

MIPS: Facility-Based Measurement

Frequently Asked Questions

The Society of Hospital Medicine (SHM) worked with Congress to include a provision in the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) that would allow providers to use facility-level metrics to report in the Merit-based Incentive Payment System (MIPS). Beginning in 2019, the Centers for Medicare & Medicaid Services (CMS) has established a Facility-Based Measurement option, which will automatically calculate a score in the Quality and Cost performance categories of the MIPS based upon the Hospital VBP score from a provider's hospital. This Facility-Based Measurement option will streamline MIPS reporting for hospitalists by eliminating the need to separately report individual level metrics as much of their work often revolves around facility metrics.

How does CMS determine who is Facility-Based for purposes of Facility-Based Measurement eligibility?

Individual Facility-Based Determination

- ✓ You are a MIPS eligible clinician.
- ✓ You billed at least 75 percent of your covered professional services in an inpatient hospital (POS 21), on-campus outpatient hospital (POS 22), and/or emergency room (POS 23).
- ✓ You billed at least one service in an inpatient hospital (POS 21) or emergency room (POS 23)
- ✓ You can be attributed to a facility with a Hospital VBP score. **

Group/Virtual Group Determination

- ✓ The group is participating in the MIPS program.*
- ✓ At least 75 percent of MIPS eligible clinicians billing under the group's TIN or virtual group's TINs are identified as facility-based individuals.
- ✓ The group is attributed to a facility with a Hospital VBP score. **

*Groups using the Facility-Based Measurement option must submit data as a group for Improvement Activities to be considered a group.

**Providers and groups working in Maryland hospitals or within hospitals that otherwise do not have an HVBP score are not eligible for Facility-Based Measurement.



How can I confirm my or my group's eligibility for Facility-Based Measurement?

You can check your individual or your group's eligibility using CMS' participation lookup tool at <https://qpp.cms.gov/participation-lookup>.

What hospital will CMS use for Facility-Based Measurement?

For individual reporting, CMS will identify a single hospital at which the clinicians provided the most services over the determination period. For 2019, the determination period is October 1, 2017 through September 30, 2018, with a 30-day claims run out.

For group reporting, CMS will identify a single hospital at which the plurality of clinicians in the group were attributed as individuals.

Use CMS' participation lookup tool and/or the Facility Based Preview on the qpp.cms.gov website to learn more about your eligibility and attributed hospital.

How does CMS calculate Quality and Cost performance category scores from the Hospital VBP score?

CMS uses a two-step process to translate your facility's Hospital VBP Total Performance Score (TPS) to the MIPS.

1. Establish performance percentile for your attributed hospital in the Hospital VBP Program
2. Calculate the performance score using the same percentile for the MIPS Quality and Cost performance categories

Where can I see an example of what my Facility-Based Measurement scores would look like?

CMS offers a Facility Based Preview to see how your Quality and Cost performance category scores could look like for the 2019 MIPS performance period. The Facility Based Preview shows you how your attributed hospital's HVBP score is translated into a MIPS score, using historical data. While this information will not tell you how your hospital will fare during the performance period, it should help you decide whether to report on quality measures separately. Register/Sign In to qpp.cms.gov and select 'Facility Based Preview'. The sign-on uses the HCQIS Access Roles and Profile (HARP) system.

Do I need to sign up for Facility-Based Measurement?

No. If you are a facility-based MIPS eligible clinician that is attributed to a facility with a hospital VBP score, CMS will automatically apply the facility-based scoring to your MIPS score. Please note



that CMS will only calculate scores for the Quality and Cost performance categories. Improvement Activities and Promoting Interoperability performance categories need to be reported separately (note: most hospitalists should be exempt from Promoting Interoperability).

Should I or my group still report Quality and Cost performance measures separately?

Hospitalists can still choose to report on MIPS Quality and Cost performance measures individually or as a group. CMS will use the higher of the two scores as the final score for the MIPS. It may be in your interest to report separately, particularly if your hospital has historically had a low HVBP score. We encourage individuals and groups to check the Facility Based Preview on the qpp.cms.gov site to help inform their decision about reporting.

Is there anything I should do next?

- ✓ Check your Participation Status online at qpp.cms.gov.
 - Select “Check Participation Status” from the MIPS dropdown menu.
 - Input your NPI number in the box and click “Check All Years.”
 - Look at the “Other Reporting Factors” under your participation status for 2019. It should list whether you are facility-based and, if so, what hospital is attributed.
- ✓ Check the Facility Based Preview by signing into qpp.cms.gov (will need a HARP login).
 - Explore how you would have scored in the Quality and Cost categories using your attributed hospital’s historical HVBP performance.
- ✓ Decide whether to report on quality measures separately or to just go with the Facility-Based Measurement option.

Where can I find more information about MIPS and Facility-Based Measurement?

CMS’s Quality Payment Program Resource Library (qpp.cms.gov/about/resource-library) has dedicated resources on facility-based measurement. Look for the following fact sheets for more detailed information:

- CMS 2019 MIPS Facility-Based Measurement Fact Sheet

[Download](#)

- CMS Facility Based Preview Fact Sheet

[Download](#)