

Non-QPP Measures

#	Measure ID	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
1	AQUA8	Hospital Admissions or Infectious Complications Within 30 days of Prostate Biopsy	Percentage of patients with urinary retention, infection, inpatient consultation, or hospital admission for infection or sepsis within 30 days of undergoing a prostate biopsy	Yes	Outcome	Yes	N/A
2	AQUA14	Stones: Repeat Shock Wave Lithotripsy (SWL) Within 6 Months of Initial Treatment	Percentage of patients who underwent repeat Shock Wave Lithotripsy within 6 months of initial procedure	Yes	Outcome	Yes	N/A
3	AQUA15	Stones: Urinalysis or Urine Culture Performed Before Surgical Stone Procedures	Percentage of patients with a documented urinalysis or urine culture within 14 days prior to surgical stone procedures	Yes	Process	Yes	N/A
4	AQUA16	Non-Muscle Invasive Bladder Cancer: Repeat Transurethral Resection of Bladder Tumor (TURBT) for T1 disease	Percentage of patients with T1 disease who had a second transurethral resection of bladder tumor (TURBT) within 6 weeks of the initial TURBT	No	Process	No	N/A
5	AQUA26	Benign Prostate Hyperplasia (BPH): Inappropriate Lab & Imaging Services for Patients with BPH	Percentage of patients with initial diagnosis of BPH who had a creatinine lab order placed or had a CT abdomen, MRI abdomen, ultrasound abdomen ordered or performed	Yes	Process	Yes	N/A
6	AQUA35	Non-Muscle Invasive Bladder Cancer: Initial Management/Surveillance for Non-Muscle Invasive Bladder Cancer	Percentage of patients with appropriate initial management/surveillance after initial diagnosis of non-muscle invasive bladder cancer	No (new in 2024: possible 7-point floor)	Process	No	N/A

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.



Non-QPP Measures

#	Measure ID	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
7	AQUA36	Prostate Cancer: Confirmation Biopsy in Newly Diagnosed Patients on Active Surveillance	Percentage of newly diagnosed low risk patients on active surveillance who receive confirmation testing within 24 months of diagnosis	No (new in 2024: possible 7-point floor)	Process	No	N/A
8	MUSIC4 [‡]	Prostate Cancer: Active Surveillance/Watchful Waiting for Newly Diagnosed Low Risk Prostate Cancer Patients	Proportion of patients newly diagnosed with low-risk prostate cancer managed with active surveillance or watchful waiting	No	Process	Yes	N/A

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

^{*}Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
9	1	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)	Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c>9.0% during the measurement period	Yes	Intermediate Outcome	Yes	N/A
10	eQIM* CMS122v12			Yes			
11	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	Yes	Process	Yes	Advancing Cancer Care
12	48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	Percentage of female patients aged 65 years and older who were assessed for the presence or absence of urinary incontinence within 12 months	Yes	Process	No	Focusing on Women's Health
13	50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	Percentage of female patients aged 65 years and older with a diagnosis of urinary incontinence with a documented plan of care for urinary incontinence at least once within 12 months	Yes	Process	Yes	N/A

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
14	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 who did not have a bone scan performed at any time since diagnosis of prostate cancer	No	Process	Yes	N/A
15	eCQM* CMS129v13			No			
16	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	No	Process	No	N/A
17	130	Documentation of Current Medications in the Medical Record	Percentage of visits for patients aged 18 years and older for which the eligible clinician attests to documenting a list of current medications using all immediate resources available on the date of the encounter	Yes	Process	Yes	N/A
18	eCQM* CMS68v13			Yes			

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
19	134	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Percentage of patients aged 12 years and older screened for depression on the date of the encounter or up to 14 days prior to 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 or up to two days after the date of the qualifying encounter	Yes	Process	No	Advancing Cancer Care; Focusing on Women's Health
20	eCQM* CMS2v13			No			
21	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	Yes	Process	Yes	Advancing Cancer Care
22	eCQM* CMS157v12			Yes			
23	144	Oncology: Medical and Radiation - Plan of Care for Pain	Percentage of visits for patients, regardless of age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy who report having pain with a documented plan of care to address pain	Yes	Process	Yes	Advancing Cancer Care

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
24	226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 12 years and older who were screened for tobacco use one or more times within the measurement period AND who received tobacco cessation intervention during the measurement period or in the six months prior to the measurement period if identified as a tobacco user	Yes	Process	No	Focusing on Women's Health
25	eCQM* CMS138v12			Yes			
26	236	Controlling High Blood Pressure	Percentage of patients 18-85 years of age who had a diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period, and whose most recent blood pressure was adequately controlled (<140/90mmHg) during the measurement period	Yes	Intermediate Outcome	Yes	N/A
27	eCQM* CMS165v12			No			

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
28	238	Use of High-Risk Medications in Older Adults	Percentage of patients 65 years of age and older who were ordered at least two high-risk medications from the same drug class	No	Process	Yes	N/A
29	eCQM* CMS156v12			No			
30	317	Preventive Care and Screening: Screening for High Blood Pressure and Follow-up Documented	Percentage of patient visits for patients aged 18 years and older seen during the measurement period who were screened for high blood pressure AND a recommended follow-up plan is documented, as indicated, if blood pressure is elevated or hypertensive	Yes	Process	No	N/A
31	eCQM* CMS22v12			Yes			
32	318 eCQM* CMS139v12 version only	Falls: Screening for Future Fall Risk	Percentage of patients 65 years of age and older who were screened for future fall risk during the measurement period	Yes	Process	Yes	N/A
33	357	Surgical Site Infection (SSI)	Percentage of patients aged 18 years and older who had a surgical site infection (SSI)	Yes	Outcome	Yes	N/A

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
34	358	Patient-Centered Surgical Risk Assessment and Communication	Percentage of patients who underwent a non-emergency surgery who had their personalized risks of postoperative complications assessed by their surgical team prior to surgery using a clinical data-based, patient-specific risk calculator and who received personal discussion of those risks with the surgeon	Yes	Process	Yes	N/A
35	370	Depression Remission at Twelve Months	The percentage of adolescent patients 12 to 17 years of age and adult patients 18 years of age or older with major depression or dysthymia who reached remission 12 months (+/- 60 days) after an index event date	No	Outcome	Yes	N/A
36	eCQM* CMS159v12			Yes			
37	374	Closing the Referral Loop: Receipt of Specialist Report	Percentage of patients with referrals, regardless of age, for which the referring clinician receives a report from the clinician to whom the patient was referred	No	Process	Yes	N/A
38	eCQM* CMS50v12			Yes			
39	422	Performing Cystoscopy at the Time of Hysterectomy for Pelvic Organ Prolapse to Detect Lower Urinary Tract Injury	Percentage of patients who undergo cystoscopy to evaluate for lower urinary tract injury at the time of hysterectomy for pelvic organ prolapse	No	Process	Yes	Focusing on Women's Health

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
40	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 12 months AND who received brief counseling if identified as an unhealthy alcohol user	No	Process	No	Focusing on Women's Health
41	432	Proportion of Patients Sustaining a Bladder Injury at the Time of any Pelvic Organ Prolapse Repair	Percentage of patients undergoing pelvic organ prolapse repairs who sustain an injury to the bladder recognized either during or within 30 days after surgery	No	Outcome	Yes	Focusing on Women's Health
42	433	Proportion of Patients Sustaining a Bowel Injury at the time of any Pelvic Organ Prolapse Repair	Percentage of patients undergoing surgical repair of pelvic organ prolapse that is complicated by a bowel injury at the time of index surgery that is recognized intraoperatively or within 30 days after surgery	No	Outcome	Yes	N/A
43	453	Percentage of Patients who Died from Cancer Receiving Systemic Cancer-Directed Therapy in the Last 14 Days of Life (lower score – better)	Percentage of patients who died from cancer receiving systemic cancer-directed therapy in the last 14 days of life	Yes	Process	Yes	Advancing Cancer Care

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
44	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	Yes	Outcome	Yes	Advancing Cancer Care
45	462 <i>eCQM*</i> <i>CMS645v7</i> <i>version only</i>	Bone Density Evaluation for Patients with Prostate Cancer and Receiving Androgen Deprivation Therapy	Percentage of 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 initial bone density evaluation. The bone density evaluation must be prior to the start of ADT or within 3 months of the start of ADT	No	Process	No	Advancing Cancer Care
46	476 <i>eCQM*</i> <i>CMS771v5</i> <i>version only</i>	Urinary Symptom Score Change 6-12 Months After Diagnosis of Benign Prostatic Hyperplasia	Percentage of patients with an office visit within the measurement period and with a new diagnosis of clinically significant Benign Prostatic Hyperplasia who have International Prostate Symptom Score (IPSS) or American Urological Association (AUA) Symptom Index (SI) documented at the time of diagnosis and again 6-12 months later with an improvement of 3 points	No	Patient-Reported Outcome-Based Performance Measure	Yes	N/A

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
47	481 eCQM* <i>CMS646v4</i> version only	Intravesical Bacillus-Calmette-Guerin for Non-muscle Invasive Bladder Cancer	Percentage of patients initially diagnosed with non-muscle invasive bladder cancer and who received intravesical Bacillus-Calmette-Guerin (BCG) within 6 months of bladder cancer staging	No	Process	Yes	N/A
48	483	Person-Centered Primary Care Measure Patient Reported Outcome Performance Measure (PCPCM PRO-PM)	The Person-Centered Primary Care Measure Patient Reported Outcome Performance Measure (PCPCM PRO-PM) uses the PCPCM Patient Reported Outcome Measure (PROM) a comprehensive and parsimonious set of 11 patient-reported items - to assess the broad scope of primary care. Unlike other primary care measures, the PCPCM PRO-PM measures the high value aspects of primary care based on a patient's relationship with the clinician or practice.	No	Patient-Reported Outcome-Based Performance Measure	Yes	N/A
49	487	Screening for Social Drivers of Health	Percent of patients 18 years and older screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety	No (new in 2023: possible 5-point floor)	Process	Yes	Advancing Cancer Care; Focusing on Women's Health

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
50	488	Kidney Health Evaluation	Percentage of patients aged 18-75 years with a diagnosis of diabetes who received a kidney health evaluation defined by an Estimated Glomerular Filtration Rate (eGFR) AND Urine Albumin-Creatinine Ratio (uACR) within the measurement period	No (new in 2023: possible 5-point floor)	Process	No	N/A
51	eCQM* CMS951v2			No (new in 2023: possible 5-point floor)			
52	490	Appropriate Intervention of Immune-Related Diarrhea and/or Colitis in Patients Treated with Immune Checkpoint Inhibitors	Percentage of patients, aged 18 years and older, with a diagnosis of cancer, on immune checkpoint inhibitor therapy, and grade 2 or above diarrhea and/or grade 2 or above colitis, who have immune checkpoint inhibitor therapy held and corticosteroids or immunosuppressants prescribed or administered	No (new in 2023: possible 5-point floor)	Process	No	Advancing Cancer Care

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
53	493	Adult Immunization Status	Percentage of patients 19 years of age and older who are up-to-date on recommended routine vaccines for influenza; tetanus and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap); zoster; and pneumococcal	No (new in 2023: possible 5- point floor)	Process	No	Focusing on Women's Health
54	497	Preventive Care and Wellness (Composite)	Percentage of patients who received age- and sex-appropriate preventive screenings and wellness services. This measure is a composite of seven component measures that are based on recommendations for preventive care by the U.S. Preventive Services Task Force (USPSTF), Advisory Committee on Immunization Practices (ACIP), American Association of Clinical Endocrinology (AACE), and American College of Endocrinology (ACE).	No (new in 2024: possible 7- point floor)	Process	No	N/A

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.

QPP Measures

#	QPP #	Measure Title	Definition	Historical Benchmark [†]	Type	High Priority Measure	Included in Supported MVPs
55	498	Connection to Community Service Provider	Percent of patients 18 years or older who screen positive for one or more of the following health-related social needs (HRSNs): food insecurity, housing instability, transportation needs, utility help needs, or interpersonal safety; and had contact with a Community Service Provider (CSP) for at least one of their HRSNs within 60 days after screening	No (new in 2024: possible 7-point floor)	Process	Yes	N/A
56	503	Gains in Patient Activation Measure (PAM) Scores at 12 Months	The Patient Activation Measure [®] (PAM [®]) is a 10- or 13-item questionnaire that assesses an individual’s knowledge, skills, and confidence for managing their health and health care. The measure assesses individuals on a 0-100 scale that converts to one of four levels of activation, from low (1) to high (4). The PAM [®] performance measure (PAM [®] -PM) is the change in score on the PAM [®] from baseline to follow-up measurement.	No (new in 2024: possible 7-point floor)	Patient-Reported Outcome-based Performance Measure	Yes	Advancing Cancer Care

[†]Based on 1/25/2024 benchmark file from CMS for PY2024

*Electronic Clinical Quality Measure

[‡]©2011 The Regents of the University of Michigan. Original MUSIC measure developed by the University of Michigan as part of the Michigan Urological Surgery Improvement Collaborative. All Rights Reserved.