

BOARD NEWS

Center for Medicare and Medicaid Services Approves Performance in Practice Registry

In August 2008, the Center for Medicare and Medicaid Services (CMS) approved the American Board of Family Medicine's (ABFM's) Performance in Practice Registry as one of 32 qualified registries that may submit Physician Quality Reporting Initiative (PQRI) data to CMS on behalf of its Diplomates. The Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA) authorized CMS to make PQRI incentive payments for satisfactory reporting of quality measures data in 2008. It also established alternative reporting periods and criteria for the reporting of measure groups and for the reporting of PQRI quality measures through an approved clinical data registry.

Last year, 128 ABFM Diplomates participated in the initiative, which was made available on September 4, 2008. The Diplomates were permitted to use the Diabetes Module, developed by the ABFM specifically for this purpose, to collect and submit data to the Registry on a set of either 30 or 15 consecutive patients with either type 1 or type 2 diabetes. Not all patients in these samples were required to be Medicare patients, but at least 2 Medicare Part B beneficiaries had to be included in the Diplomate's sample.

Because of the positive response received by its Diplomates last year, the ABFM will apply to qualify as a PQRI registry participant again in 2009. In addition to the Diabetes Module, the ABFM plans on developing a Preventive Care Module for 2009. The procedures from last year are expected to remain the same for 2009.

Physicians who meet the criteria for satisfactory submission of quality measures data for 30 consecutive patients earn an incentive payment of 1.5% of their total allowed charges for professional services, covered by the Physician Fee Schedule, furnished during the reporting period of January 1, 2009 through December 31, 2009 (the 2009 calendar year). Alternatively, those physicians who meet the criteria for satisfactory submission of quality measures data for 15 consecutive patients earn an incentive payment of 1.5% of their total allowed charges for professional services, covered by the

Physician Fee Schedule, furnished during the reporting period of July 1, 2009 through December 31, 2009. CMS-approved financial incentives earned during 2009 reporting are scheduled to be paid in mid-2010 from the Federal Supplementary Medical Insurance (Part B) Trust Fund.

The modules may be accessed without a fee for use in participating in PQRI. However, Diplomates who are participating in a Maintenance of Certification for Family Physicians (MC-FP) and elect to complete this module to receive Part IV credit are required to submit the appropriate MC-FP processing fee.

The ABFM PQRI Diabetes Module is simple and user-friendly. First, Diplomates complete the attestation form giving the ABFM permission to transmit their data to CMS. Both the Diplomate's National Physician Identifier number and Taxpayer Identification Number (TIN) are required. It is important that Diplomates provide their individual National Physician Identifier to the ABFM as well as the TIN, which is used to receive Medicare reimbursement. Depending on circumstances, this TIN may be either an individual TIN or that which has been assigned to the Diplomate's medical group or corporation. It is important that the correct information is supplied by the Diplomate because CMS will use these 2 numbers to process the incentive payment. Incorrect numbers may result in a delay of the reimbursement.

Diplomates then download the printable data collection templates and insert data from either 30 or 15 *consecutive* patients between the ages of 18 and 75 with a diagnosis of type 1 or type 2 diabetes at the time of their visit. This can be done prospectively, filling in information from patients that are seen for the remainder of calendar year 2009; alternatively, Diplomates who have an electronic health record system can pull up any 15 or 30 consecutive patients (by date of visit) seen in calendar year 2009 and complete the data templates by retrospective chart audit. It is important to emphasize that, despite the methodology used, the

patients must have been seen consecutively by date of service.

Data collection from any diabetic patient who was seen between the date of service of the first patient and the date of service of the last patient cannot be excluded. After collecting the requisite number of patients, a Diplomate will log back on to the ABFM website and enter the data into the module from the templates.

Diplomates should save the templates! Approximately 3% of the Registry's participants will be audited, so it is important that the completed data collection templates are maintained by the Diplomate. Because the ABFM is sent de-identified data, these templates provide the only link between the data sent to the ABFM and the patients that have been seen, which must be verified if a Diplomate is randomly chosen to be audited.

An additional optional benefit exists for Diplomates who are currently participating in MC-FP. Such Diplomates may continue with the module to receive Part IV credit for the current MC-FP stage if a Performance in Practice Module or an ap-

proved Part IV alternative activity has not already been completed for that stage.

Diplomates who choose to continue the Diabetes PQRI module for MC-FP credit, or who choose the Preventive Care Module, when available, will then proceed to the quality improvement "wizard" and select one quality indicator around which to develop a quality improvement plan. Using the wizard, Diplomates develop and submit the plan. Approximately 3 months after implementing the plan within the office, the ABFM will send an email reminding the Diplomate that it is time to collect data using the same methodology described above to determine the impact of the quality improvement plan on the care that has been delivered to patients.

For questions regarding PQRI, MC-FP status, or for help with logging in to the Physician Portfolio, call the ABFM Support Center at 877-223-7437 or e-mail help@theabfm.org.

Jane Ireland
American Board of Family
Medicine—Communications