

OPEN PAYMENTS

Creating public transparency into industry –
provider financial relationships

Review, Dispute, & Corrections
Information for Reporting Entities

Open Payments Team

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Centers for Medicare & Medicaid Services
Center for Program Integrity



About Open Payments

- Open Payments is a national disclosure program that promotes a transparent and accountable healthcare system.
- Each year applicable manufacturers and group purchasing organizations (GPOs) collect data regarding payments or transfers of value they have made to physicians and teaching hospitals. Then in the following calendar year they submit this information to CMS for publication.

Data Submission Reminders

- Program Year 2020 data submission closes March 31, 2021.
 - Data must be submitted **and** attested to by March 31, 2021 in order to be considered reported on time.
- Submit Data Early
 - We recommend submitting your data as early as possible during the submission window. Starting early helps avoid longer upload times that might happen closer to the end of the submission window, and allows adequate time for addressing any errors or issues you may encounter.
- If any of your reporting is affected by the COVID-19 pandemic (including if you are submitting Program Year 2019 records late), please include the phrase “COVID-19 Impact” in your assumptions statement with the explanation of circumstances.
 - If applicable, include reference to any related help desk ticket numbers. This will be used to help evaluate potential cases of non-compliance.
- Refer to the [Data Submission Suggestions](#) for more tips and recommendations.

Upcoming Review, Dispute & Correction Period

- On April 1, 2021 the Pre-publication Review & Dispute period will open for covered recipients.
 - During this time covered recipients will have an opportunity to preview the data and dispute attributed payments / transfers of value they believe to be inaccurate or incorrect in any way.
 - Covered recipient pre-publication review and dispute is from April 1, 2021 – May 15, 2021.
- As a reporting entity, it is your responsibility to work with covered recipients to resolve disputes.
 - Reporting entities may resolve disputes during the initial pre-publication review and dispute period and are given an additional 15-day correction period (May 15, 2021 – May 30, 2021) to resolve any outstanding disputes.
- CMS does not mediate disputes.

How Pre-publication Review & Dispute Works

- Covered recipients that are registered in the Open Payments system may review the data prior to its publication.
- If they believe a record associated with their profile is incorrect they may initiate a dispute.
 - When a dispute is initiated, the reporting entity will receive a notification, and should work with the covered recipient to resolve the dispute.
 - When you receive a dispute, it is recommended that you acknowledge the dispute that way the covered recipient knows you saw their dispute and are actively working to resolve it.

Dispute Status

- Records in the Review & Dispute Process will have one of the following statuses
 - Initiated
 - The dispute has been initiated by the covered recipient
 - Acknowledged
 - The reporting entity has acknowledged the dispute
 - Resolved
 - The reporting entity and covered recipient worked together to reach a dispute resolution
 - Resolved No Change
 - The reporting entity and covered recipient worked together and determined the originally reported information is correct and no change to the record is necessary
 - Withdrawn
 - The covered recipient withdrew the dispute; no further action is needed

Review & Dispute Impact on Publication

- Disputes initiated within the pre-publication review, and dispute, period and resolved by the end of the correction period (May 30, 2021) will be published and identified as non-disputed in the June 2021 data publication.
- If an initiated dispute is not resolved by the end of the correction period, the record will be published and identified as disputed.
- Disputes initiated or resolved after the full 60-day review, dispute, and correction period will not be reflected in the initial data publication and will be published as original attested-to data.
 - Those disputes and any related data changes will be published in the next publication which may be a refresh publication or the next program year data publication.

Program Expansion Reminder

- The Open Payments program expansion is now effective.
- Your 2021 data collection should include payments or transfers of value to providers that meet the definition of a physician or teaching hospital as well as the five additional provider types:
 - Physician assistants
 - Nurse practitioners
 - Clinical nurse specialists
 - Certified registered nurse anesthetists (including anesthesiologist assistants)
 - Certified nurse midwives
- There are a variety of resources available to help you navigate the new reporting requirements
 - Be sure to check out the [Changes for Reporting Entities Page](#) to stay up to date with all things program expansion related
 - Refer providers you interact with to resources designed to help them understand the program
 - [Newly Added Covered Recipient Page](#)
 - [Covered Recipient Hand out](#)
 - [Open Payments Overview Video](#)

Stay Connected & Informed

- **Visit the Open Payments Website**

- For resources including Open Payments FAQs and more information about the program visit <https://cms.gov/openpayments>

- **Subscribe to the Listserv**

- Receive program updates through the Open Payments listserv
- Subscribe at our Contact Us Page

- **Search the Data**

- Access the Open Payments data at <https://openpaymentsdata.cms.gov>

- **Have Questions or Need Help?**

- Email: openpayments@cms.hhs.gov
- Call: 1-855-326-8366 (TTY Line: 1-844-649-2766)
- Help Desk Hours: 8:30am – 7:30pm (ET)

