

## It's Not Too Late to Ask for Help with 2018 MIPS Data Submission

Gathering and submitting data for the Centers for Medicare & Medicaid Services' Quality Payment Program can be overwhelming – especially to the practice that does not have the luxury of a dedicated resource handling the MIPS (Merit-based Incentive Payment System) performance measures. With the different formats for submission, and differing performance periods (Quality must be submitted for a full year, while Promoting Interoperability must be a minimum of 90 days), the process is complicated.

In addition, the practice must keep a record of all data submitted to ensure it is receiving the accurate number of points and reimbursement adjustment. Also, CMS can audit a practice up to six years after a submission has been completed and recommends maintaining records for up to 10 years.

As the reimbursement adjustment for Medicare Part B payments goes to +/- 9 percent by 2022, the impact to a practice could be significant. Any upward payment adjustment is better than a neutral or downward payment adjustment. Your performance will also be publicly reported on Physician Compare, so your scores may impact your practice reputation.

It is not too late to get help for your 2018 data submission. The Quality Reporting Engagement Group offers a Submission Assistance option to assist your practice in collecting all available data and ensure your clinicians submit the required components to earn you the maximum number of points possible.

If you are interested in speaking to one of the team members about how they can help your practice for 2018, contact [sales@intrinsiq.com](mailto:sales@intrinsiq.com).