

Qualified Registry Self-Nomination Fact Sheet
2019 Finalized vs. 2020 Finalized

Burden Impact: There are no impact to burden as a result of any changes to this self-nomination fact sheet from the previous version.

Page	Final Rule 2019	Final Rule 2020	Reason for Change
1	Section Header: 2019 Qualified Registry Fact Sheet	Section Header: 2020 Qualified Registry Fact Sheet	Alignment with current year
1	Section Header - When is the self-nomination period? September 1 - November 1 of the year prior to the applicable performance period	Section Header - When is the self-nomination period? July 1 - September 3 of the year prior to the applicable performance period. The Self-Nomination Period will promptly open at 10:00 am ET on July 1st and close at 8:00 pm ET on September 3rd. Self-Nominations submitted after the deadline will not be considered.	Edited for alignment with finalized requirements

Page	Final Rule 2019	Final Rule 2020	Reason for Change
1	<p>Section Header - Tips for Successful Self-Nomination:</p> <ol style="list-style-type: none"> 1. To become qualified for a given performance period, the vendor must exist by January 1 of the performance period. For example, to be eligible in the 2019 performance period, the vendor must exist by January 1, 2019. 2. You must provide all required information at the time of self-nomination, via the web-based tool, JIRA: https://oncprojecttracking.healthit.gov/support/login.jsp, for CMS review and approval. 3. Self-nomination is an annual process. If you want to qualify as a Qualified Registry, you will need to self-nominate for that year. Qualification and participation in a prior program year does not automatically qualify a vendor for subsequent performance periods. Beginning with the 2019 performance period, a simplified self-nomination process has been implemented to reduce the burden of self-nomination for those existing Qualified Registries that have previously participated in MIPS and are in good standing (CMS did not take remedial action or terminate as a third party intermediary). The simplified process is available only for existing Qualified Registries in good standing. The list of vendors that have been qualified to submit data to CMS as a Qualified Registry for purposes of MIPS will be posted on the CMS Quality Payment Program website. 	<p>Section Header - Tips for Successful Self-Nomination:</p> <ol style="list-style-type: none"> 1. To become qualified for a given performance period, the vendor must have at least 25 participants by January 1 of the year prior to the applicable performance period. These participants do not need to use the Qualified Registry to report MIPS data to us; rather, they need to submit data to the Qualified Registry for purposes of quality improvement. 2. You must provide all required information at the time of self-nomination, and before the close of the self-nomination period via the CMS Quality Payment Program portal (https://qpp.cms.gov/login) for CMS consideration. 3. Self-nomination is an annual process. If you want to qualify as a Qualified Registry for a given performance period, you will need to self-nominate for that performance period. Qualification and participation in a prior program year does not automatically qualify a vendor for subsequent MIPS performance periods. A simplified self-nomination form is available to reduce the burden of self-nomination for those existing Qualified Registries that have previously participated in MIPS and are in good standing (CMS did not take remedial action against or terminate the registry as a third party intermediary). <p>The simplified form is available only for existing Qualified Registries in good standing.</p>	<p>Edited for alignment with finalized requirements, edited for clarity</p>

Page	Final Rule 2019	Final Rule 2020	Reason for Change
2-4	<p>Section Header - What are the requirements to become a Qualified Registry?</p> <p>1. Participants: You must have at least 25 participants by January 1, 2019. These participants are not required to use the Qualified Registry to report data to CMS, but they must be submitting data to the Qualified Registry for quality improvement. Please note that your system must be implemented and able to accept data should a clinician, group or virtual group wish to submit data on the approved MIPS Quality Measures by January 1, 2019.</p> <p>2. Certification Statement: During the data submission period, you must certify that data submissions are true, accurate, and complete to the best of your knowledge. If you become aware that any submitted information is not true, accurate, and complete, you will correct such information promptly; and understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.</p> <p>3. Data Submission: You must submit data via a CMS-specified secure method for data submission, such as a defined Quality Payment Program data format. Additional information regarding data submission methodologies can be found in the Developer Tools section of the Resource Section of the Quality Payment Program website: https://qpp.cms.gov/developers.</p> <p>4. Data Validation Plan: During self-nomination, you must provide information on your process for data validation for individual MIPS eligible clinicians, groups, and virtual groups within a Data Validation Plan. You must provide the following to fulfill the requirements of</p>	<p>Section Header - What are the requirements to become a Qualified Registry?</p> <p>1. Participants: You must have at least 25 participants by January 1 of the year prior to the applicable performance period (January 1, 2019). These participants are not required to use the Qualified Registry to report MIPS data to CMS, but they must submit data to the Qualified Registry for quality improvement. Please note that your system must be implemented and able to accept data from a clinician, group, or virtual group should they wish to submit data on MIPS Quality Measures starting on January 1, 2020.</p> <p>2. Certification Statement: During the data submission period, you must certify that data submissions are true, accurate, and complete to the best of your knowledge. This certification includes the acceptance of data exports directly from an EHR or other data sources. If you become aware that any submitted information is not true, accurate, and complete, you will correct such issues promptly prior to submission, and understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.</p> <p>3. Data Submission: You must submit data via a CMS-specified secure method for data submission, such as a defined Quality Payment Program data format. Additional information regarding data submission methodologies can be found in the</p>	<p>Edited for alignment with finalized requirements, edited for clarity</p>

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4	<p data-bbox="283 235 926 297">Section Header - What information is required to self-nominate?</p> <p data-bbox="283 342 852 406">You must provide the following when you self-nominate:</p> <ul style="list-style-type: none"> <li data-bbox="331 448 548 475">☐ Vendor Name <li data-bbox="331 487 936 586">☐ New or Existing Registry (Approved for a previous year of MIPS and/or Physician Quality Reporting System [PQRS]) <li data-bbox="331 594 789 621">☐ Supported MIPS Quality Measures <li data-bbox="331 630 867 657">☐ Supported MIPS Performance Categories <li data-bbox="331 665 789 693">☐ Improvement Activities Supported <li data-bbox="331 701 873 761">☐ Promoting Interoperability Measures and Objectives Supported <li data-bbox="331 769 621 797">☐ Performance Period <li data-bbox="331 805 533 833">☐ Vendor Type <li data-bbox="331 841 663 868">☐ Data Collection Method <li data-bbox="331 876 800 904">☐ Method for Verifying TINs and NPIs <li data-bbox="331 912 926 974">☐ Method for Calculating Performance Rates for Quality Measures (source of clinician's data) <li data-bbox="331 982 695 1010">☐ Randomized Audit Process <li data-bbox="331 1018 663 1045">☐ Data Validation Process <li data-bbox="331 1053 957 1153">☐ Ability to Provide Data Validation Plan Results by May 31st Following the Performance Period (Data Validation Execution Report) <li data-bbox="331 1161 600 1188">☐ Reporting Options <li data-bbox="331 1196 785 1224">☐ Cost and Services Included in Cost 	<p data-bbox="989 235 1570 297">Section Header - What information is required to self-nominate?</p> <p data-bbox="989 342 1541 406">You must provide the following when you self-nominate:</p> <ul style="list-style-type: none"> <li data-bbox="1037 448 1560 475">☐ What is your Qualified Registry's Name? <li data-bbox="1037 487 1566 621">☐ Are you a new or existing Qualified Registry (approved in a previous year of MIPS and/or Physician Quality Reporting System [PQRS])? <li data-bbox="1037 630 1566 797">☐ Are you supporting MIPS Clinical Quality Measures? Please note that the MIPS clinical quality measure must be used as specified. Measure specification changes are not permitted. <li data-bbox="1037 805 1577 974">☐ Are you supporting MIPS electronic Clinical Quality Measures (eCQMs)? Please note that the MIPS eCQM must be used as specified. Measure specification changes are not permitted. <li data-bbox="1037 982 1556 1153">☐ Which MIPS performance categories do you intend to support? Please note Qualified Registries are required to support the Quality performance category. <li data-bbox="1037 1161 1539 1224">☐ Which Improvement Activities are you supporting? <li data-bbox="1037 1232 1577 1330">☐ Are you supporting the Promoting Interoperability Objectives and Measures set? <li data-bbox="1037 1338 1556 1401">☐ Which data collection method(s) do you intend to support? <li data-bbox="1037 1409 1325 1437">☐ Data Validation Plan 	<p data-bbox="1619 235 1818 263">Edited for clarity</p>

Page	Final Rule 2019	Final Rule 2020	Reason for Change
5,6	<p data-bbox="283 235 961 300">Section Header - What data submission functions must a Qualified Registry perform?</p> <p data-bbox="283 341 856 406">A Qualified Registry must perform the following functions related to data submission:</p> <p data-bbox="283 414 441 438">1. Indicate:</p> <ul data-bbox="325 446 924 657" style="list-style-type: none"> ☐ CEHRT data source, if applicable. ☐ End-to-end electronic reporting, if applicable. ☐ Performance period start and end dates. ☐ Reporting on Promoting Interoperability measures and objectives or Improvement Activities, if applicable. <p data-bbox="283 665 430 690">2. Submit:</p> <ul data-bbox="325 698 955 1331" style="list-style-type: none"> ☐ Data and results for all your MIPS performance categories. <ul data-bbox="378 771 913 836" style="list-style-type: none"> ✓ Include all-payer data, not just Medicare Part B patients. ☐ Results for at least six Quality Measures, with at least one outcome measure. <ul data-bbox="378 909 945 974" style="list-style-type: none"> ✓ If an outcome measure is not available, use at least one other high-priority measure. ☐ Appropriate IDs for Quality Measures, Promoting Interoperability measures and objectives, and Improvement Activities. ☐ Measure-level data completeness rates by TIN/NPI and/or TIN. ☐ Measure-level performance rates by TIN/NPI and/or TIN. ☐ Risk-adjusted results for any risk-adjusted measures. ☐ Sampling methodology for data validation. <p data-bbox="283 1339 640 1364">3. Report on the number of:</p> <ul data-bbox="325 1372 892 1437" style="list-style-type: none"> ☐ Eligible instances (reporting denominator). ☐ Times a quality service is performed 	<p data-bbox="987 235 1575 300">Section Header - What data submission functions must a Qualified Registry perform?</p> <p data-bbox="987 341 1543 438">Following the self-nomination process, an approved Qualified Registry must perform the following data submission functions:</p> <p data-bbox="987 446 1144 470">1. Indicate:</p> <ul data-bbox="1029 479 1585 836" style="list-style-type: none"> ☐ Whether the Qualified Registry is using CEHRT data source ☐ End-to-end electronic reporting, if applicable. ☐ Performance period start and end dates. ☐ Report data on Promoting Interoperability objectives and measures or Improvement Activities, as applicable, to the standards and requirements of the respective performance categories. <p data-bbox="987 844 1134 868">2. Submit:</p> <ul data-bbox="1029 876 1585 1437" style="list-style-type: none"> ☐ The data and results for all supported MIPS performance categories. <ul data-bbox="1081 950 1585 1047" style="list-style-type: none"> ✓ The data must include all-payer data, and not just Medicare Part B patients, as applicable. ☐ Results for at least six MIPS Quality Measures (claims, MIPS CQMs, eCQMs), including one outcome measure, as applicable. <ul data-bbox="1081 1193 1585 1291" style="list-style-type: none"> ✓ If an outcome measure is not available, use at least one other high-priority measure. ☐ Appropriate measure and activity IDs for Quality Measures, Promoting Interoperability measures and objectives, and Improvement Activities. 	<p data-bbox="1617 235 1816 259">Edited for clarity</p>

Page	Final Rule 2019	Final Rule 2020	Reason for Change
6, 7	<p>Section Header - What are the thresholds for data inaccuracies? What are considered data inaccuracies?</p> <p>If any data inaccuracies affect more than 3% of your total MIPS eligible clinicians, you:</p> <ul style="list-style-type: none"> • Remedial action may be taken due to your low data quality rating. • Will have the Qualified Registry posting updated for the performance period to indicate remedial action has been taken. <p>Data inaccuracies affecting more than 5% of your total MIPS eligible clinicians may lead to termination of third party intermediaries for the following year(s).</p> <p>CMS will evaluate each Quality measure for data completeness and accuracy. The vendor will also attest that the data (Quality Measures, Improvement Activities, and Promoting Interoperability measures and objectives, if applicable) and results submitted are true, accurate and complete.</p> <p>CMS will determine error rates calculated on data submitted to CMS for MIPS eligible clinicians. CMS will evaluate data inaccuracies including, but not limited to, TIN/NPI mismatches, formatting issues, calculation errors, and data audit discrepancies affecting in excess of three percent of the total number of MIPS eligible clinicians, groups or virtual groups submitted. Examples of such errors include:</p> <ul style="list-style-type: none"> • TIN/NPI Issues – Incorrect Tax Identification Numbers (TINs), Incorrect National Provider 	<p>Section Header - What are the thresholds for data inaccuracies? What are considered data inaccuracies?</p> <p>Data inaccuracies that affect MIPS eligible clinicians, may result in:</p> <ul style="list-style-type: none"> • Remedial action may be taken against your Qualified Registry due to the low data quality rating. • Will have the Qualified Registry posting updated for the performance period of MIPS to indicate the Qualified Registry's data error rate on the CMS website until the data error rate falls below 3 percent and that remedial action has been taken against the Qualified Registry. <p>Data inaccuracies affecting more than 5% of your total MIPS eligible clinicians may lead to termination of the Qualified Registry for future program years.</p> <p>CMS will evaluate each quality measure for data completeness and accuracy. The vendor will also attest that the data (quality measures, improvement activities, and promoting interoperability objectives and measures) results submitted are true, accurate, and complete to the best of their knowledge.</p> <p>CMS will determine error rates calculated on data submitted to CMS for MIPS eligible clinicians.</p>	<p>Edited for clarity</p>

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7	<p>Section Header - What may cause remedial action to be taken or termination of third party intermediaries from the program?</p> <p>CMS may take remedial action for failing to meet certain standards and/or participation requirements. These requirements include, but are not limited to the following:</p> <ul style="list-style-type: none"> • Qualified Registry support call absences, • Delinquent deliverables like the Data Validation Execution Report, Qualified Posting review and approval, • Submission of false, inaccurate or incomplete data. <p>If remedial action is taken, CMS will require that the Qualified Registry take remedial action by submitting a corrective action plan to address any deficiencies or issues and prevent them from recurring. The corrective action plan must be received by CMS within 14 calendar days from the date of the CMS remedial action notification for CMS review and approval. Failure to comply with the remedial action process may lead to termination of third party intermediaries for the current and/or subsequent performance year.</p> <p>The Qualified Registry Qualified Posting will be updated to reflect when remedial action has been taken and/or termination of third party intermediaries participating as a Qualified Registry.</p>	<p>Section Header - What may cause remedial action to be taken or termination of third party intermediaries from the program?</p> <p>CMS may take remedial action for failing to meet applicable criteria for approval or submit data that is inaccurate, unusable, or otherwise compromised. Failure to comply with the remedial action process may lead to termination of third party intermediaries for the current and/or subsequent performance year.</p> <p>The Qualified Registry Qualified Posting will be updated to reflect when remedial action has been taken and/or termination of third party intermediaries participating as a Qualified Registry.</p>	<p>Edited for clarity</p>

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7	<p data-bbox="283 235 947 300">Section Header - What is the overall process to become a Qualified Registry?</p> <p data-bbox="283 341 766 373">The overall process includes these steps:</p> <ul data-bbox="378 381 955 1331" style="list-style-type: none"> <li data-bbox="378 381 955 511">• The vendor completes and submits the self-nomination form, supported MIPS Quality Measures, and Data Validation Plan through JIRA for CMS review and approval. <li data-bbox="378 519 955 868">• If the self-nomination form, MIPS Quality Measures, and Data Validation Plan are approved, a Qualified Posting is developed for the Qualified Registry that includes contact information, approved MIPS Quality Measures, performance categories supported, services offered, and costs incurred by clients. All approved Registries are included in the Qualified Posting that is posted on the CMS Quality Payment Program website. <li data-bbox="378 876 955 1331">• Approved Qualified Registries are required to support the services and MIPS Quality Measures listed on their Qualified Posting as a condition of participation in MIPS. CMS expects each approved Qualified Registry to support the services and MIPS Quality Measures listed on their Qualified Posting through the entirety of the performance and submission periods for which the Qualified Registry is approved, as well as meet all participation and program requirements. Failure to do so will terminate third party intermediaries from future participation in MIPS. 	<p data-bbox="989 235 1547 300">Section Header - What is the overall process to become a Qualified Registry?</p> <p data-bbox="989 341 1472 373">The overall process includes these steps:</p> <ul data-bbox="1083 381 1585 1437" style="list-style-type: none"> <li data-bbox="1083 381 1585 584">• The Qualified Registry completes and submits the self-nomination form, supported MIPS Quality Measures, and Data Validation Plan through the Quality Payment Program portal for CMS consideration. <li data-bbox="1083 592 1585 1299">• If the self-nomination form, MIPS Quality Measures, and Data Validation Plan are approved, a Qualified Posting is developed for the Qualified Registry that includes organization type, specialty, previous participation in MIPS (if applicable), program status (remedial action taken against the Qualified Registry or terminated as a third party intermediary (if applicable)), contact information, last date to accept new clients, virtual groups specialty parameters (if applicable), approved MIPS Quality Measures, performance categories supported, services offered, and costs incurred by clients. All approved Qualified Registries are included in the Qualified Posting that is posted on the CMS Quality Payment Program Resource Library. <li data-bbox="1083 1307 1585 1437">• Approved Qualified Registries are required to support the performance categories and, measures and activities listed on their Qualified Posting and meet 	<p data-bbox="1619 235 1879 373">Edited for alignment with finalized requirements, Edited for clarity</p>

Page	Final Rule 2019	Final Rule 2020	Reason for Change
8	<p data-bbox="283 235 619 259">Section Header – Resources</p> <ul style="list-style-type: none"> <li data-bbox="378 300 955 974">• Qualified Registry Support Calls - CMS will hold mandatory support calls for Qualified Registries that are approved to participate in the performance period they have self-nominated to be considered for. These support calls will be held approximately once a month, with the kick-off meeting being the first of the monthly calls. The support calls address reporting requirements, steps for successful submission, and a question and answer session. Attendance to all support calls is mandatory, and is a requirement of participation as an approved Qualified Registry. Each vendor must attend both the webinar and audio portion via computer or phone to receive credit for attending the support call. One representative, from a vendor supporting multiple Registries, will NOT be counted as attendance for multiple Registries. <li data-bbox="378 982 955 1258">• Quality Payment Program ListServ - The Quality Payment Program ListServ will provide news and updates on new resources, website updates, upcoming milestones, deadlines, CMS trainings, and webinars. To subscribe, visit the Quality Payment Program website and select “Subscribe to Updates” at the bottom of the page or in the footer. <li data-bbox="378 1266 955 1404">• Quality Payment Program Website - Educational documents for Qualified Registry participation will be available on the website to help support you in your submission process. <li data-bbox="378 1412 955 1437">• Quality Payment Program - If you have 	<p data-bbox="991 235 1327 259">Section Header – Resources</p> <ul style="list-style-type: none"> <li data-bbox="1039 300 1585 1079">• Qualified Registry Support Calls - CMS will hold mandatory support calls for Qualified Registries that are approved to participate in the 2020 performance period. These support calls will be held approximately once a month, with the kick-off meeting (in-person or virtually) being the first of the monthly calls. The support calls address reporting requirements, steps for successful submission, and allow for a question and answer session. The monthly support calls are limited to only approved 2020 performance period Qualified Registries. Each Qualified Registry must attend both the webinar and audio portion via computer or phone to receive credit for attending the support call. One representative, from a vendor supporting multiple Qualified Registries, will NOT be counted as attendance for multiple Qualified Registries. <li data-bbox="1039 1088 1585 1404">• Quality Payment Program ListServ - The Quality Payment Program ListServ will provide news and updates on new resources, website updates, upcoming milestones, deadlines, CMS trainings, and webinars. To subscribe, visit the Quality Payment Program website and select “Subscribe to Updates” at the bottom of the page or in the footer. <li data-bbox="1039 1412 1585 1437">• Quality Payment Program Website - 	<p data-bbox="1621 235 1816 259">Edited for clarity</p>

