

Facility-Based Measurement in MIPS:

A Potential Safety Net for which Most
Radiologists Will Be Eligible

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In 2019, CMS introduced a new and distinct methodology for measuring and scoring the performance of MIPS eligible clinicians:
facility-based measurement

Who is eligible?

- Clinicians who furnish 75% or more of their services in a facility setting
 - Hospital Inpatient (POS 21)
 - On-campus Hospital Outpatient (POS 22)
 - Emergency department (POS 23)
- Groups in which 75% or more of clinicians meet criteria to be facility based as individuals

Facility based clinicians can use their hospital's score in the **Value Based Purchasing (VBP)** program as a proxy for their Quality and Cost scores in MIPS

Facility-based Clinicians have two options

- Avoid headache and expense of MIPS and rely on their hospital's performance for their score and payment adjustment
- Continue to submit to MIPS as before and let facility-based score be calculated in the background, CMS will take the higher of the two scores

Purpose

To estimate the percentage and characteristics of radiologists eligible for facility-based measurement, and to identify potential implications of this policy initiative

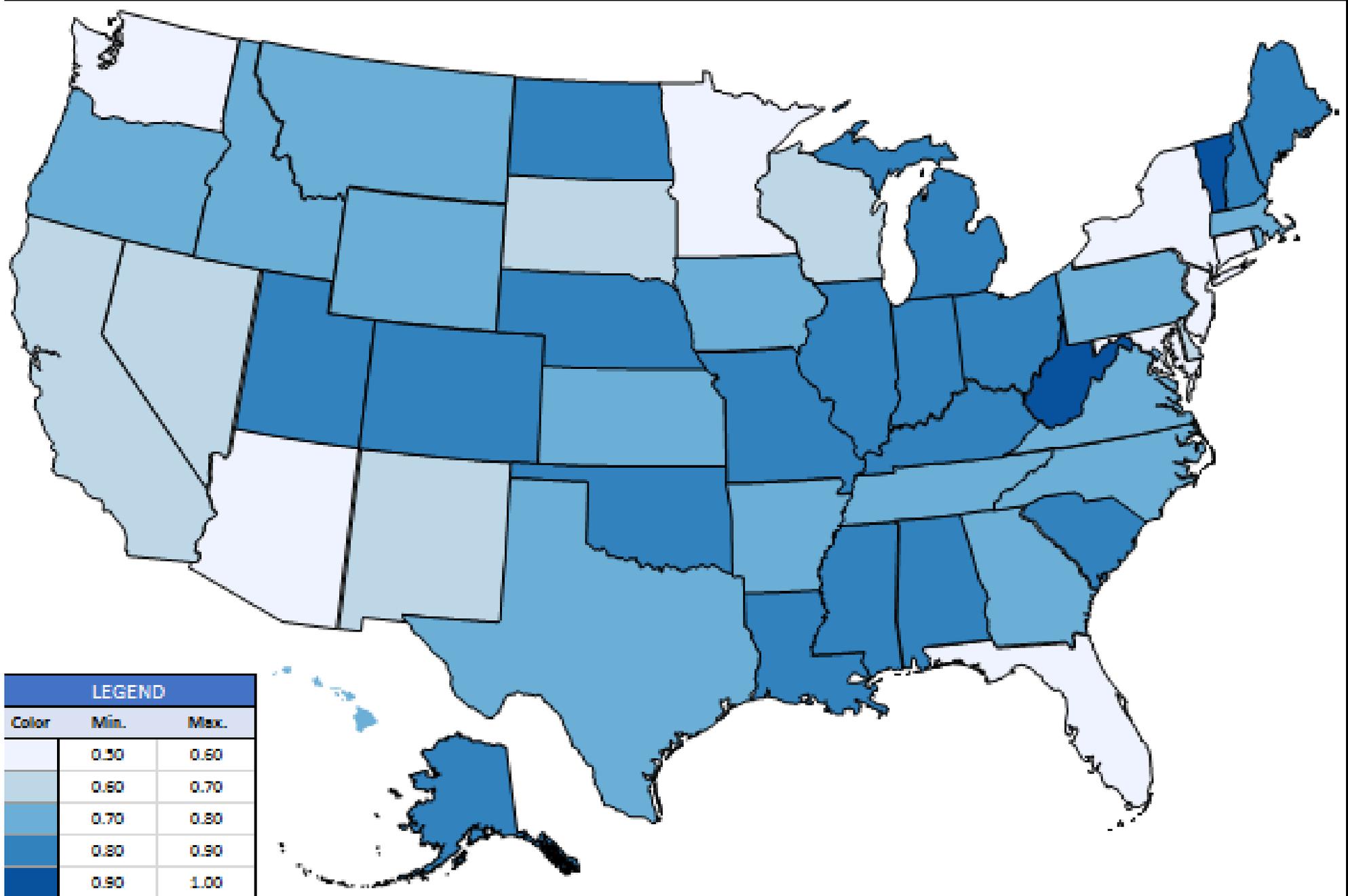
Methods

- The Provider Utilization and Payment Data: Physician and Other Supplier Public Use File (POSPUF) was obtained from CMS for calendar year 2016
- This file includes aggregate service counts stratified as “facility” and “non-facility”
- All professional services were extracted for all radiologists nationally
- For each radiologist, the percentage of all claims that were facility-based was determined
- Radiologists were then classified as facility-based if they met the 75% threshold required for facility-based measurement eligibility in MIPS in 2019

Results

- Among 31,217 included radiologists nationally, 71% met eligibility criteria for facility-based measurement as individuals in MIPS
- Across a range of physician characteristics, this percentage showed only slight variation, such that large majorities of radiologists across various characteristics subsets met criteria
- Percentage predicted eligibility varied considerably by state

		n	% of claims meeting 75% facility-based threshold
	<i>entire sample</i>	31,217	71.0%
gender	<i>female</i>	7,031	64.5%
gender	<i>male</i>	24,186	72.9%
region	<i>Midwest</i>	7,016	78.3%
region	<i>Northeast</i>	7,062	64.7%
region	<i>South</i>	10,430	73.2%
region	<i>West</i>	6,482	67.6%
years in practice	<i><10</i>	4,026	78.8%
years in practice	<i>10 to 24</i>	13,164	72.3%
years in practice	<i>25+</i>	11,710	67.3%
group practice size	<i>≤15</i>	5,647	68.0%
group practice size	<i>16-50</i>	8,431	74.2%
group practice size	<i>51-100</i>	3,584	69.9%
group practice size	<i>101-500</i>	4,598	71.7%
group practice size	<i>≥500</i>	6,115	73.6%
rural status	<i>urban</i>	29,694	71.3%
rural status	<i>rural</i>	713	81.6%
academic status	<i>non-academic</i>	22,010	70.4%
academic status	<i>academic</i>	6,364	77.0%



Should radiologists change their MIPS strategy?

- Radiology groups could choose not to submit quality measures into MIPS and rely instead only on their hospital's VBP score if they deemed the cost or time investment too high
- This could be particularly beneficial for clinicians and groups that face challenges accessing hospital data for registry reporting

But...

We believe that in most cases it would be prudent for radiologists to **continue submitting measures into MIPS** and allow the facility-based calculation to proceed in the background

Why?

- If the facility-based score is higher, those radiologists will benefit from potential higher payment adjustments
- Importantly, they will also continue to gain experience collecting and measuring quality data
- These are skills that will become increasingly invaluable as payment reform in healthcare progresses toward risk-based and population-based reimbursement

Take-home Messages

- A large majority of radiologists nationally will meet new eligibility criteria for facility-based measurement in the MIPS, providing those radiologists who face challenges reporting into MIPS with a safety net in the form of their hospital's VBP score
- Only small variations in radiologists' eligibility for facility-based measurement exist across a range of physician and practice characteristics
- MIPS facility-based measurement eligibility will be highly heterogeneous at the state-level with particularly low eligibility in certain states, highlighting a source of disparity in how this program stands to impact radiologists nationally.
- While facility-based measurement, in its current form, should not change a radiologist's underlying MIPS strategy, it is important that radiologists understand the process and partner with their hospitals to optimize programmatic success