2020 Doctors and Clinicians Performance Information: Guide to the Preview Period
November 2021

Overview

The Centers for Medicare & Medicaid Services (CMS) provides the **Doctors and Clinicians Preview Period** for clinicians and groups to preview their Quality Payment Program (QPP) performance information before the data are publicly reported on Medicare Care Compare and the Provider Data Catalog (PDC) (§414.1395(d)). The Doctors and Clinicians section of Care Compare and the PDC are tools that allow Medicare patients and caregivers to find physicians and other clinicians, and incentivize clinicians and groups to improve patient care. Generally, all performance information selected for public reporting must meet our established public reporting standards under §414.1395(b).

This guide describes how to access the **Doctors and Clinicians Preview Period** via the QPP website. Users will need a Health Care Quality Improvement Systems (HCQIS) Access Roles and Profile – or HARP – account to access the QPP website. To learn more about obtaining a HARP account, go to "How do I access the Doctors and Clinicians Preview Period?" in this document or download the QPP Access User Guide (ZIP).

To learn more about public reporting for doctors and clinicians, please visit the Care Compare: Doctors and Clinicians Initiative page.

Contents

> ### *Who should use this guide?*
>
> - Eligible clinicians or groups that submitted Merit-based Incentive Payment System (MIPS) performance information for 2020.
>
> - Clinicians or groups who aren't MIPS eligible but voluntarily submitted 2020 MIPS performance information.
>
> - Clinicians participating in an Alternative Payment Model (APM) that submitted 2020 MIPS performance information.
>
> - Groups that submitted the Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS Survey data for 2020.

What is the Doctors and Clinicians Preview Period?

The Doctors and Clinicians Preview Period is set by CMS to allow clinicians and groups, both MIPS and non-MIPS eligible, to preview their performance information before it's publicly reported on Care Compare and in the PDC.

The secured Preview Period is available through the QPP website. The Doctors and Clinicians Preview Period displays performance information as it will appear on Care Compare profile pages and in the PDC. Performance information targeted for public reporting on profile pages will be previewed and publicly reported in plain language so that it's easily understood by website users. Performance will be displayed as star ratings, percent performance scores, and other indicators such as checkmarks.

The Doctors and Clinicians Preview Period begins on November 15, 2021 and ends on December 14, 2021 at 8 p.m. ET (or 5 p.m. PT).

We encourage you to preview your data as early in the Preview Period as possible. To learn more about public reporting for doctors and clinicians, please visit the Care Compare: Doctors and Clinicians Initiative page.

Why preview?

- The Doctors and Clinicians Preview Period is the first opportunity for clinicians and groups to see what patients will see before their performance information is published on Care Compare and in the PDC.

- Clinicians and groups will be able to see which of the performance information they submitted for 2020 is targeted for public reporting on Care Compare profile pages and in the PDC.

- Clinicians and groups who aren't MIPS eligible and MIPS APM participants who voluntarily submitted 2020 MIPS performance information will have the opportunity to opt out of having their 2020 performance information publicly reported on Care Compare and in the PDC.

Will I have 2020 performance information available for preview?

MIPS eligible clinicians and groups

If you submitted 2020 MIPS performance information as a MIPS eligible clinician, group, or virtual group, you may have performance information available for preview, unless you received an Extreme and Uncontrollable Circumstances (EUC) exception due to the public health emergency (PHE).

Non-MIPS eligible clinicians and groups

If you're a clinician, group, or virtual group who submitted MIPS performance information but were not MIPS eligible during 2020, you're considered a voluntary reporter and may have performance information available for preview. The 2020 MIPS performance information submitted by voluntary reporters is available for public reporting unless they opt out of public reporting.[1] Voluntary reporters may opt out of having their performance information publicly reported during the Doctors and Clinicians Preview Period (82 FR 53830).

APM participants

Clinicians with a Taxpayer Identification Number (TIN)/National Provider Identifier (NPI) who participated in a MIPS APM in 2020 may opt out of having measure- and attestation-level performance information publicly reported. MIPS final scores and performance category scores earned by clinicians who participated in MIPS APMs will be publicly reported in the PDC.

MIPS performance information submitted by a Qualifying APM Participant (QP) in an Advanced APM as an individual won't be publicly reported on the clinician's profile page. Voluntary reporting doesn't apply to clinicians who participated in an Advanced APM and were considered QPs during 2020.

MIPS performance information submitted by eligible clinicians in APMs that are neither an Advanced APM nor a MIPS APM may be publicly reported on their clinician profile pages, unless they received an EUC exception due to the PHE.

What 2020 performance information will be available for preview?

A subset of 2020 performance information is targeted for public reporting and available for preview. To find out what 2020 performance information will be available for preview and is targeted for public reporting on Care Compare and in the PDC, download these documents from the Care Compare: Doctors and Clinicians Initiative page:

〉 Clinician Performance Information on Medicare Care Compare: 2020 Doctors and Clinicians Public Reporting

〉 Group Performance Information on Medicare Care Compare: 2020 Doctors and Clinicians Public Reporting

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[1] Clinicians or groups who opt in to the MIPS payment adjustment can't opt out of public reporting.

Doctors and Clinicians Preview Period User Guide

Medicare Shared Savings Program (Shared Savings Program) Accountable Care Organizations (ACOs) and Next Generation Model ACOs can preview their performance information via their 2020 MIPS Performance Feedback Reports. Shared Savings Program ACOs can also review quality performance information on their previously provided 2020 Quality Performance Reports. A list of ACO performance information targeted for public reporting is available on the Care Compare: Doctors and Clinicians Initiative page in the downloadable 2020 ACO Performance Information document. ACO level data is not available for viewing during the Preview Period.

How can I check if I have 2020 performance information available for preview?

You can check if you have 2020 performance information available for preview by logging in to the QPP website and accessing the Doctors and Clinicians Preview Period. Detailed instructions on how to log in to the website are included in the section titled, "How do I access the Doctors and Clinicians Preview Period?". For more information about how to preview your performance information once you're logged in, go to the section titled, "How do I navigate the Doctors and Clinicians Preview Period?".

You also can check if you or your group have performance information available for preview by emailing the QPP Service Center (QPP@cms.hhs.gov). We'll check your preview status for you.

To check your Doctors and Clinicians Preview status via email, please follow the steps below.

1. Click on the "Check your preview status" button below.
2. In the body of the email, include the NPI and name of the clinician (or Legal Business Name of the group) you're inquiring about.
3. The Doctors and Clinicians support team will respond to your email within 24-48 hours.

<div style="text-align:center">

Check your preview status

</div>

How do I access the Doctors and Clinicians Preview Period?

To log in to the QPP website and access the Doctors and Clinicians Preview Period, please follow the steps below.

1. **Establish a HARP account.**

   Go to the QPP website, QPP.cms.gov, and click **Sign In** on the upper right-hand corner. If you have credentials that let you sign in to QPP.cms.gov, enter your **User ID** and **Password** in the requested fields to sign in and **stop** here. You DON'T need to register.

   If you've never signed in to QPP.cms.gov, you'll need to **register** with HARP to obtain appropriate credentials in order to sign in.

   > **Step 1.** Go to QPP.cms.gov/login.

Step 2. Click the **Register** tab at the top of the page, or the **Register** link next to Sign In (see next page).

Step 3. Click **Register** with HARP at the bottom of the page, at which point you'll be redirected to the HARP site to complete your registration.

For full directions and screen shots, please download the QPP Access User Guide (ZIP).

2. Connect to an organization and choose a role.

In addition to an active HARP account, you'll also need to be connected to the right organization and have the appropriate HARP user role to log in to the QPP website to access the Doctors and Clinicians Preview Period. There are 2 roles in HARP: Security Official and Staff User. Each organization will need a Security Official before any Staff User roles can be requested.

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.

For more information, please download the QPP Access User Guide (ZIP). This zip file contains 4 documents:
  〉 Before You Begin
  〉 Register for a HARP Account
  〉 Connect to an Organization
  〉 Security Officials: Manage Access

Questions?
  〉 Contact the QPP Service Center at 1-866-288-8292 (Monday-Friday 8 a.m. - 8 p.m. ET) or by e-mail at QPP@cms.hhs.gov.

3. Log in to the QPP website.

a. Go to QPP.cms.gov and click **Sign In** on the upper right-hand corner.

b. To log in to the QPP website, you need to use your HARP credentials and have an appropriate user role associated with your organization (steps 1 and 2).

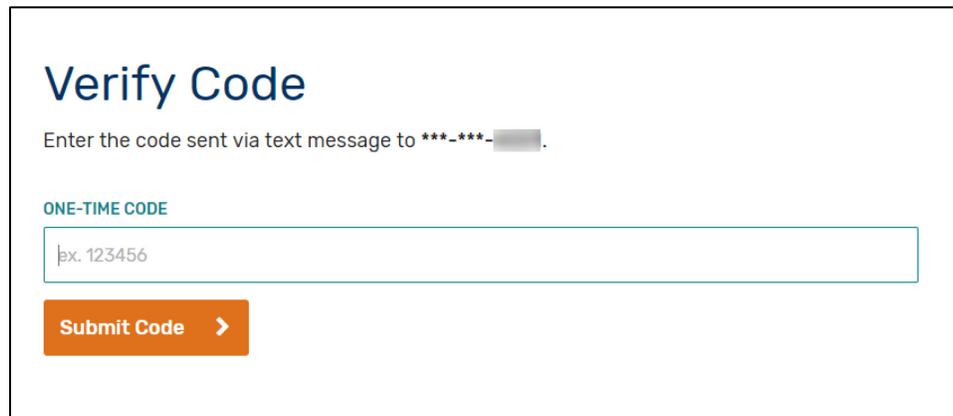Use your HARP user ID and password to log in.
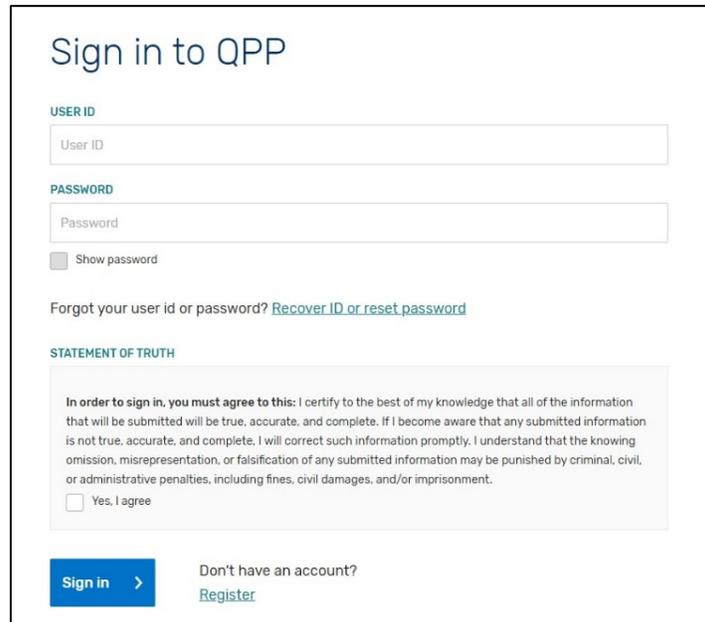
c. Depending on the Multi-Factor Authentication (MFA) method you chose when setting up your HARP account, complete the second step in the verification process.

Example screen of text message MFA method:

4. **Access the Doctors and Clinicians Preview Period.**

Once you've successfully logged in to the QPP website, select the "Doctors and Clinicians Preview" link in the left-hand navigation panel (next to the stethoscope icon). Please make sure that you're logged in with a Security Official or Staff User role. You won't be able to preview your information using a Clinician role.
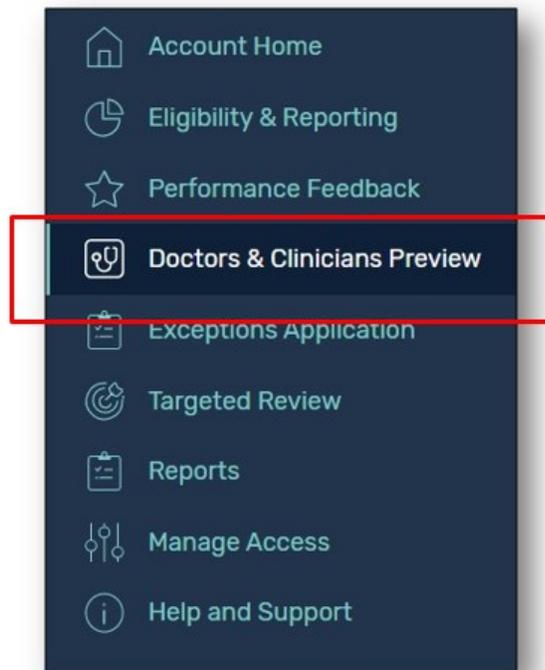
How do I navigate the Doctors and Clinicians Preview Period?

To navigate the Doctors and Clinicians Preview Period, please follow the steps below.

1. **After selecting "Doctors and Clinicians Preview," select the "View Practice Details" button for the group[2] in which you're interested.**

   If you're an individual clinician who submitted performance information as part of a group, please proceed to **Step 2**.

   To preview group information, please proceed to **Step 3**.

   Note: If neither your group nor any clinicians connected to your group have performance information selected for public reporting and, therefore, have nothing to preview, the "View Practice Details" button won't display. Groups that don't have performance information to preview, but that are connected to clinicians who do have performance information to preview, will have a button to "View Practice Details." If selected, groups will see a message informing

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[2] If your HARP account is connected to a virtual group, you can preview available virtual group 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" to preview group performance information.

them that the group has no performance information to preview, but they'll still be able to preview clinician performance information.

2. **If you're a clinician who wants 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.**

   Note: If you, as an individual clinician, don't have performance information available for public reporting and, therefore, have nothing to preview, your name won't appear under the list of connected clinicians.

3. **Overview page:**

   The Overview page appears for all users who have 2020 QPP performance information available for preview. Depending on the measures that you or your group reported, you may see 1 to 4 different pages.

Utilization Data: As required by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), the PDC includes utilization data, which provides information on services and procedures provided to Medicare beneficiaries by clinicians. A subset of the 2019 utilization data will be available in the PDC. Visit the Care Compare: Doctors and Clinicians Initiative page for a list of the 2019 utilization data selected for public reporting in the PDC. To preview your 2019 utilization data before it's displayed in the PDC, please view the publicly available 2019 utilization file.

4. **Quality page.**

The Quality page appears only if:

> You or your group have 2020 MIPS and Qualified Clinical Data Registry (QCDR) quality performance information available for public reporting on your Care Compare profile page; and/or

> Your group has 2020 CAHPS for MIPS performance information available for public reporting on your Care Compare profile page.
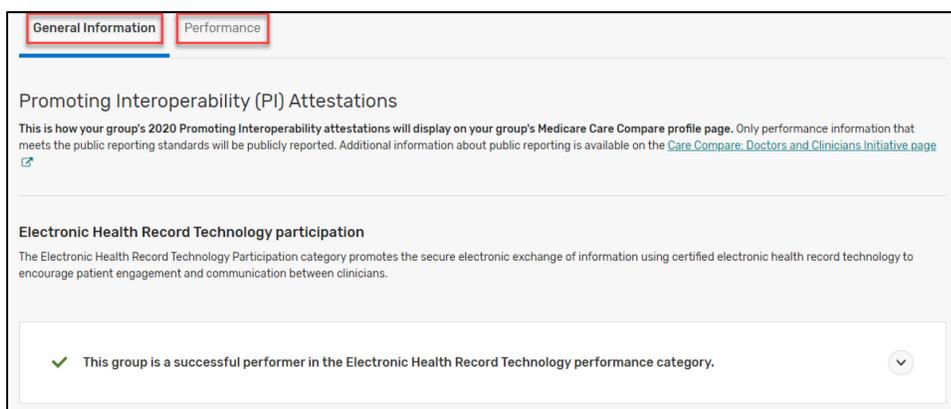
On the Quality page, you or your group may see up to 2 different tabs **(Performance and/or Patient Survey Scores)**, depending on the 2020 measures you or your group submitted:

〉 **Performance**: This tab shows the 2020 MIPS and QCDR quality performance scores as star ratings and in plain language.

〉 **Patient Survey Scores**: For groups only, this tab shows the 2020 CAHPS for MIPS performance scores as top-box percentages[3] and in plain language.

5. Promoting Interoperability page.

The Promoting Interoperability page appears only if:

〉 You or your group achieved a "successful performer" checkmark in the 2020 Promoting Interoperability category;

〉 You or you group attested negatively to one or more of the 2020 prevention of information blocking attestations; and/or

〉 You or your group has 2020 MIPS Promoting Interoperability performance information available for public reporting on your Doctors and Clinicians profile page.

On the Promoting Interoperability page, you or your group may see up to 2 different tabs **(General Information and/or Performance),** depending on the 2020 information you or your group submitted:

〉 **General Information**: This tab shows the 2020 MIPS Promoting Interoperability "successful performer" checkmark,[4] Promoting Interoperability information blocking indicator[5], and

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[3] Top-box scores represent the percentage of patients who reported the most positive responses. More information about top-box scores is provided by the Agency for Healthcare Research and Quality (AHRQ) in the following guide: How to Report Results of the CAHPS Clinician & Group Survey.

[4] Promoting Interoperability performance category scores above zero will be used to indicate on the Doctors and Clinicians profile pages that the clinician or group successfully reported the Promoting Interoperability performance category. A score of 50 or above indicates that the clinician achieved the base score for the Promoting Interoperability performance category (83 FR 59913).

[5] CMS will publicly report an indicator on the Care Compare profile pages if a clinician or group attested negatively to one or more of the 2020 prevention of information blocking attestations (85 FR 25577 – 85 FR 25578).

Promoting Interoperability attestations, if applicable. All are displayed using plain language descriptions.

〉 **Performance**: This tab shows the 2020 MIPS Promoting Interoperability performance scores as star ratings and in plain language.

6.   Improvement Activities page.

The Improvement Activities page appears only if:

〉 You or your group have the 2020 MIPS improvement activities available for public reporting on your Care Compare profile page.
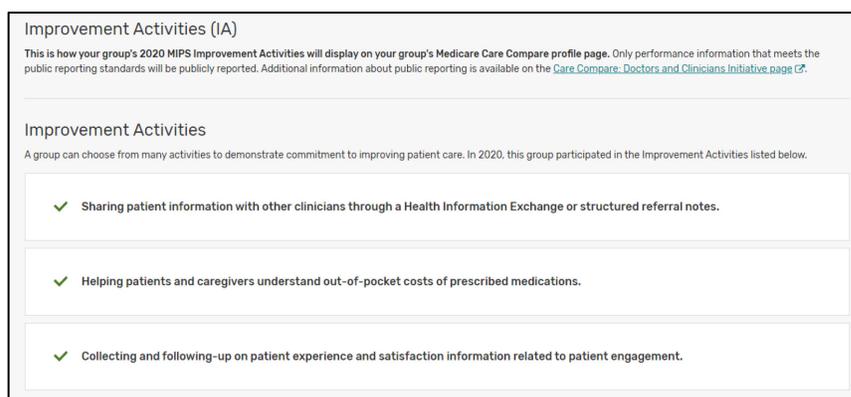
On the Improvement Activities page, you or your group will see a list of the 2020 improvement activities targeted for public reporting on your profile page. Activities will be listed using checkmarks and plain language.

7.   Provider Data Catalog page.[6]

The PDC is an online collection of datasets that provides researchers and other interested stakeholders direct access to view and download the official data used on Care Compare. All data included on the Care Compare profile pages will be included in the PDC. Additionally, data that meet all of the statistical public reporting standards but were not selected for public reporting on the profile pages will also be included in the PDC.

Note: The download function isn't available during the Doctors and Clinicians Preview Period because this is only a preview of what your data <u>may</u> look like in the PDC.

The PDC page appears only if:

〉 You or your group have performance information available for public reporting in the PDC. This may include:

    a)   Quality measures
    b)   Promoting Interoperability measures and attestations

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[6] Any 2020 information publicly reported on Care Compare must be designated as available for public reporting in the Calendar Year 2020 Quality Payment Program Final Rule. Measures publicly reported in the PDC must have a sufficient number of reporters and meet our statistical reporting criteria. This means measures must be deemed statistically valid, reliable, accurate, and comparable. Performance scores for all measures that meet these statistical criteria are available for inclusion in the PDC to support CMS's goal of increased transparency.

c) Improvement activities attestations

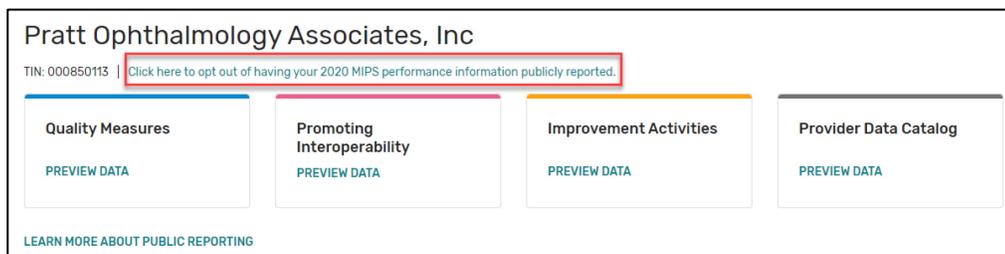d) Clinician final scores and performance category scores
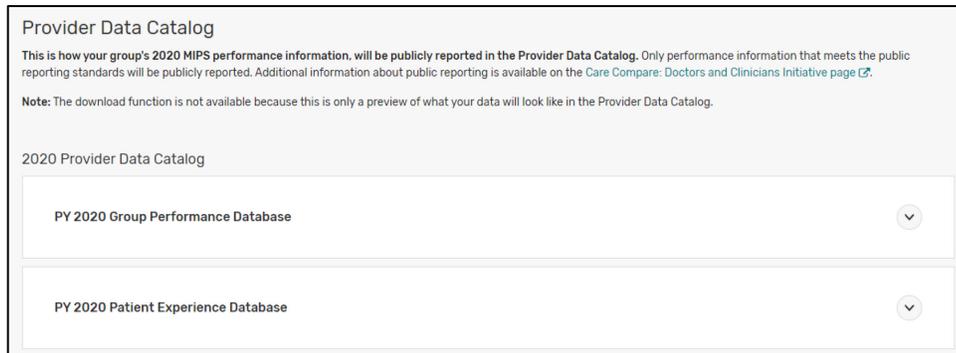
On the PDC page, you or your group may see one or more of the following tables, depending on the 2020 performance information you or your group submitted:

(1) **2020 [Clinician/Group] Performance Database:** This table includes performance information from the quality, Promoting Interoperability, and improvement activities performance categories as they'll appear in the PDC.

(2) **2020 Patient Experience Database:** This table includes group CAHPS for MIPS scores reported as they'll appear in the PDC.

(3) **2020 Clinician Final Score and Performance Category Scores Database:** This table includes clinician final scores and quality, Promoting Interoperability, improvement activities, and cost performance category scores as they'll appear in the PDC.

How do I opt out of having my 2020 performance information publicly reported?

1. **Navigate to the "Overview" page and select the opt-out link.**

   If you or your group have information targeted for public reporting and are eligible to opt out of having your 2020 performance information publicly reported on Care Compare or in the PDC, you'll see the option to opt out on the Doctors and Clinicians Overview page.
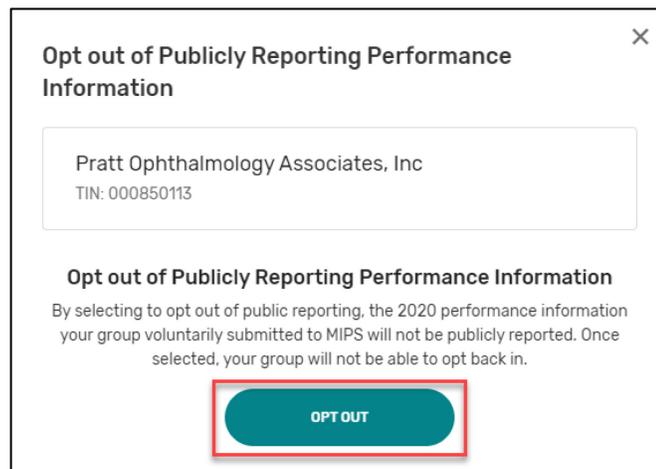
Note: Opting out only applies to the specific reporting entity that the user is actively viewing. For example, if a group opts out, group-level performance information won't be publicly reported; however, clinician-level performance information submitted under that group may still be publicly reported. Similarly, if a clinician submits individual performance information under more than one group, the decision to opt out only applies to their performance information under the group that they're actively viewing.

2. **Verify that you're opting out for the correct group or clinician.**
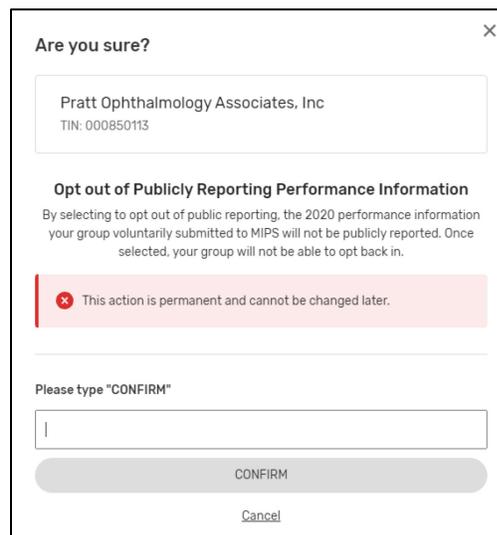
   Once you click on the link in the previous step, a pop-up will appear with your or your group's name and NPI. Review this information and verify that this is you or your group. After reviewing, select the green "Opt out" button to continue and confirm your selection.

3. **Confirm your decision by typing "CONFIRM" and selecting the "CONFIRM" button.**

   This option is permanent and can't be changed later. Once you confirm your decision, you won't be able to opt back in to public reporting for 2020 performance information. Please be aware, this decision only applies to 2020 performance information and doesn't affect public reporting in future years.

4. Verify that the opt-out was successful.

Once you've confirmed your decision, the "Overview" page will now display a message indicating that you've opted out of public reporting.

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TIN: 000850113

ⓘ This group did not meet the MIPS group eligibility requirements and has elected to opt out of having their PY 2020 MIPS performance information publicly reported.

Note: The Doctors and Clinicians Preview Period is the <u>only</u> time you may opt out of having your 2020 performance information publicly reported. Once you confirm your decision to opt out of public reporting, you won't be able to opt back in.

How will targeted review affect which performance information is available for preview and public reporting?

If you have an open targeted review request, you'll still be able to preview your 2020 performance information through the Doctors and Clinicians Preview Period. However, if your performance information (including final score) changes as a result of the targeted review, please check your updated performance feedback. Updated performance feedback is also available through the QPP website (just look for the "Performance Feedback" link in the QPP dashboard). This is important to ensure your targeted review is complete and to preview your updated performance information before it goes live on Care Compare or in the PDC. Please note that updated performance information won't be released on Care Compare or in the PDC until all targeted reviews have been completed.

More ways to learn

Questions about HARP and user roles

For [HARP and user roles assistance](#), **contact the QPP Service Center** at 1-866-288-8292 (Monday-Friday 8 a.m. - 8 p.m. ET) or by e-mail at QPP@cms.hhs.gov. To receive assistance more quickly, consider calling during non-peak hours (before 10 a.m. and after 2 p.m. ET). Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Questions about Doctors and Clinicians public reporting

For questions about public reporting for clinicians, the Preview Period, or performance information, visit the [Care Compare: Doctors and Clinicians Initiative page](#) or contact the QPP Service Center using the information outlined above.