

Part B Insider (Multispecialty) Coding Alert

PAY FOR PERFORMANCE: Give P4P A Test Run--With No Pay At Stake, Suggests CMS

Start now, and you'll receive a confidential report by December

Medicare's Physician Voluntary Reporting Program (PVRP) got off to a slow start thanks to a healthy dose of skepticism amongst physicians.

A few days after the PVRP's official April 1 start date, officials from the **Centers for Medicare & Medicaid Services** spent a special physician open door forum trying to convince doctors to take part. One provider asked how many doctors had signed up before the start date, and CMS official **Trent Haywood** responded that the CMS outreach for the program was just ramping up now.

Details: The program asks physicians to submit information (via "G" codes) on 16 quality measures. Medicare doesn't pay extra to physicians who participate in the program, so one participant asked what's in it for providers.

Haywood responded that providers have the chance to become familiar with pay-for-performance (P4P) before they have reimbursement at stake, help CMS refine the process, and also obtain feedback on their performance.

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CMS will issue a confidential report to providers who choose to participate in the PVRP, comparing their performance to other providers' nationwide. Whether the reports will compare your performance to other providers in your specialty or your state depends on what kind of data CMS is able to put together, Haywood said.

If you sign up for the program before June 30, you'll receive your first report, for the April-June quarter, in December, said Haywood.

CMS also unveiled four worksheets for primary care, surgery, nephrology and emergency medicine physicians. The worksheets are designed to help your doctor fill out the information on the 16 measures you'd be reporting on in the PVRP. That way, you won't have to wait for the hospital records to come back.

The worksheets caused more confusion among the participants on the ODF call, because it wasn't clear if they constituted official documentation for medical records. CMS officials responded that the worksheets were purely unofficial and weren't intended to be new forms or documentation. You can use them if you find them helpful, and then throw them away.

There were teething problems with the sign-up for the PVRP. One caller noted that some popular billing systems won't allow you to bill for codes that carry no reimbursement, and it may take months to make changes to the system. Another caller reported that she'd tried twice to sign her physicians up and had run into trouble.

CMS officials said that they'd just deleted a requirement that each physician sign up with a Unique Physician Identifier Number, which means a whole group practice can now sign up in one go. That means, however, that if only half the doctors in a practice choose to participate, the practice's participation rate in the reports will register as low.

Asked whether a nurse practitioner could participate in the PVRP, CMS officials responded that anyone who bills as a physician can participate.

