



Merit-based Incentive Payment System (MIPS) Data Validation and Audit (DVA) Factsheet

Performance Years (PYs) 2019, 2020, and 2021

Guidehouse has been contracted by the Centers for Medicare & Medicaid Services (CMS) to conduct the DVA work for the MIPS program. MIPS eligible clinicians and groups are required to provide substantive, primary source documents as requested by CMS.

What Time Periods Will the DVA Cover

The DVA will be conducted for PY 2019, 2020, and 2021. It will cover the Quality, Improvement Activities (IA), and Promoting Interoperability (PI) performance categories.

MIPS Performance Measures/Activities Included in the DVA

Approximately 40 Performance Measures/Activities will be selected for MIPS DVA. A methodology has been developed to select MIPS Measures/Activities with the highest identified risk that would prevent the Quality Payment Program (QPP), specifically MIPS, from achieving strategic goals. We will not conduct DVA on the Cost performance category.

Selecting MIPS Participants for DVA

MIPS participants will be selected randomly for DVA. The sample selection may also include a variety of clinician types (urban, rural, large groups, small practices), submission methods (EHR, QCDR, Claims, Registry, Web- Interface, CAHPS), and eligible clinicians selected for the MIPS DVA for performance years 2017 and 2018 who were not compliant with the requirements. If you are selected for DVA, you will be required to respond to DVA requests related to at least one and up to all performance Measures/Activities submitted.

Participant(s) selected for MIPS DVA will be notified that they were selected via the e-mail address associated with the MIPS submission's Tax ID Number (TIN). Please ensure your contact information is accurate in the Healthcare Quality Information Systems (HCQIS) Access Roles and Profile (HARP) platform. Once the information is received, we will review it and work with the MIPS participant(s) to discuss any questions.

DVA Timeline

MIPS participants selected for DVA can expect notification of selection and initial requests for information starting January, 2023. There will also be ad hoc DVA work that is conducted through 2023.

Responses, including both the initial population and the follow-up requests for individual selections, are required to be provided within 45 calendar days of the request.

How to Submit Information for MIPS DVA

MIPS participants will submit information through a secure file sharing platform or via secure fax. Additional details will be provided to those selected. The MIPS participant(s) can designate someone to submit the information on their behalf (including other office staff, Electronic Health Record (EHR), Qualified Registry (QR), Qualified Clinical Data Registry (QCDR), other contractors, etc.). Once the information is received, we will review it and work with the MIPS participant(s) to discuss any questions.

DVA Resources

The following DVA resources are available on the Quality Payment Program Resource Library:

- [2019 MIPS Data Validation Criteria](#) - Lists the 2019 criteria used to audit and validate data submitted in each performance category
- [2020 MIPS Data Validation Criteria](#) - Lists the 2020 criteria used to audit and validate data submitted in each performance category
- [2021 MIPS Data Validation Criteria](#) - Lists the 2021 criteria used to audit and validate data submitted in each performance category

In order to receive the most up to date notifications about DVA, be sure to subscribe to the QPP listserv by entering your email at the bottom of the Quality Payment Program website (QPP@cms.hhs.gov).

Contact Information

The Quality Payment Program can be reached at QPP@cms.hhs.gov or 1-866-288-8292 (TTRS: 711), Monday through Friday, 8:00 AM - 8:00 PM Eastern Time.