

## Leveraging Improvement Activities

Is your practice engaged in improvement activities? Are you consistently trying to improve the quality of the care and service that you provide, both in the clinical side and non-clinical activities? I hope that you are. If so, then you can probably use these activities and the gains that they produce to improve the income at your site.

One way to leverage improvement activities is to take advantage of the MIPS program of the Medicare program. As you may be aware, MIPS is a program for eligible clinicians that rewards or penalizes them for various activities. For 2018 the reward or penalty is 5% of billed Medicare services. These bonuses or penalties will apply to 2020 income for a practice. In order to avoid a penalty of any amount, an eligible clinician (EC) or group (if reporting as a group) must score 15 points this year. If a group or EC scores less than or equal to 3 points, they will be penalized the full 5% in 2020. If a group earns more than 70 points this reporting year, they will be eligible for an “exceptional bonus”, which will be determined by CMS later. Any score above 15 points will make a practice eligible for a bonus of up to 5%. From my point of view, 5% is a significant income increase for those groups or practices with a significant number of Medicare patients.

According to the Medical Group Management Association (MGMA) in a slide show provided to members there are several pathways to meet the 15-point threshold:

- Report all required Improvement Activities
- Meet Advancing Care Information base score and submit 1 Quality measure that meets data completeness
- Meet Advancing Care Information score by reporting 4 or 5 base measures and submit one medium-weighted Improvement activity
- Submit 6 Quality measures that meet data completeness criteria

I do not intend in this newsletter to discuss anything other than Improvement Activities as defined by CMS. I intend to look at some of the other categories at a later time since each can be used to leverage income improvement not only through Medicare but also through private payers.

In order to achieve 15 points through Improvement Activities an EC or group practice can attest to completing two high-weighted activities, one high-weighted activity and two medium weighted activities, or four medium-weighted activities over any 90 day period this year. A list of the 93 Improvement Activities is listed on the [CMS website](#). One of the high-weighted activities is to “collect and follow-up on patient experience and satisfaction and develop an improvement plan” based upon the data collected. A practice may use a survey that it develops and need not to use a survey created by the government. In fact, MGMA has designed a survey for its members that is very effective. I have used it after modification for clients for whom I collect and analyze patient satisfaction data. I find it to be very complete and effective.

As I said, a practice need only collect patient satisfaction for a continuous 90 days in the calendar year. To satisfy the MIPS requirement for such collection, it only has to attest that it has done so.

When I work with providers to collect patient-satisfaction data through a survey I emphasize that the most important question is, “Would you recommend our practice to your family and friends?” This is the gold standard for any business. Businesses that collect customer satisfaction data understand that customers who answer ‘Yes’ to this question are highly satisfied and will more than likely remain a loyal customer in the future as well as bring in other new clients. Word of mouth is very powerful.

The benefits of providing highly satisfactory care extend beyond a bonus payment from CMS and acquiring new clients. Data collected from CMS can also be used to negotiate with private payers to receive a bonus on reimbursement from them. Payers are very interested in paying providers extra to meet the Triple Aim—providing better care at a lower cost with higher patient satisfaction. They understand that highly satisfied patients are more likely to follow their clinician’s advice and thus, be healthier. Result, lower cost for the payer. A provider may, for instance, negotiate to have a 1% increase in reimbursement for hitting a defined benchmark on the referral question, such as 70%. A higher achievement on this question may result in an even higher level of reimbursement.

There are 22 more patient engagement activities in the Improvement Activities section on the CMS website. Among these are having patients and families help guide improvement activities at a site and to use evidence-based techniques to implement self-management into usual care. As with patient satisfaction surveys, payers may be willing to incentivize providers for reaching well-defined benchmarks in these areas.

I believe that it is worthwhile to sit down with a representative from a payer with whom you have a contract and ask them what they would like you to focus upon to improve outcomes at your site. Very often they will have ideas based upon the data they have collected from your billing. If they have ideas that you could implement and that would lead to better care for your patients, then you should pursue these suggestions. A recent MGMA publication, *Transitioning to Alternative Payment Models*, says that a common theme for all such discussions and arrangements is the metrics needed to be collected and compared to industry standards. Data for which there are no peer comparable benchmarks will not be considered by payers.

As you can see, there are several ways to increase the income at your site by proving that you are engaged in improvement activities that benefit your patients. Both the MIPS program and private payers are willing to reward practices that engage in well-defined improvement activities that can be measured and benchmarked. Businesses in general can increase their income by providing highly satisfactory service and products. They do not receive their reward from third-party payers generally but through increased client loyalty and through recommendations to family and friends.