

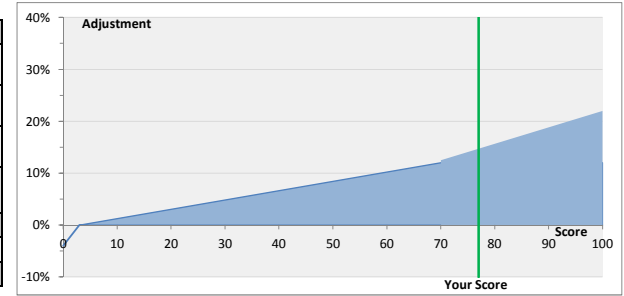
Number of MIPS eligible clinicians	Total Annual Medicare Part B Allowable Charges	Total Case Volume	Charges represent 100 or less beneficiaries per clinician
5	\$150,005.00	201	<input type="radio"/> Yes <input checked="" type="radio"/> No



Practice is a rural practice or is a small practice or is located in a geographic health professional shortage area (HPSA)? Yes No

Graph Adjustment Year (2019-2022)
2019

Performance Categories	Weight	Input for Category Estimates			Final Points
Quality • Quality Measures	85%	Points (Out of 60)	End-to-end electronically reported quality measures using CEHRT	High Priority Bonus	69.59
		40.12	7	2	
Advancing Care Information • Meaningful use of certified EHR	0%	Base Score (Out of 50)	Performance Score (Out of 90)	Bonus Points	0.00
		50	41	10	
Improvement Activities • Clinical practice improvement activities	15%	Number of high-weighted activities	medium-weighted activities		7.50
		0	1		
Cost • Resource Use	0%	Will not be counted until 2018			
<input type="radio"/> Select if using this score ----> <input checked="" type="radio"/> Select if using this score ----> <input type="radio"/> Select if using this score ---->					
Final Score Standard Calculation					80.62
Final Score with Reweighted Advancing Care Information Performance Category					77.09
Final Score with Fully Credited Improvement Activities Performance Category					88.12



Reporting Year	Adjustment Year	Performance Thresholds			Annual Change in Final Score	Final Score	Applicable Percent	Adjustment Factor		Adjusted Reimbursement		Reimbursement Per Clinician (equal weighting)	
		Neutral	Exceptional	Minimum				Base	Addit.	Base	Additional	Base	Additional
2017	2019	3	70.0	0.75		77.09	4%	4.00%	2.74%	\$ 6,000.20	\$ 4,116.30	\$ 1,200.04	\$ 823.26
2018	2020	57	71.25	14.25	2	79.09	5%	5.00%	3.09%	\$ 7,500.25	\$ 4,634.42	\$ 1,500.05	\$ 926.88
2019	2021	58	72.50	14.50		79.09	7%	7.00%	2.78%	\$ 10,500.35	\$ 4,163.23	\$ 2,100.07	\$ 832.65
2020	2022	59	73.75	14.75		79.09	9%	9.00%	2.43%	\$ 13,500.45	\$ 3,647.17	\$ 2,700.09	\$ 729.43
Total MIPS incentives										\$ 37,501.25	\$ 16,561.12	\$ 7,500.25	\$ 3,312.22

This material is presented by the Great Plains Quality Innovation Network, the Medicare Quality Improvement Organization for Kansas, Nebraska, North Dakota and South Dakota, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.

Prior MIPS	\$	600,020.00	\$	120,004.00
After MIPS Estimate	\$	637,521.25	\$	127,504.25
MIPS + Addit. Bonus	\$	654,082.37	\$	130,816.47
Total Medicare Reimbursement Over 4 Years				

This tool was developed within Great Plains Quality Innovation Network while under contract with the Centers for Medicare & Medicaid Services (CMS). The contents presented do not necessarily reflect CMS policy. (1150W-GPQIN-KS-D1-47/0417)