# 2016 Physician Quality Reporting System (PQRS):

## Qualified Clinical Data Registry (QCDR) Participation Made Simple

**October 2016**

## Background

The Physician Quality Reporting System (PQRS) is a voluntary quality reporting program that applies a negative payment adjustment to promote the reporting of quality information by individual eligible professionals (EPs) and group practices. The program applies a negative payment adjustment to practices with EPs identified on claims by their individual National Provider Identifier (NPI) and Tax Identification Number (TIN), or group practices participating via the group practice reporting option (GPRO), referred to as PQRS group practices, who **do not** satisfactorily report data on quality measures for covered Medicare Physician Fee Schedule (MPFS) services furnished to Medicare Part B Fee-for-Service (FFS) beneficiaries (including Railroad Retirement Board and Medicare Secondary Payer). Those who report satisfactorily for the 2016 program year will avoid the 2018 PQRS negative payment adjustment.

For more information on PQRS or the payment adjustment, visit the PQRS webpage.

*This document applies only to qualified clinical data registry (QCDR)-based participation for PQRS. Although EPs can use a QCDR for the Electronic Health Record (EHR) Incentive Program, this document **does not** provide guidance for other Medicare or Medicaid incentive programs, such as the EHR Incentive Program, or the Value-Based Payment Modifier.*

## Purpose

This document describes QCDR participation and outlines steps that individual EPs and PQRS group practices should take in selecting a QCDR to work with for the 2016 PQRS program year.
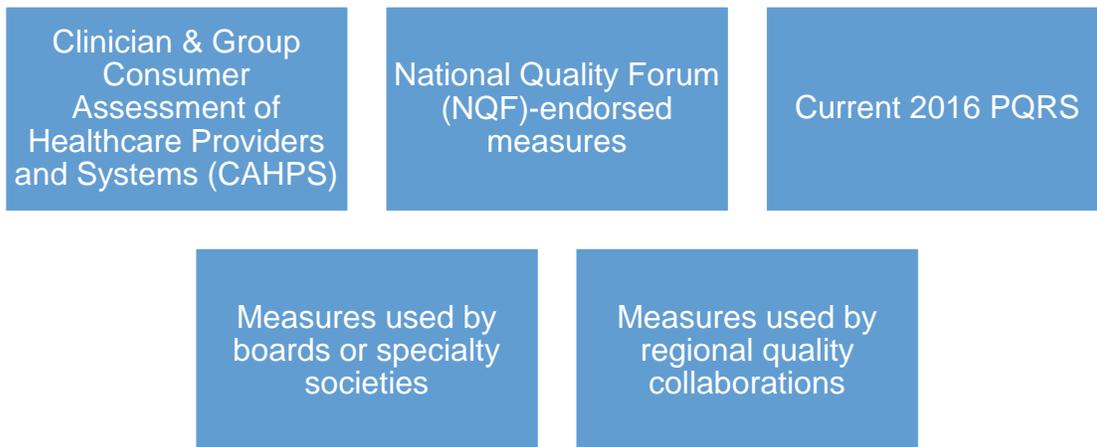
Please see the Decision Trees for reporting mechanism criteria in the "2016 PQRS Implementation Guide," found on the PQRS How to Get Started webpage.

## What is a Qualified Clinical Data Registry (QCDR)?

A QCDR is a CMS-approved entity, such as a specialty society, certification board, or regional health collaborative, that collects medical and/or clinical data for the purpose of patient and disease tracking to foster improvement in the quality of care provided to patients. A QCDR will complete the collection and submission of PQRS quality measures data on behalf of individual

EPs and PQRS group practices so that they may meet criteria for satisfactorily participating in 2016 PQRS. The data submitted to CMS via a QCDR covers quality measures across multiple payers and is not limited to Medicare. Reporting via QCDR is one of three reporting mechanisms (Qualified Registry, electronic reporting using an EHR, and QCDR) that provides calculated reporting and performance rates to CMS. See Appendix I of the "2016 PQRS Implementation Guide" on the PQRS How to Get Started webpage for the QCDR process.

A QCDR is different from a qualified registry in that it is not limited to measures within PQRS. A QCDR may submit measures from one or more of the following categories, with a maximum of 30 non-PQRS measures allowed per QCDR:

| Clinician & Group Consumer Assessment of Healthcare Providers and Systems (CAHPS) | National Quality Forum (NQF)-endorsed measures | Current 2016 PQRS |
| --- | --- | --- |

| | Measures used by boards or specialty societies | Measures used by regional quality collaborations | |
| --- | --- | --- | --- |

## Criteria for Individual EPs

Individual EPs can avoid the 2018 PQRS negative payment adjustment by meeting the following criteria:

| Size/ Mechanism | Criteria |
| --- | --- |
| **Individual EPs** | 1. Report at least 9 measures (PQRS measures and/or non-PQRS measures) available for reporting under a QCDR covering at least 3 National Quality Strategy (NQS) domains and including at least 2 outcome measures for at least 50% of the EP's applicable patients seen during the 2016 participation period.<br><br>  • If 2 outcome measures are not available, report at least 1 outcome measure and at least 1 of the following other type of measure: resource use, patient experience of care, efficiency appropriate use, or patient safety measure.*<br><br>*Reporting period for CY2016:* January 1 - December 31, 2016 to satisfactorily participate in a QCDR to avoid the 2018 payment adjustment.<br><br>More information can be found in the "2016 PQRS Implementation Guide" on the PQRS How to Get Started webpage.<br><br>*\*EPs participating via QCDR should work with their selected QCDR to determine how to participate.* |

## Criteria for PQRS Group Practices (Without CAHPS for PQRS)

New for 2016, group practices of 2-99 EPs participating via GPRO have the option to report quality measures via a QCDR. A group practice *must* have registered to report via QCDR under the GPRO for 2016 PQRS.

PQRS group practices can avoid the 2018 PQRS negative payment adjustment by meeting the following criteria:

| Size/ Mechanism | Criteria |
|---|---|
| **2 – 99 EPs participating via GPRO** | 1. Report at least 9 measures (PQRS measures and/or non-PQRS measures) available for reporting under a QCDR covering at least 3 National Quality Strategy (NQS) domains and including at least 2 outcome measures for at least 50% of the group practice's applicable patients seen during the 2016 participation period.<br>• If 2 outcome measures are not available, report at least 1 outcome measure and at least 1 of the following other type of measure: resource use, patient experience of care, efficiency appropriate use, or patient safety measure.*<br><br>*Reporting period for CY2016:* January 1 - December 31, 2016 for group practices participating in the GPRO, to satisfactorily participate in a QCDR to avoid the 2018 payment adjustment.<br><br>More information can be found in the "2016 PQRS Implementation Guide" on the PQRS How to Get Started webpage.<br><br>*PQRS group practices participating via QCDR should work with their selected QCDR to determine how to participate.* |

## CAHPS for PQRS Option with QCDR Reporting for Group Practices

Group practices with 100 or more EPs will be required to report the CAHPS for PQRS measures through a CMS-Certified Survey Vendor in addition to satisfactorily reporting PQRS measures via QCDR.

If a group practice of 2-99 EPs chooses to report via QCDR in conjunction with reporting the CAHPS for PQRS survey measures, the group practice must have all CAHPS for PQRS survey measures reported on its behalf via a CMS-Certified Survey Vendor. In addition, the group practice must satisfactorily report PQRS measures via QCDR.

For more information on CAHPS requirements, including specific reporting criteria, please see the "2016 CMS-Certified Survey Vendor Made Simple" on the PQRS CMS-Certified Survey Vendor webpage.

## 2016 Registration for PQRS Group Practices Reporting via QCDR

PQRS group practices choosing to participate in PQRS via QCDR must submit a valid registration by **June 30, 2016**. Registration must be completed online through the Physician Value Modifier (PV) - PQRS Registration System. For additional information on PQRS group practice QCDR registration and requirements please refer to the "2016 PQRS GPRO Registration Quick Reference Guide" that is located on the PQRS How to Get Started webpage.

If a group is not able to report on the selected PQRS GPRO reporting mechanism, then it is encouraged to report via another GPRO reporting mechanism or have the eligible professionals in the group participate in the PQRS as individuals in 2016.

## Steps for Successful Participation

| Step | Description |
|---|---|
| **Step 1:** Determine if you are eligible to participate in PQRS | A list of professionals who are eligible to participate in PQRS is available on the PQRS webpage. Read this list carefully, as not all are considered EPs. *New for 2016:* Group practices of 2+ EPs participating in the GPRO have the option to report quality measures via QCDR.<br><br>PQRS group practices are analyzed at the TIN level; therefore, all EPs (NPIs) under the group's TIN will be taken into account for the 2016 PQRS analysis.<br><br>**IMPORTANT:** The PQRS definition of an EP differs from the Medicare EHR Incentive Program's definition. Find information on who is eligible to participate within the Medicare EHR Incentive Program. |
| **Step 2:** Choose the appropriate QCDR | To select a QCDR, refer to the **"2016 Participating Qualified Clinical Data Registry"** list on the PQRS Qualified Clinical Data Registry Reporting webpage. The list of designated QCDRs includes information on each QCDR:<br><br>• QCDR name<br>• Contact information<br>• Cost information<br>• Measures the QCDR has registered to report |
| **Step 3:** Work directly with the QCDR | Once a QCDR is selected, the EP or PQRS group practice will be required to enter into and maintain an appropriate legal agreement. Such arrangements provide for the QCDR's receipt of the patient-specific data and allow the QCDR to release quality measure data to CMS on the EP's or PQRS group practice's behalf.<br><br>The QCDR will provide the EP or PQRS group practice with specific instructions on how to collect and provide patient data for use by the |

| Step | Description |
|---|---|
| | QCDR. The QCDR will submit 2016 data during the first quarter of 2017. EPs and PQRS group practices will work directly with their QCDRs to ensure data is submitted appropriately in order to avoid the PQRS negative payment adjustment. |
| | If submitting claims to a qualified registry or QCDR, please follow the claims-based reporting guidelines for PQRS. Additional information can be found in "2016 PQRS: Claims-Based Coding and Reporting Principles" on the PQRS Measures Codes webpage. |

## Additional Information

- See Appendix I of the "2016 PQRS Implementation Guide" on the PQRS How to Get Started webpage for a graphic representation of the QCDR process.
- Get additional guidance and information on the requirements to become a QCDR, as well as information on how a QCDR will submit quality measures data for participation periods occurring in 2016, on the PQRS QCDR Reporting webpage.
- Find answers to frequently asked questions about PQRS and related topics.

## Questions?

Contact the **QualityNet Help Desk** at **1-866-288-8912** (TTY 1-877-715-6222), available 7 a.m. to 7 p.m. Central Time Monday through Friday, or via e-mail at gnetsupport@hcqis.org. To avoid security violations, **do not** include personal identifying information, such as Social Security Number or TIN, in email inquiries to the QualityNet Help Desk.