Welcome to APTA’s podcast series on value-based care, which explains how value is measured in the provision of health care, and describes different aspects of the Quality Payment Program, including the Merit-based Incentive Program, or MIPS, and Advanced Alternative Payment Models, or Advanced APMs. Episode 9 is The Importance of Technology in MIPS. To get the most from this episode, you may want to check out earlier episodes first.

I’m Heather Smith, APTA’s director of quality.

The Merit-based Incentive Payment System, or MIPS, which is part of the Quality Payment Program, began January 1, 2017. Created by the Medicare Access and CHIP Reauthorization Act of 2015, MIPS replaces several legacy quality-reporting programs such as the Physician Quality Reporting System, or PQRS. Physical therapists are not yet required to report under MIPS, but they are likely to be added in 2019. Like PQRS, MIPS will impact PTs in private practice, but may also at some point include facility-based PTs who bill Medicare part B.

MIPS has 4 distinct performance categories: quality, cost, improvement activities, and advancing care information. Although the MIPS quality category will allow PTs to use claims for reporting, the improvement activities and advancing care information categories require submission electronically. Given the complexity of the MIPS program and the magnitude of the potential penalties once PTs are required to participate, APTA advises that PTs plan to report MIPS data electronically through EHRs, registries such as the Physical Therapy Outcomes Registry, or a combination of both.

In the former PQRS program, most PTs reported data to CMS via claims. Unfortunately, with claims data submission, providers do not get any feedback on their performance in the program until the conclusion of the reporting year. Many PTs made simple reporting errors that led to penalties—and these errors could have been fixed to avoid the penalty if the PT had real-time feedback during the year. With MIPS penalties rising as high as 7% in 2021 and 9% in 2022 and beyond, PTs need to invest in technology that will help them to be successful in the MIPS program.

Using electronic data reporting mechanisms like EHRs and registries will allow PTs to monitor their data collection throughout the year, which will help them to make sure that they meet the data requirements in each of the categories. For instance, in the quality category, providers will need to submit data on 60% of all their patients. They will need to know if their performance related to specific measures is below, at, or above the national performance benchmark. Real-time feedback reports should alert PTs to issues with data collection or quality measure performance during the year, which will allow them to change their performance before it’s too late.

Another benefit to using EHRs and registries in MIPS is that they can decrease the reporting burden. EHRs often collect the data required for quality measures directly from documentation.
The data is then used to calculate and report the measure, allowing the PT to focus on performance instead of data collection.

PTs looking at new technology in their practice should take several things into consideration before contracting with a vendor. For EHRs, PTs need to find a product that fits their practice, and although there are no hard-and-fast rules on how to pick an EHR, APTA does have a resource page that will help you think through some important considerations—www.apta.org/ehr. Additionally, although PTs have not had to use certified EHR technology (CEHRT) in the past, they will for MIPS—so you should ask your vendor if they are certified or planning to become certified.

Registries are another valuable electronic reporting tool. The PT Outcomes Registry has a fully functional MIPS dashboard that provides real-time feedback and calculates a MIPS score throughout the year for the provider or group. The PT Outcomes Registry interfaces with the facility’s EHR, bringing data seamlessly into the registry for quality-measure reports. Additionally, the PT Outcomes Registry is working on new quality measures that PTs will be able to use in the MIPS program. For more information on the registry, visit the registry website at www.ptoutcomes.com.

APTA recommends that PTs begin preparing now for future value based-payment systems by integrating technology into their practices.

This has been Episode 9 of this podcast series on value-based care. To find all episodes of this series, go to www.apta.org/MACRA/. You also can find these and all APTA podcasts on iTunes by searching APTA Podcasts or by going to www.apta.org/Podcasts. Thanks for listening.

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