

## MIPS Participation Quick Guide

### 1

#### Consent to MIPS Participation

1. Select “**Regulatory**” in the main menu
2. Click on “**MIPS 2018 Participation**”
3. Read the *Consent to Disclose Data to the QPP – MIPS from the SSR agreement* and select the check-box labeled “**I consent to the terms and conditions of MIPS 2018 participation through the ACS SSR**”.
4. Enter your *individual National Provider Identifier (NPI)* number
5. Enter your **Taxpayer ID Number (TIN)** *associated with the billing of your Medicare Part B patients*
6. Click on the “**Save**” button
7. Click on the next tab “MIPS Quality Reporting Options” where you can select your MIPS Quality measures reporting option

### 2

#### Select MIPS Quality Reporting Options

1. Select one of the Quality reporting options under *MIPS 2018 Quality Reporting Options* which is most appropriate to your practice:
  - “**General Surgery Specialty Measures Set**” (QR)
  - “**ACS Surgical Phases of Care Measures Set**” (QCDR)
  - “**Trauma Specialty Measures Set**” (QCDR)

*For help with this selection:*  
<https://www.facs.org/quality-programs/ssr/mips/participation>
2. Select and review your “**Selected Measures**” in the box below
3. Click the “**Save**” or “**Save & Exit**” button
4. You will now be able to report on these measures within all applicable cases in your case log.
5. Click “**Next**” to advance to the next tab (MIPS Improvement Activities (IA) options) where you can select your IAs to attest to

### 3

#### Select MIPS Improvement Activities

1. Before selecting your IAs, please check any of the IA criteria that applies to you on the IA tab by answering the question “**Do any of the following apply to the eligible clinician (Select all that apply)**”
2. Select **IA** from *Activity List*
3. Enter “**Start**” and “**End**” dates indicating the 90-day attestation period
4. To add another Improvement Activity, click on “**Add Instance**”
5. Click the “**Save**” button
6. Click “**Next**” to advance to the next tab where you can review all of the information and MIPS options you have selected (*Please ensure that your NPI and TIN numbers are correct*)

Note, a score of 40 points in the IA category will translate to 15 points in the overall MIPS 2018 score. 15 points in the overall MIPS score will avoid a negative payment adjustment.

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#### Report Quality Measures on MIPS Cases

1. Open a new or existing 2018 case
2. If new, enter a 2018 procedure date
3. Select the check-box “**MIPS Consideration**”
  - If you are reporting on **General Surgery Specialty Measures Set** option, the minimum required data is the patient’s Medical Record Number, Date of Birth (DOB), Procedure Date, and Primary Procedure
  - If you are reporting on **Surgical Phases of Care Measures (QCDR)**, additional data variables are required for the purpose of **risk adjustment**: Date of Birth; ASA Class; Emergent/Urgent Operation; Functional Status; Wound Classification; Preop Sepsis; Surgical Approach; Dyspnea\*; Ascites\* (\*Located in the “**Preop Risk Factors**” tab in the **Tabs** menu)
4. Click on the “**Measures**” tab in the **Tabs** menu on the right to access the measures data fields to complete

5. Select the appropriate attestation “**Performance Met**”, “**Performance Not Met**”, or “**Performance Exclusion**”, etc. on all applicable measures.
 

**NOTE:** With **Outcome Measures** such as “Surgical Site Infection” or “Unplanned Hospital Readmission...”, the desired attestation is “**Performance Not Met**” as they are inverse measures
6. Select the check-box “**Complete**” at the top of the case form
7. Click “**Save**” or “**Save & Exit**” button to finish

#### Important Notes on Attestation

You will find that some measures are not selectable within certain cases. The following variables explain this further:

- **Outcome Measures** are assessed 30 days after the initial encounter, so only cases with procedure dates of **January 1<sup>st</sup> – November 30<sup>th</sup>** are attestable for these measures
- Measures such as “Preventative Care and Screening...” and “Documentation of Current Medications...” require separate **office visit CPT®-codes**. You will need to create a separate case file for these types of encounters to report on these measures
- A list of all Measure specifications and their eligible CPT codes can be found at <https://www.facs.org/quality-programs/ssr/mips/participation>

### 5

#### Use MIPS Measures Reports to Check Progress

Various **MIPS Measures Reports** are available to you to help gauge your progress towards completing your data submission. These reports:

- Display MIPS-Eligible cases from your existing case log (apply filter)
- Pin-point missing data (apply filter)
- Summarize your performance rates

#### To review MIPS data in the SSR:

1. Select “**Operational Reports**”
2. Select “**Measures Report**”
3. Select “**Reporting Year**”
4. Click “**Apply Parameters**”
  - Your **Measures Summary** gives you an overview your MIPS Progress, as well as specific performance rates on each Quality Measure you’ve selected.
  - Your **Measures Details** lets you track how many cases report on each Quality Measure you’ve selected
  - Your **Missing Data View** utilizes various filters to help you find MIPS eligible cases you may not have selected, and finalize MIPS cases by pin-pointing missing data.

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## 6 Approve Your MIPS Data Submission

The submission deadline is currently scheduled for **January 31, 2019**.

1. Go to “**Regulatory**” in the SSR main menu.
2. Click on “**MIPS Preview Submission Report 2018**.”
3. Review your information in the **Eligible Clinician (surgeon) Information** section, and add a phone number and preferred email for best contact. Notice, the Reporting Period on the right is defaulted to 2018).
4. Review your case data for accuracy for the **Quality component** (View 6a\*\*), select cases, etc.
5. Review your selected **Improvement Activities (IA)** (View 6b\*\*)
6. At the top of the page, click the “**Save Submission**” button.
7. Click the “**Approve Submission**” button.
8. In the pop-up window labeled **Approve MIPS 2018 Data Submission**, if you agree, then click the checkbox labeled “I approve the submission of my MIPS data”, and then click “**Save and Close**.”
9. Your data submission is now approved! The progress bar on the top right corner of the page should display as such:



**NOTE: “Submitted” will fill in March after the SSR submits data to CMS on your behalf**

## 6a \*\* Reviewing Quality Measures Data for MIPS 2018 Submission

1. In the **Case List** table you will see all finalized MIPS 2018 cases that are ready for submission.
2. Make your case selections using the checkboxes next to each case. If you would like to include all of the cases in the list, simply click on the check-all checkbox to the left of the **ID** column header. (Note: you may select or deselect any cases that want to be submitted for MIPS 2018.)
3. If you are reporting on multiple Taxpayer ID Numbers (TINs), then the Case List allows you to apply specific TINs to cases on an individual case-by-case basis. To select a TIN for a case, use the dropdown menu under the “TIN” column. (Note: if you are only reporting on one TIN, then you do not need to make any TIN selections.)
4. After making your case selections, scroll down until you see the **MIPS Quality Component Details** section. This table will display information relevant to the Quality measures you have selected including your **measures performance rates** and case volumes per measure. (Note: if you are reporting on multiple TINs, then there will be a separate Quality table for each TIN.)

## 6b \*\* Reviewing IA Data for MIPS 2018 Submission

1. Scroll to the bottom of the MIPS Preview Submission Report until you see the **MIPS Improvement Activities (IA) Component** section.
2. Review the IAs you have selected for accuracy. (Note: if you are submitting MIPS 2018 for Full Year participation, then you need 40 points worth of IAs to earn full credit in this MIPS category.)

## 7 Cancelling Approval for MIPS 2018 Data Submission to edit cases

### Un-Approving MIPS Submission

1. If you need to make any changes to your MIPS 2017 data submission **prior to the January 31, 2019 deadline**, click the “**Unapprove Submission**” button at the top of the Preview Submission Report.
2. Make your edits, ensure all cases display and are selected on the MIPS Preview Submission Report.
3. **Re-approve** your submission.