Telehealth Guidance for Electronic Clinical Quality Measures (eCQMs) for Eligible Professional/Eligible Clinician 2020 Quality Reporting

This document provides supplemental information related to the allowance of telehealth encounters for the eligible professional/eligible clinician electronic clinical quality measures (eCQMs) used in CMS quality reporting programs for performance period 2020. This guidance is specific to the 2020 quality reporting performance period. Guidance provided applies to eCQMs used in each of the following programs:

- Quality Payment Program: The Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (Advanced APMs)
- APM: Comprehensive Primary Care Plus (CPC+)
- APM: Primary Care First (PCF)
- Medicaid Promoting Interoperability Program for Eligible Professionals

The eCQM specifications posted on the Electronic Clinical Quality Improvement (eCQI) Resource Center for 2020 are final and are not subject to revision for the 2020 performance period.

For the 2020 performance period, the majority of the eligible professional/eligible clinician eCQMs include Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) encounter codes that are appropriate to use for either in-person or telehealth encounters based on the list of services payable under the Medicare Physician Fee Schedule (see https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes). The current eCQM logic and value sets do not differentiate between in-person encounters or telehealth encounters when these "telehealth-eligible" CPT and HCPCS codes are used. Unless otherwise stated in the guidance or definition statements in the header of an eCQM HTML document, encounters identified with CMS telehealth-eligible codes are eligible for inclusion within the eligible professional/eligible clinician eCQMs for the 2020 performance period, whether the encounter was provided in person or via telehealth.

There are 42 telehealth-eligible eCQMs for the 2020 performance period. When reviewing this list of eCQMs, please note there may be instances where the quality action cannot be completed during the telehealth encounter by eligible professionals and eligible clinicians. Specifically, telehealth-eligible CPT and HCPCS codes may be included in value sets where the required quality action in the numerator cannot be completed via telehealth. Therefore, it is the eligible professionals' and eligible clinicians' responsibility to make sure they can meet all other aspects of the quality action within the measure specification, including other quality actions that cannot be completed by telehealth.

To report questions or comments on the eCQM specifications, visit the eCQM Issue Tracker.

¹ The Centers for Medicare & Medicaid Services may update this Medicare Telehealth Service list. The information provided in this guidance document is based on an analysis done using the April 30, 2020, publication titled, "Telehealth Services for PHE for the COVID-19 pandemic effective March 1 2020-updated April 30 2020.xlsx."

TABLE 1. ELIGIBLE FOR TELEHEALTH ENCOUNTER^a ELECTRONIC CLINICAL QUALITY MEASURES FOR ELIGIBLE PROFESSIONALS AND ELIGIBLE CLINICIANS: 2020 REPORTING

CMS eCQM ID	MIPS Quality ID	Measure Title	
CMS2v9	134	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	
CMS50v8	374	Closing the Referral Loop: Receipt of Specialist Report	
CMS56v8	376	Functional Status Assessment for Total Hip Replacement	
CMS66v8	375	Functional Status Assessment for Total Knee Replacement	
CMS68v9	130	Documentation of Current Medications in the Medical Record	
CMS74v9	379	Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists	
CMS75v8	378	Children Who Have Dental Decay or Cavities	
CMS90v9	377	Functional Status Assessments for Congestive Heart Failure	
CMS117v8	240	Childhood Immunization Status	
CMS122v8	001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	
CMS124v8	309	Cervical Cancer Screening	
CMS125v8	112	Breast Cancer Screening	
CMS127v8	111	Pneumococcal Vaccination Status for Older Adults	
CMS128v8	009	Anti-depressant Medication Management	
CMS130v8	113	Colorectal Cancer Screening	
CMS131v8	117	Diabetes: Eye Exam	
CMS134v8	119	Diabetes: Medical Attention for Nephropathy	
CMS135v8	005	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Neprilysin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	
CMS136v9	366	Follow-Up Care for Children Prescribed ADHD Medication (ADD)	
CMS137v8	305	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	
CMS138v8	226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	
CMS139v8	318	Falls: Screening for Future Fall Risk	
CMS142v8	019	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	
CMS143v8	012	Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation	
CMS144v8	008	Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	
CMS145v8	007	Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%)	
CMS146v8	066	Appropriate Testing for Children with Pharyngitis	
CMS147v9	110	Preventive Care and Screening: Influenza Immunization	
CMS149v8	281	Dementia: Cognitive Assessment	
CMS153v8	310	Chlamydia Screening for Women	
CMS154v8	065	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	

CMS eCQM ID	MIPS Quality ID	Measure Title	
CMS155v8	239	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	
CMS156v8	238	Use of High-Risk Medications in the Elderly	
CMS159v8	370	Depression Remission at Twelve Months	
CMS161v8	107	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	
CMS165v8	236	Controlling High Blood Pressure	
CMS177v8	382	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	
CMS249v2	472	Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture	
CMS347v3	438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	
CMS349v2	475	HIV Screening	
CMS645v3	462	Bone density evaluation for patients with prostate cancer and receiving androgen deprivation therapy	
CMS771v1	476	International Prostate Symptom Score (IPSS) or American Urological Association- Symptom Index (AUA-SI) Change 6-12 Months After Diagnosis of Benign Prostatic Hyperplasia	

^aThese eCQMs contain Medicare telehealth-eligible codes found in encounter value sets, which can be used for inperson or telehealth encounters.

TABLE 2. NOT ELIGIBLE FOR TELEHEALTH ENCOUNTER DE CLINICAL QUALITY MEASURES FOR ELIGIBLE PROFESSIONALS AND ELIGIBLE CLINICIANS: 2020 REPORTING

CMS eCQM	MIPS Quality ID	Measure Title	Reason Not Eligible for Telehealth
CMS22v8 ^b	317	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Screening measure requires therapy, treatment, or assessment that cannot be conducted via telehealth
CMS69v8 ^b	128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan	Screening measure requires therapy, treatment, or assessment that cannot be conducted via telehealth
CMS157v8 ^b	143	Oncology: Medical and Radiation - Pain Intensity Quantified	Measure guidance specifies face-to-face encounter is required
CMS129v9 ^c	102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Measure does not contain telehealth-eligible codes and does not require an encounter during the measurement period
CMS133v8 ^c	191	Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery	Measure does not contain telehealth-eligible codes and does not require an encounter during the measurement period

bTelehealth is <u>not</u> appropriate for encounters within these eCQMs for performance period 2020, based on other information provided directly in the measure specification, such as in the measure guidance section, precluding them from becoming telehealth eligible. The 2020 specifications are final and guidance cannot be changed. 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.

^cThese 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.