

Merit-based Incentive Payment System

Three Categories of Participation

MANDATORY PARTICIPATION

- Physical therapists seeing Medicare patients in private practice who exceed ALL THREE criteria of the low-volume threshold (see sidebar) must participate in MIPS
- Subject to the payment adjustment of +/- 7% for 2019
- Nonparticipation will result in the full 7% penalty

OPT-IN PARTICIPATION

Individual Physical Therapists

- Physical therapists seeing Medicare patients in private practice who exceed ONE or TWO of the low-volume threshold criteria (see sidebar) are eligible to opt-in to MIPS
- Subject to the payment adjustment of +/- 7% for 2019

Group Practices

- A practice which exceeds ONE, TWO, or THREE of the low-volume threshold criteria (see sidebar) is eligible to opt-in to MIPS as a group
- Subject to the payment adjustment of +/- 7% for 2019

VOLUNTARY PARTICIPATION

- Physical therapists who don't meet the low-volume threshold and choose not to opt-in to participation are able to report MIPS data voluntarily
- Not subject to the payment adjustment of +/- 7% for 2019

Criteria of the Low-Volume Threshold

Annually receive more than \$90,000 in Medicare part B payments

> Provide care for more than 200 Part B enrolled Medicare beneficiaries

Bill more than 200 professional services

Why Would You Want to Opt-In or Voluntarily Participate?

Outpatient clinicians and owners need to assess the value of their services. Adding value to your practice through better outcomes and patient satisfaction values your patients and your bottom line.



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4 Scorable Categories of Participation

For 2019, physical therapists will only have to participate in the Quality Measures and Improvement Activities categories.

IMPROVEMENT ACTIVITIES

What is measured?

Activities that assess how clinicians improve care processes, enhance patient engagement in care, and increase access to care

How is it measured?

The activities are weighted either medium-weighted (10 points) or high-weighted (20 points). <u>Click here</u> for a list of improvement activities and their weights.

What do clinicians have to do?

- Perform improvement activities for 90 days or more during the year
- Submit one of the following combinations (up to 40 points):
 - 2 high-weighted activities
 - 1 high weight activity and 2 medium-weighted activities
 - 4 medium-weighted activities

QUALITY MEASURES

What is measured?

Quality of health care processes, outcomes, and patient experiences

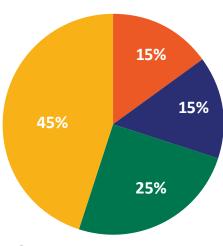
How is it measured?

Quality measures are submitted by therapists for points toward an overall score.

What do clinicians have to do?

A clinician has the option to report MIPS data through either claims or a third-party vendor. There are 11 measures of quality. <u>Click here</u> for a list of quality measures.

A physical therapist or physical therapy practice will earn a MIPS score of 0-100 throughout the calendar year. The score will determine whether they will earn an upward payment adjustment, downward payment adjustment, or no payment adjustment.



- Cost
- Improvement Activites*
- Quality*
- Promoting Interoperability

^{*}Therapists will be reporting on Improvement Acitvities and Quality in 2019.