

# Guide for Obtaining a New EIDM Account with a ‘Physician Quality and Value Programs’ Role

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## I. Introduction

This guide is for users who do not have an Enterprise Identity Data Management (EIDM) account. This guide provides step-by-step instructions on how users can sign up for an EIDM account for the first time and how to request a role to access the ‘Physician Quality and Value Programs’ application using the EIDM in the CMS Enterprise Portal.

**Note:** Do not use this guide (1) if you already have an EIDM account, or (2) if you had an Individuals Authorized Access to the CMS Computer Services (IACS) account, but never logged into EIDM with a Physician Value – Physician Quality Reporting System (PV-PQRS) role. Please visit <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html> to determine which guide you should use based on your needs.

- A. Before requesting a ‘Physician Quality and Value Programs’ role for your EIDM account, you will first need to determine which **one** of the following four user roles you want to request:
- **Security Official role:** The Security Official role allows the user to perform the following tasks on behalf of a group practice:
    - Register the group practice to participate in the Physician Quality Reporting System (PQRS) Group Practice Reporting Option (GPRO);
    - Obtain the group practice’s Mid-Year and Annual Quality and Resource User Report (QRUR), Supplemental QRUR, and PQRS Feedback Report;
    - Submit a Value Modifier Informal Review request on behalf of the group practice; and
    - Approve requests for the ‘Group Representative’ role in the EIDM.
  - **Group Representative role:** The Group Representative role allows the user to perform the following tasks on behalf of a group practice:
    - Register the group practice to participate in the PQRS GPRO;
    - Obtain the group practice’s Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report; and
    - Submit a Value Modifier Informal Review request on behalf of the group practice.
- Note:** Group practices are identified in the EIDM by their Medicare billing Taxpayer Identification Number (TIN). A group practice consists of **two or more eligible professionals** (as identified by their National Provider Identifier [NPI]) that bill under the TIN. To find out if a group practice is already registered in the EIDM and who is the group practice’s Security Official, please contact the QualityNet Help Desk and provide the group practice’s TIN and the name of the group practice.
- **Individual Practitioner role:** The Individual Practitioner role allows the user to perform the following tasks on behalf of a solo practitioner:
    - Obtain the solo practitioner’s Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report;
    - Submit a Value Modifier Informal Review request on behalf of a solo practitioner; and
    - Approve requests for the ‘Individual Practitioner Representative’ role in the EIDM.
  - **Individual Practitioner Representative role:** The Individual Representative role allows the user to perform the following task on behalf of the solo practitioner:
    - Obtain a solo practitioner’s Mid-Year and Annual QRUR, Supplemental QRUR and PQRS Feedback Report; and
    - Submit a Value Modifier Informal Review request on behalf of a solo practitioner.

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**Note:** Solo Practitioners are identified in the EIDM by their Medicare billing TIN and rendering NPI. A solo practitioner consists of **only one eligible professional** (as identified by the NPI) that bills under the TIN. To find out if a solo practitioner is already registered in the EIDM and who is the solo practitioner’s Individual Practitioner, please contact the QualityNet Help Desk and provide the solo practitioner’s TIN and the name of the solo practitioner.

Information about registering to participate in the PQRS GPRO and obtaining QRURs is available at <http://www.cms.gov/PhysicianFeedbackProgram>.

- B. Please gather the following information before you begin the process for signing up for an EIDM account for the following user role:
- **Security Official:**
    - **Your Information:** First Name, Last Name, E-mail Address, Social Security Number, Date of Birth, Home Address, City, State, Zip Code, and Primary Phone Number.
    - **Business Contact Information:** Company Name, Address, City, State, Zip Code, Company Phone Number, and Office Phone Number.
    - **Organization Information:** Group practice’s Medicare billing TIN, Legal Business Name, Rendering NPIs for **two different** eligible professionals who bill under the TIN and their corresponding individual Provider Transaction Access Numbers (PTANs) (*do not use the GROUP NPI or GROUP PTAN*), Address, City, State, Zip Code, and Phone Number.
  - **Group Representative:**
    - **Your Information:** First Name, Last Name, E-mail Address, Social Security Number, Date of Birth, Home Address, City, State, Zip Code, and Primary Phone Number.
    - **Business Contact Information:** Company Name, Address, City, State, Zip Code, Company Phone Number, and Office Phone Number.
    - **Organization Information:** Group practice’s Medicare billing TIN; or the Legal Business Name and the State; or the Legal Business Name and the Street Address.
  - **Individual Practitioner:**
    - **Your Information:** First Name, Last Name, E-mail Address, Social Security Number, Date of Birth, Home Address, City, State, Zip Code, and Primary Phone Number.
    - **Business Contact Information:** Company Name, Address, City, State, Zip Code, Company Phone Number, and Office Phone Number.
    - **Professional Information:** Solo practitioner’s First Name, Solo practitioner’s Last Name, Legal Business Name, Solo practitioner’s Medicare billing TIN, Solo practitioner’s rendering NPI and the corresponding individual PTAN (*do not use the GROUP NPI or GROUP PTAN*), Address, City, State, Zip Code and Phone Number.
  - **Individual Practitioner Representative:**
    - **Your Information:** First Name, Last Name, E-mail Address, Social Security Number, Date of Birth, Home Address, City, State, Zip Code, and Primary Phone Number.
    - **Business Contact Information:** Company Name, Address, City, State, Zip Code, Company Phone Number, and Office Phone Number.
    - **Professional Information:** Solo practitioner’s Medicare billing TIN; or the Legal Business Name and the State; or the Legal Business Name and the Street Address.

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- C. **Step-by-Step Instructions:** You have **twenty-five (25) minutes** to complete each screen (unless a different time is noted on the screen). Otherwise, you will lose all of the information you entered and will need to start the process again.

## II. Questions

For questions related to setting up an EIDM account, please contact the QualityNet Help Desk at:

- Monday – Friday: 8:00 am – 8:00 pm EST
- Phone: (866) 288-8912 (TTY 1-877-715-6222)
- Email: [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org)

For additional information on how to sign up for a new EIDM account and how to request a role to access the ‘Physician Quality and Value Programs’ application using the EIDM, please visit <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html>.

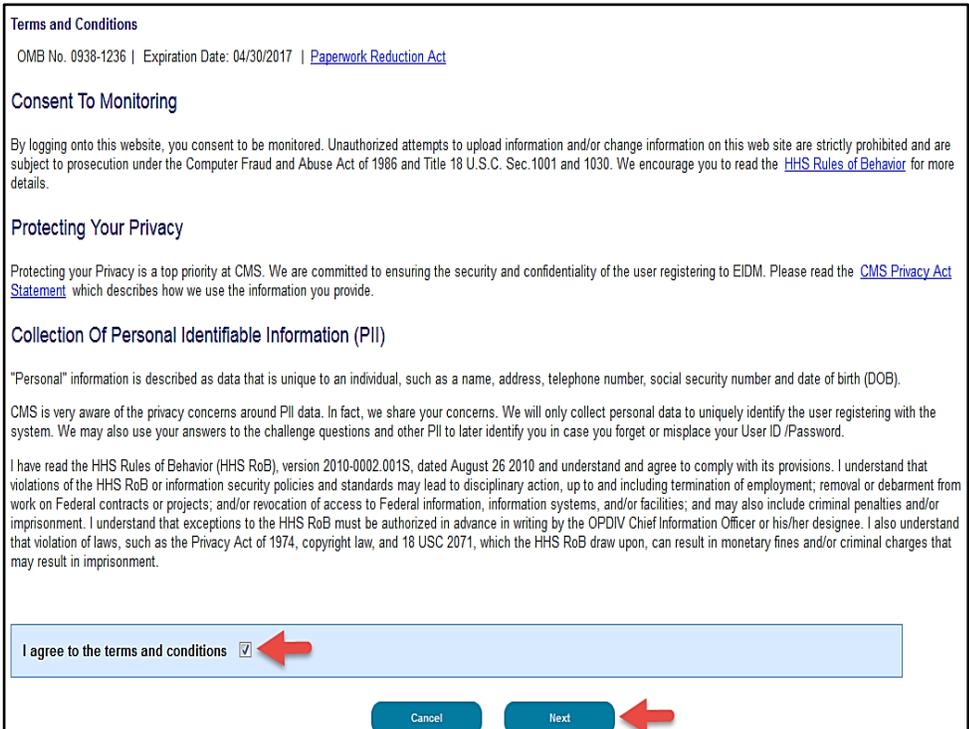
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## IV. New User Registration for an EIDM Account – Please follow each step listed below unless otherwise noted.

Steps	Screenshots
<p>1. Go to <a href="https://portal.cms.gov/">https://portal.cms.gov/</a> and select <b>New User Registration</b>.</p> <p><b>Note:</b> The CMS Enterprise Portal supports the following internet browsers:</p> <ul style="list-style-type: none"> <li>• Internet Explorer 8 (without compatibility mode)</li> <li>• Internet Explorer 9 (without compatibility mode)</li> <li>• Internet Explorer 10 (without compatibility mode)</li> <li>• Internet Explorer 11 (without Compatibility mode)</li> <li>• Mozilla-Firefox</li> <li>• Chrome</li> <li>• Safari</li> </ul> <p>Enable JavaScript and adjust any zoom features to ensure you are not seeing the screen in too wide of a view.</p>	
<p>2. Read the <b>Terms and Conditions</b>. Select the <b>I agree to the terms and conditions</b> checkbox and select <b>Next</b>.</p> <p><b>Note:</b> <i>Next</i> will be enabled only after checking the <b>I agree to the terms and conditions</b> checkbox.</p>	

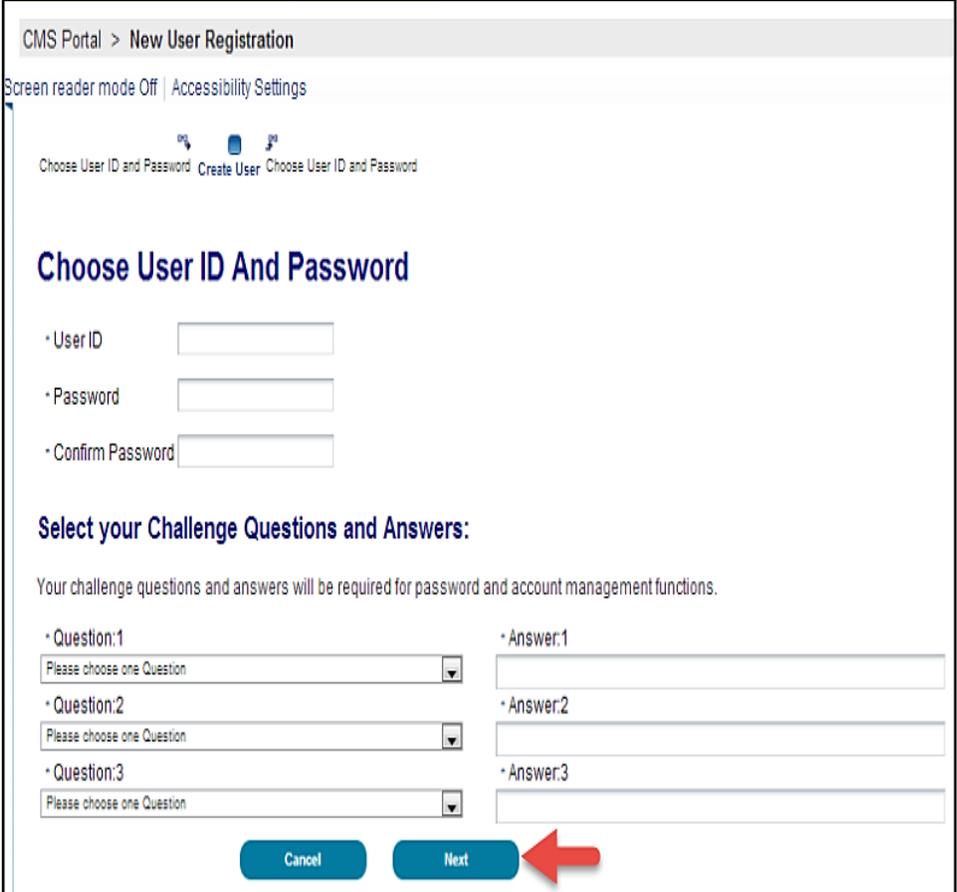
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Steps	Screenshots
<p>3. Enter the following required information under <b>Your Information</b> section and select <i>Next</i>.</p> <ul style="list-style-type: none"> <li>• First Name</li> <li>• Last Name</li> <li>• E-mail Address</li> <li>• Confirm E-mail Address</li> <li>• Social Security Number</li> <li>• Date of Birth</li> <li>• Home Address Line 1</li> <li>• City</li> <li>• State</li> <li>• Zip Code</li> <li>• Primary Phone Number</li> </ul>	<div style="border: 1px solid black; padding: 10px;"> <h3 style="margin-top: 0;">Your Information</h3> <p>Enter your legal first name and last name, as it may be required for Identity Verification.</p> <p>* First Name: <input style="width: 150px;" type="text"/> Middle Name: <input style="width: 100px;" type="text"/></p> <p>* Last Name: <input style="width: 150px;" type="text"/> Suffix: <input style="width: 30px;" type="text"/></p> <hr/> <p>Enter your E-mail address, as it will be used for account related communications.</p> <p>* E-mail Address: <input style="width: 250px;" type="text"/></p> <p>Re-enter your E-mail address.</p> <p>* Confirm E-mail Address: <input style="width: 250px;" type="text"/></p> <hr/> <p>Enter your full 9 digit social security number, as it may be required for Identity Verification.</p> <p>Social Security Number: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/></p> <hr/> <p>Enter your date of birth in MM/DD/YYYY format, as it may be required for Identity Verification.</p> <p>* Date of Birth: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/></p> <hr/> <p><input checked="" type="radio"/> U.S. Home Address <input type="radio"/> Foreign address</p> <p>Enter your current or most recent home address, as it may be required for Identity Verification.</p> <p>* Home Address Line 1: <input style="width: 200px;" type="text"/></p> <p>Home Address Line 2: <input style="width: 200px;" type="text"/></p> <p>* City: <input style="width: 100px;" type="text"/> * State: <input style="width: 100px;" type="text"/> * Zip Code: <input style="width: 50px;" type="text"/> Zip Code Extension: <input style="width: 50px;" type="text"/> Country: USA</p> <hr/> <p>Enter your primary phone number, as it may be required for Identity Verification.</p> <p>* Primary Phone Number: <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/></p> <hr/> <p style="text-align: right;"> <input type="button" value="Cancel"/> <input type="button" value="Next"/> </p> </div>

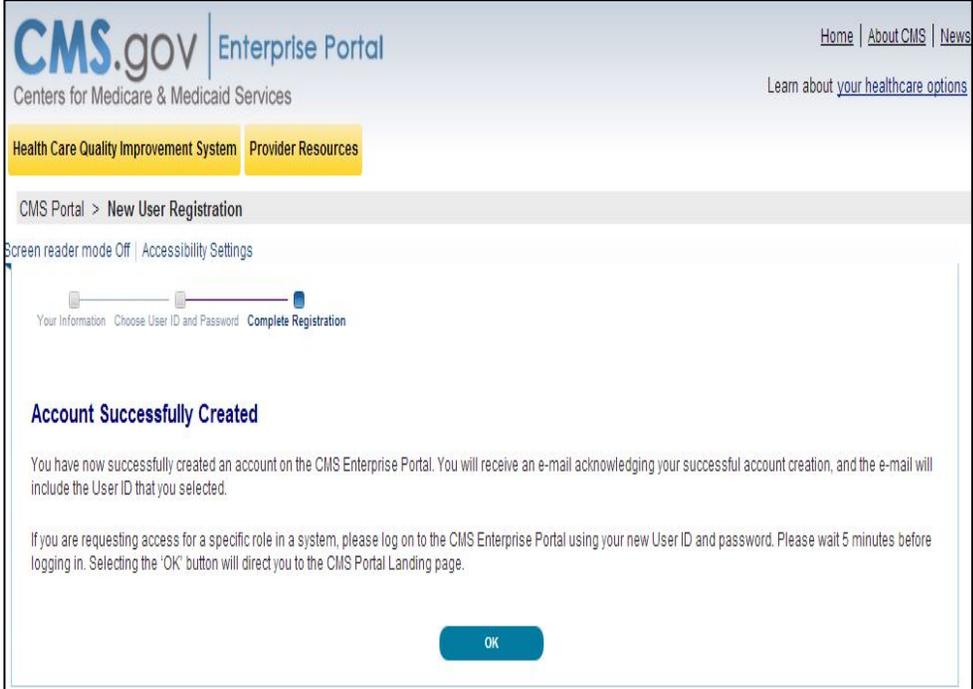
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Steps	Screenshots
<p>4. (a) Create your EIDM User ID and EIDM Password.</p> <p><b>Note:</b> Your EIDM User ID must be a minimum of six (6) and a maximum of seventy four (74) alphanumeric characters. It must contain at least 1 letter and cannot contain your Social Security Number or any 9 consecutive numbers. Allowed special characters are dashes (-), underscores (_), apostrophes ('), @ and periods (.) followed by alphanumeric characters.</p> <p><b>Note:</b> Your EIDM Password must be a minimum of eight (8) and a maximum of twenty (20) characters in length. It must contain at least one (1) letter, one (1) number, one (1) uppercase letter, and one (1) lowercase letter. It cannot contain your User ID and the following special characters may not be used: ?, &lt;, &gt;, (, ), ', ", /,  , and &amp;. Your password must be changed at least every 60 days and can only be changed once a day.</p> <p>(b) Select and provide the answer to three (3) challenge questions under <b>Select your Challenge Questions and Answers</b> section.</p> <p>(c) Select <i>Next</i>.</p>	

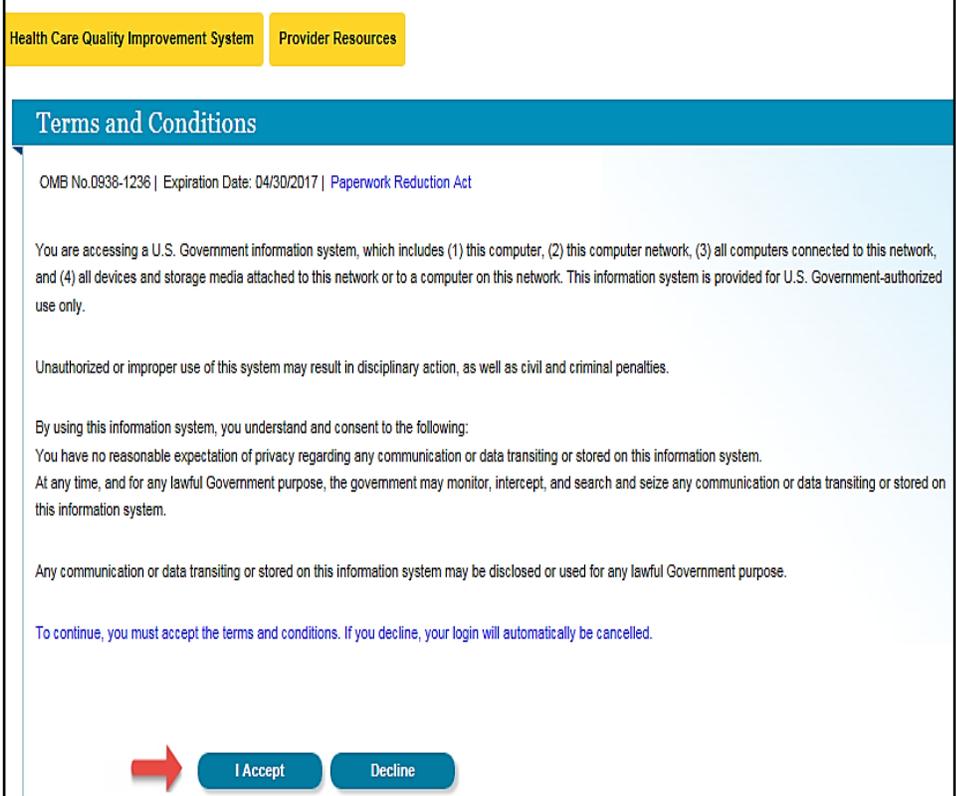
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Steps	Screenshots
<p>5. Your registration for an EIDM account is now complete. You will receive an E-mail acknowledging your successful account creation with your EIDM User ID.</p> <p>Select <b>OK</b> to navigate to the CMS Enterprise Portal in order to request a user role for the ‘Physician Quality and Value Programs’ application.</p> <p><b>Note:</b> Wait approximately five (5) minutes before logging in to the portal with your EIDM User ID and EIDM Password.</p>	 <p>The screenshot shows the CMS.gov Enterprise Portal interface. At the top, it says 'CMS.gov Enterprise Portal' and 'Centers for Medicare &amp; Medicaid Services'. There are navigation links for 'Home', 'About CMS', and 'News'. Below that, there are buttons for 'Health Care Quality Improvement System' and 'Provider Resources'. The main content area shows 'CMS Portal &gt; New User Registration' and a progress bar with three steps: 'Your Information', 'Choose User ID and Password', and 'Complete Registration'. A large blue heading reads 'Account Successfully Created'. Below this, a message states: 'You have now successfully created an account on the CMS Enterprise Portal. You will receive an e-mail acknowledging your successful account creation, and the e-mail will include the User ID that you selected.' Another message follows: 'If you are requesting access for a specific role in a system, please log on to the CMS Enterprise Portal using your new User ID and password. Please wait 5 minutes before logging in. Selecting the 'OK' button will direct you to the CMS Portal Landing page.' At the bottom center, there is a blue button labeled 'OK'.</p>
<p>6. Select <b>Login to CMS Secure Portal</b> on the <b>CMS Enterprise Portal</b>.</p>	 <p>The screenshot shows the CMS.gov Enterprise Portal landing page. At the top, it says 'CMS.gov Enterprise Portal' and 'Centers for Medicare &amp; Medicaid Services'. There are navigation links for 'Home', 'About CMS', 'Newsroom', 'Archive', 'Help &amp; FAQs', 'Email', and 'Print'. Below that, there are buttons for 'Health Care Quality Improvement System' and 'Provider Resources'. The main content area shows 'CMS Portal &gt; Welcome to CMS Portal'. A large blue heading reads 'Welcome to CMS Enterprise Portal'. Below this, a message states: 'The CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.' At the bottom, there are several buttons for different services: 'CMS Enterprise Portal', 'MACBIS', 'Medicare Shared Savings Program', 'Physician Value', 'ASP', 'Open Payments', 'CMAT', 'CPC', 'Innovation Center', 'CU', and 'PECOS'. On the right side, there is a blue box titled 'CMS Secure Portal' with the text: 'To log into the CMS Portal a CMS user account is required.' Below this, there is a blue button with a lock icon and the text 'Login to CMS Secure Portal', which is highlighted with a red arrow. Below the button, there are links for 'Forgot User ID?', 'Forgot Password?', and 'New User Registration'.</p>

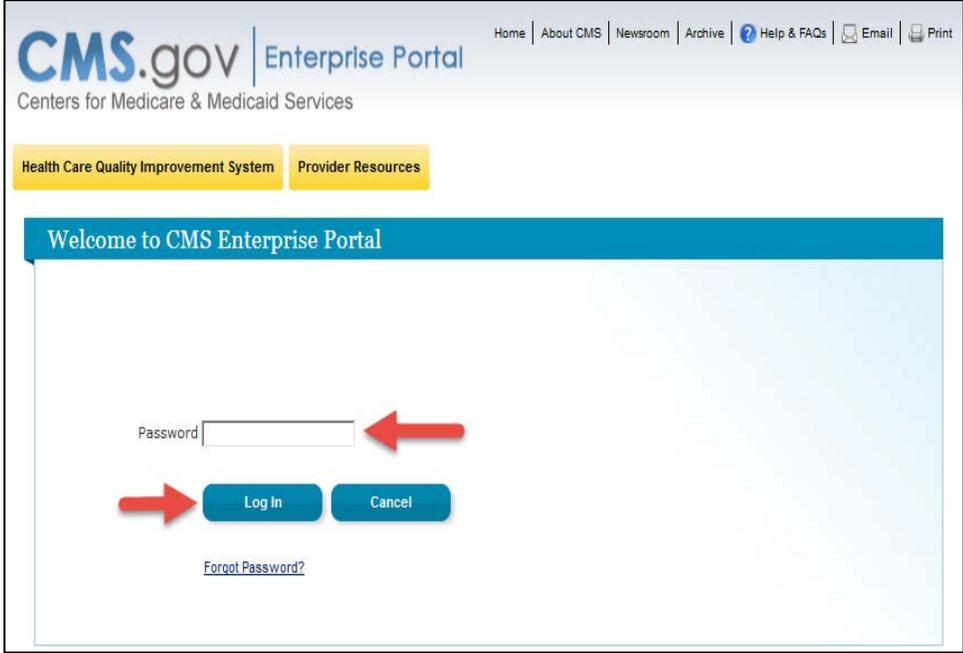
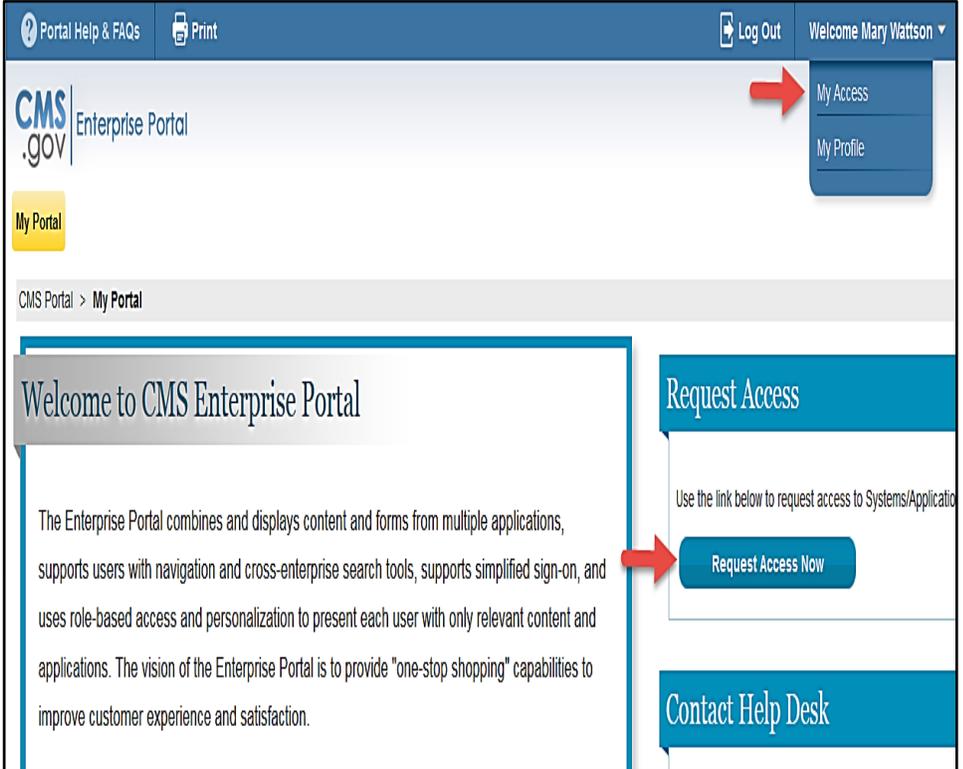
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Steps	Screenshots
<p>7. Read the <b>Terms and Conditions</b> and select <b><i>I Accept</i></b> to continue.</p>	
<p>8. Enter Your <b>EIDM User ID</b> and select <b><i>Next</i></b> on the <b>Welcome to CMS Enterprise Portal</b> screen.</p>	

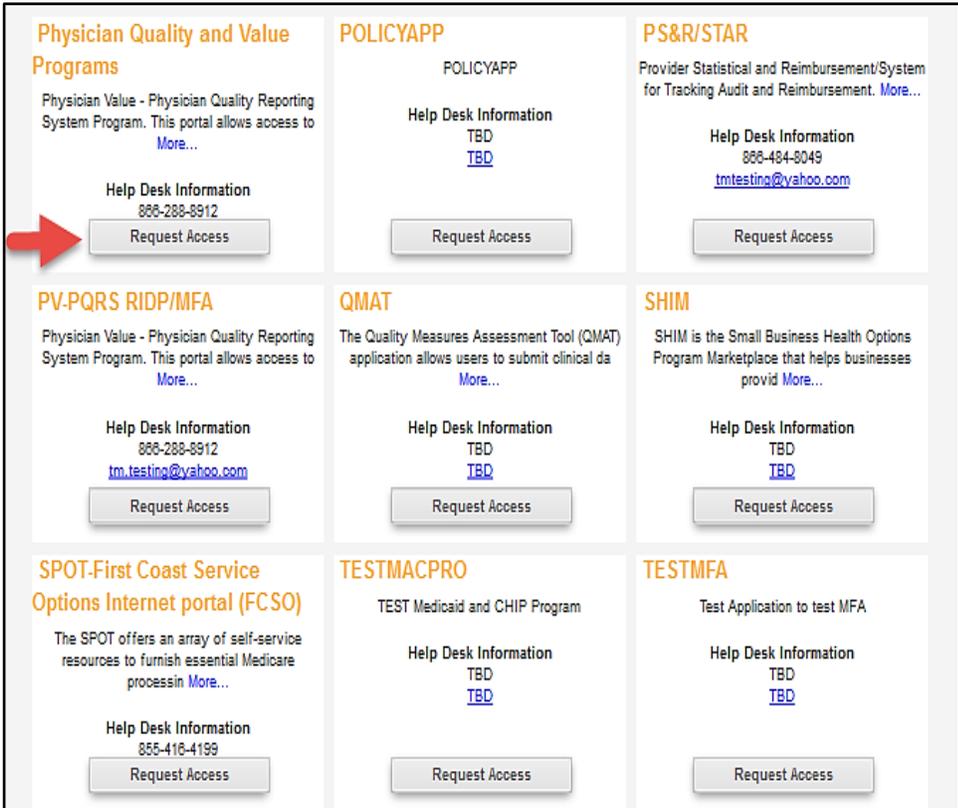
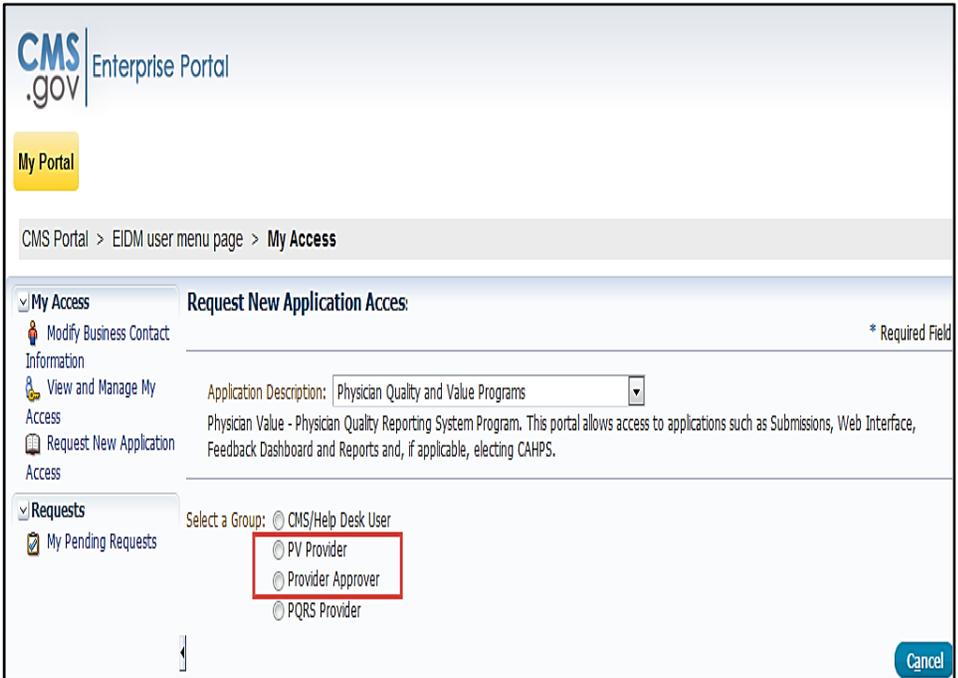
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Steps	Screenshots
<p>9. Enter Your EIDM <b>Password</b> and select <b>Log In</b>.</p>	
<p>10. Select <b>Request Access Now</b> under <b>Request Access</b> to begin the process of requesting a new user role.</p> <p><b>Note:</b> You may also select your username and then select <b>My Access</b> from the drop-down menu to begin the process of requesting a new user role.</p>	

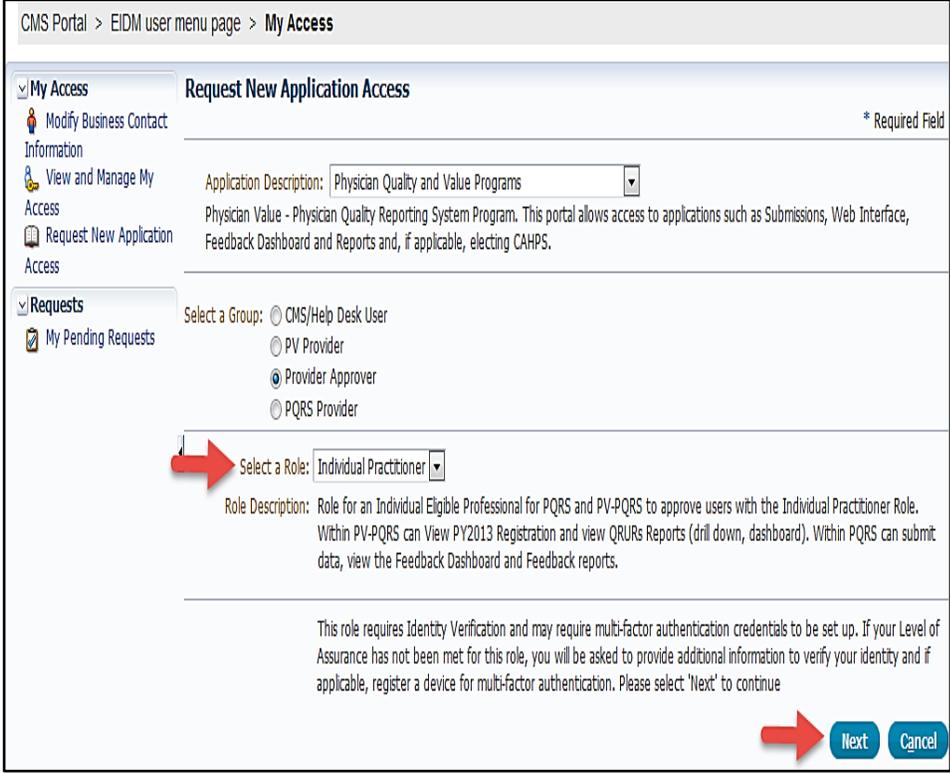
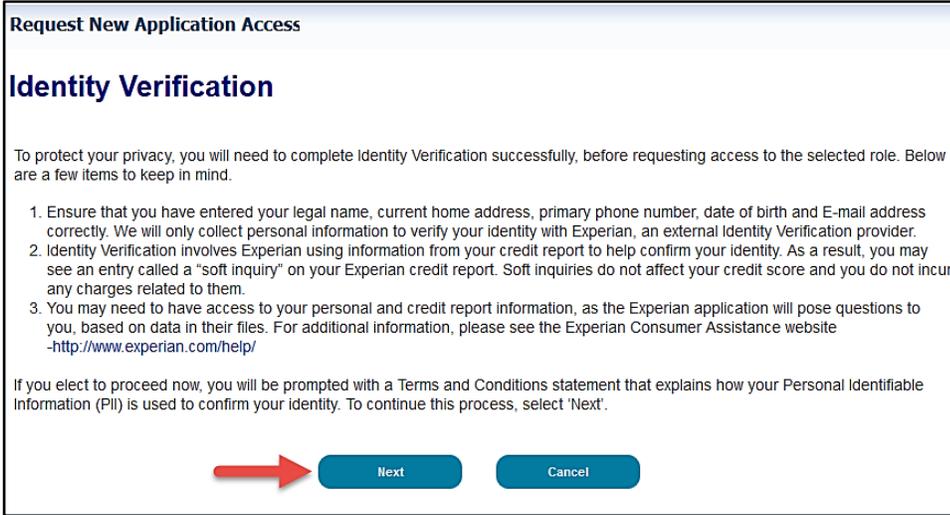
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Steps	Screenshots
<p>11. Select <b>Request Access</b> for the <b>Physician Quality and Value Programs</b> application within the <b>Access Catalog</b>.</p> <p><b>Note:</b> The <b>Access Catalog</b> list presented is in alphabetical order. Scroll down until you find the <b>Physician Quality and Value Programs</b> application or enter the first few letters of the application in the <b>Access Catalog</b> text box to narrow down the selection criteria.</p>	 <p>The screenshot shows a grid of application cards. The first card is titled 'Physician Quality and Value Programs' and includes a 'Request Access' button highlighted with a red arrow. Other cards include POLICYAPP, PS&amp;R/STAR, PV-PQRS RIDP/MFA, QMAT, SHIM, SPOT-First Coast Service Options Internet portal (FCSO), TESTMACPRO, and TESTMFA.</p>
<p>12. (a) Under <b>Select a Group</b>, choose <b>Provider Approver</b>, if you are requesting <b>Security Official</b> or <b>Individual Practitioner</b> role</p> <p style="text-align: center;">OR</p> <p>(b) Choose <b>PV Provider</b>, if you are requesting <b>Group Representative</b> or <b>Individual Practitioner Representative</b> role.</p> <p><b>Note:</b> The <b>Select a Role</b> option will be visible after making a selection for the <b>Select a Group</b> option. The <b>Next</b> button will be visible after making a selection for <b>Select a Role</b> option.</p>	 <p>The screenshot shows the 'Request New Application Access' form. The 'Application Description' is set to 'Physician Quality and Value Programs'. Under the 'Select a Group' section, the 'PV Provider' radio button is selected and highlighted with a red box. Other options include 'CMS/Help Desk User', 'Provider Approver', and 'PQRS Provider'. A 'Cancel' button is visible at the bottom right.</p>

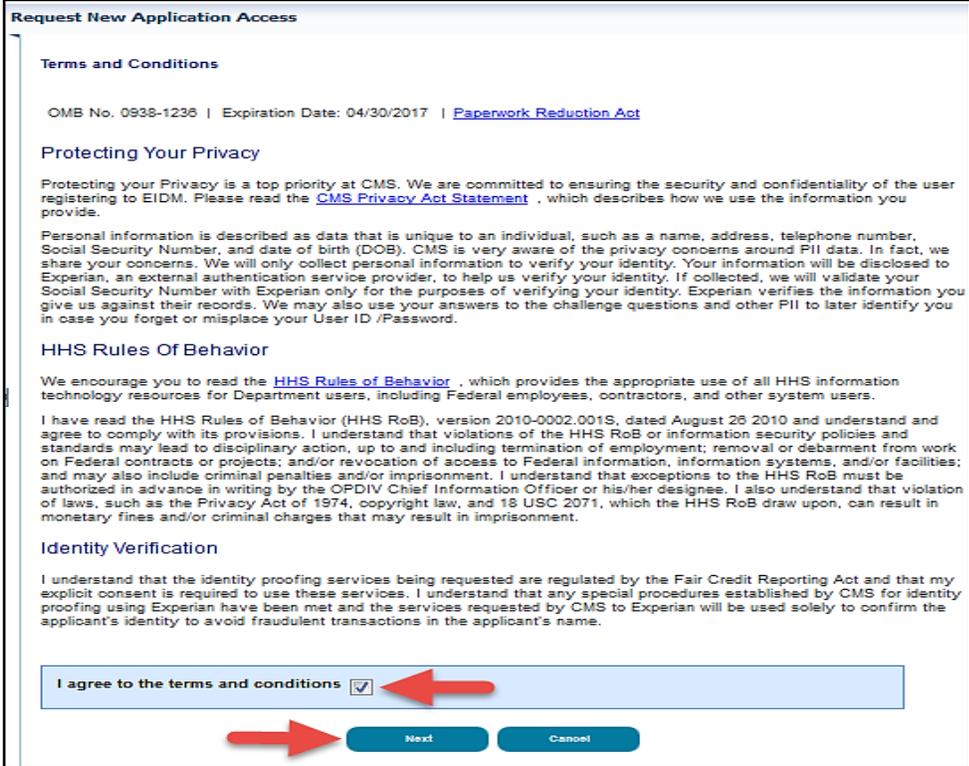
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Steps	Screenshots
<p>13. Select the appropriate role you want to request from the <b>Select a Role</b> drop-down menu.</p> <p>Select <i>Next</i> to begin <b>Remote Identity Proofing (RIDP)</b> and <b>Multi-Factor Authentication (MFA)</b> processes.</p>	
<p><b>Remote Identity Proofing (RIDP) - Please follow steps 14 to 18 to begin the RIDP process.</b>  <b>This process is used to verify your identity and is done by asking random questions based on your personal and financial history. Additional information on how the RIDP process works can be found at <a href="http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html">http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html</a>.</b></p>	
<p>14. Select <i>Next</i> to complete the <b>Identity Verification</b> section.</p>	

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Steps	Screenshots
<p>15. Read the <b>Terms and Conditions</b>. Select the <b><i>I agree to the terms and conditions</i></b> checkbox and then select <b>Next</b>.</p> <p><b>Note:</b> Next will be enabled only after checking the <b>I agree to the terms and conditions</b> checkbox.</p>	 <p>The screenshot displays the 'Request New Application Access' form. It includes sections for 'Terms and Conditions', 'Protecting Your Privacy', 'HHS Rules Of Behavior', and 'Identity Verification'. At the bottom, there is a checkbox labeled 'I agree to the terms and conditions' which is checked. A red arrow points to this checkbox. Below the checkbox are two buttons: 'Next' and 'Cancel'. A red arrow points to the 'Next' button, indicating it is the next step in the process.</p>

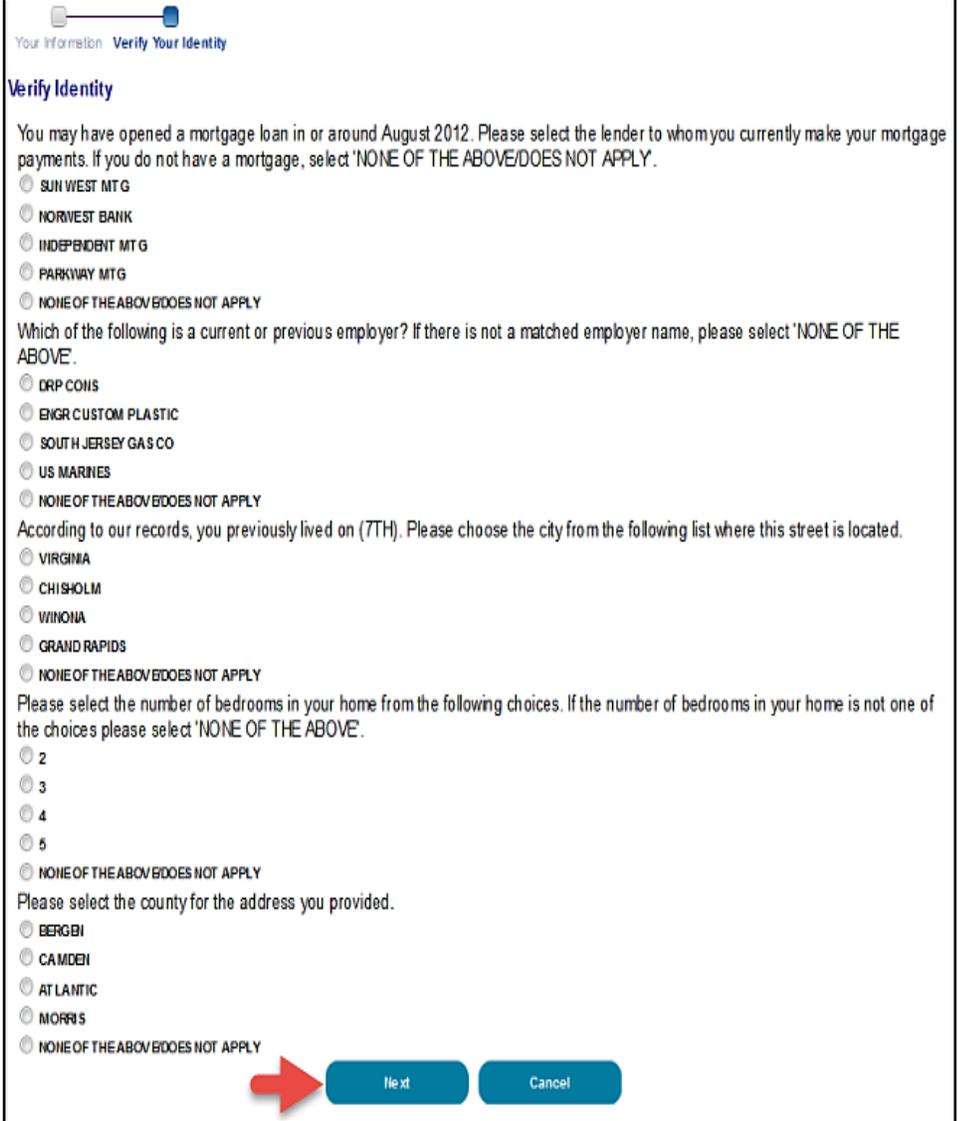
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Steps	Screenshots
16. Confirm your E-mail Address and enter your Social Security Number. Select <i>Next</i> after verifying the pre-populated information.	<div data-bbox="586 300 1547 1791"><h3>Your Information</h3><p>Enter your legal first name and last name, as it may be required for Identity Verification.</p><p>* First Name: <input type="text" value="John"/> Middle Name: <input type="text"/></p><p>* Last Name: <input type="text" value="Smith"/> Suffix: <input type="text" value=""/></p><hr/><p>Enter your E-mail address, as it will be used for account related communications.</p><p>* E-mail Address: <input type="text" value="John.Smith@yahoo.com"/></p><p>Re-enter your E-mail address.</p><p>* Confirm E-mail Address: <input type="text" value="John.Smith@yahoo.com"/> </p><hr/><p>Enter your full 9 digit social security number, as it may be required for Identity Verification.</p><p>Social Security Number: <input type="text" value="... .."/> </p><hr/><p>Enter your date of birth in MM/DD/YYYY format, as it may be required for Identity Verification.</p><p>* Date of Birth: <input type="text" value="12"/> <input type="text" value="11"/> <input type="text" value="1988"/></p><hr/><p><input checked="" type="radio"/> U.S. Home Address <input type="radio"/> Foreign address Enter your current or most recent home address, as it may be required for Identity Verification.</p><p>* Home Address Line 1: <input type="text" value="2810 Lord Baltimore Dr"/></p><p>Home Address Line 2: <input type="text"/></p><p>* City: <input type="text" value="Baltimore"/> * State: <input type="text" value="Maryland"/> * Zip Code: <input type="text" value="21244"/> Zip Code Extension: <input type="text"/> Country: USA</p><hr/><p>Enter your primary phone number, as it may be required for Identity Verification.</p><p>* Primary Phone Number: <input type="text" value="301"/> <input type="text" value="121"/> <input type="text" value="1212"/></p><hr/><p><input type="button" value="Cancel"/> <input type="button" value="Next"/> </p></div>

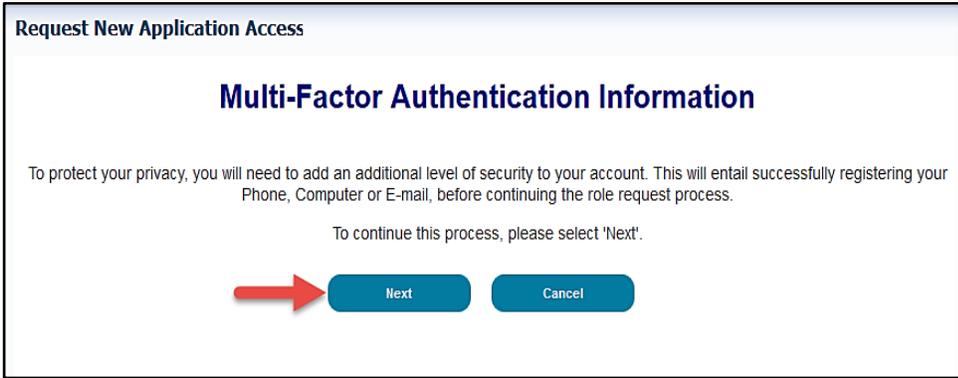
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Steps	Screenshots
<p>17. Provide an answer to each question under the <b>Verify Identity</b> section.</p> <p>Select <i>Next</i> to continue.</p> <p><b>Note:</b> Verify Identity questions are provided from Experian based on the information provided in step 16.</p>	 <p>The screenshot shows a 'Verify Identity' section with the following questions and options:</p> <ul style="list-style-type: none"> <li>Question 1: "You may have opened a mortgage loan in or around August 2012. Please select the lender to whom you currently make your mortgage payments. If you do not have a mortgage, select 'NONE OF THE ABOVE/DOES NOT APPLY'." <ul style="list-style-type: none"> <li><input type="radio"/> SUN WEST MTG</li> <li><input type="radio"/> NORWEST BANK</li> <li><input type="radio"/> INDEPENDENT MTG</li> <li><input type="radio"/> PARKWAY MTG</li> <li><input type="radio"/> NONE OF THE ABOVE/DOES NOT APPLY</li> </ul> </li> <li>Question 2: "Which of the following is a current or previous employer? If there is not a matched employer name, please select 'NONE OF THE ABOVE'." <ul style="list-style-type: none"> <li><input type="radio"/> DRP COHS</li> <li><input type="radio"/> ENGR CUSTOM PLASTIC</li> <li><input type="radio"/> SOUTH JERSEY GAS CO</li> <li><input type="radio"/> US MARINES</li> <li><input type="radio"/> NONE OF THE ABOVE/DOES NOT APPLY</li> </ul> </li> <li>Question 3: "According to our records, you previously lived on (7TH). Please choose the city from the following list where this street is located." <ul style="list-style-type: none"> <li><input type="radio"/> VIRGINIA</li> <li><input type="radio"/> CHISHOLM</li> <li><input type="radio"/> WINONA</li> <li><input type="radio"/> GRAND RAPIDS</li> <li><input type="radio"/> NONE OF THE ABOVE/DOES NOT APPLY</li> </ul> </li> <li>Question 4: "Please select the number of bedrooms in your home from the following choices. If the number of bedrooms in your home is not one of the choices please select 'NONE OF THE ABOVE'." <ul style="list-style-type: none"> <li><input type="radio"/> 2</li> <li><input type="radio"/> 3</li> <li><input type="radio"/> 4</li> <li><input type="radio"/> 5</li> <li><input type="radio"/> NONE OF THE ABOVE/DOES NOT APPLY</li> </ul> </li> <li>Question 5: "Please select the county for the address you provided." <ul style="list-style-type: none"> <li><input type="radio"/> BERGEN</li> <li><input type="radio"/> CAMDEN</li> <li><input type="radio"/> ATLANTIC</li> <li><input type="radio"/> MORRIS</li> <li><input type="radio"/> NONE OF THE ABOVE/DOES NOT APPLY</li> </ul> </li> </ul> <p>At the bottom right, there are two buttons: "Next" and "Cancel". A red arrow points to the "Next" button.</p>
<p>18. <b>Remote Identity Proofing</b> is now complete. Select <i>Next</i> to proceed to register for the <b>Multi-Factor Authentication</b> process.</p>	 <p>The screenshot shows a navigation menu on the left with 'My Access' and 'Requests' sections. The main content area displays a 'Request New Application Access' header and a 'Complete Step Up' message: "You have successfully completed the Remote Identity Proofing process." At the bottom right, there is a "Next" button with a red arrow pointing to it.</p>

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# Guide for Obtaining a New EIDM Account with a 'Physician Quality and Value Programs' Role

Steps	Screenshots
<p style="text-align: center;"><b>Multi-Factor Authentication (MFA)</b></p> <p><b>Please follow steps 19 to 22 to register for MFA. MFA is an approach to security authentication which requires users to provide more than one form of verification in order to prove their identity. MFA registration is required only once when you are requesting a user role, but will be verified every time you log into the CMS Enterprise Portal. Additional information on how the MFA process works can be found at <a href="http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-ORUR.html">http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-ORUR.html</a>.</b></p>	<p style="text-align: center;"><b>Request New Application Access</b></p> <p style="text-align: center;"><b>Multi-Factor Authentication Information</b></p> <p>To protect your privacy, you will need to add an additional level of security to your account. This will entail successfully registering your Phone, Computer or E-mail, before continuing the role request process.</p> <p style="text-align: center;">To continue this process, please select 'Next'.</p> <div style="text-align: center;">  </div>
<p>19. Select <i>Next</i> to begin registration for the <b>Multi-Factor Authentication</b> process.</p> <p>20. Read the <b>Register Your Phone, Computer, or E-mail</b> notification and then select an option from the <b>MFA Device Type</b> drop-down menu.</p> <p><b>Note:</b> If selecting phone/Tablet/PC/Laptop as <b>MFA Device Type</b>, you will first need to ensure you have the appropriate VIP Access software downloaded to your device. The VIP Access software can be downloaded via the Symantec Site (link is provided on your screen). Refer to the link on the screen to make selection. If the VIP Access software is not installed on your device, you will be unable to complete the Multi-Factor Authentication process.</p>	<p style="text-align: center;"><b>Register Your Phone, Computer, or E-mail</b></p> <p>Adding a Security Code to your login also known as Multi-Factor Authentication (MFA) can make your login more secure by providing an extra layer of protection to your user name and password.</p> <p>You can associate the Security Code to your profile by registering your phone, computer or E-mail. Select the links below to find out more information about the options.</p> <ul style="list-style-type: none"> <li> <p>▽ <b>Phone/Tablet/PC/Laptop</b> To use the Validation and ID Protection (VIP) access software on your phone, you must download the VIP Access software to your phone, if you do not already have it. Select the following link -<a href="https://m.vip.symantec.com/home.v">https://m.vip.symantec.com/home.v</a></p> <p>To use VIP access software on your computer, you must download the VIP Access software, if you do not already have it. Select the following link -<a href="https://idprotect.vip.symantec.com/desktop/download.v">https://idprotect.vip.symantec.com/desktop/download.v</a></p> </li> <li> <p>▽ <b>Text Message Short Message Service (SMS)</b> The SMS option will send your Security Code directly to your mobile device via text message. This option requires you to provide a ten (10) digits U.S. phone number for a mobile device that is capable of receiving text messages. Carrier service charges may apply for this option.</p> </li> <li> <p>▽ <b>Interactive Voice Response (IVR)</b> The IVR option will communicate your Security Code through a voice message that will be sent directly to your phone. The option requires you to provide a valid ten (10) digits U.S. phone number and (Optional) extension that will be used during login to obtain the Security Code. The extension may begin with any one of the following: asterisks*; period .; comma ,; pound # followed by numeric 0 to 9. For example: 4885554444, 1112. To access the application you must enter the provided Security Code on the login page. Carrier service charges may apply for this option.</p> </li> <li> <p>▽ <b>E-mail</b> The E-mail address on your profile will be used when registering for Multi-Factor Authentication (MFA) using E-mail option. When logging into a secure application, your Security Code that is required at the login page will be e-mailed to the e-mail address on the profile.</p> </li> </ul> <p>Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, then log back in to try again.</p> <div style="text-align: center;"> <p>Select the MFA Device Type that you want to use to login to secure applications from the dropdown menu below.</p> <p>MFA Device Type: <input type="text" value="Select MFA Device Type"/> </p> <div style="border: 1px solid gray; padding: 5px; width: fit-content;"> <p>Cancel</p> <p>Select MFA Device Type</p> <p>Phone/Tablet/PC/Laptop</p> <p>Text Message-Short Message Service (SMS)</p> <p>Interactive Voice Response (IVR)</p> <p>E-mail</p> </div> </div>

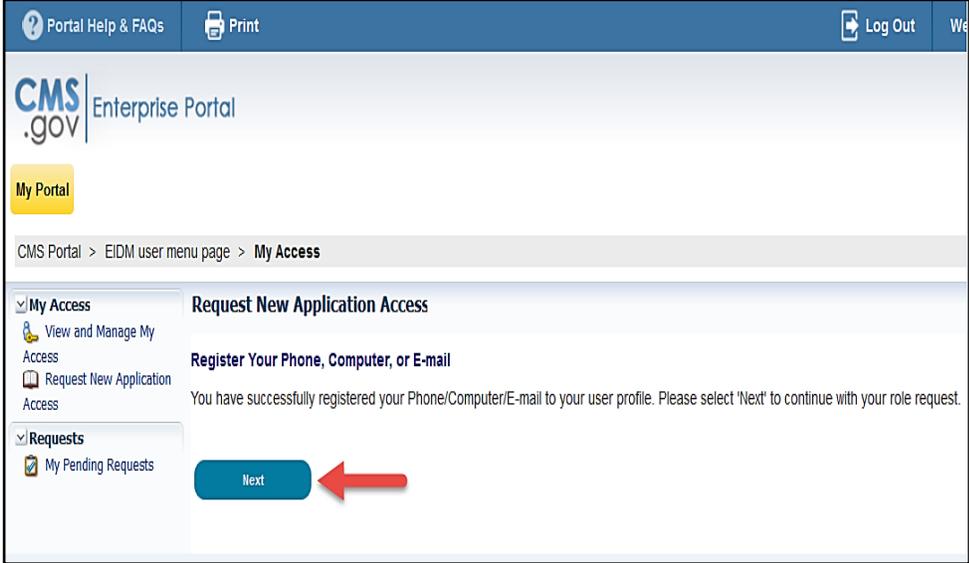
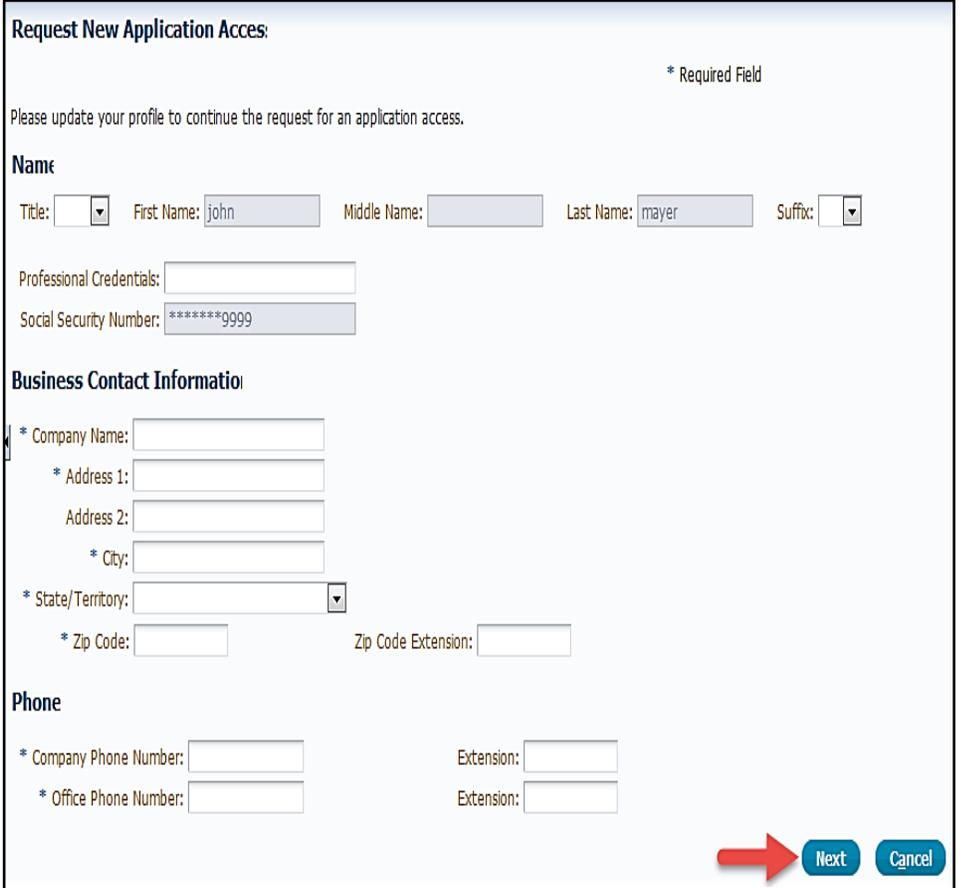
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Steps	Screenshots
<p>21. (a) If selecting <b>Phone/Tablet/PC/Laptop</b> as <b>MFA Device Type</b>, enter the alphanumeric code that displays under the label <b>Credential ID</b> on your device. Enter the <b>MFA Device Description</b> which is a nick-name that can help you identify your device.</p> <p style="text-align: center;"><b>OR</b></p> <p>(b) If selecting <b>E-mail</b> –as <b>MFA Device Type</b>, the E-mail address on your profile will automatically be used for the E-mail option to obtain the security code. Enter the <b>MFA Device Description</b>.</p> <p style="text-align: center;"><b>OR</b></p> <p>(C) If selecting <b>Text Message – Short Message service (SMS)</b> as a <b>MFA Device Type</b>, enter the <b>Phone Number</b> that will be used to obtain the Security Code and the <b>MFA Device Description</b>.</p> <p style="text-align: center;"><b>OR</b></p> <p>(D) If selecting <b>Voice Message – Interactive Voice Response (IVR)</b> as <b>MFA Device Type</b>, enter the <b>Phone Number</b> and <b>Extension</b> that will be used to obtain the security code. Enter the <b>MFA Device Description</b>.</p> <p>Select <i>Next</i> to continue.</p>	<div style="border: 1px solid black; padding: 10px;"> <p style="margin: 0;"><b>Register Your Phone, Computer, or E-mail</b></p> <p style="font-size: small; margin: 5px 0;">Adding a Security Code to your login also known as Multi-Factor Authentication (MFA) can make your login more secure by providing an extra layer of protection to your user name and password.</p> <p style="font-size: small; margin: 5px 0;">You can associate the Security Code to your profile by registering your phone, computer or E-mail. Select the links below to find out more information about the options.</p> <p style="margin: 5px 0;"> <span style="font-size: x-small;">▽</span> <b>Phone/Tablet/PC/Laptop</b>  <small>To use the Validation and ID Protection (VIP) access software on your phone, you must download the VIP Access software to your phone, if you do not already have it. Select the following link -<a href="https://m.vip.symantec.com/home.v">https://m.vip.symantec.com/home.v</a></small> </p> <p style="margin: 5px 0;"> <span style="font-size: x-small;">▽</span> <b>Text Message Short Message Service (SMS)</b>  <small>The SMS option will send your Security Code directly to your mobile device via text message. This option requires you to provide a ten (10) digits U.S. phone number for a mobile device that is capable of receiving text messages. Carrier service charges may apply for this option.</small> </p> <p style="margin: 5px 0;"> <span style="font-size: x-small;">▽</span> <b>Interactive Voice Response (IVR)</b>  <small>The IVR option will communicate your Security Code through a voice message that will be sent directly to your phone. The option requires you to provide a valid ten (10) digits U.S. phone number and (Optional) extension that will be used during login to obtain the Security Code. The extension may begin with any one of the following: asterisks“*”; period “.”; comma “,”; pound “#” followed by numeric 0 to 9. For example: 4885554444, 1112. To access the application you must enter the provided Security Code on the login page. Carrier service charges may apply for this option.</small> </p> <p style="margin: 5px 0;"> <span style="font-size: x-small;">▽</span> <b>E-mail</b>  <small>The E-mail address on your profile will be used when registering for Multi-Factor Authentication (MFA) using E-mail option. When logging into a secure application, your Security Code that is required at the login page will be e-mailed to the e-mail address on the profile.</small> </p> <p style="font-size: x-small; margin: 5px 0;">Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, then log back in to try again.</p> <div style="margin-top: 10px; border: 1px solid #ccc; padding: 5px;"> <p style="text-align: center; font-size: x-small;">Select the MFA Device Type that you want to use to login to secure applications from the dropdown menu below.</p> <p style="font-size: x-small;">* MFA Device Type: <input type="text" value="Phone/Tablet/PC/Laptop"/></p> <p style="font-size: x-small; margin-left: 20px;">Enter the alphanumeric code that displays under the label Credential ID on your device.</p> <p style="font-size: x-small;">* Credential ID: <input style="width: 100px;" type="text"/></p> <p style="font-size: x-small;">* MFA Device Description: <input style="width: 100px;" type="text"/></p> <p style="text-align: center; margin-top: 5px;"> <input type="button" value="Cancel"/> <input style="margin-left: 20px;" type="button" value="Next"/> </p> </div> </div>

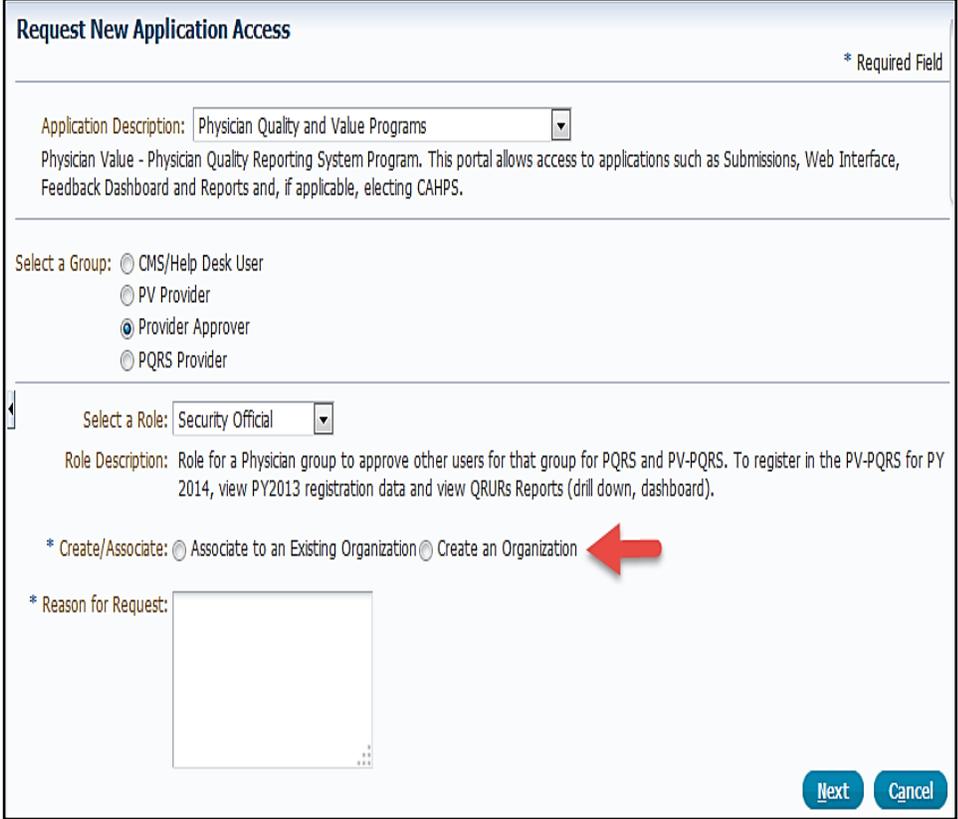
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Steps	Screenshots
<p>22. Your registration for the <b>Multi-Factor Authentication</b> is now complete. Select <i>Next</i> to proceed to request a user role in order to access the 'Physician Quality and Value Programs' application.</p> <p><b>Note:</b> You will receive an E-mail notification for successfully registering the MFA credential type.</p>	
<p>23. Enter the required information under <b>Business Contact Information</b> and <b>Phone</b> sections and select <i>Next</i>.</p> <p><b>Note:</b> <i>The information under the Name section will be pre-populated with the Remote Identity Proofing information from step 16.</i></p> <ul style="list-style-type: none"> <li>If you are requesting a Security Official role, go to step 24.</li> <li>If you are requesting a Group Representative role, go to step 31.</li> <li>If you are requesting an Individual Practitioner role, go to step 34.</li> <li>If you are requesting an Individual Practitioner Representative role, go to step 41.</li> </ul>	

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Steps	Screenshots
<b>Follow Steps 24 to 30 to Request a 'Security Official' Role</b>	
<p>24. a) If you are the first person in your group practice to sign up for the Security Official role and register your group practice in the EIDM, select <b>Create an Organization</b>. Then, proceed to Step 25.</p> <p style="text-align: center;"><b>OR</b></p> <p>(b) If you are signing up for a Security Official role and your group practice already exists in the EIDM, select <b>Associate to an Existing Organization</b>. Then, proceed to Step 28.</p>	 <p>The screenshot shows a web form titled "Request New Application Access". It contains the following elements:</p> <ul style="list-style-type: none"><li><b>Application Description:</b> A dropdown menu with "Physician Quality and Value Programs" selected. Below it is a descriptive text: "Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS."</li><li><b>Select a Group:</b> Radio buttons for "CMS/Help Desk User", "PV Provider", "Provider Approver" (which is selected), and "PQRS Provider".</li><li><b>Select a Role:</b> A dropdown menu with "Security Official" selected. Below it is a "Role Description": "Role for a Physician group to approve other users for that group for PQRS and PV-PQRS. To register in the PV-PQRS for PY 2014, view PY2013 registration data and view QRURs Reports (drill down, dashboard)."</li><li><b>* Create/Associate:</b> Radio buttons for "Associate to an Existing Organization" and "Create an Organization". A red arrow points to the "Associate to an Existing Organization" option.</li><li><b>* Reason for Request:</b> A large empty text area.</li><li><b>Buttons:</b> "Next" and "Cancel" buttons at the bottom right.</li></ul>

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Steps	Screenshots
<p>25. If selecting <b>Create an Organization</b> as the <b>Create/Associate</b> option, enter the following required information for the group practice:</p> <ul style="list-style-type: none"> <li>Medicare Billing TIN</li> <li>Legal Business Name</li> <li>NPI 1</li> <li>PTAN 1</li> <li>NPI 2</li> <li>PTAN 2</li> <li>Address</li> <li>City</li> <li>State</li> <li>Zip Code</li> <li>Phone Number</li> <li>Reason for Request</li> </ul> <p>Select <i>Next</i>.</p> <p><b>Note:</b> In this section, enter your group practice’s Medicare billing <b>TIN</b>; enter <b>rendering NPIs</b> for <b>two different</b> eligible professionals who bill under the TIN (do not use the <u>group</u> NPI) and enter their corresponding <b>individual PTANs</b> (do not use the <u>group</u> PTAN); and enter the remaining required information.</p> <p><b>Example:</b> Healthy Clinic with Medicare billing TIN 74-7575757 has ten eligible professionals in the group. Enter the rendering NPI and individual PTAN combinations for two of the eligible professionals: Dr. Smith and Dr. Beaver.</p> <ul style="list-style-type: none"> <li>Dr. Smith’s <b>rendering NPI</b> is 4545454545 and the corresponding <b>individual PTAN</b> is <b>G676767676</b>.</li> </ul> <p><b>Note:</b> PTANs are alphanumeric therefore, enter the alpha characters.</p> <ul style="list-style-type: none"> <li>Dr. Beaver’s <b>rendering NPI</b> is 2525252525 and the corresponding <b>individual PTAN</b> is <b>0012789456</b>.</li> </ul> <p><b>Note:</b> All leading zeros in the PTAN</p>	<div style="border: 1px solid black; padding: 10px;"> <p>Select a Role: Security Official <input type="button" value="v"/></p> <p>Role Description: Role for a Physician group to approve other users for that group for PQRS and PV-PQRS. To register in the PV-PQRS for PY 2014, view PY2013 registration data and view QRURs Reports (drill down, dashboard).</p> <p>* Create/Associate: <input type="radio"/> Associate to an Existing Organization <input checked="" type="radio"/> <b>Create an Organization</b></p> <p>* TIN: <input type="text"/></p> <p>Group Unique Identifier: <input type="text"/></p> <p>ACO Parent TIN: <input type="text"/></p> <p>* Legal Business Name: <input type="text"/></p> <p>* NPI 1: <input type="text"/></p> <p>* PTAN 1: <input type="text"/></p> <p>* NPI 2: <input type="text"/></p> <p>* PTAN 2: <input type="text"/></p> <p>NPI 3: <input type="text"/></p> <p>PTAN 3: <input type="text"/></p> <p>* Address Line 1: <input type="text"/> Address Line 2: <input type="text"/></p> <p>* City: <input type="text"/> * State: <input type="text" value="v"/></p> <p>* Zip Code: <input type="text"/> - Zip Code Extension: <input type="text"/></p> <p>Country: United States</p> <p>* Phone Number: <input type="text"/> Extension: <input type="text"/></p> <p>Fax Number: <input type="text"/></p> <p>Email: <input type="text"/></p> <p>Website: <input type="text"/></p> <p>* Reason for Request: <input type="text"/></p> <div style="text-align: right; margin-top: 10px;"> <input type="button" value="Next"/> <input type="button" value="Cancel"/> </div> </div>

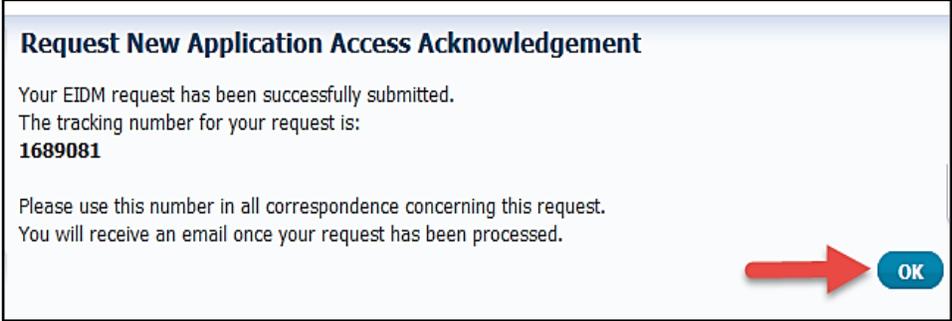
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<b>Steps</b>	<b>Screenshots</b>
<p>should be entered.</p> <p>26. Verify the information on the <b>Verification</b> screen and select <b>Submit</b>.</p>	<div style="border: 1px solid black; padding: 10px;"> <p>Address 1: <input type="text" value="1001 Test"/></p> <p>Address 2: <input type="text"/></p> <p>City: <input type="text" value="Baltimore"/></p> <p>State/Territory: <input style="border: 1px solid gray;" type="text" value="Maryland"/></p> <p>Zip Code: <input type="text" value="21209"/> Zip Code Extension: <input type="text"/></p> <p><b>Phone</b></p> <p>Company Phone Number: <input type="text" value="301-977-2015"/> Extension: <input type="text"/></p> <p>Office Phone Number: <input type="text" value="301-977-2015"/> Extension: <input type="text"/></p> <p>Create/Associate: <input type="radio"/> Associate to an Existing Organization <input checked="" type="radio"/> Create an Organization</p> <p>TIN: <input type="text" value="73-1579452"/></p> <p>Group Unique Identifier: <input type="text"/></p> <p>ACO Parent TIN: <input type="text"/></p> <p>Legal Business Name: <input type="text" value="MDM GSO 06252015"/></p> <p>NPI 1: <input type="text" value="1003003831"/></p> <p>PTAN 1: <input type="text" value="1316049141"/></p> <p>NPI 2: <input type="text" value="1003003831"/></p> <p>PTAN 2: <input type="text" value="731579452"/></p> <p>NPI 3: <input type="text"/></p> <p>PTAN 3: <input type="text"/></p> <p>Address Line 1: <input type="text" value="10001"/> Address Line 2: <input type="text"/></p> <p>City: <input type="text" value="Baltimore"/> State: <input style="border: 1px solid gray;" type="text" value="Maryland"/></p> <p>Zip Code: <input type="text" value="21211"/> Zip Code Extension: <input type="text"/></p> <p>Country: <input type="text" value="United States"/></p> <p>Phone Number: <input type="text" value="312-345-4567"/> Extension: <input type="text"/></p> <p>Fax Number: <input type="text"/></p> <p>Email: <input type="text"/></p> <p>Website: <input type="text"/></p> <p>Reason for Request: <input type="text" value="pv"/></p> <div style="text-align: right; margin-top: 10px;"> <input type="button" value="Edit"/> <input type="button" value="Submit"/> <input type="button" value="Cancel"/> </div> </div>

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Steps	Screenshots
<p>27. (a) You have successfully applied for the Security Official role.</p> <p>(b) <b>If your role request is automatically approved</b>, proceed to Step 44 to complete the Multi-Factor Authentication before you can access the 'Physician Quality and Value Programs' application using your EIDM User ID and EIDM password in order to:</p> <ul style="list-style-type: none"><li>• Register the group practice to participate in the PQRS GPRO;</li><li>• Obtain the group practice's Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report; and</li><li>• Submit an informal review request on behalf of the group practice.</li><li>• Approve requests for the 'Group Representative' role in the EIDM.</li></ul> <p>A confirmation E-mail will be sent shortly after the submission confirmation message.</p> <p><b>Note:</b> You have three (3) attempts to enter two valid NPI/PTAN combinations for two different eligible professionals who bill under the TIN. If the information is a confirmed match, the request will be automatically approved. If you exceed these attempts, your request will be sent to the QualityNet Help Desk for manual approval. The QualityNet Help Desk will contact you for further assistance within two (2) business days.</p>	

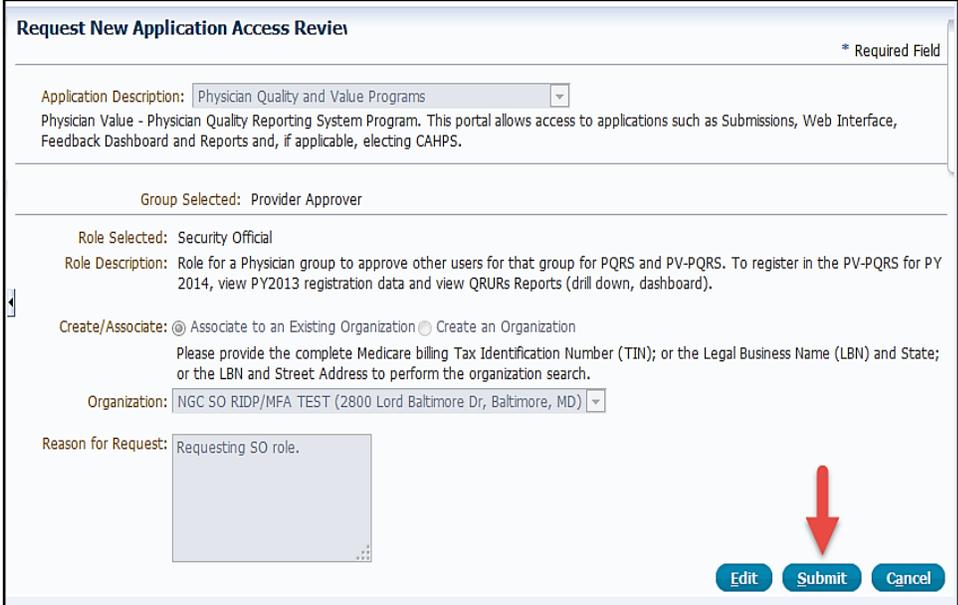
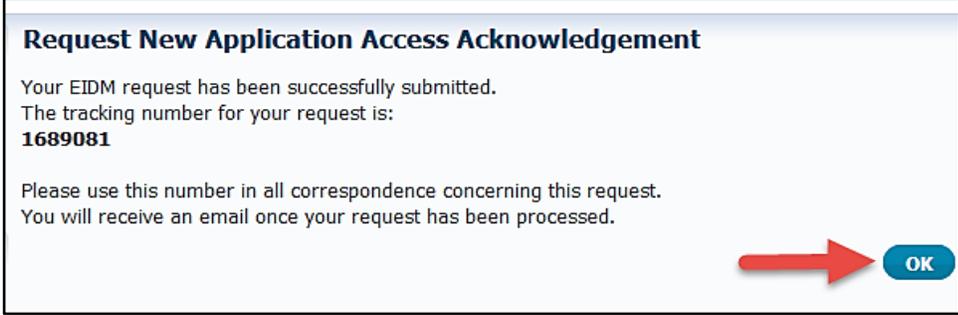
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Steps	Screenshots
<p>28. (a) If selecting <i>Associate to an Existing Organization</i> as the <b>Create/Associate</b> option, enter <b>one</b> of the following information for the group practice:</p> <ul style="list-style-type: none"> <li>i. Medicare Billing TIN</li> <li style="text-align: center;"><b>OR</b></li> <li>ii. Legal Business Name and State</li> <li style="text-align: center;"><b>OR</b></li> <li>iii. Legal Business Name and Street Address</li> </ul> <p>(b) Select <b>Search</b>.</p> <p>(c) Select your group practice from the <b>Organization</b> drop-down menu. Enter <b>Reason for Request</b> and select <b>Next</b>.</p> <p><b>Note:</b> If your group practice cannot be found, please verify that your group practice already has a user with an approved Security Official role and you entered the group practice’s Medicare billing TIN correctly. If you do not know the Security Official, contact the QualityNet Help Desk.</p>	

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# Guide for Obtaining a New EIDM Account with a ‘Physician Quality and Value Programs’ Role

Steps	Screenshots
<p>29. Verify the information on the <b>Verification</b> screen and select <b>Submit</b>.</p>	
<p>30. (a) You have successfully applied for the Security Official role.</p> <p><b>Note:</b> Another Security Official from your group practice must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.</p> <p>(b) <b>After your role request is approved</b>, proceed to Step 44 to complete the Multi-Factor Authentication before you can access the ‘Physician Quality and Value Programs’ application using your EIDM User ID and EIDM password in order to:</p> <ul style="list-style-type: none"> <li>• Register the group practice to participate in the PQRS GPRO;</li> <li>• Obtain the group practice’s Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report; and</li> <li>• Submit an informal review request on behalf of the group practice.</li> </ul>	

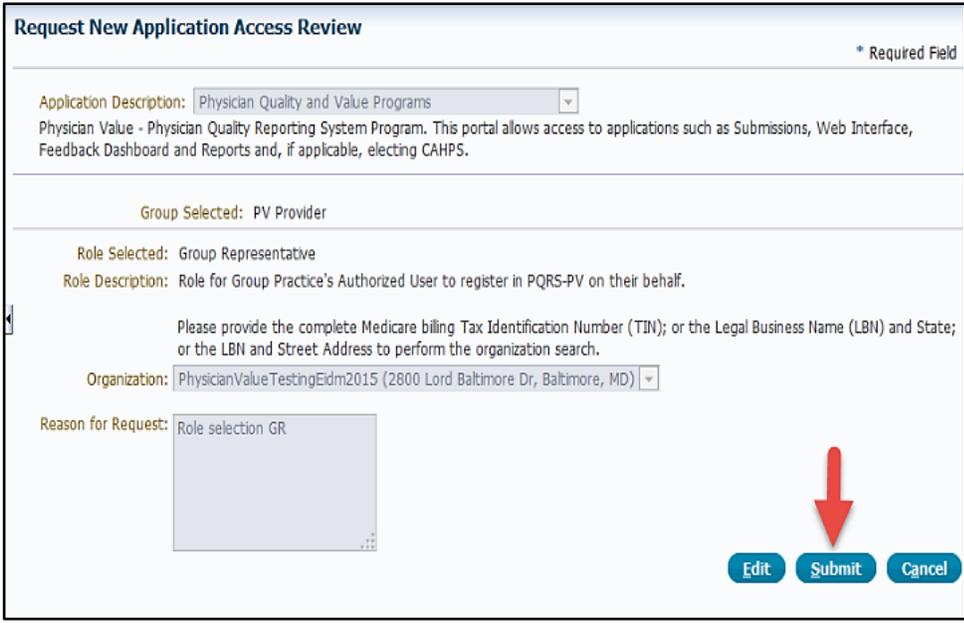
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# Guide for Obtaining a New EIDM Account with a ‘Physician Quality and Value Programs’ Role

Steps	Screenshots
<b>Follow Steps 31 to 33 to Request a ‘Group Representative’ Role</b>	
<p>31. (a) Enter one of the following information for the group practice.</p> <ul style="list-style-type: none"> <li>i. Medicare Billing TIN <b>OR</b></li> <li>ii. Legal Business Name and State <b>OR</b></li> <li>iii. Legal Business Name and Street Address</li> </ul> <p>(b) Select <b>Search</b>.</p> <p>(c) Select your group practice from the <b>Organization</b> drop-down menu. Enter <b>Reason for Request</b> and select <b>Next</b>.</p> <p><b>Note:</b> If your group practice cannot be found, please verify that your group practice already has a user with an approved Security Official role and you entered the group practice’s Medicare billing TIN correctly. If you do not know your Security Official, contact the QualityNet Help Desk.</p>	

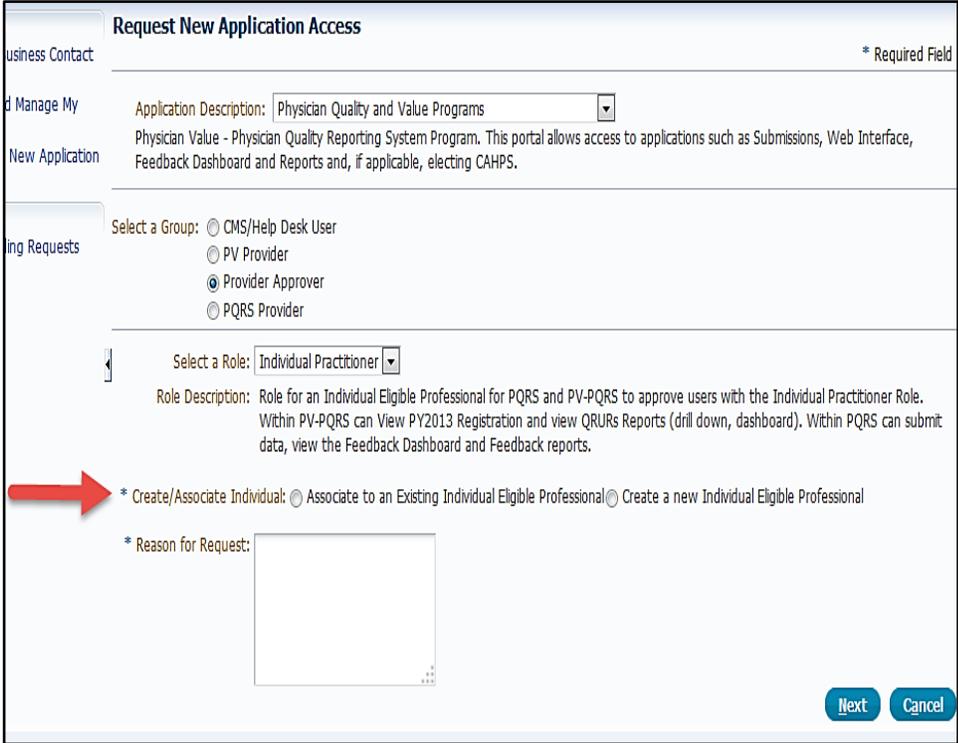
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Steps	Screenshots
<p>32. Verify the information on the <b>Verification</b> screen and select <b>Submit</b>.</p>	
<p>33. (a) You have successfully applied for the Group Representative role.</p> <p><b>Note:</b> A Security Official from your group practice must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.</p> <p>(b) <b>After your role request is approved</b>, proceed to Step 44 to complete the Multi-Factor Authentication before you can access the ‘Physician Quality and Value Programs’ application using your EIDM User ID and EIDM password in order to:</p> <ul style="list-style-type: none"> <li>• Register the group practice to participate in the PQRS GPRO;</li> <li>• Obtain the group practice’s Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report; and</li> <li>• Submit an informal review request on behalf of the group practice.</li> </ul>	

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Steps	Screenshots
<b>Follow Steps 34 to 40 to Request an ‘Individual Practitioner’ Role</b>	
<p>34. (a) If you are the first person (the solo practitioner or an authorized representative of the solo Practitioner) to sign up for an Individual Practitioner role on behalf of a solo practitioner and register the solo practitioner in the EIDM, select <b><i>Create a New Individual Eligible Professional</i></b>. Then, proceed to Step 35.</p> <p style="text-align: center;"><b>OR</b></p> <p>(b) If you are signing up for an Individual Practitioner role and the solo practitioner already exists in the EIDM, select <b><i>Associate to an Existing Individual Eligible Professional</i></b>. Then proceed to Step 38.</p>	

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Steps	Screenshots
<p>35. If selecting <b>Create a new Individual Eligible Professional</b> as the <b>Create/Associate Individual</b> option, enter the following required information for the solo practitioner:</p> <ul style="list-style-type: none"> <li>Individual Eligible Professional's (Solo Practitioner's) First Name</li> <li>Individual Eligible Professional's (Solo Practitioner's) Last Name</li> <li>Legal Business Name</li> <li>Medicare Billing TIN</li> <li>Rendering NPI</li> <li>Individual PTAN</li> <li>Address</li> <li>City</li> <li>State</li> <li>Zip Code</li> <li>Phone Number</li> <li>Reason for Request</li> </ul> <p>Select <b>Next</b>.</p> <p><b>Note:</b> In this section, enter the solo practitioner's Medicare billing <b>TIN</b>, <b>rendering NPI</b>, and the corresponding <b>individual PTAN</b> (do not use the GROUP NPI or GROUP PTAN); and enter the remaining required information.</p> <p><b>Note:</b> PTANs are alphanumeric therefore, enter the alpha characters. All leading zeros in the PTAN should be entered.</p>	<div style="border: 1px solid black; padding: 10px;"> <p>Select a Role: <input type="text" value="Individual Practitioner"/></p> <p>Role Description: Role for an Individual Eligible Professional for PQRS and PV-PQRS to approve users with the Individual Practitioner Role. Within PV-PQRS can View PY2013 Registration and view QRURs Reports (drill down, dashboard). Within PQRS can submit data, view the Feedback Dashboard and Feedback reports.</p> <p>* Create/Associate Individual: <input type="radio"/> Associate to an Existing Individual Eligible Professional <input checked="" type="radio"/> <b>Create a new Individual Eligible Professional</b></p> <p style="text-align: center;">Individual Eligible Professional Information</p> <p>* Individual Eligible Professional's First Name: <input type="text"/></p> <p>Individual Eligible Professional's Middle Name: <input type="text"/></p> <p>* Individual Eligible Professional's Last Name: <input type="text"/></p> <p>* Legal Business Name: <input type="text"/></p> <p>* TIN: <input type="text"/></p> <p>* NPI: <input type="text"/></p> <p>* PTAN: <input type="text"/></p> <p>* Address Line 1: <input type="text"/> Address Line 2: <input type="text"/></p> <p>* City: <input type="text"/> * State: <input type="text"/></p> <p>* Zip Code: <input type="text"/> Zip Code Extension: <input type="text"/></p> <p>Country: United States</p> <p>* Phone Number: <input type="text"/> Extension: <input type="text"/></p> <p>Fax Number: <input type="text"/></p> <p>Email: <input type="text"/></p> <p>Website: <input type="text"/></p> <p>* Reason for Request: <input type="text"/></p> <div style="text-align: right; margin-top: 20px;"> <input type="button" value="Next"/> <input type="button" value="Cancel"/> </div> </div>

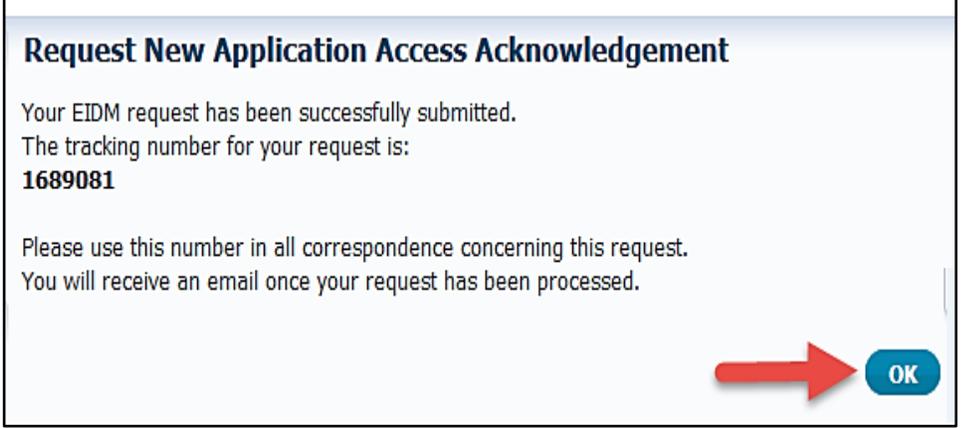
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Steps	Screenshots
36. Verify the information on the <b>Verification</b> screen and select <b>Submit</b> .	 <p>The screenshot shows a verification form with the following fields and values:</p> <ul style="list-style-type: none"><li>TIN: 04-3616899</li><li>NPI: 1033175922</li><li>PTAN: GO999A</li><li>Address Line 1: 15 Main St</li><li>Address Line 2: (empty)</li><li>City: Columbia</li><li>State: Maryland</li><li>Zip Code: 21055</li><li>Zip Code Extension: (empty)</li><li>Country: United States</li><li>Phone Number: 345-675-6786</li><li>Extension: (empty)</li><li>Fax Number: (empty)</li><li>Email: (empty)</li><li>Website: (empty)</li><li>Reason for Request: EIDM testing</li></ul> <p>At the bottom right, there are three buttons: Edit, Submit, and Cancel. A large red arrow points down to the Submit button.</p>

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# Guide for Obtaining a New EIDM Account with a 'Physician Quality and Value Programs' Role

Steps	Screenshots
<p>37. (a) You have successfully applied for the Individual Practitioner role.</p> <p>(b) <b>After your role request is automatically approved</b>, proceed to Step 44 to complete the Multi-Factor Authentication before you can access the 'Physician Quality and Value Programs' application using your EIDM User ID and EIDM password in order to:</p> <ul style="list-style-type: none"><li>• Obtain the solo practitioner's Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report,</li><li>• Submit a Value Modifier Informal Review Request on behalf of a solo practitioner; and</li><li>• Approve request for the Individual Practitioner Representative role in the EIDM.</li></ul> <p>A confirmation E-mail will be sent shortly after the submission confirmation message.</p> <p><b>Note:</b> You have three (3) attempts to enter the valid NPI/PTAN combinations for eligible professionals who bill under the TIN. If the information is a confirmed match, the request will be automatically approved. If you exceed these attempts, your request will be sent to the QualityNet Help Desk for manual approval. The QualityNet Help Desk will contact you for further assistance within two (2) business days.</p>	 <p><b>Request New Application Access Acknowledgement</b></p> <p>Your EIDM request has been successfully submitted. The tracking number for your request is: <b>1689081</b></p> <p>Please use this number in all correspondence concerning this request. You will receive an email once your request has been processed.</p> <p> <b>OK</b></p>

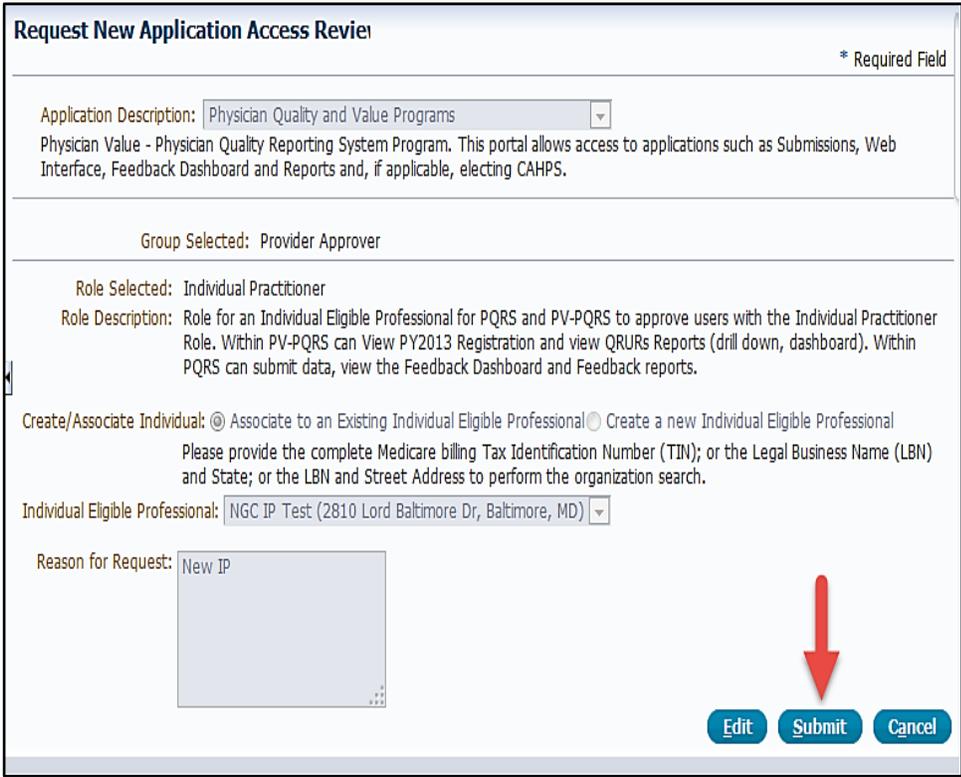
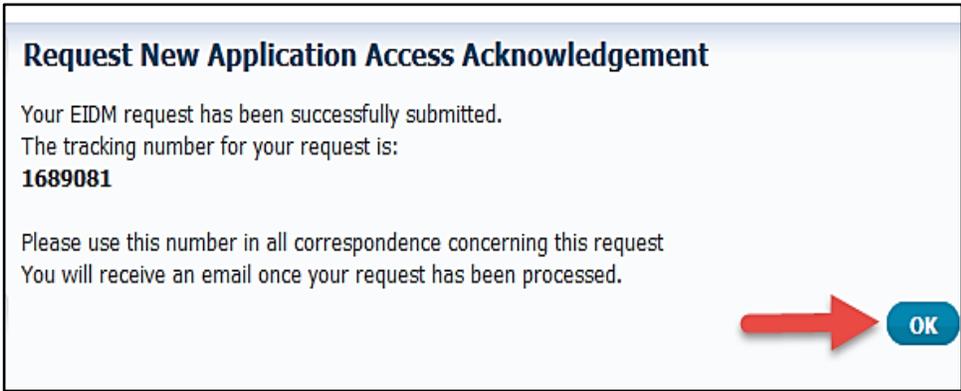
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# Guide for Obtaining a New EIDM Account with a ‘Physician Quality and Value Programs’ Role

Steps	Screenshots
<p>38. (a) If selecting <i>Associate to an Existing Individual Eligible Professional</i> as the <b>Create/Associate Individual</b>, enter one of the following information for the solo practitioner:</p> <ol style="list-style-type: none"> <li>i. Medicare Billing TIN <b>OR</b></li> <li>ii. Legal Business Name and State <b>OR</b></li> <li>iii. Legal Business Name and Street Address</li> </ol> <p>(b) Select <i>Search</i>.</p> <p>(c) Select the solo practitioner from the <b>Individual Eligible Professional</b> drop-down menu. Enter <b>Reason for Request</b> and select <i>Next</i>.</p> <p><b>Note:</b> If the solo practitioner cannot be found, please verify that the solo practitioner already has a user with an approved Individual Practitioner role and you entered the solo practitioner’s Medicare billing TIN correctly. If you do not know the Individual Practitioner, contact the QualityNet Help Desk.</p>	

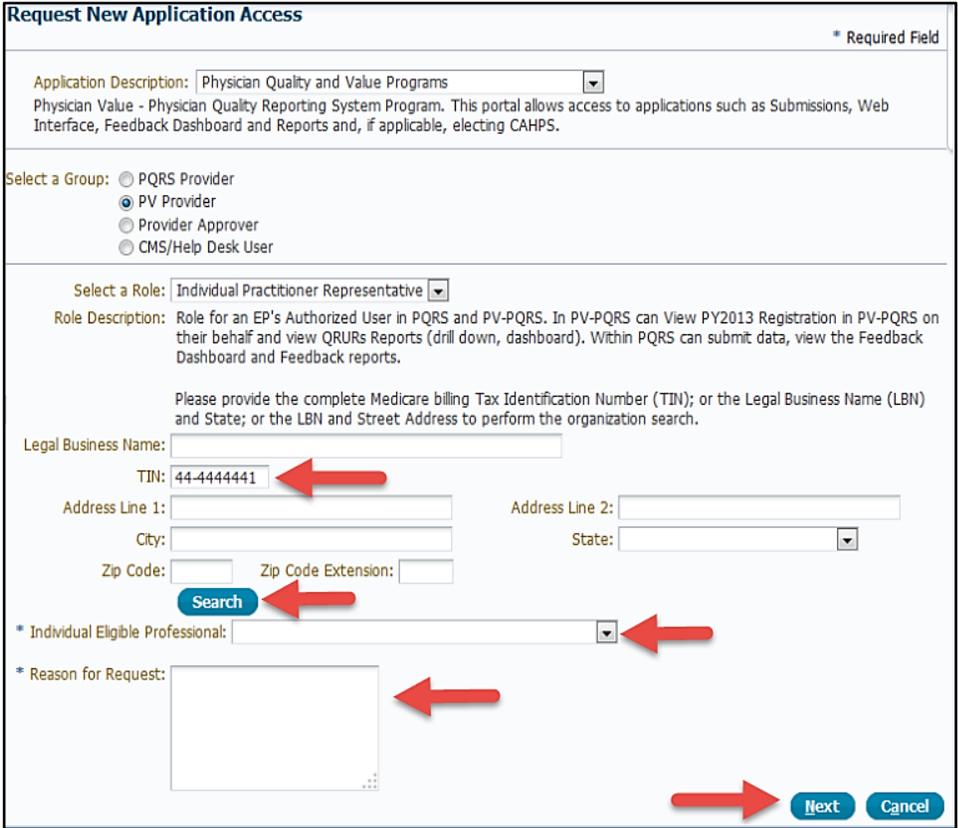
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Steps	Screenshots
<p>39. Verify the information on the <b>Verification</b> screen and select <b>Submit</b>.</p>	
<p>40. (a) You have successfully applied for the Individual Practitioner role.</p> <p><b>Note:</b> Another Individual Practitioner on behalf of the solo practitioners must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.</p> <p><b>(b) After your role request is approved,</b> proceed to Step 44 to complete the Multi-Factor Authentication before you can access the ‘Physician Quality and Value Programs’ application using your EIDM User ID and EIDM password in order to:</p> <ul style="list-style-type: none"> <li>• Obtain the solo practitioner’s Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report.</li> <li>• Submit a Value Modifier Informal Review request on behalf of</li> </ul>	

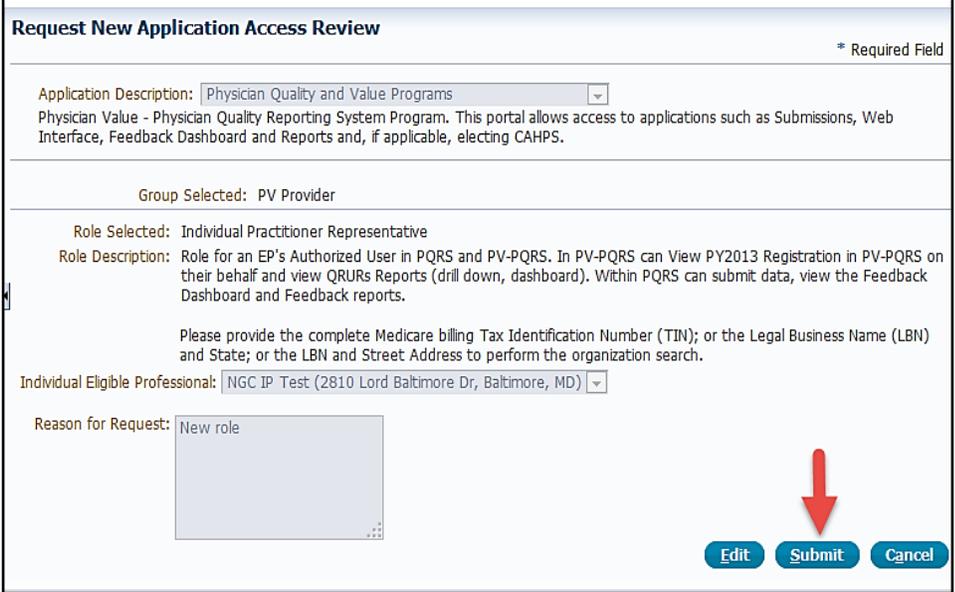
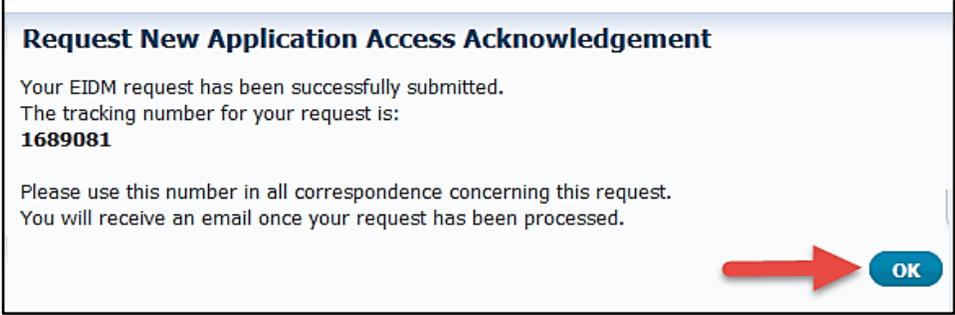
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Steps	Screenshots
a solo practitioner; and <ul style="list-style-type: none"> <li>• Approve requests for the ‘Individual Practitioner Representative’ role in the EIDM.</li> </ul>	
<b>Follow Steps 41 to 43 to Request an “Individual Practitioner Representative” Role</b>	
41. (a) Enter one of the following information for the solo practitioner: <ol style="list-style-type: none"> <li>i. Medicare Billing TIN <b>OR</b></li> <li>ii. Legal Business Name and State <b>OR</b></li> <li>iii. Legal Business Name and Street Address</li> </ol> (b) Select <i>Search</i> .  (c) Select the solo practitioner from the <b>Individual Eligible Professional</b> drop-down menu. Enter the <i>Reason for Request</i> and select <i>Next</i> .	 <p>The screenshot shows the 'Request New Application Access' form. Red arrows point to the following elements: the TIN field containing '44-4444441', the 'Search' button, the 'Individual Eligible Professional' dropdown menu, the 'Reason for Request' text area, and the 'Next' button.</p>
<p><b>Note:</b> If the solo practitioner cannot be found, please verify that the solo practitioner already has a user with an approved Individual Practitioner role and you entered the solo practitioner’s Medicare billing TIN correctly. If you do not know the Individual Practitioner, contact the QualityNet Help Desk.</p>	

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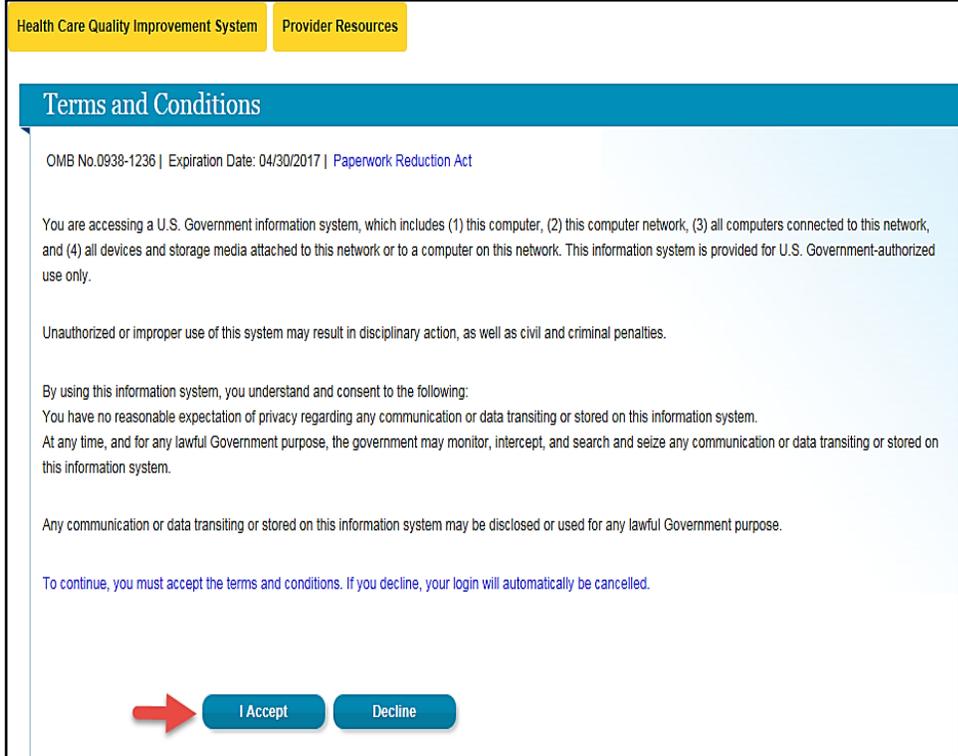
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Steps	Screenshots
<p>42. Verify the information on the <b>Verification</b> screen and select <b>Submit</b>.</p>	
<p>43. (a) You have successfully applied for the Individual Practitioner Representative role.</p> <p><b>Note:</b> An Individual Practitioner on behalf of the solo practitioner must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.</p> <p>(b) <b>After your role request is approved,</b> proceed to next step to complete the Multi-Factor Authentication before you can access the ‘Physician Quality and Value Programs’ application using your EIDM User ID and EIDM password in order to:</p> <ul style="list-style-type: none"> <li>Obtain the solo practitioner’s Mid-Year and Annual QRUR, Supplemental QRUR, and PQRS Feedback Report. Submit a Value Modifier Informal Review request on behalf of a solo practitioner.</li> </ul>	

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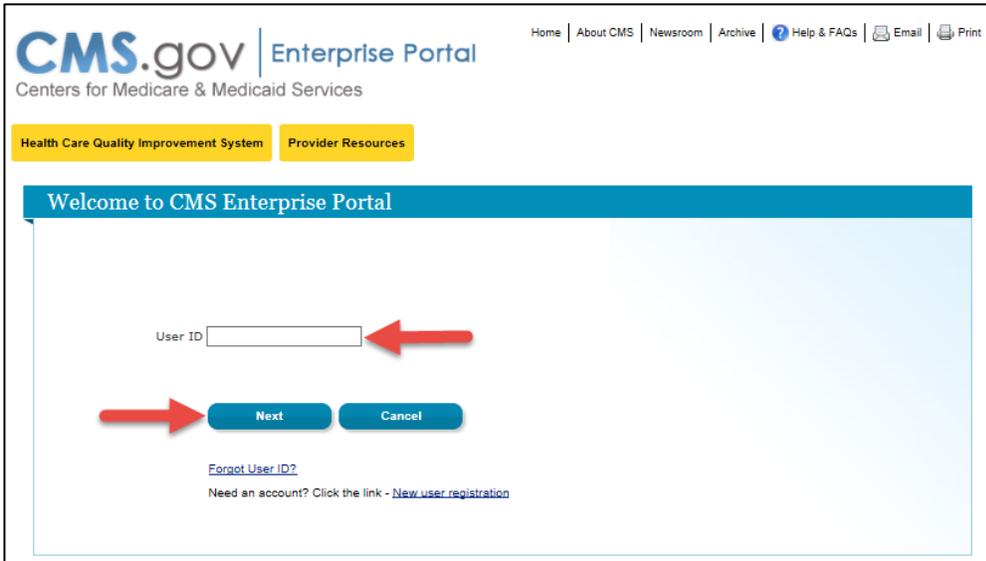
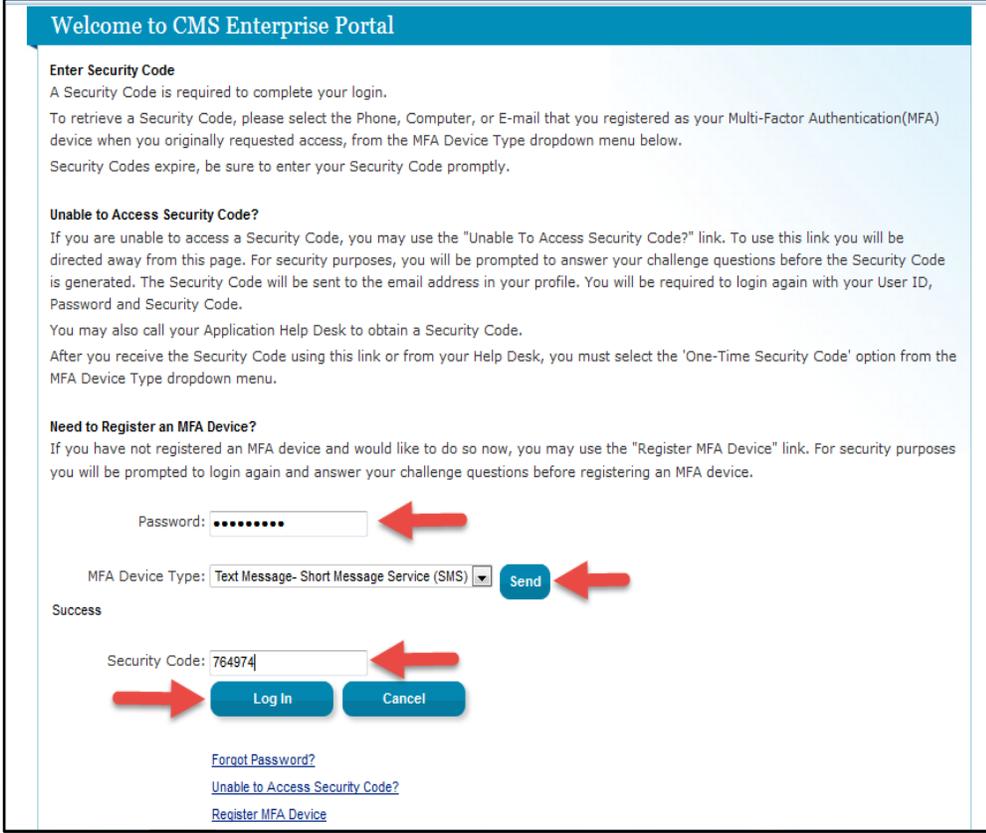
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- V. **Completing the Multi-Factor Authentication (MFA) – Multi-Factor Authentication will need to be completed each time you log into the CMS Enterprise Portal. Additional information on how the MFA process works can be found at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-ORUR.html>.**

Steps	Screenshots
<p>44. <b>Log In to the CMS Enterprise Portal and then Accept the Terms and Conditions.</b></p> <p><b>Note:</b> Multi-Factor Authentication (MFA) is a new approach to security authentication which will help improve CMS’ ability to reduce fraud and ensure system security. It requires users to provide more than one form of verification in order to prove their identity in order to access certain information provided via the ‘Physician Quality and Value Programs’ application. MFA registration is required only once when you are requesting a role but will be verified at every logon.</p>	

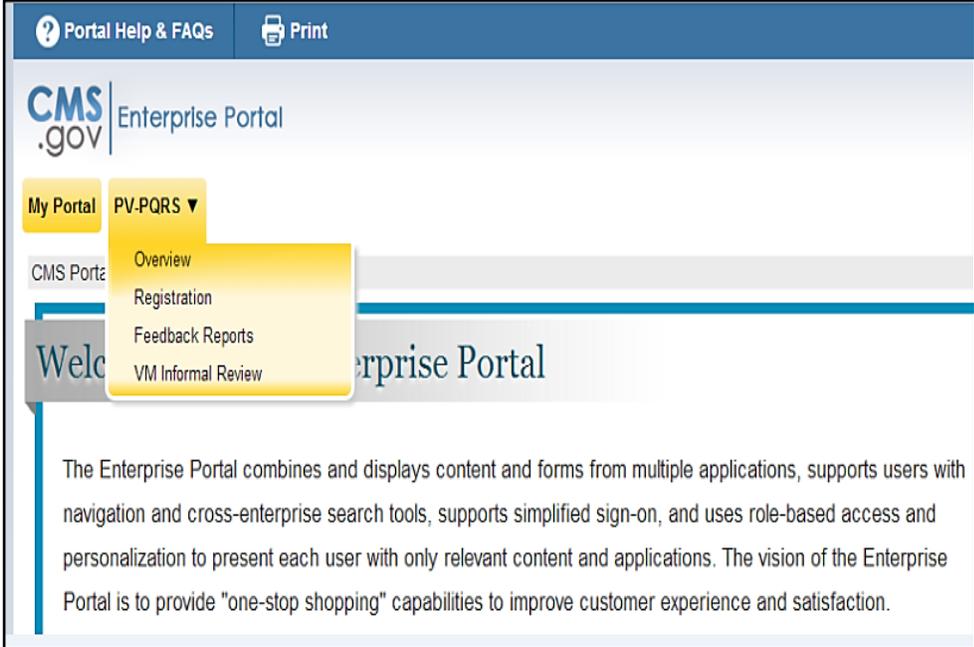
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Steps	Screenshots
<p>45. Enter Your EIDM User ID and select <i>Next</i> on the <b>Welcome to CMS Enterprise Portal</b> screen.</p>	
<p>46. <b>Multi-Factor Authentication (MFA)</b> will need to be completed each time you log into the CMS Enterprise Portal.</p> <p>a) Enter Your EIDM <b>Password</b>.</p> <p>b) Select the <b>MFA Device Type</b> from the drop-down menu.</p> <p><b>Note:</b> You previously registered to complete the MFA process when setting-up your <b>Physician Quality and Value Programs</b> account. Please ensure that you select the same <b>MFA Device Type</b> you selected when registering for the MFA process during your initial account set-up. You will not be able to complete the MFA process if your selection from the <b>MFA Device Type</b> does not match your initial selection when setting-up your account.</p> <p>c) Select <i>Send</i> to retrieve the <b>Security Code</b>.</p> <p><b>Note:</b> The <i>Send</i> option will appear only when the following MFA Device Type is selected:</p>	

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Steps	Screenshots
<ul style="list-style-type: none"> <li>• Text Message-Short Message Service (SMS)</li> <li>• Interactive Voice Response (IVR)</li> <li>• Email</li> </ul> <p>d) Enter the <b>Security code</b> and select <b>Log In.</b></p>	
<p>47. You will be directed to <b>CMS Portal Homepage</b>. Select <b>Registration</b> (to register for the PQRS GPRO), <b>Feedback Reports</b> (to obtain a Mid-Year or Annual QRUR, Supplemental QRUR, or PQRS Feedback Report), or <b>VM Informal Review</b> (to submit an informal review request) from the <b>PV-PQRS</b> drop-down menu.</p>	 <p>The Enterprise Portal combines and displays content and forms from multiple applications, supports users with navigation and cross-enterprise search tools, supports simplified sign-on, and uses role-based access and personalization to present each user with only relevant content and applications. The vision of the Enterprise Portal is to provide "one-stop shopping" capabilities to improve customer experience and satisfaction.</p>

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