Quality Payment

Telehealth Guidance for Medicare Part B Claims and MIPS Clinical Quality Measure (CQMs) for 2020 Quality Reporting

Purpose:

This resource provides MIPS eligible clinicians, groups, and virtual groups a list of quality measures that currently include telehealth for the 2020 performance period. Quality measures that do not include telehealth (i.e. biopsy, radiation treatment, etc.) are not included in the listing. For example, Q019: Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care requires a macular or fundus exam in order to be denominator eligible. Since this exam cannot be performed during a telehealth visit this measure was excluded from this list.

When reviewing this list of quality measures, please note there may be instances where the quality action cannot be completed during the telehealth encounter by MIPS eligible clinicians, groups, and virtual groups. Specifically, telehealth eligible Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes may be included within the measure denominator, where the required quality action in the numerator cannot be completed via telehealth. For example, Q111: Pneumococcal Vaccination Status for Older Adults may require the administration of the pneumococcal vaccination at the denominator eligible encounter in order to meet performance for the measure. Therefore, it is the MIPS eligible clinicians, groups, and virtual groups' responsibility to make sure they can meet all other aspects of the quality action within the measure specification, including other quality actions that cannot be completed by telehealth.

For telehealth guidance related to electronic clinical quality measures (eCQMs), please refer to the <u>Electronic Clinical Quality Improvement (eCQI) Resource Center</u> for additional information on eCQM tools and resources. For MIPS eligible clinicians submitting measures via the CMS Web Interface as a group or virtual group, please refer to CMS Web Interface measure specifications and supporting documentation for specific information regarding the use of telehealth within this collection type. This information may be located by visiting the <u>QPP</u> Resource Library.



NQF Number	Quality Number	Collection Type	Measure Type	National Quality Strategy Domain	Measure Title and Description	Measure Steward
0059	001	Medicare Part B Claims, MIPS CQM	Immediate Outcome	Effective Clinical Care	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%): Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.	National Committee for Quality Assurance
N/A	024	Medicare Part B Claims, MIPS CQM	Process	Communication and Care Coordination	Communication with the Physician or Other Clinician Managing On-Going Care Post-Fracture for Men and Women Aged 50 Years and Older: Percentage of patients aged 50 years and older treated for a fracture with documentation of communication, between the physician treating the fracture and the physician or other clinician managing the patient's ongoing care, that a fracture occurred and that the patient was or should be considered for osteoporosis treatment or testing. This measure is submitted by the physician who treats the fracture and who therefore is held accountable for the communication.	National Committee for Quality Assurance
0046	039	Medicare Part B Claims, MIPS CQM	Process	Effective Clinical Care	Screening for Osteoporosis for Women Aged 65-85 Years of Age: Percentage of female patients aged 65-85 years of age who ever had a central dual-energy X-ray absorptiometry (DXA) to check for osteoporosis.	National Committee for Quality Assurance
0326	047	Medicare Part B Claims, MIPS CQM	Process	Communication and Care Coordination	Advance Care Plan: Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.	National Committee for Quality Assurance

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N/A	048	Medicare Part B Claims, MIPS CQM	Process	Effective Clinical Care	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older: Percentage of female patients aged 65 years and older who were assessed for the presence or absence of urinary incontinence within 12 months.	National Committee for Quality Assurance
N/A	050	Medicare Part B Claims, MIPS CQM	Process	Person and Caregiver- Centered Experience and Outcomes	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older: Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence with a documented plan of care for urinary incontinence at least once within 12 months.	National Committee for Quality Assurance
0069	065	MIPS CQM	Process	Efficiency and Cost Reduction	Appropriate Treatment for Children with Upper Respiratory Infection (URI): Percentage of children 3 months - 18 years of age who were diagnosed with upper respiratory infection (URI) and were not dispensed an antibiotic prescription on or three days after the episode.	National Committee for Quality Assurance
N/A	066	MIPS CQM	Process	Efficiency and Cost Reduction	Appropriate Testing for Children with Pharyngitis: Percentage of children 3-18 years of age who were diagnosed with pharyngitis, ordered an antibiotic and received a group A streptococcus (strep) test for the episode.	National Committee for Quality Assurance
N/A	111	Medicare Part B Claims, MIPS CQM	Process	Community/Pop ulation Health	Pneumococcal Vaccination Status for Older Adults: Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	National Committee for Quality Assurance
2372	112	Medicare Part B Claims, MIPS CQM	Process	Effective Clinical Care	Breast Cancer Screening: Percentage of women 50 - 74 years of age who had a mammogram to screen for breast cancer in the 27 months prior to the end of the measurement period.	National Committee for Quality Assurance
0034	113	Medicare Part B Claims, MIPS CQM	Process	Effective Clinical Care	Colorectal Cancer Screening: Percentage of patients 50-75 years of age who had appropriate screening for colorectal cancer.	National Committee for Quality Assurance

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0058	116	MIPS CQM	Process	Efficiency and Cost Reduction	Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis: The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not prescribed or dispensed an antibiotic prescription.	National Committee for Quality Assurance
0055	117	Medicare Part B Claims, MIPS CQM	Process	Effective Clinical Care	Diabetes: Eye Exam: Percentage of patients 18-75 years of age with diabetes and an active diagnosis of retinopathy overlapping the measurement period who had a retinal or dilated eye exam by an eye care professional during the measurement period or diabetics with no diagnosis of retinopathy overlapping the measurement period who had a retinal or dilated eye exam by an eye care professional during the measurement period or in the 12 months prior to the measurement period.	National Committee for Quality Assurance
0062	119	MIPS CQM	Process	Effective Clinical Care	Diabetes: Medical Attention for Nephropathy: The percentage of patients 18-75 years of age with diabetes who had a nephropathy screening test or evidence of nephropathy during the measurement period.	National Committee for Quality Assurance
0419	130	Medicare Part B Claims, MIPS CQM	Process	Patient Safety	Documentation of Current Medications in the Medical Record: Percentage of visits for patients aged 18 years and older for which the MIPS eligible clinician attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over- the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration.	Centers for Medicare & Medicaid Services

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0418	134	Medicare Part B Claims, MIPS CQM	Process	Community/ Population Health	Preventive Care and Screening: Screening for Depression and Follow-Up Plan: Percentage of patients aged 12 years and older screened for depression on the date of the encounter or 14 days prior to the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the eligible encounter.	Centers for Medicare & Medicaid Services
0101	154	Medicare Part B Claims, MIPS CQM	Process	Patient Safety	Falls: Risk Assessment: Percentage of patients aged 65 years and older with a history of falls that had a risk assessment for falls completed within 12 months.	National Committee for Quality Assurance
0101	155	Medicare Part B Claims, MIPS CQM	Process	Communication and Care Coordination	Falls: Plan of Care: Percentage of patients aged 65 years and older with a history of falls that had a plan of care for falls documented within 12 months.	National Committee for Quality Assurance
2624	182	Medicare Part B Claims, MIPS CQM	Process	Communication and Care Coordination	Functional Outcome Assessment: Percentage of visits for patients aged 18 years and older with documentation of a current functional outcome assessment using a standardized functional outcome assessment tool on the date of the encounter AND documentation of a care plan based on identified functional outcome deficiencies on the date of the identified deficiencies.	Centers for Medicare & Medicaid Services
0409	205	MIPS CQM	Process	Effective Clinical Care	HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia, Gonorrhea, and Syphilis: Percentage of patients aged 13 years and older with a diagnosis of HIV/AIDS for whom chlamydia, gonorrhea, and syphilis screenings were performed at least once since the diagnosis of HIV infection.	Health Resources and Services Administration

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0422	217	MIPS CQM	Patient Reported Outcome	Communication and Care Coordination	Functional Status Change for Patients with Knee Impairments: A patient-reported outcome measure of risk-adjusted change in functional status for patients aged 14 years+ with knee impairments. The change in functional status (FS) is assessed using the Knee FS patient-reported outcome measure (PROM) (©2009-2019 Focus on Therapeutic Outcomes, Inc.). The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality. The measure is available as a computer adaptive test, for reduced patient burden, or a short form (static measure).	Focus on Therapeutic Outcomes, Inc.
0423	218	MIPS CQM	Patient Reported Outcome	Communication and Care Coordination	Functional Status Change for Patients with Hip Impairments: A patient-reported outcome measure of risk-adjusted change in functional status for patients 14 years+ with hip impairments. The change in functional status (FS) is assessed using the Hip FS patient-reported outcome measure (PROM) (©2009-2019 Focus on Therapeutic Outcomes, Inc.). The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality. The measure is available as a computer adaptive test, for reduced patient burden, or a short form (static measure).	Focus on Therapeutic Outcomes, Inc.

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0424	219	MIPS CQM	Patient Reported Outcome	Communication and Care Coordination	Functional Status Change for Patients with Lower Leg, Foot or Ankle Impairments: A patient-reported outcome measure of risk-adjusted change in functional status for patients 14 years+ with foot, ankle and lower leg impairments. The change in functional status (FS) assessed using the Foot/Ankle FS patient-reported outcome measure (PROM) (©2009-2019 Focus on Therapeutic Outcomes, Inc.). The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality. The measure is available as a computer adaptive test, for reduced patient burden, or a short form (static measure).	Focus on Therapeutic Outcomes, Inc.
0425	220	MIPS CQM	Patient Reported Outcome	Communication and Care Coordination	Functional Status Change for Patients with Low Back Impairments: A patient-reported outcome measure of risk-adjusted change in functional status for patients 14 years+ with low back impairments. The change in functional status (FS) is assessed using the Low Back FS patient-reported outcome measure (PROM) (©2009-2019 Focus on Therapeutic Outcomes, Inc.). The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level by to assess quality. The measure is available as a computer adaptive test, for reduced patient burden, or a short form (static measure).	Focus on Therapeutic Outcomes, Inc.

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0426	221	MIPS CQM	Patient Reported Outcome	Communication and Care Coordination	Functional Status Change for Patients with Shoulder Impairments: A patient-reported outcome measure of risk-adjusted change in functional status for patients 14 years+ with shoulder impairments. The change in functional status (FS) is assessed using the Shoulder FS patient-reported outcome measure (PROM) (©2009-2019 Focus on Therapeutic Outcomes, Inc.).The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality. The measure is available as a computer adaptive test, for reduced patient burden, or a short form (static measure).	Focus on Therapeutic Outcomes, Inc.
0427	222	MIPS CQM	Patient Reported Outcome	Communication and Care Coordination	Functional Status Change for Patients with Elbow, Wrist or Hand Impairments: A patient-reported outcome measure of risk-adjusted change in functional status (FS) for patients 14 years+ with elbow, wrist or hand impairments. The change in FS is assessed using the Elbow/Wrist/Hand FS patient-reported outcome measure (PROM) (©2009-2019 Focus on Therapeutic Outcomes, Inc.) The measure is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality. The measure is available as a computer adaptive test, for reduced patient burden, or a short form (static measure).	Focus on Therapeutic Outcomes, Inc.

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0018	236	Medicare Part B Claims, MIPS CQM	Intermedia te Outcome	Effective Clinical Care	Controlling High Blood Pressure: Percentage of patients 18 - 85 years of age who had a diagnosis of hypertension overlapping the measurement period and whose most recent blood pressure was adequately controlled (< 140/90mmHg) during the measurement period.	National Committee for Quality Assurance
0022	238	MIPS CQM	Process	Patient Safety	Use of High-Risk Medications in the Elderly: Percentage of patients 65 years of age and older who were ordered high-risk medications. Two rates are submitted. 1) Percentage of patients who were ordered at least one high-risk medication. 2) Percentage of patients who were ordered at least two of the same high-risk medications.	National Committee for Quality Assurance
N/A	275	MIPS CQM	Process	Effective Clinical Care	Inflammatory Bowel Disease (IBD): Assessment of Hepatitis B Virus (HBV) Status Before Initiating Anti- TNF (Tumor Necrosis Factor) Therapy: Percentage of patients with a diagnosis of inflammatory bowel disease (IBD) who had Hepatitis B Virus (HBV) status assessed and results interpreted prior to initiating anti-TNF (tumor necrosis factor) therapy.	American Gastroenterolo gical Association
2082	338	MIPS CQM	Outcome	Effective Clinical Care	HIV Viral Load Suppression: The percentage of patients, regardless of age, with a diagnosis of HIV with a HIV viral load less than 200 copies/mL at last HIV viral load test during the measurement year.	Health Resources and Services Administration
2079	340	MIPS CQM	Process	Efficiency and Cost Reduction	HIV Medical Visit Frequency: Percentage of patients, regardless of age with a diagnosis of HIV who had at least one medical visit in each 6 month period of the 24 month measurement period, with a minimum of 60 days between medical visits	Health Resources and Services Administration

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0710	370	MIPS CQM	Outcome	Effective Clinical Care	Depression Remission at Twelve Months: The percentage of adolescent patients 12 to 17 years of age and adult patients 18 years of age or older with major depression or dysthymia who reached remission 12 months (+/- 60 days) after an index event date.	Minnesota Community Measurement
1879	383	MIPS CQM	Intermedia te Outcome	Patient Safety	Adherence to Antipsychotic Medications For Individuals with Schizophrenia: Percentage of individuals at least 18 years of age as of the beginning of the measurement period with schizophrenia or schizoaffective disorder who had at least two prescriptions filled for any antipsychotic medication and who had a Proportion of Days Covered (PDC) of at least 0.8 for antipsychotic medications during the measurement period (12 consecutive months).	Centers for Medicare & Medicaid Services
N/A	390	MIPS CQM	Process	Person and Caregiver- Centered Experience and Outcomes	Hepatitis C: Discussion and Shared Decision Making Surrounding Treatment Options: Percentage of patients aged 18 years and older with a diagnosis of hepatitis C with whom a physician or other qualified healthcare professional reviewed the range of treatment options appropriate to their genotype and demonstrated a shared decision making approach with the patient. To meet the measure, there must be documentation in the patient record of a discussion between the physician or other qualified healthcare professional and the patient that includes all of the following: treatment choices appropriate to genotype, risks and benefits, evidence of effectiveness, and patient preferences toward treatment.	American Gastroenterolo gical Association
1407	394	MIPS CQM	Process	Community/ Population Health	Immunizations for Adolescents: The percentage of adolescents 13 years of age who had the recommended immunizations by their 13th birthday.	National Committee for Quality Assurance

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N/A	398	MIPS CQM	Outcome	Effective Clinical Care	Optimal Asthma Control: Composite measure of the percentage of pediatric and adult patients whose asthma is well-controlled as demonstrated by one of three age appropriate patient reported outcome tools and not at risk for exacerbation.	Minnesota Community Measurement
N/A	401	MIPS CQM	Process	Effective Clinical Care	Hepatitis C: Screening for Hepatocellular Carcinoma (HCC) in Patients with Cirrhosis: Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C cirrhosis who underwent imaging with either ultrasound, contrast enhanced CT or MRI for hepatocellular carcinoma (HCC) at least once within the 12-month submission period.	American Gastroenterolo gical Association
2803	402	MIPS CQM	Process	Community/ Population Health	Tobacco Use and Help with Quitting Among Adolescents: The percentage of adolescents 12 to 20 years of age with a primary care visit during the measurement year for whom tobacco use status was documented and received help with quitting if identified as a tobacco user.	National Committee for Quality Assurance
0053	418	Medicare Part B Claims, MIPS CQM	Process	Effective Clinical Care	Osteoporosis Management in Women Who Had a Fracture: The percentage of women age 50-85 who suffered a fracture in the six months prior to the performance period through June 30 of the performance period and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis in the six months after the fracture.	National Committee for Quality Assurance

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N/A	441	MIPS CQM	Intermedia te Outcome	Effective Clinical Care	Ischemic Vascular Disease (IVD) All or None Outcome Measure (Optimal Control): The IVD All-or-None Measure is one outcome measure (optimal control). The measure contains four goals. All four goals within a measure must be reached in order to meet that measure. The numerator for the all-or-none measure should be collected from the organization's total IVD denominator. All-or-None Outcome Measure (Optimal Control) - Using the IVD denominator optimal results include: • Most recent blood pressure (BP) measurement is less than or equal to 140/90 mm Hg AND • Most recent tobacco status is Tobacco Free AND • Daily Aspirin or Other Antiplatelet Unless Contraindicated AND	Wisconsin Collaborative for Healthcare Quality
N/A	443	MIPS CQM	Process	Patient Safety	Non-Recommended Cervical Cancer Screening in Adolescent Females: The percentage of adolescent females 16–20 years of age who were screened unnecessarily for cervical cancer.	National Committee for Quality Assurance
N/A	444	MIPS CQM	Process	Efficiency and Cost Reduction	Medication Management for People with Asthma: The percentage of patients 5-64 years of age during the performance period who were identified as having persistent asthma and were dispensed appropriate medications that they remained on for at least 75% of their treatment period.	National Committee for Quality Assurance

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1858	450	MIPS CQM	Process	Effective Clinical Care	Trastuzumab Received By Patients With AJCC Stage I (T1c) – III And HER2 Positive Breast Cancer Receiving Adjuvant Chemotherapy: Percentage of female patients (aged 18 years and older) with AJCC stage I (T1c) – III, human epidermal growth factor receptor 2 (HER2) positive breast cancer receiving adjuvant chemotherapy who are also receiving Trastuzumab.	American Society of Clinical Oncology
1859	451	MIPS CQM	Process	Effective Clinical Care	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: Percentage of adult patients (aged 18 or over) with metastatic colorectal cancer who receive anti-epidermal growth factor receptor monoclonal antibody therapy for whom RAS (KRAS and NRAS) gene mutation testing was performed.	American Society of Clinical Oncology
1860	452	MIPS CQM	Process	Patient Safety	Patients with Metastatic Colorectal Cancer and RAS (KRAS or NRAS) Gene Mutation Spared Treatment with Anti-epidermal Growth Factor Receptor (EGFR) Monoclonal Antibodies: Percentage of adult patients (aged 18 or over) with metastatic colorectal cancer and RAS (KRAS or NRAS) gene mutation spared treatment with anti-EGFR monoclonal antibodies.	American Society of Clinical Oncology
0210	453	MIPS CQM	Process	Effective Clinical Care	Percentage of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life (lower score – better): Percentage of patients who died from cancer receiving chemotherapy in the last 14 days of life.	American Society of Clinical Oncology

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0213	455	MIPS CQM	Outcome	Effective Clinical Care	Percentage of Patients Who Died from Cancer Admitted to the Intensive Care Unit (ICU) in the Last 30 Days of Life (lower score – better): Percentage of patients who died from cancer admitted to the ICU in the last 30 days of life.	American Society of Clinical Oncology
0216	457	MIPS CQM	Outcome	Effective Clinical Care	Percentage of Patients Who Died from Cancer Admitted to Hospice for Less than 3 days (lower score – better): Percentage of patients who died from cancer, and admitted to hospice and spent less than 3 days there.	American Society of Clinical Oncology
N/A	468	MIPS CQM	Process	Effective Clinical Care	Continuity of Pharmacotherapy for Opioid Use Disorder (OUD): Percentage of adults aged 18 years and older with pharmacotherapy for opioid use disorder (OUD) who have at least 180 days of continuous treatment.	University of Southern California
N/A	478	MIPS CQM	Patient Reported Outcome	Person and Caregiver- centered Experience and Outcomes	Functional Status Change for Patients with Neck Impairments: This is a patient-reported outcome performance measure (PRO-PM) consisting of a patient-reported outcome measure (PROM) of risk-adjusted change in functional status (FS) for patients aged 14+ with neck impairments. The change in FS is assessed using the Neck FS PROM.* The measure is risk-adjusted to patient characteristics known to be associated with FS outcomes. It is used as a performance measure at the patient, individual clinician, and clinic levels to assess quality. *The Neck FS PROM is an itemresponse theory-based computer adaptive test (CAT). In addition to the CAT version, which provides for reduced patient response burden, it is available as a 10-item short form (static/paper-pencil).	Focus on Therapeutic Outcomes, Inc.