

2018 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.


2018 Improvement Activities



15% OF FINAL SCORE


This percentage can change due to [Special Statuses](#), [Hardship Exceptions](#), or APM participation.

Participants must submit collected data for a combination of high- and medium- weighted activities for 90 days or more during 2018.

[Read more about Improvement Activities requirements](#)

 - Hide filters

Subcategory Name	Activity Weighting	ACI CEHRT Bonus
All 	All 	<input type="checkbox"/> Show activities
<input type="checkbox"/> In "Your List" of Improvement Activities		Clear all filters

113 Improvement Activities | [Download 113 activities](#) Your List (0) 

Step 3: Once activities have been selected, review the “2018 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.

Find the document within the QPP resource library [here](#), use the search function or find the “2018 MIPS Data Validation Criteria” within the list of resources (be sure to select the appropriate performance year). A zip file will download, once opened click into the Excel file titled “MIPS 2018 Validation Criteria” or the PDF titled “2018 Improvement Activity Criteria” to review information for Improvement Activities (if reviewing within the excel be sure you are in the correct sheet as it contains other category information as well).

Full Resource Library

Data Validation Criteria  - Hide filters

Performance Year QPP Reporting Track Performance Category Resource Type
2018 All All All

[Clear all filters](#)

Alphabetical Latest



1 Resource

↓ 2018 MIPS Data Validation Criteria

Updated 11/02/2018

ZIP 15MB | PY 2018 | MIPS | Overview | Technical Guides and User Guides










Lists the 2018 criteria used to audit and validate data submitted in each performance category



Downloads > 2018 MIPS Data Validation Criteria.Updated_11.2.18



Search 2018 MIPS Data Validat.

Name	Type	Compressed size	Password ...
 2018 Improvement Activities Changes	PDF File	262 KB	No
 2018 Improvement Activities Criteria	PDF File	810 KB	No
 2018 MIPS Data Validation Fact Sheet	PDF File	437 KB	No
 2018 Promoting Interoperability Changes	PDF File	188 KB	No
 2018 Promoting Interoperability Criteria	PDF File	266 KB	No
 2018 Promoting Interoperability Transition Changes	PDF File	185 KB	No
 2018 Promoting Interoperability Transition Criteria	PDF File	399 KB	No
 2018 Quality Measure Criteria	PDF File	1,389 KB	No
 MIPS 2018 Validation Criteria_10292018	Microsoft Excel Worksheet	11,555 KB	No

Step 4: Implement and conduct your activities selected 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, 2018.

Step 5: Attest to the completion of your selected improvement activities. Deadline for the 2018 MIPS performance period is March 31, 2019. Below are the submission options for the CPIA category.

- [Attestation](#) - CMS has created a QPP submission platform that can be used to attest to your selected improvement activities. This site is currently only running for 2017 submission and viewing. CMS has made no announcements regarding its use for 2018, but it will most likely be reset and **accessible for 2018 attestation starting January 1, 2019. Deadline to submit is March 31, 2019.**
- [EHR](#) – Speak with your EHR vendor regarding CPIA submission capabilities for 2018. **Deadline to submit is March 31, 2019.**

- [CMS Web Interface](#) – Only groups of 25 or more may choose this reporting option. Deadline to select this reporting method is **June 30, 2018**.
- [Qualified Clinical Data Registry \(QCDR\)](#) – By clicking this link a zip-file will download with two documents inside. The first document is a “2018 QCDR Factsheet”. Review this document for further information on QCDRs. The second document is an Excel file titled “2018 QCDR Posting”. This document has a full list of QCDR vendors for 2018. 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, 2019. 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, so use of these vendors will most likely require payment to use their services.
- [Qualified Registry](#) – By clicking this link a zip-file will download with two documents inside. The first document is a “2018 Qualified Registry Factsheet”. Review this document for further information on Qualified Registries. The second document is an Excel file titled “2018 Qualified Registry Posting”. This document has a full list of Qualified Registry vendors for 2018. 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, 2019. The deadline to complete submission is March 31, 2019, 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, so 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:

- [2018 MIPS Improvement Activities Fact Sheet](#)
- [HCMS General MIPS Guide/Education](#)
- [CMS QPP Help & Support Page](#)
- [2018 QPP Resource Library](#)
- For additional free technical assistance contact the [TMF Health Quality Institute](#).