



**Centers for Medicare & Medicaid Services**

# **2026 Electronic Clinical Quality Measures for Eligible Clinicians**

**November 2025**

## **ADDITIONAL INFORMATION REGARDING ELECTRONIC CLINICAL QUALITY MEASURES (ECQMS) FOR CMS QUALITY REPORTING PROGRAMS FOR ELIGIBLE CLINICIANS<sup>1</sup>**

The table below titled “Electronic Clinical Quality Measures for Eligible Clinicians: 2026 Reporting” includes up-to-date information for electronic clinical quality measures (eCQMs) that will be used to electronically report 2026 clinical quality measure data for the Centers for Medicare & Medicaid Services (CMS) quality reporting programs. This table includes measures that are able to be reported individually and/or are part of the Merit-based Incentive Payment System (MIPS) Value Pathways (MVPs). Measures are not eligible for 2026 reporting unless and until they are proposed and finalized through CMS notice-and-comment rulemaking for each applicable program. Subsequent updates will be provided in a new version of this table with a summary of the updates located in a version history table at the end of the document.

Please note, because the measure stewards updated the titles and descriptions for the eCQMs in this table, they may not match the information provided on the consensus-based entity (CBE)’s [Submission Tool and Repository \(STAR\) Measure Database](#). Measures that do not have a CBE number are not currently endorsed.

CMS has posted guidance on the allowance of telehealth encounters for eligible clinician eCQMs used in CMS quality reporting programs for performance period 2026. The telehealth guidance document is available on the eCQI Resource Center within the [eCQM Resources table for Eligible Clinicians](#) under the 2026 performance period. Guidance provided within the telehealth guidance document is intended to provide interested parties with clarity on telehealth allowances that appear within the eCQM specifications for the 2026 performance period. In addition to posting the telehealth guidance document, CMS includes indications of which eCQMs are eligible for telehealth encounters.

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<sup>1</sup> Eligible clinicians applies to Merit-based Incentive Payment System (MIPS) eligible clinicians and similar participants of other CMS programs using eCQMs for quality reporting such as Advanced Alternative Payment Model (Advanced APM) participants.

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth -Eligible
CMS2v15	Not Applicable	134	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 or up to 14 days prior to 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 or up to two days after the date of the qualifying encounter	Patients screened for depression on the date of the encounter or up to 14 days prior to the date of the encounter using an age-appropriate standardized tool AND if positive, a follow-up plan is documented on the date of or up to two days after the date of the qualifying encounter or an active depression medication overlaps the date of the qualifying encounter	Equals Initial Population: All patients aged 12 years and older at the beginning of the measurement period with at least one qualifying encounter during the measurement period	Process	Yes <sup>a</sup>
CMS22v14	Not Applicable	317	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Percentage of patient visits for patients aged 18 years and older seen during the measurement period who were screened for high blood pressure AND a recommended follow-up plan is documented, as indicated, if blood pressure is elevated or hypertensive	Patient visits where patients were screened for high blood pressure AND have a recommended follow-up plan documented, as indicated, if the blood pressure is elevated or hypertensive	Equals Initial Population: All patient visits for patients aged 18 years and older at the beginning of the measurement period	Process	No <sup>b</sup>
CMS50v14	Not Applicable	374	Closing the Referral Loop: Receipt of Specialist Report	Percentage of patients with referrals, regardless of age, for which the referring clinician receives a report from the clinician to whom the patient was referred	Number of patients with a referral on or before October 31, for which the referring clinician received a report from the first clinician to whom the patient was referred	Equals Initial Population: Number of patients, regardless of age, who had an encounter during the measurement period and were referred by one clinician to another clinician on or before October 31	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS56v14	Not Applicable	376	Functional Status Assessment for Total Hip Replacement	Percentage of patients 19 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 300 - 425 days after the surgery	Patients with patient-reported functional status assessment results (i.e., Veterans RAND 12-item health survey [VR-12], Patient-Reported Outcomes Measurement Information System [PROMIS]-10-Global Health, Hip Disability and Osteoarthritis Outcome Score [HOOS], HOOS Jr.) in the 90 days prior to or on the day of the primary THA procedure, and in the 300 - 425 days after the THA procedure	Equals Initial Population: Patients 19 years of age and older who had a primary THA between November two years prior to the measurement period and October of the year prior to measurement period; and who had an outpatient encounter between August of the year prior to the measurement period and the end of the measurement period	Process	Yes <sup>a</sup>
CMS68v15	Not Applicable	130	Documentation of Current Medications in the Medical Record	Percentage of visits for which the eligible clinician attests to documenting a list of current medications using all immediate resources available on the date of the encounter	Eligible clinician attests to documenting, updating, or reviewing the patient's current medications using all immediate resources available on the date of the encounter	Equals Initial Population: All visits occurring during the 12-month measurement period	Process	Yes <sup>a</sup>
CMS69v14	Not Applicable	128	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 measurement period AND who had a follow-up plan documented if BMI was outside of normal parameters	Patients with a documented BMI during the encounter or during the measurement period, AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the measurement period	Equals Initial Population: All patients aged 18 and older on the date of the encounter with at least one qualifying encounter during the measurement period	Process	No <sup>b</sup>
CMS74v15	Not Applicable	379	Primary Caries Prevention Intervention as Offered by Dentists	Percentage of children, 1-20 years of age, who received two fluoride varnish applications during the measurement period as determined by a dentist	Children who receive two fluoride varnish applications on different days during the measurement period	Equals Initial Population: Children, 1-20 years of age at the start of the measurement period, with a clinical oral evaluation by a dentist during the measurement period	Process	No <sup>c</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS75v14	Not Applicable	378	Children Who Have Dental Decay or Cavities	Percentage of children, 1-20 years of age at the start of the measurement period, who have had dental decay or cavities during the measurement period as determined by a dentist	Children who had a diagnosis of cavities or decayed teeth in any part of the measurement period	Equals Initial Population: Children, 1-20 years of age at the start of the measurement period, with a clinical oral evaluation by a dentist during the measurement period	Outcome	No <sup>c</sup>
CMS90v15	Not Applicable	377	Functional Status Assessments for Heart Failure	Percentage of patients 18 years of age and older with heart failure who completed initial and follow-up patient-reported functional status assessments	Patients with patient-reported functional status assessment results (i.e., Veterans RAND 12-item health survey [VR-12]; VR-36; Kansas City Cardiomyopathy Questionnaire [KCCQ]; KCCQ-12; Minnesota Living with Heart Failure Questionnaire [MLHFQ]; Patient-Reported Outcomes Measurement Information System [PROMIS]-10 Global Health; PROMIS-29) present in the EHR within two weeks before or during the initial FSA encounter and results for the follow-up FSA at least 30 days but no more than 180 days after the initial FSA	Equals Initial Population: Patients 18 years of age and older who had two outpatient encounters during the measurement period and a diagnosis of heart failure that starts any time before and continues into the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS117v14	Not Applicable	240	Childhood Immunization Status	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV), one measles, mumps and rubella (MMR); three or four H influenza type B (HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday	<p>DTaP</p> <p>Children with any of the following on or before the child's second birthday meet criteria:</p> <ul style="list-style-type: none"> <li>At least four DTaP vaccinations, with different dates of service. Do not count a vaccination administered prior to 42 days after birth.</li> <li>Anaphylaxis due to the diphtheria, tetanus or pertussis vaccine.</li> <li>Encephalitis due to the diphtheria, tetanus or pertussis vaccine.</li> </ul> <p>IPV</p> <p>Children with either of the following on or before the child's second birthday meet criteria:</p> <ul style="list-style-type: none"> <li>At least three IPV vaccinations, with different dates of service. Do not count a vaccination administered prior to 42 days after birth.</li> <li>Anaphylaxis due to the IPV vaccine.</li> </ul> <p>MMR</p> <p>Children with any of the following meet criteria:</p> <ul style="list-style-type: none"> <li>At least one MMR vaccination on or between the child's first and second birthdays.</li> <li>Anaphylaxis due to the MMR vaccine on or before the child's second birthday.</li> <li>All of the following anytime on or before the child's second birthday (on the same or different date of service): <ul style="list-style-type: none"> <li>History of measles.</li> <li>History of mumps.</li> <li>History of rubella.</li> </ul> </li> </ul>	Equals Initial Population: Children who turn 2 years of age during the measurement period and have a visit during the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth -Eligible
CMS117v14 (continued)					<p>HiB</p> <p>Children with either of the following meet criteria on or before the child's second birthday:</p> <ul style="list-style-type: none"> <li>• At least three HiB vaccinations, with different dates of service. Do not count a vaccination administered prior to 42 days after birth.</li> <li>• Anaphylaxis due to the HiB vaccine.</li> </ul> <p>HepB</p> <p>Children with any of the following on or before the child's second birthday meet criteria:</p> <ul style="list-style-type: none"> <li>• At least three hepatitis B vaccinations, with different dates of service. One of the three vaccinations can be a newborn hepatitis B vaccination during the eight-day period that begins on the date of birth and ends seven days after the date of birth. For example, if the member's date of birth is December 1, the newborn hepatitis B vaccination must be on or between December 1 and December 8.</li> <li>• Anaphylaxis due to the hepatitis B vaccine.</li> <li>• History of hepatitis B illness.</li> </ul> <p>VZV</p> <p>Children with any of the following meet criteria:</p> <ul style="list-style-type: none"> <li>• At least one VZV vaccination, with a date of service on or between the child's first and second birthdays.</li> <li>• Anaphylaxis due to the VZV vaccine on or before the child's second birthday.</li> <li>• History of varicella zoster (e.g., chicken pox) illness on or before the child's second birthday.</li> </ul>			

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth -Eligible
CMS117v14 (continued)					<p>PCV Children with either of the following on or before the child's second birthday meet criteria:</p> <ul style="list-style-type: none"> <li>• At least four pneumococcal conjugate vaccinations, with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.</li> <li>• Anaphylaxis due to the pneumococcal vaccine.</li> </ul> <p>HepA Children with any of the following meet criteria:</p> <ul style="list-style-type: none"> <li>• At least one hepatitis A vaccination, with a date of service on or between the child's first and second birthdays.</li> <li>• Anaphylaxis due to the hepatitis A vaccine on or before the child's second birthday.</li> <li>• History of hepatitis A illness on or before the child's second birthday.</li> </ul>			



CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS117v14 (continued)					RV Children with any of the following meet criteria: <ul style="list-style-type: none"> <li>• At least two doses of the two-dose rotavirus vaccine on different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth</li> <li>• At least three doses of the three-dose rotavirus vaccine on different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.</li> <li>• At least one dose of the two- dose rotavirus vaccine and at least two doses of the three-dose rotavirus vaccine, all on different dates of service, on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.</li> <li>• Anaphylaxis due to the rotavirus vaccine on or before the child's second birthday.</li> </ul>			

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS117v14 (continued)					<p>Flu</p> <p>Children with either of the following on or before their second birthday meet criteria:</p> <ul style="list-style-type: none"> <li>At least two influenza vaccinations, with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 6 months (180 days) after birth. One of the two vaccinations can be a Live Attenuated Influenza Vaccine (LAIV) vaccination administered on the child's second birthday. Do not count a LAIV vaccination administered before the child's second birthday.</li> <li>Anaphylaxis due to the influenza vaccine.</li> </ul>			
CMS122v14	Not Applicable	001	Diabetes: Glycemic Status Assessment Greater Than 9%	Percentage of patients 18-75 years of age with diabetes who had a glycemic status assessment (hemoglobin A1c [HbA1c] or glucose management indicator [GMI]) > 9.0% during the measurement period	Patients whose most recent glycemic status assessment (HbA1c or GMI) (performed during the measurement period) is >9.0% or is missing, or was not performed during the measurement period	Equals Initial Population: Patients 18-75 years of age by the end of the measurement period, with diabetes with a visit during the measurement period	Intermediate Outcome	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS124v14	Not Applicable	309	Cervical Cancer Screening	<p>Percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria:</p> <ul style="list-style-type: none"> <li>Women age 21-64 who had cervical cytology performed within the last 3 years</li> <li>Women age 30-64 who had cervical human papillomavirus (HPV) testing performed within the last 5 years</li> </ul>	<p>Women with one or more screenings for cervical cancer. Appropriate screenings are defined by any one of the following criteria:</p> <ul style="list-style-type: none"> <li>Cervical cytology performed during the measurement period or the two years prior to the measurement period for women 24-64 years of age by the end of the measurement period.</li> <li>Cervical human papillomavirus (HPV) testing performed during the measurement period or the four years prior to the measurement period for women who are 30 years or older at the time of the test.</li> </ul>	<p>Equals Initial Population: Women 24-64 years of age by the end of the measurement period with a visit during the measurement period</p>	Process	Yes <sup>a</sup>
CMS125v14	Not Applicable	112	Breast Cancer Screening	<p>Percentage of women 40-74 years of age who had a mammogram to screen for breast cancer in the 27 months prior to the end of the measurement period</p>	<p>Women with one or more mammograms any time on or between October 1 two years prior to the measurement period and the end of the measurement period</p>	<p>Equals Initial Population: Women 42-74 years of age by the end of the measurement period with a visit during the measurement period</p>	Process	Yes <sup>a</sup>
CMS128v14	Not Applicable	009	Antidepressant Medication Management	<p>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 an antidepressant medication treatment. Two rates are reported.</p> <p>a. Percentage of patients who remained on an antidepressant medication for at least 84 days (12 weeks).</p> <p>b. Percentage of patients who remained on an antidepressant medication for at least 180 days (6 months).</p>	<p>Numerator 1: Patients who have received antidepressant medication for at least 84 days (12 weeks) of continuous treatment beginning on the IPSD through 114 days after the IPSD (115 total days).</p> <p>Numerator 2: Patients who have received antidepressant medications for at least 180 days (6 months) of continuous treatment beginning on the IPSD through 231 days after the IPSD (232 total days).</p>	<p>Equals Initial Population: Patients 18 years of age and older as of the IPSD who were dispensed antidepressant medications during the Intake Period, and were diagnosed with major depression 60 days prior to, or 60 days after the dispensing event and had a visit 60 days prior to, or 60 days after the dispensing event</p>	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS129v15	Not Applicable	102	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 who did not have a bone scan performed at any time since diagnosis of prostate cancer	Patients who did not have a bone scan performed after diagnosis of prostate cancer and before the end of the measurement period	Equals Initial Population at low (or very low) risk of recurrence receiving interstitial prostate brachytherapy, OR external beam radiotherapy to the prostate, OR radical prostatectomy	Process	No <sup>c</sup>
CMS130v14	Not Applicable	113	Colorectal Cancer Screening	Percentage of adults 45-75 years of age who had appropriate screening for colorectal cancer	Patients with one or more screenings for colorectal cancer. Appropriate screenings are defined by any one of the following criteria: <ul style="list-style-type: none"> <li>• Fecal occult blood test (FOBT) during the measurement period</li> <li>• Stool DNA (sDNA) with FIT test during the measurement period or the two years prior to the measurement period</li> <li>• Flexible sigmoidoscopy during the measurement period or the four years prior to the measurement period</li> <li>• CT Colonography during the measurement period or the four years prior to the measurement period</li> <li>• Colonoscopy during the measurement period or the nine years prior to the measurement period</li> </ul>	Equals Initial Population: Patients 46-75 years of age by the end of the measurement period with a visit during the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS131v14	Not Applicable	117	Diabetes: Eye Exam	Percentage of patients 18-75 years of age with diabetes and an active diagnosis of retinopathy in any part of the measurement period who had a retinal or dilated eye exam by an eye care professional during the measurement period or diabetics with no diagnosis of retinopathy in any part of the measurement period who had a retinal or dilated eye exam by an eye care professional during the measurement period or in the 12 months prior to the measurement period	<p>Patients with an eye screening for diabetic retinal disease. This includes patients with diabetes who had one of the following:</p> <ul style="list-style-type: none"> <li>• A diagnosis of retinopathy in any part of the measurement period and a retinal or dilated eye exam by an eye care professional in the measurement period</li> <li>• No diagnosis of retinopathy in any part of the measurement period and a retinal or dilated eye exam by an eye care professional in the measurement period or the year prior to the measurement period</li> <li>• An autonomous eye exam in the measurement period</li> <li>• A retinal exam finding with a retinopathy severity level in any part of the measurement period</li> <li>• A retinal exam finding with no retinopathy severity level in the year prior to the measurement period</li> </ul>	Equals Initial Population: Patients 18-75 years of age by the end of the measurement period, with diabetes with a visit during the measurement period	Process	Yes <sup>a</sup>
CMS133v14	0565e	191	Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery	Percentage of cataract surgeries for patients aged 18 and older with a diagnosis of uncomplicated cataract 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 in the operative eye within 90 days following the cataract surgery	Cataract surgeries with best-corrected visual acuity of 20/40 or better (distance or near) achieved in the operative eye within 90 days following cataract surgery	Equals Initial Population: All cataract surgeries performed between January and September of the measurement period for patients 18 years and older	Outcome	No <sup>c</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS135v14	0081e	005	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Nepilysin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	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 or already taking ACE inhibitor or ARB or ARNI therapy during the measurement period	Patients who were prescribed or already taking ACE inhibitor or ARB or ARNI therapy during the measurement period	Equals Initial Population with a current or prior LVEF <= 40%	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS136v15	Not Applicable	366	Follow-Up Care for Children Prescribed ADHD Medication	<p>Percentage of children 6-12 years of age and newly prescribed a medication for attention-deficit/hyperactivity disorder (ADHD) who had appropriate follow-up care. Two rates are reported.</p> <p>a. Percentage of children who had one follow-up visit with a practitioner with prescribing authority during the 30-Day Initiation Phase.</p> <p>b. Percentage of children who remained on ADHD medication for at least 210 treatment days and who, in addition to the visit in the Initiation Phase, had at least two additional follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended.</p>	<p>Numerator 1: Patients who had at least one visit with a practitioner with prescribing authority during the Initiation Phase.</p> <p>Numerator 2: Patients who had at least one visit with a practitioner with prescribing authority during the Initiation Phase, and at least two follow-up visits on different dates of service during the 31-300 days after the IPSD.</p>	<p>Equals Initial Population:</p> <p>Initial Population 1: Children 6-12 years of age as of the Intake Period who had an IPSD and who had a visit within 6 months prior to the IPSD including the IPSD. Children are removed if they had an acute inpatient stay with a principal diagnosis of mental, behavioral or neurodevelopmental disorder during the Initiation Phase.</p> <p>Initial Population 2: Children 6-12 years of age as of the Intake Period who had an IPSD and remained on the medication for at least 210 treatment days during the 301-day period, beginning on the IPSD through 300 days after the IPSD, and who had a visit within 6 months prior to the IPSD including the IPSD. Children are removed if they had an acute inpatient stay with a principal diagnosis of mental, behavioral or neurodevelopmental disorder during the Continuation and Maintenance Phase.</p>	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS137v14	Not Applicable	305	Initiation and Engagement of Substance Use Disorder Treatment	<p>Percentage of patients 13 years of age and older with a new substance use disorder (SUD) episode who received the following (Two rates are reported):</p> <p>a. Percentage of patients who initiated treatment, including either an intervention or medication for the treatment of SUD, within 14 days of the new SUD episode.</p> <p>b. Percentage of patients who engaged in ongoing treatment, including two additional interventions or medication treatment events for SUD, or one long-acting medication event for the treatment of SUD, within 34 days of the initiation.</p>	<p>Numerator 1: Initiation of treatment includes either an intervention or medication for the treatment of SUD within 14 days of the new SUD episode.</p> <p>Numerator 2: Engagement in ongoing SUD treatment within 34 days of initiation includes:</p> <p>1. A long-acting SUD medication on the day after the initiation through 34 days after the initiation of treatment.</p> <p>2. One of the following options on the day after the initiation of treatment through 34 days after the initiation of treatment: a) two engagement visits, b) two engagement medication treatment events, c) one engagement visit and one engagement medication treatment event.</p>	Equals Initial Population: Patients 13 years of age and older as of the start of the measurement period who were diagnosed with a new SUD episode during a visit between January 1 and November 14 of the measurement period	Process	Yes <sup>a</sup>



CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS138v14	Not Applicable	226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	<p>Percentage of patients aged 12 years and older who were screened for tobacco use one or more times during the measurement period AND who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco user.</p> <p>Three rates are reported:</p> <p>a. Percentage of patients aged 12 years and older who were screened for tobacco use one or more times during the measurement period</p> <p>b. Percentage of patients aged 12 years and older who were identified as a tobacco user during the measurement period who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period</p> <p>c. Percentage of patients aged 12 years and older who were screened for tobacco use one or more times during the measurement period AND who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco user</p>	<p>Population 1: Patients who were screened for tobacco use at least once during the measurement period.</p> <p>Population 2: Patients who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period.</p> <p>Population 3: Patients who were screened for tobacco use at least once during the measurement period AND who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco user.</p>	<p>Population 1: Equals Initial Population.</p> <p>Population 2: Equals Initial Population who were screened for tobacco use during the measurement period and identified as a tobacco user.</p> <p>Population 3: Equals Initial Population.</p>	Process	Yes <sup>a</sup>
CMS139v14	Not Applicable	318	Falls: Screening for Future Fall Risk	Percentage of patients 65 years of age and older who were screened for future fall risk during the measurement period	Patients who were screened for future fall risk at least once within the measurement period	Equals Initial Population: Patients aged 65 years and older at the start of the measurement period with a visit during the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS142v14	Not Applicable	019	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	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 during the measurement period	Patients with documentation, at least once within the measurement period, of the findings of the dilated macular or fundus exam via communication to the physician who manages the patient's diabetic care	Equals Initial Population who had a dilated macular or fundus exam performed during the measurement period	Process	No <sup>b</sup>
CMS143v14	0086e	012	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 the measurement period	Patients who have an optic nerve head evaluation during the measurement period	Equals Initial Population: All patients aged 18 years and older with a diagnosis of primary open-angle glaucoma	Process	No <sup>b</sup>
CMS144v14	0083e	008	Heart Failure (HF): Beta- Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	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 or already taking beta-blocker therapy during the measurement period	Patients who were prescribed or already taking beta-blocker therapy during the measurement period	Equals Initial Population with a current or prior LVEF <= 40%	Process	Yes <sup>a</sup>
CMS145v14	0070e	007	Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF less than or equal to 40%)	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 left ventricular ejection fraction (LVEF) <=40% who were prescribed beta-blocker therapy	Patients who were prescribed beta-blocker therapy	Equals Initial Population who also have prior (within the past 3 years) MI or a current or prior LVEF <=40%	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS146v14	Not Applicable	066	Appropriate Testing for Pharyngitis	The percentage of episodes for patients 3 years and older with a diagnosis of pharyngitis that resulted in an antibiotic order on or three days after the episode date and a group A streptococcus (strep) test in the seven-day period from three days prior to the episode date through three days after the episode date	A group A streptococcus test in the seven-day period from three days prior to the episode date through three days after the episode date	Equals Initial Population: Outpatient, telephone, virtual encounter (i.e., e-visit or virtual check-in), or emergency department (ED) visits with a diagnosis of pharyngitis or tonsillitis from January 1 to December 28 of the measurement period and an antibiotic order on or three days after the episode date among patients 3 years or older	Process	Yes <sup>a</sup>
CMS149v14	2872e	281	Dementia: Cognitive Assessment	Percentage of patients, regardless of age, with a diagnosis of dementia for whom an assessment of cognition is performed and the results reviewed at least once within the 12 months preceding a dementia encounter during the measurement period	Patients for whom an assessment of cognition is performed and the results reviewed at least once within the 12 months preceding a dementia encounter during the measurement period	Equals Initial Population: All patients, regardless of age, with a diagnosis of dementia who have two or more visits during the measurement period	Process	Yes <sup>a</sup>
CMS153v14	Not Applicable	310	Chlamydia Screening in Women	Percentage of women 16-24 years of age who were identified as sexually active at any time during the measurement period and who had at least one test for chlamydia during the measurement period	Women with at least one chlamydia test during the measurement period	Equals Initial Population: Women 16 to 24 years of age by the end of the measurement period who are sexually active and who had a visit in the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS154v14	Not Applicable	065	Appropriate Treatment for Upper Respiratory Infection (URI)	Percentage of episodes for patients 3 months of age and older with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic order	URI episodes without a prescription for antibiotic medication on or three days after the outpatient visit, telephone visit, virtual encounter, or emergency department visit for an upper respiratory infection	Equals Initial Population: Outpatient visits, telephone visits, virtual encounter (i.e., e-visit or virtual check-in), or emergency department visits with a diagnosis of URI from January 1 to December 28 of the measurement period for patients 3 months of age and older	Process	Yes <sup>a</sup>
CMS155v14	Not Applicable	239	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents	Percentage of patients 3-17 years of age who had an outpatient visit with a primary care physician (PCP) or obstetrician/gynecologist (OB/GYN) and who had evidence of the following during the measurement period. - Percentage of patients with height, weight, and body mass index (BMI) percentile documentation - Percentage of patients with counseling for nutrition - Percentage of patients with counseling for physical activity	Numerator 1: Patients who had a height, weight and body mass index (BMI) percentile recorded during the measurement period. Numerator 2: Patients who had counseling for nutrition during the measurement period. Numerator 3: Patients who had counseling for physical activity during the measurement period.	Equals Initial Population: Patients 3-17 years of age by the end of the measurement period, with at least one outpatient visit with a primary care physician (PCP) or an obstetrician/gynecologist (OB/GYN) during the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS156v14	Not Applicable	238	Use of High-Risk Medications in Older Adults	<p>Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class. Three rates are reported.</p> <p>1. Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class.</p> <p>2. Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class, except for appropriate diagnoses.</p> <p>3. Total rate (the sum of the two numerators divided by the denominator, deduplicating for patients in both numerators).</p>	<p>Rate 1: Patients with at least two orders of high-risk medications from the same drug class on different days.</p> <p>a. At least two orders of high-risk medications from the same drug class.</p> <p>b. At least two orders of high-risk medications from the same drug class with summed days supply greater than 90 days.</p> <p>c. At least two orders of high-risk medications from the same drug class each exceeding average daily dose criteria.</p> <p>Rate 2: Patients with at least two orders of high-risk medications from the same drug class (i.e., antipsychotics and benzodiazepines) on different days except for appropriate diagnoses.</p> <p>a. Patients with two or more antipsychotic prescriptions ordered on different days, and who did not have a diagnosis of schizophrenia, schizoaffective disorder, or bipolar disorder on or between January 1 of the year prior to the measurement period and the IPSD for antipsychotics.</p> <p>b. Patients with two or more benzodiazepine prescriptions ordered on different days, and who did not have a diagnosis of seizure disorders, rapid eye movement sleep behavior disorder, benzodiazepine withdrawal, ethanol withdrawal, or severe generalized anxiety disorder on or between January 1 of the year prior to the measurement period and the IPSD for benzodiazepines. Total rate (the sum of the two previous numerators, deduplicated).</p>	Equals Initial Population: Patients 65 years and older at the end of the measurement period who had a visit during the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth -Eligible
CMS157v14	0384e	143	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	Patient visits in which pain intensity is quantified	Equals Initial Population: Population 1: All patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy Population 2: All patient visits, regardless of patient age, with a diagnosis of cancer currently receiving radiation therapy	Process	Yes <sup>a</sup>
CMS159v14	0710e	370	Depression Remission at Twelve Months	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 (+/- 60 days) after an index event	Adolescent patients 12 to 17 years of age and adult patients 18 years of age and older who achieved remission at twelve months as demonstrated by the most recent twelve month (+/- 60 days) PHQ-9 or PHQ-9M score of less than five	Equals Initial Population: Adolescent patients 12 to 17 years of age and adult patients 18 years of age and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 or PHQ-9M score greater than nine during the index event. Patients may be assessed using PHQ-9 or PHQ-9M on the same date or up to 7 days prior to the encounter (index event).	Outcome	Yes <sup>a</sup>
CMS165v14	Not Applicable	236	Controlling High Blood Pressure	Percentage of patients 18-85 years of age who had a diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period, and whose most recent blood pressure was adequately controlled (<140/90 mmHg) during the measurement period	Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during the measurement period	Equals Initial Population: Patients 18-85 years of age by the end of the measurement period who had a visit during the measurement period and diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period	Intermediate Outcome	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS177v14	Not Applicable	382	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	Percentage of patient visits for those patients aged 6 through 16 at the start of the measurement period with a diagnosis of major depressive disorder (MDD) with an assessment for suicide risk	Patient visits with an assessment for suicide risk	Equals Initial Population: All patient visits for those patients aged 6 through 16 at the start of the measurement period with a diagnosis of major depressive disorder	Process	Yes <sup>a</sup>
CMS314v3	Not Applicable	338	HIV Viral Suppression	Percentage of patients, regardless of age, diagnosed with Human Immunodeficiency Virus (HIV) prior to or during the first 90 days of the measurement period, with an eligible encounter in the first 240 days of the measurement period, whose last HIV viral load test result was less than 200 copies/mL during the measurement period	Patients with a last HIV viral load test result of less than 200 copies/mL during the measurement period	Equals Initial Population: All patients, regardless of age, diagnosed with HIV prior to or during the first 90 days of the measurement period with at least one eligible encounter in the first 240 days of the measurement period	Outcome	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS347v9	Not Applicable	438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	<p>Percentage of the following patients - all considered at high risk of cardiovascular events - who were prescribed or were on statin therapy during the measurement period:</p> <ul style="list-style-type: none"> <li>All patients who were previously diagnosed with or currently have a diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD), including an ASCVD procedure; OR</li> <li>Patients aged 20 to 75 years who have ever had a low-density lipoprotein cholesterol (LDL-C) level <math>\geq</math> 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia; OR</li> <li>Patients aged 40-75 years with a diagnosis of diabetes; OR</li> <li>Patients aged 40 to 75 with a 10-year ASCVD risk score of <math>\geq</math> 20 percent.</li> </ul>	Patients who are actively using or who receive an order (prescription) for statin therapy at any time during the measurement period	<p>Equals Initial Population:</p> <p>Population 1: All patients who were previously diagnosed with or currently have a diagnosis of clinical ASCVD, including an ASCVD procedure.</p> <p>Population 2: Patients aged 20 to 75 years at the beginning of the measurement period who have ever had a laboratory result of LDL-C <math>\geq</math> 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial hypercholesterolemia.</p> <p>Population 3: Patients aged 40 to 75 years at the beginning of the measurement period with Type 1 or Type 2 diabetes.</p> <p>Population 4: Patients aged 40 to 75 at the beginning of the measurement period with a 10-year ASCVD risk score (i.e., 2013 ACC/AHA ASCVD Risk Estimator or the ACC Risk Estimator Plus) of <math>\geq</math> 20 percent during the measurement period.</p>	Process	Yes <sup>a</sup>



CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth -Eligible
CMS349v8	Not Applicable	475	HIV Screening	Percentage of patients aged 15-65 at the start of the measurement period who were between 15-65 years old when tested for human immunodeficiency virus (HIV)	Patients with documentation of an HIV test performed on or after their 15th birthday and before their 66th birthday	Equals Initial Population: Patients 15 to 65 years of age at the start of the measurement period without an HIV diagnosis prior to the start of the measurement period AND who had at least one outpatient visit during the day of the measurement period	Process	Yes <sup>a</sup>
CMS645v9	Not Applicable	462	Bone Density Evaluation for Patients with Prostate Cancer and Receiving Androgen Deprivation Therapy	Percentage of 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.	Patients with a bone density evaluation within the two years prior to the start of or less than three months after the start of ADT treatment	Equals Initial Population: Patients with a qualifying encounter in the measurement period AND with a diagnosis of prostate cancer AND with an order for ADT or an active medication of ADT with an intent for treatment greater than or equal to 12 months during the measurement period AND order for ADT in 3 months before to 9 months after the start of the measurement period	Process	Yes <sup>a</sup>
CMS646v6	Not Applicable	481	Intravesical Bacillus-Calmette-Guerin for Non-Muscle Invasive Bladder Cancer	Percentage of patients initially diagnosed with non-muscle invasive bladder cancer and who received intravesical Bacillus-Calmette-Guerin (BCG) within 6 months of bladder cancer staging	Intravesical Bacillus-Calmette Guerin (BCG) instillation for initial dose or series: BCG is initiated within 6 months of the bladder cancer staging	Equals Initial Population: All patients initially diagnosed with T1, Tis or high grade Ta non-muscle invasive bladder cancer with bladder cancer staging within 6 months before to 6 months after the start of the measurement period and a qualified encounter in the measurement period	Process	No <sup>b</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS771v7	Not Applicable	476	Urinary Symptom Score Change 6-12 Months After Diagnosis of Benign Prostatic Hyperplasia	Percentage of patients with an office visit within the measurement period and with a new diagnosis of clinically significant Benign Prostatic Hyperplasia who have International Prostate Symptoms Score (IPSS) or American Urological Association (AUA) Symptom Index (SI) documented at time of diagnosis and again 6-12 months later with an improvement of 3 points	Patients with a documented improvement of at least 3 points in their urinary symptom score during the measurement period	Patients in the Initial Population with a urinary symptom score assessment within 1 month of initial diagnosis and a follow-up urinary symptom score assessment within 6-12 months	Patient Reported Outcome	No <sup>b</sup>
CMS951v4	Not Applicable	488	Kidney Health Evaluation	Percentage of patients aged 18-85 years with a diagnosis of diabetes who received a kidney health evaluation defined by an Estimated Glomerular Filtration Rate (eGFR) AND Urine Albumin-Creatinine Ratio (uACR) within the measurement period	Patients who received a kidney health evaluation during the measurement period. Kidney health evaluation is defined by an eGFR AND uACR OR an eGFR and a Urine Albumin and Creatinine result documented less than or equal to four days apart.	Equals Initial Population: All patients aged 18-85 years with a diagnosis of diabetes at the start of the measurement period with a visit during the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS1056v3	3633e	494	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults (Clinician Level)	This measure provides a standardized method for monitoring the performance of diagnostic CT to discourage unnecessarily high radiation doses, a risk factor for cancer, while preserving image quality. It is expressed as a percentage of patients with CT exams that are out-of-range based on having either excessive radiation dose or inadequate image quality relative to evidence-based thresholds based on the clinical indication for the exam. All diagnostic CT exams of specified anatomic sites performed in inpatient, outpatient and ambulatory care settings are eligible. This eCQM requires the use of additional software to access primary data elements stored within radiology electronic health records and translate them into data elements that can be ingested by this eCQM.	Patients with one or more eligible CT scans with calculated CT Size-Adjusted Dose greater than or equal to a threshold specific to the CT Dose and Image Quality Category, or Calculated CT Global Noise value greater than or equal to a threshold specific to the CT Dose and Image Quality Category	Equals Initial Population where an eligible CT scan has a Calculated Global Noise value and a Calculated CT Size-Adjusted Dose value	Intermediate Outcome	No <sup>c</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS1154v1	Not Applicable	515	Screening for Abnormal Glucose Metabolism in Patients at Risk of Developing Diabetes	Percentage of adult patients with risk factors for type 2 diabetes who are due for glycemic screening for whom the screening process was initiated during the measurement period	Patients who had a glycemic screening test performed during the measurement period	All patients in the initial population: All patients with at least two outpatient clinical encounters or one preventive clinical encounter during the measurement period who have the following risk factors for type 2 diabetes: <ul style="list-style-type: none"> <li>• Most recent BMI <math>\geq 25</math> kg/m<sup>2</sup> (BMI <math>\geq 23</math> kg/m<sup>2</sup> for Asian patients) during measurement period, AND</li> <li>• Age 35-70 at start of measurement period.</li> </ul>	Process	Yes <sup>a</sup>
CMS1157v2	Not Applicable	340	HIV Annual Retention in Care	Percentage of patients, regardless of age, with a diagnosis of Human Immunodeficiency Virus (HIV) during the first 240 days of the measurement period or before the measurement period who had at least two eligible encounters or at least one eligible encounter and one HIV viral load test that were at least 90 days apart within the measurement period	Number of patients who had at least one eligible encounter and one HIV viral load test at least 90 days apart during the measurement period, or who had at least two eligible encounters at least 90 days apart during the measurement period	Equals Initial Population: All patients, regardless of age, with a diagnosis of HIV during the first 240 days of the measurement period or before the measurement period who had at least one eligible encounter during the first 240 days of the measurement period	Process	Yes <sup>a</sup>

CMS eCQM ID	CBE #	Quality #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Telehealth-Eligible
CMS1173v1	3749e	514	Diagnostic Delay of Venous Thromboembolism in Primary Care	Percentage of episodes for patients 18 years of age and older with documented Venous Thromboembolism (VTE) symptoms in the primary care setting and who had a diagnosis of VTE that occurs > 24 hours and within 30 days following the index primary care visit where symptoms for the VTE were first present	All qualified VTE encounters in which the VTE diagnosis occurs greater than 24 hours and within 30 days following the index PCP visit	Equals Initial Population: All Qualified VTE Encounters in which the patient was aged 18 or older at the start of the Qualified VTE Encounter	Intermediate Outcome	Yes <sup>a</sup>
CMS1188v3	Not Applicable	205	Sexually Transmitted Infection (STI) Testing for People with HIV	Percentage of patients 13 years of age and older with a diagnosis of Human Immunodeficiency Virus (HIV) who had tests for syphilis, gonorrhea, and chlamydia performed within the measurement period	Patients who were tested for each of the following at least once during the measurement period: chlamydia, gonorrhea, and syphilis	Equals Initial Population: All patients 13 years of age and older at the start of the measurement period with an eligible encounter during the measurement period with a diagnosis of HIV before the end of the measurement period	Process	Yes <sup>a</sup>

<sup>a</sup> These eCQMs contain Medicare telehealth-eligible codes found in encounter value sets, which can be used for in-person or telehealth encounters.

<sup>b</sup> Telehealth is not appropriate for encounters within these eCQMs for performance period 2026. Medicare telehealth-eligible codes found in any encounter value set in these measures cannot be used for telehealth encounters and must only be used for in-person encounters for these eCQMs.

<sup>c</sup> These eCQMs are not appropriate for telehealth, as they either do not require an encounter or the encounter value sets within the measure do not contain any temporary or permanent “telehealth-eligible” CPT or HCPCS codes from the [Medicare Telehealth Service list](#).

## VERSION HISTORY

Date	Comments
November 2025	Revised document to add the Quality ID numbers for two measures finalized for 2026 reporting through the CY 2026 Physician Fee Schedule final rule (CMS1154v1 and CMS1173v1)
May 2025	Original publication