Rheumatology Informatics System for Effectiveness (RISE)
2025 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 aged 18 years and older with two or more psoriatic arthritis (PsA) diagnoses documented at least 90 days apart with at least one face-to-face encounter with a PsA diagnosis occurring during the performance period and an additional face-to-face encounter with a PsA diagnosis occurring in the performance period or prior performance 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: Patients aged 18 years and older with two or more gout diagnoses documented at least 90 days apart with at least one encounter with a gout diagnosis occurring during the performance period and an additional encounter with a gout diagnosis occurring in the performance period or prior performance period AND treated with urate lowering therapy (ULT) for at least 12 months.

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) during the measurement period and who have an active prescription for hydroxychloroquine defined as any hydroxychloroquine prescription with a start date in the current measurement period, regardless of the stop date.

Numerator: Number of patients whose average daily 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: Number of patients whose average daily 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: 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

QCDR Measure ID: ACR17

Measure Title: Methotrexate to Biologic Adherence to Treatment Pathway for Patients with Rheumatoid Arthritis

Measure Description: Percentage of patients aged 18 years or older with a diagnosis of RA AND receiving a first course therapy using a biologic DMARD who had a prescription for a csDMARD at least 10 weeks prior to newly initiated biologic therapy during the measurement year.

Denominator: All patients aged 18 years and older who are diagnosed with rheumatoid arthritis AND receiving a first course of therapy using a biologic DMARD during the measurement year.

Numerator: Patient had a prescription for a csDMARD at least 10 weeks prior to newly initiated biologic therapy.

- csDMARD definition: methotrexate, leflunomide
- csDMARD prescription timeframe: a minimum of 10 weeks from the first date of the newly initiated biologic DMARD

Denominator Exclusions: Patient has documentation of a contraindication for csDMARD on or prior to the date of the biologic initiation due to one or more of the following:

- Diagnosis of alcoholism during the measurement year
- Diagnosis of cirrhosis anytime in the patient's medical history
- Diagnosis of transaminitis during the measurement year
- Diagnosis of Stage 3b or worse chronic kidney disease anytime in the patient's medical history
- Diagnosis of neutropenia or lymphopenia during the measurement year
- Diagnosis of pregnancy during in the measurement year (diagnosis code can happen after initiation of biologic)
- Documentation of an allergy to, intolerance to, or prior failure of csDMARD anytime in the patient's medical history
    - Allergy: notation in allergy table specifically referencing allergy to methotrexate (MTX) or leflunomide
    - Intolerance: notation in allergy table or elsewhere referencing intolerance (e.g. adverse event, extreme side effects, etc.) to MTX or leflunomide
    - Prior failure: notation in medical history of previously failing MTX or leflunomide ever

Denominator Exceptions: Documentation of family planning/contraceptive/pregnancy risk/sterilization counseling any time in the patient's history prior to the date of the biologic initiation.

Numerator Exclusions: None

National Quality Forum (NQF) ID: N/A

National Quality Strategy (NQS) Domain: Effective Clinical Care

High Priority: Yes

Measure type: Process

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): None

Care Setting: Ambulatory Care: Clinician Office/Clinic