



**2019 Clinical Quality Measure (CQM)
Specifications
Release Notes**

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**2019 Measure Specifications for
CQM Release Notes**

CMS is pleased to announce the release of the 2019 Individual Measure Specifications for CQM collection type Release Notes. Measure developers, professional organizations, and other stakeholders have provided comments, clarifications and technical corrections. The list below details changes to existing measures made since the release of the 2018 QPP Measure Specifications. Version 1.0 of the Release Notes corresponds to version 3.0 of the posted 2019 Measure Specifications for CQM data collection type.

Global Edits to Measure Specifications:

- Added Meaningful Measures Category in Titles
- Updated Language for Information Regarding Non-Billable Coding
- Updated Options for Individual Measures and Measure Submission to Align with Program Language

Quality ID #1: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)

- Deleted Denominator Coding, ICD-10-CM: E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359
- Added Denominator Coding, ICD-10-CM: E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3591, E10.3592, E10.3593, E10.3599, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3591, E11.3592, E11.3593, E11.3599, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3591, E13.3592, E13.3593, E13.3599
- Updated Rationale

Quality ID #5: Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)

- Update Numerator Note (Submission 1), Numerator Note (Submission 2), Submission Criteria, and Copyright

Quality ID #6: Coronary Artery Disease (CAD): Antiplatelet Therapy

- No Significant Changes

Quality ID #7: Coronary Artery Disease (CAD): Beta-Blocker Therapy – Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%)

- No Significant Changes

Quality ID #8: Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)

- Updated Instructions and Copyright

Quality ID #12: Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation

- Deleted Denominator Coding, ICD-10-CM: H40.1190, H40.1191, H40.1192, H40.1193, H40.1194, H40.1290, H40.1291, H40.1292, H40.1293, H40.1294, H40.159
- Updated Rationale, Instructions, and Copyright

Quality ID #14: Age-Related Macular Degeneration (AMD): Dilated Macular Examination

- Deleted Denominator Note
- Deleted Denominator Coding, CPT: 99241, 99242, 99243, 99244, 99245
- Deleted Denominator Coding, ICD-10-CM: H35.30
- Updated Numerator Options: Performance Met (G9974) and Denominator Exception (G9975)
- Updated Numerator Note and Copyright

Quality ID #19: Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care

- Deleted Denominator Coding, ICD-10-CM: E08.3219, E08.3299, E08.3319, E08.3399, E08.3419, E08.3499, E08.3519, E08.3529, E08.3539, E08.3549, E08.3559, E08.3599, E09.3219, E09.3299, E09.3319, E09.3399, E09.3419, E09.3499, E09.3519, E09.3529, E09.3539, E09.3549, E09.3559, E09.3599, E10.3219, E10.3299, E10.3319, E10.3399, E10.3419, E10.3499, E10.3519, E10.3529, E10.3539, E10.3549, E10.3559, E10.3599, E11.3219, E11.3299, E11.3319, E11.3399, E11.3419, E11.3499, E11.3519, E11.3529, E11.3539, E11.3549, E11.3559, E11.3599, E13.3219, E13.3299, E13.3319, E13.3399, E13.3419, E13.3499, E13.3519, E13.3529, E13.3539, E13.3549, E13.3559, E13.3599

Quality ID #21: Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin

- Deleted Denominator Coding, CPT: 32506, 32507, 33141, 33530, 34812, 34820, 34833, 34834, 35572, 38747, 38746, 44955, 49568, 57267, 61312
- Added Denominator Coding, CPT: 0505T, 33440, 33886, 38531, 34701, 34702, 34703, 34704, 34705, 34706, 34707, 34708, 34710

Quality ID #23: Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)

- No Longer NQF Endorsed
- Deleted Denominator Coding, CPT: 32506, 32507, 34812, 34820, 34833, 34834, 35572, 38746, 44955, 46762, 57267, 61312
- Added Denominator Coding, CPT: 0505T, 34701, 34702, 34703, 34704, 34705, 34706, 34707, 34708, 34710, 38531

Quality ID #24: Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older

- No Longer NQF Endorsed

Quality ID #39: Screening for Osteoporosis for Women Aged 65-85 Years of Age

- No Significant Changes

Quality ID #43: Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery

- Finalized removal for 2019

Quality ID #44: Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery

- Deleted Denominator Note
- Deleted Denominator Coding, CPT: 00562
- Updated Rationale
- Updated Copyright

Quality ID #46: Medication Reconciliation Post-Discharge

- No Significant Changes

Quality ID #47: Advance Care Plan

- Updated Measure Title

Quality ID #48: Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older

- No Significant Changes

Quality ID #50: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

- No Significant Changes

Quality ID #51: Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation

- No Significant Changes

Quality ID #52: Chronic Obstructive Pulmonary Disease (COPD): Long-Acting Inhaled Bronchodilator Therapy

- No Significant Changes

Quality ID #65: Appropriate Treatment for Children with Upper Respiratory Infection (URI)

- Updated Denominator Instructions
- Updated Denominator Criteria: Denominator Exclusion (G8709)

Quality ID #66: Appropriate Testing for Children with Pharyngitis

- Updated Numerator Instructions

Quality ID #67: Hematology: Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow

- Updated Clinical Recommendation Statements

Quality ID #68: Hematology: Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy

- Updated Clinical Recommendation Statements and Copyright

Quality ID #69: Hematology: Multiple Myeloma: Treatment with Bisphosphonates

- Updated Clinical Recommendation Statements and Copyright
- No Longer NQF Endorsed

Quality ID #70: Hematology: Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry

- Updated Clinical Recommendation Statements and Copyright
- No Longer NQF Endorsed

Quality ID #76: Prevention of Central Venous Catheter (CVC) - Related Bloodstream Infections

- Added Denominator Coding, CPT: 36572, 36573

Quality ID #91: Acute Otitis Externa (AOE): Topical Therapy

- Deleted Denominator Coding, ICD-10-CM: H60.8X3

Quality ID #93: Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use

- Deleted Denominator Coding, ICD-10-CM: H60.8X3
- Added Denominator Coding, ICD-10-CM: H60.311, H60.312, H60.313, H60.319, H60.321, H60.322, H60.323, H60.329
- Updated Rationale

Quality ID #99: Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade

- Finalized removal for 2019

Quality ID #100: Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade

- Finalized removal for 2019

Quality ID #102: Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients

- Updated Definitions, Denominator Definitions, Clinical Recommendation Statements and Copyright

Quality ID #104: Prostate Cancer: Combination Androgen Deprivation Therapy for High Risk or Very High Risk Prostate Cancer

- Updated Clinical Recommendation Statements and Copyright

Quality ID #109: Osteoarthritis (OA): Function and Pain Assessment

- Updated Instructions

Quality ID #110: Preventive Care and Screening: Influenza Immunization

- Updated Instructions, Clinical Recommendation Statements, and Copyright
- Added Denominator Note
- Deleted Denominator Coding, CPT or HCPCS: 96160, 96161

Quality ID #111: Pneumococcal Vaccination Status for Older Adults

- No Longer NQF Endorsed

Quality ID #112: Breast Cancer Screening

- Updated Measure Description, Rationale, and Clinical Recommendation Statements

Quality ID #113: Colorectal Cancer Screening

- Updated Rationale and Clinical Recommendation Statements
- Added Denominator Coding, CPT: 99211, 99386, 99387, 99396, 99397

Quality ID #116: Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis

- Updated Denominator Note and Antibiotic Medications

Quality ID #117: Diabetes: Eye Exam

- Updated Numerator Statement and Rationale
- Deleted Denominator Coding, ICD-10-CM: E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359
- Added Denominator Coding, ICD-10-CM: E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3591, E10.3592, E10.3593, E10.3599, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3591, E11.3592, E11.3593, E11.3599, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3591, E13.3592, E13.3593, E13.3599

Quality ID #118: Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy - Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%)

- Updated Numerator Note
- Added Denominator Coding (Submission Criteria 1), ICD-10-CM: I21.9, I21.A1, I21.A9
- Deleted Denominator Coding (Submission Criteria 2), ICD-10-CM: I21.9, I21.A1, I21.A9, E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359
- Added Denominator Coding (Submission Criteria 2), ICD-10-CM: E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3591, E10.3592, E10.3593, E10.3599, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.37X9, E11.37X11, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3591, E11.3592, E11.3593, E11.3599, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3591, E13.3592, E13.3593, E13.3599

Quality ID #119: Diabetes: Medical Attention for Nephropathy

- Updated Rationale and Clinical Recommendation Statements
- Deleted Denominator Coding, ICD-10-CM: E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339
- Added Denominator Coding, ICD-10-CM: E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3591, E10.3592, E10.3593, E10.3599, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E13.341, E13.349, E13.351, E13.359

Quality ID #122: Adult Kidney Disease: Blood Pressure Management

- Finalized removal for 2019

Quality ID #126: Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy - Neurological Evaluation

- No Significant Changes

Quality ID #127: Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention - Evaluation of Footwear

- Deleted Denominator Coding, ICD-10-CM: E13.329
- Added Denominator Coding, ICD-10-CM: E13.3291, E13.3292, E13.3293, E13.3299

Quality ID #128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan

- Updated Instructions, Definitions, Rationale, and Clinical Recommendation Statements
- Added Denominator Coding, CPT or HCPCS: 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99401, 99402, G0473

Quality ID #130: Documentation of Current Medications in the Medical Record

- Updated Rationale
- Deleted Denominator Coding, CPT or HCPCS: 99024*¹
- Added Denominator Coding, CPT or HCPCS: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99339, 99340, G0515

Quality ID #131: Pain Assessment and Follow-Up

- Deleted Denominator Coding, CPT: 96118
- Added Denominator Coding, CPT: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 98943

Quality ID #134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan

- Updated Instructions, Definitions, Denominator Submission Criteria, Numerator Instructions, and Rationale
- Deleted Denominator Coding, CPT or HCPCS: 96118, G0502, G0503, G0504, G0505, G0507
- Added Denominator Coding, CPT or HCPCS: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99483, 99484, 99492, 99493
- Deleted Denominator Coding, ICD-10-CM: F53
- Added Denominator Coding, ICD-10-CM: F53.0, F53.1

Quality ID #137: Melanoma: Continuity of Care – Recall System

- No Longer NQF Endorsed
- Deleted Denominator Coding, ICD-10-CM: C43.11, C43.12, D03.11, D03.12
- Added Denominator Coding, ICD-10-CM: C43.111, C43.112, C43.121, C43.122, D03.111, D03.112, D03.121, D03.122

¹ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Quality ID #138: Melanoma: Coordination of Care

- Added Denominator Note to Criteria 1 and 2
- Deleted Denominator Coding (Eligible Cases 1 and 2), ICD-10-CM: C43.11, C43.12, D03.11, D03.12
- Added Denominator Coding (Eligible Cases 1 and 2), ICD-10-CM: C43.111, C43.112, C43.121, C43.122, D03.111, D03.112, D03.121, D03.122

Quality ID #140: Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement

- Finalized removal for 2019

Quality ID #141: Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care

- Deleted Denominator Note
- Deleted Denominator Coding, CPT: 99241, 99242, 99243, 99244, 99245
- Updated Copyright

Quality ID #143: Oncology: Medical and Radiation – Pain Intensity Quantified

- Updated Instructions and Measure Submission Criteria
- Added Denominator Note to Criteria 2
- Deleted Denominator Coding (Eligible Cases 1), ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.119, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12, D49.5
- Added Denominator Coding (Eligible Cases 1 and 2), ICD-10-CM: C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
- Deleted Denominator Coding (Eligible Cases 2), ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.119, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12
- Updated Clinical Recommendation Statements and Copyright

Quality ID #144: Oncology: Medical and Radiation – Plan of Care for Pain for Moderate to Severe Pain

- Updated Measure Title, Measure Description, Instructions and Submission Criteria
- Added Denominator Coding (Submission Criteria 1), CPT Service Codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02
- Added Denominator Coding (Submission Criteria 1), CPT Procedure Codes: 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549 and Denominator Criteria (M1000)
- Added Numerator (Submission Criteria 1) Options: Performance Met (M1001) and Performance Not Met (M1002)
- Added Denominator (Submission Criteria 2) Statement, Definition, and Denominator Coding (ICD-10-CM)
- Added Denominator Coding, CPT: 77427, 77431, 77432, 77435
- Added Denominator Criteria (Eligible Cases 2): (M1000)
- Added Numerator (Submission Criteria 2): Statement, Instructions, Numerator Options: Performance Met (M1001) and Performance Not Met (M1002)
- Deleted Denominator Coding (Eligible Cases 1 and 2), ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.119, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12
- Added Denominator Coding (Eligible Cases 1 and 2), ICD-10-CM: C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122

Quality ID #145: Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for Procedures Using Fluoroscopy

- Updated Measure Title
- Deleted Denominator Coding, CPT or HCPCS: G0278, 75984, 76001

Quality ID #146: Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Screening Mammograms

- Deleted Denominator Note
- Deleted Denominator Coding, CPT or HCPCS: G0202

Quality ID #147: Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy

- No Significant Changes

Quality ID #154: Falls: Risk Assessment

- No Significant Changes

Quality ID #155: Falls: Plan of Care

- No Significant Changes

Quality ID #156: Oncology: Radiation Dose Limits to Normal Tissues

- Finalized removal for 2019

Quality ID #164: Coronary Artery Bypass Graft (CABG): Prolonged Intubation

- No Significant Changes

Quality ID #165: Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate

- No Significant Changes

Quality ID #166: Coronary Artery Bypass Graft (CABG): Stroke

- No Significant Changes

Quality ID #167: Coronary Artery Bypass Graft (CABG): Postoperative Renal Failure

- No Significant Changes

Quality ID #168: Coronary Artery Bypass Graft (CABG): Surgical Re-Exploration

- No Significant Changes

Quality ID #176: Rheumatoid Arthritis (RA): Tuberculosis Screening

- Updated Measure Description, Numerator Statement and Numerator Definition
- Added Denominator Criteria (Diagnosis for Rheumatoid Arthritis), ICD-10-CM: M05.10, M06.20, M06.211, M06.212, M06.219, M06.221, M06.222, M06.229, M06.231, M06.232, M06.239, M06.241, M06.242, M06.249, M06.251, M06.252, M06.259, M06.261, M06.262, M06.269, M06.271, M06.272, M06.279, M06.28, M06.29
- Updated Numerator Options: Performance Met (M1003), Performance Not Met (M1005) and Denominator Exception (M1004)

Quality ID #177: Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity

- Updated Measure Description, Numerator Statement and Numerator Definition
- Added Numerator Options: Performance Met (M1007), Performance Not Met (M1006), Performance Not Met (M1008)
- Added Denominator Criteria (Diagnosis for Rheumatoid Arthritis), ICD-10-CM: M06.20, M06.211, M06.212, M06.219, M06.221, M06.222, M06.229, M06.231, M06.232, M06.239, M06.241, M06.242, M06.249, M06.251, M06.252, M06.259, M06.261, M06.262, M06.269, M06.271, M06.272, M06.279, M06.28, M06.29
- Updated Clinical Recommendation Statements

Quality ID #178: Rheumatoid Arthritis (RA): Functional Status Assessment

- Updated Numerator Statement
- Added Denominator Criteria (Diagnosis for Rheumatoid Arthritis), ICD-10-CM: M05.10, M06.20, M06.211, M06.212, M06.219, M06.221, M06.222, M06.229, M06.231, M06.232, M06.239, M06.241, M06.242, M06.249, M06.251, M06.252, M06.259, M06.261, M06.262, M06.269, M06.271, M06.272, M06.279, M06.28, M06.29.

Quality ID #179: Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis

- Added Denominator Criteria (Diagnosis for Rheumatoid Arthritis), ICD-10-CM: M05.10, M06.20, M06.211, M06.212, M06.219, M06.221, M06.222, M06.229, M06.231, M06.232, M06.239, M06.241, M06.242, M06.249, M06.251, M06.252, M06.259, M06.261, M06.262, M06.269, M06.271, M06.272, M06.279, M06.28, M06.29

Quality ID #180: Rheumatoid Arthritis (RA): Glucocorticoid Management

- Added Denominator Criteria (Diagnosis for Rheumatoid Arthritis), ICD-10-CM: M05.10, M06.20, M06.211, M06.212, M06.219, M06.221, M06.222, M06.229, M06.231, M06.232, M06.239, M06.241, M06.242, M06.249, M06.251, M06.252, M06.259, M06.261, M06.262, M06.269, M06.271, M06.272, M06.279, M06.28, M06.29

Quality ID #181: Elder Maltreatment Screen and Follow-Up Plan

- Updated Definitions, Rationale, Instructions, Clinical Recommendation Statements, and Copyright
- Deleted Denominator Coding, CPT or HCPCS: 96118, G0502, G0505
- Added Denominator Coding, CPT or HCPCS: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 99483, 99492, G0102

Quality ID #182: Functional Outcome Assessment

- Updated Numerator Definitions and Clinical Recommendation Statements
- Added Denominator Coding, CPT: 98943

Quality ID #185: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use

- Updated Copyright

Quality ID #187: Stroke and Stroke Rehabilitation: Thrombolytic Therapy

- Updated Clinical Recommendation Statements and Copyright

Quality ID #191: Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery

- Updated Rationale and Copyright
- Updated Table 1: Deleted ICD-10-CM Codes to Acute and Subacute Iridocyclitis: H20.019, H20.029, H20.039, H20.049, H20.059
- Updated Table 1: Deleted ICD-10-CM Codes to Amblyopia: H53.001, H53.002, H53.003, H53.019, H53.029, H53.039, H53.049
- Updated Table 1: Deleted ICD-10-CM Codes to Burn Confined to Eye and Adnexa: T26.00XA, T26.10XA, T26.20XA, T26.30XA, T26.40XA, T26.50XA, T26.60XA, T26.70XA, T26.80XA, T26.90XA
- Updated Table 1: Deleted ICD-10-CM Codes to Cataract Secondary to Ocular Disorders: H26.219, H26.229
- Updated Table 1: Deleted ICD-10-CM Codes to Central Corneal Ulcer: H16.019
- Updated Table 1: Deleted ICD-10-CM Codes to Certain Types of Iridocyclitis: H20.20, H20.819, H20.829, H40.40X0
- Updated Table 1: Deleted ICD-10-CM Codes to Chorioretinal Scars: H31.009, H31.019, H31.029, H31.099
- Updated Table 1: Deleted ICD-10-CM Codes to Choroidal Detachment: H31.419
- Updated Table 1: Deleted ICD-10-CM Codes to Choroidal Hemorrhage and Rupture: H31.309, H31.319, H31.329

- Updated Table 1: Deleted ICD-10-CM Codes to Chronic Iridocyclitis: H20.10
- Updated Table 1: Deleted ICD-10-CM Codes to Cloudy Cornea: H17.00, H17.10, H17.819, H17.829, H18.10, H18.229, H18.239, H18.429
- Updated Table 1: Deleted ICD-10-CM Codes to Corneal Opacity and Other Disorders of Cornea: H17.00, H17.10
- Updated Table 1: Deleted ICD-10-CM Codes to Degeneration of Macula and Posterior Pole: H35.3190, H35.3191, H35.3192, H35.3193, H35.3194, H35.3290, H35.3291, H35.3292, H35.3293, H35.349, H35.359, H35.369, H35.379, H35.389
- Updated Table 1: Deleted ICD-10-CM Codes to Degenerative Disorders of Globe: H44.20, H44.2A9, H44.2B9, H44.2C9, H44.2D9, H44.319, H44.329, H44.399
- Updated Table 1: Deleted ICD-10-CM Codes to Diabetic Macular Edema: E08.3219, E08.3319, E08.3419, E09.3519, E08.3529, E08.3539, E08.3549, E08.3559, E0837X9, E09.3219, E09.3319, E09.3419, E09.3519, E09.3529, E09.3539, E09.3549, E09.3559, E09.37X9, E10.3219, E10.3319, E10.3419, E10.3519, E10.3529, E10.3539, E10.3549, E10.3559, E10.37X9, E11.3219, E11.3319, E11.3419, E11.3519, E11.3529, E11.3539, E11.3549, E11.3559, E11.37X9, E13.3219, E13.3319, E13.3419, E13.3519, E13.3529, E13.3539, E13.3549, E13.3559, E13.37X9
- Updated Table 1: Deleted ICD-10-CM Codes to Diabetic Retinopathy: E08.3219, E08.3299, E08.3319, E08.3399, E08.3419, E08.3499, E08.3519, E08.3529, E08.3539, E08.3549, E08.3559, E08.3599, E09.3219, E09.3299, E09.3319, E09.3399, E09.3419, E09.3499, E09.3519, E09.3529, E09.3539, E09.3549, E09.3559, E09.3599, E10.3219, E10.3299, E10.3319, E10.3399, E10.3419, E10.3499, E10.3519, E10.3529, E10.3549, E10.3559, E10.3599, E11.3219, E11.3299, E11.3319, E11.3399, E11.3419, E11.3499, E11.3519, E11.3529, E11.3539, E11.3549, E11.3599, E13.3219, E13.3299, E13.3319, E13.3399, E13.3419, E13.3499, E13.3519, E13.3529, E13.3539, E13.3549, E13.3559, E13.3599
- Updated Table 1: Deleted ICD-10-CM Codes to Disorders of Visual Cortex: H47.619
- Updated Table 1: Deleted ICD-10-CM Codes to Disseminated Chorioretinitis and Disseminated Retinochoroiditis: A18.54, H30.109, H30.119, H30.129, H30.139, H30.149
- Updated Table 1: Deleted ICD-10-CM Codes to Focal Chorioretinitis and Focal Retinochoroiditis: H30.009, H30.019, H30.029, H30.039, H30.049
- Updated Table 1: Deleted ICD-10-CM Codes to Glaucoma: H40.1190, H40.1191, H40.1191, H40.1193, H40.1194, H40.1290, H40.1291, H40.1292, H40.1293, H40.1294, H40.1390, H40.1391, H40.1392, H40.1393, H40.1394, H40.1490, H40.1491, H40.1492, H40.1493, H40.1494, H40.159, H40.219, H40.2290, H40.2291, H40.2292, H40.2293, H40.2294, H40.239, H40.249, H40.30X0, H40.30X1, H40.30X2, H40.30X3, H40.30X4, H40.40X0, H40.40x1, H40.40X2, H40.40X3, H40.40X4, H40.50X0, H40.50X1, H40.50X2, H40.50X3, H40.50X4, H40.60X0, H40.60X1, H40.60X2, H40.60X3, H40.60X4, H40.819, H40.829, H40.839
- Updated Table 1: Deleted ICD-10-CM Codes to Glaucoma Associated with Congenital Anomalies, Dystrophies, and Systemic Syndromes: H40.30X0, H40.30X1, H40.30X2, H40.30X4, H40.40X0, H40.40X1, H40.40X2, H40.40X3, H40.40X4, H40.50X0, H40.50X1, H40.50X2, H40.50X3, H40.50X4, H40.819, H40.829, H40.839

- Updated Table 1: Deleted ICD-10-CM Codes to Injury to Optic Nerve and Pathways: S04.019A, S04.039A, S04.049A
- Updated Table 1: Deleted ICD-10-CM Codes to Moderate or Severe Impairment, Better Eye, Profound Impairment Lesser Eye: H54.10
- Updated Table 1: Deleted ICD-10-CM Codes to Open Wound of Eyeball: S05.10XA, S05.20XA, S05.30XA, S05.50XA, S05.60XA, S05.70XA, S05.8X9A, S05.90XA
- Updated Table 1: Deleted ICD-10-CM Codes to Optic Atrophy: H47.219, H47.239, H47.299
- Updated Table 1: Deleted ICD-10-CM Codes to Optic Neuritis: H46.00, H46.10
- Updated Table 1: Deleted ICD-10-CM Codes to Other and Unspecified Forms of Chorioretinitis and Retinochoroiditis: H30.20, H30.819, H30.899, H30.90
- Updated Table 1: Deleted ICD-10-CM Codes to Other Background Retinopathy and Retinal Vascular Changes: H35.029, H35.059, H35.069
- Updated Table 1: Deleted ICD-10-CM Codes to Other Corneal Deformities: H18.719, H18.729, H18.799
- Updated Table 1: Deleted ICD-10-CM Codes to Other Disorders of Optic Nerve: H47.019
- Updated Table 1: Deleted ICD-10-CM Codes to Other Disorders of Sclera: H15.839, H15.849
- Updated Table 1: Deleted ICD-10-CM Codes to Other Endophthalmitis: H16.249, H33.129, H44.119, H44.129, H44.139
- Updated Table 1: Deleted ICD-10-CM Codes to Other Proliferative Retinopathy: H35.109, H35.119, H35.129, H35.139, H35.149, H35.159, H35.169, H35.179
- Updated Table 1: Deleted ICD-10-CM Codes to Other Retinal Disorders: H35.60
- Updated Table 1: Deleted ICD-10-CM Codes to Pathologic Myopia: H44.20, H44.2A9, H44.2B9, H44.2C9, H44.2D9
- Updated Table 1: Deleted ICD-10-CM Codes to Prior Penetrating Keratoplasty: H18.609, H18.619, H18.629
- Updated Table 1: Deleted ICD-10-CM Codes to Profound Impairment, Both Eyes: H54.10
- Updated Table 1: Deleted ICD-10-CM Codes to Purulent Endophthalmitis: H44.009, H44.019, H44.029
- Updated Table 1: Deleted ICD-10-CM Codes to Retinal Detachment with Retinal Defect: H33.009, H33.019, H33.029, H33.039, H33.049, H33.059
- Updated Table 1: Deleted ICD-10-CM Codes to Retinal Vascular Occlusion: H34.10, H34.239, H34.8190, H34.8191, H34.8192, H34.8390, H34.8391, H34.8392
- Updated Table 1: Deleted ICD-10-CM Codes to Scleritis and Episcleritis: H15.029, H15.049, H15.059, H15.099

- Updated Table 1: Deleted ICD-10-CM Codes to Separation of Retinal Layers: H35.729, H35.739
- Updated Table 1: Deleted ICD-10-CM Codes to Uveitis: H44.119, H44.139
- Updated Table 1: Deleted ICD-10-CM Codes to Visual Field Defects: H53.419

Quality ID #192: Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures

- Updated Rationale and Copyright
- Updated Table 1: Deleted ICD-10-CM Codes to Acute and Subacute Iridocyclitis: H20.019, H20.029, H20.039, H20.049, H20.059
- Updated Table 1: Deleted ICD-10-CM Codes to Adhesions and Disruptions of Iris and Ciliary Body: H21.40, H21.501, H21.502, H21.503, H21.509, H21.519, H21.529, H21.539, H21.549, H21.559, H21.569
- Updated Table 1: Deleted ICD-10-CM Codes to Aphakia and Other Disorders of Lens: H27.119, H27.129, H27.139
- Updated Table 1: Deleted ICD-10-CM Codes to Burn Confined to Eye and Adnexa: T26.00XA, T26.10XA, T26.20XA, T26.30XA, T26.40XA, T26.50XA, T26.60XA, T26.70XA, T26.80XA, T26.90XA
- Updated Table 1: Deleted ICD-10-CM Codes to Cataract Secondary to Ocular Disorders: H26.219, H26.229
- Updated Table 1: Deleted ICD-10-CM Codes to Central Corneal Ulcer: H16.019
- Updated Table 1: Deleted ICD-10-CM Codes to Certain Types of Iridocyclitis: H20.20, H20.819, H20.829, H40.40X0
- Updated Table 1: Deleted ICD-10-CM Codes to Chronic Iridocyclitis: H20.10
- Updated Table 1: Deleted ICD-10-CM Codes to Cloudy Cornea: H17.00, H17.10, H17.819, H17.829
- Updated Table 1: Deleted ICD-10-CM Codes to Corneal Edema: H18.10, H18.229, H18.239, H18.429
- Updated Table 1: Deleted ICD-10-CM Codes to Corneal Opacity and Other Disorders: H17.00, H17.10
- Updated Table 1: Deleted ICD-10-CM Codes to Cysts of Iris, Ciliary Body, and Anterior Chamber: H21.309, H21.319, H21.329, H21.339, H21.349, H21.359
- Updated Table 1: Deleted ICD-10-CM Codes to Enophthalmos: H05.409, H05.419, H05.429
- Updated Table 1: Deleted ICD-10-CM Codes to Glaucoma: H40.1190, H40.1191, H40.1192, H40.1193, H40.1194, H40.1290, H40.1291, H40.1292, H40.1293, H40.1294, H40.1390, H40.1391, H40.1392, H40.1393, H40.1394, H40.1490, H40.1491, H40.1492, H40.1493, H40.1494, H40.159, H40.219, H40.2290, H40.2291, H40.2292, H40.2293, H40.2294, H40.239, H40.249, H40.30X0, H40.30X1, H40.30X2, H40.30X3, H40.30X4, H40.40X0, H40.40X1, H40.40X2, H40.40X3,

H40.40X4, H40.50X0, H40.50X1, H40.50X2, H40.50X3, H40.50X4, H40.60X0, H40.60X1, H40.60X2, H40.60X3, H40.60X4, H40.819, H40.829, H40.839

- Updated Table 1: Deleted ICD-10-CM Codes to High Hyperopia: H52.00
- Updated Table 1: Deleted ICD-10-CM Codes to Hypotony of Eye: H44.419, H44.429, H44.439, H44.449
- Updated Table 1: Deleted ICD-10-CM Codes to Injury to Optic Nerve and Pathways S04.019A, S04.039A, S04.49A,
- Updated Table 1: Added ICD-10-CM Codes to Margagnian Cataract: H25.21, H25.22, H25.23
- Updated Table 1: Deleted ICD-10-CM Codes to Open Wound of Eyeball: S05.10XA, S05.20XA, S05.30XA, S05.50XA, S05.60XA, S05.70XA, S05.80XA, S05.90XA
- Updated Table 1: Deleted ICD-10-CM Codes to Pathologic Myopia: H44.20, H44.2A9, H44.2B9, H44.2C9, H44.2D9
- Updated Table 1: Deleted ICD-10-CM Codes to Pseudoexfoliation Syndrome: H40.1490, H40.1491, H40.1492, H40.1493, H40.1494
- Updated Table 1: Deleted ICD-10-CM Codes to Retrolental Fibroplasias: H35.179
- Updated Table 1: Deleted Senile Cataract as a Significant Ocular Condition and Associated ICD-10-CM Codes: H25.89
- Updated Table 1: Deleted ICD-10-CM Codes to Traumatic Cataract: H26.109, H26.119, H26.129, H26.139
- Updated Table 1: Deleted ICD-10-CM Codes to Uveitis: H44.119, H44.139
- Updated Table 1: Deleted ICD-10-CM Codes to Vascular Disorders of iris and Ciliary Body: H21.1X9

Quality ID #195: Radiology: Stenosis Measurement in Carotid Imaging Reports

- Added Measure Instructions
- Updated Numerator Instructions
- Deleted Numerator Note

Quality ID #204: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic

- Finalized removal from 2019

Quality ID #205: HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia, Gonorrhea, and Syphilis

- No Significant Changes

Quality ID #217: Functional Status Change for Patients with Knee Impairments

- Updated Measure Description, Measure Instructions (Definitions), Numerator Statement, and Numerator Definitions
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Exclusion: (G9727)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Exclusions: (G9726) and (G9727)
- Added Denominator (Option 3 and 4) Criteria: (M1009)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*²
- Updated Numerator Options: Performance Met (G8647), Performance Met (G8648), Denominator Exception (G8649), and Performance Not Met (G8650)
- Updated to Patient Reported Outcome
- Updated Rationale and Copyright

Quality ID #218: Functional Status Change for Patients with Hip Impairments

- Updated Measure Description, Measure Instructions (Definitions), Numerator Statement and Numerator Definitions
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Exclusion: (G9729)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Exclusions: (G9728) and (G9729)
- Added Denominator (Option 3 and 4) Criteria: (M1010)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*³
- Updated Numerator Options: Performance Met (G8651), Performance Met (G8652), Denominator Exception (G8653), and Performance Not Met (G8654)

² *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

³ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

- Updated to Patient Reported Outcome

- Updated Rationale and Copyright

Quality ID #219: Functional Status Change for Patients with Lower Leg, Foot or Ankle Impairments

- Updated Measure Title, Measure Description, Measure Instructions (Definitions), Numerator Statement, and Numerator Definitions
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Eligible Cases Criteria: Functional Deficit Affecting Lower Leg, Foot or Ankle
- Updated Denominator (Option 1 and 2) Exclusion: (G9731)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Criteria: (M1011)
- Added Denominator (Option 3 and 4) Exclusions: (G9730) and (G9731)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*⁴
- Updated Numerator Options: Performance Met (G8655), Performance Met (G8656), Denominator Exception (G8657), and Performance Not Met (G8658)
- Updated to Patient Reported Outcome
- Updated Rationale and Copyright

⁴ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Quality ID #220: Functional Status Change for Patients with Low Back Impairments

- Updated Measure Title, Measure Type, Measure Description, Measure Instructions (Definitions), Numerator Statement, Numerator Definitions, and Denominator Statement
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Eligible Cases: Functional Deficit Affecting the Low Back Region
- Updated Denominator (Option 1 and 2) Exclusion: (G9733)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Criteria: (M1012)
- Added Denominator (Option 3 and 4) Exclusions: (G9732) and (G9733)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*⁵
- Updated Numerator Options: Performance Met (G8659), Performance Met (G8660), Denominator Exception (G8661), and Performance Not Met (G8662)
- Updated to Patient Reported Outcome
- Updated Rationale and Copyright

⁵ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Quality ID #221: Functional Status Change for Patients with Shoulder Impairments

- Updated Measure Type, Measure Description, Measure Instructions (Definitions), Numerator Statement, Numerator Definitions, and Denominator Statement
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Exclusion: (G9735)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Exclusions: (G9734) and (G9735)
- Added Denominator (Option 3 and 4) Criteria: (M1013)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*⁶
- Updated Numerator Options: Performance Met (G8663), Performance Met (G8664), Denominator Exception (G8665), and Performance Not Met (G8666)
- Updated to Patient Reported Outcome
- Updated Rationale and Copyright

Quality ID #222: Functional Status Change for Patients with Elbow, Wrist or Hand Impairments

- Updated Measure Type, Measure Description, Measure Instructions (Definitions), Numerator Statement, Numerator Definitions, and Denominator Statement
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Exclusion: (G9737)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Exclusions: (G9736) and (G9737)
- Added Denominator (Option 3 and 4) Criteria: (M1014)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*⁷
- Updated Numerator Options: Performance Met (G8667), Performance Met (G8668), Denominator Exception (G8669), and Performance Not Met (G8670)

⁶ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

⁷ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

- Updated to Patient Reported Outcome
- Updated Rationale and Copyright

Quality ID #223: Functional Status Change for Patients with Other General Orthopedic Impairments

- Updated Measure Type, Measure Description, Measure Instructions (Definitions), Numerator Statement, Numerator Definitions, and Denominator Statement
- Added Denominator Note
- Updated Denominator (Option 1 and 2) Exclusion: (G9739)
- Added Denominator (Option 3) Eligible Cases and Denominator Coding, CPT: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
- Added Denominator (Option 3 and 4) Exclusions: (G9738) and (G9739)
- Added Denominator (Option 3 and 4) Criteria: (M1015)
- Added Denominator (Option 4) Eligible Cases and Denominator Coding, CPT: 98940, 98941, 98942, 98943*⁸
- Updated Numerator Options: Denominator Exception (G8673), and Performance Not Met (G8674)
- Updated to Patient Reported Outcome
- Updated Rationale and Copyright

Quality ID #224: Melanoma: Avoidance of Overutilization of Imaging Studies

- Finalized removal for 2019

Quality ID #225: Radiology: Reminder System for Screening Mammograms

- Deleted Denominator Note
- Deleted Denominator Coding, CPT or HCPCS: G0202

Quality ID #226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

- Added Guidance Statement
- Updated Instructions, Numerator Options, and Copyright
- Updated Denominator Submission Criteria Two
- Deleted Denominator Coding, CPT or HCPCS: 96160, 96161

Quality ID #236: Controlling High Blood Pressure

⁸ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

- No Significant Changes

Quality ID #238: Use of High-Risk Medications in the Elderly

- Updated Table 1 (Numerator Submission Criteria 1)
- Updated Table 4 (Numerator Submission Criteria 2)
- Updated Rationale

Quality ID #243: Cardiac Rehabilitation Patient Referral from an Outpatient Setting

- Updated Measure Owner
- Added Denominator Coding, ICD-10-CM: I21.9, I21.A1, I21.A9
- Added Denominator Coding, CPT: 33440
- Updated Clinical Recommendation Statements
- Added High Priority Designation

Quality ID #249: Barrett's Esophagus

- No Significant Changes

Quality ID #250: Radical Prostatectomy Pathology Reporting

- No Significant Changes

Quality ID #251: Quantitative Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients

- Finalized removal for 2019

Quality ID #254: Ultrasound Determination of Pregnancy Location for Pregnant Patients with Abdominal Pain

- Updated Instructions, Denominator Criteria, Clinical Recommendation Statements, and Copyright
- Updated Numerator Options: Performance Met (G8806) and Denominator Exception (G8807)

Quality ID #255: Rh Immunoglobulin (RhoGAM) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure

- Updated Denominator Criteria, Clinical Recommendation Statements, and Copyright

Quality ID #257: Statin Therapy at Discharge after Lower Extremity Bypass (LEB)

- Finalized removal for 2019

Quality ID #258: Rate of Open Repair of Small or Moderate Non-Ruptured Infrarenal Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #7)

- No Significant Changes

Quality ID #259: Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Infrarenal Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post Operative Day #2)

- No Significant Changes

Quality ID #260: Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2)

- No Significant Changes

Quality ID #261: Referral for Otologic Evaluation for Patients with Acute or Chronic Dizziness

- No Significant Changes

Quality ID #262: Image Confirmation of Successful Excision of Image-Localized Breast Lesion

- No Significant Changes

Quality ID #263: Preoperative Diagnosis of Breast Cancer

- Finalized removal for 2019

Quality ID #264: Sentinel Lymph Node Biopsy for Invasive Breast Cancer

- Updated Numerator Option: Denominator Exception (G8880)

Quality ID #265: Biopsy Follow-Up

- Deleted Denominator Coding, CPT: 11100, 63615
- Added Denominator Coding, CPT: 11102, 11104, 11106, 31535, 31536

Quality ID #268: Epilepsy: Counseling for Women of Childbearing Potential with Epilepsy

- Updated Denominator Statement
- Added Numerator Definition and Numerator Instructions
- Added Denominator Criteria: Denominator Exclusion (M1016)
- No Longer NQF Endorsed

Quality ID #271: Inflammatory Bowel Disease (IBD): Preventive Care: Corticosteroid Related Iatrogenic Injury – Bone Loss Assessment

- Added Denominator Coding, CPT: 99241*, 99242*, 99243*, 99244* and 99245*⁹

Quality ID #275: Inflammatory Bowel Disease (IBD): Assessment of Hepatitis B Virus (HBV) Status Before Initiating Anti-TNF (Tumor Necrosis Factor) Therapy

- Added Denominator Coding, CPT: 99241*, 99242*, 99243*, 99244* and 99245*¹⁰

Quality ID #276: Sleep Apnea: Assessment of Sleep Symptoms

- Finalized removal for 2019

Quality ID #277: Sleep Apnea: Severity Assessment at Initial Diagnosis

- Added Denominator Note, Numerator Instructions, and Numerator Note
- Removed Numerator Instructions
- Updated Denominator Criteria

Quality ID #278: Sleep Apnea: Positive Airway Pressure Therapy Prescribed

- Finalized removal for 2019

Quality ID #279: Sleep Apnea: Assessment of Adherence to Positive Airway Pressure Therapy

- No Significant Changes

Quality ID #282: Dementia: Functional Status Assessment

- Added Numerator Definition
- Deleted Denominator Coding, ICD-10-CM: F02, G20
- Deleted Denominator Coding, CPT: 96118, 96119, 96120
- Added Denominator Coding, CPT: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 96153

⁹ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

¹⁰ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Quality ID #283: Dementia Associated Behavioral and Psychiatric Symptoms Screening and Management

- Updated Numerator Statement
- Deleted Denominator Coding, ICD-10-CM: F02, G20
- Deleted Denominator Coding, CPT: 96118, 96119, 96120
- Added Denominator Coding, CPT: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 96153

Quality ID #286: Dementia: Safety Concern Screening and Follow-Up for Patients with Dementia

- Updated Measure Title, Measure Description, Numerator Statement, Denominator Statement, and Numerator Instructions
- Deleted Denominator Coding, ICD-10-CM: F02, G20
- Deleted Denominator Coding, CPT: 96118, 96119, 96120
- Added Denominator Coding, CPT: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146

Quality ID #288: Dementia: Education and Support of Caregivers for Patients with Dementia

- Updated Measure Title, Numerator Statement, and Denominator Statement
- Deleted Denominator Coding, ICD-10-CM: F02, G20
- Deleted Denominator Coding, CPT: 96118, 96119, 96120
- Added Denominator Coding, CPT: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146

Quality ID #290: Parkinson's Disease: Psychiatric Symptoms Assessment for Patients with Parkinson's Disease

- Updated Denominator Statement and Numerator Instructions
- Added Numerator Definitions
- Added Denominator Coding, CPT: 99211

Quality ID #291: Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment

- Updated Title, Denominator Statement, and Denominator Criteria

Quality ID #293: Parkinson's Disease: Rehabilitative Therapy Options

- Updated Denominator Statement

Quality ID #303: Cataracts: Improvement in Patient's Visual Function within 90 Days Following Cataract Surgery

- Updated Instructions
- Added Denominator Coding, CPT: 66982
- Updated to Patient Reported Outcome
- No Longer NQF Endorsed

Quality ID #304: Cataracts: Patient Satisfaction within 90 Days Following Cataract Surgery

- Updated Instructions
- Added Denominator Coding, CPT: 66982
- Updated to Patient Experience from Outcome

Quality ID #317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

- Updated Denominator Statement
- Added Denominator Coding, CPT or HCPCS: 99236, 99315, 99316, 99339, 99340

Quality ID #320: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients

- Updated Copyright

Quality ID #322: Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low Risk Surgery Patients

- No Significant Changes

Quality ID #323: Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing After Percutaneous Coronary Intervention (PCI)

- No Significant Changes

Quality ID #324: Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Testing in Asymptomatic, Low-Risk Patients

- No Significant Changes

Quality ID #325: Adult Major Depressive Disorder (MDD): Coordination of Care of Patients with Specific Comorbid Conditions

- Added Denominator Coding, CPT: 99484, 99492, 99493, 99494

Quality ID #326: Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy

- Updated Measure Owner, Measure Description, and Numerator Statement
- Updated CHA₂DSC₂-VASc Stroke Risk Assessment Criteria

Quality ID #327: Pediatric Kidney Disease: Adequacy of Volume Management

- Finalized removal for 2019

Quality ID #328: Pediatric Kidney Disease: ESRD Patients Receiving Dialysis: Hemoglobin Level < 10g/dL

- Removed Denominator Criteria Telehealth Modifiers: GQ, GT, 95, POS 02

Quality ID #329: Adult Kidney Disease: Catheter Use at Initiation of Hemodialysis

- Removed Denominator Criteria Telehealth Modifiers: GQ, GT, 95, POS 02

Quality ID #330: Adult Kidney Disease: Catheter Use for Greater Than or Equal to 90 Days

- Updated Measure Type
- Removed Denominator Criteria Telehealth Modifiers: GQ, GT, 95, POS 02

Quality ID #331: Adult Sinusitis: Antibiotic Prescribed for Acute Viral Sinusitis (Overuse)

- Added Denominator Coding, ICD-10-CM: J01.81, J01.91
- Added Denominator Coding, CPT: 99339, 99340

Quality ID #332: Adult Sinusitis: Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use)

- Added Denominator Coding, ICD-10-CM: B95, B95.0, B95.1, B95.2, B95.3, B95.4, B95.5, B95.6, B95.61, B95.62, B95.7, B95.8, B96, B96.0, B96.1, B96.2, B96.21, B96.22, B96.23, B96.29, B96.3, B96.4, B96.5, B96.6, B96.7, B96.8, J01.81, J01.91
- Added Denominator Coding, CPT: 99339, 99340

Quality ID #333: Adult Sinusitis: Computerized Tomography (CT) for Acute Sinusitis (Overuse)

- Added Denominator Coding, ICD-10-CM: J01.81, J01.91
- Added Denominator Coding, CPT: 99339, 99340

Quality ID #334: Adult Sinusitis: More than One Computerized Tomography (CT) Scan Within 90 Days for Chronic Sinusitis (Overuse)

- Finalized removal for 2019

Quality ID #335: Maternity Care: Elective Delivery or Early Induction Without Medical Indication at ≥ 37 and < 39 Weeks

- No Significant Changes

Quality ID #336: Maternity Care: Post-Partum Follow-Up and Care Coordination

- No Significant Changes

Quality ID #337: Psoriasis: Tuberculosis (TB) Prevention for Patients with Psoriasis, Psoriatic Arthritis and Rheumatoid Arthritis on a Biological Immune Response Modifier

- Updated Measure Title, Measure Description, Denominator Statement, Numerator Definition, and Denominator Definition
- Added Table of Medications to Denominator Note

Quality ID #338: HIV Viral Load Suppression

- No Significant Changes

Quality ID #340: HIV Medical Visit Frequency

- Updated Denominator Note

Quality ID #342: Pain Brought Under Control Within 48 Hours

- Added Denominator Definition
- Added Denominator Criteria: (M1017)
- Added Denominator Coding, CPT: 99304, 99305, 99306, 99307, 99308, 99309, 99310

Quality ID #343: Screening Colonoscopy Adenoma Detection Rate

- Updated Denominator Criteria and Copyright

Quality ID #344: Rate of Carotid Artery Stenting (CAS) for Asymptomatic Patients, Without Major Complications (Discharged to Home by Post-Operative Day #2)

- No Significant Changes

Quality ID #345: Rate of Asymptomatic Patients Undergoing Carotid Artery Stenting (CAS) Who Are Stroke Free or Discharged Alive

- No Significant Changes

Quality ID #346: Rate of Asymptomatic Patients Undergoing Carotid Endarterectomy (CEA) Who Are Stroke Free or Discharged Alive

- No Significant Changes

Quality ID #347: Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Infrarenal Abdominal Aortic Aneurysms (AAA) Who Are Discharged Alive

- No Significant Changes

Quality ID #348: HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications Rate

- No Significant Changes

Quality ID #350: Total Knee Replacement: Shared Decision-Making: Trial of Conservative (Non-surgical) Therapy

- Updated Clinical Recommendation Statements

Quality ID #351: Total Knee Replacement: Venous Thromboembolic and Cardiovascular Risk Evaluation

- No Significant Changes

Quality ID #352: Total Knee Replacement: Preoperative Antibiotic Infusion with Proximal Tourniquet

- No Significant Changes

Quality ID #353: Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report

- No Significant Changes

Quality ID #354: Anastomotic Leak Intervention

- Updated Instructions

Quality ID #355: Unplanned Reoperation within the 30 Day Postoperative Period

- Updated Instructions
- Deleted Denominator Coding, CPT: 43361, 43855
- Added Denominator Coding, CPT: 15734, 19020, 21557, 21558, 21811, 21812, 21813, 21935, 21936, 23076, 23077, 23078, 24076, 24077, 24079, 25075, 25077, 25078, 27045, 27048, 27049, 27080, 27328, 27329, 27339, 27615, 27616, 27632, 27634, 35221, 35251, 35281, 35840, 36565, 36571, 36576, 37617, 38520, 38531, 38564, 39501, 39560, 43286, 43287, 43288, 45395, 45397, 45400, 45402, 46500, 46700, 46761, 47801, 49084, 49215

Quality ID #356: Unplanned Hospital Readmission within 30 Days of Principal Procedure

- Updated Instructions
- Deleted Denominator Coding, CPT: 19101, 19301, 19302, 19303, 19304, 19305, 19307, 36818, 36819, 36820, 36821, 36825, 36830, 43361, 43855, 47371, 47562, 47563, 49560, 49572, 49585, 49587, 49590, 49652, 49653, 49654, 49655, 49656, 49657, 60210, 60212, 60220, 60225, 60240, 60252, 60260, 60271
- Added Denominator Coding, CPT: 15734, 21811, 21812, 21813, 27080, 35221, 35251, 35281, 35840, 36565, 37617, 38531, 38564, 39501, 39560, 43286, 43287, 43288, 45395, 45397, 45400, 45402, 47801, 49084, 49215

Quality ID #357: Surgical Site Infection (SSI)

- Updated Instructions
- Deleted Denominator Coding, CPT: 43361, 43855
- Added Denominator Coding, CPT: 15734, 19020, 21557, 21558, 21811, 21812, 21813, 21935, 21936, 23076, 23077, 23078, 24076, 24077, 24079, 25075, 25077, 25078, 27045, 27048, 27049, 27080, 27328, 27329, 27339, 27615, 27616, 27632, 27634, 35221, 35251, 35281, 35840, 36565, 36571, 36576, 37617, 38520, 38531, 38564, 39501, 39560, 43286, 43287, 43288, 45395, 45397, 45400, 45402, 46200, 46700, 46761, 47801, 49084, 49215

Quality ID #358: Patient-Centered Surgical Risk Assessment and Communication

- Deleted Denominator Coding, CPT: 15732, 20005, 26117, 27365, 31320, 34800, 34802, 34803, 34804, 34805, 34825, 34900, 37718, 40650, 46762, 51990, 51992, 57288, 57289, 57310, 57311, 57320, 57330, 61332
- Added Denominator Coding, CPT: 15730, 15733, 19294, 20932, 20933, 20934, 28289, 28292, 28295, 28296, 28297, 28298, 28299, 34701, 34703, 34705, 34707, 34709, 34710, 34711, 34712, 34713, 34714, 34715, 34716, 36465, 36466, 36473, 36474, 36476, 36479, 36482, 36483, 38573, 43286, 43287, 43288, 45399, 55874, 58575

Quality ID #359: Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging Description

- Finalized removal for 2019

Quality ID #360: Optimizing Patient Exposure to Ionizing Radiation: Count of Potential High Dose Radiation Imaging Studies: Computed Tomography (CT) and Cardiac Nuclear Medicine Studies

- Deleted Denominator Coding, CPT: 78814, 78815, 78816

Quality ID #361: Optimizing Patient Exposure to Ionizing Radiation: Reporting to a Radiation Dose Index Registry

- No Significant Changes

Quality ID #362: Optimizing Patient Exposure to Ionizing Radiation: Computed Tomography (CT) Images Available for Patient Follow-up and Comparison Purposes

- No Significant Changes

Quality ID #363: Optimizing Patient Exposure to Ionizing Radiation: Search for Prior Computed Tomography (CT) Studies Through a Secure, Authorized, Media-Free, Shared Archive

- Finalized removal for 2019

Quality ID #364: Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines

- Updated Measure Description, Denominator Statement, Denominator Criteria, Numerator Statement, and Clinical Recommendation Statements
- Added Denominator Note and Denominator Definition (Heavy Tobacco Smokers)
- Added Denominator Coding, CPT: 70498, 72125, 72126, 72127, 72128, 72129, 72130 74150, 74160, 74170, 74174, 74175, 74176, 74177, 74178
- Added Denominator Exclusion: (M1018)
- Updated Denominator Exception: (G9755)

Quality ID #370: Depression Remission at Twelve Months

- Updated Measure Description and Instructions
- Added Denominator (Submission Criteria 1) Performance Rates and Definitions
- Updated Denominator (Submission Criteria 1) Note
- Updated Denominator Criteria: (G9511)
- Added Denominator Exclusions (Submission Criteria 1), Numerator (Submission Criteria 1), and Numerator Definition (Submission Criteria 1)
- Added Numerator (Submission Criteria 1) Options: Performance Met (M1019) and Performance Not Met (M1020)
- Updated Denominator (Submission Criteria 2) and Denominator Definitions (Submission Criteria 2)
- Updated Denominator Note (Submission Criteria 2), Submission Criteria Numerator Options: G9509, G9510
- Updated Rationale and Clinical Recommendation Statements

Quality ID #374: Closing the Referral Loop: Receipt of Specialist Report

- Updated Copyright

Quality ID #383: Adherence to Antipsychotic Medications For Individuals with Schizophrenia

- Updated Denominator Note Medications, Rationale, and Clinical Recommendation Statements.
- Added Denominator Coding, CPT or HCPCS: 99241, 99242, 99243, 99244, 99245, 99385, 99386, 99387, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99411, 99412, 99429, 99510, 99252*, 99253*, 99254*¹¹
- Added Denominator Coding, HCPCS: H0017, H0018, H0019, T2048

Quality ID #384: Adult Primary Rhegmatogenous Retinal Detachment Surgery: No Return to the Operating Room Within 90 Days of Surgery

- No Significant Changes

Quality ID #385: Adult Primary Rhegmatogenous Retinal Detachment Surgery: Visual Acuity Improvement Within 90 Days of Surgery

- No Significant Changes

Quality ID #386: Amyotrophic Lateral Sclerosis (ALS) Patient Care Preferences

- Added Denominator Coding, CPT: 99211, 99341, 99342, 99343, 99345, 99348, 99349, 99350

Quality ID #387: Annual Hepatitis C Virus (HCV) Screening for Patients who are Active Injection Drug Users

- No Longer NQF Endorsed
- Updated Clinical Recommendation Statements, and Copyright

Quality ID #388: Cataract Surgery with Intra-Operative Complications (Unplanned Rupture of Posterior Capsule Requiring Unplanned Vitrectomy)

- Updated Instructions

Quality ID #389: Cataract Surgery: Difference Between Planned and Final Refraction

- No Significant Changes

Quality ID #390: Hepatitis C: Discussion and Shared Decision Making Surrounding Treatment Options

- No Significant Changes

¹¹ *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Quality ID #391: Follow-Up After Hospitalization for Mental Illness (FUH)

- Added Denominator Coding (Submission Criteria 1), ICD-10-CM: F32.81, F32.89, F34.81, F34.89, F42.2, F42.3, F42.4, F42.8, F42.9
- Added Denominator Coding (Submission Criteria 2), ICD-10-CM: F32.81, F32.89, F34.81, F34.89, F42.2, F42.3, F42.4
- Deleted Denominator Coding (Submission Criteria 1 and 2), ICD-10-CM: F32.8, F34.8, F42, F53

Quality ID #392: HRS-12: Cardiac Tamponade and/or Pericardiocentesis Following Atrial Fibrillation Ablation

- No Significant Changes

Quality ID #393: HRS-9: Infection within 180 Days of Cardiac Implantable Electronic Device (CIED) Implantation, Replacement, or Revision

- No Significant Changes

Quality ID #394: Immunizations for Adolescents

- No Significant Changes

Quality ID #395: Lung Cancer Reporting (Biopsy/Cytology Specimens)

- Updated Measure Type

Quality ID #396: Lung Cancer Reporting (Resection Specimens)

- Updated Measure Type

Quality ID #397: Melanoma Reporting

- Updated Measure Type, Measure Description, Numerator Statement, Rationale, and Clinical Recommendation Statement
- Added Denominator Instructions
- Updated Numerator Options: Performance Met (G9428), Denominator Exception (G9429), and Numerator Performance Not Met (G9431)

Quality ID #398: Optimal Asthma Control

- Updated Denominator Note
- Added Denominator Note (Submission Criteria 1)
- Deleted Denominator (Submission Criteria 1 and 2) Exclusion: Documentation That Diagnosis was in Error
- Added Denominator Definition (Submission Criteria 1)
- Updated Denominator Criteria (Eligible Cases) 1
- Added Denominator (Eligible Cases 1 and 2) Exclusion: (M1021)
- Updated Numerator (Submission Criteria 1): Component 1
- Added Denominator Definition (Submission Criteria 2)
- Updated Denominator Criteria (Eligible Cases) 2
- Added Denominator Note (Submission Criteria 2)
- Updated Numerator (Submission Criteria 2): Component 1

Quality ID #400: One-Time Screening for Hepatitis C Virus (HCV) for Patients at Risk

- No Longer NQF Endorsed
- Updated Clinical Recommendation Statements and Copyright

Quality ID #401: Hepatitis C: Screening for Hepatocellular Carcinoma (HCC) in Patients with Cirrhosis

- Updated Description
- Updated Numerator Option: Performance Not Met (G9457)

Quality ID #402: Tobacco Use and Help with Quitting Among Adolescents

- No Significant Changes

Quality ID #403: Adult Kidney Disease: Referral to Hospice

- Removed Denominator Criteria Telehealth Modifiers: GQ, GT, 95, POS 02

Quality ID #404: Anesthesiology Smoking Abstinence

- Updated Rationale
- Deleted Denominator Coding, CPT: 64508

Quality ID #405: Appropriate Follow-up Imaging for Incidental Abdominal Lesions

- No Significant Changes

Quality ID #406: Appropriate Follow-up Imaging for Incidental Thyroid Nodules in Patients

- Updated Rationale and Clinical Recommendation Statements

Quality ID #407: Appropriate Treatment of Methicillin-Sensitive Staphylococcus Aureus (MSSA) Bacteremia

- No Significant Changes

Quality ID #408: Opioid Therapy Follow-up Evaluation

- Added Numerator Definition
- Added Denominator Exclusion: (M1022)
- Added High Priority Designation

Quality ID #409: Clinical Outcome Post Endovascular Stroke Treatment

- Deleted Denominator Coding, ICD-10-CM: 163.8
- Added Denominator Coding, ICD-10-CM: 163.81, 163.89

Quality ID #410: Psoriasis: Clinical Response to Systemic Medications

- Updated Title, Measure Instructions, Denominator Statement, Denominator Note, Numerator Instructions, Numerator Note, Rationale, and Copyright
- Updated Denominator Criteria: (G9764)
- Added Examples of Applicable Medications
- Updated Numerator Options: Performance Met (G9649), Denominator Exception (G9765), and Performance Not Met (G9651)

Quality ID #411: Depression Remission at Six Months

- Updated Measure Description, Instructions, Denominator Statement (Submission 1 and 2 Criteria) and Denominator Definitions (Submission Criteria 1)
- Added Denominator Note (Submission Criteria 1), Denominator Exclusions (Submission Criteria 1), Numerator (Submission Criteria 1) and Numerator Definitions (Submission Criteria 1)
- Added Numerator (Submission Criteria 1) Options: Performance Met (M1023) and Performance Not Met (M1024)
- Updated Numerator (Submission Criteria 2) Options: Performance Met (G9573) and Performance Not Met (G9574)
- Updated Denominator Statement (Submission Criteria 2) and Denominator Definitions (Submission Criteria 2)
- Updated Denominator Note (Submission Criteria 2), Rationale and Clinical Recommendation Statements

Quality ID #412: Documentation of Signed Opioid Treatment Agreement

- Added Numerator Definition
- Added Denominator Exclusion: (M1025)
- Added High Priority designation

Quality ID #413: Door to Puncture Time for Endovascular Stroke Treatment

- Deleted Denominator Coding, ICD-10-CM: 163.8
- Added Denominator Coding, ICD-10-CM: 163.81, 163.89

Quality ID #414: Evaluation or Interview for Risk of Opioid Misuse

- Added Denominator Exclusion: (M1026)
- Added High Priority designation

Quality ID #415: Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 18 Years and Older

- Updated Measure Description, Denominator Statement, Numerator Definitions, and Rationale
- Updated Denominator Criteria: (G9530)
- Updated Denominator Criteria: Denominator Exclusion (G9531)
- Added Denominator Coding, CPT: 99291

Quality ID #416: Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 2 Through 17 Years

- Updated Measure Description, Denominator Statement, Denominator Definitions, Numerator, Rationale, and Clinical Recommendation Statements
- Added Denominator Coding, CPT: 99291
- Updated Numerator Option: Denominator Exclusion (G9594)

Quality ID #417: Rate of Open Repair of Small or Moderate Abdominal Aortic Aneurysms (AAA) Where Patients Are Discharged Alive

- No Significant Changes

Quality ID #418: Osteoporosis Management in Women Who Had a Fracture

- Added Denominator Coding (Option 1 Denominator Criteria for Eligible Cases), ICD-10-CM: M80.00XA, M80.011A, M80.012A, M80.019A, M80.021A, M80.022A, M80.029A, M80.031A, M80.032A, M80.039A, M80.041A, M80.042A, M80.049A, M80.051A, M80.052A, M80.059A, M80.061A, M80.062A, M80.069A, M80.071A, M80.072A, M80.079A, M80.08XA, M80.80XA, M80.811A, M80.812A, M80.819A, M80.821A, M80.822A, M80.829A, M80.831A, M80.832A, M80.839A, M80.841A, M80.842A, M80.849A, M80.851A, M80.852A, M80.859A, M80.861A, M80.862A, M80.869A, M80.871A, M80.872A, M80.879A, M80.88XA, M97.01XA, M97.02XA, M97.11XA, M97.12XA, M97.21XA, M97.22XA, M97.31XA, M97.32XA, M97.41XA, M97.42XA
- Added Denominator Coding (Option 2 Denominator Criteria for Eligible Cases), ICD-10-CM: M80, M97
- Updated Denominator (Criteria Option 2) Exclusion: (G9768)

Quality ID #419: Overuse of Imaging for the Evaluation of Primary Headache

- Updated Measure Title, Measure Type, Measure Description, Denominator Statement, Numerator Statement, Rationale, and Clinical Recommendation Statements
- Added Denominator Definitions, Denominator Instructions, Denominator Note, Numerator Instructions, and Numerator Note
- Added Denominator Criteria: M1031
- Deleted Denominator Coding, ICD-10-CM: G43.B0, G43.B1, G43.C0, G43.C1, G44.001, G44.009, G44.011, G44.019, G44.021, G44.029, G44.031, G44.041, G44.049, G44.051, G44.059, G44.091, G44.099, G44.201, G44.211, G44.51, G44.53, G44.83, G44.84, G44.85
- Added Denominator Coding, ICD-10-CM: G43.719, G43.821, G43.829, G43.831, G43.839, R51
- Deleted Denominator Coding, CPT: 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99347, 99348, 99349, 99350
- Added Denominator Coding, CPT: 99211, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239
- Updated Numerator Options: Performance Met (M1027), Denominator Exception (M1028), and Performance Not Met (M1029)
- Updated Numerator Option: Denominator Exception (G9537)

Quality ID #420: Varicose Vein Treatment with Saphenous Ablation: Outcome Survey

- Added Denominator Coding, CPT: 36465, 36482
- Updated to Patient Reported Outcome

Quality ID #421: Appropriate Assessment of Retrievable Inferior Vena Cava (IVC) Filters for Removal

- No Significant Changes

Quality ID #422: Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury

- Updated Copyright

Quality ID #423: Perioperative Anti-platelet Therapy for Patients undergoing Carotid Endarterectomy

- Finalized removal for 2019

Quality ID #424: Perioperative Temperature Management

- Updated Numerator Options: Performance Not Met (G9773) and Denominator Exception (G9772)

Quality ID #425: Photodocumentation of Cecal Intubation

- Updated Measure Description, Numerator Statement, Clinical Recommendation Statements, and Copyright
- Updated Numerator Options: Performance Met (G9612) and Performance Not Met (G9614)

Quality ID #426: Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU)

- Finalized removal for 2019

Quality ID #427: Post-Anesthetic Transfer of Care: Use of Checklist or Protocol for Direct Transfer of Care from Procedure Room to Intensive Care Unit (ICU)

- Finalized removal for 2019

Quality ID #428: Pelvic Organ Prolapse: Preoperative Assessment of Occult Stress Urinary Incontinence

- Updated Copyright

Quality ID #429: Pelvic Organ Prolapse: Preoperative Screening for Uterine Malignancy

- Updated Copyright

Quality ID #430: Prevention of Post-Operative Nausea and Vomiting (PONV) – Combination Therapy

- No Significant Changes

Quality ID #431: Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling

- No Significant Updates

Quality ID #432: Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair

- Updated Measure Description, Numerator Statement, and Instructions
- Updated Numerator Options: Performance Met (G9625) and Performance Not Met (G9627)
- Updated Copyright

Quality ID #433: Proportion of Patients Sustaining a Bowel Injury at the time of any Pelvic Organ Prolapse Repair

- Updated Measure Description and Numerator Statement
- Updated Numerator Options: Performance Met (G9628) and Performance Not Met (G9630)
- Updated Copyright

Quality ID #434: Proportion of Patients Sustaining a Ureter Injury at the Time of any Pelvic Organ Prolapse Repair

- Updated Measure Description and Numerator Statement
- Updated Numerator Options: Performance Met (G9631) and Performance Not Met (G9633)
- Updated Copyright

Quality ID #435: Quality of Life Assessment For Patients With Primary Headache Disorders

- Added Denominator Instructions, Denominator Note, and Numerator Instructions
- Deleted Denominator Coding, ICD-10-CM: G43.B0, G43.B1, G43.C0, G43.Cq, G44.001, G44.011, G44.021, G44.031, G44.041, G44.051, G44.091, G44.201, G44.211
- Added Denominator Coding, ICD-10-CM: G43.601, G43.609, G43.611, G43.619, G43.719, G43.821, G43.829, G43.831, G43.839, G44.82
- Deleted Denominator Coding, CPT: 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99238, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350
- Added Denominator Coding, CPT: 99211, 99241*, 99242*, 99243*, 99244*, 99245*¹²
- Updated to Patient Reported Outcome

Quality ID #436: Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques

- Added Numerator Options: Performance Met (G9637) and Performance Not Met (G9638)

Quality ID #437: Rate of Surgical Conversion from Lower Extremity Endovascular Revascularization Procedure

- No Significant Changes

Quality ID #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

- Reinserted Denominator Coding (Submission Criteria 3), ICD-10-CM: E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359
- Updated Measure Description

Quality ID #439: Age Appropriate Screening Colonoscopy

- Updated Copyright

¹² *Signifies that this CPT Category I Code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Quality ID #440: Basal Cell Carcinoma (BCC)/Squamous Cell Carcinoma (SCC): Biopsy Reporting Time – Pathologist to Clinician

- Updated Instructions Note
- Deleted Denominator Coding, ICD-10-CM: C44.112, C44.1191, C44.122, C44.129, D04.11, D04.12
- Added Denominator Coding, ICD-10-CM: C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, D04.111, D04.112, D04.121, D04.122

Quality ID #441: Ischemic Vascular Disease (IVD) All or None Outcome Measure (Optimal Control)

- Updated Measure Submission Criteria, Measure Description, and Numerator Statement
- Deleted Denominator (Submission Criteria 1) Coding, ICD-10-CM: 121.A, 163.52, 163.53, 163.8, 170.2
- Added Denominator (Submission Criteria 1) Coding, ICD-10-CM: 121.9, 163.81, 163.89
- Deleted Denominator (Submission Criteria 2) Coding, ICD-10-CM: 121.A
- Added Denominator (Submission Criteria 2) Coding, ICD-10-CM: 121.9
- Added Denominator (Submission Criteria 1 and 2) Coding, CPT: 99491
- Updated Denominator (Eligible Cases 2) Criteria: (G9787)
- Added Denominator (Eligible Cases 1 and 2) Exclusion: (G9690)

Quality ID #442: Persistence of Beta-Blocker Treatment After a Heart Attack

- Updated Denominator Table PBH-D and Numerator Statement
- Updated Numerator Options: Performance Met (G9803) and Performance Not Met (G9804)
- Added Numerator Note

Quality ID #443: Non-Recommended Cervical Cancer Screening in Adolescent Females

- No Significant Changes

Quality ID #444: Medication Management for People with Asthma

- Updated Numerator Asthma Controller Medications
- No Longer NQF Endorsed

Quality ID #445: Risk-Adjusted Operative Mortality for Coronary Artery Bypass Graft (CABG)

- No Significant Changes

Quality ID #446: Operative Mortality Stratified by the Five STS-EACTS Mortality Categories

- Deleted Denominator (Submission Criteria 1 and 2) Coding, ICD-10-CM: Q25.2, Q25.4
- Added Denominator (Submission Criteria 1 and 2) Coding, ICD-10-CM: Q25.21, Q25.29, Q25.40, Q25.41, Q25.42, Q25.43, Q25.44, Q25.45, Q25.46, Q25.47, Q25.48, Q25.49
- Added Denominator (Submission Criteria 1 and 2) Coding, CPT: 33440, 33886

Quality ID #447: Chlamydia Screening and Follow Up

- Finalized removal for 2019

Quality ID #448: Appropriate Workup Prior to Endometrial Ablation

- No Longer NQF Endorsed

Quality ID #449: HER2 Negative or Undocumented Breast Cancer Patients Spared Treatment with HER2-Targeted Therapies

- Updated Measure Description

Quality ID #450: Trastuzumab Received By Patients With AJCC Stage I (T1c) – III And HER2 Positive Breast Cancer Receiving Adjuvant Chemotherapy

- No Significant Changes

Quality ID #451: RAS (KRAS and NRAS) Gene Mutation Testing Performed for Patients with Metastatic Colorectal Cancer who receive Anti-epidermal Growth Factor Receptor (EGFR) Monoclonal Antibody Therapy

- No Significant Changes

Quality ID #452: Patients with Metastatic Colorectal Cancer and RAS (KRAS or NRAS) Gene Mutation Spared Treatment with Anti-epidermal Growth Factor Receptor (EGFR) Monoclonal Antibodies

- Updated Measure Title

Quality ID #453: Percentage of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life (lower score – better)

- Updated Measure Title and Measure Description
- Added Denominator Coding, ICD-10-CM: C16.9, C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
- Deleted Denominator Coding, ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.1191, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12

Quality ID #454: Percentage of Patients who Died from Cancer with More than One Emergency Department Visit in the Last 30 Days of Life (lower score – better)

- Updated Measure Title
- Added Denominator Coding, ICD-10-CM: C16.9, C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
- Deleted Denominator Coding, ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.1191, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12
- No Longer NQF Endorsed

Quality ID #455: Percentage of Patients Who Died from Cancer Admitted to the Intensive Care Unit (ICU) in the Last 30 Days of Life (lower score – better)

- Updated Measure Title and Measure Description
- Added Denominator Coding, ICD-10-CM: C16.9, C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
- Deleted Denominator Coding, ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.1191, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12

QualityID #456: Percentage of Patients Who Died from Cancer Not Admitted To Hospice (lower score – better)

- Updated Measure Title
- Added Denominator Coding, ICD-10-CM: C16.9, C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
- Deleted Denominator Coding, ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.1191, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12

Quality ID #457: Percentage of Patients Who Died from Cancer Admitted to Hospice for Less than 3 days (lower score – better)

- Updated Measure Title and Measure Description
- Added Denominator Coding, ICD-10-CM: C16.9, C43.111, C43.112, C43.121, C43.122, C44.1021, C44.1022, C44.1091, C44.1092, C44.1121, C44.1122, C44.1191, C44.1192, C44.1221, C44.1222, C44.1291, C44.1292, C44.1921, C44.1922, C44.1991, C44.1992, C4A.111, C4A.112, C4A.121, C4A.122
- Deleted Denominator Coding, ICD-10-CM: C43.11, C43.12, C44.102, C44.109, C44.112, C44.1191, C44.122, C44.129, C44.192, C44.199, C4A.11, C4A.12

Quality ID #459: Average Change in Back Pain following Lumbar Discectomy / Laminotomy

- Updated Instructions, Instructions Note, Measure Submission Criteria, Numerator Definitions (Submission Criteria 1) and Numerator Note (Submission Criteria 1)
- Updated Denominator Definitions (Submission Criteria 2)
- Updated Rationale and Measure Tool
- Updated to Patient Reported Outcome

Quality ID #460: Average Change in Back Pain following Lumbar Fusion

- Updated Instructions and Measure Submission Criteria
- Updated Submission Criteria 1 Description
- Updated Numerator (Submission Criteria 1) Definitions
- Updated Numerator (Submission Criteria 1) Numerator Note
- Added Visual Analog Pain Scale to Numerator (Submission Criteria 1)
- Updated Submission Criteria 2 Description
- Updated Denominator (Submission Criteria 2) Statement and Definitions
- Removed Visual Analog Pain Scale from Denominator (Submission Criteria 2)
- Updated Numerator Statement (Submission Criteria 2)
- Updated Rationale and Clinical Recommendation Statements
- Added Measure Tool
- Updated to Patient Reported Outcome

Quality ID #461: Average Change in Leg Pain Following Lumbar Discectomy and/or Laminotomy

- Updated Instructions, Instructions Note and Measure Submission Criteria
- Updated Numerator Definitions (Submission Criteria 1) and Numerator Note (Submission Criteria 1)
- Updated Denominator Definitions (Submission Criteria 2), Rationale and Measure Tool
- Updated to Patient Reported Outcome

Quality ID #463: Prevention of Post-Operative Vomiting (POV) - Combination Therapy (Pediatrics)

- Added High Priority Designation

Quality ID #464: Otitis Media with Effusion (OME): Systemic Antimicrobials- Avoidance of Inappropriate Use

- No Significant Changes

Quality ID #465: Uterine Artery Embolization Technique: Documentation of Angiographic Endpoints and Interrogation of Ovarian Arteries

- No Significant Changes

Quality ID #467: Developmental Screening in the First Three Years of Life

- Updated Instructions, Submission Criteria, and Copyright
- Deleted Instructions Note
- No Longer NQF Endorsed

Quality ID #468: Continuity of Pharmacotherapy for Opioid Use Disorder

- New Measure

Quality ID #469: Average Change in Functional Status Following Lumbar Spine Fusion Surgery

- New Measure

Quality ID #470: Average Change in Functional Status Following Total Knee Replacement Surgery

- New Measure

Quality ID #471: Average Change in Functional Status Following Lumbar Discectomy Laminotomy Surgery

- New Measure

Quality ID #473: Average Change in Leg Pain Following Lumbar Spine Fusion Surgery

- New Measure

Quality ID #474: Zoster (Shingles) Vaccination

- New Measure