

2020 Merit-based Incentive Payment System Performance Period Virtual Group Participation Overview Fact Sheet

COVID-19 and 2020 Participation: For the 2020 performance year, we will be using our Extreme and Uncontrollable Circumstances policy to allow MIPS eligible clinicians, groups, and virtual groups to **submit an application** requesting reweighting of one or more MIPS performance categories to 0%. We have introduced a new high-weighted COVID-19 clinical trials improvement activity, which provides an opportunity for clinicians to receive credit in MIPS. For more information about the impact of COVID-19 on Quality Payment Program participation and additional flexibilities finalized in the [2021 QPP Final Rule on Quality Payment Program participation](#), see the [Quality Payment Program COVID-19 Response webpage](#).

Table of Contents

[Ways to Participate in MIPS](#)
[Virtual Group Definition](#)
[Virtual Group Eligibility Criteria and Composition](#)
[Benefits of Virtual Group Participation](#)
[Special Status Designation](#)
[Select Measures, Collect and Submit Data](#)
[Scoring](#)
[Payment Adjustments](#)
[Forming or Joining a Virtual Group](#)
[Available Resources and Assistance](#)
[Version History Table](#)

How Can Clinicians Participate in MIPS?

There are three ways clinicians can participate in MIPS:

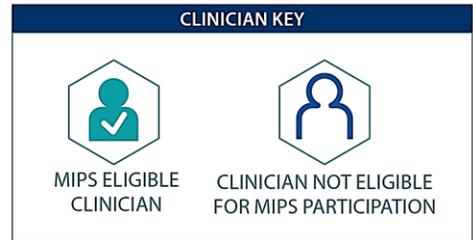
- As an individual,
- As a group, or
- As a **virtual group**.

Check Your Eligibility by contacting your local technical assistance for [small practices](#).

What is a Virtual Group?

A virtual group is a combination of two or more Taxpayer Identification Numbers (TINs) assigned to:

- One or more solo practitioners (who are MIPS eligible clinician), **or**
- One or more groups consisting of **10 or fewer clinicians** (including at least 1 MIPS eligible clinician), **or**
- Both (solo practitioners and groups of 10 or fewer clinicians), that elect to form a virtual group for a performance period for a year.



Note: A solo practitioner or group can **only participate in one virtual group** during the performance period.

Who Can Participate in a Virtual Group?

You can participate in a virtual group if you are either:

 A SOLO PRACTITIONER ELIGIBLE FOR MIPS	 A GROUP WITH 10 OR FEWER CLINICIANS—AT LEAST ONE ELIGIBLE FOR MIPS
A solo practitioner that's included in MIPS:	A group that's included in MIPS:
<ul style="list-style-type: none"> • Is a MIPS eligible clinician type, • Meets or exceeds at least one of the low-volume threshold elements, • Enrolled in Medicare before the start of 2020, • Is not a Qualifying Alternative Payment Model (APM) Participant (QP), • Is not a Partial QP choosing not to participate in MIPS. 	<ul style="list-style-type: none"> • Meets or exceeds at least one of the low-volume threshold elements at the group level (i.e., the NPIs within the TIN collectively meet or exceed at least one of the low-volume threshold elements), and • Has 10 or fewer clinicians (including at least 1 clinician who is MIPS eligible) who have reassigned their billing rights to the TIN. <ul style="list-style-type: none"> ○ TIN size is based on the total number of NPIs billing under a TIN, which includes clinicians who are and are not MIPS eligible.

Where can I find out if I'm eligible to be in a virtual group?

Contact your local technical assistance for [small, underserved, and rural practices](#) for eligibility assistance.



	<p>Notes:</p> <ul style="list-style-type: none">• If a group chooses to join a virtual group, all of the clinicians in the group are part of the virtual group.• A TIN that is part of a virtual group might also be comprised of clinicians who are participating in Advanced APMs. Participants in Advanced APMs may achieve QP status and will be excluded from MIPS.
<p>Note: When determining 2020 eligibility for virtual groups, we use eligibility data from the first 12-month segment (10/1/2018 – 9/30/2019) from the MIPS Determination Period.</p>	

Opting-in and Virtual Groups

For any solo practitioner or group that meets or exceeds at least one of the three low-volume threshold elements AND is included in a **virtual group election**, the virtual group election serves as an **election to opt-in** to MIPS. Therefore, solo practitioners and groups that meet or exceed at least one of the three low-volume threshold elements and want to participate in a virtual group, do not need to separately make an election to opt-in to MIPS.

If you're interested in forming or joining a virtual group, visit the 2020 MIPS Virtual Group Election Process Guide for more information on the election process.

Why Should a Solo Practitioner or Group Participate in a Virtual Group?

Virtual Groups Can Increase Performance Volume

Solo practitioners or groups with **10 or fewer clinicians** (including at least one MIPS eligible clinician) may not have enough cases to be reliably measured on their own, but if a solo practitioner or group forms a virtual group with another solo practitioner or group, together they could increase the performance volume in order to be reliably measured.

Virtual Groups Allow Collaboration and Resource Sharing

Additionally, if a solo practitioner and/or a group with **10 or fewer clinicians** participate in a virtual group, they could work together, share resources, and potentially increase performance under MIPS.

Virtual Groups are Flexible

Virtual groups have the flexibility to determine their own **makeup**. There are no requirements that restrict virtual group makeup to classifications or factors such as locality or specialty.





Virtual groups also have the flexibility to determine their **own size**. There's no limit on the number of TINs that may form or join a virtual group. Any number of solo practitioners eligible for MIPS and/or groups with **10 or fewer clinicians** can be in a virtual group.

How Do Special Statuses Apply to Virtual Groups?

Generally, group policies apply to virtual groups. However, there are certain virtual group policies that do differ from policies that pertain to groups, such as special status designations.

If a virtual group has a special status designation, the virtual group will qualify for reduced reporting requirements in certain performance categories.

The special status designations that are applicable to virtual groups are:

- Ambulatory Surgical Center (ASC)-based,
- Hospital-based,
- Health Provider Shortage Area (HPSA),
- Non-patient facing,
- Rural, and
- Small practice special statuses.

For more information on special status designations, visit [Special Statuses](#) on the [Quality Payment Program](#) website.

How do Virtual Groups Select Measures and Activities, Collect and Submit Their Data?

Select Measures and Activities

Like groups, virtual groups will select measures and activities that are most applicable to their virtual group (all TINs a part of the virtual group) and patient population.

- Virtual groups can choose from the same measures and improvement activities that are available to groups.
- Virtual groups must meet the same reporting requirements for each measure and activity as groups.

Once a virtual group finds measures and activities that work for their virtual group, the virtual group should prepare to collect data on these measures and activities by reviewing the specifications for each of the selected measures and activities.

Where can I learn more about measures and activities?

You can learn about measures and activities for the MIPS 2020 performance year, when available, by visiting [Explore Measures & Activities](#).

Collect and Report Data

Virtual groups will collect and report their data at the **virtual group level**. Their performance will be assessed and scored at the virtual group level across all four performance categories (Quality, Cost, Improvement Activities, and Promoting Interoperability).

Submit Data

Virtual groups can use the same submission types as groups. They also need to meet the requirements for a selected submission type.

What's a submission type?

A submission type is the way that you submit data to CMS.

Example: For the 2020 performance period, a virtual group interested in submitting data via the CMS Web Interface must have 25 or more clinicians within the virtual group and are required to register to submit data using the CMS Web Interface between April 1, 2020 and June 30, 2020.

Submission Type	Description	Available Performance Categories
Medicare Part B Claims	Clinicians reporting as part of a virtual group designated as a small practice can add Quality Data Codes (QDCs) to their claims to denote measure performance.	Quality
CMS Web Interface	Registered virtual groups and their authorized representatives can report beneficiary level performance data in a secure, internet-based application.	Quality
Log-in and Attest	Virtual groups and their authorized representatives can sign in to gpp.cms.gov and manually report Promoting Interoperability measures and/or Improvement Activities.	Improvement Activities, Promoting Interoperability
Log-in and Upload	Virtual groups, their authorized representatives, and third-party intermediaries* can sign in to gpp.cms.gov and upload a file in a CMS approved format.	Quality, Improvement Activities, Promoting Interoperability
Direct	Authorized third-party intermediaries (such as QCDRs and Qualified Registries) can perform a direct submission, transmitting data through a computer-to-computer interaction, such as an API.	Quality, Improvement Activities, Promoting Interoperability

Note: There's no data submission requirements for the Cost performance category. We use administrative claims data to calculate a score for cost on behalf of all clinicians in the virtual group.

*A third-party intermediary is an entity that collects and submits data on behalf of MIPS eligible clinicians. For more information, review the CMS-approved QCDRs and CMS-approved Qualified Registries on the Quality Payment Program [Resource Library](#).

IMPORTANT: Each virtual group will need to **aggregate its data across the virtual group** (all TINs within the virtual group) for each performance category. We will not aggregate virtual group data; each virtual group is responsible for aggregating data across all solo practitioners and/or groups within the virtual group. MIPS data may be submitted by third party intermediaries on behalf of a virtual group.

How are Final Scores Determined for Virtual Groups?

A virtual group’s performance is assessed and scored at the **virtual group level** across all four performance categories. A virtual group will receive a score for each performance category and a MIPS Final Score based on the sum of each performance category score. Each clinician in a virtual group, as identified by a TIN/NPI combination, will receive a MIPS Final Score based on the virtual group’s performance. Only MIPS eligible clinicians will receive a MIPS payment adjustment based on the virtual group’s MIPS Final Score.

How are Clinicians in a Virtual Group and an APM Scored?

During the performance year, clinicians (NPIs) in a group (TIN) that are part of a virtual group may also be part of a MIPS APM or Advanced APM. The TIN, as part of the virtual group, must submit performance data for all clinicians associated with the TIN, including those in a MIPS APM or Advanced APM. This assures that all clinicians associated with a virtual group’s TINs are being measured under MIPS.

Each clinician within a virtual group, including those who are also participating in a MIPS APM or Advanced APM, will receive two MIPS final scores: one score based on the performance of the virtual group and a second final score based on the APM entity’s performance.

- If a clinician participating in both a **virtual group** and an [Advanced APM](#) is a **Qualifying APM Participant (QP)**, the eligible clinician will be assessed under MIPS as part of the virtual group. However, they will be **excluded** from the MIPS payment adjustment due to their QP status.
- A MIPS eligible clinician who participates in both a **virtual group** and a [MIPS APM](#) will be assessed under MIPS as part of the virtual group and under the **APM scoring standard** as part of a group in APM Entity. They will **receive** a MIPS payment adjustment based only on the APM Entity score.

How are MIPS Payment Adjustments Applied for Virtual Groups?

MIPS payment adjustments are applied as follows:

Virtual Group Member	Included in Virtual Group Performance Data?	MIPS Final Score	MIPS Payment Adjustment
Clinician is not a MIPS eligible clinician	Yes	Yes, based on the virtual group score	No

Clinician is a MIPS eligible clinician	Yes	Yes, based on the virtual group score	Yes
Clinician is a MIPS APM participant	Yes	Yes, will receive 2 MIPS Final Scores – Virtual group score – APM Entity score	Yes, based on APM Entity score
Clinician has QP status	Yes	Yes, based on the virtual group score	No, excluded due to QP status

How Do We Form a Virtual Group if We Are Interested?

There's a **two-step election process** for solo practitioners and groups with 10 or fewer clinicians (including at least one MIPS eligible clinician) that want to form a virtual group. To participate in MIPS as a virtual group for the 2020 performance period, a virtual group election must be made before the start of the performance period and **can't change during the performance period**.

For more information on virtual group elections, visit the 2020 Virtual Group Election Process Guide.

For the 2020 MIPS performance period, the virtual group election period **begins on October 1, 2019 and ends on December 31, 2019**.

Where Can I Get Help if I Want to Participate in a Virtual Group?

For additional information regarding the two-step virtual group election process, check out the 2020 Virtual Group Election Process Guide in the [Resource Library](#) on the [Quality Payment Program](#) website.

We offer technical assistance to small, rural, and underserved practices provided by professional and experienced providers that are available to assist you at no cost. Your local small practice technical assistance provider can assist you with questions about virtual groups, locate your local organization on [Support for Small, Underserved, and Rural Practices](#).

Questions?

Contact the Quality Payment Program at 1-866-288-8292 (TTY: 1-877-715-6222) Monday through Friday from 8:00AM to 8:00PM Eastern Time or by email at QPP@cms.hhs.gov.



Version History Table

Date	Version Notes
8/28/2020	Added disclaimer language regarding changes to 2020 MIPS in response to COVID-19.
9/30/2019	Original posting