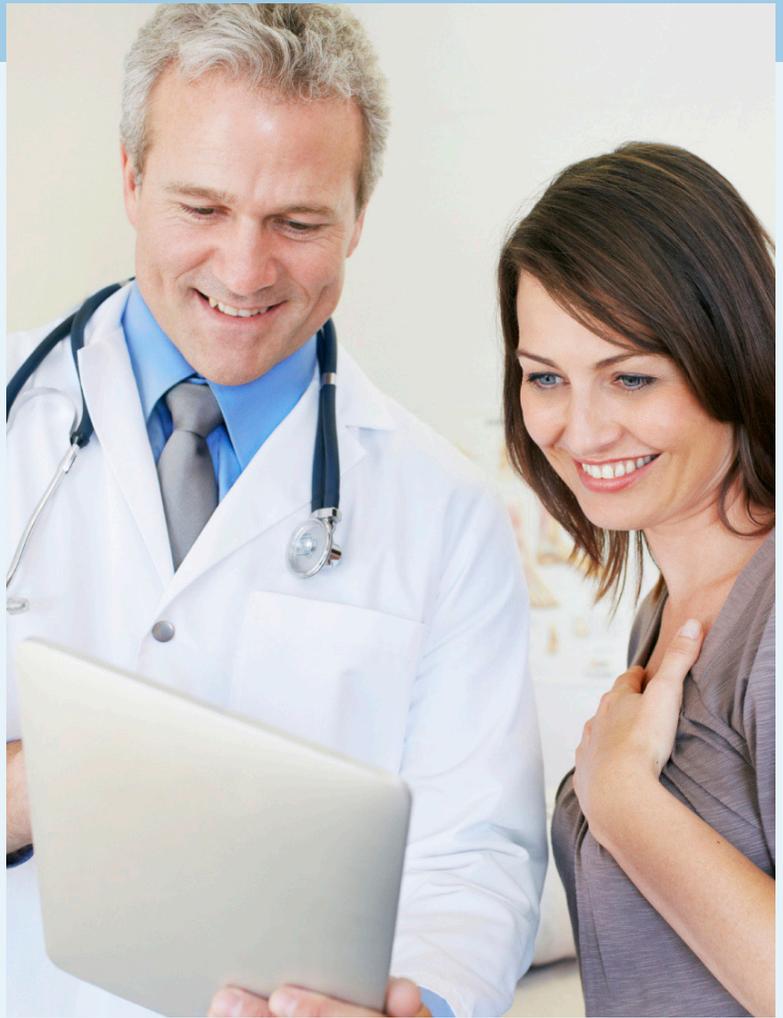
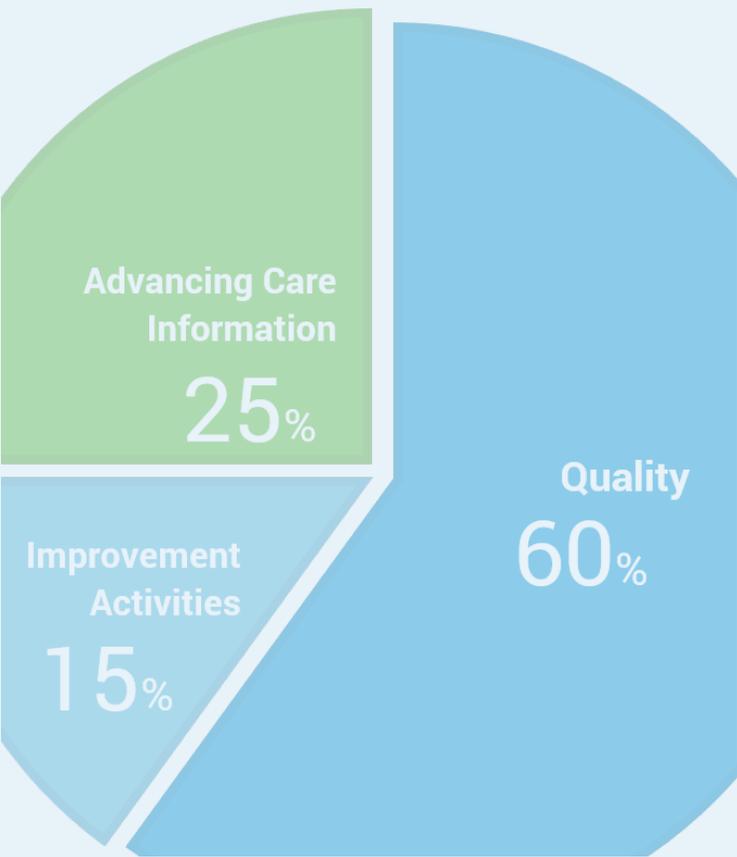


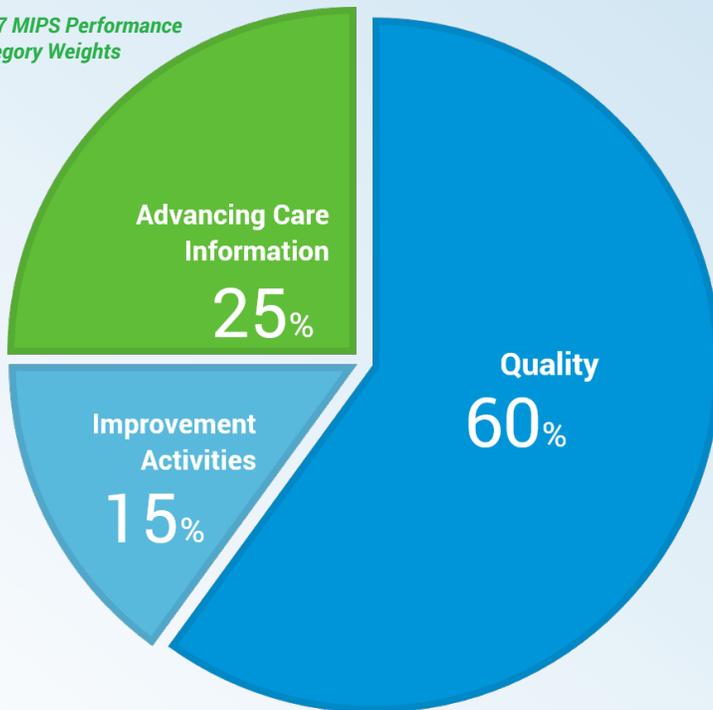
Maximize Your MIPS Revenue



MIPS Max™

SPHA has the expertise and solutions to ensure MIPS success

2017 MIPS Performance
Category Weights



The recent MACRA legislation and acceleration of value-based reimbursement require clinicians to fundamentally change the way they manage their practices and measure care delivery. The technology requirements to collect this data and report measures are quite substantial and burdensome for providers who need to focus on direct care and quality improvement. To avoid payment penalties and maximize revenue, providers need a technology partner who is expert at data extraction and measure submission. SPHA has decades of experience with healthcare measures and has been instrumental at empowering providers to improve outcomes and the patient experience while decreasing costs.

Contact info@sphanalytics.com for a free MIPS consultation and start maximizing your MIPS score today.

Partner with the Population Health Solution Experts

SPH Analytics has extensive expertise in population health solutions with more than 22 years of experience in healthcare measures and quality improvement.

- **Boost all 4 MIPS category scores:** Directly impact your Quality, Improvement Activities, Advancing Care Information, and Costs with SPHA's solution set.
- **Ongoing monitoring for improved score:** Continually track your progress with our guided analytics and intuitive dashboards so you can make targeted improvements before submissions.
- **Manage cost and resource use:** Use claims-based analytics to assess financial risk and high cost categories.
- **MIPS submissions:** We can submit MIPS reporting on your behalf and reduce your burden and workload.
- **Expert guidance:** With more than two decades of experience, we partner with our clients to provide expert guidance and valuable resources.
- **Multi-payer quality improvement:** Display measure performance across Medicare and non-Medicare patients to support all payer quality improvement initiatives. Custom measure build available.

MIPS Max™: Maximize Your MIPS Revenue

MIPS Max™ is a suite of solutions that can help you maximize your Medicare reimbursements and avoid the negative penalties from the new Merit-Based Incentive Payment System (MIPS). Our solutions help minimize workload and administrative burden, while enabling you to improve your MIPS Composite Performance Score (between 0 and 100). Depending on your readiness, MIPS Max can improve your scores in any one or all of the four MIPS categories: Quality, Improvement Activities, Advancing Care Information, and Cost.

Act now to ensure you capture every MIPS point to boost your composite score. Each year, CMS will set a new performance threshold (PT) number of points to avoid a negative payment adjustment. Each additional point above the PT earns higher incentives, and each point the final score is below the PT incurs proportional penalties. Therefore, every MIPS point translates directly into higher or lower reimbursement.

MIPS Penalty-Free Guarantee™

MIPS Eligible Clinicians can feel confident with our MIPS Penalty-Free Guarantee. With MIPS Max, clients will avoid any downward fee adjustments in 2019 from MIPS payment penalties.*

We guarantee it.



MIPS Max solutions for each performance category

	Quality	Advancing Care Information	Improvement Activities	Cost
2017 WEIGHT	60%	25%	15%	0%
DATA	EHR, Registry	EHR	EHR, Claims, Survey, Labs	Claims
SOLUTION	QCDR Plus™ <ul style="list-style-type: none"> Registry data or EHR data calculated measures Validation of disparate EHR system clinical data Library of measures to choose from Clinical Measure Dashboard with monthly data refresh Annual CMS submission of required 6x1 measures Bonus points for each measure utilizing electronic clinical quality measures (eCQMs) Installed quickly, minimal disruption View performance against benchmarks for goal setting Displays measure performance across Medicare and non-Medicare patients 	QCDR Plus <ul style="list-style-type: none"> Earn credit for Clinical Data Registry Reporting measure Earn 5% bonus for Advancing Care Information category Can submit Advancing Care data on behalf of providers/group Population Care™ <ul style="list-style-type: none"> Earn credit for Specialized Registry Reporting measure 	QCDR Plus <ul style="list-style-type: none"> Several opportunities to earn credit for MIPS Improvement activities when leveraging a QCDR Submit attestations for improvement activities on behalf of providers/groups Population Care <ul style="list-style-type: none"> Earn credit for two medium-weighted Improvement Activities in the Population Management category PCMH pre-validation solution (10 auto-credits) CAHPS® or Other Patient Surveys <ul style="list-style-type: none"> Earns credit for high-weighted Improvement Activity CG CAHPS Survey and Discharge Call Program <ul style="list-style-type: none"> Earn credit for two medium-weighted Improvement Activities in the Beneficiary Engagement category 	Financial Risk Analytics Optional Module <p>Financial risk analysis based on claims/administrative data powered by Milliman tools including:</p> <ul style="list-style-type: none"> Stratification of population risk to identify high risk/high cost groups Identify chronic condition groups and gain insights with Milliman Advanced Risk Adjusters (predictive analytics: risk of admit and ER visit) View monthly trends for per capita expenditures by beneficiary type and category Compare your PMPM costs to industry leader Milliman benchmarks Address increasing utilization rates by category (IP, OP, ED, Rx)

*With the MIPS Penalty-Free Guarantee™, SPHA will credit 2017 MIPS penalties to the client. The Guarantee is only available to new SPHA QCDR Plus™ clients. The Terms of the Guarantee must be incorporated in an executed agreement between Customer and SPHA. Other terms and conditions apply.

Quality: 60%

Clinical Quality Measure reporting is a significant component of value-based care, contributing 60% of the total 2017 MIPS Composite Performance Score. The new MIPS Quality category has replaced the previous Physician Quality Reporting System (PQRS), with more emphasis on performance compared to reporting. Better performance on quality measures means more MIPS points awarded.

SPH Analytics (SPHA) is a Qualified Clinical Data Registry (QCDR) that can validate and aggregate clinical data from multiple EHR systems and benchmark the data against other registry clients. The data collection process is streamlined to alleviate labor-intensive, manual processes for practices and providers. The solution helps providers gain visibility into their quality measure results throughout the year so proactive steps can help improve performance before annual submission to CMS. By monitoring and improving quality measure performance throughout the year, SPH Analytics' QCDR Plus™ helps providers avoid possible financial penalty by protecting revenue tied to performance reporting.

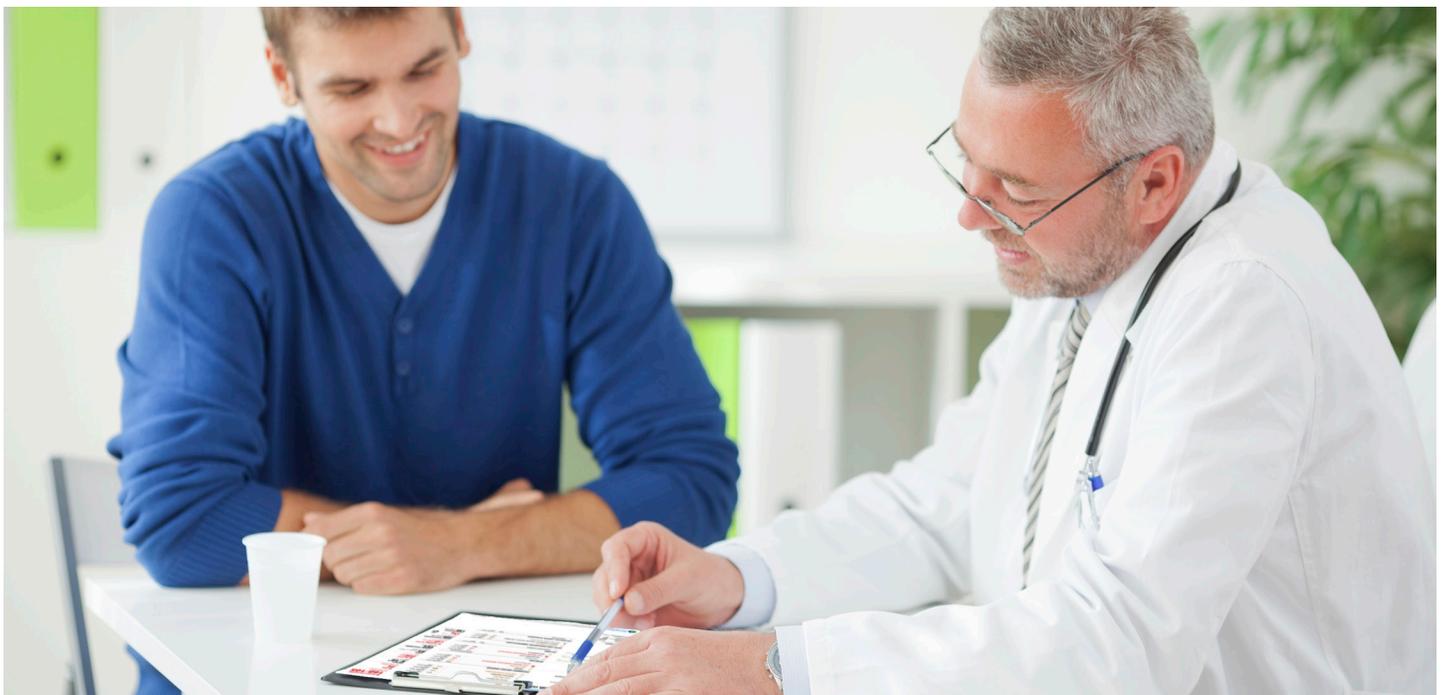
QCDR Plus features include:

- Collection and validation of data from various EHR systems
- Library of eQMs (electronic clinical quality measures) and registry-based measures to choose from
- Option to build new measures
- Clinical Measure Dashboard with data refreshed monthly or bimonthly
- Drill down to patient list to close care gaps and improve performance
- Annual CMS submission of quality measures (6 measures including 1 outcome)
- Trending against benchmarks and goals
- Bonus points in the MIPS Quality scoring section for eQMs gathered and reported via a QCDR
- Data submission to CMS for both MIPS Quality and Improvement Activity categories
- Displays measure performance across Medicare and non-Medicare patients

Advancing Care Information: 25%

The MIPS Advancing Care Information category is carried over from the EHR Incentive Program, aimed at increasing the adoption of CEHRT (certified electronic health record technology) among Medicare and Medicaid providers. The Advancing Care Information category measures the meaningful use of CEHRT.

Using SPHA's QCDR Plus to submit eQMs, providers can earn a 5% bonus in the Advancing Care category, as well as earn credit for the Clinical Data Registry Reporting measure. Our Population Care™ population health solution earns providers credit for the Specialized Registry Reporting measure.



Improvement Activities: 15%

The MIPS Improvement Activities category is a new concept under the Quality Payment Program. These activities have proven associations with better health outcomes, and clinicians can choose the most relevant activities. In 2017 there are more than 90 available improvement activities, and the category contributes 15% of the total MIPS Composite score. SPHA offers several solutions that can help clinicians earn maximum credit for the Improvement Activities category.

QCDR Plus

A QCDR can submit data for Improvement Activities on behalf of clinicians, but also leveraging a QCDR provides several opportunities to earn credit for Improvement Activities across several subcategories. SPH Analytics' QCDR Plus displays measure performance across Medicare and non-Medicare patients to support all payer quality improvement initiatives.



CAHPS® or Other Patient Surveys

SPHA holds multiple certifications for providing patient experience surveys for regulatory or elective purposes, including CAHPS for PQRS. SPH Analytics provides complete survey administration through our onsite call center and mail fulfillment facility, as well as innovative dashboard analytics for monitoring quality.

The CAHPS for MIPS Survey (anticipated to replace CAHPS for PQRS) consists of the core CAHPS Clinician & Group Survey developed by the Agency for Health Care Research (AHRQ), plus additional questions to meet CMS program needs. CAHPS for MIPS may count for either a MIPS Quality measure or an Improvement Activity, where it is counted as a high-weighted activity in the Patient Safety and Practice Assessment subcategory. When used for the Quality category, clinicians may report any five measures within MIPS, plus CAHPS for MIPS, to achieve the six measure requirement. Bonus points are awarded for reporting CAHPS data (or other patient experience measures).

Population Care

Population Care is a population health analytics platform that aggregates clinical data to create a primary care-based patient registry. The application is used to risk stratify the population and to monitor performance measures in near real-time. Population Care helps practices close care gaps with workflow tools and patient care summaries. It is the technology solution chosen by the largest Practice Transformation Network (The Consortium for Southeastern Hypertension Control - COSEHC™), funded by the CMS Transforming Clinical Practice Initiative (TCPI). Population Care can earn credit for two Population Health Improvement Activities: 1) Population empanelment and 2) Chronic care and preventative care management for empanelled patients. In addition, Population Care is a PCMH pre-validation solution that can earn ten auto-credits toward PCMH accreditation. Certified PCMHs receive full credit for the MIPS Improvement Activity category.

CG CAHPS Survey and Discharge Call Program

High quality and targeted patient experiences can help improve clinical outcomes. That is why there are more than 20 different MIPS Improvement Activities in the Beneficiary Engagement category.

SPHA's CG CAHPS Survey and Discharge Call Program can earn credit for two medium-weighted activities:

- 1) Regularly assess the patient experience of care through surveys, advisory councils, and/or other mechanisms and
- 2) Engage patients and families to guide improvement in the system of care.

Cost: 0%

The Cost category will become more important in future MIPS performance years and is already critical for ACOs and other integrated provider groups who are managing the total cost of their population. SPHA offers an optional [Financial Risk Analytics Module](#) that provides financial risk analysis based on claims/administrative data. Our advanced analytics are powered by Milliman tools which:

- Provide stratification of population risk to identify high risk/high cost groups
- Identify chronic condition groups and gain insights with Milliman Advanced Risk Adjusters (predictive analytics: risk of admit and ER visit)
- Display monthly trends for per capita expenditures by beneficiary type and category
- Compare your PMPM costs to industry leader Milliman benchmarks
- Address increasing utilization rates by category (IP, OP, ED, Rx)



Empowering Healthcare Transformation

SPH Analytics (SPHA) is a leader in population health management, providing best-in-class solutions and transformative technologies for provider, payer, and health networks. By providing powerful applications, analytics, healthcare surveys, call center services, and consulting, SPHA solutions lead the way for the next generation of healthcare. SPHA enables clients to increase member and patient satisfaction, improve population health, drive patient engagement, and reduce overall cost of care. SPHA solutions incorporate an engaging social-media style user experience, optimized for mobility and communication, to measure data, create easy-to-understand analytics, and empower action.

SPH Analytics is based in Alpharetta, GA, with offices in Branford, CT, San Francisco, CA, Nashville, TN, and Duluth, GA, and is a member of the \$3 billion Symphony Technology Group.



MEASURE



ANALYZE



TAKE ACTION



11545 Wills Road, Suite 100
Alpharetta, GA 30009
866-460-5681
info@SPHAnalytics.com

SPHAnalytics.com

