MLN Connects™

National Provider Call

Open Payments (the Sunshine Act)

Registration, Review and Dispute Overview

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Medicare Learning Network®
Official Information Health Care Professionals Can Trust

Medicare Learning Network®

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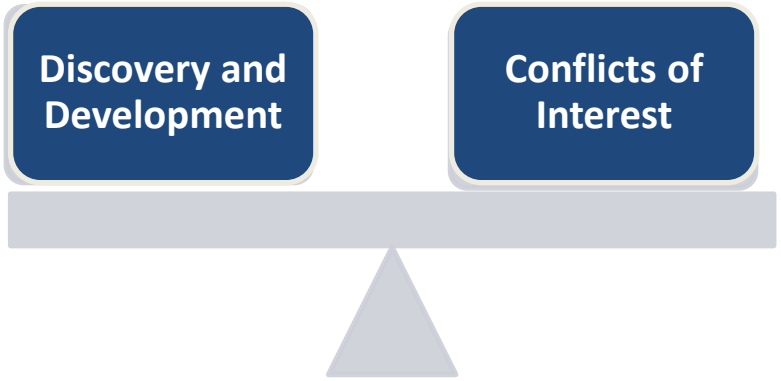
Agenda

- Open Payments Overview
- Operational Updates and Milestones
- Registration Overview
- Review and Dispute Overview
- Resources
- Frequently Asked Questions

Open Payments Overview

Industry and Physician Relationships

- Collaborations between physicians and the medical industry can be beneficial by promoting **discovery and development** of new technologies that improve health and/or lower costs
- But, financial relationships may also influence professional judgment and **conflicts of interest** can potentially arise



Statute and Regulation

- Section 6002 of the Patient Protection and Affordable Care Act (Transparency Reports and Reporting of Physician Ownership or Investment Interests)

- **Final Rule:** Medicare, Medicaid, Children's Health Insurance Programs; Transparency Reports and Reporting of Physician Ownership or Investment Interests
  - Published Feb. 8, 2013

Program Objectives

Open Payments is a national transparency program requiring certain manufacturers and group purchasing organizations to disclose their financial relationships with physicians and teaching hospitals

Objectives

- Make certain financial relationships transparent on a national scale
- Give consumers the information needed to ask questions and make more informed decisions about their healthcare professionals

CMS' Role

- Remain neutral and present the data on a public website
- Ensure reporting and disclosure are complete, accurate, and clear

Program Requirements

- **Applicable manufacturers of covered products AND entities under common ownership with applicable manufacturers who also provide assistance and support are required to annually report to CMS:**
  - Payments or other transfers of value made to **physicians and teaching hospitals**
  - Certain ownership or investment interests held by **physician owners or investors or their immediate family members**
- **Applicable group purchasing organizations (GPOs) are required to annually report to CMS:**
  - Payments or other transfers of value made to physician owners or investors
  - Certain ownership or investment interests held by physician owners or investors and their immediate family members

Program Requirements (cont.)

Who is reported on?

Covered Recipient Physicians

- Doctors of medicine or
- Doctors of dental medicine or dental surgery
- Doctors of podiatric medicine
- Doctors of optometry
- Chiropractors
- All legally authorized by the state to practice

Covered Recipient Teaching Hospitals

- The hospitals that CMS has recorded as receiving payment(s) under Medicare direct graduate medical education (GME), indirect medical education (IME) or psychiatric hospitals IME programs
- Each year, Open Payments publishes a list of affected teaching hospitals; the list is available on the Open Payments website at http://go.cms.gov/openpayments

Physician Owners or Investors

- Physicians who are owners or investors of an applicable manufacturer or GPO
- Immediate family members who have ownership or investment interest in an applicable manufacturer or GPO: spouse, natural or adoptive parent, child, or sibling, stepparent, stepchild, stepbrother, or stepsister, father-, mother-, daughter-, son-, brother-, or sister-in-law, grandparent or grandchild, spouse of a grandparent or grandchild

Data Collection

General Payments	• Payments or other transfers of value not made in connection with a research agreement
Research Payments	• Payments or other transfers of value made in connection with a research agreement
Ownership & Investment Interest	• Ownership or investment interests

Physician Information Reported by Industry

- Full legal name (as appears in NPPES)
- Primary and specialty
- Primary business address
- NPI (as appears in NPPES)
- State professional license number(s)
- Email address

Details Reported by Industry

- Information about the payment/transfer of value, or ownership/investment interest
- Information about the covered product payment/transfer of value is related to
- Name(s) of the related covered drug, device, biological, or medical supply (if applicable)
- Amount, date, form, and nature of payment or other transfer of value, or ownership/investment interest
- Number of payments/transfers of value
- If designated to a third party, the name of individual or entity the physician indicated to receive the payment

Reasons Associated with a Payment, Transfer of Value, Ownership, or Investment Interest

Why did the physician or teaching hospital receive the payment, transfer of value, or ownership/investment interest? (to be reported by industry)	
• Consulting fees • Honoraria • Gifts • Entertainment • Food & beverage • Travel & lodging • Education • Research • Charitable contribution • Space rental or facility fees	• Royalty or license • Current or prospective ownership or investment interest • Grant • Compensation for services other than consulting • Direct compensation for serving as faculty or as a speaker for a medical education program (accredited and non-accredited)

Operational Updates and Milestones

2013 Program Year

Industry:

Collect information on payments and other transfers of value, as well as ownership or investment interests held by physicians and their family members

Industry:

Register and submit 2013 information to CMS

(Aggregate data: Feb. 18-Mar. 31, 2014

Detailed data: June 1-June 31, 2014)

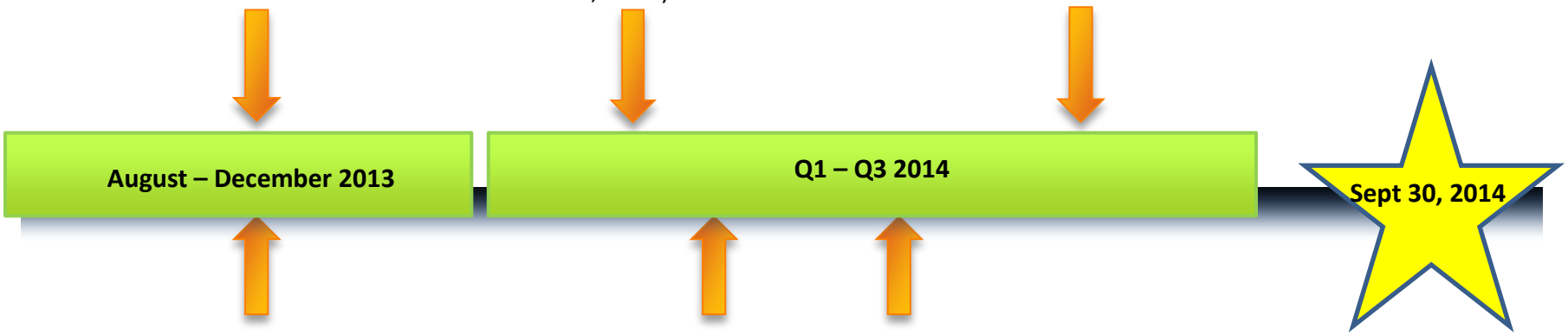
Industry will:

Correct disputed information

(Aug. 28-Sept. 11, 2014)

CMS Public Website:

2013 Information Posted



Physicians & Teaching Hospitals:

Keep track of payments and transfers of value made to you and be mindful of ownership and investment interests held by both you and your immediate family

Physicians & Teaching Hospitals are:

Register with CMS in order to receive notifications and information submitted by the industry

(June 1, 2014)

Physicians & Teaching Hospitals should:

Register in Open Payments system and review information for accuracy; dispute any inaccurate data with reporting entities

(July 14-Aug. 27, 2014)

Physician/Teaching Hospital Registration Overview & Instructions

Physician/Teaching Hospital Registration Overview

- Registration is **required** for physicians and teaching hospitals to review or dispute the following information reported about them by applicable manufacturers and GPOs:
  - Payments made to physicians and teaching hospitals,
  - Other transfers of value made to physicians and teaching hospitals, or
  - Ownership or investment interests held by physicians or their immediate family members
- Registration will be conducted in two phases this first reporting year:
  - Phase 1—CMS Portal Registration (EIDM)
  - Phase 2—Open Payments System Registration; and, Review and Dispute Process

Phase 1: Registration for CMS' Enterprise Portal

Registration for CMS' Enterprise Portal (EIDM)

- Began on June 1, 2014
  - Physicians and teaching hospitals register in EIDM
  - Request access to the Open Payments system via EIDM

Phase 1: EIDM New User Registration

- EIDM registration is required for access to the Open Payments system
- EIDM registration process is the same for all users
- You may already have an EIDM account if you use the Health Insurance Oversight System (HIOS), the Medicaid and CHIP Program System (MACPro), or other CMS systems

Phase 1: EIDM Identify Verification Overview

- CMS' EIDM is how CMS verifies user identities
- Identity verification is the process of providing information (e.g., identity history, credentials, or documents) for the purpose of proving that a person is the same person he or she claims to be
- Individuals requesting electronic access to CMS protected information or systems must first have their identities verified

Phase 1: EIDM Identify Verification Overview (cont.)

- All users who register for EIDM have their identities verified
- EIDM matches information entered by users to information provided by Experian
- Out of Wallet (OOW) questions are also used to verify identity
- OOW questions ask for private data and contain information pulled from your credit report such as:
  - Mortgage lender name
  - Previous employer name
  - Auto lender name
- OOW questions and answers are shared **only** between the EIDM registrant and the verification service provider, Experian; the information will **not** be stored in EIDM or in the Open Payments system.

Phase 1: EIDM Identify Verification Overview (cont.)

- A soft credit inquiry will be made during EIDM registration
- Soft credit inquiries are visible only to the EIDM registrant and **only** appear on credit reports produced by Experian (shown as an inquiry made by CMS). They are not visible to lenders. If you order a credit report from Experian, you will see an entry of inquiry by the Centers for Medicare & Medicaid Services with CMS's address and the date of request.
- Identity proofing does **not** affect credit score
- Contact Experian Proofing Support Services for assistance with failed identity proofing (1-866-578-5409)

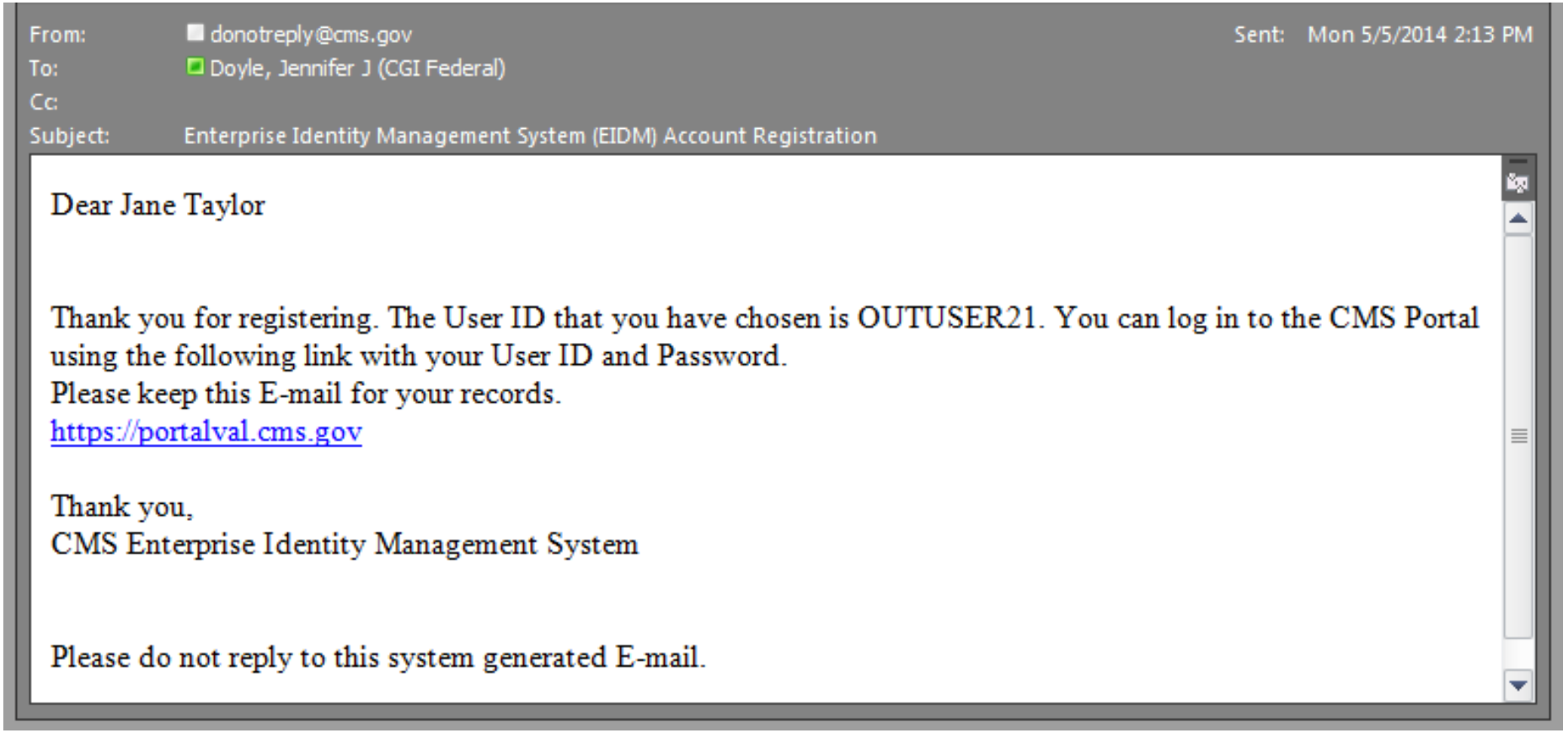
Phase 1: Key EIDM Registration Steps

Key steps in the process:

1. Go to CMS Enterprise Portal (https://portal.cms.gov) and Select "New User Registration"
2. Accept Terms & Conditions
3. Enter Personal Information
4. Select User ID, Password, and Challenge Questions
5. Registration Complete
6. Log out

Use the Phase 1 Step-by-Step CMS Enterprise Portal Registration for Physicians and Teaching Hospitals presentation for guidance on how to complete Phase 1 registration

Phase 1: Confirmation Email



From: donotreply@cms.gov
Sent: Mon 5/5/2014 2:13 PM
To: Doyle, Jennifer J (CGI Federal)
Cc:
Subject: Enterprise Identity Management System (EIDM) Account Registration

Dear Jane Taylor

Thank you for registering. The User ID that you have chosen is OUTUSER21. You can log in to the CMS Portal using the following link with your User ID and Password.
Please keep this E-mail for your records.
https://portalval.cms.gov

Thank you,
CMS Enterprise Identity Management System

Please do not reply to this system generated E-mail.

Phase 1: Unsuccessful EIDM Registration

- Individuals with addresses outside of the United States may not register successfully in EIDM
- They should contact the Open Payments Help Desk for assistance with EIDM registration
- Any additional EIDM issues should be directed to the Open Payments Help Desk at openpayments@cms.hhs.gov or 1-855-326-8366, Monday through Friday, from 7:30 a.m. to 6:30 p.m. (CT), excluding Federal holidays

Phase 2: Open Payments System Registration

- Began on July 14, 2014
  - Physicians and teaching hospitals use EIDM registration credentials to register in the Open Payments system
  - Once physicians and teaching hospitals are registered in the Open Payments system, they are able to participate in the review and dispute process

Note: EIDM registration is a required first step before Open Payments system registration

Phase 2: Open Payments System Access

- Request for this access can occur only after EIDM registration is successful
- Request for this access is made through the CMS Enterprise Portal (EIDM)

Use the Phase 1 Step-by-Step CMS Enterprise Portal Registration for Physicians and Teaching Hospitals presentation for guidance on how to complete Phase 1 registration and how to request access to the Open Payments system

Phase 2: Physician Registration—Open Payments System Overview

- Physicians may register for the Open Payments system if they wish to review and dispute any information reported about them in the Open Payments system prior to its publication
- Registration creates a profile for the physician in the Open Payments system
- All physician profiles will be vetted to ensure the physician's identity
- Vetting occurs after the physician completes and submits his or her profile in the Open Payments system
- If the physician profile is modified, it may trigger re-vetting

Phase 2: Physician Registration—Open Payments System Overview (Cont.)

- Physicians will be vetted using profile information including:
  - Business address
  - National Provider Identifier (NPI)
  - Drug Enforcement Agency (DEA) number
  - State license information
- Vetting will take roughly 24 hours
- Provide as much information as possible, as more information speeds vetting and ensures all records associated with you will be matched to your profile
- Vetting must be successful in order for the physician to perform actions within the Open Payments system before the authorized representative can do anything in the Open Payments system
- If vetting remains unsuccessful, physicians should contact the Open Payments Help Desk for assistance (openpayments@cms.hhs.gov)

Phase 2: Physician Registration—Open Payments System Overview (Cont.)

- One authorized representative can be nominated
- Registration must be completed in one sitting (there is no option to save and return at a later time)
- Not all registration fields are required

Phase 2: User Roles for Physicians

User Role	Function
Physician	• Registers him- or herself in the system • Nominates an authorized representative • Has full access to review and dispute records
Authorized Representative	• Allowed activities depend upon access levels granted by physician: — Read-only: (default) Able to see a physician's "My Profile" and records information — Modify Profile: Able to edit or enter a physician's "My Profile" information (NPI, license, specialties, etc.) — Dispute Records: Able to dispute records related to the physician submitted by reporting entities • Access levels are separate; having "dispute records" access does not automatically include "modify profile" access, or vice versa • Must be nominated by the physician

Phase 2: Fields for Physician Registration Profile

Required and Optional Fields for Physician Profiles Table

Fields	Required	Optional
Practice Name		X
Practice Business Address	X	
Physician Primary Type	X	
National Provider Identifier (NPI)		X
Drug Enforcement Administration (DEA) Number		X
Primary Specialty Code	X	
License State (at least 1, if not all)	X	
License Number (at least 1, if not all)	X	

NPIs can be found on the NPI Registry at:
https://npiregistry.cms.hhs.gov/NPPESRegistry/NPIRegistryHome.do

DEA numbers can be obtained by contacting the DEA Office of Diversion Control:
https://www.deadiversion.usdoj.gov/

Phase 2: Fields for User Profile

Required and Optional Fields for Individual User Profiles Table

Fields	Required	Optional
First Name	X	
Middle Name		X
Last Name	X	
Name Suffix		X
Job Title		X
Business Address	X	
Business Phone Number	X	
Business Email Address	X	

Phase 2: Before Beginning Physician Registration

The person registering must:

- Have an EIDM user ID and password on hand
- Have access to the Open Payments application through EIDM (system will log you out after 15 minutes of inactivity)
- Have the required profile information available
- Know who to nominate for the authorized representative role (may nominate only one authorized representative)
- Study the levels of access for authorized representatives and determine who will fill the role and what levels of access you will grant them
- Be sure to use Internet Explorer 8 or higher
- Only use the navigation buttons within the Open Payments system itself. Never use the navigation buttons on your browser toolbar

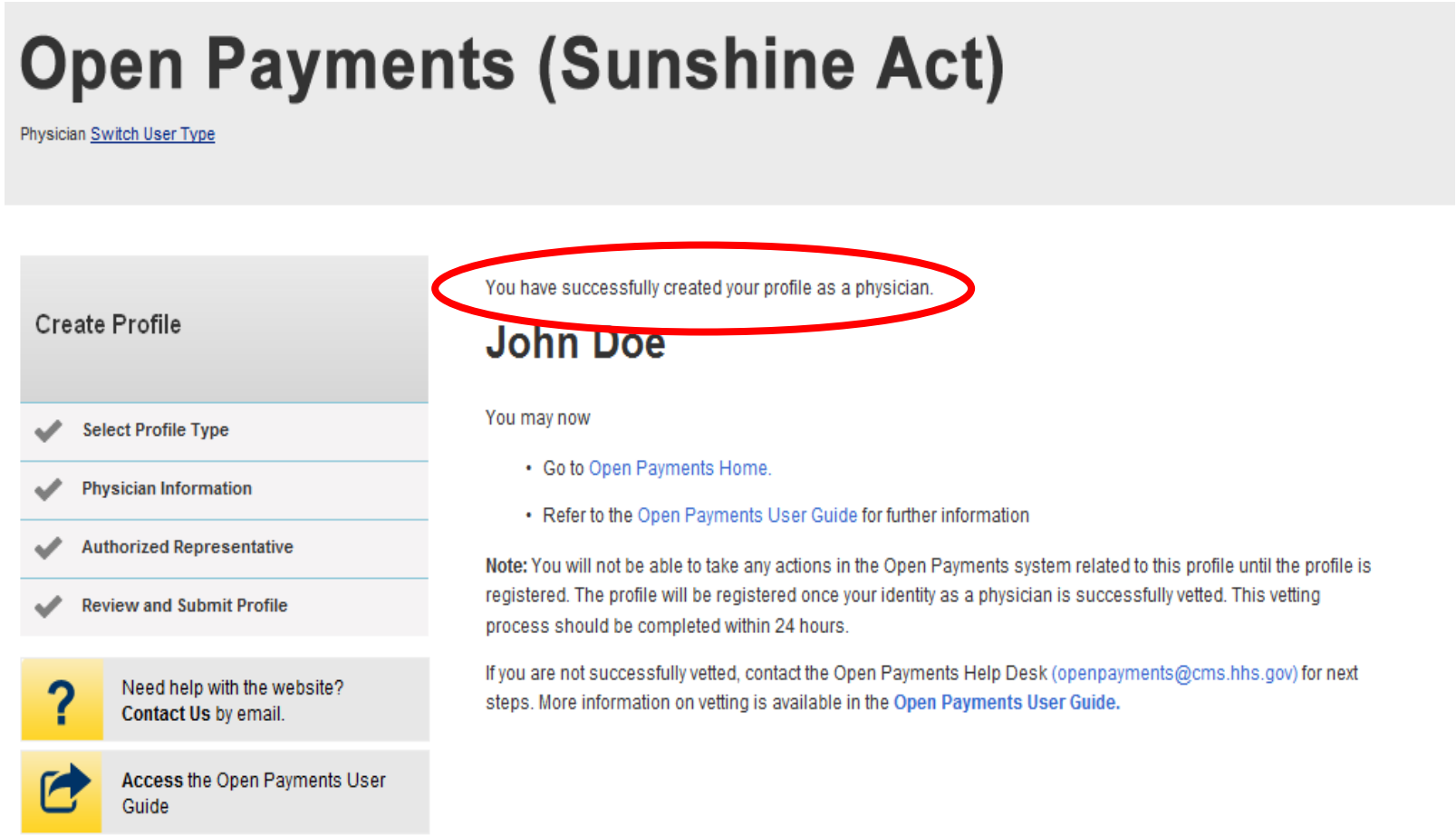
Phase 2: Open Payments System Registration Steps for Physicians

Key steps in the process:

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select "Open Payments "
3. On the "Welcome" page, click on the "Create My Profile" button
4. On the "Create Profile" page, scroll to the bottom of the page and click on the "Continue" button to begin the registration process by entering personal practice information
5. Follow the on-screen instruction to complete your registration and designate an authorized representative (optional)
6. Select the "Submit" button on the "Review and Submit Profile" page

Use the Open Payments User Guide and the Quick Reference Guide for guidance on how to complete registration in the Open Payments system.
*****Step-by-step instructional webinar coming soon.*****

Phase 2: On-Screen Registration Confirmation



Phase 2: Teaching Hospitals—Open Payments System Registration Overview

- Teaching hospitals may register in the Open Payments system if they wish to review and dispute any information reported about the hospital by reporting entities prior to its publication
- Teaching hospitals must be selected from a prepopulated list in Open Payments
- You may nominate other individuals as authorized representatives and authorized officials
- Teaching hospitals can have up to 10 individuals associated with them in Open Payments, including five authorized officials

Phase 2: User Roles for Teaching Hospital Representative

User Role	Function
Authorized Official	• Registers the teaching hospital in the Open Payments system • Modifies the teaching hospital's profile in the Open Payments system • Nominates other users and modifies existing user roles • Approves/denies nominations made by others, including self-nominations • Reviews and disputes records associated with the teaching hospital
Authorized Representative	• Reviews and disputes records associated with the teaching hospital • Nominates other individuals for user roles with teaching hospital

Phase 2: Fields for Teaching Hospital Registration Profile

Required and Optional Fields for Teaching Hospital Profiles Table

Fields	Required	Optional
State Where Teaching Hospital is Located	X	
Teaching Hospital Name	X	
Teaching Hospital Address	X	
Taxpayer Identifier Number (TIN)/ Employer Identification Number (EIN)	X	
National Provider Identifier (NPI)	X	
Teaching Hospital Business Phone Number	X	

Phase 2: Fields for User Profile

Required and Optional Fields for Individual User Profiles Table

Fields	Required	Optional
First Name	X	
Middle Name		X
Last Name	X	
Name Suffix		X
Job Title	X	
Business Address	X	
Business Phone Number	X	
Business Email Address	X	

Phase 2: Before Beginning Teaching Hospital Registration

The person registering the teaching hospital must:

- Assume the user role for Authorized Official for that teaching hospital
- Have EIDM user ID and password on hand
- Have access to the Open Payments application through EIDM
- Have the required profile information available
- Know who to nominate for the authorized representative roles, if anyone (May have up to 10 active users for a teaching hospital, 5 five of which can be authorized officials.
- Use Internet Explorer 8 or higher
- Never use the navigation buttons on the browser toolbar. Only use the navigation buttons within the Open Payments system itself

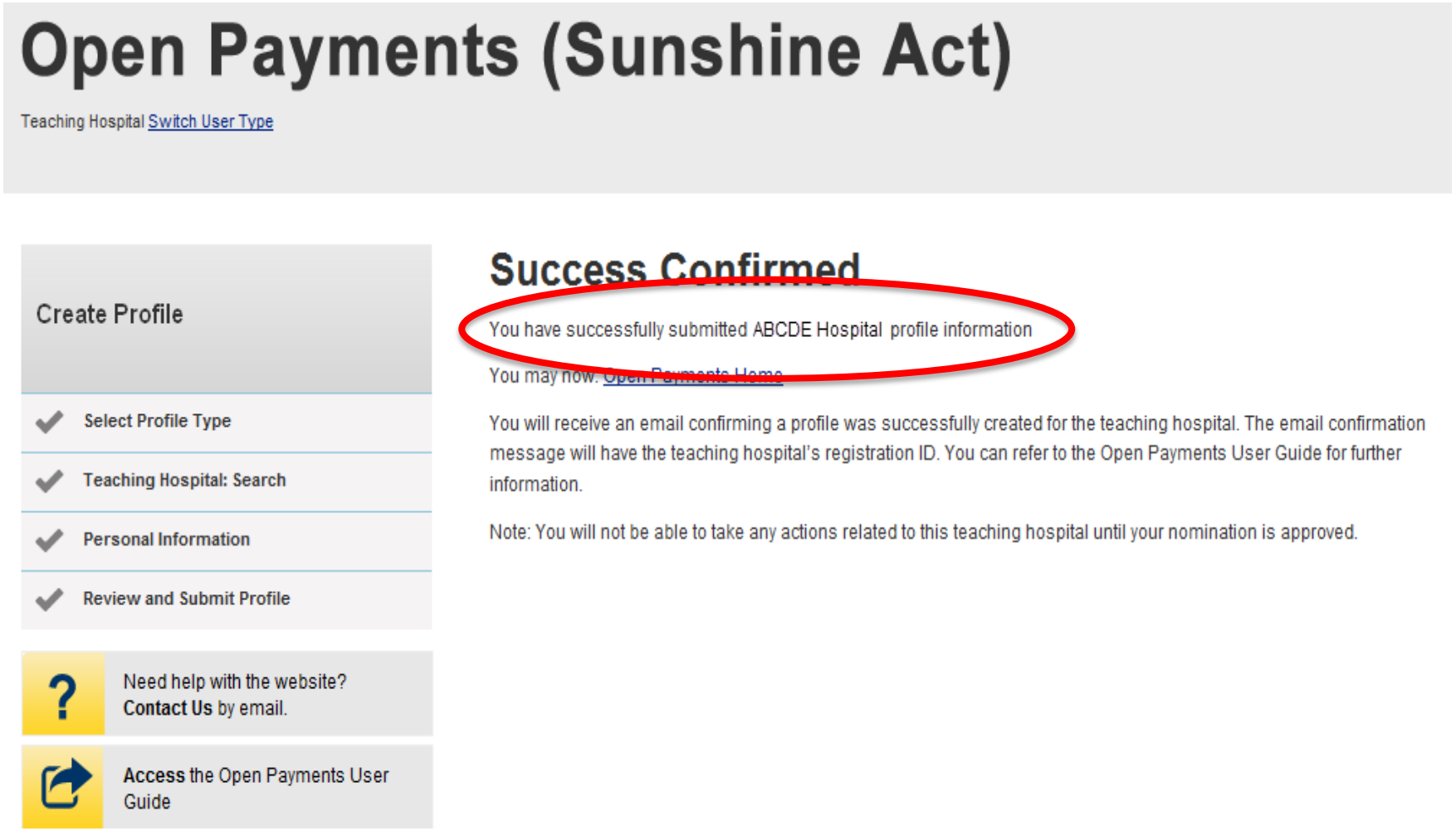
Phase 2: Teaching Hospitals—Open Payments System Registration

Key steps in the process:

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select "Open Payments "
3. On the "Welcome" page, click on the "Create My Profile" button.
4. On the "Create Profile" page, scroll to the bottom of the page and click on the "Start Profile" button.
5. On the "Select Profile Type" page, select the "Teaching Hospital" radio button and click on the "Continue" button to begin the registration process.

Use the Open Payments User Guide and the Quick Reference Guide for guidance on how to complete registration in the Open Payments system.
*****Step-by-step instructional webinar coming soon.*****

Phase 2: On-Screen Registration Confirmation



Phase 2: Accepting Nomination(s) and Creating an Individual Profile

- Occurs when an individual has been nominated by a physician or teaching hospital to fill a user role in the system
- Nominees will receive an email containing a system-generated registration ID and a nomination ID
- Use these IDs to log into the system and accept or reject the nomination

Phase 2: Before Accepting Nomination(s)

- Have the registration ID and nomination ID on hand
- Have your EIDM user ID and password on hand
- Make sure you have access to the Open Payments system
- Be sure to use Internet Explorer 8 or higher
- Only use the navigation buttons within the Open Payments system itself. Never use the navigation buttons on your browser toolbar

Phase 2: Accepting Nomination(s) Process

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select Open Payments
3. Enter Registration and Nomination ID
4. Confirm or Reject Nomination
5. [If nomination confirmed] Enter Personal Information
6. [If nomination confirmed] Review and Submit Registration

Use the Open Payments User Guide and the Quick Reference Guide on how to accept/reject a nomination.
*****Step-by-step instructional webinar coming soon.*****

Phase 2: Nomination Notification Email

Open Payments System Action Required - Physician AuthorizedRepresentative Nomination
From: do-not-reply@opp-cms.gov
Date: 2014-07-03 10:13

Encoding: English

You have been nominated in the Open Payments system as an authorized representative for the physician listed below. As a physician's authorized representative, you are able to perform certain functions in the Open Payments system on behalf of the physician. The functions you may perform are specified under your access level listed below.

- Physician: physician@yopmail.com
- Nomination ID: 184845703651
- Access level: Review Data (Read-Only),Edit Physician profile

You have 10 business days to accept or reject this nomination. If no action is taken, the nomination will be deactivated after 10 days.

To accept your nomination, you must register yourself in the Open Payments system. Prior to registering in the Open Payments system, you must first register for the CMS Enterprise Identity Management system (EIDM). To register in EIDM:

1. Access EIDM on the CMS Enterprise portal at https://portal.cms.gov.
2. Select the "New User Registration" hyperlink to create an account on EIDM and follow the on-screen instructions.

Once you are registered with EIDM, or if you already have registered with EIDM, you can register with Open Payments through the following steps:

1. Access the CMS Enterprise portal at https://portal.cms.gov.
2. Log in by entering your user name and password.
3. Click on "Open Payments."
4. Click on "Search Nominations."
5. Enter your Nomination ID and then click "Submit."
6. Continue through physician information to either accept/reject the nomination.

If you have any questions or concerns you can contact us by email at openpayments@cms.hhs.gov or by telephone at 855-326-8366. If you would like more information about the program, please visit the Open Payments website at http://go.cms.gov/openpayments or our existing Frequently Asked Questions. Do not reply to this automatically generated email.

Phase 2: Teaching Hospital Self-Nomination Overview

- Self-nominations occur when an individual nominates him or herself for a user role to a teaching hospital that has already been registered
- Individuals cannot self-nominate for roles related to physicians—only teaching hospitals
- Self-nominations must be approved by an authorized official
- The teaching hospital must already be registered in the Open Payments system
- Self-nominate for either authorized official or authorized representative role

Phase 2: Teaching Hospital Self-Nomination Process

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select Open Payments
3. Search for Teaching Hospital Using Required Fields
4. Select Teaching Hospital
5. Select Your Role and Enter Personal Information
6. Review and Submit Profile

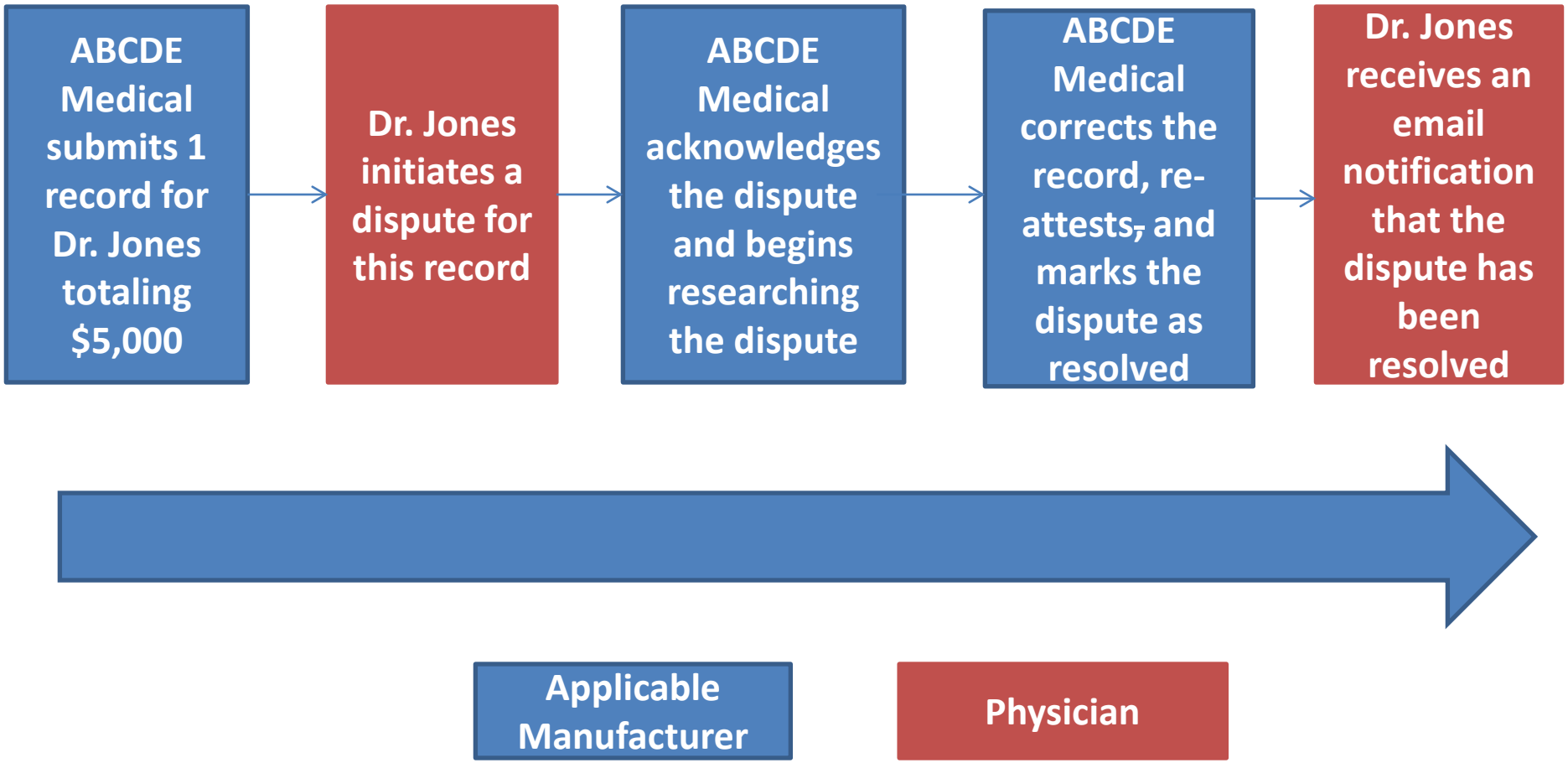
Use the Open Payments User Guide and the Quick Reference Guide for on how to accept/reject a nomination.
*****Step-by-step instructional webinar coming soon.*****

Phase 2: Before Beginning Teaching Hospital Self-Nomination

- Have EIDM user ID and password on hand
- Check that you have access to the Open Payments application through EIDM
- Have the required profile information available
- Know which role you want—authorized representative or authorized official
- Be sure to use Internet Explorer 8 or higher
- Only use the navigation buttons within the Open Payments system itself. Never use the navigation buttons on your browser toolbar

Review & Dispute Overview/Instructions

Review and Dispute Scenario



Review and Dispute Impact on Publication

- Corrections made after the initial 45-day review and dispute period will not be reflected in the Sept. 2014 public posting
- Data corrections made by reporting entities may be made at any time and the corrections will be updated in the next publication of the data
- CMS will update data from the current and previous year at least once annually, in addition to the initial data publication that followed the data submission
- In the cases where a dispute cannot be resolved, the latest, attested-to data submitted by the reporting entity will be published and identified as under dispute

Review and Dispute Overview

- Physicians and teaching hospitals can review and dispute records of payments or other transfers of value and physician ownership or investment interest submitted about them by reporting entities
- Reporting entities submitted data for the period Aug. 1- Dec. 31, 2013 (Program Year 2013)
- Physicians and teaching hospitals will need to work directly with reporting entities to resolve disputes initiated.
- CMS will not mediate the dispute resolution process between a physician and a reporting entity.
- In the Open Payments system, users may perform certain actions for each record

Reporting Entities	Physicians and Teaching Hospitals
• Acknowledge Disputes • Resolve Disputes	• Affirm Records • Initiate Disputes • Withdraw Disputes

Review and Dispute Overview (Cont.)

- The review and resolution period for program year 2013:
  - 45 days for review, dispute, and correction
  - 15 additional days (immediately following the 45 day period) for reporting entities to continue to make corrections
- Changes made to records during this period will be included in the Sept. 2014 data publication
- Records that remain under dispute at the end of this period will be identified as disputed in the Sept. 2014 data publication
- Review and resolution capabilities are open year-round
- Disputes initiated after the 45-day review and dispute period may not be included in the Sept. 2014 publication of data, but will be included in the next publication of data

Review and Dispute Overview (Cont.)

How the dispute initiation and resolution timing affects the public display of data, providing that the dispute required correction to the data to be resolved.

- If a physician or teaching hospital disputes a record within 45-day initial review, dispute, and correction period (7/14 – 8/27/2014), and if the dispute status of the record on 9/11/2014 is:
  - Resolved then the corrected record is published as non-disputed on September 30, 2014.
  - Not resolved then the originally reported record is published as disputed in September 30, 2014.

Review and Dispute Overview (Cont.)

- Any data that is timely disputed, if not corrected by the reporting entity, will still be made public but will be identified as disputed
- **CMS will not mediate disputes between physicians/teaching hospitals and reporting entities**
- You may dispute or affirm any record that appears in your Open Payments view
- Visit the "Dispute and Resolution" page of the Open Payments website (http://go.cms.gov/openpayments) for more information

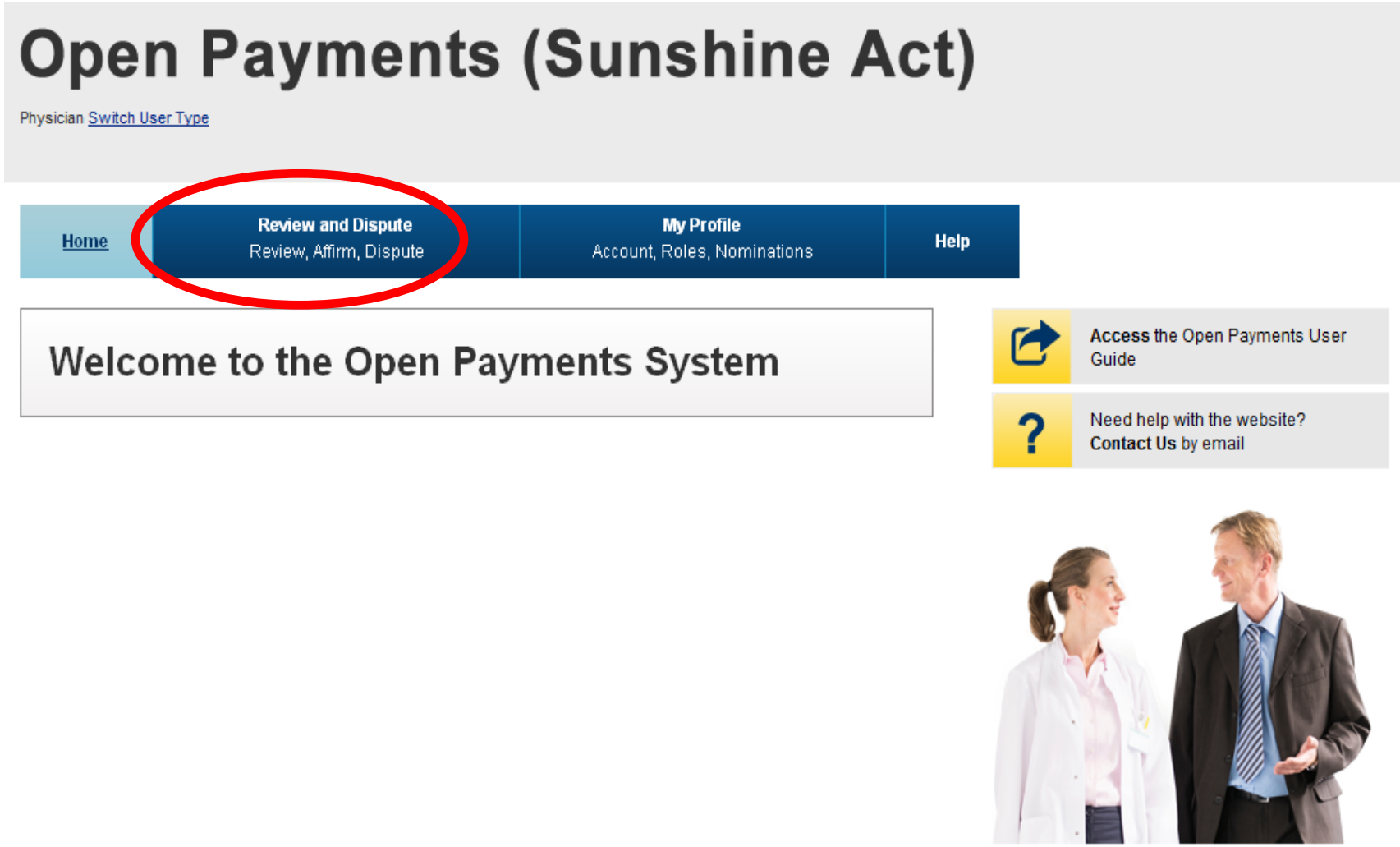
Review and Dispute Timeline for Program Year 2013

Review and Dispute Period	Additional Correction Period
July 14-Aug. 27, 2014 (45 Days)	Aug. 28-Sept. 11, 2014 (15 Days)
For: • Physicians • Teaching hospitals • Reporting entities	For: • Reporting entities
Actions: • Physicians and teaching hospitals review, affirm, and dispute information reported about them or their institutions • Reporting entities work with the disputing physician or teaching hospital to resolve the dispute	Actions: • Reporting entities make corrections • Reporting entities may submit revised records and re-attest to the revised data • Disputes initiated by physicians and teaching hospitals will not be published in the Sept. 2014 publication

Publication Dates

- Data Publication:
  - Initial publication year (Aug. 1-Dec. 31, 2013): **published by Sept. 30, 2014**
  - Ongoing publication years (Jan. 1-Dec. 31): **published by June 30 of each subsequent year**
- Data refresh publications will occur annually after the initial publication
- Corrections made to data outside of the Review and Dispute period will appear in the next publishing of the data, either a refresh or with the next year's publication

Physician Landing Page



Teaching Hospital Landing Page

Open Payments (Sunshine Act)

Teaching Hospital Switch User Type

Home	**Review and Dispute** Review, Affirm, Dispute	**Manage Teaching Hospitals** Register, Edit, Nominate Roles	**My Profile** Account, Roles, Nominations	Help

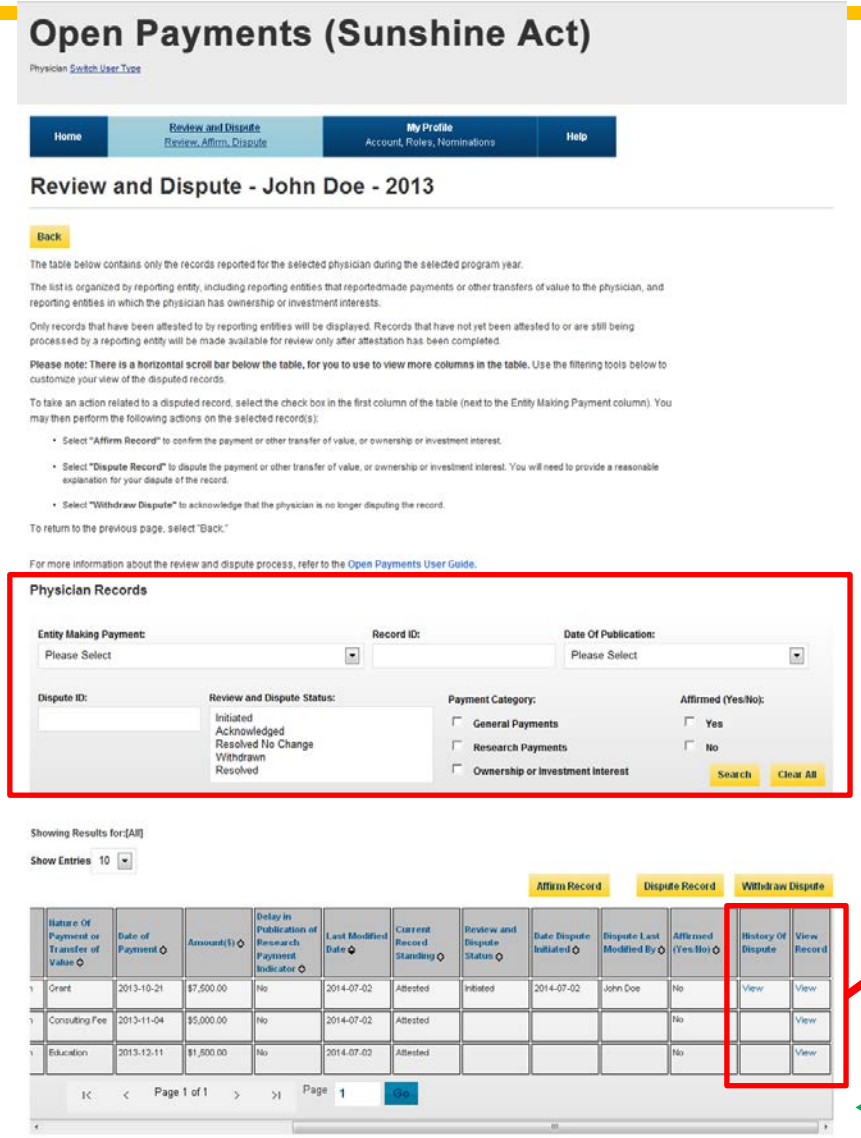
Welcome to the Open Payments System

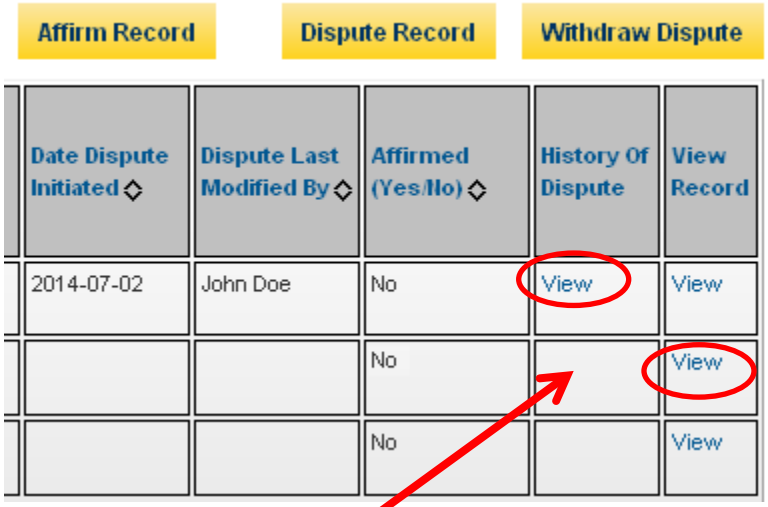
You can manage your user profile and perform user role functions associated with your profile.

Access the Open Payments User Guide

Need help with the website?
Contact Us by email

Review and Dispute Landing Page





View Record Drilldown Page

Home | Review and Dispute: Review, Affirm, Dispute | My Profile: Account, Roles, Nominations | My Profile: Account, Roles, Notifications | Help

Record ID: 10054

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Program Year: 2013
Entity: ABCDE Medical
Payment Category: General Payments
Consolidated Reporting: No

Last Modified Date: 2014-06-16
Last Modified By:
Submission Date: 2014-06-11
Submitted By: John Doe
Record Status: Attested
Override Status:
Associated Disputes and Statuses: 947 Withdrawn, 967 Acknowledged, 1045 Dismissed

Recipient Demographic Information

Covered Recipient Type: Physician
Physician First Name: John
Physician Middle Name:
Physician Last Name: Doe
Physician Name Suffix:
Recipient Business Street Address Line 1: 7500 Security Blvd
Recipient Business Street Address Line 2:
Recipient City: Baltimore
Recipient State: Maryland
Recipient Zip Code: 21244
Recipient Country: UNITED STATES
Recipient Province:
Recipient Postal Code:
Recipient Email Address:
Physician Primary Type: Medical Doctor
Physician NPI: 1518254366

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Physician Primary Type: Medical Doctor
Physician NPI: 1518254366
Physician Specialty: 1234567890
Physician License State: VIRGINIA
Physician License Number: VA001
Physician License State:
Physician License Number:
Physician License State:
Physician License Number:
Physician License State:
Physician License Number:
Physician License State:
Physician License Number:

Associated Drug, Device, Biological, or Medical Supply Information

Product Indicator: Combination
Name of Associated Drug or Biological: 1. Prod_22
National Drug Code of Associated Covered Drug or Biological:
Name of Associated Covered Device or Medical Supply: 1. Prod_22, 2. Prod_ 4, 3. Prod_20, 4. Prod_11, 5. Prod_4

Transfer of Value (Payment) Information

Total Amount of Payment: 5000
Date of Payment: 20131104
Number of Payments Included in Total Amount: 1
Form of Payment or Transfer of Value: Cash or cash equivalent
Nature of Payment or Transfer of Value: Consulting Fee

General Record Information

Physician Ownership Indicator: No
Third Party Payment Recipient Indicator: Individual
Name of Third Party Entity Receiving Payment or Transfer of Value:
Charity Indicator: No
Third Party Equals Covered Recipient Indicator: No
Delay in Publication of Research Payment Indicator:
Contextual Information:

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Review and Affirm Overview

- Physicians and teaching hospitals may review and affirm records associated with them
- Affirmation of records means that the physician or teaching hospital confirms that the information captured in the record is correct
- Affirming records is optional
- Records not affirmed by the physician or teaching hospital will still be published on the public-facing website

Review and Affirm Overview Process

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select Open Payments
3. Select “Review and Dispute” Tab
4. Select the Teaching Hospital or Physician and Program Year
5. View Records and Select Records to Affirm
6. Review Records Marked for Affirmation and select “Affirm Records”

Use the Open Payments User Guide and the Quick Reference Guide for on how to accept/reject a nomination.
*****Step-by-step instructional webinar coming soon.*****

Reminders for Reviewing and Affirming Records

- Make sure you have:
  - Registered in EIDM
  - Successfully registered in the Open Payments system
- Physicians or physician authorized representatives may affirm records
- Physician authorized representatives must hold the “Dispute Records” access level to affirm, review, and dispute records
- Authorized officials and authorized representatives for teaching hospitals have the same access levels and all may affirm records
- Records that have been affirmed can still be disputed at any time

Initiating Disputes Overview

- Physicians and teaching hospitals will have 45 days to initiate disputes for those disputes to be included in Sept. 2014 data publication
- Once a dispute is initiated, the reporting entity will receive an email notification
- The reporting entity may acknowledge the dispute in the Open Payments system
- The physician or teaching hospital will receive an email notification if the dispute has been acknowledged by the reporting entity
- The dispute status can be viewed in real-time on the Review and Dispute screen in the Open Payments system

Review and Dispute Record Statuses

- Initiated – The dispute has been initiated by the physician or teaching hospital
- Acknowledged – The dispute has been acknowledged by the reporting entity
- Resolved No Change – The reporting entity and physician or teaching hospital have resolved the dispute in accordance with the Final Rule and no changes were made to the disputed record
- Resolved – The dispute has been resolved by the reporting entity with updates made to the record
- Withdrawn – The dispute has been withdrawn by the physician or teaching hospital

Review and Dispute Record Process

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select Open Payments
3. Select “Review and Dispute” Tab
4. Select Physician or Teaching Hospital and Program Year
5. View Records and Select Records to Dispute
6. Review Records Marked for Dispute, Enter Dispute Reason and Select “Send Dispute”

Use the Open Payments User Guide and the Quick Reference Guide for on how to accept/reject a nomination.
*****Step-by-step instructional webinar coming soon.*****

Resolving Dispute Overview

Reporting entities can resolve disputes in one of two ways:

1. The dispute can be resolved with no changes made to the disputed record
2. The dispute can be resolved with updates made to the disputed record

Resolving Dispute Overview (Cont.)

- Physicians and teaching hospitals receive email notifications if a record they disputed is modified by the reporting entity or if the reporting entity identifies the dispute as resolved without having changed the record
- If the physician or teaching hospital believes that a dispute with a status of “Resolved” has not been sufficiently resolved, they may initiate another dispute on the same record

Resolving Dispute Overview (Cont.)

- **CMS will not mediate disputes between physicians/teaching hospitals and reporting entities**
- Reporting entities, physicians, and teaching hospitals should work outside of the Open Payments system to resolve disputes
- If a dispute is resolved by re-assigning a record to another physician or teaching hospital, the record will no longer appear in your view.

Withdrawing Dispute Overview

- Physicians and teaching hospitals can withdraw disputes
- A dispute can be withdrawn after it has been initiated or acknowledged
- The reporting entity will receive an email notification when a dispute has been withdrawn

Withdrawing Dispute Process

1. Log into CMS Enterprise Portal (https://portal.cms.gov)
2. Select Open Payments
3. Select “Review and Dispute” Tab
4. Select Physician or Teaching Hospital and Program Year
5. View Records and Select Records to Withdraw
6. Review Records Marked for Withdrawal, and Select “Withdraw Disputes”

Use the Open Payments User Guide and the Quick Reference Guide for on how to accept/reject a nomination.
*****Step-by-step instructional webinar coming soon.*****

Reminders for Withdrawing Disputes

- Make sure you have:
  - Registered in EIDM
  - Successfully registered in the Open Payments system
- Physician authorized representatives must hold the "Dispute Records" access level to withdraw disputes
- Authorized officials and authorized representatives for teaching hospitals do not need additional access to withdraw disputes

Resources

User Guide

- The Open Payments User Guide has been extensively updated to provide industry, physicians, and teaching hospitals with a comprehensive understanding of the Open Payments system and requirements.
- New chapters include: physician and teaching hospital registration in the Open Payments system, and review and dispute functionality in the Open Payments system. It can be downloaded on the Open Payments Fact Sheets and User Guides web page.

http://go.cms.gov/openpayments

Quick Reference Guide

- The Quick Reference Guides are one page documents that provide basic instructional guidance.
- Quick Reference Guide topics include:
  - For Physicians: How to Register in the Open Payments system
  - For a Physician's Authorized Representative: How to accept or reject a nomination as an authorized representative for a physician
  - For Teaching Hospitals: How to Register in the Open Payments system
  - For a Teaching Hospital's Authorized Representative: How to accept or reject a nomination as an authorized representative for a teaching hospital
  - For Physicians and Teaching Hospital Representatives: How to review a record and initiate a dispute, if applicable
- The Quick Reference Guides can be downloaded on the Physician, Teaching Hospital and Dispute and Resolution web pages.

http://go.cms.gov/openpayments

Step-by-Step Instructional Webinars

- Two step-by-step instructional webinars will be released for physicians and teaching hospitals.
  - How to register in the Open Payments system
  - How to review and dispute records in the Open Payments system
- The webinars can be downloaded on the Physician, Teaching Hospital, Registration and Dispute and Resolution web pages.
- Availability of these webinars will be announced using the Open Payments listserv.

http://go.cms.gov/openpayments

Frequently Asked Questions

FAQ

- Question: What if I dispute something and the manufacturer doesn't fix it? Will the data still be made public?

- Answer: Yes, if a dispute is lodged, but not resolved by the manufacturer, it will still be made public in the Sept 30th release; however, it will be marked as disputed.

FAQ

- Question: Can I update my own data to fix a dispute, or does the manufacturer have to do that?

- Answer: No, the physician or teaching hospital cannot update the actual payment record data, as that is submitted and legally attested to by the manufacturer. The covered recipient can, however, dispute and provide comments regarding the dispute which are sent to the manufacturer to aid in its resolution. All disputes, not resolved are made public but marked as disputed.

FAQ

- Question: Can I continue to dispute data after the 45-day window closes? If so, will this get into the September release?

- Answer: Yes, the covered recipient may dispute data at any time. However, any disputes lodged after the 45-day window will not be part of the September release. They, and any subsequent corrections to resolve the disputes would be reflected in the next annual publication of the data, anticipate in early 2015.

FAQ

- Answer: Can I delegate the disputing actions to my office manager?

- Question: Yes, you may nominate a delegate (authorized representative) to act on your behalf to lodge disputes. You must, however register in the Open Payments system first and nominate them, or accept their own self nomination.

FAQ

- Question: Will disputed data be made public?

- Answer: Yes, data which is still in a disputed status will be made public on the publication date, but marked as disputed.

Questions

- For more information contact the Help Desk at openpayments@cms.hhs.gov or visit us at http://go.cms.gov/openpayments
- Visit the FAQ web page on the Open Payments website.

Thank you!

Question & Answer Session

Evaluate Your Experience

- Please help us continue to improve the MLN Connects™ National Provider Call Program by providing your feedback about today's call.

- To complete the evaluation, visit http://npc.blhtech.com/ and select the title for today's call.

Thank You

- For more information about the MLN Connects™ National Provider Call Program, please visit http://cms.gov/Outreach-and-Education/Outreach/NPC/index.html

- For more information about the Medicare Learning Network® (MLN), please visit http://cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html