that to be corrected.

Joe Pinto: So please take a moment if you haven't already done so. Make sure that the information is accurate in both of these systems now and we've included the direct access to the PECOS and the NPPES websites at the links provided in your handouts and that would conclude the information there. I'll turn it back over to April for the question session.

April Faulkner: All right. Thanks so much Joe and Amy. At this time, we'll pause for just a moment for the Q&A portion of the session. If you do have any questions for our team, please type them in the Q&A box on the right of your screen and we'll answer those at this time. And since we're running out of time here, I am not seeing any questions coming in. What we'll do is go ahead and close out. Thank you very much for joining us today and just a quick reminder that when you do exit today's session, you'll be automatically directed to a very brief evaluation. Please take a moment to complete it. We greatly appreciate your feedback and your comments. Oh, I do see a question that came in and it's not too late. So a small practice which has an EHR can still file for a PI exception.

Amy Weiser: Hi April, yes, this is Amy. Yes, you can as a small practice. You still have time to file a hardship exception just because you are a small practice. You can do that by December 31st.

April Faulkner: Okay. Another question came in. Is there any negative repercussion for submitting a hardship exception?

Amy Weiser: I'm going to say there's no negative repercussion for submitting a hardship exception, in terms of promoting interoperability. Those points, the 25 points would be related to the quality category. So qualities would be instead of 45 points, quality then shifts to being worth 70 points. So there's no guarantee that by having a hardship exception application approved though, keeps you from getting a negative payment adjustment. I should just say that. However, if you are submitting all of the quality measures, you're submitting the improvement activities, CMS is calculating costs for you. The likelihood of you getting at least 30 points is very good. If you want more information, if you're not sure about things, please don't hesitate to reach out to us. We would be happy to help you and to talk to you about your individual or unique circumstance as well.

April Faulkner: Okay. I'm going to pause another moment just in case. Last call for questions and while you're typing those in, if you have any, just a reminder, the recording, the slide deck and the transcript of this webinar will be posted on the Quality Insights QPP Support Center website within the next few days. They will be placed on the archived events page, so that is on [QPPsupport.org](http://QPPsupport.org) and if you look

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at the events, there is a section underneath that menu in the top bar for archived events and that is where you'll be able to find all of this.

April Faulkner:

Okay. I don't see any other questions come in coming in. Okay, well we'll go ahead and close out. Thanks again everyone for joining us. Thank you, Joe. Thank you, Amy. I hope everyone has a great rest of the day. The session has now concluded.

