The Physician Compare Web Site

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Practice Points

- Under the Patient Protection and Affordable Care Act, the Centers for Medicare & Medicaid Services were required to establish the Physician Compare Web site.
- The Physician Compare Web site's purpose is two-fold: to provide more information for Medicare recipients to encourage informed health care decisions, and to create specific incentives for physicians to maximize performance.

one are the days when a dermatologist's Treputation is derived solely from the word-ofmouth referrals of patients and other physicians. Section 10331 of the Patient Protection and Affordable Care Act (PPACA) mandated that the secretary of the US Department of Health & Human Services was to develop a Physician Compare Web site by January 1, 2011.¹ Unlike the Hospital Compare Web site (www.medicare.gov/hospitalcompare), which was launched in 2004 through the efforts of the Centers for Medicare & Medicaid Services (CMS) as something of a public-private partnership between hospital associations, government bodies, and private organizations (eg, The Joint Commission), the Physician Compare Web site was specifically mandated by the PPACA.

In late December 2010, the CMS fulfilled the requirement by revamping the physician directory tool on its Web site with the introduction of Physician Compare to help patients find Medicare-participating physicians in their communities. The goal is to help consumers make informed decisions about their health care as well as to encourage clinicians to improve the quality of care they provide to their patients. The site currently features information on Medicare-participating physicians and other eligible

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Correspondence: Bruce A. Brod, MD, University of Pennsylvania Health System, Department of Dermatology, Perelman Center for Advanced Medicine South Pavilion, 1st Floor, 3400 Civic Center Blvd, Philadelphia, PA 19104. professionals (EPs) who participate in the Physician Quality Reporting System (PQRS).

The 2013 Medicare Physician Fee Schedule final rule promulgated by the CMS lays out the framework for expanding the Physician Compare Web site by gathering data on physician quality, efficiency, and patient experience of care, and explains how this information will be made available.²

Physician Compare recently has been redesigned with an improved search function and more frequently updated information. The newly redesigned site includes new information on physicians, such as information about specialties offered by physicians and group practices, use or lack thereof of electronic health records, board certification, and hospital affiliations.³

The Current Status of Physician Compare

The CMS accesses basic provider information through Medicare's Provider Enrollment, Chain, and Ownership System (PECOS). The site lists contact information and practice information for physicians or EPs, specialty, degree and clinical training, foreign language proficiencies, and Medicare assignment information. The PPACA also mandates that the CMS must use the most recent incentive program information to indicate if a professional has satisfactorily participated in the PQRS program and/or is a successful electronic prescriber under the Electronic Prescribing Incentive Program. It also lists if the provider is engaged in meaningful use of electronic health records.⁴ In addition to doctors of medicine and osteopathy, Physician Compare also includes profiles for optometrists, podiatrists, and chiropractors.

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The Future of Physician Compare

An implementation plan for future expansions of the Physician Compare Web site, including quality of care and patient experience information, was required by law to be in place by 2013.⁵ The 2013 Medicare Physician Fee Schedule finalized the CMS's plan to use data from the existing PQRS program as an initial step toward making measures of physician performance public on the Web site. Beginning in early 2014, the performance rates on the quality measures that group practices submit under the 2012 PQRS group practice reporting option Web interface and the Medicare Shared Savings Program as well as patient experience of care data will be made public,⁶ which will be known as the group practice reporting option on Physician Compare when it becomes available.7

Because the majority of dermatologists are in individual or small group practices, there is some good news. The CMS will only post quality measure information on groups of 100 or more EPs. There are some safeguards available for more reliable reporting from patients including the requirement for a minimum sample size and the requirement to use a valid measure. Before posting the patient experience of care data, the CMS will provide group practices and accountable care organizations with a 30-day period to review their quality data before it appears on the Physician Compare Web site. In the future, the CMS also intends to work with specialty societies to include data that are already collected for other purposes and go through appropriate testing.

Eventually the CMS will include individual-level data on Physician Compare. Specific details on the presentation of this information will be decided in future rulemaking, giving dermatologists and our specialty organizations the opportunity to intervene on some potential flaws in the system. For example, not all dermatologists have the opportunity to participate in PQRS, as current measures do not apply to dermatopathologists or subspecialists who are not involved in the care of patients with skin cancer. Additionally, there is a lack of evidence to correlate involvement in PQRS programs with physician quality. Any physician compare or rating system needs to be properly tested prior to widespread implementation.

In the more distant future, but no later than January 1, 2019, the secretary of the US Department of Health & Human Services may establish a demonstration project that will provide financial incentives to Medicare beneficiaries who receive services from highly rated physicians; however, higher premiums for beneficiaries would not be allowed as part of the demonstration project. $^{1} \ \ \,$

Coping With Physician Compare

It is imperative that the information in the PECOS system is correct, and providers are encouraged to log in to their accounts to ensure that their profiles are accurate and up-to-date. (For more information on PECOS accounts, visit the Medicare Web site [www.medicare.gov].) I recommend that physicians explore the Web site carefully and check for data errors related to their hospital affiliations, board certifications, office address, and training information. The newly revamped Web site includes a feature for physicians labeled, "How to Keep Your Information Current," where updates and changes can be made. In this electronic age, it is important to designate a colleague or staff member to review all information about your practice that is posted online. Perhaps in time we will find that our reputations cannot be linked to a Web site and still stem from our patients and our peers.

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