

Physician and Teaching Hospital Quick Reference Guide – Review and Dispute

Reviewing a record

1. Log in to [Open Payments](#) and select the “Review and Dispute” tab.
2. Select the physician name and program year you wish to review data for, then click the “Show Records” button. If records have been reported about you, then you will be taken to the “Review and Dispute” page. If no records have been reported about you, you will receive a message stating there are no payments or other transfers of value reported. If you do not see your name in the “Choose a Physician” list, check your vetting status by clicking on “My Profile”, and under the “Overview” tab, your “Role Status”. Your role status must say “Vetted” or “[Conditionally Active](#)” to review data reported about you.
3. On the “Review and Dispute” page, you will see a list of all submitted records. You can filter using the tools in the search box. View all information available for each record, including links to view the payment record, using the scroll bar at the bottom of the table.
4. Review your records by scrolling to the right and selecting the “View” link under the “View Record” column.
5. Choose whether you want to affirm or dispute the record. You may also withdraw a dispute you previously initiated. Select the desired record and click on the corresponding button. Follow the on-screen text to complete the action.

Disputing a record

If you choose to dispute a record, you must enter a reason for the dispute within the “Reason for Dispute” text box before continuing. This text box allows you to enter up to 4,000 characters (including spaces). Special characters allowed in the box are limited to apostrophes or single quotes (’), periods (.), ampersands (&), hyphens (-), and commas (,). Any text you enter into this box will be made available to the entity that reported the payment, and that entity will receive an email notifying them that you have initiated a dispute.

Records that have been disputed will be listed with one of the following statuses:

- **“Initiated”** indicates that you have initiated a dispute against a record.
- **“Acknowledged”** indicates that the reporting entity has received and acknowledged the dispute initiated against them. Acknowledging a dispute will trigger a notification to you, letting you know your dispute has been received.
- **“Resolved, no change”** indicates that the applicable manufacturer or applicable GPO and the physician or teaching hospital have resolved the dispute in accordance with the guidance in the Final Rule. This action should only be taken when dispute resolution does not require a change to the data by the reporting entity.
- **“Withdrawn”** indicates that you have withdrawn a dispute you initiated against a record.
- **“Resolved”** indicates that disputed data was updated and then resubmitted and re-attested to by the reporting entity.

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Quick Tips

- **“Conditionally Active”** vetting status occurs when a physician submits multiple state licenses and the vetting process is not able to successfully match all of the licenses with the physician against other data sources. Until all state licenses are successfully matched, the user will be in “Conditionally Active” status and cannot view records associated with those license numbers. CMS recommends that users with this status check and validate all of their state licenses and correct them in their Open Payments profile as necessary.
- Use Internet Explorer versions 8-10. **Currently, the Open Payments system is not optimized for the Safari, Firefox, or Chrome browsers**
- For assistance with the review and dispute process, please call our live Help Desk at 1-855-326-8366, Monday through Friday, from 7:30 a.m. to 6:30 p.m. (CT), excluding Federal holidays. Questions can also be submitted to the Help Desk via email, at openpayments@cms.hhs.gov.