



2024 Medicare Advantage Measures At-A-Glance

Measure	Age	Description	CPT II Codes	Documentation Requirements
Controlling Blood Pressure (Triple Weighted)	18 - 85	Patients with hypertension whose most recent blood pressure of the year was < 140/90	Submit 2 CPT Codes: 3074F if systolic < 130 3075F if systolic 130-139 3077F if systolic ≥ 140 3078F if diastolic < 80 3079 if diastolic 80-89 3080F if diastolic ≥ 90	Document all blood pressures taken during the visit. Recheck BP if diastolic or systolic is > 140/90
Hemoglobin A1C Poor Control > 9 (Triple Weighted)	18 - 75	Patient with Type 1 or Type 2 diabetes whose most recent A1C result is > 9% during 2023. This indicates poor control. (Inverse measure- lower rates indicate better care)	3044F if < 7.0% 3051F if 7.0 to 7.9% 3052F if 8.0 to 8.9% 3046F if >9.0%	Latest A1C Lab report in 2023 OR Documented A1C result in progress note with date of test
Medication Adherence - Cholesterol (Triple Weighted)	18 years and Older	This measure identifies members who met the Proportion of Days Covered (PDC) threshold of 80 percent for statins during the Measurement Period.	N/A	This is a pharmacy claims only measure <ul style="list-style-type: none"> Consider writing 90-100 day prescriptions with 3 refills to help improve medication adherence when clinically appropriate Ensure the second refill date is on time. The patient will fall into the denominator with this fill, but the treatment begin date will be the date of the 1st fill.
Medication Adherence - Diabetes Medications (Triple Weighted)	18 years and Older	The proportion of members who met the Proportion of Days Covered (PDC) threshold of 80 percent for renin angiotensin aldosterone (RAS) agents during the Measurement Period.	N/A	This is a pharmacy claims only measure <ul style="list-style-type: none"> Consider writing 90-100 day prescriptions with 3 refills to help improve medication adherence when clinically appropriate Ensure the second refill date is on time. The patient will fall into the denominator with this fill, but the treatment begin date will be the date of the 1st fill.
Medication Adherence - Hypertension (Triple Weighted)	19 years and Older	The proportion of members who met the Proportion of Days Covered (PDC) threshold of 80 percent for renin angiotensin aldosterone (RAS) agents during the Measurement Period.	N/A	This is a pharmacy claims only measure <ul style="list-style-type: none"> Consider writing 90-100 day prescriptions with 3 refills to help improve medication adherence when clinically appropriate Ensure the second refill date is on time. The patient will fall into the denominator with this fill, but the treatment begin date will be the date of the 1st fill.
Breast Cancer Screening	40-74	40-74 years of age who had a mammogram to screen for breast cancer any time on or between October 1, 2022 and December 31, 2024.	N/A	Documentation in the medical record must include: <ul style="list-style-type: none"> Year of Test (month required if year is 2021) Type of Test Abnormal or Normal Findings OR Lab /Procedure Report in EHR

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Colorectal Cancer Screening	45-75	<p>One of the following:</p> <ul style="list-style-type: none"> • Colonoscopy during 2015-2024 • Flexible Sigmoidoscopy during 2020-2024 • CT Colonography during 2020-2024 • Stool DNA w FIT Test (Cologuard) during 2022-2024 • Fecal occult blood test (FOBT)/gFOBT (guaiac), FIT/iFOBT (immunochemical) during the current performance year 	N/A	<p>Documentation in the medical record must include:</p> <ul style="list-style-type: none"> • Year of Test • Type of Test • Abnormal or Normal Findings <p>OR Lab/Procedure Report in EHR</p>
Care of Older Adults - Medication Review	66 and Older	Percentage of adults who had a medication review by a clinical pharmacist or prescribing practitioner and the presence of a medication list in the medical record (signed and dated) or transitional care management services any time during 2024	<p>1159F and 1160F- medication list documented and review of all medications by a prescribing practitioner or clinical pharmacist documented – These codes must be on the same date of service</p> <p>99605, 99606, 90863, 99483, 1160F- Medication review</p>	<ul style="list-style-type: none"> • Medication list must be included in the medical record and the medication review must be completed by a prescribing provider or clinical pharmacist • A medication list signed and dated, in 2024, by the appropriate provider (prescribing provider or clinical pharmacist) meets numerator compliance • Notation within the medical record that the medications were reviewed • Notation that the patient is not taking medications meets compliance
Care of Older Adults - Pain Assessment	66 and Older	The percentage of adults who were assessed for pain anytime in 2024	<p>1125F- Pain Severity quantified, pain present</p> <p>1126F- Pain Severity quantified, no pain present</p>	<ul style="list-style-type: none"> • Documentation must include an assessment for pain anytime during 2024. The assessment may have positive or negative findings. • A standardized tool may be used to assess the patient's pain. • All documentation or tools used must contain the date the assessment was completed. • Pain assessment may be documented in the Review of Systems (ROS) and be related to a single body part, except for the chest
Diabetes Care - Eye Exam	18-75	<p>The percentage of patients with diabetes (type 1 or type 2) who had any one of the following:</p> <ul style="list-style-type: none"> • A retinal or dilated eye exam by an optometrist or ophthalmologist in 2024 • A negative retinal or dilated eye exam by an optometrist or ophthalmologist in 2023 • Bilateral eye enucleations any time during the patient's history through Dec 31, 2024 	<p>You may code one of these codes based on an eye professional consultation report or patient history documentation</p> <p>2022F, 2023F, 2024F, 2025F, 2026F, 2033F</p> <p>3072F– Negative exam for diabetic retinopathy the year prior</p>	<ul style="list-style-type: none"> • A note prepared by an ophthalmologist or optometrist that indicates that an eye care professional completed a retinal or dilated eye exam and includes the date of service and result. • Patient reported retinal or dilated eye exams are acceptable and included in the patient's history. The documentation must include: type of eye professional, type of procedure, year and result.
Kidney Health Evaluation for Patients with Diabetes	18-85	The percentage of patients with diabetes (type 1 and type 2) who received a kidney health evaluation defined by an estimated glomerular filtration rate (eGFR) and an urine albumin creatinine ratio (uACR)	<p>82043- Quantitative Urine Albumin Lab Test AND</p> <p>82570- Urine Creatinine Lab Test</p> <p>80047, 80048, 80053, 80069, 82565- Estimated</p>	Reminder: A urinalysis alone will NOT close this care opportunity.

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		during 2024 on the same or different dates of service.	Glomerular Filtration Rate Lab Test	
Osteoporosis Management in Women with a Fracture	67-85	The percentage of female patients who suffered a fracture and who had either a bone mineral density test (BMD) or prescription for a drug to treat osteoporosis in the six months after the fracture.	CPT Codes- Bone Mineral Density Tests 76977- Ultrasound bone density peripheral site 77078- CT bone mineral density axial skeleton 77080- DXA axial skeleton 77081- DXA appendicular skeleton 77085- DXA axial skeleton, (hips, pelvis, spine) including vertebral fracture assessment	Use CPT and SNOMED codes to lessen the administrative burden of manual chart reviews. Patient reported BMD tests are acceptable and can be retrieved via supplemental data. This information must be taken as part of the patient's history and must include the month and year of the test.
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	All who had ASCVD dx or procedure ≥ 20 yrs with LDL-C ≥ 190 40-75 yrs with dx of Type 1 or Type 2 diabetes	Percentage of the following patients - all considered at high risk of cardiovascular events - who were prescribed or were on statin therapy during the current performance year	N/A	Medication List with Statin 'Statin Samples provided' documented can count as statin therapy
Statin Use in Persons with Diabetes (SUPD)	40-75	Percentage of patients with diabetes, who fill at least one statin or statin combination medication, in any strength or dose, using their Part D benefit during 2024.	N/A	<ul style="list-style-type: none"> In order to exclude patients from this measure who cannot tolerate statin medications, a claim MUST be submitted annually using the appropriate ICD-10-CM code. Prescriptions must be filled through Part D insurance to close this care opportunity.
Follow-up after Emergency Room Visit (FMC)	18 and Older	The percentage of ED visits for patients who are with multiple high-risk chronic conditions and who received appropriate follow-up care within seven days of discharge.	N/A	Submit claims timely and include the appropriate codes for diagnosis, health conditions and the services provided
TCM-Patient Engagement after Inpatient Discharge	18 and Older	The percentage of discharges between Jan. 1, 2024-Dec. 1, 2024, for patients who had patient engagement documented within 30 days of discharge. Patient engagement can be met by any of the following criteria: an outpatient visit, a telephone visit, transitional care management services, an e-visit or virtual check in.	See Tip Sheets for detailed list of codes CPT®/CPT II : 99495, 99496	<ul style="list-style-type: none"> Use the appropriate CPT/CPT II/HCPSC codes to capture engagement post-discharge and to reduce the burden of administrative chart review Remember that a medication reconciliation will need to be completed on this patient as well for the TRC measure. Code appropriately.
TCM-Med Reconciliation Post-Discharge	18 and Older	The percentage of discharges between Jan. 1, 2024-Dec. 1, 2024, for patients who had a medication reconciliation performed on the date of discharge thru 30 days post discharge (31 days total).	CPT®/CPT II: 1111F, 99483, 99495, 99496	Documentation in the outpatient medical record must include evidence of medication reconciliation and the date when it was performed.
MTM Program Completion Rate for CMR	18 and Older	Percentage of patients who were enrolled in a medication therapy	N/A	Let patients know what to expect and other benefits from the program

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		management (MTM) program for at least 60 days during 2024 and received a comprehensive medication review (CMR).		<ul style="list-style-type: none"> A pharmacist makes outreach via telephone to discuss their medications The patient will receive documentation of the discussion with recommendations such as: <ul style="list-style-type: none"> Taking the prescribed medications Understanding the benefits of the medications Side effect education to lower the risk of adverse reactions
Plan All-Cause Readmissions (PCR)	18 and Older	For patients ages 18 and older, the number of acute inpatient and observation stays during 2024 that were followed by an unplanned acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission.	N/A	This measure is based on claims and encounters. Supplemental data may be submitted to verify exclusion criteria.

*For additional information regarding the MA measures, please refer to the 2024 MA Quality Measure Tip Sheets

CPT II Codes were included. Please note that there are additional codes for the measures. **CPT II Codes are for internal reporting purposes only. They do not guarantee payment or MSSP gap in care closure.

Resources

HEDIS MY2024 Technical Specs

Pharmacy Quality Alliance (PQA) 2023

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