# Summit Documentation Article XIII PQRS: What You Don't Know Will Cost You!

First convened in September 2007, the Chiropractic Summit represents leadership from some 40 organizations within the profession. The Summit meets regularly to collaborate, seek solutions, and support collective action to address challenges with the common goal of advancing chiropractic.

A major focus of the Summit has been to improve practitioner participation, documentation, and compliance within the Medicare system. The article that follows is the thirteenth in a series developed by the Chiropractic Summit Documentation Committee.

# If you are not reporting PQRS measures successfully in <u>2013</u>, your fees will be REDUCED in the future!

CMS gave providers five years (2008-2012) to learn how to properly participate in the Physician Quality Reporting System (PQRS). They even paid a BONUS if you participated and did it right. The good news? The bonus will continue through 2014. The bad news? Starting in 2015 there will be a PENALTY put in place (a reduction to your fees) if you are not participating or not doing it right. The worse news? That penalty will be based on your performance in 2013!

The Patient Protection and Affordable Care Act made participation in Medicare's Physician Quality Reporting System (PQRS), formerly referred to as PQRI, <u>mandatory</u> beginning in 2015. Providers who are not satisfactorily participating in PQRS in the 2013 reporting period (January 1 – December 31, 2013) and beyond, will have their Medicare reimbursement decreased by 1.5% beginning in 2015. In 2016, the payment reduction will be 2%. Therefore, the 2012 reporting period is the last opportunity providers have to voluntarily participate in PQRS while incentives are still offered and Medicare reimbursement is not subject to penalty.

To date, our participation has been negligible (< 2%) and, of the doctors that participated, only 38% qualified for the incentive. Obviously, we need to start participating and learning how to do this RIGHT!

#### What is the Physician Quality Reporting System (PQRS)?

The Physician Quality Reporting System (PQRS) is a reporting program where eligible professionals (including doctors of chiropractic) report data on quality measures for covered Physician Fee Schedule services.

## What is a Quality Measure?

Quality measures, generally, are rooted in evidence-based medicine. They can be "guideline" measures (e.g., you get 12 visits for acute low back pain), "process" measures (e.g., when a patient comes in with a cardiovascular episode and you gave them an aspirin), or "outcome" measures (e.g., "X" condition was resolved). There are also other types of measures, such as "structural", "efficiency", or "cost of care" measures.

A few points that are important to keep in mind:

• There is significant debate on the value of the different types of measures, with the community currently focusing mostly on "process" measures. [Note: "Guideline" measures have generally been discounted as a way to measure quality of care.] Certain groups are also paying close attention to

- "structural" and "cost of care" measures. The ultimate goal of all parties is to have effective outcomes measures.
- There is also significant debate about whether certain measures simply demonstrate competency or
  actually will improve quality. For example, some measures deal with the documentation of care.
  Many in the healthcare community argue that documentation of care should be happening anyway,
  while others point out that it doesn't happen 100% of the time, hence there's room for
  improvement—a gap in care—with which a measure could help.
- Measures are not specialty-specific; they are condition-specific.

# **How Does Chiropractic Fit In?**

- The Committee for Quality Assurance and Accountability (CQAA)—a group of doctors of chiropractic
  who help assess, create, and implement a viable strategy in this policy arena—is responsible for
  facilitating the development and availability of reporting measures which can be used by doctors of
  chiropractic.
- In 2012 and 2013, doctors of chiropractic are eligible to report on three (3) quality measures:
  - Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)
     (this is NOT the same thing as EHR/Meaningful Use)
  - Pain Assessment and Follow-Up
  - Functional Outcome Assessment

#### What Can Individual DCs Do to Prepare?

- Understand the PQRS program and start reporting on the measures ASAP!
- If you have never participated in PQRS you may not know where to begin. If you participated, but did not qualify for an incentive payment, you may not know where you went wrong. For those doctors who have already successfully participated, please be advised that significant updates and revisions are made annually. There are multiple resources available, including tools (provided by CMS, AMA, and ACA) and an educational webinar.

### Resources, Tools, and Additional Information:

- PQRS Webinar: http://www.chirohealthusa.com/news/view.php?entryID=112 (for more information) http://tinyurl.com/bbnlgn4 (direct link to register for webinar)
- PQRS Tools: http://www.acatoday.org/pqrs (on this website you can find links to a general "Guidebook" as well as a "Toolkit" for each individual measure)
- Two previous Summit articles on this topic:
  - 1. *Dynamic Chiropractic;*, *March 26, 2011; Vol. 29, Issue 07;* "Medicare and the Chiropractic Practice—Part 8: Are You Participating in the PQRS? If Not, Why Not?"
  - 2. Dynamic Chiropractic; April 22, 2011; Vol. 29, Issue 09; "Medicare and the Chiropractic Practice—Part 9: The PQRS Looking Beyond the 1% Incentive Bonus"

PLEASE NOTE: PQRS is a TOTALLY SEPARATE PROGRAM from the EHR/Meaningful Use Program!

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