

# **Quality Payment Program – COVID-19 Response**

#### Updated 12/29/2022

The Centers for Medicare & Medicaid Services (CMS) is implementing multiple flexibilities across multiple performance years for the Quality Payment Program (QPP) in response to the 2019 Coronavirus (COVID-19) public health emergency (PHE).

- <u>COVID-19 Response at a Glance</u>
- UPDATED: <u>MIPS Extreme and</u> <u>Uncontrollable Circumstances Exception</u> <u>Application</u>
- <u>COVID-19 Improvement Activity</u>
- Version History
- <u>Appendix</u>

**UPDATED**: We've extended the 2022 MIPS Extreme and Uncontrollable Circumstances Application deadline to March 3, 2023 at 8 p.m.ET. <u>Learn more.</u>

### **COVID-19 Response At-a-Glance**

2022 Performance Year						
Relief Effort	How Does It Work?	Who Is it Available to?				
Extreme and Uncontrollable Circumstances Application	Individuals, groups and virtual groups (or a third party) can <u>complete an application</u> for one or more performance categories, citing that they have been impacted by COVID-19 pandemic.	Individuals, Groups, Virtual Groups, and APM Entities				
	APM Entities can complete an application to request reweighting of all performance categories.					
	<b>UPDATED:</b> We've extended the deadline to submit COVID-19 related applications to March 3, 2023 at 8 p.m. ET.					
COVID-19 Clinical Data Reporting with or without Clinical Trial Improvement Activity	To receive credit for the COVID-19 Clinical Data Reporting with or without Clinical Trial improvement activity in 2022, clinicians must attest that they have participated: 1) in a COVID- 19 clinical trial utilizing a drug or biological product to treat a patient with a COVID-19 infection and report their findings through a clinical data repository or clinical data registry for	Individuals, Groups, Virtual Groups, and APM Entities				





the duration of their study or 2) in the care of a patient diagnosed with COVID-19 and simultaneously submit relevant clinical data to a clinical data registry for ongoing or future	
COVID-19 research.	

# **2022 Performance Year**

## UPDATED: MIPS Extreme and Uncontrollable Circumstances (EUC) Exception Application

Individuals, groups, virtual groups, and APM Entities can submit a <u>2022 MIPS EUC Exception</u> <u>Application</u> to request reweighting of MIPS performance categories to 0%. **Please note that CMS isn't applying the MIPS automatic EUC policy to individual clinicians for the 2022 performance year.** 

• The deadline for submitting a COVID-19 related MIPS EUC exception application has been extended to March 3, 2023 at 8 p.m. E.T.

#### Individuals, Groups, and Virtual Groups

Individuals, groups, and virtual groups can submit an EUC application, citing COVID-19 in their request to reweight one or more MIPS performance categories to 0% until March 3, 2023. If approved by CMS, the performance categories selected in your application will be weighted at 0% and won't contribute to your final score unless data is submitted for those performance categories.

Any data submitted (before or after an EUC application is approved) will be scored. If only 1 performance category can be scored (meaning the other 3 performance categories are weighted at 0%), the individual, group, or virtual group will receive a final score equal to the performance threshold. The MIPS eligible clinicians in the group will receive a neutral payment adjustment unless they have a higher score from individual or APM Entity participation. MIPS eligible clinicians participating as a virtual group always receive the virtual group's score.

**Example:** A small practice reported Medicare Part B claims measures throughout the performance year and automatically received a group-level quality score based on these measures. The practice submits a **group-level EUC application** citing COVID-19 and the group is approved for reweighting all performance categories.

• As long as no additional data is submitted at the group level (or available for scoring, such as the automatic improvement activities credit awarded to groups with clinicians participating in an APM), the improvement activities, Promoting Interoperability and cost performance categories will be weighted at 0%.



- We'll still score the group on their reported Medicare Part B claims measures, but the quality performance category will be weighted at 100% of the group's MIPS final score.
- As a result, the group will receive a final score equal to the performance threshold and all MIPS eligible clinicians in the group will receive a neutral payment adjustment unless they have a higher score from individual or APM Entity participation.

#### **APM Entities**

Official representatives of APM Entities participating in MIPS, including Shared Savings Program Accountable Care Organizations (ACOs), can submit a MIPS EUC application on behalf of all MIPS eligible clinicians in the APM Entity for the 2022 performance year. If approved, all of the MIPS eligible clinicians in the APM Entity will receive a neutral MIPS payment adjustment in the 2024 MIPS payment year. (Applications must be submitted by an official representative of the APM Entity, not by a participant in the APM Entity.)

There are some differences from our EUC application policies for individuals, groups, and virtual groups:

- APM Entities are required to request reweighting for all performance categories (they aren't able to select some, but not all, performance categories).
- At least 75% of the MIPS eligible clinicians in the Entity must qualify for reweighting in the Promoting Interoperability performance category.
- Data submission by an APM Entity won't override performance category reweighting. (APM Entities with an approved application will receive a final score equal to the performance threshold and their MIPS eligible clinicians will receive a neutral payment adjustment even if data were submitted.)

### **COVID-19 Improvement Activity**

Due to the anticipated need for continued COVID-19 clinical trials and data collection, MIPS eligible clinicians and groups who meet the activity criteria will continue to be able to receive credit for the COVID-19 Clinical Data Reporting with or without Clinical Trial improvement activity for the MIPS 2022 performance year. This is a high-weighted improvement activity.

### Where Can I Learn More?

- 2022 MIPS Extreme and Uncontrollable Circumstances Exception Application Guide (PDF)
- COVID-19 Response (QPP Website)

Subscribe to the <u>QPP listserv</u> to receive notifications about program updates. You can also contact the Quality Payment Program Service Center by email at <u>QPP@cms.hhs.gov</u>, create a <u>QPP Service Center ticket</u>, or by phone at 1-866-288-8292 (Monday through Friday, 8 a.m. - 8 p.m. ET). To receive assistance more quickly, please consider calling during non-peak hours—before 10 a.m. and after 2 p.m. ET.

• Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

# **Version History**

Date	Change Description
12/29/2022	<ul> <li>Updated resource based on the extension of the 2022 MIPS EUC application from January 3, 2023 – March 3, 2023.</li> <li>Updated resource to reflect the MIPS Automatic Extreme and Uncontrollable Circumstances (EUC) policy will not be applied to all individual clinicians.</li> <li>Removed information about COVID-19 policies for the 2021 performance year.</li> <li>Updated appendices to reflect reweighting / redistribution policies applicable to the 2022 performance year.</li> </ul>
3/1/2022	<ul> <li>Updated resource based on the reopening of the 2021 MIPS EUC application from March 1, 2022 – March 31, 2022.</li> <li>Added clarification that data submission in the quality and/or Promoting Interoperability performance categories will initiate a score in the improvement activities performance category (which will override reweighting in this performance category from the automatic EUC policy or an approved EUC application.)</li> </ul>
11/10/2021	Updated to reflect COVID policies for PY 2021, including the automatic EUC policy and doubling the Complex Patient Bonus. (Policies affecting previous performance years are available on the <u>COVID-19 Response</u> page of the QPP website)
5/27/2021	• Updated Appendix B to reflect a weight of 0% for the cost performance category.
2/25/2021	<ul> <li>Updated to reflect that we're applying the automatic extreme and uncontrollable policy to all MIPS eligible clinicians for PY 2020.</li> <li>Updated to reflect that we're extending the deadline for the extreme and uncontrollable exception application to March 31, 2021 to all MIPS eligible clinicians for 2020.</li> </ul>



Date	Change Description
	<ul> <li>Streamlined document to remove duplicative content for PY 2020.</li> <li>Removed policies for PY 2019 and future years; this information can be found in our <u>COVID-19 Response</u> web content.</li> <li>Updated Appendix A to reflect performance category weights under the automatic policy for PY 2020.</li> <li>Added Appendix B to outline or general reweighting policies in PY 2020.</li> </ul>
12/18/2020	Updated to note that only COVID-19 related extreme and uncontrollable circumstances will be considered for approval after December 31, 2020 and to reinforce that approved applications for individuals, groups and virtual groups won't override data submission.
12/2/2020	<ul> <li>Added PY 2020 application deadline extension.</li> <li>Added policies finalized in CY 2021 Quality Payment Program Final Rule for PY 2020:         <ul> <li>Open the Extreme and Uncontrollable Circumstances Exception Application for APM Entities.</li> <li>Double the Complex Patient Bonus.</li> <li>Waive CAHPS for ACOs Survey for Shared Savings Program ACOs.</li> </ul> </li> </ul>
	<ul> <li>Noted that the Extreme and Uncontrollable Circumstances Exception Application will be available for PY 2021.</li> </ul>
9/8/2020	<ul> <li>Added 2020 policy finalized in the IFC-3.         <ul> <li>Clarified the new COVID-19 improvement activity by modifying the activity name and descriptions.</li> <li>Expanded Medicare patient assignment for the CMS Web Interface and CAHPS for MIPS survey.</li> </ul> </li> <li>Added 2021 policy finalized in the IFC-3 about the new COVID-19 improvement activity.</li> </ul>
8/17/2020	<ul> <li>Added 2020 policy proposals from the CY2021 PFS NPRM:         <ul> <li>Open the Extreme and Uncontrollable Circumstances Exception Application for APM Entities.</li> <li>Double the Complex Patient Bonus.</li> </ul> </li> <li>Added 2020 performance year FAQs.</li> </ul>
6/24/2020	Added 2020 policy information about the Extreme and Uncontrollable circumstances application.
6/11/2020	<ul> <li>Clarified language on p. 2 about the new COVID-19 clinical trials</li> <li>Removed language on p. 5 about the new COVID-19 clinical trials improvement activity based on stakeholder feedback. (The language implied that participation in a QCDR was required for this activity, which isn't the case.)</li> </ul>
5/29/2020	<ul> <li>Added clarifying information about the new COVID-19 clinical trials (IA_ERP_3) improvement activity.</li> <li>Added information about the extension for the submission of the DVER report.</li> </ul>



Date	Change Description
	<ul> <li>Added information about the extension of the 2020 Annual Call for Quality Measures.</li> <li>Added information about 2019 MIPS performance category reweighting in preliminary performance feedback due to the automatic extreme and uncontrollable circumstances policy or an approved extreme and uncontrollable circumstances exception application.</li> <li>Added Appendix B as an archive of FAQs related to the multiple flexibilities implemented for the Quality Payment Program.</li> </ul>
4/29/2020	Added information about QCDR measure testing and data collection delay.
4/20/2020	Added information about the new COVID-19 clinical trials (IA_ERP_3) improvement activity.
4/14/2020	<ul> <li>We made a number of revisions based on customer feedback to help clarify our policies, including:</li> <li>Added a new "at-a-glance" section</li> <li>Added information about the extreme and uncontrollable indicator on the QPP Participation Status lookup tool</li> <li>Consolidated and reorganized information to remove duplicative questions</li> <li>Removed targeted review question (will be addressed in a future resource).</li> </ul>
4/3/2020	<ul> <li>Added information about extreme and uncontrollable circumstances application reopening as an option</li> <li>Added information about implications for facility-based clinicians</li> <li>Revised the question about Part B claims reporting to indicate that groups should submit an application</li> <li>Revised language to clarify that the automatic extreme and uncontrollable policy does not apply to group participation</li> </ul>
3/27/2020	Original posting



#### **Appendix: Performance Year 2022 Performance Category Weights**

**Table 1** identifies the performance category reweighting scenarios applicable to individuals, groups, virtual groups, and APM Entities <u>without</u> the small practice designation for the 2022 performance year.

**Table 2** identifies the performance category reweighting scenarios applicable to individuals, groups,virtual groups, and APM Entities with the small practice designation for the 2022 performanceyear. As a reminder, small practices qualify for automatic reweighting of the PromotingInteroperability performance category beginning with the 2022 performance year; this category willbe reweighted to 0% unless data is submitted for it.

#### Table 1. Performance Category Reweighting Scenarios (Excluding Small Practices)

Reweighting Scenario	Quality Category Weight	Promoting Interoperability Category Weight	Improvement Activities Category Weight	Cost Category Weight	Payment Adjustment
No Reweighting					
All categories scored	30%	25%	15%	30%	Positive, Negative, or Neutral
Reweight 1 Performance Ca	itegory			·	·
No Cost	55%	30%	15%	0%	Positive, Negative, or Neutral
No Promoting Interoperability	55%	0%	15%	30%	Positive, Negative, or Neutral
No Quality	0%	55%	15%	30%	Positive, Negative, or Neutral
No Improvement Activities	45%	25%	0%	30%	Positive, Negative, or Neutral
Reweight 2 Performance Ca	itegories			·	·
No Cost and No Promoting Interoperability	85%	0%	15%	0%	Positive, Negative, or Neutral
No Cost and No Quality	0%	85%	15%	0%	Positive, Negative, or Neutral
No Cost and No Improvement Activities	70%	30%	0%	0%	Positive, Negative, or Neutral
No Quality and No Improvement Activities	0%	70%	0%	30%	Positive, Negative, or Neutral
No Promoting Interoperability and No Quality	0%	0%	50%	50%	Positive, Negative, or Neutral

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Reweighting Scenario	Quality Category Weight	Promoting Interoperability Category Weight	Improvement Activities Category Weight	Cost Category Weight	Payment Adjustment	
No Promoting Interoperability and No Improvement Activities	70%	0%	0%	30%	Positive, Negative, or Neutral	
Reweight 3 Performance Ca	Reweight 3 Performance Categories					
No Quality, No Cost, No Improvement Activities	0%	100%	0%	0%	Neutral	
No Quality, No Cost, No Promoting Interoperability	0%	0%	100%	0%	Neutral	
No Cost, No Improvement Activities, No Promoting Interoperability	100%	0%	0%	0%	Neutral	
Reweight 4 Performance Categories						
All performance categories reweighted to 0%	0%	0%	0%	0%	Neutral	

### Table 2. Performance Category Reweighting Scenarios (Small Practices Only)

Reweighting Scenario	Quality Category Weight	Promoting Interoperability Category Weight	Improvement Activities Category Weight	Cost Category Weight	Payment Adjustment	
No Reweighting						
All categories scored (Requires Data Submission for Promoting Interoperability)	30%	25%	15%	30%	Positive, Negative, or Neutral	
Reweight 1 Performance Ca	Reweight 1 Performance Category					
No Cost	55%	30%	15%	0%	Positive, Negative, or Neutral	
No Promoting Interoperability (Standard for Small Practices – Category Automatically reweighted)	40%	0%	30%	30%	Positive, Negative, or Neutral	
No Quality	0%	55%	15%	30%	Positive, Negative, or Neutral	



Reweighting Scenario	Quality Category Weight	Promoting Interoperability Category Weight	Improvement Activities Category Weight	Cost Category Weight	Payment Adjustment
No Improvement Activities	45%	25%	0%	30%	Positive, Negative, or Neutral
Reweight 2 Performance Ca	tegories				
No Cost and No Promoting Interoperability	50%	0%	50%	0%	Positive, Negative, or Neutral
No Cost and No Quality	0%	85%	15%	0%	Positive, Negative, or Neutral
No Cost and No Improvement Activities	70%	30%	0%	0%	Positive, Negative, or Neutral
No Quality and No Improvement Activities	0%	70%	0%	30%	Positive, Negative, or Neutral
No Promoting Interoperability and No Quality	0%	0%	50%	50%	Positive, Negative, or Neutral
No Promoting Interoperability and No Improvement Activities	70%	0%	0%	30%	Positive, Negative, or Neutral
Reweight 3 Performance Ca	tegories				
No Quality, No Cost, No Improvement Activities	0%	100%	0%	0%	Neutral
No Quality, No Cost, No Promoting Interoperability	0%	0%	100%	0%	Neutral
No Cost, No Improvement Activities, No Promoting Interoperability	100%	0%	0%	0%	Neutral
Reweight 4 Performance Categories					
All performance categories reweighted to 0%	0%	0%	0%	0%	Neutral