

## Advocating for Payment Programs That Work for You



**PROBLEM:** Medicare requirements for reimbursements have long been geared toward primary care physicians and riddled with complex challenges. Congress proposed major changes to this system in legislation called MACRA, but the draft legislation still overlooked the unique needs of non-patient-facing physicians like pathologists.



MACRA ended the broken Sustainable Growth Rate formula.

PROOF

POINTS:



MACRA established a new framework for rewarding health care providers for quality and cost of care, not just more care.



MACRA combined existing Medicare quality reporting programs (PQRS, Meaningful Use, VBM) into one—MIPS.

## The CAP's advocacy successfully added a provision to MACRA that ensures pathologists have flexibility to participate in new reimbursement models.

CAP members and staff extended the life of CAP quality measures for pathologists enabling credit under PQRS and the new MIPS program.

Additionally, the CAP continues to advocate for:

- Ensuring the broadest number of pathologists qualify for the distinction of non-patient-facing physicians
- Incorporating a wide array of services for demonstrating credit toward clinical practice improvement activities
- Exploring alternative pathology measures for controlling use of health care resources and advancing care through health information technology
- Researching pathology-specific physician-focused payment models as an alternative payment model for pathologists.

## **SOLUTION:** What MIPS Means to You

MIPS Category Weights for 2017: Non-Patient-Facing Physician MIPS Category Weights for 2017 Replaces PQRS; report up to six quality measures Replaces PQRS; report up to six quality measures 60% Quality 85% New category; attest that you complete two New category; attest that you completed up to Clinical Practice 15% medium-weighted or one Improvement four improvement activities Activities high-weighted activity Replaces EHR Replaces EHR Advancing Incentive Program: non-patient-facing Incentive Program: non-patient-facing 25% 0% Care clinicians do not need clinicains do not need Information to report on this to report on this category category Replaces value-based Replaces value-based modifier; will not be score for 2017, modifier; will not be score for 2017, 0% 0% **Resource Use** will start to count will start to count in 2018 in 2018

MIPS sets up penalties and bonuses for pathologist/physician reimbursement. Because of CAP's advocacy success with these new measures, pathologists can avoid penalties and are eligible for bonuses if they report correctly.

## CAP Measures in the Quality Performance Category

Breast Cancer Resection Pathology ReportingColorectal Cancer Resection Pathology ReportingBarrett Esophagus Pathology ReportingRadical Prostatectomy Pathology ReportingEvaluation of HER2 for Breast Cancer PatientsLung Cancer Reporting (biopsy/cytology specimens)Lung Cancer Reporting (resection specimens)Melanoma Reporting

MACRA: Medicare Access and CHIP Reauthorization Act | PQRS: Physician Quality Reporting System VBM: Value-Based Modifer | MIPS: Merit-Based Incentive Payment System | EHR: Electronic Health Record



