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nThrive named 2017 CMS-Approved Qualified Data Registry

Health care organizations can utilize nThrive's registry to report Merit-Based Incentive Payment System (MIPS) scores and monitor ongoing performance through analytics solutions

Orlando, Florida, June 25, 2017 – nThrive™ has been designated as a [Qualified Registry for MIPS data submission](#) by the Centers for Medicare and Medicaid Services (CMS). As a qualified registry, nThrive will report MIPS measures and monitor activities data on behalf of individuals and groups for the 2017 performance period. Unlike most registries or Electronic Health Record (EHR) systems, nThrive can report on all registry-eligible quality measures, activities and performance categories.

“nThrive is unlike typical MIPS registries, many of which are retrofitted Physician Quality Reporting System (PQRS) solutions,” said Tom Ormondroyd, President, Education and Analytics. “Our analytics-driven applications and processes can help providers go beyond compliance to gain a competitive advantage under evolving Quality Payment Program (QPP) thresholds and requirements.”

CMS estimates that approximately 90 percent of eligible clinicians, including providers and provider groups, will choose the MIPS reporting path in 2017 to comply on MACRA*, versus an Advanced Alternative Payment Model (APM) such as a Medicare Shared Savings Program through an Accountable Care Organization (ACO). With the start of the Q1 2018 data submission period fast approaching, eligible clinicians (ECs) should be preparing to report now.

While many providers found success under the former PQRS and Meaningful Use program, significant differences with MIPS mean that past performance does not equal future success. For example, ECs are now required to compete against industry benchmarks to achieve a positive adjustment or even just avoid a negative adjustment; participation alone is no longer “good enough.”

“MIPS is a very dynamic program with increased risk over time and shifting expectations,” explained nThrive Senior Consultant Moshe Starkman. “What was good enough for a positive incentive in payment year 2019 could be a negative adjustment by 2021. In other words, maintaining a status quo approach to reporting could result in a plus one percent adjustment in 2019 but a negative three to four percent in 2021. Successfully navigating MIPS requires a level of performance and scoring comprehension that most practices and even health systems are not adequately prepared for.”



The [nThrive MIPS Registry](#) solution takes a holistic approach to quality reporting. Built on top of nThrive's world-class performance analyzer engine, nThrive provides health care providers with the knowledge and tools necessary to identify areas of opportunity essential to thriving under the Quality Payment Program's multi-faceted requirements.

About nThrive

From Patient-to-PaymentSM, nThrive provides all the technology, advisory expertise, services, analytics and education programs health care organizations need to thrive in the communities they serve. Formerly known as MedAssets, Precyse and Equation, nThrive is built on a legacy of excellence. Most recently, nThrive acquired two leaders in their fields, Adreima – a provider of patient-centered, clinically integrated revenue cycle services that help patients find coverage and meet their financial obligations – and e4e Healthcare Services – a business process outsourcing company. The five organizations together combine top talent and capabilities in the health care industry into a single enterprise. For more information, please visit

www.nThrive.com.

*The Medicare Access & Chip Reauthorization Act (MACRA) was passed in 2015. The CMS Quality Payment Plan (QPP) is the initiative to implement the MACRA law, with MIPS as the predominant scoring path.