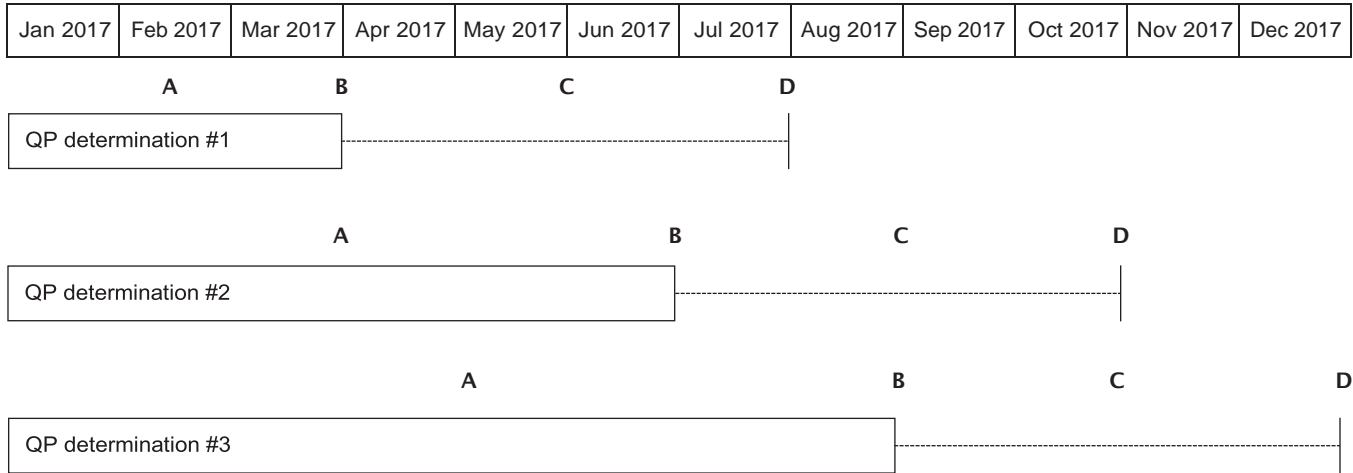


### MACRA timeline: MIPS and Advanced APM reporting requirements for payment year 2019

	2015	2016	2017												2018												2019												Notes																												
			J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D																													
<b>MIPS</b>																																																																			
Baseline Period (for "Improvement")	1																																														1. "Improvement" not scored for first year of MIPS (Performance Period 2017), thus first Baseline Period will be 2016 for 2018 Performance Period, 2020 Payment Year																				
Performance Period																																																2. For Part B claims, QCDR, Qualified Registry, and EHR reporting, a minimum of a continuous 90-day period is required to be reported; and the performance period may vary by performance category. Reporting must start by 10/2/2017. A 12-month period is required for reporting via CMS Web Interface, CAHPS, and administrative claims-based measures.																			
Date of Service range for claims																																																																			
Processing Date range for claims																																																																			
Payment adjustments announced																																		3															3. Announced no later than December 1st prior to Payment Year																		
Payment Year																																																																			
<b>Reporting Mechanisms</b>																																																																			
REGISTRATION	Qualified Registry		No registration required																																																																
	EHR		No registration required																																																																
	QCDR		No registration required																																																																
	Attestation		No registration required																																																																
	Administrative Claims		No registration required																																																																
	CMS Web Interface																																4																4. Groups of 25 or more ONLY; must register by 06/30 of applicable 12-month Performance Period																		
	CAHPS data																																		5																5. Must register by 06/30 of applicable 12-month Performance Period																
SUBMISSION	Qualified Registry																																	6																6. Submission period begins January 1, 2018; ends March 31, 2018																	
	EHR																																		6																																
	QCDR																																		6																																
	Attestation																																		6																																
		Administrative Claims																																		7															7. Submission is automatic via claims processing. Claims must be processed no later than 60 days following the close of the performance period.																
		CMS Web Interface																																		8																8. 8-week period after close of performance period, ending no later than 03/31; specific deadline to be published on CMS website															
	CAHPS data																																		9																9. Survey must be reported on behalf of the organization by a CMS-approved survey vendor. Survey will be administered November 1, 2017 through February 28, 2018 and be sent to selected patients from the 2017 Performance Period.																
<b>APMs</b>																																																																			
Advanced APM list published		10																																															10. No later than January 1, 2017																		
Eligible Clinician Performance Period																																			11																11. EC Performance Period is 01/01/2017-08/31/2017																
Eligible Clinician Volume Assessment																																			12																12. If EC qualifies in any of the three snapshot periods,																
Notice of QP/PQP Determination																																			13																13. EC groups will be notified of their QP/PQP status determination results as soon as determinations are made and validated by CMS. This will not occur before Summer 2017. Please note that the notification dates are approximations and not clearly defined in the final rule.																
5% Payment Incentive Program payment base																																																																			
Date of Service range																																																																			
Processing Date range																																																																			
QP/PQP Incentive Payment																																																			14																14. Not before Summer 2019, no later than December 31, 2019

\* Proposed APM scoring standards require MIPS eligible clinicians to report certain data under MIPS regardless of whether they ultimately become Qualifying APM Participants (QPs) or Partial Qualifying APM Participants (Partial QPs) through their participation in Advanced APMs. Medicare believes it is necessary (for operational and administrative reasons) to treat these eligible clinicians as MIPS eligible clinicians unless and until the QP or Partial QP determination is made.

# Appendix



**A** = claims data period used for QP determination

**B** = the snapshot date (Participation or Affiliated Practitioner List)

**C** = claims run-out period

**D** = estimated completion date of QP determination

At the end of each QP snapshot period (3/31, 6/30, 8/31) an assessment will occur and a determination will be made, pending CMS verification. Once an eligible clinician reaches QP status, the QP determination remains in force until the end of the performance year.