Quality Payment

Merit-based Incentive Payment System (MIPS)

2023 Targeted Review Guide





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Purpose: The purpose of this guide is to describe what a targeted review is, provide step-by-step instructions on how to complete the request form, and explain what to do after submitting your request.





How to Use This Guide

How to Use This Guide

Please Note: This guide was prepared for informational purposes only and isn't intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It isn't intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Table of Contents

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Hyperlinks

Hyperlinks to the <u>Quality Payment Program</u> <u>website</u> are included throughout the guide to direct the reader to more information and resources.





Introduction

What Is a Targeted Review?

On August 12, 2024, the Centers for Medicare & Medicaid Services (CMS) released Merit-based Incentive Payment System (MIPS) performance feedback and final scores for the 2023 performance year, and the associated MIPS payment adjustment information for the 2025 payment year.

Targeted review is the process through which Quality Payment Program (QPP) participants can request that CMS review the calculation of their 2025 MIPS payment adjustment. There's a **60-day period** to request a targeted review for the 2023 performance year, beginning with the release of 2025 payment adjustments.

The last day you can submit a targeted review for the 2023 performance year is **October 11, 2024,** at 8 p.m. ET.

While you have 60 days to complete your request, you should request a targeted review as soon as possible if you identify an error(s) with your MIPS final performance feedback and MIPS payment adjustment factor(s). This will help ensure that the correct payment adjustment is applied to your claims from the start of the 2025 payment year.

Did you know?

The targeted review timeline will change for the 2024 performance year (2026 payment year).

As finalized in the <u>CY 2024 Medicare Physician Fee Schedule Final Rule</u>, the 2024 targeted review period will open when final scores are released and will close 30 days after the release of 2026 MIPS payment adjustments.



Where Is the Targeted Review Application Located?

You can access the targeted review application by signing into the <u>QPP Website</u>. You need a **Healthcare Quality Information System** (HCQIS) Access Roles and Profile (HARP) account to sign in and access the targeted review application.

Review the <u>QPP Access User Guide (ZIP, 3MB)</u> for instructions on how to create a HARP account. For additional information on HARP, check out the <u>HARP FAQs</u>.

Who Can Request a Targeted Review?

Targeted reviews may be requested by or on behalf of:

- An individual clinician.
- A group.
- A virtual group.
- A subgroup.
- An Alternative Payment Model (APM) Entity (including a Shared Savings Program Accountable Care Organization [ACO]).

Targeted reviews may be requested for traditional MIPS, MIPS Value Pathway (MVP), or APM Performance Pathway (APP) reporting.

Third party intermediaries and designated support staff can submit a targeted review on behalf of program participants.



What Can I Request a Targeted Review for?

As described in section 1848(q)(13)(A) of the Social Security Act, targeted review is limited to the calculation of the MIPS payment adjustment factor(s). You may request a targeted review if you find an error with your 2025 MIPS payment adjustment factor(s) and associated 2023 MIPS performance feedback.

While this isn't a comprehensive list, the following are examples of circumstances for which you may wish to request a targeted review.

- Your performance data was submitted under the incorrect Taxpayer Identification Number (TIN) or National Provider Identifier (NPI).
- You qualified for performance category reweighting because of a special status designation, Promoting Interoperability Hardship Exception, or Extreme and Uncontrollable Circumstances Exception that was incorrectly applied.

What Can't I Request a Targeted Review for?

There are statutory limitations on administrative and judicial review as described in section 1848(q)(13)(B) of the Social Security Act. As such, there will be no targeted review of the following:

- The methodology used to establish the amount of the MIPS payment adjustment factor, the amount of the additional MIPS payment adjustment factor, and the determination of such amounts.
- The establishment of the performance standards and the performance period.
- The identification of measures and activities specified for a MIPS performance category and information made public or posted on <u>Medicare Care Compare</u>.
- The developed methodology used to calculate performance scores and the calculation of such scores, including the weighting of measures and activities under such methodology.

See the following page for examples of valid and invalid targeted review requests.

A targeted review request for any of these reasons will be denied.



Examples of Valid and Invalid Targeted Review Requests

Valid Reasons to Request a Targeted Review						
Denominator Reduction	"I submitted all of the quality measures available to me, but my denominator wasn't reduced."					
Incorrect TIN/NPI	"My data was submitted under the wrong TIN or NPI."					
Special Status Designation	"I have a special status that isn't reflected in my performance category score."					
Incorrectly Scored with an Approved Hardship Exception QP Designation	"I was scored in the [Promoting Interoperability] performance category but was approved for reweighting through a MIPS Promoting Interoperability Hardship Exception application." "I was identified as a Qualifying APM Participant (QP), but I'm not a participant in an Advanced APM."					
Invalid Reasons to Request a Targeted Review						
Final Score and Payment Adjustment Location	"I want to know where I can find my final score and payment adjustment."					
Low Payment Adjustment	"I want to know why my payment adjustment is so low."					
Historical Benchmark	"I disagree with the historical benchmark used to determine my measure's score."					
Misunderstanding of Scoring Policy	"I am confused about the scoring policy used to calculate my measure scores and final score."					
	"A A					
Score Change	"My scores have changed since the submission period."					

Have you experienced an issue with your data? Issues related to inaccurate, unusable, or otherwise compromised data don't fall under the scope of a targeted review and will be denied. If you're requesting performance category reweighting because of inaccurate, unusable, or otherwise compromised performance data, contact the QPP Service Center.





Before You Begin

Overview

To prepare for the targeted review process, you should:

☐ Identify who will request the targeted review

• The targeted review request will be accessible by the person who submits the request ("submitter") and those whom the submitter adds as "additional staff members".

☐ Obtain or access your HARP account

- You must have a HARP account to complete and submit a targeted review request.
 - o New Users: Register for QPP to obtain your HARP credentials.
 - o Returning Users: Confirm that you can sign in to QPP with your HARP credentials.
 - o If you're a Shared Savings Program ACO's QPP Security Official or QPP Staff User contact in the <u>ACO Management System (ACO-MS)</u>, then you can sign in to the QPP website using your ACO-MS username and password.

☐ Gather identifying information and supporting documentation

- Collect the clinician, group, virtual group, subgroup, or APM participants' identifying information.
 - o Clinician NPI and associated practice's legal practicing name.
 - o **Group** The practice's TIN and APM Entity identifier (ID).
 - Legal practicing name.
 - APM Entity Subgroup Subgroup ID.
 - o **Approved virtual group** Virtual Group ID.
- Identify the MIPS reporting option (traditional MIPS, MVP, or APP) and MVP name, if applicable.

You don't need a specific role (for example, security official) for your organization to submit a targeted review request.

Documentation may vary

of the targeted review

request.

based on the circumstances



Overview (Continued)

- □Gather identifying information and supporting documentation (Continued)
 - Collect any documentation that supports your targeted review request. If
 possible, attach supporting documentation with your initial request. Supporting
 documentation may include, but isn't limited to:
 - o Extracts from the MIPS eligible clinician's Electronic Health Record (EHR).
 - o Copies of performance data provided to a third party intermediary by the clinician or group.
 - o Copies of performance data submitted to CMS.
 - o QPP Service Center case numbers.
 - o Signed contracts or agreements between a clinician/group and a third party intermediary.
 - o Proof of your APM participation.
 - o Proof of your MVP registration/participation.
 - o Partial QP election forms.





How to Request a Targeted Review

Overview

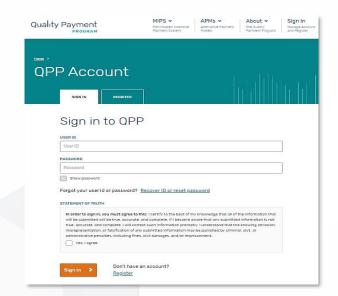
This section of the guide provides step-by-step instructions on how to complete the targeted review request application located within your **QPP** account on the <u>QPP website</u>.

Please note that if you are a Shared Savings Program ACO's QPP Security Official or QPP Staff User contact in the <u>ACO Management System (ACO-MS)</u>, then you can sign in to the QPP website using your ACO-MS username and password. For guidance on how to add the QPP Security Official and QPP Staff User contacts to an ACO in ACO-MS, please refer to the <u>ACO-MS User Access</u> and <u>ACO Contents Tip Sheet</u>.



Step 1: Sign in to your QPP account using your HARP credentials on the QPP website.

- **Don't have a HARP account?** Register for QPP to obtain your HARP credentials.
- Forgot your user ID or password? Recover your HARP credentials.
- Looking for more information about HARP? See the HARP FAQs.





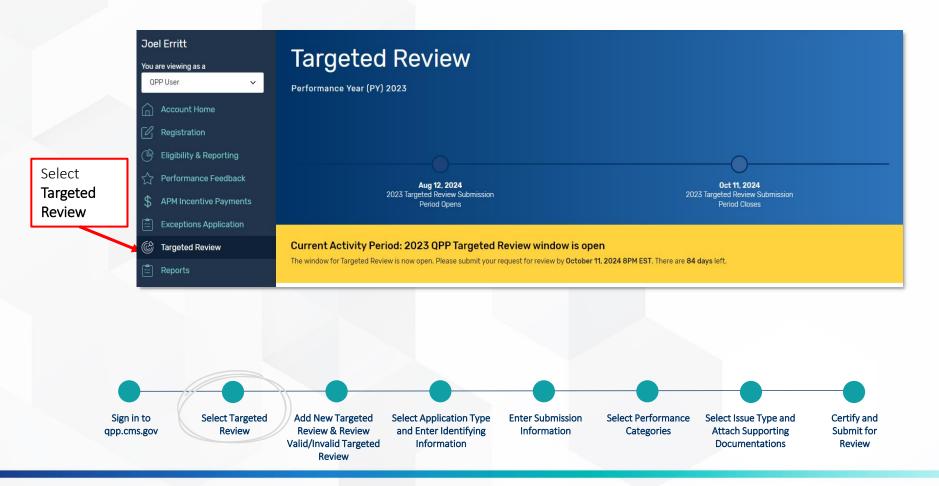
Select Targeted Review Add New Targeted Review & Review Valid/Invalid Targeted Review

Select Application Type and Enter Identifying Information Enter Submission Information Select Performance Categories Select Issue Type and Attach Supporting Documentations Certify and Submit for Review



Step 2: Select Targeted Review

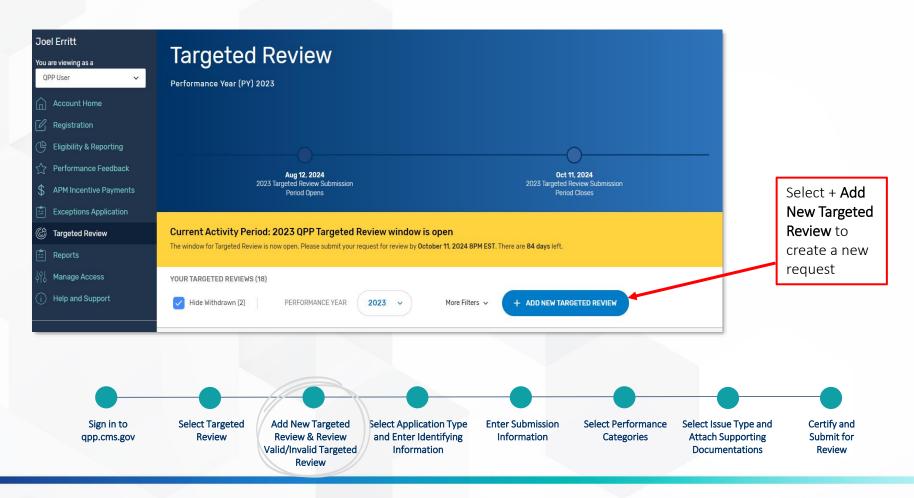
Select Targeted Review from the left-hand navigation pane.





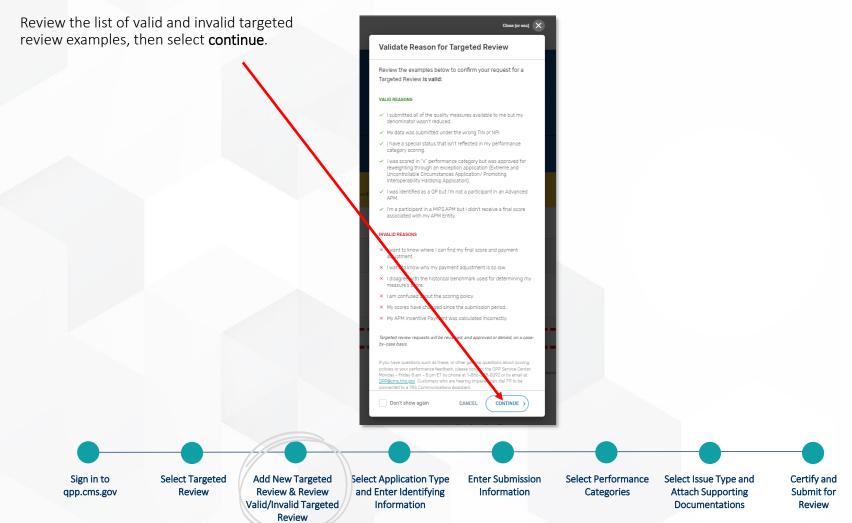
Step 3a: Add New Targeted Review

On the Targeted Review Progress Summary page, select + Add New Targeted Review to create a new targeted review application.



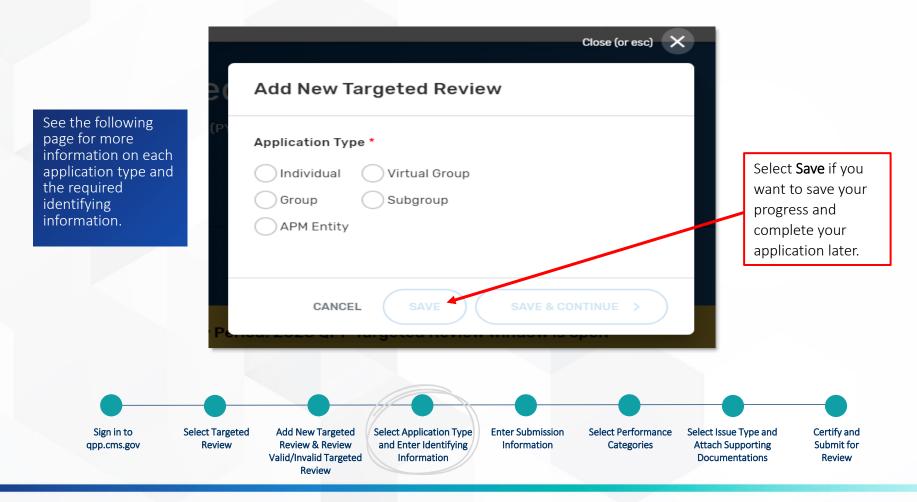


Step 3b: Valid and Invalid Targeted Review Examples



Step 4a: Select Application Type

Select the application type that aligns with how your data was submitted¹ to MIPS for the 2023 performance year. Then select Save & Continue.





Step 4b: Provide Identifying Information

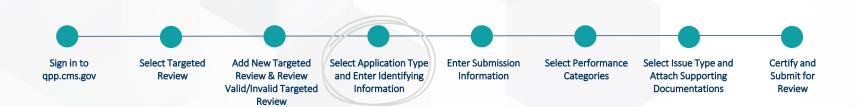
Enter the required **identifying information** based on which application type you choose. Each application type requires a different type of identifying information (for example, individual – NPI; group – TIN).

Note: You have the option to create a name (personal reference only) for your request by clicking the pencil icon next to your request on the **Targeted Review Progress Summary** page.

Application Type	Select if you're	You will be asked to provide the following identifying information
Individual	 Requesting a targeted review of the final score received from individual participation (data submitted for a unique TIN/NPI combination). Requesting a targeted review of a clinician's MIPS eligibility. 	
Group	 Requesting a targeted review of the final score received from group participation (aggregated data submitted for a single TIN on behalf of all eligible clinicians in the practice). 	
Virtual Group	 Requesting a targeted review of the final score received from virtual group participation (aggregated data under a virtual group ID on behalf of all TINs within the virtual group). 	Virtual Group (ID)
Sign in to app.cms.go	Select Targeted Review Review Valid/Invalid Targeted Review Review Review Review Valid/Invalid Targeted Review Review Review Review	Select Performance Select Issue Type and Certify and Categories Attach Supporting Submit for Documentations Review

Step 4b: Provide Identifying Information (Continued)

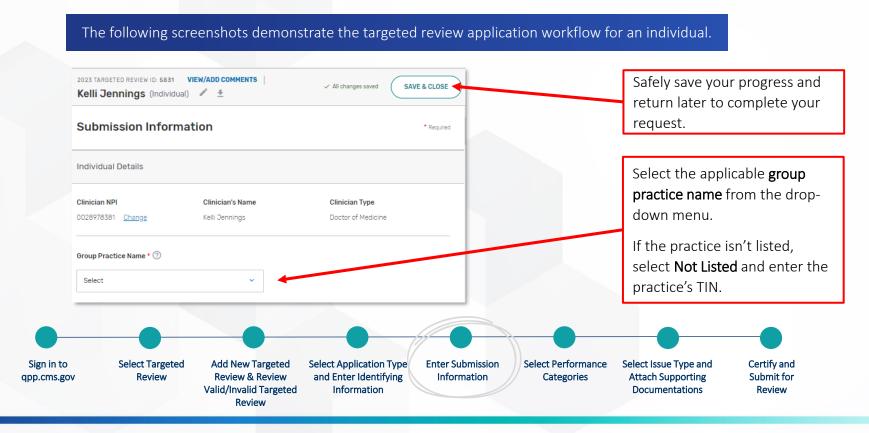
Applicatio Type	n	Select if you're	You will be asked to provide the following identifying information
APM Entit	ту	 Requesting a targeted review of the final score received from APM Entity participation (aggregated data submitted on behalf of all eligible clinicians in the entity) – this includes the "PI Rollup Score". 	
Subgroup	Requesting a targeted review of the final score received from subgroup participation (aggregated data submitted under a unique subgroup ID on behalf of all eligible clinicians in the subgroup). Subgroup ID		Subgroup ID



Step 5a: Submission Information – Individual, Group, Subgroup, Virtual Group, APM Entity Details

Verify the pre-populated information (for example, clinician's name, clinician type, group's name, etc.).

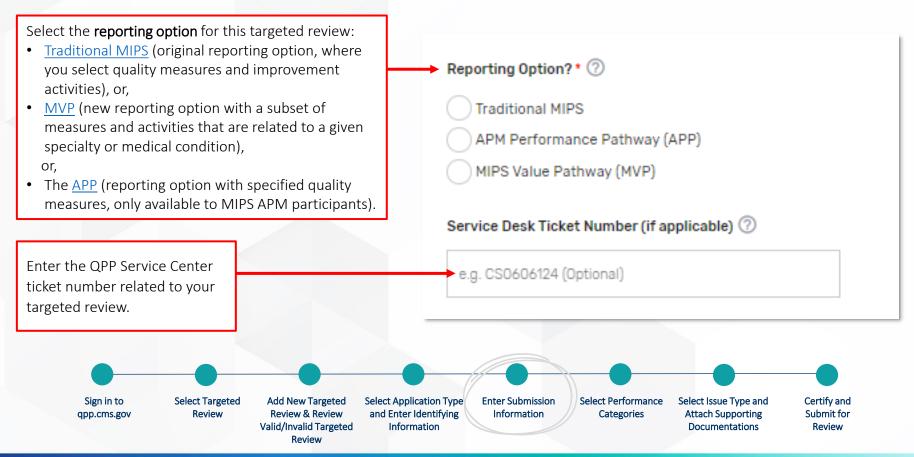
Note: The pre-populated information is pulled from the <u>QPP Participation Status Tool</u> using the identifying information (NPI, TIN, Virtual Group ID, APM ID, Subgroup ID) you entered during step 4.





Step 5a: Submission Information – Individual, Group, Subgroup, Virtual Group, APM Entity Details (Continued)

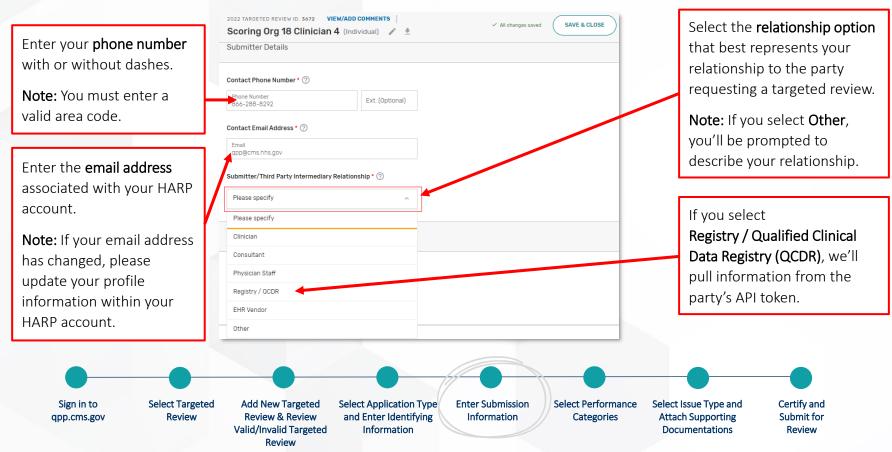
Select the MIPS reporting option that applies to the targeted review request and provide any associated service center case/ticket numbers (if applicable).





Step 5b: Submission Information – Submitter Details

Enter your preferred **contact information** and **identify your relationship** with the party for whom you are requesting a targeted review.

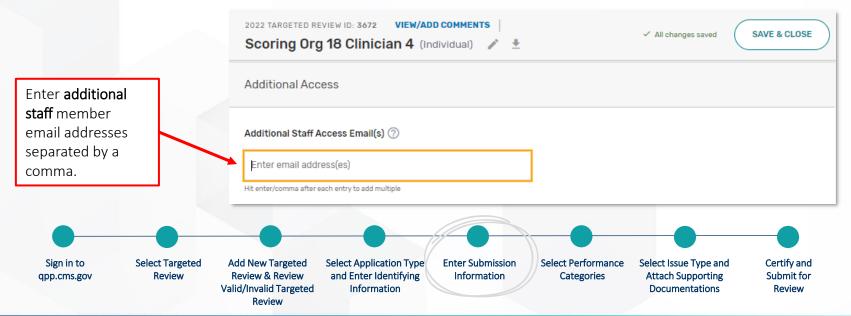




Step 5c: Submission Information – Additional Access

You can provide the email address(es) of additional staff or representatives who should receive notifications about the status of the request.

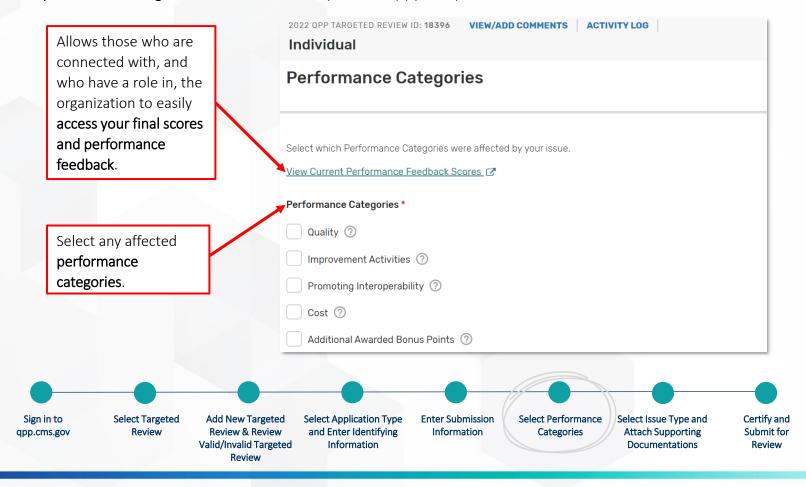
- If you enter an email address that's associated with an individual's HARP account, that person will be able to access the targeted review application and will receive notifications about the status of the request when they sign in with their HARP credentials on the Quality Payment Program website.
- If you're submitting an application on behalf of an individual, group or virtual group, users with access to the practice or virtual group on the Quality Payment Program website will be able to access the application **only** if you add the email associated with their HARP account.





Step 6: Performance Categories

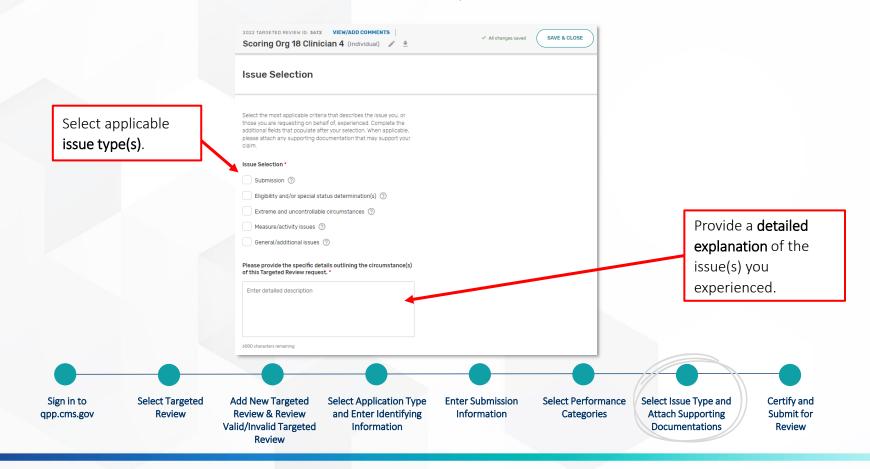
Select the performance categories that were affected by the issue(s) you experienced.





Step 7a: Issue Type Selection

Select the applicable issue type(s) that best describe the issue(s) you identified with your 2025 payment adjustment factor(s) and associated 2023 final performance feedback. Then provide a **detailed explanation** of the issue(s) you identified.





Step 7a: Issue Type Selection (Continued)

Examples of each issue type are described in the table below. This isn't an exhaustive list.

Review

Uncontrollable uncontrollable circumstances application. When looking at your group's 2023 MIPS performance feed	romoting		
Status Determination(s) Interoperability performance category to 0%. When looking at your 2023 MIPS performance feedback that the Promoting Interoperability performance category wasn't reweighted. Extreme and Uncontrollable Uncontrollable Uncontrollable Uncontrollable Vour practice was approved for reweighting in all performance categories through a MIPS extreme and uncontrollable circumstances application. When looking at your group's 2023 MIPS performance feedback that the Promoting Interoperability performance category wasn't reweighted.	_		
Uncontrollable uncontrollable circumstances application. When looking at your group's 2023 MIPS performance feed			
	Your practice was approved for reweighting in all performance categories through a MIPS extreme and uncontrollable circumstances application. When looking at your group's 2023 MIPS performance feedback, you		
Circumstances see that your group was scored in performance categories for which no data was submitted.	see that your group was scored in performance categories for which no data was submitted.		
group submitted quality performance data on the 5 measures in the Speech-Language Pathology speed measure/Activity Issues measure set, and the quality performance category score denominator should have been lowered to	You are a part of a small practice of speech-language pathologists that reported traditional MIPS as a group. Your group submitted quality performance data on the 5 measures in the Speech-Language Pathology specialty measure set, and the quality performance category score denominator should have been lowered to 50 points, reflecting the 5 quality measures available. When looking at your group's 2023 MIPS performance feedback, you		
(general/Additional	You are a MIPS eligible clinician who qualified for cost improvement scoring. When looking at your 2023 MIPS performance feedback, you see that you didn't receive points for improvement scoring in your cost performance category score.		
	Certify and Submit for		



Step 7b: Attach Supporting Documentation

Attach your **supporting documentation** to your targeted review application. Then select **Submit for Review**. Supporting information may include, but isn't limited to:

- Extracts from the MIPS eligible clinician's EHR.
- Copies of performance data provided to a third-party intermediary by the clinician or group.
- Copies of performance data submitted to CMS.
- QPP Service Center case numbers.
- Signed contracts or agreements between a clinician/group and a third party intermediary.
- Proof of your APM participation.
- Proof of your MVP registration.
- Partial QP election forms.

Please attach any available **documentation** that may support your claim. Use the Drag & Drop feature or browse your computer to locate and applicable upload files.

Don't have your supporting documentation yet? Check out your options on the following page.

If available, please attach any supporting documentation that may support your claim.

Drag & Drop
files to attach or browse
(pdf, jpg. jpeg. png. doc, docx, xls, xlsx, msg)

WITHDRAW SUBMIT FOR REVIEW >

You don't need to encrypt your supporting documentation that contains personally identifiable information (PII) or personal health information (PHI) because the targeted review application is within your secure QPP account on the QPP website.

Select **Submit for Review** once you have completed your request and are satisfied with it.

Sign in to Se

Select Targeted Review

Add New Targeted Review & Review Valid/Invalid Targeted Review Select Application Type and Enter Identifying Information Enter Submission Information Select Performance Categories

Select Issue Type and Attach Supporting Documentations Certify and Submit for Review



Step 7b: Attach Supporting Documentation (Continued)

We strongly recommend that you attach your supporting documentation to your targeted review application as soon as possible.

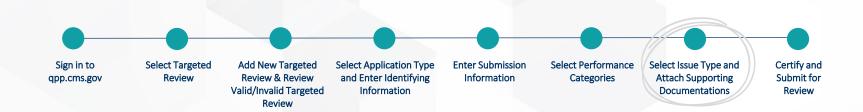
If your supporting documentation isn't available when you complete the application, you can:

- Option 1: Save your application progress, attach your supporting documentation, and then submit your targeted review.
- Option 2: Submit your application and use the <u>Comments</u> function to submit supporting documentation to the reviewer of your request.

Note: If the reviewer of your targeted review requests supporting documentation, you'll have 30 days to provide the requested documentation or the targeted review request will be denied.

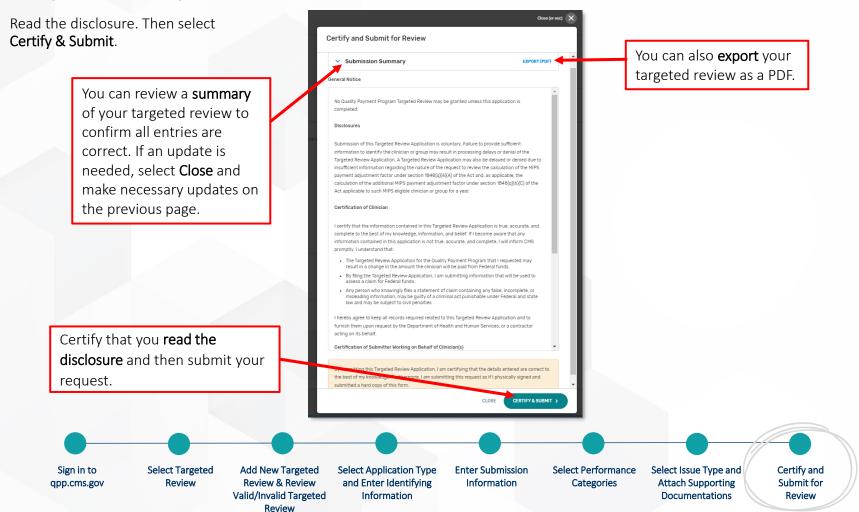
Did you know?

Beginning with the 2024 performance year targeted review period (opening summer 2025), you'll have 15 calendar days to provide the requested documentation.





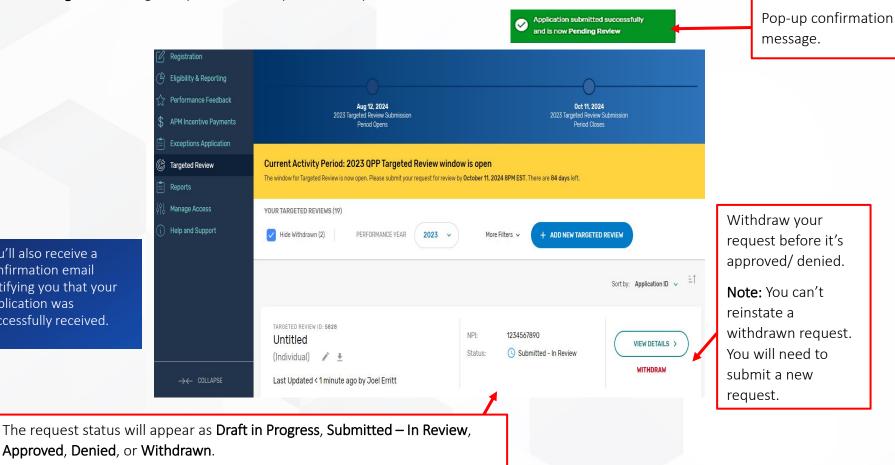
Step 8: Certify and Submit for Review



Receive Confirmation Notification

Once your request is complete, you'll be brought back to the Targeted Review Progress Summary page. You will see a pop-up

message confirming that you successfully submitted your review.





You'll also receive a

confirmation email

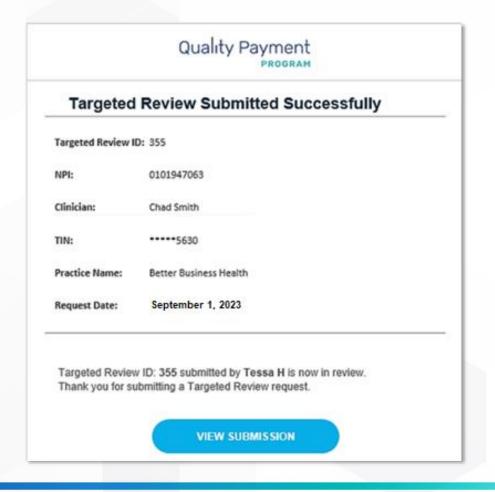
application was

notifying you that your

successfully received.

Receive Confirmation Notification (Continued)

Example of the email confirmation you receive upon a successful submission.





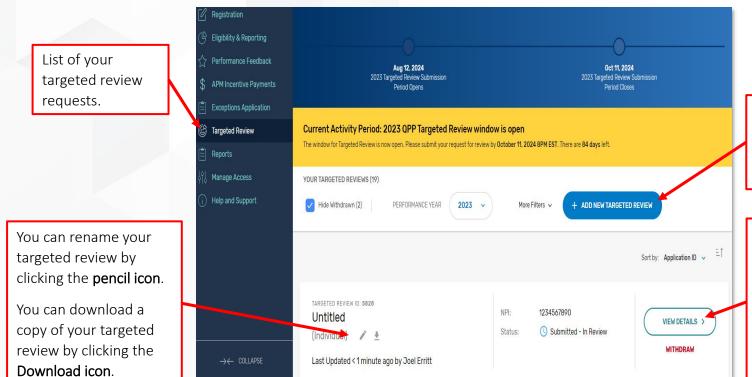


How to Monitor a Targeted Review

View Targeted Review Details

You can monitor all your targeted review requests for the 2023 performance year on the **Targeted Review Progress Summary** page. Select **View Details** for additional information about a specific request.

Sign into the <u>QPP website</u> regularly to stay updated on the status of your requests and any communications you receive from the reviewer.



Select + Add New
Targeted Review to
create another
request.

Select View Details to view information on your request and to communicate with the reviewer who is evaluating your request.

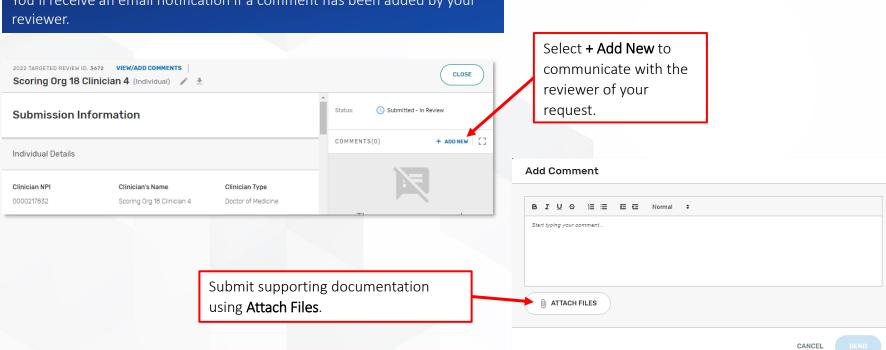
Helpful Hint: Sign in regularly to

ensure that you're staying current with your targeted review status and communications from your reviewer.

Communicate with Reviewer

Select View Details and use the Comments function to communicate with the reviewer and submit supporting documentation for your request.

Important Note: Use the Comments function to communicate with the reviewer about your request instead of contacting the QPP Service Center. You'll receive an email notification if a comment has been added by your reviewer.







Frequently Asked Questions

Do I need to submit a targeted review request for each clinician?

In general, you'll complete the targeted review request form at the level at which you (or those on whose behalf you're requesting a targeted review) participated and reported data to the QPP for the 2023 performance year. However, under certain circumstances, you'll request a targeted review at a different level. For example, if you're requesting a targeted review of a clinician's MIPS eligibility or eligibility to receive a final score under the APM Performance Pathway.

Examples:

If you reported traditional MIPS or MVP at the individual level, request an individual targeted review (application type = individual).

If you reported traditional MIPS or MVP at the group level, request a group targeted review (application type = group) which will apply to all of the clinicians in the group. You <u>can't</u> submit 1 group targeted review on behalf of multiple clinicians who reported individually.

How long do I need to keep documentation regarding my targeted review?

You must retain all documentation associated with your targeted review request for 6 years from the end of the performance year. Therefore, for the 2023 performance year, you must retain your documentation through December 31, 2029.

When can I expect an outcome regarding my request?

We carefully evaluate each request on a case-by-case basis, along with the supporting documentation you provide. The length of time it takes to complete our evaluation will vary depending on the complexity of your request.

We encourage you to sign into the <u>QPP Website</u> regularly to view the status of your targeted review and to stay updated on communications with your reviewer. If you have questions about your request, click **View Details** and communicate with your reviewer via the comments pane.

In addition to monitoring your targeted review on the <u>QPP Website</u>, you'll receive emails that confirm we received your targeted review request, notify you about new comments added to your request, and notify you about the outcome of your request.





Help, Resources, and Version History

Where Can You Go for Help?

Contact the Quality Payment
Program Service Center by email at
QPP@cms.hhs.gov, by creating a
QPP Service Center ticket, or by
phone at 1-866-288-8292 (Monday
through Friday,
8 a.m. - 8 p.m. ET).

 People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant. Visit the <u>Quality Payment Program</u> website for other <u>help and support information</u>, to learn more about <u>MIPS</u>, and to check out the resources available in the <u>Quality Payment Program Resource Library</u>.

Visit the <u>Small Practices page</u> of the Quality Payment Program website where you can **sign up for the monthly QPP Small Practices Newsletter** and find resources and information relevant for small practices.



Additional Resources

<u>The QPP website</u> and <u>QPP Resource Library</u> house fact sheets, measure specifications, specialty guides, technical guides, user guides, helpful videos, and more.

- 2023 How MIPS Eligibility is Determined
- 2023 Eligibility Determination Periods and Snapshots
- 2023 MIPS Eligibility and Participation User Guide (PDF, 1MB)
- 2023 MIPS Quick Start Guide (PDF, 1MB)
- 2023 APM Performance Pathway (APP) Toolkit (ZIP, 2MB)
- 2023 Traditional MIPS Scoring Guide (PDF, 1MB)



Version History

If we need to update this document, changes will be identified here.

	DATE	DESCRIPTION
08/12/2024		Original Posting.

