Quality Payment
PROGRAM

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

2020 Extreme & Uncontrollable Circumstances Application User Guide

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

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How to Use This Guide

How to Use This Guide

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Hyperlinks

Hyperlinks to the QPP website are included throughout the guide to direct the reader to more information and resources.
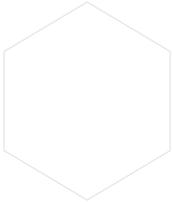
Please Note: This guide was prepared for informational purposes only and is not intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It is not intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Overview

General Information

If you have concerns about the effect of an event such as the COVID-19 public health emergency on your 2020 performance data, including cost measures, you should submit an Extreme & Uncontrollable Circumstances Exception Application **NOW** citing COVID-19 as the reason.

As an additional flexibility, we are extending the application deadline to submit a COVID-19 related extreme and uncontrollable circumstances application to February 1, 2021.

- A HARP account is required to submit an application.

- Third-party intermediaries can also submit an application on your behalf with your permission.

This resource highlights key policies and provides screenshots for users. See the 2020 MIPS Exceptions Application Fact Sheet to learn more.

> **Note**: Extreme and uncontrollable circumstances applications not related to COVID-19 must be submitted before December 31, 2020 to be considered for approval.

Individuals, Groups, and Virtual Groups

Applications can be submitted for one or more performance categories.
- Any performance category that isn't included in the application is eligible for scoring, even if no data are submitted, unless the clinician or group qualifies for reweighting under another policy.

Any data you submit, or someone submits on your behalf, will override reweighting for that performance category and the category will be scored.
- If the cost performance category is included in the application, cost measures won't be scored even if data is submitted for other performance categories.
- **IMPORTANT**: Even though we are extending the deadline for COVID-19 related extreme and uncontrollable circumstances applications into the PY 2020 submission period, individuals, groups and virtual groups can't submit an application to override PY 2020 data that has been submitted. **Any data submitted for an individual, group, or virtual group before or after an application has been approved will be scored.**

You must be scored on at least 2 performance categories to earn a MIPS Final Score other than the performance threshold.
- When fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100% of your final score, and the other performance categories are weighted at 0%), the final score for the 2020 MIPS performance period would be equal to the performance threshold and you would receive a neutral payment adjustment in 2022.

Individuals, Groups, and Virtual Groups *(continued)*
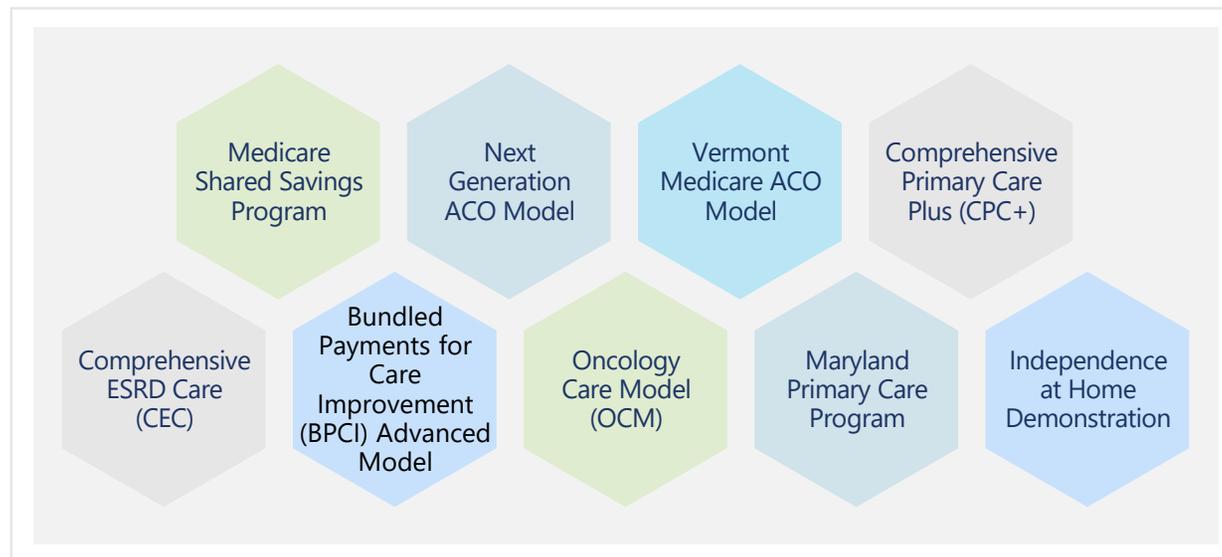
Example

You, a MIPS eligible clinician (or group or virtual group), submit an application to have all 4 performance categories reweighted, but later determine you are able to collect and submit data for the improvement activities and Promoting Interoperability performance categories:

- You will receive a MIPS Final Score based on the data submitted.
- The improvement activities performance category will be weighted to 15%.
- The Promoting Interoperability performance category will be weighted to 85% of your final score.
- The quality performance category will retain a 0% weight because you didn't submit quality data.
- The cost performance category will retain a 0% weight because there are no data submission requirements associated with the cost performance category (reweighting can't be voided).

APM Entities

We have finalized a policy to allow MIPS APM Entities to submit a PY 2020 Extreme and Uncontrollable Circumstances Exception Application for all MIPS performance categories.

- This policy was finalized in the CY 2021 PFS Final Rule and applies to the following models:

Medicare Shared Savings Program

Next Generation ACO Model

Vermont Medicare ACO Model

Comprehensive Primary Care Plus (CPC+)

Comprehensive ESRD Care (CEC)

Bundled Payments for Care Improvement (BPCI) Advanced Model

Oncology Care Model (OCM)

Maryland Primary Care Program

Independence at Home Demonstration

APM Entities *(continued)*

APM Entity applications must be submitted for all performance categories.
- You can't submit an application for an APM Entity to request reweighting in 1 or 2 performance categories.
- This is different from our policy for individual, group, and virtual group applications.

If your APM Entity's application is approved, the APM Entity will receive a final score equal to the performance threshold and the MIPS eligible clinicians in the APM Entity group would receive a neutral payment adjustment even if data are submitted for the APM Entity.
- Data submitted for an APM Entity will not override performance category reweighting from an approved application.
- This is different from our policy for individual, group, and virtual group applications.

An approved application won't affect your model-specific reporting requirements.
- For example, Shared Savings Program ACOs must still report their quality measures through the CMS Web Interface to meet their requirements under the Shared Savings Program, unless otherwise excepted under that APM.

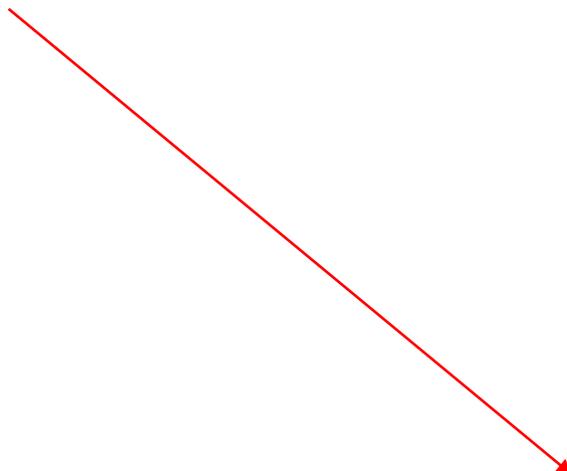# Application Steps

Application Steps

Steps 1-4
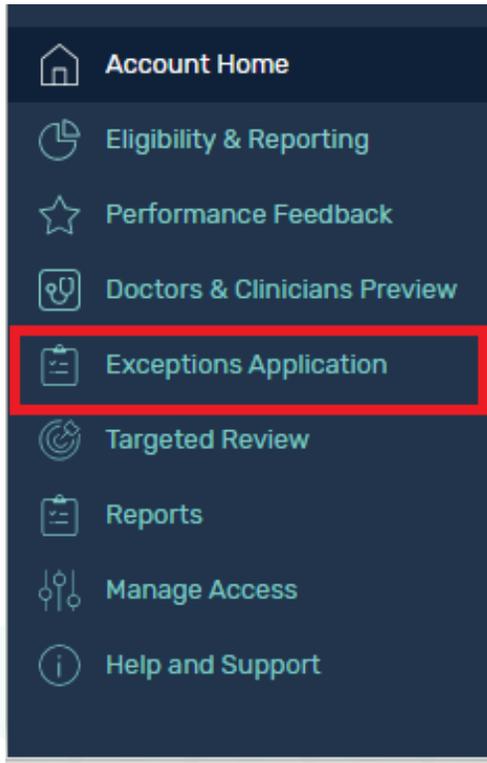
1. [Register for a HARP account](#) if you don't have one.

2. [Sign in to qpp.cms.gov](#) with a HARP account to submit an application.

3. Click **Exceptions Application** on the left-hand navigation.

4. Click **Add New QPP Exception**.

Step 5

5. Choose the Extreme & Uncontrollable Circumstances Exception option.

Application Steps

Step 6

6. Select the application type based on the level at which you intend (or intended) to participate in MIPS:

- **Individual**
  – National Provider Identifier (NPI) and practice affiliation required

- **Group**
  – Taxpayer Identification Number (TIN) required

- **Virtual Group**
  – Virtual Group identifier required

- **APM Entity**
  – APM Entity ID required

Note: If you're only requesting reweighting of 1 or 2 performance categories and intend to submit data for others, it's critical that you select the application type that aligns with the level at which you intend to submit data to MIPS (at the individual or group level.)

Step 7

7. Provide your contact information (as the submitter) and identify your relationship to the party identified in the application.

Step 8

8. In the Additional Access section, identify additional users to receive notifications about the application—if there is a HARP account associated with the email address(es) you provide, that person will be able to sign in to qpp.cms.gov and access the application.

Application Steps

Step 9

9. Cite **COVID-19** as the event and indicate the date range (March 2020 – present). Only applications related to COVID-19 will be considered for approval after December 31, 2020.

Extreme and Uncontrollable Circumstances Details

Event Type * ⑦

- ⦿ COVID-19
- ◯ Natural Disaster
- ◯ Ransomware / Malware
- ◯ Medical Issue
- ◯ Other

Event Date Range * ⑦

Start Date			
3/1/2020	📅	To	Present 📅

☑ Event Still Persists

Step 10

10. Write a brief description about the data collection challenges the clinician or group is facing as a result of the COVID-19 pandemic or include concerns about the effect that the COVID-19 pandemic will have on PY 2020 performance data, including cost measures.

No supporting documentation is required to submit an application.

| **Example** (brief description/concerns) |
| --- |
| Due to the COVID-19 pandemic, many of our processes, workflows, and resources have shifted to care for patients at high risk with urgent and severe medical conditions. This shift has adversely affected our ability to collect 2020 performance data, changed our patient population and the validity of measure data we could collect, and has affected the cost of care we're providing. |

Steps 11 & 12

11. Check the box next to each performance category for which you are requesting reweighting.

Note that all performance categories will be automatically selected for APM Entity applications.

12. Click Submit for Review.

WITHDRAW   SUBMIT FOR REVIEW >
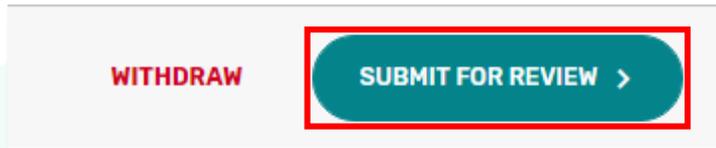
Performance Categories Affected * ⑦

☑ **Quality**

This category covers the quality of the care you delivered, based on performance measures created by CMS, as well as medical professional and stakeholder groups. **Do not select this category if you were able to report data for at least one year.**

☑ **Promoting Interoperability**

This category focuses on patient engagement and the electronic exchange of health information by proactively sharing information with other clinicians or the patient in a comprehensive manner. **Do not select this category if you were able to report data for at least 90 days.**

☑ **Improvement Activities**

This category includes an inventory of activities that assess how you improved your care processes, enhanced patient engagement in care, and increased access to care. **Do not select this category if you were able to report data for at least 90 days.**

☑ **Cost**

The cost of the care you provide is calculated by CMS based on your Medicare claims. MIPS uses cost measures to gauge the total cost of care during the year or during a hospital stay. **Selecting this category will have no effect on your exception outcome.**

Help, Resources, and Version History

Where Can You Go for Help?

Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 a.m.-8:00 p.m. Eastern Time or by e-mail at: QPP@cms.hhs.gov.
- Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Connect with your local technical assistance organization. We provide no-cost technical assistance to small, underserved, and rural practices to help you successfully participate in the Quality Payment Program.

Visit the Quality Payment Program website for other help and support information, to learn more about MIPS, and to check out resources available in the QPP Resource Library.

Help, Resources, and Version History

Resources

The following resources are or will be available on the QPP Resource Library.

General:

- 2020 MIPS 101 Guide
- 2020 MIPS Group Participation Guide
- 2020 MIPS Scoring Guide
- 2020 MIPS Exceptions Application Fact Sheet
- How to Apply for the 2020 Extreme and Uncontrollable Circumstances Hardship Exception Video

Quality:

- 2020 Quality Benchmarks
- Medicare Shared Savings Program Quality Measure Benchmarks for the 2020/2021 Performance Years
- 2020 Quality Quick Start Guide
- 2020 MIPS Quality User Guide
- 2020 MIPS Quality Measures List
- 2020 CMS Web Interface Quick Start Guide
- 2020 CAHPS for MIPS Survey Overview Fact Sheet
- 2020 Medicare Part B Claims Measure Specifications
- 2020 MIPS Clinical Quality Measure Specifications
- 2020 QCDR Measure Specifications
- 2020 CMS Web Interface Measure Specifications

Cost:

- 2020 Cost Quick Start Guide
- 2020 MIPS Cost User Guide
- 2020 Cost Measure Information Forms (specifications)

Improvement Activities:

- 2020 Improvement Activities Quick Start Guide
- 2020 MIPS Improvement Activities User Guide
- 2020 Improvement Activities Inventory

Promoting Interoperability:

- 2020 Promoting Interoperability Quick Start Guide
- 2020 Promoting Interoperability User Guide
- 2020 Promoting Interoperability Measure Specifications

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Version History

If we need to update this document, changes will be identified here.

Date	Change Description
12/17/2020	Updated to clarify the extension is for applications related to COVID-19 and to reinforce that applications won't override data submission for individuals, groups, and virtual groups
12/2/2020	Original posting