



## Steps for Eligible Professionals to Access Their Physician Quality Reporting Initiative (PQRI) Feedback Reports – JA0830

**Note:** MLN Matters® article SE0830 was revised to modify certain language to keep the article current.

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**Contractors Affected**

- Part A/B Medicare Administrative Contractors (A/B MACs)
- Medicare Carriers

**Provider Types Affected** This information is directed to **individual eligible professionals** who reported PQRI quality measures data to Medicare and will access their reports. **Note:** These eligible professionals cannot have staff or others register to access their PQRI Feedback Reports.



MLN Matters® article SE0830 provides information regarding the steps a provider must take to register in the Centers for Medicare & Medicaid Services (CMS) security system known as the Individuals Authorized Access to CMS Computer Services (IACS).

**Provider Needs to Know...**

**Note:** MLN Matters® article SE0830 does **not apply** to (1) professionals who have reassigned all of their Medicare benefits to one or more group practices, or (2) to group practices that are limited liability companies or corporations, including those that are solely owned. Group practices that are limited liability companies or corporations, even those that are solely owned, must register in the IACS as "organizations." Registering as an organization follows a delegated authority model that begins with registration by a security official that represents the organization (the group practice) and requires submission of Internal Revenue Service documents.

- PQRI Feedback Reports are available on a secure website to those eligible professionals who reported PQRI quality measures in a given year.
- For access to certain CMS provider Internet applications, including PQRI Feedback Reports, individual professionals must first register in IACS. IACS registration provides them with a User ID and password that may be used to access CMS applications such as the PQRI Feedback Reports.
- Providers should only register in IACS once. As a result of that single registration, they are able to access certain other CMS Internet applications in addition to the PQRI Feedback Reports.

#### **Protecting the Provider ID and Password**

- The IACS User ID and password gives providers access to confidential or sensitive Medicare information. Providers must safeguard their IACS User ID and password once they receive them.
- They were assigned to the provider, based on information they furnished to IACS. Providers can not share them with others or give others permission to use them.
- Providers should not write their User ID and password on papers or documents that others may see. As a security measure, providers are **required to change their IACS password after they receive it, and do so every sixty days thereafter.** (User IDs cannot be changed.)

#### **Steps for “Individuals” to Access their PQRI Feedback Reports**

##### **Step 1: Determine How to Register**

- Individual professionals should register under the “Individual Practitioner” role in IACS to access their PQRI Feedback Report.
- Registering in IACS as an individual practitioner for purposes of accessing the PQRI application means that the individual is enrolled in Medicare with a private practice that is a sole proprietorship business, with or without employees, and is paid directly by Medicare.

##### **Step 2: Update Medicare Enrollment Information if Necessary Before Attempting to Register in IACS.**

- CMS will match the individual’s IACS registration information with the Medicare provider enrollment data before allowing them to use their IACS User ID and password to access the PQRI application.
- Therefore, the individual should update their Medicare enrollment information if necessary before attempting to register in IACS.

##### **Medicare Enrollment Application (CMS-855)**

1. If the provider has **not** submitted a Medicare enrollment application (CMS-855) since November 2003, the provider will need to do so before registering in
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IACS.

- For more information about the Medicare enrollment process, providers may see <http://www.cms.hhs.gov/MedicareProviderSupEnroll/> on the CMS website.
  - To facilitate enrollment into the Medicare program or to update enrollment with Medicare, the provider should review the following downloadable file at <http://www.cms.hhs.gov/MedicareProviderSupEnroll/downloads/Enrollmenttips.pdf> before submitting an enrollment application to a MAC or their Medicare Carrier.
2. If the provider has submitted an enrollment application since November 2003, they should proceed to Step 3.
  3. If the provider is unsure when the enrollment application was submitted, they may wish to contact their Medicare Carrier or MAC.

**Note:** There are avoidable mistakes that can lead to an inability to match IACS data with provider enrollment data. When registering in IACS, providers should always enter information as it was entered on their Medicare enrollment form (855). Common avoidable reasons for mismatched data are as follows:

- Use of first name initial instead of first name;
- Use of nicknames (e.g., Ken vs. Kenneth);
- Use of different first names (e.g., Randal vs. David);
- Middle names included as part of the first name;
- Misspellings in names (e.g., Ray vs. Roy and Smythe vs. Smyth);
- Special characters in the last name (e.g., dashes or apostrophes);
- Generational and/or certification/degree information in last name field; and
- Inclusion or exclusion of hyphen in name fields.

### Step 3: Register as an Individual Practitioner in IACS

- Providers should go to <https://applications.cms.hhs.gov> on the CMS website to register.

#### Confirmation of Provider Identity

- The IACS registration process confirms the provider's identity by checking the data provided against Social Security Administration records.
  - Once the identity information is confirmed and the registration process is complete, the provider will receive an IACS User ID and password, each in a separate e-mail.
  - The providers will, however, be in a "pending status" until their Medicare enrollment has been confirmed.
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## Confirmation of Provider Medicare Enrollment

- CMS will match the provider IACS registration information against Medicare enrollment data available after November of 2003.
- Confirmation occurs within one business day of receipt of the provider's IACS User ID and password.
- If the provider's Medicare enrollment is confirmed, they will receive a third e-mail from CMS that states, "You are currently registered in IACS as an Individual Practitioner. IACS has confirmed your Medicare enrollment. Additional provider applications may now be available to you. Please sign into your IACS account and review the options available to you under 'Modify Profile' for more information".

### Note: 24 Hours Registration Process

- If the provider's Medicare enrollment is confirmed, the IACS registration process will only take 24 hours.
- If the provider does **not** get an e-mail confirming their Medicare enrollment, within one business day of receiving their IACS User ID and password, the provider should take the following actions:
  - Update their Medicare 855 enrollment form, if the provider has not submitted an enrollment application since November of 2003;
  - Follow the instructions in Step 2;
  - Complete a CMS-588 "Electronic Funds Transfer (EFT) Authorization Agreement" if the provider is not receiving Medicare payments via EFT; and
  - If the provider has been approved to participate in Medicare since November 2003, has been billing the Medicare program, and has an active enrollment with Medicare, the provider should contact their carrier or MAC.

## Additional Information on Registering in IACS

Providers may find additional information on registering in IACS, in the *Individual Practitioner New User Registration Quick Reference Guide* at [http://www.cms.hhs.gov/IACS/04\\_Provider\\_Community.asp#TopOfPage](http://www.cms.hhs.gov/IACS/04_Provider_Community.asp#TopOfPage) on the CMS website.

### Step 4: Request a PQRI User Role

- Following receipt of their IACS User ID and password and a third e-mail confirming their Medicare Enrollment, the provider should request a PQRI User Role.
  - Once the enrollment confirmation e-mail referenced in Step 3 is received, the provider should go to the IACS site at <https://applications.cms.hhs.gov> on the CMS website and do the following:
    - Read the contents of the CMS Applications Portal Warning/Reminder screen;
    - Click the "Enter CMS Applications Portal" button at the bottom of the screen to enter the CMS Applications Portal;
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- Click the "Account Management" tab at the top of the screen on the CMS Applications Portal Introduction page;
  - Click the "My Profile" link on the Account Management page;
  - Login using their IACS User ID and password;
  - Click the "Modify Account Profile" link on the My Profile page;
  - Select "Modify Provider Profile" from the Select Action list box on the Modify Account Profile page under Access Request if this is their first time requesting access to an application via IACS;
  - Select "Add Application" from the Select Action list box if their profile is already associated to other applications that use IACS; and
  - Select the "PQRI User" role.

#### Step Five: Enter PQRI Application

- A provider may access their PQRI Feedback Report by going to <http://www.qualitynet.org/pqri> using their IACS User ID and password if they have:
  - Reported PQRI quality measures;
  - An IACS account; and
  - An established PQRI User role.

#### IACS and PQRI Help Desk Support

- For help with access and registration to IACS, providers may contact the External User Services (EUS) Help Desk.
  - The EUS Help Desk may be reached by e-mail at [EUSSupport@cqi.com](mailto:EUSSupport@cqi.com) or by phone on 1-866-484-8049 or TTY/TDD on 1-866-523-4759.
  - The hours of operation are Monday through Friday 7AM to 7PM EST.
- For help accessing the PQRI system and questions on their Feedback Report, providers may contact the PQRI Help Desk.
  - The PQRI Help may be reached on 866-288-8912 or via e-mail at [qnetsupport@sdps.org](mailto:qnetsupport@sdps.org) on the Internet.

#### PQRI Incentive Payments and Applied Offset Status

- For questions concerning the status of PQRI incentive payments and any offset applied, providers should contact their carrier or MAC provider's call center.
  - The *Provider Call Center Toll Free Numbers Directory* is available for download at [http://www.cms.hhs.gov/MLNGenInfo/01\\_Overview.asp](http://www.cms.hhs.gov/MLNGenInfo/01_Overview.asp) on the CMS website.
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**Background**

- The Tax Relief and Health Care Act of 2006 required the establishment of a physician quality reporting system, including an incentive payment for eligible professionals who satisfactorily report data on quality measures for covered services furnished to Medicare beneficiaries during the second half of 2007 (the 2007 reporting period).
  - For the 2009 PQRI, the Medicare, Medicaid, and State Children's Health Insurance Program Extension Act of 2007 required the Secretary of Health and Human Services to select measures for 2009 through rulemaking, and to establish alternative reporting criteria and alternative reporting periods for reporting on a group of measures, or measures groups, and for registry-based reporting.
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**Operational**

N/A

**Impact**

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**Reference  
Materials**

The related MLN Matters® article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0830.pdf> on the CMS website.

For details on registering as an IACS "organization," providers should view MLN Matters® article SE0831 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0831.pdf> on the CMS website.

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