



**Measures Submitted for Consideration**

**Measure Owner\*/Submitter Information**

Date Submitted	
First/Last Name	
Suffix (MD, PhD, etc.)/Title	
Organization/Mailing Address	
Telephone/FAX	
E-mail	

Identify Measure Developer (e.g., AMA-PCPI, NCQA)

Name	
------	--

**Candidate Measure(s) Submission Instructions:**

For measures to be considered into the Physician Quality Reporting System, please provide documentation for each measure submitted for consideration to [PHYSICIAN\\_REPORTING\\_TEMP@cms.hhs.gov](mailto:PHYSICIAN_REPORTING_TEMP@cms.hhs.gov) no later than **5:00 p.m. EST August 1, 2012**.

1. **Measure Submitted for Consideration** – Provide the information in the table for each measure submitted for consideration
2. **Measure Specification(s)** – Provide measure specifications for each measure submitted for consideration with the Measure Denominator criteria [Demographics (e.g., age, gender); Denominator coding (e.g., ICD-9/ICD-10 CM, encounter codes such as CPT Category I or HCPCS codes, SNOMED, etc.)], Measure Numerator, Supporting Rationale and Clinical Recommendations
3. **Electronic Specification & Data Tables** – Provide both for EHR specified candidate measures

Measure Name	Brief Description	Measure Type (Process, Outcome, Structural, etc.)	Numerator Statement	Denominator Statement	Care Setting	Measure Domain (See below)	NQF Endorsed Yes/No  NQF Number (Example: Yes / #0421)	NQF Endorsement Type (Full, Time-Limited, TBD)  Date NQF Endorsed/Reviewed (Example: 01/2012)	Date Measure Developed (Example: 01/2012)	In the Public Domain (Yes/No <sup>+</sup> )

**Measure Domains**



Care Coordination, Patient and Family Engagement, Clinical Process/Effectiveness, Patient Safety, Population/Public Health, and Effective Use of Healthcare Resources

#### **+Public Domain**

Do you have any commercial, financial or intellectual interest (see below for definitions) in the candidate measure(s) you are submitting? If yes, please describe the relationship. Please attach separate documentation explaining the public domain relationship to the measure submitter, if applicable.

- ◆ **Commercial Interest**—A “commercial interest” as defined here, consists of any proprietary entity producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies.
- ◆ **Financial Relationships**—Financial relationships are those relationships in which benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. A minimal dollar amount for relationships to be significant has not been set. Inherent in any amount is the incentive to maintain or increase the value of the relationship. “Relevant” financial relationships in any amount occurring within the past 12 months that create a conflict of interest should be disclosed.
- ◆ **Intellectual Interest**—Intellectual interests may be present when the individual is a principle researcher/investigator in a study that serves as the basis for one or more to the potential performance measure under consideration.

#### **\*Measure Owner Requirements for Quality Measures in the Physician Quality Reporting System**

When a measure is proposed in the MPFS Rule to be included in Physician Quality Reporting, there are requirements and expectations for the measure owners in order to finalize these measures for inclusion in the program. After the measures are included in Physician Quality Reporting, there are additional on-going requirements and expectations for measure owners to maintain their measures in the program. Below is a list of measure owner requirements for participation in Physician Quality Reporting:

- ◆ Ensure measure(s) have been endorsed through a consensus-based process
- ◆ Provide NQF status or the plan for NQF endorsement of the measure(s) on a quarterly basis
- ◆ *Understand* the different reporting options and measure specifications as outlined above
- ◆ *Understand* there may be Physician Quality Reporting policies that may require their measure(s) to be slightly modified
- ◆ *Submit* proposed measure(s) to CMS in the Physician Quality Reporting format
- ◆ *Provide* current contact information to CMS
- ◆ *Participate* in weekly meetings hosted by CMS
- ◆ *Meet* measure related deadlines as defined by CMS
- ◆ *Respond* to on-going questions regarding their measure(s) in a timely manner
- ◆ *Provide updates* to their measure(s) at the requested times including if the measure is to be retired by the measure owner
- ◆ *Provide* guidance on coding for their measure(s) including ability to specify the measure(s) for ICD-10 codes, if applicable

Please be aware that this list is not all encompassing and that changes to the Physician Quality Reporting System can occur during the reporting year. It is recommended that potential measure owners make themselves familiar with the program by reviewing documentation that is accessible on the CMS PQRS website for the most current program year before submitting proposed quality measures.