



# Physician Quality Reporting System (PQRS): 2014 Data Submission Information

October 2015

## Background

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The Physician Quality Reporting System (PQRS) is a quality reporting program that encourages individual eligible professionals (EPs) and group practices participating through the group practice reporting option (GPRO) to report information on the quality of care to the Centers for Medicare & Medicaid Services (CMS). PQRS gives participating EPs and group practices the opportunity to assess the quality of care they provide to their patients, helping to ensure that patients get the right care at the right time. Complete information about the program is available on the CMS [PQRS website](#).

## Purpose

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This document was developed for individual EPs and group practices participating via GPRO that submitted 2014 PQRS data via a qualified clinical data registry (QCDR) (XML submission) or electronic health record (EHR) reporting mechanism (both Quality Reporting Document Architecture [QRDA] I and QRDA III submissions). This document provides information about CMS analysis for program year 2014 PQRS.

## Important Program Update Regarding 2014 PQRS Data Submission Information

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CMS has completed a review of the PQRS program year (PY) 2014 submission data and identified errors or inaccuracies in the QRDA I, QRDA III and QCDR data including, but not limited to, missing or incorrect performance rates, missing or invalid numerator data, missing or invalid denominator data, and calculation errors. Due to these findings, CMS will not be able to use these data to determine quality performance and/or establish benchmarks for the PQRS PY 2014.

### PQRS Impact

Because PQRS is a pay-for-reporting program, CMS is able to use these data for purposes of assessing PQRS satisfactory reporting provided that all identifying information (Taxpayer Identification Number [TIN]/National Provider Identifier [NPI] data) was submitted correctly and accurately. Therefore, individual EPs and group practices reporting PQRS via an electronic health record (EHR) or QCDR will be assessed based on the data that CMS received. The Physician Quality Reporting System Individual Performance Report (formerly known as Table 4 NPI Detail level report) will include the performance data at the NPI level. Starting with PQRS PY 2014, individual EPs and PQRS group practices may access this information in their 2014 Annual Quality and Resource Use Reports (QRURs) from the [CMS Enterprise Portal](#). To access

QRURs, an Enterprise Identity Management (EIDM) account is required. See the [Quick Reference and User Guides](#) for assistance.

### **EHR Incentive Program Impact**

CMS is able to use these data for purposes of assessing EPs for meeting the clinical quality measure (CQM) reporting requirements of the Medicare EHR Incentive Program provided that all identifying information (TIN/NPI data) was submitted correctly and accurately. Therefore, individual EPs and PQRS group practices who electronically submitted their CQMs through the QualityNet Portal will be assessed based on the data that CMS received.

### **Value-Based Payment Modifier (Value Modifier) Impact**

For PQRS group practices that registered for electronic reporting using an EHR via GPRO, since CMS was unable to determine the accuracy of these data for purposes of calculating the TIN's Quality Composite Scores, the TIN's Quality Composite Score will be based on the three claims-based quality outcome measures and the Consumer Assessment of Healthcare Providers and Systems (CAHPS) for PQRS summary survey measures (if applicable).

- If calculating the Quality Composite Score based on these limited measures would result in classifying the TIN in the low quality tier for purposes of calculating the Value Modifier, the TIN will instead be assigned to the average quality tier.
- If calculating the Quality Composite Score based on these limited measures would result in classifying the TIN in the high quality tier for purposes of calculating the Value Modifier, the TIN will retain the high quality designation.
- If calculating the Quality Composite Score based on these limited measures would result in the classifying the TIN as average quality, then CMS will continue to classify the TIN as average quality.

For individual EPs reporting via the QCDR (XML submissions) or PQRS EHR reporting options (both QRDA I and QRDA III submissions), if QCDR and EHR submissions are the only data sources for that provider's unique TIN/NPI combination, then CMS will not calculate PQRS measure performance for that TIN/NPI, and the TIN/NPI's Quality Composite Score will be based on only the three claims-based quality outcome measures.

- If calculating the Quality Composite Score based on these limited measures would result in classifying the TIN in the low quality tier for purposes of calculating the Value Modifier, the TIN will instead be assigned to the average quality tier.
- If calculating the Quality Composite Score based on these limited measures would result in classifying the TIN in the high quality tier for purposes of calculating the Value Modifier, the TIN will retain the high quality designation.
- If calculating the Quality Composite Score based on these limited measures would result in the classifying the TIN as average quality, then CMS will continue to classify the TIN as average quality.

### **Physician Compare Impact**

Given that analyses to date indicate these data do not meet the public reporting standards of being valid, reliable and comparable, 2014 EHR data will **not** be publicly reported on [Physician Compare](#).

**Other Programs**

For information regarding participation in other aligned programs such as the [Comprehensive Primary Care \(CPC\) initiative](#), please consult their program-specific guidance.

**For Additional Assistance**

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For additional questions, contact the QualityNet Help Desk at 1-866-288-8912 (TTY 1-877-715-6222) from 7:00 a.m. to 7:00 p.m. Central Time, Monday through Friday, or via email at [gnetsupport@hcqis.org](mailto:gnetsupport@hcqis.org). To avoid security violations, please do not include personal identifying information such as Social Security Number or Tax Identification Number in email inquiries to the QualityNet Help Desk.