JIRA Measures Under Consideration Data Template for Candidate Measures

2018 Finalized vs. 2019 Finalized

**Burden Impact:** The changes to this data template reflect proposals in the CY2020 proposed rule which result in an estimated increase in burden of 1 hour per measure nomination.

| **Page** | **Final Rule 2018** | **Final Rule 2019** | **Reason for Change** |
| --- | --- | --- | --- |
| 1 (Row 2) | Under “Screen Guidance” Column: “Select Measure Submission to nominate a measure for MUC list. Select Modify Measure to change a measure already submitted for 2018. Select Question to ask a question on the MUC process. Select Feedback to leave feedback about the 2018 MUC process.” | Under “Screen Guidance” Column: “Select Measure Submission to nominate a measure for the 2019 MUC list. Select Question to ask a question on the MUC process. Select Modify Candidate Measure to change a measure already submitted for 2019. Select Feedback to leave feedback about the 2019 MUC process.” | Alignment with current year |
| 2 (Row 3) | Under “Screen Guidance” Column: “New for 2018: If you are submitting for MIPS, there are two choices of program. Choose MIPS-Quality for measures that pertain to quality and/or efficiency. Choose the new program MIPS-Cost only for measures that pertain to cost. Do not select both MIPS-Quality and MIPS-Cost for the same measure.” | Under “Screen Guidance” Column: *Text Deleted:* “**~~New for 2018:~~** If you are submitting for MIPS, there are two choices of program. Choose MIPS-Quality for measures that pertain to quality and/or efficiency. Choose **~~the new program~~** MIPS-Cost only for measures that pertain to cost. Do not select both MIPS-Quality and MIPS-Cost for the same measure.” | Edited for clarity |
| 2 (Row 3) | Under “Possible Values” Column:“Medicaid and Medicare EHR Incentive Program for Eligible Hospitals and Critical Access Hospitals” | Under “Possible Values” Column: *Text Amended:* “Medicare and Medicaid Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals (CAHs)” | Edited for alignment with new program title |
| 2 (Row 3) |  | Under “Possible Values” Column: *Text Added:* “Part C and D Star Ratings” | Late addition due to new requirement for Part C and D Star Rating to engage in rulemaking |
| 3 (Row 4) | Under “Field Label” column:“What is the history or background for including this measure on the 2018 MUC list?” | Under “Field Label” column:“What is the history or background for including this measure on the 2019 MUC list?” | Edited for clarity |
| 3 (Row 6) | Under “Screen Guidance” column:“For example: Hospice Quality Reporting (2012-2017)” | Under “Screen Guidance” column:“For example: Hospice Quality Reporting (2012-2018)” | Edited for clarity |
| 4 (Row 7) | Under “Screen Guidance” column:“Select as many as apply. These should be current use programs only, not programs for the 2018 submittal.” | Under “Screen Guidance” column:“Select as many as apply. These should be current use programs only, not programs for the 2019 submittal.” | Edited for clarity |
| 4 (Row 7) |  | Under “Possible Values” column:*Text Added:* “Health Homes Core Set”“Medicaid and CHIP Child Core Set”“Medicare and Medicaid Promoting Interoperability Program for Eligible Professionals”“Medicare Part C”“Medicare Part D”“Quality Health Plan Quality Rating System” | Edited for alignment with finalized requirements |
| 4 (Row 7) | Under “Possible Values” Column: “Merit-based Incentive Payment System-Cost”“Merit-based Incentive Payment System-Quality” | Under “Possible Values” Column: *Text Deleted/Amended:* “Merit-based Incentive Payment System” | Edited for clarity |
| 4 (Row 7) | Under “Possible Values” Column: “Medicaid and Medicare EHR Incentive Program for Eligible Hospitals and Critical Access Hospitals” | Under “Possible Values” Column: *Text Amended:* “Medicare and Medicaid Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals “ | Edited for alignment |
| 6 (Row 13) | Under “Field Label” Column:“Exclusions” | Under “Field Label” Column:*Text Amended:* “Exclusions/Exceptions” | Edited for clarity |
| 8 (Row 21) | Under “Screen Guidance” Column:“What populations are included in this measure? e.g., Medicare Fee for Service, Medicare Advantage, Medicaid, All Payer, etc.” | Under “Screen Guidance” Column:*Text Added:* “What populations are included in this measure? e.g., Medicare Fee for Service, Medicare Advantage, Medicaid, CHIP, All Payer, etc.” | Edited for clarity |
| 8 (Row 23) | Under “Field Label” Column:“What one healthcare priority applies to this measure?” | Under “Field Label” Column:*Text Amended:* “What one primary healthcare priority applies to this measure?” | Edited for clarity  |
| 8 (Row 23) | Under “Screen Guidance” Column:“Healthcare priorities (also known as domains); select one.” | Under “Screen Guidance” Column: *Text Amended:* “Healthcare priorities (also known as domains); select the best one.” | Edited for clarity |
| 9 (Row 24) | Under “Field Label” Column:“What one meaningful measure applies to this measure?” | Under “Field Label” Column:*Text Amended:* “What one primary meaningful measure area applies to this measure?” | Edited for clarity |
| 9 (Row 24) | Under “Screen Guidance” Column:“Select one. The meaningful measure choices depend on your selection of healthcare priority above” | Under “Screen Guidance” Column:*Text Amended:* “Select the best one. The meaningful measure area choices depend on your selection of primary healthcare priority above.” | Edited for clarity |
| 9 (Row 24) | Under “Possible Values” Column:“Patient reported functional outcomes” | Under “Possible Values” Column:*Text Amended:* “Functional outcomes” | Edited for clarity |
| 10 (Row 25) |  | Entire Data Field added. Secondary Healthcare Priority selection option; same values as Row 23. | Added to provide submitters second option |
| 11 (Row 26) |  | Entire Data Field added. Secondary Healthcare Priority selection option; same values as Row 24. | Added to provide submitters second option |
| 12 (Row 28) | Under “Possible Values” Column:“De-endorsed” | Under “Possible Values” Column:*Text Amended*: “Endorsement Removed” | Edited for clarity |
| 12 (Row 29) | Under “Field Label” Column:“NQF ID Number” | Under “Field Label” Column:*Text Amended*: “NQF ID” | Edited for clarity |
| 12 (Row 29) | Under “Screen Guidance” Column:“Four-digit number with leading zeros if needed. If no NQF ID number is known, enter numerals 0000.” | Under “Screen Guidance” Column:*Text Amended*: “Four- or five-digit identifier with leading zeros and following letter if needed. If no NQF ID number is known, enter numerals 0000.” | Edited for clarity |
| 12 (Row 29) | Under “Data Form” Column:“Four-digit ID value” | Under “Data Form” Column:*Text Amended:* “Can be four- or five-character alphanumeric ID value.” | Edited for clarity |
| 13 (Row 35) |  | Under “Possible Values” Column:*Text Added:* “2019” | Added to be more inclusive |
| 14 (Row 36) | Under “Possible Values” Column:“2018” | Under “Possible Values” Column:*Text Deleted:* “**~~2018~~**”*Text Added:* “2023” | Edited for clarity  |
| 15 (Row 38) | Under “Screen Guidance” Column:“If you selected early development above, meaning testing is not currently underway, please describe when testing is planned (i.e., specific dates), what type of testing is planned (e.g., alpha, beta, etc.) as well as the types of facilities the measure will be tested in.” | Under “Screen Guidance” Column:*Text Amended:* “If you selected early development above, meaning testing is not currently underway, please describe when testing is planned (i.e., specific dates), what type of testing is planned (e.g., alpha, beta, etc.) as well as the types of facilities in which the measure will be tested.” | Edited for clarity |
| 16 (Row 39) |  | Under “Possible Values” Column:*Text Added:*“Behavioral health clinic and treatment facility”“Federally qualified health center (FQHC)” | Added to be more inclusive |
| 16 (Row 40) |  | Under “Possible Values” Column:*Text Added:*“Medicaid program (e.g., Health Home or 1115)”“State” | Added to be more inclusive |
| 17 (Row 41) | Under “Screen Guidance” Column:“If Non-Medicare Administrative Claims, then enter relevant parts in the field below.” | Under “Screen Guidance” Column:*Text Amended*: “If Claims, then enter relevant parts in the field below.”*Text Added:* “Use the “Comments” field to specify or elaborate on the type of data source, if needed to define your measure.” | Edited/added for clarity |
| 17 (Row 41) | Under “Possible Values” Column:“Administrative claims” | Under “Possible Values” Column:*Text Deleted:* “~~Administrative claims~~”*Text Added:* “State vital records” | Edited for clarity and to be more inclusive |
| 17 (Row 44) | Under “Field Label” Column:“If EHR or Administrative Claims or Chart-Abstracted Data, description of parts related to these sources” | Under “Field Label” Column:*Text Amended:* “If EHR or Claims or Chart-Abstracted Data, description of parts related to these sources” | Edited for clarity |
| 17 (Row 44) | Under “Screen Guidance” Column:“Provide a brief, specific description of which parts of the measure are taken from EHR, administrative claims-based, or chart-abstracted (i.e., paper medical records) data sources.” | Under “Screen Guidance” Column:*Text Amended:* “Provide a brief, specific description of which parts of the measure are taken from EHR, claims-based, or chart-abstracted (i.e., paper medical records) data sources.” | Edited for clarity |
| 18 (Row 45) | Under “Screen Guidance” Column:“This differs from the data sources above. This is the anticipated data submission method. “Administrative Claims” is for CMS-developed measures only. Select as many as apply. Hold down the Ctrl button while choosing to make multiple selections.” | Under “Screen Guidance” Column:*Text Amended:* “This differs from the data sources above. This is the anticipated data submission method. Select as many as apply. Hold down the Ctrl button while choosing to make multiple selections. Use the “Comments” field to specify or elaborate on the type of reporting data, if needed to define your measure.” | Edited for clarity |
| 18 (Row 45) | Under “Possible Values” Column:“eCQMRegistryClaimsAdministrative ClaimsOther (enter in Comments at far bottom of this screen)” | Under “Possible Values” Column:“eCQMCQM (Registry)ClaimsWeb interfaceOther (enter in Comments at far bottom of this screen)” | Edited for clarity |
| 20 (Row 53) |  | Under “Possible Values” column:*Text Added:* “2018” | Added to be inclusive |
| 22 (Row 59) | Under “Screen Guidance” Column:“For your reference in completing this section, click on the links below or copy/paste the links into your browser to view each year's MAP pre-rulemaking report (2012 to 2018).2018: Link currently unavailable2017: http://www.qualityforum.org/map/” | Under “Screen Guidance” Column:“For your reference in completing this section, click on the links below or copy/paste the links into your browser to view each year's MAP pre-rulemaking report (2012 to 2019).2019: Link currently unavailable2016-18: http://www.qualityforum.org/map/” | Alignment with current year and update data sources |
| 22 (Row 62) | Under “Possible Values” Column:“See Appendix A.60-62 for list choices.” | Under “Possible Values” Column:“See Appendix A.62-64 for list choices.” | Edited for clarity |
| 23 (Row 64) | Under “Possible Values” Column:“See Appendix A.60-62 for list choices.” | Under “Possible Values” Column:“See Appendix A.62-64 for list choices.” | Edited for clarity |