1. **What is QPP/MIPS/MACRA?**

Based on [MACRA legislation](https://www.cms.gov/Medicare/Medicare-Facts-and-Figures/Medicare-Facts-and-Figures.html), CMS has created the [Quality Payment Program](https://www.cms.gov/Medicare/Medicare-Facts-and-Figures/Medicare-Facts-and-Figures.html) (QPP or the “Program”). QPP provides penalties and incentive payments based on your Merit-Based Incentive Payment System (MIPS) scores. The Program incorporates the pre-existing value-based programs below and a new quality program, “Clinical Practice Improvement,” into 4 performance categories. Higher performance in each category will result in higher MIPS scores and a greater chance of avoiding penalties and earning larger incentives.

- **Quality**: Based on PQRS (60% of your overall 2017 MIPS Score).
- **Clinical Practice Improvement**: This is new! Think about your role in overall public health (15% of your overall 2017 MIPS Score).
- **Advancing Care Information**: Based on Meaningful Use! (25% of your overall 2017 MIPS Score).

2. **Am I required to participate in MIPS?**

3. **When will QPP begin to start impacting my Medicare Payments?**

4. **How can I avoid a payment penalties under QPP?**

5. **Are there any exclusions for small practices?**

6. **Are there any exclusions for new optometrists?**

7. **Am I required to report as a group?**

8. **How do I find out if I’m exempt from MIPS?**

9. **Do I still need to do PQRS in 2017?**

10. **Do I still need to attest to Meaningful Use for +the 2017 program year?**

11. **How do I report my QPP performance to CMS?**

12. **Where do I get more information on how to participate?**

If you have any questions not addressed by this FAQ, please contact jjose@aoa.org.
• **Resource Use/Cost:** Based on the Value-Based Modifier. (0% of your overall 2017 MIPS Score).

2. **Am I required to participate in MIPS?**
   Unless you qualify for an exclusion, for any year that you do NOT participate in MIPS, you will receive the maximum allowable reduction in your Medicare Part B payments 2 years later (See AOA’s QPP penalties and incentives for each year’s maximum penalties). For example, if you choose *not* to participate in 2017, you will receive a 4% reduction to your Medicare Part B Payments in 2019. Not participating in 2018 will result in a 5% reduction.

3. **When will QPP begin to start impacting my Medicare Payments**
   CMS will begin reducing Medicare Part B payments (penalties) or increasing Medicare Part B Payments (incentives) in 2018. These penalties and incentives will be based on performance in 2017. For more information regarding future QPP penalties and incentives, please see AOA’s QPP penalties and incentives.

4. **How can I avoid a payment penalties under QPP?**
   In 2017, doctors of optometry have several options to avoid penalties:
   1) Doctors of optometry can be excluded from QPP if they meet certain requirements
      a. See AOA's [Know your Exclusions](#) to determine if those exclusions apply to you
   2) Meet the minimum reporting requirement by choosing one of the following:
      a. Report one measure in the [Quality Performance](#);
      b. Report one activity in the [Clinical Practice Improvement Activities Performance](#);
      c. Report the required measures of the [Advancing Care Information](#)
   3) Earn incentives by partially or fully participating in QPP for a minimum of 90 continuous days.
      a. See AOA’s [Pick Your Pace](#) for participation.

5. **Are there any exclusions for small practices?**
   Yes, you are excluded from 2018 penalties and incentives if your Medicare billings from September 1, 2015 to August 31, 2016 are less than or equal to $30,000; or if you provide care for 100 or fewer Part B-enrolled Medicare beneficiaries. If you are reporting as a group, then you must combine your billings together to determine whether you group falls below the $30,000 in Medicare Billings or 100 Medicare Patient threshold.

6. **Are there any exclusions for new optometrists?**
   Yes, if you have never billed Medicare prior to 2017, then you do not need to participate in 2017 QPP and will not be subject to any 2018 penalties or adjustments. If you billed Medicare even once before 2017, then you are not considered a new provider and do not qualify for this exclusion.

7. **Am I required to report as a group?**
   You do *not* need to report to MIPS as a group even if you are part of a practice. However, if you choose to report with other doctors, then everyone in that practice must report as one
entity. For example, an individual practitioner whose individual billings would fall below the low-volume threshold exclusion, can still choose to report as part of a group. However, that individual can no longer claim the low-volume exclusion if the group’s combined billings are above the thresholds.

8. **How do I find out if I’m exempt from QPP?**
   In the final rule, CMS indicated that it will create a list where doctors of optometry can look up whether they meet the exclusion requirements by their NPI number. CMS has also indicated that they will notify doctors of optometry by mail regarding whether they are exempt or not.

9. **Do I still need to do PQRS in 2017?**
   You will no longer have to participate in PQRS after 2016. However, QPP’s Quality Performance category is based on PQRS and many of its quality measures will be familiar to doctors of optometry. The Quality Performance category will count towards 60% of your overall MIPS score.

10. **Do I still need to attest to Meaningful Use for 2017 program year?**
    In 2017, QPP will be incorporating Meaningful Use into its Advancing Care Information category. This category will count towards 25% of your overall MIPS score. Doctors of Optometry who have never successfully attested for Meaningful Use prior to 2017, can still avoid 2018 Meaningful Use Penalties if they can attest and met the Meaningful Use’s objectives in 2017 for at least three months. If the doctor of optometry has never successfully attested and is attempting to participate in 2017 MIPS, that doctor can apply for a hardship exception to avoid the 2018 Meaningful Use Penalty. See 81 FR 79892.

11. **How do I report my QPP performance to CMS?**
    If your EHR is integrated with AOA MORE, then enrolling with AOA MORE will allow for automatic reporting to CMS. Although AOA MORE is included with your membership for no additional costs, you must enroll for the service for it to become active. For a list of EHRs currently compatible with AOA MORE, please click here. Even if your EHR does not appear on the list, you can earn bonus point towards your MIPS’ ACI Score by enrolling in AOA MORE. Other methods of reporting include third party intermediaries, such as qualified clinical data registries (QCDRs), health IT vendors, qualified registries, and CMS-approved survey vendors.

12. **Where do I get more information on how to participate?**
    The following are resources designed to help you become familiar with the QPP program.
    - AOA’s QPP webpage
    - Centers for Medicare and Medicaid Services (CMS): QPP webpage
    - AOA’s Webinar: MIPS-What ODs Need to Know Now
    - AOA’s Guide: MIPS and AOA MORE
    - CMS: Quality Payment Program Final Rule Call
    - CMS: List of QPP/MACRA Webinars
    - Please contact jjose@aoa.org for any additional QPP questions