Merit-based Incentive Payment System (MIPS) Value Pathways (MVP) Candidate for Consideration for the 2024 Performance Year

Prevention and Treatment of Infectious Disorders Including Hepatitis C and HIV

MVP Candidate Feedback Process

The MVP Candidate Feedback Process is an opportunity for the general public to participate in the MVP development process and provide feedback on MVP candidates before they're potentially proposed in rulemaking. Learn more about the MVP Public Candidate Feedback Process on the Quality Payment Program (QPP) website.

Review the table below for the measures and activities included in the Prevention and Treatment of Infectious Disorders Including Hepatitis C and HIV MVP candidate. More information about the MVP Candidate Feedback Process is available on the QPP website.

Note: This document is for the 2024 MVP Candidate Feedback only and shouldn't be used as a reference for reporting MVPs in the 2023 performance year.

MVP Candidate Public Comment Instructions

Review TABLE 1: Prevention and Treatment of Infectious Disorders Including Hepatitis C and HIV MVP outlined in this document.

MVP candidate comments should be submitted to PIMMSMVPSupport@gdit.com for Centers for Medicare & Medicaid Services (CMS) consideration between January 9, 2023, and 11:59 p.m. ET on February 8, 2023.

Please include the following information in the email:

- **Subject Line:** Draft 2024 MVP Candidate Comment
- **Email Body:** Feedback for consideration and public posting. Please indicate the MVP to which your comment relates.

CMS won't post comments that are considered out of scope to the draft 2024 MVP candidates.

TABLE 1: Prevention and Treatment of Infectious Disorders Including Hepatitis C and HIV MVP

Quality	Improvement Activities	Cost
Q130: Documentation of Current Medications in the Medical Record (Collection Type: eCQM, MIPS CQM) High Priority **Q134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan** (Collection Type: Medicare Part B Claims, eCQM, MIPS CQM) **Q205: HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia, Gonorrhea, and Syphilis** (Collection Type: MIPS CQM) **Q240: Childhood Immunization Status** (Collection Type: eCQM) **Q310: Chlamydia Screening for Women** (Collection Type: eCQM) **Q338: HIV Viral Load Suppression** (Collection Type: MIPS CQM) High Priority, Outcome **Q340: HIV Medical Visit Frequency** (Collection Type: MIPS CQM) High Priority **Q387: Annual Hepatitis C Virus (HCV) Screening for Patients who are Active Injection Drug Users** (Collection Type: MIPS CQM) **Q400: One-Time Screening for Hepatitis C Virus (HCV) for all Patients** (Collection Type: MIPS CQM) **Q401: Hepatitis C: Screening for Hepatocellular Carcinoma (HCC) in Patients with Cirrhosis** (Collection Type: MIPS CQM) **Q475: HIV Screening** (Collection Type: eCQM) **Q493: Adult Immunization Status** (Collection Type: MIPS CQM)	**IA_BE_4: Engagement of patients through implementation of improvements in patient portal** (Medium) **IA_BE_15: Engagement of Patients, Family, and Caregivers in Developing a Plan of Care** (Medium) **IA_CC_14: Practice Improvements that Engage Community Resources to Support Patient Health Goals** (High) **IA_EPA_1: Provide 24/7 Access to MIPS Eligible Clinicians or Groups Who Have Real-Time Access to Patient's Medical Record** (High) **IA_PCMH: Electronic submission of Patient Centered Medical Home accreditation** **IA_PM_6: Use of toolsets or other resources to close healthcare disparities across communities** (Medium) **IA_PM_11: Regular Review Practices in Place on Targeted Patient Population Needs** (Medium) **IA_PM_14: Implementation of methodologies for improvements in longitudinal care management for high risk patients** (Medium) **IA_PSPA_23: Completion of CDC Training on Antibiotic Stewardship** (High) **IA_PSPA_32: Use of CDC Guideline for Clinical Decision Support to Prescribe Opioids for Chronic Pain via Clinical Decision Support** (High)	**Total Per Capita Cost (TPCC)**

TABLE 2: Foundational Layer

The Foundational Layer is the same for every MVP.

Foundational Layer	
Population Health Measures	**Promoting Interoperability**
Q479: Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for the Merit-Based Incentive Payment Systems (MIPS) Eligible Clinician Groups (Collection Type: Administrative Claims) **Q484: Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions** (Collection Type: Administrative Claims)	• Security Risk Analysis • Safety Assurance Factors for EHR Resilience Guide (SAFER Guide) • e-Prescribing • Query of the Prescription Drug Monitoring Program (PDMP) • Provide Patients Electronic Access to Their Health Information • Support Electronic Referral Loops By Sending Health Information **AND** • Support Electronic Referral Loops By Receiving and Reconciling Health Information **OR** • Health Information Exchange (HIE) Bi-Directional Exchange **OR** • Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA) • Immunization Registry Reporting • Syndromic Surveillance Reporting (Optional) • Electronic Case Reporting • Public Health Registry Reporting (Optional) • Clinical Data Registry Reporting (Optional) • Actions to Limit or Restrict Compatibility or Interoperability of CEHRT • ONC Direct Review

Version History

Date	Description
01/09/2023	Original posting.