

Medicare and the Chiropractic Practice, Part 8

ARE YOU PARTICIPATING IN THE PQRI? WHY NOT?

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Doctors of chiropractic [first became eligible](#) to participate in the Centers for Medicare and Medicaid Services' Physician Quality Reporting Initiative (PQRI) in 2008. When first hearing of the program requirements, the processes for implementation, and the minimal incentive bonus, many DCs decided not to participate. Lack of timely feedback reports from CMS and poor success rates from those participating in 2008 also contributed to practitioner apathy and frustration toward the PQRI program.

Independent of practitioner interest in the PQRI, Congress has made a strong statement regarding the importance of this program. With the passage of the Patient Protection and Affordable Care Act, PQRI participation will become mandatory in 2015. Providers who do not report on quality measures in 2015 will have their Medicare reimbursement decreased by 1.5 percent. Beginning in 2016, [Medicare reimbursement](#) will be decreased by 2 percent for those who do not participate. Through 2015 (when providers will be penalized for not participating in the PQRI), providers will receive an incentive bonus for participation in the program. The incentives, declining by year, are 1 percent for 2011 and 0.5 percent for 2012-2014.

Congress not only made a statement on the importance of quality reporting through health care reform legislation, but also identified the need to improve the PQRI program. As an example, for the past few years providers have complained that CMS' feedback on provider quality measures reporting comes too late for the provider to address problems in a timely fashion. The Patient Protection and Affordable Care Act now addresses this issue and requires the secretary of the Department of Health and Human Services to offer more timely feedback on provider PQRI performance. The act also requires an informal appeal process for providers who believe they comply with reporting quality measures, but have not received a bonus. These changes should lead to a greater number of providers qualifying for incentive bonuses.

First convened in September 2007, the Chiropractic Summit represents leadership from some 40 organizations within the profession. The Summit meets regularly to collaborate, seek solutions, and support collective action to address challenges with the common goal of advancing chiropractic.

A major focus of the Summit is to improve practitioner participation, documentation, and compliance within the Medicare system. This article, the eighth in a series developed by the Chiropractic Summit Documentation Committee, focuses on the Physician Quality Reporting Initiative.

While some may view the 1.5-2.0 percent decrease in reimbursement as a small disincentive, providers should also be aware that both participating and non-participating PQRI practitioners are to be made public on the CMS Web site. Public disclosure of provider non-participation with quality reporting programs raises questions regarding the profession's commitment to quality care. DCs have long been acknowledged for their dedication to quality care and commitment to the patients they serve; participation in the PQRI further demonstrates this.

Currently, the measures that DCs can report in the PQRI are solely process-focused; this means you enter a specific code on the claim associated with a specific provider action (or lack thereof). For example, one quality measure is used to report on a functional outcome assessment along with a documented care plan based on the identified functional deficiencies. A specific code is entered when the provider both performs the functional assessment and provides the care plan.

If the provider does neither the assessment nor the care plan, a different code is reported. If the provider performs the functional assessment, but does not document the care plan, yet another code is reported. There are five possible codes for this measure, and the provider chooses the one that is appropriate for that particular visit. This, in a nutshell, is an example of "quality reporting."

Please note there is no requirement to sign-up or register before reporting on quality measures. Simply report the appropriate code for each measure on each visit.

The American Chiropractic Association provides the tools to get started with PQRI reporting. These resources are available online at: www.acatoday.org/pqri. The ACA also stands ready to assist providers with question; simply contact ACA's Government Relations Department at gr@acatoday.org.

CMS also provides helpful PQRI resources, accessible at www.cms.gov/pqri. The CMS Web page provides detailed information about quality measures, frequently asked PQRI questions, and news and updates regarding the PQRI. CMS also regularly holds national provider conference calls focused solely on PQRI with general updates and providing opportunity for health care providers to ask questions directly regarding PQRI procedures. In addition, the CMS' PQRI helpdesk may be reached at 1-866-288-8912 or by e-mail at qnetsupport@sdps.org.

So, why participate in the Physician Quality Reporting Initiative? Participation in the PQRI demonstrates that doctors of chiropractic are patient-centered and concerned about providing value-based care. Let's show that chiropractic means quality!

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MARCH 2011