



2022 MIPS: Key Changes for Ophthalmology Practices

2022 is the sixth performance year of the Merit-Based Incentive Payment System (MIPS). There are some key changes that ophthalmology practices should be aware of to be successful in the program. This guide outlines key changes for MIPS in 2022. For other resources, including in-depth guides to each of the categories of MIPS, visit the ASCRS ASOA MACRA Center web page at ascrs.org/macracenter.

Key 2022 MIPS Changes

MIPS Performance Threshold

- Beginning in 2022, the performance threshold must be the “mean or median of the composite performance scores for all MIPS eligible professionals” from a prior period. CMS is establishing the performance threshold for the 2022 performance year/2024 payment year using the mean final score from the 2017 performance year/2019 MIPS payment year.
- **The 2022 MIPS performance threshold will increase from 60 points in 2021 to 75 points in 2022.** Physicians and practices must score at least 75 total points to avoid a maximum 9% penalty in 2024.
- **The additional performance threshold is set at 89 points.** The additional MIPS adjustment factors for exceptional performance are available through the 2022 performance year/2024 MIPS payment year, **making this the last year of the additional performance threshold and the associated additional MIPS adjustment factors for exceptional performance.**
- CMS estimates approximately 91.7 percent of eligible clinicians who submit MIPS data will receive a positive or neutral payment adjustment.

Cost Performance Category

- **As required by statute, Cost will count for 30% of a physician’s final MIPS score in 2022 – increased from 20 points in 2021.**
- For the 2022 performance period, CMS is adding 5 new episode-based cost measures:
 - 2 procedural measures
 - Melanoma Resection
 - Colon and Rectal Resection
 - 1 acute inpatient measure
 - Sepsis
 - 2 chronic condition measures
 - Diabetes
 - Asthma/Chronic Obstructive Pulmonary Disease [COPD]
- CMS is also establishing a new cost measure development process. Under the new process, stakeholders can develop cost measures to expand the inventory of episode-based cost measures. **As part of this process, CMS is adding a measure call for cost measures, beginning in CY2022 for earliest adoption into the MIPS program by the 2024 performance period.**

Quality Performance Category

- **As required by statute, the weight of the Quality Category performance score will be reduced from 40% to 30% of the MIPS final score.**

- **Updated quality measure scoring to remove end-to-end electronic reporting and high priority/outcome measure bonus points beginning with the 2022 performance period.**
- Removed the 3-point floor for scoring measures (with some exceptions for small practices), **beginning with the 2023 performance period.**
- Extended the CMS Web Interface as a quality reporting option for registered groups, virtual groups, or other APM Entities for the 2022 performance period.
- Updated the quality measure inventory so that there will be a total of 200 quality measures available for the 2022 performance period.
- Maintaining the current data completeness threshold at 70% for the 2022 and 2023 performance periods.
- CMS has determined they will be able to create historical benchmarks for the 2022 performance period, using data submitted for the 2020 performance period.

Improvement Activities Performance Category

- CMS is adding 7 new improvement activities, 3 of which are related to promoting health equity.
- Modifying 15 current improvement activities, 11 of which address health equity.
- Removing 6 previously adopted improvement activities.

Promoting Interoperability Performance Category

- Applying automatic reweighting to clinical social workers and small practices.
- Revising reporting requirements in the following ways:
 - Revise reporting requirements for the Public Health and Clinical Data Exchange objective to support public health agencies (PHAs) during future health threats and the long-term COVID-19 recovery process.
 - Added a 4th exclusion for the Electronic Case Reporting measure, available for the 2022 performance period only.
 - Require MIPS eligible clinicians to attest to conducting an annual assessment of the High-Priority Guide of the Safety Assurance Factors for EHR Resilience Guides (SAFER Guides), beginning with the CY 2022 performance period.
 - Modified the Prevention of Information Blocking attestation statements to distinguish this from separate information blocking policies under the Office of the National Coordinator for Health Information Technology (ONC) requirements established in the 21st Century Cures Act Final Rule.
 - Revised the Public Health and Clinical Data Exchange objective to require that MIPS eligible clinicians report the Immunization Registry Reporting and Electronic Case Reporting measures.
 - The remaining measures are now optional; MIPS eligible clinicians who report any of these optional measures will earn 5 bonus points.

For the 2022 reporting year, CMS is not requiring an application from physicians and small practices seeking to qualify for the small practice hardship exception and reweighting. Instead, the exception will be applied automatically. CMS will assign a weight of zero percent to the PI performance category and redistribute its weight to another performance category.

MIPS Value Pathways (MVPs)

- CMS finalized 7 MVPs that will be available **beginning with the 2023 performance year**. Each MVP includes complementary measures and activities and supports patient-centered care and a continued emphasis on the importance of patient outcomes, population health, health equity (including measures and activities that assess health disparities and socioeconomic factors), interoperability, and reduced reporting burden for clinicians.
- **CMS finalized seven MVPs for the 2023 performance year:**
 - Advancing Rheumatology Patient Care

- Coordinating Stroke Care to Promote Prevention and Cultivate Positive Outcomes
- Advancing Care for Heart Disease
- Optimizing Chronic Disease Management
- Adopting Best Practices and Promoting Patient Safety within Emergency Medicine
- Improving Care for Lower Extremity Joint Repair
- Support of Positive Experiences with Anesthesia
- **There is no Ophthalmology-specific MVP finalized for the 2023 performance year.**

APM Performance Pathway (APP)

- CMS will allow MIPS eligible clinicians to report the APP as a subgroup, beginning with the 2023 performance year.
 - Subgroups will consist of “a subset of a group which contains at least one MIPS eligible clinician and is identified by a combination of the group TIN, the subgroup identifier, and each eligible clinician’s NPI.”
 - Subgroups will inherit the eligibility and special status determinations of the affiliated group (identified by TIN). To participate as a subgroup, the TIN will have to exceed the low-volume threshold at the group level, and the subgroup will inherit any special statuses held by the group, even if the subgroup composition won’t meet the criteria.
 - Subgroups won’t be required to register for reporting the APP.

MIPS Participation Options

- All MIPS eligible clinicians, including those in a MIPS APM, may choose to participate in MIPS as:
 - An individual
 - A group
 - A virtual group
 - An APM Entity

Beginning in 2022, CMS has revised the definition of a MIPS eligible clinician to also include:

- Clinical social workers.
- Certified nurse mid-wives.

COVID-19 Flexibilities

- Continuing to offer the application-based **Extreme and Uncontrollable Circumstances (EUC) Policy for performance year 2022.**

Additional Resources

For additional information, contact Jennifer Gallihugh, ASOA Sr. Manager of Strategic Initiatives, at jgallihugh@asoa.org or 703-788-5741.