

# 2017 MIPS Performance Category Fact Sheet



## COST (Replaces Value Based Modifier)

### Full Participation Requirements for MIPS-Eligible CRNAs:

No action is required; data will be collected through administrative claims, but will not be counted toward 2019 payment adjustments.

Clinicians do not select Cost measures; instead, measures are calculated by CMS based on services delivered in MIPS 2017. CMS intends to calculate two measures from the former Value-based Modifier Program for MIPS 2017 in addition to using new episode-based measures to determine the Cost Performance Category score for eligible clinicians or groups. Of special note, CRNAs should be aware that CMS will use 10 episode-based measures (see table below) which may incorporate anesthesia services within the cost analysis. Although CMS has weighted the Cost Performance Category at 0% for the 2019 MIPS payment year, CRNAs should review their Cost Performance to address potential issues in the future.

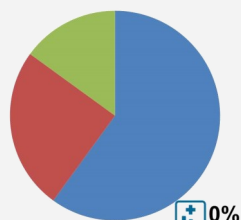
### 2017 MIPS Episode-Based Measures

ID#	Episode Name	Anesthesia CPT
A/1	Mastectomy	00400, 00402
A/5	Aortic/Mitral Valve Surgery	00532, 00540, 00541, 00550, 00560, 00562, 00563
A/8	Coronary Artery Bypass Graft (CABG)	00560, 00562, 00567
A/24	Hip/Femur Fracture or Dislocation Treatment	01200, 01210, 01214, 01215, 01220, 01230
B/1	Cholecystectomy and Common Duct Exploration	00740, 00790
B/2	Colonoscopy and Biopsy	∅
B/3	Transurethral Resection of the Prostate for Benign Prostatic Hyperplasia	∅
B/5	Lens and Cataract Procedures	∅
B/6	Hip Replacement or Repair	∅
B/7	Knee Arthroplasty (Replacement)	∅

### 2019 MIPS Scoring for CRNAs:

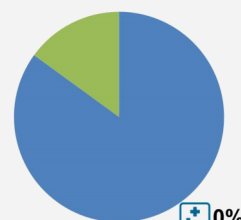
The Cost Performance Category will be weighted as 0% in 2019, but will account for 10% of the final score in 2020, and 30% of the final score in 2021 and future MIPS payment years.

### Cost Performance Category Weight



0% of final score

(for CRNAs reporting Advancing Care Information)



0% of final score

(for CRNAs NOT reporting Advancing Care Information)

