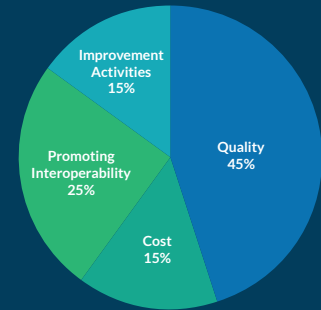


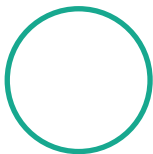
Reporting MIPS in 2019

The Merit-based Incentive Payment System (MIPS) determines quality and efficiency of care through four performance categories: Quality, Promoting Interoperability, Improvement Activities, and Cost. Performance in these four categories during the 2019 calendar year will aggregate into a final score used to determine a payment adjustment for a MIPS-eligible clinician or group in the 2021 payment year.



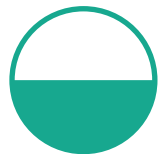
MIPS Final Score Impact on Payment Adjustments in 2021

Scored out of a possible 100 points



0-29 Points

Not participating in the Quality Payment Program or a low MIPS final score will result in up to a -7% penalty.



30 - 74 Points

Achieving a moderate MIPS final score will provide penalty avoidance and maybe a slight incentive.



75+ Points

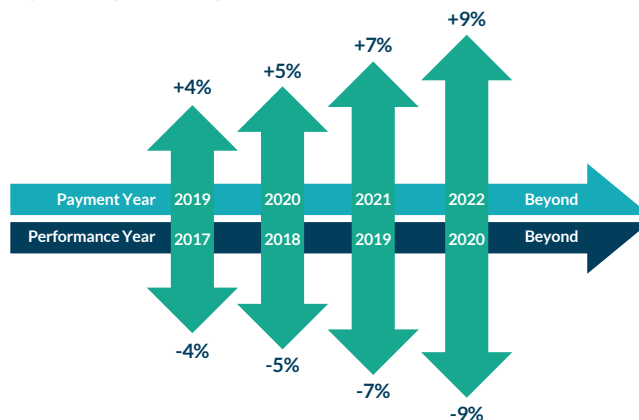
High performers will be eligible for the 7% incentive and an exceptional performance bonus of up to 10%.

What's New for 2019 Reporting?

- The final score weighting has been adjusted so that Cost has a 15% weight and Quality has a 45% weight.
- The performance threshold raised from 15 points to 30 points.
- Eight episode-based measures will now be a part of the Cost performance category score.
- 2015 edition CEHRT must be used for Promoting Interoperability (formerly ACI).
- Groups and individuals who fall under the Low-Volume Threshold may opt-in to participate.

Payment Adjustment Schedule Based on Performance Year

Adjustments occur two years after performance year



MIPS Eligible Clinicians

2019 will introduce a new group of eligible clinicians.

Year	Eligible Clinicians
2017+	<ul style="list-style-type: none"> • Physician • Physician Assistant • Nurse Practitioner • CRNA • Clinical Nurse Specialist
2019+	<ul style="list-style-type: none"> • Physical Therapist • Occupational Therapist • Clinical Psychologist • Speech-Language Pathologist • Audiologist • Registered Dietician • Nutrition Professional

**Note: Newly eligible clinicians are exempt from PI for 2019 reporting.*

Who is Exempt?

- ★ Qualifying Advanced APM participants.
- ★ Clinicians who have:
 - ≤ \$90,000 in Medicare Part B charges
 - OR-
 - ≤ 200 Medicare Part B beneficiaries
 - OR-
 - ≤ 200 covered professional services under the Physician Fee Schedule (PFS).
- ★ Clinicians newly enrolled to Medicare.

For more information, visit mipspro.com

A CMS Qualified Registry by