

QUALITY ID	MEASURE NAME	MEASURE DESCRIPTION	PERFORMANCE MET CODES	EXCLUSION CODES	PERFORMANCE NOT MET CODES	NQS DOMAIN	MEASURE TYPE	HIGH PRIORITY MEASURE	DATA SUBMISSION METHOD
145	Radiology: Exposure Dose or Time Reported for Procedures Using Fluoroscopy	Final reports for procedures using fluoroscopy that document radiation exposure indices, or exposure time and number of fluorographic images (if radiation exposure indices are not available)	G9500 - Radiation exposure indices, OR exposure time and number of fluorographic images in final report for procedures using fluoroscopy, documented	N/A	G9501 - Radiation exposure indices, OR exposure time and number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given	Patient Safety	Process	Yes	Claims, Registry
146	Radiology: Inappropriate Use of Probably Benign” Assessment Category in Screening Mammograms”	Percentage of final reports for screening mammograms that are classified as probably benign” INVERSE MEASURE - A lower calculated performance rate for this measure indicates better clinical care or control.	3343F - Mammogram assessment category of “probably benign,” documented	N/A	3340F - Mammogram assessment category of “incomplete: need additional imaging evaluation,” documented OR 3341F - Mammogram assessment category of “negative,” documented OR 3342F - Mammogram assessment category of “benign,” documented OR 3344F - Mammogram assessment category of “suspicious”, documented OR 3345F - Mammogram assessment category “highly suggestive of malignancy”, documented OR 3350F - Mammogram assessment category of “known biopsy proven malignancy”, documented	Efficiency and Cost Reduction	Process	Yes	Claims, Registry
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	Percentage of final reports for all patients, regardless of age, undergoing bone scintigraphy that include physician documentation of correlation with existing relevant imaging studies (e.g., x-ray, MRI, CT, etc.) that were performed	3570F - Final report for bone scintigraphy study includes correlation with existing relevant imaging studies (eg, x- ray, MRI, CT) corresponding to the same anatomical region in question	3570F-3P - Documentation of system reason(s) for not documenting correlation with existing relevant imaging studies in final report (eg, no existing relevant imaging study available, patient did not have a previous relevant imaging study)	3570F-8P - Bone scintigraphy report not correlated in the final report with existing relevant imaging studies, reason not otherwise specified	Communication and Care Coordination	Process	Yes	Claims, Registry
195	Radiology: Stenosis Measurement in Carotid Imaging Reports	Percentage of final reports for carotid imaging studies (neck magnetic resonance angiography [MRA], neck computed tomography angiography [CTA], neck duplex ultrasound, carotid angiogram) performed that include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement	3100F - Carotid imaging study report (includes direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement)	N/A	3100F-8P - Carotid imaging study report did not include direct or indirect reference to measurements of distal internal carotid diameter as the denominator for stenosis measurement, reason not otherwise specified	Effective Clinical Care	Process	No	Claims, Registry
225	Radiology: Reminder System for Screening Mammograms	Percentage of patients undergoing a screening mammogram whose information is entered into a reminder system with a target due date for the next mammogram	7025F - Patient information entered into a reminder system with a target due date for the next mammogram	7025F-1P - Documentation of medical reason(s) for not entering patient information into a reminder system (eg, further screening mammograms are not indicated, such as patients with a limited life expectancy, other medical reason(s))	7025F-8P - Patient Information not entered into a reminder system, reason not otherwise specified	Communication and Care Coordination	Structure	Yes	Claims, Registry
405	Appropriate Follow-up Imaging for Incidental Abdominal Lesions	Percentage of final reports for abdominal imaging studies for asymptomatic patients aged 18 years and older with one or more of the following noted incidentally with follow-up imaging recommended: Liver lesion <= 0.5 cm Cystic kidney lesion < 1.0 cm Adrenal lesion <= 1.0 cm INVERSE MEASURE - A lower calculated performance rate for this measure indicates better clinical care or control.	G9548 - Final reports for abdominal imaging studies with follow- up imaging recommended AND G9547 - Incidental finding: Liver lesion ≤ 0.5 cm, Cystic kidney lesion < 1.0 cm or Adrenal lesion ≤ 1.0 cm	G9551 - Final reports for abdominal imaging studies without an incidentally found lesion noted: Liver lesion ≤ 0.5 cm, Cystic kidney lesion < 1.0 cm or Adrenal lesion ≤ 1.0 cm noted or no lesion found OR G9549 - Documentation of medical reason(s) that follow-up imaging is indicated (e.g., patient has a known malignancy that can metastasize, other medical reason(s) such as fever in an immunocompromised patient) AND G9547 - Incidental finding: Liver lesion ≤ 0.5 cm, Cystic kidney lesion < 1.0 cm or Adrenal lesion ≤ 1.0 cm	G9550 - Final reports for abdominal imaging studies with follow-up imaging not recommended AND G9547 - Incidental finding: Liver lesion ≤ 0.5 cm, Cystic kidney lesion < 1.0 cm or Adrenal lesion ≤ 1.0 cm	Effective Clinical Care	Process	Yes	Claims, Registry
406	Appropriate Follow-up Imaging for Incidental Thyroid Nodules in Patients	Percentage of final reports for computed tomography (CT), CT angiography (CTA) or magnetic resonance imaging (MRI) or magnetic resonance angiogram (MRA) studies of the chest or neck or ultrasound of the neck for patients aged 18 years and older with no known thyroid disease with a thyroid nodule < 1.0 cm noted incidentally with follow-up imaging recommended INVERSE MEASURE - A lower calculated performance rate for this measure indicates better clinical care or control.	G9554 - Final reports for CT, CTA, MRI or MRA of the chest or neck or ultrasound of the neck with follow-up imaging recommended AND G9552 - Incidental Thyroid Nodule < 1.0 cm noted in report	G9557 - Final reports for CT, CTA, MRI or MRA studies of the chest or neck or ultrasound of the neck without an incidentally found thyroid nodule < 1.0 cm noted or no nodule found OR G9555 - Documentation of medical reason(s) for recommending follow-up imaging (e.g., patient has multiple endocrine neoplasia, patient has cervical lymphadenopathy, other medical reason(s)) AND G9552 - Incidental Thyroid Nodule < 1.0 cm noted in report	G9556 - Final reports for CT, CTA, MRI or MRA of the chest or neck or ultrasound of the neck with follow-up imaging not recommended AND G9552 - Incidental Thyroid Nodule < 1.0 cm noted in report	Effective Clinical Care	Process	Yes	Claims, Registry
436	Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques	Percentage of final reports for patients aged 18 years and older undergoing CT with documentation that one or more of the following dose reduction techniques were used: Automated exposure control, Adjustment of the mA and/or kV according to patient size, Use of iterative reconstruction technique	G9637 - Final reports with documentation of one or more dose reduction techniques (e.g., Automated exposure control, adjustment of the mA and/or kV according to patient size, use of iterative reconstruction technique)	N/A	G9638 - Final reports without documentation of one or more dose reduction techniques (e.g., Automated exposure control, adjustment of the mA and/or kV according to patient size, use of iterative reconstruction technique)	Effective Clinical Care	Process	No	Claims, Registry