Rheumatology Informatics System for Effectiveness (RISE)
2024 Qualified Clinical Data Registry (QCDR) Measures
Specification Summary

The American College of Rheumatology (ACR) RISE QCDR measures are measures developed and owned by the ACR. These measures are rheumatology-specific and are eligible for meeting federal reporting requirements in the Traditional Merit-based Incentive Payment System (MIPS) reporting option of the Quality Payment Program (QPP). Select measures ACR12, ACR14, and ACR15 are also eligible for meeting federal reporting requirements in the Advancing Rheumatology Patient Care MIPS Value Pathway (MVP).

This document provides a summary of the measure specifications.

If you are interested in using any of these QCDR measures outside of the RISE registry, please contact RISE@rheumatology.org for information on how to license the ACR's measures.

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QCDR Measure ID: ACR10
Measure Title: Hepatitis B Safety Screening

Measure Description: If a patient is newly initiating biologic OR new synthetic DMARD therapy (e.g. methotrexate, leflunomide, etc.), then the medical record should indicate appropriate screening for hepatitis B in the preceding 12 month period.

Denominator: Patients 18 years and older seen for a clinician encounter (including telehealth) during the measurement period and who had a biologic drug OR new synthetic immunosuppressive drug that is associated with an increased risk of reactivating a Hep B viral infection initiated during the measurement period. The drugs include:

- Abatacept (Orencia)
- Adalimumab (HUMIRA)
- Adalimumab-aacf (Idacio)
- Adalimumab-aaty (Yuflyma)
- Adalimumab-adaz (Hyrimoz)
- Adalimumab-adbm (Cyltezotm)
- Adalimumab-afzb (Abrilada)
- Adalimumab-aqvh (Yusimry)
- Adalimumab-atto (Amjevita)
- Adalimumab-bwwd (Hadlima)
- Adalimumab-fkjp (Hulio)
- Anakinra (Kineret)
- Belimumab (Benlysta)
- Canakinumab (ILARIS)
- Certolizumab (CIMZIA)
- Etanercept (Enbrel)
- Golimumab (Simponi)
- Infliximab (REMICADE)
- Infliximab-abda (Renflexis)
- Infliximab-axxq (Avsola)
- Infliximab-dyyb (Inflectra)
- Ixekizumab (Taltz)

- Rituximab (Rituxan)
- Rituximab-abbs (Truxima)
- Rituximab-arrx (Riabni)
- Rituximab-pvvr (Ruxience)
- Sarilumab (KEVZARA)
- Secukinumab (Cosentyx)
- Tocilizumab (ACTEMRA)
- Upadacitinib (RINVOQ)
- Ustekinumab (STELARA)

Synthetic DMARDs:

- Azathioprine
- Baricitinib (Olumiant)
- Leflunomide
- Methotrexate
- Tofacitinib (XELJANZ)

Numerator: Record of hepatitis B screening documented (hepatitis B surface antigen or hepatitis B viral DNA) anytime in the year prior to drug initiation OR record of hepatitis B treatment 90 days or fewer after drug initiation. Drugs approved for Hepatitis B in the United States include:

- adefovir
- adefovir dipivoxil (Hepsera)
- entecavir (Baraclude)
- interferon A (Intron A)
- lamivudine (Epivir)
- pegylated interferon (Pegasys)
- telbivudine (Tyzeka, Sebivo)
- tenofovir alafenamide (Vemlidy)
- tenofovir disoproxil (Viread)
- tenofovir disoproxil fumarate (tenofovir DF)

Denominator Exclusions: None

Denominator Exceptions: None

Numerator Exclusions: None

National Quality Forum (NQF) ID: N/A

National Quality Strategy (NQS) Domain: Patient Safety

High Priority: Yes

Measure type: Process

Includes Telehealth (Y/N): Yes

Meaningful Measure Area: Preventable Healthcare Harm

Inverse Measure (Y/N): No

Proportional Measure (Y/N): Yes

Number of Performance Rates to be Calculated and Submitted: 1

Risk Adjusted Status (Y/N): No

Care Setting: Ambulatory Care: Clinician Office/Clinic

QCDR Measure ID: ACR12

Measure Title: Disease Activity Measurement for Patients with PsA

Measure Description: If a patient has psoriatic arthritis, then disease activity using a standardized measurement tool should be assessed at >=50% of encounters for PsA.

Denominator: Patients 18 years and older with a diagnosis of psoriatic arthritis seen for one or more face-to-face encounters for PsA with the same clinician during the measurement period.

Numerator: Number of patients with >=50% of total number of outpatient PsA encounters in the measurement year with assessment of disease activity using a standardized measure. Acceptable Psoriatic Arthritis disease activity measurement tools may include, but are not limited to, the following instruments:

- Physician Global Assessment
- Patient Global Assessment
- Patient pain visual analogue score (VAS)
- Routine Assessment of Patient Index Data with 3 measures (RAPID 3)

A result of any kind qualifies for meeting numerator performance.

Denominator Exclusions: None

Denominator Exceptions: None

Numerator Exclusions: None

National Quality Forum (NQF) ID: N/A

National Quality Strategy (NQS) Domain: Effective Clinical Care

High Priority: No

Measure type: Process

Includes Telehealth (Y/N): No

Meaningful Measure Area: Management of Chronic Conditions

Inverse Measure (Y/N): No

Proportional Measure (Y/N): Yes

Number of Performance Rates to be Calculated and Submitted: 1

Risk Adjusted Status (Y/N): No

Care Setting: Ambulatory Care: Clinician Office/Clinic

QCDR Measure ID: ACR14

Measure Title: Gout: Serum Urate Target

Measure Description: The percentage of patients aged 18 and older with at least one clinician encounter (including telehealth) during the measurement period and a diagnosis of gout treated with urate-lowering therapy (ULT) for at least 12 months, whose most recent serum urate result is less than 6.0 mg/dL.

Denominator: Adult patients aged 18 and older with at least one clinician encounter (including telehealth) during the measurement period and a diagnosis of gout treated with urate lowering therapy (ULT) for at least 12 months. Urate-lowering therapy (ULT) includes allopurinol, allopurinol sodium, febuxostat, pegloticase, probenecid, probenecid and colchicine, and allopurinol/lesinurad combinations.

Numerator: Patients whose most recent serum urate level is less than 6.0 mg/dL

Denominator Exclusions: Patients with a history of solid organ transplant.

Denominator Exceptions: Documentation of medical reason(s) for not expecting a serum urate target level of less than 6.0 mg/dL (i.e., any eGFR level less than 30 mL/min or Stage 3 or greater chronic kidney disease in the measurement year or year prior).

Numerator Exclusions: None

National Quality Forum (NQF) ID: 2549e

National Quality Strategy (NQS) Domain: Effective Clinical Care

High Priority: Yes

Measure type: Intermediate Outcome

Includes Telehealth (Y/N): Yes

Meaningful Measure Area: Management of Chronic Conditions

Inverse Measure (Y/N): No

Proportional Measure (Y/N): Yes

Number of Performance Rates to be Calculated and Submitted: 1

Risk Adjusted Status (Y/N): No

Care Setting: Ambulatory Care: Clinician Office/Clinic

QCDR Measure ID: ACR15
Measure Title: Safe Hydroxychloroquine Dosing

Measure Description: If a patient is using hydroxychloroquine, then the average daily dose should be less than or equal to 5 mg/kg.

Denominator: Patients 18 years and older seen for a clinician encounter (including telehealth) and who are taking hydroxychloroquine at the most recent encounter during the measurement period.

Numerator: Number of patients whose dose of hydroxychloroquine is less than or equal to 5 mg/kg.

Denominator Exclusions: None

Denominator Exceptions: None

Numerator Exclusions: None

National Quality Forum (NQF) ID: N/A

National Quality Strategy (NQS) Domain: Patient Safety

High Priority: Yes

Measure type: Process

Includes Telehealth (Y/N): Yes

Meaningful Measure Area: Preventable Healthcare Harm

Inverse Measure (Y/N): No

Proportional Measure (Y/N): Yes

Number of Performance Rates to be Calculated and Submitted: 1

Risk Adjusted Status (Y/N): No

Care Setting: Ambulatory Care: Clinician Office/Clinic

QCDR Measure ID: ACR16

Measure Title: Rheumatoid Arthritis Patients with Low Disease Activity or Remission

Measure Description: The proportion of individuals with RA who have low disease activity or are in remission based on the last recorded disease activity score as assessed using an ACR-preferred tool in the measurement year.

Denominator: Adult patients aged 18 and older with a diagnosis of RA at 2 or more clinician encounters (including telehealth) at least 90 days apart.

Numerator: At least one disease activity score recorded within the measurement year AND a low disease activity or remission score at the most recent disease activity assessment in the measurement year where the disease activity was measured using one of the following ACR-preferred tools:

- Clinical Disease Activity Index (CDAI)
- Disease Activity Score with 28-joint counts (erythrocyte sedimentation rate or C-reactive protein) (DAS-28)
- Patient Activity Score-II (PAS-II)
- Routine Assessment of Patient Index Data with 3 measures (RAPID3)
- Simplified Disease Activity Index (SDAI)

If the patient has more than one measure, the following hierarchy DAS>SDAI>CDAI>RAPID3>PAS-II should be used. In other words, we use the first measure in the hierarchy on a given day and disregard the others.

Denominator Exclusions: None

Denominator Exceptions: None

Numerator Exclusions: None

National Quality Forum (NQF) ID: N/A

National Quality Strategy (NQS) Domain: Effective Clinical Care

High Priority: Yes

Measure type: Intermediate Outcome

Includes Telehealth (Y/N): Yes

Meaningful Measure Area: Management of Chronic Conditions

Inverse Measure (Y/N): No

Proportional Measure (Y/N): Yes

Number of Performance Rates to be Calculated and Submitted: 1

Risk Adjusted Status (Y/N): Yes, risk factors: Sex, Age, Area Deprivation Index score, current glucocorticoid use, number of biologic drugs used ever, hospital admission during the calendar year, joint erosions ever, fibromyalgia ever

Care Setting: Ambulatory Care: Clinician Office/Clinic