# Review and Dispute

# For Physicians and Teaching Hospitals

## Chapter 9: Review and Dispute for Physicians and Teaching Hospitals

This chapter provides information on the process for physicians and teaching hospitals in the Open Payments system to view records submitted regarding payments and other transfers of value, as well as ownership and investment interests, submitted about them from applicable manufacturers and applicable GPOs.

This chapter is divided into the following sections:

- **Overview of Review and Dispute**, which provides information on the review and dispute process within the Open Payments system.

- **Reviewing and Affirming Payments and Other Transfers of Value**, which provides information on how physicians and teaching hospitals can review and affirm data submitted about them by applicable manufacturers and applicable GPOs.

- **Initiating and Withdrawing Disputes**, which provides information on how physicians and teaching hospitals can initiate or withdraw a dispute of submitted data.

All physicians and teaching hospitals who choose to view data reported about them must register in both EIDM and Open Payments prior to accessing the system. See Chapter 8 for registration information.

Once an applicable manufacturer or applicable GPO has reported a payment or other transfer of value about a physician or teaching hospital, or physician ownership or investment interest, the physician or teaching hospital will be able to review the payment or transfer of value information and affirm or dispute the submitted data prior to it being made public. This process is referred to as "Review and Dispute." Any user who has permission to dispute records may initiate a dispute on any record they have access to.

The review and dispute period will start at least 60 days before the information is to be published for that program year. Physicians and teaching hospitals will work directly with reporting entities to resolve disputes outside of the Open Payments system.

If a dispute is not resolved before the end of the 60-day period, the latest, attested-to data submitted by the applicable manufacturer or applicable GPO will be published in the next data publication and identified as being under dispute.

Reviews and disputes can occur outside of this 60-day period; the review and dispute process is open year-round. If the applicable manufacturer or applicable GPO cannot resolve the dispute with the physician or teaching hospital within those 60 days, all parties should continue to seek a resolution. The process is outlined in Figure 9.1 below.

**Figure 9.1: Review, Dispute, and Correction Process**

| During | What Happens During Review? | What Happens During Dispute? | What Happens During Corrections? |
|---|---|---|---|
| **Day 1-45** | • Applicable manufacturers, applicable GPOs, physicians and teaching hospitals review their data before it is made public. | • Physicians and teaching hospitals can dispute information reported about them or their institutions.<br><br>• Disputes initiated during this 45-day period that are not resolved by the end of the period will be reflected in the public data as the record will be shown as under dispute.<br><br>• CMS will not mediate any dispute. | • Applicable manufacturers and applicable GPOs should work with the disputing physician or teaching hospital to correct disputed data.<br><br>• Applicable manufacturers or applicable GPOs must submit a revised report to make the corrections and re-attest to the updated data. |
| **> 45 Days** | • Applicable manufacturers and applicable GPOs seek to resolve disputes received from physicians and teaching hospitals.<br><br>• Physicians and teaching hospitals may continue to review the data. | • Physicians and teaching hospitals may continue to initiate disputes during this period but resolutions may not be reflected in publicly displayed data. | • Applicable manufacturers and applicable GPOs should work with physicians and teaching hospitals to make corrections.<br><br>• Corrections made to disputes may not be included in the next publication of data.<br><br>• Applicable manufacturers and applicable GPOs must send CMS a revised report to make the appropriate corrections and re-attest to the updated data. |

There is an initial 45-day period for physicians and teaching hospitals to review and dispute data submitted about them by reporting entities, and work with reporting entities to resolve the disputes. Immediately following that initial 45 days is an additional 15-day correction period for reporting entities to continue to work with physicians and teaching hospitals on dispute resolution.

Disputes initiated or resolved after the 60-day period will not be published in the initial publication of data. Those disputes and any related data changes will be published in the next publication of data, either in a refresh publication of the program year data or the publication of the next program year's data. In the publication, the data will be associated with the program year of the data, not the date of its publication. Disputes initiated within the initial 45-day review and dispute period, and resolved by the end of the additional 15-day correction period, will be published and identified as non-disputed in the initial public posting of data. Disputes initiated during the 15-day dispute correction period will not be in the initial public posting of data.

Figure 9.2 below explains how the dispute initiation and resolution timing affects the public display status of the data:

**Figure 9.2: Dispute Initiation, Resolution, and Public Display of Program Year 2013 Data**

| Timing of Dispute Initiation | Dispute Resolution Status Within 45-Day Initial Period or 15-Day Correction Period | Public Display Status |
|---|---|---|
| **Within 45-day review, dispute & correction period** | Resolved | Data, with any revisions from resolution, will be published as non-disputed in September 2014. |
| | Not resolved | Data published as disputed in September 2014. |
| **After 45-day review, dispute & correction period and prior to the review, dispute & correction period before the next data refresh or publication** | Resolved | Data published as non-disputed in both September 2014 and the subsequent data publication related to the 2013 program year data.<br><br>Any revisions to data due to resolution will appear in subsequent data publications |
| | Not resolved | Data published as non-disputed in September 2014 and as disputed in the subsequent data publication related to 2013 program year. |

\*\* The exact date may vary. Note that the rule does not require CMS to display the data as disputed if not resolved during this period.

Records that have been disputed will have one of the following dispute statuses:

- **Initiated:** indicates that a physician or teaching hospital has initiated a dispute against a record submitted by an applicable manufacturer or applicable GPO.

- **Acknowledged:** indicates that an applicable manufacturer or applicable GPO has received and acknowledged a dispute initiated against them by a physician or teaching hospital. Acknowledging a dispute will trigger a notification to the initiating physician or teaching hospital letting them know their dispute has been received.

- **Resolved, No Change**: indicates that either the applicable manufacturer or applicable GPO does not agree with a dispute initiated by a physician or teaching hospital or the applicable manufacturer or applicable GPO has discussed the dispute with the initiating physician or teaching hospital and it was determined that no change in the data was necessary. The physician or teaching hospital who initiated the dispute can initiate a new dispute if they disagree with "resolved, no change" status.

- **Withdrawn**: indicates that a physician or teaching hospital has withdrawn a dispute they initiated against a record submitted by an applicable manufacturer or applicable GPO.

- **Resolved:** indicates that disputed data was updated and then resubmitted and re-attested to by the applicable manufacturer or applicable GPO.

Emails transmitted to applicable manufacturers, applicable GPOs, physicians, and teaching hospitals from the Open Payments system for review and dispute will not contain contact information. For example, an email notifying a reporting entity of a dispute from a physician will contain only the information needed to locate the record in the Open Payments system. You can view a sample notification email for each review and dispute action in Appendix D. Contact information can be obtained only by opening the record within the Open Payments system itself.

## Section 9.1: Reviewing and Affirming Submitted Data

Physicians and teaching hospitals that have registered with the Open Payments system may review all payment, other transfer of value, and physician ownership or investment interest data submitted by an applicable manufacturer or applicable GPO about them. When the data has been reviewed and the physician or teaching hospital does not find discrepancies in the data submitted, they may choose to affirm that the record(s) are in good standing.
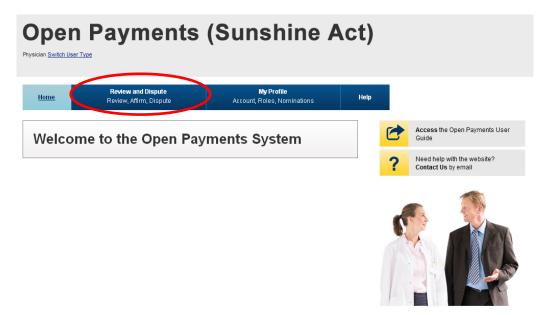
Records that have not been affirmed will still be included in the next data publication. Note that if you determine that a record you previously affirmed is in error, you can initiate a dispute on that record. The process for reviewing and affirming disputes is illustrated in Figure 9.3 below. Step-by-step walkthroughs of various scenarios follow.

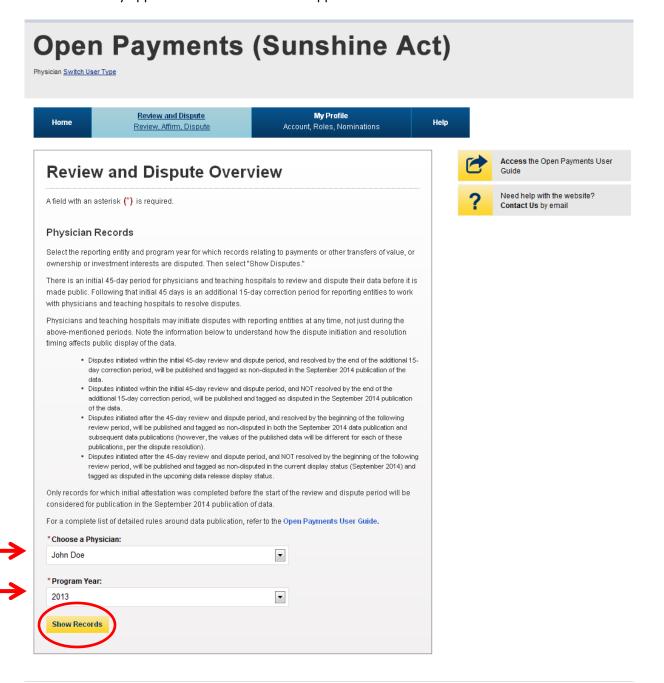**Figure 9.3: Review and Affirmation Process**



| Log in to Open Payments, Select "Review and Dispute" | Select Covered Recipient and Program Year | View Listed Records for the Covered Recipient | Select Record(s) to Affirm | Review Selected Records and Affirm Records |

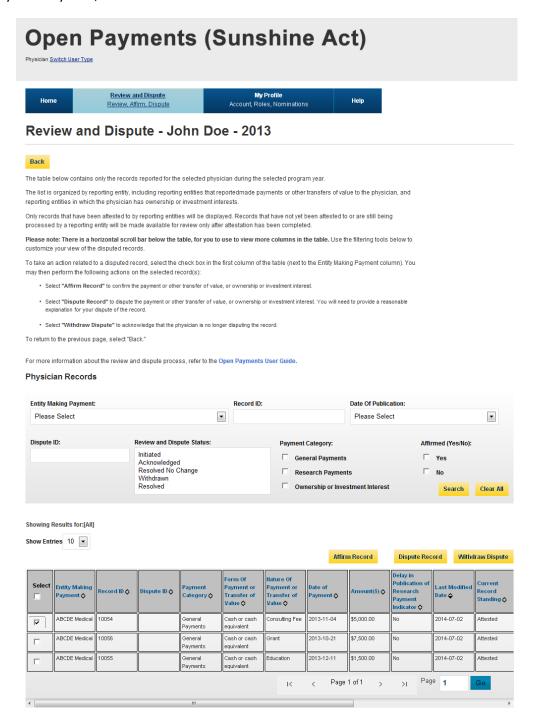## Section 9.1b: Physician – Reviewing and Affirming Submitted Data

Step 1: Access the Open Payments system via the CMS Enterprise Portal (https://portal.cms.gov/) and select the "Review and Dispute" tab.

Step 2: Select the physician and the appropriate program year for the physician you wish to review for data submitted by applicable manufacturers and applicable GPOs. Select "Show Records."
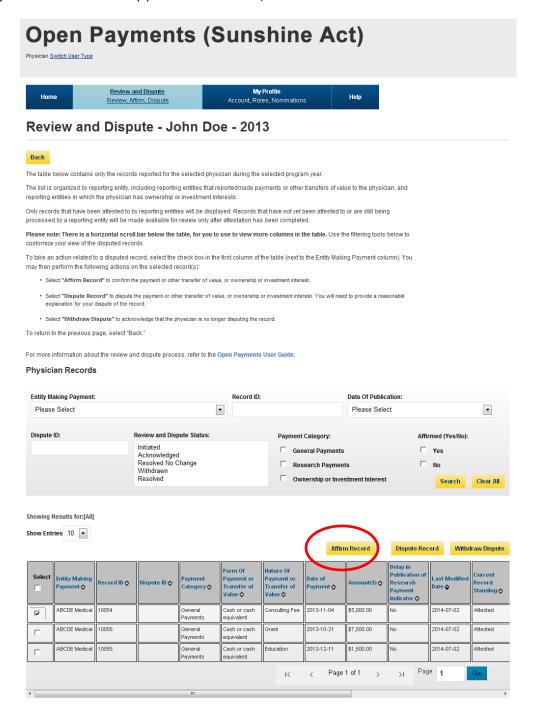
Step 3: On the records page, you will see a list of all submitted records for the selected physician. You may filter the records by selecting "Entity Making Payment" from the appropriate drop-down menu. You may further filter information by including the Record ID, Date of Publication and/or Dispute ID. You do not need to filter the results in order to proceed. Scroll to the right and select "View" under the column title "View Record" to view the record details. Please note that this information is only available on the Open Payments system, and cannot be downloaded.

Step 4: Review the information of the submitted record. When finished, select "Back" to return to the Records page.

Step 5: Select the record(s) you wish to affirm. You may only affirm records with a review and dispute status of "Resolved, No Change," "Withdrawn," or "Resolved," or record with no review and dispute status given. When the record(s) has been selected, select "Affirm Record."

Step 6: Review the information on the "Affirm Records" page. If the information is correct, select "Affirm Records." We will discuss disputing records later in the User Guide.

The following message will be displayed on the screen, confirming the success affirmation of the submitted record. Also, the record's "Affirmed Yes/No" indicator, visible in the view records table, will be set to Y.
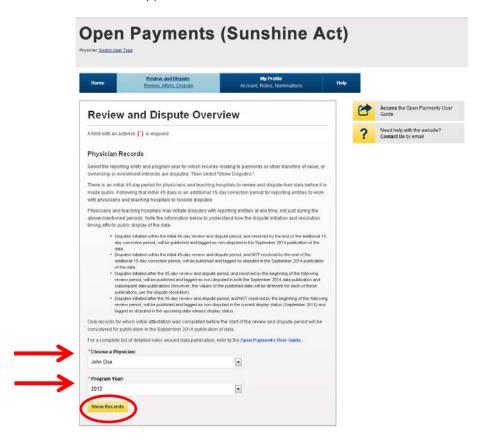


## Section 9.2: Initiating and Withdrawing Disputes

Data submitted regarding payments or other transfers of value to physicians or teaching hospitals by applicable manufacturers and applicable GPOs can be disputed by that physician or teaching hospital.

## Section 9.2c: Physician - Initiating a Dispute

Step 1: Access the Open Payments system via the CMS Enterprise Portal (https://portal.cms.gov/) and select the "Review and Dispute" tab.
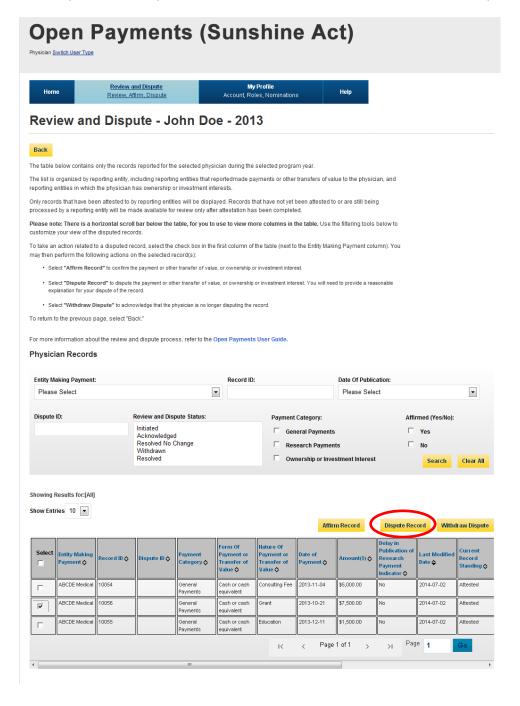


Step 2: Select the physician and the appropriate program year you wish to review for data submitted by applicable manufacturers and applicable GPOs. Select "Show Records."
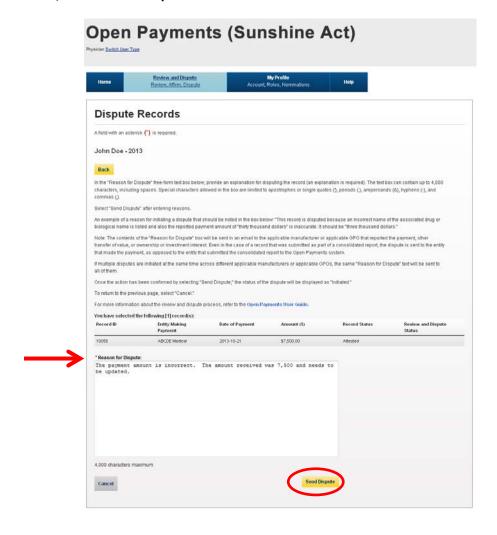
Step 3: On the Records page, you will see a list of all submitted records for the chosen physician. If you wish, you may filter the records by selecting the "Entity Making Payment" from the specified drop-down. You may also filter further by including the Record ID, Date of Publication and/or Dispute ID. You do not need to filter the results in order to proceed. You can also scroll to the right to view more information about the record. Scroll to the right and select "View" under the column title "View Record" to view the record details. Please note that this information is only available on the Open Payments system, and cannot be downloaded.

Select the record(s) you wish to dispute. When the record(s) has been selected, select "Dispute Record."
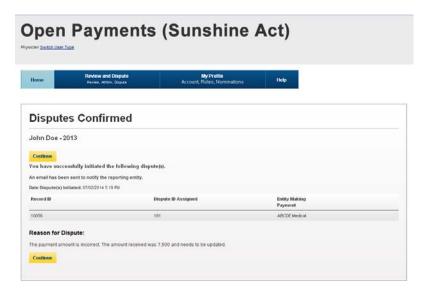
Step 4: Review the information on the "Dispute Records" page. You must enter a reason for dispute within the text box before continuing. The text box can contain up to 4,000 characters, including spaces. Special characters allowed in the box are limited to apostrophes or single quotes ('), periods (.), ampersands (&), hyphens (-), and commas (,).

**Note: As mentioned, you must provide a reason why the records are being disputed in the "Reason for Dispute" text box. If you have different reasons for each of the records being disputed, you may dispute one or more record(s) at a time with a common dispute factor, and enter the relevant reason for dispute. The contents of the "Reason for Dispute" box will be sent in an email to the reporting entity that reported the payment, other transfer of value, or physician ownership or investment interest. If multiple disputes are initiated at the same time across different reporting entities, the same "Reason for Dispute" text will be sent to all of the reporting entities included in the dispute. When finished, select "Send Dispute."**
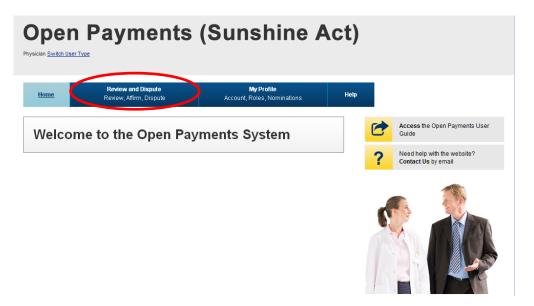
The following "Dispute Confirmed" message will be displayed on the screen. An email notification will be sent to the reporting entity.
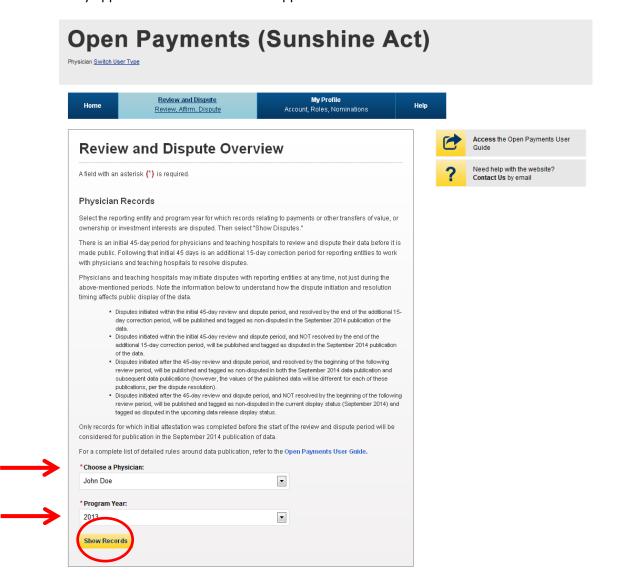


## Section 9.2d: Physician - Withdrawing a Dispute

Step 1: Access the Open Payments system via the CMS Enterprise Portal (https://portal.cms.gov/) and select the "Review and Dispute" tab.
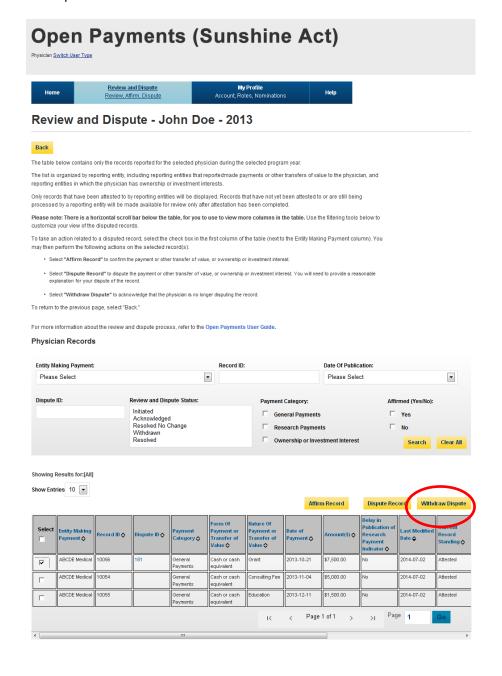


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Step 2: Select the teaching hospital and the appropriate program year you wish to review for data submitted by applicable manufacturers and applicable GPOs. Select "Show Records."

Step 3: On the Records page, you will see a list of all submitted records for the chosen physician. If you wish, you may filter the records by selecting the "Entity Making Payment" from the specified drop-down. You may also filter further by including the Record ID, Date of Publication and/or Dispute ID. You do not need to filter the results in order to proceed. Scroll to the right and select "View" under the column title "View Record" to view the record details. Please note that this information is only available on the Open Payments system, and cannot be downloaded.

Select the disputed record(s) you wish to withdraw. You may only withdraw disputes on records with a review and dispute status of "Initiated" or "Acknowledged." When the record(s) has been selected, select "Withdraw Dispute."

Step 4: Review the information on the "Withdraw Disputes" page. When finished, select "Withdraw Disputes."

The following message will be displayed on the screen. An email notification will be sent to the reporting entity.