Physician Compare Preview Period
Part II: Accessing and Navigating the Physician Compare Preview Portal
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Jennifer Harris:

Welcome to part two of our two-part presentation, focusing on Physician Compare. I'm Jennifer Harris, Nurse Consultant in the Quality Measurement and Value-Based Incentives Group also known as QMVIG, in the Center for Clinical Standards and Quality at the Centers for Medicare and Medicaid Services. QMVIG is responsible for evaluating and supporting the implementation of quality measure programs. These programs aim to assess healthcare quality in a broad range of settings, such as hospitals, clinicians' offices, nursing homes, home health agencies, and dialysis facilities. Our group actively works with many stakeholders to promote widespread participation in the quality measurement, development, and consensus process.

On this slide, we provide a list of acronyms that we use throughout this presentation. This presentation focuses on how clinicians and groups can preview their performance information before it is publicly reported later in 2020. This year's Preview Period is currently underway and it is the first chance for clinicians and groups to review their performance information for the 2018 performance year as it will be publicly reported. As I mentioned, part one of this two-part presentation is also available. Part one provides a brief overview of Physician Compare and an overview of the types of 2018 performance information that will be publicly released on the Physician Compare website later this year. We encourage you to view that presentation as well if you haven't already. Included in both presentations are links to helpful resources. If you have any other questions after either presentation, please email them to the Physician Compare support team. We'll provide that email address at the conclusion of this presentation. I am also joined by a member of the Physician Compare support team, Allison Newsom. Allison, I'm going to turn the presentation over to you.

Allison Newsom:

Thank you. As Jennifer mentioned, during this presentation, I will walk you through how to access and navigate the Physician Compare Preview Portal and review any 2018 performance information you may have available for public reporting.

On this slide, I'll describe a few key points about the Physician Compare Preview Period currently underway.

First, the Preview Period is the first chance for clinicians and groups to view their 2018 performance information targeted for public reporting on Physician Compare starting in 2020. As we go through the presentation, I'll share more details on how to know if you or your group has information available for public reporting and how to preview that information.

Second, the Physician Compare Preview Period is not only for MIPS eligible clinicians and groups. Voluntary reporters, meaning those who are not MIPS eligible but still submitted performance information, can also preview their performance information. During the Preview Period, voluntary reporters and MIPS APM participants who voluntarily submitted 2018 performance information are able to opt-out of having their performance information publicly reported on Physician Compare. MIPS eligible clinicians and groups cannot do this. This Preview Period is the first time that clinicians and groups are able to opt-out of public reporting, so I'll talk through this in more detail later in the presentation.

Third, this year's Preview Period ends on August 20th, 2020 at 8:00 PM Eastern time. Please be sure that you are subscribed to the Physician Compare listserv to receive updates and reminders about the Preview Period. To subscribe to the listserv, download the slides and use the link to sign up.

Finally, clinicians and groups can preview their performance information by accessing the Quality Payment Program website.

I'll now spend some time walking through how to log into the website and preview your performance information. The first step to preview your performance information is to log into the Quality Payment Program using your HARP credentials. A few housekeeping items regarding your HARP account: if you've forgotten your credentials, you can go to the CMS Enterprise Portal to reset your user ID or password. If you don't yet have a user account, please visit the CMS Enterprise Portal to create one or call 1-866-288-8292. To preview your performance information, you must log in using either a Security Official or Staff User role. You are not able to preview your information using a Clinician role. Again, to log in and preview your performance information, be sure you are using a Security Official or Staff User role. A Clinician User role does not allow you to preview your performance information.

Once you've logged into the Quality Payment Program website, you'll want to navigate to the Physician Compare preview section, you can do this by selecting "Physician Compare Preview" from the left-hand navigation. You'll then be taken to the Physician Compare Preview landing page. Up until now, the steps have been the same regardless of whether you want to preview individual clinician or group performance information. The next steps are slightly different, depending on which level of information you want to preview.

To preview group performance information, simply find the group you are interested in and select the "View Practice Details" button to be taken to the group's overview page. There is an additional step needed to preview clinician-level data. From the group overview page scroll down to the "Connected Clinicians" section and select the "View Individual Preview" button for the individual clinician of interest. You will now be on the clinician overview page. I'd like to reiterate that even if you are a clinician and want to preview individual data, or if you are previewing information on behalf of a clinician, you must log into the Quality Payment Program website using a Security Official or Staff User role. Once you are on the desired individual or group overview page, you can start to review the performance information. Please be aware that some clinicians and groups may not have any performance information to preview. This could be because none of the information you submitted was selected for public reporting, or because you did not submit 2018 performance information.

We frequently hear questions about how someone will know if they have performance information to preview. The best way to know if you have information to preview is to log into the Quality Payment Program website and review the Physician Compare section. If you don't have any performance information to preview, you will see a message explaining this on your or your group's page. We are also often asked why clinicians and groups see some measures and activities they submitted to the QPP, but not others. Not all submitted 2018 performance information will be previewed and publicly reported as we are only publicly reporting a subset of the performance information that meets our established public reporting standards. Please refer to part one of the presentation for more information about which performance information was selected for public reporting. I'll also share information at the end of this presentation about who to contact if you have further questions about the availability of your performance information for preview and public reporting.

Now, I'll walk through each of the categories of information to preview starting with quality. To view your or your group's Quality performance information that is targeted for public reporting on profile pages, select "Quality" from the left-hand navigation. Again, if you don't see this link, it's because

you do not have any information to preview for that category. On the quality page, there will be one or both of the tabs shown on the slide, "Performance" and "Patient Survey Scores". This is where you will review your quality performance information targeted for public reporting on profile pages. On the "Performance" tab, you can review MIPS and QCDR quality measures. Both MIPS and QCDR quality measures are reported as star ratings. The performance tab only appears for clinicians and groups with MIPS or QCDR quality data to preview. The "Patient Survey Score" tab only displays for groups that have CAHPS for MIPS measures available to preview. The measures are reported as top box percent performance scores. To preview these scores, be sure to click on the, "Patient Survey Scores" tab.

Promoting Interoperability performance information may also be available for you to preview. The steps for Promoting Interoperability are similar to those for the Quality performance information. Start by selecting "Promoting Interoperability" from the left-hand navigation. If this tab doesn't display, it's because you don't have any Promoting Interoperability information to preview. The Promoting Interoperability page may have one or two tabs depending on which information is available for you to preview, "General Information" and "Performance". On the general information tab, clinicians and groups may see an indicator that they were a successful performer in the electronic health record technology performance category, as well as other promoting interoperability attestations. All information, under general information, is shown as check marks. Promoting interoperability measures are listed under "Performance" and the measures are displayed using star ratings. The information on these tabs is what will be publicly reported on a clinician or group's profile page.

Clinicians and groups can also preview how Improvement Activities will be reported on their profile page. Start by selecting, "Improvement Activities" from the left-hand navigation. On this page, you can preview a list of improvement activities that are targeted for public reporting on your profile page. The improvement activities display as checkmarks.

All of the performance information shown so far, as well as some additional performance and general information not selected for reporting on profile pages, will be publicly reported in a Downloadable Database. Select "Downloadable Database" from the left-hand navigation to see what information will be published for you or your group. On the Downloadable Database page, you'll see all of your performance information that will be publicly reported in the Downloadable Database. Only your or your group's information is displayed.

We are often asked if the Downloadable Database information can be downloaded within the Preview Portal, because the data are not yet publicly reported and this is intended only to be a preview of the data, you cannot download the dataset. We've heard this question in the past, so to emphasize, the performance information previewed on the Downloadable Database page is not downloadable. While reviewing the Downloadable Database section, be sure to expand each collapsible bar on the page. You may have up to two bars shown depending on which information was selected for public reporting. For clinicians, the possible files are the "Clinician Performance Database" and the "Final Score and Performance Category Scores Database". The "Clinician Performance Database" contains performance information targeted for public reporting on profile pages as well as additional performance information that is targeted for public reporting, but was not selected for profile pages. The "Final Score and Performance Category Scores Database", contains performance year 2018 MIPS final and performance category scores.

Another frequently asked question is how to preview clinician utilization data. When the Downloadable Database is publicly released, we'll also be publicly reporting a subset of the performance year 2017 clinician utilization data. Because these data are already publicly available, they are not included in the Physician Compare preview. However, you can still review these data by viewing the public utilization file. There is a link to the file at the bottom of the clinician overview page. Groups may

have up to two files: the "Group Performance Database" and the "Patient Experience Database". Similar to clinicians, the "Group Performance Database" contains MIPS and QCDR Quality, Promoting Interoperability, and Improvement Activities performance information targeted for public reporting on profile pages, as well as additional performance information that is targeted for public reporting, but were not selected for profile pages. CAHPS for MIPS scores are in the "Patient Experience Database".

I mentioned at the top of the presentation that starting with this Preview Period, certain clinicians and groups are able to opt-out of having their 2018 performance information publicly reported. Many clinicians and groups ask how they know if they're eligible to opt-out of public reporting. There are two scenarios in which you or your group may be eligible to opt-out. First, if you are a clinician or group that's submitted MIPS performance information but were not MIPS eligible during performance year 2018, you may opt-out of having performance information publicly reported on Physician Compare. And second, if you are a clinician who participated in a MIPS APM in performance year 2018, you may opt-out of having measure-level and attestation-level performance information publicly reported on Physician Compare during the Preview Period. However, your MIPS final scores and performance category scores will be publicly reported in the Physician Compare Downloadable Database.

Please be aware that voluntary reporting does not apply to clinicians who participated in an Advanced APM and were considered Qualifying APM Participants, or QPs, during performance year 2018. Also keep in mind that the decision to opt-out of public reporting for 2018 performance information is permanent. If you do not opt-out of public reporting, your performance information will still be considered available for public reporting. Only those clinicians and groups who are eligible to opt-out of public reporting are given that option during the Preview Period. For those that this applies to, I'll now walk through the steps to opt-out.

The first thing you'll want to do is navigate to the "Overview" page. This is the page you get to after selecting "View Practice Details" or "View Individual Preview". If you or your group are eligible to opt-out, you'll see a link that says, "Click here to opt out of having your 2018 MIPS performance information publicly reported on Physician Compare". Select this link. Once you've selected the link, you'll see a screen showing the clinician or group name, please review this information carefully and verify that this is you or your group. Then, select the "Opt-Out" button to continue and confirm. Please remember this decision is permanent and cannot be changed later.

Once you confirm your decision, you will not be able to opt back in to having your 2018 performance information publicly reported, so please consider this decision carefully. If you are sure you want to opt-out of public reporting, confirm your decision by typing, "Confirm," and selecting the "Confirm" button. After selecting confirm, please verify that the opt-out was successful. At this point, you will no longer see a link to opt-out of public reporting, instead you'll see a message indicating that you have chosen to opt-out of having your 2018 performance information publicly reported. Now, back to Jennifer Harris.

Jennifer Harris:

This concludes part two of our presentation. Before we close, I want to remind you to also access part one of this two-part presentation, which provides an overview about Physician Compare and the performance information that will be publicly reported on Physician Compare. If you have a question about the Physician Compare Preview Period that we didn't answer, or if you have feedback about what we presented here, we encourage you to reach out to the Physician Compare support team at physiciancompare-helpdesk@acumenllc.com. Please know you can always find more information on the Physician Compare Initiative page on cms.gov. To find that webpage, search cms.gov for Physician

Compare. We will be posting information from this presentation on the Initiative page as well. You will also find the list of useful links we discuss on that page. Thank you for taking the time to access this Preview Period presentation. We appreciate your participation and interest in Physician Compare. We look forward to continuing to work together.