2020 Quality Payment Program (QPP) Exceptions Application Fact Sheet

Updated 9/18/2020

We understand that there may be circumstances out of your control that make it difficult for you to meet program requirements. To reduce this burden, we provide an opportunity for qualifying clinicians, groups, virtual groups and (as proposed) APM Entities to apply for performance category reweighting for the Merit-based Incentive Payment System (MIPS).

In certain circumstances, MIPS performance category reweighting may be applied automatically.

- **Extreme and Uncontrollable Circumstances Exception Application**
  This application allows you to request reweighting for any or all MIPS performance categories if you encounter an extreme and uncontrollable circumstance or public health emergency, such as COVID-19, that is outside of your control.
  - Overview
  - Information for Individuals, Groups, and Virtual Groups
  - Information for APM Entities (NEW)

- **Promoting Interoperability Performance Category Hardship Exception Application**
  This application allows you to request reweighting specifically for the Promoting Interoperability performance category if you qualify for one of the listed exceptions.
  - Overview
  - Information for Individuals, Groups, and Virtual Groups
  - Information for MIPS APM Participants

- **Help and Support**
  - Where You Can Go for Help
  - Additional Resources
  - Version History

- **Appendices**
  - **Appendix A: Performance Category Weight Redistribution Policies Finalized for the 2020 Performance Year**
  - **Appendix B: Automatic Reweighting in the Promoting Interoperability Performance Category**

**New for the 2020 performance year:** You must have a HCQIS Access Roles and Profile (HARP) account to complete and submit an exception application on behalf of yourself, or another MIPS eligible clinician, group or virtual group. For more information on HARP accounts, please refer to the Register for a HARP Account document in the QPP Access User Guide.
## Overview
MIPS Extreme and Uncontrollable Circumstances Exception Application allow you to request one or more performance categories be reweighted to 0%.

- See Appendix A for more information about how performance category weights are redistributed.

## Who
Individual Clinicians, Groups, and Virtual Groups
- Third Party Intermediaries can submit an application with permission from the clinician or practice.
- We are proposing in the PY 2021 PFS NPRM that MIPS Alternative Payment Model (APM) Entities can submit an application for 2020.

## Why
You can submit an application to have your MIPS Quality, Cost, Improvement Activities, and/or Promoting Interoperability performance categories reweighted to 0% if:

- You experience an extreme and uncontrollable circumstance outside of your control, such as a natural disaster or public health emergency (PHE) (e.g. COVID-19 pandemic), that prevents you from collecting data for an extended period of time, or that could impact your performance on cost measures.

## When
Now through December 31, 2020 8 p.m. ET

## Where
**New for 2020:** Sign in to [qpp.cms.gov](http://qpp.cms.gov) with your HCQIS Access and Roles Profile (HARP) account.

- For more information about how to create a HARP account, refer to the Register for a HARP Account document in the QPP Access User Guide.

## How
1. **Register for a HARP account**
3. Select ‘Exceptions Applications’ on the left-hand navigation
4. Select ‘Add New Exception’
5. Select ‘Extreme and Uncontrollable Circumstances Exception’
6. Complete the application for individual, group, virtual group, or (once available) APM Entity participation

*Updated 9/18/2020*
Extreme and Uncontrollable Circumstances Exception Information for Individuals, Groups, and Virtual Groups

You can submit an application to have your MIPS Quality, Cost, Improvement Activities, and/or Promoting Interoperability performance categories reweighted to 0% due to the 2019 Novel Coronavirus (COVID-19).

- If the COVID-19 pandemic prevents you, your practice or your virtual group from collecting 2020 MIPS performance period data for an extended period of time, or could impact your performance on cost measures, you can submit an extreme and uncontrollable circumstances application through December 31 for one or more performance categories.
- You will need to reference COVID-19 as the extreme ad uncontrollable circumstance affecting you, your practice or your virtual group.

We consider the variables affecting your ability to collect and submit data for each performance category when reviewing your application for performance category reweighting due to extreme and uncontrollable circumstances.

- We will review both the event circumstances and length of time you were impacted as indicated in your application to assess the ability of a MIPS eligible clinician to submit data for each performance category selected in the application.
  - For example, the performance period for an improvement activity is a continuous 90-day period (or as specified in the activity description) whereas the performance period for the Quality performance category is 12 months, so an issue lasting 3 months may have more impact on the availability of measures for the Quality performance category than your ability to perform and attest to improvement activities.

You may qualify for our automatic extreme and uncontrollable circumstances policy.

- If you are an individual MIPS eligible clinician located in a CMS-designated area affected by an extreme and uncontrollable event during the 2020 MIPS performance year, you don’t need to submit an application.
- These clinicians qualify for automatic reweighting of all MIPS performance categories and will receive a neutral payment adjustment.
- The automatic extreme and uncontrollable circumstances policy does not apply to groups or virtual groups.

Note: The COVID-19 pandemic PHE is not considered a qualifying event triggering the automatic extreme and uncontrollable policy for the 2020 performance period. However, you can submit an extreme and uncontrollable circumstances exception application, citing COVID-19 in your request, to request reweighting of one or more performance categories. Sign up for QPP Updates or see the 2020 MIPS Automatic Extreme and Uncontrollable Circumstances Policy Fact Sheet (available fall 2020 in the QPP Resource Library) for announcements about events that would trigger the automatic extreme and uncontrollable circumstances policy.

Updated 9/18/2020
You are not required to submit documentation with your application.

• However, you should retain documentation of the circumstances supporting your application for your own records in the event you are selected by CMS for data validation or audit.

You can still submit data for the MIPS performance categories approved for reweighting in the application.

• Data submission by individuals, groups and virtual groups override the performance category reweighting approved through your application on a category-by-category basis.
• Groups and virtual groups will not be scored on the All-Cause Hospital Readmission measure if the extreme and uncontrollable circumstances request is approved for the Quality performance category unless Quality data is submitted.
• If you are approved for reweighting of the Cost performance category to 0%, you will never be scored on Cost measures because there are no data submission requirements associated with the Cost performance category.

For example: You, a MIPS eligible clinician (or group or virtual group), submit an application to have all four performance categories reweighted, but later determine you are able to collect and submit data for the Improvement Activities and Promoting Interoperability performance categories:

• You will receive a MIPS final score based on the data submitted; the Improvement Activities performance category will be weighted to 15% and Promoting Interoperability performance category will be weighted to 85% of your final score.
  o The Quality performance category will retain a 0% weight because you didn’t submit Quality data.
  o The Cost the performance category will retain a 0% weight because there are no data submission requirements associated with the Cost performance category (reweighting can’t be voided).

You must be scored on at least two performance categories to earn a MIPS final score other than the performance threshold.

• When fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100% of your final score, and the other performance categories are weighted at 0%), the final score for the 2020 MIPS performance period would be equal to the performance threshold and you would receive a neutral payment adjustment in 2022.

You can identify additional people to access or receive notifications about the status of the application you’re submitting.

In the Additional Access section of the application, you can provide the email address(es) of additional staff or representatives who should receive notifications about the status of the application.

• When you enter an email address that’s associated with a HARP account, that person will also be able to access the application when they sign in to qpp.cms.gov with their HARP credentials.
If you are submitting an application on behalf of an individual, group or virtual group, users with access to the practice or virtual group on qpp.cms.gov will only be able to access the application if you add the email associated with their HARP account.

Extreme and Uncontrollable Circumstances Exception Information for APM Entities

We have proposed a policy to allow MIPS APM Entities to submit a PY 2020 extreme and uncontrollable circumstances exception application for all MIPS performance categories.

- This policy was proposed in the CY 2021 PFS NPRM (85 FR 50304)
- We intend to allow APM Entities (those with MIPS eligible clinicians who aren’t Qualifying APM Participants, or QPs) in the following models to submit an application as soon as technically feasible:
  - Medicare Shared Saving Program
  - Next Generation ACO Model
  - Vermont Medicare ACO Model
  - Comprehensive Primary Care Plus (CPC+)
  - Comprehensive ESRD Care (CEC)
  - Bundled Payments for Care Improvement (BPCI)
  - Oncology Care Model (OCM)
  - Maryland Primary Care Program
  - Independence at Home Demonstration
- We cannot make final determinations on applications until and unless this policy proposal is finalized.

Note: Sign up for QPP Updates to receive notification of the opening of the extreme and uncontrollable circumstances exception application for APM Entities.

When you submit an application on behalf of an APM Entity, you are attesting that at least 75% of the MIPS eligible clinicians in the Entity qualify for reweighting in the Promoting Interoperability performance category.

- They may qualify automatically or by meeting one of the criteria for a MIPS Promoting Interoperability hardship exception.

You are not required to submit documentation with your application.

- However, you should retain documentation of the circumstances supporting your application for your own records in the event you are selected by CMS for data validation or audit.

Updated 9/18/2020
APM Entity applications must be submitted for all performance categories

- You can’t submit an application for an APM Entity to request reweighting in one or two performance categories
- This is different from our policy for individual, group and virtual group applications

If this proposal is finalized and your APM Entity’s application is approved, the APM Entity would receive a final score equal to the performance threshold and the MIPS eligible clinicians in the APM Entity group would receive a neutral payment adjustment even if data are submitted for the APM Entity.

- Data submitted for an APM Entity will not override performance category reweighting from an approved application
- This is different from our policy for individual, group and virtual group applications

An approved application wouldn’t affect your model-specific reporting requirements

- For example, Shared Savings Program ACOs must still report their quality measures through the CMS Web Interface to meet their requirements under the Shared Savings Program, unless otherwise excepted under that APM.

You can identify additional people to access or receive notifications about the status of the application you’re submitting.

In the Additional Access section of the application, you can provide the email address(es) of additional staff or representatives who should receive notifications about the status of the application.

- When you enter an email address that’s associated with a HARP account, that person will also be able to access the application when they sign in to qpp.cms.gov with their HARP credentials.
- If you are submitting an application on behalf of a APM Entity, users with access to the APM Entity on qpp.cms.gov will only be able to access the application if you add the email associated with their HARP account.

The next section reviews the MIPS Promoting Interoperability Performance Category Hardship Exception Application.

This is a distinct policy and application, separate from the Extreme and Uncontrollable Circumstances Application just discussed.

Updated 9/18/2020
# MIPS Promoting Interoperability Performance Category Hardship Exception Application Overview

<table>
<thead>
<tr>
<th>What</th>
<th>MIPS Promoting Interoperability Hardship Exception Applications allow you to request that your MIPS Promoting Interoperability performance category be reweighted to 0%.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• See Appendix B for information about the clinicians, groups and virtual groups that automatically qualify for reweighting of this performance category.</td>
</tr>
<tr>
<td>Who</td>
<td>Individual Clinicians, Groups, Virtual Groups</td>
</tr>
<tr>
<td></td>
<td>• Third Party Intermediaries can submit an application with permission from the clinician or practice.</td>
</tr>
<tr>
<td>Why</td>
<td>You can submit an application to have your MIPS Promoting Interoperability performance category reweighted to 0% if:</td>
</tr>
<tr>
<td></td>
<td>• You’re a small practice</td>
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<td></td>
<td>• You have decertified EHR technology</td>
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<td></td>
<td>• You have insufficient Internet connectivity</td>
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<tr>
<td></td>
<td>• You face extreme and uncontrollable circumstances such as disaster, practice closure, severe financial distress or vendor issues</td>
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<tr>
<td></td>
<td>• You lack control over the availability of CEHRT</td>
</tr>
<tr>
<td></td>
<td>Lacking 2015 Edition CEHRT does <strong>not</strong> qualify as a reason to submit an application.</td>
</tr>
<tr>
<td>When</td>
<td>Now through December 31, 2020 8 p.m. ET</td>
</tr>
<tr>
<td>Where</td>
<td><strong>New for 2020:</strong> Sign in to qpp.cms.gov with your HCQIS Access and Roles Profile (HARP) account.</td>
</tr>
<tr>
<td></td>
<td>• For more information on HARP accounts, please refer to the <a href="#">Register for a HARP Account</a> document in the <a href="#">QPP Access User Guide</a>.</td>
</tr>
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<td>How</td>
<td>1. <a href="#">Register for a HARP account</a></td>
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<td></td>
<td>3. Select ‘Exceptions Application’ on the left-hand navigation</td>
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<tr>
<td></td>
<td>4. Select ‘Add New Exception’</td>
</tr>
<tr>
<td></td>
<td>5. Select ‘Promoting Interoperability Hardship Exception’</td>
</tr>
<tr>
<td></td>
<td>6. Complete the application for individual, group or virtual group participation</td>
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</tbody>
</table>

*Updated 9/18/2020*
MIPS Promoting Interoperability Performance Category Hardship Exception Information for Individuals, Groups, and Virtual Groups

You may automatically qualify for reweighting in this performance category.

- See Appendix B.
- If you automatically quality for reweighting, you don’t need to submit an exception application.

You can still submit data for the MIPS Promoting Interoperability performance category.

- If your circumstances change and you’re able to collect and submit your Promoting Interoperability data, we will disregard your hardship exception and you will be scored in this performance category.
- You will also be scored in this performance category if you attest to any data, such as selecting performance period dates or responding to attestation statements, during the submission period.

You are not required to submit documentation with your application.

- However, clinicians, groups and virtual groups should retain documentation of their circumstances supporting their application for their own records in the event they are selected by CMS for data validation or audit.

To submit an application on behalf of a group, every office location/practice site within the Taxpayer Identification Number (TIN) must experience the hardship for the group to qualify for the Promoting Interoperability performance category hardship exception.

- For example, if one office location is within a broadband availability area but the other office(s) for the practice is not, the office with broadband availability would not qualify for the MIPS Promoting Interoperability performance category hardship and must report for those clinicians for whom they have data.

To submit an application on behalf of a virtual group, every office location/practice site for each TIN within the virtual group must experience the hardship for the virtual group to qualify for the Promoting Interoperability performance category hardship exception.

- For example, if one TIN is within a broadband availability area but the other TIN(s) in the virtual group is not, the TIN with broadband availability would not qualify for the MIPS Promoting Interoperability performance category hardship and must report for those clinicians for whom they have data.

You can apply for a MIPS Promoting Interoperability performance category hardship exception if you switch CEHRT vendors during the performance period.

- You would indicate an extreme and uncontrollable circumstances hardship exception and select vendor issues within the application.
The following circumstances qualify as extreme and uncontrollable circumstances for a MIPS Promoting Interoperability performance category hardship exception:

- A natural disaster resulting in damage to or destruction of your CEHRT
- Practice or hospital closure
- Severe financial distress resulting in bankruptcy or debt restructuring
- Vendor issues (such as a change in vendors during the performance period or errors with your CEHRT that your vendor is unable to address)

You may still be able to report if your electronic health record (EHR) product is decertified during the 2020 Performance Year.

- You can still submit your Promoting Interoperability performance category measures collected in your now-decertified EHR product if your performance period ended before the decertification occurred.
- If your performance period ended after the EHR decertification occurred, you can apply for a MIPS Promoting Interoperability performance category hardship exception and select decertified EHR technology.

You can identify additional people to access or receive notifications about the status of the application you’re submitting.

In the Additional Access section of the application, you can provide the email address(es) of additional staff or representatives who should receive notifications about the status of the application.

- When you enter an email address that’s associated with a HARP account, that person will also be able to access the application when they sign in to qpp.cms.gov with their HARP credentials.
- If you are submitting an application on behalf of an individual, group or virtual group, users with access to the practice or virtual group on qpp.cms.gov will only be able to access the application if you add the email associated with their HARP account

**MIPS Promoting Interoperability Performance Category Hardship Exception Information for MIPS APM Participants**

If you participate in a MIPS Alternative Payment Model (APM) and will be scored under the APM Scoring Standard, you can submit a Promoting Interoperability hardship exception application.

- You cannot submit a Promoting Interoperability hardship exception application on behalf of the APM Entity, but you can submit an application on behalf of an individual or group within the APM Entity.

*Updated 9/18/2020*
If your application is approved, you will not need to submit MIPS Promoting Interoperability performance category data.

- However, you will still receive the APM Entity score for Promoting Interoperability as determined by the APM Scoring Standard unless the performance category is reweighted for the entire entity.

You can still submit data for the MIPS Promoting Interoperability performance category.

- If your circumstances change and you’re able to collect and submit your Promoting Interoperability data, we will disregard your hardship exception and include your data in the calculation of the APM Entity score for the Promoting Interoperability performance category.
- Your data will also be included in the calculation of the APM Entity score if you attest to any data, such as selecting performance period dates or responding to attestation statements, during the submission period.

A MIPS Promoting Interoperability performance category hardship exception does not exempt you from reporting on any certified EHR technology (CEHRT) activities required for participation in your APM.

Where You Can Go for Help

- Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 AM-8:00 PM ET or by e-mail at: QPP@cms.hhs.gov.
  
  o Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

- Connect with your local technical assistance organization. We provide no-cost technical assistance to small, underserved, and rural practices to help you successfully participate in the Quality Payment Program.

- Visit the Quality Payment Program website for other help and support information, to learn more about MIPS, and to check out the resources available in the Quality Payment Program Resource Library.
Additional Resources

The QPP Resource Library houses fact sheets, measure specifications, specialty guides, technical guides, user guides, helpful videos, and more. We will update this table as more resources become available.

<table>
<thead>
<tr>
<th>Resource</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality Payment Program Access User Guide</td>
<td>The ‘Register for a HCQIS Access Roles and Profile (HARP) Account’ in this zip file will guide you through the process of obtaining a User ID and password to sign in to the QPP and complete an exception application.</td>
</tr>
<tr>
<td>About QPP Exceptions</td>
<td>QPP 2020 Exceptions web content.</td>
</tr>
<tr>
<td>2020 MIPS Automatic Extreme and Uncontrollable Circumstances Policy Fact Sheet (available fall 2020 in the QPP Resource Library)</td>
<td>This document addresses the automatic extreme and uncontrollable circumstances policy as it applies to MIPS eligible clinicians affected by natural disasters in 2020.</td>
</tr>
</tbody>
</table>

Version History

<table>
<thead>
<tr>
<th>Date</th>
<th>Change Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/18/2020</td>
<td>• Updated to include information about APM Entity extreme and uncontrollable circumstances exception applications as proposed in the CY 2021 PFS NPRM.</td>
</tr>
<tr>
<td></td>
<td>• Updated the MIPS Promoting Interoperability performance category hardship exception information for MIPS APM participants.</td>
</tr>
<tr>
<td>6/24/2020</td>
<td>Original version</td>
</tr>
</tbody>
</table>

*Updated 9/18/2020*
Appendix A. MIPS Performance Category Weight Redistribution Policies Finalized for the 2020 Performance Year

The table below illustrates the 2020 performance category weights and reweighting policies that CMS will apply to clinicians under MIPS.

As a reminder, if fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100%, or all performance categories are weighted at 0%), the clinician, group or virtual group will receive a final score equal to the performance threshold and the MIPS eligible clinicians will receive a neutral payment adjustment in the 2022 payment year.

<table>
<thead>
<tr>
<th>MIPS Performance Category Reweighting Scenario</th>
<th>Quality Category Weight</th>
<th>Cost Category Weight</th>
<th>Improvement Activities Category Weight</th>
<th>Promoting Interoperability Category Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Reweighting Applies</td>
<td>45%</td>
<td>15%</td>
<td>15%</td>
<td>25%</td>
</tr>
<tr>
<td><strong>Reweight 1 Performance Category</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Cost (APM Scoring Standard)</td>
<td>50%</td>
<td>0%</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>No Cost</td>
<td>55%</td>
<td>0%</td>
<td>15%</td>
<td>30%</td>
</tr>
<tr>
<td>No Promoting Interoperability</td>
<td>70%</td>
<td>15%</td>
<td>15%</td>
<td>0%</td>
</tr>
<tr>
<td>No Quality</td>
<td>0%</td>
<td>15%</td>
<td>15%</td>
<td>70%</td>
</tr>
<tr>
<td>No Improvement Activities</td>
<td>60%</td>
<td>15%</td>
<td>0%</td>
<td>25%</td>
</tr>
<tr>
<td><strong>Reweight 2 Performance Categories</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Cost and No Promoting Interoperability</td>
<td>85%</td>
<td>0%</td>
<td>15%</td>
<td>0%</td>
</tr>
<tr>
<td>No Cost and No Promoting Interoperability (APM Scoring Standard)</td>
<td>75%</td>
<td>0%</td>
<td>25%</td>
<td>0%</td>
</tr>
<tr>
<td>No Cost and No Quality</td>
<td>0%</td>
<td>0%</td>
<td>15%</td>
<td>85%</td>
</tr>
<tr>
<td>No Cost and No Quality (APM Scoring Standard)</td>
<td>0%</td>
<td>0%</td>
<td>20%</td>
<td>80%</td>
</tr>
<tr>
<td>No Cost and No Improvement Activities</td>
<td>70%</td>
<td>0%</td>
<td>0%</td>
<td>30%</td>
</tr>
<tr>
<td>No Promoting Interoperability and No Quality</td>
<td>0%</td>
<td>50%</td>
<td>50%</td>
<td>0%</td>
</tr>
<tr>
<td>No Promoting Interoperability and No Improvement Activities</td>
<td>85%</td>
<td>15%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>No Quality and No Improvement Activities</td>
<td>0%</td>
<td>15%</td>
<td>0%</td>
<td>85%</td>
</tr>
</tbody>
</table>

*Updated 9/18/2020*
## Appendix B. Automatic Reweighting in the MIPS Promoting Interoperability Performance Category

<table>
<thead>
<tr>
<th>Reason for Reweighting (Individual Clinicians)</th>
<th>Action Needed by the Individual</th>
</tr>
</thead>
</table>
| **You have one of these Special Statuses:**                                                                  | **None** – You are automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so.  
You will be scored in this performance category if your practice is participating as a group or virtual group and does not qualify for reweighting. |
| • Ambulatory Surgical Center (ASC)-based;                                                                   |                                                                                                                                                                                                                                |
| • Hospital-based;                                                                                              |                                                                                                                                                                                                                                |
| • Non-patient facing                                                                                          |                                                                                                                                                                                                                                |
| **You are one of these clinician types:**                                                                     | **None** – You are automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so.  
You will be scored in this performance category if your practice is participating as a group or virtual group and does not qualify for reweighting. |
| • Physician assistant                                                                                        |                                                                                                                                                                                                                                |
| • Nurse practitioner                                                                                        |                                                                                                                                                                                                                                |
| • Clinical nurse specialist                                                                                    |                                                                                                                                                                                                                                |
| • Certified registered nurse anesthetist                                                                     |                                                                                                                                                                                                                                |
| • Physical therapist                                                                                        |                                                                                                                                                                                                                                |
| • Occupational therapist                                                                                      |                                                                                                                                                                                                                                |
| • Qualified speech-language pathologist                                                                      |                                                                                                                                                                                                                                |
| • Qualified audiologist                                                                                       |                                                                                                                                                                                                                                |
| • Clinical psychologist                                                                                       |                                                                                                                                                                                                                                |
| • Registered dietitian or nutrition professional                                                             |                                                                                                                                                                                                                                |
| **Reason for Reweighting (Groups and Virtual Groups)**                                                         | **You will be scored in this performance category if your practice is participating as a group or virtual group and does not qualify for reweighting.**  
All of the MIPS eligible clinicians in your group or virtual group qualify for reweighting as individuals (through any combination of special statuses, clinician type, and approved hardship exceptions). |
| **You have one of these Special Statuses:**                                                                  |                                                                                                                                                                                                                                |
| • Ambulatory Surgical Center (ASC)-based;                                                                   |                                                                                                                                                                                                                                |
| • Hospital-based;                                                                                              |                                                                                                                                                                                                                                |
| • Non-patient facing                                                                                          |                                                                                                                                                                                                                                |
| **Note:** Groups and virtual groups are considered hospital-based (and non-patient facing) when more than 75% of the MIPS eligible clinicians in the group are hospital-based (or non-patient facing) as individuals. |                                                                                                                                                                                                                                |
| **All of the MIPS eligible clinicians in your group or virtual group qualify for reweighting as individuals:** | You will be scored in this performance category if your practice is participating as a group or virtual group and does not qualify for reweighting. |

*Updated 9/18/2020*