

2024 QCDR Measure IDs	Measure Title	Measure Description	Denominator	Numerator	Denominator Exclusions	Denominator Exceptions	Numerator Exclusions	CBE ID Number	High Priority Measure	High Priority Type	Measure Type	Includes Telehealth ?	Inverse Measure	Proportional Measure	Number of performance rates to be calculated and submitted	Risk-Adjusted Status	MIPS Reporting Options	Care Setting
OEIS6	Appropriate non-invasive arterial testing for patients with intermittent claudication who are undergoing a LE peripheral vascular intervention	Proportion of patients with non-invasive evaluations present/available prior to LE peripheral vascular interventions in patients with intermittent claudication.	All patients aged 18 years and older with an encounter during the reporting interval AND PAD with intermittent claudication (Rutherford Classes 1,2,3).	Patients in the denominator that received one of the following examinations: ABI/TBI arterial duplex ultrasound, Lower Extremity Magnetic Resonance Angiography, Lower Extremity Computed Tomographic Angiography; in the 12 months prior to the most recent Lower Extremity Procedure Includes: iliac, common femoral artery, superficial femoral artery, popliteal and tibial artery, peroneal artery, tibioperoneal trunk and pedal artery percutaneous transluminal angioplasty stenting, atherectomy, drug coated balloon, drug eluting stent.	Patient Reason(s): Patient refuses to participate in the non-invasive exam OR, Medical Reason(s).	None	None	N/A	No	N/A	Process	No	No	Yes	1	No	Traditional MIPS	Ambulatory Care; Clinician Office/Clinic; Ambulatory Surgical Center; Office Based Surgery Center; Outpatient Services
OEIS7	Structured Walking Program Prior to Intervention for Claudication	Proportion of patients who completed a structured walking program of a duration not less than 12 weeks prior to undergoing peripheral arterial intervention in patients with claudication	All patients with an encounter during the reporting interval and PAD with symptoms of claudication (i.e. Rutherford Classes 1,2, or 3).	Patients in the denominator with documentation of participation in a structured walking program for no less than 12 weeks prior to undergoing intervention for claudication.	Any patient who has a diagnosis of CLI in the ipsilateral limb (i.e. Rutherford 4,5, or 6) and/or distal embolization at the time of or prior to intervention for claudication. Any patient with claudication so severe it precludes reasonable participation in a walking program (i.e. Claudication at less than 50 ft).	None	None	N/A	Yes	Efficiency	Process	No	No	Yes	1	No	Traditional MIPS	Ambulatory Care; Clinician Office/Clinic; Ambulatory Surgical Center; Office Based Surgery Center; Outpatient Services
OEIS8	Use of ultrasound guidance for vascular access	Proportion of vascular access using ultrasound guidance for vessel puncture during endovascular procedures.	Count of all vessel punctures made for access in patients undergoing arterial endovascular procedures during the reporting period.	Vessel access punctures in the denominator where ultrasound guidance was used to perform the puncture.	None	None	None	N/A	Yes	Patient Safety	Process	No	No	Yes	1	No	Traditional MIPS	Ambulatory Care; Clinician Office/Clinic; Ambulatory Surgical Center; Office Based Surgery Center; Outpatient Services