

Quality Payment PROGRAM

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Merit-based Incentive Payment System (MIPS)

2025 Extreme and Uncontrollable Circumstances Exception Application Guide



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Purpose: This guide will provide general information about the Extreme and Uncontrollable Circumstances (EUC) Exception application and provide step-by-step instructions on how to complete the application.

Already know what MIPS is? Skip ahead by clicking the links in the Table of Contents.



How to Use This Guide

How to Use This Guide

Please Note: This guide was prepared for informational purposes only and isn't intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It isn't intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Table of Contents

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Hyperlinks

Hyperlinks to the [Quality Payment Program website](#) are included throughout the guide to direct the reader to more information and resources.

MIPS Extreme and Uncontrollable Circumstances Exception Application Overview

Overview

We understand that there may be circumstances out of your control that make it difficult for you to meet program requirements. To reduce this burden, we provide an opportunity for clinicians, groups, virtual groups and Alternative Payment Model (APM) Entities to apply and request performance category reweighting for MIPS.

What	The MIPS Extreme and Uncontrollable Circumstances (EUC) Exception application allows you to request reweighting for one or more performance categories to 0%. See Appendix A1, Appendix A2, and Appendix B for more information on performance category reweighting in traditional MIPS, MIPS Value Pathways (MVPs) and the APM Performance Pathway (APP).	
Who	Individual clinicians, groups, virtual groups, and APM Entities. Third party intermediaries can submit an application with permission from the clinician or practice. Subgroups will inherit any reweighting applied to their affiliated group; they can't request reweighting independent of their affiliated group's status. See Slide 11 for additional information.	
Why	You can submit an application to have your MIPS quality, cost, improvement activities, and/or Promoting Interoperability performance categories reweighted to 0% if: You experience an extreme and uncontrollable circumstance outside of your control, such as a natural disaster, ransomware attack or public health emergency (PHE), that prevents you from collecting data for an extended period of time, or that could impact your performance on cost measures. The 2019 Coronavirus (COVID-19) PHE ended on May 11, 2023. We're not accepting applications due to COVID-19 for the 2025 performance year. Note: APM Entities are required to request reweighting for all performance categories.	
When	The MIPS EUC Exception application will close on December 31, 2025, at 8 p.m. ET.	
Where	Sign in to the Quality Payment Program (QPP) website with your HCQIS Access and Roles Profile (HARP) account. You must have a HCQIS Access Roles and Profile (HARP) account to complete and submit an exception application. For more information on HARP accounts, please refer to the Register for a HARP Account document in the QPP Access User Guide (ZIP, 4MB). Note: APM Entity representatives must have the Security Official role in order to complete the Extreme and Uncontrollable Circumstances Exception application on behalf of their entity. Refer to the Connect to an Organization document in the QPP Access User Guide (ZIP, 4MB) for more information on requesting the Security Official role.	
How	Register for a HARP account. - Sign in to the QPP website. - Select 'Exceptions Applications' on the left-hand navigation.	- Select 'Add New Exception.' - Select 'Extreme and Uncontrollable Circumstances Exception.' - Complete the application for individual, group, virtual group, or APM Entity participation.



Policies for Individual Clinicians, Groups, and Virtual Groups

MIPS EUC Exception applications can be submitted for one or more performance categories. Any qualifying data you, or someone on your behalf, submits will override approved reweighting for that performance category and the category will be scored.

- A qualifying data submission voids the 0% performance category weight on a category-by-category basis; a non-qualifying (incomplete) submission for a performance category won't void its 0% weighting. See [Appendix D](#) for more information.
- If you later determine that you're able to collect data for a performance category approved in your application, you can submit that data and it will be scored.
- If the cost performance category is included in your application, cost measures won't be scored even if data is submitted for other performance categories.
- If you submit Medicare Part B Claims measures during the performance year, this will override quality performance category reweighting. However, if you request and are approved for reweighting in all 4 performance categories and don't submit data for another performance category, your MIPS final score for the 2025 MIPS performance period would be equal to the performance threshold and you would receive a neutral payment adjustment in 2027.

You must be scored on at least 2 performance categories to earn a MIPS final score other than the performance threshold.

- When fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100% of your MIPS final score, and the other performance categories are weighted at 0%), the MIPS final score for the 2025 MIPS performance period would be equal to the performance threshold and you would receive a neutral payment adjustment in 2027.

You'll be scored in any performance category that's not included in your application, unless you qualify for reweighting through another policy.

For example:

- If you don't meet the case minimum for any cost measures, the cost performance category will be reweighted.
- You qualify for reweighting under the automatic Extreme and Controllable Circumstances policy.
 - Review the [2025 Automatic Extreme and Uncontrollable Circumstances Fact Sheet \(PDF, 334KB\)](#) for additional information.
- Certain clinician types and individuals, groups, and virtual groups with certain special statuses qualify for automatic reweighting of the Promoting Interoperability performance category.
 - For additional information on automatic reweighting of Promoting Interoperability, review the [2025 Promoting Interoperability Quick Start Guide \(PDF, 849KB\)](#).

Intersection Between the Automatic MIPS EUC Policy and the Application-Based MIPS EUC Policy

If you qualify for reweighting under the automatic MIPS EUC policy, then we'll reweight all 4 performance categories to 0% (rather than just the categories included in your MIPS EUC Exception application). We'll score any performance category for which qualifying data is submitted.

Example

A MIPS eligible clinician who is eligible for the automatic MIPS EUC policy has also submitted an MIPS EUC Exception application. The application was approved for reweighting in the Promoting Interoperability performance category, and the clinician submits qualifying data for the quality and improvement activities performance categories.

You'll be scored as follows:

- The quality and improvement activities performance categories will be scored because you submitted qualifying data for those categories.
- The cost performance category is reweighted to 0% under the automatic EUC policy.
- The Promoting Interoperability performance category is also reweighted to 0% under the automatic EUC policy.

Note: in this example, the MIPS EUC Exception application wasn't needed to reweight the Promoting Interoperability performance category due to the automatic MIPS EUC policy.

Individual Clinicians, Groups, and Virtual Groups Reporting Traditional MIPS / Individual Clinicians and Groups Reporting an MVP

If you qualify for reweighting under the automatic MIPS EUC policy, then we'll reweight all 4 performance categories to 0% (rather than just the categories included in your MIPS EUC Exception application). We'll score any performance category for which qualifying data is submitted.

Example

You're planning to report **traditional MIPS or registered to report an MVP**. You submit an application to have all 4 performance categories reweighted to 0% but later determine you're able to report the improvement activities and Promoting Interoperability performance categories.

You'll receive a MIPS final score based on the qualifying data submitted.

- The improvement activities performance category will be weighted at 15%.
- The Promoting Interoperability performance category will be weighted at 85%.
- The quality performance category will retain a 0% weight because you didn't submit quality data.
- The cost performance category will retain a 0% weight because there are no data submission requirements associated with the cost performance category (reweighting can't be voided).

Individual Clinicians and Groups Reporting the APP

Example

You're a MIPS eligible clinician (or group) planning to report the **APP**. You submit an application to reweight the quality performance category and your application was approved.

You'll receive a MIPS final score based on the data submitted.

- The improvement activities performance category will be weighted to 25%.
- The Promoting Interoperability performance category will be weighted to 75%.
- The quality performance category will be weighted at 0% provided no qualifying data is submitted.
- The cost performance category will retain a 0% weight (because cost isn't scored under the APP).

Policies for Subgroups Reporting an MVP

Clinicians who register to report an MVP as a subgroup will inherit the performance category reweighting approved for their affiliated group. That is, subgroups will inherit any reweighting approved for their affiliated group. However, a qualifying data submission can affect performance category reweighting:

- A qualifying data submission by the affiliated group won't override performance category reweighting for the subgroup.
- A qualifying data submission by the subgroup won't override performance category reweighting for the affiliated group, it will only override performance category reweighting for the subgroup.
- Subgroups **can't** submit a MIPS EUC Exception application as outlined in this guide.

Note: Subgroups can't request reweighting independent of their affiliated group's status.

Policies for APM Entities (Continued)

- **APM Entity applications must be submitted for all performance categories.**
 - You can't submit an application to request reweighting in 1 or 2 performance categories.
 - This is different from our policy for individual, group, and virtual group applications.
- **If your APM Entity's application is approved, the APM Entity will receive a final score equal to the performance threshold even if qualifying data is submitted for the APM Entity.**
 - The MIPS eligible clinicians in the APM Entity will receive a neutral MIPS payment adjustment unless they have a higher final score from individual or group participation.
 - A qualifying data submission for an APM Entity will not override performance category reweighting from an approved application.
 - This is different from our policy for individual, group, and virtual group applications.
- **At least 75% of MIPS eligible clinicians in an APM Entity must qualify for reweighting of the Promoting Interoperability performance category.**
 - Given that APM Entities are required to request reweighting for all performance categories in their EUC Exception application, at least 75% of the MIPS eligible clinicians in the Entity will need to qualify for reweighting in the Promoting Interoperability performance category.
 - They may qualify automatically or by meeting one of the reasons identified in the [MIPS Promoting Interoperability Hardship Exception Application](#).
- **APM Entity representatives must have a QPP Security Official role to complete the Extreme and Uncontrollable Circumstances Exception application on behalf of their entity.**
 - Review the Connect to an Organization resource in the [QPP Access User Guide \(ZIP, 4MB\)](#) for more information on obtaining the Security Official role. For a list of active APMs please refer the [2024 and 2025 Comprehensive List of APMs](#).
- **An approved application won't affect your model-specific reporting requirements.**
 - For example, Shared Savings Program ACOs must report the quality measures identified in the APP to meet Shared Savings Program requirements, unless otherwise excepted.



MIPS Extreme and Uncontrollable Circumstances Exception Application Process: Frequently Asked Questions

How Does CMS Assess MIPS EUC Exception Applications?

We consider the variables affecting your ability to collect and submit data for each performance category when reviewing your application for performance category reweighting due to extreme and uncontrollable circumstances.

During our review, we will review both the event circumstances and the length of time you were impacted as indicated in your application to assess your ability to submit data for each performance category selected in the application.

Example:

The performance period for an improvement activity is a continuous 90-day period (or as specified in the activity description) whereas the performance period for the quality performance category is 12 months. An issue lasting 3 months may have more impact on the availability of measures for the quality performance category than your ability to perform and attest to improvement activities.

How Long Does it Take to Process an EUC Exception Application?

The length of time it takes to process applications depends on the volume of applications we receive. We review all applications in the order that they were received. Once a decision is made regarding your application, you'll receive a notice of our decision, and the status of your application will be reflected in your QPP Account on the QPP website.

Where Can I Look for a Status Update on My EUC Exception Application?

You can monitor your application status in your QPP Account on the [QPP website](#).



Are We Required to Submit Documentation with Our EUC Exception Application?

- No, you aren't required to submit documentation with your application.
- However, you should retain documentation of the circumstances supporting your application for your own records in the event that you are selected by CMS for data validation or an audit. See our [2025 MIPS Data Validation Criteria Guide \(ZIP, 2MB\)](#) for information on the data validation and audit process.

How Can I Correct a Mistake Made on Our EUC Exception Application?

- If you identified an error with your application, please contact the Quality Payment Program Service Center by email at QPP@cms.hhs.gov, by creating a [QPP Service Center ticket](#), or by phone at 1-866-288-8292 (Monday-Friday, 8 a.m. - 8 p.m. ET).

Can Additional Staff Members Access/Receive Notifications About the Status of Our EUC Exception Application?

- Yes, you can add additional staff or representatives who should receive notifications about the status of the application.
- In the **Additional Access** section of the application, provide the email address(es) of additional staff or representatives who you would like to receive email notifications.
- Please note that the additional staff or representatives must have HARP credentials to see the application on the [QPP website](#).



Can We Submit one MIPS EUC Exception Application at the Group Level rather than Separate Applications for Each Individually Eligible Clinician?

- Yes, you can submit a group-level application instead of separate applications for each clinician if the EUC applies to the whole group. However, if the circumstances are specific to a subset of clinicians in the group, you'd need to submit individual applications for each of those clinicians.

Our Third Party Intermediary Experienced Issues and Is Unable to Submit Data on Our Behalf. Can We Submit an EUC Exception Application for this Issue?

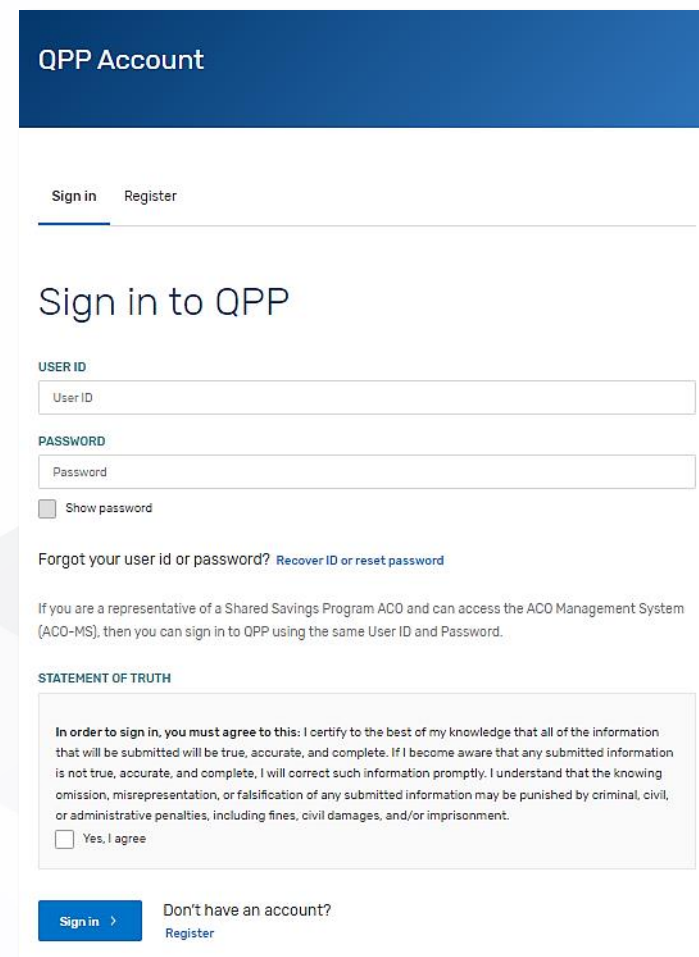
- Our EUC policy doesn't include third party intermediaries, such as Electronic Health Record vendors (EHRs), QCDRs, or Qualified Registries that submit data on behalf of a MIPS eligible clinician. Instead, this policy is geared towards events, such as natural disasters or ransomware attacks, that affect the MIPS eligible clinician's ability to collect and submit data to the third party intermediary, which in turn, could affect the ability of the clinician (or the third party intermediary acting on their behalf) to successfully submit measures and activities to MIPS.
- Furthermore, the MIPS EUC Exception Application is available during the performance year; if you discover during the performance year that your third party intermediary is having issues, you may need to find another third party intermediary to submit your data. You can also submit your own data by uploading a file or attesting to certain performance categories.
- If you discover during or after the submission period that your third party intermediary is unable to (or didn't) submit your data, please contact the Service Center.

MIPS Extreme and Uncontrollable Circumstances Exception Application Process: Application Steps

Step 1: Sign in to Your QPP Account

With your HARP credentials, sign in to your QPP Account on the [QPP website](#).

Note: If you haven't signed in on the [QPP website](#) before, you must register for an account to obtain your HARP credentials.



The screenshot shows the 'QPP Account' sign-in interface. At the top, there's a blue header with 'QPP Account'. Below it, a navigation bar has 'Sign in' (underlined) and 'Register'. The main heading is 'Sign in to QPP'. There are two input fields: 'USER ID' with a placeholder 'User ID' and 'PASSWORD' with a placeholder 'Password'. A checkbox labeled 'Show password' is below the password field. A link 'Forgot your user id or password? Recover ID or reset password' is provided. A paragraph explains that users of the ACO Management System (ACO-MS) can use the same credentials. A 'STATEMENT OF TRUTH' section contains a certification statement and a 'Yes, I agree' checkbox. At the bottom, there's a blue 'Sign in >' button and a 'Don't have an account? Register' link.

QPP Account

[Sign in](#) [Register](#)

Sign in to QPP

USER ID

PASSWORD

☐ Show password

Forgot your user id or password? [Recover ID or reset password](#)

If you are a representative of a Shared Savings Program ACO and can access the ACO Management System (ACO-MS), then you can sign in to QPP using the same User ID and Password.

STATEMENT OF TRUTH

In order to sign in, you must agree to this: I certify to the best of my knowledge that all of the information that will be submitted will be true, accurate, and complete. If I become aware that any submitted information is not true, accurate, and complete, I will correct such information promptly. I understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.

☐ Yes, I agree

[Sign in >](#) [Don't have an account? Register](#)

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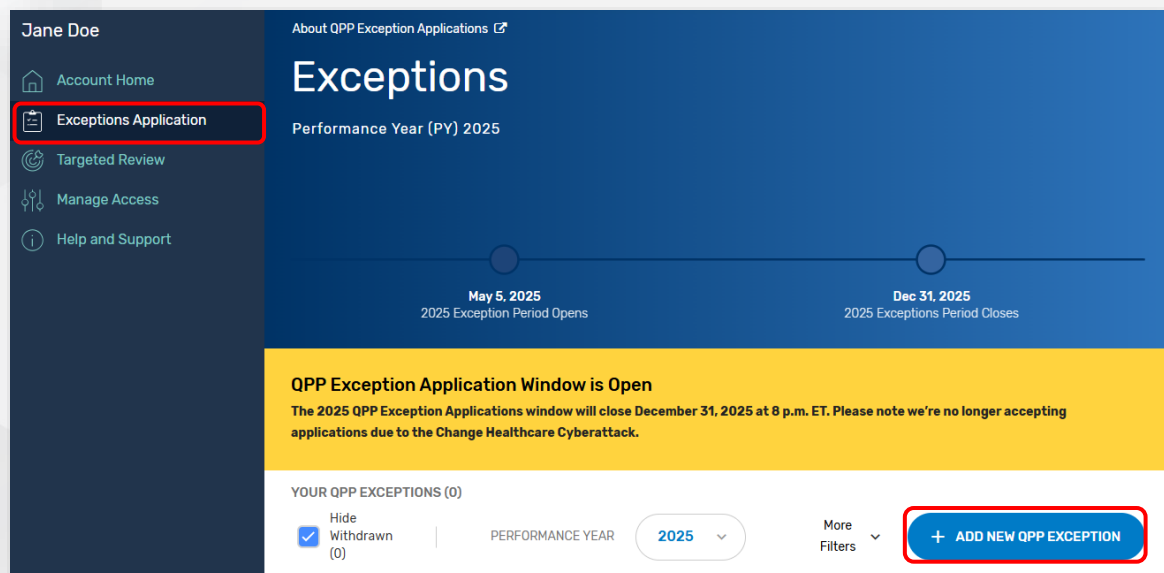
Step 2: Navigate to Your Exception Applications

Once you're signed into your account, select:

- The **Exception Application** tab in the left-hand navigation menu, then click + **Add New QPP Exception**

OR

- The **Start an Application** quick link on the home page.



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Step 3: Select Extreme and Uncontrollable Circumstances Exception

Select the **Extreme and Uncontrollable Circumstances Exception**, then click **Continue**.

Add New Exception

Exception Type *

☒ **Extreme and Uncontrollable Circumstances Exception**

The Extreme and Uncontrollable Circumstances Exception application allows you to request reweighting for any or all performance categories if you encounter an extreme and uncontrollable circumstance or public health emergency that is outside of your control.

All other events such as vendor issues, decertification of EHR, etc. should be filed as a Promoting Interoperability Hardship Exception.

CANCEL CONTINUE >

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Step 4: Select Application Type

Select the **participation level** at which you intend (or intended) to participate in MIPS, then select **Save & Continue**.

Note: If reporting an MVP with a subgroup, you will inherit any reweighting approved for your affiliated group.

Subgroups can't request reweighting independent of their affiliated group's status.

← Add New Extreme and Uncontrollable Circumstances Application

Application Type: * ?

- ☒ Individual
- ☐ Group
- ☐ Virtual Group
- ☐ APM Entity

Clinician NPI * ?

e.g. 1234567890

CANCEL

SAVE

SAVE & CONTINUE >

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Step 5: Enter Participation Level Information

Enter the required participation level information.

The required information for each participation level is as follows:

Participation Level	Required Information
Individual Clinician	- National Provider Identifier (NPI) - Practice Affiliation
Group	Taxpayer Identification Number (TIN)
Virtual Group	Virtual Group Identifier
APM Entity	APM Entity ID

Note: If you're an individual clinician, group, or virtual group requesting reweighting of only 1 or 2 MIPS performance categories and intend to submit data for others, it is critical that you select the application type that aligns with the level at which you intend to submit data to MIPS (i.e., at the individual, group or virtual group level).

Submission Information * Required

Individual Details

Clinician NPI 0839723588 Change	Clinician's Name Brenda Drerenberger	Clinician Type Doctor of Medicine
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Group Practice Name * [?](#)

Pfeffer Group (TIN: *****9403)

Pfeffer Group (TIN: *****9403)

Not listed

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Step 6: Enter Submitter Details

Enter your **contact information** (as the submitter) and identify your **relationship to the party** identified in the application.

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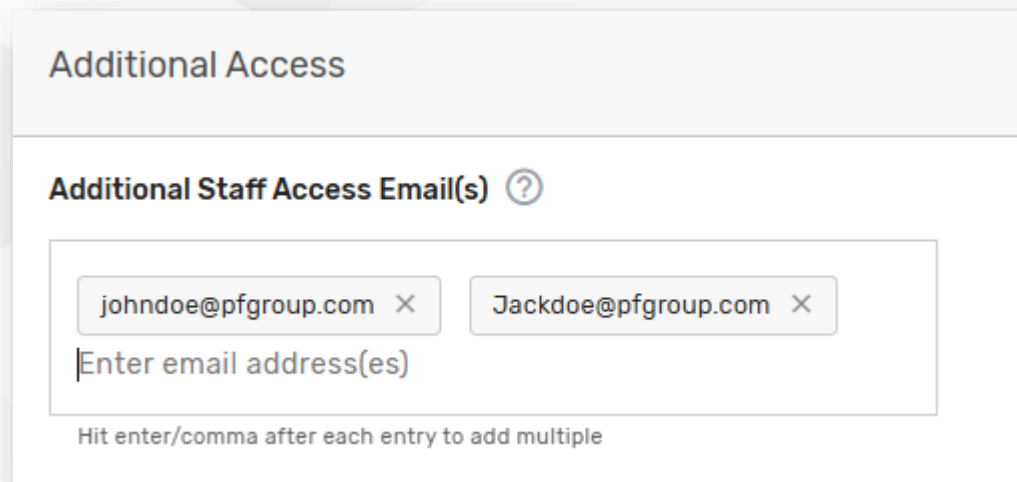
The screenshot shows a web form titled "Submitter Details". It contains three main sections: "Contact Phone Number", "Contact Email Address", and "Submitter/Third Party Intermediary Relationship". The "Contact Phone Number" section has a text input field with "(866) 288-8292" and a separate field for "Ext. (Optional)". The "Contact Email Address" section has a text input field with "janedoe@pfgroup.com". The "Submitter/Third Party Intermediary Relationship" section features a dropdown menu with "Please specify" selected and highlighted with a red border. The dropdown list includes the following options: "Please specify", "Clinician", "Consultant", "Physician Staff", "Registry / QCDR", "EHR Vendor", and "Other".

Submitter Details	
Contact Phone Number * ?	
Phone Number (866) 288-8292	Ext. (Optional)
Contact Email Address * ?	
janedoe@pfgroup.com	
Submitter/Third Party Intermediary Relationship * ?	
Please specify ^	
Please specify	
Clinician	
Consultant	
Physician Staff	
Registry / QCDR	
EHR Vendor	
Other	

Step 7: Enter Additional Staff in the Additional Access Section

You can identify additional users to receive notifications about the application in the **Additional Access** section.

If there's a HARP account associated with the email address(es) you provide, the person will be able to sign in to their QPP Account on the [QPP website](#) and access the application.



The screenshot shows a web form titled "Additional Access". Below the title is a section labeled "Additional Staff Access Email(s)" with a help icon. There are two input fields, each containing an email address and a close button (X): "johndoe@pfgroup.com" and "Jackdoe@pfgroup.com". Below these is a larger input field with the placeholder text "Enter email address(es)". At the bottom of the form, there is a note: "Hit enter/comma after each entry to add multiple".

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Step 8: Enter the Extreme and Uncontrollable Circumstances Event Type

Select the appropriate **Event Type** for the extreme and uncontrollable circumstance you experienced.

Then, enter the timeframe for which you were impacted by the extreme and uncontrollable event by completing the **Event Date Range**. If you continue to be impacted by the event, select **Event Still Persists**.

Note: The 2019 COVID-19 PHE ended on May 11, 2023. We're not accepting applications due to COVID-19 for the 2025 performance year.

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Extreme and Uncontrollable Circumstances Details

Event Type * ?
☐ Natural Disaster
☒ Ransomware / Malware
☐ Medical Issue
☐ Other

Event Date Range * ?
Start Date*
2/3/2025 To Present*
☒ Event Still Persists

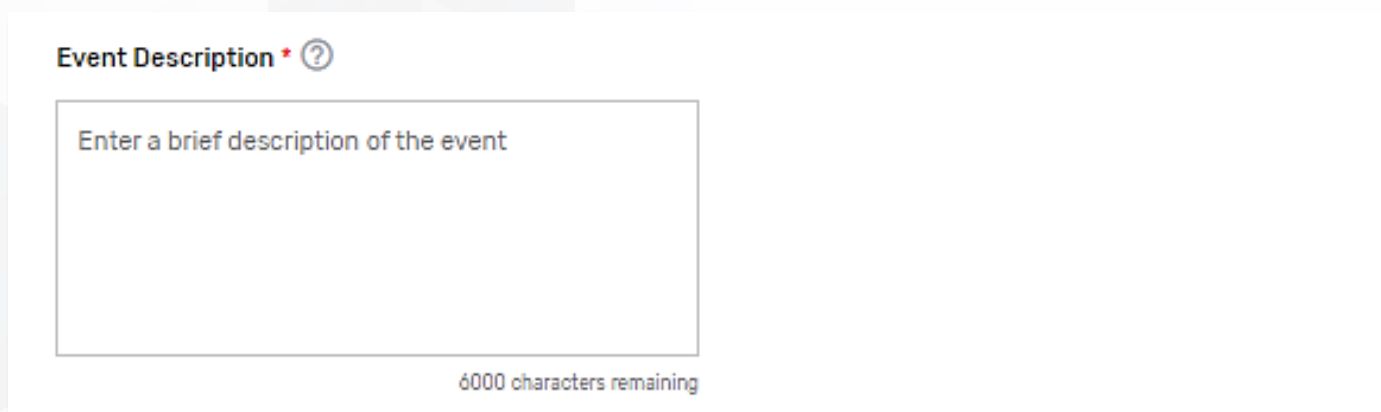
Event Description * ?

Enter a brief description of the event

6000 characters remaining

Step 9: Provide a Brief Description of the Challenges You Experienced

Provide a **brief description** about the data collection challenges that you experienced due to the extreme and uncontrollable event and how your 2025 performance data will be impacted.



The screenshot shows a web form titled "Event Description" with a red asterisk and a help icon. Below the title is a large text input area with the placeholder text "Enter a brief description of the event". At the bottom right of the input area, it says "6000 characters remaining".

Note: You don't need to submit supporting documentation with your application.

However, you should retain documentation of the circumstances supporting your application for your own records in the event that you're selected by CMS for data validation or an audit.

See our [2025 MIPS Data Validation Criteria \(ZIP, 2MB\)](#) for information on the data validation and audit process.

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Step 10: Select MIPS Performance Categories

Select each **MIPS performance category** for which you're requesting reweighting by checking the corresponding box next to the category name, then select **Submit for Review**.

Note: All performance categories will be automatically selected for APM Entity applications.

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Performance Categories Affected * ?

- ☒ **Quality**
Select this category when the event or circumstance has affected your performance or ability to collect quality data for a significant portion of the 12-month performance period. **If this category is approved for reweighting, you won't receive a score in this category unless data are submitted for it.**
- ☒ **Promoting Interoperability**
Select this category when the event or circumstance has affected your performance or ability to collect Promoting Interoperability data for any 90 consecutive day period during the calendar year. **If this category is approved for reweighting, you won't receive a score in this category unless data are submitted for it.**
- ☒ **Improvement Activities**
Select this category when the event or circumstance has affected your ability to implement any improvement activity for any 90 consecutive day period during the calendar year. **If this category is approved for reweighting, you won't receive a score in this category unless data are submitted for it.** Note participants in APMs are eligible to receive automatic credit in the improvement activities performance category; for these MIPS eligible clinicians (and groups/virtual groups with APM participants), submitting data in the quality and/or Promoting Interoperability performance categories will initiate a score in the improvement activities performance category, even if this category is approved for reweighting.
- ☒ **Cost**
Select this category when you believe the event or circumstance has affected your performance on cost measures. **If this category is approved for reweighting, you won't receive a score in this category even if data are submitted for other performance categories.**

WITHDRAW **SUBMIT FOR REVIEW >**



Step 11: Submit Extreme and Uncontrollable Circumstances Application

Once you're done with your application, review the disclosures, then select the **Certify & Submit** button.

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Certify and Submit for Review

▼ Submission Summary

EXPORT (PDF)

General Notice

If an application is approved for reweighting of all categories and no data is submitted, the clinician, group or virtual group will receive a final score which is equal to the performance threshold score and receive a neutral MIPS payment adjustment. If the clinician, group, or virtual group associated with this application submits data for any performance category included in an approved application, data submission will void the reweighting for that performance category and be part of your final score. When fewer than 2 performance categories are scored, the final score for the 2025 MIPS performance period would be equal to the performance threshold, resulting in a neutral payment adjustment in the 2027 MIPS payment year.

Disclosures

Submission of this MIPS Extreme and Uncontrollable Circumstance Application is voluntary. Failure to provide necessary information to identify the clinician or group will result in processing delays or denial of the MIPS Extreme and Uncontrollable Circumstance Application.

Notice

By submitting this Extreme and Uncontrollable Circumstances Hardship Exception Application, I am certifying that the details entered are correct to the best of my knowledge. Furthermore, I am submitting this request as if I physically signed and submitted a hard copy of this form.

CLOSE

CERTIFY & SUBMIT >

Step 11: Submit Extreme and Uncontrollable Circumstances Application – continue

After you submit your application, you'll receive a message stating that your application has been successfully submitted and is pending review. You'll also receive an email notification.

The screenshot displays the 'YOUR QPP EXCEPTIONS (1)' section of a web application. At the top, there are filters for 'Hide Withdrawn (0)', 'PERFORMANCE YEAR' set to '2025', and a 'More Filters' dropdown. A blue button labeled '+ ADD NEW QPP EXCEPTION' is on the right. Below the filters, the results are sorted by 'Application ID'. A single exception is listed for 'Brenda Drerenberger' with ID '13834', categorized as '(E&UC: Individual)'. The NPI is '0839723588' and the status is 'Submitted - In Review', which is highlighted with a red box. A 'VIEW DETAILS' button is next to the status. At the bottom left of the card, it says 'Last Updated < 1 minute ago by Jane Doe'. A red 'WITHDRAW' button is at the bottom right of the card.

OPP EXCEPTION ID: 13834	NPI: 0839723588	Status: Submitted - In Review	VIEW DETAILS
Brenda Drerenberger (E&UC: Individual)			
Last Updated < 1 minute ago by Jane Doe			WITHDRAW

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Help and Version History

Where Can You Go for Help?

Contact the Quality Payment Program Service Center by email at QPP@cms.hhs.gov, by creating a [QPP Service Center ticket](#), or by phone at 1-866-288-8292 (Monday through Friday, 8 a.m. - 8 p.m. ET). To receive assistance more quickly, please consider calling during non-peak hours—before 10 a.m. and after 2 p.m. ET.

People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant.

Visit the [Quality Payment Program website](#) for other [help and support information](#), to learn more about [MIPS](#), and to check out the resources available in the [Quality Payment Program Resource Library](#).

Visit the [Small Practices page](#) of the Quality Payment Program website where you can **sign up for the monthly QPP Small Practices Newsletter** and find resources and information relevant for small practices.

Version History

If we need to update this document, changes will be identified here.

DATE	DESCRIPTION
05/06/2025	Original Posting.

According to the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.), no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1314 (Expiration date: 2/28/2027). This information collection is the tool for the MIPS Extreme and Uncontrollable Circumstances (EUC) Exception application allows you to request reweighting for one or more performance categories to 0%. The time required to complete this information collection is estimated to average varies per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is voluntary and All information collected will be kept private in accordance with regulations at 45 CFR 155.260, Privacy and Security of Personally Identifiable Information. Pursuant to this regulation, CMS may only use or disclose personally identifiable information to the extent that such information is necessary to carry out their statutory and regulatory mandated functions. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, MD 21244-1850. If you have questions or concerns regarding where to submit your documents, please contact QPP at qpp@cms.hhs.gov.

Under the Privacy Act of 1974 (5 U.S.C. 552a) any personally identifying information obtained will be kept private to the extent of the law.



Appendices

Appendix A1. 2025 Performance Year MIPS Performance Category Weight Redistribution Policies for Individual Clinicians, Groups, Virtual Groups, and APM Entities Reporting Traditional MIPS or MVPs

The table below illustrates the 2025 performance category weights and reweighting policies that CMS will apply to clinicians, groups, and virtual groups reporting traditional MIPS or MVPs. (Small practices should refer to [Appendix A2.](#))

Refer to [Appendix B](#) for reweighting policies for APM Entities reporting the APP. APM Entities reporting traditional MIPS can **only** request reweighting for **all** performance categories.

If fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100%, or all performance categories are weighted at 0%), the clinician, group, or virtual group will receive a final score equal to the performance threshold and the MIPS eligible clinicians will receive a neutral payment adjustment in the 2027 payment year.

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under traditional MIPS	30%	30%	15%	25%
Reweight 1 Performance Category				
No Cost (Cost → Quality and Promoting Interoperability)	55%	0%	15%	30%
No Improvement Activities (Improvement Activities → Quality)	45%	30%	0%	25%
No Promoting Interoperability (Promoting Interoperability → Quality)	55%	30%	15%	0%
No Quality (Quality → Promoting Interoperability)	0%	30%	15%	55%

Table continues on the following slide.



Appendix A1. 2025 Performance Year MIPS Performance Category Weight Redistribution Policies for Individual Clinicians, Groups, Virtual Groups, and APM Entities Reporting Traditional MIPS or MVPs (Continued)

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
Reweight 2 Performance Categories				
No Cost + No Promoting Interoperability (Cost + Promoting Interoperability → Quality)	85%	0%	15%	0%
No Cost + No Quality (Cost + Quality → Promoting Interoperability)	0%	0%	15%	85%
No Cost + No Improvement Activities (Cost + Improvement Activities → Promoting Interoperability + Quality)	70%	0%	0%	30%
No Promoting Interoperability + No Quality (Promoting Interoperability + Quality → Cost + Improvement Activities)	0%	50%	50%	0%
No Promoting Interoperability + No Improvement Activities (Promoting Interoperability + Improvement Activities → Quality)	70%	30%	0%	0%
No Quality + No Improvement Activities (Quality + Improvement Activities → Promoting Interoperability)	0%	30%	0%	70%
Reweight 3 Performance Categories				
If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold and you'll receive a neutral payment adjustment.				
Reweight 4 Performance Categories				
If all performance categories are reweighted to 0%, you'll receive a score equal to the performance threshold and you'll receive a neutral payment adjustment.				



Appendix A2. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2025 Performance Year: Small Practices

The table below illustrates the 2025 performance category weights and reweighting policies that CMS will apply to small practices.

Refer to [Appendix B](#) for reweighting policies that apply to APM Entities reporting the APP. APM Entities reporting traditional MIPS or MVPs can **only** request reweighting for **all** performance categories.

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under traditional MIPS for small practices	30%	30%	15%	25%
Reweight 1 Performance Category				
No Cost (Cost → Quality and Promoting Interoperability)	55%	0%	15%	30%
No Improvement Activities (Improvement Activities → Quality)	45%	30%	0%	25%
No Promoting Interoperability (Promoting Interoperability → Quality and Improvement Activities)	40%	30%	30%	0%
No Quality (Quality → Promoting Interoperability)	0%	30%	15%	55%

Table continues on the following slide.



Appendix A2. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2025 Performance Year: Small Practices

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
Reweight 2 Performance Categories				
No Cost + No Promoting Interoperability (Cost + Promoting Interoperability → Quality and Improvement Activities)	50%	0%	50%	0%
No Cost + No Quality (Cost + Quality → Promoting Interoperability)	0%	0%	15%	85%
No Cost + No Improvement Activities (Cost + Improvement Activities → Promoting Interoperability + Quality)	70%	0%	0%	30%
No Promoting Interoperability + No Quality (Promoting Interoperability + Quality → Cost + Improvement Activities)	0%	50%	50%	0%
No Promoting Interoperability + No Improvement Activities (Promoting Interoperability + Improvement Activities → Quality)	70%	30%	0%	0%
No Quality + No Improvement Activities (Quality + Improvement Activities → Promoting Interoperability)	0%	30%	0%	70%

Note: If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold and you'll receive a neutral payment adjustment.



Appendix B. 2025 Performance Year MIPS Performance Category Weight Redistribution Policies for APM Entities and APM Participants Reporting the APP

The table below illustrates the 2025 performance category weights and reweighting policies that CMS will apply to APM Entities reporting traditional MIPS or MVPs and to individual clinicians, groups and APM Entities reporting via the APP.

Reminders:

- Cost isn't scored under the APP.
- There are no reporting requirements for the improvement activities performance category under the APP for the 2025 performance year. Participants reporting via the APP will automatically receive full credit for the improvement activities performance category.
- Participants reporting via the APP will follow the same reporting requirements as traditional MIPS for the Promoting Interoperability performance category.

Reminder: APM Entities can only submit an EUC Exception Application for all performance categories.

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under the APP	50%	0%	20%	30%
Reweight 1 Performance Category				
No Promoting Interoperability (Promoting Interoperability → Quality)	75%	0%	25%	0%
No Quality (Quality → Promoting Interoperability)	0%	0%	25%	75%
Reweight 2+ Performance Categories				
If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold and you'll receive a neutral payment adjustment.				



Appendix C. MIPS Extreme and Uncontrollable Circumstances Exception Application Status Descriptions

Draft in Progress	Submitted – Pending Approval	Approved / Denied	Withdrawn
 Draft in Progress	 Submitted - Pending Approval	 Approved	 Withdrawn
You're currently working on your application and haven't submitted it yet. Select Manage to continue working on your application.	You've successfully completed and submitted your application. Applications are reviewed in the order of which they're received.	We completed our review of your application and approved your request.	You've withdrawn your application. You can withdraw your application at any point in the process. An application can't be reopened after being withdrawn. You'll need to complete a new application.
		 Denied	
		We completed our review of your application and denied your request.	

Appendix D. Minimum Criteria for a Qualifying Data Submission

The minimum criteria for a qualifying data submission (i.e., eligible for scoring) in the quality, improvement activities, and Promoting Interoperability performance categories are:

- **Quality Performance Category:** A qualifying data submission for the quality performance category must include numerator and denominator information for at least one quality measure from the list of MIPS quality measures to be considered a data submission and scored. Data submissions without any scorable data (e.g., practice ID, date, activity ID, measure ID, or CMS Electronic Health Record (EHR) Certification ID (CEHRT ID)) wouldn't satisfy the submission criteria.
- **Improvement Activities Performance Category:** A qualifying data submission for the improvement activities performance category must include a “yes” response for at least one improvement activity to be considered a data submission and scored. A submission with only a date and practice ID won't be considered a data submission and will be assigned a null score.
- **Promoting Interoperability Performance Category:** A qualifying data submission for the Promoting Interoperability performance category must include all of the following elements:
 - Performance data, including any claim of an applicable exclusion, for the required measures in each objective, as specified by CMS;
 - Required attestation statements, as specified by CMS;
 - CMS EHR Certification ID (CEHRT ID) from the Certified Health IT Product List (CHPL); and
 - The start date and end date for the applicable performance period as set forth in § 414.1320.

A Promoting Interoperability data submission with only a date and practice ID won't be considered a qualifying data submission and will be assigned a null score; it won't override reweighting of the Promoting Interoperability performance category.

The minimum criteria for a qualifying data submissions is intended to mitigate the negative scoring impact on clinicians due to unintentional submissions without data that can be scored, which would override an approved reweighting application or a prior data submission and result in a zero score.