



CAHPS FOR MIPS QUESTIONS AND ANSWERS

The Merit-based Incentive Payment System (MIPS) program promotes the reporting of quality information by eligible professionals using performance-based payment adjustments. PRC is a trusted partner for medical groups that select the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey for MIPS measures within the quality performance category.





WHO IS ELIGIBLE FOR THE CAHPS FOR MIPS SURVEY?

Eligible clinicians are:

- Billing more than \$90,000 for Part B covered professional services
- Seeing more than 200 Part B patients
- Providing more than 200 covered professional services to Part B patients

Eligible clinicians include:

- Physicians
- Osteopathic practitioners
- Chiropractors
- Physician assistants
- Nurse practitioners
- Clinical nurse specialists
- Certified registered nurse anesthetists
- Physical therapists
- Occupational therapists
- Clinical psychologists
- Qualified speech-language pathologists
- Qualified audiologists
- Registered dietitians or nutrition professionals

If you are an eligible group or virtual group:

- CAHPS for MIPS data collection and reporting are optional for 2022.
- The registration deadline for the MIPS Group Practice Reporting Option (GPRO) is June 30, 2022; groups indicate their CAHPS for MIPS participation as part of this registration process.
- Groups must have authorized a survey vendor to conduct CAHPS for MIPS by September 14, 2022.

If you are a Shared Savings Program (SSP) ACO:

- CAHPS for MIPS data collection and reporting is required for 2022.
- Groups must have authorized a survey vendor to conduct CAHPS for MIPS by September 14, 2022.

IS PRC A CMS-APPROVED CAHPS FOR MIPS SURVEY VENDOR?

Yes, PRC is proud to be an approved CAHPS for MIPS survey vendor.

HOW IS THE CAHPS FOR MIPS SURVEY ADMINISTERED?

CAHPS for MIPS requires a mixed-mode survey administration approach, which consists of a pre-notification letter, two survey mailings, and up to six follow-up telephone calls to non-responders or to those who have not completed the survey.

CMS (the Centers for Medicare & Medicaid Services) will identify beneficiaries who are eligible for the survey and will select a random sample of beneficiaries with original Medicare who received primary care services from qualified providers. However, CMS will limit the sample to beneficiaries age 18 and older who are known not to be institutionalized or deceased. CMS selects up to 860 eligible beneficiaries, depending on the group size.

The 2022 survey administration is occurring between October 2022 and January 2023.

EVENT	DATE
Groups register for CAHPS for MIPS participation*	06/30/22
Groups must submit Vendor Authorization form	09/14/22
Pre-notification letters are mailed	10/18/22
First mail questionnaires are sent	10/25/22
Second mail questionnaires are sent	11/15/22
Phone interviews begin	12/02/22
All data collection ends	01/12/23
Data are submitted	01/17/23

*Groups that participate in a SSP ACO only register for the CMS Web Interface if they want to report traditional MIPS as a group. Participation would be in addition to the required reporting through the Alternative Payment Model Performance Pathway (APP).



WHAT DOES THE CAHPS FOR MIPS SURVEY MEASURE?

The CAHPS for MIPS survey asks beneficiaries about the interpersonal aspects of healthcare—aspects for which patients may be the best, if not the only, source of information, and areas that patients have identified as being important to them.

The survey includes the core questions contained in the CG-CAHPS survey plus several required supplemental items.

THE 10 SUMMARY SURVEY MODULES

- | | |
|-----------------------------------|---------------------------------------|
| 1. Getting Timely Care | 6. Shared Decision Making |
| 2. Provider Communication | 7. Health Status/Functional Status |
| 3. Rating of Provider | 8. Courteous and Helpful Office Staff |
| 4. Access to Specialists | 9. Care Coordination |
| 5. Health Promotion and Education | 10. Stewardship of Patient Resources |

HOW WILL WE RECEIVE THE SURVEY RESULTS?

For groups that choose to work with us, PRC will provide results through its online portal, www.PRCEasyView.com[®]. Users can compare themselves against PRC’s live norm of other participating groups by way of top-box percentages or linear mean scores.

CMS will generate results and scores at the group level. In future years, CMS may allow oversampling to yield clinician-level results. CMS provides reports through its website, portal.cms.gov. Both narrative reports and an Excel[®] workbook of scores based on the survey data are available from CMS.gov.

WILL RESULTS BE PUBLICLY REPORTED?

Physician Compare (www.medicare.gov/physiciancompare) will display CAHPS for MIPS results for each eligible medical group. Individual providers will simply have a notation that they participated. This information will be refreshed annually.

CUSTOMIZE YOUR CG-CAHPS SURVEY

We also conduct customized versions of the CG-CAHPS survey for numerous clients. If you are interested in discussing options for year-round ongoing measurement to move beyond compliance to excellence, please contact us for CG-CAHPS information.

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ABOUT PRC

Since 1980, PRC has helped more than 2,200 healthcare organizations achieve their research objectives by collecting and analyzing timely, accurate, and reliable feedback from patients, employees, physicians, and the community at large. PRC's high-quality survey research, analytics tools, and coaching give voice to healthcare organizations, patients, and the community as a whole. Leading the standards for healthcare market research, PRC partners with organizations to support their efforts in becoming better places for patients to be treated, physicians to practice medicine, and employees to work.

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WHAT ARE YOUR GOALS?

To learn what PRC's data can do for you, contact us at 800-428-7455 or visit [PRCCustomResearch.com](https://www.PRCCustomResearch.com)



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