

Medicare Penalty for 500K Clinicians



Some 501,933 clinicians in the U.S. will see a 2 percent reduction in Medicare payments this year for failing to meet the requirements of the government's Physician Quality Reporting System (PQRS). Overall, half of the clinicians who will see their fee-for-service Medicare payments reduced this year are physicians.

The reduction will be taken from the clinicians' 2017 Part B fee-for-service charges based on 2015 PQRS reporting, according to a report from the Centers for Medicare & Medicaid Services. Clinicians are being hit with the penalty for not meeting PQRS requirements in 2015. Some 63% of the clinicians who participated in the government programme avoided the adjustment, the report said.

According to the CMS report on PQRS performance for the 2015 reporting period, almost 230,000 clinicians who face the penalty had \$10,000 or less in Medicare charges that year. For these clinicians, a 2 percent cut will translate to a decrease of \$200 in Medicare revenue.

On the other hand, 64,200 clinicians had charges that exceeded \$100,000. The 2 percent penalty means they will forfeit more than \$2,000 if they bill Medicare for as much in 2017.

It will be recalled that PQRS was begun in 2007; the final year for reporting in the programme was 2016. A patchwork collection of quality programmes that included PQRS has been replaced by the Quality Payment Programme, which is being implemented under The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). PQRS is being rolled into the Merit-based Incentive Payment System (MIPS) track.

Clinicians will begin to be paid under MACRA in 2019 based on bonuses and penalties determined by their performance this year.

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