

MACRA

Clinicians in the MIPS track will be required to comply with the QPP by reporting on six quality measures, including an outcome measure, for a minimum of 90 days. To help providers figure out what MIPS measures are most relevant to PAC settings – and, therefore, may be most feasible for PAC providers to report -- we cross-referenced the measures on CMS's list with those included in each post-acute care setting's Quality Reporting Program. This list shows which MIPS measures may draw upon data already collected for the PAC quality reporting programs, and could thus be more easily reported as part of the MIPS.

MIPS ID	MEASURE NAME	MEASURE DESCRIPTION	MEASURE TYPE	DATA SUBMISSION METHOD	PAC Settings with Comparable Measure	Measure
	Absence of Urinary	Percentage of female patients aged 65 years and older who were assessed for the presence or absence of urinary incontinence within 12 months	Process	Claims, Registry		Bladder Continence; Percent of Low Risk Residents Who Lose Control of Their Bowel or Bladder (Long Stay)
110	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	Process	Claims, CMS Web Interface, EHR, Registry		Percent of residents or patients who were assessed and appropriately given the seasonal influenza vaccination

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127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention - Evaluation of Footwear	Percentage of patients aged 18 years and older with a diagnosis of diabetes mellitus who were evaluated for proper footwear and sizing	Process	Registry	нн	Diabetic food care and patient education in plan of care
130	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.	Process	Claims, EHR, Registry	SNF, IRF, LTCH, HH	Drug regimen review
131	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	Process	Claims, Registry	SNF	Percent of Residents Who Self-Report Moderate to Severe Pain (Short, Long Stay)
134	Preventive Care and Screening: Screening for Clinical 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	Process	Claims, CMS Web Interface, EHR, Registry	НН	Depression assessment conducted

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						Multifactor fall risk
		Percentage of patients aged 65 years and				assessment
		older with a history of falls that had a risk				conducted for all
	- 11 - 5. 1 -	assessment for falls completed within 12		Claims,	l	patients who can
154	Falls: Risk Assessment	months	Process	Registry	HH	ambulate
163	Diabetes: Foot Exam	The percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received a foot exam (visual inspection and sensory exam with mono filament and a pulse exam) during the measurement year	Process	EHR	нн	Diabetic food care and patient education in plan of care
193	Functional Outcome	Percentage of visits for patients aged 18 years and older with documentation of a current functional outcome assessment using a standardized functional outcome assessment tool on the date of the encounter AND documentation of a care plan based on identified functional outcome deficiencies on the date of the identified		Claims,	IRF, SNF	Change in self-care, mobility score for medical rehabilitation
182	Assessment Assessment	deficiencies	Process	Registry	(proposed)	patients

MIPS ID	MEASURE NAME	MEASURE DESCRIPTION	MEASURE TYPE	DATA SUBMISSION METHOD	PAC Settings with Comparable Measure	Measure
217	Functional Status Change for Patients with Knee Impairments	A self-report measure of change in functional status for patients 14 year+ with knee impairments. The change in functional status (FS) assessed using FOTO's (knee) PROM (patient-reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality	Outcome	Registry	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients
218	Functional Status Change for Patients with Hip Impairments	A self-report measure of change in functional status (FS) for patients 14 years+ with hip impairments. The change in functional status (FS) assessed using FOTO's (hip) PROM (patient- reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality	Outcome	Registry	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients

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219	Functional Status Change for Patients with Foot or Ankle Impairments	A self-report measure of change in functional status (FS) for patients 14 years+ with foot and ankle impairments. The change in functional status (FS) assessed using FOTO's (foot and ankle) PROM (patient reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality	Outcome	Registry	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients
	Functional Status Change for Patients with Lumbar Impairments	A self-report outcome measure of change in functional status for patients 14 years+ with lumbar impairments. The change in functional status (FS) assessed using FOTO (lumbar) PROM (patient reported outcome measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level by to assess quality	Outcome	Registry	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients

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221	Functional Status Change for Patients with Shoulder Impairments	A self-report outcome measure of change in functional status (FS) for patients 14 years+ with shoulder impairments. The change in functional status (FS) assessed using FOTO's (shoulder) PROM (patient reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality	Outcome	Registry	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients
222	Functional Status Change for Patients with Elbow, Wrist or Hand Impairments	A self-report outcome measure of functional status (FS) for patients 14 years+ with elbow, wrist or hand impairments. The change in FS assessed using FOTO (elbow, wrist and hand) PROM (patient reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level to assess quality	Outcome	Registry	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients

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	Functional Status Change for Patients with General	A self-report outcome measure of functional status (FS) for patients 14 years+ with general orthopaedic impairments (neck, cranium, mandible, thoracic spine, ribs or other general orthopaedic impairment). The change in FS assessed using FOTO (general orthopaedic) PROM (patient reported outcomes measure) is adjusted to patient characteristics known to be associated with FS outcomes (risk adjusted) and used as a performance measure at the patient level, at the individual clinician, and at the clinic level			IRF, SNF	Change in self-care, mobility score for medical rehabilitation
223	Orthopaedic Impairments	by to assess quality	Outcome	Registry	(proposed)	patients
		Percentage of patients, regardless of age,				
		with a diagnosis of dementia for whom an				0446 (4456
	Domontio: Comitive	assessment of cognition is performed and			CNE IDE	CAMS (MDS and
204	Dementia: Cognitive	the results reviewed at least once within a 12	D	ELID.	SNF, IRF,	LTCH, proposed for
281	Assessment	month period	Process	EHR	LTCH	addition)

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282	Dementia: Functional Status Assessment	Percentage of patients, regardless of age, with a diagnosis of dementia for whom an assessment of functional status is performed and the results reviewed at least once within a 12 month period	Process	Registry	SNF, IRF, LTCH, HH (proposed)	Application of percent of long-term care hospital patients with an admission and discharge functional assessment and a care plan that addresses function
	Parkinson's Disease: Cognitive Impairment or Dysfunction Assessment	All patients with a diagnosis of Parkinson's disease who were assessed for cognitive impairment or dysfunction in the last 12 months	Process	Registry	IRF, SNF, LTCH, HH	BIMS, CAM
	CAHPS for MIPS Clinician/Group Survey	Getting timely care, appointments, and information; How well providers Communicate; Patient's Rating of Provider; Access to Specialists; Health Promotion & Education; Shared Decision Making; Health Status/Functional Status; Courteous and Helpful Office Staff; Care Coordination;	Patient Engagement /Experience	CSV	HH	HHCAHPS

MIPS ID	MEASURE NAME	MEASURE DESCRIPTION	MEASURE TYPE	DATA SUBMISSION METHOD	PAC Settings with Comparable Measure	Measure
370	Depression Remission at Twelve Months	Patients age 18 and older with major depression or dysthymia and an initial Patient Health Questionnaire (PHQ-9) score greater than nine who demonstrate remission at twelve months (+/- 30 days after an index visit) defined as a PHQ-9 score less than five. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment.	Outcome	CMS Web Interface, EHR, Registry	HH, SNF	PHQ-9
371	Depression Utilization of the PHQ-9 Tool	Patients age 18 and older with the diagnosis of major depression or dysthymia who have a Patient Health Questionnaire (PHQ-9) tool administered at least once during a 4-month period in which there was a qualifying visit	Process	EHR	SNF, HH	PHQ-9
		Percentage of patients 18 years of age and older with primary total knee arthroplasty (TKA) who completed baseline and follow-up patient-reported functional status	Process	EHR	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients
376	Functional Status Assessment for Total Hip Replacement	Percentage of patients 18 years of age and older with primary total hip arthroplasty (THA) who completed baseline and follow-up patient-reported functional status assessments	Process	EHR	IRF, SNF (proposed)	Change in self-care, mobility score for medical rehabilitation patients

MIPS ID	MEASURE NAME	MEASURE DESCRIPTION	MEASURE TYPE	DATA SUBMISSION METHOD	PAC Settings with Comparable Measure	Measure
	Functional Status Assessments for Congestive Heart Failure	Percentage of patients 65 years of age and older with congestive heart failure who completed initial and follow-up patient-reported functional status assessments	Process	EHR	IRF, SNF	Change in self-care, mobility score for medical rehabilitation patients
	Adherence to Antipsychotic	Percentage of individuals at least 18 years of age as of the beginning of the measurement period with schizophrenia or schizoaffective disorder who had at least two prescriptions filled for any antipsychotic medication and who had a Proportion of Days Covered (PDC) of at least 0.8 for antipsychotic medications				Percent of Residents Who Received an Antipsychotic
	Medications For Individuals with Schizophrenia	during the measurement period (12 consecutive months)	Intermediate Outcome	Registry		Medication (Long- Stay)

MIPS ID	MEASURE NAME	MEASURE DESCRIPTION	MEASURE TYPE	DATA SUBMISSION METHOD	PAC Settings with Comparable Measure	Measure
411	Depression Remission at Six Months	Adult patients age 18 years and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at six months defined as a PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment. This measure additionally promotes ongoing contact between the patient and provider as patients who do not have a follow-up PHQ-9 score at six months (+/- 30 days) are also included in the denominator	Outcome	Registry	HH, SNF	PHQ-9
458	All-cause Hospital Readmission	The 30-day All-Cause Hospital Readmission measure is a risk-standardized readmission rate for beneficiaries age 65 or older who were hospitalized at a short-stay acute care hospital and experienced an unplanned readmission for any cause to an acute care hospital within 30 days of discharge.	Outcome	Administrative Claims	IRF, LTCH	All-cause unplanned 30-day post-discharge readmissions; removed after FY 2018