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<th>Measure Title</th>
<th>ID</th>
<th>Decile 1</th>
<th>Decile 2</th>
<th>Decile 3</th>
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<th>Decile 5</th>
<th>Decile 6</th>
<th>Decile 7</th>
<th>Decile 8</th>
<th>Decile 9</th>
<th>Decile 10</th>
<th>Seven Point Cap?</th>
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<tr>
<td>Barrett's Esophagus</td>
<td>QID 249</td>
<td>96.25 - 99.99</td>
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<td>Radical Prostatectomy Pathology Reporting</td>
<td>QID 250</td>
<td>97.78 - 99.99</td>
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<td>Lung Cancer Reporting (Biopsy/Cytology Specimens)</td>
<td>QID 395</td>
<td>88.03 - 99.99</td>
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<td>Lung Cancer Reporting (Resection Specimens)</td>
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<td>Melanoma Reporting</td>
<td>QID 397</td>
<td>41.33 - 99.99</td>
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<td>Skin Cancer: Biopsy Reporting Time - Pathologist to Clinician</td>
<td>QID 440</td>
<td>71.05 - 96.73</td>
<td>96.74 - 98.98</td>
<td>98.99 - 99.73</td>
<td>99.74 - 99.99</td>
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**NOTES:** For all QID measures, Decile 10 is 7 points not 10 points. Any measure not listed here could earn a performance period benchmark; these benchmarks are only available after all data has been submitted to CMS and processed, generally the summer after the performance year.

**SOURCE:** [2023 MIPS Performance Period Benchmarks](#) available in the QPP Resource Library.