PQRS Made Easy
A Simple, Effective and Affordable Way to Avoid the Medicare PQRS Penalty

It's easy to earn a bonus and avoid Medicare Fee penalties by participating in the PQRS program through Covisint. Participation in the Physician Quality Reporting System, formerly known as PQRI, no longer has to involve complex coding systems and expensive manual processes. Covisint PQRS registry simplifies PQRS and you can feel at ease knowing your PQRS reporting is in good hands.

How important is PQRS? Actually, PQRS is the first step on the road to Accountable Care Organizations and other value payment programs. PQRS participation encourages care providers to discuss chronic disease and preventive care needs during an office visit as well as document compliance in the medical chart for follow up or reference at a later date and time.

A “cross walk” to other shared savings models and performance initiatives.

Success with PQRS equips your organization with the skills and processes to participate in a variety of other value-based payment initiatives. Quality measures within the PQRS program are often part of other shared savings models and performance initiatives.

PQRS Enterprise: Simple Compliance for Large Groups through Data Mining.

The 2014 PQRS reporting requirements have increased but you can trust Covisint as your PQRS registry (including GPRO) or QCDR vendor. For 2014 PQRS, each eligible provider or group can report at least 9** individual measures across 3 domains for 50% of their applicable Medicare Part B FFS patients. Large provider groups, whether reporting individually or as a GPRO, are using the Covisint registry to meet these requirements with minimal impact on existing workflow. Input data files include:

- Billing and/or Claims Files (Required)
- Lab Data
- Prescriptions or Pharmacy Claims Data
- Vitals or Other Clinical Data

Covisint mines the data, organizes it by either provider or Tax ID and then creates and shares with you a PQRS success report. The data is evaluated to determine which CMS measures are applicable and the distribution of measures and results per provider or Tax ID. The data feeds the Covisint electronic submission system, ensuring format compliance with ever-changing CMS layouts. The process requires no clinical workflow changes. For 2014, Eligible physicians earn 0.5% of total allowed charges for covered Medicare Part B FFS patients for the year as well as avoid the 2.0% payment adjustment in 2016.

Myth busting 101: Top 4 PQRS Misconceptions -- and the Reality

PQRS misconceptions prevent organizations from obtaining their CMS incentive dollars. Commonly cited misconceptions include:

1. MU and PQRS incentives can’t be obtained in the same year. Both incentives are available concurrently.

2. Satisfactorily meeting MU requirements also satisfies PQRS requirements. MU and PQRS are two separate CMS programs with different processes. Providers must report to each program separately.

3. It’s difficult and time-consuming. With Covisint, the PQRS submission process is often measured in hours, not days, and individual providers can self report on as few as 20 patients through the Covisint PQRS web application.

4. CMS just won’t pay. Untrue. Submission in accordance with CMS regulations results in payment. For 2010*, more than 6,800 providers participating in PQRS using Covisint’s registry received payments estimated at more than $9 million in incentive money.

The reality is that customers who use Covisint PQRS find the incentive payment well-worth the effort. And you can also trust in Covisint to keep you penalty free as well.
PQRS Warning: Penalties are here.

Hopefully you were able to report in 2013, and the 1.5% decrease in your 2015 Medicare reimbursements is not in your future. Did you know the penalty increases to 2% in 2016 based on 2014 reporting? And the requirements have increased. Don't get caught unawares, let Covisint, with their years of experience and expertise help you report successfully.

Covisint has helped more physicians, practices and entire healthcare systems easily engage with CMS to obtain more PQRS incentives than other solution providers.

It's not too late nor too hard to succeed with the PQRS program.

To learn more about this as well as other Covisint PQRS reporting options visit our website at www.pqrs.covisint.com.

Or contact us by calling 866.823.3958 or email info.covisint@covisint.com to get your organization on the path to success with PQRS.

*2011 numbers are not yet available

** EPs or group practices that satisfactorily report for only one to eight PQRS measures across one or more domains for at least 50 percent of their eligible patients or encounters for each measure, OR EPs or group practices that satisfactorily report for nine or more PQRS measures across less than three domains for at least 50 percent of their eligible patients or encounters for each measure will be subject to the Measure Applicability Validation Process (MAV). Please refer to the 2014 PQRS Measure Applicability Validation Process for Registry-Based Reporting of Individual Measures document, available as a download on the Analysis and Payment page of the CMS PQRS website at http://www.cms.gov/Medicare/Quality-Initiatives/Patient-Assessment-Instruments/PQRS/AnalysisAndPayment.html


In healthcare, Covisint connects over 2,000 sites, 40,000 care givers across 35,000,000 patients. Our technology has measurably improved care outcomes with small and large early adopters for more than a decade. We integrated a group of three recognized market-leading technologies with the proven Covisint core platform to create the most integrated Accountable Care solution in healthcare. We have the proven expertise to connect disparate care teams, deliver sophisticated solutions at the point of care, and quickly demonstrate significant cost reductions.