

# MIPS Improvement Activities (2021 Performance Year)

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American Society of  
**Anesthesiologists**<sup>™</sup>

[asahq.org](https://www.asahq.org)

# Improvement Activities 2021

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## Provisions for 2021 Performance Year

- 15% of MIPS Final Score
- Improvement Activities have a continuous 90-day performance period (unless otherwise stated in the description).
- Groups can attest to an activity when at least 50% of the clinicians (regardless of MIPS eligibility status) in the group perform the same activity during ANY continuous 90-day period during the performance year.

# Top 5 Improvement Activities

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1. **PSPA\_1:** Participation in an AHRQ-listed patient safety organization
2. **PSPA\_19:** Implementation of formal quality improvement methods, practice changes or other practice improvement processes
3. **PSPA\_20:** Leadership engagement in regular guidance and demonstrated commitment for implementing practice improvement changes
4. **PSPA\_16:** Use of decision support and standardized treatment protocols
5. **BE\_13:** Regularly assess the patient experience of care through surveys, advisory councils and/or other mechanisms

# Documentation Guidance

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- Documentation guidance support for eight Improvement Activities
- Located on the [ASA MACRA Improvement Activities](#) website under “Additional Resources”

## *Additional Resources:*

- [CMS letter acknowledging anesthesiologists’ response to COVID-19 and how your practice can receive 2020 IA credit for COVID-19 work performed \(PDF\)](#)
- [MIPS Improvement Activities FAQs](#)
- [Recommended Improvement Activities for Anesthesiologists and Pain Medicine Physicians \(PDF\)](#) .
- [Downloadable documentation guidance for eight \(8\) common Improvement Activities](#) attested to by anesthesiologists and pain medicine physicians.

# Documentation Guidance (Cont.)

## Part 1: Documentation Background

<b>Name</b>	
<b>Date</b>	
<b>Group Name</b>	
<b>Group Mailing Address</b>	
<b>City, State, Zip Code</b>	
<b>Phone Number</b>	
<b>National Provider Identifier(s)</b>	
<b>Individual or Group Reporting</b>	
<b>If group, have 50% of the group's NPIs/clinicians performed the IA?</b>	
<b>Attestation Period (90-day period within the performance year)</b>	

# Documentation Guidance (Cont.)

Part 2: CMS Specifications	
<b>Activity ID and Name</b>	IA_PSPA_16; Use of decision support and standardized treatment protocols
<b>Activity Description</b>	Use decision support and standardized treatment protocols to manage workflow in the team to meet patient needs.
<b>Activity Weighting</b>	Medium
<b>CMS Validation Criteria</b>	Use of decision support and treatment protocols to manage workflow in the team to meet patient needs
<b>CMS Suggested Documentation</b>	Documentation (e.g. checklist, algorithm, screenshot) showing use of decision support and standardized treatment protocols to manage workflow in the team to meet patient needs.

# Documentation Guidance (Cont.)

## Part 3: ASA Suggested Considerations and Documentation

**Step 1. Does your group use decision support and standardized treatment protocols to manage workflow in the team to meet patient needs?**

If yes, include the following as documentation:

- Documentation showing the use of decision support and standardized treatment protocols to manage workflow in the team to meet patient needs (e.g. checklist, algorithm, screenshots).
- Group plan and policy highlighting the use of standardized treatment protocols.
- Screen shots and policy on decision support protocols.

If no, consider the use of standards and guidelines provided by the American Society of Anesthesiologists to assess your group's needs and create a standardized treatment protocol to manage workflow. This information is available on [ASA's website](#).

# Helpful Resources

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- QPP Resource Library
  - <https://qpp.cms.gov/about/resource-library>
  - [QPP Improvement Activity Information](#)
- ASA MACRA webpage
  - <https://www.asahq.org/macra>
  - [ASA Documentation Guidance](#)
- AQI Quality Reporting Materials
  - <https://www.aqihq.org/MACRAOverview.aspx>
- QPP Help Desk
  - [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov)



# Contact Quality and Regulatory Affairs

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- Questions and comments on quality measures and regulatory information (e.g. reporting requirements, CMS regulation) should be sent to Quality and Regulatory Affairs staff.

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Quality and Regulatory Affairs

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<https://www.asahq.org/macra>