

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

The table below entitled “Electronic Clinical Quality Measures for Eligible Professionals and Eligible Clinicians: 2019 Reporting” contains additional up-to-date information for Electronic Clinical Quality Measures (eCQMs) that are fully specified and are to be used to electronically report 2019 clinical quality measure data for the Centers for Medicare & Medicaid Services (CMS) quality reporting programs. Measures will not be eligible for 2019 reporting unless and until they are proposed and finalized through notice-and-comment rulemaking for each applicable program. Subsequent updates will be provided in a new version of this table. CMS will maintain and publish an archive of each update.

Please note the measure stewards updated the titles and descriptions for the eCQMs included in this table and therefore they may not match the information provided on the National Quality Forum (NQF) website. Measures that do not have an NQF number are not currently endorsed.

Each eCQM has been assessed against quality domains and meaningful measure areas. This table aligns with the quality domains established in the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) and implemented through the Quality Payment Program.

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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.

**ELECTRONIC CLINICAL QUALITY MEASURES FOR ELIGIBLE PROFESSIONALS AND ELIGIBLE CLINICIANS: 2019 REPORTING**

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS2v8	0418	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 using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen.	Patients screened for depression on the date of the encounter using an age appropriate standardized tool AND if positive, a follow-up plan is documented on the date of the positive screen	Equals Initial Population: All patients aged 12 years and older at the beginning of the measurement period with at least one eligible encounter during the measurement period	Community/ Population Health	Prevention, Treatment, and Management of Mental Health	134
CMS22v7	Not Applicable	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	Percentage of patients aged 18 years and older seen during the reporting 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	Patients who were screened for high blood pressure AND have a recommended follow-up plan documented, as indicated if the blood pressure is pre-hypertensive or hypertensive	Equals Initial Population: All patients aged 18 years and older at the beginning of the measurement period with at least one eligible encounter during the measurement period	Community/ Population Health	Preventive Care	317
CMS50v7	Not Applicable	Closing the Referral Loop: Receipt of Specialist Report	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	Number of patients with a referral, for which the referring provider received a report from the provider to whom the patient was referred	Equals Initial Population: Number of patients, regardless of age, who were referred by one provider to another provider, and who had a visit during the measurement period	Communication and Care Coordination	Transfer of Health Information and Interoperability	374

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS52v7	0405	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis	Percentage of patients aged 6 weeks and older with a diagnosis of HIV/AIDS who were prescribed Pneumocystis jiroveci pneumonia (PCP) prophylaxis	<p>Numerator 1: Patients who were prescribed Pneumocystis jiroveci pneumonia (PCP) prophylaxis within 3 months of CD4 count below 200 cells/mm3</p> <p>Numerator 2: Patients who were prescribed Pneumocystis jiroveci pneumonia (PCP) prophylaxis within 3 months of CD4 count below 500 cells/mm3 or a CD4 percentage below 15%</p> <p>Numerator 3: Patients who were prescribed Pneumocystis jiroveci pneumonia (PCP) prophylaxis at the time of diagnosis of HIV</p>	<p>Equals Initial Population:</p> <p>Initial Population 1: All patients aged 6 years and older with a diagnosis of HIV/AIDS and a CD4 count below 200 cells/mm3 who had at least two visits during the measurement year, with at least 90 days in between each visit</p> <p>Initial Population 2: All patients aged 1-5 years of age with a diagnosis of HIV/AIDS and a CD4 count below 500 cells/mm3 or a CD4 percentage below 15% who had at least two visits during the measurement year, with at least 90 days in between each visit</p> <p>Initial Population 3: All patients aged 6 weeks to 12 months with a diagnosis of HIV who had at least two visits during the measurement year, with at least 90 days in between each visit</p>	Effective Clinical Care	Management of Chronic Conditions	160
CMS56v7	Not Applicable	Functional Status Assessment for Total Hip Replacement	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	Patients with patient-reported functional status assessment results (i.e., VR-12, PROMIS-10-Global Health, HOOS, HOOS Jr.) in the 90 days prior to or on the day of the primary THA procedure, and in the 270 - 365 days after THA procedure	Equals Initial Population: Patients 19 years of age and older who had a primary total hip arthroplasty (THA) in the year prior to the measurement period and who had an outpatient encounter during the measurement period	Person and Caregiver-Centered Experience and Outcomes	Functional Outcomes	376

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS66v7	Not Applicable	Functional Status Assessment for Total Knee Replacement	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	Patients with patient-reported functional status assessment results (i.e., VR-12, PROMIS-10 Global Health, KOOS, KOOS Jr.) in the 90 days prior to or on the day of the primary TKA procedure, and in the 270 - 365 days after the TKA procedure	Equals initial population: Patients 19 years of age and older who had a primary total knee arthroplasty (TKA) in the year prior to the measurement period and who had an outpatient encounter during the measurement period	Person and Caregiver-Centered Experience and Outcomes	Functional Outcomes	375
CMS68v8	0419	Documentation of Current Medications in the Medical Record	Percentage of visits for patients aged 18 years and older for which the eligible professional or 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 medications' name, dosage, frequency and route of administration.	Eligible professional or eligible clinician attests to documenting, updating or reviewing the patient's 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, dosages, frequency and route of administration	Equals Initial Population: All visits occurring during the 12 month measurement period for patients aged 18 years and older.	Patient Safety	Medication Management	130

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS69v7	0421	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 previous twelve months AND with a BMI outside of normal parameters, a follow-up plan is documented during the encounter or during the previous twelve months of the current encounter Normal Parameters: Age 18 years and older BMI => 18.5 and < 25 kg/m2	Patients with a documented BMI during the encounter or during the previous twelve months, AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous twelve months of the current encounter	Equals Initial Population: All patients 18 and older on the date of the encounter with at least one eligible encounter during the measurement period	Community/ Population Health	Preventive Care	128
CMS74v8	Not Applicable	Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists	Percentage of children, age 0-20 years, who received a fluoride varnish application during the measurement period	Children who receive a fluoride varnish application	Equals Initial Population: Children, age 0-20 years, with a visit during the measurement period	Effective Clinical Care	Preventive Care	379
CMS75v7	Not Applicable	Children Who Have Dental Decay or Cavities	Percentage of children, age 0-20 years, who have had tooth decay or cavities during the measurement period	Children who had cavities or decayed teeth	Equals Initial Population: Children, age 0-20 years, with a visit during the measurement period	Community/ Population Health	Preventive Care	378
CMS82v6	Not Applicable	Maternal Depression Screening	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	Children with documentation of maternal screening or treatment for postpartum depression for the mother	Equals Initial Population: Children with a visit who turned 6 months of age in the measurement period	Community/ Population Health	Prevention, Treatment, and Management of Mental Health	372

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS90v8	Not Applicable	Functional Status Assessments for Congestive Heart Failure	Percentage of patients 18 years of age and older with congestive heart failure who completed initial and follow-up patient-reported functional status assessments	Patients with patient-reported functional status assessment results (i.e., VR-12; VR-36; KCCQ; PROMIS-10 Global Health, PROMIS-29) present in the EHR 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 functional status assessment	Equals Initial Population: Patients 18 years of age and older who had two outpatient encounters during the measurement year and a diagnosis of congestive heart failure	Person and Caregiver-Centered Experience and Outcomes	Functional Outcomes	377
CMS117v7	0038	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 H influenza type B (HiB); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday	Children who have evidence showing they received recommended vaccines, had documented history of the illness, had a seropositive test result, or had an allergic reaction to the vaccine by their second birthday	Equals Initial Population: Children who turn 2 years of age during the measurement period and who have a visit during the measurement period	Community/Population Health	Preventive Care	240
CMS122v7	0059	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)	Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period	Patients whose most recent HbA1c level (performed during the measurement period) is >9.0%	Equals Initial Population: Patients 18-75 years of age with diabetes with a visit during the measurement period	Effective Clinical Care	Management of Chronic Conditions	001

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS124v7	0032	Cervical Cancer Screening	Percentage of women 21-64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> <li>* Women age 21-64 who had cervical cytology performed every 3 years</li> <li>* Women age 30-64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years</li> </ul>	Women with one or more screenings for cervical cancer. Appropriate screenings are defined by any one of the following criteria: <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 who are at least 21 years old at the time of the test</li> <li>- Cervical cytology/human papillomavirus (HPV) co-testing performed during the measurement period or the four years prior to the measurement period for women who are at least 30 years old at the time of the test</li> </ul>	Equals Initial Population: Women 23-64 years of age with a visit during the measurement period	Effective Clinical Care	Preventive Care	309
CMS125v7	2372	Breast Cancer Screening	Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer	Women with one or more mammograms during the measurement period or the 15 months prior to the measurement period	Equals Initial Population: Women 51-74 years of age with a visit during the measurement period	Effective Clinical Care	Preventive Care	112
CMS127v7	Not Applicable	Pneumococcal Vaccination Status for Older Adults	Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine	Patients who have ever received a pneumococcal vaccination	Equals Initial Population: Patients 65 years of age and older with a visit during the measurement period	Community/Population Health	Preventive Care	111

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS128v7	0105	Anti-depressant 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 during the 114-day period following the Index Prescription Start Date.</p> <p>Numerator 2: Patients who have received antidepressant medications for at least 180 days (6 months) of continuous treatment during the 231-day period following the Index Prescription Start Date.</p>	<p>Equals Initial Population: Patients 18 years of age and older with a visit during the measurement period who were dispensed antidepressant medications in the time within 270 days (9 months) prior to the measurement period through the first 90 days (3 months) of the measurement period, and were diagnosed with major depression 60 days prior to, or 60 days after the dispensing event</p>	Effective Clinical Care	Prevention and Treatment of Opioid and Substance Use Disorders	009
CMS129v8	0389	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	<p>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</p>	<p>Patients who did not have a bone scan performed at any time since diagnosis of prostate cancer</p>	<p>All 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</p>	Efficiency and Cost Reduction	Appropriate Use of Healthcare	102



CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS130v7	0034	Colorectal Cancer Screening	Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer	<p>Patients with one or more screenings for colorectal cancer. Appropriate screenings are defined by any one of the following criteria:</p> <ul style="list-style-type: none"> <li>- Fecal occult blood test (FOBT) during the measurement period- Flexible sigmoidoscopy during the measurement period or the four years prior to the measurement period- Colonoscopy during the measurement period or the nine years prior to the measurement period</li> <li>- FIT-DNA during the measurement period or the two years prior to the measurement period- CT Colonography during the measurement period or the four years prior to the measurement period</li> </ul>	Equals Initial Population: Patients 50-75 years of age with a visit during the measurement period	Effective Clinical Care	Preventive Care	113

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS131v7	0055	Diabetes: Eye Exam	Percentage of patients 18-75 years of age with diabetes who had a retinal or dilated eye exam by an eye care professional during the measurement period or a negative retinal exam (no evidence of retinopathy) in the 12 months prior to the measurement period	Patients with an eye screening for diabetic retinal disease. This includes diabetics who had one of the following:  A retinal or dilated eye exam by an eye care professional in the measurement period or a negative retinal exam (no evidence of retinopathy) by an eye care professional in the year prior to the measurement period	Equals Initial Population: Patients 18-75 years of age with diabetes with a visit during the measurement period	Effective Clinical Care	Management of Chronic Conditions	117
CMS132v7	0564	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures	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 which 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	Patients who had one or more specified operative procedures for any of the following major complications within 30 days following cataract surgery: retained nuclear fragments, endophthalmitis, dislocated or wrong power IOL, retinal detachment, or wound dehiscence	Equals Initial Population: All patients aged 18 years and older who had cataract surgery and did not meet any exclusion criteria	Patient Safety	Management of Chronic Conditions	192

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS133v7	0565	Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery	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	Patients who had best-corrected visual acuity of 20/40 or better (distance or near) achieved within 90 days following cataract surgery	Equals Initial Population: All patients aged 18 years and older who had cataract surgery and did not meet any exclusion criteria	Effective Clinical Care	Management of Chronic Conditions	191
CMS134v7	0062	Diabetes: Medical Attention for Nephropathy	The percentage of patients 18-75 years of age with diabetes who had a nephropathy screening test or evidence of nephropathy during the measurement period	Patients with a screening for nephropathy or evidence of nephropathy during the measurement period	Equals Initial Population: Patients 18-75 years of age with diabetes with a visit during the measurement period	Effective Clinical Care	Management of Chronic Conditions	119
CMS135v7	0081	Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) 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 ACE inhibitor or ARB therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge	Patients 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	Equals Initial Population: All patients aged 18 years and older with a diagnosis of heart failure with a current or prior LVEF < 40%	Effective Clinical Care	Management of Chronic Conditions	005

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS136v8	0108	Follow-Up Care for Children Prescribed ADHD Medication (ADD)	<p>Percentage of children 6-12 years of age and newly dispensed 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 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 face-to-face visit with a practitioner with prescribing authority within 30 days after the IPSD.</p> <p>Numerator 2: Patients who had at least one face-to-face visit with a practitioner with prescribing authority during the Initiation Phase, and at least two follow-up visits during the Continuation and Maintenance Phase. One of the two visits during the Continuation and Maintenance Phase may be a telephone visit with a practitioner.</p>	<p>Equals Initial Population:</p> <p>Initial Population 1: Children 6-12 years of age who were dispensed an ADHD medication during the Intake Period and who had a visit during the measurement period.</p> <p>Initial Population 2: Children 6-12 years of age who were dispensed an ADHD medication during the Intake Period and who remained on the medication for at least 210 days out of the 300 days following the IPSD, and who had a visit during the measurement period.</p>	Effective Clinical Care	Prevention, Treatment, and Management of Mental Health	366

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS137v7	0004	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	Percentage of patients 13 years of age and older with a new episode of alcohol or other drug abuse or (AOD) dependence 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.	Numerator 1: Patients who initiated treatment within 14 days of the diagnosis Numerator 2: Patients who initiated treatment and who had two or more additional services with an alcohol, opioid, or other drug abuse or dependence diagnosis within 30 days of the initiation visit	Equals Initial Population: Patients age 13 years of age and older who were diagnosed with a new episode of alcohol, opioid, or other drug abuse or dependency during a visit between January 1 and November 15 of the measurement period	Effective Clinical Care	Prevention and Treatment of Opioid and Substance Use Disorders	305

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS138v7	0028	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	<p>Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as a tobacco user. Three rates are reported:</p> <p>a. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months</p> <p>b. Percentage of patients aged 18 years and older who were screened for tobacco use and identified as a tobacco user who received tobacco cessation intervention</p> <p>c. Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as a tobacco user</p>	<p>Population 1: Patients who were screened for tobacco use at least once within 24 months</p> <p>Population 2: Patients who received tobacco cessation intervention</p> <p>Population 3: Patients who were screened for tobacco use at least once within 24 months AND who received tobacco cessation intervention if identified as a tobacco user</p>	<p>Population 1: Equals Initial Population: All patients aged 18 years and older seen for at least two visits or at least one preventive visit during the measurement period</p> <p>Population 2: Equals Initial Population who were screened for tobacco use and identified as a tobacco user</p> <p>Population 3: Equals Initial Population</p>	Community/Population Health	Prevention and Treatment of Opioid and Substance Use Disorders	226
CMS139v7	0101	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 with a visit during the measurement period	Patient Safety	Preventable Healthcare Harm	318

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS142v7	0089	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 within 12 months	Patients with documentation, at least once within 12 months, 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: All patients aged 18 years and older with a diagnosis of diabetic retinopathy who had a dilated macular or fundus exam performed	Communication and Care Coordination	Transfer of Health Information and Interoperability	019
CMS143v7	0086	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 one or more office visits within 12 months	Patients who have an optic nerve head evaluation during one or more office visits within 12 months	Equals Initial Population: All patients aged 18 years and older with a diagnosis of primary open-angle glaucoma	Effective Clinical Care	Management of Chronic Conditions	012
CMS144v7	0083	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 beta-blocker therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge	Patients who were prescribed beta-blocker therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge	All patients aged 18 years and older with a diagnosis of heart failure with a current or prior LVEF < 40%	Effective Clinical Care	Management of Chronic Conditions	008

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS145v7	0070	Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <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 LVEF <40% who were prescribed beta-blocker therapy	Patients who were prescribed beta-blocker therapy	All patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have prior (within the past 3 years) MI or a current or prior LVEF <40%	Effective Clinical Care	Management of Chronic Conditions	007
CMS146v7	Not Applicable	Appropriate Testing for Children with Pharyngitis	Percentage of children 3-18 years of age who were diagnosed with pharyngitis, ordered an antibiotic and received a group A streptococcus (strep) test for the episode	Children with a group A streptococcus test in the 7-day period from 3 days prior through 3 days after the diagnosis of pharyngitis	Equals Initial Population: Children 3-18 years of age who had an outpatient or emergency department (ED) visit with a diagnosis of pharyngitis during the measurement period and an antibiotic ordered on or three days after the visit	Efficiency and Cost Reduction	Appropriate Use of Healthcare	066
CMS147v8	0041	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	Patients who received an influenza immunization OR who reported previous receipt of an influenza immunization	All patients aged 6 months and older seen for a visit during the measurement period and seen for a visit between October 1 and March 31	Community/Population Health	Preventive Care	110
CMS149v7	2872	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 a 12-month period	Patients for whom an assessment of cognition is performed and the results reviewed at least once within a 12-month period	Equals Initial Population: All patients, regardless of age, with a diagnosis of dementia	Effective Clinical Care	Prevention, Treatment, and Management of Mental Health	281



CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS153v7	0033	Chlamydia Screening for Women	Percentage of women 16-24 years of age who were identified as sexually active 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 who are sexually active and who had a visit in the measurement period	Community/Population Health	Preventive Care	310
CMS154v7	0069	Appropriate Treatment for Children with Upper Respiratory Infection (URI)	Percentage of children 3 months-18 years of age who were diagnosed with upper respiratory infection (URI) and were not dispensed an antibiotic prescription on or three days after the episode	Children without a prescription for antibiotic medication on or 3 days after the outpatient or ED visit for an upper respiratory infection	Equals Initial Population: Children age 3 months to 18 years who had an outpatient visit with a diagnosis of URI during the measurement period	Efficiency and Cost Reduction	Appropriate Use of Healthcare	065
CMS155v7	0024	Weight Assessment and Counseling for Nutrition and Physical Activity for Children and 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. Three rates are reported. <ul style="list-style-type: none"> <li>- Percentage of patients with height, weight, and body mass index (BMI) percentile documentation</li> <li>- Percentage of patients with counseling for nutrition</li> <li>- Percentage of patients with counseling for physical activity</li> </ul>	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 with at least one outpatient visit with a primary care physician (PCP) or an obstetrician/gynecologist (OB/GYN) during the measurement period	Community/Population Health	Preventive Care	239

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS156v7	0022	Use of High-Risk Medications in the Elderly	Percentage of patients 65 years of age 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.	Numerator 1: Patients with an order for at least one high-risk medication during the measurement period  Numerator 2: Patients with at least two orders for the same high-risk medication during the measurement period	Equals Initial Population: Patients 65 years and older who had a visit during the measurement period	Patient Safety	Medication Management	238
CMS157v7	0384	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: All patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy	Person and Caregiver-Centered Experience and Outcomes	Management of Chronic Conditions	143
CMS159v7	0710	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 a 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	Effective Clinical Care	Prevention, Treatment, and Management of Mental Health	370

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS160v7	0712	Depression Utilization of the PHQ-9 Tool	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	Adolescent patients 12 to 17 years of age and adult patients 18 years of age and older who have a PHQ-9 or PHQ-9M tool administered at least once during the four-month period	Equals Initial Population: Adolescent patients 12 to 17 years of age and adult patients 18 years of age and older with an office visit and the diagnosis of major depression or dysthymia during the four month period	Effective Clinical Care	Prevention, Treatment, and Management of Mental Health	371
CMS161v7	0104	Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	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	Patients with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified	Equals Initial Population: All patients aged 18 years and older with a diagnosis of major depressive disorder (MDD)	Effective Clinical Care	Prevention, Treatment, and Management of Mental Health	107
CMS165v7	0018	Controlling High Blood Pressure	Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90mmHg) during the measurement period	Patients whose blood pressure at the most recent visit 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 who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period	Effective Clinical Care	Management of Chronic Conditions	236
CMS177v7	1365	Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder 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 17 years with a diagnosis of major depressive disorder	Patient Safety	Prevention, Treatment, and Management of Mental Health	382

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS249v1	Not Applicable	Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture	Percentage of female patients 50 to 64 years of age without select risk factors for osteoporotic fracture who received an order for a dual-energy x-ray absorptiometry (DXA) scan during the measurement period.	Female patients who received an order for at least one DXA scan in the measurement period	Equals Initial Population: Female patients ages 50 to 64 years with an encounter during the measurement period	Efficiency and Cost Reduction	Appropriate Use of Healthcare	472

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS347v2	Not Applicable	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	<p>Percentage of the following patients</p> <ul style="list-style-type: none"> <li>- all considered at high risk of cardiovascular events</li> <li>- who were prescribed or were on statin therapy during the measurement period:</li> </ul> <p>*Adults aged &gt;= 21 years who were previously diagnosed with or currently have an active diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD);</p> <p>OR</p> <p>*Adults aged &gt;= 21 years who have ever had a fasting or direct low-density lipoprotein cholesterol (LDL-C) level &gt;= 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia;</p> <p>OR</p> <p>*Adults aged 40-75 years with a diagnosis of diabetes with a fasting or direct LDL-C level of 70-189 mg/dL</p>	Patients who are actively using or who receive an order (prescription) for statin therapy at any point during the measurement period	<p>All patients who meet one or more of the following criteria (considered at "high risk" for cardiovascular events, under ACC/AHA guidelines):</p> <ol style="list-style-type: none"> <li>1) Patients aged &gt;= 21 years at the beginning of the measurement period with clinical ASCVD diagnosis</li> <li>2) Patients aged &gt;= 21 years at the beginning of the measurement period who have ever had a fasting or direct laboratory result of LDL-C &gt;=190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia</li> <li>3) Patients aged 40 to 75 years at the beginning of the measurement period with Type 1 or Type 2 diabetes and with an LDL-C result of 70-189 mg/dL recorded as the highest fasting or direct laboratory test result in the measurement year or during the two years prior to the beginning of the measurement period</li> </ol>	Effective Clinical Care	Management of Chronic Conditions	438

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Quality Domain	Meaningful Measure Area	Quality #
CMS349v1	Not Applicable	HIV Screening	Percentage of patients 15-65 years of age who have been tested for HIV within that age range	Patients with documentation of an HIV test between age 15-65 before the end of the measurement period	Equals Initial Population: Patients 15 to 65 years of age who had an outpatient visit during the measurement period	Community/ Population Health	Preventive Care	475
CMS645v2	Not Applicable	Bone density evaluation for patients with prostate cancer and receiving androgen deprivation therapy	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 (indicated by HCPCS code) 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: Male patients with a diagnosis of prostate cancer and an order for ADT that is intended for greater than or equal to 12 months during the measurement period. Also included are male patients with a diagnosis of prostate cancer with ADT that was administered with an intent of 12 months or greater therapy and began during the measurement period.	Effective Clinical Care	Management of Chronic Conditions	462