

# Preview Period: 2022 Performance Information for Doctors and Clinicians

## **Presenters:**

Rosemary Ostmann, RoseComm

Stephanie Kartelias, RoseComm

# Disclaimers

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This publication is a general summary that explains certain aspects of the Medicare Program but isn't a legal document. The official Medicare Program provisions are contained in the relevant laws, regulations, and rulings. Medicare policy changes frequently, and links to the source documents have been provided within the document for your reference.

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# Acronyms

- ACO – Accountable Care Organization
- APM – Alternative Payment Model
- CAHPS – Consumer Assessment of Healthcare Providers and Systems
- CMS – Centers for Medicare & Medicaid Services
- EUC – Extreme and Uncontrollable Circumstances
- HARP – HCQIS (Health Care Quality Information Systems) Access Roles and Profile
- MIPS – Merit-based Incentive Payment System
- PDC – Provider Data Catalog
- QCDR – Qualified Clinical Data Registry
- QPP – Quality Payment Program
- TIN – Taxpayer Identification Number

# EUC Considerations

- All 2022 MIPS performance information that will be previewed and publicly reported met the established statistical public reporting standards.
- No performance information will be publicly reported for MIPS performance categories that were reweighted to 0% through the EUC policy and performance information wasn't submitted to CMS.
- The reweighting or targeted review request may still be in progress, although you'll still be able to preview your 2022 performance information during the Preview Period. You may need to check your updated performance feedback if your performance information (including final score) changes as a result of the targeted review.

# Doctors and Clinicians Preview Period Overview

- Clinicians and groups have an opportunity to review their performance information prior to it being publicly reported on the Medicare.gov [compare tool](#) and in the [PDC](#). The Doctors and Clinicians Preview Period is the first chance for clinicians and groups to review their performance information targeted for public reporting.
- Clinicians and groups who aren't [MIPS eligible](#) (i.e., voluntary reporters) will have the opportunity to opt out of having their performance information publicly reported.
  - If a voluntary reporter has opted into MIPS for purposes of the payment adjustment, they won't be eligible to opt out of public reporting. That is, these reporters' performance information will be publicly reported.
- Clinicians and groups will be able to preview their performance information by accessing the Doctors and Clinicians Preview section of the [QPP website](#).

# Who Should Preview Their Information?

- Eligible clinicians, groups, and virtual groups that submitted MIPS performance information.
- Clinicians, groups, and virtual groups who aren't MIPS eligible but voluntarily submitted MIPS performance information.
- Groups that submitted CAHPS for MIPS Survey data.
- ACOs can view their 2022 MIPS Performance Feedback or 2022 Medicare Shared Savings Program Quality Performance Reports to preview their data. ACO data isn't included in the Preview Period.

# How to Preview Your Information

## Step 1 – Log in

- Log in to the [QPP website](#) using your HARP credentials.
- Forgot your credentials? Go to the [HARP website](#) to recover your user ID or reset your password.
- Don't have a HARP account? View the [QPP Access User Guide \(ZIP, 4.1 MB\)](#) and visit the [HARP registration page](#) to create one.

**Note:** You must log in using a Security Official or Staff User role. You won't be able to preview your information using a Clinician role.

## Sign in to QPP

**USER ID**

**PASSWORD**

Show password

Forgot your user id or password? [Recover ID or reset password](#)

**STATEMENT OF TRUTH**

In order to sign in, you must agree to this: I certify to the best of my knowledge that all of the information that will be submitted will be true, accurate, and complete. If I become aware that any submitted information is not true, accurate, and complete, I will correct such information promptly. I understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.

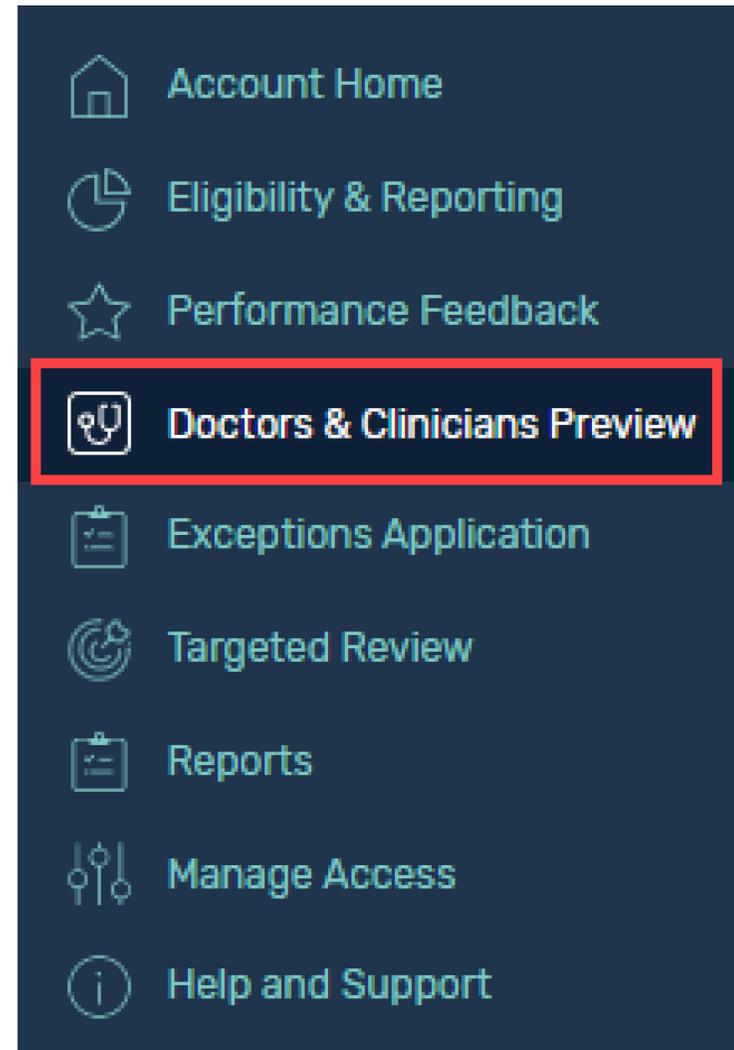
Yes, I agree

[Sign in >](#) [Don't have an account? Register](#)

# How to Preview Your Information

## Step 2 – Navigate to Doctors and Clinicians Preview

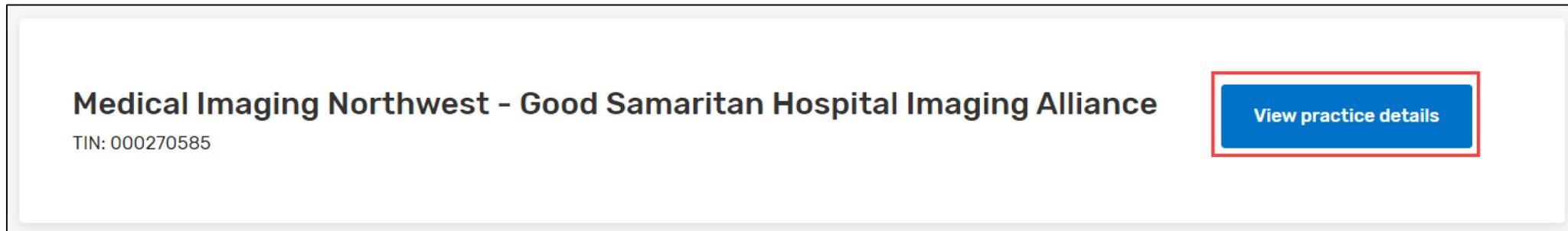
- Select “Doctors and Clinicians Preview” from the left-hand navigation bar.



# How to Preview Your Information

## Step 3 – Select a group or clinician

- For a group, select “View Practice Details” for the group in which you’re interested.



Medical Imaging Northwest - Good Samaritan Hospital Imaging Alliance  
TIN: 000270585

[View practice details](#)

**Note for virtual groups:** If your HARP account is connected to a virtual group, you can preview available performance information by selecting “View Virtual Group Details” on the “Virtual Groups” tab. To preview group performance information, you must first navigate to the “Practices” tab and then select “View Practice Details.”

# How to Preview Your Information

## Step 3 (cont'd) – Select a group or clinician

- If you're a clinician who is part of a group and want to preview individual data, from the group preview landing page, scroll down to the "Connected Clinicians" section and select the "View Individual Preview" button for the individual clinician of interest.

### Connected Clinicians

Below are the clinicians connected to the group above. Select an individual clinician to view their individual 2022 performance information available for preview. If clinicians in your group submitted performance information through more than one group, they may have additional performance information available for preview. Clinicians should preview information under each group through which they submitted data.

SEARCH

Showing 1 - 1 of 1 clinician

Sitalakshmi Iyer at Garcia, Barrera and Johnson

NPI: 0000168639

[View individual preview](#)

**Note for virtual groups:** If your HARP account is connected to a virtual group and you want to preview individual performance information, you must first navigate to the "Practices" tab and then select "View Practice Details." Then, follow the steps at the top of the slide to view clinician performance information.

# How to Preview Your Information

## Step 4 – View quality data

- Select “Quality” from the left-hand navigation.



# How to Preview Your Information

## Step 4 (cont'd) – View quality data

- Review MIPS and QCDR quality data on the Performance tab.
- Review CAHPS for MIPS Survey quality data on the Patient Survey Scores tab (group only).

The screenshot shows a web interface with two tabs: "Performance" and "Patient Survey Scores". The "Performance" tab is selected and highlighted with a red border. Below the tabs, the page displays "MIPS Quality Performance" information, including a link to the Medicare.gov compare tool. It also shows "Quality Performance" star ratings and "Preventive care: General health" measures. A table at the bottom lists measures and their star ratings.

Measure Name	Star Rating
Expand All	
Making sure older adults have gotten a pneumonia vaccine.	★★★★☆

# How to Preview Your Information

## Step 5 – View Promoting Interoperability data

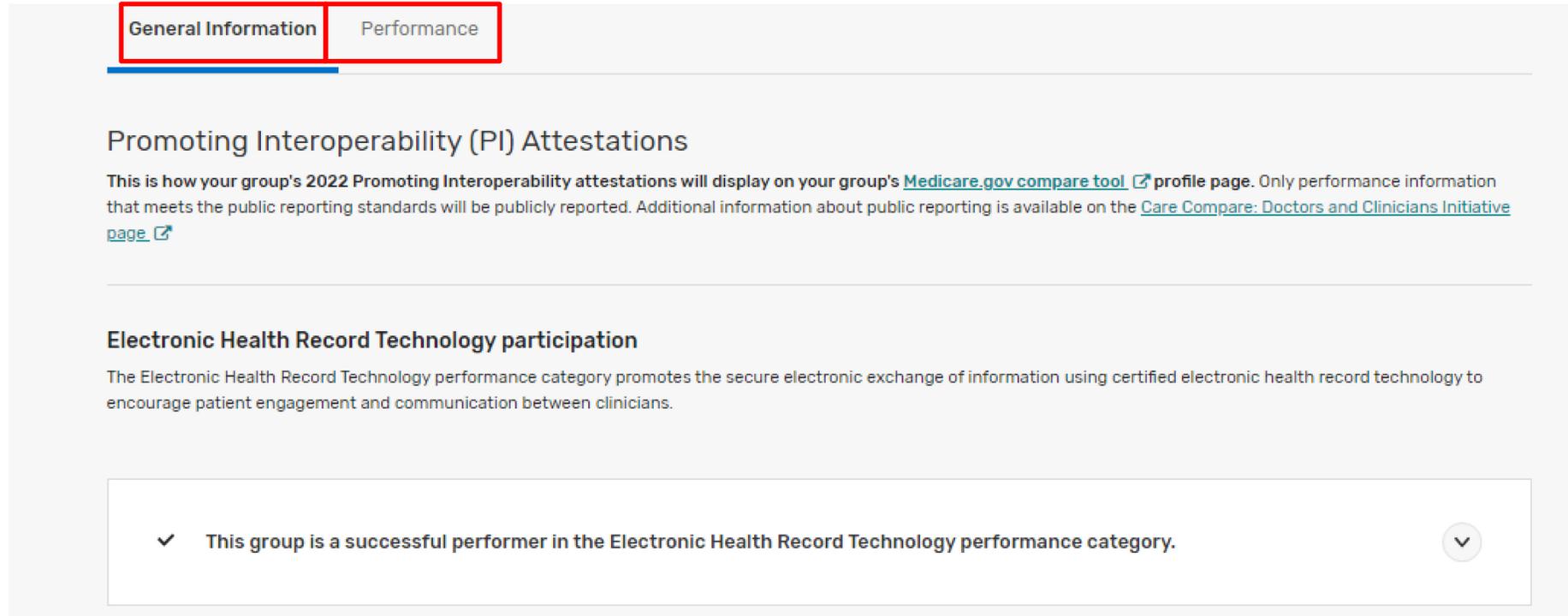
- Select “Promoting Interoperability” from the left-hand navigation.



# How to Preview Your Information

## Step 5 (cont'd) – View Promoting Interoperability data

- Review Promoting Interoperability data on the General Information and Performance tabs.



The screenshot shows a web interface with two tabs: "General Information" and "Performance". The "Performance" tab is active and highlighted with a blue underline. Below the tabs, the section "Promoting Interoperability (PI) Attestations" is displayed. It contains a paragraph explaining that the group's 2022 PI attestations will be displayed on their Medicare.gov profile page, with a link to the Medicare.gov compare tool. Below this, the section "Electronic Health Record Technology participation" is shown, with a paragraph explaining that this category promotes the secure electronic exchange of information. At the bottom of this section, a box contains a checkmark and the text: "This group is a successful performer in the Electronic Health Record Technology performance category." A dropdown arrow is visible on the right side of this box.

# How to Preview Your Information

## Step 6 – View improvement activities data

- Select “Improvement Activities” from the left-hand navigation.



# How to Preview Your Information

## Step 6 (cont'd) – View improvement activities data

- Review improvement activities data.

**Improvement Activities (IA)**

This is how your group's 2022 MIPS Improvement Activities will display on your group's [Medicare.gov compare tool](#) profile page. Only performance information that meets the public reporting standards will be publicly reported. Additional information about public reporting is available on the [Care Compare: Doctors and Clinicians Initiative page](#).

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**Improvement Activities**

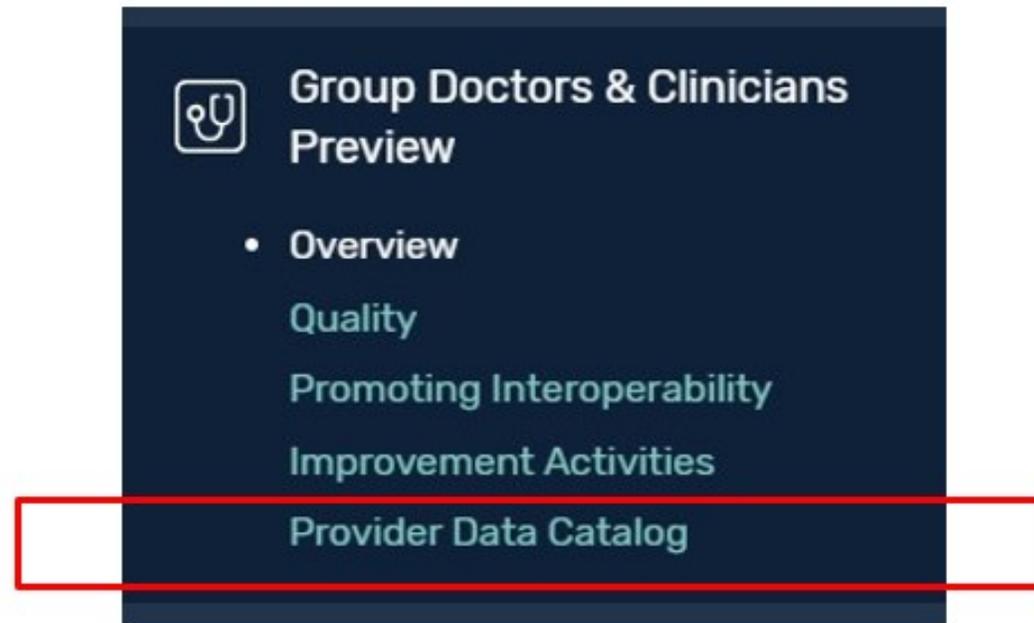
A group can choose from many activities to demonstrate commitment to improving patient care. In 2022, this group participated in the Improvement Activities listed below.

- ✓ Collecting and following-up on patient experience and satisfaction information related to patient engagement.
- ✓ Sharing patient information between clinicians and patients through a program or process, such as a health information exchange, that allows patients to read notes written by their healthcare providers.
- ✓ Creating and carrying out programs aimed at improving clinician well-being.

# How to Preview Your Information

## Step 7 – View PDC data

- Select “Provider Data Catalog” from the left-hand navigation.



# How to Preview Your Information

## Step 7 (cont'd) – View PDC data

- Review sections for performance scores, attestations, performance category scores, and final scores.

**Provider Data Catalog**

This is how your group's 2022 MIPS performance information will be publicly reported in the Provider Data Catalog. Only performance information that meets the public reporting standards will be publicly reported. Additional information about public reporting is available on the [Care Compare: Doctors and Clinicians Initiative page](#).

**Note:** The download function is not available because this is only a preview of what your data will look like in the Provider Data Catalog.

**2022 Provider Data Catalog**

PY 2022 Group Performance Database	▼
PY 2022 Patient Experience Database	▼

# Opt Out of Public Reporting

- Voluntary reporters—clinicians or groups that submitted MIPS performance information but were not MIPS eligible during the performance year—may opt out of having performance information publicly reported.
- Clinicians or groups who opt in to the MIPS payment adjustment can't opt out of public reporting.

# How Voluntary Reporters Can Opt Out of Public Reporting

**Step 1 – Navigate to the “Overview” page and select the “opt out” link.**

Rumford Community Family Health Center Inc.

TIN: 000186508

[Click here to opt out of having your 2022 MIPS performance information publicly reported.](#)

Quality Measures

[PREVIEW DATA](#)

Promoting Interoperability

[PREVIEW DATA](#)

Provider Data Catalog

[PREVIEW DATA](#)

[LEARN MORE ABOUT PUBLIC REPORTING](#)

# How Voluntary Reporters Can Opt Out of Public Reporting (cont'd)

## Step 2 – Verify that you're opting out for the correct clinician or group.

- Review the information and verify that this is you or your group.
- Select the blue “Opt out” button to continue and confirm.

### Opt out of Publicly Reporting Performance Information ×

Rumford Community Family Health Center Inc.  
TIN: 000186508

#### Opt out of Publicly Reporting Performance Information

By selecting to opt out of public reporting, the 2022 performance information your group voluntarily submitted to MIPS will not be publicly reported. Once selected, your group will not be able to opt back in.

Opt out

# How Voluntary Reporters Can Opt Out of Public Reporting (cont'd)

## Step 3 – Confirm your decision.

- Confirm your decision by typing “CONFIRM” and selecting the “Confirm” button.
- This selection is **permanent for the given performance year and can't be changed later**. Once you confirm your decision, you won't be able to opt back in.

### Are you sure?



Rumford Community Family Health Center Inc.  
TIN: 000186508

#### Opt out of Publicly Reporting Performance Information

By selecting to opt out of public reporting, the 2022 performance information your group voluntarily submitted to MIPS will not be publicly reported. Once selected, your group will not be able to opt back in.



This action is permanent and cannot be changed later.

Please type "CONFIRM"

CONFIRM

Cancel

Confirm

# How Voluntary Reporters Can Opt Out of Public Reporting (cont'd)

## Step 4 – Verify that the opt-out was successful.

Rumford Community Family Health Center Inc.

TIN: 000186508

**i** This group did not meet the MIPS group eligibility requirements and has elected to opt out of having their PY 2022 MIPS performance information publicly reported.

Quality Measures

PREVIEW DATA

Promoting Interoperability

PREVIEW DATA

Provider Data Catalog

PREVIEW DATA

# Questions About the Doctors and Clinicians Preview Period?

- Forgot your credentials? Go to the [HARP website](#) to recover your user ID or reset your password. If you're a representative of a Shared Savings Program ACO, contact your ACO to get a HARP account and QPP Security Official or Staff User role via the [ACO Management System \(ACO-MS\)](#).
- Don't have a HARP account yet? Visit the [HARP registration page](#) to create one.
- Contact the QPP Service Center by email at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov), by creating a QPP Service Center ticket, or by phone at 1-866-288-8292, if you have scores that don't match your performance feedback report or if you have questions about the Doctors and Clinicians Preview Period.
  - People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant.
- Visit the [Care Compare: Doctors and Clinicians Initiative page](#) for additional information and resources about the Preview Period, such as the:
  - Guide to the Doctors and Clinicians Preview Period
  - Clinician Performance Information Available for Preview
  - Group Performance Information Available for Preview