

## MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

2020 Extreme & Uncontrollable  
Circumstances Exception Application  
User Guide



# Contents

---

- [How to Use This Guide](#) 3
- [Overview](#) 5
- [Application Steps](#) 11
- [Help, Resources, and Version History](#) 20





## How to Use This Guide



**Please Note:** This guide was prepared for informational purposes only and is not intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It is not intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

## Table of Contents

The table of contents is interactive. Click on a chapter in the table of contents to read that section.



You can also click on the icon on the bottom left to go back to the table of contents.

## Hyperlinks

Hyperlinks to the [QPP website](#) are included throughout the guide to direct the reader to more information and resources.



## Overview



## General Information

If you have concerns about the effect of an event such as the COVID-19 public health emergency on your 2020 performance data, including cost measures, you should submit an [Extreme & Uncontrollable Circumstances Exception Application](#) **NOW** citing COVID-19 as the reason.

**As an additional flexibility due to COVID-19, we are extending the extreme and uncontrollable circumstances exception application deadline to February 1, 2021.**

- A [HARP account](#) is required to submit an application.
- Third-party intermediaries can also submit an application on your behalf with your permission.

This resource highlights key policies and provides screenshots for users. See the [2020 MIPS Exceptions Application Fact Sheet](#) to learn more.

## Individuals, Groups, and Virtual Groups

### **Applications can be submitted for one or more performance categories.**

- Any performance category that isn't included in the application is eligible for scoring, even if no data are submitted, unless the clinician or group qualifies for reweighting under another policy.

### **Any data you submit, or someone submits on your behalf, will override reweighting for that performance category and the category will be scored.**

- If the Cost performance category is included in the application, cost measures won't be scored even if data is submitted for other performance categories.
- **IMPORTANT:** Even though we are extending the application deadline into the PY 2020 submission period, individuals, groups and virtual groups can't submit an extreme and uncontrollable circumstances exception application to override PY 2020 data they've already submitted.

### **You must be scored on at least 2 performance categories to earn a MIPS Final Score other than the performance threshold.**

- When fewer than 2 performance categories can be scored (meaning 1 performance category is weighted at 100% of your final score, and the other performance categories are weighted at 0%), the final score for the 2020 MIPS performance period would be equal to the performance threshold and you would receive a neutral payment adjustment in 2022.

## Individuals, Groups, and Virtual Groups *(continued)*

### Example

You, a MIPS eligible clinician (or group or virtual group), submit an application to have all 4 performance categories reweighted, but later determine you are able to collect and submit data for the Improvement Activities and Promoting Interoperability performance categories:

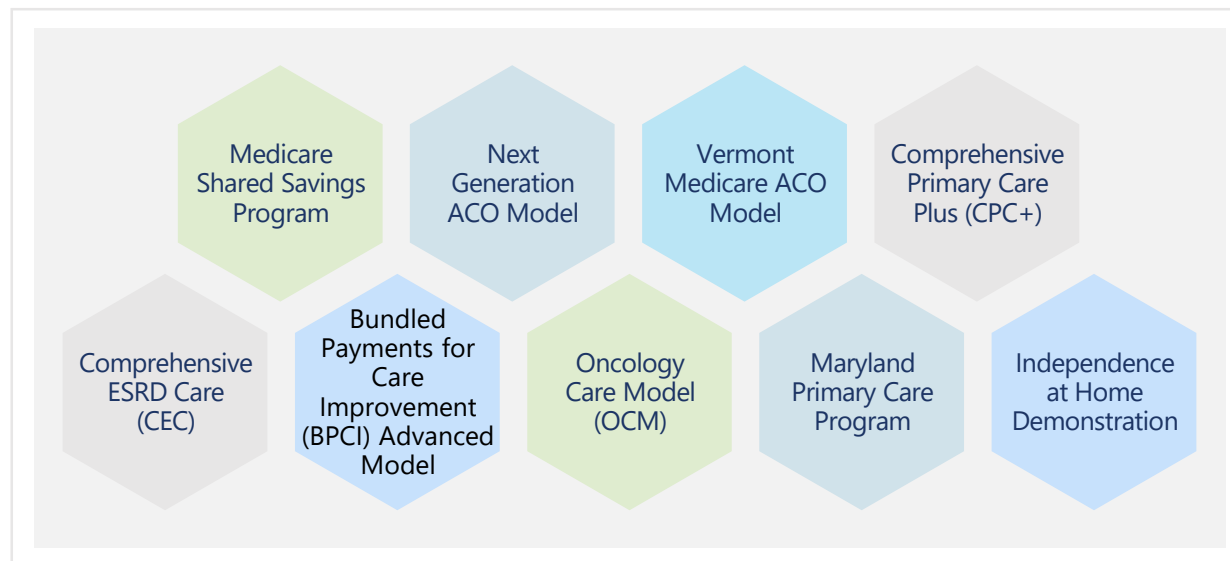
- You will receive a MIPS Final Score based on the data submitted.
- The Improvement Activities performance category will be weighted to 15%.
- The Promoting Interoperability performance category will be weighted to 85% of your final score.
- The Quality performance category will retain a 0% weight because you didn't submit quality data.
- The Cost performance category will retain a 0% weight because there are no data submission requirements associated with the Cost performance category (reweighting can't be voided).



## APM Entities

We have finalized a policy to allow MIPS APM Entities to submit a PY 2020 Extreme and Uncontrollable Circumstances Exception Application for all MIPS performance categories.

- This policy was finalized in the CY 2021 PFS Final Rule and applies to the following models:



## APM Entities *(continued)*

### **APM Entity applications must be submitted for all performance categories.**

- You can't submit an application for an APM Entity to request reweighting in 1 or 2 performance categories.
- This is different from our policy for individual, group, and virtual group applications.

### **If your APM Entity's application is approved, the APM Entity will receive a final score equal to the performance threshold and the MIPS eligible clinicians in the APM Entity group would receive a neutral payment adjustment even if data are submitted for the APM Entity.**

- Data submitted for an APM Entity will not override performance category reweighting from an approved application.
- This is different from our policy for individual, group, and virtual group applications.

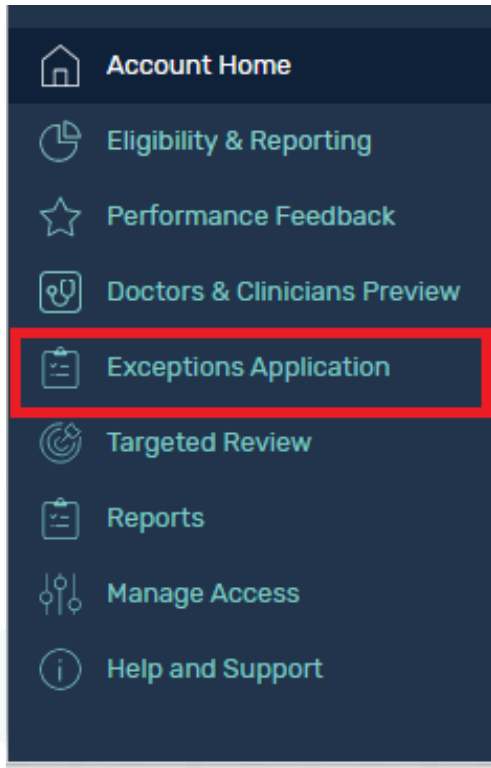
### **An approved application won't affect your model-specific reporting requirements.**

- For example, Shared Savings Program ACOs must still report their quality measures through the CMS Web Interface to meet their requirements under the Shared Savings Program, unless otherwise excepted under that APM.



## Application Steps

## Steps 1-4

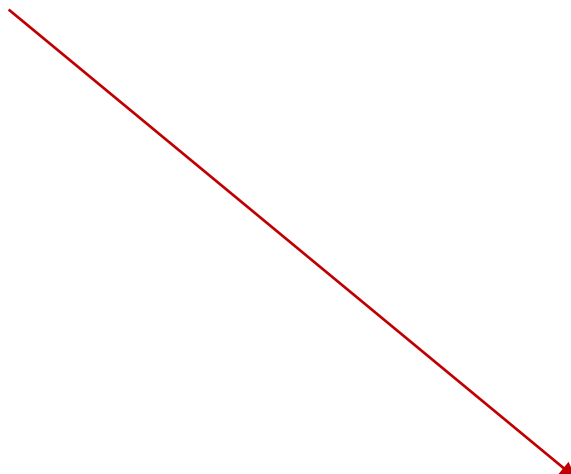


1. [Register for a HARP account](#) if you don't have one.
2. [Sign in to qpp.cms.gov](#) with a HARP account to submit an application.
3. Click **Exceptions Application** on the left-hand navigation.
4. Click **Add New QPP Exception**.



## Step 5

5. Choose the Extreme & Uncontrollable Circumstances Exception option.



### Add New Exception

Exception Type \* ?

Promoting Interoperability Hardship Exception

MIPS eligible clinicians, groups, and virtual groups may submit a Promoting Interoperability Hardship Exception Application citing one of the following specified reasons:

- You're a small practice
- You have decertified EHR technology
- You have insufficient Internet connectivity
- You face extreme and uncontrollable circumstances such as disaster, practice closure, severe financial distress or vendor issues
- You lack control over the availability of CEHRT

Extreme and Uncontrollable Circumstances Exception

The Extreme and Uncontrollable Circumstances application is reserved for instances where there is indeed an Extreme and Uncontrollable Circumstance, such as a **natural disaster, public health emergency or other significant event**, that prevents collecting data for an extended period of time, or that could impact performance on cost measures.

CANCEL CONTINUE >

## Step 6

6. Select the application type based on the level at which you intend (or intended) to participate in MIPS:
  - **Individual**
    - National Provider Identifier (NPI) and practice affiliation required
  - **Group**
    - Taxpayer Identification Number (TIN) required
  - **Virtual Group**
    - Virtual Group identifier required
  - **APM Entity**
    - APM Entity ID required

← **Add New Extreme and Uncontrollable Circumstances Application**

Application Type: \* ?

Individual

Group

Virtual Group

APM Entity

CANCEL SAVE SAVE & CONTINUE >

**Note:** If you're only requesting reweighting of 1 or 2 performance categories and intend to submit data for others, it's critical that you select the application type that aligns with the level at which you intend to submit data to MIPS (at the individual or group level.)

## Step 7

7. Provide your contact information (as the submitter) and identify your relationship to the party identified in the application.

The screenshot shows a form titled "Submitter Details". It contains the following fields and elements:

- Contact Information \*** (with a help icon):
  - Phone Number (text input)
  - Ext. (Optional) (text input)
  - Email (text input)
- Submitter/Third Party Intermediary Relationship \*** (with a help icon):
  - A dropdown menu with the text "Please Specify" and an upward arrow.
  - A list of options: "Please Specify", "Clinician", "Consultant", "Physician Staff", "Registry / OCDR", "EHR Vendor", and "Other".


Two callout boxes provide instructions:

- The first callout points to the "Contact Information" header and reads: "Please enter your contact information so that we may be able to contact you if further information is required".
- The second callout points to the dropdown menu and reads: "You must select your relationship to the party you are submitting the QPP Exception for. If you select 'Other' you must describe your relationship in the displayed entry field".

## Step 8

8. In the Additional Access section, identify additional users to receive notifications about the application—if there is a HARP account associated with the email address(es) you provide, that person will be able to sign in to [qpp.cms.gov](http://qpp.cms.gov) and access the application.

### Additional Access

**Additional Staff Access Email(s)** 


Hit enter/comma after each entry to add multiple



## Step 9

9. Cite COVID-19 as the event and indicate the date range (March 2020 – present).

### Extreme and Uncontrollable Circumstances Details

Event Type \* 

- COVID-19
- Natural Disaster
- Ransomware / Malware
- Medical Issue
- Other

Event Date Range \* 

Start Date  
3/1/2020 

To

Present 

Event Still Persists

## Step 10

10. Write a brief description about the data collection challenges the clinician or group is facing as a result of the COVID-19 pandemic or include concerns about the effect that the COVID-19 pandemic will have on PY 2020 performance data, including cost measures.

**No supporting documentation is required to submit an application.**

### **Example** (brief description/concerns)

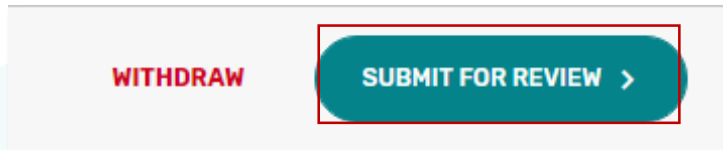
Due to the COVID-19 pandemic, many of our processes, workflows, and resources have shifted to care for patients at high risk with urgent and severe medical conditions. This shift has adversely affected our ability to collect 2020 performance data, changed our patient population and the validity of measure data we could collect, and has affected the cost of care we're providing.

## Steps 11 & 12

11. Check the box next to each performance category for which you are requesting reweighting.

Note that all performance categories will be automatically selected for APM Entity applications.

12. Click Submit for Review.



**Performance Categories Affected** \* ?

- Quality**  
This category covers the quality of the care you delivered, based on performance measures created by CMS, as well as medical professional and stakeholder groups. **Do not select this category if you were able to report data for at least one year.**
- Promoting Interoperability**  
This category focuses on patient engagement and the electronic exchange of health information by proactively sharing information with other clinicians or the patient in a comprehensive manner. **Do not select this category if you were able to report data for at least 90 days.**
- Improvement Activities**  
This category includes an inventory of activities that assess how you improved your care processes, enhanced patient engagement in care, and increased access to care. **Do not select this category if you were able to report data for at least 90 days.**
- Cost**  
The cost of the care you provide is calculated by CMS based on your Medicare claims. MIPS uses cost measures to gauge the total cost of care during the year or during a hospital stay. **Selecting this category will have no effect on your exception outcome.**



## Help, Resources, and Version History

## Where Can You Go for Help?

Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 a.m.-8:00 p.m. Eastern Time or by e-mail at:

[QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov).

- Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Connect with your [local technical assistance organization](#). We provide no-cost technical assistance to small, underserved, and rural practices to help you successfully participate in the Quality Payment Program.

Visit the [Quality Payment Program website](#) for other [help and support](#) information, to learn more about [MIPS](#), and to check out resources available in the [QPP Resource Library](#).

## Resources

The following resources are or will be available on the [QPP Resource Library](#).

### General:

- [2020 MIPS 101 Guide](#)
- [2020 MIPS Group Participation Guide](#)
- [2020 MIPS Scoring Guide](#)
- [2020 MIPS Exceptions Application Fact Sheet](#)
- [How to Apply for the 2020 Extreme and Uncontrollable Circumstances Hardship Exception Video](#)

### Quality:

- [2020 Quality Benchmarks](#)
- [Medicare Shared Savings Program Quality Measure Benchmarks for the 2020/2021 Performance Years](#)
- [2020 Quality Quick Start Guide](#)
- [2020 MIPS Quality User Guide](#)
- [2020 MIPS Quality Measures List](#)
- [2020 CMS Web Interface Quick Start Guide](#)
- [2020 CAHPS for MIPS Survey Overview Fact Sheet](#)
- [2020 Medicare Part B Claims Measure Specifications](#)
- [2020 MIPS Clinical Quality Measure Specifications](#)
- [2020 QCDR Measure Specifications](#)
- [2020 CMS Web Interface Measure Specifications](#)

### Cost:

- [2020 Cost Quick Start Guide](#)
- [2020 MIPS Cost User Guide](#)
- [2020 Cost Measure Information Forms \(specifications\)](#)

### Improvement Activities:

- [2020 Improvement Activities Quick Start Guide](#)
- [2020 MIPS Improvement Activities User Guide](#)
- [2020 Improvement Activities Inventory](#)

### Promoting Interoperability:

- [2020 Promoting Interoperability Quick Start Guide](#)
- [2020 Promoting Interoperability User Guide](#)
- [2020 Promoting Interoperability Measure Specifications](#)

## Version History

If we need to update this document, changes will be identified here.

Date	Change Description
12/2/2020	Original posting