Quality Payment



2024 MIPS Quality Measures Impacted by ICD-10 Coding Updates Effective October 1, 2024

What is the Policy for Identifying Impacted Quality Measures?

The International Classification of Diseases, Tenth Revision (ICD-10) code updates are effective annually on October 1. However, the Merit-based Incentive Payment System (MIPS) quality measure specifications can't be updated to account for such ICD-10 code updates until the next MIPS performance period. In the Calendar Year (CY) 2018 Medicare Physician Fee Schedule (PFS) Final Rule, the Centers for Medicare & Medicaid Services (CMS) established an annual review process to identify and analyze MIPS quality measures that are significantly impacted by the ICD-10 coding changes during the performance period (82 FR 53714 through 53716). In the CY 2024 Medicare PFS Final Rule, the policy was amended to eliminate one of the criteria used to evaluate MIPS quality measures significantly impacted by ICD-10 coding changes during the annual review process. Specifically, the identification of measures that have changes to a minimum of 10% of ICD-10 codes; such criterion was replaced with a more general criteria that allows CMS to assess MIPS quality measures on a case-by-case basis to determine whether or not the ICD-10 coding change is significant (88 FR 79368 through 79369). The criteria used to determine whether or not a MIPS quality measure is significantly impacted by ICD-10 coding changes are as follows:

- Changes in measure scope or intent will be considered significant changes that affect the applicability of the historical benchmark.
- Clinical guideline changes, new products, or procedures reflected in ICD-10 code updates.
- Feedback on a measure received from measure developers and stewards.

To determine if a MIPS quality measure is significantly impacted by ICD-10 code updates, we compare the ICD-10 codes listed in the posted 2024 measure specifications with the ICD-10 codes that were deleted or added during the annual ICD-10 code updates effective October 1 of the performance period. If a MIPS quality measure is significantly impacted by ICD-10 coding changes, such a MIPS quality measure will be suppressed or truncated (the assessment of performance for the affected MIPS quality measure will be based on the first 9 months (January through September) of the 12-month performance period) for the 2024 performance period (42 CFR 414.1380(b)(1)(vii)(A)).

Based on the analysis of the annual ICD-10 code updates, one MIPS quality measure (see <u>Table 1</u> below) is identified as being significantly impacted by ICD-10 coding changes and, as a result, that MIPS quality measure will be truncated for the 2024 performance period.



Which Quality Measures are Impacted for the 2024 Performance Period?

The following MIPS quality measure is identified as being significantly impacted for the 2024 performance period due to the annual ICD-10 code update.

Table 1: MIPS Quality Measure Identified for Truncation

Quality ID #	Measure Title	Collection Type(s)	Measure Steward
185	Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	MIPS CQM	American Gastroenterological Association

Where Do I Go for Assistance?

For additional questions related to the analysis of the ICD-10 code updates or impacted MIPS quality measures, 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) or submit a QPP Service Center ticket. People who are deaf or hard of hearing can dial 711 to be connected to a Telecommunications Relay Services (TRS) Communications Assistant.

Version History

Date	Change Description
10/01/2024	Original version

