

## Quality Payment Program Hardship Exception Application for the 2017 Transition Year & Link to CMS Quality Info



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## Quality Payment Program Hardship Exception Application for the 2017 Transition Year Is Now Open

### *Clinicians Can Now Submit Quality Payment Program Hardship Exception Applications*

The Quality Payment Program Hardship Exception Application for the **2017 transition year** is now available on the [Quality Payment Program website](#).

MIPS eligible clinicians and groups may qualify for a reweighting of their Advancing Care Information performance category score to 0% of the final score, and can submit a hardship exception application, for one of the following specified reasons:

- Insufficient internet connectivity
- Extreme and uncontrollable circumstances
- Lack of control over the availability of Certified EHR Technology (CEHRT)

There are some MIPS eligible clinicians who are considered [Special Status](#), who will be automatically reweighted (or, exempted in the case of MIPS eligible clinicians participating in a MIPS APM) and do not need to submit a Quality Payment Program Hardship Exception Application.

### **About the Hardship Exception Application Process**

In addition to submitting an application via the [Quality Payment Program website](#), clinicians may also contact the Quality Payment Program Service Center and work with a representative to verbally submit an application.

To submit an application, you'll need:

- Your Taxpayer Identification Number (TIN) for group applications or National Provider Identifier (NPI) for individual applications;
- Contact information for the person working on behalf of the individual clinician or group, including first and last name, e-mail address, and telephone number; and
- Selection of hardship exception category (listed above) and supplemental information.

If you're applying for a hardship exception based on the Extreme and Uncontrollable Circumstance

category, you must select one of the following and provide a start and end date of when the circumstance occurred:

- Disaster (e.g., a natural disaster in which the CEHRT was damaged or destroyed)
- Practice or hospital closure
- Severe financial distress (bankruptcy or debt restructuring)
- EHR certification/vendor issues (CEHRT issues)

*Please note:* Once an application is submitted, you will receive a confirmation email that your application was submitted and is pending, approved, or dismissed. Applications will be processed on a rolling basis.

### **For More Information**

- Contact the Quality Payment Service Center at 1-866-288-8292 or TTY: 1-877-715-6222 or [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov).
- [Visit the Quality Payment Program website.](#)

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## **Explanation of Special Status Calculation**

The Centers for Medicare and Medicaid Services (CMS) has introduced new information on the [Quality Payment Program website](#) that indicates whether clinicians have “special status” and can therefore be considered exempt from the Quality Payment Program.

To determine if a clinician's participation should be considered as special status under the Quality Payment Program, CMS retrieves and analyzes Medicare Part B claims data. A series of calculations are run to indicate a circumstance of the clinician's practice for which special rules under the Quality Payment Program will affect the number of total measures, activities or entire categories that an individual clinician or group must report. These circumstances are applicable for clinicians in: Health Professional Shortage Area (HPSA), Rural, Non-patient facing, Hospital Based, and Small Practices.

For more information, please visit the [Quality Payment Program website](#).

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## **Now Available: Quality Payment Program Presentations from Recent Webinars**

### ***View Recent Quality Payment Program Webinar Recordings Online***

Were you unable to participate in a recent Quality Payment Program webinar?

There's good news: You can view webinar recordings, presentations, and transcripts on the [CMS Quality Payment Program Events webpage](#).

Recent Quality Payment Program webinars include:

- [Overview of MIPS for Small, Rural, and Underserved Practices](#) – 7/12/17
- [Quality Payment Program Year 2 Proposed Rule Listening Session](#) – 7/5/17
- [Proposed Rule for the Quality Payment Program Year Two](#) - 6/26/17
- [Quality Payment Program Participation Criteria Webinar](#) – 5/22/17
- [MIPS Group Participation](#) – 5/11/17
- [Listening Session: Cost Measure Development](#) – 4/5/17
- [MIPS Advancing Care Information Deep Dive Webinar](#) – 4/4/17
- [Virtual Groups in the Quality Payment Program](#) – 3/16/17

CMS encourages you to stay up to date on the Quality Payment Program by visiting the [website](#) regularly and subscribing to the Quality Payment Program listserv. To subscribe, visit the Quality Payment Program [website](#) and select “Subscribe to Email Updates” in the footer.

#### **For More Information**

If you have questions on other topics related to the Quality Payment Program, please contact the Quality Payment Program Service Center at [gpp@cms.hhs.gov](mailto:gpp@cms.hhs.gov) or 1-866-288-8292.

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## **Attend CMS Office Hours to Ask Questions about the Quality Payment Program NPRM**

Join CMS for an office hours session on **Wednesday, August 16** on the draft provisions included in the Quality Payment Program Year 2 Notice of Proposed Rulemaking (NPRM). CMS will provide a brief overview of the Quality Payment Program and address questions from attendees on the Year 2 NPRM.

#### **Webinar Details**

**Title:** Quality Payment Program Year 2 NPRM Office Hours Session

**Date:** August 16

**Time:** 12 - 1 pm ET

**Registration Link:** <https://engage.vevent.com/rt/cms/index.jsp?seid=845>

Space for this webinar is limited. Register now to secure your spot. After you register, you will receive a follow-up e-mail with step-by-step instructions about how to log-in to the webinar.

#### **For More Information**

CMS encourages participants to review the [proposed rule](#), [press release](#), and [fact sheet](#) prior to the webinar. Additional resources are also available on the [website](#).

The logo for the Quality Payment Program, featuring the text "Quality Payment PROGRAM" in white on a teal background. "Quality Payment" is in a larger font, and "PROGRAM" is in a smaller, all-caps font to the right.