

Getting Started with PQRS Reporting: Implications for the Value-based Payment Modifier and the PQRS Payment Adjustment

National Provider Call

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Medicare Learning Network

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Overview of Presentation

- PV-PQRS Registration System
- IACS Introduction
- Who needs to register and who does not?
- Which IACS role do you need?
- How do you get an IACS role?
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PV-PQRS Registration System

- The Physician Value-Physician Quality Reporting System (PV-PQRS) Registration System is a new application to serve the Physician Value Modifier and PQRS programs.
- The PV-PQRS Registration System will be open from July 15, 2013 to October 15, 2013 and will allow the following:
 - Group practices
 - (1) Select/change their PQRS group reporting mechanism for 2013.
 - (2) If the group practice has 100 or more eligible professionals, elect quality-tiering to calculate the Value-Based Payment Modifier in 2015.
 - Individual eligible professionals (EPs) - Select the CMS-calculated administrative claims reporting mechanism in 2013 in order to avoid the PQRS negative payment adjustment in 2015.
- An Individuals Authorized Access to the CMS Computer Services (IACS) account is required to access the PV-PQRS Registration System.

IACS Introduction

- Users are limited to 1 account per person.
 - An existing IACS account cannot be transferred to another individual.
 - An account can be associated with multiple group practices (Taxpayer Identification Number (TIN)) or individual EPs (TIN/National Provider Identifier (NPI)).
- If you have an existing IACS account:
 - Ensure your account is still active → Contact the QualityNet Help Desk.
 - Must add a PV-PQRS Registration System role to your account (refer to slides 26 - 27).
- Beginning June 3, 2013, you can sign up for a new IACS account or modify an existing IACS account at <https://applications.cms.hhs.gov/>.

Which Group Practices and Individual EPs Have to Register in the PV-PQRS Registration System?

- Group practices with 100 or more EPs
 - Avoid the -1.0% Value Modifier payment adjustment in 2015
 - Elect quality-tiering to calculate the Value-based Payment Modifier in 2015
- Group practices with 25 or more EPs that want to select the Group Practice Reporting Option (GPRO) Web interface reporting option
- Group practices of all sizes (2+ EPs) that want to select the Registry reporting mechanism
- Group practices of all sizes (2+ EPs) that want to select the CMS-calculated administrative claims reporting mechanism as a group in 2013
 - Avoid the PQRS negative payment adjustment in 2015
 - Avoid the -1.0% Value Modifier payment adjustment in 2015, if the group practice has 100 or more EPs and the EPs participate in the PQRS as individuals
- Individual EPs who want to select the CMS-calculated administrative claims reporting mechanism in 2013 in order to avoid the PQRS negative payment adjustment in 2015

**Note: Group practices are identified in IACS by their Medicare billing TIN.
Individual EPs are identified in IACS by their Medicare billing TIN and rendering NPI.**

Which Group Practices and Individual EPs Do Not Have to Register?

- Group practices that participate in the Medicare Shared Savings Program
- Group practices that **only** provide care to Medicare beneficiaries who are enrolled in a Medicare Advantage plan
- Group practices that only practice in a Rural Health Clinic
- Group practices that only practice in a Federally Qualified Health Center
- Group practices that only practice in a Critical Access Hospital (using method II billing)
- Individual EPs who want to participate in the PQRS in 2013 using a participating registry, claims, or electronic health records (EHRs)



Pioneer ACOs and CPCI

- **Have to register in the PV-PQRS Registration System**
 - Group practices of all sizes (2+ EPs) that include EPs who participate in a Pioneer Accountable Care Organization (ACO), where all of the EPs under the billing TIN have elected to participate in the PQRS as a group
 - Group practices of all sizes (2+ EPs) that include Comprehensive Primary Care (CPC) EPs, where all of the EPs under the billing TIN have elected to participate in the PQRS as a group
 - Non-participating Pioneer ACO EPs, who are part of a TIN that also includes Pioneer ACO EPs, and want to participate in the PQRS as individuals using the CMS-calculated administrative claims reporting mechanism
 - Non-participating CPC EPs, who are part of a TIN that also includes CPC EPs, and the participating CPC EPs have elected to receive credit for the PQRS reporting via a CPC waiver
- **Do not have to register**
 - Individual EPs who are part of a TIN that participates in a Pioneer ACO or the CPCI, but are non-participating Pioneer ACO or CPC EPs, and want to participate in the PQRS as individuals using a participating registry, claims, or EHRs
 - Individual EPs who are part of a TIN that participates in a Pioneer ACO or the CPCI AND are participating Pioneer ACO or CPC EPs, and want to participate in the PQRS as individuals using a participating registry, claims, or EHRs
 - CPC Practice Site EPs who have elected to obtain credit for their PQRS reporting by meeting all CPC Clinical Quality Measure (CQM) reporting requirements successfully

**Note: Group practices are identified in IACS by their Medicare billing TIN.
Individual EPs are identified in IACS by their Medicare billing TIN and rendering NPI.**

IACS Roles for Group Practices

- Group practices are identified in IACS by their Medicare billing TIN.
- **One** authorized representative of a group practice must sign up for an IACS account with the “PV-PQRS Group Security Official” role and register the group practice as an Organization in IACS → Group’s primary Security Official.
 - The individual EPs (as identified by their rendering NPI) who bill under the TIN **do not** have to get an IACS account or register for the PQRS individually.
- There can be only one primary Group Security Official, but one or more backup Group Security Officials.
 - Primary Group Security Official role requests are approved by CMS within 24 hours after the request is submitted.
 - Backup Group Security Official role requests are approved by CMS after CMS verifies with the primary Group Security Official by phone that the requestor should have the backup Group Security Official role.

IACS Roles for Group Practices (Cont'd.)

- Primary or backup Group Security Official role allows the user to perform the following tasks on behalf of the group practice:
 1. Select/change the group practice's PQRS group reporting mechanism for 2013.
 2. If the group practice has 100 or more EPs, elect quality-tiering to calculate the Value-Based Payment Modifier in 2015.
 3. View the group practice's 2012 Quality and Resource Use Report after September 16, 2013.
 4. Approve requests for the "PV-PQRS Group Representative" role in IACS.
- "PV-PQRS Group Representative" roles can be requested after the group practice has an approved primary Group Security Official in IACS.
 - Allows the user to perform tasks 1-3 as listed above.
 - Must be approved by the primary or backup Group Security Official within 12 calendar days after the request is submitted.

IACS Roles for Individual EPs

- Individual EPs are identified in IACS by their Medicare billing TIN and rendering NPI.
- The individual EP or one authorized representative of the individual EP must sign up for an IACS account with the “PV-PQRS Individual” role and register the individual EP in IACS → Individual EP’s primary Individual approver.
- There can be only one primary Individual approver, but one or more backup Individual approvers.
 - Primary Individual approver role requests are approved by CMS within 24 hours after the request is submitted.
 - Backup Individual approver role requests are approved by CMS after CMS verifies with the primary Individual approver by phone that the requestor should have the backup Individual approver role.

IACS Roles for Individual EPs (Cont'd.)

- Primary or backup Individual approver role allows the user to perform the following tasks on behalf of the individual EP:
 1. Select the CMS-calculated administrative claims reporting mechanism in 2013 in order for the individual EP to avoid the PQRS negative payment adjustment in 2015.
 2. Approve requests for the “PV-PQRS Individual Representative” role in IACS.
- “PV-PQRS Individual Representative” roles can be requested after the individual EP has an approved primary Individual Approver in IACS.
 - Allows the user to perform task 1 as listed above.
 - Must be approved by the primary or backup Individual approver within 12 calendar days after the request is submitted.

Gather, Enter, & Verify

Three steps to sign up for an IACS account

1. Gather all of the required information you need to submit your request for an IACS account with a PV-PQRS Registration System role or to modify your existing IACS account to add a PV-PQRS Registration System role (see slides 15 - 16).
2. Enter the required information into IACS at <https://applications.cms.hhs.gov/>.
3. Verify that you entered all of the required information correctly and submit your request.

Gather: Required Information for Group Roles

- **All Group Practice Roles**
 - *User Information:* First Name, Last Name, Social Security Number, Date of Birth, and E-mail.
 - *Professional Contact Information:* Office Telephone, Company Name, and Address.
- **PV-PQRS Group Security Official (Primary)**
 - *Organization Information:* Group practice's Medicare billing TIN, Legal Business Name, Rendering NPIs for two individual physicians who bill under the TIN and their corresponding Provider Transaction Access Numbers (PTANs) (do not use the GROUP NPI), Address, and Phone Number.
- **PV-PQRS Group Security Official (Backup)**
 - Group practice's Medicare billing TIN.
- **PV-PQRS Group Representative**
 - Group practice's Medicare billing TIN.

Gather: Required Information for Individual Roles

- **All Individual EP Roles**

- *User Information:* First Name, Last Name, Social Security Number, Date of Birth, and E-mail.
- *Professional Contact Information:* Office Telephone, Company Name, and Address.

- **PV-PQRS Individual (Primary)**

- *Individual Eligible Professional Information:* First Name, Last Name, Individual EP's Medicare billing TIN, Individual EP's rendering NPI and the corresponding PTAN, Address, and Phone Number.

- **PV-PQRS Individual (Backup)**

- Individual EP's Medicare billing TIN and rendering NPI.

- **PV-PQRS Individual Representative**

- Individual EP's Medicare billing TIN and rendering NPI.

Enter: New IACS User (All Roles)

- Go to <https://applications.cms.hhs.gov> and select “Enter the CMS Applications Portal”.
- Select “Account Management” and then select “New User Registration”.
- Select “PV/PQRS Registration System”. (Figure 1)
- Accept the Terms and Conditions.


Electronic Correspondence Referral System (ECRS) Web	This application allows authorized users to fill out various online forms and electronically transmit requests for changes to existing Common Working File (CWF) Medicare Secondary Payer (MSP) information, and inquiries concerning possible MSP coverage.
esMD	Electronic Submission of Medical Documentation
Gentran	This is the description for Gentran
HETS_UI	HIPAA Eligibility Transaction System User Interface. This is a pilot with registration restricted to those organizations that are pre-approved
HPG	HIPAA Eligibility Transaction System (HETS) Provider Graphical User Interface (GUI)
Internet Server	Internet Server only access. This registration link is for those users who have no association with any other application listed on this page, but need Internet Server access. If you need access to an application that also requires Internet Server access, you must register for that application to get access.
MA/MA-PD/PDP/CC	Medicare Advantage/Medicare Advantage - Prescription Drug/Prescription Drug Plan/Cost Contracts/ Medicaid State Agency
MDR State Exchange	MDR This is the description for App-1209-1008
Medicaid and CHIP Program System [MACPro]	The purpose of the Medicaid and CHIP Program System [MACPro] is to support an efficient automated business process for submitting, reviewing, and taking final action on all Medicaid and CHIP actions.
Medicare Exclusion Database	The Medicare Exclusion Database, MED, is updated monthly with sanction and reinstatement information on excluded providers, and is made available to approved entities only
MyCGS3	Description not provided.
Novitasphere	Internet Provider Portal for Novitas Solutions, Inc.
Pal_cr-473_Testing	Testing Purpose
Physician Quality Reporting System/eRx	Physician Quality Reporting System and E-Prescribing Incentive Programs. This registration link is for users requesting access to the PQRS Portal to access their Feedback Reports and/or submit data to the Physician Quality Reporting System and E-Prescribing Incentive Programs.
PS&R/STAR	Provider Statistical & Reimbursement/System for Tracking Audit & Reimbursement
 PV/PQRS Registration System	PV-PQRS allows Group Practices to select their reporting method for the PQRS and the Value Modifier, if applicable; and Individual Eligible Professionals to select the Administrative Claims reporting method to avoid the PQRS payment adjustment.
SAP	Simple applications This application is not currently available for registration.
SI	This is the description for App-1126-1353
SI	This is the description for SI
Terremark	Terremark Application

Figure 1: Selection of the PV/PQRS Registration System

Enter: New IACS User (All Roles)

- Enter the required “User Information”. (Figure 2)
- Enter the verification code that you receive in your email. (Figure 3)

New User Registration

New User Registration | Email Verification | Contact Information | Authentication Questions | Review Request | Acknowledgement

CMS is authorized to validate your personal information using your legal name, Date of Birth and Social Security Number.

User Information

Title: First Name: * Last Name: * Suffix:

Middle Initial: Professional Credentials: Example: MD, RN, LPN, MBA, PhD, etc. (Limit 12 characters)

Social Security Number: * Valid SSN Format is XXX-XX-XXXX Date of Birth: * Valid Date of Birth format is mm/dd/yyyy

E-mail: * Confirm E-mail: *

Valid E-mail address format is user@internetprovider.domain. List of allowed domains: vi,com, gov, net, org, us, mil, biz, edu, pro

E-mail Address Verification

New User Registration | Email Verification | Contact Information | Authentication Questions | Review Request | Acknowledgement

An e-mail has been sent to you at ladams-2013_01-2355@idm.com with the 8-digit verification code. Please enter the code in the box below from the e-mail and select 'Next' within 30 minutes. Failure to do so will result in cancellation of your Registration Request.

Verification Code: * [Re-send verification code](#)

Note: Personal or corporate e-mail and spam filters may block the e-mail containing your verification code. You may request your verification code to be re-sent by selecting the re-send verification code link to the right of the Verification Code field.

You may request your verification code for a maximum of three times, after which the re-send link will be disabled.

Do not cut and paste the e-mail verification code from the e-mail onto this screen. You must enter the code exactly as displayed, without any extra spaces or characters.

If you get an error message saying the code is not valid, please try re-typing the code again exactly as it appears in your e-mail.

Figure 2: User Information

Figure 3: E-mail Address Verification

Note: You have 15 minutes to complete each screen. Otherwise, you will lose all of the information you filled in and will need to start the process again.



Enter: New IACS User (All Roles) - Role Selection

- Enter the required “Professional Contact Information”.
- Select the appropriate IACS role you want to request.
- **Note:** The PV Helpdesk Approver role is for CMS-use only.

New User Registration

New User Registration | **Email Verification** | **Contact Information** | **Authentication Questions** | **Review Request** | **Acknowledgement**

CMS is authorized to validate your personal information using your legal name, Date of Birth and Social Security Number.

User Information

Title: * * Suffix:

Example: MD, RN, LPN, MBA, PhD, etc. (Limit 12 characters)

Social Security Number: * Valid SSN Format is XXX-XX-XXXX Date of Birth: * Valid Date of Birth format is mm/dd/yyyy

* *
Valid E-mail address format is user@internetprovider.domain. List of allowed domains: vi,com, gov, net, org, us, mil, biz, edu, pro

Professional Contact Information

* Valid Phone Number Format is XXX-XXX-XXXX

*

*

* State/Territory: * * -

Access Request

User Type: **PV/PQRS Registration System**

Role: *
Select Role
User roles
PV PQRS Group Representative
PV PQRS Individual Representative
Approver roles
PV PQRS Group Security Official
PV PQRS Individual
Helpdesk roles
PV Helpdesk Approver

Figure 4: IACS Role Selection

Enter and Verify: Primary “PV-PQRS Group Security Official” Role

- Select “Create a new Organization”.
- Enter the group practice’s Medicare billing TIN, two unique rendering NPIs for individual physicians who bill under the TIN, and their corresponding PTANs.
- Enter the remaining required “Organization Information”.

Create a new Organization Associate to an Existing Organization

Organization Information

TIN: * Group Practice's 9 digit Medicare Billing TIN in XX-XXXXXXX format

Legal Business Name: * Group Practice's Legal Business Name

NPI 1: * PTAN 1: * Individual Physician's PTAN corresponding to NPI 1

NPI 2: * PTAN 2: * Individual Physician's PTAN corresponding to NPI 2

NPI 3: PTAN 3: Individual Physician's PTAN corresponding to NPI 3

Address Line 1: * Address Line 2:

City: * State: * Zip Code: * - Zip 4:

Country: United States

Phone Number: * Group Practice's 10 digit contact phone number in XXX-XXX-XXXX format

Fax Number: Group Practice's 10 digit fax number in XXX-XXX-XXXX format

Justification for Action: Request initiated on 03/29/2013 01:09:45 PM

Figure 5: Becoming a Primary Group Security Official



Enter and Verify: Backup “PV-PQRS Group Security Official” Role

- Select “Associate to an Existing Organization”. Enter the group practice’s Medicare billing TIN, and select “Search”. (Figure 6)
- Select the Organization’s name from the “Organization” dropdown menu. (Figure 7)

Create a new Organization Associate to an Existing Organization

Organization Search

TIN: * Group Practice's 9 digit Medicare Billing TIN in XX-XXXXXX format

Justification for Action: *

Figure 6: Becoming a Backup Group Security Official

Access Request

User Type: **PV/PQRS Registration System**

Role: **PV PQRS Group Security Official** *

Create a new Organization Associate to an Existing Organization

Select the Organization you want to associate with, from the list below.

Organization: * [Click 'New Search' to search for a new Organization.](#)

Justification for Action: *

Figure 7: Organization Search Result

Note: If your Organization cannot be found, then please verify that your group practice has an approved primary Group Security Official and you entered the group practice’s TIN correctly.

Enter and Verify: “PV-PQRS Group Representative” Role

- Enter the group practice’s Medicare billing TIN and select “Search”. (Figure 8)
- Select the Organization’s name from the “Organization” dropdown menu. (Figure 9)

Access Request

User Type: [PV/PQRS Registration System](#)

Role: *

Organization Search

* Group Practice's 9 digit Medicare Billing TIN in XX-XXXXXXX format

Justification for Action: *

Figure 8: Becoming a Group Representative

Access Request

User Type: [PV/PQRS Registration System](#)

Role: *

Select the Organization you want to associate with, from the list below.

* [Click 'New Search' to search for a new Organization.](#)

Justification for Action: *

Figure 9: Organization Search Result
Note: If your Organization cannot be found, then please verify that your group practice has an approved primary Group Security Official and you entered the group practice’s TIN correctly.

Enter and Verify: Primary “PV-PQRS Individual” Approver Role

- Select “Create a new Individual Eligible Professional”.
- Enter the individual EP’s Medicare billing TIN, rendering NPI, and the corresponding PTAN.
- Enter the remaining required “Individual Eligible Professional information”.

Access Request

User Type: **PV/PQRS Registration System**

Role: **PV PQRS Individual** *

Create a new Individual Eligible Professional Associate to an Existing Individual Eligible Professional

Individual Eligible Professional Information

First Name: * Middle Initial: Last Name: *

TIN: * Individual Eligible Professional's 9 digit Medicare Billing TIN in XX-XXXXXXX format

NPI: * PTAN: * Individual Eligible Professional's PTAN number corresponding to NPI

Address Line 1: * Address Line 2: *

City: * State: * Zip Code: * Zip 4: *

Country: United States

Phone Number: * Individual Eligible Professional's 10 digit contact number in XXX-XXX-XXXX format

Fax Number: * Individual Eligible Professional's 10 digit fax number in XXX-XXX-XXXX format

Justification for Action: Request initiated on 03/29/2013 01:09:45 PM *

Next **Cancel**

Figure 10: Becoming a Primary Individual Approver

Enter and Verify: Backup “PV-PQRS Individual” Approver Role

- Select “Associate to an Existing Individual Eligible Professional”, and enter the individual EP’s Medicare billing TIN and rendering NPI. Select “Search”. (Figure 11)
- Select the individual EP’s name from the “Individual Eligible Professional” dropdown menu. (Figure 12)

The screenshot shows the 'Access Request' form. The 'User Type' is 'PV/PQRS Registration System' and the 'Role' is 'PV PQRS Individual'. The radio button for 'Associate to an Existing Individual Eligible Professional' is selected and circled in red. Below this, the 'Search for an Individual Eligible Professional' section has 'TIN' and 'NPI' fields, both circled in red. A red arrow points to the 'Search' button. The 'Justification for Action' field contains the text 'Request initiated on 03/29/2013 02:02:45 PM'. At the bottom are 'Next' and 'Cancel' buttons.

Figure 11: Becoming a Backup Individual Approver

The screenshot shows the 'Access Request' form after a search. The 'Individual Eligible Professional' dropdown menu is selected and circled in red. A 'New Search' button is visible. The 'Justification for Action' field contains the text 'Request initiated on 04/01/2013 12:39:39 PM', which is also circled in red. At the bottom are 'Next' and 'Cancel' buttons, with a red arrow pointing to the 'Next' button.

Figure 12: Individual EP Search Result

Note: If the individual EP cannot be found, then please verify that there is an approved primary PV-PQRS Individual approver for the individual EP and you entered the individual EP’s TIN and NPI correctly.

Enter and Verify: “PV-PQRS Individual Representative” Role

- Enter the individual EP’s Medicare billing TIN and rendering NPI. Select “Search”. (Figure 13)
- Select the individual EP’s name from the “Individual Eligible Professional” dropdown menu. (Figure 14)

Access Request

User Type: [PV/PQRS Registration System](#)

Role: *

Search for an Individual Eligible Professional

* Individual Eligible Professional's 9 digit Medicare Billing TIN in XX-XXXXXX format

* Individual Eligible Professional's 10 digit NPI number

Justification for Action:

Figure 13: Becoming an Individual Representative

Access Request

User Type: [PV/PQRS Registration System](#)

Role: *

Select the Individual Eligible Professional you want to associate with, from the list below.

* [Click 'New Search' to search for a new Individual Eligible Professional.](#)

Justification for Action:

Figure 14: Individual EP Search Result

Note: If the individual EP cannot be found, then please verify that there is an approved primary PV-PQRS Individual approver for the individual EP and you enter the individual EP’s TIN and NPI correctly.



Enter: Existing IACS User

- If you have an active IACS User ID and password, then you will need to add a PV-PQRS Registration Role to your existing account profile.
- Go to <https://applications.cms.hhs.gov> and select “Enter the CMS Applications Portal”.
- Select “Account Management” and then select “My Profile”. Accept the Terms and Conditions. Log into with your IACS User ID and password. Select “Modify Account Profile”.
- Select “Add Application” from the “Select Action” dropdown menu. (Figure 15)

Modify Account Profile

Modify Account Profile | Email Verification | Review Request | Acknowledgement

User Information

User ID: JURJ814

Title: Mr. | First Name: Rajbir | Last Name: Singh | Suffix: | Professional Credentials: MD

Date of Birth: 01/01/1980 | E-mail: Rajbir.Singh@ngc.com

Professional Contact Information

Office Telephone: 410-265-4919 | Ext: | Company Name: NG | Company Telephone: | Ext: | Country: United States

Address 1: 2810 Lord Baltimore | Address 2: | City: Baltimore | State/Territory: MD | Zip Code: 21244

Access Request

Select Action: View My Access Profile | **Add Application** | View My Access Profile

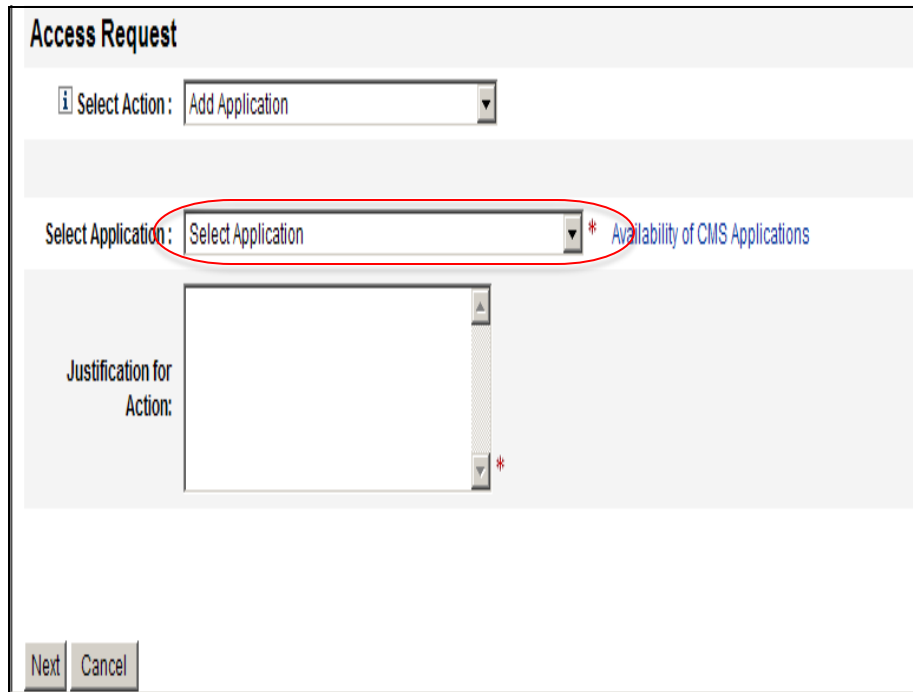
Application : role	Profile Summary	Possible Actions
PV/PQRS Registration System	Role / Organization PV PQRS Group Security Official : NG	For the role of PV PQRS Group Security Official: View/Edit Organization Disassociate from the role

Cancel

Figure 15: Modify Account Profile

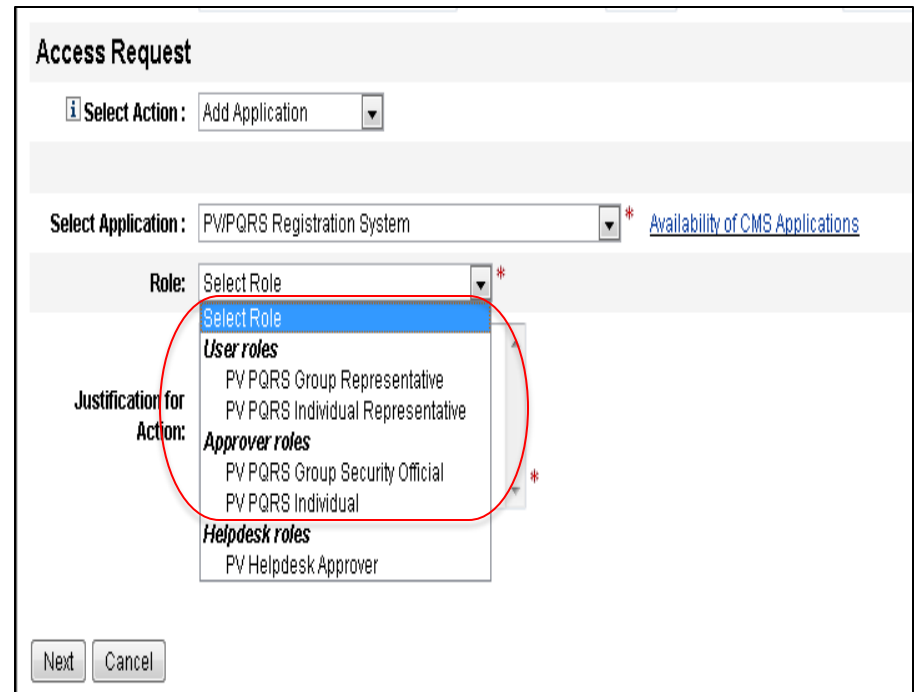
Enter & Verify: Existing IACS User (Cont'd.)

- Select “PV/PQRS Registration System” from the “Select Application” dropdown menu. (Figure 16)
- Select the role you want to add to your existing IACS account. (Figure 17)
- Based on the role selected, user will be required to enter the applicable Group Practice or Individual EP information as described in slides 20 - 25.



The screenshot shows the 'Access Request' form. At the top, there is a 'Select Action' dropdown menu set to 'Add Application'. Below it is the 'Select Application' dropdown menu, which is highlighted with a red circle. To the right of this dropdown is a link that says '* Availability of CMS Applications'. Below the dropdown is a text area labeled 'Justification for Action:'. At the bottom left, there are 'Next' and 'Cancel' buttons.

Figure 16: Add “PV/PQRS Registration System”



The screenshot shows the 'Access Request' form. The 'Select Application' dropdown menu is set to 'PVPQRS Registration System'. Below it is the 'Role' dropdown menu, which is open and highlighted with a red circle. The role selection options are: 'Select Role', 'User roles' (PV PQRS Group Representative, PV PQRS Individual Representative), 'Approver roles' (PV PQRS Group Security Official, PV PQRS Individual), and 'Helpdesk roles' (PV Helpdesk Approver). To the right of the dropdown is a link that says '* Availability of CMS Applications'. Below the dropdown is a text area labeled 'Justification for Action:'. At the bottom left, there are 'Next' and 'Cancel' buttons.

Figure 17: Role Selection

Helpful Hints

- If you are not sure if you need a new IACS account or can use your existing IACS account → Contact the QualityNet Help Desk.
- If you do not log into your IACS account for more than 60 days, then your account will be disabled.
 - You can activate your account by logging in to IACS at <https://applications.cms.hhs.gov/>. IACS will prompt you to provide your security information, answer authentications questions, and change the password.
- When signing up for an IACS account, use an email address that you monitor regularly. CMS will send emails with your User ID, temporary password, and information about password resets and recertification.

Next Steps

- Get a new IACS account or modify an existing account as early as possible after **June 3, 2013** at <https://applications.cms.hhs.gov/>.
- **July 15, 2013 – October 15, 2013:** The PV-PQRS Registration System will be open and can be accessed at <https://portal.cms.gov> using your IACS User ID and password.
- **July 31, 2013:** National Provider Call on how to register in the PV-PQRS Registration System. To register for this call, go to <http://www.eventsvc.com/blhtechnologies>.
- **September 16, 2013:** 2012 Quality and Resource Use Reports will be available for group practices with 25 or more EPs.

Technical Assistance Information

- For assistance with the IACS sign up process or role selection, please contact the QualityNet Help Desk:
 - Monday – Friday: 8:00 am – 8:00 pm EST
 - Phone: (866) 288-8912 (TTY 1-877-715-6222)
 - Fax: (888) 329-7377
 - Email: gnetsupport@sdps.org
- Quick reference guides for obtaining PV-PQRS Registration System roles in IACS:
<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Self-Nomination-Registration.html>
- PQRS Program: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html>
- Group Practice Reporting Options: [http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Group Practice Reporting Option.html](http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Group_Practice_Reporting_Option.html)
- Value-based Payment Modifier and Quality-tiering:
<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/ValueBasedPaymentModifier.html>

Evaluate Your Experience with Today's National Provider Call

- To ensure that the National Provider Call (NPC) Program continues to be responsive to your needs, we are providing an opportunity for you to evaluate your experience with today's NPC. Evaluations are anonymous and strictly voluntary.
- To complete the evaluation, visit <http://npc.blhtech.com/> and select the title for today's call from the menu.
- All registrants will also receive a reminder email within two business days of the call. Please disregard this email if you have already completed the evaluation.
- We appreciate your feedback!



Thank You

- For more information about the MLN, please visit <http://cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html>
- For more information about the National Provider Call Program, please visit <http://cms.gov/Outreach-and-Education/Outreach/NPC/index.html>