Quality Payment
PROGRAM

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

Small Practice Countdown to 2026 Performance Year (PY) Data Submission

JAN–MAR 2026

CHECK CURRENT ELIGIBILITY STATUS
Enter 10-digit National Provider Identifier (NPI) in the QPP Participation Status Tool; questions, see 2026 Small Practice Eligibility and Participation FAQs (PDF, 517KB).

SELECT REPORTING OPTION
Review the 2026 MIPS Reporting Options At-A-Glance for Small Practices (PDF, 436KB)

CHOOSE PARTICIPATION OPTION
Visit the Participations Options Overview webpage to learn more (individual, group, virtual group*, subgroup**, or APM Entity)

SELECT & PERFORM 2026 PY MEASURES & ACTIVITIES
(Jan 1–Dec 31, 2026)
Quality: Select measures & collect data; begin submitting via Medicare Part B Claims (if applicable) now; refer to 2026 Part B Claims Reporting Quick Start Guide (PDF, 2MB). If you need help with reporting Medicare Part B claims measures, contact the QPP Service Center.
Improvement Activities: Select & perform activities for a continuous 90-day period***

Cost: CMS collects & evaluates your data***

OPTIONAL REPORTING:
Promoting Interoperability: Automatically reweighted to 0% unless data is reported. If reporting, collect data using an Electronic Health Record (EHR) that meets the certification criteria at 45 CFR 170.315 for 180 continuous days (or more)

**Only available for traditional MIPS*
***Only available for MVP reporting*
****Traditional MIPS and MVP reporting*

APR–JUN 2026

CONTINUE TO PERFORM YOUR QUALITY MEASURES & IMPROVEMENT ACTIVITIES
If you use an EHR, review your practice's first quarter quality measure performance rates & adjust, as needed

ARE YOU PLANNING TO REPORT AN MVP?
You must register in advance to report an MVP for individuals, groups, subgroups, and APM Entities. Registration is open ***April 1 – November 30, 2026.*** If reporting Medicare Part B claims measures, be sure to include the MVP identifier on at least one claim.

NOT SURE HOW TO START REPORTING AN MVP?
Download the MVP Transition Toolkit for Small Practices (ZIP) for more information.

ARE YOU PLANNING TO ADMINISTER THE CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS (CAHPS) FOR MIPS SURVEY?
Registration information for groups, subgroups, virtual groups, and APM Entities that would like to administer the CAHPS for MIPS Survey is open ***April 1st - June 30th, 2026***

DID YOU EXPERIENCE AN EXTREME & UNCONTROLLABLE CIRCUMSTANCES (EUC) IN PY 2026?
The EUC exception application is now open and closes ***December 31st, 2026***

JUL–SEP 2026

CONTINUE TO PERFORM YOUR QUALITY MEASURES & IMPROVEMENT ACTIVITIES
If you use an EHR, run a report in your EHR to review your practice's first and second quarter quality measure performance rates and adjust, as needed.

CREATE/ MAINTAIN HARP ACCOUNT ACCESS
If you haven't already, create a HCQIS Access Roles and Profile system (HARP) account and review your QPP role. Refer to QPP Access User Guide (ZIP, 5MB).

ARE YOU REPORTING PROMOTING INTEROPERABILITY DATA?
If you choose to report Promoting Interoperability data, ***July 5th*** is last day to start a 180-day performance period.

OCT–DEC 2026

COMPLETE QUALITY MEASURES & IMPROVEMENT ACTIVITIES
The last 90-day period to complete improvement activities (and Promoting Interoperability measures, if reporting)

VERIFY YOUR FINAL ELIGIBILITY STATUS
In **December 2026** check the QPP Participation Status Tool to confirm that you remain eligible for MIPS and a payment adjustment

ARE YOU PLANNING TO REPORT AN MVP?
You must register in advance to report an MVP for individuals, groups, subgroups, and APM Entities., Registration is open ***April 1st – November 30th, 2026.*** If reporting Medicare Part B claims measures, be sure to include the MVP identifier on at least one claim.

DID YOU EXPERIENCE AN EXTREME & UNCONTROLLABLE CIRCUMSTANCES (EUC) IN PY 2026?
The EUC exception application closes ***December 31, 2026, at 8:00 P.M. ET***

JAN–MAR 2027

TIME TO SUBMIT 2026 PERFORMANCE YEAR DATA
Sign into the QPP website with your HCQIS Access Roles and Profile (HARP) credentials

Begin submission process early to ensure ample time to address any issues

SAVE RECORDS VALIDATING THE QUALITY MEASURES REPORTED AND IMPROVEMENT ACTIVITIES PERFORMED
Retain your documentation for 6 years.

Review the 2026 MIPS Data Validation Criteria for more information about the recommended documentation for quality measures and each improvement activity.

LAST DAY TO SUBMIT 2026 PERFORMANCE YEAR DATA
March 31, 2027, at 8:00 P.M. ET

Interested in learning more?
- ❑ Visit the Small Practices webpage on the QPP website for more resources. Be sure to bookmark this page.
- ❑ Sign up for our monthly QPP Small Practices Newsletter.

CONTACT US WITH QUESTIONS ABOUT QPP
QPP@cms.hhs.gov | 1-866-288-8292 (TRS: 711) | Monday–Friday, 8 a.m.–8 p.m. ET (Best time to call is before 10 a.m. ET or after 2 p.m. ET.)