



Quality Payment PROGRAM



CMS Releases Final Rule for the 2020 Quality Payment Program

Today, the Centers for Medicare & Medicaid Services (CMS) issued its final policies for the 2020 performance year of the Quality Payment Program (QPP) via the [Medicare Physician Fee Schedule \(PFS\) Final Rule](#). The 2020 performance year will maintain many of the requirements from the 2019 performance year, while providing some needed updates to both the Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (APMs) tracks to continue reducing burden, respond to clinician and stakeholder feedback, and align with statutory requirements.

2020 QPP Final Rule Policy Highlights

Key finalized policies for 2020 include:

- Maintaining the weights of the Cost (15%) and Quality (45%) performance categories
- Increasing the performance threshold from 30 points to 45 points
- Increasing the data completeness threshold for the quality data that clinicians submit to 70%
- Increasing the Improvement Activity performance category participation threshold for group reporting from a single clinician to 50% of the clinicians in the practice
- Revising the specifications for the Total Per Capita Cost (TPCC) and Medicare Spending Per Beneficiary (MSPB) Clinician measures
- Updating requirements for Qualified Clinical Data Registry (QCDR) measures and the services that third-party intermediaries must provide (beginning with the 2021 performance period)

Additionally, CMS is finalizing its [MIPS Value Pathways \(MVPs\)](#) participation framework that begins in the 2021 performance year. MVPs will move us away from siloed activities and measures toward a set of measures options that are more relevant to a clinician's scope of practice and more meaningful to patient care. We will begin to implement the MIPS Value Pathways (MVPs) framework gradually, beginning in the 2021 performance year. Over the coming months, we will continue to collaborate with stakeholders to create and implement the MVPs framework using an incremental approach.

For More Information

To learn more about the [PFS Final Rule](#) and the 2020 Quality Payment Program finalized policies, review the following resources:

- [Press Release](#) – includes more details about today's announcement

- [Executive Summary](#) – provides a high-level summary of the 2020 QPP final rule policies
- [Fact Sheet](#) – offers an overview of the QPP policies for 2020 and compares these policies to the 2019 requirements
- [Frequently Asked Questions \(FAQs\)](#) – addresses frequently asked questions about 2020 QPP final rule policies
- [MVPs Video](#) – provides an overview of the MVPs participation framework

CMS also encourages you to [register](#) for the **2020 Quality Payment Program Final Rule Webinar** on November 19 at 2:00 PM ET.

Help and Support

Contact the Quality Payment Program at QPP@cms.hhs.gov or 1-866-288-8292 (TTY: 1-877-715-6222). To receive assistance more quickly, consider calling during non-peak hours—before 10 AM and after 2 PM ET.

