

Physician Compare Public Reporting Plan for Group Practices and Accountable Care Organizations (ACOs)*

Data Year	Public Reporting Year	Reporting Mechanism(s)	Reporting Level	Quality Measures and Data Available for Public Reporting
2013	December 2014	WI, Registry	Group practices	A green check mark indicator on the group profile page for: • Satisfactory reporters under PQRS** • Successful e-prescribers under eRx
		WI only	Group practices of 25 or more EPs and ACOs*	PQRS GPRO and ACO GPRO Web Interface measure performance rates: • 3 Diabetes Mellitus (DM) measures • 1 Coronary Artery Disease (CAD) measure ²
		Certified Survey Vendor	ACOs*	4 CAHPS for ACOs summary survey measures ³
2014	Late 2015	All Reporting Mechanisms***	Group practices	A green check mark indicator on the group profile page for: • Satisfactory reporters under PQRS**
			Group practices of 2 or more EPs	PQRS GPRO measure performance rates: • All measures reported via the GPRO Web Interface ⁵ • 16 Registry measures ⁶ • 13 EHR measures ⁷ Include composites for DM and CAD, if technically feasible.
			ACOs*	All ACO measure performance rates including CAHPS for ACOs • 33 possible measures
		Certified Survey Vendor	Group practices of 100 or more EPs	12 CAHPS for PQRS summary survey measures ⁴

Data Year	Public Reporting Year	Reporting Mechanism(s)	Reporting Level	Quality Measures and Data Available for Public Reporting
2015	Late 2016	All Reporting Mechanisms***	Group practices	A green check mark indicator on the group profile page for: o Satisfactory reporters under PQRS**
			Group practices of 2 or more EPs	All PQRS GPRO measure performance rates
			ACOs*	All ACO measure performance rates including CAHPS for ACOs o 33 possible measures
		Certified Survey Vendor***	Group practices of 2 or more EPs*	12 CAHPS for PQRS summary survey measures ⁴

^{*} Includes both Medicare Shared Savings Program and Pioneer ACOs.

**Satisfactory reporters at the PQRS Incentive level.

***The reporting mechanism used to collect the measures will be noted.

The Physician Compare public reporting plan was finalized in the 2012, 2013, 2014, and 2015 Physician Fee Schedule (PFS) Final Rules. Any measure finalized as "available for public reporting" in the PFS final rule may be included on Physician Compare. However, only those measures that are statistically comparable, valid, and reliable, and that meet the established public reporting criteria, including the minimum sample size of 20 patients, will be published on the site. All measures submitted, reviewed, and deemed valid and reliable will be publicly reported via a downloadable database on data medicare.gov. Only those measures that are deemed most useful and best understood by consumers will be included on Physician Compare profile pages. Group practices will be given a 30-day preview period to view their measures as they will appear on Physician Compare prior to the measures being published. ACOs will be able to view their quality data that will be publicly reported on Physician Compare through the ACO Quality Reports, which will be made available to ACOs for review at least 30 days prior to the start of public reporting on Physician Compare. The specific 2013, 2014, and 2015 measures are listed below.

Questions or feedback? Email the Physician Compare team at PhysicianCompare@Westat.com.

2013 Web Interface Measures

1. Diabetes Mellitus (DM) measures

- o Hemoglobin A1c Control (HbA1c) (< 8 percent)
- o Blood Pressure (BP) < 140/90 Control
- Aspirin Use

2. Coronary Artery Disease (CAD) measures

Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD)

2013 CAHPS for ACOs measures

3. Summary Survey Measures

- o Getting timely care, appointments, and information
- How well providers Communicate
- o Patient's Rating of Provider
- o Health Promotion & Education

2014 CAHPS for PQRS measures

4. Summary Survey Measures

- o Getting Timely Care, Appointments, and Information
- o How Well Your Doctors Communicate
- o Patients' Rating of Doctor
- Access to Specialists
- Health Promotion and Education
- Shared Decision Making
- Health Status/Functional Status
- Courteous and Helpful Office Staff
- o Care Coordination
- o Between Visit Communication
- o Helping You to Take Medication as Directed
- o Stewardship of Patient Resources

2014 PQRS GPRO measures

5. All Web Interface measures

- Diabetes: Hemoglobin A1c Poor Control
- Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
- Care Coordination/Patient Safety: Medication Reconciliation
- Preventive Care: Influenza Immunization
- Preventive Care: Pneumococcal Vaccination Status for Older Adults
- o Preventive Care: Breast Cancer Screening
- o Preventive Care: Colorectal Cancer Screening
- Coronary Artery Disease (CAD): Angiotensinconverting Enzyme (ACE) Inhibitor
 or Angiotensin Receptor Blocker (ARB) Therapy Diabetes or Left Ventricular
 Systolic Dysfunction (LVEF < 40%)
- o Preventive Care: Adult Weight Screening and Follow-Up
- Preventive Care: Screening for Clinical Depression
- Coronary Artery Disease (CAD): Lipid Control
- Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
- Preventive Care: Tobacco Use: Screening and Cessation Intervention
- Hypertension (HTN): Controlling High Blood Pressure
- Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control
- Preventive Care: Screening for High Blood Pressure and Follow-Up Documented
- Care Coordination/Patient Safety: Screening for Fall Risk
- Diabetes Mellitus Composite: Optimal Diabetes Care

6. Registry measures (sub-set of 16)

- o Diabetes: Hemoglobin A1c Poor Control
- Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
- Care Coordination/Patient Safety: Medication Reconciliation
- o Preventive Care: Influenza Immunization
- Preventive Care: Pneumococcal Vaccination Status for Older Adults
- o Preventive Care: Breast Cancer Screening
- o Preventive Care: Colorectal Cancer Screening
- Coronary Artery Disease (CAD): Angiotensinconverting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy --Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%)
- Preventive Care: Adult Weight Screening and Follow-Up
- Preventive Care: Screening for Clinical Depression
- o Coronary Artery Disease (CAD): Lipid Control
- Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
- Preventive Care: Tobacco Use: Screening and Cessation Intervention
- Hypertension (HTN): Controlling High Blood Pressure
- Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control
- Preventive Care: Screening for High Blood Pressure and Follow-Up Documented

7. EHR measures (sub-set of 13)

- o Diabetes: Hemoglobin A1c Poor Control
- Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
- o Preventive Care: Influenza Immunization
- Pneumococcal Vaccination Status for Older Adults
- o Preventive Care: Breast Cancer Screening
- o Preventive Care: Colorectal Cancer Screening
- Preventive Care: Adult Weight Screening and Follow-Up
- Coronary Artery Disease (CAD): Lipid Control
- o Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
- Preventive Care: Tobacco Use: Screening and Cessation Intervention
- Hypertension (HTN): Controlling High Blood Pressure
- Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control
- Preventive Care: Screening for High Blood Pressure and Follow-Up Documented.