

Shanen Wright: (slide 1)

Hello and welcome to the January 2021 edition of QPPLive!, a presentation of Quality Insights Quality Payment Program Support Center. Happy New Year to all of you. We hope that 2021 is off to a good start for you and really appreciate your time joining us for today's session. If you're a returning audience member for QPPLive!, you know how the program works. You can start submitting your questions for our panel of experts at any time using the Q&A feature in your WebEx player. If this is your first time joining us for QPPLive!, welcome. We'll have instructions on how you can interact with us coming up.

Shanen Wright: (slide 2)

But first, it's my great pleasure to turn today's presentation over to Amy Weiser for today's breaking news and announcements. Amy?

Amy Weiser: (slide 3)

Thank you, Shanen. Welcome everyone. Thanks so much for joining us today. I'm going to start off with the 2019 performance payment adjustments. In August of 2020, each MIPS eligible clinician received a 2019 MIPS final score and associated payment adjustment factor. You can check this by logging into the QPP portal account on the Quality Payment Program website. The payment adjustments are now being applied to all 2021 payments made for Part B covered professional services payable under the physician fee schedule. And for more information, we've included the 2021 MIPS payment adjustment fact sheet for you.

Amy Weiser: (slide 4)

So here's an update on the 2% sequestration, which was suspended again through March. The CARES Act suspended the 2% payment adjustment applied to all Medicare Fee-For-Service claims from May 1st through December 31st, 2020. And the Consolidated Appropriations Act of 2021 was signed into law on December 27th and extended the suspension period to March 31st of 2021.

Amy Weiser: (slide 5)

I want to remind you about some really important dates and deadlines for the MIPS program. If you're not aware, January 4th of 2021 started the submission period for your 2021 MIPS reporting. February 1st is the deadline to submit COVID-19 related Extreme and Uncontrollable Circumstances Exception Application. And a reminder that any data submitted before or after an application has been approved will be scored. Data submission for any APM entity won't override performance category re-weighting from an approved application. And if you need any assistance with submitting this application, we are here to help you with that. So please reach out to us and we'll walk you through that process. March 1st, 2021 is the deadline for CMS to receive 2020 claims for the Quality category. Deadlines may vary, though, for the Medicare Assistance Contractors, or your MACs, to receive claims. And we've included links here for you for Novitas Solutions for Delaware, New Jersey, and Pennsylvania and Palmetto GBA for West Virginia. March 31st the deadline to submit 2020 MIPS data, at 8:00 PM Eastern Standard Time I believe.

Amy Weiser: (slide 6)

This next slide is to remind you about rechecking your 2020 MIPS eligibility. The QPP participation status tool has been updated based on the second review of Medicare Part B claims and PECOS data from October 1st, 2019 through September 20th of 2020. Your status may have changed and you may no longer be 2020 MIPS eligible. For example, clinicians that joined a new practice after September 30th, 2020 are not MIPS eligible as an individual based on association with that new practice. However, may be eligible to receive a MIPS payment adjustment based on group participation if the new practice chooses to participate in MIPS as a group.

Amy Weiser: (slide 7)

2021 MIPS eligibility status is now available. Again, if you go to the QPP participation status tool to check your 2021 MIPS initial eligibility, enter your NPI number and you can see that. The criteria for eligibility has not changed from 2020, but CMS will no longer evaluate APM entities for the low volume threshold. And now it's time for a polling question.

Shanen Wright: (slide 8)

This is the portion of QPPLive! where we want to hear from you. We'll be asking you questions, both MIPS related questions and some fun ones as well, so you can wow your friends and family with trivia. Let's start off with one about the Quality Payment Program, though. Our first polling question asks how many total MIPS performance points do I need to achieve in 2021 to avoid the 9% negative payment adjustment in 2023? Is it 50 points, 55, 60, or 65? We'll have the answer coming up. But first, more news with Amy.

Amy Weiser: (slide 9)

Thanks, Shanen. The qualifying APM data has been updated. The QPP participation status tool also includes the third snapshot of data from Alternative Payment Model entities, dates of service between January 1st, 2020 and August 31st, 2020. The tool includes 2020 qualifying APM participants, QP, and MIPS APM participation status.

Amy Weiser (slide 10)

I'm going to talk a little bit now about the 2020 opt-in and voluntary reporting. Opt-in eligible clinicians have two reporting options available. You can submit an election to opt-in to MIPS and receive a MIPS payment adjustment. Once the election to opt-in is made, though, the decision is binding and irreversible. So if you are thinking about opting in but you're not sure what to do, please reach out to us and we will walk through the pros and cons with you on making the best decision. Voluntary reporting is also available, however if you voluntarily report you would not receive a MIPS payment adjustment at all. Clinicians and groups who are excluded from this and not opt-in eligible can voluntarily report MIPS data, but will not receive a MIPS payment adjustment. Elections to opt-in can be made now that the submission period is open and we've included some resources here for you. You can review the reporting options overview webpage and the 2020 MIPS opt-in reporting and election process toolkit.

Amy Weiser (slide 11)

The APM Performance Pathway, also known as the APP, is available in 2021. The APM Performance Pathway is a new reporting framework complimentary to the MIPS Value Pathways, or the MVP. However, MVPs are delayed until 2022. The APP is available only to participants in the MIPS APM. The APP can be reported by an individual eligible clinician group or APM entity. And we've included several resources here for you, how MIPS eligibility is determined, the decision tree, the 2021 APP infographic and fact sheet.

Amy Weiser: (slide 12)

We wanted to provide an update to you concerning the qualifying participant thresholds for 2021. On December 27th, 2020 the Consolidated Appropriations Act of 2021 was signed into law. And under this law the Quality Payment Program's qualifying alternative payment model, or QP thresholds, for the payment years 2023 and 2024 have been frozen at 50% for the payment amount threshold and 35% for the patient count threshold for performance years 2021 and 2022. So the back story to this is that they originally were going to increase the thresholds and through this Consolidated Appropriations Act, they have frozen them. So that's some good news. The slide is here for you to review at your leisure.

Amy Weiser: (slide 13)

And if you need more information about those QP thresholds, you can review the QP Quick Start Guide for an overview of what it means to be a QP and how determinations are made. And there's the 2021 MIPS eligibility decision tree to help you understand if you will need to participate in MIPS. And of course you can contact CMS and you can contact us as well if you need any assistance with this information.

Amy Weiser: (slide 14)

So this is something we wanted to make you aware of and it is related to the polling question, so here's the answer. To avoid the maximum 9% negative payment adjustment, MIPS eligible clinicians must score a minimum of 60 points in 2021. Sorry to steal your thunder, Shanen, but here's the answer. The Quality category is 40%, the Cost category is 20%, and the Promoting Interoperability remains at 25%, and the Improvement Activities category is 15%.

Amy Weiser: (slide 15)

There was a requirement change, so all certified electronic health record technology must be updated to the 2015 Edition Cures update certification criteria by December 1st of 2022. However, in 2021 you can continue to use your existing 2015 Edition. You could upgrade to the 2015 Edition Cures update or you can use a combination of both. All right, Shanen.

Shanen Wright: (slide 16)

Thanks, Amy. Well, the thunder has been stolen, so not a big drum roll for the answer on this, but I bet most of you answered before Amy gave it away a little bit ago. We see here that the majority of folks got the answer correct, that indeed 60 points is the total number of MIPS performance points that you need to achieve in 2021 to avoid the 9% negative payment adjustment in 2023. All right, let's have

another polling question. We want to hear from you yet again. This is one of our fun questions and this is to help you start planning out your weekend for Saturday, January 23rd. January 23rd is known as what day? Is it National Pasta Day, National Pie Day, National Pancake Day, or National Pizza Day. I don't know about you, but all four of those sound pretty yummy to me right now. Enter your answer and we'll find out what January 23rd is known as after some more breaking news and updates.

Amy Weiser: (slide 17)

All right, so 2021 qualified registries and clinical data registries information. On December 16th, 2020 CMS posted the 2021 qualified registries, qualified posting, and the 2021 QCDRs qualified posting. Only registries and QCDRs on this list can be used for the 2021 MIPS performance period. So make sure you take a look at those and you're all set to go.

Amy Weiser: (slide 18)

CMS posted the 2021 specifications for the QCDR measures. And the fourth tab of the file, QCDR specifications, includes the full set of QCDR measures that has been approved by CMS for the 2021 performance period. QCDR measures are only available for reporting through a CMS approved QCDR and not a qualified registry.

Amy Weiser: (slide 19)

The list of electronic Clinical Quality Measures, or eQMs, for 2021 has been released by CMS and we've included the link here for those as well. The file also includes information for Improvement Activity identifiers, Promoting Interoperability objectives and measures, Promoting Interoperability attestation statement identifiers, as well as Comprehensive Primary Care Plus, or CPC+, Primary Care First, PCF, and Medicaid promoting interoperability information.

Amy Weiser: (slide 20)

Reminder for registry and QCDR users: You need to have a HIPAA compliant Business Association Agreement, or a BAA, with your vendors. The BAA acts as a receipt of patient specific data from providers and for the disclosure of quality measure results between the registry and the clinician. And now I'm going to turn it over to my colleague, Roxanne.

Roxanne Fletcher: (slide 21)

Good morning everybody and welcome to 2021. I'm going to start today with a substance abuse and mental health update. The Substance Abuse and Mental Health Services Administration is the federal agency that leads public health efforts to advance the behavioral health of the nation by reducing the impact of substance abuse and mental illness on America's community. The recently released SAMHSA 42 CFR Part 2 revised rule protects patient records created by federally assisted programs for the treatment of substance use disorder by facilitating better coordination of care in response to the opioid epidemic while maintaining its confidentiality protections against unauthorized disclosure and use. If you treat patients with substance abuse and/or maintain substance abuse records, you need to be aware of the strict federal regulation related to this type of sensitive information and the ramifications

for noncompliance. Written consent must be obtained from a patient in order to share health information from a Part 2 facility/provider.

Roxanne Fletcher: (slide 22)

SAMHSA is different than the Health Insurance Portability and Accountability Act, HIPAA, of 1996, which required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge. Below, we've listed some links that go into more detail about what this involves so that you will be compliant. And then we've got Shanen again.

Shanen Wright: (slide 23)

All right, thanks so much, Rox. Let's find out what national day this Saturday is. Well, first of all, it looks like we've stumped some people. You must not have pulled out your phones and used Google and cheated, so we've got an even distribution. We have 37% of people indicating it's National Pancake Day, 37% with National Pie Day, 16% National Pasta Day, and only 5% of people said it was National Pizza Day. Well, I'll tell you what, the 37% of people who indicated that it's National Pie Day were correct. National Pie day is celebrated on January 23rd as one of the nation's favorite desserts. No matter how you slice it, pie in just about any form makes a crowd happy – fruit pies, berry pies, cream pies. They're mouthwatering servings of homemade goodness. We actually found, for some of you in the area, no endorsement for these organizations, several businesses that are offering free and discounted pie this Saturday on January 23rd, including The Pie Shoppe in Laughlintown, Pennsylvania, which is in western PA. O'Charleys, which is a nationwide chain, they're offering free pie Wednesdays when you dine in and Linville Orchards in Media, Pennsylvania, near Philadelphia, has \$5 off pies on National Pie Day. Again, we haven't tried those. It's not a commercial, we're receiving no money for it. We just thought you might be interested if you were in Pennsylvania and celebrating National Pie Day. Sounds yummy. How about another polling question now?

Let's get back to the Quality Payment Program for this one and see if you know. 2020 MIPS data submitted before or after an approved COVID-19 related Extreme and Uncontrollable Circumstances Application will be scored. Is it true? Is it false? We'll let you know coming up. And just one other brief note before I toss things back to Rox, make sure you're checking out the chat window during today's breaking news and announcements. Our friend Marvin is providing great direct links to the resources that Amy and Roxanne are talking about. So if you're interested in them, keep your chat window open by simply pushing the little bubble that says chat and you can link directly to these resources. We'll find out if the polling question is true or false coming up. But first, more news with Roxanne.

Roxanne Fletcher: (slide 24)

Thank you, Shanen. I wanted to mention that the information blocking deadline has been postponed. The 21st Century Cures Act Final Rule was designed to give patients and healthcare providers secure electronic access to health information. One regulation addresses information blocking to prevent healthcare providers, EHR developers, and health information exchanges from preventing or discouraging access to or use of electronic health information. The information block provisions, initially scheduled to go into effect on November 2nd, 2020, have been postponed until April 5th, 2021. Violations may be investigated by the Health and Human Services' Office of the Inspector General and are subject to penalties. Your electronic medical record developers and your HIEs may face civil

penalties up to \$1 million per violation. And disincentives for healthcare providers have not yet been finalized.

Roxanne Fletcher: (slide 25)

The 15 point MIPS performance threshold increase in 2021. The fifth year of the Quality Payment Program began January 1st. The MIPS performance threshold increased from 45 points in 2020 to 60 points for 2021. Use the following tips to maximize your MIPS score and avoid a negative payment adjustment.

Roxanne Fletcher: (slide 26)

Okay, so first we're going to review cost performance feedback. The Cost category weight increased from 15% to 20% of your total MIPS score. You can review your past performance feedback reports to identify patients with high healthcare costs. And then you can identify strategies to improve care while lowering costs for these patients. This is something that we are here to help you with and provide guidance so that you can review those reports. With the COVID-19 pandemic continuing, CMS will continue telehealth services that are directly applicable to existing episode-based cost measures and the Total Per Capita Cost, TPCC, measure. If your practice is not using telehealth services, you might want to consider ways to implement a telehealth program to benefit from this opportunity.

Roxanne Fletcher: (slide 27)

Look for new opportunities in the Promoting Interoperability and Improvement Activities categories. Review the 2021 Improvement Activities inventory. One activity, CMS Partner in Patients Hospital Engagement Network, CC_5, has been removed. Two activities have been modified. And review the 2021 PI, Promoting Interoperability, measure specifications. CMS increased the bonus points for reporting the optional Query for Prescription Drug Monitoring Program. It measures now from 5 to 10 bonus points you can receive for that. There is a new optional health information exchange with a bidirectional measure that is worth 40 points. So they are worth checking out.

Roxanne Fletcher: (slide 28)

When you need to review and select quality measures. Many of the practices I work with have been digging into the quality measures this month already. CMS has reduced the number of quality measures available to report in 2021, so check to make sure that your choices are included. Some of them have changed in how you can report them. I found a few that were reportable through claims that are no longer available for claims. You have to do that by registry. So you really need to look at what you've reported in the past and check it out. The specifications will tell you which way and how often you need to report these measures. CMS modified 113 existing MIPS quality measures, made changes to specialty sets, removed 11 quality measures, and added two more administrative claims measures, one of which has a three year measure period.

Roxanne Fletcher: (slide 29)

Utilize free resources. Please reach out to Quality Insights for no cost, customized technical assistance. This is the last year of our contract with CMS, but right now we have all of 2021 to help you through this

process. Review the resource library on the QPP website for the 2021 Quality Payment Program Final Rule resources, including a fact sheet, FAQs, a policy comparison table, and the MIPS value pathways candidate submission template. If applicable, reach out to your EHR vendor for MIPS resources. Check out resources from your national specialty society's website. Many national specialty associations post free resources for their members, including recommended quality measures or links to Qualified Registries or Qualified Clinical Data Registries to facilitate data collection and reporting.

Roxanne Fletcher: (slide 30)

And prepare for the COVID-19 vaccine. CMS encourages providers to prepare to administer the COVID-19 vaccine when it becomes available. Read the enrollment section. We provided a link that will take you to the COVID-19 provider toolkit. See if you need to take action now. Enrolling over the phone to be a mass immunizer is easy and quick. Call your MAC specific enrollment hotline. Okay, Shanen, let's hear the poll results.

Shanen Wright: (slide 31)

All right, well, you guys are really good and you're keeping your streak alive. 94% of people got the correct answer to that true or false question, that, indeed, 2020 MIPS data submitted before or after an approved COVID-19 related Extreme and Uncontrollable Circumstances Application will be scored. Nice work, folks. Glad to see you knew that. So we've got one more polling question for you. This is another fun polling question and it's making me even more hungry. I should've eaten a bigger breakfast. For this one, January is National Soup Month in the United States. Soup can be chunky, clear, creamy, low fat with a dash of spice, or naturally sweet. Served hot, sometimes cold. Nothing drives away those chilly winter blues like a hot bowl of your favorite soup. And it's nutritious, too. So go ahead, indulge, and get souped up on soup this month. With that in mind, what is the best-selling soup in America? Is it tomato soup, chicken noodle soup, clam chowder, or potato soup? I say all the above. That's going to be my lunch, all four of those. Yum. Let's see if you know the right answer to it and we'll have the results coming up after a little more news with Roxanne.

Roxanne Fletcher: (slide 32)

In case you missed it, Quality Insights hosted a webinar on January 6th featuring Kem Tolliver from Medical Revenue Cycle Specialists that highlighted important information about 2021 coding and reimbursement changes from the Medicare Physician Fee Schedule Final Rule. The slides, recording and transcript are available on the archived events page of Quality Insights' website. We've also provided links to additional resources that are available. For the Quality category, CMS has posted a lot of resources. We've also provided links to Promoting Interoperability measure specifications and resources for the Improvement Activities category and the Cost category.

Roxanne Fletcher: (slides 33-35)

The next slide lists 2021 quality measure resources. If you have any questions about these resources or the others on the next two slides or you need us to explain any of the specifications, please reach out. We are here to help you and we look forward to doing that.

Roxanne Fletcher: (slide 36)

The December 2020 QPP-SURS Central Support Contractor newsletter is now available. Articles this month include the Extreme and Uncontrollable Circumstances Application deadline extension, the small practice spotlight on Fast Access Healthcare in Tennessee. And there's an overview of the 2021 QPP Final Rule, how to prepare for the upcoming performance period and how to engage patients in telehealth. I know some of you are still struggling with getting your patients engaged with telehealth. Perhaps this will give you some good pointers. And remember to update your contact information in NPPES. You are required to put in your direct address in your NPPES account. If you need help with that or instructions, again, reach out to us. Also, there are recent Quality Payment Program resource library additions.

Roxanne Fletcher: (slide 37)

Details and more information from today's breaking news and announcements can be found in our January 6th newsletter. Our archived newsletters are located on Quality Insights' website.

Roxanne Fletcher: (slide 38)

Also, we have some upcoming events. Please join us on February 3rd at one o'clock for an overview of the 2021 QPP reporting requirements. And then the February 2021 LAN webinar will feature key insights for success in MIPS and lessons learned for solo and small group practices. The LAN offers two opportunities for you to participate and we've listed registration links. Okay, Shanen, let's have the results.

Shanen Wright: (slide 39)

All right, let's take a look at those soup results and see. Look, maybe you cheated this time after I suggested you pull out your phone and Google it, but 67% of our audience today got the correct answer, that indeed America's favorite soup is chicken noodle soup. And that's really no surprise, we all grew up with our parents lovingly preparing a big bowl of chicken noodle soup to help us feel better on a bad day. The warm, comforting flavor brings us back to those simpler times and reminds us of home, a true definition of comfort food. So there's some nice trivia you can bore your friends and family members with and maybe have a nice bowl of chicken noodle soup. Sounds good to me.

Shanen Wright: (slide 40)

Now, let's meet our Quality Insights QPP team. Here with us today on QPPLive!, we have Kathy Wild, who is our project manager. We also have Amy Weiser, who started off today's breaking news and announcements. She's lead project coordinator. I'm Shanen Wright, associate project director.

Shanen Wright: (slide 41)

Also with us today, we have Rox Fletcher, who also helped us with the breaking news and announcements, Marvin Nichols who's providing links in your WebEx chat window to the resources we've referenced. We have Andrea Phillips, Lisa Sagwitz, Shirley Sullivan, and my man Gary Rezek as well.

Shanen Wright: (slide 42)

You now have the opportunity to ask questions of our experts. Simply use the Q&A icon in your WebEx player. If you're not seeing it, just click on the three little bubbles on the lower right hand side you see denoted on the slide. That will bring up Q&A. You can type your question in the Q&A feature and hit send. We'll address as many questions as time will allow for on today's episode of QPPLive!. If you're not seeing the chat icon, open it simply by clicking on the chat bubble, and you'll be able to see all the great links that Marvin is providing. We do ask that you don't use chat for your questions because that's where the links go and it gets a little crazy if you do that. Please also keep in mind that we're here to help you anytime, not just on the third Thursday of the month at 9:30 AM during QPPLive!. If you don't realize who your contact is at Quality Insights, you can always use our general QPP inbox for inquiries. We'll do the best we can to answer all questions today, but note that we may need to follow up at a later time. Sometimes your questions are really good ones and we want to make sure we're getting you the correct answer. Please also keep in mind that rules and interpretations change over time, especially if you're viewing this as a recorded episode of QPPLive! and not on January 21st, 2021. But most of all, we here at Quality Insights want to establish a relationship with you so you can succeed in CMS' Quality Payment Program. With that, let's get to some questions.

Shanen Wright: (slide 43)

We don't have a lot of time for questions today, so if you have one, type it in right now. All right, we've got a question coming in. Barbara says for 2021 our APM participation status is not listed on the reporting site. We have confirmed we are still participating in our APM, which has been listed since 2017. Is anyone else experiencing this problem or what should I do?

Lisa Sagwitz: (Q&A portion)

Hi, it's Lisa. I can answer that question. I would definitely contact the QPP Help Desk. That number is 1-866-288-8292. Have a list of your providers and their NPI numbers. When you do check participation status, the ACOs are definitely listed under each provider. And they give you details, such as what type with the model of the ACO and if your provider is a qualifying participant or a partially qualifying participant. So I would use that as my starting point. Occasionally there are errors, so maybe just something has gone wrong behind the scenes and a call to the QPP Help Desk should assist you with that.

Shanen Wright: (Q&A portion)

Thank you, Lisa. Here's another great question we received. Is the BAA, Business Associate Agreement, needed every year or if we have it on hand from last year is that okay?

Lisa Sagwitz: (Q&A portion)

Hi, it's Lisa. The BAA is needed on a yearly basis.

Shanen Wright: (Q&A portion)

Make sure and get those questions in before we run out of time. We want to hear from you now. Here's another great question. This one says the QPP lookup tool is showing we are not MIPS eligible for 2021.

However, it also says the status may be updated throughout the year. Is it possible the status will change and we will be required to report?

Gary Rezek: (Q&A portion)

Hi, this is Gary. I'll answer that one. So if you go out to the QPP lookup tool to check your status for 2021 and it's showing that you are not MIPS eligible, although statuses can change, it's unlikely to change from being not eligible to eligible. And that's because there are two determination periods to determine that eligibility. You must meet the low volume threshold for your Medicare patient claims and services for both of those periods. So if you didn't meet it for the first one, it's unlikely to change in the long run. There are some exceptions. If you're new to billing Medicare for whatever reason, maybe you're a new provider and you've just started billing Medicare, your eligibility might be determined based on only the second determination period. So you want to keep an eye on that. If you've started billing with a new practice, if you've joined or moved to a new practice and you're billing with a new TIN, you might be part of a group that's eligible. So you want to keep an eye on those kind of situations, but if you're at an established practice from last year, your eligibility is unlikely to change from not eligible to eligible.

Shanen Wright: (Q&A portion)

Thank you, Gary. Great answer. We have a follow up from Vicki that came into our Q&A box. Vicki said I was told the Business Associate Agreement does not need to be updated annually unless there are regulatory or security updates. But an annual review of BAAs is always recommended when doing an annual risk analysis. Lisa, I didn't know if you had any comments or wanted to add anything to what Vicki added to the previous question.

Lisa Sagwitz: (Q&A portion)

I will follow up with that after the webinar and we can let everybody know. I was under the assumption it was annual. And it would be for each entity that you did business with that one was required, but I will follow up.

Shanen Wright: (Q&A portion)

Excellent. Thank you so much, Lisa. Here's another great question. This one asks will you be willing to assist me in selecting quality measures for the upcoming 2021 reporting year? I have looked through the listing on the QPP website, but I was hoping you could better explain the measures and how to get credit for our efforts.

Shirley Sullivan: (Q&A portion)

This is Shirley. I can take this. Yes, we can assist you when picking quality measures. You want to pick six quality measures, one being a high priority or an outcome measure for the entire year, to get the most points. Now, as a small practice, you can report quality measures through claims, through your EHR, or through a registry. Not all quality measures are available to report in all three ways, so it's really best that we talk one-on-one, to get information about your practice and how you would like to submit the quality measures before really picking what quality measures work best for you. So if you can put your contact information in the Q&A or you can call 1-877-497-5065, I can follow up with you.

Shanen Wright: (Q&A portion)

Thanks so much, Shirley. We're almost out of time here on QPPLive!. If you've got a question, submit it now. We've got one more in the hopper and then we're going to end for the day unless you've got another one. So bring it on, we love your questions. Here's a great one. This says I am just seeking clarification for the reporting year 2021: I have checked each of my 15 therapists in our group and all note "opt in eligible." Therefore, no need to report at beginning of the year, but when do I need to check again to see if the reporting status has changed?

Shirley Sullivan: (Q&A portion)

This is Shirley, I can take this. So there are two lookup periods to determine if you have to participate in MIPS for 2021. The first lookup period ran from October 1st of 2019 through September 30th of 2020. When you go on the participation lookup tool now, that's the data you're seeing. The second lookup period runs from 10/1/20, so October of 2020, through September 30th of 2021. That data will be available sometime in October of 2021 and that is your second lookup period. Now, as Gary mentioned, if you were not eligible to participate in the first lookup period but you happen to participate in a second lookup period, that is rare, but you still want to check after each lookup period. So I would check again in October. Also, if your participation status is showing that you're opt-in only, so you don't have to participate as an individual or as a group, then you can opt-in. But if you don't want to participate, then you don't need to do anything. You don't get the penalty. Now, as mentioned earlier by Amy, if you choose to opt-in, keep in mind that this is irreversible. So once you opt-in, you are required to participate in MIPS for that year. So if you opt-in for 2021, you are required to report and you are eligible to get the penalty. So you want to make sure that you can get above that 60 points in order to avoid the penalty. And I wouldn't opt-in if you're not sure of that. If you'd like to discuss your options, you can reach out to one of us.

Kathy Wild: (Q&A portion)

I just wanted to add, in our four states that Quality Insights serves, we're responsible for approximately 10,000 MIPS eligible clinicians. We recently received a file from CMS showing that after this second lookup period there are now over 2,000-2,500 clinicians that are no longer eligible that were after the first period. So once again, as Shirley and Amy have explained, you can still report and opt-in, but you do not have to. And if you want, we can look it up in our file or the easiest thing is to put your NPI in the lookup tool.

Shanen Wright: (slide 44)

Okay. Well, hearing no other comments and seeing no other questions in our chat, we will begin to wrap up today's edition of QPPLive!. We'd like to thank you for joining us today. A lot of great information was presented. Many thanks to Marvin for the great links to resources, the great questions coming from Vicki and Barbara, and all of the members of our audience. We really enjoy helping you during QPPLive! and we'd like for you to mark your calendar for the next edition of QPPLive!. It'll take place on the third Thursday of February, that would be February 18th at 9:30 AM. We look forward to talking with you then. Don't forget, too, that we have an upcoming webinar which will be on February 3rd at 1:00 PM, where we will provide an overview of 2021 QPP reporting. We'd also like to remind you that for practices with 15 or fewer eligible providers you can contact the Quality Insights QPP Support Center.

Shanen Wright:

Our general inbox, which was mentioned earlier, is qpp-surs@qualityinsights.org. You can also give us a ring on the phone at 1-877-497-5065 and we'll route you to the appropriate practice transformation specialist who will be able to assist you with your individualized questions and needs and help you plan for 2021. There are also a wealth of resources available on our website at www.qppsupport.org. So make sure and check out that website and check out all the great links that Marvin was providing throughout today's session of QPPLive!. Keep in mind for next month's session, too, you can submit your questions in advance at any time and we will be happy to address those. We love having those pre-populated questions, like some of the great ones that Shirley and Gary were answering for us earlier. So please reach out to us at qpp-surs@qualityinsights.org and we will be more than happy to take your question and share it with everybody who is part of the QPPLive! audience each and every month on the third Thursday at 9:30 AM.

Shanen Wright:

You may not know who your contact is at Quality Insights. As we mentioned before, you can use this inbox or just reach out to any of us. We'll make sure you get to the appropriate person, including our experts like Rox and Amy, who delivered the breaking news today, as well as Marvin, who posted links, and Lisa, Gary, Shirley, Andrea, everybody here at the Quality Insights QPP team. Because most of all, we want to establish a relationship with you so that you can succeed in CMS' Quality Payment Program. On behalf of everybody at Quality Insights, thanks again for joining us and we look forward to seeing you both on February 3rd and February 18th for the next edition of QPPLive!. Have a great day.

