2018 ATTESTATION
ZACHARY MCCARTY, OD
CHAIR, QUALITY IMPROVEMENT AND REGISTRY COMMITTEE

I WILL NOT BE REVIEWING THE 2018 NOR THE 2019 MIPS PROGRAM(S)

PLEASE REFERENCE PREVIOUS WEBINARS AT:
WWW.AOA.ORG/MORE

AOA MORE 2018 MIPS ATTESTATION PORTAL WILL OPEN:
MARCH 5, 2019

ATTESTATION IS NOT AUTOMATIC

DO I HAVE TO ATTEST?
Year 2 (2018) Final

BILLING >$90,000 AND >200

DO I HAVE TO ATTEST?

• Check NPI/TIN combo at:
• https://qpp.cms.gov/participation-lookup

Clinicians Exempt From MIPS
• Clinicians who are not one of the clinician types above
• Clinicians who enroll in Medicare for the first time in 2018
• Clinicians who participate in an Advanced APM and are either a Qualifying APM Participant (QPP) or Partial QPP
• Clinicians who are not in a MIPS eligible specialty
• Clinicians or groups that have billed $90,000 or less in Physical Fee Schedule (PFS) services furnished to Medicare Part B Fee-for-Service (FFS) beneficiaries (including Railroad Retirement Board and Medicare secondary payer)
• Clinicians or groups that have 200 or fewer Medicare Part B FFS beneficiaries

If you're exempt from MIPS for Performance Year 2018, you are not required to participate. However, you are encouraged to check your participation status again if you’ve made any changes that may change your eligibility status.
ATTESTATION REQUIRES COMPLETION OF THE FOLLOWING STEPS OTHERWISE YOUR DATA WILL NOT BE SUBMITTED TO CMS!
2018 MIPS ATTESTATION

CLICK THE GEAR

CLICK "TRACK MIPS DATA & ..."

CLICK "OK"

SELECT "INDIVIDUAL" OR "GROUP"
CLICK "OK"

VERIFY TIN

BEGINNING OF DOCUMENT

VERIFY PHYSICIAN NPI #S

END OF DOCUMENT
VERIFY RELEASE OF DATA

Information Verifications / Attestations

CMS requires you to explicitly confirm that the following information is accurate before you can report your measures.

Dashboard

1. I certify that the PHI for Practice A is 123.0123.012

Performance Measures

Please confirm any reported Medicare Part D data for Medicaid HIE between January 1, 2018 and December 31, 2019.

MIPS Participation

Please verify that those NPI numbers are correct.

Printable Reports

Dr. 123.0123.012

Please specify your email: Myemail@myemail.com

Practice Data

Please verify that you authorize the registry to release your email address to CMS.

Providers

You have reviewed each of the P/E and/or UH measures that you have entered in this portal, and all of your Quality measure scores available in this portal, and you agree that the data and results for each measure are accurate.

Please note that Quality measures with no data or with a performance score of 0% (or 100% for the Quality measure Diabetes: Hemoglobin A1c Poor Control) will not be submitted to CMS.

Manage Users

Timeline

Please verify your answers in the following information.

VERIFY DATA REVIEWED AND ACCURATE

Dashboard

Have you reviewed and/or certified the data that you have entered in this portal, and all of your Quality measure scores available in this portal, and do you agree that the data and results for each measure are accurate?

Performance Measures

Please note that Quality measures with no data or with a performance score of 0% (or 100% for the Quality measure Diabetes: Hemoglobin A1c Poor Control) will not be submitted to CMS.

Printable Reports

Please verify your answers to the following information.

Practice Data

You must attest that you did not know in good faith and did not knowingly and voluntarily take action (such as to disable functionality) to limit or restrict the comparability or interoperability of certified EHR technology.

Providers

You must attest that you implemented certified EHR technology and were not prevented from implementing or using the certified EHR technology as a result of any interference or denial of service attack.

Manage Users

Timeline

Please verify your answers in the following information.

VERIFY NOT BLOCKING INTEROPERABILITY

Dashboard

Have you reviewed each of the P/E and/or UH measures that you have entered in this portal, and all of your Quality measure scores available in this portal, and do you agree that the data and results for each measure are accurate?

Performance Measures

Please note that Quality measures with no data or with a performance score of 0% (or 100% for the Quality measure Diabetes: Hemoglobin A1c Poor Control) will not be submitted to CMS.

Printable Reports

Please verify your answers to the following information.

Practice Data

You must attest that you did not know in good faith and did not knowingly and voluntarily take action (such as to disable functionality) to limit or restrict the comparability or interoperability of certified EHR technology.

Providers

You must attest that you implemented certified EHR technology and were not prevented from implementing or using the certified EHR technology as a result of any interference or denial of service attack.

Manage Users

Timeline

Please verify your answers in the following information.

VERIFY EXCHANGE HEALTH INFORMATION ELECTRONICALLY

Dashboard

2. You must attest that you implemented technologies, standards, policies, practices, and agreements reasonably calculated to ensure, to the greatest extent practicable and permitted by law, that the certified EHR technology was, at all relevant times: (1) connected in accordance with applicable law; (2) connected with standards applicable to the exchange of information, including the standards, implementation specifications, and certification criteria adopted at 45 CFR part 170; (3) implemented in a manner that allowed for timely access by patients to their electronic health information (including the ability to view, download, and transmit this information); and (4) implemented in a manner that allowed for the timely, secure, and trusted bi-directional exchange of structured electronic health information with other health care providers (as defined by 42 U.S.C. § 300gg-52), including qualified health care providers, and with disparate certified EHR technology and vendors.

Performance Measures

You must attest that you responded in good faith and in a timely manner to requests to retrieve or exchange electronic health information, including from patients, health care providers (as defined by 42 U.S.C. § 300gg-52), and other persons, regardless of the requester's affiliation or technology vendor.

Printable Reports

Please specify your email: Myemail@myemail.com

Practice Data

You must attest that you responded in good faith and in a timely manner to requests to retrieve or exchange electronic health information, including from patients, health care providers (as defined by 42 U.S.C. § 300gg-52), and other persons, regardless of the requester's affiliation or technology vendor.

Providers

Please specify your email: Myemail@myemail.com

Manage Users

Timeline

Please verify your answers in the following information.

SUBMIT THE DATA

Dashboard

Please specify your email: Myemail@myemail.com

Performance Measures

Please specify your email: Myemail@myemail.com

Printable Reports

Please verify that you authorize the registry to release your email address to CMS.

Practice Data

Please verify that you authorize the registry to release your email address to CMS.

Providers

Please specify your email: Myemail@myemail.com

Manage Users

Timeline

Please verify your answers in the following information.
Data is NOT submitted unless this button is "selected".

This button can ONLY be selected once all other questions above have been completed.

WARNING

ATTESTATION REQUIRES COMPLETION OF THE PREVIOUS STEPS OTHERWISE YOUR DATA WILL NOT BE SUBMITTED TO CMS!

VIDEO TUTORIALS AVAILABLE AT:
HTTPS://WWW.AOA.ORG/MORE/ATTESTATION

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