

# Centers for Medicare & Medicaid Services

## 2007 Physician Quality Reporting Initiative (PQRI) Module One



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# Physician Quality Reporting Initiative (PQRI)

- Tax Relief and Healthcare Act (TRHCA) Section 101 Implementation
  - Eligible Professionals
  - Quality Measures
  - Form and Manner of Reporting
  - Determination of Successful Reporting
  - Bonus Payment
  - Validation
  - Appeals
  - Confidential Feedback Reports
  - 2008 Considerations
  - Outreach and Education

# Physician Quality Reporting Initiative (PQRI)

- Eligible Professionals
  - Medicare physician, as defined in Social Security Act (SSA) Section 1861(r):
    - Doctor of Medicine
    - Doctor of Osteopathy
    - Doctor of Podiatric Medicine
    - Doctor of Optometry
    - Doctor of Oral Surgery
    - Doctor of Dental Medicine
    - Chiropractor

# Physician Quality Reporting Initiative (PQRI)

- Eligible Professionals
  - Practitioners described in Social Security Act (SSA) Section 1842(b)(18)(C)
    - Physician Assistant
    - Nurse Practitioner
    - Clinical Nurse Specialist
    - Certified Registered Nurse Anesthetist
    - Certified Nurse-Midwife
    - Clinical Social Worker
    - Clinical Psychologist
    - Registered Dietitian
    - Nutrition Professional

# Physician Quality Reporting Initiative (PQRI)

- Eligible Professionals
  - Therapists
    - Physical Therapist
    - Occupational Therapist
    - Qualified Speech-Language Pathologist

# Physician Quality Reporting Initiative (PQRI)

- Eligible Professionals
  - All Medicare-enrolled eligible professionals may participate, regardless of whether they have signed a Medicare participation agreement to accept assignment on all claims
  - No registration is required to participate in PQRI.

# Physician Quality Reporting Initiative (PQRI)

- Quality Measures

- 66 “2007 PVRP” quality measures posted on December 5, 2006 adopted in statute
- 8 additional measures added, as allowed by statute
- Final list of 74 PQRI quality measures posted at [www.cms.hhs.gov/PQRI](http://www.cms.hhs.gov/PQRI), as a download on the Measures/Codes webpage
- Detailed measure specifications and instructions will be posted well in advance of July 1, 2007 statutory deadline

# Physician Quality Reporting Initiative (PQRI)

- Form and Manner of Reporting
  - Reporting period is July 1—December 31, 2007
  - Claims-based reporting
    - CPT Category II codes (or temporary G-codes where CPT Category II codes are not yet available) for reporting quality data
    - Quality codes may be reported on paper-based CMS 1500 claims or electronic 837-P claims
    - Quality codes are reported with a \$0.00 charge
    - Quality codes, which supply the measure numerator, must be reported on the same claims as the payment codes, which supply the measure denominator
  - No registration is required to participate



# Physician Quality Reporting Initiative (PQRI)

- Determination of Successful Reporting
  - Reporting thresholds
    - If there are no more than 3 measures that apply, each measure must be reported for at least 80% of the cases in which a measure was reportable
    - If 4 or more measures apply, at least 3 measures must be reported for at least 80% of the cases in which the measure was reportable
  - Analysis is expected to be performed at the individual level
    - Requires accurate and consistent use of individual National Provider Identifier (NPI) on claims

# Physician Quality Reporting Initiative (PQRI)

- Determination of Successful Reporting
  - Analysis is expected to be performed at the individual level
    - Requires accurate and consistent use of individual National Provider Identifier (NPI) on claims
    - [www.cms.hhs.gov/NationalProvIdentStand](http://www.cms.hhs.gov/NationalProvIdentStand)

# Physician Quality Reporting Initiative (PQRI)

- **Bonus Payment**

- Participating eligible professionals who successfully report may earn a 1.5% bonus, subject to cap
  - 1.5% bonus calculation based on total allowed charges during the reporting period for professional services billed under the Physician Fee Schedule
  - Claims must reach the National Claims History (NCH) file by February 29, 2008
- Bonus payments will be made in a lump sum in mid-2008
- Bonus payments will be made to the holder of record of the Taxpayer Identification Number (TIN)
- No beneficiary coinsurance

# Physician Quality Reporting Initiative (PQRI)

- Bonus Payment

- Cap may apply when relatively few instances of quality measures are reported

- Cap calculation =

1. (Individual's instances of reporting quality data) X
2. (300%) X
3. (National average per measure payment amount)

National average per measure payment amount =

(National charges associated with quality measures) /  
(National instances of reporting)

# Physician Quality Reporting Initiative (PQRI)

- Validation
  - TRHCA requires CMS to use sampling or other means to validate whether quality measures applicable to the services have been reported
  - Validation plan under development
- Appeals
  - Determinations are excluded from formal administrative or judicial review
  - CMS will establish an informal inquiry process

# Physician Quality Reporting Initiative (PQRI)

- Confidential Feedback Reports
  - 2007 PQRI quality data will not be publicly reported
  - Reports will be available at or near the time of the bonus payments in 2008
    - No interim reports during 2007
  - Reports are expected to include reporting and performance rates

# Physician Quality Reporting Initiative (PQRI)

- 2008 Considerations
  - Measures must be established through rulemaking
    - Proposed by August 15, 2007; finalized by November 15, 2007
  - Statutory requirements for 2008 measures
    - Adopted or endorsed by a consensus organization, such as the AQA Alliance or National Quality Forum (NQF)
    - Include measures that have been submitted by a physician specialty
    - Used a consensus-based process for development
    - Include structural measures, such as the use of electronic health records or electronic prescribing technology

# Physician Quality Reporting Initiative (PQRI)

- 2008 Considerations
  - Registry-based and electronic record-based reporting
    - Short lead time for implementation precludes using these channels for 2007 PQRI
    - CMS is working toward opening these channels for 2008 reporting
    - Standardized specifications for centralized reporting could reduce the burden of reporting for participants and CMS

# Physician Quality Reporting Initiative (PQRI)

- Outreach and Education
  - Engagement through communication
    - Website at: <https://www.cms.hhs.gov/PQRI>
    - Medicare Carrier/Medicare Administrative Contractor (MAC) inquiry management
    - Speakers' Bureau
  - Education for participants and their office staff
  - Tools to support successful reporting