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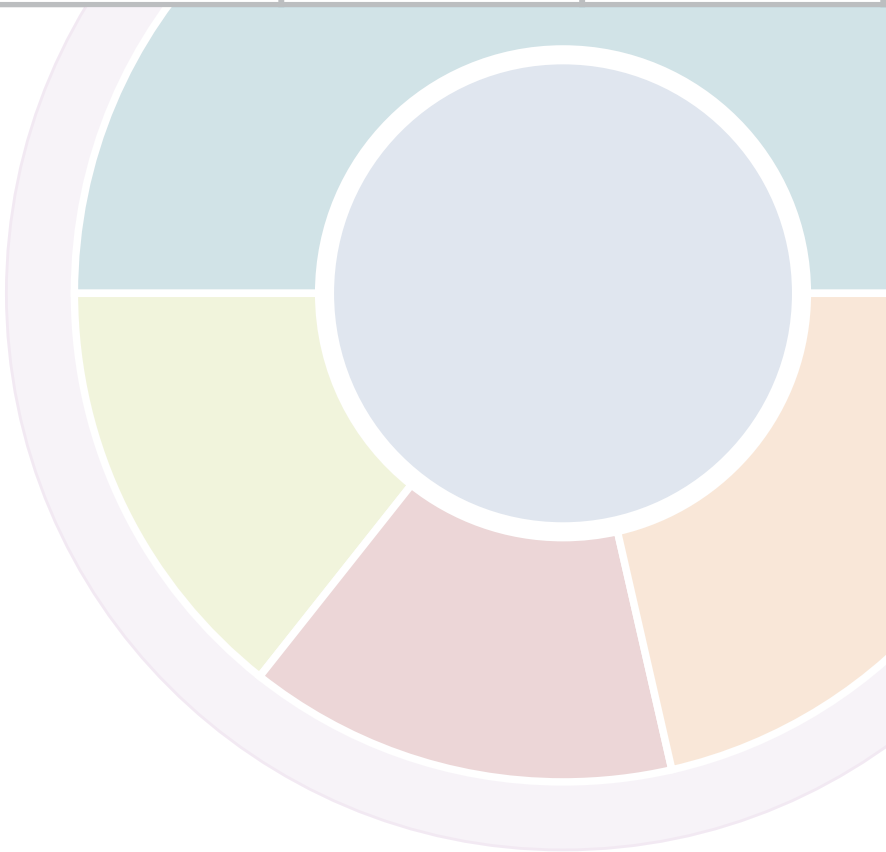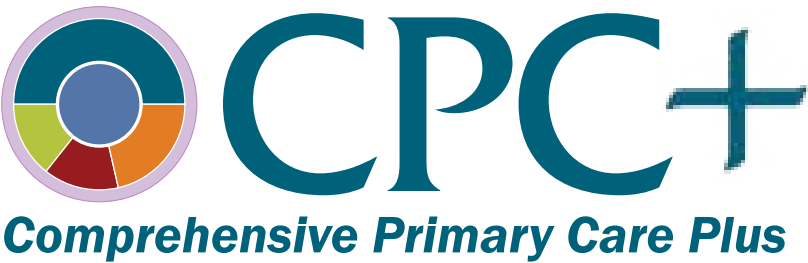| Table of Contents	Submission Checklists	About Your CPC+ QRDA III File	Submitting your QRDA III File	Troubleshooting Your File	CPC+ File Validations	Helpful Resources

CPC+
Comprehensive Primary Care Plus

CPC+ eCQM REPORTING GUIDE FOR THE 2019 MEASUREMENT PERIOD

VERSION 2.0

December 23, 2019

▶ Before You Begin

▶ Skip to Step-by-Step Reporting Instructions for QRDA III through the QPP Website

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

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The following Submission Checklist (Table 1) displays activities practices should complete to ensure they are able to:

1. Submit their electronic clinical quality measure (eCQM) results via Quality Reporting Document Architecture (QRDA) III file
    NOTE: Upon logging into the CPC+ Practice Portal, your practice will still see the "eCQM" tab. However, when you have selected "PY – 2019" in the "Yr/Qtr" dropdown box, you may see a message banner that states "Reporting not available for this program year" and this functionality may be in read only mode as practices must submit their eCQM results via QRDA III.

2. Meet the CPC+ eCQM reporting and health IT requirements for the 2019 Measurement Period (MP).

For the 2019 MP (**January 1 to December 31, 2019**), the submission period for CPC+ Practices is scheduled for **January 2, 2020 to February 29, 2020**. All participating CPC+ practices (regardless of dual participation in another Centers for Medicare & Medicaid Services program) must report eCQMs to CPC+. Note: On the QPP Website, you may see a submission period of January 2, 2020 to April 2, 2020. This period is to report quality data for MIPS only.

This document also includes an About Your CPC+ QRDA III File section and a Troubleshooting your CPC+ QRDA III File section, which contain important information to help your practice successfully submit your 2019 MP eCQMs.

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Table 1. Pre-submission Checklist

eCQM Reporting Requirements

Please review the 2019 eCQM Reporting Requirements and confirm with your health IT vendor that your practice meets the following requirements.

Ensure your QRDA III file contains all data elements for the eCQMs.
Confirm your practice can report your eCQM results at the CPC+ Practice-Site level.
Verify your practice's health IT system meets 2015 Edition Certified Electronic Health Record Technology (CEHRT). You can use the Certified Health IT Product List (CHPL) Website to learn certification details about your health IT vendor(s).
Confirm your practice is using the most updated eCQM versions published in May 2018).
Ensure your practice can submit 12 months of continuous data. If you have transitioned health IT vendors, you may need to consider adopting additional health IT in order to meet this requirement.

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Table 2. eCQM Submission Checklist

QRDA III File Review
Verify with your health IT vendor that your QRDA III file conforms to the 2019 CMS QRDA III Implementation Guide.
Confirm that both eCQMs (CMS122v7 and CMS165v7) are included within your QRDA III file.
Review your CPC+ practitioner roster to confirm that the correct NPIs are listed for all CPC+ providers. Please note that upon submission of your QRDA III file, you will receive a warning message if the correct NPIs are not listed.
QRDA III File Submission
Determine whether your practice or certified health IT vendor will submit your practice's QRDA III file to the QPP Website.
Upload your QRDA III file to the QPP Website.*
Work with your health IT vendor to resolve any submission errors.
Retain a copy of the QRDA III file for at least 10 years.
*Please note that if you submit multiple CPC+ QRDA III files for your CPC+ practice during the eCQM reporting period, every upload of a new CPC+ QRDA III will replace the previous CPC+ QRDA III file. CPC+ uses the last successful submission to determine your practice's eCQM reporting compliance and performance-based incentive payment (PBIP) calculation.

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About Your CPC+ QRDA III File

This section provides a high-level overview of QRDA III files, including the types of information that are reported in your practice's CPC+ QRDA III file, how to identify CPC+ data within the file, and other important information.

QRDA III File Overview

QRDA is a document format that creates a standard method to report eCQM results in a structured, consistent format. Health Level Seven International (HL7), an ANSI-accredited standards development organization, develops and publishes an industry-wide QRDA III implementation guide. By design, the base QRDA III standard is not program specific.[1]

CMS publishes an annual QRDA III implementation guide, sample files, and other documentation to provide technical guidance for implementing the standard for reporting to CMS quality reporting programs, including CPC+.[2] The 2019 CMS QRDA III Implementation Guide for Eligible Clinicians and Eligible Professionals (referred to hereafter as the 2019 CMS QRDA III IG) is a valuable resource for health IT vendors when implementing QRDA III files for their CPC+ practices and is the definitive source for technical specifications for the development of QRDA III files. The information contained in this CPC+ eCQM Reporting Guide is meant to assist you with understanding some of the data contained in your CPC+ QRDA III file, but CPC+ practices and health IT vendors must meet all other technical specifications detailed in the 2019 CMS QRDA III IG in the creation of the file.

By frequently reviewing eCQM results and communicating with your practice's health IT vendor(s), CPC+ practices can resolve any errors prior to the 2019 eCQM reporting deadline (February 29, 2020). We strongly recommend that CPC+ practices submit their CPC+ QRDA III file as early as possible within the reporting period to address any unanticipated issues.

CPC+ QRDA III File Standards

In addition to base QRDA III file standards specified by HL7, CMS has established additional standards that are specific to CPC+. For CPC+, your QRDA III file should include:

- CMS Program Name of CPCPLUS

- APM Entity Identifier, which is equivalent to your CPC+ Practice ID

---

[1] QRDA III files are technical documents and must conform to many requirements not discussed in this CPC+ eCQM Reporting Guide.

[2] The 2019 CMS QRDA III Implementation Guide for Eligible Clinicians and Eligible Professionals specifies further constraints on the HL7 QRDA III Implementation Guide Release 1 STU 2.1 ⧉. Please note that the HL7 QRDA III Implementation Guide is available for download only to registered HL7 users.

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- Practice site address

- NPI and TIN combinations, as indicated in your practice's CPC+ practitioner roster

- Measurement Period start date of 20190101

- Measurement Period end date of 20191231

- Performance rate for each measure, reported in a decimal (i.e., 1 is equivalent to 100 percent)

- All eCQM data elements (i.e., Initial Population, Denominator, Denominator Exclusions, Numerator) for each measure, reported with the appropriate universally unique identifier (UUID) for each

- Supplemental Data Elements for each measure population

Failure to meet the above standards, or any other QRDA III standard, will result in an error or warning message when you submit your CPC+ QRDA III file on the QPP Website (see the CPC+ QRDA III File Submission Validations section) and your CPC+ QRDA III file may fail submission. There is no standard file naming convention for CPC+ QRDA III files.

Identifying Data in Your CPC+ QRDA III File

To better understand the data contained in your CPC+ QRDA III file, your practice may choose to reach out to your health IT vendor to determine if they are able to provide you with a "human readable" version of your practice's QRDA III file. Alternatively, practices may opt to identify the data in their CPC+ QRDA III file by reviewing the technical file.

The following sections include high-level instructions that practices may find helpful to identify data within the QRDA III file. These instructions are not intended to cover all data that must be included in a QRDA III file, and, as noted in the QRDA III File Overview section, separate implementation guides (including the 2019 CMS QRDA III IG and the base HL7 QRDA III IG) specify the full QRDA III standards (including technical requirements) to which the QRDA III file must conform.

How do I find information in my CPC+ QRDA III file?

Each piece of data contained in a QRDA III file is identified by an object identifier (OID), which is a unique string of decimal numbers. Searching for an OID is a quick way to identify data within your CPC+ QRDA III file. In your file, the OID will be displayed in quotes as a "root;" the corresponding "extension" contains the data (see example in Figure 1).

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Figure 1. Example QRDA III Root and Extension

```
<id root="2.16.840.1.113883.19.5" extension="223344"/>
```

If you follow the instructions below and identify potential issue(s) in your CPC+ QRDA III file, please work with your health IT vendor to confirm the issue(s), and correct the issue(s) if necessary. Any issues with your CPC+ QRDA III file will receive an error or warning upon upload to the QPP Website (see the CPC+ QRDA III File Submission Validations section).

Viewing Your CPC+ QRDA III File

Your CPC+ QRDA III file should have an .XML file extension. You may open the file using a variety of software, including XML viewer or reader software or a free text editor (such as Atom or Notepad++). The file contents may display with slightly different formatting, depending on the software you use to open and view the file. Data in your file may appear slightly different from the examples in this CPC+ eCQM Reporting Guide.

CMS Program Name

The CMS Program Name for CPC+ is "CPCPLUS" (see Figure 2).

1. Search for the OID for CMS Program Name, 2.16.840.1.113883.3.249.7, within your QRDA III file.

2. The corresponding extension must be "CPCPLUS".

Figure 2. CPC+ QRDA III CMS Program Name Example

```
<informationRecipient>
    <intendedRecipient>
        <id root="2.16.840.1.113883.3.249.7" extension="CPCPLUS"/>    ← CMS Program Name
    </intendedRecipient>                                                 OID for CMS
</informationRecipient>                                                  Program Name
```

If the corresponding extension contains a value other than "CPCPLUS", such as "MIPS_INDIV" or "MIPS_GROUP", your QRDA III file is not properly defined for CPC+.

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APM Entity Identifier and Practice Site Address

For CPC+, the APM Entity Identifier should be your CPC+ Practice ID. You must also report your practice site address in the file (see Figure 3).

1. Search for the OID for APM Entity Identifier, 2.16.840.1.113883.3.249.5.1, within your QRDA III file.

2. The corresponding extension must be your CPC+ Practice ID.

3. In this section, you should also see your practice site address within the <addr> element.
   NOTE: The layout of your practice site address may vary from that shown in the example in Figure 3.

Figure 3. CPC+ QRDA III APM Entity Identifier and Practice Site Address Example

```
<participant typeCode="LOC">
    <associatedEntity classCode="SDLOC">
        <id root="2.16.840.1.113883.3.249.5.1"        ← OID for APM Entity Identifier
            extension ="T2OR1234"                      ← CPC+ Practice ID
            assigningAuthorityName ="CMS-CMMI"/>
        <code code="394730007"
            displayName ="healthcare related organization"
            codeSystem ="2.16.840.1.113883.6.96"
            codeSystemName ="SNOMED-CT"/>
        <addr>
            <streetAddressLine>123 Healthcare St</streetAddressLine>    ┐
            <city>Norman</city>                                          │ CPC+ Practice Site
            <state>OK</state>                                            ├ Address within <addr>
            <postalCode>73019</postalCode>                               │ Element
        </addr>                                                          ┘
    </associatedEntity>
</participant>
```

CPC+ NPI and TIN Combinations

Your CPC+ QRDA III file should include all NPI and TIN combinations, as indicated in your practice's CPC+ practitioner roster (see Figure 4).

1. Search for the OID for NPI, 2.16.840.1.113883.4.6, within your QRDA III file.

   a. For the CPC+ NPI/TIN combination(s), the OID must be within the <performer> element.

   b. The corresponding extension should be an NPI from your CPC+ practitioner roster.

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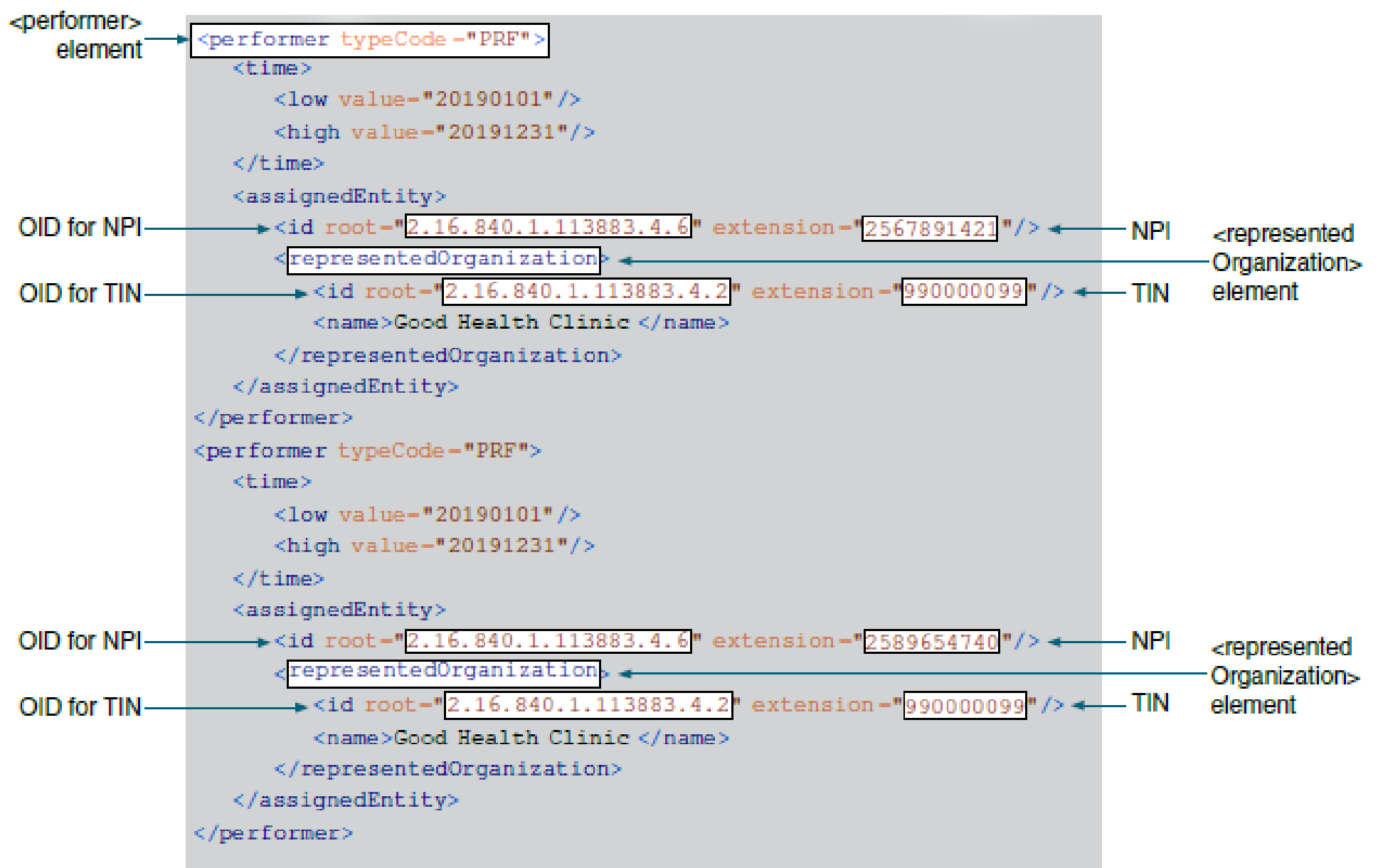| Table of Contents | Submission Checklists | About Your CPC+ QRDA III File | Submitting your QRDA III File | Troubleshooting Your File | CPC+ File Validations | Helpful Resources |

2. Below the NPI in the <performer> element, you should see the OID for TIN, 2.16.840.1.113883.4.2, within a <representedOrganization> element.

   a. The corresponding extension should be the appropriate TIN for the NPI, as indicated on your CPC+ practitioner roster.

NOTE: You may also find the OID for NPI without the associated TIN. For example, this is acceptable if the NPI is listed in the section with an <assignedAuthor> tag instead of <performer> (see Figure 5).

3. Continue searching for the OID for NPI. You should find an NPI/TIN combination in a <performer> element for each NPI/TIN combination included in your CPC+ practitioner roster.

Figure 4. CPC+ NPI and TIN Combinations Example

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Figure 5. NPI without Associated TIN Example

```
<author>
    <time value="20200211061231"/>
    <assignedAuthor>                              ◄────── <assignedAuthor> tag
        <id root="2.16.840.1.113883.4.6"          ◄────── OID for NPI with no
        extension ="2567891421"                            associated TIN
        assigningAuthorityName ="NPI"/>
        <assignedPerson>
            <name>
                <given>Trevor</given>
                <family>Phillips</family>
            </name>
        </assignedPerson>
        <representedOrganization>
            <id root="2.16.840.1.113883.19.5" extension="223344"/>
            <name>Good Health Clinic </name>
        </representedOrganization>
    </assignedAuthor>
</author>
```

CPC+ Measurement Period Start and End Dates

For CPC+, the Measurement Period Start Date should be "20190101" and the Measurement Period End Date should be "20191231" (see Figure 6). Other date formats are not acceptable.

1. Search for the OID for Reporting Parameters, 2.16.840.1.113883.10.20.17.3.8, within your QRDA III file. In this section, you should find <effectiveTime> "low" and "high" values listed.

    a. The low value should be "20190101".

    b. The high value should be "20191231".

Figure 6. CPC+ Measurement Period Start and End Dates Example

```
<act classCode="ACT" moodCode="EVN">
    <templateId root="2.16.840.1.113883.10.20.17.3.8"/>  ◄─── OID for Reporting Parameters
    <id root="D5E68228-5760-11E7-1256-09173F13E4C5"/>
    <code code="252116004"
        codeSystem="2.16.840.1.113883.6.96"
        displayName="Observation Parameters"/>
    <effectiveTime>
        <low value="20190101"/>                          ◄─── <effectiveTime> low
        <high value="20191231"/>                                and high values
    </effectiveTime>
</act>
```

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CPC+ eCQM Data

Both measures in the CPC+ measure set (CMS122v7 and CMS165v7) must be reported in the same CPC+ QRDA III file. For each measure, your practice must report all required eCQM data elements (Table 3) and the performance rate (reported as a decimal).

Table 3. Required CPC+ eCQM Data Elements and Population Codes

CMS ID	Initial Population (IPOP)	Numerator (NUMER)	Denominator (DENOM)	Denominator Exclusions (DENEX)	Performance Rate
122v7	X	X	X	X	X
165v7	X	X	X	X	X

Each measure must be reported with the appropriate version-specific measure ID. In addition, each required eCQM data element/population must be reported with the appropriate UUID. The version specific measure IDs and UUIDs are updated with each performance period. Please see Table 17 of the 2019 CMS QRDA III IG for a complete list of these identifiers.

1. Search for the version specific measure ID for CMS122v7, as listed in Table 17 of the 2019 CMS QRDA III IG, within your QRDA III file.

   a. If the version specific measure ID exists, CMS122v7 is included in your QRDA III file (see Figure 7).

For each eCQM, your practice must report:

- All required eCQM data elements/populations

- UUID for each data element/ population

- Version specific measure ID

NOTE: Your QRDA III file may contain an optional narrative section. If it does, you may find the version specific measure ID listed twice in the file. If the version specific measure ID exists in the narrative section only, your QRDA III file will fail validation.

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Figure 7. CMS122v7 Version Specific Measure ID Example

```
<reference typeCode="REFR">
    <externalDocument classCode="DOC" moodCode="EVN">
        <id root="2.16.840.1.113883.4.738"
            extension="40280382-6258-7581-0162-9249c8ab1447"/>  ←——— CMS122v7 Version
        <code code="57024-2"                                            Specific Measure ID
            codeSystem ="2.16.840.1.113883.6.1"
            codeSystemName ="LOINC"
            displayName ="Health Quality Measure Document" />
        <text>Diabetes: Hemoglobin A1c (HbA1c) Poor Control ( &gt; 9%)</text>
    </externalDocument>
</reference>
```

2. After locating the version specific measure ID within the file, to identify the performance rate, scroll down or search for the CMS Performance Rate for Proportion Measure Template OID, 2.16.840.1.113883.10.20.27.3.25 (see Figure 8).

   a. The performance rate for each measure is required to be associated with the numerator UUID for the measure. Once you locate the OID, the numerator UUID will be located in the same section.

   b. The performance rate for the measure will also be located in the same section and should be reported as a decimal between 0 and 1.

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Figure 8. CMS122v7 Performance Rate Example

```
<component>
    <observation classCode="OBS" moodCode="EVN">
        <templateId root="2.16.840.1.113883.10.20.27.3.30" extension="2016-09-01"/>
        <templateId root="2.16.840.1.113883.10.20.27.3.14" extension="2016-09-01"/>
        <templateId root="2.16.840.1.113883.10.20.27.3.25" extension="2018-05-01"/>     OID for CMS
                                                                                        Performance Rate
        <code code="72510-1"                                                            for Proportion
            codeSystem="2.16.840.1.113883.6.1"                                          Measure Template
            codeSystemName="LOINC"
            displayName="Performance Rate"/>
        <statusCode code="completed"/>
        <value xsi:type="REAL" value=".888889"/>                                        CMS122v7
        <reference typeCode="REFR">                                                     Performance Rate
            <externalObservation classCode="OBS" moodCode="EVN">
                <id root="BD70E166-D478-41A4-B8C8-041CE9F75850"/>                        CMS122v7 NUMER
                <code code="NUMER"                                                       UUID
                    codeSystem="2.16.840.1.113883.5.4"
                    codeSystemName="ActCode"
                    displayName="Numerator"/>
            </externalObservation>
        </reference>
    </observation>
</component>
```

3. Scroll up or down or search for each data element/population code (IPOP, DENOM, DENEX, NUMER) (see Figure 9).

   a. In the same section, you will see a numeric value that represents the data element/ population value.

   b. Repeat for the remaining data element/population codes.

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Figure 9. CMS122v7 IPOP Example

```
<observation classCode="OBS" moodCode="EVN">
   <templateId root="2.16.840.1.113883.10.20.27.3.5" extension="2016-09-01"/>
   <templateId root="2.16.840.1.113883.10.20.27.3.16" extension="2018-05-01"/>
   <code code="ASSERTION"
        codeSystem="2.16.840.1.113883.5.4"
        codeSystemName="ActCode"
        displayName="Assertion"/>
   <statusCode code="completed"/>
   <value xsi:type="CD"
         code="IPOP"          ◄———————  Population
         codeSystem="2.16.840.1.113883.5.4"      Code for
         codeSystemName="ActCode"/>             Initial
   <entryRelationship typeCode="SUBJ" inversionInd="true">    Population
      <observation classCode="OBS" moodCode="EVN">            (IPOP)
         <templateId root="2.16.840.1.113883.10.20.27.3.3"/>
         <code code="MSRAGG"
              codeSystem="2.16.840.1.113883.5.4"
              codeSystemName="ActCode"
              displayName="rate aggregation" />
         <statusCode code="completed"/>
         <value xsi:type="INT" value="1000"/> ◄———  CMS122v7
         <methodCode code="COUNT"                    IPOP Value
                 codeSystem="2.16.840.1.113883.5.84"
                 codeSystemName="ObservationMethod"
                 displayName="Count"/>
      </observation>
   </entryRelationship>
```

4. Also scroll up or down or search for each data element/population UUID for CMS122v7, as listed in Table 17 of the 2019 CMS QRDA III IG.

   a. The correct data element/population UUID are required for your QRDA III file (see Figure 10).

   b. Repeat for the remaining data element/population UUIDs for the measure.

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Figure 10. CMS122v7 IPOP UUID Example

```
<reference typeCode="REFR">
    <externalObservation classCode="OBS" moodCode="EVN">
        <id root="A15C0CC7-E072-4D9F-BB29-80429C6335DB" />    ← UUID for CMS122v7 Initial Population (IPOP)
    </externalObservation>
</reference>
```

5. Repeat steps 1 through 4 for CMS165v7.

> For the 2019 CPC+ Measurement Period, CMS122v7 and CMS165v7 are the only two required eCQMs; however, the QPP Website will accept your CPC+ QRDA III file if you include additional eCQMs in the file. If your QRDA III file includes additional measures, CPC+ will only use CMS122v7 and CMS165v7 to calculate PBIP.

Supplemental Data Elements

This CPC+ eCQM Reporting Guide does not include information on identifying SDEs within your QRDA III file. For more information, please see the 2019 CMS QRDA III IG.

Promoting Interoperability and Improvement Activities Data

You must submit Promoting Interoperability/Improvement Activity performance category data through a separate file independent of a CPC+ QRDA III file. If you include either of these data, you will receive a warning when you submit your file on the QPP Website.

1. Search for the OID for PI, 2.16.840.1.113883.10.20.27.2.5, within your QRDA III file.

2. Search for the OID for IA, 2.16.840.1.113883.10.20.27.2.4, within your QRDA III file.

3. If either of these OIDs exist within your QRDA III file, you will receive a warning upon submission (see the CPC+ QRDA III File Submission Validations section).

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Submitting your QRDA III File

The QPP Website is available at https://qpp.cms.gov. This site allows you to submit your QRDA III file for CPC+. Please ensure that you are using your HCQIS Access Roles and Profile (HARP) account information to sign into qpp.cms.gov. New users who need to sign in to qpp.cms.gov will create their account in the HARP system, and all users will request and manage access to organizations by signing in to qpp.cms.gov. Please review the Quality Payment Program Access User Guide for more information on gaining access to submit on behalf of your CPC+ Practice Site.

Steps 1-8 below correspond to the red circles or rectangles you will see in the accompanying figures. *Please note: these figures are for illustration only and may vary slightly from the screens on the QPP Website*.

Step 1: Navigate to the QPP Website.

The QPP Website is available at https://qpp.cms.gov. This site allows you to submit your QRDA III file for CPC+ (Figure 11). Select Sign In on the upper right corner.

Figure 11. QPP Website Landing Page

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Step 2: Sign into your account. Once you select Sign In, enter your User ID and Password in the requested fields, check 'Yes, I agree' next to the Statement of Truth and click Sign In (Figure 12).

Figure 12. QPP Website Sign In

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Step 3: Once you are signed in, you will see the Account Dashboard. Click Manage Access on the left-hand navigation pane to ensure you have permissions for your APM Entity (CPC+ Practice) (Figure 13).

Returning users will see a list of organizations they are connected to in a tabbed format by organization type. If the list of your connected organizations and roles are correct, you will not need to take any further action unless you need to connect to another organization. New users will be prompted to connect to an APM Entity (CPC+ Practice).

Figure 13. QPP Website – Manage Access

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Step 4: Submit your CPC+ QRDA III file. Select the Start Reporting button under the Eligibility and Reporting section on the dashboard (Figure 14).

Figure 14. QPP Website – Eligibility & Reporting

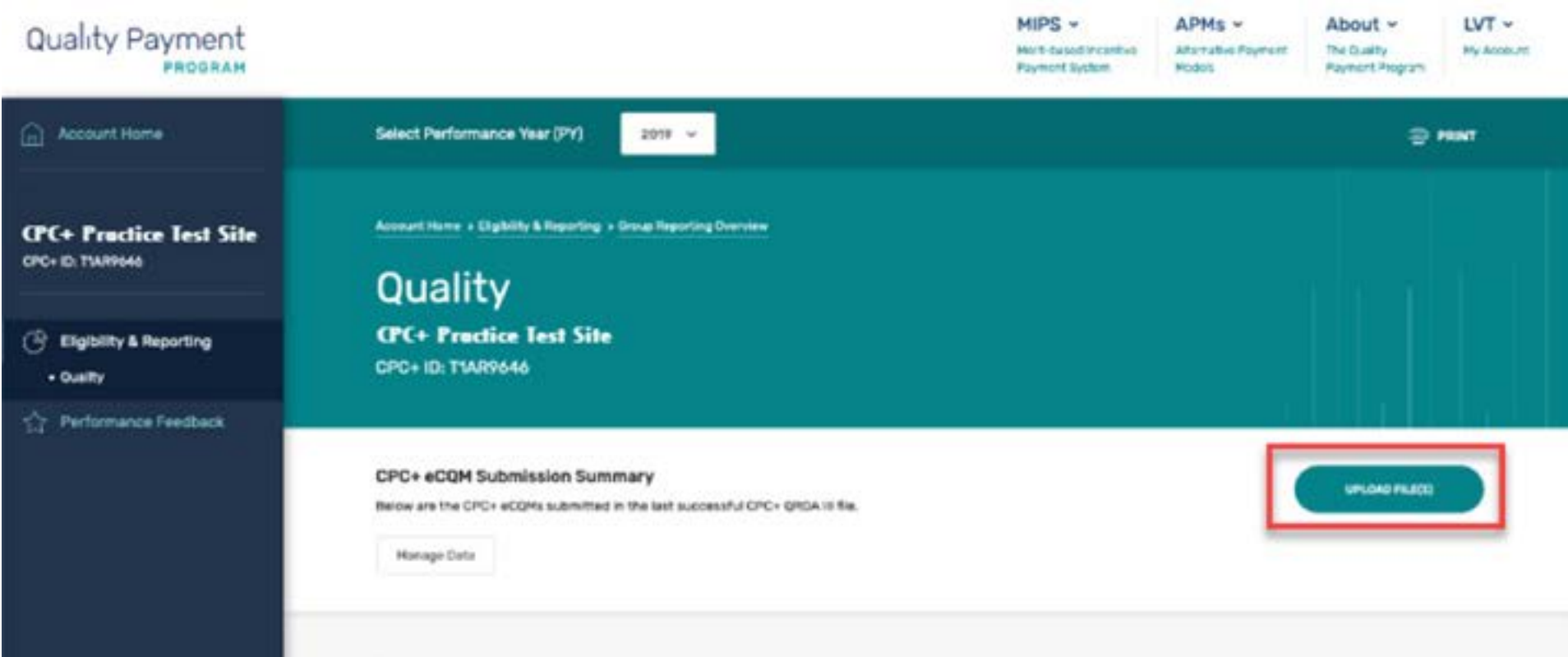CPC+ eCQM REPORTING GUIDE FOR THE 2019 MEASUREMENT PERIOD

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Step 5: Select Upload File(s) from the Quality dashboard (Figure 15). **Please note that if you submit multiple CPC+ QRDA III files for your APM Entity (CPC+ Practice) during the eCQM reporting period, every upload of a new CPC+ QRDA III will replace the previous CPC+ QRDA III file.** CPC+ uses the last successful submission to determine your practice's reporting compliance and performance-based incentive payment (PBIP) calculation.

Figure 15. QPP Website – Upload File(s)

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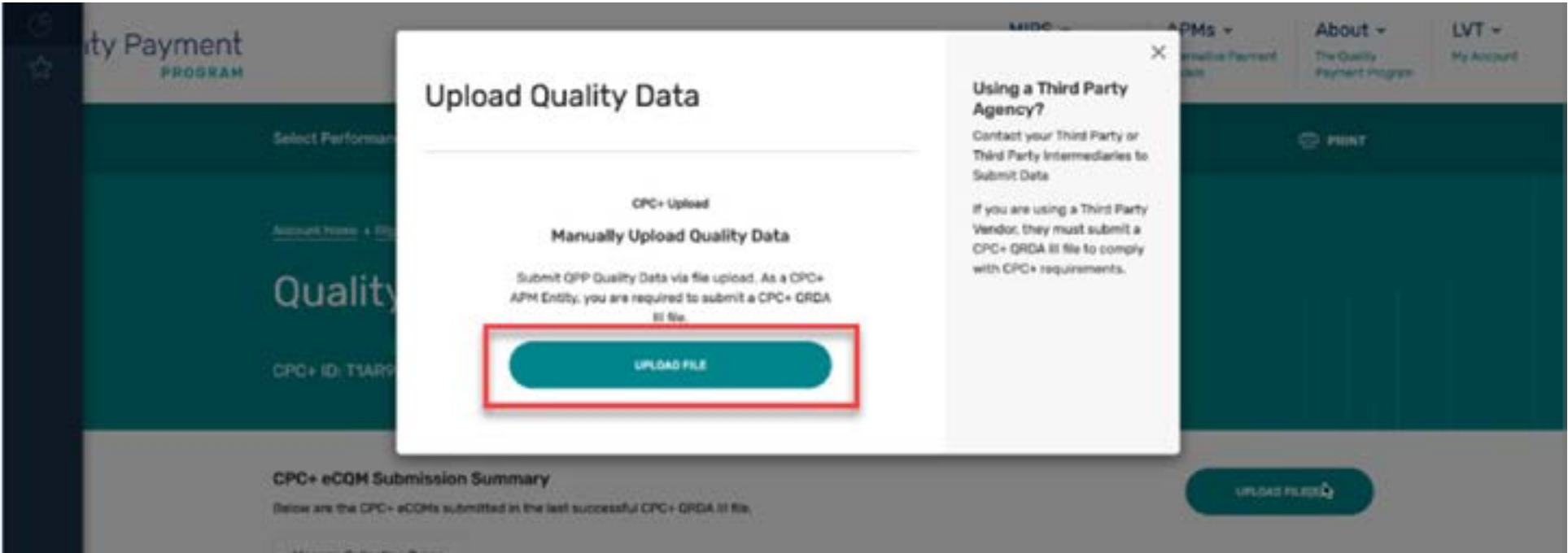| Table of Contents | Submission Checklists | About Your CPC+ QRDA III File | Submitting your QRDA III File | Troubleshooting Your File | CPC+ File Validations | Helpful Resources |

Step 6: Click Upload File on the pop-up screen (Figure 16).

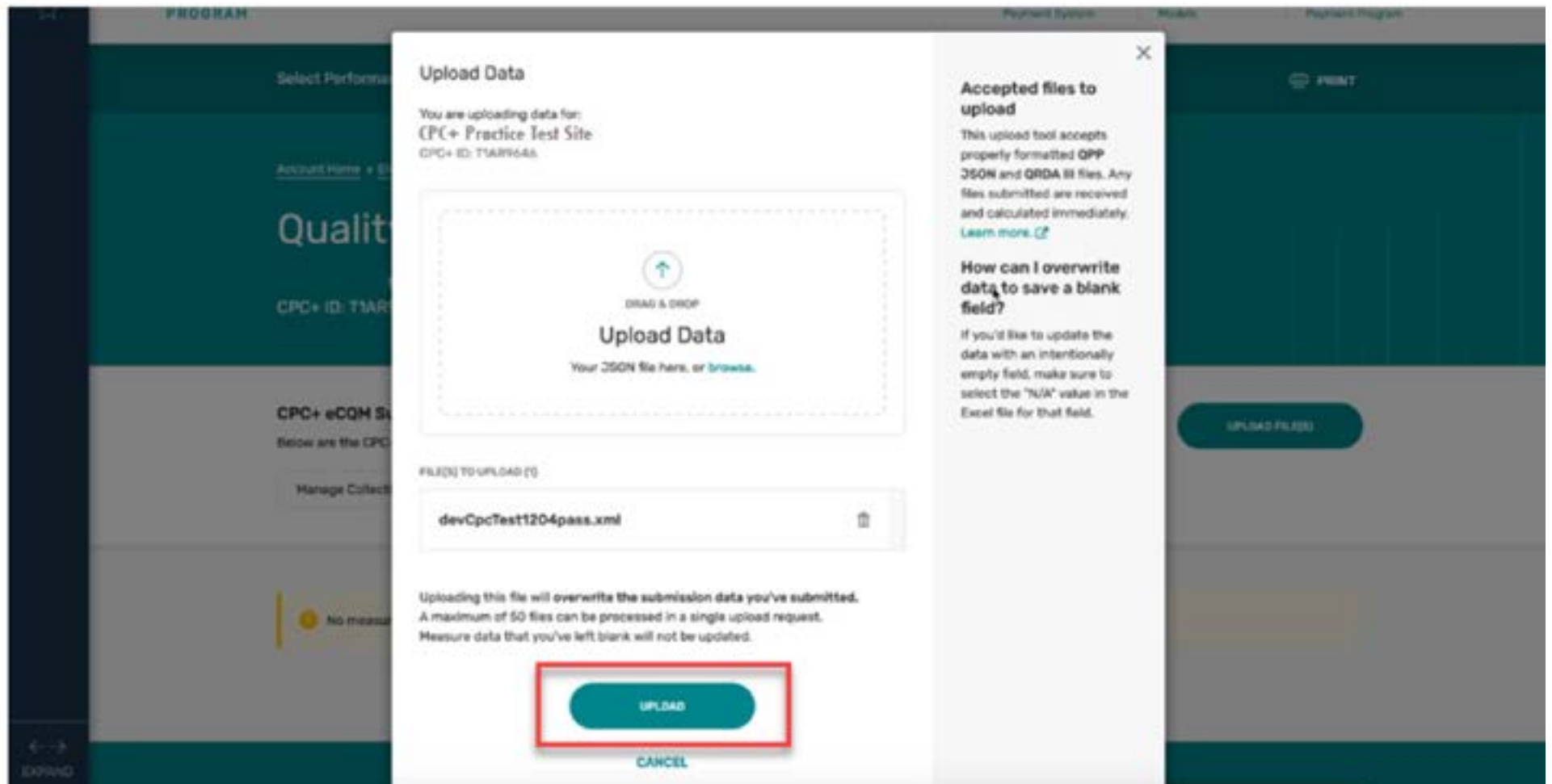**Figure 16. QPP Website – Upload Quality Data**

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Step 7: Drag and drop the file(s) in the screen below and select Upload (Figure 17). Please note you can submit for all the CPC+APM Entity (CPC+ Practice) (CPC+ Practice IDs) that you are connected to by uploading multiple files in the screen below.

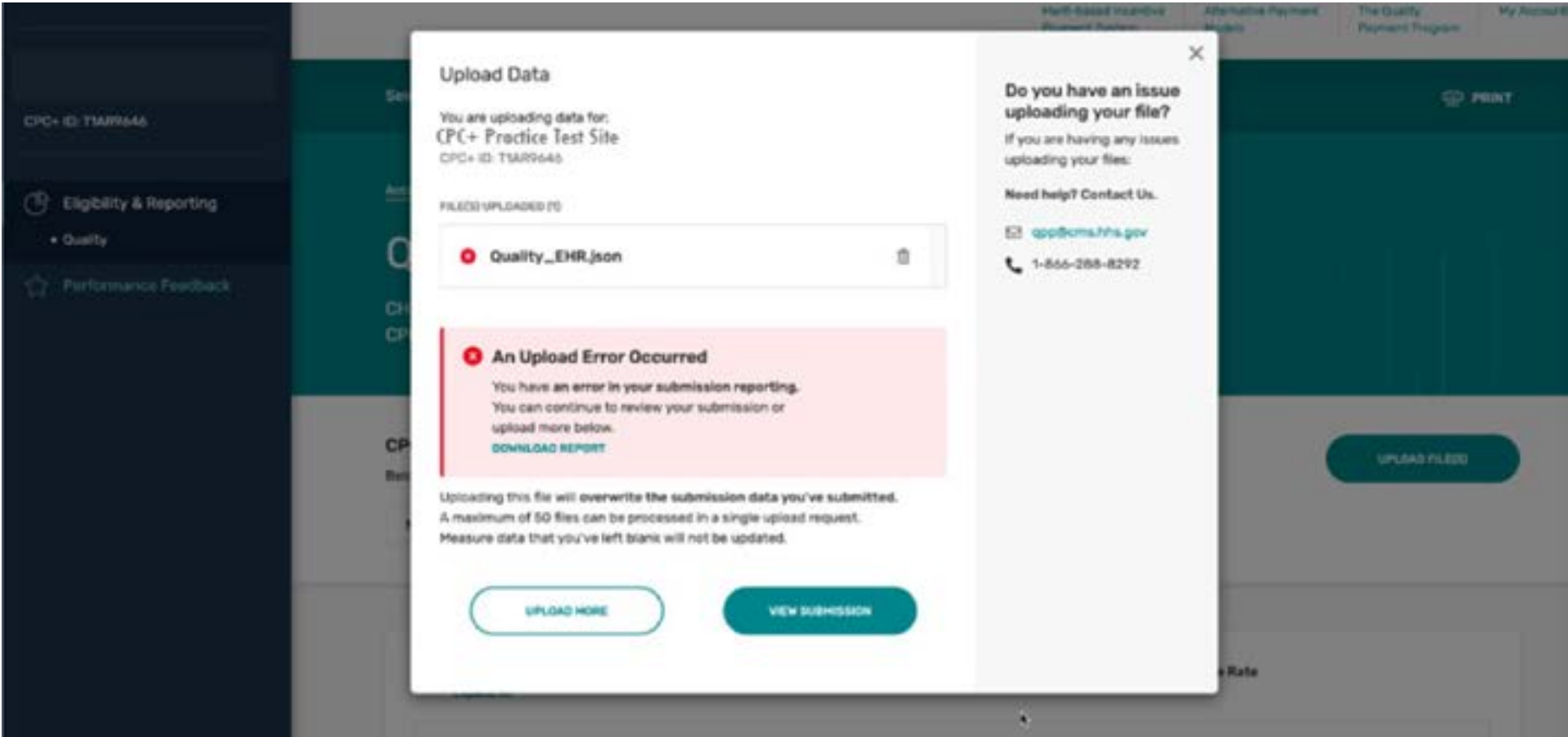**Figure 17. QPP Website – Upload Data**

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Step 8: If your CPC+ QRDA III file has any Schematron or validation errors, they will appear on this screen (Figure 18). Please note that the file has not been submitted if you receive error messages and any errors must be addressed in order to successfully submit your CPC+ QRDA III file. You may download the report for more information on your error message(s). The option to download the report is only available when this popup window is open. If you want to download your report you must do so before closing the pop-up window.

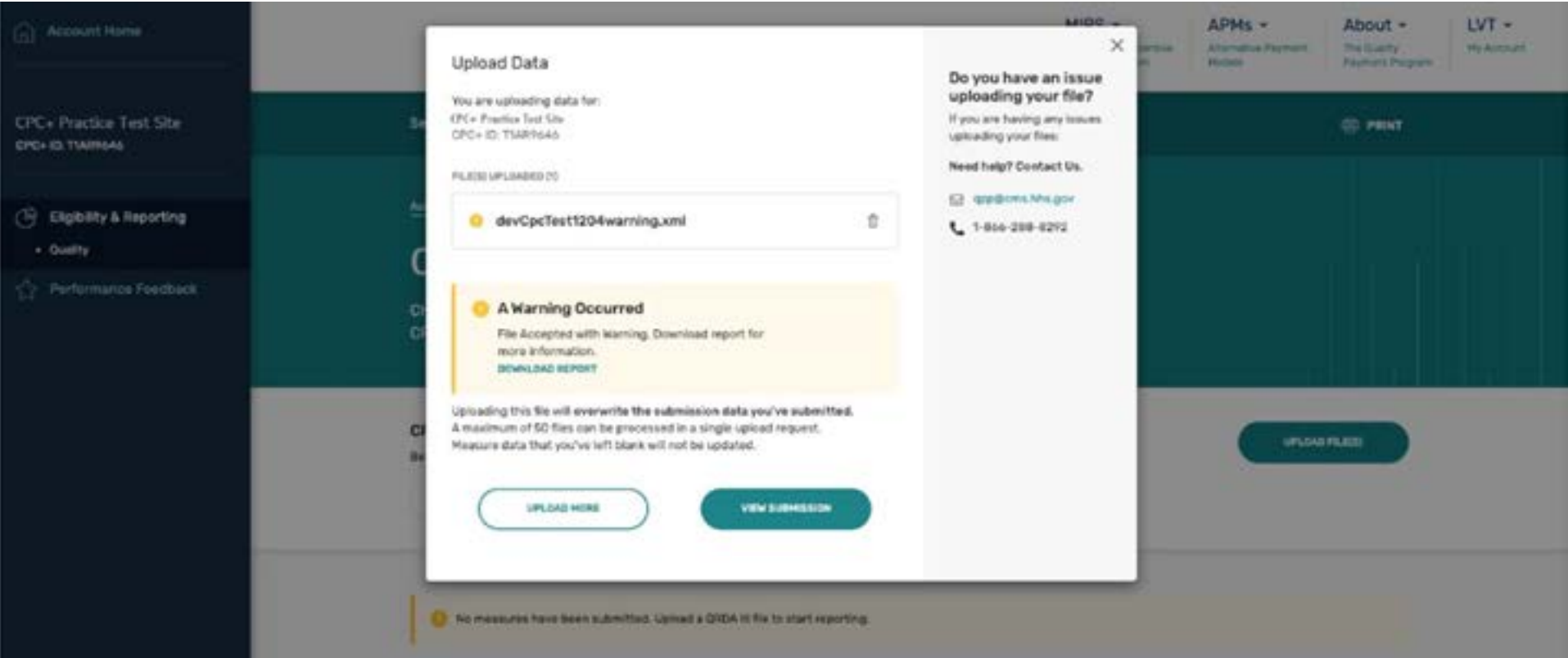**Figure 18. QPP Website – Error Messages**

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Step 9: If you receive a warning message after submitting your CPC+ QRDA III file, it will appear on this screen (Figure 19). Please note that warning messages are informational messages only and do not prevent the submission of your QRDA III file. You may download the report for more information on your warning message(s). The option to download the report is only available when this pop-up window is open. If you want to download your report you must do so before closing the pop-up window.

Figure 19. QPP Website – Warning Messages

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Step 10: After you successfully submit the file, you will be able to review your submission summary by selecting View Submission on this screen (Figure 20). Please note that if you upload CPC+ QRDA III files on the behalf of multiple APM Entity (CPC+ Practice), you will have to navigate to each APM Entity (CPC+ Practice) individual CPC+ eCQM Submission Summary to confirm.

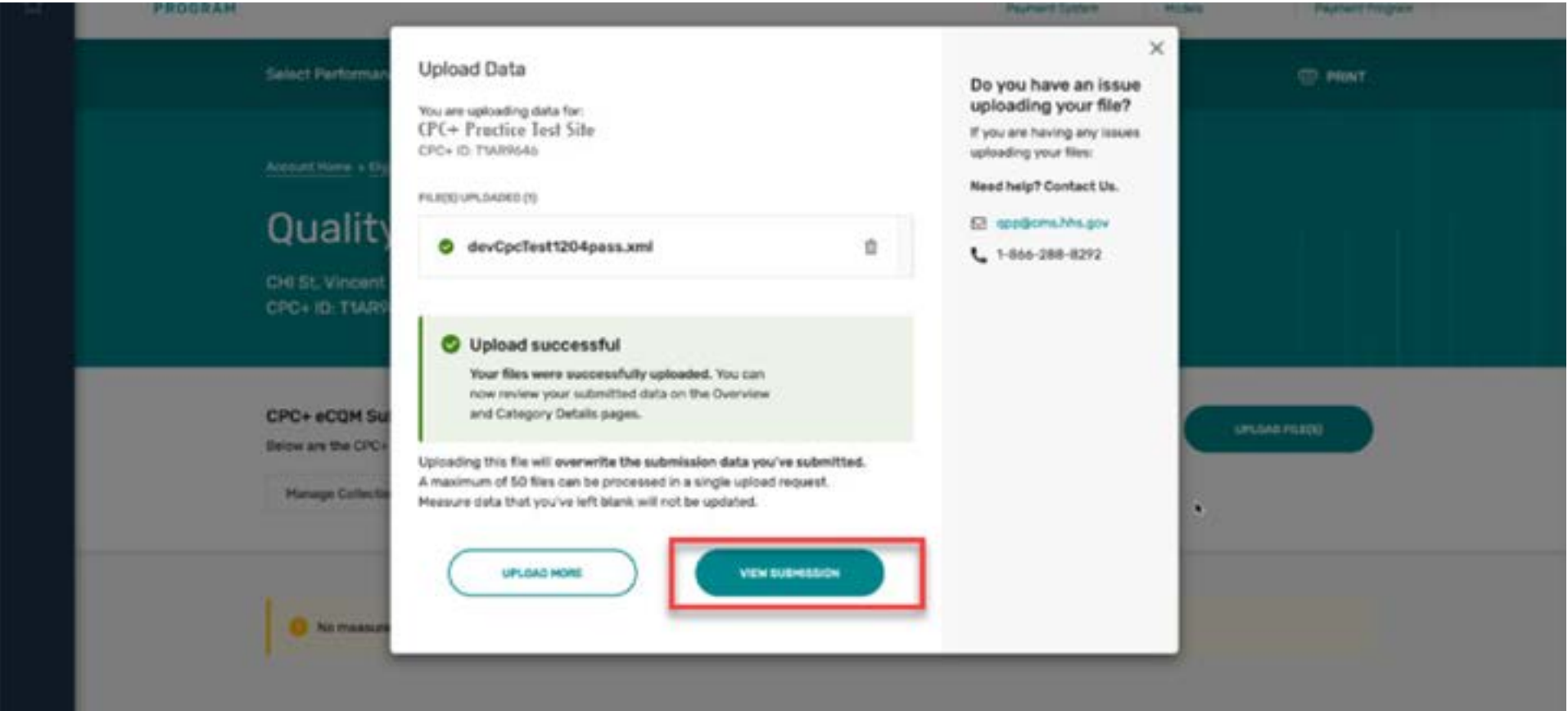**Figure 20. QPP Website – Upload Successful**

Step 11: Review the CPC+ eCQM Submission Summary (Figure 21). At this point you can confirm your eCQM results by reviewing the CPC+ eCQM Submission Summary.

Figure 21. CPC+ eCQM Submission Summary

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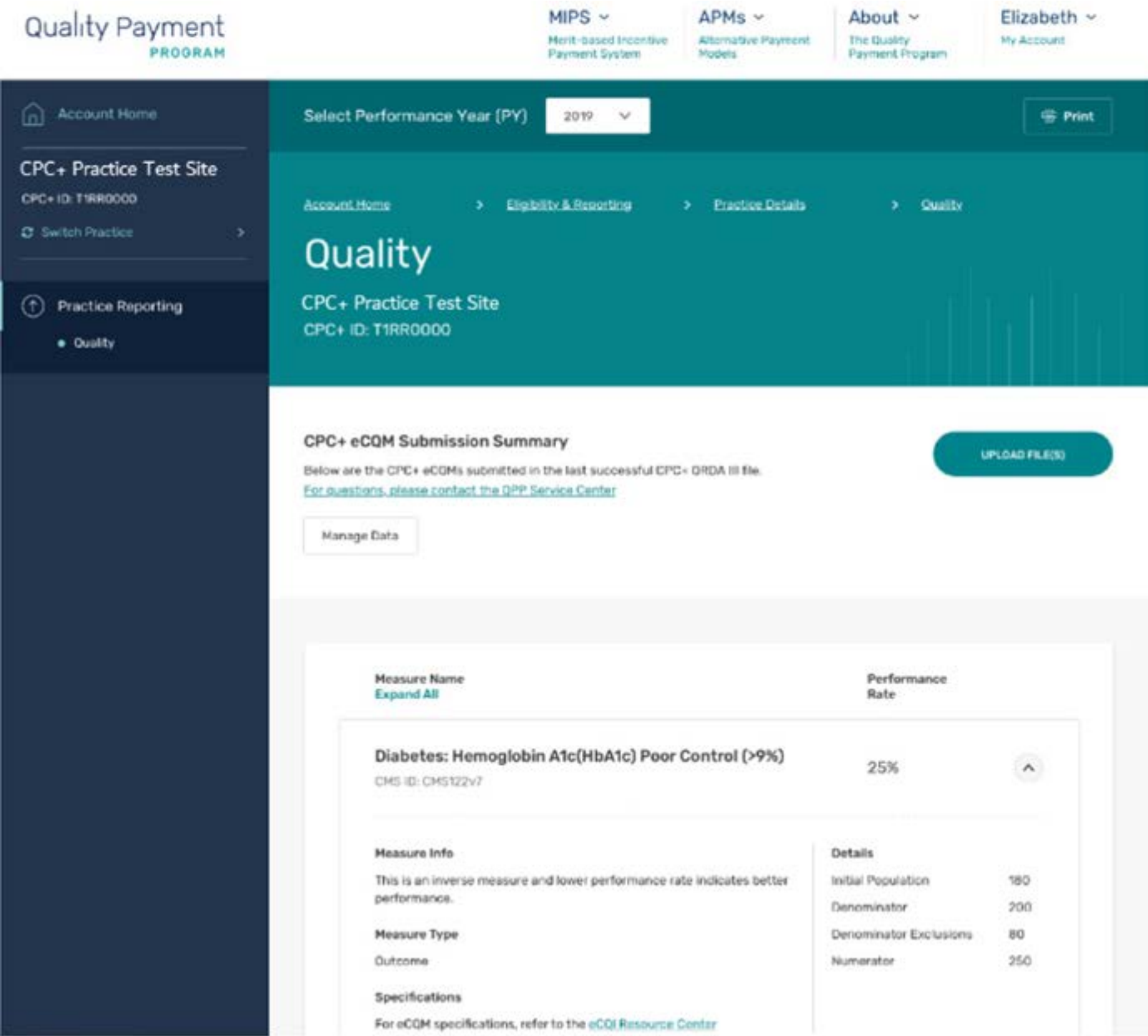
Remember: The QPP Website functionality will be available starting on January 2, 2020. CMS encourages your APM Entity (CPC+ Practice) to submit eCQM results early to allow for correction of any submission errors by your certified health IT vendor and resubmission prior to the February 29, 2020 **(8 PM EST)** deadline. Please note that a successful submission indicates only that your file has been received; however, the eCQM submission must still satisfy all CPC+ eCQM reporting requirements. The last file successfully submitted for a APM Entity (CPC+ Practice) is used to determine if that APM Entity (CPC+ Practice) satisfactorily met eCQM reporting requirements for the Measurement Period.

Additional Information

After confirming the submission of your CPC+ QRDA III file, if you find that the eCQM results are incorrect, you can replace your CPC+ QRDA III file with a new CPC+ QRDA III file by following the upload instructions above. If you elect to delete data by using the Manage Data button **(**Figure 22**)**, resubmit your file to ensure that corrected results are submitted to CPC+.

Figure 22. CPC+ eCQM Submission Summary

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Troubleshooting Your CPC+ QRDA III File

The QPP Website will validate the items described in the About Your CPC+ QRDA III File section, as well as technical standards specified in the 2019 CMS QRDA III IG. The site will flag any issues with your file with an informative error or warning message. See the CPC+ QRDA III File Submission Validations section for a list of data items that commonly fail validation.

CPC+ recommends that you work with your health IT vendor to resolve most errors and warnings identified in your CPC+ QRDA III file. However, this section includes troubleshooting tips for certain items that your practice may be able to resolve independently.

Warning message indicating that a TIN/NPI listed within the QRDA III file is incorrect

Please note that this warning message does not indicate that the CPC+ QRDA III file has failed to upload to the QPP Website. This warning message is informing the user that one or more TIN(s)/NPI(s) included in the QRDA III file do not match the list of provider TIN(s)/NPI(s) that CPC+ has on file for your CPC+ practice ID. Please ensure that your CPC+ practitioner roster is up to date with the correct provider TIN(s)/NPI(s) by contacting CPCPlus@telligen.com.

CPC+ Submission Score is not displaying after submitting the QRDA III file

After submitting a CPC+ QRDA III file, users will not receive a submission score. This functionality is for MIPS QRDA III file submissions only. Please note that this does not indicate that the CPC+ QRDA III file has failed to upload to the QPP Website.

Error message indicating that you may not be connected to your CPC+ practice

When trying to submit your practice's CPC+ QRDA III file, if you receive an error stating "user is not authorized to view any submissions", you may not be connected to your CPC+ practice on the QPP Website. In this scenario, select the "Manage Access" link on the left side of the page and connect to your APM Entity by entering your CPC+ practice information. You can find instructions and more information in the Connect to an Organization: APM Entity video⧉. Once you are connected, you should see an APM Entity tab under the Eligibility and Reporting link on the left side of the page.

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CPC+ QRDA III File Submission Validations

The QPP Website will validate your CPC+ QRDA III file upon submission, using the technical standards in the 2019 CMS QRDA III IG and the items described in the About Your CPC+ QRDA III File. An informative error or warning message will flag any issues with your file.

Table 4 lists some of the data that will be validated in your CPC+ QRDA III file and, in some cases, how they should be presented (i.e. the specific format). This table will allow your practice to confirm (or work with your health IT vendor to confirm) that these items are included in your QRDA III file and that they are reported correctly. If your practice is submitting your QRDA III file and receives any error or warning messages, these items will help you understand what is incorrect and how to fix it or communicate the issue to your health IT vendor. Please review the 2019 CMS QRDA III IG for a comprehensive list of all items validated upon submission.

Table 4. CPC+ QRDA III Validations

Validation Item	Validation Description
CMS Program Name Code	Allowed value: CPCPLUS.
TIN(s)/NPI(s) for CPC+.	At least one TIN and one NPI must be present. (Note: Multiple TINs and NPIs are allowed; the TIN does not have to be the same if multiple TINs/NPIs are provided.) CPC+ Practice Site level reporting includes all patients (including all payers and the uninsured) who were seen one or more times at the practice site location during the Performance Period by one or more clinicians (TIN(s)/NPI(s)) who were active on the CPC+ Practitioner Roster at any point during the Measurement Period and who meet the inclusion criteria for the initial population (IPOP) as specified in each measure. Please note that CPC+ clinicians can only be active on one CPC+ Practitioner Roster at a time.
CPC+ APM Entity Identifier (CPC+ Practice Site ID).	There must be one and only one APM Entity Identifier (null is not allowed). Must be a valid format (i.e. T1OR1234).
Valid CPC+ APM Entity Identifier (CPC+ Practice Site ID).	No spaces allowed (i.e. T1OR1234).
CPC+ Practice Site Address.	An address must be provided.

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Validation Item	Validation Description
Valid TIN format.	Should have 9 digits.
Valid NPI format.	Should have 10 digits.
A QRDA III file must contain data for the Quality category for CPC+.	There are three sections within the CMS QRDA III: Quality, Improvement Activities and Promoting Interoperability. For CPC+ the QRDA III file must contain the section for Quality (eCQM).
Improvement Activities or Promoting Interoperability.	Promoting Interoperability and Improvement Activity data should not be submitted in a CPC+ QRDA III submission file. Promoting Interoperability and Improvement Activity performance category data must be submitted through a separate file or appropriate application independent of a CPC+ eCQM QRDA III submission.
Performance period must be January 1, 2019 to December 31, 2019.	The provided performance period must have a start date of 20190101 and end date of 20191231. If you have transitioned health IT vendors, you may need to consider adopting additional health IT in order to meet this requirement.
eCQM Version Specific Measure Identifiers are valid for the 2019 Measurement Period.	The eCQM UUID must match one of the valid eCQM Version Specific Measure Identifiers for eCQMs from the 2019 Measurement Period eCQM Specifications for Eligible Professionals and Eligible Clinicians. This uniquely identifies a specific version of an eCQM (Table 17 of 2019 CMS QRDA III IG). All UUID checks should be case insensitive.
Meets the eCQM selection requirements for CPC+.	A QRDA III submission requires the reporting of both eCQMs in the CPC+ measure set (CMS122v7 and CMS165v7), but also allows the reporting of eCQMs not in the CPC+ eCQM set. Non-CPC+ eCQMs are ignored.
The correct number of populations and population types are being submitted for each eCQM reported according to the eCQM's specification.	If an eCQM's specification specifies IPOP, DENOM, NUMER and DENEX criteria, then population counts for these population criteria must be reported. Absence of DENEX populations would require these population counts to be absent.
Value of performance rate must be between 0 and 1, null is allowed.	Performance rate must be >=0 and <=1. Null Flavor of "NA" is allowed for performance rate when the denominator of the performance rate equation (Denominator – Denominator Exclusions) results in 0.

Validation Item	Validation Description
Numerator is less than or equal to the performance denominator.	Performance denominator should be understood as the following equation: Denominator – Denominator Exclusions.
User reported numerator is less than or equal to the reported denominator.	Reported numerator must be less than or equal to the reported denominator.
User reported denominator exclusion is less than or equal to the reported denominator.	Reported denominator exclusion must be less than or equal to the reported denominator.
Performance Denominator is not < 0.	Performance denominator should be understood as the following equation: Denominator – Denominator Exclusions.
Reported denominator count is equal to reported initial population count per an eCQM specification.	Denominator must be equal to initial population.
Value of population count must be a positive integer or zero.	Value reported for each eCQM population must be greater than or equal to zero. Each population count must be reported using the template identifier in the 2019 CMS QRDA III IG.
For each population of an eCQM, supplemental data element must be reported for each code defined in its respective value set.	Supplemental data element information must be present (Sex, Race, Ethnicity, Payer).
Each eCQM and respective eCQM population count must only be submitted once in a single QRDA III file.	A measure may not be submitted more than once in the same file. The same population may not be submitted more than once in the same measure. Uniqueness of an eCQM is determined based on the UUID provided for it.
Correct population UUIDs are submitted.	The eCQM population UUID must match one of the valid population identifiers from the 2019 Measurement Period eCQM Specifications for Eligible Professionals and Eligible Clinicians. This uniquely identifies the population for a specific version of an eCQM (Table 17 of 2019 CMS QRDA III IG). All UUID checks should be case insensitive.
Appropriate TemplateIDs for the Quality measure section are utilized for all measures.	Require the use of all appropriate measure section templateIDs.

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Helpful Resources

- [2019 Electronic Clinical Quality Measure Reporting Overview](#)

- [2019 CPC+ Health IT Requirements](#)

- [2019 CMS QRDA III Implementation Guide for Eligible Clinicians and Eligible Professionals](#)

- [2019 CMS QRDA III Schematrons and Sample Files for Eligible Clinicians and Eligible Professionals](#)

- [eCQI Resource Center](#)

- [NLM Value Set Authority Center (VSAC)](#)