



# Practice Support Newsletter

June 2017



## Preparing for MACRA MIPS Improvement Activities

**Don't wait!  
Start your IA  
today!**



### NC MIPS is Open!

Have you already met Meaningful Use Objectives for a 90-day period in 2017? If so, the NC MIPS portal is open and ready for your 2017 Medicaid EHR attestation. Contact your AHEC Practice Support consultant today to schedule an attestation!



### MACRA Participation Status

Are you unsure of your MIPS participation status? [The Quality Payment Program website](#) has a new interactive tool where you can check. Just input the NPI to find out your status.

### Your Practice Support Consultants are here to help!

Contact us with any questions or concerns you may have.

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As you probably realize by now the “new kid on the block” is Improvement Activities (IA). In the Merit-Based Incentive System (MIPS), this category counts for 15% of the MIPS final score. If you fall under APM scoring the weight of the (IA) towards your final score will depend on the APM. Look on the [QPP website](#) for more information about APM participation.

#### What is an Improvement Activity (IA)?

An Improvement Activity is an activity that focuses on improving clinical practice. There are 9 categories of activities to choose from such as population management, care coordination, patient safety and expanded practice access. There are over 90 activities listed in the Improvement Activity inventory on the QPP website. In other words, there is something for everyone!

#### Where do I go to find one?

The [Quality Payment Program](#) website has a list and a great tool to help clinicians find just the right one.

#### Which one should I choose?

The one you choose should be something that best fits your practice. Think about the projects you are already working on. For example, are you looking for ways to improve access? If so, take a look at the four activities under the subcategory “Expanded Practice Access”. Or as you look through the activities you may find that you have already completed one of the activities such as the [AMA STEPS Forward program](#).

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Do you need to submit a hardship application?  
Deadline – **July 1st**

If you see Medicare patients and **did not** successfully participate in the 2016 Meaningful Use program, you may be eligible to submit a hardship request to avoid a penalty in 2018.

For more information about hardship applications and to see if you qualify go to [CMS.gov](http://CMS.gov). Applications for both the 2018 Hardship Exception and for new providers who have never successfully attested to Meaningful Use in the EHR Incentive program may be downloaded from this [page](#).

June is Men's Health Month!

Encourage the men and boys in your practice to learn about how they can improve their health!

**How can your practice celebrate National Men's Health Month?**

- Did you know the CDC website has [Health-e-Cards](#)? Share this resource with patients and encourage them to send a card to the men in their lives to show them they care about their health and safety!
- Print out copies of this AHRQ [quiz](#) on men's health with your patients. Use it as a tool to help educate on preventive care.
- Plan a mini Men's Health Fair at your practice and provide information on men's health topics and free BP screenings.



MIPS Improvement Activities (cont'd)

**How many activities do I need?**

Activities are weighted "high" or "medium". High activities are worth 20 points and medium activities are worth 10 points. Practices with more than 15 providers will need 40 points to receive the maximum score. If your practice is 15 providers or less or if your practice is in a rural area or HPSA you will only need 20 points which is either 1 high weighted activity or 2 medium activities.

**What is the timeframe for an Improvement Activity?**

Clinicians will attest yes to each activity that they performed for at least 90 consecutive days.

**How will I report?**

There are several methods of reporting Improvement Activities.

- Qualified Registry
- Qualified Clinical Data Registry (QCDR)
- CMS Web Interface (only groups of 25 or more)
- Attestation

**What documentation will I need?**

CMS requires that documentation be kept for a minimum of 6 years. The actual type of documentation for the IA you choose may vary depending on the activity for instance, if you complete AMA Steps Forward program the documentation would be proof of completion. If you choose an activity that is focused on data your documentation may be a written plan, data and perhaps PDSAs.

**Links to resources:**

[HEC Talk – Improvement Activities Category for MIPS Reporting](#)  
Quality Payment Program [MIPS Improvement Activities Fact Sheet](#)  
Quality Payment Program [Inventory of Improvement Activities](#)