TriumpHealth
We Maximize Revenue

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, hi-priority, 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 relevance for attribution
- Recommend workflow changes to be implemented
- CMS will calculate these measures based on claims

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(888) 747-3836 x0

MIPS Financial Impact

2022

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

2023

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

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

Category	How do we maximize incentive?
Quality	• For 2023, there are a total of 30 points for Quality • We help with Quality measures applicability determination, patient billing data evaluation; and measures & reporting method selection to maximize MIPS Quality score • Choose and report through multiple methods where applicable
Promoting Interoperability (PI)	• For 2023, there are a total of 25 points for PI, and this category reporting requires use of the 2015 edition CEHRT • We perform patient workflow assessment, help with applicable PI measures reporting within the certified EHR, monitor data, and help with attestation
Cost	• In 2023, there are a total of 30 points for Cost category. We 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 2023, there are a total of 15 points for IA. 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
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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