

Quality Payment PROGRAM

Merit-based Incentive Payment System (MIPS)

2020 Targeted Review Guide



Contents

*Already know what MIPS is?
Skip ahead by clicking the links in the Table of Contents.*

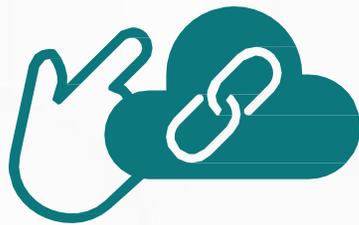
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How to Use This Guide

Purpose: The purpose of this guide is to describe what a targeted review is, provide step-by-step instructions on how to complete the request form, and explain what to do after submitting your request.



Please Note: This guide was prepared for informational purposes only and is not intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It is not intended to take the place of the written law, including the regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

This guide captures images of the process for opting-in or voluntarily reporting. The information captured in the screenshots may not be the exact language, workflow, or design that was finalized in the system on July 2021.

Table of Contents

The table of contents is interactive. Click on a chapter in the table of contents to read that section.



You can also click on the icon on the bottom left to go back to the table of contents.

Hyperlinks

Hyperlinks to the [QPP website](#) are included throughout the guide to direct the reader to more information and resources.



Introduction

What Is a Targeted Review?

Targeted Review is the process through which Quality Payment Program (QPP) participants can request that the Centers for Medicare & Medicaid Services (CMS) review the calculation of their 2022 MIPS payment adjustment factor(s) and, if applicable, their additional MIPS payment adjustment factor for exceptional performance.

Once 2022 MIPS payment adjustment factor(s) are released, you have **60 days** to request a targeted Review for the 2020 performance year.

2020 performance feedback will be available on August 2, 2021. The last day you can submit a targeted review for the 2020 performance year is **November 29, 2021**.

While you have 60 days to complete your request, you should request a targeted review **as soon as possible** if you identify an error with your MIPS final performance feedback and MIPS payment adjustment factor(s). This will help ensure that the correct payment adjustment is applied to your claims from the start of the 2022 payment year.

Where Is the Targeted Review Application Located?

You can access the Targeted Review application through your QPP account on qpp.cms.gov.

You need a **Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) account** to sign in and access the Targeted Review application.

Visit the [Quality Payment Program Access Guide \(ZIP\)](#) for instructions on how to create a HARP account. For additional information on HARP, check out the [HARP FAQs](#).

Who Can Request a Targeted Review

You can request a targeted review if you're a(n):

- MIPS eligible clinician
- Group
- Virtual group
- Alternative Payment Model (APM) participant (individual clinician, group, APM Entity)

Third party intermediaries and designated support staff can submit a targeted review on behalf of program participants.

What Can I Request a Targeted Review for?

As described in section 1848(q)(13)(A) of the Social Security Act, targeted review is limited to the calculation of the MIPS payment adjustment factor(s). You may request a targeted review if you find an error with your **2022 MIPS payment adjustment factor(s)** and associated **2020 MIPS performance feedback**.

While this isn't a comprehensive list, the following are examples of circumstances for which you may wish to request a targeted review.

- Your performance data was submitted under the incorrect Taxpayer Identification Number (TIN) or National Provider Identifier (NPI).
- You qualified for performance category reweighting because of a special status designation, Promoting Interoperability Hardship Exception, or Extreme and Uncontrollable Circumstances Exception that was incorrectly applied.

What Can't I Request a Targeted Review for?

There are statutory limitations on administrative and judicial review as described in section 1848(q)(13)(B) of the Social Security Act. As such, there will be no Targeted Review of the following:

- The methodology used to establish the amount of the MIPS payment adjustment factor, the amount of the additional MIPS payment adjustment factor, and the determination of such amounts.
- The establishment of the performance standards and the performance period.
- The identification of measures and activities specified for a MIPS performance category and information made public or posted on [Medicare Care Compare](#).
- The developed methodology used to calculate performance scores and the calculation of such scores, including the weighting of measures and activities under such methodology.

A targeted review request for any of these reasons will be denied.

See the following page for examples of **valid and invalid Targeted Review requests**.

Introduction

Examples of Valid Targeted Review Requests

Valid Reasons to Request a Targeted Review	
Denominator Reduction	"I submitted all of the quality measures available to me, but my denominator wasn't reduced."
Incorrect TIN/NPI	"My data was submitted under the wrong TIN or NPI."
Special Status Designation	"I have a special status that isn't reflected in my performance category score."
Incorrectly Scored with an Approved Hardship Exception	"I was scored in the [Promoting Interoperability] performance category but was approved for reweighting through a MIPS Promoting Interoperability Hardship Exception application."
QP Designation	"I was identified as a Qualifying APM Participant (QP), but I'm not a participant in an Advanced APM."
Missing Final Score for APM Participant	"I'm a participant in a MIPS APM, but I didn't receive a final score associated with my APM Entity."
Invalid Reasons to Request a Targeted Review	
Final Score and Payment Adjustment Location	"I want to know where I can find my final score and payment adjustment."
Low Payment Adjustment	"I want to know why my payment adjustment is so low."
Historical Benchmark	"I disagree with the historical benchmark used to determine my measure's score."
Misunderstanding of Scoring Policy	"I am confused about the scoring policy used to calculate my measure scores and final score."
Score Change	"My scores have changed since the submission period."
APM Incentive Payment Calculation	"My APM Incentive Payment was calculated incorrectly."

Have you experienced an issue with your data? Issues related to inaccurate, unusable, or otherwise compromised data don't fall under the scope of a targeted review and will be denied. If you're requesting performance category reweighting because of inaccurate, unusable, or otherwise compromised performance data, contact the [QPP Service Center](#).

Before You Begin



Overview

To prepare for the targeted review process, you should:

❑ Identify who will request the targeted review

The targeted review request will be accessible by the person who submits the request (“submitter”) and those whom the submitter adds as additional staff members.

You don't need a specific role (for example, security official) for your organization to submit a targeted review request.

❑ Obtain or access your HARP account

You must have a HARP account to complete and submit a targeted review request.

- **New Users:** [Register for QPP](#) to obtain your HARP credentials.
- **Returning Users:** Confirm that you can [sign in to QPP](#) with your HARP credentials.

❑ Gather identifying information and supporting documentation

- Collect the clinician, group, virtual group, or APM participants' identifying information
 - **Clinician** – NPI and associated practice's legal practicing name.
 - **Group** – The practice's TIN and legal practicing name.
 - **Individual clinician, group, or APM Entity participating in an APM** – APM identification number (ID).
 - **Approved virtual group** – Virtual Group ID.

Overview (Continued)

❑ Gather identifying information and supporting documentation (Continued)

- Collect any documentation that supports your targeted review request. **If possible, attach supporting documentation with your initial request.** Supporting documentation may include, but isn't limited to:
 - Extracts from the MIPS eligible clinician's Electronic Health Record (EHR)
 - Copies of performance data provided to a third party intermediary by the clinician or group
 - Copies of performance data submitted to CMS
 - QPP Service Center case numbers
 - Signed contracts or agreements between a clinician/group and a third party intermediary
 - Proof of your APM participation
 - Partial QP election forms

Documentation **may vary** based on the circumstances of the targeted review request.



How to Request a Targeted Review

Overview

This section of the guide provides step-by-step instructions on how to complete the Targeted Review Request application located within your QPP account on qpp.cms.gov.

Step 1: Sign in to qpp.cms.gov

Sign in to your **QPP account** using your HARP credentials on qpp.cms.gov.

- **Don't have a HARP account?** [Register for QPP](#) to obtain your HARP credentials.
- **Forgot your user ID or password?** [Recover your HARP credentials](#).
- **Looking for more information about HARP?** See the [HARP FAQs](#).

Quality Payment PROGRAM

MIPS
Merit-based Incentive Payment System

APMs
Alternative Payment Models

About
The Quality Payment Program

Sign In
Manage Account and Register

Home >

QPP Account

SIGN IN REGISTER

Sign in to QPP

USER ID
User ID

PASSWORD
Password

Show password

Forgot your user id or password? [Recover ID or reset password](#)

STATEMENT OF TRUTH

In order to sign in, you must agree to this: I certify to the best of my knowledge that all of the information that will be submitted will be true, accurate, and complete, and complete, if I become aware that any submitted information is not true, accurate, and complete, I will correct such information promptly. I understand that the knowing omission, misrepresentation, or falsification of any submitted information may be punished by criminal, civil, or administrative penalties, including fines, civil damages, and/or imprisonment.

Yes, I agree.

Sign in > Don't have an account? [Register](#)



Step 2: Select Targeted Review

Select **Targeted Review** from the left-hand navigation pane.

Tessa H

- Account Home
- Eligibility & Reporting
- Performance Feedback
- Doctors & Clinicians Preview
- Exceptions Application
- Targeted Review**
- Reports
- Manage Access
- Help and Support

Welcome back Tessa H!

Mar 17, 2021 Last Day to submit 2020 Preliminary Performance data

Mar 18, 2021 Preliminary Performance Feedback Available

May 31, 2021 Submission Window is open

Jun 25, 2021 Final Performance Feedback is available

Performance Year (PY) 2020 Submission Reporting Window is Now Open

[START REPORTING](#)

You are now able to start your reporting for the PY 2020 submission year.



How to Request a Targeted Review

Step 3a: Add New Targeted Review

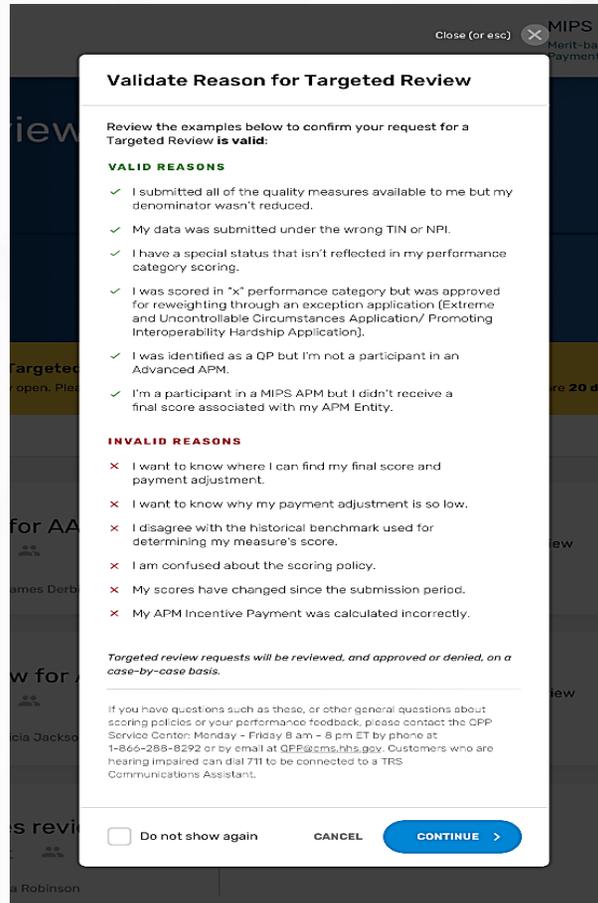
On the Targeted Review Progress Summary page, select **+ Add New Targeted Review** to create a new Targeted Review application.

The screenshot displays the 'Targeted Review' interface for Performance Year (PY) 2020. It features a timeline with two key dates: 'Aug 2, 2021 2020 Targeted Review Submission Period Opens' and 'Oct 1, 2021 2020 Targeted Review Submission Period Closes'. A yellow banner indicates that the 'Current Activity Period: 2020 QPP Targeted Review window is closed' and that the window will open on August 2, 2021. Below this, the 'YOUR TARGETED REVIEWS (0)' section is shown with a 'More Filters' dropdown and a prominent blue button labeled '+ ADD NEW TARGETED REVIEW'. A red box with an arrow points to this button, with a text box stating: 'Select + Add New Targeted Review to create a new request.' At the bottom of the page, there is a large dashed box containing a plus sign and the text 'ADD NEW TARGETED REVIEW'.



Step 3b: Valid and Invalid Targeted Review Models

Review the list of valid and invalid targeted review examples, then select continue.



Sign in to
qpp.cms.gov

Select Targeted
Review

Add New Targeted
Review & Review
Valid/Invalid
Targeted Review

Select Application
Type and Enter
Identifying
Information

Enter
Submission
Information

Select
Performance
Categories

Select Issue Type
and Attach
Supporting
Documentations

Certify and
Submit for
Review

How to Request a Targeted Review

Step 4a: Select Application Type

Select **the application type** that aligns with **how your data was submitted**¹ to MIPS for the 2020 performance year. Then select **Save & Continue**.

See the following page for more information on each application type and the required identifying information.

Select **Save** if you want to save your progress and complete your application later.



¹There are circumstances under which you'll request your targeted review at a different level than how your data was submitted. These circumstances include, but aren't limited to, requesting a targeted review of an eligible clinician's MIPS eligibility or eligibility to be scored under the APM scoring standard.

Step 4b: Provide Identifying Information

Enter the required **identifying information** based on which application type you choose. Each application type requires a different type of identifying information (for example, individual – NPI; group – TIN).

Note: You have the option to create a name (personal reference only) for your request by clicking the **pencil icon** next to your request on the Targeted Review Progress Summary page.

Application Type	Select if you're...	You will be asked to provide the following identifying information...
Individual	<ul style="list-style-type: none"> A MIPS eligible clinician who participated in MIPS individually by submitting data under your unique TIN/NPI combination. Requesting a targeted review of a clinician's MIPS eligibility. 	Clinician NPI *  <input type="text" value="e.g. 1234567890"/>
Group	<ul style="list-style-type: none"> A practice that participated in MIPS as a group by submitting aggregated data under a single TIN on behalf of all eligible clinicians in your practice. 	Group TIN *  <input type="text" value="e.g. 123456789"/>
Virtual Group	<ul style="list-style-type: none"> A part of an approved virtual group that participated in MIPS by submitting aggregate data under your virtual group ID on behalf of all TINs within the virtual group. 	Virtual Group ID *  <input type="text" value="e.g. ABCDE123456780"/> Application Title  <input type="text" value="Untitled"/> <small>For personal reference only. Will not be displayed on submitted application.</small>

Fields with a red asterisk (*) are required.



Step 4b: Provide Identifying Information (Continued)

Application Type	Select if you're...	You will be asked to provide the following identifying information...
APM Entity	<ul style="list-style-type: none"> A MIPS eligible clinician in an APM who submitted Promoting Interoperability or quality data as an individual for the APM Scoring Standard. Requesting a targeted review of a clinician's eligibility to be scored under the APM Scoring Standard. A practice in an APM that submitted Promoting Interoperability or quality data as a group for the APM Scoring Standard. An APM Entity that submitted data on behalf of all eligible clinicians in the entity. 	<p>APM Entity ID * ?</p> <input type="text" value="e.g. ABCDE123456780"/>
Unknown	<p>Select Unknown if you're unsure how you or the party requesting the review submitted data to MIPS.</p>	<p>Clinician NPI * ?</p> <input type="text" value="e.g. 1234567890"/>

Fields with a red asterisk (*) are required.



Step 5a: Submission Information – Individual, Group, Virtual Group, APM Entity Details

Verify the **pre-populated information** (for example, clinician's name, clinician type, group's name, etc.).

Note: The pre-populated information is pulled from the [QPP Participation Status Tool](#) using the identifying information (NPI, TIN, Virtual Group ID, APM ID) you entered during step 4.

The following screenshots will demonstrate the Targeted Review application workflow for an individual.

The screenshot displays a web form for a targeted review. At the top, it shows the ID '2020 TARGETED REVIEW ID: 355' and the name 'Chad Smith (Individual)'. A 'SAVE & CLOSE' button is in the top right. The main section is titled 'Submission Information' and contains several fields: 'Individual Details' with 'Clinician NPI' (0101947063) and 'Clinician's Name' (Chad Smith); 'Group Practice Name' (Better Business Health (TIN: *****5630)) with a dropdown arrow; and 'Service Desk Ticket Number' (e.g. CS0606124 [Optional]).

Callout boxes provide instructions:

- Top left: "You can update or correct identifying information or the application type." (points to the NPI field)
- Bottom left: "Enter the QPP Service Center ticket number related to your targeted review." (points to the Service Desk Ticket Number field)
- Top right: "Safely save your progress and return later to complete your request." (points to the SAVE & CLOSE button)
- Right side: "Select the applicable **group practice name** from the drop-down menu. If the practice isn't listed, select **Not Listed** and enter the practice's TIN." (points to the Group Practice Name dropdown)



How to Request a Targeted Review

Step 5b: Submission Information – Submitter Details

Enter your preferred **contact information** and **identify your relationship** with the party for whom you are requesting a targeted review.

Enter your **phone number** with or without dashes.

Note: You must enter a valid area code.

Enter the **email address** associated with your HARP account.

Note: If your email address has changed, please update your profile information within your HARP account.

2020 TARGETED REVIEW ID: 355 VIEW/ADD COMMENTS | All changes saved SAVE & CLOSE

Chad Smith (Individual)

Submitter Details

Contact Phone Number * ?

Phone Number 866-288-8292 Ext. (Optional)

Contact Email Address * ?

Email qpp@cms.hhs.gov

Submitter/Third Party Intermediary Relationship * ?

Please specify ^

Please specify

Clinician

Consultant

Physician Staff

Registry / QCDR

EHR Vendor

Other

Select the **relationship option** that best represents your relationship to the party requesting a targeted review.

Note: If you select **Other**, you'll be prompted to describe your relationship.

If you select **Registry / Qualified Clinical Data Registry (QCDR)**, we'll pull information from the party's API token.



Step 5c: Submission Information – Additional Access

You can provide the email address(es) of additional staff or representatives who should receive notifications about the status of the request.

- If you enter an email address **that's associated with an individual's HARP account**, that person will be able to access the Targeted Review application and will receive notifications about the status of the request when they sign in to qpp.cms.gov with their HARP credentials.
- If you're submitting an application on behalf of an individual, group or virtual group, users with access to the practice or virtual group on qpp.cms.gov will be able to access the application **only** if you add the email associated with their HARP account.

Enter additional staff member email addresses separated by a comma.

2020 TARGETED REVIEW ID: 355 [VIEW/ADD COMMENTS](#) | ✓ All changes saved [SAVE & CLOSE](#)

Chad Smith (Individual)

Additional Access

Additional Staff Access Email(s)

Hit enter/comma after each entry to add multiple



Step 6: Performance Categories

Select the **performance categories** that were affected by the issue(s) you experienced.

Allows those who are connected with, and who have a role in, the organization to easily **access your final scores and performance feedback.**

2020 TARGETED REVIEW ID: 355 [VIEW/ADD COMMENTS](#) | ✓ All changes saved [SAVE & CLOSE](#)

Chad Smith (Individual)  

Performance Categories

Select which Performance Categories were affected by your issue.

[View Current Performance Feedback Scores](#) 

Performance Categories *

- Quality 
- Improvement Activities 
- Promoting Interoperability 
- Cost 
- Additional Awarded Bonus Points 

Select any affected **performance categories.**



Step 7a: Issue Type Selection

Select the applicable **issue type(s)** that best describe the issue(s) you identified with your 2022 payment adjustment factor(s) and associated 2020 final performance feedback. Then provide a **detailed explanation** of the issue(s) you identified.

2020 TARGETED REVIEW ID: 355 | VIEW/ADD COMMENTS | All changes saved | SAVE & CLOSE

Chad Smith (Individual)

Issue Selection

Select the most applicable criteria that describes the issue you, or those you are requesting on behalf of, experienced. Complete the additional fields that populate after your selection. When applicable, please attach any supporting documentation that may support your claim.

Issue Selection *

- Submission ?
- Eligibility and/or special status determination(s) ?
- Extreme and uncontrollable circumstances ?
- Measure/activity issues ?
- General/additional issues ?

Please provide the specific details outlining the circumstance(s) of this Targeted Review request. *

Enter detailed description

6000 characters remaining

Select applicable **issue type(s)**.

Provide a **detailed explanation** of the issue(s) you experienced.



Step 7a: Issue Type Selection (Continued)

Examples of each issue type are described in the table below. This isn't an exhaustive list.

Issue Type	Example
Submission	Your practice reported to MIPS as a group, and your vendor included the wrong TIN in the file they submitted to MIPS on your behalf.
Eligibility and/or Special Status Determination(s)	You're a hospital-based MIPS eligible clinician who qualified for automatic reweighting of the Promoting Interoperability performance category to 0%. When looking at your 2020 MIPS performance feedback, you identified that the Promoting Interoperability performance category wasn't reweighted.
Extreme and Uncontrollable Circumstances	You are a solo practitioner who submitted data as an individual for 2 performance categories. However, the 2 categories for which you didn't submit data weren't reweighted to 0%, and you received a category score for all of the performance categories scored for the 2020 performance period.
Measure/Activity Issues	You are a part of a small practice of speech-language pathologists that reported to MIPS as a group. Your group submitted quality performance data on the 3 measures in the Speech-Language Pathology specialty measure set, and the quality performance category score denominator should have been lowered to 30 points, reflecting the 3 quality measures available. When looking at your group's 2020 MIPS performance feedback, you identified that your quality performance category score denominator wasn't lowered.
General Issues	You are a MIPS eligible clinician who qualified for facility-based measurement scoring. When looking at your 2020 MIPS performance feedback, you identified that you didn't automatically receive a quality performance category score based on your facility's Fiscal Year 2022 Hospital Value-based Purchasing program score.



How to Request a Targeted Review

Step 7b: Attach Supporting Documentation

Attach your **supporting documentation** to your Targeted Review application. Then select **Submit for Review**.

Supporting information may include, but isn't limited to:

- Extracts from the MIPS eligible clinician's EHR.
- Copies of performance data provided to a third-party intermediary by the clinician or group.
- Copies of performance data submitted to CMS.
- QPP Service Center case numbers.
- Signed contracts or agreements between a clinician/group and a third party intermediary.
- Proof of your APM participation.
- Partial QP election forms.

You don't need to encrypt your supporting documentation that contains personally identifiable information (PII) or personal health information (PHI) because the targeted review application is within your secure QPP account on qpp.cms.gov.

Please attach, if available, any **documentation** that may support your claim. Use the Drag & Drop feature or browse your computer to locate and applicable upload files.

If available, please attach any supporting documentation that may support your claim.

Drag & Drop

files to attach or [browse](#)

(.pdf, .jpg, .jpeg, .png, .doc, .docx, .xls, .xlsx, .msg)

WITHDRAW
SUBMIT FOR REVIEW >

Select **Submit for Review** once you have completed your request and are satisfied with it.

Don't have your supporting documentation yet? Check out your options on the following page.



How to Request a Targeted Review

Step 7b: Attach Supporting Documentation (Continued)

We strongly recommend that you attach your supporting documentation to your Targeted Review application as soon as possible.

If your supporting documentation isn't available when you complete the application, you can:

- **Option 1:** Save your application progress, attach your supporting documentation, and then submit your targeted review.
- **Option 2:** Submit your application and use the [Comments](#) function to submit supporting documentation to the reviewer of your request.

Note: If the reviewer of your targeted review requests supporting documentation, you'll have **30 days** to provide the requested documentation, or the targeted review request will be denied.



Step 8: Certify and Submit for Review

Read the disclosure. Then select **Certify & Submit**.

TARGETED REVIEW ID: 17

Close (or esc) X

SAVE & CLOSE

Certify and Submit for Review

General Notice

No Quality Payment Program Targeted Review may be granted unless this application is completed.

Disclosures

Submission of this Targeted Review Application is voluntary. Failure to provide sufficient information to identify the clinician or group may result in processing delays or denial of the Targeted Review Application. A Targeted Review Application may also be delayed or denied due to insufficient information regarding the nature of the request to review the calculation of the MIPS payment adjustment factor under section 1848(q)(6)(A) of the Act and, as applicable, the calculation of the additional MIPS payment adjustment factor under section 1848(q)(6)(C) of the Act applicable to such MIPS eligible clinician or group for a year.

Certification of Clinician

I certify that the information contained in this Targeted Review Application is true, accurate, and complete to the best of my knowledge, information, and belief. If I become aware that any information contained in this application is not true, accurate, and complete, I will inform CMS promptly. I understand that:

- The Targeted Review Application for the Quality Payment Program that I requested may result in a change in the amount the clinician will be paid from Federal funds.
- By filing the Targeted Review Application, I am submitting information that will be used to assess a claim for Federal funds.

By submitting this Targeted Review Application, I am certifying that the details entered are correct to the best of my knowledge. Furthermore, I am submitting this request as if I physically signed and submitted a hard copy of this form.

CLOSE CERTIFY & SUBMIT >

Certify that you **read the disclosure** and then submit your request.

Sign in to
qpp.cms.gov

Select Targeted
Review

Add New Targeted
Review & Review
Valid/Invalid
Targeted Review

Select Application
Type and Enter
Identifying
Information

Enter
Submission
Information

Select
Performance
Categories

Select Issue Type
and Attach
Supporting
Documentations

Certify and
Submit for
Review

Receive Confirmation Notification

Once your request is complete, you'll be brought back to the **Targeted Review Progress Summary** page. You will see a **pop-up message** confirming that you successfully submitted your review.

You'll also receive a confirmation email notifying you that your application was successfully received.

Quality Payment PROGRAM

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Application submitted successfully and is now Pending Review

Targeted Review

Performance Year (PY) 2020

Aug 2, 2021 2020 Targeted Review Submission Period Opens

Oct 1, 2021 2020 Targeted Review Submission Period Closes

Current Activity Period: 2020 QPP Targeted Review window is open
The window for Targeted Review is now open. Please submit your request for review by October 1, 2021 8PM EST. There are 86 days left.

YOUR TARGETED REVIEWS (4) More Filters + ADD NEW TARGETED REVIEW

Sort by: Last Updated

TARGETED REVIEW ID: 355 Chad Smith (Individual)	NPI: 0101947063 TIN: *****630 Status: Submitted - In Review	VIEW DETAILS WITHDRAW
---	---	--------------------------

Pop-up confirmation message.

Withdraw your request before it is approved/ denied.

Note: Withdrawing your request is not reversible. You will need to submit a new request.

The request status will appear as **Draft in Progress, Submitted – In Review, Approved, Denied, or Withdrawn.**

How to Request a Targeted Review

Receive Confirmation Notification (Continued)

Example of the **email confirmation** you receive upon a successful submission.

Quality Payment
PROGRAM

Targeted Review Submitted Successfully

Targeted Review ID: 355

NPI: 0101947063

Clinician: Chad Smith

TIN: *****5630

Practice Name: Better Business Health

Request Date: July 7, 2021

Targeted Review ID: 355 submitted by Tessa H is now in review.
Thank you for submitting a Targeted Review request.

[VIEW SUBMISSION](#)



How to Monitor a Targeted Review

View Targeted Review Details

You can monitor all your targeted review requests for the 2020 performance year on the **Targeted Review Progress Summary** page. Select **View Details** for additional information about a specific request.

Sign in to gpp.cms.gov regularly to stay updated on the status of your requests and any communications you receive from the reviewer.

List of your targeted review requests.

You can rename your targeted review by clicking the **pencil icon**.

You can download a copy of your targeted review by clicking **Download PDF**.

The screenshot shows the 'Targeted Review' interface for Performance Year (PY) 2020. It features a navigation sidebar on the left with icons for home, dashboard, favorites, clipboard, refresh, filters, and help. The main content area has a blue header with the title 'Targeted Review' and 'Performance Year (PY) 2020'. Below the header is a timeline showing submission periods: 'Aug 2, 2021 2020 Targeted Review Submission Period Opens' and 'Oct 1, 2021 2020 Targeted Review Submission Period Closes'. A yellow banner indicates the 'Current Activity Period: 2020 QPP Targeted Review window is open' with a note that the window closes on October 1, 2021, with 86 days left. Below this is a section for 'YOUR TARGETED REVIEWS (4)' with a 'More Filters' dropdown and an '+ ADD NEW TARGETED REVIEW' button. A table lists reviews, with the first one selected. The details for this review show: 'TARGETED REVIEW ID: 355', 'Chad Smith (Individual)', 'Last Updated < 1 minute ago by Tessa H', 'NPI: 0101947063', 'TIN: *****5630', 'Status: Submitted - In Review', and buttons for 'VIEW DETAILS' and 'WITHDRAW'.

Select + **Add New Targeted Review** to create another request.

Select **View Details** to view information on your request and to communicate with the reviewer who is evaluating your request.

Communicate with Reviewer

Select **View Details** and use the **Comments** function to **communicate with the reviewer** and submit **supporting documentation** for your request.

Important Note: Use the Comments function to communicate with the reviewer about your request instead of contacting the QPP Service Center. You'll receive an email notification if a comment has been added by your reviewer.

Helpful Hint: Sign in to your QPP account regularly to ensure that you're staying current with your targeted review status and communications from your reviewer.

2020 TARGETED REVIEW ID: 355 [VIEW/ADD COMMENTS](#) | [CLOSE](#)

Chad Smith (Individual) [✎](#) [↓](#)

Submission Information * Required

Status: [🕒 Submitted - In Review](#)

COMMENTS(0) [+ ADD NEW](#) [🗑️](#)

Individual Details

Clinician NPI	Clinician's Name	Clinician Type
0101947063	Chad Smith	Doctor of Medicine

Add Comment

B I U G [☰](#) [☰](#) [☰](#) [☰](#) Normal [⌵](#)

Start typing your comment...

[📎 ATTACH FILES](#)

[CANCEL](#) [SEND](#)

Select **+ Add New** to communicate with the reviewer of your request.

Submit supporting documentation using **Attach Files**.



Frequently Asked Questions

Do I need to submit a targeted review request for each clinician?

In general, you'll complete the targeted review request form at the level at which you, or those on whose behalf you're requesting a targeted review, participated and reported data to the QPP for the 2020 performance year. However, under certain circumstances, you'll request your targeted review at a different level, such as if you're requesting a targeted review of an eligible clinician's MIPS eligibility or eligibility to be scored under the APM scoring standard.

How long do I need to keep documentation regarding my targeted review?

You must retain all documentation associated with your targeted review request for 6 years from the end of the performance year. Therefore, for the 2020 performance year, you must retain your documentation through December 31, 2026.

When can I expect an outcome regarding my request?

We carefully evaluate each request on a case-by-case basis, along with the supporting documentation you provide. The length of time it takes to complete our evaluation will vary depending on the complexity of your request.

We encourage you to sign in regularly to your QPP account on qpp.cms.gov to view the status of your targeted review and to stay updated on communications with your reviewer. If you have questions about your request, click **View Details** and communicate with your reviewer via the comments pane.

In addition to monitoring your targeted review on qpp.cms.gov, you'll receive an email confirming that we received your targeted review request and an email notifying you about the outcome of your request.



Help and Version History

Where Can You Go for Help?

Contact the Targeted Review application reviewers with questions regarding your request on qpp.cms.gov.

Contact the Quality Payment Program at 1-866-288-8292, Monday through Friday, 8 a.m.-8 p.m. Eastern Time (ET) or by e-mail at: QPP@cms.hhs.gov.

- Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.
- To receive assistance more quickly, please consider calling during non-peak hours—before 10 a.m. and after 2 p.m. ET.

Connect with your [local Technical Assistance organization](#). We provide no-cost technical assistance to **small, underserved, and rural practices** to help you successfully participate in the Quality Payment Program.

Visit the Quality Payment Program [website](#) for other [help and support](#) information, to learn more about [MIPS](#), and to check out the resources available in the [Quality Payment Program Resource Library](#).

Additional Resources

[QPP](#) and the [QPP Resource Library](#) house fact sheets, measure specifications, specialty guides, technical guides, user guides, helpful videos, and more.

- [2020 How MIPS Eligibility is Determined](#)
- [2020 Eligibility Determination Periods and Snapshots](#)
- [2020 MIPS Eligibility and Participation User Guide \(PDF\)](#)
- [2020 MIPS Quick Start Guide \(PDF\)](#)
- [2020 MIPS Scoring Guide \(PDF\)](#)
- [2020 APM Scoring Standard Guide \(PDF\)](#)

Version History Table

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Date	Description
9/27/2021	Updated to reflect extended targeted review deadline.
7/28/2021	Original Version