CMS has granted approval to the ABFM to submit PQRS data to CMS on behalf of its Diplomates using the ABFM Performance in Practice Registry. You may use the PQRS Diabetes Module to collect and submit data to the Registry on a set of 20 unique, separate and distinct type 1 or type 2 diabetes mellitus patients of which a majority (11) are Medicare Part B beneficiaries. The reporting period is January 1 – December 31, 2013 and all the patients must be between 18 and 75 years of age.

The Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA), enacted on December 29, 2007, authorized the Centers for Medicare and Medicaid Services (CMS) to make PQRS incentive payments to physicians for satisfactory reporting of quality measures data in 2010. It also established alternative reporting periods and criteria for the reporting of measure groups and of PQRS quality measures through a clinical data registry. To date, the PQRS has been a voluntary program, offering incentives to physicians who report on a designated set of quality measures. While the PQRS will remain voluntary, starting with the 2013 reporting year, it will include both incentives and penalties for non-participation. For further information, please visit http://cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html.

For 2013, Physicians who meet the criteria for satisfactory submission of quality measures data will earn an incentive payment of 0.5 percent of their total allowed charges for Physician Fee Schedule (PFS) covered professional services furnished during this reporting period.

If you currently are participating in Maintenance of Certification for Family Physicians (MC-FP), you may elect to continue the PQRS Diabetes module to receive Part IV credit for your current stage.

The ABFM PQRS Diabetes Module is easy to use. Prior to beginning the module you must complete an online attestation form giving the ABFM permission to transmit your data to CMS. At the end of this document we request both your individual National Physician Identifier (NPI) number and your Taxpayer Identification Number (TIN) that you, or your medical group, uses for you to bill Medicare. It is important that you supply the correct information because CMS will use both numbers to process your incentive payment. Incorrect numbers may result in denial of the bonus payment by CMS.

Approximately 3% of the registry’s participants will be randomly selected for audit, so it is important that you maintain the completed templates. Because you will be submitting the ABFM de-identified data, the completed templates provide the only link between the data you send to us and the patients you have seen, which must be verified if you are selected for audit. Failure to provide the necessary information needed to conduct the audit will necessarily result in the inability to verify your data and result in disallowance of the 2013 bonus.

For additional information, please contact the ABFM Support Center at 877-223-7437 or via email at help@theabfm.org.
Physician Quality Reporting System: Maintenance of Certification (PQRS:MOC)

Incentive Program
The Affordable Care Act (ACA) requires that CMS provide, as part of the PQRS, an option for physicians to report data on quality measures through a Maintenance of Certification (MOC) Program (PQRS:MOC) operated by specialty boards of the American Board of Medical Specialties. PQRS:MOC is an incentive program that gives a physician the opportunity to receive an additional incentive payment of 0.5% of CMS billings by combining PQRS reporting with more frequent activities in Maintenance of Certification. This physician-only incentive will be paid at the same time as the 2013 PQRS incentive for those who participate in the ABFM MC-FP program more frequently than is required to qualify for or maintain board certification.

How to Qualify
In order to qualify for the additional PQRS:MOC incentive, you will need to complete the following requirements:

◊ Complete MOC Attestation (through MOC Matters*)
◊ Complete PQRS Reporting for calendar year 2013
◊ Participate in MC-FP Program throughout the calendar year 2013
◊ Complete Patient Experience of Care Survey* in calendar year 2013
◊ Complete MC-FP Practice Assessment Activity (Part IV module) in 2013
◊ Participate in MC-FP More Frequently during calendar year 2013 by completing one of the following:
  ▪ Part II (lifelong learning and self-assessment): Completion of an ABFM Self-Assessment Module (SAM) in calendar year 2013, regardless of whether or not you have already fulfilled the SAM requirement for your current stage or cycle.

    OR

  ▪ Part IV (performance in practice assessment): Completion of an ABFM approved Part IV activity in calendar year 2013, regardless of whether or not you have already fulfilled the Part IV requirement for your current stage or cycle.
    ▪ Excluding: (1) Hand Hygiene module with simulated data; (2) Cultural Competency MIMM; (3) Information Management MIMM; and (4) any other non-patient based activities approved for MC-FP.

    OR

  ▪ Part III (cognitive skills assessment): Taking the secure examination in a year earlier than required to maintain your certification. More frequent examination participation must be within calendar year 2013.

*MOC Matters (https://mocmatters.abms.org) is a website developed by ABMS and CECity to assist physicians with completing the PQRS:MOC incentive program. This portal has access to a PQRS registry, a patient experience of care survey, and the required MOC attestation.