CMS Education Resource Messages
Received March 20, 2012

- **Technical Specifications Update for the Long Term Care Hospital Quality Reporting Program.**
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- **Webinar: Introduction and Overview of the EHR Incentive Programs, Thursday, March, 22, 3-4 p.m. ET.**

★ Message 201203-40

Technical Specifications Update for the Long Term Care Hospital Quality Reporting Program

CMS is pleased to announce that the draft Long Term Care Hospital (LTCH) Continuity Assessment Record and Evaluation (CARE) Data Set Technical Specifications Draft Version 1.00.1 has been posted to the LTCH Quality Reporting Technical Information webpage on the CMS website.

The Draft LTCH CARE Data Set Version 1.00.1 Specifications for October 2012 zip file includes a specification change document identifying changes since draft version 1.00.0. Final specifications will be posted in the near future. The zip file also contains the updated "Draft" LTCH CARE Data submission specifications.

The files posted on the website within the zip file include:
- LTCH Data Submission Spec Changes (v1.00.1).
- LTCH 1.0 data specs overview (v1.00.1) Draft.
- LTCH data dictionary (v1.00.1) Draft.
- LTCH data specs CSV files (v1.00.1) Draft.
- LTCH data specs HTML files (v1.00.1) Draft.
- LTCH data specs PDF files (v1.00.1) Draft.

★ Message 201203-41

Physician Quality Reporting System & eRx Incentive Program Announcements

Communication Support Page
On Thu Mar 1, CMS re-opened the Quality Reporting Communication Support Page to allow individual eligible professionals and *CMS-selected* group practices the opportunity to request a significant hardship exemption for the 2013 Electronic Prescribing (eRx) payment adjustment. The Communication Support Page will accept hardship exemption requests *now through Sat June 30*. A user manual is available to assist individual eligible professionals and CMS-selected group practices in submitting their request for a hardship exemption.

For additional information on the 2013 eRx payment adjustment, including who is subject to and how to avoid the payment adjustment, eligible professionals should review the MLN Matters Article

#SE1206, "2012 eRx Incentive Program: Future Payment Adjustments," or visit the eRx Incentive Program webpage.

2011 eRx 10-Month Feedback Report

Taxpayer Identification Number (TIN)-level Interim 2011 eRx Feedback Reports are available for 2013 Payment Adjustment on the Physician Quality Reporting System Portal. Please note that TIN-level reports require an "Individuals Authorized Access to CMS Computer Services" (IACS) account. Eligible professionals can request their individual National Provider Identifier (NPI)-level reports by submitting a request via the Quality Reporting Communication Support Page.

Feedback Report Request Process

Please be advised that the alternative feedback report request process which enabled individual eligible professionals to request their NPI-level feedback reports through their carrier/MAC ended on Fri Mar 16. This was the last day carrier/MACs would have accepted requests for Physician Quality Reporting System and eRx Incentive Program feedback reports. Individual eligible professionals can request their NPI-level feedback reports through the Quality Reporting Communication Support Page.

EHR Submission

CMS would like to remind all eligible professionals that the Physician Quality Reporting System Portal for Program Year 2011 Electronic Health Record (EHR) submissions is now open.

Eligible professionals have until Mon Apr 30 to submit their EHR data. Additionally, all eligible professionals submitting EHR data will need to obtain an IACS account. Additional information related to obtaining an IACS account can be found in the Quick Reference Guides on the Physician Quality Reporting System Portal.

Errors with Measure #235

CMS has recently identified an error related to the submission of Measure #235 "Hypertension: Plan of Care" for the 2012 Physician Quality Reporting System. "Hypertension: Plan of Care" is a claims/registry measure with 6 G-codes and 1 Current Procedural Terminology (CPT) II code that are inactive due to an error found on the Healthcare Common Procedure Coding System (HCPCS) tape. Consequently, this has resulted in claims containing the G-codes or CPT II code associated with the measure being rejected by the carrier/MACs or denied.

The G-codes G8675, G8676, G8677, G8678, G8679, G8680 and the CPT II code 4050F will be reactivated with the next update of the HCPCS tape in April 2012. For 2012 claims-based reporting, the Physician Quality Reporting System requires at least 3 measures to each be reported at a 50% reporting rate. In the interim, eligible professionals who had intended to report this measure via claims for the 2012 Physician Quality Reporting System may want to consider taking the following steps:

- Eligible professionals may want to consider reporting additional measures to substitute for #235 "Hypertension: Plan of Care."
- "Hypertension: Plan of Care" is a per-visit measure, which requires reporting for 50% of eligible patient visits. Therefore, eligible professionals could report the measure on more than 50% of eligible visits from April through December 2012 to increase the likelihood for successful reporting of the measure.

★ Message 201203-44

Webinar: Introduction and Overview of the EHR Incentive Programs, **Thursday, March, 22, 3-4 p.m. ET**

CMS and the Professional Association of Health Care Office Management (PAHCOM) are holding a free webinar on the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs. The webinar will provide an overview of how the Medicare and Medicaid EHR Incentive Programs are structured and administered, and will provide key insights for providers regarding their participation and navigation of the programs.

Registration Information: Register [online](#).

Want more information about the EHR Incentive Programs? Make sure to visit the [EHR Incentive Programs website](#) for the latest news and updates on the EHR Incentive Programs.

CMS.gov Website Upgrade: Please take note that CMS is in the process of making upgrades to the [www.CMS.gov](#) website. If you encounter problems accessing information while on the site, please refresh the page or check back later. We appreciate your understanding and apologize for any inconvenience.