

All Clinical Quality Measures in the Promoting Interoperability/EHR Incentive Program are referred to as “eQMS” because they must be **generated by** a provider's Certified Electronic Health Record system. Eligible Professionals participating in the Vermont Medicaid PIP/EHRIP are not required to submit eQMs electronically.

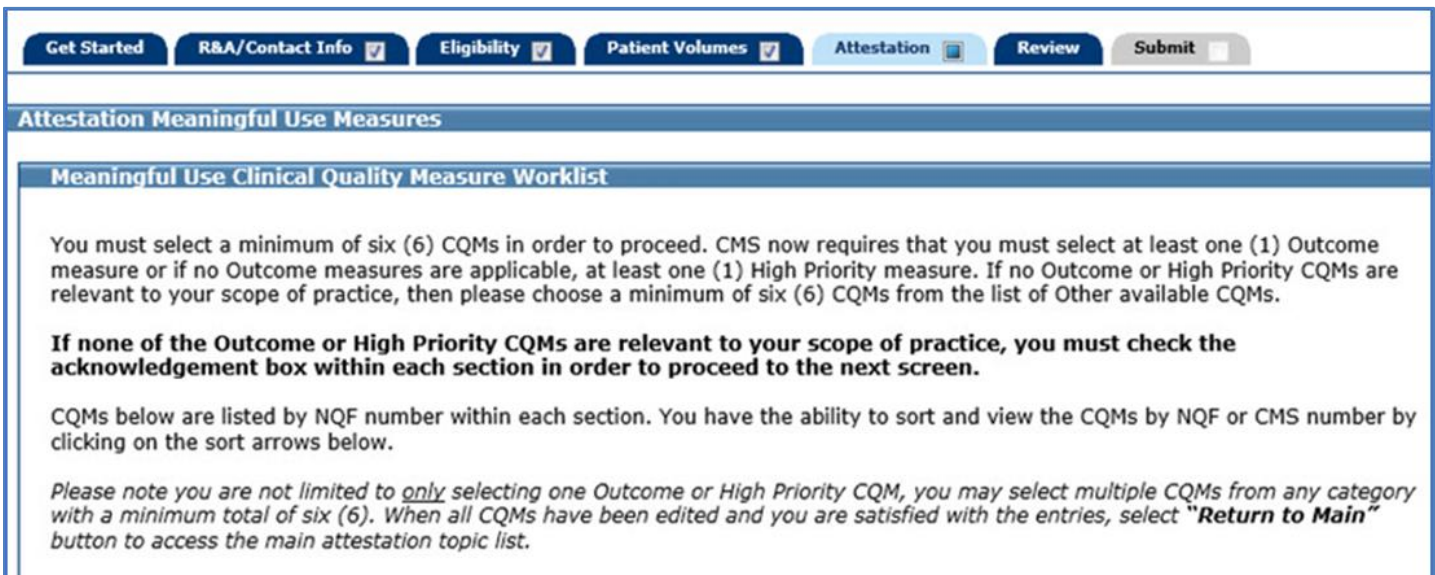
The 2020 eQm reporting period is any continuous 90-day period within calendar year 2020.

Important changes to Program Year 2020 Clinical Quality Measures for the Medicaid Promoting Interoperability Program:

- All participating EPs are required to report on any **six** eQMs relevant to their scope of practice from the set of 47 available.
- In addition, EPs must report on at least **one outcome measure**.
- If no outcome measure is relevant to his or her scope of practice, the EP must report on **one high priority measure**.
- If no high priority measures are relevant to their scope of practice, they may report on any six relevant measures.

For additional guidance on documenting and reporting data, please contact the Vermont Medicaid PIP/EHRIP Team: ahs.dvhaEHRIP@vermont.gov

The following screenshots from MAPIR illustrate the instructions and selection process for reporting on eQMs for Program Year 2020. Updates to these screens will occur when any additional state-designated high-priority CQMs are added to the **High Priority Clinical Quality Measures list**.



The screenshot shows a navigation bar with buttons: Get Started, R&A/Contact Info, Eligibility, Patient Volumes, Attestation, Review, and Submit. The main content area is titled "Attestation Meaningful Use Measures" and contains a "Meaningful Use Clinical Quality Measure Worklist" section. The instructions state that a minimum of six (6) CQMs must be selected, with at least one (1) Outcome measure or one (1) High Priority measure. It also notes that if none of these are applicable, the acknowledgement box must be checked. A note at the bottom states that users are not limited to selecting only one Outcome or High Priority CQM and can select multiple CQMs from any category, with a minimum total of six (6).

Outcome Clinical Quality Measures

| NQF# | Measure# | Title | Selection |
|----------------|-----------------|--|--------------------------|
| 0565e | CMS133 v8.1.000 | Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery | <input type="checkbox"/> |
| 0710e | CMS159 v8.6.000 | Depression Remission at Twelve Months | <input type="checkbox"/> |
| Not Applicable | CMS75 v8.1.000 | Children Who Have Dental Decay or Cavities | <input type="checkbox"/> |
| Not Applicable | CMS122 v8.4.000 | Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%) | <input type="checkbox"/> |
| Not Applicable | CMS165 v8.5.000 | Controlling High Blood Pressure | <input type="checkbox"/> |
| Not Applicable | CMS771 v1.4.000 | International Prostate Symptom Score (IPSS) or American Urological Association-Symptom Index (AUA-SI) Change 6-12 Months After Diagnosis of Benign Prostatic Hyperplasia | <input type="checkbox"/> |

None of the Outcome Clinical Quality Measures listed above pertain to my scope of practice.

High Priority Clinical Quality Measures

| NQF# | Measure# | Title | Selection |
|----------------|-----------------|--|--------------------------|
| 0028e | CMS138 v8.1.000 | Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention | <input type="checkbox"/> |
| 0041e | CMS147 v9.1.000 | Preventive Care and Screening: Influenza Immunization | <input type="checkbox"/> |
| 0089e | CMS142 v8.1.000 | Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care | <input type="checkbox"/> |
| 0384e | CMS157 v8.1.000 | Oncology: Medical and Radiation - Pain Intensity Quantified | <input type="checkbox"/> |
| 0389e | CMS129 v9.0.000 | Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients | <input type="checkbox"/> |
| 0418e | CMS2 v9.1.000 | Preventive Care and Screening: Screening for Depression and Follow-Up Plan | <input type="checkbox"/> |
| 0419e | CMS68 v9.1.000 | Documentation of Current Medications in the Medical Record | <input type="checkbox"/> |
| 1365e | CMS177 v8.1.000 | Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment | <input type="checkbox"/> |
| Not Applicable | CMS50 v8.0.000 | Closing the Referral Loop: Receipt of Specialist Report | <input type="checkbox"/> |
| Not Applicable | CMS56 v8.1.000 | Functional Status Assessment for Total Hip Replacement | <input type="checkbox"/> |
| Not Applicable | CMS66 v8.3.000 | Functional Status Assessment for Total Knee Replacement | <input type="checkbox"/> |
| Not Applicable | CMS90 v9.1.000 | Functional Status Assessments for Congestive Heart Failure | <input type="checkbox"/> |
| Not Applicable | CMS125 v8.4.000 | Breast Cancer Screening | <input type="checkbox"/> |
| Not Applicable | CMS128 v8.3.000 | Antidepressant Medication Management | <input type="checkbox"/> |
| Not Applicable | CMS130 v8.4.000 | Colorectal Cancer Screening | <input type="checkbox"/> |
| Not Applicable | CMS136 v9.1.000 | Follow-Up Care for Children Prescribed ADHD Medication (ADD) | <input type="checkbox"/> |
| Not Applicable | CMS137 v8.5.000 | Initiation and Engagement of Alcohol and Other Drug Dependence Treatment | <input type="checkbox"/> |
| Not Applicable | CMS139 v8.1.000 | Falls: Screening for Future Fall Risk | <input type="checkbox"/> |
| Not Applicable | CMS146 v8.2.000 | Appropriate Testing for Children with Pharyngitis | <input type="checkbox"/> |

| | | | |
|----------------|-----------------|--|--------------------------|
| Not Applicable | CMS153 v8.1.000 | Chlamydia Screening for Women | <input type="checkbox"/> |
| Not Applicable | CMS154 v8.1.000 | Appropriate Treatment for Children with Upper Respiratory Infection (URI) | <input type="checkbox"/> |
| Not Applicable | CMS155 v8.1.000 | Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents | <input type="checkbox"/> |
| Not Applicable | CMS156 v8.3.000 | Use of High-Risk Medications in the Elderly | <input type="checkbox"/> |
| Not Applicable | CMS249 v2.4.000 | Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture | <input type="checkbox"/> |

None of the High Priority Clinical Quality Measures listed above pertain to my scope of practice.

Other Clinical Quality Measures

| NQF# | Measure# | Title | Selection |
|----------------|------------------|--|-------------------------------------|
| 0070e | CMS145 v8.2.000 | Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%) | <input checked="" type="checkbox"/> |
| 0081e | CMS135 v8.2.000 | Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Nepriylsin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD) | <input checked="" type="checkbox"/> |
| 0083e | CMS144 v8.1.000 | Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) | <input checked="" type="checkbox"/> |
| 0086e | CMS143 v8.1.000 | Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation | <input checked="" type="checkbox"/> |
| 0104e | CMS161 v8.1.000 | Adult Major Depressive Disorder (MDD): Suicide Risk Assessment | <input checked="" type="checkbox"/> |
| 0421e | CMS69 v8.2.000 | Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan | <input checked="" type="checkbox"/> |
| 2872e | CMS149 v8.0.000 | Dementia: Cognitive Assessment | <input type="checkbox"/> |
| Not Applicable | CMS22 v8.2.000 | Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented | <input type="checkbox"/> |
| Not Applicable | CMS74 v9.1.000 | Primary Caries Prevention Intervention as Offered by Primary Care Providers, including Dentists | <input type="checkbox"/> |
| Not Applicable | CMS117 v8.3.000 | Childhood Immunization Status | <input type="checkbox"/> |
| Not Applicable | CMS124 v8.1.00 | Cervical Cancer Screening | <input type="checkbox"/> |
| Not Applicable | CMS127 v8.1.000 | Pneumococcal Vaccination Status for Older Adults | <input type="checkbox"/> |
| Not Applicable | CMS131 v8.4.000 | Diabetes: Eye Exam | <input type="checkbox"/> |
| Not Applicable | CMS134 v8.4.000 | Diabetes: Medical Attention for Nephropathy | <input type="checkbox"/> |
| Not Applicable | CMS347 v3.1.000 | Statin Therapy for the Prevention and Treatment of Cardiovascular Disease | <input type="checkbox"/> |
| Not Applicable | CMS 645 v3.1.000 | Bone density evaluation for patients with prostate cancer and receiving androgen deprivation therapy | <input type="checkbox"/> |
| Not Applicable | CMS349 v2.9.000 | HIV Screening | <input type="checkbox"/> |

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