

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

2026 COLLECTION TYPE:

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS) CLINICAL QUALITY MEASURE (CQM)

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of patients in whom a retrievable IVC filter is placed who, within 3 months post-placement, have a documented assessment for the appropriateness of continued filtration, device removal, or the inability to contact the patient with at least two attempts.

INSTRUCTIONS:

Reporting Frequency:

This measure is to be submitted each time a denominator eligible procedure as defined in the denominator criteria is performed.

Intent and Clinician Applicability:

This measure is intended to reflect the quality of services provided for patients who have undergone an IVC filter procedure. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions as defined by the numerator based on the services provided and the measure-specific denominator coding.

Measure Strata and Performance Rates:

This measure contains one strata defined by a single submission criteria.

This measure produces a single performance rate.

Implementation Considerations:

For the purposes of MIPS implementation, this procedure measure is submitted each time a procedure is performed during the performance period. There is no diagnosis associated with this measure.

Include only patients that have IVC filter placement through September 30 of the performance period. This will allow the evaluation of at least 90 days of IVC filter removal within the performance period.

Telehealth:

NOT TELEHEALTH ELIGIBLE: This measure is not appropriate for nor applicable to the telehealth setting. This measure is procedure based and therefore doesn't allow for the denominator criteria to be conducted via telehealth. It would be appropriate to remove these patients from the denominator eligible patient population. Telehealth eligibility is at the measure level for inclusion within the denominator eligible patient population and based on the measure specification definitions which are independent of changes to coding and/or billing practices.

Measure Submission:

The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this collection type for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. The coding provided to identify the measure criteria: Denominator or Numerator, may be an example of coding that could be used to identify patients that meet the intent of this clinical topic. When implementing this measure, please refer to the 'Reference Coding' section to determine if other codes or code languages that meet the intent of the criteria may also be used within the medical record to identify and/or assess patients. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:

All patients who have a retrievable IVC filter placed with the intent for potential removal at time of placement.

Denominator Criteria (Eligible Cases):

All patients, regardless of age

AND

Patient procedure during the performance period (CPT): 37191

AND

Intent for Potential Removal at Time of Placement: G9539

AND

Patient alive 3 Months Post Procedure: G9540

NUMERATOR:

Number of patients that have appropriate IVC filter follow-up.

Definition:

Appropriate IVC Filter follow-up – For the purposes of this measure, the appropriate follow-up would include:

1. Filter removed OR;
2. Documentation of re-assessment for the appropriateness of filter removal OR;
3. Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal

NUMERATOR NOTE:

The procedure for removal of an intravascular filter from the vena cava (CPT 37193) within three months would be considered performance met.

Numerator Options:

Performance Met:

Filter removed within 3 months of placement (G9541)

OR

Performance Met:

Documented re-assessment for the appropriateness of filter removal within 3 months of placement (G9542)

OR

Performance Met:

Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement (G9543)

OR

Performance Not Met:

Patients that do not have the filter removed, documented re-assessment for the appropriateness of filter removal, or documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement (G9544)

RATIONALE:

There is a need for increased physician awareness of the potential harms of inappropriate continued inferior vena cava filtration in patients with retrievable filters. Patients with retrievable inferior filters need to be carefully followed for re-assessment of the clinical need for continued inferior vena cava filtration, leading to removal of such devices when clinically appropriate. Complexities of our healthcare system, notably the use of inferior vena cava filters in the in-patient setting, followed by transfer of care to physicians in the outpatient setting highlight the importance of patient follow-up for physicians placing retrievable inferior vena cava filters.

CLINICAL RECOMMENDATION STATEMENTS:

Retrievable filter complications have been increasingly noted in the FDA MAUDE database and in the literature. Retrievable filters were designed differently than permanent filters and the incidence of device related complications with long term insertions are higher than in comparison to permanent filters. The FDA has recommended that physicians that place these filters carefully monitor these patients and remove these filters at the earliest possible time. Dedicated follow-up for IVC filters has led to an increase in retrieval rate. The FDA recommends that all physicians placing IVC Filters and those responsible for ongoing care of these patients remove the filter as soon as protection from pulmonary embolism is no longer needed. The FDA encourages follow-up on patients to consider risks and benefits of filter removal (1).

REFERENCES:

1. U.S. Food and Drug Administration. Removing retrievable inferior vena cava filters: FDA safety communication. 2014. Accessed November 2025. <https://acrobat.adobe.com/id/urn:aaid:sc:VA6C2:78d21d7d-2cab-401a-b71b-93ebd46ce9e6>
(FDA safety alert recommending timely reassessment and retrieval when clinically appropriate.)

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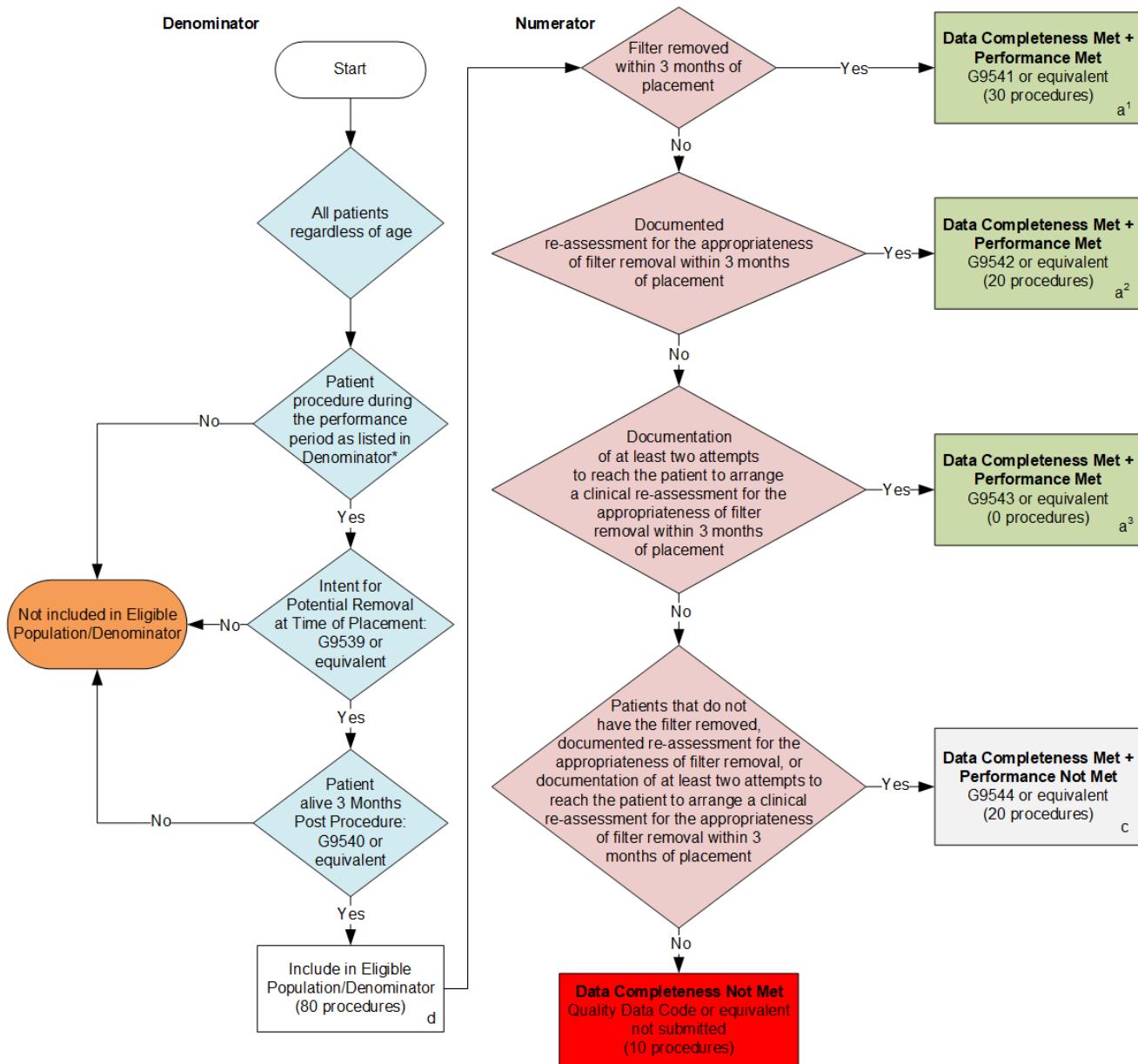
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2026 Clinical Quality Measure Flow for Quality ID #421: Appropriate Assessment of Retrievable Inferior Vena Cava (IVC) Filters for Removal

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



SAMPLE CALCULATIONS

Data Completeness=

$$\frac{\text{Performance Met (a}^1+\text{a}^2+\text{a}^3=50 \text{ procedures)} + \text{Performance Not Met (c=20 procedures)}}{\text{Eligible Population / Denominator (d=80 procedures)}} = \frac{70 \text{ procedures}}{80 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a}^1+\text{a}^2+\text{a}^3=50 \text{ procedures)}}{\text{Data Completeness Numerator (70 procedures)}} = \frac{50 \text{ procedures}}{70 \text{ procedures}} = 71.43\%$$

*See the posted measure specification for specific coding and instructions to submit this measure.

Note: Submission Frequency: Procedure

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The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

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2026 Clinical Quality Measure Flow Narrative for Quality ID #421: Appropriate Assessment of Retrievable Inferior Vena Cava (IVC) Filters for Removal

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator
2. Check *All patients regardless of age*.
3. Check *Patient procedure during the performance period as listed in Denominator**:
 - a. If *Patient procedure during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient procedure during the performance period as listed in Denominator** equals Yes, proceed to check *Intent for Potential Removal at Time of Placement*.
4. Check *Intent for Potential Removal at Time of Placement*:
 - a. If *Intent for Potential Removal at Time of Placement* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Intent for Potential Removal at Time of Placement* equals Yes, proceed to check *Patient alive 3 Months Post Procedure*.
5. Check *Patient alive 3 Months Post Procedure*:
 - a. If *Patient alive 3 Months Post Procedure* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient alive 3 Months Post Procedure* equals Yes, include in *Eligible Population/Denominator*.
6. Denominator Population:
 - Denominator Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 procedures in the Sample Calculation.
7. Start Numerator
8. Check *Filter removed within 3 months of placement*:
 - a. If *Filter removed within 3 months of placement* equals Yes, include in *Data Completeness Met and Performance Met*.
 - *Data Completeness Met and Performance Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a¹ equals 30 procedures in the Sample Calculation.
 - b. If *Filter removed within 3 months of placement* equals No, proceed to check *Documented re-assessment for the appropriateness of filter removal within 3 months of placement*.
9. Check *Documented re-assessment for the appropriateness of filter removal within 3 months of placement*:
 - a. If *Documented re-assessment for the appropriateness of filter removal within 3 months of placement* equals Yes, include in *Data Completeness Met and Performance Met*.

- *Data Completeness Met and Performance Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a² equals 20 procedures in the Sample Calculation.

b. If *Documented re-assessment for the appropriateness of filter removal within 3 months of placement* equals No, proceed to check *Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement*.

10. Check *Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement*:

- a. If *Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement* equals Yes, include in *Data Completeness Met and Performance Met*.
 - *Data Completeness Met and Performance Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a³ equals 0 procedures in the Sample Calculation.
- b. If *Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement* equals No, proceed to check *Patients that do not have the filter removed, documented re-assessment for the appropriateness of filter removal, or documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement*.

11. Check *Patients that do not have the filter removed, documented re-assessment for the appropriateness of filter removal, or documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement*:

- a. If *Patients that do not have the filter removed, documented re-assessment for the appropriateness of filter removal, or documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement* equals Yes, include in *Data Completeness Met and Performance Not Met*.
 - *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 procedures in the Sample Calculation.
- b. If *Patients that do not have the filter removed, documented re-assessment for the appropriateness of filter removal, or documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement* equals No, proceed to check *Data Completeness Not Met*.

12. Check *Data Completeness Not Met*:

- If *Data Completeness Not Met*, the Quality Data Code or equivalent was not submitted. 10 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

Sample Calculations

Data Completeness equals Performance Met (a¹ plus a² plus a³ equals 50 procedures) plus Performance Not Met (c equals 20 procedures) divided by Eligible Population / Denominator (d equals 80 procedures). All equals 70 procedures divided by 80 procedures. All equals 87.50 percent.

Performance Rate equals Performance Met (a^1 plus a^2 plus a^3 equals 50 procedures) divided by Data Completeness Numerator (70 procedures). All equals 50 procedures divided by 70 procedures. All equals 71.43 percent.

*See the posted measure specification for specific coding and instructions to submit this measure.

Note: Submission Frequency: Procedure

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.