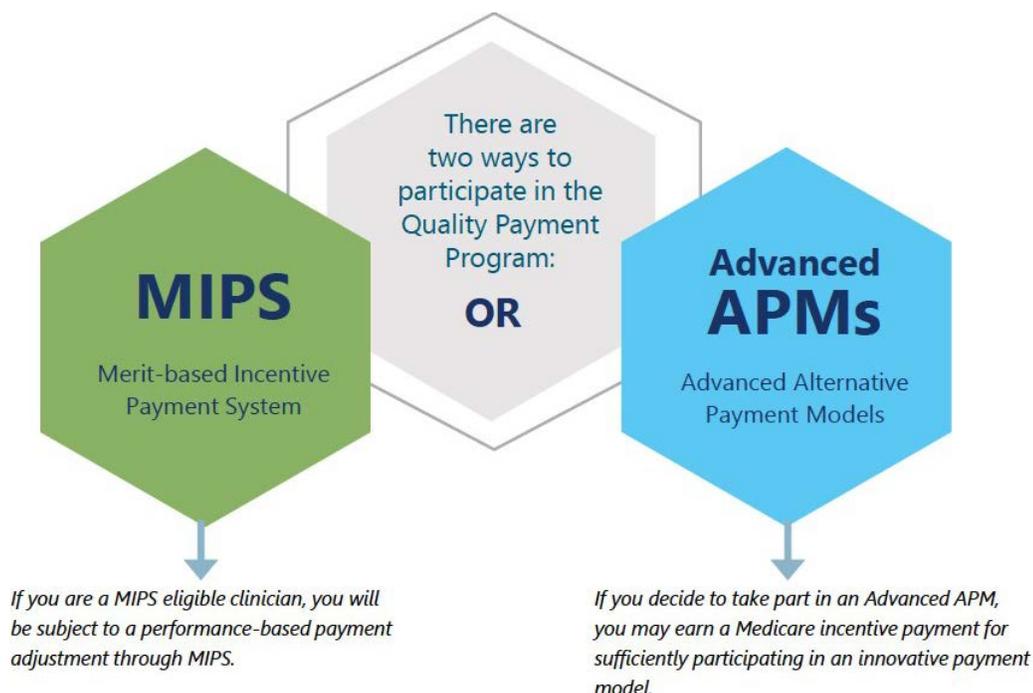
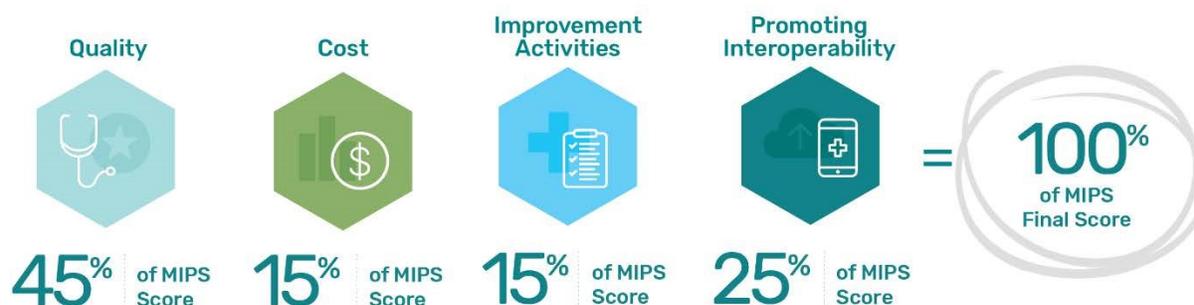


2021 Consumer Assessment of Healthcare Providers and Systems (CAHPS) for the Merit-based Incentive Payment System (MIPS) Survey via the Centers for Medicare & Medicaid Services (CMS) Approved Survey Vendor Reporting

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) ended the Sustainable Growth Rate (SGR) formula, which would have resulted in a significant cut to payment rates for clinicians participating in Medicare. MACRA requires CMS by law to implement an incentive program, referred to as the Quality Payment Program (QPP), which provides 2 participation tracks for clinicians:



Under MIPS, there are 4 performance categories that affect your future Medicare payments. Each performance category is scored by itself and has a specific weight that's part of the MIPS Final Score. The MIPS payment adjustment assessed for MIPS eligible clinicians, groups, and virtual groups is based on the Final Score. These are the performance category weights for Performance Year 2021:



Focusing on the CAHPS for MIPS Survey

Eligible clinicians may participate in MIPS as individuals or as part of a group, virtual group, or APM Entity. The CMS approved survey vendor reporting mechanism is available to all MIPS groups, virtual groups and APM Entities in MIPS Alternative Payment Models (APMs) to supplement their quality reporting with the CAHPS for MIPS Survey.

Beginning in Performance Year 2021, Shared Savings Program Accountable Care Organizations (ACOs) are required to report via the APM Performance Pathway (APP) and will administer the CAHPS for MIPS Survey. The final policies can be found in the [CY 2021 Medicare Physician Fee Schedule Final Rule \(PDF\)](#) and in the [2021 Quality Payment Program Final Rule Resources \(ZIP\)](#).

The CAHPS for MIPS Survey measures patients' experience and care within a group, virtual group, and APM Entity, including Shared Savings Program ACOs. The data collected on these surveys will be submitted on behalf of the entity by the CMS approved survey vendor.

The CAHPS for MIPS Survey is optional for groups or virtual groups with 2 or more eligible clinicians. The CAHPS for MIPS Survey isn't an option for individual clinicians.

If your group registers for the CAHPS for MIPS Survey as one of the quality measures to report, your group:

- Must select and authorize a CMS approved survey vendor (from a list published by CMS) to collect and report your survey data to CMS.
- Is responsible for your vendor's costs to collect and report the survey.
- Is responsible for monitoring your vendor's performance during survey administration.
- Will receive your CAHPS for MIPS Survey scores from CMS.
- Will have your CAHPS for MIPS Survey scores made available for public reporting on Care Compare.

Note: The CAHPS for MIPS Survey may not be appropriate for groups that don't provide primary care services (for example, a group of surgeons).

What is the CAHPS for MIPS Survey?

The CAHPS for MIPS Survey measures patients' experience and care within a group. The 2021 survey contains 10 summary survey measures to assess the following:

1. Getting Timely Care, Appointments, and Information
2. How Well Providers Communicate
3. Patient's Rating of Provider
4. Access to Specialists
5. Health Promotion and Education
6. Shared Decision Making
7. Health Status and Functional Status
8. Courteous and Helpful Office Staff
9. Care Coordination
10. Stewardship of Patient Resources

Reporting Criteria for 2021

The CAHPS for MIPS Survey is optional for all groups and virtual groups of 2 or more eligible clinicians, but MIPS provides several incentives for groups to participate.

- The CAHPS for MIPS Survey counts as one measure toward the MIPS quality performance category, as a patients' experience measure, and fulfills the requirement to report at least one high priority measure in the absence of an applicable outcome measure. Groups must report at least 5 additional quality measures using another data submission method. The CAHPS for MIPS Survey is also included in the improvement activities performance category as a high-weighted activity.
- The CAHPS for MIPS Survey is required for groups and APM Entities reporting via the APP. Shared Savings Program ACOs don't have to register to administer the CAHPS for MIPS Survey. They're automatically registered.
- In order for groups to elect participation in the 2021 CAHPS for MIPS Survey, they must register by **June 30, 2021**. Registration must be completed online through the [MIPS Registration System](#). During registration, groups must indicate if they're selecting the CMS Web Interface reporting mechanism as well as electing to administer the CAHPS for MIPS Survey. Groups that register for the CAHPS for MIPS Survey will be notified, no later than fall 2021, whether they're eligible to participate in the survey, based on their sample size. **Groups that don't meet the minimum sample sizes can't administer the CAHPS for MIPS Survey.** For additional information on registration and requirements, please refer to the [Quality Payment Program Resource Library](#).

Vendor Selection and Survey Administration

What is a CMS Approved Survey Vendor?

- CMS will approve survey vendors during an application process. Vendors whose applications are approved and who successfully complete training and submit a Quality Assurance Plan will be designated a CMS approved survey vendor. Groups will contract with a CMS approved survey vendor to administer the CAHPS for MIPS Survey, using the sample, survey, and specifications provided by CMS. The CAHPS for MIPS Survey was developed to collect information about patients' experience and care within a group. The survey measures patients' experience with, and ratings of, health care providers. For Performance Year 2021, the CAHPS for MIPS Survey will be administered to patients from October 2021 through January 2022. Data collected will be submitted on behalf of the group by each group's CMS approved survey vendor.
- CMS will approve survey vendors that demonstrate the facilities, project experience, and staff expertise required to conduct the CAHPS for MIPS Survey. Groups that wish to administer the CAHPS for MIPS Survey are required to select and contract with a CMS approved survey vendor to conduct the survey. Groups are responsible for the costs associated with the survey administration. A list of CMS approved survey vendors will be made publicly available.

Administering the CAHPS for MIPS Survey

The survey will be administered through a mixed-mode data collection protocol that includes:

- CMS pre-notification letter
- Up to 2 survey mailings
- Up to 6 follow-up attempts to complete the survey by phone with patients who don't return a survey by mail

Frequently Asked Questions

Q: When will the CAHPS for MIPS Survey be conducted?

A: The survey is implemented on an annual basis. The 2021 survey will be conducted from October 2021 through January 2022.

Q: Who pays to administer the CAHPS for MIPS Survey?

A: Groups, virtual groups, and APM Entities, including Shared Savings Program ACOs, are responsible for the costs associated with the survey administration and must contract with a CMS approved survey vendor to conduct the survey. A list of approved vendors will be posted on the [Quality Payment Program Resource Library](#).

Q: Who identifies which patients are eligible to participate in the survey?

A: CMS will identify patients eligible for the survey from the pool of Medicare fee-for-service (FFS) patients assigned to the groups, virtual groups, Shared Savings Program ACOs, and other APM Entities.

Q: How will CMS select a sample of patients seen by a group? Which patients will be sampled?

A: CMS assigns Medicare FFS patients to a group or virtual group and then randomly samples from those assigned patients to create the sample for the CAHPS for MIPS Survey. The sample will be limited to patients aged 18 or older, who are not known to be institutionalized or deceased, and who had at least 2 visits for primary care to the group. The sample is drawn at the group level, not at the individual clinician level. The survey names a specific clinician who delivered primary care to the patient over one or more visits in the performance year to help orient the patient to the care he or she received. The named provider can be a primary care physician, specialist, nurse practitioner, physician assistant, or clinical nurse specialist.

The number of patients sampled may vary based on the size of the group or virtual group.

- For large groups or virtual groups of 100 or more eligible clinicians:
 - CMS will draw a sample of 860 patients. If there are fewer than 860 patients, but at least 416 patients, all eligible patients will be surveyed. If there are fewer than 416 patients, the survey can't be conducted.
- For groups or virtual groups with 25 to 99 eligible clinicians:
 - CMS will draw a sample of 860 patients. If there are fewer than 860 patients, but at least 255 patients, all eligible patients will be surveyed. If the group has fewer than 255 patients, the survey can't be conducted.
- For groups or virtual groups with 2 to 24 eligible clinicians:
 - CMS will draw from a sample of 860 patients. If there are fewer than 860 patients, but at least 125 patients, all eligible patients will be surveyed. If the group has fewer than 125 patients, the survey can't be conducted.

Groups that don't meet the minimum sample sizes noted above can't administer the CAHPS for MIPS Survey.

Q: Can our group supplement the sample CMS selects to generate clinician-level results?

A: No. The current sample design doesn't allow for groups to request an additional sample or supplement the sample.

Q: If my group is part of an Alternative Payment Model (APM) or MIPS APM do we have to administer the CAHPS for MIPS Survey?

A: The CAHPS for MIPS Survey is required for groups and APM Entities, including Shared Savings Program ACOs reporting via the APP. If your group is part of a Shared Savings Program ACO, the ACO will administer the survey on your behalf. Other APM Entities, such as Next Generation ACOs, are required to administer CAHPS for ACOs survey on your behalf.