

## MUC Data Template Crosswalk CY 2021 Final Versus CY 2022 Final

**Burden Impact:** The changes to this form do not reflect policies in the CY 2022 Physician Fee Scheduled (PFS) Final Rule for the Quality Payment Program. There are no impacts to burden as a result of any changes reflected here.

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### Change #1

**Location:** Title (Page 1)

**Reason for Change:** Updated date of document.

**CY 2021 Final Rule text:** Measures under Consideration 2020

**CY 2022 Final Rule text:** Measures under Consideration 2021

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### Change #2

**Location:** Instructions (Page 1)

**Reason for Change:** Changed the instructions to better fit with the current CY 2022 Final Rule text document and to reference the measure submission tool, CMS MERIT.

#### **CY 2021 Final Rule text:**

1. Complete the measure template below by entering your candidate measure information in the column titled “Add Your Content Here.”
2. All rows that have an asterisk symbol \* in the Field Label require a response. These rows also appear unshaded.
3. All rows shaded in gray are optional. You are encouraged to complete all rows that are applicable to your measure.
4. For each row, the “Guidance” column provides details about how to complete the form and what kind of data to include in your response.
5. For check boxes, note whether the field is “select one” or “select all that apply.” You can click on the box to place or remove the “X.”
6. If you have lengthy text to insert, place the text at the bottom of the form, clearly indicating your intended row number or field label.
7. Send completed templates and any accompanying files (e.g., MIPS Peer Review Journal Article attachment, testing data, MAT information) by June 30, 2020 to [prulemaking@battelle.org](mailto:prulemaking@battelle.org)
8. If you need to submit a measure change, please use the “Review” tab in Word and select “Track Changes” or highlight any updates you made to the measure, then by September 4, 2020, send the revised template to [prulemaking@battelle.org](mailto:prulemaking@battelle.org)

**CY 2022 Final Rule text:**

1. Before accessing the CMS MERIT (Measures Under Consideration Entry/Review and Information Tool) online system, you are invited to complete the measure template below by entering your candidate measure information in the column titled “Add Your Content Here.”
2. All rows that have an asterisk symbol \* in the Field Label require a response.
3. For each row, the “Guidance” column provides details on how to complete the template and what kinds of data to include.
4. For check boxes, note whether the field is “select one” or “select all that apply.” You can click on the box to place or remove the “X.”
5. Row numbers are for convenience only and do not appear on the MERIT user interface.
6. Send any questions to [MMSsupport@battelle.org](mailto:MMSsupport@battelle.org).

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**Change #3**

**Location:** Whole Document

**Reason for Change:** To label document clearly in footer.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:** 2021 CMS MUC LIST DATA TEMPLATE

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**Change #4**

**Location:** Whole Document

**Reason for Change:** Updated date in footer

**CY 2021 Final Rule text:** 4/10/2020

**CY 2022 Final Rule text:** 3/26/2021

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**Change #5**

**Location:** Whole Document

**Reason for Change:** Reformatted to accommodate all footer text.

**CY 2021 Final Rule text:** [Aligned Right]

**CY 2022 Final Rule text:** [Centered]

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**Change #6**

**Location:** Whole Document

**Reason for Change:** Categorized the template into sections based on broad categories of questions about the measure, matching CMS MERIT.

**CY 2021 Final Rule text:** n/a

**CY 2022 Final Rule text:** “Properties, Steward, Characteristics, Groups, Programs, Similar Measures, Attachments, Comments”

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**Change #7**

**Location:** Page 1

**Reason for Change:** Added Section header “PROPERTIES” to match section categories in CMS MERIT.

**CY 2021 Final Rule text:** n/a

**CY 2022 Final Rule text:** PROPERTIES

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**Change #8**

**Location:** Whole Document

**Reason for Change:** Added column into the table to display Subsections of each of the questions being asked to match CMS MERIT and increase navigability of the document. Subsections include: Measure Information, Burden, State of Devel, Reliability Testing, Validity Testing, Measure Performance, Impact, Cost factors, Background Information, Data Sources, Steward Information, Long-Term Steward Information, Submitter Information, General Characteristics, Evidence, Risk Adjustments, Healthcare Domain, Endorsement Characteristics and N/A

**CY 2021 Final Rule text:** n/a

**CY 2022 Final Rule text:** [Column]: Subsection

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**Change #9**

**Location:** Page 2, Row 4

**Reason for Change:** Added new row for Numerator Exclusions to match CMS MERIT, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Information	004	*Numerator Exclusions	For additional information on exclusions/exceptions, see: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf</a> . If not applicable, enter 'N/A.'
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**Change #10**

**Location:** Page 2, Row 6

**Reason for Change:** Added new row for Denominator Exclusions to match CMS MERIT, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Information	006	*Denominator Exclusions	For additional information on exclusions/exceptions, see: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf</a> . If not applicable, enter 'N/A.'
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**Change #11**

**Location:** Page 3, Row 7

**Reason for Change:** Added new row for Denominator Exceptions to match CMS MERIT, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Information	007	*Denominator Exceptions	For additional information on exclusions/exceptions, see: <a href="https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf">https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf</a> . If not applicable, enter 'N/A.'
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**Change #12**

**Location:** Page 3, Row 8

**Reason for Change:** Changed information in column: Guidance to align with ability to add attachments in CMS MERIT.

**CY 2021 Final Rule text:** Add description of evidence. If you have lengthy text to insert, place the text at the bottom of this form, clearly indicating row number 28.

**CY 2022 Final Rule text:** Add description of evidence. If you have lengthy text, add the evidence as an attachment, named to clearly indicate the related form field. You may attach the completed CMS consensus-based entity “Evidence Attachment” if applicable.

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**Change #13**

**Location:** Page 3, Row 9

**Reason for Change:** Changed information in column: Guidance to align with CMS MERIT capabilities

**CY 2021 Final Rule text:** Provide evidence that the data source used by the measure is readily available to CMS. Summarize how CMS would operationalize the measure. For example, if the measure is based on registry data, the submitter must provide evidence that the majority of the hospitals in the program in which the measure will be used participate in the registry; if the measure is registry-based, the submitter must provide a plan for CMS to gain access to the registry data. For eCQMs, attach feasibility scorecard or other quantitative evidence indicating measure can be reported by the intended reporting entities. If you have lengthy text to insert, place the text at the bottom of this form, clearly indicating row number 31.

**CY 2022 Final Rule text:** Provide evidence that the data source used by the measure is readily available to CMS. Summarize how CMS would operationalize the measure. For electronic clinical quality measures (eCQMs), attach feasibility scorecard or other quantitative evidence indicating measure can be reported by the intended reporting entities.

If you have lengthy text, add the evidence as an attachment, named to clearly indicate the related form field.

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**Change #14**

**Location:** Page 3, Row 10

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance, and ADD YOUR CONTEXT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	010	*Burden for Patient: Does the measure require survey data from the patient?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #15**

**Location:** Page 3, Row 11

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	011	*If yes, what is the estimated time to complete the survey?	Enter time in minutes. If unknown, enter 0.
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**Change #16**

**Location:** Page 3, Row 12

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	012	*If yes, what is the frequency of requests for survey data per year?	Enter the number of requests per patient per year.
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**Change #17**

**Location:** Page 3, Row 13

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	013	*If yes, are the survey data to be collected during or outside of a visit?	Select all that apply	<input type="checkbox"/> Prior to visit <input type="checkbox"/> During visit <input type="checkbox"/> After visit
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**Change #18**

**Location:** Page 4, Row 14

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	014	*Burden for Provider: Was a provider workflow analysis conducted?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #19**

**Location:** Page 4, Row 15

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	015	*If yes, how many sites were evaluated in the provider workflow analysis?	Enter the number of sites that were evaluated in the provider workflow analysis.
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**Change #20**

**Location:** Page 4, Row 16

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	016	*Did the provider workflow have to be modified to accommodate the new measure?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #21**

**Location:** Page 4, Row 17

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	017	*If yes, how would you describe the degree of effort?	Select one	<input type="checkbox"/> 1 (little to no effort) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 (substantial effort)
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**Change #22**

**Location:** Page 4, Row 18

**Reason for Change:** Added new row to support collection of additional information which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	018	*Does the measure require manual abstraction?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #23**

**Location:** Page 4, Row 19

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	019	*If yes, what is the estimated time per record to abstract data?	Enter time in minutes. If unknown, enter 0.
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**Change #24**

**Location:** Page 4, Row 20

**Reason for Change:** Added new row to support collection of additional information which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	020	*How many data elements will be collected for the measure?	Enter number of elements. If a data element has to be abstracted more than once per record (e.g., medication dose is abstracted once for each of the patient's medications), estimate the average number of times it would be abstracted per eligible case and include that in the total number of data elements.
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**Change #25**

**Location:** Page 5, Row 21

**Reason for Change:** Changed information from question to statement to align with CMS MERIT. in column: Field Label

**CY 2021 Final Rule text:** In what state of development is the measure?

**CY 2022 Final Rule text:** State of Development

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**Change #26**

**Location:** Page 5, Row 21

**Reason for Change:** Changed information in column: Guidance to reflect current response options.

**CY 2021 Final Rule text:** Select all that apply.

**CY 2022 Final Rule text:** Select all that apply. Before selecting "Conceptualization" or "Specification," or "Field Testing," check program requirements.

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**Change #27**

**Location:** Page 5, Row 21

**Reason for Change:** Changed information in column: ADD YOUR CONTEXT HERE to split Early Development into the development states Conceptualization and Specification.

**CY 2021 Final Rule text:**  Early Development  Field Testing  Fully Developed

**CY 2022 Final Rule text:**  Conceptualization  Specification  Field Testing  Fully Developed

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## **Change #28**

**Location:** Page 5, Row 22

**Reason for Change:** Changed information in column: Guidance to improve clarity and provide reference to the Measures Management System Blueprint.

### **CY 2021 Final Rule text:**

Details are helpful to CMS in understanding where the measure is in the developmental cycle and will weigh heavily in determining whether or not the measure will be published on the MUC List.

If you entered 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.

If you entered field testing or fully developed above, please describe what testing (e.g., alpha, beta, etc.) has taken place in addition to the results of that testing.

Related to testing, summarize results from validity testing including number of reporting entities and patients measured, and how validity was assessed. Summarize results from reliability testing including number of reporting entities and patients measured, and how reliability was assessed.

### **CY 2022 Final Rule text:**

If “Conceptualization,” or “Specification,” describe when testing is planned (i.e., specific dates), what type of testing is planned (e.g., alpha, beta) as well as the types of facilities in which the measure will be tested.

If “Field Testing” or “Fully Developed,” describe what testing (e.g., alpha, beta) has taken place in addition to the results of that testing.

Summarize results from validity testing and reliability testing. For additional information, see: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Downloads/Blueprint.pdf>

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**Change #29**

**Location:** Page 6, Row 25

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	025	*Type of Reliability Testing	Select all that apply	<input type="checkbox"/> Measure Score Reliability <input type="checkbox"/> Data Element Reliability
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**Change #30**

**Location:** Page 6, Row 26

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	026	*Reliability Testing: Type of Testing Analysis	Select all that apply	<input type="checkbox"/> Signal to Noise <input type="checkbox"/> Random Split Half Correlation <input type="checkbox"/> IRR (Inter-rater reliability) <input type="checkbox"/> ICC (Intraclass correlation coefficient) <input type="checkbox"/> Test-Retest <input type="checkbox"/> Internal Consistency <input type="checkbox"/> Other (enter here):
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**Change #31**

**Location:** Page 6, Row 27

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	027	*Reliability testing sample size	For the reliability testing provided, indicate the number of measured entities sampled.
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**Change #32**

**Location:** Page 6, Row 28

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	028	*Reliability testing statistical result	For the reliability testing provided, indicate the statistical result(s) of the testing analysis. If data element reliability was conducted, provide the scores for the critical data elements tested. If signal-to-noise was conducted for measure score reliability, give the range of reliability scores for measured entities in addition to the mean.
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**Change #33**

**Location:** Page 7, Row 29

**Change:** Added new row which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	029	*Reliability testing interpretation of results	For the reliability testing provided, briefly describe the interpretation of results.
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**Change #34**

**Location:** Page 7, Row 30

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	030	Reliability Testing: Was a minimum number of denominator cases per measured entity established to achieve sufficient measure score reliability?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #35**

**Location:** Page 7, Row 31

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Reliability Testing	031	If yes, specify the number of cases and the percentage of providers	Enter the minimum number of denominator cases required for each measured entity to report on this measure. Also, specify the percentage of providers in the test sample that met the minimum denominator requirement.
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**Change #36**

**Location:** Page 7, Row 32

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Validity Testing	032	* Type of Validity Testing	Select all that apply	<input type="checkbox"/> Measure Score Validity <input type="checkbox"/> Data Element Validity
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**Change #37**

**Location:** Page 7, Row 33

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Validity Testing	033	*Validity Testing: Type of Validity Testing Analysis	Select all that apply	<input type="checkbox"/> Correlation <input type="checkbox"/> Face Validity <input type="checkbox"/> Construct Validity <input type="checkbox"/> Gold Standard Comparison <input type="checkbox"/> Internal Consistency <input type="checkbox"/> Predictive Validity <input type="checkbox"/> Structural Validity <input type="checkbox"/> Other (enter here):
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**Change #38**

**Location:** Page 7, Row 34

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Validity Testing	034	*Validity testing sample size	For the validity testing provided, indicate the number of measured entities sampled.
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**Change #39**

**Location:** Page 7, Row 35

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Validity Testing	035	*Validity testing statistical result	For the validity testing provided, indicate the statistical result(s) of the testing analysis. If data element validity was conducted, provide the scores for the critical data elements tested. If face validity was conducted, list the total number of voting members in addition to the percentage that voted in favor of the measure's face validity.
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**Change #40**

**Location:** Page 7, Row 36

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Validity Testing	036	*Validity testing interpretation of results	For the validity testing provided, indicate the interpretation of results.
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**Change #41**

**Location:** Page 8, Row 37

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Performance	037	*Measure performance - type of score	Select one	<input type="checkbox"/> Proportion <input type="checkbox"/> Ratio <input type="checkbox"/> Mean <input type="checkbox"/> Median <input type="checkbox"/> Continuous Variable <input type="checkbox"/> Other (enter here):
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**Change #41**

**Location:** Page 8, Row 38

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Performance	038	*Measure performance score interpretation	Select one	<input type="checkbox"/> Higher score is better <input type="checkbox"/> Lower score is better <input type="checkbox"/> Score falling within a defined interval <input type="checkbox"/> Passing Score <input type="checkbox"/> Other (enter here):
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**Change #42**

**Location:** Page 8, Row 39

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Performance	039	*Provide mean performance rate and standard deviation for each submission method a measure has or is anticipated to have	Provide the mean performance rate and standard deviation for the measure's submission method(s). If the measure has more than one submission method, provide all that are available, indicating which results correspond to which method.
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**Change #43**

**Location:** Page 8, Row 40

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Measure Performance	040	*Benchmark, if applicable	Provide the benchmark for the measure's performance rate. If not applicable, type "not applicable."
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**Change #44**

**Location:** Page 8, Row 41

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	041	* Meaningful to Patients. Was input collected from patient and/or caregiver?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #45****Location:** Page 8, Row 42**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE**CY 2021 Final Rule text:** N/a**CY 2022 Final Rule text:**

Impact	042	*If yes, choose all methods of obtaining patient/caregiver information.	Select all that apply	<input type="checkbox"/> Standard Technical Expert Panel (TEP) inclusive of patient/caregiver representatives <input type="checkbox"/> TEP consisting of ONLY patients or family representatives <input type="checkbox"/> Focus groups <input type="checkbox"/> Working groups <input type="checkbox"/> One-on-one interviews <input type="checkbox"/> Surveys <input type="checkbox"/> Virtual communities <input type="checkbox"/> Other (enter here):
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**Change #46****Location:** Page 9, Row 43**Reason for Change:** Added new row to support collection of additional information which included: Subsection, Row, Field Label, and Guidance**CY 2021 Final Rule text:** N/a**CY 2022 Final Rule text:**

Impact	043	How many times and at what phase(s) of measure development was the patient/caregiver engaged?	Specify the number of times the patient/caregiver representatives were engaged and at what phases of measure development. For example, patient/caregivers were engaged a total of 2 times. Once during conceptualization and once at the conclusion of specification.
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**Change #47**

**Location:** Page 9, Row 44

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	044	*Total number of patients and/or caregivers consulted	Indicate number
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**Change #48**

**Location:** Page 9, Row 45

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	045	Specify the ratio of patients/caregivers to policy/clinician experts engaged in TEP or working groups	Number of patients/caregivers: number of policy/clinician experts. For example, 1:2
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**Change #49**

**Location:** Page 9, Row 46

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	046	*Total number of patients/caregivers who agreed that the measure information helps inform care and make decisions	Indicate number
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**Change #50**

**Location:** Page 9, Row 47

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	047	*Meaningful to Clinicians. Were clinicians and/or providers consulted?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #51**

**Location:** Page 9, Row 48

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	048	*If yes, choose all methods that obtained clinician and/or provider input	Select all that apply	<input type="checkbox"/> Standard TEP <input type="checkbox"/> TEP consisting of ONLY clinicians <input type="checkbox"/> Focus groups <input type="checkbox"/> Working groups <input type="checkbox"/> One-on-one interviews <input type="checkbox"/> Surveys <input type="checkbox"/> Virtual communities <input type="checkbox"/> Other (enter here)
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**Change #52**

**Location:** Page 9, Row 49

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	049	*Total number of clinicians/providers consulted	Indicate number
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**Change #53**

**Location:** Page 9, Row 50

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	050	*Total number of clinicians/providers who agreed that the measure was actionable to improve quality of care	Indicate number
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**Change #54**

**Location:** Page 10, Row 51

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	051	*Estimated impact of the measure: Estimate of annual denominator size	Enter numerical value or "unable to determine."
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**Change #55**

**Location:** Page 10, Row 52

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Impact	052	*Estimate of annual improvement in measure score	Enter numerical value or "not applicable." State the expected improvement in absolute terms in the units expressed by the measure, for example, percentage points or patients per 1000. Using the estimated annual denominator size and median measure scores from your test data, estimate the number of additional numerator events or outcomes that would be achieved during each performance period if measured entities below the median score achieved at least the median measure score. For inverse measures, estimate the number of additional numerator events or outcomes avoided if measured entities above the median score achieved the median measure score.
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**Change #56**

**Location:** Page 10, Row 53

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Cost Factors	053	*Estimated Cost Avoided by the Measure: Estimate of average cost savings per event	Numeric dollar value, "not applicable," or "unable to determine." Enter the estimated average net cost avoided per event as a numeric dollar value. If there is no anticipated impact, state "none." If you are unable to estimate costs avoided, state "unable to determine." If costs avoided are not an appropriate metric for your measure focus (e.g., mortality), state "not applicable."
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**Change #57**

**Location:** Page 10, Row 54

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Cost Factors	054	*Cost avoided annually by Medicare/Provider	Using the estimate for improvement and the estimated average cost savings per event, provide the costs that would be avoided by Medicare/provider annually as a numeric dollar value. If there is no anticipated impact, state "none." If you are unable to estimate costs avoided, state "unable to determine." If costs avoided are not an appropriate metric for your measure focus (e.g., mortality), state "not applicable."
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**Change #58**

**Location:** Page 11, Row 55

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Cost Factors	055	*Source of estimate	Briefly describe the assumptions for your cost estimates and cite the sources of cost information. If you did not identify sources of cost information, state "none." If costs avoided are not an appropriate metric for your measure focus (e.g., mortality), state "not applicable."
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**Change #59**

**Location:** Page 11, Row 56

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Cost Factors	056	*Year of cost literature cited	Provide the year of the cost estimate (e.g., 2016 dollars). If adjusted for inflation, provide the year the estimate was adjusted to (e.g., 2020 dollars after adjusting for inflation). If you did not identify sources of cost information, state "none." If costs avoided are not an appropriate metric for your measure focus (e.g., mortality), state "not applicable."
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**Change #60**

**Location:** Page 11, Row 57

**Reason for Change:** Changed the information in column: Field Label to make the question applicable for future years without modification.

**CY 2021 Final Rule text:** \*What is the history or background for including this measure on the CY 2021 Final Rule text list?

**CY 2022 Final Rule text:** \*What is the history or background for including this measure on the current year MUC list?

---

**Change #61**

**Location:** Page 11, Row 57

**Reason for Change:** Changed the information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** Select only one description

**CY 2022 Final Rule text:** Select one

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**Change #62**

**Location:** Page 11, Row 57

**Reason for Change:** Changed information in top bullet in column: ADD YOUR CONTENT HERE to improve clarity.

**CY 2021 Final Rule text:**

New measure never reviewed by MAP Workgroup or used in a CMS program

**CY 2022 Final Rule text:**

New measure never reviewed by Measure Applications Partnership (MAP) Workgroup or used in a CMS program

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**Change #63**

**Location:** Page 11, Row 58

**Reason for Change:** Merged rows 5 and 6 from the CY 2021 Final Rule text into one row to clarify skip pattern in CMS MERIT.

**CY 2021 Final Rule text:**

5	If currently used:		
6	Range of year(s) this measure has been used by CMS Program(s)	For example: Hospice Quality Reporting (2012-2018)	

**CY 2022 Final Rule text:**

Background Information	058	If currently used: Range of year(s) this measure has been used by CMS Program(s).	For example: Hospice Quality Reporting (2012-2018)
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**Change #64**

**Location:** Page 12, Row 59

**Reason for Change:** Changed information in column: Field Label to clarify skip pattern in CMS MERIT.

**CY 2021 Final Rule text:** What other federal programs are currently using this measure?

**CY 2022 Final Rule text:** If currently used: What other federal programs are currently using this measure?

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**Change #65**

**Location:** Page 12, Row 59

**Reason for Change:** Changed information in column: Guidance to make information applicable for future years without modification.

**CY 2021 Final Rule text:** Select all that apply. These should be current use programs only, not programs for the 2020 submittal.

**CY 2022 Final Rule text:** Select all that apply. These should be current use programs only, not programs for the upcoming year's submittal.

---

**Change #66**

**Location:** Page 12, Row 59 (**Due to large number of selections to this row, we list only the items changed**)

**Reason for Change:** Reworded information and added/deleted options to column: ADD YOUR CONTENT HERE to match current set of CMS programs using CMS MERIT.

**CY 2021 Final Rule text:**

- Comprehensive Primary Care Plus (CPC+)  Health Homes Core Set  Medicaid Adult Core Set  Medicaid and CHIP Child Core Set  Medicare and Medicaid Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals  Medicare Part C  Medicare Part D

**CY 2022 Final Rule text:**

- Medicare and Medicaid Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals (CAHs)  Part C and D Star Ratings [Medicare]  Other (enter here):



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**Change #67**

**Location:** Page 12, Row 60

**Reason for Change:** Changed information in column: Guidance to match updated response options.

**CY 2021 Final Rule text:**

Select all that apply.

If Claims, then enter relevant parts in the field below.

If EHR, then enter relevant parts in the field below.

If Registry, then enter which registry in the field below.

Use the “Comments” field at Row 69 to specify or elaborate on the type of data source, if needed to define your measure.

**CY 2022 Final Rule text:**

Select all that apply.

Use the next field to specify or elaborate on the type of data source, if needed to define your measure.

---

**Change #68**

**Location:** Page 12, Row 60

**Reason for Change:** Reworded information and added/deleted options to column: ADD YOUR CONTENT HERE to standardize data source categories.

**CY 2021 Final Rule text:**

Administrative clinical data  Facility discharge data  Chronic condition data warehouse (CCW)  Claims  CROWNWeb  EHR  Hybrid  IRF-PAI  LTCH CARE data set  National Healthcare Safety Network  OASIS-C1  Paper medical record  Prescription Drug Event Data Elements  PROMIS  Record review  Registry  Survey  State Vital Record  Other (enter here):

**CY 2022 Final Rule text:**

Administrative Data (non-claims)  Claims Data  Electronic Clinical Data (non-EHR)  Electronic Health Record  Paper Medical Records  Standardized Patient Assessments  Patient Reported Data and Survey  Registries  Hybrid  Other (enter here):

---

**Change #69**

**Location:** Page 13, Row 61

**Reason for Change:** Added new row to collection about the Other response option, including: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Data Sources	061	If applicable, specify the data source(s)	Use this field to specify or elaborate on the type of data source, if needed, to define your measure.
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**Change #70**

**Location:** Page 13, Row 62

**Reason for Change:** Changed information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** 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.

**CY 2022 Final Rule text:** Describe the parts or elements of the measure that are relevant to these data sources

---

**Change #71**

**Location:** Page 13, Row 63

**Reason for Change:** Changed information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** This differs from the data sources above. This is the anticipated data submission method. Select all that apply. Use the "Comments" field at Row 69 to specify or elaborate on the type of reporting data, if needed to define your measure.

**CY 2022 Final Rule text:** This is the anticipated data submission method. Select all that apply. Use the 'Comments' field to specify or elaborate on the type of reporting data, if needed to define your measure.

---

**Change #72**

**Location:** Page 13, Row 63

**Reason for Change:** Changed information for one of the selections in column: ADD YOUR CONTENT HERE to improve clarity.

**CY 2021 Final Rule text:** CQM (Registry)

**CY 2022 Final Rule text:** Clinical Quality Measure (CQM) Registry

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**Change #73**

**Location:** Page 13, Row 64

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Data Sources	064	*Feasibility of Data Elements	To what extent are the specified data elements available in electronically defined fields? Select all that apply. For a PRO-PM, select the data collection format(s).	<input type="checkbox"/> ALL data elements are in defined fields in administrative claims <input type="checkbox"/> ALL data elements are in defined fields in electronic health records (EHRs) <input type="checkbox"/> ALL data elements are in defined fields in electronic clinical data (e.g., clinical registry, nursing home minimum data set, or MDS, home health Outcome and Assessment Information Set, or OASIS) <input type="checkbox"/> ALL data elements are in defined fields in a combination of electronic sources <input type="checkbox"/> Some data elements are in defined fields in electronic sources <input type="checkbox"/> No data elements are in defined fields in electronic sources <input type="checkbox"/> Patient/family-reported information: electronic <input type="checkbox"/> Patient/family-reported information: paper
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**Change #74**

**Location:** Page 13

**Reason for Change:** Added section header “STEWARD” to increase navigability of the document.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:** STEWARD

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**Change #75**

**Location:** Page 13, Row 65

**Reason for Change:** Changed information in column: ADD YOUR CONTENT HERE to reflect updated response options.

**CY 2021 Final Rule text:** See Appendix A.63-65 for list choices. Copy/paste or enter your choices here:

**CY 2022 Final Rule text:** See Appendix A.065-067 for list choices. Copy/paste or enter your choices here:

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**Change #76**

**Location:** Page 14, Row 67

**Reason for Change:** Changed information in column: Guidance to generalize consensus based entity contractor.

**CY 2021 Final Rule text:** Entity or entities that will be the permanent measure steward(s), responsible for maintaining the measure and conducting NQF maintenance review. Select all that apply.

**CY 2022 Final Rule text:** Entity or entities that will be the permanent measure steward(s), responsible for maintaining the measure and conducting endorsement maintenance review. Select all that apply.

---

**Change #77**

**Location:** Page 14, Row 67

**Reason for Change:** Changed information in column: ADD YOUR CONTENT HERE to reflected updated response options.

**CY 2021 Final Rule text:** See Appendix A.63-65 for list choices. Copy/paste or enter your choices here:

**CY 2022 Final Rule text:** See Appendix A.065-067 for list choices. Copy/paste or enter your choices here:

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**Change #78**

**Location:** Page 14, Row 69

**Reason for Change:** Added new row which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE to capture information about the CMS MERIT submitter and the measure steward.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Submitter Information	069	Is primary submitter the same as steward?	Select "Yes" or "No."	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #79**

**Location:** Page 14, Row 70

**Reason for Change:** Changed information in column: Guidance to include instructions about adding submission rights in CMS MERIT.

**CY 2021 Final Rule text:** If different from Steward above: Last name, First name; Affiliation; Telephone number; Email address

**CY 2022 Final Rule text:** If different from Steward above: Last name, First name; Affiliation; Telephone number; Email address. NOTE: The primary and secondary submitters entered here do not automatically have read/write/change access to modify this measure in MERIT. To request such access for others, when logged into the MERIT interface, navigate to “About” and “Contact Us,” and indicate the name and e-mail address of the person(s) to be added.

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**Change #80**

**Location:** Page 15

**Reason for Change:** Added section header “CHARACTERISTICS” to increase document navigability.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:** CHARACTERISTICS

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**Change #81**

**Location:** Page 15, Row 72

**Reason for Change:** Adding selection choices to column: ADD YOUR CONTENT HERE to standardize response options.

**CY 2021 Final Rule text:**

Composite  Cost/Resource Use  Efficiency  Intermediate Outcome  Outcome  Patient Reported Outcome  Process  Structure  Other (enter here):

**CY 2022 Final Rule text:**

Access  Communication and Care Coordination  Composite  Cost/Resource Use  Cost/Resource Use  Efficiency  Intermediate Outcome  Not Specified  Outcome  Patient Engagement/Experience  Patient Perspective  Patient Reported Outcome  Process  Structure  Other (enter here):

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**Change #82**

**Location:** Page 15, Row 73

**Reason for Change:** Added new row which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE to create a discrete field to capture information about whether the measure is a composite.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

General Characteristics	073	*Is the measure a composite or component of a composite?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #83**

**Location:** Page 15, Row 74

**Reason for Change:** Added new row which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE to capture information about the measure in CMIT.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

General Characteristics	074	*Is this measure in the CMS Measures Inventory Tool (CMIT)?	Select Yes or No. Current measures can be found at <a href="https://cmit.cms.gov/CMIT_public/ListMeasures">https://cmit.cms.gov/CMIT_public/ListMeasures</a>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #84**

**Location:** Page 15, Row 75

**Reason for Change:** Added new row which included: Subsection, Row, Field Label, and Guidance to capture information about the measure in CMIT.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

General Characteristics	075	*If yes, enter the CMIT ID	If the measure is currently in CMIT, enter the 4-digit CMIT ID. Current measures and CMIT IDs can be found at <a href="https://cmit.cms.gov/CMIT_public/ListMeasures">https://cmit.cms.gov/CMIT_public/ListMeasures</a>
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**Change #85**

**Location:** Page 15, Row 76

**Reason for Change:** Changed information in the column: Field Label to improve clarity.

**CY 2021 Final Rule text:** Measure ID

**CY 2022 Final Rule text:** Alternate Measure ID

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**Change #86**

**Location:** Page 15, Row 76

**Reason for Change:** Changed information in the column: Guidance to improve clarity and remove reference to JIRA.

**CY 2021 Final Rule text:** Alphanumeric identifier (if applicable), such as a recognized program ID number for this measure (20 characters or less). Examples: 199 GPRO HF-5; ACO 28; CTM-3; PQI #08.

Fields for the NQF ID number and previous year(s) JIRA MUC ID number are provided in other data fields within this form.

**CY 2022 Final Rule text:** DO NOT enter consensus-based entity (endorsement) ID, CMIT ID, or previous year MUC ID in this field. This is an alphanumeric identifier (if applicable), such as a recognized program ID number for this measure (20 characters or less). Examples: 199 GPRO HF-5; ACO 28; CTM-3; PQI #08.

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**Change #87**

**Location:** Page 16, Row 77

**Reason for Change:** Changed information in column: Field Label to improve clarity.

**CY 2021 Final Rule text:** Which clinical guideline(s)?

**CY 2022 Final Rule text:** Outline the clinical guideline(s) supporting this measure. Also see note at Rows 082 and 083 below.

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**Change #88**

**Location:** Page 16, Row 77

**Reason for Change:** Changed information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** The measure should improve compliance with standard clinical guidelines. Provide a detailed description of which guideline supports the measure and how the

measure will enhance compliance with the clinical guidelines. Indicate whether the guideline is evidence-based or consensus-based.

**CY 2022 Final Rule text:** Provide a detailed description of which guideline supports the measure and how the measure will enhance compliance with the clinical guidelines. Indicate whether the guideline is evidence-based or consensus-based.

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### **Change #89**

**Location:** Page 16, Row 79

**Reason for Change:** Changed information in column: Field Label to accommodate a response of multiple specialties.

**CY 2021 Final Rule text:** \*What one area of specialty is the measure aimed to, or which specialty is most likely to report this measure?

**CY 2022 Final Rule text:** \*Select ALL areas of specialty the measure is aimed to, or which specialties are most likely to report this measure

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### **Change #90**

**Location:** Page 16, Row 79

**Reason for Change:** Changed information in column: Guidance to accommodate a response of multiple specialties.

**CY 2021 Final Rule text:** Select the one most applicable area of specialty.

**CY 2022 Final Rule text:** Select all areas of specialty that apply.

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### **Change #91**

**Location:** Page 16, Row 79

**Reason for Change:** Changed information in column: ADD YOUR CONTENT HERE to updated list choice reference and accommodate multiple specialties.

**CY 2021 Final Rule text:** See Appendix A.23 for list choices. Copy/paste or enter your choice here:

**CY 2022 Final Rule text:** See Appendix A.079 for list choices. Copy/paste or enter your choice(s) here:



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## Change #92

**Location:** Page 16, Row 80

**Reason for Change:** Changed information in column: Guidance to improve clarity and reflect CMS MERIT capability to add attachments.

**CY 2021 Final Rule text:** Evidence of a performance gap among the units of analysis in which the measure will be implemented. Provide analytic evidence that the units of analysis have room for improvement and, therefore, that the implementation of the measure would be meaningful. The distribution of performance should be wide. Measures must not address “topped-out” opportunities. Please provide current rate of performance and standard deviation from that rate to demonstrate variability. If available, please provide information on the testing data set. If available, include percent average performance rate, minimum, and maximum. Include validity and reliability values in a standard format, and the population size used in determining these values. If you have lengthy text to insert, place the text at the bottom of this form, clearly indicating row number 51.

**CY 2022 Final Rule text:** Evidence of a performance gap among the units of analysis in which the measure will be implemented. Provide analytic evidence that the units of analysis have room for improvement and, therefore, that the implementation of the measure would be meaningful.

If you have lengthy text add the evidence as an attachment, named to clearly indicate the related form field.

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## Change #93

**Location:** Page 16, Row 81

**Reason for Change:** Changed information in column: Guidance to generalize consensus based entity contractor.

**CY 2021 Final Rule text:** Summary of potential unintended consequences if the measure is implemented. Information can be taken from NQF CDP manuscripts or documents. If referencing NQF documents, you must submit the document or a link to the document, and the page being referenced.

**CY 2022 Final Rule text:** Summary of potential unintended consequences if the measure is implemented. Information can be taken from the CMS consensus-based entity Consensus Development Process (CDP) manuscripts or documents. If referencing CDP documents, you must submit the document or a link to the document, and the page being referenced.

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**Change #94**

**Location:** Page 17, Row 82

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Evidence	082	*Type of evidence to support the measure	Select all that apply	<input type="checkbox"/> Clinical Guidelines <input type="checkbox"/> USPSTF (U.S. Preventive Services Task Force) Guidelines <input type="checkbox"/> Systematic Review <input type="checkbox"/> Empirical data <input type="checkbox"/> Other (enter here):
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**Change #95**

**Location:** Page 17, Row 83

**Reason for Change:** Added new row which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE to clarify skip pattern in CMS MERIT.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Evidence	083	<i>If you select Clinical Guidelines and/or USPSTF Guidelines in Row 082 above, then Row 077 (Outline the Clinical Guidelines) becomes a required field.</i>	n/a	This is not a data entry field.
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**Change #96**

**Location:** Page 17, Row 84

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Evidence	084	*Were the guidelines graded?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #97**

**Location:** Page 17, Row 85

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Evidence	085	*If yes, who graded the guidelines?	Specify the agency or organization(s) that graded the guidelines.
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**Change #98**

**Location:** Page 17, Row 86

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, and Guidance

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Evidence	086	*If yes, what was the grade?	Specify the grade that was assigned to the guidelines.
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**Change #99**

**Location:** Page 17, Row 87

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Risk Adjustment	087	*Is the measure risk adjusted, stratified, or both?	Select as many as apply.	<input type="checkbox"/> Risk adjusted <input type="checkbox"/> Stratified <input type="checkbox"/> None
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**Change #100**

**Location:** Page 17, Row 88

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Risk Adjustment	088	*Are social determinants of health built into the risk adjustment model?	Select one. If it was determined that risk adjustment for social determinants of health was not appropriate for the risk model used, select "not applicable." If risk adjustments for social determinants of health were appropriate but are not currently built in, select "no."	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
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**Change #101**

**Location:** Page 18, Row 89

**Reason for Change:** Changed information in column: Field Label to reflect updates to the Meaningful Measures Framework.

**CY 2021 Final Rule text:** \*What one primary healthcare priority applies to this measure?

**CY 2022 Final Rule text:** \*What one healthcare domain applies to this measure?

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**Change #102**

**Location:** Page 18, Row 89

**Reason for Change:** Changed information in column: Guidance to reflect updates to the Meaningful Measures Framework.

**CY 2021 Final Rule text:** Healthcare priorities (also known as domains). Select the best one.

**CY 2022 Final Rule text:** Select the ONE most applicable healthcare domain. For more information, see: <https://www.cms.gov/meaningful-measures-20-moving-measure-reduction-modernization>

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### Change #103

**Location:** Page 18, Row 89

**Reason for Change:** Changed information in column: ADD YOUR CONTENT HERE to reflect updates to the Meaningful Measures Framework.

**CY 2021 Final Rule text:**  Make care safer by reducing harm caused in the delivery of care  Strengthen person and family engagement as partners in their care  Promote effective communication and coordination of care  Promote effective prevention and treatment of chronic disease  Work with communities to promote best practices of healthy living  Make care affordable

**CY 2022 Final Rule text:**  Person-Centered Care  Equity  Safety  Affordability and Efficiency  Chronic Conditions  Wellness and Prevention  Seamless Care Coordination  Behavioral Health

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### Change #104

**Location:** Page 18, Row 90

**Reason for Change:** Changed information in column: Field Label to generalize the consensus based entity contractor.

**CY 2021 Final Rule text:** \*What is the NQF status of the measure?

**CY 2022 Final Rule text:** \*What is the endorsement status of the measure?

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### Change #105

**Location:** Page 18, Row 90

**Reason for Change:** Changed information in column: Guidance to generalize the consensus based entity contractor.

**CY 2021 Final Rule text:** Select only one. Refer to <http://www.qualityforum.org/QPS/> for information on NQF endorsement, measure ID, and other information.

**CY 2022 Final Rule text:** Select only one. For information on consensus-based entity (CMS contractor) endorsement, measure ID, and other information, refer to: <http://www.qualityforum.org/QPS/>

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**Change #106**

**Location:** Page 18, Row 91

**Reason for Change:** Changed information in column: Field Label to generalize the consensus based entity contractor.

**CY 2021 Final Rule text:** NQF ID

**CY 2022 Final Rule text:** \*CBE ID (CMS consensus-based entity, or endorsement ID)

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**Change #107**

**Location:** Page 18, Row 90

**Reason for Change:** Changed information in column: Guidance to reflect CMS MERIT data field and generalize consensus based entity contractor.

**CY 2021 Final Rule text:** Four- or five-digit identifier with leading zeros and following letter if needed. If no NQF ID number is known, enter numerals 0000. Place zeros ahead of ID if necessary (e.g., 0064). Add a letter after the ID if necessary (e.g., 0064e).

**CY 2022 Final Rule text:** Four- or five-character identifier with leading zeros and following letter if needed. Add a letter after the ID (e.g., 0064e) and place zeros ahead of ID if necessary (e.g., 0064). If no CBE ID number is known, enter numerals 9999.

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**Change #108**

**Location:** Page 18, Row 92

**Reason for Change:** Merged rows 32 and 33 of MUC 2020 data template into one row. Also changed the information in columns: Field Label and Guidance to reflect skip pattern in CMS MERIT.

**CY 2021 Final Rule text:**

32	If endorsed:		
33	Is the measure being submitted <b>exactly</b> as endorsed by NQF?	Select Yes or No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**CY 2022 Final Rule text:**

Endorsement Characteristics	092	If endorsed: Is the measure being submitted <b>exactly</b> as endorsed by the CMS CBE?	Select 'Yes' or 'No'. Note that 'Yes' should only be selected if the submission is an EXACT match to the CBE-endorsed measure.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #109**

**Location:** Page 19, Row 95

**Reason for Change:** Changed information in column: Field Label to generalize consensus based entity contractor.

**CY 2021 Final Rule text:** Year of most recent NQF Consensus Development Process (CDP) endorsement

**CY 2022 Final Rule text:** If endorsed: Year of most recent CDP endorsement

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**Change #110**

**Location:** Page 19, Row 95

**Reason for Change:** Removed numerous selections in column: ADD YOUR CONTENT HERE to restrict to more recent timeframe.

**CY 2021 Final Rule text:**  None  1999  2000  2001  2002  2003  2004  2005  2006  2007  2008  2009  2010  2011  2012  2013  2014  2015  2016  2017  2018  2019  2020

**CY 2022 Final Rule text:**  None  2017  2018  2019  2020  2021

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**Change #111**

**Location:** Page 19, Row 96

**Reason for Change:** Changed information in column: Field Label

**CY 2021 Final Rule text:** Year of next anticipated NQF CDP endorsement review to generalize consensus based entity contractor.

**CY 2022 Final Rule text:** Year of next anticipated CDP endorsement review

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**Change #112**

**Location:** Page 19, Row 96

**Reason for Change:** Updated the selections in column: ADD YOUR CONTENT HERE for current year.

**CY 2021 Final Rule text:**  None  2020  2021  2022  2023  2024

**CY 2022 Final Rule text:**  None  2021  2022  2023  2024  2025

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**Change #113**

**Location:** Page 19

**Reason for Change:** Added section header “GROUPS” to improve document navigability.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:** GROUPS

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**Change #114**

**Location:** Page 19, Row 97

**Reason for Change:** Changed information in column: Field Label to improve clarity.

**CY 2021 Final Rule text:** \*Is this measure an eCQM?

**CY 2022 Final Rule text:** \*Is this measure an electronic clinical quality measure (eCQM)?

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**Change #115**

**Location:** Page 19, Row 97

**Reason for Change:** Changed information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** Is this an electronic clinical quality measure (eCQM)? Select Yes or No. If your answer is yes, the Measure Authoring Tool (MAT) ID number must be provided below.

**CY 2022 Final Rule text:** Select 'Yes' or 'No'. If your answer is yes, the Measure Authoring Tool (MAT) ID number must be provided below. For more information on eCQMs, see: <https://www.emeasuretool.cms.gov/>



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**Change #116**

**Location:** Page 19, Row 98

**Reason for Change:** Changed information in column: Field Label to improve clarity.

**CY 2021 Final Rule text:** \*If eCQM, enter Measure Authoring Tool (MAT) number

**CY 2022 Final Rule text:** \*If eCQM: Measure Authoring Tool (MAT) Number

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**Change #117**

**Location:** Page 19, Row 98

**Reason for Change:** Changed information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** You must attach Bonnie test cases for this measure, with 100% logic coverage (test cases should be appended), attestation that value sets are published in Value Set Authority Center, and NQF feasibility scorecard. If not an eCQM, or if MAT number is not available, enter 0.

**CY 2022 Final Rule text:** You must attach Bonnie test cases for this measure, with 100% logic coverage (test cases should be appended), attestation that value sets are published in Value Set Authority Center (VSAC), and feasibility scorecard. If not an eCQM, or if MAT number is not available, enter 0.

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**Change #118**

**Location:** Page 19, Row 99

**Reason for Change:** Changed information in column: Field Label to improve clarity.

**CY 2021 Final Rule text:** \*If eCQM, does the measure have a Health Quality Measures Format (HQMF) specification in alignment with the latest HQMF standards?

**CY 2022 Final Rule text:** \* If eCQM, does the measure have a Health Quality Measures Format (HQMF) specification in alignment with the latest HQMF and eCQM standards, and does the measure align with Clinical Quality Language (CQL) and Quality Data Model (QDM)?

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**Change #119**

**Location:** Page 19, Row 99

**Reason for Change:** Changed information in column: Guidance to improve clarity.

**CY 2021 Final Rule text:** Select Yes or No. If not eCQM, enter No

**CY 2022 Final Rule text:** Select 'Yes' or 'No'. For additional information on HQMF standards, see: <https://ecqi.healthit.gov/tool/hqmf>

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**Change #120**

**Location:** Page 20, Row 100

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	100	* If this measure is an eCQM, does any electronic health record (EHR) system tested need to be modified?	Select one	<input type="checkbox"/> Yes <input type="checkbox"/> No
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**Change #121**

**Location:** Page 20, Row 101

**Reason for Change:** Added new row to support collection of additional information, which included: Subsection, Row, Field Label, Guidance and ADD YOUR CONTENT HERE

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:**

Burden	101	*If yes, how would you describe the degree of effort?	Select one	<input type="checkbox"/> 1 (little to no effort) <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 (substantial effort)
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**Change #122**

**Location:** Page 21

**Reason for Change:** Added section header "PROGRAMS" to improve document navigability.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:** PROGRAMS

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**Change #123**

**Location:** Page 21, Row 102

**Reason for Change:** Changed information in column: Field Label to improve clarity.

**CY 2021 Final Rule text:** CMS Program(s)

**CY 2022 Final Rule text:** Select the CMS Program(s) for which the measure is being submitted

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### **Change #124**

**Location:** Page 21, Row 102

**Reason for Change:** Changed information in column: Guidance to reflect the capability to add attachments to CMS MERIT.

#### **CY 2021 Final Rule text:**

Select the CMS program(s) for which the measure is being submitted. Select all that apply.

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 MIPS-Cost only for measures that pertain to cost. Do not enter both MIPS-Quality and MIPS-Cost for the same measure.

If you enter MIPS (either Quality or Cost), please navigate to the Additional Resources list at this web site: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Pre-Rule-Making.html>, download the “MIPS Peer Review Template and a Completed Sample,” and send the completed form with your template by email to [Prerulemaking@Battelle.org](mailto:Prerulemaking@Battelle.org).

#### **CY 2022 Final Rule text:**

Select all that apply.

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 MIPS-Cost only for measures that pertain to cost. Do not enter both MIPS-Quality and MIPS-Cost for the same measure.

Because you selected MIPS, you are required to download the MIPS Peer Reviewed Journal Article Template and attach the completed form to your submission using the “Attachments” page

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### **Change #125**

**Location:** Page 21, Row 102

**Reason for Change:** Added programs abbreviations to the selections in column: ADD YOUR CONTENT HERE to improve clarity.

**CY 2021 Final Rule text:**  End-Stage Renal Disease Quality Incentive Program  Long-Term Care Hospital Quality Reporting Program  Part C and D Star Ratings

**CY 2022 Final Rule text:**  End-Stage Renal Disease (ESRD) Quality Incentive Program  Long-Term Care (LTC) Hospital Quality Reporting Program  Part C and D Star Ratings [Medicare]

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**Change #126**

**Location:** Page 1

**Reason for Change:** Added Section header “SIMILAR MEASURES” to improve document navigability.

**CY 2021 Final Rule text:** n/a

**CY 2022 Final Rule text:** SIMILAR MEASURES

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**Change #127**

**Location:** Page 22, 105

**Reason for Change:** Merged rows 17 and 18 of 2020 MUC Data Template into one row. Also changed information in column: Field Label to reflect skip patterns in CMS MERIT.

**CY 2021 Final Rule text:**

17	If Yes:	
18	Which measure(s) already in a program is your measure similar to and/or competing with?	Identify the other measure(s) including title and any other unique identifier

**CY 2022 Final Rule text:**

Similar In-Use Measures	105	If Yes: Which measure(s) already in a program is your measure similar to and/or competing with?	Identify the other measure(s) including title and any other unique identifier.
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**Change #128**

**Location:** Page 22, Row 106

**Reason for Change:** Changed the information in column: Field Label to reflect CMS MERIT skip pattern.

**CY 2021 Final Rule text:** How will this measure add value to the CMS program?

**CY 2022 Final Rule text:** If Yes: How will this measure add value to the CMS program?

---

### **Change #129**

**Location:** Page 22, Row 107

**Reason for Change:** Changed the information in column: Field Label to reflect CMS MERIT skip pattern.

**CY 2021 Final Rule text:** How will this measure be distinguished from other similar and/or competing measures?

**CY 2022 Final Rule text:** If Yes: How will this measure be distinguished from other similar and/or competing measures?

---

### **Change #130**

**Location:** Page 22, Row 108

**Reason for Change:** Changed the information in column: Guidance to reflect current CMS MERIT skip pattern.

**CY 2021 Final Rule text:** Select Yes or No. If yes, you are submitting an existing measure for expansion into additional CMS programs or the measure has substantially changed since originally published, then answer the following questions: 54 through 59 and 61. If no, then skip these subset questions.

**CY 2022 Final Rule text:** Select 'Yes' or 'No'. If yes, you are submitting an existing measure for expansion into additional CMS programs, or the measure has substantially changed since originally published.

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### **Change #131**

**Location:** Page 22, Row 109

**Reason for Change:** Changed the information in column: Guidance to allow for multiple prior annual MUC List submissions in CMS MERIT.

**CY 2021 Final Rule text:** Select all that apply.

**CY 2022 Final Rule text:** Select all that apply. NOTE: If your measure was published on more than one prior annual MUC List, as you use the MERIT interface, click "Add Another Measure" and complete the information section for each of those years.

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### **Change #132**

**Location:** Page 22, Row 109

**Reason for Change:** Changed the information in column: ADD YOUR CONTENT HERE to reflect current year.

**CY 2021 Final Rule text:**  None  2011  2012  2013  2014  2015  2016  2017  
 2018  2019  Other (enter here):

**CY 2022 Final Rule text:**  None  2011  2012  2013  2014  2015  2016  2017  
 2018  2019  2020  Other (enter here):

---

### **Change #133**

**Location:** Page 23, Row 111

**Reason for Change:** Changed the information in column: Field Label to generalize consensus based entity contractor.

**CY 2021 Final Rule text:** List the NQF MAP workgroup(s) in each year

**CY 2022 Final Rule text:** List the CMS CBE MAP workgroup(s) in each year

---

### **Change #134**

**Location:** Page 23, Row 112

**Reason for Change:** Changed the information in column: Field Label to generalize consensus based entity contractor.

**CY 2021 Final Rule text:** What were the programs that NQF MAP reviewed the measure for in each year?

**CY 2022 Final Rule text:** What were the programs that MAP reviewed the measure for in each year?

---

### **Change #135**

**Location:** Page 23, Row 113

**Reason for Change:** Changed the information in column: Field Label to generalize consensus based entity contractor.

**CY 2021 Final Rule text:** What was the NQF MAP recommendation in each year?

**CY 2022 Final Rule text:** What was the MAP recommendation in each year?

---

### **Change #136**

**Location:** Page 23, Row 115

**Reason for Change:** Changed the information in column: Field Label to generalize consensus based entity contractor

**CY 2021 Final Rule text:** NQF MAP report page number being referenced for each year

**CY 2022 Final Rule text:** MAP report page number being referenced for each year

---

### **Change #137**

**Location:** Page 24

**Reason for Change:** Added section header “ATTACHMENTS” to improve document navigability and reflect the capability to add attachments in CMS MERIT.

**CY 2021 Final Rule text:** N/a

**CY 2022 Final Rule text:** ATTACHMENTS

---

### **Change #138**

**Location:** Page 24, Row 117

**Reason for Change:** Changed the information in column: Guidance to generalize the consensus based entity contractor and reflect the capability to add attachments in CMS MERIT.

**CY 2021 Final Rule text:**

You are encouraged to attach the measure information form (MIF) if available. This is a detailed description of the measure used by NQF during endorsement proceedings. If a MIF is not available, comprehensive measure methodology documents are encouraged.

If you enter MIPS, please navigate to the Additional Resources list at this web site: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Pre-Rule-Making.html>, download the “MIPS Peer Review Template and a Completed Sample,” and send the completed form with your measure submission by email to [Prerulemaking@Battelle.org](mailto:Prerulemaking@Battelle.org)

If eCQM, you must attach Bonnie test cases for this measure, with 100% logic coverage (test cases should be appended), attestation that value sets are published in Value Set Authority Center, and NQF feasibility scorecard.

**CY 2022 Final Rule text:**

You are encouraged to attach the measure information form (MIF) if available. This is a detailed description of the measure used by the CMS consensus-based entity (CBE) during endorsement proceedings. If a MIF is not available, comprehensive measure methodology documents are encouraged.

If you are submitting for MIPS (either Quality or Cost), you are required to download the MIPS Peer Reviewed Journal Article Template and attach the completed form to your submission using the “Attachments” feature. See <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Pre-Rulemaking>

If eCQM, you must attach MAT Output/HQMF, Bonnie test cases for this measure, with 100% logic coverage (test cases should be appended), attestation that value sets are published in VSAC, and feasibility scorecard.

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**Change #139**

**Location:** Page 24, Row 117

**Reason for Change:** Deleted information found in column: ADD YOUR CONTENT HERE from the CY 2021 Final Rule text because filenames are recorded by default in CMS MERIT.

**CY 2021 Final Rule text:** Please enter all attachment filename(s) here for completeness and cross-check purposes:

**CY 2022 Final Rule text:** [Deleted]

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**Change #140**

**Location:** Page 24, Row 118

**Reason for Change:** Changed the information in column: Field Label to improve clarity.

**CY 2021 Final Rule text:** MIPS Journal Article Requirement

**CY 2022 Final Rule text:** MIPS Peer Reviewed Journal Article Template

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**Change #141**

**Location:** Page 24, Row 118

**Reason for Change:** Changed the information in column: Guidance to reflect the capability to add attachments in CMS MERIT.

**CY 2021 Final Rule text:** Select Yes or No. For those submitting measures to MIPS program, enter "Yes." Send your completed Peer Reviewed Journal Article Requirement form with your measure submission by email to Prerulemaking@Battelle.org.

**CY 2022 Final Rule text:** Select Yes or No. For those submitting measures to MIPS program, enter "Yes." Attach your completed Peer Reviewed Journal Article Template.

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**Change #142**

**Location:** Page 24, Row 119

**Reason for Change:** Changed the information in column: Field Label for clarity.

**CY 2021 Final Rule text:** Comments

**CY 2022 Final Rule text:** Submitter Comments



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**Change #143**

**Location:** Page 24, Row 119

**Reason for Change:** Changed the information in column: Guidance to remove unnecessary instruction.

**CY 2021 Final Rule text:** Any notes, qualifiers, external references, or other information not specified above. For OTHER entries: please indicate the type of additional data you are providing, such as Measure Type, Setting, Level of Analysis, or Measure Steward.

**CY 2022 Final Rule text:** Any notes, qualifiers, external references, or other information not specified above.

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**Change #144**

**Location:** Page 24

**Reason for Change:** Updated contact information.

**CY 2021 Final Rule text:** Send any questions or your completed form and any accompanying files to [prulemaking@battelle.org](mailto:prulemaking@battelle.org)

**CY 2022 Final Rule text:** Send any questions to [MMSsupport@battelle.org](mailto:MMSsupport@battelle.org)

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**Change #145**

**Location:** Page 25

**Reason for Change:** Updated the title of the Appendix.

**CY 2021 Final Rule text:** Appendix: Lengthy Drop-Down List Choices

**CY 2022 Final Rule text:** Appendix: Lengthy Lists of Choices

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**Change #146**

**Location:** Page 25

**Reason for Change:** Updated the list of choices for Measure Stewards and Long-Term Measure Stewards.

**CY 2021 Final Rule text:** A.63-65 - Choices for Measure Steward (63) and Long-Term Measure Steward (if different) (65)

**CY 2022 Final Rule text:** A.065-067- Choices for Measure Steward (065) and Long-Term Measure Steward (if different) (067)

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**Change #147**

**Location:** Page 26

**Reason for Change:** Updated the list if Choices for Areas of Specialty

**CY 2021 Final Rule text:** A.23 - Choices for What area of specialty best fits the measure?

**CY 2022 Final Rule text:** A.079 - Choices for Areas of specialty (079)

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**Change #148**

**Location:** Page 26

**Reason for Change:** Updated contact information.

**CY 2021 Final Rule text:** Send any questions or your completed form and any accompanying files to [prulemaking@battelle.org](mailto:prulemaking@battelle.org)

**CY 2022 Final Rule text:** Send any questions to [MMSsupport@battelle.org](mailto:MMSsupport@battelle.org)

**The remaining items were removed from the 2020 MUC Data Template and are not included in the 2021 MUC Data Template**

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**Change #149**

**Location:** Page 5, Row 13 of 2020 MUC Data Template

**Reason for Change:** Separated exclusions and exceptions into discrete data elements.

**CY 2021 Final Rule text:**

13	*Exclusions/Exceptions	If applicable, specify Numerator Exclusion, Denominator Exclusion, or Denominator Exception.
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**CY 2022 Final Rule text:** [Deleted]

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**Change #150**

**Location:** Page 1 of 2020 MUC Data Template

**Reason for Change:** This information automatically captured in CMS MERIT.

**CY 2021 Final Rule text:**

Row	Field Label	Guidance	ADD YOUR CONTENT HERE
1	*Date MM/DD/Y YYY	Enter the current date of submission or revision	
2	*Issue Type	Select Measure Submission to nominate a measure for the CY 2021 Final Rule text list. Select Modify Candidate Measure to change a measure already submitted for 2020. Select only one.	<input type="checkbox"/> Measure Submission <input type="checkbox"/> Modify Candidate Measure

**CY 2022 Final Rule text:** [Deleted]

**Change #151**

**Location:** Page 7, Row 25 of 2020 MUC Data Template

**Reason for Change:** To reflect updates to Meaningful Measures Framework.

**CY 2021 Final Rule text:**

25	*What one primary meaningful measure area applies to this measure?	Select the best one. The meaningful measure area choices depend on your selection of primary healthcare priority above.	<p>If #24 is Make care safer..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Healthcare-associated infections</li> <li><input type="checkbox"/> Preventable healthcare harm</li> </ul> <p>If #24 is Strengthen person..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Care is personalized and aligned with patient's goals</li> <li><input type="checkbox"/> End of life care according to preferences</li> <li><input type="checkbox"/> Patient's experience of care</li> <li><input type="checkbox"/> Functional outcomes</li> </ul> <p>If #24 is Promote effective communication..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Medication management</li> <li><input type="checkbox"/> Admissions and readmissions to hospitals</li> <li><input type="checkbox"/> Transfer of health information and interoperability</li> </ul> <p>If #24 is Promote effective prevention..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Preventive care</li> <li><input type="checkbox"/> Management of chronic conditions</li> <li><input type="checkbox"/> Prevention, treatment, and management of mental health</li> <li><input type="checkbox"/> Prevention and treatment of opioid and substance use disorders</li> <li><input type="checkbox"/> Risk adjusted mortality</li> </ul> <p>If #24 is Work with communities..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Equity of care</li> <li><input type="checkbox"/> Community engagement</li> </ul> <p>If #24 is Make care affordable, then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Appropriate use of healthcare</li> <li><input type="checkbox"/> Patient-focused episode of care</li> <li><input type="checkbox"/> Risk adjusted total cost of care</li> </ul>
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**CY 2022 Final Rule text:** [Deleted]

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**Change #152**

**Location:** Page 7, Row 26 of 2020 MUC Data Template

**Reason for Change:** To reflect updates to Meaningful Measures Framework.

**CY 2021 Final Rule text:**

26	What secondary healthcare priority applies to this measure?	Healthcare priorities (also known as domains). Select one alternate or secondary priority only if applicable.	<input type="checkbox"/> Make care safer by reducing harm caused in the delivery of care <input type="checkbox"/> Strengthen person and family engagement as partners in their care <input type="checkbox"/> Promote effective communication and coordination of care <input type="checkbox"/> Promote effective prevention and treatment of chronic disease <input type="checkbox"/> Work with communities to promote best practices of healthy living <input type="checkbox"/> Make care affordable
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**CY 2022 Final Rule text:** [Deleted]

**Change #153**

**Location:** Page 8, Row 27 of 2020 MUC Data Template

**Reason for Change:** To reflect updates to Meaningful Measures Framework.

**CY 2021 Final Rule text:**

27	What secondary meaningful measure area applies to this measure?	Select one alternate or secondary area only if applicable. The meaningful measure area choices depend on your selection of secondary healthcare priority above.	<p>If #26 is Make care safer..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Healthcare-associated infections</li> <li><input type="checkbox"/> Preventable healthcare harm</li> </ul> <p>If #26 is Strengthen person..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Care is personalized and aligned with patient's goals</li> <li><input type="checkbox"/> End of life care according to preferences</li> <li><input type="checkbox"/> Patient's experience of care</li> <li><input type="checkbox"/> Functional outcomes</li> </ul> <p>If #26 is Promote effective communication..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Medication management</li> <li><input type="checkbox"/> Admissions and readmissions to hospitals</li> <li><input type="checkbox"/> Transfer of health information and interoperability</li> </ul> <p>If #26 is Promote effective prevention..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Preventive care</li> <li><input type="checkbox"/> Management of chronic conditions</li> <li><input type="checkbox"/> Prevention, treatment, and management of mental health</li> <li><input type="checkbox"/> Prevention and treatment of opioid and substance use disorders</li> <li><input type="checkbox"/> Risk adjusted mortality</li> </ul> <p>If #26 is Work with communities..., then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Equity of care</li> <li><input type="checkbox"/> Community engagement</li> </ul> <p>If #26 is Make care affordable, then choices are:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Appropriate use of healthcare</li> <li><input type="checkbox"/> Patient-focused episode of care</li> <li><input type="checkbox"/> Risk adjusted total cost of care</li> </ul>
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**CY 2022 Final Rule text:** [Deleted]

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**Change #154**

**Location:** Page 13, Row 44 of 2020 MUC Data Template

**Reason for Change:** Information no longer being captured.

**CY 2021 Final Rule text:**

44	Specify the registry(ies)	Identify the registry using the submitted measure. Select all that apply.	<b>See Appendix A.44 for list choices. Copy/paste or enter your choices here:</b>
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**CY 2022 Final Rule text:** [Deleted]

**Change #155**

**Location:** Page 16, Row 60 of 2020 MUC Data Template

**Reason for Change:** References no longer needed.

**CY 2021 Final Rule text:**

60	NQF MAP report link for each year	See reference link information at right.	<p>For your reference in completing this section, follow the links below or copy/paste the links into your browser to view each year's MAP pre-rulemaking report (2012 to 2019). <b>This is not a data entry field.</b></p> <p>2016-19: <a href="http://www.qualityforum.org/map/">http://www.qualityforum.org/map/</a></p> <p>2015: <a href="http://www.qualityforum.org/WorkArea/linkit.aspx?LinkIdentifier=id&amp;ItemID=78711">http://www.qualityforum.org/WorkArea/linkit.aspx?LinkIdentifier=id&amp;ItemID=78711</a></p> <p>2014: <a href="http://www.qualityforum.org/Publications/2014/01/MAP_Pre-Rulemaking_Report_2014_Recommendations_on_Measures_for_More_than_20_Federal_Programs.aspx">http://www.qualityforum.org/Publications/2014/01/MAP_Pre-Rulemaking_Report_2014_Recommendations_on_Measures_for_More_than_20_Federal_Programs.aspx</a></p> <p>2013: <a href="http://www.qualityforum.org/Publications/2013/02/MAP_Pre-Rulemaking_Report_-_February_2013.aspx">http://www.qualityforum.org/Publications/2013/02/MAP_Pre-Rulemaking_Report_-_February_2013.aspx</a></p> <p>2012: <a href="http://www.qualityforum.org/Publications/2012/02/MAP_Pre-Rulemaking_Report_Input_on_Measures_Under_Consideration_by_HHS_for_2012_Rulemaking.aspx">http://www.qualityforum.org/Publications/2012/02/MAP_Pre-Rulemaking_Report_Input_on_Measures_Under_Consideration_by_HHS_for_2012_Rulemaking.aspx</a></p> <p>All major NQF reports going back to 2008 should be locatable here: <a href="http://www.qualityforum.org/Publications.aspx">http://www.qualityforum.org/Publications.aspx</a></p>
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**CY 2022 Final Rule text:** [Deleted]



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**Change #156**

**Location:** Page 19-20 of 2020 MUC Data Template

**Reason for Change:** This information is no longer being collected.

**CY 2021 Final Rule text:** A.44 - Choices for Specify the registry(ies)

**CY 2022 Final Rule text:** [Deleted]

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**Change #157**

**Location:** Page 22 of 2020 MUC Data Template

**Reason for Change:** No longer needed due to text box limits in CMS MERIT interface.

**CY 2021 Final Rule text:**

Space for Placing Lengthy Text (If Applicable)

If you have lengthy text to insert, place it below here, clearly indicating for each answer the intended row number and/or field label from the template above.

**CY 2022 Final Rule text:** [Deleted]

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**Change #158**

**Location:** Page 23 of 2020 MUC Data Template

**Reason for Change:** Information not needed in CMS MERIT.

**CY 2021 Final Rule text:**

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1314 (Expiration date: XX/XX/XXXX). The time required to complete this information collection is estimated to average 1.5 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. \*\*\*\*CMS Disclosure\*\*\*\* Please do not send applications, claims, payments, medical records, or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact QPP at [qpp@cms.hhs.gov](mailto:qpp@cms.hhs.gov).

**CY 2022 Final Rule text:** [Deleted]