

ASPA Empowered Healthcare Services - MIPS Services Program:

ASPA Empowered exists to support our IPA member practices individually as well as our physician-led and managed Accountable Care Organization and Clinically Integrated Network (ACO/CIN) ASPA Connected Community. ASPA Empowered is a service organization owned by ASPA and offers practice services designed to help each individual practice. This includes our **MIPS Services program**. ASPA Empowered supports our members and helps your practice maximize MIPS scoring through a comprehensive practice support and enablement program.

MIPS fundamentally changes your Medicare payments dramatically. It has the potential to decrease your payments significantly. However, it is also an incredible opportunity to significantly increase your Medicare payments. With proper attention to how MIPS works, Practices can achieve a positive payment adjustment on Medicare Rates that range from 4% to over 25% (in time) based on meeting and exceeding the measures. It is there to be had, if you know how to achieve the maximum scores. This is where ASPA Empowered delivers value. We provide clinical, operational and reporting expertise, as well as supporting tools and technology, that will help you achieve a maximum payment adjustment. MIPS reporting and scoring weighting is based on these categories:

Quality (<i>former PQRS</i>)	60%	Practice Improvement Activities (<i>new</i>)	15%
Advancing Care (<i>former Meaningful Use</i>)	25%	Cost (<i>new</i>)	0% (2017)*

**Cost will be given score weighting in 2018 and beyond. Quality weight lowered and shifted to Cost weight.*

As is clear, the majority of scoring weight is based on the previous programs of **Quality** and **Meaningful Use**. However, it is important to note that the scoring components in each are different than before. A clear understanding and alignment to the scoring methods are key to maximizing your score (see reverse side for more details). **Improvement Activities** and **Cost** (resource effectiveness) are new. For the independent practice, maximizing scores in these two categories will be much more difficult.

ASPA Empowered is in a unique position to help you with all four of these scoring elements. **Leveraging a model that we utilize for our ACO/CIN, we can deliver a comprehensive MIPS program to your practice designed to meet all of these key objectives. In support of our ACO/CIN, we have established programs to maximize quality, better coordinate care, use our network to reduce costs and of course report our progress in all areas.** Maximizing MIPS scores across all four categories are crucial to achieving a sustained positive payment adjustment each and every year. ASPA Empowered does it for the ACO/CIN and we can provide the same service for your practice.

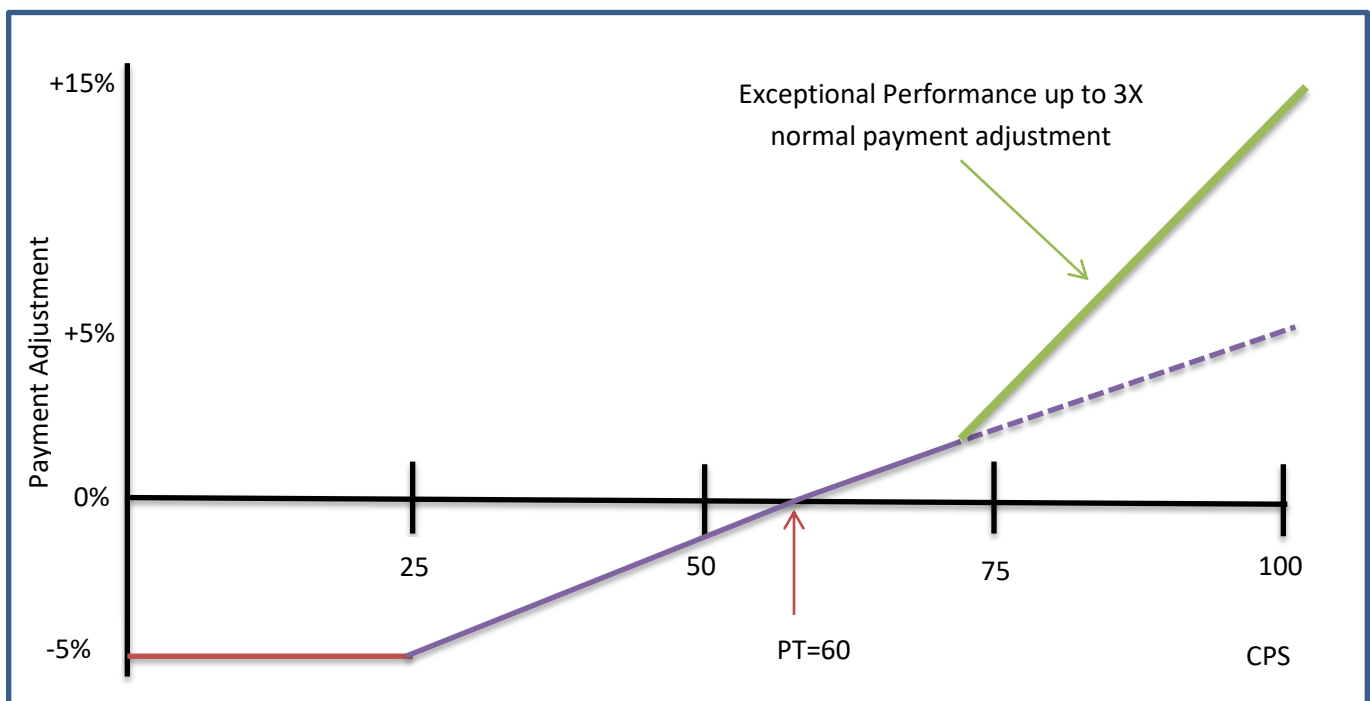
ASPA Empowered MIPS service enables your practice to use MIPS scoring to your benefit. We don't "sell" you an offering like vendors will. Rather we provide you with the tools and clinical support services so your practice can more effectively provide coordinated and quality care for your patients while maximizing your practice revenue.

Maximizing MIPS Composite Performance Score (CPS) Max = 100

Medicare allows you to select many of your **quality** and **advancing care initiatives** measures while others are considered mandatory. Further, Medicare is making your practice accountable through **improvement activity** measures for care management, care coordination and overall **cost/resource** utilization management. Enabling tools and clinical support resources are key to ongoing management of these activities and measures. Key things to consider in selecting MIPS measures are:

- Focus attention on base score performance as it has effect on other scores
- Maximum value of individual scores (High performance accelerator and outcome measures)
- Be careful with Benchmark Measure based scores (Incremental value/weight of scores limits)
- Base measure selection on ease of achieving and maximizing scores
- Attention to improved scores based on method of data collection and reporting
- Number of patients (volume) needed for applicable credit in scoring
- Ability to report for as many months of performance year as possible (12 months vs. 3 months)
- Leverage enabling technology and clinical support staff to:
 - track costs, utilization, clinical services and place of service
 - Track your selected measures, activities and performance against selected measures
 - care coordination and care management
 - patient outreach, compliance and follow-up

Maximizing Financial Benefit example based on CPS as compared to others (Performance Threshold “PT”)



ASPA Empowered Healthcare Services is owned and operated by ASPA.

For further information contact ProgramDirector@ASPACConnected.com or call 602.265.2524 Ext 210