

Preparing for 2023: Informational Benchmarks for MIPS Quality Measures (Deciles 1 and 2)

Overview

As finalized in the [Calendar Year 2022 Physician Fee Schedule Final Rule](#), we're removing the 3-point scoring floor for quality measures that can be reliably scored against a benchmark **beginning with the 2023 performance period**.

Beginning with the 2023 performance period, quality measures that meet case minimum and data completeness requirements will earn:

- Between 2 and 2.9 points if the measure's performance rate falls in Decile 2.
- Between 1 and 1.9 points if the measure's performance rate falls in Decile 1.
- 1 point if the measure's performance rate falls below Decile 1.

To help MIPS eligible clinicians prepare for scoring in the 2023 performance period, we're providing the performance rates associated with Deciles 1 and 2 for measures with a historical benchmark for the 2022 performance period.

- Deciles 1 and 2 are being provided now for **informational purposes only**.
- The quality measures you submit for the 2022 performance period **won't** be scored against Deciles 1 and 2.
- These **aren't** the quality measure benchmarks for the 2023 performance period. (2023 historical benchmarks will be calculated from the data submitted for the 2021 performance period.)

Contact the Quality Payment Program

Contact the Quality Payment Program Service Center at 1-866-288-8292 or by email at: QPP@cms.hhs.gov (Monday-Friday 8 a.m.- 8 p.m. ET). Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Version History

Date	Change Description
4/26/2022	Original version

