



2024 MIPS CLAIMS-BASED DATA REPORTING

If you are in a small practice (15 clinicians or fewer), you can report on a quality measures data via claims for the Merit-based Incentive Payment System(MIPS) under the Quality Payment Program (QPP) in 2024. Use the information below to help you use the claims-based option for reporting quality measures.

Claims-based Reporting 2024 Update

Medicare Part B claims measures (QPP measures) can only be submitted via claims reporting by clinicians in a small practice, whether participating individually or as a group. If you are in a group of 16 or more, whether submitting as an individual or a group, you cannot submit quality measures using claims and must submit via your health IT vendor, or using a Qualified Registry or Qualified Clinical Data Registry (QCDR). The Pathologists Quality Registry is a CMS-approved QCDR.

The Medicare Part B Claims Measures for Pathologists

The CAP lists the Medicare Part B claims measures with their description, when the measure is applicable, denominator criteria instructions, and instructions on how to report quality activities on the CAP website.

- 1. Barrett's Esophagus Pathology Reporting
2. Radical Prostatectomy Pathology Reporting
3. Lung Cancer Reporting (biopsy/cytology specimens)*
4. Lung Cancer Reporting (resection specimens)*
5. Melanoma Reporting*

*High priority measures

Note: Many measures available in the Pathologists Quality Registry cannot be reported through claims. For a complete list of measures in the registry, see the Quality Measures webpage.

Example of a Claims-Based Report

The following example reports the Lung Cancer Reporting (Biopsy/Cytology Specimens) measure on a claim. For the measure's denominator, the diagnosis for primary non-small cell lung cancer is indicated in field 21 of the form and the CPT code for tissue exam by pathologist in line 1 of field 24. For the measure's numerator, the quality measure code is reported in line 2 to indicate performance was met.