## I. <u>Introduction</u>

In **September 2015**, the Centers for Medicare and Medicaid Services (CMS) made the 2014 Annual Quality and Resource Use Reports (QRURs) available to every group practice and solo practitioner nationwide, including those consisting of non-physician eligible professionals. The 2014 Annual QRURs are also available for groups and solo practitioners that participated in the Medicare Shared Savings Program, the Pioneer ACO Model, or the Comprehensive Primary Care initiative in 2014. The 2014 Annual QRURs show how groups and solo practitioners, as identified by their Taxpayer Identification Number (TIN), performed in 2014 on the quality and cost measures used to calculate the 2016 Value Modifier (VM). For TINs with 10 or more eligible professionals (EPs) who are subject to the 2016 VM, the QRUR shows how the VM will apply to physician payments under the Medicare Physician Fee Schedule (PFS) for physicians who bill under the TIN in 2016. For all other TINs, the QRUR is for informational purposes only and will not affect the TINs' payments under the Medicare PFS in 2016. More information about the 2014 Annual QRURs, including how to request an informal review of the 2016 VM, is available at <a href="http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html">http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html</a>. Information about the VM is available at <a href="https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/ValueBasedPaymentModifier.html">https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/ValueBasedPaymentModifier.html</a>.

This guide illustrates how to access and download a 2014 Annual QRUR and the supplementary exhibits from the CMS Enterprise Portal. The QRUR and supplementary exhibits can be downloaded as a Portable Document Format (PDF) document or in Excel format. The data in the 2014 Annual QRUR is also available for download to an exportable Comma-Separated Values (CSV) file.

## II. <u>Getting Started</u>

Authorized representatives of groups and solo practitioners can access the 2014 Annual QRURs at <u>https://portal.cms.gov</u> using an Enterprise Identity Management (EIDM) account with one of the following roles:

- For a group with 2 or more EPs (TIN with 2 or more National Provider Identifiers (NPIs) that bill under the TIN):
  - Security Official
  - o Group Representative
- > For a solo practitioner (TIN with only 1 NPI that bills under the TIN):
  - o Individual Practitioner
  - o Individual Practitioner Representative

Instructions for obtaining an EIDM account to access a QRUR are available at <u>http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Obtain-2013-QRUR.html</u>.

For questions about setting up an EIDM account, please contact the QualityNet Help Desk:

- Monday Friday: 8:00 am 8:00 pm EST
- Phone: (866) 288-8912 (TTY (877) 715-6222)
- Fax: (888) 329-7377
- Email: <u>qnetsupport@hcqis.org</u>

To find out whether there is already someone who can access your TIN's QRUR, please contact the QualityNet Help Desk and provide your TIN and the name of your group (or your name, if you are a solo practitioner).

For questions about information contained in your TIN's 2014 Annual QRUR, or to provide feedback to CMS, please contact the Physician Value Help Desk:

- Monday Friday: 8:00 am 8:00 pm EST
- (888) 734-6433 (press option 3); (TTY (888) 734-6563)
- Email: <u>pvhelpdesk@cms.hhs.gov</u>

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If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

## IV. Access the 2014 Annual QRUR

There are two ways to access the Annual QRUR; the user may choose one of the following:

- Physician Value (PV) Landing Portlet (see pages 3-10)
- Directly from the CMS Enterprise Portal (see pages 11-13)

#### A. How to Access QRURs via the PV Landing Portlet

In addition to accessing the Annual QRUR, the PV Landing Portlet will also allow users to view the information related to PV, and access other PV applications.



Steps	Screenshots	
<ol> <li>Select <i>Feedback Reports</i> on the <b>PV Landing Page</b>.</li> </ol>	CMS Portal > PV LANDING PAGE         Physician         Value         Secure Links:         Registration         Feedback Reports         VM Informal Review         Note:         Secure Links require an EIDM account. You may register at the EIDM home page.	
<ol> <li>Read the Terms and Conditions and Select I Accept to continue.</li> <li>Note: If you select Decline, then you will be returned to the CMS Enterprise Portal Landing screen.</li> </ol>	Terms and Conditions         OMB No.0938-1236   Expiration Date: 04/30/2017   Paperwork Reduction Act         You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.         Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.         By using this information system, you understand and consent to the following:         You have no reasonable expectation of privacy regarding any communication or data transiling or stored on this information system.         At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.         Any communication or data transiting or stored on this information system.         To continue, you must accept the terms and conditions. If you decline, your login will automatically be cancelled.	

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.



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Steps	Screenshots	
5. Read the <b>Terms and</b>		
Conditions and select I	Terms and Conditions	
Accept to continue.		
	OMB No.0938-1236   Expiration Date: 04/30/2017   Paperwork Reduction Act	
Note: Selecting Decline will		
end the session and return you	You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government, authorized	
to the CMS Enterprise Portal	use only.	
Landing screen.		
	Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.	
	By using this information system, you understand and consent to the following:	
	You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system.	
	At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored or	
	this information system.	
	Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose.	
	To continue, you must accept the terms and conditions. If you decline, your login will automatically be cancelled.	
	I Accept Decline	



If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screenshots
<ul> <li>7. Enter the Security Code (VIP Token) and then select Log In.</li> <li>Note: You will have thirty (30) minutes to retrieve and enter the Security Code. If you are unable to enter the code within thirty (30) minutes, then the code will expire and you will need to request a new Security Code.</li> </ul>	Home       About CMS       Newsroom       Archive       Mep & FAQs       Email       Print         Constrained       Enterprise Portal       Print       Print       Print       Print         Meme       About CMS       Newsroom       Archive       Print       Print       Print         Centers for Medicare & Medicaid Services       Provider Resources       Provider Resources       Provider Resources         Welcome to CMS Enterprise Portal       Enter Security Code       A security code is required to access this page. When you originally requested access to this application the system required you to set up a Phone, Computer, or E-mail in order to retrieve a security code for Multifactor Authentication (MFA). If you did not complete the Multifactor Authentication(MFA) registration process, please select 'My Access' from the 'CMS Portal Home' page. Then, follow the necessary steps to complete the rele request process. If you have completed the MFA set up process but are now having issues retrieving a security code please contact your application's help desk.
The <b>Multi-Factor</b> <b>Authentication</b> process is now complete. You will be redirected to your initial selection, the Feedback Reports selection screen.	To retrieve a security code, please select the same credential type that you originally selected when first requesting access to the application from the drop down box(SMS,IVR or OTP). When entering the security code please enter it promptly as the code will expire for security purposes. If you selected the E-mail One Time Password (OTP) option when you requested access to your application, please select that same credential type below to receive a security code via E-mail. The security code will be e-mailed to the e-mail address on your profile within 5 minutes. When entering the security code, please enter it promptly, as the security code will expire after 30 minutes or after it is used successfully the first time. Credential Type E-mail - One Time Password (OTP) I Send Success Security Code (VIP 259760 Token) Log In Cancel
<ul> <li>8. Select a year (2014) from the Select a Year drop-down menu, and then select report (2014 Annual Quality and Resource Use Report (QRUR) or any one of the supplementary exhibits) from the Select a Report drop-down menu.</li> <li>Note: If you do not see the 2014 Annual QRUR in the drop-down menu: <ul> <li>Verify that you selected 2014 from the Select a Year drop-down menu.</li> <li>Call the QualityNet Help Desk to ensure that you logged in with an EIDM account with a</li> </ul> </li> </ul>	Welcome to Physician Value Physician Quality Reporting Portal         (*) Red asterisk indicates a required field.         *Select a Year?       2014         *Select a Report       2014 annual Quality and Resource Use Report (QRUR)         Download educational materials related to the Annual QRURs

St	eps	Screenshots
Yo	u are now in the	
Mi	croStrategy Web Platform.	TIN (Required)
Th	e screen shows the TIN(s)	Select a TIN This promot allows only one selection.
ass	ociated with your EIDM	Search for:
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		QFWWJS P JLFRN RQ, QQH:7151
•	Select a <b>TIN</b> and either	
	double-click the mouse or	Windowskie Kologe Kol
	click on the <i>Arrow</i> button to	
	move the <b>TIN</b> from	
	Available to Selected.	
•	You can also filter the list of	
	Available TINs by entering	Report Message Name:
	the name or last 4 digits of a	Supplementary Exhibits 5 - 10
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12.	Select Run Document.	
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If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

## **B.** Access QRURs Directly from the CMS Secure Portal

This process will allow users to directly access the reports upon logging into the portal.

Steps	<u>Screenshots</u>	
1. Go to <u>https://portal.cms.gov</u> and select <i>Login to CMS</i> <i>Secure Portal</i> .	Enterprise Portol       Home   About CMS   Newscoon   Auchine   @ Help & FAOs   QEm         Centers for Medicare & Medicaid Services       Learn about your healthcare options	ail   🚑 Prir arch CMS.gov
Note: The CMS Enterprise Portal supports the following internet browsers: Internet Explorer 8 Internet Explorer 9 Internet Explorer 10 Mozilla-Firefox Chrome Safari Enable JavaScript and adjust any browser zoom features to ensure you are not seeing the screen in too wide of a view.	New decrete CMS Portal         CMS Portal > Welcome to CMS Portal         CMS Portal > Welcome to CMS Portal         CMS Portal > Welcome to CMS Portal         The CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       CMS Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       Customer of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage, Prescription Drug, and other CMS programs.       Enterprise Portal is a gateway being offered to allow the public to access a number of systems related to Medicare Advantage.       Customer of systems related to Medicare Advantage.       Customer of systems related to Medicare Advantage.       Customer of systems related to Medicare Advantage.	account 'ortal
<ol> <li>Read the Terms and Conditions and Select I Accept to continue.</li> </ol>	Terms and Conditions       OMB No.0938-1236   Expiration Date: 04/30/2017   Paperwork Reduction Act	
Note: If you select Decline, then you will be returned to the CMS Enterprise Portal Landing Screen.	OWB NOUSSE-1236 [Expiration Date: 04/30/2017 [Papework Reduction Act         You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authori use only.         Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties.         By using this information system, you understand and consent to the following:         You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this information system.         At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system.         Any communication or data transiting or stored on this information system.         Any communication or data transiting or stored on this information system.         To continue, you must accept the terms and conditions. If you decline, your login will automatically be cancelled.	rk, zed d on
	I Accept Decline	_



<u>Steps</u>		Screenshots
5.	Enter the <i>EIDM User ID</i> and the <i>EIDM Password</i> on the <b>Multi-Factor</b> <b>Authentication Login</b> screen and select <i>Next</i> .	Home About CMS Newsroom Archive Itele
6.	Repeat Steps 5-12 of Section IV.A (How to Access QRURs via the PV Landing Portlet) of this guide to complete the MFA process.	

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

## V. <u>Navigating the Annual QRUR</u>

#### A. Overview

Steps	Screenshots
StepsThe 2014 Annual QRUR contains the following sections:• About this Report• Performance Highlights• About the Data in This Report*• Elig Profs and Attributed Pts• Quality Performance*• Admitting Hospitals• Cost Performance• Per Capita Costs of Services*	Screenshots          Screenshots         About This Report       Performance Highlights       About the Data in This Report       Elig Profs and Attributed Pts       Quality Performance       Admitting Hospitals       Cost Performance       Per Capita Costs of Services         About This Report       Performance Highlights       About the Data in This Report       Elig Profs and Attributed Pts       Quality Performance       Admitting Hospitals       Cost Performance       Per Capita Costs of Services         ADDut This Report       Performance Highlights       About the Data in This Report       Elig Profs and Attributed Pts       Quality Performance       Admitting Hospitals       Cost Performance       Per Capita Costs of Services         ADD THE 2016 VALUE       MODIFIER FOR PAYMENT       UNDER THE MEDICARE PHYSICIAN FEE SCHEDULE       (WNQJWXNQJ KFRNQD RJQNHNSJ)         Last Four Digits of Your Taxpayer Identification Number (TIN): 7436       PERFORMANCE PERIOD: 01/01/2014 – 12/31/2014         ABOUT THIS REPORT FROM MEDICARE       • The Centers for Medicare & Medicaid Services (CMS) is continuing to phase in a Value Modifier under the Medicare Physician Fee Schedule.         • This Annual Quality and Resource Lies Report shows your group of solo practice as identified by its Medicare.
<ul> <li>*Additional information about these sections is provided in Section V. Navigating the Annual QRUR (B, C and D)</li> <li>1. Select any of the section tabs at the top of the screen to navigate to different sections of the 2014 Annual OPUP</li> </ul>	<ul> <li>This Annual Quality and Resource Use Report shows how your group or solo practice, as identified by its Medicare-enrolled Taxpayer Identification Number (TIN), performed in 2014 on the quality and cost measures used to calculate the Value Modifier in 2016. Any applicable Value Modifier payment adjustment is separate from payment adjustments made under the Physician Quality Reporting System (PQRS) or other Medicare programs.</li> <li>The information contained in this report is believed to be accurate at the time of production. The information may be subject to change at CMS' discretion, including, but not limited to, circumstances in which an error is discovered.</li> <li>HOW THE 2016 VALUE MODIFIER APPLIES TO YOUR TIN</li> <li>The 2016 Value Modifier will not apply to your TIN because there were fewer than 10 eligible professionals in your TIN in 2014.</li> <li>This report is for informational purposes only and it will not affect your TIN's payments under the Medicare Physician Fee Schedule in 2016.</li> </ul>
<b>QKUK.</b> <b>Note:</b> After you select a section tab, you will need to wait several seconds for the section to appear on the screen. <b>Note:</b> If your TIN is not receiving a full QRUR report, then you will see information on the <b>About this Report</b> tab only. The remaining tabs will not display any information.	

Image: Second state of the previous report section.         the previous report section.     <	Report Menu Bar icon	<ol> <li>Use the buttons on the Toolbar at the top of the report to navigate within the MicroStrategy Web Platform.</li> <li>Note: Ensure that the Zoom setting in the MicroStrategy Toolbar is set to 100%; otherwise, the report may not appear in the correct format.</li> </ol>
t Home screen. the previous report section. te next report section der folder in MicroStrategy express mode nteractive mode	Report Menu Bar Icon	Platform. Note: Ensure that the Zoom setting in the MicroStrategy Toolbar is set to 100%; otherwise, the report may not appear in the correct format.
the previous report section. e next report section der folder in MicroStrategy express mode rteractive mode		<i>Note:</i> Ensure that the <b>Zoom</b> setting in the MicroStrategy Toolbar is set to 100%; otherwise, the report may not appear in the correct format.
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🚽 🔁 🔹 100% 🔽 🗟 😰 🛒		<ol> <li>Select the <i>PDF</i> icon on the MicroStrategy Web Platform toolbar to</li> </ol>
e Himmons About the Data in This I	About This Don	the screen to PDF.
About This Report Performance Highlights About the Data in This Report Elig Profs and Attributed Pts Quality Performance Admitting Hospitals Cost Performance Per Capita Costs of Services ABOUT THE DATA IN THIS REPORT This report provides summary information on quality and cost measures that are used to calculate the 2016 Value Modifier based on care provided to the Medicare fee-for-service (FFS) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data included in each section. All of the data in this report are available in an exportable comma-separated values (CSV) data file[Link to CSV], with accompanying data dictionary (Link to Data Dictionary), in a downloadable portable document format (PDF) [Link to PDF report), and in an exportable Excel format (Link to Excel File). Additionally, CMS has made educational information about the Annual Quality and Resource Use Report arbitable through the CMS Portal. For more information, and to understand the Annual Quality and Resource Use Report methodology, visit <a href="http://www.cms.gov/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html">http://www.cms.gov/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html</a> .		
For More Information	Overv	Note: The screenshot illustrates
y to which eligible professionals re this Annual QRUR, at least of the number of eligible p System (PECOS) on October dicare under that TIN during the Provider Enrollment Chain and Ownership System (PECOS) Taxpayer Identification Number (TIN)	Eligible Professionals In Your Taxpay A "TIN" (or "Taxpayer Identification Num reassigned their Medicare billing rights i one eligible professional must bill under The number of eligible professionals in y professionals indicated by a query of the 16, 2014 and the number of eligible prof performance period (Exhibit 1).	example of internal perlinks and links to external posites. The links that appear he report are only active ile reviewing the report hin <b>MicroStrategy Web</b> tform.
Additionally environmenter and the processional of the section of the Medicare fee below briefly describes the data included in each section. All of the data in this repetition of the data included in each section. All of the data in this repetition of the company of the distribution of the data included in each section. All of the data in this repetition also understand the Annual Quality and Resource Use Report methodology, visit the Acongany (Link to Data Dictionary), in a downloadable port (Arrogram/2014-QRUR. html.	ABOUT THE DATA IN THIS R This report provides summary informatio (FFS) beneficiaries attributed to your TIN available in an exportable comma-separ document format (PDF) [Link to PDF rep and Resource Use Report a hilable thron http://www.cms.gov/Medical_itedicare- Voverv Eligible Professionals In Your Taxpay A "TIN" (or "Taxpayer Identification Num reassigned their Medicare billing rights i one eligible professional must bill under The number of eligible professionals in y professionals indicated by a query of the 16, 2014 and the number of eligible prof performance period (Exhibit 1).	provided within the <b>2014</b> <b>Annual QRUR</b> to navigate to the designated information or to access external websites. <b>Note:</b> The screenshot illustrates an example of internal hyperlinks and links to external websites. The links that appear in the report are only active while reviewing the report within <b>MicroStrategy Web</b> <b>Platform.</b>

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

## **B.** About the Data in This Report

The **About the Data in This Report** section of the 2014 Annual QRUR provides summary information about the data and methodology used to compute the quality and cost measures that are included in the report. This section of the report also includes links to perform the following tasks:

- 1. Download/Print the 2014 Annual QRUR data to a CSV File
- 2. Access to a data dictionary to supplement the 2014 Annual QRUR Data CSV File
- 3. Download/Print the 2014 Annual QRUR to a PDF File
- 4. Download/Print the 2014 Annual QRUR to a Microsoft Excel (XLS) File
- 5. Generate 2014 Annual QRUR Supplementary Exhibits
- 6. Access to view or print the 2014 Annual QRUR Glossary
- 7. Access to view or print a listing of provider specialties associated with Eligible Professional and Physician

Steps	<u>Screenshots</u>	
1. Select the <i>About the Data in</i> <i>This Report</i> tab to view the information provided in this section.	About This Report         Performance Highlights         About the Data in This Report         Elig Profs and Attributed Pts         Quality Performance           ABOUT THE DATA IN THIS REPORT         This report provides summary information on quality are cost measures that are used to calculate the 2016 Value M. (FFS) beneficiaries attributed to your TIN during the per urmance period. The table below briefly describes the data in available in an exportable comma-separated values (CSV) data file{Link to CSV}, with accompanying data dictionary document format (PDF) {Link to PDF report}, and in an exportable Excel forma: Link to PDF report available through the CMS Portal. For more information, and to understand the Annual Qu http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html.	Admitting Hospitals Cost Performance Per Capita Costs of Services odifier based on care provided to the Medicare fee-for-service ncluded in each section. All of the data in this report are <u>{Link to Data Dictionary}</u> , in a downloadable portable S has made educational information about the Annual Quality uality and Resource Use Report methodology, visit
	Overview of the Data, by Section           Eligible Professionals In Your Taxpayer Identification Number (TIN)           A "TIN" (or "Taxpayer Identification Number") is defined as the single provider entity to which eligible professionals reassigned their Medicare billing rights in the performance period. In order to receive this Annual QRUR, at least one eligible professionals must bill under your TIN.           The number of eligible professionals in your TIN is determined based on the lower of the number of eligible professionals in your TIN is determined based on the lower of the number of eligible professionals based on claims submitted to Medicare under that TIN during the performance period (Exhibit 1).	For More Information           Links on the CMS Portal:           Supplementary Exhibit 1. Physicians and Non- Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics           Glossary           Eligible professional           Provider Enrollment, Chain and Ownership System (PECOS)           Taxpayer Identification Number (TIN)           Eviliate A.1 (listing of eligible professional specialities)

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

<u>Steps</u>	Screenshots	
<ol> <li>Scroll through the sections of the table displayed to learn about the various data and methodologies used to calculate the quality and cost measures that are included in the 2014 Annual QRUR.</li> </ol>	About This Report         Performance Highlights         About the Data in This Report         Elig Profs and Attributed Pts         Quality Performance           ABOUT THE DATA IN THIS REPORT         This report provides summary information on quality and cost measures that are used to calculate the 2016 Value M (FFS) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data in available in an exportable comma-separated values (CSV) data file <u>[Link to CSV]</u> , with accompanying data dictionary document format (PDF) [Link to PDF report], and in an exportable Excel format [Link to Excel File]. Additionally, CMI and Resource Use Report available through the CMS Portal. For more information, and to understand the Annual Qu http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html.	Admitting Hospitals Cost Performance Per Capita Costs of Services odifier based on care provided to the Medicare fee-for-service included in each section. All of the data in this report are {Link to Data Dictionary}, in a downloadable portable has made edit ational information about the Annual Quality iality and Rese be Use Report methodology, visit
<ol> <li>Select the applicable link to perform a desired function.</li> </ol>	Overview of the Data, by Section           Eligible Professionals In Your Taxpayer Identification Number (TIN)           A "TIN" (or "Taxpayer Identification Number") is defined as the single provider entity to which eligible professionals reassigned their Medicare billing rights in the performance period. In order to receive this Annual QRUR, at least one eligible professional must bill under your TIN.           The number of eligible professionals in your TIN is determined based on the lower of the number of eligible professionals indicated by a query of the Provider Enrollment, Chain and Ownership System (PECOS) on October 16, 2014 and the number of eligible professionals based on claims submitted to Medicare under that TIN during the performance period (Exhibit 1).	For More Information           Links on the CMS Portal:           Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics           Glossary           Eligible professional           Provider Enrollment, Chain and Ownership System (PECOS)           Taxpayer Identification Number (TIN)           Exhibit A-1 (listing of eligible professional specialities)

## C. Quality Performance

St	eps	Screensh	ots								
1.	Select the <i>Quality</i> <i>Performance</i> tab to view the information provided in this section. Select the Quality Domain links in Exhibit 5 to view the measures reported by your TIN that are part of the domain:	About This Repr About This Repr eligible cases Quality 2016 as Three q perform Please note ti 2014 Annual professionals	Performance Highlights About the Data in M Performance Highlights About the Data in marizes your TIN's 2014 quality performance. for at least one quality measure Calculations measures for 50 percent or more of the eligibli individuals, and uality outcome measures that Medicare calcula ance period (as applicable). lat PQRS measures submitted in 2014 via the DRUR and will not be used to calculate the 20 reporting as individuals, information about per	This Report This Report PERFOR Duality Con are based of e profession tes from Ff qualified cli 6 Value Mo ormance on are the con-	B B B B     Big Profs an     Big Profs an     Big Profs an     MANCE ON (     mosile Scores a     n the following u     als in your TIN     'S Medicare clait     mical data regist     differ because     these measure	d Attributed Pts QUALITY are calculated data for your T who met the o ms submitted to ms submitted to the one unable es is available	Quality P only for doma TN: criteria to avo for beneficiar ic health reco to determine in the PQRS	erformance	Admitting Hospit rour TIN had at le ayment adjustme o your TIN durin ion are not inclu of these data. Fo rt.	als Cost Performance east 20 int in g the ded in the r eligible	Per Capita Costs of Services
	• Effective Clinical Care		EXNIDIC 3. TO	Number o	formance in z	res	ity Domain Star	dardized Perfo	rmance Score		
	• Person and Caregiver-	Quality Comp	Quality Domain	Included i	Composite Sco 7	ore		Quality Tier De	signation)		
	Centered Experience	Effective Clinic	al Care		3	-6	52.97	-z 1.52 (I			
	and Outcomes	Person and Ca	aregiver Centered Experience and Outcomes		0		2.97		-		
	Community/Population	Community/Po	oulation Health		3			-1.28	-		
	Health	Patient Safety	Patient Safety 1 -3,93								
	• Patient Safety	Communicatio	n and Care Coordination		0			_	-		
	• Communication and	Efficiency and	Cost Reduction		0	Note: Th	Note: The average performance range -1.0 to 1.0 is shown in grav.				
	Care Coordination									3.4	
	• Efficiency and Cost		Exhibit 6-ECC. Effect	ve Clinica	Care Domain	Quality Indi	icator Perfo	mance 🧲			
	Reduction	Show All Me	asures O Show Only Mea	sures Inclu Your	ded in Domain S	Gcore		_		Included	
8.	In Exhibit 6, select one of	Measure Reference	Measure Name	TIN'S Eligible Cases	Your TIN's Performance Rate	Benchmark	Benchmark –1 Standard Deviation	Benchmark +1 Standard Deviation	Standardized Score	in Domain Score?	
	the following to change the view option:	Prev-8, CMS127v2)	Preventive Care and Screening: Pneumococcal Vaccination for Older Adults Diabetes Mellitus (DM): Diabetic Foot and	98	22.45%	45.42%	14.41%	76.42%	-0.74	Yes	
	Show All Measures	126	Ankle Care, Peripheral Neuropathy - Neurological Evaluation Diabetes Mellitus (DM): Diabetic Foot and	2	50%	86.66%	58.42%	100.00%	-1.30	No	
	• Show Only Measure	127	Ankle Care, Ulcer Prevention - Evaluation o Footwear	2	100%	89.43%	65.67%	100.00%	0.44	No	
	Included in Domain	(CMS123v2)	Diabetes Mellitus (DM): Foot Exam Chronic Wound Care: Use of Wound Surface	1	100%	65.65%	30.94%	100.00%	0.99	No	
	Score	245	Culture Technique in Patients with Chronic Skin Ulcers (Overuse Measure)	23	4.35%	99.94%	99.43%	100.00%	-188.32	Yes	
		246	Dressings in Patients with Chronic Skin Ulcers (Overuse Measure)	20	100%	99.54%	96.39%	100.00%	0.15	Yes	

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

#### **D.** Per Capita Costs of Services



If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screenshots
<ol> <li>Repeat Steps 1-7 of Section IV.A (How to Access via PV-Landing Portlet) or Steps 1-6 of Section IV.B (Access via Directly Logging into CMS Secure Portal) of this guide.</li> </ol>	
2. Select Download to Print and Save Your TIN's Full 2014 Annual Quality and Resource Use Report (QRUR) from the Select a Report drop-down menu to export the full report into PDF file.	Select a Report         2014         2014         Select a Report         Select a Report         2014         Select a Report         2014         Select a Report         Select a Report         Select a Report         2014         Select a Report         Supprementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics         Supplementary Exhibit 2.B Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality O         Supplementary Exhibit 3.B Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality O         Supplementary Exhibit 3.B Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality O         Supplementary Exhibit 3.B Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality O         Supplementary Exhibit 3.B Beneficiaries Attributed to Your TIN for the Cost Measur

## VI. Download Full 2014 Annual QRUR

Ste	ps	Screenshots									
3.	Repeat steps 9-11 Section										
	IV.A (Access the 2014	Welcome to Physician Value Physician Quality Reporting Portal									
	Annual ORUR) of this	(*) Red asterisk indicates a required field.									
	guide.										
	8	*Select a Report									
4	Select <i>Ernort</i> to open the	Download educational materials related to the Annual QRURs									
ч.	report in PDF format	TIN (Required)									
	report in i Di Tormat.	Select a TIN This prompt allows only one selection.									
		Search for:									
		Available: Selected:									
		MFSJD HMWVTQWFHYNHQH.:2495     DEMANDE D. HENN DO. OCH255									
		Image: Second Se Second Second Seco									
		➡ B & Q J5YJWQWNXJX N5H:8180									
		M ◀ 1 - 60 of 319731 ▶ M									
		Export Cancel									
The	2014 Annual QRUR is										
disp	layed in PDF format.	Bookmarks (4)									
		2014 ANNUAL QUALITY AND RESOURCE USE REPORT									
Note	e: Use the standard Adobe	AND THE 2016 VALUE MODIFIER FOR PAYMENT UNDER THE MEDICARE PHYSICIAN FEE SCHEDULE									
feat	ures to <b>Save,</b>	Highlights .FWQNSLYTS KFRNQD RJQNHNSJ NSH Last Four Digits of Your Taxpayer Identification Number (TIN): 7264									
Ope	<b>n</b> , and <b>Print</b> content of the	This Report PERFORMANCE PERIOD: 01/01/2014 – 12/31/2014 File Ref and									
PDI	F file.	ABOUT THIS REPORT FROM MEDICARE  Attributed Pts  The Centers for Medicare & Medicaid Services (CMS) is continuing to phase in a Value Modifier under the Medicare Physician Fee Schedule.									
	5	Coult y Performance     Admitting Hospitals     Admitting Hospitals     Admitting Hospitals     Admitting Hospitals									
		Cost Performance programs. Per Capita Costs of The information contained in this report is believed to be accurate at the time of production. The information may be subject to change at CMS <sup>1</sup>									
		Services discretion, including, but not limited to, circumstances in which an error is discovered. HOW THE 2016 VALUE MODIFIER APPLIES TO YOUR TIN									
		The 2016 Value Modifier will not apply to your TIN because there were fewer than 10 eligible professionals in your TIN in 2014.									
		<ul> <li>This report is for informational purposes only and it will not affect your TIN's payments under the Medicare Physician Fee Schedule in 2016.</li> </ul>									
		ABOUT THE 2016 VALUE MODIFIER     Galendar year 2014 is the performance period for the Value Modifier that will be applied in 2016. The Value Modifier applies at the TIN level and is									
		<ul> <li>based on participation in the Physician Quality Reporting System (PQR8).</li> <li>In 2016, the Value Modifier will apply to physician payments under the Medicare Physician Fee Schedule for physicians billing under TINs with 10 or more eligible professionals (at least one of whom is a physician).</li> </ul>									
		<ul> <li>The 2016 Value Modifier will not apply to TINs with one or more physicians who participated in the Medicare Shared Savings Program, the Pioneer ACO Model, or the Comprehensive Primary Care initiative in 2014.</li> </ul>									
		<ul> <li>If a TIN met the criteria as a group to avoid the PORS payment adjustment in 2016, or if at least 50 percent of its eligible professionals met the criteria as individuals to avoid the PORS payment adjustment in 2016 that Modifier will be calculated based on the TIN's quality and cost performance in 2014, using CMS' quality tiering methodology. Depending on performance, this could result in an upward or neutral payment</li> </ul>									
		adjustment for TNAs with Detween 10 and 99 eigible professionals, or an upward, neutral, or downward payment adjustment for TNAs with 100 or more eligible professionals. The Value Modifier payment adjustment is in addition to any PQRS incentive the TIN, or eligible professionals in the TIN, may earn.									
		<ul> <li>If a TIN did not meet the citeria as a group to avoid the PORS payment adjustment in 2016, or if at least 50 percent of its eligible professionals did not meet the citeria as individuals to avoid the PORS payment adjustment in 2016, ben its 2016 value Modifier will be set al-2.0% (downward payment adjustment), information on the PORS propring citeria for groups and individuals can be found at https://www.cms.gov/Medicare/Quality- initia/wei-Patent-Assessment-instruments/PORSindex.html.</li> </ul>									
		WHAT'S NEXT									
		<ul> <li>beginning in a viri, the value modimer will apply to all physicians in groups with two or more eligible professionals, and to physicians who are solo practitioners who bill under the Medicare Physician Fee Schedule.</li> </ul>									

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

## VII. Export the 2014 Annual QRUR

#### A. CSV File Format

All of the data in your TIN's 2014 Annual QRUR are available in an exportable CSV file. Refer to the **About the Data in This Report / Section V -D, Step 2** of this guide and follow the steps below:

Steps	Screenshots									
<ol> <li>Select the text (link to CSV file) in the About the Data in This Report section to export the data in CSV format.</li> </ol>	About This Report Performance Highlights About the Data in This Report Elig Profs and Attributed Pts Quality Performance Admitting Hospitals Cost Performance Per Capita Costs of Services           ABOUT THE DATA IN THIS REPORT           This report provides summary information on quality and cost measures that are used to calculate the 2016 Value Modifier based on care provided to the Medicare fee-for-service (FFS) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data included in each section. All of the data in this report are available in an exportable comma-separated values (CSV) data file{Link to CSV}, with accompanying data dictionary <u>Link to Data Dictionary</u> , in a downloadable portable document format (PDF) <u>(Link to PDF report</u> ), and in an exportable Excel from the Link to <u>Excel File</u> ). Additionally, CMS has made educational information about the Annual Quality and Resource Use Report methodology, visit <a href="http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Physicia FeedbackProgram/2014-QRUR.html">http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Physicia FeedbackProgram/2014-QRUR.html</a> .									
The 2014 Annual QRUR data is										
exported to .CSV format.	- 20150717150552657 [Read-Only] - Microsoft Excel									
<ol> <li>Use Excel tools to Print or Save the file.</li> </ol>	Home     Insert     Page Layout     Formulas     Data     Review     View       Arial     * 10     *     =     =     General     *     Arial     =       Paste     *     *     *     *     =     =     *     %     *       *     *     *     *     *     =     =     *     %     *       *     *     *     *     *     *     *     *     *									
Note: The data dictionary	Clipboard D Font D Alignment D Number D									
supplements the CSV file and is	A1 • fx									
available on the CMS.gov website										
at: <u>http://www.cms.gov/Medicar</u>	2 Full Rpt Gnrt Ind ID 1									
<u>e/Medicare-Fee-for-Service-</u>	3 Physn In Grp Ind ID									
ram/2014_ORUR html	4 Grp Case Ind ID 5 Grp Min 5 Bone Story Ind ID									
<u>rum 2014-QROR.mm</u> .	6 Grp Min 1 Cst Msr Ind ID 0									
	7 Grp Pcp Min 1 Cst Msr Ind ID 0									
	8 Outem Msr Elgbl Case Ind ID 0									
	9 Up To 3 Outem Msrs Ind ID									
	10       Grp Asiv 100 rp ID         11       12         13       14         15       II         II       Flags         Exhibits 5-6       Exhibits 7-8									

#### **B.** Excel File Format (About the Data in This Report Section)

The 2014 Annual QRUR is available in an exportable downloadable Microsoft Excel format. Refer to the **About the Data in This Report / Section V - D, Step 2** of this guide and follow the steps below:

<u>Steps</u>	<u>Screenshots</u>
<ol> <li>Select the text (Link to Excel File) in the About the Data in This Report section to export the report in Excel format.</li> </ol>	About This Report         Performance Highlights         About the Data in This Report         Elig Profs and Attributed Pts         Quality Performance         Admitting Hospitals         Cost Performance         Per Capita Costs of Services           ABOUT THE DATA IN THIS REPORT         This report provides summary information on quality and cost measures that are used to calculate the 2016 Value Modifier based on care provided to the Medicare fee-for-service (FFS) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data included in each section. All of the data in this report are available in an exportable comma-separated values (CSV) data file(Link to CSV), with accompanying data dictionary (Link to Data Dictionary), in a downloadable portable document format (PDF) {Link to PDF report}, and in an exportable Excel format {Link to Excel File}. Additionally, CMS has made educational information about the Annual Quality and Resource Use Report available through the CMS Portal. For more information, and to inderstand the Annual Quality and Resource Use Report methodology, visit <a href="http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre">http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"&gt;http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackPre"</a>
The 2014 Annual QRUR is exported to Excel format. <i>Note:</i> Use the Microsoft Excel	2014 ANNUAL QUALITY AND RESOURCE USE REPORT
toolbar features to Save and/or Print the Annual QRUR. Note: When you export your report using the links provided in the About the Data in This Report section the exported file will appear in a different format than how the report is displayed on the MicroStrategy Web Platform.	AND THE 2016 VALUE MODIFIER FOR PAYMENT UNDER THE MEDICARE PHYSICIAN FEE SCHEDULE B G HFWWJQQ RJRTWNFQ HQNSNH Last Four Digits of Your Taxpayer Identification Number (TIN): 6426 PERFORMANCE PERIOD: 01/01/2014 – 12/31/2014 The Centers for Medicare & Medicaid Services (CMS) is continuing to phase in a Value Modifier under the Medicare Physician Fee Schedule. This Annual Quality and Resource Use Report shows how your group or solo practice, as identified by your Medicare-enrolled Taxpayer Identification Number (TIN), performed in 2014 on the quality and cost measures used to calculate the Value Modifier in 2016. Any applicable Value Modifier
	payment adjustments are separate from payment adjustments made for the Physician Quality Reporting System (PQRS) or other Medicare sponsored programs The information contained in this report is believed to be accurate at the time of production. The information may be subject to change at CMS' discretion, including but not limited to circumstances in which an error is discovered. <b>HOW THE 2016 VALUE MODIFIER APPLIES TO YOU</b> The 2016 Value Modifier will not apply to your TIN, because no physicians submitted claims to Medicare in 2014 under your TIN. This report is for informational purposes only, and it will not affect your TINS payments under the Medicare Physician Fee Schedule in 2016. <b>ABOUT THE 2016 VALUE MODIFIER</b> Calendar year 2014 is the performance period for the Value Modifier that will be applied in 2016. The Value Modifier applies to groups or solo practices defined at the TIN level and is based on nationation in the Physician Quality Reporting System (PQRS)

### C. PDF File (About the Data in This Report Section)

The 2014 Annual QRUR is available in an exportable PDF format. Refer to the **About the Data in This Report / Section V - D, Step 2** of this guide and follow the steps below:

Steps	Screenshots											
<ol> <li>Select the text (Link to PDF report) in the About the Data in This Report section to export the report in PDF format.</li> </ol>	About This Report Performance Highlights About the Data in This Report Elig Profs and Attributed Pts Quality Performance Admitting Hospitals Cost Performance Per Capita Costs of Services           ABOUT THE DATA IN THIS REPORT           This report provides summary information on quality and cost measures that are used to calculate the 2016 Value Modifier based on care provided to the Medicare fee-for-service (FFS) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data included in each section. All of the data in this report are available in an exportable comma-separated values (CSV) data file{Link to CSV}, with accompanying data dictionary [Link to Data Dictionary], in a downloadable portable document format (PDF) [Link to PDF report], and in an exportable Excel format [Link to Excel File]. Additionally, CMS has made educational information about the Annual Quality and Resource Use Report available through the CMS Portal. For more information, and to understand the Annual Quality and Resource Use Report methodology, visit <a href="http://www.cms.gov/Medicare1.equality144/40/Http://www.cms.gov/Medi</th>											
The 2014 <b>Annual QRUR</b> is exported to PDF format.	Bookmarks											
Note: Use the standard Adobe features to Save, Open, and Print content of the PDF file. Note: When you export your report using the links provided on the About the Data in This Report section, the exported file will appear in a different format than how the report is displayed on the MicroStrategy Web Platform.	Control Co											
	In 2016, the Value Modifier will apply to physician payments under the Medicare Physician Fee Schedule for physicians billing under TINs with 10 or more eligible professionals (at least one of whom is a physician).     The 2016 Value Modifier will not apply to TINs with one or more physicians who participated in the Medicare Shared Savings Program, the Pioneer ACO Model, or the Comprehensive Primary Care initiative in 2014.											

### VIII. Download the 2014 Annual QRUR Educational and Outreach (E&O) Materials

The following educational materials related to the **2014 Annual QRUR** are available to view and/or print through the CMS Portal:

- About the Data In This Report: Detailed information about the data used in the report
- Exhibit A-1: List of Specialties Associated with Eligible Professional, Physician, and Provider Stratification Categories
- Glossary: List of terms found within the report
- Notes and Hover-Over Terms: Definitions of column names used in supplementary report exhibit tables

These educational materials can be accessed from within the PV-PQRS Feedback Reports portal prior to generating the 2014 Annual QRUR or within the 2014 Annual QRUR.

Additional educational documents about the 2014 Annual QRURs are available at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-QRUR.html.

<u>Steps</u>	<u>Screenshots</u>
<ol> <li>Repeat Steps 1- 7 of Section IV.A (How to Access via PV-Landing Portlet) or Steps 1-6 of Section IV.B (Access via Directly Logging into CMS Secure Portal) of this guide.</li> </ol>	
2. Select the <i>Download the</i> <i>educational materials</i> <i>related to the Annual</i> <i>QRURs</i> link that appears upon selecting a Year (2014) and Report (2014 Annual Quality and Resource Use Report (QRUR), any of the Supplementary Exhibits and Download to Print and Save Your TINs full Annual Quality and Resource Use Report (QRUR)).	Welcome to Physician Value Physician Quality Reporting Portal         (*) Red asterisk indicates a required field.         *Select a Year?       2014         *Select a Report       2014         2014       •         *Select a Report       2014 Annual Quality and Resource Use Report (QRUR)         Download educational materials related to the Annual QRURs

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.



If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

## IX. How to Access 2014 Annual QRUR Supplementary Exhibit Reports

The following 2014 Annual QRUR Supplementary Exhibits are available:

- Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics
- Supplementary Exhibit 2A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measures, and the Care that You and Others Provided
- Supplementary Exhibit 2B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measures: Costs of Services Provided by You and Others
- Supplementary Exhibit 3A. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measures: Hospital Admissions for Any Cause
- Supplementary Exhibit 3B. Beneficiaries Attributed to Your TIN for the Cost Measures (excluding MSPB) and Claims-Based Quality Outcome Measure: Hospital Admissions for Any Cause (MSSP ACO TINs Only)
- Supplementary Exhibit 4. Beneficiaries Attributed to Your TIN for the Medicare Spending per Beneficiary Measure
- Supplementary Exhibit 5-10. Per Capita or Per Episode Costs, by Categories of Service, for the Six Cost Measures
- Supplementary Exhibit 11: Individual Eligible Professional Performance on the 2014 PQRS Measures
- Supplementary Exhibit 12: Summary of 2014 GPRO Earned Incentive
- Supplementary Exhibit 13: Beneficiaries Assigned to Your ACO and Attributed to Your TIN for the All-Cause Hospital Readmissions Measure: Hospitals Admission for Any Cause.

All reports can be individually generated from either the PV-PQRS Reports Portal using the **Feedback Report**s dropdown menu or from the hyperlinks located in the **About the Data in This Report** section of the **2014 Annual QRUR**.

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screenshots
<ol> <li>Repeat Steps 1- 7 of Section IV.A (How to Access via PV-Landing Portlet) or Steps 1- 6 of Section IV.B (Access via Directly Logging into CMS Secure Portal) of this guide.</li> </ol>	
<ol> <li>Select a year (2014) from the Select a Year drop-down menu, and then select a report (e.g., Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics) from the Select a Report drop-down menu.</li> </ol>	Welcome to Physician Value Physician Quality Reporting Portal         (*) Red asterisk indicates a required field.       2014         *Select a Year?       2014         *Select a Report       -Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics         Ownload educational       -Supplementary Exhibit 2. Physicians and Non-Physician Eligible Professionals Billing Under Your TIN, Selected Characteristics         Supplementary Exhibit 3. Beneficiaries Attributed to Your TIN for the Cost Measures (encluding MSFB) and Claims-Based Quality Outcome Measures, and the Care that You and Others         Supplementary Exhibit 3. Beneficiaries Attributed to Your TIN for the Cost Measures (encluding MSFB) and Claims-Based Quality Outcome Measures. Cost of Services Provided by You and Others         Supplementary Exhibit 3. Beneficiaries Attributed to Your TIN for the Cost Measures (encluding MSFB) and Claims-Based Quality Outcome Measures. Cost of Services Provided by You and Others         Supplementary Exhibit 3. Beneficiaries Attributed to Your TIN for the Cost Measures (encluding MSFB) and Claims-Based Quality Outcome Measures. Hospital Admissions for Aug Cause (MSSP ACO TINS Only)         Supplementary Exhibit 3. Beneficiaries Attributed to Your TIN for the Medicare Spending per Beneficiary Measure         Supplementary Exhibit 3. Did You on Per Capita or Per Episode Costs, by Calegories of Service, for the Six Cost Measures         Supplementary Exhibit 3. Did You or Per Capita or Per Episode Cost, by Calegories of Service, for the Six Cost Measures         Supple

#### A. Access 2014 Annual QRUR Supplementary Exhibits from the PV-PQRS Feedback Reports Menu

<u>Steps</u>	Screenshots
<ul> <li>3. Read the Attestation Message and make the appropriate attestation selection.</li> <li>Select one of the options under "I plan to use this data in my capacity as a:"</li> <li>4. Then, select I Confirm to</li> </ul>	*I plan to use this data in my capacity as a: (Must select one box)
continue. Note: If you select Neither of the above or I do not know, the option to Exit to the Overview screen will be enabled.	I Connem       I Decline         Business Associate (BA) of HIPAA CE(s) in accordance with a valid HIPAA         Business Associate Agreement that allows us to request individually identifiable         health information (IIHI) for use in care coordination and quality work on behalf of         the HIPAA CE(s).         I need to use this information in my work for care coordination and quality         improvement purposes that fall within the first and/or second paragraphs of the         HIPAA Privacy Rule definition of "Health Care Operations" on behalf of the HIPAA         CE(s), and I confirm that my request constitutes the "minimum necessary" data to         accomplish these purposes.
	I Confirm I Decline Neither of the above or I do not know. Please contact the QRUR Help Desk at 1-888-734-6433 if you need further assistance. Exit to Overview screen

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

<u>Steps</u>	<b>Screenshots</b>			
<ul> <li>Steps</li> <li>You are now in the MicroStrategy Web Platform. The screen shows the TIN(s) associated with your EIDM account.</li> <li>Select one TIN from the Available TINs:</li> <li>Select a TIN and either double-click or click the <i>arrow</i> button to move the TIN from Available to Selected.</li> <li>You can also filter the list of Available TINs by entering the name or last 4 digits of a TIN in the Search for field.</li> <li>Note: Select only one TIN each time you attempt to retrieve a 2014 Annual Supplementary Exhibit.</li> <li>Select Run Document.</li> </ul>	Screenshots TIN (Required) Select a TIN This prompt allows only one selection. Search for: Available: FRAVELETS KERNOD RUQNENS INSEE HIM INSEED HIMWITQWFHYNHQH.:2495 J.FRWDS P JLERN RQ, QQH:7151 XQHINEQQD KTW HIMQQU/S HIMIQQ (WNQJWXNQJ KERNQD RJQNHNSJ):74:3 B & & B WJINFG XJWQNHJX, Q.Q.H.:2550 H	e  2561 2018202 2018202 2019 2019 2019 2019 2019 2019 2019 2		Selected:
<b>Note:</b> You will need to wait several seconds while the system generates your 2014 Annual Supplementary Exhibit.				
The selected <b>2014</b>				
Supplementary Exhibit report is displayed		≝) ≞; ⊔; № □ ◊ ⊒ ⊔; ੫⊞ ▼ 100% ▼ ⊠ थे  -	V	
alopiujou.	Supplementary Exhibit 1. Physicia	ans and Non-Physician Eligible Professionals Billing Under Your	TIN, Selected Ch	aracteristics
<i>Note: The example shown is</i>	NPI	Name	Physician †	Non-Physician Eligible Professional †
Supplementary Exhibit 1. Physicians and Non-Physician	6304885193	BNQQNFR WJDSTQQX	Х	-
Eligible Professionals Billing	† Crosses indicate terms to be d	efined through the hover-over function.		
Under Your TIN, Selected	L			
Characteristics				

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

<u>Steps</u>	<u>Screenshots</u>									
7. Repeat <b>Steps 1-6</b> of this										
section to access any of the	Welcome to Physician Value Physician Quality Reporting Portal           (*) Red asterisk indicates a required field.									
other 2014 Annual QRUR										
Supplementary Exhibits.	*Select a Year?	*Select a Year?								
	*Select a Report	*Select a Report Select a Report								
		Supple	mentary Exhibit 1.	Physicians and No	on-Physician Eligi	ble Professionals I	Billing Under `	Your TIN, Selected C	naracteristics	
		Supple	mentary Exhibit 2	A. Beneficiaries Att	tributed to Your T	IN for the Cost Me	easures (exclu	ding MSPB) and Clai	ms-Based Qualit	
		Supple	mentary Exhibit 2	B. Beneficiaries Att	tributed to Your T	IN for the Cost Me	easures (exclu	ding MSPB) and Clai	ms-Based Qualit	
		Supple	mentary Exhibit 3.	A. Beneficiaries Att	tributed to Your T	IN for the Cost Me	easures (exclu	ding MSPB) and Clai	ms-Based Qualit	
		Supple	mentary Exhibit 31	B. Beneficiaries Att	tributed to Your T	IN for the Cost Me	easures (exclu	ding MSPB) and Clai	ms-Based Qualit	
		Supple	mentary Exhibit 4.	Beneficiaries Attr	ibuted to Your TI	N for the Medicare	Spending per	nding per Beneficiary Measure		
		Supple	mentary Exhibits	-10. Per Capita or	Per Episode Costs	s, by Categories of	Service, for th	ie Six Cost Measures		
		Supple	mentary Exhibit 11	. Individual Eligibi	e Professional Pe	rformance on the	2014 PQRS M	easures		
		Supple	mentary Exhibit 12	2. Summary of 201	4 GPRO Earned II	ncentive				
		- III		,						
When Complementary Eshibit										
when Supplementary Exhibit		aD.M.	& 🖪 🔉 🕞 <b>.</b> 10	n% 🗸 🖻 🗿 🔄	•					
5-10, Per Capital or Per		ag ( eze un e			,					
Episode Cost, by Categories of	Supplementary Exhibit 5	Supplement	ary Exhibit 6 Su	pplementary Exhibi	it 7 Supplement	tary Exhibit 8 Si	upplementary	Exhibit 9 Suppleme	entary Exhibit 10	
Service, for the Six Cost	Supplementary Exhibit 5. Per Capit	ta Costs, by	Categories of Serv	ice, for the Per Capi	ita Costs for All Att	ributed Beneficiarie	s Measure			
Measures is selected.	T T		Number of Your	Dercontage of Your		Banahmark		Amount by Which		
Supplementary Exhibit 5 is the	Service Category		TIN's Attributed	TIN's Attributed	Per Capita Costs	Percentage of		Your TIN's Costs		
default agetion diaplayed			Beneficiaries Using any Service in this	Beneficiaries Using any Service in this	for Your TIN's Attributed	Beneficiaries Using Any Service	Benchmark Per Capita	Were Higher or (Lower) Compared to		
default section displayed.			Category	Category	Beneficiaries	in This Category	Costs	the Benchmark		
	ALL SERVICES Outpatient Evaluation and Management	t Services.	7	100.00%	\$3,311	100.00%	\$10,907	(\$7,597)		
8. Select any of the following	Procedures, and Therapy (excluding en department)	nergency	7	100.00%	\$1,231	100.00%	\$2,998	(\$1,768)		
tabs at the top of the screen to	Evaluation & Management Services B Eligible Professionals	illed by	7	100.00%	\$943	100.00%	\$1,132	(\$189)		
navigate to:	Billed by Your TIN		7	100.00%	\$543	99.99%	\$473	\$70		
Supplementary Exhibit	Primary Care Physicians		0	0.00%	\$0	67.50%	\$357	(\$357)		
6.	Surgeons		7	0.00%	\$U \$543	20.91%	\$54 \$22	(\$54) \$521		
Sunnlamantany Fysikit	Other Eligible Professionals		0	0.00%	\$0	10.44%	\$40	(\$40)		
• Supplementary Exhibit	Billed by Other TINs		4	57.14%	\$400	83.87%	\$658	(\$258)		
7.	Medical Specialists, Surgeons, and Other	Eligible	U	0.00%	\$U 6400	20.43%	94/ 8011	(947)		
Supplementary Exhibit	Professionals		4	57.14%	\$4UU	0Z.45%	3011	(\$212)		
8.	Uther Facility-Billed Evaluation & Manager Expenses*	ment	1	14.29%	\$96	17.71%	\$131	(\$36)		
Sunnlementary Fyhihit	Major Procedures Billed by Eligible Professionals		0	0.00%	\$0	9.43%	\$170	(\$170)		
	Billed by Your TIN		0	0.00%	\$0	1.62%	\$20	(\$20)		
<b>9.</b>	Primary Care Physicians		0	0.00%	\$0	0.24%	\$1	(\$1)		
Supplementary Exhibit	Medical Specialists Surgeons		U	0.00%	\$0 \$0	0.48%	\$7 \$6	(\$7)		
10.	Other Eligible Professionals		0	0.00%	\$0	0.25%	\$6 \$6	(\$6)		

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screensho	<u>ots</u>					
When Supplementary Exhibit 11. Individual Eligible Professional Performance on the 2014 PQRS Measures is selected, individual PQRS performance information (if available) for all of the TIN's eligible professionals can be exported to Excel by following these steps:	(*) Red astr *Select a Bownload of GROUPING: Provi Supplementary I Met the criteria t	erisk indicates a required fiel Year? 2014 Report -Supplementary educational materials related P C P P Number: 6156769428:0FSF 525 Click Here to download Exhibit 11. Individual Eligible Profe o avoid the 2016 PORS payment a	d. Exhibit 11. Individual El to the Annual QRURs Q LZORFS the PQRS Performance on the 2 distinguistment: Yes	igible Professional Perfor @ @ \$\frac{1}{2\sigma_2} mation for all of your group's e 2014 PQRS Measures: QFSSF	mance on the 201 ligible professionals t	4 PQRS Measure	e
<ol> <li>Select the <i>Click Here</i> link to download the PORS</li> </ol>	F	Performance Measure	Domain	Eligible Pro	fessional Performance Number of Eligible Cases †	Performance Rate	Benchmark Rate
performance information for	130 (CMS68v3)	Documentation of Current Medications in the Medical Record	Patient Safety	Registry	990	3.84%	87.36%
all of your group's eligible	137	Melanoma: Continuity of Care - Recall System	Effective Clinical Care	Registry	65	40.00%	97.81%
professionals to a single	138	Melanoma: Coordination of Care	Communication and Care Coordination	Registry	1	100.00%	89.33%
Excel table.	194	Oncology: Cancer Stage Documented	Effective Clinical Care	Registry	262	4.58%	90.19%
	224	Melanoma: Overutilization of Imaging Studies in Melanoma	Efficiency and Cost Reduction	Registry	66	100.00%	99.47%
	226 (CMS138v2)	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Community/Population Health	Registry	628	97.13%	83.11%
	245	Chronic Wound Care: Use of Wound Surface Culture Technique in Patients with Chronic Skin Ulcers (Overuse Measure)	Effective Clinical Care	Registry	9	88.89%	99.94%
	246	Chronic Wound Care: Use of Wet to Dry Dressings in Patients with Chronic Skin Ulcers (Overuse Measure)	Effective Clinical Care	Registry	9	100.00%	99.54%
	265	Biopsy Follow-Up	Communication and Care	Registry	16	25.00%	83.32%

<u>Steps</u>	<u>Screenshots</u>					
1. Repeat Section IV (Access the 2014 Annual QRUR) and choose the preferred access method mentioned in Section IV.A and Section IV.B.						
<ol> <li>Select the <i>About the Data in</i> <i>This Report</i> tab and locate the link to open the desired 2014 Annual Supplementary Exhibit.</li> </ol>	About This Report Performance Highlig About This Report Performance Highlig ABOUT THE DATA IN TH This report provides summary infc (FFS) beneficiaries attributed to yr available in an exportable comma document format (PDF) [Link to P and Resource Use Report availab http://www.cms.gov/Medicare/Mer	this Report Performance Highlights About the Data in This Report Elig Profs and Attributed Pts Quality Performance Admitting Hospitals Cost Performance Per Capita Costs of Services OUT THE DATA IN THIS REPORT report provides summary information on quality and ost measures that are used to calculate the 2016 Value Modifier based on care provided to the Medicare fee-for-service b) beneficiaries attributed to your TIN during the performance period. The table below briefly describes the data included in each section. All of the data in this report are lable in an exportable comma-separated values (CSV) data file[Link to CSV), with accompanying data dictionary, Link to Data Dictionary), in a downloadable portable ment format (DP) File the DP report), and in an exportable Excel Format Link to Excel File). Additionally, CMS has made educational information about the Annual Quality Resource Use Report available through the CMS Portal. For more information, and to understand the Annual Quality and Resource Use Report methodology, visit //www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/2014-CARUR.html.				
several seconds while the system generates your chosen Supplementary Exhibit.	Overview of the Data, by Section           Eligible Professionals In Your Taxpayer Identification Number (TIN)           A "TIN" (or "Taxpayer Identification Number") is defined as the single provider entity to which eligible professionals reassigned their Medicare billing rights in the performance period. In order to receive this Annual QRUR, at least one eligible professional must bill under your TIN.           The number of eligible professionals in your TIN is determined based on the lower of the number of eligible professionals indicated by a query of the Provider Enrollment, Chain and Ownership System (PECOS) on October 16, 2014 and the number of eligible professionals based on claims submitted to Medicare under that TIN during the performance period (Exhibit 1).			For More Information           Links on the CMS Portal:           Supplementary Exhibit 1. Physicians and Non- Physician Eligible Profesionals Billing Under Your TIN, Selected CL acteristics           Glossary           Eligible professional           Provider Enrollment, Chain and Ownership System (PECOS)           Taxpayer Identification Number (TIN)           Exhibit A-1 (listing of eligible professional specialities)		
The associated supplementary exhibit is displayed. <i>Note: The example shown is</i> <i>Supplementary Exhibit 1.</i> <i>Physicians and Non-Physician</i> <i>Eligible Professionals Billing</i> <i>Under Your TIN, Selected</i> <i>Characteristics</i>	Welcome to Physicia         (*) Red asterisk indicat         *Select a Year         *Select a Report         Download educational	an Value Physician Quality Reporting Portal tes a required field. 2014 2014 Annual Quality and Resource Use Report (QRI materials related to the Annual QRURs ans and Non-Physician Eligible Professionals Billing Under Your TIN, Name f QFWWUS JLFRN f efined through the hover-over function.	UR) , Selected Chara Physician † X	acteristics Non-Physician Eligible Professional †		

#### B. Access 2014 Annual QRUR Supplementary Exhibits from within the 2014 Annual QRUR

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

#### X. View and Print the 2014 Annual QRUR Supplementary Exhibits in PDF or Excel Format

## A. View a 2014 Annual QRUR Supplementary Exhibit as a PDF Document after Opening the Report.

<u>Steps</u>	<u>Screenshots</u>							
1. Select the <i>Export</i> button on the MicroStrategy Web								
select <b>PDF</b> :	Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under You in Excel							
	NPI	Name		DF	Ion-Physician Eligible Professional †	Special	ty Designation †	Identified via PECOS †
	6176754594	XFWFM YFDQ	TW	•	Х	Licensed (	Clinical Social Worker	Х
	+ Crosses indicate terms to be o	defined through the hover-over function						
The 2014 Annual QRUR								
Supplementary Exhibit is	NPI 002020056	Name HMDXYFQ XFDNP	Physician †	Non-Physician Eligible Professional †	Specialty Designation † Unoisov	Identified via PECOS † X	identified via Billings †	Date of Last Claim Billed Under TIN 06042014
displayed in <b>PDF</b> format.	6002031127 6002302245 6002306455 6002002212	ZOGJIM GJON PWAKYNGJ YTKYX JONGRGJIM GTKYBNIP RHEMJOGJ RHOTWOFGJ	X X X	- X	Cardiology Family Practice Nurse Practitioner Physical Medicine and Rehabilitation	X X X X	× • ×	11/29/2013 06/26/2014 06/30/2014
<i>Note</i> : Use the standard Adobe features to <b>Save</b>	000200306 000208-043 000208-043 000208-045 000208-060 001208-075	OMNOCING GJOGHYYJMN PHWP YTOMCHWY GWIST NGLMNAP PIJGLYM MTLWIKU XMPGSTS GFZUMWYD RHHMFJG LJTWLJYXTS	X X X ·	- - - X	Otolaryngology Otolaryngology Family Practoe Ophthain ology Nune Practitioner Gastroenterology	X X X X X X	× × × × × × × × ×	05/02/214 06/19/2014 06/50/2014 06/50/2014 06/50/2014 06/50/2014
<b>Open</b> , and <b>Print</b> content of the	0012005560 0012112820 0012112820 0012115820 0012158820 0012158820 0012257270	YMITERS OF LUW PPINUS WERCYTS XMPMWOPG YPWPKOPW MPLMNLMPY WEICPP YMPOP XMITPNG FXLMUW QTXICAN TRUS	X X X X X	- - - - X	Optometrist Diagnotic Rediology Pediatric Medicine Internal Medicine Family Practice Certified Registered Name Ametheakologiat	× - - - - - - - - - - - - - - - - - - -	× × × ×	06/05/2014 10/29/2013 06/26/2014 06/26/2014 06/26/2014
FDF jue.	6012264756 602236427 6022344763 6022347713 602247513	OFRUSO GEWWIESH L'TWOTS MAUSJWY PSLIGE XXLOWITK OKOF MEWGLY RTWERREOTRISO JOWRDONES	× • ×	× × ·	Pulmonary Disease Certified Registered Name Areathesiologist Name Practitioner Family Practice Internal Medicine	× • × ×	- X X -	10292013 06502014 06502014
	602213666 6022525866 602251304 6022545411 602255355 6022645411	FRUHEN TONG FRUPO STYWTX GWDU LWUISJ PNRGJWOD WOFS GTWU GZICHNOGT DTONU DW	x x · x	- - - -	Pediatric Medicine Cardiology Orthopedic Surgery Physician Assistant Orthopedic Surgery Cardiology	× × ×		08/02/014 06/50/2014 08/50/2014
	0002967564 0002967573 0002969560 0042100057 044210020	OTWINESS PTOONUS OFFLIX LEGMINUS WITGUWE FURGYWITSL LEWE JSOJNK YWITERS RIVOTSOO	x x x x x x	-	Optometrial Optometrial Family Practice Family Practice Gastrownierotocy	x x x x x	x x x x	065232014 065022014 065022014 065022014 065022014
	0042102302 0042252559 0042646062 0042767102 0042767102 00525164032	XY JOJS HFXTX GJES GJOGNATSJ GZGNESSJ RTWANK YFGZG NXGFR PFWLS PNR	x x · x x	- X -	Critical Care (Intensivista) Interventional Radiology Physical Therapiat (Independently Practicing) Internal Medicine Gastroenterology	X X X X X	× · · · · · · ×	05242014 05502014 
	0002200075 00020850007 00020851051 0002087820 0002082023 0002781001	WURDOD FIT MI CHIES J MITHERES URIVITA BURGHES JIMINE CAMBOONICK WULDER WTOX CUTTING CAMBOONICF	× • • •	- X - X X	Internal Medicine Certified Registered Nurse Areathesiologiat Registered Jaticken/Nurtico Professional Internal Medicine Certified Registered Nurse Areathesiologiat Nurse Practitioner	X X X X X X	× × × ×	06502014 06502014 065022014 065022014 065022014
	000202000 0002050234 0002052233 0002070341 000270500 00274550	PPHWOG JPWOX Released NorwP FGS RPWHJ XXWJYJ HOSYMHF QJWWO HPWWHJ WFYNGDD QBLUHY XYFDQJYTB	· × ·	x • • • •	Physician Assistant Otolaryngology Obsistinau(Oynecology Nume Practitioner Occupational Therapid (Independently Practicing Cardiology	- X X X X	× × × ×	06/12/2014 06/50/2014 06/50/2014 06/50/2014 06/50/2014
	8072487919 8072581907 80725919075 8002700014 8002750213	RPWP HTWUD X2PNWYN GROYF WTGUWY GUWR LLTWLI GOORATS GFYWNHRF MHOG		- - - X	Family Practice Pediatric Medicine Ontical Care (Internivita) General Surgery Nutrie Practitioner	X X X X X	× - - - ×	06/50/2014
	0002785455 0002785400 0002570210 0002570210 0002553060 0002553060	BNOOKER GEZERES     GETED IZERNIA     GETED IZERNIA     IF GAMMAD RESTO     JO OTXUOM     OFILIDERYNIAMA GEDE     DOOLMIN GEVELMA		x	Chropedic Surgery Orthopedic Surgery Nune Practicitioner	X X X	× × ×	05/27/2014 05/50/2014 05/50/2014 05/50/2014 05/50/2014
		RUGIST VIEW UND THE CONTROL OF CO			7 10 event buyery Helectrus Deserve Family Practice Disgradic Radiology		· · · ·	06/50/2014

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pvhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

Steps	Screenshots
<ol> <li>Select the <i>Export</i> button on the MicroStrategy Web Platform toolbar and then select <i>Excel</i>.</li> </ol>	Image: Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under You     Image: Supplementary Exhibit 1. Physicians and Non-Physician Eligible Professionals Billing Under You
<b>Note:</b> Selecting the <b>Excel</b> option will display an <b>Export</b> options menu in a new window.	NPI         Name         PDF         Non-Physician Eligible Professional †         Specialty Designation †         Identified via PECOS †           6176754594         XFWFM YFDQTW         -         X         Licensed Clinical Social Worker         X           † Crosses indicate terms to be defined through the hover-over function.         -         X         Licensed Clinical Social Worker         X
<ul> <li>2. Select one (1) of the following options:</li> <li>(a) <i>Open</i> to open the supplementary exhibit in Excel. The file will open in Excel and will not be automatically saved.</li> <li>(b) <i>Save</i>. The file will be saved in Excel format in the Downloads folder on your computer.</li> <li>(c) <i>Save As</i>. You will be prompted with a Save As window on which you can choose the location where you can save the file.</li> </ul>	What do you want to do with Supplementary Exhibit 1_ Physicians and Non-Physician Eligible Professionals Billing Under Your TINxlsx? Size: 3.53 KB Type: Microsoft Office Excel 12 From: portalz7.cms.cmstest <ul> <li>Open</li></ul>

#### B. View a 2014 Annual QRUR Supplementary Exhibit as an Excel Spreadsheet after Opening the Report.

If you have questions about the 2014 Annual QRURs and Supplementary Exhibits, or need assistance accessing any of the reports, please contact the Physician Value Help Desk by email at pyhelpdesk@cms.hhs.gov or by phone at 1-888-734-6433 (press option 3). Normal business hours are Monday-Friday from 8 am to 8 pm EST.

<u>Steps</u>	<u>Screenshots</u>
The 2014 Annual QRUR Supplementary Exhibit is exported to Excel format. Note: Use the Microsoft Excel toolbar features to Save and/or Print the Supplementary	Avia       Page layout       Formulas       Data       Review       View         Wind       *
Exhibit.	A     B     C     D     E     F     O     H     I     J     K       Supplementary Exhibit 1 Physicians and Mor-Physicians Biglib Professionals Biling Under Your TIN, Selected Characteristics     Identified via PECOS t     Identified via PECOS

## XI. <u>Troubleshoot Browser Setting</u>



# Guide for Accessing the 2014 Annual QRURs and Supplementary Exhibits

S	Steps	Screenshots
•	Mozilla-Firefox Chrome	
•	Safari	