

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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Centers for Medicare & Medicaid Services

DATE: July 24, 2018

TO: All MA Organizations

FROM: Pauline Lapin
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SUBJECT: Notification of Announcement of the Medicare Advantage Qualifying Payment Arrangement Incentive (MAQI) Demonstration

This memorandum provides notification of the announcement of the Medicare Advantage Qualifying Payment Arrangement Incentive (MAQI) Demonstration

The MAQI Demonstration is designed to test whether exempting Merit Based Incentive Payment System (MIPS)-eligible clinicians who participate to a sufficient degree in certain payment arrangements with Medicare Advantage Organizations (MAOs) from the MIPS reporting requirements and payment adjustment will increase or maintain participation in payment arrangements similar to Advanced Alternative Payment Models (APMs) with MAOs and change the manner in which clinicians deliver care. The Demonstration will permit consideration of participation in “Qualifying Payment Arrangements” with Medicare Advantage plans that meet the criteria to be Other Payer Advanced APMs a year before the All-Payer Combination Option is available. The requirements for Qualifying Payment Arrangements under the MAQI Demonstration will be the same as the Other Payer Advanced APM criteria for Medicare plans under the Quality Payment Program.

In the next few weeks, eligible clinicians may apply to the Demonstration, and those that qualify will be asked to provide documentation of their participation in Qualifying Payment Arrangements in Fall 2018. The Centers for Medicare and Medicaid Services (CMS) is currently seeking public comment on its proposed approach to collecting this information at the following link <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing-Items/CMS-10673.html?DLPage=1&DLEntries=10&DLSort=1&DLSortDir=descending>.

For the 2018 performance year, CMS is proposing the following standards for Qualifying Payment Arrangements:

- Require at least 50% of eligible clinicians in each participating APM Entity group to use certified electronic health record technology (CEHRT) to document and communicate clinical care;

- Base payments for covered professional services on quality measures that are comparable to those used in the MIPS quality performance category and meet the standards specified in § 414.1420(c); and
- Require APM Entities to bear more than nominal financial risk if actual aggregate expenditures exceed expected aggregate expenditures, as described in § 414.1420(d)(1) and (d)(3).

We encourage MAOs with these types of payment arrangements to contact their participating clinicians, and assist them in completing the Qualifying Arrangement forms for the MAQI Demonstration.

Additional information on the MAQI Demonstration is located at <https://innovation.cms.gov/initiatives/maqi/>.