

OPEN PAYMENTS

Creating public transparency into health care industry
& health care provider financial relationships

Special Open Door Forum
Open Payments: Understanding Your
Role as a Covered Recipient

Wednesday March 30, 2022
CMS Open Payments Team



Agenda

- Open Payments: Understanding The Program
- Program Expansion: What you should know
- How you can be involved in Open Payments
- Registration
- Review and Dispute Process
- Question & Answer Session
- Open Payments Resources

Open Payments: Understanding the Program

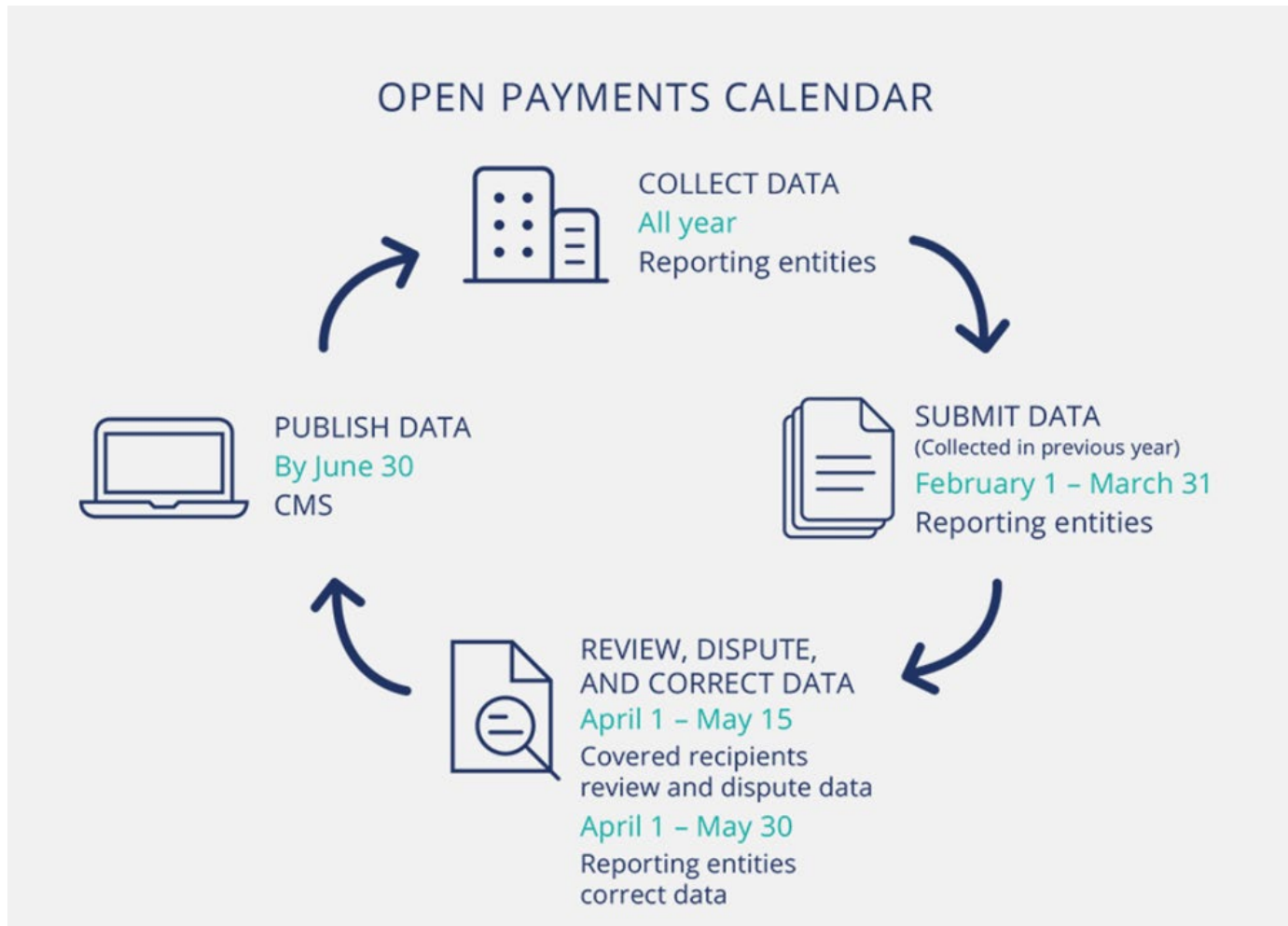
The Program

- Open Payments is a national disclosure program that promotes a transparent and accountable health care system.
- Each year applicable manufacturers and group purchasing organizations (GPOs) collect data regarding payments or transfers of value that they have made to certain health care providers.
- In the following calendar year, the applicable manufacturers and GPOs submit this information to the Centers for Medicare & Medicaid Services (CMS), for publication.
- The program operates on a timeline during which data is collected, reported, reviewed, and published.

Key Terms

- Reporting Entities
 - Refers to pharmaceutical and medical device manufacturers and their distributors who are required to report payments and other transfers of value to Open Payments;
 - Also referred to as applicable manufacturers and applicable group purchasing organizations (GPOs)
- Covered Recipients
 - Health care providers receiving payments or other transfers of value from the reporting entities.
 - Covered recipients specifically includes: Physicians, Physician Assistants, Nurse Practitioners, Clinical Nurse Specialists, Certified Registered Nurse Anesthetists (including anesthesiologist assistants) Certified Nurse Midwives, and Teaching Hospitals
- Non-Physician Practitioners (NPPs):
 - Collectively refers to the additional provider types that were added as covered recipients beginning with Program Year 2021

Open Payments Program Operation



Program Year 2021 Timeline

OPEN PAYMENTS

Program timeline



The Data: What's Reported

- The Open Payments data consist of:
 - Direct or indirect payments or other transfers of value that the reporting entities make to the covered recipients
 - An indirect payment is a payment or other transfer of value made to a third party, where the reporting entity requires, instructs, directs or otherwise causes the third party to provide the payment or other transfer of value in whole or in part, to a covered recipient
 - Certain ownership or investment interests held by physician owners or investors, or their immediate family members
 - Please note that the ownership and investment interest category is not applicable for the non-physician practitioner covered recipients

Payment Categories

- The data reported is divided into three major payment categories
 - General Payments: payments or other transfers of value made that are not in connection with research agreements or research protocol. These payments may include but are not limited to honoraria, gifts, meals, consulting fees, and travel compensation
 - Research Payments: Payments or other transfers of value made in connection with a formal research agreement or research protocol
 - Ownership or Investment Interest: Information about the ownership or investment interest that physicians or their immediate family members have in the reporting entities

Natures of Payment

Applicable to General Payments

- Natures of Payment help to better explain what individual payments or transfers of value were for
- Natures of Payments include:
 - Acquisitions
 - Charitable Contributions
 - Compensation for non-consulting services
 - Compensation for serving as faculty or as a speaker for a medical education program
 - Consulting fee
 - Debt forgiveness
 - Education
 - Food and Beverage
 - Gift
 - Grant
 - Honoraria
 - Long-term medical supply or device loan
 - Royalty or license
 - Space rental or facility fees
 - Travel and lodging

The full list of Nature of Payment categories along with definitions is available at: <https://www.cms.gov/OpenPayments/Natures-of-Payment>. There is also a feature video available to learn more about each category.

Dollar Thresholds that are Reported

- There are specific key thresholds that reporting entities must follow. These reporting thresholds are adjusted annually based on the consumer price index.
 - For a calendar year (January 1 – December 31), if a small payment or other transfer of value is less than the minimum amount for the specific program year, it is excluded from the reporting requirements under Open Payments.

However, if the amount transferred to, requested by, or designated on behalf of a covered recipient exceeds an aggregate total annual amount for the calendar year, all payments or other transfers of value must be reported.

Program Year 2021 & 2022 Reporting Thresholds

Data Collection Period	Small Payment or Other transfer of Value that Must be Reported	Total Annual Amount of Payments or Transfers of Value that Must be Reported
Program Year 2021 January 1, 2021 – December 31, 2021	\$11.04	\$110.40
Program Year 2022 January 1, 2022 – December 31, 2022	\$11.64	\$116.35

Information about the Reporting Thresholds is available on the Open Payments Data Collection Page at:

<https://www.cms.gov/OpenPayments/Program-Participants/Reporting-Entities/Data-Collection>

Published Data – Program Year 2020

- In June 2021, CMS published the Program Year 2020 data along with refreshed data from previous program years
- Prior to the data publication, covered recipients were provided an opportunity to review, affirm and if necessary, dispute any records attributed to them that they believed to be inaccurate or incomplete
- Covered recipients were also able to review the published data and initiate any necessary dispute through December 31, 2021
- On January 21, 2022 the Open Payments data was refreshed to reflect changes that were made after the initial data publication

Snapshot of the Open Payments Data

Program Year 2020



Total U.S. Dollar Value

\$9.03 Billion



Total Records Published

6.36 Million



General Payments
\$2.03 Billion



Research Payments
\$5.88 Billion



Ownership & Investment
\$1.12 Billion



Total companies
making payments:
1,620



Total physicians
receiving payments:
486,975



Total teaching hospitals
receiving payments:
1,212

Program Expansion

Program Expansion: What you need to know as a covered recipient

- On January 1, 2021 the definition of a covered recipient expanded to include five additional provider types:
 - Physician Assistants
 - Nurse Practitioners
 - Clinical Nurse Specialists
 - Certified Registered Nurse Anesthetists & Anesthesiologist Assistants
 - Certified Nurse-midwives
- This expansion applies to Program Year 2021 and subsequent program years. It is not retroactive.
- Program Year 2021 data is currently being submitted by the reporting entities and will soon be ready for covered recipient review!

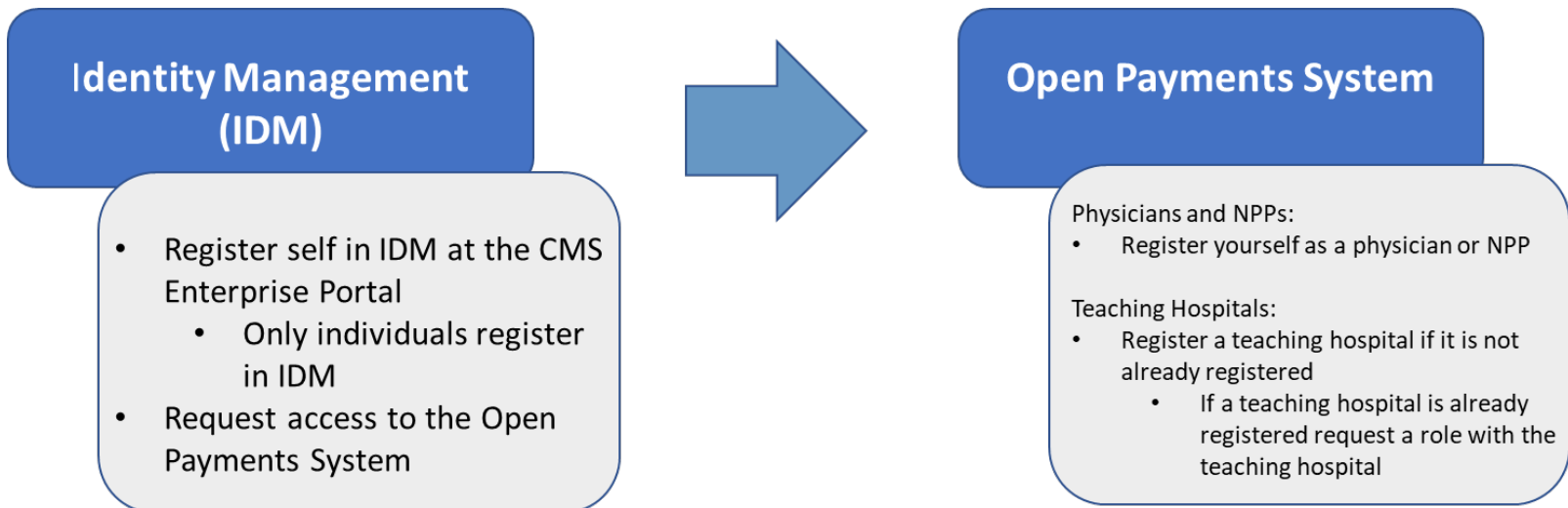
Your Role as a Covered Recipient

Covered Recipients' Role in Open Payments

- Covered recipients may review data that has been attributed to them before it is published and may affirm that it is correct, or dispute data they believe to be inaccurate.
- In order to review and take any actions on the data, covered recipients must register in the Open Payments system
 - Once registered, there are a variety of options to accommodate timely and accurate review of the data, including nominating an authorized representative to review data on your behalf
- **Covered recipient participation in Open Payments is voluntary**
 - CMS encourages registration and participation as this ensure accuracy of the reported data

The Registration Process

- Registration is a two step process
- Successful registration in both the CMS Identity Management System (IDM) and the Open Payments system is required in order to perform Open Payments system-related functions
 - The purpose of the two step process is to prevent others from using a user's identity fraudulently



Note for Previously Registered Physicians & Teaching Hospitals

- Physicians and teaching hospitals who previously registered do not need to register again
 - IDM locks accounts if there is no activity for 60 days or more.
 - To unlock an account, go to the CMS Enterprise Portal, enter your user ID and correctly answer all challenge questions; you'll then be prompted to enter a new password.
 - IDM deactivates accounts if there is no activity for 180 days or more.
 - To reinstate an account that has been deactivated, **call** the Open Payments Help Desk.
- Hospital based physicians must register as physicians, unless they are reviewing and disputing records on behalf of the teaching hospital.
 - Users registering as teaching hospital users must be appropriately authorized by the hospital administration to review and dispute payments made to the hospital.

New User Registration:

Step 1: Identity Management Registration

Detailed information on this step is available in the IDM Registration Quick Reference Guide on the Covered Recipient Resources Page

- New User Registration:
 1. Go to the CMS Enterprise Portal Login Page (<https://portal.cms.gov>) and select the “New User Registration” button
 2. On the “Select Your Application” Page, select “Open Payments” from the dropdown list
 3. Agree to the Terms and Conditions and then select “next” to continue
 4. On the “Register Your Information” page, enter the requested personal information
 5. Create an IDM User ID and Password
 6. Review the information on the “New User Registration Summary” page and make any necessary edits before submitting. Select the “Submit User” button to submit the information
 7. A confirmation will be displayed acknowledging successful registration and that an email notification has been sent to the registered email address. Select the “CMS.gov Enterprise Portal” link in the top left or the “login” link to return to the CMS portal homepage

After successful IDM registration, users should log in with their IDM credentials and , request access to the Open Payments System. The following slide outlines these next steps.

New User Registration:

Step 1: Identity Management Registration (Continued)

- Requesting Access to the Open Payments System
 1. Navigate to the CMS Enterprise Portal at <https://portal.cms.gov> and enter your CMS User ID and Password.
 2. Read the Terms and Conditions of the CMS Enterprise Portal page and select the checkbox next to the “Agree to our Terms and Conditions” link
 3. Select the “Login” button to log in.
 4. You will land on the “Request Application Access” page.
 5. Select Open Payments from the dropdown and select “Next”.
 6. Select "Applicable Manufacturer, GPO, Physician, Non-Physician Practitioner or Teaching Hospital" from the “Role” drop-down menu, then select “Next”.
 7. You will be sent to the identity verification page. Select “Next”. Agree to the terms and conditions. Select “Launch”.
 8. Read the Identity Verification Overview Step #1 and select “Next”.
 9. Accept the terms and conditions Step #2 and select “Next”.
 10. Enter your information and select “Next”.
 11. Enter a justification for being granted the role in the “Reason for Request” field and select “Submit”.
 12. You will see a confirmation pop-up. Select “Ok” to continue.

Open Payments System Registration

Physician & Non-Physician Practitioners

New User Registration:

Step 2: Open Payments System Registration

Physicians & NPPs

Detailed information on this step is available in the Physician and Non-Physician Practitioner Registration Guide available on the Covered Recipient Resources Page

- Registering as a Physician or NPP

1. Log in to the CMS Enterprise Portal and navigate to the Open Payments homepage
2. On the Open Payments homepage, select “Create My Profile”
3. On the “Create Profile” page, select the “Start Profile” button
4. On the “Select Profile Type” page select the “Physician or Non-Physician Practitioner” radio button and select “continue” to begin the registration process
5. Enter personal information
6. Enter the requested physician or NPP Information on the “Covered Recipient Details” page
7. Nominate an Authorized Representative
Note: this is an optional step and if skipped during initial registration you may nominate an authorized representative at a later date/ time
8. Review the information on the “Review and Submit Profile” page and select the “Submit” button to complete registration

Vetting – Physicians and NPPs

- Physicians and NPPs are vetted using information supplied during Open Payments system registration, including:
 - First and last name
 - National Provider Identifier (NPI)
 - State license(s) information
 - Primary type (if no NPI is provided)
- Covered recipients will receive an email confirming vetting success or failure
 - If vetting is unsuccessful, the covered recipient should double check the information provided.
If further assistance is needed, please contact the Open Payments Help Desk
- Physicians and NPPs may nominate one authorized representative to perform system functions on their behalf

Registration Tips for Physicians & NPPs

- Each covered recipient should register themselves directly and not delegate the registration task to another individual
- Be sure to have the following information on hand for registration:

General Information – Required Fields

- First Name
- Last Name
- Business Email Address
- Business Telephone Number
- Primary Practice Address

Other Required Fields

- Primary Taxonomy Type
- Taxonomy Code
- License Number and License State
- National Provider Identifier (NPI)
if the covered recipient has one
- Drug Enforcement Agency (DEA) Number
if the covered recipient has one

Note: If the covered recipient has an NPI, the information supplied during registration in the Open Payments system must match the information (e.g., first and last name) exactly as it is entered within the National Plan & Provider Enumeration System (NPPES) to ensure a successful registration.

Open Payments System Registration

Teaching Hospitals

New User Registration:

Step 2: Open Payments System Registration

Teaching Hospitals

- Registering a Teaching Hospital

1. Log in to the CMS Enterprise Portal and navigate to the Open Payments homepage
 2. On the Open Payments homepage, select “Create My Profile”
 3. On the “Create Profile” page, select the “Start Profile” button
-
4. On the “Select Profile Type” page select the “Teaching Hospital” radio button and select “continue” to begin the registration process
 5. Search for the teaching hospital by selecting the hospital’s state, name taxpayer identification number (TIN), and business address from the drop-down fields
 6. On the “Your Role” page, review your personal information and user role. Edit fields if necessary and select, “continue” to proceed
 7. On the “Nominate Roles” page you may nominate additional individuals to fulfill user rolls
 8. Enter your personal information and select “Continue” to proceed
 9. Review the Information on the “Review and Submit Profile” page and select “Continue” to complete the registration

Teaching Hospital Tips for Registration

- Reference hospital information exactly as it appears on the published Teaching Hospital List located on the Open Payments General Resources Page
- Teaching hospitals can designate up to 10 authorized representatives and authorized officials to act on their behalf in the Open Payments System
 - Please note that the maximum number of 10 is inclusive of both authorized representatives and authorized officials
- Quick Reference Guides are available on the Open Payments Resources for Covered Recipients Page

Review, Dispute & Corrections Process

Program Year 2021 Pre-publication Review & Dispute

- On April 1, 2022 the Pre-publication Review & Dispute period will open for covered recipients
 - During this time covered recipients will have an opportunity to preview the data and dispute attributed payments/ transfers of value they believe to be inaccurate or incorrect in any way
 - Covered recipient Pre-publication review and dispute is from April 1, - May 15, 2022
 - Reporting entities may resolve disputes during the initial pre-publication review and dispute period and are given an additional 15-day correction period from May 16 – May 30, 2022 to resolve any outstanding disputes
- Covered recipients may take the following actions on any data record:
 - Review Records
 - Affirm Records
 - Initiate disputes
 - Withdraw disputes
- Dispute resolution takes place outside of the Open Payments System
 - Covered recipients should work directly with reporting entities to resolve disputes
 - CMS does not mediate or facilitate disputes

Review, Dispute and Correction Timing

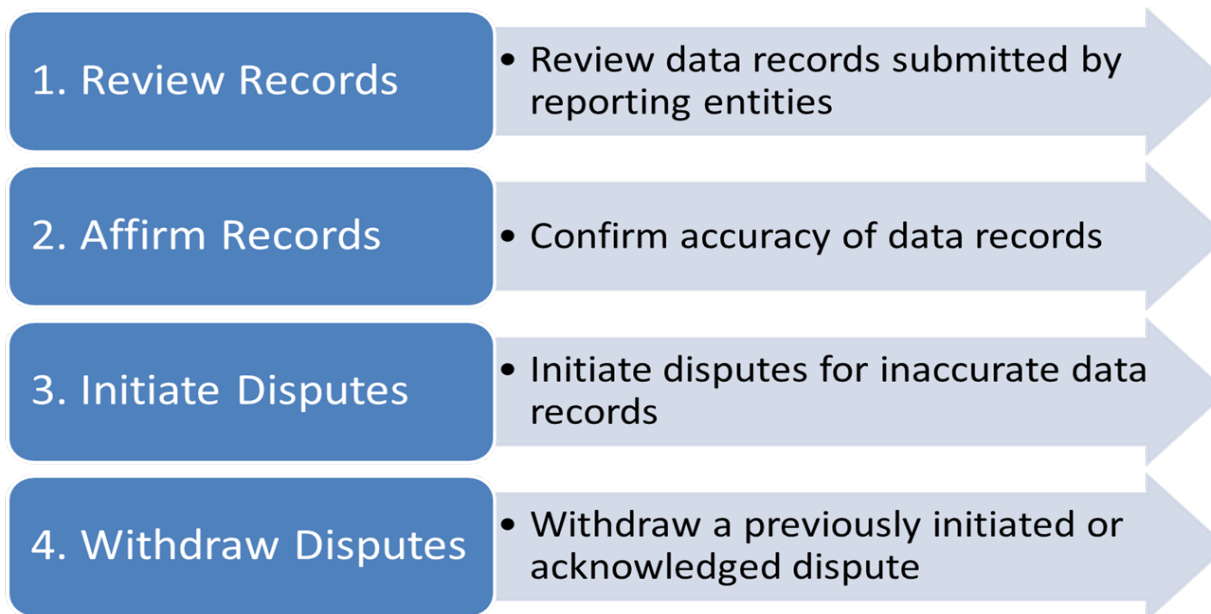
- The review, dispute, and correction period consists of:
 - 45 days for data review and dispute by covered recipients; resolutions can also be made by reporting entities
 - 15 days immediately following the 45-day review period for reporting entities to continue to resolve disputes
- Covered Recipients have until the end of the 2022 calendar year to initiate disputes of data published in 2022.
- Records with a new dispute initiated after the 45-day review and dispute period will be published as original attested-to data in the initial data publication
- Additional details regarding disputes initiated after the 45-day review and dispute period are available in the *Open Payments System Quick Reference Guide – Review and Dispute Timing and Data Publication* (see Resources page of the Open Payments website)

Review & Dispute Impact on Publication

- Disputes initiated within the pre-publication review, and dispute, period and resolved by the end of the correction period (May 30, 2022) will be published and identified as non-disputed in the June 2022 data publication.
- If an initiated dispute is not resolved by the end of the correction period, the record will be published and identified as disputed.
- Disputes initiated or resolved after the full 60-day review, dispute, and correction period will not be reflected in the initial data publication and will be published as original attested-to data.
 - Those disputes and any related data changes will be published in the next publication which may be a refresh publication or the next program year data publication.

Review & Dispute Actions

Review and Dispute Actions Overview



These four actions can be taken by:

- Physicians and NPPs
- Physician and NPP authorized representatives
 - Note: physician and/or NPP authorized representatives must hold the “Dispute Records” access level to affirm, review, and/ of dispute records
- Teaching hospital authorized officials and authorized representatives
- Physician and NPPs identified as principal investigators on any records they are associated with

Review Records

- Covered recipients may review records submitted about them on the “Available for Review and Dispute” tab on the Review and Dispute Payment Records page in the Open Payments system
- On this page, users may review and affirm records, as well as initiate and withdraw disputes
- Reporting entity contact information for a record is available on the “Record ID” page of the record, accessed through the hyperlinked Record ID number

Open Payments (Sunshine Act)
Physician or Non-Physician Practitioner Search User Type

Home Review and Dispute My Profile Messages Resources

Review and Dispute - Tom Smith

Below is the list of all payment records in which the non-physician practitioner or physician is a covered recipient or principal investigator that are eligible for review and dispute this calendar year.
- [Read More](#)

Covered Recipient Records

Program Year: 2021, 2020, 2019, 2018
Entity Making Payment: Please Select
Order By: Please Select
Review and Dispute Status: Initiated, Acknowledged, Resolved No Change, Withdrawn, Resolved
Record ID: Maximum 38 digits
Dispute ID: Maximum 38 digits
Payment Category: General Payments, Research Payments, Ownership or Investment Interest
Affirmed (Yes/No): Yes, No
Reported As: Recipient, Principal Investigator
[Search](#) [Clear All](#)

Showing Results for: [All]

Available for Review and Dispute Deleted and In Progress Records

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Record ID 71158271

Entity Making Payment	ABCDE Medical	Program Year	2018	Record Status	Attested
Record ID	71158271	Affirmed	No	Payment Category	Research Payments
Total Payment Amount	\$7.22	Value of Interest	N/A	Delay in Publication of Research Payment Indicator	No
Date of Payment	2018-12-31	Principal Investigators Associated	Yes	Listed as PI Only	No

[Affirm Record](#) [Dispute Record](#)

Record ID 73770083

Entity Making Payment	ABCDE Medical	Program Year	2018	Record Status	Attested
Record ID	73770083	Affirmed	No	Payment Category	Research Payments
Total Payment Amount	\$7.22	Value of Interest	N/A	Delay in Publication of Research Payment Indicator	No
Date of Payment	2018-12-31	Principal Investigators Associated	Yes	Listed as PI Only	No

[Affirm Record](#) [Dispute Record](#)

Showing 10 of 32 Entries Page 1 of 4 Page 1

Affirm Records

- Affirming records means that the covered recipient confirms that the information in the record is correct
- Affirming records is optional
 - Un-affirmed records will still be published
- Records that have been affirmed may still be disputed

Initiate Disputes

- Covered recipients may initiate disputes on records they believe to be inaccurate
- To initiate a dispute:
 - Find the record in the “Available for Review and Dispute” tab on the Review and Dispute Page. Select the “Dispute Record” button
 - In the Dispute Details and Contact information box, provide the reason(s) for the dispute and contact information
 - Select the “Send Dispute” button
- The reporting entity will receive an email notification of the dispute initiation – they may then acknowledge the dispute in the Open Payments system
- The covered recipient will receive an email notification if/ when the dispute has been acknowledged by the reporting entity
 - Acknowledging a dispute is not a required action for the reporting entities and only serves as a notification
- The dispute status can be viewed in real-time on the Review and Dispute page in the Open Payments system

Withdraw Disputes

- Covered recipients can withdraw a dispute if they no longer wish to proceed with the dispute
- Disputes may be withdrawn after a dispute has been initiated or acknowledged
- Once the dispute is withdrawn, the reporting entity will receive an email notification that a dispute has been withdrawn
- No further action is needed once a dispute is withdrawn

Dispute Resolution

Resolving Disputes

- Reporting entities can resolve disputes in one of two ways:
 1. The dispute can be resolved with changes made to the disputed record
 2. The dispute can be resolved with no changes made to the disputed record
- Covered recipients receive email notifications of resolution status
- If the covered recipient believes that a dispute with a status of “Resolved” has not been sufficiently resolved, they may initiate another dispute on the same record

Resolving Disputes (continued)

- **CMS does not mediate or facilitate disputes**
- Reporting entities and covered recipients should work outside of the Open Payments system to resolve disputes
- If a dispute is resolved by reassigning a record to another covered recipient, the record will no longer appear in your view
- The “Review and Dispute” status of the record will automatically update to “Resolved” once the disputed record has been re-submitted and re-attested by the reporting entity
- When the dispute status is updated, the covered recipient will receive an email notification

Review, Dispute and Correction Impact on Data Publication

- Data corrections made by reporting entities **after** the correction period has closed (May 30, 2022) will not be reflected in the June 2021 data publication
- Data corrections made by reporting entities may be made at any time; data will be updated in the next publication
- In the cases where a dispute cannot be resolved, the latest, attested-to data submitted by the reporting entity will be published and identified as “disputed”
- In addition to the annual data publication CMS updates the data at least once annually to include updates from disputes and other data corrections made since the initial data publication
 - Refresh data includes record updates, disputed records, and record deletions

Take Action

- Register in CMS Identity Management Portal (IDM) and in the Open Payments system – required to review and dispute data
- For records associated with you in the Open Payments system:
 - Review records
 - Affirm records
 - Initiate disputes against any information you feel is incorrect
 - Participate in dispute resolution activities with reporting entities
 - Withdraw disputes if appropriate

Questions & Answers

Open Payments Resources

- **Resources are available on the CMS Open Payments Website**
 - Visit the Covered Recipient Resources Page at: <https://www.cms.gov/OpenPayments/Resources/Covered-Recipients>
 - Watch the Open Payments Overview Video at: <https://www.youtube.com/watch?v=2IT2YjXFP2U>
 - Learn more about the Nature of Payment Categories in our feature video at: <https://www.youtube.com/watch?v=5f5eIDI0cW8>
- **Subscribe to the Open Payments email list to stay up to date on the most recent program updates**
 - Sign up on the Open Payments Contact Us Page at: <https://www.cms.gov/OpenPayments/Contact-Us>
- **Contact the Open Payments Help Desk if you have other questions or need technical assistance**
 - Email: openpayments@cms.hhs.gov
 - Call: 1-855-326-8366 (TTY Line: 1-844-649-2766)