

# 2026 Quality Incentive Program Internal Medicine Clinical Measures: Clinician Quick Reference Guide

**\*\*\*FOR COMPLETE INFORMATION, PLEASE REFER TO THE 2026 DETAILED MEASURE SPECIFICATIONS IN eREPORTS\*\*\***

| Measure Name   | Who qualifies in the measure?<br>(Denominator)   | How to meet the measure?<br>(Numerator)  | Tips   |
|--|--|--|--|
| <b>Breast Cancer Screening (BCS)</b>                           | Members ages 40 – 74 and assigned female at birth. DOB between January 1, 1952, and December 31, 1984.                     | At least one mammogram on or between October 1, 2024, and December 31, 2026.   | Diagnostic (if coded bilateral) or screening mammograms accepted. Document mastectomy (hx) for exclusion from the measure.   |
| <b>Cervical Cancer Screening (CCS)</b>                         | Members ages 21 – 64 and assigned female at birth. DOB between January 1, 1962, and December 31, 2002.                     | Appropriate screening for cervical cancer. Types of screenings accepted: <ul style="list-style-type: none"> <li>• Pap (Cytology) every 3 years, <b>OR</b></li> <li>• Primary HPV every 5 years, <b>OR</b></li> <li>• Co-test (Pap+HPV) every 5 years</li> </ul>  | Self-collection is acceptable. Document clearly whether the test was Pap, HPV, or co-test. Document absence of cervix for exclusion.   |
| <b>Chlamydia Screening (CHL)</b>                               | Members assigned female at birth, ages 21 – 24. DOB between January 1, 2002, and December 31, 2005.                        | At least one test for chlamydia during the measurement year.   | Universal screening of all members ages 16 – 24 is recommended, regardless of reported sexual activity.  |
| <b>Colorectal Cancer Screening (COL)</b>                       | Members ages 45 – 75. DOB between January 1, 1951, and December 31, 1980.  | One or more screenings for colorectal cancer. Types of screenings accepted: <ul style="list-style-type: none"> <li>• FOBT / FIT: during the calendar year</li> <li>• FIT-DNA (Cologuard): 3 years</li> <li>• Flexible Sigmoidoscopy: 5 years</li> <li>• CT Colonography: 5 years</li> <li>• Colonoscopy: 10 years</li> </ul> | Document Colorectal Cancer and Total Colectomy (hx) for exclusion from the measure. Educate patients about Cologuard so they are prepared to receive the box in the mail and understand the process. |
| <b>Comprehensive Diabetes Care: HbA1c Good Control (HbA1c)</b> | Members ages 18 – 75 with diabetes identified as of December 31, 2026. DOB between January 1, 1951, and December 31, 2008. | Most recent HbA1c measurement at or below 9.0% during the measurement year.  | If multiple readings are taken during the measurement year, the most recent value should be at or below 9.0% to be compliant.  |



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|--|--|--|---|
| <b>Comprehensive Diabetes Care: Retinal Eye Exams (REE)</b>      | Members ages 18 – 75 with diabetes identified as of December 31, 2026.<br>DOB between January 1, 1951, and December 31, 2008.  | At least one diabetic retinopathy screening or diabetic eye exam completed during the measurement year <b>OR</b> documentation of a <b>negative</b> retinal or dilated eye exam completed during the measurement year or the year prior.   | Must be completed each year. Does not have to be a full year between exams. Incorporates asking where the patient gets their eye exam at every DM visit to obtain external records.   |
| <b>Controlling High Blood Pressure (CBP)</b>                     | Members ages 18 – 85 with at least two visits or virtual check-ins on different dates of service, with a hypertension diagnosis on or between January 1, 2025, and June 30, 2026.<br>DOB between January 1, 1941, and December 31, 2008. | Most recent BP reading* taken during the measurement year at an outpatient visit, a nonacute inpatient encounter, or remote monitoring. The reading must be less than 140/90 mm Hg.<br><b>*BP reading must occur on or after the date of the second diagnosis of hypertension.</b> | Only the most recent BP of the year counts. Use the lowest systolic and diastolic if multiple readers were taken on the same day. Both numbers must be included on the same claim. Home / Remote BP is acceptable if digitally transmitted or documented by clinical staff. |
| <b>Kidney Health Evaluation for Patients with Diabetes (KED)</b> | Members ages 18 – 85 with Type 1 or Type 2 diabetes diagnosis.<br>DOB between January 1, 1941, and December 31, 2008.  | Received <b>both</b> an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR) during the measurement year on the same or different dates of service.   | If ordering “microalbumin” ensure the lab runs albumin-creatinine ratio (uACR), not albumin alone. BMP / CMP covers eGFR. Both a quantitative urine albumin test and a urine creatinine test must have service dates that are four days or less apart.                      |