

# Quality Payment Program Deadline Looming - and Change is Afoot



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8:00 p.m. EST on March 31, 2020 is the final deadline for [submitting your 2019 performance data](#) for the Quality Payment Program (QPP). Many physicians participate in the QPP through the Merit-based Incentive Payment System (MIPS) track, which requires reporting on Quality, Promoting Interoperability, and Improvement Activities.

If you have joined an Accountable Care Organization, don't ignore this deadline. Even MIPS ACO participants must report a portion of the data – for example, Promoting Interoperability - directly on CMS' reporting platform. It pays to verify your reporting status, as the penalty for failing to participate is a whopping 7%, which will be imposed on your 2021 Medicare reimbursement.

If you are in a small practice – defined by the Centers for Medicare & Medicaid Services as 15 clinicians or less – there are key “flexible” options to reduce your reporting burden; be sure to take advantage of them: <https://qpp.cms.gov/about/small-underserved-rural-practices>

All QPP participants may benefit from the government’s recent announcement about future program changes. On February 21, the Department of Health and Human Services (HHS) released the report titled: “[Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs](#).” HHS declared its intention to simplify the Promoting Interoperability scoring model of the MIPS program. No details were provided about the expected changes; be on the lookout for near-term announcements likely to come this summer.

The 73-page report also addressed HHS’ intentions to promulgate standards that support multi-payer, real-time, prior authorizations; to establish a framework for consistent standards for EHR systems to “better align EHR design with real-world clinical workflow;” and to pressure vendors to foster interoperability. These are simply recommendations but put a spotlight on where the federal government is placing its efforts in 2020 with regards to healthcare information technology.

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