

2017 Quality Measures
Data Validation Criteria Changes

2017 Quality Number (Q#)	2017 Quality Measure	V1_09202019 Changes
General	N/A	<p>1) Updated header to clarify documentation that may be used to support data validation or auditing as follows: "Documentation such as medical records, etc. to support the HCPCS, CPT, and ICD-10 codes may be requested to support data validation or auditing. Coding applicable to each measure is provided in the 2017 Medicare Part B Claims Measure Specifications, Clinical Quality Measure Specifications, eCQM Measure Specifications, Web Interface Measure Specifications and Supporting Documents."</p> <p>2) Removed Column H which previously identified quality measures where the quality action must take place during "12 Consecutive Months" per the measure's description. Please refer to the posted 2017 Measure Specifications for the specific timing of each measure-related element including denominator eligibility as well as numerator quality action(s).</p> <p>3) Updated Column L for all measures with a "Yes" indicating quality data codes (QDCs) are present to also indicate a "1" (i.e. Yes¹) as a reminder that QDCs do not need to be submitted for registry-based submissions. However, these codes may be submitted to the registry for those registries that use claims data.</p>