

Dear Administrator Weems:

The undersigned organizations are writing to urge CMS to provide the utmost flexibility for the inclusion of physician quality measures in the 2008 Physician Quality Reporting Initiative (PQRI). We are concerned that CMS regulatory and administrative deadlines have the potential to delay implementation of a number of important measures developed in 2007. As a result many physicians will not have an opportunity to participate in the PQRI until 2009.

The urgency of this request is further exacerbated by the PQRI's incentive structure and CMS's proposal for continuing its funding it through 2008. Despite recommendations by MedPAC that the \$1.35 billion Tax Relief and Health Care Act of 2007 (TRHCA) Physician Assistance and Quality Improvement fund "be directed entirely toward a conversion factor update for 2008," CMS chose to use it exclusively to fund the PQRI, indicating that this is the "best way to ensure physicians get the greatest benefit from the Fund's resources." Under this approach, in order for physicians to receive even minor relief from the scheduled 10% cut in Medicare payment next year they must participate in the PQRI.

Unlike hospitals, which are fairly homogenous in terms of the services provided, the reality of physician care makes a one-size fits all approach impossible. CMS recognized this diversity by including 74 quality measures in the original 2007 PQRI, far greater than the 10 measures in Medicare's first hospital reporting program. Even so, many physicians still cannot participate in PQRI due to a lack of measures that are applicable to the patients and conditions they treat.

TRHCA section 101 requires that PQRI quality measures "shall be measures that have been adopted or endorsed by a consensus organization (such as the National Quality Forum or AQA), that include measures that have been submitted by a physician specialty, and that the Secretary identifies as having used a consensus-based process for developing such measures." A number of quality measures developed this year will meet this criteria but were either not included in the July 12, 2007 PQRI Proposed Rule or, we understand may not meet various unpublished internal CMS administrative deadlines.

We strongly urge CMS to include all measures in the 2008 PQRI that meet statutory consensus development and endorsement/adoption requirements prior to the November 15, 2007 deadline set forth in TRHCA. Your flexibility in this regard is critical. It is incumbent on CMS to do everything in its power to see that all eligible measures are included in the 2008 program.