Quality Payment
PROGRAM

MIPS Value Pathways

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

Focusing on Women's Health

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 Focusing on Women's Health 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: Focusing on Women's Health 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: Focusing on Women's Health MVP

Quality	Improvement Activities	Cost
Q048: Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older (Collection Type: MIPS CQM) **Q112: Breast Cancer Screening** (Collection Type: Medicare Part B Claims, eCQM, MIPS CQM) **Q226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention** (Collection Type: Medicare Part B Claims, eCQM, MIPS CQM) **Q309: Cervical Cancer Screening** (Collection Type: eCQM) **Q310: Chlamydia Screening for Women** (Collection Type: eCQM) **Q335: Maternity Care: Elective Delivery (Without Medical Indication) at < 39 Weeks (Overuse)** (Collection Type: MIPS CQM) High Priority, Outcome **Q336: Maternity Care: Postpartum Follow-up and Care Coordination** (Collection Type: MIPS CQM) High Priority **Q400: One-Time Screening for Hepatitis C Virus (HCV) for all Patients** (Collection Type: MIPS CQM) **Q422: Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury** (Collection Type: MIPS CQM, Medicare Part B Claims) **Q431: Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling** (Collection Type: MIPS CQM) High Priority **Q432: Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair** (Collection Type: MIPS CQM) High Priority, Outcome **Q448: Appropriate Workup Prior to Endometrial Ablation** (Collection Type: MIPS CQM) High Priority	**IA_AHE_1: Enhance Engagement of Medicaid and Other Underserved Populations** (High) **IA_AHE_3: Promote use of Patient-Reported Outcome Tools** (High) **IA_AHE_8: Create and Implement an Anti-Racism Plan** (High) **IA_AHE_9: Implement Food Insecurity and Nutrition Risk Identification and Treatment Protocols** (Medium) **IA_AHE_12: Practice Improvements that Engage Community Resources to Address Drivers of Health** (High) **IA_BE_4: Engagement of patients through implementation of improvements in patient portal** (Medium) **IA_BE_16: Promote Self-management in Usual Care** (Medium) **IA_BMH_4: Depression screening** (Medium) **IA_CC_9: Implementation of practices/processes for developing regular individual care plans** (Medium) **IA_EPA_2: Use of telehealth services that expand practice access** (Medium) **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_PSPA_29: Consulting AUC Using Clinical Decision Support when Ordering Advanced Diagnostic Imaging** (High)	**Total Per Capita Cost (TPCC)** **Medicare Spending Per Beneficiary (MSPB) Clinician**

TABLE 1: Focusing on Women's Health MVP

Quality	Improvement Activities	Cost
Q472: Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture (Collection Type: eCQM) High Priority **Q475: HIV Screening** (Collection Type: eCQM) **Q493: Adult Immunization Status** (Collection Type: MIPS CQM) **UREQA8: Vitamin D level: Effective Control of Low Bone Mass/Osteopenia and Osteoporosis: Therapeutic Level Of 25 OH Vitamin D Level Achieved** (Collection Type: QCDR) High Priority, Outcome		

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.