

MACRA: In Focus

Update on the Final Rule

The Department of Health & Human Services (HHS) has finalized the Medicare Access & CHIP Reauthorization Act (MACRA) **Final Rule**, which was released on October 14, 2016.

This article is intended to share the highlights of the Final Rule that affect how the MaineHealth ACO will participate in MACRA. There is no specific action being asked of MaineHealth ACO participants at this time.

The Final Rule was developed in response to comments and feedback the Centers for Medicare and Medicaid Services (CMS) received during a listening tour that was conducted following the MACRA Proposed Rule release in April of 2016. By passing MACRA through bipartisan support, Congress reinforced Medicare's shift to a more value-based payment system and away from volume-based reimbursements.

The Final Rule establishes flexibility and options for clinicians' level and pace of participation through two payment tracks: **Advanced Alternative Payment Models (Advanced APMs)** and the **Merit-Based Incentive Program (MIPS.)**

An important distinction to understand is that MIPS has two options for participation:

- Standard MIPS
- MIPS/APM

The MIPS/APM track applies to Track 1 Medicare Shared Savings Program (MSSP) plans. Providers participating under the MSSP are considered MIPS/APM.

MIPS consolidates reporting for the Physician Quality Reporting System (PQRS), the Value-Based Modifier (VM) and the Medicare EHR Incentive Program (Meaningful Use.) Reporting for these programs ends December 31, 2016.

MIPS evaluates based on 4 performance categories and MIPS/APMs benefit from favorable APM scoring standards. The categories are as follows:

- **Quality** – measures are submitted through MSSP annual reporting – no additional reporting requirements – 50% category weight
- **Cost** – ACOs are not evaluated on cost, therefore the category weight is set to 0%
- **Advancing Care Information** (using certified EHR technology) – 30% category weight
- **Clinical Practice Improvement Activities (CPIA)** – ACO participant Tax Identification Numbers (TINS) receive full credit in this category – 20% category weight

MIPS APM SCORING STANDARD

Performance Category	Data Submission Requirement	APM Scoring Benefit	Category Weight
Quality	Quality Measures submitted through web interface	ACOs automatically eligible for bonus points for reporting high priority measures already required for MSSP reporting	50%
Resource Use/Cost	ACOs not evaluated on cost		0%
CPIA	No additional reporting required outside of standard MSSP reporting	ACOs receive full credit for this category	20%
ACI	Participant TINs submit ACI data using MIPS data submission mechanism	Weighted average of Participant TINs to produce ACO level score	30%

CMS has launched a website related to the Quality Payment Program which contains helpful background information. The website can be found at <https://qpp.cms.gov/>.

MACRA Content & Communications from the MaineHealth ACO

In addition to providing updates and education about MACRA through our monthly newsletter, the MaineHealth ACO is hosting webinars with informative content on the MACRA law and what you need to know to be prepared.

Join Us for our MACRA 201 Webinar!

The second part of our MACRA Webinar series will feature information on participation, decision-making and details on the final rule. MACRA 201 will be taking place on **December 7, 8 and 12**. Register today and join us live or via web. [Click here to register](#).