CENTERS FOR MEDICARE & MEDICAID SERVICES
CENTER FOR PROGRAM INTEGRITY

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User Guide for Covered Recipients

OPEN PAYMENTS

CREATING PUBLIC TRANSPARENCY INTO INDUSTRY-PHYSICIAN FINANCIAL RELATIONSHIPS

January 2026

Disclaimer: The Centers for Medicare & Medicaid Services (CMS) is providing this guidance document as informational material on Open Payments. Although every reasonable effort has been made to assure the accuracy of the information, it is the responsibility of the user to ensure adherence to the requirements of the Open Payments implementing regulations, the Medicare, Medicaid, Children's Health Insurance Programs; Transparency Reports and Reporting of Physician Ownership or Investment Interests Final Rule codified at 42 C.F.R. Parts 402 and 403 [CMS-5060-F]. This User Guide is not intended as a supplement or replacement of the Final Rule.

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INTRODUCTION

Purpose of the Open Payments User Guide

This Open Payments User Guide includes definitions, descriptions, screenshots, tools, and tips designed to help physicians, non-physician practitioners (NPPs), and teaching hospitals better understand how to comply with Open Payments (the Sunshine Act).

As the Open Payments system develops, the Open Payments User Guide will be updated at least once annually. The User Guide consists of the following chapters:

- **Introduction to Open Payments**
- **Introduction to Reporting and Data Collection**
- **Physician, NPPs, and Teaching Hospital Registration**
- **Review and Dispute**
- **Additional Information and Resources**

Revision History

Version	Date Published	Description	Version Updates
1.0	August 2013	Initial Release	Chapters 1, 2, 3, & 4
2.0	June 2014	Update	Chapters 1, 2, 3, 4, & 7
3.0	July 2014	Update	Chapters 5, 8, & 9
3.1	August 2014	Update	Minor corrections and updates
4.0	December 2014	Update	Updates made to Chapter 5
5.0	January 2015	Update	Chapter 10 and updates for registration and data submission
6.0	March 2015	Update	Updates for registration and data submission
7.0	April 2015	Update	Updates for review and dispute
8.0	June 2015	Update	Updated Chapter 10 for PY2014 data publication
9.0	January 2016	Update	Updated throughout to reflect system updates in Jan 2016
10.0	June 2016	Update	Updated publication chapter, added to glossary
11.0	January 2017	Update	Updated to reflect changes to registration and data submission
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13.0	September 2017	Update	Updated to reflect system updates
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15.0	March 2018	Update	Updated to reflect system updates for Review and Dispute
16.0	January 2019	Update	Updated to reflect system updates
17.0	September 2019	Update	Updated to reflect system updates
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19.0	January 2021	Update	Updated to reflect system updates
20.0	February 2021	Update	Updated to reflect EIDM to IDM Migration changes
21.0	July 2021	Update	Updated to reflect system updates
22.0	September 2021	Update	Updated to reflect system updates
23.0	January 2022	Update	Updated to reflect system updates
24.0	September 2022	Update	Updated to reflect system updates
25.0	January 2023	Update	Updated to reflect system updates
25.1	April 2023	Update	Updated to reflect new IDM password requirements
26.0	July 2024	Update	Updated to reflect changes from OPS1.0 to OPS2.0
27.0	January 2025	Update	Updated to reflect system updates
28.0	September 2025	Update	Updated to reflect system updates

Chapter 1: Introduction to Open Payments (the Sunshine Act)

This introduction chapter provides general information about the program, an overview of the Open Payments system, and an explanation of how to determine if an entity is required by Open Payments to report certain payments or other transfers of value to physicians, non-physician practitioners (NPP) and teaching hospitals, or certain physician ownership or investment interests.

Section 1.1: Program Overview

1.1a: What is the Affordable Care Act Section 6002?

Section 6002 of the Affordable Care Act [P.L. 110-148] amends Title XI of the Social Security Act to add Section 1128G, which mandates the creation of a program for (1) reporting payments and other transfers of value made to covered recipients and physician owners or investors, by manufacturers of drugs, devices, biologicals, or medical supplies for which payment is available under Medicare, Medicaid, or the Children's Health Insurance Program (CHIP); and (2) reporting ownership or investment interests held by physicians or their immediate family members in applicable manufacturers and applicable group purchasing organizations (GPOs), as well as reporting payments or other transfers of value made by these applicable manufacturers and applicable GPOs to these physicians.

As of January 2022, the Open Payments program is updated per section 403.902 of the Affordable Care Act to include the NPPs as covered recipients in the Open Payments program. Per the Final Rule, the updated definition of covered recipient means— (1) Any physician, physician assistant, nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, anesthesiologist assistant, or certified nurse-midwife who is not a bona fide employee of the applicable manufacturer that is reporting the payment; or (2) A teaching hospital, which is any institution that received a payment under 1886(d)(5)(B), 1886(h), or 1886(s) of the Act during the last calendar year for which such information is available.

This program establishes a system for annually reporting this data to the Centers for Medicare & Medicaid Services (CMS).

1.1b: What is the Purpose of Open Payments (the Sunshine Act)?

Open Payments is a national disclosure program that promotes transparency by publishing data on the financial relationships between the healthcare industry (applicable manufacturers and applicable GPOs; together referred to as reporting entities) and healthcare providers (physicians, NPPs, and teaching hospitals) on a publicly accessible website. This publicly available website is designed to increase access to, and knowledge about, these relationships and provide the public with information to enable them to make informed decisions. The public can search, download, and evaluate the reported data.

Disclosure of the financial relationships between industry and healthcare providers is not intended to signify an inappropriate relationship, and Open Payments does nothing to prohibit such transactions. Collaborations among the medical product industry, physicians, NPPs, and teaching hospitals contribute to the design and delivery of life-saving drugs, devices, biologicals, and medical supplies. However, these relationships may also influence research, education, and clinical decision-making in ways that compromise clinical integrity and patient care and may potentially lead to increased healthcare costs. While disclosure alone is not sufficient to differentiate between the beneficial financial relationships and those that may create conflicts of interest, transparency will shed light on the nature and extent of the relationships that exist and discourage the development of inappropriate relationships.

1.1c: Who Participates in Open Payments (the Sunshine Act)?

Open Payments requires participation from certain manufacturers of drugs, devices, biologicals, or medical supplies covered under Title XVIII of the Social Security Act (Medicare), or a State plan under Title XIX (Medicaid) of XXI of the Social Security Act (CHIP) and certain GPOs. These products are defined as “Covered Products” under Open Payments.

Applicable manufacturers of covered products, and entities under common ownership with applicable manufacturers who also provide assistance and support, are required to annually report to CMS:

- Payments or other transfers of value, including general and research, made to physicians, NPPs, and teaching hospitals.
- Certain ownership or investment interests held by physicians or their immediate family members.
- Applicable GPOs are required to annually report to CMS:
    - Payments or other transfers of value, including general and research, made to physician owners or investors.
    - Certain ownership or investment interests held by physicians or their immediate family members.

While not required to participate, Open Payments encourages physicians, NPPs, and teaching hospitals to participate by tracking their financial relationships with applicable manufacturers and applicable GPOs and reviewing data reported about them in the Open Payments system to ensure the accuracy of the information.

Open Payments also encourages the public and healthcare consumers to access, review, and use the data to make informed healthcare decisions.

1.1d: Key Dates for Open Payments Program Years

For each program year, the following dates are of key importance:

Applicable manufacturers and applicable GPOs are required to **collect data** documenting their financial relationships with certain physicians, NPPs, and teaching hospitals for the period of January 1 to December 31 of each year.

Data submission for a program year begins in February of the following year and runs through the end of March. For example, data submission for Program Year 2022 took place in February and March of 2023.

The review and dispute period occurs immediately after the submission period ends and extends for at least 45 days. During this period, physicians, NPPs, and teaching hospitals review and, if necessary, dispute data submitted by reporting entities. Applicable manufacturers and applicable GPOs can then correct the data to resolve any disputes for an additional fifteen-day correction period. Review, dispute, and correction activities can occur until the end of the calendar year that the record was submitted, though the initial publication of the program year data will reflect the state of the record as of the end of the correction period. Disputes initiated after the review and dispute period, or corrections made after the end of the correction period will be reflected in later publications. For details refer to the "Methodology and Data Dictionary Document" available on the Resources page of the Open Payments website, at https://www.cms.gov/OpenPayments/Resources.

Data publication occurs twice per year, with a June publication and an early year publication.

- **June Publication - Initial Publication**
  - The first publication of the eligible records submitted and attested on or before the submission closing date of the latest program year.
  - The republication of eligible records from prior program years, including updates to previously published records made since the previous publication.
  - The data published is the latest attested version of the payment records at the end of the correction period of the latest program year.
- **Early Year Publication - Refresh Publication**
  - Publishes updates to the data made since the Initial Publication.
  - The second publication of eligible records submitted and attested on or before the submission closing date of the latest program year.
  - Contains updates made to records after the correction period of the latest program year and before the end of the calendar year (or before the modified-without-dispute cutoff date in November for records not under dispute).
  - The data published is the latest attested version of the data at the end of the calendar year.

For example, the June 2023, data publication included the initial publication of Program Year 2022 data and republication of prior program years. The early 2023 data publication included the refresh publication of Program Year 2022 data and republication of prior program years.

Registration for the Open Payments system, and the ability to dispute data, is available year-round. Information on these activities and time periods is provided throughout this document.

The table below lists key program dates for a program year, which is the year the reported payments or other transfers of value were made.

Figure 1: Key Dates for the Open Payments Program Year

Program Activities	Program Timeline
Data Collection: Reporting entities collects data	January 1 – December 31 of program year
Data Submission: Reporting entities submits and attests to data in the Open Payments system	February – March of the calendar year after the program year
Pre-publication Review Dispute and correction: Physicians, NPPs, and teaching hospitals review the reported data and dispute any data they believe is inaccurate; industry makes corrections to the data (reflected in the initial publication)	Review, Dispute, and Correction period: April – May
Annual Data Publication: Initial program year initial data publication Prior program year data refresh publication	On or by June 30
Physicians, NPPs, and teaching hospitals continue to review and dispute data; industry continues to make corrections to the data (reflected in the data refresh publication)	May 15 – December 31
Data Refresh: Open Payments data refresh	January

Section 1.2: Determining if an Entity is an Applicable Manufacturer or Applicable GPO

Open Payments requires certain entities that make payments or other transfers of value to physicians, NPPs, or teaching hospitals to report relevant data regarding the payment or other transfers of value to CMS.

To determine if a particular entity is required to report, follow these steps:

Step 1: Determine if the entity operates in the United States (including any territory, possession, or commonwealth of the United States). See the reference guide in **Figure 2.**

Step 2: Determine if the entity engages in activities of Type 1 or Type 2 applicable manufacturer. See the reference guide in **Figure 2.**

Step 3: Determine if the entity's products are covered drugs, devices, biologicals, or medical supplies, or covered products. See the reference guide in **Figure 2.**

Step 4: If the entity possesses the characteristics illustrated in **Figure 2, the entity is determined to be an applicable manufacturer in Open Payments**.

If the entity does not meet these characteristics, the entity is not determined to be an applicable manufacturer. Note that the entity still may be an applicable GPO in Open Payments.

Proceed to Step 5 to determine if the entity is an applicable GPO.

Step 5: Determine if the entity operates in the United States (includes any territory, possession, or commonwealth of the United States). See the reference guide in **Figure 3.**

Step 6: Determine if the entity engages in activities of an applicable GPO. See the reference guide in **Figure 3.**

Step 7: Determine if the entity's products are covered drugs, devices, biologicals, or medical supplies, or covered products. See the reference guide in **Figure 3.**

Step 8: If the entity possesses the characteristics illustrated in **Figure 3, the entity is determined to be an applicable GPO in Open Payments.**

If the entity does not possess the characteristics as illustrated in **Figure 3,** the entity is not determined to be an applicable GPO in Open Payments.

The below figure provides a reference guide for determining if a drug, device, biological, or medical supply manufacturer is an applicable manufacturer in accordance with Open Payments and outlines the characteristics of two types of applicable manufacturers.

Figure 2: Determining if an Entity Is an Applicable Manufacturer

Characteristic	Type 1 Manufacturer IF	Type 2 Manufacturer IF
Operate in US?	• Entity's physical location is within the United States and/or it conducts activities within the United States. This includes any territory, possession, or commonwealth of the United States, either directly or through a legally authorized agent.	• Same as Type 1 Manufacturer.
Activities	• Engages in the production, preparation, propagation, compounding, or conversion of a covered drug, device, biological, or medical supply. • This includes distributors or wholesalers that hold title to a covered drug, device, biological, or medical supply.	• Exists under common ownership with a Type 1 applicable manufacturer AND • Provides assistance or support to such an entity with respect to the production, preparation, propagation, compounding, conversion, marketing, promotion, sale, or distribution of a covered drug, device, biological, or medical supply.

Characteristic	Type 1 Manufacturer IF	Type 2 Manufacturer IF
Covered Products	• Reimbursed by Medicare, Medicaid, or Children's Health Insurance Program AND • If the product is a drug or biological, and it requires a prescription (or doctor's authorization) to administer OR • If the product is a device or medical supply, and it requires premarket approval or premarket notification by the Food and Drug Administration (FDA).	• Same as Type 1 Manufacturer.

Figure 3 provides a reference guide for determining if a drug, device, biological, or medical supply purchasing entity is an applicable GPO in accordance with Open Payments. **Figure 3** also outlines the characteristics of applicable GPOs.

Figure 3: Determining if an Entity Is an Applicable GPO

Characteristic	Group Purchasing Organization IF
Operate in US?	• Entity's physical location is within the United States and/or it conducts activities within the United States. This includes any territory, possession, or commonwealth of the United States, either directly or through a legally authorized agent.
Activities	• Purchases, arranges for, or negotiates the purchase of a covered drug, device, biological, or medical supply for a group of individuals or entities, but not solely for use by the entity itself.
Covered products	• Reimbursed by Medicare, Medicaid, or Children's Health Insurance Program AND • If the product is a drug or biological, it requires a prescription (or doctor's authorization) to administer OR • If the product is a device or medical supply, it requires pre-market approval or pre-market notification by the FDA.

Section 1.3: Who Are Entities Reporting On

Applicable manufacturers and applicable GPOs are required to report payments or other transfers of value to covered recipients, and physician owners/investors. Covered recipients in Open Payments include any physician, physician assistant, nurse practitioner, clinical nurse specialist, certified registered nurse anesthetist, anesthesiologist assistant, or certified nurse-midwife who is not a bona fide employee of the applicable manufacturer that is reporting the payment, and teaching hospitals.

For the purposes of Open Payments, physicians are defined as legally authorized to practice by their state as follows:

- Doctors of medicine or osteopathy practicing medicine or surgery
- Doctors of dental medicine or dental surgery practicing dentistry
- Doctors of podiatric medicine
- Doctors of optometry
- Chiropractors

For the purposes of Open Payments, NPPs are defined as legally authorized to practice by their state as follows:

- Physician assistant
- Nurse practitioner
- Clinical nurse specialist
- Certified registered nurse anesthetist
- Certified nurse-midwife
- Anesthesiologist assistant

A teaching hospital is any institution that received a payment for Medicare direct graduate medical education (GME), inpatient prospective payment system (IPPS) indirect medical education (IME), or psychiatric hospital IME programs under 1886(d) (5) (B), 1886(h), or 1886(s) of the Social Security Act during the last calendar year for which such information is available.

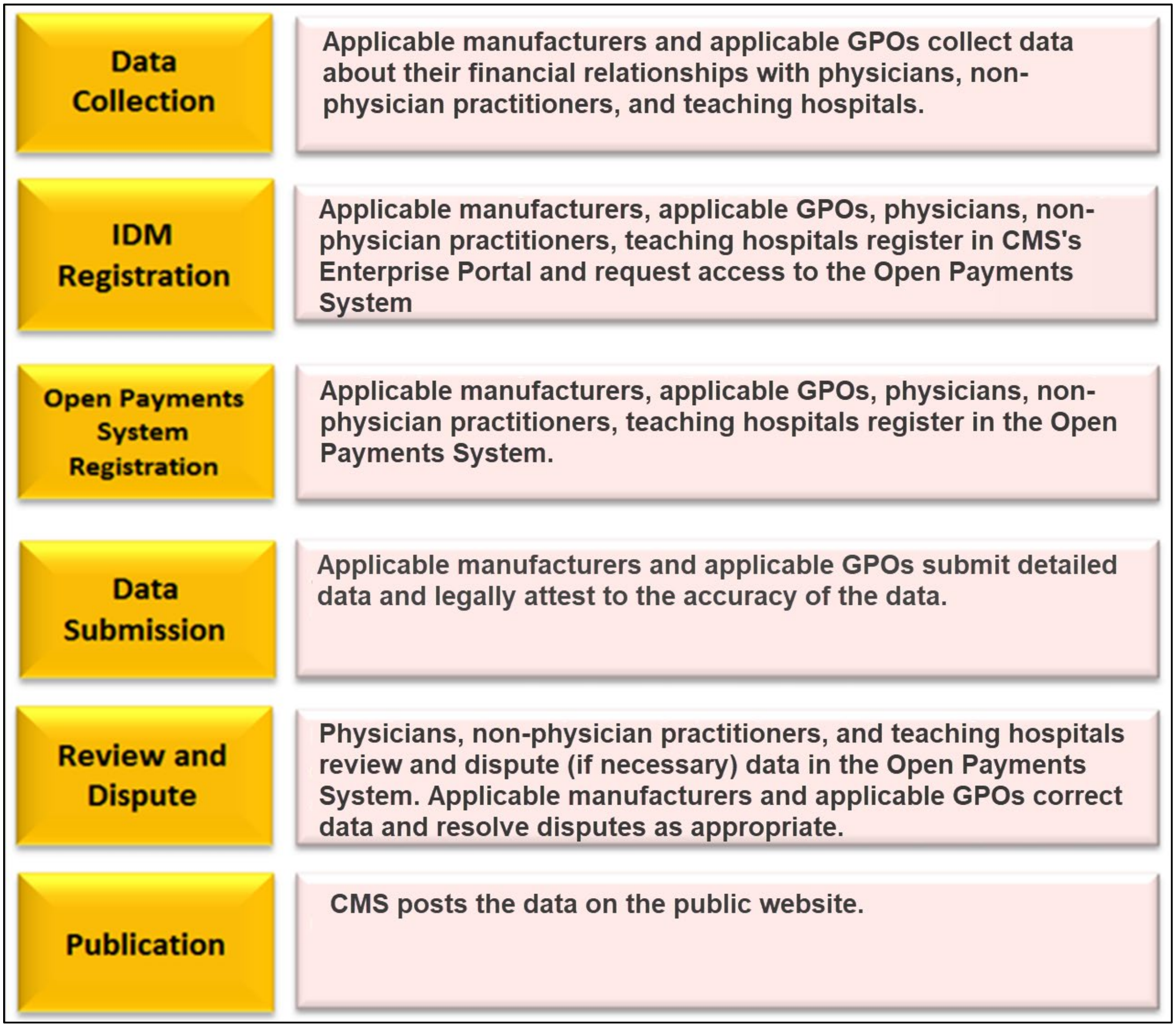
Additionally, applicable manufacturers and applicable GPOs are required to report ownership or investment interests in the entity held by a physician (referred to as a physician owner or investor) or the physician's immediate family members, and report payments or other transfers of value to these physicians holding ownership or investment interests. A physician's immediate family member is the physician's (1) spouse; (2) natural or adoptive parent, child, or sibling; (3) stepparent, stepchild, stepbrother, or stepsister; (4) father, mother, daughter, son, brother, or sister-in-law; (5) grandparent or grandchild; or the (6) spouse of a grandparent or grandchild.

Section 1.4: Open Payments System Overview

The Open Payments system is the tool developed to support Open Payments. Users will interact with the system to perform several functions based on their role.

Applicable manufacturers, applicable GPOs, physicians, NPPs, and teaching hospitals who participate in the Open Payments program must register in the Open Payments system. **Figure 4** provides a high-level process flow.

Figure 4: High-Level Process Flow for Open Payments



1.4a: Open Payments System Browser Requirements

The Open Payments system is a web-based application and can be run on one of the listed browsers below:

- Google Chrome (Version 89 or higher),
- Microsoft Edge (Version 89 or higher),
- Safari (Version 13.1.2), and
- Mozilla Firefox (Version 83 or higher) browsers.

1.4b: Functionalities within the Open Payments System

Users will perform functions within the Open Payments system based on what is required of them by the program and their specific user roles. Most of the functions required by Open Payments will require interaction with the Open Payments system.

Key functions of Open Payments system users include the following:

- For applicable manufacturers/applicable GPOs: Create a profile in the system, submit data into the system, verify the data, and attest to the accuracy of the data.
- For physicians/NPPs/teaching hospitals: Create a profile, review the data supplied by applicable manufacturers and/or applicable GPOs, and dispute or affirm the data.

This User Guide will cover functions of the system in detail in each chapter.

1.4c: Setting Email Filters to Accept Open Payments Emails

The Open Payments system will transmit emails to communicate with users. Take precautions to ensure that these emails are not directed into your junk mail or spam folders. Open Payments notification emails will come from the address openpaymentsnotifications@cms.hhs.gov.

1.4d: Accessibility Guidance

This section provides some basic guidance for keyboard and JAWS screen reader users. While not all screen reader users use JAWS and not all JAWS users have the same version, this guidance should be applicable to other screen readers and most versions of JAWS.

1.4d (1): "Skip to Main Content" Link

The "Skip to main content" link provides a shortcut to the main content of the page. Using the link allows a keyboard user to reach the core information on the page without having to tab through the global portal banner.

Screen reader users can use the link to jump their screen reader to the start of the portal content and skip the global banner area on each page. Activating the "Skip to main content" link brings the user to the beginning of the Open Payments content area on the page.

1.4d (2): Useful JAWS Keystrokes

The keystrokes given in **Figure 5** find the next occurrence of a particular element on a page. Using the Shift key at the same time will find the previous occurrence. These shortcuts allow a screen reader user to quickly jump their screen reader between the form fields on each page or explore the overall structure of the page by jumping between the different headings on the page that denote the start of different content areas on the page.

Figure 5: Useful JAWS Keystrokes

Key	What it finds	Why this is useful
F	Form field	The F key allows users to move from form field to form field. Many pages on the Open Payments website are made of forms. The F key allows JAWS users to determine what fields are on the Open Payments form pages quickly.
H	Heading	The H key allows users to move from heading to heading. Headings define the structure of many pages. Moving between sections of an Open Payments page allows for a quick guide to page structure and a way to access sections easily.

Section 1.5: Additional Information and Resources

CMS supports Open Payments system users through several different methods. These include webinars, Frequently Asked Questions (FAQs), step-by-step quick reference guides (QRGs), and technical support provided by the Open Payments Help Desk.

1.5a: Open Payments Website

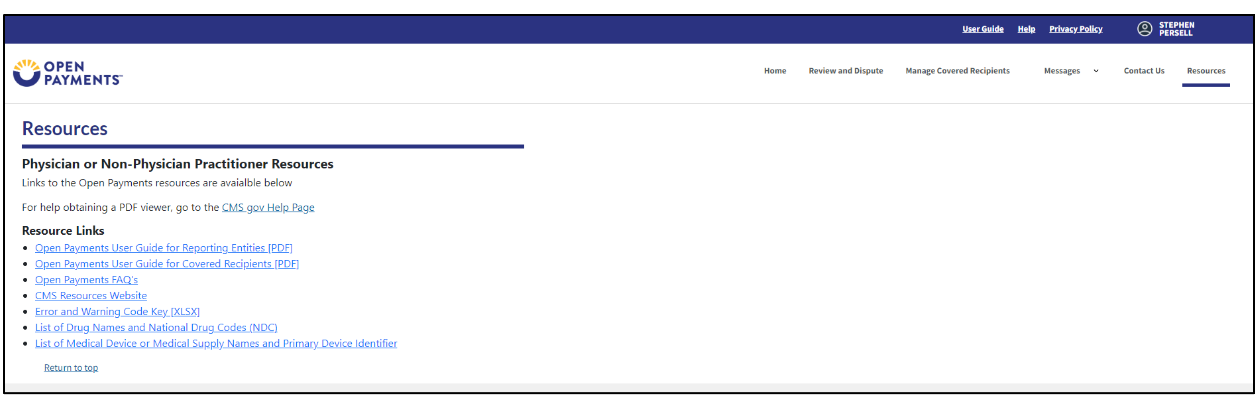
The Open Payments website at https://www.cms.gov/openpayments is your primary resource for information about Open Payments. This website contains numerous resources aimed at preparing and informing users about Open Payments regulations as well as the system. Check this website often for updated tools, resources, and important announcements on Open Payments.

1.5b: Open Payments Resources

CMS has developed many resources to help applicable manufacturers, applicable GPOs, physicians, NPPs, and teaching hospitals understand and participate in the Open Payments program. These resources cover topics such as registration, data collection and submission, the review and dispute process, and data publication. They can be found on the Resources page of the Open Payments website, at https://www.cms.gov/OpenPayments/Resources.

Covered recipients can also access the Open Payments User Guide for Covered Recipients, the Open Payments FAQ's and other useful resources within the Open Payments system on the "Resources" tab.

Figure 6: Open Payments System Resources Page



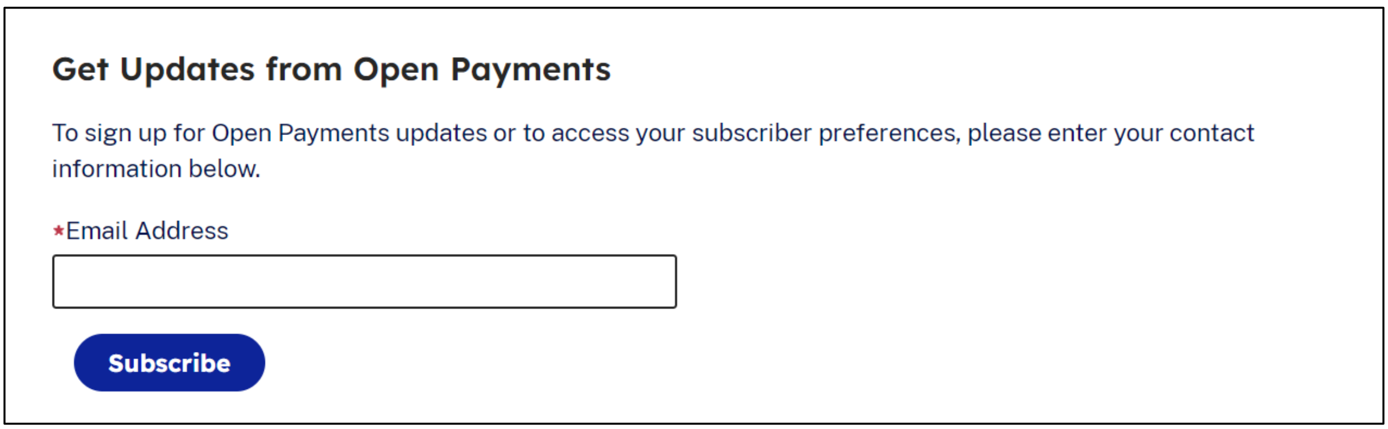
1.5c: Open Payments Help Desk

The Open Payments Help Desk serves as the single point of contact for all Open Payments-related inquiries. The Help Desk offers guidance on Open Payments, actions users can take in the system, and technical support. You can submit inquiries to openpayments@cms.hhs.gov or call 1-855-326-8366. For the TTY line, call 1-844-649-2766. The Help Desk's hours of operation are posted on the Open Payments website.

1.5d: Open Payments Mailing List

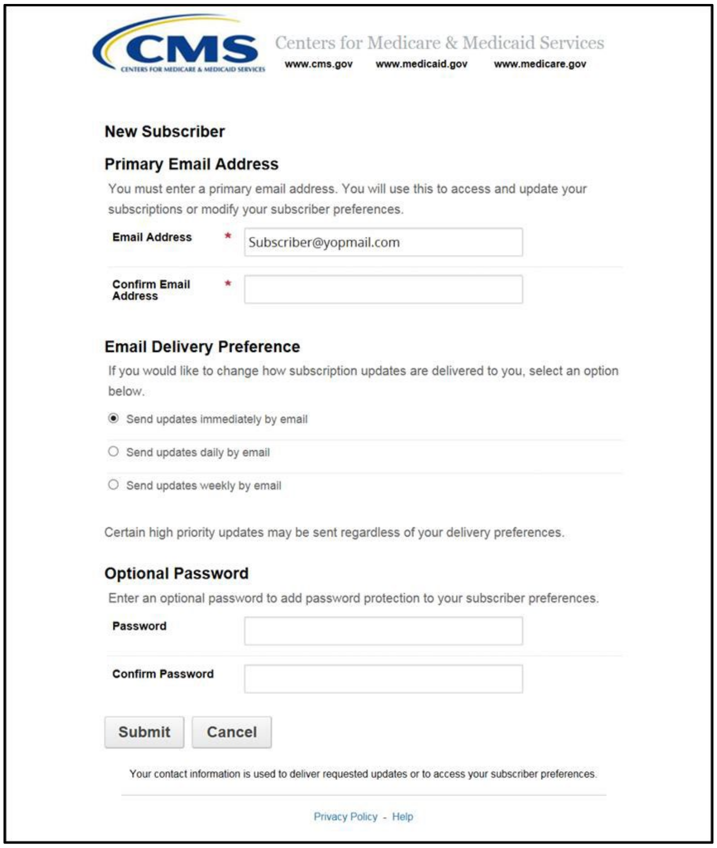
By registering for the Open Payments mailing list, you will be signed up to receive periodic email notifications regarding program, system, and resource updates. This is a good way to keep informed on any updates, changes, or important messages from CMS. To sign up for the Open Payments mailing list, visit the Open Payments website at https://www.cms.gov/priorities/key-initiatives/open-payments/contact and enter your email address at the bottom of the home page.

Figure 7: Receive Email Updates



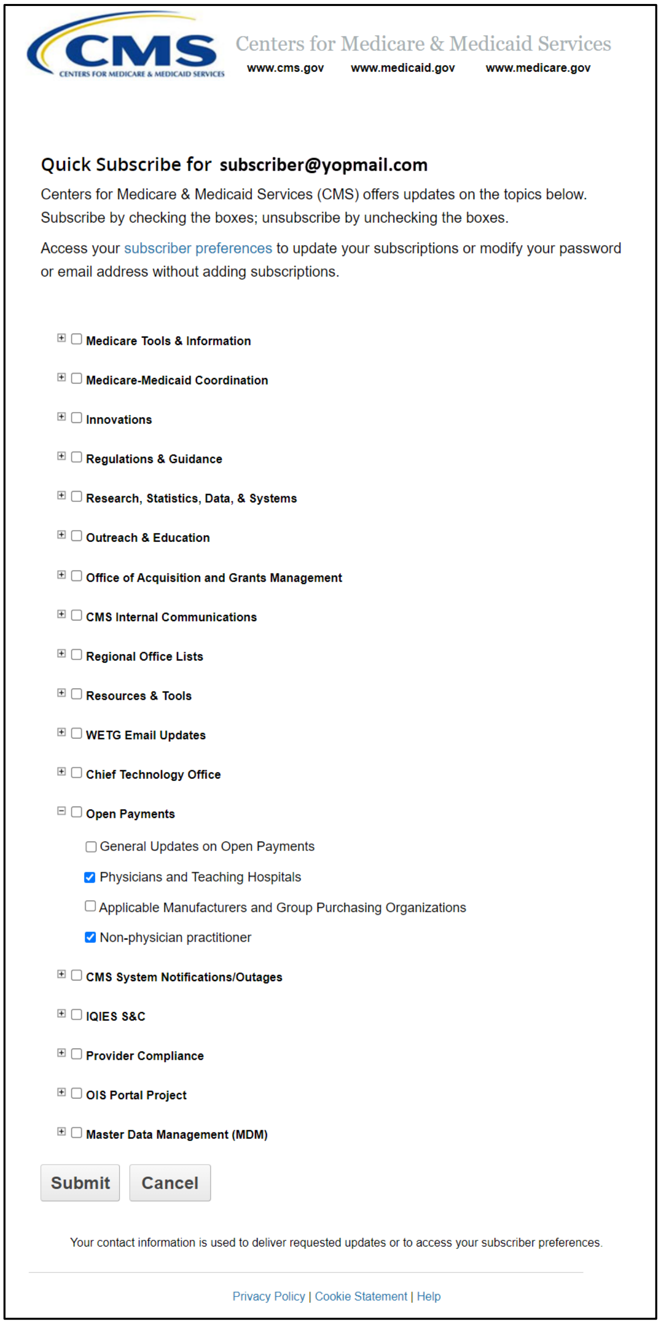
Entering your email address will take you to a page where you can select which mailing list you want to subscribe to.

Figure 8: CMS New Subscriber Screen



Under the Section “Open Payments,” select “General Updates on Open Payments” and then the “Submit” button at the bottom of the page to join the mailing list. You may also select either the boxes entitled “Physicians and teaching hospitals”, “Non-physician practitioner”, or “Applicable Manufacturers and Group Purchasing Organizations”. Make sure you also select the general updates box to ensure you receive all appropriate email updates.

Figure 9: Quick Subscribe



Reporting and Data Collection

Chapter 2: Introduction to Reporting and Data Collection

This chapter provides information about data collection for entities required to report certain payments and other transfers of value in Open Payments.

Data is reported to the Open Payments system through bulk file uploads using character-separated values (CSV) files and through manual data entry through a graphic user interface (GUI).

A complete listing of metadata elements used for payments data input into the Open Payments system can be found in the "Submission Data Mapping Document." Due to changes in record formats, there are three versions of the Submission Data Mapping document, one for Program Years "2016-2020", one for Program Years 2021-2022, one for Program Years "2023 and Onwards". The three documents are available on the Resources page of the Open Payments website at https://www.cms.gov/OpenPayments/Resources. These documents provide specific, detailed descriptions of the information that must be collected by reporting entities to document general, research, and physician ownership/investment interest payments.

Section 2.1: General Payments Reporting and Data Collection

This section on general payments reporting and data collection provides information about data collection for entities required to report certain general payments and other transfers of value in the Open Payments system. Five categories of information related to general payments made by applicable manufacturers and applicable GPOs to recipient physicians, NPPs, and teaching hospitals are captured during data collection; these categories are shown in the bulleted list below.

Submission File Information contains metadata elements collected to properly identify and attribute submitted files.

Recipient Demographic Information identifies the recipient of the general payment or other transfers of value.

Associated Drug, Device, Biological, or Medical Supply Information identifies the drug, device, biological, or medical supply that is related to the payment or other transfers of value.

Payment or Other Transfers of Value Information specifies information regarding the general payment or other transfers of value.

General Record Information captures other general information about the payment or other transfers of value.

On the Resources page of the Open Payments website (https://www.cms.gov/OpenPayments/Resources), users can find and download the CSV sample files that show how the data elements listed below will be reported to the Open Payments system.

Section 2.2: Research Payments Reporting and Data Collection

This section on research payments reporting and data collection provides information about data collection for entities required to report certain research-related payments and other transfers of value in the Open Payments system. Five categories of information related to research payments made by applicable manufacturers and applicable GPOs to covered recipient physicians, NPPs, and teaching hospitals are captured during data collection; these categories are shown in the bulleted list below.

Submission File Information contains metadata elements collected to properly identify and attribute submitted files.

Recipient Demographic Information identifies the recipient of the research payments or other transfers of value.

Associated Drug, Device, Biological or Medical Supply Information identifies the drug, device, biological, or medical supply that is related to the payment or other transfers of value.

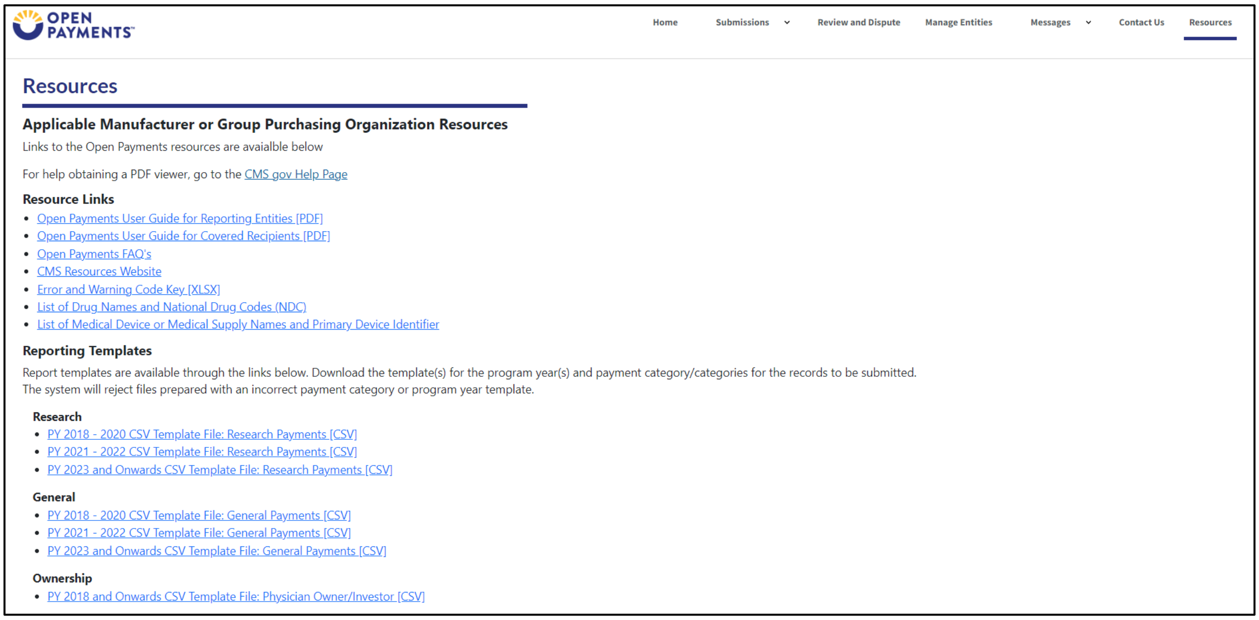
Payment or Other Transfers of Value Information specifies information regarding the research payment or other transfers of value.

Research-related Information captures specific information about payments or other transfers of value for research activities.

On the Resources page of the Open Payments website (https://www.cms.gov/OpenPayments/Resources), users can find the CSV sample files that show how the data elements listed below will be reported to the Open Payments system.

Users who hold a submitter role can access submission templates within the Open Payments system on the "Resources" tab.

Figure 10: Open Payments System "Resources" Tab for Reporting Entities



Section 2.3: Physician Ownership/Investment Interests Reporting and Data Collection

This section on physician ownership/investment interests reporting and data collection provides information about data collection for reporting entities required to report physician ownership or investment interests in the Open Payments system.

Three categories of information related to ownership/investment interests held by physicians in applicable manufacturers and applicable GPOs are captured during data collection; these categories are shown in the bulleted list below.

Submission File Information contains metadata elements collected to properly identify and attribute submitted files.

Physician Demographic Information identifies the recipient of the ownership or investment interests.

Ownership or Investment Information captures information about the ownership or investment.

On the Resources page of the Open Payments website https://www.cms.gov/OpenPayments/Resources, users can find the CSV sample files that show how the data elements listed below will be reported to the Open Payments system.

Registration

Chapter 3: Physician, NPP, and Teaching Hospital Registration

This chapter provides Open Payments system registration information for physicians, non-physician practitioners (NPP), and teaching hospitals collectively referred to as “covered recipients”. All covered recipients who wish to review data reported about them must register into the Open Payments System.

This chapter is divided into the following sections:

3.1: **Registration Process Overview** provides an overview of the registration process. Registration includes creating a user account, requesting a role in the Open Payments system, and creating an Open Payments profile.

3.2: **Open Payments System Registration** provides an overview of the first step in registration. This includes how to create a login ID and password and how to request access to the Open Payments system.

3.3: **Open Payments System Users and User Roles for Physicians, NPPs, and Teaching Hospitals** provides walkthroughs of various scenarios for registering a physician, an NPP, or a teaching hospital in the Open Payments system.

3.4: **Open Payments Covered Recipient Users and User Roles** contains information on who is authorized to register in the Open Payments system and the user roles that may be filled by the Open Payments system users.

3.5: **Nominations** contains information on how to nominate other individuals for roles associated with physicians, NPPs, and teaching hospitals.

3.6: **Updating Profile Information in the Open Payments System** contains information on how physicians, NPPs, their authorized representatives, and users affiliated with teaching hospitals can update their Open Payments profile.

Section 3.1: Registration Process Overview

Covered recipients must register in the Open Payments system in order to view, review, and/or dispute data submitted about them.

Registration in the Open Payments system is a two-step process.

First, create a user account and select a role to access the system.

Second, create your Open Payments profile.

You must have a registered profile to review the payment data submitted by applicable manufacturers and applicable group purchasing organizations (together, known as "reporting entities").

Physicians, NPPs, and teaching hospitals are not required to participate, but are encouraged to do so to view information reported about them prior to CMS's publication of the data, as well as ensuring accuracy of the data.

Section 3.2: Open Payments System Registration

Creating an Open Payments system user account simultaneously generates a CMS Identity Management (IDM) system account. IDM is an identity management and services system that provides you with access to CMS applications, including the Open Payments system. Creating a user account provides you with login credentials **required** to access the Open Payments system.

If you already have an IDM account, please go to Section 3.2c "Requesting Access to the Open Payments System".

Each user in the Open Payments system must create and maintain their own account. For security purposes, this task cannot be delegated.

Once the account is created, login credentials may not be shared. "Group accounts" are not allowed in the Open Payments system.

You must maintain your user account and ensure all information is current.

- IDM will lock your user account if no activity is reported in the account for 60 or more days. When you log in after 60-days, the system will display the "Unlock my Account" view. To unlock the account, enter the user ID and correctly answer the challenge question. Then enter a new password in the input fields of "New Password" and "Confirm New Password". If the account does not reactivate, contact the Open Payments Help Desk at 1-855-326-8366. For the TTY line, call 1-844-649-2766.
- IDM will automatically deprovision your account if you have not logged in for two years or more. IDM will send out a series of deprovision warning emails to the email address in your account prior to deprovisioning. Once deprovisioned, the IDM account cannot be reactivated again, and you will be required to set up a new IDM account using steps in Section 3.2b and 3.2c, followed by steps in Section 3.3.

3.2a: System Requirements

CMS screens are designed to be viewed at a minimum screen resolution of 1024 x 768. For optimal performance, screen resolution should be set to 1920 x 1080. The following additional considerations optimize access to the Open Payments system:

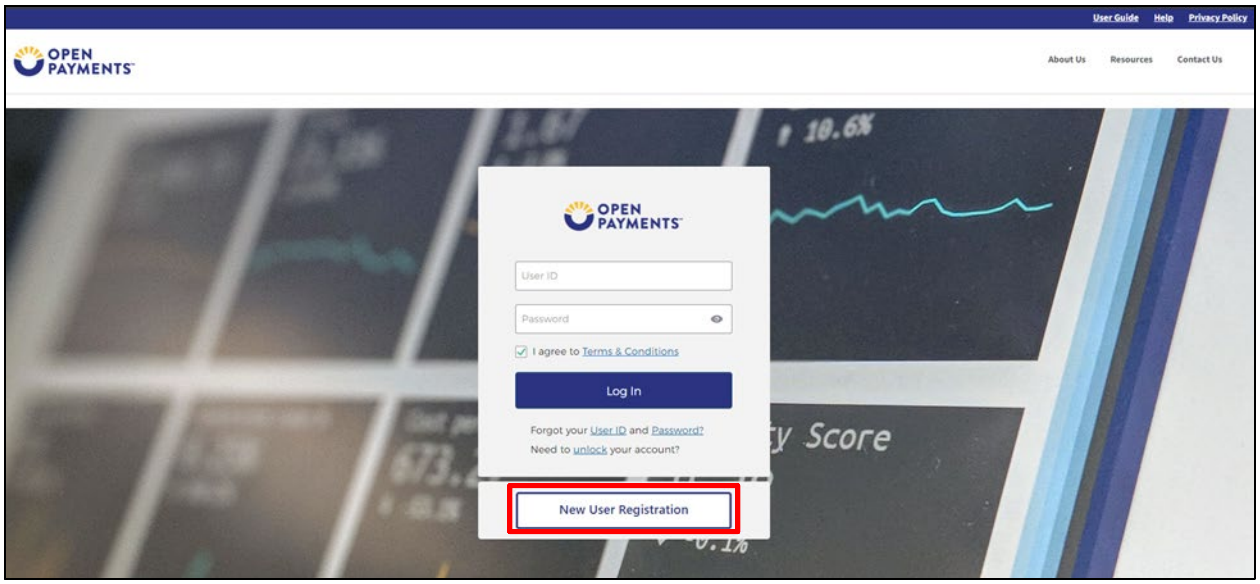
- Disable pop-up blockers prior to accessing CMS Enterprise Portal.
- Use one of the following browsers with JavaScript enabled:
    - Microsoft Edge
    - Chrome (recommended for optimal performance)
    - Firefox

- Safari

3.2b: Open Payments System New User Registration

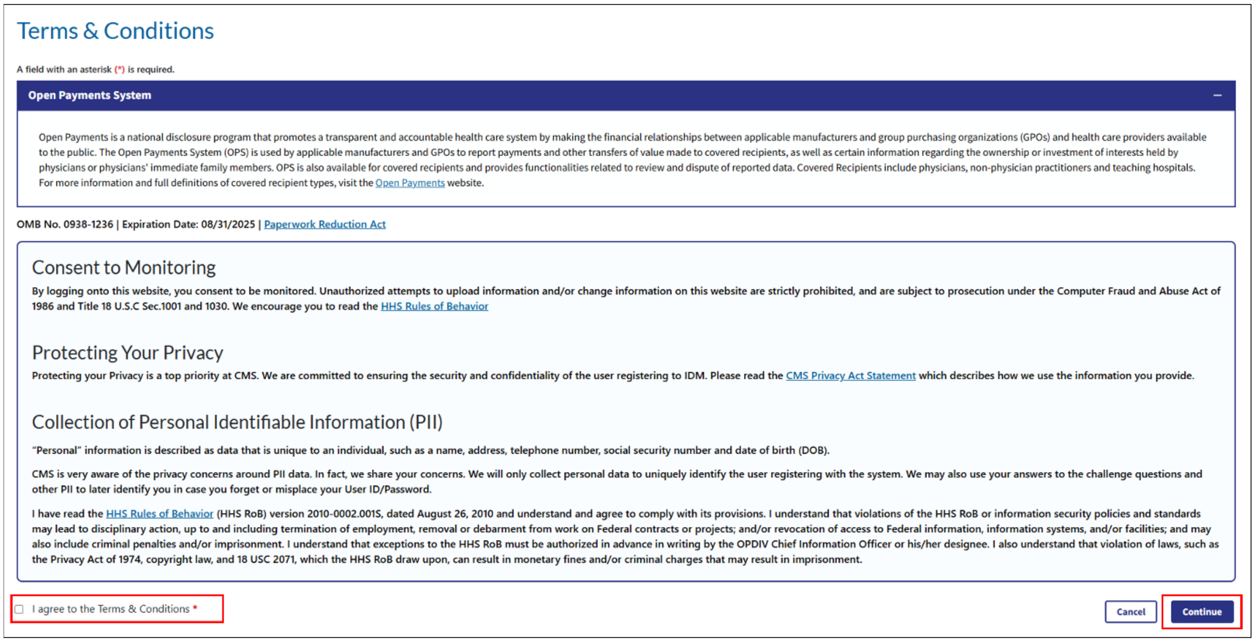
Step 1: Navigate to the Open Payments system website, https://openpayments.system.cms.gov, and select **New User Registration**.

Figure 11: Open Payments System Public Landing Page



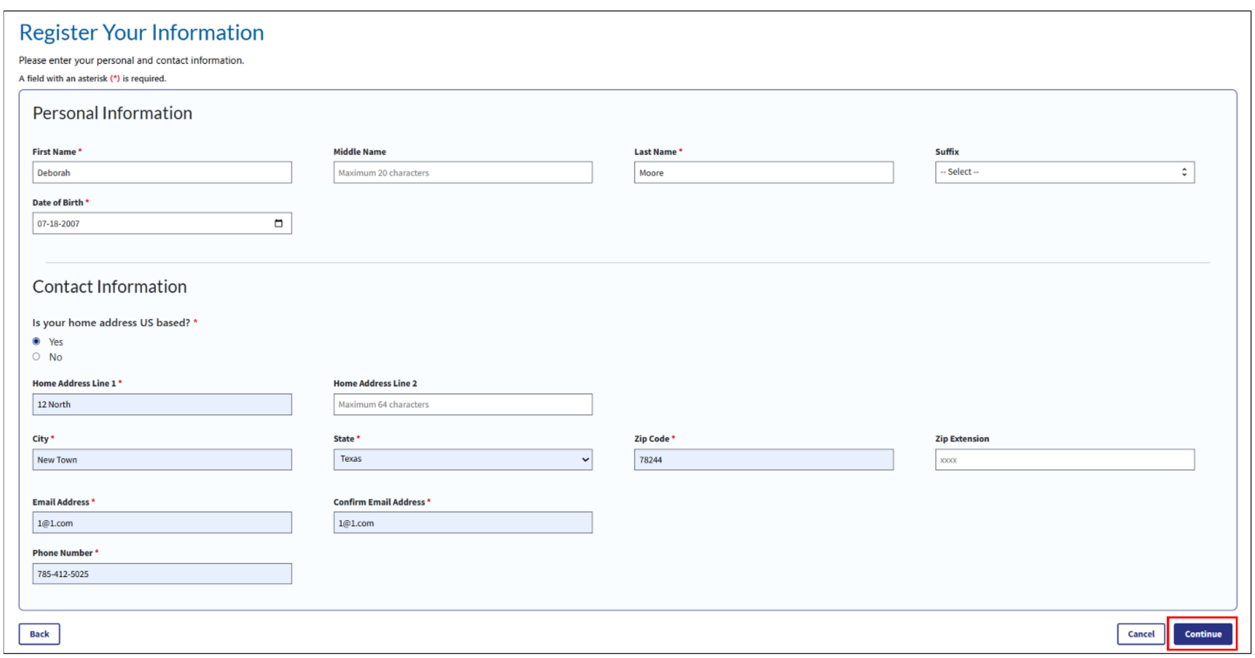
Step 2: Review and agree to the Terms and Conditions of the Open Payments system and then select **Continue**.

Figure 12: Terms and Conditions



Step 3: On the "Register Your Information" page enter your **personal** user information. Be sure to enter all information with required fields. Select the **Continue** button after entering all the information.

Figure 13: Register Your Information



NOTE FOR INDIVIDUALS WITH FOREIGN ADDRESSES: Individuals with addresses outside of the United States can register in IDM but may require manual identity proofing after requesting access to the Open Payments system.

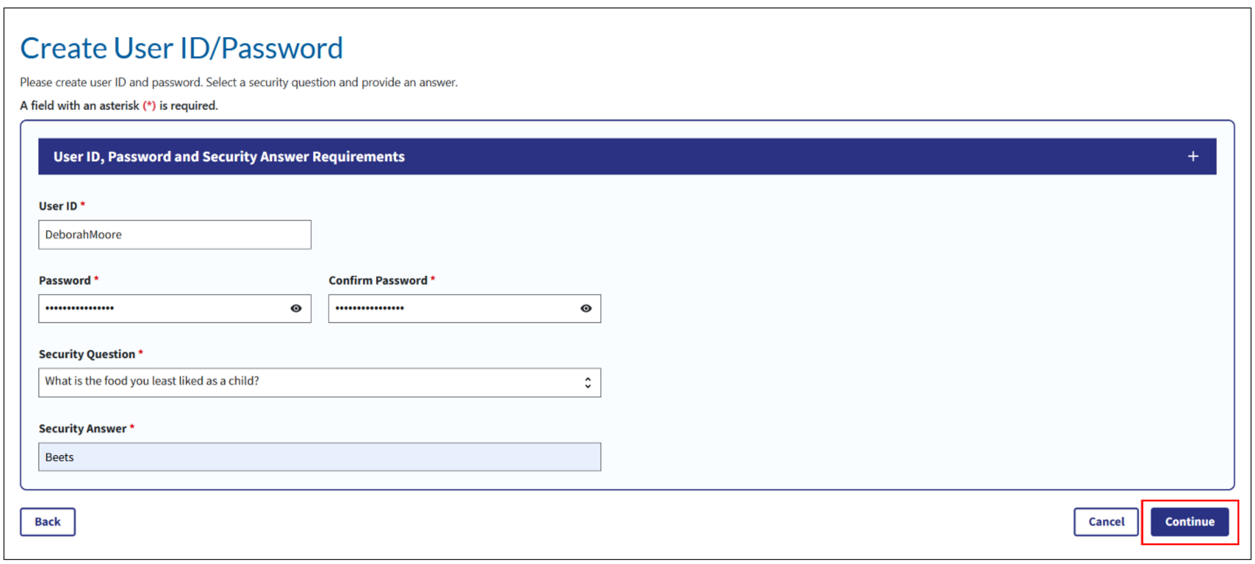
Step 4: On the “Create User ID, Password & Security Question/Answer” page, enter a user ID and password in accordance with the system’s requirements. You will use this user ID and password to log in. The system will ask you to select a security question and provide a security answer.

Select **Continue** when finished.

User IDs cannot be changed once your account is created.

Passwords do not expire if you log in at least every 60 days. If your password expires after 60 days, use the self-service kiosk on the login page by selecting “Need to unlock your account?”.

Figure 14: Create User ID and Password

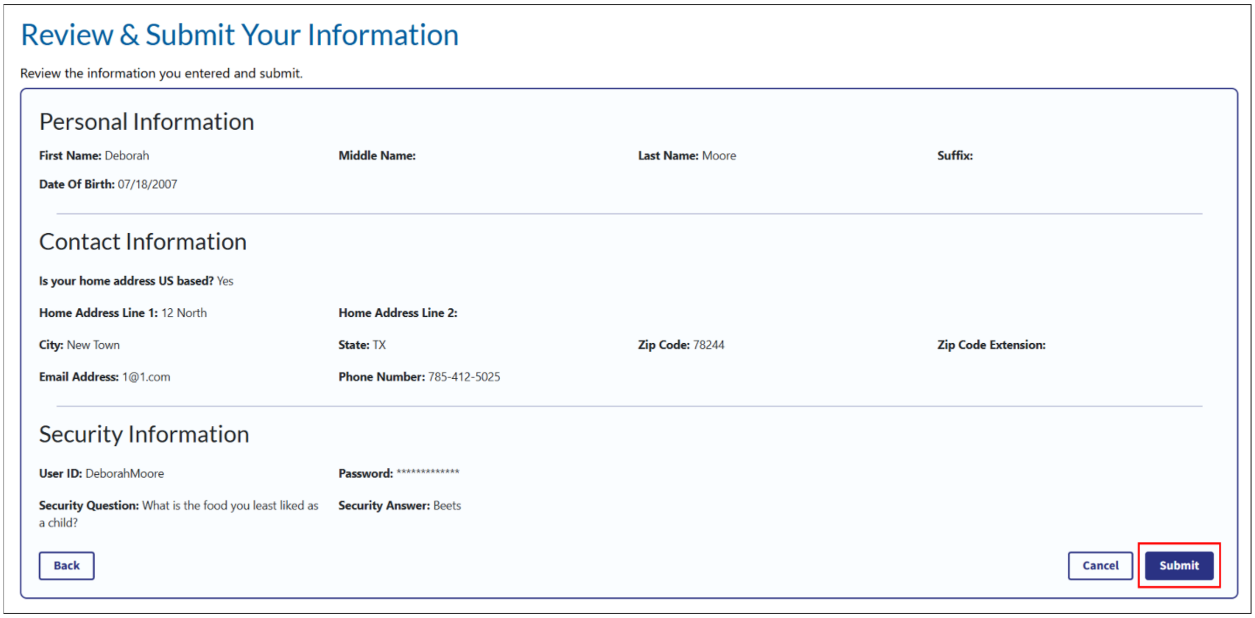


- The User ID:
  - Must be between 6 - 74 characters and contain at least one letter;
  - Can contain alphanumeric characters;
  - Allowed special characters are limited to hyphens (-), underscores (_), apostrophes ('), and periods (.)
  - The @ symbol is allowed only if the User ID is in a valid email address format (j.doe@abc.edu or 123@abc.com)
  - Cannot contain eight (8) consecutive numbers;

  - Cannot begin or end with special characters;
  - Cannot contain more than one (1) consecutive special character;
  - User IDs are not case-sensitive.
- Password Requirements:
  - Password must be a minimum of 15 characters;
  - Password must contain: one (1) upper case and one (1) lower case letter, and one (1) number;
  - The following special characters may be used: " ! # $ % & ’ ( ) * + , - . / \ : ; < = > ? @ [ ] ^ _ ` { | } ~
  - Password cannot contain: Parts of User ID, First Name, Last Name, common passwords;
  - Password can only be changed once every 24 hours;
  - Password must be different from the last six (6) passwords;
  - Password must not exceed 60 characters;
- Confirm password:
  - Confirm password;
  - Enter the same password;
- Select your security question:
  - Select a question from the drop-down list of questions;
- Security answer:
  - Can contain alphanumeric characters;
  - Can contain spaces;
  - Must be at least four (4) characters;
  - Cannot contain part of the security question;
  - Your security answer is required for you to reset your password or unlock your account

Step 5: On the "Review and Submit Your Information" page, review the information and make any necessary changes. Select the **Submit** button to enter the information.

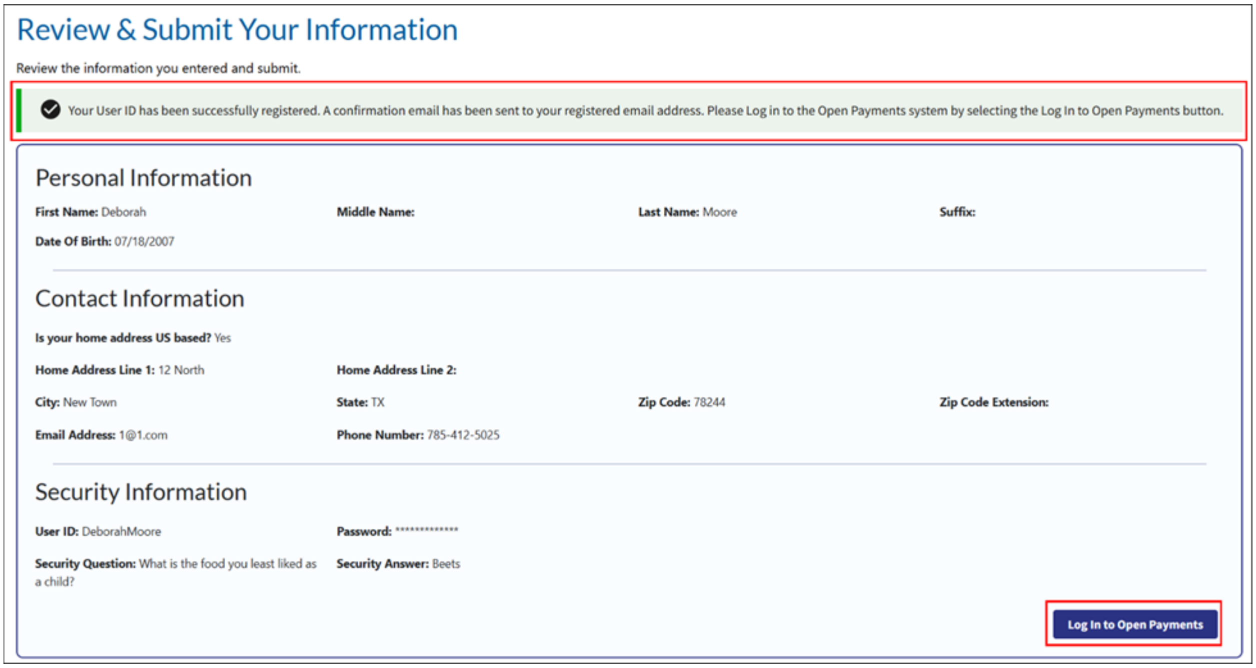
Figure 15: Review and Submit Your Information



Step 6: The system displays a "Confirmation" page acknowledging successful registration of your user account and emails you to confirm your user account creation.

Select **Log In to Open Payments** to continue to Section 3.2c "Requesting Access to the Open Payments system."

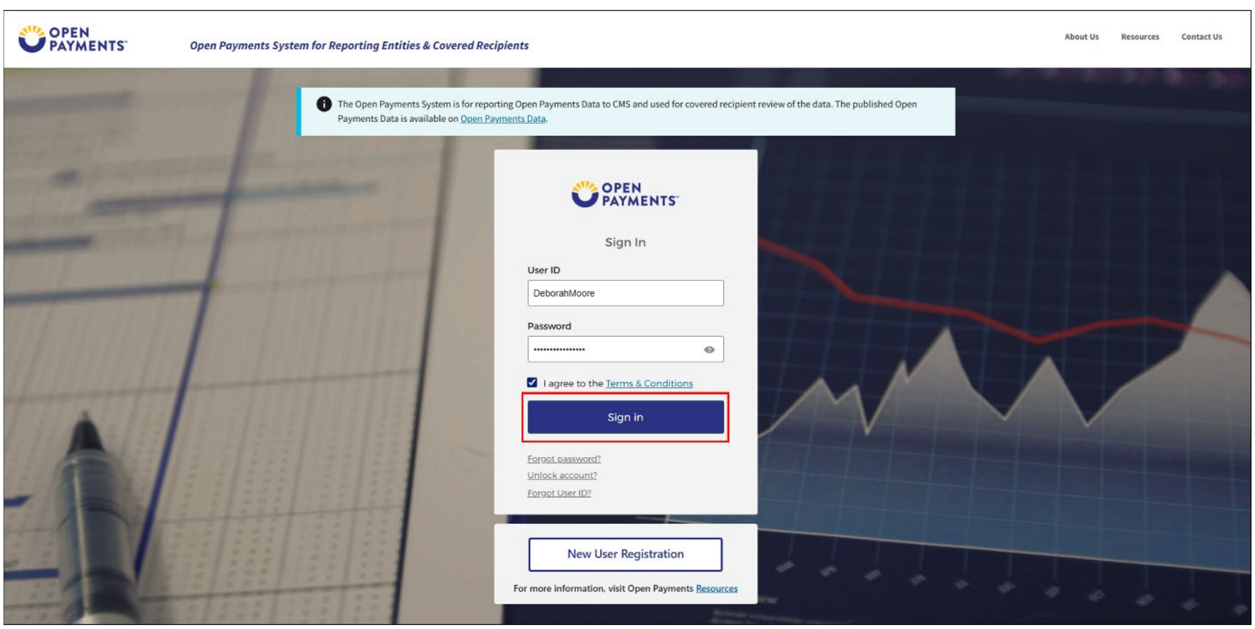
Figure 16: Registration Confirmation



3.2c: Requesting Access to the Open Payments System

Step 1: If you are not already on the Open Payments system page, go to the Open Payments system log in page. On the landing page, log in using your account credentials.

Figure 17: Log In Page

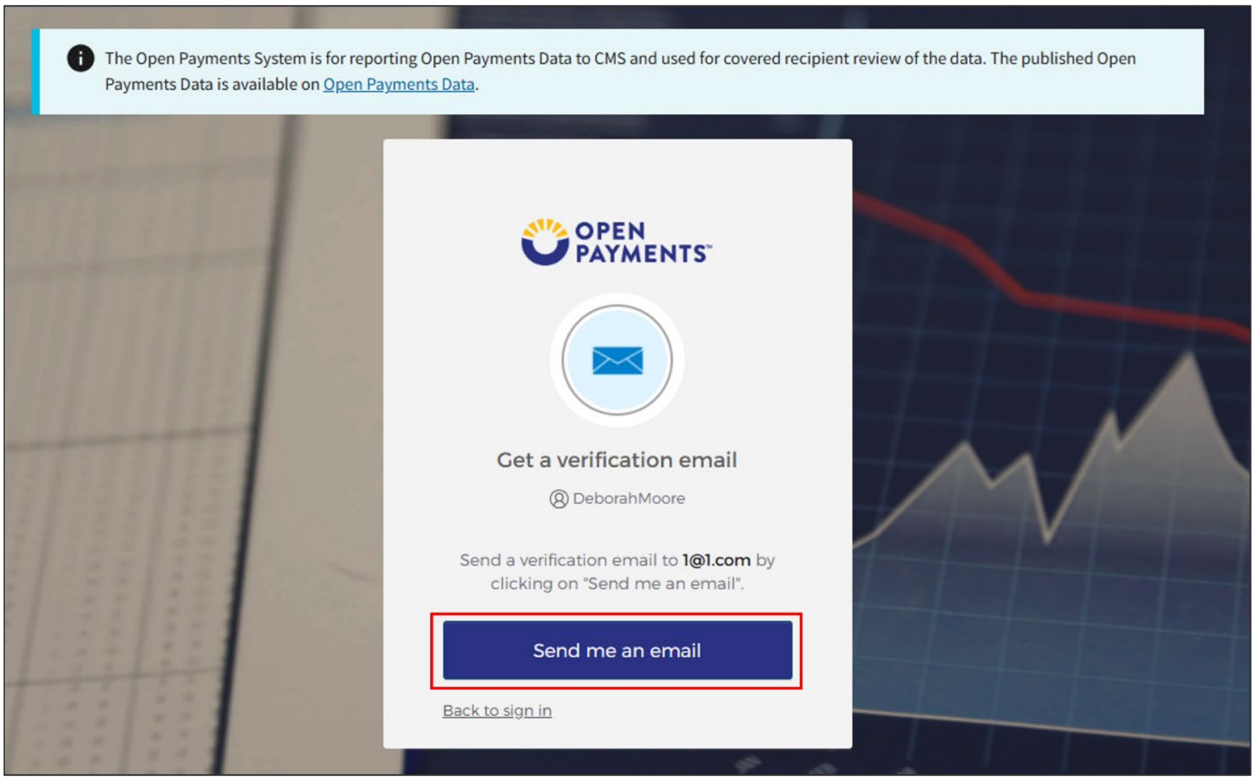


You will receive a prompt to enter a Multi-Factor Authentication (MFA) device.

The personal email address you entered during registration will become the initial MFA device by default. The email MFA is required and cannot be deleted. You may, however, change the email for the MFA.

To continue logging in to the system, select **Send me an Email** and enter the MFA code.

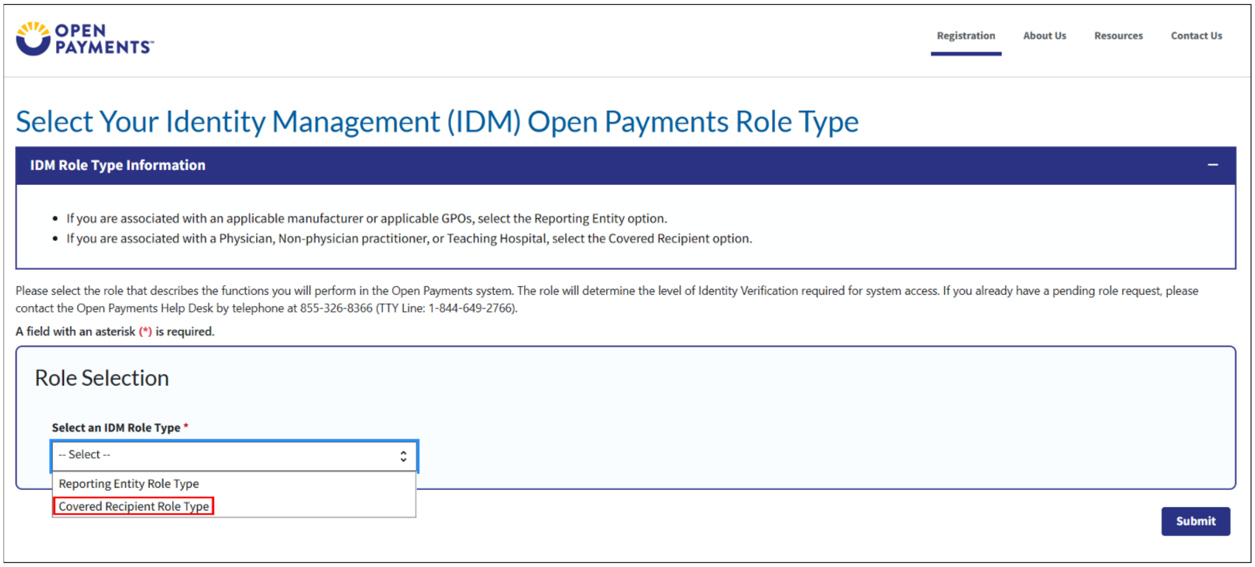
Figure 18: Multi-Factor Authentication Request



<u>Step 2:</u> On the “Select Your Identity Management (IDM) Role Type” page, select **Covered Recipient Role Type** from the dropdown to register as a covered recipient.

*If you are creating a reporting entity profile, please see Chapter 3 of the [Open Payments User Guide for Reporting Entities]().

Figure 19: Select Your IDM Role



Step 3: There are three role types to choose from:

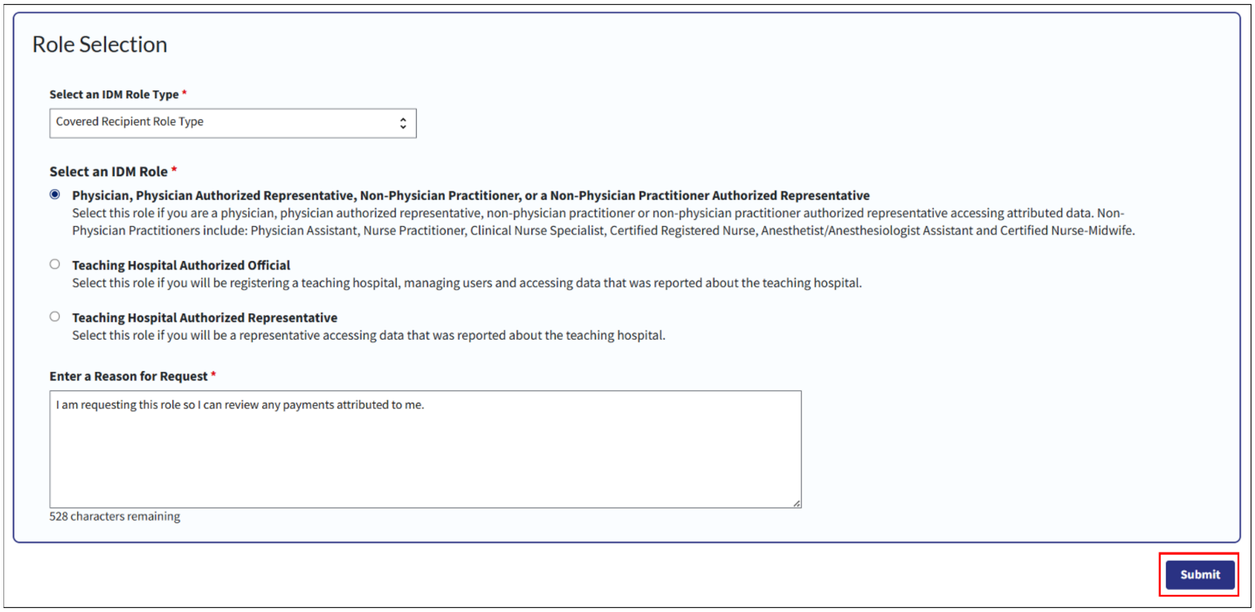
1. **Physician, Physician Authorized Representative, Non-Physician Practitioner, or a Non-Physician Practitioner Authorized Representative:** Select this role if you are a physician, physician authorized representative, non-physician practitioner or non-physician practitioner authorized representative accessing attributed data. Non-Physician Practitioners include: Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse, Anesthetist/Anesthesiologist Assistant and Certified Nurse-Midwife**. *If you select this role as a physician or NPP, continue to follow this workflow. If you select this role because you were nominated as an authorized representative, go to Section 3.5c to accept your nomination**

2. **Teaching Hospital Authorized Official:** Select this role if you will be registering a teaching hospital, managing users and accessing data that was reported about the teaching hospital. ***If you select this role, go to Section 3.3g to continue the registration process.**

3. **Teaching Hospital Authorized Representative:** Select this role if you will be a representative accessing data that was reported about the teaching hospital. ***If you select this role, go to Section 3.5e to accept your nomination as an authorized representative.**

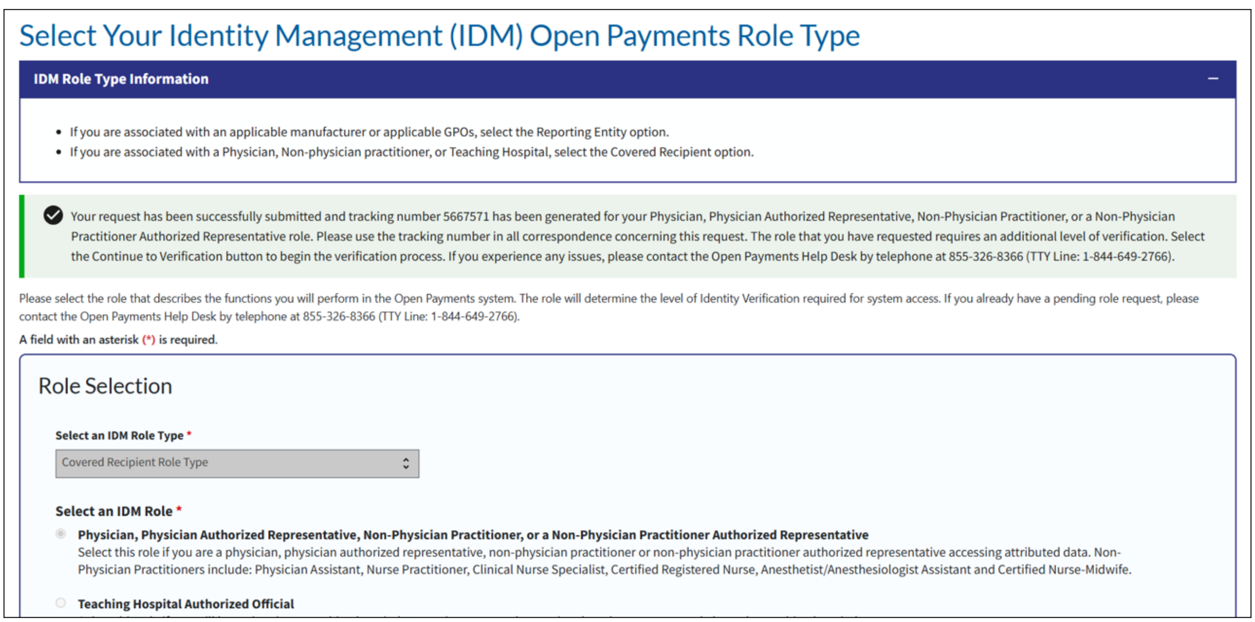
After selecting your role type, complete the **Enter a Reason for Request** box with a brief explanation. Select **Submit** after completing.

Figure 20: Select Your Role



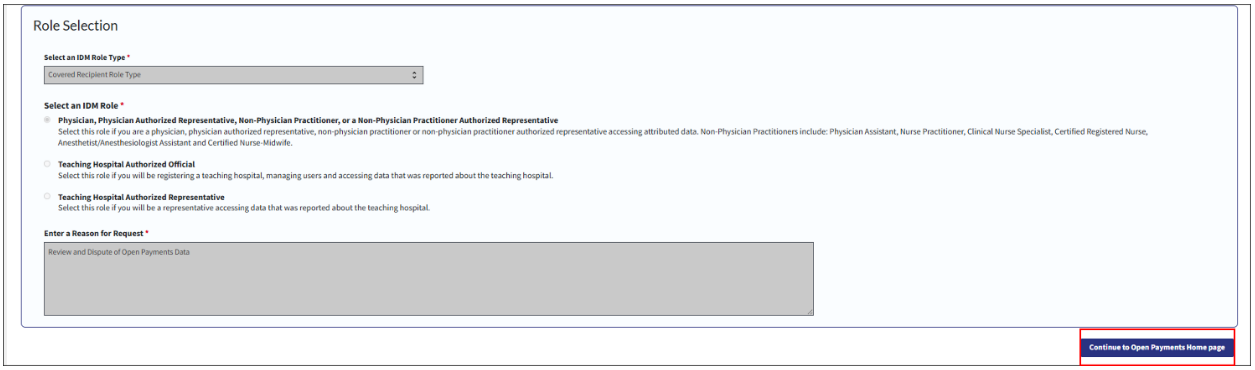
Step 4: You will receive confirmation that you requested a role.

Figure 21: Role Request Confirmation



Step 5: Select **Continue to Open Payments Home page**. This will take you to the Open Payments System homepage where you can begin creating your Open Payments profile.

Figure 22: Continue to Open Payments Home Page



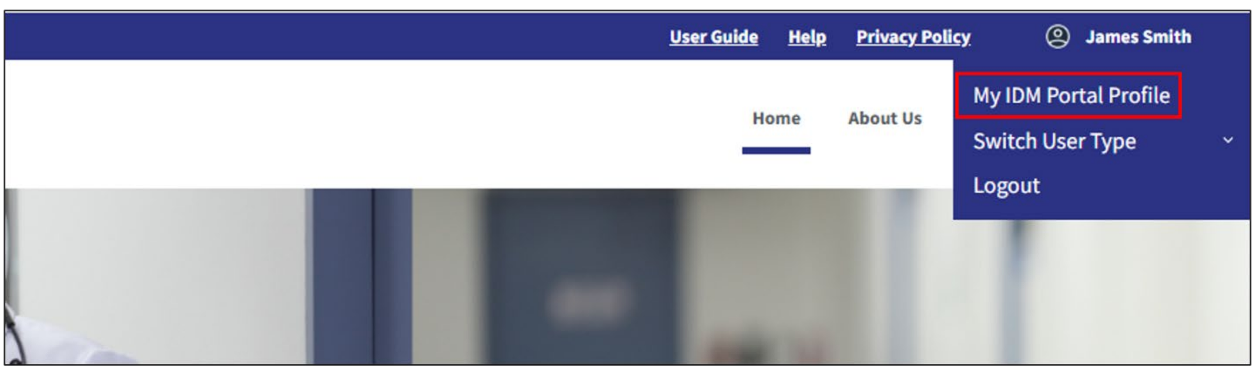
3.2d: Adding additional Multi-Factor Authentication (MFA) Devices

Multi-Factor Authentication (MFA) provides a second layer of security to your account. You should already have Email registered as your first MFA. Again, Email is a required MFA and cannot be removed.

IDM suggests having more than one MFA registered to your account as a backup. To add additional MFAs:

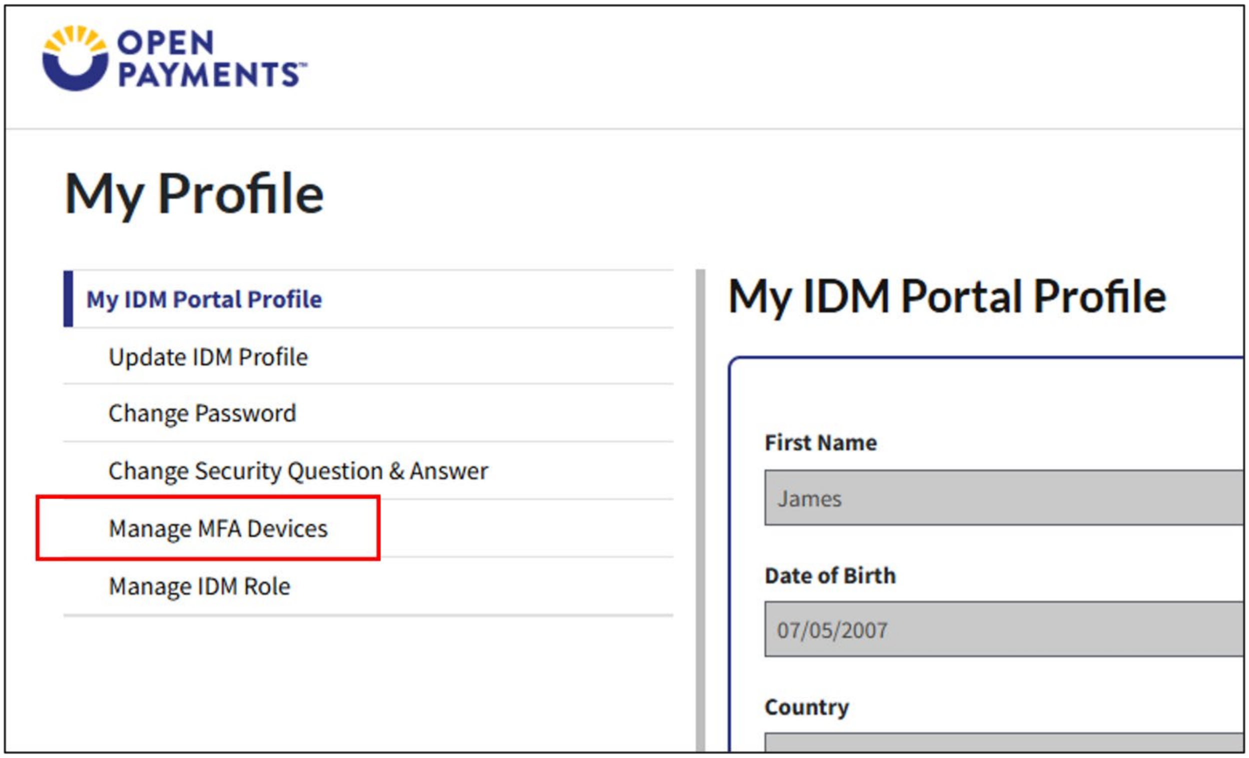
Step 1: Go to the Open Payments system and log in. Select **My IDM Profile** under your name in the upper-right hand corner of the system landing page.

Figure 23: My Profile



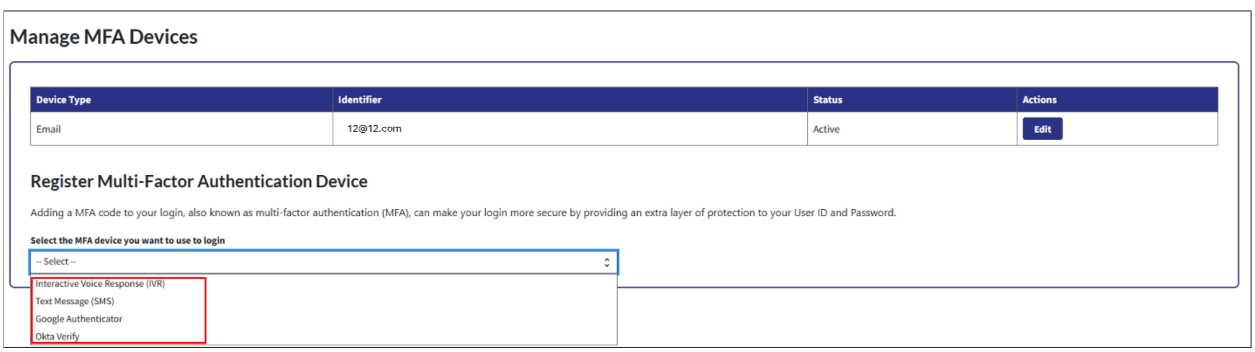
Step 2: Select **Manage MFA Devices**.

Figure 24: Manage MFA Device Register a Device Page



Step 3: Select the device you wish to register.

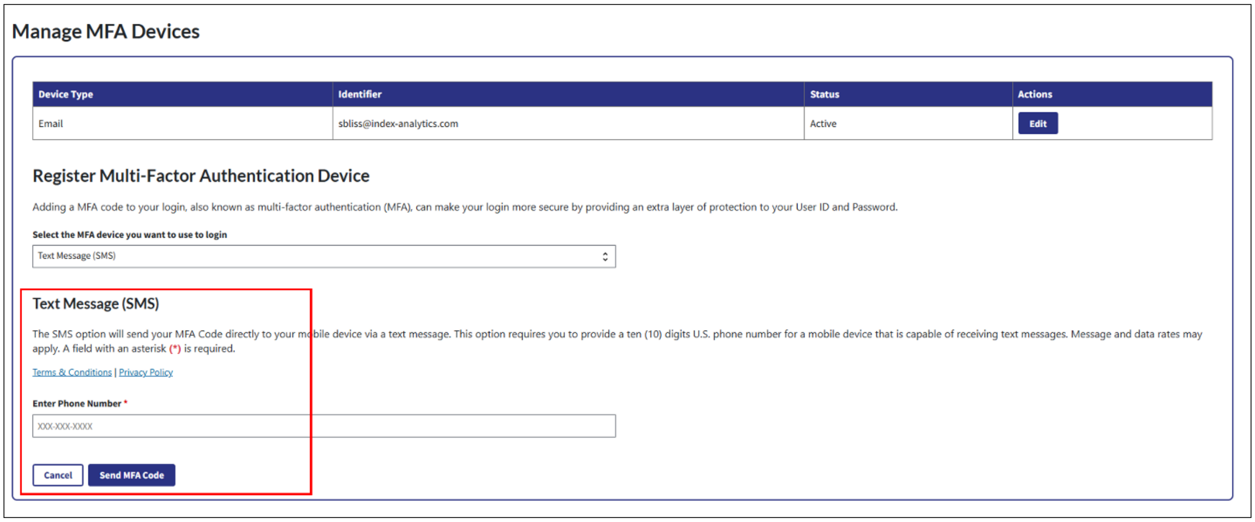
Figure 25: Register MFA Devices



Step 4: Depending on the device you choose to register, you will be asked to provide information about that device. For example, if you choose “Text Message”, you will be asked to provide a phone number.

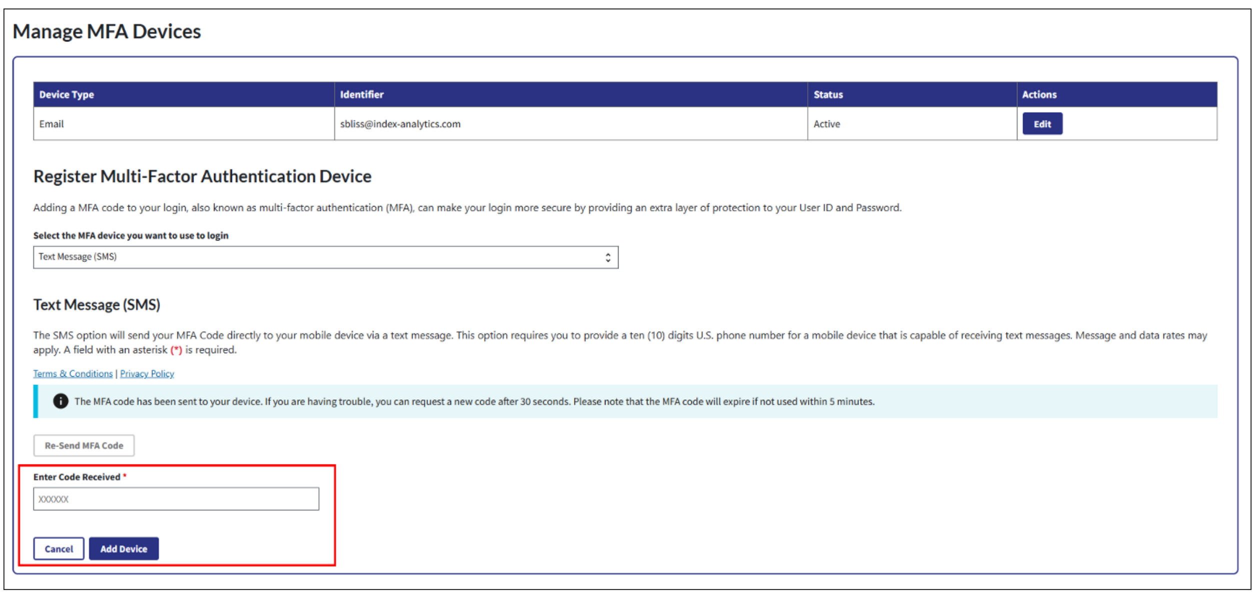
Enter the required information for the device you are registering and select **Send MFA Code**.

Figure 26: Send MFA Code



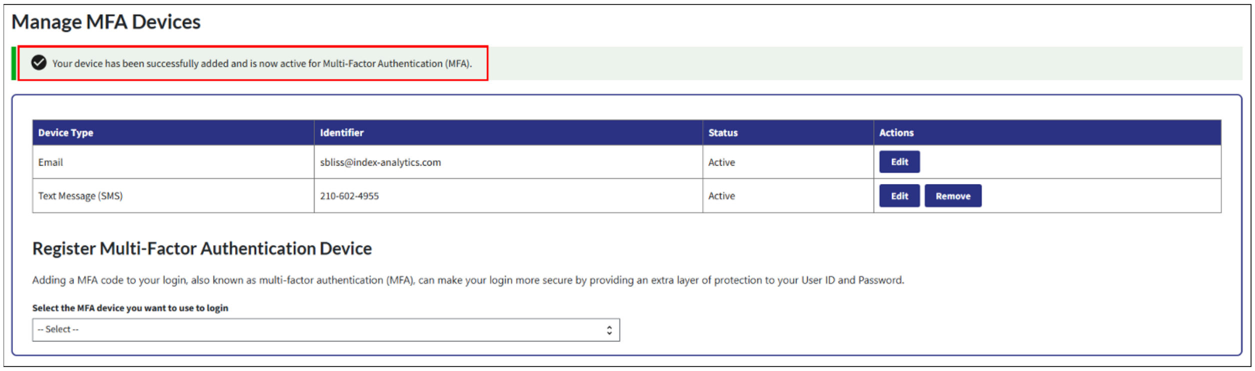
Step 5: Enter the code sent to your device and select **Add Device** to successfully add your MFA Device.

Figure 27: Enter MFA Device Code



Step 6: You have successfully added an MFA device to your account.

Figure 28: Manage MFA Devices Page



Section 3.3: Open Payments System Users and User Roles for Physicians, NPPs, and Teaching Hospitals

A physician and NPP must create a profile for him or herself in the Open Payments system and undergo a vetting process to be fully registered in the Open Payments system. See Section 3.3c for more information on physician vetting and section 3.3f for more information on NPP vetting. The physician and NPP profile process has five steps, as shown in **Figure 40** below. Details on these steps are included later in this chapter.

Figure 29: Physician and NPP Registration Process

Figures 41, 42, and 43 detail the fields which are required and optional when creating your physician or NPP user profile. It is important to have this information on hand prior to beginning the registration process.

Figure 30: Required and Optional Fields for Physician Profiles

Fields	Required or Optional?
Practice Name	Optional
Practice Business Address	Required
Covered Recipient Type	Required
Physician Primary Type	Required

Fields	Required or Optional?
National Provider Identifier (NPI)**	Optional (If you have an NPI, adding your NPI is required)
Drug Enforcement Administration (DEA) Number**	Optional
Taxonomy Code (at least 1)	Required
License State (at least 1)	Required
License Number (at least 1)	Required

Figure 31: Required and Optional Fields for NPP Profiles

Fields	Required or Optional?
Practice Name	Optional
Practice Business Address	Required
Covered Recipient Type	Required
Non-Physician Practitioner Primary Type	Required
National Provider Identifier (NPI)**	If you have an NPI, adding your NPI is required
Drug Enforcement Administration (DEA) Number**	Optional
Taxonomy Code (at least 1)	Required
License State (at least 1)	Required
License Number (at least 1)	Required

**The National Provider Identifier (NPI) must be entered if you have one. If you do not have an NPI, you can still proceed with registration.

Profile information submitted to Open Payments is associated with physician and NPP license numbers and NPI for the purposes of vetting. Therefore, when registering in the Open Payments system, physicians and NPPs must enter at least one of the state license numbers they hold, as well as their NPI number (if they have one).

Figure 32: Required and Optional Fields for Individual User Profiles

Fields	Required or Optional
First Name	Required
Middle Name	Optional
Last Name	Required
Suffix	Optional
Job Title (for physicians and NPPs)	Optional
Job Title (for authorized representative)	Required
Business Address	Required
Business Phone Number	Required

Fields	Required or Optional
Business Email Address	Required

Teaching hospitals are pre-populated into the Open Payments system based on the Open Payments Teaching Hospital List, which is maintained by CMS and updated annually. Teaching hospitals do not need to be vetted after profile creation and are approved automatically in the Open Payments system with a status of "vetted." CMS makes the current and past Teaching Hospital Lists available on the Resources page of the CMS Open Payments website at https://www.cms.gov/OpenPayments/Resources. Teaching hospitals not on the lists will not have payments or other transfers of value reported.

Teaching hospitals must register using the hospital's "Doing Business As" name rather than its legal name. In the Teaching Hospital List, the "Doing Business As" name is under the heading of "Hospital Name." The address should be the "NPPES Business Address." For directions on registering a teaching hospital for a prior program year, see Section 3.3i

Teaching hospital registration has five steps, as shown in **Figure 44** below. Details on these steps are included later in this chapter.

Figure 33: Teaching Hospital Registration Process

Figures 45 and 46 detail which fields are required and which fields are optional when creating teaching hospital and user profiles. It is important to have this information on hand prior to beginning the registration process.

Figure 34: Required and Optional Fields for Teaching Hospital Profiles

Fields	Required or Optional?
State Where Teaching Hospital is Located	Required
Teaching Hospital Doing Business As Name	Required
Teaching Hospital Business Address	Required
Taxpayer Identification Number (TIN)	Required

Figure 35: Required and Optional Fields for Individual User Profiles

Fields	Required or Optional?
First Name	Required
Middle Name	Optional
Last Name	Required
Suffix	Optional
Job Title	Required
Business Address	Required
Business Phone Number	Required
Business Email Address	Required
City Name	Required
State	Required
Zip Code	Required

The entire registration process takes approximately 30 minutes and must be completed in a single session. You cannot save entries or complete the profile later. You will be able to edit, manage, or update a profile once it is created.

The system times out after 30 minutes of inactivity and it does not have an auto-save feature. If the system times out, your updates will not be saved.

Important notes on Open Payments physician, NPP, and teaching hospital registration:

- If your teaching hospital was registered in a previous year, it does not need to be registered again.
- Registration must be completed in one session.
- Physicians and NPPs, if you do not know your 10-digit NPI number, you can find it on the NPI Registry, located at https://npiregistry.cms.hhs.gov/.
- If you cannot find your DEA number, contact the DEA Office of Diversion Control. Their website is https://www.deadiversion.usdoj.gov.

3.3a: Creating an Open Payments Profile as a Physician: First Time System Users

If you are registering as a physician and are a first-time user in the Open Payments system, follow the steps below.

If you are a physician or NPP who works in a teaching hospital and wish to see data related to you in your capacity as a physician or NPP, select the "Physician or Non-Physician Practitioner" option when registering. If you are a physician or NPP that works in a teaching hospital and wish to represent that teaching hospital as an authorized official or authorized representative, follow the instructions in Section 3.3g for registering a teaching hospital.

If you select the "Teaching Hospital" option, you will only be able to view payments made to the teaching hospital you are associating yourself with.

If you wish to see data related to you as a physician or NPP, you must create a profile as a physician or NPP by selecting the "Physician or Non-Physician Practitioner" option. You may be registered for both options and can alternate between physician and teaching hospital profiles using the "Switch User" functionality described in Section 3.3j.

* If you already have IDM login credentials but do not have an Open Payments system profile, visit Section 3.2c: "Requesting Access to the Open Payments System."

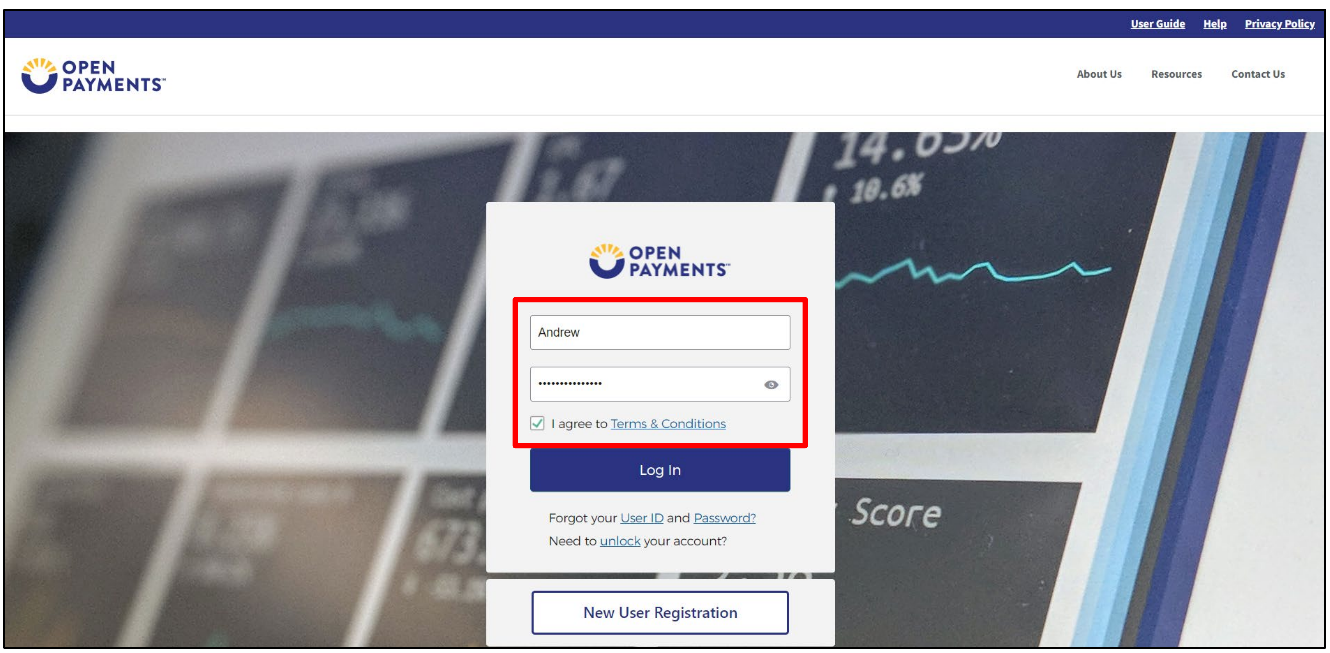
* If you already have an Open Payments system profile, go to Section 3.3b: "Creating a Profile as a Physician for a User with another Role (Returning System Users)". Teaching Hospital Users go to Section 3.3h: Registering a Teaching Hospital: Returning System Users"

Follow the steps below to create a new system user account:

Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and agree to the Terms and Conditions.

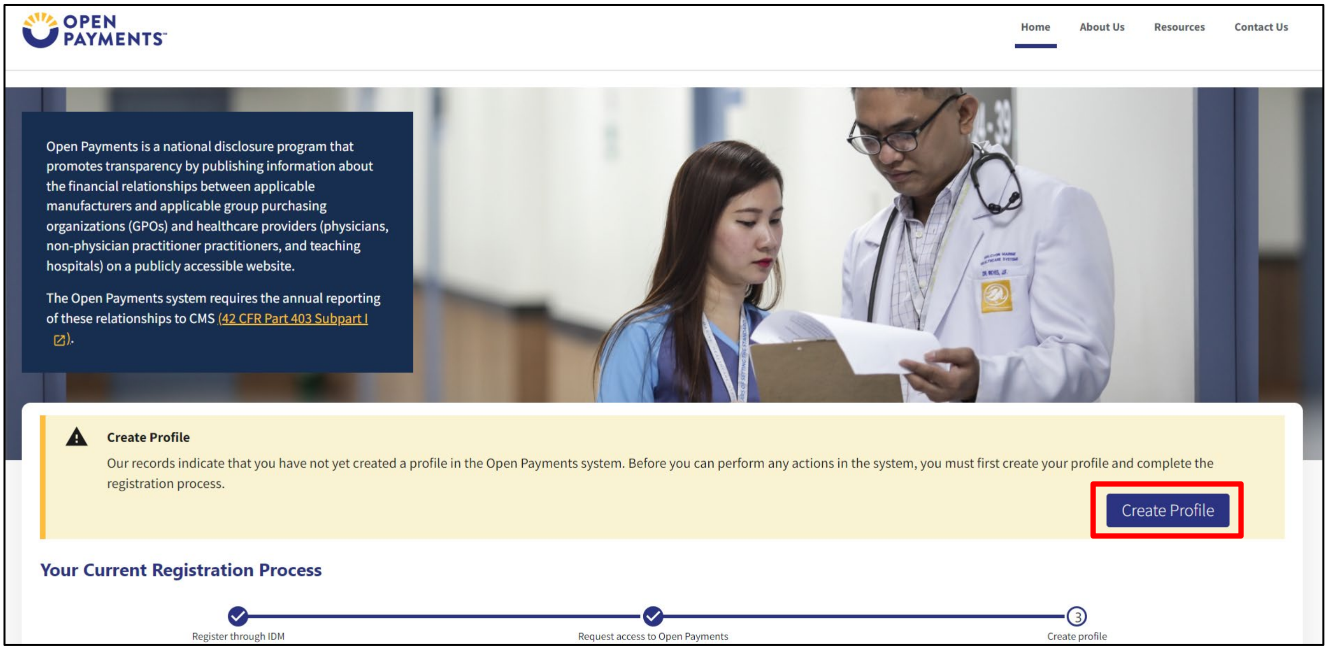
You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you input during initial registration will be the default MFA device.

Figure 36: Open Payments System Log In Page



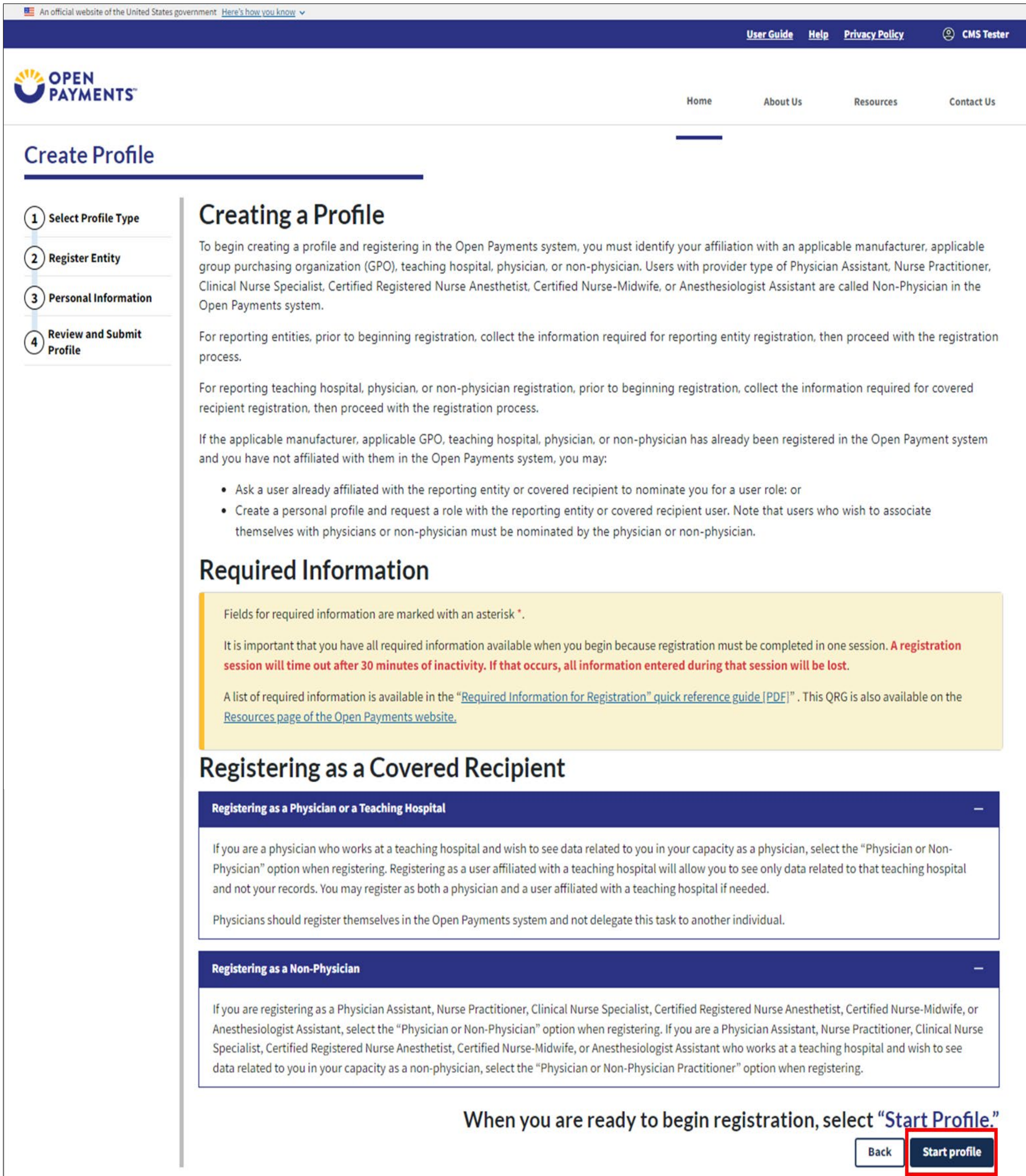
The on-screen text contains important information regarding the registration process. Read the on-screen text and select **Create Profile** when you are ready to begin the registration process.

Figure 37: Open Payments Home Page for First-Time System Users



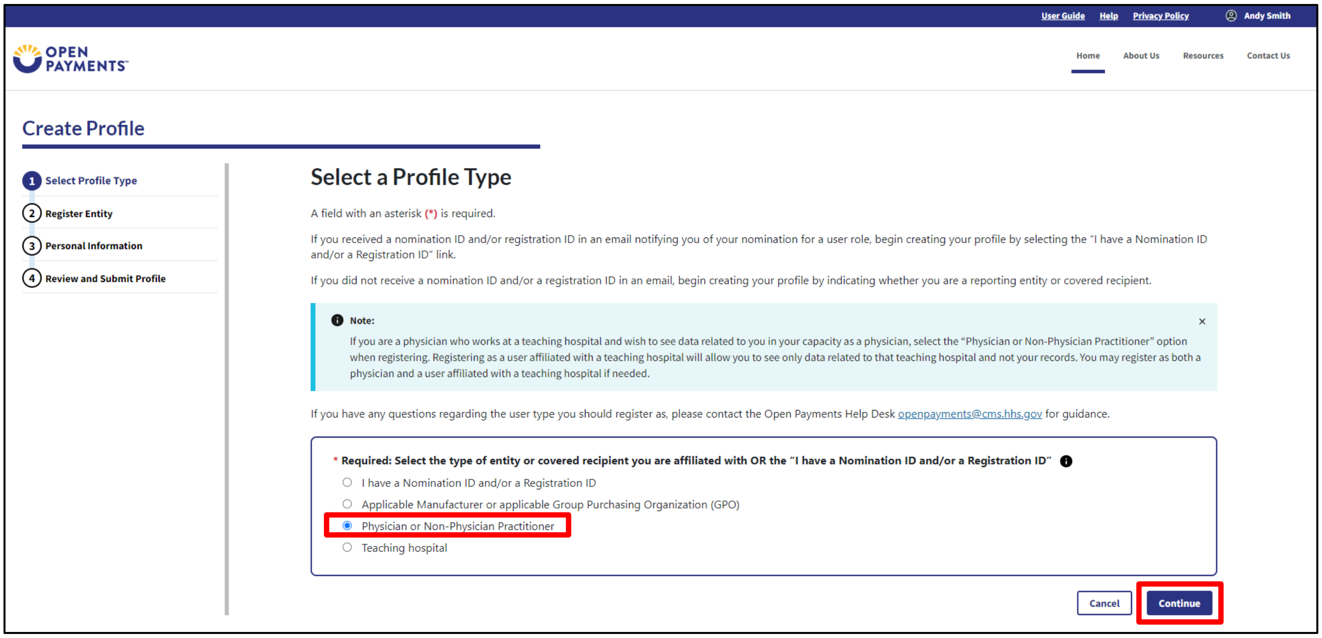
Step 2: The on-screen text contains important information regarding creating your physician profile. Read the on-screen text and select **Start Profile** at the bottom of the page when you are ready to continue.

Figure 38: Create My Profile Page



<u>Step 3:</u> Select the profile type **Physician or Non-Physician Practitioner** and select the **Continue** button.

Figure 39: Select Profile Type Page



Step 4: Enter your personal and business information. All required fields will be marked with an asterisk (*). You will not be able to proceed with registration until all the required fields have been entered. You may register with a foreign address by selecting "Country" field drop down value other than "United States".

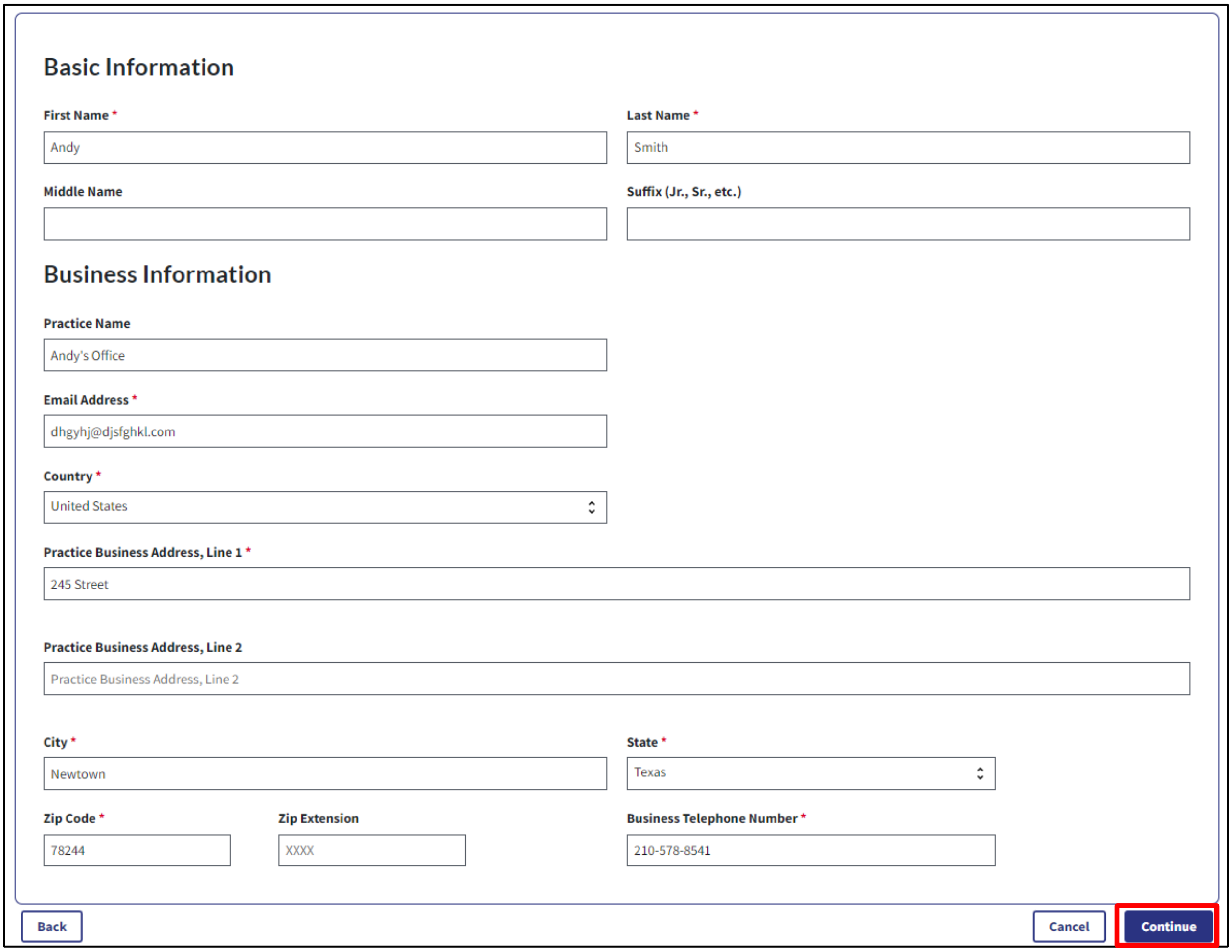
If you are registered with the National Plan & Provider Enumeration System (NPPES) or the Provider Enrollment, Chain and Ownership System (PECOS), the information you enter here must match the information in those systems for successful profile vetting. It is also helpful to ensure that you update your information on those websites as needed.

Once a physician or non-physician profile has been successfully matched using CMS data sources (also known as "vetted"), you will not be able to change the name or NPI referenced in your profile . If you need to modify these fields after they have become non-editable, contact the Open Payments Help Desk openpayments@cms.hhs.gov for assistance.

When done, select the **Continue** button.

Selecting the "Cancel" button will cause you to lose all data entered.

Figure 40: Covered Recipient Personal Information Page



<u>Step 5:</u> Enter your covered recipient details. All required fields will be marked with an asterisk (*).

The National Provider Identifier (NPI) and Drug Enforcement Administration (DEA) Number fields are not marked as required and must be entered if you have them. If you do not have these identifiers, you may proceed with registration.

- The ZIP Code you enter is validated to ensure it is a valid United States ZIP code and that it is within the "State" entered.
- If you have a National Provider Identifier (NPI), enter it exactly as listed in NPPES for the current calendar year.
- Enter at least one of your active state licenses. You may enter up to 50 licenses.

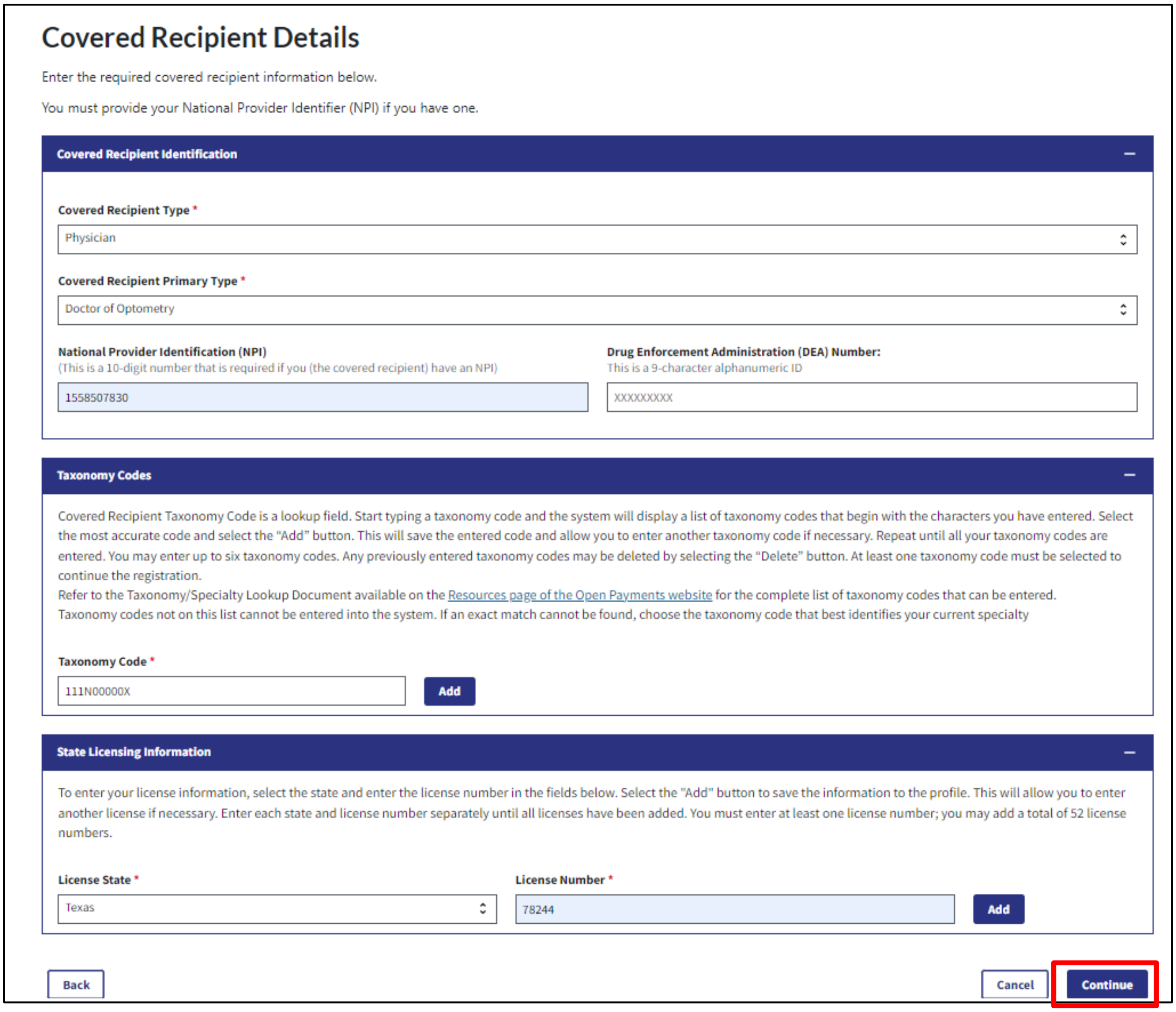
Taxonomy codes not on the approved taxonomy code list should not be entered. You may refer to the approved list on the Resources page of the Open Payments website (https://www.cms.gov/priorities/key-initiatives/open-payments/resources/reporting-entitities). As you begin entering information into the Taxonomy Code field, the system will provide a list of codes to help guide your entry. If your taxonomy code is not on the approved list, select the code that most closely represents your specialty. Select **Add** after entering each taxonomy code to add it to your profile.

To enter license information, select the state in which the license is held and enter the license number. Select the **Add** button to add the license. The license number field may contain up to 25 characters, including special characters such as hyphens (-). You are required to enter at least one license. If you input data into the field and select the **Continue** button before selecting the **Add** button, the system will provide an error message.

If you have licenses in more than one state, enter in the first state and license number and then select **Add**. Repeat until you have added any additional licenses as you deen necessary. You can enter up to 52 licenses.

When you are finished, select the **Continue** button.

Figure 41: Covered Recipient Details Page



Step 6: At this point in registration, you may nominate an individual to serve as your authorized representative within the Open Payments system. By default, "Designate an Authorized Representative" will be selected. **A physician cannot be his or her own authorized representative.**

Physicians may only nominate one authorized representative. However, an authorized representative may represent more than one physician or NPP.

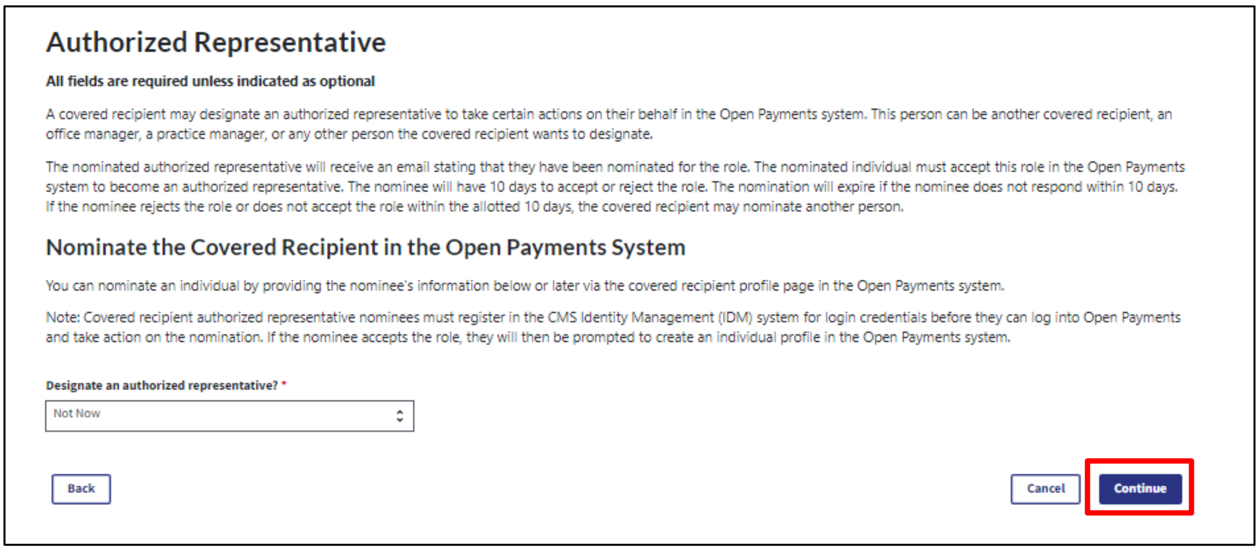
To nominate an authorized representative at this time, select **Yes** in the dropdown and enter the required information. You will also be asked to select the access level for the authorized representative. Authorized representative access levels are explained in depth in Section 3.4a. The access levels are also summarized on the page. When you are finished, select the **Continue** button.

You do not need to designate an authorized representative during initial registration and may do so later. If you choose not to designate an authorized representative during initial registration, select Not Now and then select the **Continue** button. Section 3.5a provides instructions on how to nominate an authorized representative after registration is complete.

Figure 53 shows how to NOT nominate an authorized representative.

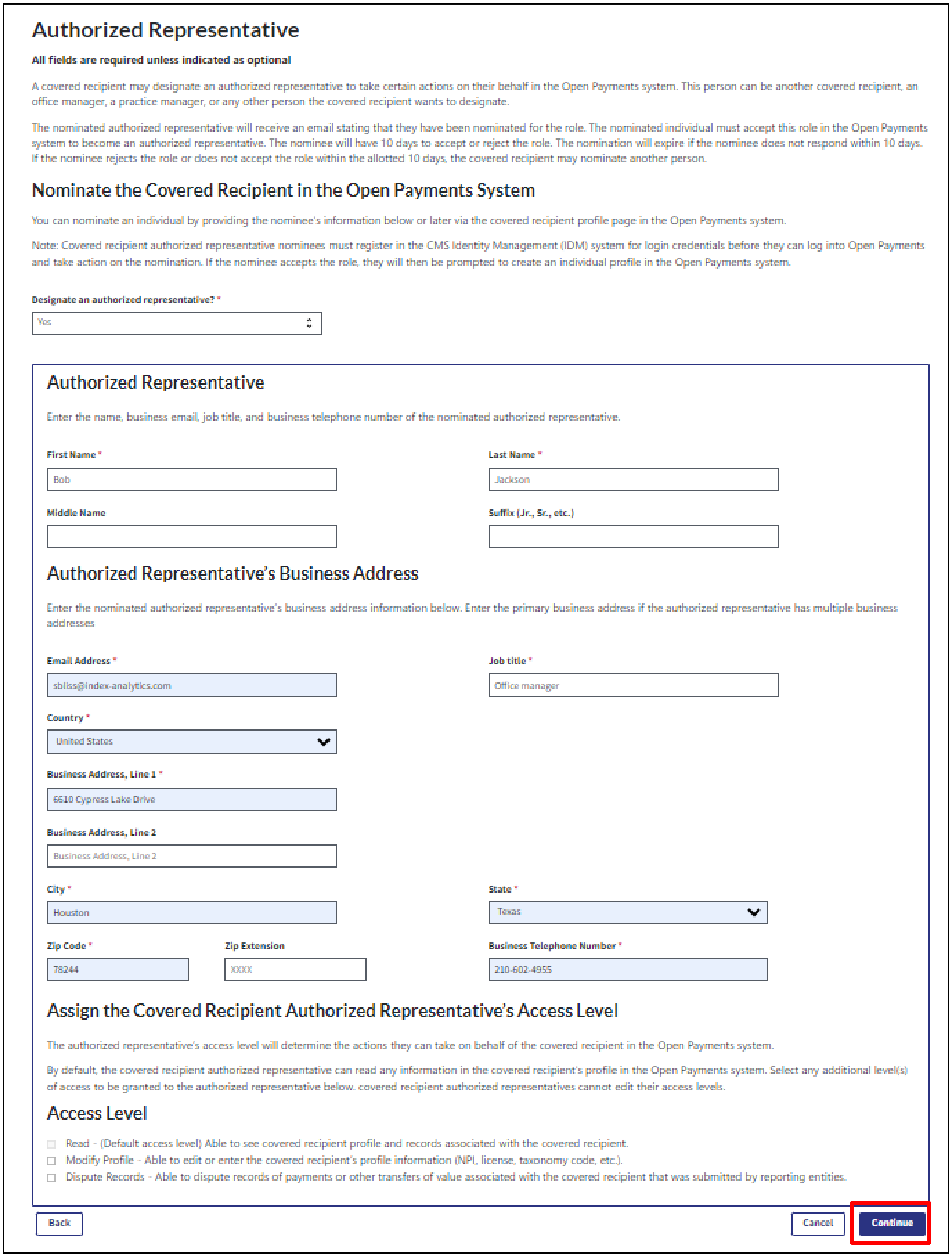
Figure 54 demonstrates the steps to nominate an authorized representative.

Figure 42: Decision to NOT Nominate an Authorized Representative



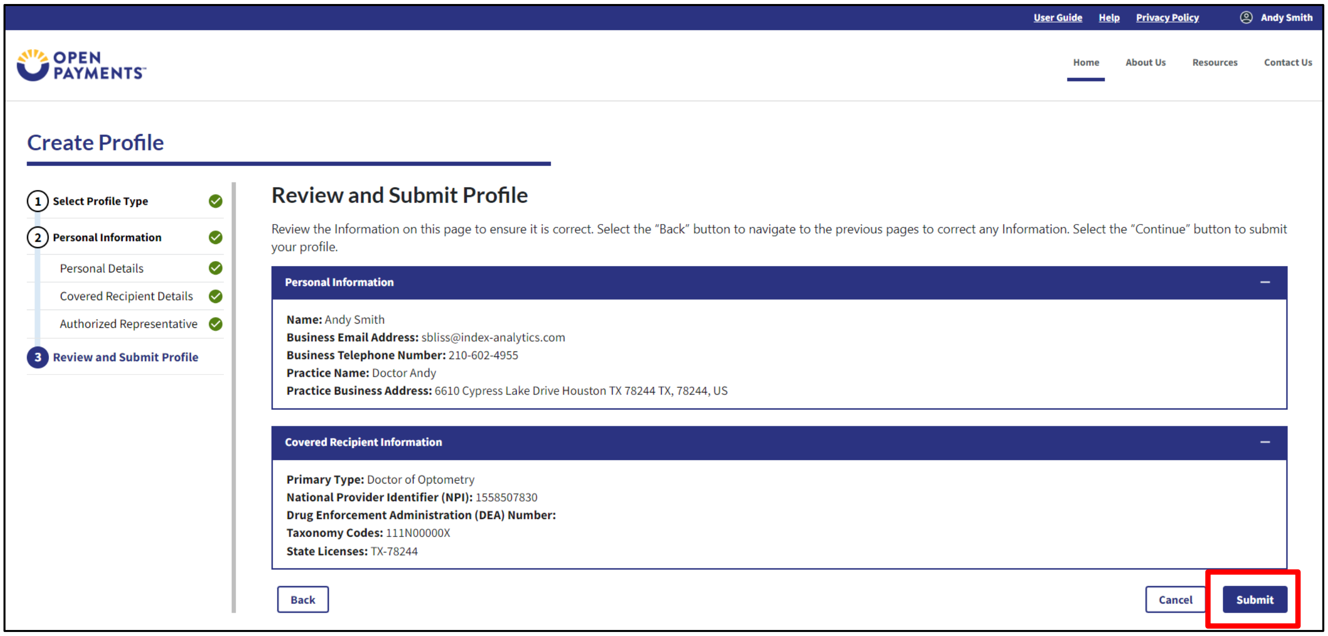
If you wish to nominate an authorized representative, select Yes in the dropdown, and complete the fillable fields. When you have finished creating your profile, an email containing the steps to accept the nomination will be sent to the nominee.

Figure 43: Decision to Nominate an Authorized Representative



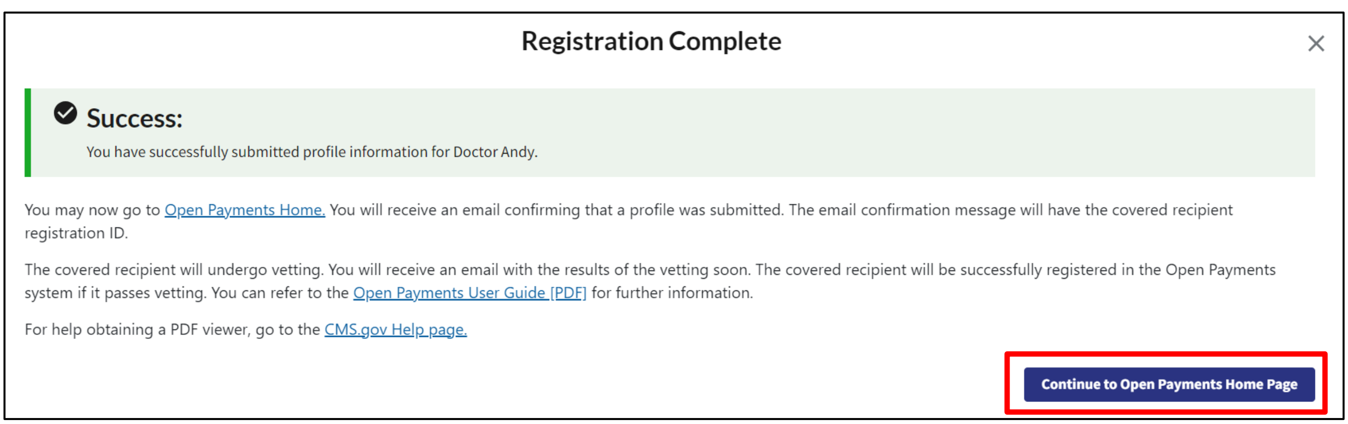
Step 7: Review the information entered. Select the **Back** button at the bottom of the page to go back and edit any information. Once you have reviewed the information and determined it to be correct, select **Submit**.

Figure 44: Review and Submit Profile Page



The following message will appear on-screen to confirm your profile has been successfully created. If you have chosen to designate an authorized representative, an email notification with a nomination ID will be sent to the nominated individual.

Figure 45: Registration Complete On-Screen Message



3.3b: Creating a profile as a Physician for a User with another Role (Returning System Users)

If you are creating a profile as a physician and/or you are already affiliated with a reporting entity or teaching hospital in the Open Payments system, follow the steps below.

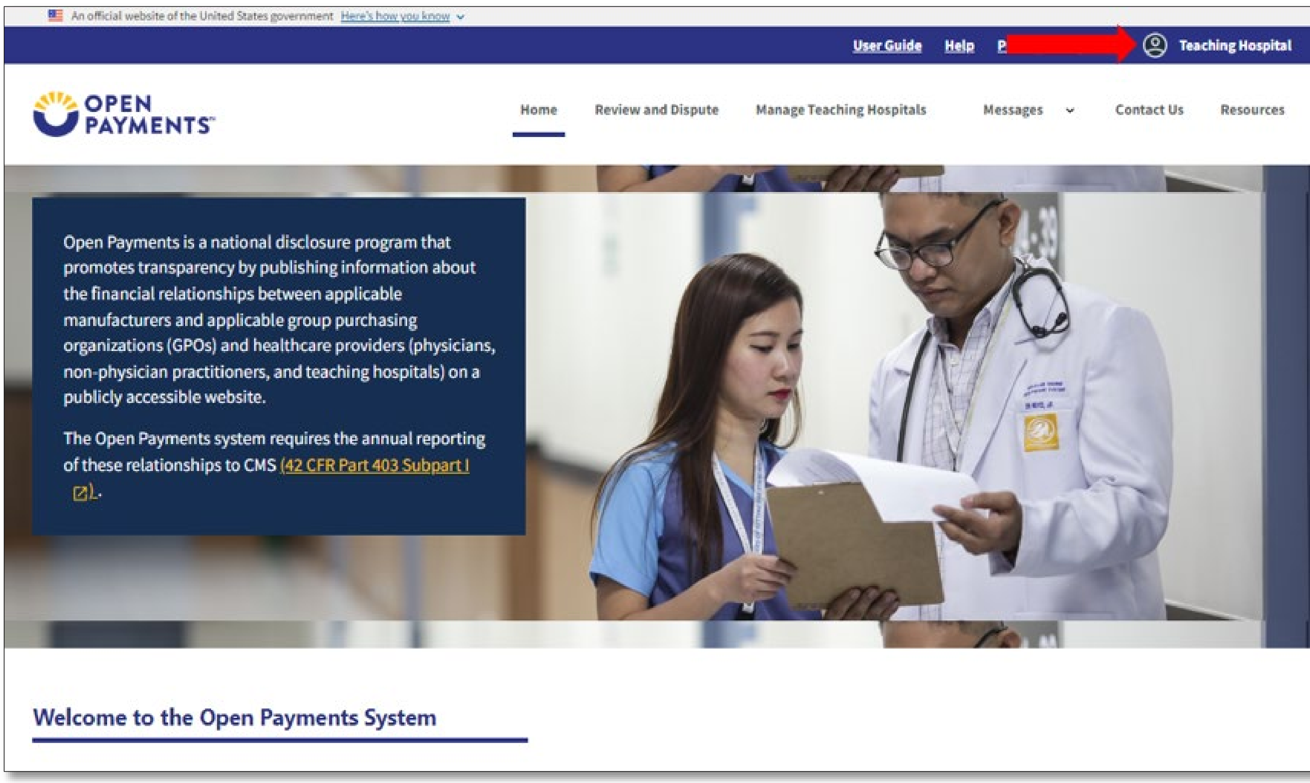
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and agree to the Terms and Conditions.

You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you entered during initial registration will be the default MFA device.

Changes made here will not automatically update user's profile information in his/her other CMS accounts.

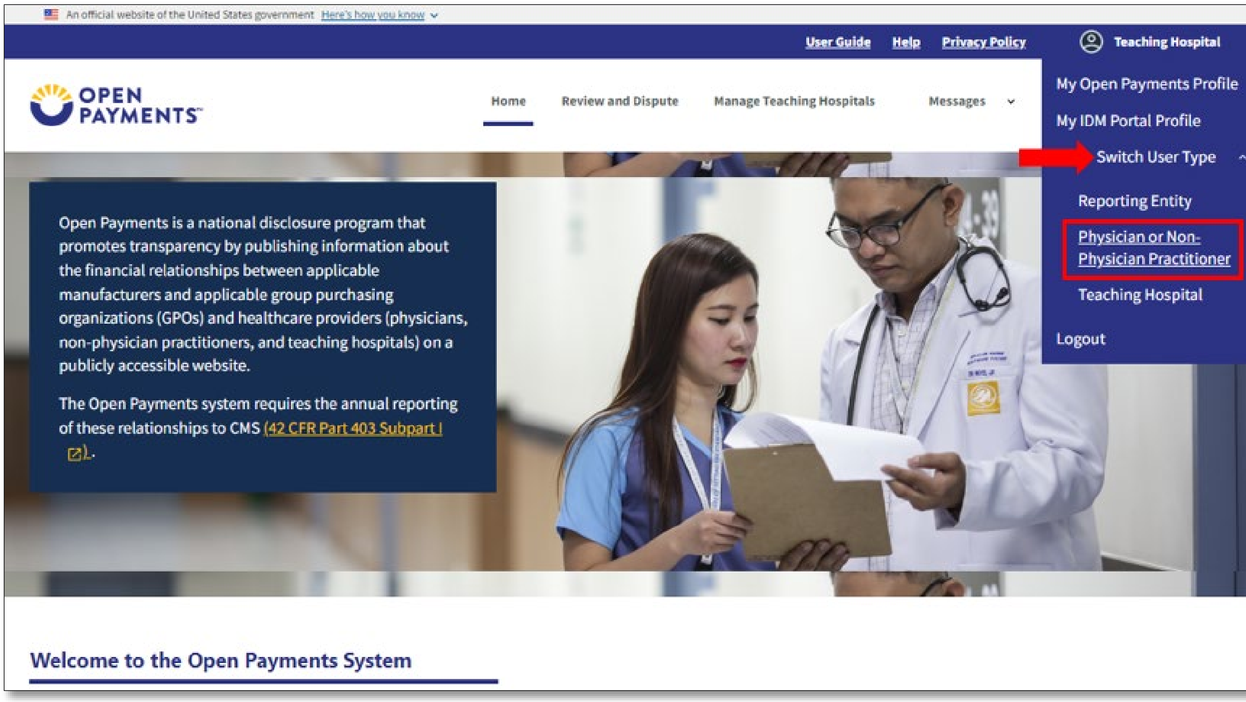
Step 2: Select your profile icon in the header menu to open a drop-down menu.

Figure 46: Open Payments System Landing Page



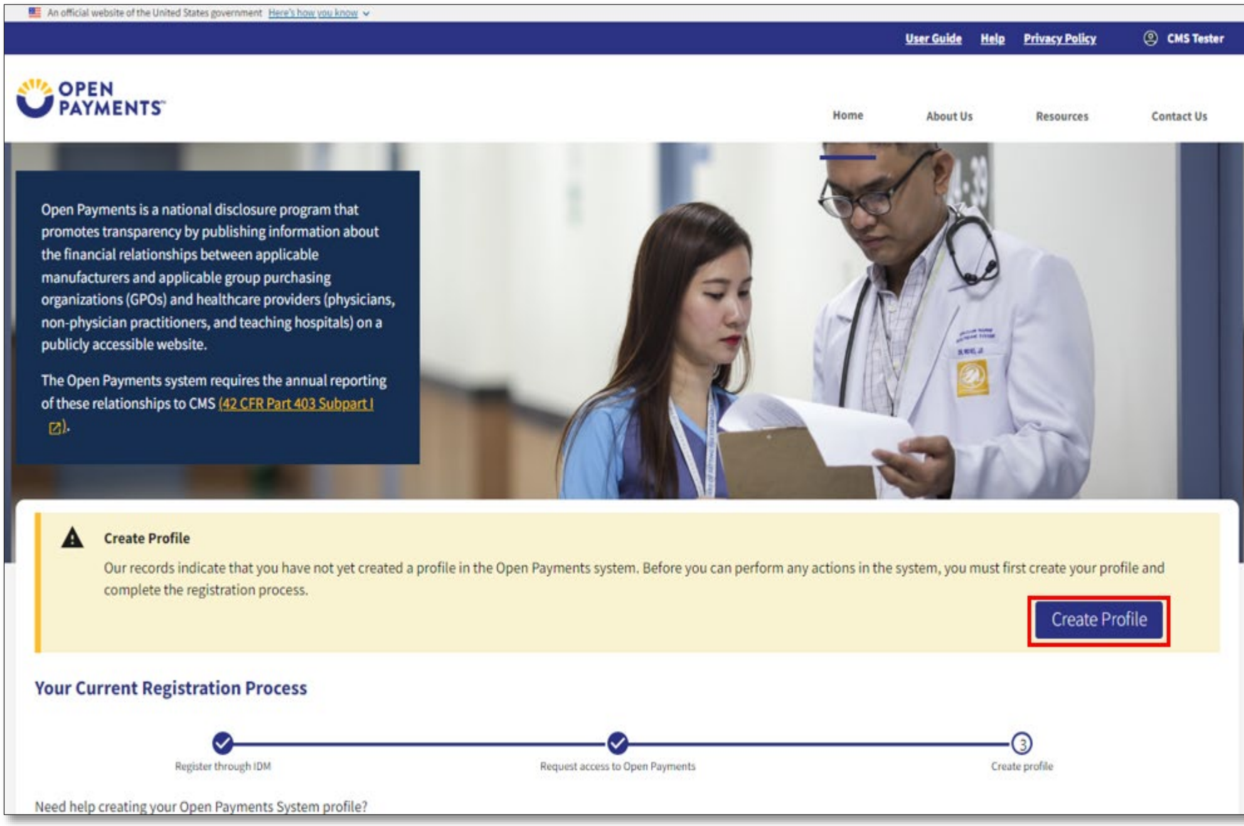
Step 3: Select the **Switch User Type** option in the drop-down menu and select **Physician or Non-Physician Practitioner** option.

Figure 47: Open Payments System "Switch User Type" Option



Step 4: Select the **Create My Profile** button to create the Physician profile. Follow the steps in Section 3.3a to complete Physician registration.

Figure 48: Open Payments System Home Page for First-Time System Users



3.3c: Physician and NPP Vetting

Vetting is the process of validating your covered recipient details. This is done to ensure that you are a valid covered recipient and aids in the matching of submitted payments to you. All physicians and NPPs registering in the Open Payments system will be vetted. Vetting occurs once you have submitted your profile to the Open Payments system. **Your profile is not considered complete until the vetting process is successful.**

Once you submit your profile, the automated vetting process begins. The process will attempt to vet you using the information provided in the physician/NPP profile, so it is important for you to provide as much accurate information as possible to aid in the vetting process. Particularly important are your first and last name, NPI (if you have an NPI), state license information, and primary specialty type. The Open Payments system will match your information against multiple data sources. If you have an NPI, you must include it in order to be successfully vetted.

If you "fail" the vetting process, you will have the opportunity to correct the information in your profile and resubmit the profile for vetting. You may update your profile as many times as necessary to successfully complete vetting.

If you do not successfully pass vetting despite all of the information provided in your profile being correct to the best of your knowledge, or if you require assistance with successfully vetting your profile, contact the Open Payments Help Desk at 1-855-326-8366. For the TTY line, call 1-844-649-2766**.**

The automatic vetting process normally takes less than 24 hours, though it could take longer depending upon the completeness of the information provided and the number of covered recipients undergoing vetting at the same time.

Once vetting is successful, you will not be able to change the name or NPI referenced in your profile. If edits to either of these fields is required after successful vetting, contact the Open Payments Help Desk at 1-855-326-8366 for assistance. CMS encourages physicians to register and begin the vetting process as early as possible to allow sufficient time for vetting to be completed.

If your profile is modified, the profile will undergo vetting again.

3.3d: Creating a profile as an NPP (First Time System Users)

If you are registering as an NPP and are a first-time user in the Open Payments system, follow the steps below.

If you are a NPP who works in a teaching hospital and wish to see data related to you in your capacity as an NPP, select the "Physician or Non-physician practitioner" option when registering. If you are an NPP who works in a teaching hospital and wish to represent that teaching hospital as an authorized official or authorized representative, follow the instructions in Section 3.3g for registering a teaching hospital.

If you select the "Teaching Hospital" option when registering, you will only be able to view payments made to the teaching hospital you are associating yourself with.

If you wish to see data related to you as a physician or NPP, you must create a profile as a physician or NPP by selecting the "Physician or Non-Physician Practitioner" option. You may be registered for both options and can alternate between NPP and teaching hospital profiles using the "Switch User" functionality described in Section 3.3j.

* If you already have IDM login credentials but do not have an Open Payments system profile, visit Section 3.2c: "Requesting Access to the Open Payments System."

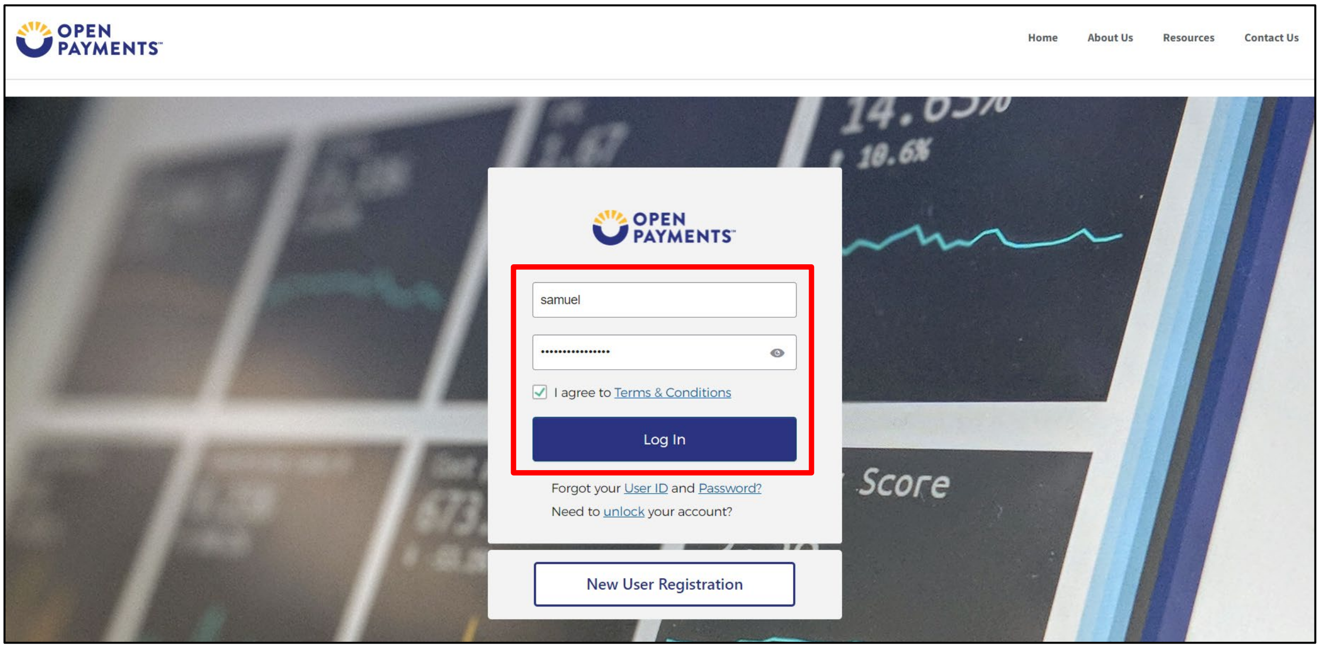
* If you already have an Open Payments system profile, go to Section 3.3b: "Creating a Profile as a Physician for a User with another Role (Returning System Users)". Teaching Hospital Users go to Section 3.3h: Registering a Teaching Hospital: Returning System Users"

Follow the steps below to create a new system user account:

Step 1: Log in to the Open Payments system and agree to the Terms and Conditions.

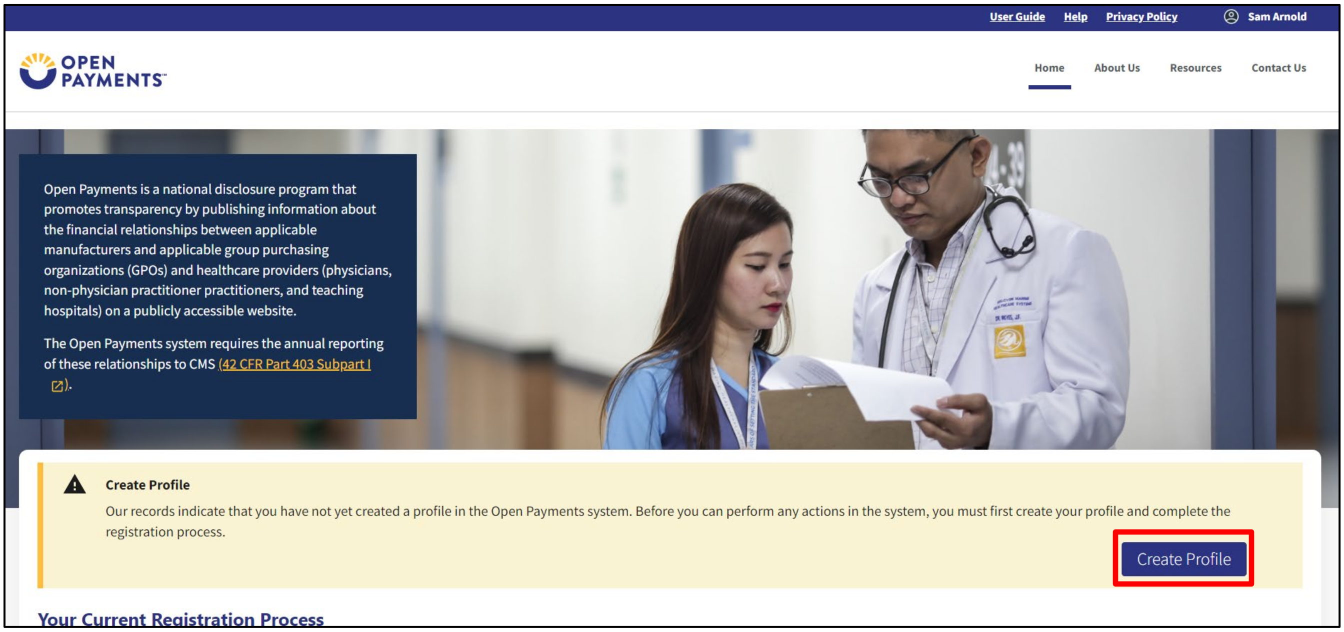
You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you input during initial registration will be the default MFA device.

Figure 49: Open Payments System Log In Page



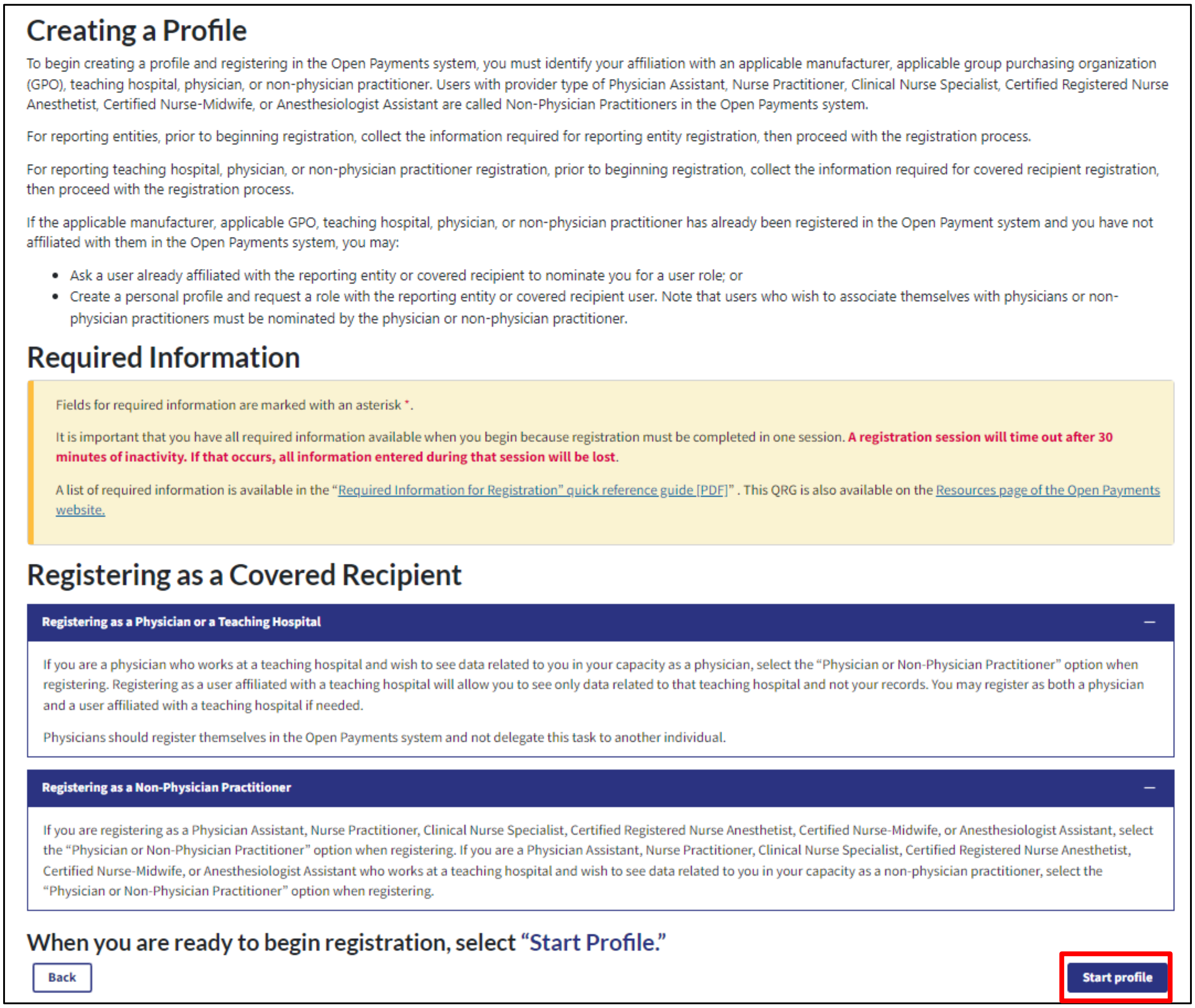
Select **Create Profile** to start the registration process.

Figure 50: Open Payments Home Page for First-Time System Users



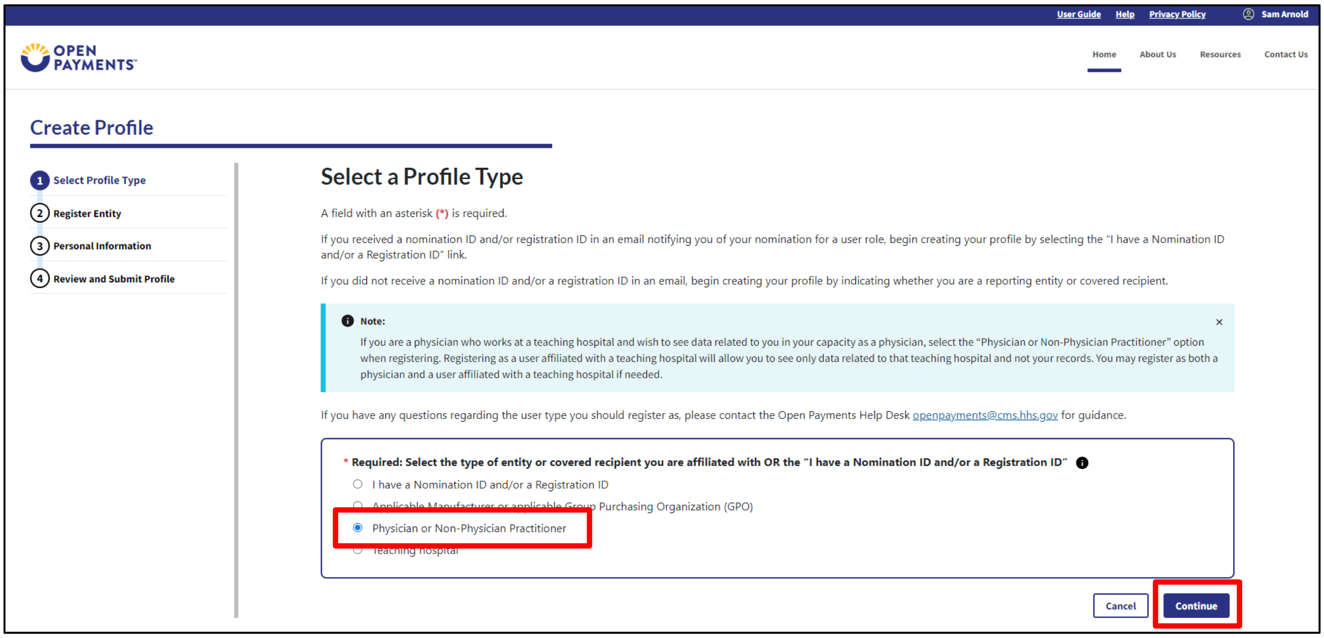
Step 2: The on-screen text contains important information regarding creating the NPP profile. Read the on-screen text and select **Start Profile** at the bottom of the page when you are ready to continue.

Figure 51: Create My Profile Page



Step 3: Select the profile type **Physician or Non-physician Practitioner** and then select the **Continue** button.

Figure 52: Select Profile Type Page



Step 4: Enter your personal and business information. All required fields will be marked with an asterisk (*). All required fields must be entered to proceed with the profile. You may register with foreign address by selecting "Country" field drop down value other than "United States".

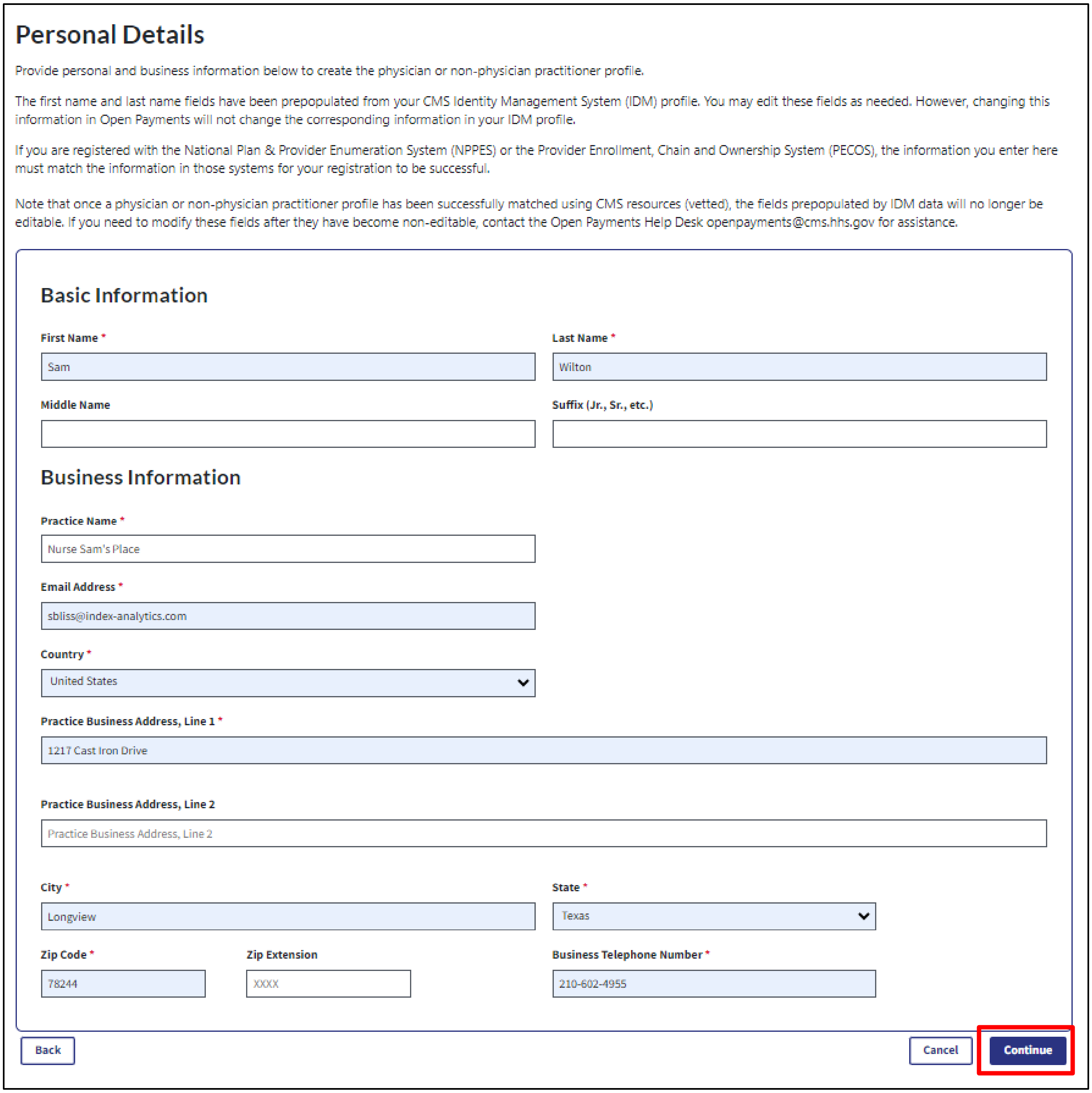
If you are registered with the National Plan & Provider Enumeration System (NPPES) or the Provider Enrollment, Chain and Ownership System (PECOS), the information you enter here must match the information in those systems for your registration to be successful.

Once a physician or non-physician profile has been successfully matched using CMS resources (vetted), you will not be able to change the name or NPI referenced in your profile. If you need to modify these fields after they have become non-editable, contact the Open Payments Help Desk openpayments@cms.hhs.gov for assistance.

When done, select the **Continue** button.

Selecting the "Cancel" button will cause you to lose all data entered.

Figure 53: Covered Recipient Personal Information Page



<u>Step 5:</u> Enter your covered recipient details. All required fields are marked with an asterisk (*).

The National Provider Identifier (NPI) and Drug Enforcement Administration (DEA) Number fields are not marked as required; however, they must be entered if they have been assigned to you. If you do not have these identifiers, you can still proceed with registration.

Note the following:

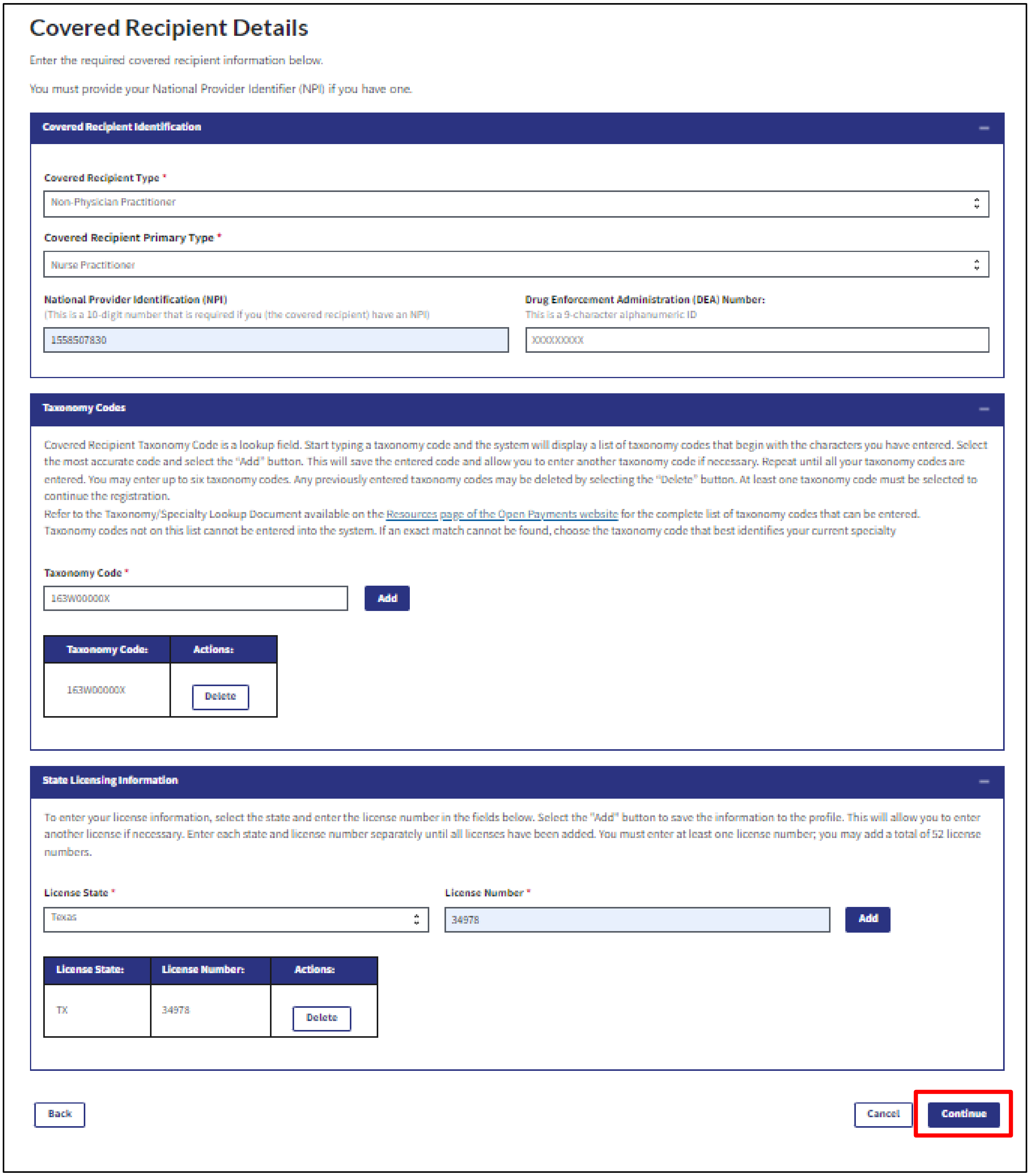
- You may select up to 6 primary types in the "Non-Physician Practitioner Primary Type" multi-select field.
- The ZIP Code entered by the NPP is validated to ensure it is a valid United States ZIP Code and that it is within the "State" entered.
- If the NPP has a National Provider Identifier (NPI), enter it exactly as listed in NPPES for the current calendar year.
- Enter at least one active state license.
- For each license or taxonomy code entered, select the **Add** button to save the information to the profile. Without selecting the **Add** button, the information will not be saved. NPPs can register using up to 6 Taxonomy Codes. To update or replace an existing Taxonomy, select the **Edit** or the **Delete** button.

Taxonomy codes not on the approved taxonomy code list should not be entered. You may refer to the approved list on the Resources page of the Open Payments website (https://www.cms.gov/priorities/key-initiatives/open-payments/resources/reporting-entitities).

As you begin entering information into the Taxonomy Code field, the system will provide a list of codes to help guide your entry. If your taxonomy code is not on the approved list, select the code that most closely represents your specialty. Select **Add** after entering each taxonomy code to add it to your profile.

To enter license information, select the state in which the license is held and enter the license number. Select the **Add** button to add the license. The license number field may contain up to 25 characters, including special characters such as hyphens (-). You are required to enter at least one license. If you input data into the field and select the **Continue** button before selecting the **Add** button, the system will give you an error message. If you have licenses in more than one state, enter in the first state and license number and then select **Add**. Repeat until all of your state licenses have been added. You can enter up to 52 licenses. When you are finished, select the **Continue** button.

Figure 54: Covered Recipient Details Page



Step 6: At this point in registration, you may nominate an individual to serve as your authorized representative within the Open Payments system. By default, "Designate an Authorized Representative" will be selected. **A NPP cannot be his or her own authorized representative.**

Physicians may only nominate one authorized representative. However, an authorized representative may represent more than one physician or NPP.

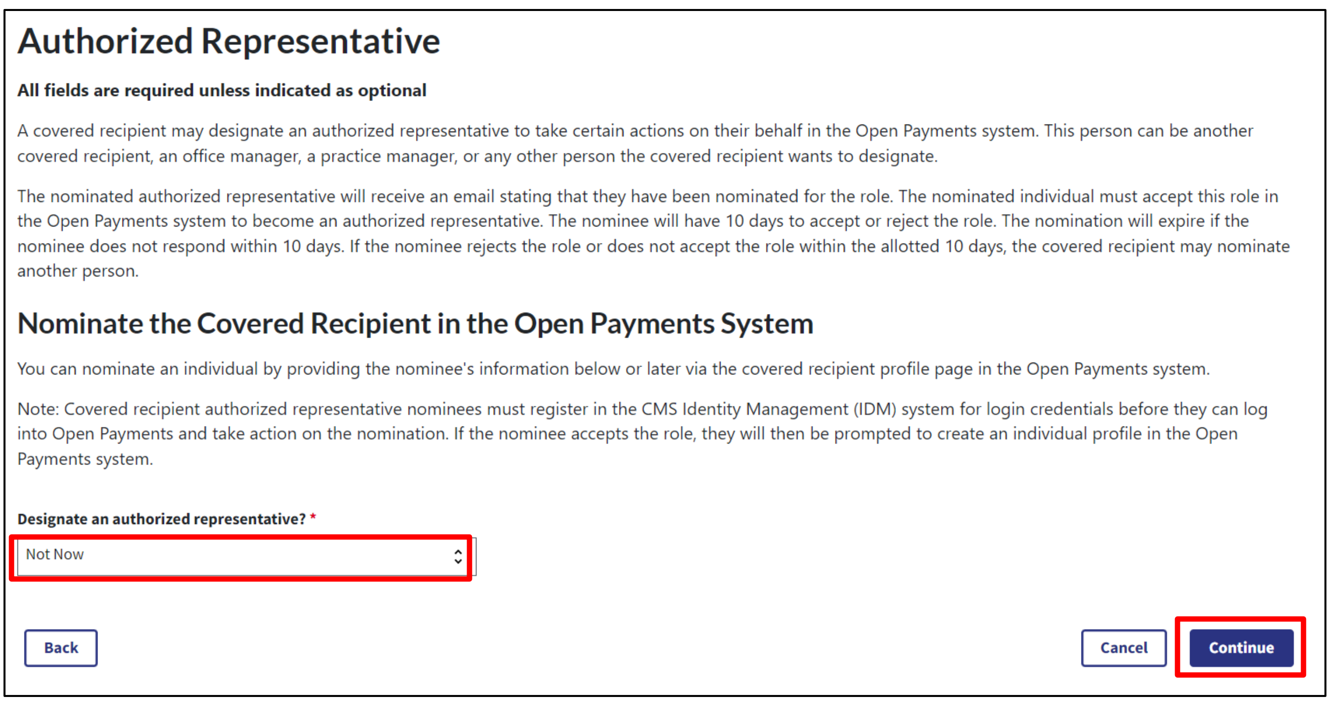
To designate an authorized representative, enter the required information. You will also be asked to select the access level for the authorized representative. Authorized representative access levels are explained in depth in Section 3.4b. The access levels are also summarized on the page. When you are finished, select the **Continue** button.

You do not need to designate an authorized representative during initial registration and may do so later. If you choose not to designate an authorized representative at this time, select **Not Now** and then select the **Continue** button. For instructions on how to nominate an authorized representative after registration is complete, see Section 3.5a.

Figure 66 shows how to NOT nominate an authorized representative.

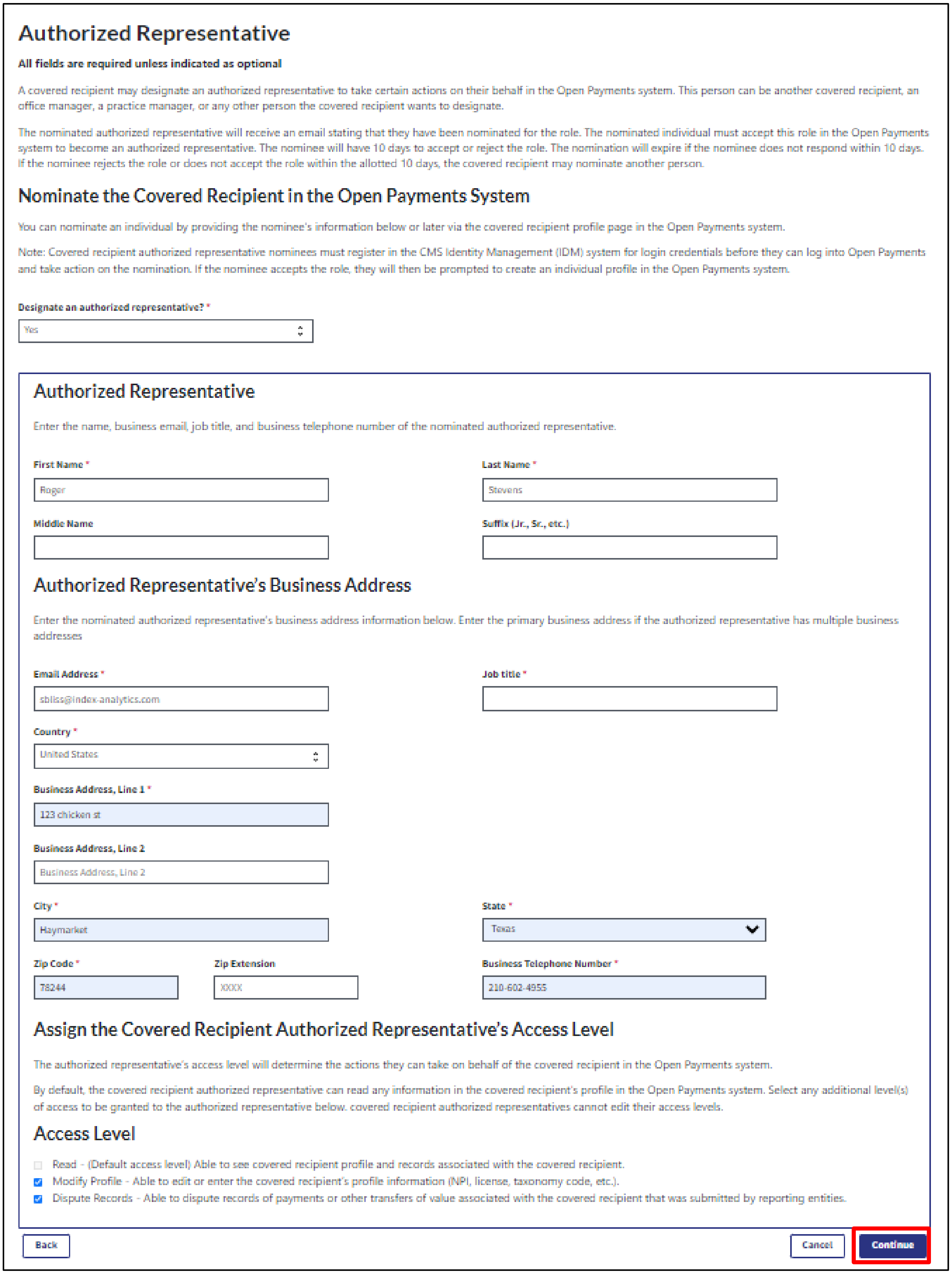
Figure 67 demonstrates the steps to nominate an authorized representative.

Figure 55: Decision to NOT Nominate an Authorized Representative



If you wish to nominate an authorized representative, select Yes in the dropdown, and complete the fillable fields. When you have finished creating your profile, an email containing the steps to accept the nomination will be sent to the nominee.

Figure 56: Decision to Nominate an Authorized Representative


Authorized Representative

All fields are required unless indicated as optional

A covered recipient may designate an authorized representative to take certain actions on their behalf in the Open Payments system. This person can be another covered recipient, an office manager, a practice manager, or any other person the covered recipient wants to designate.

The nominated authorized representative will receive an email stating that they have been nominated for the role. The nominated individual must accept this role in the Open Payments system to become an authorized representative. The nominee will have 10 days to accept or reject the role. The nomination will expire if the nominee does not respond within 10 days. If the nominee rejects the role or does not accept the role within the allotted 10 days, the covered recipient may nominate another person.

Nominate the Covered Recipient in the Open Payments System

You can nominate an individual by providing the nominee's information below or later via the covered recipient profile page in the Open Payments system.

Note: Covered recipient authorized representative nominees must register in the CMS Identity Management (IDM) system for login credentials before they can log into Open Payments and take action on the nomination. If the nominee accepts the role, they will then be prompted to create an individual profile in the Open Payments system.

Designate an authorized representative? *

Yes

Authorized Representative

Enter the name, business email, job title, and business telephone number of the nominated authorized representative.

First Name *

Roger

Last Name *

Stevens

Middle Name

Suffix (Jr., Sr., etc.)

Authorized Representative's Business Address

Enter the nominated authorized representative's business address information below. Enter the primary business address if the authorized representative has multiple business addresses

Email Address *

sbliss@index-analytics.com

Job title *

Country *

United States

Business Address, Line 1 *

123 chicken st

Business Address, Line 2

Business Address, Line 2

City *

Haymarket

State *

Texas

Zip Code *

78244

Zip Extension

XXXX

Business Telephone Number *

210-602-4955

Assign the Covered Recipient Authorized Representative's Access Level

The authorized representative's access level will determine the actions they can take on behalf of the covered recipient in the Open Payments system.

By default, the covered recipient authorized representative can read any information in the covered recipient's profile in the Open Payments system. Select any additional level(s) of access to be granted to the authorized representative below. covered recipient authorized representatives cannot edit their access levels.

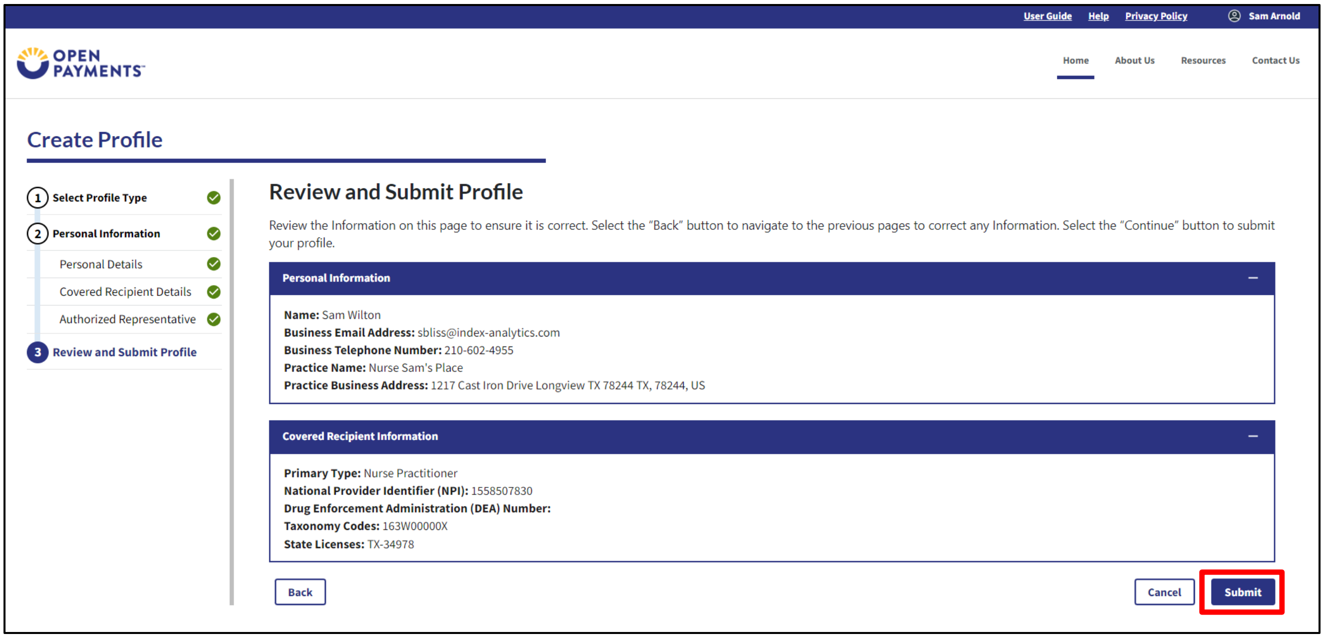
Access Level

- [ ] Read - (Default access level) Able to see covered recipient profile and records associated with the covered recipient.
- [x] Modify Profile - Able to edit or enter the covered recipient's profile information (NPI, license, taxonomy code, etc.).
- [x] Dispute Records - Able to dispute records of payments or other transfers of value associated with the covered recipient that was submitted by reporting entities.

Back   Cancel   Continue

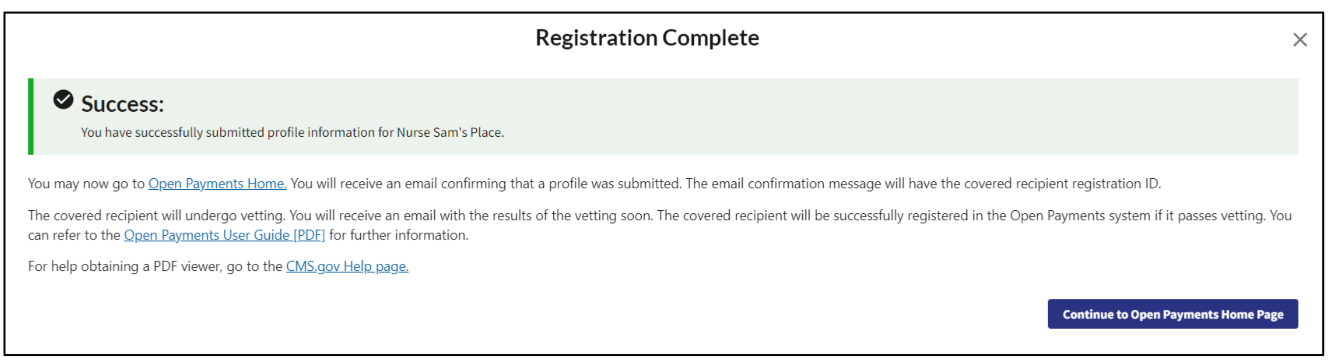
Step 7: Review the information entered. Select the **Back** button at the bottom of the page to go back and edit any information. Once you have reviewed the information and determined it to be correct, select **Submit**.

Figure 57: Review and Submit Profile Page



The following message will appear on-screen to confirm your profile has been successfully created. If you have chosen to delegate someone to be an authorized representative, an email notification with a nomination ID will be sent to that individual.

Figure 58: Registration Complete On-Screen Message



3.3e: Creating a profile as a NPP for a User with another Role (Returning System Users)

If you are registering as an NPP and/or you are already affiliated with a reporting entity or teaching hospital in the Open Payments system, follow the steps below.

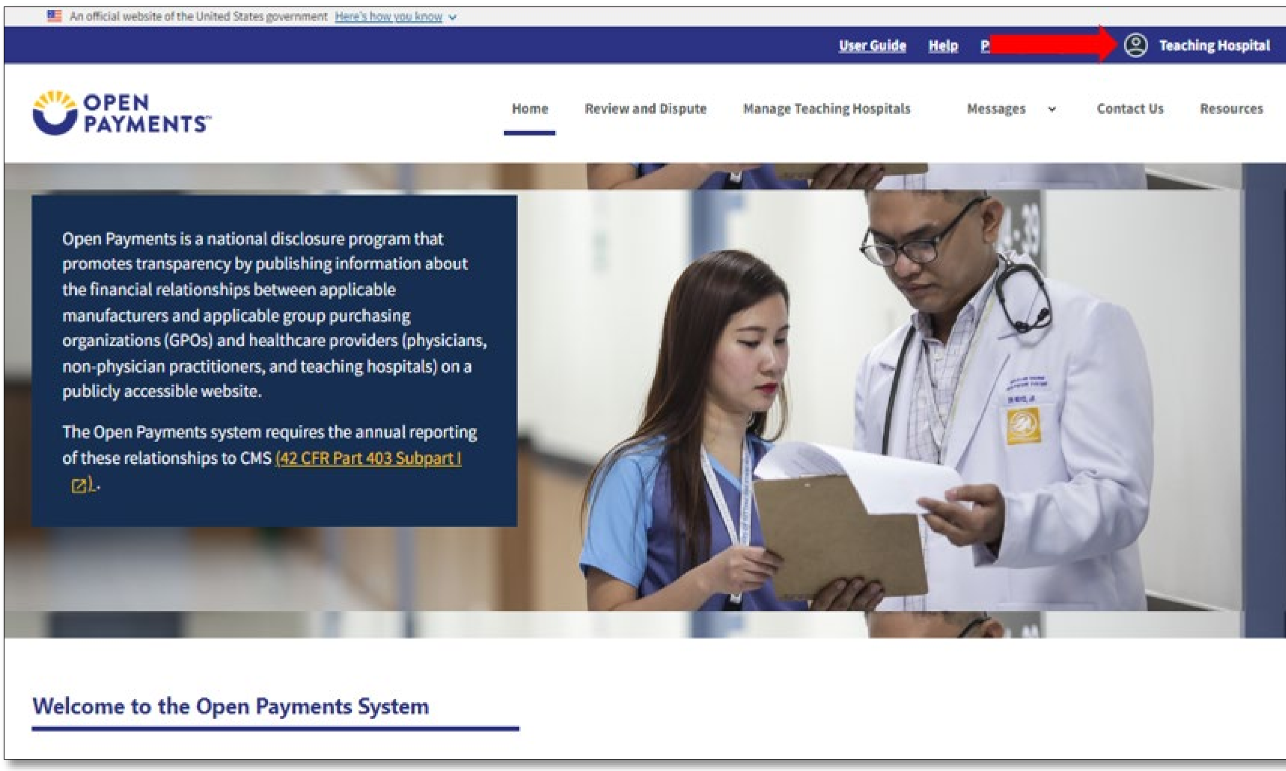
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and agree to the Terms and Conditions.

You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you input during initial registration will be the default MFA device.

Changes made here will not automatically update user's profile information in his/her other CMS accounts.

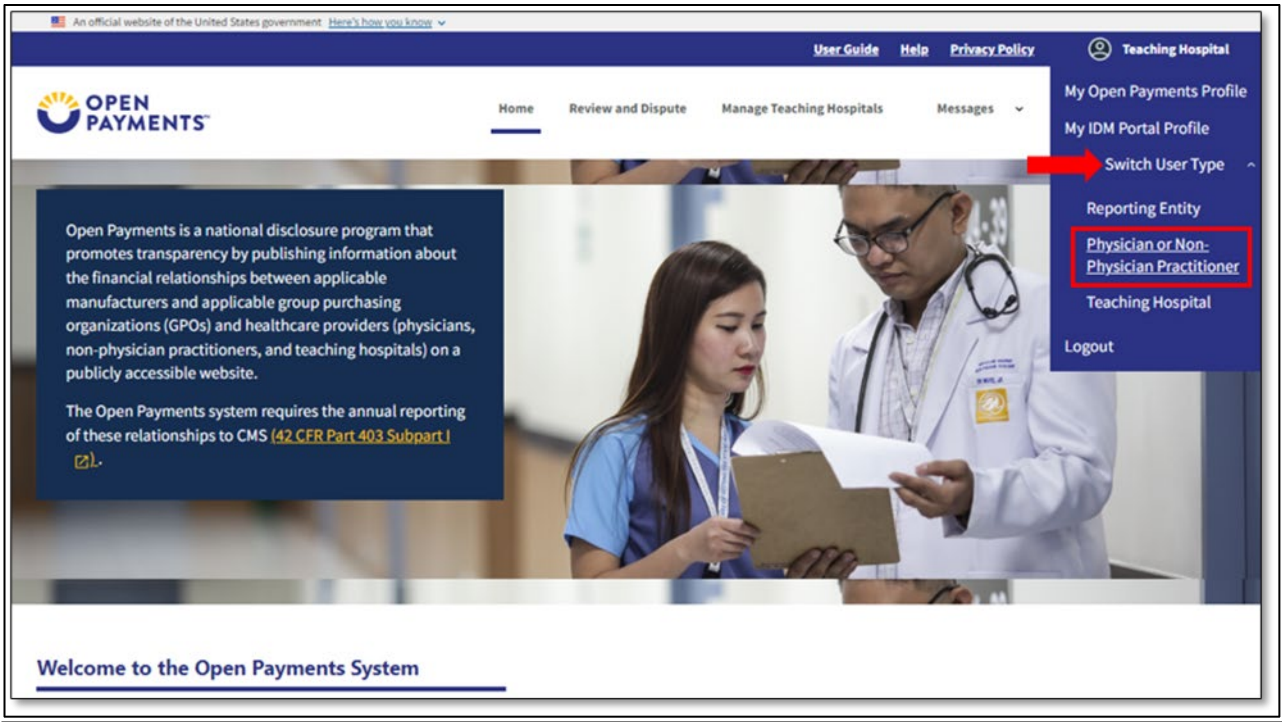
Step 2: Select your profile icon in the header menu to open a drop-down menu.

Figure 59: Open Payments System Landing Page Profile Icon



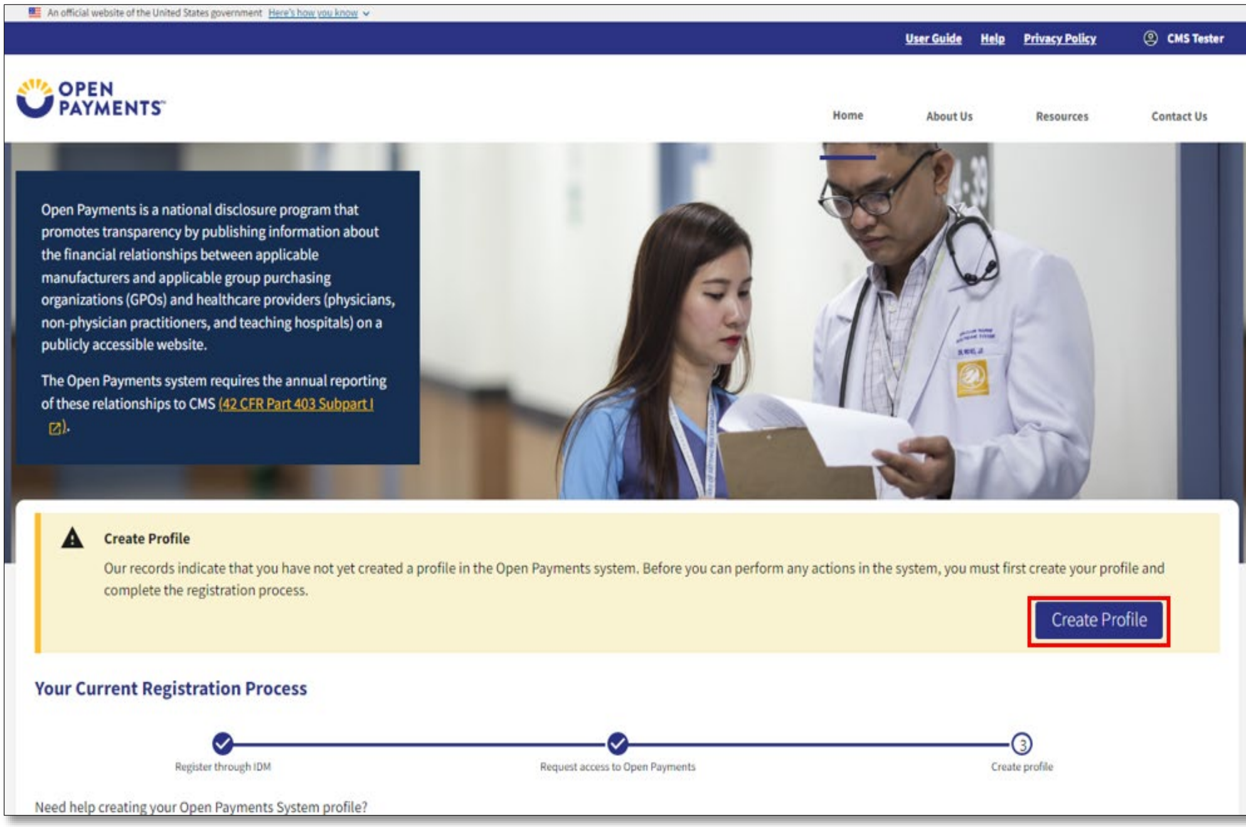
Step 3: Select the **Switch User Type** option in the drop-down menu and select **Physician or Non-Physician Practitioner** option.

Figure 60: Open Payments System "Switch User Type" Option



Step 4: Select the "Create My Profile" button to create the NPP profile. Follow the steps in Section 3.3d to complete NPP registration.

Figure 61: Open Payments System Landing Page for First-Time System Users



3.3f: NPP Vetting

Vetting is the process of validating your covered recipient details. This is done to ensure that you are a valid covered recipient. All NPPs registering in the Open Payments system will be vetted. Vetting occurs once you have submitted your profile to the Open Payments system. **NPP registration is not considered complete until the vetting process is successful.**

The vetting process will typically require little action from you. Once you submit your NPP user profile, the vetting process begins. The process will attempt to vet your profile using the information you provided, so it is important for you to provide as much information as possible to aid in the vetting process. Particularly important are your first and last name, NPI (if you have one), state license information, and your primary type. The Open Payments system will match your provided information against multiple data sources.

Note: If you have an NPI but you did not provide it, you provide it you will not be able to successfully complete vetting.

If vetting fails, you will have the opportunity to correct the information in your profile and resubmit your profile for vetting. You may update their profile as many times as necessary to successfully complete vetting.

If you do not successfully pass vetting despite all the information provided in your profile being correct to the best of his or her knowledge, or you require assistance with successfully vetting your profile, contact the Open Payments Help Desk at 1-855-326-8366. For the TTY line, call 1-844-649-2766.

The automatic vetting process normally takes no more than one minute, though it could take longer depending upon the completeness of the information provided by the user and the number of NPPs undergoing vetting at the same time.

Once vetting is successful, you will not be able to change the name or NPI referenced in your profile. If edits to either of these fields are required after successful vetting, contact the Open Payments Help Desk at 1-855-326-8366 for assistance. CMS encourages NPPs to register and begin the vetting process as early as possible to allow sufficient time for vetting to be completed.

Note: If an NPP profile is modified, the profile will undergo vetting again.

3.3g: Registering a Teaching Hospital (First Time System User)

If you are a first-time user registering a teaching hospital in the Open Payments system, follow the steps below. By creating a profile for a teaching hospital, you must take the role of authorized official for the teaching hospital in the Open Payments system. See Section 3.4c for information on user roles for teaching hospitals.

A physician or NPP who is employed by a teaching hospital should not register him or herself with the option "Teaching Hospital" unless he or she will represent the teaching hospital regarding the data reported by applicable manufacturers and applicable GPOs. Physicians and NPPs who select the "Teaching Hospital" option when registering will only be able to view payments made to the teaching hospital they are affiliated with.

If you wish to see data related to you as a physician or NPP, you must create a profile as a physician or NPP by selecting the "Physician or Non-Physician Practitioner" option. Users may be registered for both "Teaching Hospital" and "Physician or Non-Physician Practitioner" User Type options. You may be registered for both options and can alternate between physician and teaching hospital profiles using the "Switch User" functionality described in Section 3.3j.

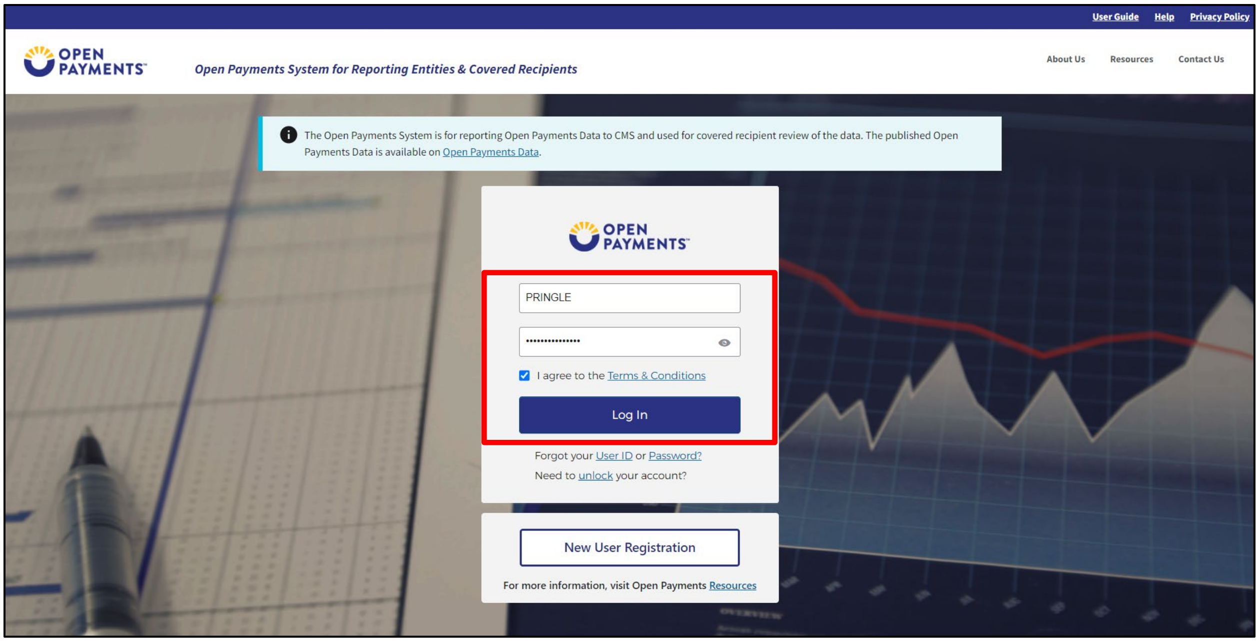
* If you already have IDM login credentials but do not have an Open Payments system profile, visit Section 3.2c: "Requesting Access to the Open Payments System."

* If you already have an Open Payments system profile, go to Section 3.3b: "Creating a Profile as a Physician for a User with another Role (Returning System Users)". Teaching Hospital Users go to Section 3.3h: Registering a Teaching Hospital: Returning System Users"

Follow the steps below to create a new system user account:

<u>Step 1:</u> Log in to the Open Payments system at https://openpayments.system.cms.gov and agree to the Terms and Conditions. You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you input during initial registration will be the default MFA device.

Figure 62: Open Payments System Log In Page for First-Time System Users

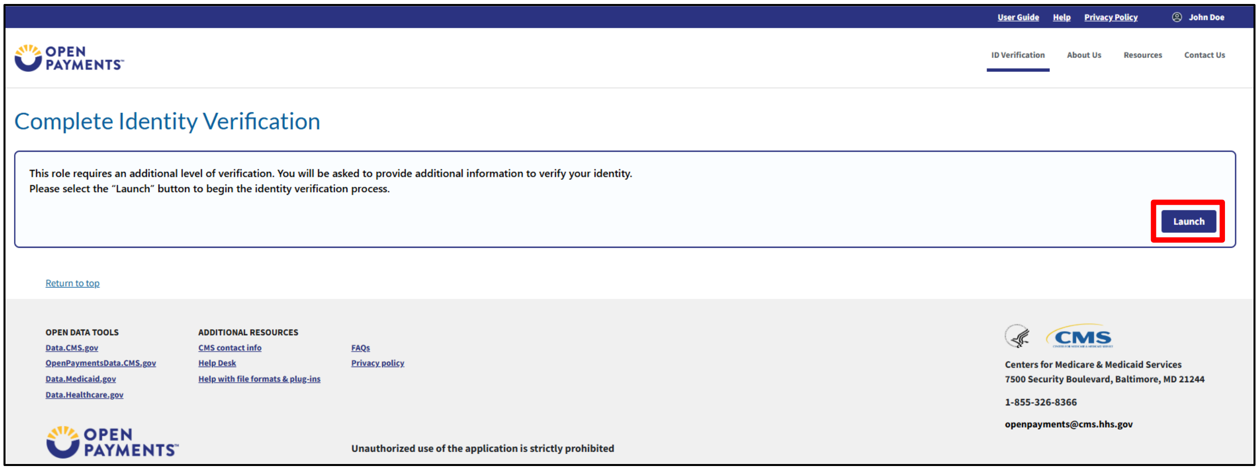


Step 2: Experian will perform a soft credit inquiry to verify your identity. Identity proofing does not affect your credit score. Soft credit inquiries are visible only to the user and only appear on credit reports produced by Experian. Credit inquiries are not visible to lenders. If you order a credit report from Experian, you will see an entry of inquiry by the Centers for Medicare & Medicaid Services with CMS's address and the date of request.

If you have questions about Experian's verification process, please refer to Experian Customer Assistance at http://www.experian.com/help/.

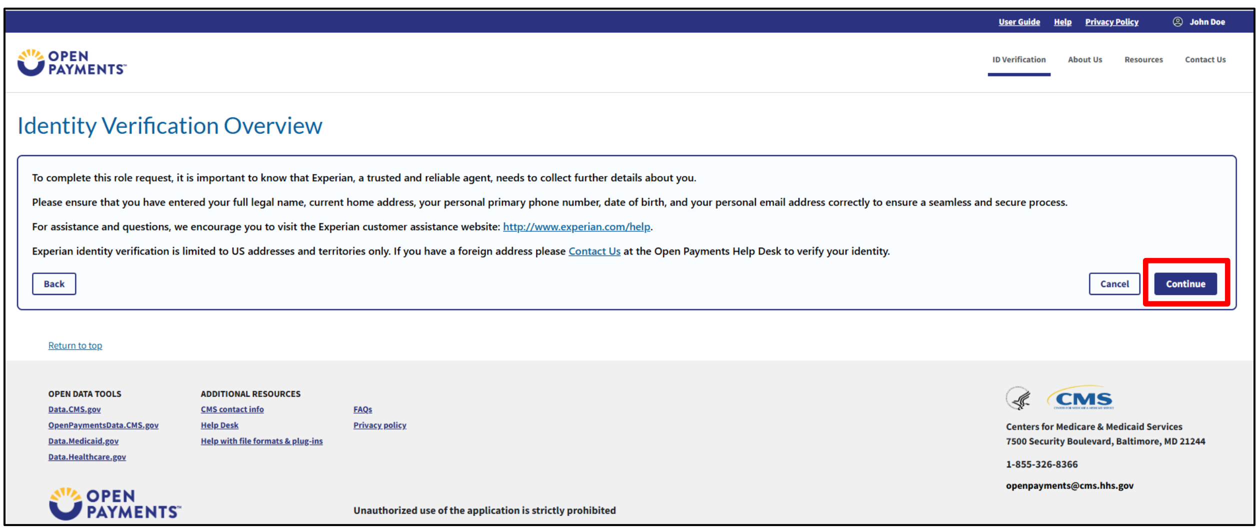
Select **Launch** to continue.

Figure 63: Identity Verification Alert



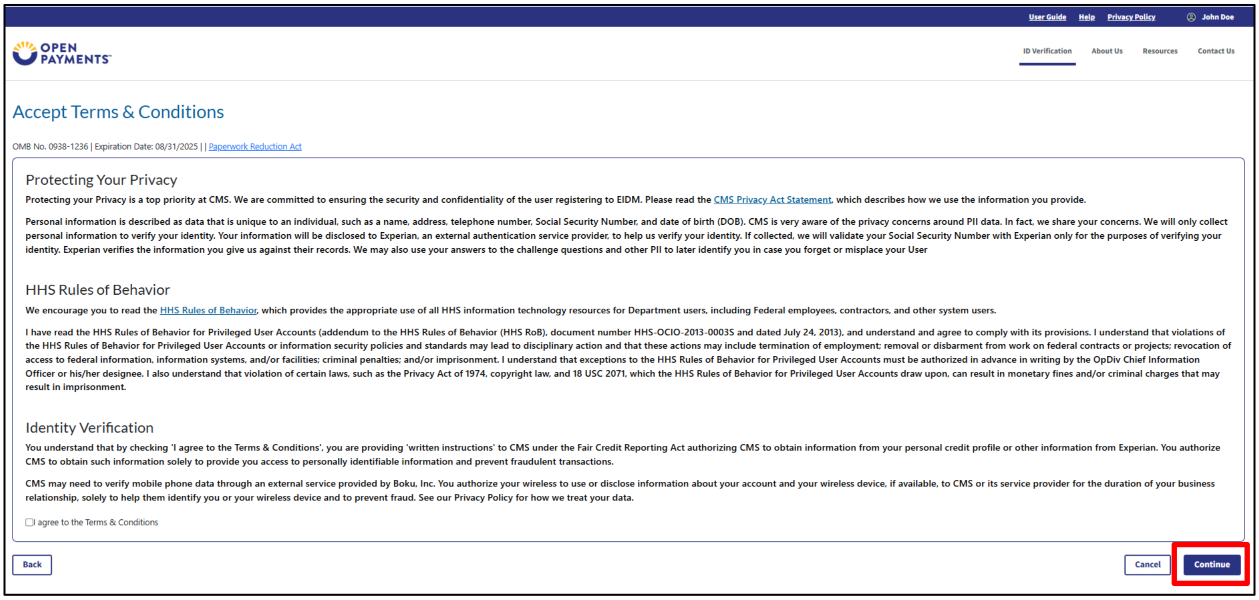
Step 3: View the Experian Identity Verification overview and select **Continue**.

Figure 64: Identity Verification Overview



Step 4: After reading the Terms and Conditions and select **Continue**.

Figure 65: Identity Verification Terms and Conditions



Step 5: When entering your information into the Identity Verification screen, only enter your personal information.

You will only have three attempts to enter information that matches the Experian database.

Tips for successfully completing Identity Verification:

Full Legal Name:

- You must use your full legal name as listed on your Driver's License or financial account information.
- Your surname must match the surname Experian has for you on file.
- Do not use nicknames.
- If you have a two-part name, enter the second part in the middle name field.

Social Security Number:

- If you elect to add your Social Security Number, ensure that the fields are filled in correctly. Users can review and edit these fields prior to sending the information to Experian.

Date of Birth:

- Ensure that the Date of Birth field is entered accurately. Users can review and edit this field prior to sending the information to Experian.

Current Residential Address:

- Ensure your personal/residential/home address is used:
- Where you receive Credit card, utility bill statements.
- Associated with your credit report.

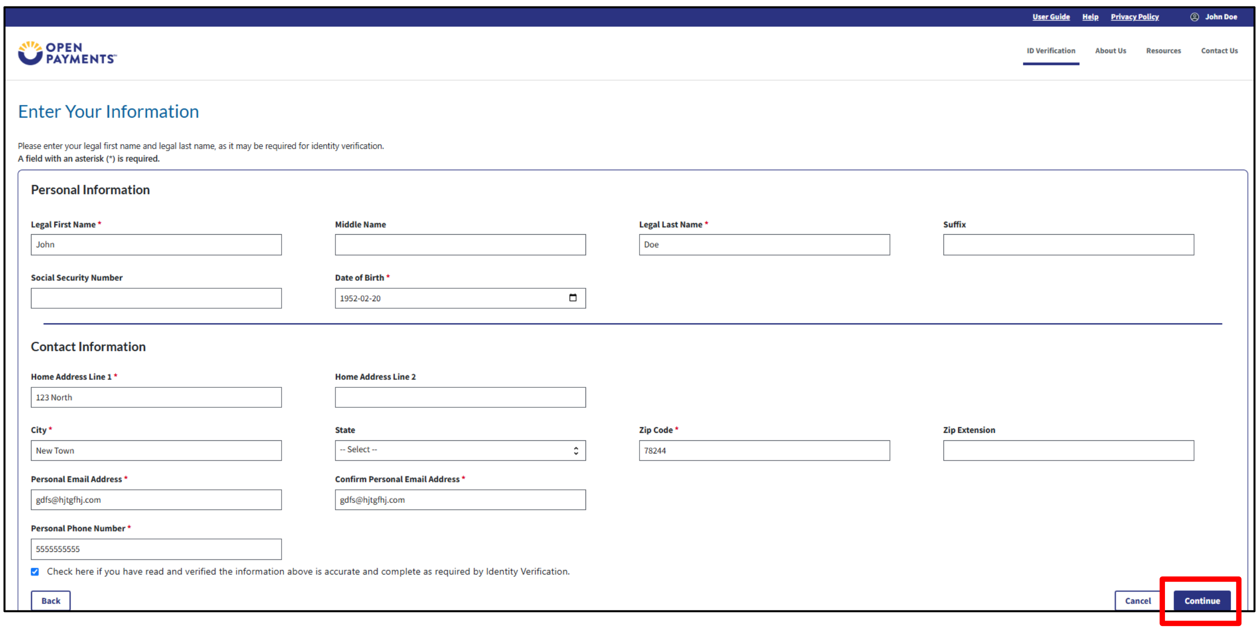
- Do NOT use your business address.
- If you have a recent change in address, try to identity proof with a prior address.
- Do not enter any extraneous symbols in the address field.

Personal Phone Number

- Enter a personal landline phone number (if you have one).
- A cell phone can be used, but a residential landline is preferred.

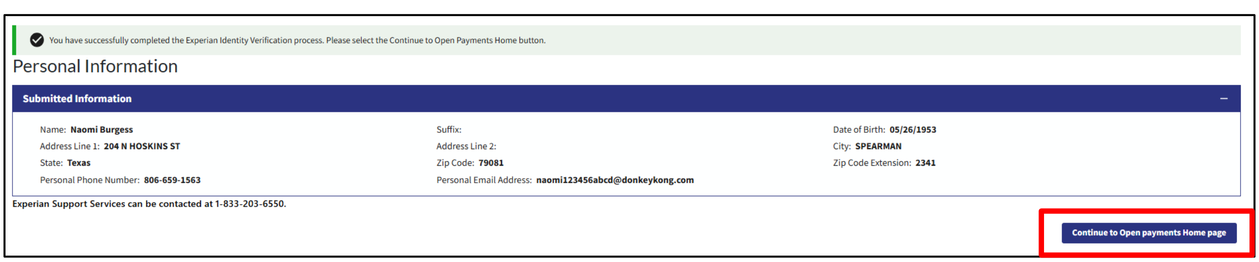
After reviewing the above information enter your information in the spaces provided, and then select **Continue**.

Figure 66: Enter Your Identity Verification Information



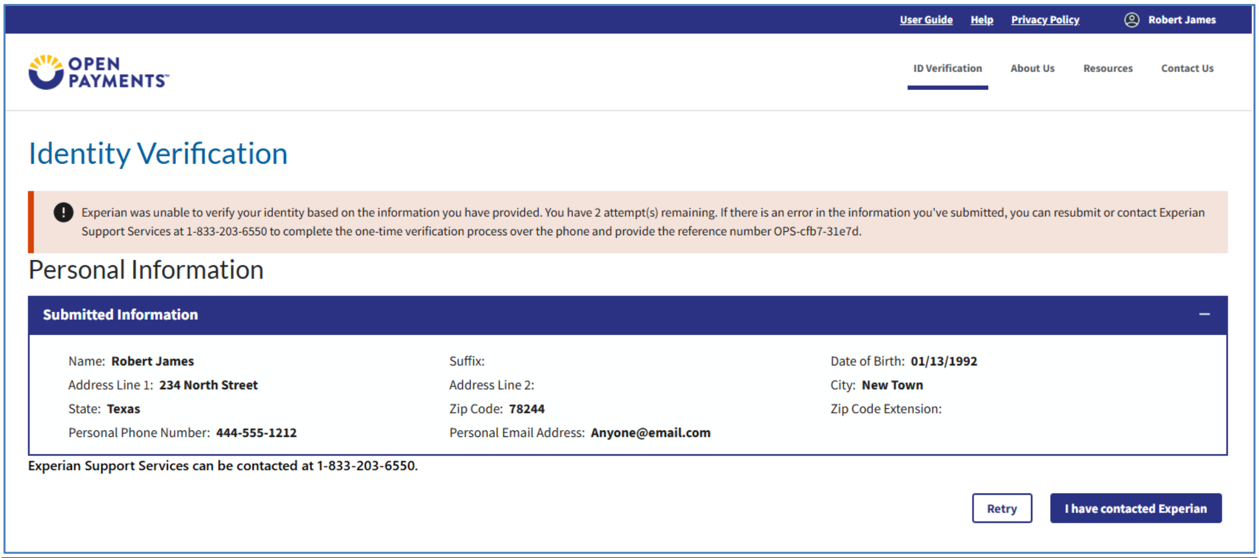
Step 6: If identity verification is successful, you will receive the confirmation notice. Select **Continue to Open Payments Home page** to continue.

Figure 67: Successful Identity Verification Confirmation



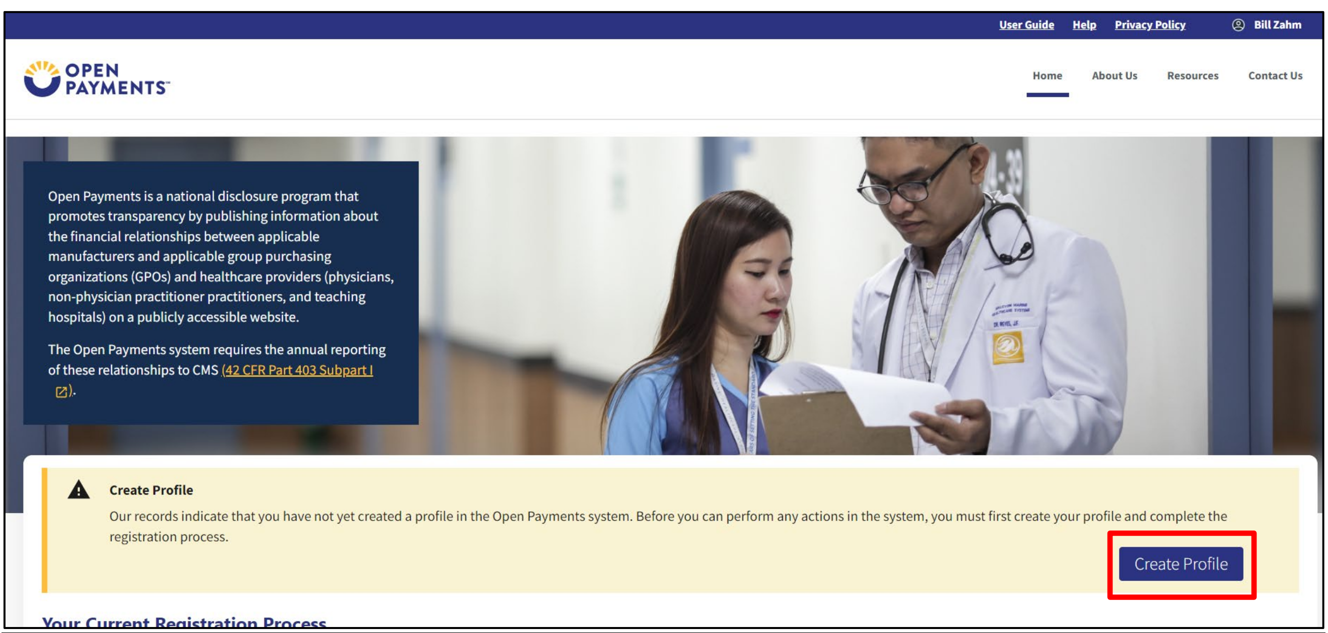
Step 7: If identity verification is unsuccessful, note the reference number, and follow the directions in the error message. If the error message refers you to the “Tier 1 Help Desk”, call the Open Payments Help Desk at 1- 855-326-8366. For the TTY line, call 1-844-649-2766.

Figure 68: Unable to Verify Information



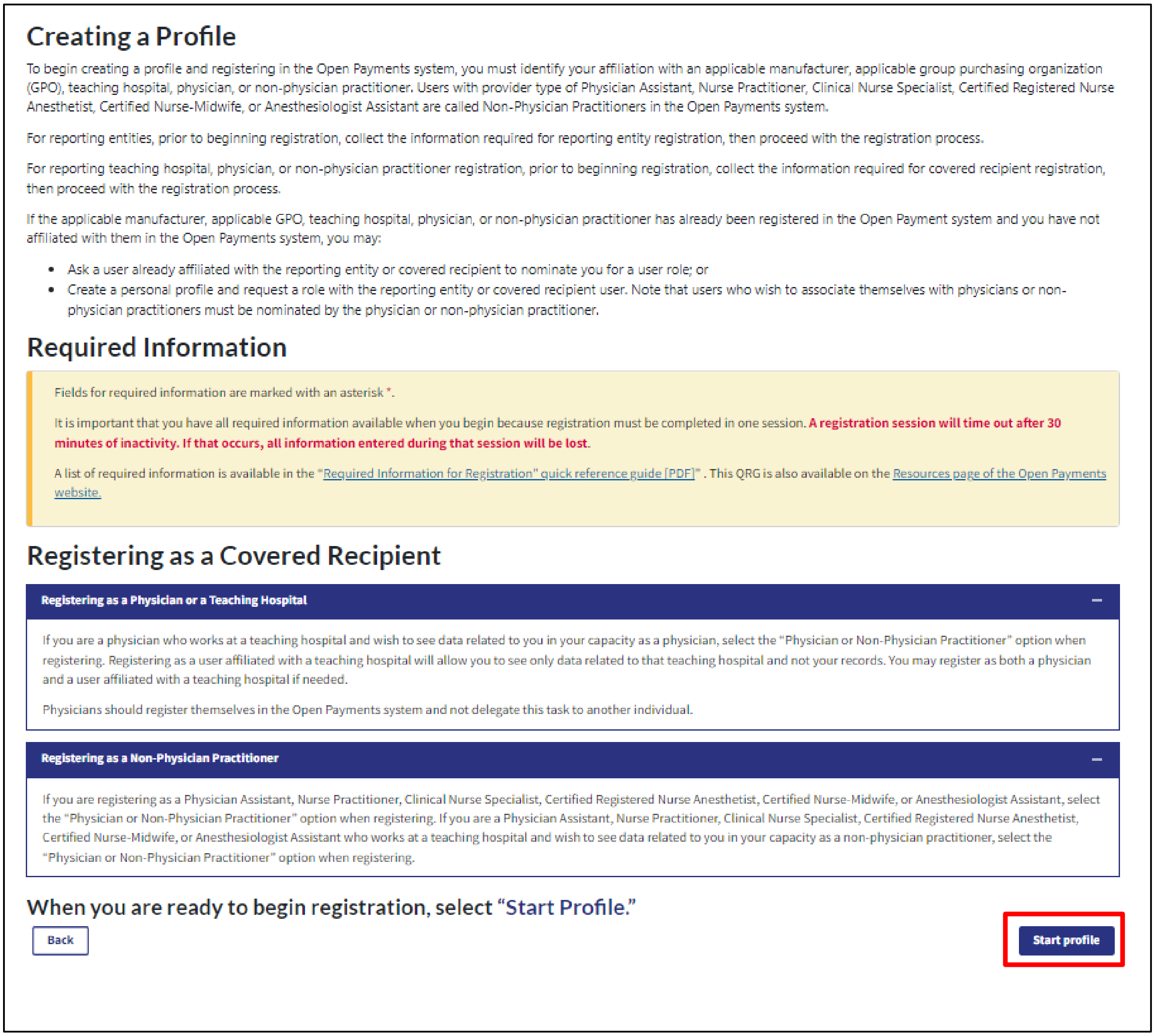
Step 7: After successfully completing the Experian Identity Verification, you will create your teaching hospital profile in the Open Payments system. The on-screen text contains important information regarding the registration process. Read the on-screen text and select **Create Profile** when you are ready to begin the registration process.

Figure 69: Create a Profile



Step 2: The on-screen text contains important information regarding creating the individual profile.

Figure 70: Create My Profile Page



Creating a Profile

To begin creating a profile and registering in the Open Payments system, you must identify your affiliation with an applicable manufacturer, applicable group purchasing organization (GPO), teaching hospital, physician, or non-physician practitioner. Users with provider type of Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, or Anesthesiologist Assistant are called Non-Physician Practitioners in the Open Payments system.

For reporting entities, prior to beginning registration, collect the information required for reporting entity registration, then proceed with the registration process.

For reporting teaching hospital, physician, or non-physician practitioner registration, prior to beginning registration, collect the information required for covered recipient registration, then proceed with the registration process.

If the applicable manufacturer, applicable GPO, teaching hospital, physician, or non-physician practitioner has already been registered in the Open Payment system and you have not affiliated with them in the Open Payments system, you may:

- Ask a user already affiliated with the reporting entity or covered recipient to nominate you for a user role; or
- Create a personal profile and request a role with the reporting entity or covered recipient user. Note that users who wish to associate themselves with physicians or non-physician practitioners must be nominated by the physician or non-physician practitioner.

Required Information

Fields for required information are marked with an asterisk *.

It is important that you have all required information available when you begin because registration must be completed in one session. **A registration session will time out after 30 minutes of inactivity. If that occurs, all information entered during that session will be lost.**

A list of required information is available in the "Required Information for Registration" quick reference guide [PDF]" . This QRG is also available on the Resources page of the Open Payments website.

Registering as a Covered Recipient

Registering as a Physician or a Teaching Hospital –

If you are a physician who works at a teaching hospital and wish to see data related to you in your capacity as a physician, select the "Physician or Non-Physician Practitioner" option when registering. Registering as a user affiliated with a teaching hospital will allow you to see only data related to that teaching hospital and not your records. You may register as both a physician and a user affiliated with a teaching hospital if needed.

Physicians should register themselves in the Open Payments system and not delegate this task to another individual.

Registering as a Non-Physician Practitioner –

If you are registering as a Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, or Anesthesiologist Assistant, select the "Physician or Non-Physician Practitioner" option when registering. If you are a Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, or Anesthesiologist Assistant who works at a teaching hospital and wish to see data related to you in your capacity as a non-physician practitioner, select the "Physician or Non-Physician Practitioner" option when registering.

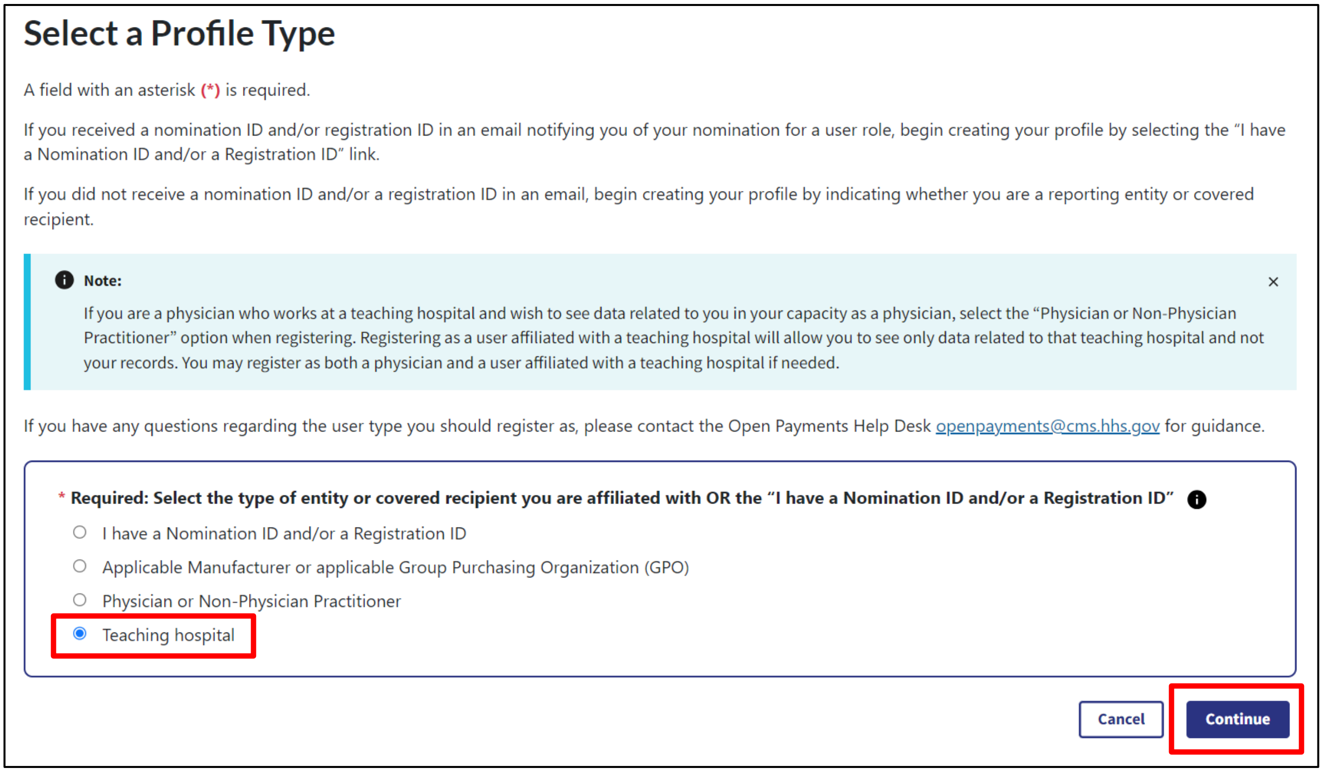
When you are ready to begin registration, select "Start Profile."

Back

Start profile

Step 3: Select the **Teaching Hospital** profile type, and then select the **Continue** button.

Figure 71: Select Profile Type Page



Step 4: Search for the teaching hospital by selecting the appropriate state, teaching hospital legal name, teaching hospital business address, and Taxpayer Identification Number (TIN) from the dropdowns and select **Search**.

If your teaching hospital is not found, select **Register for Prior Program Year** to search for your teaching hospital in a previous program year. If you can find your teaching hospital only in a prior program year, you may select the teaching hospital and proceed with registration. For instructions on registering a teaching hospital for a prior program year, see Section 3.3i.

If your teaching hospital cannot be found in any program year, contact the Open Payments Help Desk at 1-855-326-8366 for assistance.

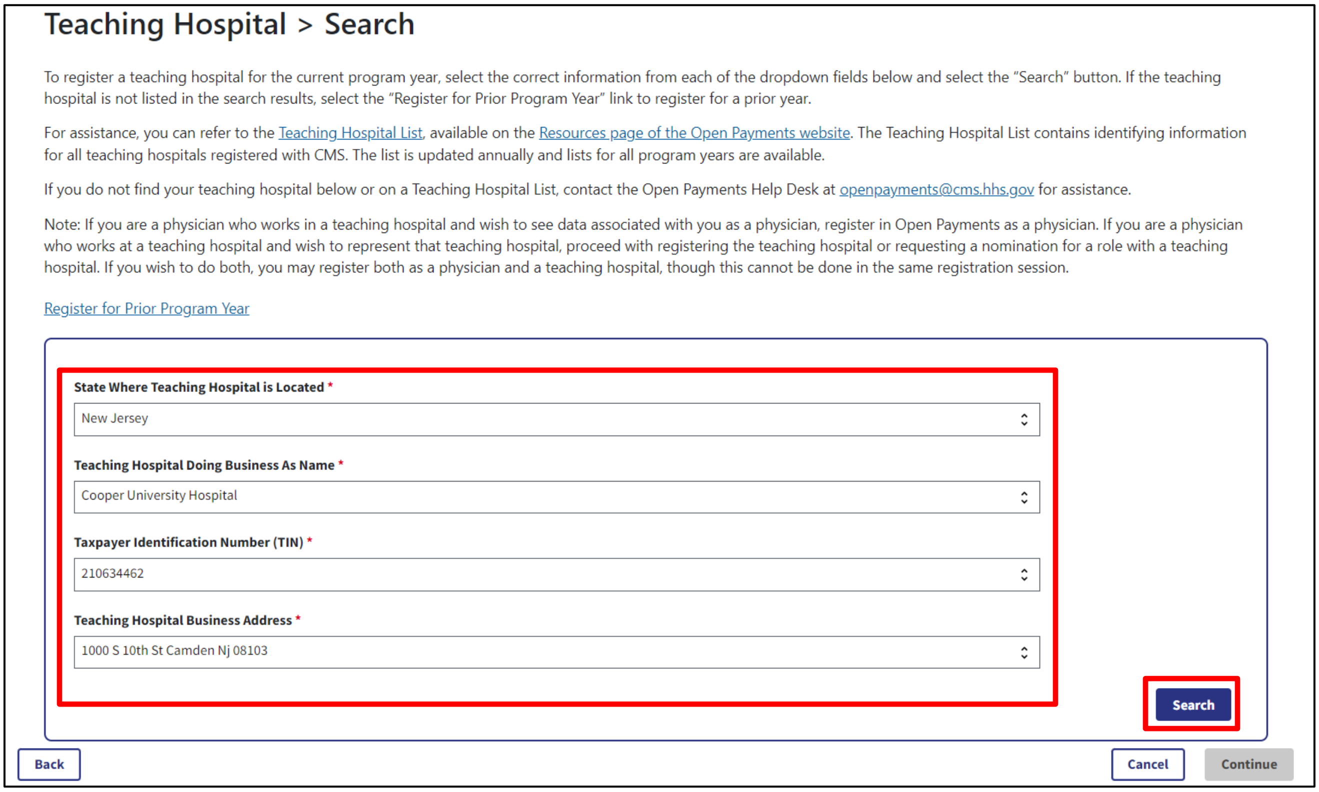
The name of the hospital selected during registration must be the hospital's "Doing Business As" name. In the CMS Teaching Hospital List, the "Doing Business As" name is under the heading of "Hospital Name."

The hospital address selected must be the address listed in the CMS Teaching Hospital List as the hospital's "NPPES Business Address."

Teaching hospitals are pre-populated into the Open Payments system based on the Open Payments Teaching Hospital List. Teaching hospitals not on this list or prior program year lists will not have payments or other transfers of value reported about them.

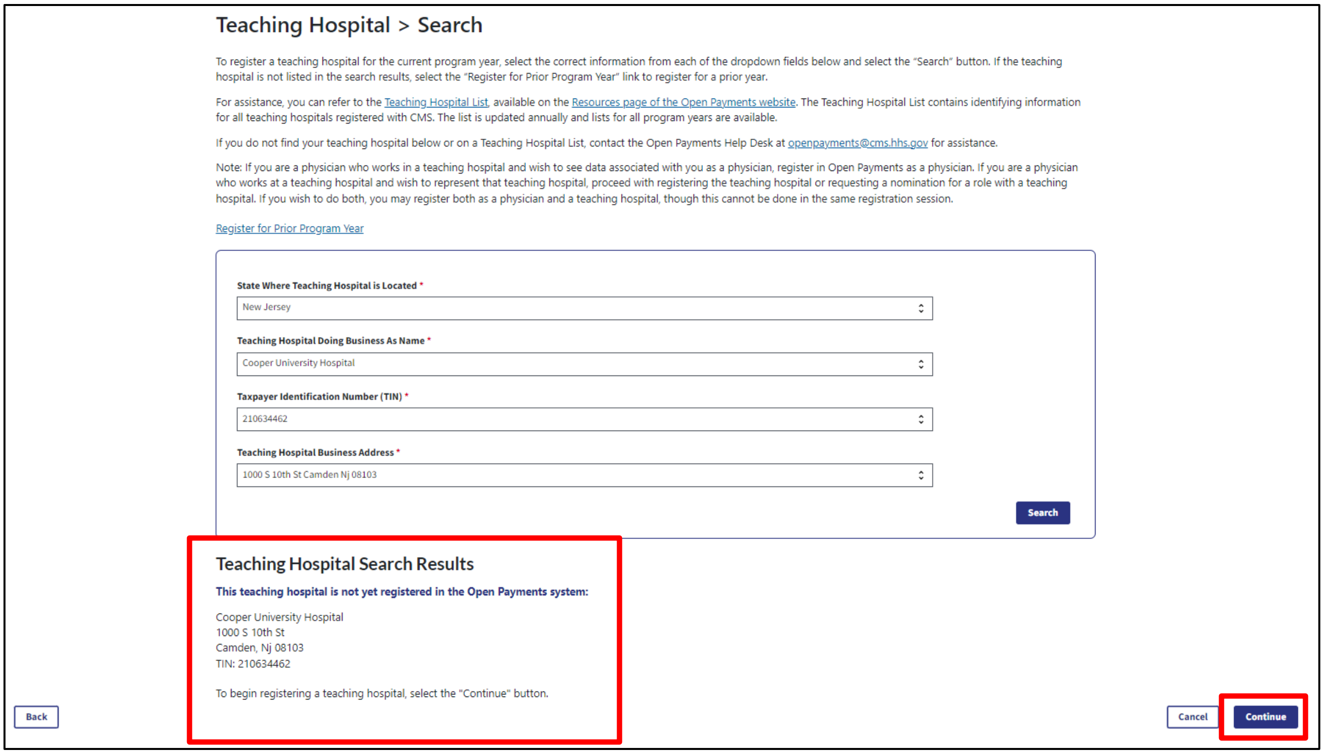
Populate the required fields using the dropdown filters, then select **Search**.

Figure 72: Teaching Hospital Search Page



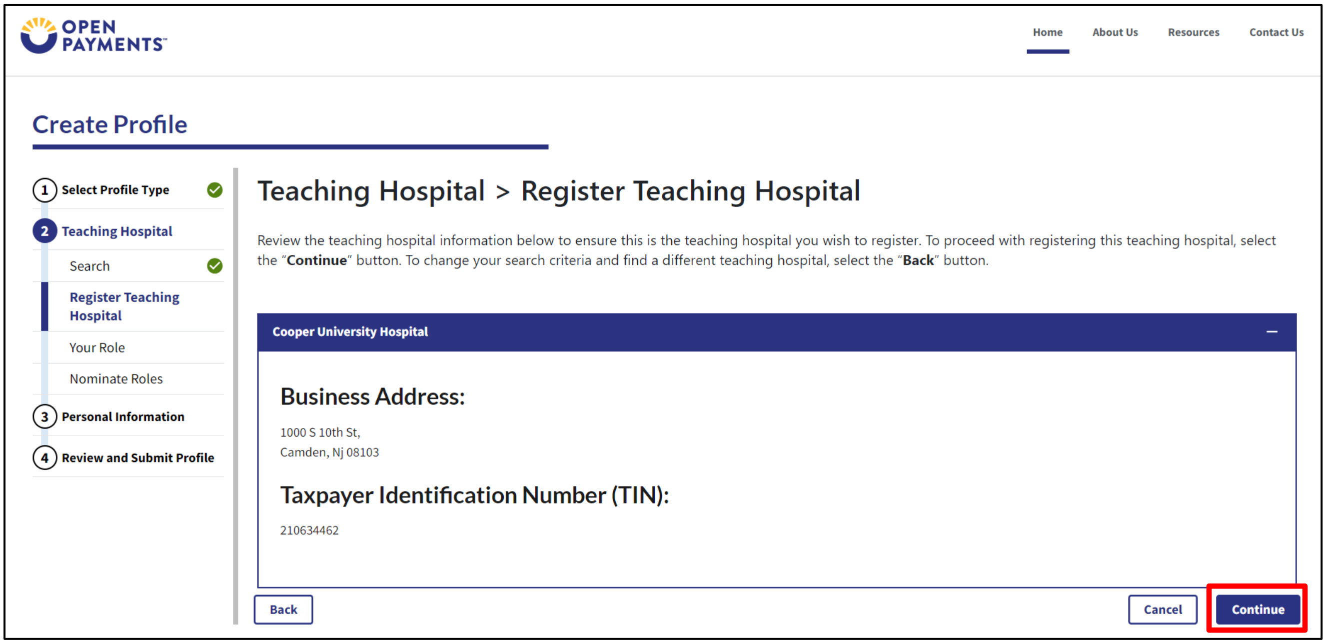
Step 5: Review the information displayed on the page. Select the **Continue** button if the information displayed is the teaching hospital you wish to register. If this is not the correct teaching hospital, select the **Back** button at the bottom of the page to return to the previous page and re-enter the information.

Figure 73: Teaching Hospital Search Page Search Results



Step 6: Review the information displayed on the page. When complete, select the **Continue** button.

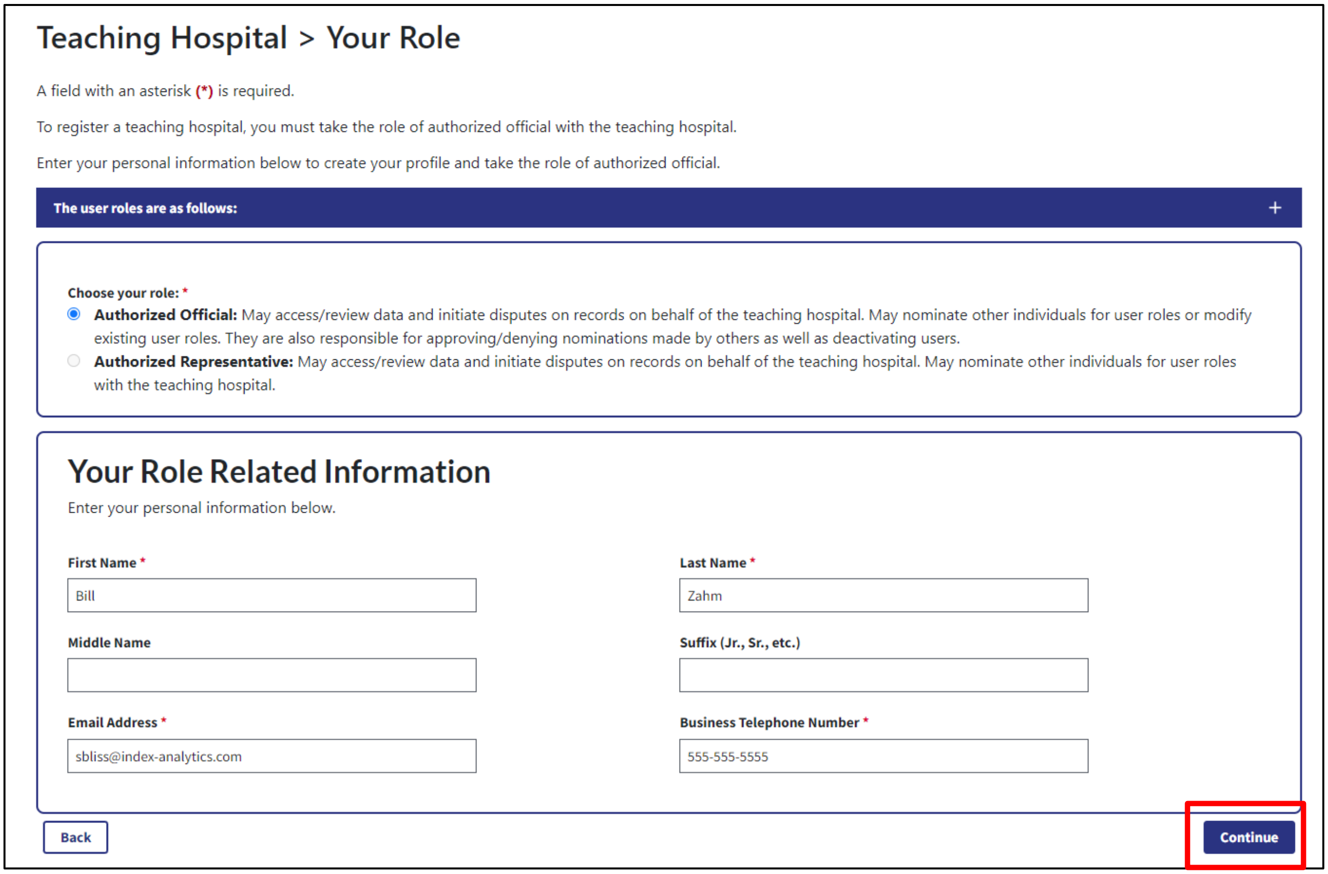
Figure 74: Register Teaching Hospital Page



__**Step 7:**__ Review the information generated by the system related to your role. You must select the role of "Authorized Official" for yourself to proceed with registration. Information on teaching hospital user roles is available in Section 3.4b.

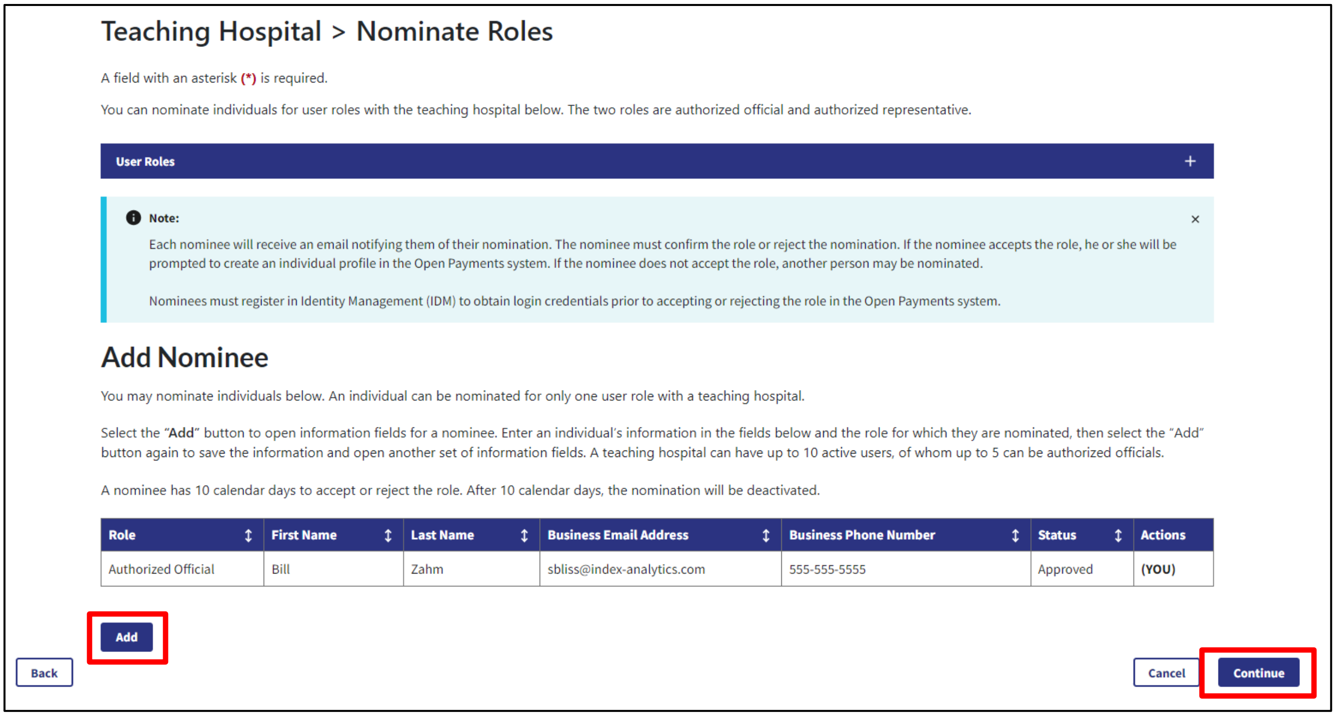
Your first name, last name, email address, and business phone will be pre-populated with information from your user account. Edit these fields as necessary. All required fields will be marked with an asterisk (*). You will not be able to proceed with registration until all the required fields have been entered. When complete, select the **Continue** button.

Figure 75: Teaching Hospital Your Role Page



Step 8: You may choose to nominate additional users to fill the authorized official or authorized representative roles. To do so, select **Add** to nominate any additional individual(s). If you choose not to add nominees at this time, select the **Continue** button without adding any nominee information and proceed to Step 9.

Figure 76: Teaching Hospital Nominate Roles Page



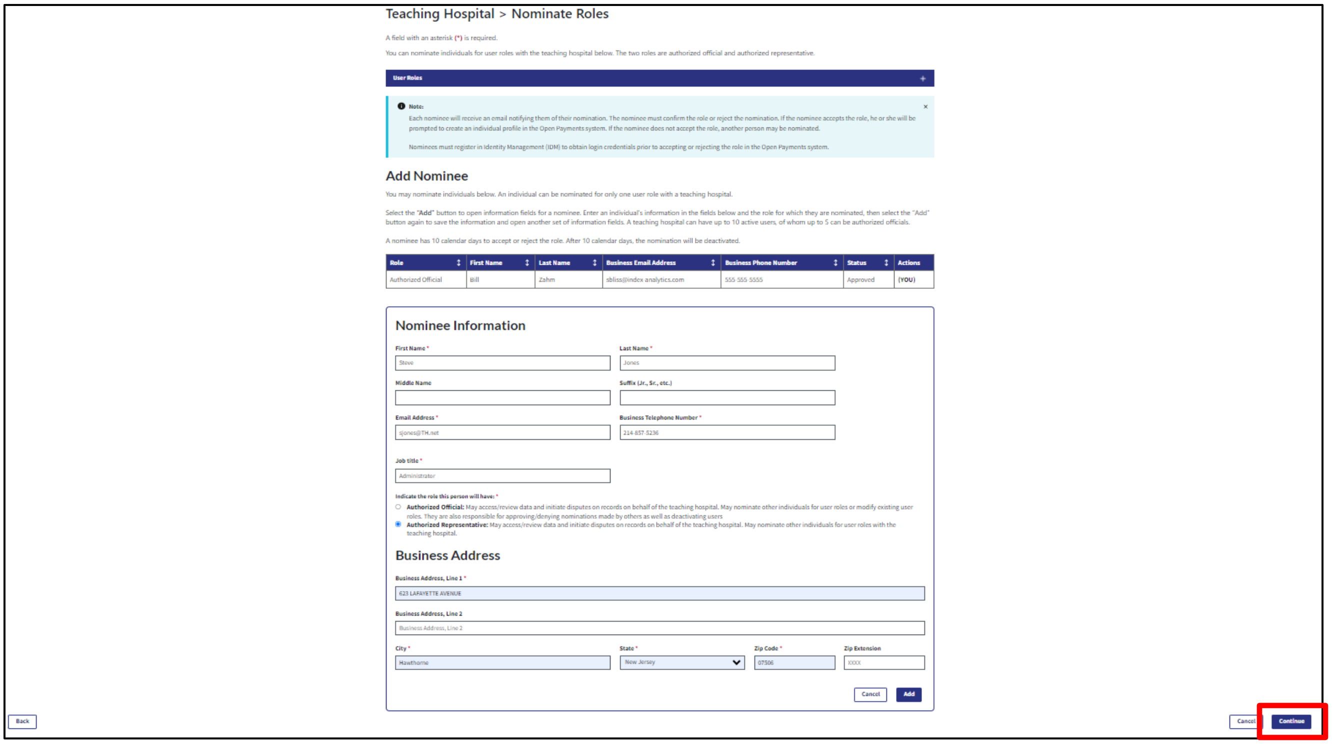
Step 8a: If you selected **Add**, enter the required information for one individual and select either "Authorized Official" or "Authorized Representative" to nominate the individual for the selected role. Information on teaching hospital user roles is available in Section 3.4c. When you have entered the information, select **Add**. This will add the nominee information to the teaching hospital's profile, as well as open another set of information fields to enter an additional nominee.

Repeat the process until you have entered all the individuals you wish to nominate. A teaching hospital may have up to 10 unique active users, 5 of whom can hold the role of authorized official. When you have added all the individuals you wish to nominate, select **Continue**.

Each nominated individual will receive an email notifying them of their nomination. The nominee must confirm or reject the role within 10 calendar days.

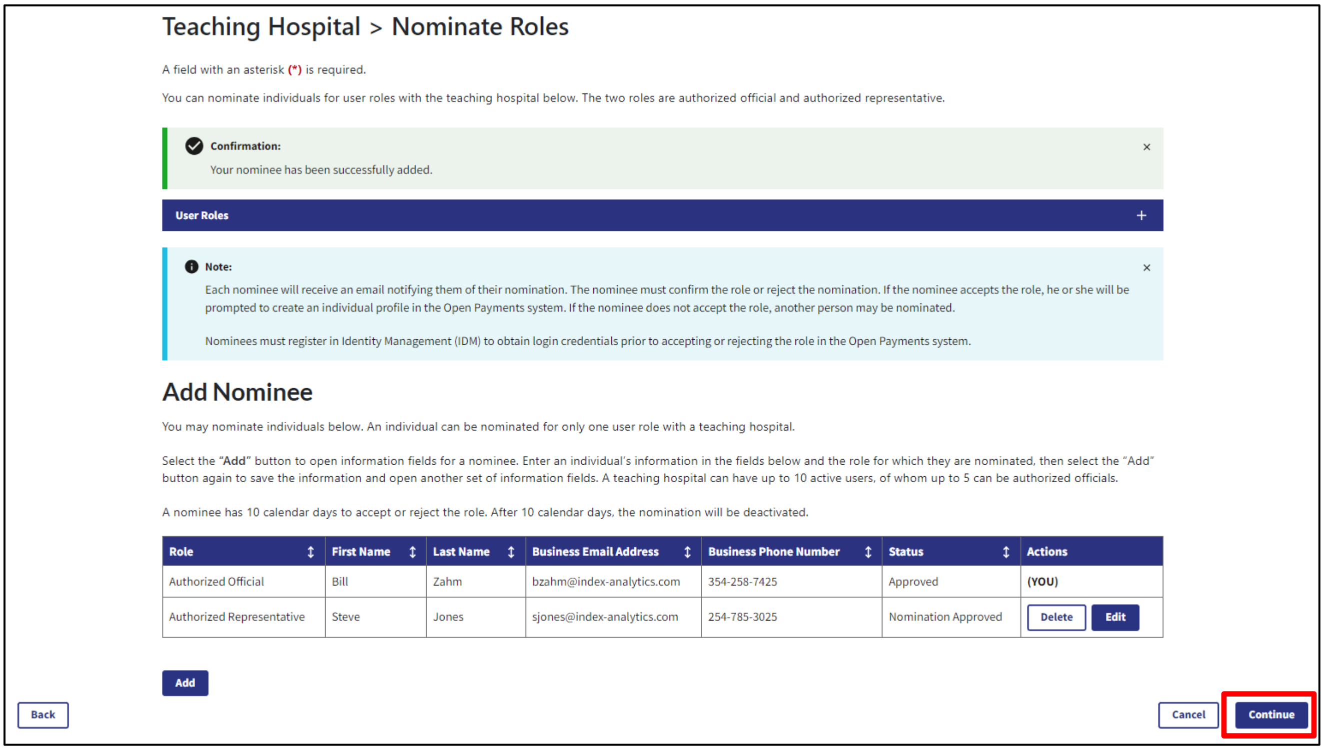
You do not have to nominate additional individuals during initial registration. You can nominate individuals later by updating your teaching hospital profile within the **Manage Teaching Hospitals** tab.

Figure 77: Teaching Hospital Nominate Roles Page Add Nominee



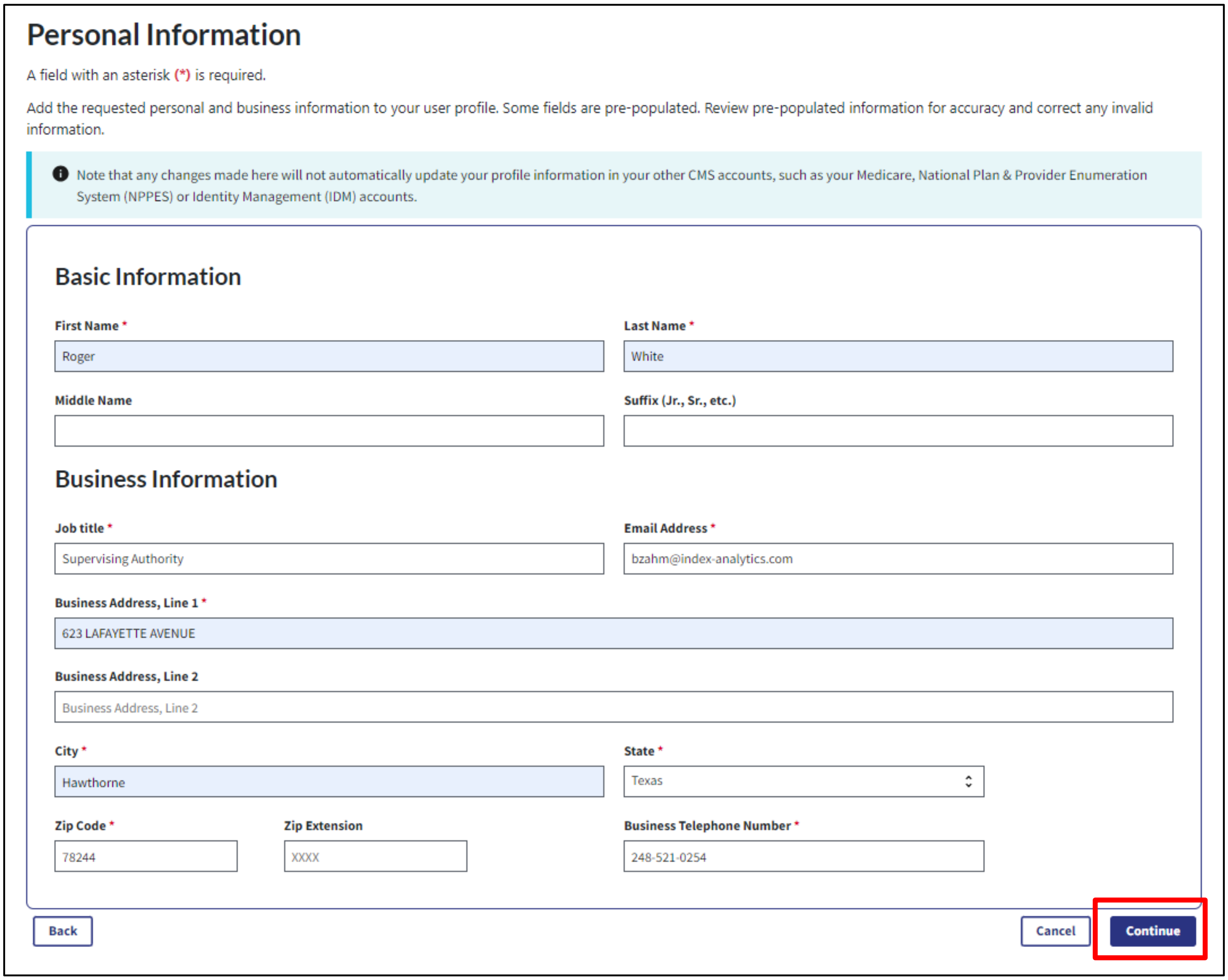
If you entered any nominees, you would see the nominee information displayed on the page. Confirm the information and when complete select the **Continue** button.

Figure 78: Teaching Hospital Nominate Roles Page with Added Nominees



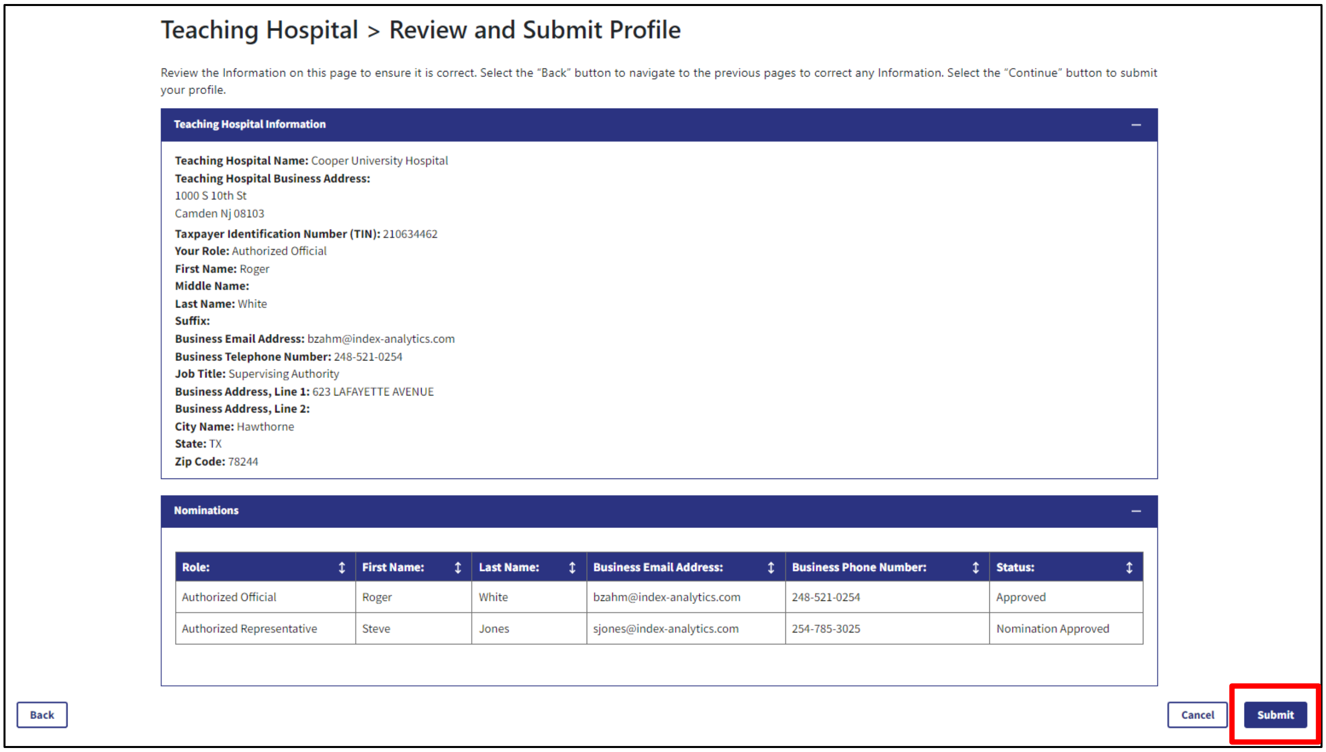
Step 9: Enter your personal and business information. When finished, select the **Continue** button.

Figure 79: Personal Information Page



Step 10: Review your profile information on the "Review and Submit Profile" page. Select the **Back** button at the bottom of the page to go back and edit any information. Once you have reviewed the information and determined it to be correct, select the **Submit** button.

Figure 80: Review and Submit Profile Page



The following message will appear on-screen to confirm your profile has been successfully created. You will have immediate access to the teaching hospital data. If you nominated additional individuals for user roles, an email notification is sent to the nominees that will instruct them on their next steps.

Figure 81: Success Confirmed On-Screen Message

3.3h: Registering a Teaching Hospital: Returning System Users

If you are a returning user registering an additional teaching hospital in the Open Payments system, follow the steps below.

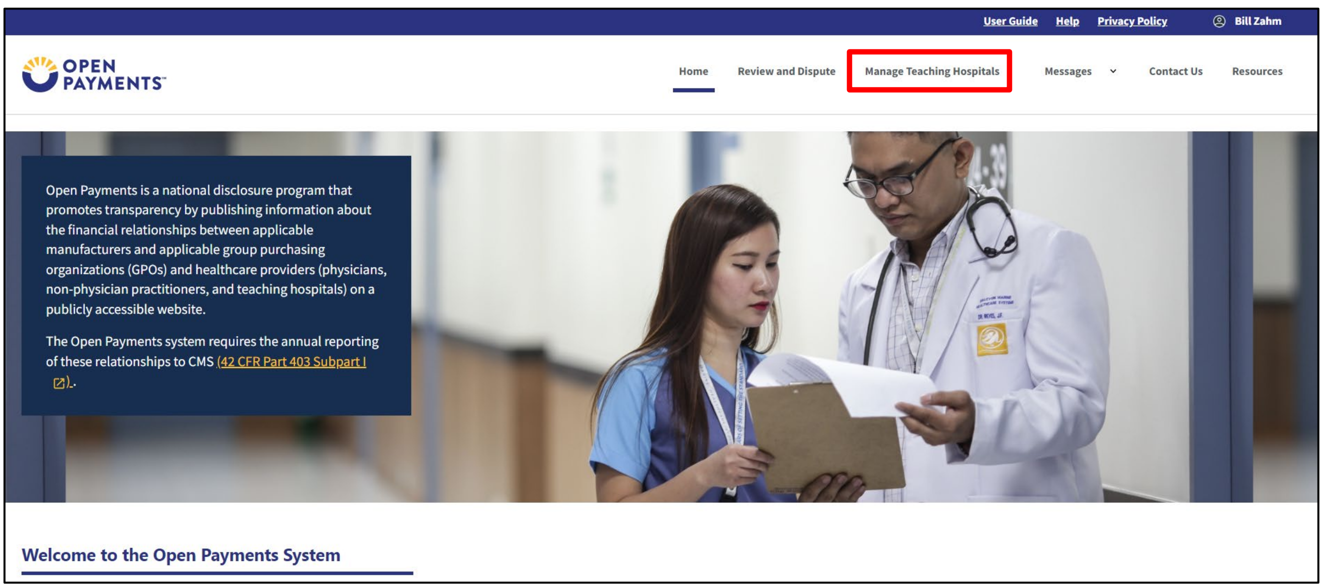
For example: You have already registered a teaching hospital in the Open Payments system, and now you want to register another teaching hospital.

<u>Step 1:</u> Log in to the Open Payments system at https://openpayments.system.cms.gov and agree to the Terms and Conditions.

You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you input during initial registration will be the default MFA device.

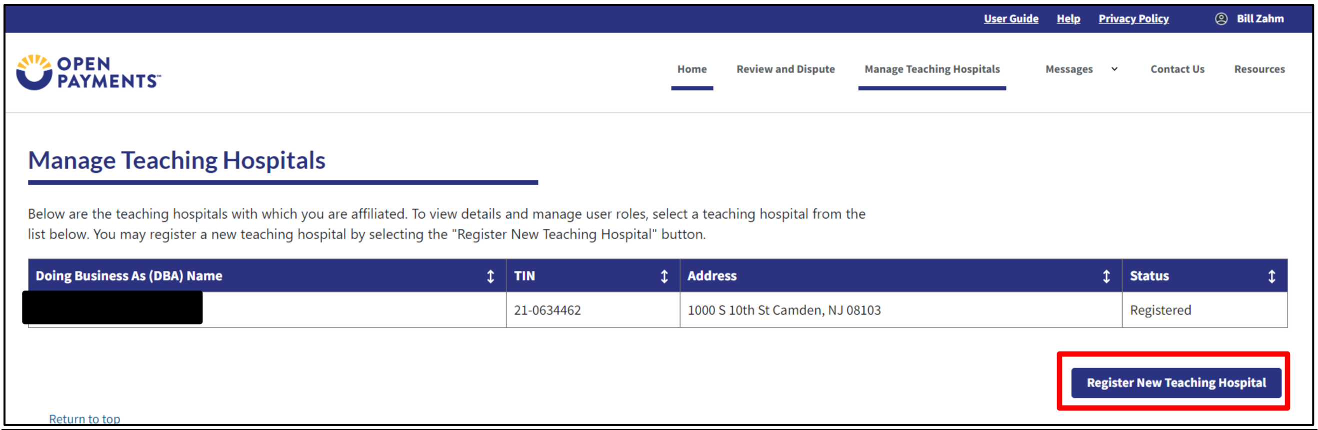
Select the **Manage Teaching Hospitals** tab on the home page.

Figure 82: Open Payments Home Page for Returning System Users



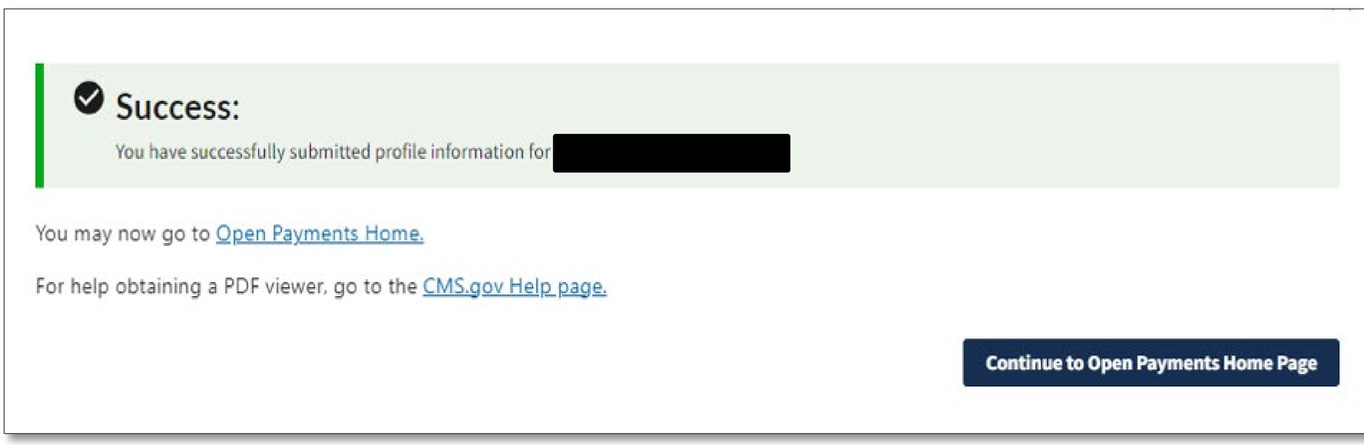
<u>Step 2:</u> From the "Manage Teaching Hospitals" page, select, **Register New Teaching Hospital**.

Figure 83: Manage Teaching Hospitals Page



Step 3: The remaining steps in this scenario are identical to registering your first teaching hospital. Please see Step 4 in Section 3.3g, above.

Figure 84: Teaching Hospital Nominate Roles Page



3.3i Registering a Teaching Hospital: Prior Program Year

If you wish to register a teaching hospital in Open Payments that does **not** appear on the current program year's CMS Teaching Hospital List, but **does** appear in previous Teaching Hospital Lists, you can register the hospital for a prior program year. Doing so will allow you to view records associated with that teaching hospital from a prior program year.

If your teaching hospital is already registered in the Open Payments system, you do not need to re-register the teaching hospital for the prior program year.

The Teaching Hospital List is updated on an annual basis. If your teaching hospital does not appear in any CMS Teaching Hospital Lists, it will not have any records associated with it in the Open Payments system and cannot be registered.

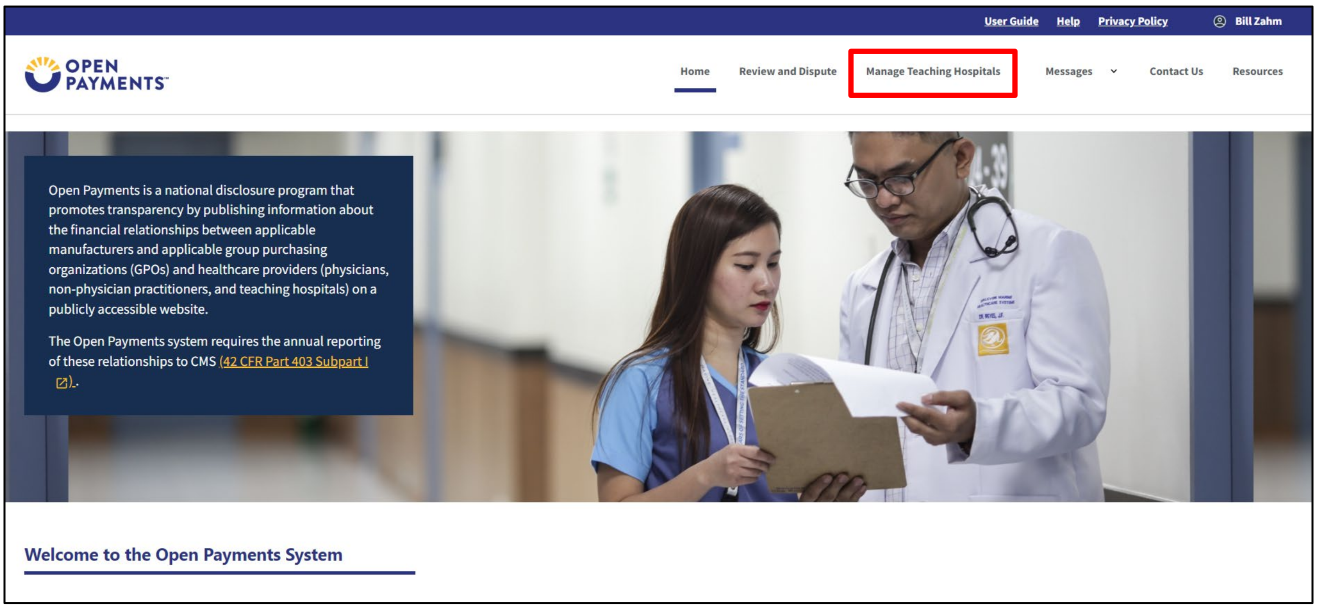
To register your teaching hospital for a prior program year, follow these steps:

Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and agree to the Terms and Conditions.

You will need to verify your identity using Multi-Factor Authentication (MFA) after selecting the **Log In** button. The email address you input during initial registration will be the default MFA device.

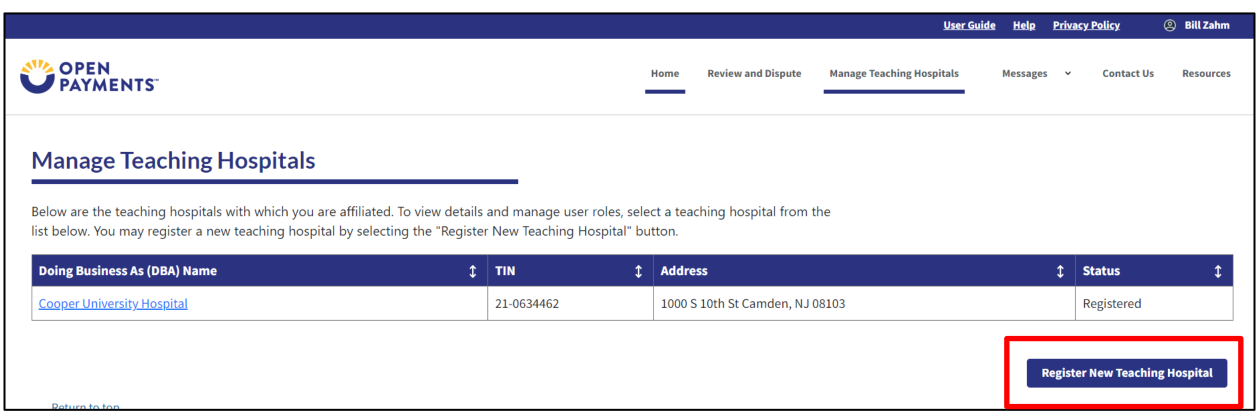
Select the **Manage Teaching Hospitals** tab on the Home page.

Figure 85: Open Payments System Home Page for Returning System Users



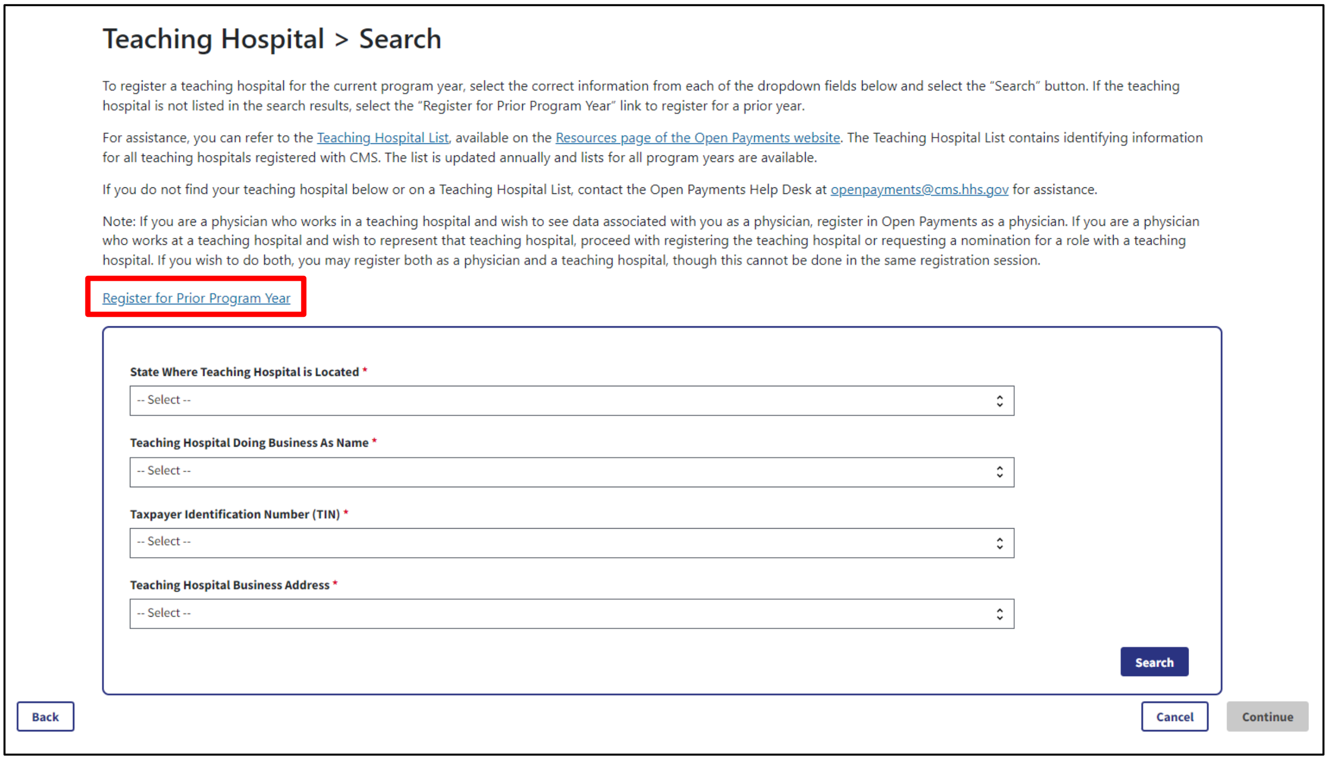
Step 2: On the “Manage Teaching Hospitals” page, select **Register New Teaching Hospital**.

Figure 86: Manage Teaching Hospitals Page



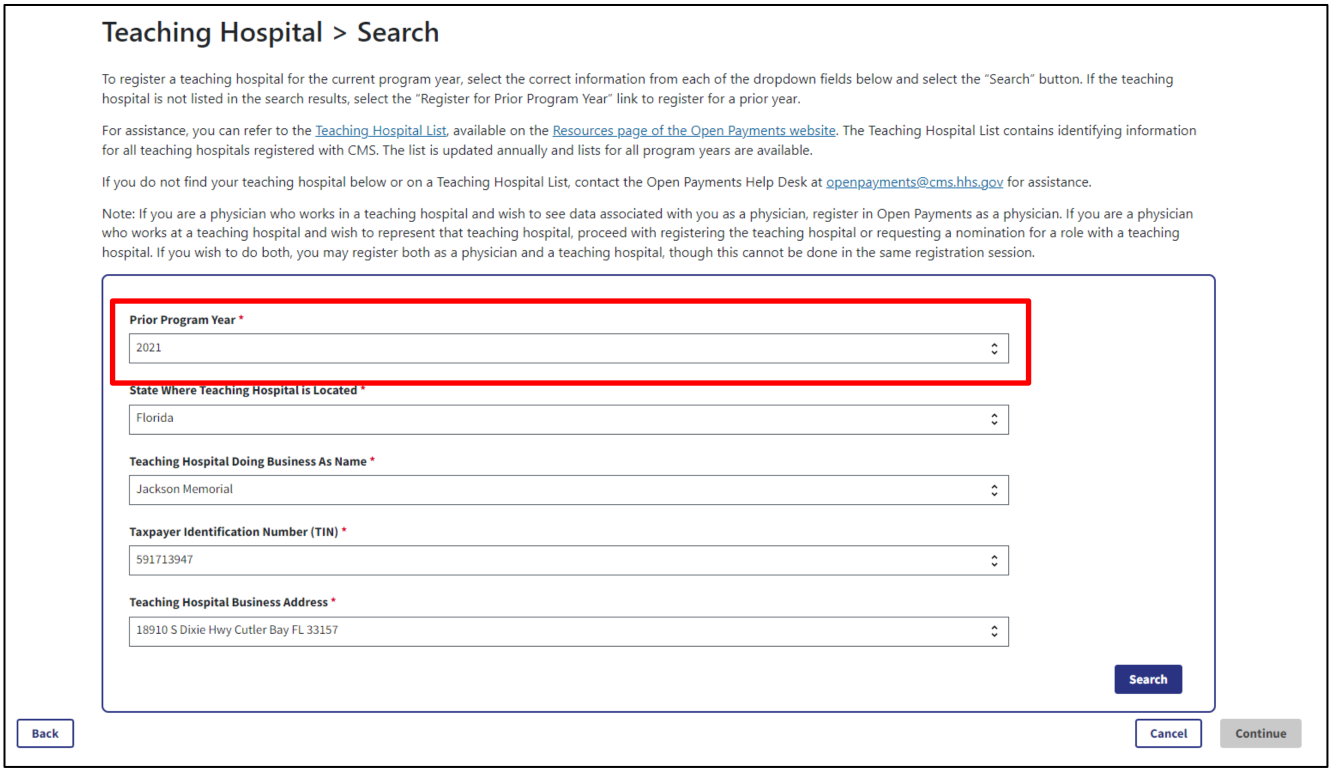
Step 3: On the “Teaching Hospital> Search” page, select the link “Register for Prior Program Year.”

Figure 87: Teaching Hospital Search Page



Step 4: In this scenario, you are registering a teaching hospital from a prior year. The only thing different from registering a teaching hospital for the first time is the addition of the first entry field, asking for the prior reporting year. Please continue with this completing the fields, then proceed to Step 4, section 3.3g, above, to continue this process.

Figure 88: Teaching Hospital Search Page: Prior Program Year



3.3j: Using the Switch User Functionality

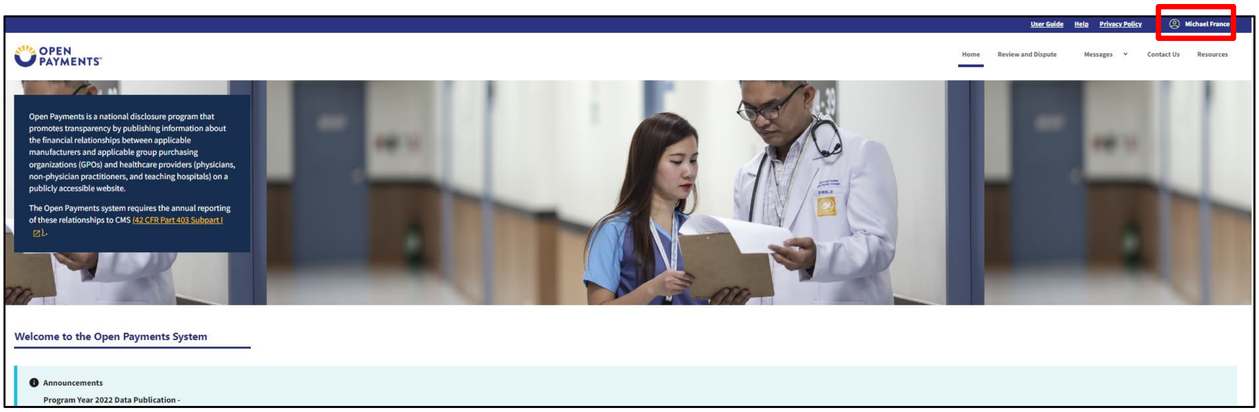
The Open Payments system allows you to hold multiple user roles based on your affiliations with multiple entities. You can switch among the Reporting entity, physician or NPP, and teaching hospital user types through a "Switch User Type" functionality. Once you have successfully registered within the Open Payments system under any user type (reporting entity, physician, or teaching hospital), the "Switch User Type" functionality will become available. The pages in the Open Payments system will look similar for each user type, though the actions available will change depending on the user type you are operating under at that time.

All users have access to the "Switch User Type" functionality. Users who have only a single user type can use the functionality to request roles for and/or register as another user type.

Follow these steps to switch between user types or request a role as another user type in the Open Payments system:

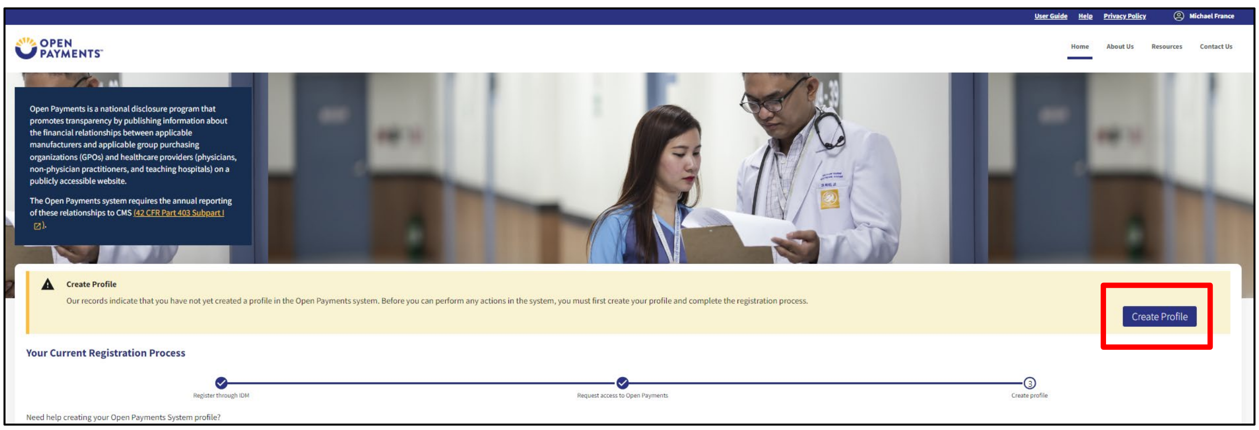
Step 1: At the very top of the page, select your name. In the dropdown, select the Switch User Type link, and then select the user type you would like to register a profile for.

Figure 89: Open Payments Landing Page for Returning Reporting Entity User



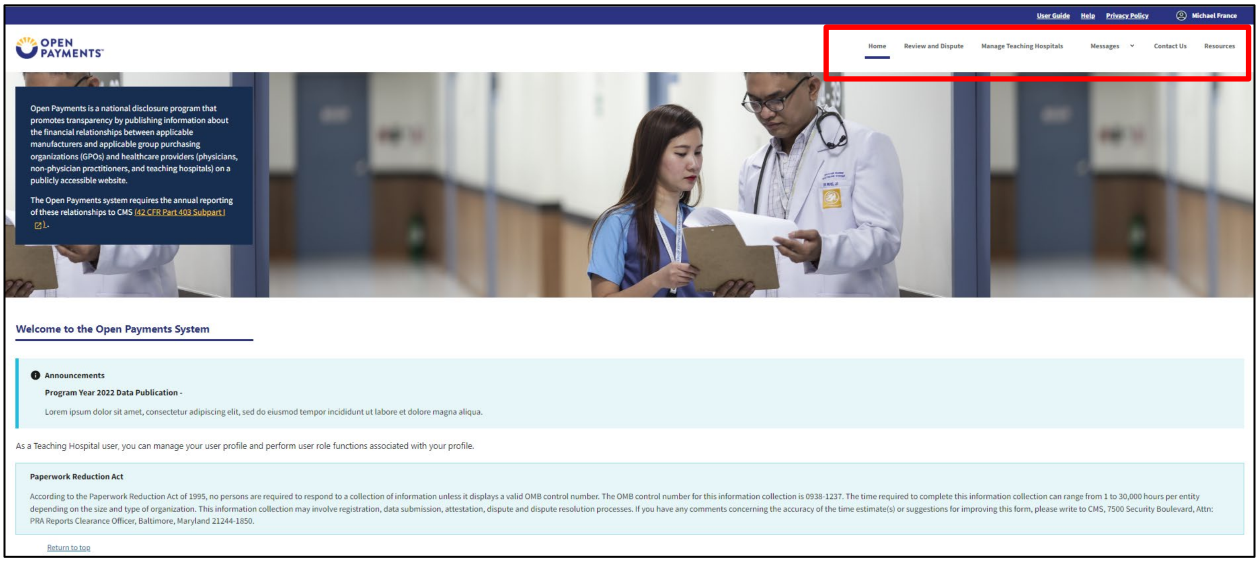
Step 2: In this example, the NPP user wants to create a profile for a reporting entity. If you are not currently assigned a role for the selected user type, you will be prompted to create a profile. Select the "Create My Profile" button to begin that process.

Figure 90: Open Payments Landing Page for First-Time User



<u>Step 3a:</u> As another example, the NPP user already has a role in a teaching hospital. By switching the user type to “Teaching Hospital”, the user can now work within that profile.

Figure 91: Open Payments Landing Page for Returning User



The profile type will be displayed at the top of the page.

You may switch between user types at any time. To perform system actions such as registration and nominations, data submission, and review and dispute for the user type that is displayed, refer to the corresponding section of Open Payments User Guide for Reporting Entities or Open Payments User Guide for Covered Recipients.

Section 3.4: Open Payments Covered Recipient Users and User Roles

There are two user roles available for individuals associated with physicians, NPPs or teaching hospitals: authorized officials or authorized representatives.

3.4a: Physician and NPP User Roles

A physician may designate **one authorized representative** within the Open Payments system to take certain actions on behalf of the physician. This person can be another physician, an office manager, a practice manager, or another person the physician would like to designate to interface with the Open Payments system on his or her behalf. A physician cannot be his or her own authorized representative.

The physician will designate the level of access for their authorized representative; more than one access level can be granted. The different levels of access that can be granted to the authorized representative are:

1. **Read:** Default access level. Able to see covered recipient profile and records information.
2. **Modify Profile:** Able to edit or enter the covered recipient’s My Profile information (NPI, license, specialties, etc.).

3. **Dispute Records:** Able to dispute reported payments, other transfers of value, or physician ownership and investment interests.

Figure 92: Physician User Roles and User Role Functions

User Role	Function
Physician	• Registers him- or herself in the Open Payments system • Nominates an authorized representative • Has full access to review and dispute records • Views and download system generated email messages

Authorized Representative	• Physician can grant one or more of the following access levels:
	  ○ Read-only: (default) Able to see covered recipient profile and records information
	  ○ Modify Profile: Able to edit or enter a covered recipient's "My Profile" information (NPI, license, specialties, etc.)
	  ○ Dispute Records: Able to dispute records related to the covered recipient submitted by reporting entities
	• Access levels are separate; having "dispute records" access does not automatically include "modify profile" access, or vice versa
	• Views and download system generated email messages

3.4b: Teaching Hospital User Roles

Teaching hospitals can have up to 10 unique users holding the role of either an authorized official or authorized representative.

For teaching hospitals, authorized officials are responsible for approving all user role nominations and modifying user roles. The teaching hospital authorized representatives will be granted certain permissions to access/review data, initiate a dispute on behalf of the teaching hospital, and make/approve nominations by an authorized official.

The authorized representatives can be any person the teaching hospital would like to designate. There can be a maximum of five authorized official(s) per teaching hospital. The user roles applicable for teaching hospitals are given in the figure below.

Figure 93: Teaching Hospital User Roles and User Role Functions

User Role	Function
Authorized Official	• Registers with the teaching hospital in the Open Payments system • Nominates other users and modifies existing user roles • Approves or modifies nominations made by others and requests for user roles made by others, including self-nominations • Removes user roles from other users • Reviews and disputes records associated with the teaching hospital • Views and download system generated email messages
Authorized Representative	• Reviews and disputes records associated with the teaching hospital • Nominates other individuals for user roles with teaching hospital (nominations must be approved by an authorized official) • Views and download system generated email messages

To nominate an individual for any role, the following information must be input into the Open Payments system about that individual:

- First name
- Last name
- Business phone
- Business address
- Email address

Section 3.5: Nominations

The nomination process allows you to assign specific roles to individuals to act on behalf of a physician, NPP, or a teaching hospital. Physicians and NPPs can nominate an individual to serve as an authorized representative, and users affiliated with teaching hospitals can nominate individuals to serve as authorized representatives or authorized officials. Also, individuals can nominate themselves for a user role with a teaching hospital.

An authorized official from the teaching hospital must approve all nominations before users can begin performing actions in the system. Note: If you nominate yourself for a role with a teaching hospital that is already registered but lacks an active authorized official, please call the Open Payments Help Desk.

Individuals may not self-nominate to serve on behalf of physicians and NPPs. The physician or NPP must directly nominate the individual to serve as the authorized representative.

Nominations can be made during registration or afterwards. The system will generate an email notification to the nominee informing them that they are nominated for a role in the Open Payments system. The email notifying teaching hospital authorized officials and authorized representatives will contain a registration ID and a nomination ID. The registration ID is specific to the teaching hospital; the nomination ID is specific to the individual nominee.

The email notifying physician and NPP authorized representatives of their nomination will contain only a nomination ID.

Users notified of their nomination for a role in a reporting entity must use the registration ID and/or nomination ID received in the nomination email to complete their profile in the Open Payments system to receive access to the functions for that specific role.

The nominee must confirm or reject the role within 10 calendar days. They can do so by registering in the Open Payments system. Nominees can then log in to the Open Payments system to confirm or reject the role. The Open Payments system will render the nomination expired if the nomination has not been accepted or rejected within 10 calendar days. This information is included in the email notification.

If the nomination is accepted, the individual will be able to complete a user profile, gain access to the system, and perform the duties of their role. If they reject the nomination, the individual will not be able to perform the actions on that entity’s behalf and the authorized official will receive an email notification of the nomination rejection.

Nominees will need to complete the Open Payments registration process to accept or reject their nominations.

If there is no action taken by the nominee, a final reminder notification will be sent on the 9th calendar day, reminding the nominee that they have yet to accept or reject the nomination. If the nomination is still not accepted or rejected by the end of the 10th calendar day, an expired nomination notification will be sent to the nominee. **Figure 105** shows the five steps in the nomination acceptance process.

Figure 94: Accepting Nominations Process

Users can also be deactivated from a teaching hospital by a teaching hospital authorized official. Deactivation removes an individual’s association with a teaching hospital in the Open Payments system, including removing the individual’s access to that teaching hospital’s information and records. It does not remove the individual from the Open Payments system.

In the “My Open Payments Profile” page of the Open Payments system, user roles are listed with a status. An explanation of those statuses is in the table below.

Figure 95: User Role Statuses for Physicians, NPPs, and Teaching Hospitals

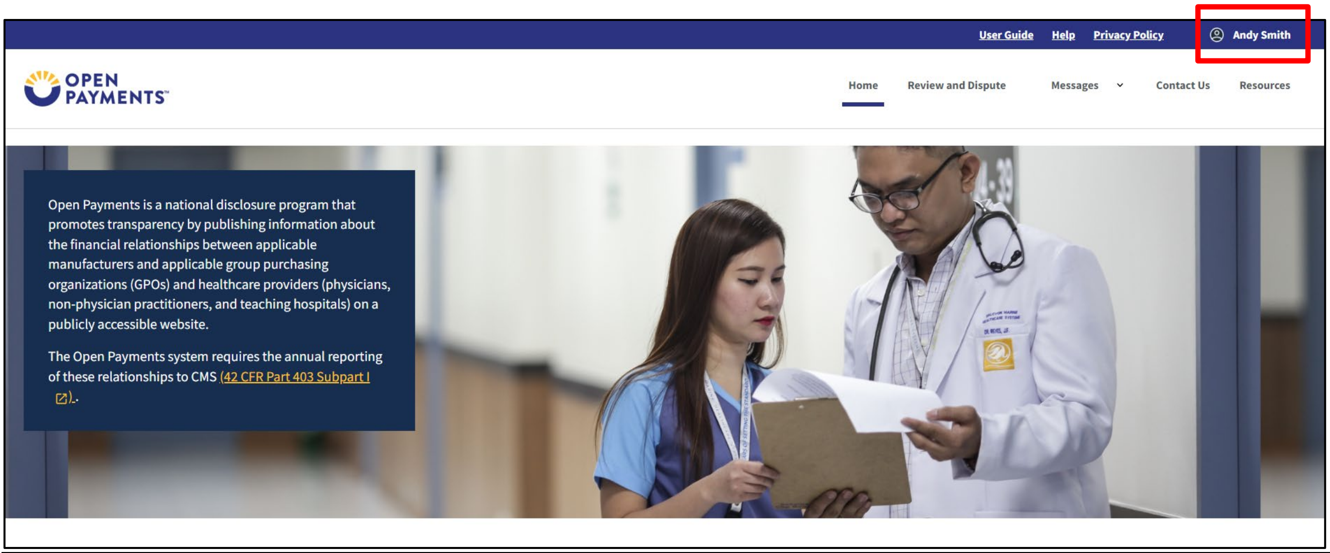
User Role Status	Meaning
Nominated	The individual has been nominated for a user role with the teaching hospital or physician or NPP
Declined	The individual declined the nomination for the user role
Accepted	The individual accepted the nomination for the user role
Requested (teaching hospital only)	An individual has self-nominated for a user role with a teaching hospital
Approved (teaching hospital only)	The individual's self-nomination for the user role has been approved by an authorized official with the teaching hospital
Vetted (physician and NPP only)	The physician or NPP has successfully completed the vetting process
Pending Vetting (physician and NPP only)	The physician or NPP has not yet undergone the vetting process
Vetting In Progress (physician and NPP only)	The physician or NPP is undergoing the vetting process
Failed Vetting (physician and NPP only)	The physician or NPP has not yet undergone the vetting process

3.5a: Nominating an Authorized Representative for Physicians or NPPs (Returning System Users)

If you are a physician or NPP that did not delegate an authorized representative during initial registration, follow the steps below to nominate an individual for that role.

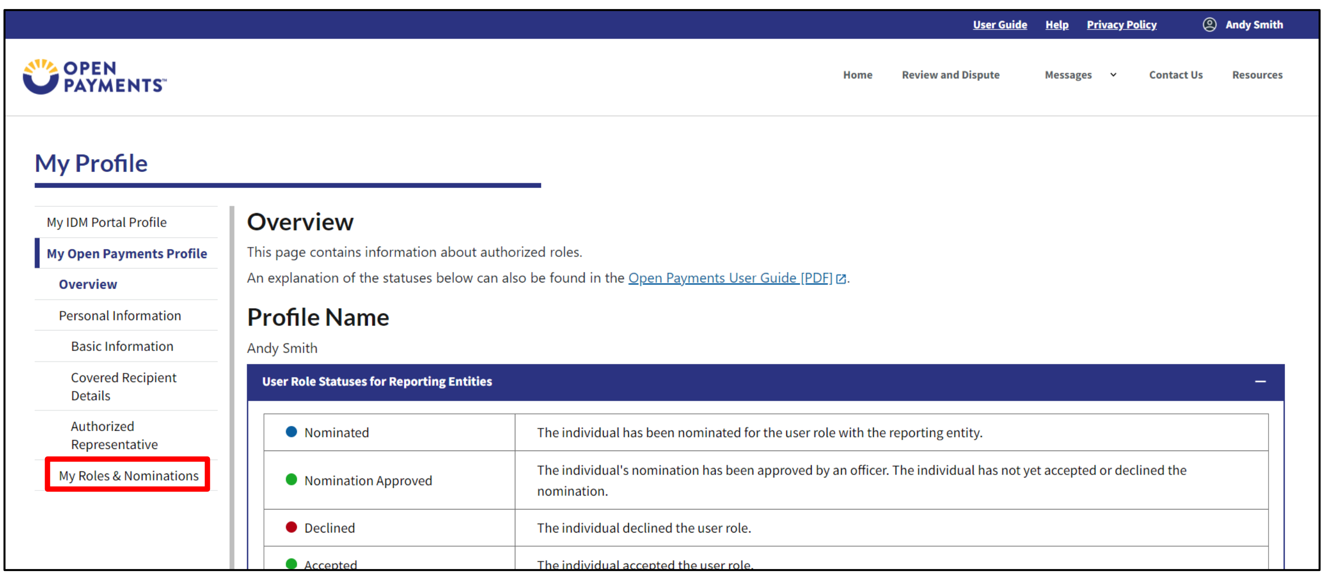
Step 1: Log in to the CMS Enterprise Portal at https://openpayments.system.cms.gov, navigate to the Open Payments home page, and select the "My Open Payments Profile" link under your name in the upper-right corner of the home page.

Figure 96: Open Payments Landing Page for Returning User



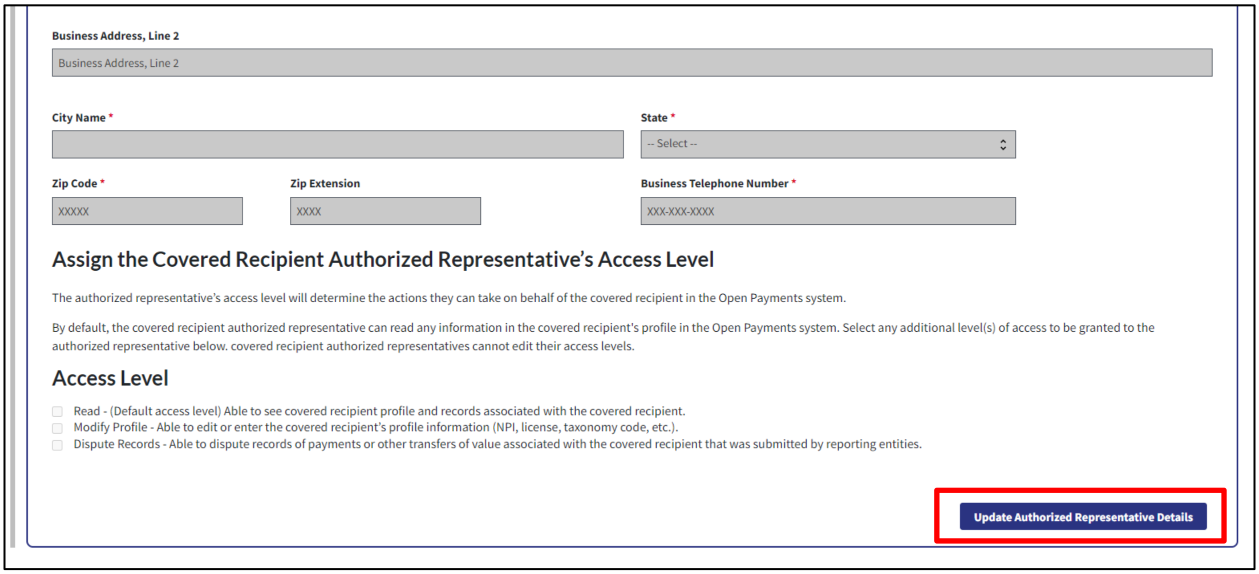
Step 2: From the "My Profile" page, select the **Authorized Representative** link on the left side of the page. tab.

Figure 97: My Profile Page



<u>Step 3:</u> On the bottom of the Authorized Representative Details page, select **Update Authorized Representative Details** button**.**

Figure 98: My Profile Details Page

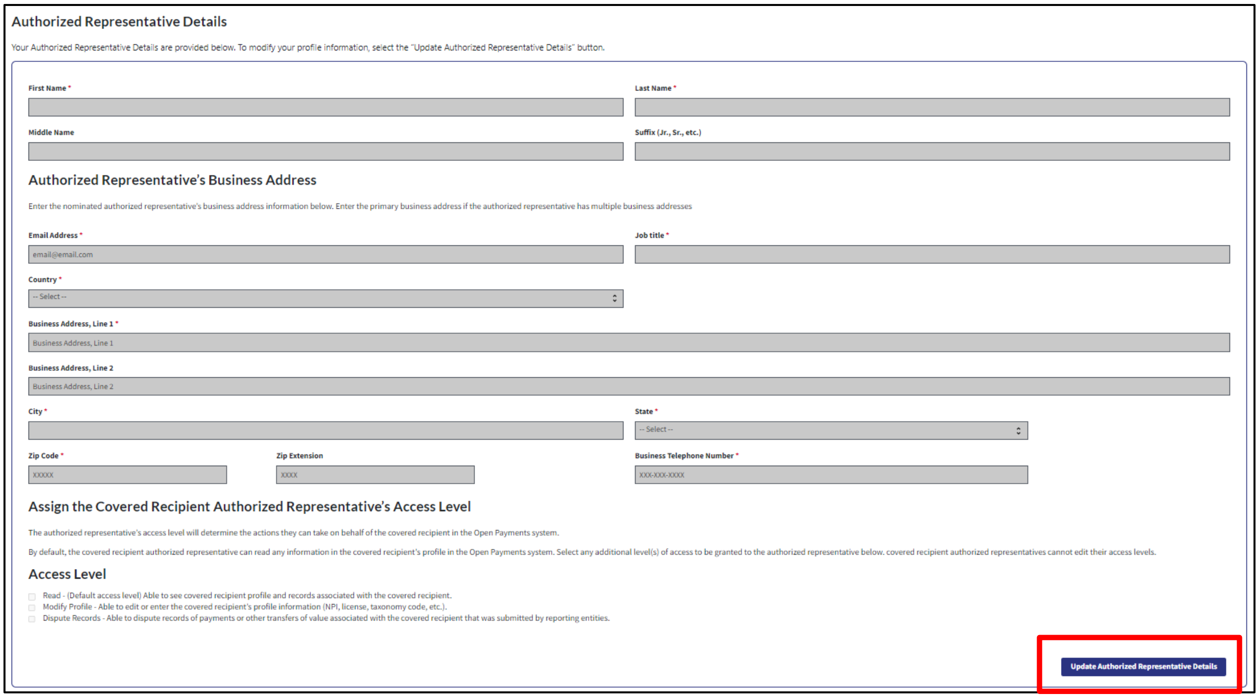


<u>Step 4:</u> On the Authorized Representative Details page, if you have not delegated an authorized representative, there will be nothing entered in the fields. To delegate an authorized representative, complete the fields shown.

You may only delegate one authorized representative. If this page shows an authorized representative, and you want to change it to someone else, you may do so at this time by deleting and re-entering the appropriate fields.

The default level of access is "Read." If you would like the authorized representative to have more access while representing you in the Open Payments system, select "Modify Profile" or "Dispute Records." Access levels are discussed in Section 3.4. When complete, select **Update Authorized Representative Details**.

Figure 99: My Profile Details Tab Editing



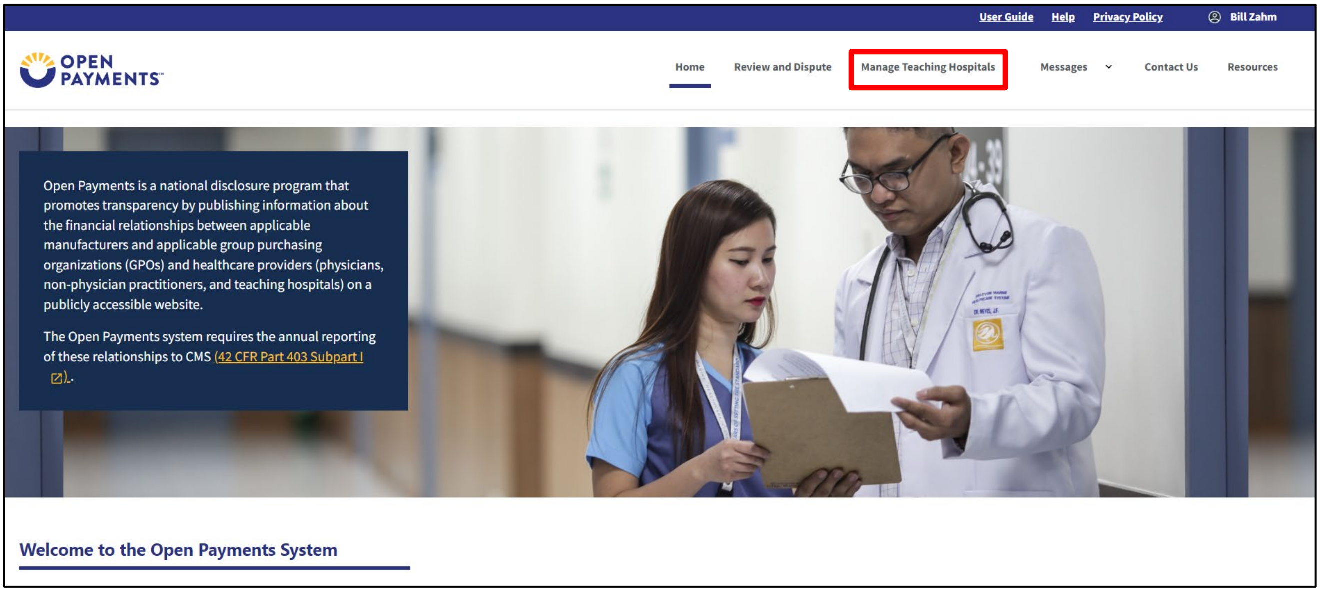
Step 5: The nominee will receive an email notification that they have been nominated for a role in the Open Payments system. The email will contain a nomination ID and specific instructions. Users notified of their nomination for a role must use the nomination ID received in the nomination email to complete their profile in the Open Payments system and receive access to the functions for that specific role. The nominee will have 10 calendar days to accept or reject the nomination.

3.5b: Nominating Additional Roles for a Teaching Hospital: Returning System Users

If you are an authorized official for a teaching hospital that did not nominate individuals for user roles during initial registration, follow the steps below. The authorized representative can be a physician, NPP, an office manager, a practice manager, or any person the teaching hospital would like to designate.

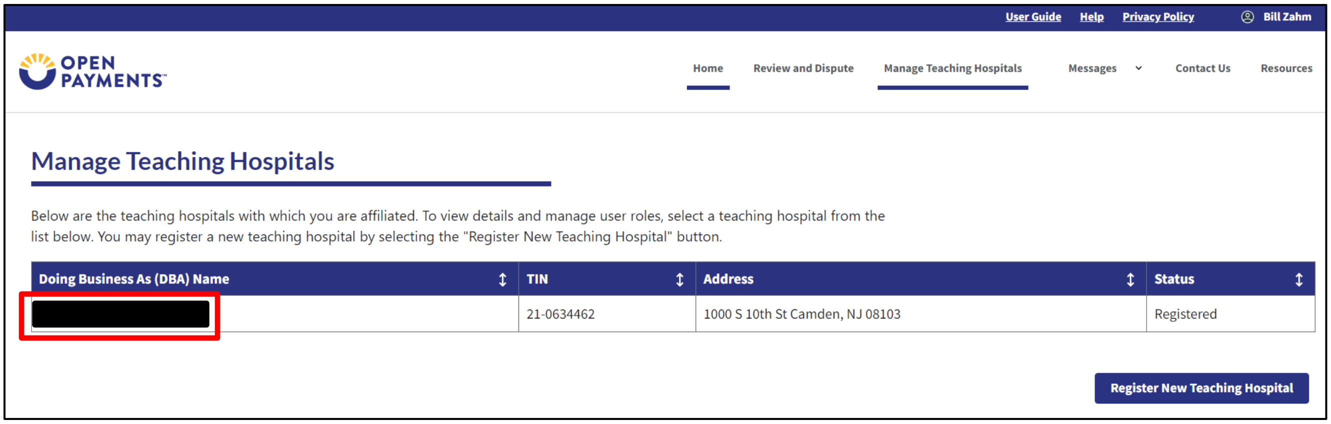
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select the **Manage Teaching Hospitals** tab.

Figure 100: Open Payments Landing Page for Returning User



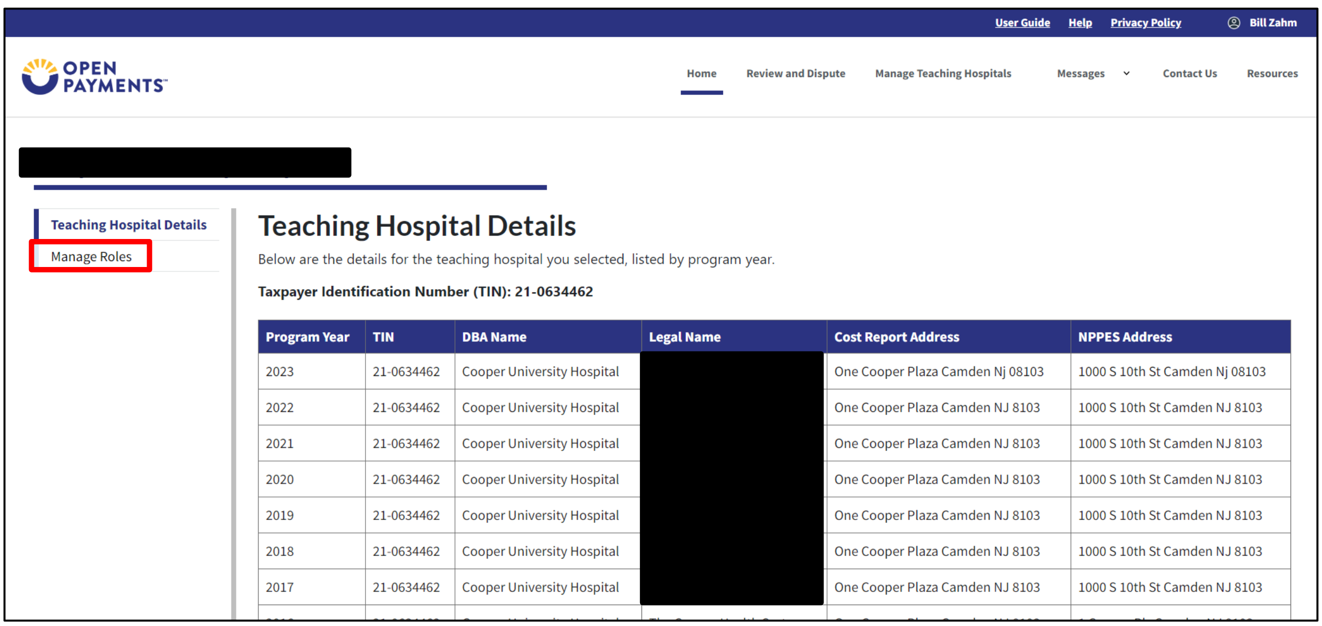
Step 2: Select the teaching hospital for which you wish to nominate a new role.

Figure 101: Manage Teaching Hospitals Page



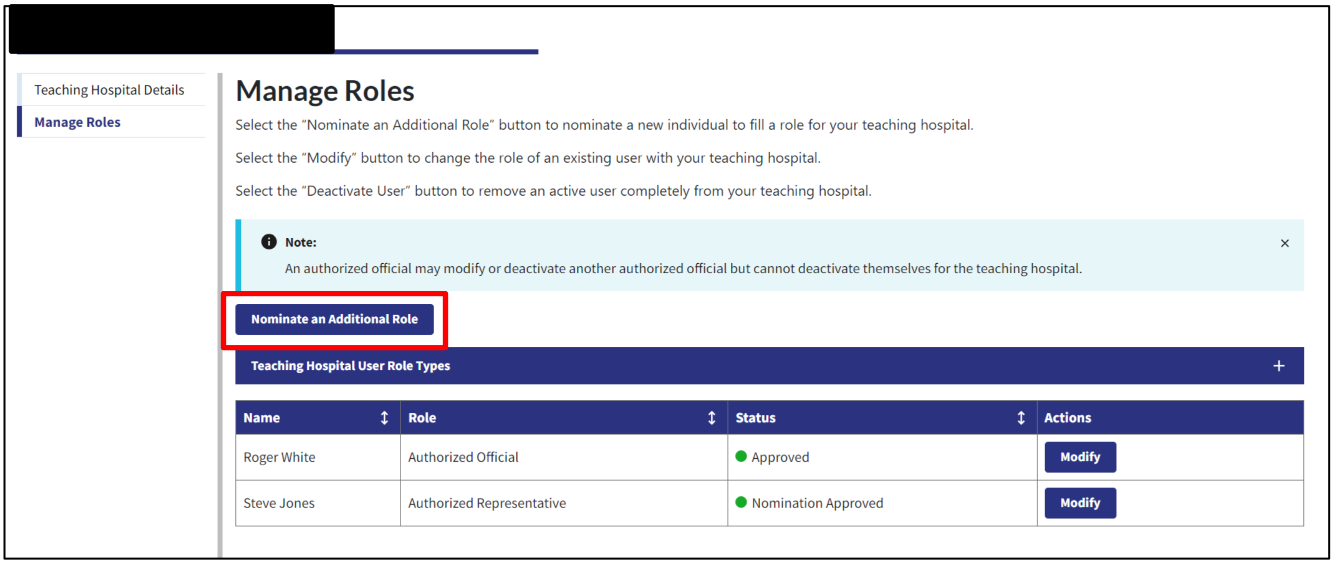
Step 3: Select **Manage Roles**.

Figure 102: Teaching Hospital Information Page



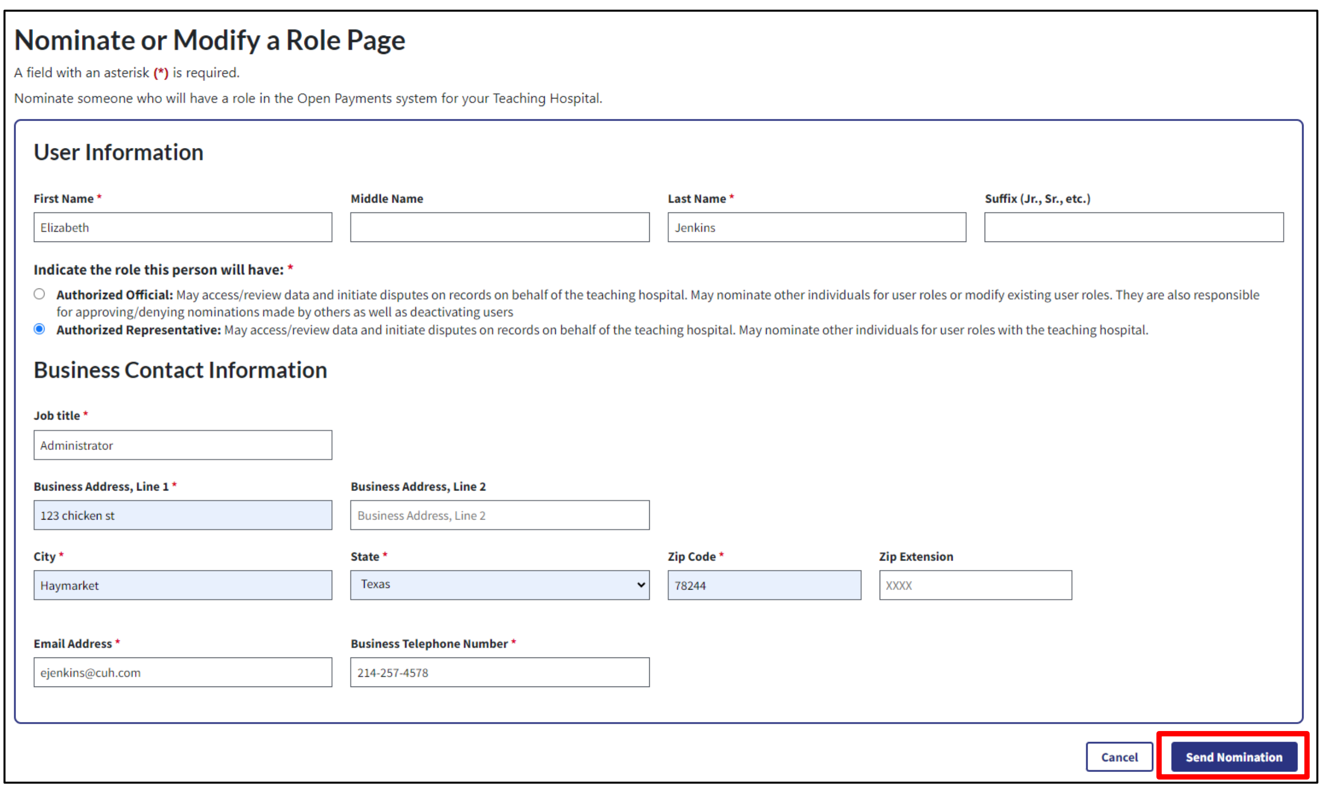
Step 4: Select the **Nominate an Additional Role** button.

Figure 103: Manage Teaching Hospital Manage Roles Tab



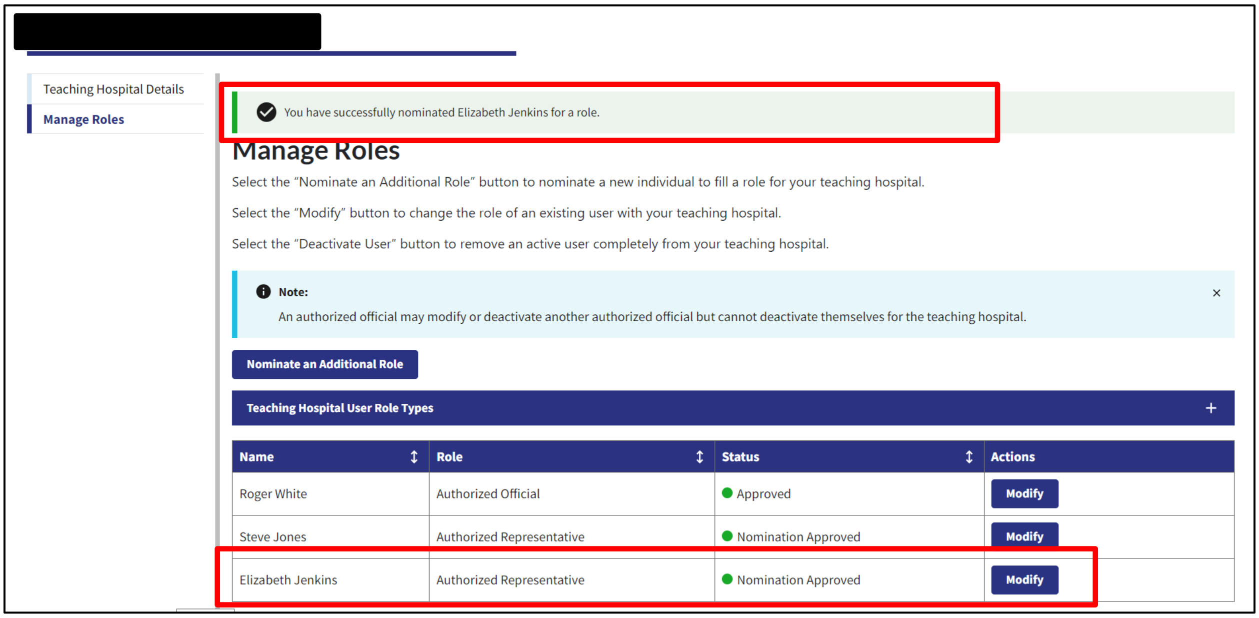
Step 5: Enter the required fields and select the desired role for the nomination, such as authorized official. All required fields are marked with an asterisk. When finished, select the **Send Nomination** button.

Figure 104: Teaching Hospital Manage Roles Tab Nominate Roles



After you send the nomination, you will be brought back to the **Manage Roles** page, and you will see that the new nomination and the status of the nomination are now listed on the page.

Figure 105: Teaching Hospital Manage Roles Tab Confirmation



The nominee will receive an email notification that they have been nominated for a role in the Open Payments system.

The email notifying the nominee will contain a registration ID and a nomination ID. Users notified of their nomination for a role must use the registration ID and nomination ID received in the nomination email to complete their profile in the Open Payments system and receive access to the functions for that specific role.

The nominee will have 10 calendar days to accept or reject the nomination.

3.5c: Accepting or Rejecting a Nomination: Authorized Representative – First-Time Users

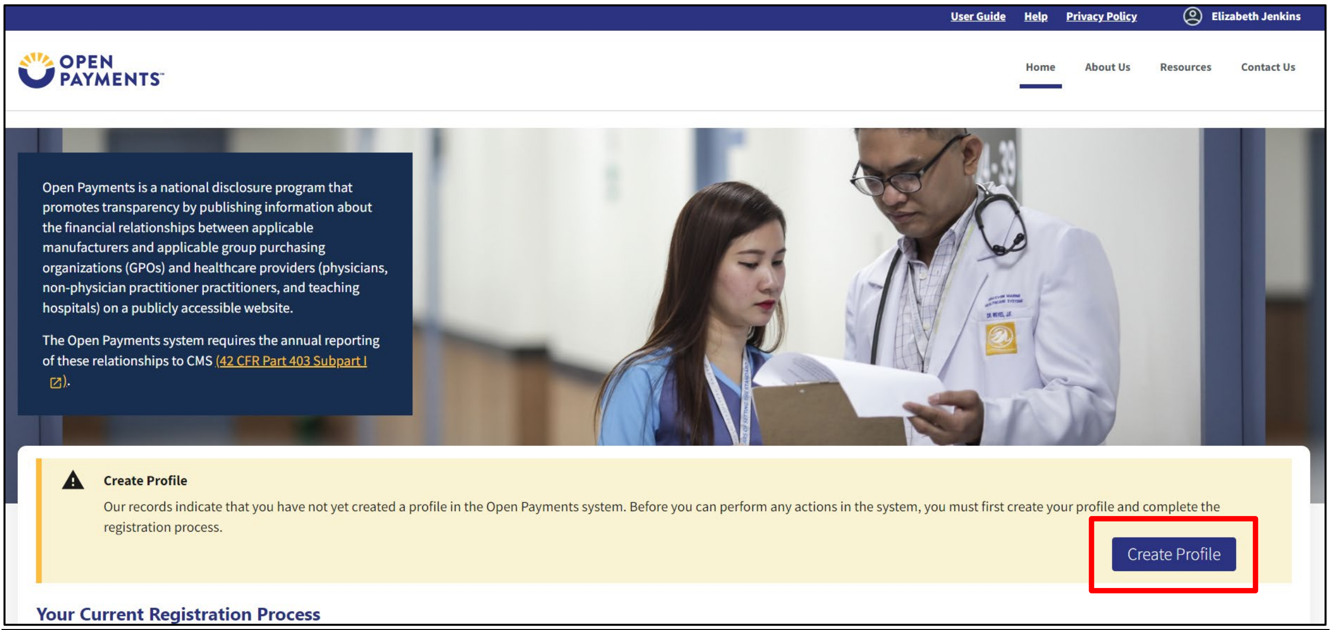
If you have been nominated for a physician and/or NPP authorized representative role, you will receive a notification email containing instructions and important information needed to accept your nomination. You will have 10 calendar days to accept or reject the nomination. If you have not taken action on your nomination within 10 days, the nomination will expire. Follow the steps below to accept the nomination.

Step 1: If you are a first-time system user, you will need to create an Open Payments account and request access to the Open Payments system. Please first see Sections 3.2b and 3.2c.

Once you have done that, log in to the Open payments system at https://openpayments.system.cms.gov.

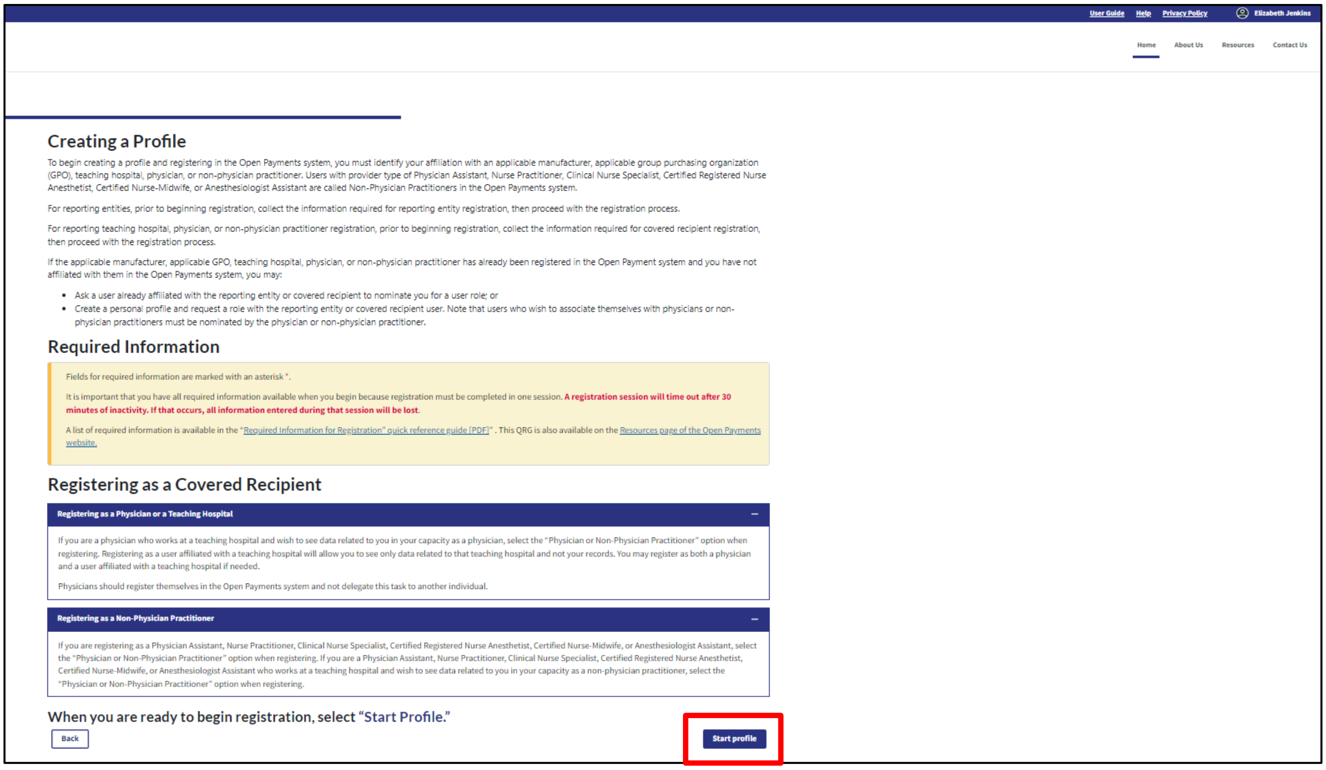
The on-screen text contains important information regarding the registration process. Read the on-screen text and select **Create Profile** when you are ready to begin the registration process.

Figure 106: Open Payments Landing Page for First-Time System Users



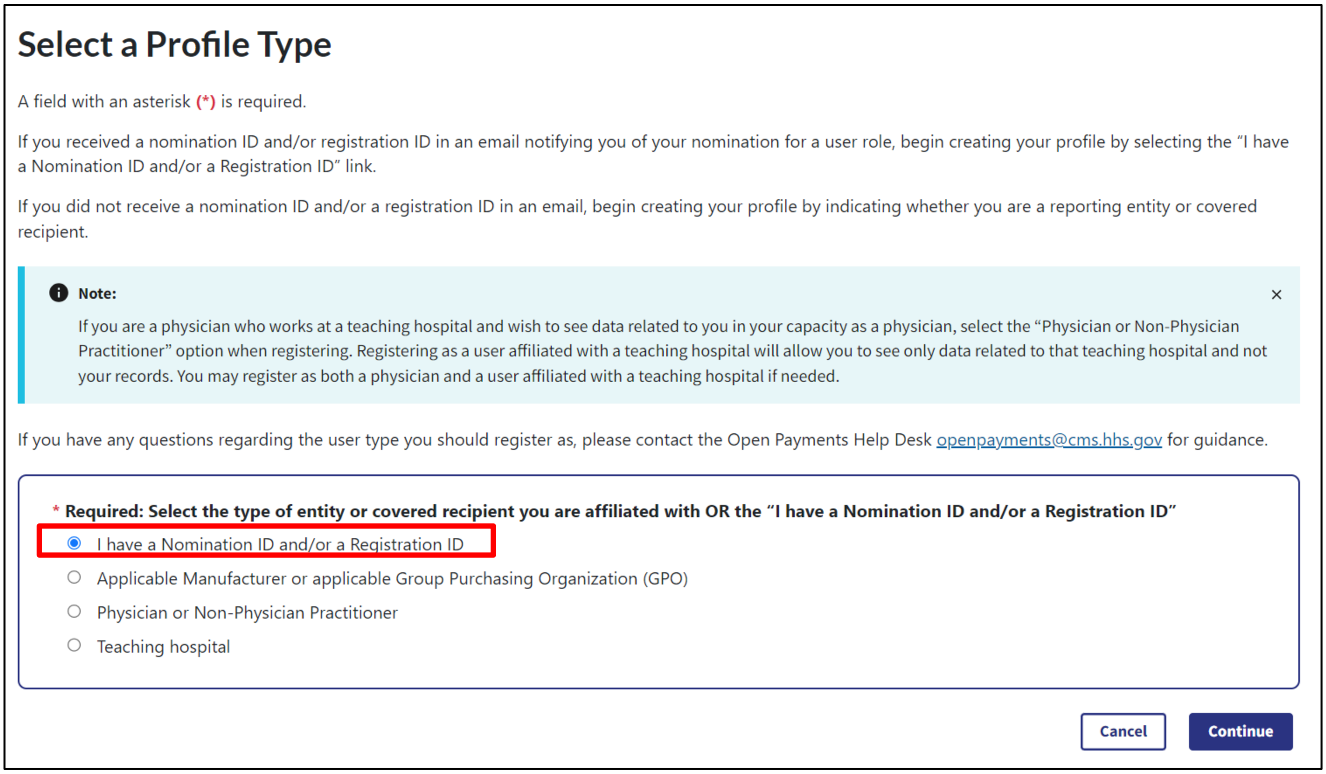
Step 2: The on-screen text contains important information regarding creating the physician, NPP, and individual profiles. Read the on-screen text and select **Start Profile** at the bottom of the page when you are ready to continue.

Figure 107: Create My Profile Page



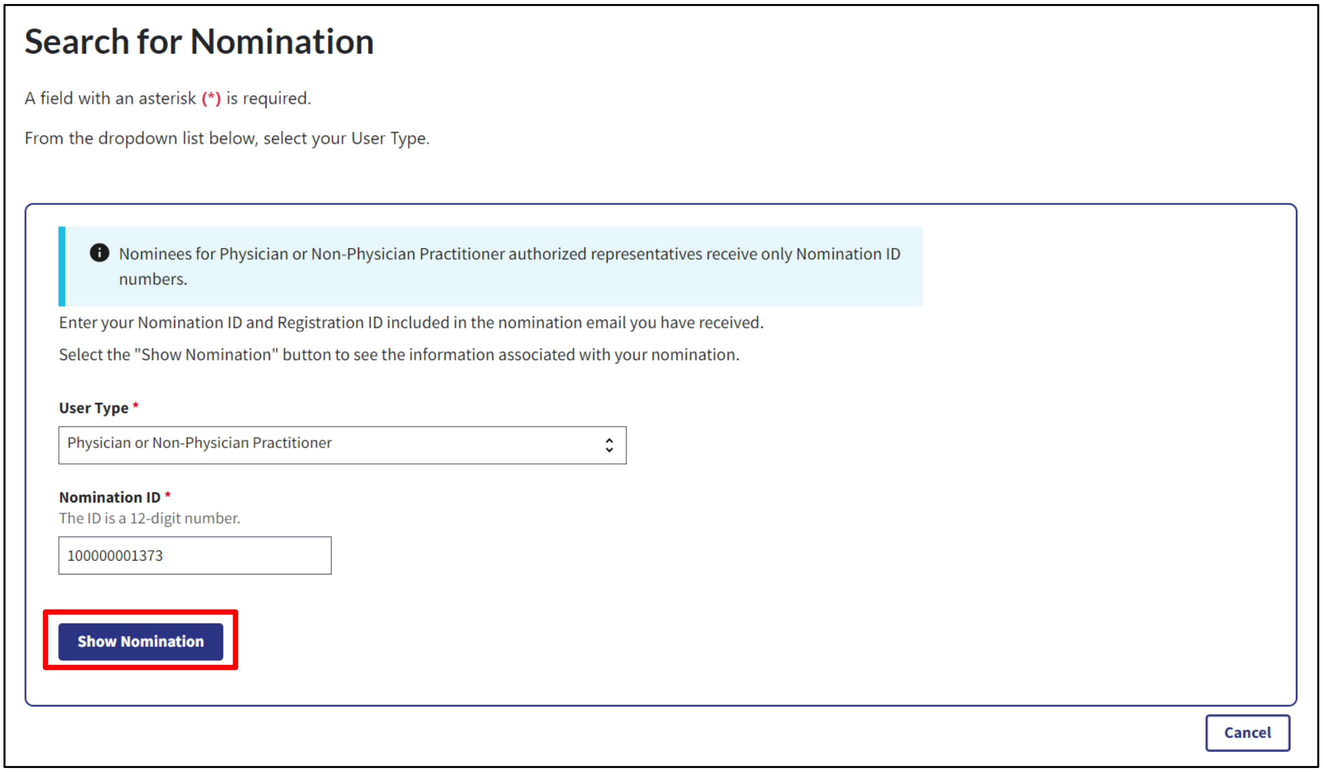
Step 3: Although you are affiliating with a physician or NPP, do not select **Physician or Non-Physician Practitioner** on the "Select Profile Type" page. Instead, select the **I have a Nomination ID and/or a Registration ID** link.

Figure 108: Select Profile Type Page



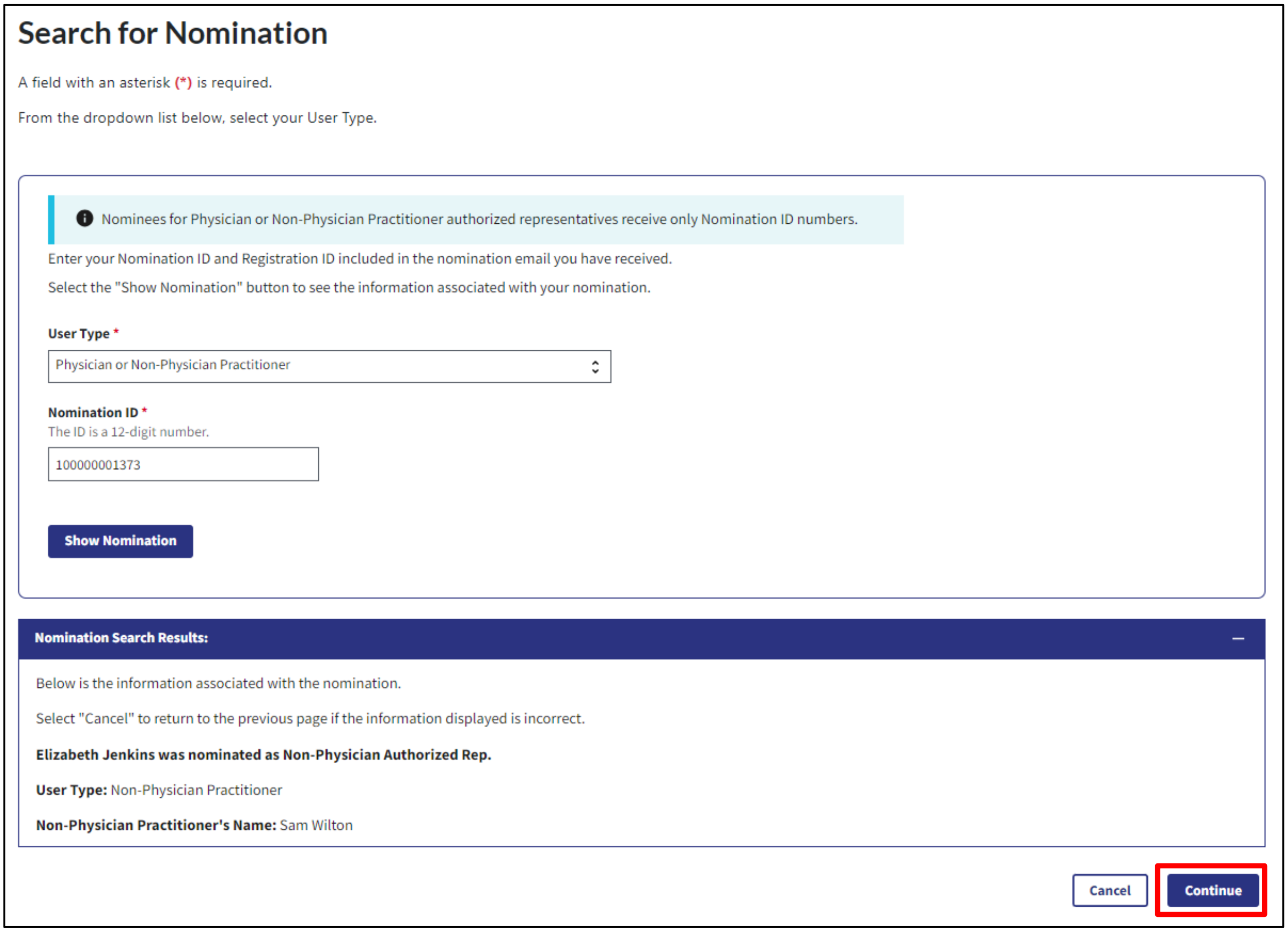
Step 4: Select the User Type **Physician or Non-Physician Practitioner** from the dropdown. Enter the nomination ID included in the nomination notification email you received and then select the **Show Nomination** button.

Figure 109: Search for Nomination Page



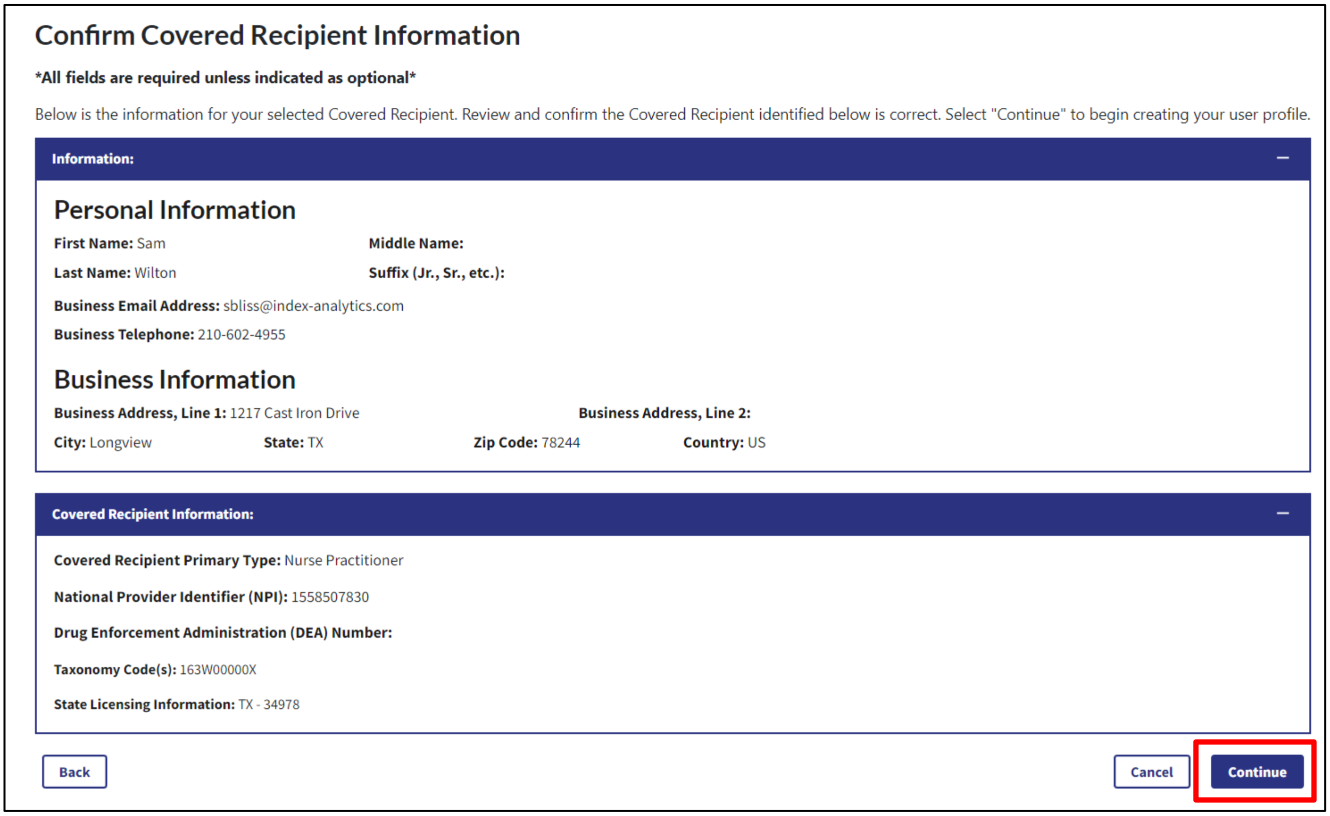
Step 5: Review the nomination information displayed. If the information is correct, select the **Continue** button. If the information is incorrect, select the **Cancel** button and contact the nominator directly.

Figure 110: Search for Nomination Page with Nomination Shown



Step 6: Review the physician or NPP information displayed on the page. You will not be able to edit the information. Ensure that this is the physician or NPP for which you want to accept the user role nomination. If it is not the correct physician or NPP, either select the **Back** button at the bottom of the page to return to the previous page to correct the information you have entered or select the **Cancel** button to end the acceptance process.

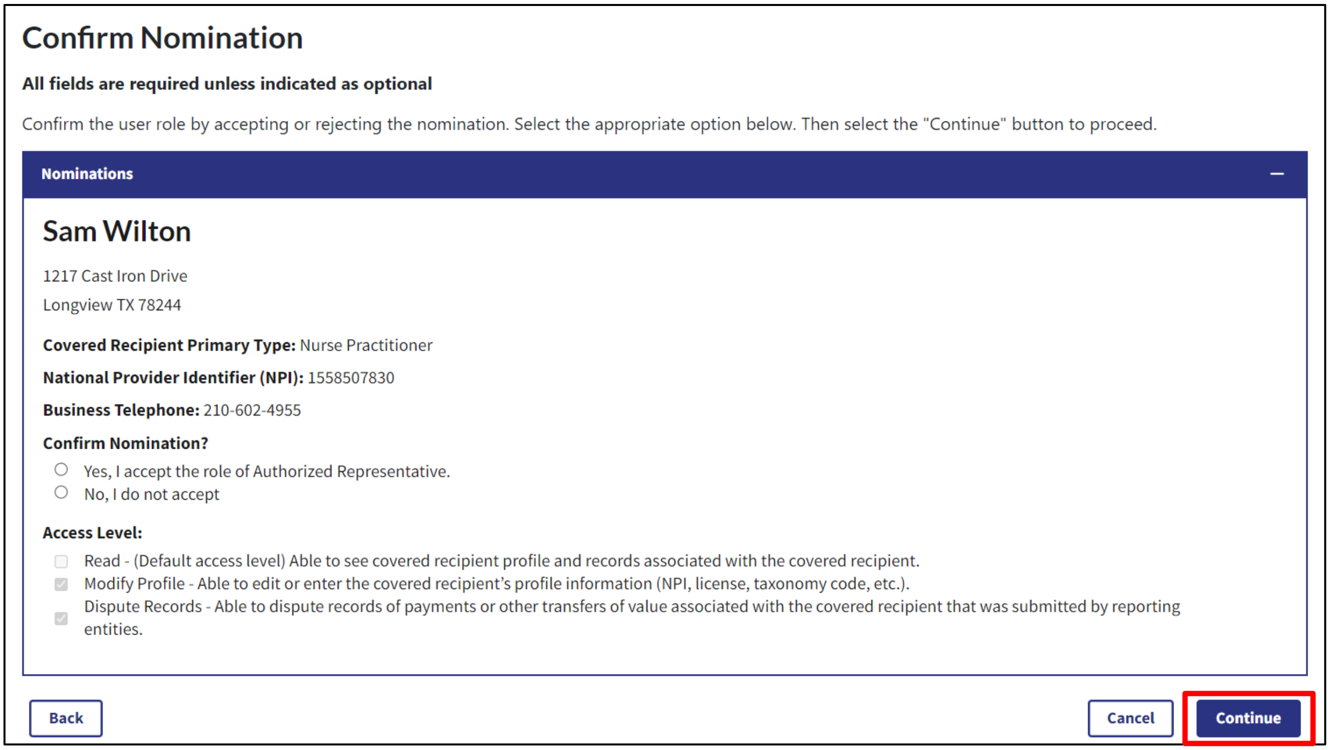
Figure 111: Confirm Covered Recipient Information Page



Step 7: Review the nomination information on the page. Select "Yes, I accept the role of Authorized Representative" if you wish to accept the role or "No, I do not accept" if you do not wish to accept the role. If you accept the role and select **Continue**, you will continue the nomination confirmation process.

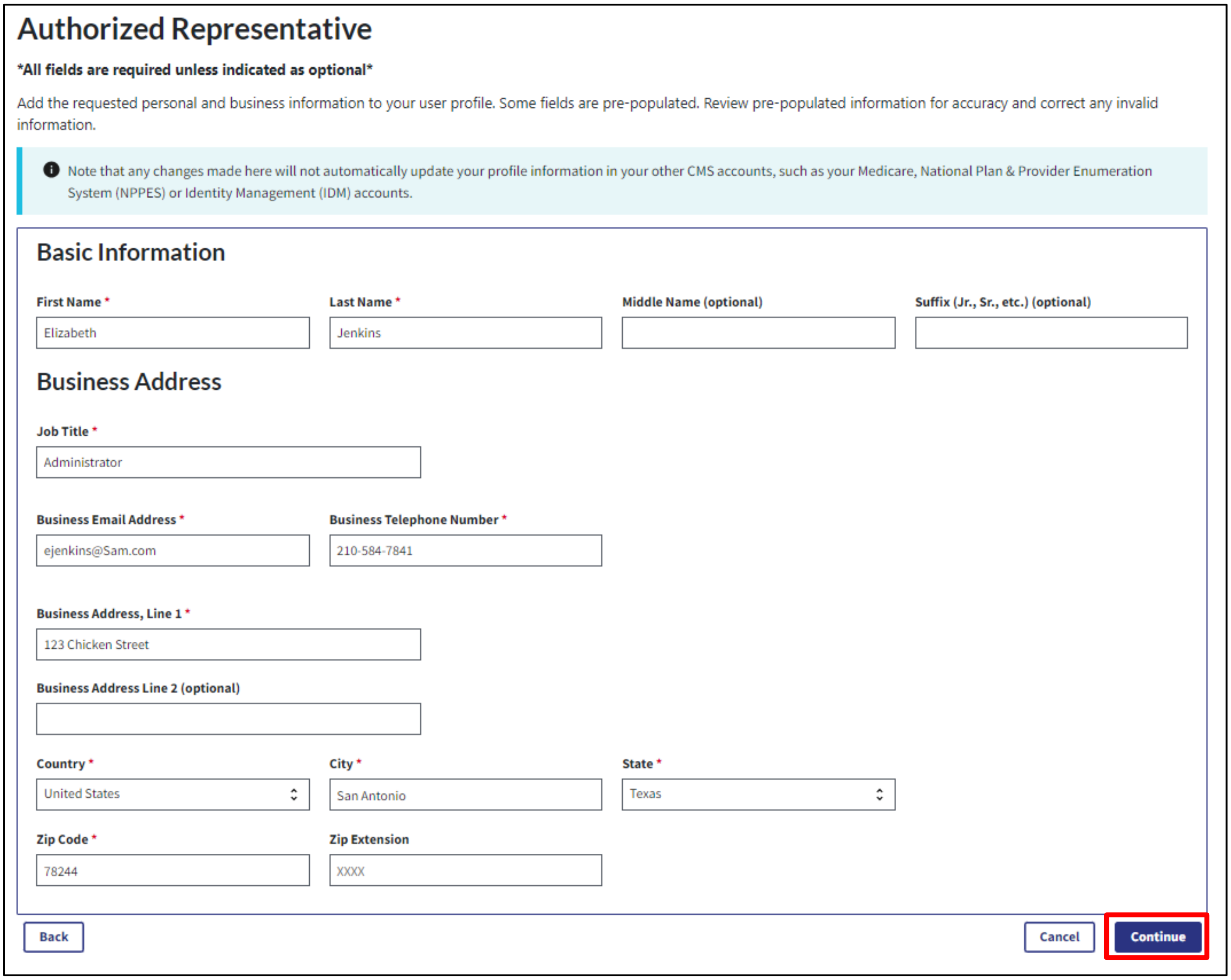
If you reject the role for which you have been nominated, select the **Continue** button after selecting "No, I do not accept" for the role. The system will ask you if you are sure you want to reject this role. If you confirm your choice to reject the role, you will exit the system and the nominator will receive an email that you rejected the nomination. The nominator will then be allowed to nominate another individual for the role.

Figure 112: Confirm Nomination Page



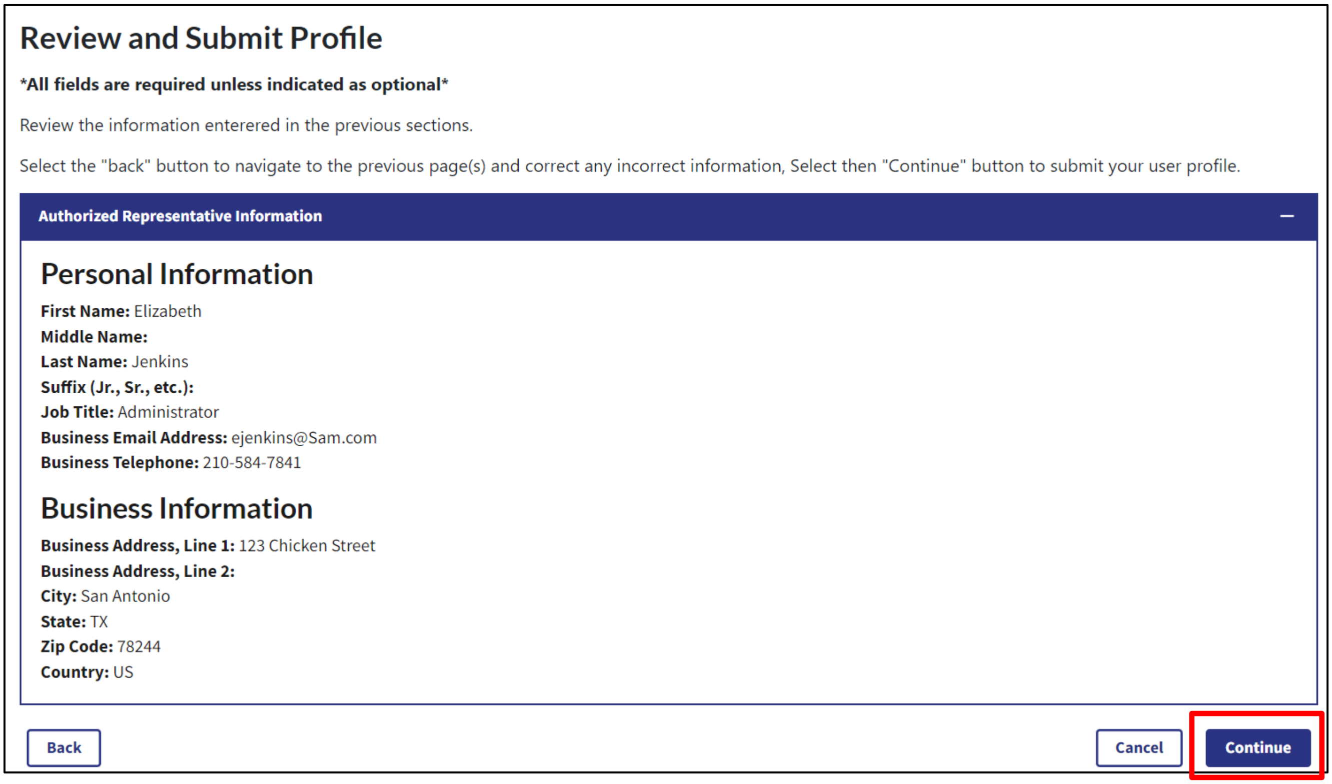
Step 8: Enter your personal information and select the **Continue** button.

Figure 113: Authorized Representative Page



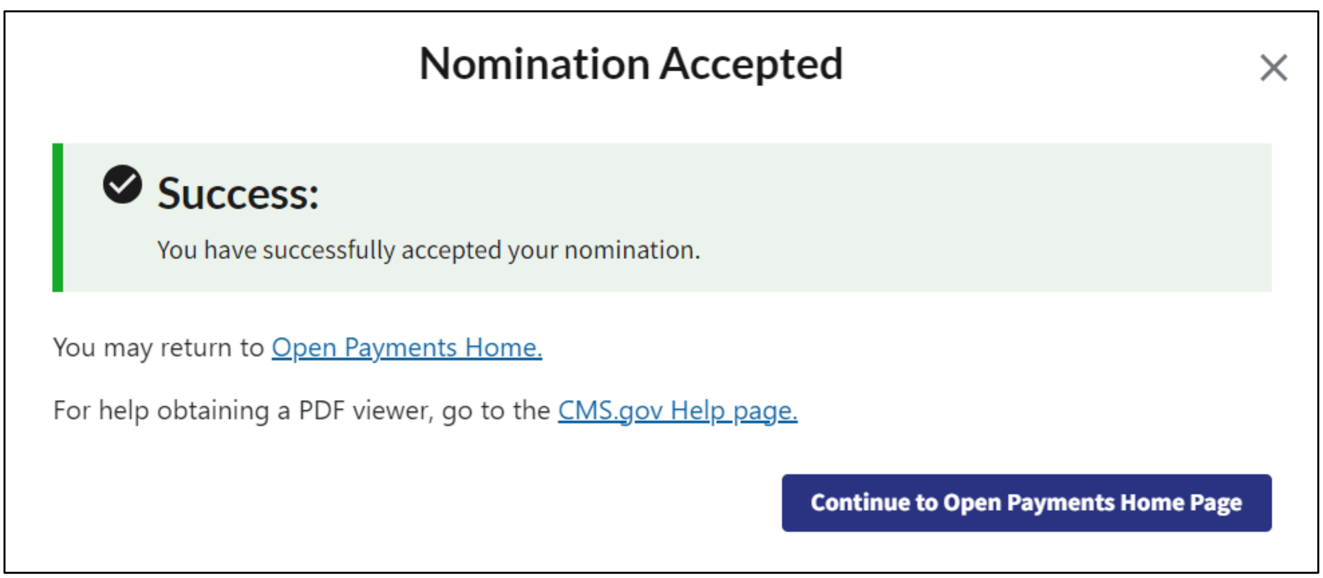
Step 9: Now you will be asked to review the information you have entered. To correct any errors, select the **Back** button at the bottom of the page to return to previous pages and make your corrections. If the information is correct, select the **Submit** button.

Figure 114: Review and Submit Profile Page



The following message will appear on-screen to confirm your nomination has been successfully accepted.

Figure 115: Success Confirmed Page



3.5d: Accepting or Rejecting a Nomination: Physician or NPP First Time System Users

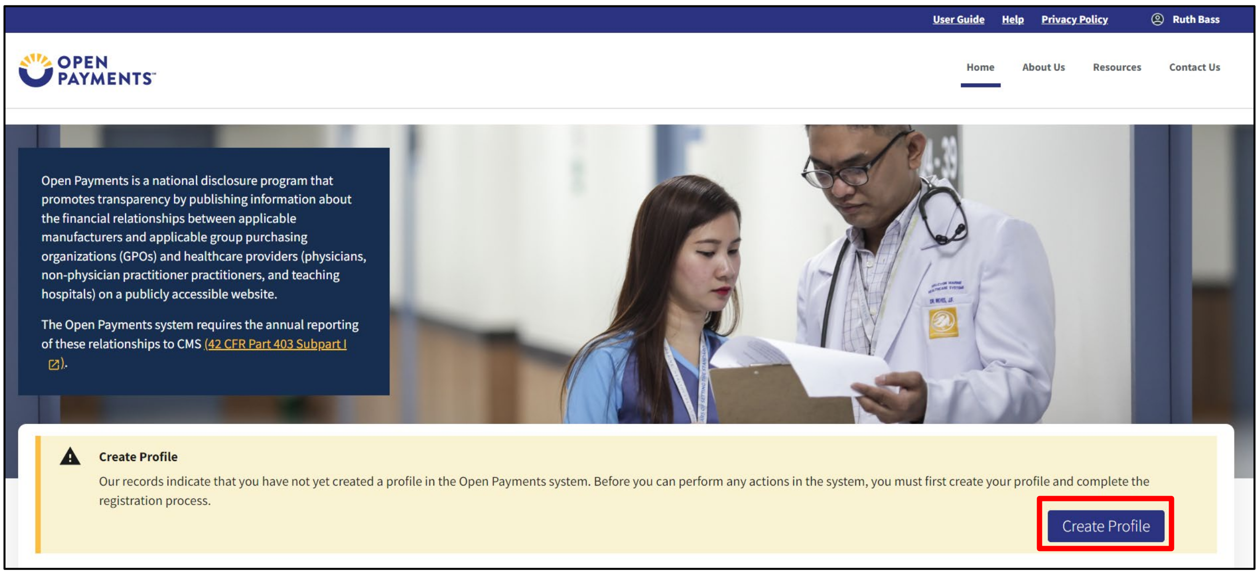
If you have been nominated for a physician or NPP user role, you will receive a notification email. Take note of the information in the email, including the nomination ID, then follow the steps below to accept the nomination.

Step 1: If you are a first-time system user, you will need to create an Open Payments account and request access to the Open Payments system. Please first see Sections 3.2b and 3.2c.

Once you have done that, log in to the Open payments system at https://openpayments.system.cms.gov.

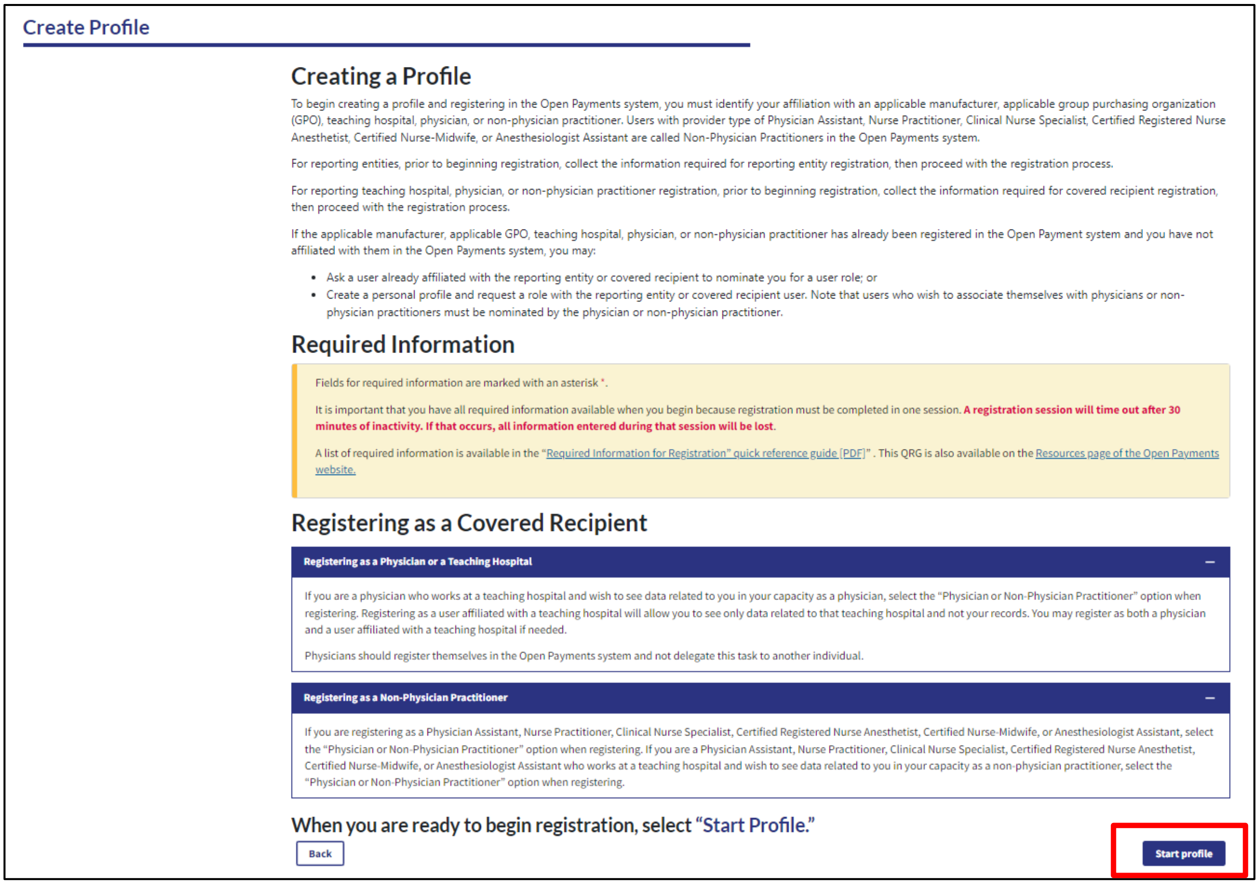
The on-screen text contains important information regarding the registration process. Read the on-screen text and select **Create Profile** when you are ready to begin the registration process.

Figure 116: Open Payments Landing Page for First-Time System Users



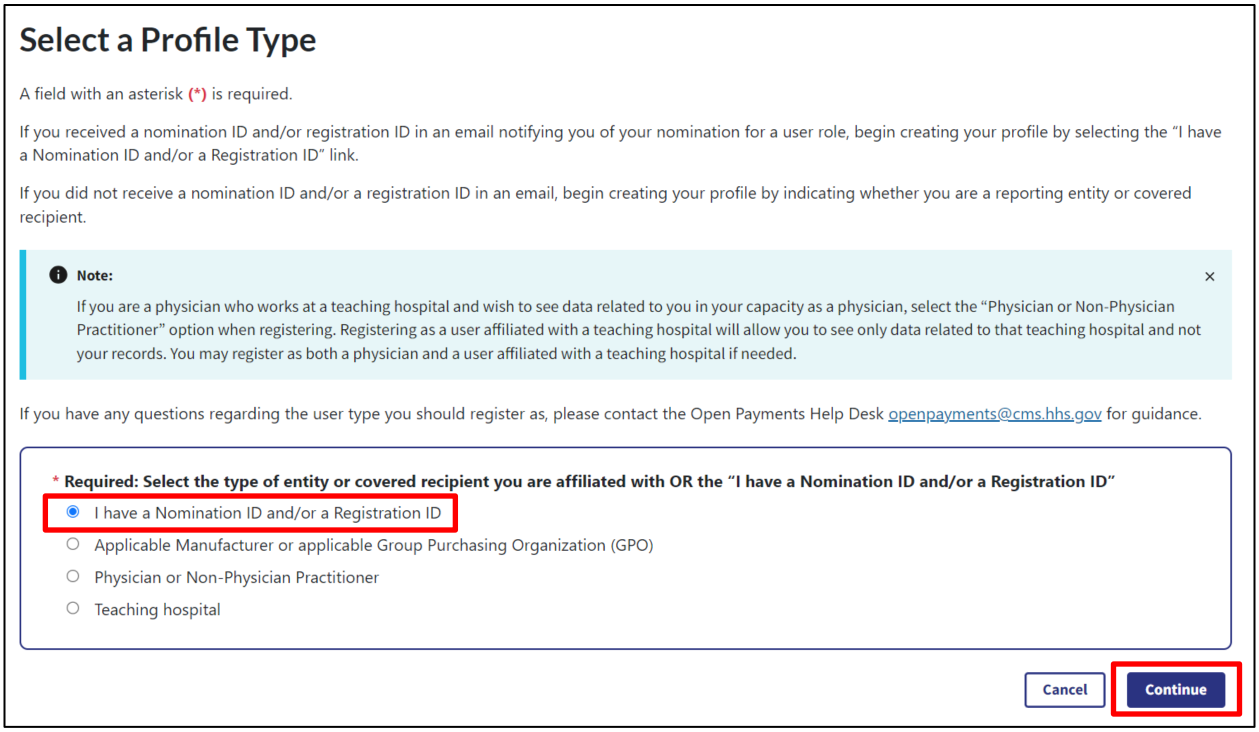
Step 2: The on-screen text contains important information regarding creating the physician, NPP, and individual profiles. Read the on-screen text and select **Start Profile** at the bottom of the page when you are ready to continue.

Figure 117: Create Profile Page



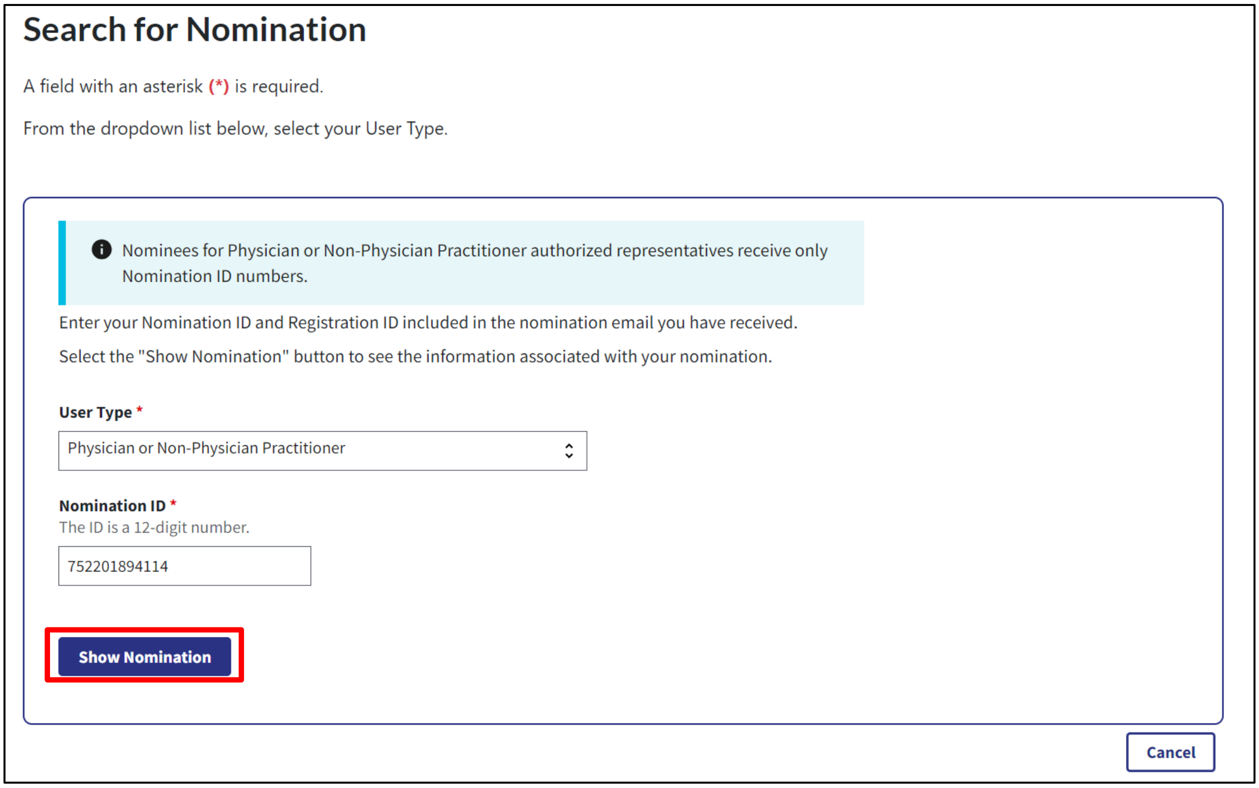
Step 3: On the "Select a Profile Type" page though you are affiliating with a physician or an NPP, do not select **Physician or Non-Physician Practitioner**. Instead, select the link **I have a Nomination ID and/or a Registration ID,** then, select **Continue.**

Figure 118: Select Profile Type Page



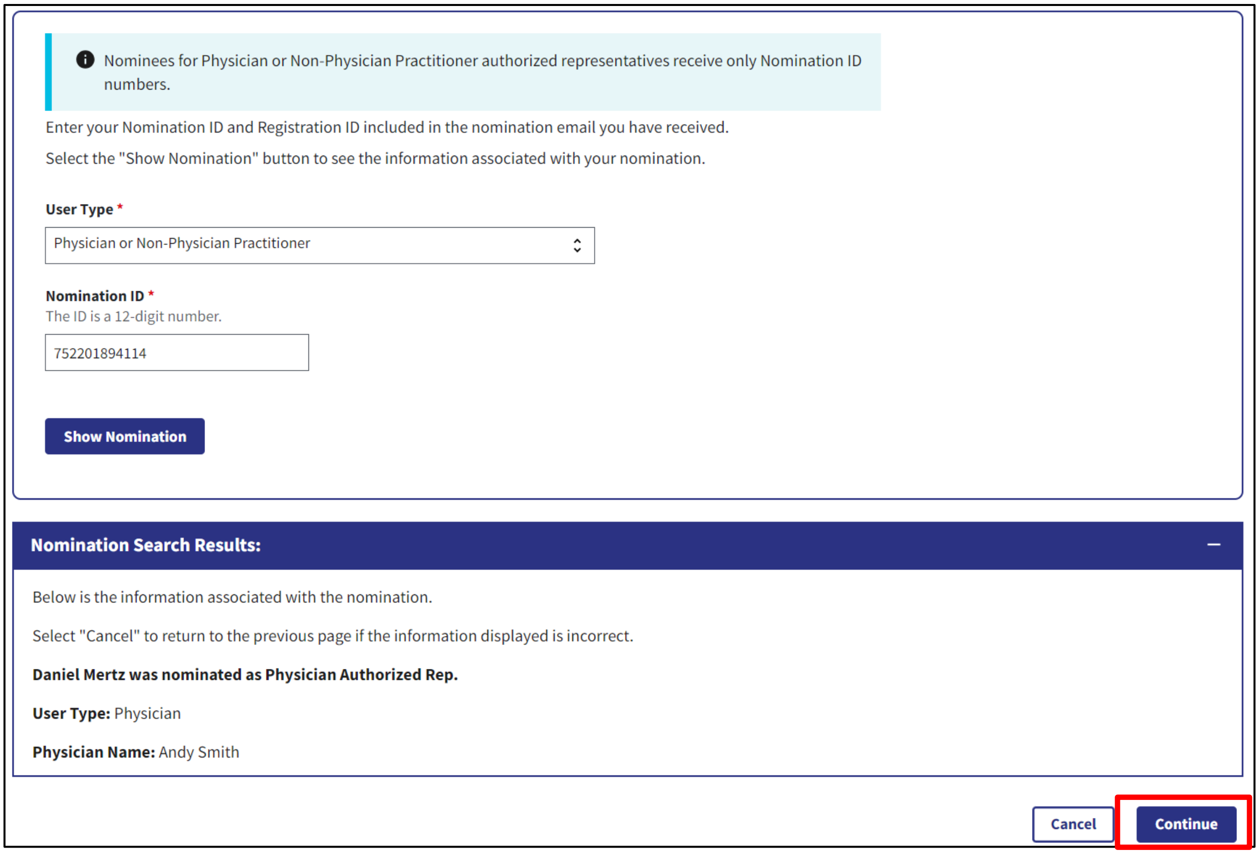
Step 4: Select the user type "Physician or Non-Physician Practitioner" from the drop-down menu. Enter the nomination ID that you received in the nomination notification email and then select **Show Nomination**.

Figure 119: Search for Nomination Screen



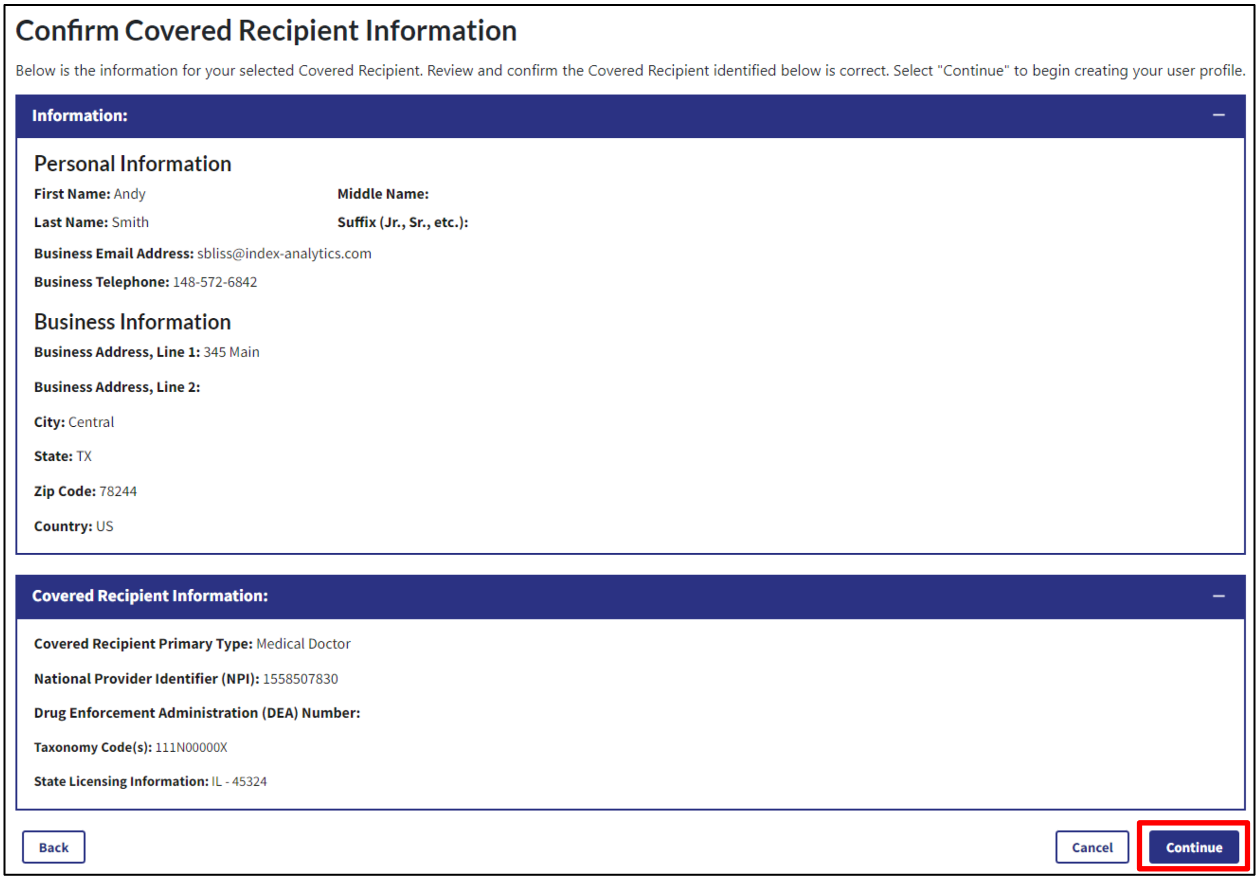
Step 5: Review the nomination information displayed. If the information is correct, select **Continue**. If the information is incorrect, select the **Cancel** button and contact the Open Payments Help Desk at openpayments@cms.hhs.gov.

Figure 120: Nomination Search Results Page



Step 6: Review the covered recipient information to confirm it is correct. If it is, select **Continue** to proceed. If it is not, contact the provider than nominated you.

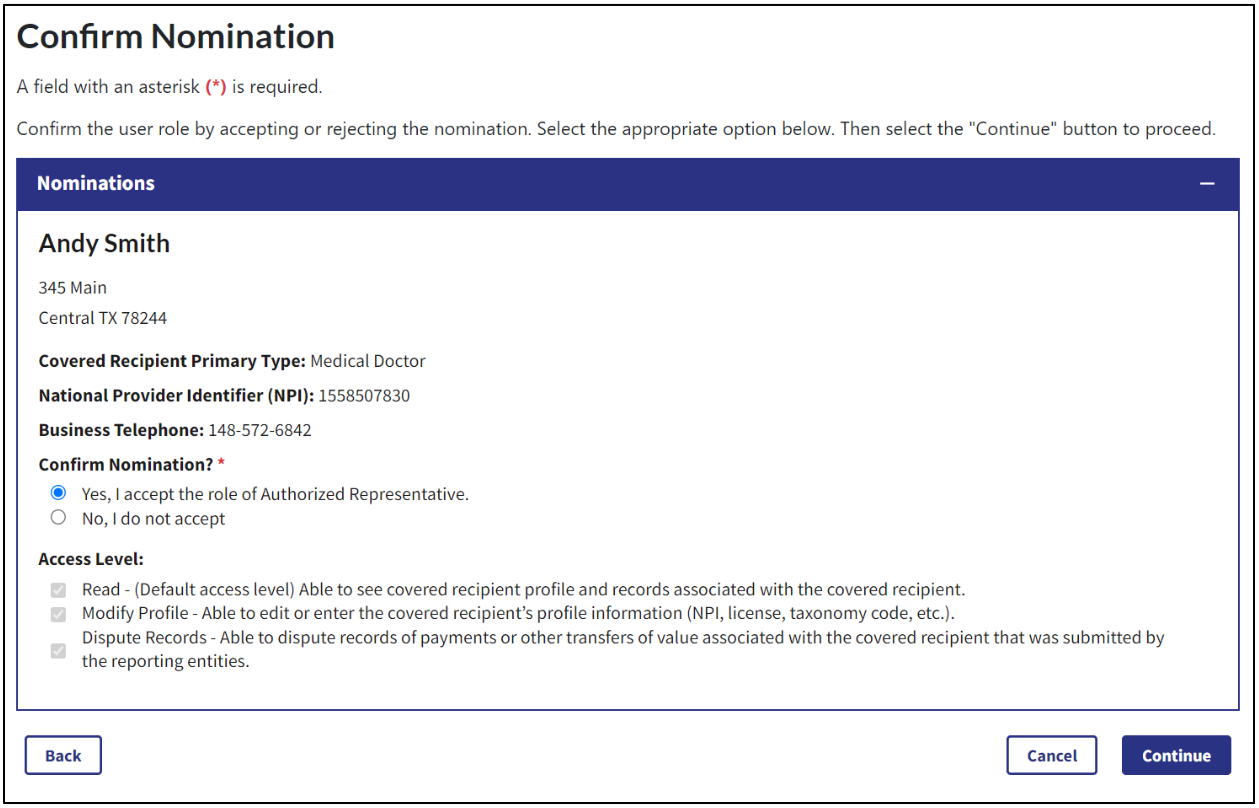
Figure 121: Confirm Covered Recipient Information



Step 7: Select "Yes, I accept the role of" if you wish to accept the role or "No, I do not accept" if you do not wish to accept the role. If you accept the role and select **Continue**, you will continue the nomination confirmation process.

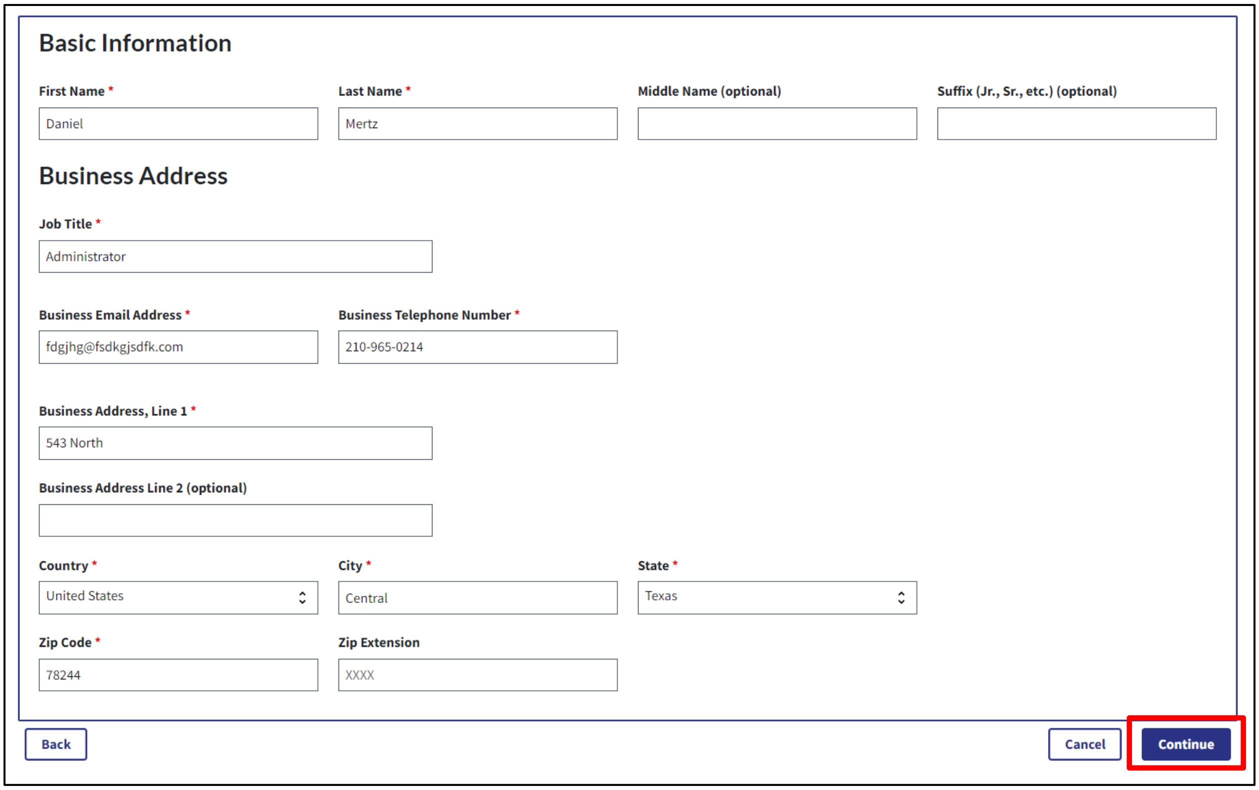
If you reject the role for which you have been nominated, select the **Continue** button after selecting "No, I do not accept" for the role. The system will ask you if you are sure you want to reject this role. If you confirm your choice to reject the role, you will exit the system and the nominator will receive an email that you rejected the nomination. The nominator will then be allowed to nominate another individual for the role.

Figure 122: Confirm Nomination



Step 8: Review your personal information. If the information displayed is correct, select the **Continue** button. If the information displayed is incorrect, update the necessary fields. When finished, select the **Continue** button.

Figure 123: Authorized Representative Basic Information


Basic Information

First Name *: Daniel
Last Name *: Mertz
Middle Name (optional):
Suffix (Jr., Sr., etc.) (optional):

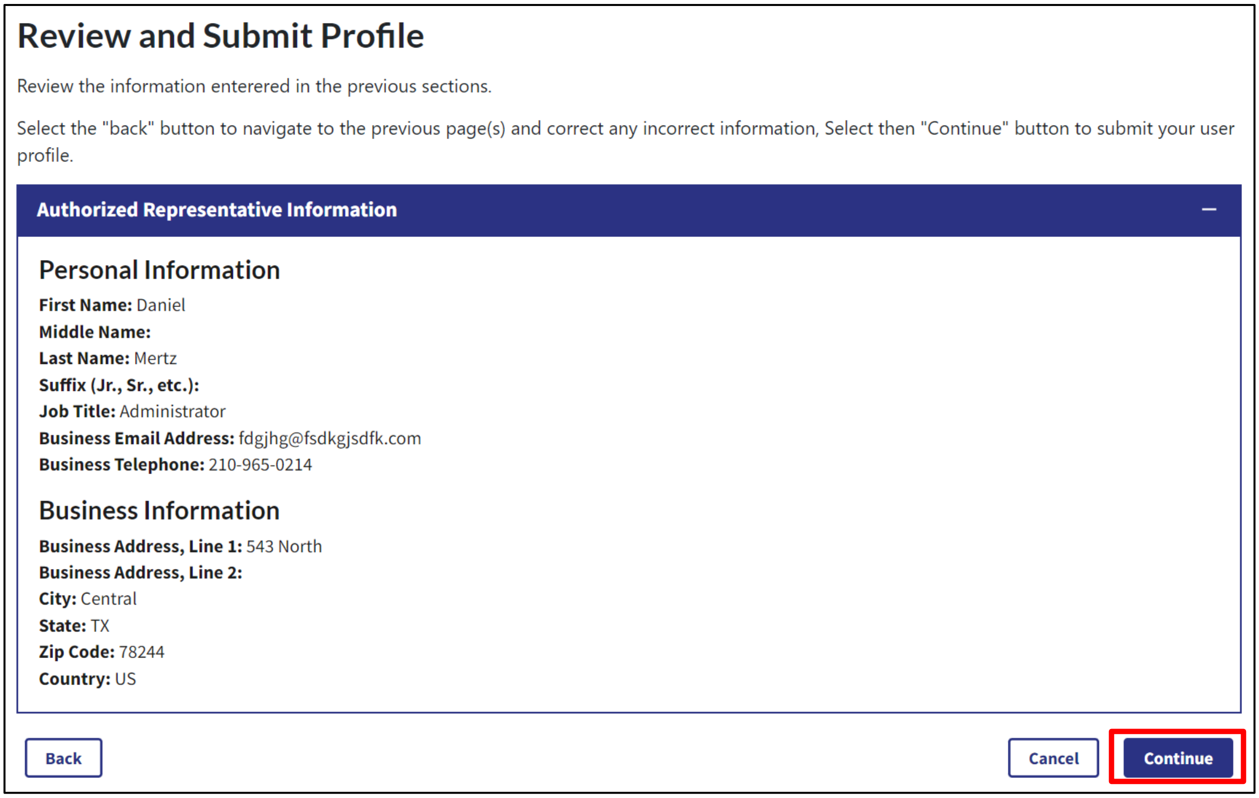
Business Address

Job Title *: Administrator
Business Email Address *: fdgjhg@fsdkgjsdfk.com
Business Telephone Number *: 210-965-0214
Business Address, Line 1 *: 543 North
Business Address Line 2 (optional):
Country *: United States
City *: Central
State *: Texas
Zip Code *: 78244
Zip Extension: XXXX

Back
Cancel
Continue

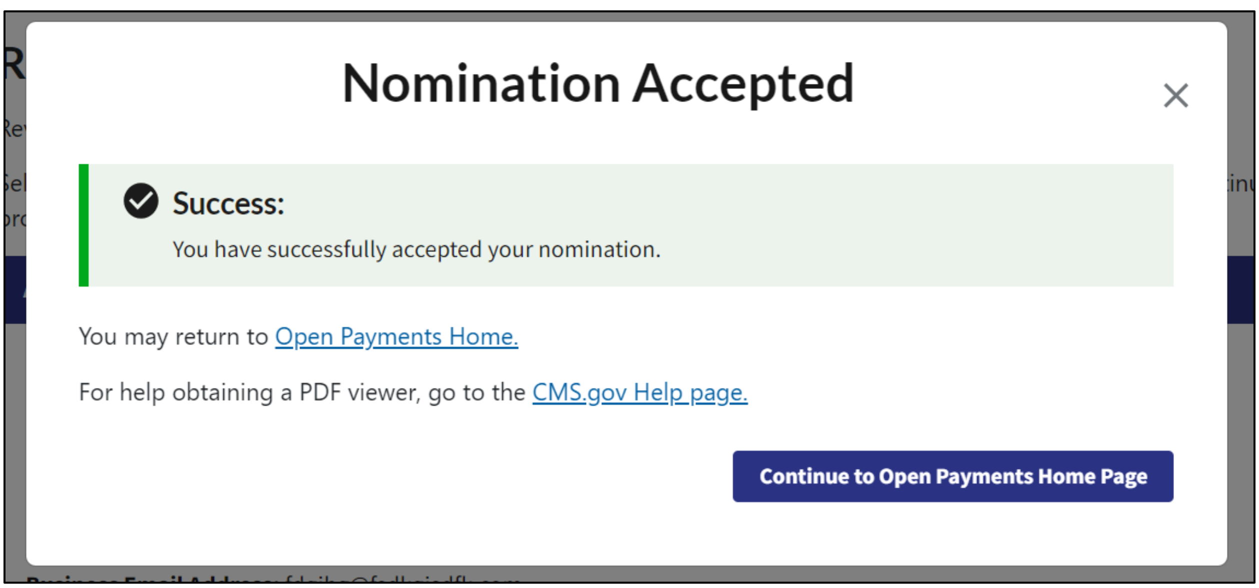
Step 9: Review the information you have entered. To correct any errors, select the **Back** button at the bottom of the page to return to previous pages and make your corrections. If the information is correct, select the **Continue** button.

Figure 124: Review and Submit Profile Page



The following message will appear on-screen to confirm your nomination has been successfully accepted.

Figure 125: Nomination Accepted Page



3.5e: Accepting or Rejecting a Nomination (Teaching Hospital – First Time System Users)

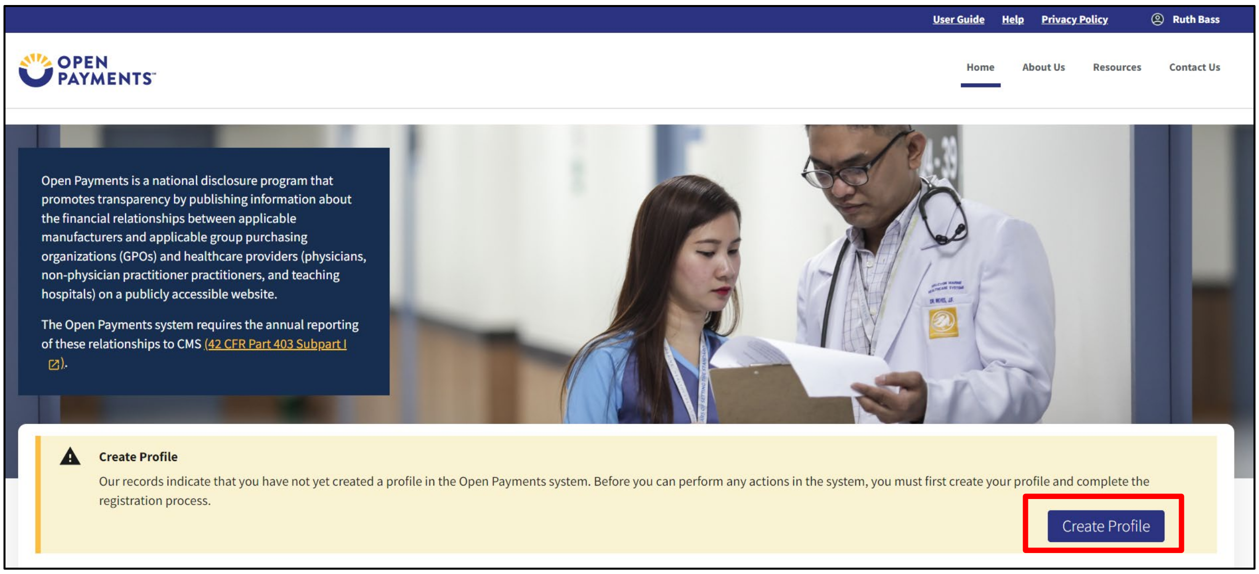
If you have been nominated for a teaching hospital user role, you will receive a notification email. Take note of the information in the email, including registration ID and nomination ID, then follow the steps below to accept the nomination.

Step 1: If you are a first-time system user, you will need to create an Open Payments account and request access to the Open Payments system. Please first see Sections 3.2b and 3.2c.

Once you have done that, log in to the Open payments system at https://openpayments.system.cms.gov.

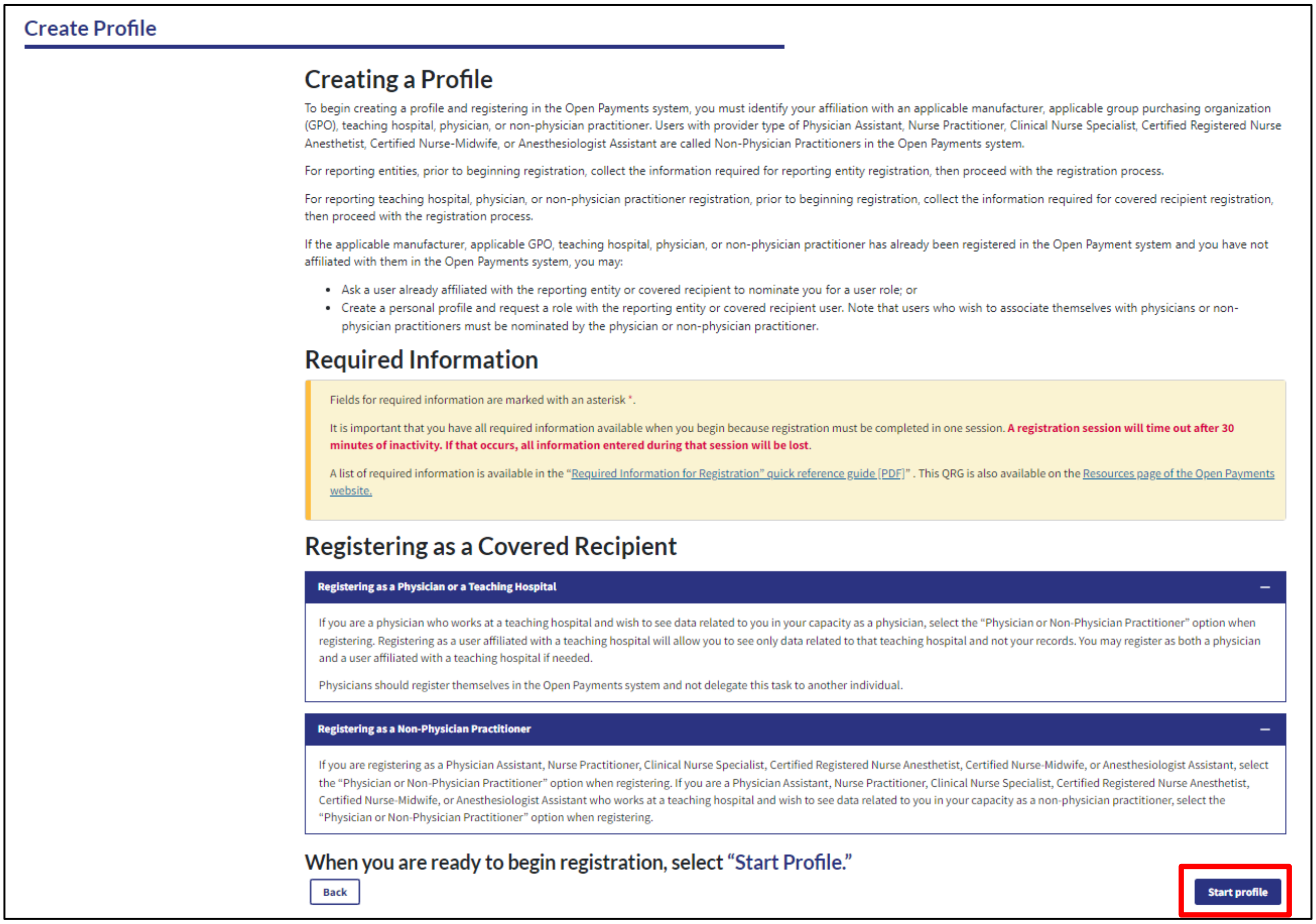
The on-screen text contains important information regarding the registration process. Read the on-screen text and select **Create Profile** when you are ready to begin the registration process.

Figure 126: Open Payments Landing Page for First-Time System Users



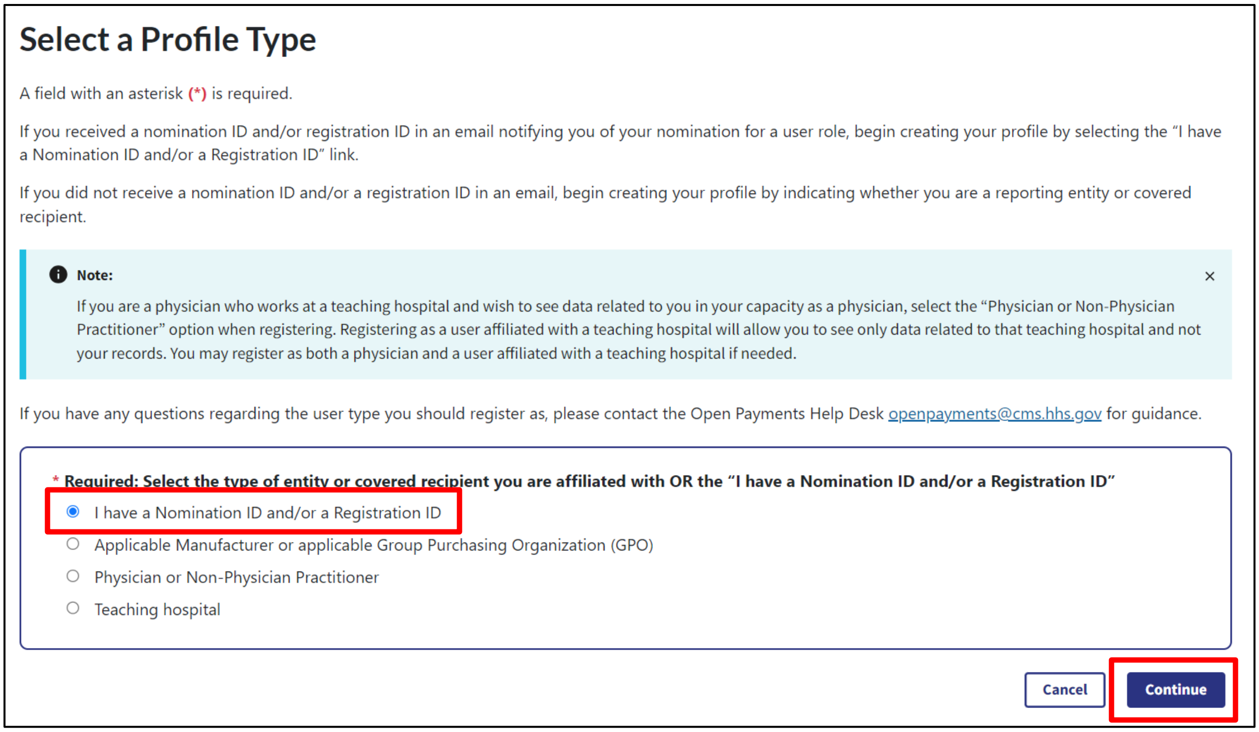
Step 2: The on-screen text contains important information regarding creating the physician, NPP, and individual profiles. Read the on-screen text and select **Start Profile** at the bottom of the page when you are ready to continue.

Figure 127: Create Profile Page



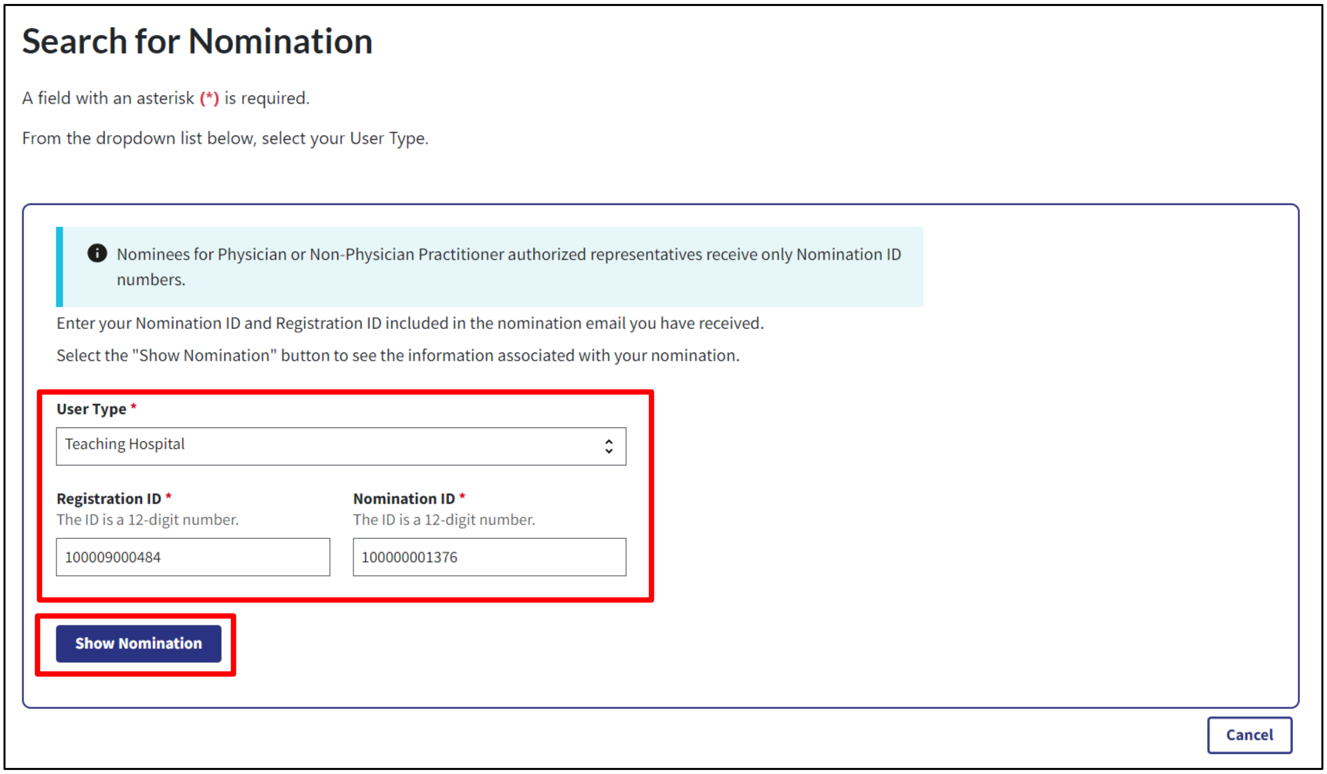
<u>Step 3:</u> On the "Select a Profile Type" page though you are affiliating with a teaching hospital, do not select Teaching Hospital. Instead, select the link I have a Nomination ID and/or a Registration ID, then, select Continue.

Figure 128: Select Profile Type Page



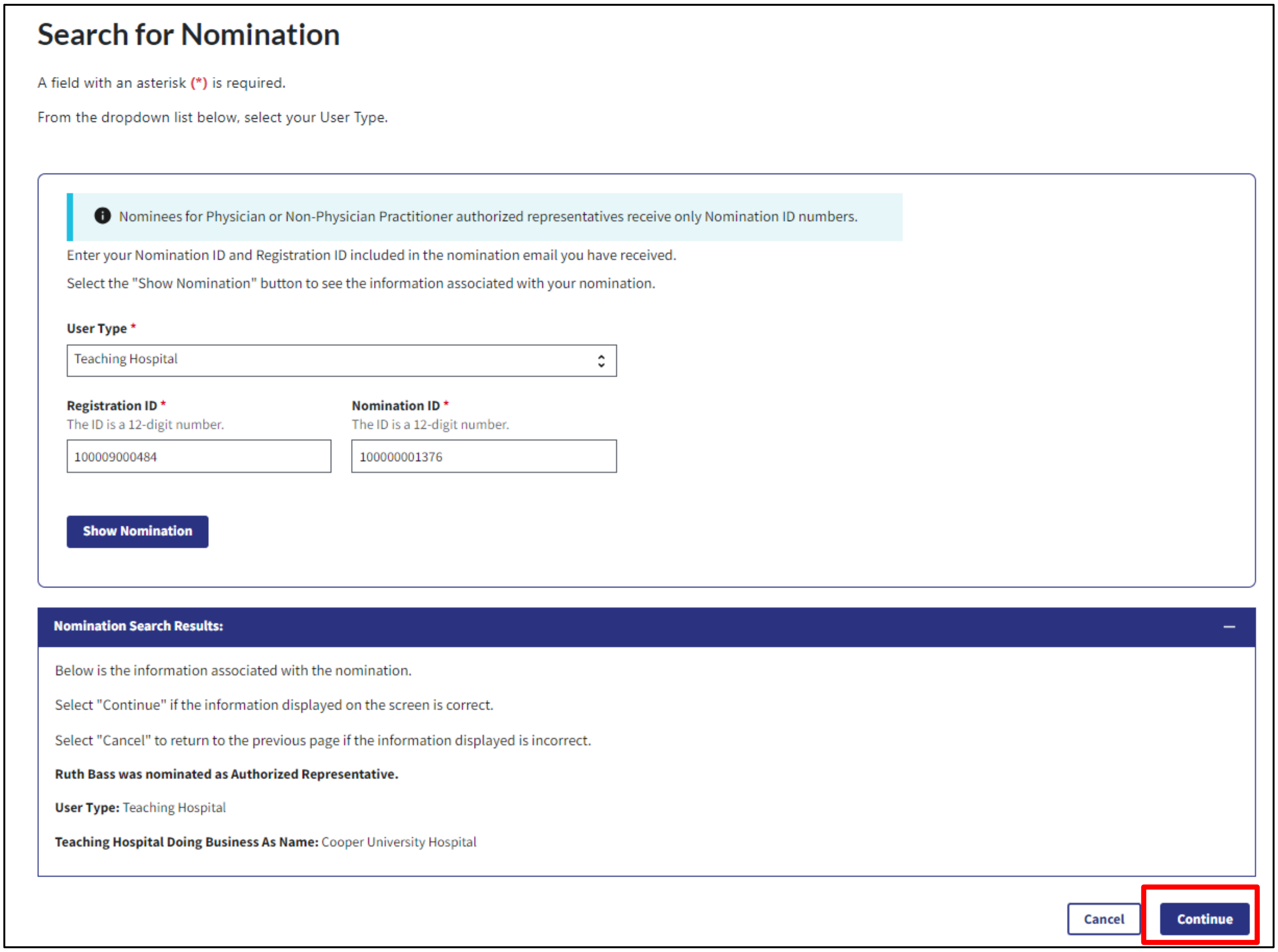
Step 4: Select the user type "Teaching Hospital" from the drop-down menu. Enter the registration ID and nomination ID that you received in the nomination notification email and then select **Show Nomination**.

Figure 129: Search for Nomination Page



Step 5: Review the nomination information displayed. If the information is correct, select **Continue**. If the information is incorrect, select the **Cancel** button and contact the Open Payments Help Desk at openpayments@cms.hhs.gov.

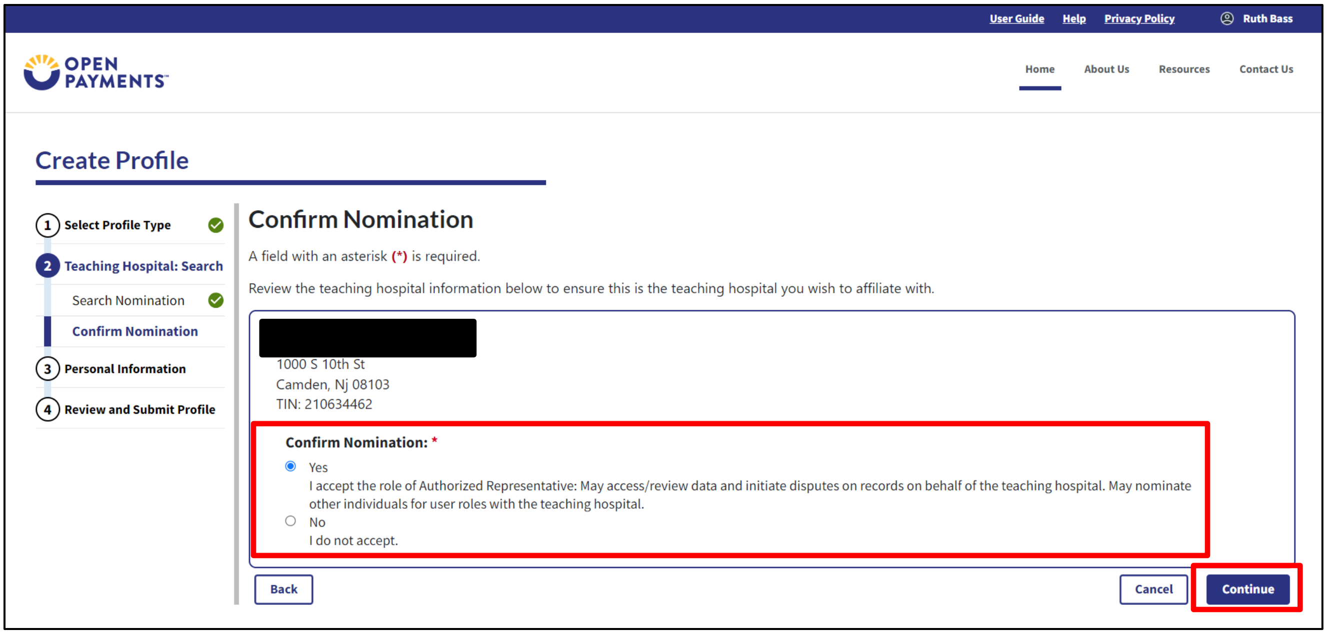
Figure 130: Search for Nomination Select Page



Step 6: Select "Yes, I accept the role of" if you wish to accept the role or "No, I do not accept" if you do not wish to accept the role. If you accept the role and select **Continue**, you will continue the nomination confirmation process.

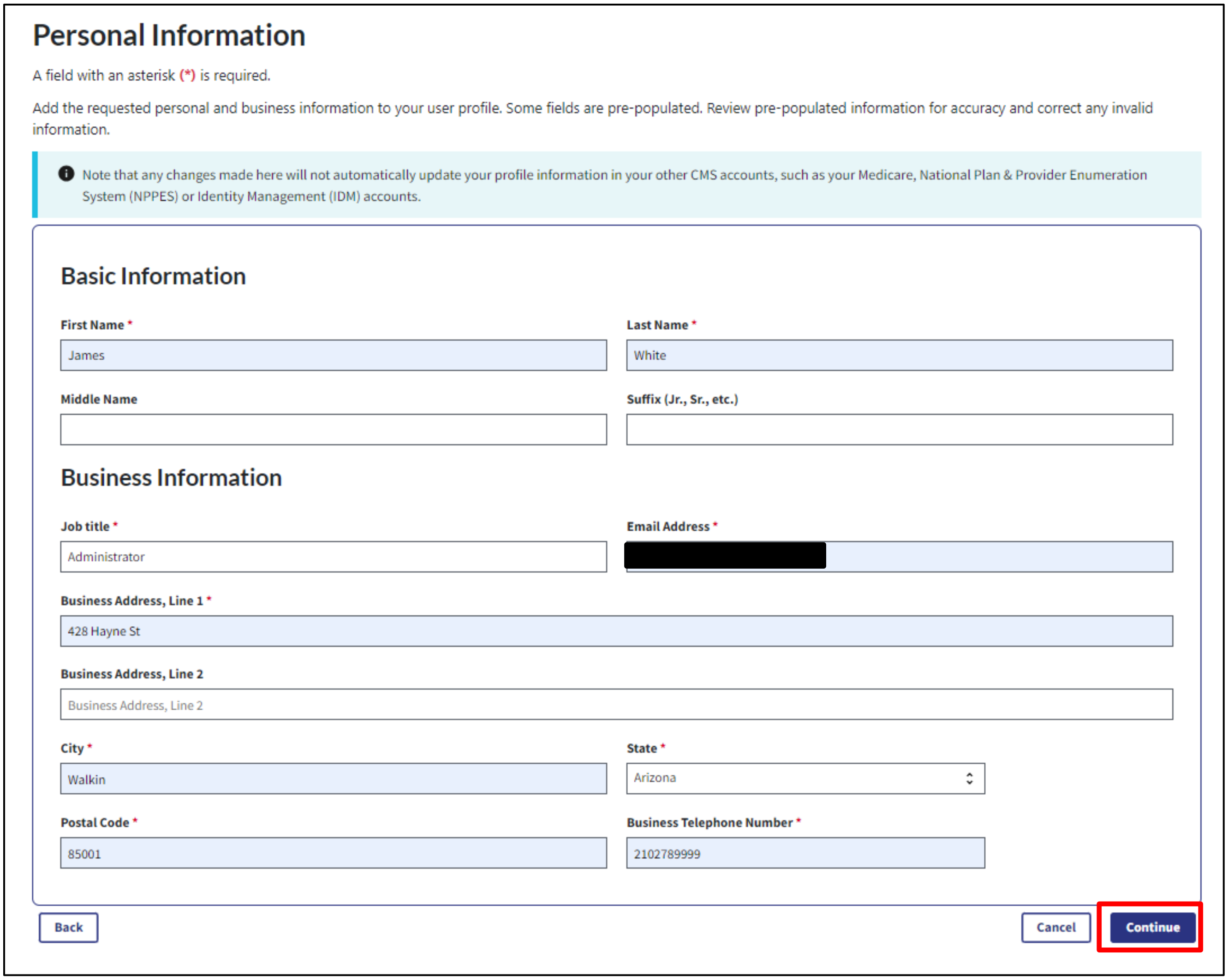
If you reject the role for which you have been nominated, select the **Continue** button after selecting "No, I do not accept" for the role. The system will ask you if you are sure you want to reject this role. If you confirm your choice to reject the role, you will exit the system and the nominator will receive an email that you rejected the nomination. The nominator will then be allowed to nominate another individual for the role.

Figure 131: Confirm Nomination Page



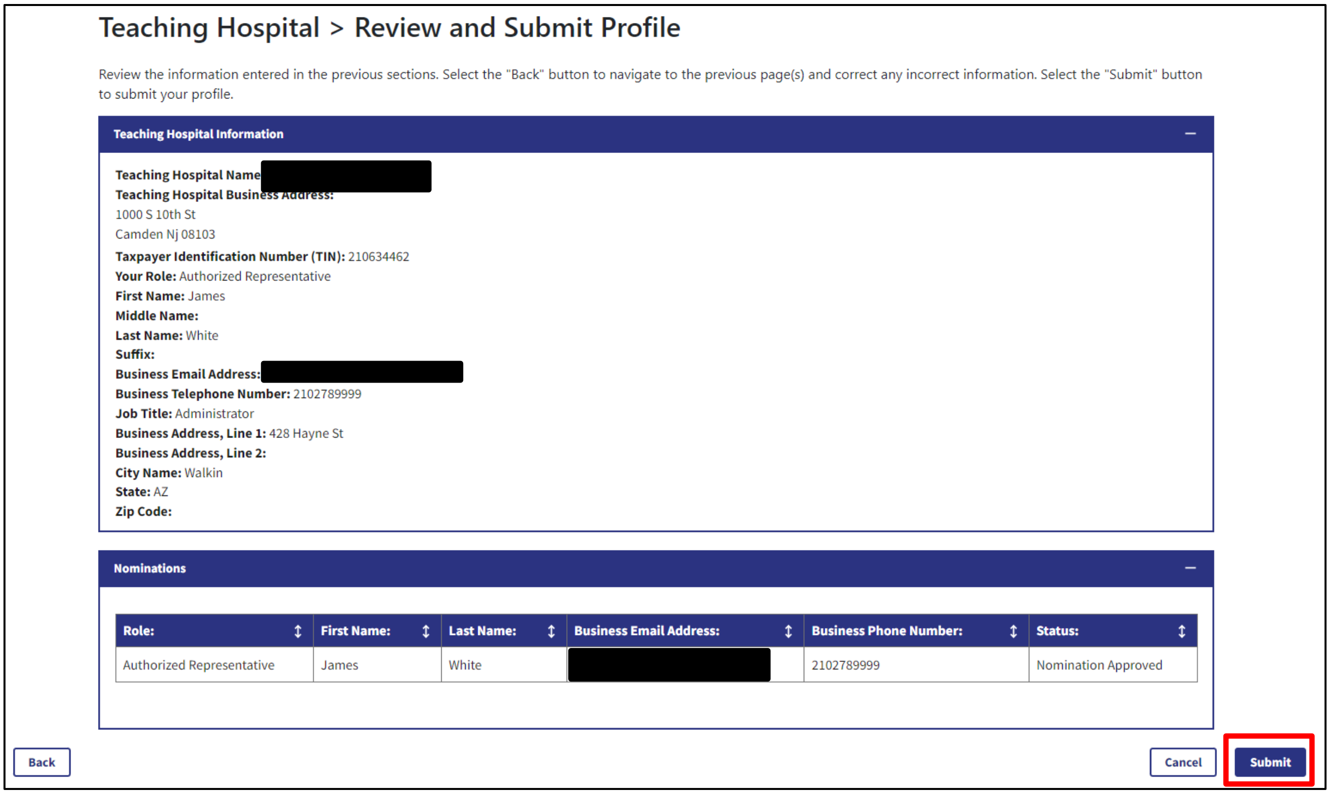
<u>Step 7:</u> Review your personal information. If the information displayed is correct, select the **Continue** button. If the information displayed is incorrect, update the necessary fields. When finished, select the **Continue** button.

Figure 132: Personal Information Page



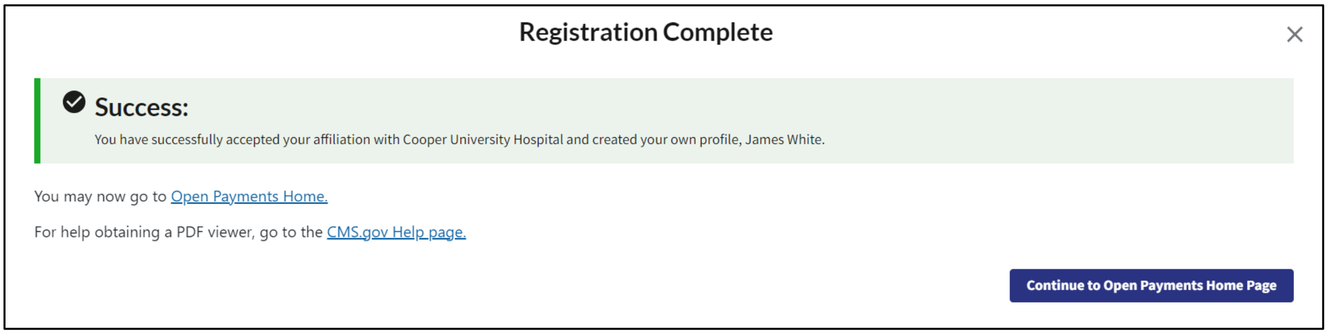
<u>Step 8:</u> Review the information you have entered. To correct any errors, select the **Back** button at the bottom of the page to return to previous pages and make your corrections. If the information is correct, select the **Submit** button.

Figure 133: Review and Submit Profile Page



The following message will appear on-screen to confirm your nomination has been successfully accepted.

Figure 134: Success Confirmed Page

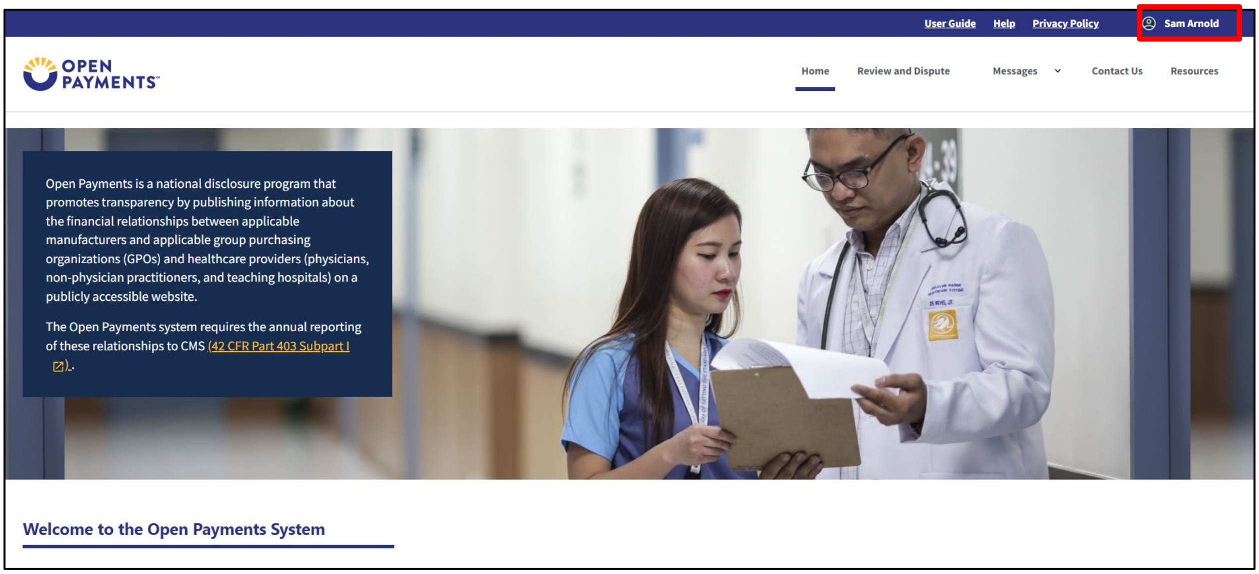


3.5f: Accepting or Rejecting a Nomination (Teaching Hospital – Returning System Users)

If you have been nominated for a teaching hospital user role you will receive a notification email. Take note of the information in the email, including registration ID and nomination ID, then follow the steps below to accept the nomination.

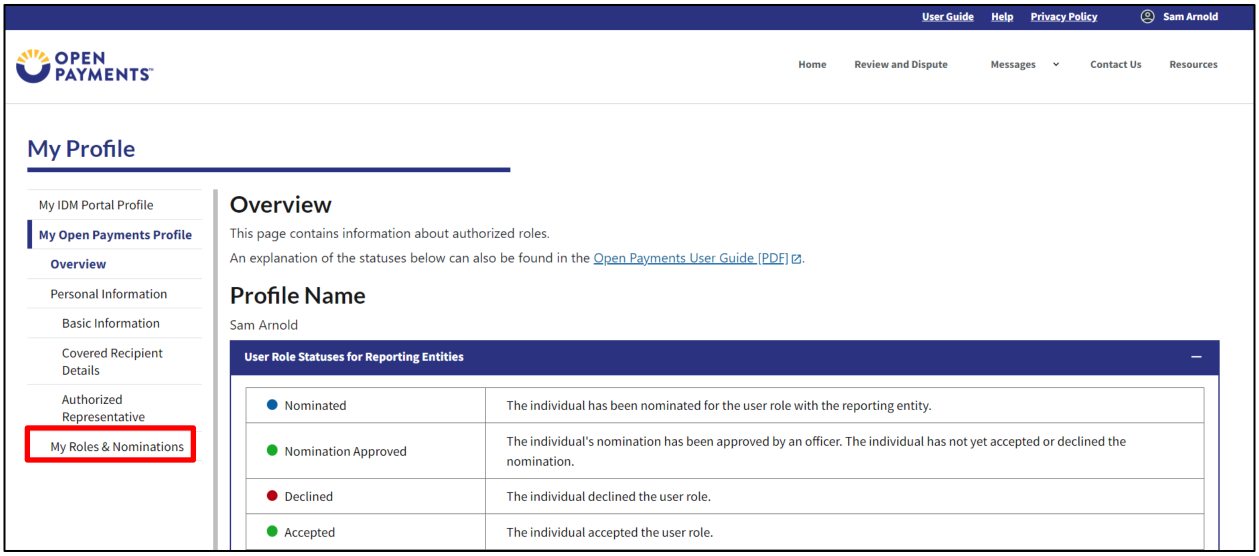
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select the **My Open Payments Profile** link.

Figure 135: Open Payments Landing Page for Returning Teaching Hospital Users



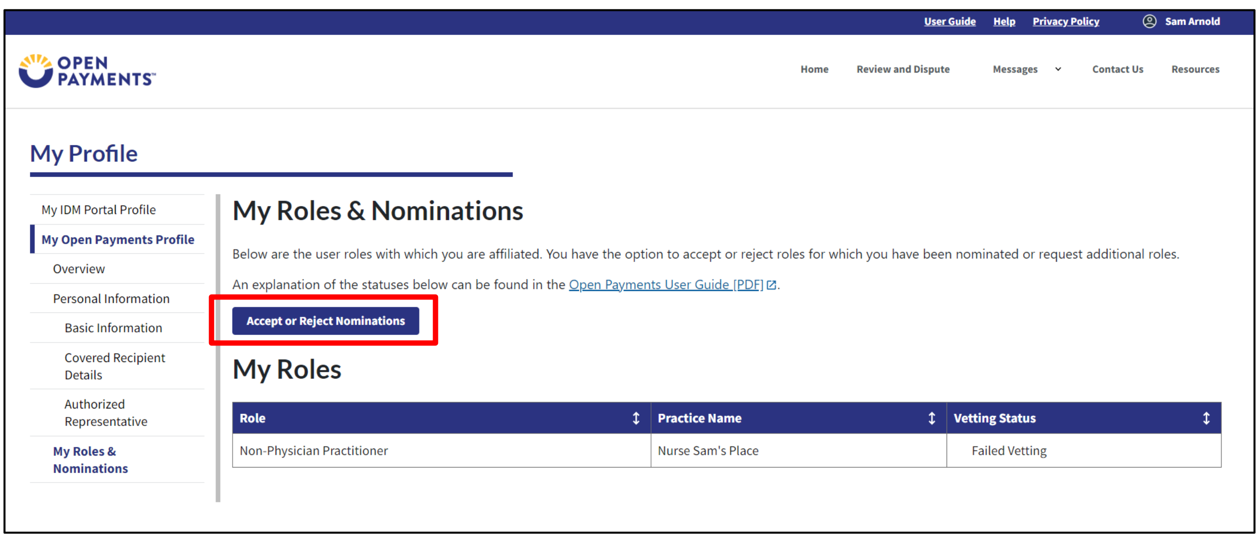
Step 2: Select **My Roles and Nominations**.

Figure 136: My Profile Page



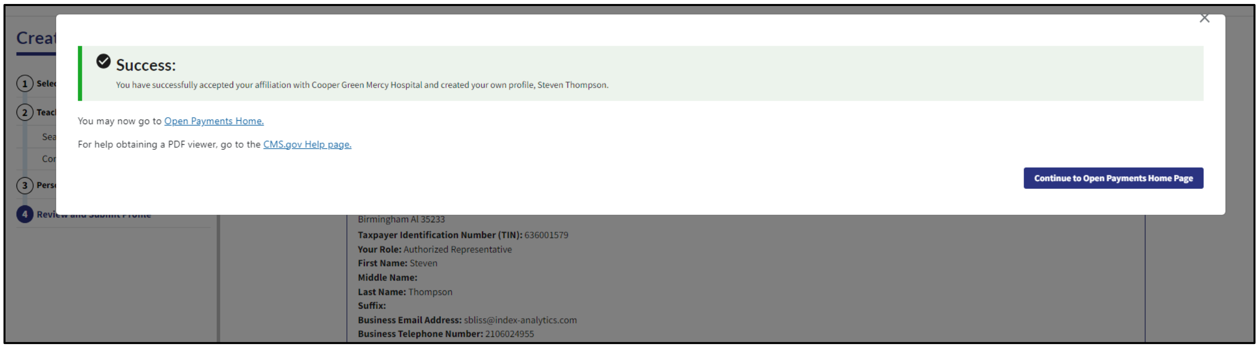
Step 3: Select **Accept or Reject Nominations**.

Figure 137: My Profile Page My Roles and Nominations



Step 4: Select your user type from the drop-down and enter the registration ID and nomination ID in the appropriate fields. When complete, select **Show Nomination**. The rest of the role accepting process is the same as Step 4, Section 3.5e.

Figure 138: Success



3.5g: Self-Nomination: Requesting a Role: Teaching Hospital - First Time System Users

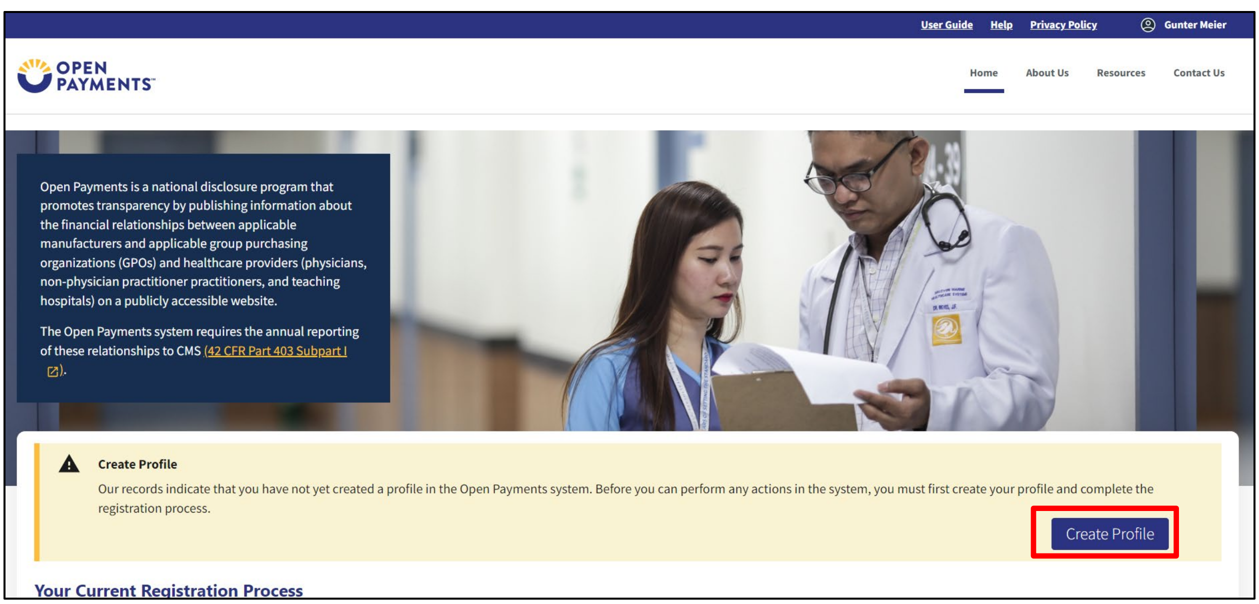
If you are a first-time user and would like to self-nominate for a teaching hospital role as an authorized official or authorized representative, follow the steps below.

Step 1: First, you must create an Open Payments system user account and request access to the Open Payments system (See Sections 3.2b and 3.2c, above).

Once you have done that, log in to the Open payments system at https://openpayments.system.cms.gov.

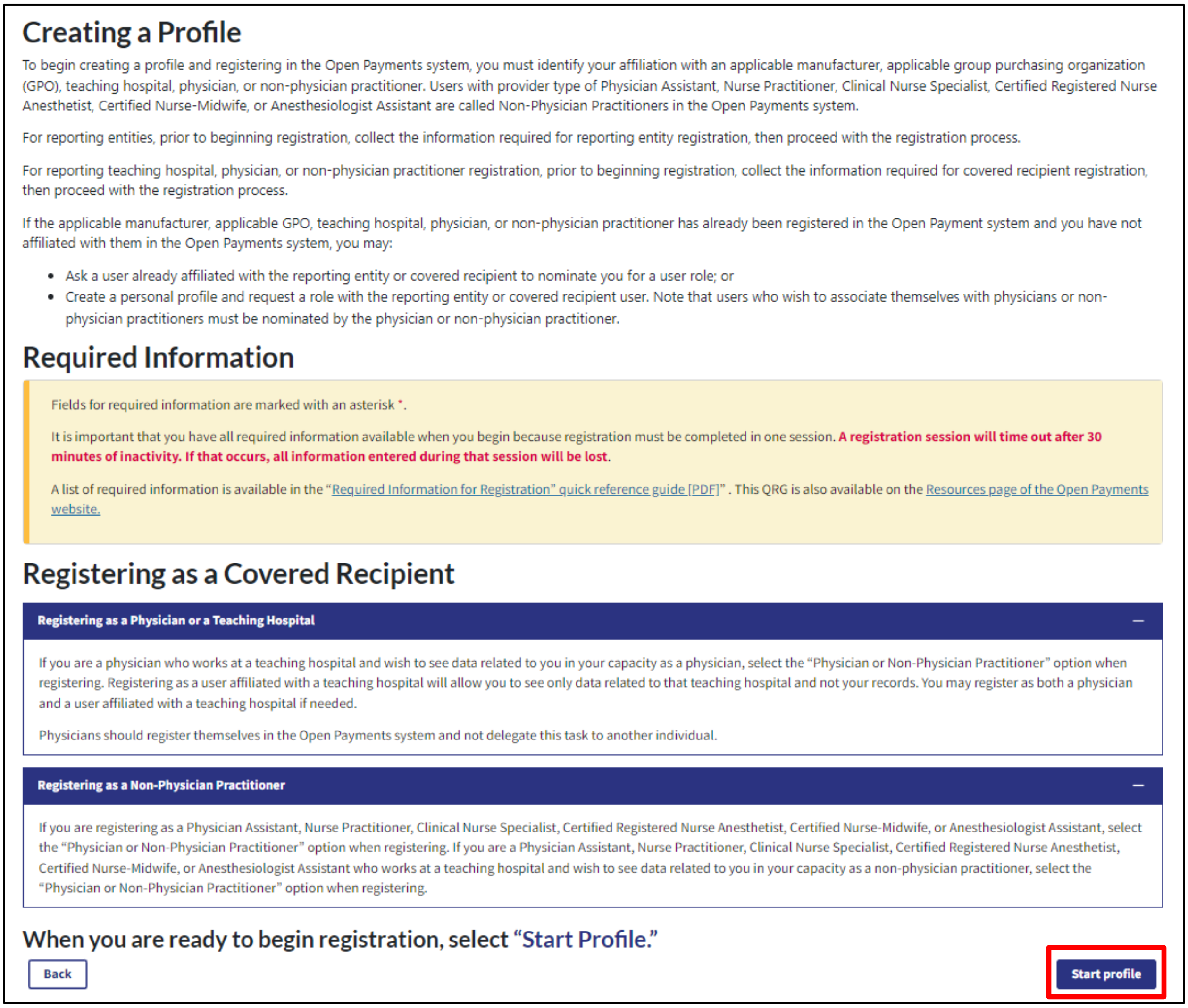
The on-screen text contains important information regarding the registration process. Read the on-screen text and select **Create Profile** when you are ready to begin the registration process.

Figure 139: Open Payments Landing Page for First-Time Teaching Hospital User



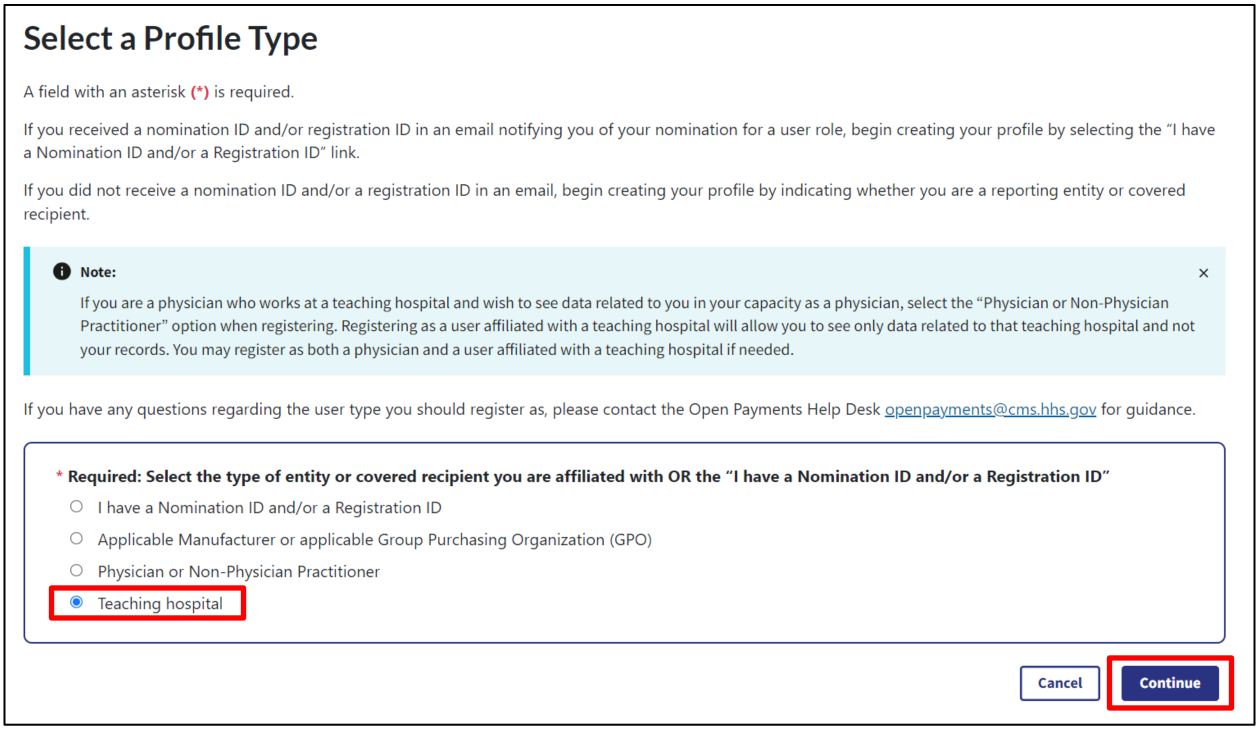
Step 2: Read the on-screen text and select **Start Profile** at the bottom of the page when you are ready to continue.

Figure 140: Create Profile Page



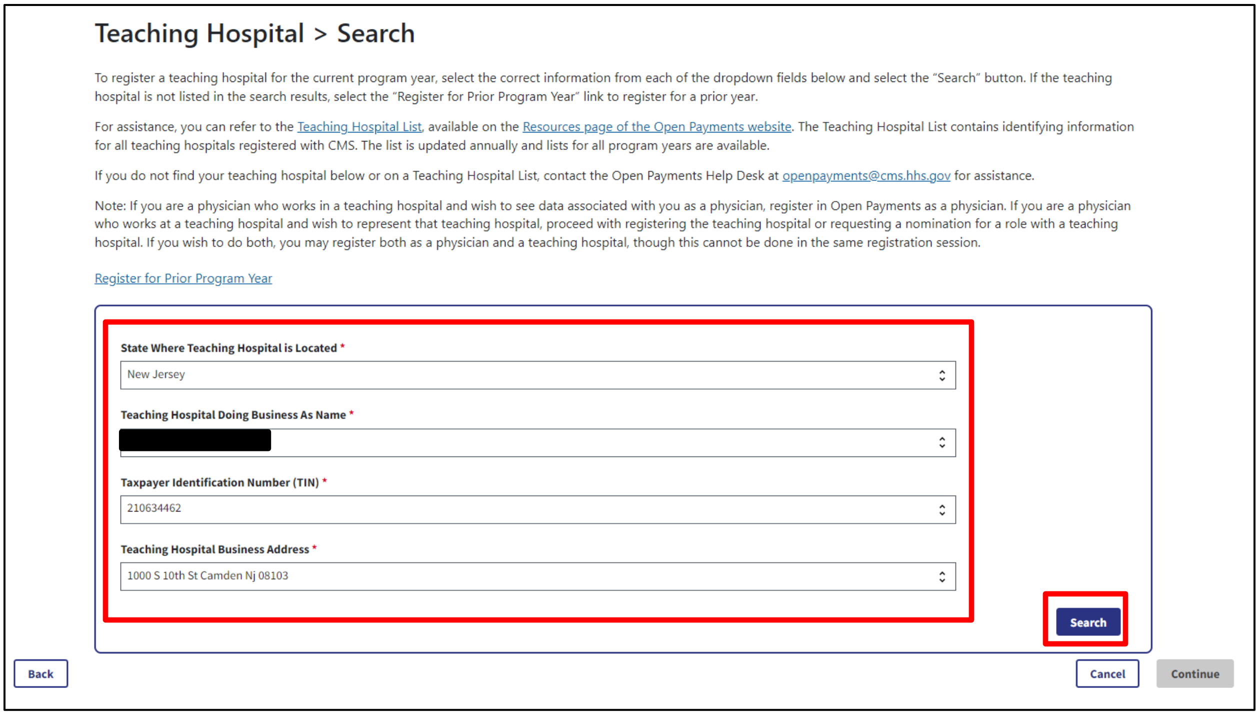
Step 3: Select the profile type **Teaching Hospital**. When finished, select the **Continue** button.

Figure 141: Select Profile Type Page



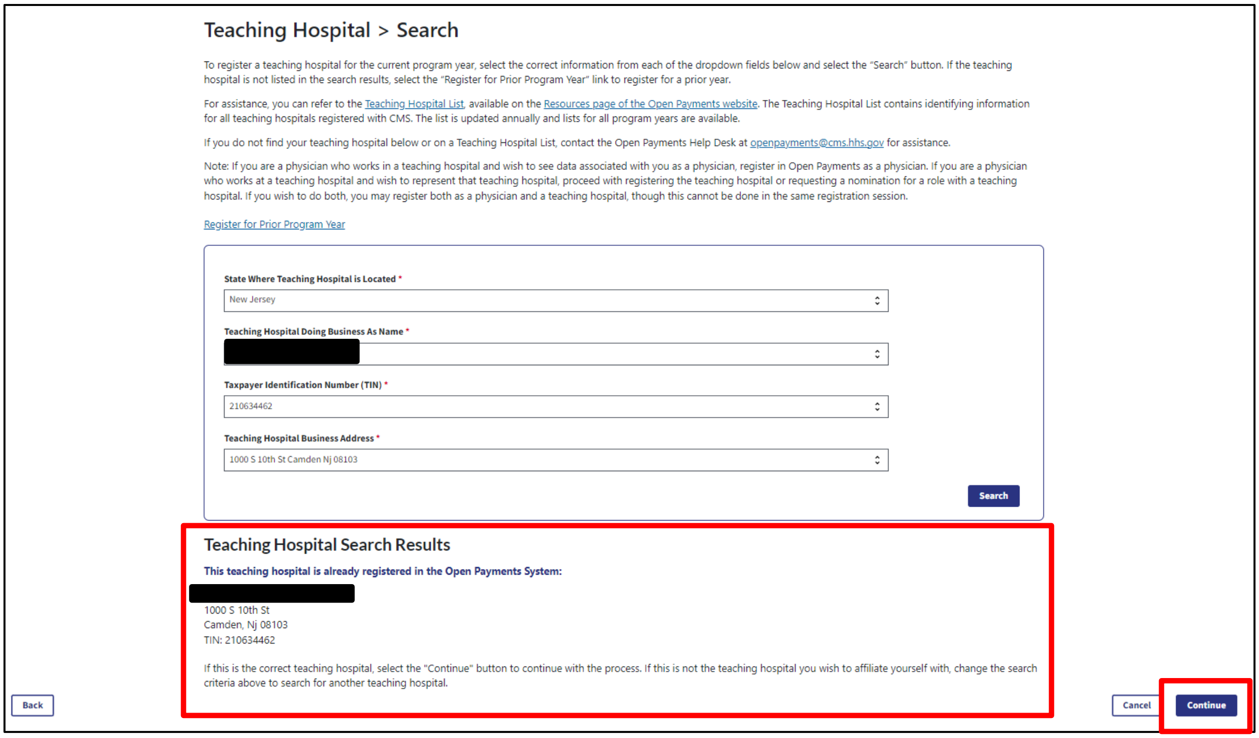
<u>Step 4:</u> Search the database for the correct teaching hospital. Select the teaching hospital's state, name, business address, and Taxpayer Identification Number (TIN) from the dropdowns. When finished, select the **Search** button.

Figure 142: Teaching Hospital Search Page



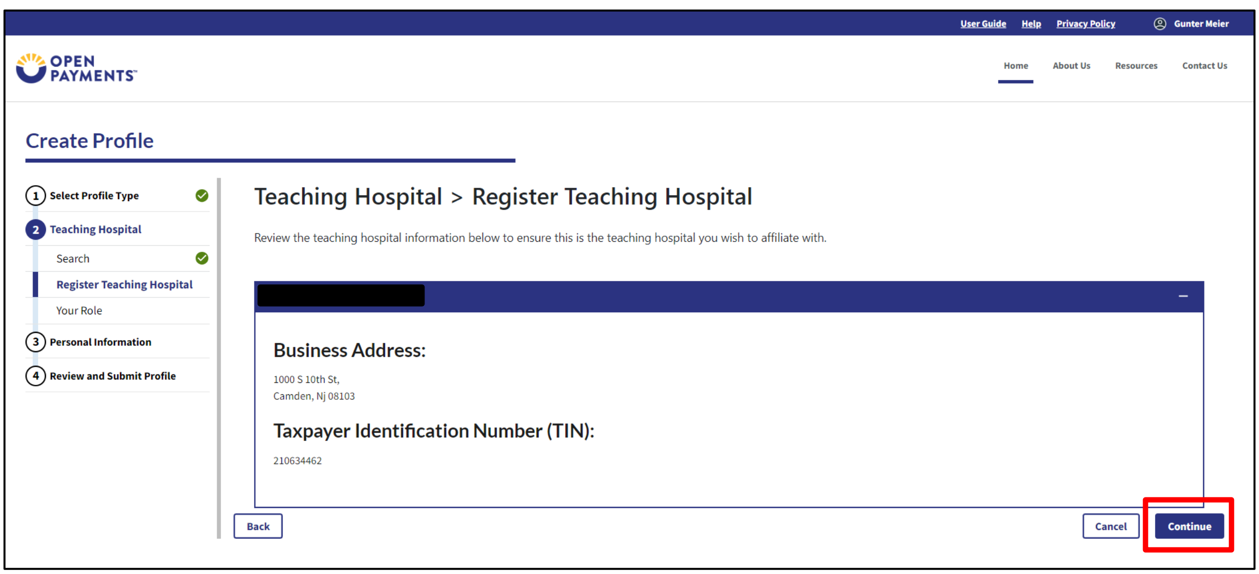
<u>Step 5:</u> Review the returned information displayed on the page. Select the **Continue** button if the information displayed is correct. If the information is not correct, select the **Back** button at the bottom of the page to return to the previous page and edit the search information you entered.

Figure 143: Teaching Hospital Search Page Search Results



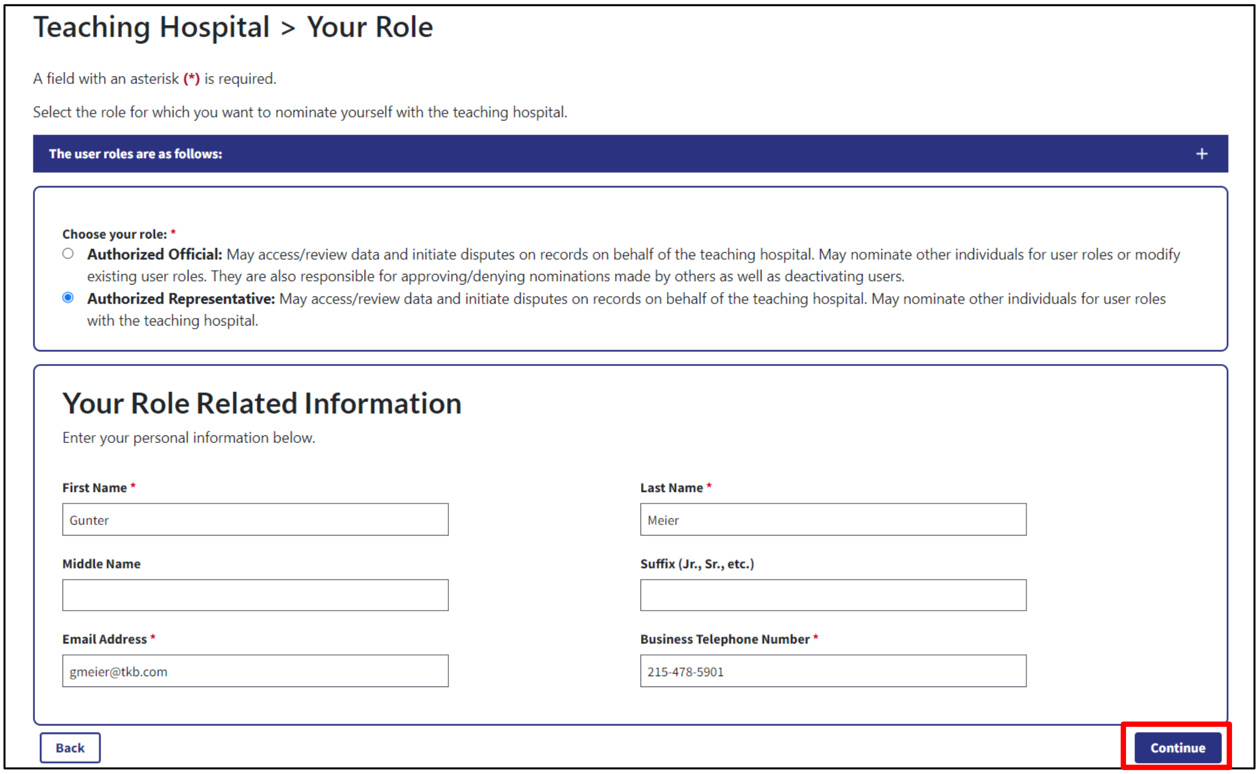
Step 6: Review the information displayed on the page. If the information is correct, select the **Continue** button. If the information is not correct, select the **Back** button at the bottom of the page to select a different teaching hospital.

Figure 144: Register Teaching Hospital Page



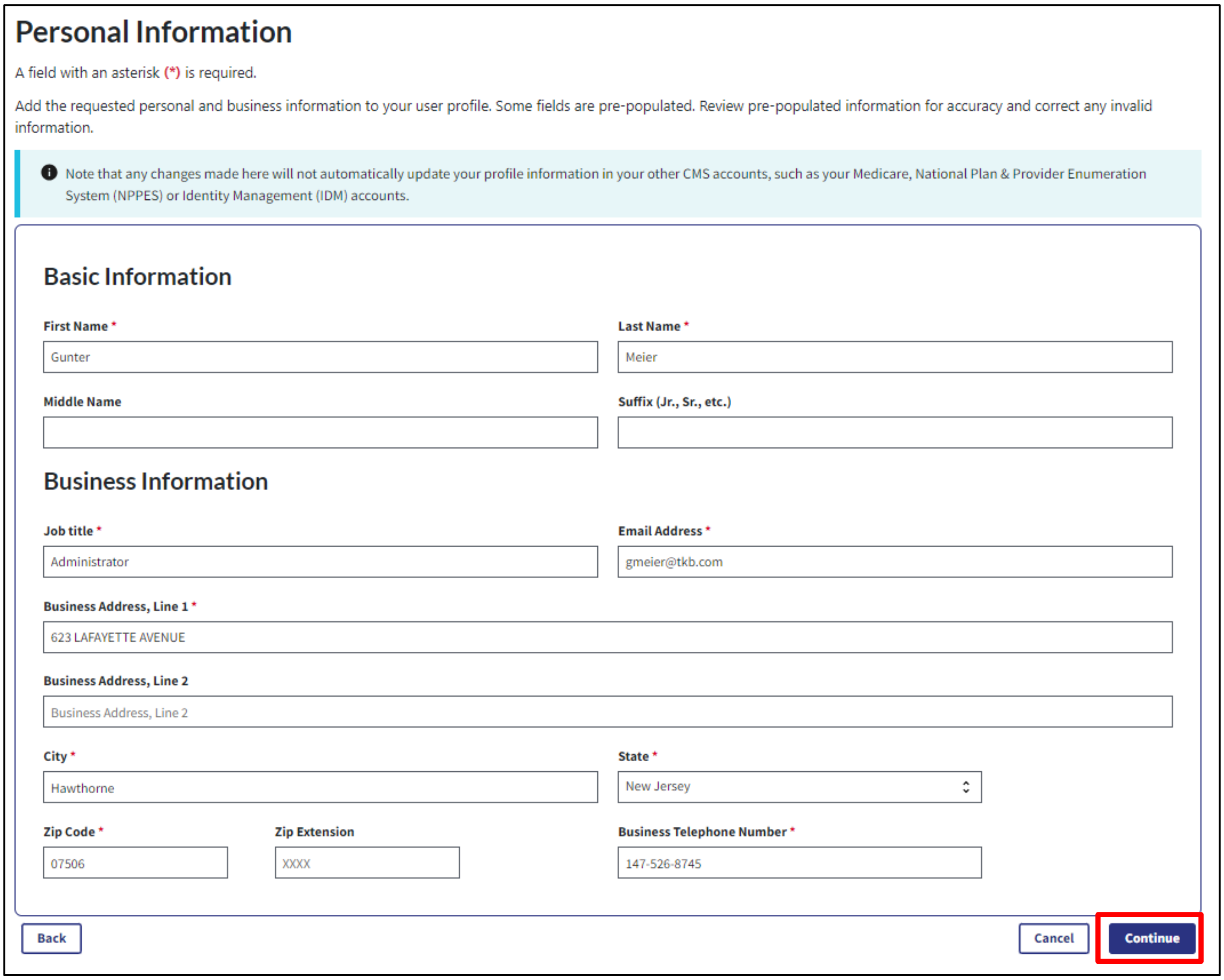
Step 7: Select the role you wish to nominate yourself for in the teaching hospital. Note that as you are not registering with the teaching hospital, you may select either role. After you have chosen your role, enter in the role-related information in the data fields. Required fields are marked with an asterisk. Once you have entered all the information, select the **Continue** button.

Figure 145: Teaching Hospital Your Role Page



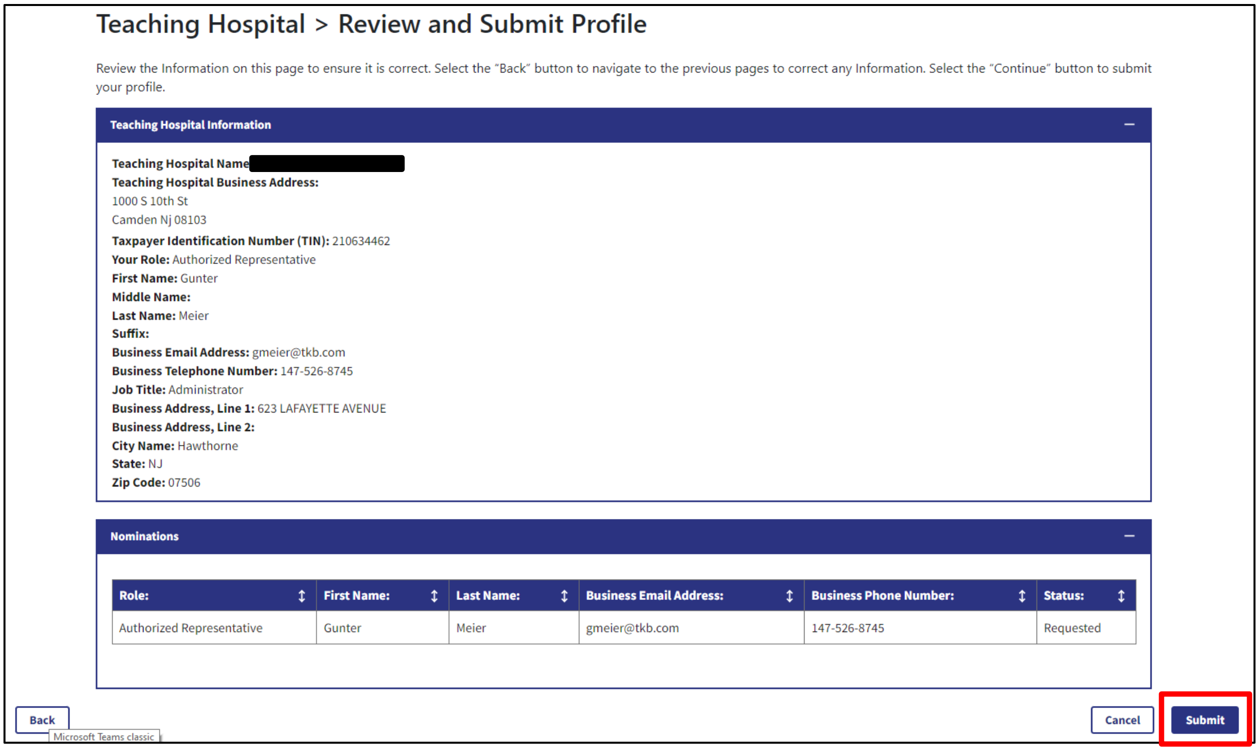
Step 8: Review your information displayed on the page. Enter your job title and business address. When finished, select the **Continue** button.

Figure 146: Personal Information Page



Step 9: Review your profile information on the "Review and Submit Profile" page. Select the **Back** button at the bottom of the page to go back and edit any information. Once you have reviewed the information and determined it to be correct, select the **Submit** button.

Figure 147: Review and Submit Profile Page

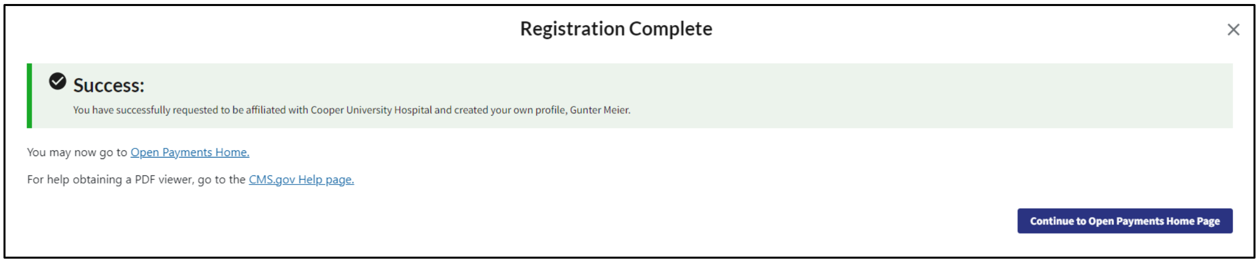


The following message will appear on-screen to confirm your profile has been successfully created. You will receive an email when your nomination is approved. Also, the authorized officials for the teaching hospital will receive emails notifying them of your request for a user role.

Once an authorized official approves your request, you will receive another email, and then you may start any teaching hospital activities.

If you are nominating yourself for a role with a teaching hospital that has already been registered but which lacks an active authorized official to approve your self-nomination, please contact the Open Payments Help Desk at 1-855-326-8366.

Figure 148: Success Confirmation Page



3.5h: Self-Nomination: Requesting a Role: Teaching Hospital - Returning System Users

If you would like to self-nominate for a teaching hospital role as an authorized official or authorized representative and already have a profile in the Open Payments system, follow the steps below.

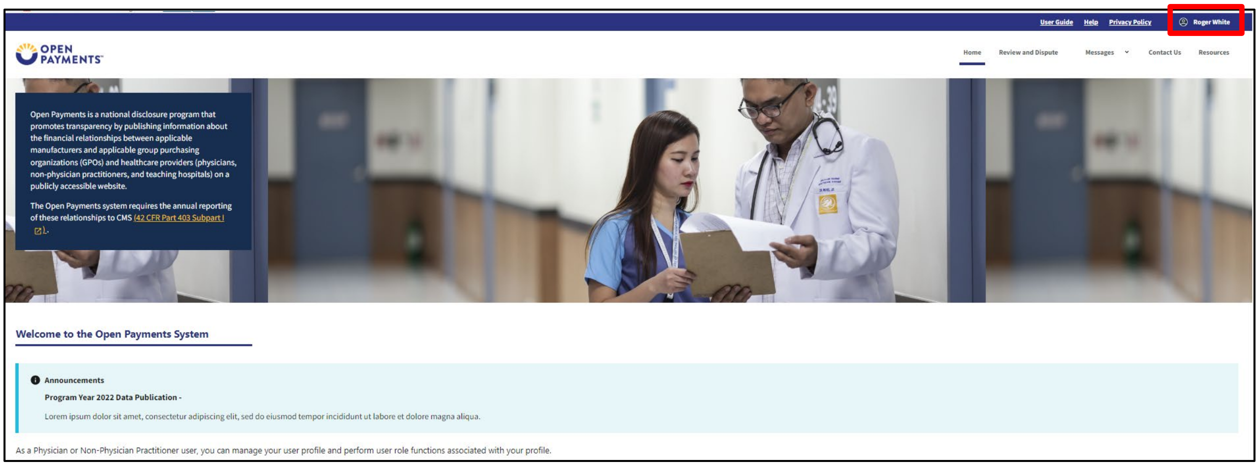
Step 1: Log in to the CMS Enterprise Portal at https://openpayments.system.cms.gov.

Select the "Switch User Type" link under your name at the top of the screen.

Then, select the Teaching Hospital link from the dropdown.

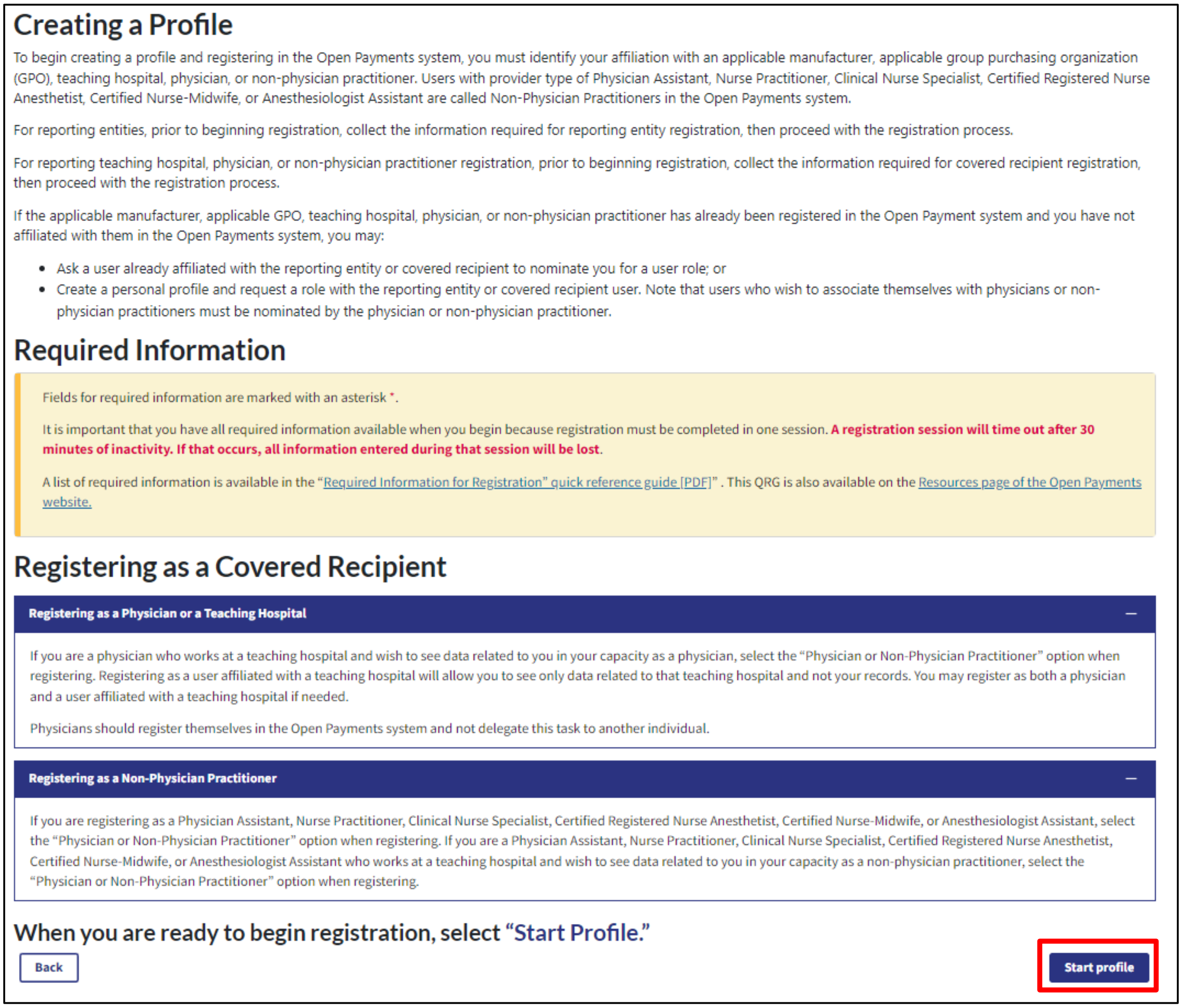
Select **Create Profile** from the new page.

Figure 149: Open Payments Landing Page for Returning User



Step 2: The on-screen text contains important information regarding creating the physician or NPP individual profiles. Read the on-screen text and **Start Profile** at the bottom of the page when you are ready to continue.

Figure 150: Create My Profile Page



Creating a Profile

To begin creating a profile and registering in the Open Payments system, you must identify your affiliation with an applicable manufacturer, applicable group purchasing organization (GPO), teaching hospital, physician, or non-physician practitioner. Users with provider type of Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, or Anesthesiologist Assistant are called Non-Physician Practitioners in the Open Payments system.

For reporting entities, prior to beginning registration, collect the information required for reporting entity registration, then proceed with the registration process.

For reporting teaching hospital, physician, or non-physician practitioner registration, prior to beginning registration, collect the information required for covered recipient registration, then proceed with the registration process.

If the applicable manufacturer, applicable GPO, teaching hospital, physician, or non-physician practitioner has already been registered in the Open Payment system and you have not affiliated with them in the Open Payments system, you may:

- Ask a user already affiliated with the reporting entity or covered recipient to nominate you for a user role; or
- Create a personal profile and request a role with the reporting entity or covered recipient user. Note that users who wish to associate themselves with physicians or non-physician practitioners must be nominated by the physician or non-physician practitioner.

Required Information

Fields for required information are marked with an asterisk *.

It is important that you have all required information available when you begin because registration must be completed in one session. **A registration session will time out after 30 minutes of inactivity. If that occurs, all information entered during that session will be lost.**

A list of required information is available in the "Required Information for Registration" quick reference guide [PDF]" . This QRG is also available on the Resources page of the Open Payments website.

Registering as a Covered Recipient

Registering as a Physician or a Teaching Hospital

If you are a physician who works at a teaching hospital and wish to see data related to you in your capacity as a physician, select the "Physician or Non-Physician Practitioner" option when registering. Registering as a user affiliated with a teaching hospital will allow you to see only data related to that teaching hospital and not your records. You may register as both a physician and a user affiliated with a teaching hospital if needed.

Physicians should register themselves in the Open Payments system and not delegate this task to another individual.

Registering as a Non-Physician Practitioner

If you are registering as a Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, or Anesthesiologist Assistant, select the "Physician or Non-Physician Practitioner" option when registering. If you are a Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Certified Registered Nurse Anesthetist, Certified Nurse-Midwife, or Anesthesiologist Assistant who works at a teaching hospital and wish to see data related to you in your capacity as a non-physician practitioner, select the "Physician or Non-Physician Practitioner" option when registering.

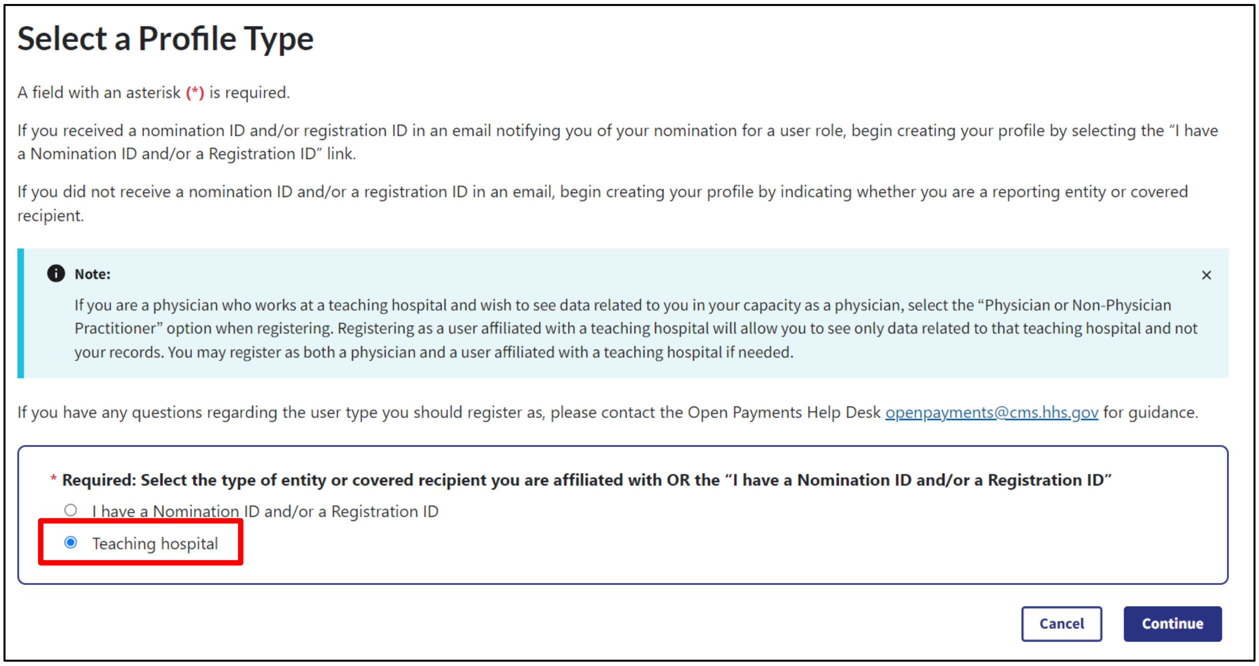
When you are ready to begin registration, select "Start Profile."

Back

Start profile

Step 3: Select the user type "Teaching Hospital", and then select **Continue**.

Figure 151: Select Profile Type



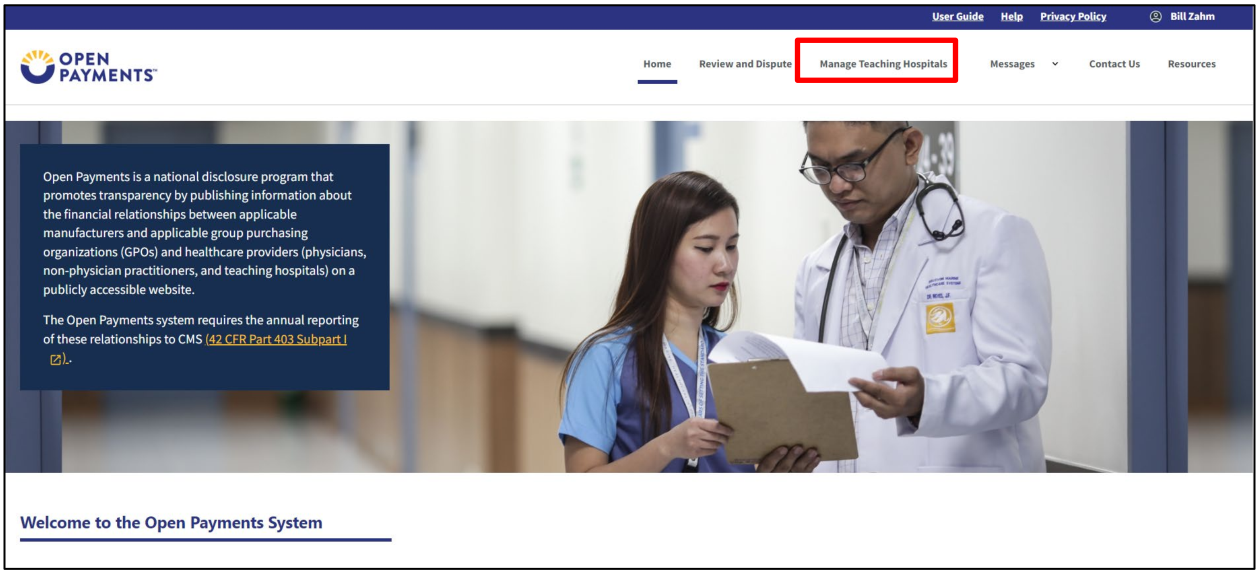
Step 4: The rest of this workflow is the same as Step 4, 3.5e.

3.5i: Approving or Modifying a Nomination: Authorized Official Returning Users Only

If you are an authorized official for a teaching hospital and would like to approve or modify a nomination, follow the steps below.

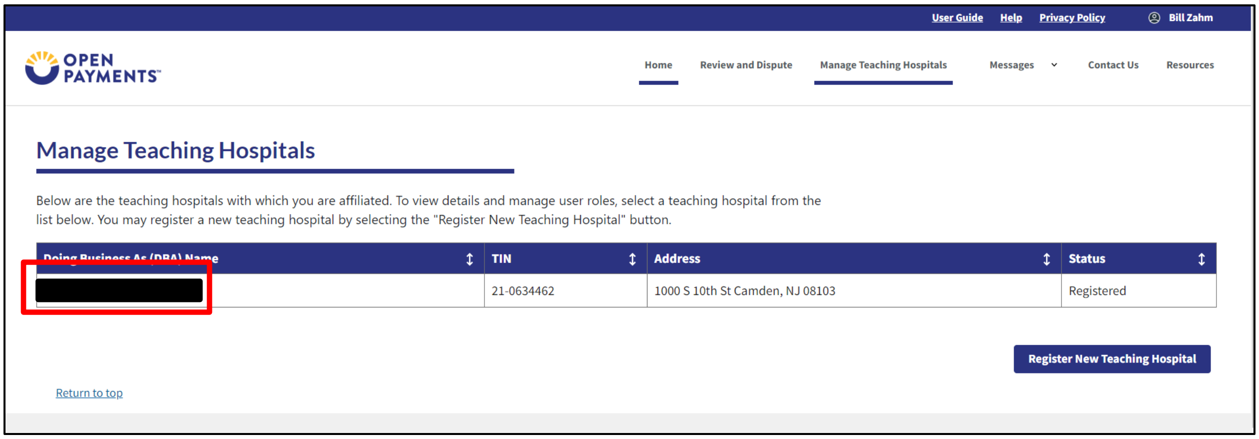
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select **Manage Teaching Hospitals**.

Figure 152: Open Payments Landing Page for Returning User



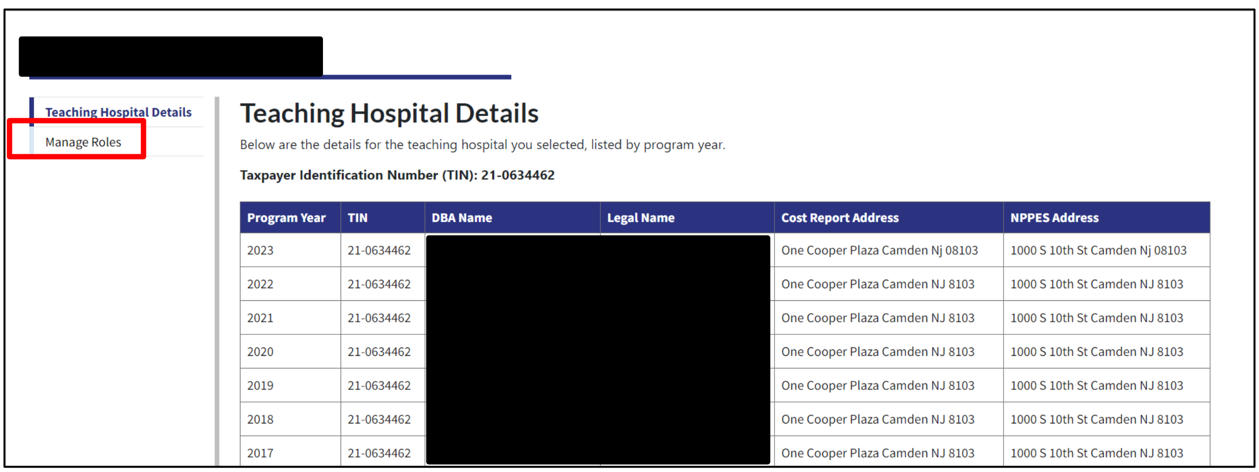
Step 2: On the "Manage Teaching Hospitals" page, select the teaching hospital for which you want to confirm a nomination.

Figure 153: Manage Teaching Hospitals Page



Step 3: Select the **Manage Roles** link on the left side of the screen.

Figure 154: Teaching Hospital Information Page



Step 4: To approve a nomination, select the **Approve** button next to a nominee's name. The nominee will receive an email notification informing them of the acceptance of their nomination.

Figure 155: Teaching Hospital Manage Roles Tab

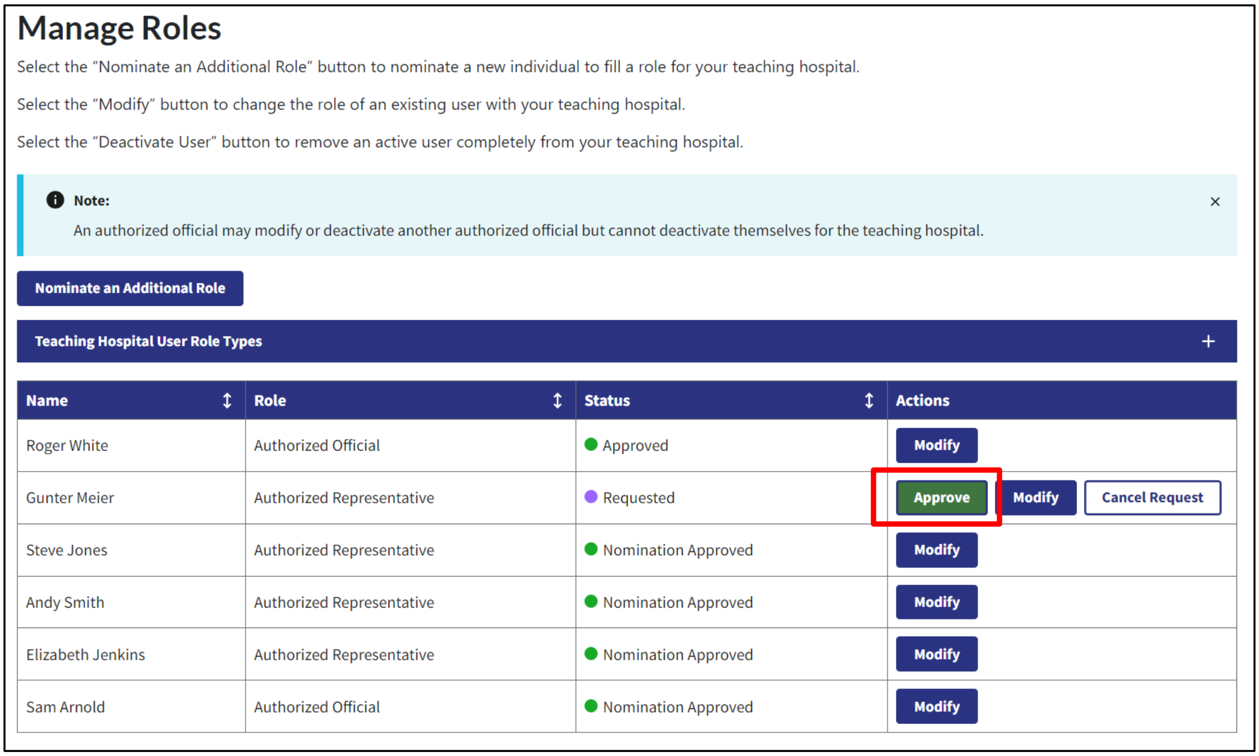
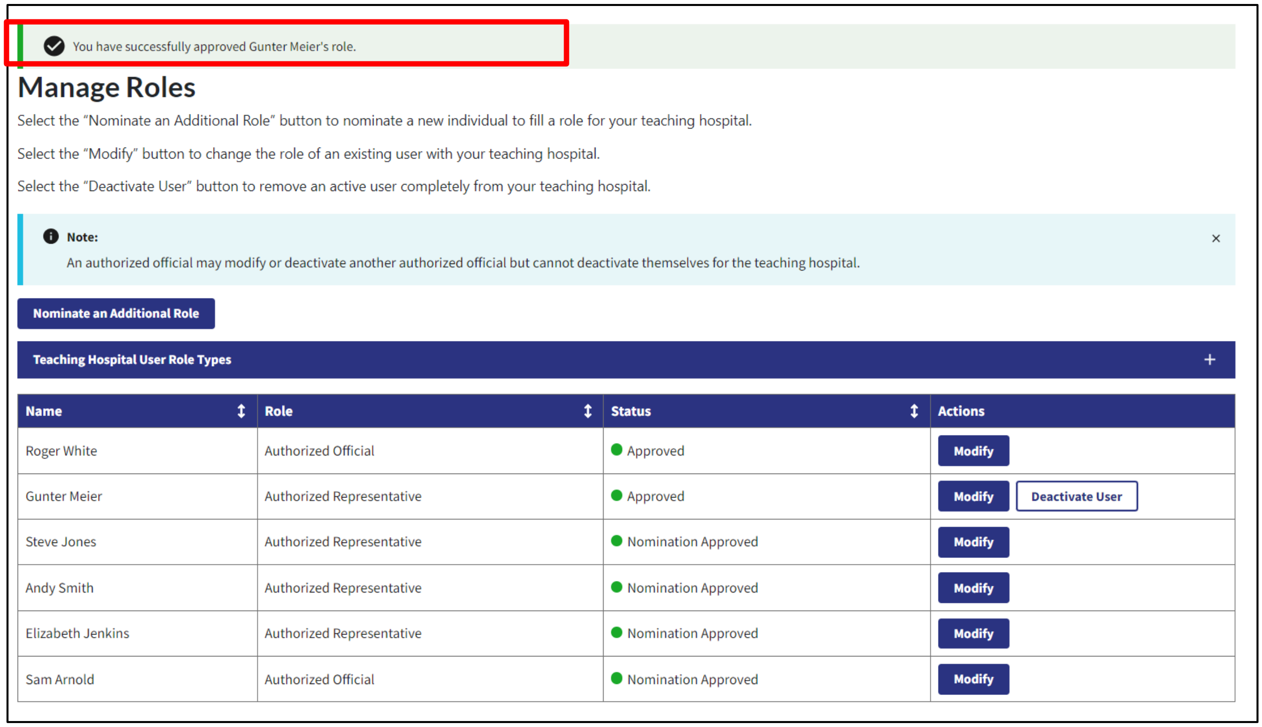


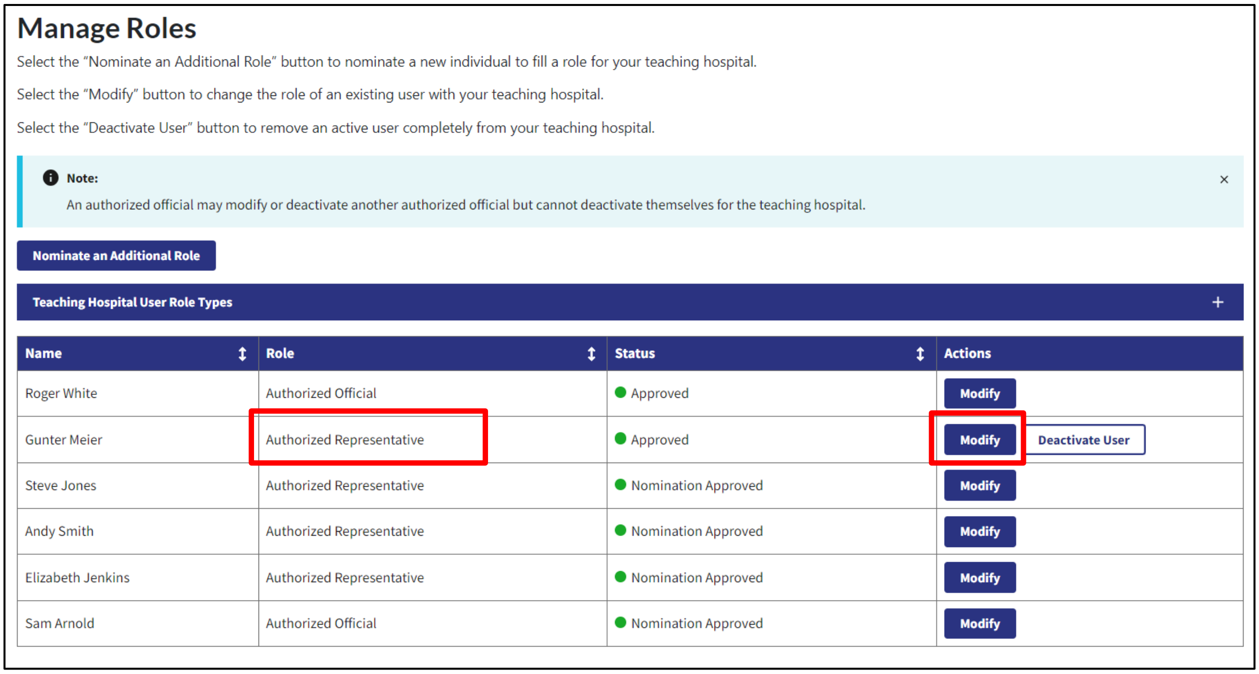
Figure 156: Teaching Hospital Manage Roles Tab Confirmation



Step 4a: To modify a nomination, select the **Modify** button next to a nominee's name. This will allow you to change the individual's information and/or role. When modifications are complete, select **Save Role**.

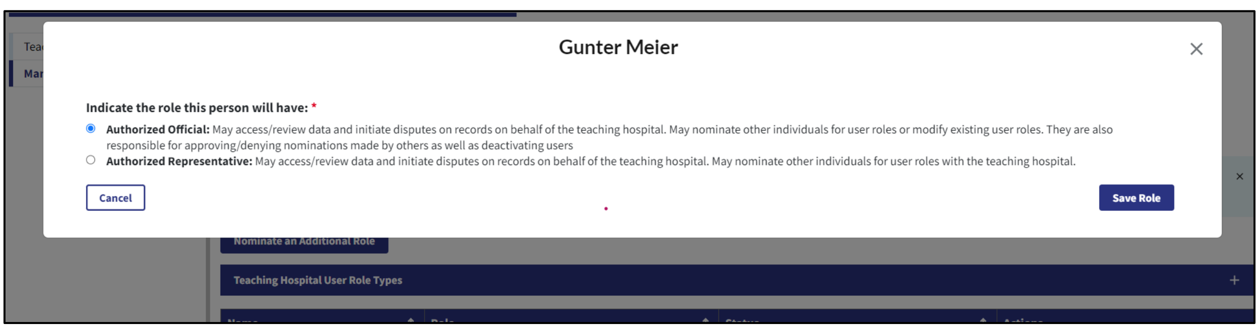
In this scenario, the user is holding the authorized representative role. The authorized official wants to change his role to an authorized official.

Figure 157: Teaching Hospital Manage Roles Tab Modify Roles



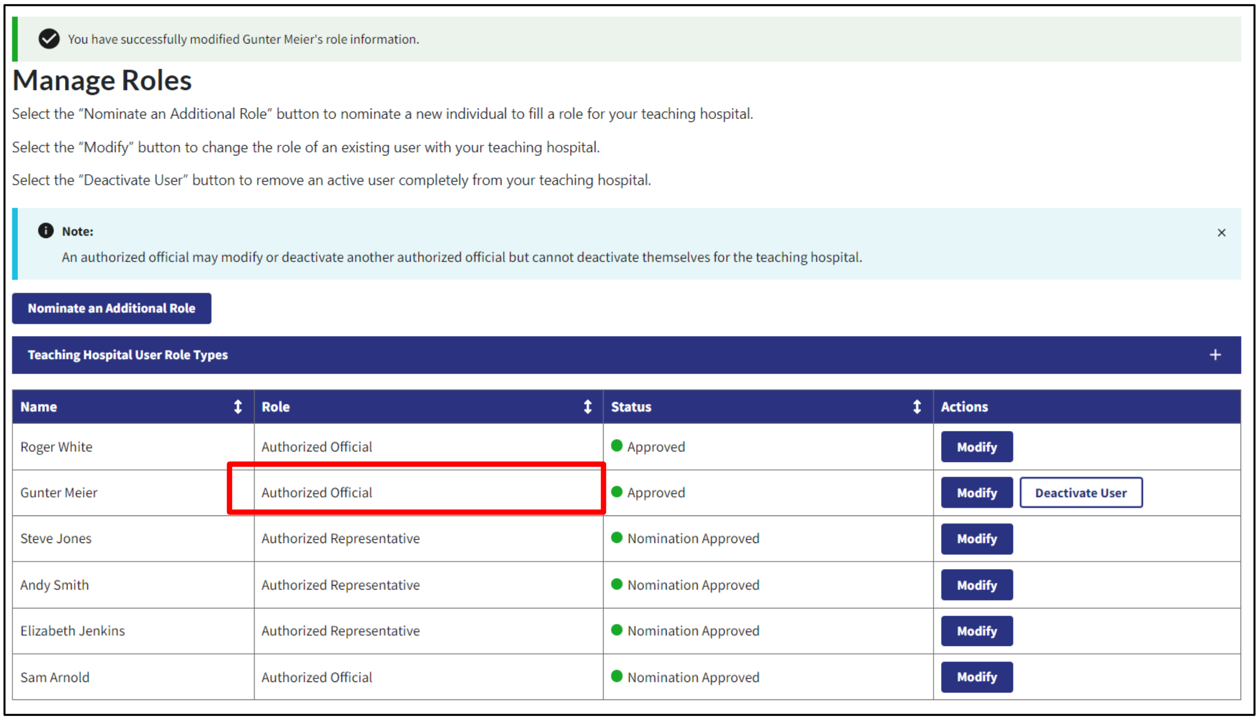
Note that you cannot remove all user roles from a nominee.

Figure 158: Modify Role Page



Step 5: You will now see an updated list of nominations and roles on the Manage Roles page.

Figure 159: Teaching Hospital Manage Roles Tab Confirmation



3.5j: Deactivating a User

A user holding the role of a teaching hospital authorized official can deactivate other individuals' user roles with that teaching hospital, including other authorized officials. Deactivation removes an individual's association with a teaching hospital in the Open Payments system, including removing the individual's access to that teaching hospital's information and records. It does not remove the individual from the Open Payments system.

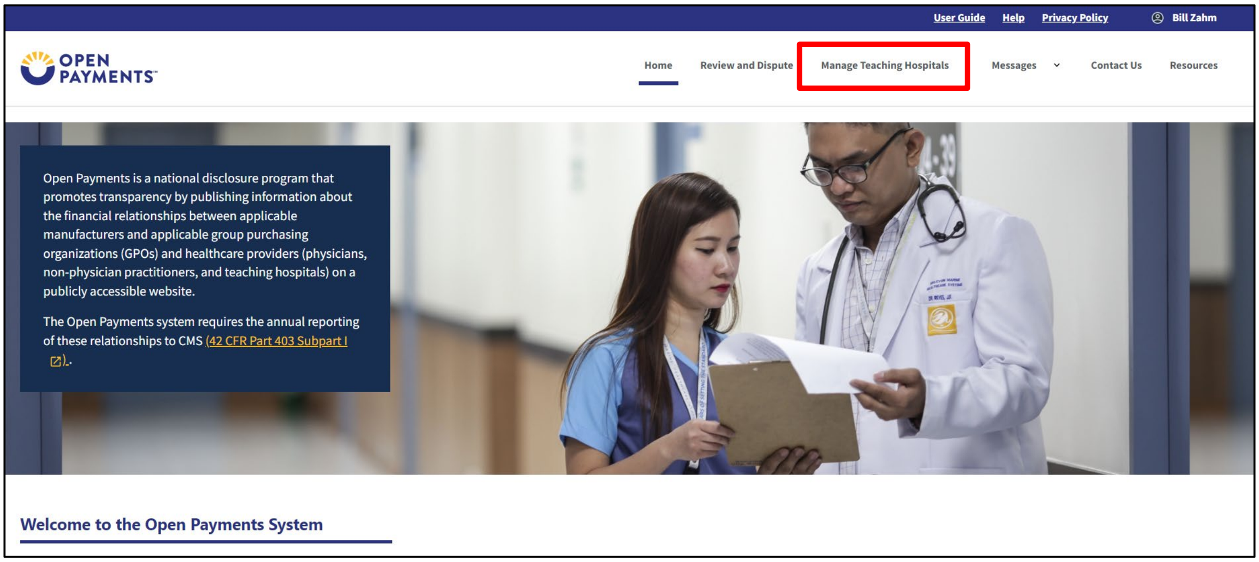
You cannot deactivate yourself. If you wish to be deactivated, contact the Open Payments Help Desk.

Only active users can be deactivated; individuals who have not yet accepted or rejected a user role nomination cannot be deactivated, nor can individuals who have self-nominated for a user role, but their nomination has not yet been approved or denied.

To deactivate an individual's user role, follow these steps.

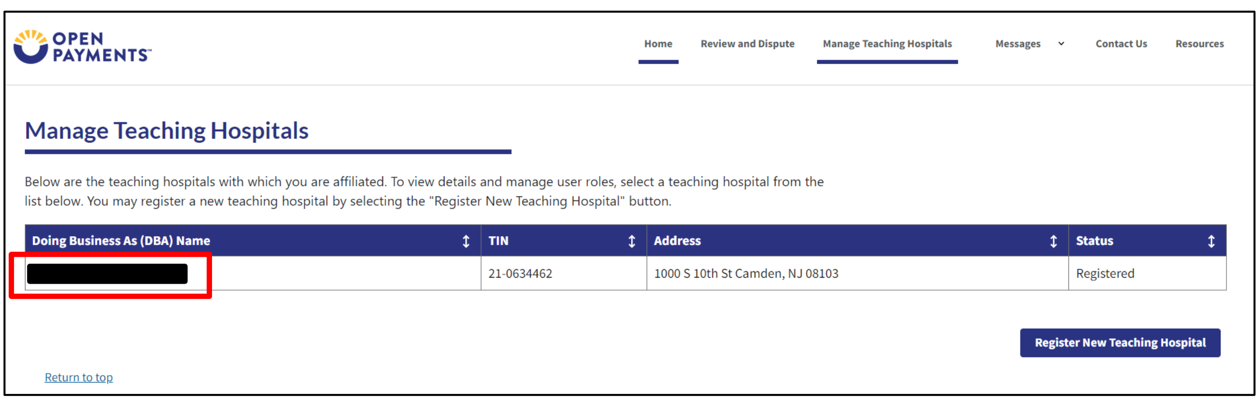
Step 1: Log in to the CMS Enterprise Portal at https://openpayments.system.cms.gov, navigate to the **Manage Teaching Hospitals** link from the menu bar on the at the top of the page.

Figure 160: Open Payments Landing Page for Returning User



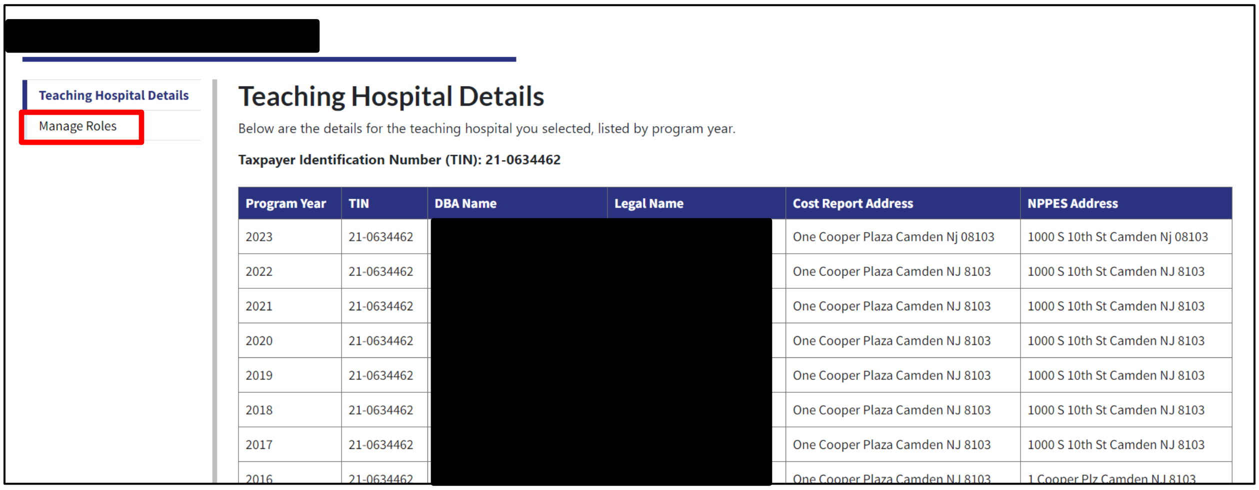
Step 2: You will see a list of all teaching hospitals you are associated with. Select the hyperlink for the teaching hospital for which you will be deactivating a user.

Figure 161: Manage Teaching Hospitals Page



Step 3: Select the **Manage Roles** link on the left side of the page.

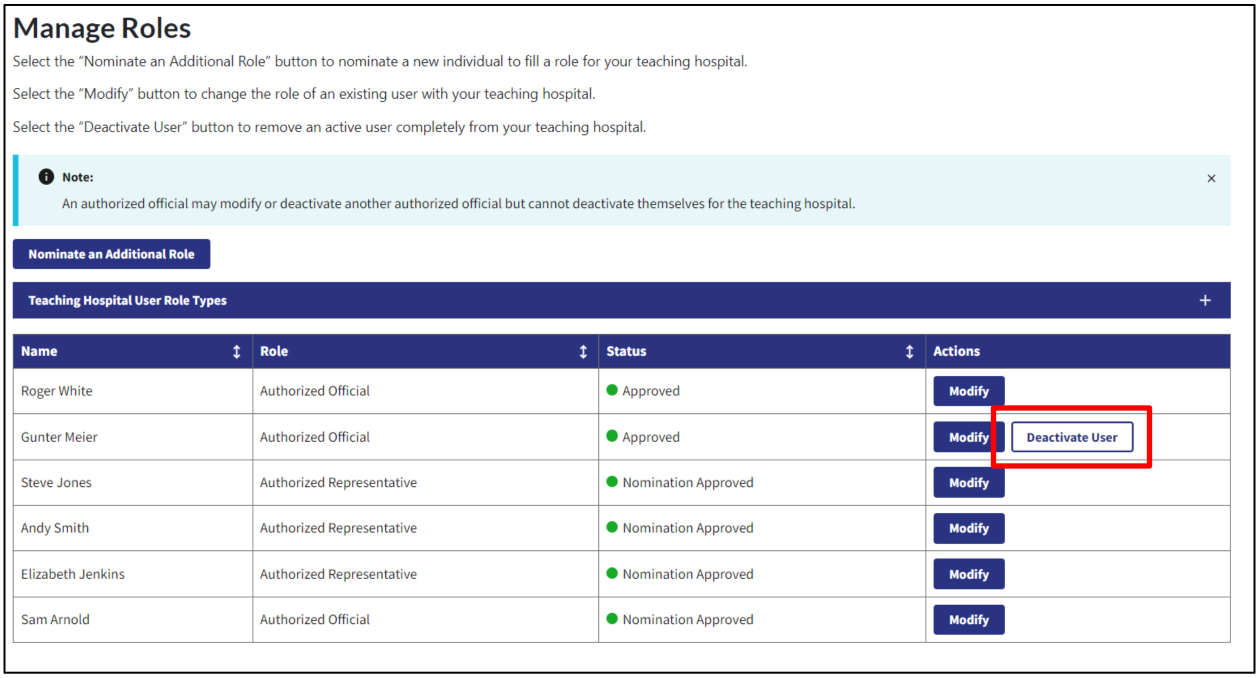
Figure 162: Teaching Hospital Information Page



Program Year	TIN	DBA Name	Legal Name	Cost Report Address	NPPES Address
2023	21-0634462	[redacted]		One Cooper Plaza Camden Nj 08103	1000 S 10th St Camden Nj 08103
2022	21-0634462			One Cooper Plaza Camden NJ 8103	1000 S 10th St Camden NJ 8103
2021	21-0634462			One Cooper Plaza Camden NJ 8103	1000 S 10th St Camden NJ 8103
2020	21-0634462			One Cooper Plaza Camden NJ 8103	1000 S 10th St Camden NJ 8103
2019	21-0634462			One Cooper Plaza Camden NJ 8103	1000 S 10th St Camden NJ 8103
2018	21-0634462			One Cooper Plaza Camden NJ 8103	1000 S 10th St Camden NJ 8103
2017	21-0634462			One Cooper Plaza Camden NJ 8103	1000 S 10th St Camden NJ 8103
2016	21-0634462			One Cooper Plaza Camden NJ 8103	1 Cooper Plz Camden NJ 8103

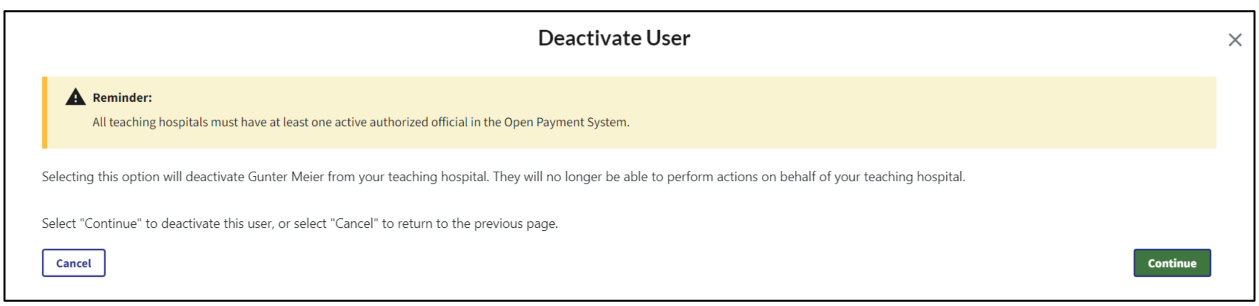
Step 4: Select the **Deactivate User** button associated with name of the individual's name.

Figure 163: Teaching Hospital Manage Roles Tab Deactivate User



<u>Step 5:</u> The Open Payments system will ask you to confirm the deactivation. Select the **Continue** button to confirm deactivation or the **Cancel** button to return to the Manage Roles page with no action taken. If you confirm deactivation, the Open Payments system will send emails to you and the individual being deactivated that confirms the individual's user role deactivation.

Figure 164: Teaching Hospital Manage Roles Tab- Confirmation Page



Section 3.6: Updating Profile Information in the Open Payments System

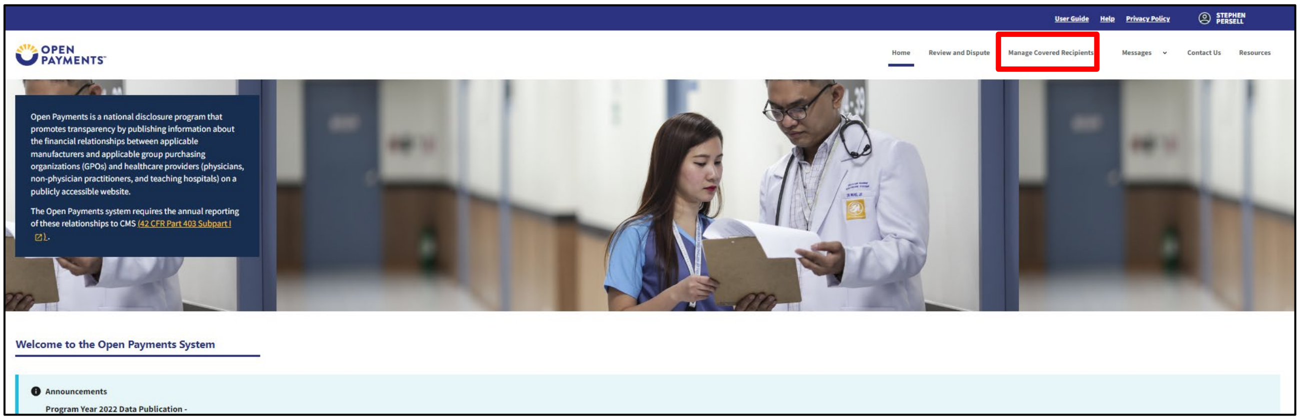
Physician, NPP, and teaching hospital profiles can be kept current by updating them as information changes. The steps for profile updates are given below.

3.6a: Updating a Covered Recipient Profile as an Authorized Representative

As an authorized representative who holds the level of access of "Modify Profile" to edit their covered recipient's profile, follow these steps.

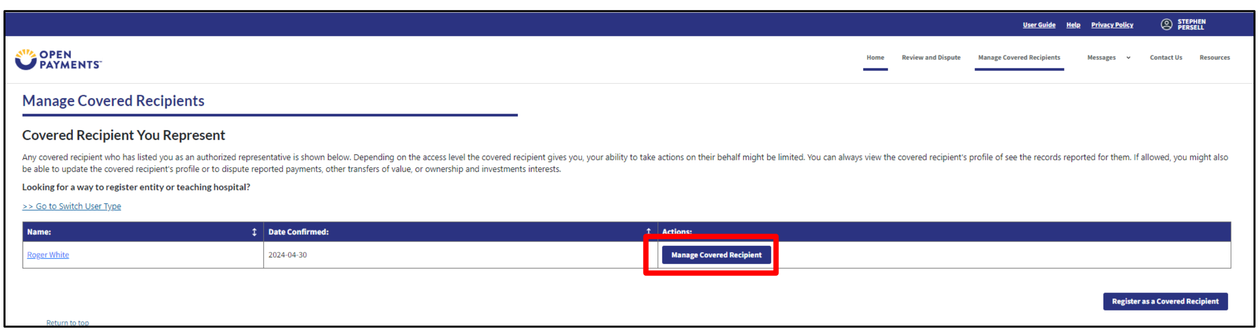
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select the **Manage Covered Recipients** tab.

Figure 165: Open Payments Landing Page



Step 2: Find the covered recipient for which you wish to make updates on the "Manage Covered Recipients" page and select **Manage Covered Recipient**.

Figure 166: Manage Covered Recipients Page



Step 3: First, you can edit the covered recipient's basic information. To do so:

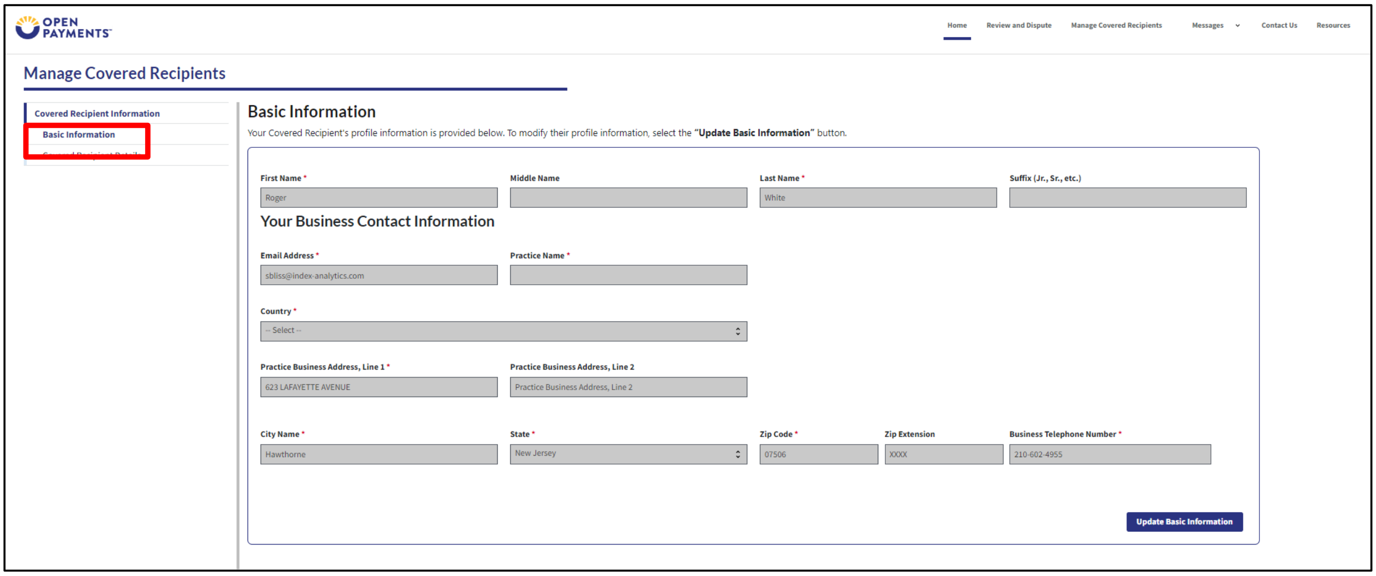
Select **Update Basic Information**.

Update the information needed.

Select **Save**.

Next, you can update the covered recipient's details by selecting that link on the left side of the screen.

Figure 167: Covered Recipient Details



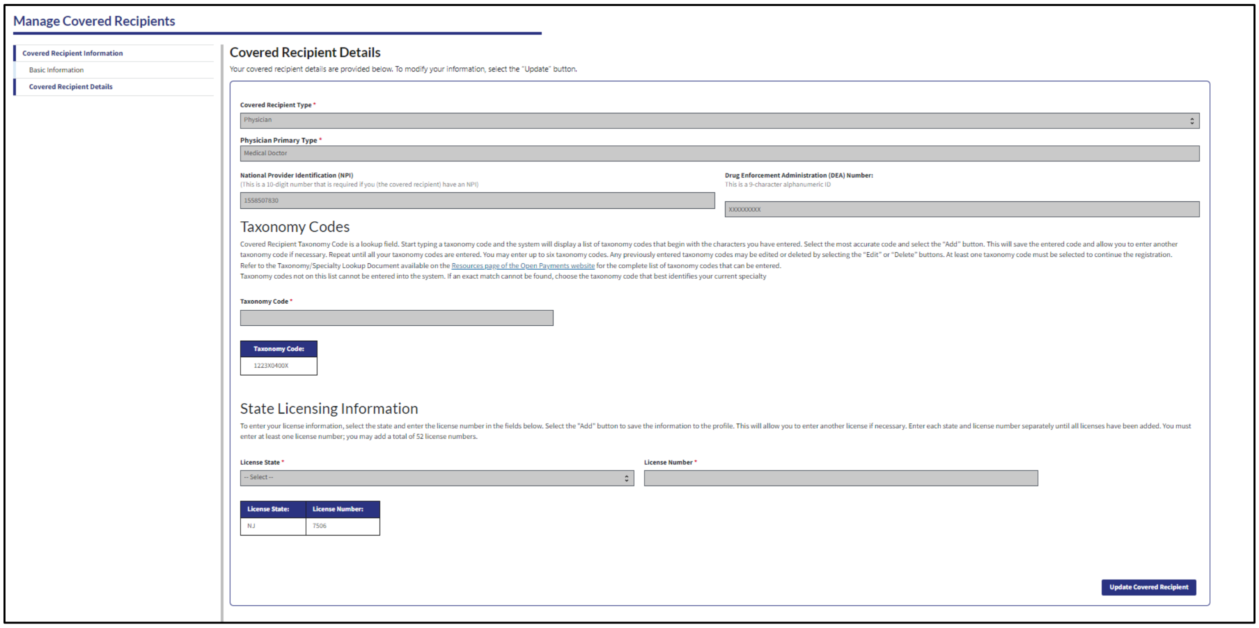
Step 4: To edit the covered recipient details:

Select **Update Covered Recipient**.

Update the information needed.

Select **Save**.

Figure 168: Update Covered Recipient



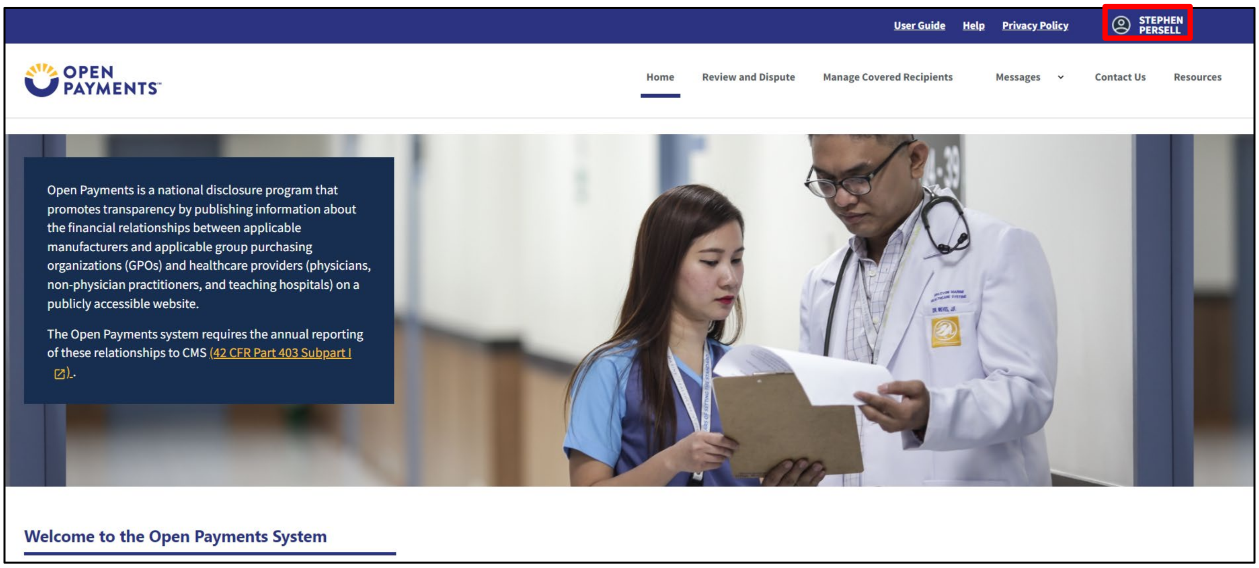
Any updates made to the covered recipient profile may require that the covered recipient be re-vetted. Once the updated information has been re-vetted, both the covered recipient and authorized representative will be able to perform the necessary actions in the Open Payments system. See Section 3.3c for information on physician and NPP vetting.

3.6b: Updating Covered Recipient or Covered Recipient Authorized Representative Personal Profile

As a user of the Open Payments system, you can update your personal profile information. You will be able to update your name, business email address, business telephone number, job title, and business address. Steps for updating your profile are explained below.

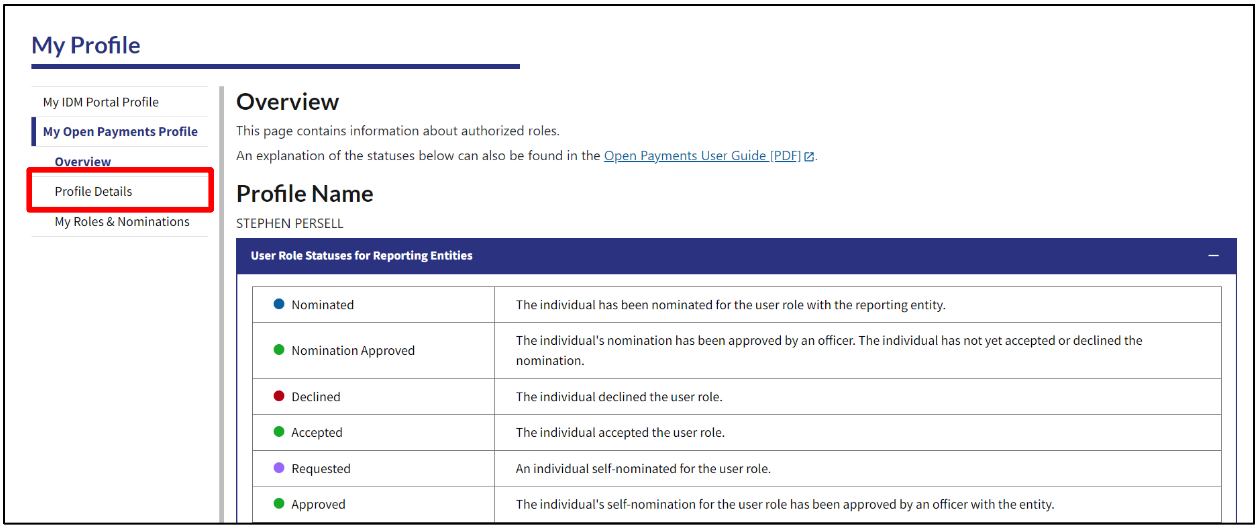
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select **My Open Payments Profile** by selecting your name in the upper-right corner of the page.

Figure 169: Open Payments Landing Page for Returning Physician and NPP Users



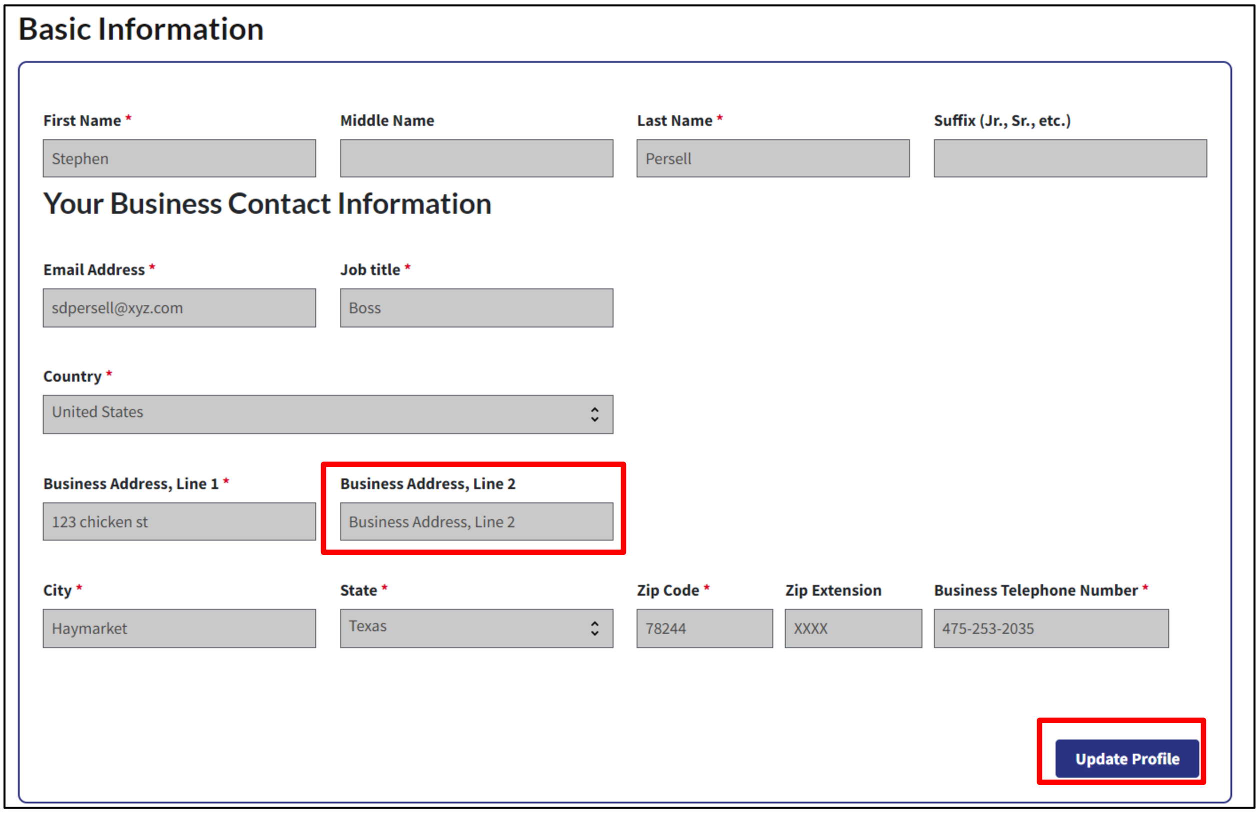
Step 2: Select the Profile Details link. You will be able to view your existing profile information.

Figure 170: My Profile Page



Step 3: Select **Update Profile** to begin making edits and/or updates. When changes are complete, select **Save**. In this scenario, this user added information in the "Business Address, Line 2" field.

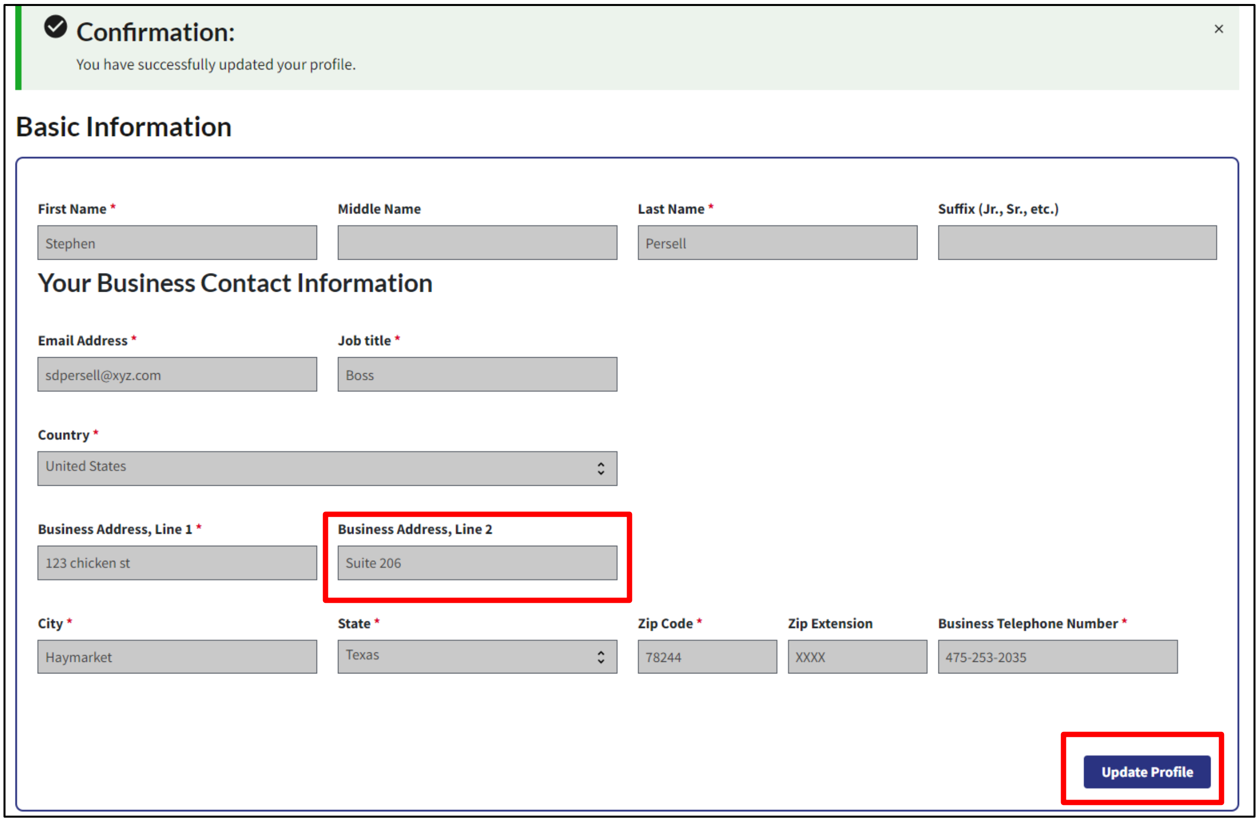
Figure 171: My Profile Details Page



Step 4: Update fields as necessary. When changes are complete, select **Save Updates**.

The updated information will now appear on the "My Profile Details" page.

Figure 172: My Profile Details Tab



Review and Dispute

Chapter 4: Review and Dispute for Physicians, NPPs, Teaching Hospitals, and Principal Investigators

This chapter provides information on the review, dispute, and correction process for physicians, NPPs, teaching hospitals (known as "covered recipients"), and principal investigators in the Open Payments system.

This chapter is divided into the following sections:

- **Review and Dispute Process Overview:** provides a general overview on the covered recipient review and dispute process within the Open Payments system.
- **Reviewing Records:** how covered recipients, and principal investigators can review data submitted about them.
- **Affirming Records:** how covered recipients, and principal investigators can affirm data submitted about them is correct.
- **Disputing Records:** how covered recipients, and principal investigators can initiate disputes against data submitted about them.
- **Withdrawing Disputes:** how covered recipients, and principal investigators can withdraw their initiated disputes.

This chapter covers the review and dispute functions for covered recipients, and principal investigators.

Section 4.1: Review and Dispute Process Overview

Covered recipients and principal investigators may review reported data within the Open Payments system that was submitted about them during the most recent calendar year's data submission period. For a covered recipient to review their data within the Open Payments System, they must complete the Open Payments registration (see Chapter 3 for registration details).

This includes records submitted for the previous program year and any records submitted late from prior program years. Covered recipient registration and review of the data is voluntary but strongly encouraged as this ensures the accuracy of the Open Payments data.

As a covered recipient or principal investigator, you may perform one of the two actions below.

- Affirm record is accurate: If you agree a record is accurate, you can **affirm** the record. Affirmation is not a required action. Records that have not been affirmed will still be included in the next data publication.
- Dispute a record: If you believe a record is inaccurate or incomplete in any way, you can **initiate a dispute** against the record. Records that are disputed, but not resolved, will still be included in the next data publication.

You may dispute any part of a record in which you are identified as the covered recipient.

Physicians and NPPs identified in a record as a Principal Investigator (PI) rather than covered recipient may only dispute their association with the record and their personal identifying information given in that record. They should not dispute any other information in the record, such as payment amount, nature of payment, etc.

Covered recipients should work directly with the reporting entity to resolve a dispute. **CMS does not mediate or facilitate disputes between physicians, NPPs, teaching hospitals, principal investigators, and reporting entities.**

The outcome of the resolution will be recorded in the Open Payments system. Dispute resolutions can lead to changes to the submitted data, or the dispute may be resolved without changes to the data. In addition, a dispute may be withdrawn by the individual who initiated it.

Email notifications are sent to alert applicable manufacturers, applicable GPOs, physicians, NPPs, teaching hospitals, and principal investigators of review and dispute activities in the Open Payments system.

Records that are flagged for a delay in publication by the reporting entity are eligible for review and dispute by physicians, NPPs, teaching hospitals, and principal investigators.

Refer to the "Methodology and Data Dictionary Document" available on the Resources page of the Open Payments website, at https://www.cms.gov/OpenPayments/Resources for details on how dispute and resolution changes and timing affect data publication. In the publication, the data will be associated with the program year of the data, not the year of its publication.

4.1a: Review, Dispute, and Correction Period

Each program year has a scheduled pre-publication review, dispute, and correction period. The period is 60 days long and divided into two activities.

April 1 through May 15 is the 45-day covered recipients' pre-publication review and dispute period. During this time, you may review, affirm or if necessary, dispute data, and work with the reporting entity to resolve the disputed record(s) submitted during the submission period.

Immediately following the 45-day period is a 15-day correction period, May 16th through May 30th, for reporting entities to continue to make corrections to records and resolve any active disputes.

Although there is a distinct pre-publication review, dispute, and correction period, these activities can be performed within the Open Payments system through December 31.

Disputes initiated within the pre-publication 45-day review, dispute, and correction period, and resolved by the end of the additional 15-day correction period, will be published and identified as non-disputed in the initial public posting of data.

If the dispute is not resolved by the end of the correction period, the record will be published and identified as being under dispute. Disputes initiated or resolved after the full 60-day review, dispute, and correction period will not be reflected in the initial publication of data. Those disputes and any related data changes will be published in the next publication of data, which may be a refresh publication of the program year data or the publication of the next program year's data.

If a dispute is not resolved before the end of the calendar year, all parties should continue to seek a resolution until the dispute is resolved. In some cases, this dispute resolution may need to occur outside of the Open Payments system. **CMS does not mediate or facilitate disputes between physicians, NPPs, teaching hospitals, principal investigators, and reporting entities.**

4.1b: Dispute Resolution: Changed Record

When a dispute resolution results in changes to a record, reporting entities must re-submit and re-attest the record with the revisions to the Open Payments system. You will be able to view the original record disputed under the "Deleted and In Progress Records" tab with status of "In Progress", and the user(s) that have disputes in "Initiated" or "Acknowledged" status will be notified via email that the record is being updated by the entity. Once the changes to a record have been attested, the record will be available under the "Available for Review and Dispute" tab again.

If a record is deleted in response to a dispute, any user(s) that have disputes in "Initiated" or "Acknowledged" status will be notified via email that the record has been deleted by the entity when the record is re-attested. The records that have been deleted will display under the "Deleted and In Progress Records" tab with a "Deleted" status. The newly identified physician, NPP, teaching hospital, or principal investigator will see the record during the next calendar year's review and dispute period under the "Available for Review and Dispute" tab.

Note: You should provide a current and direct email address in your Open Payments profile as the Open Payments system will send an email notification to the individual(s) who initiated the dispute(s) if a reporting entity edits or deletes a disputed record. If the dispute initiator is a covered recipient's authorized representative, email notifications will be sent to both the authorized representative and the physician and/or NPP.

4.1c: Review and Dispute Statuses

Records that have been disputed will have one of the following review and dispute statuses:

- **Initiated**: Indicates that a covered recipient initiated a dispute against a record submitted by an applicable manufacturer or applicable GPO.

- **Acknowledged:** Indicates that an applicable manufacturer or applicable GPO has received and acknowledged an initiated dispute.
- **Resolved No Change**: Indicates that the applicable manufacturer or applicable GPO and the physician, NPP, teaching hospital, or principal investigator resolved the dispute in accordance with the guidance in the Final Rule, and no changes were made to the disputed record.
- **Resolved:** Indicates that disputed data was updated and then re-submitted and re-attested to by the applicable manufacturer or applicable GPO.
- **Withdrawn**: Indicates that the dispute on a record is no longer needed by a covered recipient and that it has been withdrawn.

Records submitted during the submission period may be unavailable for review and dispute for one of the following reasons:

- The record was deleted. A deleted record can only be viewed under the “Deleted and In Progress Records” tab and cannot be disputed. For deleted records, only the record information will display. Disputes associated with the record will not be available once the record has been deleted.
- A record undergoing editing by its reporting entity can only be viewed under the “Deleted and In Progress Records” tab and cannot be disputed. Records undergoing editing will display all the dispute statuses and dispute details (where available).

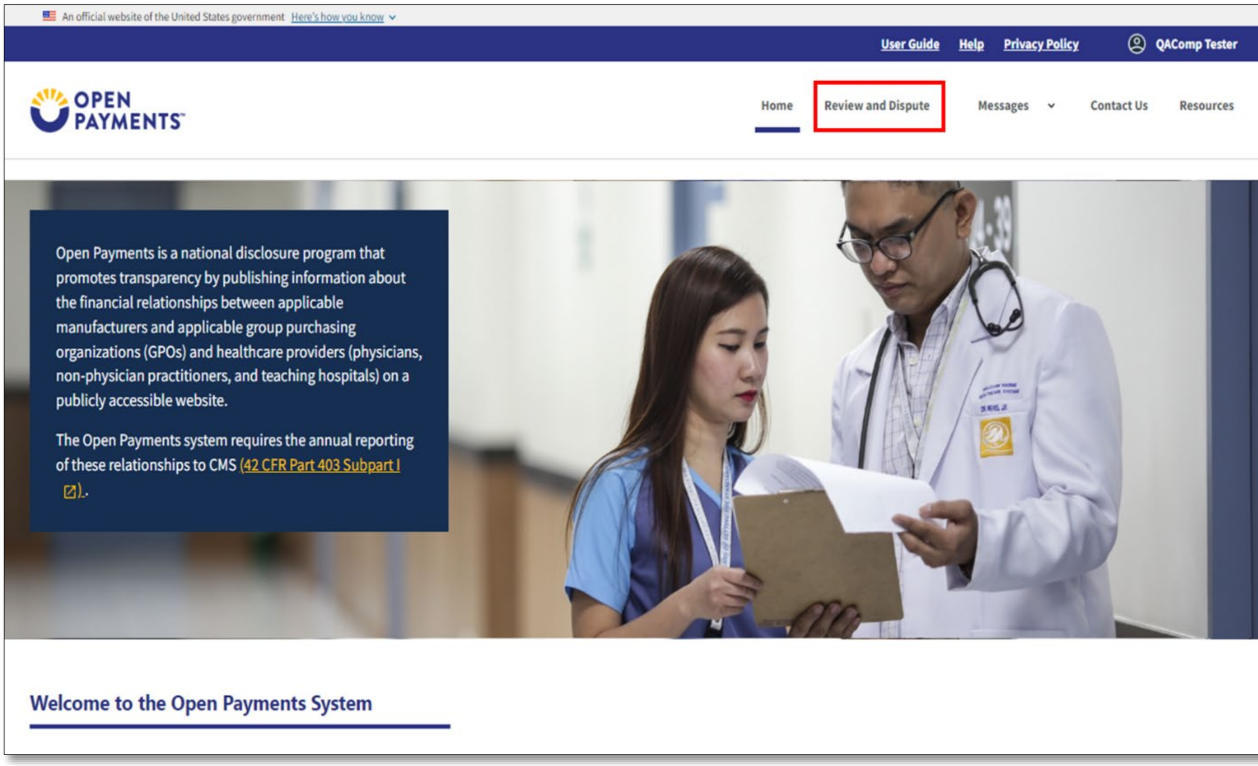
Section 4.2: Reviewing Records

Physicians, NPPs, teaching hospitals, and principal investigators that have registered with the Open Payments system may review all payments, other transfers of value, and physician ownership or investment interests submitted about them by an applicable manufacturer or applicable GPO.

A step-by-step walkthrough for reviewing records follows.

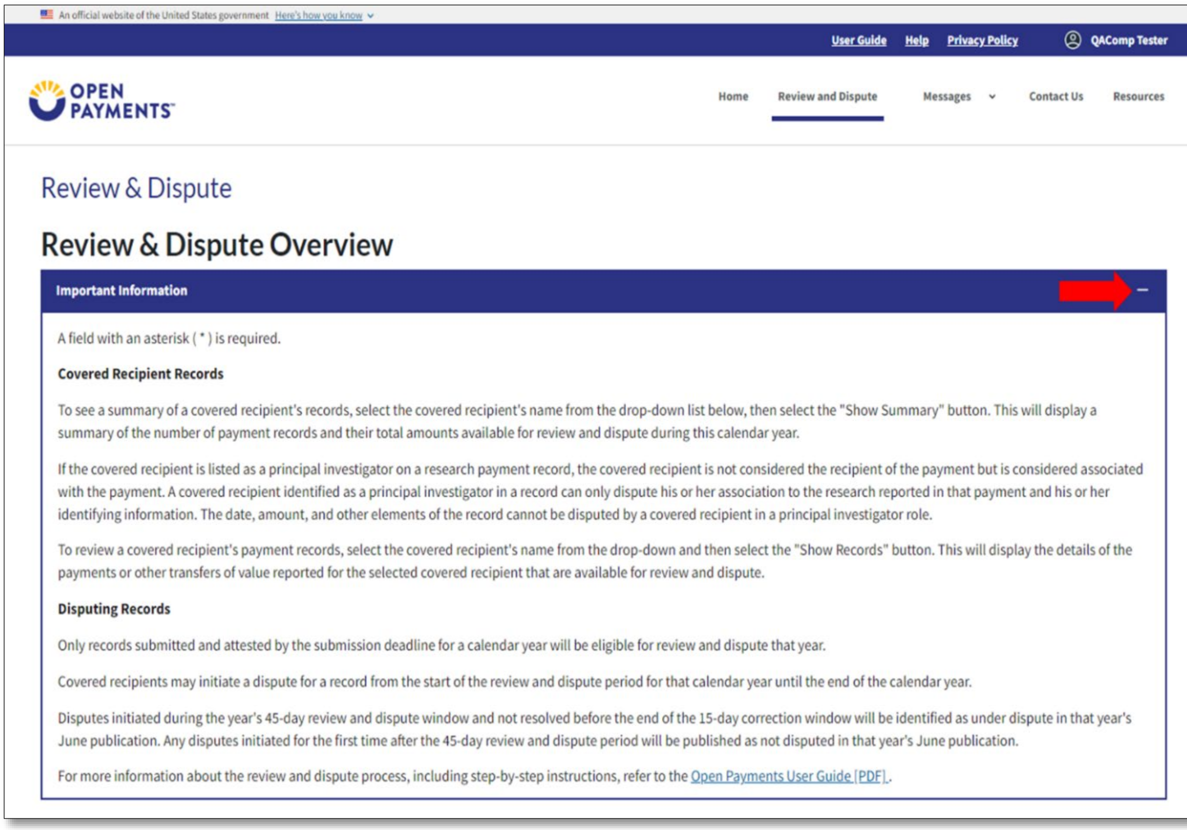
Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select the **Review and Dispute** tab on the menu bar.

Figure 173: Open Payments Home Page: Review and Dispute Tab



Step 2: On the "Review and Dispute Overview" page, please review the instructions in the expanded "Important Information" section.

Figure 174: Review and Dispute Overview Page: Important Information



Step 3: In the "Select A Covered Recipient" drop down menu, select the covered recipient whose records are to be reviewed. Select the **Show Summary** button to bring up the Summary of Payment Records for the covered recipient chosen.

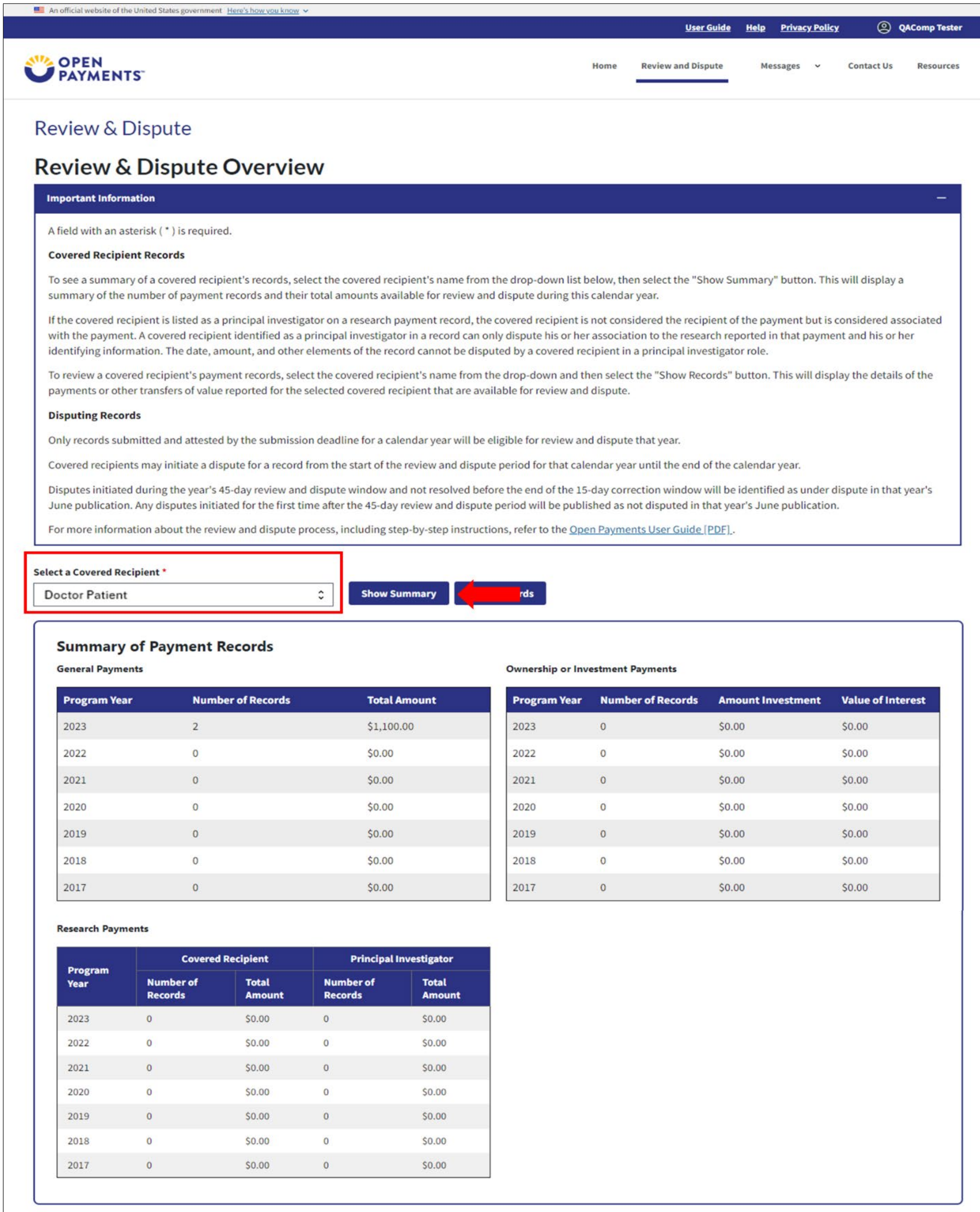
If the name of the Covered Recipient is not populating in the "Select A Covered Recipient" drop down menu, he or she is in a "Failed Vetting" status and will need to correct identifying information inputted in their Open Payments profile to successfully vet.

The Summary of Payment Records displays the total number of records available for review and dispute and the total dollar amount for those records. The totals are grouped by program year and payment category.

For physicians and NPPs, the research payment category totals are split to differentiate between the records in which the physician and/or the NPP is identified as the covered recipient and the records in which the physician and/or the NPP is identified a principal investigator.

Note that teaching hospital and NPP summaries do not include an Ownership/Investment section, as that payment category is not applicable to them.

Figure 175: Review and Dispute Overview Page: Review Summary Button



An official website of the United States government Here's how you know

User Guide Help Privacy Policy QAComp Tester

OPEN PAYMENTS

Home | Review and Dispute | Messages | Contact Us | Resources

Review & Dispute

Review & Dispute Overview

Important Information

A field with an asterisk (*) is required.

Covered Recipient Records

To see a summary of a covered recipient's records, select the covered recipient's name from the drop-down list below, then select the "Show Summary" button. This will display a summary of the number of payment records and their total amounts available for review and dispute during this calendar year.

If the covered recipient is listed as a principal investigator on a research payment record, the covered recipient is not considered the recipient of the payment but is considered associated with the payment. A covered recipient identified as a principal investigator in a record can only dispute his or her association to the research reported in that payment and his or her identifying information. The date, amount, and other elements of the record cannot be disputed by a covered recipient in a principal investigator role.

To review a covered recipient's payment records, select the covered recipient's name from the drop-down and then select the "Show Records" button. This will display the details of the payments or other transfers of value reported for the selected covered recipient that are available for review and dispute.

Disputing Records

Only records submitted and attested by the submission deadline for a calendar year will be eligible for review and dispute that year.

Covered recipients may initiate a dispute for a record from the start of the review and dispute period for that calendar year until the end of the calendar year.

Disputes initiated during the year's 45-day review and dispute window and not resolved before the end of the 15-day correction window will be identified as under dispute in that year's June publication. Any disputes initiated for the first time after the 45-day review and dispute period will be published as not disputed in that year's June publication.

For more information about the review and dispute process, including step-by-step instructions, refer to the Open Payments User Guide [PDF].

Select a Covered Recipient *

Doctor Patient

Show Summary | rds

Summary of Payment Records

General Payments

Program Year	Number of Records	Total Amount
2023	2	$1,100.00
2022	0	$0.00
2021	0	$0.00
2020	0	$0.00
2019	0	$0.00
2018	0	$0.00
2017	0	$0.00

Ownership or Investment Payments

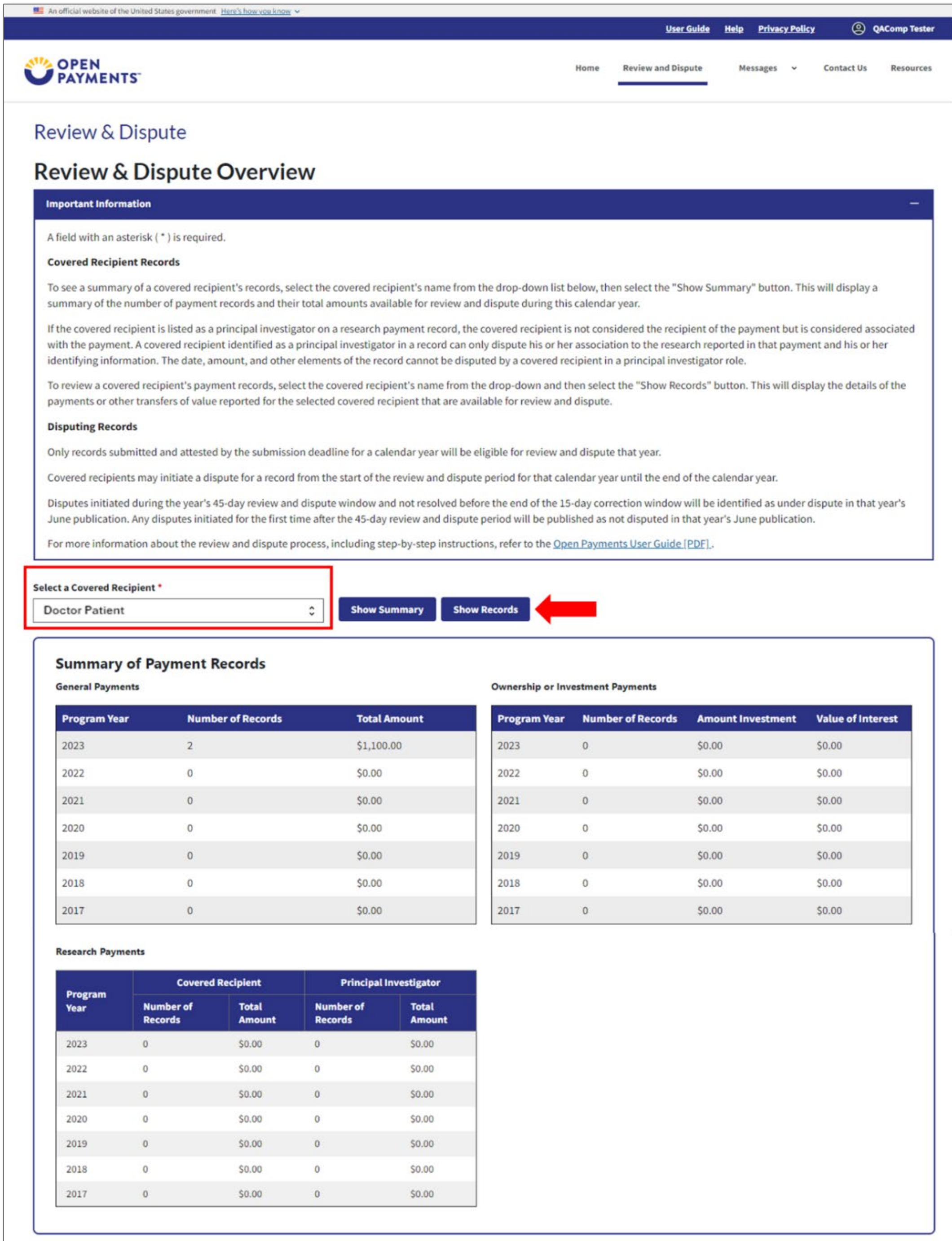
Program Year	Number of Records	Amount Investment	Value of Interest
2023	0	$0.00	$0.00
2022	0	$0.00	$0.00
2021	0	$0.00	$0.00
2020	0	$0.00	$0.00
2019	0	$0.00	$0.00
2018	0	$0.00	$0.00
2017	0	$0.00	$0.00

Research Payments

Program Year	Covered Recipient		Principal Investigator	
	Number of Records	Total Amount	Number of Records	Total Amount
2023	0	$0.00	0	$0.00
2022	0	$0.00	0	$0.00
2021	0	$0.00	0	$0.00
2020	0	$0.00	0	$0.00
2019	0	$0.00	0	$0.00
2018	0	$0.00	0	$0.00
2017	0	$0.00	0	$0.00

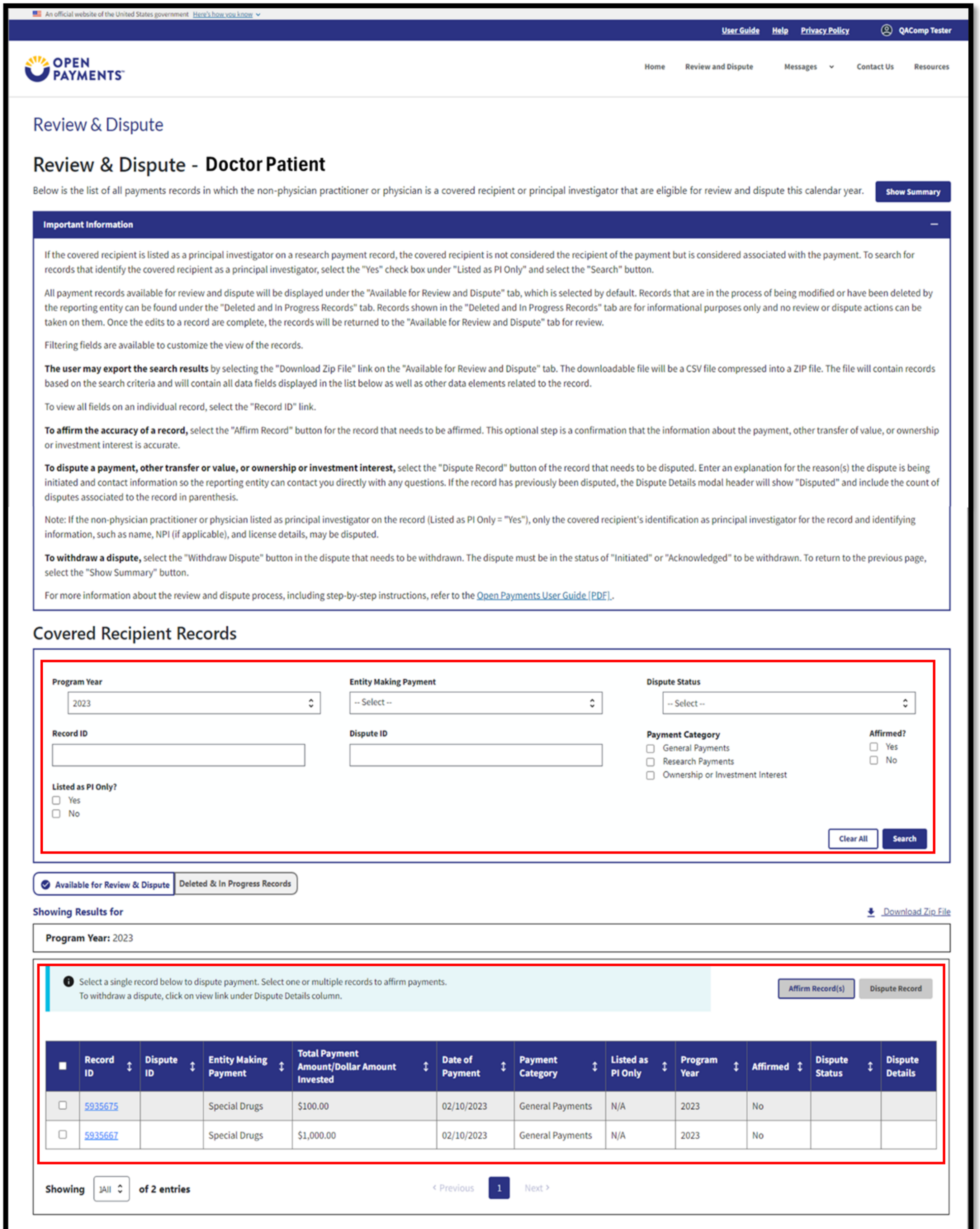
<u>Step 4:</u> Select the **Show Records** button to navigate to the “Review and Dispute” page for the covered recipient.

Figure 176: Review and Dispute Overview Page: Review Records Button



Step 5: The "Review and Dispute" page displays all available records for review. Users can use the available filtering tool on the page to narrow search results as desired.

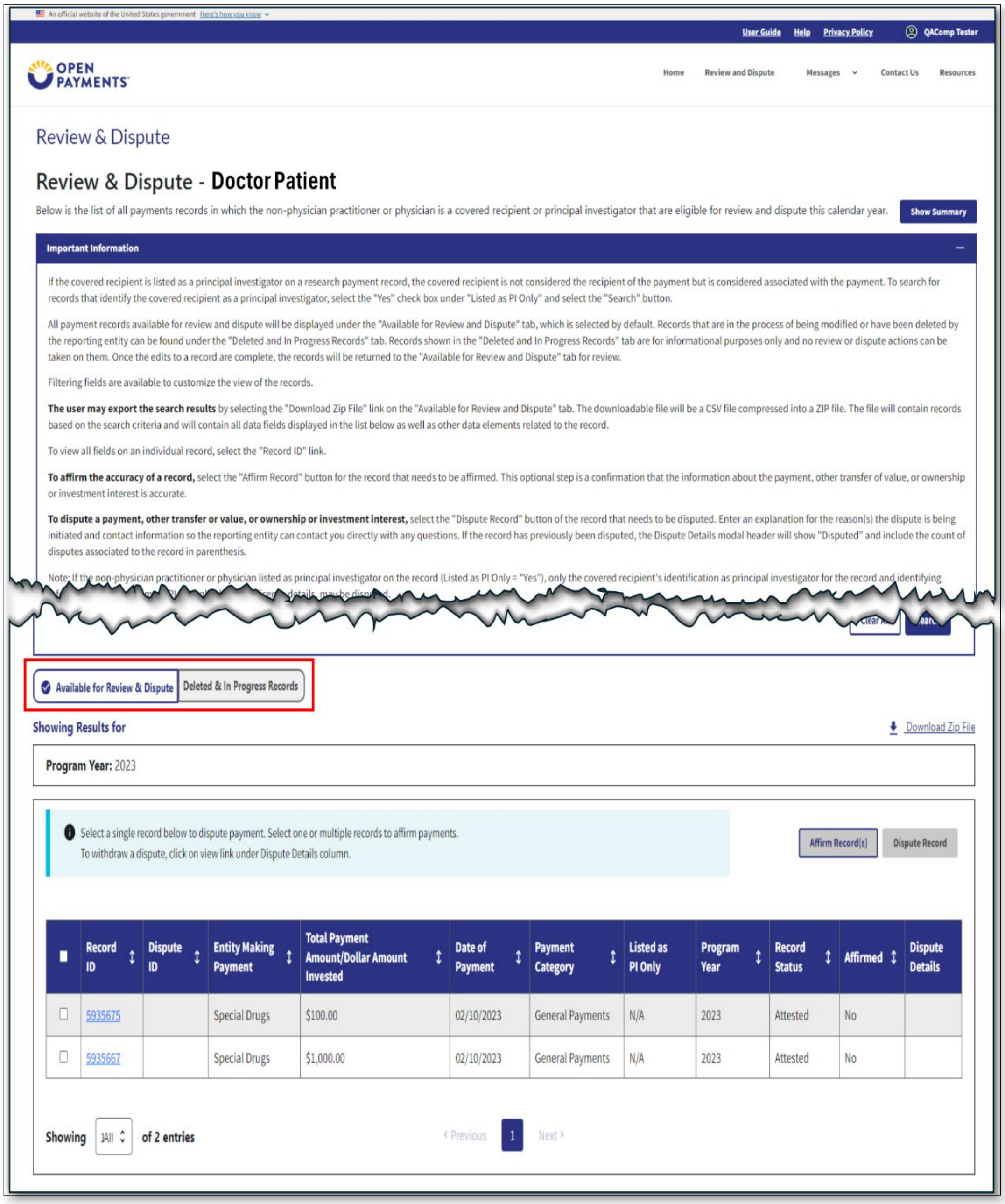
Figure 177: Review and Dispute Page: Covered Recipient Records



<u>Step 5a:</u> There are two buttons that may contain information related to the disputes attributed to the covered recipient:

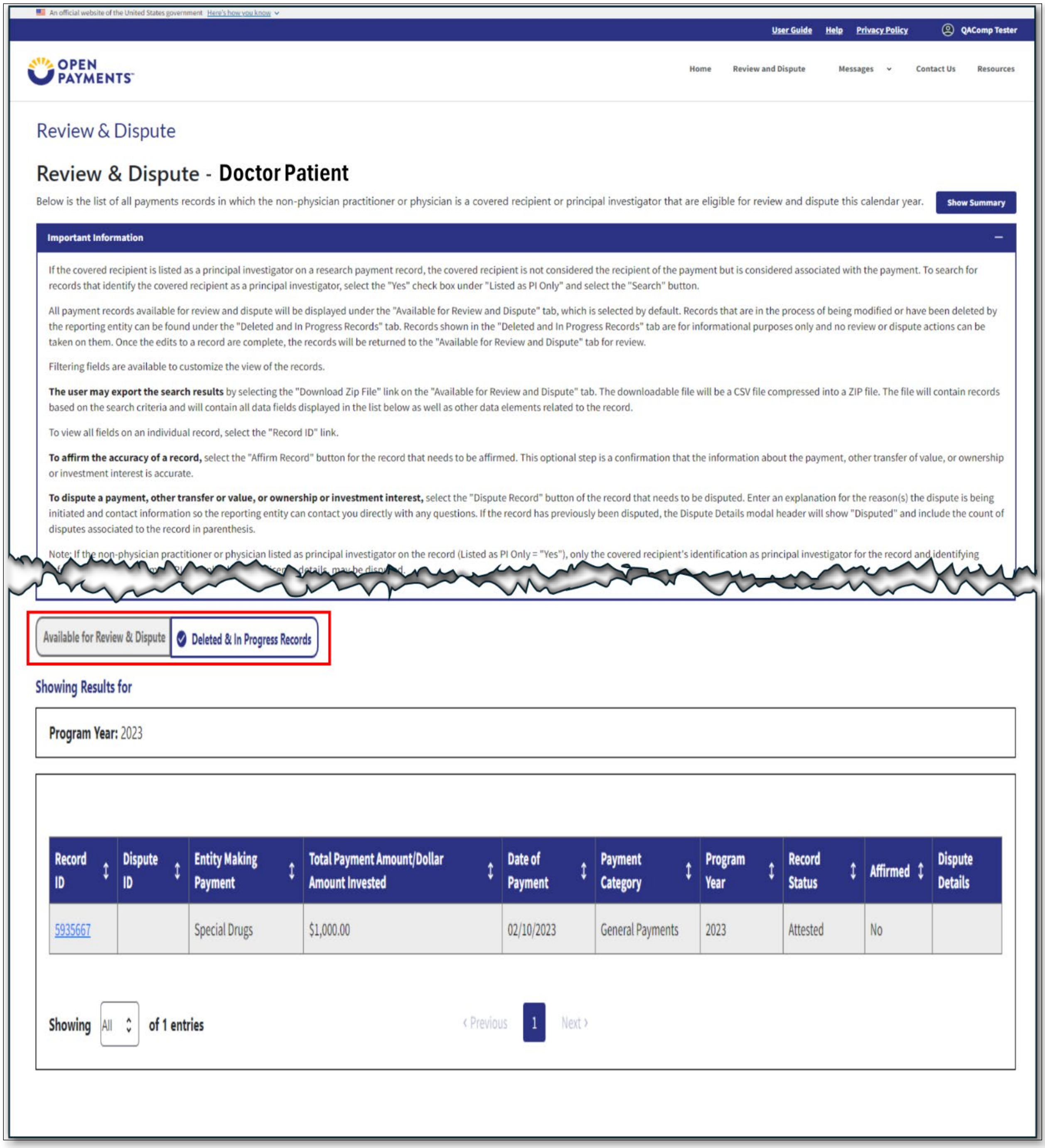
- **Available for Review and Dispute**: This button displays all records in a data table that are currently available for review and dispute. All records in this table are in "Attested" status.

Figure 178: Review and Dispute Page: Available for Review and Dispute Button



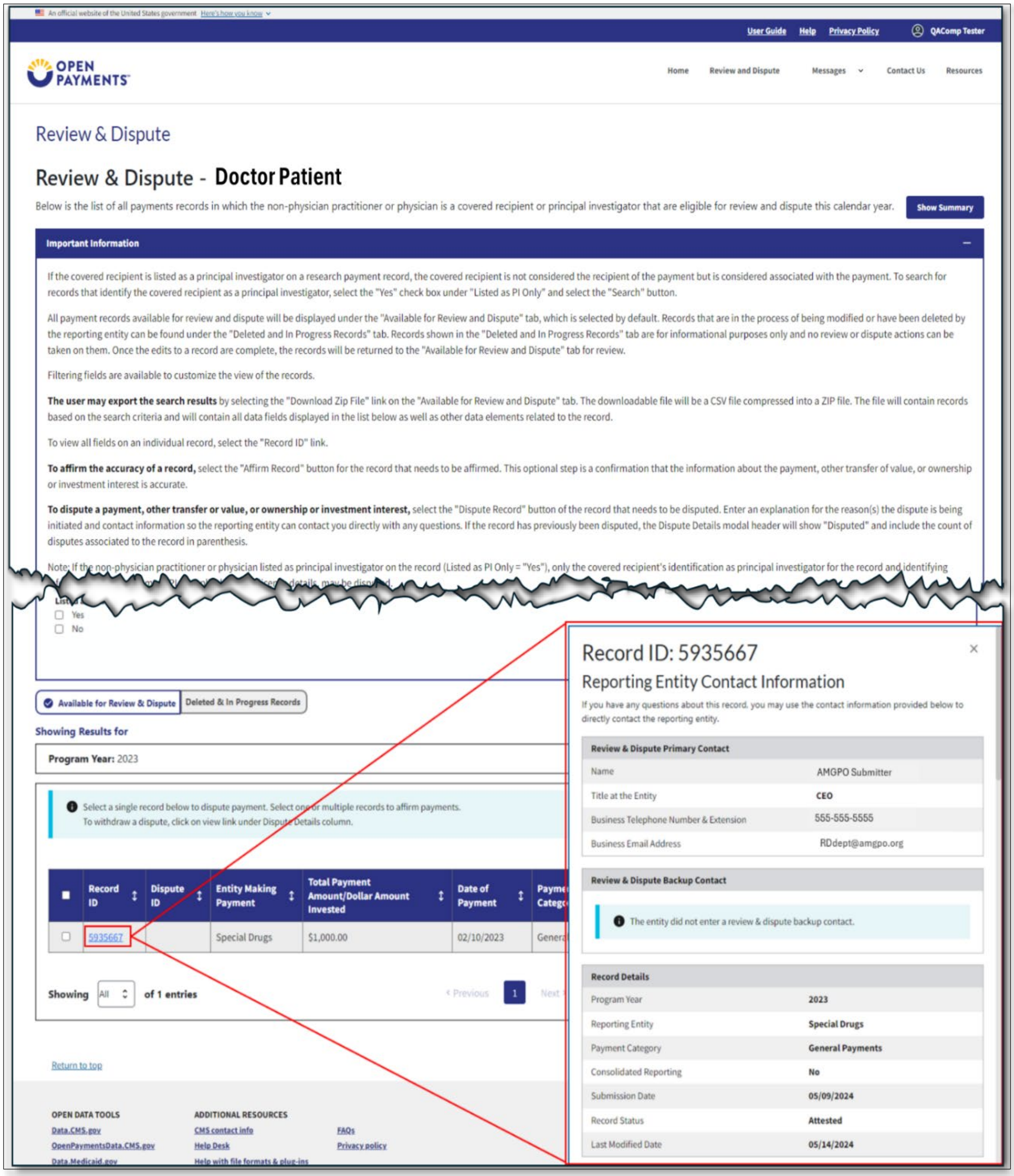
- **Deleted and In Progress Records**: This button displays all records that were available for review and dispute in the current calendar year but were deleted or are in the process of being edited by the reporting entity and are not available for review. Review and dispute actions will not be allowed for these records as they can only be viewed.

Figure 179: Review and Dispute Page: Deleted and in Progress Records Button



Step 6: Records on the "Review and Dispute" page are displayed in a table format. To see all a record's information, select the hyperlinked number under the "Record ID" column. This will open the "Record ID" page for that record, which contains the record's details, general information, and reporting entity Review and Dispute contact information. The Record Details page also displays any "Active Disputes," if available.

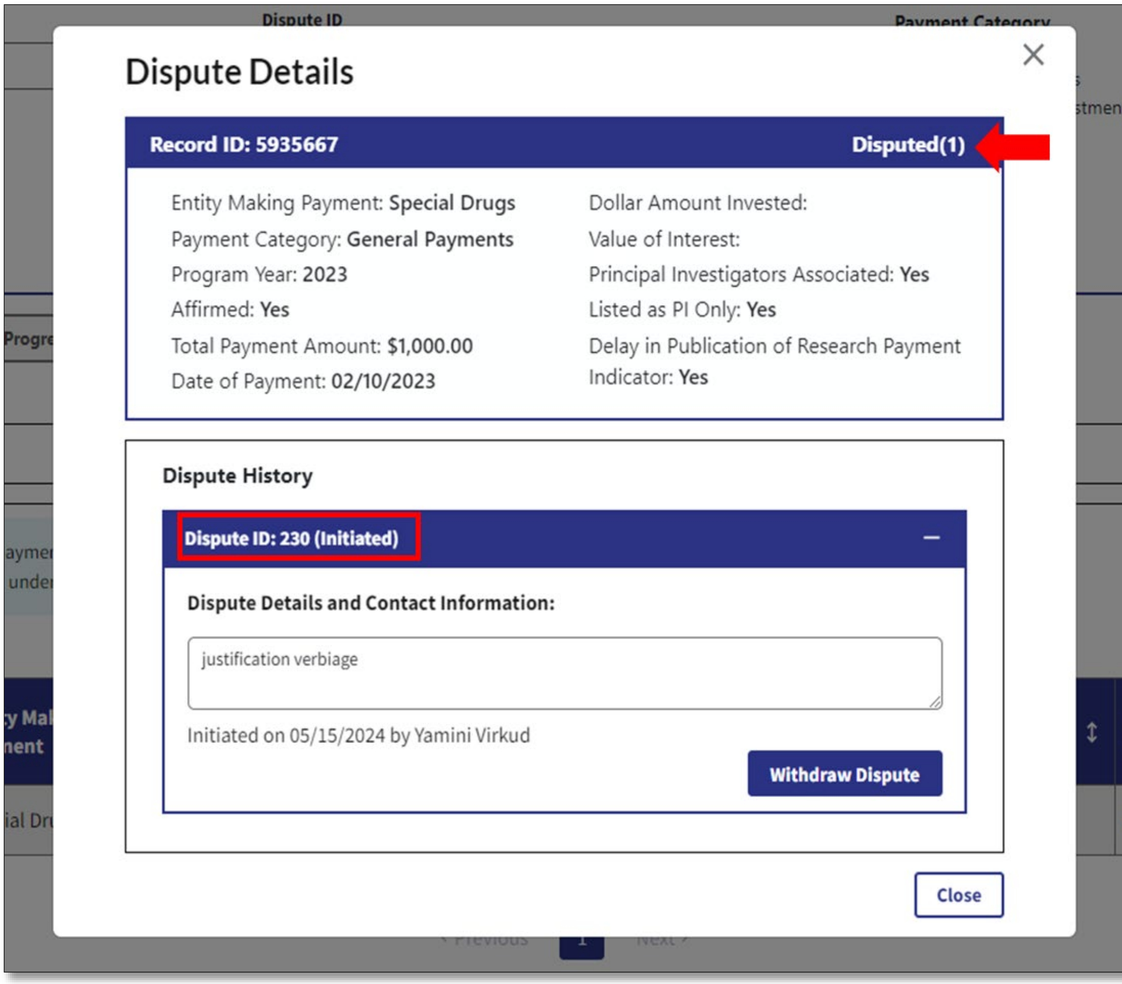
Figure 180: Review and Dispute Page: Record ID Pages



Step 7: Select the “View” link in the “Dispute Details” column to view all initiated dispute(s) associated with the record. Each dispute is displayed in the Dispute Details window and listed in descending order of Dispute ID. The record header also displays the total number of disputes for the record.

Figure 181: Review and Dispute Page: Dispute Details View Hyperlink

Figure 182: Review and Dispute Page: Dispute Details View Window



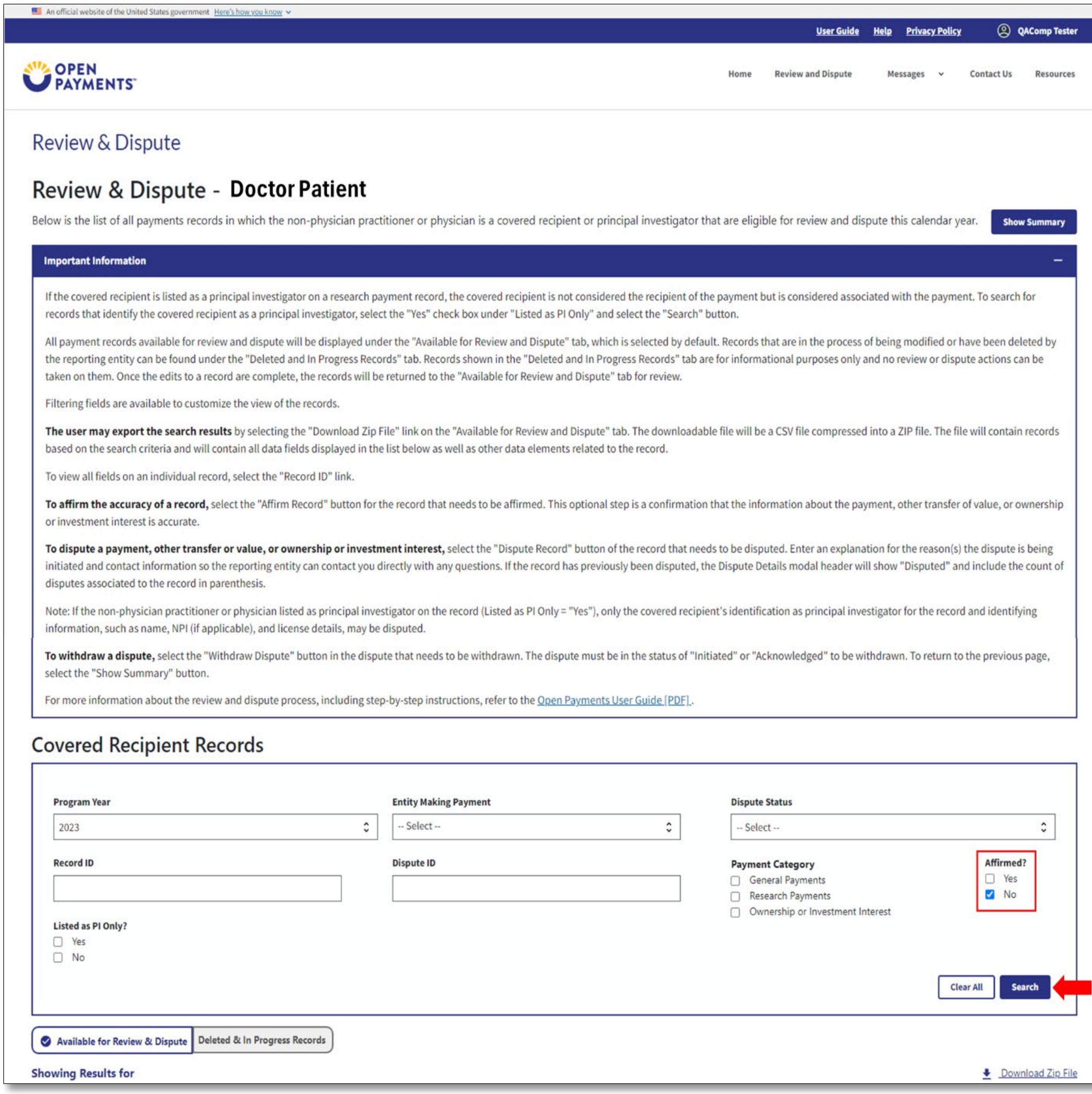
Section 4.3: Affirming Records

Records that have been reviewed and determined to be accurate can be affirmed by the physician, NPP, teaching hospital, or principal investigator in the Open Payments system. Affirmation is not a required action. Records that have not been affirmed will still be included in the data publication. You may initiate disputes on records that have been previously affirmed if you determine that the record contains an error.

To affirm a record, follow the steps below.

Step 1: On the "Review and Dispute" page, use the filtering tools to help find the records to be affirmed, by selecting the **No** checkbox for the "Affirmed?" filter, and then select the **Search** button. All records available for affirmation will be under the **Available for Review and Dispute** tab.

Figure 183: Review and Dispute Page: Search Filter for Affirmed Records

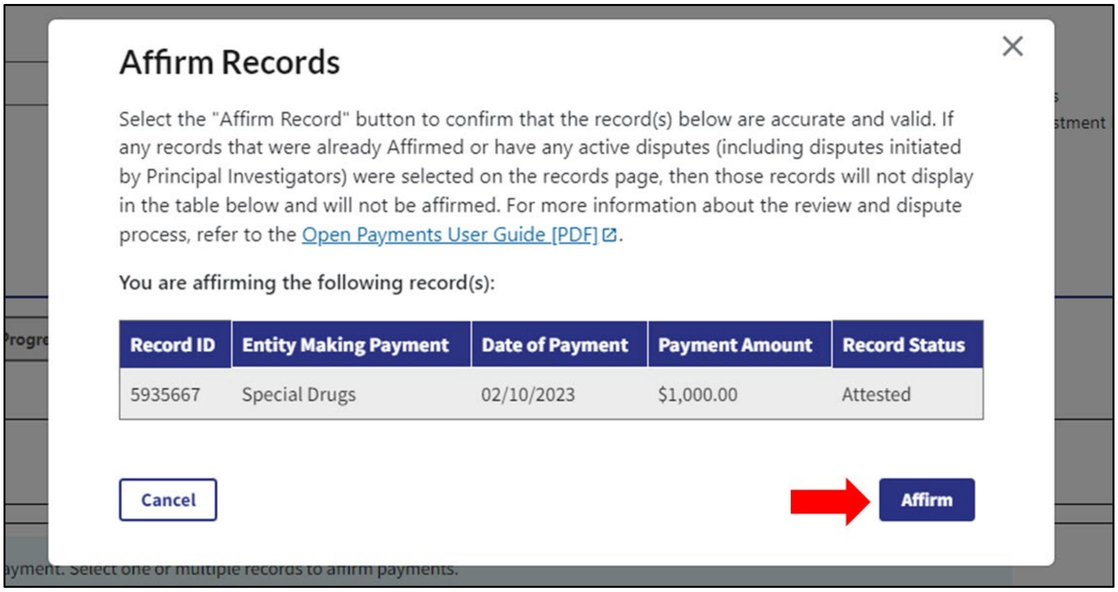


<u>Step 2</u>: Select the checkbox next to the record you want to affirm, and then select the **Affirm Record(s)** button to open the "Affirm Records" window.

Figure 184: Review and Dispute Page: Affirm Record(s) Button

<u>Step 3:</u> Review the information displayed on the "Affirm Records" window and select the **Affirm** button to affirm the record.

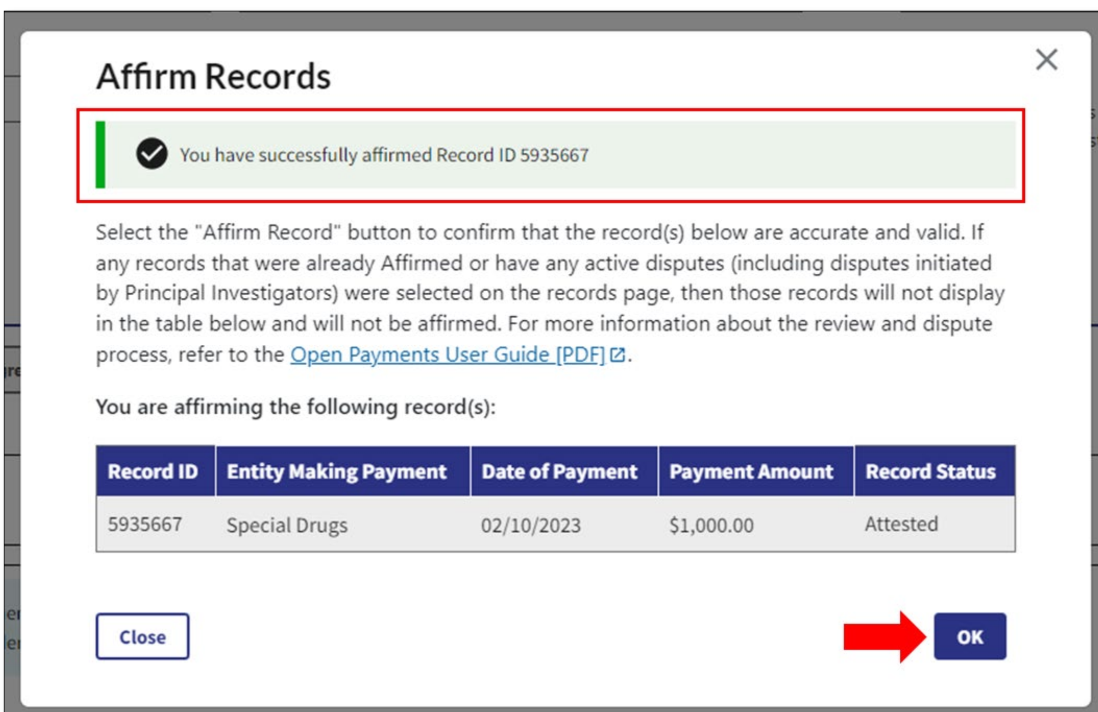
Figure 185: Affirm Records Window: Affirm Button



Step 4: A confirmation message is displayed that the record has been successfully affirmed. Select the **OK** button to exit out the window and return to the “Review and Dispute page” to perform any additional actions on other records, if applicable.

Once a record has been affirmed, the “Affirm Record” button will be grayed out.

Figure 186: Affirm Record Confirmation Message

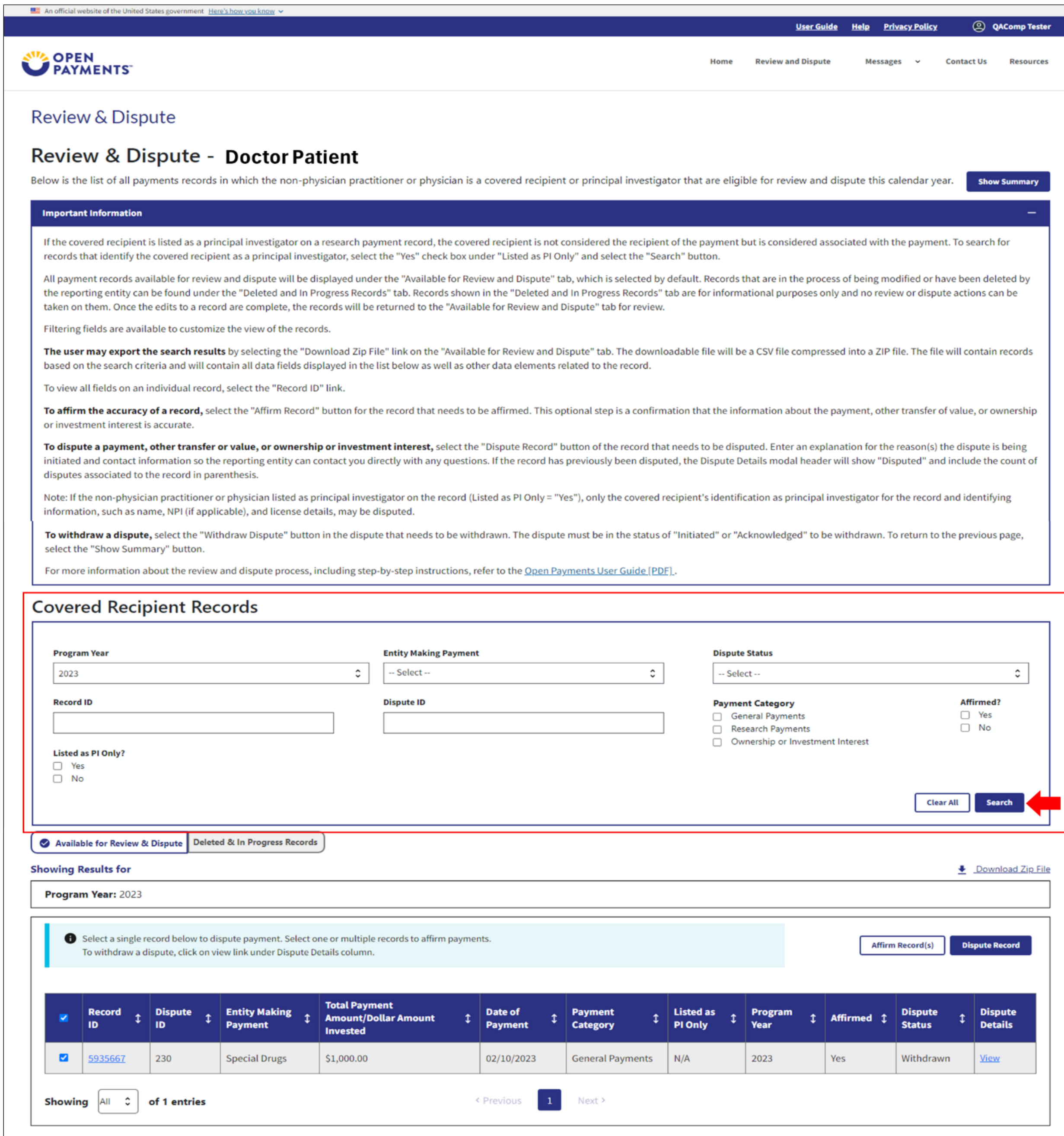


Section 4.4: Disputing Records

Records can only be disputed individually. To initiate a dispute on a record, follow the steps below.

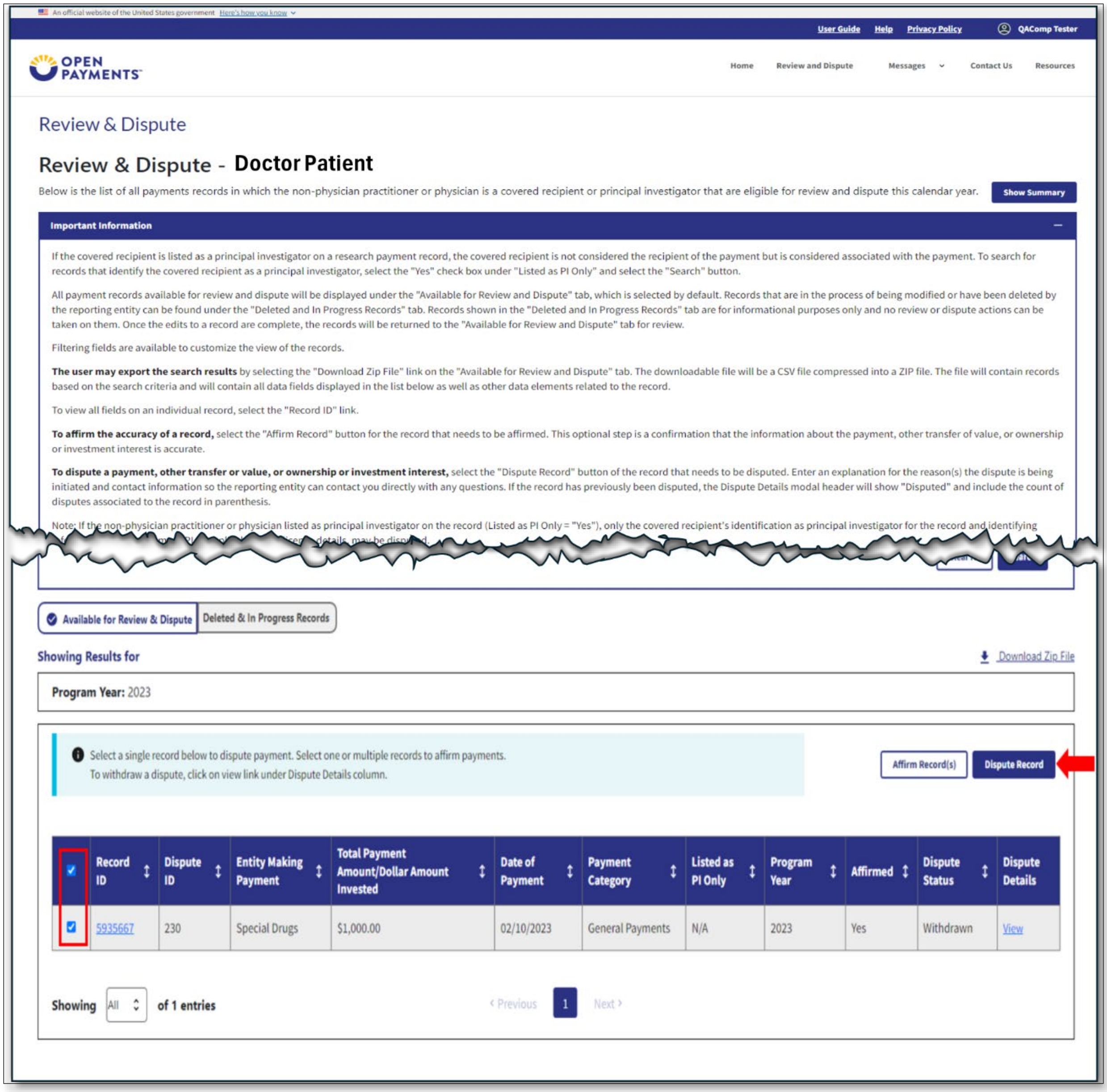
Step 1: On the "Review and Dispute" page, use the filtering tool to help find the records to be disputed, (i.e., search by Program Year, Entity Making Payment, Payment Category) then select the **Search** button. All records available for dispute will be under the **Available for Review and Dispute** tab.

Figure 187: Review and Dispute Page: Record Filtering Tool



Step 2: Check the box next to the Record ID and select the **Dispute Record** button to dispute the record.

Figure 188: Review and Dispute Page: Dispute Record Button



When the user selects the **Dispute Record** button to initiate a dispute on a record that already has an active dispute (Dispute Status is “Initiated” or “Acknowledged”), the system will display a pop-up window identifying that a dispute has already been initiated against the record with the following messages based on the scenarios explained below:

- The covered recipient (not principal investigator), covered recipient’s Authorized Representative (AR), or Teaching Hospital’s Authorized Representative (AR)/Authorized Official (AO) has ACTIVE (Dispute Status is “Initiated” or “Acknowledged”) disputes against the record. The Record ID header displays "Disputed (# of disputes)" and the following pop-up message is issued when the user selects the "Dispute Record" button:

> The selected payment record has a dispute that is currently in progress.
> Select Yes to continue with your dispute request.
> Select No to cancel your dispute request.

- The covered recipient is a principal investigator or AR for a covered recipient listed as principal investigator and has NO ACTIVE disputes against the record. The Record ID header only displays the Record ID, and the following pop-up message is issued when the user selects the **Dispute Record** button:

  > The selected payment record has the covered recipient listed as a principal investigator. A principal investigator is not considered a recipient of a payment but rather is considered associated with the payment.
  > As a result, the dispute can be initiated for the covered recipient's association with the selected research payment(s) but not the date, amount, or other values it contains.
  > Select Yes to continue with your dispute request.
  > Select No to cancel your dispute request.

- The covered recipient is a principal investigator or AR for a covered recipient listed as a principal investigator and has disputes in status other than "Initiated" or "Acknowledged" against that record. The Record ID header displays "Disputed (# of disputes)" and the following pop-up message is issued when the user selects the **Dispute Record** button:

  > The selected payment record has the covered recipient listed as a principal investigator. A principal investigator is not considered a recipient of a payment but rather is considered associated with the payment.
  > As a result, the dispute can be initiated for the covered recipient's association with the selected research payment(s) but not the date, amount, or other values it contains.
  > Select Yes to continue with your dispute request.
  > Select No to cancel your dispute request.

- The covered recipient is a principal investigator or AR for a covered recipient listed as a principal investigator and has ACTIVE ("Initiated" or "Acknowledged") disputes against the record. The Record ID header displays "Disputed (# of disputes)" and the following pop-up message is issued when the user selects the **Dispute Record** button:

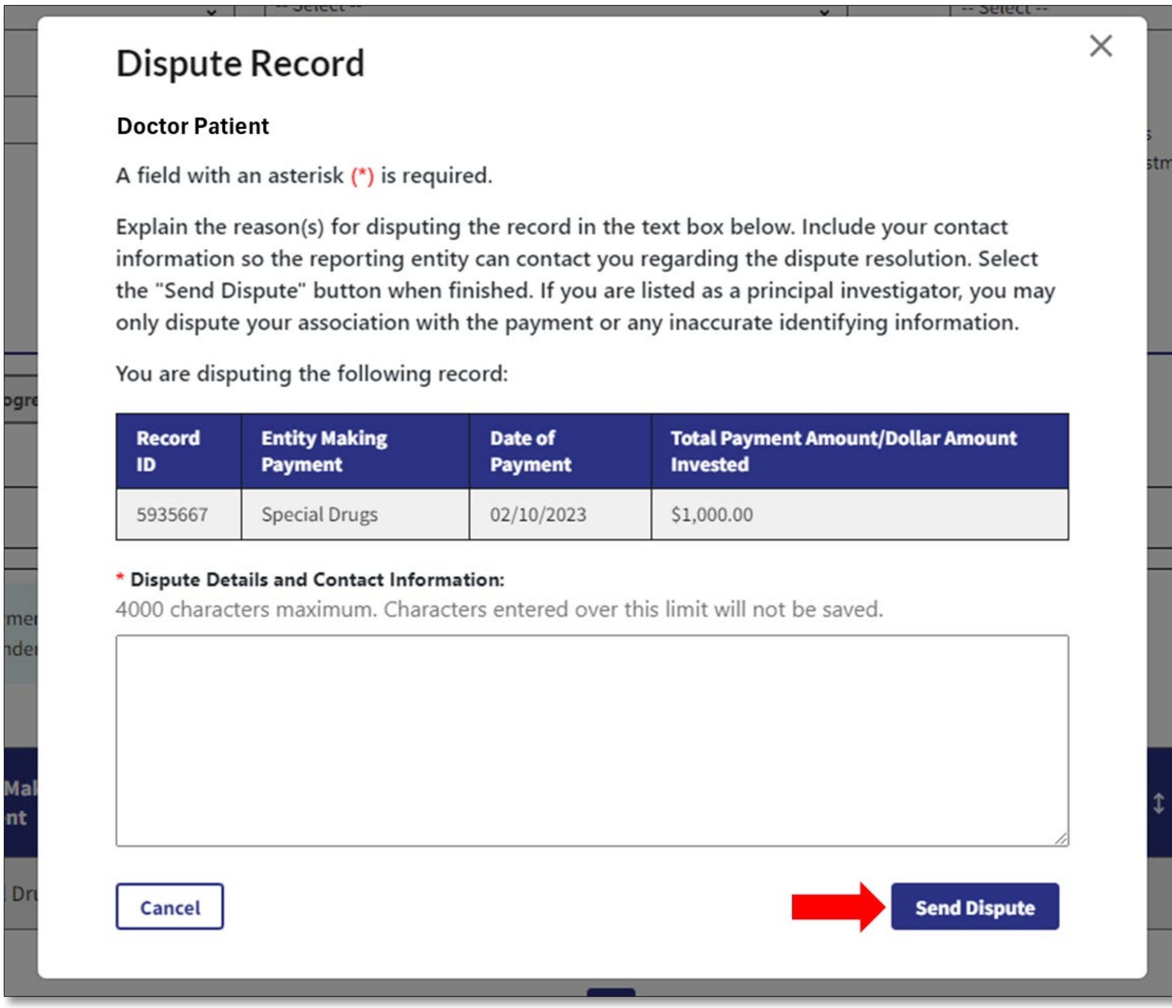
  > The selected payment record has a dispute that is currently in progress. Note that the covered recipient is listed as a principal investigator in this record. As a result, the dispute can be initiated for the covered recipient's association with the selected research payment(s) but not the date, amount, or other values it contains.
  > Select **Yes** to continue with your dispute request.
  > Select **No** to cancel your dispute request.

Step 3: Review the information on the "Dispute Record" window. Enter a detailed reason for why the dispute has been initiated and select the **Send Dispute** button.

Note it is recommended that the "Dispute Details and Contact Information" text includes direct contact information, such as an email address and/or phone number, within the text box, to facilitate the resolution of the dispute in a timely manner.

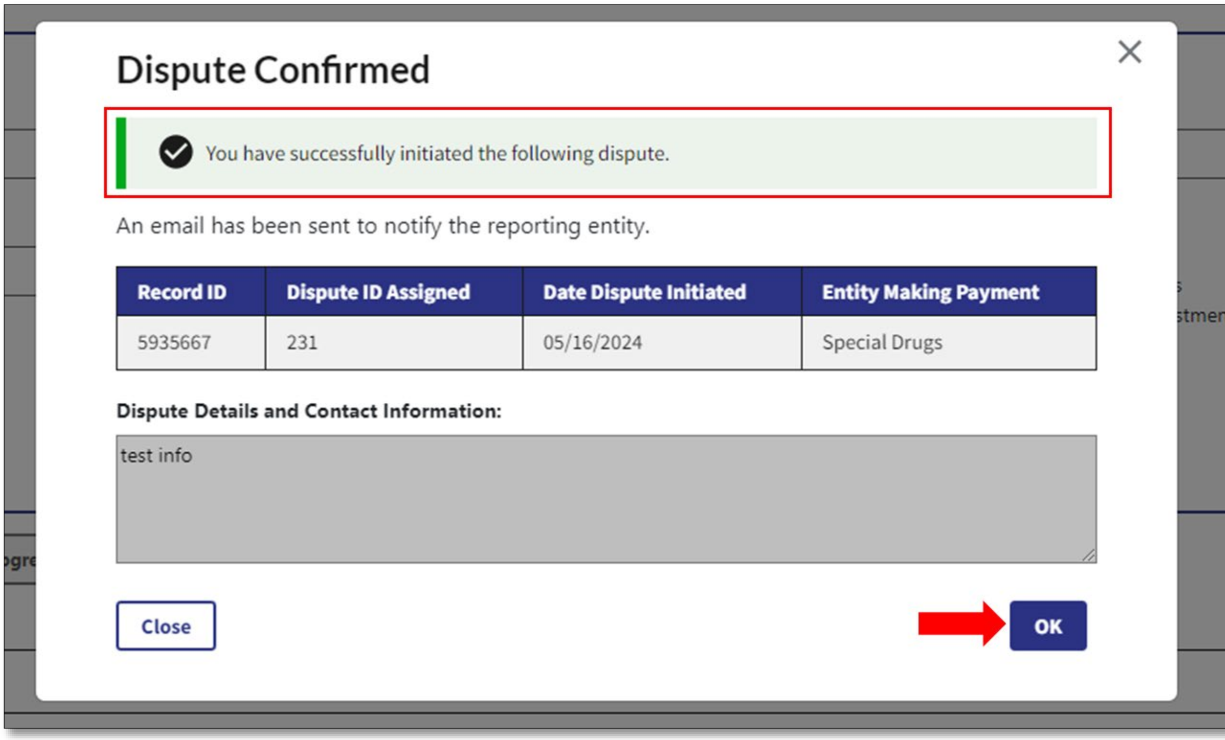
The Open Payments system will send an email to the reporting entity to notify them that a dispute has been initiated. The email will include the contents of the "Dispute Details and Contact Information" text box.

Figure 189: Dispute Record Window: Send Dispute Button



Step 4: The "Dispute Confirmed" window displays a confirmation message that the dispute has been successfully initiated for that record. Select the **Ok** button to exit out the window and return to the "Review and Dispute" page to perform any additional actions on other records, if applicable.

Figure 190: Dispute Confirmed Window



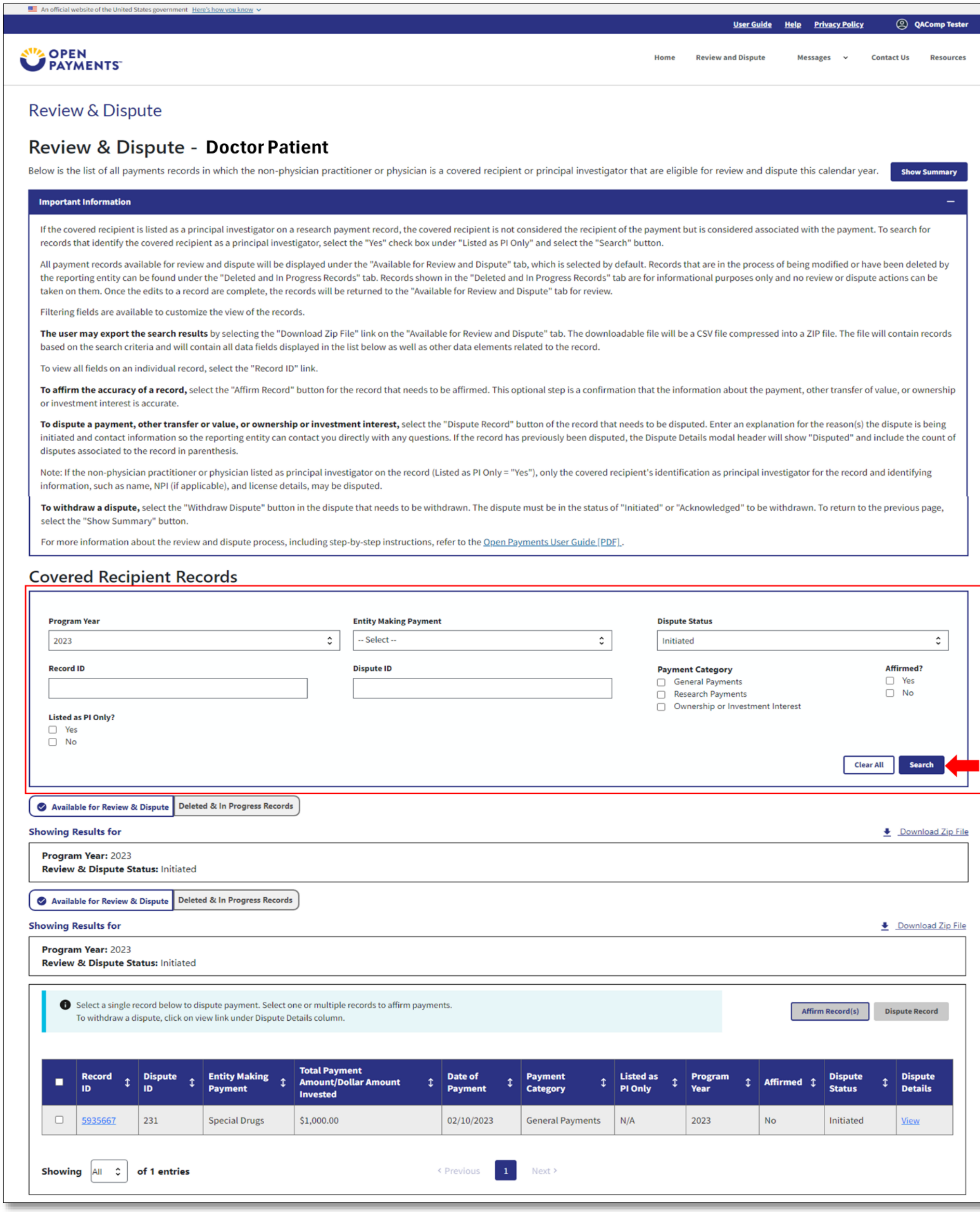
The covered recipient who initiated the dispute will receive an email notification from the Open Payments system if the reporting entity takes any action on the record. Also, the covered recipient can see any records that are undergoing editing by the entity under the **Deleted and In Progress Records** tab. Records under the **Deleted and In Progress Records** tab will be in either “In Progress” or “Deleted” statuses. The records “In Progress” will display under the **Available for Review and Dispute** tab once the entity has re-attested to them.

Section 4.5: Withdrawing Disputes

Only records with a dispute status of “Initiated” and/ or “Acknowledged” can be withdrawn.
To withdraw a dispute on a record, follow these steps.

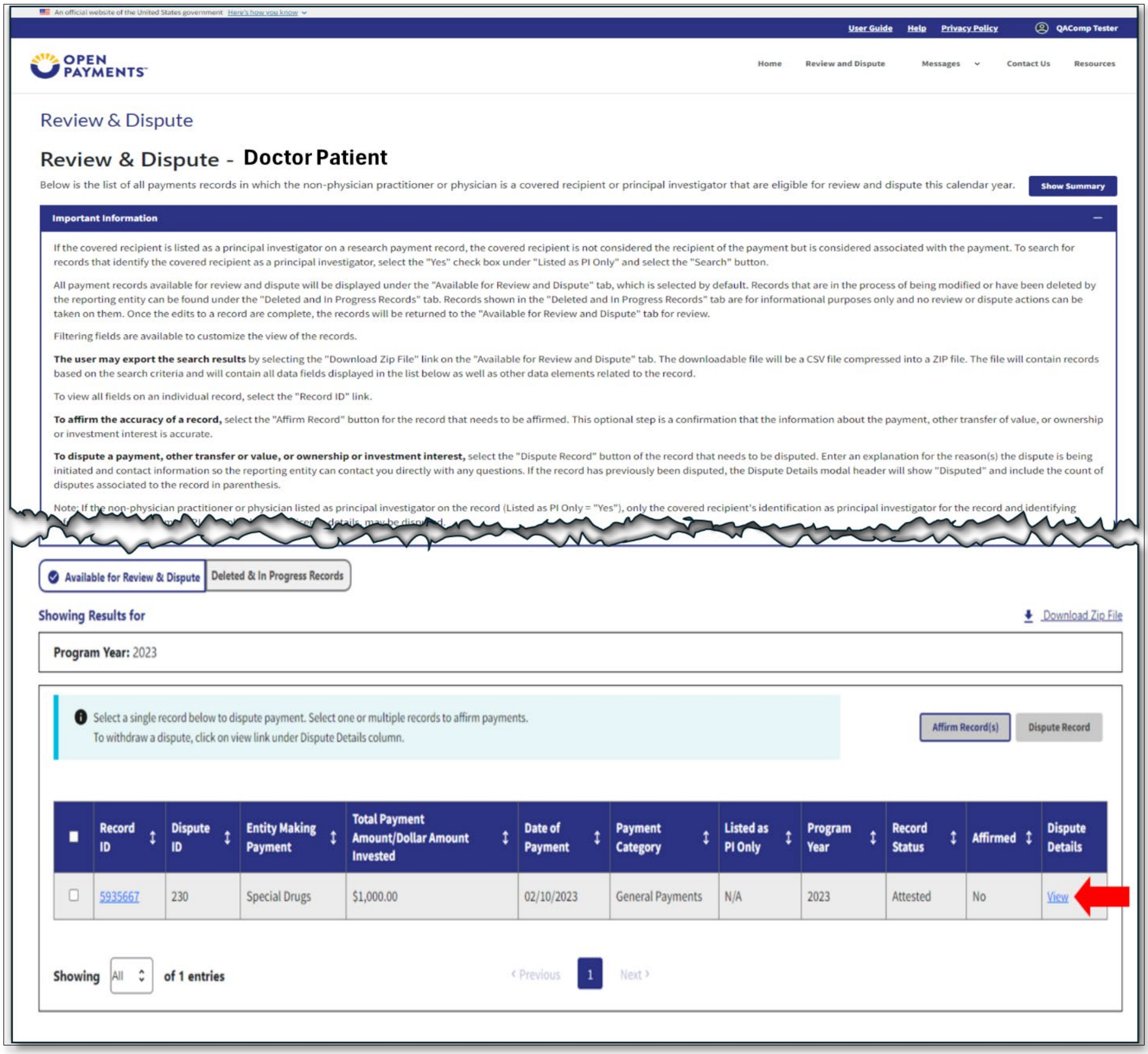
__**Step 1:**__ On the “Review and Dispute” page, use the filtering tool to help find the records to be withdrawn (i.e., search for Dispute Status, Dispute ID, etc.), then select the **Search** button. All records available for withdrawing will be under the **Available for Review and Dispute** tab.

Figure 191: Review and Dispute Page: Record Filtering Tool



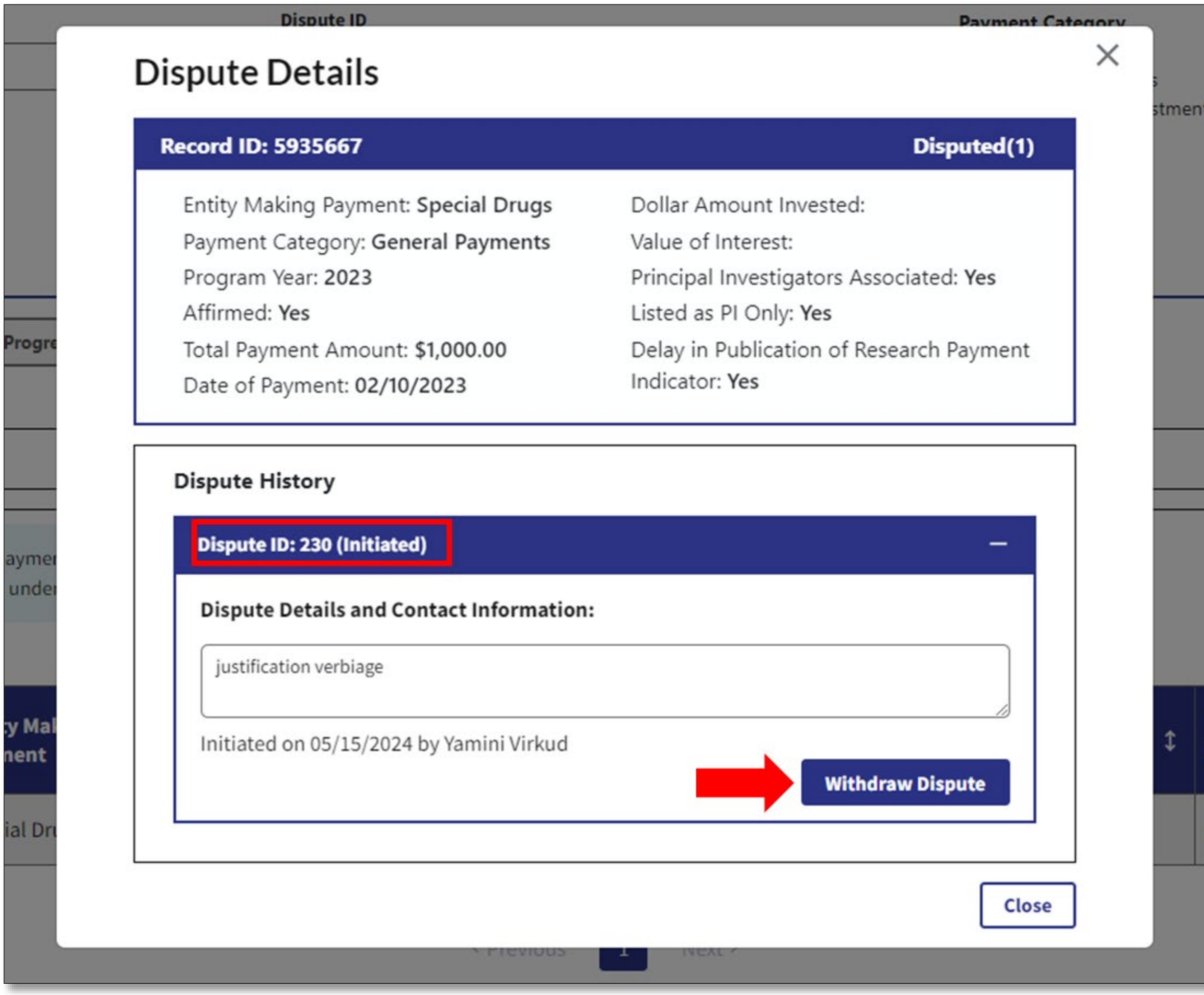
Step 2: Select the "View" link in the "Dispute Details" column to view dispute details for the record with the initiated dispute.

Figure 192: Review and Dispute Page: Dispute Details Column "View" Link



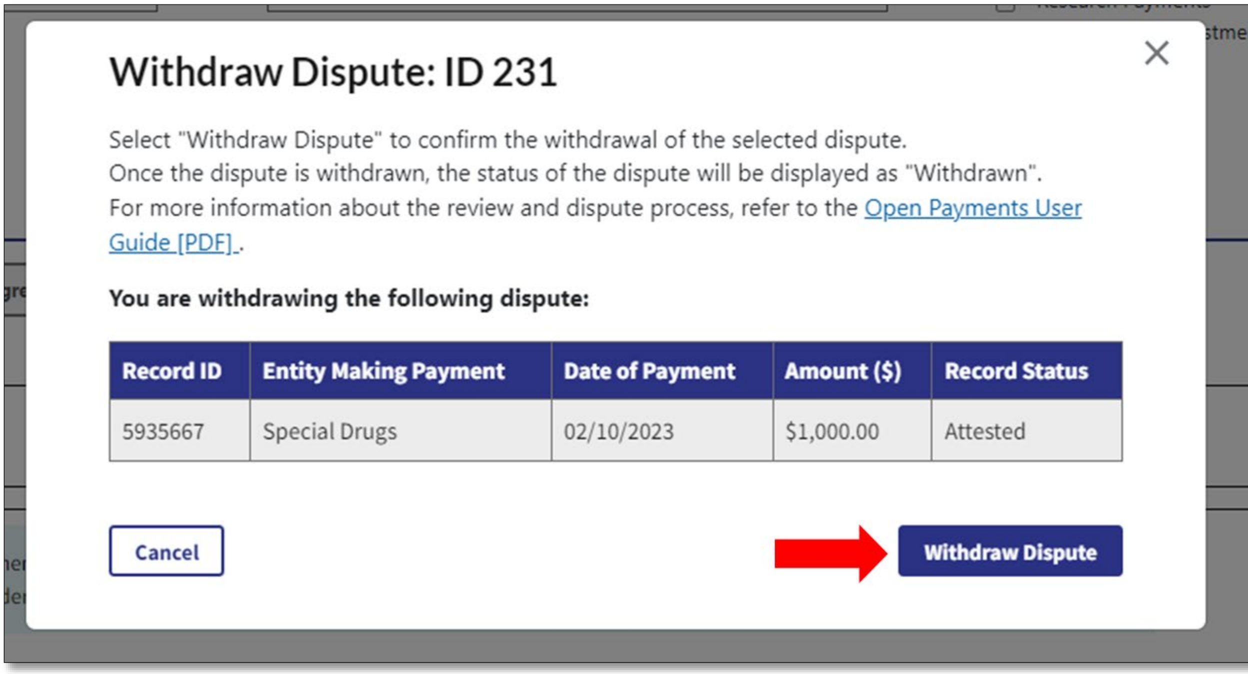
<u>Step 3:</u> Select the "Withdraw Dispute" button in the Dispute Details window.

Figure 193: Dispute Details Window: Withdraw Dispute Button



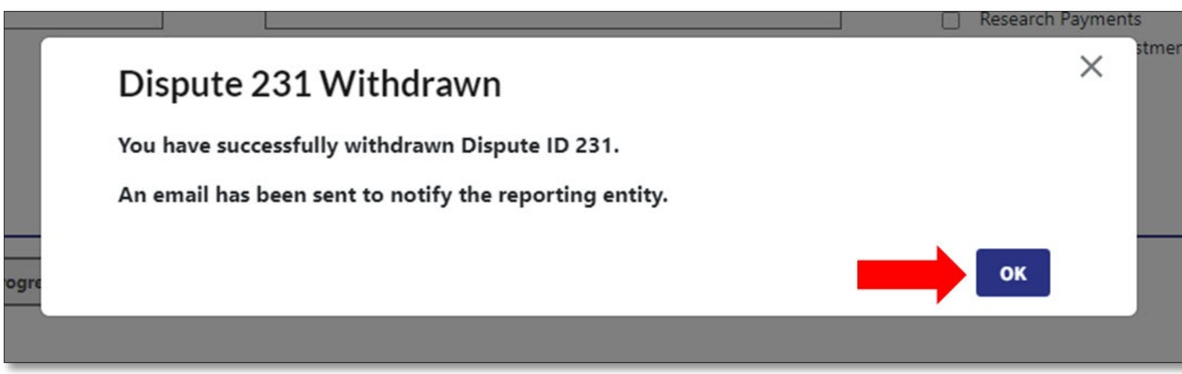
Step 4: Review the information on the "Withdraw Dispute ID" window and select the **Withdraw Dispute** button.

Figure 194: Withdraw Dispute ID: Withdraw Dispute Button



Step 5: A confirmation message is displayed that the dispute has been successfully withdrawn. Select **Ok** button to exit out of the window and return to the "Review and Dispute page" to perform any additional actions on other records, if applicable. An email notification will be sent to the reporting entity informing them the initiated dispute was withdrawn.

Figure 195: Dispute Withdrawn Confirmation Window



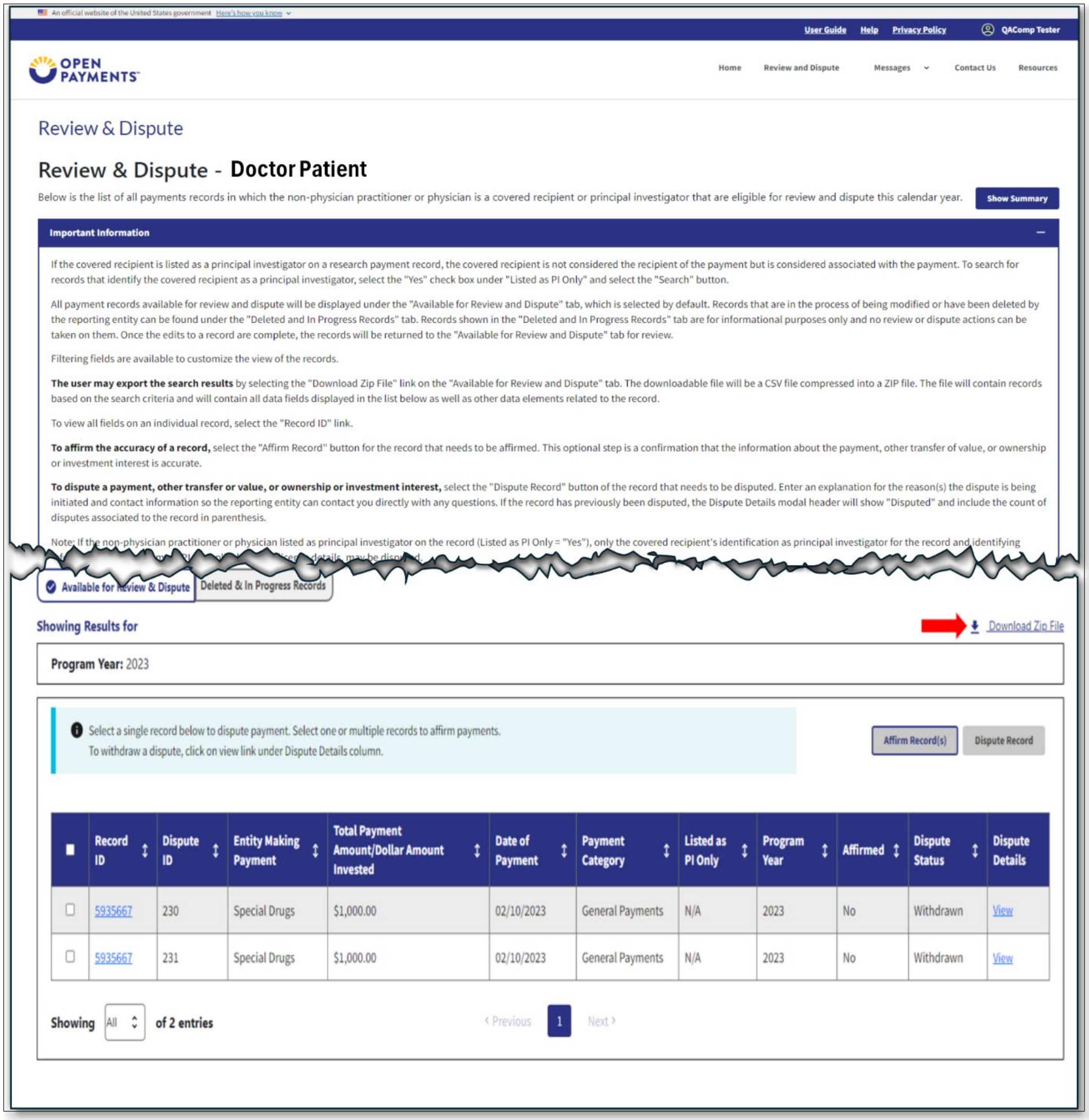
Section 4.6: Exporting Data

Users can download records associated with them by selecting the "Download Zip File" link on the "Review and Dispute" page.

Records are exported into a pipe ("|") delimited CSV format, compressed into a ZIP file. It will contain all data fields displayed in the table and other data elements related to the dispute, including the status of each record's dispute(s), if applicable.

Downloaded data files cannot exceed the acceptable limit of 20,000 records. If your record volume exceeds the record limit, apply filtering criteria to create smaller subsets of records and download them in multiple files.

Figure 196: Review and Dispute Page: Download Zip File Link



Chapter 5: System Messages

This chapter on System Messages provides detailed information on how to search for system generated email messages received by the covered recipient physician or teaching hospital in the past 12 months.

Section 5.1: System Messages

As a Covered Recipient user, you can view system generated messages sent to you within the past 12 months.

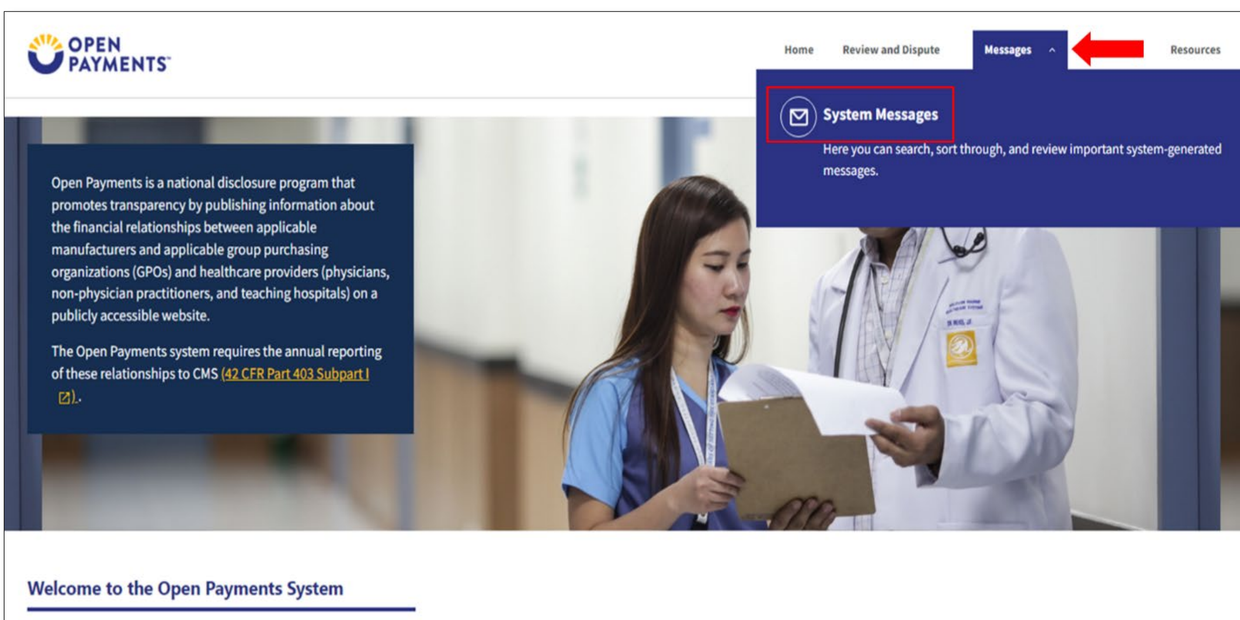
A system generated email is an email generated in response to any action performed in the Open Payments system. For example, during the registration process, once a covered recipient registers on the CMS Open Payments system, an email is sent out to the covered recipient confirming registration. This is a system generated email that can be viewed on the "Messages" tab.

The "Messages" tab is accessible from the Open Payments system home page. Once you are redirected to the "System Messages" page, you can view the following searchable fields: (1) Teaching Hospital, Physician, or NPP Name, (2) Record ID, (3) Payment Category, and (4) Message Category. All these fields are optional to refine your search.

5.1a: Instructions for searching messages

Step 1: Log in to the Open Payments system at https://openpayments.system.cms.gov and select the **Messages** tab on the tool bar and then select **System Messages**.

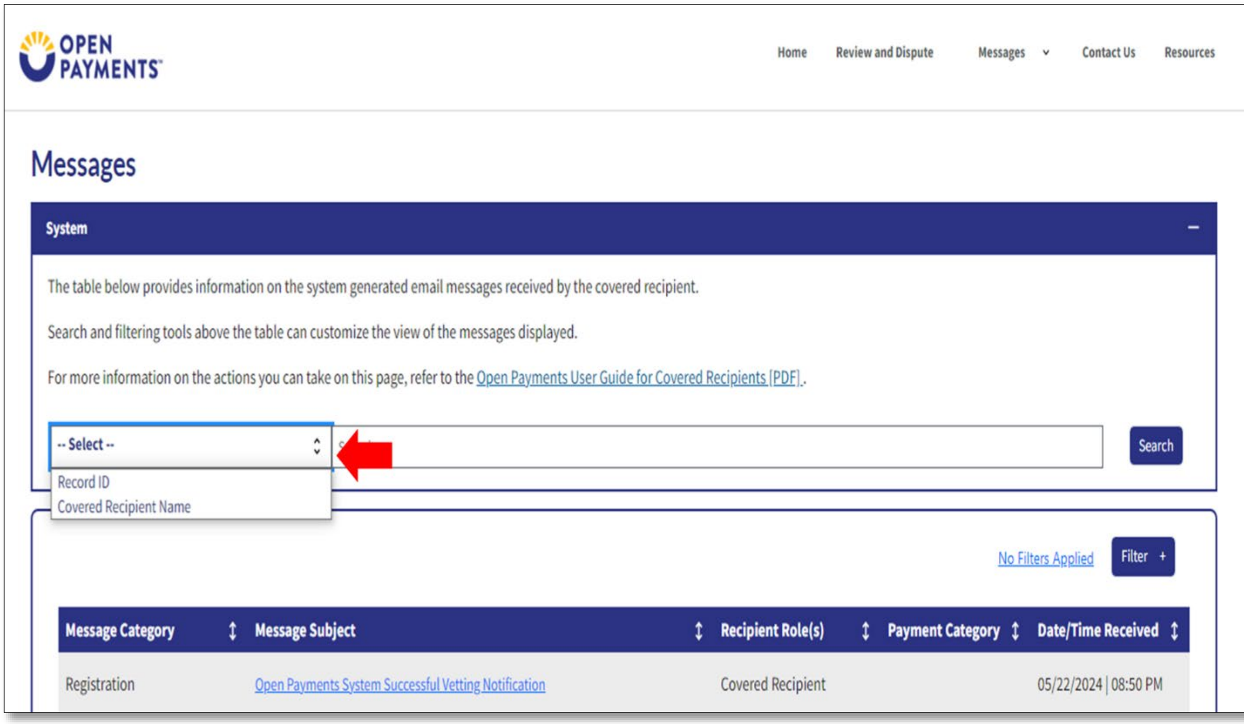
Figure 197: Open Payments Messages Tab: System Messages Option



Step 2: On the "Messages" page, you can search results based on the following search criteria:

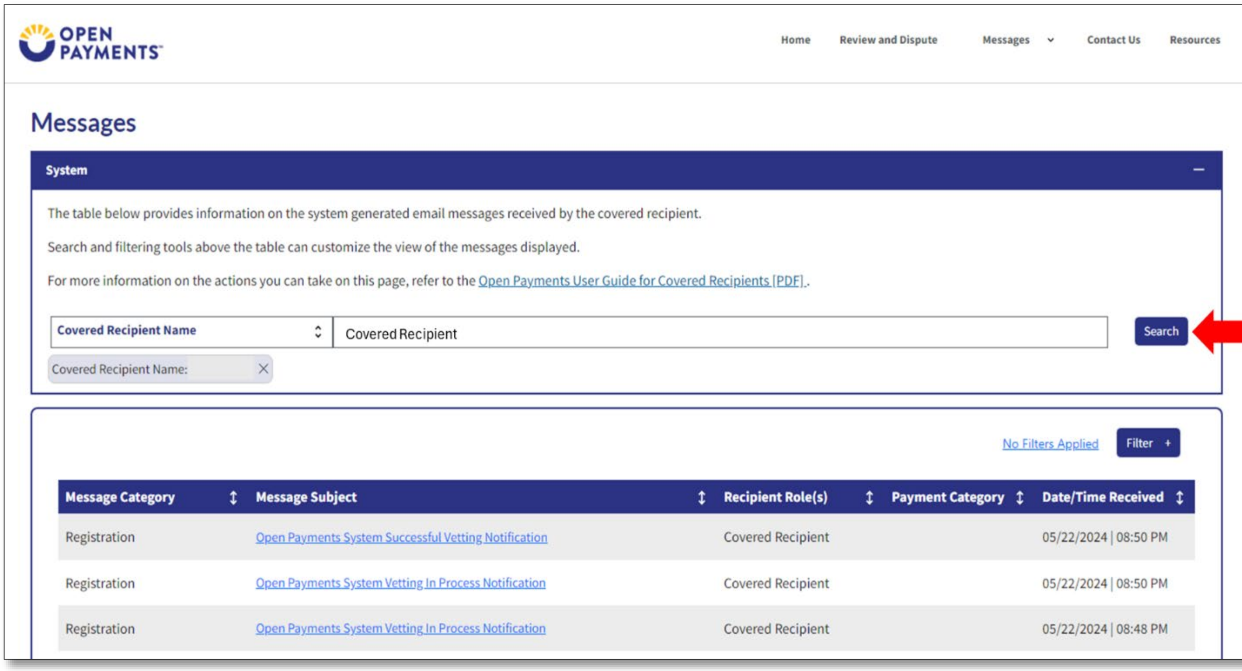
- Teaching Hospital or Physician or NPP Name
- Record ID (only applicable for Message Category of "Review and Dispute")

Figure 198: Messages Page: System Messages Search Criteria



Step 3a: Select the **Search** button to initiate the search. After selecting the **Search** button, a data table with the list of messages will display. This list of messages is sorted from newest to oldest.

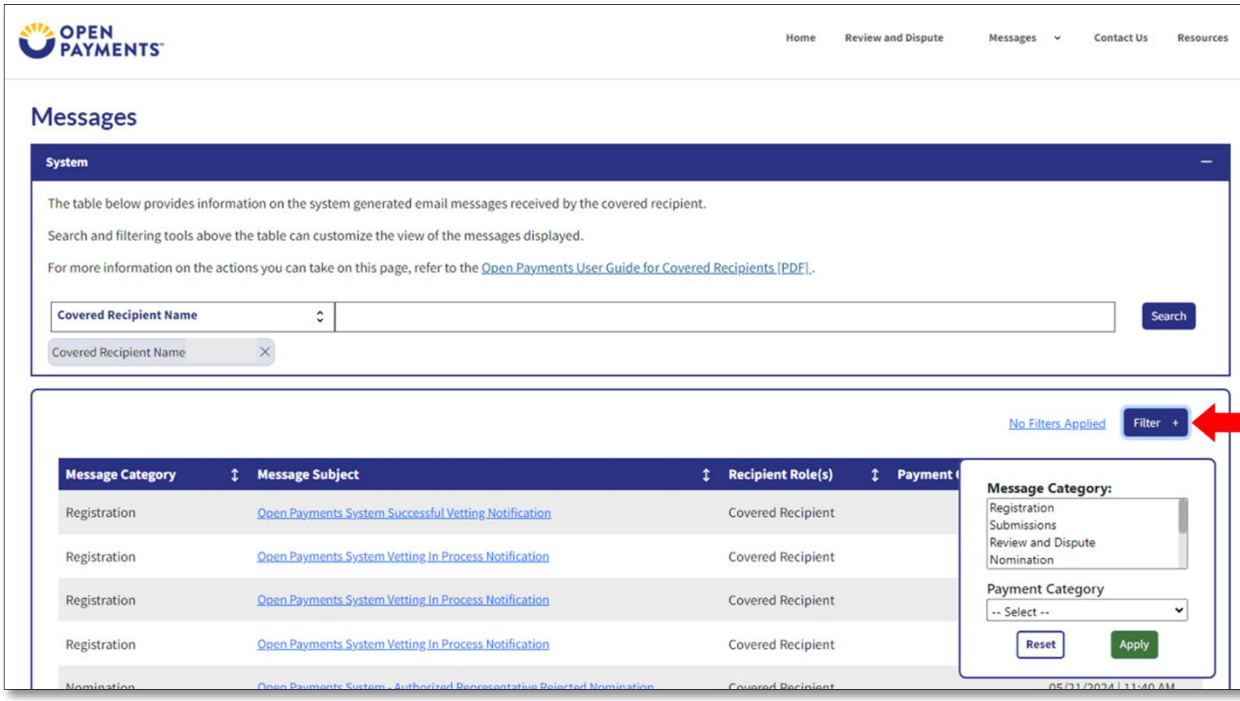
Figure 199: Search Button for System Messages



Step 3b: Select the **Filter** button to help refine your search results based on the following criteria:

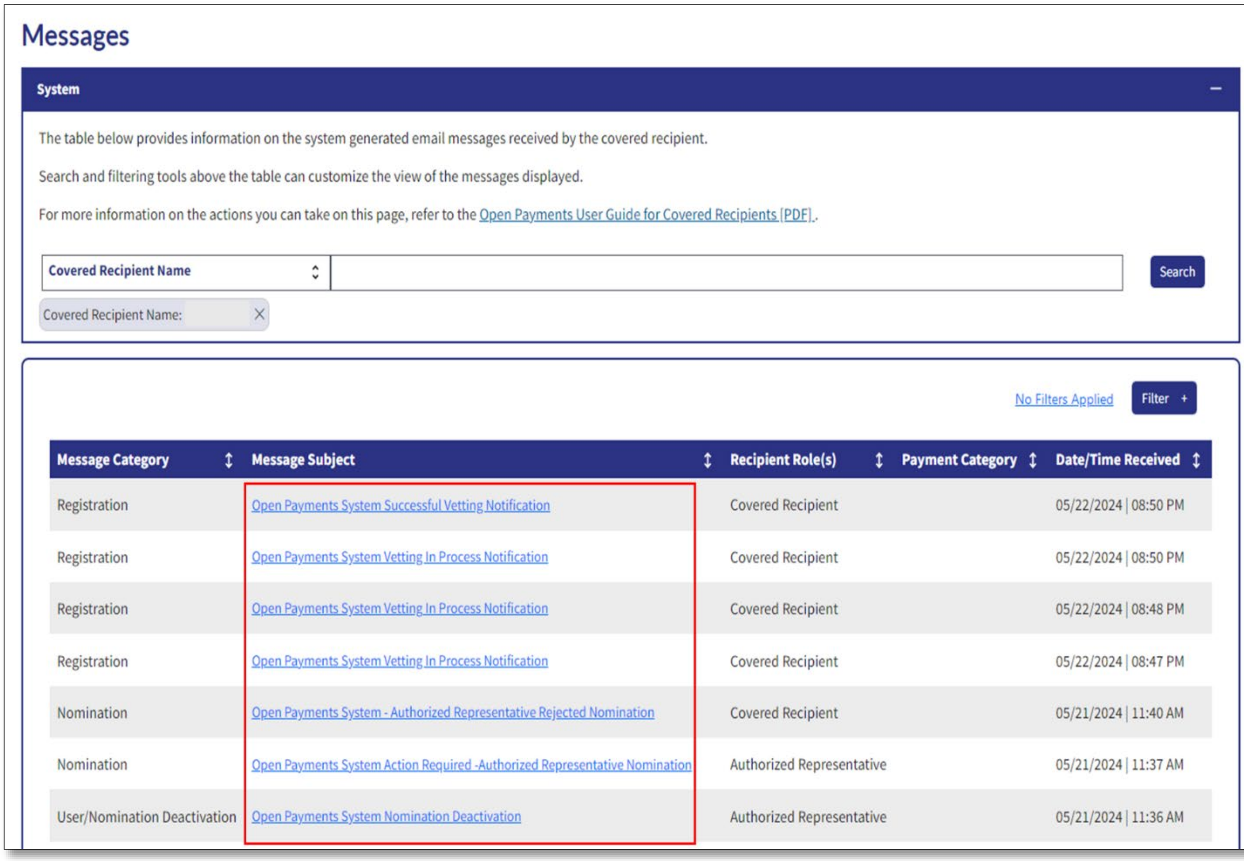
- Message Category
- Payment Category (only applicable for Message Category of Review and Dispute)

Figure 200: System Messages Search Results Filter Button



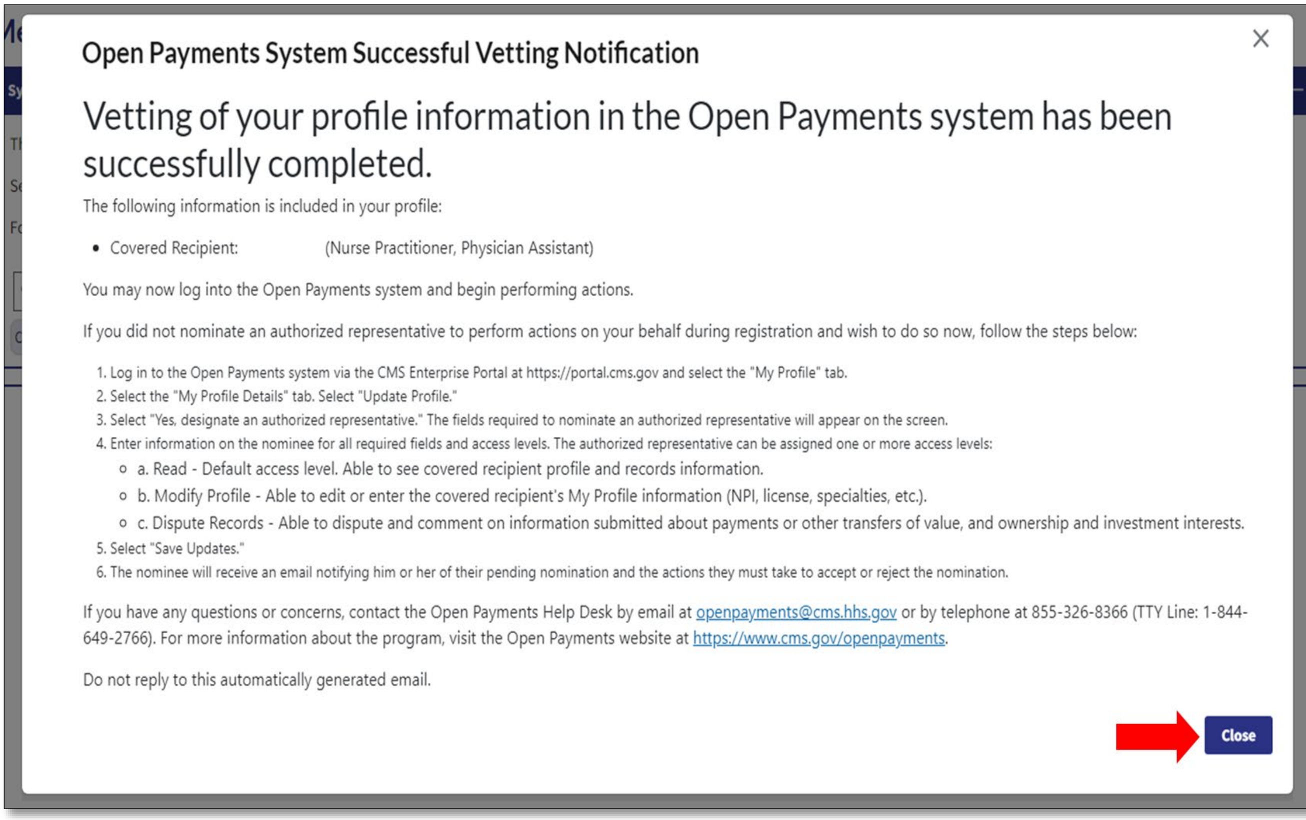
Step 4: Select the message subject hyperlink under the "Message Subject" column for the message you wish view.

Figure 201: Message Subject Hyperlink



Step 5: View the full message displayed in the pop-up window and select the **Close** button when done.

Figure 202: Full Message Window: Close Button



Appendix A: Glossary of Terms for Open Payments

Note: The text of the Open Payments Final Rule (42 C.F.R. § 403.902) is available at https://www.cms.gov/OpenPayments/Downloads/Affordable-Care-Act-Section-6002-Final-Rule.pdf.

Applicable Manufacturer:

Applicable manufacturers are entities that operate in the United States and (1) are engaged in the production, preparation, propagation, compounding, or conversion of a covered drug, device, biological, or medical supply, but not if such covered drug, device, biological, or medical supply is solely for use by or within the entity itself or by the entity's own patients (this definition does not include distributors or wholesalers (including, but not limited to, re-packagers, re-labelers, and kit assemblers) that do not hold title to any covered drug, device, biological, or medical supply); or (2) are entities under common ownership with an entity described in part (1) of this definition, which provides assistance or support to such entities concerning the production, preparation, propagation, compounding, conversion, marketing, promotion, sale, or distribution of a covered drug, device, biological, or medical supply. (See 42 C.F.R. § 403.902)

Applicable Group Purchasing Organization (GPO):

Applicable group purchasing organizations (GPOs) are entities that operate in the United States and purchase, arrange for, or negotiate the purchase of covered drugs, devices, biologicals, or medical supplies for a group of individuals or entities, but not solely for use by the entity itself. (See 42 C.F.R. § 403.902)

Assistance or Support:

Assistance or support means to provide a service or services needed to produce, prepare, propagate, compound, convert, market, promote, sell, or distribute a covered drug, device, biological, or medical supply. (See 42 C.F.R. § 403.902)

Biologicals:

For the purpose of Open Payments, biologicals are defined as in Section 1927(k)(2)(B) of the Social Security Act, which includes a cross-reference to licensure under Section 351 of the Public Health Service Act ("PHS Act").

Common Ownership:

Common ownership is when the same individual, individuals, entity, or entities directly or indirectly own five percent or more of two entities. This includes, but is not limited to, parent corporations, direct and indirect subsidiaries, and brother or sister corporations. (See 42 C.F.R. § 403.902)

Consolidated Report:

A consolidated report is a report filed by an applicable manufacturer, which includes payments or other transfers of value to covered recipients, physician owners or investment interests for the applicable manufacturer filing and applicable manufacturers under common ownership. (See 42 C.F.R. § 403.908(d))

Covered Recipients:

Covered recipients are any physicians (see *Physicians* for an extensive explanation of how Open Payments defines this group) who are not employees of the applicable manufacturer that is reporting the payment; or NPPs (see *NPPs* for an extensive explanation of how Open Payments defines this group) who are not employees of the applicable manufacturer that is reporting the payment; or teaching hospitals that receive payment for Medicare direct graduate medical education (GME), inpatient prospective payment system (IPPS) indirect medical education (IME), or psychiatric hospital IME programs during the last calendar year for which such information is available. (See 42 C.F.R. § 403.902)

General Payments:

Payments or other transfers of value not made in connection with a research agreement or research protocol as required in Open Payments.

Non-Covered Recipient Entity:

Non-covered recipient entities are entities that do not meet the Open Payments definition of a covered recipient (see 42 C.F.R. § 403.902). Non-covered recipient entities may include non-teaching hospitals or clinics. A payment or other transfer of value to a non-covered recipient entity is reportable if it is a research payment with at least one associated covered recipient principal investigator.

Non-Covered Recipient Individual:

Non-covered recipient individuals are individuals who do not meet the Open Payments definition of a covered recipient (see 42 C.F.R. § 403.902). Non-covered recipient individuals may include non-physician employees of a teaching hospital or physician-owned practice. A payment or other transfer of value to a non-covered recipient individual is reportable if it is a research payment with at least one associated covered recipient principal investigator.

Non-Physician Practitioners:

The Open Payments program expanded the definition of covered recipients to include the following NPPs:

- Physician Assistant (PA): an individual who performs such services as such individual is legally authorized to perform (in the State in which the individual performs such services) in accordance with State law (or the State regulatory mechanism provided by State law), and who meets such training, education, and experience requirements (or any combination thereof) as the Secretary may prescribe in regulations.

- Nurse Practitioner (NP): an individual who performs such services as such individual is legally authorized to perform (in the State in which the individual performs such services) in accordance with State law (or the State regulatory mechanism provided by State law), and who meets such training, education, and experience requirements (or any combination thereof) as the Secretary may prescribe in regulations.
- Clinical Nurse Specialist (CNS): an individual who is a registered nurse and is licensed to practice nursing in the State in which the clinical nurse specialist services are performed; and holds a master's degree in a defined clinical area of nursing from an accredited educational institution.
- Certified Registered Nurse Anesthetist (CRNA)/Anesthesiologist Assistant (AA): a certified registered nurse anesthetist licensed by the State who meets such education, training, and other requirements relating to anesthesia services and related care as the Secretary may prescribe. In prescribing such requirements the Secretary may use the same requirements as those established by a national organization for the certification of nurse anesthetists.
- Certified Nurse-Midwife (CNM): a registered nurse who has successfully completed a program of study and clinical experience meeting guidelines prescribed by the Secretary, or has been certified by an organization recognized by the Secretary

Open Payments:

Open Payments is a national transparency program which requires:

- Applicable manufacturers of covered drugs, devices, biologicals, or medical supplies to report information about payments or other transfers of value to physicians, NPPs, and teaching hospitals to CMS every year.
- Applicable manufacturers and applicable group purchasing organizations (GPOs) to report information about ownership and investment interests held by physicians or their immediate family members to CMS every year.
- Applicable GPOs to report information about payments or other transfers of value made to physicians owners and investment interests to CMS every year.

Physicians:

For the purposes of Open Payments, physicians are defined as doctors of medicine or osteopathy practicing medicine or surgery, doctors of dental medicine or dental surgery practicing dentistry, doctors of podiatric medicine, doctors of optometry, or chiropractors, all legally authorized to practice by their state.

Physician Owners or Investors:

Physicians who have an ownership or investment interests in an applicable manufacturer or applicable group purchasing organization. Applicable manufacturers and applicable group purchasing organizations are required to report ownership or investment interests held by a physician or a physician's immediate family member in an applicable manufacturer or applicable group purchasing organization.

Research Payments:

Payments or other transfers of value made in connection with a research agreement or research protocol as required in Open Payments.

Special Characters:

Characters that are neither letters nor numbers. Special characters include punctuation, spaces, and other non-alphanumeric symbols.

Special characters are required in registration fields where appropriate. For example, the "@" symbol and the period are required in email address fields, while dashes are required in telephone number fields.

Data elements of submitted records may contain only the special characters allowed per the "Submission Data Mapping Document," which is found on the Resources page of the Open Payments website at https://www.cms.gov/OpenPayments/Resources. Note that there are multiple versions of the Submission Data Mapping Document based on program year. Consult the Submission Data Mapping Document for the program year of your records.

Free text fields allow all special characters on a standard U.S. keyboard, excepting ALT+NUMPAD ASCII Key characters. Below are the special characters allowed in free text fields.

Figure 203: Special Characters Allowed in Free-Text Fields

Special Character	Description
+	Plus sign
&	Ampersand
'	Apostrophe
*	Asterisk
@	At sign
\	Backslash
^	Caret
:	Colon
,	Comma

<table>
<tr><th>Special Character</th><th>Description</th></tr>
<tr><td>$</td><td>Dollar sign</td></tr>
<tr><td>Space</td><td>Space character</td></tr>
<tr><td>=</td><td>Equal</td></tr>
<tr><td>!</td><td>Exclamation mark</td></tr>
<tr><td>/</td><td>Forward slash</td></tr>
<tr><td>`</td><td>Grave accent</td></tr>
<tr><td>></td><td>Greater than</td></tr>
<tr><td>–</td><td>Minus sign/hyphen</td></tr>
<tr><td>(</td><td>Left parenthesis</td></tr>
<tr><td>{</td><td>Left curly brackets</td></tr>
<tr><td>[</td><td>Left square brackets</td></tr>
<tr><td><</td><td>Less than</td></tr>
<tr><td>%</td><td>Percent</td></tr>
<tr><td>.</td><td>Period</td></tr>
<tr><td>#</td><td>Pound</td></tr>
<tr><td>?</td><td>Question mark</td></tr>
<tr><td>"</td><td>Quotation marks</td></tr>
<tr><td>)</td><td>Right parenthesis</td></tr>
<tr><td>}</td><td>Right curly brackets</td></tr>
<tr><td>]</td><td>Right square brackets</td></tr>
<tr><td>;</td><td>Semi-colon</td></tr>
<tr><td>|</td><td>Pipe</td></tr>
<tr><td>~</td><td>Tilde</td></tr>
<tr><td>+</td><td>Plus sign</td></tr>
</table>

Characters used in foreign languages that are not used in English must be converted to English characters to be acceptable to the Open Payments system. Refer to the conversion table below.

Figure 204: Conversions for Foreign Language Characters

Foreign Character	Convert to English Character
À	A
Á	A
Â	A
Ã	A
Ä	A
Å	A
È	E
É	E
Ê	E
Ë	E

Foreign Character	Convert to English Character
Ì	I
Í	I
Î	I
Ï	I
Ò	O
Ó	O
Ô	O
Õ	O
Ö	O
Ø	O
Ù	U
Ú	U
Û	U
Ü	U

Teaching Hospital:

Teaching hospitals are hospitals that receive payment for Medicare direct graduate medical education (GME), IPPS indirect medical education (IME), or psychiatric hospital IME programs during the last calendar year for which such information is available. (See 42 C.F.R. § 403.902). The full list of affected teaching hospitals can be found on the Resources page of the Open Payments website at https://www.cms.gov/OpenPayments/Resources.

Disclosure

- **Disclaimer**: The contents of this document do not have the force and effect of law and are not meant to bind the public in any way unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.

- **Activities/persons addressed by this document:** Guidance for physicians, NPPs, and teaching hospitals on Open Payments, including how to register, and review, and dispute attributed data.

- **Date of document issuance**: January 2026

- **Replacement / Revision Status**: Revision to previous versions

- **Agency Identifier**: OHEI TDG 4776

- **Summary of Document**: A one-stop-shop resource to help physicians, NPPs, and teaching hospitals understand in detail how the Open Payments system works.

- **Citation to statutory provision/regulation applicable to this document**:
    - **Statute citation**: Social Security Act SEC. 1128G. [42 U.S.C. 1320a-7h]
    - **Rule citation**: 42 C.F.R. §403.900-14