



CMS Quality Measure Development Plan

2020 Annual Report

For the Quality Payment Program

Appendices

Prepared by Health Services Advisory Group, Inc.



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Appendix A – MACRA Statutory Language Excerpts

Section 1848(s)(3) of the Social Security Act, as amended by section 102 of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)

“(3) ANNUAL REPORT BY THE SECRETARY.—

“(A) IN GENERAL.—Not later than May 1, 2017, and annually thereafter, the Secretary shall post on the Internet website of the Centers for Medicare & Medicaid Services a report on the progress made in developing quality measures for application under the applicable provisions.

“(B) REQUIREMENTS.—Each report submitted pursuant to subparagraph (A) shall include the following:

- “(i) A description of the Secretary’s efforts to implement this paragraph.
- “(ii) With respect to the measures developed during the previous year—
 - “(I) a description of the total number of quality measures developed and the types of such measures, such as an outcome or patient experience measure;
 - “(II) the name of each measure developed;
 - “(III) the name of the developer and steward of each measure;
 - “(IV) with respect to each type of measure, an estimate of the total amount expended under this title to develop all measures of such type; and
 - “(V) whether the measure would be electronically specified.
- “(iii) With respect to measures in development at the time of the report—
 - “(I) the information described in clause (ii), if available; and
 - “(II) a timeline for completion of the development of such measures.
- “(iv) A description of any updates to the plan under paragraph (1) (including newly identified gaps and the status of previously identified gaps) and the inventory of measures applicable under the applicable provisions.
- “(v) Other information the Secretary determines to be appropriate.”

Section 1848(s)(6) of the Social Security Act, as amended by section 102 of MACRA

“(6) FUNDING.—For purposes of carrying out this sub-section, the Secretary shall provide for the transfer, from the Federal Supplementary Medical Insurance Trust Fund under section 1841, of \$15,000,000 to the Centers for Medicare & Medicaid Services Program Management Account for each of fiscal years 2015 through 2019. Amounts transferred under this paragraph shall remain available through the end of fiscal year 2022.



Appendix B – Acknowledgments

The *2020 MDP Annual Report* is the product of collaboration between the Centers for Medicare & Medicaid Services, other HHS agencies, and the private sector. Specifically, we thank:

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Appendix C – Previously Identified Gaps Addressed in 2019 Measures Under Consideration List

Tables C-1 and C-2 describe measures on the 2019 CMS Measures under Consideration List that could fill measurement gaps for previously identified prioritized specialties.ⁱ

Table C-1. Select Measures Under Consideration: General Medicine/Crosscutting Gaps

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain
CMS/ Yale CORE	Hospital-wide, 30-day, All-cause unplanned readmission (HWR) rate for the Merit-Based Incentive Payment Program (MIPS) eligible clinician groups	N/A	Outcome	Communication and Coordination/Care Coordination
CMS/ Yale CORE	Clinician and Clinician Group Risk-Standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions	N/A	Outcome	Effective Treatment/Clinical Care

Table C-2. Select Measures Under Consideration: Orthopedic Surgery

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain
CMS/ Yale CORE	Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) for Merit-Based Incentive Payment System (MIPS) Eligible Clinicians and Eligible Clinician Groups	N/A	Outcome	Patient Safety/Safety

Measure Stewards/Developers:

CMS Centers for Medicare & Medicaid Services

Yale CORE Yale New Haven Health Services Corporation/Center for Outcomes, Research & Evaluation

ⁱ Prioritized specialties in the MDP and MDP Annual Reports include allergy/immunology, emergency medicine, general medicine/crosscutting, mental health and substance use conditions, neurology, oncology, orthopedic surgery, palliative care, pathology, physical medicine and rehabilitation, radiology, and rheumatology.



Appendix D – CMS-Funded Measures Developed During the Previous Year

See *Quality Measures Developed During the Previous Year* in Section IV of the report, which estimates the amounts expended under title XVIII to complete development of these quality measures for MIPS.

Table D-1. CMS-Funded Measures Developed Between October 1, 2018, and September 30, 2019ⁱⁱ

Steward/ Developer	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
CMS/ Yale CORE	Clinician and Clinician Group Risk-Standardized Complication Rate Following Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty Measure	3493/ N/A	N/A	Outcome	Patient Safety/ Safety
CMS/ Yale CORE	Clinician Group Hospital-Wide All-Cause Unplanned Readmission Measure ⁱⁱⁱ	3495/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS/ Yale CORE	Multiple Chronic Conditions Admission Measure	N/A/ N/A	N/A	Outcome	Effective Treatment/ Clinical Care
CMS/ Yale CORE	Patient Safety Indicator for Hypoglycemia	N/A/ N/A	N/A	Outcome	Patient Safety/ Safety
USC/ USC	Continuity of Pharmacotherapy for Opioid Use Disorder ^{iv}	3175/ 468	N/A	Process	Effective Treatment/ Clinical Care

* Screening, prevention, and primary care measures are included in Effective Treatment.

Measure Stewards/Developers:

CMS Centers for Medicare & Medicaid Services

USC University of Southern California

Yale CORE Yale New Haven Health Services Corporation/Center for Outcomes, Research & Evaluation

ⁱⁱ Section 1848(s)(3)(B)(ii)(I-III), (V) of the Act.

ⁱⁱⁱ Currently going through NQF endorsement.

^{iv} Endorsed at the health plan level—the level of analysis and data source have been expanded.



Appendix E – CMS-Funded Measures in Development

See *Quality Measures in Development at the Time of This Report* in Section IV of the report, which estimates the amounts expended under title XVIII for ongoing development of quality measures for MIPS.^v

Table E-1. CMS-Funded Measures Suspended Due to Feasibility Concerns (n = 1)^{vi,vii}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ Mathematica	Quality of Life Assessment for Patients Who Receive Substance Use Disorder Treatment ^{A,B}	943	PRO-PM	Effective Treatment/ Clinical Care	N/A

* Screening, prevention, and primary care measures are included in Effective Treatment.

^A Measure development was not funded by section 1848(s)(6) of the Act, as funding for development was obligated prior to the passage of MACRA, using existing CMS funds under title XVIII.

^B Initial feasibility testing identified that the measure was not feasible at this time and had low face validity. Some clinicians expressed doubts that the measure accurately reflected a clinician's quality of care, given a lack of clinical guidelines recommending the use of quality of life assessments.

Measure Stewards/Developers:

AAHPM	American Academy of Hospice and Palliative Medicine
APA	American Psychiatric Association
ASCP	American Society for Clinical Pathology
BWH	Brigham and Women's Hospital
CMS	Centers for Medicare & Medicaid Services
NCQA	National Committee for Quality Assurance
PBGH	Pacific Business Group on Health
RAND	RAND Corporation
RTI	RTI International
SCCA	Seattle Cancer Care Alliance
TBD	To be determined
UCSF	The Regents of the University of California – San Francisco
UM-KECC	University of Michigan Kidney Epidemiology and Cost Center
Yale-CORE	Yale - Center for Outcomes Research & Evaluation

^v Section 1848(s)(3)(B)(iii) of the Act.

^{vi} As of September 30, 2019, to allow for estimated funding for the entire FY 2019 and for federal review and clearance prior to publication of this report.

^{vii} Sections 1848(s)(3)(B)(iii) and 1848(s)(3)(B)(v) of the Act.

**Table E-2. CMS-Funded Measures in Conceptualization
Stage of Development at the Time of this Report (n = 6)^{viii,ix}**

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
ASCP/ ASCP	Rate of communicating results of an amended report with a major discrepancy to the responsible provider	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
ASCP/ ASCP	Rate of Notification of a New Diagnosis of Malignancy to the Responsible Provider	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
CMS/ NCQA	Annual Wellness Assessment: Preventive Care (Composite) ^{A,B}	890	Process	Effective Treatment/ Clinical Care	TBD ^C
TBD/ BWH	Opioid extended use rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	TBD	Process	Effective Treatment/ Clinical Care	September 2021
TBD/ BWH	Opioids: Risk-standardized opioid-related respiratory depression rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	TBD	Outcome	Patient Safety/ Safety	September 2021
TBD/ BWH	Risk-standardized bleeding-related adverse drug event rate for patients taking anticoagulant medications following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	TBD	Outcome	Patient Safety/ Safety	September 2021

* Screening, prevention, and primary care measures are included in Effective Treatment.^A Measure development was not funded by section 1848(s)(6) of the Act, as funding for development was obligated prior to the passage of MACRA, using existing CMS funds under title XVIII.

^B CMS completed development of this measure in FY2019 but is evaluating additional revisions that may require further development work.

^C Pending CMS determination of which measures to continue development under the eligible clinician eCQM measure development project funded in FY 2019

^{viii} As of September 30, 2019, to allow for estimated funding for the entire FY 2019 and for federal review and clearance prior to publication of this report.

^{ix} Sections 1848(s)(3)(B)(iii) and 1848(s)(3)(B)(v) of the Act.

Table E-3. CMS-Funded Measures Being Specified at the Time of this Report (n = 18)^{x,xi}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
APA/ APA	Consumer Rating of Care Experience	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
APA/ APA	Evidence-based treatment (EBT): First Episode Psychosis Initiation & Adherence to treatment	N/A	Process	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Evidence-based treatment (EBT): Initiation & adherence to medication-assisted treatment (MAT) for patients with opioid use disorder (OUD)	N/A	Process	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Evidence-based treatment (EBT): Initiation, Review and Update to Suicide Safety Plan	N/A	Process	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Measurement-based care (MBC): Recovery for all patients seen for mental health and substance use care	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Measurement-based care (MBC): Stabilization or Reduction in Functional Impairment for all patients seen for mental health and substance use care	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Measurement-based care (MBC): Stabilization or Reduction in Psychotic symptoms for patients with first-episode psychosis (FEP)	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Measurement-based care (MBC): Stabilization or Reduction in Suicide symptoms	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
APA/ APA	Measurement-based care (MBC): Stabilization or Reduction in symptoms for patients with opioid Use Disorder (OUD)	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
ASCP/ ASCP	Notification to the Provider Requesting Amylase Tests	TBD	Process	Communication and Coordination/ Care Coordination	September 2021

^x As of September 30, 2019, to allow for estimated funding for the entire FY 2019 and for federal review and clearance prior to publication of this report.

^{xi} Sections 1848(s)(3)(B)(iii) and 1848(s)(3)(B)(v) of the Act.



Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
ASCP/ ASCP	Notification to the provider requesting thyroid screening tests	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
ASCP/ ASCP	Time Interval: Critical Value Reporting for Chemistry	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
CMS/ NCQA	Functional Status Improvement for Patients who Received a Total Hip Replacement ^A	379	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ NCQA	Functional Status Improvement for Patients who Received a Total Knee Replacement ^A	378	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ UM-KECC	Opioid Safety Measure	N/A	Intermediate Outcome	Patient Safety/ Safety	September 2020
CMS/ UM-KECC	Practitioner-Level Long-Term Catheter Rate	N/A	Intermediate Outcome	Patient Safety/ Safety	September 2020
CMS/ Mathematica	Use of Multimodal and Multidisciplinary Pain Management Therapies for Adults Prescribed Opioids ^A	948	Process	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
TBD/ BWH	High-dose opioid prescribing practices after hospital discharge following total hip (THA) or total knee arthroplasty (TKA) in previously opioid naive patients	TBD	Process	Effective Treatment/ Clinical Care	September 2021

* Screening, prevention, and primary care measures are included in Effective Treatment.

^A Measure development was not funded by section 1848(s)(6) of the Act, as funding for development was obligated prior to the passage of MACRA, using existing CMS funds under title XVIII.

^B Pending CMS determination of which measures to continue development under a new eligible clinician eCQM project.

**Table E-4. CMS-Funded Measures Pending
Test Sites at the Time of this Report (n = 10)^{xii, xiii}**

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ Mathematica	Adverse Drug Events for Patients Taking Anticoagulant Medications in an Ambulatory Setting ^A	455	Outcome	Patient Safety/ Safety	TBD ^B
CMS/ Mathematica	Care Coordination after Asthma-Related Emergency Department Visit ^A	344	Process	Communication and Coordination/ Care Coordination	TBD ^B
CMS/ Mathematica	Care Coordination after Asthma-Related Emergency Department Visit: EP Follow-Up ^A	343	Process	Communication and Coordination/ Care Coordination	TBD ^B
CMS/ Mathematica	Changes in Patient Reported Outcomes (PROs) Following Non-Emergent Percutaneous Coronary Intervention (PCI) ^A	812	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ Mathematica	Cognitive Impairment (CI) Assessment Among Older Adults (75 Years and Older) ^A	341	Process	Effective Treatment/ Clinical Care	TBD ^B
CMS/ Mathematica	Disease Activity Assessments and Target Setting in Patients with Rheumatoid Arthritis ^A	250	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ Mathematica	Documentation of a Health Care Partner for Patients with Dementia or Mild Cognitive Impairment ^A	342	Process	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ Mathematica	Functional Status Assessment and Target Setting for Patients with Congestive Heart Failure ^A	895	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ Mathematica	Functional Status Assessments and Target Setting for Patients with Asthma ^A	228	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B
CMS/ Mathematica	Pain Assessments and Target Setting for Patients with Osteoarthritis ^A	336	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	TBD ^B

* Screening, prevention, and primary care measures are included in Effective Treatment.

^A Measure development was not funded by section 1848(s)(6) of the Act, as funding for development was obligated prior to the passage of MACRA, using existing CMS funds under title XVIII.

^B Pending CMS determination of which measures to continue development under a new eligible clinician eCQM project.

^{xii} As of September 30, 2019, to allow for estimated funding for the entire FY 2019 and for federal review and clearance prior to publication of this report.

^{xiii} Sections 1848(s)(3)(B)(iii) and 1848(s)(3)(B)(v) of the Act.

Table E-5. CMS-Funded Measures in Active Testing at the Time of this Report (n = 18)^{xiv,xv}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
AAHPM/ AAHPM	Palliative care outpatients' experience of feeling heard and understood.	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
AAHPM/ AAHPM	Palliative care outpatients' experience of receiving desired help for pain.	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
APA NCQA/ APA	Measurement-based care (MBC): Initial standardized assessment for all patients seen for mental health and/or substance use care.	N/A	Process	Effective Treatment/ Clinical Care	September 2021
APA NCQA/ APA	Measurement-based care (MBC): Monitoring of symptoms, functioning, and recovery for all patients seen for mental health and substance use care.	N/A	Process	Effective Treatment/ Clinical Care	September 2021
APA NCQA/ APA	Measurement-based care (MBC): Treatment or care plan adjustment for all patients seen for mental health and/or substance use care.	N/A	Process	Effective Treatment/ Clinical Care	September 2021
ASCP/ ASCP	Notification to the provider requesting myoglobin or CK-MB	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
ASCP/ ASCP	Time Interval: Critical Value Reporting for Troponin	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
CMS/ RTI	CAHPS Measure Modification for CPC+ Practices – This applies to the performance based incentive payment calculation for the treatment group of CPC+. ^A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
CMS/ Yale CORE	Heart Failure Admission Measure	N/A	Outcome	Communication and Coordination/ Care Coordination	June 2020

^{xiv} As of September 30, 2019, to allow for estimated funding for the entire FY 2019 and for federal review and clearance prior to publication of this report.

^{xv} Sections 1848(s)(3)(B)(iii) and 1848(s)(3)(B)(v) of the Act.



Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ RAND	Patient Reported Outcome Measure—PHQ9 & PROMIS Depression Screening ^A	TBD	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	June 2022
CMS/ Yale CORE	Patient-reported outcomes and risk variable data collection (PRO) ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	January 2020
SCCA/ PBGH	Patient Reported HRQOL: Overall Mental Health Following Chemotherapy	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient Reported HRQOL: Overall Physical Health Following Chemotherapy	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient Reported Pain: Pain Intensity Following Chemotherapy	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient Reported Pain: Pain Interference Following Chemotherapy	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
TBD/ BWH	Care goal achievement following total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
TBD/ UCSF	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults	N/A	Intermediate Outcome	Patient Safety/ Safety	September 2021
TBD/ BWH	Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) electronic clinical quality measure (eCQM)	TBD	Outcome	Patient Safety/ Safety	September 2021

* Screening, prevention, and primary care measures are included in Effective Treatment.

^A This measure is intended for use in MIPS but was funded from other title XVIII sources not specific to MACRA.

**Table E-6. Crosswalk of Revised Measure Titles –
2019 MDP Annual Report to 2020 MDP Annual Report**

Title in the 2019 MDP Annual Report	→	Title in the 2020 MDP Annual Report	Steward/ Developer
Communication Measure	→	Palliative care outpatients’ experience of feeling heard and understood.	AAHPM
Symptom Measure	→	Palliative care outpatients’ experience of receiving desired help for pain.	
Improvement or maintenance of functioning for all patients seen for mental health and substance use care	→	Measurement-based care (MBC): Stabilization or Reduction in Functional Impairment for all patients seen for mental health and substance use care	APA & NCQA/ APA
Improvement or maintenance of symptoms for patients with opioid misuse	→	Measurement-based care (MBC): Stabilization or Reduction in symptoms for patients with Opioid Use Disorder (OUD)	
Improvement or maintenance of symptoms for patients with psychosis	→	Measurement-based care (MBC): Stabilization or Reduction in Psychotic symptoms for patients with first-episode psychosis (FEP)	
Improvement or maintenance of symptoms for patients with suicide risk	→	Measurement-based care (MBC): Stabilization or Reduction in Suicide symptoms	
Measurement-based Care (MBC) Measure Set: Indicator 1: Standardized Assessment	→	Measurement-based care (MBC): Initial standardized assessment for all patients seen for mental health and/or substance use care.	
Initiation of antipsychotic treatment among individuals with first-episode psychosis (FEP)	→	Evidence-based treatment (EBT): First Episode Psychosis Initiation & Adherence to treatment	
Initiation of medication-assisted treatment (MAT) among individuals with opioid use disorder (OUD)	→	Evidence-based treatment (EBT): Initiation & adherence to medication-assisted treatment (MAT) for patients with opioid use disorder (OUD)	
Measurement-based Care (MBC) Measure Set: Indicator 2: Monitoring	→	Measurement-based care (MBC): Monitoring of symptoms, functioning, and recovery for all patients seen for mental health and substance use care.	
Patient experience of care for all patients seen with mental health and substance use care	→	Consumer Rating of Care Experience	
Recovery for all patients seen for mental health and substance use care	→	Measurement-based care (MBC): Recovery for all patients seen for mental health and substance use care	
Safety plan for individuals with suicide risk	→	Evidence-based treatment (EBT): Initiation, Review and Update to Suicide Safety Plan	
Measurement-based Care (MBC) Measure Set: Indicator 3: Treatment Adjustment	→	Measurement-based care (MBC): Treatment or care plan adjustment for all patients seen for mental health and/or substance use care.	

Title in the 2019 MDP Annual Report	→	Title in the 2020 MDP Annual Report	Steward/ Developer
Notification to the ordering provider requesting myoglobin or CKMB (creatin kinase-muscle/brain) in the diagnosis of suspected acute myocardial infarction (AMI)	→	Notification to the provider requesting myoglobin or CK-MB	ASCP
Notification to the ordering provider requesting thyroid screening tests other than only a Thyroid Stimulating Hormone test in the initial screening of a patient with a suspected thyroid disorder	→	Notification to the provider requesting thyroid screening tests	
Notification to the ordering provider requesting amylase testing in the diagnosis of suspected acute pancreatitis	→	Notification to the Provider Requesting Amylase Tests	
Time interval: critical value reporting for troponin	→	Time Interval: Critical Value Reporting for Troponin	
Time interval: critical value reporting for chemistry	→	Time Interval: Critical Value Reporting for Chemistry	
Rate of notification to clinical providers of a new diagnosis of malignancy	→	Rate of Notification of a New Diagnosis of Malignancy to the Responsible Provider	
TBD measure related to pain management	→	Use of Multimodal and Multidisciplinary Pain Management Therapies for Adults Prescribed Opioids	CMS/ Mathematica
Patient-reported outcome measure (TBD)	→	Patient Reported Outcome Measure – PHQ9 & PROMIS Depression Screening	CMS/ RAND
Patient Reported Pain in Cancer Following Chemotherapy	→	Patient Reported Pain: Pain Intensity Following Chemotherapy	SCCA/ PBGH
		Patient Reported Pain: Pain Interference Following Chemotherapy	
Patient Reported Health Related Quality of Life in Cancer Following Chemotherapy	→	Patient Reported HRQOL: Overall Physical Health Following Chemotherapy	
		Patient Reported HRQOL: Overall Mental Health Following Chemotherapy	
Hospital and provider-level risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) eCQM	→	Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) electronic clinical quality measure (eCQM)	TBD/ BWH
Hospital and provider level risk-standardized bleeding-related adverse drug event for patients taking anticoagulant medications following elective primary total hip arthroplasty (THA)/total knee arthroplasty (TKA)	→	Risk-standardized bleeding-related adverse drug event rate for patients taking anticoagulant medications following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	
Care goal achievement following THA and/or TKA	→	Care goal achievement following total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	TBD/ BWH



Title in the 2019 MDP Annual Report	→	Title in the 2020 MDP Annual Report	Steward/ Developer
Opioid Extended Use Rate Following Total Hip Arthroplasty and/or Total Knee Arthroplasty (Opioid extended use)	→	Opioid extended use rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	TBD/ BWH
Opioids: Hospital and Provider Level Risk-Standardized Opioid-Related Respiratory Depression Rate Following THA/TKA (Opioid respiratory depression)	→	Opioids: Risk-standardized opioid-related respiratory depression rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	TBD/ BWH
Opioids in High Dosage in Persons Without Cancer Following Elective Primary Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA)	→	High-dose opioid prescribing practices after hospital discharge following total hip (THA) or total knee arthroplasty (TKA) in previously opioid naive patients	
Composite radiation dose and image quality	→	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults	TBD/ UCSF



Appendix F – CMS Advanced APM Quality Measures Inventory

Refer to www.gpp.cms.gov for a current list of Advanced APMs; changes to models occur more frequently than the publication of this MDP Annual Report. These measure sets are accurate and complete as of November 8, 2019.

Table F-1. CMS Bundled Payments for Care Improvement Advanced

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
AHRQ	Patient Safety for Selected Indicators (PSI90)	0531/ N/A	N/A	Outcome	Patient Safety/ Safety
ASPS	Perioperative Care: Selection of Prophylactic Antibiotic: First OR Second Generation Cephalosporin	0268/ N/A	N/A	Process	Patient Safety/ Safety
CMS	Excess days in acute care (EDAC) after hospitalization for acute myocardial infarction (AMI)	2881/ N/A	N/A	Outcome	Patient Safety/ Safety
CMS	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Coronary Artery Bypass Graft (CABG) Surgery	2558/ N/A	N/A	Outcome	Patient Safety/ Safety
CMS	Hospital-level risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	1550/ N/A	N/A	Outcome	Patient Safety/ Safety
CMS	Risk-Standardized, All Condition Readmission	1789/ 458	N/A	Outcome	Communication and Coordination/ Care Coordination
NCQA	Advance Care Plan	0326/ 47	N/A	Process	Communication and Coordination/ Care Coordination

* Screening, prevention, and primary care measures are included in Effective Treatment.

Measure Stewards:

AHRQ	Agency for Healthcare Research & Quality
ACS	American College of Surgeons
ASCO	American Society of Clinical Oncology
ASPS	American Society of Plastic Surgeons
CMS	Centers for Medicare & Medicaid Services
CoC	Commission on Cancer
KCQA	Kidney Care Quality Alliance
MNCM	Minnesota Community Measurement
NCQA	National Committee for Quality Assurance

Table F-2. Comprehensive ESRD Care (CEC) Model – All Tracks

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
CMS	ICH-CAHPS: Nephrologists' Communication and Caring	0258/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	ICH-CAHPS: Providing Information to Patients	0258/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	ICH-CAHPS: Quality of Dialysis Center Care and Operations	0258/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	ICH-CAHPS: Rating of Dialysis Center Staff	0258/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	ICH-CAHPS: Rating of the Dialysis Facility	0258/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	ICH-CAHPS: Rating of the Nephrologist	0258/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	Screening for Depression and Follow-Up Plan	0418/ 34	2v6	Process	Effective Treatment/ Clinical Care
KCQA	Influenza Immunization for the ESRD Population	0226	N/A	Process	Effective Treatment/ Clinical Care
NCQA	Advance Care Plan	0326/ 047	N/A	Process	Communication and Coordination/ Care Coordination

* Screening, prevention, and primary care measures are included in Effective Treatment.

Table F-3. Comprehensive Primary Care Plus (CPC+) Model and Maryland Total Cost of Care Model (Maryland Primary Care Program)

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
AHRQ	CG-CAHPS Survey 3.0 – Modified for CPC+	N/A	N/A	Patient engagement/ experience	Person and Family Engagement/Patient and Caregiver Experience
NCQA	Controlling High Blood Pressure	0018/ 236	165v6	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)	0059/ 1	122v6	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Emergency Department Utilization	N/A	N/A	Efficiency	Healthy Living/ Population Health and Prevention
NCQA	Inpatient Hospital Utilization	N/A	N/A	Efficiency	Healthy Living/ Population Health and Prevention

* Screening, prevention, and primary care measures are included in Effective Treatment.

Table F-4. Shared Savings Program Accountable Care Organizations (ACOs) – All Tracks and Track 1+

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
AHRQ	Ambulatory Sensitive Condition Acute Composite (AHRQ Prevention Quality Indicator [PQI] #91)	N/A	WI*	Outcome	Communication and Coordination/ Care Coordination
AHRQ	CAHPS: Access to Specialists	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Getting Timely Care, Appointments, and Information	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Health Promotion and Education	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Health Status/Functional Status	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: How Well Your Providers Communicate	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Patients' Rating of Provider	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
AHRQ	CAHPS: Shared Decision Making	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Stewardship of Patient Resources	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	All-Cause Unplanned Admissions for Patients with Diabetes	2887/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	All-Cause Unplanned Admissions for Patients with Heart Failure	2886/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions	2888/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow Up	0421/ 128	WI*	Process	Effective Treatment/ Clinical Care
CMS	Preventive Care and Screening: Screening for Depression and Follow-up Plan	0418/ 134	WI*	Process	Effective Treatment/ Clinical Care
CMS	Risk-Standardized, All Condition Readmission	1789/ 458	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM)	2510/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	N/A/ 438	WI*	Process	Effective Treatment/ Clinical Care
CMS	Use of Certified EHR Technology	N/A	N/A	Structural	Communication and Coordination/ Care Coordination
MNCM	Depression Remission at Twelve Months	0710/ 370	WI*	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Breast Cancer Screening	2372/ 112	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Colorectal Cancer Screening	0034/ 113	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Controlling High Blood Pressure	0018/ 236	WI*	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Diabetes: Eye Exam	0055/ 117	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Diabetes Mellitus: Hemoglobin A1c Poor Control	0059/ 001	WI*	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Falls: Screening for Future Fall Risk	0101/ 154	WI*	Process	Patient Safety/ Safety
NCQA	Medication Reconciliation Post-Discharge	0097/ 46	WI*	Process	Patient Safety/ Safety



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
NCQA	Pneumonia Vaccination Status for Older Adults	0043/ 111	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Use of Aspirin or Another Antithrombotic	0068/ 204	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Use of Imaging Studies for Low Back Pain	0052/ 312	WI*	Process	Patient Safety/ Safety
PCPI®	Preventive Care and Screening: Influenza Immunization	0041/ 110	WI*	Process	Effective Treatment/ Clinical Care
PCPI®	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	0028/ 226	WI*	Process	Effective Treatment/ Clinical Care

*Measures are reported via CMS Web Interface (WI); eCQM reporting is not an available option under this model. All WI measures on this list are subject to scoring for MIPS under the APM scoring standard.

** Screening, prevention, and primary care measures are included in Effective Treatment.

Table F-5. Next Generation ACO Model

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
AHRQ	Ambulatory Sensitive Condition Acute Composite (AHRQ Prevention Quality Indicator [PQI] #91)	N/A	WI*	Outcome	Communication and Coordination/ Care Coordination
AHRQ	CAHPS: Access to Specialists	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Getting Timely Care, Appointments, and Information	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Health Promotion and Education	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Health Status/Functional Status	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: How Well Your Providers Communicate	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Patients' Rating of Provider	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Shared Decision Making	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
AHRQ	CAHPS: Stewardship of Patient Resources	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	All-Cause Unplanned Admissions for Patients with Diabetes	2887/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	All-Cause Unplanned Admissions for Patients with Heart Failure	2886/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions	2888/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow Up	0421/ 128	WI*	Process	Effective Treatment/ Clinical Care
CMS	Preventive Care and Screening: Screening for Depression and Follow-up Plan	0418/ 134	WI*	Process	Effective Treatment/ Clinical Care
CMS	Risk-Standardized, All Condition Readmission	1789/ 458	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM)	2510/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	N/A/ 438	WI*	Process	Effective Treatment/ Clinical Care
MNCM	Depression Remission at Twelve Months	0710/ 370	WI*	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Breast Cancer Screening	2372/ 112	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Colorectal Cancer Screening	0034/ 113	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Controlling High Blood Pressure	0018/ 236	WI*	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Diabetes: Eye Exam	0055/ 117	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Diabetes Mellitus: Hemoglobin A1c Poor Control	0059/ 001	WI*	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Falls: Screening for Future Fall Risk	0101/ 154	WI*	Process	Patient Safety/ Safety
NCQA	Medication Reconciliation Post-Discharge	0097/ 46	WI*	Process	Patient Safety/ Safety
NCQA	Pneumonia Vaccination Status for Older Adults	0043/ 111	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Use of Aspirin or Another Antithrombotic	0068/ 204	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Use of Imaging Studies for Low Back Pain	0052/ 312	WI*	Process	Patient Safety/ Safety

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
PCPI®	Preventive Care and Screening: Influenza Immunization	0041/ 110	WI*	Process	Effective Treatment/ Clinical Care
PCPI®	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	0028/ 226	WI*	Process	Effective Treatment/ Clinical Care

*Measures are reported via CMS Web Interface (WI); eCQM reporting is not an available option under this model. All WI measures on this list are subject to scoring for MIPS under the APM scoring standard.

** Screening, prevention, and primary care measures are included in Effective Treatment.

Table F-6. Oncology Care Model – All Tracks

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
ACS	Adjuvant chemotherapy is recommended or administered within 4 months (120 days) of diagnosis to patients under the age of 80 with AJCC III (lymph node positive) colon cancer	0223/ N/A	N/A	Process	Effective Treatment/ Clinical Care
AHRQ	Patient-Reported Experience	Based on QPP 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
ASCO	Oncology: Medical and Radiation – Plan of Care for Pain	0383/ 144	N/A	Process	Person and Family Engagement/ Patient and Caregiver Experience
ASCO	Trastuzumab administered to patients with AJCC stage I (T1c)–III and human epidermal growth factor receptor 2 (HER2) positive breast cancer who receive adjuvant chemotherapy	1858/ 450	N/A	Process	Affordable Care
CMS (adapted version)	Closing the Referral Loop: Receipt of Specialist Report	N/A/ 374	50v5	Process	Communication and Coordination/ Care Coordination
CMS	Documentation of Current Medications in the Medical Record	0419/ 130	68v6	Process	Patient Safety/ Safety
CMS	Screening for Depression and Follow-Up Plan	0418/ 134	2v6	Process	Effective Treatment/ Clinical Care
CoC/ ASC	Combination chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage IB–III hormone receptor negative breast cancer	0559/ N/A	N/A	Process	Effective Treatment/ Clinical Care



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
N/A**	Proportion of patients who died who were admitted to hospice for 3 days or more	N/A	N/A	Outcome	Effective Treatment/ Clinical Care
N/A**	Risk-adjusted proportion of patients with all-cause ED visits that did not result in a hospital admission within the 6-month episode	N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
N/A**	Risk-adjusted proportion of patients with all-cause hospital admissions within the 6-month episode	N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
PCPI®	Breast Cancer: Hormonal Therapy for Stage I (T1b)–IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	0387/ N/A	N/A	Process	Effective Treatment/ Clinical Care
PCPI®	Oncology: Medical and Radiation – Pain Intensity Quantified	0384/ 143	157v5	Process	Person and Family Engagement/ Patient and Caregiver Experience

* Screening, prevention, and primary care measures are included in Effective Treatment.

** These measures are calculated and maintained by the Center for Medicare and Medicaid Innovation

Table F-7. Comprehensive Care for Joint Replacement (CJR) Payment Model (Track 1-CEHRT)

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain
AHRQ/ CAHPS Consortium/ CMS	Hospital Consumer Assessment of Healthcare Providers and Services (HCAHPS)*	0166/ N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	Total hip arthroplasty (THA) and/or total knee arthroplasty (TKA): hospital-level risk-standardized complication rate (RSCR) following elective primary THA and/or TKA*	1550/ N/A	N/A	Outcome	Patient Safety/ Safety

* HCAHPS and complications measure data are collected through the Hospital Inpatient Quality Reporting Program (HIQR). The CJR model gets those data through HIQR and does not make additional changes to the data.

Table F-8. Vermont Medicare ACO Initiative

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
CMS	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions	N/A/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Preventive Care and Screening: Screening for Clinical Depression and Follow-up Plan	0418/ 134	N/A	Process	Effective Treatment/ Clinical Care
CMS	Risk Standardized All Cause Readmission	1789/ 458	N/A	Outcome	Communication and Coordination/ Care Coordination
NCQA	Colorectal Cancer Screening	0034/ 113	N/A	Process	Effective Treatment/ Clinical Care
NCQA	Diabetes Mellitus: Hemoglobin A1c Poor Control	0059/ 1	N/A	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Controlling High Blood Pressure	0018/ 236	165v6	Intermediate outcome	Effective Treatment/ Clinical Care
PCPI®	Preventive Care and Screening: Influenza Immunization	0041/ 110	N/A	Process	Effective Treatment/ Clinical Care
PCPI®	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	0028/ 226	N/A	Process	Effective Treatment/ Clinical Care

* Screening, prevention, and primary care measures are included in Effective Treatment.