

QPP Performance Information Published on the Medicare.gov Compare Tool

CY 2024 Doctors and Clinicians Public Reporting

Overview

The Centers for Medicare & Medicaid Services (CMS) is publicly reporting calendar year (CY) 2024 Quality Payment Program (QPP) performance information on the Medicare.gov [compare tool](#) and in the [Provider Data Catalog \(PDC\)](#).

Established by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), QPP is a quality payment incentive program that recognizes physicians and other eligible clinicians based on value and [Advanced Alternative Payment Models \(APMs\)](#). Medicare patients make informed health care decisions and incentivizes clinicians and groups to maximize their performance.

Publicly Reported CY 2024 QPP Performance Information

What information is displayed on profile pages?

Both clinicians and groups enrolled in Medicare have profile pages on the Medicare.gov compare tool. Clinician and group profile pages include general information (e.g., clinician specialties, practice locations, phone numbers) useful to Medicare patients and caregivers.

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Several indicators are publicly reported on clinician and group profile pages, as applicable (Table 1).

Table 1: CY 2024 Indicators on Clinician Profile Pages on the Medicare.gov Compare Tool

Icon	Indicator Description
	A green check mark and plain language description if a clinician provided some services through telehealth.
	A yellow caution symbol and plain language description if a clinician or group attested negatively to one or more of the prevention of information-blocking attestations in CY 2024.
	A green check mark and plain language description if a clinician or group successfully reported the Promoting Interoperability performance category by achieving a Promoting Interoperability performance category score above zero in CY 2024.
	A green check mark and plain language APM description if a clinician or group participated in selected APMs in CY 2024. Learn more about APM public reporting.

We also publicly report certain CY 2024 measure- and attestation-level QPP performance information on the profile pages of clinicians and groups to help Medicare patients and caregivers make informed decisions about the clinicians and groups they visit (Table 2).

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Table 2: CY 2024 Measure- and Attestation-Level Performance Information on Clinician Profile Pages on the Medicare.gov Compare Tool

Performance Information Type	Public Reporting Display	Icon Displayed	# Reported on Clinician Profile Pages	# Reported on Group Profile Pages
MIPS Quality Measures	Measure-level star rating	★★★★☆	58	67
Qualified Clinical Data Registry (QCDR) Measures	Measure-level star rating	★★★★☆	4	19
Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS Summary Survey Measures	Top-box percent performance scores	%	N/A	6
Promoting Interoperability Measures	Measure-level star rating	★★★★☆	4	3
Promoting Interoperability Attestations	Check mark attestation	✓	34	34
Improvement Activities	Check mark attestation	✓	98	98

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We also publicly report utilization data, specifically procedure volume, on the profile pages of clinicians. For more information on publicly reported data, review the [Public Reporting: Doctors and Clinicians Initiative webpage](#).

How does CMS decide which performance information to publicly report?

Only performance information that meets the established public reporting standards is selected for public reporting on the profile pages on the Medicare.gov compare tool and in the PDC. Quality and cost measures in their first 2 years of use aren't publicly reported ([§414.1395\(c\)](#)).

What are the established public reporting standards?

All clinician performance information on the Medicare.gov compare tool and in the PDC must meet the established public reporting standards ([§414.1395\(b\)](#)), except as otherwise required by statute. To be included in the PDC, performance information must:

- Be statistically valid, reliable, and accurate.
- Be comparable across collection types.
- Meet the minimum reliability threshold, as determined by statistical testing.

To be included on the profile pages on the Medicare.gov compare tool, clinician performance information must also resonate with Medicare patients and caregivers, as determined by user testing.

What information is available in the PDC?

The primary audiences for the [PDC](#) are clinicians, groups, and third-party data users (e.g., third-party intermediaries, researchers).

The PDC includes all CY 2024 QPP performance information from the profile pages on the Medicare.gov compare tool, additional MIPS performance information that wasn't

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selected for public reporting on profile pages, and MIPS final scores and performance category scores (as in quality, Promoting Interoperability, improvement activities, and cost).

The PDC also includes utilization data. A procedure volume data file is available and includes the procedure volume and category information publicly reported on clinician profile pages on the Medicare.gov compare tool.

How is APM performance information publicly reported?

Information about CY 2024 APM participation is publicly reported on the Medicare.gov compare tool in the following ways:

- Measure-level performance scores for groups participating in [Medicare Shared Savings Program](#) Accountable Care Organizations (ACOs) are displayed on the group profile page through a pop-up modal for a subset of their quality measures submitted through the APM Performance Pathway (APP).
- Groups that participated in the Shared Savings Program have an indicator of APM participation on their group profile page.
- Clinicians who participated in the following selected APMs have an indicator on their profile pages:
 - ACO Realizing Equity Access and Community Health (REACH)
 - Bundled Payment for Care Improvement (BPCI) Advanced Model
 - Comprehensive Care for Joint Replacement Payment Model (CJR)
 - Direct Contracting (DC) Model
 - GUIDE (Guiding an Improved Dementia Experience) Model
 - Independence at Home Demonstration (IAH)
 - Kidney Care Choices Model
 - Maryland Total Cost of Care Model
 - Shared Savings Program ACOs
 - Oncology Care Model (OCM)
 - Primary Care First (PCF)
 - Value in Opioid Use Disorder Treatment (ViT) Demonstration Program
 - Vermont Medicare ACO Initiative

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Clinicians who are Qualifying APM Participants in Advanced APMs don't have clinician-level performance information publicly reported on their profile page on the Medicare.gov compare tool or in the PDC. MIPS performance information submitted by [MIPS eligible clinicians](#) in APMs that are neither an Advanced APM nor a MIPS APM may have clinician-level performance information publicly reported on their profile page on the Medicare.gov compare tool or in the PDC unless they received an Extreme and Uncontrollable Circumstance exception.

Learn More

Visit the Downloads section on the [Public Reporting: Doctors and Clinicians Initiative webpage](#) to find more resources about the performance information selected for public reporting, such as the following:

- CY 2024 Clinician Performance Information

You can find additional information about publicly reported star ratings in the CY 2024 Doctors and Clinicians Star Ratings Fact Sheet and the CY 2024 Clinician and Group Star Rating Cut-Offs document, which are also located in the Downloads section on the [Public Reporting: Doctors and Clinicians Initiative webpage](#).

Get in Touch

To learn more about public reporting and star ratings for clinicians on the Medicare.gov compare tool, visit the [Public Reporting: Doctors and Clinicians Initiative webpage](#). If you have questions, contact the QPP Service Center by emailing QPP@cms.hhs.gov, creating a [QPP Service Center ticket](#), or calling 1-866-288-8292 (Monday through Friday, 8 a.m.–8 p.m. ET). Please consider calling during non-peak hours, before 10 a.m. and after 2 p.m. ET.

People who are deaf or hard of hearing can dial 711 to be connected to a (TRS) Communications Assistant.

To receive updates, subscribe to the QPP and Public Reporting: Doctors and Clinicians [Listserves](#).

Version History

Date	Change Description
September 2026	Original version.