

Quality Payment Program Performance Information Published on Medicare Care Compare Performance Year 2018

Overview

The Centers for Medicare & Medicaid Services (CMS) is publicly reporting performance year (PY) 2018 Quality Payment Program performance information on [Medicare Care Compare](#) and in the [Provider Data Catalog](#) (PDC)¹.

The [Quality Payment Program](#), established by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), is a quality payment incentive program that recognizes physicians and other eligible clinicians based on value and outcomes in two tracks: the Merit-based Incentive Payment System (MIPS) or Alternative Payment Models (APMs). Publicly reporting 2018 Quality Payment Program performance information will help people with Medicare make informed health care decisions and incentivize clinicians and groups to maximize their performance.

Publicly Reported 2018 Quality Payment Program Performance Information






What information is displayed on profile pages?

Both clinicians and groups who are enrolled in Medicare have profile pages on Care Compare. Profile pages include general information useful to Medicare patients and caregivers, such as clinician specialties, practice locations, and phone numbers. We recently added certain 2018 Quality Payment Program performance information to clinician and group profile pages to help Medicare patients and caregivers make informed decisions about the clinicians and groups they visit (Figure 1).

¹ Previously known as Physician Compare and the Downloadable Database.

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Table 1: PY 2018 performance information publicly reported on clinician and group profile pages

Performance Information Type	Public Reporting Display	Icon Displayed	# Reported on Clinician Profile Pages	# Reported on Group Profile Pages
MIPS Quality Measures	Measure-level star rating		77	84
Qualified Clinical Data Registry (QCDR) Measures	Measure-level star rating		9	9
Consumer Assessment for Healthcare Provider and Systems (CAHPS) for MIPS Summary Survey Measures	Top-box percent performance scores	%	NA	7
Promoting Interoperability Measures	Measure-level star rating		13	13
Promoting Interoperability Attestations	Checkmark attestation		10	10
Improvement Activities	Checkmark attestation		113	113

Only performance information that meets the established public reporting standards are selected for public reporting on profile pages.

What are the established public reporting standards?

All doctor and clinician performance information on Care Compare and in the PDC must meet the established public reporting standards, except as otherwise required by statute (§414.1395(b)). To be included in the PDC, performance information must:

- Be statistically valid, reliable, and accurate;
- Be comparable across collection types; and
- Meet the minimum reliability threshold, as determined by statistical testing.

To be included on Care Compare profile pages, performance information must also resonate with Medicare patients and caregivers, as determined by user testing.

Additionally, quality and cost measures in their first two years of use are not publicly reported (§414.1395(c)).

What information is available in the Provider Data Catalog?

The primary audiences for the [PDC](#) are clinicians, groups, and third-party data users (e.g. third-party intermediaries, researchers).

The PDC contains 2018 Quality Payment Program performance information. The PDC will include all performance information from Care Compare profile pages, additional MIPS performance information

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that was not selected for public reporting on profile pages, and MIPS final scores and performance category scores (Quality, Promoting Interoperability, Improvement Activities).

The PDC also includes utilization data, which provides information on services and procedures provided to Medicare beneficiaries by clinicians, a subset of the 2017 clinician utilization data, and a link to the 2018 Quality Payment Program aggregate data.

How is Alternative Payment Model (APM) performance information publicly reported?

Information about 2018 APM participation is publicly reported on Care Compare in the following ways:

- [Next Generation](#) or [Medicare Shared Savings Program \(Shared Savings Program\)](#) ACOs have profile pages with measure-level performance scores for a subset of their quality measures;
- Groups that participated in Shared Savings Program ACOs have an indicator of APM participation on their group profile page and are also linked to their affiliated ACO profile pages;
- Clinicians that participated in the APMs listed below have an indicator on their profile pages.
 - Bundled Payments for Care Improvement (BPCI) [Model 2](#), [Model 3](#), and [Model 4](#)
 - [Accountable Health Communities Model](#)
 - [Bundled Payment for Care Improvement Advanced Model](#)
 - [Comprehensive Joint Replacement \(CJR\)](#)
 - [Comprehensive End-Stage Renal Disease Care Model \(ERSD\)](#)
 - [Comprehensive Primary Care Plus \(CPC+\)](#)
 - [Frontier Community Health Integration Project Demonstration](#)
 - [Independence at Home Demonstration](#)
 - [Initiative to Reduce Avoidable Hospitalization Among Nursing Facility Residents: Phase 2](#)
 - [Maryland All Payer Hospital Model](#)
 - [Medicare Shared Savings Program Accountable Care Organizations](#)
 - [Million Hearts: Cardiovascular Disease Risk Reduction](#)
 - [Next Generation ACO Model](#)
 - [Oncology Care Model](#)
 - [Transforming Clinical Practice Initiative](#)

Clinicians who are Qualifying Participants in Advanced APMs do not have performance information publicly reported on Care Compare. All other APM participants may have performance information publicly reported on Care Compare.

Learn More

Visit the [Physician Compare Initiative page](#) to find more resources about public reporting. For more information about the specific performance information selected for public reporting, download the following documents:

- [PY 2018 Group Performance Information](#)
- [PY 2018 Clinician Performance Information](#)
- [PY 2018 ACO Performance Information](#)

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- [PY 2018 Measures Activities Plain Language Crosswalk](#)

Additional information about publicly reported star ratings can be found in the [PY 2018 Clinician Star Rating Cut-offs](#) and the [PY 2018 Group Star Rating Cut-offs](#) documents.

Get in Touch

For questions or comments about public reporting for doctors and clinicians, contact PhysicianCompare-Helpdesk@AcumenLLC.com.

For questions or comments about the Quality Payment Program, contact the Quality Payment Program Help Desk at QPP@cms.hhs.gov.