



Lower Scoring Floors May Mean MIPS Penalties for Your Practice... *if Your Performance isn't Perfect*

MIPS Scoring floors for Quality Measures have been reduced to 1 point for the 2023 Performance Year.		
Quality Measures and Improvement Activities scores are weighted equally at 50% for small practices, but now there's a chance you may miss the performance threshold and be penalized.		
Quality Measure- Achievement Points	Maximum Achievable Points *	Minimum Achievable Points **
New QPP/CQM measure in 2023 for Pathology Quality Measure set (Mismatch Repair...)	10	7
Existing Pathology QPP/CQM measures	7	1
Total Quality achievement points earned <small>CMS accepts your 6 highest scoring measures. To achieve 100% or a perfect performance, you must submit at least 20 cases per measure, and meet the 70% data completeness requirement. Performance of less than 100%, having less than 20 cases for each measure, or not meeting data completeness will result in lower scores.</small>	45	12
Small practice bonus*	6	6
Weighted Quality Score Contribution to MIPS Final Score***	42.5	15.0
Improvement Activities- Achievement Points		
Total Improvement Activities achievement points earned (Assume Maximum points earned)	40	40
Weighted IA Score Contribution to MIPS Final Score***	50	50
Estimated MIPS Final Score solely using QPP/CQM measures	92.5	65.0
Does the MIPS Final Score meet the performance threshold¹ to avoid penalties?	Y	N
<p>Disclaimer:</p> <p><i>Points values assume data completeness and case minimums are achieved by a practice.</i></p> <p><i>*Maximum points value is 7 points per QPP/CQM measure, unless the measure is less than 2 years old. Measures less than 2 years old earn a maximum of 10 points, assuming 20 entities report the new measure to CMS.</i></p> <p><i>**Minimum point value is 1 point per QPP/CQM measure, unless the measure is less than 2 years old. Measures less than 2 years old earn a minimum of 7 points.</i></p> <p><i>***Points calculations are based on weighting applied to pathology practices with 15 or fewer pathologists on staff, who qualify as a small practice in MIPS</i></p> <p><i>1. The 2023 MIPS performance threshold to avoid penalties is 75 points</i></p> <p>Actual points earned will vary by performance of the practice. QCDR measures exclusive to the Pathologists Quality Registry earn you the points you need to maximize your score and earning potential.</p>		

Customers may only earn 1 point per measure and may miss meeting the performance threshold—even if their performance is almost perfect.

Small practices (with <15 clinicians) automatically earn 6 bonus points for Quality.

Quality and Improvement Activities are equally weighted (at 50%) for small practices.

92.5 points is the maximum score that can be earned when solely reporting QPP/CQM measures.

The bonus pool for "exceptional scores" is no longer available. The only way to earn higher payment adjustments in MIPS is to score higher.

QCDR measures are needed for small practices to have the opportunity to earn a final score >92.

Contact our team of experts today at mips@cap.org and learn how you can optimize your performance in MIPS.

Our experience does make a difference.

If your billing company or practice management company reports MIPS for you, ask us how the CAP can help them, help you.