

## Merit-based Incentive Payment System (MIPS): Cost Measure Field Test Reports Access Guide

This guide explains how to use the CMS Enterprise Portal to access your Cost Measure Field Test Reports for the Episode-Based Cost Measures (EBCM), the Medicare Spending Per Beneficiary (MSPB) clinician measure, and the Total Per Capita Cost (TPCC) measure. Field test reports for the EBCM and the MSPB clinician measure use Medicare claims data for episodes ending from January 1, 2017 through December 31, 2017. Field test reports for the TPCC measure use data for the measurement period from October 1, 2016 through September 30, 2017.

### 1.0 Cost Measure Field Testing

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) established the Quality Payment Program.

Under the Quality Payment Program, clinicians are incentivized to provide high-quality and high value care through Advanced Alternative Payment Models (APMs) or the Merit-based Incentive Payment System (MIPS). MIPS eligible clinicians participating will receive a performance-based payment adjustment to their Medicare payment. This payment adjustment is based on a MIPS final score that assesses evidence-based and practice-specific data in the following categories:

1. Quality
2. Cost
3. Improvement activities
4. Promoting Interoperability (formerly Advancing Care Information)

### Field Testing for Cost Measures

Field testing is a voluntary opportunity for clinicians and other stakeholders to provide feedback on the draft measure specifications for the cost measures, the report format, and the supplemental documentation. We will field test the 13 measures in their current stages of development and re-evaluation to seek clinician and other stakeholder feedback by:

- Posting clinician field test reports for group practices and solo practitioners who meet the minimum number of cases for each measure on the [CMS Enterprise Portal](#)
- Posting mock reports, draft measure specifications, and supplemental documentation on the [MACRA Feedback page](#)

Field testing will occur from October 3, 2018 until October 31, 2018. During this period, stakeholders may submit [feedback](#) on the measures, report format, and other documentation.

**Note:** The PV-portal is scheduled to be de-commissioned on December 31, 2018; end users will no longer be able to access the Cost Measure Field Test Reports through the PV-Portal after that date.

Three types of Field Test Reports will be available through the CMS Enterprise Portal:

- 2017 Field Test Reports for Episode-Based Cost Measures (EBCM)
- 2017 Field Test Reports for Medicare Spending Per Beneficiary (MSPB) clinician
- 2017 Field Test Reports for Total Per Capita Cost (TPCC)<sup>1</sup>

## 1.1 2017 Field Test Reports for Episode-Based Cost Measures (EBCM)

Episode-based cost measures represent the cost to Medicare for the items and services furnished to a patient during an episode of care (“episode”). Episode-based cost measures inform clinicians about the cost of the care they are responsible for providing to a beneficiary during the episode’s timeframe. In the field test reports and their supplemental documentation, the term “cost” means the Medicare allowed amount, which includes both Medicare and trust fund payments and any applicable beneficiary deductible and coinsurance amounts on traditional, fee-for-service claims.

Under MACRA, MIPS involves the use of a methodology for analyzing cost, as appropriate, which includes consideration of care episode groups (referred to as “episode groups”). As a result, 11 episode-based cost measures are currently under development and will be field tested prior to consideration of their potential use in MIPS.

The measure developer is developing these 11 measures with extensive input from 10 Clinical Subcommittees and 11 measure-specific workgroups, a technical expert panel (TEP), Person and Family Committee, and the public. The measures include:

- Acute Kidney Injury Requiring New Inpatient Dialysis
- Elective Primary Hip Arthroplasty
- Femoral or Inguinal Hernia Repair
- Hemodialysis Access Creation
- Inpatient Chronic Obstructive Pulmonary Disease (COPD) Exacerbation
- Lower Gastrointestinal Hemorrhage
- Lumbar Spine Fusion for Degenerative Disease, 1-3 Levels
- Lumpectomy, Partial Mastectomy, Simple Mastectomy
- Non-Emergent Coronary Artery Bypass Graft (CABG)
- Psychoses/Related Conditions
- Renal or Ureteral Stone Surgical Treatment

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<sup>1</sup> Clinicians and clinician groups will receive field test reports if they are attributed at least 10 episodes for episode-based cost measures, 35 episodes for MSPB clinician, and 20 beneficiaries for TPCC.

## 1.2 2017 Field Test Reports for Medicare Spending Per Beneficiary (MSPB) Clinician

As part of measure maintenance and re-evaluation, the MSPB clinician measure has been refined through stakeholder input. The re-evaluated MSPB clinician measure shares the overall purpose of the current MIPS MSPB measure, which is to assess the cost performance of clinicians who furnish inpatient care services to Medicare beneficiaries. Through substantial stakeholder input, the measure has been refined, with a focus on ensuring attributed clinicians are responsible for a patient's care during an episode, and on removing certain services identified as unlikely to be influenced by the clinician's care decisions.

The re-evaluated MSPB clinician measure is being field tested in October 2018 and will not affect payment adjustments. This field testing of the re-evaluated measure is separate from the MSPB measure that is included in the 2017 and 2018 MIPS performance periods.

## 1.3 2017 Field Test Reports for Total Per Capita Cost (TPCC)

As part of measure maintenance and re-evaluation, the TPCC measure has been refined through stakeholder input. The re-evaluated TPCC measure shares the purpose of the current MIPS TPCC measure, which is to assess the cost performance of clinicians providing primary care management for Medicare beneficiaries. Through substantial stakeholder input, the measure has been refined, with a focus on attribution to identify the clinicians responsible for the primary care management of patients during the measurement period.

The re-evaluated TPCC measure is being field tested in October 2018 and will not affect payment adjustments. This field testing of the re-evaluated measure is separate from the TPCC measure that is included in the 2017 and 2018 MIPS performance periods.

## 2.0 How do I get started?

You or your group's authorized representative can access the Cost Measure Field Test Report(s) at <https://portal.cms.gov> using an Enterprise Identity Management (EIDM) account with one (1) of the following roles in the **Physician Quality and Value Programs** application:

- Groups are identified in the EIDM by their Medicare billing Taxpayer Identification Number (TIN). Users who register with a group-level role will be able to see all TIN- National Provider Identifier (NPI) reports within their TIN, as well as the TIN's

overall report, so it is a role that is more appropriate for someone who is in an administrative position at the TIN. A group consists of two or more eligible clinicians (as identified by their NPI that bill under the same TIN), and will receive an Episode-Based Cost Measures Field Test Report, for example, if the TIN is attributed at least 10 episodes among all NPIs billing under the TIN. A group can have either of the following roles:

- Security Official
- Group Representative
- An individual eligible clinician (or a solo practitioner) is identified by a single NPI that bills under the TIN, and will receive an Episode-Based Cost Measures Report, for example, if the NPI is attributed at least 10 or more episodes. A solo practitioner can have either of the following roles:
  - Individual Practitioner
  - Individual Practitioner Representative

**Note:** Clinicians looking to view **only** their TIN-NPI report should register as an Individual Practitioner, regardless of whether they are a part of a group practice or whether they practice on their own.

### To obtain an EIDM account:

You can get ready to access your report by signing up for a new EIDM account using [this guide](#), or by making sure your existing EIDM account has the 'Physician Quality and Value Programs' role using [this guide](#). For any EIDM related questions or concerns, please contact at 1-866-288-8292. For TTY: 1-877-715-6222.

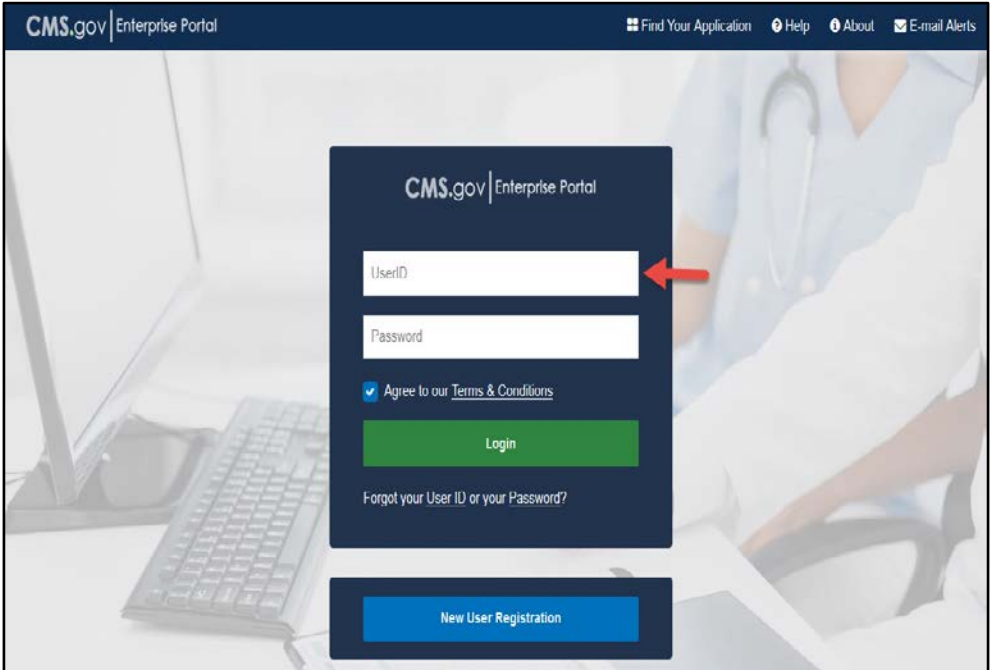
**Note:** Field test reports are separate from Quality and Resource User Report (QRUR) reporting, however, the same guides linked above may be used to set up an EIDM account.

### 3.0 Where can I learn more?

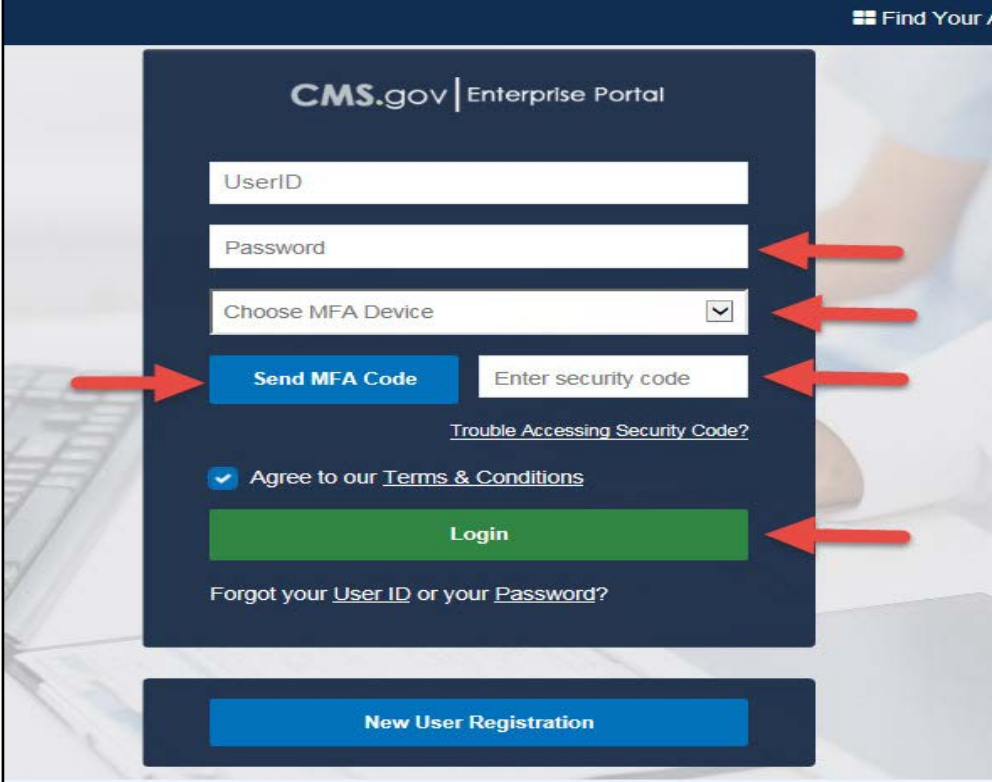
Should you have further questions, please contact the Quality Payment Program Service Center via telephone at 1-866-288-8292 or via email at [gpp@cms.hhs.gov](mailto:gpp@cms.hhs.gov). The Help Desk is available Monday – Friday; 8:00 A.M. – 8:00 P.M. Eastern Time Zone.



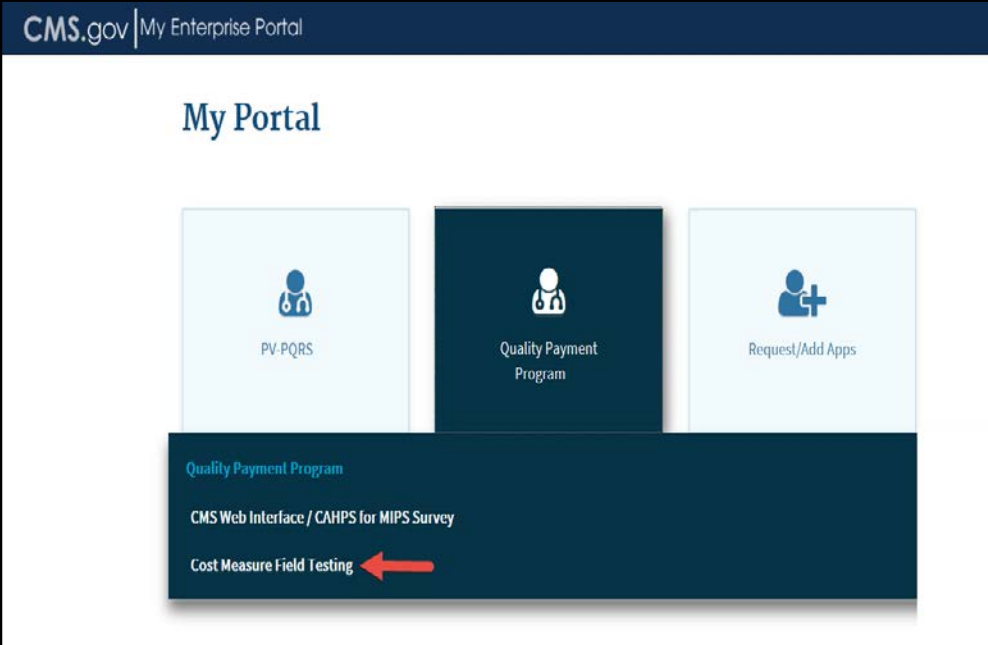
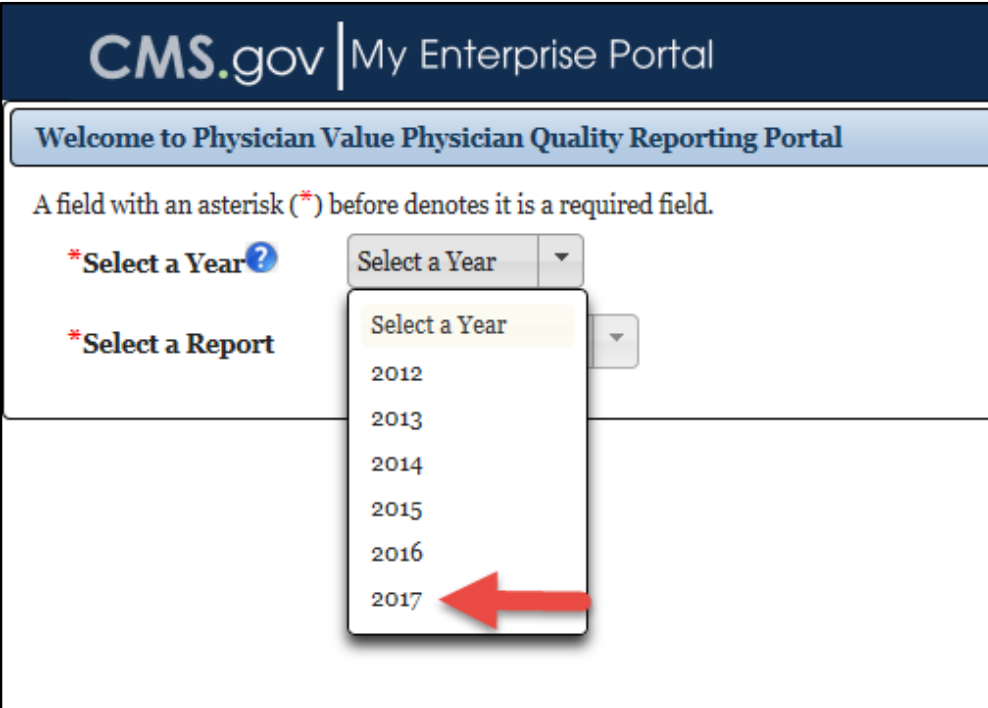
## 4.0 How do I access the 2017 Cost Measure Field Test Reports?

Steps	Screenshots
<p>1. Go to <b>CMS Enterprise Portal</b> at <a href="https://portal.cms.gov/">https://portal.cms.gov/</a>.</p> <p><b>Note:</b> The CMS Enterprise Portal supports the following internet browsers:</p> <ul style="list-style-type: none"><li>• Internet Explorer 11 (without compatibility mode)</li><li>• Firefox</li><li>• Chrome</li><li>• Safari</li></ul> <p>Enable JavaScript and adjust any zoom features to ensure the screen is not too wide.</p> <p>2. Enter your <b>UserID</b> information.</p> <p><b>Note:</b> The <b>Choose MFA Device</b> drop-down menu will be displayed when you enter the <b>UserID</b>.</p>	

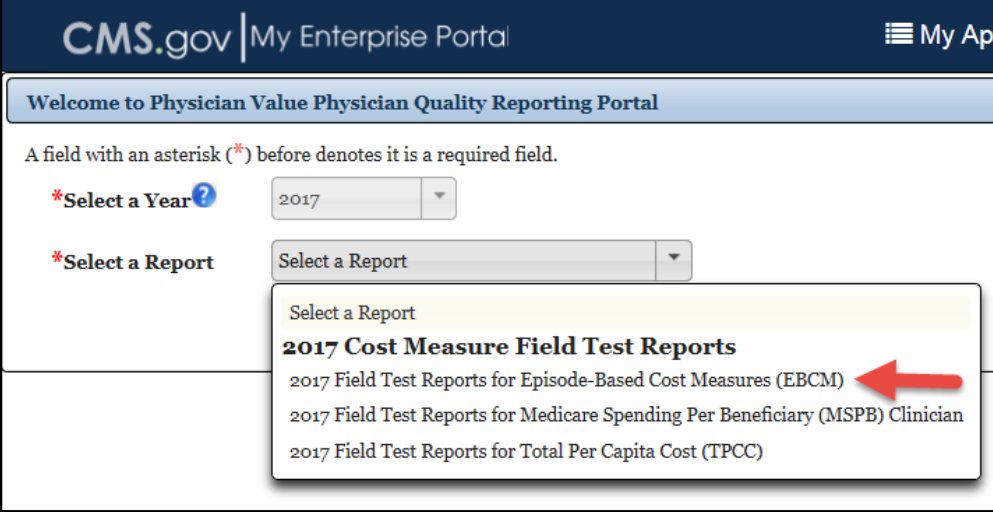
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Steps	Screenshots
<p>3. Enter your <b>Password</b> information.</p> <p>4. Complete the <b>Multi-Factor Authentication (MFA)</b>. Each time you attempt to log in to the <b>CMS Enterprise Portal</b>, you will be required to complete the MFA process.</p> <p>a) Select an option under the <b>Choose MFA Device</b> drop-down menu.</p> <p><b>Note:</b> You previously registered to complete the MFA process when setting-up your <b>EIDM</b> account. Please ensure that you select the same <b>MFA Device Type</b> selected 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 you setup your account.</p> <p>b) Select <b>Send MFA Code</b> to receive a <b>Security Code</b>.</p> <p><b>Note:</b> The <b>Send MFA Code</b> option will be displayed only when one of the following MFA Device Types is selected:</p> <ul style="list-style-type: none"><li>• Text Message-Short Message (SMS)</li><li>• Interactive Voice Response (IVR)</li><li>• Email</li></ul> <p>c) Retrieve the security code from the selected MFA Device type.</p> <p>d) Enter the <b>Security Code</b> and select <b>Agree to our Terms &amp; Conditions</b>.</p> <p>e) Select <b>Login</b>.</p>	

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Steps	Screenshots
<p>5. Choose <b>Cost Measure Field Testing</b> from the <b>Quality Payment Program</b> drop-down menu.</p> <p><b>Note 1:</b> All application tiles are listed in alphabetical order. If you do not see the <b>Quality Payment Program</b> menu then click on <b>View Apps</b> to search for <b>Quality Payment Program</b> menu.</p> <p><b>Note 2:</b> If you only have two programs then both of your application will be shown through the tiles and <b>View Apps</b> option will not be available.</p>	
<p>6. From the <b>Welcome to Physician Value Physician Quality Reporting Portal</b> screen, choose year <b>2017</b> from the <b>Select a Year</b> drop-down menu.</p> <p><b>Note:</b> The <b>Cost Measure Field Testing Report</b> is available when you choose the year <b>2017</b> from the <b>Select a Year</b> drop-down menu.</p>	


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Steps	Screenshots
<p>7. Choose your desired <b>2017</b> Cost Measure Field Test Report from the '<b>Select a Report</b>' drop-down menu. The three (3) available reports are:</p> <ul style="list-style-type: none"> <li>• <b>2017 Field Test Reports for Episode-Based Cost Measures (EBCM)</b></li> <li>• <b>2017 Field Test Reports for Medicare Spending Per Beneficiary (MSPB) Clinician</b></li> <li>• <b>2017 Field Test Reports for Total Per Capita Cost (TPCC)</b></li> </ul> <p><b>Note:</b> If you do not see any <b>2017 Cost Measure Field Test Reports</b> in the drop-down menu:</p> <ul style="list-style-type: none"> <li>• Verify that you chose <b>2017</b> from the <b>Select a Year</b> drop-down menu OR</li> <li>• Contact QPP Help Desk (<a href="mailto:gpp@cms.hhs.gov">gpp@cms.hhs.gov</a>) to ensure that you logged in with a correct EIDM account</li> </ul>	





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Steps	Screenshots
<p>8. Read the <b>Attestation Message</b> and choose the appropriate attestation.</p> <p>a. Choose one (1) of the options under “<b>I plan to use this data in my capacity as a:</b>”</p> <p>b. Then, choose <b>I Confirm</b> to continue.</p> <p><b>Note:</b> <i>If you choose <b>Neither of the above or I do not know</b>, you will be able to see the <b>Exit to the Resources</b> screen.</i></p>	<p>*I plan to use this data in my capacity as a: (must select one box)</p> <p><input checked="" type="radio"/> <b>HIPAA Covered Entity (CE) provider</b></p> <p>I need to use this information in my work for care coordination and quality improvement purposes that fall within the first and/or second paragraphs of the HIPAA Privacy Rule definition of "Health Care Operations," and I confirm that my request constitutes the "minimum necessary" data to accomplish these purposes.</p> <p> <input type="button" value="I Confirm"/> <input type="button" value="I Decline"/></p> <p><input type="radio"/> <b>Business Associate (BA) of HIPAA CE(s) in accordance with a valid HIPAA Business Associate Agreement that allows us to request individually identifiable health information (IIHI) for use in care coordination and quality work on behalf of the HIPAA CE(s).</b></p> <p>I need to use this information in my work for care coordination and quality improvement purposes that fall within the first and/or second paragraphs of the HIPAA Privacy Rule definition of "Health Care Operations" on behalf of the HIPAA CE(s), and I confirm that my request constitutes the "minimum necessary" data to accomplish these purposes.</p> <p><input type="button" value="I Confirm"/> <input type="button" value="I Decline"/></p> <p><input type="radio"/> <b>Neither of the above or I do not know.</b></p> <p>Should you have further questions or want more information, please contact the Quality Payment Program Service Center via telephone at 1-866-288-8292 or via email at <a href="mailto:gpp@cms.hhs.gov">gpp@cms.hhs.gov</a>. The Help Desk is available Monday - Friday; 8:00 A.M. - 8:00 P.M. Eastern Time Zone.</p> <p><input type="button" value="Exit to Resources screen"/></p>



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## Steps

9. Choose a TIN from the available TINs associated with your EIDM account from the TIN drop-down menu:
  - a) For users with a Security Official or Group Representative role, NPI entry is optional.
  - b) For users with an Individual Practitioner or Individual Practitioner Representative Role, your NPI is pre-populated based on the TIN selection.
10. Choose Search to see the search results.

**Note 1:** A **double asterisk (\*\*)** after the TIN in the TIN drop-down indicates that the TIN has a report.

**Note 2:** If a **Group User**, selects a TIN from the TIN drop-down menu and does not enter an NPI in the NPI field, then the TIN and TIN-NPI level reports for that specific TIN are displayed. If the user selects a TIN from the TIN drop-down menu and enters a specific NPI in the NPI field, then only the TIN-NPI level report for that specific TIN and NPI combination is displayed.

**Note 3:** If an **Individual User** selects a TIN from TIN drop-down menu, then the NPI associated with the TIN is prepopulated and the TIN-NPI level report for the selected TIN is displayed.

## Screenshots

The screenshot displays the 'Welcome to Physician Value Physician Quality Reporting Portal' interface. It includes a header, a required field notice, and two dropdown menus: '\*Select a Year' (set to 2017) and '\*Select a Report' (set to 2017 Field Test Reports for Episode-Based Cost Measures (EBCM)). Below this is a search section titled '2017 Field Test Reports for Episode-Based Cost Measures (EBCM) Search' with a notice about double asterisks (\*\*). The search fields include '\*TIN' (set to Hospital Center MD:4766\*\*), 'NPI', and a 'Search' button. A dropdown menu is open for the TIN field, showing options: 'Select a TIN', 'All', 'Hospital Center MD:4766\*\*', 'MD Hospital:7811', and 'Medical Clinic Center:5678\*\*'. Red arrows point to the double asterisks on the TIN field and the Search button.



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## Steps

11. If the user chooses the **All** option from the **TIN** drop-down menu:

- The **NPI** field will be disabled
- Group User will be able to see all the TIN level and/or TIN-NPI level reports available in the Search Results across all TINs
- Individual User will be able to see all **TIN-NPI** level reports available for all of the associated Individual TINs.

**Note 1:** No group TIN level report is available to Individual Users. To access the TIN level Field Test report, a user with a Security Official (SO) account within the group practice can only access the report.

**Note 2:** The user will see the report in the Search Results only if they meet the measures case minimum.

## Screenshots

The screenshot displays the 'Welcome to Physician Value Physician Quality Reporting Portal' interface. It includes a header, a required field instruction, and two filter sections. The first filter section has a 'Select a Year' dropdown set to '2017' and a 'Select a Report' dropdown set to '2017 Field Test Reports for Episode-Based Cost Measures (EBCM)'. The second filter section, titled '2017 Field Test Reports for Episode-Based Cost Measures (EBCM) Search', contains a '\*TIN' dropdown set to 'All' (highlighted with a red arrow), an 'NPI' field, and 'Search' and 'Clear' buttons. Below the filters is a 'Search Results' section listing four Excel files: 'ebcm-field-test-report-TIN4766.xlsx', 'ebcm-field-test-report-TIN4766-NPI2371.xlsx', 'ebcm-field-test-report-TIN4766-NPI3456.xlsx', and 'ebcm-field-test-report-TIN5678.xlsx'.

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Steps	Screenshots
<p>12. Choose any of the available reports link from the <b>Search Results</b> to download the report:</p> <ul style="list-style-type: none"> <li>• <b>Episode-Based Cost Measures (EBCM)</b> report will be available in <b>Excel</b> format</li> <li>• <b>Medicare Spending Per Beneficiary (MSPB) Clinician</b> report will be available in <b>zip</b> format. The zip file will contain a <b>CSV</b> and <b>PDF</b> file</li> <li>• <b>Total Per Capita Cost (TPCC)</b> report will be available in <b>zip</b> format. The zip file will contain a <b>CSV</b> and <b>PDF</b> file</li> </ul> <p><i>Note: The Reports will be downloaded based on your browser's settings.</i></p>	<p>The screenshots show the following search results:</p> <p><b>Top Screenshot: 2017 Field Test Reports for Episode-Based Cost Measures (EBCM) Search</b></p> <ul style="list-style-type: none"> <li>• <a href="#">ebcm-field-test-report-TIN4766.xlsx</a> (indicated by a red arrow)</li> <li>• <a href="#">ebcm-field-test-report-TIN4766-NPI2371.xlsx</a></li> <li>• <a href="#">ebcm-field-test-report-TIN4766-NPI3456.xlsx</a></li> </ul> <p><b>Bottom Screenshot: 2017 Field Test Reports for Medicare Spending Per Beneficiary (MSPB) Clinician Search</b></p> <ul style="list-style-type: none"> <li>• <a href="#">mspb-clinician-field-test-report-TIN4766.zip</a> (indicated by a red arrow)</li> <li>• <a href="#">mspb-clinician-field-test-report-TIN4766-NPI2371.zip</a></li> <li>• <a href="#">mspb-clinician-field-test-report-TIN4766-NPI3456.zip</a></li> </ul>





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## Steps

13. If no reports are available for the **TIN** or the **TIN-NPI** combination, then in the **Search Results** you will see the message “There are no 2017 Field Test Reports for Episode-Based Cost Measures (EBCM) for this selection because the measures case minimum was not met”.

**Note:** The report name in the message will change based on the report selection from the **Select a Report** drop-down menu.

## Screenshots

Welcome to Physician Value Physician Quality Reporting Portal

A field with an asterisk (\*) before denotes it is a required field.

\*Select a Year 2017

\*Select a Report 2017 Field Test Reports for Episode-Based Cost Measures (EBCM)

2017 Field Test Reports for Episode-Based Cost Measures (EBCM) Search

A field with a double asterisk (\*\*) after the TIN in TIN dropdown denotes that the TIN has a report.

\*TIN MD Hospital:7811

NPI

Search Clear

Search Results

There are no 2017 Field Test Reports for Episode-Based Cost Measures (EBCM) for this selection because the measure case minimum was not met.

## Steps

14. The **2017 Episode-Based Cost Measures Field Test Report (EBCM)** is displayed in Excel format.

**Note:** The report format will vary depending on your report selection from the **Select a Report** drop-down menu.

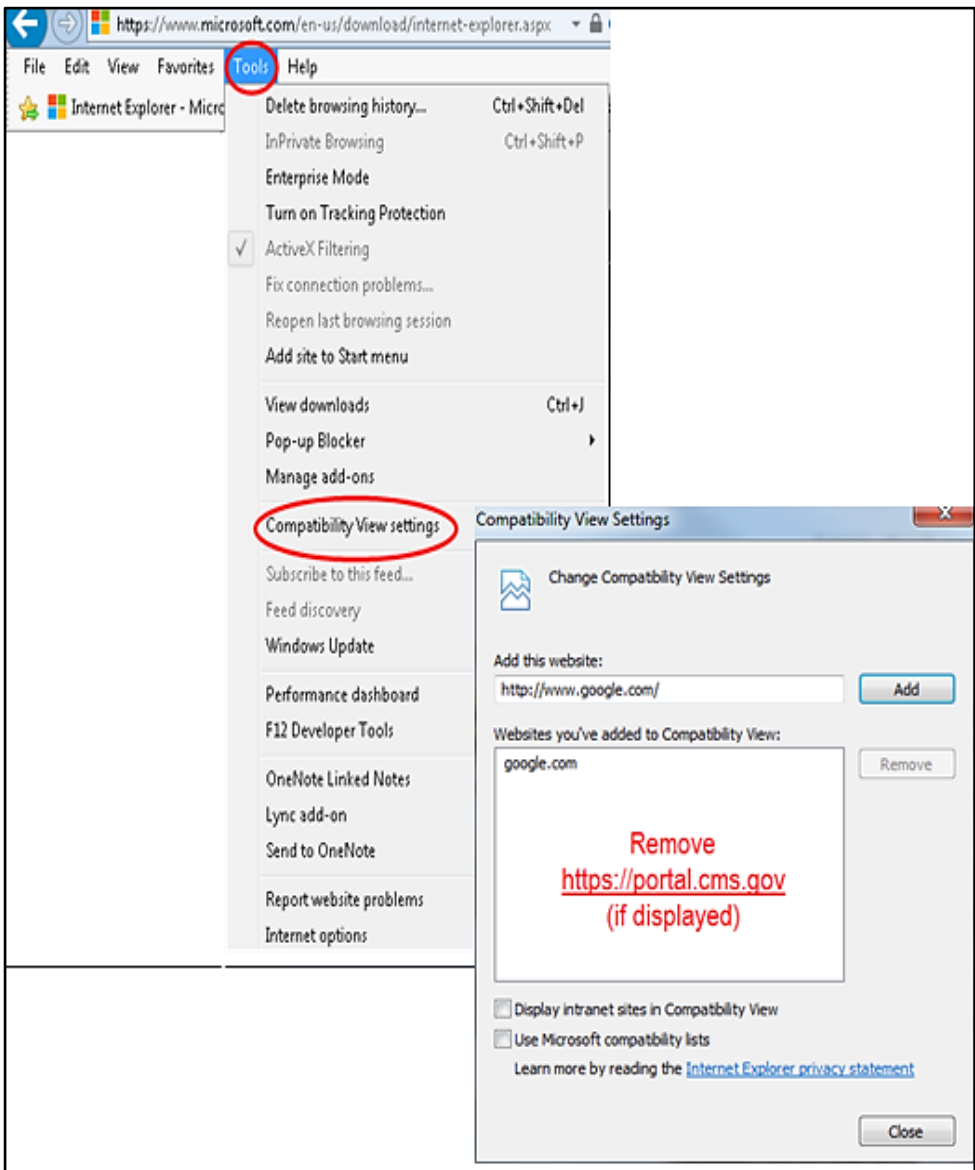
## Screenshots

The screenshot displays an Excel spreadsheet titled "ebcm-field-test-report-TIN7740.xlsx". The spreadsheet content is as follows:

- Row 1:** Header for "Episode-Based Cost Measure Field Test Report".
- Row 2:** Sub-header "Name of TIN".
- Row 3:** Measurement Period: 01/01/17 to 12/31/17.
- Row 4:** Section title "Episode-Based Cost Measure Performance for Your TIN".
- Row 5:** Instruction: "Please click one of the hyperlinked boxes below to navigate to the corresponding tab."
- Row 6:** Section title "All Measures".
- Row 7:** Buttons for "Understanding Your Report" and "High-Level Summary Results".
- Row 8:** Buttons for "Appendix B: Episode-Level Table" and "Glossary".
- Row 9:** Section title "Elective Primary Hip Arthroplasty Cost Measure".
- Row 10:** Buttons for "Elective Primary Hip Arthroplasty Cost Measure: Summary Results" and "Appendix A: Drill-Down Detail for the Measure".
- Row 11:** Section title "Reference Materials".
- Row 12:** Buttons for "Cost Measure Methodology" and "Frequently Asked Questions".
- Row 13:** Section title "Quality Payment Program Quality Measures".
- Row 14:** Navigation tabs: Overview, Understanding\_Your\_Report, Summary, Results\_el\_ha, Appx\_A\_el\_ha, Appx\_B\_Episodes\_Table.



## 5.0 How do I access the 2017 Cost Measure Field Test Reports?

Steps	Screenshots
<p><b>Troubleshooting</b> This is what you can try if you are not using 1 of the supported browsers or you are having trouble using the <b>CMS Enterprise Portal</b> with Microsoft Internet Explorer 11:</p> <ol style="list-style-type: none"> <li>1. Make sure the browser is open.</li> <li>2. Press the <b>Alt</b> key to show the Menu bar (or right-click the <b>Address bar</b> and then choose <b>Menu bar</b>).</li> <li>3. Choose <b>Tools</b> on the <b>Menu bar</b>.</li> <li>4. Choose <b>Compatibility View Settings</b>.</li> <li>5. Remove the CMS Enterprise Portal web address if it shows up in the <b>Websites you have added to Compatibility View</b> box.</li> <li>6. Un-check all of the boxes under <b>Websites you have added to Compatibility View</b>.</li> <li>7. Close the <b>Compatibility View Settings</b> box.</li> <li>8. Close the current browser session.</li> <li>9. Open a new browser session.</li> <li>10. Go to <a href="https://portal.cms.gov">https://portal.cms.gov</a> and choose <b>Login to the CMS Enterprise Portal</b>.</li> </ol>	 <p>The screenshot shows the Internet Explorer browser interface. The 'Tools' menu is open, and 'Compatibility View settings' is circled in red. A secondary window titled 'Compatibility View Settings' is open, showing a list of websites. The website 'https://portal.cms.gov' is highlighted in red, and the text 'Remove https://portal.cms.gov (if displayed)' is overlaid on it. The 'Compatibility View Settings' window also shows options to 'Add this website' and 'Websites you've added to Compatibility View'.</p>