New Year's Resolution: Know the Difference Between PQRS and Meaningful Use

written by Dave Halpert | December 30, 2014

No one wants another CMS penalty letter this coming year. Especially after the past two weeks, when many providers from coast to coast learned that their Medicare Part B reimbursements in 2015 will be cut by 1.5 percent, since they were eligible but did not participate in PQRS 2013. Caught by surprise, some providers were shocked to discover that their successful participation in Meaningful Use (MU) did not fulfill PQRS requirements—and they were hit with the penalty.

It certainly pays to understand the difference between these two Medicare initiatives. Both MU and PQRS are intended to improve the level of care delivered to patients and reduce excessive spending. Meaningful Use is specifically focused on the adoption of Electronic Medical or Health Record technology and the use of progressive features to improve care. PQRS measures patient outcomes and processes; it applies to all providers, regardless of technology, and includes more specific quality measures for patients. There are financial consequences for failing in either program.

MU, PQRS and the Value-Based Payment Modifier (VBPM) are the three pillars of CMS's overarching Value Based Purchasing program. Here's what you need to remember: *Medicare doesn't want you to choose between the options.* Through incentives and penalties, CMS is encouraging providers to meet *all* the standards it has developed.

Meaningful Use Promotes Best Practices for Your Electronic Medical or Health Records

Meaningful Use is an EHR (Electronic Health Record)/EMR (Electronic Medical Record) Incentive

program. To receive a bonus, your providers must individually (not as a group) demonstrate that they're "meaningfully using" their EMR. Merely shelling out money for the system doesn't meet the requirements, and neither does implementation, painful as it may have been. *To prove that you are meaningfully using your EMR, CMS wants to know that your EMR is facilitating the delivery of better care.*

There are three stages of Meaningful Use:

Stage 1: Capturing and Sharing Patient information
Stage 2: Advanced Clinical Process
Stage 3: Improved Outcomes

Each stages is fulfilled by demonstrating three types of measurement:

Core Measures, related to daily workflow (e.g. drug/allergy checks, e-prescribing, smoking status, data security, making data available to patients)
Menu Measures, designed to close gaps in care (submitting data to public health agencies, incorporating lab test results, sending patient reminders)
Clinical Quality Measures (CQMs), documenting specific aspects of care provided to patients

PQRS Focuses on the Type of Patient-Specific Data that You Report

PQRS focuses more on the patient-specific data that you report and is less concerned with the method of collecting information, as long that information is in the patient's record. Providers can participate in PQRS either with or without an EMR, and do so either as individuals or with the other providers billing under the same TIN. There are more measures to choose from, encompassing a wider group of specialty care than Meaningful Use.

Although the programs are separate, it's possible to fulfill the requirements simultaneously, but it's not as easy as you may believe, and there are good reasons for separate reporting. For example, optimizing your results with PQRS and the Value-Based Payment Modifier will require careful selection of measures that direct-EMR reporting does not do.

How to Successfully Report MU and PQRS Simultaneously

Should you choose to report both programs simultaneously, the most important thing to remember is this: *Just because Clinical Quality Measures (CQM)s resemble PQRS measures, reporting CQMs does not fulfill PQRS.*

There are two methods of reporting for both programs at once:

EHR-Direct Reporting
Reporting through a Qualified Clinical Data Registry (QCDR)

Utilizing the EHR-Direct method means that your EMR/EHR does all of the work for both programs. Here's the downside: You lose the option of selecting measures that will optimize your other CMS value-based purchasing efforts, especially the VBPM. Under that program, CMS ranks providers and groups on quality and cost, referred to as "tiering."

Your cost and quality tier are used to calculate your Value-Based Payment Modifier, which is the percentage that CMS uses to adjust your Medicare reimbursements. Your PQRS measure performance is a key factor in these calculations, because it's used to determine your quality composite for the VBPM. EHR-Direct Reporting removes you from the process, meaning that you are forfeiting control of your quality composite and cannot see what is being submitted on your behalf.

Control Your Quality Composite with a QCDR

A Qualified Clinical Data Registry (QCDR) gives you some additional reporting flexibility, but if your QCDR reports your CQMs as your PQRS measures, the same risks apply as for EHR-Direct reporting. However, you can offset that possibility if your QCDR can do double-duty and enable you to report CQMs and additional PQRS measures.

Selecting a QCDR that has been qualified by CMS to report customized measures for PQRS can swing your ability to control your quality composite to an even greater degree. Consult CMS's posted list of QCDRs, which includes the measures each can report (both traditional and custom) for PQRS, and review that list again in the coming months—QCDRs will have the opportunity to add additional custom PQRS measures for the 2015 program year.

Remember: *Meaningful Use and PQRS are separate, distinct programs.* Both involve reporting quality data to Medicare, and both invoke terms like "measures" and "performance." However, success in one Medicare program *does not* guarantee success in another. There are ways to report once and fulfill the requirements of multiple programs, but they necessitate a thorough understanding of each program's requirements. If you choose this route, tread carefully and follow the instructions to the letter, or brace yourself for Medicare's next season's greeting card.

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