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.

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

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.

- 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 prerulemaking@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 prerulemaking@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.

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

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

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]

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"

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

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

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: https://www.cms.gov/Medicare/Quality-Initiatives-
			Patient-Assessment- Instruments/MMS/Downloads/Blueprint.pdf. If not applicable, enter 'N/A.'

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	006	*Denominator	For additional information on exclusions/exceptions, see:	
Information		Exclusions	https://www.cms.gov/Medicare/Quality-Initiatives-Patient-	
			Assessment-Instruments/MMS/Downloads/Blueprint.pdf.	
			If not applicable, enter 'N/A.'	

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

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

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.

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.

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

Burden	010	*Burden for Patient: Does the measure require survey	Select	☐ Yes
		data from the patient?	one	□ No

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	Enter time in minutes. If
		complete the survey?	unknown, enter 0.

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	Enter the number of requests per
		requests for survey data per year?	patient per year.

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

Burden	013	*If yes, are the survey data to be collected during or outside of a visit?	 ☐ Prior to visit☐ During visit
			☐ After visit

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	Select one	□ Yes
		analysis conducted?		□ No

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	Enter the number of sites that were
		evaluated in the provider	evaluated in the provider workflow
		workflow analysis?	analysis.
L			

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

Burden 01	16	*Did the provider workflow have to be modified to	Select one	☐ Yes
		accommodate the new measure?		□ No

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	☐ 1 (little to no effort) ☐ 2 ☐ 3 ☐ 4
				☐ 5 (substantial effort)

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	☐ Yes
				□ No

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

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

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 measure?	would be abstracted per eligible case and include that in the total number of data elements.

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

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.

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	

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

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	025	, , , , , , , , , , , , , , , , , , ,	Select all that apply	☐ Measure Score Reliability
Testing		Reliability Testing		☐ Data Element Reliability

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	all that	□ Signal to Noise □ Random Split Half Correlation □ IRR (Inter-rater reliability) □ ICC (Intraclass correlation coefficient) □ Test-Retest □ Internal Consistency □ 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

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

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	028	*Reliability	For the reliability testing provided, indicate the statistical
Testing		testing	result(s) of the testing analysis. If data element reliability was
		statistical	conducted, provide the scores for the critical data elements
		result	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.

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	 For the reliability testing provided, briefly describe the interpretation of
		results.

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

Reliabilit	030	Reliability Testing: Was a minimum number	Select one	☐ Yes
y Testing		of denominator cases per measured entity		□ No
		established to achieve sufficient measure		
		score reliability?		

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

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	☐ Measure Score Validity
				☐ Data Element Validity

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

Validity Testing	033	*Validity Testing: Type of Validity Testing Analysis	Select all that apply	 □ Correlation □ Face Validity □ Construct Validity □ Gold Standard Comparison □ Internal Consistency □ Predictive Validity □ Structural Validity
				☐ Other (enter here):

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

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	035	*Validity	For the validity testing provided, indicate the statistical result(s)
Testing		testing	of the testing analysis. If data element validity was conducted,
		statistical	provide the scores for the critical data elements tested. If face
		result	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.

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

Validity Testing	036	*Validity testing interpretation of results	For the validity testing provided, indicate the interpretation of results.
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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	□ Proportion□ Ratio□ Mean□ Median□ Continuous Variable
				☐ Other (enter here):

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

Measure Performance	038	*Measure performance score interpretation	Select one	 ☐ Higher score is better ☐ Lower score is better ☐ Score falling within a defined interval ☐ Passing Score ☐ Other (enter here):
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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	039	*Provide mean	Provide the mean performance rate and
Performance		performance rate	standard deviation for the measure's
		and standard	submission method(s). If the measure has
		deviation for each	more than one submission method, provide all
		submission method	that are available, indicating which results
		a measure has or is	correspond to which method.
		anticipated to have	

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."

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

Impact	041	* Meaningful to Patients. Was input collected from	Select	☐ Yes
		patient and/or caregiver?	one	□ No

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	☐ Standard Technical Expert Panel (TEP) inclusive of patient/caregiver representatives ☐ TEP consisting of ONLY patients or family representatives ☐ Focus groups ☐ Working groups ☐ One-on-one interviews ☐ Surveys ☐ Virtual communities ☐ 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

Impact	043	How many times and at what phase(s) of measure development was	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
		the patient/caregiver engaged?	conclusion of specification.

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	Number of patients/caregivers:
		to policy/clinician experts engaged in	number of policy/clinician
		TEP or working groups	experts. For example, 1:2

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

I	mpact	046	*Total number of patients/caregivers who agreed that the measure information helps inform care and make decisions	Indicate number

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	Select one	□ Yes
		providers consulted?		□ No

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	 □ Standard TEP □ TEP consisting of ONLY clinicians □ Focus groups □ Working groups □ One-on-one interviews □ Surveys □ Virtual communities □ 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

Impact	049	*Total number of clinicians/providers	Indicate number
		consulted	

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:

annual denominator size "unable to determine."	· .	·	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

Impact	052	*Estimate of annual improvemen t 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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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	053	*Estimated Cost	Numeric dollar value, "not applicable," or "unable to
Factors		Avoided by the	determine." Enter the estimated average net cost avoided
		Measure:	per event as a numeric dollar value. If there is no
		Estimate of	anticipated impact, state "none." If you are unable to
		average cost	estimate costs avoided, state "unable to determine." If
		savings per	costs avoided are not an appropriate metric for your
		event	measure focus (e.g., mortality), state "not applicable."

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	054	*Cost avoided	Using the estimate for improvement and the estimated
Factors		annually by	average cost savings per event, provide the costs that
		Medicare/Provider	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."

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

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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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	056	*Year of cost	Provide the year of the cost estimate (e.g., 2016 dollars). If
Factors		literature	adjusted for inflation, provide the year the estimate was
		cited	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."

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?

or zozi i mai raio toxt not:

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

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

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)	

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

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?

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:

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

☐ Medicare a	and Medica	aid Promoting	Interoperal	oility Progra	m for Elig	gible Ho	spitals and	Critical
Access Hosp	itals (CAH	s) □ Part C a	nd D Star R	atings [Med	dicare] □	Other (e	enter here)	:

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):

□ 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):

CY 2022 Final Rule text:

25

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

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

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).	 □ ALL data elements are in defined fields in administrative claims □ ALL data elements are in defined fields in electronic health records (EHRs) □ 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) □ ALL data elements are in defined fields in a combination of electronic sources □ Some data elements are in defined fields in electronic sources □ No data elements are in defined fields in electronic sources □ Patient/family-reported information: electronic □ 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

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:

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:

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

Submitter	069	Is primary submitter the same as	Select "Yes" or	□ Yes
Information		steward?	"No."	□ No

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.

C	ha	n	nΔ	#8	n
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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

Change #81

Location: Page 15, Row 72

Reason for Change: Adding selection choices to column: ADD YOUR CONTENT HERE to

standardize response options.

Process ☐ Structure ☐ Other (enter here):

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 □					
Cost/Resource Use \Box Efficiency \Box Intermediate Outcome \Box Not Specified \Box Outcome \Box					
Patient Engagement/Experience ☐ Patient Perspective ☐ Patient Reported Outcome ☐					

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	073	*Is the measure a composite or component	Select	□ Yes
Characteristics		of a composite?	one	□ No

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 https://cmit.cms.gov/CMIT public/ ListMeasures	□ Yes □ 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

General	075	*If yes,	If the measure is currently in CMIT, enter the 4-digit
Characteristics		enter the	CMIT ID. Current measures and CMIT IDs can be found
		CMIT ID	at https://cmit.cms.gov/CMIT_public/ListMeasures

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

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.

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.

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.

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

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.

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:

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.

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.

Change #9)4						
Location:	Page 1	7, Row 82					
		•	-	port collection of a		nal information, which ONTENT HERE	
CY 2021 F	inal R	ule text: N/a					
CY 2022 F	inal R	ule text:					
Evidence	Evidence 082 *Type of evidence to support the measure Select all that apply USPSTF (U.S. Preventive Services Task Force) Guidelines Systematic Review Empirical data Other (enter here):						
				,	,		
Change #9)5						
Location:	Page 1	7, Row 83					
				included: Subsecto clarify skip patte			
CY 2021 F	inal R	ule text: N/a					
CY 2022 F	inal R	ule text:					
Evidence	Evidence 083 If you select Clinical Guidelines and/or USPSTF Guidelines in Row 082 above, then Row 077 (Outline the Clinical Guidelines) becomes a required field.					This is not a data entry field.	
Change #9	16						
Location:		7 Pow 94					
	-	•			1 _1;4; _		
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:							

*Were the guidelines graded?

Evidence

084

☐ Yes

□ No

Select one

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	Specify the agency or organization(s) that graded
		the guidelines?	the guidelines.

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	Specify the grade that was assigned to the
		grade?	guidelines.

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

Risk Adjustment	087	*Is the measure risk adjusted, stratified, or both?	Select as many as apply.	☐ Risk adjusted☐ Stratified☐ None
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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."	☐ Yes ☐ No ☐ 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?

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

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

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?

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/

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)

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.

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 exactly as endorsed by NQF?	Select Yes or No	□ Yes □ No

CY 2022 Final Rule text:

Endorsement 092 Characteristics	If endorsed: Is the measure being submitted exactly 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.	□ Yes □ 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

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 2	2021	Finai	Rule	text:	\sqcup N	lone ∟	1999	$\sqcup 20$	000 🗆	2001	$1 \sqcup 2$	2002	_ 200)3 ⊔	2004	$1 \sqcup 2$	005
□ 20	006 🗆	2007	□ 200	8 🗆 2	2009	□ 201	0 🗆 20	011 □	2012	2 🗆 2	013 [□ 20°	14 🗆 :	201	5 □ 2	016 🛭	
2017	7 □ 20	018 □	2019	□ 202	20												

CY 2022 Final Rule text: □ None □ 2017 □ 2018 □ 2019 □ 2020 □ 2

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

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

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

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)?

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/

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

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.

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)?

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

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	□ Yes □ 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	Select one	☐ 1 (little to no effort)
		degree of effort?		□ 3
				□ 4
				☐ 5 (substantial effort)

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

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

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.

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

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]

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

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:

1	17	If Yes:	
1		Which measure(s) already in a program is your measure similar to	Identify the other measure(s) including title and any other unique identifier
		and/or competing with?	

CY 2022 Final Rule text:

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

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?

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.

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.

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 (ent	ter here):
CY 2022 Final Rule text:	□ None □ 2011 □ 2012 □ 2013 □ 2014 □ 2015 □ 2016 □ 2017
□ 2018 □ 2019 □ 2020 □ O	ther (enter here):

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

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.

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]

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

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.

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

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.

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 prerulemaking@battelle.org

CY 2022 Final Rule text: Send any questions to MMSsupport@battelle.org

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

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)

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)

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 prerulemaking@battelle.org

CY 2022 Final Rule text: Send any questions to MMSsupport@battelle.org

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

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]

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:

Ro w	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.	☐ MeasureSubmission☐ Modify CandidateMeasure

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.	If #24 is Make care safer, then choices are: ☐ Healthcare-associated infections ☐ Preventable healthcare harm If #24 is Strengthen person, then choices are: ☐ Care is personalized and aligned with patient's goals ☐ End of life care according to preferences ☐ Patient's experience of care ☐ Functional outcomes If #24 is Promote effective communication, then choices are: ☐ Medication management ☐ Admissions and readmissions to hospitals ☐ Transfer of health information and interoperability If #24 is Promote effective prevention, then choices are: ☐ Preventive care ☐ Management of chronic conditions ☐ Prevention, treatment, and management of mental health ☐ Prevention and treatment of opioid and substance use disorders ☐ Risk adjusted mortality If #24 is Work with communities, then choices are: ☐ Equity of care ☐ Community engagement If #24 is Make care affordable, then choices are: ☐ Appropriate use of healthcare ☐ Patient-focused episode of care ☐ Risk adjusted total cost of care
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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.	 ☐ 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
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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:

	secondary meaningful measure area applies to this measure?	alternate or secondary area only if applicable. The meaningful measure area choices depend on your selection of secondary healthcare priority above.	 ☐ Healthcare-associated infections ☐ Preventable healthcare harm If #26 is Strengthen person, then choices are: ☐ Care is personalized and aligned with patient's goals ☐ End of life care according to preferences ☐ Patient's experience of care ☐ Functional outcomes If #26 is Promote effective communication, then choices are: ☐ Medication management ☐ Admissions and readmissions to hospitals ☐ Transfer of health information and interoperability If #26 is Promote effective prevention, then choices are: ☐ Preventive care ☐ Management of chronic conditions ☐ Prevention, treatment, and management of mental health ☐ Prevention and treatment of opioid and substance use disorders ☐ Risk adjusted mortality If #26 is Work with communities, then choices are: ☐ Equity of care ☐ Community engagement If #26 is Make care affordable, then choices are: ☐ Appropriate use of healthcare ☐ Patient-focused episode of care ☐ Risk adjusted total cost of care
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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	Identify the registry using the	See Appendix A.44 for list choices.
	registry(ies)	submitted measure. Select all	Copy/paste or enter your choices
		that apply.	here:

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.	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 prerulemaking report (2012 to 2019). This is not a data entry field.
			2016-19: http://www.qualityforum.org/map/
			2015: http://www.qualityforum.org/WorkArea/linkit.aspx ?LinkIdentifier=id&ItemID=78711
			2014: http://www.qualityforum.org/Publications/2014/0 1/MAP_Pre- Rulemaking Report 2014 Recommendations on Measures for More than 20 Federal Pro grams.aspx
			2013: http://www.qualityforum.org/Publications/2013/0 2/MAP Pre-Rulemaking Report - February 2013.aspx
			2012: http://www.qualityforum.org/Publications/2012/0 2/MAP Pre- Rulemaking Report Input on Measures Und er Consideration by HHS for 2012 Rulemaki ng.aspx
			All major NQF reports going back to 2008 should be locatable here: http://www.qualityforum.org/Publications.aspx

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]

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]

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.