Quality Payment
PROGRAM

Merit-based Incentive Payment System (MIPS)

2024 MIPS Promoting Interoperability Performance Category Hardship Exception Application Guide

Table of Contents

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 application.

Already know what MIPS is? Skip ahead by clicking the links in the Table of Contents.

How to Use This Guide

How to Use This Guide

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.

Table of Contents

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Hyperlinks

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

MIPS Promoting Interoperability Performance Category Hardship Exception Application Overview

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 Alternative Payment Model (APM) Performance Pathway (APP). • Third party intermediaries can submit an application with permission from the clinician or practice. • APM Entities can't submit an application at the APM Entity level. 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.

Why	You can submit an application to have your MIPS Promoting Interoperability performance category reweighted to 0% if:
	• You have insufficient Internet connectivity.
	• You have decertified electronic health record (EHR) technology (decertified under the Office of the National Coordinator for Health Information Technology's (ONC) Health IT Certification Program).
	• You lack control over the availability of certified EHR technology (CEHRT).
	   o Simply lacking CEHRT functionality that meets ONC's certification criteria in 45 CFR 170.315 **doesn't** qualify as a reason to submit an exception application.
	• You face extreme and uncontrollable circumstances such as a disaster, practice closure, severe financial distress or vendor issues.
	   o If you experience an extreme and uncontrollable circumstance that impacts multiple performance categories, the Extreme and Uncontrollable Circumstances Exception application may be more suitable for your given circumstance.

When	The Promoting Interoperability Hardship Exception application will close at **8 p.m. ET on December 31, 2024**.
Where	Sign in to the Quality Payment Program (QPP) website 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, 3MB).
How	1. Register for a HARP account. 2. Sign in to the QPP website. 3. Select 'Exceptions Application' on the left-hand navigation.	4. Select 'Add New Exception.' 5. Select 'Promoting Interoperability Hardship Exception.' 6. Complete the application for individual, group, or virtual group participation.

> **Note:** We automatically reweight Promoting Interoperability for small practices. See page 8 for more information.

See Appendix B (traditional MIPS) and Appendix C (APP) for more information on performance category reweighting.

MIPS Promoting Interoperability Performance Category Hardship Exception Information

Overview

You may automatically qualify for reweighting in this performance category.

- See Appendix A.

- If you automatically quality for reweighting, you don't need to submit a Hardship Exception application.

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

- 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 clinicians in your practice participate 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 an MVP as a subgroup, an approved group level Hardship Exception will apply to the subgroup participants.

> **Did You Know?** Subgroups can't submit a Promoting Interoperability Hardship Exception application at the subgroup level but a subgroup will inherit any reweighting approved for their affiliated group.

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

- If your circumstances change and you're able to collect and submit 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. The submission of data cancels a hardship exception and automatic reweighting

> **Reminder:** 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 2024 MIPS Data Validation Criteria (ZIP, 2MB) 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 under ONC's Health IT Certification Program during the 2024 performance year.

- You can 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.

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 exception 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 exception and must report for those clinicians for whom they have data.

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MIPS APM Participants

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

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

- If approved, the MIPS eligible 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 APM Entity.

- MIPS eligible clinicians in the APM Entity would need to submit the MIPS Promoting Interoperability Performance Category Hardship Exception application at the individual or group level, as appropriate to their circumstances.

A MIPS Promoting Interoperability performance category hardship exception doesn't exempt you from reporting on any CEHRT activities as may be required by your APM.

> **Reminder:** The Promoting Interoperability Performance Category Hardship Exception application isn't available to APM Entities.

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MIPS Promoting
Interoperability
Performance Category
Hardship Exception:
Frequently Asked
Questions

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

MIPS Promoting
Interoperability
Performance Category
Hardship Exception:
Application Steps

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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 QPP website before, you must register for an account to obtain your HARP credentials. See our QPP Account Access Guide (ZIP, 3MB) for information on creating an account.

*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 QPP website.

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 December 31, 2024**.

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Step 3: Select the Exception Application

Select the **MIPS Promoting Interoperability Performance Category Hardship Exception**, then click **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 an extreme and uncontrollable circumstance or public health emergency, such as the Change Healthcare Cyberattack, 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.

CANCEL   CONTINUE >

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Step 4: Select Application Type

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

(Image features application at the individual level)

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Step 5: Enter Participation Level Information

Enter the required participation level information.

The required information for each participation level is as follows:

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

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(Image features application at the individual level)

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Step 6: Enter Submitter Details

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

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Submitter Details

Contact Phone Number *

Phone Number
517-734-2222

Ext. (Optional)

Contact Email Address *

Email
mary.thompson@dittrich.com

Submitter/Third Party Intermediary Relationship *

Please specify

Please specify

Clinician

Consultant

Physician Staff

Registry / QCDR

EHR Vendor

Other

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 in to their own account on the QPP website and access the application.

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Step 8: Select the Reason for the MIPS Promoting Interoperability Hardship

Select the option that aligns with your reason for submitting a 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 2024 MIPS Data Validation Criteria (ZIP, 2MB) for details on the data validation process.

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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.

Event Description (Optional) ⓘ

Description of event that caused this hardship

6000 characters remaining

WITHDRAW   **SUBMIT FOR REVIEW >**

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Step 9: Complete Attestation and Provide Event Description (Continued)

<u>Reason Option 1:</u> Insufficient Internet Connectivity

Review the attestation statement and select "I attest."

You can provide an optional description of the hardship event.

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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.

Event Description (Optional) ⓘ

Description of event that caused this hardship

6000 characters remaining

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Step 9: Complete Attestation and Provide Event Description (Continued)

<u>Reason Option 2:</u> 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.

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In order to be approved for this hardship exception, the clinician(s) must attest to facing Extreme and Uncontrollable Circumstances as specified below that prevented the clinician(s) from meeting the requirements of the promoting interoperability (PI) performance category.

Extreme and Uncontrollable Circumstances Event Type * ?

- ⦿ Disaster
- ◯ Practice or Hospital Closure
- ◯ Severe Financial Distress (bankruptcy or debt restructuring)
- ◯ Vendor Issue

Event Date Range * ?

Start Date *		To	Present	
1/1/2023	🗓			🗓

☑ Still persists

☐ **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) faced extreme and uncontrollable circumstances in the form a natural disaster in which the EHR system was damaged or destroyed.

Event Description (Optional) ?

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Step 9: Complete Attestation and Provide Event Description (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.

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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.

☑ **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) 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

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Step 9: Complete Attestation and Provide Event Description (Continued)

<u>Reason Option 4:</u> EHR Decertification

Enter the date that your EHR was decertified (under ONC's Health IT Certification Program) 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.

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EHR Decertification

In order to be approved for this hardship exception, the clinician(s) must attest to experiencing issues with the certification of the EHR product such as decertification.

Event Start Date * ⍰

| Start Date * | |
| 1/1/2023 | 📅 |

ONC-ACB Certification ID * ⍰
https://chpl.healthit.gov/#/search ⧉

| 0015EL2HVV3VQC4 |

☑ **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) faced with EHR decertification issues.

Event Description (Optional) ⍰

| Enter a brief description of the event that caused this hardship |

6000 characters remaining

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Step 10: Submit MIPS Promoting Interoperability Hardship Exception Application

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

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MIPS Promoting Interoperability Hardship Exception Application Submission Confirmation

After you submit your MIPS Promoting Interoperability Hardship Exception application, you'll receive a message stating that your Hardship Exception 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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The PI Hardship application for **Mary Thompson** NPI: 0123456789 / TIN: *****5678 has been approved.

EXPORT APPLICATION (PDF)

Please note:
If the clinician associated with this application reports any data as an individual for the Promoting Interoperability (PI) performance category, the clinician will be scored for the Promoting Interoperability category and **this application will be dismissed**.

DONE

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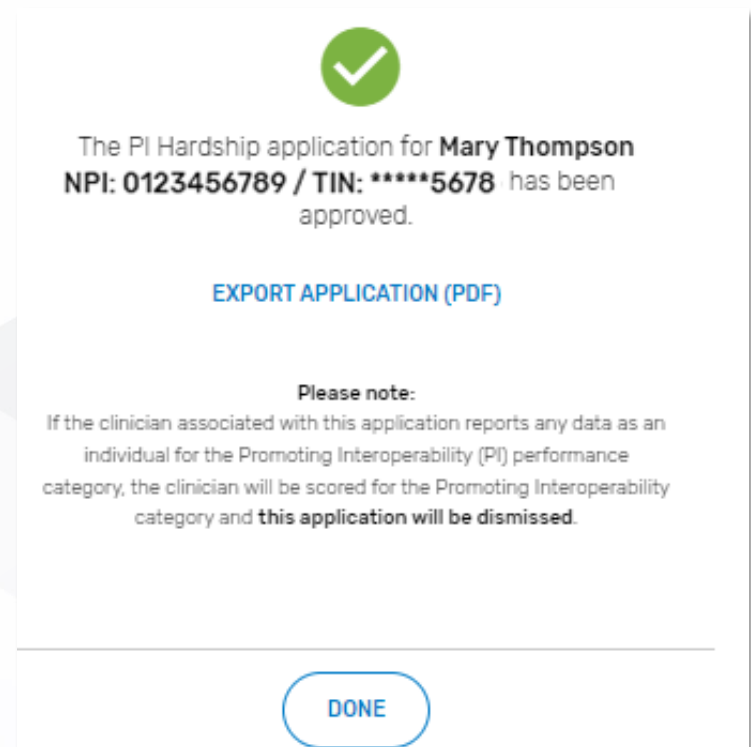
Help and Version
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Where Can You Go for Help?

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

Version History

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

DATE	DESCRIPTION
06/25/2024	Updated to include PRA disclosure language.
05/13/2024	Original Posting.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1314 (Expiration date: 01/31/2025). The time required to complete this information collection is estimated to average .25 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. ****CMS Disclosure**** Please do not send applications, claims, payments, medical records or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact QPP at qpp@cms.hhs.gov.

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Appendices

Appendix A. Automatic Reweighting in the MIPS Promoting Interoperability Performance Category

Reason for Reweighting (Individual Clinicians)	Action Needed by the Individual
You're the following clinician type or have one of these Special Statuses: • Clinical Social Worker • 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.
Reason for Reweighting (Groups and Virtual Groups)	**Action Needed by the Group or Virtual Group**
You have one of these Special Statuses: • ASC-based. • Small Practice • Hospital-based: Group or virtual group must have more than 75% of clinicians designated as hospital-based. • Non-patient facing: Group or virtual group must have more than 75% of clinicians designated as non-patient facing.	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.
All of the MIPS eligible clinicians in your group or virtual group qualify for reweighting as individuals (through any combination of special statuses, clinician type, and approved hardship exceptions).	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.

Appendix B. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2024 Performance Year: Individual Clinicians, Groups, and Virtual Groups

The table below illustrates the 2024 performance category weights and reweighting policies that CMS will apply to clinicians, groups, and virtual groups reporting via traditional MIPS or MVPs.

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

Important Reminders:
- 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 2026 payment year.

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	30%	30%	15%	25%
Reweight 1 Performance 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 → Quality)	55%	30%	15%	0%
No Quality (Quality → Promoting Interoperability)	0%	30%	15%	55%

Note: Small practices have a different performance category weight distribution policy than individual clinicians, larger groups, and virtual groups.

*Table continues on next slide.

[Appendix B.](#) MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2024 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. See next slide for additional information.

Appendix B. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS and MVPs Finalized for the 2024 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 and you'll 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 and you'll receive a neutral payment adjustment.				

Appendix C. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2024 Performance Year: Small Practices

The table below illustrates the 2024 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	30%	30%	15%	25%
Reweight 1 Performance 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 → Quality and Improvement Activities)	40%	30%	30%	0%
No Quality (Quality → Promoting Interoperability)	0%	30%	15%	55%

*Table continues on next slide.

Appendix C. MIPS Performance Category Weight Redistribution Policies Under Traditional MIPS Finalized for the 2024 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 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 and you'll receive a neutral payment adjustment.

Appendix D. MIPS Performance Category Weight Redistribution Policies for APM Entities and the APP Finalized for the 2024 Performance Year

The table below illustrates the 2024 performance category weights and reweighting policies that apply to individual clinicians, groups, and APM Entities reporting via the APP.

Reminders:

- The cost performance category weight is zero percent for clinicians scored through the APP.

- There are no reporting requirements for the improvement activities performance category under the APP for the 2024 performance year. Participants reporting via the APP will automatically receive full credit for the improvement activities performance category for the 2024 performance year.

- MIPS participants reporting via the APP will follow the same reporting requirements as traditional MIPS for the Promoting Interoperability performance category.

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 (Promoting Interoperability → Quality)	75%	0%	25%	0%
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 and you'll 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
Draft in Progress	Submitted – Pending Approval	Approved	Withdrawn
You're currently working on your application and haven't submitted it yet. Select Manage to continue working on your application.	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.