

2019 MIPS Performance Period Virtual Group Election Process Fact Sheet

As discussed in the CY 2018 Quality Payment Program final rule, solo practitioners and groups with 10 or fewer clinicians (including at least one MIPS eligible clinician) that want to participate in the Merit-based Incentive Payment System (MIPS) as a virtual group will need to engage in an election process. In order to participate in MIPS as a virtual group for the 2019 performance period, an election must be made prior to the start of the performance period. The election period for virtual groups for the 2019 performance period is from October 1, 2018 to December 31, 2018.

What is the 2-Stage Election Process for Virtual Groups?

Stage 1 (optional)

- ✓ Contact your [Quality Payment Program Technical Assistance](#) organization for information regarding Taxpayer Identification Number (TIN) size to help you determine if you meet the TIN size criteria to join or form a virtual group before you:
 - Establish a formal written agreement with each virtual group member;
 - Submit a formal election; and/or
 - Budget your resources for the virtual group.

Stage 2 (required)

The following elements are required as part of Stage 2 of the election process:

- ✓ **Have a formal written agreement**
 - Each virtual group is required to have a formal written agreement between each solo practitioner and group that composes the virtual group before an election is submitted. A virtual group agreement must include 9 required elements (see [checklist](#)).
 - The written formal agreement does not need to be submitted to CMS.
 - A sample agreement is available in the Virtual Group Toolkit.
- ✓ **Name an official virtual group representative**
- ✓ **Submit the virtual group's election by the election submission deadline**
 - Each virtual group's official representative is responsible for submitting the virtual groups election via e-mail to CMS at MIPS_VirtualGroups@cms.hhs.gov by December 31, 2018.
- ✓ **Determine group size and low-volume threshold**
 - CMS will review claims data during Stage 2 of the election process to determine eligibility of TINs identified in a virtual group election. Eligibility determinations are made to identify

solo practitioners who are MIPS eligible and groups that meet the TIN size and low-volume threshold criteria.

- While TIN sizes may change after virtual groups are approved by CMS, the TIN size that is determined during Stage 2 of the election process will remain valid for the entire performance period.

What Needs to be Included in a Virtual Group Election Submission?

A virtual group election needs to be made by December 31, 2018, and must include at least the following:

- ✓ **Information about each TIN and NPI associated with the virtual group.**
 - TIN and legal business name, as recorded in PECOS, for each TIN.
 - For a TIN that is the Social Security Number (SSN) of a clinician, only include the last six digits of the SSN when submitting an election to CMS.
 - Name and NPI of the clinicians associated with each TIN.
- ✓ **The official virtual group representative's name, TIN/practice affiliation, and contact information.**
- ✓ **Acknowledgement that a formal written agreement has been established between each solo practitioner and group that composes a virtual group. Formal written agreements do NOT need to be submitted to CMS as part of the group election.**

A sample election is available in the Virtual Group Toolkit.

Once a virtual group is approved by CMS, the virtual group representative must contact the Quality Payment Program before the applicable submission period starts with any updates to information that was included in the virtual group's election for the 2019 performance period, such as:

- Changes to clinicians – a clinician joins or leaves a TIN that is part of the virtual group; and/or
- Changes to TINs – a TIN changes their TIN or legal business name.

While the clinician composition of TINs that are part of a virtual group may change following an election, virtual groups cannot add or remove TINs from the virtual group during the performance period.

Virtual Group Agreements

As discussed in the CY 2018 Quality Payment Program final rule, the virtual group arrangement must be set forth in a formal written agreement between each solo practitioner and group that composes a virtual group. The parties to a virtual group agreement are the TINs composing the virtual group. The written virtual group agreement must identify, but need not include as parties to the agreement, all clinicians who bill under the TIN of a group that is in the virtual group, and applies for at least one performance period.

If an NPI joins or leaves the TIN, or a change is made to a TIN that impacts the agreement itself (e.g., a legal business name change) during the 2019 performance period, a virtual group must update the agreement and a virtual group's official representative must submit the changes to the Quality Payment Program Service Center before the start of the applicable submission period.

Virtual Group Agreement Checklist

CMS has created a Virtual Group Model Agreement to serve as a template that could be used by virtual groups. Virtual groups can add elements to the agreement that would meet the needs of the virtual group.

The following are the required elements of a formal written agreement between each solo practitioner and group that composes a virtual group:

- Identifies the parties to the agreement by name of party, TIN, and NPI, and includes as parties to the agreement only the groups and solo practitioners that compose the virtual group.
- Requires that each TIN within a virtual group notify all NPIs associated with the TIN of their participation in MIPS as a virtual group.
- Is executed on behalf of each party by an individual who is authorized to bind the party.
- Expressly requires each member of the virtual group (and each NPI under each TIN in the virtual group) to participate in MIPS as a virtual group and comply with the requirements of the MIPS and all other applicable laws and regulations (including, but not limited to, federal criminal law, False Claims Act, anti-kickback statute, civil monetary penalties law, the Health Insurance Portability and Accountability Act of 1996, and physician self-referral law).
- Sets forth the NPI's rights and obligations in, and representation by, the virtual group, including without limitation, the reporting requirements and how participation in MIPS as a virtual group affects the ability of the NPI to participate in MIPS outside of the virtual group.
- Describes how the opportunity to receive payment adjustments will encourage each member of the virtual group (and each NPI under each TIN in the virtual group) to adhere to quality assurance and improvement.
- Requires each party to the agreement to update its Medicare enrollment information, including the addition and deletion of NPIs billing through its TIN, on a timely basis in accordance with Medicare program requirements and to notify the virtual group representative of any such changes within 30 days after the change.
- Is for a term of at least one performance period as specified in the formal written agreement.
- Requires completion of a close-out process upon termination or expiration of the agreement that requires each party to the virtual group agreement to furnish, in accordance with applicable privacy and security laws, all data necessary in order for the virtual group to aggregate its data across the virtual group.

To learn more about virtual group agreements, see the CY 2018 Quality Payment Program [final rule](#).

Where Can I Get Help if I Want to Participate in MIPS as a Virtual Group?

You can get help with the virtual group election process from the [Quality Payment Program Technical Assistance](#) organizations.

Technical Assistance organizations can give you free help on all aspects of virtual groups, including TIN size information. You are encouraged to contact one of the following Technical Assistance organizations for direct and immediate support:

- **Small, Underserved, and Rural Support** – provides assistance to clinicians in small practices (15 or fewer clinicians) with a priority for those in rural locations, health professional shortage areas (HPSAs), and medically underserved areas (MUAs). You can find the contact information for our local Small, Underserved, and Rural Support organization by visiting the Small and Rural Practices [webpage](#), or by contacting QPPSURS@IMPAQINT.com to get connected.
- **Quality Innovation Networks** (Quality Improvement Organizations (QIN-QIOs)) – provide assistance to clinicians in larger practices (more than 15 clinicians).
- **Transforming Clinical Practice Initiative (TCPI)** – provides assistance to clinicians in both small and large practices interested in practice transformation and participating in an Alternative Payment Model (APM). Please note that there is a time and data commitment associated with participating in TCPI. Eligible clinicians who are interested in receiving support on virtual groups, or the Quality Payment Program in general, will need to enroll with a Practice Transformation Network first. For help getting started, contact TCPI.ISCMail@us.ibm.com.

If you don't choose to contact your Technical Assistance representative directly, you can still contact the Quality Payment Program for questions regarding virtual group policies at 1-866-288-8292 (TTY 1-877-715-6222), Monday through Friday, 8:00 AM-8:00 PM Eastern Time or via e-mail at QPP@cms.hhs.gov.