



# Physician Quality Reporting System (PQRS) List of Eligible Professionals

## Eligible Professionals

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Under Physician Quality Reporting System (PQRS), covered professional services are those paid under or based on the Medicare Physician Fee Schedule (PFS). To the extent that eligible professionals are providing services which get paid under or based on the PFS, those services are eligible for PQRS incentive payments and/or payment adjustments.

## Eligible and Able to Participate

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The following professionals are eligible to participate in PQRS:

### 1. Medicare physicians

- Doctor of Medicine
- Doctor of Osteopathy
- Doctor of Podiatric Medicine
- Doctor of Optometry
- Doctor of Oral Surgery
- Doctor of Dental Medicine
- Doctor of Chiropractic

### 2. Practitioners

- Physician Assistant
- Nurse Practitioner\*
- Clinical Nurse Specialist\*
- Certified Registered Nurse Anesthetist\* (and Anesthesiologist Assistant)
- Certified Nurse Midwife\*
- Clinical Social Worker
- Clinical Psychologist
- Registered Dietician
- Nutrition Professional
- Audiologists

*\*Includes Advanced Practice Registered Nurse (APRN)*

### 3. Therapists

- Physical Therapist
- Occupational Therapist
- Qualified Speech-Language Therapist

## Eligible But Not Able to Participate

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Some professionals may be eligible to participate per their specialty, but due to billing method may not be *able* to participate:

- Professionals who provide Part B services, but bill Medicare at a facility or institutional (Part A) level.
- Professionals who do not bill Medicare at an individual National Provider Identifier (NPI) level, where the rendering provider's individual NPI is entered on CMS-1500 type paper or electronic claims billing, associated with specific line-item services.
- Professionals who reassign benefits to a Critical Access Hospital (CAH) that bills outpatient services at a facility level, such as CAH Method II billing, cannot participate, since the CAH does not include the individual provider NPI on their Institutional (FI) claims.

Services payable under fee schedules or methodologies other than the PFS are not included in PQRS (for example, services provided in federally qualified health centers, independent diagnostic testing facilities, independent laboratories, hospitals [including method I critical access hospitals], rural health clinics, ambulance providers, and ambulatory surgery center facilities).

Eligible professionals participating in PQRS should familiarize themselves and their office staff with the PQRS measures that appear to apply to their patients for the relevant program year. To access the measures list and related materials, click on the "Measures Codes" page in the left-hand column of the CMS PQRS website at <http://cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS>.