

Quality ID #483 (CBE 3568): Person-Centered Primary Care Measure Patient Reported Outcome Performance Measure (PCPCM PRO-PM)

2026 COLLECTION TYPE:

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS) CLINICAL QUALITY MEASURE (QCM)

MEASURE TYPE:

Patient-Reported Outcome-Based Performance Measure – High Priority

DESCRIPTION:

The Person-Centered Primary Care Measure Patient Reported Outcome Performance Measure (PCPCM PRO-PM) uses the PCPCM Patient Reported Outcome Measure (PROM) a comprehensive and parsimonious set of 11 patient-reported items - to assess the broad scope of primary care. Unlike other primary care measures, the PCPCM PRO-PM measures the high value aspects of primary care based on a patient's relationship with the clinician or practice.

INSTRUCTIONS:

Reporting Frequency:

This measure is to be submitted once per performance period for denominator eligible cases as defined in the denominator criteria.

Intent and Clinician Applicability:

This measure is intended to reflect the quality of primary care services provided for patients. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions as defined by the numerator based on the services provided and the measure-specific denominator coding.

Measure Strata and Performance Rates:

This measure contains one strata defined by a single submission criteria.

This measure produces a single continuous variable.

Implementation Considerations:

For the purposes of MIPS implementation, this procedure measure is submitted each time a procedure is performed during the performance period.

For each MIPS eligible clinician, group, subgroup*, virtual group, and APM Entity, a minimum of 30 PCPCM PRO instruments per clinician are needed for submission of this measure. All valid survey results (as defined in the specification) should be included in the aggregate score. For MIPS eligible groups, subgroups*, virtual groups, and APM entities with 5 or more clinicians, a minimum of 150 PCPCM PRO instruments per TIN for each site/location associated with the clinicians' part of the group, subgroups*, virtual groups, and APM entities are needed for submission of this measure. If the MIPS eligible group, subgroup*, virtual group, and APM entity with 5 or more clinicians encompasses multiple sites/locations, each site/location would need to meet the PCPCM PRO instruments requirements as stated.

Data for the measure are collected using the PCPCM PRO instrument. The target population is all active patients attributed to the clinician or practice. Every active patient receives an invitation to complete the PCPCM PRO during their birth month. A patient is defined as active if the patient has had a documented interaction with the practice within 12 months of their birth month during the measurement period.

**Subgroups are only available through MVP reporting. All measure-specific criteria must be met by the subgroup.*

Telehealth:

NOT TELEHEALTH ELIGIBLE: This measure is not appropriate for nor applicable to the telehealth setting. Patient encounters for this measure conducted via telehealth should be removed from the denominator eligible patient population.

Therefore, if the patient meets all denominator criteria but the encounter is conducted via telehealth, it would be appropriate to remove them from the denominator eligible patient population. Telehealth eligibility is at the measure level for inclusion within the denominator eligible patient population and based on the measure specification definitions which are independent of changes to coding and/or billing practices.

Measure Submission:

The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this collection type for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. The coding provided to identify the measure criteria: Denominator or Numerator, may be an example of coding that could be used to identify patients that meet the intent of this clinical topic. When implementing this measure, please refer to the 'Reference Coding' section to determine if other codes or code languages that meet the intent of the criteria may also be used within the medical record to identify and/or assess patients. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:

Total number of completed PCPCM PRO instruments received in the reporting period.

Definitions:

A completed PCPCM PRO instrument – A PCPCM PRO instrument for which the patient has responded to at least 8 of 11 items.

Active patient – The patient has had a documented interaction with the practice within 12 months of their birth month during the measurement period.

DENOMINATOR NOTE:

The target population is all active patients attributed to a clinician or practice during the performance reporting period who had a documented interaction within the 12 months prior to the patient's birth month. The target population is defined the same, regardless of unit of analysis (clinician, practice, or system).

The PCPCM PRO is the same for all patients, regardless of age. Because the PCPCM PRO applies to all patients and is not particular to a clinical encounter, it is administered once a year to each patient during their birth month. All surveys received during the measurement period should be counted.

Table 1- PCPCM PRO instrument questions

How would you assess your primary care experience?	Definitely = 4	Mostly = 3	Somewhat = 2	Not at all = 1
My practice makes it easy for me to get care.	Definitely	Mostly	Somewhat	Not at all
My practice is able to provide most of my care.	Definitely	Mostly	Somewhat	Not at all
In caring for me, my doctor considers all factors that affect my health.	Definitely	Mostly	Somewhat	Not at all
My practice coordinates the care I get from multiple places.	Definitely	Mostly	Somewhat	Not at all
My doctor or practice knows me as a person.	Definitely	Mostly	Somewhat	Not at all
My doctor and I have been through a lot together.	Definitely	Mostly	Somewhat	Not at all
My doctor or practice stands up for me.	Definitely	Mostly	Somewhat	Not at all
The care I get takes into account knowledge of my family.	Definitely	Mostly	Somewhat	Not at all
The care I get in this practice is informed	Definitely	Mostly	Somewhat	Not at all

How would you assess your primary care experience?	Definitely = 4	Mostly = 3	Somewhat = 2	Not at all = 1
by knowledge of my community.				
Over time, my practice helps me to stay healthy.	Definitely	Mostly	Somewhat	Not at all
Over time, my practice helps me to meet my goals.	Definitely	Mostly	Somewhat	Not at all

Denominator Criteria (Eligible Cases):

All patients with a completed PCPCM PRO instrument during the reporting period

NUMERATOR:

The calculated total score of all PCPCM PRO scores.

NUMERATOR NOTE:

Scoring for the PCPCM PRO-PM is completed through a simple 4 step process using the PCPCM PRO to assess the broad scope of primary care from a patient's perspective.

Step One: Exclude incomplete patient responses. Any PCPCM PRO instrument for which a patient failed to answer at least 8 of the 11 items is excluded from calculations.

Step Two: Calculate PCPCM PRO item specific mean scores. Patients choose one of four response options for each item in the PCPCM PRO instrument. In scoring the PCPCM PRO, the first step requires determining an item mean score for each of the 11 items. Since the instrument scale is word based – Definitely, Mostly, Somewhat, Not At All – each response option must be assigned a value. Values are assigned as follows: Definitely = 4, Mostly = 3, Somewhat = 2, Not At All = 1.

Calculating the mean score for each item then requires looking across all PCPCM PRO instruments received for the entity being assessed during the analysis period. For example, if the entity is a clinician, then all completed (see Step One) PCPCM PRO instruments collected for that clinician are included in the calculation. If the entity is a practice, then all PCPCM PRO instruments collected for that practice are included in the analysis

An entity's score for each PCPCM PRO item is calculated as a mean, i.e., the summary of all responses across PCPCM PRO instruments received for the entity, divided by the number of instruments received. This process leads to 11 item specific PCPCM PRO scores. Means should be reported to two decimal points.

Step Three: Calculate the PCPCM PRO total score. The PCPCM PRO total score for the entity is calculated by determining the mean of the 11 scored PRO items. This is done by adding the mean scores of all 11 PRO items and then dividing by 11. PRO means should be reported to two decimal points.

Step Four: Converting PCPCM PRO total scores and to PCPCM PRO-PM performance score. In order to use the PCPCM PRO as a performance measure for reporting, the 4 point PCPCM PRO scale must be converted to a 0-100 performance scale. To do this, the PCPCM PRO total score for an entity, as calculated in Step Three, is divided by 4 and then multiplied by 100.

RATIONALE:

The Person-Centered Primary Care Measure Patient Reported Outcome Performance Measure (PCPCM PRO-PM) uses the PCPCM PROM - a comprehensive and parsimonious set of 11 patient-reported items - to assess the broad scope of primary care. Unlike other primary care measures, the PCPCM PRO-PM measures the high value aspects of primary care based on a patient's relationship with the clinician or practice. Patients identify the PCPCM PROM as meaningful and able to communicate the quality of their care to their clinicians and/or care team. The items within the PCPCM PROM are based on extensive stakeholder engagement and comprehensive reviews of the literature. It is not a consumer satisfaction survey – it is a patient assessment of whether the functions of primary care are being met by their clinician, or practice, and to what extent.

CLINICAL RECOMMENDATION STATEMENTS:

The IOM Report on Primary Care calls for care to be personalized at the patient level, with care integrated for whole people to overcome the many problems of fragmented and depersonalized care. The PCPCM PRO-PM complements more narrow disease-specific quality measures, and can be used to integrate care for whole people. (IOM, 1996.)

REFERENCES:

Institute of Medicine (IOM). Donaldson MS, Yordy KD, Lohr KN, and Vanselow NA, editors. Committee on the Future of Primary Care, Division of Health Care Services. National Academy Press. Washington, D.C. 1996.

COPYRIGHT:

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

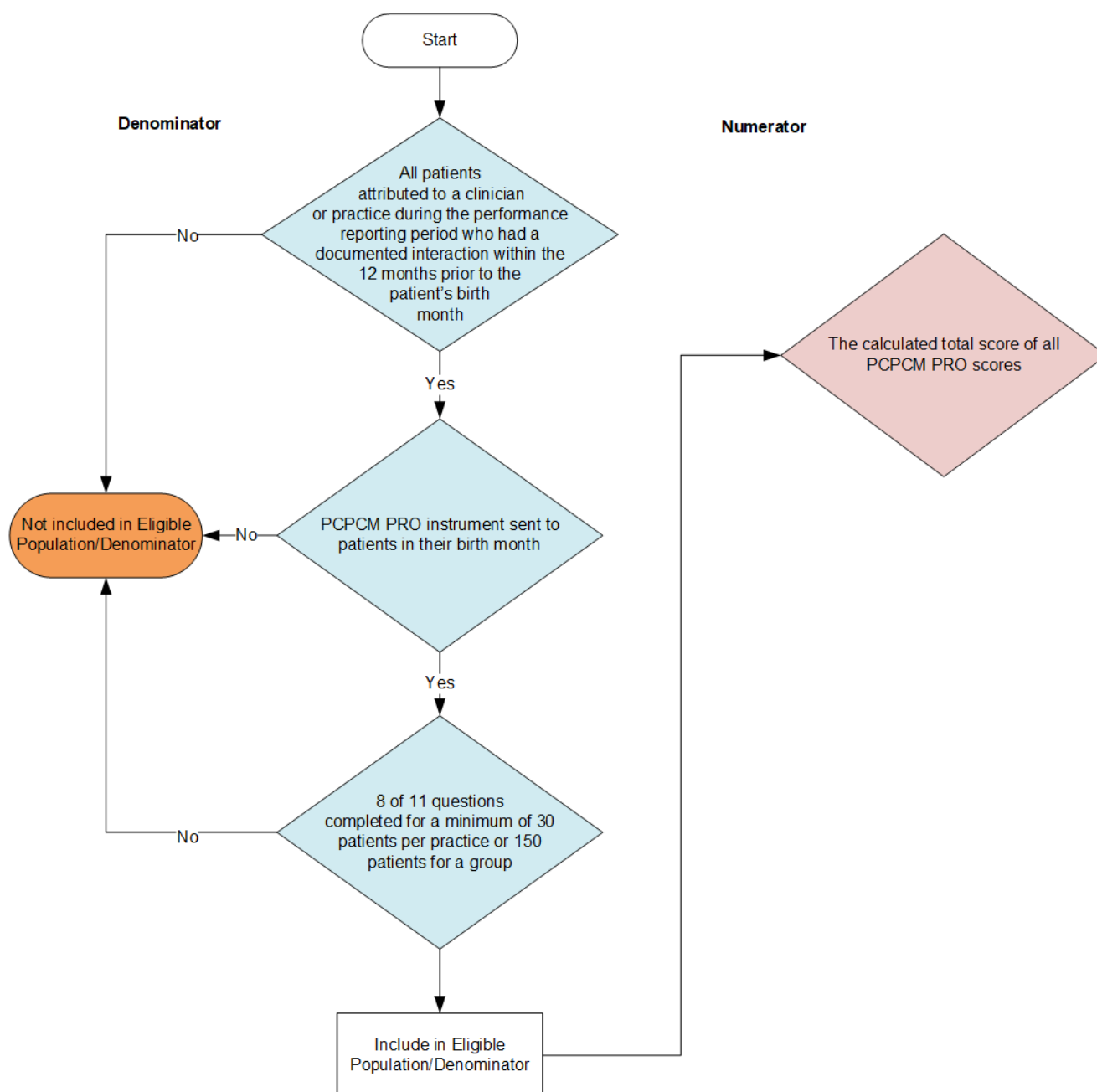
© 2019 Smart Measures, LLC. All Rights Reserved.

Limited proprietary coding is contained in the Measure specifications for user convenience. Users of proprietary code sets should obtain all necessary licenses from the owners of the code sets. The American Board of Family Medicine disclaims all liability for use or accuracy of any third party codes contained in the specifications.

CPT® contained in the Measure specifications is copyright 2004-2025 American Medical Association. LOINC® copyright 2004-2025 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms® (SNOMED CT®) copyright 2004-2025 International Health Terminology Standards Development Organisation. ICD-10 copyright 2025 World Health Organization. All Rights Reserved.

**2026 Clinical Quality Measure Flow for Quality ID #483 (CBE 3568):
Person-Centered Primary Care Measure Patient Reported Outcome Performance
Measure (PCPCM PRO-PM)**

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



PCPCM PRO-PM Sample Calculation

Step 1: Exclude incomplete patient responses

Any PCPCM PRO instrument for which a patient failed to answer at least 8 of the 11 items is excluded from calculations

Step 2: Calculate PCPCM PRO item specific mean scores*

How would you assess your primary care experience?	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5	Patient 6	PCPCM PRO Instruments Mean Score
Item 1: My practice makes it easy for me to get care.	3	2	1	2	3	2	2.17
Item 2: My practice is able to provide most of my care.	4	2	1	N/A	4	2	2.60
Item 3: In caring for me, my doctor considers all factors that affect my health.	3	4	2	4	3	4	3.33
Item 4: My practice coordinates the care I get from multiple places.	4	4	4	4	4	4	4.00
Item 5: My doctor or practice knows me as a person.	1	1	1	3	1	1	1.33
Item 6: My doctor and I have been through a lot together.	3	1	1	1	3	1	1.67
Item 7: My doctor or practice stands up for me.	2	2	1	1	2	2	1.67
Item 8: The care I get takes into account knowledge of my family.	4	3	2	2	N/A	3	2.80
Item 9: The care I get in this practice is informed by knowledge of my community.	3	3	3	2	3	3	2.83
Item 10: Over time, my practice helps me to stay healthy.	2	1	3	2	2	1	1.83
Item 11: Over time, my practice helps me to meet my goals.	3	3	3	4	3	3	3.17

*For each MIPS eligible clinician, group, subgroup, virtual group, and APM Entity, a minimum of 30 PCPCM PRO instruments per clinician are needed for submission of this measure. All valid survey results (as defined in the specification) should be included in the aggregate score. For MIPS eligible groups, subgroups, virtual groups, and APM entities with 5 or more clinicians, a minimum of 150 PCPCM PRO instruments per TIN for each site/location associated with the clinicians part of the group, subgroups, virtual groups, and APM entities are needed for submission of this measure. If the MIPS eligible group, subgroup, virtual group, and APM entity with 5 or more clinicians encompasses multiple sites/locations, each site/location would need to meet the PCPCM PRO instruments requirements as stated.

Step 3: Calculate the PCPCM PRO total score

	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Item 7	Item 8	Item 9	Item 10	Item 11	Total Mean Score
PCPCM PRO Instruments Mean Score	2.17	2.60	3.33	4.00	1.33	1.67	1.67	2.80	2.83	1.83	3.17	27.40

PCPCM PRO Total Score (27.40)/11 = 2.49

Step 4: Converting PCPCM PRO total scores to PCPCM PRO-PM performance score

PCPCM PRO-PM Performance Score = (2.49/4)x100 = 62.27%

See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

CPT only copyright 2025 American Medical Association. All rights reserved. The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

v10

2026 Clinical Quality Measure Flow Narrative Quality ID #483 (CBE 3568):
Person-Centered Primary Care Measure Patient Reported Outcome Performance Measure
(PCPCM PRO-PM)

***Disclaimer:** Refer to the measure specification for specific coding and instructions to submit this measure.*

1. Start with Denominator
2. Check *All patients attributed to a clinician or practice during the performance reporting period who had a documented interaction within the 12 months prior to the patient's birth month:*
 - a. If *All patients attributed to a clinician or practice during the performance reporting period who had a documented interaction within the 12 months prior to the patient's birth month* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *All patients attributed to a clinician or practice during the performance reporting period who had a documented interaction within the 12 months prior to the patient's birth month* equals Yes, proceed to PCPCM PRO instrument sent to patients in their birth month.
3. Check *PCPCM PRO instrument sent to patients in their birth month:*
 - a. If *PCPCM PRO instrument sent to patients in their birth month* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *PCPCM PRO instrument sent to patients in their birth month* equals Yes, proceed to 8 of 11 questions completed for a minimum of 30 patients per practice or 150 patients for a group.
4. Check *8 of 11 questions completed for a minimum of 30 patients per practice or 150 patients for a group:*
 - a. If *8 of 11 questions completed for a minimum of 30 patients per practice or 150 patients for a group* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *8 of 11 questions completed for a minimum of 30 patients per practice or 150 patients for a group* equals Yes, including in *Eligible Population/Denominator*.
5. Denominator Population:
 - Denominator Population is all Eligible Patients in the Denominator.
6. Start Numerator
7. Check *The calculated total score of all PCPCM PRO scores:*

PCPCM PRO-PM Sample Calculation:

Step One: Exclude incomplete patient responses. Any PCPCM PRO instrument for which a patient failed to answer at least 8 of the 11 items is excluded from calculations.

Step Two: Calculate PCPCM PRO item specific mean scores. Patients choose one of four response options for each item in the PCPCM PRO instrument. In scoring the PCPCM PRO, the first step requires determining an item mean score for each of the 11 items. Since the instrument scale is word based – Definitely, Mostly, Somewhat, Not At All – each response option must be assigned a value. Values are assigned as follows: Definitely = 4, Mostly = 3, Somewhat = 2, Not At All = 1.

Calculating the mean score for each item then requires looking across all PCPCM PRO instruments received for the entity being assessed during the analysis period. For example, if the entity is a clinician, then all completed (see Step One)

PCPCM PRO instruments collected for that clinician are included in the calculation. If the entity is a practice, then all PCPCM PRO instruments collected for that practice are included in the analysis

An entity's score for each PCPCM PRO item is calculated as a mean, i.e., the summary of all responses across PCPCM PRO instruments received for the entity, divided by the number of instruments received. This process leads to 11 item specific PCPCM PRO scores. Means should be reported to two decimal points.

Step Three: Calculate the PCPCM PRO total score. The PCPCM PRO total score for the entity is calculated by determining the mean of the 11 scored PRO items. This is done by adding the mean scores of all 11 PRO items and then dividing by 11. PRO means should be reported to two decimal points.

Step Four: Converting PCPCM PRO total scores to PCPCM PRO-PM performance score. In order to use the PCPCM PRO as a performance measure for reporting, the 4 point PCPCM PRO scale must be converted to a 0- 100 performance scale. To do this, the PCPCM PRO total score for an entity, as calculated in Step Three, is divided by 4 and then multiplied by 100.

*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.