

2019 MIPS Step-by-Step Guide

Clinical Practice Improvement Activities (CPIA) Category

Step 1: Review the available improvement activities [here](#).

Step 2: Choose between 1 and 4 activities to complete. A physician/practice should be sure to review all activities as there may be some that they already have implemented, are close to implantation, or are easy to implement into their practice.

- Small Practice (15 or fewer clinicians) – select 2 medium weighted activities or 1 high weighted activity
- Large Practices (greater than 15 clinicians) – select 4 medium weighted or 2 high weighted activities

Activities can be filtered by weight by selecting “Medium” or “High” under the “Activity Weighting” filter, see below.


2019 Improvement Activities

15% OF FINAL SCORE

This percentage can change due to [Exception Applications](#), or Alternative Payment Model (APM) participation.

Participants must submit a combination of high- and medium- weighted activities. Each activity must be performed for 90 continuous days or more during 2019.


[Read more about Improvement Activities requirements](#)

 - Hide filters

Subcategory Name Activity Weighting





All All

In "Your List" of Improvement Activities [Clear all filters](#)

118 Improvement Activities | [Download 118 activities](#) Your List (0) 

Step 3: Once activities have been selected, review the “[2019 MIPS Data Validation Criteria](#)”. This document will provide the criteria CMS will use to audit and validate activities. Although you are not required to submit data validation when attesting to this category, CMS may request any records or data retained for the purposes of MIPS for up to 6 years so it is recommended that documentation is kept for that length of time.

Step 4: A zip file will download, once opened click into the Excel file titled “2019 Improvement Activities Validation Criteria” or the PDF titled “2019 Improvement Activities Criteria” to review information for Improvement Activities (if reviewing within the excel be sure you are in the sheet titled “Year3 IA Criteria”, unless you would like to just see if there have been any changes from last year then review the sheet titled “Year3 IA Changes”). Find you selected activities within the document and review.

Name	Type	Compressed size	Password ...	Size	Ratio
 2019 Improvement Activities Changes	PDF File	89 KB	No	327 KB	73%
 2019 Improvement Activities Criteria	PDF File	791 KB	No	869 KB	9%
 2019 Improvement Activities Validation Criteria	Microsoft Excel Worksheet	65 KB	No	70 KB	8%
 2019 MIPS Data Validation Fact Sheet	PDF File	328 KB	No	412 KB	21%

Step 5: Implement and conduct your selected activities for a minimum of 90 consecutive days. Maintain documentation of activity as discussed in step 3. The last day of the year that will still provide a full consecutive 90-day data collection period is **October 2, 2019.**

Step 6: Attest to the completion of your selected improvement activities. Deadline for the 2019 MIPS performance period is **March 31, 2020.** Below are the submission options for the CPIA category.

- Attestation via the [QPP Portal](#) - CMS has created a QPP submission platform (the QPP Portal) that can be used to attest to your selected Improvement Activities. The QPP portal will be open for 2019 data attestation **starting January 2, 2020. Deadline to submit is March 31, 2020.**
- [EHR](#) – Speak with your EHR vendor regarding CPIA submission capabilities for 2019. **Deadline to submit is March 31, 2020.**
- [CMS Web Interface](#) – Only groups of 25 or more may choose this reporting option and must register for this option. Registration to use this reporting method for 2019 begins on **April 1, 2019** and **ends June 30, 2019.** The reporting deadline for CMS Web Interface is **March 22, 2020.**
- [Qualified Clinical Data Registry \(QCDR\)](#) – By clicking this link an excel file titled “2019 QCDR Qualified Posting” will open. This document has a full list of QCDR vendors for 2019. Review which vendors can submit CPIA under the “Performance Categories Supported” section. Also ensure your selected measures are reportable under the “Improvement Activities Supported” section. Submission through QCDRs will **begin January 1, 2020. The deadline to complete submission is March 31, 2019.** Check with your QCDR to see if they have a submission or signup deadline that precedes this date.
 - * Excel file is split up into sheets in alphabetical order. Please review all sheets to see all vendors.
 - * Not free, use of these vendors will most likely require payment to use their services.
- [Qualified Registry](#) – By clicking this link an excel file titled “2019 Qualified Registry Posting” will open. This document has a full list of Qualified Registry vendors for 2019. Review which vendors can submit CPIA under the “Performance Categories Supported” section. Also ensure your selected measures are reportable under the “Improvement Activities Supported” section. Submission through registries will **begin January 1, 2020. The deadline to complete submission is March 31, 2020,** although it is important to be aware of your registries individual submission/signup deadlines which typically precede CMS’s set deadline of March 31.
 - * Excel file is split up into sheets in alphabetical order. Please review all sheets to see all vendors.
 - * Not free, use of these vendors will most likely require payment to use their services.

Contact HCMS’s Quality Department for further assistance: quality@hcms.org or call (713) 524-4267

Additional Resources:

- [2019 Improvement Activities Fact Sheet](#)
- [2019 CMS Improvement Activities Requirements](#)
- [HCMS General MIPS Guide/Education](#)
- [QPP Resource Library](#)
- For additional free technical assistance contact the [TMF Health Quality Institute.](#)