Quality Payment Program (QPP) Performance Information Published on Medicare Care Compare 2021 Doctors and Clinicians Public Reporting

Overview

The Centers for Medicare & Medicaid Services (CMS) is publicly reporting 2021 Quality Payment Program (QPP) performance information on <u>Medicare Care Compare</u> and in the <u>Provider Data Catalog</u> (<u>PDC</u>).

Established by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), the QPP is a quality payment incentive program that recognizes physicians and other eligible clinicians based on value and outcomes in two tracks: the Merit-based Incentive Payment System (MIPS) or Advanced Alternative Payment Models (APMs). Publicly reporting 2021 QPP performance information will help people with Medicare make informed healthcare decisions and incentivize clinicians and groups to maximize their performance.

Publicly Reported 2021 QPP Performance Information

What information is displayed on profile pages?

Both clinicians and groups who are enrolled in Medicare have profile pages on Care Compare. Profile pages include general information useful to Medicare patients and caregivers, such as clinician specialties, practice locations, and phone numbers.

Several indicators are publicly reported on clinician and group profile pages, as applicable (Table 1).

Table 1: 2021 indicators on Care Compare: Doctors and Clinicians profile pages

Icon	Indicator Description
~	A green checkmark and plain language description if a clinician provided some services via telehealth.
	A yellow caution symbol and plain language description if a clinician or group attested negatively to one or more of the 2021 prevention of information blocking attestations.
~	A green checkmark and plain language description if a clinician or group successfully reported the Promoting Interoperability performance category by achieving a 2021 Promoting Interoperability performance category score above zero.
~	A green checkmark and plain language APM description if a clinician or group participated in selected APMs in 2021 (learn more about APM public reporting).

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We also publicly report certain 2021 measure- and attestation-level QPP performance information on clinician and group profile pages to help Medicare patients and caregivers make informed decisions about the clinicians and groups they visit (**Table 2**).

Table 2: 2021 measure- and attestation-level performance information on Care Compare: Doctors and Clinicians profile pages

Performance Information Type	Public Reporting Display	Icon Displayed	# Reported on Clinician Profile Pages	# Reported on Group Profile Pages
MIPS Quality Measures	Measure-level star rating	***	68	81
Qualified Clinical Data Registry (QCDR) Measures	Measure-level star rating	***	8	16
Consumer Assessment for Healthcare Provider and Systems (CAHPS) for MIPS Summary Survey Measures	Top-box percent performance scores	%	NA	6
Promoting Interoperability Measures	Measure-level star rating	***	4	4
Promoting Interoperability Attestations	Checkmark attestation	~	9	9
Improvement Activities	Checkmark attestation	~	105	105



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How does CMS decide which performance information to publicly report?

Only performance information that meets the established public reporting standards is selected for public reporting on profile pages and in the PDC. Quality and cost measures in their first 2 years of use are not publicly reported (§414.1395(c)).

What are the established public reporting standards?

All doctor and clinician performance information on Care Compare and in the PDC must meet the established public reporting standards (§414.1395(b)), except as otherwise required by statute. To be included in the PDC, performance information must:

- Be statistically valid, reliable, and accurate;
- Be comparable across collection types; and
- Meet the minimum reliability threshold, as determined by statistical testing.

To be included on Care Compare profile pages, doctor and clinician performance information must also resonate with Medicare patients and caregivers, as determined by user testing.

What information is available in the PDC?

The primary audiences for the <u>PDC</u> are clinicians, groups, and third-party data users (e.g., third-party intermediaries and researchers).

The PDC includes all 2021 QPP performance information from Care Compare profile pages, additional MIPS performance information that wasn't selected for public reporting on profile pages, and MIPS final scores and performance category scores (quality, Promoting Interoperability, improvement activities, and cost).

The PDC also includes utilization data, which provides information on services and procedures provided to Medicare patients by clinicians, a subset of the 2020 clinician utilization data, and a link to the 2020 QPP aggregate data.

How is Alternative Payment Model (APM) performance information publicly reported?

Information about 2021 APM participation is publicly reported on Care Compare in the following ways:

- Medicare Shared Savings Program ACOs have profile pages with measure-level performance scores for a subset of their quality measures submitted via the <u>APM Performance Pathway</u> (APP).
- Groups that participated in the Shared Savings Program have an indicator of APM participation on their group profile page and are also linked to their affiliated ACO profile pages.
- Clinicians who participated in selected APMs listed below have an indicator on their profile pages:
 - o Bundled Payment for Care Improvement (BPCI) Advanced Model
 - o Comprehensive Care for Joint Replacement Payment Model (CJR)
 - o Comprehensive ESRD Care (CEC) Model



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- o Comprehensive Primary Care Plus (CPC+) Model
- o Direct Contracting (DC) Model
- Independence at Home Demonstration
- Kidney Care Choices Model
- Maryland Total Cost of Care Model
- Shared Savings Program ACOs
- Next Generation ACOs
- Oncology Care Model (OCM)
- Primary Care First (PCF)
- o Value in Opioid Use Disorder Treatment (ViT) Demonstration Program
- Vermont Medicare ACO Initiative

Clinicians who are Qualifying Participants in Advanced APMs do not have clinician-level performance information publicly reported on their Care Compare profile page or in the PDC. MIPS performance information submitted by MIPS eligible clinicians in APMs that are neither an Advanced APM nor a MIPS APM may have clinician-level performance information publicly reported on their Care Compare profile page or in the PDC, unless they received an EUC exception due to the Public Health Emergency (PHE).

Learn More

Visit the <u>Care Compare: Doctors and Clinicians Initiative page</u> to find more resources about the performance information selected for public reporting, such as the following:

- 2021 Group Performance Information
- 2021 Clinician Performance Information
- 2021 ACO Performance Information
- 2021 Measures and Activities Plain Language Crosswalk

Additional information about publicly reported star ratings can be found in the 2021 Doctors and Clinicians Star Ratings Fact Sheet and 2021 Clinician and Group Star Rating Cut-offs documents, which are also located on the <u>Care Compare: Doctors and Clinicians Initiative page</u>.

Get in Touch

For questions or comments about the QPP or public reporting for doctors and clinicians, 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 hard of hearing can dial 711 to be connected to a TRS Communications Assistant.

To receive updates, subscribe to the QPP and Care Compare: Doctors and Clinicians listservs.



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