

## American College of Rheumatology RISE Measure Changes Summary

Changes to some of the rheumatology-specific quality measures in the RISE Registry could impact how you care for your patients this year. Below are details on what changed from the 2021 performance year (Jan. 1, 2021 – Dec. 31, 2021) to the 2022 performance year (Jan. 1, 2022 – Dec. 31, 2022) and the potential impact on your practice. Please note these changes take effect in 2022 and will not affect RISE participants’ 2021 Quality Payment Program (QPP) MIPS reporting.

What Changed	What it Means
<b>QPP176: Tuberculosis Screening Prior to First Course Biologic Therapy</b>	
<ul style="list-style-type: none"> <li>- Updated the lookback period for determining "first course biologic therapy" from 12 months to 15 months.                             <ul style="list-style-type: none"> <li>o NOTE: This does NOT impact the lookback period for tuberculosis screening, which will remain 12 months.</li> </ul> </li> <li>- The drug list has been updated to include new biologic therapies.</li> </ul>	<p>With the update to the lookback period, the RISE registry can better identify patients who are on an annual renewal of their biologic therapy and should NOT be included in the measure’s denominator. Given these patients are rare, this should have no significant impact on your processes or measure performance</p> <p>The drug list has been updated to reflect biologics approved to treat rheumatology patients that require a tuberculosis screening prior to initiation. <b>Please review the drug list and ensure you are screening your patients for tuberculosis before initiating a first course of these drugs.</b></p>

Please note that for the following four measures, a new visit code (G0468) has been added. This code allows patients visiting federally qualified health centers to be included in the denominator. This doesn’t impact you unless your practice is a federally qualified health center.

- QPP176 - Tuberculosis Screening Prior to First Course Biologic Therapy
- QPP177 - Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity
- QPP178 - Rheumatoid Arthritis (RA): Functional Status Assessment
- QPP180 - Rheumatoid Arthritis (RA): Glucocorticoid Management

No changes were made to the rheumatology specific QCDR measures:

- ACR10 - Hepatitis B Safety Screening
- ACR12 - Disease Activity Measurement for Patients with PsA
- ACR14 - Gout: Serum Urate Target
- ACR15 - Safe Hydroxychloroquine Dosing
- ACR16 - Rheumatoid Arthritis Patients with Low Disease Activity or Remission

The remaining QPP measure changes are owned and managed by CMS and are highlighted in the [2022 Quality Payment Program Final Rule](#). You can access pages 897-973 of the rule to see the previously finalized quality measures with

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substantive changes finalized for the 2022 Performance Period/2024 MIPS Payment Year and Future Years. Lastly, quality measure QPP 154 - Falls: Risk Assessment was **removed** from the QPP for the 2022 performance year.

If you have any questions about the measure changes and their impact on you, feel free to reach out to ACR staff by e-mailing [RISE@rheumatology.org](mailto:RISE@rheumatology.org) or by calling (404) 633-3777.