



About the Roadmap to Health Equity Clinical Quality Measures

Seeking input from stakeholders across the country both within and outside the FCC sector, Roadmap advisory committees were charged in 2018 with identifying a menu of up to 15 process and patient-level outcome measures for clinics to report on in the pilot year of reporting.

Consensus on the Free and Charitable Clinic Starter Set of 15 quality measures was reached at the Roadmap Convening directly following the 2018 NAFC Symposium on October 16th and 17th, 2018, in Henderson, Nevada.

The 15 measures chosen are not intended to be a comprehensive view of quality across all domains of clinic operations, rather, are intended as a ‘snapshot’ of key metrics. See the sidebar for an overview of the measure sets used to determine the Roadmap set.

Roadmap measures continue to be evaluated by the standing Roadmap Steering Committee, with additions to the measures slated for the 2026 spring data submission cycle. Measures have been updated in accordance with CMS recommendations regarding age ranges and eligibility criteria.

As of 2024, clinics are required to submit on a minimum of 3 measures, with one being the required Blood Pressure Control measure. Two other measures were deemed ‘priority’ by the Roadmap steering committee, those being A1C Poor Control and Depression Screening and Follow up.

The following pages contain a brief chart of the measures, their definition, and the primary source of the measure definition.

Only measures from the following national, evidenced-based measure sets and value-based incentive programs were evaluated and considered:

1. Healthcare Effectiveness Data and Information Set (HEDIS)
2. Uniform Data System (UDS)
3. National Quality Forum (NQF)
4. Centers for Medicare and Medicaid Services (CMS)
5. Comprehensive Primary Care Plus (CPC+)
6. Merit-Based Incentive Payment System (MIPS)
7. National Quality Measures Clearinghouse (NQMC)
8. Healthy People 2020



Measure	Measure Definition	Primary Source
REQUIRED: BP pressure control (systolic BP <140 mmH diastolic <90 mmHg)	Patients 18 - 85 years of age who had a diagnosis of hypertension overlapping the measurement period and whose most recent blood pressure was adequately controlled (<140/90mmHg) during the measurement period	MIPS Quality ID 236
PRIORITY: Screening for depression and follow-up plan	Percentage of patients aged 12 years and older screened for depression on the date of the encounter or 14 days prior to the date of the encounter using an age-appropriate standardized depression screening tool AND if positive, a follow-up plan is documented on the date of the eligible encounter.	CMIT ID: 672v3
PRIORITY: Diabetes: hemoglobin A1c poor testing (>9.0%)	Percentage of beneficiaries ages 18 to 75 with diabetes (type 1 and type 2) who had hemoglobin A1c (HbA1c) in poor control (> 9.0%).	CMIT ID: 148v3
BP pressure screening and follow-up	Percentage of patient visits for patients aged 18 years and older seen during the measurement period who were screened for high blood pressure AND a recommended follow-up plan is documented, as indicated, if blood pressure is pre-hypertensive or hypertensive.	CMIT ID:167v6
Documentation of current medications in medical record	Percentage of visits for patients aged 18 years and older for which the eligible professional or eligible clinician attests to documenting a list of current medications using all immediate resources available on the date of the encounter.	CMIT ID: 219v1
Diabetes: hemoglobin A1c testing	Patients 18 - 75 years of age who were tested within the measurement period or 12 months prior to measurement period	NQF #0057
Breast cancer screening	Patients 50 - 74 years of age whose mammogram occurred within 27 months prior to the end of the selected Measurement Period.	CMIT ID: 93v3
Hypertension: improvement in blood pressure	Percentage of patients 18-85 years of age who had a diagnosis of essential hypertension starting before and continuing into, or starting during the first six months of the measurement period, and whose most recent blood pressure was adequately controlled (<140/90mmHg) during the measurement period.	CMS E ID: 65
Influenza immunization	Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization.	CMIT ID: 386v4
Tobacco use: screening and cessation intervention	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within the measurement period AND who received tobacco cessation intervention on the date of the encounter or	CMIT ID: 596v4



	within the previous 12 months if identified as a tobacco user.	
BMI screening and follow-up plan	Percentage of patients aged 18 years and older with a BMI documented during the current encounter or within the previous 12 months AND who had a follow-up plan documented if most recent BMI was outside of normal parameters.	CMIT ID: 594v2
Cervical cancer screening	The percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> • Women 21–64 years of age who had cervical cytology performed within the last 3 years. • Women 30–64 years of age who had cervical high-risk human papillomavirus (hrHPV) testing performed within the last 5 years. • Women 30–64 years of age who had cervical cytology/high-risk human papillomavirus (hrHPV) co-testing within the last 5 years 	CMIT ID: 118v5
Colorectal cancer screening	Patients 50 - 75 years of age whose most recent screening test was completed during the selected Measurement Period.	MIPS Quality ID 113
Unhealthy alcohol use: screening and brief counseling	Percentage of patients aged 18 years and older who were screened for unhealthy alcohol use using a systematic screening method at least once within the last 12 months AND who received brief counseling if identified as an unhealthy alcohol user.	NQF #2152
Avoidance of antibiotic treatment in adults with acute bronchitis	The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not prescribed or dispensed an antibiotic prescription	NQF #0058



Roadmap to HEALTH EQUITY