

## (2) Election Process

CMS proposes to establish an election process that would end on June 30 of a calendar year before the applicable performance period. During the election process, CMS proposes that individual MIPS-eligible clinicians and groups electing to be a virtual group would be required to register in order to submit reportable data. Virtual groups would be assessed across all four MIPS performance categories. CMS intends to address all elements relating to the election process in future rulemaking.

### *AAFP Response*

CMS offers no rationale for the proposed June 30 deadline to elect to register as a virtual group. Consequently, it is not clear why groups must make that decision a full six months in advance of the performance year. We propose that CMS set the deadline at September 30 instead, which would still give the agency 90 days before the applicable performance period, assuming the performance period began on January 1.

We have no problems with the proposal that individual MIPS-eligible clinicians and groups electing to be a virtual group would be required to register in order to submit reportable data.

## 4. MIPS Performance Period

CMS proposes MIPS claims data used in MIPS that such claims would need to be processed no later than 90 days after the end of the applicable performance period for information to be used in calculations. If 90 days is not feasible, then CMS would use 60 days. If 90 or 60 days are not possible, then CMS would use claims that are paid within 60 days after 2017 for payment adjustment in 2019.

CMS also proposes that the performance period under MIPS would be the calendar year (Jan. 1- Dec. 31) two years prior to the payment year. If a MIPS-eligible clinician switches practices during the performance year, or does not have a full year of data, they are required to report what they do have.

Additionally CMS discusses an alternative approach for future years for assessment of individual MIPS-eligible clinicians with less than 12 months of performance data in the performance year. For example, if CMS could identify such MIPS-eligible clinicians and confirm there are data issues that lead to invalid performance calculations, then CMS could score the MIPS-eligible clinician with a CPS equal to the performance threshold, which would result in a payment adjustment of zero.

Finally CMS seeks input on how to account for MIPS-eligible clinicians that take extended leave (i.e., illness, vacation and holidays) that may affect sample size.

### *AAFP Response*

We appreciate the need for a 90-day period for claims data run-out as opposed to the 60 days currently given in the PQRS.

The AAFP continues to be very concerned about the approach CMS has outlined in the proposed rule for the definition of the performance period, the process for providing accurate and actionable data to physicians on their performance, and CMS' approach for assuring that the payment period for physicians is based on the most up-to-date information on each physician's performance. We believe CMS has the ability and resources to take concrete steps to address these issues and assure that primary care physicians are appropriately evaluated