



2019 Medicare Part B Claims Measure Specifications Release Notes

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2019 Measure Specifications for Medicare Part B Claims Release Notes

CMS is pleased to announce the release of the 2019 Individual Measure Specifications for Medicare Part B Claims collection type Release Notes. Measure developers, professional organizations, and other stakeholders have provided comments, clarifications and technical corrections. The list below details changes to existing measures made since the release of the 2018 QPP Measure Specifications. Version 1.1 of the Release Notes corresponds to version 3.0 of the posted 2019 Measure Specifications for Medicare Part B Claims data collection type.

Global Edits to Measure Specifications:

- Added Meaningful Measure Category in Titles
- Updated Language for Information Regarding Non-Billable Coding
- Updated Options for Individual Measures and Measure Submission to Align with Program Language

Quality ID #1: Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)

- Deleted Denominator Coding, ICD-10-CM: E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359
- Added Denominator Coding, ICD-10-CM: E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3591, E10.3592, E10.3593, E10.3599, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3591, E11.3592, E11.3593, E11.3599, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3591, E13.3592, E13.3593, E13.3599
- Updated Rationale

Quality ID #12: Primary Open-Angle Glaucoma (POAG): Optic Nerve Evaluation

- Deleted Denominator Coding, ICD-10-CM: H40.1190, H40.1191, H40.1192, H40.1193, H40.1194, H40.1290, H40.1291, H40.1292, H40.1293, H40.1294, H40.159
- Updated Rationale and Copyright

Quality ID #14: Age-Related Macular Degeneration (AMD): Dilated Macular Examination

- Deleted Denominator Note
- Deleted Denominator Coding, CPT: 99241, 99242, 99243, 99244, 99245
- Deleted Denominator Coding, ICD-10-CM: H35.30
- Updated Numerator Options: Performance Met (G9974) and Denominator Exception (G9975)
- Updated Numerator Note and Copyright

Quality ID #19: Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care

- Deleted Denominator Coding, ICD-10-CM: E08.3219, E08.3299, E08.3319, E08.3399, E08.3419, E08.3499, E08.3519, E08.3529, E08.3539, E08.3549, E08.3559, E08.3599, E09.3219, E09.3299, E09.3319, E09.3399, E09.3419, E09.3499, E09.3519, E09.3529, E09.3539, E09.3549, E09.3559, E09.3599, E10.3219, E10.3299, E10.3319, E10.3399, E10.3419, E10.3499, E10.3519, E10.3529, E10.3539, E10.3549, E10.3559, E10.3599, E11.3219, E11.3299, E11.3319, E11.3399, E11.3419, E11.3499, E11.3519, E11.3529, E11.3539, E11.3549, E11.3559, E11.3599, E13.3219, E13.3299, E13.3319, E13.3399, E13.3419, E13.3499, E13.3519, E13.3529, E13.3539, E13.3549, E13.3559, E13.3599

Quality ID #21: Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin

- Deleted Denominator Coding, CPT: 32506, 32507, 33141, 33530, 34812, 34820, 34833, 34834, 35572, 38746, 38747, 44955, 49568, 57267, 61312
- Added Denominator Coding, CPT: 0505T, 33440, 33886, 38531, 34701, 34702, 34703, 34704, 34705, 34706, 34707, 34708, 34710
- Updated Copyright

Quality ID #23: Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)

- Deleted Denominator Coding, CPT: 32506, 32507, 34812, 34820, 34833, 34834, 35572, 38746, 44955, 46762, 57267, 61312
- Added Denominator Coding, CPT: 0505T, 34701, 34702, 34703, 34704, 34705, 34706, 34707, 34708, 34710, 38531
- No Longer NQF Endorsed

Quality ID #24: Communication with the Physician or Other Clinician Managing On-going Care Post- Fracture for Men and Women Aged 50 Years and Older

- No Longer NQF Endorsed

Quality ID #39: Screening for Osteoporosis for Women Aged 65-85 Years of Age

- No Significant Changes

Quality ID #46: Medication Reconciliation Post-Discharge

- No Significant Changes

Quality ID #47: Advance Care Plan

- Updated Measure Title

Quality ID #48: Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older

- No Significant Changes

Quality ID #50: Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older

- No Significant Changes

Quality ID #51: Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation

- No Significant Changes

Quality ID #52: Chronic Obstructive Pulmonary Disease (COPD): Long-Acting Inhaled Bronchodilator Therapy

- No Significant Changes

Quality ID #76: Prevention of Central Venous Catheter (CVC) - Related Bloodstream Infections

- Added Denominator Coding, CPT: 36572, 36573

Quality ID #91: Acute Otitis Externa (AOE): Topical Therapy

- Deleted Denominator Coding, ICD-10-CM: H60.8X3

Quality ID #93: Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use

- Deleted Denominator Coding, ICD-10-CM: H60.8X3
- Added Denominator Coding, ICD-10-CM: H60.311, H60.312, H60.313, H60.319, H60.321, H60.322, H60.323, H60.329
- Updated Rationale

Quality ID #99: Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade

- Finalized removal for 2019

Quality ID #100: Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade

- Finalized removal for 2019

Quality ID #109: Osteoarthritis (OA): Function and Pain Assessment

- Updated Instructions

Quality ID #110: Preventive Care and Screening: Influenza Immunization

- Updated Instructions, Clinical Recommendation Statements, and Copyright
- Deleted Denominator Coding, CPT or HCPCS: 96160, 96161

Quality ID #111: Pneumococcal Vaccination Status for Older Adults

- No Longer NQF Endorsed

Quality ID #112: Breast Cancer Screening

- Updated Rationale and Clinical Recommendation Statements

Quality ID #113: Colorectal Cancer Screening

- Updated Rationale and Clinical Recommendation Statements
- Added Denominator Coding, CPT: 99211, 99386, 99387, 99396, 99397

Quality ID #117: Diabetes: Eye Exam

- Updated Numerator Statement and Rationale
- Deleted Denominator Coding, ICD-10-CM: E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359
- Added Denominator Coding, ICD-10-CM: E10.3211, E10.3212, E10.3213, E10.3219, E10.3291, E10.3292, E10.3293, E10.3299, E10.3311, E10.3312, E10.3313, E10.3319, E10.3391, E10.3392, E10.3393, E10.3399, E10.3411, E10.3412, E10.3413, E10.3419, E10.3491, E10.3492, E10.3493, E10.3499, E10.3511, E10.3512, E10.3513, E10.3519, E10.3591, E10.3592, E10.3593, E10.3599, E11.3211, E11.3212, E11.3213, E11.3219, E11.3291, E11.3292, E11.3293, E11.3299, E11.3311, E11.3312, E11.3313, E11.3319, E11.3391, E11.3392, E11.3393, E11.3399, E11.3411, E11.3412, E11.3413, E11.3419, E11.3491, E11.3492, E11.3493, E11.3499, E11.3511, E11.3512, E11.3513, E11.3519, E11.3591, E11.3592, E11.3593, E11.3599, E13.3211, E13.3212, E13.3213, E13.3219, E13.3291, E13.3292, E13.3293, E13.3299, E13.3311, E13.3312, E13.3313, E13.3319, E13.3391, E13.3392, E13.3393, E13.3399, E13.3411, E13.3412, E13.3413, E13.3419, E13.3491, E13.3492, E13.3493, E13.3499, E13.3511, E13.3512, E13.3513, E13.3519, E13.3591, E13.3592, E13.3593, E13.3599

Quality ID #128: Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan

- Updated Instructions, Definitions, Rationale, and Clinical Recommendation Statements
- Added Denominator Coding, CPT or HCPCS: 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99401, 99402, G0473

Quality ID #130: Documentation of Current Medications in the Medical Record

- Updated Rationale
- Deleted Denominator Coding, CPT or HCPCS: 99024*¹
- Added Denominator Coding, CPT or HCPCS: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99339, 99340, G0515

Quality ID #131: Pain Assessment and Follow-Up

- Deleted Denominator Coding, CPT: 96118
- Added Denominator Coding, CPT: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 98943

Quality ID #134: Preventive Care and Screening: Screening for Depression and Follow-Up Plan

- Updated Instructions, Definitions, Denominator Submission Criteria, Numerator Instructions, and Rationale
- Deleted Denominator Coding, CPT or HCPCS: 96118, G0502, G0503, G0504, G0505, G0507
- Added Denominator Coding, CPT or HCPCS: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99483, 99484, 99492, 99493
- Deleted Denominator Coding, ICD-10-CM: F53
- Added Denominator Coding, ICD-10-CM: F53.0, F53.1

Quality ID #140: Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement

- Finalized removal for 2019

¹ *Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for Medicare Part B claims measures.

Quality ID #141: Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care

- Deleted Denominator Note
- Deleted Denominator Coding, CPT: 99241, 99242, 99243, 99244, 9924
- Updated Copyright

Quality ID #145: Radiology: Exposure Dose Indices or Exposure Time and Number of Images Reported for Procedures Using Fluoroscopy

- Updated Measure Title
- Deleted Denominator Coding, CPT or HCPCS: G0278, 75984, 76001

Quality ID #146: Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Screening Mammograms

- Deleted Denominator Note
- Deleted Denominator Coding, CPT or HCPCS: G0202

Quality ID #147: Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy

- No Significant Changes

Quality ID #154: Falls: Risk Assessment

- No Significant Changes

Quality ID #155: Falls: Plan of Care

- No Significant Changes

Quality ID #156: Oncology: Radiation Dose Limits to Normal Tissues

- Finalized removal for 2019

Quality ID #181: Elder Maltreatment Screen and Follow-Up Plan

- Updated Definitions, Rationale, Instructions, Clinical Recommendation Statements, and Copyright
- Deleted Denominator Coding, CPT or HCPCS: 96118, G0502, G0505
- Added Denominator Coding, CPT or HCPCS: 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 99483, 99492, G0102

Quality ID #182: Functional Outcome Assessment

- Updated Numerator Definitions and Clinical Recommendation Statements
- Added Denominator Coding, CPT: 98943

Quality ID #185: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use

- Finalized removal for 2019

Quality ID #195: Radiology: Stenosis Measurement in Carotid Imaging Reports

- Added Measure Instructions
- Updated Numerator Instructions
- Deleted Numerator Note

Quality ID #204: Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic

- Finalized removal for 2019

Quality ID #225: Radiology: Reminder System for Screening Mammograms

- Deleted Denominator Note
- Deleted Denominator Coding, CPT or HCPCS: G0202

Quality ID #226: Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

- Added Guidance Statement
- Updated Instructions, Numerator Note, Numerator Options, and Copyright
- Updated Denominator Criteria Submission Criteria 2
- Deleted Denominator Coding, CPT or HCPCS: 96160, 96161
- Updated Numerator (Submission Criteria 2) Options: (G9906) and (G9908)

Quality ID #236: Controlling High Blood Pressure

- No Significant Changes

Quality ID #249: Barrett's Esophagus

- No Significant Changes

Quality ID #250: Radical Prostatectomy Pathology Reporting

- No Significant Changes

Quality ID #251: Quantitative Immunohistochemical (IHC) Evaluation of Human Epidermal Growth Factor Receptor 2 Testing (HER2) for Breast Cancer Patients

- Finalized removal for 2019

Quality ID #254: Ultrasound Determination of Pregnancy Location for Pregnant Patients with Abdominal Pain

- Updated Instructions, Denominator Criteria, Clinical Recommendation Statements, and Copyright
- Updated Numerator Options: Performance Met (G8806) and Denominator Exception (G8807)

Quality ID #255: Rh Immunoglobulin (RhoGAM) for Rh-Negative Pregnant Women at Risk of Fetal Blood Exposure

- Updated Denominator Criteria, Clinical Recommendation Statements, and Copyright

Quality ID #261: Referral for Otologic Evaluation for Patients with Acute or Chronic Dizziness

- No Significant Changes

Quality ID #268: Epilepsy: Counseling for Women of Childbearing Potential with Epilepsy

- Updated Denominator Statement
- Added Numerator Definition, Numerator Instructions and Denominator Definition
- Added Numerator Option: Denominator Exclusion (M1016)
- Updated Clinical Recommendation Statements
- No Longer NQF Endorsed

Quality ID #317: Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented

- Updated Denominator Statement
- Added Denominator Coding, CPT or HCPCS: 99236, 99315, 99316, 99339, 99340

Quality ID #320: Appropriate Follow-Up Interval for Normal Colonoscopy in Average Risk Patients

- Updated Copyright

Quality ID #326: Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy

- Updated Measure Owner, Measure Description, Numerator Statement
- Updated CHA₂DSC₂-VASc Stroke Risk Assessment Criteria

Quality ID #395: Lung Cancer Reporting (Biopsy/Cytology Specimens)

- Updated Measure Type

Quality ID #396: Lung Cancer Reporting (Resection Specimens)

- Updated Measure Type

Quality ID #397: Melanoma Reporting

- Updated Measure Type, Measure Description, Numerator Statement, Rationale, and Clinical Recommendation Statements
- Added Numerator Instructions
- Updated Numerator Options: Performance Met (G9428), Denominator Exception (G9429), and Numerator Performance Not Met (G9431)

Quality ID #405: Appropriate Follow-up Imaging for Incidental Abdominal Lesions

- No Significant Changes

Quality ID #406: Appropriate Follow-up Imaging for Incidental Thyroid Nodules in Patients

- Updated Rationale and Clinical Recommendation Statements

Quality ID #407: Appropriate Treatment of Methicillin-Sensitive Staphylococcus Aureus (MSSA) Bacteremia

- No Significant Changes

Quality ID #410: Psoriasis: Clinical Response to Oral Systemic or Biologic Medications

- Updated Measure Instructions, Denominator Statement, Rationale, and Copyright
- Added Denominator Criteria: (G9764)

Quality ID #415: Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 18 Years and Older

- Updated Measure Description, Denominator Statement, Numerator Definitions, and Rationale
- Updated Numerator Options: Denominator Exclusions (G9530), (G9531), and (G9532)
- Added Denominator Coding, CPT: 99291

Quality ID #416: Emergency Medicine: Emergency Department Utilization of CT for Minor Blunt Head Trauma for Patients Aged 2 Through 17 Years

- Updated Measure Description, Denominator Description, Denominator Definitions, Numerator, Rationale, and Clinical Recommendation Statements
- Added Denominator Coding, CPT: 99291
- Updated Numerator Options: Denominator Exclusion (G9596) and (G9594)

Quality ID #418: Osteoporosis Management in Women Who Had a Fracture

- Added Denominator Coding (Option 1 Denominator Criteria for Eligible Cases), ICD-10-CM: M80.00XA, M80.011A, M80.012A, M80.019A, M80.021A, M80.022A, M80.029A, M80.031A, M80.032A, M80.039A, M80.041A, M80.042A, M80.049A, M80.051A, M80.052A, M80.059A, M80.061A, M80.062A, M80.069A, M80.071A, M80.072A, M80.079A, M80.08XA, M80.80XA, M80.811A, M80.812A, M80.819A, M80.821A, M80.822A, M80.829A, M80.831A, M80.832A, M80.839A, M80.841A, M80.842A, M80.849A, M80.851A, M80.852A, M80.859A, M80.861A, M80.862A, M80.869A, M80.871A, M80.872A, M80.879A, M80.88XA, M97.01XA, M97.02XA, M97.11XA, M97.12XA, M97.21XA, M97.22XA, M97.31XA, M97.32XA, M97.41XA, M97.42XA
- Added Denominator Coding (Option 2 Denominator Criteria for Eligible Cases), ICD-10-CM: M80, M97

Quality ID #419: Overuse of Imaging for the Evaluation of Primary Headache

- Updated Measure Title, Measure Type, Measure Description, Denominator Statement, Numerator Statement, Numerator Definitions, Rationale, and Clinical Recommendations Statements
- Added Denominator Note and Numerator Instructions
- Deleted Denominator Coding, ICD-10-CM: G43.B0, G43.B1, G43.C0, G43.C1, G44.001, G44.009, G44.011, G44.019, G44.021, G44.029, G44.031, G44.041, G44.049, G44.051, G44.059, G44.091, G44.099, G44.201, G44.211, G44.51, G44.53, G44.83, G44.84, G44.85
- Added Denominator Coding, ICD-10-CM: G43.719, G43.821, G43.829, G43.831, G43.839
- Deleted Denominator Coding, CPT: 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99347, 99348, 99349, 99350
- Added Denominator Coding, CPT: 99211, 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99241*, 99242*, 99243*, 99244*, 99245*²
- Updated Numerator Options: Performance Met (M1027+ M1031), Denominator Exception (M1028), Denominator Exclusion (M1030), and Performance Not Met (M1029+ M1031)
- Updated Numerator Option: Denominator Exception (G9537)

Quality ID #422: Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury

- Updated Copyright

Quality ID #423: Perioperative Anti-Platelet Therapy for Patients Undergoing Carotid Endarterectomy

- Finalized removal for 2019

Quality ID #425: Photodocumentation of Cecal Intubation

- Updated Measure Description, Numerator Statement, Clinical Recommendation Statements, and Copyright
- Updated Numerator Options: Performance Met (G9612) and Performance Not Met (G9614)

Quality ID #429: Pelvic Organ Prolapse: Preoperative Screening for Uterine Malignancy

- Updated Copyright

² *Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for Medicare Part B claims measures.

Quality ID #435: Quality of Life Assessment For Patients With Primary Headache Disorders

- Added Denominator Instructions, Denominator Note, and Numerator Instructions
- Deleted Denominator Coding, ICD-10-CM: G43.B0, G43.B1, G43.C0, G43.Cq, G44.001, G44.011, G44.021, G44.031, G44.041, G44.051, G44.091, G44.201, G44.211
- Added Denominator Coding, ICD-10-CM: G43.601, G43.609, G43.611, G43.619, G43.719, G43.821, G43.829, G43.831, G43.839, G44.82
- Deleted Denominator Coding, CPT: 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99238, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350
- Added Denominator Coding, CPT: 99211, 99241*, 99242*, 99243*, 99244*, 99245*³
- Updated to Patient Reported Outcome

Quality ID #436: Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques

- Added Numerator Options: Performance Met (G9637) and Performance Not Met (G9638)

Quality ID #437: Rate of Surgical Conversion from Lower Extremity Endovascular Revascularization Procedure

- No Significant Changes

³ *Signifies that this CPT Category I code is a non-covered service under the PFS (Physician Fee Schedule). These non-covered services will not be counted in the denominator population for Medicare Part B claims measures.