

Preview Period: 2020 Performance Information for Doctors and Clinicians

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Acronyms

- APM – Alternative Payment Model
- CAHPS – Consumer Assessment of Healthcare Providers and Systems
- CMS – Centers for Medicare & Medicaid Services
- EUC – Extreme and Uncontrollable Circumstances
- HARP – HCQIS (Health Care Quality Information Systems) Access Roles and Profile
- MIPS – Merit-based Incentive Payment System
- PDC – Provider Data Catalog
- QCDR – Qualified Clinical Data Registry
- QPP – Quality Payment Program
- TIN – Taxpayer Identification Number

Public Health Emergency Considerations

- All 2020 MIPS performance information that will be previewed and publicly reported met the established statistical public reporting standards.
- Extreme and Uncontrollable Circumstances (EUC) exceptions were automatically applied to MIPS eligible clinicians and available to groups who experienced challenges collecting or submitting 2020 performance information due to the public health emergency.
 - No performance information will be publicly reported for MIPS performance categories that were reweighted to 0% through the EUC policy and information wasn't submitted to CMS.
 - The reweighting or targeted review request may still be in progress, although you'll still be able to preview your 2020 performance information through the Preview Period. You may need to check your updated performance feedback if your performance information (including final score) changes as a result of the targeted review.

Doctors and Clinicians Preview Period Overview

- Clinicians and groups have an opportunity to review their performance information prior to it being publicly reported on Medicare Care Compare and in the Provider Data Catalog (PDC). The Doctors and Clinicians Preview Period is the first chance for clinicians and groups to review their performance information targeted for public reporting.
- Clinicians and groups who aren't MIPS eligible (i.e., voluntary reporters) and MIPS APM participants who voluntarily submitted MIPS performance information will have the opportunity to opt out of having their performance information publicly reported.
 - If a voluntary reporter has opted in to MIPS for purposes of the payment adjustment, they won't be eligible to opt out of public reporting. That is, these reporters' performance information will be publicly reported.
- Clinicians and groups will be able to preview their performance information by accessing the Doctors and Clinicians Preview section of the [Quality Payment Program](#) (QPP) website.

Who should preview their information?

- Eligible clinicians, groups, and virtual groups that submitted Merit-based Incentive Payment System (MIPS) performance information.
- Clinicians, groups, and virtual groups who aren't MIPS eligible but voluntarily submitted MIPS performance information.
- Groups that submitted Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS Survey data.

Who should preview their information?

- Doctors and clinicians who participated in an APM may or may not have performance information available on their profile pages and in the PDC.

Qualifying APM Participants in Advanced APMs

Performance information **WON'T** be publicly reported on the clinician's profile page or in the PDC.

Clinicians in MIPS APMs¹

Performance information **WILL** be publicly reported on the clinician's profile page and in the PDC.²

Clinicians in All Other APM Types

Performance information **WILL** be publicly reported on the clinician's profile page and in the PDC.²

¹Clinicians in MIPS APMs may have opted out of public reporting during the Doctors and Clinicians Preview Period.

²Clinicians only have performance information on their profile pages and in the PDC if they submitted performance information that was selected for public reporting and didn't have an EUC exception.

How to Preview Your Information

Step 1 – Log in

- Log in to the [Quality Payment Program](#) using your HARP credentials.
- Forgot your credentials? Go to the [HARP website](#) to recover your user ID or reset your password.
- Don't have a HARP account? View the [HARP toolkit](#) and visit the [HARP registration page](#) to create one.

Note: You must log in using a Security Official or Staff User role. You won't be able to preview your information using a Clinician role.

Sign in to QPP

USER ID

PASSWORD

Show password

Forgot your user id or password? [Recover ID or reset password](#)

STATEMENT OF TRUTH

In order to sign in, you must agree to this: I certify to the best of my knowledge that all of the information that will be submitted will be true, accurate, and complete. If I become aware that any submitted information is not true, accurate, and complete, I will correct such information promptly. I understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.

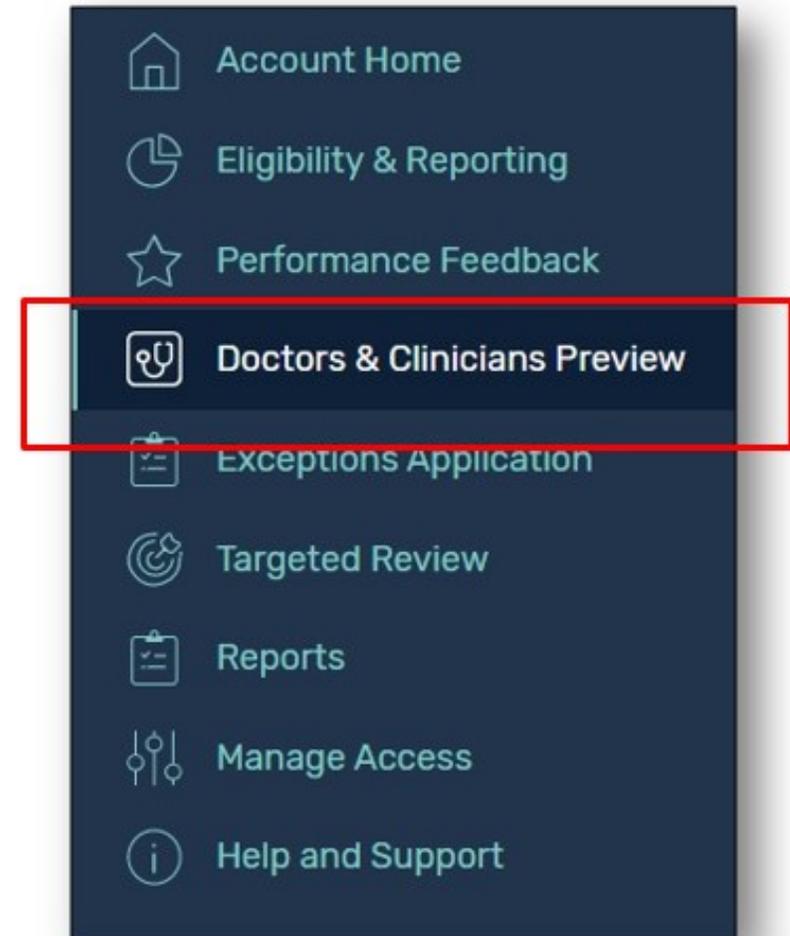
Yes, I agree

[Sign in >](#) [Don't have an account? Register](#)

How to Preview Your Information

Step 2 – Navigate to Doctors and Clinicians Preview

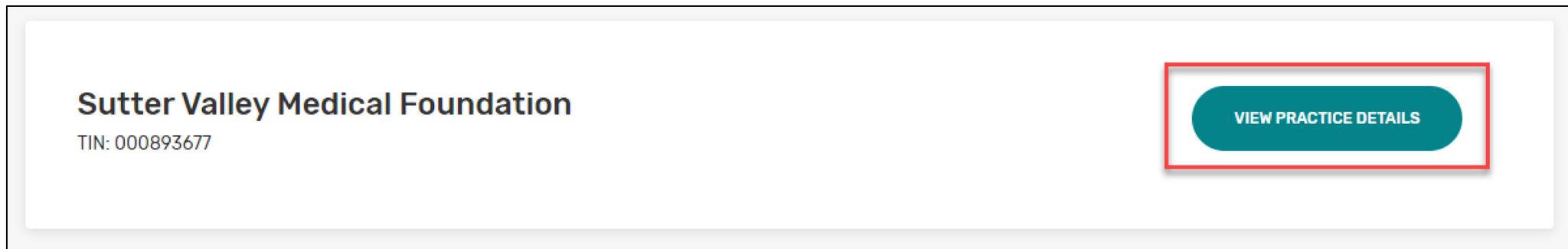
- Select “Doctors and Clinicians Preview” from the left-hand navigation bar.



How to Preview Your Information

Step 3 – Select a group or clinician

- For a group, select “View Practice Details” for the group in which you’re interested.



Note for virtual groups: If your HARP account is connected to a virtual group, you can preview available performance information by selecting “View Virtual Group Details” on the “Virtual Groups” tab. To preview group performance information, you must first navigate to the “Practices” tab and then select “View Practice Details.”

How to Preview Your Information

Step 3 (cont'd) – Select a group or clinician

- If you're a clinician and want to preview individual data, from the group preview landing page, scroll down to the "Connected Clinicians" section and select the "View Individual Preview" button for the individual clinician of interest.

Connected Clinicians

Below are the clinicians connected to the group above. Select an individual clinician to view their individual 2020 performance information available for preview. If clinicians in your group submitted performance information through more than one group, they may have additional performance information available for preview. Clinicians should preview information under each group through which they submitted data.

Search

Enter full NPI

Showing 1 - 3 of 3 clinicians

Jane Doe
NPI: 0000222022

at Sutter Valley Medical Foundation

[VIEW INDIVIDUAL PREVIEW](#)

Note for virtual groups: If your HARP account is connected to a virtual group and you want to preview individual performance information, you must first navigate to the "Practices" tab and then select "View Practice Details." Then, follow the steps at the top of the slide to view clinician performance information.

How to Preview Your Information

Step 4 – View quality data

- Select “Quality” from the left-hand navigation.



How to Preview Your Information

Step 4 (cont'd) – View quality data

- Review MIPS and QCDR quality data on the Performance tab.
- Review CAHPS for MIPS quality data on the Patient Survey Scores tabs (group only).

The screenshot displays a web interface with two tabs at the top: "Performance" (highlighted with a blue underline) and "Patient Survey Scores" (highlighted with a red border). Below the tabs, the "MIPS Quality Performance" section is visible, containing a sub-header and a paragraph of text explaining that the group's 2020 MIPS and QCDR quality performance information will be displayed on their Medicare Care Compare profile page. Below this, the "Quality Performance" section is shown, with a sub-header and a paragraph explaining that star ratings are based on information submitted to Medicare. The "Behavioral health" section follows, with a sub-header and a paragraph explaining that some groups do a better job than others screening and providing care for patients with mental health or substance use disorders. At the bottom, a table lists measures with their names and star ratings. The table has two columns: "Measure Name" and "Star Rating". The first row shows the measure "Screening for tobacco use and providing help quitting when needed." with a star rating of four stars (★☆☆☆) and a dropdown arrow to the right.

Measure Name	Star Rating
Screening for tobacco use and providing help quitting when needed.	★☆☆☆

How to Preview Your Information

Step 5 – View Promoting Interoperability data

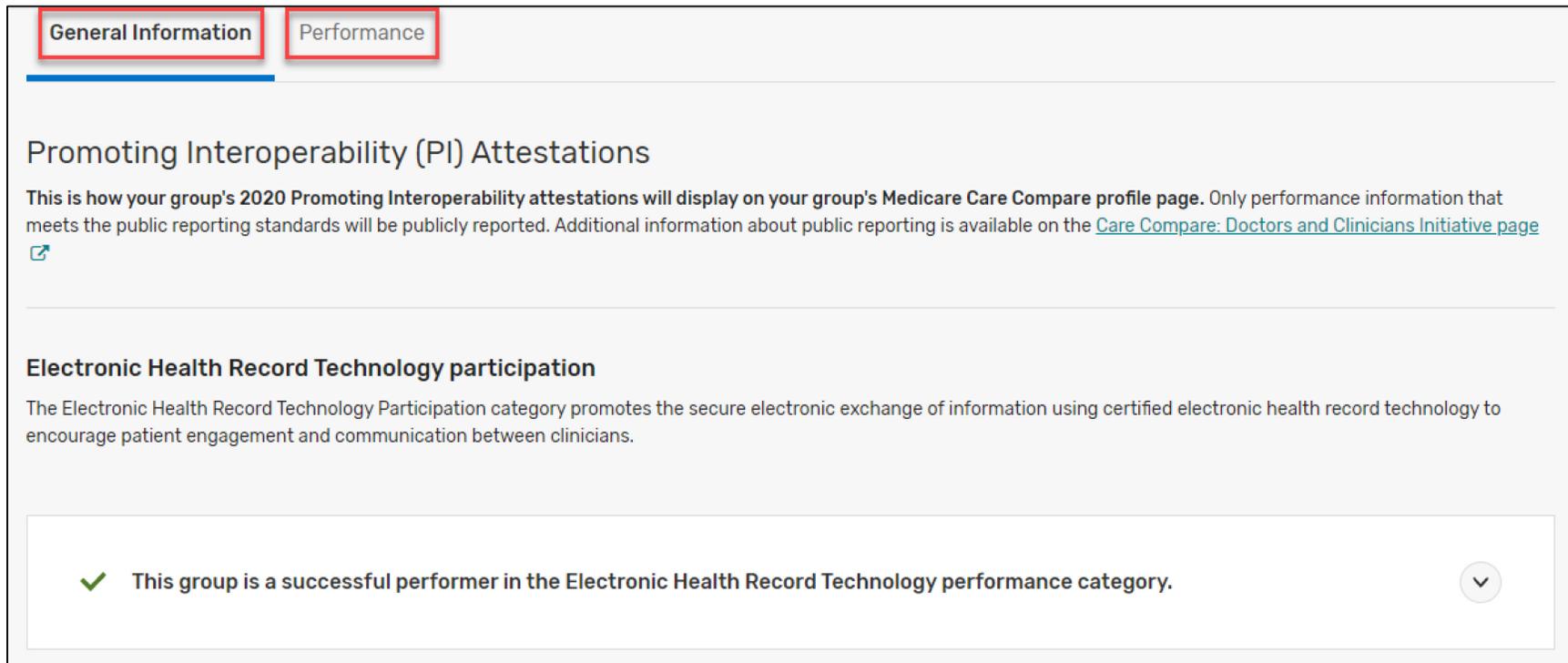
- Select “Promoting Interoperability” from the left-hand navigation.



How to Preview Your Information

Step 5 (cont'd) – View Promoting Interoperability data

- Review Promoting Interoperability data on the General Information and Performance tabs.



The screenshot displays a web interface with two tabs: "General Information" and "Performance". The "General Information" tab is selected and highlighted with a blue underline. Below the tabs, the section "Promoting Interoperability (PI) Attestations" is visible, followed by a paragraph explaining that only performance information meeting public reporting standards will be displayed. A link to "Care Compare: Doctors and Clinicians Initiative page" is provided. Below this, the "Electronic Health Record Technology participation" section is shown, with a paragraph describing the category. At the bottom, a green checkmark icon is followed by the text: "This group is a successful performer in the Electronic Health Record Technology performance category." A small downward arrow icon is located to the right of this text.

How to Preview Your Information

Step 6 – View improvement activities data

- Select “Improvement Activities” from the left-hand navigation.



How to Preview Your Information

Step 6 (cont'd) – View improvement activities data

- Review improvement activities data.

Improvement Activities (IA)

This is how your group's 2020 MIPS Improvement Activities will display on your group's Medicare Care Compare profile page. Only performance information that meets the public reporting standards will be publicly reported. Additional information about public reporting is available on the [Care Compare: Doctors and Clinicians Initiative page](#).

Improvement Activities

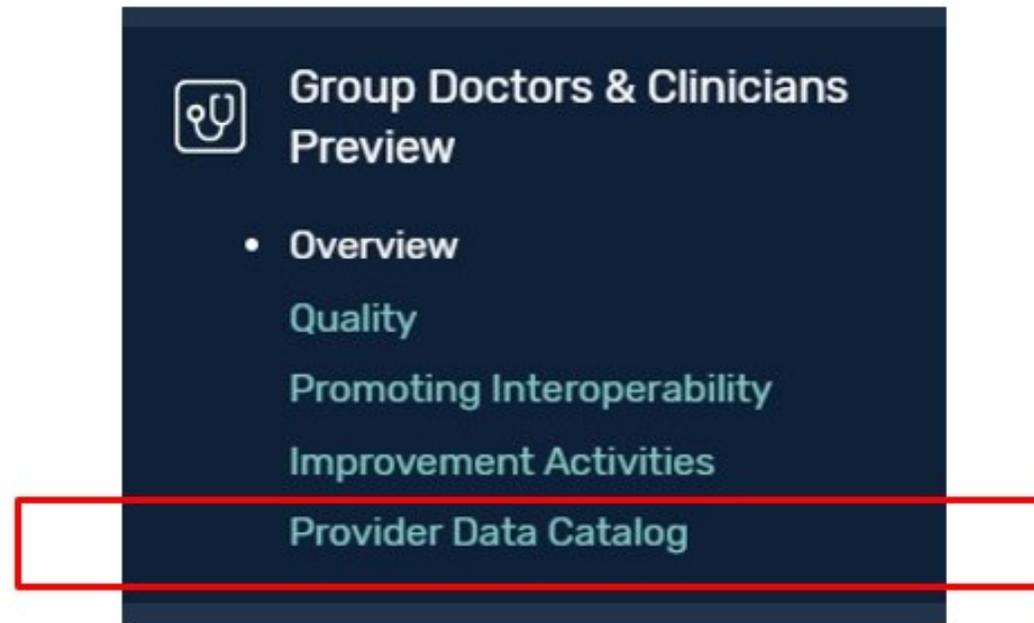
A group can choose from many activities to demonstrate commitment to improving patient care. In 2020, this group participated in the Improvement Activities listed below.

- ✓ Sharing patient information with other clinicians through a Health Information Exchange or structured referral notes.
- ✓ Helping patients and caregivers understand out-of-pocket costs of prescribed medications.
- ✓ Collecting and following-up on patient experience and satisfaction information related to patient engagement.

How to Preview Your Information

Step 7 – View PDC data

- Select “Provider Data Catalog” from the left-hand navigation.



How to Preview Your Information

Step 7 (cont'd) – View PDC data

- Review sections for performance scores, attestations, performance category scores, and final scores.

Provider Data Catalog

This is how your group's 2020 MIPS performance information, will be publicly reported in the Provider Data Catalog. Only performance information that meets the public reporting standards will be publicly reported. Additional information about public reporting is available on the [Care Compare: Doctors and Clinicians Initiative page](#).

Note: The download function is not available because this is only a preview of what your data will look like in the Provider Data Catalog.

2020 Provider Data Catalog

PY 2020 Group Performance Database	▼
PY 2020 Patient Experience Database	▼

Opt Out of Public Reporting

- Some clinicians and groups with performance information available for preview may be eligible to opt out of having their performance information publicly reported.

Voluntary Reporters¹

- Clinicians or groups that submitted MIPS performance information but were not MIPS eligible during the performance year.
- May opt out of having performance information publicly reported.

Clinicians Who Participated in a MIPS APM

- May opt out of having measure- and attestation-level performance information publicly reported.
- MIPS final scores and performance category scores will be publicly reported in the PDC.

¹Note: Clinicians or groups who opt in to the MIPS payment adjustment can't opt out of public reporting. Voluntary reporting doesn't apply to clinicians who participated in an Advanced APM and were considered qualified participants during the year of performance.

How Voluntary Reporters Can Opt Out of Public Reporting

Step 1 – Navigate to the “Overview” page and select the “opt out” link.

Pratt Ophthalmology Associates, Inc

TIN: 000850113 | [Click here to opt out of having your 2020 MIPS performance information publicly reported.](#)

Quality Measures PREVIEW DATA	Promoting Interoperability PREVIEW DATA	Improvement Activities PREVIEW DATA	Provider Data Catalog PREVIEW DATA
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[LEARN MORE ABOUT PUBLIC REPORTING](#)

How Voluntary Reporters Can Opt Out of Public Reporting (cont'd)

Step 2 – Verify that you're opting out for the correct clinician or group.

- Review the information and verify that this is you or your group.
- Select the green “Opt-out” button to continue and confirm.

Opt out of Publicly Reporting Performance Information ×

Pratt Ophthalmology Associates, Inc
TIN: 000850113

Opt out of Publicly Reporting Performance Information

By selecting to opt out of public reporting, the 2020 performance information your group voluntarily submitted to MIPS will not be publicly reported. Once selected, your group will not be able to opt back in.

OPT OUT

How Voluntary Reporters Can Opt Out of Public Reporting (cont'd)

Step 3 – Confirm your decision.

- Confirm your decision by typing “CONFIRM” and selecting the “CONFIRM” button.
- This selection is **permanent for the given performance year and can't be changed later**. Once you confirm your decision, you won't be able to opt back in.

Are you sure? ✕

Pratt Ophthalmology Associates, Inc
TIN: 000850113

Opt out of Publicly Reporting Performance Information
By selecting to opt out of public reporting, the 2020 performance information your group voluntarily submitted to MIPS will not be publicly reported. Once selected, your group will not be able to opt back in.

✕ This action is permanent and cannot be changed later.

Please type "CONFIRM"

[Cancel](#)

How Voluntary Reporters Can Opt Out of Public Reporting (cont'd)

Step 4 – Verify that the opt-out was successful.

Pratt Ophthalmology Associates, Inc

TIN: 000850113

! This group did not meet the MIPS group eligibility requirements and has elected to opt out of having their PY 2020 MIPS performance information publicly reported.

Questions about the Doctors and Clinicians Preview Period?

- Forgot your credentials? Go to the [HARP website](#) to recover your user ID or reset your password. If you are a representative of a Shared Savings Program ACO, contact your ACO to get a HARP account and QPP Security Official or Staff User role via the [ACO Management System \(ACO-MS\)](#).
- Don't have a HARP account yet? Visit the [HARP registration page](#) to create one.
- Contact the QPP Service Center at QPP@cms.hhs.gov if you have scores that don't match your performance feedback report or if you have questions about the Doctors and Clinicians Preview Period.
- Visit the [Care Compare: Doctors and Clinicians Initiative page](#) for additional information and resources about the Preview Period, such as:
 - Guide to the Doctors and Clinicians Preview Period
 - Clinician Performance Information Available for Preview
 - Group Performance Information Available for Preview