



Q&As—Important Physician Quality Reporting System (PQRS) and Meaningful Use (MU) Dates

1. Do we need an IACS account for each eligible professional in a group?

Answer:

No. The Individuals Authorized Access to the Centers for Medicare & Medicaid Services Computer Services (IACS) account represents all eligible providers (EPs) who bill under a tax identification number (TIN).

2. What is the difference between the PQRS Detailed Feedback reports and the Quality and Resource Use Reports (QRUR)?

Answer:

PQRS reports are at an EP-individual, national provider identifier (NPI) level. The report lists the method of reporting used by the EP and the report details of the PQRS measures. PQRS reports also include the PQRS incentive amount and indicate if there is an optional “maintenance of certification” incentive for that EP.

QRUR reports are TIN level. Currently, most of the 100+ provider groups billing under the same TIN will have cost and quality information. Any solo or group EPs who are members of an Accountable Care Organization (ACO) will not have a QRUR.

3. Should I bother obtaining another IACS role now for the QRUR if I am a solo EP?

Answer:

There is no need to do that now. In year 2015, all EPs will be included in the Value-Based Payment Modifier program, so obtaining the new IACS role is not necessary.