

## Merit-based Incentive Payment System (MIPS) Cost Measure Exclusion Fact Sheet 2024 Performance Period / 2026 MIPS Payment Year

### Table of Contents

[2024 MIPS Cost Measure Identified for Exclusion](#)  
[Policies for Excluding Individual Cost Measures from Scoring](#)  
[Review Process for Cost Measures](#)  
[Additional Resources](#)

### 2024 MIPS Cost Measure Identified for Exclusion

#### Acute Kidney Injury Requiring New Inpatient Dialysis (AKI) (COST\_AKID\_1)

- This measure won't be calculated or scored for the calendar year (CY) 2024 performance period/2026 MIPS payment year.<sup>1</sup>

**Exclusion Rationale:** The AKI episode-based cost measure's risk adjustment model wasn't able to consistently estimate costs for the CY 2024 performance period/2026 MIPS payment year.

- Analyses suggested that, during the CY 2024 performance period/2026 MIPS payment year, the measure didn't adequately estimate costs for episodes where beneficiaries were identified as low-risk.
- This finding demonstrates that the measure's risk adjustment model underestimated costs for the lowest risk patients (as compared to the actual costs), which may lead to misleading and inaccurate measure scores for MIPS eligible clinicians with a larger share of these episodes.
- The Centers for Medicare & Medicaid Services (CMS) evaluated these findings and determined that there are changes external to the care provided impacting calculation of the measure and that calculating a measure score would lead to misleading or inaccurate results that negatively impact the measure's ability to reliably assess performance.

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<sup>1</sup> This measure is 1 of 29 cost measures finalized for inclusion in [traditional MIPS](#), and the only cost measure finalized for inclusion in the [Optimal Care for Kidney Health MIPS Value Pathway \(MVP\)](#), for the 2024 performance period/2026 MIPS payment year. As a result of the measure's exclusion, the cost performance category will be reweighted to 0% for MIPS eligible clinicians who reported the Optimal Care for Kidney Health MVP.



## Policies for Excluding Individual Cost Measures from Scoring


In the [CY 2022 Medicare Physician Fee Schedule \(PFS\) final rule](#) (86 FR [65507-65509](#)), CMS established scoring flexibility at the measure-level, establishing a policy for exclusion of a cost measure from scoring in certain circumstances. In the CY 2022 PFS final rule ([86 FR 65508](#)), CMS indicated that MIPS cost measures will be reviewed after the conclusion of each performance period to determine if measures should be excluded from scoring on the basis that results could be inaccurate or misleading. CMS codified this policy to exclude a single cost measure from scoring in certain circumstances at [42 CFR 414.1380\(b\)\(2\)\(v\)\(A\)](#). In the [CY 2025 Medicare PFS final rule](#), CMS adopted an additional cost measure exclusion policy, which CMS codified at [42 CFR 414.1380\(b\)\(2\)\(v\)\(B\)](#) (89 FR [98446-98448](#)).

Under [§ 414.1380\(b\)\(2\)\(v\)\(A\)](#), if data used to calculate a score for a cost measure are impacted by significant changes during the performance period, such that calculating the cost measure's score would lead to misleading or inaccurate results, then the affected cost measure is excluded from the MIPS eligible clinician's or group's cost performance category score. "Significant changes" are changes external to the care provided, and that CMS determines may lead to misleading or inaccurate results. Significant changes include, but are not limited to, rapid or unprecedented changes to service utilization, and will be empirically assessed by CMS to determine the extent to which the changes impact the calculation of a cost measure score that reflects clinician performance.

Under [§ 414.1380\(b\)\(2\)\(v\)\(B\)](#), if data used to calculate a score for a cost measure are impacted by significant changes or errors affecting the performance period, such that calculating the cost measure score would lead to misleading or inaccurate results, then the affected cost measure is excluded from the MIPS eligible clinician's or group's cost performance category score. "Significant changes or errors" are changes or errors external to the care provided, and that CMS determines may lead to misleading or inaccurate results that negatively impact the measure's ability to reliably assess performance. Significant changes or errors include, but are not limited to, rapid or unprecedented changes to service utilization, the inadvertent omission of codes or inclusion of codes, or changes to clinical guidelines or measure specifications. CMS will empirically assess the affected cost measure to determine the extent to which the changes or errors impact the calculation of a cost measure score such that calculating the cost measure score would lead to misleading or inaccurate results that negatively impact the measure's ability to reliably assess performance.

## Review Process for Cost Measures

For the CY 2024 performance period/2026 MIPS payment year, CMS conducted empirical analyses to determine whether any cost measures should be excluded from MIPS cost



performance category and final scores pursuant to either [§ 414.1380\(b\)\(2\)\(v\)\(A\)](#) or [\(B\)](#). Of the 29 cost measures specified for the CY 2024 performance period/2026 MIPS payment year, the empirical analyses suggested only one cost measure—the AKI measure—may warrant exclusion from scoring for the CY 2024 performance period/2026 MIPS payment year pursuant to [§ 414.1380\(b\)\(2\)\(v\)\(B\)](#).

The analysis results suggested that the AKI episode-based cost measure’s risk adjustment model wasn’t able to consistently estimate costs for the CY 2024 performance period/2026 MIPS payment year. This empirical analysis indicated that there are changes external to the care provided impacting calculation of the measure such that calculating a measure score would lead to misleading or inaccurate results that negatively impact the measure’s ability to reliably assess performance. On this basis, CMS determined it will exclude the AKI measure for all MIPS eligible clinicians pursuant to [§ 414.1380\(b\)\(2\)\(v\)\(B\)](#).

## Additional Resources

Additional information about the cost measures that will be calculated and reported under the MIPS cost performance category for the CY 2024 performance period/2026 MIPS payment year, as well as the AKI measure, is available here:

- [2024 Cost Measure Information Forms](#)
- [2024 Cost Measure Codes Lists](#)

## Contact CMS

Contact the Quality Payment Program Service Center by email at [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov), create a QPP Service Center ticket, or by phone at 1-866-288-8292 (Monday-Friday, 8 a.m. - 8 p.m. ET). You can also subscribe to the QPP listserv to receive updates and announcements.

- People who are deaf or hard of hearing can dial 711 to be connected to a TRS Communications Assistant.

## Version History

Date	Change Description
8/20/2025	Original version