



## **Attestation for Aexcel Clinical Quality criteria**

NOTE: Please attest to all that apply in this section.

### **CMS Meaningful Use 2 standards**

I certify that the practice meets the Meaningful Use 2 standards as required by the CMS Electronic Health Records (EHR) Incentive Program.

### **Participation in the reporting to MIPS either through a registry or directly**

I certify that at least 50% of the specialists in the practice have completed participation in the Merit-based Incentive Payment System (MIPS) program as outlined by CMS for 2017, 2018, 2019.

### **Practice Improvement Module (PIM) activity / Maintenance of Certification (MOC)**

#### **Part 4 completion**

I certify that at least 50 percent of the eligible specialists in the practice participated in the Practice Improvement Module (PIM) activity / Maintenance of Certification (MOC) Part 4 program. PIMs activity must have been completed on or after September 1, 2018 to meet this clinical performance measure. If a physician's board does not identify PIMs as part of their board specific MOC, a physician may still qualify by completing MOC Part 4 requirements within their specialty. MOC Part 4 activity is a PIM designated by the appropriate board.

### **NCQA Recognition Programs**

I certify NCQA recognition for one of the following programs:

Diabetes (Provider Attestation)

Heart/Stroke (Provider Attestation)

PCSP (Patient-Centered Specialty Practice) (Provider Attestation)

**I attest that the information provided in this form is true, accurate and complete.**

**Physician/Practice name:**

**Tax ID number:**

**Address:**

**Date:**

**Name (Print):**

**Signature:**

**E-mail:**

