



**CMS Announces Relief for Clinicians, Providers, Hospitals and Facilities Participating in Quality Reporting Programs in Response to COVID-19**

Today, the Centers for Medicare & Medicaid Services (CMS) announced unprecedented relief for the clinicians, providers, and facilities participating in Medicare quality reporting programs including the 1.2 million clinicians in the Quality Payment Program and on the front lines of America’s fight against the 2019 Novel Coronavirus (COVID-19).

Specifically, CMS announced it is granting exceptions from reporting requirements and extensions for clinicians and providers participating in Medicare quality reporting programs with respect to upcoming measure reporting and data submission for those programs. The action comes as part of the Trump Administration’s response to 2019 Novel Coronavirus (COVID-19).

“In granting these exceptions and extensions, CMS is supporting clinicians fighting Coronavirus on the front lines,” said CMS Administrator Seema Verma. “The Trump Administration is cutting bureaucratic red tape so the healthcare delivery system can direct its time and resources toward caring for patients.”

Specifically, CMS is implementing additional extreme and uncontrollable circumstances policy exceptions and extensions for upcoming measure reporting and data submission deadlines for the following CMS programs:

<b>Provider Programs</b>	<b>2019 Data Submission</b>	<b>2020 Data Submission</b>
<ul style="list-style-type: none"> <li>· Quality Payment Program –</li> <li>Merit-based Incentive Payment System (MIPS)</li> </ul>	<p>Deadline extended from March 31, 2020 to April 30, 2020.</p> <p>MIPS eligible clinicians who have not submitted any MIPS data by April 30, 2020 will qualify for the automatic extreme and uncontrollable circumstances policy and will receive a neutral payment adjustment for the 2021 MIPS payment year.</p>	<p>CMS is evaluating options for providing relief around participation and data submission for 2020.</p>
<ul style="list-style-type: none"> <li>· Medicare Shared Savings Program</li> <li>Accountable Care Organizations (ACOs)</li> </ul>		

Hospital Programs	2019 Data Submission	2020 Data Submission
<ul style="list-style-type: none"> <li>• Ambulatory Surgical Center Quality Reporting Program</li> </ul>	<p>Deadlines for October 1, 2019 – December 31, 2019 (Q4) data submission optional.</p>	<p>CMS will not count data from January 1, 2020 through June 30, 2020 (Q1-Q2) for performance or payment programs. Data <u>does not</u> need to be submitted to CMS for this time period.</p>
<ul style="list-style-type: none"> <li>• CrownWeb National ESRD Patient Registry and Quality Measure Reporting System</li> </ul>	<p>If Q4 is submitted, it will be used to calculate the 2019 performance and payment (where appropriate). If data</p>	
<ul style="list-style-type: none"> <li>• End-Stage Renal Disease (ESRD) Quality Incentive Program</li> </ul>	<p>for Q4 is unable to be submitted, the 2019 performance will be calculated based on data from January 1, 2019 – September 30, 2019 (Q1-Q3) and</p>	<p>* For the <i>Hospital-Acquired Condition Reduction Program</i> and the <i>Hospital Value-Based Purchasing Program</i>, if data from</p>
<ul style="list-style-type: none"> <li>• Hospital-Acquired Condition Reduction Program</li> </ul>	<p>available data.</p>	<p>January 1, 2020 – March 31, 2020 (Q1) is submitted, it will be used for scoring in the program</p>
<ul style="list-style-type: none"> <li>• Hospital Inpatient Quality Reporting Program</li> </ul>		<p>(where appropriate).</p>
<ul style="list-style-type: none"> <li>• Hospital Outpatient Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>• Hospital Readmissions Reduction Program</li> </ul>		
<ul style="list-style-type: none"> <li>• Hospital Value-Based Purchasing Program</li> </ul>		
<ul style="list-style-type: none"> <li>• Inpatient Psychiatric Facility Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>• PPS-Exempt Cancer Hospital Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>• Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals</li> </ul>		

Post-Acute Care (PAC) Programs	2019 Data Submission	2020 Data Submission
<ul style="list-style-type: none"> <li>Home Health Quality Reporting Program</li> </ul>	Deadlines for October 1, 2019 – December 31, 2019 (Q4) data submission optional.  If Q4 is submitted, it will be used to calculate the 2019 performance and payment (where appropriate).	Data from January 1, 2020 through June 30, 2020 (Q1-Q2) <u>does not</u> need to be submitted to CMS for purposes of complying with quality reporting program requirements.  * <i>Home Health and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey data from January 1, 2020 through September 30, 2020 (Q1-Q3) does not need to be submitted to CMS.</i>  * <i>For the Skilled Nursing Facility (SNF) Value-Based Purchasing Program, qualifying claims will be excluded from the claims-based SNF 30-Day All-Cause Readmission Measure (SNFRM; NQF #2510) calculation for Q1-Q2.</i>
<ul style="list-style-type: none"> <li>Hospice Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>Inpatient Rehabilitation Facility Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>Long Term Care Hospital Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>Skilled Nursing Facility Quality Reporting Program</li> </ul>		
<ul style="list-style-type: none"> <li>Skilled Nursing Facility Value-Based Purchasing Program</li> </ul>		

For those programs with data submission deadlines in April and May 2020, submission of those data will be optional, based on the facility's choice to report. In addition, no data reflecting services provided January 1, 2020 through June 30, 2020 will be used in CMS's calculations for the Medicare quality reporting and value-based purchasing programs. This is being done to reduce the data collection and reporting burden on providers responding to the COVID-19 pandemic.

CMS recognizes that quality measure data collection and reporting for services furnished during this time period may not be reflective of their true level of performance on measures such as cost, readmissions and patient experience during this time of emergency and seeks to hold organizations harmless for not submitting data during this period.

CMS will continue monitoring the developing COVID-19 situation and assess options to bring additional relief to clinicians, facilities, and their staff so they can focus on caring for patients.

This action, and earlier CMS actions in response to COVID-19, are part of the ongoing White House Task Force efforts. To keep up with the important work the Task Force is doing in response to COVID-19, please visit [www.coronavirus.gov](http://www.coronavirus.gov). For a complete and updated list of

CMS actions, and other information specific to CMS, please visit the [Current Emergencies Website](#).

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