**2019 RISE Quality Payment Program Measures**

*eCQM001* (High Priority): Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)

**MEASURE DESCRIPTION:** Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period

**MEASURE TYPE:** Outcome

**NQS DOMAIN:** Effective Clinical Care

*eCQM005:* Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)

**MEASURE DESCRIPTION:** Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

*eCQM007:* Coronary Artery Disease (CAD): Beta-Blocker Therapy—Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF < 40%)

**MEASURE DESCRIPTION:** Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have a prior MI or a current or prior LVEF < 40% who were prescribed beta-blocker therapy

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

*eCQM008:* Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)

**MEASURE DESCRIPTION:** Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care
eCQM009: Antidepressant Medication Management

**MEASURE DESCRIPTION:** Percentage of patients 18 years of age and older who were treated with antidepressant medication, had a diagnosis of major depression, and who remained on antidepressant medication treatment. Two rates are reported:

a. Percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks).

b. Percentage of patients who remained on an antidepressant medication for at least 180 days (6 months).

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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eCQM012: Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation

**MEASURE DESCRIPTION:** 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.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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eCQM019* [High Priority]: Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care

**MEASURE DESCRIPTION:** Percentage of patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed with documented communication to the physician who manages the ongoing care of the patient with diabetes mellitus regarding the findings of the macular or fundus exam at least once within 12 months.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Communication and Care Coordination

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Q024* [High Priority]: Communication with the Physician or Other Clinician Managing Ongoing Care Post-Fracture for Men and Women Aged 50 Years and Older

**MEASURE DESCRIPTION:** 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 ongoing care, that a fracture occurred and that the patient was or should be considered for osteoporosis treatment or testing. This measure is submitted by the physician who treats the fracture and who therefore is held accountable for the communication.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Communication and Care Coordination
Q039: Screening for Osteoporosis for Women Aged 65-85 Years

**MEASURE DESCRIPTION:** Percentage of female patients aged 65-85 years who ever had a central dual-energy X-ray absorptiometry (DXA) to check for osteoporosis

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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Q047* (High Priority): Care Plan

**MEASURE DESCRIPTION:** 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

**MEASURE TYPE:** Process

**NQS DOMAIN:** Communication and Care Coordination

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eCQM102: Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

**MEASURE DESCRIPTION:** 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

**MEASURE TYPE:** Process

**NQS DOMAIN:** Efficiency and Cost Reduction

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eCQM107: Adult Major Depressive Disorder (MDD): Suicide Risk Assessment

**MEASURE DESCRIPTION:** Percentage of patients aged 18 years and older with a diagnosis of major depressive disorder (MDD) with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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Q109* (High Priority): Osteoarthritis (OA): Function and Pain Assessment

**MEASURE DESCRIPTION:** Percentage of patient visits for patients aged 21 years and older with a diagnosis of osteoarthritis (OA) with assessment for function and pain

**MEASURE TYPE:** Process

**NQS DOMAIN:** Person and Caregiver-Centered Experience and Outcomes
Q110/eCQM110: Preventive Care and Screening: Influenza Immunization

**MEASURE DESCRIPTION:** 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

**MEASURE TYPE:** Process

**NQS DOMAIN:** Community/Population Health

Q111/eCQM111: Pneumococcal Vaccination Status for Older Adults (PNU)

**MEASURE DESCRIPTION:** Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine

**MEASURE TYPE:** Process

**NQS DOMAIN:** Community/Population Health

eCQM112: Breast Cancer Screening

**MEASURE DESCRIPTION:** Percentage of women 51-74 years of age who had a mammogram to screen for breast cancer

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

eCQM113: Colorectal Cancer Screening

**MEASURE DESCRIPTION:** Percentage of patients 50-75 years of age who had appropriate screening for colorectal cancer

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

eCQM117: Diabetes: Eye Exam

**MEASURE DESCRIPTION:** Percentage of patients 18-75 years of age with diabetes who had a retinal or dilated eye exam by an eyecare professional during the measurement period or a negative retinal or dilated eye exam (no evidence of retinopathy) in the 12 months prior to the measurement period

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

eCQM119: Diabetes: Medical Attention for Nephropathy

**MEASURE DESCRIPTION:** Percentage of patients 18-75 years of age with diabetes who had a nephropathy screening test or evidence of nephropathy during the measurement period

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care
Q128/eCQM128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan

**MEASURE DESCRIPTION:** 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.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Community/Population Health

Q130/eCQM130* [High Priority]: Documentation of Current Medications in the Medical Record

**MEASURE DESCRIPTION:** Percentage of visits for patients aged 18 years and older for which the MIPS eligible professional or MIPS eligible clinician 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 medication’s name, dosage, frequency and route of administration.

**MEASURE TYPE:** Process

**NQSDOMAIN:** Patient Safety

Q131* (High Priority): Pain Assessment and Follow-Up

**MEASURE DESCRIPTION:** 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.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Communication and Care Coordination

eCQM134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan

**MEASURE DESCRIPTION:** 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.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Community/Population Health
eCQM143* (High Priority): Oncology: Medical and Radiation—Pain Intensity Quantified

MEASURE DESCRIPTION: 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

MEASURE TYPE: Process
NQS DOMAIN: Person and Caregiver-Centered Experience and Outcomes

eCQM154* (High Priority): Falls: Risk Assessment

MEASURE DESCRIPTION: Percentage of patients aged 65 years and older with a history of falls that had a risk assessment for falls completed within 12 months

MEASURE TYPE: Process
NQS DOMAIN: Patient Safety

eCQM155* (High Priority): Falls: Plan of Care

MEASURE DESCRIPTION: Percentage of patients aged 65 years and older with a history of falls that had a plan of care for falls documented within 12 months

MEASURE TYPE: Process
NQS DOMAIN: Communication and Care Coordination

eCQM160: HIV/AIDS: Pneumocystis jiroveci Pneumonia (PCP) Prophylaxis

MEASURE DESCRIPTION: Percentage of patients aged 6 weeks and older with a diagnosis of HIV/AIDS who were prescribed Pneumocystis jiroveci pneumonia (PCP) prophylaxis

MEASURE TYPE: Process
NQS DOMAIN: Effective Clinical Care

Q176: Rheumatoid Arthritis (RA): Tuberculosis Screening

MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have documentation of a tuberculosis (TB) screening performed and results interpreted within 12 months prior to receiving a first course of therapy using a biologic disease-modifying anti-rheumatic drug (DMARD)

MEASURE TYPE: Process
NQS DOMAIN: Effective Clinical Care
Q177: Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity
MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have an assessment of disease activity at ≥ 50% of encounters for RA for each patient during the measurement year
MEASURE TYPE: Process
NQS DOMAIN: Effective Clinical Care

Q178: Rheumatoid Arthritis (RA): Functional Status Assessment
MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) for whom a functional status assessment was performed at least once within 12 months
MEASURE TYPE: Process
NQS DOMAIN: Effective Clinical Care

Q179: Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis
MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have an assessment and classification of disease prognosis at least once within 12 months
MEASURE TYPE: Process
NQS DOMAIN: Effective Clinical Care

Q180: Rheumatoid Arthritis (RA): Glucocorticoid Management
MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of rheumatoid arthritis (RA) who have been assessed for glucocorticoid use and, for those on prolonged doses of prednisone ≥ 10 mg daily [or equivalent] with improvement or no change in disease activity, documentation of glucocorticoid management plan within 12 months
MEASURE TYPE: Process
NQS DOMAIN: Effective Clinical Care

eCQM191* (High Priority): Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery
MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and no significant ocular conditions impacting the visual outcome of surgery and had best-corrected visual acuity of 20/40 or better [distance or near] achieved within 90 days following the cataract surgery
MEASURE TYPE: Outcome
NQS DOMAIN: Effective Clinical Care
eCQM192* [High Priority]: Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures

MEASURE DESCRIPTION: Percentage of patients aged 18 years and older with a diagnosis of uncomplicated cataract who had cataract surgery and had any of a specified list of surgical procedures in the 30 days following cataract surgery that would indicate the occurrence of any of the following major complications: retained nuclear fragments, endophthalmitis, dislocated or wrong power IOL, retinal detachment, or wound dehiscence

MEASURE TYPE: Outcome
NQS DOMAIN: Patient Safety

Q226/eCQM226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

MEASURE DESCRIPTION: 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

MEASURE TYPE: Process
NQS DOMAIN: Community/Population Health

Q236/eCQM236* [High Priority]: Controlling High Blood Pressure

MEASURE DESCRIPTION: Percentage of patients aged 18-85 years who had a diagnosis of hypertension and whose blood pressure was adequately controlled (< 140/90 mmHg) during the measurement period

MEASURE TYPE: Outcome
NQS DOMAIN: Effective Clinical Care

Q238/eCQM238* [High Priority]: Use of High-Risk Medications in the Elderly

MEASURE DESCRIPTION: Percentage of patients aged 65 years and older who were ordered high-risk medications. Two rates are reported:

a. Percentage of patients who were ordered at least one high-risk medication.

b. Percentage of patients who were ordered at least two of the same high-risk medications.

MEASURE TYPE: Process
NQS DOMAIN: Patient Safety
eCQM305: Initiation and Engagement of Alcohol and Other Drug Dependence Treatment

**MEASURE DESCRIPTION:** Percentage of patients 13 years of age and older with a new episode of alcohol or other drug abuse or dependence (AOD) who received the following:

Two rates are reported:

a. Percentage of patients who initiated treatment within 14 days of the diagnosis.

b. Percentage of patients who initiated treatment and who had two or more additional services with an AOD diagnosis within 30 days of the initiation visit.

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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eCQM309: Cervical Cancer Screening

**MEASURE DESCRIPTION:** Percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria:

* Women age 21-64 who had cervical cytology performed every 3 years
* Women age 30-64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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eCQM317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

**MEASURE DESCRIPTION:** Percentage of patients aged 18 years and older seen during the submitted 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

**MEASURE TYPE:** Process

**NQS DOMAIN:** Community, Population & Public Health

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eCQM318* (High Priority): Screening for Future Fall Risk

**MEASURE DESCRIPTION:** Percentage of patients 65 years of age and older who were screened for future fall risk during the measurement period

**MEASURE TYPE:** Process

**NQS DOMAIN:** Patient Safety
eCQM370* (High Priority): Depression Remission at Twelve Months

**MEASURE DESCRIPTION:** The percentage of adolescent patients 12 to 17 years of age and adult patients 18 years of age or older with major depression or dysthymia who reached remission 12 months (+/- 30 days) after an index event date

**MEASURE TYPE:** Outcome

**NQS DOMAIN:** Effective Clinical Care

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eCQM371: Depression Utilization of the PHQ-9 Tool

**MEASURE DESCRIPTION:** The percentage of adolescent patients 12 to 17 years of age and adult patients age 18 and older with the diagnosis of major depression or dysthymia who have a completed PHQ-9 during each applicable 4-month period in which there was a qualifying depression encounter

**MEASURE TYPE:** Process

**NQS DOMAIN:** Effective Clinical Care

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eCQM372: Maternal Depression Screening

**MEASURE DESCRIPTION:** The percentage of children who turned 6 months of age during the measurement year, who had a face-to-face visit between the clinician and the child during child's first 6 months, and who had a maternal depression screening for the mother at least once between 0 and 6 months of life

**MEASURE TYPE:** Process

**NQS DOMAIN:** Community/Population Health

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Q374* (High Priority): Closing the Referral Loop: Receipt of Specialist Report

**MEASURE DESCRIPTION:** 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

**MEASURE TYPE:** Process

**NQS DOMAIN:** Communication and Care Coordination

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eCQM375* (High Priority): Functional Status Assessment for Total Knee Replacement

**MEASURE DESCRIPTION:** Percentage of patients 18 years of age and older who received an elective primary total knee arthroplasty (TKA) and completed a functional status assessment within 90 days prior to the surgery and in the 270-365 days after the surgery

**MEASURE TYPE:** Process

**NQS DOMAIN:** Person and Caregiver-Centered Experience and Outcomes
eCQM376* (High Priority): Functional Status Assessment for Total Hip Replacement

MEASURE DESCRIPTION: Percentage of patients 18 years of age and older who received an elective primary total hip arthroplasty [THA] and completed a functional status assessment within 90 days prior to the surgery and in the 270-365 days after the surgery

MEASURE TYPE: Process
NQS DOMAIN: Person and Caregiver-Centered Experience and Outcomes

eCQM377* (High Priority): Functional Status Assessment for Congestive Heart Failure

MEASURE DESCRIPTION: Percentage of patients 18 years of age and older with congestive heart failure who completed initial and follow-up patient-reported functional status assessments

MEASURE TYPE: Process
NQS DOMAIN: Person and Caregiver-Centered Experience and Outcomes

ACR7* (High Priority): Gout—Serum Urate Target

MEASURE DESCRIPTION: Percentage of patients aged 18 and older with a diagnosis of gout treated with urate-lowering therapy [ULT] for at least 12 months, whose most recent serum urate result is less than 6.8 mg/dL

MEASURE TYPE: Outcome
NQS DOMAIN: Clinical Process/Effectiveness