Centers for Medicare & Medicaid Services
CMS eXpedited Life Cycle (XLC)

Maryland Primary Care Program (MDPCP) Application Release 2.0

Practice User Manual

Version 1.0

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1. Introduction

The state of Maryland received a five-year performance period approval from the Centers for Medicare & Medicaid Services (CMS) in 2014 for new hospital payment model waiver based on global hospital budgets and quality targets, the All-Payer Model (APM).

To date, in Phase I of the APM, Maryland has been successful in achieving reduced hospital costs, reduced hospital-acquired conditions, and reduced readmissions. While hospital costs have been decreasing in Maryland, future total healthcare cost savings will need to be realized by aligning and integrating both the hospital and non-hospital providers in a coordinated system of care. The interplay between the need for decreases in preventable hospital use and non-hospital use trends is important to understand and manage, particularly as Maryland moves to the second term of the APM, slated to begin in January 2019.

The Maryland Total Cost of Care (TCOC) Model includes three programs: Hospital Payment Program, Care Redesign Program (CRP), and the Maryland Primary Care Program (MDPCP). This User Manual applies to MDPCP. MDPCP is built upon the foundations of CMS' Comprehensive Primary Care Plus (CPC+) Model, which was designed to support practices along the continuum of transformation to deliver better care to patients and promote smarter spending. MDPCP is both a care delivery and payment redesign model. Similar to CPC+, there will be two tracks for practices to choose that involve different care delivery requirements and payment options. As in CPC+, Maryland will allow practices to apply for one of two program tracks, with increasing payment and care redesign expectations as providers move from Track 1 to Track 2. However, in MDPCP, practices will have an opportunity to partner with a Care Transformation Organization (CTO) to fulfill program goals. Practices are not required to have a CTO.

1.1 MDPCP Overview

MDPCP serves as an Internet-facing web application, which is accessed through the CMS Enterprise Portal (ePortal) Landing Page and the Innovation Center (IC) Application. The application will be accessed via the widget called "Maryland Primary Care Program- MDPCP". MDPCP provides participating practices and CTOs with tools to assist with providing information pertaining to their demographic, composition, practice and organization information; their reporting of practice and quality milestones; and to provide a platform where participating practices and CTOs can download reports essential to their success in this initiative. The Center for Medicare & Medicaid Innovation (CMMI) and contractors supporting the initiative will use MDPCP to monitor the progress and compliance of participating practices and CTOs.

1.2 MDPCP Application Business Functions Overview

CMMI and its contractors distribute implementation guides and educational materials to MDPCP stakeholders about the requirements and timeline with which MDPCP practices must report data to CMS via the MDPCP Application. Any changes to the data maintained in the MDPCP Application is managed through a change control process.

Availability of information in the MDPCP Application is dependent on a user's role-based access permissions.

1.3   Intended Audience

The intended audience for this User Manual is the Practice User. The Practice User will use this User Manual as reference for accessing information and maintaining practice details within the MDPCP Application. The User Manual serves as a reference to the steps needed to execute functionality.

2.   Overview

The MDPCP Application allows for the exchange of data and information between MDPCP stakeholders. The main features of this application are updating practice information and providing access to resources and information relevant to MDPCP stakeholders.

2.1   Conventions

This document provides screen-shots and corresponding narrative to describe how to use the MDPCP Application.

2.2   Cautions & Warnings

When signing in to the application, a warning screen will display with the **Terms & Conditions** for use of the CMS.gov ePortal, content, and applications. The message should be read thoroughly as it explains the penalties and consequences of misusing the system(s) and its contents. The screens that display in the system may differ slightly from the sample images used in this document.

3.   Getting Started

3.1   Set-up Considerations

3.1.1   General Set-up Considerations

CMS screens are designed to be viewed at a minimum screen resolution of 800 x 600. The minimum system requirements to access the CMS ePortal effectively are:

Windows

- 1.4GHz Intel® Pentium® 4 or faster processor (or equivalent) for Microsoft® Windows® XP, Windows 7, or Windows 8; 2GHz Pentium 4 or faster processor (or equivalent) for Windows Vista®

- Windows 8 (32-bit/64-bit), Windows 7 (32-bit/64-bit), Windows Vista, Windows XP

- 512MB of RAM (1GB recommended) for Windows XP, Windows 7, or Windows 8; 1GB of RAM (2GB recommended) for Windows Vista

- Microsoft Internet Explorer (IE) 11, Mozilla Firefox, Google Chrome

- JavaScript and cookies must be enabled

Mac Operating System (OS)

- 1.83GHz Intel Core™ Duo or faster processor

- 512MB of RAM (1GB recommended)

- Mac OS X 10.7.4, 10.8

- Mozilla Firefox; Google Chrome

- JavaScript and cookies must be enabled

Linux

- Ubuntu 11.04, 12.04; Red Hat Enterprise Linux 6; openSuSE 11.3

- Mozilla Firefox

- JavaScript and cookies must be enabled

3.1.2   Section 508 Compliance/Accessibility

CMS.gov is committed to making its electronic and information technologies (EIT) accessible to people with disabilities. We strive to meet or exceed the requirements of Section 508 of the Rehabilitation Act (29 U.S.C. 794d), as amended in 2017 (82 FR 5790).

If any content or use of any features on this website cannot be accessed due to a disability, please contact our Section 508 Team via email at 508Feedback@cms.hhs.gov.

For more information on CMS.gov accessibility and compliance with Section 508, please go to: https://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/Policiesforaccessibility.html.

3.2   User Access Considerations

MDPCP stakeholders can access the MDPCP Application through the CMS ePortal. Authorized users have access to modules and functionality based on their assigned role. Security for the MDPCP Application will adhere to the CMS Information Services (IS) Acceptable Risk Safeguard (ARS) guidelines and the system will comply with the CMS Minimum Security Requirements (CMSR). Security enforcement spans across tiers leveraging CMS infrastructure, which provides network-layer security systems such as firewalls, intrusion detections systems, and link encryptions. The CMS infrastructure security will be maintained for the data throughout the loading process onto the CMS mainframe and throughout the loading process into the MDPCP Application. The CMS mainframe system access is limited to Individuals Authorized for Access to CMS Computer Systems (IACS).

3.3   Accessing the System

The following sub sections provide detailed, step-by-step instructions on how to gain access to the MDPCP Application.

3.3.1   New Enterprise Identity Management (EIDM) User Registration

This section provides information on how to register and create a user ID and password through the EIDM process. The following are the step-by-step instructions.

Note: The EIDM user registration process takes approximately 10 minutes.

1. Navigate to https://portal.cms.gov/.

2. On the ePortal Landing Page, select the **New User Registration** button.
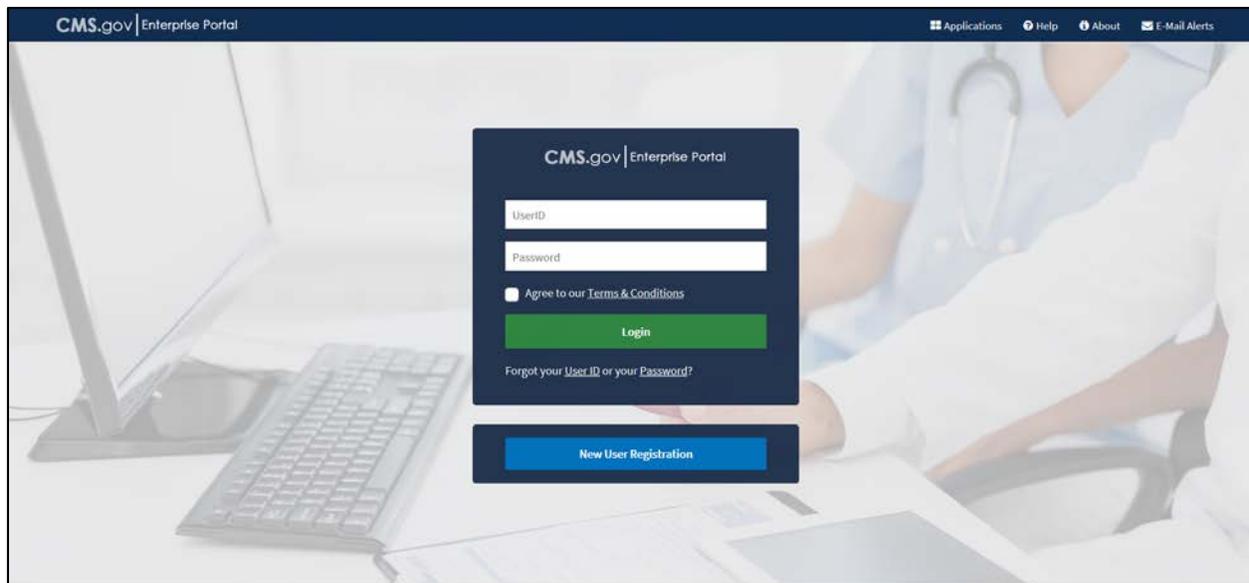
Figure 1: ePortal Landing Page

3. On the **Step #1: Choose Your Application** page, select **IC: Center for Medicare and Medicaid Innovation (CMMI) Innovation Center (IC)** from the **Choose Your Application** drop-down list.

Figure 2: Choose Your Application

4. Read the **Terms & Conditions**, select the **I agree to the terms and conditions** checkbox, and select the **Next** button to continue with the registration process.

Figure 3: Agreeing to Terms and Conditions

5. Provide the information requested on the **Step #2: Register Your Information** page. All fields are required and must be completed unless marked "Optional". After all required information has been provided, select the **Next** button to continue.

    Note: You may select the **Cancel** button at any time to exit the registration process. Changes entered will not be saved. To go to the previous step, select the **Back** button.

    Note: Social Security Number (SSN) is optional on the **Step #2: Register Your Information** page. However, your SSN is required on the **Your Information** page (see Section 3.3.2) to gain approval for an IC Privileged (PV) role and access to the MDPCP Application.

Figure 4: Register Your Information

6. On the **Step #3: Create User ID, Password & Challenge Questions** page, create and enter a user ID in the **User ID** field based on the requirements for creating a user ID

7. Create and enter a password in the **Password** field based on the requirements for creating a password. Enter the same password in the **Confirm Password** field.

   Note: Instructions are displayed, in the form of a tool tip, on what you are required to include in your password.

8. After entering the user ID and password, select a question in the **Select Challenge Question #1** drop-down list and enter the answer you want to be saved with the question. Continue to select a question and enter an answer for **Question #2** and **Question #3**. Select the **Next** button to complete the registration process.

Figure 5: Create User ID, Password & Challenge Questions

9. On the **Registration Summary** page, review the information you entered, make any necessary changes, and then select the **Submit User** button.

Figure 6: Registration Summary

10. The **Confirmation** page is displayed acknowledging your successful registration and informing you that you should receive an email with your user ID.
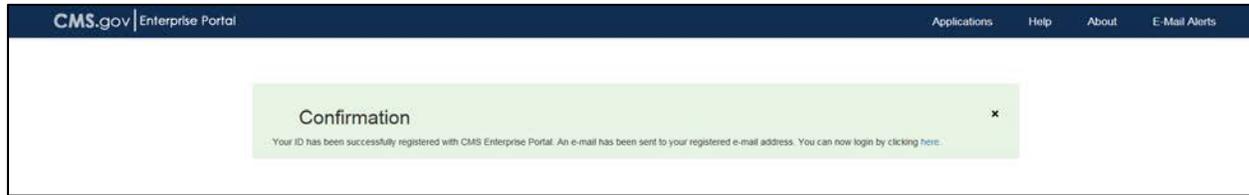
Figure 7: New User Registration Confirmation

3.3.2   Requesting IC Access

In order to request access to the IC Application and the associated roles, users must have active EIDM credentials to login to https://portal.cms.gov/.

Note: Gaining access to the IC takes approximately 15 minutes if the user successfully completes the Remote Identity Proofing (RIDP) process online. If the user fails to answer the questions in the RIDP process correctly, they will be directed to an external resource for troubleshooting. The timeframe for resolution can be between 24 to 72 hours.

1. Access https://portal.cms.gov/.

2. In the **User ID** text field, enter the EIDM user ID created in the **Step #3: Create User ID, Password & Challenge Questions** page (refer to section 3.3.1).

3. In the **Password** text field, enter the EIDM password created in the **Step #3:** Create User ID, Password & Challenge Questions page (refer to section 3.3.1).

4. Read the important **Terms and Conditions** information and indicate your agreement by selecting the checkbox. Ensure the checkbox next to Agree to our Terms & Conditions remains checked.

5. Select the **Login** button.
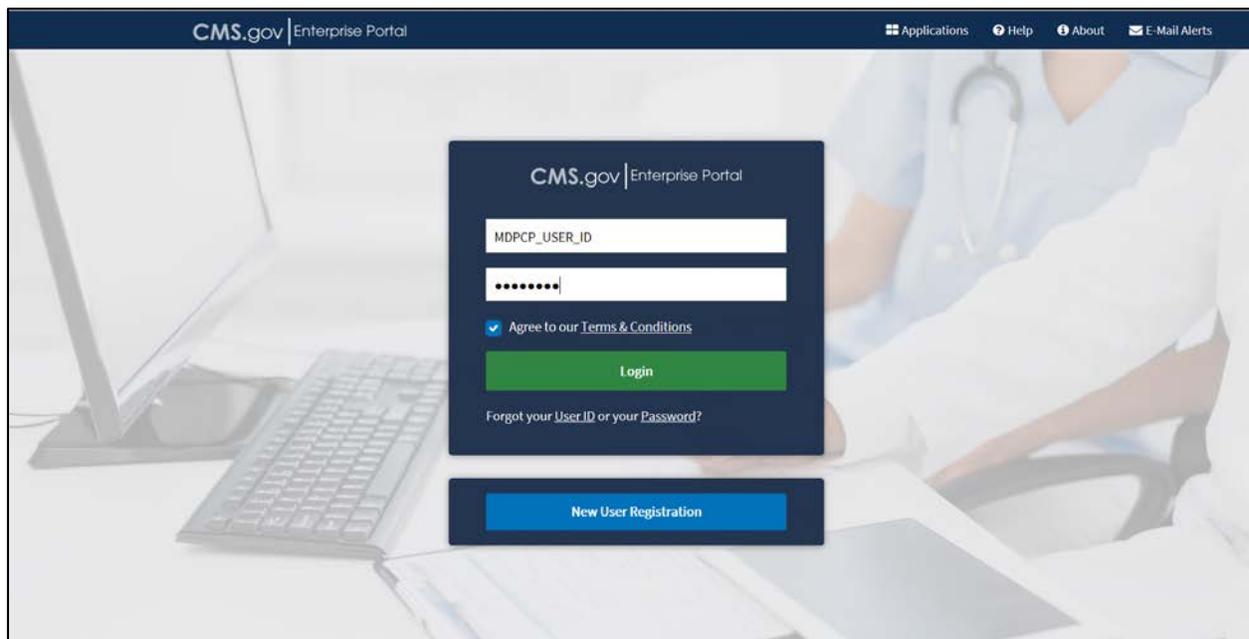
Figure 8: ePortal Home – Login

6. On the **My Portal** page, select the **Request/Add Apps** hyperlink.
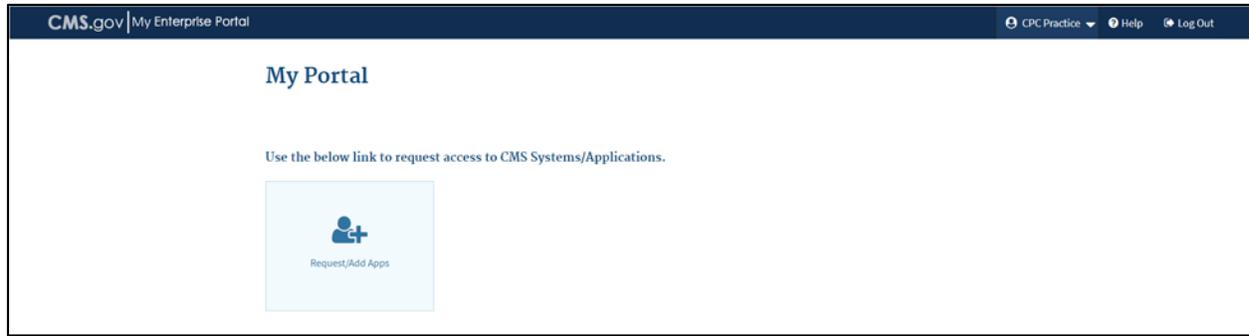
Figure 9: My Portal – Request/Add Apps

7. On the **Access Catalog** page, in the **Search** box enter **IC** and the IC widget will display.

8. Select the **Request Access** button.
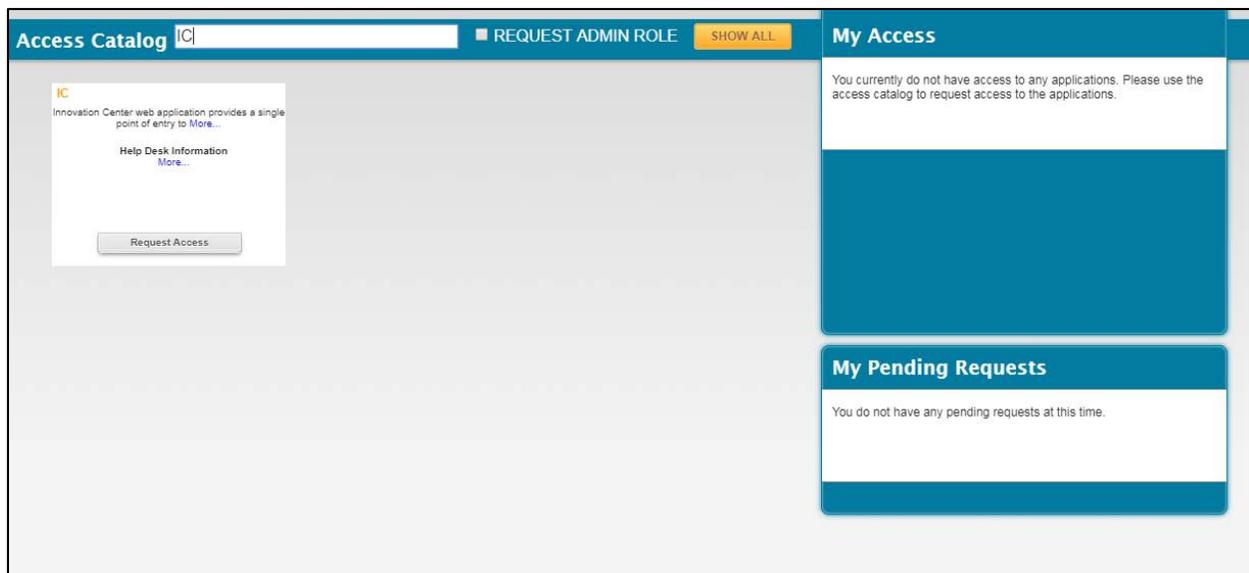
Figure 10: Access Catalog

9. The **Request New System Access** page is displayed with the **System Description** drop-down pre-populated with IC – Innovation Center.

10. From the **Role** drop-down list, select the **Innovation Center Privileged User** role.

11. Select the **Submit** button to initiate the RIDP process.

By default, all EIDM accounts are created with a Level of Assurance (LOA) ranking of 1. In order to obtain access to roles within the IC that require a higher level of security, users must complete the RIDP process as described in this section. The IC Approvers and IC PV users will go through the RIDP process.

Figure 11: Request New System Access

12. On the **Identify Verification** page, select the **Next** button.

Figure 12: Identity Verification

13. Read the **Terms and Conditions**.

14. Select the **I agree to the terms and conditions** checkbox.

15. Select the **Next** button.
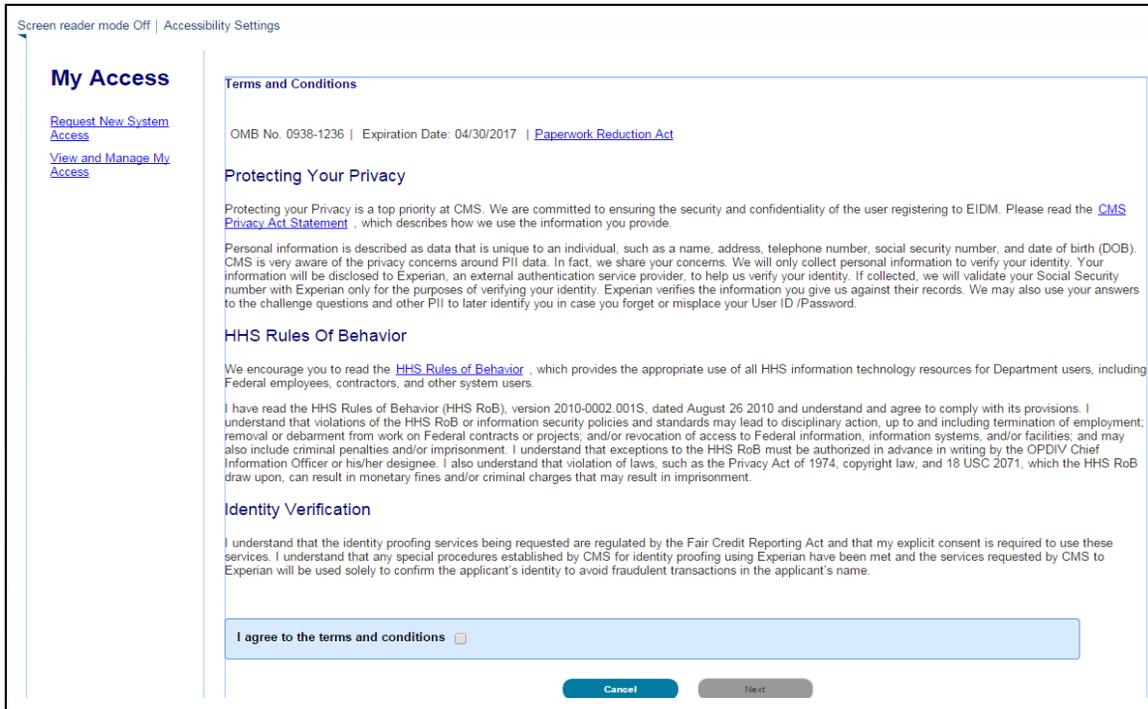
Figure 13: Terms and Conditions

16. On the **Your Information** page, complete the required fields and select the **Next** button.

   Note: Required fields are marked with an asterisk.

   Note: Entering your SSN is optional on the **Step #2: Register Your Information** page, however, your SSN is required on the **Your Information** page (see Section 3.3.2) to gain approval for an IC PV User role and access to the MDPCP Application.
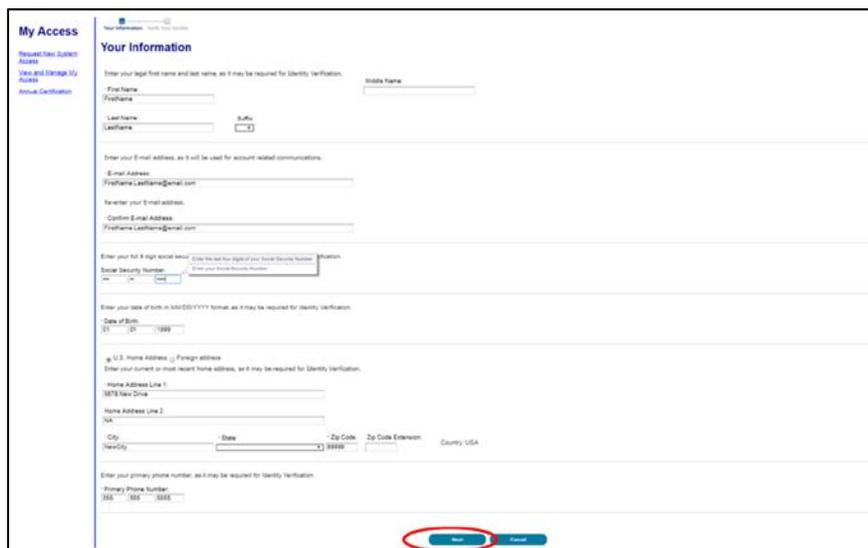
Figure 14: Your Information

17. On the **Verify Identity** page, enter the required information needed for the RIDP check. This page consists of several questions pertaining to your personal information, which requires you to provide the correct response.

18. Select the **Next** button.

Figure 15: Verify Identity

19. On the **Complete Step Up** page, the system will prompt you with a success message, however, if you do not provide the correct responses to the RIDP check, you will be instructed to contact the MDPCP Support Team and/or external entities.

20. Select the **Next** button**.**

Figure 16: Complete Step Up

21. On the **Multi-Factor Authentication Information** page, select the **Next** button**.**

Figure 17: Multi-Factor Authentication (MFA) Information Confirmation

22. On the **Register Your Phone, Computer, or E-mail** page, register your phone, computer, or email for the MFA information. Symantec software (https://vip.symantec.com/) must be downloaded first.

    Note: You will likely have to return to this screen after downloading the software.

23. Enter the credential ID and description once the software is downloaded and launched.

24. Select the **Next** button.
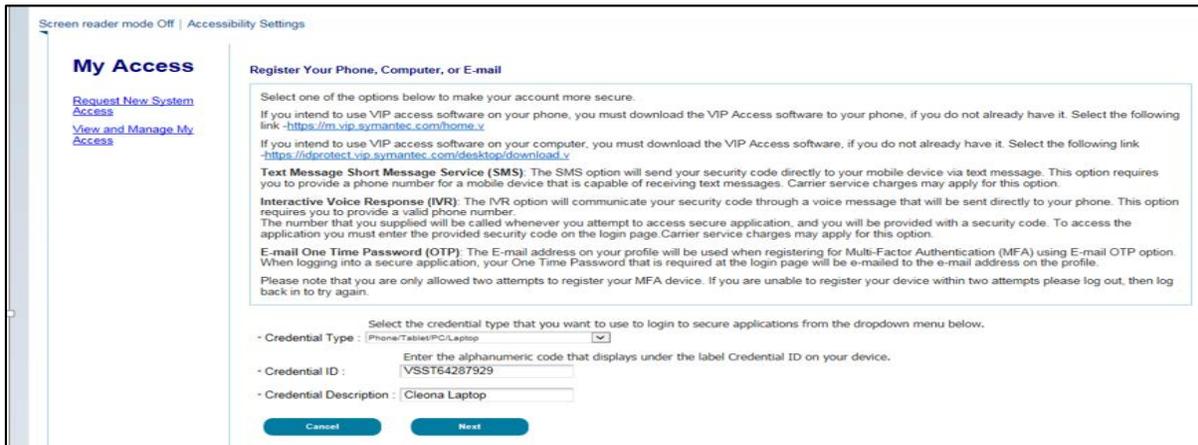
Figure 18: Register Your Phone, Computer, or E-mail

25. You will be prompted with a success message on the **Register Your Phone, Computer, or E-mail** page.

26. Select the **OK** button.

Figure 19: Register Your Phone, Computer, or E-mail Confirmation

27. On the **Successful Completion!** page, select the **OK** button

Figure 20: Successful Completion

When the user requests an IC PV User role, the request will be automatically approved and will not require any manual approval.

You will need to log out and then login to access the IC Application. When the user returns to https://portal.cms.gov, **Innovation Center** will display as one of the widget options. For details on how to request access to and launch the selected CMMI applications, refer to section 3.3.3.
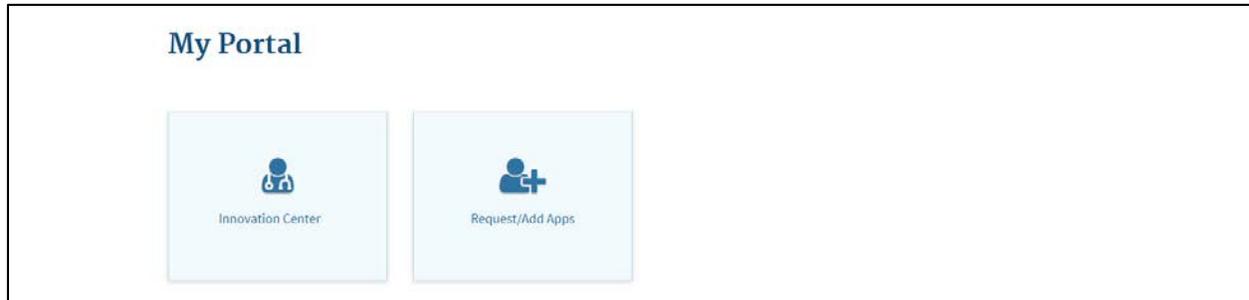
Figure 21: My Portal – Innovation Center

3.3.3   Requesting Access to the MDPCP Application

This section describes the functionality available once you have successfully created an EIDM account and received an IC PV role. The IC will be accessible via the mega menu option. In order to launch the MDPCP Application, you must first request access from the **CMMI Request Access** page.

Note: The time to obtain access to the MDPCP Application takes a minimum of 24 hours, which includes verification of the request.

1. On the **My Portal** page, select **Application Console** from the **Innovation Center** drop-down list.
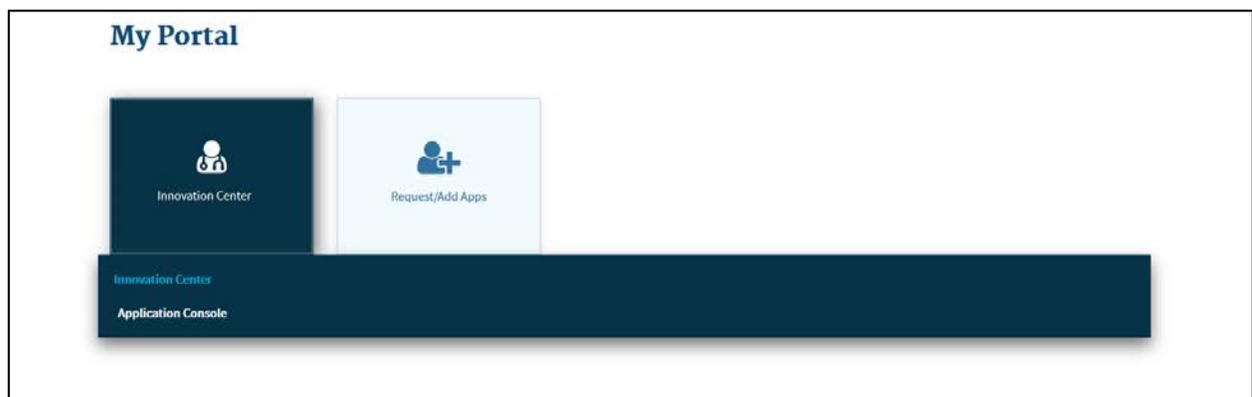
Figure 22: Innovation Center Menu

2. Navigate to the **CMMI Request Access** page.

    Note: The **CMMI Request Access** section consists of the following:

    - **Request New Access** button

    - **Search** input field and button

    - **Filter** tabs that allow you to see the status of applications that have had requests submitted and are Pending, Approved, Rejected, or All

    - **Refresh** button to display newly entered information or clear the fields

    - Preference setting icon (⚙) to control email notifications

Figure 23: CMMI Request Access

3. Select the **Request New Access** button. Upon selecting **Request New Access**, you will be prompted to complete a form requesting the application name, desired user role, and comments about your request.

4. In the **Application Name** drop-down, select **Maryland Primary Care Program – MDPCP** from the drop-down list**.**

5. In the **Role** drop-down, select the **MDPCP_PRACTICE_USER** role from the drop-down list.

6. In the **Justification** text field, enter "Requesting access as a MDPCP Practice user".

7. Select the **Submit Request** button to complete your request once all of the required fields are completed.
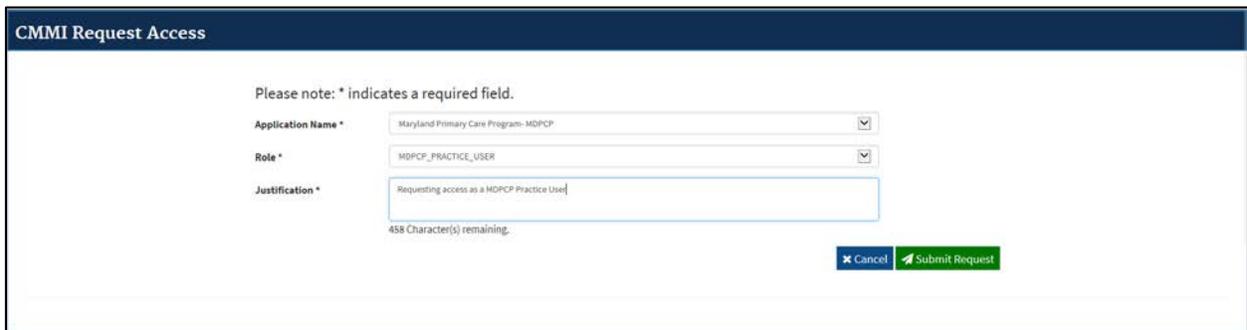
Figure 24: CMMI Request Access – Submit Request

Note: If the requested application and role have already been created, the system will notify the requestor with an error message at the top of the page.

Figure 25: Application and Role Selection with Error Message – Request Access

8. Once the MDPCP Application request has been submitted, you will return to the **CMMI Request Access** page, where you will see the Pending application request.
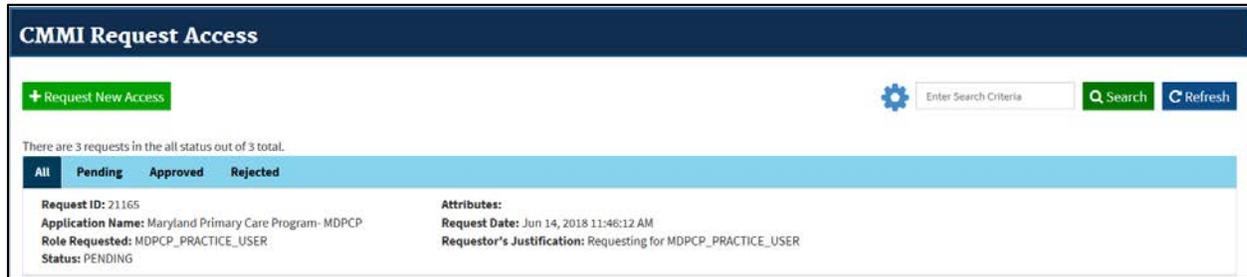
Figure 26: Pending Request – CMMI Request Access

9. You will receive an email notification indicating that your request has been submitted. You will also receive an email notification when the request has been approved or rejected.

3.3.4   Accessing the MDPCP Application

This section describes the process to login to the MDPCP Application.

In order to access the MDPCP Application, you must use your created credentials (see sections 3.3.1 to 3.3.3).

1. Access https://portal.cms.gov/.

2. In the **User ID** field, enter the EIDM user ID.

3. In the **Password** field, enter the EIDM password.

4. Select the **MFA Device Type** from the drop-down list.

5. Enter a **Security Code.**

6. Read the important Terms and Conditions information and indicate your agreement by selecting the checkbox. Ensure the checkbox next to **Agree to our Terms & Conditions** remains checked.

7. Select the **Login** button**.**
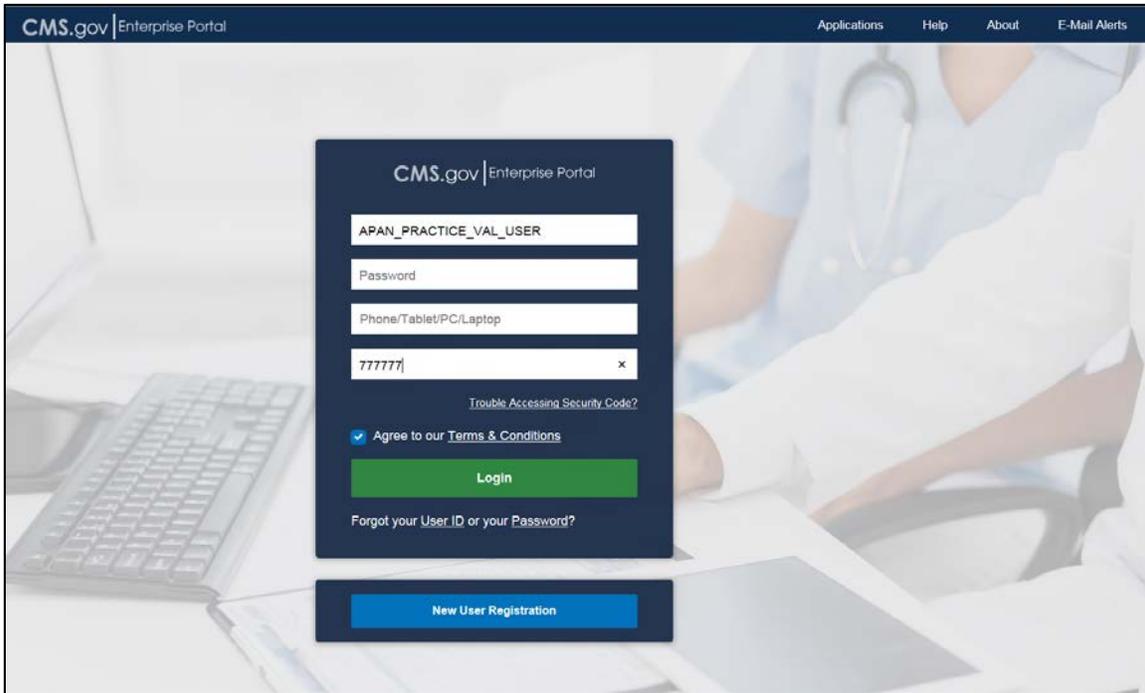
Figure 27: Portal Home – Login

8. The system will navigate to the **My Portal** Home page where **Innovation Center** will be one of your menu items.
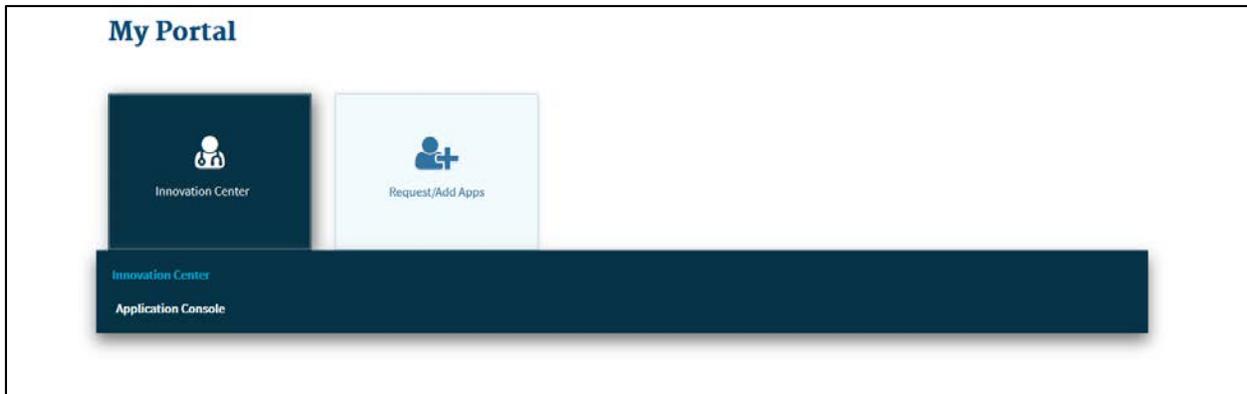
Figure 28: Innovation Center Menu

9. Select **Application Console** from the **Innovation Center** drop-down list.

10. In the **CMMI Application Selector** portlet, select the **Maryland Primary Care - MDPCP** widget.
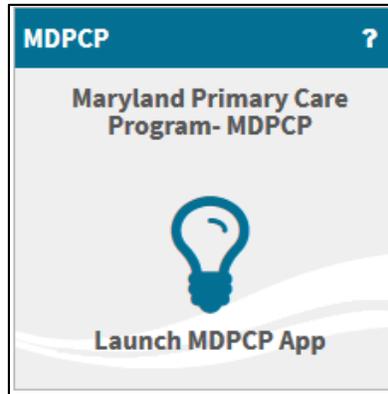
Figure 29: Launching MDPCP App

3.4   System Organization & Navigation

This section provides detailed information on how to navigate within the MDPCP Application and use common features.

3.4.1   Main Menu

This sub section describes the main navigation features available in the MDPCP Application.

Figure 30: MDPCP Main Menu

Table 1: MDPCP Main Menu Features

Feature Name	Description

Top Navigation Bar/Secondary Navigation Bar	Allows you to access one of the following modules with the associated sub-modules (tabs and sub-tabs):
	
	• Home (default)
	   o Practice Home
	• My Practice Info
	   o Demographic Information
	   o Practice Information
	   o Composition
	   o Request History
	   o Documents
	• Practice Reporting
	   o Overview
	   o Function 1
	   o Function 2
	   o Function 3
	   o Function 4
	   o Function 5
	   o General
	   o CTO Reporting
	• Payment & Attribution
	   o Payment & Attribution
	• Resources
	   o MDPCP Resources

Left-Hand Navigation Menu	Allows you to access the pages within the selected sub-modules (sub-tabs).
Yr/Qtr Drop-down	Allows you to select the applicable Program Year (PY) and Quarter (Qtr).
Track Drop-down	Allows you to select Track 1 or Track 2.
Change Display Button	Allows you to change the display based on the selected Yr/Qtr and Track drop-down values.
Breadcrumb Hyperlink	Shows your current location within the application and provides links to the previously accessed pages.

Feature Name	Description
Practice Drop-down	Allows you to select a Practice ID.
Switch Practice Button	Allows you to change the display based on the selected practice drop-down value.
Print/ Print All Icon	Allows you to print saved content for related pages in Portable Document Format (PDF).
Help Icon	Displays detailed information relevant to the current page in a separate window.

3.4.2   Page Navigation

This sub section describes the page navigation features available in the MDPCP Application.

Table 2: MDPCP Page Navigation Features

Feature Name	Description
Update Information Hyperlink	Allows you to edit information on a page. **Note:** This feature will be available on all reporting pages after practices submit their reporting data, only during the open submission period.
Show More Hyperlink	Expands a collapsed section(s).
Hide Hyperlink	Collapses an expanded section(s).
First Hyperlink	Navigates to the first page of a table.
Previous Hyperlink	Navigates to the previous page of a table.
Next Hyperlink	Navigates to the next page of a table.
Last Hyperlink	Navigates to the last page of a table.
Add Remark Hyperlink	Allows you to add a remark.
Show Entries Drop-down	Allows you to select the number of entries shown in the table.
Search Text Field	Allows you to enter desired search criteria.
Confirmation Checkbox	Allows you to certify the accuracy of the information you provided.
Table Sort Icon	Sorts table information in ascending or descending order for a specific column.
Download Icon	Allows you to download the corresponding file.
Search Button	Allows you to search the content within a table.
Add Button	Navigates you from a main page to a child page.
Withdraw Button	Navigates you from main page to a child page.
Export Button	Exports table content in Excel format.
TIN Change Button	Navigates you from main page in the Practice Information subtab to a child page.
Save Button	Allows you to save newly added information to the content of a page.
Clear Button	Clears information entered in editable fields, the file selected for upload, or remarks.

Feature Name	Description
Cancel Button	Allows you to cancel the request to update existing information in the application.
Back Button	Navigates to the previous page.
Choose File Button	Allows you to choose a file to upload in the application.
Delete button	Allows you to delete from a table.
Submit button	Allows you to submit a form.
Previous Button	Saves entered information and navigates to the previous page.
Next Button	Saves entered information and navigates to the next page.

3.4.3   File Upload

This sub section describes how to use the **File Upload** feature available in the MDPCP Application.

1. Select the **Choose File** button.
2. Browse for the desired file(s).
3. Select the file(s).
4. Verify the selected file name is displayed under **Choose File**.
5. Select the **Save** button.

Note: Maximum file size is 19 MB, 20 files per upload, and the allowed file types are Excel, PDF, Zip, and Word.

3.4.4   Add a Remark to a Request

This sub section describes how to add a remark to the Request Notes section in a request in the MDPCP Application.

1. Select the **Add Remark** hyperlink.
2. Enter text in the text area.
3. Select the **Save** button.

3.4.5   Messages

This sub section describes the system-generated messages in the MDPCP Application.

3.4.5.1   Confirmation Message

A message displays confirming the action taken was successful.

> ✓ **Confirmation** Your changes have been saved.

Figure 31: Confirmation Message

3.4.5.2   Warning Message

A message displays informing you of an action you may need to take.

> ⚠ **Warning** There are currently no active Practitioners in the Practitioner Roster.

Figure 32: Warning Message

3.4.5.3   Error Message

A message displays informing you of the error(s) encountered and what action(s) to be taken to save the page.

This is a required field.
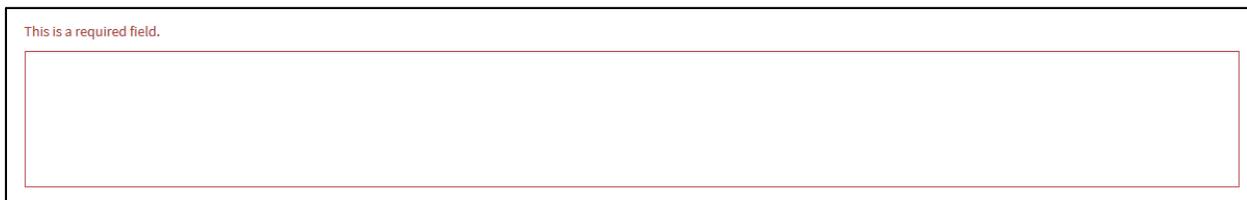
Figure 33: Error Message

3.5   Exiting the System

If you want to log out of the portal, select the **Log Out** hyperlink in the upper right portion of the page.

4.   Using the System

The following sub sections provide detailed, step-by-step instructions on how to use the various functions or features of the MDPCP Application.

4.1   Home

The **Home** tab provides access to the **Practice Home** subtab. The Practice Home subtab provides access to the **Maryland Primary Care Program (MDPCP) Practice Home** page for a practice. This page is described in the following section.

4.1.1   Maryland Primary Care Program (MDPCP) Practice Home

The **Maryland Primary Care Program (MDPCP) Practice Home** page is the default landing page and is accessed via the **Practice Home** subtab. The **Maryland Primary Care Program (MDPCP) Practice Home** page allow you to view your associated practices, including the Practice ID, Practice Name, Practice Reporting Completion Status, and CTO Reporting Completion Status within the My Practice(s) Summary table.

If you want to navigate to a practice's Demographic Information page:

1. Select the desired **Practice ID** hyperlink.

2. The system navigates to the **Demographic Information** page.

If you want to navigate to the Practice Reporting Overview page:

1. Select the progress bar from the **Practice Reporting Completion Status**.

2. The system navigates to the **Overview** page.

If you are associated to a CTO and you want to navigate to the CTO Reporting page:

1. Select the progress bar from the **CTO Reporting Completion Status**.

2. The system navigates to the **CTO Reporting** page.

Note: If you are not associated to a CTO, the system will display the value 'N/A' in the **CTO Reporting Completion Status** column.
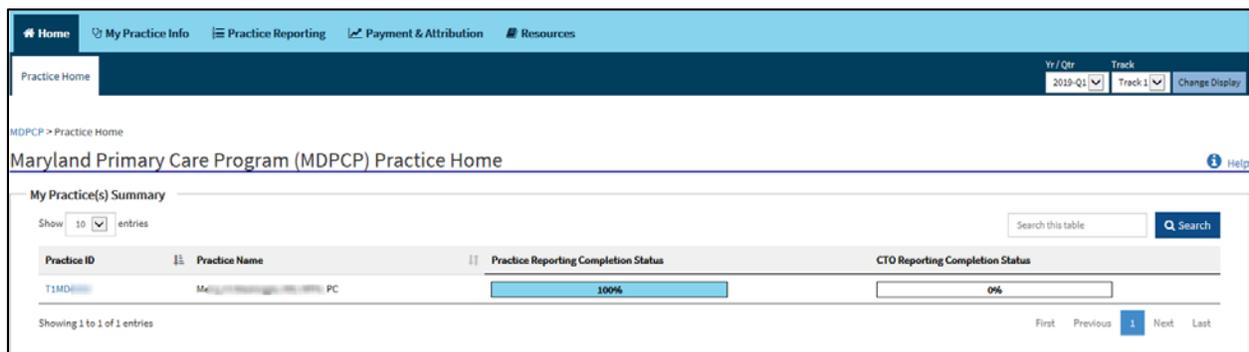
Figure 34: MDPCP Practice Home – My Practice(s) Summary

4.2   My Practice Info

The **My Practice Info** tab provides access to the Demographic Information, Practice Information, Composition, Request History, and Documents subtabs for a practice. The pages accessed via these subtabs are described in the following sections.

4.2.1   Demographic Information

The **Demographic Information** page allow you to view and maintain a practice's demographic, primary contact, secondary contact, clinical leader contact, health information technology (HIT) contact and CTO contact information. When you initially navigate to this page, it is read-only.

If you want to edit:

1. Select the **Update Information** hyperlink.

2. Make changes to desired fields.

3. Select the **Save** button.

Note: If you choose to enter secondary contact or CTO contact information, all fields in this section are required unless otherwise noted.

Figure 35: Demographic Information

4.2.2   Practice Information

The **Practice Information** page allow you to view and maintain a practice's HIT details and organization details. When you initially navigate to this page, it is read-only.

If you want to edit:

1. Select the **Update Information** hyperlink.

2. Make changes to desired fields.

3. Select the **Save** button.

If you want to initiate a Taxpayer Identification Number (TIN) Change:

1. Select the **TIN Change** button (available only when the Practice Information page is read-only).

2. The system navigates to the **TIN Change** page.

3. Refer to Section 4.2.2.1 for actions you can take on the **TIN Change** page.

Figure 36: Practice Information

4.2.2.1   TIN Change

The **TIN Change** page allows you to submit a request to make a TIN change for a practice.

If you want to request a change:

1. Complete the required fields on the **TIN Change** page**.**

2. Upload **Supporting Documentation**, if any. Refer to Section 3.4.3 for instructions on uploading a file.

3. Certify the accuracy of the information provided by completing the **Confirmation** section.

4. Select the **Save** button.

   Note: When you save the TIN Change page, the system generates a request ID and displays the page header as **TIN Change – Request ID ####**. Refer to Section 4.2.4.5 for actions you can take on the **TIN Change – Request ID ####** page.

If you want to add a remark to the request in Incomplete status:

1. Complete the **Request Notes** section.
2. Select the **Save** button.

Figure 37: TIN Change

4.2.3   Composition

The **Composition page** allows you to view and maintain the practice composition, practitioner roster, and staff roster for a practice.

If you want to **save** your practice's composition information:

1. Complete the required fields in the **Practice Composition** section.
2. Verify the **Practitioner Roster** and **Staff Roster** information.
3. Certify the accuracy of the information provided by completing the **Confirmation** section.
4. Select the **Save** button.

If you want to **edit** your practice's previously saved composition information:

1. Select the **Update Information** hyperlink.
2. Make changes to desired fields.
3. Verify the **Practitioner Roster** and **Staff Roster** information.
4. Certify the accuracy of the information provided by completing the **Confirmation** section.
5. Select the **Save** button.

If you want to **export** the Practitioner Roster or Staff Roster information:

1. Select the **Export** button.
2. Open or Save the **T#MD###_PractitionerRoster** or **T#MD###_StaffRoster** in Excel file format.

Note: The file should reflect the content from the respective roster's table.

Figure 38: Composition

Practitioner Roster

The **Practitioner Roster** table displays the details of each practitioner associated with a practice, including the Practitioner Name, Primary Specialty, National Provider Identifier (NPI), Practitioner Status, Employment Status, Estimated Weekly Hours, and Date Withdrawn.

You can initiate the following actions from the Practitioner Roster section:

Table 3: Practitioner Roster Actions

If you want to…	Then…
Submit a request to add a New Practitioner	1. Select the **Add** button from the Practitioner Roster section. 2. The system navigates to the **Add New Practitioner** page. 3. Refer to Section 4.2.3.1 for actions you can execute on the **Add New Practitioner** page.
Submit a request to withdraw an Active Practitioner	1. Select the checkbox in the far right column of the table for the related practitioner. 2. Select the **Withdraw** button. 3. The system navigates to the **Withdraw Practitioner** page. 4. Refer to Section 4.2.3.3 for actions you can execute on the **Withdraw Practitioner** page.
View Practitioner information for a practitioner in Active or Withdrawn status	1. Select the related **Practitioner Name** hyperlink. 2. The system navigates to the **Practitioner Information** page. 3. Refer to Section 4.2.3.2 for actions you can execute on the **Practitioner Information** page.
Edit Practitioner Information for Practitioner in Active status	1. Select the related **Practitioner Name** hyperlink. 2. The system navigates to the **Practitioner Information** page. 3. Refer to Section 4.2.3.2 for actions you can execute on the **Practitioner Information** page.
View request details or add remark to a request in Pending Add, Pending Withdraw, Incomplete Add, or Incomplete Withdraw status	1. Select the related **Practitioner Name** hyperlink. 2. The system navigates to the **Add New Practitioner - Request ID ####** or **Withdraw Practitioner - Request ID ####** page. 3. Refer to Section 4.2.3.1 for actions you can execute on the **Add New Practitioner** page and Section 4.2.3.3 for **Withdraw Practitioner** page.

If you want to…	Then…
Edit request details for a practitioner in Incomplete Add or Incomplete Withdraw status	1. Select the related **Practitioner Name** hyperlink. 2. The system navigates to the **Add New Practitioner - Request ID ####** or **Withdraw Practitioner - Request ID ####** page. 3. Refer to Section 4.2.3.1 for **Add New Practitioner** page details and Section 4.2.3.3 for **Withdraw Practitioner** page details.
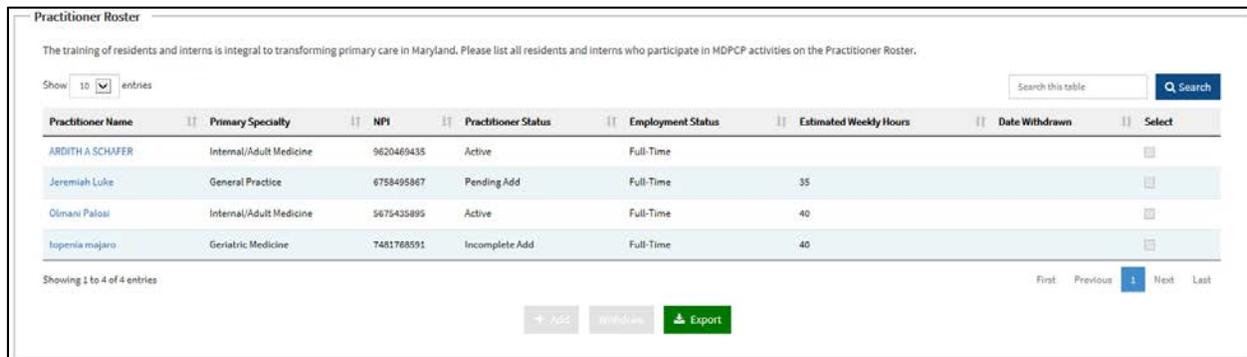
Figure 39: Practitioner Roster

Staff Roster

The **Staff Roster** table displays the details of the associated staff, including the staff name, title/position, if the individual works in direct patient care, employment status, and estimated weekly hours.

You can initiate the following actions from the Staff Roster table of the Composition page:

Table 4: Staff Roster Actions

If You Want To …	Then …
View Staff information	1. Select the related **Staff Name** hyperlink. 2. The system navigates to the **Staff Information** page. 3. Refer to Section 4.2.3.5 for actions you can execute on the **Staff Information** page.
Edit Staff information	1. Select the related **Staff Name** hyperlink. 2. The system navigates to the **Staff Information** page. 3. Refer to Section 4.2.3.5 for actions you can execute on the **Staff Information** page.
Add a New Staff member	1. Select the **Add** button. 2. The system navigates to the **Add New Staff** page. 3. Refer to Section 4.2.3.4 for actions you can execute on the **Add New Staff** page.

If You Want To …	Then …
Delete an existing Staff member	1. Select the box displayed beside the **Estimated Weekly Hours** column. 2. Select the **Delete** button. 3. Select the **Yes** option on the confirmation pop-up.
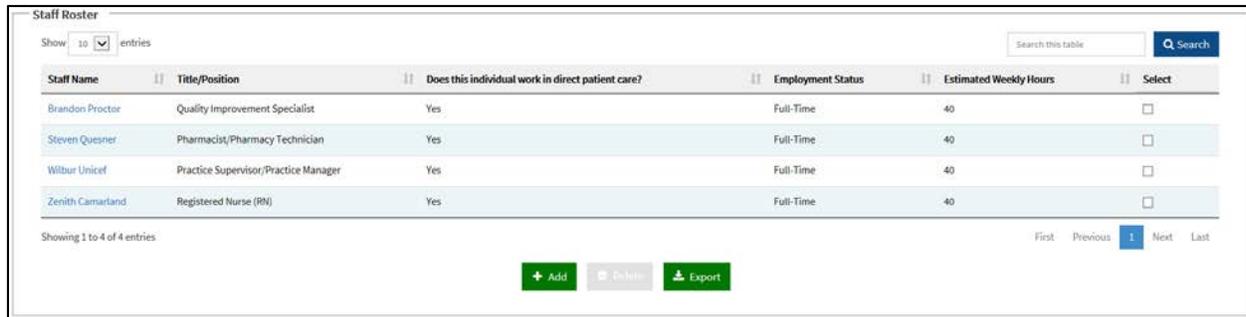
Figure 40: Staff Roster

4.2.3.1   Add New Practitioner

The **Add New Practitioner** page allows you to submit a request to add a new practitioner to a practice.

If you want to **submit** an Add New Practitioner request:

1. Complete the required fields in the **Practitioner Details** section.

2. Upload **Supporting Documentation**, if any. Refer to Section 3.4.3 for instructions on uploading a file.

3. Certify the accuracy of the information provided by completing the **Confirmation** section.

4. Select the **Save** button.

When you save the **Add New Practitioner** page, the system generates a request ID and displays the page header as **Add New Practitioner – Request ID ####**. Refer to Section 4.2.4.1 for the actions you can take on the **Add New Practitioner – Request ID ####** page.

If you want to **add a remark** to an **Add New Practitioner – Request ID ####** in Pending status:

1. Add a remark in the **Request Notes** section, if applicable. Refer to Section 3.4.4 for instructions on adding a remark.

2. Select the **Save** button.

If you want to **edit** an **Add New Practitioner – Request ID ####** in Incomplete status:

1. Select the **Update Information** hyperlink.

2. Make desired changes.

3. Upload **Supporting Documentation**, if any. Refer to Section 3.4.3 for instructions on uploading a file.

4. Add a remark in the **Request Notes** section, if applicable. Refer to Section 3.4.4 for instructions on adding remarks.

5. Certify the accuracy of the information provided by completing the **Confirmation** section.

6. Select the **Save** button.

Figure 41: Add New Practitioner

4.2.3.2   Practitioner Information

The **Practitioner Information** page allows you to view the details for an Active or Withdrawn Practitioner. When you initially navigate to this page, it is read-only.

If you want to edit practitioner information for an active practitioner:

1. Select the **Update Information** hyperlink.

2. Make the desired changes.

3. Select the **Save** button.

Figure 42: Practitioner Information

4.2.3.3   Withdraw Practitioner

The **Withdraw Practitioner** page allows you to submit a request to withdraw an existing active practitioner from your practice.

If you want to submit a Withdraw Practitioner request:

1. Complete the **Withdrawal Information** section.
2. Upload **Supporting Documentation**, if any. Refer to Section 3.4.3 for instructions on uploading a file.
3. Certify the accuracy of the information provided by completing the **Confirmation** section.
4. Select the **Save** button.

When you save the **Withdraw Practitioner** page, the system generates a request ID and displays the page header as **Withdraw Practitioner – Request ID #####**. Refer to Section 4.2.4.2 for actions you can take on the **Withdraw Practitioner – Request ID #####** page

If you want to add a remark to a **Withdraw Practitioner – Request ID #####** in Pending status:

1. Add a remark in the **Request Notes** section. Refer to Section 3.4.4 for instructions on adding a remark.
2. Select the **Save** button.

If you want to edit a **Withdraw Practitioner – Request ID #####** in Incomplete status:

1. Select **Update Information** hyperlink.
2. Make desired changes to the required fields in the **Withdrawal Information** section.
3. Upload **Supporting Documentation**, if any. Refer to Section 3.4.3 for instructions on uploading a file.
4. Add a remark in the **Request Notes** section, if applicable. Refer to Section 3.4.4 for instructions on adding a remark.
5. Certify the accuracy of the information provided by completing the **Confirmation** section.
6. Select the **Save** button.

Figure 43: Withdraw Practitioner

4.2.3.4   Add New Staff

The **Add New Staff** page allow you to add a new staff member to your practice.

If you want to add a new staff member:

1. Complete the required fields in the **Staff Details** section.
2. Certify to the accuracy of the information provided by completing the **Confirmation** section.
3. Select the **Save** button.

Figure 44: Add New Staff

4.2.3.5   Staff Information

The **Staff Information** page allow you to view the details of the staff member. When you initially navigate to this page, it is read-only.

If you want to edit Staff Information:

1. Select the **Update Information** hyperlink.

2. Make desired changes to the **Staff Details** section.

3. Select the **Save** button.

Figure 45: Staff Information

4.2.4   Request History

The **Practice Request History** page allows you to view and/or edit the following types of requests by selecting the Request ID from the Request History table:

- Add New Practitioner
- Add New Staff
- Delete Staff
- Request for Extension or Correction
- TIN Change
- Withdraw Practitioner

If you want to export the Practice Request History information:

1. Select the **Export** button.
2. Open/Save the **T#MD####_PracticeRequestHistory_YYYY_MM_DD** in Excel file format.

   Note: The file should reflect the content from the **Request History** table.

Figure 46: Practice Request History

4.2.4.1   Add New Practitioner Request

The **Add New Practitioner – Request ID #####** page allow you to view the details for a submitted Add New Practitioner request.

The following table details the actions you can take on the **Add New Practitioner Request** page in each request status:

Table 5: Add New Practitioner – Request Page Actions

If you select a request in status…	You can…
Pending	- View request details. - Add a remark in the **Request Notes** section.
Incomplete	- View request details. - Edit practitioner details by selecting the **Update Information** hyperlink. - Add a remark to the **Request Notes** field.
Approved or Rejected	View request details.

Figure 47: Add New Practitioner Request

4.2.4.2   Withdraw Practitioner Request

The **Withdraw Practitioner - Request ID #####** page allow you to view the details for a submitted Withdraw Practitioner request.

The following table details the actions you can take on the **Withdraw Practitioner Request** page in each request status.

Table 6: Withdraw Practitioner Request Page Actions

If you select a request in status…	You can…
Pending	• View request details. • Add a remark in the **Request Notes** section.
Incomplete	• View request details. • Edit Withdrawal Information by selecting the **Update Information** hyperlink. • Add a remark to the **Request Notes** field.
Approved or Rejected	• View request details.

Figure 48: Withdraw Practitioner Request

4.2.4.3   Add New Staff Request

The **Add New Staff - Request ID #####** page allow you to view the details for adding new staff to a practice. The request status for the Add New Staff Request is always Complete, as no approval from MDPCP Support is required.

Table 7: Add New Staff Request Page Actions

If you select a request in status…	You can…
Completed	1. View request details.

Figure 49: Add New Staff Request

4.2.4.4   Delete Staff Request

The **Delete Staff Request ID - #####** page allow you to view the details for a submitted Delete Staff request. The Delete Staff Request always displays in Completed status.

The following table details the action you can take on the **Delete Staff Request** page in Completed status.

Table 8: Delete Staff Request Page Actions

If you select a request in status…	You can…
Completed	• View request details.

Figure 50: Delete Staff Request

4.2.4.5   TIN Change Request

The **TIN Change – Request ID #####** page allow you to view the details for a submitted TIN Change request.

The following table details the actions you can take on the TIN Change Request page in each request status.

Table 9: TIN Change Request Page Actions

If you select a request in status…	You can…
Pending	1. View request details. 2. Add a remark to the **Request Notes** section.
Incomplete	1. View request details. 2. Edit TIN Change Details by selecting the **Update Information** hyperlink. 3. Add a remark in the **Request Notes** section.
Approved or Rejected	1. View request details.

Figure 51: TIN Change Request

4.2.4.6   Request for Extension or Correction Request

The **Request for Extension or Correction Request** page displays the details necessary to request a Practice Reporting Request for Extension or Correction for a practice.

The following table details the actions you can take on the Request for Extension or Correction page in each request status.

Table 10: Request for Extension or Correction Actions

If you select a request in status…	You can…
Pending	1. View request details. 2. Add a remark to **Request Notes**.
Incomplete	1. View request details. 2. Edit Request for Extension or Correction Details by selecting **Update Information**. 3. Add a remark to **Request Notes**.
Approved or Rejected	1. View request details.

Figure 52: Request for Extension or Correction Request

4.2.5   Documents

The **Practice Documents** page provides access to the documents for a practice within Track 1 or Track 2. Documents available for download are:

- Letter of support from Clinical Leadership

- Letter of support from Chesapeake Regional Information System for our Patients (CRISP)

- Letter of support from Parent of Owner Organization

- Participation Agreement (signed)

The Practice Documentation table displays the File Name, File Type, Date Added, and the option to download.
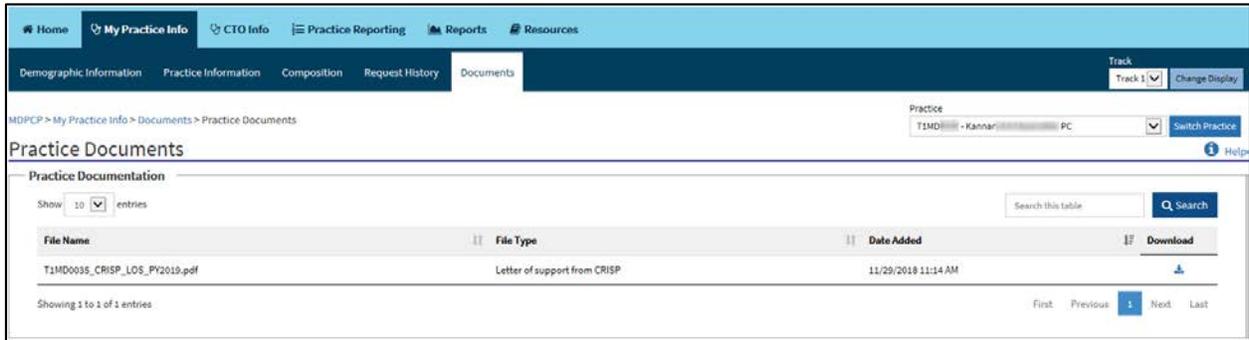
Figure 53: Practice Documents

4.3   Practice Reporting

The **Practice Reporting** tab provides access to the Practice Reporting Overview, Function, General, and CTO Reporting pages. You will need to complete all of the applicable Function pages and submit the General Information page during the practice reporting submission period each quarter. Once all of these pages are completed, they are displayed as read-only and the **Update Information** hyperlink is displayed until the end of the submission period. You may view your partner CTO Reporting page by selecting the **CTO Reporting** subtab.

If you want to edit your practice's previously submitted Practice Reporting information while the submission period is open:

1. Select **Update Information** on the page that requires changes.

2. Make changes to desired fields.

3. Select **Save**. Complete and Save any affected Function pages.

4. Certify the accuracy of the information provided by completing the **Confirmation** on the **General Information** page.

5. Select **Save**.

If you are associated to a CTO and want to view the CTO Reporting page:

1. Select the **CTO Reporting** tab.

2. The system navigates to the **CTO Reporting** page.

Note: If you are not associated to a CTO, the system shall display an informational message at the top of the page.

4.3.1   Overview

The **Overview** page displays the Practice Reporting Progress Summary information for your associated practice. This page contains a table for each of the five Functions and General information, which displays all of the pages contained in the sub-module and their respective completion status. You may also initiate a Request for Extension or Correction from this page.

If you want to navigate to one of the Function or General pages:

1. Select the page name from the **Practice Reporting Progress Summary** section.

2. The system will navigate to the selected page.

If you want to initiate a Request for Extension or Correction:

1. Select **Request for Extension or Correction.**

2. The system navigates to the **Request for Extension or Correction** page.

3. Refer to Section 4.3.1.1 for actions you can take on the **Request for Extension or Correction** page.

Figure 54: Practice Reporting Overview

4.3.1.1   Request for Extension or Correction

The **Request for Extension or Correction** page allows you to submit a request to extend the Practice Reporting submission period for late submission or data correction.

If you want to submit a request:

1. Verify the **Request for Extension or Correction Details**.
2. Enter the **Reason for Extension or Correction**.
3. Certify the accuracy of the information provided by completing the **Confirmation**.
4. Select **Save**.

Figure 55: Request for Extension or Correction

4.3.2   Function 1

Function 1 allows you to report information pertaining to access and continuity at your practice.

4.3.2.1   Empanelment

The **Empanelment** page allows you to identify how your practice empanels beneficiaries, count of panels, count of empaneled attributed beneficiaries, count of attributed beneficiaries, active beneficiary lookback period. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Note: The value entered for **Total number of attributed beneficiaries empaneled with a practitioner or care team at your practice** is reflected on the **Identifying Beneficiaries for Care Management** page.

Figure 56: Empanelment

4.3.2.2   24/7 Access

The **24/7 Access** page allows you to identify if a practitioner or care team member provides 24/7 coverage, if 24/7 access is available for your Electronic Health Record (EHR). Additionally, you are required to give details regarding assistance provided by a state practice coach or an outside contractor or consultant.

Note: If you are associated with a CTO, you will be required to provide information regarding assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 57: 24/7 Access

4.3.2.3   Continuity of Care

The **Continuity of Care** page allows you to identify how your practice tracks continuity of care and the scheduling strategies used. Additionally, you are required to give details regarding assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save.** This page is applicable for Quarter 1 and Quarter 3.

Figure 58: Continuity of Care

4.3.2.4   Enhanced Access and Communication

The **Enhanced Access and Communication** page allows you to report how often your practice is able to provide access and communication services to beneficiaries. You are also able to identify the types of alternative approaches to care your practice provided in the last quarter, the amount of patients who received alternative care, and who provided the alternative care. Additionally, Track 2 practices may also provide information on the ways they used Comprehensive Primary Care Payment (CPCP) to increase non-traditional office visits. Additionally, you are required to give details regarding assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Figure 59: Enhanced Access and Communication

4.3.3   Function 2

Function 2 allows you to report information pertaining to care management for high-risk, high-need beneficiaries at your practice.

4.3.3.1   Risk Stratification

The **Risk Stratification** page allows you to identify if you risk stratify your empaneled beneficiaries, the types of risk stratification your practice uses, the types of data-driven algorithm and care team/clinical intuition factors used for risk stratification, the type of prompts that are used for reassessment of a beneficiary's risk stratification, and if risk stratification is integrated with EHR. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

To complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 60: Risk Stratification

4.3.3.2   Identifying Beneficiaries for Care Management

The **Identifying Beneficiaries for Care Management** page allows you to categorize how the practice's beneficiary population is risk stratified and report how the practice identifies beneficiaries for episodic care management.

You are able to provide the **Level of Risk (highest risk at the top)** of your empaneled beneficiaries.

The value for **Total empaneled beneficiaries** is auto-populated from the **Empanelment** page. You must complete 1.3 Empanelment prior to completing this page. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Note: The system auto-calculates some of the values based on the responses provided.

Figure 61: Identifying Beneficiaries for Care Management

4.3.3.3   Care Management Staffing

The **Care Management Staffing** page allows you to identify the clinicians or staff primarily responsible for care management and coordination activities. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 62: Care Management Staffing

4.3.3.4   Identifying Hospitals and Emergency Departments (EDs) Your Beneficiaries Use

The **Identifying Hospitals and EDs Your Beneficiaries Use** page allows you to identify up to three of the top hospitals and EDs used most by your beneficiaries over the current quarter.

The hospital and ED names identified on this page are reflected on the **Beneficiary Follow-Up – Hospital and ED Discharge** page and **Identifying and Communicating with Hospitals & EDs Your Beneficiaries Use** page. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Figure 63: Identifying Hospitals and EDs Your Beneficiaries Use

4.3.3.4.1   Beneficiary Follow-Up – Hospital and ED Discharge

The **2.5.1 Beneficiary Follow-Up for Hospital and ED Discharge** page allows you to identify the number of beneficiaries discharged from the ED and/or hospital during the current quarter. You may provide information on beneficiaries who received follow-up contact within one week after discharge from the ED and within two business days after discharge from the hospital.

The hospital and ED names are auto-populated from the **Identifying Hospitals and EDs Your Beneficiaries Use** page. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Note: The system auto-calculates some of the values based on the responses provided.

Figure 64: Beneficiary Follow-Up – Hospital and ED Discharge

4.3.4   Function 3

Function 3 allows you to report information pertaining to comprehensiveness and coordination at your practice.

4.3.4.1   Coordinated Referral Management with Specialists

The **Coordinated Referral Management with Specialists** page allows you to identify the formal coordinated referral management agreements made with high-cost specialists and healthcare organizations. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Figure 65: Collaborative Care Agreements with Specialists

4.3.4.2   Identifying and Communicating with Hospitals & EDs Your Beneficiaries Use

The **Identifying and Communicating with Hospitals and EDs Your Beneficiaries Use** page allows you to provide information regarding coordination and communication with hospitals and EDs where your beneficiaries seek care. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

The hospital and ED names are auto-populated from **Identifying Hospitals and EDs Your Beneficiaries Use**.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 66: Identifying and Communicating with Hospitals and EDs Your Beneficiaries Use

4.3.4.3   Behavioral Health Integration

The **Behavioral Heath Integration** page allows you to provide information on your practice's primary behavioral health strategy, identify the mental health conditions targeted by that strategy, and the types of targeted tactics that are available for beneficiaries. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 67: Behavioral Health Integration

4.3.4.4   Linkages with Social Services

The **Linkages with Social Services** page allows you to report if you routinely screen your beneficiaries for unmet social needs, the type of screen tools that are used, and if those tools are integrated with EHR. You must also indicate which social needs your practice has prioritized. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 68: Linkages with Social Services

4.3.4.4.1   *Coordinating with Social Service Resources*

The **Coordinating with Social Service Resources** page allows you to specify how frequently your inventory of social service resources is updated, if the inventory is integrated with EHR, and with which resources you have established relationships to address prioritized areas. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In addition, you will be required to provide valid responses to prompts for details of the assistance provided by a state practice coach or an outside contractor or consultant.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 69: Coordinating with Social Service Resources

4.3.5   Function 4

Function 4 allows you to report information pertaining to beneficiary and caregiver engagement at your practice.

4.3.5.1   Engaging Beneficiaries and Caregivers in Your Practice

The **Engaging Beneficiaries and Caregivers in Your Practice** page allows you to report how frequently your practice engages beneficiaries and caregivers in activities and provide information to your practice's Patient and Family Advisory Council (PFAC). Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Figure 70: Engaging Beneficiaries and Caregivers in Your Practice

4.3.5.2   Self-Management Support for Selected Conditions

The **Self-Management Support for Selected Conditions** page allows you to select conditions for which your practice provides self-management support, identify how your practice selects beneficiaries for self-management support, and report how frequently your practice implements aspects of self-management support. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

This page is applicable for all quarters.

Figure 71: Self-Management Support for Selected Conditions

4.3.6   Function 5

Function 5 allows you to report information pertaining to planned care and population health at your practice.

4.3.6.1   Team-Based Care

The **Team-Based Care** page allows you to identify how often care teams at your practice have structured huddles and scheduled meetings, how often clinical activities are delegated to members of the care team, and how often care teams review quality improvement data. Additionally, you will be required to give details of the assistance provided by a state practice coach or an outside contractor or consultant.

If you are associated to a CTO, you will be required to provide valid responses to prompts for details of the assistance provided by your partner CTO.

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for Quarter 1 and Quarter 3.

Figure 72: Team-Based Care

4.3.7   General

The General sub-module allows you to report general information about your practice.

4.3.7.1   General Information

The **General Information** page allows you to rate how useful your practice finds each MDPCP communication type and estimate the number of hours spent collecting and inputting care delivery data. You will be required to certify that your practice's demographic, organization details and composition information is accurate. In addition, you will be required to list the primary point of contact (POC) for completing the practice reporting and certify the accuracy of the information provided.

You must complete all of the Function pages prior to completing this page. If the Function pages are not completed, the system will display the following text: "This section can only be completed after you have completed all other sections of your care delivery reporting."

In order to complete this page successfully, provide valid responses to the prompts and select **Save**. This page is applicable for all quarters.

Figure 73: General Information

4.3.8   CTO Reporting

The CTO Reporting sub-module allows you to view your CTO's verification of assistance you indicated on the Function pages. This page is applicable only if you are associated to a CTO.

4.3.8.1   CTO Reporting

The **CTO Reporting** page allows you to view your partner CTO's information, Practice Assistance Verification, CTO Information Verification, Reporting Point of Contact, and Confirmation. This page is applicable for all quarters.

Figure 74: CTO Reporting

4.4   Payment & Attribution

The **Payment & Attribution** tab provides access to the Payment & Attribution subtab. The Payment & Attribution subtab provides access to the Practice Payment & Attribution page and the Beneficiary Attribution Report.

4.4.1   Practice Payment & Attribution

The **Practice Payment & Attribution** page allow you to view your practice's payment information. In addition, this page allow you to access Beneficiary Attribution reports, if available. This page is read-only and maintained quarterly.

If you want to request access to a Beneficiary Attribution Report for the first time, you must acknowledge the Health Insurance Portability and Accountability Act (HIPAA) agreement:

1. Select the corresponding **Download** icon for the report.

2. The system navigates to the **Request for Personally Identifiable Information for Attributed Beneficiaries** page. Refer to Section 4.4.1.1 for information on how to acknowledge the HIPAA agreement on the **Request for Personally Identifiable Information for Attributed Beneficiaries** page.

If you want to download a Beneficiary Attribution Report that already has a signed HIPAA agreement:

1. Select the corresponding **Download** icon for the report.

2. Open or save the **T#MD####_BeneAttrRpt_CY####_Q#_YYYYMMDD** file.

If you want to view the signed HIPAA agreement for a practice's Beneficiary Attribution Report:

1. Select the hyperlink in the **HIPAA Submission** column of the table.

2. The system navigates to the completed **Request for Personally Identifiable Information for Attributed Beneficiaries** page, which is displayed as read-only.

Figure 75: Practice Payment & Attribution

4.4.1.1   Request for Personally Identifiable Information (PII) for Attributed Beneficiaries

The **Request for Personally Identifiable Information for Attributed Beneficiaries** page allows you to request access to a Beneficiary Attribution Report by acknowledging the HIPAA agreement.

If you want to submit the HIPAA acknowledgement on behalf of your practice:

1. Review the HIPAA agreement.

2. Select a radio button option from the prompt.

3. Select the **Submit** button.

Figure 76: Request for PII for Attributed Beneficiaries

4.5   Resources

The Resources tab provides access to the MDPCP Resources page. The MDPCP Resources page contains documents and helpful links to resources outside the MDPCP Application that are pertinent to participation.

4.5.1   MDPCP Resources

The **MDPCP Resources** page contains the Resource Documents and Helpful Links sections.

4.5.1.1   Resource Documents

The Resource Documents table displays resource files and allows you to download the following forms:

- CMS 588 Form – Electronic Funds Transfer (EFT) Information
- CMS 588 Form – Frequently Asked Questions (FAQ)
- CMS 855R Form – Medicare Enrollment Application
- CMS Non-Data Use Agreement (DUA) Tracking Form Completion Instructions
- Enterprise Privacy Policy Engine (EPPE) Batch Processing Template
- MDPCP Identity Practice Portal Proofing Form

The Resource Documents table displays the File Name, File Type, and Date Added and provides the option to download.

Figure 77: MDPCP Resources

4.5.1.2   Helpful Links

The **Helpful Links** section allow you to view the following external links:

- MDPCP Connect Website
- CQM Aligned Population Health Reporting Tool (CALiPHR)

Helpful Links	
Page Description	**URLs**
MDPCP Connect Website	MDPCP Connect
CQM Aligned population Health Reporting Tool	CALiPHR

Figure 78: Helpful Links

5.   Troubleshooting & Support

5.1   Error Messages

Each page in the MDPCP Application has its own specific error messages that will inform you of the error encountered and what action needs to be taken to save the page.

If you want to navigate to the impacted field for the alert messages that are displayed on top of the page:

1. Select the error message in the red box.
2. The system will navigate you to that field.

5.2   Special Considerations

Not applicable.

5.3   Support

For any issues pertaining to the MDPCP Application, please contact the MDPCP Support Team. Refer to the table below for contact information.

Table 11: Support Points of Contact

Contact	Organization	Phone	Email	Role	Responsibility
MDPCP Support Team	Innovation Sites Business Operations Support Contract (IBOSC)	1-844-711-2664	MarylandModel@cms.hhs.gov	Support	MDPCP General Support

Appendix A: Record of Changes

Table 12: Record of Changes

Version Number	Date	Author/Owner	Description of Change
0.1	12/10/2018	Adedamola Adenikinju	Draft for Release 2.0
0.2	12/11/2018	Sravanthi Vakada	Peer Review
0.3	12/20/2018	Najha Jones	QA Review of highlights only
0.4	12/20/2018	Barb Miller	Address QA comments
1.0	12/21/2018	Najha Jones	Final

Appendix B: Acronyms

Table 13: Acronyms

Acronym	Literal Translation
APM	All-Payer Model
ARS	Acceptable Risk Safeguard
CALiPHR	CQM Aligned Population Health Reporting Tool
CMF	Care Management Fee
CMMI	Center for Medicare & Medicaid Innovation
CMS	Centers for Medicare & Medicaid Services
CMSR	CMS Minimum Security Requirements
CPC+	Comprehensive Primary Care (CPC) Plus
CPCP	Comprehensive Primary Care Payment
CQM	Clinical Quality Measures
CRISP	Chesapeake Regional Information System for our Patients
CRP	Care Redesign Program
CTO	Care Transformation Organization
DUA	Data Use Agreement
ED	Emergency Department
EFT	Electronic Funds Transfer
EHR	Electronic Health Record
EIDM	Enterprise Identity Management
EIT	Electronic and Information Technology
ePortal	Enterprise Portal
EPPE	Enterprise Privacy Policy Engine
FAQ	Frequently Asked Question
HIPAA	Health Insurance Portability and Accountability Act

Acronym	Literal Translation
HIT	Health Information Technology
IC	Innovation Center
IE	Internet Explorer
IS	Information Services
ISBOSC	Innovation Sites Business Operations Support Contract
LOA	Level of Assurance
MDPCP	Maryland Primary Care Program
MFA	Multi-Factor Authentication
NPI	National Provider Identifier
OS	Operating System
PDF	Portable Document Format
PFAC	Patient and Family Advisory Council
PII	Personally Identifiable Information
POC	Point of Contact
PV	Privileged
PY	Program Year
Qtr	Quarter
RIDP	Remote Identity Proofing
SSN	Social Security Number
TCOC	Total Cost of Care
TIN	Taxpayer Identification Number
XLC	eXpedited Life Cycle

Appendix C: Glossary

Table 14: Glossary

Term	Acronym	Definition
Enterprise Privacy Policy Engine	EPPE	System that tracks all disclosures of CMS data.
Health Insurance Portability and Accountability Act	HIPAA	Legislation that provides data privacy and security provisions for safeguarding medical information.

Appendix D: Referenced Documents

Not Applicable.

Appendix E: Approvals

Table 15: Approvals

Document Approved By	Date Approved
_____ Dawn Alley, Business Owner, CMMI State Innovations Group	_____ TBD
_____ Rebecca VanAmburg, Business Owner (Rep), CMMI State Innovations Group	_____ TBD
_____ Katie Shannahan, Business Owner (Rep), CMMI State Innovation Group	_____ TBD
_____ Velda L. McGhee, IT Lead, CMMI Business Services Group	_____ TBD
_____ Don Rocker, OIT PMO, CMS Office of IT	_____ TBD
_____ Diane Gray, Project Manager, ActioNet	_____ TBD
_____ Ankit Gupta, Technical Project Manager	_____ TBD
_____ Sravanthi Vakada, Lead Business Analyst	_____ TBD
_____ Murali Goriparthi, Lead Architect	_____ TBD