

# BizMed • QPP Navigator™

## 2024 MIPS Reporting Period

(Submitted to CMS in 2025)

Introducing the QPP Navigator:

Understand • Estimate • Analyze • Optimize

- CMS Qualified Registry
- Flexible and simple data upload
- All MIPS Quality Measures available
- Group/individual, MVP, APM submissions
- Get score previews based on CMS API
- Estimate exemption scenarios
- Data validation and audit repository
- Submit MIPS data to CMS
  - \$0 – Minimal submission (PI and/or IA only)
  - \$195 per eligible clinician – Full submission (including Quality)

Dashboard Quality IA PI Cost Bonuses Status/Checklist Consultation

Outcome High Priority Registry EHR Claims CMS Web Interface Topped Out Benchmark

AAA Internal Medicine  
MIPS Quality Measures

Select Group/Clinician: Group Submission Select Year: 2020

Select Submission Method: Registry

Start Date: 01/01/2020 End Date: 12/31/2020

Diabetes: Hemoglobin A1c (HbA1c) Poor Control (-9%) ( QID 001)

Patients whose most recent HbA1c level (performed during the measurement period) is  $\geq 9.0\%$

| Numerator | Denominator | Exclusions | Exceptions | Data Missing | Percent | Decile | MIPS Active                         | Verify/Validate          | Delete                   |
|-----------|-------------|------------|------------|--------------|---------|--------|-------------------------------------|--------------------------|--------------------------|
| 6         | 100         | 0          | 0          | 0            | 6.0     | 10th   | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

View Benchmarks

| Submission | Decile 3    | Decile 4    | Decile 5    | Decile 6    | Decile 7    | Decile 8    | Decile 9    | Decile 10 |
|------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-----------|
| claims     | 79.99-70.01 | 70-60.01    | 60-50.01    | 50-40.01    | 40-30.01    | 30-20.01    | 20-10.01    | <=10      |
| EHR        | 99.46-99.46 | 99.45-92.62 | 92.61-74.48 | 74.47-59.09 | 59.08-46.85 | 46.84-37.89 | 37.88-31.41 | <=31.4    |
| Registry   | 79.99-69.99 | 70-59.99    | 60-49.99    | 50-39.99    | 40-29.99    | 30-19.99    | 20-9.99     | <=10      |

Note: These national benchmarks are used by CMS to calculate performance scores for quality measures. Benchmarks are regularly updated by CMS and your scores will reflect those updates. Benchmarks differ for various submission methods as shown above.

Preventive Care and Screening: Screening for Depression and Follow-Up Plan ( QID 134)

Patients screened for depression on the date of the encounter using an age appropriate standardized tool AND if positive, a follow-up plan is documented on the date of the positive screen.

| Numerator | Denominator | Exclusions | Exceptions | Data Missing | Percent | Decile | MIPS Active                         | Verify/Validate          | Delete                   |
|-----------|-------------|------------|------------|--------------|---------|--------|-------------------------------------|--------------------------|--------------------------|
| 0         | 0           | 0          | 0          | 0            | 0%      | N/A    | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- Enterprise version for Partners to monitor performance across practices
- Discount options available based on volume and/or support model
- Our legendary 24/7 support for everything

*The perfect and most affordable replacement for the retiring CMS Web Interface.*

For larger medical groups, ACOs and other APMs, the QPP Navigator provides you with everything you need to seamlessly continue your participation in the QPP.

*Simple, easy to use, intuitive and flexible tools to optimize your MIPS Medicare payment adjustments, for practices of all types and sizes, from paper charts to sophisticated electronic records users.*

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