

## 2018 Targeted Review Fact Sheet

### What is a Targeted Review?

A targeted review is the process in which Merit-based Incentive Payment System (MIPS) eligible clinicians, groups, virtual groups, and Alternative Payment Model (APM) participants (individual clinicians, groups, and the APM Entity) can request the Centers for Medicare & Medicaid Services (CMS) to review the calculation of their 2020 MIPS payment adjustment factor(s).




You can request a targeted review after MIPS final performance feedback is made available. If you believe that a targeted review is warranted, we encourage you to submit your request as soon as possible.

### Who Can Request a Targeted Review?

MIPS eligible clinicians, groups, and virtual groups (along with their designated support staff or authorized third-party intermediary), including APM participants, can request a targeted review of the calculation of their 2020 MIPS payment adjustment factor(s).

**Hint:** Request your targeted review at the **same level** (i.e. individual or group) as you submitted data to MIPS.

For example:

Example	
 <b>Individual</b>	<p>A MIPS eligible clinician who participated <b>individually</b> (submitted data under a unique Taxpayer Identification Number/National Provider Identifier (TIN/NPI) combination) would submit a targeted review request as an individual for that TIN/NPI combination because the payment adjustment would be based on the clinician's individual performance.</p>
 <b>Group</b>	<p>A practice that participated as a <b>group</b> (submitted aggregated data under a single TIN on behalf of all eligible clinicians in the practice) would submit a targeted review request as a group for that TIN because the MIPS payment adjustment would be the same for all the MIPS eligible clinicians identified as part of the practice for the 2018 performance period.</p>
 <b>Virtual Group</b>	<p>Two or more TINs that participated as a <b>virtual group</b> (submitted aggregated data under their virtual group ID on behalf of all TINs within the virtual group) would submit a targeted review request as a virtual group because the MIPS payment adjustment would be the same for all the MIPS eligible clinicians identified as part of the virtual group for the 2018 performance period.</p>



## Example



A MIPS eligible clinician who **participated in an APM individually** (submitted data under a unique TIN/NPI combination) would submit a targeted review request as an APM individual for that TIN/NPI combination because their submission impacts their APM Entity's score.

A practice (group) that **participated in an APM as a group** (submitted aggregated data under a single TIN on behalf of all eligible clinicians in the practice) would submit a targeted review request as an APM group for that TIN because their submission impacts their APM Entity's score.

An APM Entity that submitted data on behalf of all MIPS eligible clinicians in the entity would submit a targeted review request as an **APM Entity** because the MIPS payment adjustment would be the same for all the MIPS eligible clinicians identified as part of the APM Entity.

## Why Would a Clinician Request a Targeted Review?

If you believe there's an error with your **2018 MIPS final performance feedback** and **2020 MIPS payment adjustment factor(s)**, you may request a targeted review.

While this is not an exhaustive list, the following are examples under which you may wish to request a targeted review:

Issue Type	Circumstance
<p><b>Measure or Activity Issue</b></p>	<p>A MIPS eligible clinician or group has supporting documentation indicating that measures or activities submitted during the submission period have calculation errors or data quality issues. These measures or activities could have been submitted with or without the assistance of a third-party intermediary.</p>
<p><b>Eligibility and Special Status Issue</b></p>	<p>A MIPS eligible clinician or group has supporting documentation indicating that eligibility was not accurately determined for the MIPS eligible clinician or group (e.g., the MIPS eligible clinician or group fell below the low-volume threshold and should not have received a payment adjustment).</p> <p>A MIPS eligible clinician has supporting documentation indicating that they were excluded from the APM participation list in error and should have been scored under the APM scoring standard.</p>

## Issue Type

## Circumstance



### Extreme and Uncontrollable Circumstances

A MIPS eligible clinician has supporting documentation indicating that they should qualify for automatic reweighting of performance categories due to extreme and uncontrollable circumstances.

## What is Outside the Scope of a Targeted Review?

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

- The methodology used to determine 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 the Physician Compare Internet Website of the CMS; and
- Methodology developed that is used to calculate performance scores and the calculation of such scores, including the weighting of measures and activities under such methodology.

**Any request for a targeted review of these items will be denied.**

## When can a Targeted Review be Requested?

MIPS final performance feedback for the 2018 performance period is expected to be released on **July 1, 2019**, and you have **until September 30, 2019 at 8:00 pm Eastern Time** to request a targeted review.

We strongly encourage you to review your final MIPS performance feedback by signing into the [Quality Payment Program](#). If you identify an error with your MIPS final performance feedback and MIPS payment adjustment factor(s), request a targeted review as **soon as possible**. This will help to ensure we apply payment adjustments correctly from the start of the 2020 payment year.

Performance feedback available in July includes:

- MIPS final scores,
- 2020 MIPS payment adjustment factor, and
- the additional MIPS payment adjustment factor (if applicable).



**Note:** All scores and feedback displayed before July 1, 2019 are **preliminary** and serve as a preview of your expected performance feedback.

## How Do I Request a Targeted Review?

MIPS eligible clinicians, groups, virtual groups and APM participants can request a targeted review after reviewing their MIPS final performance feedback in July 2019. Targeted review requests will be submitted using the targeted review request form, which can be accessed from your performance feedback page.

- Sign in to the [Quality Payment Program](#)
- If you don't have a HARP account or role, visit the [QPP Access User Guide](#) for additional information on creating a HARP account and obtaining a role for your organization.

### Request a Targeted Review

If you believe there is an error with your MIPS final score or Payment Adjustment, you may request a targeted review through September 30, 2019 at 8:00 pm (EDT).

[DOWNLOAD FACT SHEET](#) ↓

[REQUEST A REVIEW](#) ↗

If you're **unable** to access MIPS final performance feedback for a MIPS eligible clinician, group, virtual group, or APM, please contact the [Quality Payment Program](#) for assistance.

## What Should I Expect After I Request a Targeted Review?

Individual MIPS eligible clinicians, groups, and virtual groups (along with their designated support staff or third-party intermediary), including those who participate in an APM, will receive a **confirmation email** after completing a targeted review request. The confirmation email will be sent to the person who submitted (entered their contact information in the submitter section) the request, notifying them that we received the request.

When evaluating the targeted review request, we may require **documentation** to support the request. If supporting documentation is needed, we will email the person who submitted the request regarding what documentation is needed. They will have **30 calendar days** to provide the requested documentation to us, or the targeted review request will be denied.

Supporting documentation may include, but is not limited to:

- Supporting extracts from the MIPS eligible clinician's Electronic Health Records
- 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 Qualifying APM Participant (QP) election forms

Documentation needs **may vary** according to the circumstances of the targeted review request.

You may provide additional documentation to support your request after our initial request. If you wish to do so, please reply to the email request and attach the additional documentation for us to review.

Each request for targeted review is **reviewed** and either **approved or denied** based upon the information provided so include as much documentation as necessary to detail the circumstances of your request.

<p>If a targeted review request is denied, there will be <b>no change</b> to the MIPS final score or associated payment adjustment.</p>	<p>If a request for targeted review is approved, the <b>outcome will vary</b> according to the specific circumstances that were reviewed.</p>
<p>For example, we may deny a request for targeted review if the request is:</p> <ul style="list-style-type: none"> <li>• Duplicative of another request, or</li> <li>• If it is not related to the calculation of the 2020 MIPS payment adjustment factor(s).</li> </ul>	<p>For example, we may determine that:</p> <ul style="list-style-type: none"> <li>• The clinician should have been excluded from MIPS and therefore is ineligible for a payment adjustment,</li> <li>• The weights of certain performance categories within the final score should be redistributed (for example, if a performance category should have been weighted at zero percent), or</li> <li>• A performance category score needs to be recalculated in accordance with the scoring methodology for the affected category (if technically feasible).</li> </ul>

If a targeted review request is **approved**, the final score and/or associated MIPS payment adjustment may be updated, if applicable; we will recalculate performance category scores and final scores to the extent possible based on data submitted during the performance year submission window that ended April 2, 2019.

Targeted review **outcomes** will be sent via email to the person who requested the targeted review. Specific changes to performance category scores, final scores and MIPS payment adjustments will be communicated through updated 2018 MIPS performance feedback. Performance feedback will be updated as soon as technically feasible.

**Please note, targeted review decisions are final and there will be no further review.**



## Additional Resources

Visit the [Quality Payment Program website](#) to check out additional resources available in the [Resource Library](#), past and upcoming [webinars](#) and other [help and support](#) available to you, like no cost technical assistance.

Sign up for the QPP listserv (“Subscribe to Updates” at the bottom of any page on the [QPP website](#)) to receive notifications about important QPP activities and deadlines, such as targeted review.

## Questions?

You can contact the Quality Payment Program at 1-866-288-8292 (TTY 1-877-715- 6222), Monday through Friday, 8:00 AM-8:00 PM Eastern Time or via e-mail at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov).