2017 MIPS CLAIMS-BASED DATA REPORTING

With 2017 designated as a transitional year by the Centers for Medicare & Medicaid Services (CMS), you can report on just one patient for one measure to test your system and avoid a penalty in 2019. You can report on a quality measures data via claims for the Merit-based Incentive Payment System (MIPS) under the Quality Payment Program (QPP). Use the information below to help you use the claims-based option for reporting quality measures.

The QPP Quality Measures for Pathologists
The CAP lists the QPP Quality Performance Measures with their description, when the measure is applicable, denominator criteria instructions, and instructions on how to report quality activities on the CAP website. Here is the list of the QPP measures:

1. Breast Cancer Resection Pathology Reporting
2. Colorectal Cancer Resection Pathology Reporting
3. Barrett's Esophagus Pathology Reporting
4. Radical Prostatectomy Pathology Reporting
5. Evaluation of HER2 for Breast Cancer Patients
6. *Lung Cancer Reporting (biopsy/cytology specimens)**
7. *Lung Cancer Reporting (resection specimens)**
8. *Melanoma Reporting**

*Bonus points available for high value measures.

Example of a Claims-Based Report
The following example reports the Breast Cancer Resection Pathology Reporting measure on a claim. For the measure's denominator, the diagnosis for breast cancer is indicated in field 21 of the form and the CPT code for tissue exam by pathologist in line 1 of field 24. For the measure's numerator, the quality measure code is reported in line 2 to indicate performance was met.