Quality Payment Program — 2023: An Update
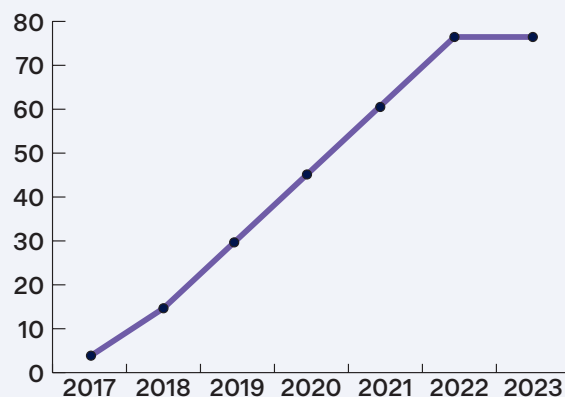
The last few years of Merit-Based Incentive Payment System (MIPS) were relatively easy; we had bonus points and either the performance threshold was kept low, or practices could be exempt because of the pandemic.

Performance Thresholds by Year

Now, we've lost bonus points, the threshold is higher and the exclusions are limited.

The MIPS Measures for Diagnostic Radiology may be insufficient to avoid a penalty, even with a perfect score, assuming the Cost and Promoting Interoperability categories are reweighted. Diagnostic Radiology is disproportionately disadvantaged.

- All benchmarked measures for diagnostic radiology are capped at 7 points.
- Measures 145 and 487 may be eligible for up to 10 points with a same-year benchmark, but this is not guaranteed.

2023 Diagnostic Radiology Quality Measures

Measure 145
Radiology: Exposure Dose Indices Reported for Procedures Using Fluoroscopy
0 points (10 points eligible if benchmarked)

Measure 147
Nuclear Medicine: Correlation With Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy
7 points

Measure 360
Optimizing Patient Exposure to Ionizing Radiation: Count of Potential High-Dose Radiation Imaging Studies: Computed Tomography (CT) and Cardiac Nuclear Medicine Studies
7 points

Measure 364
Optimizing Patient Exposure to Ionizing Radiation: Appropriateness: Follow-up CT Imaging for Incidentally Detected Pulmonary Nodules According to Recommended Guidelines
7 points

Measure 405
Appropriate Follow-up Imaging for Incidental Abdominal Lesions
7 points

Measure 406
Appropriate Follow-up Imaging for Incidental Thyroid Nodules
7 points

Measure 436
Radiation Consideration for Adult CT: Utilization of Dose Lowering Techniques
7 points

Measure 487*
Screening for Social Drivers of Health
7 points (10 points eligible if same-year benchmark)

* Measure included in the Diagnostic Radiology Specialty set, but not clear if non–patient-facing radiologist's review of the screening conducted by another facility improves quality of care or outcomes.

6 Measures = 60 points available

ACR® National Radiology Data Registry (NRDR®) is a CMS-approved Qualified Clinical Data Registry (QCDR) for the Merit-Based Incentive Payment System (MIPS) for 2023. ACR encourages practices to submit all relevant data to encourage the benchmarking of new measures. The ACR QCDR (NRDR) can help, and ACR is working to provide new measures. Additional QCDR measures for radiology are available in the MSN, LLC QCDR. The NRDR QCDR can report 9 of the MSN measures.

For 2023, CMS has approved 13 QCDR measures submitted by ACR, making 60 total measures available to radiologists and radiation oncologists.

- **ACRad 15:** Report Turnaround Time: Radiography

- **ACRad 16:** Report Turnaround Time: Ultrasound (Excluding Breast US)

- **ACRad 17:** Report Turnaround Time: MRI

- **ACRad 18:** Report Turnaround Time: CT

- **ACRad 19:** Report Turnaround Time: PET

- **ACRad 25:** Report Turnaround Time: Mammography

- **ACRad 34:** Multi-Strata Weighted Average for 3 CT Exam Types (Overall percent of CT exams for which dose length product is at or below the size-specific diagnostic reference level for CT abdomen-pelvis with contrast/single phase scan, CT chest without contrast/single phase scan and CT head/brain)

- **ACRad 36:** Incidental Coronary Artery Calcification Reported on Chest CT

- **ACRad 37:** Interpretation of CT Pulmonary Angiography for Pulmonary Embolism

- **ACRad 38:** Use of Low-Dose Cranial CT or MRI Examinations for Patients with Ventricular Shunts

- **ACRad 40:** Use of Structured Reporting in Prostate MRI

- **ACRad 41:** Use of Quantitative Criteria for Oncologic FDG PET Imaging

- **ACRad 42:** Surveillance Imaging for Liver Nodules <10mm in Patients at Risk for Hepatocellular Carcinoma

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