

2026 Proposed Changes to QPP

Changes proposed under the 2026 PFS Proposed Rule

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Proposed changes to the Quality category





eCQMs

- 1. Diagnostic Delay of Venous Thromboembolism in Primary Care (Intermediate Outcome)
- 2. Screening for Abnormal Glucose Metabolism in Patients at Risk of Developing Diabetes (Process)

MIPS CQMs

- 1. Patient Reported Falls and Plan of Care (Process)
- 2. Prevalent Standardized Kidney Transplant Waitlist Ratio (PSWR) (Process)
- 3. Hepatitis C Virus (HCV): Sustained Virological Response (SVR) (Outcome)

CMS is proposing to add 5 new Quality measures



MIPS CQMs

- 1. Colonoscopy Interval for Patients with a History of Adenomatous Polyps
- 2. Sentinel Lymph Node Biopsy for Invasive Breast Cancer
- 3. Assessment of Mood Disorders and Psychosis for Patients with Parkinson's Disease
- 4. Cardiac Stress Imaging Not Meeting Appropriate Use Criteria
- 5. Overuse of Imaging for the Evaluation of Primary Headache
- 6. Perioperative Temperature Management
- 7. Non-Recommended Cervical Cancer Screening in Adolescent Females
- 8. Screening for Social Drivers of Health
- 9. Connection to Community Service Provider
- 10. Adult COVID-19 Vaccination Status

CMS is proposing to <u>remove</u> 10 Quality measures



Removing Health Equity

CMS is proposing to remove "health equity" from the definition of high priority measures

Revising the Outcome Definition

The revised definition would be:

An outcome (including intermediateoutcome and patient- reported outcome), appropriate use, patient safety, efficiency, patient experience, care coordination, or opioid quality measure.





For ACOs submitting under APP, CMS is proposing changes to the APP Plus quality measure set

Removal

Screening for Social Drivers of Health (CMS 487) would be removed from the APP Plus quality measure set. It was supposed to be required in 2028.



CMS is proposing that ACOs continue to be limited to the following collection types:

eCQMs or Medicare CQMs

(No CQMs starting in 2027 and still no CMS Web Interface starting in 2025)

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CMS is proposing to keep the data completeness threshold at 75% through 2028 for all measure types across all reporting frameworks.





Improvement Activities (IA) Category

Proposed changes to the Improvement Activities category



IA Category

CMS is proposing to <u>add</u> 3 new IA measures

MIPS MVP APP

Improvement Activities:

- 1. Improving Detection of Cognitive Impairment in Primary Care
- 2. Integrating Oral Health Care in Primary Care
- 3. Patient Safety in Use of Artificial Intelligence (AI)

IA Category

CMS is proposing to <u>remove</u> 7 IA measures



Improvement Activities:

- 1. IA_AHE_5: MIPS Eligible Clinician Leadership in Clinical Trials or CBPR
- 2. IA_AHE_8: Create and Implement an Anti-Racism Plan
- 3. IA_AHE_9: Implement Food Insecurity and Nutrition Risk Identification and Treatment Protocols
- 4. IA_AHE_11: Create and Implement a Plan to Improve Care for Lesbian, Gay, Bisexual, Transgender, and Queer Patients
- 5. IA_AHE_12: Practice Improvements that Engage Community Resources to Address Drivers of Health
- 6. IA_PM_26: Vaccine Achievement for Practice Staff: COVID-19, Influenza, and Hepatitis B
- 7. IA_PM_6: Use of Toolsets or Other Resources to Close Health and Health Care Inequities Across Communities
- 8. IA_ERP_3: COVID-19 Clinical Data Reporting with or without Clinical Trial



IA Category

CMS is proposing to remove the "Achieving Health Equity (AHE)" subcategory and add a new "Advancing Health and Wellness (AHW)" subcategory





Promoting Interoperability (PI) Category

Proposed changes to the Promoting Interoperability category



PI Category



Security Risk Analysis

Security Risk Analysis Measure: Adding a second

attestation component for security risk management

New Attestation Statement

You must attest "Yes" or "No" to **having** conducted security risk management as required in addition to the existing measure requirement to attest "Yes" or "No" to **having** conducted or reviewed a security risk analysis.

A "No" response for the measure would continue to result in a total score of zero points for the Promoting Interoperability performance category.



PI Category



New SAFER Guides

• SAFER Guide Measure: Updating to require use of the 2025 SAFER Guides instead of 2016

New Bonus Measure

 New Optional Bonus Measure: Public Health Reporting Using TEFCA

No Electronic Case Reporting

 Electronic Case Reporting: Proposing to <u>suppress this measure</u> <u>for CY 2025</u> due to CDC pausing onboarding



Cost Category

Proposed changes to the Cost category





Cost Category

CMS is proposing to <u>modify</u> the Total Per Capita Cost (TPCC) measure with updated candidate event and attribution criteria

CMS is NOT proposing any new cost measures for the CY 2026 performance period





Cost Category

CMS is proposing a 2-year informational-only feedback period for new cost measures

Under this proposal, MIPS eligible clinicians would receive informational-only scoring feedback on new cost measures for 2 years before they contribute to their final score.



MVP Reporting Framework

Proposed changes to the MVP reporting framework





MVP Reporting Framework

CMS is proposing to <u>add</u> 6 new MVP options.

New MVP Options:

- 1. Diagnostic Radiology
- 2. Interventional Radiology
- 3. Neuropsychology
- 4. Pathology
- 5. Podiatry
- 6. Vascular Surgery



MVP Reporting Framework

CMS is proposing modifications to all 21 existing MVPs to align with quality measure and improvement activity inventory updates.

MVP Reporting Framework



 Multispecialty small practices (15 or fewer clinicians) would be able to report MVPs as a group Small Practices Exempted from Subgroups

 Small practice multispecialty groups are not required to form subgroups in 2026 Small Practices Can Self-Select MVPs

 Groups are allowed to attest to their specialty composition during MVP registration instead of waiting for CMS to tell them.



Key Takeaways on QPP Changes in the 2026 PFS Proposed Rule







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