

# Quality Payment PROGRAM



## **Merit-based Incentive Payment System (MIPS) Value Pathways (MVP) Candidate 2026 Performance Year Pathology**

## MVP Candidate Feedback Process

The MVP Candidate Feedback Process is an opportunity for the general public to participate in the MVP development process and provide feedback on MVP candidates before they're potentially proposed in rulemaking. Learn more about the [MVP Candidate Feedback Process](#) on the Quality Payment Program (QPP) website.

Note: This document is for 2026 MVP Candidate Feedback only and shouldn't be used as a reference for reporting MVPs in the 2025 performance year.

## MVP Candidate Feedback Instructions

Review the measures and activities included in [TABLE 1: Pathology MVP](#) below.

**MVP candidate feedback should be submitted to [PIMMSMVPsupport@gdit.com](mailto:PIMMSMVPsupport@gdit.com) for Centers for Medicare & Medicaid Services (CMS) consideration between December 11, 2024, and 11:59 p.m. ET on January 24, 2025.**

Please include the following information in the email:

- **Subject Line:** Draft 2026 MVP Candidate Feedback
- **Email Body:** Your feedback for consideration and public posting. Please indicate the MVP name to which your feedback relates.

CMS will post feedback received and considered relevant to a draft 2026 MVP candidate at [MVP Candidate Feedback Process](#) in February 2025.

**TABLE 1: Pathology MVP**

Quality	Improvement Activities	Cost
<p><b>Q249: Barrett’s Esophagus</b> (Collection Type: Medicare Part B Claims, MIPS CQM)</p>	<p><b>IA_AHE_3: Promote Use of Patient-Reported Outcome Tools</b></p>	<p><b>MSPB_1: Medicare Spending Per Beneficiary (MSPB) Clinician</b></p>
<p><b>Q250: Radical Prostatectomy Pathology Reporting</b> (Collection Type: Medicare Part B Claims, MIPS CQM)</p>	<p><b>IA_AHE_10: Adopt Certified Health Information Technology for Security Tags for Electronic Health Record Data</b></p>	
<p><b>Q395: Lung Cancer Reporting (Biopsy/Cytology Specimens)</b> (Collection Type: Medicare Part B Claims, MIPS CQM) High Priority</p>	<p><b>IA_AHE_12: Practice Improvements that Engage Community Resources to Address Drivers of Health</b></p>	
<p><b>Q396: Lung Cancer Reporting (Resection Specimens)</b> (Collection Type: Medicare Part B Claims, MIPS CQM) High Priority</p>	<p><b>IA_BE_6: Regularly Assess Patient Experience of Care and Follow Up on Findings</b></p>	
<p><b>Q397: Melanoma Reporting</b> (Collection Type: Medicare Part B Claims, MIPS CQM) High Priority</p>	<p><b>IA_BE_15: Engagement of Patients, Family, and Caregivers in Developing a Plan of Care</b></p>	
<p><b>Q440: Skin Cancer: Biopsy Reporting Time – Pathologist to Clinician</b> (Collection Type: MIPS CQM) High Priority</p>	<p><b>IA_BE_12: Promoting Clinician Well-Being</b></p>	
<p><b>Q491: Mismatch Repair (MMR) or Microsatellite Instability (MSI) Biomarker Testing Status</b> (Collection Type: MIPS CQM) High Priority</p>	<p><b>IA_CC_9: Implementation of practices/processes for developing regular individual care plans</b></p>	
<p><b>CAP30: Urinary Bladder Cancer: Complete Analysis and Timely Reporting</b> (Collection Type: QCDR) High Priority</p>	<p><b>IA_CC_12: Care coordination agreements that promote improvements in patient tracking across settings</b></p>	
<p><b>CAP34: Molecular Assessment: Biomarkers in Non-Small Cell Lung Cancer</b> (Collection Type: QCDR) High Priority</p>	<p><b>IA_MVP: Practice-Wide Quality Improvement in MIPS Value Pathways</b></p>	
<p><b>CAP40: Squamous Cell Skin Cancer: Complete Reporting</b> (Collection Type: QCDR) High Priority</p>	<p><b>IA_PCMH: Electronic submission of Patient Centered Medical Home accreditation</b></p>	
<p><b>CAP41: Basal Cell Skin Cancer: Complete Reporting</b> (Collection Type: QCDR) High Priority</p>	<p><b>IA_PM_26: Vaccine Achievement for Practice Staff: COVID-19, Influenza, and Hepatitis B</b></p>	
	<p><b>IA_PSPA_1: Participation in an AHRQ-listed patient safety organization</b></p>	
	<p><b>IA_PSPA_2: Participation in MOC Part IV</b></p>	
	<p><b>IA_PSPA_12: Participation in private payer CPIA</b></p>	
	<p><b>IA_PSPA_13: Participation in Joint Commission Evaluation Initiative</b></p>	

**TABLE 1: Pathology MVP**

Quality	Improvement Activities	Cost
<p><b>QMM21: Incorporating results of concurrent studies into Final Reports for Bone Marrow Aspirate of patients with Leukemia, Myelodysplastic syndrome, or Chronic Anemia</b> (Collection Type: QCDR) High Priority</p>		
<p><b>QMM22: Molecular Testing Recommended on Fine Needle Aspirations (FNA) of Thyroid Nodule(s) with Bethesda Category 3 or 4 Cytology Diagnosis</b> (Collection Type: QCDR) High Priority</p>		
<p><b>QMM25: Use of Structured Reporting for Urine Cytology Specimens</b> (Collection Type: QCDR) High Priority</p>		
<p><b>QMM29: Use of Appropriate Classification System for Lymphoma Specimen</b> (Collection Type: QCDR) High Priority</p>		

**TABLE 2: Foundational Layer**

The foundational layer is the same for every MVP.

Foundational Layer	
Population Health Measures	Promoting Interoperability
<p><b>Q479: Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for the Merit-Based Incentive Payment Systems (MIPS) Eligible Clinician Groups</b> (Collection Type: Administrative Claims)</p> <p><b>Q484: Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions</b> (Collection Type: Administrative Claims)</p>	<ul style="list-style-type: none"> <li>• Security Risk Analysis</li> <li>• High Priority Practices Safety Assurance Factors for EHR Resilience Guide (SAFER Guide)</li> <li>• e-Prescribing</li> <li>• Query of Prescription Drug Monitoring Program (PDMP)</li> <li>• Provide Patients Electronic Access to Their Health Information</li> <li>• Support Electronic Referral Loops By Sending Health Information</li> </ul> <p>AND</p> <ul style="list-style-type: none"> <li>• Support Electronic Referral Loops By Receiving and Reconciling Health Information</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• Health Information Exchange (HIE) Bi-Directional Exchange</li> </ul> <p>OR</p> <ul style="list-style-type: none"> <li>• Enabling Exchange Under the Trusted Exchange Framework and Common Agreement (TEFCA)</li> <li>• Immunization Registry Reporting</li> <li>• Syndromic Surveillance Reporting (Optional)</li> <li>• Electronic Case Reporting</li> <li>• Public Health Registry Reporting (Optional)</li> <li>• Clinical Data Registry Reporting (Optional)</li> <li>• Actions to Limit or Restrict Compatibility or Interoperability of CEHRT</li> <li>• ONC Direct Review Attestation</li> </ul>