

2019

MIPS Reporting Guide

+GPM
CORP

16 Biltmore Avenue
Suite #300
Asheville, NC 28801

828.348.2888



Table of Contents

2019 MIPS Reporting	2
TIN and NPI Verification.....	2
2019 MIPS Reporting Dashboard.....	3
GPM LTC Registry Reporting Options	5
Group Reporting	5
Individual Reporting.....	5
Best of Both Worlds	6
Scoring.....	6
Estimated Points	6
Actual Points	6
Date Ranges	6
Authorization	8
Completing Submission.....	13

2019 MIPS Reporting

The deadline for data submission to CMS is March 31st, 2020 7:59:59 PM EDT.

For 2019 MIPS data submission to CMS, GEHRIMED offers multiple reporting options:

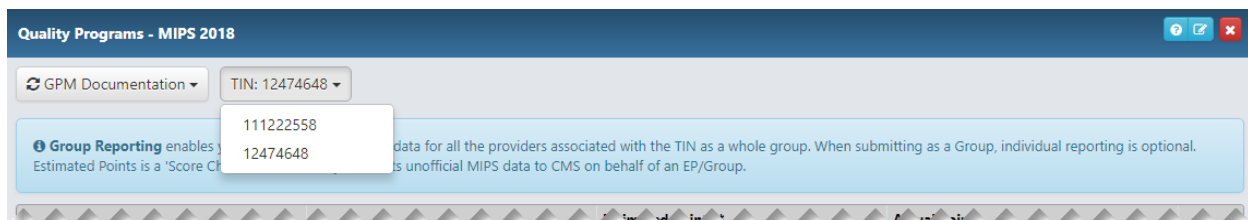
- **Free Score Check:** Practitioners/Groups have unlimited use of the GEHRIMED MIPS Dashboard to access CMS's MIPS Score Calculator to unofficially send data via the API to preview their MIPS score free of charge.
- **Official Registry Individual Reporting:** Use the GPM LTC Registry Service and report official MIPS data for individual providers to CMS. Your first individual submission will incur a cost of \$200 to \$600 for that clinician. Subsequent individual submissions for that clinician will not incur a charge.
- **Official Registry Group Reporting:** Use the GPM LTC Registry Service and report as a Group, submitting official MIPS data to CMS. Your first group submission will incur a cost of \$200 to \$600 per clinician. Subsequent group submissions for that group will not incur a charge.
- **Best of Both Worlds:** The GPM LTC Registry Service supports submitting an individual as a member of a group and as an individual. Your first individual and group submissions for an individual will incur a cost of \$200 to \$600 each for that clinician. Subsequent individual submissions for that clinician will not incur a charge.

NOTE:

Choosing the "Best of Both Worlds" submission option means submitting your provider as an individual and as a member of a group. The cost of submitting a provider as an individual is separate from the cost of submitting a provider as a part of a group.

TIN and NPI Verification

MIPS reporting is accomplished via the Tax Identification Number (TIN). The 2019 MIPS Reporting Dashboard will display each TIN associated with the group.



Below the selected TIN, the Dashboard will display all associated Providers, listed by the National Provider Identifier (NPI).

NOTE:

Make sure to verify all TIN and NPI information before proceeding.

Opt-In

Beginning with the 2019 performance period, clinicians and groups that exceed one or two, but not all three, elements of the low-volume threshold are “opt-in eligible” provided they are otherwise eligible for MIPS. To Opt-in, means the Eligible Provider (EP) and/or Group will receive performance feedback and a positive, negative or neutral payment adjustment for the Opt-In Eligible Professional.

The GPM LTC Registry provides an EP or Group the ability to indicate their Opt-In preference in the Authorization section, prior to submission.

- Elections must be confirmed before data can be submitted.
- Once made, an election to opt-in or report voluntarily is **final and cannot be reversed**.

If the EP is identified by CMS as an ‘opt-in eligible clinician’, identified by a unique TIN/NPI combination, the EP can opt-in to report as an individual for MIPS. If the EP elects to ‘opt-in’ he/she will

- Be considered a MIPS eligible clinician and be required to report,
- Receive performance feedback,
- Receive a MIPS payment adjustment (positive, negative, or neutral),
- Be eligible to have their data published on Physician Compare, and;
- Be assessed in the same way as MIPS eligible clinicians who are required to participate in MIPS and are therefore automatically included.

Opt-In Eligible Group

If the Group is identified by CMS as MIPS opt-in eligible and elects to report as a Group, all individual EPs in the group will be treated as a MIPS eligible clinician and will receive the group's score and MIPS payment adjustment.

2019 MIPS Reporting Dashboard

NOTE:

Only Group and Company Administrators may access the 2019 MIPS Reporting Dashboard.

To display the 2019 MIPS Reporting Dashboard, access the Quality Reporting window and select the ‘2019 MIPS Reporting’ button.

2019 MIPS

GEHRIMED Sales (TESTDATA18) (Default Group TaxID)

Calculate

MIPS Configuration for GEHRIMED Sales (TESTDATA18)

Total Weighted MIPS Score: 73 pts

Category	Category Weight	Weighted Score
Improvement Activities <small>01/01/2019 to 12/31/2019</small>	15%	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">Earned: 15 pts</div> </div>
Promoting Interoperability <small>01/01/2019 to 12/31/2019</small>	25%	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">Earned: 25 pts</div> </div>
Quality Measures <small>01/01/2019 to 12/31/2019</small>	45%	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">Earned: 33 pts</div> </div>
Cost*	15%	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">Earned: 0 pts</div> </div>

The GEHRIMED MIPS Dashboard is for illustrative purposes only. Since this information is user generated and controlled, GPM does not warrant the accuracy, completeness or usefulness of this information. We disclaim all liability and responsibility arising from any reliance placed on such materials by you, or by anyone who may be informed by any of its contents. Final scores within each MIPS performance category are determined solely by CMS. Bonus points received in performance categories are not included in the score calculation. Scores for participants in Alternative Payment Models (APM) will not be reflected in the MIPS Dashboard. For more information regarding MIPS and scoring methodology, please visit qpp.cms.gov.

* 2019 MIPS Scoring includes a 15% allotment to the Cost/Resource Use Category. This information is derived from CMS claims data and is not captured or reflected in the GEHRIMED MIPS Dashboard. For more information, see qpp.cms.gov.

2019 MIPS Reporting

Close

The 2019 MIPS Reporting Dashboard is displayed:

The screenshot displays the 'Quality Programs - MIPS 2018' dashboard. At the top, there are controls for 'GPM Documentation' and 'TIN: 000000013'. Below this, a blue informational box explains 'Group Reporting'. The main area contains two tables. The first table, 'Group (TIN)', shows a single entry for 'GPM Documentation (000000013)' with date ranges for IA, PI, and QM, and a total estimated points of 0. The second table, 'Provider (NPI)', shows two example providers with their respective date ranges and estimated points. A final blue informational box explains the use of the 'Score Check' service. At the bottom, there are buttons for 'Authorize', 'Submission History', and 'Close'.

GPM LTC Registry Reporting Options

Group, Individual, or Both?

GEHRIMED supports three distinct submission options:

Group Reporting

CMS considers any number of providers greater than 1 under the same TIN as a group. These users may be submitted to CMS under group scoring.

Group Reporting gives an aggregated MIPS score to every NPI reporting under the TIN.

If your group is submitting data for all three MIPS categories (Quality, Improvement Activity, and/or Advancing Care Information) - some Individual NPIs may have higher scores than the Group's aggregate score.

Individual Reporting

Individual reporting enables you to submit MIPS data for individuals, which can be beneficial for some high performers.

If the provider also reports for MIPS as an individual, they'll receive the higher of their personal MIPS Score, or the Group's score.

Individual group members who fall below the Group's MIPS score would not report as Individuals - because there would be no benefit.

Best of Both Worlds

If your Group is trying to achieve high MIPS Scores, the ability to report two ways is a strategic advantage - you can optimize your total 2021 Part B payment rate by reporting your best performers (anyone above the Group's aggregate score) both as a Group Member, and as an Individual.

Scoring

Two scores are available in GEHRIMED, Estimated Points and Actual Points.

Group (TIN)	Date Ranges	Estimated Points * Total (PI, IA, QM) and Date	Actual Points Total (PI, IA, QM) and Date	Export
GPM Documentation (000000013)	IA 01/01/2018 to 12/31/2018 PI 01/01/2018 to 12/31/2018 QM 01/01/2018 to 12/31/2018	Calculate 50 (20, 15, 15)	02/08/2019 Submit 0 (0, 0, 0)	Export

Estimated Points

GEHRIMED enables you to test your submission data and receive a point estimate that will provide some insight into what the final submission score may be. Calculating Estimated Points is free of charge and is not recorded by CMS, however, estimated points only provide an approximation of the Actual Points.

Click '**Calculate**' to generate the Estimated Points for a Group or Individual:

Actual Points

Actual Points are displayed after officially submitting your data to CMS. You may submit your data as many times as you want - only your initial submission is charged. CMS will consider your last submission before the date, March 31st, 7:59:59 EDT your official submission.

NOTE:

Actual Points are generated from your official submission to CMS and are therefore more accurate than Estimated Points. However, due to the nature of the CMS review of your final, official submission, we cannot guarantee that the Actual Points will be accurate with your final score from CMS. CMS offers the following disclaimer for API Submissions:

Disclaimer: Scoring is subject to change, based on periodic policy updates, eligibility reviews, and technical integration developments.

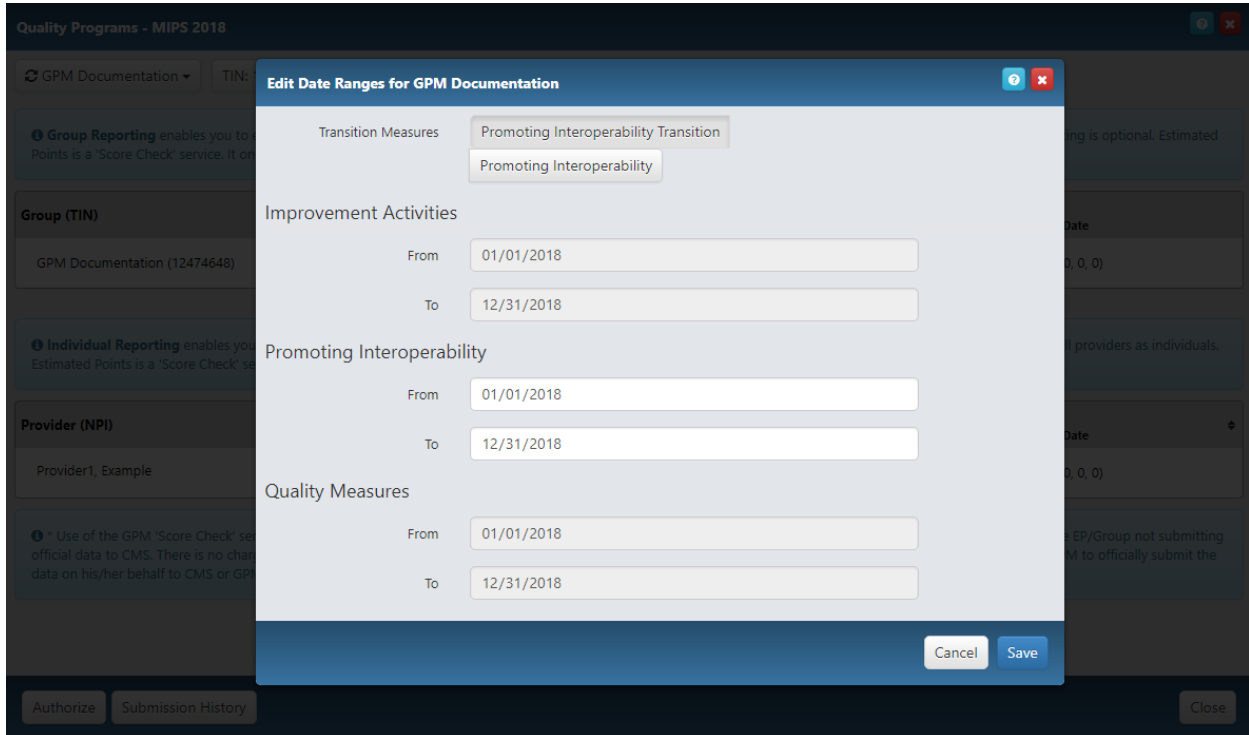
Date Ranges

Date Ranges determine the time period for the provider information submitted to CMS. Date Ranges must be selected for each submission category, and Date Range may be defined at the Group and

Individual level. Date Ranges are not required to overlap. Date Ranges for a Group will apply to every provider submitted as a part of that group.

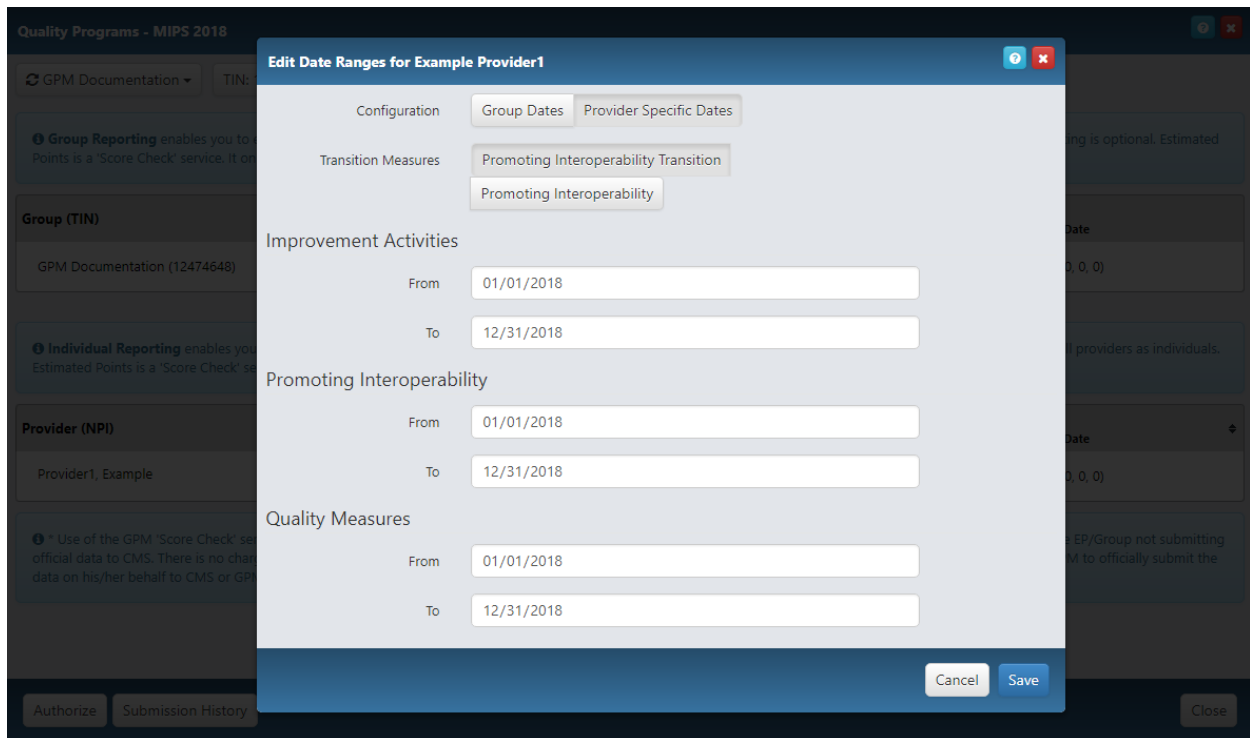
Date Range Requirements:

- Quality - Full Year
- Promoting Interoperability - 90 Days Promoting Interoperability
- Improvement Activities - date range will automatically default to 1 year. However, CMS only requires a 90-Day reporting period, which must be documented at the practice/provider level.



When submitting a provider as an individual you may use the Group Date by selecting that button, or you may input custom dates specific to the provider.

The Individual Dates must still meet the minimum requirements for submission.



Authorization

Before submitting data to CMS using GEHRIMED, your Groups and Providers must be authorized. Company and Group Administrators may authorize groups for submissions, but providers will need to log in and authorize in their account before you may submit for them as an individual.

Opt-In

If you are identified as a MIPS Eligible Clinician or Group by CMS, the option to “Opt-In” to the program is presented for Groups and/or Individuals when completing the Authorization.

2019 Registry Authorization Agreement

The **ELIGIBLE PROFESSIONAL (OR GROUP)** acknowledges and agrees that he/she/they is/are completely responsible for (a) the content of the responses to each MIPS performance measure, and (b) the quality of the responses chosen to be submitted via the GPM LTC Registry.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** certifies and attests that he/she/they will submit only accurate, complete and reliable data and that he/she/they shall notify GPM promptly if any data submitted is determined to be inaccurate or incomplete.

In connection with data being entered by an **ELIGIBLE PROFESSIONAL (OR GROUP)** into GEHRIMED for MIPS and the data chosen by an **ELIGIBLE PROFESSIONAL (OR GROUP)** to be submitted to CMS through the GPM registry:

ELIGIBLE PROFESSIONAL (OR GROUP) is aware that the submission of data via the GPM Registry does not guarantee that CMS will not apply a payment adjustment as such matters are solely in the control of CMS.

ELIGIBLE PROFESSIONAL (OR GROUP) further acknowledges and agrees that GPM has no responsibility or involvement in any determination by CMS regarding the MIPS incentive bonus.

Further, GPM shall not have any responsibility for or liability arising out of CMS's decision to pay (or not pay) a MIPS incentive bonus or the way that MIPS incentive bonus, if awarded by CMS in its sole discretion, is paid.

ELIGIBLE PROFESSIONAL (OR GROUP) understands that GPM must validate that they submitted accurate information to the Registry on the minimum number of eligible patients, visits, procedures or episodes for a given measure.

ELIGIBLE PROFESSIONAL (OR GROUP) agrees to cooperate with GPM's efforts to validate this information and shall use its best efforts to gather, provide and grant access to any documentation or information requested by GPM that is needed to carry out its validation strategy.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** acknowledges that CMS requires GPM undertake a validation of the data included in the GPM Registry that demonstrates adherence to the quality measures reported during each reporting period (as determined by CMS). As part of GPM's validation strategy, an Eligible Professional or Group in the GPM Registry will be randomly selected and asked to provide documentation on a percent of the Eligible Professional's or Group's patients included in the GPM Registry during each reporting period. Any selected **ELIGIBLE PROFESSIONAL (OR GROUP)** will be required to provide hard copies of that portion of the medical record that documents adherence to the quality measures (QM) included in the GPM Registry. If **ELIGIBLE PROFESSIONAL (OR GROUP)** is selected, GPM may review and evaluate selected documents in the GEHRIMED software and may request hard copies of any supporting documents must be submitted to GPM via one of the following options: a) faxed to 828-348-2867, b) mailed to 16 Biltmore Ave, Suite 300, Asheville, NC 28801 or c) emailed via an encrypted email link that GPM establishes with the Eligible Professional or Group. Documents must be submitted within one (1) month of receipt of the request for information. The selection methodology of the validation strategy would ensure that any **ELIGIBLE PROFESSIONAL (OR GROUP)** that is randomly selected in a reporting period documentation will not be selected in the next reporting period.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** agrees that GPM may release to CMS and/or its contractors all MIPS data submitted, including data for Medicare and non-Medicare beneficiaries. The **ELIGIBLE PROFESSIONAL (OR GROUP)** agrees that GPM may release to CMS and/or its contractors all MIPS data submitted. The **ELIGIBLE PROFESSIONAL (OR GROUP)** acknowledges that the data submitted may be subject to validation by CMS, including submission of physical records upon request of CMS. **ELIGIBLE PROFESSIONAL (OR GROUP)** agrees to cooperate with GPM's efforts to validate information and shall use its best efforts to gather, provide and grant access to any documentation or information requested by GPM that is needed to carry out validation.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** assumes any and all liability for any claims, damages, suits, and expenses arising out of or in connection with the Eligible Professional's or Group's submission of any data or use of any such data or reports. In no event shall GPM be liable for any incidental, indirect, special or consequential damages, including, but not limited to, loss of use, revenue, profits or savings, even if GPM knew or should have known of the possibility of such damages, claims, demands or actions against an Eligible Professional or Group by any person.

In connection with participation in the GPM LTC Registry, the **ELIGIBLE PROFESSIONAL (OR GROUP)** agrees to release all claims he/she may have against GPM. The **ELIGIBLE PROFESSIONAL (OR GROUP)** further agrees to hold GPM and its agents and contractors harmless from and against any and all claims brought against Eligible Professional or Group or its agents or contractors resulting from failure to comply with policies and procedures established by GPM for the operation of the GPM LTC Registry or failure to comply with applicable law. By clicking "Authorize" below the **AUTHORIZED REPRESENTATIVE** is acknowledging that he/she has been given the authority to bind the Eligible Professional or Group by the terms of this Agreement with the same binding effects as if the Eligible Professional or Group had manually signed the original.

By clicking "Authorize" below the **AUTHORIZED REPRESENTATIVE** is acknowledging that the Eligible Professional or Group is agreeing to pay associated Registry data submission fees.

I attest that I am a duly **AUTHORIZED REPRESENTATIVE** of practice authorized to sign on behalf of a Group of Eligible Professionals.

Opt-In Eligible Group
 If the Group is identified by CMS as MIPS opt-in eligible and elects to report as a Group, all individual EPs in the group will be treated as a MIPS eligible clinician and will receive the group's score and MIPS payment adjustment.
 If the practice elects to opt-in as a group and the clinician elects to opt-in as an individual, the clinician would get the higher of the two final scores and associated payment adjustment.

Opt-in

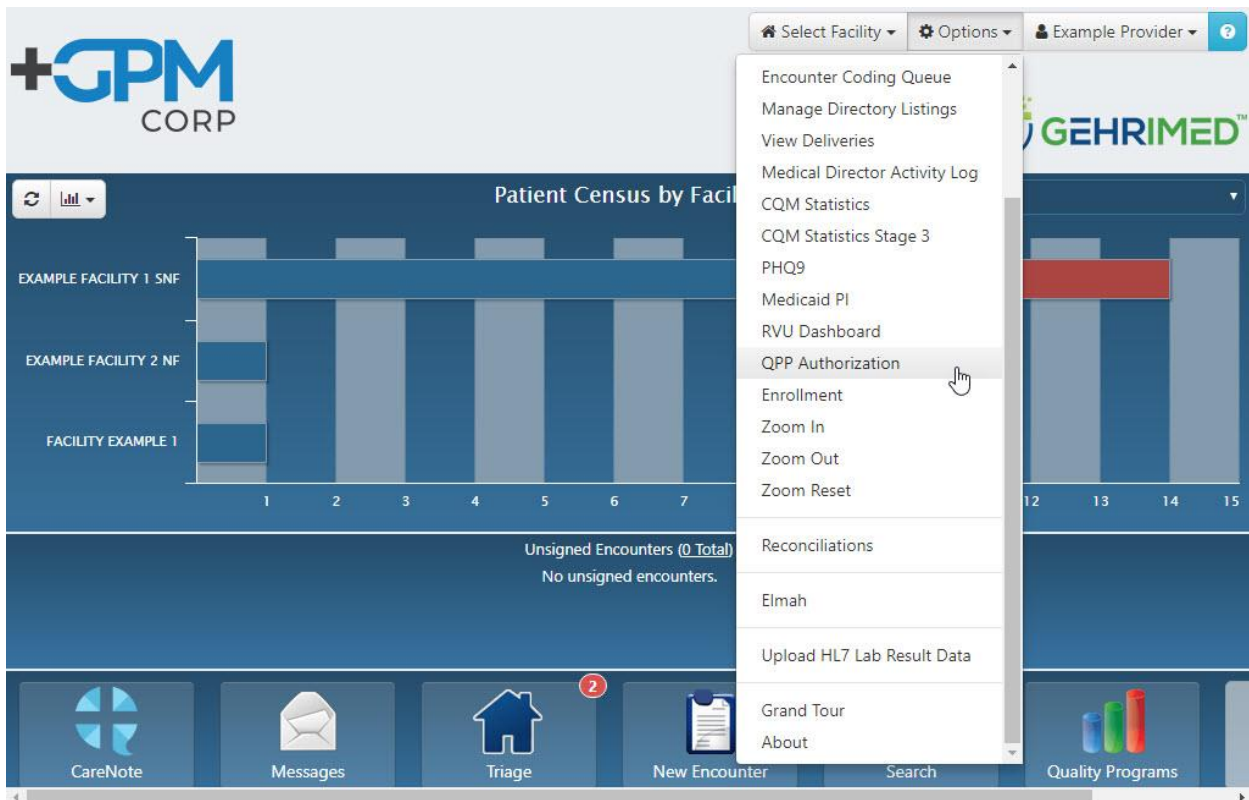
Verify Registry Authorization Agreement By checking this box and typing my name in the box below I am electronically signing this agreement.

Authorizer Name:

Individual Authorization

To Complete the 2019 QPP Registry Authorization as an Individual:

1. Log in to GEHRIMED and open the **Options** menu:



2. Select the **QPP Authorization** option to display the 2019 Registry Authorization Agreement:

2019 Registry Authorization Agreement

Authorize on Behalf of: **Provider, Example (000010598/0000000296)**

This Agreement ("Agreement"), made by and between the undersigned Eligible Professional ("EP") and Geriatric Practice Management Corp ("GPM"), gives permission to GPM to transmit to the Centers for Medicare and Medicaid Services ("CMS") certain Merit Based Incentive Payment System ("MIPS") data captured through the use of GPM's electronic health record system, GEHRIMED, for the 2019 reporting year via GPM's CMS certified registry ("GPM LTC Registry").

THE EP UNDERSTANDS THAT HE/SHE MUST INDIVIDUALLY SIGN THIS AGREEMENT TO AUTHORIZE GPM TO SUBMIT THE DATA ON HIS/HER BEHALF TO CMS OR GPM WILL NOT SUBMIT ANY DATA.

THE EP ATTESTS THAT ALL DATA PROVIDED TO THE GPM REGISTRY IS TRUE AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE AND ABILITY.

THE EP UNDERSTANDS THAT THERE IS A FEE FOR EVERY SUBMISSION MADE VIA THE GPM LTC REGISTRY. BY SUBMITTING DATA THROUGH THE GPM REGISTRY, THE ELIGIBLE PROFESSIONAL (OR GROUP) AGREES TO PAY THE ASSOCIATED FEES FOR WHICH IT WILL BE BILLED. ANY QUESTIONS REGARDING PRICING DETAILS MUST BE DIRECTED TO A GPM ACCOUNT REPRESENTATIVE PRIOR TO MAKING ANY SUBMISSION. The EP understands that this agreement is only valid for the reporting period of the above stated year and must be renewed annually.

The EP understands that CMS requires that MIPS data be submitted under the EP's National Provider Identifier (NPI), as well as the Taxpayer Identification Number ("TIN") of the practice or individual EP that is used by the EP to bill Medicare fee-for-service.

The EP confirms that the NPI and TIN listed in GEHRIMED are accurate per the requirements listed above.

The EP understands and acknowledges that GPM's sole responsibility as the GPM LTC Registry is to extract from GEHRIMED and submit to CMS all MIPS data. The EP acknowledges and agrees that he/she is completely responsible for (a) the content of the responses to each MIPS performance measure, and (b) the quality of the responses chosen to be submitted via the GPM LTC Registry.

The EP certifies and attests that he/she will submit only accurate, complete and reliable data and that he/she shall notify GPM promptly if any data submitted is determined to be inaccurate or incomplete.

In connection with data being entered by the EP into GEHRIMED for MIPS and the data chosen by EP to be submitted to CMS through the GPM registry:

EP is aware that the submission of data via the GPM LTC Registry does not guarantee that CMS will not apply a payment adjustment as such matters are solely in the control of CMS.

EP further acknowledges and agrees that GPM has no responsibility or involvement in any determination by CMS regarding the MIPS incentive bonus.

Further, GPM shall not have any responsibility for or liability arising out of CMS's decision to pay (or not pay) a MIPS incentive bonus or the way that MIPS incentive bonus, if awarded by CMS in its sole discretion, is paid.

Print Cancel Save

3. Read the Authorization Agreement, select the acknowledgement, and enter your signature:

2019 Registry Authorization Agreement

By clicking 'Authorize' below the EP is acknowledging that he/she is agreeing to be bound by the terms of this Agreement with the same binding effects as if EP had manually signed the original.

By clicking 'Authorize' below the EP is acknowledging that he/she is agreeing to pay associated Registry data submission fee(s).

I attest that I am the EP.

Opt-In Eligible Professional

If the EP is identified by CMS as an 'opt-in eligible clinician', identified by a unique TIN/NPI combination, the EP can opt-in to report as an individual for MIPS. If the EP elects to 'opt-in' he/she will:

- Be considered a MIPS eligible clinician and be required to report,
- Receive performance feedback,
- Receive a MIPS payment adjustment (positive, negative, or neutral),
- Be eligible to have their data published on Physician Compare, and;
- Be assessed in the same way as MIPS eligible clinicians who are required to participate in MIPS and are therefore automatically included.

If the practice elects to opt-in as a group and the clinician elects to opt-in as an individual, the clinician would get the higher of the two final scores and associated payment adjustment.

I attest that I am an 'opt-in' eligible professional and that I elect to opt-in.

You have already opted-in for MIPS Reporting.

Verify Registry Authorization Agreement

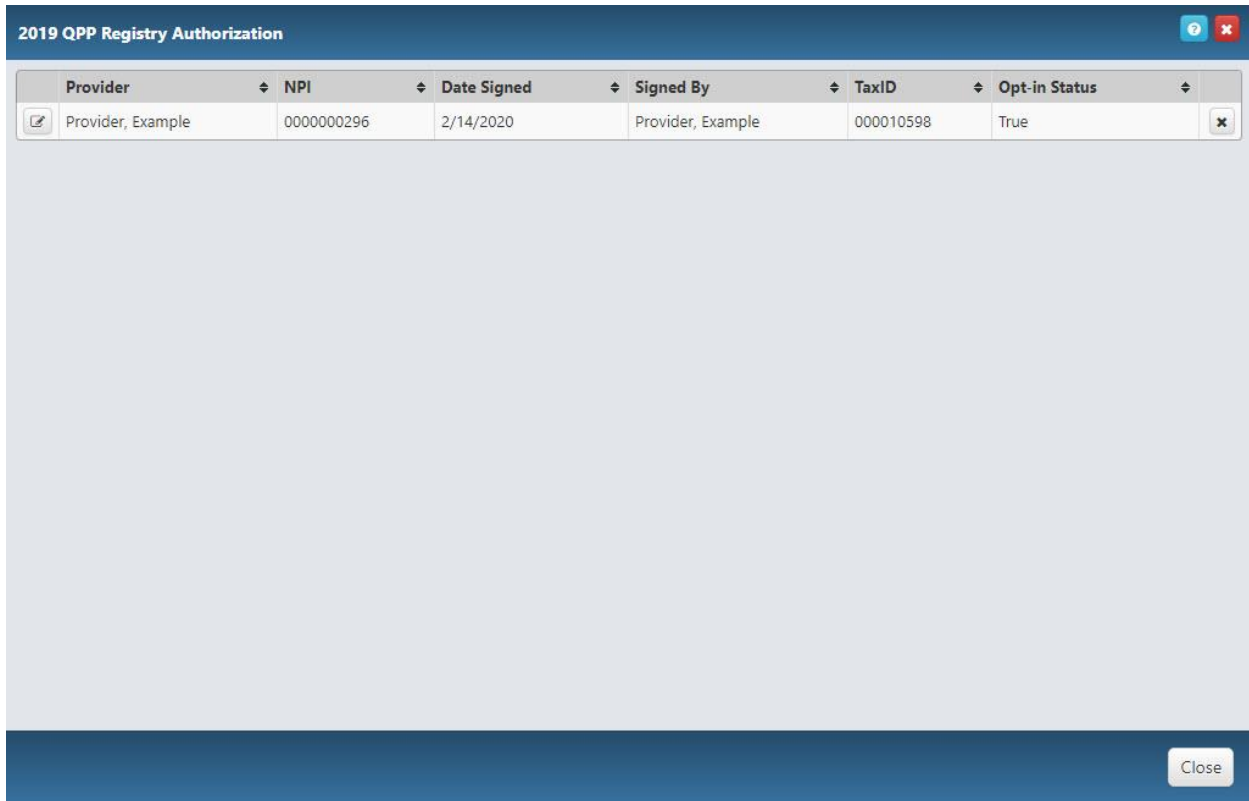
By checking this box and typing my name in the box below I am electronically signing this agreement.

Authorizer Name:

Print Cancel Save

4. Select **Save** to complete the Authorization.

Once you have authorized, you may view your authorization by selecting the menu option again:



Revoke your authorization by selecting the  icon associated with your authorization.

Group Authorization

To Complete the 2019 Registry Authorization Agreement for a Group:

1. Access the MIPS 2019 Reporting Dashboard
2. Select the 'Authorize' button to display the 2019 QPP Registry Authorization:



3. Select the  button to display the Registry Authorization:

2019 Registry Authorization Agreement

Authorize on Behalf of: **GPM Documentation (000010598)**

This Agreement ("Agreement"), made by and between the undersigned Authorized Representative ("Authorized Representative") on behalf of a Merit Based Incentive Payment System ("MIPS") Eligible Professional ("Eligible Professional") or group of Eligible Professionals ("Group"), as defined by the Centers for Medicare and Medicaid Services ("CMS"), and Geriatric Practice Management Corp. ("GPM"), gives permission to GPM to transmit to the CMS certain MIPS data captured through the use of GPM's electronic health record system, GEHRIMED, for the 2019 reporting year via GPM's CMS certified registry ("GPM LTC Registry").

THE ELIGIBLE PROFESSIONAL (OR GROUP) ATTESTS THAT ALL DATA PROVIDED TO THE GPM REGISTRY IS TRUE AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE AND ABILITY.

THE ELIGIBLE PROFESSIONAL (OR GROUP) UNDERSTANDS THAT THERE IS A FEE FOR EVERY SUBMISSION MADE VIA THE GPM REGISTRY. BY SUBMITTING DATA THROUGH THE GPM REGISTRY, THE ELIGIBLE PROFESSIONAL (OR GROUP) AGREES TO PAY THE ASSOCIATED FEES FOR WHICH IT WILL BE BILLED. ANY QUESTIONS REGARDING PRICING DETAILS MUST BE DIRECTED TO A GPM ACCOUNT REPRESENTATIVE PRIOR TO MAKING ANY SUBMISSION.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** understands that this agreement is only valid for the reporting period of the above stated year and must be renewed annually.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** understands that CMS requires that MIPS data be submitted under the Eligible Professional or Group NPI, as well as the Taxpayer Identification Number ("TIN") of the practice or individual Eligible Professional that is used by the ELIGIBLE PROFESSIONAL to bill Medicare fee-for-service.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** confirms that the NPI/NPIs and TIN/TINs listed in GEHRIMED are accurate per the requirements listed above.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** understands and acknowledges that GPM's sole responsibility as the GPM LTC Registry is to extract from GEHRIMED and submit to CMS all MIPS data.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** acknowledges and agrees that he/she/they is/are completely responsible for (a) the content of the responses to each MIPS performance measure, and (b) the quality of the responses chosen to be submitted via the GPM LTC Registry.

The **ELIGIBLE PROFESSIONAL (OR GROUP)** certifies and attests that he/she/they will submit only accurate, complete and reliable data and that he/she/they shall notify GPM promptly if any data submitted is determined to be inaccurate or incomplete.

Print Cancel Save

4. Read the Authorization Agreement, select the acknowledgement, and enter your signature:

2019 Registry Authorization Agreement

*The **ELIGIBLE PROFESSIONAL (OR GROUP)** hereby agrees to hold GPM and its agents and contractors harmless from and against any and all claims brought against Eligible Professional or Group or its agents or contractors resulting from failure to comply with policies and procedures established by GPM for the operation of the GPM LTC Registry or failure to comply with applicable law. By clicking 'Authorize' below the **AUTHORIZED REPRESENTATIVE** is acknowledging that he/she has been given the authority to bind the Eligible Professional or Group by the terms of this Agreement with the same binding effects as if the Eligible Professional or Group had manually signed the original.*

*By clicking 'Authorize' below the **AUTHORIZED REPRESENTATIVE** is acknowledging that the Eligible Professional or Group is agreeing to pay associated Registry data submission fee(s).*

*I attest that I am a duly **AUTHORIZED REPRESENTATIVE** of practice authorized to sign on behalf of a Group of Eligible Professionals.*

Opt-In Eligible Group
 If the Group is identified by CMS as MIPS opt-in eligible and elects to report as a Group, all individual EPs in the group will be treated as a MIPS eligible clinician and will receive the group's score and MIPS payment adjustment.
 If the practice elects to opt-in as a group and the clinician elects to opt-in as an individual, the clinician would get the higher of the two final scores and associated payment adjustment.

You have already opted-in for MIPS Reporting.


Verify Registry Authorization Agreement

By checking this box and typing my name in the box below I am electronically signing this agreement.

Authorizer Name:

Print Cancel Save

5. Select **Save** to complete the Authorization.



Authorizations may be deleted by selecting the associated  icon on the 2019 QPP Registry Authorization page.





Completing Submission

1. Once you are ready to submit your data, at the Group or Individual level, select the appropriate 'Submit' button.

WARNING:

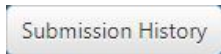
Submitting for the first time as a group or individual incurs a monetary cost per provider. *The Submission cost can be applied twice if a provider is submitted to CMS as part of a group and as an individual.* After the first submission there is no cost to submit your group or provider again.

2. A  icon will be displayed as the data is processed. This may take up to several seconds.
3. Once the 'Submit' button returns the new Actual Points score is displayed. Group and Individuals which have been successfully submitted to CMS will include a .

Group (TIN)	Date Ranges	Estimated Points * Total (PI, IA, QM) and Date	Actual Points Total (PI, IA, QM) and Date	Export
 GPM Documentation (000000013)	IA 01/01/2018 to 12/31/2018 PI 03/01/2018 to 06/30/2018 QM 01/01/2018 to 12/31/2018	 Calculate 0 (0, 0, 0) 02/08/2019	 Submit 0 (0, 0, 0) 02/11/2019	

Only the last, most recent submission will be considered by CMS as the official score.

Submission History

You may view your total Submission history by selecting the  button on the Submission Window:

Date Sent	Individual or Group?	Provider	Submitted By	Taxpayer ID	Estimated Points * Total(PI,IA,QM)	Actual Points Total(PI,IA,QM)	PI Date Range	Actual Or Estimate	PI Or PI Trans
02/08/2019 10:37:57 AM	Group		Jonathan Montgomery	000000013	50 (20, 15, 15)		PI 01/01/2018 to 12/31/2018	Estimate	PI
02/08/2019 10:36:22 AM	Group		Jonathan Montgomery	000000013	15 (0, 0, 15)		PI 01/01/2018 to 12/31/2018	Estimate	PI
Per Page 20									Total: 2

~end of document~