Quality Payment

2022 MIPS Quality Measures Impacted by ICD-10 Updates Effective October 1, 2022

What is the Policy for Identifying Impacted Quality Measures?

In the calendar year (CY) 2022 Quality Payment Program final rule (85 FR 84898 through 84900), Centers for Medicare and Medicaid Services (CMS) finalized a process to stabilize measure data throughout the performance period when a measure is impacted by International Classification of Diseases, Tenth Revision (ICD-10) updates mid-performance period.

ICD-10 code updates are effective annually on October 1, but quality measure specifications can't be updated until the next MIPS program year. An annual review process was established to analyze and assess the quality measures to evaluate which measures are significantly impacted by the ICD-10 code updates. If we identify quality measures that meet the standard of greater than 10%, we notify Merit-based Incentive Payment System (MIPS) participants of those measures that were impacted by the ICD-10 code changes during the performance period.

We determine if a MIPS quality measure is significantly impacted by ICD-10 code updates by comparing the posted 2022 measure specifications with the ICD-10 codes that were deleted or added during the annual ICD-10 code updates, which occurred on October 1 of the performance period. If a MIPS quality measure is impacted by 10% or more ICD-10 code changes, such MIPS quality measure will be truncated, in which the 2022 performance period and subsequent performance score for the affected quality measure will be based only on the first 9 months of the 12-month performance period OR suppressed for the 2022 performance period. The criteria used to make such determination is as follows:

- Greater than 10% code changes in the measure numerator, denominator, exclusions, and exceptions.
- Clinical guideline changes, new products, or procedures reflected in ICD-10 code changes.
- Feedback on a measure received from measure developers and stewards.

For MIPS quality measures identified for truncation, see Table 1 (listing of Medicare Part B Claims measures and MIPS clinical quality measures (CQMs)). Additionally, we determined that the burden for electronic health record (EHR) developers would be prohibitive to truncating the data for the 2022 performance period and it would not be feasible to collect 9 consecutive months of data; therefore, all electronic clinical quality measures (eCQMs) impacted by the 10% or more ICD-10 code changes standard will be suppressed (see Table 2 for list of eCQMs identified for suppression).





Which Quality Measures are Impacted for the 2022 Performance Period?

The following MIPS quality measures were identified as being impacted for the 2022 performance period due to the annual ICD-10 code update.

Table 1: Medicare Part B Claims Measures and MIPS CQMs Identified for Truncation

Quality ID #	CMS ID#	Measure Title	Collection Type(s)	Measure Steward
006	N/A	Coronary Artery Disease (CAD): Antiplatelet Therapy	MIPS CQM	American Heart Association
134	CMS2v11	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	MIPS CQM Medicare Part B Claims	Centers for Medicare & Medicaid Services
259	N/A	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)	MIPS CQM	Society for Vascular Surgeons
282	N/A	Dementia: Functional Status Assessment	MIPS CQM	American Academy of Neurology/American Psychiatric Association
283	N/A	Dementia Associated Behavioral and Psychiatric Symptoms Screening and Management	MIPS CQM	American Academy of Neurology/ American Psychiatric Association
286	N/A	Dementia: Safety Concern Screening and Follow-Up for Patients with Dementia	MIPS CQM	American Academy of Neurology/ American Psychiatric Association

Quality ID#	CMS ID#	Measure Title	Collection Type(s)	Measure Steward
288	N/A	Dementia: Education and Support of Caregivers for Patients with Dementia	MIPS CQM	American Academy of Neurology/ American Psychiatric Association
383	N/A	Adherence to Antipsychotic Medications For Individuals with Schizophrenia	MIPS CQM	Centers for Medicare & Medicaid Services
415	N/A	Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 18 Years and Older	MIPS CQM	American College of Emergency Physicians
416	N/A	Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 2 Through 17 Years	MIPS CQM Medicare Part B Claims	American College of Emergency Physicians
465	N/A	Uterine Artery Embolization Technique: Documentation of Angiographic Endpoints and Interrogation of Ovarian Arteries	MIPS CQM	Society of Interventional Radiology

Table 2: eCQMs Identified for Suppression

Qı ID	uality #	CMS ID#	Measure Title	Collection Type(s)	Measure Steward
00	5	CMS135v10	Heart Failure (HF): Angiotensin- Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Neprilysin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	eCQM	American Heart Association

Quality ID #	CMS ID#	Measure Title	Collection Type(s)	Measure Steward
113	CMS130v10	Colorectal Cancer Screening	eCQM	National Committee for Quality Assurance
134	CMS2v11	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	eCQM	Centers for Medicare & Medicaid Services
236	CMS165v10	Controlling High Blood Pressure	eCQM	National Committee for Quality Assurance
239	CMS155v10	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	eCQM	National Committee for Quality Assurance
281	CMS149v10	Dementia: Cognitive Assessment	eCQM	American Academy of Neurology
366	CMS136v11	Follow-Up Care for Children Prescribed ADHD Medication (ADD)	eCQM	National Committee for Quality Assurance

Where Do I Go for Assistance?

For additional questions related to the ICD-10 impact analysis, please contact the Quality Payment Program at QPP@cms.hhs.gov or 1-866-288-8292 (Monday-Friday 8 a.m. - 8 p.m. ET). To receive assistance more quickly, please consider calling during non-peak hours—before 10 a.m. and after 2 p.m. ET.

 Customers who are hearing impaired can dial 711 to be connected to a TRS Communications Assistant.