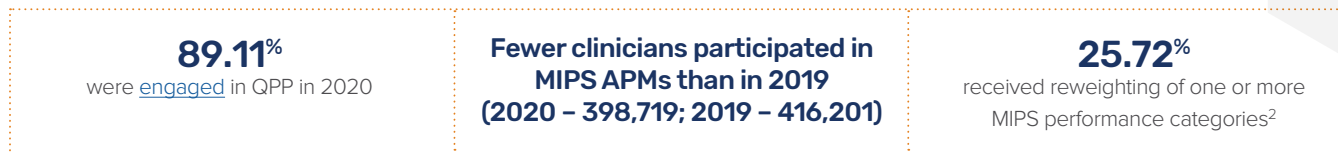
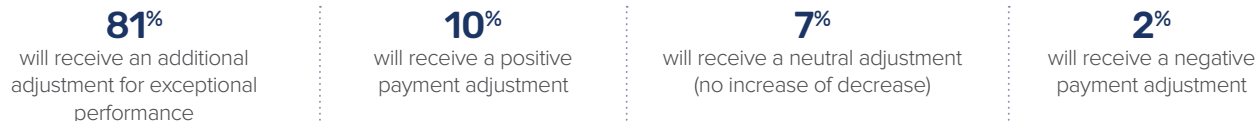


QUALITY PAYMENT PROGRAM PARTICIPATION IN 2020: RESULTS AT-A-GLANCE¹

In the 2020 Performance Year for the Quality Payment Program:



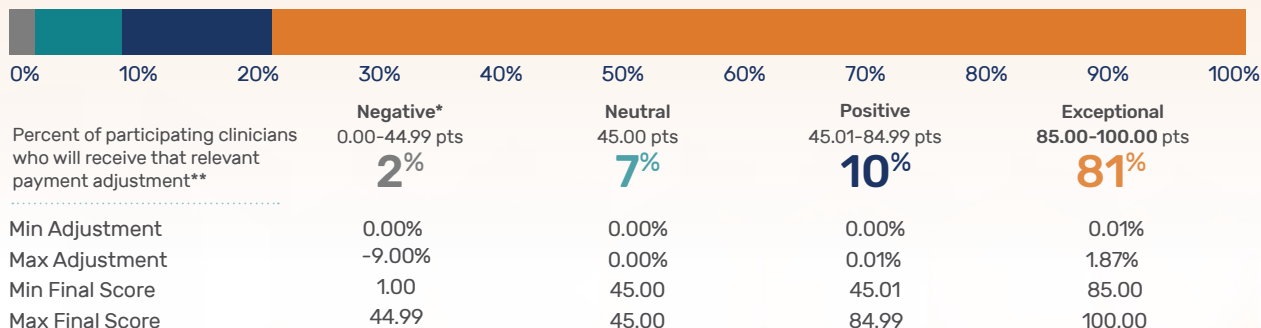
Snapshot of 2022 Payment Adjustments for MIPS Eligible Clinicians



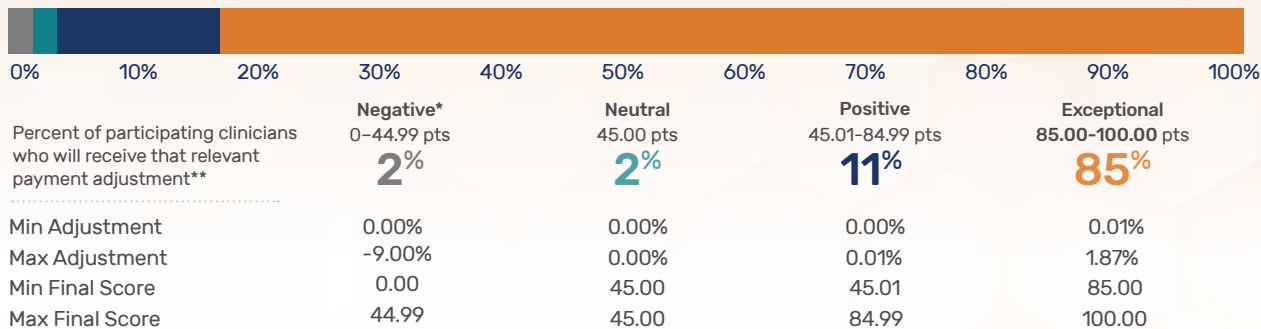
General Participation Numbers in 2020



Payment Adjustment Highlights for MIPS Eligible Clinicians Who Participated in QPP:



Payment Adjustment Highlights for MIPS Eligible Clinicians Who Were Engaged in QPP:



¹ Note: 2020 data presented throughout this infographic was pulled before targeted reviews.

² Note: This percentage is based on the participants who had an Extreme and Uncontrollable Circumstances Exception. It excludes the cost performance category as that category was reweighted for all participants in PY 2020.

* For negative payment adjustments only: The Minimum Final Score is associated with the Maximum Payment Adjustment ** These percentages have been rounded to whole numbers for this infographic



Overall MIPS Participation Numbers in 2019 vs. 2020

The following chart outlines the performance threshold distribution in MIPS among eligible individuals, groups, virtual groups¹, and those who participated through a MIPS APM. It also includes data on the number of Qualifying APM Participants (QPs) that were excluded from MIPS and on the total number of Partial QPs, some of whom elected to participate in MIPS.

NOTE: CMS defines participating clinicians as those who receive a score greater than 0, including clinicians whose score is based solely on an Extreme and Uncontrollable Circumstances Exception and those reporting as individuals whose score is based solely on measures calculated by CMS.

	2019	vs.	2020
Total clinicians receiving a MIPS payment adjustment (positive, neutral ² , or negative)	954,573		933,547
Percent of clinicians with a final score at or above the exceptional performance threshold	83.84%		80.56%
Percent of clinicians with a final score above the performance threshold and below the exceptional performance threshold	11.50%		10.27%
Percent of clinicians with a final score at the performance threshold	4.37%		7.14%
Percent of clinicians with a final score below the performance threshold	0.28%		2.03%
Total number of QPs	195,564		237,315
Total number of Partial QPs	27,995		10,609

MIPS Eligible Clinicians³ Who Participated in the Quality Payment Program (QPP):

100%
of MIPS eligible clinicians
participated in QPP

100%
of MIPS eligible clinicians
in small practices
participated in QPP

534,819
participated in MIPS as
individuals or groups

398,719
participated in MIPS
through Alternative
Payment Models (APMs)

¹ Under MIPS, an individual is a single TIN/NPI; a group is 2 or more NPIs billing under a single TIN.

² The neutral score in 2019 was 30, and in 2020, it was 45.

³ Note: Clinicians are identified under QPP by their unique Taxpayer Identification Number/National Provider Identifier combination (TIN/NPI).

Overall Engaged Participation Numbers in 2019 vs. 2020

The following chart outlines the performance threshold distributions in MIPS among **engaged individuals, groups, virtual groups, and those who participated through a MIPS APM.**

NOTE: CMS defines engaged clinicians as those who have submitted some data to the program at the individual, group, virtual group, or APM Entity level (e.g., submitted one or more quality measures, attested to one more improvement activities, etc.)

	2019	vs.	2020
Total engaged clinicians receiving a MIPS score and payment adjustment (positive, neutral, or negative)	869,899		831,885
Percent of engaged clinicians with a final score at or above the exceptional performance threshold	87.89%		84.83%
Percent of engaged clinicians with a final score above the performance threshold and below the exceptional performance threshold	11.35%		11.01%
Percent of engaged clinicians with a final score at the performance threshold	0.67%		2.07%
Percent of engaged clinicians with a final score below the performance threshold	0.10%		2.09%

MIPS Eligible Clinicians Who Were Engaged in QPP:

89.11%

of MIPS eligible clinicians were engaged in QPP

77.10%

of MIPS eligible clinicians in small practices were engaged in QPP



Mean and Median National Final Scores in 2019 vs. 2020

The following table outlines the mean and median scores in MIPS among eligible **clinicians and small practices**. Mean is the sum of all final scores divided by count of final scores by unique TIN/NPI; median is the midpoint in distribution of all final scores.

	2019	vs.	2020
Mean score (out of 100 points)	85.63		89.41
Mean score for small practices	69.08		69.50
Median score (out of 100 points)	92.31		96.82
Median score for small practices	77.19		75.29

Individual and Group Participation Numbers in 2019 vs. 2020 (excluding MIPS APM participants)

The following table outlines the performance threshold distribution in MIPS among eligible **individuals and groups**. It does not include data for those who participated through a MIPS APM.

	2019	vs.	2020
Total clinicians receiving a MIPS score and payment adjustment (positive, neutral, or negative)	538,469		534,830
Percent of clinicians with a final score at or above the exceptional performance threshold	74.53%		69.14%
Percent of clinicians above the performance threshold and below the exceptional performance threshold	19.55%		17.47%
Percent of clinicians with a final score at the performance threshold	5.43%		9.84%
Percent of clinicians with a final score below the performance threshold	0.49%		3.55%



Overall Engagement Participation Numbers in 2019 vs. 2020

The following data outlines the performance threshold distribution in MIPS among **those who participated through a MIPS APM**. It does not include data for individuals and groups.

	2019	vs.	2020
Total clinicians receiving a MIPS score and payment adjustment (positive, neutral, or negative)	416,201		398,719
Percent of clinicians with a final score at or above the exceptional performance threshold	95.88%		95.88%
Percent of clinicians with a final score above the performance threshold and below the exceptional performance threshold	1.07%		0.61%
Percent of clinicians with a final score at the performance threshold	3.01%		3.52%
Percent of clinicians with a final score below the performance threshold	0.04%		0.00%

Note

The MIPS Extreme and Uncontrollable Circumstances policy doesn't affect the Quality Payment Program's budget neutrality requirement. MIPS payment adjustments are required by law to be budget neutral. Generally stated, budget neutrality means that the projected positive payment adjustments must be balanced by the projected negative payment adjustments. Given the relatively low performance threshold, the majority of negative MIPS payment adjustments to date have resulted from individually eligible clinicians who did not submit data.

- Under the Automatic Extreme and Uncontrollable Circumstances policy, we assigned these individual clinicians a neutral adjustment instead of the maximum negative payment adjustment.

As a result, MIPS eligible clinicians with a final score between 45.01 – 84.99 points are seeing a 2022 payment adjustment of 0.00% to 0.01% displayed in performance feedback.

MIPS eligible clinicians with a final score above the performance threshold (85.00 points for the 2020 performance year) are eligible for an additional positive adjustment for exceptional performance. This additional positive payment adjustment is not subject to budget neutrality, but we do apply a scaling factor to account for available funds. For 2020, clinicians with a final score above 85.00 points will receive a positive adjustment ranging from 0.01% to a maximum of 1.87%.

Need Help?

To learn more about the Quality Payment Program:

- Visit [QPP.CMS.GOV](https://qpp.cms.gov).
- Small, underserved, and rural practices: Learn about CMS's **flexible options** to help you actively participate in QPP.
- Contact the Quality Payment Program at **1-866-288-8292** or by e-mail at: QPP@cms.hhs.gov. Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.