



Successfully Navigating the Centers for Medicare & Medicaid Services (CMS) Physician Quality Reporting System (PQRS)

◆ What Is PQRS?

PQRS is a CMS reporting program that uses a combination of incentive payments and penalties (payment adjustments) to promote reporting of quality information by physicians and other health professionals. Prior to 2010 the program was known as the Physician Quality Reporting Initiative (PQRI).

◆ PQRS Incentives and Penalties in 2014 and Beyond

	2013	2014	2015	2016
Incentive Amount	0.5%	0.5%		
Penalty Amount			-1.5% (based on 2013 reporting)	-2% (based on 2014 reporting)

◆ How to Earn an Incentive Payment in 2014

1. Decide whether to report as an individual or as a group practice (group reporting is now available to practices with 2 or more eligible professionals)
2. Determine which reporting mechanism you will use to report, in 2014 there are 6 options:
 - a. Claims-based reporting
 - b. Registry-based reporting, such as PQRIwizard: <https://aaohns.pqriwizard.com/default.aspx>
 - c. EHR direct vendor or EHR data submission vendor reporting
 - d. Group Reporting via the Group Practice Reporting Option (GPRO) (applies to groups of 25 eligible providers (EPs) or more))
 - e. The new Qualified Clinical Data Registry (QCDR) Option
 - f. Groups of 25+ may also use a combination of the options above in conjunction with reporting on the CG CAHPS survey measures via a CMS-certified survey vendor, to earn an incentive.
3. Decide whether to report on individual quality measures (a minimum of 3 individual measures must be reported to avoid a payment penalty, but 9 individual measures must be reported to obtain the incentive payment for 2014) or a measures group (note you must report on all measures in a measures group to be successful).
4. Choose to report over a 12 month (Jan. 1 – Dec. 31) or 6 month (Jul. 1 – Dec. 31) period

Note: The reporting requirements to become eligible for an incentive differ by the reporting mechanism and type of measures selected (individual measures versus a measures group). 2014 reporting requirements are available at <http://www.entnet.org/pqrs>

◆ How to Avoid the 2016 Penalty

To avoid the 2016 penalty physicians must report quality measure data to CMS for PQRS during the 2014 reporting period. To avoid the 2016 penalty you can:

1. Earn a 2014 PQRS incentive payment (as outlined above)
2. Submit data to CMS on 3 individual measures
3. Successfully report via the GPRO options for groups



Successfully Navigating the Centers for Medicare & Medicaid Services (CMS) Physician Quality Reporting System (PQRS) *Continued*

PQRS Changes for 2014

- ◆ CMS finalized 285 individual measures for inclusion in the 2014 PQRS program, including 4 of the Academy's Sinusitis Measures for inclusion in 2014 and beyond.
- ◆ CMS responded to our inquiry as to why this was only approved for reporting via registry and stated that for all new measures they are approved for registry only initially, however, they will continue to work toward complete alignment and if possible will include this measure for EHR-Based reporting in the future.
- ◆ Currently, the minimum number of measures in a measure group, remains at four measures for CY 2014. CMS plans to increase this minimum number in the future. CMS will likely work with the measure developers and owners of measures groups to appropriately add additional measures to measures groups that only contain four measures.
- ◆ CMS also finalized the new Patient-Centered Surgical Risk Assessment and Communication measure for reporting via registry or measures group in 2014.

Please refer to the our website for information on additions/deletions of measures for 2014:
<http://www.entnet.org/Practice/qualityimprovement/cmsPQRS.cfm>

CMS Changes to Reporting Methods for CY 2014

- ◆ CMS eliminated the option to report measure groups via claims for individual EPs in CY 2014. Individuals may now ONLY reporting measure groups via registry.
- ◆ CMS reduced the percentage of patients EPs must report on using Registry reporting from the previous 80% to 50% for CY 2014 reporting. This is now consistent with the patient threshold requirements for reporting via claims.
- ◆ CMS has increased the number of measures Individual EPs must report on from the prior 3 to 9 measures (across 3 quality domains, for 50% of beneficiaries) for CY 2014 reporting. EPs who report on less than 9 measures will be subject to the an additional process called Measure Applicability Validation (MAV process) to ensure that there were not any other measures they should have, or could have, reported on. The increased measure requirement applies to EPs reporting via claims, registries, and EHR; however, the exception to avoid the penalty is only applicable to claims and registry reporting.
- ◆ CMS finalized the new Qualified Clinical Data Registry (QCDR) reporting option for individual reporting in CY 2014.
- ◆ CMS finalized exceptions for individuals reporting via Claims and Registries for CY 2014 to avoid 2016 payment penalty. These EPs will not be eligible for the 2014 bonus payment, however. See detail below.

Changes to Group Reporting in CY 2014

- ◆ CMS revised the deadline by which Group Practices choosing to report for PQRS via the Group Practice Reporting Option (GPRO) must self-nominate from the previous October 15th of the reporting year, to a new deadline of September 30th of the reporting year.
- ◆ CMS finalized a new group reporting option for groups of 25-99 EPs to report, via a CMS-certified survey vendor, on the CG-CAHPS survey measures. Groups selecting this reporting option will need to report using additional reporting methods in order to report on additional measures to meet the criteria for satisfactory reporting for CY 2014.
- ◆ CMS added the requirement for CY 2014 that groups of 25+ who wish to report the CG-CAHPS patient satisfaction survey measures must indicate their intent to do so when they register for the PQRS program. CMS also finalized a change to utilize a single website for Groups to self-nominate to use the GPRO reporting option as well as indicate they would like to report on CG-CAHPS measures for CY 2014.
- ◆ CMS added the requirement that groups of 100+ must report on all CG-CAHPS measures as well as the GPRO measures in the web interface.