# 2014 INCENTIVE

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| Individual | Claims | Period: 1/1/14-12/31/14<br><br>Deadline: 2/27/15 | At least 9 measures covering at least 3 domains. (If less than 9 measures/3 domains apply, report 1-8 measures covering 1-3 domains.*)<br><br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| Individual | Registry | Period: 1/1/14-12/31/14<br><br>Deadline: As specified by registry. (Registry to submit data to CMS, anticipated Q1/2015.) | At least 9 measures covering at least 3 domains. (If less than 9 measures/3 domains apply, report 1-8 measures covering 1-3 domains.*)<br><br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| | | | **OR** | |
| | | | At least 1 measures group.<br><br>Measures groups with a 0% performance rate are not counted. | At least 20 patients for each group, of which a majority are Medicare Part B FFS patients. |
| | | | **OR** | |
| | | Period: 7/1/14-12/31/14<br><br>Deadline: As specified by registry. (Registry to submit data to CMS, anticipated Q1/2015.) | At least 1measures group.<br><br>Measures groups with a 0% performance rate are not counted. | At least 20 patients for each group, of which a majority are Medicare Part B FFS patients. |
| Individual | Direct EHR product/ EHR vendor | Period: 1/1/14-12/31/14<br><br>Deadline: 2/28/15 | 9 measures covering at least 3 domains. (If CEHRT does not contain data for at least 9 measures/3 domains, report on measures for which there is data, at a minimum 1 measure for which there is Medicare patient data.) | Report as many Medicare Part B FFS patients as necessary to report on 9 measures/3 domains. If can't report on 9 measures/3 domains, report on all measures possible for all Part B FFS patients for which there is Medicare |

# 2014 INCENTIVE

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| | | | | patient data. Must report at least 1 measure for 1 patient to meet requirement. |
| Individual | Qualified Clinical Data Registry | Period: 1/1/14-12/31/14<br><br>Deadline: As determined by CMS. | At least 9 measures (including 1 outcome measure) designed for reporting under qualified clinical data registry covering at least 3 domains. | 50% of patients seen during reporting period to which measure applies. |
| Group of 25-99 eligible professionals | Web Interface** | Period: 1/1/14-12/31/14<br><br>Deadline: As determined by CMS. | All measures in interface. | Populate data fields for first 218 consecutively ranked and assigned beneficiaries in the order in which they appear in the group's sample for each module or preventive care measure. If pool of beneficiaries is less than 218, report on 100%. |
| Group of 100+ eligible professionals | Web Interface** | Period: 1/1/14-12/31/14<br><br>Deadline: As determined by CMS. | All measures in interface and all CG CAHPS survey measures via a CMS certified survey vendor and report at least 6 measures covering at least 2 domains using a qualified registry, direct EHR product or EHR vendor. | Populate data fields for first 411consecutively ranked and assigned beneficiaries in the order in which they appear in the group's sample for each module or preventive care measure. If pool of beneficiaries is less than 411, report on 100%. |
| Group of 2+ eligible professionals | Registry** | Period: 1/1/14-12/31/14<br><br>Deadline: As specified by registry. (Registry to submit data to CMS, anticipated Q1/2015.) | At least 9 measures covering at least 3 domains. (If less than 9 measures/3 domains apply, report 1-8 measures covering 1-3 domains.*)<br><br>Measures with a 0% performance rate will not be counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| Group of 2+ eligible | Direct EHR product/ | Period: 1/1/14-12/31/14<br><br>Deadline: 2/28/15 | 9 measures covering at least 3 domains. (If product/vendor does not contain data for at | Report as many Medicare Part B FFS patients as necessary to report on 9 |

# 2014 INCENTIVE

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| professionals | EHR vendor** | | least 9 measures/3 domains, report on measures for which there is data, at a minimum of 1 measure for which there is Medicare patient data.) | measures/3 domains. If can't report on 9 measures/3 domains, report on all measures possible for all Part B FFS patients for which there is Medicare patient data. Must report at least 1 measure for 1 patient to meet requirement. |
| Group of 25+ eligible professionals | Certified survey vendor and web interface registry, direct EHR product or EHR vendor** | Period: 1/1/14-12/31/14<br>Deadline: As determined by CMS. | All CG CAHPS survey measures via a CMS certified survey vendor and at least 6 measures covering at least 2 domains using a qualified registry, direct EHR product, EHR vendor or web interface. | Report as many Medicare Part B FFS patients as necessary to report on 9 measures/3 domains. If can't report on 9 measures/3 domains, report on all measures possible for all Part B FFS patients for which there is Medicare patient data. Must report at least 1 measure for 1 patient to meet requirement. |

*Subject to Measures Applicability Validation (MAV) process through which CMS determines if individual/group should have reported data covering more measures/domains.

**Group practice must elect its reporting method by 9/30/14.

# 2013 & 2014 ADDITIONAL INCENTIVE (+.5%)

| | |
|---|---|
| Requirements: | An eligible professional must:<br>• Be a board-certified physician;<br>• Satisfactorily submit data on quality measures or, for 2014, satisfactorily participate in a qualified clinical data registry for the applicable incentive year;<br>• Have such data submitted on his/her behalf through a Maintenance of Certification Program that meets the criteria for a registry or alternative criteria established by CMS;<br>• More frequently than required to qualify for or maintain board certification status:<br>- Participate in a qualified Maintenance of Certification Program for one year, and<br>- Successfully complete at least one Maintenance of Certification Program practice assessment for such year that includes a survey of patient experience with care; and<br>• Have the Maintenance of Certification Program submit data related to the eligible professional as established by CMS. 2013 data is due by 3/31/14. |

# 2015 ADJUSTMENT

| Individual Reporting Options: | |
|---|---|
| Option 1: | Meet requirements for satisfactorily reporting for 2013 Incentive Payment. |
| Option 2: | Report at least one valid measure via claims, registry or EHR-based reporting mechanism, for one Medicare Part B, FFS patient; **OR** report at least one measures group via claims or registry.<br>Reporting period: 1/1/13-12/31/13<br>Deadline: Same time periods and deadlines specified for the 2013 Incentive, apply to the 2015 Adjustment. |
| Option 3: | Elect to participate in the Administrative Claims Reporting Mechanism.<br>Election deadline: 10/15/13<br>Reporting period: 1/1/13-12/31/13 |

| Group Reporting Options: | |
|---|---|
| Option 1: | Meet requirements for satisfactorily reporting for 2013 Incentive Payment. |
| Option 2: | Report at least one valid measure, via web interface (for groups of 25+) or registry, for one Medicare Part B, FFS patient.<br>Reporting Period: 1/1/13-12/31/13<br>Deadline: Same time periods and deadlines specified for the 2013 Incentive, apply to the 2015 Adjustment. |
| Option 3: | Elect to participate in the Administrative Claims Reporting Mechanism.<br>Election deadline: 10/15/13<br>Reporting period: 1/1/13-12/31/13 |

# 2016 ADJUSTMENT

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| Individual | Claims | Period: 1/1/14-12/31/14<br>Deadline: 2/27/15 | At least 9 measures covering at least 3 domains. (If less than 9 measures/3 domains apply, report 1-8 measures covering 1-3 domains.*)<br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| | | | **OR** | |
| | | | At least 3 measures covering at least 1 domain. (If less than 3 measures apply report 1-2 measures covering 1domain.*)<br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| Individual | Registry | Period: 1/1/14-12/31/14<br>Deadline: As specified by registry. (Registry to submit data to CMS, anticipated Q1/2015.) | At least 9 measures covering at least 3 domains. (If less than 9 measures/3 domains apply, report 1-8 measures covering 1-3 domains.*)<br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| | | | **OR** | |
| | | | At least 3 measures covering at least 1 domain. (If less than 3 measures apply, report 1-2 measures covering 1domains.*)<br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| | | | **OR** | |

# 2016 ADJUSTMENT

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| | | | At least 1 measures group.<br>Measures groups with a 0% performance rate are not counted. | At least 20 patients for each group, a majority of which must be Medicare Part B FFS patients. |
| | | | **OR** | |
| | | Period: 7/1/14-12/31/14<br>Deadline: As specified by registry. (Registry to submit data to CMS, anticipated Q1/2015.) | 1 measures group.<br>Measures groups with a 0% performance rate are not counted. | At least 20 patients for each group, a majority of which must be Medicare Part B FFS patients. |
| Individual | Direct EHR product/ EHR vendor | Period: 1/1/14-12/31/14<br>Deadline: 2/28/15 | 9 measures covering at least 3 domains. (If CEHRT does not contain data for at least 9 measures/3 domains, report on measures for which there is data, at a minimum of 1 measure for which there is Medicare patient data.) | Report as many Medicare Part B FFS patients as necessary to report on 9 measures/3 domains. If can't report on 9 measures/3 domains, report on all measures possible for all Part B FFS patients for which there is Medicare patient data. Must report at least 1 measure for 1 patient to meet requirement. |
| Individual | Qualified Clinical Data Registry | Period: 1/1/14-12/31/14<br>Deadline: As determined by CMS. | At least 9 measures available in registry covering at least 3 domains. | At least 50% of patients seen during reporting period to which measure applies. |
| | | | **OR** | |
| | | | At least 3 measures available in registry covering at least 1 domain. | 50% of patients seen during reporting period to which measure applies. |

# 2016 ADJUSTMENT

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| Group of 25-99 eligible professionals | Web Interface | Period: 1/1/14-12/31/14<br>Deadline: As determined by CMS. | All measures in interface. | Populate data fields for first 218 consecutively ranked and assigned beneficiaries in the order in which they appear in the group's sample for each module or preventive care measure. If pool of beneficiaries is less than 218, report on 100% of assigned beneficiaries. |
| Group of 100+ eligible professionals | Web Interface | Period: 1/1/14-12/31/14<br>Deadline: As determined by CMS. | All measures in interface and all CG CAHPS survey measures via a certified survey vendor. | Populate data fields for first 411 consecutively ranked and assigned beneficiaries in the order in which they appear in the group's sample for each module or preventive care measure. If pool of beneficiaries is less than 411, report on 100% of assigned beneficiaries. |
| Group of 2+ eligible professionals | Registry | Period: 1/1/14-12/31/14<br>Deadline: As determined by CMS. (Registry to submit data top CMS, anticipated Q1/2015.) | At least 9 measures covering at least 3 domains. (If less than 9 measures/3 domains apply, report 1-8 measures covering 1-3 domains.*)<br>Measures with a 0% performance rate are not counted. | At least 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |
| | | | **OR** | |
| | | | At least 3 measures covering at least 1 domain. (If less than 3 measures covering 1 domain apply, report 1-2 measures covering 1-3 domains.*)<br>Measures with a 0% performance rate are not counted. | 50% of Medicare Part B FFS patients seen during reporting period to which measure applies. |

# 2016 ADJUSTMENT

| Individual or Group Practice Reporting | Reporting Method | Reporting Period / Data Submission Deadline | Number of Individual Measures/ Measures Groups and NQS Domains | Patient Population |
|---|---|---|---|---|
| Group of 2+ eligible professionals | Direct EHR product/ EHR vendor | Period: 1/1/14-12/31/14<br>Deadline: 2/28/15 | 9 measures covering at least 3 domains. (If CEHRT does not contain data for at least 9 measures/3 domains, report on measures for which there is data, at a minimum of 1 measure.) | Report as many Medicare Part B FFS patients as necessary to report on 9 measures/3 domains. If can't report on 9 measures/3 domains, report on all measures possible for all Part B FFS patients for which there is Medicare patient data. Must report at least 1 measure for 1 patient to meet requirement. |
| Group of 25+ eligible professionals | Certified survey vendor and web interface registry, direct EHR product or EHR vendor | Period: 1/1/14-12/31/14<br>Deadline: As determined by CMS. | All CG CAHPS survey measures via CMS certified vendor, and at least 6 measures covering at least 2 domains using qualified registry, direct EHR product, EHR data submission vendor or web interface. | Report as many Medicare Part B FFS patients as necessary to report on 9 measures/3 domains. If can't report on 9 measures/3 domains, report on all measures possible for all Part B FFS patients for which there is Medicare patient data. Must report at least 1 measure for 1 patient to meet requirement. |

*Subject to MAV process through which CMS determines if professional/group should have reported data covering more measures/domains.

These charts provide an overview of the CMS PQRS requirements for the calendar years 2013 through 2016 incentives and adjustments, as presented by CMS in its regulations, Federal Register preambles and other publications. In order to fully comply with CMS's requirements, an eligible professional or group will have to become familiar with the detailed criteria for the reporting mechanism it chooses. Ober Kaler would be happy to provide further assistance in this process.