



Merit-based Incentive Payment System (MIPS) Value Pathways (MVP) Candidate 2026 Performance Year Podiatry

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 Candidate Feedback Process](#) on the Quality Payment Program (QPP) website.

The 2026 MVP Candidate Feedback Period ended on January 24, 2025.

This document contains feedback we received during the 45-day MVP Candidate Feedback Period for the Podiatry MVP. If you would like to review the activities and measures in a particular MVP, you may review them on the Quality Payment Program website at <https://gpp.cms.gov/>

Note: This document is for 2026 MVP Candidate Feedback only and shouldn't be used as a reference for reporting MVPs in the 2025 performance year. Centers for Medicare & Medicaid Services (CMS) will indicate finalized MVPs exclusively through the Calendar Year (CY) 2026 Medicare Physician Fee Schedule (PFS) Final Rule.

Review the MVP candidate details, and feedback received from the general public below.

Podiatry MVP Feedback Received

Below is the feedback we received during the 45-day MVP Candidate Feedback Period for the Podiatry MVP. We didn't include feedback considered out of scope to the draft 2026 MVP candidate.

Feedback: One commenter was concerned with the number of podiatric-focused Qualified Clinical Data Registry (QCDR) measures included in this MVP, many of which didn't have a benchmark compared to the broad-based MIPS quality measures.

Feedback: One commenter expressed support for the following MIPS quality measures included in this MVP: Q226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention; Q317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented; and Q374: Closing the Referral Loop: Receipt of Specialist Report. The commenter also recommended the addition of the following MIPS quality measures: Q001: Diabetes: Glycemic Status Assessment Greater Than 9%; Q130: Documentation of Current Medications in the Medical Record; Q321: CAHPS for MIPS Clinician/Group Survey; and Q374: Closing the Referral Loop: Receipt of Specialist Report.

Feedback: One commenter didn't agree with the inclusion of the Non-Pressure Ulcers cost measure in this MVP. The commenter had concerns with the measure and didn't believe that it accurately distinguished between good and poor performance in terms of clinician cost as currently specified.

Feedback: One commenter expressed concern that this MVP includes limited electronic clinical quality measure (eCQM) options.