Partial Qualifying APM Participant (QP) Election Form

CY 2022 Final versus CY 2023 Final

**Burden impact:** The changes to this form reflect policies in the CY 2023 Physician Fee Schedule (PFS) Final Rule for the Quality Payment Program. There are no impacts to burden as a result of these changes.

\*\*\*\*\*

**Change #1:**

**Location:** Page 1, Line 1

**Reason for Change:**

Updated performance year.

**CY 2022 Final Rule text**:

2020

**CY 2023 Final Rule text:**

2022

\*\*\*\*\*

**Change #2:**

**Location:** Page 1, Line 2

**Reason for Change:**

Updated payment adjustment year.

**CY 2022 Final Rule text**:

2022

**CY 2023 Final Rule text:**

2024

\*\*\*\*\*

**Change #3:**

**Location:** Page 1, Line 7

**Reason for Change:**

Updated calendar year for submission of form.

**CY 2022 Final Rule text**:

March 31, 2021

**CY 2023 Final Rule text:**

March 31, 2023

\*\*\*\*\*

**Change #4:**

**Location:** Page 1, Line 14

**Reason for Change:**

Updated performance year and payment adjustment year.

**CY 2022 Final Rule text**:

performance year 2020 (payment adjustment year 2022)

**CY 2023 Final Rule text:**

performance year 2022 (payment adjustment year 2024)

\*\*\*\*\*

**Change #5:**

**Location:** Page 1, End of document

**Reason for Change:**

Updated calendar year for submission of form.

**CY 2022 Final Rule text**:

Please email the selected and signed form to QualityPaymentProgramAPMHelpdesk@cms.hhs.gov by March 31, 2021.

**CY 2023 Final Rule text:**

Please email the selected and signed form to QualityPaymentProgramAPMHelpdesk@cms.hhs.gov by March 31, 2023.