MACRA 101

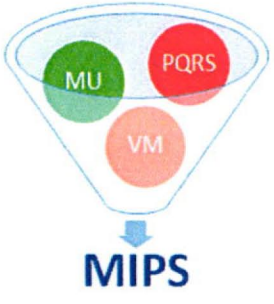
In 2015, the **Medicare Access and CHIP Reauthorization Act** (MACRA) created the **Merit-Based Incentive Payment System** (MIPS) and **Alternative Payment Models** (APM)

- Ended the Sustainable Growth Rate (SGR) formula
- New framework – rewards better care, not just more care
- 2 ways to participate: MIPS and APM Quality Payment Programs

Initially, most clinicians will be in **MIPS** (Merit-Based Incentive Payment System)

CPI

MIPS streamlines existing programs, adds Clinical Performance Improvement activities.



Who is Exempt from MIPS?

- FIRST year of Medicare Part B participation
- Certain participants in ADVANCED Alternative Payment Models
- Below low patient volume threshold
  (Medicare billing charges ≤ $10,000 ***AND*** *provides care for ≤ 100 or fewer Medicare patients in one year)*

Some clinicians will be eligible to participate in **Alternative Payment Models (APM)**. These include

- **Advanced APMs**
  - Bear specified financial risk; quality measures similar to MIPS; EHR technology use required
- **CMS Innovation Center Models**
  - Medicare Shared Savings Program (MSSP) Tracks 2 & 3; Comprehensive Primary Care Plus (CPC+); NextGen ACO models; Comprehensive ESRD models (Large Dialysis Organization arrangement); and Oncology Care Model (2-sided risk arrangement, begins 2018).

Key Points

✓ CMS will not release the Final Rule on MACRA until **November 2016**

✓ The program year for MACRA begins on **January 1, 2017** ***(payment adjustments will occur in 2019)***

✓ Physicians will be able to **"pick their pace of participation"** in Quality Payment Program reporting:

- Submit some 2017 data to test the Quality Payment Program
- Participate for part of the year in 2017
- Participate for the full year in 2017
- Participate in an Advanced APM in 2017