American Association of Neuromuscular & Electrodiagnostic Medicine

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## **Quality Payment Program: 2025 Updates**

The Centers for Medicare and Medicaid Services (CMS) released its updates to the Quality Payment Program (QPP), along with the Physician Fee Schedule (PFS), in early November 2024 for the 2025 performance year.

In the CY 2025 PFS Final Rule, the focus has remained on the continued development and maintenance of the Merit-based Incentive Payment System (MIPS) Value Pathways (MVPs), including 6 new MVPs that will be available for 2025 that relate to ophthalmology, dermatology, gastroenterology, pulmonology, urology and surgical care. Additionally, limited modifications were made to the previously finalized MVPs, including the consolidation of 2 neurology-focused MVPs into a single neurological MVP.

Below are some of the other key QPP policies that CMS finalized for CY 2025.

• Overall maintenance of stability in 2025

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- Performance category weights remain unchanged from 2024:
  - Quality: 30%
  - Cost: 30%
  - Promoting Interoperability: 25%
  - Improvement Activities: 15%
- Maintaining current performance threshold policies, leaving the threshold set at 75 points
- Maintaining 75% data completeness criteria threshold through 2028 performance period/2030 MIPS payment year.
- Changes to **Quality Performance Category** 
  - Finalized a total of 195 quality measures for 2025 performance period
    - Addition of 7 new quality measures
    - Substantive changes to 66 quality measures
    - Removal of 10 quality measures
  - Removal of the 7-point cap for scoring certain topped out quality measures, including Quality ID 477: Multimodal Pain Management
- Changes to **Cost Performance Category** 
  - Added 6 new episode-based cost measures, and finalized substantive updates to 2 existing episode-based cost measures (see <u>2025 QPP Fact Sheet</u> for details)
  - Finalized proposal to revise cost measure scoring methodology to assess clinical cost of care more appropriately, and reduce the negative impact resulting from CMS errors in cost measure calculations
- Changes to Improvement Activity (IA) Performance Category
  - Removed IA activity weighting ("high" and "medium"), streamlining reporting for the performance category
- Changes to Promoting Interoperability (PI) Category
  - Finalized minimum criteria for a qualifying data submission (i.e., eligible for scoring)
    - This will mitigate negative scoring impact on clinicians due to unintentional submissions without data that can be scored
  - Updated policy governing the treatment of multiple data submissions
    - CMS will calculate a score for each data submission and assign the highest score

To review your MIPS eligibility or learn more about the QPP, visit: <u>https://qpp.cms.gov</u>. You may also reach out to the policy department at AANEM with QPP questions at: <u>policy@aanem.org</u>.