Quality Payment
PROGRAM

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS)

2019 Targeted Review User Guide

DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

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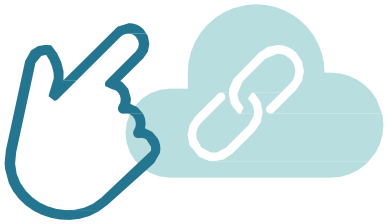
Purpose: *The purpose of this guide is to explain what a targeted review is and provide step-by-step instructions on how to complete the request form and what to do after submitting your request.*

How to Use This Guide

How to Use This Guide



Please Note: 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.

Table of Contents

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Hyperlinks

Hyperlinks to the QPP website are included throughout the guide to direct the reader to more information and resources.

Introduction

What is a Targeted Review?

A targeted review is a process in which Quality Payment Program (QPP) participants can request for the Centers for Medicare & Medicaid Services (CMS) to review the calculation of their 2021 MIPS payment adjustment factor and, if applicable, their additional MIPS payment adjustment factor for exceptional performance.

Once 2021 MIPS payment adjustment factor(s) are released, you will have **60 days** to request a targeted review for the 2019 performance year.

NEW: Beginning with the 2019 performance year, we have created **a new targeted review application** accessible through qpp.cms.gov. 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 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 are a MIPS eligible clinician, group, virtual group, or 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, the targeted review process 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 **2021 MIPS payment adjustment factor(s)** and associated **2019 MIPS performance feedback**.

While this is not a comprehensive list, the following are examples of circumstances in 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, due to 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 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 Physician Compare (or successor website).
- The developed methodology used to calculate performance scores and the calculation of such scores, including the weighting of measures and activities under such methodology.

*Any targeted review request for these reasons will be **denied**.*

Experience an issue with your data? Issues related to inaccurate, unusable, or otherwise compromised data do not fall under the scope of a targeted review and will be denied. If you are requesting performance category reweighting due to inaccurate, unusable, or otherwise compromised performance data, contact the QPP Service Center.

How Can I Prepare For The Targeted Review Process?

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 helps ensure we apply payment adjustments correctly from the start of the 2021 payment year.

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 individual who submits the request ("submitter") and those who 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, APM Entity participating in an APM** – APM Entity 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 is not limited to:
    - 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

You do not need a specific role (e.g., security official) for your organization to submit a targeted review request.

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

How to Request a Targeted Review

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 qpp.cms.gov.

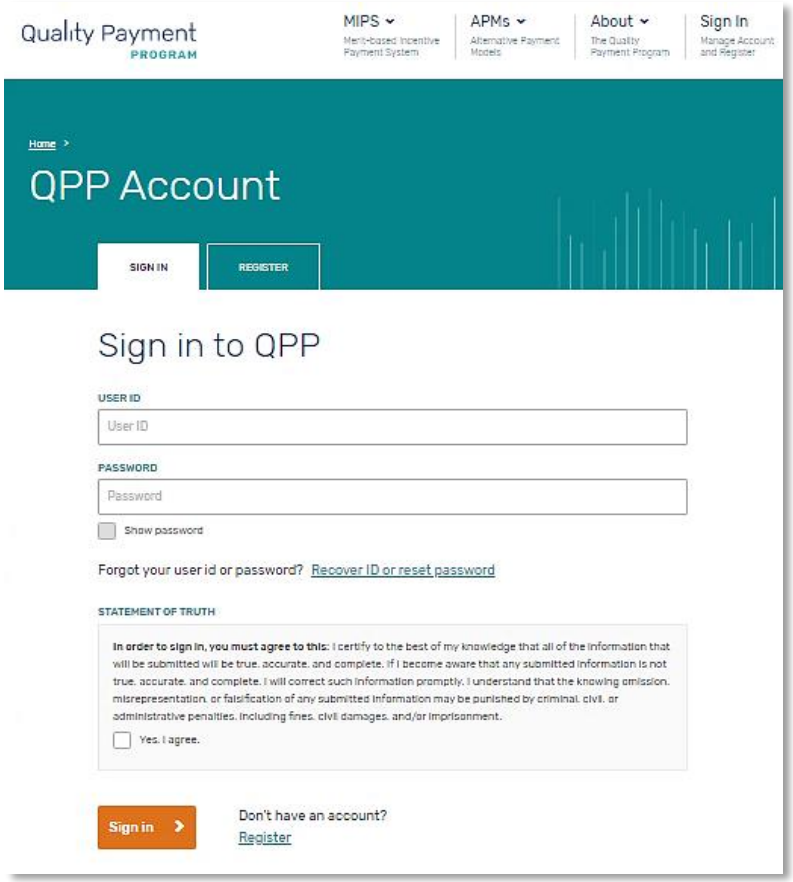
Step 1: Sign in to qpp.cms.gov

Sign in to your **QPP account** using your HARP credentials on qpp.cms.gov.

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?
Visit the HARP FAQs.

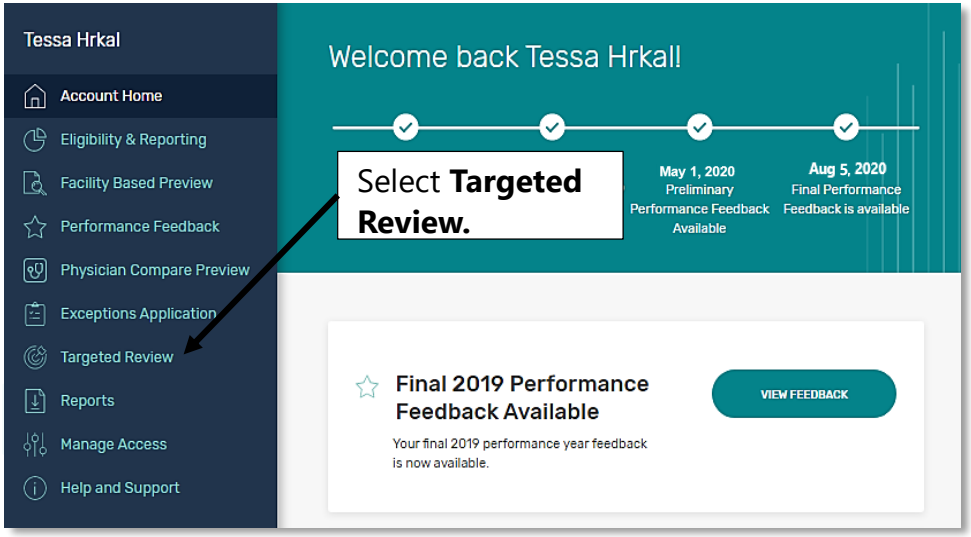


Sign in to qpp.cms.gov → Select Targeted Review → Add New Targeted Review → Select Application Type and Enter Identifying Information → Enter Submission Information → Select Performance Categories → Select Issue Type and Attach Supporting Documentations → Certify and Submit for Review

How to Request a Targeted Review

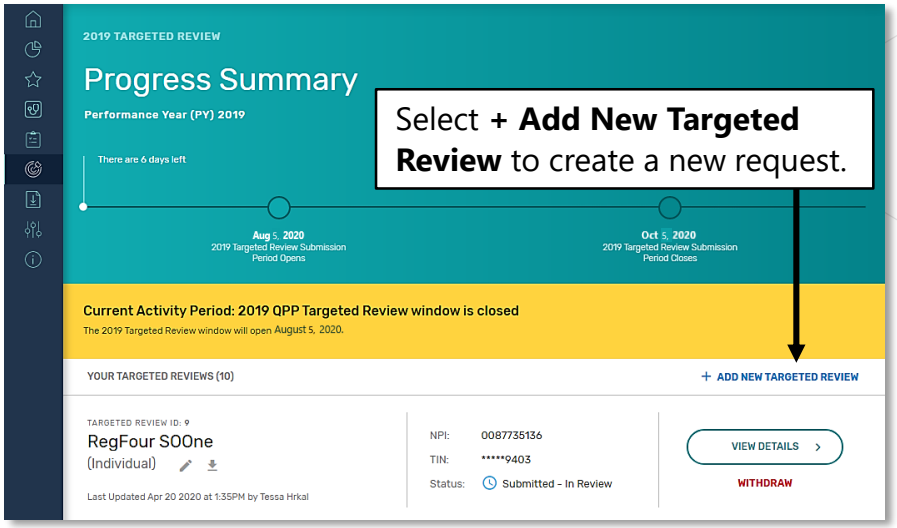
Step 2: Select Targeted Review

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



Step 3: Add New Targeted Review

After selecting Targeted Review from the left-hand navigation pane, you will be brought to the Targeted Review Progress Summary page. Select **+ Add New Targeted Review** to access the Targeted Review application.



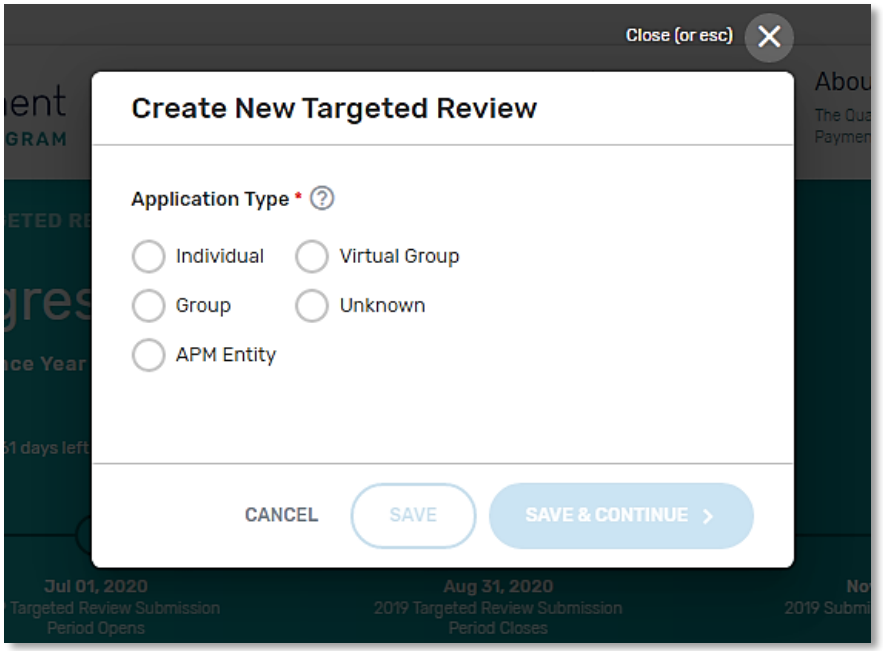
Sign in to qpp.cms.gov → Select Targeted Review → Add New Targeted Review → Select Application Type and Enter Identifying Information → Enter Submission Information → Select Performance Categories → Select Issue Type and Attach Supporting Documentations → Certify and Submit for Review

Disclaimer: The screenshots included in this user guide were based on the QPP test environment and may not reflect program deadlines or the actual experience. Because we are always working to incorporate feedback and improve experience, you may notice some differences between these screenshots and what you see on qpp.cms.gov.

How to Request a Targeted Review

Step 4a: Select Application Type

Select the **application type** that aligns **with how your data was submitted**[1] to MIPS for the 2019 performance year, then select **save & continue**.



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

Additional information on each application type and the required identifying information is available on the following page.

[1]There are circumstances under which you will request your targeted review at a different level than how your data was submitted. These circumstances include but are not limited to requesting a targeted review of an eligible clinician's MIPS eligibility at the level which they should have been scored or their eligibility to be scored under the APM Scoring Standard.

Disclaimer: The screenshots included in this user guide were based on the QPP test environment and may not reflect program deadlines or the actual experience. Because we are always working to incorporate feedback and improve experience, you may notice some differences between these screenshots and what you see on qpp.cms.gov.

Step 4b. Provide Identifying Information

You will be asked to enter **identifying information** based on which application type you choose. Each application type requires a different type of identifying information (e.g., individual – NPI, group – TIN).

Note: You have the option to create a name (personal reference only) for your request by clicking the pencil next to your request on the progress summary page.

Application Type	Select if you are…	You will be asked to provide the following identifying information…
Individual	• A MIPS eligible clinician who participated in MIPS **individually** by submitting data under your unique TIN/NPI combination • Requesting a targeted review of a clinician's **MIPS eligibility**	Clinician NPI *
Group	A practice that participated in MIPS as a **group** by submitting aggregated data under a single TIN on behalf of all eligible clinicians in your practice	Group TIN *
Virtual Group	A part of an **approved virtual group** that participated in MIPS by submitting aggregate data under your virtual group ID on behalf of all TINs within the virtual group	Virtual Group ID * Application Title
APM Entity	• MIPS eligible clinician who **participated in an APM individually** by submitting data under a unique TIN/NPI combination associated with an APM • Requesting a targeted review of a **clinician's eligibility to be scored under the APM Scoring Standard** • Practice that **participated in an APM as a group** by submitting aggregate data under a single TIN on behalf of all eligible clinicians in the practice • **APM Entity** that submitted data on behalf of all eligible clinicians in the entity	APM Entity ID *
Unknown	Select **unknown** if you are **unsure** how you or the party requesting the review submitted data to MIPS	Clinician NPI *

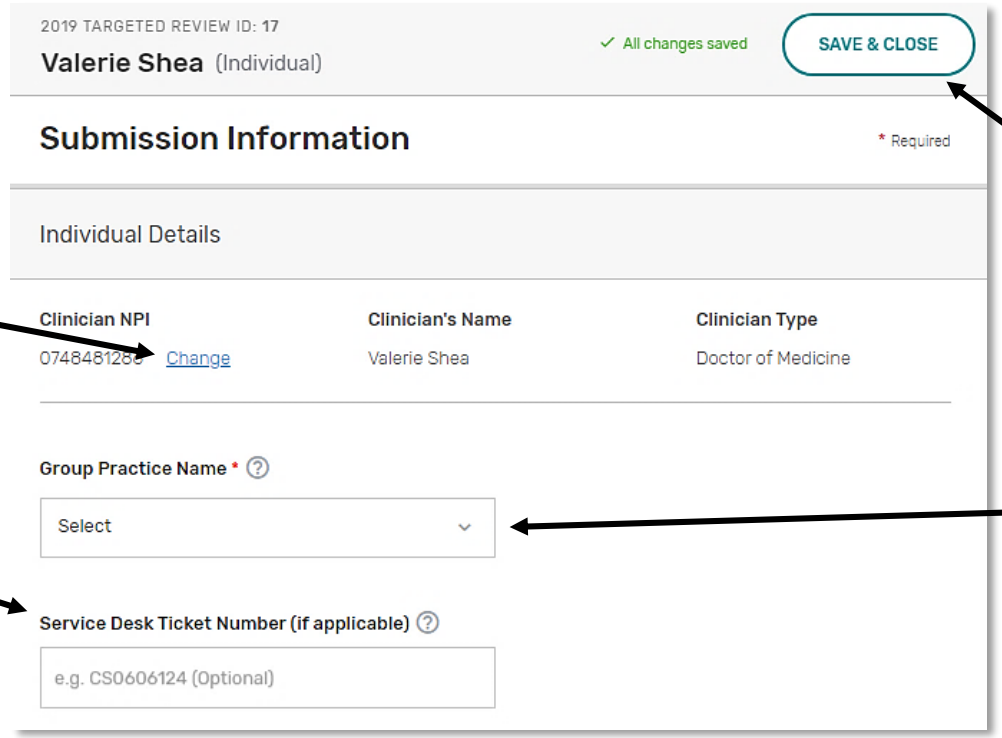
Fields with a red asterisk (*) are required.

How to Request a Targeted Review

Step 5a: Enter Submission Information – Individual, Group, Virtual Group, APM Entity Details

Verify the details (e.g., clinician's name, clinician type, group's name, etc.) that are pre-populated, using data pulled from the QPP Participation Status Tool, on the identifying information (NPI, TIN, Virtual Group ID, APM Entity ID) you entered.

The following screenshots will demonstrate the targeted review application workflow for an individual.



You can update or correct identifying information or application type.

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

Safely save your progress and return later to complete request.

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

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

Sign in to qpp.cms.gov → Select Targeted Review → Add New 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 5b: Enter Submission Information – Submitter Details

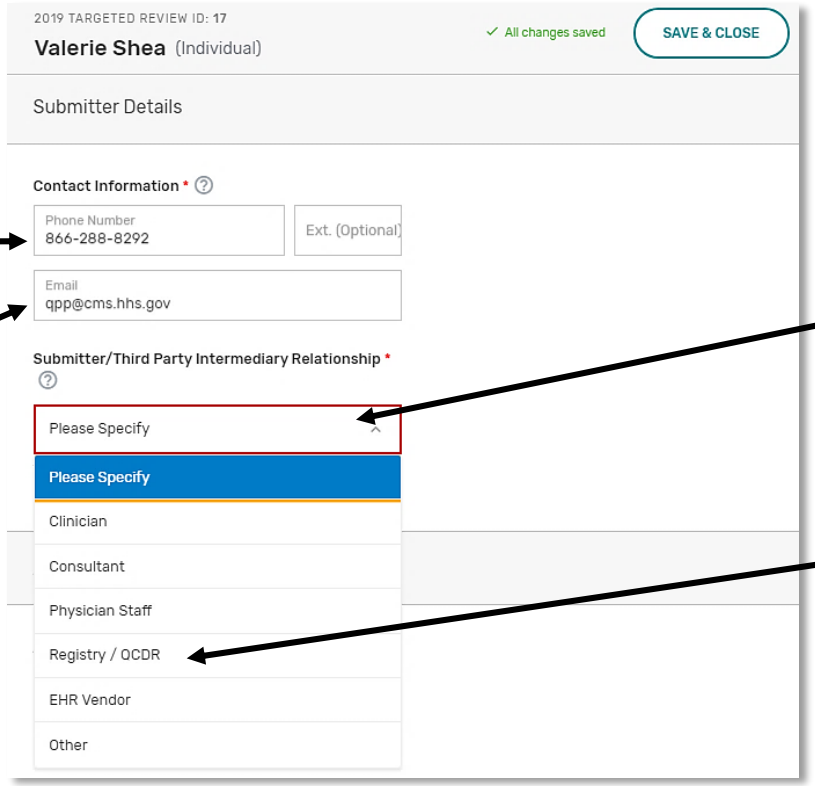
Enter your preferred **contact information** and **identify your relationship** with the party for which you are requesting a targeted review on their behalf.

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

Note: You must enter a valid area code.

Enter **email address** (associated with your HARP account).

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



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

Note: If you select **other**, you will be prompted to describe your relationship.

If you select Registry / Qualified Clinical Data Registry (QCDR), we will pull information from their API token.

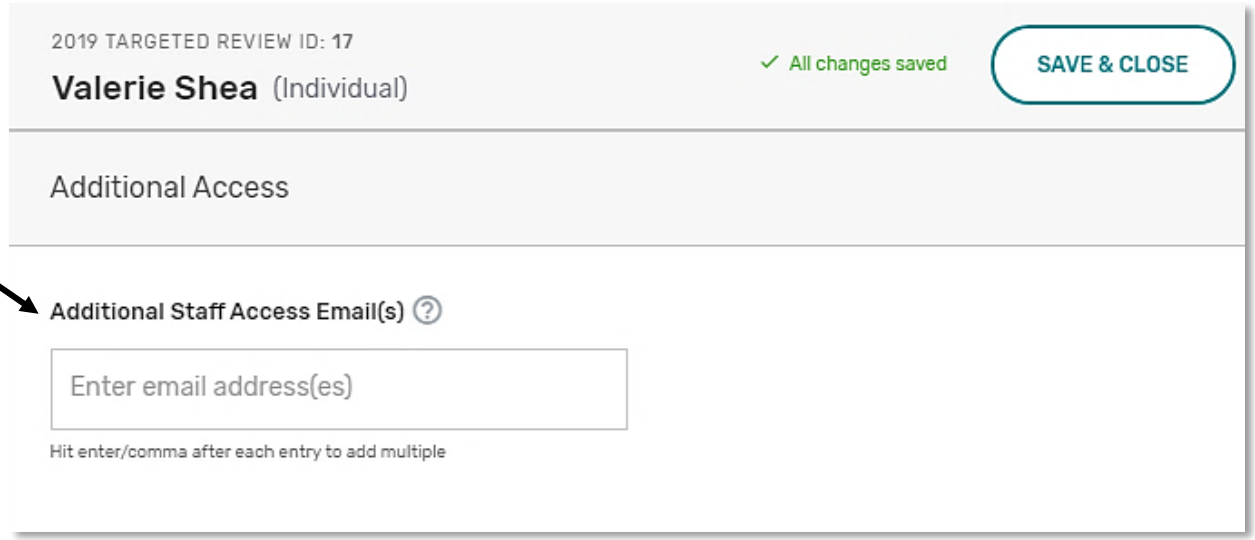
1. Sign in to qpp.cms.gov
2. Select Targeted Review
3. Add New Targeted Review
4. Select Application Type and Enter Identifying Information
5. Enter Submission Information
6. Select Performance Categories
7. Select Issue Type and Attach Supporting Documentations
8. Certify and Submit for Review

Step 5c: Enter Submission Information – Additional Access

In the Additional Access section of the request application, 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 a HARP account**, that person will be able to access the targeted review application, in addition to receiving notifications about the status of the request, when they sign in to qpp.cms.gov with their HARP credentials.
- If you are submitting an application on behalf of an individual, group, or virtual group, users with access to the practice or virtual group on qpp.cms.gov will only be able to access the application if you add the email associated with their HARP account.

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



Sign in to qpp.cms.gov → Select Targeted Review → Add New 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

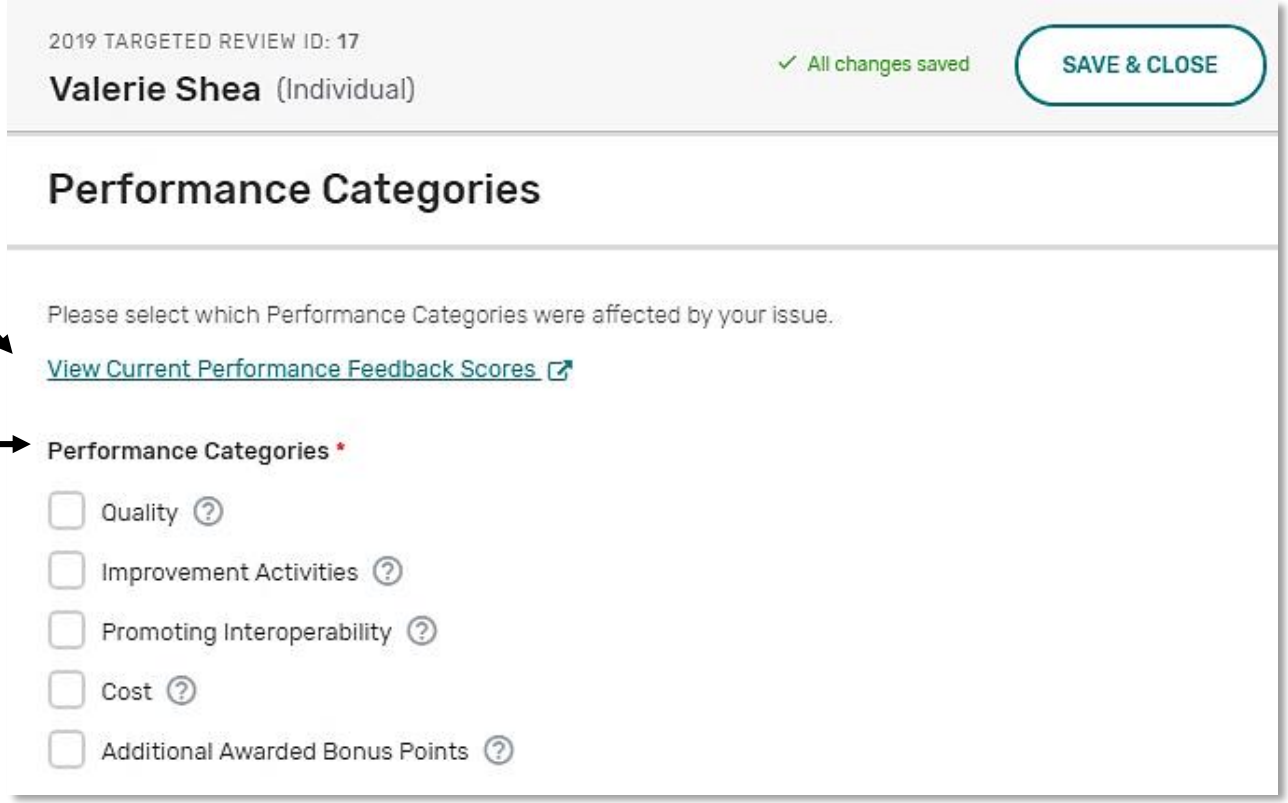
How to Request a Targeted Review

Step 6: Select Performance Categories

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

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

Select any affected **performance categories.**



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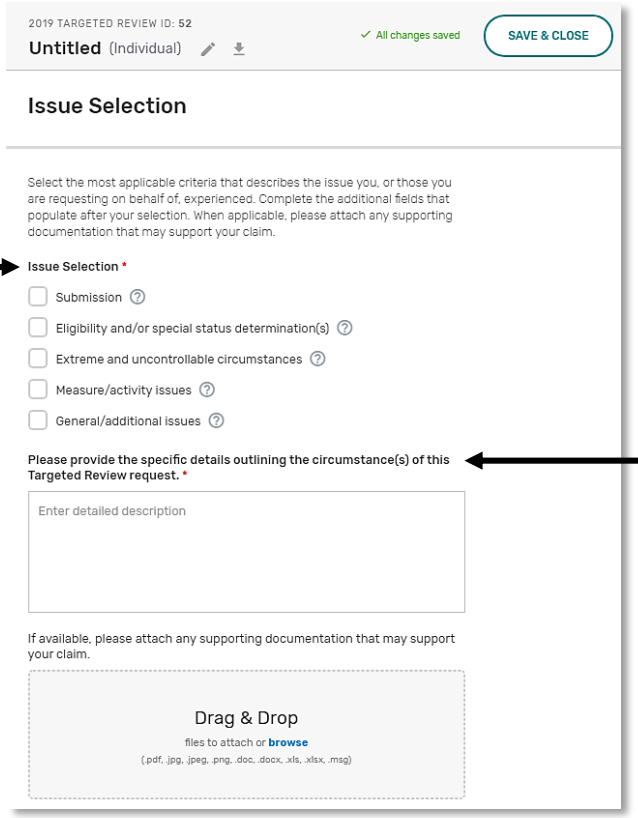
Step 7a: Select Issue Type

Select the most applicable **issue type(s)** that best describe the issue(s) you identified with your 2021 payment adjustment factor(s) and associated 2019 final performance feedback. Then, provide a **detailed explanation** of the issue(s) you identified.



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

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

Sign in to qpp.cms.gov → **Select Targeted Review** → **Add New 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 7a: Select Issue Type *(continued)*

While this is not an all-inclusive list, below are examples of each issue type.

Issue Type	Example
Submission	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.
Eligibility and/or special status determination(s)	You are a hospital-based MIPS eligible clinician who qualified for automatic reweighting of the Promoting Interoperability performance category to 0%. When looking at your 2019 MIPS performance feedback, you identified that the Promoting Interoperability performance category was not reweighted.
Extreme and uncontrollable circumstances	You are a solo practitioner who submitted data as an individual for 2 performance categories. However, you received a category score for all 4 performance categories when the 2 categories you did not submit data for should have been reweighted to 0% and unscored.
Measure/activity issues	You are 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 2019 MIPS performance feedback, you identified that your Quality performance category score denominator wasn't lowered.
General issues	You are a MIPS eligible clinician who qualified for facility-based measurement scoring. When looking at your 2019 MIPS performance feedback, you identified that you did not automatically receive Quality and Cost performance category scores based on your facility's Fiscal Year (FY) 2021 Hospital Value-based Purchasing (VBP) program score.

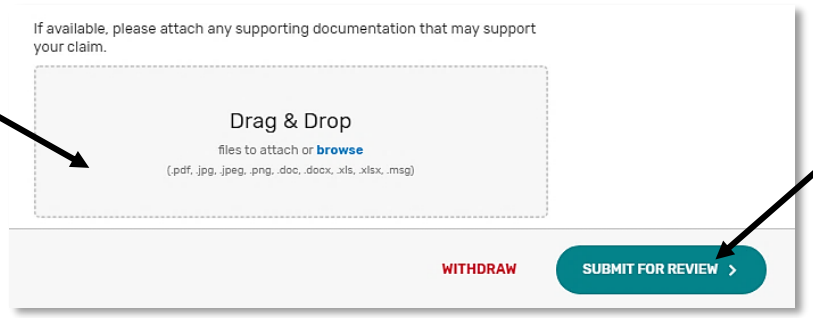
Step 7b: Attach Supporting Documentation

Attach your **supporting documentation** to your targeted review application, then select **submit for review. Supporting information may include, but is not limited to:**

- 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

You do not need to encrypt your supporting documentation that contains personally identifiable information (PII) or personal health information (PHI) as the targeted review application is within your secure QPP Account on qpp.cms.gov.

Attach **supporting documentation** using drag & drop or browse your computer.



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

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

1. Sign in to qpp.cms.gov
2. Select Targeted Review
3. Add New Targeted Review
4. Select Application Type and Enter Identifying Information
5. Enter Submission Information
6. Select Performance Categories
7. Select Issue Type and Attach Supporting Documentations
8. Certify and Submit for Review

How to Request a Targeted Review

Step 7b: Attach Supporting Documentation *(continued)*

We strongly recommend attaching your supporting documentation to your targeted review application as soon as possible.

If your supporting documentation is not 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 in the targeted review details to submit supporting documentation to the reviewer of your targeted review.

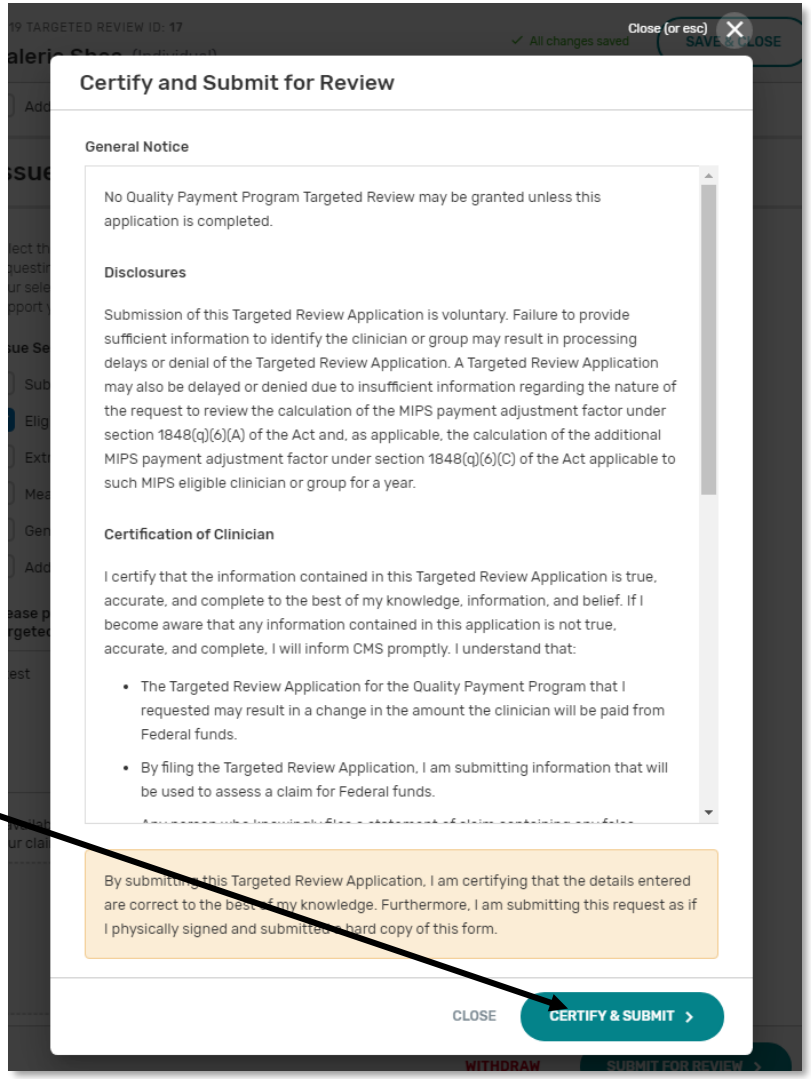
Note: If the reviewer of your targeted review requests supporting documentation, you will have 30 days to provide the requested documentation or the targeted review request will be denied.

How to Request a Targeted Review

Step 8: Certify and Submit for Review

Read the disclosure, once complete, select **certify & submit.**

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



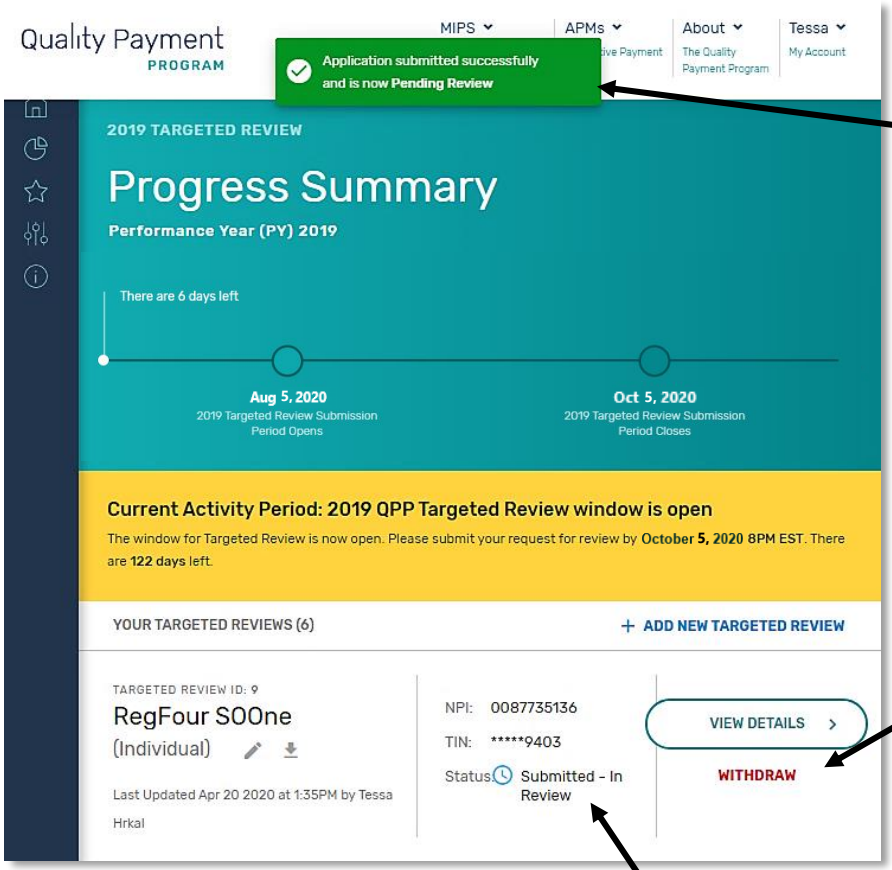
Sign in to qpp.cms.gov → Select Targeted Review → Add New Targeted Review → Select Application Type and Enter Identifying Information → Enter Submission Information → Select Performance Categories → Select Issue Type and Attach Supporting Documentations → Certify and Submit for Review

How to Request a Targeted Review

Return to Progress Summary Page and Receive Confirmation Notification

Once you've completed your request, you will be brought back to the targeted review progress summary page, where you will see a **pop-up message** confirming that you successfully submitted your review.

You will also receive a confirmation email notifying you that your application was successfully received.



Pop-up confirmation message

Withdraw your request before it is approved/ denied.

Note: Withdrawing your request is not reversable, you will need to submit a new request.

Request status can be Draft in Progress, Draft Complete, Submitted – In Review, Approved/Denied, or Withdrawn.

How to Monitor a Targeted Review

How to Monitor a Targeted Review

View Targeted Review Details

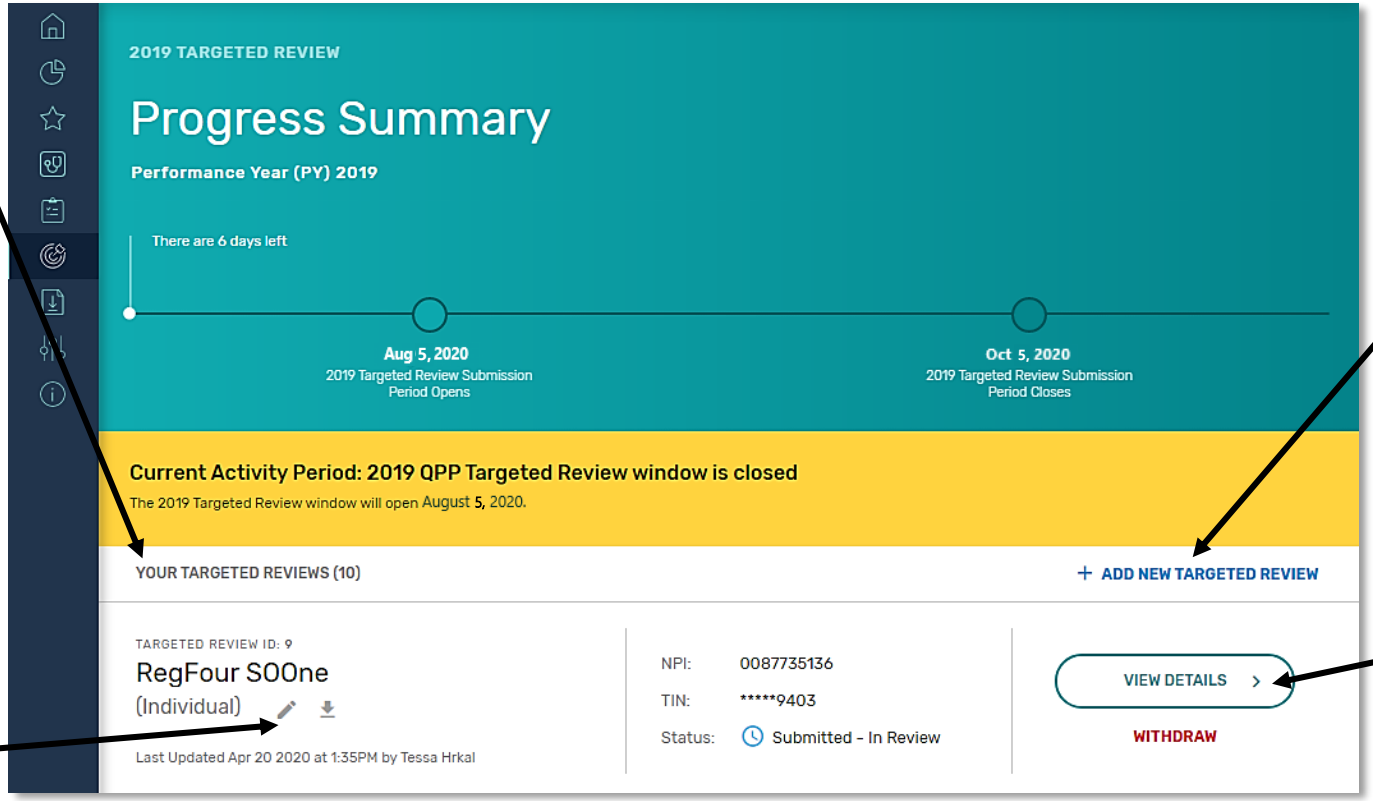
From the targeted review progress summary page, you can monitor all your targeted review requests for the 2019 performance year. Select **View Details** for additional information regarding a specific request.

Sign in to qpp.cms.gov on a regular basis to stay up to date on your requests status and any communications you receive from the reviewer.

List of your targeted review requests.

You can name your targeted review by clicking the pencil.

You can download a copy of your targeted review by clicking download pdf.



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

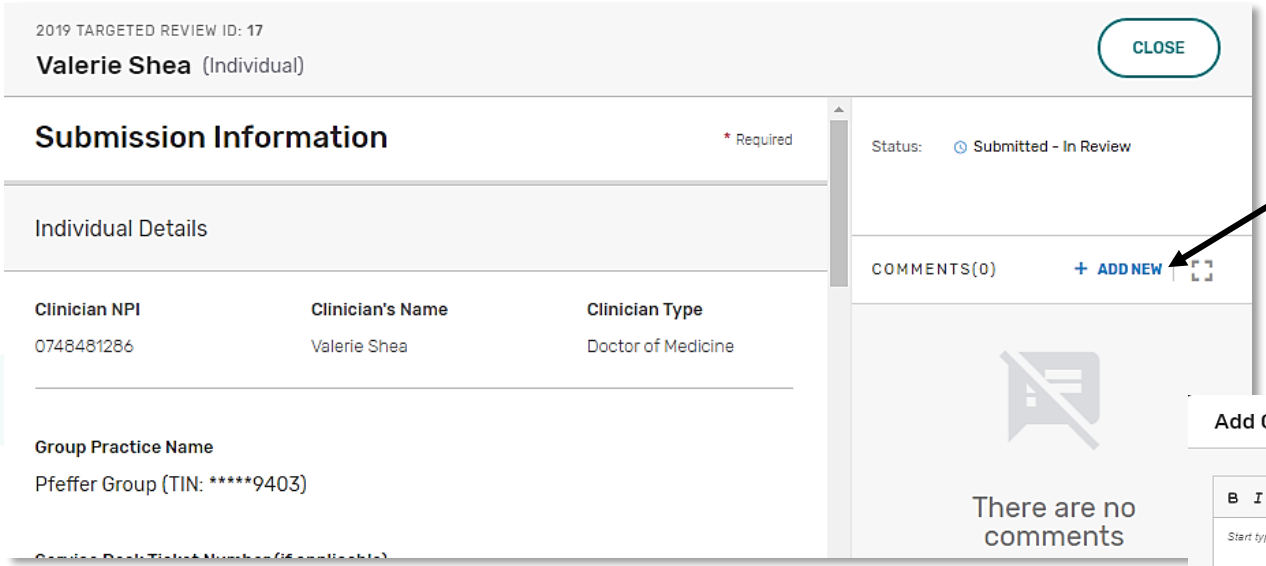
Select **View Details** to view request information and communicate with the reviewer who is evaluating your request.

How to Monitor a Targeted Review

Communicate with Reviewer

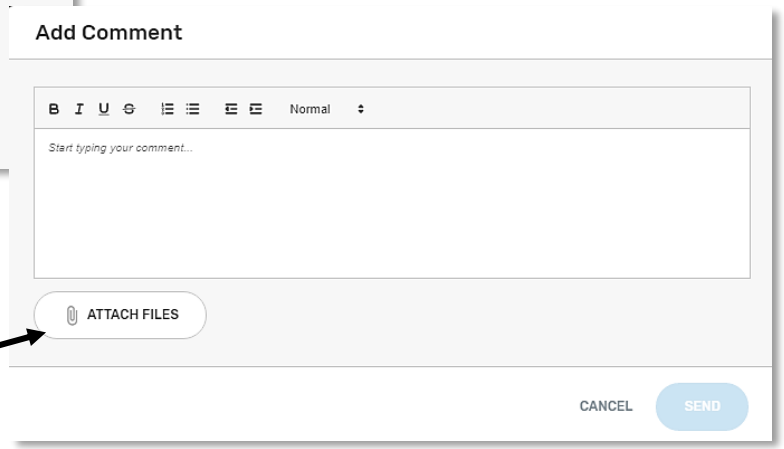
Once you submit your request, use the **Comments** function located within your targeted review request details to **communicate with the reviewer** if you have a **question** about your request or have **supporting documentation** to submit for your request.

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



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

***Helpful Hint**: Sign in to your QPP Account on a regular basis to ensure that you are staying current with your targeted review status and communications from your reviewer.*



Submit supporting documentation using **Attach Files.**

Frequently Asked Questions

Do I Need to Submit a Targeted Review Request For Each Clinician?

Generally, you will complete the targeted review request form at the level at which you, or those you are requesting a targeted review on behalf of, participated and reported data to the Quality Payment Program for the 2019 performance year. However, there are circumstances in which you will request your targeted review at a different level, such as if you are requesting a targeted review of an eligible clinician's MIPS eligibility at the level which they should have been scored or their eligibility to be scored under the APM Scoring Standard.

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, you must retain your documentation through December 31, 2025 for the 2019 performance year.

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 sign in to your QPP account on qpp.cms.gov to view the status of your targeted review and communications with your reviewer. If you have questions regarding your request, please communicate with your reviewer via the comments pane found within View Details for your request.

In addition to monitoring your targeted review on qpp.cms.gov, you will receive confirmation emails notifying you that we received your targeted review request as well as the outcome of your request.

Help, Resources, and Version History

Help, Resources, and Version History

Where Can You Go for Help?

Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8:00 a.m.-8:00 p.m. ET or by e-mail at: QPP@cms.hhs.gov.

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

Connect with your local technical assistance organization. We provide no-cost technical assistance to small, underserved, and rural practices to help you successfully participate in the Quality Payment Program.

Visit the Quality Payment Program website for other help and support information, to learn more about MIPS, and to check out resources available in the QPP 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.

- 2019 How MIPS Eligibility is Determined Webpage
- 2019 Eligibility Determination Periods and Snapshots Webpage
- 2019 MIPS Participation and Eligibility Fact Sheet
- 2019 MIPS Eligibility and Participation User Guide
- 2019 MIPS Quick Start Guide
- 2019 MIPS Scoring Guide
- 2019 Facility-based Measurement Fact Sheet
- 2019 MIPS Extreme and Uncontrollable Circumstances Policy Fact Sheet
- 2019 Exceptions FAQs

Version History

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

Date	Change Description
8/5/2020	Original posting