ANNUAL QRUR REPORTS NOW AVAILABLE

CMS has now made available the 2016 Annual Quality and Resource Use Reports (QRURs) to group practices and solo practitioners. The 2016 Annual QRURs show how physicians, physician assistants (PAs), nurse practitioners (NPs), clinical nurse specialists (CNSs), and certified registered nurse anesthetists (CRNAs) in groups and solo practitioners performed in 2016 on the quality and cost measures used to calculate the 2018 Value Modifier as well as their 2018 Value Modifier (VM) payment adjustment. The QRUR report and VM adjustment indicates whether you will receive an upward, neutral or downward Value Modifier adjustment to your Medicare payments for items and services rendered in 2018.

CMS reminds us that the 2018 Value Modifier payment adjustments shown in the 2016 Annual QRURs are based on proposed policies that were included in the 2018 Medicare Physician Fee Schedule Proposed Rule and are subject to change.

If after reviewing your QRUR your feel that there is an error in your 2018 Value Modifier calculation, you may request an informal review during the informal review period between September 18, 2017 through December 1, 2017 8:00 pm Eastern Time. Click on this link for information from CMS on how to request an informal review: https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeedbackProgram/Downloads/2018-VM-IR-Quick-Ref-Guide.pdf.

MIPS LETTER TO REMOVE PART B DRUGS FROM MIPS PAYMENT ADJUSTMENT

The Center for Medicare and Medicaid Services (CMS) is proposing to apply the Merit-based Incentive Payment System (MIPS) payment adjustment to physician administered Part B drugs in addition to physician services. This is a departure from CMS’ previous policy for applying quality programs payment adjustments only to physician services paid under the Medicare Physician Fee Schedule (MPFS). In response, Senator Pat Roberts (R-KS) and Senator Tom Carper (D-DE) are leading a letter to the Department of Health and Human Services (HHS) from Members of Congress urging the exclusion of separately payable Part B drugs from the application of the MIPS adjustment in order to better achieve the overarching goals of MACRA and to apply the MIPS adjustments in a fair and consistent manner.

The American Society of Clinical Oncology’s (ASCO’s) ACT Network makes it easy to ask your Senator to sign on to the Senator Roberts/Senator Carper Letter. Click Here to write to your Senator and ask them to sign this important letter to ensure MACRA supports high quality, high value care and applies the MIPS adjustments in a fair and consistent manner.

CMS PHYSICIAN COMPARE PREVIEW PERIOD

The Physician Compare 30-day preview period opened on October 18. During this 30-day period providers can preview their 2016 Physician Quality Reporting System (PQRS) measures performance data as it will appear on Physician Compare on profile pages later this year and in the Downloadable Database. You can access the secured measure preview site through the PQRS portal - Provider Quality Information Portal (PQIP). CMS has also published a document 5 Tips to Preview Period that will walk you through the steps to navigating the 2017 Physician Compare preview period. This document also contains links to the Physician Compare Guide to Preview and the 2017 National Provider Call Presentation Slides – Physician Compare: What you need to know.

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