



2022 Quality Payment Program *Documents for an Audit*



Introduction

Health Services Advisory Group (HSAG) offers this resource to assist clinicians and practices in collecting the Centers for Medicare & Medicaid Services (CMS) Quality Payment Program (QPP) documentation, making it readily available if selected for an audit. The entity must retain all data submitted to CMS for purposes of the Merit-based Incentive Payment System (MIPS) for six years from the end of the MIPS performance period.

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General Reporting Information

Practice name: _____

Practice Tax Identification Number (TIN): _____

Person responsible for 2022 QPP reporting: _____

Additional contact name(s): _____

Title: _____

Phone number(s): _____

Email address(es): _____

Third party information, if applicable: _____

Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) staff contact:

Location of HARP login information: _____

HARP Guide (ZIP file):
<https://qpp-cm-prod-content.s3.amazonaws.com/uploads/335/QPP%20Access%20User%20Guide.zip>

2022 data reported at the Individual level (National Provider Identification [NPI]) _____ or Group level (Tax Identification Number [TIN]) _____ or Virtual Group (TIN) _____

QPP Category	Performance Period	How Was the Data Submitted? (Select One)	Secure Electronic Location for Data Reports	Notes
Quality (full-year reporting period)	1/1/22–12/31/22	<ul style="list-style-type: none"> • Claims (for small practices only) • Electronic health record (EHR) • Quality Clinical Data Registry (QCDR) • Qualified Registry (QR) • CMS Web Interface 		
Promoting Interoperability (90-day reporting period)		<ul style="list-style-type: none"> • EHR • QCDR • QR • Attestation 		
Improvement Activities (90-day reporting period)		<ul style="list-style-type: none"> • EHR • QCDR • QR • Attestation 		

Reminder: Print a screenshot of final MIPS score from the QPP Portal and keep this in a binder.

General Reporting Information

List all of the clinicians who worked under the TIN during 2022. Include the following credentials: doctor of medicine (MD), doctor of osteopathy (DO), nurse practitioner (NP), physician assistant (PA), clinical nurse specialist (CNS), certified registered nurse anesthetist (CRNA), doctor of chiropractic (DC), doctor of podiatric medicine (DPM), doctor of optometry (OD), doctor of dental medicine (DMD), doctor of dental surgery (DDS), physical therapists, occupational therapists, qualified speech-language pathologists, qualified audiologists, clinical psychologists, registered dietitians, nutrition professionals, clinical social workers, and certified-nurse midwives.

Clinician Name	NPI	2022 Eligibility Status per https://qpp.cms.gov/NPI Lookup Tool	Date Clinician Joined Practice (if new in 2022)	Date Clinician Left Practice in 2022 (if retired, moved, deceased, etc.)
		Individual: Yes or No		
		Group: Yes or No		
		APM: Yes or No		
		Individual: Yes or No		
		Group: Yes or No		
		APM: Yes or No		
		Individual: Yes or No		
		Group: Yes or No		
		APM: Yes or No		
		Individual: Yes or No		
		Group: Yes or No		
		APM: Yes or No		
		Individual: Yes or No		
		Group: Yes or No		
		APM: Yes or No		
		Individual: Yes or No		
		Group: Yes or No		
		APM: Yes or No		

APM = Alternative Payment Model

Promoting Interoperability Category

Record the following information about your certified EHR (CEHRT):

- EHR vendor name and product: _____
- Date of EHR upgrade to 2015 Edition certification criteria, technology certified to the 2015 Edition Cures Update certification criteria, or a combination of the two _____
- Certified Health IT Product List (CHPL) Certification Number (<https://chpl.healthit.gov/#/search>): _____
- Reporting period (minimum of 90 days): Start date: _____ End date: _____
- Record where documentation is being saved: _____

Save Security Risk Analysis (SRA)

- Completed by _____ on date: _____
- Include date and name of person who completed SRA within document and in title of document
- Location of saved paper copy or electronic version of SRA: _____
- <https://www.healthit.gov/providers-professionals/security-risk-assessment-tool>

Save self-assessment using the High Priority Practices Guide (a part of the Safety Assurance Factors for EHR Resilience [SAFER] Guides)

- Completed by _____ on date: _____.
- Include the date and name of the person who completed the Annual Self-Assessment within the document and in the title of the document.
- Location of the saved electronic version of the Self-Assessment: _____.
- See <https://www.healthit.gov/topic/safety/safer-guides>.

Save Promoting Interoperability report for each measure from CEHRT that includes clinician and/or practice name and the dates of the 90-day reporting period (saved both electronically and hard copy)

- Location of saved electronic version: _____

Save screenshots of the following:

- Documentation of a successful Health Information Exchange (HIE), such as sending a direct email message
- Examples of secure messages sent via the patient portal
- Documentation of how the patient portal is offered to patients (i.e. flyer, pamphlet, poster, policy stating office staff offer portal registration during check-in, etc.)
- Documentation of successful transmission of immunization data to immunization registry or email confirming registered intent to report or placed on a waiting list to report in 2022:
 - Date and name: _____
- Location of saved electronic version: _____
- Documentation of engagement/onboarding with a Electronic Case Reporting registry:
 - Date and name: _____
 - Date and name: _____

Promoting Interoperability Category

- Documentation of reporting to additional registries, if applicable:

- Date and name: _____
- Date and name: _____

Save submission receipt following attestation on QPP portal or from EHR vendor or registry if a third party submitted Promoting Interoperability data.

If applicable, save hardship application, including all communications from CMS, open tickets, or Office of the National Coordinator (ONC) complaints filed with EHR vendor.

Promoting Interoperability Category

2022 Objectives and Measures

Objective	Measure	Exclusion (Y/N)	Numerator	Denominator	Score	Points
E-Prescribing	E-Prescribing					__/10
Objective	Measure	Exclusion (Y/N)	Numerator	Denominator	Score	Points
Health Information Exchange (Option 1)	Support Electronic Referral Loops by Sending Health Information					__/20
	Support Electronic Referral Loops by Receiving and Reconciling Health Information					__/20
Objective	Measure	Exclusion (Y/N)		Reporting (Y/N)		Points
Health Information Exchange (HIE) (Option 2)	HIE bi-directional exchange					__/40
Objective	Measure	Numerator		Denominator	Score	Points
Provider-to-Patient Exchange	Provide Patients Electronic Access to Their Health Information					__/40
Objective	Measure			Exclusion (Y/N)	Score	Points
Public Health and Clinical Data Exchange	Registry 1: Immunization Registry Reporting					__/10
	Registry 2: Electronic Case Reporting					

Bonus

Objective	Measure	Reporting (Y/N)	Bonus Points
E-Prescribing	Query of Prescription Drug Monitoring Program (PDMP)		__/10
Public Health and Clinical Data Exchange	Option to report one of the following public health agency or clinical data registry measures: <ul style="list-style-type: none"> Public Health Registry Clinical Data Registry Reporting Syndromic Surveillance Reporting 	Registry selected: _____	__/5

Improvement Activities Category

Save the documentation of the 2022 Improvement Activities (<https://qpp.cms.gov/mips/improvement-activities?py=2022>) completed during the minimum 90-day reporting period (or as specified in the activity description) in the same performance year.

- Save required documentation per the CMS MIPS Data Validation Criteria
- Include clinician name or practice name of who completed each activity and the reporting period when the activities were completed
Start Date: _____ End Date: _____
- Save documentation—both electronically and hard copy
- Location of saved electronic version: _____
- Save submission receipt following attestation on QPP portal, if attestation is necessary
- 2022 Improvement Activities Inventory (<https://qpp.cms.gov/resources/resource-library#:~:text=2022%20Improvement%20Activities%20Inventory>)

Name of Improvement Activity Completed	Activity #	Weight: High or Medium	Documentation Saved

Cost Category

- Cost measures are calculated by CMS based on administrative claims—no data submission required
- 2022 Cost Measures Requirements (<https://qpp.cms.gov/mips/cost?py=2022>)

Other—Optional

- Emails/supporting documentation of questions asked and answers received from the CMS QPP Service Center during 2022
- Screenshots of attestation screens in QPP portal