

Quality Payment PROGRAM



APM Performance Pathway (APP) Requirements: 2025 Quality Data Submission

MIPS APM Individuals, Groups, APM Entities (All Models and Programs, Except Shared Savings Program ACOs)

What Quality Data Should I Submit?

MIPS APM participants generally have the option to report to MIPS using the APM Performance Pathway (APP), and Shared Savings Program ACOs must report using the APP. For the Calendar Year 2025 MIPS performance period, most MIPS APM-participating individuals, groups, and APM Entities—including all models and programs (except for Shared Savings Program ACOs)—must collect measure data on one of the following two pre-determined quality measure sets for the 12-month performance period beginning on January 1 and ending on December 31, 2025.

- [Option 1: APP Quality Measures](#)
- [Option 2: APP Plus Quality Measures](#) (New for 2025)

Option 1: APP Quality Measures

Measure # and Title	Collection Type	Submitter Type
Quality ID: 001 Diabetes: Glycemic Status Assessment Greater Than 9% (Formerly Diabetes: Hemoglobin A1c (HbA1c) Poor Control)	• eCQM • MIPS CQM • Medicare Part B Claims	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary

Quality ID: 134 Preventive Care and Screening: Screening for Depression and Follow-up Plan	• eCQM • MIPS CQM • Medicare Part B Claims	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary
Quality ID: 236 Controlling High Blood Pressure	• eCQM • MIPS CQM • Medicare Part B Claims	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary
Quality ID: 321 CAHPS for MIPS Survey	• CAHPS for MIPS Survey	• Third Party Intermediary
Quality ID: 479 Hospital-Wide, 30-day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible MIPS Clinician Groups	• Administrative Claims	• N/A
Quality ID: 484 Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions	• Administrative Claims	• N/A

Option 2: APP Plus Quality Measures for 2025

Measure # and Title	Collection Type	Submitter Type
Quality ID: 001 Diabetes: Glycemic Status Assessment Greater Than 9% (Formerly Diabetes: Hemoglobin A1c (HbA1c) Poor Control)	• eCQM • MIPS CQM • Medicare Part B Claims • Medicare CQM	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary

<u>Quality ID:112</u> Breast Cancer Screening	• eCQM • MIPS CQM • Medicare Part B Claims • Medicare CQM	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary
<u>Quality ID: 134</u> Preventive Care and Screening: Screening for Depression and Follow-up Plan	• eCQM • MIPS CQM • Medicare Part B Claims • Medicare CQM	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary
<u>Quality ID: 236</u> Controlling High Blood Pressure	• eCQM • MIPS CQM • Medicare Part B Claims • Medicare CQM	• MIPS Eligible Clinician • Practice Representative • APM Entity Representative • Third Party Intermediary
<u>Quality ID: 321</u> CAHPS for MIPS Survey	• CAHPS for MIPS Survey	• Third Party Intermediary
<u>Quality ID: 479</u> Hospital-Wide, 30-day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible MIPS Clinician Groups	• Administrative Claims	• N/A

Version History

Date	Change Description
04/10/2025	Original version