Qualified Entity Certification Program

Paper-Based Reapplication Form

Version 1.0

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1.　　Paper-Based Reapplication

Complete the gray form fields in each table. Submit the complete application to QECP Support. You may also contact QECP Support with any questions.

Note: The time to complete this information collection is an estimated average of 120 hours per response, including the time to review instructions, search existing data sources, gather the data, and complete and review the information collection.

Table 1: Organization Information

Category	Details
Organization Name	Organization Name

Table 2: Application Submission

Category	Details
Date Reapplication Submitted	MM/DD/YYYY

Table 3: Application Receipt

Category	Details
Date Reapplication Received by CMS	MM/DD/YYYY

2.　　Reapplication Requirements

This section covers reapplication requirements. Under each of the following Element headings, there are application requirements and statement(s). Respond to each statement in the corresponding table. Refer to Appendix B for reapplication requirement details.

Element 1.1

Identify changes to the QE's organization.

Statement 1: Your organization intends to continue to contract with the same organization(s) to fulfill the QECP requirements.

Table 4: Statement 1 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or Not Applicable (NA)
Explanation of Self-Assessment	Insert Text

Element 1.4

Identify changes to the QE's ability to obtain other-payer claims data.

Statement 2: Your organization still receives the same sources and amounts of other-payer claims data for the approved geographic areas.

Table 5: Statement 2 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Element 2.1

Identify changes to the QE's data security.

Statement 3: The data flow diagram submitted by your organization still accurately demonstrates 1) how sites that access the QE Medicare data are connected, and 2) how QE Medicare data flow through your organization from receipt to public reporting (including the confidential provider corrections and appeals process).

Table 6: Statement 3 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Statement 4: Since Phase 2 approval, or submission of your organization's most recent QECP annual report, your organization has made significant changes to the data security environment and practices.

Table 7: Statement 4 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Elements 2.3 & 2.4

Identify changes to the corrections and appeals process.

Statement 5: Your organization would like to change their level of reporting (provider-identified vs. regional) prior to the next reporting cycle for either public or non-public reports.

Table 8: Statement 5 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Statement 6: Your organization would like to make changes to their corrections and appeals process prior to the next reporting cycle. This includes any changes to your organization's privacy and security protections for the release of beneficiary identifiers and/or claims data to providers.

Table 9: Statement 6 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Element 3.1

Identify changes to standard measures.

Statement 7: Your organization intends to continue reporting the same standard measures in its next public reporting cycle.

Table 10: Statement 7 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Element 3.2

Identify changes to alternative measures.

Statement 8: Your organization intends to continue reporting the same alternative measures in its next public reporting cycle.

Table 11: Statement 8 Responses

Category	Details
PM Pre-Fill	Insert Text

Category	Details
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Element 3.3

Identify changes to the design of reports for providers and the public.

Statement 9: Your organization would like to change the content or appearance of its providers or public report during its next reporting cycle. A change is a significant modification in the provider ratings approach, level of analysis for reported measures, comparative reporting by product line, or website address, for example, but excludes changes due to the addition or removal of performance measures.

Table 12: Statement 9 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Statement 10: Your organization would like to change its dissemination plan for informing intended audiences of the issuance of its QE performance reports. This includes anticipated changes to the public report release schedule and frequency.

Table 13: Statement 10 Responses

Category	Details
PM Pre-Fill	Insert Text
Self-Assessment	Change, No Change, or NA
Explanation of Self-Assessment	Insert Text

Appendix A: Additional Attachments

If you have additional attachments for to the Paper-Based Reapplication Form, attach them to the submission email to QECP Support.

Appendix B: Minimum Requirements Review

The following tables detail reapplication requirements.

Table 14 details Element 1.1: Identify changes to QE's organization.

Table 14: Element 1.1 Requirements

Program Requirement	Details
Assessment	Statement 1: Your organization intends to continue to contract with the same organization(s) to fulfill the QECP requirements. Note: Public and non-public reports that include QE Medicare data must not be disseminated using a new data analytics/warehousing vendor prior to the new vendor (and lead QE) submitting updated QECP Phase 2 evidence and obtaining CMS approval (refer to Program Guide Section 5.2).
Evidence Required	If the organization plans to work with new/additional contractors, vendors, partners, subsidiaries or member organizations, it must complete the QECP Letter of Commitment including Appendix B: Contractual Relationship Attestation.
Example Documentation	• Letter of Commitment • Articles of Incorporation

Table 15 details Element 1.4: Identify changes to QE's ability to obtain claims data from at least one other source to combine with QE Medicare data.

Table 15: Element 1.4 Requirements

Program Requirement	Details
Assessment	Statement 2: Your organization still receives the same sources and amounts of other-payer claims data for the approved geographic areas in the pre-filled text box below. Note: A QE may not, under any circumstances, use a measure, create a report, or issue a report after the amount of claims data from other sources available to the QE decreases until the QECP Team determines either 1) that the remaining claims data are sufficient, or 2) that the QE has collected adequate additional data to address any identified deficiencies (refer to Program Guide Section 5.2).

Program Requirement	Details
Evidence Required	- If the geographic area has changed, the organization must submit a new QECP Data Source Attestation. - If the amount of other-payer claims data received by the organization has increased, it must submit a new QECP Data Source Attestation. - If the amount of other-payer claims data received by the organization has decreased, it must submit a new QECP Data Source Attestation. - In addition, it must provide an explanation, by data supplier name, of the reason why the data source is no longer available to the organization, or the reason why the amount of data received by the supplier has decreased. - It must submit documentation that demonstrates that the remaining claims data from other sources are sufficient to address methodological concerns regarding sample size and reliability.
Example Documentation	NA

Table 16 details Element 2.1: Identify changes to QE's data security and privacy policies and procedures.

Table 16: Element 2.1 Requirements

Program Requirement	Details
Assessment	Statement 3: The data flow diagram submitted by your organization still accurately demonstrates 1) how sites that access the QE Medicare data are connected and 2) how QE Medicare data flow through your organization from receipt to public reporting (including the confidential provider corrections and appeals process).
	Statement 4: Since Phase 2 approval, or submission of your organization's most recent QECP Annual Report, your organization has made significant changes to the data security environment and practices.
	A significant change is an action that is likely to affect the security state of an information system or its environment of operation; some examples include, but are not limited to:
	• Modifications to cryptographic modules or services
	• Modifications to security controls
	• Moving to a new facility
	• Change in vendors, business partners, or service providers
	• Changes in data hosting providers
	• Changes in staff with primary responsibility for data security
	• Data breaches and other violations of the CMS DUA
	• Acquiring specific and credible threat information that the organization is being targeted by a threat source
	• Establishing new/modified laws, directives, policies, or regulations
	• If there is any uncertainty about whether a change in a data security program is significant and should therefore be reported, consult with the QECP Team to determine the appropriate next steps.
Evidence Required	• If the organization has experienced a change to its security environment through which QE Medicare data flows, it must submit an updated, annotated QE data flow diagram.
	• If the organization experienced a change to its data security environment or practices, it must provide an explanation of the changes, including the date when each change occurred.
Example Documentation	• Data Flow Diagram
	• Policies and Procedures

Table 17 details Element 2.3 and Element 2.4: Identify changes to corrections and appeals process, identify any changes related to secure transmission of beneficiary data.

Table 17: Elements 2.3 & 2.4 Requirements

Program Requirement	Details
Assessment	Statement 5: Your organization would like to change their level of reporting (provider-identified vs regional) prior to the next reporting cycle for either public or non-public reports. Statement 6: Your organization would like to make a change to their corrections and appeals process prior to the next reporting cycle; this includes any changes to your organization's privacy and security protections for the release of beneficiary identifiers and/or claims data to providers.
Evidence Required	• If the organization would like to report publicly or non-publicly at the provider level and had previously reported at a regional level, it must provide a corrections and appeals process including the process that would allow an entity to securely transmit beneficiary claims to providers. • If the organization would like to report publicly or non-publicly at the regional level and had previously reported at a provider level, it must provide an explanation of the masking methodology that would prevent providers from being re-identified. • If the organization is planning to make changes to the confidential provider corrections and appeals process, it must provide an explanation describing the changes; these changes must be reflected in the QE data flow diagram provided under Statement 3; changes related to contractual relationships with data analytics/warehousing vendors are subject to the requirements of Statements 1 and 3.
Example Documentation	NA

Table 18 details Element 3.1: Identify changes to standard measures QE intends to report in next public reporting cycle.

Table 18: Element 3.1 Requirements

Program Requirement	Details
Assessment	Statement 7: Your organization intends to continue reporting the same standard measures in its next public reporting cycle. Note: QEs must notify the QECP Team of any new standard measures they wish to add to their approved list of measures at least 30 days before the intended confidential performance release to providers for the corrections and appeal process (refer to Program Guide Section 5.2).

Program Requirement	Details
Evidence Required	• If the organization would like to change the standard measures that have previously been publicly reported, it must provide an explanation of the standard measures that will be added or removed in the next public reporting cycle. • For measures that will be added, the organization must submit a revised QECP Measure Information Workbook, accompanied by the required supporting documentation for Element 3.1.
Example Documentation	NA

Table 19 details Element 3.2: Identify changes to alternative measures QE intends to report in next public reporting cycle.

Table 19: Element 3.2 Requirements

Program Requirement	Details
Assessment	Statement 8: Your organization intends to continue reporting the same alternative measures in its next public reporting cycle. Note: QEs are required to notify the QECP Team of any alternative measures they wish to add to their approved list of measures; QEs must notify the QECP Team of any new alternative measures at least 60 days before the intended confidential performance report release to providers) and are strongly encouraged to notify the team up to 90 days beforehand (refer to Program Guide Section 5.2).
Evidence Required	If the organization would like to change the alternative measures that have previously been publicly reported, it must provide an explanation of the alternative measures that will be added or removed in the next public reporting cycle; for measures that will be added, it must submit a revised QECP Measure Information Workbook, accompanied by the required supporting documentation for Element 3.2.
Example Documentation	NA

Table 20 details Element 3.3: Identify changes in design of reports for providers and the public.

Table 20: Element 3.3 Requirements

Program Requirement	Details
Assessment	Statement 9: Your organization would like to change the content or appearance of its provider or public report during its next reporting cycle (a change is a significant modification in the provider ratings approach, level of analysis for reported measures, comparative reporting by product line, or website address, for example, but excludes changes due to the addition or removal of performance measures).

Program Requirement	Details
Assessment (continued)	Note: QEs must notify the QECP Team of changes to the provider and/or public prototype report and submit to the QECP Team the new prototype report(s) at least 30 days before the intended confidential release to providers (refer to Program Guide Section 5.2). Statement 10: Your organization would like to change its dissemination plan for informing intended audiences of the issuance of its QE performance reports. This includes anticipated changes to the public report release schedule and frequency. Note: QEs must notify the QECP Team of changes in the dissemination plan for sharing reports with the public and submit the new plan at least 30 days before the intended confidential performance report release to providers (refer to Program Guide Section 5.2).
Evidence Required	• If the organization would like to make changes to the content or appearance of provider and/or public reports, it must provide an explanation of the changes, and submit the revised provider and/or public report prototype. • If the organization would like to make changes to the dissemination plan, it must provide an explanation of the changes.
Example Documentation	NA