

2015 Physician Quality Reporting System (PQRS): Group Practice Reporting Option (GPRO) *Registration Quick-Reference Guide*

April 2015

Overview

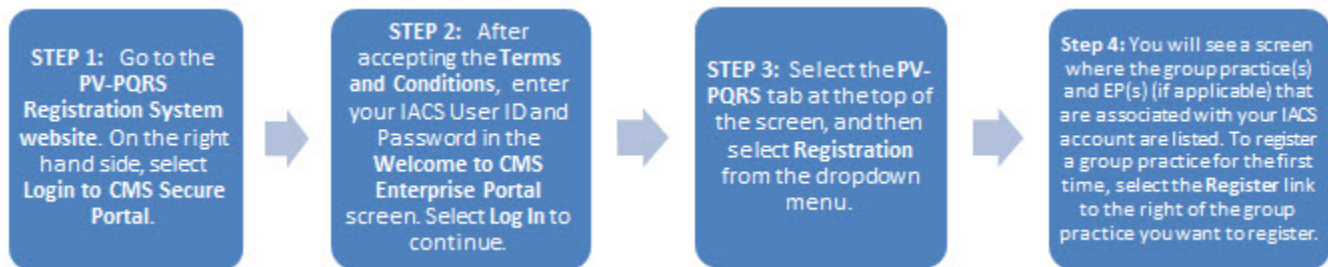
The [Physician Quality Reporting System \(PQRS\)](#) is a quality reporting program that applies a negative payment adjustment to promote the reporting of quality information by eligible professionals (EPs) and group practices. To avoid the 2017 negative payment adjustment by reporting during the 2015 PQRS program year, group practices who wish to participate in the [PQRS group practice reporting option \(GPRO\)](#) may register to participate via:

1. [Qualified PQRS registry](#)
2. [Web Interface](#) (for groups of 25+ only)
3. [Direct electronic health record \(EHR\) using certified EHR technology \(CEHRT\)](#)
4. [CERHT via Data Submission Vendor](#)
5. [Consumer Assessment of Healthcare Providers and Systems \(CAHPS\) for PQRS via Centers for Medicare & Medicaid Services \(CMS\)-certified survey vendor to supplement reporting](#)

Registration

Registration must be completed through the online **Physician Value-Physician Quality Reporting System (PV-PQRS) Registration System** at <https://portal.cms.gov> during the **April 1, 2015 - June 30, 2015** registration period. Groups may change or cancel their registration prior to the June 30 deadline.

- In order to register, groups must have an approved **Individuals Authorized Access to the CMS Computer Services (IACS)** account and indicate their reporting mechanism for the 12-month period.
- The group practice will need to designate a **Security Official (SO) PV-PQRS Role and Representative PV-PQRS Role** to complete registration. See step-by-step instructions for obtaining PV-PQRS Roles in the "Downloads" section of the [Self Nomination/Registration](#) page of the CMS website.



*Note: If your group practice is participating in an **Accountable Care Organization (ACO)**, then you do **not** need to register for PQRS GPRO via the PV-PQRS System.*

Quick Facts

- For the 2015 program year, a "group practice" is defined as a single Taxpayer Identification Number (TIN) with 2 or more individual EPs (as identified by Individual National Provider Identifier [NPI]) who have reassigned their billing rights to the TIN.
- The group practice size is based on the number of EPs (NPIs) billing under the TIN at the time of registration.
- Once a PQRS group practice TIN has registered to take part in PQRS GPRO, the reporting method chosen is the only PQRS submission mechanism that will be analyzed by CMS to determine subjectivity to payment adjustment for the group and all associated NPIs who bill Medicare under the group's TIN.
- If an organization or individual EP changes TINs, the registration under the old TIN does not carry over to the new TIN, nor is it combined for final analysis.
- If a TIN's organization name changes after the 2015 PQRS GPRO registration period ends, the name used for registration will appear on program feedback.
- The 2015 PQRS data submission window will be in the first quarter of 2016.