

data represents a group submission rather than an individual submission. For groups to elect participation via the CMS Web Interface or administration of the CAHPS for MIPS survey, CMS proposes that such groups must register by June 30 of the applicable 12-month performance period (that is, June 30, 2017, for performance periods occurring in 2017).

*AAFP Response*

We appreciate that CMS proposes to eliminate the necessity of a registration process for groups submitting data using third-party entities and instead, allowing them to work with appropriate third-party entities to ensure the data submitted clearly indicates that the data represents a group submission rather than an individual submission. We view this as a step in the direction of administrative simplification for many physician groups.

We understand the need for groups to register to elect participation via the CMS Web Interface. In this scenario, CMS essentially functions as the third-party entity and thus, requires registration as a condition of using its reporting mechanism. Besides, we note that this reporting option is voluntary. That said, we are most uncomfortable with CMS setting the registration deadline for this option at June 30, 2017 and recommend that CMS make the deadline September 30 instead. We believe September 30 provides CMS with sufficient time (i.e., 90 days) to process groups' registration via the CMS Web Interface.

We do not understand the necessity for groups to register to elect to report the CAHPS for MIPS survey or the necessity of setting a June 30 deadline for such registration. As we understand it, groups who choose this option also will use a third-party entity (i.e., a CMS-approved survey vendor), so we fail to see why such groups must be treated differently from groups who choose to use other CMS-approved third-party vendors, such as qualified registries, health IT vendors, and QCDRs. Further, we think the deadline for signing up with CAHPS survey vendors should be between the group and the vendor, not CMS. We note that, per the proposed rule, the group will need to use another submission mechanism (like qualified registries, QCDRs, EHR, etc.) to complete the quality data submission, which further suggests that these groups are no different from those whom CMS will otherwise exempt from the registration process. Absent a clear and compelling rationale for requiring CAHPS for MIPS survey users to register, we strongly recommend that CMS exempt them from the registration process like other groups using third-party entities.

e. Virtual Groups

(1) Implementation

CMS proposes that implementation of virtual groups for the calendar year 2017 performance period is infeasible "as a result of the insufficient timeframe to develop a web-based registration process." Instead, CMS proposes implementation of a web-based registration system for calendar year 2018 to provide the necessary time to establish and implement an election process and requirements applicable to virtual groups, and enable proper system development and operations. CMS intends to address all of the requirements pertaining to virtual groups in future rulemaking and requests comments on factors it should consider regarding the establishment and implementation of virtual groups.

*AAFP Response*

The AAFP is extremely disappointed that CMS has not proposed the rules for implementing virtual groups. However, we can understand CMS's proposal to delay implementation of virtual groups in light of the agency's workload relative to its available resources. Our members will experience similar "bandwidth" issues when it comes to implementing MACRA in their practices,