

## 2016 Physician Quality Reporting System Requirements

The Physician Quality Reporting System (PQRS) is a quality reporting program that gives eligible professionals incentives and negative payment adjustments to promote reporting of quality information by individual eligible professionals (EPs) and group practices. PQRS gives participating EPs and group practices the opportunity to assess the quality of care they are providing, quantify how often they are meeting a particular quality metric and compare their performance with their peers.



### Q: Am I required to participate in PQRS?

**A:** If you are a solo practitioner, in a group practice or work as a consultant, and you bill Medicare Part B, you are required to report PQRS to avoid the penalty.



### Q: How do I participate in PQRS?

**A:** There are 2 options on how to participate:

- (1) Do you bill using your individual National Provider Identifier (NPI)/Tax Identification Number (TIN)? If yes, you are required to participate as an Individual Eligible Professional.
- (2) Do you work in a group of 2 or more physicians AND have you reassigned your billing rights to a group TIN? If yes, you should participate as a group practice. Your group practice must have registered with CMS before June 30, 2016.



### Q: How do I report PQRS?

- A:**
- Individual Reporting Options are via claims, registry, EHR and Qualified Clinical Data Registries.
  - Group Reporting Options are via registry, EHR and Qualified Clinical Data Registries.



### Q: How do I choose measures to report?

**A:** See the detailed tables on the following pages for some helpful hints on which measures PM&R physicians can report on.



### Q: What if I cannot report on the required number of measures?

**A:** If you cannot report on the required number of measures, you will be subject to the Measures Applicability Validation Process (MAV).



- Visit [www.aapmr.org/pqrs](http://www.aapmr.org/pqrs) for more detailed information.
- Ask your Academy for help; email [healthpolicy@aapmr.org](mailto:healthpolicy@aapmr.org).

## How to Report PQRS in 2016

For 2016 reporting, CMS has released 233 quality measures that EPs can report on. Each measure has different specifications, codes and reporting options so it is best to check the PQRS Measures Codes prior to reporting (<http://tinyurl.com/PQRSMeasureCodes>). Every Measure Code has a denominator, numerator, reporting frequency and performance time frame.

### The Denominator:

The denominator describes eligible cases for a measure including patient population and/or patient demographics. A key question to ask when looking at the measure is "does this patient visit/service meet the PQRS measure criteria for the EP to report?"

### The Numerator:

The numerator is the specific clinical action required by the measure for reporting and performance. This means patients who received a particular service or obtained a particular outcome that is being measured.

### Reporting Frequency:

Each measure has a frequency requirement that states how often EPs need to report the measure. Some measures are required to be reported on for each visit while others may only have the requirement of once a year.

### Performance Timeline:

Some PQRS measures have a designated time frame when the measure should be completed. This may or may not coincide with the reporting frequency requirement.

## 2016 PQRS Measure Guides for PM&R Physicians

These tables are to help you identify individual measures that you can report on in 2016. When choosing individual measures, remember that you must:

- Report on at least 50% of your Medicare Part B patients
- Report on 9 individual measures
- Select at least 1 cross-cutting measure
- Report on measures in at least 3 National Quality Strategy Domains

NATIONAL QUALITY STRATEGY DOMAIN:		COMMUNICATION & CARE COORDINATION		
PQRS MEASURE NUMBER	MEASURE DESCRIPTION	CROSS-CUTTING MEASURE	REPORTING OPTIONS	REPORTING FREQUENCY
24	Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women...		Claims, Registry	Each occurrence
46	Medication Reconciliation After Inpatient Facility Discharge	X	Claims, Registry	Within 30 days after inpatient discharge
47	(Advanced) Care Plan	X	Claims, Registry	Once/year
131	Pain Assessment and Follow-up	X	Claims, Registry	Each visit
155	Falls: Plan of Care	X	Claims, Registry	Once/year
325	Adult Major Depressive Disorder: Coordination of Care of Patients w/ Spec Comorbid Conditions		Registry	Once/year
374	Closing the Referral Loop: Receipt of Specialist Report	X	EHR	
411	Depression Remission at 6 months		Registry	Once/year

NATIONAL QUALITY STRATEGY DOMAIN:		COMMUNITY/POPULATION HEALTH		
PQRS MEASURE NUMBER	MEASURE DESCRIPTION	CROSS-CUTTING MEASURE	REPORTING OPTIONS	REPORTING FREQUENCY
110	Influenza Immunization	X	Claims, Registry, EHR, GPRO, Web Interface	2 times periods: once each time
111	Pneumonia Vaccination for Older Adults	X	Claims, Registry, EHR, GPRO, Web Interface	Once/year
128	Body Mass Index (BMI) Screening and Follow-up	X	Claims, Registry, EHR, GPRO, Web Interface	Once/year
134	Screening for Clinical Depression and Follow-up	X	Claims, Registry, EHR, GPRO, Web Interface	Once/year
226	Tobacco Use: Screening and Cessation Intervention	X	Claims, Registry, EHR, GPRO, Web Interface	Once/year
317	Screening for High Blood Pressure and Follow-up Documented	X	Claims, Registry, EHR, GPRO, Web Interface	Once/year
431	Unhealthy Alcohol Use: Screening and Brief Counseling	X	Registry	Once/year

NATIONAL QUALITY STRATEGY DOMAIN:		EFFECTIVE CLINICAL CARE		
PQRS MEASURE NUMBER	MEASURE DESCRIPTION	CROSS-CUTTING MEASURE	REPORTING OPTIONS	REPORTING FREQUENCY
9	Anti- Depressant Medication Management		EHR	
32	Stroke and Stroke Rehabilitation: Discharged on Antithrombotic Therapy		Claims, Registry	At each discharge from hospital
39	Screening or Therapy for Osteoporosis for Women Aged 65–85 years old		Claims, Registry	Once/year
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older		Claims, Registry	Once/year
48	Urinary Incontinence: Assessment of Presence or Absence of Women > 65		Claims, Registry	Once/year
107	Adult Major Depressive Disorder: Suicide Risk Assessment		EHR	
127	Diabetes: Foot and Ankle: Peripheral Neuropathy Neurological Evaluation		Registry	Once/year
128	Diabetes: Foot and Ankle: Ulcer Prevention – Footwear Evaluation		Registry	Once/year
163	Diabetes – Foot Exam		EHR	
178	Rheumatoid Arthritis: Functional Status Assessment		Registry	Once/year
236	Controlling High Blood Pressure	X	Claims, Registry, EHR, GPRO, Web Interface	Once/year
281	Dementia – Cognitive Assessment		EHR	
367	... and Major Depression: Appraisal for Alcohol and Chemical Substance Use		EHR	
370	Depression Remission at 12 months		Registry, EHR, GPRO, Web Interface	Once/year
371	Depression: Utilization of PHQ-9 Tool		EHR	
408	Opioid Therapy Follow-up Evaluation		Registry	Once/year
412	Documentation of Signed Opioid Treatment Agreement		Registry	Once/year
414	Evaluation or Interview for Risk of Opioid Misuse		Registry	Once/year
418	Osteoporosis Management in Women Who Had a Fracture		Claims, Registry	Each occurrence of a fracture
435	Quality of Life Assessment for Patients with Primary Headache Disorders		Claims, Registry	Once/year

NATIONAL QUALITY STRATEGY DOMAIN:		EFFICIENCY & COST REDUCTION		
PQRS MEASURE NUMBER	MEASURE DESCRIPTION	CROSS-CUTTING MEASURE	REPORTING OPTIONS	REPORTING FREQUENCY
50	Plan of Care for Urinary Incontinence in Women Aged 65 and Older		Claims, Registry	Once/year
109	Osteoarthritis: Function and Pain Assessment		Claims, Registry	Each visit
312	Use of Imaging Studies for Low Back Pain		EHR	
342	Pain Brought Under Control Within 48 Hours After Admission to Palliative Care		Registry	Once/year
375	Functional Status Assessment for Knee Replacement		EHR	
376	Functional Status Assessment for Hip Replacement		EHR	
377	Functional Status Assessment for Complex Chronic Conditions		EHR	
419	Overuse of Neuroimaging for Patients with Primary Headache and a Normal Neurological Examination		Claims, Registry	Each visit

NATIONAL QUALITY STRATEGY DOMAIN:		PATIENT SAFETY		
PQRS MEASURE NUMBER	MEASURE DESCRIPTION	CROSS-CUTTING MEASURE	REPORTING OPTIONS	REPORTING FREQUENCY
130	Documentation of Current Medications in the Medical Record	X	Claims, Registry, EHR, GPRO, Web Interface	Each visit
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy		Claims, Registry	Each time
154	Falls: Risk Assessment (partnered with #155)	X	Claims, Registry	Once/year
181	Elder Maltreatment Screen and Follow-up Plan		Claims, Registry	Once/year
238	Use of High-Risk Medications in the Elderly		Registry, EHR	Once/year
318	Falls: Screening for Fall Risk	X	EHR, GPRO, Web Interface	

## 2016 PQRS Measures Groups—Registry Reporting Only

Eligible Professionals and group practices can also report via Measures Groups. In order to satisfactorily report 2016 PQRS via a Measures Group, you must:

- Select just ONE measures group per provider
- Report on 20 of your patients seen in 2016, 11 of which must be Medicare Part B patients
- Report **ALL** measures in the group

Below are a few measures groups that *could* be applicable to PM&R physicians.

2016 PQRS: MEASURES GROUP—REGISTRY REPORTING ONLY		DEMENTIA MEASURES GROUP
PQRS MEASURE NUMBER	INDIVIDUAL MEASURE DESCRIPTION	
47	(Advanced) Care Plan	
134	Screening for Clinical Depression and Follow-up Plan	
280	Dementia: Staging of Dementia	
281	Dementia: Cognitive Assessment	
282	Dementia: Functional Status Assessment	
283	Dementia: Neuropsychiatric Symptom Assessment	
284	Dementia: Management of Neuropsychiatric Symptoms	
286	Dementia: Counseling Regarding Safety Concerns	
287	Dementia: Counseling Regarding Risks of Driving	
288	Dementia: Caregiver Education and Support	

2016 PQRS: MEASURES GROUP—REGISTRY REPORTING ONLY		PARKINSON'S MEASURES GROUP
PQRS MEASURE NUMBER	INDIVIDUAL MEASURE DESCRIPTION	
47	(Advanced) Care Plan	
289	Annual Parkinson's Disease Diagnosis Review	
290	Parkinson's Disease: Psychiatric Disorders or Disturbances Assessment	
291	Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment	
292	Parkinson's Disease: Querying About Sleep Disturbances	
293	Parkinson's Disease: Rehabilitative Therapy Options	
294	Parkinson's Disease: Medical and Surgical Treatment Options Reviewed	

2016 PQRS: MEASURES GROUP—REGISTRY REPORTING ONLY		PREVENTIVE CARE MEASURES GROUP
PQRS MEASURE NUMBER	INDIVIDUAL MEASURE DESCRIPTION	
39	Screening for Osteoporosis for Women Aged 65–85 Years of Age	
48	Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years or Older	
110	Influenza Immunization	
111	Pneumonia Vaccination Status for Older Adults	
112	Breast Cancer Screening	
113	Colorectal Cancer Screening	
128	Body Mass Index Screening and Follow-up Plan	
134	Screening for Clinical Depression and Follow-up Plan	
226	Tobacco Use: Screening and Cessation Intervention	
431	Unhealthy Alcohol Use: Screening and Brief Counseling	