

WebPT Physician Quality Reporting System (PQRS) User Guide

What is PQRS?

Created by Center for Medicare and Medicaid Services (CMS), Physician Quality Reporting System (PQRS) mandates that physical therapists, occupational therapists, and qualified speech-language therapists meet the standards for satisfactory reporting. If you are not PQRS compliant in 2013, CMS will assess penalties of 1.5% of your Medicare payments as fines in 2015. However, if you are compliant, you will earn a 0.5% incentive payment on your total allowed charges during the reporting period.

Why WebPT?

While it seems like a pain, PQRS is absolutely necessary. Save yourself the headaches—and fines—and let WebPT manage PQRS for you. We're a Certified PQRS Registry, so with us, staying compliant is easy.

Here are the benefits in a nutshell:

- Avoid a 1.5% reimbursement penalty in 2015
- Earn a 0.5% incentive payment
- Let WebPT manage PQRS for you with our registry-based reporting method
- Improve measure reporting efficiency through our EMR
- Implement clinic workflows for PQRS before penalties take effect
- Ensure compliance
- Elevate your clinic's standard of care while saving yourself time, money, and stress

What are the reporting methods?

There are two different methods for reporting PQRS:

- **Registry-Based (Automatic Submission)**
This option manages most of PQRS for you. Because we merge PQRS with standard documentation, you simply report your PQRS measures directly within the patient record. We then aggregate that data, compile it into a digital form, and submit it to CMS. So, after setup, you document and we take care of the rest—no muss, no fuss. Essentially, registry-based reporting means you'll never forget PQRS because we remember for you.
- **Claims-Based (Manual Submission)**
Claims-based reporting allows you to use your WebPT documentation to help you submit the appropriate CPT codes to CMS along with billing. As a note, in order to successfully complete claims-based PQRS reporting, you must report at least 50% of patients.

Some food for thought on claims-based reporting: being in control of your own data may prove to be a double-edged sword. You must be your own auditor. Of course, if you're a smaller practice and Medicare patients make up a small portion of your payer mix, then this option may be worth considering. Otherwise, claims-based reporting will require more work, time, and responsibility for you and your clinic. It'll be up to you to ensure you stay compliant.

While we recommend registry-based, no matter which reporting method you choose, you're better protecting your practice from penalties. Set yourself up for success; sign up for **Registry-Based PQRS Reporting** today. It's a minor investment now or an avalanche of penalties, fines, wasted time, and migraines later.

How do I stay compliant?

To ensure compliance, therapists should complete a PQRS form with at least three applicable outcome measures for every Medicare patient. Here are some of WebPT's available measures:

BMI Screening and Follow-up (Measure #128)

This measure requires you to document patient BMI (Body Mass Index). WebPT completes the calculation for you as long as you enter the patient weight and height. If the patient is outside of a normal range, you must document a follow-up plan. CMS requires you complete this measure once per reporting period for each Medicare patient.

Diabetic Foot & Ankle Care; Neurological Evaluation (Measure #126)

Patients with diabetes mellitus need appropriate foot and ankle care to prevent ulcerations and infections to reduce the number and severity of amputations. CMS requires you to implement a follow-up treatment plan after assessment.

Diabetic Foot & Ankle Care; Ulcer Prevention/Footwear Evaluation (Measure #127)

You can only use this measure for patients over the age of 18 who have been diagnosed with diabetes mellitus. If your patient meets this criterion, you will need to evaluate him or her for proper footwear and sizing.

Pain Assessment Prior to Initiation of Therapy (Measure #131)

To satisfy this measure, you will need to document an assessment of pain, including location, intensity, and description. This measure also requires you to document a follow-up plan for pain management. CMS requires you to perform this measurement for each initial examination or reexamination you complete during the reporting period.

Documentation and Verification of Medications (Measure #130)

To use this measure, you must document the medications your patient is currently taking with patient or authorized representative verification. CMS requires you to complete this measurement on each examination and/or reexamination during the reporting period.

Falls Risk Assessment (Measure #154)

This is a two-part measure you need to use in conjunction with #155. In order to use this measure, your patient must be 65 years of age or older and have a history of falls (either two or more in the past year or one with injury). CMS requires you to complete this measure once per reporting period.

Falls Risk Assessment & Plan of Care (Measure #155)

In order to use this measure, your patient must be 65 years of age or older and you must screen him or her using Measure #154. CMS requires you to report this measure once per reporting period, at minimum.

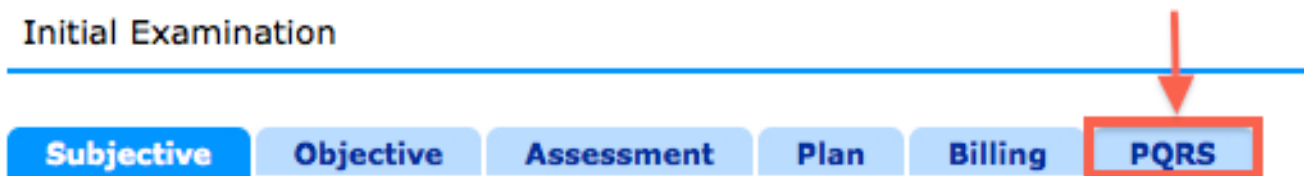
What does PQRS look like within WebPT?

Let's review a few sample screenshots from our system to show you what is required during the documentation process while participating in PQRS. You'll notice specific alerts to pay attention to within the system to ensure PQRS compliance.

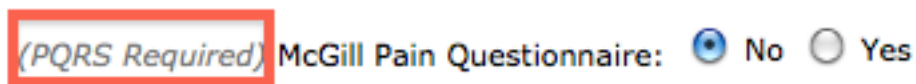
Note: If you think you and your staff would learn better with a video, check out our [WebPT PQRS Training Video](#).

After you sign up for PQRS, you'll note in your documentation a PQRS tab in your SOAP note view. This tab is where you will validate your measures upon completing your documentation.

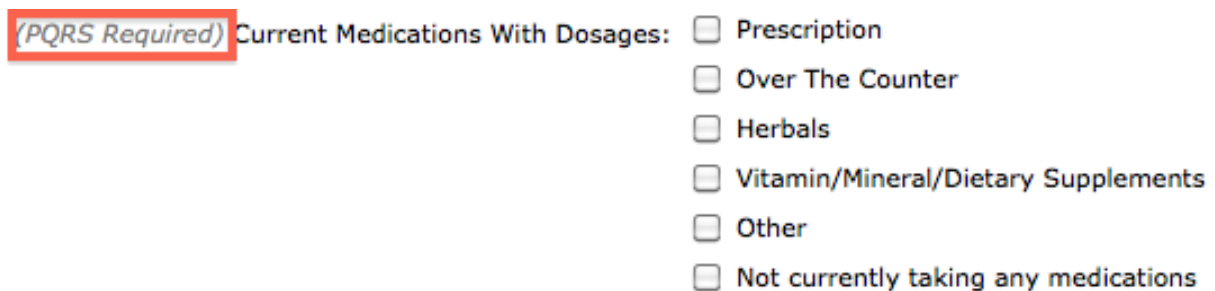
Initial Examination



Below is an example of a PQRS test required for a measure located in the Subjective section. In this case, the therapist selected "Pain Assessment" as a measure. WebPT includes PQRS-required alerts based on the PQRS measures you've selected to the left of each test.



Here is another example of a required test; this time for the Current Medications measure. It also appears in the Subjective section. You will see the alert to the left of the tests, reminding you to complete this particular test in order to satisfy the selected measures' requirements.



Alerts can also appear in the Objective section. For example, should you choose the BMI Screening measure you will see an alert to the left of the Body Mass Index test.

(PQRS Required) Body Mass Index ☒ No ☐ Yes

(Medicare Required) Outcome Measurement Tools ☒ No ☐ Yes

We'll auto-fill the PQRS answers for each measure you choose based on your documentation and completed tests. On the PQRS tab, you will then be able to validate these answers as shown below. The example below is for the Body Mass Index measure; we chose the second option based on the supporting documentation.

Measure: 128 Body Mass Index (BMI) Screening and Follow-Up

- ☐ BMI Within normal parameters and documented; no follow-up plan needed
- ☒ BMI above upper parameter; follow-up plan documented in medical record
- ☐ BMI below lower parameter; follow-up plan documented in the medical record
- ☐ BMI Not Documented; Patient not eligible. Patient may not be considered eligible in the following situation: problem is being managed by another provider, patient has a terminal illness, patient refuse
- ☐ BMI Not Documented for other reason. Provide reason below.
- ☐ BMI Calculated but no follow-up documented

Comments / Medical Reason:

Below is another example of a measure on the PQRS tab of an examination. In this case, the therapist provided no supporting documentation during the examination, so Measure #130 would look like this:

Measure: 130 Documentation and Verification of Current Medications in the Medical Record

- ☐ Current medications with dosages AND verification documented
To enable this option, you must perform the following tests on an evaluation for this patient
 - Document Current medications with dosages & Obtain written provider documentation confirming that current patient or authorized representative.
- ☒ Current medications with dosages NOT documented, Patient not eligible
 - Patient refuses to participate
 - Patient is in an urgent or emergent medical situation where time is of the essence and to delay treatment would
 - Patient cognitively impaired and no authorized representative available
- ☐ Current medications with dosages documented, Patient verification NOT documented, Patient not eligible
To enable this option, you must perform the following tests on an evaluation for this patient
 - Document Current medications with dosages
- ☐ Current medications with dosages documented, Patient verification NOT documented, Reason not specified
To enable this option, you must perform the following tests on an evaluation for this patient
 - Document Current medications with dosages
- ☐ Current medications with dosages NOT documented, Reason not specified

Comments / Medical Reason:

If you do not document for PQRS correctly, an error alert will appear on the dashboard in red when you attempt to finalize the examination (see example below). This error alert will include which measures triggered the error and what actions you need to take. You will not be able to finalize the note until you correct the error(s). This process is in place to ensure you document for PQRS successfully and therefore do not incur any penalties.

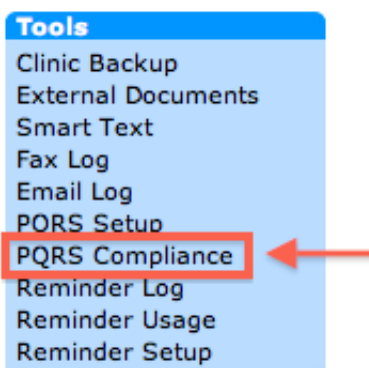
Initial Examination

Please correct the following errors:

PQRS Requires that measure 128:Body Mass Index (BMI) Screening and Follow-Up be answered

PQRS Requires that measure 131:Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up be answered

Additionally, WebPT offers a PQRS Compliance Report. You can use this report to locate patients that qualify for PQRS and ensure you complete their notes correctly as well as met the required percentage of patients to successfully complete PQRS for the current year. In the PQRS Compliance Report, you can click the date of the note and go directly to that patient's chart.



Patients Missing Data for PQRS Measures

Period: January 1, 2011 to December 31, 2011

The following patients are missing data for this period. In order to have full compliance with PQRS, daily notes or addendums to daily notes must be performed and finalized for the following patients. This will allow the missing PQRS measures to be answered.

Appleseed, Johnny

Daily note on October 18th, 2011

- Measure 124 - Adoption/Use of Health Information Technology (Electronic Health Records)
- Measure 130 - Documentation and Verification of Current Medications in the Medical Record
- Measure 131 - Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up

Bayuk, Lindsay

Initial examination on October 25th, 2011

- Measure 124 - Adoption/Use of Health Information Technology (Electronic Health Records)
- Measure 128 - Body Mass Index (BMI) Screening and Follow-Up
- Measure 130 - Documentation and Verification of Current Medications in the Medical Record
- Measure 131 - Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up

Brown, Joe

Initial examination on April 12th, 2011

- Measure 124 - Adoption/Use of Health Information Technology (Electronic Health Records)
- Measure 130 - Documentation and Verification of Current Medications in the Medical Record
- Measure 131 - Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up
- Measure 154 - Falls: Risk Assessment
- Measure 155 - Falls: Plan of Care

Set yourself up for success, and let WebPT manage PQRS for you. Sign up for registry-based reporting today. Contact your Success Rep at 866.221.1870, ext. 3, or success@webpt.com to learn more about PQRS.

Questions about PQRS in general? Contact Support at 866.221.1870, ext. 2, or support@webpt.com.