Audiology Physician Quality Reporting System (PQRS) Frequently Asked Questions

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**What is the Physician Quality Reporting System (PQRS)?**

The PQRS, formerly known as the Physician Quality Reporting Initiative (PQRI), is a voluntary program through the Centers for Medicare and Medicaid Services (CMS) designed to improve the quality of care to Medicare beneficiaries by tracking practice patterns.

**Can an audiologist participate in PQRS?**

Yes. All audiologists enrolled as a Medicare participating or non-participating provider who are in private practice or group practice, and use their individual NPI on the claim form as the rendering provider should participate in PQRS.

PQRS is for Medicare Part B only, but does not apply to Part B settings for hospitals and skilled nursing facilities.

**When can an audiologist participating in PQRS anticipate receiving the incentive payment?**

At any time, though participation requires that 50% of the eligible patients are reported.

**What are the quality measures that audiologists can report on?**

Audiologists can report on four quality measures that call for referral of patients of any age to a physician after an audiological assessment determines one of three conditions and the patient is not currently under the care of a physician for that condition:

- Congenital or traumatic deformity of the ear
- Acute or chronic dizziness
- Documentation and Verification of Current Medications in the Medical Record
- Screening for Clinical Depression and Follow-up Plan

Screening for clinical depression requires that the audiologist routinely administers a standardized screening tool and include a referral to a qualified medical professional for depression management if indicated.

**How often do I need to report?**
For the audiology specific measures, you should report them on the claim for the date of service you see the patient, one time a year. For documentation of current medications, reporting must occur with every date of service that includes one of the CPT codes. For screening for clinical depression, the measure should only be reported on the date of service that a standardized screening tool was administered.

**How would an audiologist report on these measures?**

These measures are reportable via the CMS 1500 claim form. The audiologist would add Medicare directed codes to the claim form to report the measures to CMS. For more information, see Reporting Audiology Quality Measures: A Step-by-Step Guide.

**Why is PQRS important for audiology?**

The audiology PQRS measures were developed by the Audiology Quality Consortium (AQC), a coalition of 10 audiology organizations. By participating in PQRS, audiologists will be providing support for the efficacy of audiology services as part of the patient continuum of care. PQRS recognizes the profession as independent providers offering best practices to Medicare beneficiaries. Also, new legislative mandates require Medicare to track outcome measures for their beneficiaries. Often, trends in Medicare policies are adopted by Medicaid and private health plans. As Medicare becomes more functional outcomes-based, it will be important for audiologists to adapt their practices to that way of thinking, especially when Medicaid and private insurers adopt similar policies.

Participating audiologists are eligible for an incentive payment at year end for performing specific procedures that improve the quality of health care. In 2015, reporting becomes mandatory and audiologists who do not participate will see their Medicare reimbursement decrease by 1.5%.

**Where can I find more information?**

Further information is available on the Audiology Quality Consortium’s website. Additional information about Medicare and the Physician Quality Reporting System can be found on the Centers for Medicare and Medicaid Services (CMS) website.