

MIPS Value Pathways

Merit-based Incentive Payment System (MIPS) Value Pathways (MVP) Candidate for Consideration for the 2024 Performance Year

Focusing on Women's Health





MVP Candidate Feedback Process

The MVP Candidate Feedback Process is an opportunity for the general public to participate in the MVP development process and provide feedback on MVP candidates before they're potentially proposed in rulemaking. Learn more about the MVP Public Candidate Feedback Process on the QPP website.

The 2024 MVP Candidate Feedback Period ended on February 8, 2023. Review the feedback received from the general public below, following the MVP candidate details.

Note: This document is for the 2024 MVP Candidate Feedback only and shouldn't be used as a reference for reporting MVPs in the 2023 performance year.

TABLE 1: Focusing on Women's Health MVP

Quality

Q048: Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older (Collection Type: MIPS CQM)

Q112: Breast Cancer Screening (Collection Type: Medicare Part B Claims, eCQM, MIPS CQM)

Q226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (Collection Type: Medicare Part B Claims, eCQM, MIPS CQM)

Q309: Cervical Cancer Screening (Collection Type: eCQM)

Q310: Chlamydia Screening for Women (Collection Type: eCQM)

Q335: Maternity Care: Elective Delivery (Without Medical Indication) at < 39 Weeks (Overuse) (Collection Type: MIPS CQM) High Priority, Outcome

Q336: Maternity Care: Postpartum Follow-up and Care Coordination

(Collection Type: MIPS CQM) High Priority

Q400: One-Time Screening for Hepatitis C Virus (HCV) for all Patients

(Collection Type: MIPS CQM)

Q422: Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury

(Collection Type: MIPS CQM, Medicare Part B Claims)

Q431: Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling (Collection Type: MIPS CQM) High Priority

Q432: Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair

(Collection Type: MIPS CQM) High Priority, Outcome

Q448: Appropriate Workup Prior to Endometrial Ablation

(Collection Type: MIPS CQM) High Priority

Improvement Activities

IA_AHE_1: Enhance Engagement of Medicaid and Other Underserved Populations (High)

IA_AHE_3: Promote use of Patient-Reported Outcome Tools (High)

IA_AHE_8: Create and Implement an Anti-Racism Plan (High)

IA_AHE_9: Implement Food Insecurity and Nutrition Risk Identification and Treatment Protocols (Medium)

IA_AHE_12: Practice Improvements that Engage Community Resources to Address Drivers of Health (High)

IA_BE_4: Engagement of patients through implementation of improvements in patient portal (Medium)

IA_BE_16: Promote Self-management in Usual Care (Medium)

IA_BMH_4: Depression screening (Medium)

IA_CC_9: Implementation of practices/processes for developing regular individual care plans (Medium)

IA_EPA_2: Use of telehealth services that expand practice access (Medium)

IA_PCMH: Electronic submission of Patient Centered Medical Home accreditation

IA_PM_6: Use of Toolsets or Other Resources to Close Health and Health Care Inequities Across Communities (Medium)

IA_PSPA_29: Consulting AUC Using Clinical Decision Support when Ordering Advanced Diagnostic Imaging (High)

Cost

Total Per Capita Cost (TPCC)

Medicare Spending Per Beneficiary (MSPB) Clinician

TABLE 1: Focusing on Women's Health MVP

Quality	Improvement Activities	Cost
Q472: Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture (Collection Type: eCQM) High Priority		
Q475: HIV Screening (Collection Type: eCQM)		
Q493: Adult Immunization Status (Collection Type: MIPS CQM)		
UREQA8: Vitamin D level: Effective Control of Low Bone Mass/Osteopenia and Osteoporosis: Therapeutic Level Of 25 OH Vitamin D Level Achieved (Collection Type: QCDR) High Priority, Outcome		

TABLE 2: Foundational Layer

The Foundational Layer is the same for every MVP.

Foundational Layer

Population Health Measures

Q479: Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for the Merit-Based Incentive Payment Systems (MIPS) Eligible Clinician Groups

(Collection Type: Administrative Claims)

Q484: Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions

(Collection Type: Administrative Claims)

Promoting Interoperability

- Security Risk Analysis
- Safety Assurance Factors for EHR Resilience Guide (SAFER Guide)
- e-Prescribing
- Query of the Prescription Drug Monitoring Program (PDMP)
- Provide Patients Electronic Access to Their Health Information
- Support Electronic Referral Loops By Sending Health Information

AND

 Support Electronic Referral Loops By Receiving and Reconciling Health Information

OR

- Health Information Exchange (HIE) Bi-Directional Exchange OR
- Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA)
- Immunization Registry Reporting
- Syndromic Surveillance Reporting (Optional)
- Electronic Case Reporting
- Public Health Registry Reporting (Optional)
- Clinical Data Registry Reporting (Optional)
- Actions to Limit or Restrict Compatibility or Interoperability of CEHRT
- ONC Direct Review

Focusing on Women's Health MVP Feedback

Below is the feedback we received during the 30-day MVP Candidate Feedback Period for the Focusing on Women's Health MVP. We didn't include feedback considered out of scope to the draft 2024 MVP candidate.

Feedback: One commenter recommended the MVP be separated into 2 MVPs: "Pregnancy and Perinatal Care" and "Gynecologic Services." They believe pregnancy is an episode of care that should be designated as its own MVP.

Feedback: One commenter agreed with the inclusion of Q335: Maternity Care: Elective Delivery (Without Medical Indication) at <39 Weeks (Overuse) and Q336: Maternity Care: Postpartum Follow-up and Care Coordination in this MVP. However, the commenter felt that additional measures related to aspects of reproductive health, menopause, and screening for menopause symptoms remain areas for future measure development and implementation to improve healthcare quality across the entire reproductive health lifespan. In addition, the commenter recommended the following improvements activities be considered:

- IA BE 12: Use Evidence-based Decision Aids to Support Shared Decision-making
- IA_BE_14: Engage patients and families to guide improvement in the system of care
- IA BE 23: Integration of patient coaching practices between visits
- IA BE 24: Financial Navigation Program
- IA_BMH_11: Implementation of a Trauma-Informed Care (TIC) Approach to Clinical Practice
- IA_CC_17: Patient Navigator Program
- IA CC 18: Relationship-Centered Communication
- IA_EPA_3: Collection and use of patient experience and satisfaction data on access
- IA PM 5: Engagement of community for health status improvement

Feedback: One commenter recommended the removal of the maternity care measures included in this MVP and instead consider driving quality improvement in women's health through an MVP focused on preventive, gynecologic services. The commenter also recommended updating the title to "Gynecology and Women's Health Prevention and Wellness." In addition, they recommended the addition of Q134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan

They also recommended removal of the following:

- Q226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
- Q335: Maternity Care: Elective Delivery (Without Medical Indication) at < 39 Weeks (Overuse)
- Q336: Maternity Care: Postpartum Follow-up and Care Coordination
- Q431: Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling

Feedback: One commenter expressed support for the MVP and the inclusion of Q493: Adult Immunization Status. In addition, the commenter recommended the addition of the Prenatal Immunization Status (PRS) measure to the MVP as well. The PRS measures the percentage of

deliveries in the measurement period in which women received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations. (Note: not currently a MIPS quality measure)

Feedback: One commenter recommended the inclusion of 2 similar eCQM options in addition to Q493: Adult Immunization Status:

- Q110: Preventive Care and Screening: Influenza Immunization
- Q111: Pneumococcal Vaccination Status for Older Adults

Feedback: One commenter recommended several eCQMs be added to the MVP:

- Q130: Documentation of Current Medications in the Medical Record
- Q317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
- Q318: Falls: Screening for Future Fall Risk
- Q374: Closing the Referral Loop: Receipt of Specialist Report

Feedback: One commenter recommended additional measures be considered. They believe these measures would further improve care coordination, better refine treatment plans, improve patient experience, and broaden the overall population of subspecialists included in this MVP (Radiology and Pathology). The commenter stated that ancillary providers are important participants in a woman's patient care team. They recommended including the following quality measures:

- Q487: Screening for Social Drivers of Health
- ACRAD25: Report Turnaround Time: Mammography
- MSN13: Screening Coronary Calcium Scoring for Cardiovascular Risk Assessment Including Coronary Artery Calcification Regional Distribution Scoring
- MSN15: Use of Thyroid Imaging Reporting & Data System (TI-RADS) in Final Report to Stratify Thyroid Nodule Risk
- QMM17: Appropriate Follow-up Recommendations for Ovarian-Adnexal Lesions using the Ovarian-Adnexal Reporting and Data System (O-RADS)
- QMM18: Use of Breast Cancer Risk Score on Mammography
- QMM19: DEXA/DXA and Fracture Risk Assessment for Patients with Osteopenia
- QMM23: Low dose cancer screening recommendation for computed tomography (CT) and computed tomography angiography (CTA) of chest with diagnosis of Emphysema
- QMM25: Use of Structured Reporting for Urine Cytology Specimens

Feedback: One commenter supported the inclusion of the women's health focused MVP. They recommended additional quality measures be added in order to encourage inclusion of occupational therapists and other clinicians who focus on women's health:

- Q050: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65
 Years and Older
- Q182: Functional Outcome Assessment
- Q487: Screening for Social Drivers of Health

The commenter also encouraged CMS to continue development of new measures focused on women's health.

Feedback: One commenter expressed support for the following quality measures included in the MVP:

- Q335: Maternity Care: Elective Delivery (Without Medical Indication) at < 39 Weeks (Overuse)
- Q432: Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair
- Q479: Hospital-Wide, 30-Day, All-Cause Unplanned Readmission
- Q484: Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions
- Q493: Adult Immunization Status

The commenter stated they did not support the other proposed quality measures in the MVP. They felt the other measures create a reporting burden and they do not promote the HHS mission of effective health services. The commenter requested consideration be given to replacing the screening and assessment measures with more outcome measures to make the MVP reporting align better with our national goals of improving health outcomes.

Feedback: One commenter recommended the addition of IA_AHE_6: Provide Education Opportunities for New Clinicians.

Feedback: One commenter supported the inclusion of IA_AHE_9: Implement Food Insecurity and Nutrition Risk Identification and Treatment Protocols in this MVP.

Version History

Date	Description
02/22/2023	Original posting.