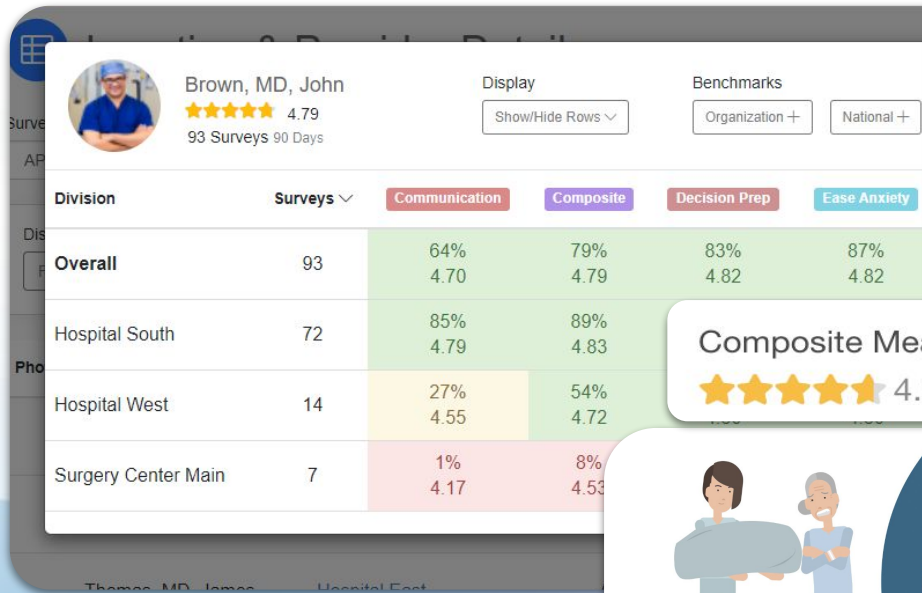


MIPS 2021

Improvement Activities Guide

Meet measures with your SurveyVitals solution

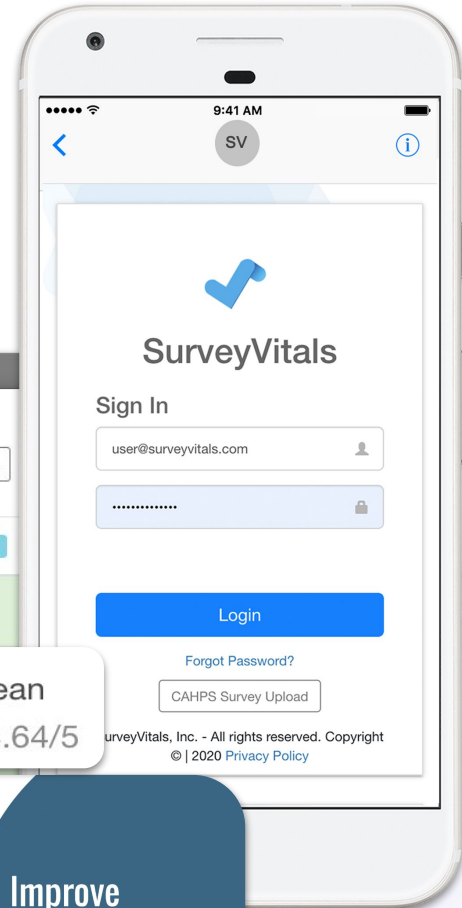


Division	Surveys	Communication	Composite	Decision Prep	Ease Anxiety
Overall	93	64% 4.70	79% 4.79	83% 4.82	87% 4.82
Hospital South	72	85% 4.79	89% 4.83		
Hospital West	14	27% 4.55	54% 4.72		
Surgery Center Main	7	1% 4.17	8% 4.53		

Composite Mean
 4.64/5



Improve Comfort in 5 Easy Steps



2021 REQUIREMENTS

MIPS Improvement Activities

15% OF FINAL SCORE

Improvement activities have a continuous **90-day performance period** (during CY 2021) unless otherwise stated in the activity description.

At least **50% of clinicians** reporting as a group must be engaged in the activity for the performance period in order to receive credit from the Centers for Medicaid and Medicare Services (CMS).

40 POINTS REQUIRED

To earn full credit in this performance category, you must generally submit one of the following combinations of activities:

COMBINATION 1

20 POINTS
High Weight Activity

20 POINTS
High Weight Activity

OR

COMBINATION 2

20 POINTS
High Weight Activity

10 POINTS
Medium Weight Activity

10 POINTS
Medium Weight Activity

OR

COMBINATION 3

10 POINTS
Medium Weight Activity

10 POINTS
Medium Weight Activity

10 POINTS
Medium Weight Activity

10 POINTS
Medium Weight Activity

2021 REQUIREMENTS
How Do I Submit Data?

There are 3 submission types you can use for Improvement Activities, depending on which submitter type you are. The submission types are:

Submitter Type	Sign In & Attest	Sign In & Upload	Direct Submission via API
MIPS eligible clinician	X	X	
A representative of a practice, virtual group, or APM Entity	X	X	
Third-party intermediaries		X	X

What activities can I participate in?

SurveyVitals can currently help eligible clinicians or groups participate in seven activities with supporting data & tools. Find the list of activities on pages 4 and 5. For a full list of available Improvement Activities, visit www.gpp.cms.gov.

How are activities scored?

High-weight activities receive 20 points and medium-weight activities receive 10 points.

2021 MIPS SCORING

Special Status

If you're an individual clinician, group, or virtual group who holds a qualifying special status, you'll receive double points for each high- or medium-weight activity you submit.

How do I know if I have Special Status?

If you've been assigned a special status at the clinician or practice level, it will be added to your eligibility profile in the QPP Participation Status Tool on www.qpp.cms.gov.

If you've been assigned a special status in Segment 2 of the MIPS determination period, it may not appear in the QPP Participation Status Tool until late 2021. If you think you should have a special status or believe there is a mistake in your special status designation, contact the Quality Payment Program at qpp@cms.hhs.gov

Special Status Designations

Ambulatory Surgery Center (ASC)-based

Hospital-based

Non-patient facing

Small practice

HPSA

Rural

To learn more about each special status and how determinations are made, click [here](#) or visit www.qpp.cms.gov.

2021 MIPS PROGRAM

SurveyVitals Supported Activities

High-Weight Measures

IA_BE_6**20 Points**
High Weight

Collection and follow-up on patient experience and satisfaction data on beneficiary engagement, including development of improvement plan.

Subcategory: Beneficiary Engagement

IA_PSPA_11**20 Points**
High Weight

Participation in CAHPS or other supplemental questionnaire.

Subcategory: Patient Safety & Practice Assessment

Medium-Weight Measures

IA_EPA_3**10 Points**
Medium Weight

Collection of patient experience and satisfaction data on access to care and development of an improvement plan.

Subcategory: Expanded Practice Access

IA_BE_13**10 Points**
Medium Weight

Regularly assess the patient experience of care through surveys, advisory councils and/or other mechanisms.

Subcategory: Beneficiary Engagement

2021 MIPS PROGRAM

SurveyVitals Supported Activities

Medium-Weight Measures

IA_PSPA_20

10 Points
Medium Weight

Leadership engagement in regular guidance and demonstrated commitment for implementing practice improvement changes.

Subcategory: Patient Safety & Practice Assessment

IA_PSPA_4

10 Points
Medium Weight

Administration of the AHRQ Survey of Patient Safety Culture.

**This activity may be selected once every 4 years*

Subcategory: Patient Safety & Practice Assessment

IA_PSPA_19

10 Points
Medium Weight

Implementation of formal quality improvement methods, practice changes, or other practice improvement processes.

Subcategory: Patient Safety & Practice Assessment

Have questions about the MIPS program?

Visit our resources page at <https://prod-b.surveyvitals.com/start/macra-quality-payment-program-mips-2021> or contact us at support@surveyvitals.com.

2021 MIPS REPORTING

Best Practices

- **Map out activities in advance and pre-determine your 90-day performance period**
 - Having a plan in place will ensure you will be ready for attestation come the end of the performance year. Aim for a performance period prior to the fourth quarter in order to allow time for completion of necessary documentation.
- **Identify participating clinicians and maintain an updated roster**
 - Select participating clinicians and keep an updated roster for easy attestation.
- **Ensure any SurveyVitals supporting addendum questions are enabled**
 - Work with your SurveyVitals Success Manager to ensure any needed supported questions are enabled to your core survey (i.e. access questions or demographic questions).
- **Set up clinicians on the SV system and enable supporting features**
 - Make sure all of your participating clinicians have SV access, and turn on and utilize pertinent features such as alerts, Improvement Center, etc.
- **Include unique case identifiers in your patient uploads**
 - Should you wish to correlate your survey scores back to your clinical data and/or other metrics, include a unique case identifier in your SurveyVitals uploads. Additionally, you can provide additional data points in your uploads. Contact your Success Manager or support@surveyvitals.com to learn more.

2021 MIPS REPORTING

Best Practices

- **Document meetings or trainings where patient experience data is incorporated**
 - Keep meeting minutes and track attendance of participating clinicians.
- **Establish a policy and procedures document**
 - Outline the purpose and intent of your chosen activity, as well as any associated actions you plan to take in support of the activity.
 - Refer to our attestation guides for help.
- **Select champions or initiative owners**
 - Identify an individual who can take ownership of the activity and ensure tasks supporting the activity are completed.
- **Access supporting data and reports**
 - Utilize your SurveyVitals data, including provider scorecards and reports from the Report Builder, in your supporting documentation. Raw data download and user engagement metrics are also available.

2021 MIPS REPORTING

SurveyVitals Solution

Have Questions?

Visit our MIPS resources page at

<https://www.surveyvitals.com/start/macra-quality-payment-program-mips-2021>

or contact us at support@surveyvitals.com.

*Note: Information and program details are based solely upon SurveyVitals' experience with MACRA and our interpretation of CMS rule-making and policy statements. The information presented does not reflect the views or policies of CMS or any other governmental agency and is not to be construed as practice management advice.