

Guide for Obtaining a ‘Physician Quality and Value Programs’ (Registration for the CMS Web Interface and/or CAHPS for MIPS Survey) Role for an Existing EIDM User

I. Introduction

This guide is for users who have an existing Enterprise Identity Data Management (EIDM) account. This guide provides step-by-step instructions on how users can request a role to access the ‘Physician Quality and Value Programs’ application in the CMS Enterprise Portal using their existing EIDM account in order to access the registration system for the CMS Web Interface and the Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS survey.

Note: Do not use this guide if you do not have an EIDM account. Same as in previous years, if you are participating in a Medicare Accountable Care organization (ACO), your ACO is required to submit quality data to CMS on your behalf and you do not need an EIDM account.

- A. Before requesting a ‘Physician Quality and Value Programs’ role for your EIDM account, you will first need to determine which **one** of the following two user roles you want to request:
- **Security Official role:** The Security Official role allows the user to perform the following tasks on behalf of a group:
 - Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the CAHPS for MIPS Survey Registration;
 - View the group’s prior registration(s); and
 - Approve requests for the ‘Group Representative’ role in the EIDM.
 - **Group Representative role:** The Group Representative role allows the user to perform the following tasks on behalf of a group:
 - Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer CAHPS for MIPS Survey; and
 - View the group’s prior registration(s).

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

Quality Payment Program

Note: Groups are identified in the EIDM by their Medicare billing Taxpayer Identification Number (TIN). A group consists of **two or more eligible clinicians** (as identified by their National Provider Identifier [NPI]) that bill under the TIN. To find out if a group is already registered in the EIDM and who is the group's Security Official, please contact the Quality Payment Program by phone at 1-866-288-8292 / TTY 877-715-6222 or by email at gpp@cms.hhs.gov. You will need to provide the group's TIN and the name of the group.

B. Please gather the following information before you begin the process for requesting a 'Physician Quality and Value Programs' user role:

- **Security Official:**

- **Organization Information:** Group's Medicare billing TIN, Legal Business Name, Rendering NPIs for **two different** eligible clinicians who bill under the TIN and their corresponding individual Provider Transaction Access Numbers (PTANs) (*do not use the GROUP NPI or GROUP PTAN*), Address, City, State, Zip Code, and Phone Number.

- **Group Representative:**

- **Organization Information:** Group's Medicare billing TIN; or the Legal Business Name and the State; or the Legal Business Name and the Street Address.

C. **Step-by-Step Instructions:** You have **twenty-five (25)** minutes to complete each screen (unless a different time is noted on the screen). Otherwise, you will lose all of the information you entered and will need to start the process again.

II. Questions

For questions related to setting up an EIDM account, please contact the Quality Payment Program:

- Monday – Friday: 8:00am – 8:00pm EST
- Phone: 1-866-288-8292 or (TTY: 1-877-715-6222)
- Email: gpp@cms.hhs.gov


If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

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If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

IV. Getting Started - Please follow each step listed below unless otherwise noted.

STEPS	SCREENSHOTS
<p>1. Go to https://portal.cms.gov and select Login to CMS Secure Portal.</p> <p>Note: The CMS Enterprise Portal supports the following internet browsers:</p> <ul style="list-style-type: none"> • Internet Explorer 9 (without compatibility mode) • Internet Explorer 10 (without compatibility mode) • Internet Explorer 11 (without compatibility mode) • Mozilla-Firefox • Chrome • Safari <p>Enable JavaScript and adjust any zoom features to ensure you are not seeing the screen in too wide of a view.</p>	

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

2. Read the **Terms and Conditions** and select ***I Accept*** to continue.

Health Care Quality Improvement System | Provider Resources

Terms and Conditions

OMB No.0938-1236 | Expiration Date: 04/30/2017 | [Paperwork Reduction Act](#)


You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:
You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system.
At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.

Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

To continue, you must accept the terms and conditions. If you decline, your login will automatically be cancelled.



3. Enter Your **EIDM User ID** and select ***Next*** on the **Welcome to CMS Enterprise Portal** screen.

CMS.gov | Enterprise Portal
Centers for Medicare & Medicaid Services

Home | About CMS | Newsroom | Archive | [Help & FAQs](#) | [Email](#) | [Print](#)

Health Care Quality Improvement System | Provider Resources

Welcome to CMS Enterprise Portal

User ID 



[Forgot User ID?](#)
Need an account? Click the link - [New user registration](#)

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

4. Enter Your EIDM **Password** and select **Log In**.

5. Select **Request Access Now** under **Request Access** to begin the process of requesting a new user role.

Note: You may also select your username and then select **My Access** from the drop-down menu to begin the process of requesting a new user role.

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

6. Select **Request Access** for the **Physician Quality and Value Programs** application within the **Access Catalog**.

Note: In order to access, the CMS Web Interface and the CAHPS for MIPS Survey Registration, you are required to have access to the Physician Quality and Value application. The **Access Catalog** list presented is in alphabetical order. Scroll down until you find the **Physician Quality and Value Programs** application or enter the first few letters of the application in the **Access Catalog** text box to narrow down the selection criteria.

Physician Quality and Value Programs Physician Value - Physician Quality Reporting System Program. This portal allows access to More... Help Desk Information 866-288-8912 Request Access	POLICYAPP POLICYAPP Help Desk Information TBD Request Access	PS&R/STAR Provider Statistical and Reimbursement/System for Tracking Audit and Reimbursement. More... Help Desk Information 866-484-8049 trmtesting@yahoo.com Request Access
PV-PQRS RIDP/MFA Physician Value - Physician Quality Reporting System Program. This portal allows access to More... Help Desk Information 866-288-8912 trm.testing@yahoo.com Request Access	QMAT The Quality Measures Assessment Tool (QMAT) application allows users to submit clinical data More... Help Desk Information TBD Request Access	SHIM SHIM is the Small Business Health Options Program Marketplace that helps businesses provide More... Help Desk Information TBD Request Access
SPOT-First Coast Service Options Internet portal (FCSO) The SPOT offers an array of self-service resources to furnish essential Medicare process in More... Help Desk Information 865-416-4199 Request Access	TESTMACPRO TEST Medicaid and CHIP Program Help Desk Information TBD Request Access	TESTMFA Test Application to test MFA Help Desk Information TBD Request Access

7. (a) Under **Select a Group**, choose **Provider Approver**, if you are requesting **Security Official** role

OR

- (b) Choose **PV Provider**, if you are requesting **Group Representative** role.

Note: The **Select a Role** option will be visible after making a selection for the **Select a Group** option. The **Next** button will be visible after making a selection for **Select a Role** option.

CMS.gov Enterprise Portal

My Portal

CMS Portal > EIDM user menu page > My Access

Request New Application Access: * Required Field

Application Description: **Physician Quality and Value Programs**

Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.

Select a Group: ☐ CMS/Help Desk User ☒ **PV Provider** ☐ Provider Approver ☐ PQRS Provider

[Cancel](#)

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

8. Select the appropriate role you want to request from the **Select a Role** drop-down menu.

Multi-Factor Authentication (MFA)

Please follow steps 9 to 12 to register for MFA. MFA is an approach to security authentication which requires users to provide more than one form of verification in order to prove their identity. MFA registration is required only once when you are requesting a user role, but will be verified every time you log into the CMS Enterprise Portal. Additional information on how the MFA process works can be found at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html>

9. Select **Next** to begin registration for the **Multi-Factor Authentication** process.

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

10. Read the **Register Your Phone, Computer, or E-mail** notification and then select an option from the **MFA Device Type** drop-down menu.

Note: If selecting Phone/Tablet/PC/Laptop as **MFA Device Type**, you will first need to ensure you have the appropriate VIP Access software downloaded to your device. The VIP Access software can be downloaded via the Symantec Site (link is provided on your screen). Refer to the link on the screen to make selection. If the VIP Access software is not installed on your device, you will be unable to complete the Multi-Factor Authentication process.

Register Your Phone, Computer, or E-mail

Adding a Security Code to your login also known as Multi-Factor Authentication (MFA) can make your login more secure by providing an extra layer of protection to your user name and password.

You can associate the Security Code to your profile by registering your phone, computer or E-mail. Select the links below to find out more information about the options.

Phone/Tablet/PC/Laptop

To use the Validation and ID Protection (VIP) access software on your phone, you must download the VIP Access software to your phone, if you do not already have it. Select the following link - <https://m.vip.symantec.com/home.v>

To use VIP access software on your computer, you must download the VIP Access software, if you do not already have it. Select the following link - <https://idprotect.vip.symantec.com/desktop/download.v>

Text Message Short Message Service (SMS)

The SMS option will send your Security Code directly to your mobile device via text message. This option requires you to provide a ten (10) digits U.S. phone number for a mobile device that is capable of receiving text messages. Carrier service charges may apply for this option.

Interactive Voice Response (IVR)

The IVR option will communicate your Security Code through a voice message that will be sent directly to your phone. The option requires you to provide a valid ten (10) digits U.S. phone number and (Optional) extension that will be used during login to obtain the Security Code. The extension may begin with any one of the following: asterisks '*'; period '.'; comma ','; pound '#' followed by numeric 0 to 9. For example: 4885554444, 1112.

To access the application you must enter the provided Security Code on the login page. Carrier service charges may apply for this option.

E-mail


The E-mail address on your profile will be used when registering for Multi-Factor Authentication (MFA) using E-mail option. When logging into a secure application, your Security Code that is required at the login page will be e-mailed to the e-mail address on the profile.

Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, then log back in to try again.

Select the MFA Device Type that you want to use to login to secure applications from the dropdown menu below.

MFA Device Type:

Cancel Phone/Tablet/PC/Laptop Text Message-Short Message Service (SMS) Interactive Voice Response (IVR) E-mail



If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

11. (a) If selecting **Phone/Tablet/PC/Laptop** as **MFA Device Type**, enter the alphanumeric code that displays under the label Credential ID on your device. Enter the **MFA Device Description** which is a nick-name that can help you identify your device.

OR

(b) If selecting **E-mail** –as **MFA Device Type**, the E-mail address on your profile will automatically be used for the E-mail option to obtain the security code. Enter the **MFA Device Description**.

OR

(c) If selecting **Text Message – Short Message service (SMS)** as **MFA Device Type**, enter the **Phone Number** that will be used to obtain the security code and the **MFA Device Description**.

OR

(d) If selecting **Voice Message – Interactive Voice Response (IVR)** as **MFA Device Type**, enter the **Phone Number and Extension** that will be used to obtain the security code. Enter the **MFA Device Description**.
Select **Next** to continue.

Register Your Phone, Computer, or E-mail

Adding a Security Code to your login also known as Multi-Factor Authentication (MFA) can make your login more secure by providing an extra layer of protection to your user name and password.

You can associate the Security Code to your profile by registering your phone, computer or E-mail. Select the links below to find out more information about the options.

Phone/Tablet/PC/Laptop

To use the Validation and ID Protection (VIP) access software on your phone, you must download the VIP Access software to your phone, if you do not already have it. Select the following link: <https://m.vip.symantec.com/home.v>

To use VIP access software on your computer, you must download the VIP Access software, if you do not already have it. Select the following link: <https://idprotect.vip.symantec.com/desktop/download.v>

Text Message Short Message Service (SMS)

The SMS option will send your Security Code directly to your mobile device via text message. This option requires you to provide a ten (10) digits U.S. phone number for a mobile device that is capable of receiving text messages. Carrier service charges may apply for this option.

Interactive Voice Response (IVR)

The IVR option will communicate your Security Code through a voice message that will be sent directly to your phone. The option requires you to provide a valid ten (10) digits U.S. phone number and (Optional) extension that will be used during login to obtain the Security Code. The extension may begin with any one of the following: asterisks*; period.; comma.; pound # followed by numeric 0 to 9. For example: 4885554444, 1112.

To access the application you must enter the provided Security Code on the login page. Carrier service charges may apply for this option.

E-mail

The E-mail address on your profile will be used when registering for Multi-Factor Authentication (MFA) using E-mail option. When logging into a secure application, your Security Code that is required at the login page will be e-mailed to the e-mail address on the profile.

Please note that you are only allowed two attempts to register your MFA device. If you are unable to register your device within two attempts please log out, then log back in to try again.

Select the MFA Device Type that you want to use to login to secure applications from the dropdown menu below.

* MFA Device Type: Phone/Tablet/PC/Laptop

Enter the alphanumeric code that displays under the label Credential ID on your device.

* Credential ID:

* MFA Device Description:

Cancel

Next

12. Your registration for the **Multi-Factor Authentication** is now complete. Select **Next** to proceed to request a user role in order to access the 'Physician Quality and Value Programs' application.

Note: You will receive an E-mail notification for successfully registering the MFA credential type.

13. Enter the required information under **Business Contact Information** and **Phone** sections and select **Next**.

Note: The information under the **Name** section will be pre-populated.

- If you are requesting a Security Official role, go to step 14.
- If you are requesting a Group Representative role, go to step 21.

Follow Steps 14 to 20 to Request a 'Security Official' Role

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

Quality Payment Program

14. (a) If you are the first person in your group to sign up for the Security Official role and register your group in the EIDM, select **Create an Organization**. Then, proceed to Step 15.

OR


(b) If you are signing up for a Security Official role and your group already exists in the EIDM, select **Associate to an Existing Organization**. Then, proceed to Step 18.

Request New Application Access * Required Field

Application Description:
 Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.

Select a Group: ☐ CMS/Help Desk User
☐ PV Provider
☒ Provider Approver
☐ PQRS Provider

Select a Role:
 Role Description: Role for a Physician group to approve other users for that group for PQRS and PV-PQRS. To register in the PV-PQRS for PY 2014, view PY2013 registration data and view QRURs Reports (drill down, dashboard).

* Create/Associate: ☐ Associate to an Existing Organization ☒ Create an Organization 

* Reason for Request:

15. If selecting **Create an Organization** as the **Create/Associate** option, enter the following required information for the group:

- Medicare Billing TIN
- Legal Business Name
- NPI 1
- PTAN 1
- NPI 2
- PTAN 2
- Address
- City
- State
- Zip Code
- Phone Number
- Reason for Request

Select **Next**.

Note: In this section, enter your group's Medicare billing **TIN**; enter **rendering NPIs** for **two different** eligible clinicians who bill under the TIN (do not use the group NPI) and

Select a Role:
 Role Description: Role for a Physician group to approve other users for that group for PQRS and PV-PQRS. To register in the PV-PQRS for PY 2014, view PY2013 registration data and view QRURs Reports (drill down, dashboard).

* Create/Associate: ☐ Associate to an Existing Organization ☒ Create an Organization

* TIN:

Group Unique Identifier:

ACO Parent TIN:

* Legal Business Name:


* NPI 1:
 * PTAN 1:
 * NPI 2:
 * PTAN 2:
 NPI 3:
 PTAN 3:

* Address Line 1: Address Line 2:
 * City: * State:

* Zip Code: Zip Code Extension:
 Country: United States

* Phone Number: Extension:
 Fax Number:
 Email:
 Website:

* Reason for Request:



If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

enter their corresponding **individual PTANs** (do not use the group PTAN); and enter the remaining required information.

Example: Healthy Clinic with Medicare billing TIN 74-7575757 has ten eligible clinicians in the group. Enter the rendering NPI and individual PTAN combinations for two of the eligible clinicians: Dr. Smith and Dr. Beaver.

- Dr. Smith's **rendering NPI** is 4545454545 and the corresponding **individual PTAN** is G676767676.

Note: PTANs are alphanumeric therefore, enter the alpha characters.

- Dr. Beaver's **rendering NPI** is 2525252525 and the corresponding **individual PTAN** is **00**12789456.

Note: All leading zeros in the PTAN should be entered.

16. Verify the information on the **Verification** screen and select **Submit**.

Address 1: 1001 Test
 Address 2:
 City: Baltimore
 State/Territory: Maryland
 Zip Code: 21209 Zip Code Extension:

Phone


Company Phone Number: 301-977-2015 Extension:
 Office Phone Number: 301-977-2015 Extension:

Create/Associate: ☐ Associate to an Existing Organization ☒ Create an Organization

TIN: 73-1579452
 Group Unique Identifier:
 ACO Parent TIN:
 Legal Business Name: MDM GSO 06252015
 NPI 1: 1003003831
 PTAN 1: 1316049141
 NPI 2: 1003003831
 PTAN 2: 731579452
 NPI 3:
 PTAN 3:

Address Line 1: 10001 Address Line 2:
 City: Baltimore State: Maryland
 Zip Code: 21211 Zip Code Extension:
 Country: United States
 Phone Number: 312-345-4567 Extension:
 Fax Number:
 Email:
 Website:

Reason for Request: py




17. (a) You have successfully applied for the Security Official role.

(b) **If your role request is automatically approved**, proceed to Step 24 to complete the Multi-Factor Authentication before you can access the 'Physician Quality and Value Programs' application, where you

Request New Application Access Acknowledgement

Your EIDM request has been successfully submitted.
 The tracking number for your request is:
1689081

Please use this number in all correspondence concerning this request.
 You will receive an email once your request has been processed.



If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

Quality Payment Program

are able to complete the following, using your EIDM User ID and EIDM password in order to:

- Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the CAHPS for MIPS survey;
- View the group's prior registration(s).

A confirmation E-mail will be sent shortly after the submission confirmation message.

Note: You have three (3) attempts to enter two valid NPI/PTAN combinations for two different eligible clinicians who bill under the TIN. If the information is a confirmed match, the request will be automatically approved. If you exceed these attempts, your request will be sent to the help desk for manual approval. You will be contacted by CMS for further assistance within two (2) business days.

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

18. (a) If selecting **Associate to an Existing Organization** as the **Create/Associate** option, enter **one** of the following information for the group:

i. Medicare Billing TIN

OR

ii. Legal Business Name and State

OR

iii. Legal Business Name and Street Address

(b) Select **Search**.

(c) Select your group from the **Organization** drop-down menu. Enter **Reason for Request** and select **Next**.

Note: If your group cannot be found, please verify that your group already has a user with an approved Security Official role and you entered the group's Medicare billing TIN correctly. If you do not know the Security Official, contact the Quality Payment Program.

Request New Application Access

* Required Field

Application Description: Physician Quality and Value Programs

Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.

Select a Group:

☐ CMS/Help Desk User
 ☐ PV Provider
 ☒ Provider Approver
 ☐ PQRS Provider

Select a Role: Security Official

Role Description:

Role for a Physician group to approve other users for that group for PQRS and PV-PQRS. To register in the PV-PQRS for PY 2014, view PY2013 registration data and view QRURs Reports (drill down, dashboard).

* Create/Associate:

☒ Associate to an Existing Organization
 ☐ Create an Organization

Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search.

Legal Business Name:

TIN: 20-8987815

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

Zip Code Extension:

Search

* Organization:

NGC SO RIDP/MFA TEST (2800 Lord Baltimore Dr, Baltimore, MD)

* Reason for Request:

Requesting SO role.

Next

Cancel

19. Verify the information on the **Verification** screen and select **Submit**.

Request New Application Access Review * Required Field

Application Description:

Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.

Group Selected: Provider Approver

Role Selected: Security Official

Role Description: Role for a Physician group to approve other users for that group for PQRS and PV-PQRS. To register in the PV-PQRS for PY 2014, view PY2013 registration data and view QRURs Reports (drill down, dashboard).

Create/Associate: ☒ Associate to an Existing Organization ☐ Create an Organization

Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search.

Organization:

Reason for Request:

20. (a) You have successfully applied for the Security Official role.

Note: Another Security Official from your group must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.

(b) **After your role request is approved**, proceed to Step 24 to complete the Multi-Factor Authentication before you can access the 'Physician Quality and Value Programs' application, where you are able to complete the following, using your EIDM User ID and EIDM password in order to:

- Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the CAHPS for MIPS

Request New Application Access Acknowledgement

Your EIDM request has been successfully submitted.
The tracking number for your request is:
1689081

Please use this number in all correspondence concerning this request.
You will receive an email once your request has been processed.

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

survey;

- View the group's prior registration(s).

Follow Steps 21 to 23 to Request a 'Group Representative' Role

21. (a) Enter one of the following information for the group.

- Medicare Billing TIN
- OR**
- Legal Business Name and State
- OR**
- Legal Business Name and Street Address

(b) Select **Search**.

(c) Select your group from the **Organization** drop-down menu. Enter **Reason for Request** and select **Next**.

Note: If your group cannot be found, please verify that your group already has a user with an approved Security Official role and you entered the group's Medicare billing TIN correctly. If you do not know your Security Official, contact the Quality Payment Program.

Request New Application Access * Required Field

Application Description: Physician Quality and Value Programs

Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.

Select a Group: ☐ CMS/Help Desk User ☒ PV Provider ☐ Provider Approver ☐ PQRS Provider

Select a Role: Group Representative

Role Description: Role for Group Practice's Authorized User to register in PQRS-PV on their behalf.

Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search.

Legal Business Name:

TIN: 95-2789930

Address Line 1: Address Line 2:

City: State:

Zip Code: Zip Code Extension:

Search

* Organization:

* Reason for Request:

Next **Cancel**

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

22. Verify the information on the **Verification** screen and select **Submit**.

Request New Application Access Review * Required Field

Application Description:
 Physician Value - Physician Quality Reporting System Program. This portal allows access to applications such as Submissions, Web Interface, Feedback Dashboard and Reports and, if applicable, electing CAHPS.


Group Selected: PV Provider

Role Selected: Group Representative
 Role Description: Role for Group Practice's Authorized User to register in PQRS-PV on their behalf.

Please provide the complete Medicare billing Tax Identification Number (TIN); or the Legal Business Name (LBN) and State; or the LBN and Street Address to perform the organization search.

Organization:

Reason for Request:



23. (a) You have successfully applied for the Group Representative role.

Note: A Security Official from your group must approve your request within sixty (60) days after it is submitted; otherwise, the request will be canceled and need to be resubmitted.


(b) **After your role request is approved**, proceed to Step 24 to complete the Multi-Factor Authentication before you can access the 'Physician Quality and Value Programs' application, where you are able to complete the following, using your EIDM User ID and EIDM password in order to:

- Register the group to participate in the Quality Payment Program via the CMS Web Interface and/or elect to administer the

Request New Application Access Acknowledgement

Your EIDM request has been successfully submitted.
 The tracking number for your request is:
1689081

Please use this number in all correspondence concerning this request.
 You will receive an email once your request has been processed.



If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

- CAHPS for MIPS survey;
• View the group's prior registration(s).

V. Completing the Multi-Factor Authentication (MFA)

NOTE: MFA will need to be completed each time you log into the CMS Enterprise Portal. Additional information on how the MFA process works can be found at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013=QRUR.html>.

24. Log In to the CMS Enterprise Portal and then Accept the Terms and Conditions.

Note: Multi-Factor Authentication (MFA) is a new approach to security authentication which will help improve CMS' ability to reduce fraud and ensure system security. It requires users to provide more than one form of verification in order to prove their identity in order to access certain information provided via the 'Physician Quality and Value Programs' application. MFA registration is required only once when you are requesting a role but will be verified at every log-on.

Health Care Quality Improvement System

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Terms and Conditions

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You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.

Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.

By using this information system, you understand and consent to the following:
 You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system.
 At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.

Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.

To continue, you must accept the terms and conditions. If you decline, your login will automatically be cancelled.

→

I Accept

Decline

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

25. Enter Your EIDM User ID and select **Next** on the **Welcome to CMS Enterprise Portal** screen.

CMS.gov | Enterprise Portal
Centers for Medicare & Medicaid Services

Home | About CMS | Newsroom | Archive | Help & FAQs | Email | Print

Health Care Quality Improvement System | Provider Resources

Welcome to CMS Enterprise Portal

User ID

Next Cancel

[Forgot User ID?](#)
Need an account? Click the link - [New user registration](#)

If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.

26. **Multi-Factor Authentication (MFA)** will need to be completed each time you log into the CMS Enterprise Portal.

- a) Enter Your EIDM **Password**.
- b) Select the **MFA Device Type** from the drop-down menu.

Note: You previously registered to complete the MFA process when setting-up your Physician Quality and Value Programs account. Please ensure that you select the same **MFA Device Type** you selected when registering for the MFA process during your initial account set-up. You will not be able to complete the MFA process if your selection from the **MFA Device Type** does not match your initial selection when setting-up your account.

- c) Select **Send** to retrieve the **Security Code**.

Note: The **Send** option will appear only when the following MFA Device Type is selected:

- Text Message-Short Message Service (SMS)
- Interactive Voice Response (IVR)
- Email

- d) Enter the **Security code** and select **Log In**.

Welcome to CMS Enterprise Portal

Enter Security Code
A Security Code is required to complete your login.
To retrieve a Security Code, please select the Phone, Computer, or E-mail that you registered as your Multi-Factor Authentication(MFA) device when you originally requested access, from the MFA Device Type dropdown menu below.
Security Codes expire, be sure to enter your Security Code promptly.

Unable to Access Security Code?
If you are unable to access a Security Code, you may use the "Unable To Access Security Code?" link. To use this link you will be directed away from this page. For security purposes, you will be prompted to answer your challenge questions before the Security Code is generated. The Security Code will be sent to the email address in your profile. You will be required to login again with your User ID, Password and Security Code.
You may also call your Application Help Desk to obtain a Security Code.
After you receive the Security Code using this link or from your Help Desk, you must select the 'One-Time Security Code' option from the MFA Device Type dropdown menu.

Need to Register an MFA Device?
If you have not registered an MFA device and would like to do so now, you may use the "Register MFA Device" link. For security purposes you will be prompted to login again and answer your challenge questions before registering an MFA device.

Password:

MFA Device Type: **Send**

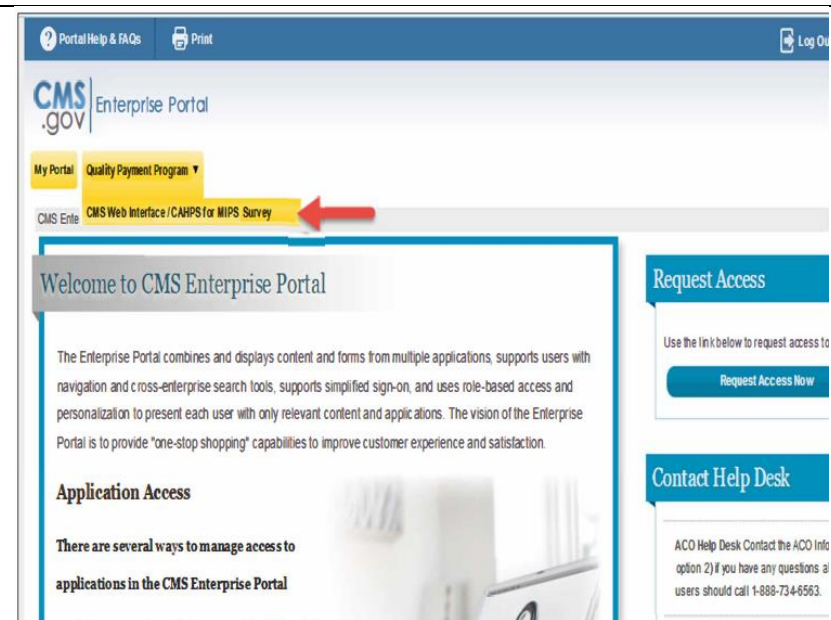
Success

Security Code:

Log In **Cancel**

[Forgot Password?](#)
[Unable to Access Security Code?](#)
[Register MFA Device](#)

27. You will be directed to **CMS Portal Homepage**. Select **Quality Payment Program** and then **CMS Web Interface/CAHPS for MIPS Survey** to register.



If you have questions or need assistance please contact the Quality Payment Program by phone at 866-288-8292 / TTY 877-715-6222 or e-mail at gpp@cms.hhs.gov. Normal business hours are Monday-Friday from 8:00am to 8:00pm ET.