

# Merit-based Incentive Payment System (MIPS)

2023 MIPS Promoting  
Interoperability Performance  
Category Hardship Exception  
Application Guide



Quality Payment  
PROGRAM

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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 application.



# 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.

## 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**

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# 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	<p>Individual clinicians, groups, and virtual groups reporting via traditional MIPS, MIPS Value Pathways (MVPs) or the APM Performance Pathway (APP).</p> <ul style="list-style-type: none"> <li>Third party intermediaries can submit an application with permission from the clinician or practice.</li> </ul> <p>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.</p> <ul style="list-style-type: none"> <li>See Appendix A for information about the clinicians, groups, and virtual groups that automatically qualify for reweighting of this performance category.</li> </ul>
Why	<p>You can submit an application to have your MIPS Promoting Interoperability performance category reweighted to 0% if:</p> <ul style="list-style-type: none"> <li>You have insufficient Internet connectivity</li> <li>You have decertified electronic health record (EHR) technology</li> <li>You lack control over the availability of certified EHR technology (CEHRT) <ul style="list-style-type: none"> <li>Lacking 2015 Edition CEHRT <b>doesn't</b> qualify as a reason to submit an application.</li> </ul> </li> <li>You face extreme and uncontrollable circumstances such as a disaster, practice closure, severe financial distress or vendor issues <ul style="list-style-type: none"> <li>If you experience an extreme and uncontrollable circumstance that impacts multiple performance categories, the <a href="#">Extreme and Uncontrollable Circumstances</a> Exception application may be more suitable for your given circumstance.</li> </ul> </li> </ul>
When	The Promoting Interoperability Hardship Exception application will close at 8 p.m. ET on January 2, 2024.
Where	<p>Sign in to <a href="http://app.cms.gov">app.cms.gov</a> with your HCQIS Access and Roles Profile (HARP) account.</p> <ul style="list-style-type: none"> <li>For more information on HARP accounts, please refer to the <b>Register for a HARP Account</b> document in the <a href="#">QPP Access User Guide (ZIP)</a>.</li> </ul>
How	<ol style="list-style-type: none"> <li><a href="#">Register for a HARP account</a></li> <li>Sign in to the <a href="#">QPP website</a></li> <li>Select 'Exceptions Application' on the left-hand navigation</li> <li>Select 'Add New Exception'</li> <li>Select 'Promoting Interoperability Hardship Exception'</li> <li>Complete the application for individual, group or virtual group participation</li> </ol>

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



# **MIPS Promoting Interoperability Performance Category Hardship Exception Information**

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# MIPS Promoting Interoperability Performance Category Hardship Exception Information

## Overview

**Reminder:** Small practices qualify for automatic reweighting.

**You may automatically qualify for reweighting in this performance category.**

- See Appendix A.
- If you automatically qualify 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.
  - 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.
  - 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.





# MIPS Promoting Interoperability Performance Category Hardship Exception Information

## 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.



# 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 Questions**



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

Question	Answer
<b>Where Can I Look for a Status Update on Our MIPS Promoting Interoperability Performance Category Hardship Exception Application?</b>	You can monitor your application status in your QPP Account on the <a href="#">QPP website</a> .
<b>Can Additional Staff Members Access/Receive Notifications About the Status of the MIPS Promoting Interoperability Performance Category Hardship Exception Application?</b>	<p>Yes, you can add additional staff or representatives who should receive notifications about the status of the application.</p> <p>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.</p> <p><b>Please note:</b> the additional staff or representatives must have HARP credentials in order to see the application on the <a href="#">QPP website</a>.</p>
<b>How Can I Correct a Mistake Made on Our MIPS Promoting Interoperability Performance Category Hardship Exception Application?</b>	If you identified an error with your exception application, please contact the Quality Payment Program Service Center by email at <a href="mailto:QPP@cms.hhs.gov">QPP@cms.hhs.gov</a> , create a <a href="#">QPP Service Center ticket</a> , 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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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## 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 \(ZIP\)](#) for information on creating an account.

### QPP Account

[Sign in](#) [Register](#)

### Sign in to QPP

USER ID

User ID

PASSWORD

Password

☐ Show password

Forgot your user id or password? [Recover ID or reset password](#)

If you are a representative of a Shared Savings Program ACO and can access the ACO Management System (ACO-MS), then you can sign in to QPP using the same User ID and Password.

#### STATEMENT OF TRUTH

In order to sign in, you must agree to this: I certify to the best of my knowledge that all of the information that will be submitted will be true, accurate, and complete. If I become aware that any submitted information is not true, accurate, and complete, I will correct such information promptly. I understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.

☐ Yes, I agree

[Sign in](#) >

Don't have an account?

[Register](#)

This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes (1) this computer network, (2) all computers connected to this network, and (3) all devices and storage media attached to this network or to a computer on this network.

This system is provided for Government-authorized use only.

\*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](#).



# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

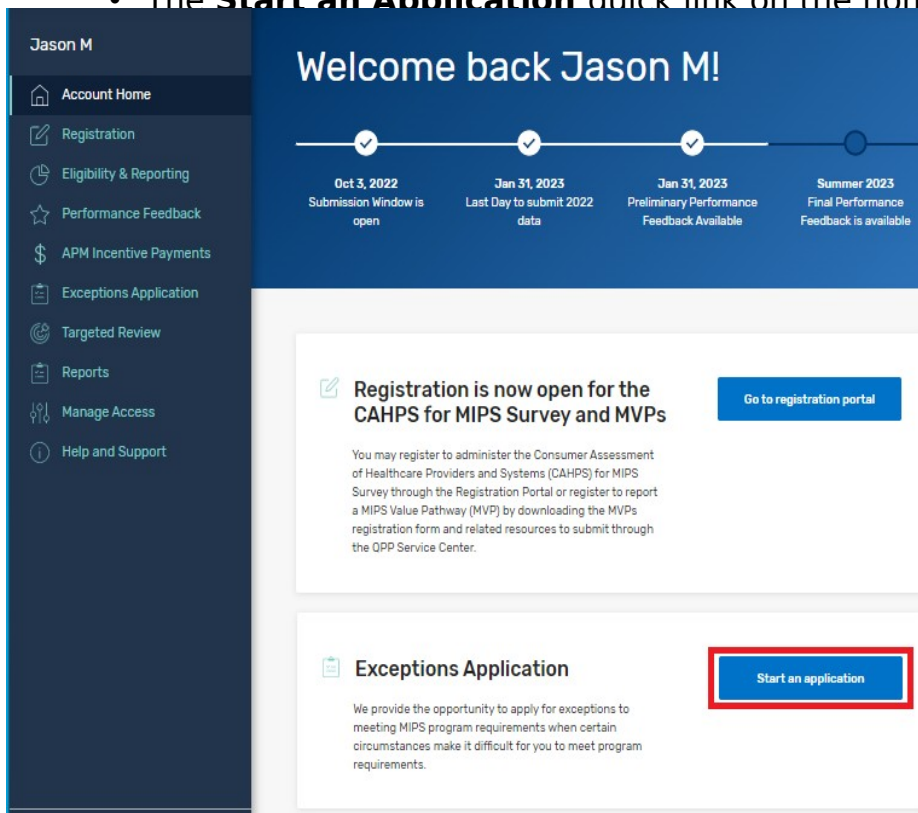
## Step 2: Navigate to Your Exception Applications

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.

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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## Add New Exception

### Step 3: Select the Exception Application

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

#### Exception Type \*



MIPS Promoting Interoperability Performance Category Hardship Exception

The MIPS Promoting Interoperability Performance Category Hardship Exception application 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 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.

CANCEL

CONTINUE >

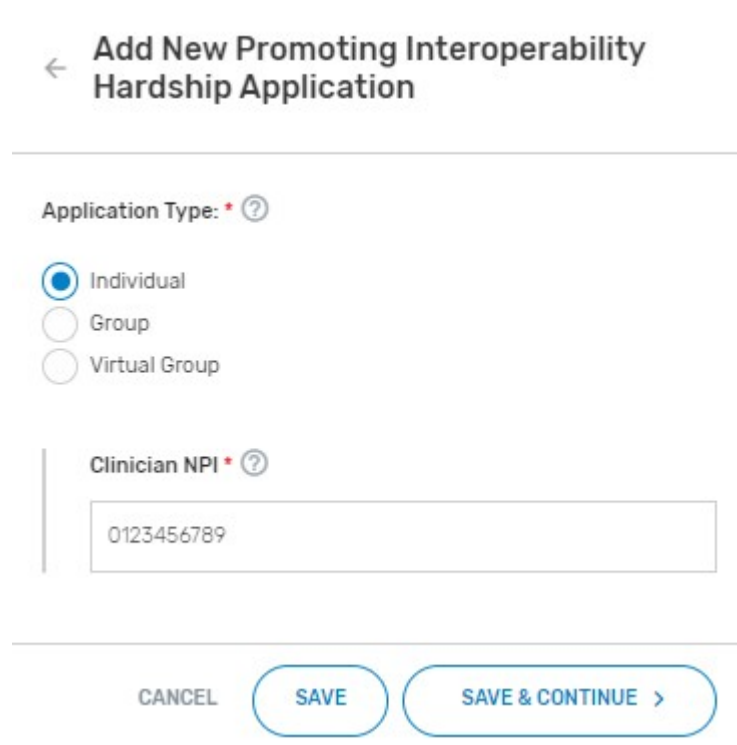
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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## Step 4: Select Application Type

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



The screenshot shows a web form titled "Add New Promoting Interoperability Hardship Application". Below the title, there is a section for "Application Type" with a red asterisk and a help icon. Three radio buttons are present: "Individual" (selected), "Group", and "Virtual Group". Below this is a "Clinician NPI" field with a red asterisk and a help icon, containing the text "0123456789". At the bottom of the form are three buttons: "CANCEL", "SAVE", and "SAVE & CONTINUE >".

(Image features application at the individual level)

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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## 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	<ul style="list-style-type: none"><li>National Provider Identifier (NPI)</li><li>Practice Affiliation</li></ul>
Group	<ul style="list-style-type: none"><li>Taxpayer Identification Number (TIN)</li></ul>
Virtual Group	<ul style="list-style-type: none"><li>Virtual Group Identifier</li></ul>

PY 2023 QPP EXCEPTION ID: 8522

Mary Thompson (PI: Individual) [Edit](#) [Download](#)

✓ All changes saved [SAVE & CLOSE](#)

### Submission Information \* Required

#### Individual Details

Clinician NPI	Clinician's Name	Clinician Type
1234567890 <a href="#">Change</a>	Mary Thompson	Doctor of Medicine

Group Practice Name \* ?

Select ^

Select

Dittrich, Kraljick and Urbanová (TIN: \*\*\*\*\*0093)

Gürmen - Ayaydin (TIN: \*\*\*\*\*3004)

Not listed

(Image features application at the individual level)

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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## Step 6: Enter Submitter Details

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

The screenshot shows a web application interface for entering submitter details. At the top, it displays 'PY 2023 QPP EXCEPTION ID: 8522' and 'Mary Thompson (PI: Individual)' with edit and download icons. A 'SAVE & CLOSE' button is in the top right. Below this is a 'Submission Information' section with a '\* Required' note. The 'Individual Details' section contains three columns: 'Clinician NPI' (1952415861 with a 'Change' link), 'Clinician's Name' (Mary Thompson), and 'Clinician Type' (Doctor of Medicine). Below these is a 'Group Practice Name' field with a dropdown menu showing 'Dittrich, Kraljick and Urbanová (TIN: \*\*\*\*\*0093)'. A red asterisk indicates this field is required. A dropdown menu is open below the group practice name, showing options: 'Please specify', 'Clinician', 'Consultant', 'Physician Staff', 'Registry / QCDR', 'EHR Vendor', 'Other', and 'Please specify' at the bottom. The 'Please specify' option at the bottom is highlighted with a red border.

PY 2023 QPP EXCEPTION ID: 8522

Mary Thompson (PI: Individual)

✓ All changes saved **SAVE & CLOSE**

### Submission Information \* Required

#### Individual Details

Clinician NPI	Clinician's Name	Clinician Type
1952415861 <a href="#">Change</a>	Mary Thompson	Doctor of Medicine

Group Practice Name \* ?

Dittrich, Kraljick and Urbanová (TIN: \*\*\*\*\*0093)

Please specify

Clinician

Consultant

Physician Staff

Registry / QCDR

EHR Vendor

Other

Please specify

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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## 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.

PY 2023 QPP EXCEPTION ID: 8522

Mary Thompson (PI: Individual)

✓ All changes saved **SAVE & CLOSE**

Additional Staff Access Email(s) ?

janedoe2@gmail.com Enter email address(es)

Hit enter/comma after each entry to add multiple

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# MIPS Promoting Interoperability Performance 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.

PY 2023 QPP EXCEPTION ID: 8522

Mary Thompson (PI: Individual)  

✓ All changes saved SAVE & CLOSE

### Promoting Interoperability Hardship Details

Reason for Promoting Interoperability Hardship \* 

- ☐ **Insufficient Internet Connectivity**  
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).
- ☐ **Extreme and Uncontrollable Circumstances**  
In order to be approved for this hardship exception, the clinician(s) must attest to facing Extreme and Uncontrollable Circumstances that prevented the clinician(s) from meeting the requirements of the promoting interoperability (PI) performance category.
- ☐ **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.
- ☐ **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.

**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,

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# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## 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 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 event.

#### 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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# MIPS Promoting Interoperability Performance 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.

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 * 1/1/2023	To	Present
--------------------------	----	---------

☒ 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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# MIPS Promoting Interoperability Performance

## Category Hardship Exception: Application Steps

### 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.

#### 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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# MIPS Promoting Interoperability Performance

## 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.

#### 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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# MIPS Promoting Interoperability Performance 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**.

### Certify and Submit for Review

▼ Submission Summary

EXPORT (PDF)

#### General Notice

No Quality Payment Program Promoting Interoperability performance category hardship exception may be granted unless this application is completed. If the clinician or group associated with this application reports any data as an individual or a group to the Promoting Interoperability category this application will be dismissed. If this individual or group is a participant in a MIPS Alternative Payment Model (APM) they do not need to report data for the Promoting Interoperability performance category. However, the individual or group will receive the APM entity score for Promoting Interoperability as determined by the APM scoring standard if the performance category is not reweighted for the entire APM entity.

#### Disclosures

Submission of this Promoting Interoperability performance category hardship exception application is voluntary. Failure to provide necessary information to identify the clinician or group will result in processing delays or denial of the Quality Payment Program Promoting Interoperability performance category hardship exception application.

#### Notice

Any person who knowingly files a statement of claim containing any false, incomplete, or misleading information may be guilty of a criminal act punishable under Federal and state law and

By submitting this Promoting Interoperability Hardship Exception Application, I am certifying that the details entered are correct to the best of my knowledge. Furthermore, I am submitting this request as

CLOSE

CERTIFY & SUBMIT >

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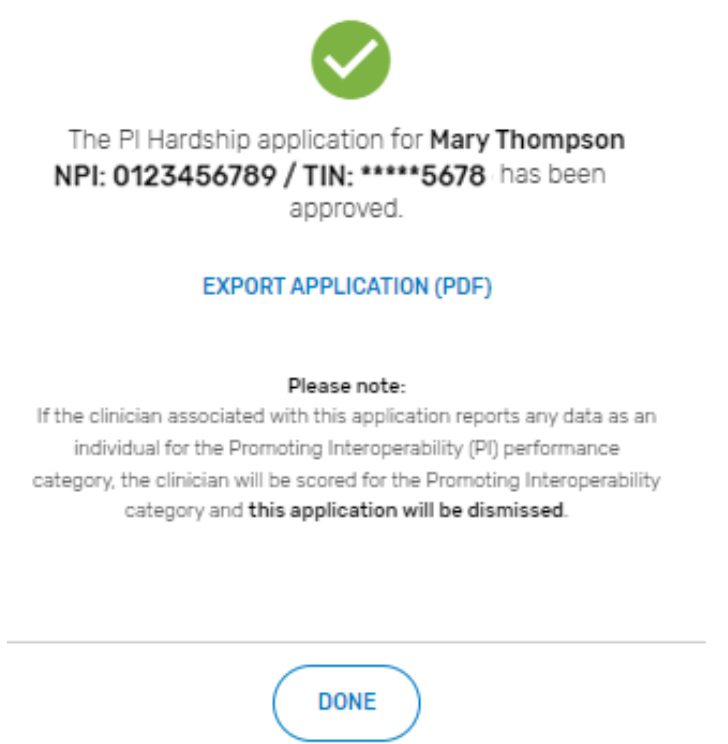


# MIPS Promoting Interoperability Performance Category Hardship Exception: Application Steps

## 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.



The screenshot shows a confirmation screen with a green checkmark icon at the top. Below the icon, the text reads: "The PI Hardship application for **Mary Thompson** NPI: 0123456789 / TIN: \*\*\*\*\*5678 has been approved." Below this text is a blue link that says "EXPORT APPLICATION (PDF)". Further down, there is a section titled "Please note:" followed by a paragraph: "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.**" At the bottom of the screen is a blue button with the word "DONE" in white capital letters.

See Appendix D for information on the various application statuses.

\*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](#).



# Help and Version History

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## Where Can You Go for Help?

Contact the Quality Payment Program Service Center by email at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov), create 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
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



# Appendices

## Appendix A.

### Automatic Reweighting in the MIPS Promoting Interoperability

#### Performance Category

Reason for Reweighting (Individual Clinicians)	Action Needed by the Individual
<b>You have one of these Special Statuses:</b> <ul style="list-style-type: none"> <li>• Small Practice;</li> <li>• Ambulatory Surgical Center (ASC)-based;</li> <li>• Hospital-based; or</li> <li>• Non-patient facing</li> </ul>	<p><b>None</b> – You’re automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so.</p> <p>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.</p>
<b>You are one of these clinician types:</b> <ul style="list-style-type: none"> <li>• Physical therapist</li> <li>• Occupational therapist</li> <li>• Qualified speech-language pathologist</li> <li>• Qualified audiologist</li> <li>• Clinical psychologist</li> <li>• Registered dietitian or nutrition professional</li> <li>• Clinical social worker</li> </ul>	<p><b>None</b> – You’re automatically excepted from having to submit data for this performance category as an individual, though you may still choose to do so.</p> <p>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.</p>
Reason for Reweighting (Groups and Virtual Groups)	Action Needed by the Group or Virtual Group
<b>You have one of these Special Statuses:</b> <ul style="list-style-type: none"> <li>• Ambulatory Surgical Center (ASC)-based.</li> <li>• Small Practice</li> <li>• Hospital-based: Group or virtual group must have more than 75% of clinicians designated as hospital-based.</li> <li>• Non-patient facing: Group or virtual group must have more than 75% of clinicians designated as non-patient facing.</li> </ul>	<p>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.</p>
<b>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).</b>	<p>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.</p>

# 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 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 2025 payment year.

#### Note:

Small practices have a different distribution policy than individual clinicians, larger groups, and virtual groups.

groups

MIPS Performance Category Reweighting Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
<b>No Reweighting</b>				
<b>Standard Weighting under traditional MIPS</b>	30%	30%	15%	25%
<b>Reweight 1 Performance Category</b>				
<b>No Cost</b> (Cost □ Quality and Promoting Interoperability)	55%	0%	15%	30%
<b>No Improvement Activities</b> (Improvement Activities □ Quality)	45%	30%	0%	25%
<b>No Promoting Interoperability</b> (Promoting Interoperability □ Quality)	55%	30%	15%	0%
<b>No Quality</b> (Quality □ Promoting Interoperability)	0%	30%	15%	55%

\*Table continues on next slide.



# Appendices

## 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
<b>Reweight 2 Performance Categories</b>				
<b>No Cost + No Promoting Interoperability</b> (Cost + Promoting Interoperability $\square$ Quality)	85%	0%	15%	0%
<b>No Cost + No Quality</b> (Cost + Quality $\square$ Promoting Interoperability)	0%	0%	15%	85%
<b>No Cost + No Improvement Activities</b> (Cost + Improvement Activities $\square$ Promoting Interoperability + Quality)	70%	0%	0%	30%
<b>No Promoting Interoperability + No Quality</b> (Promoting Interoperability + Quality $\square$ Cost + Improvement Activities)	0%	50%	50%	0%
<b>No Promoting Interoperability + No Improvement Activities</b> (Promoting Interoperability + Improvement Activities $\square$ Quality)	70%	30%	0%	0%
<b>No Quality + No Improvement Activities</b> (Quality + Improvement Activities $\square$ 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.

\*Table continues on next slide.



# Appendices

## 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 Reweight Scenario	Quality Category Weight	Cost Category Weight	Improvement Activities Category Weight	Promoting Interoperability Category Weight
<b>Reweight 3 Performance Categories</b>				
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.				
<b>Reweight 4 Performance Categories</b>				
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.				

# Appendices

## 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
<b>No Reweighting</b>				
<b>Standard Weighting under traditional MIPS for small practices</b>	30%	30%	15%	25%
<b>Reweight 1 Performance Category</b>				
<b>No Cost</b> (Cost □ Quality and Promoting Interoperability)	55%	0%	15%	30%
<b>No Improvement Activities</b> (Improvement Activities □ Quality)	45%	30%	0%	25%
<b>No Promoting Interoperability</b> (Promoting Interoperability □ Quality and Improvement Activities)	40%	30%	30%	0%
<b>No Quality</b> (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
<b>Reweight 2 Performance Categories</b>				
<b>No Cost + No Promoting Interoperability</b> (Cost + Promoting Interoperability □ Quality and Improvement Activities)	50%	0%	50%	0%
<b>No Cost + No Quality</b> (Cost + Quality □ Promoting Interoperability)	0%	0%	15%	85%
<b>No Cost + No Improvement Activities</b> (Cost + Improvement Activities □ Promoting Interoperability + Quality)	70%	0%	0%	30%
<b>No Promoting Interoperability + No Quality</b> (Promoting Interoperability + Quality □ Cost + Improvement Activities)	0%	50%	50%	0%
<b>No Promoting Interoperability + No Improvement Activities</b> (Promoting Interoperability + Improvement Activities □ Quality)	70%	30%	0%	0%
<b>No Quality + No Improvement Activities</b> (Quality + Improvement Activities □ Promoting Interoperability)	0%	30%	0%	70%
<b>Note:</b> 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.				



# Appendices

## 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 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
<b>No Reweighting</b>				
Standard Weighting under the APP	50%	0%	20%	30%
<b>Reweight 1 Performance Category</b>				
No Promoting Interoperability	75%	0%	25%	0%
(Promoting Interoperability □ Quality)				
No Quality	0%	0%	25%	75%
(Quality □ Promoting Interoperability)				

#### 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.










# Appendices

## 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  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.	<div>  Approved  We completed our review of your application and approved your request. </div> <div>  Denied  We completed our review of your application and denied your request. </div>	 Withdrawn  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.