

2022 MIPS Reporting Highlights through RISE



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The ACR's RISE Qualified Clinical Data Registry (QCDR) is celebrating a successful 2022 MIPS submission period! As a reminder, the performance threshold for 2022 MIPS reporting was at an all-time high of 75 MIPS points. This means that practices must receive at least 75 total MIPS points to avoid a negative payment adjustment in the 2024 payment year.

In addition, new for 2022, clinicians were automatically re-weighted for the Promoting Interoperability (PI) category if they were a part of a small practice with 15 or fewer clinicians billing under the practice's TIN. For these clinicians who chose to have PI automatically re-weighted, their Quality category weight increased to 40% and their Improvement Activities (IA) category weight increased to 30%; they did not receive a score for PI.

Here are highlights and reporting outcomes from the 2022 MIPS submissions through RISE that may serve as a valuable resource as you plan to report via [Traditional MIPS](#) or the [Advancing Rheumatology Patient Care MIPS Value Pathway \(MVP\)](#) through RISE for the 2023 performance year.

2022 MIPS Performance Threshold

Performance (neutral payment) threshold = 75.00 points

Additional performance threshold = 89.00 points

Note: Final year for an additional performance threshold/additional MIPS adjustment for exceptional performance

Reporting Statistics

■ Number of Practices

–95 practices reported for MIPS via the RISE registry (41% of RISE practices)

■ Number of Clinicians

–502 clinicians reported for MIPS via the RISE registry (7.49% increase from last year's 2021 MIPS submissions)

■ Submission Type

–56 group submissions
–60 individual submissions

Quality Performance Category Details

■ **Average preliminary Quality score: 27.02 points/30 points**

Note: Total possible score increases with approved category reweighting.

■ Most Popular Measures Reported:

1. QPP39: Screening for Osteoporosis for Women Aged 65-85 Years of Age
2. QPP176: Tuberculosis Screening Prior to First Course of Biologic and/or Immune Response Modifier Therapy

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3. QPP177: Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity
4. ACR15: Safe Hydroxychloroquine Dosing
5. QPP178: Rheumatoid Arthritis (RA): Functional Status Assessment
6. ACR10: Hepatitis B Safety Screening
7. QPP130: Documentation of Current Medications in the Medical Record
8. ACR14: Gout: Serum Urate Target
9. QPP128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan
10. ACR12: Disease Activity Measurement for Patients with PSA

Promoting Interoperability (PI) Performance Category Details

■ Average preliminary PI score: 26.81 points/25 points

Note: Total possible score increases with approved category reweighting.

Improvement Activities (IA) Performance Category Details

■ Average preliminary IA score: 26.04 points/15 points

Note: Total possible score increases with approved category reweighting.

■ Most Popular Activities Reported:

1. IA_AHE_6 –Provide Education Opportunities for New Clinicians
2. IA_BE_1 –Use of certified EHR to capture patient reported outcomes
3. IA_BE_4 –Engagement of patients through implementation of improvements in patient portal
4. IA_BMH_2 –Tobacco use
5. IA_CC_1 –Implementation of use of specialist reports back to referring clinician or group to close referral loop
6. IA_EPA_1 –Provide 24/7 Access to MIPS Eligible Clinicians or Groups Who Have Real-Time Access to Patient's Medical Record
7. IA_EPA_2 –Use of telehealth services that expand practice access
8. IA_PSPA_29 –Consulting Appropriate Use Criteria (AUC) Using Clinical Decision Support when Ordering Advanced Diagnostic Imaging
9. IA_PSPA_31 –Patient Medication Risk Education
10. IA_PSPA_6 –Consultation of the Prescription Drug Monitoring program

Practices are strongly encouraged to review the [CMS QPP website](#), [CMS QPP Resource Library](#), and the ACR RISE monthly QPP Pointers newsletter to stay up to date on how you're impacted by the [Quality Payment Program \(QPP\)](#), [Traditional MIPS](#), and the [MIPS Value Pathway \(MVP\)](#) reporting requirements per performance year.

If you have any questions about MIPS submissions through RISE, please contact us at RISE@rheumatology.org.