

PQRI Preparation Tips for Cardiothoracic Surgeons

2% Payment Bonus Available on 2009 Medicare Claims

The 2009 Physician Quality Reporting Initiative (PQRI) has started! Thoracic surgeons and cardiac surgeons using the “claims-based” reporting option who are not already participating should start immediately, or they will not be able to fulfill the reporting requirements. Cardiac surgeons who are members of the STS Adult Cardiac Surgery Database can sign up for the “registry based” reporting option and have STS submit their quality measure reporting rates for them at the end of 2009. More information on registry based reporting can be found at <http://www.sts.org/sections/stsnationaldatabase/PQRI/> by following the links under “PQRI Registry Reporting.”

Claims-Based Reporting

As in past years, surgeons should select three measures that pertain to the services they provide most often to Medicare patients. For each measure, physicians must report on 80% of their cases for which the measure is reportable, and they must report the quality measure on the same claim that that is sent to Medicare for reimbursement. Since the codes must be submitted with the billing information, as each day passes, it will be increasingly harder to report 80% of 2009 eligible cases. So it is important to get started now.

For PQRI 2009, STS was able to add one new measure, #157, that is specific for thoracic surgery. Additionally, thoracic surgeons will still be able to report on any of the three perioperative care measures they have used in past years (#20, #21, #22.) STS suggests that Cardiac surgeons can continue to use the two CABG measures (#43, #44) and the perioperative care measure (#45) that they have used in past years.

Measure	Title	CPT2 Code
Adult Cardiac Surgeons		
#43	Use of IMA in Coronary Artery Bypass Graft Surgery	4110F
#44	Pre-operative Beta-blocker in Patients w/ Isolated CABG	4115F
#45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	4043F and 4046F
General Thoracic Surgeons		
#20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	4047F
#21	Perioperative Care: Selection of Prophylactic Antibiotic – First or Second Generation Cephalosporin	4041F
#22	Perioperative Care: Discontinuation of Prophylactic	4049F and

	Antibiotics (Non-Cardiac Procedures)	4046F
#157	Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	G8518
Code Modifiers		
Exclusion modifier	Documentation of medical reason for not performing the measure	1-P
Exclusion modifier	Documentation of patient reason for not performing the measure	2-P
Reporting modifier	Documentation that a measure was not performed, reason unknown	8-P

The measure specifications, including qualifying CPT1 codes, their matching CPT2 codes and allowable modifiers can be found on the CMS website at:

<http://www.cms.hhs.gov/apps/ama/license.asp?file=/PQRI/downloads/2009PQRIQualityMeasureSpecificationsManualandReleaseNotes.zip>

If you have questions about claims based reporting, please contact Ellen Clough at eclough@STS.org or 312-202-5832.