

2023 MIPS Promoting Interoperability Performance Category Hardship Exception Application Guide

Quality Payment

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Purpose: This guide will provide general information about the MIPS Promoting Interoperability Performance Category Hardship Exception application and provide step-by-step instructions on how to complete the





How to Use This Guide



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Please Note: This guide was prepared for informational purposes only and isn't intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It isn't intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Hyperlinks

Hyperlinks to the Quality Payment Program website are included throughout the guide to direct the reader to more information and resources.





Overview

What	MIPS Promoting Interoperability Hardship Exception applications allow you to request that your MIPS Promoting Interoperability performance category be reweighted to 0%.
Who	 Individual clinicians, groups, and virtual groups reporting via traditional MIPS, MIPS Value Pathways (MVPs) or the APM Performance Pathway (APP). Third party intermediaries can submit an application with permission from the clinician or practice. Some clinicians, groups and virtual groups automatically qualify for reweighting of the Promoting Interoperability performance category. If you qualify for automatic reweighting, you don't need to apply for a MIPS Promoting Interoperability Hardship Exception. See Appendix A for information about the clinicians, groups, and virtual groups that automatically qualify for reweighting of this performance category.
	You can submit an application to have your MIPS Promoting Interoperability performance category reweighted to 0% if:
Why	 You have insufficient Internet connectivity You have decertified electronic health record (EHR) technology You lack control over the availability of certified EHR technology (CEHRT o Lacking 2015 Edition CEHRT doesn't qualify as a reason to sub You face extreme and uncontrollable circumstances such as a disaster, practice closure, severe financial distress or vendor issues If you experience an extreme and uncontrollable circumstance that impacts multiple performance categories, the Extreme and Uncontrollable Circumstances
When	The Promoting Interoperability Hardship Exception application will close at 8 p.m. ET on January 2, 2024.
Where	 Sign in to qpp.cms.gov with your HCQIS Access and Roles Profile (HARP) account. For more information on HARP accounts, please refer to the Register for a HARP Account document in the QPP Access User Guide (ZIP).
How	 Register for a HARP account Sign in to the QPP website Select 'Exceptions Application' on the left-hand navigation Select 'Add New Exception' Select 'Promoting Interoperability Hardship Exception' Complete the application for individual, group or virtual group participation
<u> </u>	or complete the application for marriadal, group of virtual group participation







MIPS Promoting Interoperability Performance Category Hardship Exception Information

Quality Payment

Overview

You may automatically qualify for reweighting in this performance category.

Reminder: Small practices qualify for automatic reweighting.

- See Appendix A.
- If you automatically quality for reweighting, you don't need to submit an exception application.

You'll complete the Hardship Exception application at the level for which you'll report data to MIPS.

- If you're reporting data at the individual level, complete the Hardship Exception application at the individual level.
- If you're reporting data at the group level, complete the Hardship Exception application at the group level.
- Note, a group Hardship Exception application will **only** apply at the group level.
 - o If your practice is participating in MIPS at the individual level, don't complete the Hardship Exception application at the group level. You'll complete the Hardship Exception application at the individual level for each clinician (who doesn't automatically qualify for reweighting) to be considered for reweighting.
 - o If you're reporting as an MVP as a subgroup, the group level Hardship Exception will apply to the subgroup participants.

You can still submit data for the MIPS Promoting Interoperability performance category.

- If your circumstances change and you're able to collect and submit your Promoting Interoperability data, we'll disregard your Hardship Exception application and you'll be scored in this performance category.
- You'll also be scored in this performance category if you attest to any data, such as selecting performance period dates or responding to attestation statements, during the submission period.
- Small practices qualify for automatic reweighting of the Promoting Interoperability performance category.



Overview (Continued)

You aren't required to submit documentation with your application.

 However, clinicians, groups, and virtual groups should retain documentation of their circumstances supporting their application for their own records in the event they're selected by CMS for data validation or audit. See our 2023 MIPS Data Validation Criteria (ZIP) for details on the data validation process.

You can apply for a MIPS Promoting Interoperability performance category hardship exception if you switch CEHRT vendors during the performance period.

 You would indicate an extreme and uncontrollable circumstances hardship exception and select vendor issues within the application.

The following circumstances qualify as extreme and uncontrollable circumstances for a MIPS Promoting Interoperability performance category hardship exception:

- A natural disaster resulting in damage to or destruction of your CEHRT
- Practice closure
- Severe financial distress resulting in bankruptcy or debt restructuring
- Vendor issues (such as a change in vendors during the performance period or errors with your CEHRT that your vendor is unable to address)

You may still be able to report if your EHR product is decertified during the 2023 performance year.

- You can still submit your Promoting Interoperability performance category measures collected in your now-decertified EHR product if your performance period ended before the decertification occurred.
- If your performance period ended after the EHR decertification occurred, you can apply for a MIPS Promoting Interoperability performance category hardship exception and select decertified EHR technology.



PROGRAM

MIPS Promoting Interoperability Performance Category Hardship Exception Information

Groups and Virtual Groups

To submit an application on behalf of a group, every office location/practice site within the taxpayer identification number (TIN) must experience the hardship for the group to qualify for the Promoting Interoperability performance category hardship exception.

For example, if one office location is within a broadband availability area but the other office(s)
for the practice is not, the office with broadband availability would not qualify for the MIPS
Promoting Interoperability performance category hardship and must report for those clinicians for
whom they have data.

To submit an application on behalf of a virtual group, every office location/practice site for each TIN within the virtual group must experience the hardship for the virtual group to qualify for the Promoting Interoperability performance category hardship exception.

• For example, if one TIN is within a broadband availability area but the other TIN(s) in the virtual group is not, the TIN with broadband availability would not qualify for the MIPS Promoting Interoperability performance category hardship and must report for those clinicians for whom they have data.



MIPS Promoting Interoperability Performance Category Hardship Exception Information

MIPS APM Participants

MIPS eligible clinicians and groups with MIPS eligible clinicians participating in a MIPS APM can apply for hardship exceptions and qualify for automatic reweighting just like other MIPS eligible clinicians.

If you're participating in MIPS at the APM Entity level (either reporting traditional MIPS or the APP), you would complete the application as an individual or group.

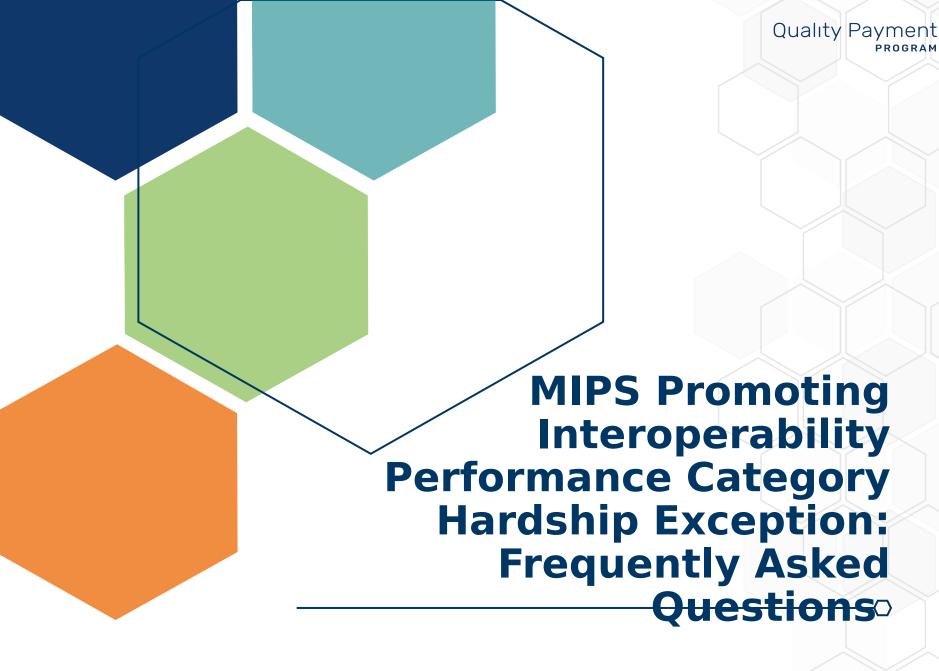
• If approved, the clinician will receive the APM Entity's score, but will be excluded from the calculation when we create an average Promoting Interoperability score for the APM Entity.

APM Entities reporting the APP or traditional MIPS can't submit a Promoting Interoperability Hardship Exception application on behalf of the entire Entity.

• When participating in MIPS as an APM Entity, the Promoting Interoperability performance category is still reported at the individual or group level.

A MIPS Promoting Interoperability performance category hardship exception doesn't exempt you from reporting on any CEHRT activities required for participation in your APM.





MIPS Promoting Interoperability Performance Category Hardship Exception: Frequently Asked Program Questions

Question	Answer
Where Can I Look for a Status Update on Our MIPS Promoting Interoperability Performance Category Hardship Exception Application?	You can monitor your application status in your QPP Account on the QPP website .
	Yes, you can add additional staff or representatives who should receive notifications about the status of the application.
Can Additional Staff Members Access/Receive Notifications About the Status of the MIPS Promoting Interoperability	In the Additional Access section of the application, provide the email address(es) of additional staff or representatives who would like to receive email notifications.
Performance Category Hardship Exception Application?	Please note: the additional staff or representatives must have HARP credentials in order to see the application on the QPP website .
How Can I Correct a Mistake Made on Our MIPS Promoting Interoperability Performance Category Hardship Exception Application?	If you identified an error with your exception application, please contact the Quality Payment Program Service Center by email at OPP@cms.hhs.gov , create a OPP Service Center ticket , or by phone at 1-866-288-8292 (Monday-Friday, 8 a.m 8 p.m. ET).





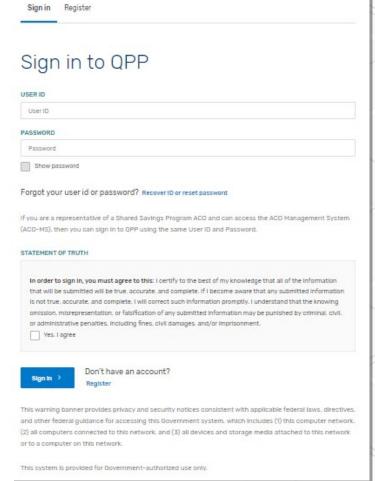


OPP Account

Step 1: Sign in to Your QPP Account

With your HARP credentials, sign in to your QPP Account on the QPP website.

Note: If you haven't signed in on the OPP website before, you must register for an account to obtain your HARP credentials. See our OPP Account Access Guide (ZIP) for information on creating an account.



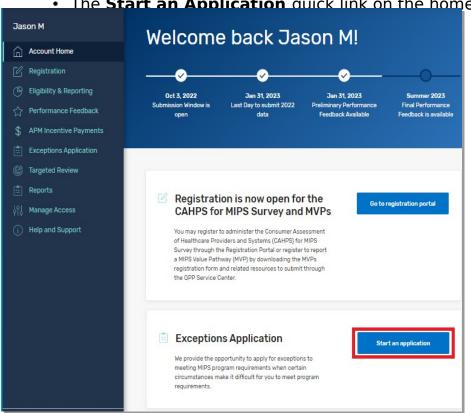
Step 2: Navigate to Your Exception Applications

Once you're signed into your account, select:

 The Exception Application tab in the left-hand navigation menu, then click + Add New QPP **Exception**

OR

The Start an Application quick link on the home page.



You can create and submit a new exception request until 8 p.m. ET on January 2, 2024.

Step 3: Select the Exception Application

Select the MIPS Promoting Interoperability Performance Category Hardship Exception, then Continue.

Add New Exception

Exception Type *

 MIPS Promoting Interoperability Performance Category Hardship Exception

The MIPS Promoting Interoperability Performance Category Hardship Exception applications allows you to request reweighting specifically for the Promoting Interoperability performance category if you qualify for one of the reasons identified below.

- · You have decertified EHR technology
- · You have insufficient internet connectivity
- You face extreme and uncontrollable circumstances such as disaster, practice closure, severe financial distress or vendor issues
- · You lack control over the availability of CEHRT
- Extreme and Uncontrollable Circumstances Exception

The Extreme and Uncontrollable Circumstances Exception application allows you to request reweighting for any or all performance categories if you encounter and extreme and uncontrollable circumstance or public health emergency, such as COVID-19, that is outside of your control.

All other events such as vendor issues, decertification of EHR, etc. should be filed as a Promoting Interoperability Hardship Exception.

*The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots and what you see on the OPP website.

CANCEL

CONTINUE >



Step 4: Select Application Type

Select the **participation level** at which you intend to participate in MIPS, then select **Save** & **Continue**.

App	olication Type: * ②
•	Individual
Ō	Group
0	Virtual Group
	Clinician NPI * ②
	0123456789

(Image features application at the individual level)

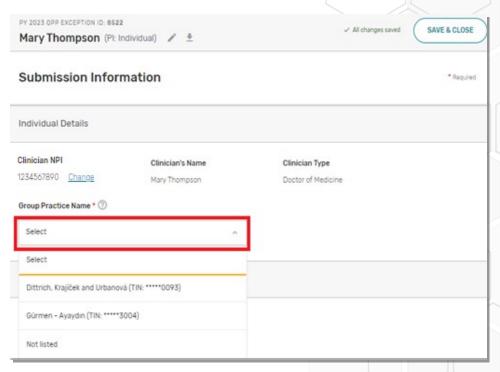
^{*}The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots

Step 5: Enter Participation Level Information

Enter the required participation level information.

The required information for each participation level is as follows:

Participati on Level	Required Information
Individual Clinician	National Provider Identifier (NPI)Practice Affiliation
Group	 Taxpayer Identification Number (TIN)
Virtual Group	Virtual Group Identifier



(Image features application at the individual level)

^{*}The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots

Step 6: Enter Submitter Details

vou see on the OPP website

Enter your **contact information** (as the submitter) and identify your **relationship to the party** identified in the application.

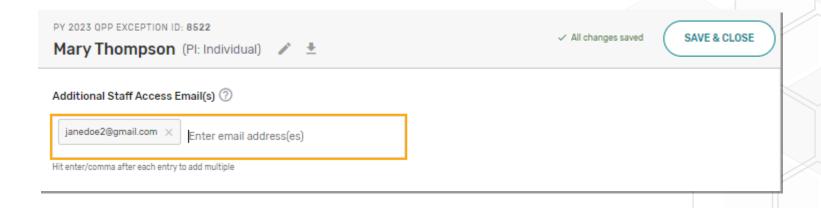
Mary Thomp	oson (Pl: Individual)	<u>*</u>		✓ All changes saved	SAVE & CLOSE
Submissio	n Information				* Required
Individual Deta	ils				
Clinician NPI 1952415861 Char		n's Name ompson	Clinician Type Doctor of Medicine		
Group Practice Na	nme * ⑦	7)			
Please specify	and Orbanova (TIN:OUS)	5) 🗸			
Clinician					
Consultant Physician Staff					
Registry / QCDR					
EHR Vendor					
Other Please specify		^			

^{*}The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots

Step 7: Enter Additional Staff in Additional Access Section

You can identify additional users to receive notifications about the application in the **Additional Access** section.

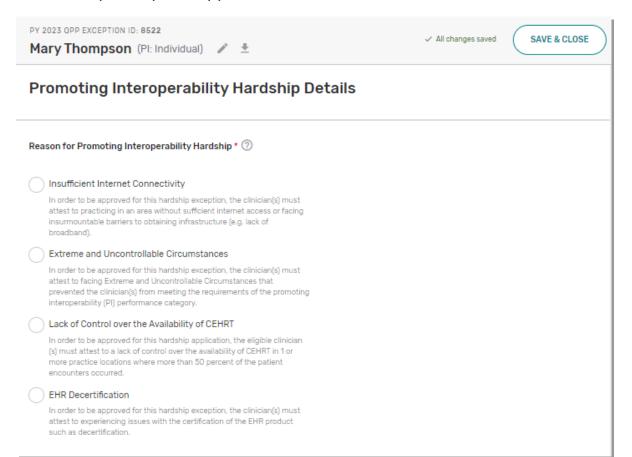
If there's a HARP account associated with the email address(es) you provide, the person will be able to sign into their own account on the QPP website and access the application.



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MIPS Promoting Interoperability Performance Quality Payment Category Hardship Exception: Application Steps Step 8: Select the Reason for the MIPS Promoting Interoperability Hardship

Select the option that aligns with your reason for submitting an MIPS Promoting Interoperability Hardship Exception application.



Note: You don't need to submit supporting documentation with your application. However, you should retain documentation of the circumstances supporting your application for your own records in case you are selected by CMS for data validation or an audit. See our 2023 MIPS Data Validation Criteria

for details on the data validation process,

Step 9: Complete Attestation and Provide Event Description

Before submitting your application, you must **complete the attestation** (differs for each reason option).

- Insufficient Internet Connectivity
- Extreme and Uncontrollable Circumstances
- Lack of Control Over the Availability of CEHRT
- EHR Decertification

You also can provide an optional **brief description** on the hardship you experienced and how performance data is impacted.

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MIPS Promoting Interoperability Performance Quality Payment Category Hardship Exception: Application Steps Step 9: Complete Attestation and Provide Event Description

(Continued)

Reason Option 1: Insufficient Internet Connectivity

Review the attestation statement and select "I attest."

You can provide an optional description of the hardship ev

Insufficient Internet Connectivity Details

In order to be approved for this hardship exception, the clinician(s) must attest to practicing in an area without sufficient internet access or facing insurmountable barriers to obtaining infrastructure (e.g. lack of broadband).

✓ I attest that: *

On behalf of the clinician(s) listed in this application, I am requesting this hardship exception and attest that the clinician(s) was(were) located in an area without sufficient Internet access to comply with the promoting interoperability (PI) performance category objectives requiring internet connectivity, and faced insurmountable barriers to obtaining such internet connectivity.

Description of event that caused this hardship

6000 characters remaining

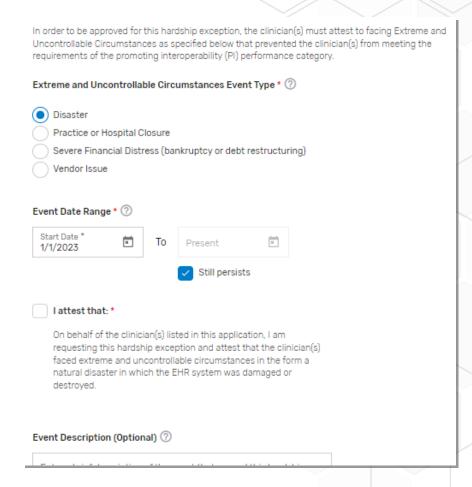
MIPS Promoting Interoperability Performance Quality Payment Category Hardship Exception: Application Steps Step 9: Complete Attestation and Provide Event Description

(Continued)

Reason Option 2: Extreme and Uncontrollable Circumstances

Select the extreme and uncontrollable circumstances event type that applies to you, enter the event dates, then review the attestation statement and select "I attest."

You can provide an optional description of the hardship event.



(Continued)

Reason Option 3: Lack of Control Over the Availability of CEHRT

Review the attestation statement and select "I attest." You can provide an optional description of the hardship event.

Lack of Control over the Availability of CEHRT

In order to be approved for this hardship application, the eligible clinician(s) must attest to a lack of control over the availability of CEHRT in 1 or more practice locations where more than 50 percent of the patient encounters occurred.



On behalf of the clinician(s) listed in this application, I am requesting this hardship exception and attest that the clinician(s) lacked of control over the availability of CEHRT in 1 or more practice locations where more than 50 percent of the patient encounters occurred.

Event Description (Optional) ?

Enter a brief description of the event that caused this hardship

6000 characters remaining

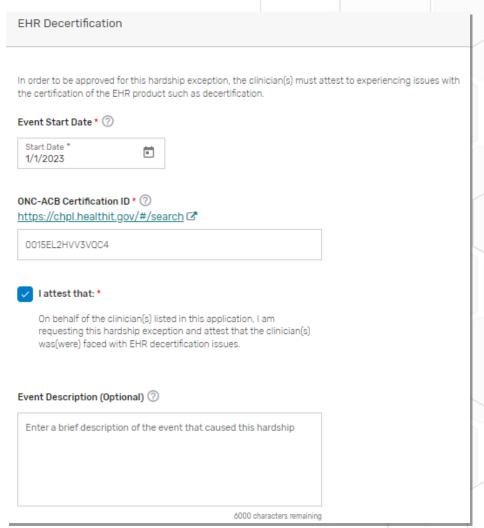
MIPS Promoting Interoperability Performance Quality Payment Category Hardship Exception: Application Steps
Step 9: Complete Attestation and Provide Event Description

(Continued)

Reason Option 4: EHR Decertification

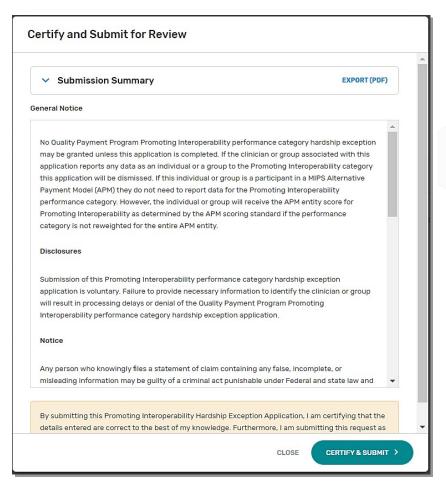
Enter the date that your EHR was decertified and your ONC-ACB Certification ID. Then, review the attestation statement and select "I attest."

You can provide an optional description of the hardship event.



MIPS Promoting Interoperability Performance Quality Payment Category Hardship Exception: Application Steps Step 10: Submit MIPS Promoting Interoperability Hardship Application

Once you're done with your application, review the disclosures, then select **Certify & Submit**.



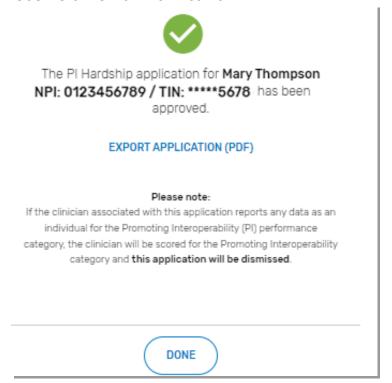
*The screenshots included in this user guide were based on the QPP test environment. Because we are always working to incorporate feedback and improve the experience, there may be differences between these screenshots

: vou see on the OPP website

MIPS Promoting Interoperability Performance Quality Payment Category Hardship Exception: Application Steps MIPS Promoting Interoperability Hardship Application Submission Confirmation

After you submit your MIPS Promoting Interoperability Hardship application, you will receive a message stating that your hardship application has been successfully submitted and is pending review.

You'll also receive an email notification.



See Appendix D for information on the various application statuses.

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PROGRAM



Help, Acronyms, and Version History

Where Can You Go for Help?

Contact the Quality Payment Program Service Center by email at QPP@cms.hhs.gov, create a

OPP Service Center ticket, or by phone at 1-866-288-8292 (Monday through Friday, 8 a.m. - 8 p.m. ET).

 People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant. Visit the

<u>Quality Payment Program we</u> bsite

for other

help and support information, to learn more about MIPS, and to check out the resources available in the Quality Payment Program Resource Library



Help, Acronyms, and Version History

Version History

If we need to update this document, changes will be identified here.

Date	Description
09/29/2023	Updated Appendix A to add clinical social workers as individual clinicians eligible for reweighting and Appendix D to adjust the reporting entities for whom the table is applicable.
05/01/2023	Original Posting.





Appendices Appendix A.

Automatic Reweighting in the MIPS Promoting Interoperability

Performance Category	
Reason for Reweighting (Individual Clinicians)	Action Needed by the Individual
 You have one of these Special Statuses: Small Practice; Ambulatory Surgical Center (ASC)-based; Hospital-based; or Non-patient facing 	None - You're automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so. You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.
 You are one of these clinician types: Physical therapist Occupational therapist Qualified speech-language pathologist Qualified audiologist Clinical psychologist Registered dietitian or nutrition professional Clinical social worker 	None - You're automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so. You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.
	1
Reason for Reweighting (Groups and Virtual	Action Needed by the Group or Virtual Group
	Action Needed by the Group or Virtual Group You'll be scored in this performance category if your practice is participating as a group or virtual group and doesn't qualify for reweighting.

Appendices Appendix B.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Individual Clinicians, Groups and Virtual Groups

The table below illustrates the 2023 performance category weights and reweighting policies that CMS will apply to clinicians, groups, and virtual groups reporting via traditional MIPS.

Refer to Appen

Refer to Appendix D for reweighting policies that apply to APM Entities.

Important Reminders:

o Individual Clinicians, Groups, Virtual Groups: If fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100%, or all performance categories are weighted at 0%), the clinician, group, or virtual group will receive a final score equal to the performance threshold and the MIPS eligible clinicians will receive a neutral payment adjustment in the 2025 payment year.

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promotir Interoperak Category W	oility
No Reweighting					Note:
Standard Weighting under traditional MIPS	30%	30%	15%	25%	Small practices
Reweight 1 Performance Category					have a
No Cost (Cost Quality and Promoting Interoperability)	55%	0%	15%	30%	different distributio n policy
No Improvement Activities (Improvement Activities Quality)	45%	30%	0%	25%	than individual clinicians,
No Promoting Interoperability (Promoting Interoperability [] Quality)	55%	30%	15%	0%	larger groups,
No Quality (Quality Promoting Interoperability)	0%	30%	15%	55%	and virtual gro

Appendix B.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Individual Clinicians, Groups and Virtual Groups (Continued)

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
Reweight 2 Performance Categories				
No Cost + No Promoting Interoperability (Cost + Promoting Interoperability ☐ Quality)	85%	0%	15%	0%
No Cost + No Quality (Cost + Quality ☐ Promoting Interoperability)	0%	0%	15%	85%
No Cost + No Improvement Activities (Cost + Improvement Activities Promoting Interoperability + Quality)	70%	0%	0%	30%
No Promoting Interoperability + No Quality (Promoting Interoperability + Quality Cost + Improvement Activities)	0%	50%	50%	0%
No Promoting Interoperability + No Improvement Activities (Promoting Interoperability + Improvement Activities Quality)	70%	30%	0%	0%
No Quality + No Improvement Activities (Quality + Improvement Activities [] Promoting Interoperability)	0%	30%	0%	70%

Note: If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not submitted. See next slide for additional information.



Appendix B.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Individual Clinicians, Groups and Virtual Groups (Continued)

MIPS Performance Category Reweighting Scenario

Quality Category Weight

Cost Category Weight Improvement
Activities
Category
Weight

Promoting Interoperability Category Weight

Reweight 3 Performance Categories

If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not and receive a neutral payment adjustment.

Reweight 4 Performance Categories

If all performance categories are reweighted to 0%, you'll receive a score equal to the performance threshold regardless of any data submitted or not and receive a neutral payment adjustment.



Appendix C.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Small **Practices**

The table below illustrates the 2023 performance category weights and reweighting policies that CMS will apply to small practices.

Refer to Appendix D for reweighting policies that apply to APM Entities reporting the APP. APM Entities reporting traditional MIPS or MVPs can **only** request reweighting for all performance categories

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under traditional MIPS for small practices	30%	30%	15%	25%
Re	weight 1 Perform	mance Category		
No Cost (Cost [] Quality and Promoting Interoperability)	55%	0%	15%	30%
No Improvement Activities (Improvement Activities Quality)	45%	30%	0%	25%
No Promoting Interoperability (Promoting Interoperability and Improvement Activities)	40%	30%	30%	0%
No Quality (Quality Promoting Interoperability)	0%	30%	15%	55%



Appendices Appendix C.

MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2023 Performance Year: Small

Practices					
MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight	
Reweight 2 Performance Categories					
No Cost + No Promoting Interoperability (Cost + Promoting Interoperability Quality and Improvement Activities)	50%	0%	50%	0%	
No Cost + No Quality (Cost + Quality ☐ Promoting Interoperability)	0%	0%	15%	85%	
No Cost + No Improvement Activities (Cost + Improvement Activities [] Promoting Interoperability + Quality)	70%	0%	0%	30%	
No Promoting Interoperability + No Quality (Promoting Interoperability + Quality [Cost + Improvement Activities)	0%	50%	50%	0%	
No Promoting Interoperability + No Improvement Activities (Promoting Interoperability + Improvement Activities [] Quality)	70%	30%	0%	0%	
No Quality + No Improvement Arctivities ou have multiple performance of (Qualityes ਜਾਣਾ ਪ੍ਰਮੁਕਤੀ ਰਿਕਾਰ ਤਾਂਹਿਤ ਜਿਵਦਾ ਹਵਾ ਸ਼ਿੰਗ ਤੋਂ ਪ੍ਰਮੁਕਤੀ ਰਿਕਾਰ ਤਾਂਹਤ ਜਿਵਦਾ ਹਵਾ ਸ਼ਿੰਗ ਤੋਂ ਪ੍ਰਮੁਕਤੀ ਰਿਕਾਰ ਤੋਂ ਜ਼ਿਲ੍ਹੇ ਜਿਵਦਾ ਹਵਾ ਸ਼ਿੰਗ ਤੋਂ ਪ੍ਰਮੁਕਤੀ ਰਿਕਾਰ ਤੋਂ ਜ਼ਿਲ੍ਹੇ ਜਿਵਦਾ ਹਵਾ ਸ਼ਿੰਗ ਤੋਂ ਪ੍ਰਮੁਕਤੀ ਰਿਕਾਰ ਤੋਂ ਜ਼ਿਲ੍ਹੇ ਜਿਵਦਾ ਹਵਾ ਸ਼ਿੰਗ ਤੋਂ ਪ੍ਰਮੁਕਤੀ ਜਿਵਦਾ ਹਵਾ ਸ਼ਿੰਗ ਤੋਂ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ ਜ਼ਿਲ੍ਹੇ	ategories reweigh 'Il recei∜e a score t slide for additior	ted to 0% so that a equal tathe performation.	a single performar rmance & reshold	nce category is regardless of any	

Appendix D.

MIPS Performance Category Weight Redistribution Policies for APM Entities and the APP Finalized for the 2023 Performance Year

The table below illustrates the 2023 performance category weights and reweighting policies that apply to individual clinicians, groups and APM Entities reporting the APP.

Reminders:

- Cost is not scored under the APP.
- There are no reporting requirements for the improvement activities performance category under the APP for the 2023 performance year. Participants reporting via the APP will automatically receive full credit for the improvement activities performance category for the 2023 performance year.

Participants reporting via the APP will follow the same reporting requirements as traditional

MIPS Performance Category Reweighting Scenario under the APP	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
No Reweighting				
Standard Weighting under the APP	50%	0%	20%	30%
Reweight 1 Performance Category				
No Promoting Interoperability	75%	0%	25%	0%
(Promoting Interoperability [] Quality)				
No Quality (Quality Promoting Interoperability)	0%	0%	25%	75%

Reweight 2 + Performance Categories

If you have multiple performance categories reweighted to 0% so that a single performance category is weighted at 100% of your final score, you'll receive a score equal to the performance threshold regardless of any data submitted or not and receive a neutral payment adjustment.



Appendix E. MIPS Promoting Interoperability Hardship Exception Application Status Descriptions

The table below provides a description of each application status in the order of which they occur.

Draft in Progress	Submitted - Pending Approval	Approved / Denied	Withdrawn
You're currently working on your application and haven't submitted it yet. Select Manage to continue working on your application.	Submitted - Pending Approval You've successfully completed and submitted your application. Applications are reviewed in the order of which they're received.	We completed our review of your application and approved your request. Denied We completed our review of your application and denied your request.	You've withdrawn your application. You can withdraw your application at any point in the process. An application can't be reopened after being withdrawn. You'll need to complete a new application.

