

**2018 PROPOSED MIPS APM Reporting Changes for Participants in
the MaineHealth ACO's MSSP Contract**

Topic	2017 Reporting Year	2018 Reporting Year (PROPOSED)
Identifying Shared Savings Program ACO Participants	Determination based on information found in CMS and PECOS and inclusion on an APM Participant List on one of three "snapshot" dates: March 31, June 30 or August 31	A fourth "snapshot" date will be added to determine inclusion on an APM Participant List: December 31
Quality	Continue to use quality measure data reported through MSSP	Quality Improvement points will be available based on 2017 quality performance data reported through MSSP
Improvement Activity	Award full credit in this category	Continue to award full credit
Advancing Care Information (ACI) Performance Category	Allow eligible clinicians to use either 2014 or 2015 Edition CEHRT	Remove requirement to use ONLY 2015 Edition CEHRT – CMS will allow the use of either 2014 or 2015 Edition CEHRT Bonus points awarded for use of 2015 Edition CEHRT
Cost	Not evaluated	Not evaluated
Low-Volume Threshold (Calculated for APM Entity Group as a Whole)	≤ \$30,000 in Part B allowed charges OR Providing care for ≤ 100 Part B beneficiaries	≤ \$90,000 in Part B allowed charges OR Providing care for ≤ 200 Part B beneficiaries
Non-Patient Facing	Groups: > 75% NPIs billing under Group TIN are labeled as non-patient facing	Adding Virtual Groups to non-patient facing criteria using same definition
Virtual Groups	N/A	Proposing to add that Virtual Groups participating in MIPS APMs payment adjustments are based on the APM Entity score using the APM scoring standard
Submission Mechanisms	Required to use only 1 submission mechanism per performance category	Allow to submit through multiple submission mechanisms within a performance category

For more detailed information regarding the proposed changes please visit [Proposed Rule Fact Sheet](#)