



Measures with Substantive Changes Finalized for MIPS Reporting for the 2018 Performance Period and Future Years

Quality #: 226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Substantive Change: We proposed to restructure the measure more similarly to its original construct to make it more apparent where potential gaps in care exist and how performance can be improved.

Instead of being comprised of just 1 performance rate (Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user), it is now comprised of the 3 components below:

- a. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times with 24 months.
- b. Percentage of patients aged 18 years and older who were screened for tobacco use and identified as a tobacco user who received tobacco cessation intervention.
- c. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counselling intervention if identified as a tobacco user.

Quality # 281: Dementia: Cognitive Assessment

Substantive Change: The measure currently allows for medical exceptions, including diagnosis of severe dementia, palliative care, or other medical reasons, from numerator compliance. Moving forward, the measure will not include a denominator exception for medical reasons (e.g., very advanced stage receiving palliative care, other medical reason).

Quality # 128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan

Substantive Change: Change the frequency of documenting BMI from 6 to 12 months.

Quality # 110: Preventive Care and Screening: Influenza Immunization

Substantive Change: Remove encounter count requirement from initial population. This change applies to the Registry and HER data submission methods only

Quality 238: Use of High-Risk Medications in the Elderly

Substantive Change: The change is in rate b (Percentage of patients who were ordered at least two different high-risk medications), which will be going from two different medications to two instances of the same medication. This new change aligns with Beers criteria

Quality 375: Functional Status Assessment for Total Knee Replacement

Substantive Change: Aligning the initial population more closely with the measurement period. The overall duration of period remains the same. Changes to the measure description: Percentage of patients 18 years of age and older who received an elective primary total knee arthroplasty (TKA) who completed baseline and follow-up patient-reported and completed a functional status assessment within 90 days prior to the surgery and in the 270-365 days after the surgery.

Quality # 376: Functional Status Assessment for Total Hip Replacement

Substantive Change: Revise timing to identify initial population, to align more closely with the measurement period. The overall duration of period remains the same. Changes to the measure

descriptions: Percentage of patients 18 years of age and older with who received an elective total hip arthroplasty (THA) who completed baseline and follow-up patient-reported and completed a functional status assessment within 90 days prior to the surgery and in the 270-365 days after the surgery.

Quality # 438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Substantive Change: We propose to office this as an eQIM for the 2018 performance period and future years.

Quality # 374: Closing the Referral Loop: Receipt of Specialist Report

Substantive Change: We propose to offer this measure as a registry measure for the 2018 performance period and future years.

Quality #286: Dementia: Counseling Regarding Safety Concerns

Substantive Changes: We proposed to update the title, description and numerator of this measure to further specify the safety screening required and documentation of mitigation recommendations, consistent with updates from the measure steward.

Quality 283: Dementia: Neuro-Psychiatric Symptom Assessment

Substantive Change: The measure was updated to change "Functional Status Assessment and Results reviewed" to Dementia Associated Behavioral and Psychiatric Symptoms Screening and Management" Symptoms screening is for three domains "activity disturbances", "mood disturbances" and "thought and perceptual disturbances" including depression. To meet the measure, a documented behavioral and psychiatric symptoms screen inclusive of at least one or more symptom from each of three defined domains AND documented symptom management recommendations if safety concerns screening is positive within the last 12 months.