

Quality Payment PROGRAM



If you submitted 2017 Merit-based Incentive Payment System (MIPS) data through the [Quality Payment Program website](#), you can now view your performance feedback and MIPS final score.

You can access your performance feedback and final score by:

- Going to the [Quality Payment Program website](#)
- Logging in using your Enterprise Identity Management (EIDM) credentials; these are the same EIDM credentials that allowed you to submit your MIPS data

If you don't have an EIDM account, refer to [this guide](#) and start the process now

In the coming weeks, CMS will provide additional guidance to help walk through how to review your feedback and to assist in answering your questions.

Please note: The final performance year for the Value-Based Modifier and Physician Quality Reporting System (PQRS) programs was 2016; therefore, CMS will no longer provide PQRS Feedback Reports or Quality and Resource Use Reports (QRURs). The final reports under these programs were provided in September 2017 and remain available for download through the end of this year.

MIPS Eligible Clinicians Participating in Medicare Shared Savings Program or Next Generation ACOs

If you participated in a MIPS Alternative Payment Model (APM) in 2017, specifically in a Medicare Shared Savings Program (Shared Savings Program) or Next Generation Accountable Care Organization (ACO), your performance feedback is now available to your ACO (APM Entity) via the [Quality Payment Program website](#). Participant TINs in Shared Savings Program will be able to log into the [Quality Payment Program website](#) directly to access final performance feedback. Participants in Next Generation ACOs will need to request feedback from a representative (such as a security official) within their APM Entity.

Please note: Because all clinicians in the Next Generation ACO Model were Qualifying APM participants, performance feedback for the 2017 performance year will not be provided.

Under the MIPS APM Scoring Standard, the performance feedback, accessible to the APM Entity, will be based on the APM Entity score and is applicable to all MIPS eligible clinicians within the APM Entity group. This feedback and score does not have any impact on the Shared Savings Program or Next Generation ACOs' quality assessment.

Now Available: MIPS eligible clinicians or groups can request that CMS review the calculation of their 2019 MIPS payment adjustment factor via Targeted Review

MIPS eligible clinicians or groups (along with their designated support staff or authorized third-party intermediary), including those who are subject to the APM scoring standard may request for CMS to review their performance feedback and final score through a process called targeted review.

When to Request a Targeted Review

If you believe an error has been made in your 2019 MIPS payment adjustment calculation, you can request a targeted review until **September 30, 2018**. The following are examples of circumstances in which you may wish to request a targeted review:

- Errors or data quality issues on the measures and activities you submitted
- Eligibility issues (e.g., you fall below the low-volume threshold and should not have received a payment adjustment)
- Being erroneously excluded from the APM participation list and not being scored under APM scoring standard
- Not being automatically reweighted even though you qualify for automatic reweighting due to the 2017 extreme and uncontrollable circumstances policy

Note: This is not a comprehensive list of circumstances. CMS encourages you to submit a request form if you believe a targeted review of your MIPS payment adjustment (or additional MIPS payment adjustment) is warranted.

How to Request a Targeted Review

You can access your MIPS final score and performance feedback and request a targeted review by:

- Going to the [Quality Payment Program website](#)
- Logging in using your Enterprise Identity Management (EIDM) credentials; these are the same EIDM credentials that allowed you to submit your MIPS data. Please refer to the [EIDM User Guide](#) for additional details.

When evaluating a targeted review request, CMS will generally require additional documentation to support the request. If your targeted review request is approved, CMS will update your final score and associated payment adjustment (if applicable), as soon as technically feasible. CMS will determine the amount of the upward payment adjustments after the conclusion of the targeted review submission period. **Please note that targeted review decisions are final and not eligible for further review.**

For more information about how to request a targeted review, please refer to the [Targeted Review of the 2019 Merit-based Incentive Payment System Payment Adjustment Fact Sheet](#) and the [Targeted Review of 2019 MIPS Payment Adjustment User Guide](#).

Now Available: MIPS Targeted Review, Payment Adjustment, and Performance Feedback Resources

CMS has posted new resources on [CMS.gov](https://www.cms.gov) to help eligible clinicians and groups understand their Merit-based Incentive Payment System (MIPS) final score, performance feedback, and payment adjustment, as well as the targeted review process.

The new resources include:

- [MIPS Performance Feedback Fact Sheet](#): Offers an overview of what performance feedback is, who receives the feedback, and how to access it on the Quality Payment Program [website](#).
- [Targeted Review of the 2019 MIPS Payment Adjustment Fact Sheet](#): Details what a targeted review is and when and how to request a targeted review.

[Targeted Review of the 2019 MIPS Payment Adjustment User Guide](#): Provides an overview of the targeted review process, and how to access and complete the targeted review request form.

Now Available: MIPS 2019 Payment Adjustment Fact Sheet

CMS has posted an additional resource on [CMS.gov](https://www.cms.gov) to help eligible clinicians and groups understand their Merit-based Incentive Payment System (MIPS) 2019 payment adjustment based on their 2017 performance.

The [2019 MIPS Payment Adjustment Fact Sheet](#) highlights how CMS assigns final scores to MIPS eligible clinicians, and how payment adjustment factors are applied for 2019 based on 2017 MIPS final scores.

Questions?

If you have questions about your performance feedback or MIPS final score, please contact the Quality Payment Program by:

- Phone: 1-866-288-8292/TTY: 1-877-715-6222 or
- Email: QPP@cms.hhs.gov

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