

## How to Participate in the 2026 Merit-based Incentive Payment System (MIPS) Using a Centers for Medicare & Medicaid Services (CMS)-Approved Qualified Clinical Data Registry (QCDR) or Qualified Registry

This is an informational guide to support clinicians with the selection of a QCDR and Qualified Registry for MIPS participation. QCDRs and Qualified Registries are able to support all available participation options, including MIPS eligible clinicians, groups, virtual groups, subgroups, or Alternative Payment Model (APM) Entities, including Medicare Shared Savings Program (Shared Savings Program) Accountable Care Organizations (ACOs). This applies to both voluntary and opt-in MIPS eligible clinicians and groups.<sup>1</sup>

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Third party intermediaries are entities that CMS has approved to submit data on behalf of participants, regardless of participation option, for one or more of the Quality Payment Program (QPP) reporting options: APM Performance Pathway (APP), MIPS Value Pathways (MVPs), and traditional MIPS. This includes the ability to submit data for the quality, improvement activities, and/or Promoting Interoperability performance categories.<sup>2</sup> Intermediaries don't directly support the cost performance category, as CMS collects and calculates the data for the cost performance category.

<sup>1</sup> Participation options include MIPS eligible clinician, group, virtual group, subgroup, or APM Entity, including Medicare Shared Savings Program (Shared Savings Program) Accountable Care Organizations (ACOs). This applies to both voluntary and opt-in MIPS eligible clinician and groups.

<sup>2</sup> [§ 414.1305](#)



Third party intermediaries are intended to decrease burden on MIPS eligible clinicians. They include QCDRs, Qualified Registries, and CMS-approved survey vendors. **Please note that this guide will focus on QCDRs and Qualified Registries only.**

## What is a QCDR?

A QCDR is defined as an intermediary that demonstrates clinical expertise in medicine and quality measurement development. QCDRs collect medical or clinical data on behalf of a MIPS eligible clinician to track patients and diseases, fostering improvement in the quality of care provided to patients.<sup>3</sup>

More specifically, a QCDR may include:

- An intermediary with clinical expertise in medicine. Clinicians must be on staff with the organization and lend their clinical expertise in the work carried out by the organization as a QCDR.
- An intermediary with stand-alone quality measurement development experience.
- An intermediary that collects medical or clinical data on behalf of a clinician for the purpose of patient and disease tracking to foster improvement in the quality of care provided to patients.
- An intermediary that uses an external organization for purposes of data collection, calculation, or transmission that meets the definition of a QCDR as long as the intermediary:
- An intermediary that has a signed, written agreement that specifically details the relationship, roles, and responsibilities of the intermediary with the external organization effective as of September 1 the year prior to the year the intermediary seeks to become a QCDR (i.e., a collaboration agreement for the 2026 MIPS performance period must have been in place prior to September 2, 2025).

## What is a Qualified Registry?

A Qualified Registry is a data intermediary that collects MIPS data from MIPS eligible clinicians and submits it to CMS on their behalf. Clinicians typically work directly with their chosen Qualified Registry to submit data on the selected measures or activities they have selected.

## Should I select a QCDR or Qualified Registry as my third party intermediary?

Both QCDRs and Qualified Registries are able to collect and submit data to CMS on behalf of MIPS eligible clinicians. Unlike Qualified Registries, QCDRs have the opportunity to develop and support up to 30 CMS-approved QCDR measures. The QCDR measures are an additional set of quality measures available only for reporting through a QCDR. These measures may include specialty specific measures or disease process measures that aren't available within the MIPS quality measures inventory.

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<sup>3</sup> [§414.1400](#)

## How do I select a QCDR or Qualified Registry?

Every year, CMS publishes a list of CMS-approved QCDRs and Qualified Registries that self-nominate to participate as a QCDR and Qualified Registry for the MIPS performance period. The [2026 QCDR Qualified Posting \(XLSX, 220KB\)](#) and the [2026 Qualified Registry Qualified Posting \(XLSX, 223KB\)](#) are available on the [QPP Resource Library](#).

The 2026 QCDR Qualified Posting and Qualified Registry Qualified Posting are lists of all intermediaries authorized by CMS to submit quality measures, improvement activities, Promoting Interoperability measures & objectives for the APP, MVPs and/or traditional MIPS. These intermediaries are approved as QCDRs and/or Qualified Registries by CMS through the process that's detailed within the [MIPS Self-Nomination Toolkit for QCDRs and Registries \(ZIP, 49KB\)](#).

## Getting Started with the 2026 QCDR Qualified Posting or 2026 Qualified Registry Qualified Posting

The 2026 QCDR and/or Qualified Registry Qualified Posting resources contain a significant amount of useful information in selecting a QCDR or Qualified Registry for the 2026 MIPS performance period.

### ***Version History Tab***

The qualified postings contain a Version History tab (example below) that lists updates within the qualified postings made after the initial publication. If updates are available, the QCDR and/or Qualified Registry Qualified Posting resources will be updated on a monthly basis throughout the year. These status updates may include instances where the intermediary:

- withdraws,
- is subject to remedial action, and/or
- has been terminated throughout the MIPS performance period.

2026 Qualified Clinical Data Registry (QCDR) Qualified Posting: Version History		
Date	Version	Summary of Changes
12/17/2025	1.0	Original Version

### ***Table of Contents Tab***

The qualified postings contain a Table of Contents (TOC) that includes a hyperlinked list of QCDRs and Qualified Registries approved as third party intermediaries for the 2026 MIPS performance period, as well as information regarding which performance categories (quality, improvement activities, Promoting Interoperability) are supported by the QCDR or Qualified

Registry. This tab also contains information regarding which QCDRs and Qualified Registries are supporting MVPs. MIPS eligible clinicians should identify QCDRs or Qualified Registries that support the applicable reporting options, participation options, and performance categories needed for reporting.

#### **1-9; A /B-C /D-E /F-G /H-I /J-K /L-M /N-O /P-Q /R-S /T-U /V-W /X-Z Tabs**

The remaining tabs of the qualified postings contain detailed information specific to each QCDR or Qualified Registry. Each QCDR and Qualified Registry provides the information included within the qualified posting as well as approval of accuracy prior to CMS publishing the 2026 QCDR Qualified Posting or 2026 Qualified Registry Qualified Posting. The table below lists detailed information regarding the information contained within these tabs.

Column Name	Description
QCDR/Qualified Registry Name	Intermediary name provided by QCDR or Qualified Registry.
Remedial Action/Termination as Third Party Intermediary	Indication of whether the QCDR or Qualified Registry is currently subject to a corrective action plan or has been terminated in the current MIPS performance year.
Partnerships	Organizations the QCDR or Qualified Registry are partnering or collaborating with for the purposes of clinical expertise, measure development experience, data collection, calculation, transmission, or other third party intermediary activities.
Organization Type	Identification of the type of organization, including Collaborative, Health IT Vendor, Health Information Exchange/Regional Health Information Organization, Regional Health Collaborative, Specialty Society, or Other (with description).
Specialty	Clinical specialties supported by a QCDR or Qualified Registry.
New QCDR or Qualified Registry or Years QCDR or Qualified Registry Previously Participated	Indication of a New or Existing QCDR or Qualified Registry. If an existing QCDR or Qualified Registry, the years of participation will be included.
Contact Information	Organization name, address, and phone number.
Website	Organization website.
Cost	Detailed information regarding the cost(s) incurred by the QCDR or Qualified Registry clients.
Services Offered	Detailed information regarding the services offered to the QCDR or Qualified Registry clients.

Column Name	Description
Last Date to Accept New Clients for 2026 MIPS Performance Period	Last date the QCDR or Qualified Registry can accept new clients for the 2026 MIPS performance period.
Reporting Option(s) Supported	A list of supported reporting options for the 2026 MIPS performance period, including APP, MVPs, and traditional MIPS.
Participation Option(s) Supported	A list of supported participation options for the 2026 MIPS performance period, including MIPS eligible clinicians, groups, virtual groups, subgroups, and APM Entities, including Shared Savings Program ACOs.
Virtual Groups Specialty Parameters (if applicable)	If virtual groups are selected within the Reporting Options, QCDRs and Qualified Registries will note the virtual group specialty parameters for which they'll support.
Improvement Activities Supported	A list of all supported improvement activities for the 2026 MIPS performance period.
Promoting Interoperability Measures Supported	A list of all supported Promoting Interoperability measures and objectives for the 2026 MIPS performance period.
MIPS Clinical Quality Measures (CQMs) Supported	A list of all supported MIPS CQMs for the 2026 MIPS performance period.
MIPS Electronic Clinical Quality Measures (eCQMs) Supported	A list of all supported MIPS eCQMs for the 2026 MIPS performance period.
MIPS Value Pathways (MVPs) Supported	A list of all supported MVPs for the 2026 MIPS performance period.
MVP MIPS CQMs Supported	A list of all applicable MIPS CQMs within the supported MVPs for the 2026 MIPS performance period.
MVP eCQMs Supported	A list of all applicable MIPS eCQMs within the supported MVPs for the 2026 MIPS performance period.
MVP QCDR Measures Supported (QCDR Qualified Posting Only)	A list of all applicable QCDR Measures within the supported MVPs for the 2026 MIPS performance period.
QCDR Measures Supported (QCDR Qualified Posting Only)	A list of all approved and supported QCDR measures for the 2026 MIPS performance period.

## Selecting a QCDR or Qualified Registry using the 2026 QCDR Qualified Posting or 2026 Qualified Registry Qualified Posting

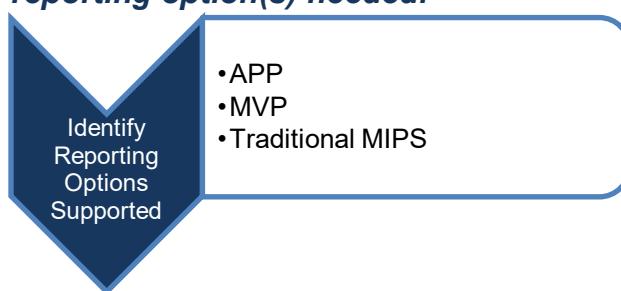
MIPS eligible clinicians should use the following steps to identify QCDRs or Qualified Registries that may be able to fill their reporting needs. It may be beneficial to identify more than one applicable QCDR and/or Qualified Registry, and research the options to identify the best possible QCDR and/or Qualified Registry for MIPS eligible clinicians.



### ***Step 1. Select a QCDR or Qualified Registry that will suit your reporting needs.***

Both QCDRs and Qualified Registries are able to collect and submit MIPS data to CMS on behalf of MIPS eligible clinicians. Unlike Qualified Registries, QCDRs have the opportunity to develop and support up to 30 CMS-approved QCDR measures. The QCDR measures are an additional set of quality measures available only for reporting through a QCDR. The QCDR measures may include specialty-specific measures or disease process measures that aren't available within the MIPS quality measures inventory.

### ***Step 2. Identify a QCDR(s) and/or Qualified Registry(ies) that offers the applicable reporting option(s) needed.***



Select a QCDR(s) and/or Qualified Registry(ies) that support the reporting options that meet your reporting needs. For the 2026 MIPS performance period, QCDRs and Qualified Registries are required to support MVPs that are applicable to the MVP participant on whose behalf they submit MIPS data. QCDRs and Qualified Registries may also support the APP and traditional MIPS.<sup>4</sup>

<sup>4</sup> [414.1400\(b\)\(1\)\(ii\)](#)



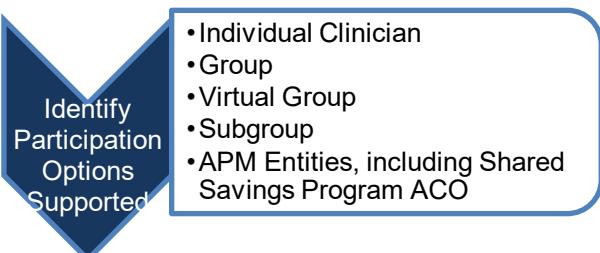
### ***Step 3. Identify a QCDR(s) and/or Qualified Registry(ies) that offers the applicable performance categories needed.***



Identify a QCDR(s) and/or Qualified Registry(ies) that support the performance categories that meet your reporting needs. For the 2026 MIPS performance period, QCDRs and Qualified Registries are required to support the quality, improvement activities and Promoting Interoperability performance categories. However, some QCDRs and/or Qualified Registries qualify for an exception and don't support all categories; therefore,

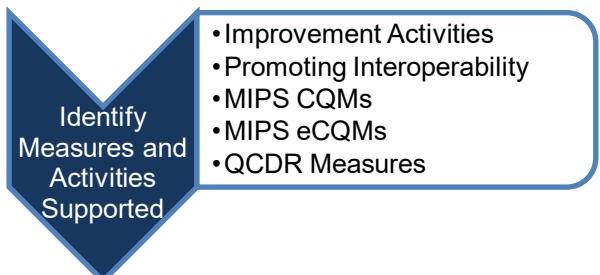
ensure the intermediary is able to support your MIPS reporting needs. A third party intermediary may be excepted from the requirement to support the Promoting Interoperability performance category if all supported MIPS eligible clinicians fall under the reweighting policies. In instances where some of the participants don't fall under the reweighting policies described above, the QCDR or Qualified Registry will be expected to comply with the requirements.

### ***Step 4. Identify a QCDR(s) and/or Qualified Registry(ies) that offers the applicable participation option(s) needed.***



Identify a QCDR(s) and/or Qualified Registry(ies) that support the participation options for which you're planning to participate in the MIPS program. Subgroup is only available for MVP reporting.

### ***Step 5. Identify a QCDR(s) and/or Qualified Registry(ies) that offers the applicable activities and measures needed.***

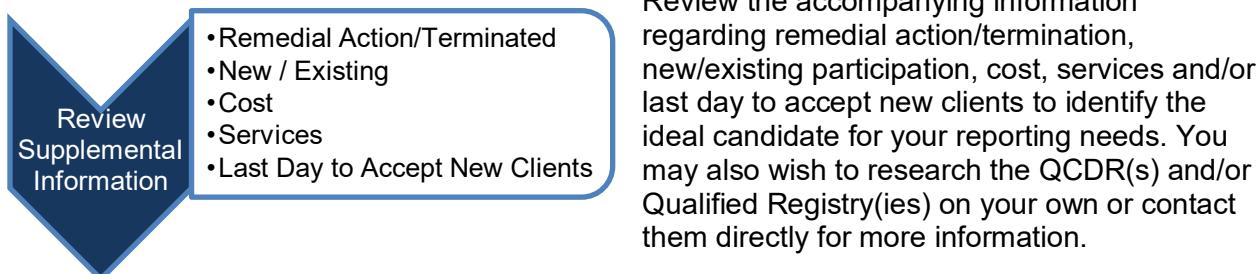


Identify a QCDR(s) and/or Qualified Registry(ies) that support the improvement activities, Promoting Interoperability measures, MIPS CQMs (including Medicare CQMs), MIPS eCQMs, QCDR measures and/or MVPs for which you're planning to submit data to CMS for purposes of MIPS. Additional information regarding the improvement activities, Promoting Interoperability measures, MIPS CQMs, MIPS eCQMs, QCDR measures and MVPs is available for the 2026 MIPS performance period and can be accessed on the [QPP Resource Library](#) or through the following links:

eCQMs, QCDR measures and MVPs is available for the 2026 MIPS performance period and can be accessed on the [QPP Resource Library](#) or through the following links:

- [2026 Improvement Activities Inventory \(ZIP, 464KB\)](#)
- [2026 Promoting Interoperability Measure Specifications \(ZIP, 6MB\)](#)
- [2026 Clinical Quality Measure Specifications and Supporting Documents \(ZIP, 40MB\)](#)
- [2026 eCQM Specifications and Supporting Documents](#)
- [2026 Qualified Clinical Data Registry \(QCDR\) Measure Specifications \(XLSX, 633KB\)](#)
- [2026 MIPS Value Pathways \(MVPs\) Details](#)

**Step 6. Review the supplemental information to evaluate the QCDR(s) and/or Qualified Registry(ies) to identify the ideal candidate.**



**Step 7. Contact the QCDR(s) and/or Qualified Registry(ies).**



**What to expect when participating with a QCDR or Qualified Registry?**

QCDRs and Qualified Registries must meet program requirements to be approved and included in the qualified posting. These program requirements are detailed further within the [2026 Self-Nomination Toolkit for QCDRs and Qualified Registries \(ZIP, 49KB\)](#) available on the [QPP Resource Library](#). MIPS eligible clinicians participating with a QCDR or Qualified Registry should familiarize themselves with program requirements, especially with those listed below as they are program requirements that involve their participants.

**Business Associate Agreements**

QCDRs and Qualified Registries must enter into and maintain with its participating MIPS eligible clinicians an appropriate business associate agreement that provides for the QCDR or Qualified Registry's receipt of patient-specific data from a MIPS eligible clinician, as well as the QCDR or Qualified Registry's disclosure of quality measure results and numerator and denominator data



or patient specific data on Medicare and non-Medicare beneficiaries. Business associate agreements must meet the requirements of any applicable laws and regulations, as well as comply with the Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules. MIPS eligible clinicians should work with their QCDR or Qualified Registry to ensure this legal contract is finalized according to the nature of their relationship with the QCDR or Qualified Registry.<sup>5</sup>

### **Clinician Consents**

QCDRs and Qualified Registries must obtain, and keep on file, signed documentation that each holder of a National Provider Identifier (NPI) (whose data are submitted to the QCDRs and Qualified Registries) has authorized the QCDR or Qualified Registry to submit quality measure results, improvement activities results, Promoting Interoperability results and numerator and denominator data or patient-specific data on Medicare and non-Medicare beneficiaries to CMS for the purpose of MIPS participation. Individual clinicians participating in MIPS via a QCDR or Qualified Registry must grant permission to the QCDR or Qualified Registry to submit their data to CMS. Groups, virtual groups, subgroups, and APM Entities, including Shared Savings Program ACOs, may have their group's duly authorized representative grant permission to the QCDR or Qualified Registry to submit their data to CMS. MIPS eligible clinicians should work with their QCDR or Qualified Registry to ensure proper consent is given to the QCDR and/or Qualified Registry.<sup>6</sup>

### **Feedback Reports**

QCDRs and Qualified Registries are required to provide timely feedback, at least 4 times per year, on all of the MIPS performance categories that the QCDR or Qualified Registry will report to CMS for purposes of MIPS. This provides specific feedback regarding how the participants compares to others who have submitted data on a given measure or activity within the QCDR or Qualified Registry. The feedback should be given at the participant level for which the QCDR or Qualified Registry reports. The QCDR or Qualified Registry is only required to provide feedback based on the participant's, data that's available at the time the performance feedback is generated. An available dashboard that provides real-time feedback throughout the 2026 MIPS performance period will suffice as meeting this feedback requirement. If a real-time feedback dashboard is available to clinicians, CMS asks that the QCDR or Qualified Registry email MIPS eligible clinicians at least 4 times per year, to remind them the feedback is available.<sup>7</sup>

## **Where Can I Go for Help?**

Contact the Quality Payment Program (QPP) Service Center by emailing [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov), submitting a [QPP Service Center ticket](#), or calling 1-866-288-8292 (Monday-Friday, 8 a.m. – 8 p.m. ET).

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<sup>5</sup> [§414.1400\(b\)\(3\)\(xii\)](#)

<sup>6</sup> [§414.1400\(b\)\(3\)\(xiii\)](#)

<sup>7</sup> [§414.1400\(b\)\(3\)\(iii\)](#)

Hearing impaired people can dial 711 to be connected to a Telecommunications Relay Services (TRS) Communications Assistant.

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

## Additional Resources

The [QPP Resource Library](#) houses fact sheets, specialty guides, technical guides, user guides, helpful videos, and more.

Resource	Description
<a href="#">2026 Self-Nomination Toolkit for QCDRs and Qualified Registries (ZIP, 49KB)</a>	Contains resources for QCDRs and Qualified Registries to self-nominate for the 2026 performance period.
<a href="#">2026 QCDR Qualified Posting (XLSX, 220KB)</a>	Provides a list of the approved 2026 QCDRs for MIPS.
<a href="#">2026 Qualified Registry Qualified Posting (XLSX, 223KB)</a>	Provides a list of the approved 2026 Qualified Registries for MIPS.
<a href="#">2026 QCDR Measure Specifications (XLSX, 633KB)</a>	Provides a list of the 2026 QCDR measures and corresponding calculations.
<a href="#">2026 Promoting Interoperability Measure Specifications (ZIP, 6MB)</a>	Provides a detailed overview of the requirements for the 2026 Promoting Interoperability performance category objectives and measures.
<a href="#">2026 Improvement Activities Inventory (ZIP, 464KB)</a>	Provides a complete list of the 2026 improvement activities and includes descriptions for each.
<a href="#">2026 MIPS Quality Measures List. (XLSX, 813KB)</a>	Provides a detailed list of the 2026 MIPS quality measures.
<a href="#">2026 MIPS Clinical Quality Measure Specifications and Supporting Documents (ZIP, 40MB)</a>	Provides comprehensive descriptions of the 2026 MIPS CQM for the MIPS quality performance category.
<a href="#">2026 eCQM Specifications and Supporting Documents</a>	Provides comprehensive descriptions of the 2026 eCQMs for the MIPS quality performance category.
<a href="#">2026 Medicare CQMs Specifications and Supporting Documents for Accountable Care Organizations Participating in the Medicare Shared Savings Program (ZIP, 2MB)</a>	Provides comprehensive descriptions of the 2026 Medicare Clinical Quality Measures (Medicare CQMs) for the Medicare Shared Savings Program ACOs quality performance category.
<a href="#">MIPS Value Pathways</a>	Provides practical information about MVPs, including details on MVP participation and registration, policies for MVP requirements, scoring, performance feedback, and public reporting.

## Version History Table

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

Date	Change Description
01/9/2026	Original version