

# Quality Payment PROGRAM

## Merit-based Incentive Payment System (MIPS)

### 2021 Targeted Review Guide



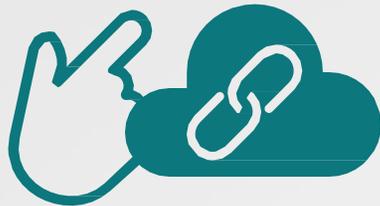
## Contents

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## **How to Use This Guide**

**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.



## Table of Contents

The table of contents is interactive. Click on a chapter in the table of contents to read that section.



You can also click on the icon on the bottom left to go back to the table of contents.

**Purpose:** This guide was prepared for informational purposes only and is not intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It is not 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.

This guide captures images of the process for opting-in or voluntarily reporting. The information captured in the screenshots may not be the exact language, workflow, or design that was finalized in the system.

## Hyperlinks

Hyperlinks to the [Quality Payment Program website](#) are included throughout the guide to direct the reader to more information and resources.



# Introduction

## What Is a Targeted Review?

Targeted review is the process through which Quality Payment Program (QPP) participants can request that the Centers for Medicare & Medicaid Services (CMS) review the calculation of their 2023 MIPS payment adjustment factor(s) and, if applicable, their additional MIPS payment adjustment factor for exceptional performance.

Once 2023 MIPS payment adjustment factor(s) are released, you have **60 days** to request a targeted review for the 2021 calendar year.

The last day you can submit a targeted review for the 2021 performance year is **October 21, 2022**.

While you have 60 days to complete your request, you should request a targeted review **as soon as possible** if you identify an error 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 2023 payment year.

## Where Is the Targeted Review Application Located?

You can access the Targeted Review application by signing into the [Quality Payment Program website](#). You need a **Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) account** to sign in and access the Targeted Review application.

Visit the [Quality Payment Program Access Guide \(ZIP\)](#) for instructions on how to create a HARP account. For additional information on HARP, check out the [HARP FAQs](#).

## Who Can Request a Targeted Review?

You can request a targeted review if you're a(n):

- MIPS eligible clinician
- Group
- Virtual group
- Alternative Payment Model (APM) participant (individual clinician, group, APM Entity)

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 **2023 MIPS payment adjustment factor(s)** and associated **2021 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 [Medicare Care Compare](#).
- The developed methodology used to calculate performance scores and the calculation of such scores, including the weighting of measures and activities under such methodology.

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

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

## Introduction

### Examples of Valid and Invalid Targeted Review Requests

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

**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.
  - **New Users:** [Register for QPP](#) to obtain your HARP credentials.
  - **Returning Users:** Confirm that you can [sign in to QPP](#) with your HARP credentials.

### ❑ Gather identifying information and supporting documentation

- Collect the clinician, group, virtual group, or APM participants’ identifying information
  - **Clinician** – NPI and associated practice’s legal practicing name.
  - **Group** – The practice’s TIN and legal practicing name.
  - **Individual clinician, group, or APM Entity participating in an APM** – APM identification number (ID).
  - **Approved virtual group** – Virtual Group ID.
- 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:
  - Extracts from the MIPS eligible clinician’s Electronic Health Record (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
  - Partial QP election forms

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

Documentation may vary based on the circumstances of the targeted review request.



## **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 [Quality Payment Program website](#).

## Step 1: Sign in to Your QPP Account Sign in to your QPP account using your HARP credentials on the [Quality Payment Program 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](#).

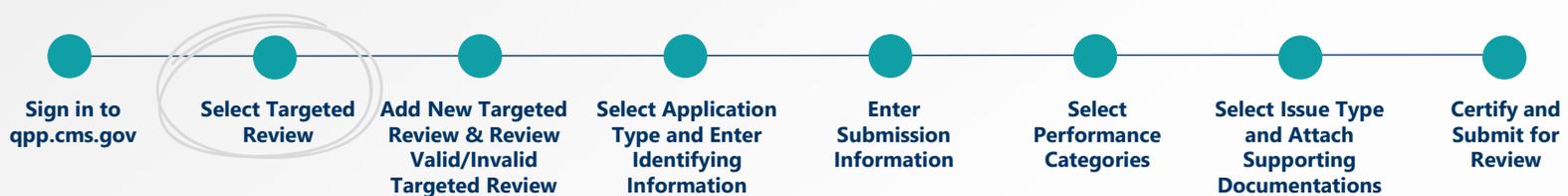
The screenshot shows the 'QPP Account' sign-in page. At the top, there are navigation links for 'MIPS', 'APMs', 'About', and 'Sign In'. The main heading is 'QPP Account' with 'SIGN IN' and 'REGISTER' buttons. Below this is the 'Sign in to QPP' section, which includes a 'USER ID' field, a 'PASSWORD' field, and a 'Show password' checkbox. There is a link for 'Forgot your user id or password? Recover ID or reset password'. A 'STATEMENT OF TRUTH' section contains a paragraph of text and a 'Yes, I agree.' checkbox. At the bottom, there is a 'Sign in' button and a 'Don't have an account? Register' link.



## Step 2: Select Targeted Review

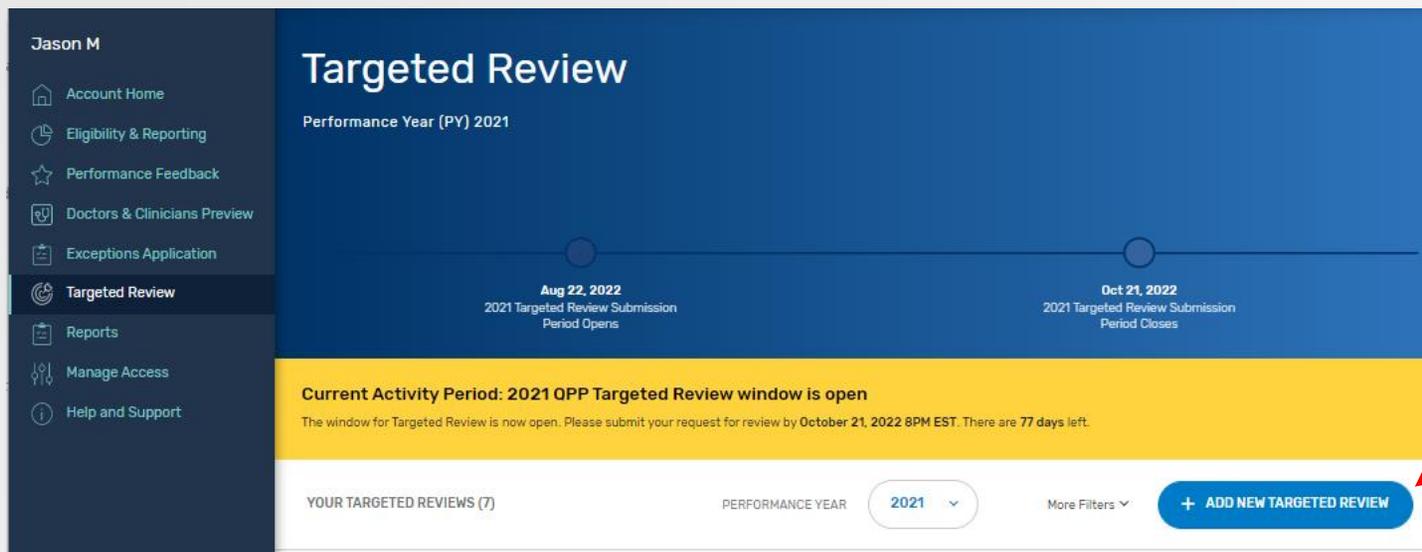
Select **Targeted Review** from the left-hand navigation pane.

The screenshot shows the 'Targeted Review' dashboard for user Jason M. The left-hand navigation pane includes options like Account Home, Eligibility & Reporting, Performance Feedback, Doctors & Clinicians Preview, Exceptions Application, Targeted Review, Reports, Manage Access, and Help and Support. The 'Targeted Review' option is highlighted with a red box and a red arrow pointing to it, with the text 'Select Targeted Review' inside the box. The main content area displays the 'Targeted Review' title and 'Performance Year (PY) 2021'. A timeline shows two key dates: 'Aug 22, 2022' (2021 Targeted Review Submission Period Opens) and 'Oct 21, 2022' (2021 Targeted Review Submission Period Closes). A yellow banner at the bottom states: 'Current Activity Period: 2021 OPP Targeted Review window is open. The window for Targeted Review is now open. Please submit your request for review by October 21, 2022 8PM EST. There are 77 days left.'



## 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.



Select +  
**Add New  
Targeted  
Review** to  
create a new  
request



## Step 3b: Valid and Invalid Targeted Review Examples

Review the list of valid and invalid targeted review examples, then select **continue**.

Close (or esc) X

### Validate Reason for Targeted Review

Review the examples below to confirm your request for a Targeted Review is valid:

**VALID REASONS**

- ✓ I submitted all of the quality measures available to me but my denominator wasn't reduced.
- ✓ My data was submitted under the wrong TIN or NPI.
- ✓ I have a special status that isn't reflected in my performance category scoring.
- ✓ I was scored in "x" performance category but was approved for reweighting through an exception application (Extreme and Uncontrollable Circumstances Application/ Promoting Interoperability Hardship Application).
- ✓ I was identified as a QP but I'm not a participant in an Advanced APM.
- ✓ I'm a participant in a MIPS APM but I didn't receive a final score associated with my APM Entity.

**INVALID REASONS**

- ✗ I want to know where I can find my final score and payment adjustment.
- ✗ I want to know why my payment adjustment is so low.
- ✗ I disagree with the historical benchmark used for determining my measure's score.
- ✗ I am confused about the scoring policy.
- ✗ My scores have changed since the submission period.
- ✗ My APM Incentive Payment was calculated incorrectly.

*Targeted review requests will be reviewed, and approved or denied, on a case-by-case basis.*

If you have questions such as these, or other general questions about scoring policies or your performance feedback, please contact the OPP Service Center: Monday - Friday 8 am - 8 pm ET by phone at 1-866-288-8292 or by email at [OPP@cms.hhs.gov](mailto:OPP@cms.hhs.gov). Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Don't show again    CANCEL    **CONTINUE >**

Sign in to  
qpp.cms.gov

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 4a: Select Application Type

Select **the application type** that aligns with **how your data was submitted**<sup>1</sup> to MIPS for the 2021 calendar year. Then select **Save & Continue**.

See the following page for more information on each application type and the required identifying information.

The screenshot shows a modal window titled "Add New Targeted Review" with a "Close (or esc)" button in the top right. The form contains a section for "Application Type" with four radio button options: "Individual", "Virtual Group", "Group", and "APM Entity". At the bottom of the form, there are three buttons: "CANCEL", "SAVE", and "SAVE & CONTINUE >". The "SAVE & CONTINUE >" button is highlighted with a light blue glow.

Select **Save** if you want to save your progress and complete your application later.



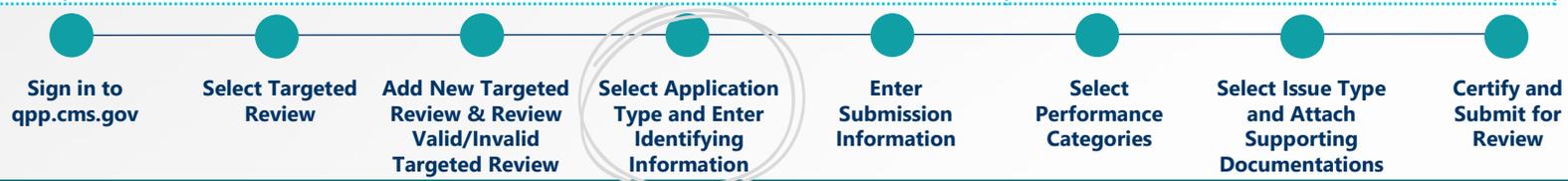
## Step 4b: Provide Identifying Information

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...
<b>Individual</b>	<ul style="list-style-type: none"> <li>A MIPS eligible clinician who participated in MIPS <b>individually</b> by submitting data under your unique TIN/NPI combination.</li> <li>Requesting a targeted review of a clinician's <b>MIPS eligibility</b>.</li> </ul>	<p>Clinician NPI * ?</p> <p>e.g. 1234567890</p>
<b>Group</b>	<ul style="list-style-type: none"> <li>A practice that participated in MIPS <b>as a group</b> by submitting aggregated data under a single TIN on behalf of all eligible clinicians in your practice.</li> </ul>	<p>Group TIN * ?</p> <p>e.g. 123456789</p>
<b>Virtual Group</b>	<ul style="list-style-type: none"> <li>A part of an <b>approved virtual group</b> that participated in MIPS by submitting aggregate data under your virtual group ID on behalf of all TINs within the virtual group.</li> </ul>	<p>Virtual Group ID * ?</p> <p>e.g. ABCDE123456780</p> <p>Application Title ?</p> <p>Untitled</p> <p><small>For personal reference only. Will not be displayed on submitted application.</small></p>

Fields with a red asterisk (\*) are required.



## Step 4b: Provide Identifying Information (Continued)

Application Type	Select if you're...	You will be asked to provide the following identifying information...
APM Entity	<ul style="list-style-type: none"> <li>An <b>APM Entity</b> that submitted data through the APP or traditional MIPS on behalf of all eligible clinicians in the entity-</li> <li>An APM Entity requesting a targeted review of <b>the Entity's PI category score.</b></li> </ul>	

Fields with a red asterisk (\*) are required.



## Step 5a: Submission Information – Individual, Group, 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 [QPP Participation Status Tool](#) using the identifying information (NPI, TIN, Virtual Group ID, APM ID) you entered during step 4.

The following screenshots demonstrate the Targeted Review application workflow for an individual.

You can update or correct identifying information or the application type.

Select the **reporting option** for this targeted review:

- [Traditional MIPS](#) (original reporting framework, where you select quality measures and improvement activities), or
- The [APP](#) (new reporting framework with specified quality measures, only available to MIPS APM participants).

Enter the QPP Service Center ticket number related to your targeted review.

2021 TARGETED REVIEW ID: 1016 VIEW/ADD COMMENTS | All changes saved SAVE & CLOSE

Chad Smith (Individual) [edit] [download]

### Submission Information

Individual Details

Clinician NPI	Clinician's Name	Clinician Type
0101947063 <a href="#">Change</a>	Chad Smith	Doctor of Medicine

Group Practice Name \* [?](#)

Select

Reporting Option? \*

Traditional MIPS  APM Performance Pathway (APP)

Service Desk Ticket Number (if applicable) [?](#)

e.g. CS0606124 (Optional)

Safely save your progress and return later to complete your request.

Select the applicable **group practice name** from the drop-down menu.

If the practice isn't listed, select **Not Listed** and enter the practice's TIN.



## 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.

Enter your **phone number** with or without dashes.

**Note:** You must enter a valid area code.

Enter the **email address** associated with your HARP account.

**Note:** If your email address has changed, please update your profile information within your HARP account.

Select the **relationship option** that best represents your relationship to the party requesting a targeted review.

**Note:** If you select **Other**, you'll be prompted to describe your relationship.

If you select **Registry / Qualified Clinical Data Registry (QCDR)**, we'll pull information from the party's API token.



## 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.

Enter **additional staff** member email addresses separated by a comma.

2021 TARGETED REVIEW ID: 1016 VIEW/ADD COMMENTS | ✓ All changes saved SAVE & CLOSE

Chad Smith (Individual)

Additional Access

Additional Staff Access Email(s) ?

Enter email address(es)

Hit enter/comma after each entry to add multiple



## Step 6: Performance Categories

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

Allows those who are connected with, and who have a role in, the organization to easily **access your final scores and performance feedback.**

Select any affected **performance categories.**

2021 TARGETED REVIEW ID: 1016 [VIEW/ADD COMMENTS](#) | ✓ All changes saved [SAVE & CLOSE](#)

**Chad Smith** (Individual) [✎](#) [↓](#)

### Performance Categories

Select which Performance Categories were affected by your issue.

[View Current Performance Feedback Scores](#) [↗](#)

**Performance Categories \***

- Quality [?](#)
- Improvement Activities [?](#)
- Promoting Interoperability [?](#)
- Cost [?](#)
- Additional Awarded Bonus Points [?](#)



## Step 7a: Issue Type Selection

Select the applicable **issue type(s)** that best describe the issue(s) you identified with your 2023 payment adjustment factor(s) and associated 2021 final performance feedback. Then provide a **detailed explanation** of the issue(s) you identified.

2021 TARGETED REVIEW ID: 1016 VIEW/ADD COMMENTS | All changes saved SAVE & CLOSE

Chad Smith (Individual)

### Issue Selection

Select the most applicable criteria that describes the issue you, or those you are requesting on behalf of, experienced. Complete the additional fields that populate after your selection. When applicable, please attach any supporting documentation that may support your claim.

**Issue Selection \***

- Submission ?
- Eligibility and/or special status determination(s) ?
- Extreme and uncontrollable circumstances ?
- Measure/activity issues ?
- General/additional issues ?

Please provide the specific details outlining the circumstance(s) of this Targeted Review request. \*

Enter detailed description

6000 characters remaining

Select applicable **issue type(s)**.

Provide a **detailed explanation** of the issue(s) you experienced.



## Step 7a: Issue Type Selection (Continued)

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

Issue Type	Example
<b>Submission</b>	Your practice reported to MIPS as a group, and your vendor included the wrong TIN in the file they submitted to MIPS on your behalf.
<b>Eligibility and/or Special Status Determination(s)</b>	You're a hospital-based MIPS eligible clinician which qualifies you for automatic reweighting of the Promoting Interoperability performance category to 0%. When looking at your 2021 MIPS performance feedback, you see that the Promoting Interoperability performance category wasn't reweighted.
<b>Extreme and Uncontrollable Circumstances</b>	Your practice was approved for reweighting in all performance categories through a MIPS extreme and uncontrollable circumstances application. When looking at your group's 2021 MIPS performance feedback, you see that your group was scored in performance categories for which no data was submitted.
<b>Measure/Activity Issues</b>	You are a part of a small practice of speech-language pathologists that reported to MIPS as a group. Your group submitted quality performance data on the 3 measures in the Speech-Language Pathology specialty measure set, and the quality performance category score denominator should have been lowered to 30 points, reflecting the 3 quality measures available. When looking at your group's 2021 MIPS performance feedback, you identified that your quality performance category score denominator wasn't lowered.
<b>General/Additional Issues</b>	You are a MIPS eligible clinician who qualified for quality improvement scoring. When looking at your 2021 MIPS performance feedback, you see that you didn't receive points for improvement scoring in your quality performance category score.



## 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.
- Partial QP election forms.

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 [Quality Payment Program website](#).

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.

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 >

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

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



## 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 [Comments](#) 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.



## Step 8: Certify and Submit for Review

Read the disclosure. Then select **Certify & Submit**.

You can review a **summary** of your targeted review to confirm all entries are correct. If an update is needed, select **Close** and make necessary updates on the previous page.

You can also **export** your targeted review as a PDF.

The screenshot shows a web form titled "Certify and Submit for Review". At the top, there is a "Submission Summary" section with a dropdown arrow and an "EXPORT (PDF)" button. Below this is a "General Notice" section with a scrollable text area containing the following text: "No Quality Payment Program Targeted Review may be granted unless this application is completed." This is followed by a "Disclosures" section with a scrollable text area containing: "Submission of this Targeted Review Application is voluntary. Failure to provide sufficient information to identify the clinician or group may result in processing delays or denial of the Targeted Review Application. A Targeted Review Application may also be delayed or denied due to insufficient information regarding the nature of the request to review the calculation of the MIPS payment adjustment factor under section 1848(q)(6)(A) of the Act and, as applicable, the calculation of the additional MIPS payment adjustment factor under section 1848(q)(6)(C) of the Act applicable to such MIPS eligible clinician or group for a year." Below the disclosures is a "Certification of Clinician" section with a scrollable text area containing: "I certify that the information contained in this Targeted Review Application is true, accurate, and complete to the best of my knowledge, information, and belief. If I become aware that any information contained in this application is not true, accurate, and complete, I will inform CMS promptly. I understand that:" followed by a bulleted list: "• The Targeted Review Application for the Quality Payment Program that I requested may result in a change in the amount the clinician will be paid from Federal funds.", "• By filing the Targeted Review Application, I am submitting information that will be used to assess a claim for Federal funds.", "• Any person who knowingly files a statement of claim containing any false, incomplete, or misleading information, may be guilty of a criminal act punishable under Federal and state law and may be subject to civil penalties". Below this is a "Certification of Submitter Working on Behalf of Clinician(s)" section with a scrollable text area containing: "I hereby agree to keep all records required related to this Targeted Review Application and to furnish them upon request by the Department of Health and Human Services, or a contractor acting on its behalf." At the bottom of the form, there is a "CERTIFY & SUBMIT >" button.

Certify that you **read the disclosure** and then submit your request.



## 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 notifying you that your application was successfully received.

Quality Payment PROGRAM

Jason M

Account Home  
Eligibility & Reporting  
Performance Feedback  
Doctors & Clinicians Preview  
Exceptions Application  
Targeted Review  
Reports  
Manage Access  
Help and Support

### Targeted Review

Performance Year (PY) 2021

Aug 22, 2022 2021 Targeted Review Submission Period Opens

Oct 21, 2022 2021 Targeted Review Submission Period Closes

**Current Activity Period: 2021 OPP Targeted Review window is open**  
The window for Targeted Review is now open. Please submit your request for review by October 21, 2022 8PM EST. There are 77 days left.

YOUR TARGETED REVIEWS (7) PERFORMANCE YEAR 2021 More Filters + ADD NEW TARGETED REVIEW

Sort by: Application ID

TARGETED REVIEW ID: 1062	NPI: 1063626836	VIEW DETAILS
Trinidad Villegas (Individual)	TIN: *****3007	WITHDRAW
Last Updated Jul 19 2022 at 3:09PM EST by Jason M	Status: Submitted - In Review	

Pop-up confirmation message.

Withdraw your request before it's approved/ denied.

**Note:** You can't reinstate a withdrawn request. You will need to submit a new request.

The request status will appear as **Draft in Progress, Submitted – In Review, Approved, Denied, or Withdrawn.**

## Receive Confirmation Notification (Continued)

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

Quality Payment  
PROGRAM

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**Targeted Review Submitted Successfully**

---

Targeted Review ID: 355

NPI: 0101947063

Clinician: Chad Smith

TIN: \*\*\*\*\*5630

Practice Name: Better Business Health

Request Date: August 22, 2022

---

Targeted Review ID: 355 submitted by Tessa H is now in review.  
Thank you for submitting a Targeted Review request.

[VIEW SUBMISSION](#)



## **How to Monitor a Targeted Review**

## View Targeted Review Details

You can monitor all your targeted review requests for the 2021 performance year on the **Targeted Review Progress Summary** page. Select **View Details** for additional information about a specific request.

Sign into the [Quality Payment Program website](#) regularly to stay updated on the status of your requests and any communications you receive from the reviewer.

The screenshot shows the 'Targeted Review' dashboard for Performance Year (PY) 2021. The interface includes a left-hand navigation menu with options like 'Account Home', 'Eligibility & Reporting', 'Performance Feedback', 'Exceptions Application', 'Targeted Review', 'Reports', 'Manage Access', and 'Help and Support'. The main content area displays a timeline for the 2021 submission period, from August 8, 2022, to October 7, 2022. A yellow banner indicates that the 'Current Activity Period: 2021 OPP Targeted Review window is open' and that there are 91 days left to submit a request. Below this, there is a section for 'YOUR TARGETED REVIEWS (2)' with a dropdown for 'PERFORMANCE YEAR' set to '2021' and a '+ ADD NEW TARGETED REVIEW' button. A list of reviews is shown, with the first entry for 'Chad Smith' (ID: 1017) having a pencil icon for editing and a PDF icon for downloading. To the right of the review details, there is a 'VIEW DETAILS >' button and a 'WITHDRAW' button. The status of the review is 'Submitted - In Review'.

List of your targeted review requests.

You can rename your targeted review by clicking the **pencil icon**.

You can download a copy of your targeted review by clicking **Download PDF**.

Select + **Add New Targeted Review** to create another request.

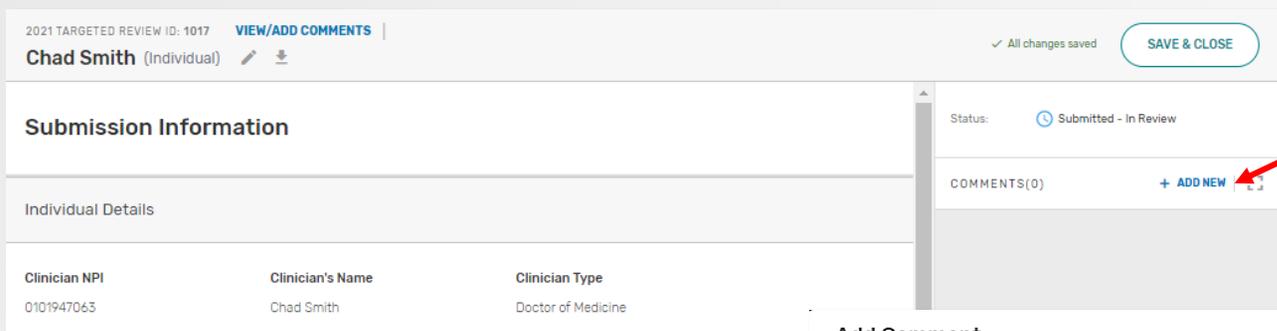
Select **View Details** to view information on your request and to communicate with the reviewer who is evaluating your request.

## Communicate with Reviewer

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

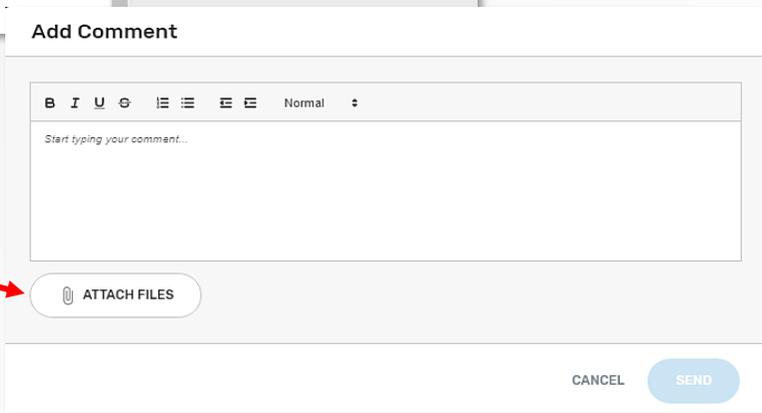
**Important Note:** Use the Comments function to communicate with the reviewer about your request instead of contacting the QPP Service Center. You'll receive an email notification if a comment has been added by your reviewer.

**Helpful Hint:** Sign in regularly to ensure that you're staying current with your targeted review status and communications from your reviewer.



Select + **Add New** to communicate with the reviewer of your request.

Submit supporting documentation using **Attach Files**.





## **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 2021 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.

## 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 2021 performance year, you must retain your documentation through December 31, 2027.

## 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 QPP website](#) 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 QPP website](#), you'll receive emails that confirm we received your targeted review request, that notify you about new comments added to your request, and that notify you about the outcome of your request.





## **Help, Resources, and Version History**

## Where Can I Get Help?

Contact the Quality Payment Program Service Center at 1-866-288-8292 or by e-mail at: [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov) (Monday-Friday 8 a.m.- 8 p.m. ET). To receive assistance more quickly, please consider calling during non-peak hours—before 10 a.m. and after 2 p.m. ET.

- Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.

Visit the Quality Payment Program [website](#) for other [help and support](#) information, to learn more about [MIPS](#), and to check out the resources available in the [Quality Payment Program Resource Library](#).

## Additional Resources

[QPP](#) and the [QPP Resource Library](#) house fact sheets, measure specifications, specialty guides, technical guides, user guides, helpful videos, and more.

- [2021 How MIPS Eligibility is Determined](#)
- [2021 Eligibility Determination Periods and Snapshots](#)
- [2021 MIPS Eligibility and Participation User Guide](#) (PDF)
- [2021 MIPS Quick Start Guide](#) (PDF)
- [2021 APM Performance Pathway Toolkit](#) (ZIP)
- [2021 Traditional MIPS Scoring Guide](#) (PDF)

## Version History

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

Date	Description
08/22/2022	Original Version