

2007 Physician Quality Reporting Initiative Preliminary Participation, as of November 2007

The Iowa Foundation for Medical Care (IFMC) Physician Quality Reporting Initiative (PQRI) team in collaboration with the Physician Performance Information Center (PPIC) team prepared this report to provide the Centers for Medicare & Medicaid Services (CMS) with interim participation and reporting statistics related to the 2007 PQRI.

Analytic Information

The data source for this report is the carrier claims for services July - November 2007 that were processed by the end of November 2007 (i.e. July, August, September, October, and November 2007 TAP files).

Points of Interest

Submission by Carrier

1. 99,319 TIN/NPI combinations (15.74% of those eligible) were attempting to participate.
2. The average number of measures attempted per NPI/TIN is greater than 3 measures (3.58)

Submission by Measure

1. The number of NPIs eligible varies a great deal by measure, from fewer than 30 for the pediatric measures (#65 and #66) to 499,593 for Advanced Care Plan (#47) and 445,158 for the Fall Risk measure (#4).
2. The number of NPIs reporting varies a great deal by measure. The measures with the largest # of NPIs submitting are #54 ECG for Non-Traumatic Chest Pain (19,938 NPIs) and #55 ECG for Syncope (15,584).
3. While several measures had fewer than 1% of eligible NPIs submitting (e.g., Antidepressant Meds #9, Asthma #53 and #64, Assessment for UI #48, and Medication Reconciliation #46), the Timing of Prophylactic Antibiotic measure (#30) had 80.99% of eligible NPIs submitting - and ECG for Syncope (#55) had 51.03% of eligibles submitting.

Submission Errors by Carrier

1. Nationally, 9.53% of NPIs were reporting correctly for every QDC occurrence while only 7.15% of NPIs were reporting incorrectly for every QDC occurrence, and 83.32% reported correctly for some but not all QDC occurrences.

Submission Errors by Measure

1. The measures with the highest proportion of reporting attempts accepted were #71 Breast Cancer - Hormonal Therapy (86.47% of QDC attempts reported correctly) and #38 - ESRD Hematocrit (84.48% of attempts reported correctly).
2. There are nine (9) measures with reporting accuracy rates below 15% (i.e., fewer than 15% of QDC occurrences accepted).
3. The measures with the highest percentage of errors due to missing NPIs were #48 Assessment of UI in Older Women (36.6% of errors associated with the measure) and #39 Osteoporosis - Screening or Therapy (31.86% of errors). The largest number of missing NPIs appeared for #47 Advance Care Plan (97,516 attempts with no NPI) and #12 Optic Nerve Evaluation for Glaucoma (97,403 attempts with a missing NPI).

Reporting Rates by Measure

1. There were a few measures with very high reporting rates. These included #33 Stroke - Anticoagulants for A Fib (100%), #30 Timing of Antibiotic - Administering Physician (96.83%), and #53 Asthma - Pharm Therapy (88.37%).
2. The lowest non-zero reporting rate was for #46 - Medication Reconciliation (32.91%).

Performance Rates by Measure

1. The measure with the largest number of instances of "clinical performance met" was #15 Assessment of Visual Functional Status (391,035).
2. The national median performance rate was 100% for 11 measures.
3. Two measures had 0% national median performance rates, #61 GERD - Upper Endoscopy and #34 Stroke - t-PA Considered.
4. There were some measures with a high number of reported instances excluded by the provider. These include #5 - Heart Failure ACE or ARB for LVSD (36,867 instances excluded) and #47 - Advance Care Plan (34,586 excluded).