Large Practice PQRS Reporting: Act Now Before GPRO Self-Nomination Deadline

written by Theresa Hush | May 25, 2016



If you're still on the fence about <u>reporting PQRS</u> as a Group or Individual for 2016, it's decision time. With the June 30 deadline for Group Reporting self-nomination just over a month away, you need to check out your options now or risk expensive reporting failures. These are your choices:

Report for providers individually, which means that at least 50 percent of eligible professionals billing under one TIN must successfully meet PQRS reporting criteria; Report for providers using a Group Reporting Option (GRPO) in one of three ways: a. GPRO Registry option, by which you select a Registry to perform your Group Reporting; b. GPRO QCDR option, by which you select a Qualified Clinical Data Registry to report; c. GPRO using the CMS web interface, with a sample of patients.

Why Is GPRO Reporting Usually Better Than Individual?

It's almost always easier to report successfully based on Group Reporting. Here's why: You are reporting fewer measures if you use GPRO than you are with individual providers. The bar to reaching successful Individual Eligible Provider Reporting is high for a large group. And the process of getting there is very hard on your staff. The 50 percent benchmark often makes meeting the goal much harder than it sounds, especially for bigger operations. Specialty type, data gaps and applicable measures in three domains require juggling to ensure successful reporting for each provider.

Besides the number of measures, there is another big reason to report using a GPRO Option: the <u>Value Modifier (VM)</u>. This is the last year that the VM is a separate program before it's consolidated into the MIPS initiative in 2017. Calculated on cost and quality performance, the VM is based on performance and is always calculated for each practice (TIN), not each provider. Because the quality composite score of the VM is based on group performance, alignment of your view with PQRS reporting is critical.

In fact, your best reporting strategy is to select PQRS measures based on optimizing your VM results. If you can't see Group Performance because you have decided to report individually, *you could trigger a penalty under the VM of as much as 4 percent of your Medicare revenues in 2018*.

GPRO Registry or GPRO QCDR? Be Sure to Account for MACRA and MIPS

Once you've decided to report using a Group Option, you still have to declare how. Your options are the web interface, Registry or QCDR. Since the web interface cannot help you with the VM, we will not address that here. Using one of the Registry options is the only way you can use Registry technology and consultation to optimize for both PQRS and VM.

The basic difference boils down to this:

GPRO Registry will report measures only for Medicare Part B. GPRO QCDR will report measures for all patients, giving you a broader range of measures that could fit into an overarching quality plan.

Note: You should have a Registry or QCDR chosen before taking this step, so that you can verify the measures you will report, as well as the functionalities that are available to you through each. Some QCDRs have limited measures libraries; others, like the <u>ICLOPS QCDR, can</u> report on all regular PQRS measures as well as non-PQRS measures, expanding your options for successful reporting.

Your success is likely the same under either program, since it's difficult for organizations to separate coverage when establishing processes for care. But GPRO using a QCDR gives you a significant preparation advantage for 2017, when <u>quality measures will be reported under MIPS</u> and *must be reported for all patients*.

PQRS Reporting in 2016 should facilitate your <u>plans for MACRA</u> and MIPS or APMs in 2017. This is the only way to avoid stumbling next year, when the program becomes more difficult. ICLOPS offers consultations to groups to help you decide among all reporting methods (Individual, GPRO Registry and GPRO QCDR), and also incorporates all the components of the upcoming MIPS program. The time to act is now, for the looming deadline applies both to GPRO self-nomination and MACRA preparation.

Founded in 2002, ICLOPS has pioneered data registry solutions for improving patient health. Our industry experts provide comprehensive <u>Solutions</u> that help you both report and improve your performance. ICLOPS is a CMS Qualified Clinical Data Registry.

Contact ICLOPS for a Discovery Session.

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