

GROUP PRACTICE REPORTING OPTION (GPRO) REQUIREMENTS FOR SUBMISSION OF 2013 ELECTRONIC PRESCRIBING (eRx) DATA

Background

Introduced in 2010 in accordance with section 1848(m)(3)(C)(i) of the Act, CMS is continuing the group practice reporting option (GPRO) for the 2013 Physician Quality Reporting System (Physician Quality Reporting). Group practices that satisfactorily report data on Physician Quality Reporting measures for assigned Medicare beneficiaries for 2013 are eligible to earn an incentive payment equal to 0.5% of the group practice's total estimated Medicare Part B Physician Fee Schedule (PFS) allowed charges for covered professional services furnished during the 2013 reporting period. As required by section 1848(m)(3)(C)(iii) of the Act, an individual eligible professional who is a member of a group practice participating in Physician Quality Reporting GPRO is not eligible to separately earn a Physician Quality Reporting incentive payment as an individual eligible professional under that same Tax Identification Number (TIN) (that is, for the same TIN/National Provider Identifier, or NPI, combination). Once a group practice (TIN) is participating in the GPRO, this is the only method of Physician Quality Reporting available to the group and all individual NPIs who bill Medicare under the group's TIN for 2013.

The 2010 model for the group practice reporting option (GPRO) closely followed the requirements that were created for the Physician Group Practice (PGP) demonstration. Initial requirements for participation in the Physician Quality Reporting System under the group practice reporting option included participation to large practices only. In 2011 this was expanded to include practices with 2-199 professionals which created a second reporting option (GPRO II) specifically for smaller group practices. For 2012, group practices with 25 or more professionals were able to report as a GPRO.

The Medicare Shared Savings Program (Shared Savings Program), and Pioneer Accountable Care Organization (ACO) Model have incorporated aspects of the Physician Quality Reporting System reporting requirements and incentives under those respective programs.

A "group practice" under 2013 Physician Quality Reporting consists of a physician group practice, as defined by a single TIN, with 2 or more individual eligible professionals (as identified by individual NPIs) who have reassigned their billing rights to the TIN. This definition of group practice is different from the definition of group practice that was applicable for the 2012 Physician Quality Reporting System, which defined a group practice as 25 or more eligible professionals.

Electronic Prescribing (eRx) Incentive Program

Participation in the 2013 Electronic Prescribing (eRx) Incentive Program is voluntary for group practices. By participating in the eRx program, group practices can both earn the 2013 incentive, and avoid the 2014 payment adjustment. Unlike in prior years, group practices are not required to participate in PQRS GPRO or ACO GPRO to participate in eRx GPRO. See PQRS GPRO requirements document for further information on the PQRS GPRO program.

All groups participating in 2013 eRx GPRO need to notify CMS of their desire to do so and the reporting method they plan to use for each calendar year the group wishes to participate in the GPRO eRx. If group practices are participating in both PQRS GPRO and eRx GPRO, this information may be submitted via the web. If, however, the group practice is part of an ACO or wishes to participate in eRx GPRO but not in PQRS GPRO, the group practice will be unable to self-nominate via the web, and instead must submit an email self-nomination for eRx GPRO. A sample eRx GPRO self-nomination email statement can be found beginning on page 3.

Participation in the eRx GPRO precludes individuals within group practices from participating in the eRx Incentive Program as individuals under the same TIN as a GPRO. Once a group practice (TIN) is participating in the eRx GPRO, this is the only method of eRx reporting available to the group for all individual NPIs who bill Medicare Part B PFS under the group's TIN for 2013. The group's participation in eRx GPRO and its method of reporting are final as of April 1, 2013, and no changes will be accepted after this date. At the end of the reporting period, regardless of the success or failure of a group practice participating in the GPRO or eRx, the program will prevent individual eligible professionals from receiving Physician Quality Reporting or eRx incentive payments for individual reporting under that TIN.

GPROs participating in eRx GPRO for the 2013 incentive payment must report the electronic prescribing measure's numerator for at least 75 unique visits (for group practices comprised of 2-24 eligible professionals), 625 unique visits (for group practices comprised of 25-99 eligible professionals) or 2,500 unique visits (for group practices comprised of 100 or more eligible professionals) during the applicable reporting period.

In order to avoid the 2014 eRx payment adjustment GPRO eRx submissions must be completed and reported via the claims method by June 30, 2013. Information regarding the eRx payment adjustment is available at <http://www.cms.gov/ERxIncentive>.

If the group practice is planning to participate in the eRx Incentive Program as a GPRO, the group practice must identify the reporting mechanism the group practice intends to use to qualify for the 2013 eRx incentive (claims, qualified registry). Note: Only the claims-based reporting mechanism may be used for purposes of the 6-month 2013 payment adjustment reporting periods. Groups intending to submit 2013 eRx data through a registry must use one that has been qualified by CMS to submit for GPROs. If you will not be submitting eRx GPRO and qualify for a hardship exemption to the payment adjustment, please include this request in your self-nomination statement.

We anticipate that a list of qualified registries will be posted on the CMS website in the summer of 2013.

eRx-only GPRO Self-Nomination

To be considered as an eRx-only GPRO, participants must comply with the following requirements:

- Agree to attend and participate in eRx GPRO training sessions
- Have billed Medicare Part B on or after January 1, 2012 and prior to approximately October 31, 2012
- Have technical capabilities, at a minimum: standard PC image with Microsoft® Office and Microsoft® Access software installed; and minimum software configurations
- Be able to comply with a secure method for data submission
- Provide CMS access to review the Medicare beneficiary data on which eRx GPRO submissions are founded or provide to CMS a copy of the actual data
- Indication of group practice's intended reporting method
- Group should indicate if they are part of a Medicare Shared Savings Program or Pioneer ACO
- Provide all requested data via email by January 31, 2013

Self-nominations to participate as an eRx GPRO only (i.e., not as a PQRS GPRO) for the 2013 Physician Quality Reporting System should be submitted via an email that includes organization name; the name, email address and telephone number of a single point of contact for handling administrative issues; as well as the name, email address and telephone number of a single point of contact for technical support purposes; and the reporting method that will be used.

Please do not email your TIN; this is a CMS security violation. You will be contacted separately for your TIN.

2013 eRx GPRO Self-Nomination

The self-nomination statement must be received at the following email address no later than 5 p.m. E.T. on January 31, 2013 – PQRS_Vetting@mathematica-mpr.com. The following is a sample eRx GPRO self-nomination email.

PLEASE NOTE - This is a sample eRx Self Nomination Statement. As with all documents of this nature, legal counsel review before use would be prudent. No additional information should be included in the Self Nomination Letter.

ABC GPRO
123 GPRO Avenue
Sample, MD 12345
Tel: 123-456-7890
Email: abcgpro@abcgpro.org

January 15, 2013ⁱ

2013 eRx GPROⁱⁱ Nomination
Centers for Medicare & Medicaid Services
Office of Clinical Standards and Quality
Quality Measurement and Health Assessment Group

Dear eRx GPRO Nomination Committee,

Please accept this submission as the Self Nomination of ABC GPROⁱⁱⁱ for possible inclusion in the 2013 eRx GPRO program. The ABC GPRO meets all of the set forth requirements posted in the eRx GPRO Requirements For Submission Of 2013 eRx Data On Behalf Of Eligible Professionals document on the CMS Physician Quality Reporting System website.

We have 86 eligible providers under our TIN who can be identified by their Individual NPI numbers. We intend to report the eRx measure via claims with a minimum of 625 prescriptions to be generated.^{iv}

Please address any questions to our project manager Jon Doe (123-456-7891 / jdoe@abcGPRO.org) and our technical representative Dan Jones (123-456-7893 / djones@abcGPRO.org).^v

Thanks

Joe Smith

Joe Smith

CEO

ⁱ Letter must be received no later than **5 p.m. ET on January 31, 2013.**

ⁱⁱ This Sample Self Nomination Letter is for an eRx GPRO.

ⁱⁱⁱ Specify your Sponsoring Organization name and GPRO name if the two are different.

^{iv} Specify if your GPRO intends to report eRx as an eRx GPRO and the reporting mechanism. Also, state the minimum eRx reporting requirement for the GPRO size.

^v Specify the appropriate individuals to contact when beginning the self-nomination process. Provide a phone and an email address for a program and a technical representative. A minimum of two representatives need to be provided.