

MIPS Compliance Services

Merit-Based Incentive Payment System (MIPS)

Our consultants stay up-to-date with the latest CMS regulations and help your organization successfully navigate MIPS compliance and maximize incentives. We collaborate and guide your staff in evaluating which reporting methods and measures are most applicable and feasible for you.

Where are you with meeting the MIPS objectives?

- ✓ Quality
- ✓ Promoting Interoperability
- ✓ Improvement Activities
- ✓ Cost

Quality - 30%

- · Review previously reported data
- Evaluate clinical instances and workflow documentation
- Analyze billing and coding data
- Assess applicable and cost-effective methods of reporting
- Recommend applicable benchmarks, highpriority, and outcome measures for highest quality reporting
- Train office, clinical and IT staff
- Regular monitoring of Quality measures scores by individual NPI and TIN
- Reporting and attestation support

Promoting Interoperability (PI) – 25%

- Review existing clinical workflow and documentation
- Set-up PI reports
- Proactively prepare for PI audit
- Review and assist in Public Health reporting requirements

- Preparation for attestation
- SAFER Guide and Security Risk Assessment implementation and support
- Audit support
- Implementation of MIPS ECPS requirements and other regulatory changes



Improvement Activities – 15%

- Improvement activities selection guidance
- Documentation for audit preparation and audit support

Cost - 30%

- Review of clinical data for relevance in CMS attribution
- Recommend workflow changes to be implemented
- CMS will calculate these measures based on Part B claims

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MIPS Financial Impact



2024

Penalty = -9% Incentive = +9%*X + Y Penalty = -9% Incentive = +9%*X + Y

Note: X = Budget Neutrality Factor; Y = Max. Exceptional Performance Bonus

**The passing threshold may potentially increase to 82/100 in 2025. It is currently 75/100 to pass MIPS.

Category	How do we maximize incentive?
Quality	 In 2024, Quality is worth 30% of the total MIPS score. Quality must be reported for the entire year and the measures must have 70% data completeness. We help with Quality measures applicability determination, patient billing data evaluation; and measures & reporting method selection to maximize MIPS Quality score. We help choose and report through multiple methods where applicable to maximize scoring.
Promoting Interoperability (PI)	 In 2024, Promoting Interoperability is worth 25% of the total MIPS score. This category reporting requires use of the 2015 edition CEHRT. In 2024, the PI reporting period must be for a minimum of 180 consecutive days in the year. We perform patient workflow assessment, help with applicable PI measures reporting within the certified EHR, monitor data, and help with attestation.
Cost	 In 2024, Cost is worth 30% of the total MIPS score. We can estimate current MIPS baseline performance; as well as evaluate current billing and coding data. Gain insight into MIPS cost category performance by analyzing existing data sources like QPP reports and/or patient billing data, to help maximize the cost score.
Improvement Activities (IA)	 In 2024, IA is worth 15% of the total MIPS score. We evaluate the current practice environment and measures that may be in place. To save time and resources, we recommend any of the applicable existing measures, or find new specialty-specific heavy-weighted measures and help with implementation protocol.
Attestation Assistance	Upon completion of previous year's MIPS reporting, we help with data submission and attestation.

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Audit Support	MIPS is auditable by CMS for up to 6 years after submission.
	We help guide you with saving the primary source documents, including screenshots, workflows, security risk assessment and related audit documentation, to be prepared for the audit.

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