ACP does not support QPP measure 205: “HIV/AIDS: Sexually Transmitted Diseases – Screening for Chlamydia, Gonorrhea, and Syphilis.” Developers cite a significant performance gap based on data from the 2011 PQRS reporting year and implementation will likely lead to meaningful improvements in clinical outcomes. Opportunistic infections are often asymptomatic in adults with HIV (e.g., chlamydia) with potential to result in severe health complications (e.g., infertility in women) if left untreated and the measure aligns with United States Preventive Services Task Force (USPSTF) and Centers for Disease Control and Prevention (CDC) recommendations on the prevention and treatment of opportunistic infections in HIV-infected adults. However, implementation of the measure could promote overuse of screening in asymptomatic patients and in situations where clinicians encounter interoperability barriers to data retrieval. While specifications include an evidence-based time interval, they are flawed in a number of respects. The numerator and denominator envision one test since HIV diagnosis, although new infections and reinfections may occur repeatedly; gonorrhea screening may encompass several loci of infection, which should be listed; and the measure does not include an appropriate exclusion for patients who are not sexually active or otherwise unlikely to become infected. Also, the numerator specifies an indefinite look-back window. Developers should consider revising the specifications to include an evidence-based look-back window. Although the specifications are flawed, it is more problematic to miss these infections and allow them to go untreated.