

MIPS 2024 Final Rule guide



We are here to help provide you and your providers with highlevel information to understand the changes for the 2024 Medicare Physician Payment Schedule and Quality Payment Program (QPP) Final Rule – specifically the updates to the traditional Merit-based Incentive Payment System (MIPS) program.

Questions about any of these changes can be directed towards our MIPS Consulting team at info@intrinsiq.com.



General

Performance threshold

To avoid penalty, the performance threshold is set at 75 points.

Targeted review timeline

CMS changed the Targeted Review timeline from the 60 days following the release of final scores to 30 days before (during the score preview period) and 30 days after the final scores are released.

2024 MIPS performance category weights



Final Rule changes (under their performance category):

Quality

2024 MIPS performance category weights



New measures

There are 11 new measures including measures for diagnostic radiology, palliative care, cardiovascular, ESRD, Health Related Social Needs (HRSN), substance abuse, suicide, and a few we wanted to call out specifically:

- **New composite measure – Preventive care and wellness**

- This is a roll-up of several other measures – some of which have been removed in previous years, some removed this year, and a few who will likely be removed in future years. The new composite measure includes flu, pneumonia, colorectal and breast screening, BMI, tobacco, and blood pressure.

- **Three new retina measures:**

- Acute posterior vitreous detachment appropriate examination and follow-up
- Acute posterior vitreous detachment and acute vitreous hemorrhage appropriate exam and follow-up
- Appropriate screening and plan of care for elevated IOP following intravitreal or periocular steroid therapy

Measures removed

There were 11 measures ~~were~~ removed, including:

- CQM 14 – AMD: Dilated macular exam
- Three measures removed from traditional MIPS but retained for use in the MIPS Value Pathways (MVPs). These are also three measures that roll up into the new composite measure discussed above:
 - 112 – Breast screening
 - 113 – Colorectal screening
 - 128 – BMI screening

Measures with substantive changes

There are 59 measures with changes. There are years when measures with these changes have no benchmarks for the performance year. This does not always happen, but it can occur.

New collection type

~~for Shared Savings ACOs only – Medicare CQMs~~

ICD-10 coding changes

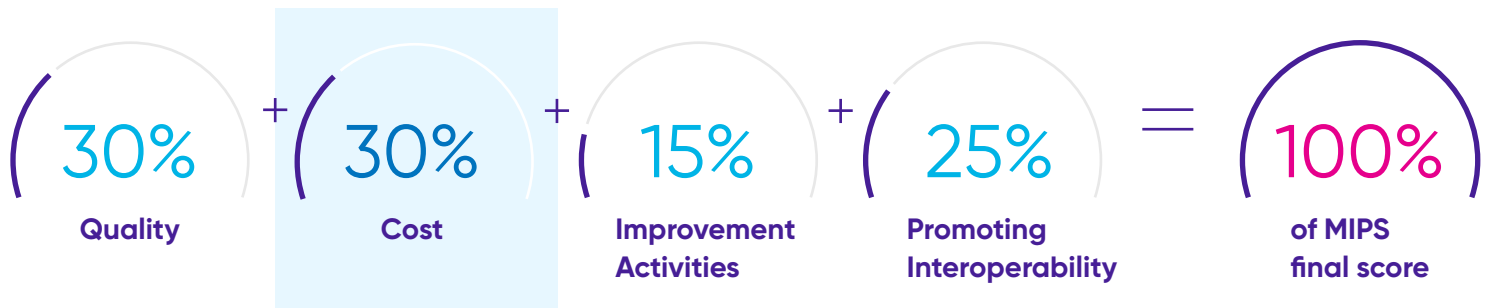
Currently, when ICD-10 coding changes happen, and a measure has 10 percent or more codes that are impacted, CMS will suppress or truncate a MIPS measure. The policy changed starting in 2024 and eliminates the 10 percent threshold. Measures will be evaluated on a case-by-case basis to determine the need for suppression or truncation.

Data completeness

- Previously finalized as
 - 75 percent for 2024 and 2025 and finalized in this rule for 2026 as well
 - 75 percent threshold applies to the new collection type – Medicare CQMs as well

Cost

2024 MIPS performance category weights

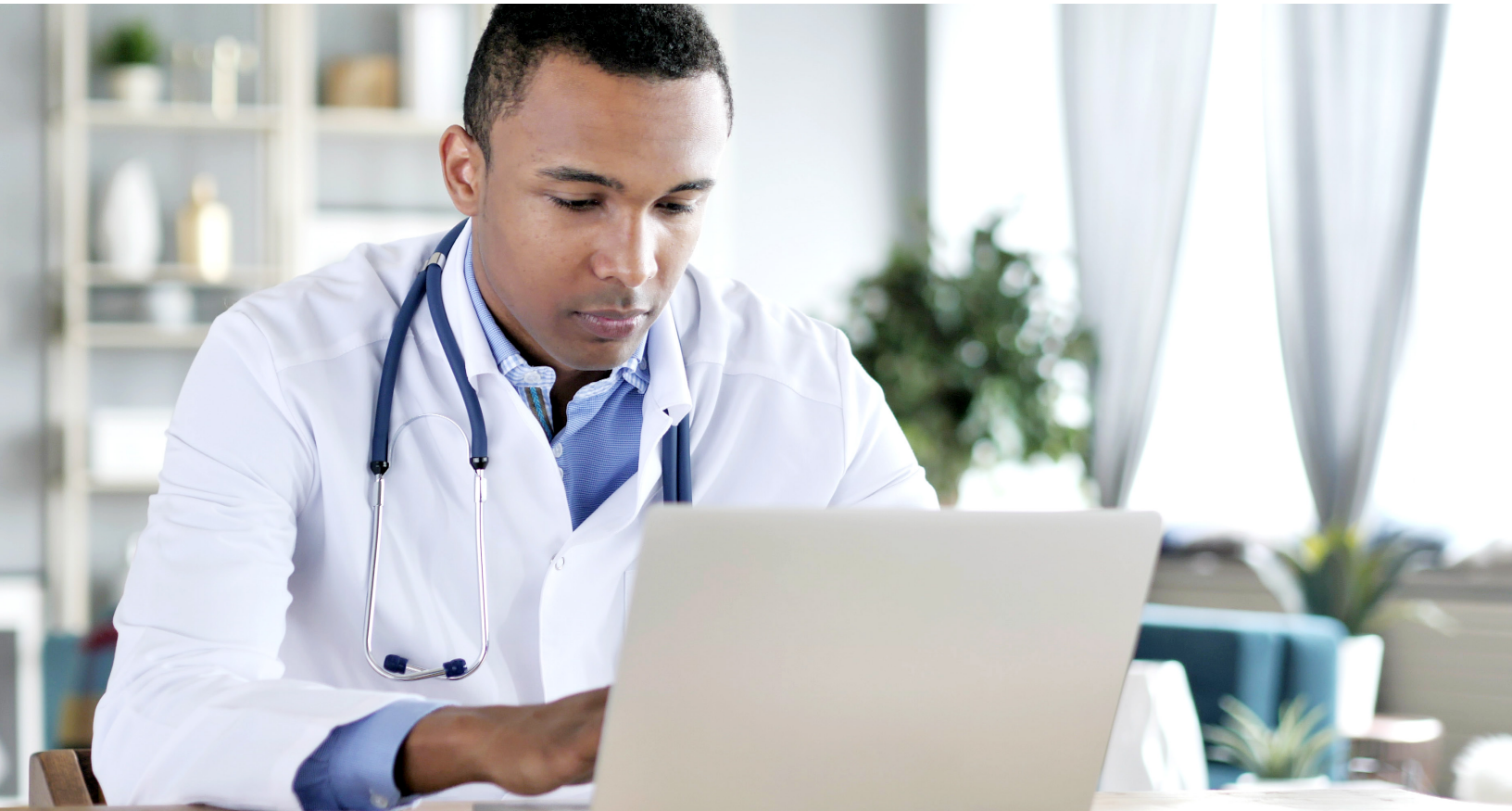


New measures

Five new measures related to psychoses, depression, heart failure, low back pain, and emergency medicine (with a 20-episode case minimum).

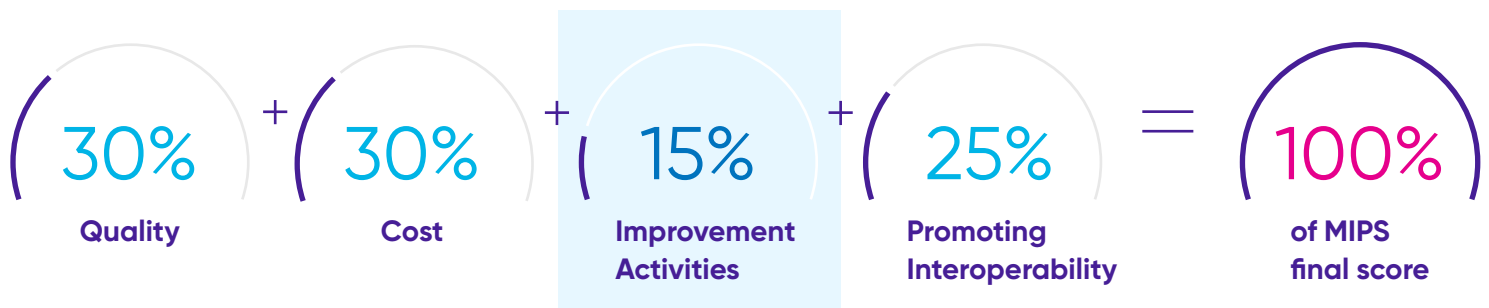
One measure for removal

Simple pneumonia with hospitalization



Improvement Activities

2024 MIPS performance category weights



Five new Improvement Activities

- Improving practice capacity for human immunodeficiency virus (HIV) prevention services
- Practice-wide quality improvement in MIPS Value Pathways
- Use of decision support to improve adherence to cervical cancer screening and management guidelines (submitted by CDC)
- Behavioral/mental health and substance use screening and referral for pregnant and postpartum women
- Behavioral/mental health and substance use screening and referral for older adults

Modified one existing Improvement Activity

- Use of decision support and standardized treatment protocols

Removed three existing Improvement Activities

- Implementation of co-location PCP and MH services
- Obtain or renew an approved waiver for provision of buprenorphine as medication-assisted treatment [MAT] for opioid use disorder
- Consulting appropriate use criteria (AUC) using clinical decision support when ordering advanced diagnostic imaging

Promoting Interoperability

2024 MIPS performance category weights



Continued automatic reweighting for clinical social workers

Please note, automatic reweighting does not apply for the following clinician types: physical therapists, occupational therapists, qualified speech-language pathologists, clinical psychologists, and registered dietitians or nutrition professionals.

Increased the performance period to a minimum of 180 continuous days

within the calendar year. This is an increase from 90 days to 180 days.

Modified the exclusions of the PDMP measure

The measure changed to "Does not electronically prescribe any Schedule II opioids or Schedule III or IV drugs during the performance period." The current exclusion was considered too broad. CMS is also included a technical update to the e-Prescribing measure.

Required to submit a "yes" response for the SAFER Guide measure

Beginning in 2024, clinicians will only need to review the High Priority Practices SAFER Guide.

Updated the CEHRT definition

Proposed to align with the Office of the National Coordinator for Health IT (ONC)'s regulations.

- In a recent proposed rule, ONC signaled a move away from the "edition" construct for certification criteria.
- Instead, all certification criteria will be maintained and updated at 45 CFR 170.315.
- This aligns with this new definition for QPP and the Medicare Promoting Interoperability Program.

Promoting Interoperability con't

CMS removed the CEHRT threshold requirements for Shared Savings Program ACOs; and that, unless otherwise excluded, all MIPS eligible clinicians, QPs, and Partial QPs participating in an ACO, regardless of track, satisfy all of the following **starting in 2025**:

Report the MIPS Promoting Interoperability performance category measures

and requirements to MIPS according to <42 CFR, part 414, subpart O> as either of the following— ++All MIPS eligible clinicians, QPs, and partial QPs participating in the ACO as an individual, group, or virtual group; or ++The ACO as an APM entity.

Earn a MIPS performance category score

for the MIPS Promoting Interoperability performance category at the individual, group, virtual group, or APM entity level.

Advanced APMs:

Required use of CEHRT

The numerical requirement of 75 percent for the use of CEHRT has been eliminated. Now, to qualify as an Advanced Alternative Payment Model (APM), it is specifically mandated that CEHRT must be used.

Eligibility

QP eligibility determinations were maintained at the APM Entity level.

QP thresholds are increasing

- Medicare payments:
 - QP threshold increased from 50 percent to 75 percent
 - Partial QP threshold increased from 40 percent to 50 percent
- Medicare patients seen:
 - QP threshold increases from 35 percent to 50 percent
 - Partial QP threshold increases from 25 percent to 35 percent

APM incentives

Changed from 3.5 percent incentive payment to an increased physician fee schedule update based on the .75 conversion factor (as opposed to the .25 non-QP conversion factor).

2024 changed and modified Merit-based Incentive Payment System (MIPS) Value Pathways (MVPs)

Five new MVPs:

- Focusing on women's health MVP
- Quality care for the treatment of ear, nose, and throat disorders MVP
- Prevention and treatment of infectious disorders including hepatitis C and HIV MVP
- Quality care and mental health and substance use disorders MVP
- Rehabilitative support for musculoskeletal care MVP

There were also modifications to 11 previously finalized MVP's

This guide offers many of the changes which could impact your practice. The Final Rule for the 2024 Physician Fee Schedule, which includes MIPS was released on November 2, 2023 and can be found at the following website: www.cms.gov/newsroom/fact-sheets/calendar-year-cy-2024-medicare-physician-fee-schedule-final-rule



For additional questions, contact our MIPS Consulting team at info@intrinsic.com.

AmerisourceBergen

We are united in our responsibility
to create healthier futures.