

2016 PHYSICIAN QUALITY REPORTING SYSTEM Overview for Ophthalmic Practices

The Physician Quality Reporting System (PQRS) requires that eligible professionals (EPs) satisfactorily report data on quality measures for covered professional services furnished to Medicare beneficiaries to avoid a penalty.

Who can participate in PQRS?

Eligible Professionals

Physicians—Doctor of Medicine, Osteopathy, Podiatric Medicine, Optometry, Oral Surgery, Dental Medicine, Chiropractic;

Practitioners— Certified Registered Nurse Anesthetist, Physician Assistant, Nurse Practitioner, Clinical Nurse Specialist, Anesthesiologist Assistant, Certified Nurse Midwife, Clinical Social Worker, Clinical Psychologist, Registered Dietician, Nutrition Professional, Audiologist; or

Group Practices (GPRO)—2 or more eligible professionals who have reassigned their billing rights to a TIN.

Is Registration Required?

No sign up or pre-registration is required.

Is there a Financial Incentive for doing PQRS?

There is no longer an incentive for successfully reporting PQRS.

What is the Financial Penalty for Not Doing PQRS?

In 2018, EPs who do not participate in PQRS and successfully report during the 2016 reporting period will be assessed a 2% reduction in all Medicare fee-for-service payments.

How to Successfully Report PQRS for 2016

For 2016, to avoid the 2018 -2% reduction on all of your Medicare Part B allowed charges for the year, you must complete one of the below reporting options:

- 1. Measures Group: Cataract or Diabetic Retinopathy Measures Group**
 - Report the measures contained in either the Cataract or Diabetic Retinopathy measures group for **20 patients via Registry, 50% (or 11) of which must be Medicare Part B beneficiaries.**
 - See measures contained in these two Measures Groups below
- 2. Choose 9 individual measures from the relevant ophthalmology measures listed below and general care measures that cover at least 3 of the National Quality Strategy (NQS) domains.**
 - **One of the 9 measures reported must be a cross-cutting measure (Measures 130, 226 and 131 are considered cross-cutting measures).**

- NQS domains include patient and family engagement, patient safety, care coordination, population and public health, efficient use of healthcare resources and clinical processes and effectiveness.
- If fewer than 9 measures apply to the provider, they can report as many measures as apply (1-8) and report each measure for 50 percent of the Medicare Part B fee-for-service patients they see during the applicable reporting period. Choosing to report fewer than 9 measures will result in the provider going through the Measures Applicability Validation (MAV) process, which will determine whether the provider should have submitted additional measures.
- Providers can report using the following methods: claims, electronic health records (EHR), a physician quality reporting registry, or Group Practice Reporting Option (GPRO).

Ophthalmology Measures for 2016

Cataract Measures Group (Must report all measures):

<u>Measure Number</u>	<u>Measure Title</u>
Measure 191	Cataracts: 20/40 or Better Visual Acuity within 90 days Following Cataract Surgery
Measure 192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures
Measure 303	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery
Measure 304	Patient Satisfaction Within 90 Days Following Cataract Surgery
Measure 388	Cataract Surgery with Intra-Operative Complications (Unplanned Rupture of Posterior Capsule Requiring Unplanned Vitrectomy)
Measure 389	Cataract Surgery: Difference Between Planned and Final Refraction
Measure 130	Documentation of Current Medications in the Medical Record
Measure 226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Diabetic Retinopathy Measures Group (Must report all measures):

<u>Measure Number</u>	<u>Measure Title</u>
Measure 001	Diabetes: Hemoglobin A1c Poor Control
Measure 018	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy
Measure 019	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care
Measure 117	Diabetes: Eye Exam
Measure 130	Documentation of Current Medications in the Medical Record
Measure 226	Preventive Care and Screening: Tobacco Use: Screening Cessation Intervention
Measure 317	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up

Claims or Registry Reporting Measure Options (Must report 9 measures):

<u>Measure Number</u>	<u>Domain</u>	<u>Measure Title</u>	<u>Claims-Based Reporting</u>	<u>Registry</u>
Measure 12	Effective Clinical Care	Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation	Yes	Yes
Measure 14	Effective Clinical Care	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	Yes	Yes
Measure 19	Communication and Care Coordination	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	Yes	Yes
Measure 110	Community / Population Health	Preventative Care and Screening: Influenza Immunization	Yes	Yes
Measure 111	Community / Population Health	Pneumonia Vaccination Status for Older Adults	Yes	Yes
Measure 117	Effective Clinical Care	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	Yes	Yes
Measure 130	Patient Safety	Documentation of Current Medications in the Medical Record	Yes	Yes
Measure 131	Communication and Care Coordination	Pain Assessment and Follow Up	Yes	Yes
Measure 140	Effective Clinical Care	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	Yes	Yes
Measure 141	Communication and Care Coordination	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	Yes	Yes
Measure 191	Effective Clinical Care	Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery	No	Yes
Measure 192	Effective Clinical Care	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures	No	Yes
Measure 226	Community/ Population Health	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Yes	Yes
Measure 236	Effective Clinical Care	Controlling High Blood Pressure	Yes	Yes
Measure 238	Patient Safety	Use of High-Risk Medications in the Elderly	No	Yes
Measure 303	Person and Caregiver-Centered Experience and Outcomes	Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery	No	Yes
Measure 304	Person and Caregiver-Centered Experience and Outcomes	Cataracts: Patient Satisfaction within 90 Days Following Cataract Surgery	No	Yes

<u>Measure Number</u>	<u>Domain</u>	<u>Measure Title</u>	<u>Claims-Based Reporting</u>	<u>Registry</u>
Measure 385	Effective Clinical Care	Adult Primary Rhegmatogenous Retinal Detachment Surgery: Visual Acuity Improvement Within 90 Days of Surgery	No	Yes
Measure 388	Patient Safety	Cataract Surgery with Intra-Operative Complications (Unplanned Rupture of Posterior Capsule Requiring Unplanned Vitrectomy)	No	Yes
Measure 389	Effective Clinical Care	Cataract Surgery: Difference Between Planned and Final Refraction	No	Yes

Additional Resources

For more information, view the [CMS website](#) or contact [QualityNet Help Desk](#), Phone: 1-866-288-8912. If you have questions, please contact Ashley McGlone, manager of regulatory affairs, at 703-591-2220.