Policy Background
The Medicare Access and Children’s Health Insurance Program (CHIP) Reauthorization Act of 2015 (MACRA) introduced a new approach to clinician payment called the Quality Payment Program. This program rewards the delivery of high-quality patient care through Advanced Alternative Payment Models (Advanced APMs) and MIPS. The measures we are developing under this project are for potential use in the cost performance category, one of four performance categories being used in MIPS.

Summary of Measure Development Process So Far
The measure development process for these new episode-based cost measures for potential use in MIPS involves extensive clinician involvement and stakeholder feedback. It also builds on various public postings for CMS’s previous cost measure development work, the most recent of which was the posting of a draft list of episode groups and trigger codes in December 2016. These earlier episode group postings are available on the CMS MACRA feedback page.

Eight measures were selected and developed with extensive input from Clinical Subcommittees and informed by input received through a Technical Expert Panel and past public comments. In particular, 7 Clinical Subcommittees, composed of a total of 147 members affiliated with 98 professional societies, have provided detailed clinical input on preliminary measure specifications during in-person and webinar meetings convened between May and August of this year.

Field Testing Activities
The following materials will be released on October 16, 2017:

i. Confidential Field Test Reports
The field test reports for group practices and solo practitioners will be distributed through the CMS Enterprise Portal which CMS has used in the past for distributing Quality and Resource Use Reports.

   • If you do not already have an EIDM account, you can set one up and get access to a “Physician Quality and Value Programs” role in preparation for accessing your field test report by using this guide.

      o Please note: Field test reports are separate from QRUR reporting, although the same guide maybe used to set up an EIDM account.
      o If you are applying for a Security Official or an Individual Practitioner Role and the TIN/NPI combinations entered match with the Provider Enrollment, Chain and Ownership System (PECOS) information, then the role is automatically approved within a few minutes of the role request submission.
      o If an invalid TIN/NPI combination is entered more than three times the request is forwarded to the QualityNet help desk and the process has to be manually verified. This takes 24-48 hours.
      o If you are applying for a Group Representative or an Individual Practitioner Representative Role, the request is forwarded to your Security Official or Individual Practitioner and the time frame is based on how long it takes the Security Official or Individual Practitioner to approve your request.

   • If you think you may already have an existing EIDM account but aren’t sure if it is still active, you can check whether your account is still active in preparation for accessing your field test report by attempting to log in.
If it is unlocked or active and you’ve forgotten your password, you can use the “Forgot Password” function and reset your password by answering the Challenge Security questions that you set up at the time of initial EIDM account registration.

- If it is locked or inactive, you will need to contact the QualityNet Helpdesk at 1-866-288-8912/ TTY: 1-877-715-6222 to unlock it.

- **If you already have an active EIDM account but need access to a “Physician Quality and Value Programs” role**, please do so by using [this guide](#).
  - **Please note**: Field test reports are separate from QRUR reporting, although the same guide maybe used to set up an EIDM account.

- **If you already have an active EIDM account and have access to a “Physician Quality and Value Programs” role**, you should be able to access your field test report by logging into the EIDM portal.

### Supplemental Documentation
While not all clinicians will receive a confidential field test report given the clinical scope and attribution method for the 8 episode-based cost measures, we encourage all stakeholders to review and comment on the materials that will be publicly available, including a mock report, given the relevance that these materials will have to future development of other measures. The following materials will be available on the [MACRA page](#) on October 16:

- Draft Cost Measure Methodology for each measure
- Draft Measure Code Lists file which contains the medical codes used in constructing each measure
- Mock field test report
- Fact Sheet with an overview of field testing
- Frequently Asked Questions document

### Feedback Survey
All stakeholders, including those who have taken part in the Clinical Subcommittees during measure development, will be able to provide feedback through an online survey: [https://www.surveymonkey.com/r/macra-cost-measures-field-testing](https://www.surveymonkey.com/r/macra-cost-measures-field-testing). This survey will open on October 16, 2017 and close at midnight on November 15, 2017. All feedback questions in the survey will be optional, so you may answer as many or as few questions as you would like. The survey will also have an option to attach a PDF or Word document in addition to or instead of completing the questions. The link to the survey, which does not require a login, will also be included in the field test reports and supplemental documentation so that you will be able to easily navigate to it from the documents you review. We will take your comments into consideration for potential measure refinement and future measure development activities.