Guide for Obtaining an Existing EIDM Account with a 'Physician Quality and Value Programs' Role

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If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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I.   Introduction

This guide is for users who have an Enterprise Identity Data Management (EIDM) account. This guide provides step-by-step instructions on how users can request a role to access the 'Physician Quality and Value Programs' application in the CMS Enterprise Portal using their existing EIDM account.

> ***Note:*** If you do not have an EIDM account, then please use the guide titled "New User: Guide for Obtaining an EIDM account" located at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html.

A.   Before requesting a 'Physician Quality and Value Programs' role for your EIDM account, you will first need to determine which **one** of the following four user roles you want to request:

- **Security Official role:** The Security Official role allows the user to perform the following tasks within the PV-PQRS application on behalf of a group practice:
  - View the group practice's Physician Quality Reporting System (PQRS) Group Practice Reporting Option (GPRO) registration status from prior years
  - Obtain the group practice's Annual Quality and Resource User Report (QRUR) and PQRS Feedback Report
  - Obtain the group practice's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years
  - Submit a Value Modifier Informal Review Request on behalf of the group practice
  - Approve requests for the 'Group Representative' role in the EIDM

- **Group Representative role:** The Group Representative role allows the user to perform the following tasks within the PV-PQRS application on behalf of a group practice:
  - View the group practice's PQRS GPRO registration status from prior years
  - Obtain the group practice's Annual QRUR and PQRS Feedback Report
  - Obtain the group practice's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years
  - Submit a Value Modifier Informal Review Request on behalf of the group practice

Note: *Group practices are identified in the EIDM by their Medicare billing Taxpayer Identification Number (TIN). A group practice consists of **two or more eligible professionals** (as identified by their National Provider Identifier [NPI]) that bill under the TIN. To find out if a group practice is already registered in the EIDM and who is the group practice's Security Official, please contact the QualityNet Help Desk and provide the group practice's TIN and the name of the group practice.*

- **Individual Practitioner role:** The Individual Practitioner role allows the user to perform the following tasks within the PV-PQRS application on behalf of a solo practitioner:
  - Obtain the solo practitioner's Annual QRUR and PQRS Feedback Report
  - Obtain the solo practitioner's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years
  - Submit a Value Modifier Informal Review Request on behalf of a solo practitioner
  - Approve requests for the 'Individual Practitioner Representative' role in the EIDM

- **Individual Practitioner Representative role:** The Individual Representative role allows the user to perform the following task within the PV-PQRS application on behalf of the solo practitioner:
  - Obtain the solo practitioner's Annual QRUR and PQRS Feedback Report

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- o Obtain the solo practitioner's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years
- o Submit a Value Modifier Informal Review Request on behalf of a solo practitioner

Note: *Solo Practitioners are identified in the EIDM by their Medicare billing TIN and rendering NPI. A solo practitioner consists of **only one eligible professional** (as identified by the NPI) that bills under the TIN. To find out if a solo practitioner is already registered in the EIDM and who is the solo practitioner's Individual Practitioner, please contact the QualityNet Help Desk and provide the solo practitioner's TIN and the name of the solo practitioner.*

Information about obtaining QRURs and PQRS Feedback Reports is available at https://www.cms.gov/PhysicianFeedbackProgram.

B.   Please gather the following information before you begin the process for requesting a 'Physician Quality and Value Programs' user role:

- **Security Official:**
  - o **Organization Information:** Group practice's Medicare billing TIN, Legal Business Name, Rendering NPIs for **two different** eligible professionals who bill under the TIN and their corresponding individual Provider Transaction Access Numbers (PTANs) (*do not use the GROUP NPI or GROUP PTAN*), Address, City, State, Zip Code, and Phone Number.

- **Group Representative:**
  - o **Organization Information:** Group practice's Medicare billing TIN; or the Legal Business Name and the State; or the Legal Business Name and the Street Address.

- **Individual Practitioner:**
  - o **Professional Information:** Solo practitioner's First Name, Solo practitioner's Last Name, Legal Business Name, Solo practitioner's Medicare billing TIN, Solo practitioner's rendering NPI and the corresponding individual PTAN (*do not use the GROUP NPI or GROUP PTAN*), Address, City, State, Zip Code and Phone Number.

- **Individual Practitioner Representative:**
  - o **Professional Information:** Solo practitioner's Medicare billing TIN; or the Legal Business Name, and the State; or the Legal Business Name and the Street Address.

C.   Step-by-Step Instructions: You have **twenty-five (25) minutes** to complete each screen (unless a different time is noted on the screen). Otherwise, you will lose all of the information you entered and will need to start the process again.

II.   **Questions**

For questions about setting up an EIDM account, please contact the QualityNet Help Desk at:
- Monday – Friday: 8:00 am – 8:00 pm Eastern Time Zone
- Phone: (866) 288-8912 (TTY 1-877-715-6222)
- Email: qnetsupport@hcqis.org

For additional information on how to sign up for a new EIDM account and how to request a role to access the 'Physician Quality and Value Programs' application using the EIDM, please

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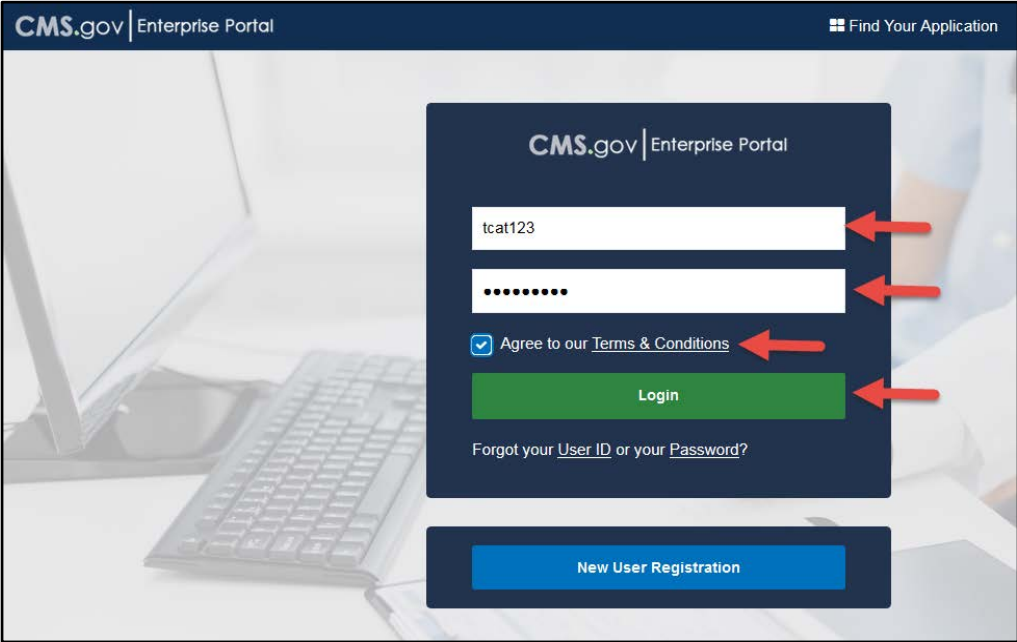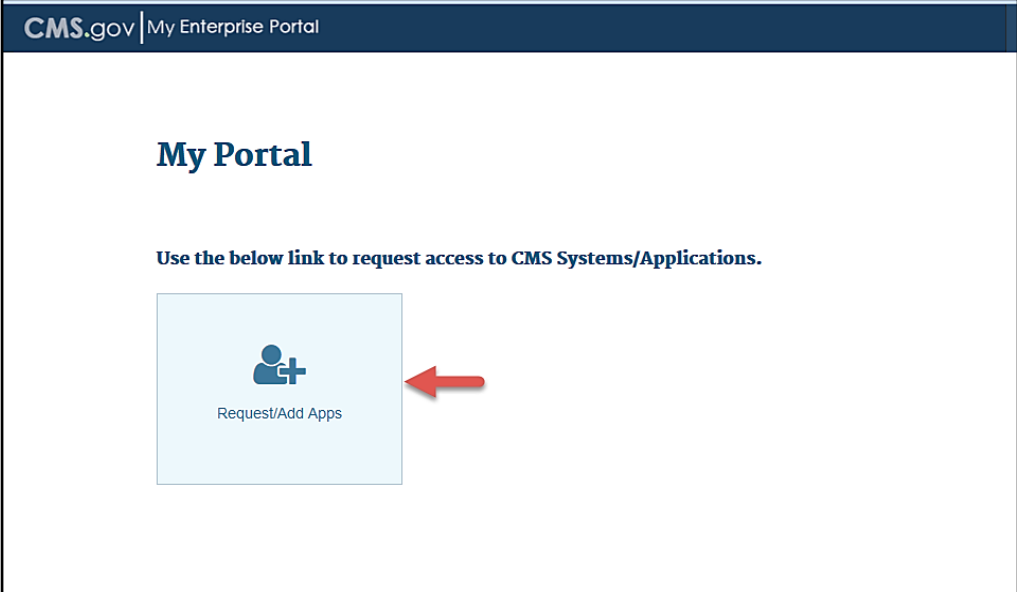
visit https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html.

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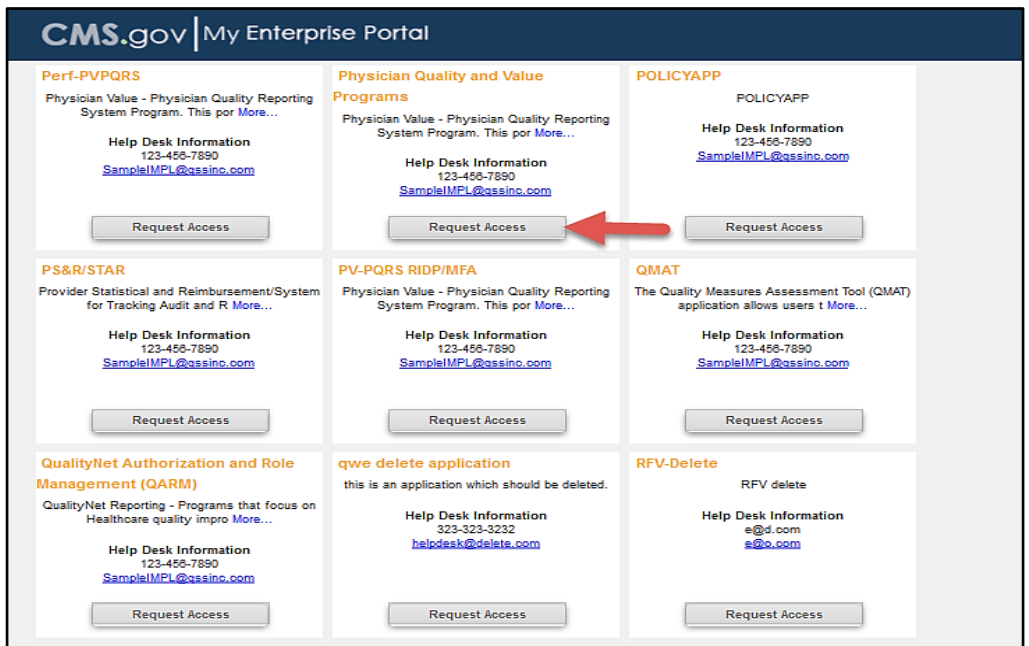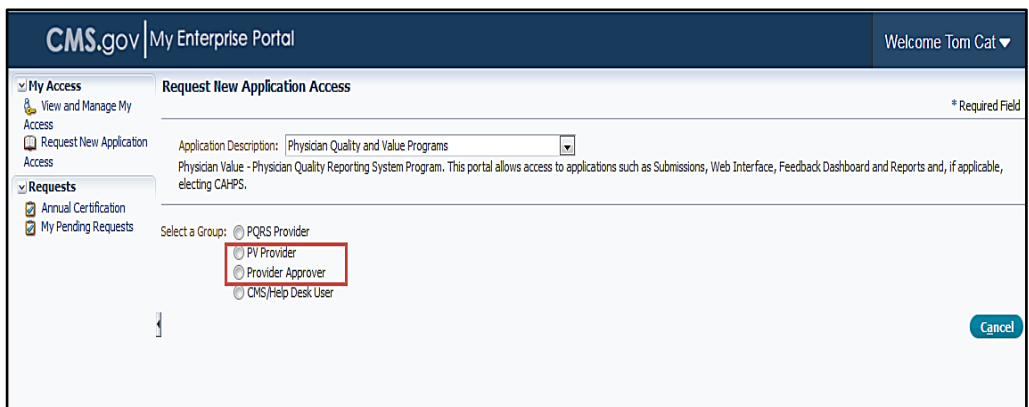
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III. Existing User Access for an EIDM Account

Please follow each step listed below unless otherwise noted.

Steps	Screenshots
1. Go to the CMS Enterprise Portal at https://portal.cms.gov. **Note:** *The CMS Enterprise Portal supports the following internet browsers:* • *Internet Explorer 11 (without compatibility mode)* • *Firefox* • *Chrome* • *Safari* *Enable JavaScript and adjust any zoom features to ensure you are not seeing the screen in too wide of a view.* 2. Enter your **EIDM UserID** and **Password.** 3. Select **Agree to our Terms & Conditions** checkbox and then select *Login*.	
4. Select *Request/Add Apps* link on the **My Portal** page to begin the process of requesting a new user role to CMS Systems/Applications.	

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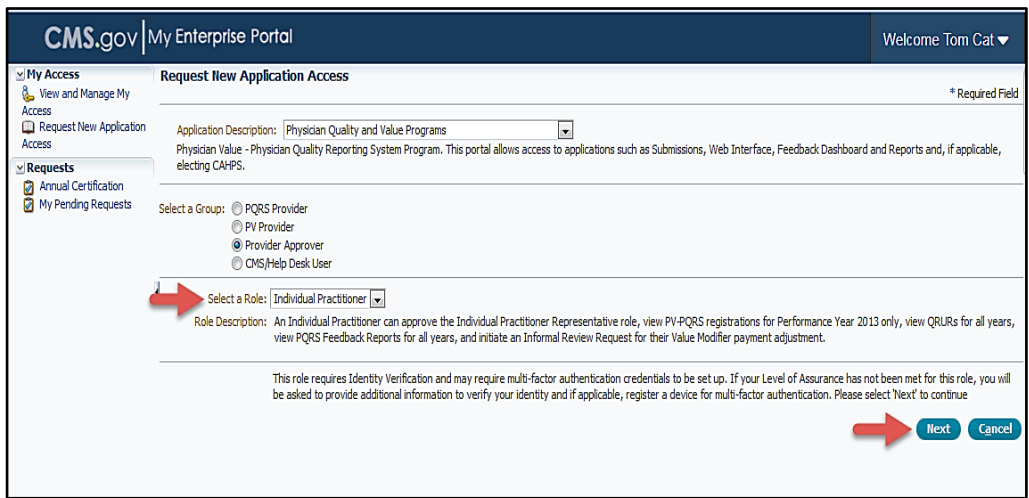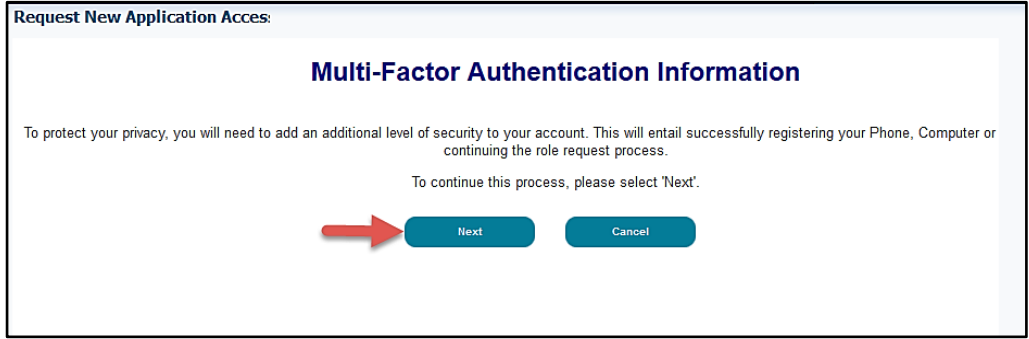| Steps	Screenshots
5. Select *Request Access* for the **Physician Quality and Value Programs** application within the **Access Catalog**. *Note: The Access Catalog list presented is in alphabetical order. Scroll down until you find the Physician Quality and Value Programs application or enter the first few letters of the application in the Access Catalog text box to narrow down the selection criteria.*	
6. (a) Under **Select a Group,** choose *Provider Approver*, if you are requesting *Security Official* or *Individual Practitioner* role OR (b) Choose *PV Provider*, if you are requesting *Group Representative* or *Individual Practitioner Representative* role**.** *Note: The Select a Role option will be visible after making a selection for the Select a Group option. The Next button will be visible after making a selection for Select a Role option.*	

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Steps	Screenshots
7. Select the appropriate role you want to request from the **Select a Role** drop-down menu and then select *Next*.	

Multi-Factor Authentication (MFA)

Please follow Steps 8 to 11 to register for MFA. MFA is an approach to security authentication which requires users to provide more than one form of verification in order to prove their identity. MFA registration is required only once when you are requesting a user role, but will be verified every time you log into the CMS Enterprise Portal. Additional information on how the MFA process works can be found at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html

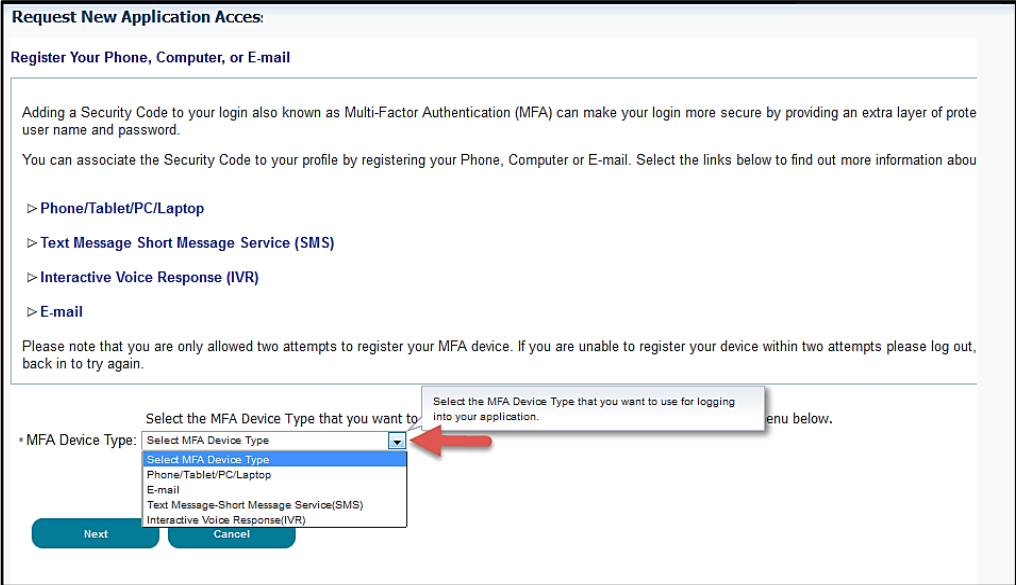| Steps	Screenshots
8. Select *Next* to begin registration for the **Multi-Factor Authentication** process.	

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Steps	Screenshots
9. Read the **Register Your Phone, Computer, or E-mail** notification and then select an option from the **MFA Device Type** drop-down menu. **Note**: *If selecting Phone/Tablet/PC/Laptop as **MFA Device Type**, you will first need to ensure you have the appropriate VIP Access software downloaded to your device. The VIP Access software can be downloaded via the Symantec Site (link is provided on your screen). Refer to the link on the screen to make selection. If the VIP Access software is not installed on your device, you will be unable to complete the Multi-Factor Authentication process.*	**Request New Application Access** **Register Your Phone, Computer, or E-mail** Adding a Security Code to your login also known as Multi-Factor Authentication (MFA) can make your login more secure by providing an extra layer of prote user name and password. You can associate the Security Code to your profile by registering your Phone, Computer or E-mail. Select the links below to find out more information abou ▷ **Phone/Tablet/PC/Laptop** ▷ **Text Message Short Message Service (SMS)** ▷ **Interactive Voice Response (IVR)** ▷ **E-mail** Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, back in to try again. Select the MFA Device Type that you want to use for logging into your application. Select the MFA Device Type that you want to ... enu below. * MFA Device Type: Select MFA Device Type ▼ Select MFA Device Type Phone/Tablet/PC/Laptop E-mail Text Message-Short Message Service(SMS) Interactive Voice Response(IVR) Next Cancel

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Steps	Screenshots
10. (a) If selecting **Phone/Tablet/PC/Laptop** as **MFA Device Type**, enter the alphanumeric code that displays under the label Credential ID on your device. Enter the **MFA Device Description** which is a nick-name that can help you identify your device**.** OR (b) If selecting **E-mail –**as **MFA Device Type**, the E-mail address on your profile will automatically be used for the E-mail option to obtain the **Security Code**. Enter the **MFA Device Description.** OR (c) If selecting **Text Message – Short Message Service (SMS)** as a **MFA Device Type**, enter the **Phone Number** that will be used to obtain the **Security Code** and the **MFA Device Description**. OR (d) If selecting **Voice Message – Interactive Voice Response (IVR)** as **MFA Device Type**, enter the **Phone Number** and **Extension** that will be used to obtain the **Security Code**. Enter the **MFA Device Description**. Select **Next** to continue.	

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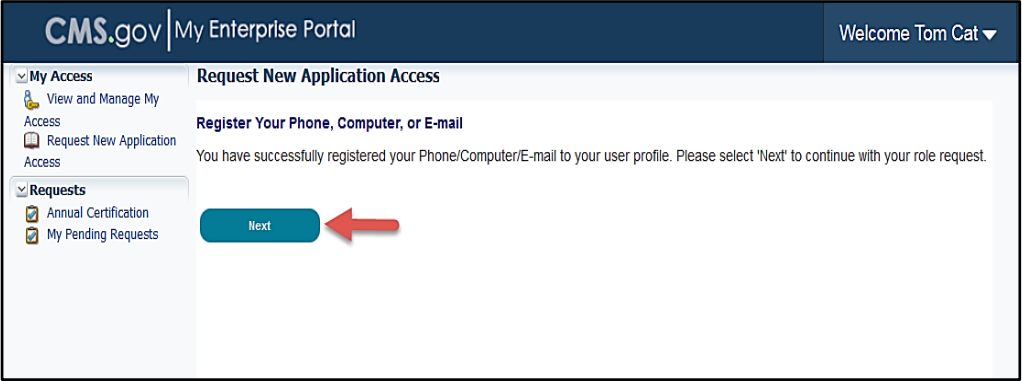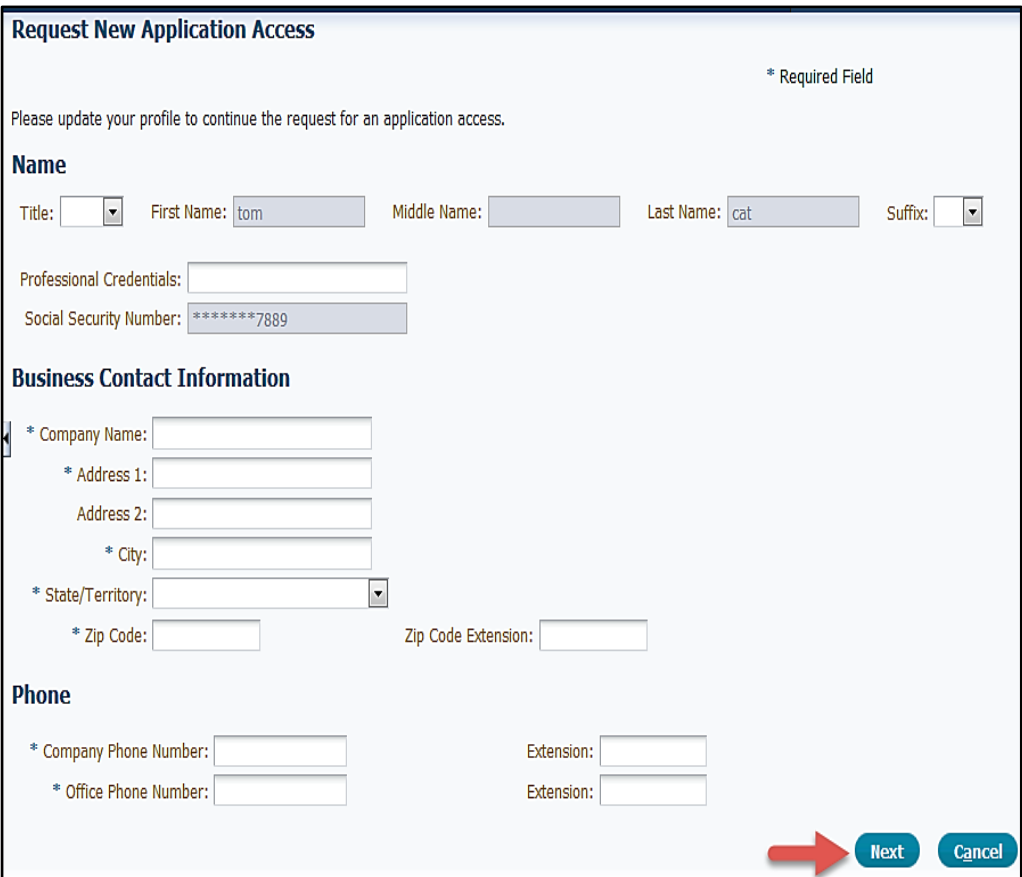
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Steps	Screenshots
11. Your registration for the **Multi-Factor Authentication** is now complete. Select **Next** to proceed to request a user role in order to access the **Physician Quality and Value Programs** application. **Note**: *You will receive an E-mail notification for successfully registering the MFA credential type.*	**CMS.gov** My Enterprise Portal — Welcome Tom Cat ▾ My Access View and Manage My Access Request New Application Access Requests Annual Certification My Pending Requests **Request New Application Access** **Register Your Phone, Computer, or E-mail** You have successfully registered your Phone/Computer/E-mail to your user profile. Please select 'Next' to continue with your role request. [Next]
12. Enter the required information under **Business Contact Information** and **Phone** sections and select **Next.** **Note:** *The information under the **Name** section will be pre-populated.* • *If you are requesting a Security Official role, go to Step 13.* • *If you are requesting a Group Representative role, go to Step 20.* • *If you are requesting an Individual Practitioner role, go to Step 23.* • *If you are requesting an Individual Practitioner Representative role, go to Step 30.*	**Request New Application Access** * Required Field Please update your profile to continue the request for an application access. **Name** Title: [ ] First Name: tom Middle Name: [ ] Last Name: cat Suffix: [ ] Professional Credentials: [ ] Social Security Number: *******7889 **Business Contact Information** * Company Name: [ ] * Address 1: [ ] Address 2: [ ] * City: [ ] * State/Territory: [ ] * Zip Code: [ ] Zip Code Extension: [ ] **Phone** * Company Phone Number: [ ] Extension: [ ] * Office Phone Number: [ ] Extension: [ ] [Next] [Cancel]

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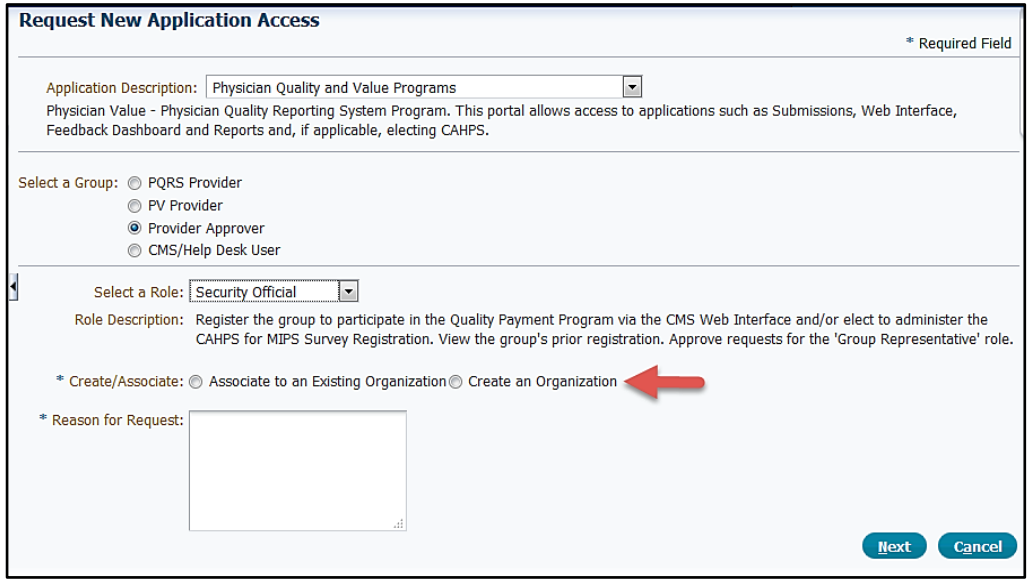| Steps	Screenshots
<td colspan="2" align="center">**a. Security Official Role** **Follow Steps 13 to 19 to request a Security Official Role**</td>	
13. (a) If you are the first person in your group practice to sign up for the Security Official role and register your group practice in the EIDM, select **Create an Organization.** Then, proceed to Step 14. OR (b) If you are signing up for a Security Official role and your group practice already exists in the EIDM, select **Associate to an Existing Organization.** Then, proceed to Step 17.	**Request New Application Access** * Required Field Application Description: Physician Quality and Value Programs Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS. Select a Group: ○ PQRS Provider ○ PV Provider ◉ Provider Approver ○ CMS/Help Desk User Select a Role: Security Official Role Description: Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the CAHPS for MIPS Survey Registration. View the group's prior registration. Approve requests for the 'Group Representative' role. * Create/Associate: ○ Associate to an Existing Organization ○ Create an Organization * Reason for Request: [Next] [Cancel]

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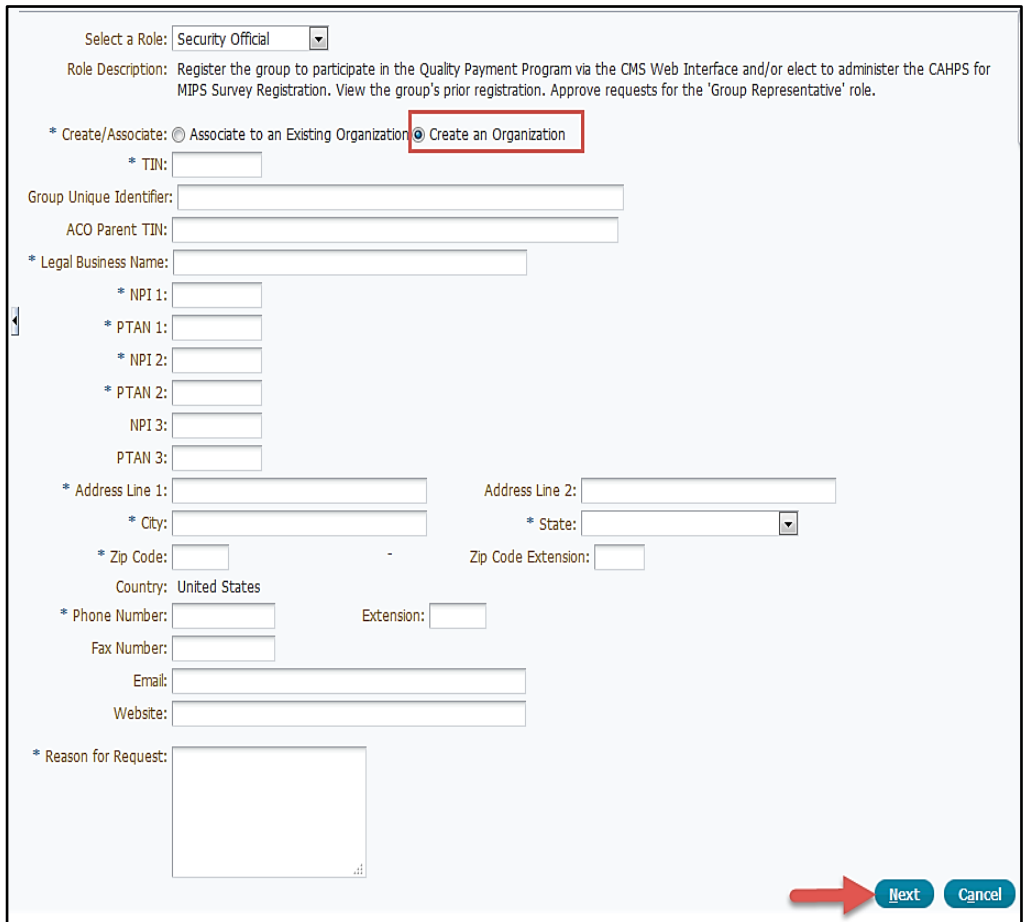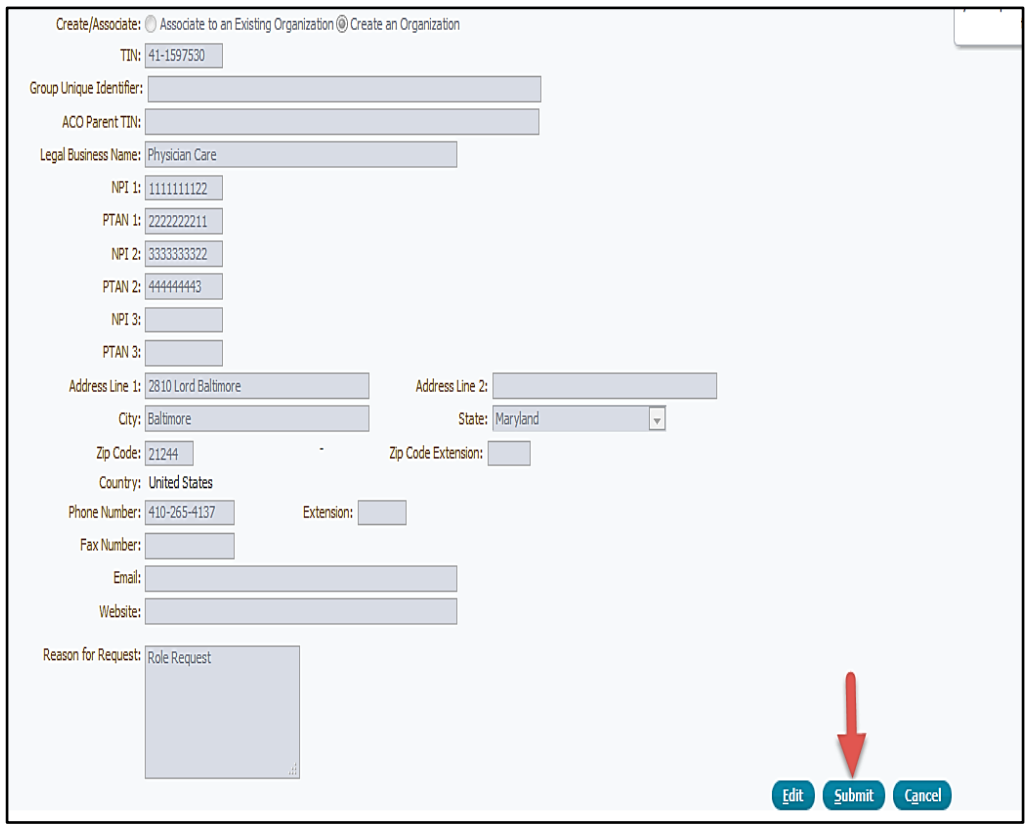| Steps	Screenshots
14. If selecting ***Create an Organization*** as the **Create/Associate** option, enter the following required information for the group practice: • Medicare Billing TIN • Legal Business Name • NPI 1 • PTAN 1 • NPI 2 • PTAN 2 • Address Line 1 • City • State • Zip Code • Phone Number • Reason for Request Select ***Next***. *Note: In this section, enter your group practice's Medicare billing **TIN**; enter **rendering NPIs** for __two different__ eligible professionals who bill under the TIN (do not use the __group__ NPI) and enter their corresponding **individual PTANs** (do not use the __group__ PTAN); and enter the remaining required information.* **Example:** Healthy Clinic with Medicare billing TIN 74-7575757 has ten eligible professionals in the group. Enter the rendering NPI and individual PTAN combinations for two of the eligible professionals: Dr. Smith and Dr. Beaver. • Dr. Smith's **rendering NPI** is 4545454545 and the corresponding **individual PTAN** is G676767676.	*Select a Role:* Security Official *Role Description:* Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the CAHPS for MIPS Survey Registration. View the group's prior registration. Approve requests for the 'Group Representative' role. * Create/Associate: ◯ Associate to an Existing Organization ⦿ Create an Organization * TIN: Group Unique Identifier: ACO Parent TIN: * Legal Business Name: * NPI 1: * PTAN 1: * NPI 2: * PTAN 2: NPI 3: PTAN 3: * Address Line 1: Address Line 2: * City: * State: * Zip Code: - Zip Code Extension: Country: United States * Phone Number: Extension: Fax Number: Email: Website: * Reason for Request: Next Cancel

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Steps	Screenshots
Note: PTANs are alphanumeric therefore, enter the alpha characters. • Dr. Beaver's **rendering NPI** is 2525252525 and the corresponding **individual PTAN** is **00**12789456. **Note:** All leading zeroes in the PTAN should be entered.	
15. Verify the information on the **Verification** screen and select **Submit.**	Create/Associate: ○ Associate to an Existing Organization ● Create an Organization TIN: 41-1597530 Group Unique Identifier: ACO Parent TIN: Legal Business Name: Physician Care NPI 1: 1111111122 PTAN 1: 2222222211 NPI 2: 3333333322 PTAN 2: 444444443 NPI 3: PTAN 3: Address Line 1: 2810 Lord Baltimore Address Line 2: City: Baltimore State: Maryland Zip Code: 21244 - Zip Code Extension: Country: United States Phone Number: 410-265-4137 Extension: Fax Number: Email: Website: Reason for Request: Role Request Edit Submit Cancel

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16. (a) You have successfully applied for the Security Official role.

(b) **If your role request is automatically approved**, proceed to Step 33 to complete the Multi-Factor Authentication before you can access the **Physician Quality and Value Programs** application using your EIDM UserID and EIDM Password in order to:

- View the group practice's PQRS GPRO registration status from prior years;
- Obtain the group practice's Annual QRUR and PQRS Feedback Report;
- Obtain the group practice's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years;
- Submit a Value Modifier Informal Review Request on behalf of the group practice; and
- Approve requests for the 'Group Representative' role in the EIDM.

A confirmation E-mail will be sent shortly after the submission confirmation message.

Note: You have three (3) attempts to enter two valid NPI/PTAN combinations for two different eligible professionals who bill under the TIN. If the information is a confirmed match, the request will be automatically approved. If you exceed these attempts,

Request New Application Access Acknowledgement

Your EIDM request has been successfully submitted.
The tracking number for your request is:
2609799 - ADD - Security Official - Organization - Physician Care (2810 Lord Baltimore, Baltimore, MD)

Please use this number in all correspondence concerning this request.
You will receive an email once your request has been processed.

OK

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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Steps	Screenshots
your request will be sent to the QualityNet Help Desk for manual approval. The QualityNet Help Desk will contact you for further assistance within two (2) business days.	
17. (a) If selecting ***Associate to an Existing Organization*** as the **Create/Associate** option, enter **one** of the following information for the group practice: i. Medicare Billing TIN OR ii. Legal Business Name and State OR iii. Legal Business Name and Street Address (b) Select ***Search***. (c) Select your group practice from the **Organization** drop-down menu. Enter ***Reason for Request*** and select ***Next***. ***Note:*** *If your group practice cannot be found, please verify that your group practice already has a user with an approved Security Official role and you entered the group practice's Medicare billing TIN correctly. If you do not know the Security Official, contact the QualityNet Help Desk.*	**Request New Application Access** * Required Field Application Description: Physician Quality and Value Programs Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS. Select a Group: ○ PQRS Provider ○ PV Provider ● Provider Approver Select a Role: Security Official Role Description: Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the CAHPS for MIPS Survey Registration. View the group's prior registration. Approve requests for the 'Group Representative' role. * Create/Associate: ● Associate to an Existing Organization ○ Create an Organization Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search. Legal Business Name: TIN: 47-4358069 Address Line 1: Address Line 2: City: State: Zip Code: Zip Code Extension: **Search** * Organization: 8069 (3 helms pick, Catonsville, HI) * Reason for Request: Role Request **Next** **Cancel**

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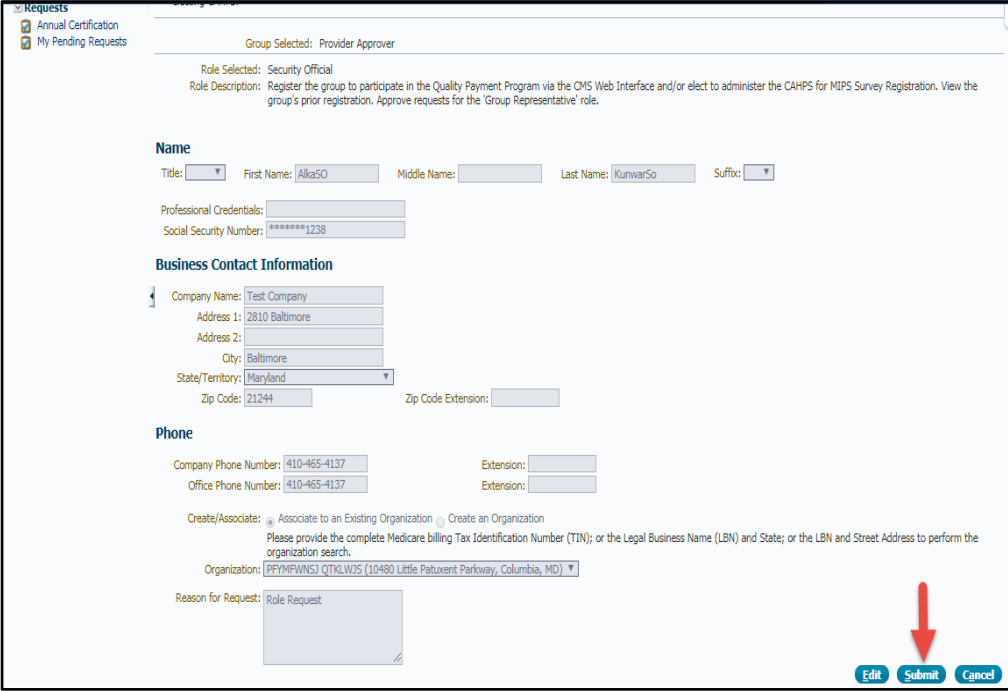| Steps	Screenshots
18. Verify the information on the **Verification** screen and select *Submit*.	
19. (a) You have successfully applied for the Security Official role. *Note: Another Security Official from your group practice must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.* (b) After your role request is approved, proceed to Step 33 to complete the Multi-Factor Authentication before you can access the **Physician Quality and Value Programs** application using your EIDM UserID and EIDM Password in order to: • View your group's PQRS GPRO registration status form prior years; • Obtain the group practice's Annual	

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Steps	Screenshots
QRUR and PQRS Feedback Report; • Obtain the group practice's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years; and • Submit a Value Modifier Informal Review Request on behalf of the group practice.	

<table>
<tr><td colspan="2" align="center">b. Group Representative Role
Follow Steps 20 to 22 to request a Group Representative Role</td></tr>
<tr>
<td>20. (a) Enter one of the following information for the group practice.

   i.   Medicare Billing TIN
          OR
   ii. Legal Business Name and State
          OR
   iii. Legal Business Name and Street Address

(b) Select Search.

(c) Select your group practice from the Organization drop-down menu. Enter Reason for Request and select Next.

Note: If your group practice cannot be found, please verify that your group practice already has a user with an approved Security Official role and you entered the group practice's Medicare billing TIN correctly. If you do not know your Security Official, contact the QualityNet Help Desk.</td>
<td></td>
</tr>
</table>

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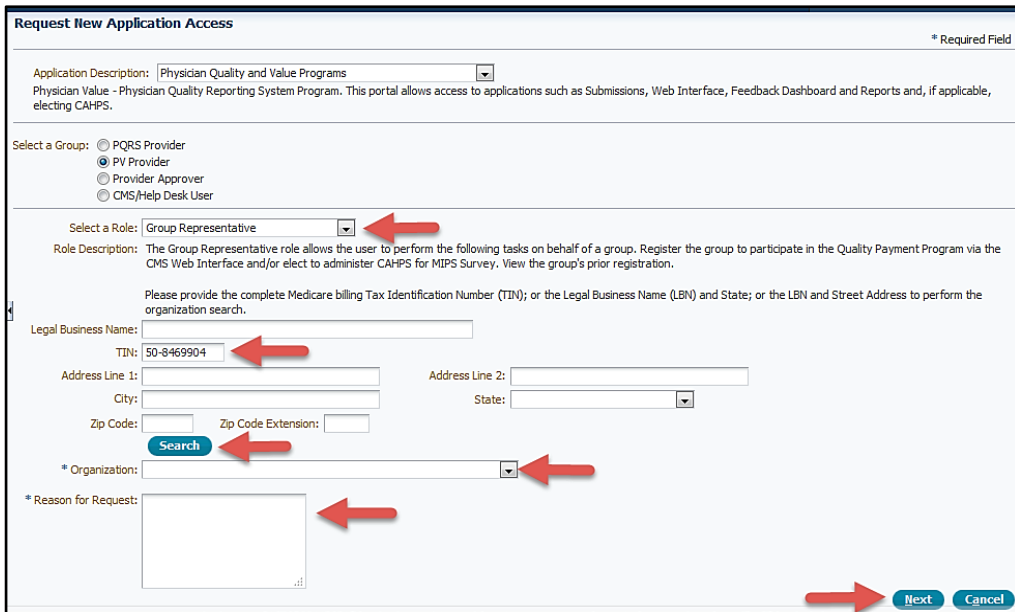
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Steps	Screenshots
21. Verify the information on the **Verification** screen and select **Submit**.	
22. (a) You have successfully applied for the Group Representative role. ***Note**: A Security Official from your group practice must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.* (b) After your role request is approved, proceed to Step 33 to complete the Multi-Factor Authentication before you can access the **Physician Quality and Value Programs** application using your EIDM UserID and EIDM Password in order to: • View the group practice's PQRS GPRO registration status from prior years; • Obtain the group practice's Annual QRUR and PQRS Feedback Report;	**Request New Application Access Acknowledgement** Your EIDM request has been successfully submitted. The tracking number for your request is: **2609978 - ADD - Group Representative - Organization - TestAutomation (2810 old baltimoe rd, Baltimore, MD)** Please use this number in all correspondence concerning this request. You will receive an email once your request has been processed. OK

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.
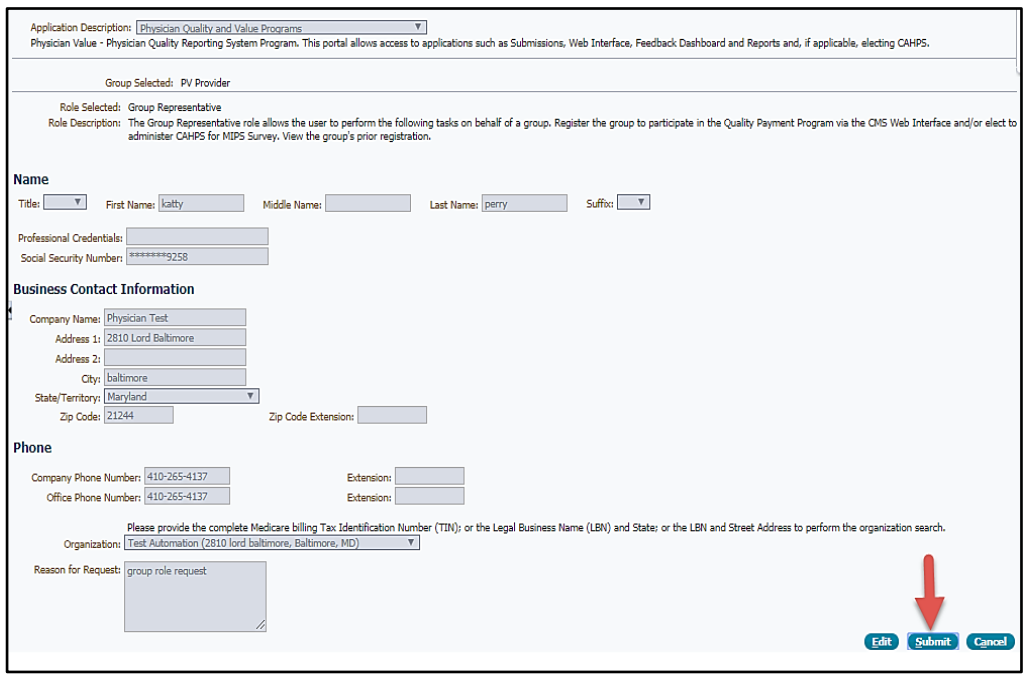
Steps	Screenshots
• Obtain the group practice's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years; and • Submit a Value Modifier Informal Review Request on behalf of the group practice.	

c. Individual Practitioner Role

Follow Steps 23 to 29 to request an Individual Practitioner Role

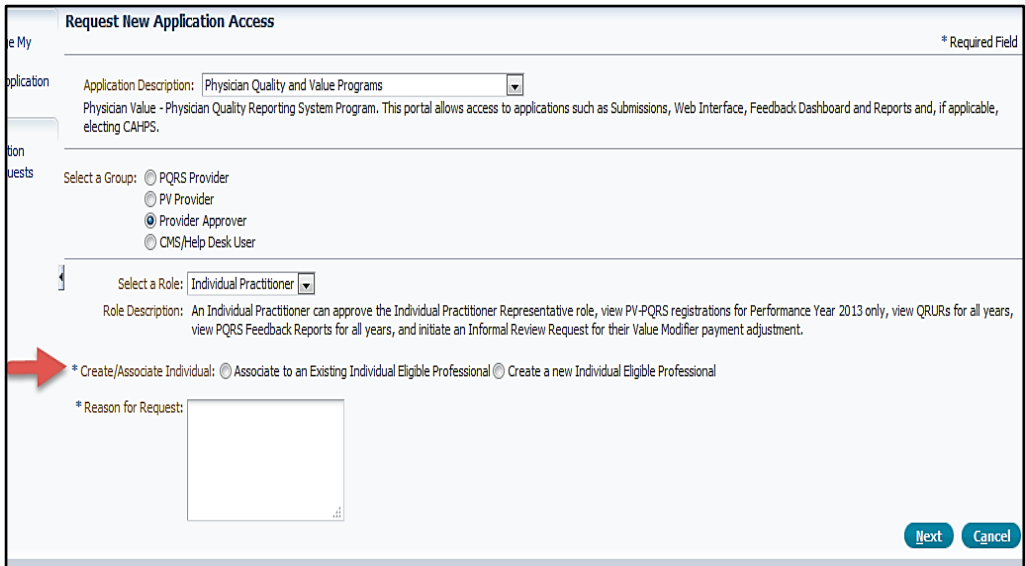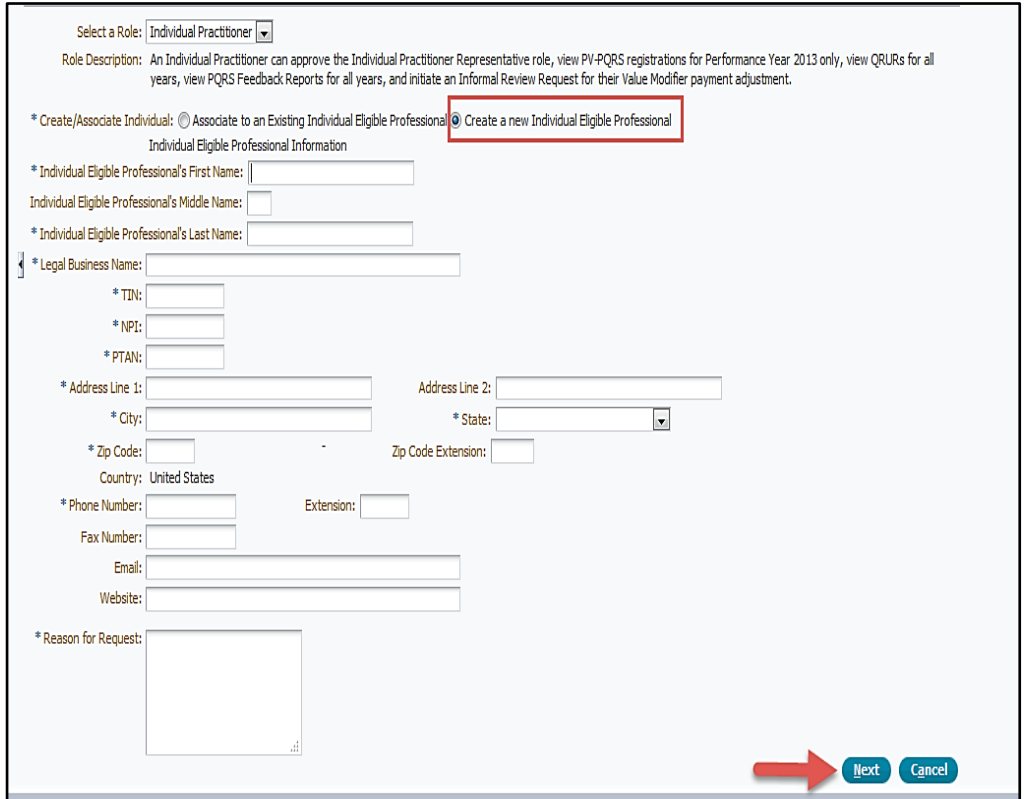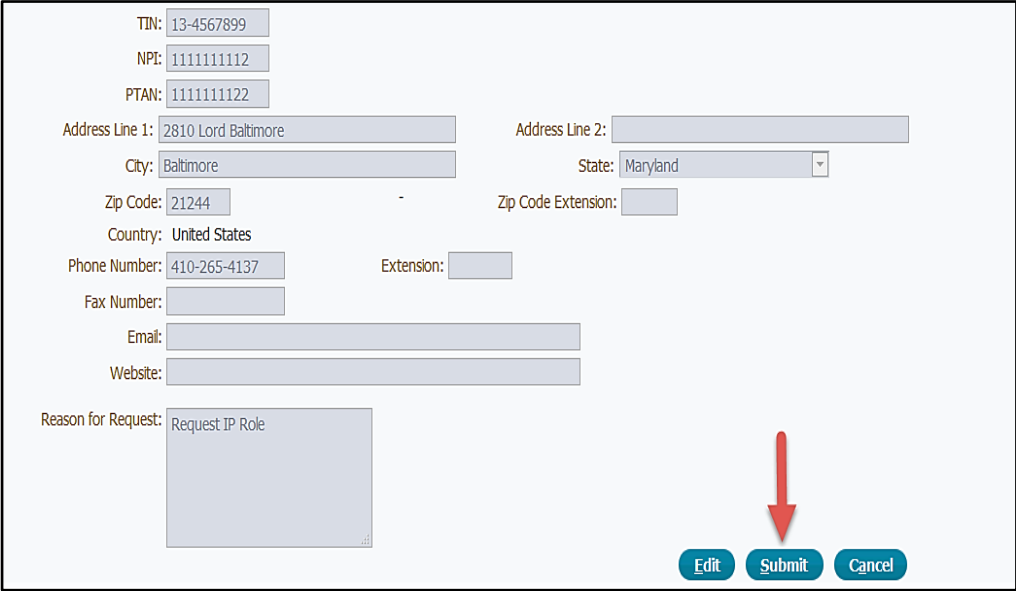| 23. (a) If you are the first person (the solo practitioner or an authorized representative of the solo Practitioner) to sign up for an Individual Practitioner role on behalf of a solo practitioner and register the solo practitioner in the EIDM, select **Create a new Individual Eligible Professional.** Then, proceed to Step 24.

OR

(b) If you are signing up for an Individual Practitioner role and the solo practitioner already exists in the EIDM, select **Associate to an Existing Individual Eligible Professional**. Then proceed to Step 27. | **Request New Application Access** * Required Field

Application Description: Physician Quality and Value Programs
Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.

Select a Group: ○ PQRS Provider
○ PV Provider
◉ Provider Approver
○ CMS/Help Desk User

Select a Role: Individual Practitioner
Role Description: An Individual Practitioner can approve the Individual Practitioner Representative role, view PV-PQRS registrations for Performance Year 2013 only, view QRURs for all years, view PQRS Feedback Reports for all years, and initiate an Informal Review Request for their Value Modifier payment adjustment.

* Create/Associate Individual: ○ Associate to an Existing Individual Eligible Professional ○ Create a new Individual Eligible Professional
* Reason for Request:

Next   Cancel |

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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Steps	Screenshots
24. If selecting **Create a new Individual Eligible Professional** as the **Create/Associate Individual** option, enter the following required information for the solo practitioner: • Individual Eligible Professional's (Solo Practitioner's) First Name • Individual Eligible Professional's (Solo Practitioner's) Last Name • Legal Business Name • Medicare Billing TIN • Rendering NPI • Individual PTAN • Address • City • State • Zip Code • Phone Number • Reason for Request Select **Next.** **Note**: In this section, enter the solo practitioner's Medicare billing **TIN,** rendering **NPI**, and the corresponding individual **PTAN** (do not use the GROUP NPI or GROUP PTAN); and enter the remaining required information. **Note:** PTANs are alphanumeric, therefore, enter the alpha characters. All leading zeroes in the PTAN should be entered.	Select a Role: Individual Practitioner Role Description: An Individual Practitioner can approve the Individual Practitioner Representative role, view PV-PQRS registrations for Performance Year 2013 only, view QRURs for all years, view PQRS Feedback Reports for all years, and initiate an Informal Review Request for their Value Modifier payment adjustment. * Create/Associate Individual: ○ Associate to an Existing Individual Eligible Professional ● Create a new Individual Eligible Professional Individual Eligible Professional Information * Individual Eligible Professional's First Name: Individual Eligible Professional's Middle Name: * Individual Eligible Professional's Last Name: * Legal Business Name: * TIN: * NPI: * PTAN: * Address Line 1: Address Line 2: * City: * State: * Zip Code: - Zip Code Extension: Country: United States * Phone Number: Extension: Fax Number: Email: Website: * Reason for Request: [Next] [Cancel]

Steps	Screenshots
25. Verify the information on the **Verification** screen and select ***Submit***.	TIN: 13-4567899 NPI: 1111111112 PTAN: 1111111122 Address Line 1: 2810 Lord Baltimore Address Line 2: City: Baltimore State: Maryland Zip Code: 21244 - Zip Code Extension: Country: United States Phone Number: 410-265-4137 Extension: Fax Number: Email: Website: Reason for Request: Request IP Role [Edit] [Submit] [Cancel]

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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26. (a) You have successfully applied for the Individual Practitioner role.

(b) **After your role request is automatically approved**, proceed to Step 33 to complete the Multi-Factor Authentication before you can access the **Physician Quality and Value Programs** application using your EIDM UserID and EIDM Password in order to:

- Obtain the solo practitioner's Annual QRUR and PQRS Feedback Report;
- Obtain the solo practitioner's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years;
- Submit a Value Modifier Informal Review Request on behalf of a solo practitioner; and
- Approve request for the 'Individual Practitioner Representative' role in the EIDM.

A confirmation E-mail will be sent shortly after the submission confirmation message.

Note: You have three (3) attempts to enter the valid NPI/PTAN combinations for eligible professionals who bill under the TIN. If the information is a confirmed match, the request will be automatically approved. If you exceed these attempts, your request will be sent to the QualityNet Help Desk for manual approval. The QualityNet Help Desk will

Request New Application Access Acknowledgement

Your EIDM request has been successfully submitted.
The tracking number for your request is:
356050 - ADD - Individual Practitioner - Organization - Tim Company (2810 Lord Baltimore, Baltimore, MD)

Please use this number in all correspondence concerning this request.
You will receive an email once your request has been processed.

OK

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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Steps	Screenshots
contact you for further assistance within two (2) business days.	

27. (a) If selecting ***Associate to an Existing Individual Eligible Professional*** as the **Create/Associate Individual,** enter one of the following information for the solo practitioner:
 	
  i.   Medicare Billing TIN
          OR
  ii. Legal Business Name and State
          OR
  iii. Legal Business Name and Street Address
 	
(b) Select ***Search.***
 	
(c) Select the solo practitioner from the **Individual Eligible Professional** drop-down menu. Enter **Reason for Request** and select **Next.**
 	
Note*: If the solo practitioner cannot be found, please verify that the solo practitioner already has a user with an approved Individual Practitioner role and you entered the solo practitioner's Medicare billing TIN correctly. If you do not know the Individual Practitioner, contact the QualityNet Help Desk.*	

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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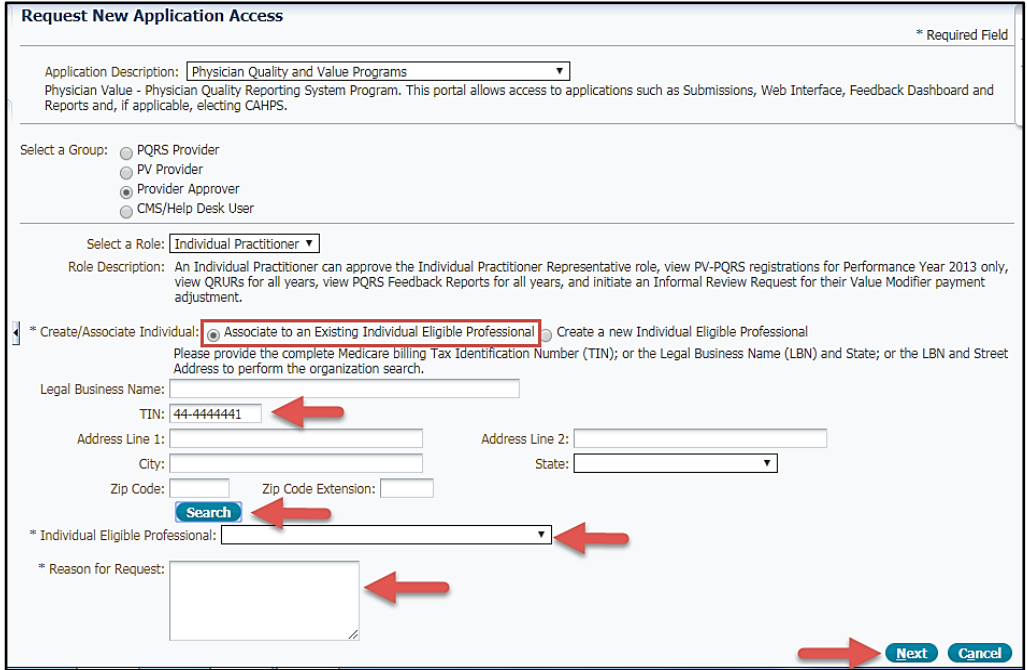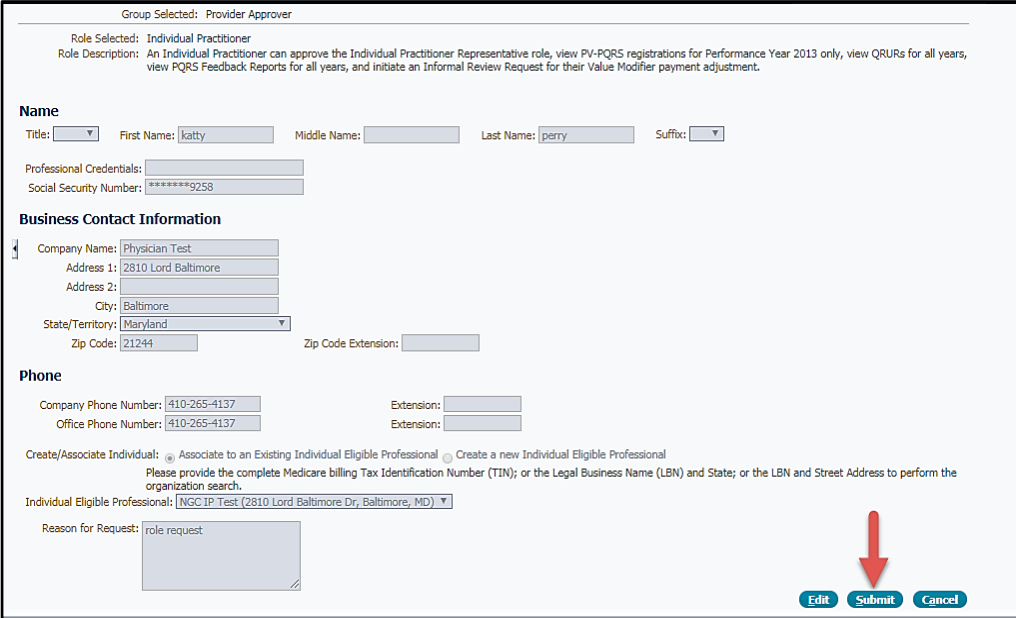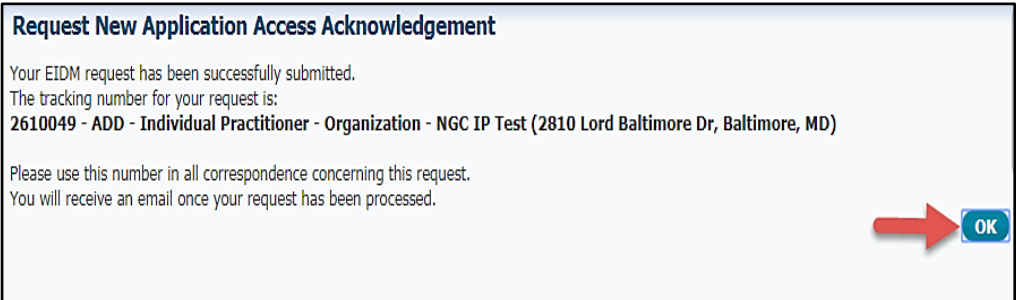| Steps	Screenshots
28. Verify the information on the **Verification** screen and select **Submit**.	Group Selected: Provider Approver Role Selected: Individual Practitioner Role Description: An Individual Practitioner can approve the Individual Practitioner Representative role, view PV-PQRS registrations for Performance Year 2013 only, view QRURs for all years, view PQRS Feedback Reports for all years, and initiate an Informal Review Request for their Value Modifier payment adjustment. **Name** Title: [ ] First Name: katty Middle Name: [ ] Last Name: perry Suffix: [ ] Professional Credentials: [ ] Social Security Number: *******9258 **Business Contact Information** Company Name: Physician Test Address 1: 2810 Lord Baltimore Address 2: [ ] City: Baltimore State/Territory: Maryland Zip Code: 21244 Zip Code Extension: [ ] **Phone** Company Phone Number: 410-265-4137 Extension: [ ] Office Phone Number: 410-265-4137 Extension: [ ] Create/Associate Individual: ◉ Associate to an Existing Individual Eligible Professional ○ Create a new Individual Eligible Professional Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search. Individual Eligible Professional: NGC IP Test (2810 Lord Baltimore Dr, Baltimore, MD) ▼ Reason for Request: role request Edit Submit Cancel
29. (a) You have successfully applied for the Individual Practitioner role. **Note:** *Another Individual Practitioner on behalf of the solo practitioners must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.* (b) After your role request is approved, proceed to Step 33 to complete the Multi-Factor Authentication before you can access the **Physician Quality and Value Programs** application using your EIDM UserID and EIDM Password in order to: • Obtain the solo practitioner's Annual QRUR and PQRS Feedback Report; • Obtain the solo practitioner's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and	**Request New Application Access Acknowledgement** Your EIDM request has been successfully submitted. The tracking number for your request is: **2610049 - ADD - Individual Practitioner - Organization - NGC IP Test (2810 Lord Baltimore Dr, Baltimore, MD)** Please use this number in all correspondence concerning this request. You will receive an email once your request has been processed. OK

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.
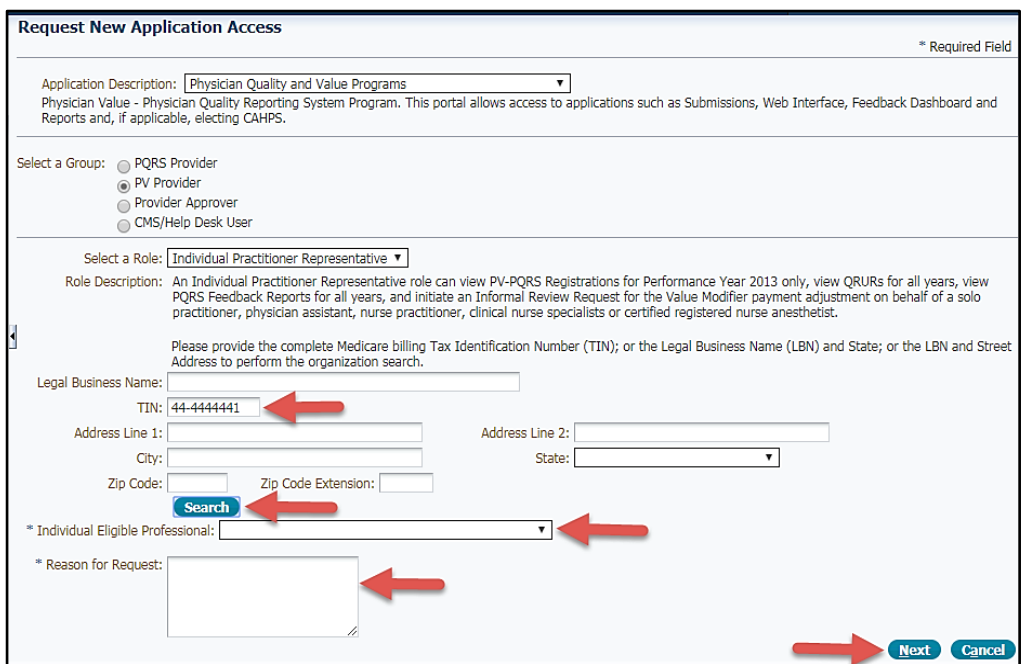
Steps	Screenshots
Supplemental QRUR from prior years; • Submit a Value Modifier Informal Review request on behalf of solo practitioner; and • Approve requests for the 'Individual Practitioner Representative' role in the EIDM.	

<div align="center">

d. Individual Practitioner Representative Role

Follow Steps 30 to 32 to request an Individual Practitioner Representative Role

</div>

30. (a) Enter one of the following information for the solo practitioner: i. Medicare Billing TIN OR ii. Legal Business Name and State OR iii. Legal Business Name and Street Address (b) Select **Search.** (c) Select the solo practitioner from the **Individual Eligible Professional** drop-down menu. Enter the **Reason for Request** and select **Next**. **Note**: *If the solo practitioner cannot be found, please verify that the solo practitioner already has a user with an approved Individual Practitioner role and you entered the solo practitioner's Medicare billing TIN correctly. If you do not know the Individual Practitioner, contact the QualityNet Help Desk.*	**Request New Application Access** ** Required Field* Application Description: Physician Quality and Value Programs Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS. Select a Group: ○ PQRS Provider ◉ PV Provider ○ Provider Approver ○ CMS/Help Desk User Select a Role: Individual Practitioner Representative Role Description: An Individual Practitioner Representative role can view PV-PQRS Registrations for Performance Year 2013 only, view QRURs for all years, view PQRS Feedback Reports for all years, and initiate an Informal Review Request for the Value Modifier payment adjustment on behalf of a solo practitioner, physician assistant, nurse practitioner, clinical nurse specialists or certified registered nurse anesthetist. Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search. Legal Business Name: TIN: 44-4444441 Address Line 1: Address Line 2: City: State: Zip Code: Zip Code Extension: [Search] * Individual Eligible Professional: * Reason for Request: [Next] [Cancel]

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.
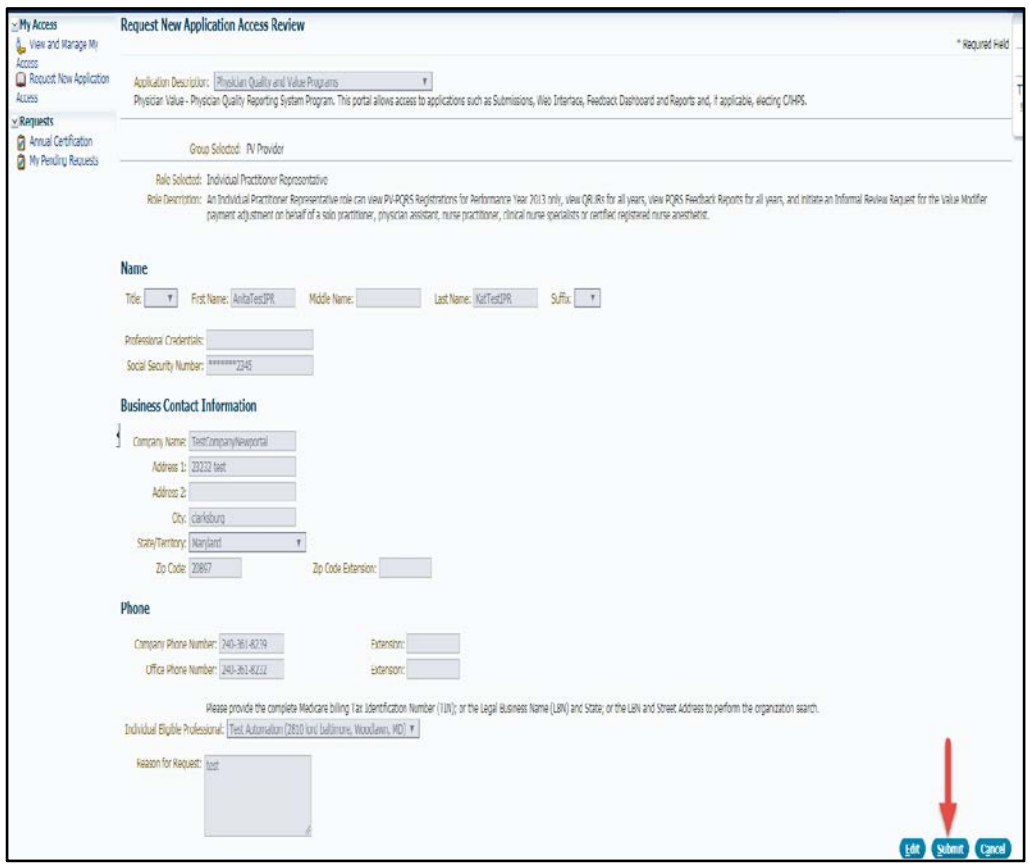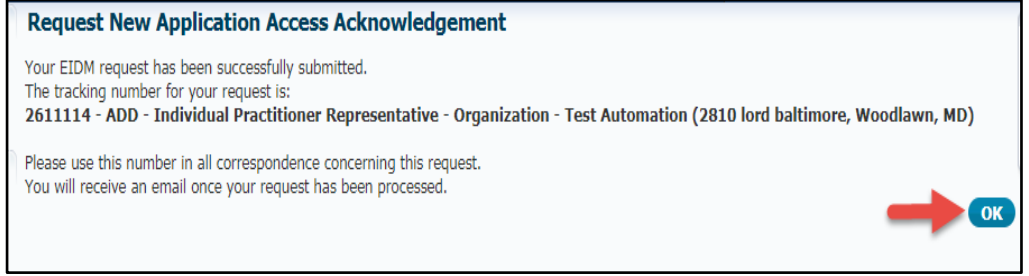
25   Version 1.0

Steps	Screenshots
31. Verify the information on the **Verification** screen and select **Submit**.	
32. (a) You have successfully applied for the Individual Practitioner Representative role. *Note: An Individual Practitioner on behalf of the solo practitioner must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.* (b) After your role request is approved, proceed to next Step 33 to complete the Multi-Factor Authentication before you can access the **Physician Quality and Value Programs** application using your EIDM UserID and EIDM Password in order to:	**Request New Application Access Acknowledgement** Your EIDM request has been successfully submitted. The tracking number for your request is: **2611114 - ADD - Individual Practitioner Representative - Organization - Test Automation (2810 lord baltimore, Woodlawn, MD)** Please use this number in all correspondence concerning this request. You will receive an email once your request has been processed. OK

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

Steps	Screenshots
• Obtain the solo practitioner's Annual QRUR and PQRS Feedback Report; • Obtain the solo practitioner's Mid-Year QRUR, Annual QRUR, PQRS Feedback Report, and Supplemental QRUR from prior years; and • Submit a Value Modifier Informal Review Request on behalf of a solo practitioner.	

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.
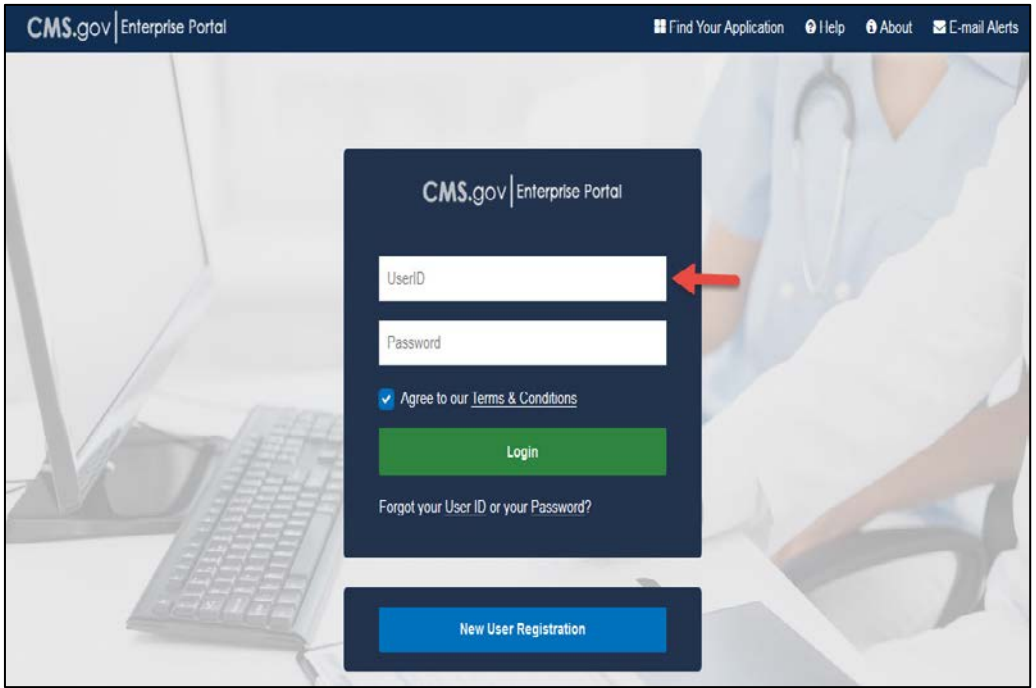
27   Version 1.0

IV.   Completing the Multi-Factor Authentication (MFA)

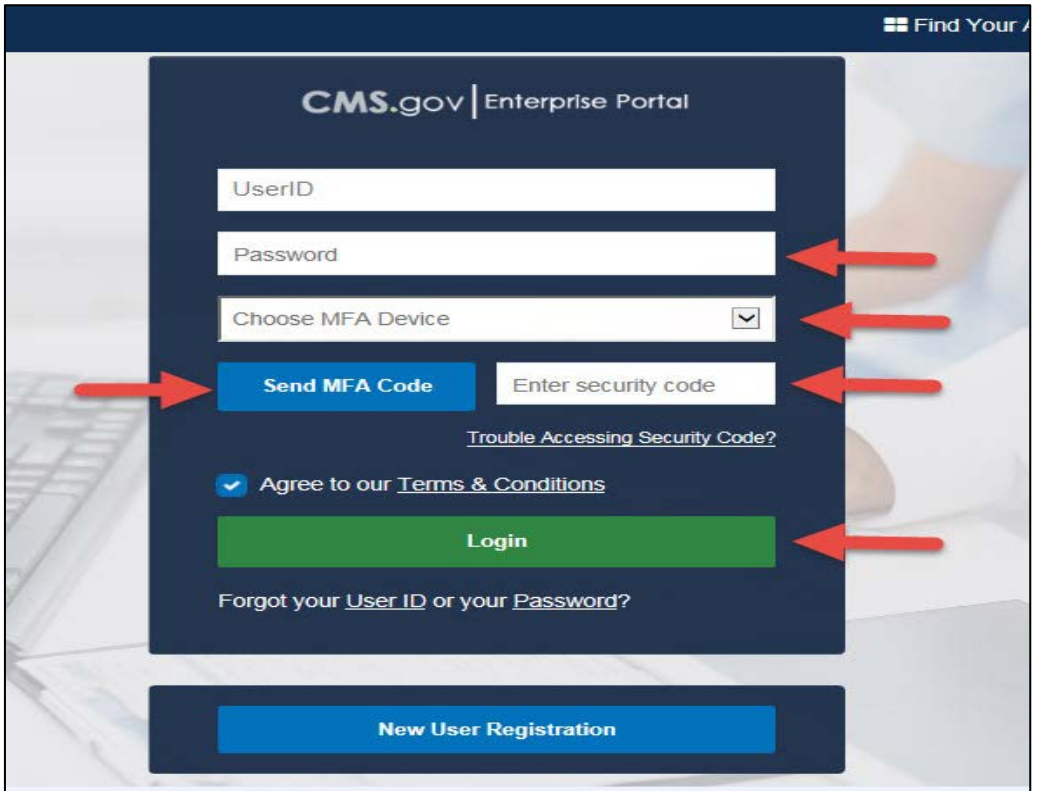Multi-Factor Authentication will need to be completed each time you log into the CMS Enterprise Portal. Additional information on how the MFA process works can be found at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html .

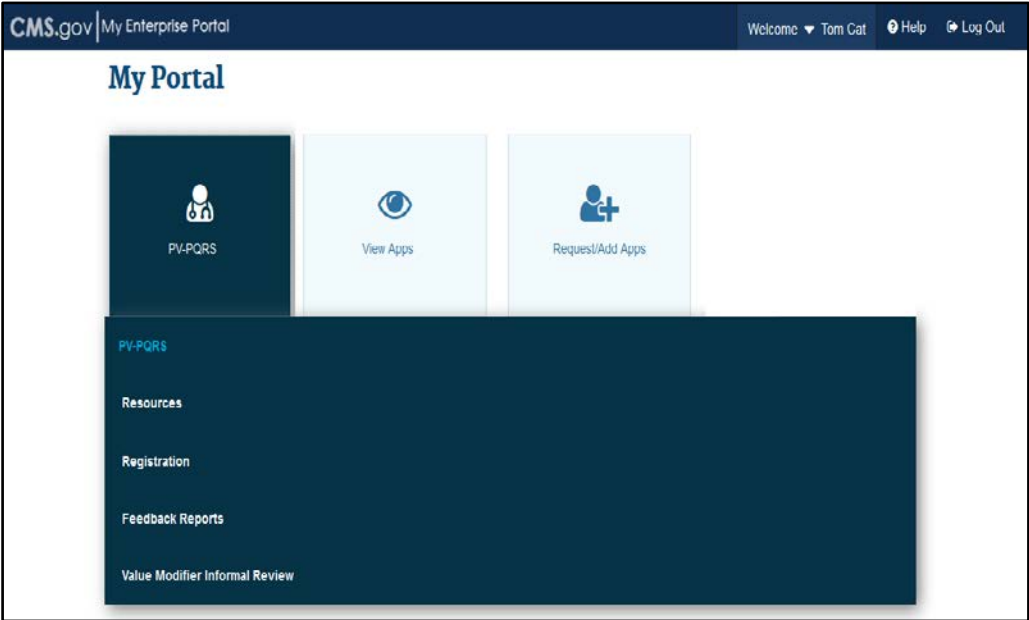| Steps	Screenshots
33. Go to the **CMS Enterprise Portal** at: https://portal.cms.gov. 34. Enter your **EIDM UserID**. *Note: Multi-Factor Authentication (MFA) is a new approach to security authentication which will help improve CMS' ability to reduce fraud and ensure system security. It requires users to provide more than one form of verification in order to prove their identity in order to access certain information provided via the **Physician Quality and Value Programs** application. MFA registration is required only once when you are requesting a role but will be verified at every logon. The **Choose MFA Device** drop-down menu will be displayed when you enter your **EIDM UserID.***	

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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Steps	Screenshots
34. Enter your **EIDM Password**. 35. Complete the **MFA** each time you attempt to log into the CMS Enterprise Portal. (a) Select an option under **the Choose MFA Device** drop-down menu. *Note: You previously registered to complete the MFA process when setting-up your **EIDM** account. Please ensure that you select the same **MFA Device Type** you selected when registering for the MFA process during your initial account set-up. You will not be able to complete the MFA process if your selection from the **MFA Device Type** does not match your initial selection when setting-up your account.* (b) Select **Send MFA Code** to receive a **Security Code**. *Note: The **Send** option will appear only when the following MFA Device Type is selected:* • *Text Message-Short Message Service (SMS)* • *Interactive Voice Response (IVR)* • *Email* (c) Retrieve the **Security Code** from the selected **MFA Device** type. (d) Enter the **Security Code** and select **Agree to Our Terms & Conditions** checkbox. (e) Select **Log In**.	■■ Find Your A **CMS.**gov | Enterprise Portal UserID Password Choose MFA Device **Send MFA Code** Enter security code Trouble Accessing Security Code? ✔ Agree to our Terms & Conditions **Login** Forgot your User ID or your Password? **New User Registration**

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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Steps	Screenshots
36. You will be directed to **CMS Portal Homepage**. Select the following links from the PV-PQRS drop-down menu: (a) **Resources** (to view AQRUR, PQRS, and VM Informal Review related FAQs and reference material) (b) **Registration** (to view prior year's PQRS GPRO registration) (c) **Feedback Reports** (to obtain an Annual QRUR, PQRS Feedback Report Mid-Year QRUR, and Supplemental QRUR) (d) **Value Modifier Informal Review** (to submit an Informal Review request)	

If you have questions about requesting a role or need assistance accessing any of the reports, please contact the QualityNet Help Desk by phone at 866-288-8912. Normal business hours are Monday-Friday from 8 am to 8 pm Eastern Time Zone.

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