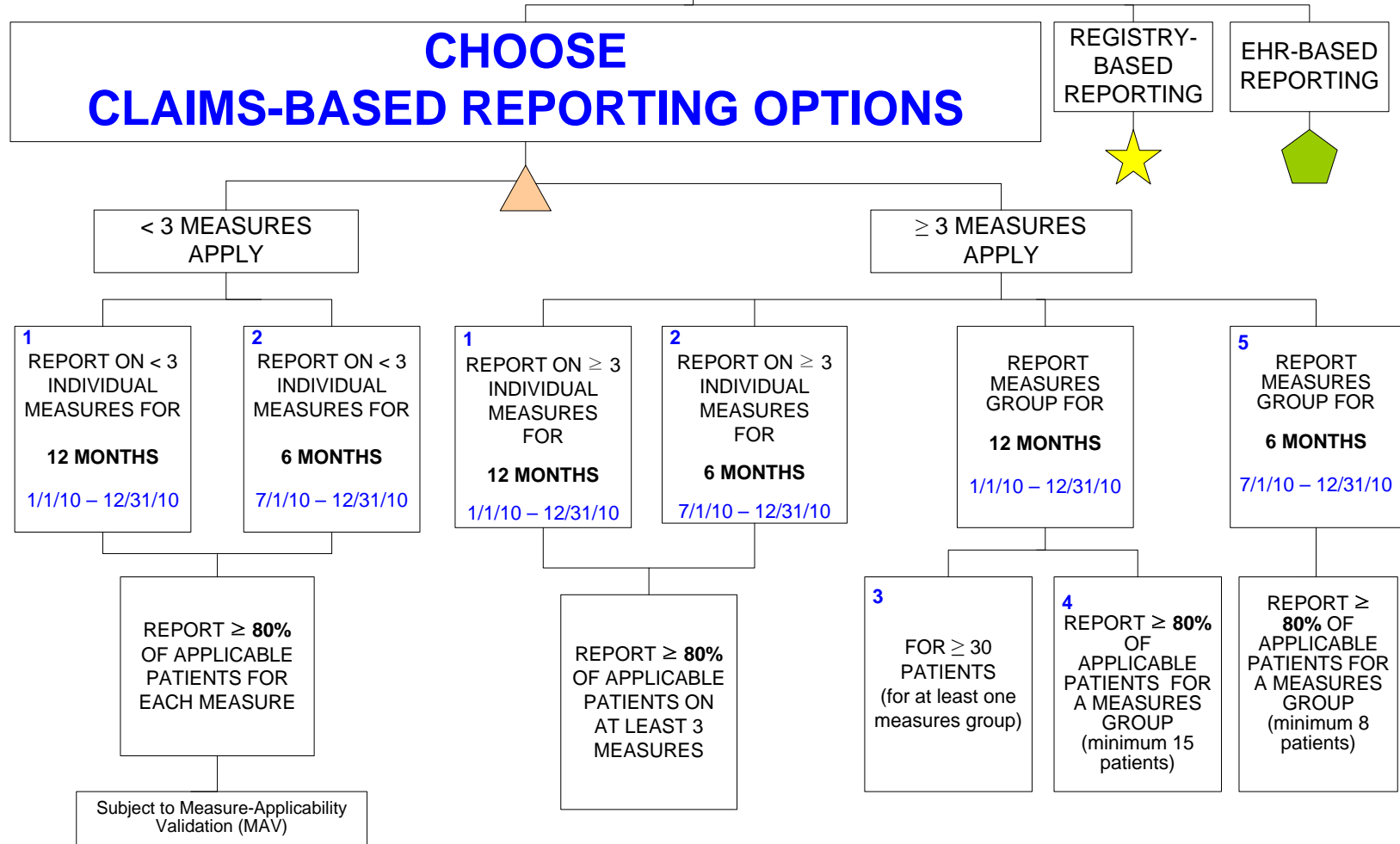


Appendix C: 2010 PQRI Participation Decision Tree

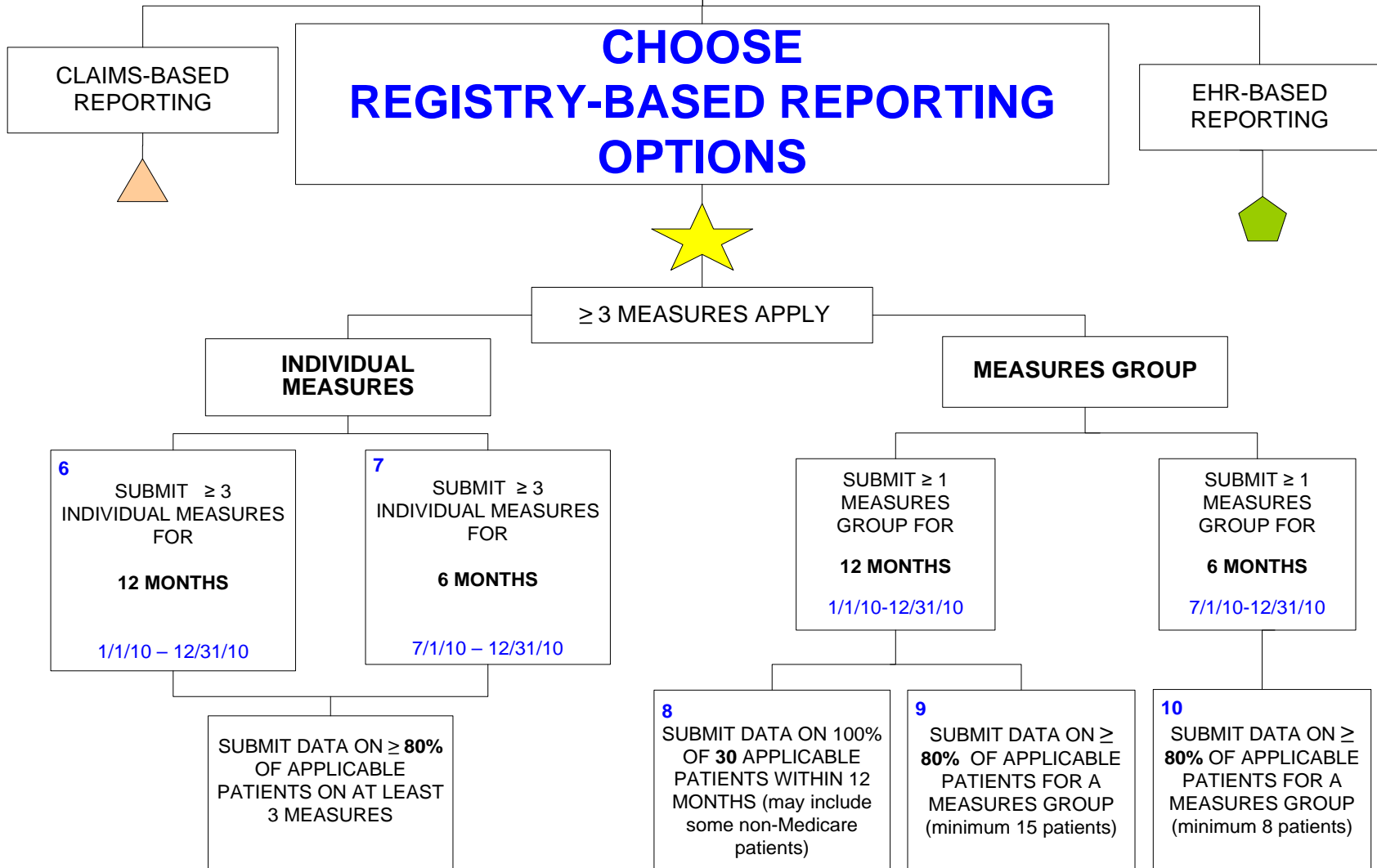
**I WANT TO PARTICIPATE IN 2010 PQRI  
FOR INCENTIVE PAYMENT**  
Select Reporting Method  
(Refer to the appropriate Measure Specifications for the specific reporting method(s) chosen for 2010 PQRI)



# I WANT TO PARTICIPATE IN 2010 PQRI FOR INCENTIVE PAYMENT

Select Reporting Method

(Refer to the appropriate Measure Specifications for the specific reporting method(s) chosen for 2010 PQRI)



# I WANT TO PARTICIPATE IN 2010 PQRI FOR INCENTIVE PAYMENT

Select Reporting Method

(Refer to the appropriate Measure Specifications for the specific reporting method(s) chosen for 2010 PQRI)

CLAIMS-BASED  
REPORTING



REGISTRY-BASED  
REPORTING



**CHOOSE  
EHR-BASED REPORTING  
OPTION**



≥ 3 MEASURES APPLY

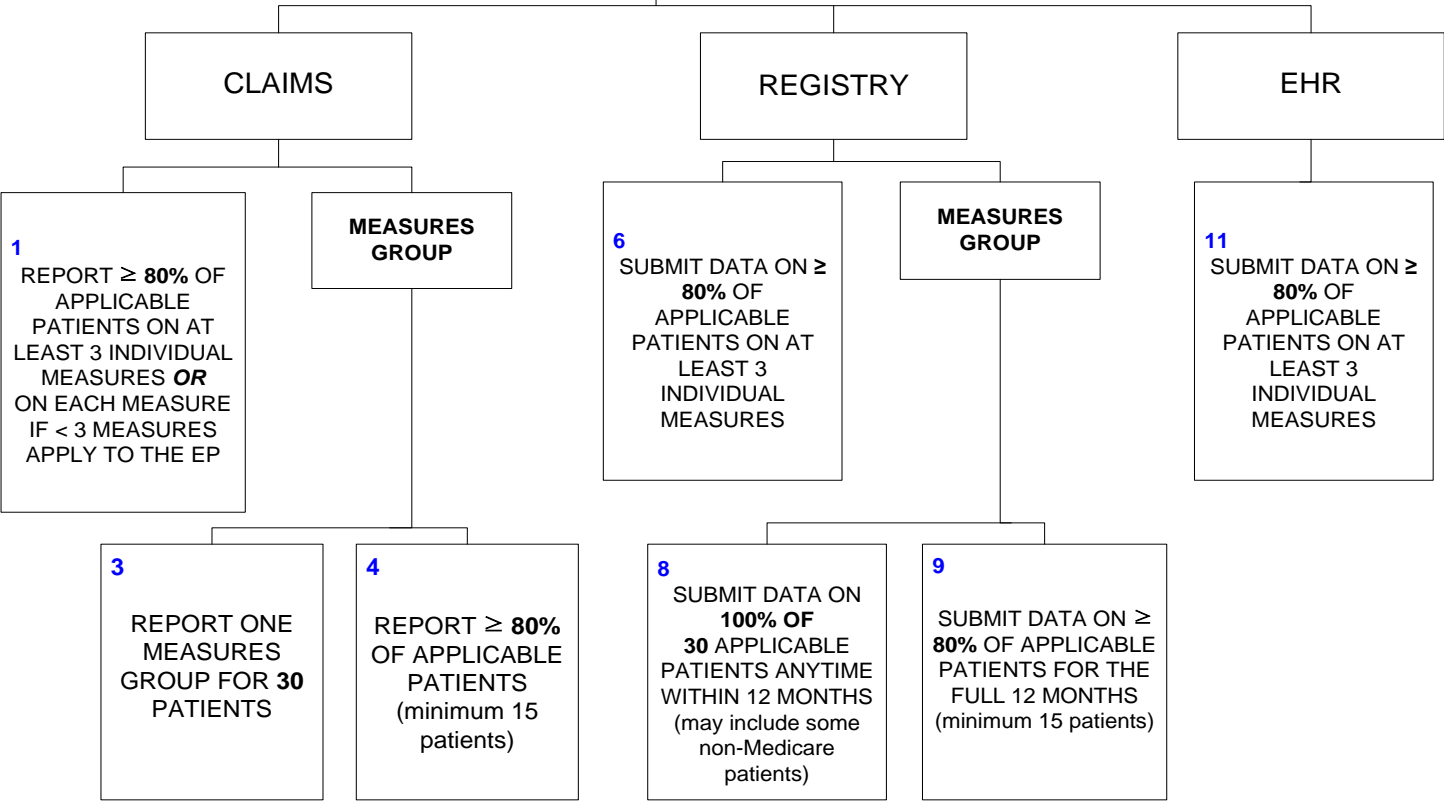
**11**  
SUBMIT ≥ 3 INDIVIDUAL  
MEASURES FOR  
**12 MONTHS**  
1/1/10 – 12/31/10

EHR SUBMITS DATA ON ≥  
**80% OF APPLICABLE**  
PATIENTS ON AT LEAST 3  
**INDIVIDUAL MEASURES**

**I WANT TO PARTICIPATE IN 2010 PQRI  
FOR INCENTIVE PAYMENT**  
(Select Reporting Period)

**12-MONTH  
REPORTING PERIOD**  
1/1/10 – 12/31/10

**6-MONTH  
REPORTING PERIOD**  
7/1/10 – 12/31/10



# I WANT TO PARTICIPATE IN 2010 PQRI FOR INCENTIVE PAYMENT

(Select Reporting Period)

**12-MONTH  
REPORTING PERIOD**  
1/1/10 – 12/31/10



**6-MONTH  
REPORTING PERIOD**  
7/1/10 – 12/31/10



CLAIMS

REGISTRY

**2**  
REPORT  $\geq$  **80%** OF  
APPLICABLE  
PATIENTS ON AT  
LEAST 3 INDIVIDUAL  
MEASURES **OR**  
ON EACH MEASURE  
IF  $<$  3 MEASURES  
APPLY TO THE EP

**MEASURES  
GROUP**

**5**  
REPORT  $\geq$   
**80%** OF  
APPLICABLE  
PATIENTS  
(minimum 8)

**7**  
SUBMIT DATA ON  
 $\geq$  **80%** OF  
APPLICABLE  
PATIENTS ON AT  
LEAST 3  
INDIVIDUAL  
MEASURES

**MEASURES  
GROUP**

**10**  
SUBMIT DATA  
ON  $\geq$  **80%** OF  
APPLICABLE  
PATIENTS

## Appendix C: 2010 Participation Decision Tree

### 2010 PQRI Reporting Options

Number assigned coordinates with appropriate box on the Appendix C: 2010 PQRI Participation Decision Tree.

1. Claims-based reporting of individual measures (12 months)
2. Claims-based reporting of individual measures (6 months)
3. Claims-based reporting of one measures group for 30 Medicare Part B FFS patients (12 months)
4. Claims-based reporting of one measures group for 80% of applicable Medicare Part B FFS patients of each EP (with a minimum of 15 patients) (12 months)
5. Claims-based reporting of one measures group for 80% of applicable Medicare Part B FFS patients of each EP (with a minimum of 8 patients) (6 months)
6. Registry-based reporting of at least 3 individual PQRI measures for 80% of applicable Medicare Part B FFS patients of each EP (12 months)
7. Registry-based reporting of at least 3 individual PQRI measures for 80% of applicable Medicare Part B FFS patients of each EP (6 months)
8. Registry-based reporting of one measures group for 30 patients (patients may include, but may not be exclusively non-Medicare patients) (12 months)
9. Registry-based reporting of one measures group for 80% of applicable Medicare Part B FFS patients of each EP (with a minimum of 15 patients) (12 months)
10. Registry-based reporting of one measures group for 80% of applicable Medicare Part B FFS patients of each EP (with a minimum of 8 patients) (6 months)
11. EHR-based reporting of at least 3 individual PQRI measures for 80% of applicable Medicare Part B FFS patients of each EP (12 months)