

Preview Period: 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
- HARP – HCQIS (Health Care Quality Information Systems) Access Roles and Profile
- MIPS – Merit-based Incentive Payment System
- QCDR – Qualified Clinical Data Registry
- QPP – Quality Payment Program
- TIN – Taxpayer Identification Number

Public Health Emergency Considerations

- All 2019 MIPS performance information that will be previewed and publicly reported met the established statistical public reporting standards.
- Extreme and Uncontrollable Circumstances (EUC) exceptions were available to clinicians and groups who experienced challenges collecting or submitting 2019 performance information due to the public health emergency.
 - Performance information under a MIPS performance category that was reweighted to zero through the EUC policy **will not** be publicly reported.
- The 2019 Preview Period has been expanded from 30 days to 60 days to allow doctors and clinicians more time to preview their information.

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 are not 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 will not 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](#) 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 are not MIPS eligible but voluntarily submitted MIPS performance information.
- Groups that submitted Consumer Assessment of Healthcare Providers & 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 will **NOT** 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.

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 will not 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.

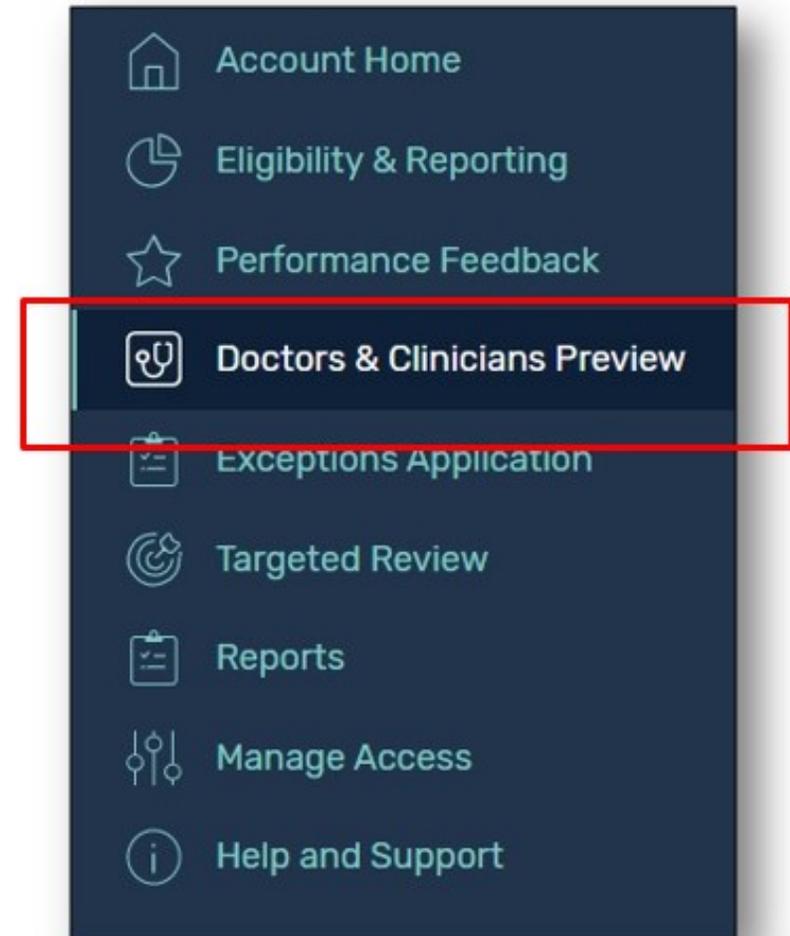
Yes, I agree

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

How to Preview Your Information

Step 2 – Navigate to Doctors and Clinicians Preview

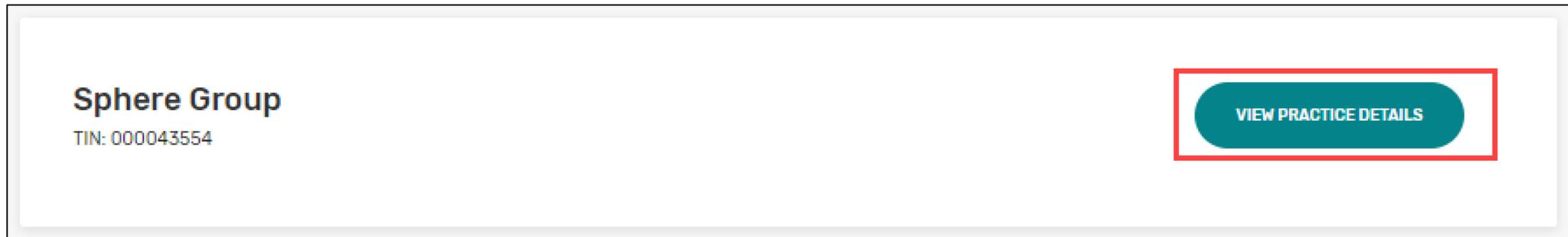
- Select “Doctors and Clinicians Preview” from the left-hand navigation bar.



How to Preview Your Information

Step 3 – Select a group or clinician

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



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” to preview group performance information.

How to Preview Your Information

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

- If you are 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 2019 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

Showing 1 - 3 of 3 clinicians

Jane Doe at Sphere Group
NPI: 0000027488

[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 the Medicare Care Compare interface. At the top, there are two tabs: "Performance" and "Patient Survey Scores". The "Performance" tab is selected and highlighted with a blue underline. Below the tabs, the section is titled "MIPS Quality Performance". A paragraph explains that this is how the group's 2019 MIPS and QCDR quality performance information will display on their Medicare Care Compare profile page. Below this, there are three sub-sections: "Quality Performance", "Behavioral health", and a table of measures. The "Quality Performance" section explains that star ratings are based on information reported to Medicare and that more stars are better. The "Behavioral health" section explains that some groups do a better job of screening and providing care for patients with mental health or substance use disorders. The table below shows a single measure: "Screening for depression and developing a follow-up plan." with a star rating of 4 stars (4 yellow stars, 1 grey star) and a dropdown arrow to the right.

Measure Name	Star Rating
Screening for depression and developing a follow-up plan.	★★★★☆

How to Preview Your Information

Step 5 – View Promoting Interoperability data

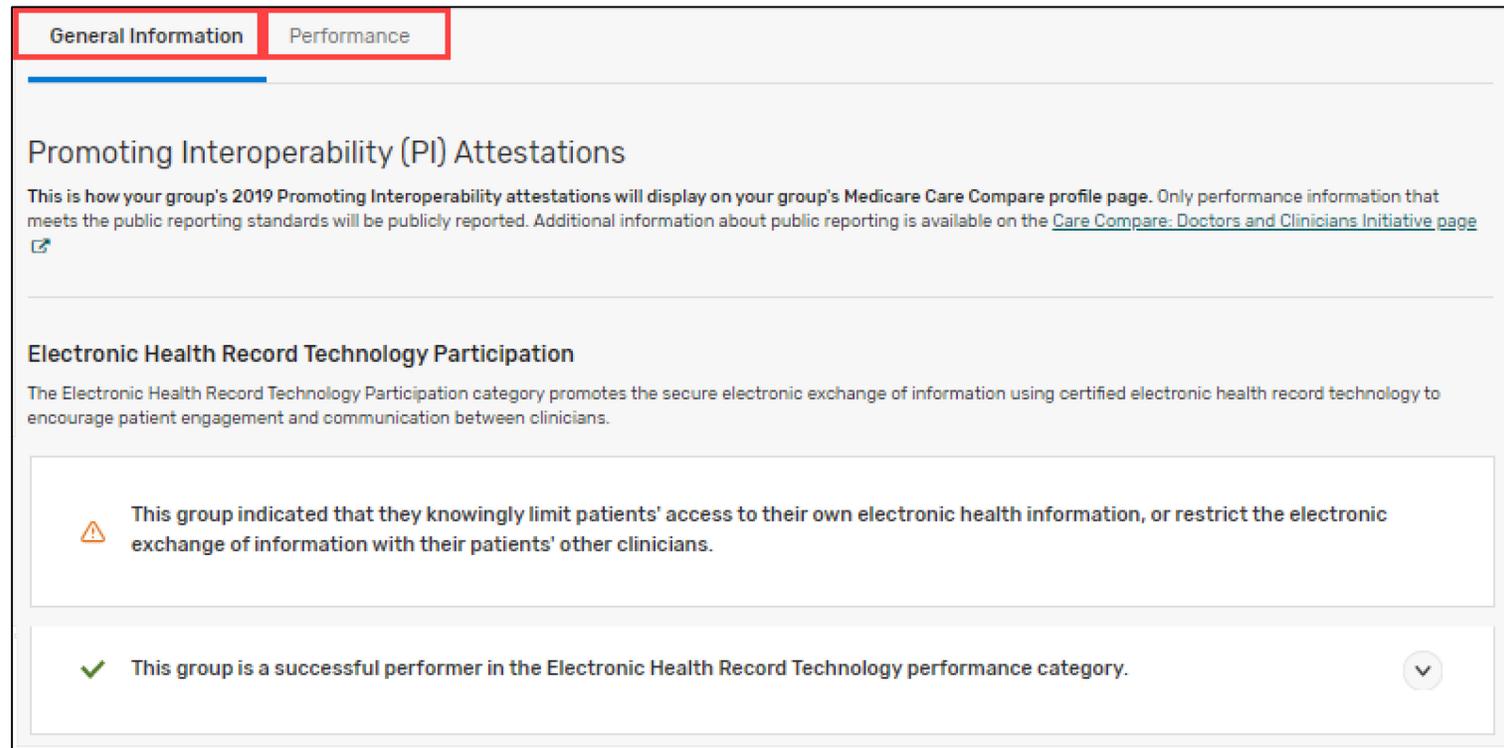
- Select “Promoting Interoperability” from the left-hand navigation.



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 shows a web interface with two tabs: "General Information" and "Performance". The "General Information" tab is selected and highlighted with a red box. Below the tabs, the page displays the following content:

Promoting Interoperability (PI) Attestations

This is how your group's 2019 Promoting Interoperability attestations 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](#) 

Electronic Health Record Technology Participation

The Electronic Health Record Technology Participation category promotes the secure electronic exchange of information using certified electronic health record technology to encourage patient engagement and communication between clinicians.

 This group indicated that they knowingly limit patients' access to their own electronic health information, or restrict the electronic exchange of information with their patients' other clinicians.

 This group is a successful performer in the Electronic Health Record Technology performance category. 

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 2019 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

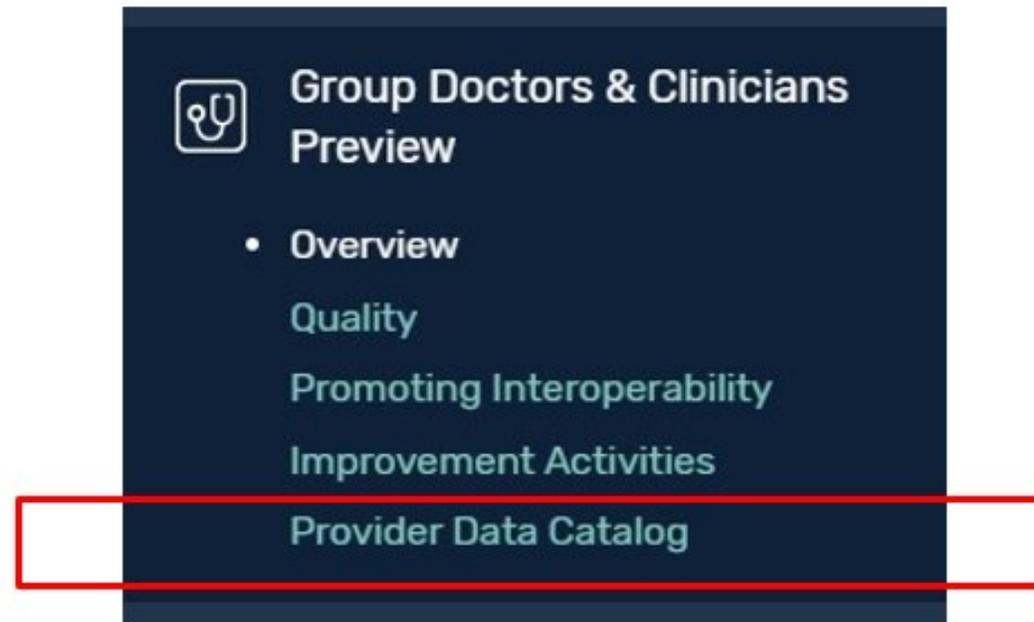
A group can choose from many activities to demonstrate commitment to improving patient care. In 2019, this group participated in the Improvement Activities listed below.

- ✓ Annually registering for the Prescription Drug Monitoring Program and participating for at least 6 months.
- ✓ Consulting the state's Prescription Drug Monitoring program prior to prescribing opioids for more than 3 days.
- ✓ Seeing new and follow-up Medicaid patients within 10 business days of a request for an appointment.

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 2019 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.

2019 Provider Data Catalog

PY 2019 Group Performance Database	▼
PY 2019 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 cannot opt out of public reporting. Voluntary reporting does not apply to clinicians who participated in an Advanced APM and were considered QPs 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.

The screenshot shows a provider dashboard for "Sphere Group" with TIN: 000466369. A red box highlights a link that says "Click here to opt-out of having your 2019 MIPS performance information publicly reported." Below this are two main sections: "Quality Measures" and "Provider Data Catalog", each with a "PREVIEW DATA" link. At the bottom, there is a link for "LEARN MORE ABOUT PUBLIC REPORTING".

How Voluntary Reporters Can Opt-out of Public Reporting (continued)

Step 2 – Verify that you are 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

Sphere Group
TIN: 000466369

Opt-out of Publicly Reporting Performance Information

By selecting to opt-out of public reporting, the 2019 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 (continued)

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 cannot be changed later**. Once you confirm your decision, you will not be able to opt back in.

Are you sure? ✕

Sphere Group
TIN: 000466369

Opt-out of Publicly Reporting Performance Information
By selecting to opt-out of public reporting, the 2019 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"

CONFIRM

[Cancel](#)

How Voluntary Reporters Can Opt-out of Public Reporting (continued)

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

Sphere Group

TIN: 000222343

! This group did not meet the MIPS group eligibility requirements and has elected to opt-out of having their PY 2019 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.
- Don't have a HARP account yet? Visit the the [HARP registration page](#) to create one.
- Contact QPP@cms.hhs.gov if you have scores that do not 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