Bundled Payments for Care Improvement Advanced **BPCI Advanced** 



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## **CMS Data Portal User Guide**

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#### User Guide Outline

- Data Portal Overview
- Helpful Tips Before You Begin
- <u>Section 1 Registering for CMS Identity Management</u>
  - <u>CMS IDM Account Verification</u>
  - <u>Create a CMS IDM Account</u>
- <u>Section 2 Requesting Access to the Innovation Center Web Application</u>
  - Logging into the CMS Data Portal
  - <u>Requesting Access to the Innovation Center Web Application</u>
- <u>Section 3 Requesting Access to the BPCI Advanced Application</u>
- <u>Section 4 Accessing the BPCI Advanced Data Portal</u>
- Section 5 Navigating the BPCI Advanced Data Portal
  - Downloading Files
  - <u>Uploading Files</u>
- Need Help?
- <u>Appendix</u>

## Portal Link: <a href="https://portal.cms.gov/">https://portal.cms.gov/</a>

The **<u>CMS Data Portal</u>** is an online platform that allows users to access:

- Preliminary and updated Target Prices
- Baseline claims data
- Monthly claims data
- Reconciliation Reports
- Quality Measure Reports



#### Use this guide if you are a:

- New user who has never navigated the Data Portal
- Former BPCI Advanced Participant who is reapplying to BPCI Advanced in Model Year 7
- Current Participant who is interested in knowing more about the Data Portal

- Users with a CMS Identity Management (IDM) account for the Application Portal and/or Participant Portal should use the same IDM account in the Data Portal.
- If you do not have an IDM account, you must create one. CMS policy requires that the combination of each user's first name, last name and email address be unique in the IDM System.
- If an error occurs during IDM account creation, it could mean that the combination of information entered is already in use. Users should try entering the information again, contact the BPCI Advanced Help Desk for assistance at: <u>BPCIAdvanced@cms.hhs.gov</u>, or call **1-888-734-6433**, Option 5.
- Please ensure that your web browser is up to date and is one of the following browsers:
  - Microsoft Edge
     Google Chrome
     Mozilla Firefox
     Apple Safari
- Passwords can only be changed once every 24 hours.
- As a new user, we suggest that you plan for at least 30 minutes, plus approval time, to complete all five sections in this User Guide. At the beginning of each section, we include a time estimate for completion.

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## **Section 1 – Registering for CMS IDM**



Step 1: CMS IDM Account Confirmation – Includes a flowchart for determining if you have a CMS IDM account.



Step 2: Create a CMS IDM Account – Includes instructions for creating a CMS
IDM account and setting up multifactor authentication.

#### CMS IDM Account Verification

Use the flowchart for determining if you have a CMS IDM account and click on the hyperlink to navigate to the specific instructions.



#### CMS IDM Login Page



#### Create a CMS IDM Account

Please DO NOT refresh the browser/tab during the registration process.

$\bullet \bullet $	errice × + dm.cms.gov/register?appid=cmsidm	~ ○ ☆ ★ □ 亀 :	
CMS.gov   IDM Self	Service		
All fields are required	UNIESS Personal Contact	© Credentials	
labeled as optional.	* Optional fields are labeled as (Optional).		
	First Name		
	Middle Name (Optional)		
	C Last Name		
	Suffix (Optional) ————————————————————————————————————		
	Date Of Birth MM/DD/YYYY		
	C E-mail Address		
Click the check box nex	tto	(5)	
"I agree to the terms ar	View Terms & Conditions	Click "Next" and any	swer
conditions."	□ I agree to the terms and conditions	the required question	ons q
	Cancel	the following pages	
I CMS restricts the us	o of VOPmail and norsenal email addresses	(AOL Vahaa Gmail ata) Maraguira	

email address.

The system will display a message that indicates the account was successfully created.

Your Registration Request has completed successfully. Please click the below link to return to your application.

#### Return

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Click "Return" and login with your existing CMS IDM credentials.

#### Login to Set Up Multifactor Authentication



#### Setting Up MFA

MFA is a process that requires the user to provide two or more verification factors, such as text message or email, to be able to login to the Application Portal. This is a CMS IT Security Protocol.



Only one authentication factor is required beyond your password; it does not have to be SMS authentication, which will send you a code via text message.

#### Setting Up MFA (cont.)

After the MFA device is set up, the "Set up multifactor authentication" window is displayed. A check mark indicator appears beside the device that was added.



After successfully setting up an authentication factor, it will appear under "Enrolled factors" with a green checkmark.

Only one authentication factor is required; adding more is optional.

Repeat these steps to add additional MFA options.

# Section 2 – Requesting Access to the Innovation Center Web Application



#### Logging into the CMS Enterprise Portal



#### Logging into the CMS Enterprise Portal (cont.)



#### Requesting Access to the Innovation Center (IC) Web Application

The CMS Enterprise Portal contains many applications, including the IC-Innovation Center application, which houses the BPCI Advanced Data Portal. After successful login, you will be welcomed to the CMS Enterprise Portal.



#### **Request Application Access**

Type in "Innovation Center" into the search box and select IC-Innovation Center.



#### Requesting Access to the IC Web Application (cont. 1)



### **Request Application Access**

The following is the step-by-step process for requesting a role in a CMS Enterprise Portal application. A summary of each step taken will be shown after each step. You will be presented with all your role related information to review at the last step. Please note that the number of steps and the questions asked will vary depending on the role that you are requesting and your current level of access.

You can review your current roles and pending role requests in My Access.



#### Step #1: Identity Verification Overview

To protect your privacy, you will need to complete Identity Verification successfully, before requesting access to the selected role. Below are a few items to keep in mind.

- 1. Ensure that you have entered your legal name, current home address, phone number, date of birth and email address correctly. We will only collect personal information to verify your identity with Experian, an external Identity Verification provider.
- 2. Identity Verification involves Experian using information from your credit report to help confirm your identity. As a result, you may see an entry called a "soft inquiry" on your Experian credit report. Soft inquiries do not affect your credit score and you do not incur any charges related to them.
- 3. You may need to have access to your personal and credit report information, as the Experian application will pose questions to you, based on data in their files. For additional information, please see the Experian Consumer Assistance website - <u>http://www.experian.com/help/</u>

If you elect to proceed now, you will be prompted with a Terms and Conditions statement that explains how your Personal Identifiable Information (PII) is used to confirm your identity. To continue this process, select 'Next'.



#### Step #2: Accept Terms & Conditions

#### including Federal employees, contractors, and other system users.

I have read the HHS Rules of Behavior for Privileged User Accounts (addendum to the HHS Rules of Behavior (HHS RoB), document number HHS-OCIO-2013-0003S and dated July 24, 2013), and understand and agree to comply with its provisions. I understand that violations of the HHS Rules of Behavior for Privileged User Accounts or information security policies and standards may lead to disciplinary action and that these actions may include termination of employment; removal or disbarment from work on federal contracts or projects; revocation of access to federal information, information systems, and/or facilities; criminal penalties; and/or imprisonment. I understand that exceptions to the HHS Rules of Behavior for Privileged User Accounts must be authorized in advance in writing by the OpDiv Chief Information Officer or his/her designee. I also understand that violation of certain laws, such as the Privacy Act of 1974, copyright law, and 18 USC 2071, which the HHS Rules of Behavior for Privileged User Accounts draw upon, can result in monetary fines and/or criminal charges that may result in imprisonment.

#### **Identity Verification**

I understand that the identity proofing services being requested are regulated by the Fair Credit R these services. I understand that any special procedures established by CMS for identity proofing by CMS to Experian will be used solely to confirm the applicant's identity to avoid fraudulent transaction

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After reviewing the Terms & Conditions, check "Agree to the Terms & Conditions."

✓ I agree to the Terms & Conditions

Next

that my explicit consent is required to use

Click "Next."

Cancel

CMS uses the Experian Remote Identity Proofing (RIDP) service to confirm your identity. Please note, the identity verification questions will be specific to you. Sample questions are displayed below.

All fields are required unless	red for Identity Verification.	Step #4: Verify Your Identity
labeled as optional.		
	tional)	1. You may have opened a (P S E C U) credit card. Please select the year in which your account was opened.
		O 2012
Social Security Number	Birth Month Birth Date	0 2014
	✓ ✓	O 2016
		O 2018
Is Your Address US Based?		O NONE OF THE ABOVE/DOES NOT APPLY
Yes 🔿 No		
Home Address Line 1		<ol> <li>You may have opened a mortgage loan in or around November 2021. Please select the lender to whom you currently make your mortgage payments. If you do not have a mortgage select "NONE OF THE ABOVE (DOES NOT ABOVE)"</li> </ol>
	Enter Home Addre	Hongage, select None of The Above/boes Not AFFEI.
		O ALLY FINANCIAL
City	ZIP Code	O PRUDENTIAL HOME MORTGAGE
Pennsylvania	~	
Phone Number		O STANDARD BANK
		O NONE OF THE ABOVE/DOES NOT APPEY
		3. Please select the county for the address you provided.
Email Address	Confirm Email Address	
Changing your email address will remove any email MFA that you cu	rrently	O TIOGA
have. You can register a new email MFA in "Manage MFA Devices".		O BUTLER
Check here if you have read and verified the information a	above is accurate and complete as required by Ide	O NORTHAMPTON
		O NONE OF THE ABOVE/DOES NOT APPLY
Back	Next <u>Cancel</u>	

If you do not complete the RIDP steps, you will need to start the registration process anew the next time. If the Identity Proofing process fails, contact Experian (1-866-578-5409).

If you have answered the identity verification questions correctly, a notification will display that you have successfully completed the verification process. You will then be redirected back to the Data Portal.

Ste	p #4: Ver	ify Your	Identit	у			
0	Confirma You have successfu	tion ×	lentity verificatio	on process.			

#### Requesting Access to the IC Web Application (cont. 6)



#### Requesting Access to the IC Web Application (cont. 7)



After clicking "OK"– you will be automatically directed to your CMS Enterprise Portal.

Iy Acces	SS				
ž∃ My Roles	• My Pending Requests	My Annual Certifications	🕚 My Request History		
The following	is a list of your existing application	s and associated roles. You can add rol	es to these applications below or request access to a	different application by selecting " <u>Add Applic</u>	cation".
	Applic	cation ^		Role 🗢	Actions
IC-Innovation Co	Applic	cation A	Innovation Center Privileged User (1)	Role 🗢	Actions Select Action 👻

## Section 3 – Requesting Access to the BPCI Advanced Application



#### Logging into the CMS Enterprise Portal



#### Logging into the CMS Enterprise Portal (cont.)





CMMI 9 Click "Request Access."
Home Request Access Confirm Access
Request Access       CMS Innovation Center         + Request New Access       Click "Request New Access."
Currently, there are no role requests displayed here.

#### Requesting Access to the BPCI Advanced Application (cont. 2)

CMMI	
Home Request Access	Confirm Access
Request Access   Cl	AS Innovation Center
All fields are required unless spec	rified as optional.
Application Name	✓ Please Select Application Name
Role	BPCI Advanced CMMI Centralized Data Exchange (CDX)
Justification	Comprehensive Care for Joint Replacement (CJR) Emergency Triage, Treat, and Transport (ET3) Expanded Data Feedback Reporting (eDER)
	Health Plan Initiatives (HPI)
	Innovation Center Business Intelligence Reports (ICBIR) Innovation Payment Contractor Portal (IPC Portal)

After selecting application name, please continue to the next slide with additional instructions on how to fill in the remaining fields based on your role and level of access.

Your access to the Data Portal varies depending on whether you were designated as a BPCI Advanced Data Primary Point of Contact (POC) on the Data Request and Attestation (DRA) form or if requested in an updated DRA. Users requesting access as a BPCI Standard User will need their access approved by a BPCI Data Primary POC, since they were not listed in the DRA.



#### Requesting Access to the BPCI Advanced Application (cont. 4)

#### BPCI Data Primary POCs can request access for up to 20 BPIDs in a single request.

Home Request Access	Confirm Access	
Request Access   CM	S Innovation Center	
All fields are required unless speci	fied as optional.	
Application Name	BPCI Advanced ~	
Role	BPCI Data Primary Point of Contact	
<sup>BPID</sup> BPID.	0001 - Test Participant 1 - 0001	4
Selected Value(s)	Select one or more BPID(s) by entering or choosing a value above, then clicking the Add Add button. Only following value(s) will be submitted.	Click "Add."
	<b>20</b> Value(s) remaining. Please note that individual requests will be generated if you select multiple values/sets.	
Justification	Enter justification	Continued on
	500 Character(s) remaining	the next page

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#### Requesting Access to the BPCI Advanced Application (cont. 5)

After clicking Confirm, a message will state that you have successfully submitted the request and identified the role requested. The system-generated request ID will also display in the message window.

Home <b>Request Access</b> Cont	firm Access	Request Confirmation Message
Request Access   CMS Ir	nnovation Center	
All fields are required unless specified as	s optional.	Please Note:
Application Name	BPCI Advanced ~	You have successfully submitted (1 requests out of 1) for BPCI Data Primary Point of Contact in the BPCI Advanced application.
Role	BPCI Data Primary Point of Contact	Successful Request(s):
BPID	Please enter your selection	Request ID: 190339, Attribute(s): BPID:0001-Test Participant 1 - 0001
Selected Value(s)	Select one or more BPID(s) by entering or choosing a value above, then clicking the Add Add button. Only following value(s) will be submitted.	• ок
	<b>19</b> Value(s) remaining. Please note that individual requests will be generated if you select multiple values/sets.	
Justification	Requesting access to BPCI Advanced Type in "Requesting	ng access to BPCI Advanced."
	466 Character(s) remaining ★ Cancel ✓ Confirm	Click "Confirm" to complete the request.

# Section 4 – Accessing the BPCI Advanced Data Portal



Enter the URL https://portal.cms.gov/ into your browser to access the CMS Enterprise Portal.



#### Logging into the CMS Enterprise Portal (cont.)



#### Accessing the Innovation Center Application

After logging in, you will be directed to the CMS Enterprise Portal.



Depending on the Participant, the Application Console may display multiple applications.

nnovat	tion Cent	er I Appl	ication Cor	nsole	
Applications	Request Access	My Requests	Approve Requests	Email Notifications	
Applicatio	<b>ns</b>   CMS Inno	vation Cente	r		
BPCI_Adv BPCI Advanced					
lelp at PCIAdvanced@	ecms.hhs.gov				

# Section 5 – Navigating the BPCI Advanced Data Portal



#### **Downloading Files**

After selecting BPCI Advanced from the Applications Console, you will be directed to the BPCI Advanced Data Portal. This example demonstrates the process for identifying files you may download.



This example demonstrates the process of downloading the preliminary Target Prices files.

CMS.gc	W My Enterprise Portal	🗮 My Apps		<u> Nineteen AppAdmi</u> .	▼ ? <u>Help</u> 🕞 Log Out
0001	Historical Raw Claims Data	11.790 KB	05/16/2023 11:59AM	Successful	Ŧ
0001	Calculation Error Notice and Reconsideration Review Response	11.790 KB	05/16/2023 11:59AM	Successful	Ŧ
0001	Secondary Repayment Source File	11.790 KB	05/16/2023 11:59AM	Successful	Ŧ
0001	Target Prices - Final Update	11.790 KB	05/16/2023 11:59AM	Successful	🛃 🗸 Complete
0001	Preliminary Target Prices	11.790 KB	05/16/2023 11:59AM		🛃 🗸 Complete
0001	Baseline Summary Data	11.790 KB	05/16/2023 9:28AM		iloc click the groon
				download sym	ibol.

#### Uploading Files

This example demonstrates the process of uploading supporting documents to a specific BPID. BPCI Advanced allows Participants to submit a Calculation Error Notice (CEN) if they suspect errors in their Reconciliation. As part of the CEN process, Participants may be asked to submit supporting documents for a Reconsideration Review.



### Uploading Files (cont.)

Select File Information						
BPID			File Type			
0001		•	Supporting Document 7		•	
Select Your File and Add C Select File	Comments ck "Select File" to ile from your dev	o cho vice.	ose 8	Once the fi "Upload" to to be uploa	le is selecte o submit do ided.	d, click ocument
File Name	File Size	Fi	le Upload Information			
TestoneFile.csv	5.0 KB			Lupload	TRemove	

Once upload is complete, a successful upload notification will display.

Select Your File and Add Comments	
Vour file: Testone File csy has been successfully unloaded	~
Tour me. resioner neless nais been successivity uploaded.	^

#### Resources Page

The Resources Page will contain manuals and guides related to BPCI Advanced reports and data.

CMS.gov My Enterprise F	Portal	🗮 My Apps	A 0	Nineteen AppHelp 🔻	🕑 Help 🕞 Log Out	
BPCI Advanced Download F	iles Upload Files Resources					
Resources					The notification	
Help Desk	Manuals and Guides			Related Links	dropdown will alert	nt
BPCI Advanced Support BPCIAdvanced@cms.hhs.gov	File Name		Download	BPCI Advanced ( Bundled Payme	communications or	110
	BPC User Manual		Ŧ	Advanced Mode	notices.	
		N				
		h			Need Help? <b>P</b> Ask IC	

### Need Help?



- If you have trouble with the Registration process, contact the BPCI Advanced Help Desk at <u>BPCIAdvanced@cms.hhs.gov</u>
- If you fail the Identity Proofing process when requesting IC-Innovation Center application access, contact Experian (**1-866-578-5409**)
- If you have questions about BPCI Advanced, contact the Model Team at <u>BPCIAdvanced@cms.hhs.gov</u>



- **Overview of BPCI Advanced Portals**
- Selecting the Correct User Role for the BPCI Advanced Application
- <u>Resetting Your Password</u>

#### **Overview of BPCI Advanced Portals**

BPCI Advanced Portals	Portal Use
<u>CMS Enterprise/Data Portal</u>	<ul> <li>Online platform used by CMS to deliver:         <ul> <li>Preliminary and updated Target Prices</li> <li>Baseline claims data</li> <li>Monthly claims data</li> <li>Reconciliation Reports</li> <li>Quality Measure data</li> </ul> </li> <li>Please note, the Data Portal is hosted within the CMS Enterprise Portal and IC-Innovation Center Application (see graphic below)</li> </ul>
BPCI Advanced Participant Portal	<ul> <li>Online platform used by BPCI Advanced Participants to:         <ul> <li>Access organizational</li> <li>Add/Delete Participant POCs</li> <li>Download templates and submission of deliverables</li> <li>Access Participation Agreement, Amendments and DRA</li> <li>Verify Clinical Episode selection</li> <li>Document Library: Model communications and reference materials</li> </ul> </li> </ul>



#### Selecting the Correct User Role for the BPCI Advanced Application

Use the flowchart below to determine which role to request within the BPCI Advanced Data Portal. Please note that BPCI Advanced Standard Users will need their access approved by a BPCI Data Primary POC. BPCI Advanced Standard Users' approval time is dependent on the Data Primary POC's approval timing.



Participants may update their Data Primary POCs and data selections at any time by uploading a new version of their DRA in the Participant Portal. MY7 Applicants will be required to submit a Participant DRA after CMS selects them as Participants for MY7.

### Resetting Your Password

	Sign In			CMS.gov IDM
_	Username			
-				Reset Password
-	Password			
-				Email or Username Enter your email
13	Agree to our Terms & Conditions			or username.
41			F11	SMS or Voice Call can only be used if a mobile
11	Sign In		173	phone number has been conligured.
	OR		71	Reset via SMS
	CMS PIV Card Only			Reset via Voice Call
1	Attention CMS PIV card users: The CMS PIV Card button will be active after initial login using your 4 character CMS EUA ID.			Reset via Email
	Forgot your <u>Password</u> or <u>Unlock</u> your account?	~	3	Back to Sign In
				Click an option to reset your password.
Click	"Password" to reset your password			This example will demonstrate resetting
CIICK	rassword to reset your password.			the bassword via email.

#### Resetting Your Password (cont. 1)

Forgot Password **CMS**.gov Centers for Medicare & Medicaid Services CMS Identity Management System (IDM) Dear test BPCIAdv, A password reset request was made for your CMS IDM account. If you did not make this request, please contact your CMS application help desk immediately. Click the link below to reset the password for your username, testBPCIAdv: **Reset Password** This link expires in 4 hours.

If you experience difficulties accessing your account, please contact your CMS application help desk. To find your application help desk go to your <u>CMS IDM Partner Page</u>, and click the **Help Desk Support** link.

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The reset password link expires four hours after it is sent. If the link expires, you will have to repeat this process to get a new link.

eset password link

You will receive an email titled "Forgot Password." Click the green "Reset Password" button in the email.

#### Resetting Your Password (cont. 2)



Password must be at least 15 characters long and contain at least 1 uppercase, 1 lowercase and 1 number. Special characters are optional. Passwords cannot contain parts of the User ID, first name and last name. Password must be different from the last 6 passwords used.

#### Resetting Your Password (cont. 3)



### Resetting Your Password (cont. 4)

#### You will then be directed to the CMS.gov IDM homepage.

CMS.gov   IDM	Q Search your apps							cms 🖌
My Apps Work		My Apps ⊘ Work					Sort <b>v</b>	
Notifications (1)		Update Profile	servicenow. ServiceNow - PROD	CCSQ Saviynt	QARM - QualityNet Authorization and	construction const		
		Add section						