



Medicare Physician Quality Reporting Initiative (PQRI)

The 2009 PQRI is a voluntary program where eligible professionals participate by reporting appropriate quality-measure data on their Medicare claims for dates of service January 1 through December 31, 2009. The initiative includes an incentive for those who qualify. In order to satisfy the PQRI requirements and earn the financial incentive, certain reporting thresholds must be met. If no more than three 2009 PQRI quality measures were applicable to services furnished by an eligible professional, each such measure must have been reported in at least 80% of the cases in which the measure was reportable. When four or more measures were applicable to the services furnished by an eligible professional, the 80% threshold must have been met on at least three of the measures reported. It is expected that Medicare will eventually move to a true “pay-for-performance” system.

This packet includes information for Measures 18, 19 and 117:

- AOA's PQRI Summary Chart, which details each PQRI measure listed with its associated CPT II code(s), CPT I code(s), modifiers and usage notes
- Measure Descriptions from CMS
- Data Collection Sheets from CMS
- Coding Specifications from CMS

This information is also available on POA's Web site in the Pennsylvania Diabetic Eye Health Alliance section.

AOA has dedicated a detailed section of its Web site to PQRI, including the tools for the 2009 PQRI reporting period and any updates that might occur, as well as multiple links to CMS resources. AOA online resources include the following:

AOA PQRI Section Direct URL: www.aoa.org/PQRI.xml

- News & Alerts
- 2009 Measure Specifications
- AOA 2009 PowerPoint Presentation
- PQRI Coding Definitions
- CMS 2009 PQRI Measure Specifications Manual
- PQRI Tip Sheet for Accurate Reporting
- Filing Specifics & Examples
- PQRI 2007 Reporting Experience (detailing common reporting errors that prevented bonus payments)