QOPI® Reporting Registry
Qualified Clinical Data Registry (QCDR)
Brought to you by ASCO and ASTRO

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
QOPI5	Chemotherapy administered to patients with metastatic solid tumor with performance status of ECOG 3 or 4; KPS 10 – 40; or undocumented (Lower Score - Better)	Percentage of patients with metastatic solid tumors and a performance status of ECOG 3 or 4; KPS 10-40; or undocumented, who receive chemotherapy (Lower score - Better)	Alternative treatment was administered according to clinical trial protocol	Diagnosis of malignant neoplasm of placenta/tropho blastic neoplasm, testicular carcinoma, myeloma, leukemia, Hodgkin and non-Hodgkin lymphoma (Diagnosis codes 181.x, 186.x, 205-208.x, 200-202.x)	"All patients, regardless of age, with a diagnosis of a metastatic solid tumor and a performance ECOG 3 or 4; KPS 10-40; or undocumented within 2 weeks prior to or on the day of chemotherapy administration for distant metastatic disease. Denominator definition: Metastatic is Stage IV at initial diagnosis or development of distant metastases during measurement period.	Chemotherapy administered	Measure Type: Process Number of Performance Rates: 1 Inverse Status: Yes Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A
QOPI11	Combination chemotherapy received within 4 months of diagnosis by women under 70 with AJCC stage IA (T1c) to III ER/PR negative breast cancer	Percentage of adult women under 70 with a diagnosis of AJCC stage IA (T1c) to III ER/PR negative breast cancer, who receive combination chemotherapy	Alternative treatment was administered according to clinical trial protocol. Patient declined, or Patient died or transferred, or Contraindication.	Reporting practice has/had primary responsibility for the initial course of the patient's medical oncology care, or M-Stage at breast cancer diagnosis = M1, or Diagnosis of	All patients aged 18-69 at time of breast cancer diagnosis and AJCC stage at breast cancer diagnosis is IIA - IIIC, or IA and T1c, or IB, or T1c, T2-T4d and N0, or N1-N3c, or T1c and N1mic, and ER negative and PR negative	Multi-agent chemotherapy administered during initial treatment course for breast cancer	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
		within 4 months of diagnosis		malignant phyllodes, cystosarcoma phyllodes, tubular carcinoma, mucinous carcinoma, or Multi-agent chemotherapy NOT administered and reporting date – diagnosis date < 124 days, or deceased date – diagnosis date < 124 days, or date of first visit to reporting practice – diagnosis date > 124 days)			
QOPI15	GCSF administered to patients who received chemotherapy for metastatic cancer (Lower Score -Better)	Percentage of patients 18 or older with metastatic cancer who were administered chemotherapy and received a granulocyte-	None	Diagnosis of malignant neoplasm of placenta/tropho blastic neoplasm, testicular carcinoma, leukemia, Hodgkin or Non-Hodgkin's	Patients aged 18 or older at cancer diagnosis who received chemotherapy for metastatic/advanced disease and/or received chemotherapy for palliative intent	Patient received GCSF with any chemotherapy regimen	Measure Type: Process Number of Performance Rates: 1 Inverse Status: Yes Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
		colony stimulating factor (GCSF) (Lower score - Better)		lymphoma			
QOPI21	Oncology: Treatment Summary Communication – Radiation Oncology	Percentage of patients, regardless of age, with a diagnosis of cancer who have undergone brachytherapy or external beam radiation therapy who have a treatment summary report in the chart that was communicated to the physician(s) providing continuing care and to the patient within one month of completing treatment	Documentation of a patient reason(s) for not communicating the treatment summary report to the physician(s) providing continuing care (e.g., patient requests that report not be sent) and to the patient within one month of completing treatment Documentation of a system reason(s) for not communicating the treatment summary report to the physician(s) providing continuing care (e.g., patient does not have any physician responsible for providing continuing care) and to the patient within one month of	None	All patients, regardless of age, with a diagnosis of cancer who have undergone brachytherapy or external beam radiation therapy	Patients who have a treatment summary report in the chart that was communicated to the physician(s) providing continuing care and to the patient within one month of completing treatment	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

 Updated: 12/03/2020

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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		New for 2020	completing treatment			New for 2020	
QOPI22	External Beam Radiotherapy for Bone Metastases	Percentage of patients, regardless of age, with a diagnosis of painful bone metastases and no history of previous radiation who receive external beam radiation therapy (EBRT) with an acceptable fractionation scheme as defined by the guideline.	Patients who are part of a prospective clinical protocol or registry study involving the administration of radiation therapy, especially stereotactic radiosurgery (SRS) or stereotactic body radiation therapy (SBRT) Patient declines treatment	Patients with a diagnosis of multiple myeloma (ICD-10-CM codes C90.00-C90.02) EBRT is used to treat anything other than bone metastases Previous radiation treatment to the same anatomic site (i.e., retreatment) Patients with femoral axis cortical involvement	All patients, regardless of age, with painful bone metastases and no previous radiation to the same anatomic site who receive EBRT	Patients, regardless of age, with painful bone metastases, and no previous radiation to the same anatomic site who receive EBRT with any of the following recommended fractionation schemes: 30Gy/10fxns, 24Gy/6fxns, 20Gy/5fxns, 8Gy/1fxn	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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				greater than 3 cm in length if the current EBRT is to that femur Patients who have undergone a surgical stabilization procedure if at the site of the current EBRT treatment Patients with spinal cord compression, cauda equina compression or radicular pain documented in the chart as related to the bone metastases being treated with EBRT			

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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QOPI23	Concurrent Chemoradiation for Patients with a Diagnosis of Stage IIIB NSCLC	Percentage of patients, regardless of age, with a diagnosis of Stage IIIB non-small cell lung cancer (NSCLC) receiving concurrent chemoradiation.	Patients who received first line platinum-based chemotherapy and radiation on a clinical trial, Performance status is ECOG 3 or 4, or Karnofsky performance status is 10-40Patient performance status is 3 / 40-50% / Bed time, >50%, Patient performance status is 4 / 10-30% / Unable to get out of bed Patients with medical contraindication for concurrent chemoradiation	Superior sulcus cancers	All patients, regardless of age, with Stage IIIB NSCLC at diagnosis (AJCC 8th Edition)	Patients who received first-line platinum-based chemotherapy and radiation	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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QOPI24	Hypofractionization Whole Breast Irradiation	Percentage of female patients, regardless of age, with a diagnosis of invasive breast cancer receiving hypofractionated whole breast irradiation (HF-WBI)	Node-positive patients receiving regional nodal irradiation Exception Guidance: As discussion of regional nodal treatment was not included in the referenced ASTRO guideline, the authors refrained from making a treatment recommendation for node-positive patients and noted that future guideline work is needed to address indications and techniques for regional nodal irradiation in node-positive patients. While the	None	All female patients, regardless of age, with a diagnosis of invasive breast cancer receiving whole breast irradiation	Patients receiving hypofractionated whole breast irradiation (HF-WBI) in 15-16 fractions	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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			ASTRO guideline does not feature a recommendation for the treatment of node-positive patients, the measure development technical expert panel felt that node-positive patients could reasonably be treated with hypofractionated therapy and should not be uniformly excluded from the measure. Node-positive patients are therefore specified as a denominator exception, so that providers treating node-positive patients with conventional fractionation				

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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			will not fail to meet the measure.				

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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QOPI25	Moderate Hypofractionization for Prostate Cancer	Percentage of low- and intermediate-risk prostate cancer patients, regardless of age, receiving moderately hypofractionated external beam radiation therapy (EBRT)	None	Patients receiving radiation treatment to the pelvic lymph nodes Patients receiving brachytherapy Patients receiving stereotactic body radiation therapy Patients receiving radiation to the prostate bed or prostatic fossa	All patients with low- and intermediate-risk prostate cancer, regardless of age, who receive EBRT to the intact prostate (+/- seminal vesicles)	All patients who receive moderately hypofractionated EBRT in 6-30 fractions Numerator Guidance: •The 2018 ASTRO, ASCO, and AUA guideline on hypofractionated radiation therapy for localized prostate cancer defined “moderate hypofractionation” as external beam radiation therapy (EBRT) with a fraction size between 240 cGy and 340 cGy.	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
QOPI26	Sentinel Lymph Node (SLN) Biopsies for Patients with AJCC T1b-T4 Melanoma	Percentage of patients with AJCC T1b-T4 cutaneous melanoma who received a SLN biopsy.	Patient declined Documentation of Medical Reason: Comorbidities Denominator Exception Guidance: • Patient declined during a documented discussion regarding the potential benefits and risk of harms associated with the procedure.	Clinical or radiologic evidence of distant metastatic disease or regional metastases, including lymph node involvement. Denominator Exclusion Guidance: • Evidence of lymph node involvement defined as: o Documentation of palpable lymphadenopathy on clinical exam o Evidence of abnormal lymph node on an imaging study (CT, PET-CT, MRI or ultrasound)	Patients with clinical staging of AJCC T1b-T4 melanoma at diagnosis. Denominator Guidance: • T-stage at melanoma diagnosis = T1b, T2a, T2b, T3a, T3b, T4a or T4b	Patients who received an SLN biopsy within 60 days of the initial biopsy. Numerator Guidance: • Date of the initial biopsy determined from pathology report. • Initial biopsy is a preliminary excisional biopsy completed for patients with a suspicious pigmented lesion and used to categorize clinical staging. A SLN biopsy is a staging procedure to further stratify patients with clinical stage I-II melanoma (as identified by the initial excisional biopsy) based on the presence or absence of subclinical nodal metastases.	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
QOPI27	Appropriate Antiemetic Therapy for High- and Moderate-Emetic Risk Antineoplastic Agents	Percentage of cancer patients aged ≥18 years treated with high- or moderate-emetic risk antineoplastic agents who are administered appropriate pre-treatment antiemetic therapy	Denominator Exception Criteria 1: Patient allergy to neurokinin 1 (NK1) receptor antagonist, serotonin (5-HT3) receptor antagonist, dexamethasone, or olanzapine Denominator Exception Criteria 2: Patient allergy to 5-HT3 receptor antagonist, or dexamethasone	None	Denominator Criteria 1: All patients aged ≥18 years diagnosed with cancer who receive high-emetic risk antineoplastic agents during cycle 1 of the patient's first chemotherapy regimen Denominator Criteria 2: All patients aged ≥18 years diagnosed with cancer who receive moderate-emetic risk antineoplastic agents during cycle 1 of the patient's first chemotherapy regimen Denominator Guidance: For guidance on determining emetic risk, please refer to Table 1, Emetic Risk of Single Intravenous Antineoplastic Agents in Adults (Hesketh, P.J., K. Bohlke, and M.G. Kris, Antiemetics:	Numerator Criteria 1: Patients who are administered prior to treatment a four-drug combination of a neurokinin 1 (NK1) receptor antagonist, a serotonin (5-HT3) receptor antagonist, dexamethasone, and olanzapine Numerator Criteria 2: Patients who are administered prior to treatment a two-drug combination of a 5-HT3 receptor antagonist, and dexamethasone	Measure Type: Intermediate Outcome Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					American Society of Clinical Oncology Clinical Practice Guideline Update Summary. J Oncol Pract, 2017. 13(12): p. 825-830)		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
47	Advance Care Plan	Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan		Hospice services received by patient any time during the measurement period: G9692	Patients aged ≥ 65 years on date of encounter **AND** Patient encounter during the performance period (CPT or HCPCS): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99218, 99219, 99220, 99221, 99222, 99223, 99231, 99232, 99233, 99234, 99235, 99236, 99291, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0402, G0438, G0439	Advance Care Planning discussed and documented; advance care plan or surrogate decision maker documented in the medical record (1123F) **OR** Advance Care Planning discussed and documented in the medical record; patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan (1124F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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67	Hematology: Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	Percentage of patients aged 18 years and older with a diagnosis of myelodysplastic syndrome (MDS) or an acute leukemia who had baseline cytogenetic testing performed on bone marrow	*Denominator Exceptions:* Documentation of medical reason(s) for not performing baseline cytogenetic testing on bone marrow (e.g., no liquid bone marrow or fibrotic marrow) (3155F with 1P) **OR** Documentation of patient reason(s) for not performing baseline cytogenetic testing on bone marrow (e.g., at time of diagnosis receiving palliative care or not receiving treatment as defined above) (3155F with 2P) **OR** Documentation of system reason(s) for not performing baseline cytogenetic testing on bone marrow (e.g., patient previously treated by another physician at the time cytogenetic		Patients aged ≥ 18 years on date of encounter **AND** Diagnosis for MDS or acute leukemia – not in remission (ICD-10-CM): C91.00, C91.02, C92.00, C92.02, C92.40, C92.42, C92.50, C92.52, C92.60, C92.62, C92.A0, C92.A2, C93.00, C93.02, C94.00, C94.02, C94.20, C94.22, C95.00, C95.02, D46.0, D46.1, D46.20, D46.21, D46.22, D46.4, D46.9, D46.A, D46.B, D46.C, D46.Z **AND** Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241*, 99242*, 99243*, 99244*, 99245* WITHOUT	Cytogenetic testing performed on bone marrow at time of diagnosis or prior to initiating treatment (3155F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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			testing performed) (3155F with 3P)		Telehealth Modifier: GQ, GT, 95, POS 02		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
69	Hematology: Multiple Myeloma: Treatment with Bisphosphonates	Percentage of patients aged 18 years and older with a diagnosis of multiple myeloma, not in remission, who were prescribed or received intravenous bisphosphonate therapy within the 12 month reporting period.	Documentation of medical reason(s) for not prescribing bisphosphonates (e.g., patients who do not have bone disease, patients with dental disease, patients with renal insufficiency) (4100F with 1P) **OR** Documentation of patient reason(s) for not prescribing bisphosphonates (4100F with 2P)		Patients aged ≥ 18 years on date of encounter **AND** Diagnosis for multiple myeloma – not in remission (ICD-10-CM): C90.00, C90.02 **AND** Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02	Bisphosphonate therapy, intravenous, ordered or received (4100F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A
70	Hematology: Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	Percentage of patients aged 18 years and older, seen within a 12 month reporting period, with a diagnosis of chronic lymphocytic leukemia (CLL) made at any time during or prior to the reporting period who had baseline flow cytometry studies performed and	Documentation of medical reason(s) for not performing baseline flow cytometry studies (3170F with 1P) **OR** Documentation of patient reason(s) for not performing baseline flow cytometry studies (e.g., receiving palliative care or not		Patients aged ≥ 18 years on date of encounter **AND** Diagnosis for CLL – not in remission (ICD-10-CM): C91.10, C91.12 **AND** Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212,	Flow cytometry studies performed at time of diagnosis or prior to initiating treatment (3170F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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		documented in the chart	receiving treatment as defined above) (3170F with 2P) **OR** Documentation of system reason(s) for not performing baseline flow cytometry studies (e.g., patient previously treated by another physician at the time baseline flow cytometry studies were performed) (3170F with 3P)		99213, 99214, 99215, 99241*, 99242*, 99243*, 99244*, 99245* WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	Percentage of patients, regardless of age, with a diagnosis of prostate cancer at low (or very low) risk of recurrence receiving interstitial prostate brachytherapy, **OR** external beam radiotherapy to the prostate, OR radical prostatectomy, OR cryotherapy who did not have a bone scan performed at any time since diagnosis of prostate cancer	Documentation of medical reason(s) for performing a bone scan (including documented pain, salvage therapy, other medical reasons) (3269F with 1P) **OR** Documentation of system reason(s) for performing a bone scan (including bone scan ordered by someone other than the reporting physician) (3269F with 3P)		Any male patient, regardless of age **AND** Diagnosis for prostate cancer (ICD-10-CM): C61 **AND** Patient encounter during the performance period (CPT): 55810, 55812, 55815, 55840, 55842, 55845, 55866, 55873, 55875, 77427, 77435, 77772, 77778, 77799 **AND** Low (or very low) risk of recurrence, prostate cancer: G9706	Bone scan not performed prior to initiation of treatment nor at any time since diagnosis of prostate cancer (3270F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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104	Prostate Cancer: Combination Androgen Deprivation Therapy for High Risk or Very High Risk Prostate Cancer	Percentage of patients, regardless of age, with a diagnosis of prostate cancer at high or very high risk of recurrence receiving external beam radiotherapy to the prostate who were prescribed androgen deprivation therapy in combination with external beam radiotherapy to the prostate	Documentation of medical reason(s) for not prescribing/administering androgen deprivation therapy in combination with external beam radiotherapy to the prostate (e.g., salvage therapy) (G9895) **OR** Documentation of patient reason(s) for not prescribing/administering androgen deprivation therapy in combination with external beam radiotherapy to the prostate (G9896)	Diagnosis for metastatic cancer	Diagnosis for prostate cancer (ICD-10-CM): C61 **AND** Patient encounter during the performance period (CPT): 77427, 77435 **AND** High or very high risk of recurrence = Yes **AND** Receiving external beam radiotherapy to the prostate = Yes	Androgen deprivation therapy prescribed/administered in combination with external beam radiotherapy to the prostate (G9894)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A
130	Documentation of Current Medications in the Medical Record	Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date	Eligible clinician attests to documenting in the medical record the patient is not eligible for a current list of medications being obtained, updated, or reviewed by the		Patients aged ≥ 18 years on date of encounter **AND** Patient encounter during the performance period (CPT or HCPCS): 59400, 59510, 59610, 59618, 90791, 90792, 90832,	Eligible clinician attests to documenting in the medical record they obtained, updated, or reviewed the patient's current medications (G8427)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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		of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration	eligible clinician (G8430)		90834, 90837, 90839, 92002, 92004, 92012, 92014, 92507, 92508, 92526, 92537, 92538, 92540, 92541, 92542, 92544, 92545, 92547, 92548, 92550, 92557, 92567, 92568, 92570, 92585, 92588, 92626, 96116, 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 96150, 96151, 96152, 97127*, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 97802, 97803, 97804, 98960, 98961, 98962, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99221, 99222, 99223, 99236, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99341, 99342, 99343, 99344, 99345, 99347,		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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					99348, 99349, 99350, 99495, 99496, 99281, 99282, 99283, 99284, 99285, 99385*, 99386*, 99387*, 99395*, 99396*, 99397*, G0101, G0108, G0270, G0402, G0438, G0439, G0515		
134	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Percentage of patients aged 12 years and older screened for depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the positive screen	Screening for depression not completed, documented reason (G8433)	Documentation stating the patient has an active diagnosis of depression or has a diagnosed bipolar disorder, therefore screening or follow-up not required: G9717	Patients aged ≥ 12 years on date of encounter **AND** Patient encounter during the performance period (CPT or HCPCS): 90791, 90792, 90832, 90834, 90837, 92625, 96116, 96118, 96150, 96151, 97165, 97166, 97167, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, G0101, G0402, G0438, G0439, G0444	Screening for depression is documented as being positive AND a follow-up plan is documented (G8431) **OR** Screening for depression is documented as negative, a follow-up plan is not required (G8510)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A
138	Melanoma: Coordination of Care	Percentage of patient visits, regardless of age, with a new occurrence of melanoma that have a treatment plan documented in the	Documentation of patient reason(s) for not communicating treatment plan to the Primary Care Physician(s) (PCP) (s) (e.g., patient asks		Diagnosis for melanoma (ICD-10-CM): C43.0, C43.10, C43.111, C43.112, C43.121, C43.122, C43.20, C43.21, C43.22, C43.30,	Treatment plan communicated to provider(s) managing continuing care within 1 month of diagnosis (5050F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

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		chart that was communicated to the physician(s) providing continuing care within one month of diagnosis	that treatment plan not be communicated to the physician(s) providing continuing care) (5050F with 2P) **OR** Documentation of system reason(s) for not communicating treatment plan to the PCP(s) (e.g., patient does not have a primary care physician or referring physician) (5050F with 3P)		C43.31, C43.39, C43.4, C43.51, C43.52, C43.59, C43.60, C43.61, C43.62, C43.70, C43.71, C43.72, C43.8, C43.9, D03.0, D03.10, D03.111, D03.112, D03.121, D03.122, D03.20, D03.21, D03.22, D03.30, D03.39, D03.4, D03.51, D03.52, D03.59, D03.60, D03.61, D03.62, D03.70, D03.71, D03.72, D03.8, D03.9 **AND** Patient encounter for excision of malignant melanoma (CPT): 11600, 11601, 11602, 11603, 11604, 11606, 11620, 11621, 11622, 11623, 11624, 11626, 11640, 11641, 11642, 11643, 11644, 11646, 14000, 14001, 14020, 14021, 14040, 14041, 14060, 14061, 14301, 17311, 17313		Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
143	Oncology: Medical and Radiation - Pain Intensity Quantified	Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified ***SUBMISSION CRITERIA 1:*** **ALL PATIENT VISITS FOR PATIENTS WITH A DIAGNOSIS OF CANCER CURRENTLY RECEIVING CHEMOTHERAPY**	None	None	***SUBMISSION CRITERIA 1:*** **All patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy** Diagnosis of cancer **AND** Patient encounter during the performance period (CPT) – to be used to evaluate remaining denominator criteria and for numerator evaluation: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **AND** Patient procedure within 30 days before denominator eligible encounter: 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422,	***SUBMISSION CRITERIA 1:*** **Patient visits in which pain intensity is quantified** Pain severity quantified; pain present (1125F) **OR** Pain severity quantified; no pain present (1126F)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549 **AND** Patient procedure within 30 days after denominator eligible encounter: 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549		
		***SUBMISSION CRITERIA 2*: ALL PATIENT VISITS FOR PATIENTS WITH A DIAGNOSIS OF CANCER CURRENTLY RECEIVING RADIATION THERAPY**			***SUBMISSION CRITERIA 2:*** **All patient visits, regardless of patient age, with a diagnosis of cancer currently receiving radiation therapy** Diagnosis of cancer **AND** Patient procedure during the performance period	***SUBMISSION CRITERIA 2:*** **Patient visits in which pain intensity is quantified** Pain severity quantified; pain present (1125F) **OR** Pain severity quantified; no pain present (1126F)	

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					(CPT) – Procedure codes: 77427, 77431, 77432, 77435		
144	Oncology: Medical and Radiation –Plan of Care for Moderate to Severe Pain	Percentage of patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having moderate to severe pain with a plan of care to address pain documented on or before the date of the second visit with a clinician			***SUBMISSION CRITERIA 1:*** All patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having pain **AND** Patient encounter during the performance period (CPT) – Service codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **AND** Patient procedure during the performance period (CPT) – Procedure	***SUBMISSION CRITERIA 1:*** **Patient visits that included a documented plan of care to address pain** Plan of care to address moderate to severe pain documented on or before the date of the second visit with a clinician (M1001)	Measure Type: Process Number of Performance Rates:1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					codes: 51720, 96401, 96402, 96405, 96406, 96409, 96411, 96413, 96415, 96416, 96417, 96420, 96422, 96423, 96425, 96440, 96446, 96450, 96521, 96522, 96523, 96542, 96549 **AND** Pain screened as moderate to severe: M1000 ***SUBMISSION CRITERIA 2:*** **All patients, regardless of age, with a diagnosis of cancer currently receiving radiation therapy** **AND** Patient procedure during the performance period (CPT) – Procedure codes: 77427, 77431, 77432, 77435 **AND** Pain screened as moderate to severe: M1000	***SUBMISSION CRITERIA 2:*** **Patients for whom a plan of care to address moderate to severe pain is documented on or before the date of the second visit with a clinician** Plan of care to address moderate to severe pain documented on or before the date of the second visit with a clinician (M1001)	

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months **AND** who received cessation counseling intervention if identified as a tobacco user ***SUBMISSION CRITERIA 1:*** **ALL PATIENTS WHO WERE SCREENED FOR TOBACCO USE**	***SUBMISSION CRITERIA 1:*** Documentation of medical reason(s) for not screening for tobacco use (e.g., limited life expectancy, other medical reason) (G9904)	None	**SUBMISSION CRITERIA 1:** All patients aged 18 years and older seen for at least two visits or at least one preventive visit during the measurement period Patients aged ≥ 18 years **AND** At least two patient encounters during the performance period (CPT): 90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92523, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02	***SUBMISSION CRITERIA 1:*** **Patients who were screened for tobacco use at least once within 24 months** **Patient screened for tobacco use AND identified as a tobacco user (G9902)** **OR** **Patient screened for tobacco use AND identified as a tobacco non-user (G9903)**	Measure Type: Process Number of Performance Rates: 3 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
		SUBMISSION CRITERIA 2: **ALL PATIENTS WHO WERE IDENTIFIED AS A TOBACCO USER AND WHO RECEIVED TOBACCO CESSATION INTERVENTION**	***SUBMISSION CRITERIA 2:*** Documentation of medical reason(s) for not providing tobacco cessation intervention (e.g., limited life expectancy, other medical reason) (G9907)		**OR** At least one preventive encounter during the performance period (CPT or HCPCS): 99385*, 99386*, 99387*, 99395*, 99396*, 99397*, 99401*, 99402*, 99403*, 99404*, 99411*, 99412*, 99429*, G0438, G0439 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 ***SUBMISSION CRITERIA 2:*** **All patients aged 18 years and older seen for at least two visits or at least one preventive visit during the measurement period who were screened for tobacco use and identified as a tobacco user** Patients aged ≥ 18 years **AND** All eligible instances when G9902 is	***SUBMISSION CRITERIA 2:*** **Patients who received tobacco cessation intervention** Patient identified as a tobacco user received tobacco cessation intervention (counseling and/or pharmacotherapy) (G9906)	

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					submitted for Performance Met (patient screened for tobacco use and identified as a tobacco user) in the numerator of Submission Criteria 1 **AND** At least two patient encounters during the performance period (CPT): 90791, 90792, 90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92523, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **OR** At least one preventive encounter during the performance period		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
		SUBMISSION CRITERIA 3: **ALL PATIENTS WHO WERE SCREENED FOR TOBACCO USE AND, IF IDENTIFIED AS A TOBACCO USER RECEIVED TOBACCO CESSATION INTERVENTION, OR IDENTIFIED AS A TOBACCO NON-USER**	***SUBMISSION CRITERIA 3:*** Documentation of medical reason(s) for not screening for tobacco use (e.g., limited life expectancy, other medical reason) (4004F with 1P) **OR** Documentation of medical reason(s) for not providing tobacco cessation intervention if identified as a tobacco user (e.g., limited life expectancy, other medical reason) (G9909)		(CPT or HCPCS): 99385*, 99386*, 99387*, 99395*, 99396*, 99397*, 99401*, 99402*, 99403*, 99404*, 99411*, 99412*, 99429*, G0438, G0439 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 ***SUBMISSION CRITERIA 3:*** **All patients aged 18 years and older seen for at least two visits or at least one preventive visit during the measurement period** Patients aged ≥ 18 years **AND** At least two patient encounters during the performance period (CPT): 90791, 90792,	***SUBMISSION CRITERIA 3:*** **Patients who were screened for tobacco use at least once within 24 months AND who received tobacco cessation intervention if identified as a tobacco user** Patient screened for tobacco use AND received tobacco cessation intervention (counseling, pharmacotherapy, or both), if identified as a tobacco user (4004F) **OR** Current tobacco non-user (1036F)	

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					90832, 90834, 90837, 90845, 92002, 92004, 92012, 92014, 92521, 92522, 92523, 92524, 92540, 92557, 92625, 96150, 96151, 96152, 97165, 97166, 97167, 97168, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **OR** At least one preventive encounter during the performance period (CPT or HCPCS): 99385*, 99386*, 99387*, 99395*, 99396*, 99397*, 99401*, 99402*, 99403*, 99404*, 99411*, 99412*, 99429*, G0438, G0439 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
408	Opioid Therapy Follow-up Evaluation	All patients 18 and older prescribed opiates for longer than six weeks duration who had a follow-up evaluation conducted at least every three months during Opioid Therapy documented in the medical record	None	Patients who were in hospice at any time during the performance period: M1022	Patients aged ≥ 18 years on date of encounter **AND** Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **AND** Patients prescribed opiates for longer than six weeks: G9561	Patients who had a follow-up evaluation conducted at least every three months during opioid therapy (G9562)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
412	Documentation of Signed Opioid Treatment Agreement	All patients 18 and older prescribed opiates for longer than six weeks duration who signed an opioid treatment agreement at least once during Opioid Therapy documented in the medical record		Patients who were in hospice at any time during the performance. All G-codes have been used. This is correctly written as M-code period: M1025	Patients aged ≥ 18 years on date of encounter **AND** Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212,99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **AND** Patients prescribed opiates for longer than six weeks: G9577	Documentation of signed opioid treatment agreement at least once during opioid therapy (G9578)	Measure Type: Process Number of Performance Rates:1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
431	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	Percentage of patients aged 18 years and older who were screened for unhealthy alcohol use using a systematic screening method at least once within the last 24 months **AND** who received brief counseling if identified as an unhealthy alcohol user	Documentation of medical reason(s) for not screening for unhealthy alcohol use (e.g., limited life expectancy, other medical reasons) (G9623)	None	Patients aged ≥ 18 years **AND** At least two patient encounters during the performance period (CPT or HCPCS): 90791, 90792, 90832, 90834, 90837, 90845, 96150, 96151, 96152, 97165, 97166, 97167, 97168, 97802, 97803, 97804, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, G0270, G0271 WITHOUT Telehealth Modifier: GQ, GT, 95, POS 02 **OR** At Least One Preventive Visit during the performance period (CPT or HCPCS): 96160, 96161, 99385*, 99386*, 99387*, 99395*, 99396*, 99397*, 99401*, 99402*, 99403*, 99404*, 99411*, 99412*, 99429*, G0438, G0439 WITHOUT	Patient identified as an unhealthy alcohol user when screened for unhealthy alcohol use using a systematic screening method and received brief counseling (G9621) **OR** Patient not identified as an unhealthy alcohol user when screened for unhealthy alcohol use using a systematic screening method (G9622)	Measure Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					Telehealth Modifier: GQ, GT, 95, POS 02		
450	Trastuzumab Received by Patients with AJCC Stage I (T1c) - III and HER2 Positive Breast Cancer Receiving Adjuvant Chemotherapy	Percentage of female patients (aged 18 years and older) with AJCC stage I (T1c) – III, human epidermal growth factor receptor 2 (HER2) positive breast cancer receiving adjuvant chemotherapy who are also receiving Trastuzumab	Reason for not administering Trastuzumab documented (e. g. patient declined, patient died, patient transferred, contraindication or other clinical exclusion, neoadjuvant chemotherapy or radiation NOT complete) (G9836)	Patient transfer to practice after initiation of chemotherapy: G9833 OR Patient has metastatic disease at diagnosis: G9834	Female Patients aged ≥ 18 years on date of encounter **AND** Diagnosis of breast cancer (ICD-10-CM): C50. 011, C50. 012, C50. 019, C50. 111, C50. 112, C50. 119, C50. 211, C50. 212, C50. 219, C50. 311, C50. 312, C50. 319, C50. 411, C50. 412, C50. 419, C50. 511, C50. 512, C50. 519, C50. 611, C50. 612, C50. 619, C50. 811, C50. 812, C50. 819, C50. 911, C50. 912, C50. 919 **AND** Patient encounter during performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 **AND**	Trastuzumab administered within 12 months of diagnosis (G9835)	Measure Type: Process Number of Performance Rates:1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A Measure

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					Two or more encounters at the reporting site **AND** Breast Adjuvant Chemotherapy administered: G9829 **AND** HER-2/neu positive: G9830 **AND** AJCC stage at breast cancer diagnosis = II or III: G9831 **OR** AJCC stage at breast cancer diagnosis = I (IA or IB) and T-Stage at breast cancer diagnosis does NOT equal = T1, T1a, T1b: G9832		
451	KRAS Gene Mutation Testing Performed for Patients with Metastatic Colorectal Cancer who receive Anti-Epidermal Growth Factor	Percentage of adult patients (aged 18 or over) with metastatic colorectal cancer who receive anti-epidermal growth factor receptor monoclonal antibody therapy for whom KRAS gene mutation	None	None	Patients aged ≥ 18 years on date of encounter **AND** Diagnosis of Initial colon or rectal cancer (ICD-10 CM): C18.0, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20 **AND**	RAS (KRAS and NRAS) gene mutation testing performed before initiation of anti-EGFR MoAb (G9840)	Type: Process Number of Performance Rates:1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
	Receptor (EGFR) Monoclonal Antibody Therapy	testing was performed.			Patient Encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 **AND** Two or more encounters at the reporting site **AND** Patient has metastatic disease at diagnosis: G9838 **AND** Anti-EGFR monoclonal antibody therapy: G9839		

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
452	Patients with Metastatic Colorectal Cancer and KRAS Gene Mutation Spared Treatment with Anti-Epidermal Growth Factor Receptor (EGFR) Monoclonal Antibodies	Percentage of adult patients (aged 18 or over) with metastatic colorectal cancer and KRAS gene mutation spared treatment with anti-EGFR monoclonal antibodies	None	None	Patients aged ≥ 18 years on date of encounter **AND** Diagnosis of colon or rectal cancer (ICD-10 CM): C18.0, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20 **AND** Patient encounter during the performance period: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 **AND** Two or more encounters at the reporting site **AND** Patient has metastatic disease at diagnosis: G9842 **AND** RAS (KRAS or NRAS) gene mutation: G9843	Patient did not receive anti-EGFR monoclonal antibody therapy ((Anti-EGFR monoclonal antibody- cetuximab or panitumumab) G9844)	Type: Process Number of Performance Rates: 1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
453	Percentage of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life **(Lower score - Better)**	Percentage of patients who died from cancer receiving chemotherapy in the last 14 days of life **(Lower score - Better)**	None	None	Diagnosis of cancer **AND** Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 **AND** Two or more encounters at the reporting site **AND** Patients who died from cancer: G9846	Patient received chemotherapy in the last 14 days of life (G9847)	Type: Process Number of Performance Rates:1 Inverse Status: Yes Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A
457	Percentage of Patients Who Died from Cancer Admitted to Hospice for Less than 3 days **(Lower score - Better)**	Percentage of patients who died from cancer, and admitted to hospice and spent less than 3 days there **(Lower score - Better)**	None		Diagnosis of cancer **AND** Patient encounter(s) during performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215 **AND** Two or more encounters at the reporting site **AND** Patient enrolled in hospice: G9858	Patient spent less than three days in hospice care (G9860)	Type: Outcome Number of Performance Rates:1 Inverse Status: Yes Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A

QOPI® REPORTING REGISTRY 2020

QR AND QCDR MEASURE SPECIFICATIONS

Measure #	Measure Title	Measure Description	Denominator Exceptions	Denominator Exclusion	Denominator	Numerator	Measure Details
					AND Patients who died from cancer: G9859		
462 (EHR only)	Bone Density Evaluation for Patients with Prostate Cancer and Receiving Androgen Therapy	Patients determined as having prostate cancer who are currently starting or undergoing androgen deprivation therapy) ADT), for an anticipated period of 12 months or greater and who receive an annual bone density evaluation. The bone density evaluation must be prior to the start of ADT or within 3 months of the start of ADT.	None	None	Patients determined as having prostate cancer who are currently starting or undergoing androgen deprivation therapy (ADT), for an anticipated period of 12 months or greater	Patients with a bone density evaluation within the two years prior to the start of or less than three months after the start of ADT Treatment	Type: Process Number of Performance Rates:1 Inverse Status: No Proportional, CV, Ratio Status: Proportional Risk Adjusted, if applicable: N/A