# Quality Payment



# **CMS Web Interface Data Dictionary 2024 Performance Year**

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### Introduction

The CMS Web Interface Data Dictionary is intended to further assist users as they prepare to report data using the CMS Web Interface. The information contained in this document reflects elements from the CMS Web Interface. Users are encouraged to review and consult the CMS Web Interface Excel Template to understand how to report data given that it is the source that provides all necessary elements of information. The CMS Web Interface Excel Template is the interface used by the system. The template is available in the Web Interface application.

It should be noted that this document is not intended to replace measure specifications. Please refer to the CMS Web Interface measure specifications for a comprehensive and in-depth understanding of each measure.



# **Patient Demographics**

#### **Patient ID**

Description: A Medicare Patient Identifier (MBI).

Constraints: May not be modified.

Usage: Used to uniquely identify the patient. Populated automatically.

### **Patient ID Type**

**Description:** Indicates the patient ID is an MBI.

Constraints: May not be modified.

Usage: Used to identify the patient. Populated automatically.

#### **First Name**

**Description:** The first name of the patient.

Constraints: May not be modified using the EXCEL upload process.

**Usage:** Used to identify the patient. Populated automatically.

#### **Last Name**

**Description:** The last name of the patient.

Constraints: May not be modified using the EXCEL upload process.

Usage: Used to identify the patient. Populated automatically.

#### Gender

**Description:** The gender of the patient.

Values: Unknown, Male, Female.

Constraints: May not be modified using the EXCEL upload process.

**Usage:** Used to identify the patient. Populated automatically.

### Date of Birth (MM/DD/YYYY)

**Description:** The date of birth for the patient.

Constraints: May not be modified using the EXCEL upload process.

**Usage:** Used to identify the patient. Populated automatically.

# **Medical Record Number**

**Description:** The medical record number from the Electronic Health Record of the Patient.

Format: String.

Constraints: Any combination of letters, numbers and special characters. Can't exceed 128 characters.

**Usage:** Used to identify the patient.



**Notes:** The ability to supply this value is for the convenience of the submitters. CMS doesn't require this value. It can be used as a reference if information is looked up with a medical record number specific to the reporter's system.

#### Clinic ID

**Description:** The Clinic ID for which treatment was supplied for the patient.

Format: String.

Constraints: Numbers only. No special characters. Can't be longer than 9 characters or less than 6 characters.

Usage: Used to identify the clinic.

**Notes:** This value isn't required and, if available, will be included with the patient sample. If it helps with performing your reporting activities, you may use this field to identify a clinic who treated the patient.

#### **Provider 1 NPI**

**Description:** The National Provider Identifier (NPI) for which treatment was supplied to the Patient.

Format: Number.

Constraints: Max length 10 digits.

Usage: Used to identify the provider.

**Notes:** This value isn't required and, if available, will be included with the patient sample. If it helps with performing your reporting activities, you may use this field to identify a provider who treated the patient.

### **Provider 2 NPI**

**Description:** The National Provider Identifier (NPI) for which treatment was supplied to the Patient.

Format: Number.

Constraints: Max length 10 digits.

**Usage:** Used to identify the provider.

**Notes:** This value isn't required and, if available, will be included with the patient sample. If it helps with performing your reporting activities, you may use this field to identify a provider who treated the patient.

#### **Provider 3 NPI**

Description: The National Provider Identifier (NPI) for which treatment was supplied to the Patient.

Format: Number.

Constraints: Max length 10 digits.

Usage: Used to identify the provider.

**Notes:** This value isn't required and, if available, will be included with the patient sample. If it helps with performing your reporting activities, you may use this field to identify a provider who treated the patient.



### Comment

**Description:** Comment enables users to document information or take notes about the patient.

Format: Text string.

**Constraints:** Less than or equal to 1,000 characters.

Usage: Used to provide the data recorder a field to record notes relative to the patient or the data they are

supplying.

**Notes:** Not required.



# **Patient Confirmation**

# Can you locate the patient's medical record and is the patient qualified for the sample?

**Description:** Required for each patient ranked with a measure.

Values: Yes, No - Medical Record Not Found, Not Qualified for Sample, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

### **Disqualification Reason**

**Description:** Required if "Not Qualified for Sample" is selected.

Values: In Hospice, Moved out of Country, Deceased, Non-FFS Medicare, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

# Enter the date the patient became ineligible (MM/DD/YYYY)

**Description:** Required if "Not Qualified for Sample" is selected.

Format: MM/DD/YYYY.

Usage: Date field.

**Notes:** Use N/A to clear previously reported data.

#### **Confirmation Comments**

**Description:** Confirmation comments enables users to document information or take notes about the patient confirmation for the sample.

Format: Text string.

Constraints: Less than or equal to 1,000 characters.

Usage: Used to provide the data recorder a field to record notes relative to the patient or the data they are

supplying.

Notes: Not required.



# **CARE-2: Screening for Future Fall Risk**

#### **CARE-2 Rank**

**Description:** Rank of the patient for this measure.

Format: Numeric.

Constraints: May not be modified.

**Usage:** Used to rank a patient in this measure.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

### Is the patient qualified for this measure?

**Description:** Required for each patient ranked in this measure for which you reported data.

Values: Yes, No - Other CMS Approved Reason, N/A

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Was the patient screened for future fall risk at least once during the measurement period (January 1 and December 31, 2024)?

**Description:** Required for each patient ranked in this measure for which you report data.

Values: Yes, No, N/A.

Constraints: Must match values.

Notes: Use N/A to clear previously reported data.

# **Skip Request Status**

**Description:** Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

Usage: Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated

with the status on the next download with data.

### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

Usage: Used to identify the skip request. Populated automatically.

Notes: After a skip request has been submitted through the data entry user interface, this field will be populated

with the case number on the next download with data.



# **CARE-2 Comment (optional)**

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# DM-2: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)

DM-2 Rank

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

Usage: Used to rank a patient in this measure.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

Does the patient have an active diagnosis of diabetes during the measurement period OR an active diagnosis of diabetes during the year prior (January 1, 2023 – December 31, 2024)

Description: Required for each patient ranked in this measure for which you report data.

Values: Yes, Not Confirmed - Diagnosis, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Did the patient have one or more HbA1c tests performed during the measurement period (January 1 - December 31, 2024)?

Description: Required for each patient ranked in the measure for which you report data.

Values: Yes, No, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data.

#### Date drawn (MM/DD/YYYY)

**Description:** Required if "Yes" is selected.

Format: MM/DD/YYYY.

Usage: Date field.

**Notes:** Use N/A to clear previously reported data.

#### **HbA1c** value (enter distinct value)

**Description:** Required if "Yes" is selected.

Values: A number between 0 and 25.

Format: Up to 2 decimal places are supported.

**Usage:** Enter 0 if the test was performed but the results weren't documented.

**Notes:** Use N/A to clear previously reported data.



#### **Skip Request Status**

Description: Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

Usage: Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

with the status on the next download with data.

# **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

**Constraints:** May not be modified.

Usage: Used to identify the skip request. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated

with the case number on the next download with data.

# **DM-2 Comment (optional)**

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# **HTN-2: Controlling High Blood Pressure**

#### HTN-2 Rank

**Description:** The rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

Does the patient have a documented diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period (January 1, 2024 – June 30, 2024)?

**Description:** Required for each patient ranked in this measure for which you report data.

Values: Yes, Not Confirmed - Diagnosis, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

#### Was the patient's most recent blood pressure reading documented during the measurement period?

**Description:** Required for each patient ranked in this measure for which you report data.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

#### Date taken (MM/DD/YYYY)

**Description:** Required if "Yes" is selected for "Was the patient's most recent blood pressure reading documented during the measurement period (January 1 - December 31,2024)?"

Format: MM/DD/YYYY.

**Usage:** Date field.

**Notes:** Use N/A to clear previously reported data.

#### Systolic (Enter Number)

**Description:** Required if "Yes" is selected.

Values: A number between 0 and 350.

**Usage:** Enter N/A to clear previously reported data.



# **Diastolic (Enter Number)**

**Description:** if "Yes" is selected.

Values: A number between 0 and 200.

**Usage:** Enter N/A to clear previously reported data.

### **Skip Request Status**

Description: Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

Usage: Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

**Skip Request Case Number** 

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

Usage: Used to identify the skip request. Populated automatically.

Notes: After a skip request has been submitted through the data entry user interface, this field will be populated

with the case number on the next download with data.

# **HTN-2 Comments (optional)**

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# MH-1: Depression Remission at Twelve Months

#### MH-1 Rank

**Description:** The rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

Does the patient have an active diagnosis of major depression or dysthymia during the denominator identification period (November 1, 2022 - October 31, 2023)?

**Description:** Required for each patient ranked in this measure for which you report data.

Values: Yes, Not Confirmed - Diagnosis, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

Did the patient have one or more PHQ-9s or PHQ-9Ms administered during the denominator identification period (November 1, 2022 - October 31, 2023)?

**Description:** Required for each patient ranked in this measure for which you report data.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

Did the patient have a PHQ-9 or PHQ-9M score greater than 9 during the denominator identification period between November 1, 2022 and October 31, 2023?

**Description:** Required for each patient ranked in this measure when you answer "Yes" to the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

PHQ-9 or PHQ-9M Index Event Date (MM/DD/YYYY)

**Description:** Required if "Yes" is selected in the previous question.

Format: MM/DD/YYYY.

Usage: Date field.

Notes: Use N/A to clear previously reported data.



# PHQ-9 or PHQ-9M Score (Enter Number)

**Description:** Required if "Yes" is selected for the PHQ-9 or PHQ-9M score greater than 9 question.

Format: Number between 10 and 27.

**Usage:** Enter N/A to clear previously reported data.

# Did the patient have one or more PHQ-9s or PHQ-9Ms administered during the Measurement Assessment Period (12 months +/- 60 days from the Index Event Date)?

**Description:** Required if "Yes" is selected in the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

# Did the patient achieve remission with a follow-up PHQ-9 or PHQ-9M performed and a score less than 5 at 12 months (+/- 60 days) of the initial (index event date) PHQ-9 or PHQ-9M score greater than 9?

**Description:** Required if "Yes" is selected in the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

#### Remission Date (MM/DD/YYYY)

**Description:** Required if "Yes" is selected.

Format: MM/DD/YYYY.

Constraints: A date between 12 months (+/- 60 days) of the initial Index Event Date PHQ-9 or PHQ-9M score less

than 5.

**Usage:** Date field.

**Notes:** Use N/A to clear previously reported data.

#### PHQ-9 or PHQ-9M Score associated with the Remission Date

**Description:** Required if "Yes" is selected.

Format: Number between 0 and less than 5.

Usage: Enter N/A to clear previously reported data.

#### **Skip Request Status**

Description: Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

**Constraints:** May not be modified.



**Usage:** Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

#### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage:** Used to identify the skip request. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the case number on the next download with data.

# MH-1 Comments (optional)

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# **PREV-5: Breast Cancer Screening**

#### PREV-5 Rank

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

### Is the patient qualified for this measure?

Description: Required for each patient ranked in this measure for which you report data.

Values: Yes, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Was screening for breast cancer performed between October 1, 2022 and December 31, 2024?

**Description:** Required if the patient is qualified for the measure.

Values: Yes, No, N/A.

Constraints: Must match values.

Notes: Use N/A to clear previously reported data.

#### **Skip Request Status**

Description: Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

**Constraints:** May not be modified.

Usage: Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

#### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage:** Used to identify the skip request. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the case number on the next download with data.



# **PREV-5 Comments (optional)**

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# **PREV-6: Colorectal Cancer Screening**

#### **PREV-6 Rank**

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

#### Is the patient qualified for this measure?

Description: Required for each patient ranked in this measure for which you report data.

Values: Yes, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Is the patient's colorectal cancer screening current during the measurement period?

**Description:** Required if the patient is qualified for the measure.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

#### **Skip Request Status**

Description: Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

**Usage:** Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

#### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage:** Used to identify the skip request. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the case number on the next download with data.



# **PREV-6 Comments (optional)**

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



#### **PREV-7: Influenza Immunization**

#### **PREV-7 Rank**

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

### Is the patient qualified for this measure?

Description: Required for each patient ranked in this measure for which you report data.

**Values:** Yes, No - Anaphylaxis due to the vaccine during or before the measurement period, No - Other CMS

Approved Reason, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Did the patient receive an influenza immunization OR report previous receipt of an influenza immunization between August 1, 2023 and March 31, 2024 (Flu Season 2023-2024)?

**Description:** Required if the patient is qualified for the measure.

**Values:** Yes-Flu Season 2023-2024, No, No - Denominator Exception - Medical Reasons, No - Denominator Exception - Patient Reasons, No - Denominator Exception - System Reasons, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data. System Use Only value of Not sampled for this season, a prefilled response of "Not sampled for this season" occurs when the beneficiary sample did not include an encounter for the flu season, this response cannot be changed.

# Did the patient receive an influenza immunization OR report previous receipt of an influenza immunization between August 1, 2024 and December 31, 2024 (Flu Season 2024-2025)?

**Description:** Required if the patient is qualified for the measure.

**Values:** Yes-Flu Season 2024-2025, No, No - Denominator Exception - Medical Reasons, No - Denominator Exception - Patient Reasons, No - Denominator Exception - System Reasons, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data. System Use Only value of Not sampled for this season, a prefilled response of "Not sampled for this season" occurs when the beneficiary sample did not include an encounter for the flu season, this response cannot be changed.



# **Skip Request Status**

**Description:** Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

**Usage:** Used to identify the skip request status. Populated automatically.

Notes: After a skip request has been submitted through the data entry user interface, this field will be populated

with the status on the next download with data.

#### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage:** Used to identify the skip request. Populated automatically.

Notes: After a skip request has been submitted through the data entry user interface, this field will be populated

with the case number on the next download with data.

# PREV-7 Comments (optional)

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# PREV-10: Tobacco Use: Screening and Cessation Intervention

PREV-10 Rank

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

### Is the patient qualified for this measure?

Description: Required for each patient ranked in this measure for which you report data.

Values: Yes, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

### Was the patient screened for tobacco use at least once within the measurement period?

**Description:** Required if the patient is qualified for the measure.

Values: Yes, No, N/A.

Constraints: Must match values.

Notes: Use N/A to clear previously reported data.

#### Was the patient identified as a tobacco user during the most recent tobacco use screening?

**Description:** Required if you selected "Yes" in the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

### Did the patient receive tobacco cessation intervention?

**Description:** Required if you selected "Yes" in the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

#### **Skip Request Status**

**Description:** Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

Usage: Used to identify the skip request status. Populated automatically.



**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

#### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage**: Used to identify the skip request. Populated automatically.

Notes: After a skip request has been submitted through the data entry user interface, this field will be populated

with the case number on the next download with data.

# **PREV-10 Comments (optional)**

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# PREV-12: Screening for Depression and Follow-Up Plan

#### PREV-12 Rank

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

#### Is the patient qualified for this measure?

Description: Required for each patient ranked in this measure for which you report data.

Values: Yes, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Was the patient screened for depression using an age appropriate standardized tool during the measurement period (January 1 - December 31, 2024)?

**Description:** Required if the patient is qualified for the measure.

**Values:** Yes, No, No - Denominator Exception - Medical Reasons, No - Denominator Exception - Patient Reasons, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data.

# Was the screen positive for depression during the measurement period (January 1 - December 31, 2024)?

Description: Required if you selected "Yes" in the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

Notes: Use N/A to clear previously reported data.

# Was a follow-up plan for depression documented on the date of or up to two days after the positive screen?

**Description:** Required if you selected "Yes" in the previous question.

Values: Yes, No, N/A.

Constraints: Must match values.

Notes: Use N/A to clear previously reported data.



# **Skip Request Status**

**Description:** Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

**Usage:** Used to identify the skip request status. Populated automatically.

Notes: After a skip request has been submitted through the data entry user interface, this field will be populated

with the status on the next download with data.

# **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage:** Used to identify the skip request. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated

with the case number on the next download with data.

# PREV-12 Comments (optional)

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# PREV-13: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

#### PREV-13 Rank

**Description:** Rank of the patient for this measure.

Format: Numeric.

**Constraints:** May not be changed for the patient sample.

**Notes:** Not all patients will be ranked in the measure. Populated automatically.

# Was the patient previously diagnosed with or currently have a diagnosis of clinical ASCVD including an ASCVD procedure at any time up through the last day of the measurement period?

Description: Required for each patient ranked in this measure for which you report data.

Values: Yes, No - Diagnosis, No - Denominator Exclusion, No - Other CMS Approved Reason, N/A.

Constraints: Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Is the patient aged 20-75 years at the beginning of the measurement period AND has the patient ever had a laboratory test result of LDL-C >= 190 mg/dL OR were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia?

**Description:** Required for each patient that answers "No – Diagnosis" to Population 1 question.

Values: Yes, No - Diagnosis, No - Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data.

# Is the patient aged 40-75 years of age at the beginning of the measurement period with a diagnosis of Type 1 or Type 2 diabetes?

**Description:** Required for each patient that answers "No - Diagnosis" to the Population 1 and Population 2 questions.

**Values:** Yes, No - Diagnosis, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.



# Is the patient aged 40-75 years of age and has a 10-year ASCVD risk score of >=20 percent during the measurement period?

**Description:** Required for each patient that answers "No - Diagnosis" to the Population 1 and Population 2 and Population 3 questions.

Values: Yes, No – Risk Assessment, Denominator Exclusion, No - Other CMS Approved Reason, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data. Values Not Confirmed – Age OR Not Confirmed – Gender are calculated by the system and populated in the download with data. These values may not be modified and will be ignored on upload if changed.

# Was the patient taking or prescribed statin therapy during the measurement period (January 1 - December 31, 2024?)

**Description:** Required for each patient that answers "Yes" to the Population 1 and ranked in this measure that you report data for when Population 1 or Population 2 is "Yes" or Population 3 is "Yes" or Population 4 is "Yes"

Values: No, Yes, No - Denominator Exception - Medical Reasons, N/A.

**Constraints:** Must match values.

**Notes:** Use N/A to clear previously reported data.

### **Skip Request Status**

Description: Indicates whether an 'Other CMS Approved Reason' has been submitted, approved, or denied.

Constraints: May not be modified.

Usage: Used to identify the skip request status. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the status on the next download with data.

#### **Skip Request Case Number**

**Description:** Identifies the skip request submitted through the data entry user interface.

Constraints: May not be modified.

**Usage:** Used to identify the skip request. Populated automatically.

**Notes:** After a skip request has been submitted through the data entry user interface, this field will be populated with the case number on the next download with data.

#### PREV-13 Comments (optional)

**Description:** Not required and are offered for the data reporter to use for recording information that may be helpful or related to the data reported. CMS doesn't use the information recorded in comments.

Format: Text string.



# **Version History**

Date	Change Description
12/18/2024	Original Posting.

