

**Technical Corrections
Coding for Quality
A Handbook for 2008 PQRI Participation**

April 25, 2008

CMS announces the following revisions to *Coding for Quality, A Handbook for PQRI Participation for 2008*, dated March 20, 2008.

Introduction, CPT Category I section (page 3)

- Surgical procedures billed by an assistant surgeon(s) will be excluded from the denominator population so their performance rates will not be negatively impacted for PQRI. PQRI analyses will exclude otherwise PQRI-eligible CPT Category I codes, when submitted with assistant surgeon modifiers 80, 81, or 82. The primary surgeon, not the assistant surgeon, is responsible for performing and reporting the quality action(s) in applicable PQRI measures.

PQRI-eligible CPT Category I procedure codes, billed by surgeons performing surgery on the same patient, submitted with modifier 62 (indicating two surgeons, i.e. dual procedures) will be included in the denominator population for applicable PQRI measure(s). Both surgeons participating in PQRI will be fully accountable for the clinical action(s) described in the PQRI measure(s).

Introduction, Individual/Group NPI Submission section (page 6)

- Your individual National Provider Identifier (NPI) must be included on the claim line items for the quality-data codes you submit as well as the line items for the services to which the quality-data code is applicable. The PQRI quality-data code must be included on the same claim that is submitted for payment at the time the claim is initially submitted in order to be included in PQRI analysis.

If a group NPI is used at the claim level, the individual rendering physician's NPI must be placed on each line item, including all allowed-charge and quality-data line items. Replace pages 3-6.

Measure #72 Chemotherapy for Stage III Colon Cancer Patients (pages 60-62)

- Under Successful Reporting & Performance (in the green box), replaced code 311F with 3311F on page 60. Replace page 60.
- Under Successful Reporting & Excluded from Performance (in the yellow box), replaced code 4810F with 4180F on page 61. Replace page 61.

Measure #80 Plan of Care for ESRD Patients with Anemia (pages 101-102)

- Under Successful Reporting & Performance Not Met (in the pink box), replaced code 3279-8P with 3279F-8P. Replace page 102.

Measure #57 Assessment of Oxygen Saturation for Community-Acquired Bacterial Pneumonia (page 214)

- Under Successful Reporting & Excluded from Performance (in the yellow box), replaced code 3027F-3P with 3028F-3P on page 214. Replace page 214.