

Value-Based Care Release Notes

November 14, 2025

Practice Insights is pleased to announce updates in the application to support the Merit-Based Incentive Payment System (MIPS) and Enhancing Oncology Model (EOM).

MIPS Quality Measures Dashboard

The MIPS Quality Measures Dashboard will be updated to reflect the following refinement(s):

Measure	Update	Practice Impact
PIMSH 18: Resolution or Improvement of a Health-Related Social Need	<p>Technical enhancement now pulls data from the Observation Date and not the Updated Date to ensure credit is attributing appropriately for reported resolution or improvement within the Numerator population.</p> <p>Denominator attribution update for all providers with two qualifying encounters with a positive screening for one or more of the 5 domains of HRSN screening.</p> <p>Numerator attribution update for all providers with a reported resolution of at least 1 health-related social need or improvement to distress score within 6 months.</p> <p>Technical fix to ensure the denominator identification period of July 1 of the previous performance period through</p>	Practices will notice a shift in the Denominator and Numerator.

Measure	Update	Practice Impact
	<p>June 30 of the current performance period is captured and correctly attributed.</p> <p>Added in telehealth modifier 95 code.</p>	
<p>Promoting Interoperability: Provide Patients Electronic Access to Their Health Information</p>	<p>Technical fix to ensure patients are attributed when a patient is provided access to view online, download, and transmit their health information. Previously, there was a technical defect where credit was not provided when clinicians provided the patient's health information to the patient.</p>	<p>Practices should not see an impact to the Denominator. Some practices will see an increase in the Numerator.</p>
<p>Preventive Care Screening: Screening for Depression and Follow-Up Plan MIPS 134 eCQM MIPS 134 Registry/CQM EOM-5</p>	<p>Technical fix to ensure follow-up plans documented within the 2-day window timeframe are properly attributed to Numerator credit. Previously, credit was not attributed if the follow-up plan was not documented on the same day as the qualifying visit.</p> <p>Technical fix to ensure Numerator credit is attributed properly across patients with multiple visits on the same day: Numerator met encounters will receive precedence over a patient declining to participate in the assessment when the patient has multiple encounters on the same day.</p> <p>Technical fix to ensure the most recent encounter receives Numerator credit when a patient</p>	<p>Practices will notice a shift in the Denominator and Numerator.</p>

Measure	Update	Practice Impact
	<p>has multiple visits within the measurement period on different days.</p> <p>Technical fix to ensure patients with bipolar disorder diagnosis are appropriately attributed as Denominator Exclusions.</p> <p>MIPS 134 Registry/CQM & EOM-5:</p> <p>Added in telehealth modifier 95 code.</p>	

Status of Dashboard Updates for 2025

CMS releases updates to the quality measure specifications annually for the MIPS program. These measure specifications have been reviewed, and Practice Insights is working on the required technical updates to align with the revised requirements. Ontada will continue to notify practices once measures have been updated based on the current 2025 requirements.

Measure Number	Description
MIPS Quality Measures Dashboard	
MIPS #001	Diabetes Hemoglobin A1c (HbA1cc) Poor Control (>9%) (Inverse Measure)
MIPS #047	Advance Care Plan
MIPS #130	Current Medications Documentation
MIPS #134 eCQM	Preventive Care Screening: Screening for Depression and Follow Up Plan
MIPS #134 CQM/Registry	Preventive Care Screening: Screening for Depression and Follow Up Plan
MIPS #143	Pain Intensity Quantified
MIPS #144	Pain Care Plan

Measure Number	Description
MIPS #226	Tobacco Screening and Cessation
MIPS #236	Controlling High Blood Pressure
MIPS #238	Use of High-Risk Medications in Older Adults (Inverse Measure)
MIPS #374	Closing the Referral Loop
MIPS #450	Appropriate Treatment for Patients with Stage I (T1c) III Her2 Positive Breast Cancer
MIPS #451	RAS (KRAS & NRAS) Testing Performed for Patients with Metastatic Colorectal Cancer who Receive Anti-EGFR Monoclonal Antibody Therapy
MIPS #453	Proportion Receiving Chemotherapy in the Last 14 Days of Life (Inverse Measure)
MIPS #457	Percentage of Patients who Died from Cancer Admitted to Hospice for Less than 3 Days
MIPS #462	Bone Density Evaluation for Patients with Prostate Cancer and Receiving Androgen Deprivation Therapy
MIPS #487	Screening for Social Drivers of Health
PIMSH #1	Advance Care Planning in Metastatic Disease
PIMSH #4	Patient-Reported Pain Improvement
PIMSH #9	Supportive Care Drug Utilization in the Last 14 Days of Life (Inverse Measure)
PIMSH #10	Hepatitis B Serology Testing and Prophylactic Treatment Prior to Receiving Anti-CD20 Targeting Drugs
PIMSH #13	Proportion of Stage IV nsNSCLC Patients Tested for Actionable Biomarkers and Received Mutation-Targeted Therapy
PIMSH #15	Antiemetic Therapy for Low-and Minimal-Emetic-Risk Antineoplastic Agents in the Infusion Center-Avoidance of Overuse (Inverse Measure)
PIMSH #16	Appropriate Antiemetic Therapy for High-and Moderate-Emetic-Risk Antineoplastic Agents in the Infusion Center
PIMSH #17	Utilization of Prophylactic GCSF for Cancer Patients Receiving Low-Risk Chemotherapy (Inverse Measure)
PIMSH #18	Resolution or Improvement of a Health-Related Social Need

Measure Number	Description
EOM Performance Measures Dashboard	
EOM-4A	Pain Intensity Quantified
EOM-4B	Pain Care Plan
EOM-5	Preventive Care Screening: Screening for Depression and Follow Up Plan