Quality Reporting Requirements:

- Report on 6 quality measures or a specialty measure set
- Include at least ONE outcome or high-priority measure
- Report on patients of All-Payers (Medicare and Non-Medicare patients)

Specialty Measure Set (11):

- 110: Preventive Care and Screening: Influenza Immunization
- 111: Pneumococcal Vaccination Status for Older Adults
- 130: Documentation of Current Medications in the Medical Record - High Priority
- 160: HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis
- 226: Preventive Care and Screening: Tobacco Use; Screening and Cessation Intervention - High Priority
- 238: Use of High-Risk Medications in the Elderly - High Priority
- 317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented
- 338: HIV Viral Load Suppression - Outcome, High Priority
- 340: HIV Medical Visit Frequency - High Priority
- 374: Closing the Referral Loop: Receipt of Specialist Report - High Priority
- 402: Tobacco Use and Help with Quitting Among Adolescents

Additional Measures:

- 001: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) Outcome, High Priority
- 051: Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation
- 052: Chronic Obstructive Pulmonary Disease (COPD): Long-Acting Inhaled Bronchodilator Therapy
- 112: Breast Cancer Screening
- 113: Colorectal Cancer Screening
- 117: Diabetes: Eye Exam
- 119: Diabetes: Medical Attention for Nephropathy
- 128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan
- 134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan
- 331: Adult Sinusitis: Antibiotic Prescribed for Acute Viral Sinusitis (Overuse) - High Priority
- 332: Adult Sinusitis: Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use) - High Priority
- 333: Adult Sinusitis: Computerized Tomography (CT) for Acute Sinusitis (Overuse) - High Priority
- 398: Optimal Asthma Control - Outcome, High Priority
- 444: Medication Management for People with Asthma - High Priority
Promoting Interoperability (PI) Reporting Requirements:

- Use of a 2015 Certified Electronic Health Record System (CEHRT)
- Report the measures from each of the four objectives, unless an exclusion is claimed.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Measures</th>
<th>Maximum Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protect Patient Health Information</td>
<td>Security Risk Analysis</td>
<td>0 points</td>
</tr>
<tr>
<td>e-Prescribing</td>
<td>e-Prescribing*</td>
<td>10 points</td>
</tr>
<tr>
<td></td>
<td>Bonus: Query of Prescription Drug Monitoring Program (PDMP)</td>
<td>5 bonus points</td>
</tr>
<tr>
<td></td>
<td>Bonus: Verify Opioid Treatment Agreement</td>
<td>5 bonus points</td>
</tr>
<tr>
<td>Health Information Exchange</td>
<td>Support Electronic Referral Loops by Sending Health Information*</td>
<td>20 points</td>
</tr>
<tr>
<td></td>
<td>Support Electronic Referral Loops by Receiving and Incorporating Health Information*</td>
<td>20 points</td>
</tr>
<tr>
<td>Provider to Patient Exchange</td>
<td>Provide Patients Electronic Access to Their Health Information</td>
<td>40 points</td>
</tr>
</tbody>
</table>
| Public Health and Clinical Data Exchange | Report to two different public health agencies or clinical data registries for any of the following:  
Immunization Registry Reporting*  
Electronic Case Reporting*  
Public Health Registry Reporting*  
Clinical Data Registry Reporting*  
Syndromic Surveillance Reporting* | 10 points      |

Bolded text in the table denotes required measures.
*Exclusion available for measures identified.
Improvement Activities (IA) Reporting Requirements:

Attest to up to 4 activities for a minimum of 90 days

Choose one of the following combinations:

- 2 High Weighted Activities
- 1 High Weighted Activity and 2 Medium Weighted Activities
- 4 Medium Weighted Activities

Medium Weighted:

- IA_PM_13: Chronic Care and Preventative Care Management for Empaneled Patients
- IA_BE_4: Engagement of patients through implementation of improvements in patient portal
- IA_CC_2: Implementation of improvements that contribute to more timely communication of test results
- IA_PM_16: Implementation of medication management practice improvements
- IA_CC_13: Practice improvements for bilateral exchange of patient information
- IA_CC_4: TCPI participation
- IA_PSPA_16: Use of decision support and standardized treatment protocols

High Weighted:

- IA_BE_6: Collection and follow-up on patient experience and satisfaction data on beneficiary engagement
- IA_PSPA_11: Participation in CAHPS or other supplemental questionnaire
- IA_EPA_1: Provide 24/7 Access to MIPS Eligible Clinicians or Groups Who Have Real-Time Access to Patient's Medical Record
Cost Reporting Requirements:

- CMS will use data from Medicare Part A and B claims—with dates of service from January 1, 2019 to December 31, 2019—to calculate your Cost performance category score.
- You do not need to submit any data or take any separate actions for this performance category.
- MIPS eligible clinicians should continue to see patients and submit claims data as usual.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Minimum Case Volume</th>
<th>Maximum Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Per Capita Costs for All Attributed Beneficiaries</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Medicare Spending Per Beneficiary</td>
<td>35</td>
<td>10</td>
</tr>
<tr>
<td>Elective Outpatient Percutaneous Coronary Intervention (PCI)</td>
<td>10</td>
<td>N/A – Not Scored</td>
</tr>
<tr>
<td>Knee Arthroplasty</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Revascularization for Lower Extremity Chronic Critical Limb Ischemia</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Routine Cataract Removal with Intraocular Lens (IOL) Implantation</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Screening/Surveillance Colonoscopy</td>
<td>10</td>
<td>N/A – Not Scored</td>
</tr>
<tr>
<td>Intracranial Hemorrhage or Cerebral Infarction</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Simple Pneumonia with Hospitalization</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>ST-Elevation Myocardial Infarction (STEMI) with Percutaneous Coronary Intervention (PCI)</td>
<td>20</td>
<td>N/A – Not Scored</td>
</tr>
</tbody>
</table>