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Maximize Your 2025 MIPS Score

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Maximize Your 2025 MIPS Score

- With reporting deadlines approaching, now is the time to finetune your MIPS strategy.

- This webinar will go over how to review your MIPS score in 2025, while preparing for 2026 on:
  - Key performance categories
  - Scoring updates
  - Practical ways to boost it

Agenda

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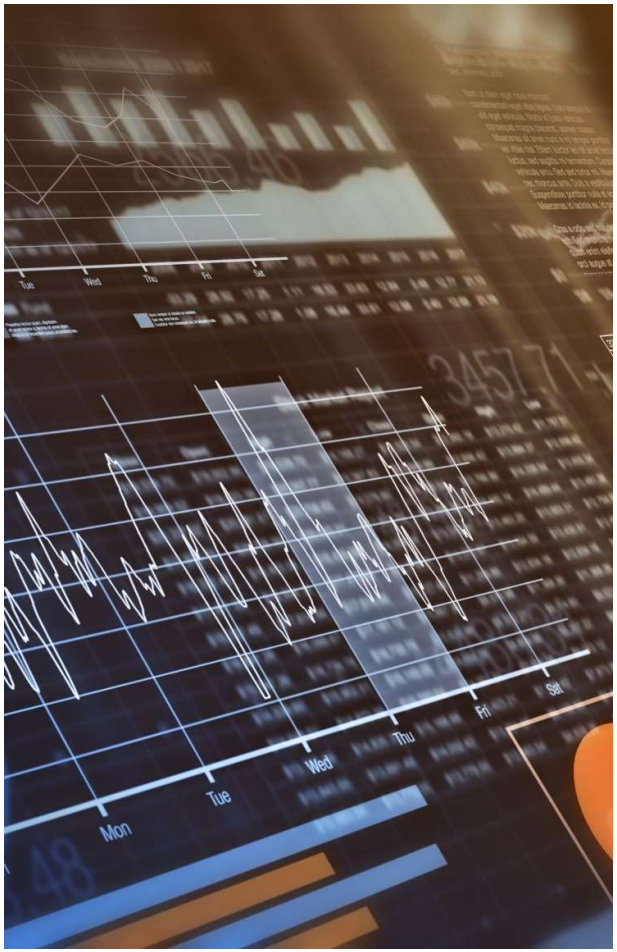
IDENTIFY HIGH-IMPACT AREAS TO IMPROVE YOUR 2025 MIPS SCORE

APPLY IMMEDIATE, PRACTICAL STEPS TO MEET QUALITY BENCHMARKS

AVOID COMMON DOCUMENTATION AND SUBMISSION MISTAKES

UNDERSTAND HOW 2025 CHANGES AFFECT SCORING AND PENALTIES



Analyze historical performance data

Your past performance is the best indicator of where to focus your improvement efforts.

1) Review your MIPS Performance Feedback Report
2) Look for trends in under performance to identify gaps.
3) Review data analytics dashboards regularly.

Quality Category Performance – 30% Of Final MIPS Score

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Prioritize high-impact measures for the highest potential performance.

Choose measures based on your provider's specialty and patient population.

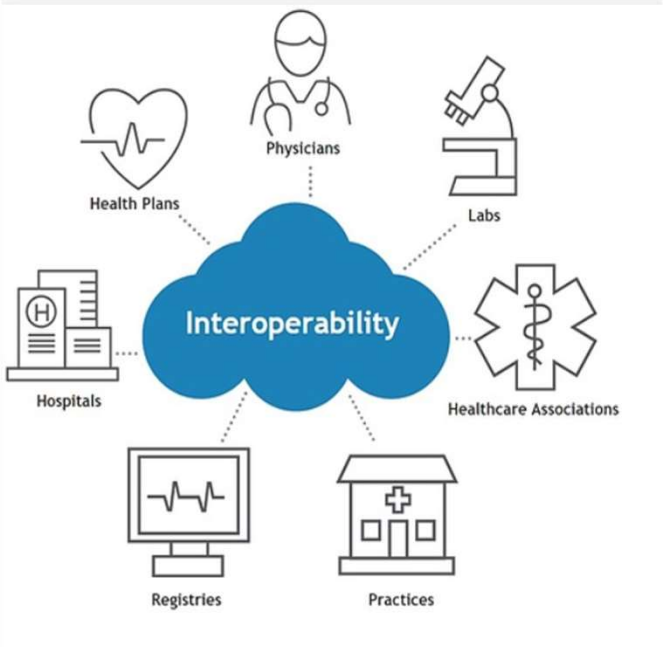
Outcome measures often carry a higher point value that process measures.

Be mindful of "topped-out" measures and their lower point values.

Cost Category Performance – 30% Of Final MIPS Score

- The Cost Category is based on your Medicare claims data.
- Identify high-cost areas by analyzing your claims data to identify areas of high spending.
- Reduce unnecessary or duplicate services.
- Focus on managing resources effectively.

Promoting Interoperability (Pi) Category Performance – 25% Of Final MIPS Score



The PI category focuses on the use of CERTIFIED EHR technology. If your EHR does not meet the CMS requirements for FHIR API, then you will not be able to generate an ONC certification ID to submit data.

Ensure that you are using certified EHR to its full potential.

Focus on interoperability which is a key objective.

Train your staff. Ineffective EHR usage can lead to a low performance score.

Improvement activities (ia) category performance – 15% of final mips score

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- Strategize your Improvement Activity by selecting an activity or activities that are relevant to your practice.
- Leverage existing workflows.
- Document the activity thoroughly including start and end dates for the activity.
- For 2025 activities are no longer weighted.
- Small practices (15 providers or less) are only required to report on one activity while large practices are required to report on two activities.

Apply Immediate Practial Steps To Meet Quality Benchmarks

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- Focus on a mid-year check-in to assess performance and make necessary adjustments.
- Perform a mid-year check-in analysis to assess your current status.
- Leverage historical data to highlight areas that need more focus.
- Compare performance benchmarks and use the performance data to assess your position.
- Streamline data collection and workflows by designating a staff member to oversee MIPS compliance.
- Integrate MIPS into daily workflows.
- Run periodic internal audits.
- Educate and engage your team.

Avoid Common Documentation and Submission Mistakes

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Establish	Establish standardized data collection processes and implement clear protocols.
Conduct	Conduct internal audits before the final submission deadline.
Create	Create a dedicated digital folder to store all MIPS-related documentation.
Document	Document everything for IA and PI categories.
Review	Review before finalizing.
Submit	Submit MIPS data early.

Proactive Strategies

- Involve your care team.
- Stay informed of MIPS requirements, deadlines, and updates.
- Stay updated on MIPS guidelines.
- Know your MIPS eligibility for all providers in your practice.
- Ensure data completeness.
- Keep copies of submission and documentation data.

Understand How 2025 Changes Affect Scoring and Penalties

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Maximum Available Points	Category Weights and Final Points
Quality Category • 60 pts	Quality Final • 30% or 30 pts
PI Categpry • 115 pts • Capped at 100	PI Final • 25% or 25%
IA Category • 40 pts	IA Final • 15% or 15 pts
Cost Category • Up to 250 pts	Cost Final • 30% or 30 pts

Total Final MIPS Score is out of 100%

Key Scoring Changes

- Quality Category
- Cost Category
- Improvement Activities

Penalty and Adjustment Changes

- Performance Threshold
- Promoting Interoperability
- Category Re-weighting
- Extreme & Uncontrollable Circumstances (EUC) Hardships

Sightview MIPS Services

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Our clients average 6 points higher compared to the national average

Enhance Patient Care	Simplify MIPS Reporting	Maximize Reimbursements

- Having a team with 80 years of collective experience in your corner
- Guiding your practice through the MIPS process
- Offering customized tiers so you can choose the one that works best for your practice
- https://www.sightview.com/mips-consulting-services

Hear From Our Happy Clients!

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"Sightview MIPS Services reduces the administrative burden while maximizing our MIPS score." ***- Nadine H. Administrator Provision Laser Eye Center***

"It has been invaluable to have a MIPS consultant who not only monitors our data, but also keeps us educated on what is coming for the year ahead. Sightview MIPS Services has enabled us to stay ahead of the curve." ***- Provision Laser Eye Center***

"Our MIPS advisor with Sightview is excellent. She is virtually a "lifesaver" when it comes to MIPS. Our score at the end of the year reflects this knowledge and support. It's always close to 100%." ***- Jan O. Practice Advisor from Cohen Eye Associates***

Last year we didn't get a good score due to changing EMR midway through the year. With the help of (Sightview) we were able to get a positive outcome and will see an increase in reimbursements this year." **Suzanne F. Billing Manager from Retina & Vitreous Consultants of Virginia**

Questions?

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Thank You