

2018 Merit-based Incentive Payment System (MIPS) Qualified Registry Self-Nomination Fact Sheet

If you want to become a qualified registry for the Merit-based Incentive Payment System (MIPS) under the Quality Payment Program for the 2018 performance period, you have to self-nominate and successfully qualify.

When can I self-nominate?

For the 2018 performance period, your organization can self-nominate September 1 – November 1, 2017.

What do I need to know to self-nominate?

- To become a CMS-approved entity for a given performance period, your organization must exist by January 1 of the performance period. For example, to be eligible in the 2018 performance period, your organization must exist by January 1, 2018.
- When you self-nominate, you'll have to send all required information through the web-based tool JIRA for us to review and approve.
- You have to self-nominate every year. If you want to qualify as a registry, you'll need to self-nominate for that year. Just because you qualified in a past year that doesn't mean you'll automatically qualify in future performance periods.

We'll post the list of approved entities on CMS.gov.

What is a qualified registry?

A qualified registry is an entity that collects clinical data from an individual MIPS-eligible clinician, group or virtual group and submits it to CMS for them. Clinicians work directly with their chosen registry you choose to submit data on the measures or specialty set of measures they have picked.

What are the requirements to become a qualified registry?

Here's what you need to become a qualified registry:

Participants

You must have at least 25 participants by January 1, 2018. The participants don't have to use the qualified registry to report MIPS data to us, but they have to submit data to the qualified registry for quality improvement.

Attestation statement

You have to provide a statement during the data submission period to verify that all the data (quality measures, improvement activities, and advancing care information measures and objectives) and results are accurate and complete.

Data submission

You have to submit data through one of our secure data submission methods, such as a defined Quality Payment Program data format (JSON, XML).

Data validation report

You have to give us information on how you validate data for individual MIPS eligible clinicians, groups, and virtual groups in a data validation plan. (Please note that the virtual group requirement is proposed in the Year 2 Quality Payment Program NPRM.) You also must send us the results of your data validation plan by May 31 of the year after the performance period, [which must include]:

- Name of qualified registry
- Process of verifying QPP eligibility of MIPS eligible clinicians, groups, and virtual groups

(Please note that virtual group verification is proposed in the Year 2 Quality Payment Program NPRM)

- Process of verifying accuracy of TIN/NPIs
- Process of calculating reporting and performance rates
- Process of verifying 2018 QPP measures utilized for submission
- Process used for completion of randomized audit
- Process used for completion of detailed audit

What information is required to self-nominate?

You must provide the following information when you self-nominate

- Your organization's name
- Whether it's a new or existing registry (approved for a previous year of MIPS and/or Physician Quality Reporting System (PQRS))
- Your MIPS performance categories
- Performance period
- Your vendor type
- How you'll capture data
- How you'll verify TINs and NPIs
- How you'll calculate performance rates for quality measures (source of clinician's data)
- Your randomized audit process
- Your data validation process
- Whether you're able to give data validation results by May 31st after the performance period
- Your supported MIPS quality measures

What data submission tasks do qualified registries have to do?

Qualified registries must complete these 5 data submission tasks. Use this checklist:

1. Indicate:

- Certified EHR Technology (CEHRT) data source
- End-to-end electronic reporting, if it applies
- Performance period start and end dates
- Whether you're reporting on advancing care information measures and objectives
- Whether you're reporting on improvement activities

2. Submit:

- Data and results for all your MIPS performance categories
- Include all-payer data, not just Medicare Part B patients
- Results for at least 6 quality measures, with at least 1 outcome measure
- If an outcome measure isn't available, use at least 1 other high-priority measure
- Quality measure ID numbers for quality measures
- Measure-level reporting rates by Taxpayer Identification Number (TIN)/National Provider Identifier (NPI) and/or TIN
- Measure-level performance rates by TIN/NPI and/or TIN
- Risk-adjusted results for any risk-adjusted measures
- Sampling methodology for data validation
- Performance categories feedback at least 4 times a year for all MIPS individual eligible clinicians

3. Report on the number of:

- Eligible instances (reporting denominator)
- Times a quality service is performed (performance numerator)
- Times the applicable submission criteria weren't met
- Performance exclusions (denominator exceptions/exclusions)

4. Verify & maintain eligible clinician information:

- Signed verification of clinician names, contact information, costs charged to clinicians, services provided, measures, and specialty-specific measure sets (if applicable)
- Business agreement(s) with clinicians or groups who provide patient-specific data
 - Make sure the business associate agreement meets HIPAA privacy and security rules.
- Include disclosure of quality measure results and data on Medicare and non-Medicare beneficiaries
- Signed NPI-holder authorization to:
 - Submit results and data to us for MIPS



- Release email address for feedback report distribution
- Attestations that all data and results are accurate and complete

5. Comply with:

- Any request from us to review your submitted data
- Requirement to participate in the mandatory registry kick-off meeting and monthly support calls
- Our approved secure ways to submit data
 - An XML or JSON file

If data inaccuracies affect **more than 3%** of your total MIPS-eligible clinicians, you:

- Will be placed on probation due to your low data quality rating; and
- The registry qualified posting will be updated for the performance period to show you're on probation.

Data inaccuracies that affect more than 5% of your total MIPS-eligible clinicians may mean you won't be able to participate the following year.


What are the main steps to become a qualified registry?

Here are the 3 steps to become a qualified registry:

1. You complete and submit the self-nomination form, supported measures, and data validation plan through JIRA for our review and approval.
2. If the self-nomination form, measures, and data validation plan are approved, a qualified posting is made for the registry that includes contact information, approved measures, performance categories supported, services offered, and costs for clients. We'll include all approved registries in the qualified posting that's posted on our Quality Payment Program website.
3. Approved qualified registries have to support the services and measures listed on their qualified posting in order to participate in MIPS or they may not be allowed to participate in MIPS the next year.

What resources are there to help?

- **Qualified registry support calls** - We'll hold mandatory support calls for registries approved to participate. Registries will start attending calls in the performance period they've self-nominated in. These support calls will cover reporting requirements, steps for successful submission, and questions and answers. Registries have to attend all of the support calls because it's a requirement of participation.
- **Quality Payment Program listserv** - The Quality Payment Program listserv gives news and updates on new resources, website updates, upcoming milestones, deadlines, trainings, and



webinars. To subscribe, visit the [Quality Payment Program](#) website and pick “Subscribe to Updates” at the bottom of the page or in the footer.

- [CMS.gov](#) - We'll post educational materials on the website to help you with the submission process.
- **Quality Payment Program Service Center** - If you have questions, the Quality Payment Program Service Center can help and will be able to direct your call to the staff to best meet your needs. You can reach the Quality Payment Program Service Center at 1-866-288-8292 or 1-877-715-6222 (TTY) Monday – Friday, 8:00 AM – 8:00 PM Eastern Time or by email.
- **The Self-Nomination User Guide** - This guide is on the Resource Library tab of the Quality Payment Program website, and gives step-by-step instructions for entities that want to be a qualified registry for the 2018 MIPS program year.