
MACRA & The Quality Payment Program – Acronym Listing

[CMS-5517-P] - Medicare Program; Merit-Based Incentive Payment System (MIPS) and Alternative Payment Model (APM) Incentive under the Physician Fee Schedule, and Criteria for Physician-Focused Payment Models

ABC™ - Achievable Benchmark of Care
ACA - The Patient Protection and Affordable Care Act
ACO - Accountable Care Organization
APM - Alternative Payment Model
BPCI - Bundled Payments for Care Improvement
CAH - Critical Access Hospital
CAHPS - Consumer Assessment of Healthcare Providers and Systems
CEHRT - Certified EHR technology
CFR - Code of Federal Regulations
CHIP - Children's Health Insurance Program
CJR - Comprehensive Care for Joint Replacement
CMMI - Center for Medicare & Medicaid Innovation (Innovation Center)
CPIA - Clinical Practice Improvement Activity
CPR - Customary, Prevailing, and Reasonable
CPS - Composite Performance Score
CPT - Current Procedural Terminology
CQM - Clinical Quality Measure
EHR - Electronic health record
EP - Eligible professional
FFS - Fee-for-Service
FQHC - Federally Qualified Health Center
HIE - Health Information Exchange
HIPAA - Health Insurance Portability and Accountability Act of 1996
HITECH - Health Information Technology for Economic and Clinical Health
HPSA - Health Professional Shortage Area
HHS - Department of Health & Human Services
HRSA - Health Resources and Services Administration
IT - Information technology
MACRA - Medicare Access and CHIP Reauthorization Act of 2015
MEI - Medicare Economic Index
MIPAA - Medicare Improvements for Patients and Providers Act of 2008
MIPS - Merit-Based Incentive Payment System
MLR - Minimum Loss Rate
MSPB - Medicare Spending per Beneficiary

MSR - Minimum Savings Rate
MUA - Medically Underserved Area
NPI - National Provider Identifier
OCM - Oncology Care Model
ONC - Office of the National Coordinator for Health Information Technology
PECOS - Medicare Provider Enrollment, Chain, and Ownership System
PFPMs - Physician Focused Payment Models
PFS - Physician Fee Schedule
PHS - Public Health Service
PQRS - Physician Quality Reporting System
QCDRs - Qualified Clinical Data Registries
QP - Qualifying APM Professional
QRDA - Quality Reporting Document Architecture
QRUR - Quality and Resource Use Reports
RBRVS - Resource-Based Relative Value Scale
RHC - Rural Health Clinic
RVU - Relative Value Unit
SGR - Sustainable Growth Rate
TCPI - Transforming Clinical Practice Initiative
TIN - Tax Identification Number
VM - Value-based Payment Modifier
VPS - Volume Performance Standard