### Physician Compare Preview Period

### Part II: Accessing and Navigating the Physician Compare Preview Portal

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### Acronyms

- APM Alternative Payment Model
- CAHPS Consumer Assessment of Healthcare Providers and Systems
- CMS Centers for Medicare & Medicaid Services
- HARP HCQIS (Health Care Quality Information Systems)
   Access Roles and Profile

• MIPS – Merit-based

Incentive Payment System

- QCDR Qualified Clinical Data Registry
- QPP Quality Payment
   Program
- TIN Taxpayer

**Identification Number** 





• Accessing and Navigating the Physician Compare Preview Portal\*

<sup>\*</sup>Please note that this is part two of a two-part presentation. The first part is also available and provides background information about Physician Compare.



## Accessing and Navigating the Physician Compare Preview Portal



### **Preview Period Overview**

- Clinicians and groups have a 60-day Preview Period to review their performance information prior to it being publicly reported on Physician Compare (§ 414.1395(d)). The Preview Period will be the first chance for clinicians and groups to review their PY 2018 performance information targeted for public reporting on Physician Compare starting in 2020.
- Clinicians and groups who are not MIPS eligible (i.e. voluntary reporters) and MIPS APM participants who voluntarily submitted PY 2018 MIPS performance information will have the opportunity to optout of having their PY 2018 performance information publicly reported on Physician Compare.
- The Preview Period is targeted to begin on June 22, 2020 at 10:00 a.m. Eastern Time (or 7:00 a.m. Pacific Time) and ends on August 20, 2020 at 8:00 p.m. Eastern Time (or 5:00 p.m. Pacific Time).
   <u>Subscribe</u> to the Physician Compare listserv to receive updates about when the preview period will open.
- Clinicians and groups will be able to preview their performance information by accessing the <u>Quality</u> <u>Payment Program</u>.



#### Step 1 – Log in

- Log in to the <u>Quality Payment Program</u> using your HARP credentials.
- Forgot your credentials? Go to the CMS Enterprise Portal to reset your <u>user ID</u> or <u>password</u>.
- Don't have a user account yet? Visit the <u>CMS</u>
   <u>Enterprise Portal</u> to create one, or call 1-866-288-8292. For TTY: 1-877-715-6222.

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





#### **Step 2 – Navigate to the Physician Compare preview**

• Select "Physician Compare Preview" from the lefthand navigation bar.





#### Step 3 – Select a group or clinician

• For a group, select "View Practice Details" for the group you are interested in.





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

• If you are a clinician 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.





#### Step 4 – View quality data

• Select "Quality" from the left-hand navigation.





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

- Review MIPS and QCDR quality data on the performance tab.
- Review CAHPS for MIPS quality data on the patient survey scores tabs (group only).

	374747		
Perform	Patient Survey Scores		
If your group reporting sta best underst measure title	submitted 2018 Merit-based Incentive Payment System (MIPS) quality in ndards, Physician Compare will display star ratings and measures in plai and performance scores. Star ratings help users accurately evaluate per s can be found in the crosswalks posted on the Physician Compare Initia this is how your 2018 group quality performance data will display on	neasures that are available for public rep n language on your group's profile page to formance scores since these ratings pro- ative Page I. Physician Compare.	orting and meet the public o give users more context to vide a point of comparison. Th
Preventiv Some groups on each mea	e care: General health do a better job than others providing care that keeps patients healthy. sure compared to the best performers.	Medicare gave this group a star rating bas	ed on how well the group did
Preventiv Some groups on each mea	e care: General health do a better job than others providing care that keeps patients healthy. I sure compared to the best performers. Measure Name Expand All	Medicare gave this group a star rating bas	ed on how well the group did



#### Step 5 – View Promoting Interoperability data

• Select "Promoting Interoperability" from the left-hand navigation.





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

• Review Promoting Interoperability data on the general information and performance tabs.

Account Home	Promoting Interoperability
Exclusive Group TIN: 000374747	Exclusive Group TIN: 000374747
😂 Switch Practice 💦 🗲 🗲	
· Group Physician Compare Data	General Information Performance
Overview Quality	Promoting Interoperability (PI) Attestations
Promoting Interoperability     Improvement Activities	If your group submitted PI information in 2018, Physician Compare will display a green check mark (🛩) on your group's profile page to let patients know your group demonstrated the use of secure electronic health record (EHR) technology.
Downloadable Database	If applicable, this is how your 2018 group PI performance information will display on Physician Compare.
	A group can choose from many activities to demonstrate use of secure electronic health record technology. If your group submitted 2018 MIPS Promoting Interoperability attestations, that information may be publicly reported on Physician Compare by displaying a green check mark (✓) on your group's profile page. Physician Compare will display attestations as a checkmark with a plain language title on your group's profile page to give users more context to best understand the attestation. The attestation titles can be found in the crosswalks posted on the <u>Physician Compare Initiative Page</u> G.
	This group is a successful performer in the Electronic Health Record Technology performance category.
	✓ Analyzes security risk and implements electronic security updates.



#### Step 6 – View Improvement Activities data

• Select "Improvement Activities" from the left-hand navigation.





#### Step 6 (cont'd) – View Improvement Activities data

• Review Improvement Activities data.





#### Step 7 – View Downloadable Database data

• Select "Downloadable Database" from the left-hand navigation.





#### Step 7 (cont'd) – View Downloadable Database data

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

#### Downloadable Database

The Physician Compare Downloadable Database is an online collection of datasets on Data.Medicare.gov 🖸 All data included on Physician Compare profile pages will be included in the Downloadable Database. Additionally, data that meet all of the public reporting standards, except for the requirement that it resonates with patients, will also be included in the Physician Compare Downloadable Database. The measure titles can be found in the crosswalks posted on the Physician Compare Initiative Page 🖾. Performance information available for preview in the Downloadable Database may include quality measures, promoting interoperability (PI) measures and attestations, improvement activities (IA) attestations, and Final Score and Performance Category scores (Quality, Cost, Promoting Interoperability, and Improvement Activities).

If applicable, this is how your 2018 group Physician Compare data, including performance category scores, Final Score, denominators, and information about the benchmark and star rating values, will display in the Physician Compare Downloadable Database. Note: The download function is not available because this is only a preview of what your data will look like in the Physician Compare Downloadable Database.

2018 Physician Compare Downloadable Database

PY 2018 Group Performance Database

PY 2018 Patient Experience Database



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### Opt-out of Public Reporting on Physician Compare

 Some clinicians and groups with performance information available for preview may be eligible to opt-out of having their PY 2018 performance information publicly reported on Physician Compare.

#### Voluntary Reporters<sup>1</sup>

- Clinician or group that submitted MIPS performance information but was not MIPS eligible during PY 2018.
- May opt-out of having performance information publicly reported on Physician Compare.

#### Clinicians who participated in a MIPS APM in PY 2018

- May opt-out of having measure- and attestation-level performance information publicly reported on Physician Compare during the 30-day Preview Period.
- MIPS final scores and performance category scores will be publicly reported in the Physician Compare Downloadable Database.

<sup>1</sup>Note: Voluntary reporting does not apply to clinicians who participated in an Advanced APM and were considered QPs during performance year 2018.



# How to Opt-out of Public Reporting on Physician Compare

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

	2018 Physician Compare Preview		
Exclusive Group TIN: 000466369	Overview		
CLIFFORD CLOUD NPI: 0235657968	Clifford Cloud of Exclusive Group NPI: 0235657968   TIN: 000466369		
😂 Switch Practice 💦 👌			
<ul> <li>Individual Physician</li> <li>Compare Data</li> <li>Overview</li> <li>Promoting Interoperability</li> </ul>	Preview your individual clinician 2018 Physician Co performance information through more than one information under each group through which they	ompare performance information by clicking on o group, you may have additional performance infor v submitted data.	ne of the performance categories below. If you submitted mation available for preview. Clinicians should preview
Improvement Activities Downloadable Database	Clifford Cloud TIN: 000466369   NPI: 0235657968   Click her Promoting Interoperability	e to opt-out of having your 2018 MIPS performand	ce information publicly reported on Physician Compare
	PREVIEW DATA	PREVIEW DATA	PREVIEW DATA



### How to Opt-out of Public Reporting on Physician Compare

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

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





### How to Opt-out of Public Reporting on Physician Compare

#### Step 3 – Confirm your decision.

- Confirm your decision by typing "CONFIRM" and selecting the "CONFIRM" button.
- This option is permanent and cannot be changed later.
   Once you confirm your decision, you will not be able to opt back in.

Cliffor NPI: 02	d Cloud of Exclusive Group 35657968   Individual
Op	t-out of Publicly Reporting Performance Data
By select voluntar publicly re	ing to opt-out of public reporting, the 2018 performance data you ily submitted to MIPS as an individual under this group will not be ported. If you submitted other performance information outside or this group, it may still be publicly reported.
🗴 Thi	s action is permanent and cannot be changed later.
ease type	"CONFIRM"



# How to Opt-out of Public Reporting on Physician Compare

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

TIN: 000466369   NPI: 0235657968		
This clinician did not meet the MIPS group	eligibility requirements and has elected to opt out of having th	r PY 2018 MIPS performance data publicly reported.
This clinician did not meet the MIPS group Promoting Interoperability	eligibility requirements and has elected to opt out of having th Improvement Activities	r PY 2018 MIPS performance data publicly reported. Downloadable Database



# Questions about the Physician Compare Preview Period?

- Forgot your credentials? Go to the CMS Enterprise Portal to reset your <u>user ID</u> or <u>password</u>.
- Don't have a user account yet? Visit the <u>CMS Enterprise Portal</u> to create one, or call 1-866-288-8292.
   For TTY: 1-877-715-6222.
- Contact <u>PhysicianCompare-Helpdesk@AcumenLLC.com</u> if you have scores that do not match your performance feedback report or if you have questions about the Physician Compare Preview Period.
- Visit the <u>Physician Compare Initiative page</u> for the following additional information and resources about the Preview Period:
  - Guide to the Physician Compare Preview Period
  - 2018 Clinician Performance Information Available for Preview
  - 2018 Group Performance Information Available for Preview
  - Part I: 2018 Quality Payment Program Performance Information (Presentation)



### Disclaimer

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