

Obtaining the 'PV-PQRS Group Security Official' Role Quick Reference Guide

Introduction

The primary or backup Physician Value-Physician Quality Reporting System (PV-PQRS) Group Security Official role allows the user to perform the following tasks on behalf of the group practice:

- Select/change the group practice's PQRS group reporting mechanism for 2013.
- If the group practice has 100 or more eligible professionals, elect quality-tiering to calculate the Value-Based Payment Modifier in 2015.
- View the group practice's 2012 Quality and Resource Use Report after September 16, 2013.
- Approve requests for the "PV-PQRS Group Representative" role in IACS.

Group practices are identified in IACS by their Medicare billing Taxpayer Identification Number (TIN).

Please gather the following information before you begin the process for signing up for an IACS account with a PV-PQRS Group Security Official role:

- **User Information:** First Name, Last Name, Social Security Number, Date of Birth, and E-mail.
- **Professional Contact Information:** Office Telephone, Company Name, and Address.
- **Organization Information:**
 - For a **primary** Group Security Official role: Group practice's Medicare billing TIN, Legal Business Name, Rendering National Provider Identifiers (NPIs) for **two** individual physicians who bill under the TIN and their corresponding Provider Transaction Access Numbers (PTANs), Address, and Phone Number.
 - OR**
 - For a **backup** Group Security Official role: Group practice's Medicare billing TIN.

Step-by-Step Instructions: You have **15 minutes** to complete each screen (unless a different time is noted on the screen). Otherwise, you will lose all of the information you filled in and will need to start the process again. Please follow each step listed below unless otherwise noted for primary or backup role-specific screens.

Steps	Screenshots (if available)
1. Navigate to https://applications.cms.hhs.gov . 2. Select Enter CMS Applications Portal , select Account Management , select New User Registration , and select PV/PQRS Registration System .	
3. After accepting the Terms and Conditions , enter the required User Information in the New User Registration screen and select Next .	<p>New User Registration</p> <p> New User Registration Email Verification Contact Information Authentication Questions Review Request Acknowledgement </p> <p>CMS is authorized to validate your personal information using your legal name, Date of Birth and Social Security Number. <input type="button" value="Enter Random Test-data"/></p> <p>User Information</p> <p>Title: <input type="text"/> First Name: <input type="text"/> * Last Name: <input type="text"/> * Suffix: <input type="text"/></p> <p>Middle Initial: <input type="text"/> Professional Credentials: <input type="text"/> Example: MD, RN, LPN, MBA, PhD, etc. (Limit 12 characters)</p> <p>Social Security Number: <input type="text"/> * Valid SSN Format is XXX-XX-XXXX Date of Birth: <input type="text"/> * Valid Date of Birth format is mm/dd/yyyy</p> <p>E-mail: <input type="text"/> * Confirm E-mail: <input type="text"/> *</p> <p>Valid E-mail address format is user@internetprovider.domain. List of allowed domains: vi, com, gov, net, org, us, mil, biz, edu, pro</p> <p><input type="button" value="Next"/> <input type="button" value="Cancel"/></p>

If you have questions or need further assistance, please contact the QualityNet Help Desk by phone at (866) 288-8912 (TTY 1-877-715-6222) or by email at qnet-support@sdps.org. Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Obtaining the 'PV-PQRS Group Security Official' Role Quick Reference Guide

<p>4. Enter the verification code sent to your registered email and select Next.</p> <p>Note: The registered email is the email you provided in Step 3.</p>	<h3>E-mail Address Verification</h3> <p>New User Registration Email Verification Contact Information Authentication Questions Review Request Acknowledgement</p> <p>An e-mail has been sent to you at ladams-2013_01-2355@jdm.com with the 8-digit verification code. Please enter the code in the box below from the e-mail and select 'Next' within 30 minutes. Failure to do so will result in cancellation of your Registration Request.</p> <p>Verification Code: <input type="text" value="25882500"/> * Re-send verification code</p>
<p>5. Enter the required information in the Professional Contact Information section.</p> <p>Note: The User Information section is pre-populated from Step 3.</p>	<h3>New User Registration</h3> <p>New User Registration Email Verification Contact Information Authentication Questions Review Request Acknowledgement</p> <p>CMS is authorized to validate your personal information using your legal name, Date of Birth and Social Security Number. <input type="text" value="Enter Random Test-data"/></p> <h4>User Information</h4> <p>Title: <input type="text" value="Ms."/> * <input type="text" value="Hannah"/> * <input type="text" value="Smith-Walker"/> * Suffix: <input type="text"/></p> <p><input type="text" value="V"/> * <input type="text" value="BCom"/> Example: MD, RN, LPN, MBA, PHD, etc. (Limit 12 characters)</p> <p>Social Security Number: <input type="text" value="356-50-0011"/> * Valid SSN Format is XXX-XX-XXXX Date of Birth: <input type="text" value="03/29/1973"/> * Valid Date of Birth format is mm/dd/yyyy</p> <p><input type="text" value="hwalker-2013_01-7851@jdm.com"/> * <input type="text" value="hwalker-2013_01-7851@jdm.com"/> *</p> <p>Valid E-mail address format is user@internetprovider.domain. List of allowed domains: vi.com, gov, net, org, us, mil, biz, edu, pro</p> <h4>Professional Contact Information</h4> <p><input type="text" value="785-785-7853"/> * <input type="text" value="784"/> Valid Phone Number Format is XXX-XXX-XXXX</p> <p><input type="text" value="ABCD Inc."/> * <input type="text" value="784-784-7849"/> <input type="text" value="784"/></p> <p><input type="text" value="101 Main Street"/> * <input type="text" value="Suite 102"/></p> <p><input type="text" value="Baltimore"/> * State/Territory: <input type="text" value="MD"/> * <input type="text" value="78582"/> * - <input type="text" value="7858"/></p>
<p>6. Select the PV PQRS Group Security Official role under Access Request.</p> <p>Note: The screen will refresh after you select the role and display the appropriate fields that you need to complete.</p> <p>If you are requesting a primary Group Security Official role, proceed to Step 7(a).</p> <p>If you are requesting a backup Group Security Official role, proceed to Step 7(b).</p>	<h3>Access Request</h3> <p>User Type: PV/PQRS Registration System</p> <p>Role: <input type="text" value="PV PQRS Group Security Official"/> *</p>
<p>7. (a) Primary Group Security Official: If you are the first person in your group practice to sign up for an IACS account, select Create a New Organization. Then proceed to Step 8(a).</p> <p style="text-align: center;">OR</p> <p>(b) Backup Group Security Official: If you are signing up for an IACS</p>	<h3>Access Request</h3> <p>User Type: PV/PQRS Registration System</p> <p>Role: <input type="text" value="PV PQRS Group Security Official"/> *</p> <p><input checked="" type="radio"/> Create a new Organization <input type="radio"/> Associate to an Existing Organization</p>

If you have questions or need further assistance, please contact the QualityNet Help Desk by phone at (866) 288-8912 (TTY 1-877-715-6222) or by email at qnet-support@sdps.org. Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Obtaining the 'PV-PQRS Group Security Official' Role Quick Reference Guide

<p>account in order to become your group practice's backup Group Security Official, select Associate to an Existing Organization. Then proceed to Step 8(b)(1).</p>	
<p>8. (a) Primary Group Security Official: Enter your group practice's Medicare billing TIN; enter two unique rendering NPIs for individual physicians who bill under the TIN (do not use the <u>group</u> NPI); enter two PTANs, where each PTAN corresponds to one of the rendering NPIs; and enter the remaining required Organization Information. Then proceed to Step 9.</p>	<p>Organization Information</p> <p><input type="text"/> TIN: <input type="text"/> * Group Practice's 9 digit Medicare Billing TIN in XX-XXXXXX format</p> <p><input type="text"/> Legal Business Name: <input type="text"/> * Group Practice's Legal Business Name</p> <p><input type="text"/> NPI 1: <input type="text"/> * <input type="text"/> PTAN 1: <input type="text"/> * Individual Physician's PTAN corresponding to NPI 1</p> <p><input type="text"/> NPI 2: <input type="text"/> * <input type="text"/> PTAN 2: <input type="text"/> * Individual Physician's PTAN corresponding to NPI 2</p> <p><input type="text"/> NPI 3: <input type="text"/> <input type="text"/> PTAN 3: <input type="text"/> Individual Physician's PTAN corresponding to NPI 3</p> <p><input type="text"/> Address Line 1: <input type="text"/> * <input type="text"/> Address Line 2: <input type="text"/></p> <p><input type="text"/> City: <input type="text"/> * <input type="text"/> State: <input type="text"/> * <input type="text"/> Zip Code: <input type="text"/> * - <input type="text"/> Zip 4: <input type="text"/></p> <p><input type="text"/> Country: United States</p> <p><input type="text"/> Phone Number: <input type="text"/> * Group Practice's 10 digit contact phone number in XXX-XXX-XXXX format</p> <p><input type="text"/> Fax Number: <input type="text"/> Group Practice's 10 digit fax number in XXX-XXX-XXXX format</p>
<p>8. (b)(1) Backup Group Security Official: Enter your group practice's Medicare billing TIN and select Search.</p>	<p>Organization Search</p> <p><input type="text"/> TIN: <input type="text"/> * Group Practice's 9 digit Medicare Billing TIN in XX-XXXXXX format</p> <p><input type="button" value="Search"/></p>
<p>8. (b)(2) Backup Group Security Official: Select the Organization's Name from the Organization dropdown menu.</p> <p>Note: If your Organization cannot be found, please verify that your group practice has an approved primary PV-PQRS Group Security Official and you entered the group practice's Medicare billing TIN correctly. If you do not know the primary Group Security Official, contact the QualityNet Help Desk.</p>	<p>Select the Organization you want to associate with, from the list below.</p> <p><input type="text"/> Organization: <input type="text"/> * <input type="button" value="New Search"/> Click 'New Search' to search for a new Organization.</p>
<p>9. Enter the Justification for Action (e.g., new user or modify existing account) and select Next.</p>	<p>Justification for Action: <input type="text"/></p> <p style="text-align: right;">Request initiated on 03/29/2013 01:09:45 PM *</p> <p><input type="button" value="Next"/> <input type="button" value="Cancel"/></p>

If you have questions or need further assistance, please contact the QualityNet Help Desk by phone at (866) 288-8912 (TTY 1-877-715-6222) or by email at qnet-support@sdps.org. Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Obtaining the 'PV-PQRS Group Security Official' Role Quick Reference Guide

10. Complete at least two **Authentication Questions** and select **Next**. (*Note: Fields are case sensitive*)

Authentication Questions

Please answer at least 2 of the following questions, and then select "Next" to proceed with registration.

[New User Registration](#)
[Email Verification](#)
[Contact Information](#)
[Authentication Questions](#)
[Review Request](#)
[Acknowledgement](#)

Question	Answer
What is your grandmother's maiden name?	1
What was the model of your first car?	1
What is the middle name of your oldest cousin?	
What was the name of your first pet?	
What was your childhood phone number?	
What was the first name of your first boyfriend?	
What was the first name of your first girlfriend?	
What is the name of your first elementary school?	
What was your childhood street name?	
What was the name of your first employer?	
What was your grandfather's profession?	
What was the name of your first college roommate?	
Where was your wedding reception held?	

[Back](#)
[Next](#)
[Cancel](#)

11. Verify that the information is correct on the **Review Registration Details** screen and select **Submit**.

Review Registration Details

[New User Registration](#)
[Email Verification](#)
[Contact Information](#)
[Authentication Questions](#)
[Review Request](#)
[Acknowledgement](#)

The following is the information you entered on the New User Registration Form.

Please review the information below to verify correctness.

- To modify any of the information, click 'Edit'.
- If the information is correct and you wish to proceed, click 'Submit'.

First Name:	First	MI:	M	Last Name:	Last
Title:		Suffix:		Professional Credentials:	MD
Social Security Number:	*****112				
Date of Birth:	01/01/2001				
E-mail:	test1@test.com				
Office Telephone:	301-301-3011				
Company Name:	MY EYE DR	Company Telephone:			
Address 1:	2910 Lord Baltimore Dr	Address 2:			
City:	Baltimore	State/Territory:	MD	Zip Code:	21244
User Type:	PV/PQRS Registration System				
Role:	PV PQRS Group Security Official				
TIN:	21-1111112				
Legal Business Name:	MY EYE DR				
NPI 1:	1234567890	PTAN 1:	1234567890		
NPI 2:	0987654321	PTAN 2:	0987654321		
NPI 3:	1111111111	PTAN 3:	1111111111		
Address Line 1:	2810 Lord Baltimore Dr	Address Line 2:			
City:	Baltimore	State:	MD	Zip Code:	21244
Zip 4:					
Phone Number:	301-301-3011				
Fax Number:					

Authentication Questions

Question	Answer
What is your grandmother's maiden name?	Smith
What was the model of your first car?	Honda

[Submit](#)
[Edit](#)
[Cancel](#)

If you have questions or need further assistance, please contact the QualityNet Help Desk by phone at (866) 288-8912 (TTY 1-877-715-6222) or by email at qnet-support@sdps.org. Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Obtaining the 'PV-PQRS Group Security Official' Role Quick Reference Guide

<p>12. Record the registration request tracking number displayed on the Registration Acknowledgement screen.</p>	<p>Registration Acknowledgement</p> <p>New User Registration Email Verification Contact Information Authentication Questions Review Request Acknowledgement</p> <p>Your IACS request has been successfully submitted. </p> <p>The tracking number for your request is: REQ-1364575271971 Please use this number in all correspondence concerning this request.</p> <p>You will be contacted via e-mail after your request has been processed.</p> <p>Click 'OK' to close your browser window.</p> <p><input type="button" value="OK"/></p>
<p>13. Once the request is approved, you will receive an IACS User ID and temporary password in two separate emails sent to the registered email address.</p> <p>Note: The Centers for Medicare and Medicaid Services (CMS) will review a request for a <u>primary Group Security Official</u> role and notify the requestor of approval or denial within 24 hours after the request is submitted. CMS will approve a request for a <u>backup Group Security Official</u> role after verifying with the <u>primary</u> Group Security Official by phone that the requestor should have the backup Group Security Official role.</p> <p>14. After receiving your IACS User ID and temporary password, log into https://applications.cms.hhs.gov to change your password. Select Enter CMS Applications Portal, select Account Management, select My Profile, and accept the Terms and Conditions. Enter your IACS User ID and temporary password in the Login to IACS screen and select Log In. Change your password when prompted.</p> <p>15. You will be able to use your IACS User ID and password to log into https://portal.cms.gov in order to</p> <ol style="list-style-type: none"> (1) Access the PV-PQRS Registration System between July 15, 2013 and October 15, 2013; and (2) For group practices with 25 or more eligible professionals, view the group practice's 2012 Quality and Resource Use Report after September 16, 2013. 	

If you have questions or need further assistance, please contact the QualityNet Help Desk by phone at (866) 288-8912 (TTY 1-877-715-6222) or by email at qnet-support@sdps.org. Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Obtaining the 'PV-PQRS Group Security Official' Role Quick Reference Guide

Approval of 'PV-PQRS Group Representative' Roles

The primary or backup Group Security Official must approve requests for 'PV-PQRS Group Representative' roles. The request must be approved within 12 calendar days after it has been submitted. Otherwise, the request will be canceled and need to be resubmitted.

Step-by-Step Instructions

1. Navigate to <https://applications.cms.hhs.gov> .
2. Click **Enter CMS Applications Portal**, select **Account Management**, and select **My Profile**.
3. After accepting the **Terms and Conditions**, enter your IACS User ID and Password on the **Login to IACS** screen and select **Login**.
4. Select **Pending Approvals**.
Note: The **Pending Approvals** link will only appear if there is a request pending for a representative role.
5. Click on the appropriate request under the **Process** heading on the **Inbox** screen.
6. Review the request information and enter the **Approval/Rejection Justification**.
7. Select **Approve** to approve the request, **Reject** to reject the request, or **Defer** to defer the request.

If you have questions or need further assistance, please contact the QualityNet Help Desk by phone at (866) 288-8912 (TTY 1-877-715-6222) or by email at qnet support@sdps.org. Normal business hours are Monday-Friday from 8 am to 8 pm EST.