

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

I. Introduction

In **September 2015**, the Centers for Medicare and Medicaid Services (CMS) made the 2014 Annual Quality and Resource Use Reports (QRURs) available to every group practice and solo practitioner nationwide, including those consisting of non-physician eligible professionals. The 2014 Annual QRURs are also available for groups and solo practitioners that participated in the Medicare Shared Savings Program, the Pioneer ACO Model, or the Comprehensive Primary Care initiative in 2014. The 2014 Annual QRURs show how groups and solo practitioners, as identified by their Taxpayer Identification Number (TIN), performed in 2014 on the quality and cost measures used to calculate the 2016 Value Modifier (VM). For TINs with 10 or more eligible professionals (EPs) who are subject to the 2016 VM, the QRUR shows how the VM will apply to physician payments under the Medicare Physician Fee Schedule (PFS) for physicians who bill under the TIN in 2016. For all other TINs, the QRUR is for informational purposes only and will not affect the TINs' payments under the Medicare PFS in 2016. More information about the 2014 Annual QRURs, including how to request an informal review of the 2016 VM, is available at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html>. Information about the VM is available at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/ValueBasedPaymentModifier.html>.

This guide illustrates how to access and download a 2014 Annual QRUR and the supplementary exhibits from the CMS Enterprise Portal. The QRUR and supplementary exhibits can be downloaded as a Portable Document Format (PDF) document or in Excel format. The data in the 2014 Annual QRUR is also available for download to an exportable Comma-Separated Values (CSV) file.

II. Getting Started

Authorized representatives of groups and solo practitioners can access the 2014 Annual QRURs at <https://portal.cms.gov> using an Enterprise Identity Management (EIDM) account with one of the following roles:

- **For a group with 2 or more EPs (TIN with 2 or more National Provider Identifiers (NPIs) that bill under the TIN):**
 - Security Official
 - Group Representative
- **For a solo practitioner (TIN with only 1 NPI that bills under the TIN):**
 - Individual Practitioner
 - Individual Practitioner Representative

Instructions for obtaining an EIDM account to access a QRUR are available at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html>.

For questions about setting up an EIDM account, please contact the QualityNet Help Desk:

- Monday – Friday: 8:00 am – 8:00 pm EST
- Phone: (866) 288-8912 (TTY (877) 715-6222)
- Fax: (888) 329-7377
- Email: qnetsupport@hcqis.org

To find out whether there is already someone who can access your TIN's QRUR, please contact the QualityNet Help Desk and provide your TIN and the name of your group (or your name, if you are a solo practitioner).

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

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For questions about information contained in your TIN's 2014 Annual QRUR, or to provide feedback to CMS, please contact the Physician Value Help Desk:

- Monday – Friday: 8:00 am – 8:00 pm EST
- (888) 734-6433 (press option 3); (TTY) (888) 734-6563
- Email: pyhelpdesk@cms.hhs.gov

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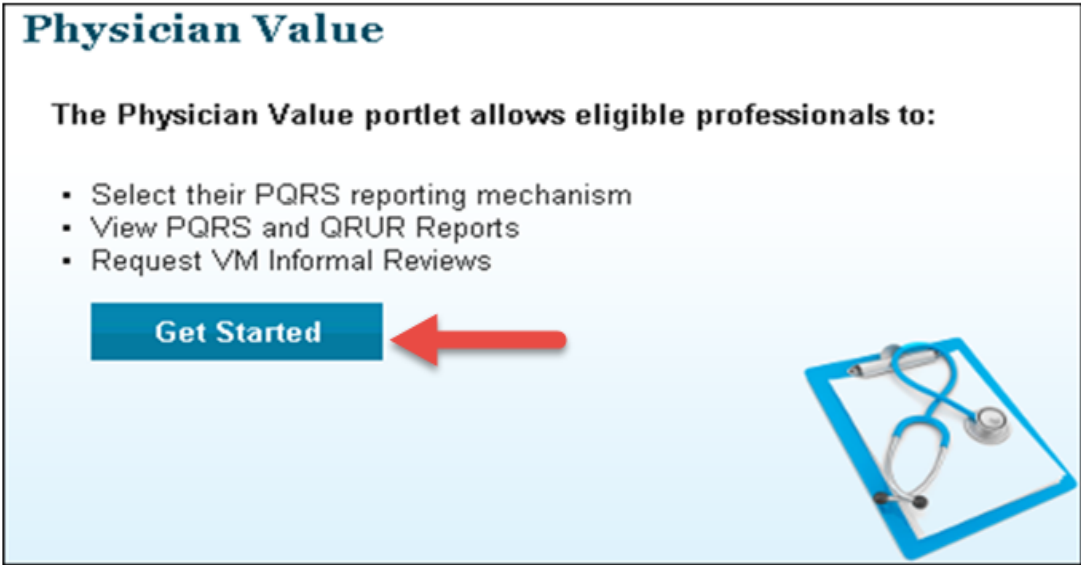
IV. Access the 2014 Annual QRUR

There are two ways to access the **Annual QRUR**; the user may choose one of the following:

- Physician Value (PV) Landing Portlet (see pages 3-10)
- Directly from the **CMS Enterprise Portal** (see pages 11-13)

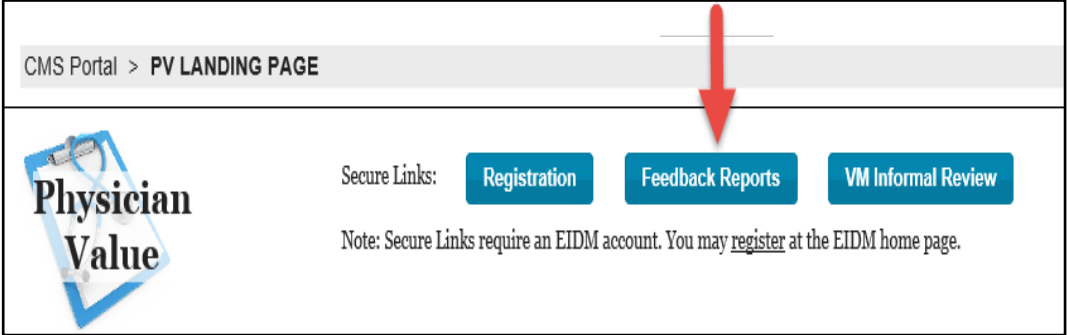
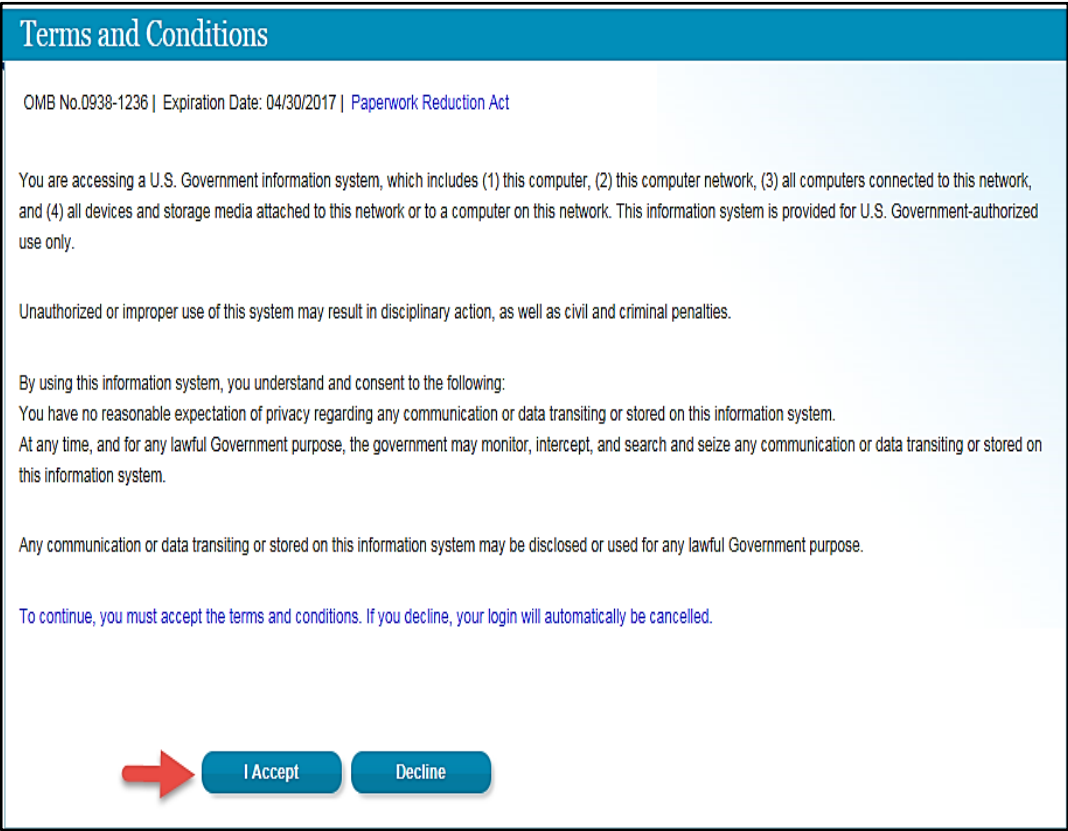
A. How to Access QRURs via the PV Landing Portlet

In addition to accessing the Annual QRUR, the PV Landing Portlet will also allow users to view the information related to PV, and access other PV applications.

Steps	Screenshots
1. (a) Go to https://portal.cms.gov and select Get Started in the Physician Value box on the CMS Enterprise Portal. OR (b) Go to https://portal.cms.gov/PV on a CMS supported Internet Browser. Note: The CMS Enterprise Portal supports the following internet browsers: • Internet Explorer 8 • Internet Explorer 9 • Internet Explorer 10 • Mozilla-Firefox • Chrome • Safari Enable JavaScript and adjust any browser zoom features to ensure you are not seeing the screen in too wide of a view.	

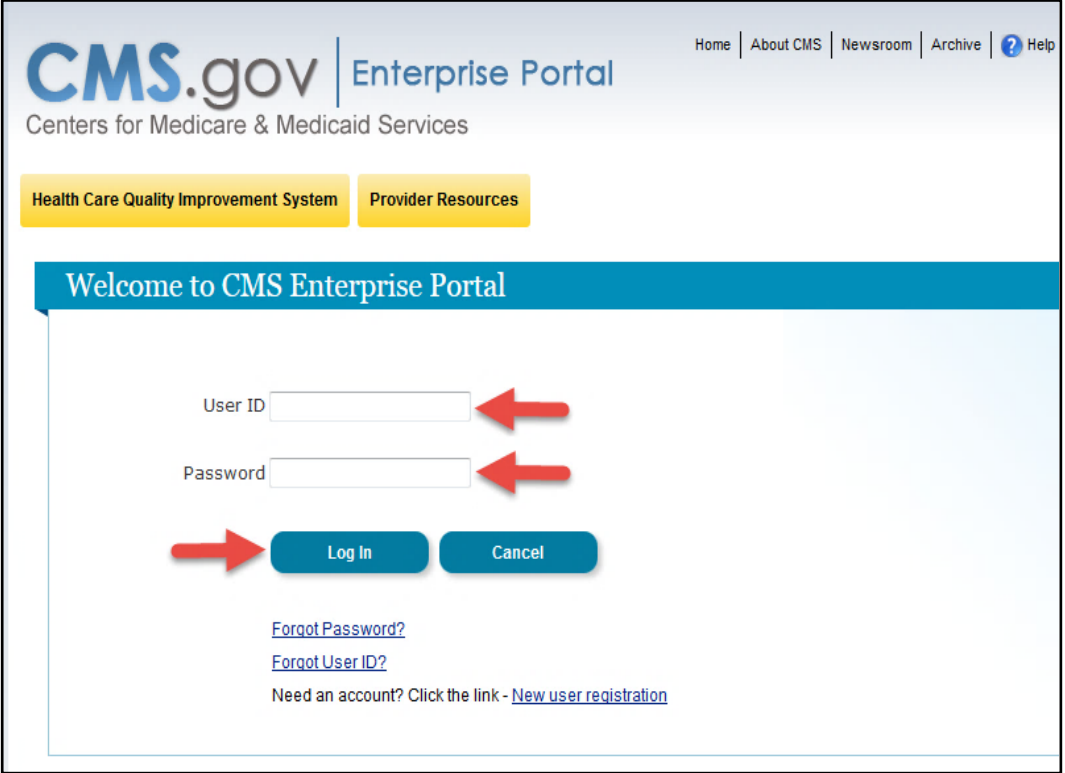
If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

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Steps	Screenshots
2. Select Feedback Reports on the PV Landing Page.	
3. Read the Terms and Conditions and Select I Accept to continue. Note: If you select Decline, then you will be returned to the CMS Enterprise Portal Landing screen.	

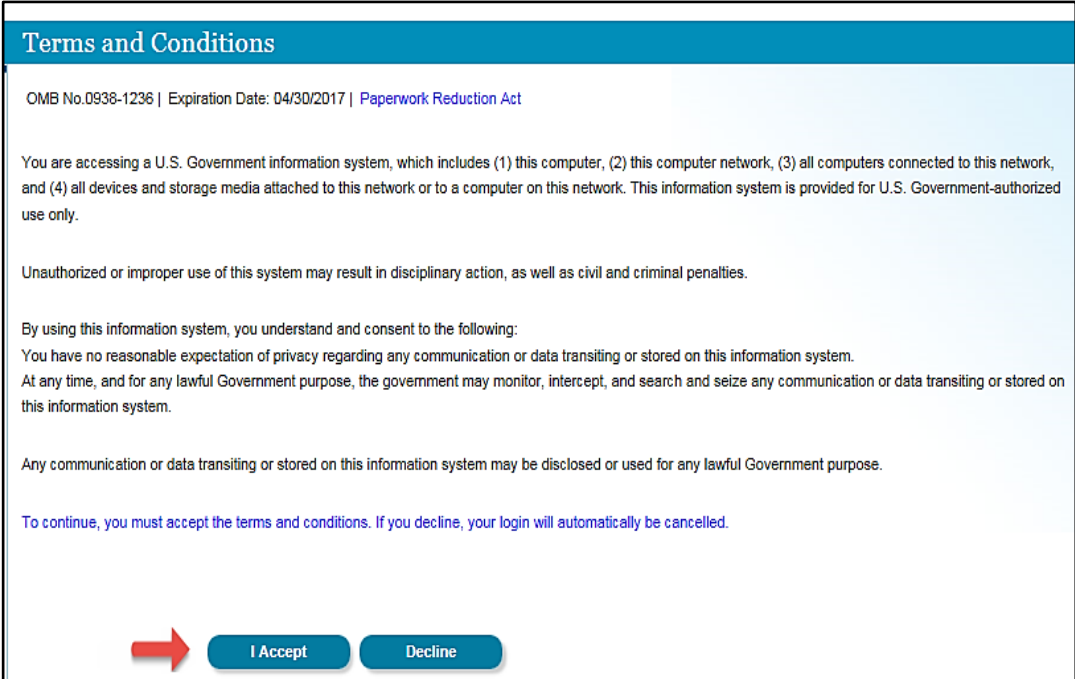
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Steps	Screenshots
4. Enter the following information and select Log In under Welcome to CMS Enterprise Portal: • EIDM User ID • EIDM Password <i>Note: You will be directed to the Multi-Factor Authentication (MFA) process each time you log in and attempt to access the Feedback Reports interface. 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. Upon selecting Log In, the Multi-Factor Authentication Terms and Conditions page will be displayed.</i>	

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Steps	Screenshots
5. Read the Terms and Conditions and select I Accept to continue. <i>Note: Selecting Decline will end the session and return you to the CMS Enterprise Portal Landing screen.</i>	

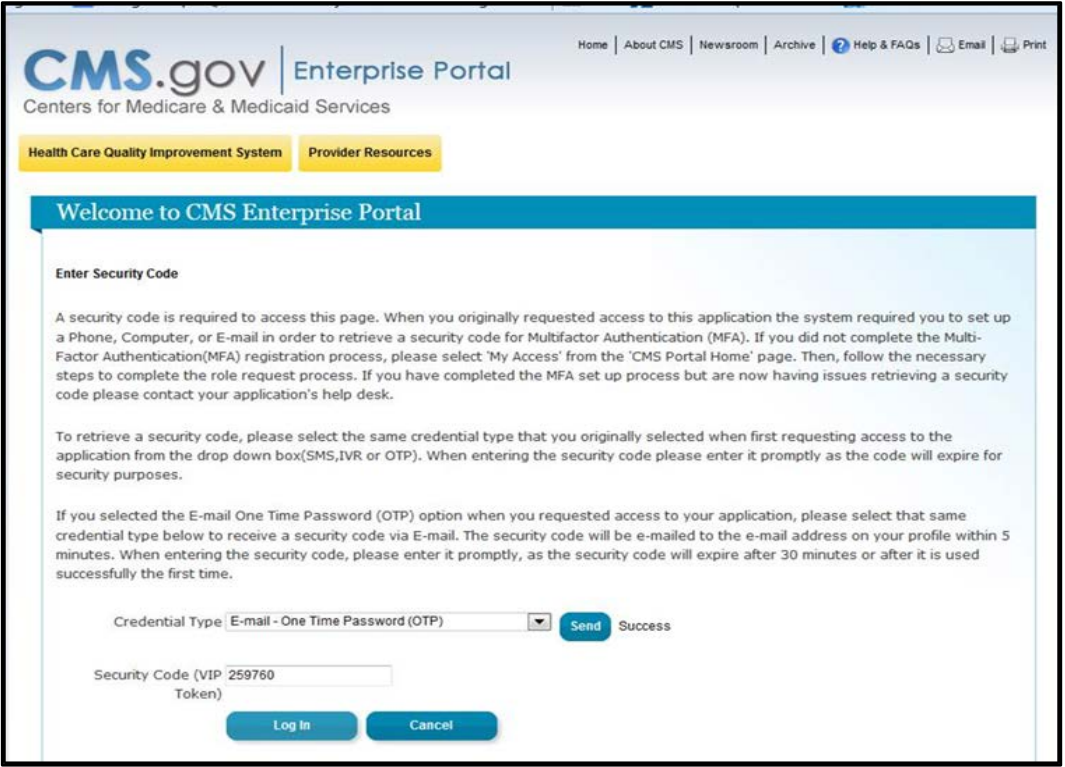
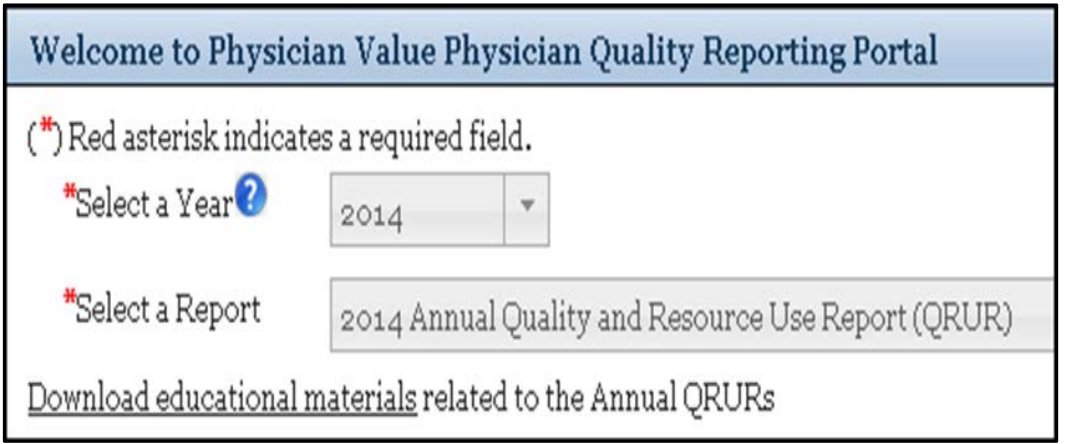
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Steps	Screenshots
6. Select the Credential Type for the drop-down menu and then select Send to receive a Security Code. The word Success will be displayed next to the Send button once a security code has been successfully sent. Note: You previously registered to complete the MFA process when setting-up your Physician Quality and Value Programs account. Please ensure that you select the same Credential Type you selected when registering for the MFA process during your initial account set-up. If you select a different Credential Type, you will receive an error message stating you did not register to complete MFA using the selected option and you will be unable to proceed. If you have forgotten the Credential Type you selected, you may (1) retrieve the E-mail you received upon successfully registering for MFA or (2) navigate to My Profile and select Remove Your Phone or Computer for this information. Selecting Remove Your Phone or Computer will display the Credential Type you selected to complete the MFA process.	

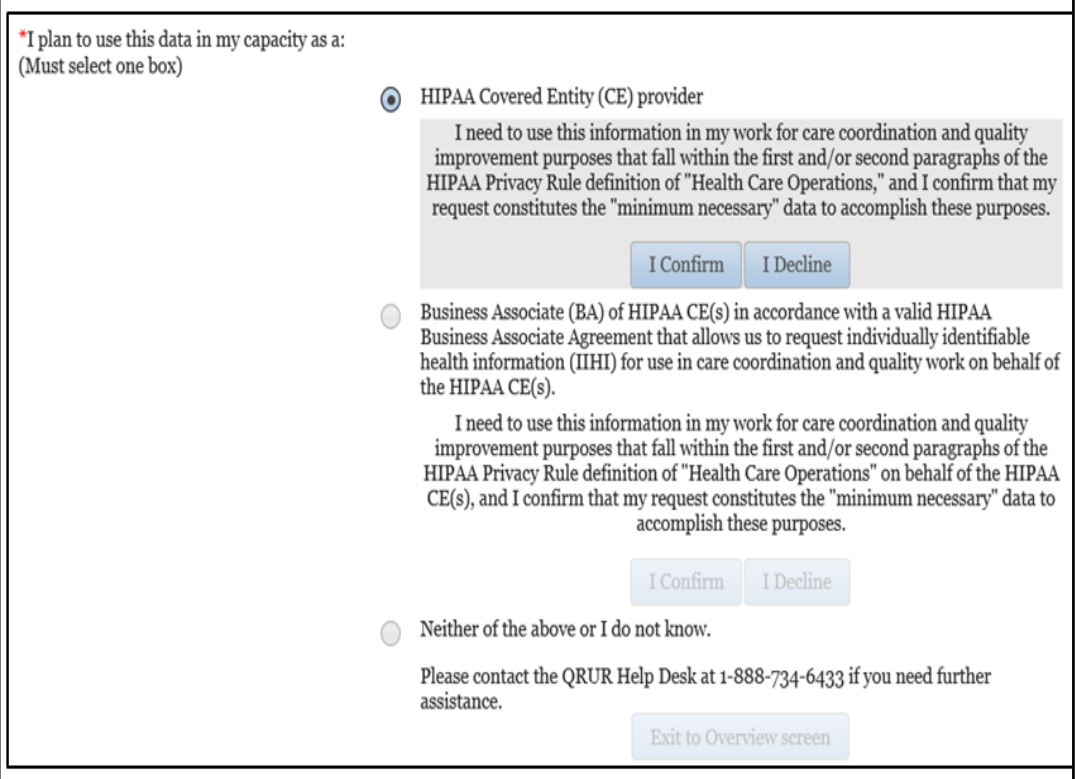
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Steps	Screenshots
7. Enter the Security Code (VIP Token) and then select Log In. Note: You will have thirty (30) minutes to retrieve and enter the Security Code. If you are unable to enter the code within thirty (30) minutes, then the code will expire and you will need to request a new Security Code. The Multi-Factor Authentication process is now complete. You will be redirected to your initial selection, the Feedback Reports selection screen.	
8. Select a year (2014) from the Select a Year drop-down menu, and then select report (2014 Annual Quality and Resource Use Report (QRUR) or any one of the supplementary exhibits) from the Select a Report drop-down menu. Note: If you do not see the 2014 Annual QRUR in the drop-down menu: • Verify that you selected 2014 from the Select a Year drop-down menu. • Call the QualityNet Help Desk to ensure that you logged in with an EIDM account with a correct role.	

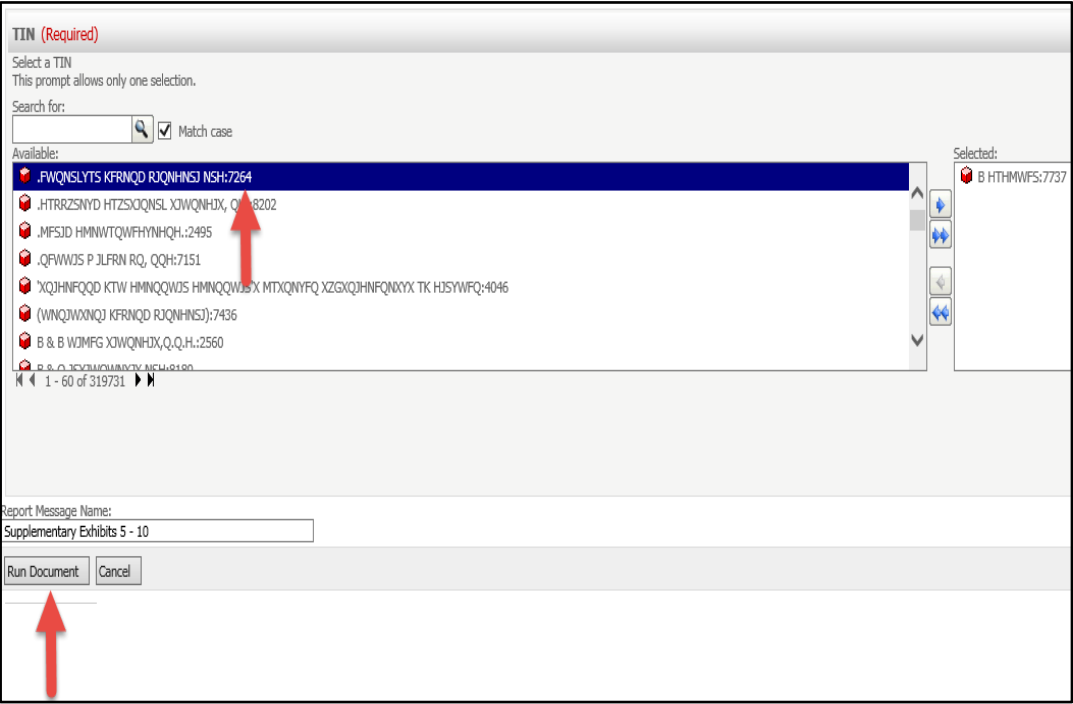
If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

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Steps	Screenshots
9. Read the Attestation Message and make the appropriate attestation selection. Select one of the options under “<i>I plan to use this data in my capacity as a:</i>” 10. Then, select I Confirm to continue. Note: If you select “<i>Neither of the above or I do not know</i>”, the option to Exit to the Overview screen will be enabled.	 *I plan to use this data in my capacity as a: (Must select one box) ☒ HIPAA Covered Entity (CE) provider I need to use this information in my work for care coordination and quality improvement purposes that fall within the first and/or second paragraphs of the HIPAA Privacy Rule definition of "Health Care Operations," and I confirm that my request constitutes the "minimum necessary" data to accomplish these purposes. I Confirm I Decline ☐ Business Associate (BA) of HIPAA CE(s) in accordance with a valid HIPAA Business Associate Agreement that allows us to request individually identifiable health information (IIHI) for use in care coordination and quality work on behalf of the HIPAA CE(s). I need to use this information in my work for care coordination and quality improvement purposes that fall within the first and/or second paragraphs of the HIPAA Privacy Rule definition of "Health Care Operations" on behalf of the HIPAA CE(s), and I confirm that my request constitutes the "minimum necessary" data to accomplish these purposes. I Confirm I Decline ☐ Neither of the above or I do not know. Please contact the QRUR Help Desk at 1-888-734-6433 if you need further assistance. Exit to Overview screen

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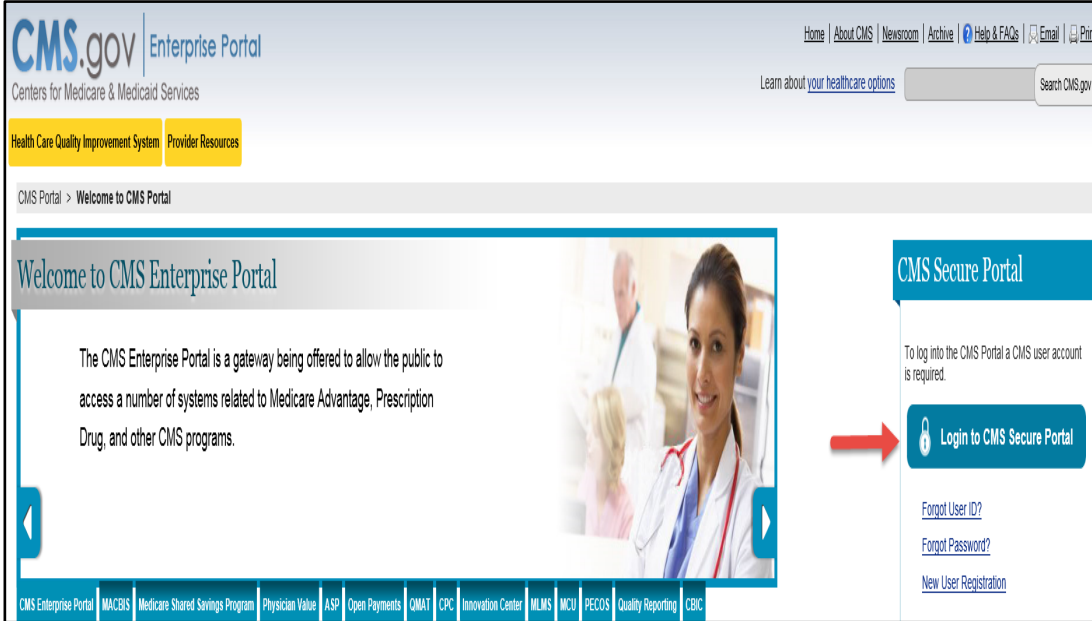
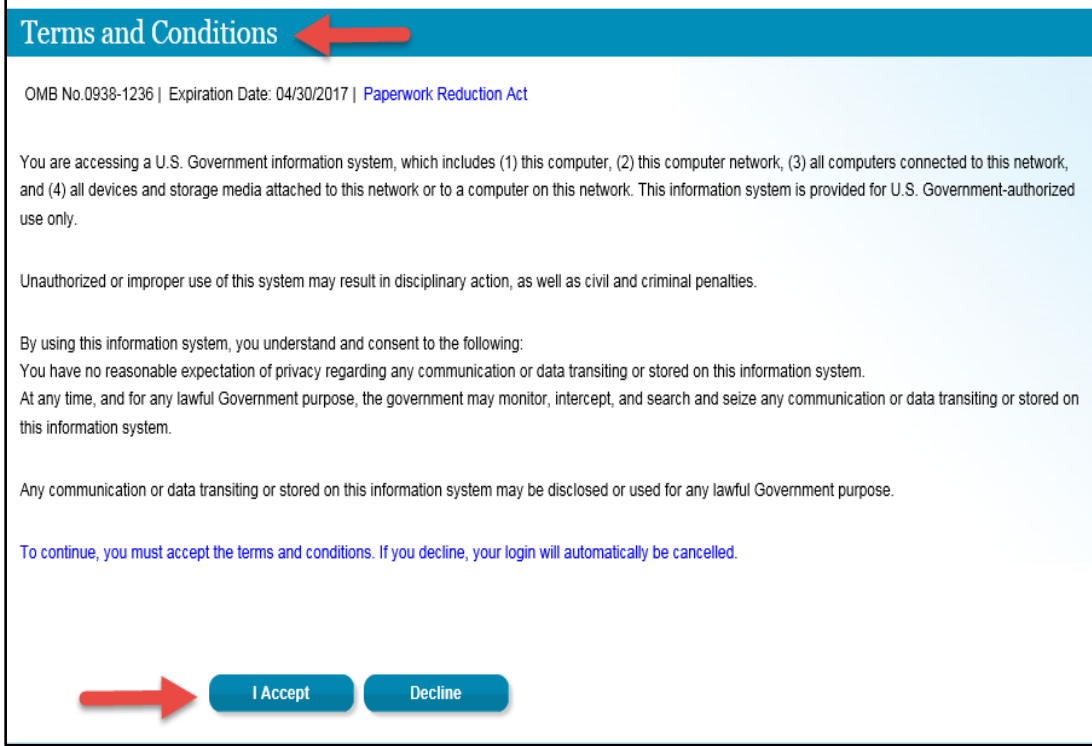
Steps	Screenshots
You are now in the MicroStrategy Web Platform. The screen shows the TIN(s) associated with your EIDM account. 11. Select <u>one</u> TIN from the Available TINs: - Select a TIN and either double-click the mouse or click on the Arrow button to move the TIN from Available to Selected. - You can also filter the list of Available TINs by entering the name or last 4 digits of a TIN in the Search for field. Note: Select only one TIN each time you attempt to retrieve a 2014 Annual QRUR. 12. Select Run Document. Note: You will need to wait several seconds while the system generates your 2014 Annual QRUR.	

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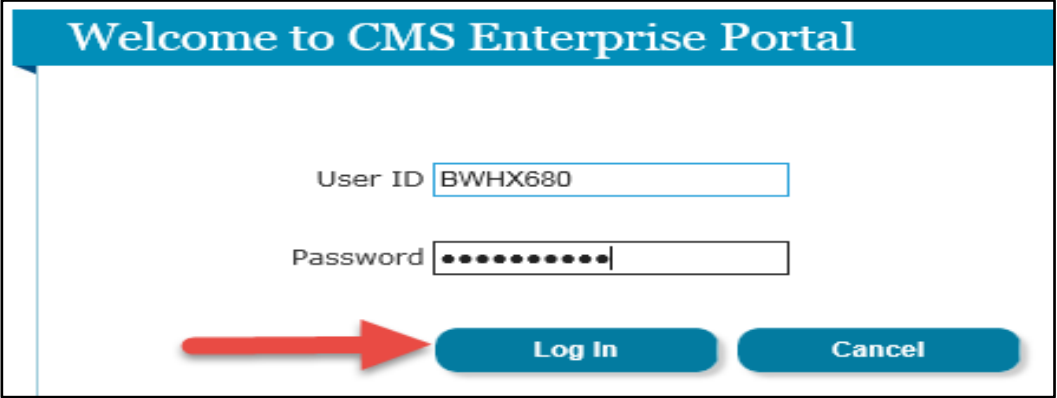
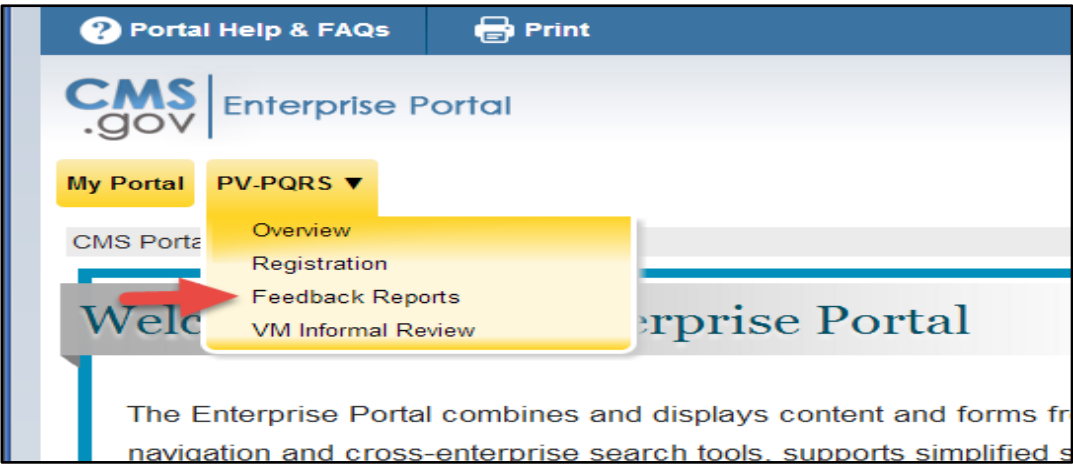
B. Access QRURs Directly from the CMS Secure Portal

This process will allow users to directly access the reports upon logging into the portal.

Steps	Screenshots
1. Go to https://portal.cms.gov and select Login to CMS Secure Portal. Note: The CMS Enterprise Portal supports the following internet browsers: - Internet Explorer 8 - Internet Explorer 9 - Internet Explorer 10 - Mozilla-Firefox - Chrome - Safari Enable JavaScript and adjust any browser zoom features to ensure you are not seeing the screen in too wide of a view.	
2. Read the Terms and Conditions and Select I Accept to continue. Note: If you select Decline, then you will be returned to the CMS Enterprise Portal Landing Screen.	

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Steps	Screenshots
3. Enter the following information and select Log In under Welcome to CMS Enterprise Portal: • EIDM User ID • EIDM Password	
4. Select the PV-PQRS tab at the top of the screen and then select Feedback Reports from the drop-down menu. <i>Note: You will be directed to the Multi-Factor Authentication (MFA) process each time you log in and attempt to access the Feedback Reports interface. 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. Upon selecting Log In, the Multi-Factor Authentication Terms and Conditions page will be displayed.</i>	

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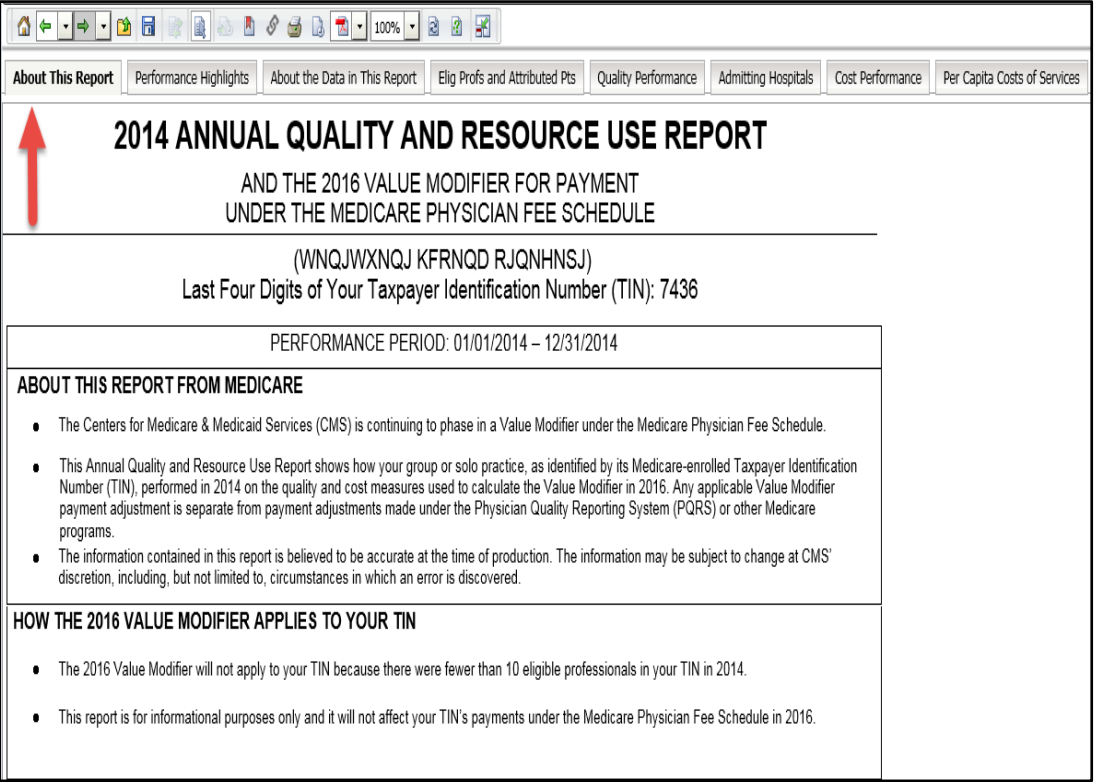
Steps	Screenshots
5. Enter the <i>EIDM User ID</i> and the <i>EIDM Password</i> on the Multi-Factor Authentication Login screen and select <i>Next</i>.	
6. Repeat Steps 5-12 of Section IV.A (How to Access QRURs via the PV Landing Portlet) of this guide to complete the MFA process.	

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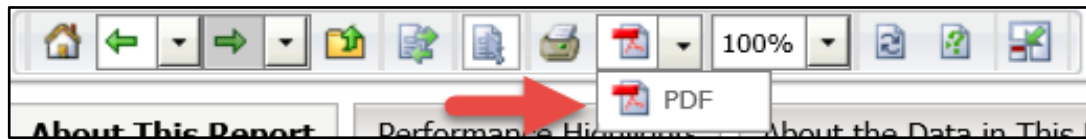
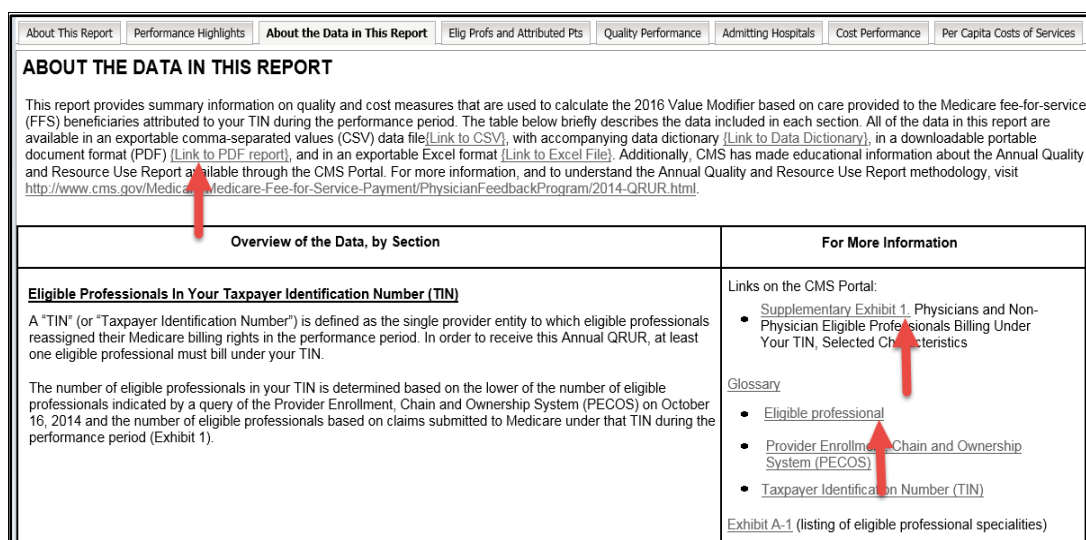
V. Navigating the Annual QRUR

A. Overview

Steps	Screenshots
The 2014 Annual QRUR contains the following sections: - About this Report - Performance Highlights - About the Data in This Report* - Elig Profs and Attributed Pts - Quality Performance* - Admitting Hospitals - Cost Performance - Per Capita Costs of Services* *Additional information about these sections is provided in Section V. Navigating the Annual QRUR (B, C and D) - Select any of the section tabs at the top of the screen to navigate to different sections of the 2014 Annual QRUR. Note: After you select a section tab, you will need to wait several seconds for the section to appear on the screen. Note: If your TIN is not receiving a full QRUR report, then you will see information on the About this Report tab only. The remaining tabs will not display any information.	

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Steps	Screenshots																												
2. Use the buttons on the Toolbar at the top of the report to navigate within the MicroStrategy Web Platform. <i>Note: Ensure that the Zoom setting in the MicroStrategy Toolbar is set to 100%; otherwise, the report may not appear in the correct format.</i>	 <table border="1"> <thead> <tr> <th>Report Menu Bar icon</th><th>Description</th></tr> </thead> <tbody> <tr> <td></td><td>Navigate to the Report Home screen.</td></tr> <tr> <td></td><td>Navigate backward to the previous report section.</td></tr> <tr> <td></td><td>Navigate forward to the next report section.</td></tr> <tr> <td></td><td>To Browse Parent folder</td></tr> <tr> <td></td><td>Close the report</td></tr> <tr> <td></td><td>Save report in Report folder in MicroStrategy</td></tr> <tr> <td></td><td>To view the report in express mode</td></tr> <tr> <td></td><td>To view the report in interactive mode</td></tr> <tr> <td></td><td>Print report</td></tr> <tr> <td></td><td>Adjust page size</td></tr> <tr> <td></td><td>Refresh Page</td></tr> <tr> <td></td><td>Re-prompt</td></tr> <tr> <td></td><td>Reset selection</td></tr> </tbody> </table>	Report Menu Bar icon	Description		Navigate to the Report Home screen.		Navigate backward to the previous report section.		Navigate forward to the next report section.		To Browse Parent folder		Close the report		Save report in Report folder in MicroStrategy		To view the report in express mode		To view the report in interactive mode		Print report		Adjust page size		Refresh Page		Re-prompt		Reset selection
Report Menu Bar icon	Description																												
	Navigate to the Report Home screen.																												
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	To Browse Parent folder																												
	Close the report																												
	Save report in Report folder in MicroStrategy																												
	To view the report in express mode																												
	To view the report in interactive mode																												
	Print report																												
	Adjust page size																												
	Refresh Page																												
	Re-prompt																												
	Reset selection																												
3. Select the PDF icon on the MicroStrategy Web Platform toolbar to convert the page shown on the screen to PDF.																													
4. Select the hyperlinks provided within the 2014 Annual QRUR to navigate to the designated information or to access external websites. <i>Note: The screenshot illustrates an example of internal hyperlinks and links to external websites. The links that appear in the report are only active while reviewing the report within MicroStrategy Web Platform.</i>																													

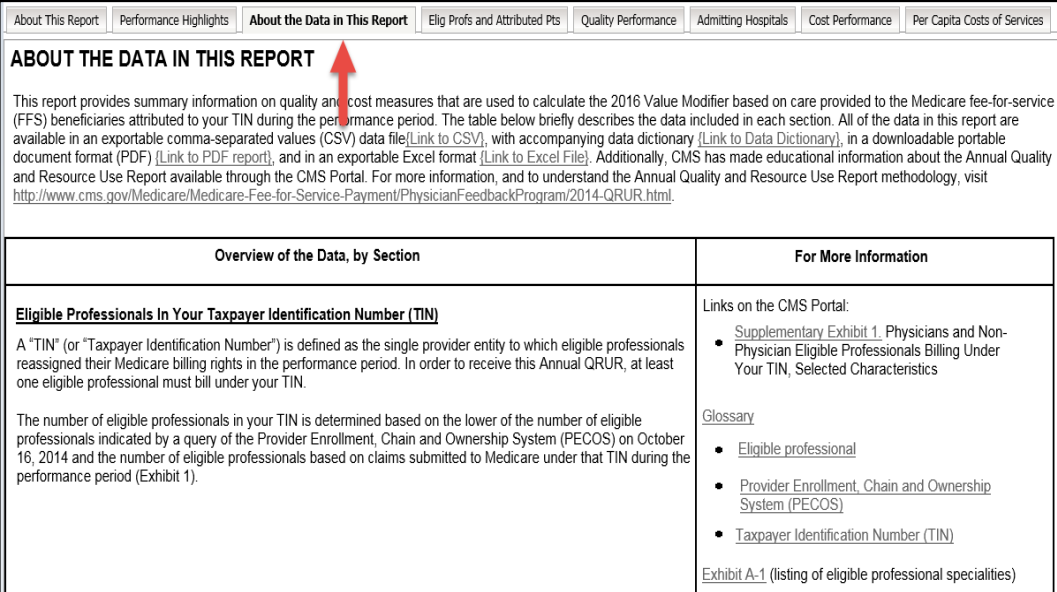
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B. About the Data in This Report

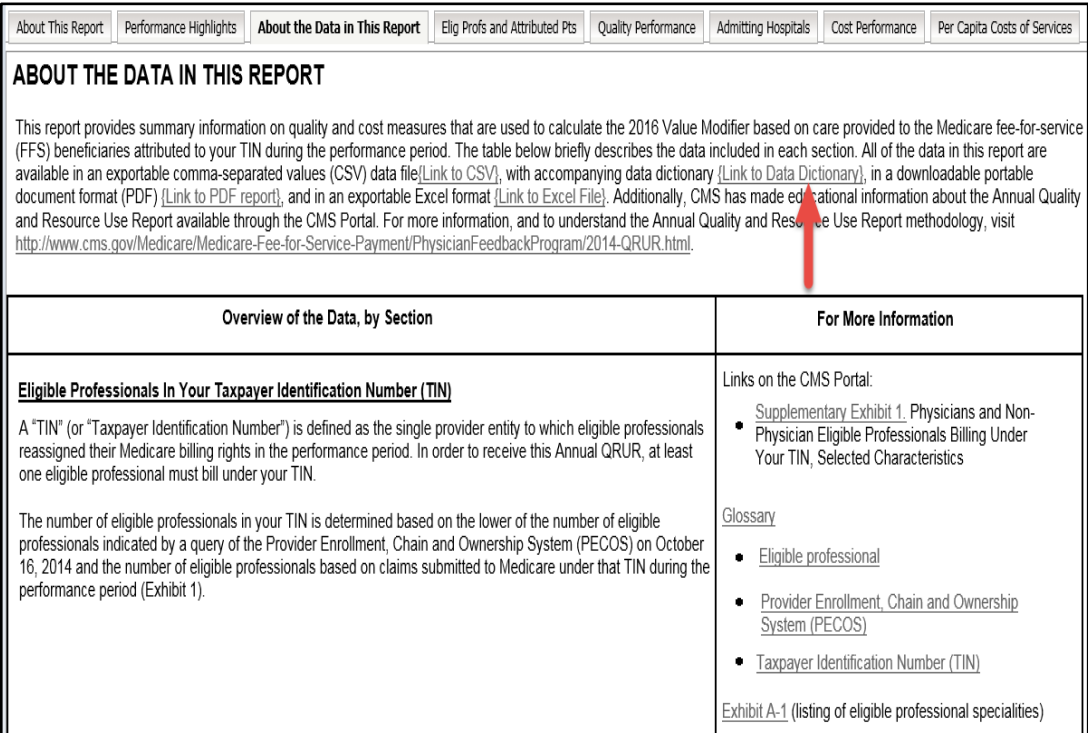
The **About the Data in This Report** section of the 2014 Annual QRUR provides summary information about the data and methodology used to compute the quality and cost measures that are included in the report. This section of the report also includes links to perform the following tasks:

1. Download/Print the 2014 Annual QRUR data to a CSV File
2. Access to a data dictionary to supplement the 2014 Annual QRUR Data CSV File
3. Download/Print the 2014 Annual QRUR to a PDF File
4. Download/Print the 2014 Annual QRUR to a Microsoft Excel (XLS) File
5. Generate 2014 Annual QRUR Supplementary Exhibits
6. Access to view or print the 2014 Annual QRUR Glossary
7. Access to view or print a listing of provider specialties associated with Eligible Professional and Physician

Steps	Screenshots
1. Select the About the Data in This Report tab to view the information provided in this section.	

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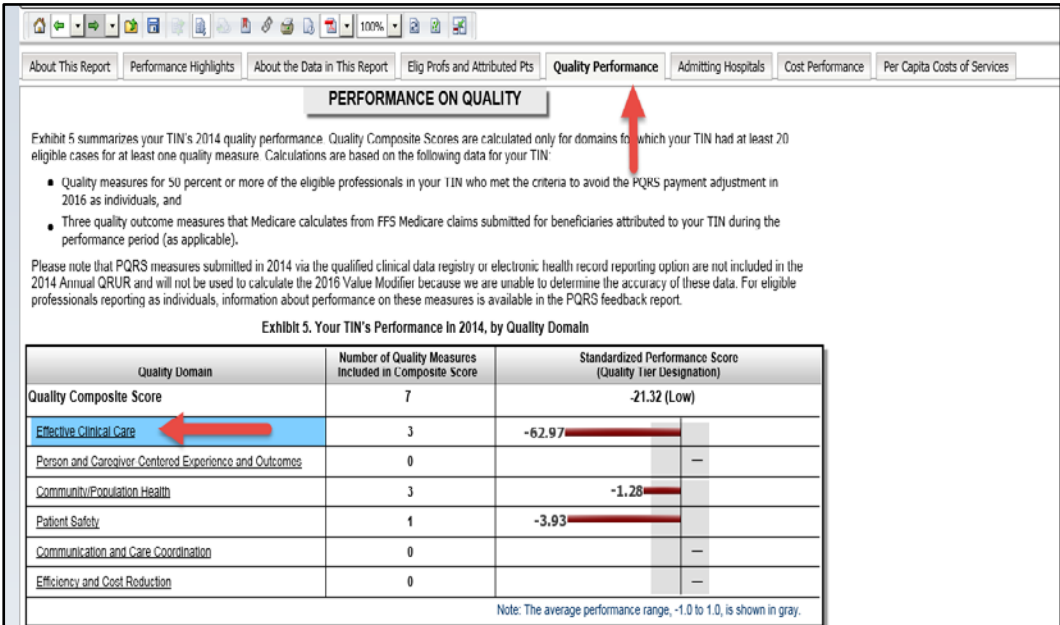
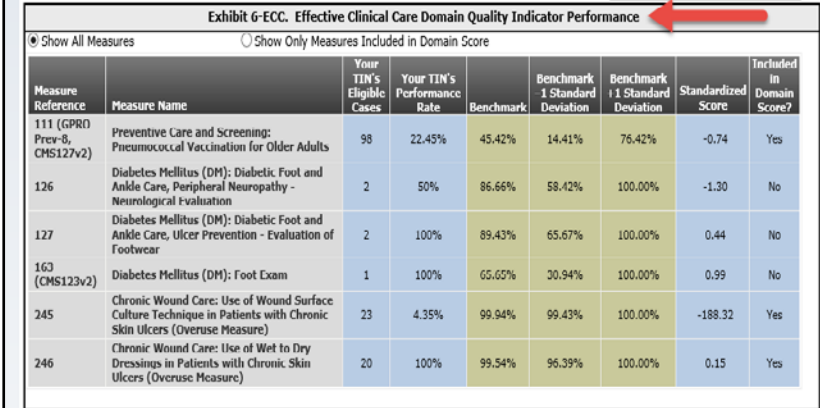
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Steps	Screenshots
2. Scroll through the sections of the table displayed to learn about the various data and methodologies used to calculate the quality and cost measures that are included in the 2014 Annual QRUR. 3. Select the applicable link to perform a desired function.	

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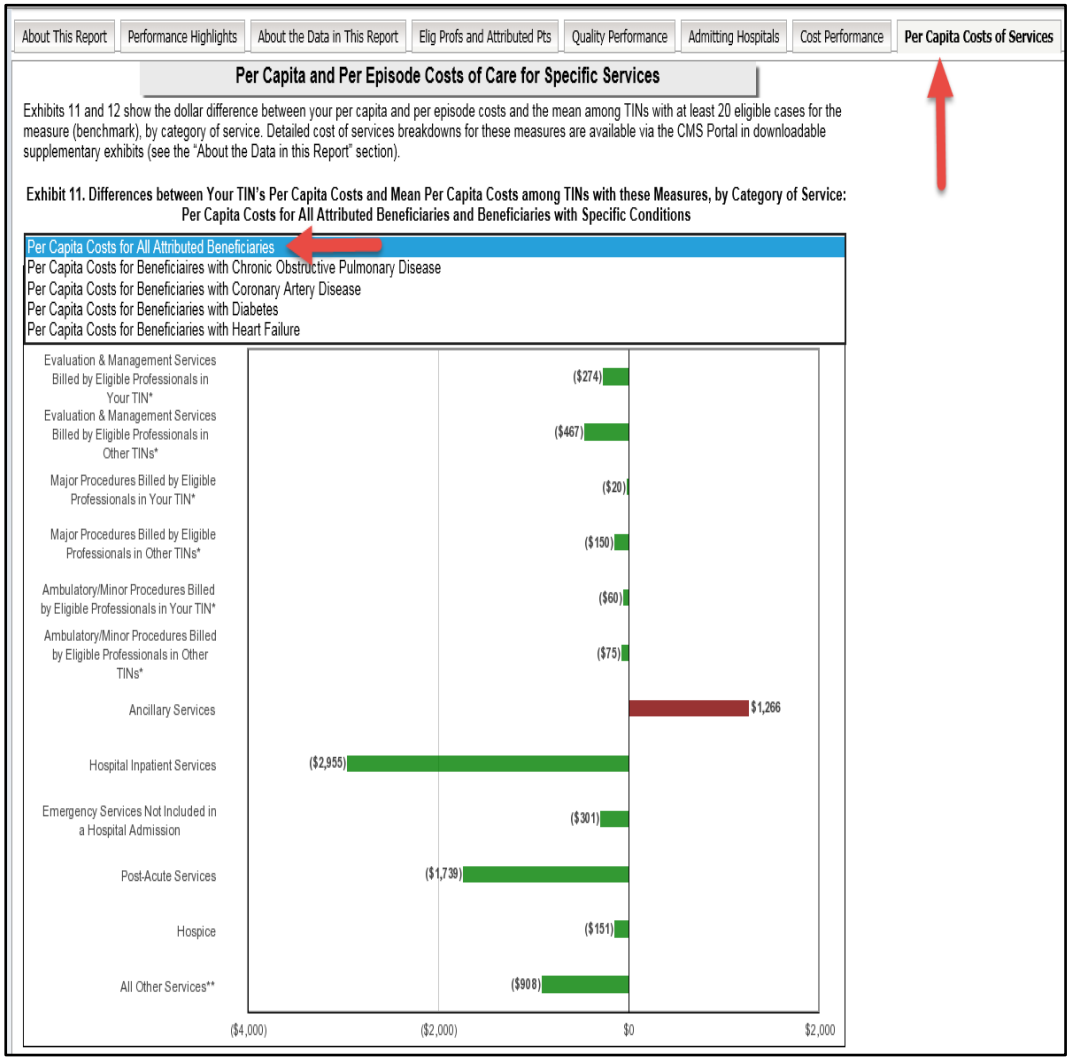
C. Quality Performance

Steps	Screenshots																																																																																							
1. Select the Quality Performance tab to view the information provided in this section. 2. Select the Quality Domain links in Exhibit 5 to view the measures reported by your TIN that are part of the domain: - Effective Clinical Care - Person and Caregiver-Centered Experience and Outcomes - Community/Population Health - Patient Safety - Communication and Care Coordination - Efficiency and Cost Reduction 3. In Exhibit 6, select one of the following to change the view option: - Show All Measures - Show Only Measure Included in Domain Score	 PERFORMANCE ON QUALITY Exhibit 5 summarizes your TIN's 2014 quality performance. Quality Composite Scores are calculated only for domains for which your TIN had at least 20 eligible cases for at least one quality measure. Calculations are based on the following data for your TIN: - Quality measures for 50 percent or more of the eligible professionals in your TIN who met the criteria to avoid the PQRS payment adjustment in 2016 as individuals, and - Three quality outcome measures that Medicare calculates from FFS Medicare claims submitted for beneficiaries attributed to your TIN during the performance period (as applicable). Please note that PQRS measures submitted in 2014 via the qualified clinical data registry or electronic health record reporting option are not included in the 2014 Annual QRUR and will not be used to calculate the 2016 Value Modifier because we are unable to determine the accuracy of these data. For eligible professionals reporting as individuals, information about performance on these measures is available in the PQRS feedback report. Exhibit 5. Your TIN's Performance in 2014, by Quality Domain <table><tr><th>Quality Domain</th><th>Number of Quality Measures Included in Composite Score</th><th>Standardized Performance Score (Quality Tier Designation)</th></tr><tr><td>Quality Composite Score</td><td>7</td><td>-21.32 (Low)</td></tr><tr><td>Effective Clinical Care</td><td>3</td><td>-62.97</td></tr><tr><td>Person and Caregiver-Centered Experience and Outcomes</td><td>0</td><td>—</td></tr><tr><td>Community/Population Health</td><td>3</td><td>-1.28</td></tr><tr><td>Patient Safety</td><td>1</td><td>-3.93</td></tr><tr><td>Communication and Care Coordination</td><td>0</td><td>—</td></tr><tr><td>Efficiency and Cost Reduction</td><td>0</td><td>—</td></tr></table> Note: The average performance range, -1.0 to 1.0, is shown in gray.  Exhibit 6-ECC. Effective Clinical Care Domain Quality Indicator Performance ☒ Show All Measures ☐ Show Only Measures Included in Domain Score <table><tr><th>Measure Reference</th><th>Measure Name</th><th>Your TIN's Eligible Cases</th><th>Your TIN's Performance Rate</th><th>Benchmark</th><th>Benchmark + 1 Standard Deviation</th><th>Benchmark - 1 Standard Deviation</th><th>Standardized Score</th><th>Included in Domain Score?</th></tr><tr><td>111 (GPR0 Prev-6, CMS127v2)</td><td>Preventive Care and Screening: Pneumococcal Vaccination for Older Adults</td><td>98</td><td>22.45%</td><td>45.42%</td><td>14.41%</td><td>76.42%</td><td>-0.74</td><td>Yes</td></tr><tr><td>126</td><td>Diabetes Mellitus (DM): Diabetic Foot and Ankle Care, Peripheral Neuropathy - Neurological Evaluation</td><td>2</td><td>50%</td><td>86.66%</td><td>58.42%</td><td>100.00%</td><td>-1.30</td><td>No</td></tr><tr><td>127</td><td>Diabetes Mellitus (DM): Diabetic Foot and Ankle Care, Ulcer Prevention - Evaluation of Footwear</td><td>2</td><td>100%</td><td>89.43%</td><td>65.67%</td><td>100.00%</td><td>0.44</td><td>No</td></tr><tr><td>163 (CMS123v2)</td><td>Diabetes Mellitus (DM): Foot Exam</td><td>1</td><td>100%</td><td>65.65%</td><td>30.94%</td><td>100.00%</td><td>0.99</td><td>No</td></tr><tr><td>245</td><td>Chronic Wound Care: Use of Wound Surface Culture Technique in Patients with Chronic Skin Ulcers (Overuse Measure)</td><td>23</td><td>4.35%</td><td>99.94%</td><td>99.43%</td><td>100.00%</td><td>-188.32</td><td>Yes</td></tr><tr><td>246</td><td>Chronic Wound Care: Use of Wet to Dry Dressings in Patients with Chronic Skin Ulcers (Overuse Measure)</td><td>20</td><td>100%</td><td>99.54%</td><td>96.39%</td><td>100.00%</td><td>0.15</td><td>Yes</td></tr></table>	Quality Domain	Number of Quality Measures Included in Composite Score	Standardized Performance Score (Quality Tier Designation)	Quality Composite Score	7	-21.32 (Low)	Effective Clinical Care	3	-62.97	Person and Caregiver-Centered Experience and Outcomes	0	—	Community/Population Health	3	-1.28	Patient Safety	1	-3.93	Communication and Care Coordination	0	—	Efficiency and Cost Reduction	0	—	Measure Reference	Measure Name	Your TIN's Eligible Cases	Your TIN's Performance Rate	Benchmark	Benchmark + 1 Standard Deviation	Benchmark - 1 Standard Deviation	Standardized Score	Included in Domain Score?	111 (GPR0 Prev-6, CMS127v2)	Preventive Care and Screening: Pneumococcal Vaccination for Older Adults	98	22.45%	45.42%	14.41%	76.42%	-0.74	Yes	126	Diabetes Mellitus (DM): Diabetic Foot and Ankle Care, Peripheral Neuropathy - Neurological Evaluation	2	50%	86.66%	58.42%	100.00%	-1.30	No	127	Diabetes Mellitus (DM): Diabetic Foot and Ankle Care, Ulcer Prevention - Evaluation of Footwear	2	100%	89.43%	65.67%	100.00%	0.44	No	163 (CMS123v2)	Diabetes Mellitus (DM): Foot Exam	1	100%	65.65%	30.94%	100.00%	0.99	No	245	Chronic Wound Care: Use of Wound Surface Culture Technique in Patients with Chronic Skin Ulcers (Overuse Measure)	23	4.35%	99.94%	99.43%	100.00%	-188.32	Yes	246	Chronic Wound Care: Use of Wet to Dry Dressings in Patients with Chronic Skin Ulcers (Overuse Measure)	20	100%	99.54%	96.39%	100.00%	0.15	Yes
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Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

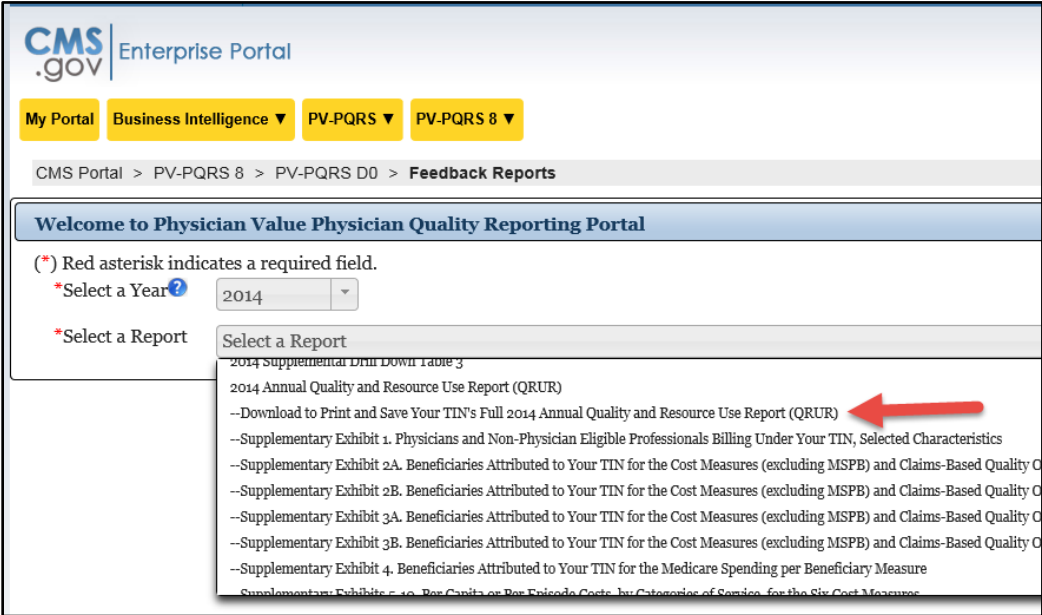
D. Per Capita Costs of Services

Steps	Screenshots																										
1. Select the Per Capita Costs of Services tab to view the dollar difference between your TIN's per capita and per episode costs and other TINs for specific types of services. 2. In Exhibit 11, select the measures from the drop-down menu to view the differences between your TIN's per capita costs and mean per capita cost among other TINs.	 The screenshot displays the CMS Physician Value Report interface. At the top, there is a navigation bar with tabs: 'About This Report', 'Performance Highlights', 'About the Data in This Report', 'Elig Profs and Attributed Pts', 'Quality Performance', 'Admitting Hospitals', 'Cost Performance', and 'Per Capita Costs of Services'. The 'Per Capita Costs of Services' tab is selected, indicated by a red arrow. Below the navigation bar, the title 'Per Capita and Per Episode Costs of Care for Specific Services' is shown. A text block explains that Exhibits 11 and 12 show the dollar difference between your per capita and per episode costs and the mean among TINs with at least 20 eligible cases for the measure (benchmark), by category of service. Below this, the title 'Exhibit 11. Differences between Your TIN's Per Capita Costs and Mean Per Capita Costs among TINs with these Measures, by Category of Service: Per Capita Costs for All Attributed Beneficiaries and Beneficiaries with Specific Conditions' is displayed. A dropdown menu is open, showing options: 'Per Capita Costs for All Attributed Beneficiaries' (selected), 'Per Capita Costs for Beneficiaries with Chronic Obstructive Pulmonary Disease', 'Per Capita Costs for Beneficiaries with Coronary Artery Disease', 'Per Capita Costs for Beneficiaries with Diabetes', and 'Per Capita Costs for Beneficiaries with Heart Failure'. Below the dropdown, a horizontal bar chart shows the differences for various service categories. The x-axis ranges from (\$4,000) to \$2,000. The y-axis lists service categories. The bars are green for negative differences and red for positive differences. The values are: Evaluation & Management Services Billed by Eligible Professionals in Your TIN* (\$274), Evaluation & Management Services Billed by Eligible Professionals in Other TINs* (\$467), Major Procedures Billed by Eligible Professionals in Your TIN* (\$20), Major Procedures Billed by Eligible Professionals in Other TINs* (\$150), Ambulatory/Minor Procedures Billed by Eligible Professionals in Your TIN* (\$60), Ambulatory/Minor Procedures Billed by Eligible Professionals in Other TINs* (\$75), Ancillary Services (\$1,266), Hospital Inpatient Services (\$2,955), Emergency Services Not Included in a Hospital Admission (\$301), Post-Acute Services (\$1,739), Hospice (\$151), and All Other Services** (\$908). <table border="1"> <thead> <tr> <th>Service Category</th> <th>Difference (\$)</th> </tr> </thead> <tbody> <tr> <td>Evaluation & Management Services Billed by Eligible Professionals in Your TIN*</td> <td>(\$274)</td> </tr> <tr> <td>Evaluation & Management Services Billed by Eligible Professionals in Other TINs*</td> <td>(\$467)</td> </tr> <tr> <td>Major Procedures Billed by Eligible Professionals in Your TIN*</td> <td>(\$20)</td> </tr> <tr> <td>Major Procedures Billed by Eligible Professionals in Other TINs*</td> <td>(\$150)</td> </tr> <tr> <td>Ambulatory/Minor Procedures Billed by Eligible Professionals in Your TIN*</td> <td>(\$60)</td> </tr> <tr> <td>Ambulatory/Minor Procedures Billed by Eligible Professionals in Other TINs*</td> <td>(\$75)</td> </tr> <tr> <td>Ancillary Services</td> <td>\$1,266</td> </tr> <tr> <td>Hospital Inpatient Services</td> <td>(\$2,955)</td> </tr> <tr> <td>Emergency Services Not Included in a Hospital Admission</td> <td>(\$301)</td> </tr> <tr> <td>Post-Acute Services</td> <td>(\$1,739)</td> </tr> <tr> <td>Hospice</td> <td>(\$151)</td> </tr> <tr> <td>All Other Services**</td> <td>(\$908)</td> </tr> </tbody> </table>	Service Category	Difference (\$)	Evaluation & Management Services Billed by Eligible Professionals in Your TIN*	(\$274)	Evaluation & Management Services Billed by Eligible Professionals in Other TINs*	(\$467)	Major Procedures Billed by Eligible Professionals in Your TIN*	(\$20)	Major Procedures Billed by Eligible Professionals in Other TINs*	(\$150)	Ambulatory/Minor Procedures Billed by Eligible Professionals in Your TIN*	(\$60)	Ambulatory/Minor Procedures Billed by Eligible Professionals in Other TINs*	(\$75)	Ancillary Services	\$1,266	Hospital Inpatient Services	(\$2,955)	Emergency Services Not Included in a Hospital Admission	(\$301)	Post-Acute Services	(\$1,739)	Hospice	(\$151)	All Other Services**	(\$908)
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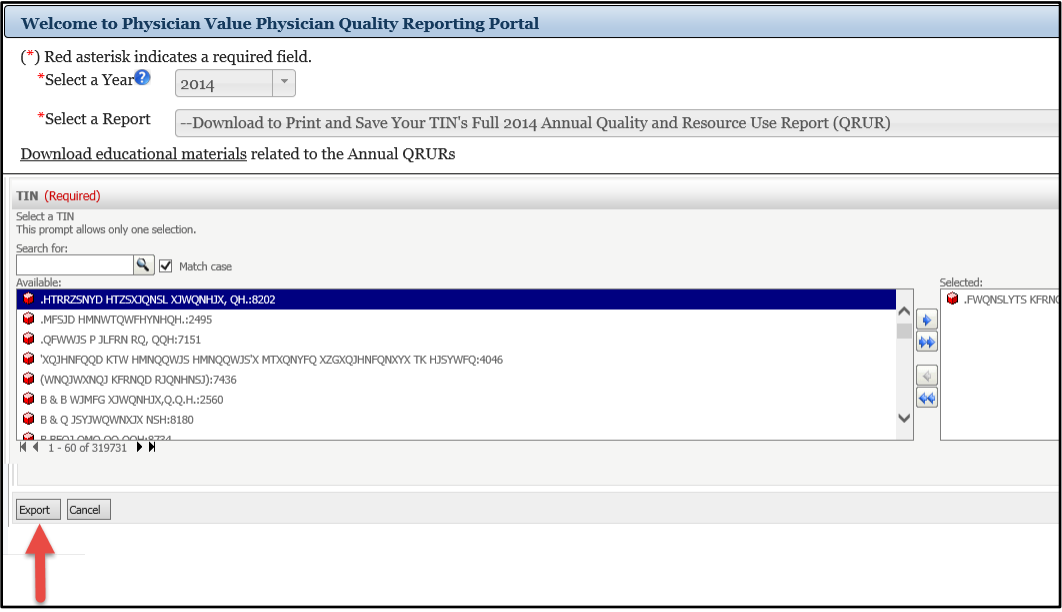
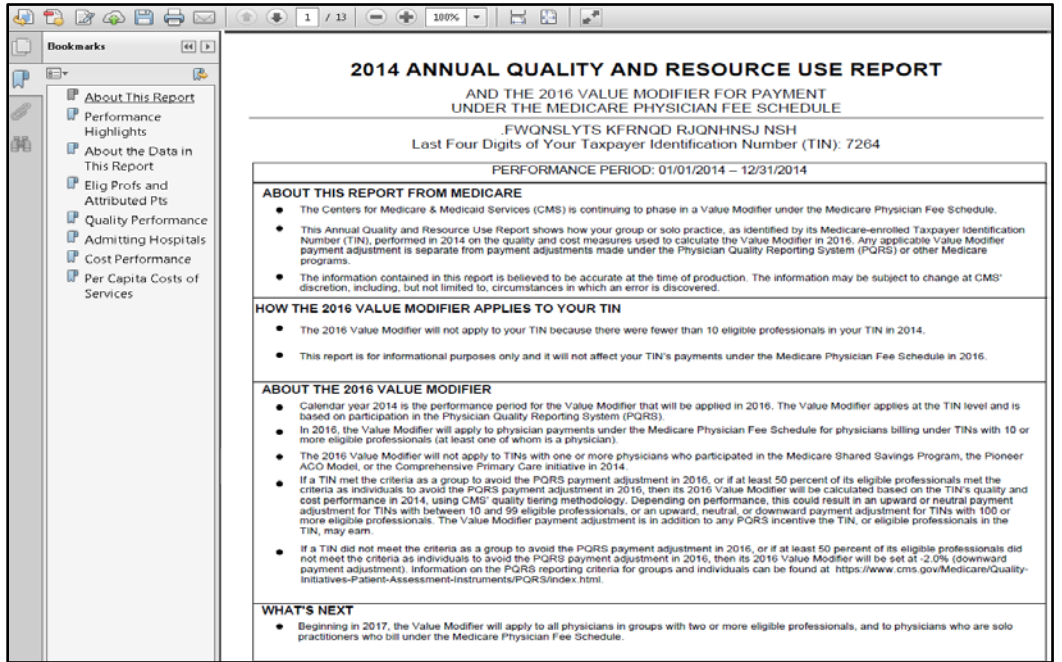
Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

VI. Download Full 2014 Annual QRUR

Steps	Screenshots
1. Repeat Steps 1-7 of Section IV.A (How to Access via PV-Landing Portlet) or Steps 1-6 of Section IV.B (Access via Directly Logging into CMS Secure Portal) of this guide.	
2. Select Download to Print and Save Your TIN's Full 2014 Annual Quality and Resource Use Report (QRUR) from the Select a Report drop-down menu to export the full report into PDF file.	 The screenshot shows the CMS Enterprise Portal interface. At the top, there are navigation tabs: 'My Portal', 'Business Intelligence', 'PV-PQRS', and 'PV-PQRS 8'. Below these, a breadcrumb trail reads: 'CMS Portal > PV-PQRS 8 > PV-PQRS D0 > Feedback Reports'. The main heading is 'Welcome to Physician Value Physician Quality Reporting Portal'. Below this, there are two required fields: '*Select a Year' (with a dropdown set to 2014) and '*Select a Report' (with a dropdown menu open). The dropdown menu lists several options, including '2014 Annual Quality and Resource Use Report (QRUR)' and 'Download to Print and Save Your TIN's Full 2014 Annual Quality and Resource Use Report (QRUR)'. A red arrow points to the latter option, which is the one to be selected according to the instructions.

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps	Screenshots
3. Repeat steps 9-11 Section IV.A (Access the 2014 Annual QRUR) of this guide. 4. Select Export to open the report in PDF format.	
The 2014 Annual QRUR is displayed in PDF format. Note: Use the standard Adobe features to Save, Open, and Print content of the PDF file.	

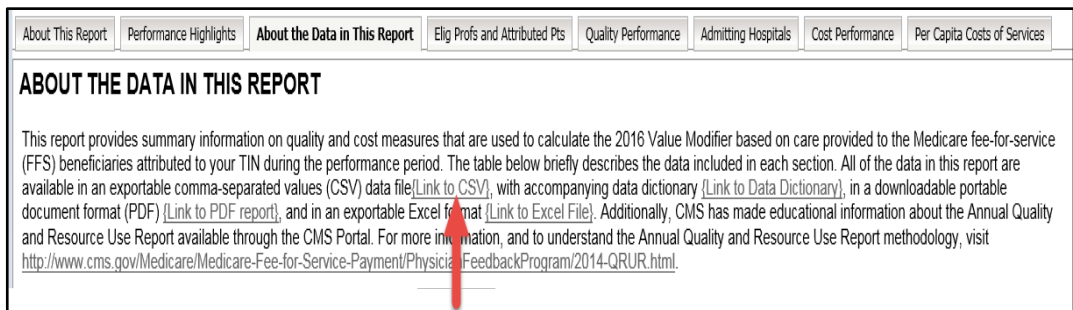
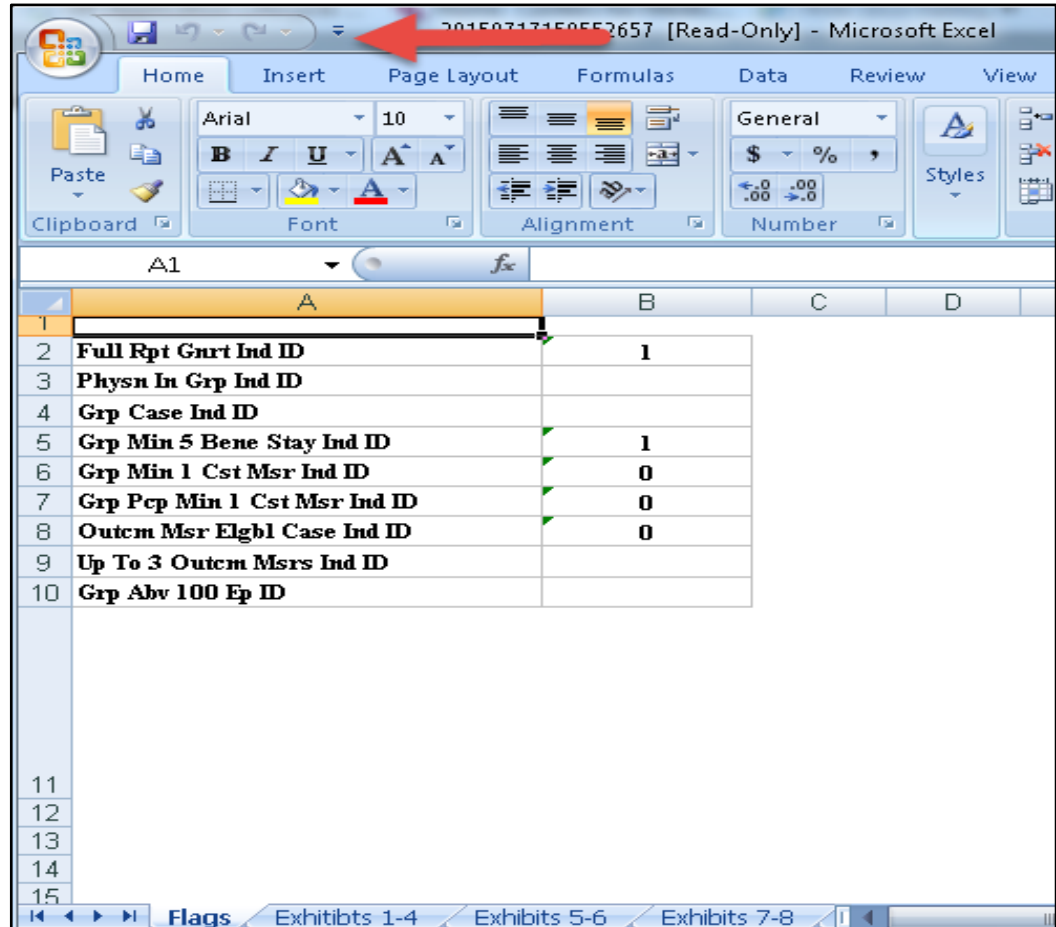
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Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

VII. Export the 2014 Annual QRUR

A. CSV File Format

All of the data in your TIN's 2014 Annual QRUR are available in an exportable CSV file. Refer to the **About the Data in This Report / Section V -D, Step 2** of this guide and follow the steps below:

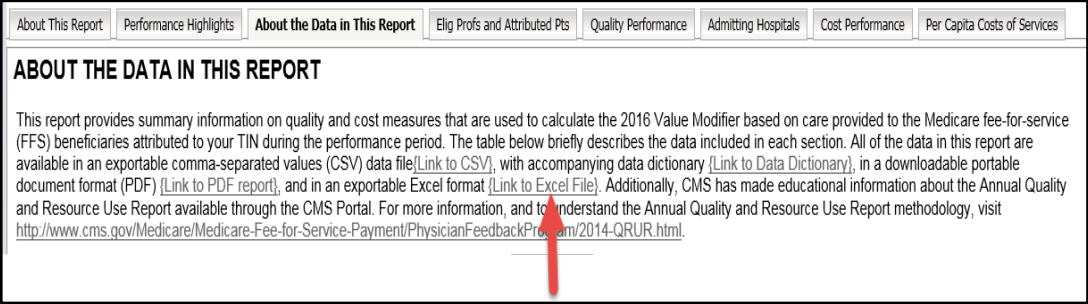
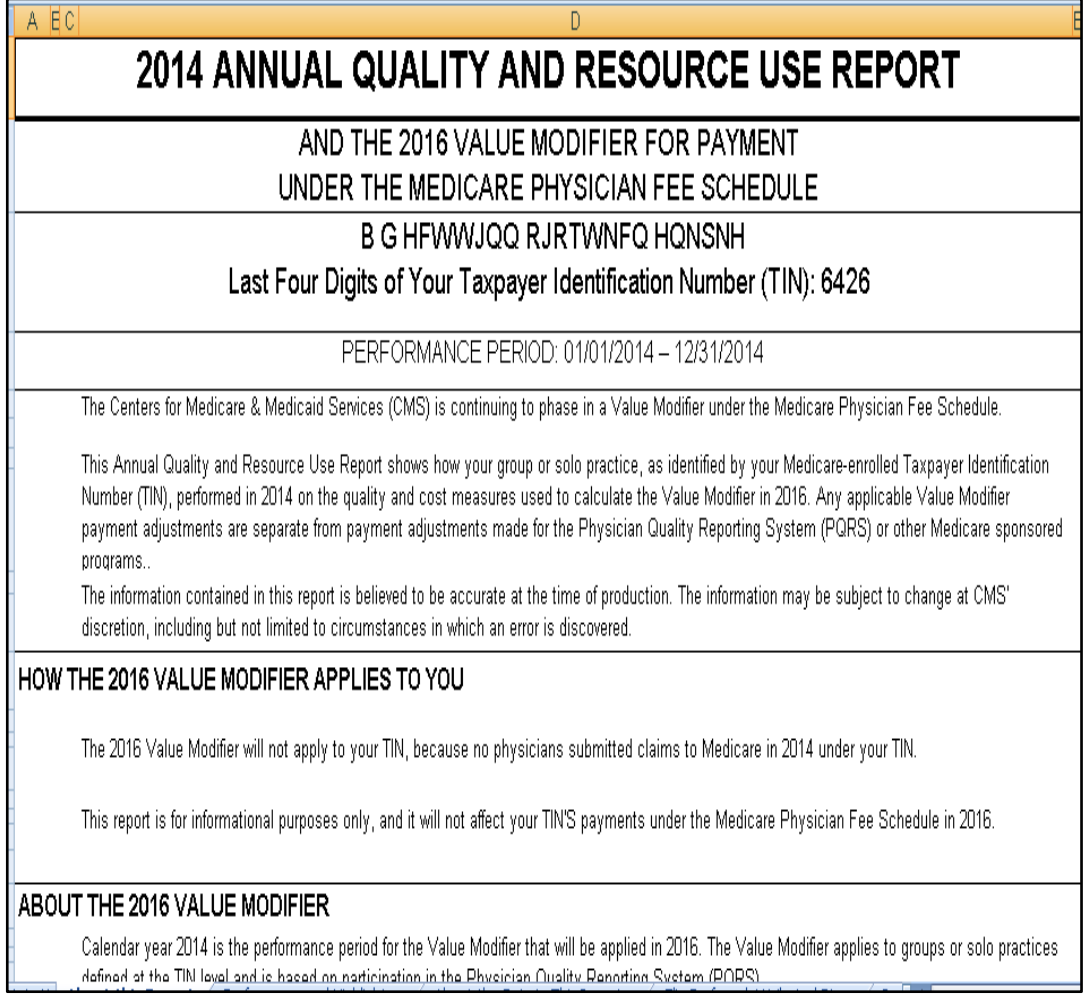
Steps	Screenshots																														
1. Select the text (link to CSV file) in the About the Data in This Report section to export the data in CSV format.																															
The 2014 Annual QRUR data is exported to .CSV format. 2. Use Excel tools to Print or Save the file. <i>Note: The data dictionary supplements the CSV file and is available on the CMS.gov website at: http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html.</i>	 <table><tr><th></th><th>A</th><th>B</th></tr><tr><td>2</td><td>Full Rpt Gurt Ind ID</td><td>1</td></tr><tr><td>3</td><td>Physn In Grp Ind ID</td><td></td></tr><tr><td>4</td><td>Grp Case Ind ID</td><td></td></tr><tr><td>5</td><td>Grp Min 5 Bene Stay Ind ID</td><td>1</td></tr><tr><td>6</td><td>Grp Min 1 Cst Msr Ind ID</td><td>0</td></tr><tr><td>7</td><td>Grp Pcp Min 1 Cst Msr Ind ID</td><td>0</td></tr><tr><td>8</td><td>Outcm Msr Elghl Case Ind ID</td><td>0</td></tr><tr><td>9</td><td>Up To 3 Outcm Msrs Ind ID</td><td></td></tr><tr><td>10</td><td>Grp Abv 100 Ep ID</td><td></td></tr></table>		A	B	2	Full Rpt Gurt Ind ID	1	3	Physn In Grp Ind ID		4	Grp Case Ind ID		5	Grp Min 5 Bene Stay Ind ID	1	6	Grp Min 1 Cst Msr Ind ID	0	7	Grp Pcp Min 1 Cst Msr Ind ID	0	8	Outcm Msr Elghl Case Ind ID	0	9	Up To 3 Outcm Msrs Ind ID		10	Grp Abv 100 Ep ID	
	A	B																													
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Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

B. Excel File Format (About the Data in This Report Section)

The 2014 Annual QRUR is available in an exportable downloadable Microsoft Excel format. Refer to the **About the Data in This Report / Section V - D, Step 2** of this guide and follow the steps below:

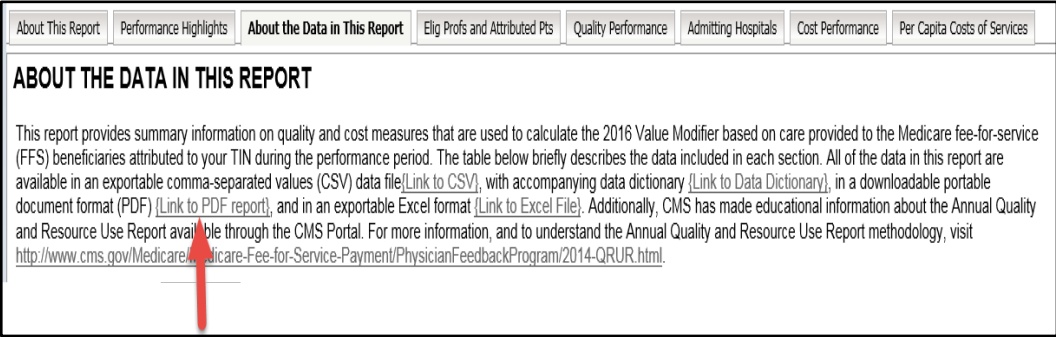
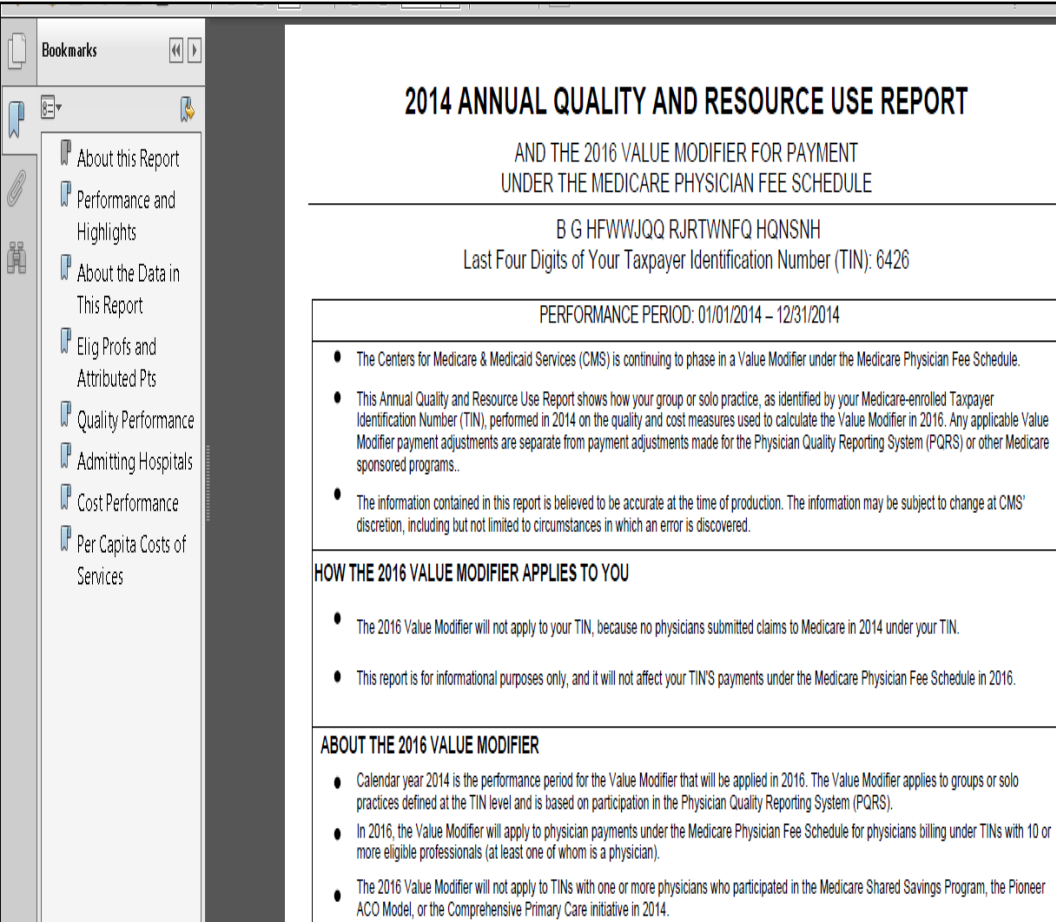
Steps	Screenshots
1. Select the text (Link to Excel File) in the About the Data in This Report section to export the report in Excel format.	
The 2014 Annual QRUR is exported to Excel format. Note: Use the Microsoft Excel toolbar features to Save and/or Print the Annual QRUR. Note: When you export your report using the links provided in the About the Data in This Report section the exported file will appear in a different format than how the report is displayed on the MicroStrategy Web Platform.	

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

C. PDF File (About the Data in This Report Section)

The 2014 Annual QRUR is available in an exportable PDF format. Refer to the **About the Data in This Report / Section V - D, Step 2** of this guide and follow the steps below:

Steps	Screenshots
1. Select the text (Link to PDF report) in the About the Data in This Report section to export the report in PDF format.	 ABOUT THE DATA IN THIS REPORT This report provides summary information on quality and cost measures that are used to calculate the 2016 Value Modifier based on care provided to the Medicare fee-for-service (FFS) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data included in each section. All of the data in this report are available in an exportable comma-separated values (CSV) data file (Link to CSV), with accompanying data dictionary (Link to Data Dictionary), in a downloadable portable document format (PDF) (Link to PDF report), and in an exportable Excel format (Link to Excel File). Additionally, CMS has made educational information about the Annual Quality and Resource Use Report available through the CMS Portal. For more information, and to understand the Annual Quality and Resource Use Report methodology, visit http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html.
The 2014 Annual QRUR is exported to PDF format. Note: Use the standard Adobe features to Save, Open, and Print content of the PDF file. Note: When you export your report using the links provided on the About the Data in This Report section, the exported file will appear in a different format than how the report is displayed on the MicroStrategy Web Platform.	 2014 ANNUAL QUALITY AND RESOURCE USE REPORT AND THE 2016 VALUE MODIFIER FOR PAYMENT UNDER THE MEDICARE PHYSICIAN FEE SCHEDULE B G HFWWJQQ RJRTWNFQ HQNSNH Last Four Digits of Your Taxpayer Identification Number (TIN): 6426 PERFORMANCE PERIOD: 01/01/2014 – 12/31/2014 - The Centers for Medicare & Medicaid Services (CMS) is continuing to phase in a Value Modifier under the Medicare Physician Fee Schedule. - This Annual Quality and Resource Use Report shows how your group or solo practice, as identified by your Medicare-enrolled Taxpayer Identification Number (TIN), performed in 2014 on the quality and cost measures used to calculate the Value Modifier in 2016. Any applicable Value Modifier payment adjustments are separate from payment adjustments made for the Physician Quality Reporting System (PQRS) or other Medicare sponsored programs. - The information contained in this report is believed to be accurate at the time of production. The information may be subject to change at CMS' discretion, including but not limited to circumstances in which an error is discovered. HOW THE 2016 VALUE MODIFIER APPLIES TO YOU - The 2016 Value Modifier will not apply to your TIN, because no physicians submitted claims to Medicare in 2014 under your TIN. - This report is for informational purposes only, and it will not affect your TIN's payments under the Medicare Physician Fee Schedule in 2016. ABOUT THE 2016 VALUE MODIFIER - Calendar year 2014 is the performance period for the Value Modifier that will be applied in 2016. The Value Modifier applies to groups or solo practices defined at the TIN level and is based on participation in the Physician Quality Reporting System (PQRS). - In 2016, the Value Modifier will apply to physician payments under the Medicare Physician Fee Schedule for physicians billing under TINs with 10 or more eligible professionals (at least one of whom is a physician). - The 2016 Value Modifier will not apply to TINs with one or more physicians who participated in the Medicare Shared Savings Program, the Pioneer ACO Model, or the Comprehensive Primary Care initiative in 2014.

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

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VIII. Download the 2014 Annual QRUR Educational and Outreach (E&O) Materials

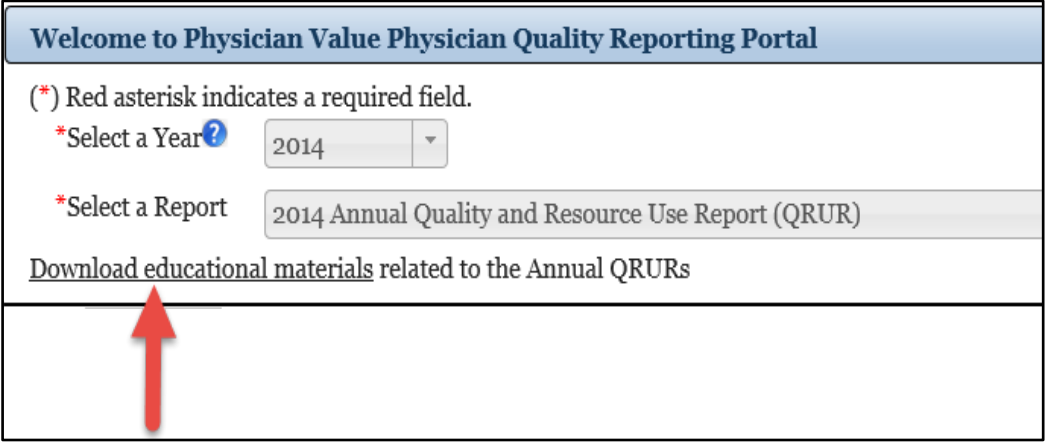
The following educational materials related to the **2014 Annual QRUR** are available to view and/or print through the CMS Portal:

- About the Data In This Report: Detailed information about the data used in the report
- Exhibit A-1: List of Specialties Associated with Eligible Professional, Physician, and Provider Stratification Categories
- Glossary: List of terms found within the report
- Notes and Hover-Over Terms: Definitions of column names used in supplementary report exhibit tables

These educational materials can be accessed from within the PV-PQRS Feedback Reports portal prior to generating the 2014 Annual QRUR or within the 2014 Annual QRUR.

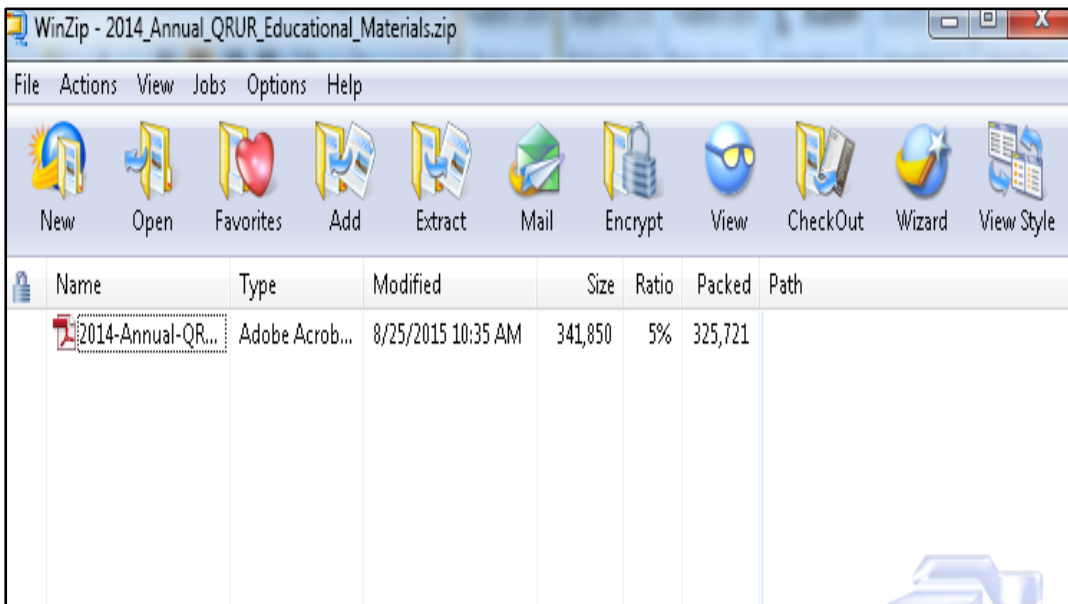
Additional educational documents about the 2014 Annual QRURs are available at

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html>.

Steps	Screenshots
1. Repeat Steps 1- 7 of Section IV.A (How to Access via PV-Landing Portlet) or Steps 1-6 of Section IV.B (Access via Directly Logging into CMS Secure Portal) of this guide.	
2. Select the <i>Download the educational materials related to the Annual QRURs</i> link that appears upon selecting a Year (2014) and Report (2014 Annual Quality and Resource Use Report (QRUR)), any of the Supplementary Exhibits and Download to Print and Save Your TINs full Annual Quality and Resource Use Report (QRUR)).	 The screenshot shows the 'Welcome to Physician Value Physician Quality Reporting Portal' interface. It includes a legend stating '(*) Red asterisk indicates a required field.' Below this are two required fields: '*Select a Year?' with a dropdown menu set to '2014', and '*Select a Report' with a dropdown menu set to '2014 Annual Quality and Resource Use Report (QRUR)'. At the bottom of the form, the link 'Download educational materials related to the Annual QRURs' is displayed. A large red arrow points directly to this link.

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps	Screenshots														
- A zip folder opens with a PDF file that contains the following: - About the Data In This Report: Detailed information about the data used in the report - Exhibit A-1: List of Specialties Associated with Eligible Professional, Physician, and Provider Stratification Categories - Glossary: List of terms found within the report - Notes and Hover-Over Terms: Definitions of column names used in supplementary report exhibit tables Note: Use the standard Adobe features to Save, Open, and Print content of the PDF file.	 The screenshot shows the WinZip application window titled "WinZip - 2014_Annual_QRUR_Educational_Materials.zip". The menu bar includes File, Actions, View, Jobs, Options, and Help. The toolbar contains icons for New, Open, Favorites, Add, Extract, Mail, Encrypt, View, CheckOut, Wizard, and View Style. Below the toolbar is a table listing the contents of the zip file. <table><tr><th>Name</th><th>Type</th><th>Modified</th><th>Size</th><th>Ratio</th><th>Packed</th><th>Path</th></tr><tr><td>2014-Annual-QR...</td><td>Adobe Acrobat...</td><td>8/25/2015 10:35 AM</td><td>341,850</td><td>5%</td><td>325,721</td><td></td></tr></table>	Name	Type	Modified	Size	Ratio	Packed	Path	2014-Annual-QR...	Adobe Acrobat...	8/25/2015 10:35 AM	341,850	5%	325,721	
Name	Type	Modified	Size	Ratio	Packed	Path									
2014-Annual-QR...	Adobe Acrobat...	8/25/2015 10:35 AM	341,850	5%	325,721										

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

IX. How to Access 2014 Annual QRUR Supplementary Exhibit Reports

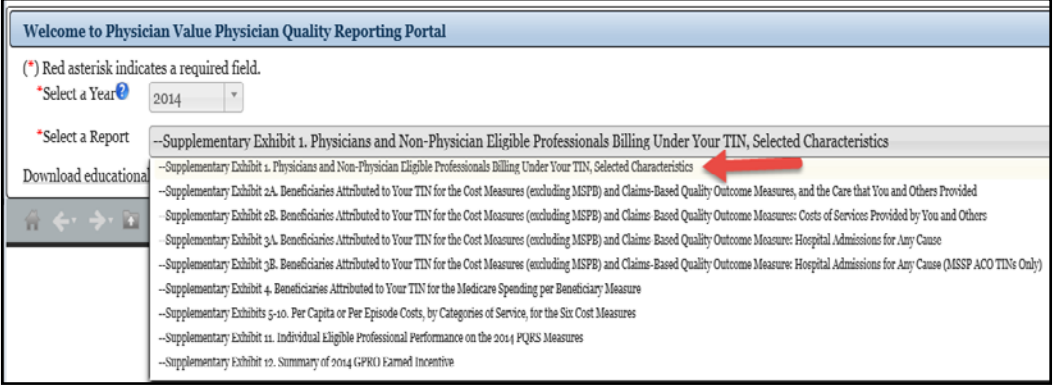
The following 2014 Annual QRUR Supplementary Exhibits are available:

- Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics
- Supplementary Exhibit 2A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measures, and the Care that You and Others Provided
- Supplementary Exhibit 2B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measures: Costs of Services Provided by You and Others
- Supplementary Exhibit 3A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measures: Hospital Admissions for Any Cause
- Supplementary Exhibit 3B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measure: Hospital Admissions for Any Cause (MSSP ACO TINs Only)
- Supplementary Exhibit 4. Beneficiaries Attributed to Your TIN for the Medicare Spending per Beneficiary Measure
- Supplementary Exhibit 5-10. Per Capita or Per Episode Costs, by Categories of Service, for the Six Cost Measures
- Supplementary Exhibit 11: Individual Eligible Professional Performance on the 2014 PQRS Measures
- Supplementary Exhibit 12: Summary of 2014 GPRO Earned Incentive
- Supplementary Exhibit 13: Beneficiaries Assigned to Your ACO and Attributed to Your TIN for the All-Cause Hospital Readmissions Measure: Hospitals Admission for Any Cause.

All reports can be individually generated from either the PV-PQRS Reports Portal using the **Feedback Reports** drop-down menu or from the hyperlinks located in the **About the Data in This Report** section of the **2014 Annual QRUR**.

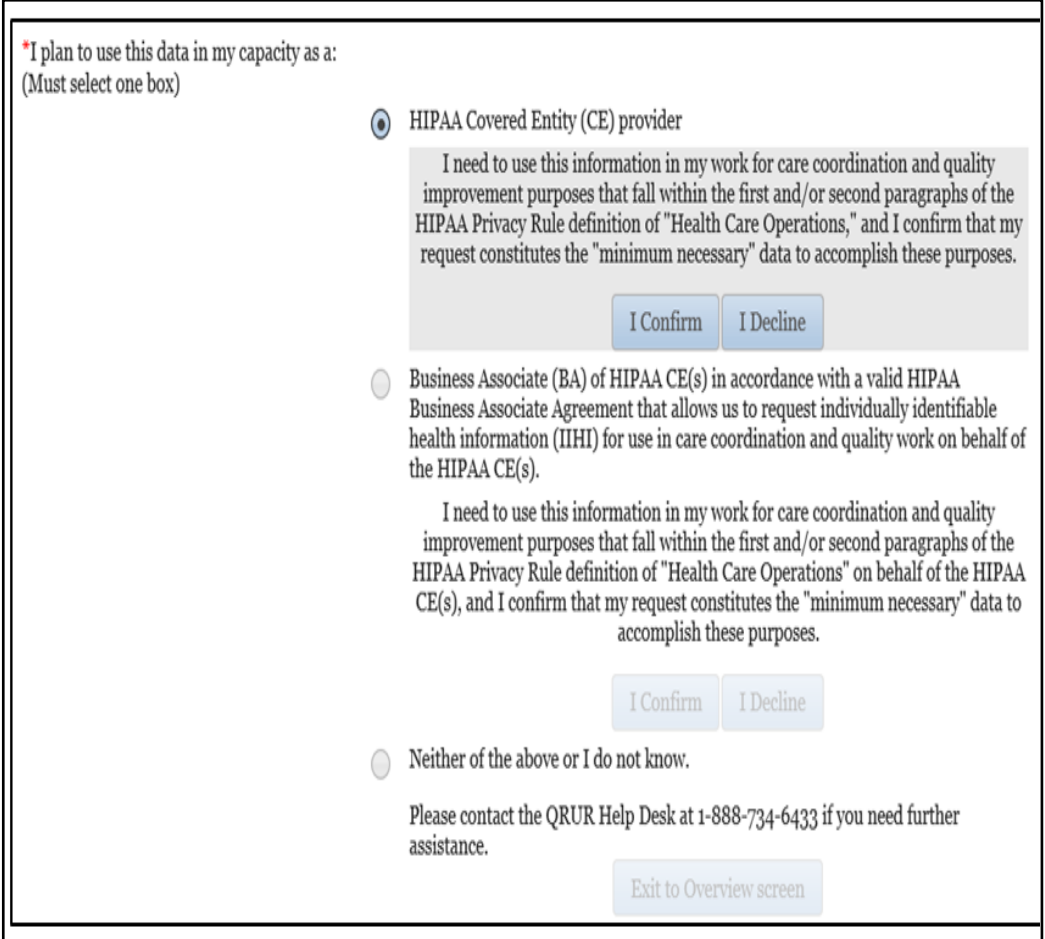
Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

A. Access 2014 Annual QRUR Supplementary Exhibits from the PV-PQRS Feedback Reports Menu

Steps	Screenshots
1. Repeat Steps 1- 7 of Section IV.A (How to Access via PV-Landing Portlet) or Steps 1- 6 of Section IV.B (Access via Directly Logging into CMS Secure Portal) of this guide.	
2. Select a year (2014) from the Select a Year drop-down menu, and then select a report (e.g., Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics) from the Select a Report drop-down menu.	 The screenshot shows the 'Welcome to Physician Value Physician Quality Reporting Portal' interface. It includes a 'Select a Year' dropdown menu with '2014' selected. Below it is a 'Select a Report' dropdown menu. The dropdown list is open, showing several options. The first option, 'Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics', is highlighted in yellow and has a red arrow pointing to it. Other options include 'Supplementary Exhibit 2A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSFPB) and Claims-Based Quality Outcome Measures, and the Care that You and Others Provided', 'Supplementary Exhibit 2B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSFPB) and Claims-Based Quality Outcome Measures: Costs of Services Provided by You and Others', 'Supplementary Exhibit 3A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSFPB) and Claims-Based Quality Outcome Measure: Hospital Admissions for Any Cause', 'Supplementary Exhibit 3B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSFPB) and Claims-Based Quality Outcome Measure: Hospital Admissions for Any Cause (MSPB ACO TINs Only)', 'Supplementary Exhibit 4. Beneficiaries Attributed to Your TIN for the Medicare Spending per Beneficiary Measure', 'Supplementary Exhibits 5-10. Per Capita or Per Episode Costs, by Categories of Service, for the Six Cost Measures', 'Supplementary Exhibit 11. Individual Eligible Professional Performance on the 2014 PQRS Measures', and 'Supplementary Exhibit 12. Summary of 2014 GPRO Earned Incentive'.

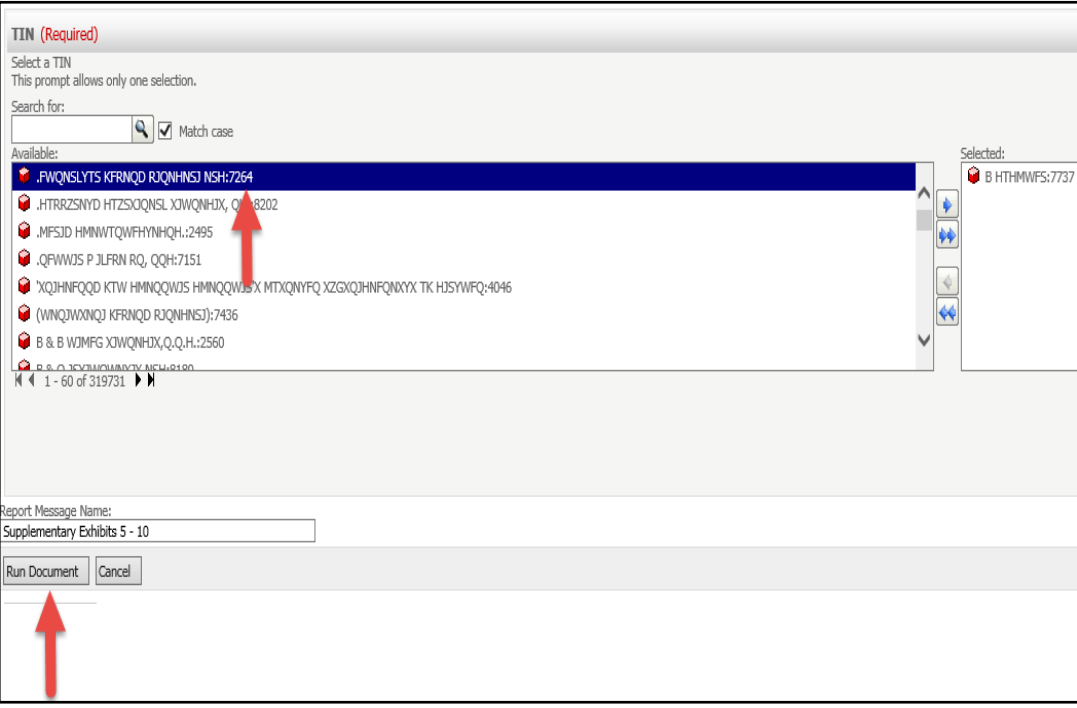
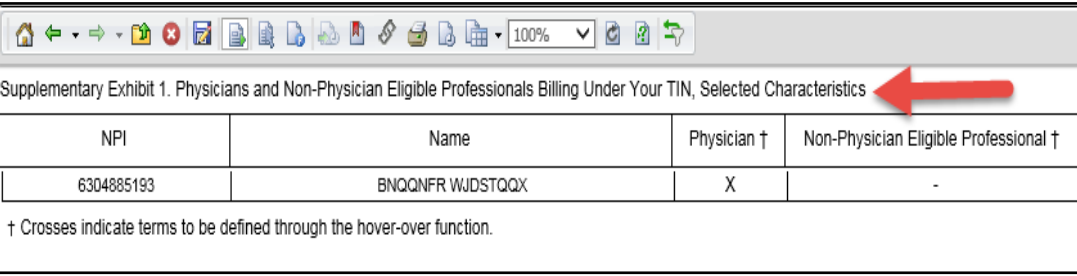
If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps	Screenshots
3. Read the Attestation Message and make the appropriate attestation selection. Select one of the options under <i>"I plan to use this data in my capacity as a:"</i> 4. Then, select <i>I Confirm</i> to continue. Note: If you select <i>Neither of the above or I do not know</i>, the option to Exit to the <i>Overview</i> screen will be enabled.	 *I plan to use this data in my capacity as a: (Must select one box) ☒ HIPAA Covered Entity (CE) provider I need to use this information in my work for care coordination and quality improvement purposes that fall within the first and/or second paragraphs of the HIPAA Privacy Rule definition of "Health Care Operations," and I confirm that my request constitutes the "minimum necessary" data to accomplish these purposes. I Confirm I Decline ☐ Business Associate (BA) of HIPAA CE(s) in accordance with a valid HIPAA Business Associate Agreement that allows us to request individually identifiable health information (IIHI) for use in care coordination and quality work on behalf of the HIPAA CE(s). I need to use this information in my work for care coordination and quality improvement purposes that fall within the first and/or second paragraphs of the HIPAA Privacy Rule definition of "Health Care Operations" on behalf of the HIPAA CE(s), and I confirm that my request constitutes the "minimum necessary" data to accomplish these purposes. I Confirm I Decline ☐ Neither of the above or I do not know. Please contact the QRUR Help Desk at 1-888-734-6433 if you need further assistance. Exit to Overview screen

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps	Screenshots								
You are now in the MicroStrategy Web Platform. The screen shows the TIN(s) associated with your EIDM account. 5. Select one TIN from the Available TINs: - Select a TIN and either double-click or click the arrow button to move the TIN from Available to Selected. - You can also filter the list of Available TINs by entering the name or last 4 digits of a TIN in the Search for field. Note: Select only one TIN each time you attempt to retrieve a 2014 Annual Supplementary Exhibit. 6. Select Run Document. Note: You will need to wait several seconds while the system generates your 2014 Annual Supplementary Exhibit.									
The selected 2014 Supplementary Exhibit report is displayed. Note: The example shown is Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics	 <table border="1"> <thead> <tr> <th>NPI</th><th>Name</th><th>Physician †</th><th>Non-Physician Eligible Professional †</th></tr> </thead> <tbody> <tr> <td>6304885193</td><td>BNQQNFR WJDSTQQX</td><td>X</td><td>-</td></tr> </tbody> </table> † Crosses indicate terms to be defined through the hover-over function.	NPI	Name	Physician †	Non-Physician Eligible Professional †	6304885193	BNQQNFR WJDSTQQX	X	-
NPI	Name	Physician †	Non-Physician Eligible Professional †						
6304885193	BNQQNFR WJDSTQQX	X	-						

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelppdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps

7. Repeat **Steps 1-6** of this section to access any of the other 2014 Annual QRUR Supplementary Exhibits.

When **Supplementary Exhibit 5-10, Per Capital or Per Episode Cost, by Categories of Service, for the Six Cost Measures** is selected, **Supplementary Exhibit 5** is the default section displayed.

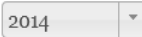
8. Select any of the following tabs at the top of the screen to navigate to:

- **Supplementary Exhibit 6.**
- **Supplementary Exhibit 7.**
- **Supplementary Exhibit 8.**
- **Supplementary Exhibit 9.**
- **Supplementary Exhibit 10.**

Screenshots

Welcome to Physician Value Physician Quality Reporting Portal

(*) Red asterisk indicates a required field.

*Select a Year  2014

*Select a Report  Select a Report

- Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics
- Supplementary Exhibit 2A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality
- Supplementary Exhibit 2B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality
- Supplementary Exhibit 3A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality
- Supplementary Exhibit 3B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality
- Supplementary Exhibit 4. Beneficiaries Attributed to Your TIN for the Medicare Spending per Beneficiary Measure
- Supplementary Exhibits 5-10. Per Capita or Per Episode Costs, by Categories of Service, for the Six Cost Measures
- Supplementary Exhibit 11. Individual Eligible Professional Performance on the 2014 PQRS Measures
- Supplementary Exhibit 12. Summary of 2014 GPRO Earned Incentive

Supplementary Exhibit 5. Per Capita Costs, by Categories of Service, for the Per Capita Costs for All Attributed Beneficiaries Measure

Service Category	Number of Your TIN's Attributed Beneficiaries Using any Service in this Category	Percentage of Your TIN's Attributed Beneficiaries Using any Service in this Category	Per Capita Costs for Your TIN's Attributed Beneficiaries	Benchmark Percentage of Beneficiaries Using Any Service in This Category	Benchmark Per Capita Costs	Amount by Which Your TIN's Costs Were Higher or (Lower) Compared to the Benchmark
ALL SERVICES	7	100.00%	\$3,311	100.00%	\$10,907	(\$7,597)
Outpatient Evaluation and Management Services, Procedures, and Therapy (excluding emergency department)	7	100.00%	\$1,231	100.00%	\$2,998	(\$1,768)
Evaluation & Management Services Billed by Eligible Professionals	7	100.00%	\$943	100.00%	\$1,132	(\$189)
Billed by Your TIN	7	100.00%	\$543	99.99%	\$473	\$70
Primary Care Physicians	0	0.00%	\$0	67.50%	\$357	(\$357)
Medical Specialists	0	0.00%	\$0	20.91%	\$54	(\$54)
Surgeons	7	100.00%	\$543	9.23%	\$22	\$521
Other Eligible Professionals	0	0.00%	\$0	10.44%	\$40	(\$40)
Billed by Other TINs	4	57.14%	\$400	83.87%	\$658	(\$258)
Primary Care Physicians	0	0.00%	\$0	20.43%	\$47	(\$47)
Medical Specialists, Surgeons, and Other Eligible Professionals	4	57.14%	\$400	82.45%	\$611	(\$212)
Other Facility-Billed Evaluation & Management Expenses*	1	14.29%	\$96	17.71%	\$131	(\$36)
Major Procedures Billed by Eligible Professionals	0	0.00%	\$0	9.43%	\$170	(\$170)
Billed by Your TIN	0	0.00%	\$0	1.62%	\$20	(\$20)
Primary Care Physicians	0	0.00%	\$0	0.24%	\$1	(\$1)
Medical Specialists	0	0.00%	\$0	0.75%	\$7	(\$7)
Surgeons	0	0.00%	\$0	0.48%	\$6	(\$6)
Other Eligible Professionals	0	0.00%	\$0	0.75%	\$6	(\$6)

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps

When **Supplementary Exhibit 11. Individual Eligible Professional Performance on the 2014 PQRS Measures** is selected, individual PQRS performance information (if available) for all of the TIN's eligible professionals can be exported to Excel by following these steps:

9. Select the **Click Here** link to download the PQRS performance information for all of your group's eligible professionals to a single Excel table.

Screenshots

(*) Red asterisk indicates a required field.

*Select a Year  2014

*Select a Report  --Supplementary Exhibit 11. Individual Eligible Professional Performance on the 2014 PQRS Measures

[Download educational materials](#) related to the Annual QRURs



GROUPING: Provider NPI Number: 6156769428;QFSSF SZSJQ LZXXRFS

 [Click Here](#) to download the PQRS Performance information for all of your group's eligible professionals to a single Excel table

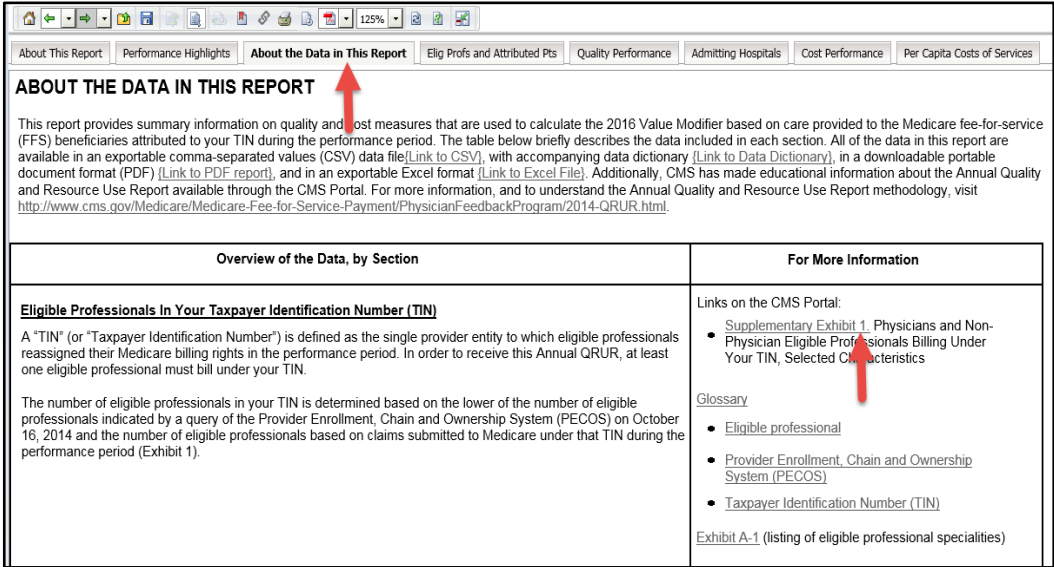
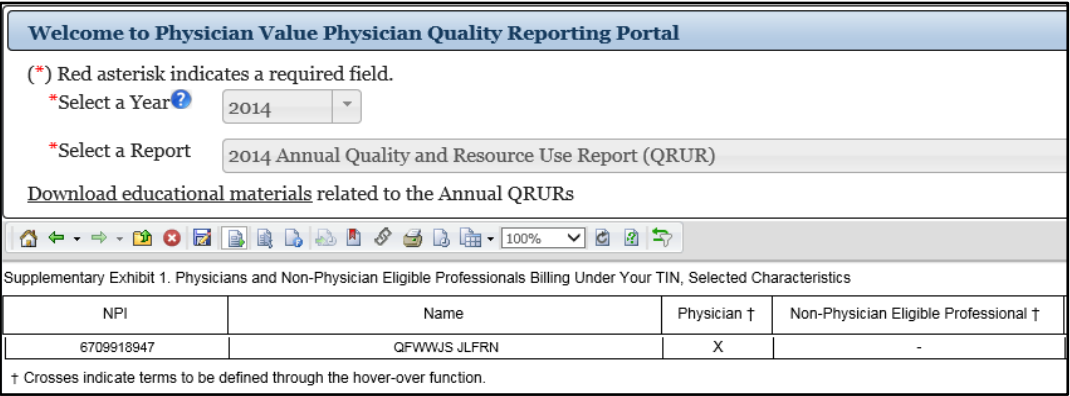
Supplementary Exhibit 11. Individual Eligible Professional Performance on the 2014 PQRS Measures: QFSSF SZSJQ LZXXRFS(6156769428), Met the criteria to avoid the 2016 PQRS payment adjustment: Yes

Performance Measure	Domain	Eligible Professional Performance			Benchmark Rate	
		Reporting Mechanism †	Number of Eligible Cases †	Performance Rate		
130 (CMS68v3)	Documentation of Current Medications in the Medical Record	Patient Safety	Registry	990	3.84%	87.36%
137	Melanoma: Continuity of Care - Recall System	Effective Clinical Care	Registry	65	40.00%	97.81%
138	Melanoma: Coordination of Care	Communication and Care Coordination	Registry	1	100.00%	89.33%
194	Oncology: Cancer Stage Documented	Effective Clinical Care	Registry	262	4.58%	90.19%
224	Melanoma: Overutilization of Imaging Studies in Melanoma	Efficiency and Cost Reduction	Registry	66	100.00%	99.47%
226 (CMS138v2)	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Community/Population Health	Registry	628	97.13%	83.11%
245	Chronic Wound Care: Use of Wound Surface Culture Technique in Patients with Chronic Skin Ulcers (Overuse Measure)	Effective Clinical Care	Registry	9	88.89%	99.94%
246	Chronic Wound Care: Use of Wet to Dry Dressings in Patients with Chronic Skin Ulcers (Overuse Measure)	Effective Clinical Care	Registry	9	100.00%	99.54%
265	Biopsy Follow-Up	Communication and Care Coordination	Registry	16	25.00%	83.32%

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelphdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

B. Access 2014 Annual QRUR Supplementary Exhibits from within the 2014 Annual QRUR

Steps	Screenshots
1. Repeat Section IV (Access the 2014 Annual QRUR) and choose the preferred access method mentioned in Section IV.A and Section IV.B .	
2. Select the About the Data in This Report tab and locate the link to open the desired 2014 Annual Supplementary Exhibit.	
The associated supplementary exhibit is displayed. Note: The example shown is Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics	

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

X. View and Print the 2014 Annual QRUR Supplementary Exhibits in PDF or Excel Format

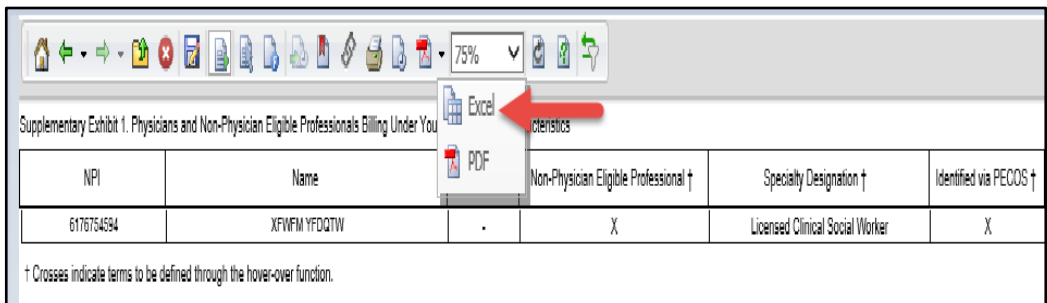
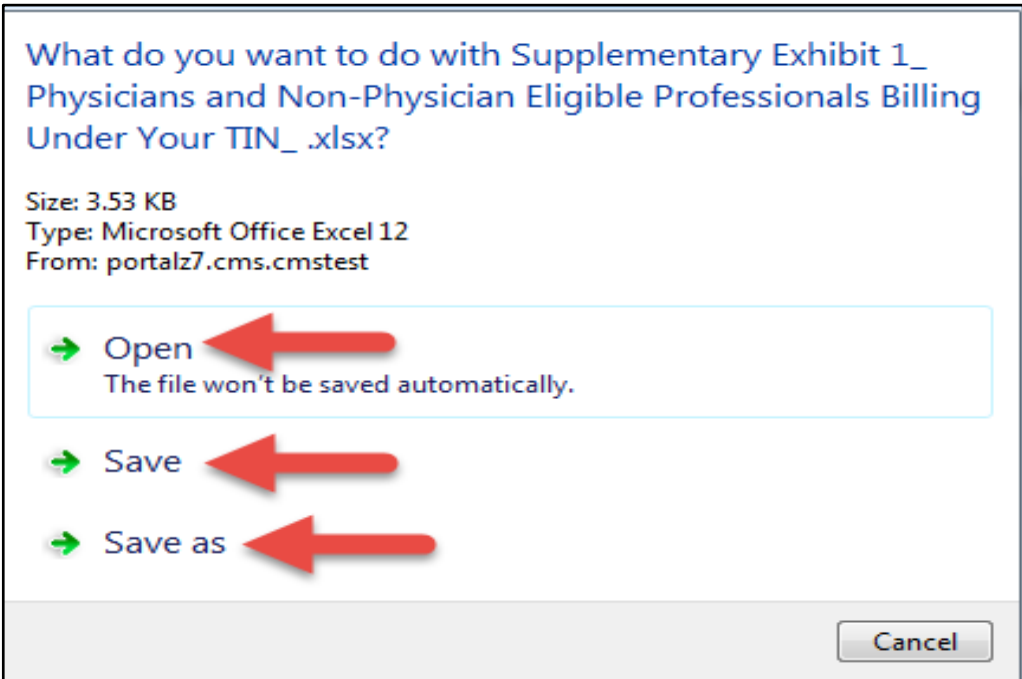
A. View a 2014 Annual QRUR Supplementary Exhibit as a PDF Document after Opening the Report.

[illegible]

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

B. View a 2014 Annual QRUR Supplementary Exhibit as an Excel Spreadsheet after Opening the Report.

Steps	Screenshots										
1. Select the Export button on the MicroStrategy Web Platform toolbar and then select Excel. Note: Selecting the Excel option will display an Export options menu in a new window.	 <table><tr><th>NPI</th><th>Name</th><th>Non-Physician Eligible Professional †</th><th>Specialty Designation †</th><th>Identified via PECOS †</th></tr><tr><td>6176754584</td><td>XFWFM YFDQTV</td><td>X</td><td>Licensed Clinical Social Worker</td><td>X</td></tr></table> † Crosses indicate terms to be defined through the hover-over function.	NPI	Name	Non-Physician Eligible Professional †	Specialty Designation †	Identified via PECOS †	6176754584	XFWFM YFDQTV	X	Licensed Clinical Social Worker	X
NPI	Name	Non-Physician Eligible Professional †	Specialty Designation †	Identified via PECOS †							
6176754584	XFWFM YFDQTV	X	Licensed Clinical Social Worker	X							
2. Select one (1) of the following options: (a) Open to open the supplementary exhibit in Excel. The file will open in Excel and will not be automatically saved. (b) Save. The file will be saved in Excel format in the Downloads folder on your computer. (c) Save As. You will be prompted with a Save As window on which you can choose the location where you can save the file.	 What do you want to do with Supplementary Exhibit 1_ Physicians and Non-Physician Eligible Professionals Billing Under Your TIN_ .xlsx? Size: 3.53 KB Type: Microsoft Office Excel 12 From: portalz7.cms.cmstest → Open ← The file won't be saved automatically. → Save ← → Save as ← Cancel										

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelppdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

Steps

The 2014 Annual QRUR **Supplementary Exhibit** is exported to **Excel** format.

Note: Use the Microsoft Excel toolbar features to **Save** and/or **Print** the **Supplementary Exhibit**.

Screenshots

The screenshot shows the Microsoft Excel interface with the following data:

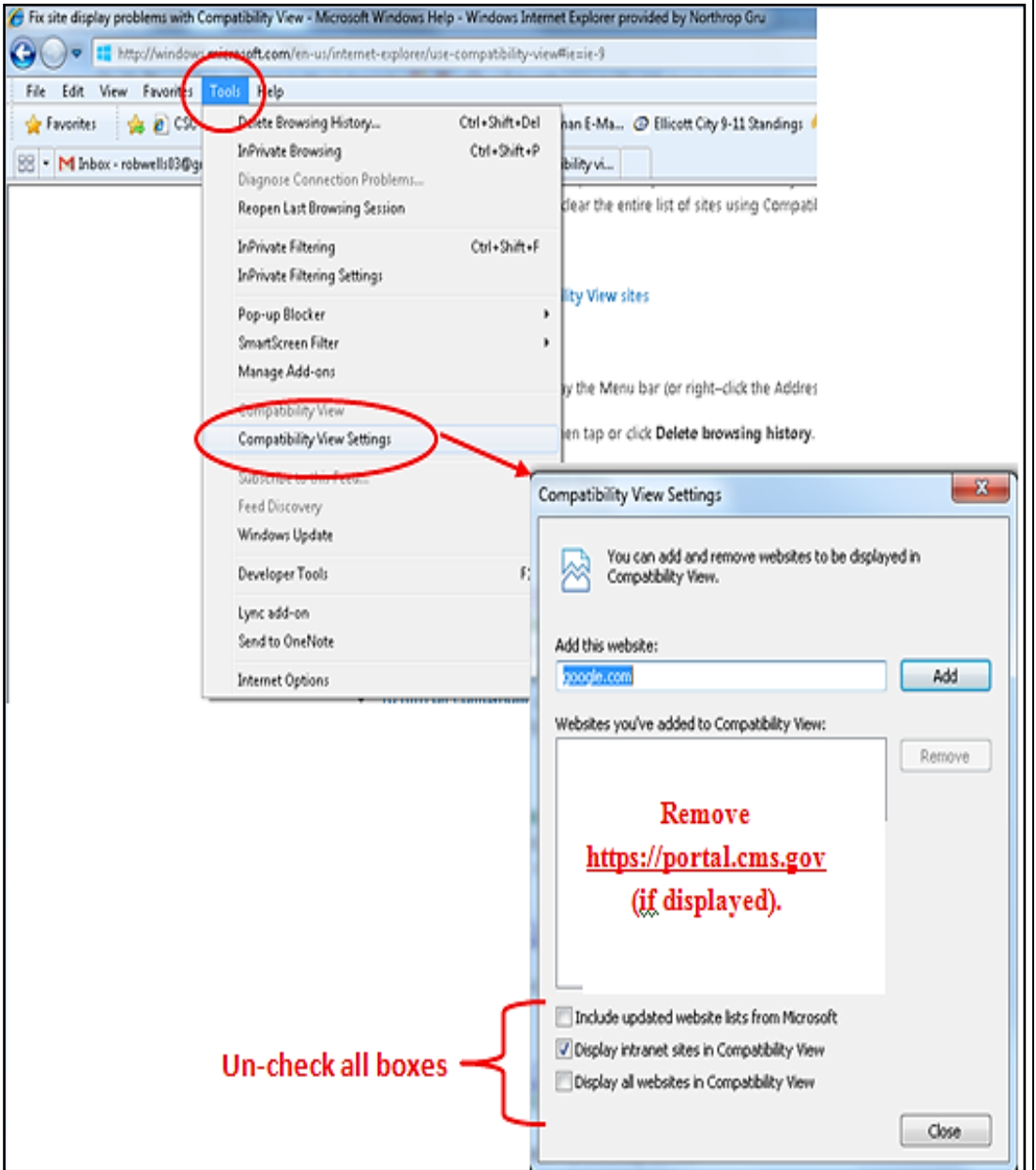
NPI	Name	Physician†	Non-Physician Eligible Professional†	Specialty Designation†	Identified via PECOS†	Identified via Billings†	Date of Last Claim Billed Under TIN
61864087	QIMS GPVP/JH	X	-	Family Practice	X	X	12/31/2014

† Crosses indicate terms to be defined through the hover-over function.

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

XI. Troubleshoot Browser Setting

Steps	Screenshots
<u>Troubleshooting</u> If you are not using one of the supported browsers or having trouble viewing the CMS Enterprise Portal using Internet Explorer 9: • Ensure the browser is open. • Press the Alt key to display the Menu bar (or right-click the Address bar and then select Menu bar). • Select Tools on the Menu bar. • Select Compatibility View Settings. • Remove the CMS Portal web address if it appears in the Websites you've added to Compatibility View box. • Un-check all of the boxes below Websites you've added to Compatibility View. • Close the Compatibility View Settings box. • Close the current browser session. • Open a new browser session. • Go to https://portal.cms.gov and select Login to the CMS Secure Portal located on the right-hand side of the screen. Note: The CMS Enterprise Portal supports the following internet browsers: • Internet Explorer 8 • Internet Explorer 9 • Internet Explorer 10	 Un-check all boxes

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

<u>Steps</u>	<u>Screenshots</u>
• <i>Mozilla-Firefox</i> • <i>Chrome</i> • <i>Safari</i>	

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.