The following is contained in this document:

2018 Radiology Preferred MIPS Measures (with 2017 to 2018 changes noted) 2018 Radiology MIPS Measures (ALL) (with 2017 to 2018 changes noted) 2018 QCDR Supported Non-MIPS Measures

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Priority	Quality #	NQF#	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifications/R	eporting Instructions	Change in 2018?
			! = high priority measure;	<pre>!! = high priority approp</pre>	riate use measure, * = inverse measur	re (a lower performance rate is better)	2018 specifi	ations	
					Measures Primarily Rel	levant to Diagnostic Radiologists			
ļ	145	n/a	Patient Safety	Registry	Process	Radiology: Exposure Dose or Time Reported for Procedures Using Fluoroscopy: Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available)	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	146 * inverse measure	508	Efficiency & Cost Reduction	Claims, Registry	Process	Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Mammography Screening: Percentage of final reports for screening mammograms that are classified as "probably benign"	<u>Claims Spec</u>	Registry Spec	Only Copyright change
	195	507	Effective Clinical Care	Claims, Registry	Process	Radiology: Stenosis Measurement in Carotid Imaging Reports: Percentage of final reports for carotid imaging studies (neck magnetic resonance angiography [MRA], neck computed tomography angiography [CTA], neck duplex ultrasound, carotid angiogram) performed that include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	225	509	Communication and Care Coordination	Claims, Registry	Structure	Radiology: Reminder System for Screening Mammograms: Percentage of patients undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	265	N/A	Communication and Care Coordination	Registry	Process	Biopsy Follow-Up: Percentage of new patients whose biopsy results have been reviewed and communicated to the primary care/referring physician and patient by the performing physician	N/A	Registry Spec	Yes
11	322 *inverse measure	N/A	Efficiency and Cost Reduction	Registry	Efficiency	Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low-Risk Surgery Patients: Percentage of stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), or cardiac magnetic resonance (CMR) performed in low risk surgery patients 18 years or older for preoperative evaluation during the 12-month reporting period	N/A	<u>Registry Spec</u>	Yes
!!	323 *inverse measure	N/A	Efficiency and Cost Reduction	Registry	Efficiency	Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing After Percutaneous Coronary Intervention (PCI): Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in patients aged 18 years and older routinely after percutaneous coronary intervention (PCI), with reference to timing of test after PCI and symptom status	N/A	<u>Registry Spec</u>	Yes
11	324 *inverse measure	N/A	Efficiency and Cost Reduction	Registry	Efficiency	Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Testing in Asymptomatic, Low-Risk Patients: Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in asymptomatic, low coronary heart disease (CHD) risk patients 18 years and older for initial detection and risk assessment	N/A	<u>Registry Spec</u>	Yes
ļ	359	N/A	Communication and Care Coordination	Registry	Process	Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging Description: Percentage of computed tomography (CT) imaging reports for all patients, regardless of age, with the imaging study named according to a standardized nomenclature and the standardized nomenclature is used in institution's computer systems	N/A	<u>Registry Spec</u>	Yes

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			! = high priority measure;	!! = high priority approp	riate use measure, * = inverse measure	e (a lower performance rate is better)	2018 specifi	cations	
!!	360	N/A	Patient Safety	Registry	Process	Optimizing Patient Exposure to Ionizing Radiation: Count of Potential High Dose Radiation Imaging Studies: Computed Tomography (CT) and Cardiac Nuclear Medicine Studies: Percentage of computed tomography (CT) and cardiac nuclear medicine (myocardial perfusion studies) imaging reports for all patients, regardless of age, that document a count of known previous CT (any type of CT) and cardiac nuclear medicine (myocardial perfusion) studies that the patient has received in the 12-month period prior to the current study	N/A	<u>Registry Spec</u>	Yes
I	361	N/A	Patient Safety	Registry	Structure	Optimizing Patient Exposure to Ionizing Radiation: Reporting to a Radiation Dose Index Registry: Percentage of total computed tomography (CT) studies performed for all patients, regardless of age, that are reported to a radiation dose index registry AND that include at a minimum selected data elements	N/A	<u>Registry Spec</u>	Yes
ļ	362	N/A	Communication and Care Coordination	Registry	Structure	Optimizing Patient Exposure to Ionizing Radiation: Computed Tomography (CT) Images Available for Patient Follow-up and Comparison Purposes: Percentage of final reports for computed tomography (CT) studies performed for all patients, regardless of age, which document that Digital Imaging and Communications in Medicine (DICOM) format image data are available to non- affiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least a 12-month period after the study	N/A	Registry Spec	Yes
I	363	N/A	Communication and Care Coordination	Registry	Structure	Optimizing Patient Exposure to Ionizing Radiation: Search for Prior Computed Tomography (CT) Studies Through a Secure, Authorized, Media- Free, Shared Archive: Percentage of final reports of computed tomography (CT) studies performed for all patients, regardless of age, which document that a search for Digital Imaging and Communications in Medicine (DICOM) format images was conducted for prior patient CT imaging studies completed at non- affiliated external healthcare facilities or entities within the past 12-months and are available through a secure, authorized, media free, shared archive prior to an imaging study being performed	N/A	<u>Registry Spec</u>	Yes
!!	364	N/A	Communication and Care Coordination	Registry	Process	Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow- up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines: Percentage of final reports for computed tomography (CT) imaging studies of the thorax for patients aged 18 years and older with documented follow-up recommendations for incidentally detected pulmonary nodules (e.g., follow-up CT imaging studies needed or that no follow-up is needed) based at a minimum on nodule size AND patient risk factors	N/A	<u>Registry Spec</u>	Yes
!!	405 *inverse measure	N/A	Effective Clinical Care	Claims, Registry	Process	<ul> <li>Appropriate Follow-up Imaging for Incidental Abdominal Lesions:</li> <li>Percentage of final reports for abdominal imaging studies for asymptomatic patients aged 18 years and older with one or more of the following noted incidentally with follow-up imaging recommended:</li> <li>Liver lesion ≤ 0.5 cm</li> <li>Cystic kidney lesion &lt; 1.0 cm</li> <li>Adrenal lesion ≤ 1.0 cm</li> </ul>	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
!!	406 *inverse measure	N/A	Effective Clinical Care	Claims, Registry	Process	Appropriate Follow-Up Imaging for Incidental Thyroid Nodules in Patients: Percentage of final reports for computed tomography (CT) or magnetic resonance imaging (MRI) or magnetic resonance angiogram (MRA) studies of the chest or neck or ultrasound of the neck for patients aged 18 years and older with no known thyroid disease with a thyroid nodule < 1.0 cm noted incidentally with follow-up imaging recommended	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change

					67				
Priority	Quality #	NQF#	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifications/F	Reporting Instructions	Change in 2018?
			! = high priority measure;	<pre>!! = high priority approp</pre>	riate use measure, * = inverse measur	e (a lower performance rate is better)	2018 specifi	ications	
	436	N/A	Effective Clinical Care	Claims, Registry	Process	Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques: Percentage of final reports for patients aged 18 years and older undergoing CT with documentation that one or more of the following dose reduction techniques were used: • Automated exposure control • Adjustment of the mA and/or kV according to patient size • Use of iterative reconstruction technique	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
					Measures Primarily Relev	rant to Interventional Radiologists			
!!	21	268	Patient Safety	Claims, Registry	Process	Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin: Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for a first OR second generation cephalosporin prophylactic antibiotic, who had an order for a first OR second generation cephalosporin for antimicrobial prophylaxis	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
I	23	239	Patient Safety	Claims, Registry	Process	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients): Percentage of surgical patients aged 18 years and older undergoing procedures for which VTE prophylaxis is indicated in all patients, who had an order for Low Molecular Weight Heparin (LMWH), Low- Dose Unfractionated Heparin (LDUH), adjusted-dose warfarin, fondaparinux or mechanical prophylaxis to be given within 24 hours prior to incision time or within 24 hours after surgery end time	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
ŗ	24	45	Communication and Care Coordination	Claims, Registry	Process	Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older: Percentage of patients aged 50 years and older treated for a fracture with documentation of communication, between the physician treating the fracture and the physician or other clinician managing the patient's on-going care, that a fracture occurred and that the patient was or should be considered for osteoporosis treatment or testing. This measure is reported by the physician who treats the fracture and who therefore is held accountable for the communication	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
ļ	76	N/A	Patient Safety	Claims, Registry	Process	Prevention of Central Venous Catheter (CVC)-Related Bloodstream Infections: Percentage of patients, regardless of age, who undergo central venous catheter (CVC) insertion for whom CVC was inserted with all elements of maximal sterile barrier technique, hand hygiene, skin preparation and, if ultrasound is used, sterile ultrasound techniques followed	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	145	n/a	Patient Safety	Registry	Process	Radiology: Exposure Dose or Time Reported for Procedures Using Fluoroscopy: Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available)	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
ļ	259	N/A	Patient Safety	Registry	Outcome	Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non- Ruptured Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of patients undergoing endovascular repair of small or moderate non-ruptured abdominal aortic aneurysms (AAA) that do not experience a major complication (discharged to home no later than post-operative day #2)	N/A	<u>Registry Spec</u>	Yes
ļ	344	N/A	Effective Clinical Care	Registry	Outcome	Rate of Carotid Artery Stenting (CAS) for Asymptomatic Patients, Without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of asymptomatic patients undergoing CAS who are discharged to home no later than post-operative day #2	N/A	<u>Registry Spec</u>	Yes

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			! = high priority measure;	!! = high priority approp	riate use measure, * = inverse measur	e (a lower performance rate is better)	2018 specifi	cations	1
l	345 *inverse measure	1543	Effective Clinical Care	Registry	Outcome	Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Artery Stenting (CAS): Percent of asymptomatic patients undergoing CAS who experience stroke or death following surgery while in the hospital	N/A	<u>Registry Spec</u>	Yes
ļ	358	N/A	Person and Caregiver-Centered Experience and Outcomes	Registry	Process	Patient-Centered Surgical Risk Assessment and Communication: Percentage of patients who underwent a non-emergency surgery who had their personalized risks of postoperative complications assessed by their surgical team prior to surgery using a clinical data-based, patient-specific risk calculator and who received personal discussion of those risks with the surgeon.	N/A	<u>Registry Spec</u>	No
*!	374	N/A	Communication and Care Coordination	EHR, Registry	Process	Closing the Referral Loop: Receipt of Specialist Report: Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred	N/A	Registry Spec	Yes
!	404	N/A	Effective Clinical Care	Registry	Intermediate Outcome	Anesthesiology Smoking Abstinence: The percentage of current smokers who abstain from cigarettes prior to anesthesia on the day of elective surgery or procedure.	N/A	<u>Registry Spec</u>	Yes
	409	N/A	Effective Clinical Care	Registry	Outcome	Clinical Outcome Post-Endovascular Stroke Treatment: Percentage of patients with a mRs score of 0 to 2 at 90 days following endovascular stroke intervention	N/A	<u>Registry Spec</u>	Yes
	413	N/A	Effective Clinical Care	Registry	Intermediate Outcome	Door to Puncture Time for Endovascular Stroke Treatment: Percentage of patients undergoing endovascular stroke treatment who have a door to puncture time of less than two hours	N/A	Registry Spec	Yes
	418	53	Effective Clinical Care	Claims, Registry	Process	Osteoporosis Management in Women Who Had a Fracture: The percentage of women age 50-85 who suffered a fracture and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis in the six months after the fracture.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	420	N/A	Effective Clinical Care	Registry	Outcome	Varicose Vein Treatment with Saphenous Ablation: Outcome Survey: Percentage of patients treated for varicose veins (CEAP C2-S) who are treated with saphenous ablation (with or without adjunctive tributary treatment) that report an improvement on a disease specific patient reported outcome survey instrument after treatment	N/A	<u>Registry Spec</u>	Yes
	421	N/A	Effective Clinical Care	Registry	Process	Appropriate Assessment of Retrievable Inferior Vena Cava Filters for Removal: Percentage of patients in whom a retrievable IVC filter is placed who, within 3 months post-placement, have a documented assessment for the appropriateness of continued filtration, device removal or the inability to contact the patient with at least two attempts	N/A	<u>Registry Spec</u>	Yes
	437 *inverse measure	N/A	Patient Safety	Claims, Registry	Outcome	Rate of Surgical Conversion from Lower Extremity Endovascular Revasculatization Procedure: Inpatients assigned to endovascular treatment for obstructive arterial disease, the percent of patients who undergo unplanned major amputation or surgical bypass within 48 hours of the index procedure	<u>Claims Spec</u>	<u>Registry Spec</u>	No
	465	N/A	Patient Safety	Registry	Process	Uterine Artery Embolization Technique: Documentation of Angiographic Endpoints and Interrogation of Ovarian Arteries: Documentation of angiographic endpoints of embolization AND the documentation of embolization strategies in the presence of unilateral or bilateral absent uterine arteries	N/A	<u>Registry Spec</u>	New Measu

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			! = high priority measure;	<pre>!! = high priority approp</pre>	riate use measure, * = inverse measur	e (a lower performance rate is better)	2018 specifi	cations	
ļ	147	N/A	Communication and Care Coordination	Claims, Registry	Process	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy: Percentage of final reports for all patients, regardless of age, undergoing bone scintigraphy that include physician documentation of correlation with existing relevant imaging studies (e.g., x- ray, MRI, CT, etc.) that were performed	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
					Measures Primarily Re	levant to Radiation Oncologists			
	12	86	Effective Clinical Care	Claims, Registry, EHR	Process	Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation: Percentage of patients aged 18 years and older with a diagnosis of primary open-angle glaucoma (POAG) who have an optic nerve head evaluation during one or more office visits within 12 months.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
Ĩ	46	97	Communication and Care Coordination	Claims, Web Interface, Registry	Process	Medication Reconciliation Post-Discharge: The percentage of discharges from any inpatient facility (e.g. hospital, skilled nursing facility, or rehabilitation facility) for patients 18 years and older of age seen within 30 days following discharge in the office by the physician, prescribing practitioner, registered nurse, or clinical pharmacist providing on-going care for whom the discharge medication list was reconciled with the current medication list in the outpatient medical record. This measure is reported as three rates stratified by age group: • Reporting Criteria 1: 18-64 years of age	<u>Claims Spec</u>	<u>Registry Spec</u>	
						<ul> <li>Reporting Criteria 2: 65 years and older</li> <li>Total Rate: All patients 18 years of age and older.</li> </ul>			Yes
	47	326	Communication and Care Coordination	Claims, Registry	Process	Care Plan: Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	99	391	Effective Clinical Care	Claims, Registry	Process	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade: Percentage of breast cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes), and the histologic grade.	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
	100	392	Effective Clinical Care	Claims, Registry	Process	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade: Percentage of colon and rectum cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes) and the histologic grade.	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
11	102	389	Efficiency and Cost Reduction	EHR, Registry	Process	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low (or very low) risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer	N/A	<u>Registry Spec</u>	Yes
	104	390	Effective Clinical Care	Registry	Process	Prostate Cancer: Adjuvant Hormonal Therapy for High Risk or Very High Risk Prostate Cancer: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high or very high risk of recurrence receiving external beam radiotherapy to the prostate who were prescribed adjuvant hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)	N/A	<u>Registry Spec</u>	Yes

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			! = high priority measure;	<pre>!! = high priority approp</pre>	riate use measure, * = inverse measur	e (a lower performance rate is better)	2018 specifi	cations	
	110	41	Community/Population Health	Claims, EHR, Web Interface, Registry	Process	Preventive Care and Screening: Influenza Immunization: Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	111	43	Community/Population Health	Claims, EHR, Web Interface, Registry	Process	Pneumonia Vaccination Status for Older Adults: Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
	112	2372	Effective Clinical Care	Claims, Web Interface, Registry, EHR	Process	Breast Cancer Screening: Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.	<u>Claims Spec</u>	Registry Spec	Yes
	113	34	Effective Clinical Care	Claims, Web Interface, Registry, EHR,EHREHR	Process	Colorectal Cancer Screening: Percentage of patients 50 - 75 years of age who had appropriate screening for colorectal cancer.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	128	421	Community/Population Health	Claims, Web Interface, Registry, EHR	Process	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow- Up Plan: Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the previous 12 months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous 12 months of the current encounter	<u>Claims Spec</u>	<u>Registry Spec</u>	
						Normal Parameters: Age 18 years <b>and older</b> BMI ≥ 18.5 and < 25 kg/m2.			Yes
	130	419	Patient Safety	Claims, EHR, Registry	Process	Documentation of Current Medications in the Medical Record: Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	131	420	Communication and Care Coordination	Claims, Registry	Process	Pain Assessment and Follow-Up: Percentage of visits for patients aged 18 years and older with documentation of a pain assessment using a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	134	418	Community/Population Health	Claims, Web Interface, Registry, EHR	Process	Preventive Care and Screening: Screening for Depression and Follow-Up Plan: Percentage of patients aged 12 years and older screened for depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	143	384	Person and Caregiver-Centered Experience and Outcomes	EHR, Registry	Process	Oncology: Medical and Radiation – Pain Intensity Quantified: Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified	N/A	<u>Registry Spec</u>	Yes
!	144	383	Person and Caregiver-Centered Experience and Outcomes	Registry	Process	Oncology: Medical and Radiation – Plan of Care for Pain: Percentage of visits for patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having pain with a documented plan of care to address pain	N/A	Registry Spec	Yes
11	156	382	Patient Safety	Claims, Registry	Process	Oncology: Radiation Dose Limits to Normal Tissues: Percentage of patients, regardless of age, with a diagnosis of breast, rectal, pancreatic or lung cancer receiving 3D conformal radiation therapy who had documentation in medical record that radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues	<u>Claims Spec</u>	<u>Registry Spec</u>	No

Radiology 2018 Preferred MIPS Measures
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Priority	Quality #	NQF#	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifications/R		Change in 2018?
			! = high priority measure;	<pre>!! = high priority approp</pre>	riate use measure, * = inverse measure	e (a lower performance rate is better)	2018 specifi	cations	
	226	28	Community/Population Health	Claims, EHR, Web Interface, Registry	Process	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention: a. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 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 counseling intervention if identified as a tobacco user.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	236	18	Effective Clinical Care	Claims, Web Interface, Registry, EHR	Intermediate Outcome	Controlling High Blood Pressure: Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.	<u>Claims Spec</u>	Registry Spec	Yes
	251	1855	Effective Clinical Care	Claims, Registry	Structure	Quantitative Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients: This is a measure based on whether quantitative evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) by immunohistochemistry (IHC) uses the system recommended in the current ASCO/CAP Guidelines for Human Epidermal Growth Factor Receptor 2 Testing in breast cancer.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	317	N/A	Community/Population Health	Claims, Registry, EHR	Process	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented: Percentage of patients aged 18 years and older seen during the reporting period who were screened for high blood pressure AND a recommended follow-up plan is documented based on the current blood pressure (BP) reading as indicated.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	342	N/A	Person and Caregiver-Centered Experience and Outcomes	Registry	Outcome	Pain Brought Under Control Within 48 Hours: Patients aged 18 and older who report being uncomfortable because of pain at the initial assessment (after admission to palliative care services) that report pain was brought to a comfortable level within 48 hours.	N/A	Registry Spec	No

Priority	Quality #	NQF#	CMS E-Measure	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifica	tions/Reporting Instructions	Change in 2018?
					appropriate use measur	e, * = inverse measure (a	lower performance rate is better)	201	8 specifications	
	12	86	N/A	Effective Clinical Care	Claims, Registry, EHR	Process	Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation: Percentage of patients aged 18 years and older with a diagnosis of primary open-angle glaucoma (POAG) who have an optic nerve head evaluation during one or more office visits within 12 months.	<u>Claims Spec</u>	Registry Spec	Yes
=	21	268	N/A	Patient Safety	Claims, Registry	Process	Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin: Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for a first OR second generation cephalosporin prophylactic antibiotic, who had an order for a first OR second generation cephalosporin for antimicrobial prophylaxis	<u>Claims Spec</u>	Registry Spec	Yes
	23	239	N/A	Patient Safety	Claims, Registry	Process	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients): Percentage of surgical patients aged 18 years and older undergoing procedures for which VTE prophylaxis is indicated in all patients, who had an order for Low Molecular Weight Heparin (LMWH), Low-Dose Unfractionated Heparin (LDUH), adjusted-dose warfarin, fondaparinux or mechanical prophylaxis to be given within 24 hours prior to incision time or within 24 hours after surgery end time	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
!	24	45	N/A	Communication and Care Coordination	Claims, Registry	Process	Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older: Percentage of patients aged 50 years and older treated for a fracture with documentation of communication, between the physician treating the fracture and the physician or other clinician managing the patient's on- going care, that a fracture occurred and that the patient was or should be considered for osteoporosis treatment or testing. This measure is reported by the physician who treats the fracture and who therefore is held accountable for the communication	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
ļ	46	97	N/A	Communication and Care Coordination	Claims, Web Interface, Registry	Process	Medication Reconciliation Post-Discharge: The percentage of discharges from any inpatient facility (e.g. hospital, skilled nursing facility, or rehabilitation facility) for patients 18 years and older of age seen within 30 days following discharge in the office by the physician, prescribing practitioner, registered nurse, or clinical pharmacist providing on-going care for whom the discharge medication list was reconciled with the current medication list in the outpatient medical record. This measure is reported as three rates stratified by age group: • Reporting Criteria 1: 18-64 years of age • Reporting Criteria 2: 65 years and older • Total Rate: All patients 18 years of age and older.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	47	326	N/A	Communication and Care Coordination	Claims, Registry	Process	Care Plan: Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan.	<u>Claims Spec</u>	Registry Spec	Yes
	76	N/A	N/A	Patient Safety	Claims, Registry	Process	Prevention of Central Venous Catheter (CVC)-Related Bloodstream Infections: Percentage of patients, regardless of age, who undergo central venous catheter (CVC) insertion for whom CVC was inserted with all elements of maximal sterile barrier technique, hand hygiene, skin preparation and, if ultrasound is used, sterile ultrasound techniques followed	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes

Priority	Quality #	NQF#	CMS E-Measure	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifica	tions/Reporting Instructions	Change in 2018?
			! = high priority me		appropriate use measu	re, * = inverse measure (a l	ower performance rate is better)	2018	specifications	
	99	391	N/A	Effective Clinical Care	Claims, Registry	Process	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade: Percentage of breast cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes), and the histologic grade.	Claims Spec	<u>Registry Spec</u>	Only Copyright change
	100	392	N/A	Effective Clinical Care	Claims, Registry	Process	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade: Percentage of colon and rectum cancer resection pathology reports that include the pT category (primary tumor), the pN category (regional lymph nodes) and the histologic grade.	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
11	102	389	129v7	Efficiency and Cost Reduction	EHR, Registry	Process	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low (or very low) risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer	N/A	Registry Spec	Yes
	104	390	N/A	Effective Clinical Care	Registry	Process	Prostate Cancer: Adjuvant Hormonal Therapy for High Risk or Very High Risk Prostate Cancer: Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high or very high risk of recurrence receiving external beam radiotherapy to the prostate who were prescribed adjuvant hormonal therapy (GnRH [gonadotropin-releasing hormone] agonist or antagonist)	N/A	<u>Registry Spec</u>	Yes
	110	41	147v7	Community/Populati on Health	Claims, EHR, Web Interface, Registry	Process	Preventive Care and Screening: Influenza Immunization: Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	111	43	127v6	Community/Populati on Health	Claims, EHR, Web Interface, Registry	Process	Pneumonia Vaccination Status for Older Adults: Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.	Claims Spec	<u>Registry Spec</u>	Only Copyright change
	112	2372		Effective Clinical Care	Claims, Web Interface, Registry, EHR	Process	Breast Cancer Screening: Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.	Claims Spec	Registry Spec	Yes
	113	34	130v6	Effective Clinical Care	Claims, Web Interface, Registry, EHR, EHREHR	Process	<b>Colorectal Cancer Screening:</b> Percentage of patients 50 - 75 years of age who had appropriate screening for colorectal cancer.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	128	421	69v6	Community/Populati on Health	Claims, Web Interface, Registry, EHR	Process	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan: Percentage of patients aged 18 years and older with a BMI documented during the current encounter or during the previous 12 months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous 12 months of the current encounter	<u>Claims Spec</u>	Registry Spec	
							Normal Parameters: Age 18 years and older BMI $\ge$ 18.5 and < 25 kg/m2.			Yes
	130	419	68v7	Patient Safety	Claims, EHR, Registry	Process	Documentation of Current Medications in the Medical Record: Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration	Claims Spec	<u>Registry Spec</u>	Yes
ļ	131	420		Communication and Care Coordination	Claims, Registry	Process	Pain Assessment and Follow-Up: Percentage of visits for patients aged 18 years and older with documentation of a pain assessment using a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes

Priority	Quality #	NQF#	CMS E-Measure ID	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifica	tions/Reporting Instructions	Change in 2018?
			! = high priority m	easure; !! = high priority	appropriate use measu	re, * = inverse measure (a l	ower performance rate is better)	2018	specifications	
	134	418	2v7	Community/Populati on Health	Claims, Web Interface, Registry, EHR	Process	Preventive Care and Screening: Screening for Depression and Follow-Up Plan: Percentage of patients aged 12 years and older screened for depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
ļ	143	384	157v6	Person and Caregiver-Centered Experience and Outcomes	EHR, Registry	Process	Oncology: Medical and Radiation – Pain Intensity Quantified: Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified	N/A	Registry Spec	Yes
ļ	144	383	N/A	Person and Caregiver-Centered Experience and Outcomes	Registry	Process	Oncology: Medical and Radiation – Plan of Care for Pain: Percentage of visits for patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having pain with a documented plan of care to address pain	N/A	<u>Registry Spec</u>	Yes
ļ	145	N/A	N/A	Patient Safety	Registry	Process	Radiology: Exposure Dose or Time Reported for Procedures Using Fluoroscopy: Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available)	<u>Claims Spec</u>	Registry Spec	Yes
l	146 * inverse measure	508	N/A	Efficiency & Cost Reduction	Claims, Registry	Process	Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Mammography Screening: Percentage of final reports for screening mammograms that are classified as "probably benign"	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
ļ	147	N/A	N/A	Communication and Care Coordination	Claims, Registry	Process	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy: Percentage of final reports for all patients, regardless of age, undergoing bone scintigraphy that include physician documentation of correlation with existing relevant imaging studies (e.g., x-ray, MRI, CT, etc.) that were performed	Claims Spec	<u>Registry Spec</u>	Only Copyright change
11	156	382	N/A	Patient Safety	Claims, Registry	Process	Oncology: Radiation Dose Limits to Normal Tissues: Percentage of patients, regardless of age, with a diagnosis of breast, rectal, pancreatic or lung cancer receiving 3D conformal radiation therapy who had documentation in medical record that radiation dose limits to normal tissues were established prior to the initiation of a course of 3D conformal radiation for a minimum of two tissues	<u>Claims Spec</u>	<u>Registry Spec</u>	No
	195	507	N/A	Effective Clinical Care	Claims, Registry	Process	Radiology: Stenosis Measurement in Carotid Imaging Reports: Percentage of final reports for carotid imaging studies (neck magnetic resonance angiography [MRA], neck computed tomography angiography [CTA], neck duplex ultrasound, carotid angiogram) performed that include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	225	509	N/A	Communication and Care Coordination	Claims, Registry	Structure	Radiology: Reminder System for Screening Mammograms: Percentage of patients undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram	<u>Claims Spec</u>	Registry Spec	Yes
	226	28	138v6	Community/Populati on Health	Claims, EHR, Web Interface, Registry	Process	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention: a. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 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 counseling intervention if identified as a tobacco user.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	236	18	165v6	Effective Clinical Care	Claims, Web Interface, Registry, EHR	Intermediate Outcome	Controlling High Blood Pressure: Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.	<u>Claims Spec</u>	Registry Spec	Yes

Priority	Quality #	NQF#	CMS E-Measure	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifica	tions/Reporting Instructions	Change in 2018?
			! = high priority me		appropriate use measu	re, * = inverse measure (a l	lower performance rate is better)	2018	8 specifications	
	251	1855	N/A	Effective Clinical Care	Claims, Registry	Structure	Quantitative Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients: This is a measure based on whether quantitative evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) by immunohistochemistry (IHC) uses the system recommended in the current ASCO/CAP Guidelines for Human Epidermal Growth Factor Receptor 2 Testing in breast cancer.	<u>Claims Spec</u>	Registry Spec	Yes
ļ	259	N/A	N/A	Patient Safety	Registry	Outcome	Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non- Ruptured Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of patients undergoing endovascular repair of small or moderate non- ruptured abdominal aortic aneurysms (AAA) that do not experience a major complication (discharged to home no later than post-operative day #2)	N/A	Registry Spec	Yes
!	265	N/A	N/A	Communication and Care Coordination	Registry	Process	Biopsy Follow-Up: Percentage of new patients whose biopsy results have been reviewed and communicated to the primary care/referring physician and patient by the performing physician	N/A	<u>Registry Spec</u>	Yes
	317	N/A	22v6	Community/Populati on Health	Claims, Registry, EHR	Process	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented: Percentage of patients aged 18 years and older seen during the reporting period who were screened for high blood pressure AND a recommended follow-up plan is documented based on the current blood pressure (BP) reading as indicated.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
i	342	N/A	N/A	Person and Caregiver-Centered Experience and Outcomes	Registry	Outcome	Pain Brought Under Control Within 48 Hours: Patients aged 18 and older who report being uncomfortable because of pain at the initial assessment (after admission to palliative care services) that report pain was brought to a comfortable level within 48 hours.	N/A	<u>Registry Spec</u>	Νο
	344	N/A	N/A	Effective Clinical Care	Registry	Outcome	Rate of Carotid Artery Stenting (CAS) for Asymptomatic Patients, Without Major Complications (Discharged to Home by Post-Operative Day #2): Percent of asymptomatic patients undergoing CAS who are discharged to home no later than post-operative day #2	N/A	Registry Spec	Yes
ļ	358	N/A	N/A	Person and Caregiver-Centered Experience and Outcomes	Registry	Process	Patient-Centered Surgical Risk Assessment and Communication: Percentage of patients who underwent a non-emergency surgery who had their personalized risks of postoperative complications assessed by their surgical team prior to surgery using a clinical data-based, patient-specific risk calculator and who received personal discussion of those risks with the surgeon.	N/A	Registry Spec	No
i	359	N/A	N/A	Communication and Care Coordination	Registry	Process	Optimizing Patient Exposure to Ionizing Radiation: Utilization of a Standardized Nomenclature for Computed Tomography (CT) Imaging Description: Percentage of computed tomography (CT) Imaging reports for all patients, regardless of age, with the imaging study named according to a standardized nomenclature and the standardized nomenclature is used in institution's computer systems	N/A	<u>Registry Spec</u>	Yes
!!	360	N/A	N/A	Patient Safety	Registry	Process	Optimizing Patient Exposure to Ionizing Radiation: Count of Potential High Dose Radiation Imaging Studies: Computed Tomography (CT) and Cardiac Nuclear Medicine Studies: Percentage of computed tomography (CT) and cardiac nuclear medicine (myocardial perfusion studies) imaging reports for all patients, regardless of age, that document a count of known previous CT (any type of CT) and cardiac nuclear medicine (myocardial perfusion) studies that the patient has received in the 12-month period prior to the current study	N/A	<u>Registry Spec</u>	Yes
ļ	361	N/A	N/A	Patient Safety	Registry	Structure	Optimizing Patient Exposure to Ionizing Radiation: Reporting to a Radiation Dose Index Registry: Percentage of total computed tomography (CT) studies performed for all patients, regardless of age, that are reported to a radiation dose index registry AND that include at a minimum selected data elements	N/A	Registry Spec	Yes

Priority	Quality #	NQF#	CMS E-Measure	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifications/Reporting Instructions		Change in 2018?
			! = high priority me		appropriate use measu	re, * = inverse measure (a l	lower performance rate is better)	2018	2018 specifications	
-	362	N/A	N/A	Communication and Care Coordination	Registry	Structure	Optimizing Patient Exposure to Ionizing Radiation: Computed Tomography (CT) Images Available for Patient Follow-up and Comparison Purposes: Percentage of final reports for computed tomography (CT) studies performed for all patients, regardless of age, which document that Digital Imaging and Communications in Medicine (DICOM) format image data are available to non-affiliated external healthcare facilities or entities on a secure, media free, reciprocally searchable basis with patient authorization for at least a 12-month period after the study	N/A	<u>Registry Spec</u>	Yes
	363	N/A	N/A	Communication and Care Coordination	Registry	Structure	Optimizing Patient Exposure to Ionizing Radiation: Search for Prior Computed Tomography (CT) Studies Through a Secure, Authorized, Media-Free, Shared Archive: Percentage of final reports of computed tomography (CT) studies performed for all patients, regardless of age, which document that a search for Digital Imaging and Communications in Medicine (DICOM) format images was conducted for prior patient CT imaging studies completed at non-affiliated external healthcare facilities or entities within the past 12-months and are available through a secure, authorized, media free, shared archive prior to an imaging study being performed	N/A	Registry Spec	Yes
	364	N/A	N/A	Communication and Care Coordination	Registry	Process	Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines: Percentage of final reports for computed tomography (CT) imaging studies of the thorax for patients aged 18 years and older with documented follow-up recommendations for incidentally detected pulmonary nodules (e.g., follow-up CT imaging studies needed or that no follow-up ps needed) based at a minimum on nodule size AND patient risk factors	N/A	<u>Registry Spec</u>	Yes
!	374	N/A	50v6	Communication and Care Coordination	EHR, Registry	Process	Closing the Referral Loop: Receipt of Specialist Report: Percentage of patients with referrals, regardless of age, for which the referring provider receives a report from the provider to whom the patient was referred	N/A	Registry Spec	Yes
!	404	N/A	N/A	Effective Clinical Care	Registry	Intermediate Outcome	Anesthesiology Smoking Abstinence: The percentage of current smokers who abstain from cigarettes prior to anesthesia on the day of elective surgery or procedure.	N/A	<u>Registry Spec</u>	Yes
	409	N/A	N/A	Effective Clinical Care	Registry	Outcome	Clinical Outcome Post Endovascular Stroke Treatment: Percentage of patients with a mRs score of 0 to 2 at 90 days following endovascular stroke intervention	N/A	<u>Registry Spec</u>	Yes
	413	N/A	N/A	Effective Clinical Care	Registry	Intermediate Outcome	Door to Puncture Time for Endovascular Stroke Treatment: Percentage of patients undergoing endovascular stroke treatment who have a door to puncture time of less than two hours	N/A	Registry Spec	Yes
	418	53	N/A	Effective Clinical Care	Claims, Registry	Process	Osteoporosis Management in Women Who Had a Fracture: The percentage of women age 50-85 who suffered a fracture and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis in the six months after the fracture.	<u>Claims Spec</u>	<u>Registry Spec</u>	Yes
	420	N/A	N/A	Effective Clinical Care	Registry	Outcome	Varicose Vein Treatment with Saphenous Ablation: Outcome Survey: Percentage of patients treated for varicose veins (CEAP C2-S) who are treated with saphenous ablation (with or without adjunctive tributary treatment) that report an improvement on a disease specific patient reported outcome survey instrument after treatment	N/A	Registry Spec	Yes

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			! = high priority me	easure; !! = high priority	appropriate use measur	re, * = inverse measure (a l	ower performance rate is better)	2018	specifications	
	421	N/A	N/A	Effective Clinical Care	Registry	Process	Appropriate Assessment of Retrievable Inferior Vena Cava (IVC) Filters for Removal: Percentage of patients in whom a retrievable IVC filter is placed who, within 3 months post-placement, have a documented assessment for the appropriateness of continued filtration, device removal or the inability to contact the patient with at least two attempts	N/A	<u>Registry Spec</u>	Yes
	436	N/A	N/A	Effective Clinical Care	Claims, Registry	Process	Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques: Percentage of final reports for patients aged 18 years and older undergoing CT with documentation that one or more of the following dose reduction techniques were used: • Automated exposure control • Adjustment of the mA and/or kV according to patient size • Use of iterative reconstruction technique	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
	437 *inverse measure	N/A	N/A	Patient Safety	Claims, Registry	Outcome	Rate of Surgical Conversion from Lower Extremity Endovascular Revasculatization Procedure: Inpatients assigned to endovascular treatment for obstructive arterial disease, the percent of patients who undergo unplanned major amputation or surgical bypass within 48 hours of the index procedure	<u>Claims Spec</u>	<u>Registry Spec</u>	No
11	322 *inverse measure	N/A	N/A	Efficiency and Cost Reduction	Registry	Efficiency	Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low-Risk Surgery Patients: Percentage of stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), or cardiac magnetic resonance (CMR) performed in low risk surgery patients 18 years or older for preoperative evaluation during the 12-month reporting period	N/A	<u>Registry Spec</u>	Yes
11	323 *inverse measure	N/A	N/A	Efficiency and Cost Reduction	Registry	Efficiency	Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing After Percutaneous Coronary Intervention (PCI): Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in patients aged 18 years and older routinely after percutaneous coronary intervention (PCI), with reference to timing of test after PCI and symptom status	N/A	<u>Registry Spec</u>	Yes
11	324 *inverse measure	N/A	N/A	Efficiency and Cost Reduction	Registry	Efficiency	Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Testing in Asymptomatic, Low-Risk Patients: Percentage of all stress single-photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), stress echocardiogram (ECHO), cardiac computed tomography angiography (CCTA), and cardiovascular magnetic resonance (CMR) performed in asymptomatic, low coronary heart disease (CHD) risk patients 18 years and older for initial detection and risk assessment	N/A	<u>Registry Spec</u>	Yes
!	345 *inverse measure	N/A	N/A	Effective Clinical Care	Registry	Outcome	Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Artery Stenting (CAS): Percent of asymptomatic patients undergoing CAS who experience stroke or death following surgery while in the hospital	N/A	Registry Spec	Yes
11	405 *inverse measure	N/A	N/A	Effective Clinical Care	Claims, Registry	Process	Appropriate Follow-up Imaging for Incidental Abdominal Lesions:           Percentage of final reports for abdominal imaging studies for           asymptomatic patients aged 18 years and older with one or more of the           following noted incidentally with follow-up imaging recommended:           • Liver lesion ≤ 0.5 cm           • Cystic kidney lesion < 1.0 cm	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change
	406 *inverse measure	N/A	N/A	Effective Clinical Care	Claims, Registry	Process	Appropriate Follow-Up Imaging for Incidental Thyroid Nodules in Patients: Percentage of final reports for computed tomography (CT) or magnetic resonance imaging (MRI) or magnetic resonance angiogram (MRA) studies of the chest or neck or ultrasound of the neck for patients aged 18 years and older with no known thyroid disease with a thyroid nodule < 1.0 cm noted incidentally with follow-up imaging recommended	<u>Claims Spec</u>	<u>Registry Spec</u>	Only Copyright change

Priority	Quality #	NQF#	CMS E-Measure ID	National Quality Strategy Domain	Reporting Method	Measure Type	Measure Title: Description	Measure Specifica	tions/Reporting Instructions	Change in 2018?
			! = high priority me	2018						
	465	N/A	N/A	Patient Safety	Registry	Process	Uterine Artery Embolization Technique: Documentation of Angiographic Endpoints and Interrogation of Ovarian Arteries: Documentation of angiographic endpoints of embolization AND the documentation of embolization strategies in the presence of unilateral or bilateral absent uterine	N/A	<u>Registry Spec</u>	
							arteries			New Measure
	462	N/A	645v1	Effective Clinical Care	EHR	Process	Bone Density Evaluation for Patients with Prostate Cancer and Receiving Androgen Deprivation Therapy: Patients determined as having prostate cancer who are currently starting or undergoing androgen deprivation therapy (ADT), for an anticipated period of 12 months or greater and who receive an initial bone density evaluation. The bone density evaluation must be prior to the start of ADT or within 3 months of the start of ADT.	N/A	N/A	New Measure

Qualified Clinical Data Registry	(QCDR) Non-MIPS Measures Supported 2018
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#### DISCLAIMER: Inclusion of Non-MIPS measures in the ACR NRDR Qualified Clinical Data Registry are subject to an annual measure review by CMS.

		! = High priority measure				
NON - MIPS Measure	Measure Title	Measure Description	NQS Domain	Measure Type	NRDR Database	Inverse Measure *
ACRad 1	CT Colonography True Positive Rate	Percentage of exams with confirming colonoscopies for a ≥10mm polyp detected by CTC (True Positive Rate)	Effective Clinical Care	Outcome	CT Colongraphy Registry	
ACRad 3	Screening Mammography Cancer Detection Rate (CDR)	The fraction of all screening mammograms that are interpreted as positive (abnormal) and have a tissue diagnosis of cancer within 12 months (expressed per 1000 exams, not as a percentage)	Effective Clinical Care	Outcome	National Mammography Database	
ACRad 5 !	Screening Mammography Abnormal Interpretation Rate (Recall Rate)	The percentage of screening mammograms interpreted as positive (abnormal)	Efficiency and Cost	Outcome	National Mammography Database	*
ACRad 6	Screening Mammography Positive Predictive Value 2 (PPV2 - Biopsy Recommended)	The percentage of screening mammograms where biopsy was recommended that have a tissue diagnosis of cancer within 12 months	Effective Clinical Care	Outcome	National Mammography Database	
ACRad 7	Screening Mammography Node Negativity Rate	The percentage of invasive cancers detected at screening mammography that are node negative	Effective Clinical Care	Outcome	National Mammography Database	
ACRad 8	Screening Mammography Minimal Cancer Rate	The percentage of cancers detected at screening mammography that are invasive carcinoma $\leq$ 10 mm or DCIS	Effective Clinical Care	Outcome	National Mammography Database	
ACRad 15 !	Report Turnaround Time: Radiography	Mean radiography RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	*
ACRad 16	Report Turnaround Time: Ultrasound (Excluding Breast US)	Mean Ultrasound RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	*
ACRad 17	Report Turnaround Time: MRI	Mean MRI RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	*
ACRad 18	Report Turnaround Time: CT	Mean CT RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	*
ACRad 19	Report Turnaround Time: PET	Mean PET RTAT	Communication and Care Coordination	Outcome	General Radiology Improvement Database	*
ACRad 25	Report Turnaround Time: Mammography	Mean mammography report turnaround time (RTAT)	Communication and Care Coordination	Outcome	General Radiology Improvement Database	*
ACRad 21	Lung Cancer Screening Cancer Detection Rate (CDR)	The percentage of screenings of lung cancer that were interpreted as positive (Lung-RADS category 3 or 4) and result in a tissue diagnosis of cancer within 12 months.	Effective Clinical Care	Outcome	Lung Cancer Screening Registry	
ACRad 22	Lung Cancer Screening Positive Predictive Value (PPV)	The percentage of screenings for lung cancer with abnormal interpretation (Lung-RADS 3 or 4) that result in a tissue diagnosis of cancer within 12 months.	Effective Clinical Care	Outcome	Lung Cancer Screening Registry	
ACRad 23	Lung Cancer Screening Abnormal Interpretation Rate	The percentage of screening lung cancer interpreted as positive (Lung-RADS Category 3 or 4).	Efficiency and Cost	Outcome	Lung Cancer Screening Registry	*
ACRad 26	Appropriate venous access for hemodialysis	Percentage of patients undergoing tunneled (longterm) catheter access for hemodialysis via subclavian access as compared to internal jugular access	Patient Safety	Process	Interventional Radiology Registry	*
ACRad 28	Rate of early peristomal infection following fluoroscopically guided gastrostomy tube placement	Percentage of patients with peristomal gastrostomy infection no more than14 days following initial tube placement	Patient Safety	Outcome	Interventional Radiology Registry	*
ACRad 29	Rate of percutaneous nephrostomy tube replacement within 30 days secondary to dislodgement	Number of percutaneous nephrostomy tubes requiring replacement of a percutaneous nephrostomy tube secondary to dislodgement within 30 days of initial placement	Patient Safety	Outcome	Interventional Radiology Registry	*
ACRad 30 !	Rate of Inadequate Percutaneous Image-Guided Biopsy	The percentage of percutaneous imageguided (US, CT, fluoro) biopsy procedures performed in which sampling was inadequate for diagnosis on the final pathology report	Patient Safety	Intermediate Outcome	Interventional Radiology Registry	*
ACRad 31 !	Percent of CT Abdomen-Pelvis exams without contrast (single phase scan) for which Dose Length Product is at or below the sizespecific diagnostic reference level	Percent of CT Abdomen-Pelvis exams without contrast (single phase scan) for which Dose Length Product is at or below the size-specific diagnostic reference level. Note: Calculated at facility/TIN level and assigned to all NPIs who read CT under that TIN	Patient Safety	Outcome	Dose Index Registry	
ACRad 32 !	Percent of CT Chest exams without contrast (single phase scan) for which Dose Length Product is at or below the size-specific diagnostic reference level	Percent of CT Chest exams without contrast (single phase scan) for which Dose Length Product is at or below the size-specific diagnostic reference level. Note: Calculated at facility/TIN level and assigned to all NPIs who read CT under that TIN	Patient Safety	Outcome	Dose Index Registry	
ACRad 33 !	Percent of CT Head/Brain exams without contrast (single phase scan) for which Dose Length Product is at or below the sizespecific diagnostic reference level	Percent of CT Head/Brain exams without contrast (single phase scan) for which Dose Length Product is at or below the size-specific diagnostic reference level. Note: Calculated at facility/TIN level and assigned to all NPIs who read CT under that TIN	Patient Safety	Outcome	Dose Index Registry	