

## Quality ID #430: Prevention of Post-Operative Nausea and Vomiting (PONV) – Combination Therapy

### 2026 COLLECTION TYPE:

MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS) CLINICAL QUALITY MEASURE (COM)

### MEASURE TYPE:

Process – High Priority

### DESCRIPTION:

Percentage of patients, aged 18 years and older, who undergo a procedure under an inhalational general anesthetic, AND who have three or more risk factors for post-operative nausea and vomiting (PONV), who receive combination therapy consisting of at least two prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively.

### INSTRUCTIONS:

#### **Reporting Frequency:**

This measure is to be submitted each time for denominator eligible cases as defined in the denominator criteria.

#### **Intent and Clinical Applicability:**

This measure is intended to reflect the quality of services provided for patients aged 18 years and older who undergo any procedure including surgical, therapeutic or diagnostic under an inhalational general anesthetic AND who have three or more risk factors for PONV performed. There is no diagnosis associated with this measure. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions as defined by the numerator based on the services provided and the measure-specific denominator coding.

#### **Measure Strata and Performance Rates:**

This measure contains one strata defined by a single submission criteria.

This measure produces a single performance rate.

#### **Implementation Considerations:**

For the purposes of MIPS implementation, this procedure measure is submitted each time a procedure is performed during the performance period.

#### **Telehealth:**

**NOT TELEHEALTH ELIGIBLE:** This measure **is not appropriate for nor applicable to the telehealth setting**. This measure is procedure based and therefore doesn't allow for the denominator criteria to be conducted via telehealth. It would be appropriate to remove these patients from the denominator eligible patient population. Telehealth eligibility is at the measure level for inclusion within the denominator eligible patient population and based on the measure specification definitions which are independent of changes to coding and/or billing practices.

#### **Measure Submission:**

The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this collection type for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. The coding provided to identify the measure criteria: Denominator or Numerator, may be an example of coding that could be used to identify patients that meet the intent of this clinical topic. When implementing this measure, please refer to the 'Reference Coding' section to determine if other codes or code languages that meet the intent of the criteria may also be used within the medical record to identify and/or assess patients. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

### DENOMINATOR:

All patients, aged 18 years and older, who undergo any procedure including surgical, therapeutic or diagnostic under an inhalational general anesthetic, AND who have three or more risk factors for PONV.

**Definition:**

**PONV Risk Factors** – The following are risk factors for PONV:

- Female gender
- History of PONV
- History of motion sickness
- Non-smoker
- Intended administration of opioids for post-operative analgesia. This includes use of opioids given intraoperatively and whose effects extend into the post anesthesia care unit (PACU) or post-operative period, or opioids given in the PACU, or opioids given after discharge from the PACU.

**Denominator Criteria (Eligible Cases):**

Patients aged  $\geq 18$  years on date of service

**AND**

**Patient procedure during the performance period (CPT):** 00100, 00102, 00103, 00104, 00120, 00124, 00126, 00140, 00142, 00144, 00145, 00147, 00148, 00160, 00162, 00164, 00170, 00172, 00174, 00176, 00190, 00192, 00210, 00211, 00212, 00214, 00215, 00216, 00218, 00220, 00222, 00300, 00320, 00322, 00350, 00352, 00400, 00402, 00404, 00406, 00410, 00450, 00454, 00470, 00472, 00474, 00500, 00520, 00522, 00524, 00528, 00529, 00530, 00532, 00534, 00537, 00539, 00540, 00541, 00542, 00546, 00548, 00550, 00560, 00566, 00580, 00600, 00604, 00620, 00625, 00626, 00630, 00632, 00635, 00640, 00670, 00700, 00702, 00730, 00731, 00732, 00750, 00752, 00754, 00756, 00770, 00790, 00792, 00794, 00796, 00797, 00800, 00802, 00811, 00812, 00813, 00820, 00830, 00832, 00840, 00842, 00844, 00846, 00848, 00851, 00860, 00862, 00864, 00865, 00866, 00868, 00870, 00872, 00873, 00880, 00882, 00902, 00904, 00906, 00908, 00910, 00912, 00914, 00916, 00918, 00920, 00921, 00922, 00924, 00926, 00928, 00930, 00932, 00934, 00936, 00938, 00940, 00942, 00944, 00948, 00950, 00952, 01112, 01120, 01130, 01140, 01150, 01160, 01170, 01173, 01200, 01202, 01210, 01212, 01214, 01215, 01220, 01230, 01232, 01234, 01250, 01260, 01270, 01272, 01274, 01320, 01340, 01360, 01380, 01382, 01390, 01392, 01400, 01402, 01404, 01420, 01430, 01432, 01440, 01442, 01444, 01462, 01464, 01470, 01472, 01474, 01480, 01482, 01484, 01486, 01490, 01500, 01502, 01520, 01522, 01610, 01620, 01622, 01630, 01634, 01636, 01638, 01650, 01652, 01654, 01656, 01670, 01680, 01710, 01712, 01714, 01716, 01730, 01732, 01740, 01742, 01744, 01756, 01758, 01760, 01770, 01772, 01780, 01782, 01810, 01820, 01829, 01830, 01832, 01840, 01842, 01844, 01850, 01852, 01860, 01924, 01925, 01926, 01930, 01931, 01932, 01933, 01937, 01938, 01939, 01940, 01941, 01942, 01951, 01952, 01961, 01962, 01963, 01965, 01966

**AND**

**Patient received inhalational anesthetic agent:** 4554F

**AND**

**Patient exhibits 3 or more risk factors for post-operative nausea and vomiting:** 4556F

**NUMERATOR:**

Patients who receive combination therapy consisting of at least two prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively.

**Definition:**

**Anti-emetics Therapy** – The recommended first- and second-line classes of pharmacologic anti-emetics for PONV prophylaxis in patients at moderate to severe risk of PONV include (but are not limited to):

- NK-1 Receptor Antagonists
- 5-Hydroxytryptamine (5-HT<sub>3</sub>) Receptor Antagonists
- Glucocorticoids
- Propofol for induction and maintenance of anesthesia
- Phenothiazines

- Phenylethylamines
- Butyrophenones
- Antihistamines
- Anticholinergics

**NUMERATOR NOTE:**

*The foregoing list of medications/drug names is based on clinical guidelines and other evidence. The specified drugs were selected based on the strength of evidence for their clinical effectiveness. This list of selected drugs may not be current. Physicians and other health care professionals should refer to the FDA's web site page entitled "Drug Safety Communications" for up-to-date drug recall and alert information when prescribing medications.*

**Numerator Options:**

***Performance Met:***

Patient received at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively (G9775)

**OR**

***Denominator Exception:***

Documentation of medical reason for not receiving at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively (e.g., intolerance or other medical reason) (G9776)

**OR**

***Performance Not Met:***

Patient did not receive at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively (G9777)

**RATIONALE:**

Postoperative nausea and vomiting (PONV) is an important patient-centered outcome of anesthesia care. PONV is highly dis-satisfying to patients, although rarely life-threatening. A large body of scientific literature has defined risk factors for PONV; demonstrated effective prophylactic regimes based on these risk factors, and demonstrated high variability in this outcome across individual centers and providers. Further, a number of papers have shown that performance can be assessed at the level of individual providers -- the outcome is common enough that sufficient power exists to assess variability and improvement at this level.

**CLINICAL RECOMMENDATION STATEMENTS:**

**Practice Guidelines for Postanesthetic Care; American Society of Anesthesiologists, 2013**

Anti-emetic agents should be used for the prevention and treatment of nausea and vomiting when indicated.

Multiple anti-emetic agents may be used for the prevention and treatment of nausea and vomiting when indicated.

**Fourth Consensus Guidelines for the Management of Postoperative Nausea and Vomiting; Society for Ambulatory Anesthesia (SAMBA), 2020**

Administer prophylactic therapy with combination ( $\geq 2$ ) interventions/multimodal therapy in patients at high risk for PONV.

**REFERENCES:**

Apfelbaum, J. L., Silverstein, J. H., Chung, F. F., Connis, R. T., Fillmore, R. B., Hunt, S. E., Nickinovich, D. G., Schreiner, M. S., Barlow, J. C., Joas, T. A., & American Society of Anesthesiologists Task Force on Postanesthetic Care. (2013). Practice guidelines for postanesthetic care: An updated report by the American Society of Anesthesiologists Task Force on Postanesthetic Care. *Anesthesiology*, 118(2), 291–307. <https://doi.org/10.1097/ALN.0b013e31827773e9>

Gan, T. J., Belani, K. G., Bergese, S., Chung, F., Diemunsch, P., Habib, A. S., Jin, Z., Kovac, A. L., Meyer, T. A., Urman, R. D., Apfel, C. C., Ayad, S., Beagley, L., Candiotti, K., Englesakis, M., Hedrick, T. L., Kranke, P., Lee, S., Lipman, D., Minkowitz, H. S., Morton, J., & Philip, B. K. (2020). Fourth consensus guidelines for the management of postoperative nausea and vomiting. *Anesthesia & Analgesia*, 131(2), 411–448. <https://doi.org/10.1213/ANE.0000000000004833>  
Erratum: *Anesthesia & Analgesia*, 131(5), e241. <https://doi.org/10.1213/ANE.0000000000005245>

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The PCPI's and AMA's significant past efforts and contributions to the development and updating of the Measures are acknowledged.

ASA is solely responsible for the review and enhancement ("Maintenance") of the Measure as of July 1, 2020.

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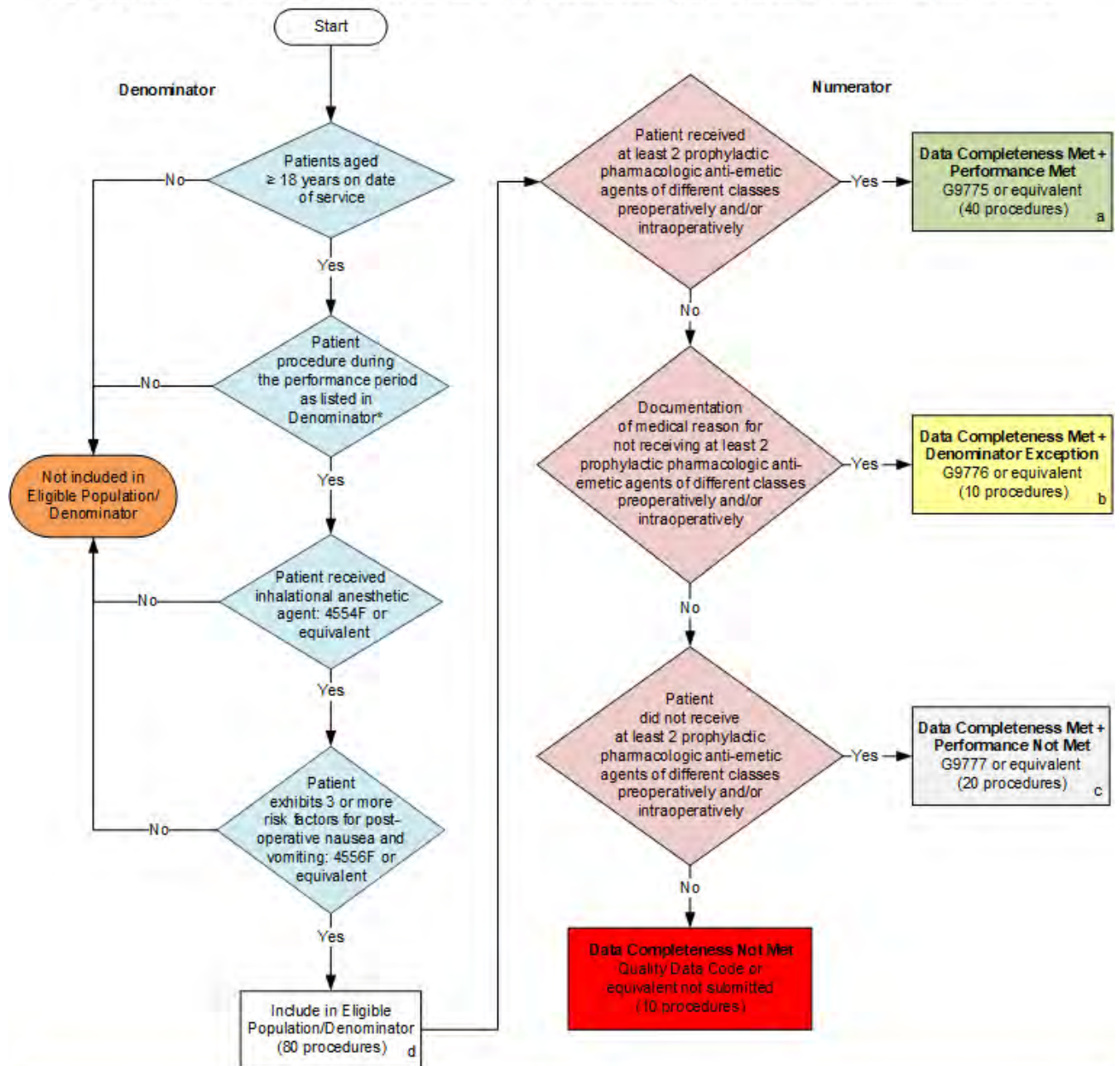
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## 2026 Clinical Quality Measure Flow for Quality ID #430: Prevention of Post-Operative Nausea and Vomiting (PONV) - Combination Therapy

**Disclaimer:** Refer to the measure specification for specific coding and instructions to submit this measure.



### SAMPLE CALCULATIONS

**Data Completeness=**  
 Performance Met (a=40 procedures) + Denominator Exception (b=10 procedures) + Performance Not Met (c=20 procedures) = 70 procedures = 87.50%  
 Eligible Population / Denominator (d=80 procedures) = 80 procedures

**Performance Rate=**  
 Performance Met (a=40 procedures) = 40 procedures = 66.67%  
 Data Completeness Numerator (70 procedures) - Denominator Exception (b=10 procedures) = 60 procedures

\*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE : Submission Frequency: Procedure

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**2026 Clinical Quality Measure Flow Narrative for Quality ID #430:**  
**Prevention of Post-Operative Nausea and Vomiting (PONV) - Combination Therapy**

*Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.*

1. Start with Denominator
2. Check *Patients aged greater than or equal to 18 years on date of service*:
  - a. If *Patients aged greater than or equal to 18 years on date of service* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patients aged greater than or equal to 18 years on date of service* equals Yes, proceed to check *Patient procedure during the performance period as listed in Denominator\**.
3. Check *Patient procedure during the performance period as listed in Denominator\**:
  - a. If *Patient procedure during the performance period as listed in Denominator\** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patient procedure during the performance period as listed in Denominator\** equals Yes, proceed to check *Patient received inhalational anesthetic agent*.
4. Check *Patient received inhalational anesthetic agent*:
  - a. If *Patient received inhalational anesthetic agent* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patient received inhalational anesthetic agent* equals Yes, proceed to check *Patient exhibits 3 or more risk factors for post-operative nausea and vomiting*.
5. Check *Patient exhibits 3 or more risk factors for post-operative nausea and vomiting*:
  - a. If *Patient exhibits 3 or more risk factors for post-operative nausea and vomiting* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
  - b. If *Patient exhibits 3 or more risk factors for post-operative nausea and vomiting* equals Yes, include in *Eligible Population/Denominator*.
6. Denominator Population:
  - a. Denominator Population is all Eligible Procedures in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 procedures in the Sample Calculation.
7. Start Numerator
8. Check *Patient received at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively*:
  - a. If *Patient received at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively* equals Yes, include in *Data Completeness Met and Performance Met*.
    - *Data Completeness Met and Performance Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this

document. Letter a equals 40 procedures in the Sample Calculation.

- b. If *Patient received at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively* equals No, proceed to check *Documentation of medical reason for not receiving at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and intraoperatively*.
  9. Check *Documentation of medical reason for not receiving at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and intraoperatively*.
    - a. If *Documentation of medical reason for not receiving at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and intraoperatively* equals Yes, include in *Data Completeness Met and Denominator Exception*.
      - *Data Completeness Met and Denominator Exception* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 procedures in the Sample Calculation.
    - b. If *Documentation of medical reason for not receiving at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and intraoperatively* equals No, proceed to check *Patient did not receive at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively*.
  10. Check *Patient did not receive at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively*.
    - a. If *Patient did not receive at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively* equals Yes, include in *Data Completeness Met and Performance Not Met*.
      - *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness Rate in the Sample Calculation listed at the end of this document. Letter c equals 20 procedures in the Sample Calculation.
    - b. If *Patient did not receive at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively* equals No, proceed to check *Data Completeness Not Met*.
  11. Check *Data Completeness Not Met*:
    - If *Data Completeness Not Met*, the Quality Data Code or equivalent was not submitted. 10 procedures have been subtracted from the Data Completeness Numerator in the Sample Calculation.

### Sample Calculations

Data Completeness equals Performance Met (a equals 40 procedures) plus Denominator Exception (b equals 10 procedures) Plus Performance Not Met (c equals 20 procedures) divided by Eligible Population/Denominator (d equals 80 procedures). All equals 70 divided by 80 procedures. All equals 87.50 percent.

Performance Rate equals Performance Met (a equals 40 procedures) divided by Data Completeness Numerator (70 procedures) minus Denominator Exception (b equals 10 procedures). All equals 40 procedures divided by 60 procedures. All equals 66.67 percent.

\*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Procedure

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