



# Merit-based Incentive Payment System Measures

for Cardiologists

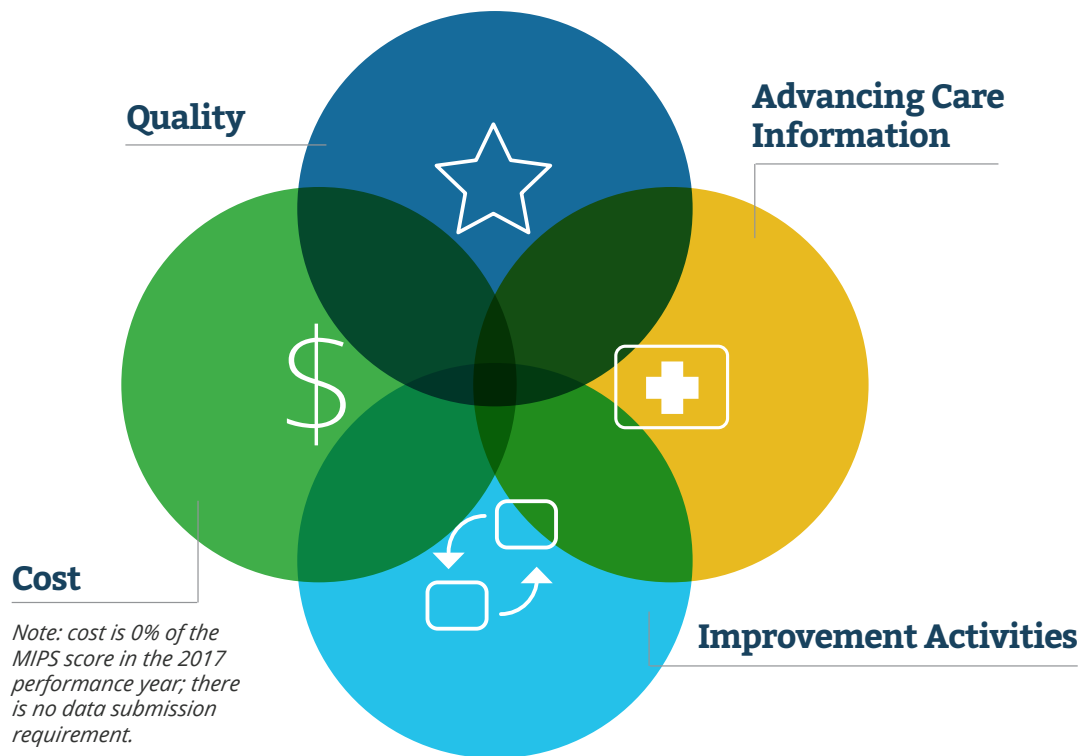
## What is MIPS?

The Merit-based Incentive Payment System (MIPS) is one of the two tracks of the Quality Payment Program, which implements provisions of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).

Visit [QPP.CMS.GOV](http://QPP.CMS.GOV) to understand program basics, including submission timelines, and how to participate.

## What are the Measures that I Must Submit to Successfully Participate in MIPS?

If you are participating in the Quality Payment Program through MIPS, you will be able to pick your pace the first year through three participation options – test, partial, and full. Your Medicare payment adjustment will be based on submitting data and your performance for the following MIPS categories:



# What Measures Do I Submit for Each Category in 2017?

This resource provides a non-exhaustive sample of measures that may apply to cardiologists. Make sure to consider your reporting method, practice size, patient mix, and performance period to choose the measures that best suit you. See a full list of measures at [QPP.CMS.GOV](http://QPP.CMS.GOV).



**60%**  
of score

## Quality<sup>i</sup>

Assess the value of care to ensure patients get the right care at the right time

- Prescribe ACE inhibitor or ARB therapy and beta-blocker therapy for patients with left ventricular systolic dysfunction (LVSD)
- Prescribe antiplatelet and beta-blocker therapy for patients with coronary artery disease (CAD)
- Discuss and provide a care plan
- Document current medications
- Use aspirin or other antiplatelet agent to treat ischemic vascular disease
- Control high blood pressure
- Screen for high blood pressure and provide follow up
- Avoid inappropriate cardiac stress imaging in asymptomatic, low-risk patients
- Avoid inappropriate, routine cardiac stress imaging after PCI
- Prescribe anticoagulation therapy to treat atrial fibrillation and atrial flutter
- Transmit specialist reports
- Screen for tobacco use and provide cessation intervention
- Prescribe statin therapy to prevent and treat cardiovascular disease



**25%**  
of score

## Advancing Care Information<sup>ii</sup>

Support the secure exchange of health information and the use of certified electronic health record technology (measures listed are for the base score only)

- Conduct security risk analysis
- e-prescribing
- Provide patient electronic access
- Health information exchange



**15%**  
of score

## Improvement Activities<sup>iii</sup>

Support care coordination, patient engagement, patient safety, population management, and health equity

- Provide 24/7 access to clinicians/groups who have real-time access to patient's medical record
- Participate in systematic anticoagulation program
- Implement anticoagulant management improvements
- Use Qualified Clinical Data Registry (QCDR) for feedback reports that incorporate population health
- Participate in Transforming Clinical Practice Initiative (TCPI)
- Collect and follow up on patient experience and satisfaction data
- Engage new Medicaid patients and follow-up



**0%**  
of score

## Cost

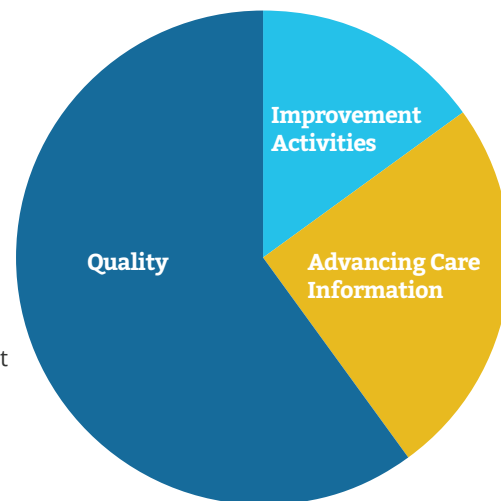
Helps create efficiencies in Medicare spending

- No reporting requirement in 2017 (measures are calculated based on Medicare claims data but will not be used to determine your payment adjustment in the first payment year (2019) of the program)

<sup>i</sup>60% of score for most eligible clinicians, unless they are in a MIPS APM

<sup>ii</sup>25% of score for most eligible clinicians

<sup>iii</sup>15% of score for most eligible clinicians



For more information and a list of Advanced APMs that may be right for you visit:

[QPP.CMS.GOV](http://QPP.CMS.GOV)

