

2019 Merit-based Incentive Payment System (MIPS) Measure Changes

| Deleted/Modified/Added Measures and Activities | | | |
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| Performance Category | Deleted – no longer available for 2019 reporting | Modified – make changes for 2019 reporting | Added – newly available for 2019 reporting |
| Quality | <ul style="list-style-type: none"> • Quality ID 018: Diabetic Retinopathy - Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy • 043: Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery • 099: Breast Cancer Resection Pathology Reporting - pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade • 100: Colorectal Cancer Resection Pathology Reporting - pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade • 122: Adult Kidney Disease - Blood Pressure Management • 140: Age-Related Macular Degeneration (AMD) - Counseling on Antioxidant Supplement • 156: Oncology: Radiation Dose Limits to Normal Tissues • 163: Comprehensive Diabetes Care: Foot Exam • 204: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet • 224: Melanoma: Avoidance of Overutilization of Imaging Studies • 251: Quantitative Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients | <p><i>The below measures have been “topped out” and “capped” meaning if reporting, physicians are only able to achieve a maximum score of 7 points rather than a full 10 points like other measures. <u>These are important to note because some are commonly used measures, and if reported, practices will be unable to receive a full score in the Quality category.</u></i></p> <ul style="list-style-type: none"> • Quality ID 012: Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation • 014: Age-Related Macular Degeneration (AMD): Dilated Macular Examination • 019: Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care • 021: Perioperative Care: Selection of Prophylactic Antibiotic - First OR Second Generation Cephalosporin • 023: Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients) • 024: Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older • 044: Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery • 046: Medication Reconciliation Post-Discharge • 048: Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older • 050: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older | <ul style="list-style-type: none"> • Quality ID 468: Continuity of Pharmacotherapy for Opioid Use Disorder • 469: Average Change in Functional Status Following Lumbar Spine Fusion Surgery • 470: Average Change in Functional Status Following Total Knee Replacement Surgery • 471: Average Change in Functional Status Following Lumbar Discectomy Laminotomy Surgery • 472: Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture • 473: Average Change in Leg Pain Following Lumbar Spine Fusion Surgery • 474: Zoster (Shingles) Vaccination • 475: HIV Screening |

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| | <ul style="list-style-type: none"> ● 257: Statin Therapy at Discharge after Lower Extremity Bypass (LEB) ● 276: Sleep Apnea: Assessment of Sleep Symptoms ● 278: Sleep Apnea: Positive Airway Pressure Therapy Prescribed ● 263: Preoperative Diagnosis of Breast Cancer ● 327: Pediatric Kidney Disease: Adequacy of Volume Management ● 334: Adult Sinusitis: More than One Computerized Tomography (CT) Scan Within 90 Days for Chronic Sinusitis (Overuse) ● 359: Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging ● 363: Optimizing Patient Exposure to Ionizing Radiation: Search for Prior Computed Tomography (CT) Studies Through a Secure, Authorized, Media-Free, Shared Archive ● 367: Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use ● 369: Pregnant women that had HBsAg testing ● 373: Hypertension: Improvement in Blood Pressure ● 423: Perioperative Anti-platelet Therapy for Patients Undergoing Carotid Endarterectomy ● 426: Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU) ● 427: Post-Anesthetic Transfer of Care: Use of Checklist or | <ul style="list-style-type: none"> ● 051: Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation ● 052: Chronic Obstructive Pulmonary Disease (COPD): Long-Acting Inhaled Bronchodilator Therapy ● 065: Appropriate Treatment for Children with Upper Respiratory Infection (URI) ● 076: Prevention of Central Venous Catheter (CVC) - Related Bloodstream Infections ● 091: Acute Otitis Externa (AOE): Topical Therapy ● 093: Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy - Avoidance of Inappropriate Use ● 109: Osteoarthritis (OA): Function and Pain Assessment ● 117: Diabetes: Eye Exam ● 130: Documentation of Current Medications in the Medical Record ● 131: Pain Assessment and Follow-Up ● 141: Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care ● 143: Oncology: Medical and Radiation - Pain Intensity Quantified ● 146: Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Screening Mammograms ● 147: Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy ● 154: Falls: Risk Assessment ● 155: Falls: Plan of Care ● 165: Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate ● 166: Coronary Artery Bypass Graft (CABG): Stroke ● 167: Coronary Artery Bypass Graft (CABG): Postoperative Renal Failure ● 181: Elder Maltreatment Screen and Follow-Up Plan ● 182: Functional Outcome Assessment ● 185: Colonoscopy Interval for Patients with a History of | |
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| | <p>Protocol for Direct Transfer of Care from Procedure Room to Intensive Care Unit (ICU)</p> <ul style="list-style-type: none"> • 447: Chlamydia Screening and Follow-up | <p>Adenomatous Polyps- Avoidance of Inappropriate Use</p> <ul style="list-style-type: none"> • 192: Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures • 195: Radiology: Stenosis Measurement in Carotid Imaging Reports • 225: Radiology: Reminder System for Screening Mammograms • 238: Use of High-Risk Medications in the Elderly • 249: Barrett's Esophagus • 250: Radical Prostatectomy Pathology Reporting • 262: Image Confirmation of Successful Excision of Image-Localized Breast Lesion • 264: Sentinel Lymph Node Biopsy for Invasive Breast Cancer • 265: Biopsy Follow-Up • 290: Parkinson's Disease: Psychiatric Symptoms Assessment for Patients with Parkinson's Disease • 320: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients • 322: Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low Risk Surgery Patients • 323: Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing After Percutaneous Coronary Intervention (PCI) • 326: Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy • 333: Adult Sinusitis: Computerized Tomography (CT) for Acute Sinusitis (Overuse) • 358: Patient-Centered Surgical Risk Assessment and Communication • 378: Children Who Have Dental Decay or Cavities • 388: Cataract Surgery with Intra-Operative Complications (Unplanned Rupture of Posterior Capsule Requiring Unplanned Vitrectomy) | |
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| | | <ul style="list-style-type: none"> • 395: Lung Cancer Reporting (Biopsy/Cytology Specimens) • 397: Melanoma Reporting • 408: Opioid Therapy Follow-up Evaluation • 412: Documentation of Signed Opioid Treatment Agreement • 414: Evaluation or Interview for Risk of Opioid Misuse • 415: Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 18 Years and Older • 424: Perioperative Temperature Management • 425: Photodocumentation of Cecal Intubation • 430: Prevention of Post-Operative Nausea and Vomiting (PONV) - Combination Therapy <p><i>Changes made to the below measures vary and may include revisions to the description, numerator criteria, and/or denominator criteria.</i></p> <ul style="list-style-type: none"> • Quality ID 144: Oncology: Medical and Radiation – Plan of Care for Moderate to Severe Pain • 176: Rheumatoid Arthritis (RA): Tuberculosis Screening • 177: Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity • 364: Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines • 370: Depression Remission at Twelve Months • 371: Depression Utilization of the PHQ-9 Tool • 397: Melanoma Reporting • 410: Psoriasis: Clinical Response to Systemic Medications • 411: Depression Remission at Six Months • 415: Emergency Medicine: Emergency Department Utilization of | |
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| | | <p>CT for Minor Blunt Head Trauma for Patients Aged 18 Years and Older</p> <ul style="list-style-type: none"> • 416: Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 2 through 17 Years • 217: Functional Status Change for Patients with Knee Impairments • 218: Functional Status Change for Patients with Hip Impairments • 219: Functional Status Change for Patients with Lower Leg, Foot or Ankle Impairments • 220: Functional Status Change for Patients with Low Back Impairments • 221: Functional Status Change for Patients with Shoulder Impairments • 222: Functional Status Change for Patients with Elbow, Wrist or Hand Impairments • 223: Functional Status Change for Patients with General Orthopedic Impairments • 419: Overuse of Imaging for the Evaluation of Primary Headache <p><i><u>The below measures are no longer reportable through the CMS Web Interface.</u></i></p> <ul style="list-style-type: none"> • Quality ID 046: Medication Reconciliation Post-Discharge • 111: Pneumococcal Vaccination Status for Older Adults • 117: Diabetes: Eye Exam • 128: Preventative Care and Screening: Body Mass Index (BMI) Screening and Follow-up Plan | |
| <p>Improvement Activities</p> | <ul style="list-style-type: none"> • Activity ID IA_PM_9: Participation in Population Health Research | <ul style="list-style-type: none"> • Activity ID IA_CC_10: Care transition documentation practice improvements • IA_PM_13: Chronic Care and Preventative Care Management for Empaneled Patients • IA_PSPA_2: Participation in MOC Part IV • IA_PSPA_8: Use of Patient Safety Tools • IA_PSPA_17: Implementation of analytic capabilities to manage total cost of care for practice population | <ul style="list-style-type: none"> • Activity ID IA_AHE_7: Comprehensive Eye Exams • IA_BE_24: Financial Navigation Program • IA_BMH_10: Completion of Collaborative Care Management Training Program • IA_CC_18: Relationship-Centered Communication |

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| | | | <ul style="list-style-type: none"> • IA_PSPA_31: Patient Medication Risk Education • IA_PSPA_32: Use of CDC Guidelines for Clinical Depression Support to Prescribe Opioids for Chronic Pain via Clinical Decision Support |
| Promoting Interoperability | <ul style="list-style-type: none"> • Patient Generated Health Data • View, Download and Transmit (VDT) • Patient-Specific Education • Secure Messaging • Clinical Information Reconciliation – <i>now incorporated into “Support Electronic Referral Loops by Receiving and Incorporating Health Information”</i> | <ul style="list-style-type: none"> • Provide Patients Electronic Access to Their Health Information – <i>previously “provide patient access”</i> • Support Electronic Referral Loops by Receiving and Incorporating Health Information – <i>previously “request/accept summary of care”</i> • Support Electronic Referral Loops by Sending Health Information – <i>previously “send a summary of care”</i> | <ul style="list-style-type: none"> • Query of Prescription Drug Monitoring Program (PDMP) – <i>optional</i> • Verify Opioid Treatment Agreement - <i>optional</i> |

NOTE: All measures not listed on this document are unchanged and still active for the 2019 reporting year.

NOTE: The Promoting Interoperability measures are not “selection” based like the Quality and Improvement Activities categories. All measures are required (in addition to the measures not listed here) except for the PDMP and Opioid Treatment measure which are optional (with bonus points) for 2019.

1. Be aware of the measures/activities you are currently reporting.
2. Review the “Deleted” column.
 - a. If any of your current Quality measures are found in this column, it is imperative you replace the measure to begin collecting data on Jan. 1, 2019. Find all 2019 Quality measures with the [Resource Library](#), for claims reporting download the measure specifications [here](#), for registry reporting download specifications [here](#).
 - b. If any of your current Improvement Activities are found in this column find a new Improvement Activity to report on for a continuous 90-day period in 2019. Find all 2019 Improvement Activities [here](#).
 - c. If none of your current measures or activities are found in the “Deleted” column then all your measures/activities are still active and can be reported for 2019, continue to the “Modified” column to check if your measures have changed or remained the same.
3. Review the “Modified” column.
 - a. If any of your current Quality measures are found in this column, review measures specifications found above in 2a. and make any necessary adjustments to continue reporting this measure appropriately for the 2019 performance year.

NOTE: For measures that have been modified as “topped out”, it is important to know that the points per “topped out” measure is capped at 7 points (rather than the standard 10 points). Therefore reporting “topped out” measures will limit total scorable points within the Quality category and practices will be unable to receive a full Quality category score.

- b. If any of your current Improvement activities are found in this column, find your activity [here](#) and review what changes have been made and if any adjusted action needs to be taken prior to the start of the 2019 performance year.
4. If none of your current measures or activities are found in the “Modified” or “Deleted” column then all your measures/activities are still active for 2019 and you can continue reporting on them as you did in 2018.
5. Review the “Added” if needed to find new measures/activities that may be well suited for your practice or specialty to report for the 2019 MIPS performance year.

Call or email the HIT/Quality Coordinator for additional MIPS assistance at (713) 524-4267 or quality@hcms.org.