Quick Reference Guide for Accessing the 2013 QRUR and Performance Dashboard

I. Introduction

On September 30th, 2014, the Centers for Medicare and Medicaid Services (CMS) made available the 2013 Quality and Resource Use Reports (QRURs) to every physician group practices and solo practitioner nationwide. The 2013 QRURs are not available for groups and solo practitioners that participated in the Medicare Shared Savings Program, the Pioneer Accountable Care Organization Model, or the Comprehensive Primary Care Initiative in 2013 or for non-physician solo practitioners or groups (e.g., nurse practitioners) that did not have at least one physician billing under the group in 2013. Group practices and solo practitioners are identified in the QRURs by their Taxpayer Identification Number (TIN). The 2013 QRURs contain data regarding quality and cost of care for calendar year (CY) 2013. This is the same performance period that will be used for calculating the Value-Based Payment Modifier (VM) applicable to physician payments for items and services furnished under the Medicare Physician Fee Schedule for groups of 100 or more eligible professionals (EPs) in 2015. More information about the QRURs is available at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2013-QRUR.html. More information about the VM is available at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/ValueBasedPaymentModifier.html.

This Quick Reference Guide illustrates how to access and download a QRUR, along with the supplemental exhibits and Performance Dashboard from the CMS Enterprise Portal. The Performance Dashboard provides a summary of performance highlights and applicable VM information. It also provides quality and cost performance information in a manner that allows physician practices to see how the VM may affect their Medicare payments. The QRURs and supplemental exhibits can be downloaded and exported in PDF and Excel Format. The data in the QRUR is also available for download to an exportable comma-separated values (CSV) file.

II. Getting Started

Authorized representatives of groups and solo practitioners can access the QRURs at https://portal.cms.gov using an Individuals Authorized Access to the CMS Computer Services (IACS) account with one of the following Physician Value (PV)-PQRS System roles:

- **For groups with 2 or more EPs (TINs with 2 or more individual National Provider Identifiers (NPI)):**
  - PV-PQRS Group Security Official (primary or back-up)
  - PV-PQRS Group Representative
- **For a solo practitioner (TIN with only 1 individual NPI):**
  - PV-PQRS Individual (primary or back-up)
  - PV-PQRS Individual Representative

Authorized representatives 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. Additional information about obtaining QRURs and supplemental exhibits using an IACS account is available at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2013-QRUR.html.

- If a group has already registered and selected its PQRS group reporting mechanism in the PV-PQRS Registration System, then that same person who registered the group can access the group's QRUR using their IACS User ID and password.
- If a group or solo practitioner does not yet have an authorized representative with an IACS account, then one person representing the group or solo practitioner must sign up for an IACS account with the primary Group Security Official role (if representing a group) or the primary Individual role (if representing a solo practitioner).
- If a group or a solo practitioner has a representative with an existing IACS account, but not one of the group-specific (if representing a group) or individual-specific (if representing a solo practitioner) 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, please contact the Quality Net help desk.

For questions related to an IACS account and accessing your QRUR, please contact the QualityNet Help Desk:

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

For questions about information contained in your QRUR or to provide feedback to CMS, please contact the Physician Value Help Desk:

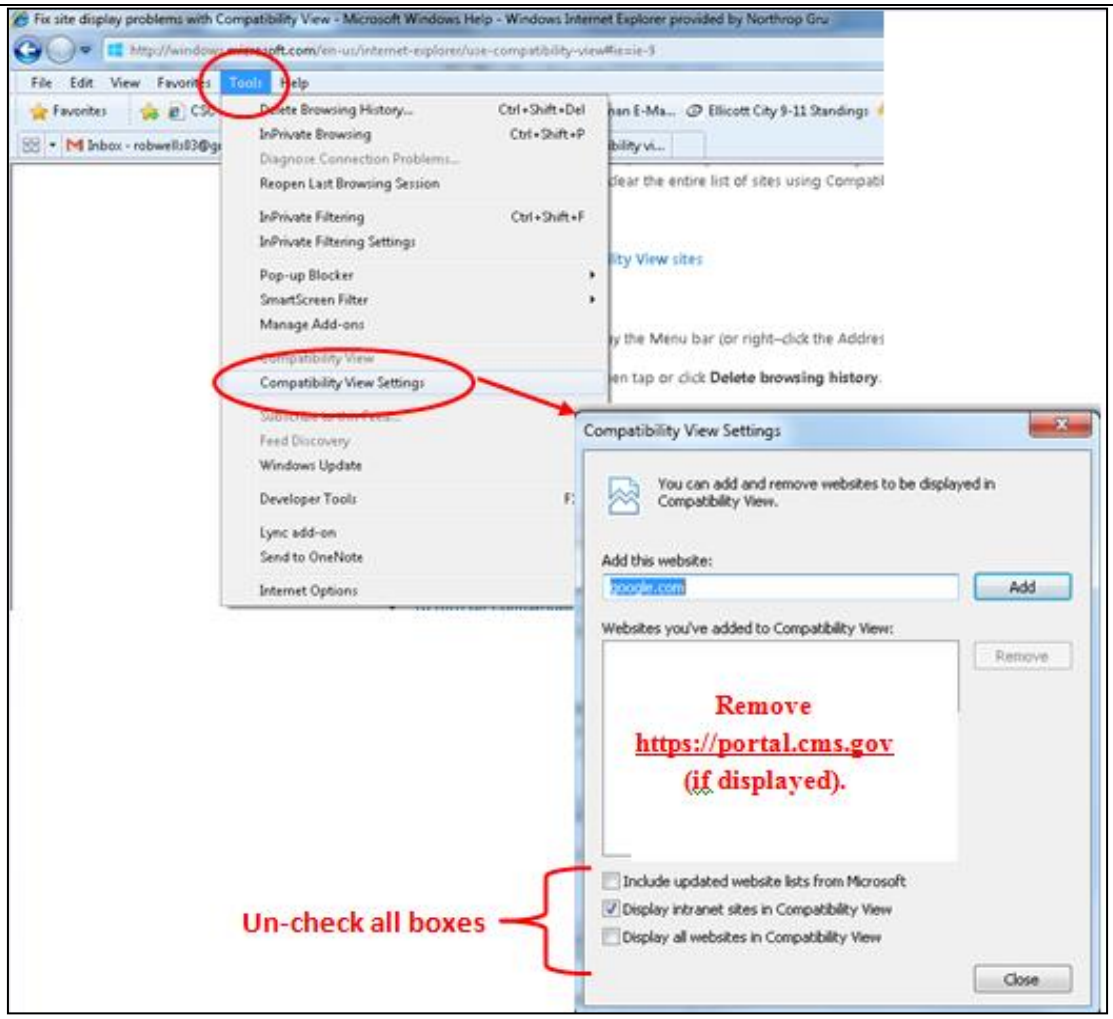
- Monday – Friday: 8:00 am – 8:00 pm EST
- 1-888-734-6433 (press option 3)

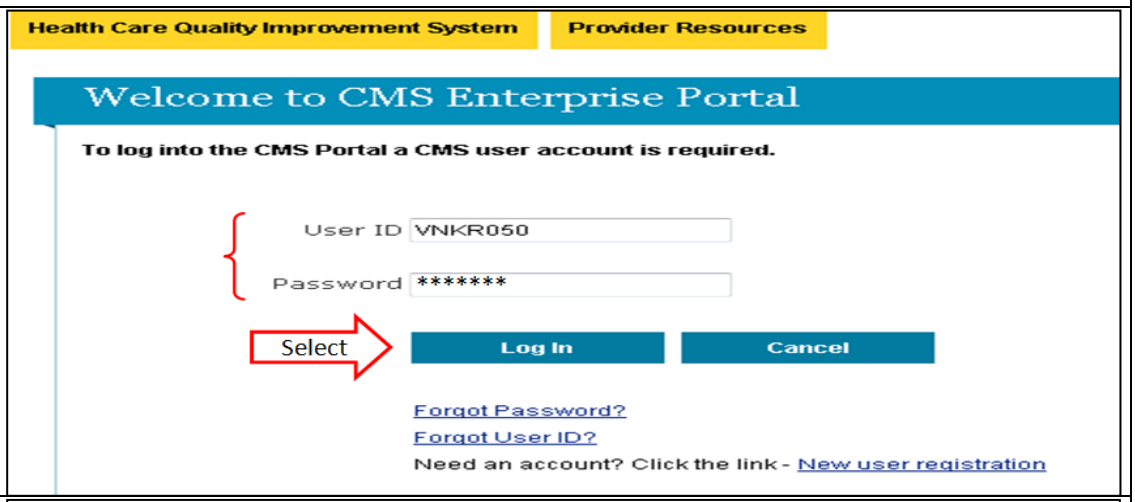
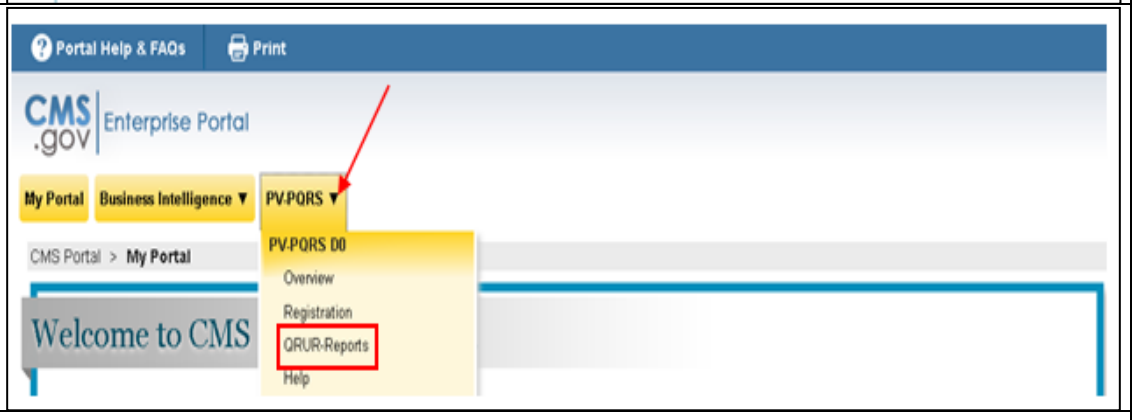
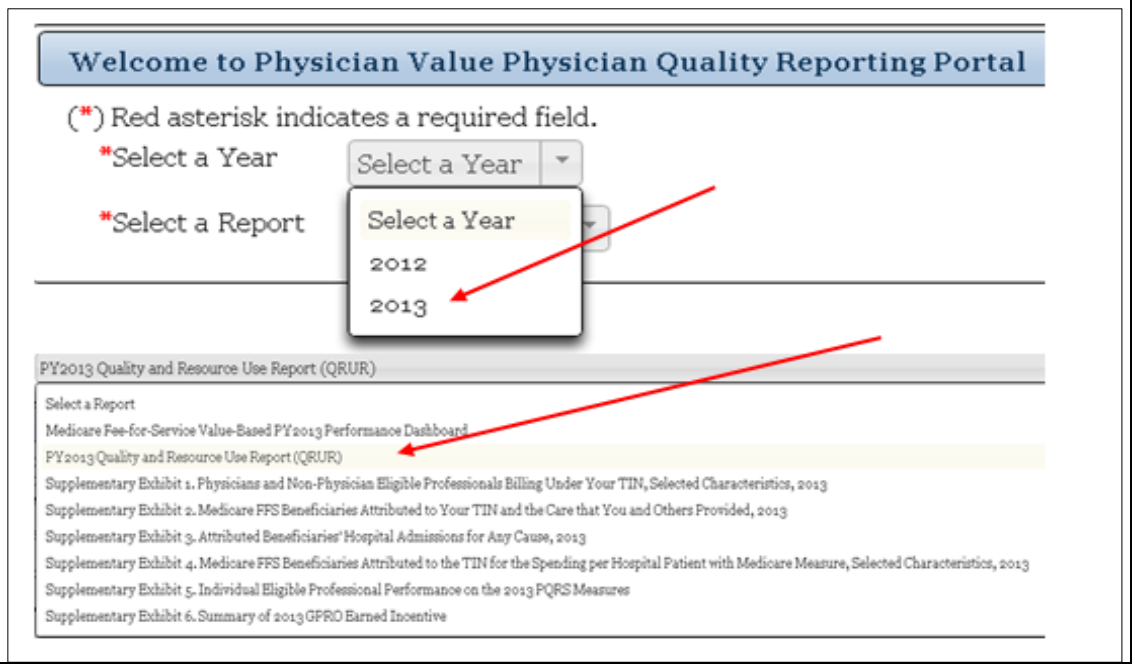
This guide contains the following sections:

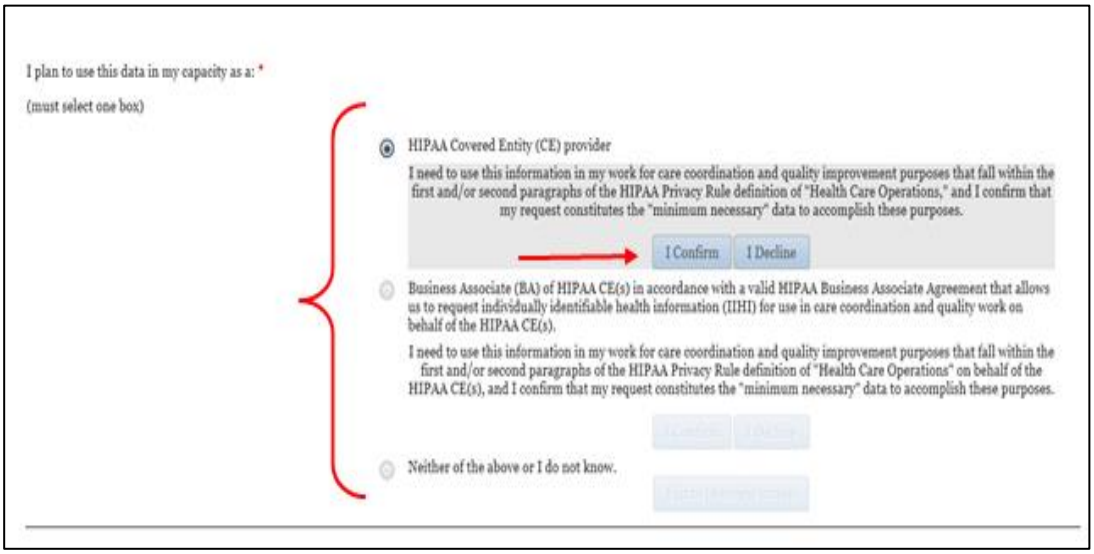
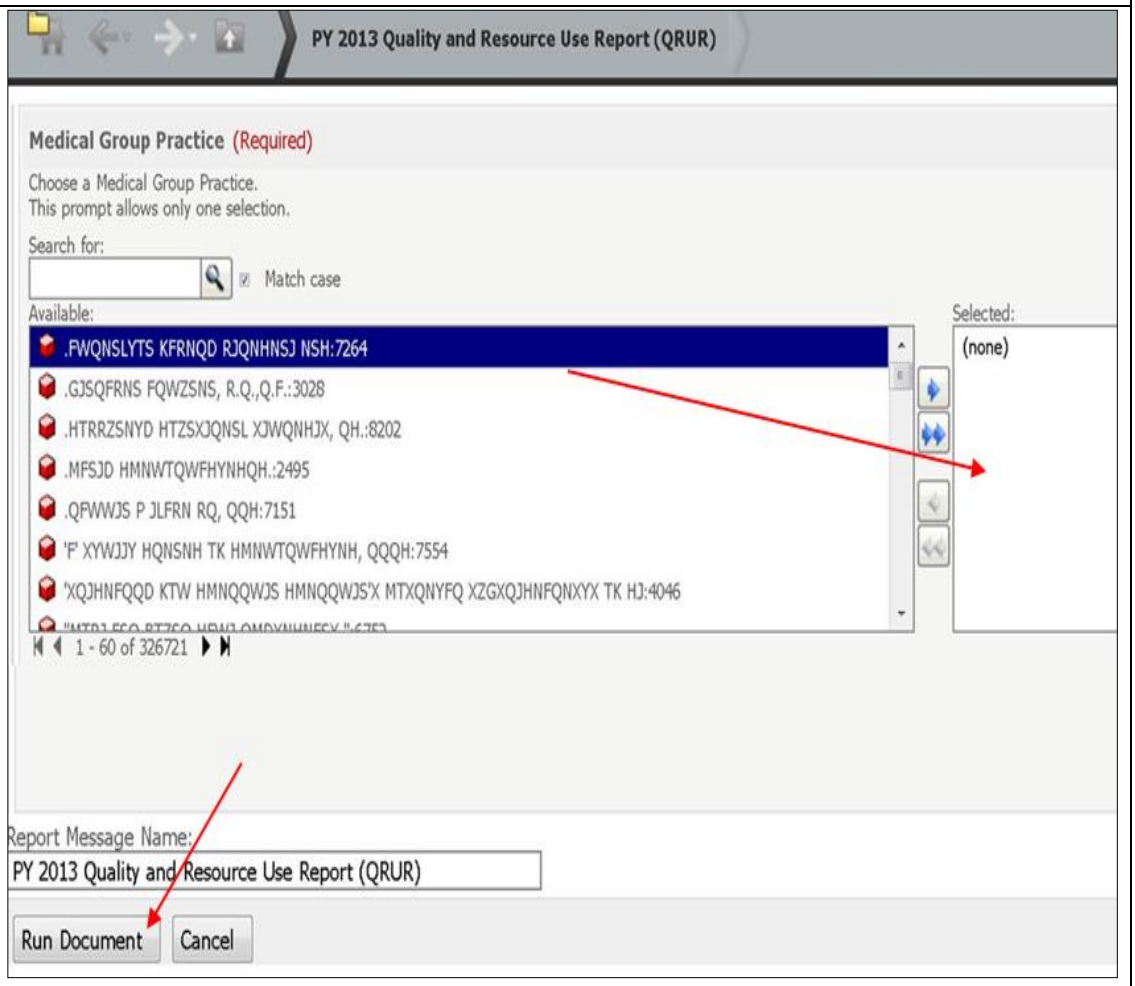
Section Name		Page Number
I.	Introduction	1
II.	Getting Started	1
III.	Access a QRUR	3
IV.	View and Print the QRUR as a PDF Document	8
V.	Download the QRUR Data to a CSV file	9
VI.	Access a QRUR Supplementary Exhibit Report	10
	A. Access a 2013 QRUR Supplementary Exhibit Report.	11
	B. Access a QRUR Supplementary Exhibit Report from within the QRUR.	14
VII.	View and Print the Supplementary Exhibits Reports in PDF or Excel Format	15
	A. View a Supplementary Exhibit Report as a PDF Document or Excel Spreadsheet After Opening the Report in MicroStrategy.	15
	B. Download the PQRS Performance information for all of your group's eligible professionals to Excel.	16
VIII.	Access Your 2013 QRUR Performance Dashboard	17

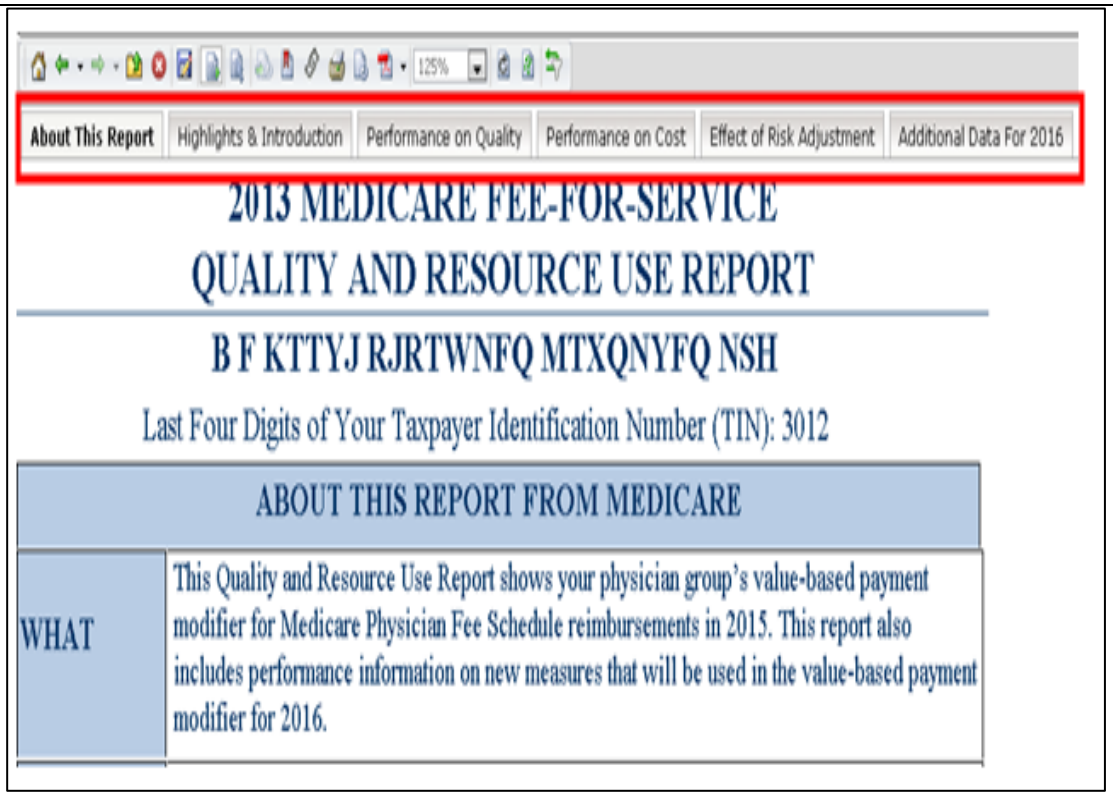
III. Access a QRUR

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.	

Steps	Screenshots
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. • Go to https://portal.cms.gov and select **Login to the CMS Enterprise Portal**.	

Steps	Screenshots
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 **(2013)** from the 'Select a Year' drop down menu, and then select report **(2013 QRUR)** from the 'Select a Report' dropdown menu. **Note:** If you don't see the **2013 QRUR** in the dropdown menu: • Verify that you are logged in with the appropriate role. • Verify that you have selected the Year **2013**.	

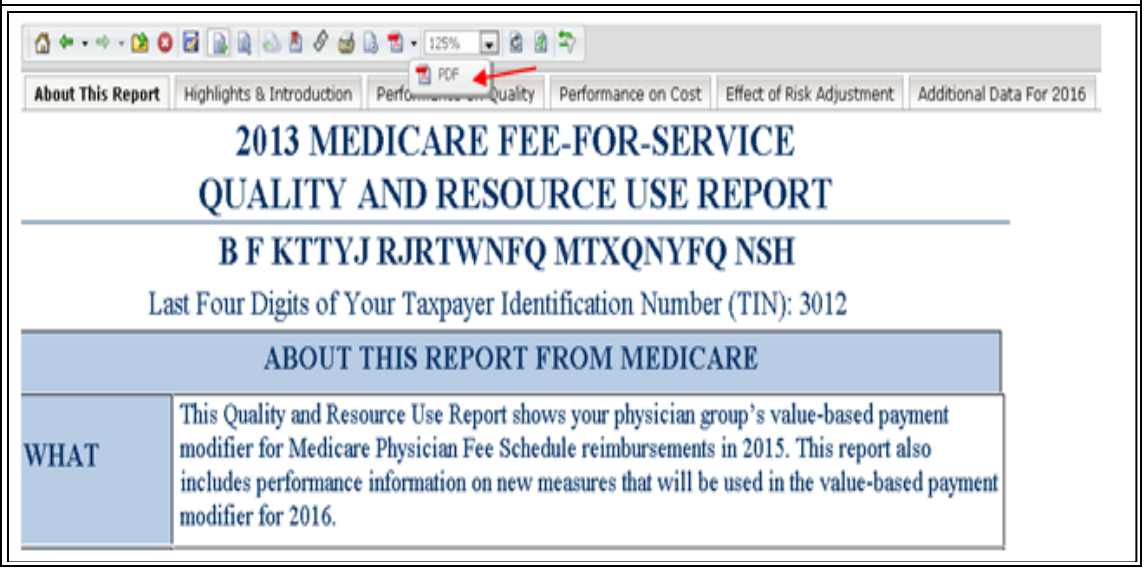
Steps	Screenshots
5. Read the **Attestation Message** and make the appropriate attestation selection. • Select **one** of the options under "**I plan to use this data in my capacity as a**:" • Then, click **I Confirm** to continue. **Note:** If you select "Neither of the above or I do not know" the option to Exit to the Overview screen will be shown.	
You are now in the **MicroStrategy Web Platform.** The screen shows the group practice(s) associated with your IACS account. 6. 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 QRUR. **Note:** Select only one Medical Group Practice each time you attempt to retrieve a **2013 QRUR**.	

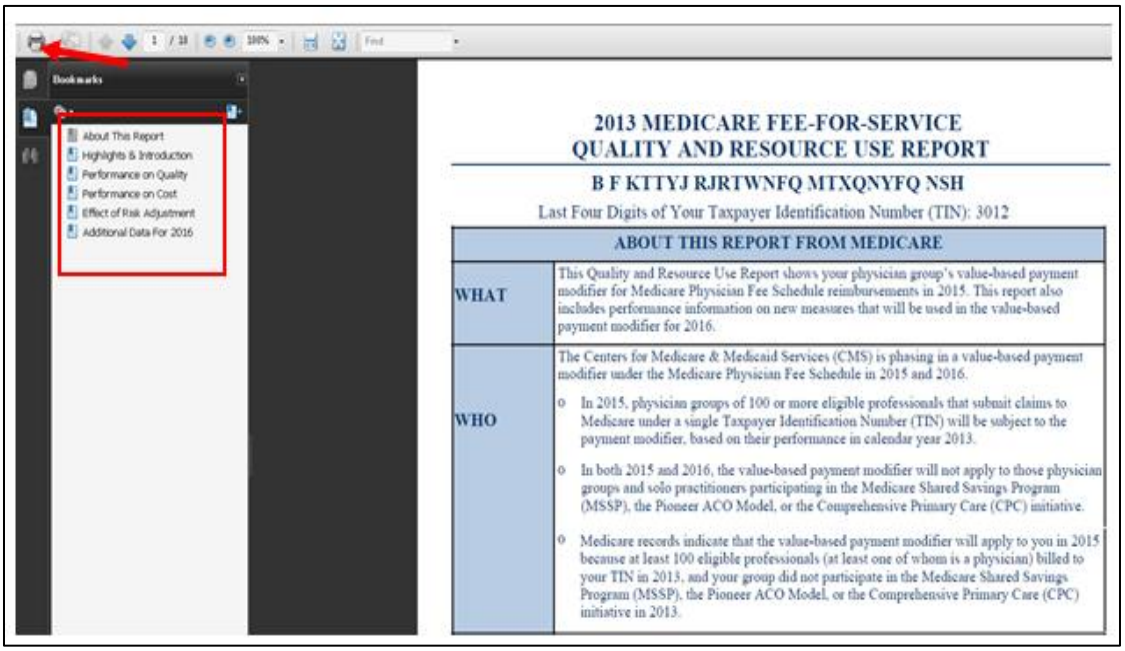
Steps	Screenshots
7. The QRUR is displayed within the MicroStrategy Web Platform. The section that appears first is **About This Report From Medicare.** 8. Click on any of the section tabs at the top of the screen to navigate to different sections of the QRUR. **Note:** After you click on a section tab, you will need to wait several seconds for the section to appear on the screen. The QRUR contains the following sections: – About This Report – Highlights & Introduction – Performance on Quality – Performance on Cost – Effect of Risk Adjustment – Additional Data for 2016	

Steps	Screenshots
9. Use the buttons on the MicroStrategy Toolbar at the top of the report to navigate within MicroStrategy.	

Report Menu Bar icon	Description
	Navigate to the **Report Home screen**
	Navigate backward to the previous report section
	Navigate forward to the next report section
	To Browse **Parent folder**
	Close the report
	Save report in Report folder in MicroStrategy
	To view the report in express mode
	To view the report in interactive mode
	Print report
125%	Adjust page size
	Refresh Page
	Re-prompt
	Reset selection

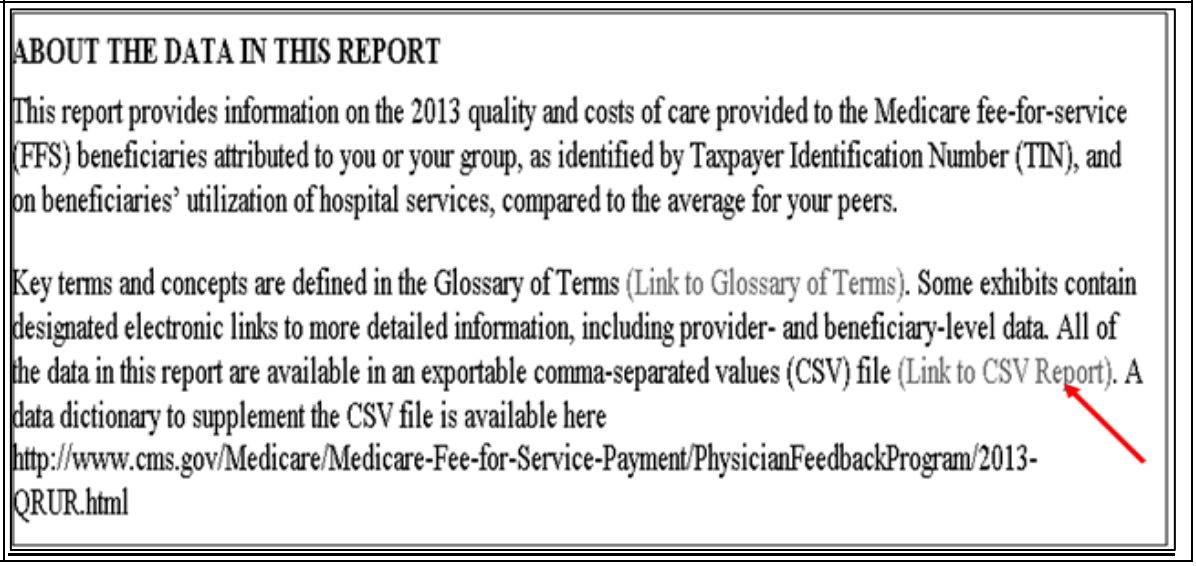
IV. View and Print the QRUR as a PDF Document

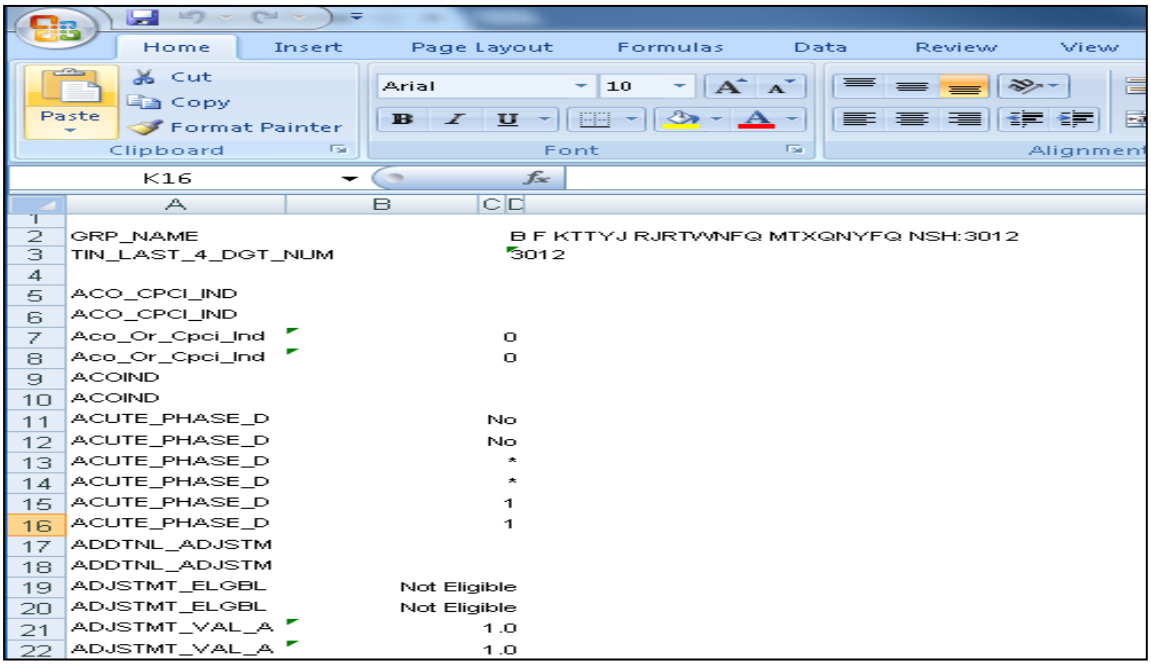
Steps	Screenshots
1. Click the **PDF** button on the MicroStrategy Toolbar and select **PDF**. **Note:** After you click on a section tab, you will need to wait several seconds for the section to appear on the screen. 2. The QRUR is exported to .**PDF** format.	

Steps	Screenshots
3. Select any of the **Bookmarks** to navigate to a different section of the QRUR. 4. Select the **Print** button on the Toolbar to print the QRUR.	

V. Download the QRUR Data to a CSV file

All of the data in your QRUR are available in an exportable comma-separated values (CSV) file. Refer to the **About the Data in This Report** section of your report and follow the steps below:

Steps	Screenshots
1. Click the **text (link to CSV Report)** to export your report data to a CSV file.	

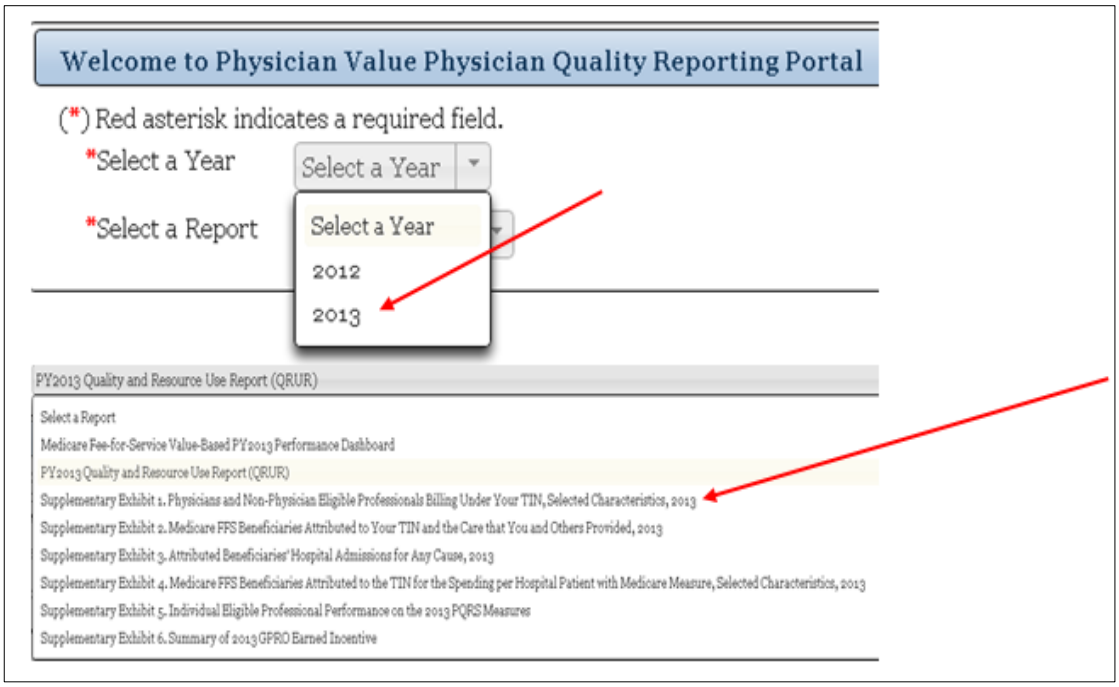
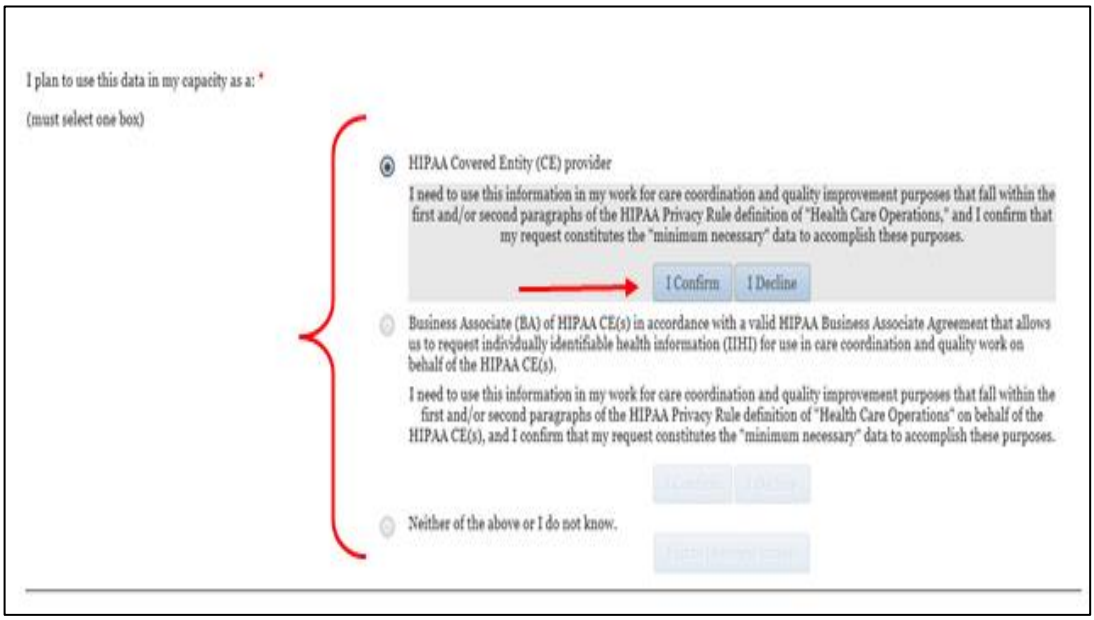
Steps	Screenshots
2. The QRUR data is exported to **.CSV** format. **Note1**: A data dictionary to supplement the CSV file is available on the CMS.gov website at: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2013-QRUR.html **Note2:** Use Excel tools to **Print** or **Save** the file.	

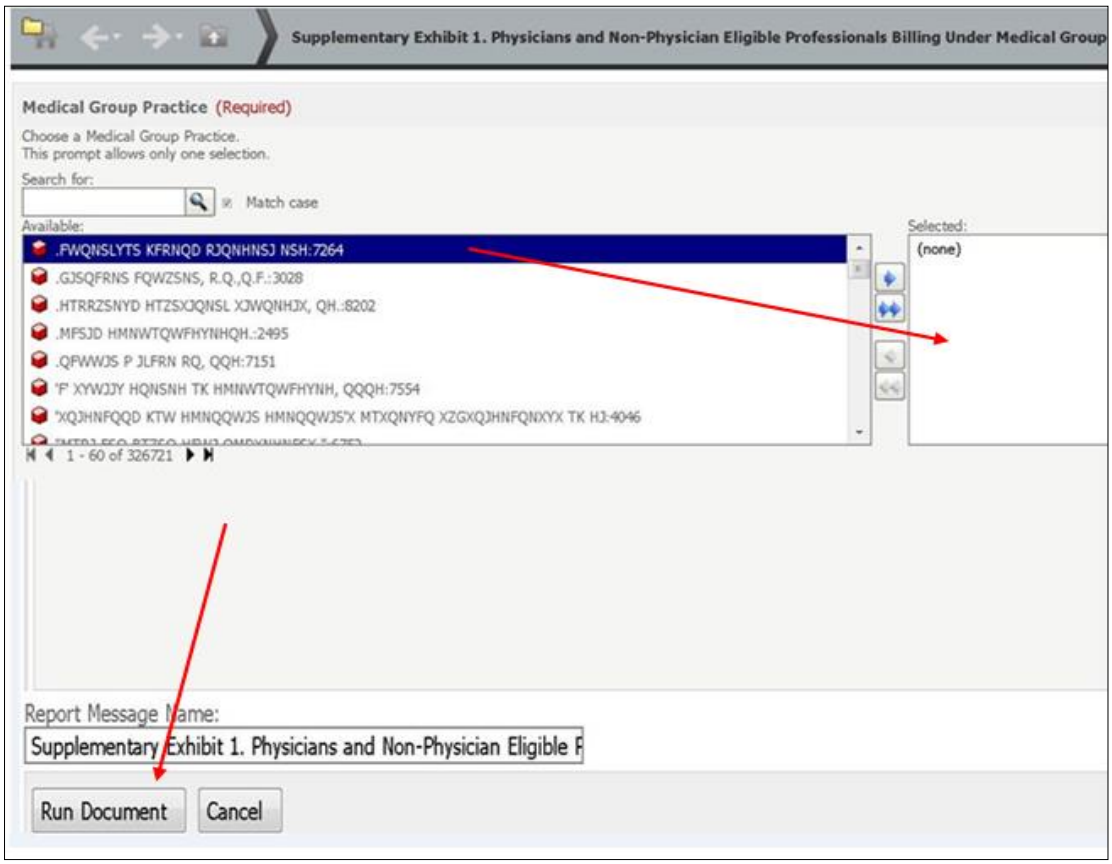
VI. Access a QRUR Supplementary Exhibit Report

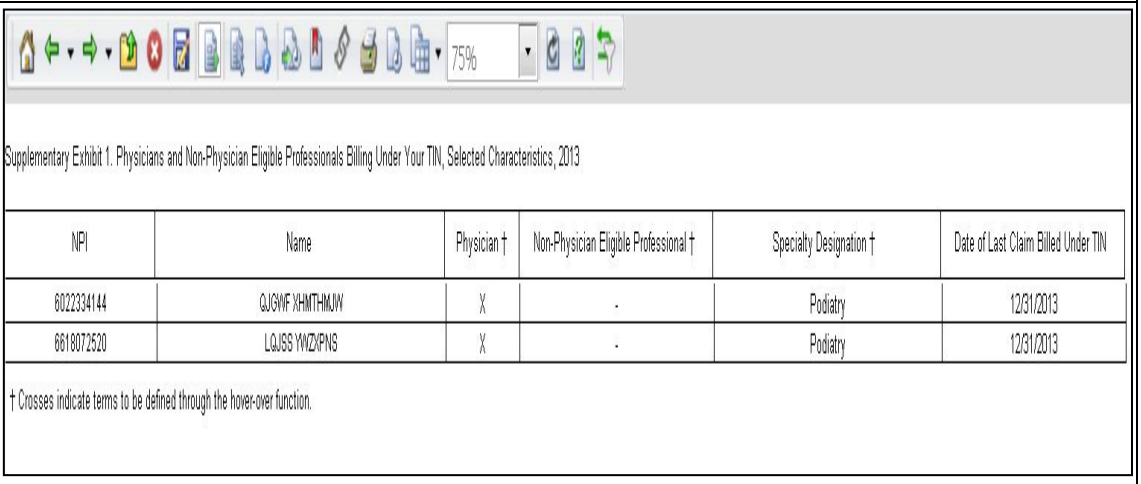
The following six QRUR Supplementary Exhibits Reports are available for Performance Year 2013:

- **Table 1:** Physicians and Non-Physician Eligible Professionals Billing Under Medical Group Practice TIN, Selected Characteristics, 2013
- **Table 2:** Medicare Fee-For-Service (FFS) Beneficiaries Attributed to Your TIN and the Care that You and Others Provided, 2013
- **Table 3:** Attributed Beneficiaries' Hospital Admissions for Any Cause, 2013
- **Table 4:** Medicare FFS Beneficiaries Attributed to the TIN for the Spending per Hospital Patient with Medicare Measure, Selected Characteristics, 2013
- **Table 5:** Individual Eligible Professional Performance on the 2013 PQRS Measures
- **Table 6:** Summary of 2013 GPRO Earned Incentive

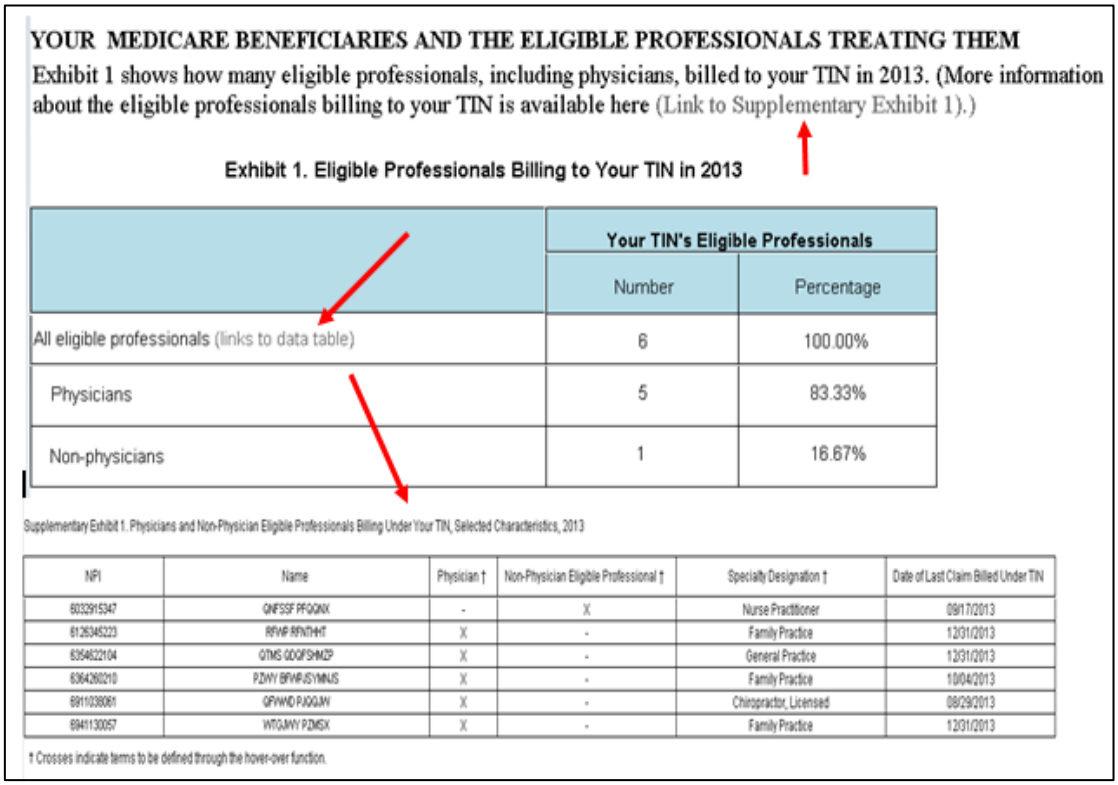
A. **Access a 2013 QRUR Supplementary Exhibit Report.**

Steps	**Screenshots**
1. Select year (**2013)** from the 'Select a Year' drop down menu, and then select a report **(e.g. Physicians and Non-Physician Eligible Professionals Billing Under Medical Group Practice TIN, Selected Characteristics, 2013)** from the 'Select a Report' dropdown menu. **Note:** If you don't see the **Supplemental Exhibits for 2013** in the dropdown menu: • Verify that you have selected the Year **2013**.	
2. 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 shown.	

Steps	Screenshots
You are now in the **MicroStrategy Web Platform.** This screen shows the group practice(s) associated with your IACS account. 3. 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 Supplementary Exhibit Report. **Note:** Select only one Medical Group Practice each time you attempt to retrieve a **2013 Supplemental Exhibit Report**.	

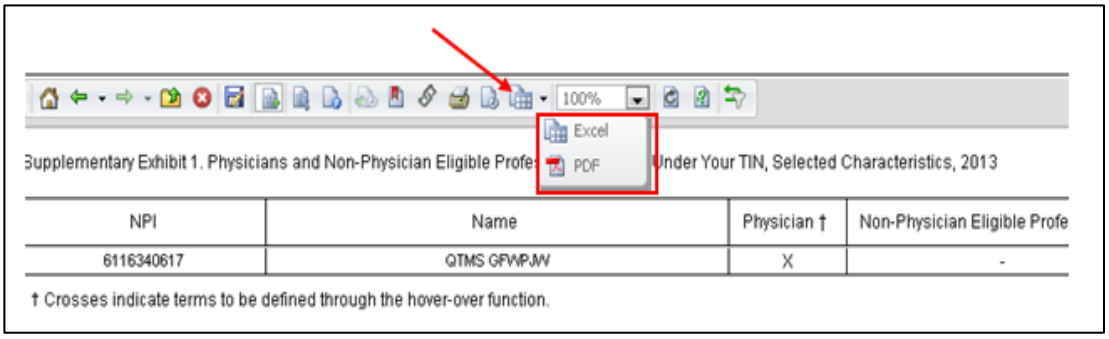
Steps	**Screenshots**
4. The selected QRUR Supplementary Exhibit report is displayed within the MicroStrategy Web Platform. **Note:** The example shown is **Table 1. Physicians and Non-Physician Eligible Professionals Billing Under Medical Group Practice TIN, Selected Characteristics, 2013**. Repeat Steps 1-3 of this section to access any of the other QRUR Supplementary Exhibit reports.	 Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics, 2013 NPI | Name | Physician † | Non-Physician Eligible Professional † | Specialty Designation † | Date of Last Claim Billed Under TIN 6022334144 | QJGWF XHMTHMJW | X | - | Podiatry | 12/31/2013 6618072520 | LQJSS YWZXPNS | X | - | Podiatry | 12/31/2013 † Crosses indicate terms to be defined through the hover-over function.

B. Access a QRUR Supplementary Exhibit Report from within the QRUR.

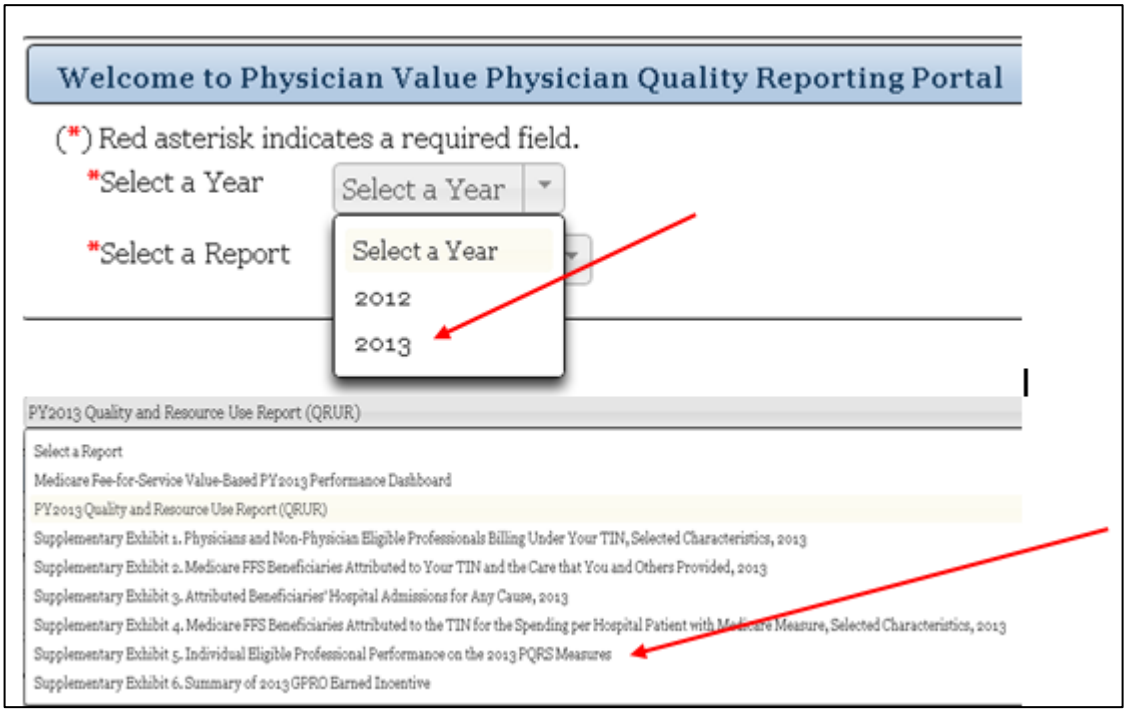
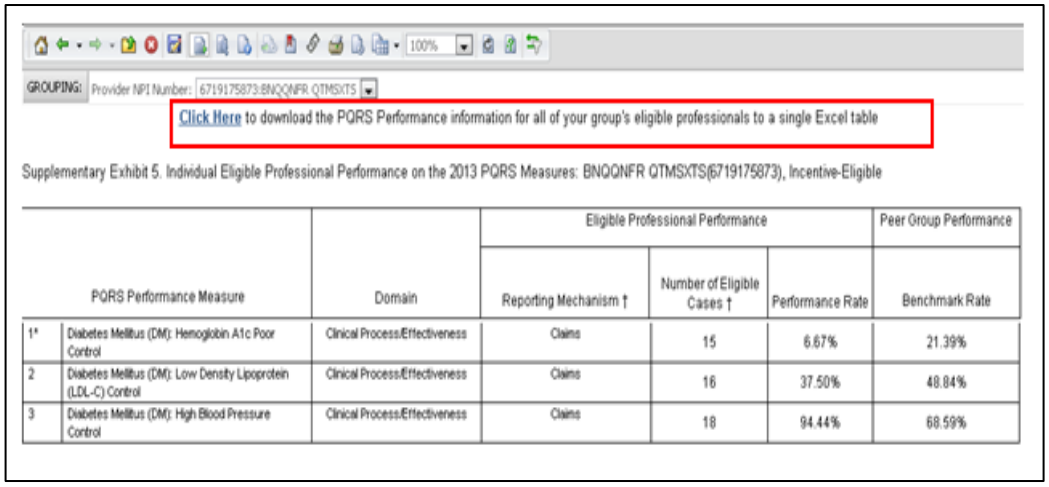
Steps	Screenshots
1. Hyperlinked text is provided throughout the QRUR that you can select to open a particular Supplemental Exhibit report. For example, to access supplementary information for **'Exhibit 1. Eligible Professionals Billing to Your TIN in 2013'** in your QRUR: • Click the text **{link to Supplementary Exhibit 1}** shown above Exhibit 1, OR • Click the text **(links to data table)** shown inside the Exhibit 1 table. **Note1**: You will need to wait several seconds while the system generates the Supplemental Exhibit report. **Note2:** The hyperlinked fields are active only when viewing the QRUR within the MicroStrategy Web Platform. The hyperlinks are not active after a QRUR is exported to PDF format.	 YOUR MEDICARE BENEFICIARIES AND THE ELIGIBLE PROFESSIONALS TREATING THEM Exhibit 1 shows how many eligible professionals, including physicians, billed to your TIN in 2013. (More information about the eligible professionals billing to your TIN is available here (Link to Supplementary Exhibit 1).) Exhibit 1. Eligible Professionals Billing to Your TIN in 2013 Your TIN's Eligible Professionals Number / Percentage All eligible professionals (links to data table): 6, 100.00% Physicians: 5, 83.33% Non-physicians: 1, 16.67% Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics, 2013 NPI / Name / Physician † / Non-Physician Eligible Professional † / Specialty Designation † / Date of Last Claim Billed Under TIN 6032915347 / QNFSSF PFQQNX / - / X / Nurse Practitioner / 09/17/2013 6126345223 / RFVP RFNTHHT / X / - / Family Practice / 12/31/2013 6354622104 / QTMS QDQFSHMZP / X / - / General Practice / 12/31/2013 6364260210 / PZWY BFWRJSYMNJS / X / - / Family Practice / 10/04/2013 6911038061 / QFWWD PJQQJW / X / - / Chiropractor, Licensed / 08/29/2013 6941130057 / WTQJWY PZMSX / X / - / Family Practice / 12/31/2013 † Crosses indicate terms to be defined through the hover-over function.

VII. View and Print the Supplementary Exhibits Reports in PDF or Excel Format

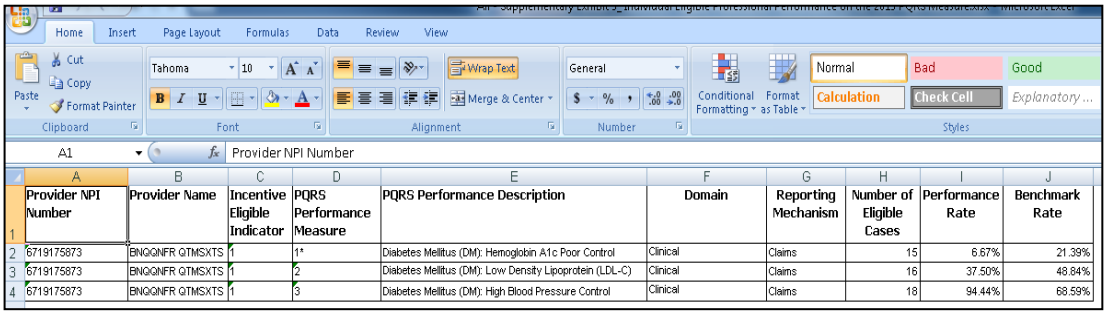
A. View a Supplementary Exhibit Report as a PDF Document or Excel Spreadsheet After Opening the Report in MicroStrategy.

Steps	Screenshots
1. Click the **Export** button on the MicroStrategy Toolbar. • Select the **Excel** option to export your report to Excel OR • Select **PDF** to export to PDF format. **Note1:** After you click on a section tab, you will need to wait several seconds for the section to appear on the screen. **Note2:** Use the tools provided in Excel or PDF to Print or Save your report in the selected format.	

B. Download the PQRS Performance information for all of your group's eligible professionals to Excel.

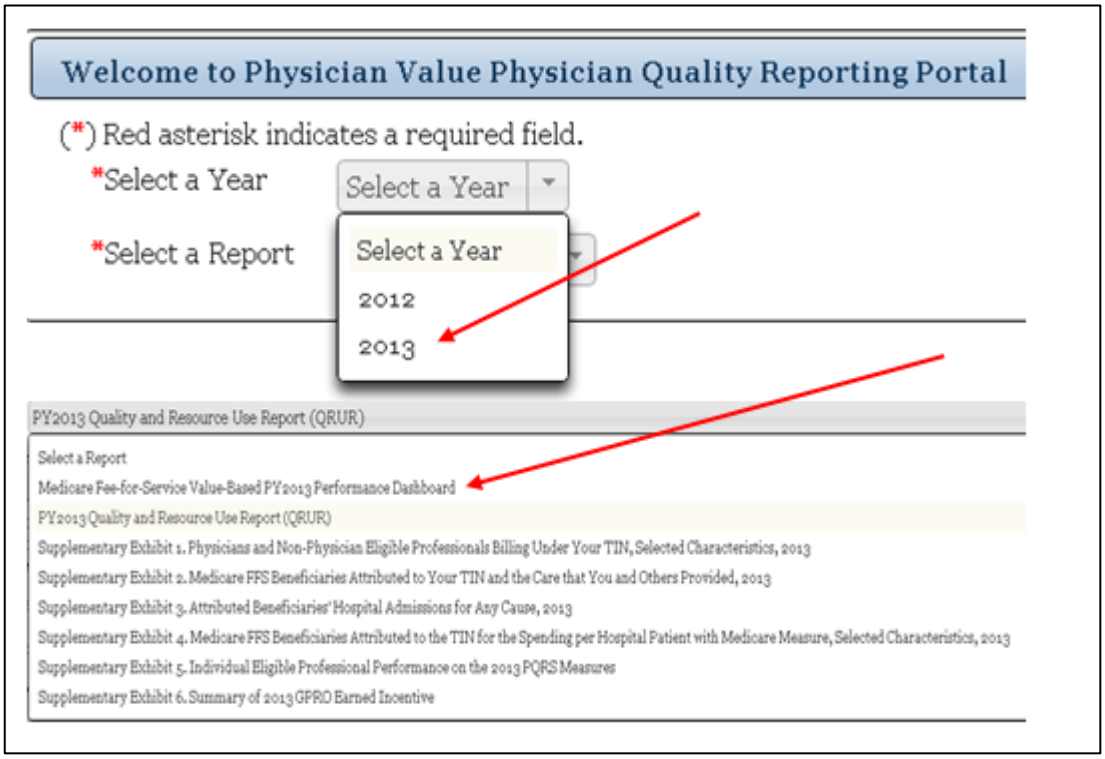
Steps	**Screenshots**
1. Select the **Supplemental Exhibit 5. Individual Eligible Professional Performance on 2013 PQRS Measures** report.	
2. Ensure you have scrolled to the top of the report and the following text is visible: "**Click Here** to download the PQRS Performance information for all of your group's eligible professionals to a single Excel table." 3. Select the **"Click Here"** link.	

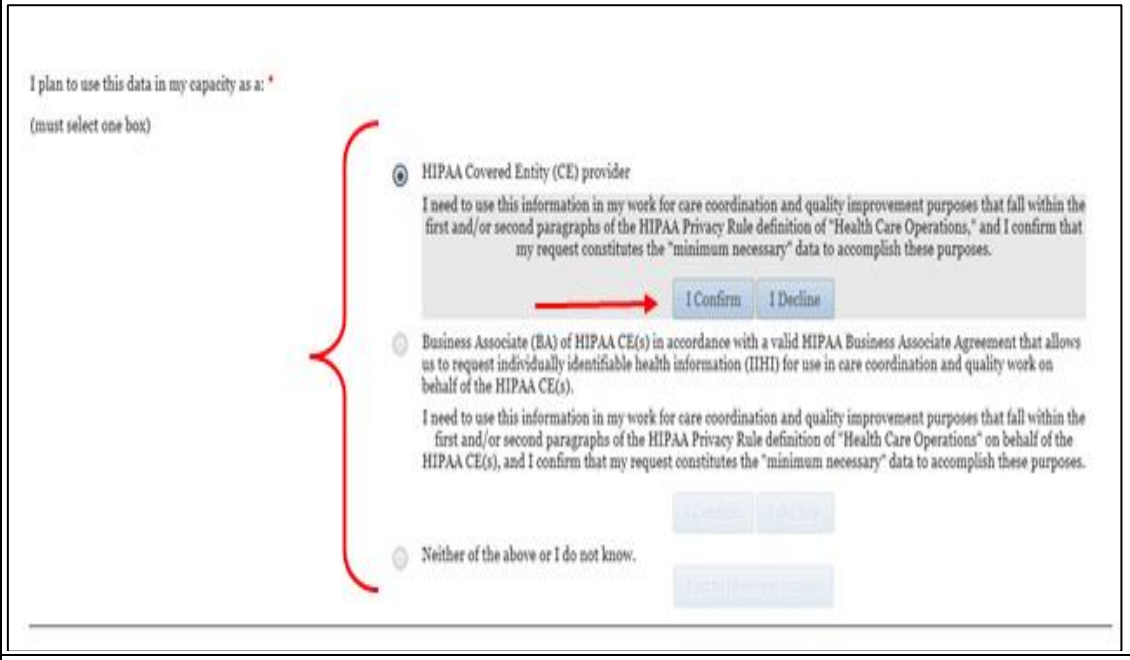
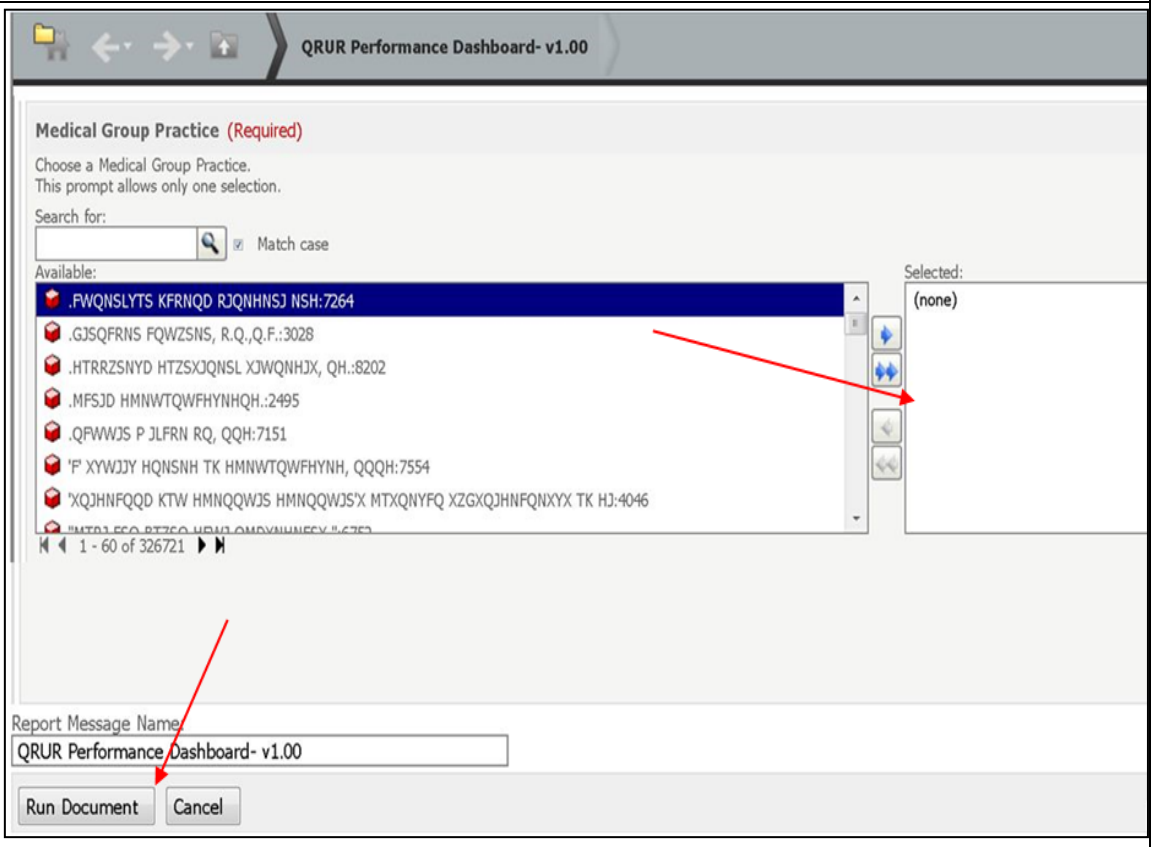
	PQRS Performance Measure	Domain	Eligible Professional Performance			Peer Group Performance
			Reporting Mechanism †	Number of Eligible Cases †	Performance Rate	Benchmark Rate
1*	Diabetes Mellitus (DM): Hemoglobin A1c Poor Control	Clinical Process/Effectiveness	Claims	15	6.67%	21.39%
2	Diabetes Mellitus (DM): Low Density Lipoprotein (LDL-C) Control	Clinical Process/Effectiveness	Claims	16	37.50%	48.84%
3	Diabetes Mellitus (DM): High Blood Pressure Control	Clinical Process/Effectiveness	Claims	18	94.44%	68.59%

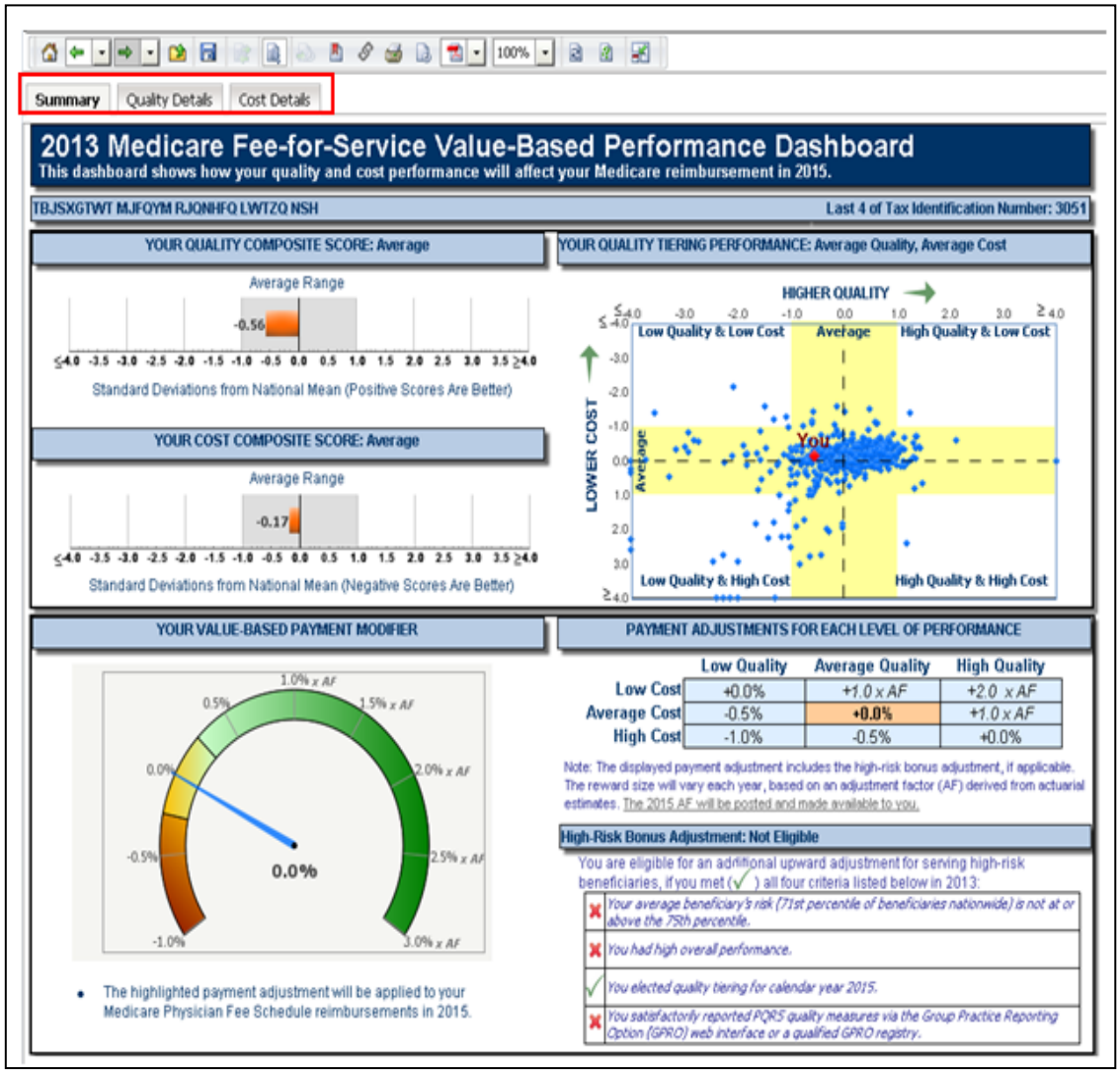
Steps	Screenshots
4. All available PQRS data for your group's EPs is exported to **Excel** format. **Note:** Use Excel tools to **Print** or **Save** the file.	

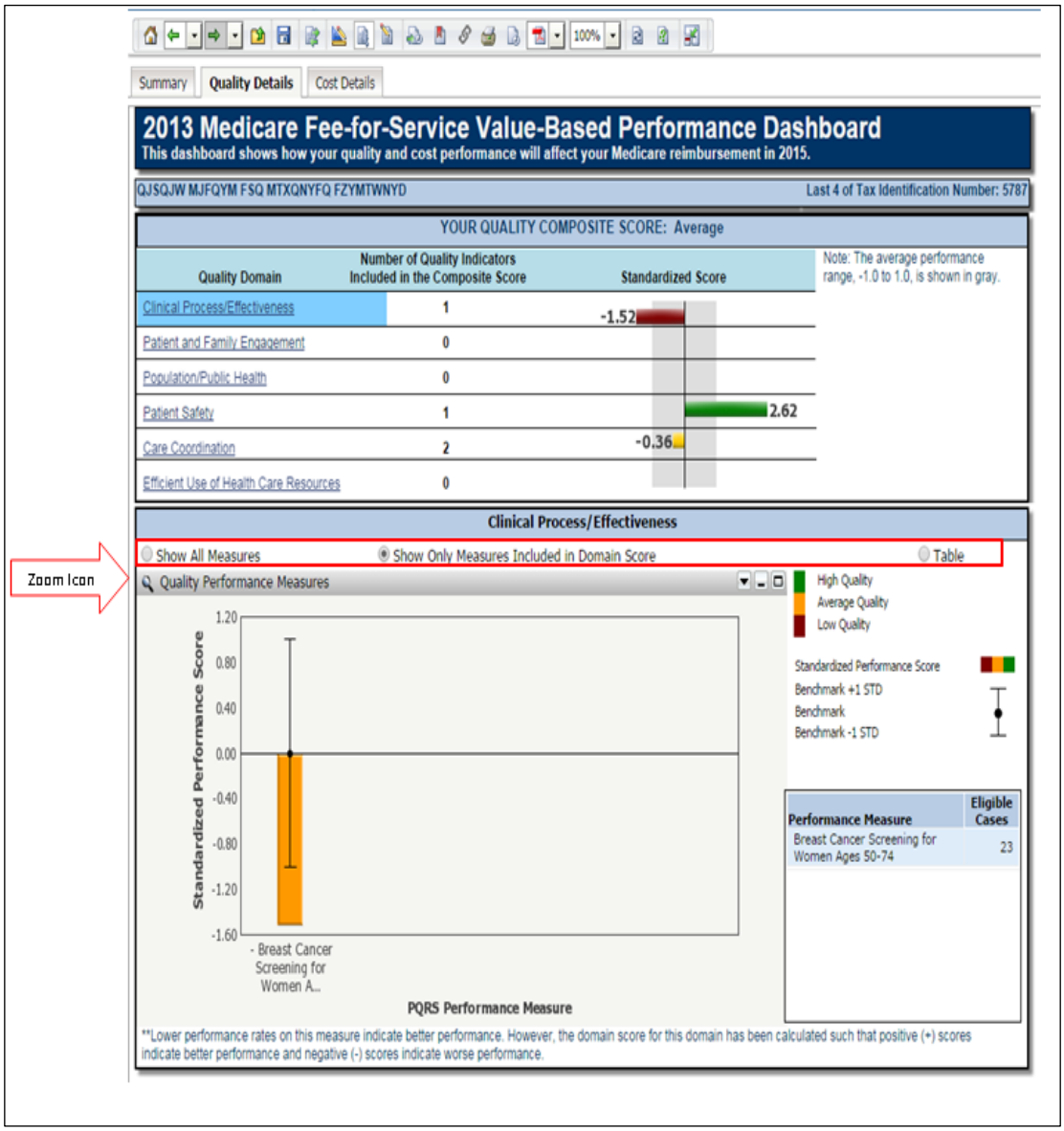
Provider NPI Number	Provider Name	Incentive Eligible Indicator	PQRS Performance Measure	PQRS Performance Description	Domain	Reporting Mechanism	Number of Eligible Cases	Performance Rate	Benchmark Rate
6719175873	BNQQNFR QTMSXTS	1	1*	Diabetes Mellitus (DM): Hemoglobin A1c Poor Control	Clinical	Claims	15	6.67%	21.39%
6719175873	BNQQNFR QTMSXTS	1	2	Diabetes Mellitus (DM): Low Density Lipoprotein (LDL-C)	Clinical	Claims	16	37.50%	48.84%
6719175873	BNQQNFR QTMSXTS	1	3	Diabetes Mellitus (DM): High Blood Pressure Control	Clinical	Claims	18	94.44%	68.59%

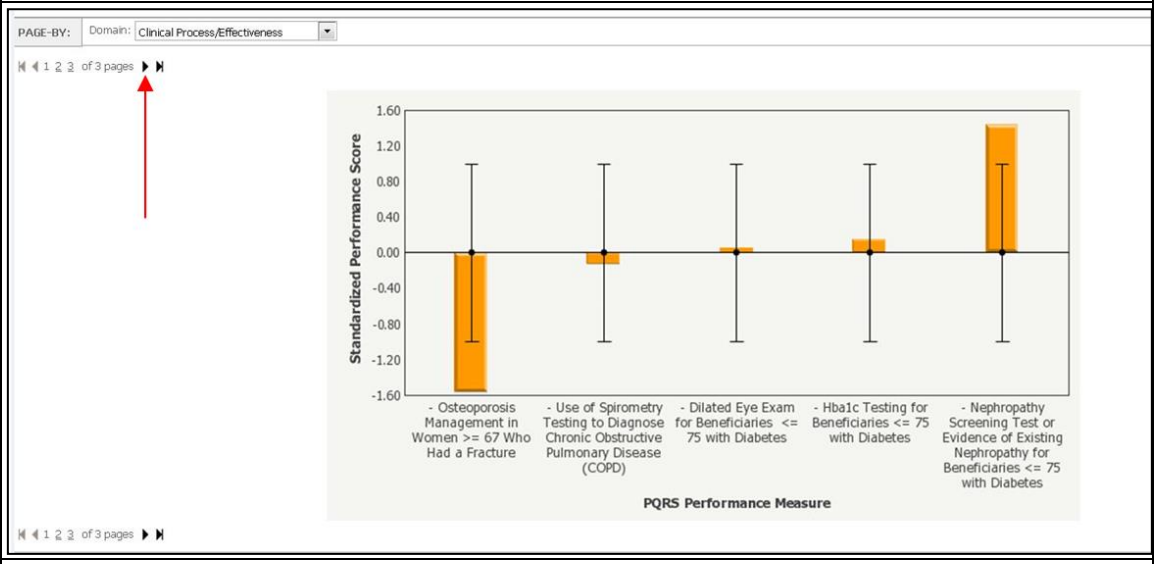
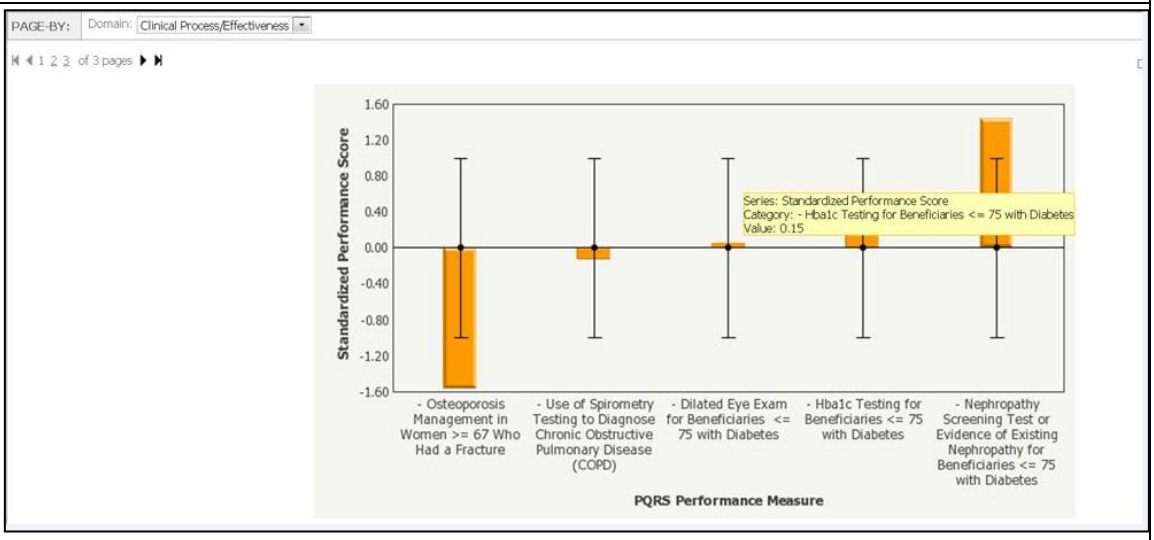
VIII. Access Your 2013 QRUR Performance Dashboard

Steps	Screenshots
1. Select year **(2013)** from the 'Select a Year' drop down menu, and then select the **Medicare Fee-for-Service Value-Based PY2013 Performance Dashboard** from the 'Select a Report' dropdown menu. **Note:** If you don't see the **Medicare Fee-for-Service Value-Based PY2013 Performance Dashboard board** in the dropdown menu: • Verify that you are logged in with the appropriate role. • Verify that you have selected the Year **2013**.	

Steps	Screenshots
2. 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 shown.	
You are now in the **MicroStrategy Web Platform.** The screen shows the group practice(s) associated with your IACS account. 3. 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 2013 QRUR Medicare Fee-for-Service Value-Based Performance	

Steps	Screenshots
Dashboard. **Note:** Select only one Medical Group Practice each time you attempt to retrieve a **Medicare Fee-for-Service Value-Based PY2013 Performance Dashboard**.	
4. The **Medicare Fee-for-Service Value-Based PY2013 Performance Dashboard** is displayed within the MicroStrategy Web Platform. The page that appears first is the **Summary.** The Dashboard contains the following sections: – Summary – Quality Details – Cost Details 5. Click on any of the section tabs at the top of the screen to navigate between sections of the Dashboard. **Note1:** After you click on a section tab, you will need to wait several seconds for the section to appear on the screen. **Note2:** All of the data displayed in the performance dashboard are available in an exportable comma-separated values (CSV) file. Refer to Section V - Download the QRUR Data to a CSV File of the guide for instructions. A data dictionary to supplement the CSV file is available here (http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2013-QRUR.html).	

Steps	Screenshots
6. The Quality Details tab displays the following Quality Domains: – Clinical Process/Effectiveness – Population/Public Health – Patient Safety – Care Coordination – Efficient Use of Healthcare Resources – Patient and Family Engagement You can select the following view options: • Show All Measures • Show Only Measures Included in the Domain Score • Table **Note:** If you select the **Zoom** in icon a new window will open for the graph, and there will be a page selection option to view multiple pages that show all measures that apply to the selected domain. The first five measures will always be shown.	

Steps	Screenshots
7. The **Page Selection** navigation allows you to view additional measures, if applicable.	
8. Use your mouse to **Hover Over** any of the bars displayed on the graph to see measure descriptions.	

Steps	Screenshots
9. The **Table** view option on the **Quality Details** screen shows the performance information displayed in Exhibits 5 of your QRUR.	

Summary | Quality Details | Cost Details

2013 Medicare Fee-for-Service Value-Based Performance Dashboard

This dashboard shows how your quality and cost performance will affect your Medicare reimbursement in 2015.

TBJSXGTWT MJFQYM RJQNHFQ LWTZQ NSH — Last 4 of Tax Identification Number: 3051

YOUR QUALITY COMPOSITE SCORE: Average

Quality Domain	Number of Quality Indicators Included in the Composite Score	Standardized Score
Clinical Process/Effectiveness	11	-0.41
Patient and Family Engagement	0	
Population/Public Health	0	
Patient Safety	2	0.04
Care Coordination	4	-0.15
Efficient Use of Health Care Resources	0	

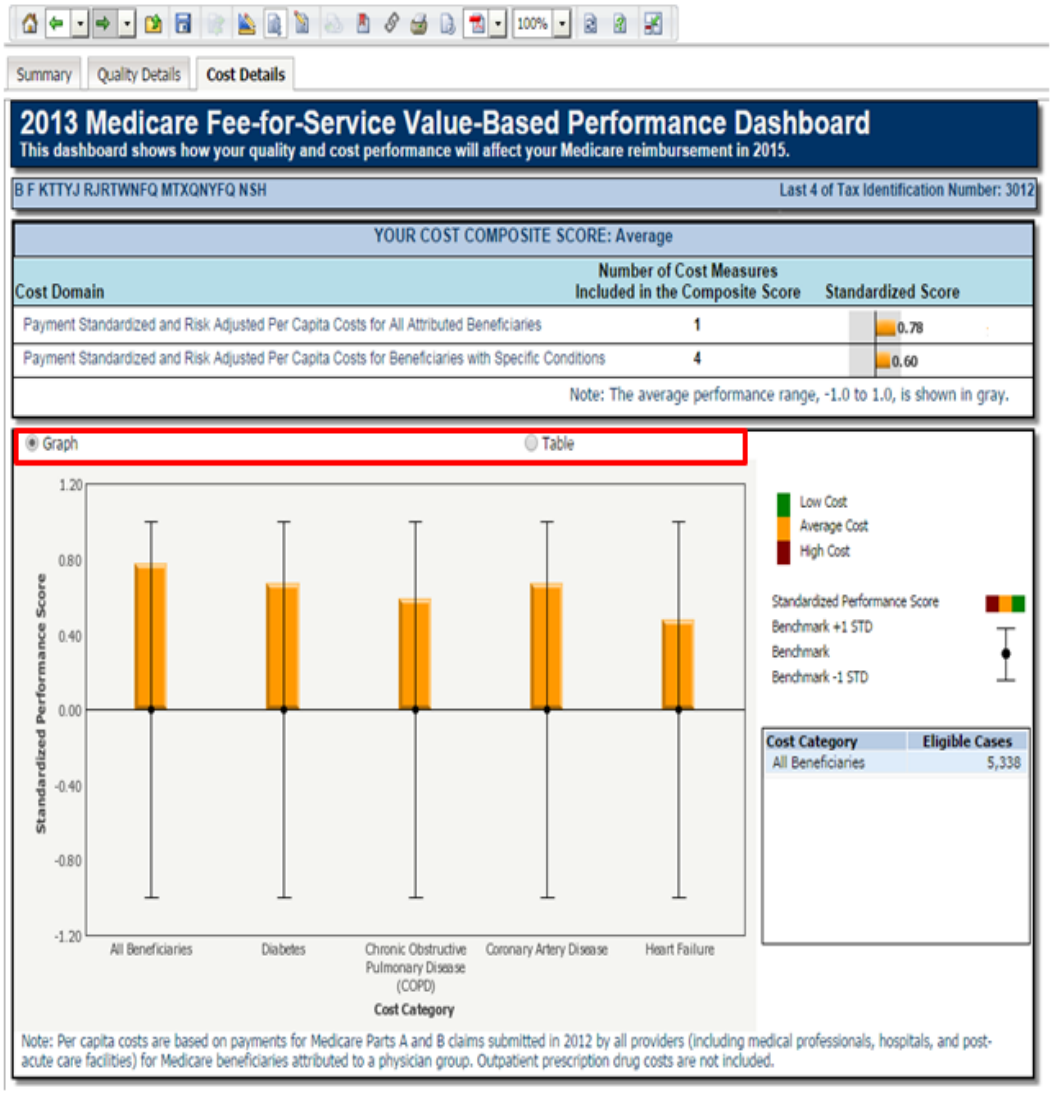
Note: The average performance range, -1.0 to 1.0, is shown in gray.

Clinical Process/Effectiveness

Show All Measures | Show Only Measures Included in Domain Score | Table

Performance Category		Performance Measure	Your Performance: Eligible Cases	Your Performance: Performance Rate	Peer Group Performance: Benchmark Rate	Peer Group Performance: Benchmark – 1 Standard Deviation	Peer Group Performance: Benchmark + 1 Standard Deviation	Contribution to Your Domain Score: Standardized Score	Contribution to Your Domain Score: Included in Domain Score
Bone, Joint, and Muscle Disorders	-	Osteoporosis Management in Women >= 67 Who Had a Fracture	70	22.86%	14.54%	7.87%	21.20%	1.25*	Yes
Chronic Obstructive Pulmonary Disease (COPD)	-	Use of Spirometry Testing to Diagnose Chronic Obstructive Pulmonary Disease (COPD)	231	23.81%	31.35%	17.24%	45.45%	-0.53*	Yes
Diabetes Mellitus (DM)	-	Dilated Eye Exam for Beneficiaries <= 75 with Diabetes	870	40.11%	54.05%	42.70%	65.40%	-1.23*	Yes
	-	Hba1c Testing for Beneficiaries <= 75 with Diabetes	870	79.89%	87.65%	78.11%	97.18%	-0.81*	Yes
	-	Nephropathy Screening Test or Evidence of Existing Nephropathy for Beneficiaries <= 75 with Diabetes	870	87.82%	76.31%	65.15%	87.47%	1.03*	Yes
	-	Lipid Profile for Beneficiaries <= 75 with Diabetes	870	71.26%	82.30%	70.21%	94.39%	-0.91*	Yes

*Note: Lower performance rates on this measure indicate better performance. However, the domain score for this domain has been calculated such that positive (+) scores indicate better performance and negative (-) scores indicate worse performance.

Steps	Screenshots
10. The **Cost Details** screen displays the following Cost Domains: – Payment Standardized and Risk Adjusted Per Capita Costs for All Attributed Beneficiaries – Payment Standardized and Risk Adjusted Per Capita Costs for Beneficiaries with Specific Conditions You can select the following view options: • Table • Graph	

Summary | Quality Details | Cost Details

2013 Medicare Fee-for-Service Value-Based Performance Dashboard

This dashboard shows how your quality and cost performance will affect your Medicare reimbursement in 2015.

B F KTTYJ RJRTWNFQ MTXQNYFQ NSH — Last 4 of Tax Identification Number: 3012

YOUR COST COMPOSITE SCORE: Average

Cost Domain	Number of Cost Measures Included in the Composite Score	Standardized Score
Payment Standardized and Risk Adjusted Per Capita Costs for All Attributed Beneficiaries	1	0.78
Payment Standardized and Risk Adjusted Per Capita Costs for Beneficiaries with Specific Conditions	4	0.60

Note: The average performance range, -1.0 to 1.0, is shown in gray.

Graph | Table

Cost Category	Eligible Cases
All Beneficiaries	5,338

Note: Per capita costs are based on payments for Medicare Parts A and B claims submitted in 2012 by all providers (including medical professionals, hospitals, and post-acute care facilities) for Medicare beneficiaries attributed to a physician group. Outpatient prescription drug costs are not included.

Steps	Screenshots
11. The **Table** view option on the **Cost Details** screen shows the cost performance information displayed in Exhibit 8 of your QRUR.	

Summary | Quality Details | Cost Details

2013 Medicare Fee-for-Service Value-Based Performance Dashboard

This dashboard shows how your quality and cost performance will affect your Medicare reimbursement in 2015.

TBJSXGTWT MJFQYM RJQNHFQ LWTZQ NSH — Last 4 of Tax Identification Number: 3051

YOUR COST COMPOSITE SCORE: Average

Cost Domain	Number of Cost Measures Included in the Composite Score	Standardized Score
Payment Standardized and Risk Adjusted Per Capita Costs for All Attributed Beneficiaries	1	-0.08
Payment Standardized and Risk Adjusted Per Capita Costs for Beneficiaries with Specific Conditions	4	-0.36

Note: The average performance range, -1.0 to 1.0, is shown in gray.

Graph — Table

		Your Performance		Peer Group Performance			Contribution to Your Domain Score	
Cost Domain	Cost Category	Eligible Cases	Per Capita Costs	Benchmark Per Capita Costs	Benchmark − 1 Standard Deviation	Benchmark + 1 Standard Deviation	Standardized Score	Included in Domain Score
Payment Standardized and Risk Adjusted Per Capita Costs for All Attributed Beneficiaries	All Beneficiaries	4,532	$9,982	$10,105	$8,544	$11,665	-0.08	Yes
Payment Standardized and Risk Adjusted Per Capita Costs for Beneficiaries with Specific Conditions	Diabetes	1,346	$14,407	$14,461	$11,965	$16,957	-0.02	Yes
	Chronic Obstructive Pulmonary Disease (COPD)	767	$21,036	$23,740	$19,270	$28,211	-0.60*	Yes
	Coronary Artery Disease	1,839	$16,302	$17,203	$14,214	$20,191	-0.30	Yes
	Heart Failure	727	$23,478	$26,010	$20,962	$31,058	-0.50	Yes

Note: Per capita costs are based on payments for Medicare Parts A and B claims submitted in 2012 by all providers (including medical professionals, hospitals, and post-acute care facilities) for Medicare beneficiaries attributed to a physician group. Outpatient prescription drug costs are not included.