Quality Payment Program – COVID-19 Response

Updated 9/8/2020

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) pandemic public health emergency (PHE).

New: 2020 Performance Year Flexibilities

The COVID-19 pandemic has affected all clinicians across the United States and territories. However, we recognize that not all practices have been affected by COVID-19 to the same extent.

For the 2020 performance year we will be using our Extreme and Uncontrollable Circumstances policy to allow clinicians, groups and virtual groups to submit an application requesting reweighting of one or more Merit-based Incentive Payment System (MIPS) performance categories due to the current COVID-19 pandemic PHE. We have already introduced a new high-weighted improvement activity which provides an opportunity for clinicians to receive credit in MIPS for the important work they are already doing across the country to improve clinical care and overall outcomes for patients diagnosed with COVID-19.

Additionally, we are proposing the following flexibilities in the CY 2021 PFS NPRM:

- Allowing APM Entities to submit an extreme and uncontrollable circumstances exception application for reweighting of MIPS performance categories for the 2020 performance year.
- Revising our current Complex Patient Bonus to account for additional complexity in treating patients during the COVID-19 pandemic. As proposed, clinicians, groups, virtual groups and APM Entities could earn up to 10 bonus points towards their final score for the 2020 performance year.

We believe this approach maintains a balance of encouraging participation in the Quality Payment Program while still allowing those clinicians that are affected by the COVID-19 pandemic PHE to request relief from program participation through the extreme and uncontrollable circumstances application.

We recognize the expanded use of technology during the COVID-19 pandemic PHE and will include additional communications technology-based services and telephone evaluation and management services in the MIPS patient assignment methodology for CMS Web Interface and the CAHPS for MIPS survey.

For performance year 2020, all ACOs are considered to be affected by the COVID-19 pandemic PHE, and the Shared Savings Program extreme and uncontrollable circumstances policy applies. For more information on the Shared Savings Program extreme and uncontrollable circumstances policy and its implications beyond the Quality Payment Program, please go to the Shared Savings Program web page on CMS.gov. In the CY 2021 PFS NPRM, we proposed

Updated 9/8/2020
to waive the requirement for ACOs to field a Consumer Assessment of Healthcare Providers and Systems (CAHPS) for ACOs survey for performance year 2020. Consequently, ACOs would receive automatic full credit for the patient experience measures.

We will continue to explore additional ways to reduce burden on clinicians and provide further support for continued participation where we can.

COVID-19 Response At-a-Glance

<table>
<thead>
<tr>
<th>2020 Performance Period</th>
<th>How Does It Work?</th>
<th>Who Is it Available to?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Extreme and Uncontrollable Circumstances Application</strong></td>
<td>You (or a third party) can complete an application for 1 or more performance categories until December 31, 2020 at 8pm ET, if the COVID-19 pandemic is preventing you from collecting data for an extended period of time, or could impact your performance on cost measures. Approved applications will reweight the affected performance categories to 0%.</td>
<td>Individuals, Groups and Virtual Groups (There is a proposal in the CY 2021 PFS NPRM to make the application available to APM Entities for the 2020 performance period.)</td>
</tr>
<tr>
<td><strong>COVID-19 Clinical Data Reporting With or Without Clinical Trial Improvement Activity</strong></td>
<td>To receive credit for the new COVID-19 Clinical Data Reporting with or without Clinical Trial improvement activity in 2020, 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 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.</td>
<td>Individual, Groups and Virtual Groups</td>
</tr>
<tr>
<td><strong>Doubled Complex Patient Bonus</strong></td>
<td>As proposed in the CY 2021 PFS NPRM, you could earn up to 10 bonus points for the Complex Patient Bonus for the 2020 performance period (to be added to your 2020 MIPS final score).</td>
<td>Individuals, Groups, Virtual Groups, and APM Entities</td>
</tr>
<tr>
<td><strong>Expanded Use of Telehealth Codes in Medicare Patient</strong></td>
<td>Communication technology-based service (CTBS) and telephone evaluation and</td>
<td>Registered Groups and Virtual Groups</td>
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</tbody>
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*Updated 9/8/2020*
<table>
<thead>
<tr>
<th>Assignment for CMS Web Interface and CAHPS for MIPS Survey</th>
<th>management service (E/M) codes will be included in the MIPS assignment methodology.</th>
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## 2019 Performance Period

<table>
<thead>
<tr>
<th>Relief Effort</th>
<th>How Does It Work?</th>
<th>Who Is it Available to?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Extended Submission Window</strong></td>
<td>You (or a third party) were able to submit data on qpp.cms.gov until April 30, 2020 at 8pm ET.</td>
<td><strong>Individuals, Groups and Virtual Groups</strong></td>
</tr>
<tr>
<td><strong>Automatic E&amp;UC Policy</strong></td>
<td>Clinicians who didn’t submit data automatically receive a neutral payment adjustment in 2021. MIPS performance categories were weighted at 0% for the 2019 performance year for individual clinicians. Data submitted by individual clinicians voided reweighting for that performance category and the data was scored. Appendix A outlines performance category weights and payment adjustment implications based on data submission by individual clinicians.</td>
<td><strong>Individual MIPS eligible clinicians</strong> The automatic policy does not apply to groups or virtual groups. • Groups were scored in all performance categories on data that was submitted unless they submitted an application by April 30, 2020 to void previously submitted data. • Clinicians in a virtual group received a final score and payment adjustment regardless of data submission unless the virtual group submitted an application by April 30, 2020.</td>
</tr>
<tr>
<td><strong>COVID-19 E&amp;UC Application</strong></td>
<td>You (or a third party) could complete an application until April 30, 2020 at 8pm ET. Approved applications reweighted performance categories to 0% and voided any previously submitted data.</td>
<td><strong>Individuals, Groups and Virtual Groups</strong> There was no need to complete an application as an individual if you haven’t submitted data or have submitted data for only one performance category as an individual.</td>
</tr>
</tbody>
</table>

*Updated 9/8/2020*
Extended Deadline for Submission of DVER
CMS-approved third party intermediaries could submit their data validation execution reports for the 2019 performance year through June 30, 2020.

Qualified Clinical Data Registries (QCDRs) and Qualified Registries

<table>
<thead>
<tr>
<th>Future Performance Periods</th>
<th>How Does It Work?</th>
<th>Who Is it Available to?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QCDR measure testing and data collection</strong></td>
<td>CMS delayed the implementation of the Qualified Clinical Data Registry (QCDR) measure testing and data collection approval criteria by 1 year to the 2022 performance period.</td>
<td>Qualified Clinical Data Registries (QCDRs)</td>
</tr>
<tr>
<td><strong>Extended 2020 Call for Quality Measures</strong></td>
<td>You could submit quality measures for consideration in future performance years through June 30, 2020.</td>
<td>Measure stewards and stakeholders</td>
</tr>
<tr>
<td><strong>Extended the COVID-19 Clinical Data Reporting With or Without Clinical Trial Improvement Activity</strong></td>
<td>To receive credit for the new COVID-19 Clinical Data Reporting with or without Clinical Trial improvement activity in 2020, 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 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</td>
<td>Individual, Groups and Virtual Groups</td>
</tr>
</tbody>
</table>

2020 Performance Year

Extreme and Uncontrollable Circumstances Application
Clinicians, groups and virtual groups can submit an extreme and uncontrollable circumstances application, citing COVID-19 in their request to reweight one or more MIPS performance categories to 0%. The application is open through December 31, 2020. As previously noted, there is a proposal in the [CY 2021 PFS NPRM](https://www.cms.gov) to open this application to APM Entities for the 2020 performance period.

Applications are reviewed on a case-by-case basis, and if approved, the performance categories included in the application are weighted at 0% and will not contribute to your final score unless you submit MIPS data for the 2020 performance period. Data submission for clinicians, groups and virtual groups will void approved applications on a category-by-category basis.

*Updated 9/8/2020*
For example, if you submit an application for reweighting in the Cost and Quality performance categories only and are approved, these categories will be weighted at 0% and will not be scored for the 2020 performance period.

- You will be scored in the Improvement Activities performance category regardless of whether you submit data.
- You will be scored in the Promoting Interoperability performance categories regardless of whether you submit data unless you qualify for automatic reweighting due to clinician type or special status.
- Quality will be reweighted to 0% unless you submit quality data; if you submit quality data you will be scored in this performance category.
- Cost will retain a weight of 0% (There is no data submission associated with this performance category, so its reweighting can’t be voided).

Note: We proposed allowing MIPS APM Entities to submit an extreme and uncontrollable application on behalf of the entire entity for the 2020 performance period with some differences from our existing policy for individuals, groups and virtual groups.

- As proposed, APM Entities would be required to request reweighting for all performance categories (they wouldn’t be able to select some, but not all, performance categories)
- As proposed, at least 75% of the MIPS eligible clinicians in the Entity would need to qualify for reweighting in the Promoting Interoperability performance category
- As proposed, data submission by an APM Entity wouldn’t override performance category reweighting. (APM Entities with an approved application would receive a final score equal to the performance threshold and a neutral payment adjustment even if data are submitted.)

You must have a HCQIS Access Roles and Profile (HARP) account to complete and submit an exception application. For more information on HARP accounts, refer to the Register for a HARP Account document in the QPP Access User Guide.

For more information on this application, please refer to the 2020 Exceptions Application Fact Sheet.

**Doubled Complex Patient Bonus**

We recognize the difficulty of managing patients during a pandemic and want to mitigate the increase in patient complexity that COVID-19 brings to patient populations already at risk.

In recognition of this additional difficulty and the effect it may have on a provider’s MIPS score, we are proposing to double the maximum points available for the complex patient bonus from 5 to 10 points (for the 2020 performance period only) to be added to your MIPS 2020 final score. For more information about this proposal, please refer to the CY 2021 PFS NPRM.

*Updated 9/8/2020*
New COVID-19 Improvement Activity

In the March IFC for COVID-19, we added a new high-weighted improvement activity, “COVID-19 Clinical Trials,” for the 2020 performance period to provide an opportunity for clinicians to receive credit in MIPS for the important work they are doing across the country. In the August IFC for COVID-19, we provided additional clarity about this new improvement activity that applies to CY 2020 and CY 2021, as follows:

- Renamed the improvement activity to **COVID-19 Clinical Data Reporting with or without Clinical Trial**.
- Modified the descriptions of the two ways MIPS eligible clinicians or groups can receive credit for this new improvement activity:
  - A clinician must participate 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 the duration of their study; or
  - A clinician must participate in the care of COVID-19 patients and simultaneously submit relevant clinical data to a clinical data registry for ongoing or future COVID-19 research.

We intend for this improvement activity to be applicable to MIPS eligible clinicians that are reporting their COVID-19 related patient data to a clinical data registry, such as a registry found on the National Institutes of Health (NIH) website, clinical data repository, such as Oracle’s COVID-19 Therapeutic Learning System and clinicians participating in clinical trials such as the COVID-19 clinical trials being conducted by the (NIH). Oracle has developed and donated a system to the U.S. government that allows clinicians and patients at no cost to record the effectiveness of promising COVID-19 drug therapies. (You can also refer to the [2020 MIPS Data Validation Criteria](#) for additional examples of clinical data repositories and clinical trials.)

The new improvement activity provides flexibility in the type of clinical trial, which could include designs ranging from the traditional double-blinded placebo-controlled trial to an adaptive design, or pragmatic design that flexes to workflow and clinical practice context. The goal is to support innovation and improve the collection of COVID-19 related data that clinicians have available to them and develop best practices that can drive improvements in patient care as clinicians monitor and manage the spread of COVID-19 in their practices. Encouraging clinicians to use an open source data collection tool will bring the results of their research to the forefront of healthcare much faster, leading to improvements in care delivery and most importantly the health of COVID-19 patients.

Clinicians could pair the new COVID-19 Clinical Data Reporting with or without Clinical Trial activity with the existing Participation in a 60- day or greater effort to support domestic or international humanitarian needs (IA_ERP_2) activity for full credit for the MIPS Improvement Activities performance category.

*Updated 9/8/2020*
Frequently Asked Questions (PY 2020)

I have already reported quality measures through Medicare Part B claims for the 2020 performance period. Can I complete an extreme and uncontrollable circumstances exception application?

Yes. If you, or any of the clinicians in your small practice (fewer than 16 clinicians), are eligible to participate in MIPS and are already reporting your quality measures through Medicare Part B claims, you can submit an extreme and uncontrollable circumstances exception application for the 2020 performance period. If you are approved for reweighting in all 4 performance categories and don’t submit any other data, your final score would be equal to the performance threshold which would result in a neutral payment adjustment (unless you have another, higher score).

If I have an approved extreme and uncontrollable circumstances exception application for PY 2020, can I still submit data?

Yes. Data submitted by individuals, groups and virtual groups will override the performance category reweighting approved through your application on a category-by-category basis and you will receive a PY 2020 MIPS final score based on the data you submit. This is different from approved extreme and uncontrollable circumstance exception applications, reopened for COVID-19 during the PY 2019 submission period, which overrode any previously submitted PY 2019 data.

The 2019 Coronavirus pandemic has affected my ability to perform some patient-facing encounters. Has CMS issued any guidance about quality measure reporting due to the expanded use of technology during the 2020 performance period?

Yes. In response to stakeholder feedback, we have provided the following telehealth guidance for quality measure reporting during the 2020 performance period.

- Medicare Part B Claims and MIPS clinical quality measures (CQMs)
  - For a list of 2020 quality measures that currently include telehealth for the 2020 performance period, review the [2020 Quality Measures List with Telehealth Guidance](#).
  - Only quality measures where the entire denominator can be captured via telehealth are included within the resource list. We encourage MIPS eligible clinicians, groups, virtual groups and APM Entities to review other aspects of the quality action within the measure specification, including quality actions that cannot be completed by telehealth.
- Electronic clinical quality measures (eCQMs)
  - Refer to the Telehealth Guidance for eCQMs for Eligible Professional/Eligible Clinician 2020 Quality Reporting document posted on the [Electronic Clinical Quality Improvement (eCQI) Resource Center](#).

*Updated 9/8/2020*
• CMS Web Interface measures and CAHPS for MIPS Survey
  • To ensure that the process for assigning Medicare patients to a group or virtual group reflects the expanded use of technology during the COVID-19 pandemic PHE, we finalized in the IFC-3 to include the following codes for communications technology-based services (CTBS) and telephone evaluation and management (E/M) services in the MIPS assignment methodology for the 2020 performance period.
    ▪ CPT codes: 99421, 99422, and 99423 (codes for online digital E/M service (e-visit)), and 99441, 99442, and 99443 (codes for telephone E/M services); and
    ▪ HCPCS codes: G2010 (code for remote evaluation of patient video/images) and G2012 (code for virtual check-in).
  • Refer to the CMS Web Interface measure specifications and supporting documentation to determine if telehealth encounters are accepted for a specific measure.
  • Refer to the 2020 CMS Web Interface & CAHPS for MIPS Survey Assignment Methodology resource that will be published Fall 2020 for additional details about the CTBS and E/M service codes.

If you have any questions on the ability to include encounters to report for quality measures, contact the QPP Service Center.

2019 Performance Year

Extension to the 2019 Data Submission Deadline

We extended the 2019 Merit-based Incentive Payment System (MIPS) data submission deadline by 30 days from March 31 to April 30, 2020.

MIPS Automatic Extreme and Uncontrollable Circumstance Policy (PY 2019)

CMS extended the automatic extreme and uncontrollable circumstances policy to all individual MIPS eligible clinicians for the 2019 performance period.

MIPS eligible clinicians reporting as individuals were only scored on performance categories for which data was submitted. All other performance categories were reweighted to 0% of their final score. (See Appendix A)

• MIPS eligible clinicians who didn't submit 2019 MIPS data by the April 30, 2020 extended deadline automatically received a neutral payment adjustment.
• MIPS eligible clinicians reporting as individuals who submitted 2019 MIPS data for one performance category by the April 30, 2020 extended deadline automatically received a neutral payment adjustment.

Updated 9/8/2020
• MIPS eligible clinicians reporting as individuals who submitted 2019 MIPS data for two or three performance categories by the April 30, 2020 extended deadline received a final score based on the performance categories for which data was submitted and may earn a negative, neutral or positive payment adjustment. (See Appendix A)

An approved COVID-19 extreme and uncontrollable circumstances application submitted in April 2020 for the 2019 performance period voided previously submitted data.

<table>
<thead>
<tr>
<th>HARDSHIP EXCEPTION</th>
<th>Yes</th>
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<tbody>
<tr>
<td>Extreme and uncontrollable circumstances</td>
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</table>

MIPS Alternative Payment Models

For MIPS eligible clinicians in APM Entities participating in MIPS Alternative Payment Models (APMs), such as the Medicare Shared Savings Program, the APM quality score reflects any changes made under the terms of each MIPS APM’s respective extreme and uncontrollable circumstances policy; the Cost performance category is always weighted at 0% of the MIPS final score for MIPS APM participants; and the Promoting Interoperability performance category is reweighted to 0% of the MIPS final score if no data are submitted. As a result, MIPS APM participants that do not submit quality data would only have a score in one performance category (improvement activities), and thus they would receive a neutral payment adjustment for the 2021 MIPS payment year.

What if I submitted data as individual for the 2019 performance year?

Any data you submitted as an individual voided reweighting of that performance category to 0% under the automatic extreme and uncontrollable circumstances policy.

MIPS eligible clinicians who submitted data as individuals by April 30, 2020 for two (2) or more performance categories were scored on those categories and received a 2021 MIPS payment adjustment based on their 2019 MIPS final score.

Under the automatic extreme and uncontrollable circumstances policy, the Cost performance category will always be weighted at 0%, even if you submitted data for the other performance categories.

See Appendix A for more information about individual data submission and performance category weights.

Updated 9/8/2020
What if our practice submitted 2019 performance year data as a group?

The automatic extreme and uncontrollable circumstances policy does not apply to group participation. If you are a MIPS eligible clinician in a practice that submitted data as a group, we scored the group in all performance categories according to existing MIPS scoring policies. You received a final score and payment adjustment based on the data submitted. Groups that were not able to complete their data submission for the 2019 performance year were able to submit an extreme and uncontrollable circumstances application to void previously submitted data.

If your group did not submit any data by April 30, 2020 and you did not submit any data as an individual you will receive a neutral payment adjustment for the 2021 MIPS payment year.

What if we participated in MIPS as a virtual group for the 2019 performance year?

The automatic extreme and uncontrollable circumstances policy does not apply to virtual groups. Virtual groups who were unable to submit data by April 30, 2020 had the option to submit an extreme and uncontrollable circumstances application.

Extreme and Uncontrollable Circumstances Application (PY 2019)

We re-opened the 2019 extreme and uncontrollable circumstances application to allow clinicians, groups and virtual groups to request reweighting of the MIPS performance categories to 0%.

Extreme and uncontrollable circumstance applications citing COVID-19 could be submitted between April 3 and April 30, 2020, and if approved by CMS, the application voided any previously submitted data for the performance categories you selected in your application. These performance categories were weighted at 0% and did not contribute to your final score. Updates to scoring from approved applications should be reflected in your 2019 Final performance feedback available on August 5, 2020.

Extended Deadline: PY 2019 Data Validation Execution Report (DVER)

The deadline for Qualified Clinical Data Registries (QCDRs) and Qualified Registries to submit their DVER was extended to 5 pm ET on June 30, 2020. Late, incomplete, and/or absent DVER submissions may not be accepted and may lead to termination as a third-party intermediary in future program years. Rejected DVER submissions may lead to remedial action or termination as a third-party intermediary in future program years.
Frequently Asked Questions (PY 2019)

How will the neutral payment adjustment assigned to all MIPS eligible clinicians who do not submit data affect the 2021 payment adjustment for those who do submit data?

The MIPS automatic extreme and uncontrollable policy does not affect the Quality Payment Program’s budget neutrality requirement. MIPS payment adjustments are required by law to be budget neutral. Generally stated, this means that the projected negative payment adjustments must be balanced by the projected positive payment adjustments. We understand that a lower than expected positive payment adjustment may be disappointing, however it’s critical that we support every clinician’s ability to focus on caring for patients impacted by the COVID-19 pandemic.

Who did not need to submit an application for the 2019 performance year?

• MIPS eligible clinicians who did not submit any data or submitted individual data for only one performance category. These clinicians automatically received a neutral payment adjustment unless their practice participated as a virtual group or submitted data as a group.

• MIPS eligible clinicians who wanted to be scored on the data they submitted as individuals in two or more performance categories. Under the automatic policy, clinicians were only scored as individuals on the performance categories for which they submitted individual data.

• Groups that submitted data and wanted to be scored in all applicable performance categories. Groups don’t qualify for the automatic policy and were scored on all applicable performance categories unless they submitted an application.

When will 2019 MIPS performance feedback be updated to reflect performance category reweighting due to the automatic extreme and uncontrollable circumstances policy or an approved extreme and uncontrollable circumstances exception application?

Your 2019 MIPS performance feedback and payment adjustment, available on August 5, 2020, reflects performance category reweighting due to either the automatic extreme and uncontrollable circumstances policy or an approved extreme and uncontrollable circumstances exception application due to COVID-19.

• **Automatic policy:** Performance feedback will display a score of “N/A” for all performance categories for which an individual clinician did not submit data. Individual clinicians who didn’t submit any data will see a message that they qualify for the automatic extreme and uncontrollable circumstances policy.

• **Approved application:** Performance feedback will display a score of “N/A” for all performance categories that were included in the application.

Your performance feedback still includes any data that you submitted, even if the performance category was reweighted (This includes feedback on cost measures, provided that some data was submitted in another performance category.).

*Updated 9/8/2020*
Future Performance Years

QCDR Approval Criteria: Measure Testing and Data Collection Delay

The Qualified Clinical Data Registry (QCDR) measure approval criteria necessitate QCDRs collecting data from clinicians in order to assess the measure before including it in the QCDR’s self-nomination application. We anticipate that QCDRs may be unable to collect, and clinicians unable to submit, data on QCDR measures due to prioritizing the care of COVID-19 patients. Therefore, we are delaying implementation of the QCDR measure testing and data collection policies by 1 year, from the 2021 performance period to the 2022 performance period.

Extended Deadline: 2020 Call for Quality Measures

The 2020 Annual Call for Quality Measures submission period was extended through June 30, 2020. If complete test data was not available by June 30, 2020 or if new data is collected thereafter, measure stewards are asked to submit the data no later than Friday, September 4, 2020.

We are also implementing a new submission process to accommodate the unique circumstances of this Pre-Rulemaking cycle. For the 2020 submission period, stakeholders can submit candidate quality measure specifications and all supporting data files for CMS review by completing the Measures Under Consideration (MUC) template available on the CMS Pre-Rulemaking website and emailing it to prerulemaking@battelle.org.

For more information, please refer to the 2020 Call of Quality Measures Fact Sheet in the 2020 Call for Measures and Activities zip file.

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 be able to receive credit for the COVID-19 Clinical Data Reporting with or without Clinical Trial improvement activity through the MIPS 2021 performance period.

Where Can I Learn More?

- Quality Payment Program
- 2019 PFS Final Rule
- CMS’s Current Emergencies
- Medicare IFC: Revisions in Response to the COVID-19 Public Health Emergency (CMS-1744-IFC)

Updated 9/8/2020
2021 PFS Proposed Rule

You can subscribe to the QPP listserv and you can also contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 a.m. - 8:00 p.m. Eastern Time or by email at: QPP@cms.hhs.gov. Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Version History

<table>
<thead>
<tr>
<th>Date</th>
<th>Change Description</th>
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<tbody>
<tr>
<td>9/8/2020</td>
<td>• Added 2020 policy finalized in the IFC-3.</td>
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<tr>
<td></td>
<td>o Clarified the new COVID-19 improvement activity by modifying the activity name and descriptions.</td>
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<tr>
<td></td>
<td>o Expanded Medicare patient assignment for the CMS Web Interface and CAHPS for MIPS survey.</td>
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<tr>
<td></td>
<td>• Added 2021 policy finalized in the IFC-3 about the new COVID-19 improvement activity.</td>
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<tr>
<td>8/17/2020</td>
<td>• Added 2020 policy proposals from the CY2021 PFS NPRM.</td>
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<td>o Open the extreme and uncontrollable circumstance exception application for APM Entities.</td>
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<td>o Double the Complex Patient Bonus.</td>
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<td>• Added 2020 performance year FAQs.</td>
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<tr>
<td>6/24/2020</td>
<td>• Added 2020 policy information about the Extreme and Uncontrollable circumstances application.</td>
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<tr>
<td>6/11/2020</td>
<td>• Clarified language on p. 2 about the new COVID-19 clinical trials</td>
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<td></td>
<td>• 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 is not the case.)</td>
</tr>
<tr>
<td>5/29/2020</td>
<td>• Added clarifying information about the new COVID-19 clinical trials (IA_ERP_3) improvement activity.</td>
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<td>• Added information about the extension for the submission of the DVER report.</td>
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<tr>
<td></td>
<td>• Added information about the extension of the 2020 Annual Call for Quality Measures.</td>
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<tr>
<td></td>
<td>• 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.</td>
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<td>• Added Appendix B as an archive of FAQs related to the multiple flexibilities implemented for the Quality Payment Program.</td>
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<tr>
<td>4/29/2020</td>
<td>Added information about QCDR measure testing and data collection delay.</td>
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<tr>
<td>4/20/2020</td>
<td>Added information about the new COVID-19 clinical trials (IA_ERP_3) improvement activity.</td>
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Updated 9/8/2020
<table>
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<tr>
<th>Date</th>
<th>Change Description</th>
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<tbody>
<tr>
<td>4/14/2020</td>
<td>We made a number of revisions based on customer feedback to help clarify our policies, including:</td>
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<td></td>
<td>• Added a new “at-a-glance” section</td>
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<td></td>
<td>• Added information about the extreme and uncontrollable indicator on the QPP Participation Status lookup tool</td>
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<td>• Consolidated and reorganized information to remove duplicative questions</td>
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<td></td>
<td>• Removed targeted review question (will be addressed in a future resource).</td>
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<tr>
<td>4/3/2020</td>
<td>• Added information about extreme and uncontrollable circumstances application reopening as an option</td>
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<td>• Added information about implications for facility-based clinicians</td>
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<td></td>
<td>• Revised the question about Part B claims reporting to indicate that groups should submit an application</td>
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<td></td>
<td>• Revised language to clarify that the automatic extreme and uncontrollable policy does not apply to group participation</td>
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<tr>
<td>3/27/2020</td>
<td>Original posting</td>
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</tbody>
</table>
Appendix A: Automatic Policy (Applies PY 2019 Only)
Performance Category Weights and Payment Adjustment based on Individual Data Submission

The table below illustrates the 2019 performance category reweighting policies that CMS will apply to individual clinicians under the MIPS automatic extreme and uncontrollable circumstances policy.¹ The automatic policy (and the reweighting below) does not apply to clinicians who participate in MIPS as a group or virtual group.

<table>
<thead>
<tr>
<th>Data Submitted</th>
<th>Quality Category Weight</th>
<th>Promoting Interoperability Category Weight</th>
<th>Improvement Activities Category Weight</th>
<th>Cost Category Weight</th>
<th>Payment Adjustment</th>
</tr>
</thead>
<tbody>
<tr>
<td>No data</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>Neutral</td>
</tr>
</tbody>
</table>

Submit Data for 1 Performance Category

| Quality Only                  | 100%                    | 0%                                        | 0%                                   | 0%                   | Neutral            |
| Promoting Interoperability Only | 0%                      | 100%                                      | 0%                                   | 0%                   | Neutral            |
| Improvement Activities Only   | 0%                      | 0%                                        | 100%                                 | 0%                   | Neutral            |

Submit Data for 2 Performance Categories

| Quality and Promoting Interoperability | 75% | 25% | 0% | 0% | Positive, Negative, or Neutral |
| Quality and Improvement Activities | 85% | 0%  | 15%| 0% | Positive, Negative, or Neutral |
| Improvement Activities and Promoting Interoperability | 0% | 50% | 50%| 0% | Positive, Negative, or Neutral |

Submit Data for 3 Performance Categories

| Quality and Improvement Activities and Promoting Interoperability | 60% | 25% | 15%| 0% | Positive, Negative, or Neutral |

¹ See 42 C.F.R. §414.1380

Updated 9/8/2020
Appendix B

Extreme and Uncontrollable Circumstances Application (PY 2019 Only)

We updated the main body of the fact sheet to reflect that the PY 2019 submission period and the re-opened PY 2019 extreme and uncontrollable circumstances application are now closed. We created this appendix to maintain a record of the information provided about the PY 2019 application when it was open. (Please note that most of this information does not apply to the PY 2020 application.)

PY2019 Extreme and Uncontrollable Circumstances Application

We re-opened the 2019 extreme and uncontrollable circumstances application to allow clinicians, groups and virtual groups to request reweighting of the MIPS performance categories to 0%.

The application is available for:

- **Individual clinicians** who started, but are unable to complete, their data submission;
- **Small practices** that were automatically scored as a group on Medicare Part B claims quality measures;
- **Groups** that started, but are unable to complete, their data submission; and
- **Virtual groups** that are unable to start or complete their data submission.

Applications can also be submitted by a third party with permission from the clinician or practice. The application is accessible [here](#). When completing the application:

- Select individual, group or virtual group as appropriate to your level of participation;
- Select 1/1/2020 and 4/30/2020 as your start- and end-dates;
- Indicate that you are unable to complete data submission due to the COVID-19 pandemic; and
- Select all 4 performance categories for reweighting to receive a neutral payment adjustment.

If you have questions about a previously approved application submitted before December 31, 2019, please contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 a.m. - 8:00 p.m. Eastern Time or by email at: QPP@cms.hhs.gov. Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

*Updated 9/8/2020*
Applications for Individual Clinicians

Our practice is participating in MIPS as individuals. Under what circumstances would we need to complete an application for one of our clinicians?

The extreme and uncontrollable circumstances application is an option to reweight performance categories to 0% for any MIPS eligible clinician who:

- Has partial data submitted for two (2) or more performance categories; AND
- Will not be able to complete their data submission by April 30, 2020; AND
- Currently has a preliminary score below 30 points.

Individual MIPS eligible clinicians who meet these criteria and don’t complete an extreme and uncontrollable circumstances application could be subject to a negative payment adjustment in the 2021 payment year.

Reminder: Individual MIPS eligible clinicians who have not submitted 2019 performance year data or have only submitted data for one performance category will earn a final score equal to the performance threshold and a neutral payment adjustment.

Some of the clinicians in our practice are facility-based and eligible for facility-based measurement in 2019. Do we need to complete an application on their behalf to reweight their performance categories to 0%?

You will not need to complete an application for facility-based MIPS eligible clinicians who have not submitted any data to MIPS or who have submitted data for one performance category. We will not apply facility-based measurement to these clinicians.

We will apply facility-based measurement to facility-based MIPS eligible clinicians who have submitted data to MIPS for two or more performance categories. (Cost will not be scored.) You would need to complete an extreme and uncontrollable circumstances application for their clinicians to reweight all four performance categories to 0%.

Applications for Groups

Our practice was planning to participate in MIPS as a group, but we haven’t submitted any data yet. Do we need to complete an extreme and uncontrollable circumstances application for our group?

No. There is no requirement to participate and submit data as a group. Your individually eligible clinicians are covered by the MIPS automatic extreme and uncontrollable circumstances policy. They will receive a neutral payment adjustment unless they’ve submitted individual data on two (2) or more performance categories.

Updated 9/8/2020
Our small practice was automatically scored as a group for the Quality performance category because our clinicians reported Medicare Part B claims measures. Can we complete an extreme and uncontrollable circumstances application for our group?

Yes. Small practices were automatically scored as a group in the Quality performance category when their clinicians reported Part B claims measures. If your small practice has a Quality score and is not able, or did not intend, to submit group data for additional performance categories, you should submit an extreme and uncontrollable circumstances application on behalf of the group to reweight all four performance categories to 0%.

Our practice has already submitted some 2019 performance year data as a group. Do we need to complete an extreme and uncontrollable circumstances application?

The extreme and uncontrollable circumstances application is an option to reweight performance categories for any group that:

- Will not be able to complete their data submission by April 30, 2020; AND
- Currently has a preliminary score below 30 points.

MIPS eligible clinicians in a group that meets these criteria and doesn’t complete an extreme and uncontrollable circumstances application will be scored in all performance categories and could be subject to a negative payment adjustment.

If you complete an extreme and uncontrollable circumstance application on behalf of the group, this will not override data submitted by the individual MIPS eligible clinicians in the practice.

Our practice is facility-based at the group level and eligible for facility-based measurement in 2019. Do we need to complete an extreme and uncontrollable circumstances application on behalf of the group to reweight all four performance categories to 0%?

To receive facility-based scoring in the MIPS Quality and Cost performance categories, the group must submit Improvement Activities and/or Promoting Interoperability data.

If your practice hasn’t submitted any group-level data in either the Improvement Activities and/or the Promoting Interoperability performance categories, you do not need to complete an application. There is no requirement to participate and submit data as a group. Your individually eligible clinicians will receive a neutral payment adjustment unless they’ve submitted individual data on two (2) or more performance categories.

If your practice has submitted any group-level data in either of the Improvement Activities and/or the Promoting Interoperability performance categories, you would need to complete an application to reweight all four performance categories to 0%.

Updated 9/8/2020
Applications for Virtual Groups

We are participating in MIPS as a virtual group and will not able to start/complete our data submission by April 30th. Do we need to submit an extreme and uncontrollable circumstances application?

Yes. The MIPS eligible clinicians in a virtual group will receive a final score and payment adjustment based on the data submitted – or not submitted – by the virtual group. If you are not able to submit data because of the COVID-19 pandemic, you must submit an application to reweight all four performance categories on behalf of the virtual group.

Frequently Asked Questions

Should we delete previously submitted 2019 performance year data if we won’t be able to complete reporting, to get the neutral payment adjustment?

No, but you can submit an extreme and uncontrollable circumstances application for COVID-19 relief until April 30th if you are unable to complete your data submission. If your application is approved, it will override previously submitted data.

There’s a statement in the certification statement of the application that indicates data submission voids reweighting. I thought the application would void the data I’ve submitted. Which is right?

COVID-19 applications submitted between April 3 and April 30, 2020 will void previously submitted data. We wanted to make the application available as soon as possible, so we were not able to update verbiage within the application to align with our policy for this circumstance.

We were approved for performance category reweighting due to extreme and uncontrollable circumstances that occurred during 2019. Can we update our application to cover all MIPS performance categories?

If you were previously approved to have one or two MIPS performance categories reweighted and are now unable to submit data for any MIPS performance category due to the COVID-19 pandemic, please contact the Quality Payment Program. One of our representatives will be able to assist you with updating your existing application. Please note that our systems will not let you submit another application for the same TIN (group), TIN/NPI (individual), or virtual group ID.

Updated 9/8/2020