



CMS Quality Measure
Development Plan

2021 Annual Report

For the Quality Payment Program



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Appendices

June 2021

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 *2021 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 – Status of Measurement Gaps

Previously Identified Measurement Gaps

Table C-1 describes a measure on the 2020 CMS Measures under Consideration List that could fill a measurement gap for the prioritized specialty of general medicine/crosscutting.ⁱ

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

Steward/ Developer	Title	NQF #	Type	Quality Priority/ MACRA Domain*	MAP Recommendation
American Medical Association	Intervention for Prediabetes	3570e	Process	Effective Treatment/ Clinical Care	Do not support with potential for mitigation ⁱⁱ

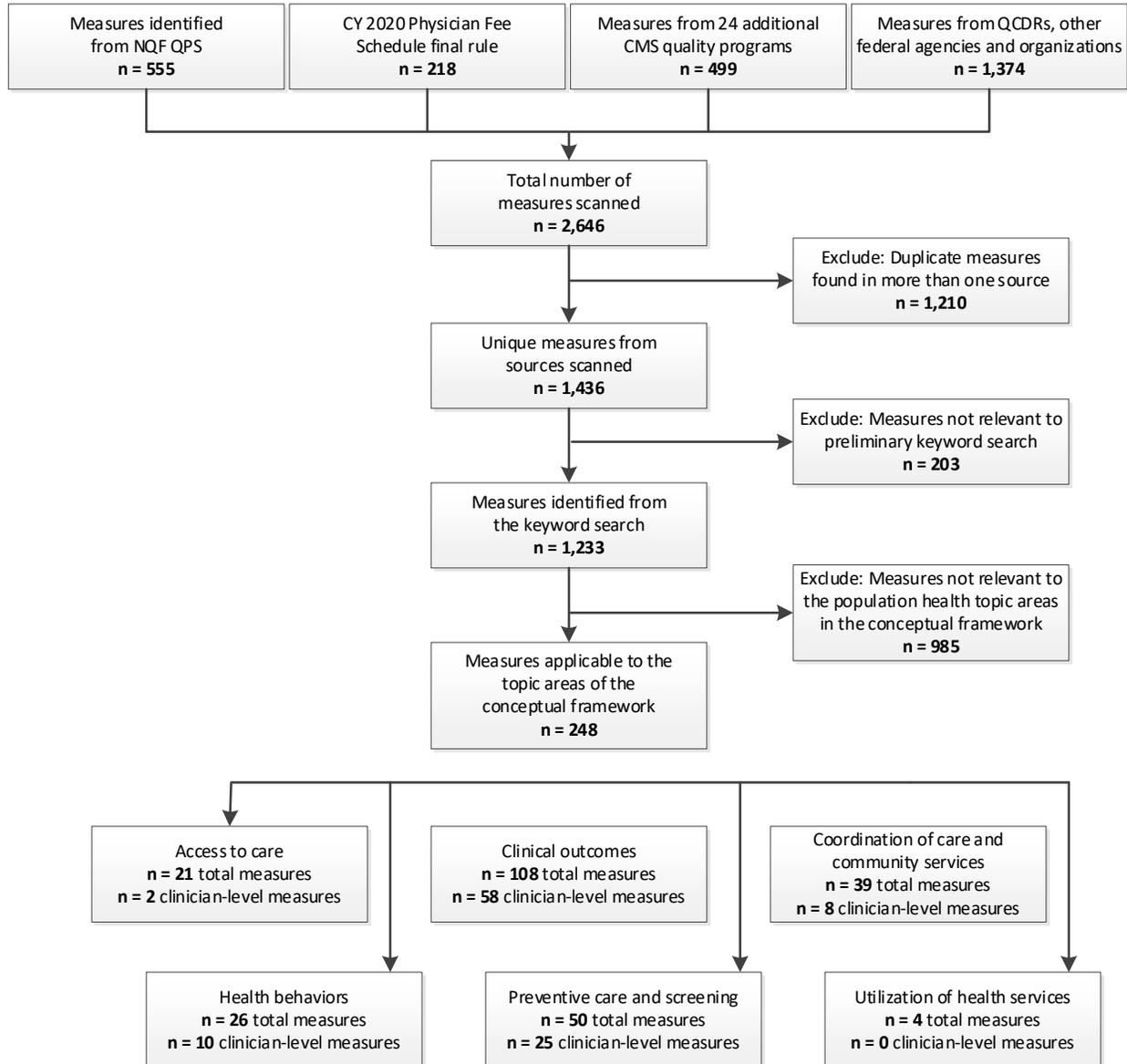
*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

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.

ⁱⁱ National Quality Forum, Measure Applications Partnership. *2020-2021 MAP Final Recommendations*. Washington, DC 2021. <http://www.qualityforum.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=94650>. Accessed February 2, 2021.

Newly Identified Gaps

Figure C-1: Results of 2020 MDP Population Health Environmental Scan for Existing Clinical Quality Measures





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

See *Quality Measures Developed During the Previous Year*, page 20 in Section 4 of the report, which estimates the amounts expended under title XVIII to complete development of these five quality measures for MIPS.

Key: Measure Stewards/Developers:

CMS Centers for Medicare & Medicaid Services
 UM-KECC University of Michigan Kidney Epidemiology and Cost Center
 USC University of Southern California
 Yale CORE Yale-New Haven Health Services Corporation/Center for Outcomes Research and Evaluation

Table D-1: CMS-Funded Measures Developed Between October 1, 2019, and September 30, 2020ⁱⁱⁱ

Steward/ Developer	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
CMS/ UM-KECC	Practitioner-Level Long-Term Catheter Rate	N/A/ N/A	N/A	Intermediate outcome	Patient Safety/ Safety
CMS/ Yale CORE	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions	N/A/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS/ Yale CORE	Patient Safety Indicator for Hypoglycemia	N/A/ N/A	N/A	Outcome	Patient Safety/ Safety
CMS/ Yale CORE	Risk-Standardized Acute Unplanned Cardiovascular-Related Admission Rates for Patients with Heart Failure for the Merit-based Incentive Payment System	N/A/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
USC/ USC	Continuity of Pharmacotherapy for Opioid Use Disorder ^A	3175/ 468	N/A	Process	Effective Treatment/ Clinical Care

* Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

^A Completed under the MACRA Measure Development for the Quality Payment Program contract.

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



Appendix E – CMS-Funded Measures in Development

See *Quality Measures in Development at the Time of This Report*, page 21 in Section 4 of the report, which estimates the amounts expended under title XVIII for ongoing development of quality measures for MIPS.

Key: Measure Stewards/Developers:

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

Table E-1. CMS-Funded Measures Suspended at the Time of This Report (n = 30)^{iv,v}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
ASCP/ ASCP	Notification to the Provider Requesting Amylase Tests ^A	N/A	Process	Communication and Coordination/ Care Coordination	N/A
ASCP/ ASCP	Notification to the provider requesting myoglobin or CK-MB ^A	N/A	Process	Communication and Coordination/ Care Coordination	N/A
ASCP/ ASCP	Notification to the provider requesting thyroid screening tests ^A	N/A	Process	Communication and Coordination/ Care Coordination	N/A
ASCP/ ASCP	Time Interval: Critical Value Reporting for Chemistry ^A	N/A	Process	Communication and Coordination/ Care Coordination	N/A
ASCP/ ASCP	Time Interval: Critical Value Reporting for Troponin ^A	N/A	Process	Communication and Coordination/ Care Coordination	N/A
APA NCQA/ APA	Measurement-based care (MBC): Monitoring of symptoms, functioning, and recovery for all patients seen for mental health and substance use care ^B	N/A	Process	Effective Treatment/ Clinical Care	N/A

^{iv} As of September 30, 2020, to allow for estimated funding for the entire FY 2020 and for federal review and clearance of this report

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



Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
APA NCQA/ APA	Measurement-based care (MBC): Treatment or care plan adjustment for all patients seen for mental health and/or substance use care ^B	N/A	Process	Effective Treatment/ Clinical Care	N/A
TBD/ BWH	High-dose opioid prescribing practices after hospital discharge following total hip (THA) or total knee arthroplasty (TKA) in previously opioid naive patients ^C	N/A	Process	Effective Treatment/ Clinical Care	N/A
APA NCQA/ APA	Evidence-based treatment (EBT): First Episode Psychosis Initiation & Adherence to treatment ^C	N/A	Process	Effective Treatment/ Clinical Care	N/A
APA NCQA/ APA	Measurement-based care (MBC): Stabilization or Reduction in Psychotic symptoms for patients with first-episode psychosis (FEP) ^C	N/A	Outcome	Effective Treatment/ Clinical Care	N/A
APA NCQA/ APA	Consumer Rating of Care Experience ^C	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ RTI	CAHPS Measure Modification for CPC+ Practices ^{C, F} (This applies to the performance-based incentive payment calculation for the treatment group of CPC+.)	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ RAND	Patient Reported Outcome Measure—PHQ9 & PROMIS Depression Screening ^{C, F}	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ NCQA	Annual Wellness Assessment: Preventive Care (Composite) ^{D, F}	890	Composite	Effective Treatment/ Clinical Care	N/A
CMS/ Mathematica	Potential Opioid Overuse ^{D, F}	N/A	Process	Effective Treatment/ Clinical Care	N/A
APA NCQA/ APA	Evidence-based treatment (EBT): Initiation & adherence to medication-assisted treatment (MAT) for patients with opioid use disorder (OUD) ^E	N/A	Process	Effective Treatment/ Clinical Care	N/A



Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
APA NCQA/ APA	Measurement-based care (MBC): Stabilization or Reduction in symptoms for patients with opioid Use Disorder (OUD) ^E	N/A	Outcome	Effective Treatment/ Clinical Care	N/A
CMS/ Mathematica	Cognitive Impairment (CI) Assessment Among Older Adults (75 Years and Older) ^{E, F}	341	Process	Effective Treatment/ Clinical Care	N/A
CMS/ Mathematica	Care Coordination after Asthma-Related Emergency Department Visit ^{E, F}	344	Process	Communication and Coordination/ Care Coordination	N/A
CMS/ Mathematica	Care Coordination after Asthma-Related Emergency Department Visit: EP Follow-Up ^{E, F}	343	Process	Communication and Coordination/ Care Coordination	N/A
CMS/ Mathematica	Adverse Drug Events for Patients Taking Anticoagulant Medications in an Ambulatory Setting ^{E, F}	455	Outcome	Patient Safety/ Safety	N/A
CMS/ Mathematica	Changes in Patient Reported Outcomes (PROs) Following Non-Emergent Percutaneous Coronary Intervention (PCI) ^{E, F}	812	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ Mathematica	Disease Activity Assessments and Target Setting in Patients with Rheumatoid Arthritis ^{E, F}	250	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ Mathematica	Documentation of a Health Care Partner for Patients with Dementia or Mild Cognitive Impairment ^{E, F}	342	Process	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ Mathematica	Functional Status Assessment and Target Setting for Patients with Congestive Heart Failure ^{E, F}	895	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ Mathematica	Functional Status Assessments and Target Setting for Patients with Asthma ^{E, F}	228	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ NCQA	Functional Status Improvement for Patients who Received a Total Hip Replacement ^{E, F}	379	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ NCQA	Functional Status Improvement for Patients who Received a Total Knee Replacement ^{E, F}	378	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ Mathematica	Pain Assessments and Target Setting for Patients with Osteoarthritis ^{E,F}	336	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	N/A
CMS/ Mathematica	Use of Multimodal and Multidisciplinary Pain Management Therapies for Adults Prescribed Opioids ^{E,F}	948	Process	Person and Family Engagement/ Patient and Caregiver Experience	N/A

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

^A Development was stopped because current HL7 standards do not provide a way to specify data elements required for the measure.

^B Measure was combined with two others into a single measure with three strata.

^C Measure was stopped due to timeline constraints, funding limitations, or lack of meaningfulness at the clinician level.

^D A new measure with expanded inclusion population and impact has started development.

^E Determined to be low-value and/or duplicative of existing measures during evaluation

^F Intended for use in MIPS but funded from other title XVIII sources not specific to MACRA

Table E-2: CMS-Funded Measures Being Specified at the Time of This Report (n = 2)^{vi,vii}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ Mathematica	Preventive Care and Wellness (composite) ^A	TBD	Composite	Effective Treatment/ Clinical Care	August 2021
CMS ASA/ Mathematica	Safe Opioid Prescribing Practices ^A	890	Process	Effective Treatment/ Clinical Care	August 2022

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

^A Intended for use in MIPS but funded from other title XVIII sources not specific to MACRA

Table E-3: CMS-Funded Measures in Active Testing at the Time of This Report (n = 21)^{vi,vii}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
BWH/ BWH	Care goal achievement following total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
UCSF/ UCSF	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults ^A	N/A	Intermediate outcome	Patient Safety/ Safety	September 2021
APA NCQA/ APA	Improvement or Maintenance in Recovery for Individuals with a Mental Health and/or Substance Use Disorder ^A	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021

^{vi} As of September 30, 2020, to allow for estimated funding for the entire FY 2020 and for federal review and clearance of this report.

^{vii} 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
APA NCQA/ APA	Improvement or Maintenance of Functioning for Individuals with a Mental and/or Substance Use Disorder ^A	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
APA NCQA/ APA	Initiation and Update to Suicide Safety Plan for Individuals with Suicidal Ideation, Behavior or Suicide Risk ^A	N/A	Process	Effective Treatment/ Clinical Care	September 2021
APA NCQA/ APA	Measurement-based Care Processes: Baseline Assessment, Monitoring and Treatment Adjustment ^A	N/A	Process	Effective Treatment/ Clinical Care	September 2021
AAHPM/ AAHPM	Palliative care outpatients' experience of feeling heard and understood. ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
AAHPM/ AAHPM	Palliative care outpatients' experience of receiving desired help for pain. ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient-Reported Fatigue Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient-Reported Overall Mental Health Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient-Reported Overall Physical Health Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
SCCA/ PBGH	Patient-Reported Pain Intensity Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021



Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
SCCA/ PBGH	Patient-Reported Pain Interference Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer ^A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	September 2021
BWH/ BWH	Prolonged opioid prescribing following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM) ^A	TBD	Process	Effective Treatment/ Clinical Care	September 2021
ASCP/ ASCP	Rate of communicating results of an amended report with a major discrepancy to the responsible provider ^A	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
ASCP/ ASCP	Rate of Notification of a New Diagnosis of Malignancy to the Responsible Provider ^A	TBD	Process	Communication and Coordination/ Care Coordination	September 2021
APA NCQA/ APA	Reduction in Suicidal Ideation or Behavior Symptoms ^A	N/A	Outcome	Effective Treatment/ Clinical Care	September 2021
BWH/ BWH	Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM) ^A	TBD	Outcome	Patient Safety/ Safety	September 2021
BWH/ BWH	Risk-standardized inpatient respiratory depression rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM) ^A	TBD	Outcome	Patient Safety/ Safety	September 2021
BWH/ BWH	Risk-standardized major bleeding and venous thromboembolism (VTE) rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM) ^A	TBD	Outcome	Patient Safety/ Safety	September 2021



Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ Yale CORE	Risk-Standardized Patient-Reported Outcomes Following Elective Primary Total Hip and/or Total Knee Arthroplasty (THA/TKA) Measure for Merit-based Incentive Payment System (MIPS)	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience	Summer 2021

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

^ Being developed under the MACRA Measure Development for the Quality Payment Program funding

Table E-4. CMS-Funded Measures Fully Specified and Posted for Public Comment at the Time of This Report (n = 1)^{viii,ix}

Steward/ Developer	Title	eCQM ID	Type	Quality Priority/ MACRA Domain*	Est. Date of Completion
CMS/ UM-KECC	Opioid Safety Measure	N/A	Intermediate outcome	Patient Safety/ Safety	February 2021

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

^{viii} As of September 30, 2020, to allow for estimated funding for the entire FY 2020 and for federal review and clearance of this report.

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

**Table E-5. Crosswalk of Measure Titles –
2020 MDP Annual Report to 2021 MDP Annual Report**

Title in 2020 MDP Annual Report	→	Title in 2021 MDP Annual Report	Steward/ Developer
Palliative care outpatients' experience of feeling heard and understood.	→	Palliative care outpatients' experience of feeling heard and understood.	AAHPM
Palliative care outpatients' experience of receiving desired help for pain.	→	Palliative care outpatients' experience of receiving desired help for pain.	
Measurement-based care (MBC): Stabilization or Reduction in Functional Impairment for all patients seen for mental health and substance use care	→	Improvement or Maintenance of Functioning for Individuals with a Mental and/or Substance Use Disorder	APA & NCQA/ APA
Measurement-based care (MBC): Stabilization or Reduction in Suicide symptoms	→	Reduction in Suicidal Ideation or Behavior Symptoms	
Measurement-based care (MBC): Initial standardized assessment for all patients seen for mental health and/or substance use care	→	Measurement-based Care Processes: Baseline Assessment, Monitoring and Treatment Adjustment	
Measurement-based care (MBC): Monitoring of symptoms, functioning, and recovery for all patients seen for mental health and substance use care			
Measurement-based care (MBC): Treatment or care plan adjustment for all patients seen for mental health and/or substance use care			
Evidence-based treatment (EBT): Initiation, Review and Update to Suicide Safety Plan	→	Initiation and Update to Suicide Safety Plan for Individuals with Suicidal Ideation, Behavior or Suicide Risk	
Measurement-based care (MBC): Recovery for all patients seen for mental health and substance use care	→	Improvement or Maintenance in Recovery for Individuals with a Mental Health and/or Substance Use Disorder	
Rate of Notification of a New Diagnosis of Malignancy to the Responsible Provider	→	Rate of Notification of a New Diagnosis of Malignancy to the Responsible Provider	ASCP
Rate of communicating results of an amended report with a major discrepancy to the responsible provider	→	Rate of communicating results of an amended report with a major discrepancy to the responsible provider	
Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) electronic clinical quality measure (eCQM)	→	Risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) electronic clinical quality measure (eCQM)	BWH/ 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)	→	Risk-standardized major bleeding and venous thromboembolism (VTE) rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM)	

Title in 2020 MDP Annual Report	→	Title in 2021 MDP Annual Report	Steward/ Developer
Care goal achievement following total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	→	Care goal achievement following total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	BWH/ BWH
Opioid extended use rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	→	Prolonged opioid prescribing following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM)	
Opioids: Risk-standardized opioid-related respiratory depression rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	→	Risk-standardized inpatient respiratory depression rate following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) (eCQM)	
		*Preventive Care and Wellness (composite)	CMS/ Mathematica
		*Safe Opioid Prescribing Practices	CMS ASA/ Mathematica
Opioid Safety Measure	→	Opioid Safety Measure	CMS/ UM-KECC
		*Risk-Standardized Patient-Reported Outcomes Following Elective Primary Total Hip and/or Total Knee Arthroplasty (THA/TKA) Measure for Merit-based Incentive Payment System (MIPS)	CMS/ Yale-CORE
		*Patient-Reported Fatigue Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer	SCCA/ PBGH
Patient Reported Pain: Pain Intensity Following Chemotherapy	→	Patient-Reported Pain Intensity Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer	
Patient Reported Pain: Pain Interference Following Chemotherapy	→	Patient-Reported Pain Interference Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer	
Patient Reported HRQOL: Overall Physical Health Following Chemotherapy	→	Patient-Reported Overall Physical Health Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer	
Patient Reported HRQOL: Overall Mental Health Following Chemotherapy	→	Patient-Reported Overall Mental Health Following Chemotherapy among Adults with Breast Cancer, Colon Cancer, and Non-Small Cell Lung Cancer	
Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults	→	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults	UCSF/ UCSF

*New measure



Appendix F – CMS Advanced APM Quality Measures Inventory

The inventory of measures included in Advanced Alternative Payment Models for the 2021 performance period (2022 data submission) is provided below. Changes to models occur more frequently than the publication of this MDP Annual Report. These measure sets were accurate and complete as of March 29, 2021.

Key: Measure Stewards/Developers:

ACC	American College of Cardiology	HEDIS	Healthcare Effectiveness Data and Information Set
ACS	American College of Surgeons	HFH	Henry Ford Hospital
AHA	American Heart Association	HRS	Heart Rhythm Society
AHRQ	Agency for Healthcare Research and Quality	KCQA	Kidney Care Quality Alliance
ASA	American Stroke Association	MNCM	MN Community Measurement
ASAM	American Society of Addiction Medicine	NCQA	National Committee for Quality Assurance
ASCO	American Society of Clinical Oncology	STS	The Society of Thoracic Surgeons
ASPS	American Society of Plastic Surgeons	TJC	The Joint Commission
CMS	Centers for Medicare & Medicaid Services		

Table F-1: CMS Bundled Payments for Care Improvement Advanced Model

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	Communication and Coordination/ Care Coordination
CMS	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Coronary Artery Bypass Graft (CABG) Surgery	2558/ N/A	N/A	Outcome	Effective Treatment/ Clinical Care
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/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
NCQA	Advance Care Plan	0326/ 047	N/A	Process	Person and Family Engagement/ Patient and Caregiver Experience



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
University of Colorado/ Denver	3-Item Care Transition Measure (CTM-3)	N/A	N/A	Outcome	Person and Family Engagement/ Patient and Caregiver Experience
AHA	Cardiac Rehab Patient Referral From an Inpatient Setting	0642/ N/A	N/A	Process	Effective Treatment/ Clinical Care
AHA	Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy	1525/ 326	N/A	Process	Effective Treatment/ Clinical Care
ACC	Discharge Medications (Angiotensin-Converting Enzyme (ACE)/Angiotensin Receptor Blocker (ARB) and Beta Blockers) in Eligible Implantable Cardioverter-Defibrillator (ICD)/Cardiac Resynchronization Therapy Defibrillators (CRT-D) Implant Patients	0965/ N/A	N/A	Composite	Effective Treatment/ Clinical Care
AHA	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	0081/ 005	N/A	Process	Effective Treatment/ Clinical Care
AHA	Heart Failure (HF): Beta blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	0083/ 008	N/A	Process	Effective Treatment/ Clinical Care
CMS	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Pneumonia Hospitalization	0468/ N/A	N/A	Outcome	Effective Treatment/ Clinical Care
ACC	Hospital Risk-Standardized Complication Rate following Implantation of ICD	N/A / N/A	N/A	Composite	Patient Safety/ Safety
ACC	Risk Standardized Bleeding for Patients Undergoing Percutaneous Coronary Intervention (PCI)	2459/ N/A	N/A	Outcome	Patient Safety/ Safety
HRS	In-Person Evaluation Following Implantation of a Cardiovascular Implantable Electronic Device (CIED)	2461/ N/A	N/A	Process	Effective Treatment/ Clinical Care
ACC	Overall Defect Free Care for Acute Myocardial Infarction (AMI)	2377/ N/A	N/A	Composite	Effective Treatment/ Clinical Care



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
ACS	Patient-Centered Surgical Risk Assessment and Communications	N/A / 358	N/A	N/A	Person and Family Engagement/ Patient and Caregiver Experience
NCQA	Preventive Care & Screening: Tobacco Use and Cessation Intervention	0028/ 226	N/A	Process	Effective Treatment/ Clinical Care
HFH	Severe Sepsis and Septic Shock: Management Bundle	0500/ N/A	N/A	Composite	Patient Safety/ Safety
TJC	STK-06: Discharged on Statin Medication	0439/ N/A	N/A	Process	Communication and Coordination/ Care Coordination
STS	STS Coronary Artery Bypass Graft (CABG) Composite Score	0696/ N/A	N/A	Composite	Effective Treatment/ Clinical Care
ASAM	Substance Use Screening and Intervention Composite	2597/ N/A	N/A	Composite	Effective Treatment/ Clinical Care
ACC	Therapy with Aspirin, P2Y12 Inhibitor, and Statin at Discharge Following PCI in Eligible Patients	0964/ N/A	N/A	Composite	Effective Treatment/ Clinical Care
AHA/ASA	Time to Intravenous Thrombolytic Therapy	1952/ N/A	N/A	Process	Effective Treatment/ Clinical Care
STS	STS Aortic Valve Replacement (AVR) Composite Score and STS Aortic Valve Replacement (AVR) + Coronary Artery Bypass Graft (CABG) Composite Score	2561, 2563/ N/A	N/A	Composite	Effective Treatment/ Clinical Care
STS	STS Mitral Valve Repair/Replacement (MVRR) Composite Score and STS Mitral Valve Repair/Replacement (MVRR) + Coronary Artery Bypass Graft (CABG) Composite Score	3031, 3032/ N/A	N/A	Composite	Effective Treatment/ Clinical Care
ACS	Bariatric Surgery Standards for Successful Programs Measure	N/A / N/A	N/A	Process	Patient Safety/ Safety

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

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/ N/A	2v6	Process	Effective Treatment/ Clinical Care
KCQA	Influenza Immunization for the ESRD Population	0226/ N/A	N/A	Process	Effective Treatment/ Clinical Care
NCQA	Advance Care Plan	0326/ 047	N/A	Process	Communication and Coordination/ Care Coordination
CMS	Standardized Mortality Ratio	0369/ N/A	N/A	Outcome	Effective Treatment/ Clinical Care

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

Table F-3: 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
CMS	Patient-reported outcomes and risk variable data collection (PRO)**	N/A	N/A	PRO-PM	Person and Family Engagement/ Patient and Caregiver Experience

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

** Patient-reported outcomes and limited risk variable data collection (PRO) is a data collection and measure development initiative run by CMS contractor Yale CORE and is not required for reconciliation eligibility for participant hospitals. Successful submission of PRO (not performance on PRO) can increase financial opportunity for participant hospitals under the model.

Table F-4: Comprehensive Primary Care Plus (CPC+) Model

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
AHRQ	CPC+ Patient Experience of Care Survey (PECS) Summary Score (uses CG-CAHPS Survey 3.0 and Patient-Centered Medical Home Survey Supplement) – 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/ 001	122v6	Intermediate Outcome	Effective Treatment/ Clinical Care
NCQA HEDIS	Emergency Department Utilization	N/A	N/A	Risk-adjusted utilization	Affordable Care
NCQA HEDIS	Acute Hospital Utilization	N/A	N/A	Risk-adjusted utilization	Affordable Care

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

Table F-5: Direct Contracting Model

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain
CMS	Risk-Standardized Acute Admission Rates for Patients with Multiple Chronic Conditions	2888/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Risk-Standardized, All Condition Readmission	1789/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination

**Table F-6: 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	165v8	Intermediate Outcome	Effective Treatment/ Clinical Care
NCQA	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)	0059/ 001	122v8	Intermediate Outcome	Effective Treatment/ Clinical Care
NCQA HEDIS	Emergency Department Utilization	N/A	N/A	Risk-adjusted utilization	Affordable Care
NCQA HEDIS	Acute Hospital Utilization	N/A	N/A	Risk-adjusted utilization	Affordable Care
CMS	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	0421/ 128	69v8	Process	Effective Treatment/ Clinical Care
CMS	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	0418/ 134	2v9	Process	Effective Treatment/ Clinical Care

*Screening, prevention, and primary care measures are included in the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

Table F-7: Next Generation ACO Model

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
AHRQ	CAHPS for ACOs	N/A	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	Risk-Standardized Acute Admission Rates for Patients with Multiple Chronic Conditions	2888/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
CMS	Risk-Standardized, All Condition Readmission	1789/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination

*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 the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

Table F-8: Oncology Care Model – All Tracks

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
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
CMS	Screening for Depression and Follow-Up Plan	0418/ 134	2v6	Process	Effective Treatment/ Clinical Care
N/A**	Proportion of patients who died who were admitted to hospice for 3 days or more	N/A	N/A	Outcome	Affordable 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
ASCO	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 the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

** The Center for Medicare and Medicaid Innovation calculates and maintains these measures.

**Table F-9: Shared Savings Program Track 2,
Basic Track Level E, ENHANCED Track, and Track 1+ 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 for MIPS Clinician/Group Survey	0005/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	Risk-Standardized, Acute Admission Rate for Patients with Multiple Chronic Conditions for ACOs	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



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain**
CMS	Risk-Standardized, All Condition Readmission	1789/ 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/ N/A	WI*	Process	Communication and Coordination/ Care Coordination
NCQA	Pneumonia Vaccination Status for Older Adults	0043/ 111	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Use of Aspirin or Another Antithrombotic	0068/ N/A	WI*	Process	Effective Treatment/ Clinical Care
NCQA	Use of Imaging Studies for Low Back Pain	0052/ N/A	WI*	Process	Affordable Care
NCQA	Preventive Care and Screening: Influenza Immunization	0041/ 110	WI*	Process	Effective Treatment/ Clinical Care
NCQA	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 the MACRA domain of Clinical Care to align with the health care quality priority of Effective Treatment.

Table F-10: Vermont Medicare ACO Initiative

Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
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
AHRQ	CAHPS: Stewardship of Patient Resources	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Courteous and Helpful Office Staff	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
AHRQ	CAHPS: Care Coordination	N/A/ 321	N/A	Patient engagement/ experience	Person and Family Engagement/ Patient and Caregiver Experience
CMS	Risk-Standardized, Acute Admission Rate for Patients with Multiple Chronic Conditions	2888/ 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	2v8	Process	Effective Treatment/ Clinical Care



Steward	Title	NQF #/ MIPS ID	eCQM ID	Type	Quality Priority/ MACRA Domain*
CMS	Risk Standardized All Cause Readmission	1789/ N/A	N/A	Outcome	Communication and Coordination/ Care Coordination
NCQA	Colorectal Cancer Screening	0034/ 113	130v7	Process	Effective Treatment/ Clinical Care
NCQA	Diabetes Mellitus: Hemoglobin A1c Poor Control (>9%)	0059/ 001	122v7	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Controlling High Blood Pressure	0018/ 236	165v6	Intermediate outcome	Effective Treatment/ Clinical Care
NCQA	Initiation and engagement of Alcohol and Other Drug Dependence (AOD) Treatment	004/ 305	137v7	Process	Effective Treatment/ Clinical Care
NCQA	Follow-up after discharge from the Emergency Department for Mental Health or Alcohol or Other Drug Dependence (30 day)	2605/ N/A	N/A	Process	Effective Treatment/ Clinical Care
NCQA	Preventive Care and Screening: Influenza Immunization	0041/ 110	147v8	Process	Effective Treatment/ Clinical Care
NCQA	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	0028/ 226	138v7	Process	Effective Treatment/ Clinical Care

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