I. Introduction

In **December 2012**, fifty-four large medical group practices participating in the fee-for-service (FFS) Medicare Physician Quality Reporting System (PQRS) via the Group Practice Reporting Option (GPRO) web-based interface received the 2011 Quality Resource Use Reports (QRURs) for medical practice groups (the "Group QRURs"). In mid-2013, CMS made available to the same groups the 2011 Supplemental QRURs. The 2011 Supplemental QRURs used the first version of the CMS Episode Grouper to construct episodes of care and attribute them to medical group practices.

The aim of the **2012 Supplemental QRURs** is to provide information that can support medical group practices in efforts to improve the efficiency of medical care provided to the Medicare FFS patients they treat. The reports provide an overall assessment of a medical group practice's costs for several important episodes of care and provide detailed information that can help identify sources of substantial variation from national averages. The **2012 Supplemental QRURs** will be available for medical group practices with 100 or more Eligible Professionals (EPs). More information on 2012 Supplemental QRURs can be found at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Episode-Costs-and-Medicare-Episode-Grouper.html.

The 2012 Supplemental QRURs and the **Drill Down Tables** can be downloaded and exported to PDF and Excel format respectively. This Quick Reference Guide illustrates how to access and download 2012 Supplemental QRURs and Drill Down Tables from the CMS Enterprise Portal.[1]

II. Getting Started

Authorized representatives of medical group practices with 100 or more EPs can access the 2012 Supplemental QRURs Reports and Drill Down Tables at https://portal.cms.gov using an Individuals Authorized Access to the CMS Computer Services (IACS) account with one of the following group-specific Physician Value (PV)-PQRS System roles:

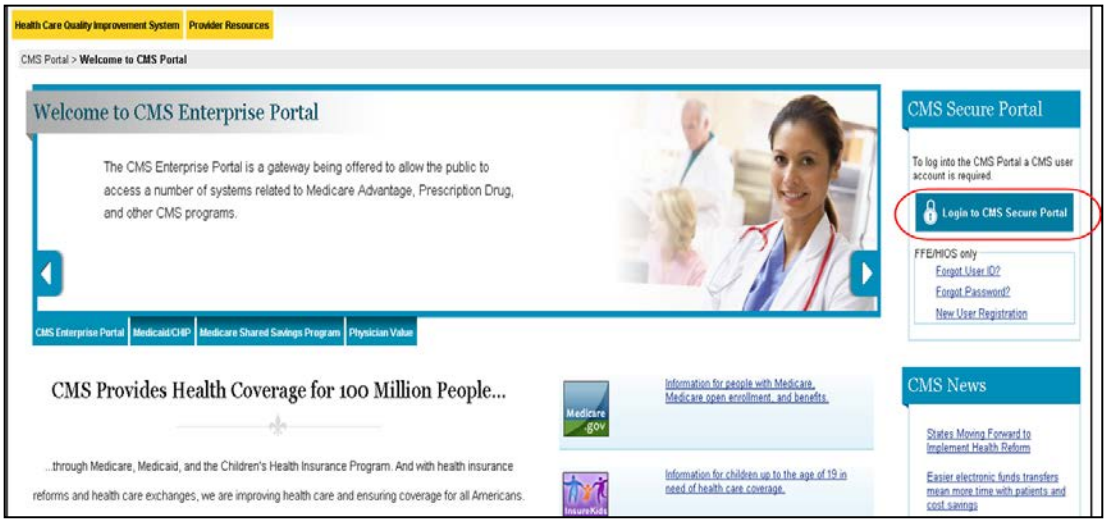
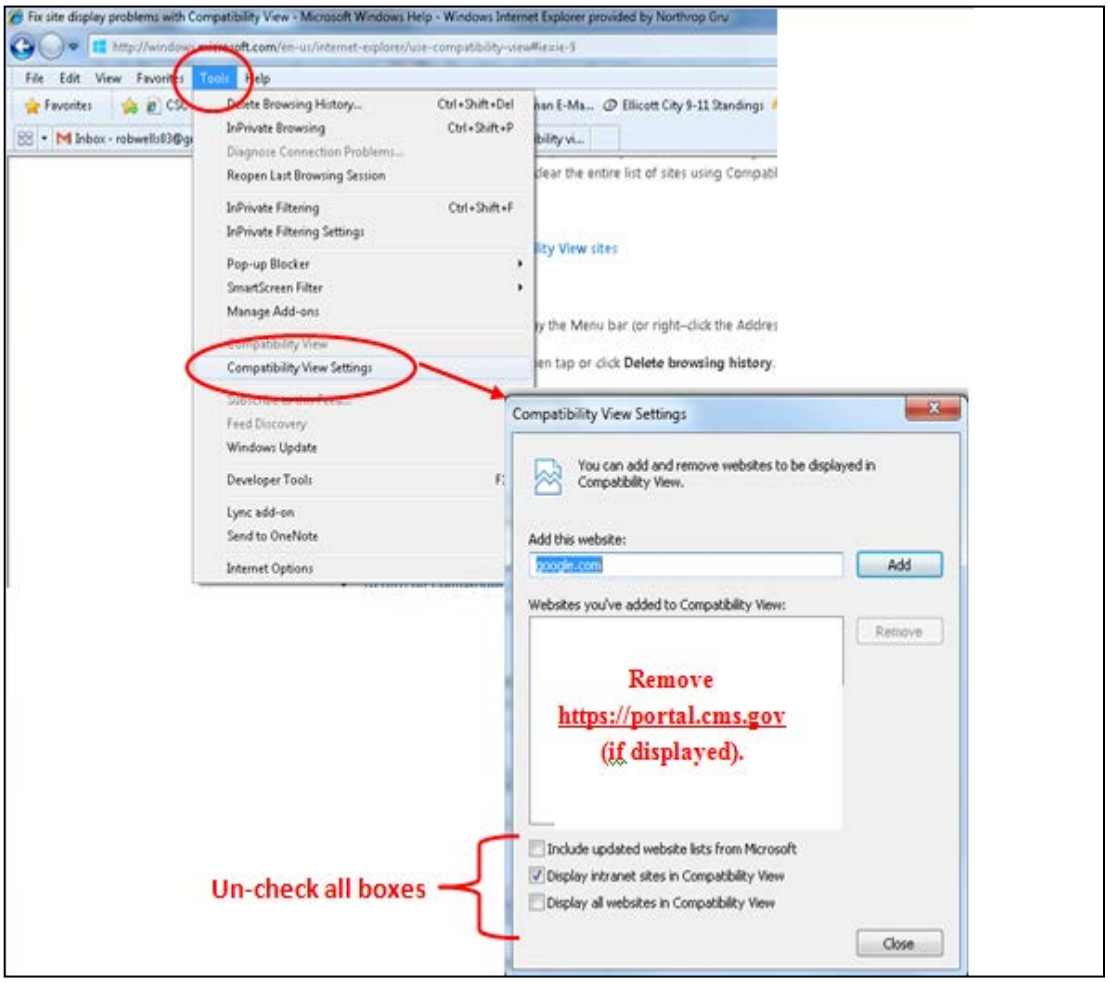
- PV-PQRS Group Security Official (primary or back-up)
- PV-PQRS Group Representative

Authorized representatives of groups must sign up for a new IACS account or modify an existing account at https://applications.cms.hhs.gov. Quick reference guides that provide step-by-step instructions for requesting each PV-PQRS System role for new or existing IACS account are available at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Self-Nomination-Registration.html.

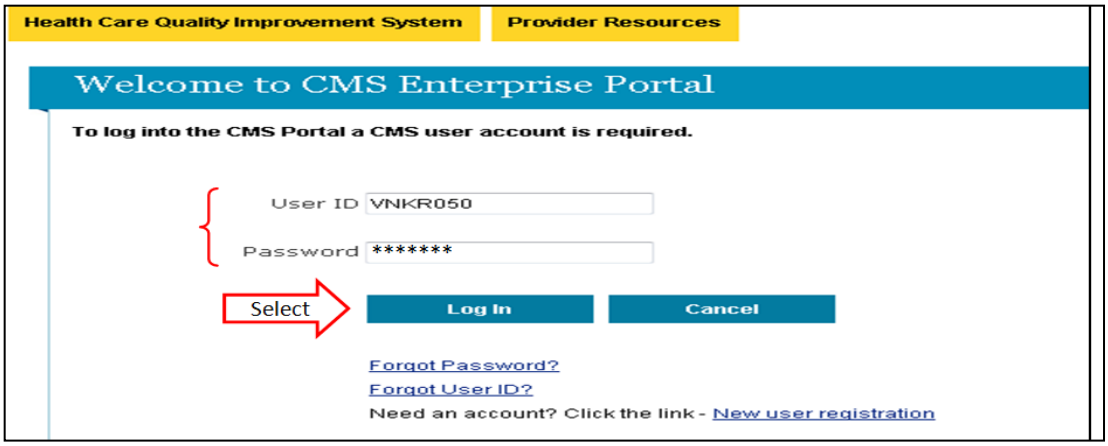
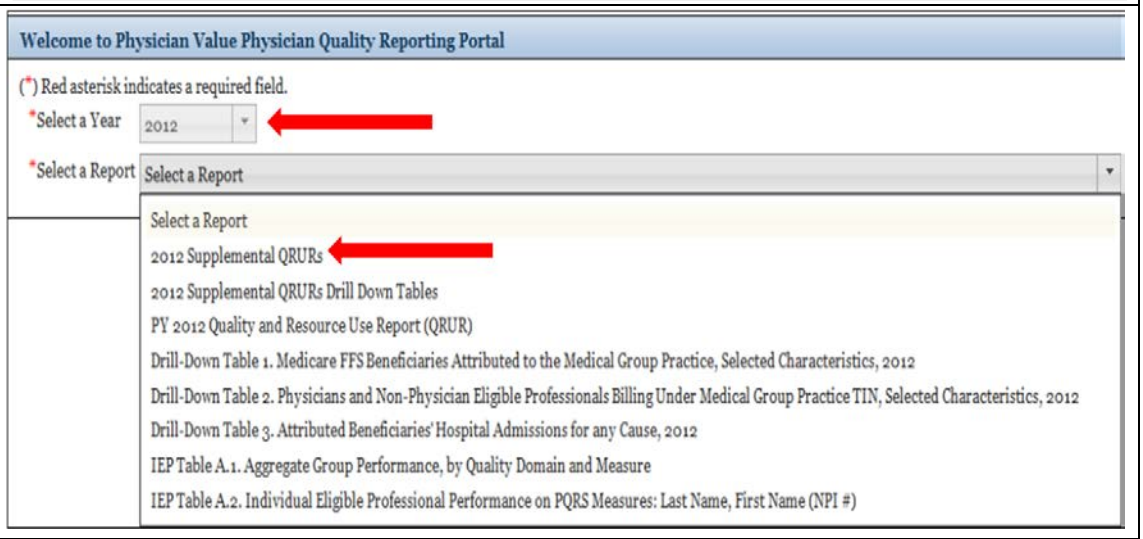
- If a group has already registered and selected its 2013 PQRS group reporting mechanism in the PV-PQRS System, then that same person who registered the group can access the group's 2012 Supplemental QRUR using their IACS User ID and password.
- If a group does not yet have an authorized representative with an IACS account, then one person representing the group must sign up for an IACS account with the primary Group Security Official role.
- If a group has a representative with an existing IACS account, but not one of the three group-specific PV-PQRS System roles listed above, then ensure that the account is still active and then add a group-specific PV-PQRS System role to that person's existing IACS account. To ensure the IACS account is still active, contact Quality Net at:
    - Phone: (866) 288-8912 (TTY 1-877-715-6222)
    - Fax: (888) 329-7377
    - Email: qnetsupport@sdps.org

[1] The source of the information herein: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Episode-Costs-and-Medicare-Episode-Grouper.html

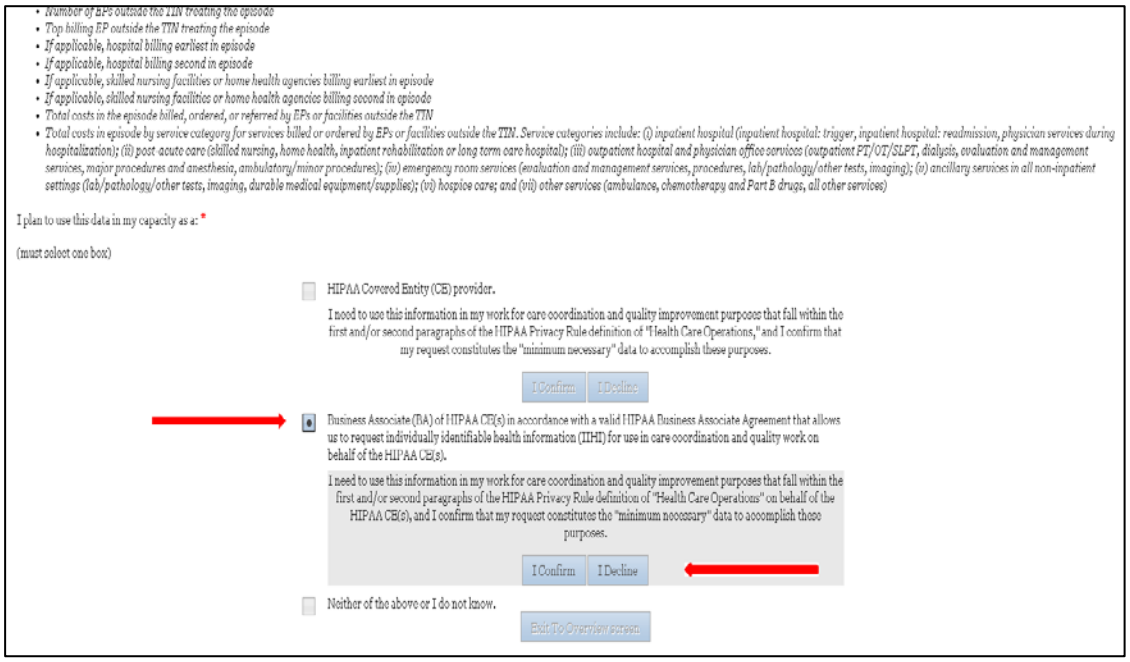
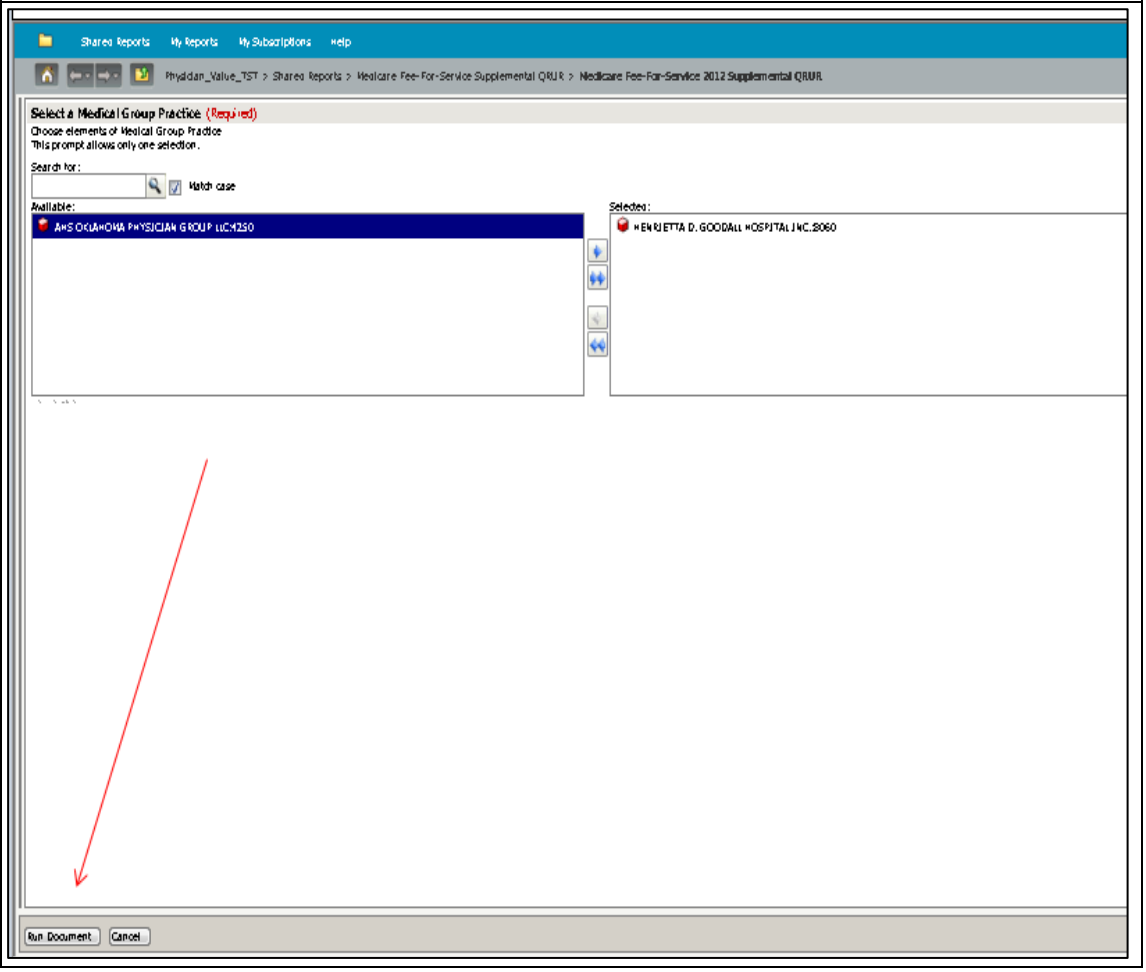
III. Access a Group Practice's 2012 Supplemental QRUR

Steps	Screenshots
1. Go to https://portal.cms.gov and select **Login to CMS Secure Portal**. **Note:** The CMS Enterprise Portal supports the following internet browsers: • Internet Explorer 8 • Internet Explorer 9 • Mozilla-Firefox • Chrome • Safari Enable Javascript and adjust any zoom features to ensure you are not seeing the screen in too wide of a view.	
Troubleshooting If you are not using one of the supported browsers or having trouble viewing the CMS Enterprise Portal using Internet Explorer 9: • Ensure the browser is open. • Press the **Alt** key to display the **Menu bar** (or right–click the **Address bar** and then select **Menu bar**). • Select **Tools** on the **Menu bar.** • Select **Compatibility View Settings**. • Remove the CMS Portal web address if it appears in the "**Websites you've added to Compatibility View"** box. • Un-check all of the boxes below "**Websites you've added to Compatibility View"**. • Close the **Compatibility View Settings** box. • Close the current browser session. • Open a new browser session.	

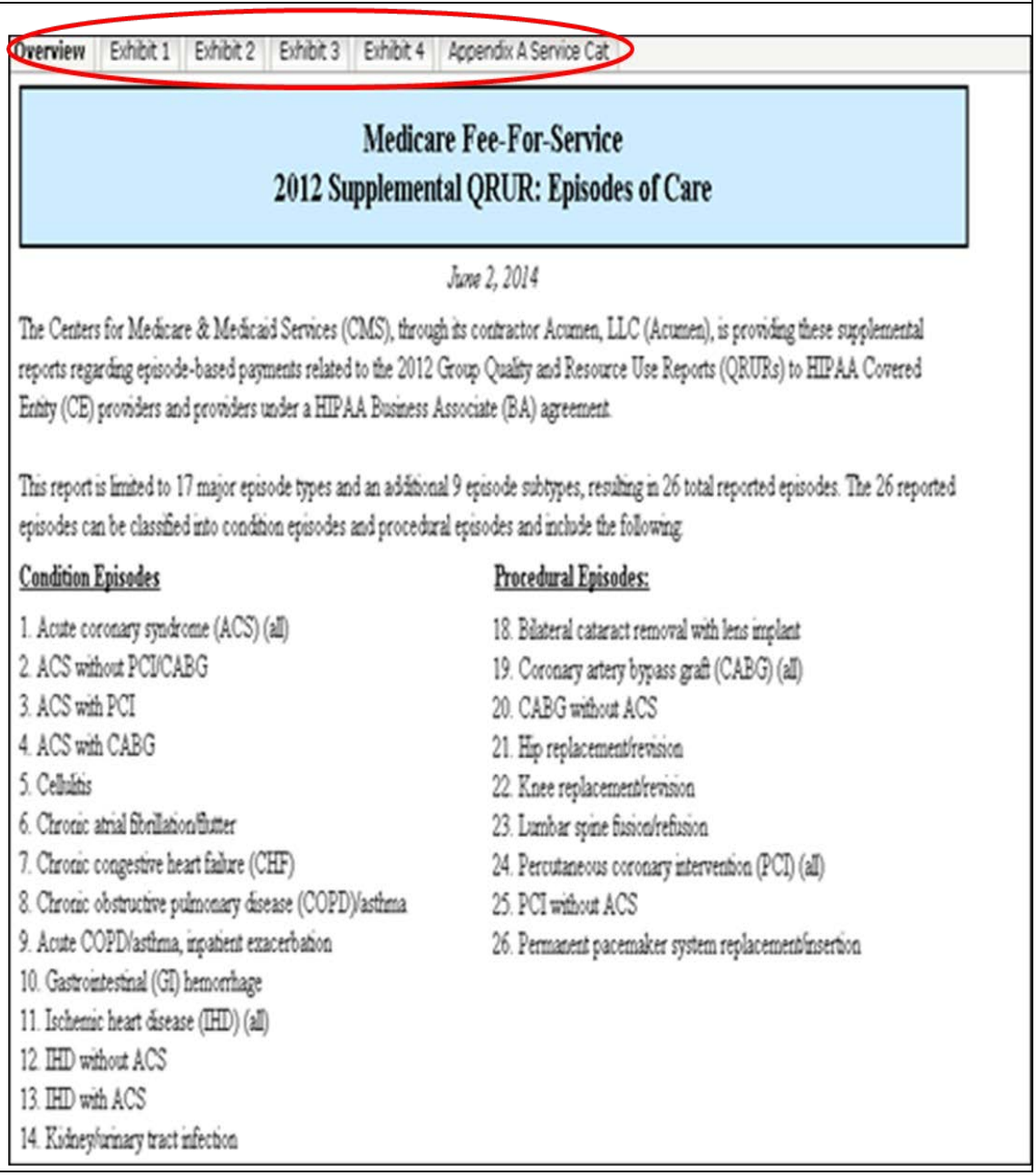
If you have questions about the 2012 Supplemental QRUR, or need assistance accessing the reports, please contact the Physician Value Help Desk by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screenshots
• Go to https://portal.cms.gov and select **Login to the CMS Enterprise Portal**.	
2. After accepting the **Terms and Conditions**, enter your IACS User ID and Password in the **Welcome to CMS Enterprise Portal** screen. Select **Login** to continue.	
3. Click the **PV-PQRS** tab at the top of the screen, and then select the **QRUR-Reports** option from the dropdown menu.	
4. Select year **(2012)** from the 'Select a Year' drop down menu, and then select report **(2012 Supplemental QRURs)** from the 'Select a Report' dropdown menu. **Note:** If you don't see the **2012 Supplemental QRUR** in the dropdown menu: • Verify that you are logged in with the appropriate role. • Verify that you have selected the Year 2012.	

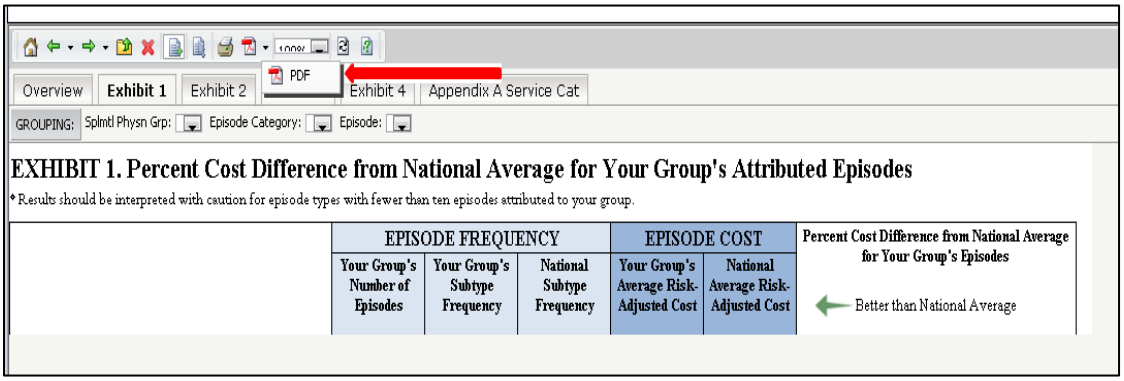
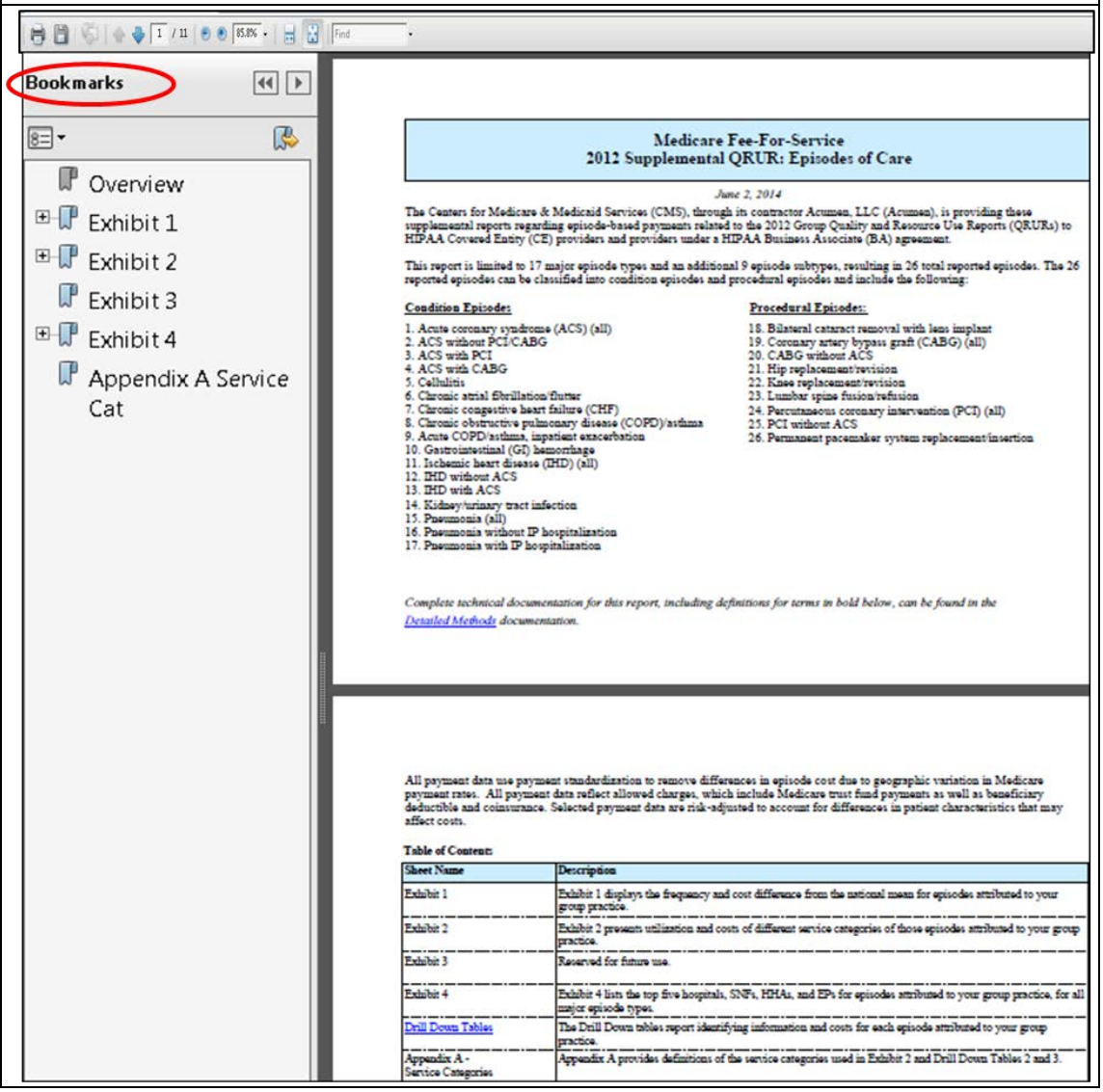
If you have questions about the 2012 Supplemental QRUR, or need assistance accessing the reports, please contact the Physician Value Help Desk by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screenshots
5. Read the **Attestation Message** and make the appropriate attestation selection. • Select **one** of the options under "**I plan to use this data in my capacity as a**:" • Then, click **I Confirm** to continue. **Note:** If you select "Neither of the above or I do not know" the option to Exit to the Overview screen will be enabled.	
6. You are now in the **MicroStrategy Web Platform.** The screen shows the group practice(s) associated with your IACS account. Choose one **Medical Group Practice** from the **Available** group practice section: • Select a group name and either double click the mouse or click the arrow button to move the practice from **'Available'** to **'Selected'.** • You can also filter the list of **Available** Medical Group Practices by entering the name or last 4 digits of a TIN in the **Search for** field. • Click **Run Document**. You will need to wait several seconds while the system generates your Supplemental QRUR Report. **Note:** Select only one Medical Group Practice each time you attempt to retrieve a **2012 Supplemental QRUR**.	

If you have questions about the 2012 Supplemental QRUR, or need assistance accessing the reports, please contact the Physician Value Help Desk by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	**Screenshots**
7. The 2012 Supplemental QRURs Report is displayed within the MicroStrategy Web Platform. The section that appears first is **Overview.** • Click on any of the section tabs at the top of the screen to navigate to different sections/exhibits of the report. **Note:** After you click on a section tab, you will need to wait several seconds for the section to appear on the screen. • The Supplemental QRUR Report contains the following sections under the Table of Content: - Exhibit 1 - Exhibit 2 - Exhibit 3 - Exhibit 4 - Drill Down Tables - Appendix A The following are the hyperlinks on the Overview Page: • Selecting Detailed Methods will navigate the user to the 'Episode Costs and the CMS Episode Grouper for Medicare' in a new webpage. • Selecting Drill Down Tables will allow a user to generate Drill Down Tables.	 Overview Exhibit 1 Exhibit 2 Exhibit 3 Exhibit 4 Appendix A Service Cat **Medicare Fee-For-Service** **2012 Supplemental QRUR: Episodes of Care** *June 2, 2014* The Centers for Medicare & Medicaid Services (CMS), through its contractor Acumen, LLC (Acumen), is providing these supplemental reports regarding episode-based payments related to the 2012 Group Quality and Resource Use Reports (QRURs) to HIPAA Covered Entity (CE) providers and providers under a HIPAA Business Associate (BA) agreement. This report is limited to 17 major episode types and an additional 9 episode subtypes, resulting in 26 total reported episodes. The 26 reported episodes can be classified into condition episodes and procedural episodes and include the following: **Condition Episodes** 1. Acute coronary syndrome (ACS) (all) 2. ACS without PCI/CABG 3. ACS with PCI 4. ACS with CABG 5. Cellulitis 6. Chronic atrial fibrillation/flutter 7. Chronic congestive heart failure (CHF) 8. Chronic obstructive pulmonary disease (COPD)/asthma 9. Acute COPD/asthma, inpatient exacerbation 10. Gastrointestinal (GI) hemorrhage 11. Ischemic heart disease (IHD) (all) 12. IHD without ACS 13. IHD with ACS 14. Kidney/urinary tract infection **Procedural Episodes:** 18. Bilateral cataract removal with lens implant 19. Coronary artery bypass graft (CABG) (all) 20. CABG without ACS 21. Hip replacement/revision 22. Knee replacement/revision 23. Lumbar spine fusion/refusion 24. Percutaneous coronary intervention (PCI) (all) 25. PCI without ACS 26. Permanent pacemaker system replacement/insertion

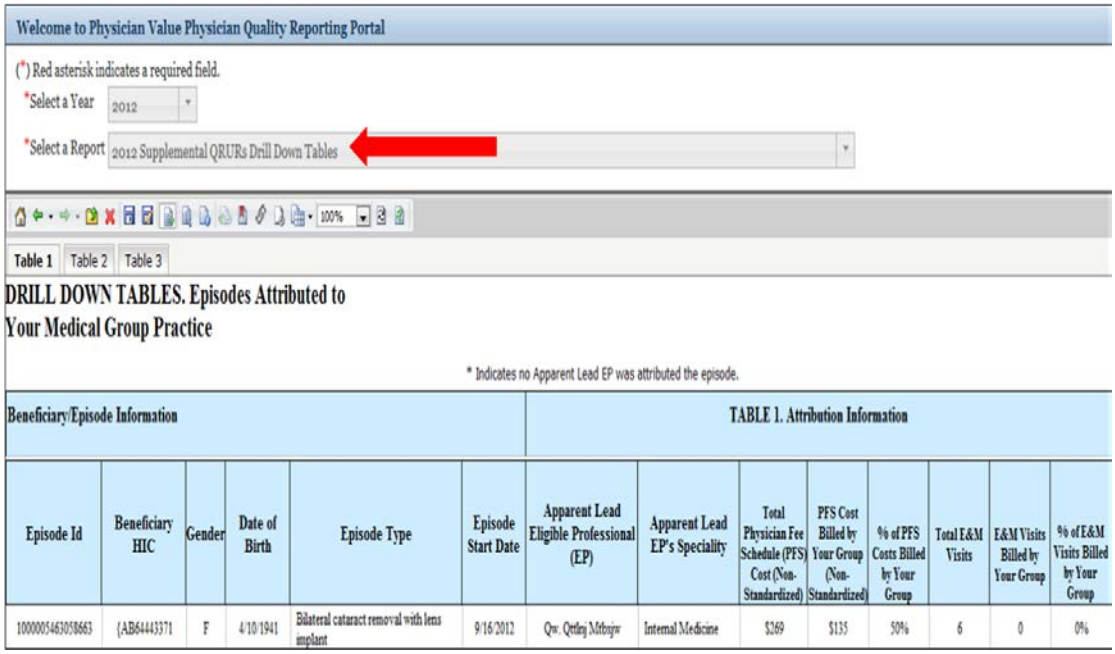
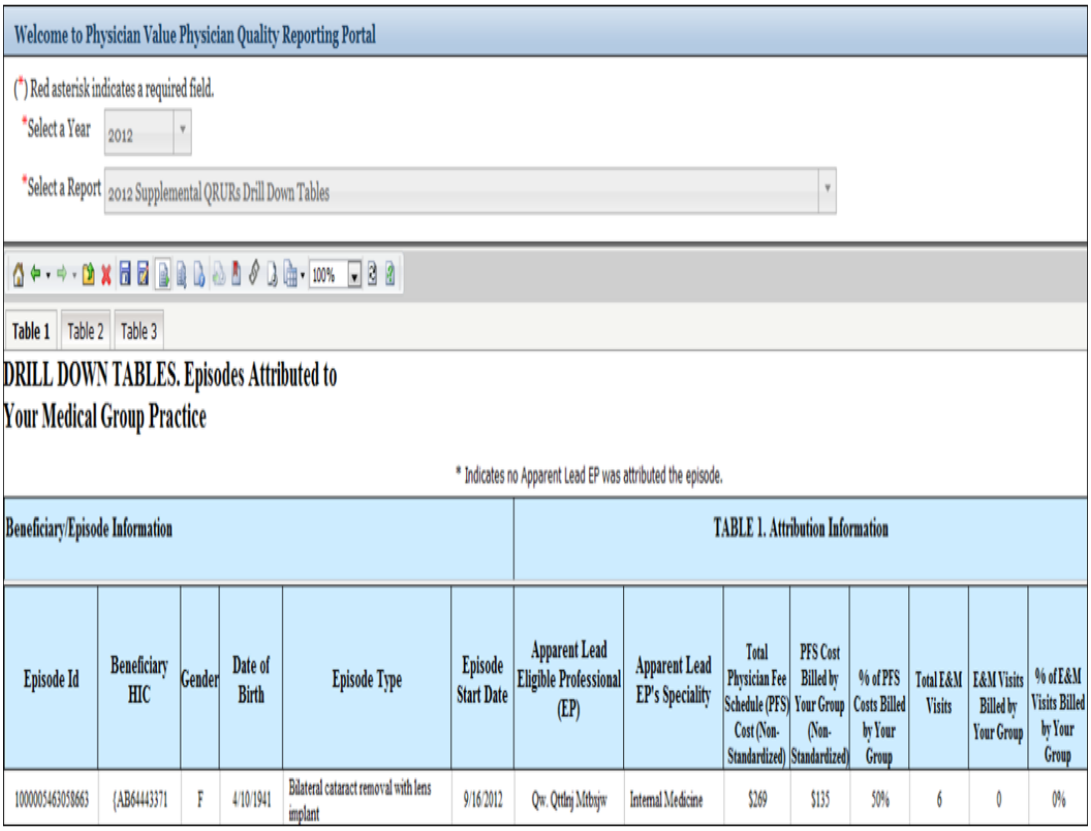
IV. View and Print the 2012 Supplemental QRUR as a PDF Document

Steps	Screenshots
1. Click the **Export** button on the MicroStrategy Toolbar and select **PDF**. Click **OK** in the **Export Options** window.	
2. The 2012 Supplemental QRUR is exported to **PDF** format. • Select any of the **Bookmarks** to navigate to a different section of the 2012 Supplemental QRUR. • Select the **Print** button on the Toolbar to print the 2012 Supplemental QRUR.	

If you have questions about the 2012 Supplemental QRUR, or need assistance accessing the reports, please contact the Physician Value Help Desk by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

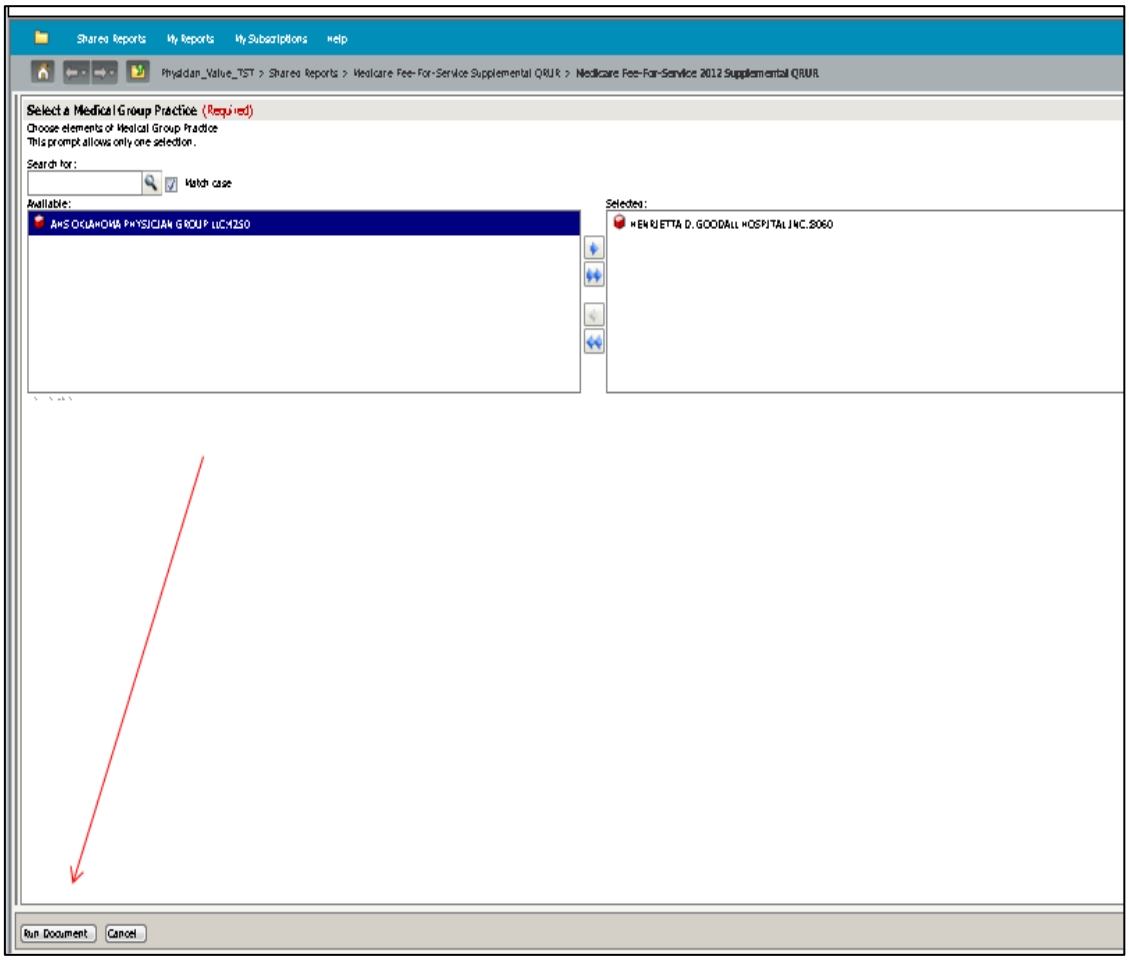
V. Access Drill Down Tables

A. Access Drill Down Tables from the QRUR Reports Tab.

Steps	Screenshots
1. Follow **Steps 1-3** as described in **Section III** of this quick reference guide. **Notes:** • In the **Reports** dropdown menu, select **Drill Down Tables**.	 Welcome to Physician Value Physician Quality Reporting Portal (*) Red asterisk indicates a required field. *Select a Year 2012 *Select a Report 2012 Supplemental QRURs Drill Down Tables Table 1 Table 2 Table 3 DRILL DOWN TABLES. Episodes Attributed to Your Medical Group Practice * Indicates no Apparent Lead EP was attributed the episode. Beneficiary/Episode Information | TABLE 1. Attribution Information Episode Id | Beneficiary HIC | Gender | Date of Birth | Episode Type | Episode Start Date | Apparent Lead Eligible Professional (EP) | Apparent Lead EP's Speciality | Total Physician Fee Schedule (PFS) Cost (Non-Standardized) | PFS Cost Billed by Your Group (Non-Standardized) | % of PFS Costs Billed by Your Group | Total E&M Visits | E&M Visits Billed by Your Group | % of E&M Visits Billed by Your Group 1000005463058663 | {AB64443371 | F | 4/10/1941 | Bilateral cataract removal with lens implant | 9/16/2012 | Qw. Qttlnj Mtbxjw | Internal Medicine | $269 | $135 | 50% | 6 | 0 | 0%
2. **Drill Down Tables** are displayed within the MicroStrategy Web Platform. The **Drill Down Tables** are opened in an **Excel** file. The following information is displayed: • **Beneficiary/Episode Information** • **Table 1:** Attribution and Total Cost Information • **Table 2:** Breakdown of Episodes Costs from Claims Billed, Ordered, or Referred by EPs within your Medical Group Practice • **Table 3:** Breakdown of Episodes Costs from Claims Billed, Ordered, by EPs or Facilities Outside your Medical Group Practice	 Welcome to Physician Value Physician Quality Reporting Portal (*) Red asterisk indicates a required field. *Select a Year 2012 *Select a Report 2012 Supplemental QRURs Drill Down Tables Table 1 Table 2 Table 3 DRILL DOWN TABLES. Episodes Attributed to Your Medical Group Practice * Indicates no Apparent Lead EP was attributed the episode. Beneficiary/Episode Information | TABLE 1. Attribution Information Episode Id | Beneficiary HIC | Gender | Date of Birth | Episode Type | Episode Start Date | Apparent Lead Eligible Professional (EP) | Apparent Lead EP's Speciality | Total Physician Fee Schedule (PFS) Cost (Non-Standardized) | PFS Cost Billed by Your Group (Non-Standardized) | % of PFS Costs Billed by Your Group | Total E&M Visits | E&M Visits Billed by Your Group | % of E&M Visits Billed by Your Group 1000005463058663 | {AB64443371 | F | 4/10/1941 | Bilateral cataract removal with lens implant | 9/16/2012 | Qw. Qttlnj Mtbxjw | Internal Medicine | $269 | $135 | 50% | 6 | 0 | 0%

If you have questions about the 2012 Supplemental QRUR, or need assistance accessing the reports, please contact the Physician Value Help Desk by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

B. Access Drill Down Tables from the 2012 Supplemental QRUR.

Steps	**Screenshots**
1. Follow **Steps 1-6** as described in **Section III** of this quick reference guide.	
2. In the **Overview** Tab, select **Drill Down Tables.**	**Table of Contents** **Sheet Name** / **Description** Exhibit 1 — Exhibit 1 displays the frequency and cost difference from the national mean for episodes attributed to your group practice. Exhibit 2 — Exhibit 2 presents utilization and costs of different service categories of those episodes attributed to your group practice. Exhibit 3 — Reserved for future use. Exhibit 4 — Exhibit 4 lists the top five hospitals, SNFs, HHAs, and EPs for episodes attributed to your group practice, for all major episode types. Drill Down Tables — The Drill Down tables report identifying information and costs for each episode attributed to your group practice. Appendix A - Service Categories — Appendix A provides definitions of the service categories used in Exhibit 2 and Drill Down Tables 2 and 3.

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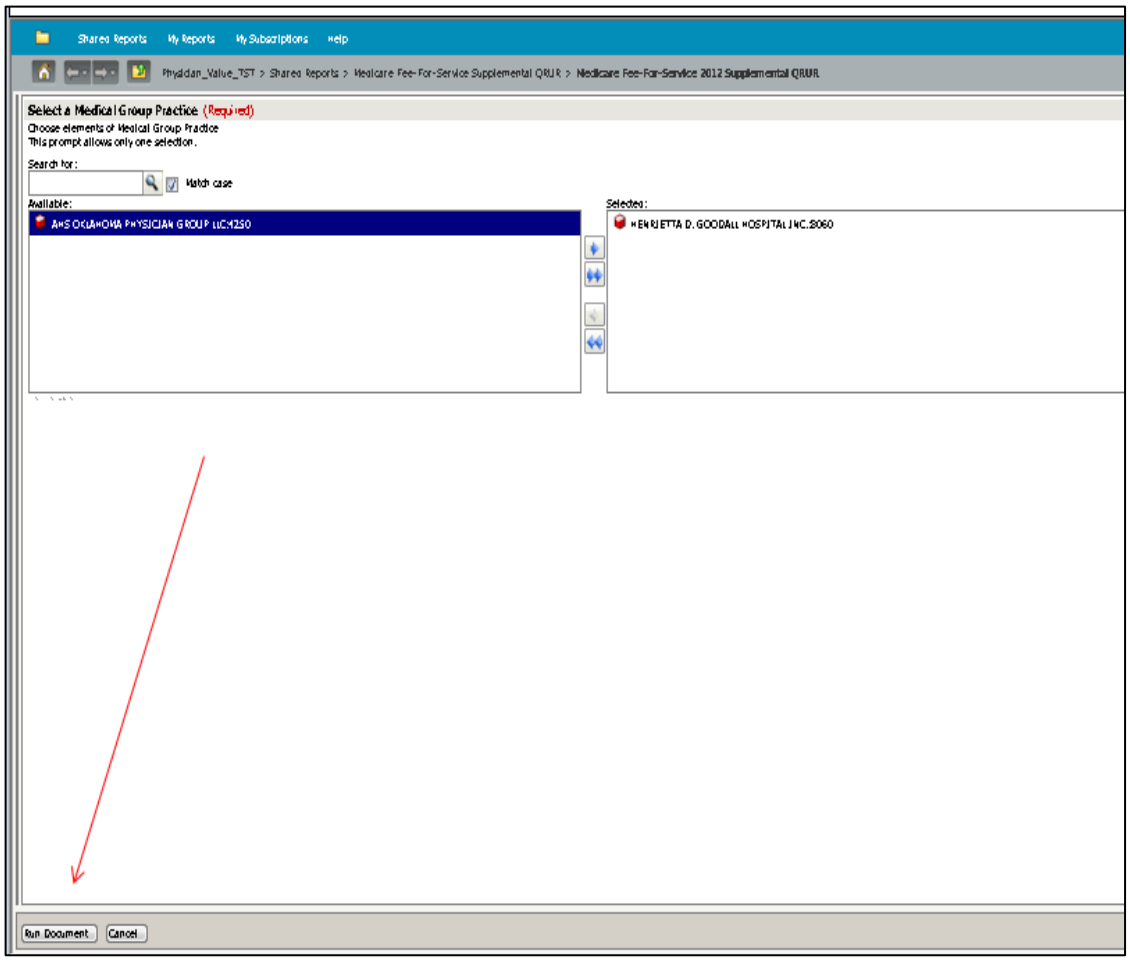
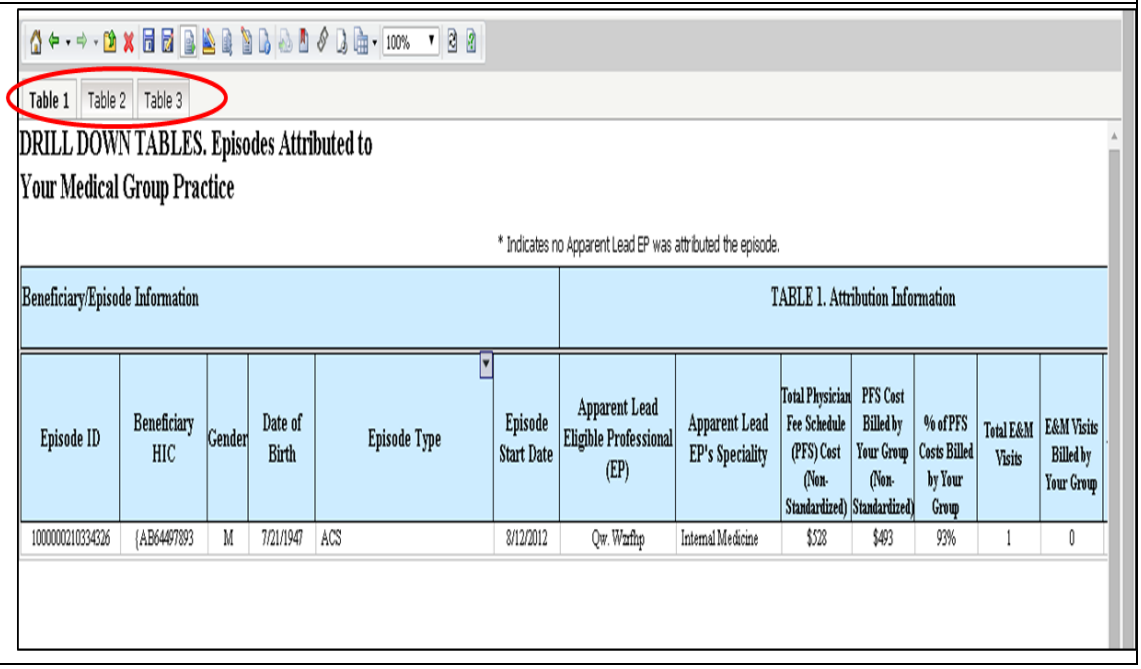
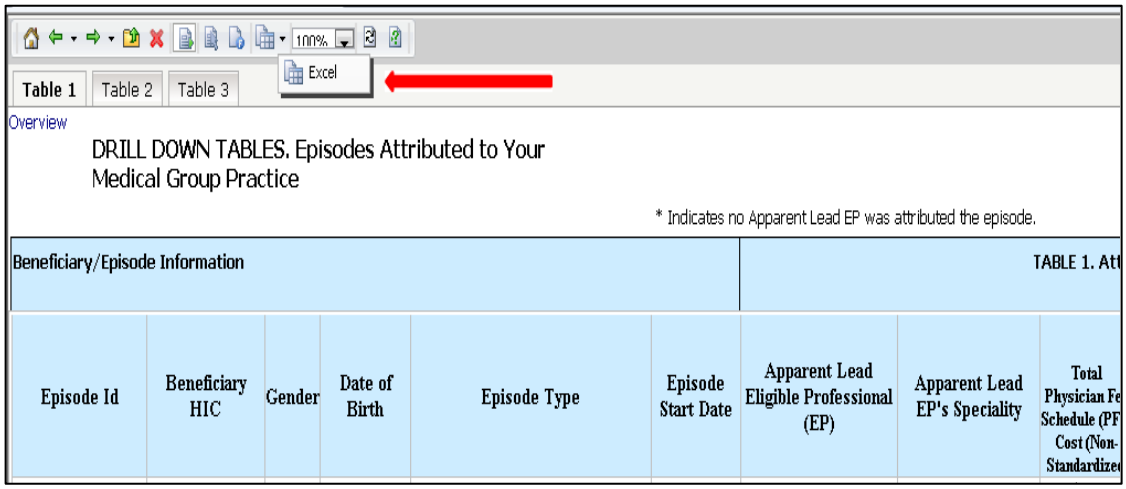
Steps	**Screenshots**
3. Follow **Step 6** as described in **Section III** of this quick reference guide	
4. **Drill Down Tables** are displayed within the MicroStrategy Web Platform and are opened in an **Excel** file. The following information is displayed: • **Beneficiary/Episode Information** • **Table 1:** Attribution and Total Cost Information • **Table 2:** Breakdown of Episodes Costs from Claims Billed, Ordered, or Referred by EPs within your Medical Group Practice • **Table 3:** Breakdown of Episodes Costs from Claims Billed, Ordered, by EPs or Facilities Outside your	

If you have questions about the 2012 Supplemental QRUR, or need assistance accessing the reports, please contact the Physician Value Help Desk by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	**Screenshots**
Medical Group Practice	
5. Click the **Export** button on the MicroStrategy Toolbar and select **Excel**. Click **OK** in the **Export Options** window.