

APPENDIX

2011 Reporting Experience

Including Trends (2008-2012)

Physician Quality Reporting System and
Electronic Prescribing (eRx) Incentive Program

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DATA AND METHODS

This section describes the data and methods used in the “2011 Physician Quality Reporting System and Electronic Prescribing (eRx) Incentive Program Reporting Experience Including Trends (2008-2012)” report.

Data Sources

The report used multiple sources of data: (1) Medicare Part B claims data, (2) data submitted by qualified registries, (3) data submitted by qualified Electronic Health Records (EHR) vendors, and (4) data submitted through an online tool by practices that were approved to participate in the Group Practice Reporting Option (GPRO) I option.

Claims data encompassed services within the respective program years and must have been processed by the last Friday in February of the following year to be included in analyses. For example, the analysis of the 2011 program year—for both the Physician Quality Reporting System and the eRx Incentive Program—encompassed claims with service dates from January 1, 2011 through December 31, 2011 and processed no later than February 24, 2012. To provide preliminary information for the 2012 program year, the available information encompassed only service dates from January 1, 2012 through June 29, 2012 from claims processed no later than June 29, 2012. Similar to claims data, data collected from the registry and EHR mechanisms as well as the GPRO I reporting option aligns with the program year and must have been received by CMS by the established deadline for the reporting option. For example, the 2011 program year encompassed services between January 1, 2011 and December 31, 2011; data submitted by registry had to be submitted no later than April, 13, 2012, EHR had to be received no later than April 30, 2012, and practices reporting under the GPRO I had to submit data no later than July 16, 2012. Therefore, no preliminary information was available for the 2012 program year from the registry and EHR mechanisms or the GPRO option; that is, preliminary information for the 2012 program year included claims individual measures information only.

Information on physician specialty and location was obtained from the National Plan and Provider Enumeration System (NPPES), which is publicly available data and downloadable from the NPPES website.¹

Unit of Analysis

The most common unit of analysis for the Physician Quality Reporting System and eRx Incentive Program was the individual eligible professional. An eligible professional was defined by the National Provider Identifier number (NPI) within a billing unit (i.e., the Taxpayer Identification Number [TIN]); the NPI was the *performing* NPI.² All analyses regarding individual eligibility, participation, and incentive eligibility were performed at the NPI level within a TIN (referred to as TIN/NPI). Consequently, a single eligible professional could be

¹ http://nppes.viva-it.com/NPI_Files.html

² There are multiple NPIs associated with a service (performing, referring, and ordering); the performing NPI identifies the eligible professional who actually performed the service.

counted more than once if he/she worked for multiple practices (i.e., single NPI and more than one TIN).

An additional unit of analysis was at the group practice level, which was defined by a TIN. Practices that participated under the GPRO were analyzed at the practice (i.e., TIN) level. In addition to summarizing GPRO information at the TIN level, this report also aggregates information from individual eligible professionals to the practice (TIN) level for descriptive purposes. For these descriptions, a practice was defined as eligible, participated, or incentive eligible if at least one eligible professional associated with that practice was eligible, participated, or incentive eligible.

Certain sections of this report also describe counts of individual eligible professionals encompassed within a practice that participated under the GPRO. For example, some tables and figures that describe results for individual eligible professionals also include the number of eligible professionals within practices participating under the GPRO; this is noted in the appropriate titles and footnotes. For the purposes of summarizing participation and incentive eligibility, all eligible professionals that are part of a practice that participates or is incentive eligible under the GPRO are assumed to have participated or been incentive eligible.

Outcomes

The report summarized the following outcomes:

1. *Program eligibility.* A professional was defined as eligible to participate in the Physician Quality Reporting System or the eRx Incentive Program if he/she had at least one Medicare Part B Physician Fee Schedule (MPFS) professional services claim that contained the denominator criteria of the applicable quality measure for any Physician Quality Reporting System measure or the eRx measure, respectively. In addition, anyone who participated through the registry or EHR reporting options was defined as eligible to participate in the program—regardless of whether they had a qualifying claim—because eligibility information was not available from registry or EHR data. These reporting options can use clinical information to identify eligible instances that is not available in and, therefore, cannot be verified by claims information.

Eligible practices (TINs) that chose to report under the GPRO applied and met requirements for participation.³ A practice could participate under the GPRO under the Physician Quality Reporting System and the eRx Incentive Program. However, a practice could not participate under the GPRO in the eRx Incentive Program alone; they were required to also participate in the Physician Quality Reporting System under the GPRO.⁴ A practice could participate in the Physician Quality Reporting System alone. Eligible

³ GPRO eligibility criteria varied by program year. In 2010, practices with at least 200 NPIs could participate in the GPRO option; in 2011, practices with 200+ NPIs could participate in “GPRO I” and those with 2 – 199 NPIs could participate in the GPRO II option; and in 2012, practices with 25-99 NPIs could participate in the “Small GPRO” option, while practices with 100+ NPIs could participate in the “Large GPRO” option.

⁴ There was one exception to this statement; several practices that were part of a pilot program participated through the GPRO in the eRx Incentive Program and not the Physician Quality Reporting System.

professionals were not eligible to participate individually in the Physician Quality Reporting System (or the eRx Incentive Program) if they participated as a group practice under the GPRO in the same program.

2. *Program participation.* Eligible professionals were defined as participating if they had a complete and valid submission of data on quality measures through claims or a valid submission from a qualified registry or EHR. To participate through the claims reporting option, eligible professionals submitted the specified Quality Data Code(s) (QDC) for a given measure on a Medicare Part B professional services claim that met the denominator criteria for that measure. QDCs indicate that a specific quality action or outcome was or was not met, or that exclusion criteria for the measure were met. QDCs are entered on a line item on the claim, similar to procedure codes. A QDC for a given quality measure must be entered on a claim that also has all the required denominator criteria for that measure. For example, a measure could require a specific combination of diagnosis, procedure codes, and beneficiary age to be an ‘eligible instance’ for a certain measure; to report the measure validly, the eligible professional had to submit the required QDC(s) on line items for that claim. If an eligible professional submitted only one valid QDC for a measure that required two QDCs, that eligible professional does not count as participating. Please note, the program defined participation slightly differently in the 2007 and 2008 program years; an eligible professional was defined as participating in those years if they submitted at least one QDC for the measure.

To report measures groups through the claims reporting mechanism, eligible professionals submitted a specified procedure code (referred to as an intent G-code) indicating intent to submit measures group information on one claim during the reporting period. In order to be considered participating, the eligible professional had to then report the specified QDCs for each measure in the specific measures group. Alternatively, an eligible professional could submit one ‘composite’ QDC specified for that measures group indicating that all quality actions in the measures group had been performed for that patient.

To report measures through the registry and EHR reporting mechanisms, eligible professionals submitted performance data for each measure—such as number of eligible instances (denominator), instances of quality service performed (numerator), number of performance exclusions, reporting rates, and performance rates—in a file format specified by CMS.

A practice was defined as participating in the GPRO I option for the Physician Quality Reporting System if the practice submitted data for an assigned sample of patients through a web-based tool provided by CMS. GPRO II participants submitted data via the claims or registry methods as did individual participants. A practice was defined as participating in the GPRO I and II options for the eRx Incentive Program if they had a valid submission of the eRx quality code through claims, or the required summary information through a registry or EHR.

3. *Incentive eligibility.* An individual eligible professional was defined as incentive eligible for the 2011 Physician Quality Reporting System if they met the criteria for incentive eligibility through at least one individual reporting option. The two basic criteria were:

- Percentage Method:
 - 50 percent of patients, individual measures option: An eligible professional could report at least 50 percent of eligible instances for at least three measures; this criterion applied to the individual measures option for the claims mechanism only. An eligible professional could qualify for an incentive by reporting at least 50 percent of eligible instances on one or two measures (i.e. less than three) if the MAV process was passed; the MAV process checked to ensure it was acceptable for an eligible professional to report less than three measures. Eligible professionals could report using this option for a 12-month (January 1 through December 31, 2011) or a 6-month (July 1 – December 31) period.
 - 80 percent of patients, individual measures option: An eligible professional could report at least 80 percent of eligible instances for at least three measures; this criterion applied to the individual measures option for the registry and EHR reporting mechanisms. Eligible professionals could report using this option for a 12-month period (January 1 through December 31, 2011); in addition, eligible professionals who used the registry reporting mechanism could also choose to report on a 6-month (July 1 through December 31, 2011) period.
 - 50 percent of patients, measures groups option: An eligible professional could report all measures for at least one measures group among the 10 available for claims reporting provided they reported for at least 50 percent of all applicable Medicare Part B FFS patients. They could choose to report for a 12-month period (January 1 through December 31, 2011) for a minimum of 15 patients; they could also choose to report for a 6-month period (July 1 through December 31, 2011) for a minimum of eight patients.
 - 80 percent of patients, measures groups option: An eligible professional could report all applicable measures for at least one measures group among the 14 available for registry reporting provided they reported for at least 80 percent of applicable Medicare Part B FFS patients. They could choose to report for a 12-month period (January 1 through December 31, 2011) for a minimum of 15 patients; they could also choose to report for a 6-month period (July 1 through December 31, 2011) for a minimum of eight patients.
- 30 Patient Method: An eligible professional could report at least one measures group for at least 30 patients; this criterion applied to the claims and registry mechanisms. The option required all Medicare Part B FFS patients for both claims- and registry-reporting. Participants using the 30-patient reporting criterion for the claims or registry reporting mechanisms were required to use a 12-month reporting period (January 1, 2011 through December 31, 2011).

A practice that participated in the GPRO I method for the 2011 Physician Quality Reporting System was defined as incentive eligible if they met the satisfactory reporting criteria. The GPRO I option required a practice to report on the first 411 preselected Medicare patients for each GPRO I measure or on all eligible patients for a measure where fewer than 411 patients were available.

The GPRO II satisfactory reporting criteria varied by group practice size. For claims-based individual measures or measures group, the requirements were:

- a. 2 to 10 NPIs: report one measures group for at least 35 patients (count) and at least three individual measures in 50 percent of patients.
- b. 11 to 25 NPIs: report one measures group for at least 50 patients (count) and at least three individual measures for 50 percent of patients.
- c. 26-50 NPIs: report at least two measures groups for at least 50 patients (count) and at least four individual measures for 50 percent of patients.
- d. 51-100 NPIs: report at least three measures groups for at least 60 patients (count) and at least five individual measures for 50 percent of patients.
- e. 101-199 NPIs: report at least four measures groups for at least 100 patients (count) and at least six individual measures for 50 percent of patients.

These same requirements applied for GPRO II 2011 registry-based reporting; however, registry reporting required a threshold of 80 percent of patients instead of 50 percent.

An eligible professional was defined as incentive eligible for the 2011 eRx Incentive Program if: 1) they correctly reported the eRx quality measure in at least 25 instances; and 2) during the reporting period, the allowed charges for Medicare Part B covered professional services furnished by the eligible professional for the codes that appear in the eRx quality measure denominator were at least 10 percent of the total allowed Medicare Part B charges for all such covered professional services furnished by the eligible professional. A practice that participated in the GPRO I option for the 2011 eRx Incentive Program was defined as incentive eligible if: 1) they correctly reported at least 2,500 instances; and 2) during the reporting period, the allowed charges for Medicare Part B covered professional services furnished by the practice for the codes that appear in the eRx quality measure denominator were at least 10 percent of the total allowed Medicare Part B charges. The number of required instances the eRx quality measure needed to report (“eligible visits”) by group practices under the GPRO II varied by practice group size: 75 eligible visits for those with 2 to 10 NPIs; 225 eligible instances for 11 to 25 NPIs; 475 eligible instances for 26 to 50 NPIs; 925 eligible instances for 51 to 100 NPIs; and 1,875 eligible instances for 101 to 199 NPIs; GPRO II practices also had to meet the 10 percent threshold.

The above incentive eligibility criteria applied to the 2011 program year; criteria for preceding program years differed for some reporting options. When comparing results across years, it is important to note the incentive eligibility requirements can be different in different years. See Table 7 of the main text for a summary of incentive eligibility criteria across the years.

Finally, eligible professionals who met incentive eligibility criteria under the Physician Quality Reporting System but had no Part B MPFS allowed charges on which to calculate an incentive payment had an incentive amount of \$0.00; these participants are not included in the counts of eligible professionals who were incentive eligible. For example, some eligible professionals who participated through a registry or EHR and reported at least 80 percent of eligible instances on at least three measures (i.e., met reporting criteria) were found to have no eligible Medicare claims. Potentially, this was because an eligible professional or the registry provided an incorrect TIN or NPI.

4. *Incentive amounts.* Eligible professionals (or group practice) who were incentive eligible qualified for an incentive payment equal to a percentage of their estimated Part B MPFS allowed charges for covered professional services furnished by the eligible professional (or group practice) during the reporting period. The applicable incentive percentage varied across program years. The applicable percentage was one percent for the 2011 Physician Quality Reporting System and the 2011 eRx Incentive Program. It was two percent for the 2010 Physician Quality Reporting System and the 2010 eRx Incentive Program. The incentive percentage was two percent for the Physician Quality Reporting System and the eRx Incentive Program in 2009, and was 1.5 percent for the Physician Quality Reporting System in 2007 and 2008.
5. *Measure performance.* For the Physician Quality Reporting System, performance on a measure was calculated as the number of times the eligible professional reported that the recommended quality action for that measure was performed (numerator), divided by the number of instances they could have performed the quality action (denominator), multiplied by 100. For example, under claims-based reporting options, the numerator was the number of times the eligible professional reported the measure-specific QDC indicating the quality action was met and the denominator was the number of eligible instances for that measure identified through claims. Instances that did not apply (i.e., reported as exclusions) were excluded from performance. The following hierarchy was used if an eligible professional participated through more than one reporting mechanism: EHR, claims, and then registry. Applying the hierarchy ensured only one performance rate for each measure for an eligible professional; information could not be combined across reporting methods.

Please note, multiple factors should be considered when interpreting performance trends. For example, there have been many changes within the Physician Quality Reporting System across program years that include changes in participation methods, measures, and the eligible professionals who participated. As a result, it is unclear the extent that any observed changes in performance were genuine or artifacts of the aforementioned changes.

6. *2012 eRx Payment Adjustment.* Section 1847(a)(5) of the Social Security act requires payment adjustment under the eRx Incentive Program for eligible professionals who are not successful electronic prescribers. The 2012 eRx payment adjustment, a reduction of one percent, applies to the MPFS amounts for Medicare Part B services furnished by the eligible professional between January 1, 2012 and December 31, 2012, for those eligible professionals who are not successful electronic prescribers in the first six months of 2011 (applicable reporting period) and did not otherwise qualify for an exception from the payment adjustment. Certain types of individually-participating eligible professionals were not subject to the adjustment:
 - Those that were not physicians (MD, DO, or podiatrist), nurse practitioners, or physician assistants as of September 12, 2011, based on primary taxonomy code in the National Plan and Provider Enumeration System (NPPES).

- Those that did not have at least 100 eligible claims containing an encounter code in the measure denominator.
- Those that did not meet the 10 percent threshold limitation were not subject to the adjustment.

To avoid the payment adjustment for 2012, eligible professionals who did not meet any of these automatic exclusion criteria, had to report the G8553 code via claims for at least 10 unique denominator eligible eRx events for services provided during the six-month period January 1, 2011 through June 30, 2011. The reporting criteria (number of eligible unique visits based on group practice size) that needed to be satisfied to avoid the 2012 payment adjustment for practices reporting via GPRO are listed in the previous section.

Alternatively, eligible professionals and practices could avoid the payment adjustment if one of the following applied:

- Reporting a G-code G8644 (defined as not having prescribing privileges) at least one time on an eligible claim between January 1, 2011 and June 30, 2011.
- Requesting (by reporting the applicable G-code via claims by June 30, 2011) and being granted a significant hardship exemption for the following reasons:
 - G8642: The eligible professional practices in a rural area without sufficient high speed internet.
 - G8643: The eligible professional practices in an area without sufficient available pharmacies for electronic prescribing.
- Requesting (by November 8, 2011 through the CSP, or via mail for group practices) and being granted a significant hardship exemption for the following reasons:
 - Eligible professionals (or group practices with eligible professionals) registered to participate in the Medicare or Medicaid EHR Incentive Programs and adopt Certified EHR Technology.
 - Inability to electronically prescribe due to local, state, or federal law or regulation (e.g., controlled substances).
 - Limited prescribing activity.
 - Insufficient opportunities to report the electronic prescribing measure due to limitations of the measure's denominator.

There were four Manual Intervention Requests (MIRs) for the 2012 eRx payment adjustment. These included individually-participating eligible professionals and GPROs whose circumstances qualified them for exemption from the 2012 payment adjustment.

Key Variables

The analysis examined outcomes by several eligible professional and practice characteristics.

- *Specialty (TIN/NPI level only)*. The specialty for eligible professionals was obtained from the NPPES. Specialty in the NPPES was self-designated by the professionals and could contain multiple specialties for the same professional. The primary specialty was used in cases where it was designated by the professional. If there was no primary designation, the first specialty was selected to allow assigning of an eligible professional to a single specialty category. Some specialty codes were grouped for efficiency of data presentation.
- *Reporting Option (TIN and TIN/NPI levels)*. There were eleven individual reporting options and three group (GPRO) reporting options for the 2011 Physician Quality Reporting System. There were three individual reporting mechanisms and three group reporting options for the 2011 eRx Incentive Program. Some analyses combined reporting options such as the time periods (e.g., 6- and 12-month methods).
- *State and Region*. The state for eligible professionals was obtained from NPPES. Region was based on CMS carrier regions on claims. In most tables, information on the Railroad Retirement Board (RRB) carrier is not provided. This is due to the RRB not being based on geographical location of the eligible professional.
- *Practice Size (TIN/NPI level only)*. This variable was the number of eligible professionals within the practice who were defined as eligible and therefore could have participated in the Physician Quality Reporting System or the eRx Incentive Program.
- *Beneficiary Volume (TIN and TIN/NPI levels)*. This variable was a unique count of Medicare beneficiaries who were identified as having an eligible claim for at least one Physician Quality Reporting System measure on which an eligible professional could have reported or who had at least one eligible claim on which an eligible professional could have reported the eRx measure for the eRx Incentive Program. Beneficiaries were identified by a Health Insurance Claim (HIC) number. Beneficiary information was not available from the registry or EHR methods. Registry information was reported to CMS aggregated to individual eligible professionals and the patient identifier available in the EHR reporting method was not linkable to the claims-based HIC number.
- *Eligible Measures (TIN/NPI level only)*. The number of measures the eligible professional could have reported (i.e., treated at least one beneficiary who qualified for the measure).

Data Analysis

Cross-tabulations were used to illustrate bivariate relationships between eligible professional or practice characteristics and the key outcomes of interest (e.g., eligibility, participation, and incentive eligibility). Tables commonly presented frequencies (i.e., counts) and percents. Note that summing counts across participation options or across tables do not equal unduplicated totals due to eligible professionals who participated in multiple options.

2011 PHYSICIAN QUALITY REPORTING SYSTEM APPENDIX TABLES

Table A1. List of Individual Measure Numbers and Descriptions for the Physician Quality Reporting System (2011)

Measure Number	Measure Description
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus ^c
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a,b}
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)
24	Osteoporosis: Communication with the Physician Managing On-going Care Post- Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge ^{a,b}
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery

Measure Number	Measure Description
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility
47	Advance Care Plan
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy
53	Asthma: Pharmacologic Therapy
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain
55	12-Lead Electrocardiogram (ECG) Performed for Syncope
56	Community-Acquired Pneumonia (CAP): Vital Signs
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic
64	Asthma: Asthma Assessment
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use
66	Appropriate Testing for Children with Pharyngitis
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy
69	Multiple Myeloma: Treatment with Bisphosphonates
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD
81	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Hemodialysis in ESRD Patients ^{a,b}
82	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Peritoneal Dialysis ^{a,b}
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a,b}
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment
85	Hepatitis C: HCV Genotype Testing Prior to Treatment

Measure Number	Measure Description
86	Hepatitis C: Antiviral Treatment Prescribed
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy
91	Acute Otitis Externa (AOE): Topical Therapy
92	Acute Otitis Externa (AOE): Pain Assessment
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use
94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy
106	Major Depressive Disorder (MDD): Diagnostic Evaluation
107	Major Depressive Disorder (MDD): Suicide Risk Assessment
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy
109	Osteoarthritis (OA): Function and Pain Assessment
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older
112	Preventive Care and Screening: Screening Mammography
113	Preventive Care and Screening: Colorectal Cancer Screening
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)
122	Chronic Kidney Disease (CKD): Blood Pressure Management
123	Chronic Kidney Disease (CKD): Plan of Care - Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)

Measure Number	Measure Description
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up
130	Documentation of Current Medications in the Medical Record
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up
134	Screening for Clinical Depression and Follow-Up Plan
135	Chronic Kidney Disease (CKD): Influenza Immunization
137	Melanoma: Continuity of Care – Recall System ^{a,b}
138	Melanoma: Coordination of Care ^{a,b}
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications
143	Oncology: Medical and Radiation – Pain Intensity Quantified ^{a,b}
144	Oncology: Medical and Radiation – Plan of Care for Pain ^{a,b}
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening ^c
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy
148	Back Pain: Initial Visit
149	Back Pain: Physical Exam
150	Back Pain: Advice for Normal Activities
151	Back Pain: Advice Against Bed Rest
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula
154	Falls: Risk Assessment
155	Falls: Plan of Care
156	Oncology: Radiation Dose Limits to Normal Tissues
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage ^{a,b}
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a,b}
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy ^{a,b}
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy ^{a,b}

Measure Number	Measure Description
163	Diabetes Mellitus: Foot Exam
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation) ^{a,b,c}
165	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate ^{a,b,c}
166	Coronary Artery Bypass Graft (CABG): Stroke/Cerebrovascular Accident (CVA) ^{a,b,c}
167	Coronary Artery Bypass Graft (CABG): Postoperative Renal Insufficiency ^{a,b,c}
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a,b,c}
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge ^{a,b}
170	Coronary Artery Bypass Graft (CABG): Beta-Blockers Administered at Discharge ^{a,b}
171	Coronary Artery Bypass Graft (CABG): Lipid Management and Counseling ^{a,b}
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening
175	Pediatric End Stage Renal Disease (ESRD): Influenza Immunization
176	Rheumatoid Arthritis (RA): Tuberculosis Screening
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity
178	Rheumatoid Arthritis (RA): Functional Status Assessment
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis
180	Rheumatoid Arthritis (RA): Glucocorticoid Management
181	Elder Maltreatment Screen and Follow-Up Plan
182	Functional Outcome Assessment in Chiropractic Care
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use
186	Wound Care: Use of Compression System in Patients with Venous Ulcers
187	Stroke and Stroke Rehabilitation: Thrombolytic Therapy ^{a,b}
188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear
189	Referral for Otologic Evaluation for Patients with a History of Active Drainage From the Ear Within the Previous 90 Days
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss
191	Cataracts: 20/40 or Better Visual Acuity within 90 days Following Cataract Surgery ^{a,b}
192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures ^{a,b,c}
193	Perioperative Temperature Management
194	Oncology: Cancer Stage Documented

Measure Number	Measure Description
195	Radiology: Stenosis Measurement in Carotid Imaging Studies
196	Coronary Artery Disease (CAD): Symptom and Activity Assessment ^{a,b}
197	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol ^{a,b}
198	Heart Failure: Left Ventricular Function (LVF) Assessment ^{a,b}
199	Heart Failure: Patient Education ^{a,b}
200	Heart Failure: Warfarin Therapy for Patients with Atrial Fibrillation ^{a,b}
201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic
205	HIV/AIDS: Sexually Transmitted Diseases Screening for Chlamydia and Gonorrhea ^{a,b}
206	HIV/AIDS: Screening for High Risk Sexual Behaviors ^{a,b}
207	HIV/AIDS: Screening for Injection Drug Use ^{a,b}
208	HIV/AIDS: Sexually Transmitted Diseases Screening for Syphilis ^{a,b}
209	Functional Communication Measure - Spoken Language Comprehension ^{a,b}
210	Functional Communication Measure - Attention ^{a,b}
211	Functional Communication Measure - Memory ^{a,b}
212	Functional Communication Measure - Motor Speech ^{a,b}
213	Functional Communication Measure - Reading ^{a,b}
214	Functional Communication Measure - Spoken Language Expression ^{a,b}
215	Functional Communication Measure - Writing ^{a,b}
216	Functional Communication Measure - Swallowing ^{a,b}
217	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments ^a
218	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments ^a
219	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot or Ankle Impairments ^a
220	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine Impairments ^a
221	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments ^a
222	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist or Hand Impairments ^a
223	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or Other General Orthopedic Impairments ^a
224	Melanoma: Overutilization of Imaging Studies in Stage 0-IA Melanoma ^a
225	Radiology: Reminder System for Mammograms
226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention
227	Heart Failure: Weight Measurement

Measure Number	Measure Description
228	Heart Failure (HF): Left Ventricular Function (LVF) Testing ^a
229	Diabetes Mellitus: Hemoglobin A1c Testing
230	Diabetes Mellitus: Lipid Profile
231	Asthma: Tobacco Use: Screening- Ambulatory Care Setting
232	Asthma: Tobacco Use: Intervention- Ambulatory Care Setting
233	Thoracic Surgery: Recording of Performance Status Prior to Lung or Esophageal Cancer Resection ^a
234	Thoracic Surgery: Pulmonary Function Tests Before Major Anatomic Lung Resection (Pneumonectomy, Lobectomy, or Formal Segmentectomy) ^a
235	Hypertension (HTN): Plan of Care ^a
236	Hypertension (HTN): Blood Pressure Control
237	Hypertension (HTN): Blood Pressure Measurement ^a
238	Drugs to be Avoided in the Elderly ^{a,c}
239	Weight Assessment and Counseling for Children and Adolescents ^a
240	Childhood Immunization Status ^a

Notes for Table A1: ^a Measure was not reportable via claims (e.g., registry or EHR only) during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 228, 233, 234, 235, 237, 238, 239, and 240). ^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215 and 216). ^c Measure was an inverse measure where a lower performance rate indicates better performance (Measures 1, 146, 164, 165, 166, 167, 168, 192 and 238).

Table A2. Distribution of Incentive Amounts by Specialty for the Physician Quality Reporting System, excluding MOCP (2011)

Specialty	Eligible Professionals who Received Incentive	Percent of Participating EPs Incentive Eligible	Percent of EPs Incentive Eligible	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount	Percent of National Total Incentive Amount
MD/DO	168,428	82.1%	26.3%	\$0.09	\$686.08	\$1,259.14	\$131,704.99	\$212,074,825.06	88.2%
Allergy/Immunology	392	73.7%	11.3%	\$0.50	\$303.66	\$532.23	\$7,692.54	\$208,633.49	0.1%
Anesthesiology	19,480	83.9%	45.4%	\$0.49	\$349.61	\$407.82	\$14,533.96	\$7,944,244.22	3.3%
Cardiology	8,053	85.7%	33.4%	\$0.09	\$2,564.16	\$3,158.17	\$131,704.99	\$25,432,722.32	10.6%
Colon/Rectal Surgery	232	74.1%	20.9%	\$1.02	\$950.80	\$1,083.18	\$4,643.84	\$251,297.88	0.1%
Critical Care	382	76.1%	15.6%	\$2.48	\$915.73	\$1,378.04	\$38,727.78	\$526,411.32	0.2%
Dermatology	2,075	89.8%	19.8%	\$0.38	\$2,543.14	\$3,881.27	\$72,625.71	\$8,053,640.06	3.3%
Emergency Medicine	32,588	95.2%	63.9%	\$0.38	\$474.54	\$586.04	\$9,766.26	\$19,097,814.94	7.9%
Endocrinology	1,415	82.5%	27.3%	\$0.37	\$607.11	\$854.63	\$6,388.97	\$1,209,295.55	0.5%
Family Practice	21,377	80.4%	22.6%	\$0.20	\$449.82	\$670.18	\$14,054.53	\$14,326,479.39	6.0%
Gastroenterology	2,370	74.9%	19.5%	\$0.59	\$1,290.21	\$1,455.32	\$12,950.26	\$3,449,101.64	1.4%
General Practice	414	76.0%	7.0%	\$1.67	\$422.76	\$754.40	\$8,971.25	\$312,322.79	0.1%
General Surgery	3,316	75.5%	15.1%	\$0.29	\$831.17	\$1,112.84	\$15,549.97	\$3,690,193.91	1.5%
Geriatrics	691	70.7%	16.9%	\$0.48	\$964.35	\$1,310.56	\$10,277.42	\$905,597.17	0.4%
Hand Surgery	223	76.9%	14.0%	\$1.22	\$1,198.44	\$1,386.21	\$9,528.97	\$309,124.28	0.1%
Infectious Disease	791	79.2%	14.9%	\$0.50	\$652.11	\$1,177.70	\$10,378.20	\$931,559.81	0.4%
Internal Medicine	20,621	78.1%	21.4%	\$0.10	\$778.74	\$1,116.48	\$41,969.23	\$23,023,034.82	9.6%
Interventional Radiologist	570	80.6%	36.1%	\$1.67	\$1,484.77	\$2,120.97	\$98,845.62	\$1,208,950.55	0.5%
Nephrology	2,134	80.4%	25.6%	\$1.00	\$2,732.03	\$3,082.23	\$93,630.65	\$6,577,477.84	2.7%
Neurology	1,961	74.8%	15.6%	\$0.50	\$681.16	\$1,001.69	\$9,754.13	\$1,964,313.69	0.8%
Neurosurgery	760	79.2%	17.0%	\$1.71	\$1,296.52	\$1,601.85	\$9,461.25	\$1,217,409.65	0.5%
Nuclear Medicine	144	83.2%	21.1%	\$1.33	\$968.73	\$1,761.29	\$10,944.35	\$253,625.70	0.1%
Obstetrics/Gynecology	3,090	72.6%	10.1%	\$0.19	\$118.21	\$276.58	\$6,739.21	\$854,626.25	0.4%
Oncology/Hematology	2,839	77.1%	25.5%	\$1.02	\$1,885.62	\$2,439.05	\$21,028.80	\$6,924,463.83	2.9%

Specialty	Eligible Professionals who Received Incentive	Percent of Participating EPs Incentive Eligible	Percent of EPs Incentive Eligible	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount	Percent of National Total Incentive Amount
Ophthalmology	7,011	79.4%	36.9%	\$0.40	\$3,009.49	\$3,797.63	\$44,349.93	\$26,625,177.68	11.1%
Oral/Maxillofacial Surgery	13	59.1%	3.4%	\$29.82	\$136.31	\$266.49	\$1,402.73	\$3,464.37	0.0%
Orthopaedic Surgery	3,811	74.4%	18.1%	\$0.21	\$1,565.71	\$1,896.40	\$15,949.33	\$7,227,170.25	3.0%
Other MD/DO	1,369	76.8%	13.4%	\$0.67	\$649.99	\$1,013.24	\$12,551.86	\$1,387,126.14	0.6%
Otolaryngology	1,437	77.6%	16.6%	\$0.49	\$1,014.59	\$1,222.97	\$7,848.47	\$1,757,411.58	0.7%
Pathology	4,432	91.8%	58.0%	\$3.20	\$712.44	\$856.50	\$15,644.83	\$3,796,020.33	1.6%
Pediatrics	464	64.1%	7.3%	\$0.09	\$54.70	\$219.36	\$3,035.99	\$101,782.48	0.0%
Physical Medicine	725	73.8%	8.9%	\$0.69	\$826.50	\$1,226.40	\$12,002.33	\$889,136.70	0.4%
Plastic Surgery	344	80.4%	7.9%	\$0.69	\$545.80	\$756.10	\$6,748.83	\$260,098.57	0.1%
Psychiatry	613	66.3%	2.0%	\$0.57	\$168.16	\$333.80	\$3,447.33	\$204,620.58	0.1%
Pulmonary Disease	1,901	75.1%	19.7%	\$0.55	\$1,553.41	\$1,918.85	\$12,085.47	\$3,647,729.41	1.5%
Radiation Oncology	909	70.4%	20.2%	\$1.63	\$2,154.93	\$6,289.44	\$87,462.80	\$5,717,100.83	2.4%
Radiologist	13,776	78.7%	36.8%	\$0.09	\$1,129.25	\$1,405.43	\$26,744.60	\$19,361,150.12	8.1%
Rheumatology	1,177	76.9%	27.8%	\$1.35	\$1,172.71	\$1,673.40	\$21,890.54	\$1,969,596.45	0.8%
Thoracic/Cardiac Surgery	1,263	77.2%	35.7%	\$1.42	\$1,706.57	\$1,984.58	\$14,144.89	\$2,506,526.98	1.0%
Urology	2,484	72.4%	26.4%	\$1.02	\$1,956.92	\$2,221.65	\$29,133.23	\$5,518,578.62	2.3%
Vascular Surgery	781	75.2%	24.4%	\$2.76	\$2,238.50	\$3,111.13	\$39,896.22	\$2,429,792.87	1.0%
Other Eligible Professionals	58,531	78.1%	14.0%	\$0.03	\$196.42	\$483.96	\$58,674.69	\$28,326,841.62	11.8%
Agencies/Hospitals/Nursing and Treatment Facilities	231	68.3%	7.5%	\$0.12	\$338.72	\$889.65	\$24,607.91	\$205,509.98	0.1%
Audiologist	147	56.8%	2.3%	\$0.55	\$53.57	\$86.33	\$829.91	\$12,689.82	0.0%
Certified Nurse Midwives	133	73.1%	9.6%	\$0.09	\$6.48	\$17.82	\$137.70	\$2,369.67	0.0%
Chiropractor	523	60.8%	1.1%	\$0.20	\$109.89	\$178.37	\$1,913.02	\$93,289.13	0.0%
Clinical Nurse Specialists	207	78.1%	9.2%	\$0.21	\$150.00	\$228.75	\$2,007.64	\$47,352.24	0.0%
Counselor/Psychologist	467	68.2%	1.5%	\$0.90	\$110.24	\$340.29	\$5,297.08	\$158,915.66	0.1%
Dentist	29	58.0%	0.9%	\$1.28	\$75.33	\$194.81	\$1,471.30	\$5,649.39	0.0%

Specialty	Eligible Professionals who Received Incentive	Percent of Participating EPs Incentive Eligible	Percent of EPs Incentive Eligible	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount	Percent of National Total Incentive Amount
Dietitian/Nutritionist	175	79.2%	7.1%	\$0.23	\$26.67	\$49.23	\$385.96	\$8,615.65	0.0%
Nurse Anesthetist	14,014	81.6%	31.8%	\$0.47	\$158.70	\$202.16	\$2,231.84	\$2,833,052.20	1.2%
Nurse Practitioner	8,977	80.3%	15.9%	\$0.03	\$124.84	\$234.42	\$5,400.30	\$2,104,419.47	0.9%
Optometry	6,067	67.6%	18.7%	\$0.61	\$297.95	\$509.74	\$11,367.16	\$3,092,574.12	1.3%
Other Eligible Professional	8,074	79.8%	18.5%	\$0.41	\$671.97	\$1,508.52	\$58,674.69	\$12,179,762.83	5.1%
Physical/Occupational Therapy	5,910	76.4%	13.6%	\$0.71	\$381.72	\$559.87	\$8,358.38	\$3,308,813.99	1.4%
Physician Assistant	11,314	86.3%	24.2%	\$0.07	\$130.90	\$211.30	\$6,848.96	\$2,390,619.71	1.0%
Podiatrist	1,387	52.8%	7.8%	\$0.99	\$1,009.20	\$1,233.48	\$10,152.10	\$1,710,831.89	0.7%
Registered Nurse	648	78.9%	17.6%	\$0.58	\$148.80	\$219.50	\$3,295.40	\$142,235.10	0.1%
Social Worker	228	68.1%	0.7%	\$0.49	\$63.95	\$132.20	\$1,175.49	\$30,140.77	0.0%
Unknown/Missing	102	65.0%	10.5%	\$0.46	\$100.35	\$286.97	\$3,917.38	\$29,271.08	0.0%
Total (Unduplicated)	227,061	81.0%	21.4%	\$0.03	\$505.77	\$1,058.88	\$131,704.99	\$240,430,937.76	100.0%

Notes for Table A2: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry and EHR mechanisms.

MOCP = Maintenance of Certification Program

Table A3. Potential Incentives and Participation Information for the Physician Quality Reporting System, excluding MOCP (2011)

Specialty	Average Potential Incentive per Eligible Professional	Percent of Eligible Professionals who Participated
MD/DO	\$1,034.92	32.0%
Allergy/Immunology	\$578.42	15.3%
Anesthesiology	\$444.95	54.1%
Cardiology	\$2,530.73	39.0%
Colon/Rectal Surgery	\$1,091.91	28.2%
Critical Care	\$1,102.40	20.4%
Dermatology	\$2,509.86	22.1%
Emergency Medicine	\$523.25	67.2%
Endocrinology	\$834.57	33.2%
Family Practice	\$599.17	28.1%
Gastroenterology	\$1,386.02	26.1%
General Practice	\$544.23	9.2%
General Surgery	\$888.91	20.0%
Geriatrics	\$1,139.16	24.0%
Hand Surgery	\$1,108.16	18.2%
Infectious Disease	\$1,153.54	18.8%
Internal Medicine	\$982.25	27.4%
Interventional Radiologist	\$1,764.71	44.8%
Nephrology	\$2,443.89	31.8%
Neurology	\$1,007.39	20.8%
Neurosurgery	\$1,354.99	21.4%
Nuclear Medicine	\$1,442.92	25.3%
Obstetrics/Gynecology	\$194.41	13.9%
Oncology/Hematology	\$1,606.52	33.1%
Ophthalmology	\$2,691.59	46.5%
Oral/Maxillofacial Surgery	\$173.96	5.8%
Orthopaedic Surgery	\$1,507.18	24.4%
Other MD/DO	\$887.80	17.4%
Otolaryngology	\$1,038.42	21.4%
Pathology	\$840.14	63.2%
Pediatrics	\$91.10	11.3%
Physical Medicine	\$1,144.67	12.0%
Plastic Surgery	\$647.37	9.8%
Psychiatry	\$350.14	3.0%

Specialty	Average Potential Incentive per Eligible Professional	Percent of Eligible Professionals who Participated
Pulmonary Disease	\$1,717.66	26.2%
Radiation Oncology	\$4,301.82	28.7%
Radiologist	\$1,271.12	46.7%
Rheumatology	\$1,229.56	36.1%
Thoracic/Cardiac Surgery	\$1,602.17	46.3%
Urology	\$1,776.79	36.4%
Vascular Surgery	\$2,369.75	32.4%
Other Eligible Professionals	\$381.97	17.9%
Agencies/Hospitals/Nursing and Treatment Facilities	\$1,740.46	11.0%
Audiologist	\$89.16	4.0%
Certified Nurse Midwives	\$16.23	13.1%
Chiropractor	\$149.79	1.8%
Clinical Nurse Specialists	\$207.96	11.8%
Counselor/Psychologist	\$204.43	2.1%
Dentist	\$99.94	1.5%
Dietitian/Nutritionist	\$46.48	8.9%
Nurse Anesthetist	\$184.43	38.9%
Nurse Practitioner	\$205.41	19.8%
Optometry	\$305.45	27.7%
Other Eligible Professional	\$1,252.43	23.1%
Physical/Occupational Therapy	\$529.59	17.8%
Physician Assistant	\$196.39	28.0%
Podiatrist	\$1,057.76	14.8%
Registered Nurse	\$205.37	22.3%
Social Worker	\$95.57	1.1%
Unknown/Missing	\$275.84	16.2%
Total (Unduplicated)	\$776.60	26.4%

Notes for Table A3: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

MOCP = Maintenance of Certification Program

Table A4. Eligible Professional Characteristics Among Individual Options in the Physician Quality Reporting System (2011)

Eligible Professional (EP) Characteristics	Eligible EPs (TIN/NPI)	Participating EPs	Participation Rate	Incentive Eligible EPs	Incentive Eligibility Rate
Participation Mechanism	--	--	--	--	--
Claims	1,059,970	230,501	21.7%	178,749	77.5%
Registry	1,059,970	62,883	5.9%	56,062	89.2%
EHR	1,059,970	560	0.1%	503	89.8%
Geography (Regions)	--	--	--	--	--
1 - Boston	74,610	18,321	24.6%	15,001	81.9%
2 - New York	125,567	22,016	17.5%	17,239	78.3%
3 - Philadelphia	113,966	32,522	28.5%	26,404	81.2%
4 - Atlanta	199,496	60,885	30.5%	50,115	82.3%
5 - Chicago	189,276	59,772	31.6%	49,280	82.4%
6 - Dallas	103,205	27,097	26.3%	21,965	81.1%
7 - Kansas City	49,470	14,047	28.4%	11,979	85.3%
8 - Denver	35,248	7,826	22.2%	6,403	81.8%
9 - San Francisco	121,354	25,405	20.9%	20,599	81.1%
10 - Seattle	44,887	10,761	24.0%	9,211	85.6%
Unknown	3,243	3,075	94.8%	108	3.5%
# of Measures for which EP was Eligible	--	--	--	--	--
1-5	284,232	70,085	24.7%	57,965	82.7%
6-15	272,277	65,478	24.0%	58,066	88.7%
16-30	245,708	57,949	23.6%	44,154	76.2%
>30	255,190	84,154	33.0%	66,805	79.4%
Unknown	2,563	2,563	100.0%	71	2.8%
Practice Size (# of NPIs)	--	--	--	--	--
1	218,508	14,314	6.6%	8,482	59.3%
2-4	132,987	21,909	16.5%	14,376	65.6%
5-10	117,594	27,424	23.3%	20,975	76.5%
11-24	133,249	45,664	34.3%	38,189	83.6%
25-50	114,223	44,141	38.6%	37,848	85.7%
51-99	95,220	36,742	38.6%	30,896	84.1%
100-199	79,520	27,868	35.0%	23,572	84.6%
200+	168,669	62,167	36.9%	52,723	84.8%
Beneficiary Volume	--	--	--	--	--
<= 25	324,853	48,377	14.9%	43,845	90.6%
26 – 100	265,028	62,404	23.5%	51,256	82.1%
101 – 200	174,269	56,254	32.3%	45,122	80.2%

Eligible Professional (EP) Characteristics	Eligible EPs (TIN/NPI)	Participating EPs	Participation Rate	Incentive Eligible EPs	Incentive Eligibility Rate
> 200	292,727	110,101	37.6%	86,733	78.8%
Unknown	3,093	3,093	100.0%	105	3.4%
Specialty	--	--	--	--	--
MD/DO	--	--	--	--	--
Primary Care	203,508	54,275	26.7%	42,876	79.0%
Surgery	61,606	14,204	23.1%	10,743	75.6%
Other Specialties	375,670	136,651	36.4%	114,809	84.0%
Other Eligible Professionals	--	--	--	--	--
Physicians	101,264	12,519	12.4%	8,006	64.0%
Physician Assistant	46,784	13,116	28.0%	11,314	86.3%
Nurses	108,021	29,615	27.4%	23,979	81.0%
Other Eligible Professionals	162,151	19,692	12.1%	15,232	77.4%
Unknown/Missing	966	157	16.3%	102	65.0%
Total (Unduplicated)	1,059,970	280,229	26.4%	227,061	81.0%

Notes for Table A4: (1) Eligible professional-level results in this table do not include EPs who were part of a practice that participated under the GPRO. (2) Sums across participation mechanisms do not equal totals due to participation in multiple mechanisms. (3) Results included the claims, registry, and EHR reporting mechanisms. (4) EPs in the Unknown categories include Registry and EHR data where a match in claims was not found. (5) Primary Care: Family Practice, General Practice, Pediatrics, and Internal Medicine with no subspecialization; Surgery: Colon/Rectal Surgery, General Surgery, Hand Surgery, Orthopaedic Surgery, Plastic Surgery, Oral/Maxillofacial Surgery, Thoracic/Cardiac Surgery, Vascular Surgery, Neurosurgery; Other Specialties: all remaining MD/DO specialties (6) Physicians: Dentist, Optometry, Oral/Maxillofacial Surgery (non-MD/DO), and Chiropractor; Physicians Assistant: Physician Assistant; Nurses: Certified Nurse Midwives, Clinical Nurse Specialists, Nurse Anesthetists, Nurse Practitioners, and Registered Nurses; Other Eligible Professionals: all remaining non-MD/DO specialties.

Table A5. Number of Eligible Professionals by Specialty for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals in 2008	Eligible Professionals in 2009	Eligible Professionals in 2010	Eligible Professionals in 2011
MD/DO	601,733	621,051	623,077	640,784
Allergy/Immunology	3,520	3,463	3,418	3,468
Anesthesiology	40,727	42,360	42,125	42,936
Cardiology	22,799	23,287	23,768	24,089
Colon/Rectal Surgery	1,064	1,077	1,069	1,110
Critical Care	2,450	2,452	2,422	2,455
Dermatology	10,178	10,332	10,234	10,466
Emergency Medicine	48,171	49,508	49,278	50,984
Endocrinology	4,931	5,055	5,032	5,174
Family Practice	89,204	90,787	91,533	94,732
Gastroenterology	11,771	11,824	11,959	12,134
General Practice	5,904	5,759	5,883	5,942
General Surgery	21,445	21,871	21,595	21,941
Geriatrics	3,977	4,044	4,055	4,080
Hand Surgery	1,399	1,434	1,530	1,594
Infectious Disease	4,982	5,082	5,084	5,313
Internal Medicine	89,559	92,373	92,424	96,445
Interventional Radiologist	1,256	1,373	1,364	1,578
Nephrology	7,690	7,790	7,997	8,351
Neurology	11,959	12,434	12,286	12,605
Neurosurgery	4,501	4,541	4,452	4,476
Nuclear Medicine	383	713	703	683
Obstetrics/Gynecology	29,330	29,592	29,727	30,627
Oncology/Hematology	10,741	10,864	10,762	11,134
Ophthalmology	18,925	18,990	18,917	18,976
Oral/Maxillofacial Surgery	383	376	370	377
Orthopaedic Surgery	20,441	20,644	20,662	21,008
Other MD/DO	7,801	8,143	8,978	10,246
Otolaryngology	8,307	8,448	8,374	8,666
Pathology	7,816	7,705	7,722	7,636
Pediatrics	5,464	5,840	5,816	6,389
Physical Medicine	7,498	7,680	7,859	8,154
Plastic Surgery	4,159	4,250	4,303	4,362
Psychiatry	29,695	30,273	30,269	30,644
Pulmonary Disease	8,716	8,763	9,100	9,646
Radiation Oncology	4,301	4,491	4,448	4,498

Specialty	Eligible Professionals in 2008	Eligible Professionals in 2009	Eligible Professionals in 2010	Eligible Professionals in 2011
Radiologist	30,553	37,242	37,511	37,474
Rheumatology	4,167	4,207	4,116	4,235
Thoracic/Cardiac Surgery	3,526	3,576	3,543	3,533
Urology	9,078	9,380	9,233	9,418
Vascular Surgery	2,962	3,028	3,156	3,205
Other Eligible Professionals	359,132	383,690	393,607	418,219
Agencies/Hospitals/Nursing and Treatment Facilities	2,930	3,130	3,262	3,080
Audiologist	135	5,923	6,073	6,481
Certified Nurse Midwives	1,048	1,136	1,166	1,392
Chiropractor	48,351	47,362	47,494	47,819
Clinical Nurse Specialists	1,738	1,967	2,074	2,253
Counselor/Psychologist	30,409	31,189	31,287	31,984
Dentist	3,327	3,349	3,281	3,232
Dietitian/Nutritionist	2,225	2,303	2,298	2,472
Nurse Anesthetist	37,443	40,314	41,199	44,104
Nurse Practitioner	38,670	44,309	48,603	56,593
Optometry	29,440	29,979	31,028	32,404
Other Eligible Professional	43,196	46,537	43,711	43,735
Physical/Occupational Therapy	35,927	37,794	39,769	43,439
Physician Assistant	35,443	38,638	41,876	46,784
Podiatrist	17,892	17,408	17,442	17,809
Registered Nurse	3,744	4,176	3,806	3,679
Social Worker	27,214	28,176	29,238	30,959
Unknown/Missing	3,331	2,092	980	967
Total (Unduplicated)	964,196	1,006,833	1,017,664	1,059,970

Notes for Table A5: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A6. Participation Information by Reporting Mechanism for the Physician Quality Reporting System (2008 to 2011)

Reporting Mechanism	Eligible Professionals (EPs) who Participated in 2008	Percent of EPs in 2008	EPs who Participated in 2009	Percent of EPs in 2009	EPs who Participated in 2010	Percent of EPs in 2010	EPs who Participated in 2011	Percent of EPs in 2011
Claims Individual Measures	144,972	15.0%	185,154	18.4%	200,517	19.2%	229,282	20.8%
Claims Measures Groups	1,410	0.1%	3,649	0.4%	4,151	0.4%	4,472	0.4%
Registry Individual Measures	8,653	0.9%	22,750	2.3%	39,255	3.8%	50,215	4.6%
Registry Measures Groups	3,167	0.3%	10,356	1.0%	17,133	1.6%	12,894	1.2%
EHR	n/a	n/a	n/a	n/a	14	0.0%	560	0.1%
Group Practice Reporting Option (GPRO) I	n/a	n/a	n/a	n/a	24,931	2.4%	39,404	3.6%
Group Practice Reporting Option (GPRO) II	n/a	n/a	n/a	n/a	n/a	n/a	789	0.1%
Total (Unduplicated)	153,839	16.0%	210,559	20.9%	269,076	25.8%	320,422	29.1%

Notes for Table A6: (1) Sums across participation mechanisms do not equal totals due to participation in multiple mechanisms. (2) Results included the claims, registry, and EHR mechanisms, as well as Group Practice Reporting Option options. (3) The EHR mechanism was not available before the 2010 program year.

Table A7. Eligible Professionals who Participated in the Physician Quality Reporting System, by Specialty (2008 to 2011)

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
MD/DO	117,080	19.5%	157,194	25.3%	181,542	29.1%	205,130	32.0%
Allergy/Immunology	170	4.8%	313	9.0%	376	11.0%	532	15.3%
Anesthesiology	12,941	31.8%	17,485	41.3%	20,157	47.9%	23,210	54.1%
Cardiology	5,194	22.8%	7,083	30.4%	8,729	36.7%	9,401	39.0%
Colon/Rectal Surgery	169	15.9%	243	22.6%	268	25.1%	313	28.2%
Critical Care	247	10.1%	362	14.8%	437	18.0%	502	20.4%
Dermatology	291	2.9%	2,104	20.4%	1,725	16.9%	2,310	22.1%
Emergency Medicine	28,839	59.9%	31,215	63.1%	32,327	65.6%	34,246	67.2%
Endocrinology	857	17.4%	1,291	25.5%	1,359	27.0%	1,716	33.2%
Family Practice	15,143	17.0%	20,551	22.6%	23,926	26.1%	26,603	28.1%
Gastroenterology	949	8.1%	1,805	15.3%	2,612	21.8%	3,164	26.1%
General Practice	237	4.0%	387	6.7%	493	8.4%	545	9.2%
General Surgery	2,310	10.8%	3,142	14.4%	3,819	17.7%	4,393	20.0%
Geriatrics	582	14.6%	770	19.0%	882	21.8%	978	24.0%
Hand Surgery	110	7.9%	168	11.7%	248	16.2%	290	18.2%
Infectious Disease	264	5.3%	595	11.7%	816	16.1%	999	18.8%
Internal Medicine	13,906	15.5%	19,206	20.8%	22,715	24.6%	26,403	27.4%
Interventional Radiologist	251	20.0%	448	32.6%	537	39.4%	707	44.8%
Nephrology	1,278	16.6%	1,984	25.5%	2,395	29.9%	2,653	31.8%
Neurology	1,003	8.4%	1,580	12.7%	2,037	16.6%	2,622	20.8%
Neurosurgery	513	11.4%	721	15.9%	864	19.4%	959	21.4%
Nuclear Medicine	41	10.7%	117	16.4%	167	23.8%	173	25.3%
Obstetrics/ Gynecology	1,343	4.6%	2,558	8.6%	3,453	11.6%	4,257	13.9%
Oncology/ Hematology	2,372	22.1%	3,066	28.2%	3,258	30.3%	3,684	33.1%
Ophthalmology	5,891	31.1%	7,363	38.8%	8,144	43.1%	8,828	46.5%
Oral/Maxillofacial Surgery	7	1.8%	13	3.5%	14	3.8%	22	5.8%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Orthopaedic Surgery	2,527	12.4%	4,013	19.4%	4,746	23.0%	5,125	24.4%
Other MD/DO	802	10.3%	1,087	13.3%	1,438	16.0%	1,783	17.4%
Otolaryngology	424	5.1%	1,060	12.5%	1,477	17.6%	1,852	21.4%
Pathology	4,207	53.8%	4,539	58.9%	4,749	61.5%	4,829	63.2%
Pediatrics	266	4.9%	499	8.5%	628	10.8%	724	11.3%
Physical Medicine	394	5.3%	645	8.4%	789	10.0%	982	12.0%
Plastic Surgery	127	3.1%	296	7.0%	365	8.5%	428	9.8%
Psychiatry	329	1.1%	686	2.3%	825	2.7%	924	3.0%
Pulmonary Disease	1,072	12.3%	1,475	16.8%	1,958	21.5%	2,532	26.2%
Radiation Oncology	820	19.1%	919	20.5%	995	22.4%	1,291	28.7%
Radiologist	7,484	24.5%	11,889	31.9%	15,071	40.2%	17,514	46.7%
Rheumatology	567	13.6%	1,152	27.4%	1,386	33.7%	1,530	36.1%
Thoracic/Cardiac Surgery	1,136	32.2%	1,419	39.7%	1,540	43.5%	1,635	46.3%
Urology	1,468	16.2%	2,174	23.2%	2,888	31.3%	3,432	36.4%
Vascular Surgery	549	18.5%	771	25.5%	929	29.4%	1,039	32.4%
Other Eligible Professionals	36,596	10.2%	53,029	13.8%	62,470	15.9%	74,942	17.9%
Agencies/Hospitals/ Nursing and Treatment Facilities	162	5.5%	228	7.3%	283	8.7%	338	11.0%
Audiologist	13	9.6%	138	2.3%	212	3.5%	259	4.0%
Certified Nurse Midwives	45	4.3%	101	8.9%	125	10.7%	182	13.1%
Chiropractor	291	0.6%	477	1.0%	563	1.2%	860	1.8%
Clinical Nurse Specialists	140	8.1%	187	9.5%	221	10.7%	265	11.8%
Counselor/ Psychologist	272	0.9%	494	1.6%	534	1.7%	685	2.1%
Dentist	9	0.3%	22	0.7%	29	0.9%	50	1.5%
Dietitian/Nutritionist	143	6.4%	190	8.3%	187	8.1%	221	8.9%
Nurse Anesthetist	7,831	20.9%	11,800	29.3%	14,294	34.7%	17,166	38.9%
Nurse Practitioner	5,042	13.0%	7,391	16.7%	9,097	18.7%	11,181	19.8%
Optometry	4,862	16.5%	5,925	19.8%	7,110	22.9%	8,980	27.7%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Other Eligible Professional	4,997	11.6%	8,535	18.3%	9,410	21.5%	10,122	23.1%
Physical/Occupational Therapy	4,936	13.7%	5,770	15.3%	6,391	16.1%	7,732	17.8%
Physician Assistant	6,968	19.7%	9,599	24.8%	11,192	26.7%	13,116	28.0%
Podiatrist	331	1.8%	1,175	6.7%	1,823	10.5%	2,629	14.8%
Registered Nurse	404	10.8%	724	17.3%	777	20.4%	821	22.3%
Social Worker	150	0.6%	273	1.0%	222	0.8%	335	1.1%
Unknown/Missing	163	4.9%	336	16.1%	133	13.6%	157	16.2%
Total (Unduplicated)	153,839	16.0%	210,559	20.9%	244,145	24.0%	280,229	26.4%

Notes for Table A7: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A8. Eligible Professionals who Participated by Reporting Individual Measures through the Claims Reporting Mechanism for the Physician Quality Reporting System, by Specialty (2008 to 2011)

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
MD/DO	109,647	18.2%	135,778	21.9%	145,047	23.3%	162,557	25.4%
Allergy/Immunology	101	2.9%	191	5.5%	232	6.8%	341	9.8%
Anesthesiology	12,923	31.7%	17,372	41.0%	20,040	47.6%	23,070	53.7%
Cardiology	4,951	21.7%	5,756	24.7%	5,331	22.4%	5,159	21.4%
Colon/Rectal Surgery	159	14.9%	192	17.8%	213	19.9%	238	21.4%
Critical Care	231	9.4%	319	13.0%	353	14.6%	392	16.0%
Dermatology	206	2.0%	1,878	18.2%	538	5.3%	675	6.4%
Emergency Medicine	28,727	59.6%	31,000	62.6%	32,030	65.0%	33,976	66.6%
Endocrinology	747	15.1%	899	17.8%	866	17.2%	1,042	20.1%
Family Practice	12,193	13.7%	14,557	16.0%	14,778	16.1%	16,944	17.9%
Gastroenterology	830	7.1%	1,414	12.0%	1,820	15.2%	2,202	18.1%
General Practice	219	3.7%	308	5.3%	370	6.3%	433	7.3%
General Surgery	2,166	10.1%	2,593	11.9%	2,879	13.3%	3,198	14.6%
Geriatrics	511	12.8%	562	13.9%	569	14.0%	615	15.1%
Hand Surgery	101	7.2%	139	9.7%	186	12.2%	221	13.9%
Infectious Disease	224	4.5%	383	7.5%	452	8.9%	543	10.2%
Internal Medicine	12,084	13.5%	14,231	15.4%	14,427	15.6%	17,110	17.7%
Interventional Radiologist	245	19.5%	433	31.5%	522	38.3%	657	41.6%
Nephrology	1,140	14.8%	1,157	14.9%	1,050	13.1%	1,106	13.2%
Neurology	906	7.6%	1,241	10.0%	1,484	12.1%	1,879	14.9%
Neurosurgery	475	10.6%	590	13.0%	634	14.2%	692	15.5%
Nuclear Medicine	39	10.2%	110	15.4%	138	19.6%	126	18.4%
Obstetrics/Gynecology	1,050	3.6%	1,771	6.0%	2,238	7.5%	2,697	8.8%
Oncology/Hematology	2,300	21.4%	2,629	24.2%	2,649	24.6%	2,770	24.9%
Ophthalmology	5,799	30.6%	7,044	37.1%	7,555	39.9%	8,087	42.6%
Oral/Maxillofacial Surgery	6	1.6%	13	3.5%	12	3.2%	13	3.4%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Orthopaedic Surgery	2,370	11.6%	3,321	16.1%	3,687	17.8%	3,851	18.3%
Other MD/DO	723	9.3%	908	11.2%	1,037	11.6%	1,327	13.0%
Otolaryngology	344	4.1%	778	9.2%	905	10.8%	1,117	12.9%
Pathology	4,200	53.7%	4,529	58.8%	4,733	61.3%	4,814	63.0%
Pediatrics	206	3.8%	319	5.5%	302	5.2%	414	6.5%
Physical Medicine	374	5.0%	505	6.6%	553	7.0%	686	8.4%
Plastic Surgery	102	2.5%	202	4.8%	246	5.7%	291	6.7%
Psychiatry	285	1.0%	540	1.8%	674	2.2%	738	2.4%
Pulmonary Disease	964	11.1%	1,184	13.5%	1,433	15.7%	1,778	18.4%
Radiation Oncology	800	18.6%	789	17.6%	755	17.0%	996	22.1%
Radiologist	7,455	24.4%	11,730	31.5%	14,554	38.8%	17,012	45.4%
Rheumatology	505	12.1%	721	17.1%	789	19.2%	840	19.8%
Thoracic/Cardiac Surgery	1,120	31.8%	1,079	30.2%	1,037	29.3%	1,069	30.3%
Urology	1,334	14.7%	1,744	18.6%	2,252	24.4%	2,641	28.0%
Vascular Surgery	532	18.0%	647	21.4%	724	22.9%	797	24.9%
Other Eligible Professionals	35,171	9.8%	49,086	12.8%	55,378	14.1%	66,610	15.9%
Agencies/Hospitals/ Nursing and Treatment Facilities	158	5.4%	203	6.5%	233	7.1%	279	9.1%
Audiologist	0	0.0%	112	1.9%	171	2.8%	232	3.6%
Certified Nurse Midwives	32	3.1%	67	5.9%	72	6.2%	105	7.5%
Chiropractor	289	0.6%	460	1.0%	546	1.1%	853	1.8%
Clinical Nurse Specialists	126	7.2%	157	8.0%	179	8.6%	195	8.7%
Counselor/ Psychologist	250	0.8%	413	1.3%	461	1.5%	581	1.8%
Dentist	8	0.2%	16	0.5%	20	0.6%	29	0.9%
Dietitian/Nutritionist	133	6.0%	149	6.5%	136	5.9%	176	7.1%
Nurse Anesthetist	7,831	20.9%	11,781	29.2%	14,274	34.6%	17,130	38.8%
Nurse Practitioner	4,541	11.7%	6,064	13.7%	6,721	13.8%	8,115	14.3%
Optometry	4,834	16.4%	5,837	19.5%	6,949	22.4%	8,811	27.2%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Other Eligible Professional	4,827	11.2%	7,655	16.4%	7,595	17.4%	8,307	19.0%
Physical/ Occupational Therapy	4,907	13.7%	5,693	15.1%	6,081	15.3%	7,310	16.8%
Physician Assistant	6,454	18.2%	8,623	22.3%	9,529	22.8%	11,093	23.7%
Podiatrist	278	1.6%	970	5.6%	1,499	8.6%	2,359	13.2%
Registered Nurse	389	10.4%	677	16.2%	707	18.6%	746	20.3%
Social Worker	114	0.4%	209	0.7%	205	0.7%	289	0.9%
Unknown/Missing	154	4.6%	290	13.9%	92	9.4%	115	11.9%
Total (Unduplicated)	144,972	15.0%	185,154	18.4%	200,517	19.7%	229,282	21.6%

Notes for Table A8: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only.

Table A9. Eligible Professionals who Participated by Reporting Measures Groups through the Claims Reporting Mechanism for the Physician Quality Reporting System, by Specialty (2008 to 2011)

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
MD/DO	1,311	0.2%	3,155	0.5%	3,487	0.6%	3,758	0.6%
Allergy/Immunology	1	0.0%	4	0.1%	0	0.0%	6	0.2%
Anesthesiology	0	0.0%	37	0.1%	38	0.1%	58	0.1%
Cardiology	22	0.1%	42	0.2%	559	2.4%	635	2.6%
Colon/Rectal Surgery	0	0.0%	8	0.7%	16	1.5%	4	0.4%
Critical Care	1	0.0%	9	0.4%	5	0.2%	6	0.2%
Dermatology	5	0.0%	6	0.1%	12	0.1%	1	0.0%
Emergency Medicine	1	0.0%	6	0.0%	47	0.1%	7	0.0%
Endocrinology	37	0.8%	71	1.4%	50	1.0%	66	1.3%
Family Practice	495	0.6%	928	1.0%	759	0.8%	826	0.9%
Gastroenterology	15	0.1%	29	0.2%	18	0.2%	23	0.2%
General Practice	2	0.0%	14	0.2%	12	0.2%	18	0.3%
General Surgery	11	0.1%	145	0.7%	140	0.6%	125	0.6%
Geriatrics	20	0.5%	31	0.8%	36	0.9%	32	0.8%
Hand Surgery	0	0.0%	3	0.2%	4	0.3%	11	0.7%
Infectious Disease	3	0.1%	2	0.0%	2	0.0%	2	0.0%
Internal Medicine	479	0.5%	997	1.1%	895	1.0%	966	1.0%
Interventional Radiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Nephrology	87	1.1%	117	1.5%	91	1.1%	84	1.0%
Neurology	15	0.1%	19	0.2%	10	0.1%	8	0.1%
Neurosurgery	5	0.1%	59	1.3%	71	1.6%	75	1.7%
Nuclear Medicine	0	0.0%	0	0.0%	1	0.1%	1	0.1%
Obstetrics/Gynecology	9	0.0%	41	0.1%	29	0.1%	49	0.2%
Oncology/Hematology	17	0.2%	22	0.2%	24	0.2%	14	0.1%
Ophthalmology	21	0.1%	16	0.1%	1	0.0%	1	0.0%
Oral/Maxillofacial Surgery	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Orthopaedic Surgery	5	0.0%	245	1.2%	285	1.4%	349	1.7%
Other MD/DO	4	0.1%	46	0.6%	41	0.5%	48	0.5%
Otolaryngology	7	0.1%	6	0.1%	4	0.0%	2	0.0%
Pathology	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Pediatrics	2	0.0%	2	0.0%	2	0.0%	4	0.1%
Physical Medicine	11	0.1%	28	0.4%	45	0.6%	63	0.8%
Plastic Surgery	0	0.0%	3	0.1%	0	0.0%	0	0.0%
Psychiatry	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Pulmonary Disease	12	0.1%	24	0.3%	34	0.4%	38	0.4%
Radiation Oncology	0	0.0%	4	0.1%	0	0.0%	1	0.0%
Radiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Rheumatology	5	0.1%	149	3.5%	204	5.0%	183	4.3%
Thoracic/Cardiac Surgery	0	0.0%	9	0.3%	9	0.3%	9	0.3%
Urology	13	0.1%	17	0.2%	30	0.3%	35	0.4%
Vascular Surgery	6	0.2%	16	0.5%	13	0.4%	8	0.2%
Other Eligible Professionals	99	0.0%	490	0.1%	664	0.2%	713	0.2%
Agencies/Hospitals/ Nursing and Treatment Facilities	2	0.1%	2	0.1%	1	0.0%	3	0.1%
Audiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Certified Nurse Midwives	0	0.0%	0	0.0%	0	0.0%	2	0.1%
Chiropractor	0	0.0%	11	0.0%	0	0.0%	0	0.0%
Clinical Nurse Specialists	0	0.0%	3	0.2%	9	0.4%	8	0.4%
Counselor/ Psychologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Dentist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Dietitian/Nutritionist	0	0.0%	0	0.0%	0	0.0%	3	0.1%
Nurse Anesthetist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Nurse Practitioner	48	0.1%	164	0.4%	153	0.3%	183	0.3%
Optometry	0	0.0%	20	0.1%	0	0.0%	0	0.0%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Other Eligible Professional	33	0.1%	152	0.3%	222	0.5%	201	0.5%
Physical/Occupational Therapy	0	0.0%	0	0.0%	158	0.4%	179	0.4%
Physician Assistant	12	0.0%	113	0.3%	109	0.3%	121	0.3%
Podiatrist	1	0.0%	19	0.1%	7	0.0%	12	0.1%
Registered Nurse	3	0.1%	6	0.1%	5	0.1%	1	0.0%
Social Worker	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Unknown/Missing	0	0.0%	4	0.2%	0	0.0%	1	0.1%
Total (Unduplicated)	1,410	0.1%	3,649	0.4%	4,151	0.4%	4,472	0.4%

Notes for Table A9: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only.

Table A10. Eligible Professionals who Participated in Individual Measures through the Registry Mechanism by Specialty for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
MD/DO	7,087	1.2%	19,054	3.1%	32,532	5.2%	41,587	6.5%
Allergy/Immunology	30	0.9%	81	2.3%	105	3.1%	215	6.2%
Anesthesiology	19	0.0%	112	0.3%	172	0.4%	164	0.4%
Cardiology	334	1.5%	1,358	5.8%	2,199	9.3%	2,949	12.2%
Colon/Rectal Surgery	10	0.9%	27	2.5%	51	4.8%	93	8.4%
Critical Care	23	0.9%	43	1.8%	83	3.4%	115	4.7%
Dermatology	88	0.9%	257	2.5%	1,311	12.8%	1,834	17.5%
Emergency Medicine	137	0.3%	366	0.7%	475	1.0%	489	1.0%
Endocrinology	117	2.4%	383	7.6%	467	9.3%	650	12.6%
Family Practice	2,264	2.5%	4,509	5.0%	7,059	7.7%	8,663	9.1%
Gastroenterology	112	1.0%	337	2.9%	613	5.1%	1,008	8.3%
General Practice	4	0.1%	50	0.9%	80	1.4%	83	1.4%
General Surgery	185	0.9%	557	2.5%	881	4.1%	1,278	5.8%
Geriatrics	60	1.5%	192	4.7%	268	6.6%	319	7.8%
Hand Surgery	8	0.6%	23	1.6%	62	4.1%	71	4.5%
Infectious Disease	43	0.9%	219	4.3%	346	6.8%	478	9.0%
Internal Medicine	1,785	2.0%	4,505	4.9%	7,239	7.8%	8,901	9.2%
Interventional Radiologist	7	0.6%	26	1.9%	50	3.7%	81	5.1%
Nephrology	70	0.9%	269	3.5%	397	5.0%	618	7.4%
Neurology	119	1.0%	387	3.1%	627	5.1%	829	6.6%
Neurosurgery	50	1.1%	139	3.1%	203	4.6%	249	5.6%
Nuclear Medicine	2	0.5%	14	2.0%	26	3.7%	51	7.5%
Obstetrics/Gynecology	309	1.1%	833	2.8%	1,276	4.3%	1,707	5.6%
Oncology/Hematology	84	0.8%	328	3.0%	655	6.1%	1,073	9.6%
Ophthalmology	148	0.8%	441	2.3%	1,061	5.6%	1,395	7.4%
Oral/Maxillofacial Surgery	1	0.3%	0	0.0%	2	0.5%	9	2.4%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Orthopaedic Surgery	284	1.4%	563	2.7%	842	4.1%	1,106	5.3%
Other MD/DO	87	1.1%	140	1.7%	372	4.1%	465	4.5%
Otolaryngology	82	1.0%	227	2.7%	490	5.9%	687	7.9%
Pathology	7	0.1%	13	0.2%	29	0.4%	24	0.3%
Pediatrics	64	1.2%	193	3.3%	348	6.0%	343	5.4%
Physical Medicine	22	0.3%	98	1.3%	182	2.3%	271	3.3%
Plastic Surgery	26	0.6%	90	2.1%	114	2.6%	147	3.4%
Psychiatry	47	0.2%	176	0.6%	184	0.6%	229	0.7%
Pulmonary Disease	99	1.1%	254	2.9%	471	5.2%	798	8.3%
Radiation Oncology	23	0.5%	212	4.7%	327	7.4%	387	8.6%
Radiologist	72	0.2%	383	1.0%	1,710	4.6%	1,537	4.1%
Rheumatology	69	1.7%	218	5.2%	289	7.0%	389	9.2%
Thoracic/Cardiac Surgery	34	1.0%	493	13.8%	647	18.3%	755	21.4%
Urology	135	1.5%	399	4.3%	626	6.8%	875	9.3%
Vascular Surgery	27	0.9%	139	4.6%	193	6.1%	252	7.9%
Other Eligible Professionals	1,558	0.4%	3,660	1.0%	6,699	1.7%	8,601	2.1%
Agencies/Hospitals/ Nursing and Treatment Facilities	5	0.2%	14	0.4%	42	1.3%	46	1.5%
Audiologist	13	9.6%	32	0.5%	60	1.0%	36	0.6%
Certified Nurse Midwives	14	1.3%	34	3.0%	53	4.5%	83	6.0%
Chiropractor	3	0.0%	12	0.0%	11	0.0%	9	0.0%
Clinical Nurse Specialists	20	1.2%	30	1.5%	47	2.3%	71	3.2%
Counselor/ Psychologist	25	0.1%	106	0.3%	98	0.3%	124	0.4%
Dentist	1	0.0%	4	0.1%	11	0.3%	21	0.6%
Dietitian/Nutritionist	11	0.5%	46	2.0%	54	2.3%	49	2.0%
Nurse Anesthetist	0	0.0%	19	0.0%	17	0.0%	60	0.1%
Nurse Practitioner	577	1.5%	1,261	2.8%	2,237	4.6%	2,992	5.3%
Optometry	46	0.2%	100	0.3%	215	0.7%	268	0.8%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Other Eligible Professional	135	0.3%	632	1.4%	1,332	3.0%	1,524	3.5%
Physical/Occupational Therapy	41	0.1%	142	0.4%	446	1.1%	734	1.7%
Physician Assistant	555	1.6%	942	2.4%	1,714	4.1%	2,171	4.6%
Podiatrist	56	0.3%	154	0.9%	260	1.5%	273	1.5%
Registered Nurse	19	0.5%	47	1.1%	67	1.8%	74	2.0%
Social Worker	37	0.1%	85	0.3%	35	0.1%	66	0.2%
Unknown/Missing	8	0.2%	36	1.7%	24	2.4%	27	2.8%
Total (Unduplicated)	8,653	0.9%	22,750	2.3%	39,255	3.9%	50,215	4.7%

Notes for Table A10: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the registry mechanism only.

Table A11. Eligible Professionals who Participated in the Measures Groups through the Registry Mechanism by Specialty for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
MD/DO	2,983	0.5%	9,135	1.5%	15,006	2.4%	11,392	1.8%
Allergy/Immunology	41	1.2%	64	1.8%	70	2.0%	10	0.3%
Anesthesiology	3	0.0%	34	0.1%	31	0.1%	30	0.1%
Cardiology	92	0.4%	651	2.8%	2,279	9.6%	2,039	8.5%
Colon/Rectal Surgery	2	0.2%	42	3.9%	31	2.9%	7	0.6%
Critical Care	7	0.3%	16	0.7%	26	1.1%	10	0.4%
Dermatology	4	0.0%	63	0.6%	48	0.5%	19	0.2%
Emergency Medicine	13	0.0%	28	0.1%	61	0.1%	74	0.1%
Endocrinology	43	0.9%	130	2.6%	182	3.6%	151	2.9%
Family Practice	1,480	1.7%	2,891	3.2%	4,042	4.4%	2,800	3.0%
Gastroenterology	28	0.2%	141	1.2%	340	2.8%	171	1.4%
General Practice	17	0.3%	40	0.7%	77	1.3%	53	0.9%
General Surgery	15	0.1%	156	0.7%	350	1.6%	176	0.8%
Geriatrics	43	1.1%	99	2.4%	150	3.7%	134	3.3%
Hand Surgery	1	0.1%	10	0.7%	24	1.6%	13	0.8%
Infectious Disease	5	0.1%	47	0.9%	89	1.8%	63	1.2%
Internal Medicine	786	0.9%	1,961	2.1%	3,045	3.3%	2,433	2.5%
Interventional Radiologist	0	0.0%	0	0.0%	1	0.1%	1	0.1%
Nephrology	145	1.9%	755	9.7%	1,164	14.6%	1,071	12.8%
Neurology	20	0.2%	93	0.7%	85	0.7%	63	0.5%
Neurosurgery	4	0.1%	34	0.7%	67	1.5%	38	0.8%
Nuclear Medicine	0	0.0%	1	0.1%	15	2.1%	11	1.6%
Obstetrics/Gynecology	31	0.1%	143	0.5%	226	0.8%	124	0.4%
Oncology/Hematology	30	0.3%	242	2.2%	336	3.1%	242	2.2%
Ophthalmology	17	0.1%	133	0.7%	191	1.0%	105	0.6%
Oral/Maxillofacial Surgery	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Orthopaedic Surgery	15	0.1%	355	1.7%	571	2.8%	426	2.0%
Other MD/DO	4	0.1%	51	0.6%	98	1.1%	74	0.7%
Otolaryngology	21	0.3%	147	1.7%	233	2.8%	179	2.1%
Pathology	0	0.0%	1	0.0%	0	0.0%	0	0.0%
Pediatrics	0	0.0%	14	0.2%	16	0.3%	7	0.1%
Physical Medicine	3	0.0%	60	0.8%	74	0.9%	46	0.6%
Plastic Surgery	1	0.0%	22	0.5%	18	0.4%	7	0.2%
Psychiatry	0	0.0%	8	0.0%	11	0.0%	4	0.0%
Pulmonary Disease	52	0.6%	138	1.6%	224	2.5%	146	1.5%
Radiation Oncology	0	0.0%	30	0.7%	26	0.6%	31	0.7%
Radiologist	1	0.0%	10	0.0%	2	0.0%	3	0.0%
Rheumatology	14	0.3%	266	6.3%	370	9.0%	367	8.7%
Thoracic/Cardiac Surgery	4	0.1%	29	0.8%	56	1.6%	41	1.2%
Urology	30	0.3%	195	2.1%	303	3.3%	172	1.8%
Vascular Surgery	11	0.4%	35	1.2%	74	2.3%	51	1.6%
Other Eligible Professionals	183	0.1%	1,210	0.3%	2,108	0.5%	1,488	0.4%
Agencies/Hospitals/ Nursing and Treatment Facilities	0	0.0%	15	0.5%	22	0.7%	23	0.7%
Audiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Certified Nurse Midwives	0	0.0%	2	0.2%	4	0.3%	0	0.0%
Chiropractor	0	0.0%	4	0.0%	9	0.0%	0	0.0%
Clinical Nurse Specialists	1	0.1%	12	0.6%	7	0.3%	7	0.3%
Counselor/ Psychologist	0	0.0%	0	0.0%	0	0.0%	1	0.0%
Dentist	0	0.0%	3	0.1%	0	0.0%	0	0.0%
Dietitian/Nutritionist	0	0.0%	2	0.1%	5	0.2%	3	0.1%
Nurse Anesthetist	0	0.0%	0	0.0%	11	0.0%	0	0.0%
Nurse Practitioner	55	0.1%	344	0.8%	598	1.2%	503	0.9%
Optometry	4	0.0%	44	0.1%	63	0.2%	14	0.0%

Specialty	Eligible Professionals Participating in 2008	Percent of Eligible Professionals Participating in 2008	Eligible Professionals Participating in 2009	Percent of Eligible Professionals Participating in 2009	Eligible Professionals Participating in 2010	Percent of Eligible Professionals Participating in 2010	Eligible Professionals Participating in 2011	Percent of Eligible Professionals Participating in 2011
Other Eligible Professional	81	0.2%	480	1.0%	866	2.0%	598	1.4%
Physical/ Occupational Therapy	0	0.0%	5	0.0%	58	0.1%	30	0.1%
Physician Assistant	36	0.1%	214	0.6%	311	0.7%	240	0.5%
Podiatrist	4	0.0%	79	0.5%	144	0.8%	59	0.3%
Registered Nurse	2	0.1%	6	0.1%	10	0.3%	10	0.3%
Social Worker	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Unknown/Missing	1	0.0%	11	0.5%	19	1.9%	14	1.4%
Total (Unduplicated)	3,167	0.3%	10,356	1.0%	17,133	1.7%	12,894	1.2%

Notes for Table A11: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the registry mechanism only.

Table A12. Eligible Professionals, Participation, and Incentive Information for the Physician Quality Reporting System, by State (2011)

State or Territory	Eligible Professionals	Eligible Professionals who Participated	Participation Rate	Eligible Professionals who Received an Incentive	Incentive Eligibility Rate
Alaska	2,499	283	11.3%	203	71.7%
Alabama	14,525	3,717	25.6%	2,892	77.8%
Arkansas	7,977	2,403	30.1%	1,955	81.4%
Arizona	19,882	4,426	22.3%	3,308	74.7%
California	90,648	18,806	20.7%	15,237	81.0%
Colorado	16,964	4,121	24.3%	3,383	82.1%
Connecticut	16,746	3,787	22.6%	3,028	80.0%
District of Columbia	3,084	649	21.0%	562	86.6%
Delaware	3,786	1,046	27.6%	844	80.7%
Florida	62,649	17,946	28.6%	14,615	81.4%
Georgia	27,991	9,210	32.9%	7,506	81.5%
Hawaii	3,939	647	16.4%	526	81.3%
Iowa	9,996	2,664	26.7%	2,244	84.2%
Idaho	5,154	1,180	22.9%	987	83.6%
Illinois	43,383	12,677	29.2%	10,196	80.4%
Indiana	21,697	6,601	30.4%	5,261	79.7%
Kansas	10,763	2,448	22.7%	1,990	81.3%
Kentucky	15,406	4,220	27.4%	3,221	76.3%
Louisiana	15,481	3,933	25.4%	3,173	80.7%
Massachusetts	37,800	10,171	26.9%	8,440	83.0%
Maryland	22,428	5,274	23.5%	4,044	76.7%
Maine	7,556	1,798	23.8%	1,413	78.6%
Michigan	39,561	11,617	29.4%	9,452	81.4%
Minnesota	22,399	7,123	31.8%	5,713	80.2%
Missouri	20,974	6,761	32.2%	5,845	86.5%
Mississippi	8,278	1,902	23.0%	1,627	85.5%
Montana	3,659	616	16.8%	453	73.5%
North Carolina	32,600	12,129	37.2%	10,287	84.8%
North Dakota	2,741	371	13.5%	292	78.7%
Nebraska	7,357	1,915	26.0%	1,574	82.2%
New Hampshire	5,059	1,331	26.3%	1,121	84.2%
New Jersey	35,434	7,822	22.1%	6,178	79.0%
New Mexico	5,651	1,062	18.8%	842	79.3%
Nevada	6,627	1,550	23.4%	1,167	75.3%
New York	85,016	14,994	17.6%	11,633	77.6%

State or Territory	Eligible Professionals	Eligible Professionals who Participated	Participation Rate	Eligible Professionals who Received an Incentive	Incentive Eligibility Rate
Ohio	41,369	13,586	32.8%	10,989	80.9%
Oklahoma	11,308	2,380	21.0%	1,933	81.2%
Oregon	13,089	3,133	23.9%	2,684	85.7%
Pennsylvania	54,004	16,496	30.5%	13,101	79.4%
Puerto Rico	6,832	54	0.8%	40	74.1%
Rhode Island	5,150	1,210	23.5%	933	77.1%
South Carolina	14,285	3,630	25.4%	2,954	81.4%
South Dakota	3,640	1,119	30.7%	942	84.2%
Tennessee	24,084	7,835	32.5%	6,279	80.1%
Texas	60,291	17,223	28.6%	13,744	79.8%
Utah	6,414	1,451	22.6%	1,184	81.6%
Virginia	24,913	7,818	31.4%	6,389	81.7%
Virgin Islands	166	17	10.2%	12	70.6%
Vermont	2,359	273	11.6%	196	71.8%
Washington	23,916	5,904	24.7%	4,983	84.4%
Wisconsin	22,500	8,664	38.5%	7,768	89.7%
West Virginia	6,706	1,750	26.1%	1,381	78.9%
Wyoming	1,919	259	13.5%	179	69.1%
Other	349	70	20.1%	56	80.0%
Unknown/Missing	966	157	16.3%	102	65.0%
Total (Unduplicated)	1,059,970	280,229	26.4%	227,061	81.0%

Notes for Table A12: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A13. Submission Information for Individual Measures Submitted through the Claims Mechanism for the Physician Quality Reporting System (2011)

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported ≥ 1 Valid QDC	% of Eligible Professionals who Reported ≥ 1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus	331,384	20,859	6.3%	15,229	73.0%	61.3%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	331,384	19,436	5.9%	14,256	73.4%	61.5%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	331,384	19,830	6.0%	14,398	72.6%	61.2%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	255,881	12,528	4.9%	9,341	74.6%	69.0%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	264,619	1,228	0.5%	568	46.3%	44.6%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	30,458	12,028	39.5%	9,616	80.0%	71.3%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	45,663	12,969	28.4%	10,246	79.0%	79.1%
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	76,304	13,631	17.9%	10,234	75.1%	77.7%
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	48,154	9,889	20.5%	7,382	74.7%	72.0%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	48,154	5,826	12.1%	4,072	69.9%	65.9%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	96,466	4,679	4.9%	3,468	74.1%	67.0%
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin	68,967	6,068	8.8%	4,708	77.6%	71.2%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported ≥ 1 Valid QDC	% of Eligible Professionals who Reported ≥ 1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	88,906	4,696	5.3%	3,538	75.3%	69.7%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	76,481	5,491	7.2%	4,312	78.5%	72.6%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post- Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older	224,351	739	0.3%	381	51.6%	32.7%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	38,860	19,338	49.8%	18,195	94.1%	84.3%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	83,392	40,782	48.9%	35,491	87.0%	82.5%
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	101,678	3,462	3.4%	2,927	84.6%	68.0%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	103,026	3,950	3.8%	2,762	69.9%	57.7%
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	74,862	1,943	2.6%	1,589	81.8%	64.8%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	83,931	3,152	3.8%	2,250	71.4%	58.7%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	538,408	8,085	1.5%	3,905	48.3%	41.7%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	224,351	1,096	0.5%	292	26.6%	24.2%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	178,883	3,852	2.2%	2,544	66.0%	51.3%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported ≥ 1 Valid QDC	% of Eligible Professionals who Reported ≥ 1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	3,763	893	23.7%	815	91.3%	85.5%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	3,763	613	16.3%	556	90.7%	84.7%
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	4,076	654	16.1%	540	82.6%	77.0%
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility	501,820	991	0.2%	119	12.0%	13.3%
47	Advance Care Plan	653,742	8,612	1.3%	4,974	57.8%	51.4%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	546,125	6,610	1.2%	2,572	38.9%	36.3%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	125,927	2,300	1.8%	1,547	67.3%	64.6%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	125,927	2,392	1.9%	1,557	65.1%	63.9%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	217,585	2,627	1.2%	1,378	52.5%	53.4%
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	217,585	1,875	0.9%	1,010	53.9%	50.6%
53	Asthma: Pharmacologic Therapy	83,105	944	1.1%	762	80.7%	60.9%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	72,166	42,854	59.4%	40,260	94.0%	87.0%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	55,262	35,822	64.8%	34,283	95.7%	89.8%
56	Community-Acquired Pneumonia (CAP): Vital Signs	207,226	36,796	17.8%	34,837	94.7%	89.0%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported >=1 Valid QDC	% of Eligible Professionals who Reported >=1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	207,226	41,317	19.9%	39,311	95.1%	89.5%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	207,226	37,648	18.2%	35,928	95.4%	89.6%
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	207,226	27,148	13.1%	25,471	93.8%	87.6%
64	Asthma: Asthma Assessment	83,105	596	0.7%	455	76.3%	55.6%
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	193	2	1.0%	2	100.0%	75.0%
66	Appropriate Testing for Children with Pharyngitis	143	1	0.7%	1	100.0%	66.7%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	30,099	1,262	4.2%	968	76.7%	69.6%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	24,503	1,001	4.1%	735	73.4%	62.0%
69	Multiple Myeloma: Treatment with Bisphosphonates	37,295	1,694	4.5%	1,359	80.2%	69.6%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	37,499	1,539	4.1%	1,286	83.6%	73.3%
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer	134,392	1,791	1.3%	1,213	67.7%	59.2%
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	93,117	1,512	1.6%	1,018	67.3%	58.5%
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	89,526	16,807	18.8%	14,815	88.2%	78.4%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported >=1 Valid QDC	% of Eligible Professionals who Reported >=1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	8,994	122	1.4%	93	76.2%	73.2%
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	39,462	337	0.9%	238	70.6%	67.2%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	39,462	279	0.7%	185	66.3%	67.5%
86	Hepatitis C: Antiviral Treatment Prescribed	39,462	250	0.6%	172	68.8%	61.6%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	39,462	170	0.4%	119	70.0%	68.4%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	70,640	558	0.8%	389	69.7%	55.7%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	28,325	91	0.3%	60	65.9%	43.3%
91	Acute Otitis Externa (AOE): Topical Therapy	105,661	1,104	1.0%	900	81.5%	52.3%
92	Acute Otitis Externa (AOE): Pain Assessment	105,661	967	0.9%	792	81.9%	59.9%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	105,661	878	0.8%	748	85.2%	51.1%
94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility	41	1	2.4%	1	100.0%	100.0%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	7,124	4,598	64.5%	4,116	89.5%	79.8%
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	6,733	4,449	66.1%	4,170	93.7%	85.1%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	7,910	501	6.3%	327	65.3%	48.8%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported >=1 Valid QDC	% of Eligible Professionals who Reported >=1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	4,125	478	11.6%	296	61.9%	48.2%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	4,037	604	15.0%	386	63.9%	52.5%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	115,824	658	0.6%	486	73.9%	63.9%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	115,824	783	0.7%	564	72.0%	61.5%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	150,928	990	0.7%	601	60.7%	54.1%
109	Osteoarthritis (OA): Function and Pain Assessment	218,838	1,401	0.6%	483	34.5%	38.8%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	586,180	10,694	1.8%	4,413	41.3%	38.0%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	588,939	10,132	1.7%	5,161	50.9%	45.1%
112	Preventive Care and Screening: Screening Mammography	522,744	8,641	1.7%	4,518	52.3%	43.6%
113	Preventive Care and Screening: Colorectal Cancer Screening	568,897	9,996	1.8%	5,200	52.0%	42.0%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	100,202	237	0.2%	102	43.0%	24.1%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	347,490	15,127	4.4%	9,579	63.3%	63.2%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	331,384	5,428	1.6%	2,677	49.3%	40.0%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	60,681	699	1.2%	423	60.5%	55.0%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported >=1 Valid QDC	% of Eligible Professionals who Reported >=1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
122	Chronic Kidney Disease (CKD): Blood Pressure Management	60,681	800	1.3%	376	47.0%	46.8%
123	Chronic Kidney Disease (CKD): Plan of Care - Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)	60,681	469	0.8%	201	42.9%	42.0%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	779,813	45,845	5.9%	31,328	68.3%	59.9%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	345,383	3,923	1.1%	1,837	46.8%	41.9%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	345,383	2,674	0.8%	1,027	38.4%	39.3%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	721,678	11,529	1.6%	4,835	41.9%	35.7%
130	Documentation of Current Medications in the Medical Record	709,286	29,740	4.2%	17,761	59.7%	50.9%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	177,480	7,632	4.3%	5,979	78.3%	64.9%
134	Screening for Clinical Depression and Follow-Up Plan	120,626	744	0.6%	623	83.7%	74.3%
135	Chronic Kidney Disease (CKD): Influenza Immunization	45,120	155	0.3%	93	60.0%	52.1%
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	75,887	9,174	12.1%	6,186	67.4%	71.2%
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	45,599	5,226	11.5%	3,294	63.0%	63.5%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	218,838	1,899	0.9%	738	38.9%	38.4%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported >=1 Valid QDC	% of Eligible Professionals who Reported >=1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	108,343	12,776	11.8%	10,614	83.1%	75.5%
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening	23,488	8,812	37.5%	7,783	88.3%	83.4%
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	18,152	7,764	42.8%	6,811	87.7%	81.2%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	60,681	496	0.8%	288	58.1%	49.8%
154	Falls: Risk Assessment	622,462	9,628	1.6%	5,919	61.5%	40.4%
155	Falls: Plan of Care	7,918	5,423	68.5%	4,928	90.9%	87.2%
156	Oncology: Radiation Dose Limits to Normal Tissues	3,557	404	11.4%	288	71.3%	61.3%
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	2,983	57	1.9%	46	80.7%	68.8%
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	6,180	445	7.2%	392	88.1%	80.3%
163	Diabetes Mellitus: Foot Exam	331,384	5,671	1.7%	2,421	42.7%	40.7%
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	4,806	227	4.7%	190	83.7%	78.7%
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	675,341	6,353	0.9%	2,896	45.6%	37.8%
175	Pediatric End Stage Renal Disease (ESRD): Influenza Immunization	290	0	0.0%	0	0.0%	0.0%
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	150,928	328	0.2%	149	45.4%	39.2%
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	150,928	429	0.3%	200	46.6%	41.8%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported >=1 Valid QDC	% of Eligible Professionals who Reported >=1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
178	Rheumatoid Arthritis (RA): Functional Status Assessment	150,928	443	0.3%	200	45.2%	43.0%
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	150,928	287	0.2%	105	36.6%	35.9%
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	150,928	341	0.2%	138	40.5%	36.4%
181	Elder Maltreatment Screen and Follow-Up Plan	69,779	40	0.1%	29	72.5%	71.8%
182	Functional Outcome Assessment in Chiropractic Care	47,966	583	1.2%	320	54.9%	58.1%
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	70,640	352	0.5%	232	65.9%	54.8%
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	70,640	325	0.5%	213	65.5%	55.4%
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	17,473	929	5.3%	697	75.0%	68.9%
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	43,350	181	0.4%	109	60.2%	55.5%
188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear	3,329	2	0.1%	2	100.0%	50.0%
189	Referral for Otologic Evaluation for Patients with a History of Active Drainage From the Ear Within the Previous 90 Days	6,480	14	0.2%	8	57.1%	60.2%
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss	14,821	60	0.4%	22	36.7%	36.0%
193	Perioperative Temperature Management	89,502	23,726	26.5%	17,965	75.7%	72.2%

Measure Number	Measure Description	Eligible Professionals	Eligible Professionals who Reported ≥ 1 Valid QDC	% of Eligible Professionals who Reported ≥ 1 Valid QDC	Eligible Professionals who Satisfactorily Reported	% of Eligible Professionals who Satisfactorily Reported	Average Reporting Rate per Eligible Professional
194	Oncology: Cancer Stage Documented	167,746	1,681	1.0%	1,169	69.5%	68.7%
195	Radiology: Stenosis Measurement in Carotid Imaging Studies	64,762	12,496	19.3%	10,456	83.7%	76.3%
201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control	270,941	2,625	1.0%	1,183	45.1%	45.6%
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile	270,941	2,495	0.9%	1,080	43.3%	45.2%
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control	270,941	1,874	0.7%	719	38.4%	39.0%
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	270,941	3,048	1.1%	1,436	47.1%	44.1%
225	Radiology: Reminder System for Mammograms	26,848	5,007	18.7%	3,782	75.5%	68.9%
226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	680,914	23,718	3.5%	10,494	44.2%	42.5%
231	Asthma: Tobacco Use: Screening- Ambulatory Care Setting	86,845	182	0.2%	104	57.1%	38.7%
232	Asthma: Tobacco Use: Intervention- Ambulatory Care Setting	86,845	90	0.1%	55	61.1%	40.7%
235	Hypertension (HTN): Plan of Care	308,960	1,865	0.6%	514	27.6%	28.5%

Notes for Table A13: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims reporting mechanism only. (3) Results were restricted to individual measures (i.e., excluded measures groups). (4) Reporting at least 50 percent of eligible instances defined satisfactory reporting. (5) The reporting rate was the percent of eligible instances on which the eligible professional reported. (6) Eligible professionals who participated in the claims reporting mechanism reported quality data codes (QDC) to indicate the quality action (i.e., the action was performed, not performed, or did not apply).

Table A14. Individual Measures Submitted through the Claims Mechanism where More than 20 Percent of Reported Instances did not Include the Necessary Diagnosis Code (2011)

Measure Number	Measure Description	Number of QDCs Reported	Number of QDCs without Necessary Diagnosis Code	Percent of QDCs without Necessary Diagnosis Code
122	Chronic Kidney Disease (CKD): Blood Pressure Management	187,252	137,335	73.3%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	1,659,457	949,227	57.2%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	27,590	13,089	47.4%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	63,845	24,004	37.6%
135	Chronic Kidney Disease (CKD): Influenza Immunization	4,816	1,785	37.1%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	23,153	7,878	34.0%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	14,484	4,120	28.4%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	15,344	4,094	26.7%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	289,510	76,409	26.4%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	47,115	12,397	26.3%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	143,941	36,508	25.4%
189	Referral for Otologic Evaluation for Patients with a History of Active Drainage From the Ear Within the Previous 90 Days	980	243	24.8%
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	2,799	684	24.4%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	1,691,310	377,672	22.3%

Notes for Table A14: Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only. (3) Results were restricted to individual measures (i.e., excluded measures groups).

Table A15. Individual Measures Submitted through the Claims Mechanism Where More than 20 Percent of Reported Instances did not Include the Necessary Procedure Code for the Physician Quality Reporting System (2011)

Measure Number	Measure Description	Number of QDCs Reported	Number of QDCs without Necessary Procedure Code	Percent of QDCs without Necessary Procedure Code
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	188,130	157,195	83.6%
181	Elder Maltreatment Screen and Follow-Up Plan	4,026	2,291	56.9%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	9,453	3,607	38.2%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	19,476	7,093	36.4%
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	28,272	9,878	34.9%
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	215,382	69,494	32.3%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	153,420	43,880	28.6%
112	Preventive Care and Screening: Screening Mammography	247,297	70,279	28.4%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	192,190	50,124	26.1%
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin	214,666	55,642	25.9%
134	Screening for Clinical Depression and Follow-Up Plan	27,723	6,329	22.8%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	674,212	146,652	21.8%

Notes for Table A15: Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only. (3) Results were restricted to individual measures (i.e., excluded measures groups).

Table A16. Individual Measures Submitted through the Claims Mechanism for the Physician Quality Reporting System Where More than 20 Percent of Reported Instances were for a Patient that did not Meet the Necessary Age Range (2011)

Measure Number	Measure Description	Number of QDCs Reported	Number of QDCs without Necessary Age Range Code	Percent of QDCs without Necessary Age Range Code
66	Appropriate Testing for Children with Pharyngitis	1,285	1,282	99.8%
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	1,220	1,217	99.8%
94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility	417	415	99.5%
231	Asthma: Tobacco Use: Screening- Ambulatory Care Setting	24,019	22,543	93.9%
232	Asthma: Tobacco Use: Intervention- Ambulatory Care Setting	43,355	37,872	87.4%
64	Asthma: Asthma Assessment	6,911	5,501	79.6%
53	Asthma: Pharmacologic Therapy	9,467	6,883	72.7%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	1,240	698	56.3%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	879,644	287,859	32.7%
163	Diabetes Mellitus: Foot Exam	171,854	45,489	26.5%
112	Preventive Care and Screening: Screening Mammography	247,297	61,157	24.7%

Notes for Table A16: Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only. (3) Results were restricted to individual measures (i.e., excluded measures groups).

Table A17. Incentive Eligibility Information by Reporting Mechanism for the Physician Quality Reporting System (2008 to 2011)

Reporting Mechanisms	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Claims Individual Measures	74,810	51.6%	92,147	49.8%	122,567	61.1%	176,706	77.1%
Claims Measures Groups	415	29.4%	603	16.5%	2,182	52.6%	2,877	64.7%
Registry Individual Measures	8,099	93.6%	20,447	89.9%	34,276	87.3%	44,333	88.3%
Registry Measures Groups	3,090	97.6%	9,790	94.5%	16,186	94.5%	11,909	92.4%
EHR	N/A	N/A	N/A	N/A	13	92.9%	503	89.8%
Group Practice Reporting Option (GPRO) I	N/A	N/A	N/A	N/A	24,931	100.0%	39,404	100.0%
Group Practice Reporting Option (GPRO) II	N/A	N/A	N/A	N/A	N/A	N/A	56	7.1%
Total (Unduplicated)	85,481	55.6%	120,665	57.3%	194,278	72.2%	266,521	83.2%

Notes for Table A17: (1) The EHR reporting mechanism was not available before the 2010 program year.

Table A18. Eligible Professionals who Qualified for an Incentive from Individual Measures through the Claims Mechanism for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
MD/DO	55,189	50.3%	68,071	50.1%	89,198	61.5%	125,300	77.1%
Allergy/Immunology	35	34.7%	77	40.3%	115	49.6%	210	61.6%
Anesthesiology	10,338	80.0%	8,001	46.1%	12,743	63.6%	19,352	83.9%
Cardiology	1,651	33.3%	2,300	40.0%	2,600	48.8%	3,463	67.1%
Colon/Rectal Surgery	44	27.7%	61	31.8%	86	40.4%	152	63.9%
Critical Care	65	28.1%	103	32.3%	148	41.9%	295	75.3%
Dermatology	58	28.2%	637	33.9%	318	59.1%	457	67.7%
Emergency Medicine	21,492	74.8%	24,405	78.7%	27,411	85.6%	32,260	94.9%
Endocrinology	308	41.2%	399	44.4%	466	53.8%	709	68.0%
Family Practice	5,361	44.0%	6,889	47.3%	7,857	53.2%	11,424	67.4%
Gastroenterology	215	25.9%	437	30.9%	798	43.8%	1,375	62.4%
General Practice	108	49.3%	160	51.9%	206	55.7%	299	69.1%
General Surgery	740	34.2%	1,003	38.7%	1,393	48.4%	2,126	66.5%
Geriatrics	155	30.3%	208	37.0%	235	41.3%	351	57.1%
Hand Surgery	36	35.6%	52	37.4%	108	58.1%	154	69.7%
Infectious Disease	79	35.3%	148	38.6%	204	45.1%	345	63.5%
Internal Medicine	4,559	37.7%	5,721	40.2%	6,871	47.6%	11,341	66.3%
Interventional Radiologist	60	24.5%	156	36.0%	285	54.6%	513	78.1%
Nephrology	309	27.1%	440	38.0%	449	42.8%	627	56.7%
Neurology	218	24.1%	398	32.1%	703	47.4%	1,262	67.2%
Neurosurgery	197	41.5%	260	44.1%	379	59.8%	503	72.7%
Nuclear Medicine	14	35.9%	48	43.6%	97	70.3%	103	81.7%
Obstetrics/Gynecology	254	24.2%	626	35.3%	880	39.3%	1,629	60.4%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Oncology/Hematology	499	21.7%	841	32.0%	1,116	42.1%	1,888	68.2%
Ophthalmology	1,558	26.9%	3,269	46.4%	4,374	57.9%	6,109	75.5%
Oral/Maxillofacial Surgery	2	33.3%	5	38.5%	5	41.7%	7	53.8%
Orthopaedic Surgery	926	39.1%	1,392	41.9%	2,041	55.4%	2,470	64.1%
Other MD/DO	252	34.9%	323	35.6%	519	50.0%	968	72.9%
Otolaryngology	83	24.1%	244	31.4%	400	44.2%	720	64.5%
Pathology	1,796	42.8%	2,604	57.5%	3,348	70.7%	4,423	91.9%
Pediatrics	118	57.3%	190	59.6%	212	70.2%	348	84.1%
Physical Medicine	77	20.6%	187	37.0%	281	50.8%	462	67.3%
Plastic Surgery	43	42.2%	80	39.6%	137	55.7%	215	73.9%
Psychiatry	110	38.6%	191	35.4%	310	46.0%	511	69.2%
Pulmonary Disease	300	31.1%	425	35.9%	609	42.5%	1,148	64.6%
Radiation Oncology	141	17.6%	182	23.1%	283	37.5%	626	62.9%
Radiologist	1,815	24.3%	4,065	34.7%	8,899	61.1%	13,088	76.9%
Rheumatology	135	26.7%	252	35.0%	311	39.4%	507	60.4%
Thoracic/Cardiac Surgery	546	48.8%	510	47.3%	615	59.3%	755	70.6%
Urology	323	24.2%	553	31.7%	996	44.2%	1,564	59.2%
Vascular Surgery	169	31.8%	229	35.4%	390	53.9%	541	67.9%
Other Eligible Professionals	19,546	55.6%	23,881	48.7%	33,312	60.2%	51,309	77.0%
Agencies/Hospitals/Nursing and Treatment Facilities	73	46.2%	89	43.8%	129	55.4%	207	74.2%
Audiologist	0	.	64	57.1%	107	62.6%	135	58.2%
Certified Nurse Midwives	11	34.4%	35	52.2%	45	62.5%	88	83.8%
Chiropractor	10	3.5%	60	13.0%	208	38.1%	516	60.5%
Clinical Nurse Specialists	46	36.5%	72	45.9%	92	51.4%	153	78.5%
Counselor/Psychologist	60	24.0%	110	26.6%	235	51.0%	436	75.0%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Dentist	4	50.0%	6	37.5%	9	45.0%	23	79.3%
Dietitian/Nutritionist	43	32.3%	74	49.7%	88	64.7%	134	76.1%
Nurse Anesthetist	7,526	96.1%	6,319	53.6%	9,539	66.8%	14,006	81.8%
Nurse Practitioner	2,332	51.4%	3,326	54.8%	4,352	64.8%	6,314	77.8%
Optometry	1,050	21.7%	1,752	30.0%	2,864	41.2%	5,868	66.6%
Other Eligible Professional	2,115	43.8%	3,714	48.5%	4,486	59.1%	6,308	75.9%
Physical/Occupational Therapy	1,579	32.2%	1,864	32.7%	3,105	51.1%	5,637	77.1%
Physician Assistant	4,303	66.7%	5,806	67.3%	7,097	74.5%	9,569	86.3%
Podiatrist	47	16.9%	172	17.7%	349	23.3%	1,098	46.5%
Registered Nurse	310	79.7%	360	53.2%	476	67.3%	594	79.6%
Social Worker	37	32.5%	58	27.8%	131	63.9%	223	77.2%
Unknown/Missing	75	48.7%	195	67.2%	57	62.0%	97	84.3%
Total (Unduplicated)	74,810	51.6%	92,147	49.8%	122,567	61.1%	176,706	77.1%

Notes for Table A18: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only.

Table A19. Eligible Professionals who Qualified for an Incentive from Measures Groups through the Claims Mechanism for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
MD/DO	381	29.1%	513	16.3%	1,950	55.9%	2,518	67.0%
Allergy/Immunology	0	0.0%	1	25.0%	0	0.0%	2	33.3%
Anesthesiology	0	0.0%	11	29.7%	25	65.8%	41	70.7%
Cardiology	8	36.4%	7	16.7%	431	77.1%	504	79.4%
Colon/Rectal Surgery	0	0.0%	0	0.0%	0	0.0%	1	25.0%
Critical Care	0	0.0%	1	11.1%	4	80.0%	6	100.0%
Dermatology	2	40.0%	1	16.7%	5	41.7%	1	100.0%
Emergency Medicine	0	0.0%	1	16.7%	19	40.4%	2	28.6%
Endocrinology	9	24.3%	11	15.5%	33	66.0%	50	75.8%
Family Practice	121	24.4%	110	11.9%	308	40.6%	487	59.0%
Gastroenterology	2	13.3%	5	17.2%	9	50.0%	16	69.6%
General Practice	0	0.0%	3	21.4%	6	50.0%	10	55.6%
General Surgery	3	27.3%	9	6.2%	37	26.4%	49	39.2%
Geriatrics	5	25.0%	5	16.1%	10	27.8%	17	53.1%
Hand Surgery	0	0.0%	0	0.0%	2	50.0%	4	36.4%
Infectious Disease	0	0.0%	1	50.0%	0	0.0%	2	100.0%
Internal Medicine	137	28.6%	151	15.1%	545	60.9%	687	71.1%
Interventional Radiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Nephrology	59	67.8%	16	13.7%	48	52.7%	37	44.0%
Neurology	2	13.3%	3	15.8%	5	50.0%	3	37.5%
Neurosurgery	1	20.0%	15	25.4%	36	50.7%	41	54.7%
Nuclear Medicine	0	0.0%	0	0.0%	0	0.0%	1	100.0%
Obstetrics/Gynecology	2	22.2%	2	4.9%	13	44.8%	26	53.1%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Oncology/Hematology	9	52.9%	5	22.7%	6	25.0%	9	64.3%
Ophthalmology	5	23.8%	2	12.5%	0	0.0%	1	100.0%
Oral/Maxillofacial Surgery	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Orthopaedic Surgery	0	0.0%	91	37.1%	171	60.0%	247	70.8%
Other MD/DO	1	25.0%	6	13.0%	21	51.2%	25	52.1%
Otolaryngology	0	0.0%	2	33.3%	1	25.0%	1	50.0%
Pathology	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Pediatrics	0	0.0%	0	0.0%	1	50.0%	2	50.0%
Physical Medicine	3	27.3%	9	32.1%	24	53.3%	32	50.8%
Plastic Surgery	0	0.0%	2	66.7%	0	0.0%	0	0.0%
Psychiatry	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Pulmonary Disease	4	33.3%	6	25.0%	19	55.9%	32	84.2%
Radiation Oncology	0	0.0%	2	50.0%	0	0.0%	1	100.0%
Radiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Rheumatology	2	40.0%	27	18.1%	138	67.6%	140	76.5%
Thoracic/Cardiac Surgery	0	0.0%	2	22.2%	3	33.3%	6	66.7%
Urology	3	23.1%	4	23.5%	23	76.7%	33	94.3%
Vascular Surgery	3	50.0%	2	12.5%	7	53.8%	2	25.0%
Other Eligible Professionals	34	34.3%	90	18.4%	232	34.9%	358	50.2%
Agencies/Hospitals/Nursing and Treatment Facilities	2	100.0%	1	50.0%	1	100.0%	3	100.0%
Audiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Certified Nurse Midwives	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Chiropractor	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Clinical Nurse Specialists	0	0.0%	1	33.3%	4	44.4%	5	62.5%
Counselor/Psychologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Dentist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Dietitian/Nutritionist	0	0.0%	0	0.0%	0	0.0%	1	33.3%
Nurse Anesthetist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Nurse Practitioner	12	25.0%	39	23.8%	51	33.3%	108	59.0%
Optometry	0	0.0%	5	25.0%	0	0.0%	0	0.0%
Other Eligible Professional	15	45.5%	20	13.2%	120	54.1%	125	62.2%
Physical/Occupational Therapy	0	0.0%	0	0.0%	13	8.2%	50	27.9%
Physician Assistant	4	33.3%	23	20.4%	38	34.9%	59	48.8%
Podiatrist	0	0.0%	0	0.0%	2	28.6%	6	50.0%
Registered Nurse	1	33.3%	1	16.7%	3	60.0%	1	100.0%
Social Worker	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Unknown/Missing	0	0.0%	0	0.0%	0	0.0%	1	100.0%
Total (Unduplicated)	415	29.4%	603	16.5%	2,182	52.6%	2,877	64.3%

Notes for Table A19: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims mechanism only.

Table A20. Eligible Professionals who Qualified for an Incentive from Individual Measures through the Registry Mechanism by Specialty for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
MD/DO	6,709	94.7%	17,458	91.6%	28,961	89.0%	37,544	90.3%
Allergy/Immunology	30	100.0%	75	92.6%	96	91.4%	196	91.2%
Anesthesiology	13	68.4%	60	53.6%	136	79.1%	133	81.1%
Cardiology	325	97.3%	1,303	95.9%	2,090	95.0%	2,798	94.9%
Colon/Rectal Surgery	10	100.0%	23	85.2%	48	94.1%	91	97.8%
Critical Care	21	91.3%	41	95.3%	66	79.5%	86	74.8%
Dermatology	87	98.9%	240	93.4%	1,194	91.1%	1,739	94.8%
Emergency Medicine	111	81.0%	336	91.8%	434	91.4%	465	95.1%
Endocrinology	109	93.2%	365	95.3%	446	95.5%	602	92.6%
Family Practice	2,193	96.9%	4,208	93.3%	6,549	92.8%	8,120	93.7%
Gastroenterology	111	99.1%	327	97.0%	550	89.7%	917	91.0%
General Practice	4	100.0%	46	92.0%	72	90.0%	72	86.7%
General Surgery	179	96.8%	516	92.6%	804	91.3%	1,190	93.1%
Geriatrics	55	91.7%	179	93.2%	232	86.6%	267	83.7%
Hand Surgery	8	100.0%	18	78.3%	58	93.5%	66	93.0%
Infectious Disease	42	97.7%	195	89.0%	312	90.2%	428	89.5%
Internal Medicine	1,687	94.5%	4,154	92.2%	6,452	89.1%	7,873	88.5%
Interventional Radiologist	7	100.0%	22	84.6%	41	82.0%	74	91.4%
Nephrology	68	97.1%	253	94.1%	360	90.7%	532	86.1%
Neurology	116	97.5%	362	93.5%	529	84.4%	734	88.5%
Neurosurgery	47	94.0%	128	92.1%	189	93.1%	227	91.2%
Nuclear Medicine	1	50.0%	9	64.3%	14	53.8%	38	74.5%
Obstetrics/Gynecology	289	93.5%	756	90.8%	1,102	86.4%	1,486	87.1%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Oncology/Hematology	83	98.8%	311	94.8%	598	91.3%	959	89.4%
Ophthalmology	135	91.2%	390	88.4%	988	93.1%	1,263	90.5%
Oral/Maxillofacial Surgery	0	0.0%	0	0.0%	1	50.0%	6	66.7%
Orthopaedic Surgery	277	97.5%	536	95.2%	780	92.6%	1,008	91.1%
Other MD/DO	79	90.8%	119	85.0%	304	81.7%	387	83.2%
Otolaryngology	78	95.1%	213	93.8%	450	91.8%	618	90.0%
Pathology	4	57.1%	12	92.3%	7	24.1%	11	45.8%
Pediatrics	26	40.6%	96	49.7%	145	41.7%	133	38.8%
Physical Medicine	21	95.5%	93	94.9%	158	86.8%	226	83.4%
Plastic Surgery	26	100.0%	81	90.0%	105	92.1%	137	93.2%
Psychiatry	46	97.9%	128	72.7%	128	69.6%	129	56.3%
Pulmonary Disease	96	97.0%	241	94.9%	435	92.4%	721	90.4%
Radiation Oncology	22	95.7%	191	90.1%	303	92.7%	349	90.2%
Radiologist	42	58.3%	322	84.1%	1,215	71.1%	1,416	92.1%
Rheumatology	68	98.6%	202	92.7%	260	90.0%	336	86.4%
Thoracic/Cardiac Surgery	34	100.0%	426	86.4%	550	85.0%	632	83.7%
Urology	132	97.8%	360	90.2%	587	93.8%	851	97.3%
Vascular Surgery	27	100.0%	121	87.1%	173	89.6%	228	90.5%
Other Eligible Professionals	1,386	89.0%	2,974	81.3%	5,313	79.3%	6,786	78.9%
Agencies/Hospitals/Nursing and Treatment Facilities	2	40.0%	7	50.0%	27	64.3%	27	58.7%
Audiologist	2	15.4%	7	21.9%	23	38.3%	13	36.1%
Certified Nurse Midwives	10	71.4%	17	50.0%	31	58.5%	47	56.6%
Chiropractor	2	66.7%	8	66.7%	7	63.6%	7	77.8%
Clinical Nurse Specialists	20	100.0%	24	80.0%	44	93.6%	53	74.6%
Counselor/Psychologist	13	52.0%	39	36.8%	40	40.8%	36	29.0%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Dentist	1	100.0%	3	75.0%	7	63.6%	6	28.6%
Dietitian/Nutritionist	9	81.8%	38	82.6%	44	81.5%	44	89.8%
Nurse Anesthetist	0	0.0%	19	100.0%	11	64.7%	10	16.7%
Nurse Practitioner	520	90.1%	1,084	86.0%	1,821	81.4%	2,419	80.8%
Optometry	46	100.0%	90	90.0%	205	95.3%	251	93.7%
Other Eligible Professional	118	87.4%	522	82.6%	1,045	78.5%	1,311	86.0%
Physical/Occupational Therapy	33	80.5%	55	38.7%	305	68.4%	448	61.0%
Physician Assistant	512	92.3%	841	89.3%	1,403	81.9%	1,801	83.0%
Podiatrist	53	94.6%	143	92.9%	244	93.8%	258	94.5%
Registered Nurse	17	89.5%	35	74.5%	42	62.7%	47	63.5%
Social Worker	28	75.7%	42	49.4%	14	40.0%	8	12.1%
Unknown/Missing	4	50.0%	15	41.7%	2	8.3%	3	11.1%
Total (Unduplicated)	8,099	93.6%	20,447	89.9%	34,276	87.3%	44,333	88.3%

Notes for Table A20: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the registry mechanism only.

Table A21. Eligible Professionals who Received an Incentive from Measures Groups through the Registry Mechanism by Specialty for the Physician Quality Reporting System (2008 to 2011)

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
MD/DO	2,914	97.7%	8,701	95.2%	14,305	95.3%	10,565	92.7%
Allergy/Immunology	41	100.0%	63	98.4%	69	98.6%	10	100.0%
Anesthesiology	3	100.0%	26	76.5%	28	90.3%	28	93.3%
Cardiology	91	98.9%	629	96.6%	2,184	95.8%	1,925	94.4%
Colon/Rectal Surgery	2	100.0%	37	88.1%	24	77.4%	7	100.0%
Critical Care	7	100.0%	14	87.5%	25	96.2%	10	100.0%
Dermatology	4	100.0%	61	96.8%	46	95.8%	17	89.5%
Emergency Medicine	11	84.6%	25	89.3%	59	96.7%	70	94.6%
Endocrinology	42	97.7%	126	96.9%	179	98.4%	138	91.4%
Family Practice	1,438	97.2%	2,746	95.0%	3,880	96.0%	2,639	94.3%
Gastroenterology	28	100.0%	130	92.2%	319	93.8%	162	94.7%
General Practice	17	100.0%	38	95.0%	72	93.5%	49	92.5%
General Surgery	15	100.0%	146	93.6%	327	93.4%	160	90.9%
Geriatrics	42	97.7%	89	89.9%	142	94.7%	101	75.4%
Hand Surgery	1	100.0%	9	90.0%	20	83.3%	13	100.0%
Infectious Disease	5	100.0%	46	97.9%	83	93.3%	57	90.5%
Internal Medicine	772	98.2%	1,898	96.8%	2,938	96.5%	2,239	92.0%
Interventional Radiologist	0	0.0%	0	0.0%	1	100.0%	0	0.0%
Nephrology	145	100.0%	740	98.0%	1,125	96.6%	1,030	96.2%
Neurology	19	95.0%	90	96.8%	81	95.3%	58	92.1%
Neurosurgery	4	100.0%	34	100.0%	62	92.5%	33	86.8%
Nuclear Medicine	0	0.0%	1	100.0%	14	93.3%	11	100.0%
Obstetrics/Gynecology	29	93.5%	130	90.9%	212	93.8%	116	93.5%
Oncology/Hematology	30	100.0%	239	98.8%	292	86.9%	234	96.7%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Ophthalmology	17	100.0%	125	94.0%	162	84.8%	82	78.1%
Oral/Maxillofacial Surgery	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Orthopaedic Surgery	14	93.3%	324	91.3%	556	97.4%	388	91.1%
Other MD/DO	4	100.0%	45	88.2%	90	91.8%	65	87.8%
Otolaryngology	21	100.0%	140	95.2%	222	95.3%	177	98.9%
Pathology	0	0.0%	1	100.0%	0	0.0%	0	0.0%
Pediatrics	0	0.0%	13	92.9%	15	93.8%	7	100.0%
Physical Medicine	3	100.0%	52	86.7%	72	97.3%	42	91.3%
Plastic Surgery	0	0.0%	18	81.8%	16	88.9%	7	100.0%
Psychiatry	0	0.0%	6	75.0%	5	45.5%	4	100.0%
Pulmonary Disease	50	96.2%	131	94.9%	213	95.1%	140	95.9%
Radiation Oncology	0	0.0%	28	93.3%	14	53.8%	19	61.3%
Radiologist	0	0.0%	2	20.0%	2	100.0%	0	0.0%
Rheumatology	14	100.0%	250	94.0%	350	94.6%	304	82.8%
Thoracic/Cardiac Surgery	4	100.0%	29	100.0%	53	94.6%	13	31.7%
Urology	30	100.0%	189	96.9%	283	93.4%	164	95.3%
Vascular Surgery	11	100.0%	31	88.6%	70	94.6%	46	90.2%
Other Eligible Professionals	176	96.2%	1,087	89.8%	1,877	89.0%	1,342	90.2%
Agencies/Hospitals/Nursing and Treatment Facilities	0	0.0%	6	40.0%	9	40.9%	5	21.7%
Audiologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Certified Nurse Midwives	0	0.0%	2	100.0%	4	100.0%	0	0.0%
Chiropractor	0	0.0%	2	50.0%	0	0.0%	0	0.0%
Clinical Nurse Specialists	1	100.0%	9	75.0%	7	100.0%	7	100.0%
Counselor/Psychologist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Dentist	0	0.0%	2	66.7%	0	0.0%	0	0.0%
Dietitian/Nutritionist	0	0.0%	2	100.0%	5	100.0%	3	100.0%

Specialty	Eligible Professionals who Qualified for an Incentive in 2008	Incentive Eligibility Rate in 2008	Eligible Professionals who Qualified for an Incentive in 2009	Incentive Eligibility Rate in 2009	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligibility Rate in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligibility Rate in 2011
Nurse Anesthetist	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Nurse Practitioner	54	98.2%	304	88.4%	539	90.1%	460	91.5%
Optometry	4	100.0%	39	88.6%	50	79.4%	11	78.6%
Other Eligible Professional	78	96.3%	448	93.3%	807	93.2%	557	93.1%
Physical/Occupational Therapy	0	0.0%	4	80.0%	32	55.2%	29	96.7%
Physician Assistant	34	94.4%	192	89.7%	280	90.0%	210	87.5%
Podiatrist	3	75.0%	71	89.9%	135	93.8%	50	84.7%
Registered Nurse	2	100.0%	6	100.0%	9	90.0%	10	100.0%
Social Worker	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Unknown/Missing	0	0.0%	2	18.2%	4	21.1%	2	14.3%
Total (Unduplicated)	3,090	97.6%	9,790	94.5%	16,186	94.5%	11,909	92.4%

Notes for Table A21: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the registry mechanism only.

Table A22. Eligible Professional (EP) Eligibility and Participation Information by Individual Measure for the Physician Quality Reporting System (2008 to 2011)

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus	296,553	312,216	326,948	334,030	7.6%	9.8%	10.1%	11.2%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	296,541	312,292	326,622	333,895	7.3%	9.6%	9.4%	10.5%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	296,494	312,127	326,697	334,305	7.0%	9.0%	9.1%	10.8%
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	229,284	235,550	3,720	4,413	4.3%	4.8%	94.8%	94.3%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	239,666	246,987	248,770	257,372	5.4%	7.1%	7.2%	8.3%
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a, b, c}	98,134	1,953	4,172	5,961	6.4%	100.0%	95.9%	96.0%
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a, b}	203,665	207,872	2,164	2,566	2.5%	3.7%	96.2%	92.7%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	238,366	252,456	255,966	264,734	0.3%	0.5%	0.5%	0.8%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	34,262	34,248	33,449	30,481	21.5%	26.6%	32.4%	41.3%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	45,293	46,188	44,213	45,691	19.4%	22.5%	25.7%	29.4%
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	68,311	70,802	72,987	76,420	12.9%	14.8%	16.3%	18.5%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	43,472	45,255	45,963	48,175	16.5%	18.3%	19.3%	21.3%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	43,473	45,254	45,974	48,165	13.1%	9.3%	10.7%	12.7%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	101,818	102,657	97,559	96,538	7.2%	8.5%	9.6%	5.9%
21	Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin	90,892	73,279	69,190	69,020	6.1%	8.8%	9.9%	9.8%
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	94,023	94,892	89,935	88,932	5.5%	5.1%	5.9%	5.8%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	78,090	78,337	76,925	76,521	5.6%	6.9%	7.7%	7.7%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post-Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	112,008	115,427	101,443	224,361	0.8%	1.0%	0.9%	0.4%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	30,090	30,422	31,663	38,884	44.9%	49.2%	52.3%	49.9%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	29,426	81,831	81,075	83,398	81.7%	38.1%	43.8%	49.0%
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	90,981	96,247	97,567	101,837	1.2%	2.1%	3.4%	4.0%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	90,885	92,266	101,842	103,182	2.6%	3.3%	4.4%	5.4%
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge ^{a, b, c}	23,956	46	851	960	2.5%	100.0%	80.7%	100.0%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	70,552	73,658	72,590	74,997	1.2%	1.4%	2.4%	3.0%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	67,683	71,280	81,074	84,064	2.0%	3.6%	4.5%	5.3%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	509,352	522,062	532,868	538,622	1.0%	2.3%	2.3%	2.6%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	112,011	115,488	101,542	224,400	1.1%	1.5%	1.4%	0.8%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	179,241	182,957	180,391	179,379	2.1%	3.0%	3.2%	3.2%
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	4,098	4,145	4,032	3,845	31.4%	36.7%	37.6%	38.1%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	4,098	4,145	4,031	3,845	22.6%	29.9%	30.6%	30.8%
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	4,872	4,531	4,373	4,154	23.2%	27.3%	28.7%	29.6%
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility ^c	428,889	283	498,294	501,894	0.5%	100.0%	0.2%	0.3%
47	Advance Care Plan	598,863	616,386	630,017	654,277	0.9%	1.3%	1.6%	2.2%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	509,330	527,926	539,520	546,207	0.7%	1.3%	1.3%	1.5%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	119,399	125,467	125,304	126,078	1.4%	2.0%	2.0%	2.3%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	119,399	125,347	125,325	125,992	1.3%	1.8%	2.0%	2.3%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	207,117	213,286	215,296	217,821	1.0%	1.5%	1.7%	1.8%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	207,115	213,100	215,197	217,697	0.8%	1.0%	1.2%	1.1%
53	Asthma: Pharmacologic Therapy	45,936	49,043	50,360	83,305	0.8%	1.6%	2.3%	2.0%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	64,069	65,574	69,637	72,175	52.9%	57.6%	57.0%	59.5%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	50,506	52,051	54,135	55,279	56.4%	60.7%	62.0%	64.9%
56	Community-Acquired Pneumonia (CAP): Vital Signs	197,524	203,661	203,053	207,255	14.5%	16.1%	17.1%	18.0%
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	197,530	203,664	203,053	207,257	16.5%	18.1%	19.2%	20.1%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	197,524	203,661	203,049	207,233	14.4%	16.1%	17.3%	18.2%
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	197,530	203,659	203,047	207,245	10.1%	11.4%	12.4%	13.2%
64	Asthma: Asthma Assessment	45,937	48,987	50,034	83,237	0.5%	1.1%	0.8%	1.2%
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	176	190	174	226	--	1.6%	4.0%	15.0%
66	Appropriate Testing for Children with Pharyngitis	135	144	134	189	--	--	0.7%	25.4%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	24,663	26,897	28,262	30,109	4.3%	5.4%	5.7%	4.7%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	19,621	21,629	22,972	24,512	4.6%	6.1%	5.7%	4.7%
69	Multiple Myeloma: Treatment with Bisphosphonates	31,967	34,311	35,484	37,308	4.9%	5.7%	5.8%	5.1%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	32,693	34,690	35,264	37,516	4.3%	5.0%	5.1%	4.7%
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	101,354	104,127	131,106	134,396	1.5%	1.8%	1.6%	1.5%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	67,395	68,634	89,303	93,124	1.8%	2.0%	1.9%	1.9%
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	87,907	91,089	89,791	89,550	4.9%	10.1%	16.3%	19.0%
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	9,004	9,264	9,206	8,996	5.2%	3.1%	2.1%	1.5%
81	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Hemodialysis in ESRD Patients ^{a, b, c}	8,889	24	13	31	7.2%	100.0%	100.0%	9.7%
82	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Peritoneal Dialysis ^{a, b, c}	6,666	10	10	28	6.5%	100.0%	100.0%	--
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a, b}	62,794	65,824	246	252	0.5%	0.8%	81.3%	57.5%
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	32,725	34,823	36,074	39,469	0.8%	1.0%	1.3%	0.9%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	32,726	34,821	36,074	39,468	0.8%	1.0%	1.3%	0.8%
86	Hepatitis C: Antiviral Treatment Prescribed	32,725	34,821	36,078	39,511	0.6%	0.8%	1.2%	1.0%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	32,726	34,821	36,072	39,462	0.4%	0.6%	0.8%	0.5%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	62,793	65,822	67,336	70,676	0.4%	0.6%	0.8%	1.1%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	23,742	25,205	25,973	28,327	0.3%	0.5%	0.8%	0.4%
91	Acute Otitis Externa (AOE): Topical Therapy	85,385	87,451	87,135	105,733	0.4%	0.6%	0.9%	1.5%
92	Acute Otitis Externa (AOE): Pain Assessment	85,384	87,427	87,093	105,669	0.3%	0.5%	0.5%	1.0%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	85,384	87,449	87,128	105,720	0.3%	0.5%	0.6%	1.0%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility	27	21	30	41	--	--	--	2.4%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	7,491	7,241	7,295	7,125	54.4%	60.4%	62.4%	64.5%
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	7,117	6,843	6,855	6,734	54.7%	61.4%	63.2%	66.1%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	8,747	8,140	7,926	7,911	3.1%	6.7%	6.7%	7.8%
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	4,475	4,118	4,057	4,128	5.3%	12.0%	12.7%	14.7%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	4,405	4,025	3,996	4,039	10.7%	14.3%	15.0%	18.8%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	158	104,999	108,497	115,853	100.0%	0.5%	0.6%	0.7%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	258	104,999	108,499	115,856	100.0%	0.6%	0.7%	0.8%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	140,370	144,600	146,599	151,136	0.4%	0.9%	0.9%	1.1%
109	Osteoarthritis (OA): Function and Pain Assessment	208,994	213,200	213,659	218,885	0.2%	0.8%	0.8%	0.7%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	543,704	562,179	575,237	587,537	1.2%	2.5%	3.1%	4.7%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	555,840	568,953	569,825	590,388	1.1%	2.7%	3.1%	4.7%
112	Preventive Care and Screening: Screening Mammography	504,608	516,622	515,671	523,430	0.9%	2.5%	2.8%	3.6%
113	Preventive Care and Screening: Colorectal Cancer Screening	552,107	564,588	558,467	569,384	0.6%	2.2%	2.7%	3.7%

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116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	98,563	99,564	98,605	100,215	0.2%	0.3%	0.4%	0.4%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	320,355	326,026	340,041	347,761	2.3%	4.0%	4.3%	5.2%
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) ^{a, b}	215,770	222,374	1,751	2,266	0.7%	1.7%	100.0%	96.6%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	321,407	311,093	325,839	332,508	1.5%	3.0%	3.1%	3.7%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	37,451	46,392	53,494	61,611	0.7%	3.2%	4.4%	3.7%
122	Chronic Kidney Disease (CKD): Blood Pressure Management	37,452	46,295	53,335	61,449	1.2%	3.1%	4.3%	3.4%
123	Chronic Kidney Disease (CKD): Plan of Care – Elevated Hemoglobin for Patients Receiving Erythropoiesis-Stimulating Agents (ESA)	37,450	46,026	52,359	60,684	0.9%	1.6%	1.2%	0.9%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	735,245	758,066	761,891	781,820	1.7%	5.0%	6.9%	9.1%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	317,190	357,891	338,908	345,501	0.4%	0.8%	1.0%	1.4%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	317,155	357,851	338,907	345,497	0.2%	0.6%	0.7%	1.0%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	732,278	782,405	704,404	722,617	0.3%	1.1%	1.3%	2.7%
130	Documentation and Verification of Current Medications in the Medical Record	265,808	768,837	691,221	710,120	0.7%	2.1%	3.4%	6.2%

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131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	164,139	167,391	170,678	177,520	2.2%	3.3%	3.6%	4.5%
134	Screening for Clinical Depression and Follow-Up Plan	96,875	116,337	117,265	120,628	0.2%	0.3%	0.5%	0.6%
135	Chronic Kidney Disease (CKD): Influenza Immunization	n/a	46,108	52,367	45,132	n/a	1.6%	1.3%	0.6%
137	Melanoma: Continuity of Care – Recall System ^{a, b}	n/a	53,101	1,595	1,902	n/a	4.1%	99.2%	97.2%
138	Melanoma: Coordination of Care ^{a, b}	n/a	44,935	1,246	1,809	n/a	2.3%	99.1%	97.5%
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	n/a	70,379	72,524	75,907	n/a	7.8%	10.0%	12.5%
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	n/a	43,409	44,154	45,600	n/a	6.4%	8.7%	11.6%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	n/a	213,059	213,553	218,874	n/a	0.5%	0.7%	0.9%
143	Oncology: Medical and Radiation – Pain Intensity Quantified ^{a, b}	n/a	20,975	61	54	n/a	2.6%	100.0%	100.0%
144	Oncology: Medical and Radiation – Plan of Care for Pain ^{a, b}	n/a	352	18	46	n/a	98.0%	100.0%	100.0%
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	n/a	127,907	125,169	108,364	n/a	6.1%	8.7%	12.3%
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening ^d	n/a	28,703	27,027	23,526	n/a	20.2%	28.4%	39.7%
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	n/a	19,234	19,252	18,169	n/a	22.8%	33.2%	44.4%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	n/a	46,024	52,360	60,692	n/a	1.0%	1.0%	1.0%
154	Falls: Risk Assessment	n/a	606,031	607,979	622,542	n/a	1.5%	1.4%	1.7%

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155	Falls: Plan of Care	n/a	6,854	6,688	8,268	n/a	47.5%	60.9%	70.7%
156	Oncology: Radiation Dose Limits to Normal Tissues	n/a	3,706	3,661	3,557	n/a	8.3%	11.6%	15.2%
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	n/a	3,299	3,105	2,984	n/a	1.5%	1.5%	2.0%
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	n/a	6,742	6,464	6,181	n/a	4.6%	6.0%	7.8%
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage ^{a, b, c}	n/a	92	96	112	n/a	100.0%	100.0%	99.1%
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a, b, c}	n/a	74	87	74	n/a	100.0%	100.0%	94.6%
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy ^{a, b, c}	n/a	60	61	70	n/a	100.0%	100.0%	95.7%
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy ^{a, b, c}	n/a	69	68	85	n/a	100.0%	100.0%	96.5%
163	Diabetes Mellitus: Foot Exam	n/a	310,547	324,827	331,724	n/a	1.6%	1.7%	2.6%
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation) ^{a, b, c}	n/a	15	16	5	n/a	100.0%	100.0%	80.0%
165	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate ^{a, b, c, d}	n/a	11	19	5	n/a	100.0%	100.0%	80.0%
166	Coronary Artery Bypass Graft (CABG): Stroke/Cerebrovascular Accident (CVA) ^{a, b, c, d}	n/a	4	11	2	n/a	100.0%	100.0%	50.0%
167	Coronary Artery Bypass Graft (CABG): Postoperative Renal Insufficiency ^{a, b, c, d}	n/a	4	7	2	n/a	100.0%	100.0%	50.0%
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a, b, c, d}	n/a	12	16	7	n/a	100.0%	100.0%	85.7%
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge ^{a, b, c}	n/a	14	16	10	n/a	100.0%	100.0%	90.0%

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170	Coronary Artery Bypass Graft (CABG): Beta-Blockers Administered at Discharge ^{a, b, c}	n/a	13	15	2	n/a	100.0%	100.0%	50.0%
171	Coronary Artery Bypass Graft (CABG): Lipid Management and Counseling ^{a, b, c}	n/a	13	14	2	n/a	100.0%	100.0%	50.0%
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	n/a	4,922	4,823	4,807	n/a	2.7%	3.7%	4.8%
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	n/a	625,600	662,216	675,446	n/a	0.3%	0.7%	1.2%
175	Pediatric End Stage Renal Disease (ESRD): Influenza Immunization	n/a	260	298	290	n/a	3.5%	n/a	n/a
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	n/a	130,424	146,538	150,934	n/a	0.4%	0.3%	0.3%
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	n/a	130,424	146,538	150,932	n/a	0.4%	0.4%	0.3%
178	Rheumatoid Arthritis (RA): Functional Status Assessment	n/a	130,423	146,537	150,932	n/a	0.4%	0.4%	0.3%
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	n/a	130,423	146,537	150,932	n/a	0.3%	0.3%	0.2%
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	n/a	130,423	146,537	150,942	n/a	0.4%	0.4%	0.3%
181	Elder Maltreatment Screen and Follow-Up Plan	n/a	65,240	66,877	69,780	n/a	0.1%	0.1%	0.1%
182	Functional Outcome Assessment in Chiropractic Care	n/a	47,529	47,621	47,966	n/a	0.3%	0.6%	1.2%
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	n/a	55,571	67,361	70,698	n/a	1.2%	0.7%	0.9%
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	n/a	55,570	67,359	70,695	n/a	1.2%	0.6%	0.8%
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	n/a	16,486	17,192	17,475	n/a	4.0%	4.8%	5.8%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	n/a	7,851	11,493	43,358	n/a	1.1%	1.0%	0.5%
187	Stroke and Stroke Rehabilitation: Thrombolytic Therapy ^{a, b}	n/a	n/a	15	13	n/a	n/a	100.0%	100.0%
188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear	n/a	n/a	3,444	3,330	n/a	n/a	0.1%	0.1%
189	Referral for Otologic Evaluation for Patients with History of Active Drainage From the Ear Within the Previous 90 Days	n/a	n/a	6,815	6,480	n/a	n/a	0.2%	0.2%
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss	n/a	n/a	14,519	14,822	n/a	n/a	0.3%	0.4%
191	Cataracts: 20/40 or Better Visual Acuity Within 90 Days Following Cataract Surgery ^{a, b}	n/a	n/a	170	242	n/a	n/a	100.0%	94.6%
192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures ^{a, b}	n/a	n/a	149	226	n/a	n/a	99.3%	91.2%
193	Perioperative Temperature Management	n/a	n/a	85,758	89,505	n/a	n/a	17.2%	26.6%
194	Oncology: Cancer Stage Documented	n/a	n/a	164,235	167,770	n/a	n/a	0.7%	1.2%
195	Stenosis Measurement in Carotid Imaging Studies	n/a	n/a	65,456	64,773	n/a	n/a	16.9%	19.9%
196	Coronary Artery Disease (CAD): Symptom and Activity Assessment ^{a, b}	n/a	n/a	596	916	n/a	n/a	100.0%	96.9%
197	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol ^{a, b}	n/a	n/a	1,778	4,329	n/a	n/a	100.0%	100.0%
198	Heart Failure: Left Ventricular Function (LVF) Assessment ^{a, b}	n/a	n/a	927	1,246	n/a	n/a	100.0%	99.3%
199	Heart Failure: Patient Education ^{a, b}	n/a	n/a	624	1,005	n/a	n/a	100.0%	96.7%
200	Heart Failure: Warfarin Therapy Patients with Atrial Fibrillation ^{a, b}	n/a	n/a	814	1,738	n/a	n/a	100.0%	100.0%

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201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control	n/a	n/a	264,191	272,354	n/a	n/a	1.7%	2.9%
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile	n/a	n/a	263,684	271,571	n/a	n/a	1.2%	2.1%
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control	n/a	n/a	264,240	272,129	n/a	n/a	1.7%	2.4%
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	n/a	n/a	264,152	272,232	n/a	n/a	1.7%	3.0%
205	HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia and Gonorrhea ^{a, b}	n/a	n/a	50	30	n/a	n/a	100.0%	83.3%
206	HIV/AIDS: Screening for High Risk Sexual Behaviors ^{a, b}	n/a	n/a	22	17	n/a	n/a	100.0%	70.6%
207	HIV/AIDS: Screening for Injection Drug Use ^{a, b}	n/a	n/a	23	17	n/a	n/a	100.0%	70.6%
208	HIV/AIDS: Sexually Transmitted Disease Screening for Syphilis ^{a, b}	n/a	n/a	70	30	n/a	n/a	100.0%	86.7%
209	Functional Communication Measure - Spoken Language Comprehension ^{a, b}	n/a	n/a	10	23	n/a	n/a	100.0%	100.0%
210	Functional Communication Measure - Attention ^{a, b}	n/a	n/a	6	15	n/a	n/a	100.0%	100.0%
211	Functional Communication Measure - Memory ^{a, b}	n/a	n/a	10	21	n/a	n/a	100.0%	100.0%
212	Functional Communication Measure - Motor Speech ^{a, b}	n/a	n/a	6	14	n/a	n/a	100.0%	100.0%
213	Functional Communication Measure - Reading ^{a, b}	n/a	n/a	4	8	n/a	n/a	100.0%	100.0%
214	Functional Communication Measure - Spoken Language Expression ^{a, b}	n/a	n/a	12	25	n/a	n/a	100.0%	100.0%
215	Functional Communication Measure - Writing ^{a, b}	n/a	n/a	3	2	n/a	n/a	100.0%	100.0%
216	Functional Communication Measure - Swallowing ^{a, b}	n/a	n/a	10	21	n/a	n/a	100.0%	100.0%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
217	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments ^a	n/a	n/a	n/a	153	n/a	n/a	n/a	100.0%
218	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments ^a	n/a	n/a	n/a	146	n/a	n/a	n/a	100.0%
219	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot, or Ankle Impairments ^a	n/a	n/a	n/a	129	n/a	n/a	n/a	100.0%
220	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine impairments ^a	n/a	n/a	n/a	172	n/a	n/a	n/a	100.0%
221	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments ^a	n/a	n/a	n/a	165	n/a	n/a	n/a	100.0%
222	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist, or hand Impairments ^a	n/a	n/a	n/a	91	n/a	n/a	n/a	100.0%
223	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or other General Orthopedic Impairments ^a	n/a	n/a	n/a	155	n/a	n/a	n/a	100.0%
224	Melanoma: Overutilization of Imaging Studies in Stage 0-IA Melanoma ^a	n/a	n/a	n/a	1,806	n/a	n/a	n/a	97.6%
225	Radiology: Reminder System for Mammograms	n/a	n/a	n/a	26,858	n/a	n/a	n/a	20.3%
226	Preventive Care and Screening: Tobacco use: Screening and Cessation intervention	n/a	n/a	n/a	682,002	n/a	n/a	n/a	5.6%
228	Heart Failure (HF): Left Ventricular Function (LVF) Testing ^a	n/a	n/a	n/a	213	n/a	n/a	n/a	30.0%
231	Asthma: Tobacco Use: Screening - Ambulatory Care Setting	n/a	n/a	n/a	86,880	n/a	n/a	n/a	0.3%

Measure Number	Measure Description	EPs in 2008	EPs in 2009	EPs in 2010	EPs in 2011	Reporting Rate in 2008	Reporting Rate in 2009	Reporting Rate in 2010	Reporting Rate in 2011
232	Asthma: Tobacco Use: Intervention - Ambulatory Care Setting	n/a	n/a	n/a	86,846	n/a	n/a	n/a	0.1%
233	Thoracic Surgery: Recording of Performance Status Prior to Lung or Esophageal Cancer Resection ^a	n/a	n/a	n/a	1	n/a	n/a	n/a	n/a
234	Thoracic Surgery: Pulmonary Function Tests Before Major Anatomic Lung Resection (Pneumonectomy, Lobectomy, or Formal Segmentectomy) ^a	n/a	n/a	n/a	1	n/a	n/a	n/a	n/a
235	Hypertension (HTN): Plan of Care	n/a	n/a	n/a	308,982	n/a	n/a	n/a	0.8%
237	Hypertension (HTN): Blood Pressure Measurement ^a	n/a	n/a	n/a	227	n/a	n/a	n/a	100.0%
238	Drugs to be Avoided in the Elderly ^a	n/a	n/a	n/a	552	n/a	n/a	n/a	100.0%
239	Weight Assessment and Counseling for Children and Adolescents ^a	n/a	n/a	n/a	52	n/a	n/a	n/a	100.0%
240	Childhood Immunization Status ^a	n/a	n/a	n/a	11	n/a	n/a	n/a	100.0%

^a Measure was not reportable via claims during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 227, 228, 229, 230, 233, 234, 236, 237, 238, 239, 240).

^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 136, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216).

^c Measure was not reportable via claims (e.g., registry only) during the 2009 program year (Measures 7, 33, 46, 81, 82, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174).

Notes: (1) Eligible professional-level results in this table do not include EPs who were part of a practice that participated under the GPRO. (2) These results are restricted to individual measures (i.e., excluded measures groups). (3) We only have eligibility information in claims; participation in nonclaims measures (e.g., registry only measures) was used as a proxy for eligibility, which results in artificial 100% participation rates. (4) We applied the following hierarchy if an EP participated in multiple mechanisms: EHR, Claims 12-month, Registry 12-month, and Registry 6-month. For example, if an EP participated in both claims and registry mechanisms, the information from claims was used.

Table A23. Reporting and Performance Information by Individual Measure for the Physician Quality Reporting System (2008 to 2011)

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus ^d	70.8%	78.8%	80.6%	82.0%	11.3%	12.3%	21.9%	23.3%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	70.6%	79.1%	80.6%	82.4%	66.4%	67.0%	57.0%	55.1%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	69.8%	78.2%	79.9%	81.9%	55.6%	59.3%	58.6%	70.7%
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	63.7%	68.2%	91.0%	98.0%	71.9%	94.5%	85.6%	79.7%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	69.8%	76.8%	77.1%	80.6%	90.9%	86.5%	85.3%	85.2%
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a, b, c}	73.7%	99.8%	95.6%	97.2%	93.4%	60.9%	71.4%	82.1%
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a, b}	69.3%	74.2%	91.7%	97.0%	94.7%	95.0%	82.7%	75.8%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	61.2%	66.9%	62.9%	67.8%	75.0%	60.2%	68.6%	71.4%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	59.9%	66.1%	71.5%	73.9%	61.1%	65.4%	68.0%	66.4%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	61.4%	69.4%	74.5%	74.4%	95.9%	95.9%	95.2%	95.5%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	59.3%	67.9%	70.0%	70.9%	96.8%	96.1%	95.7%	94.2%
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	59.1%	66.5%	68.9%	70.1%	97.8%	96.8%	97.0%	96.3%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	56.4%	62.2%	65.8%	66.9%	34.4%	92.5%	91.5%	93.1%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	65.4%	70.9%	73.9%	73.7%	94.2%	92.4%	92.6%	93.9%
21	Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin	64.9%	70.2%	73.4%	74.6%	90.9%	90.0%	89.4%	92.3%
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	63.3%	69.7%	71.9%	72.1%	61.5%	94.5%	93.4%	95.0%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	66.6%	71.0%	72.7%	74.5%	91.0%	90.0%	91.2%	94.4%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post-Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	52.6%	66.2%	68.8%	54.0%	61.8%	49.0%	50.6%	62.4%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	86.7%	89.6%	91.4%	88.9%	81.6%	81.5%	83.5%	85.3%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	96.3%	71.8%	78.5%	82.1%	94.2%	91.4%	92.0%	93.3%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	65.3%	72.0%	77.8%	80.3%	79.9%	83.6%	78.6%	82.8%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	66.3%	70.6%	65.4%	70.5%	82.4%	85.1%	82.8%	84.6%
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge ^{a, b, c}	77.8%	100.0%	85.3%	90.6%	73.3%	45.3%	79.4%	83.5%
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	64.5%	67.1%	74.6%	77.9%	51.4%	76.7%	84.3%	90.6%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	66.2%	72.7%	63.1%	68.9%	76.3%	71.9%	69.7%	72.8%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	53.9%	71.3%	71.4%	69.6%	59.9%	56.1%	55.1%	59.5%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	60.0%	70.0%	76.2%	56.3%	71.4%	56.5%	46.8%	70.6%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	60.5%	76.1%	79.6%	76.1%	85.0%	74.7%	72.5%	70.2%
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	76.7%	85.8%	90.1%	90.6%	97.9%	97.6%	97.9%	98.3%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	71.4%	86.4%	90.8%	91.8%	92.6%	91.0%	92.0%	94.0%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	69.6%	83.3%	87.7%	87.4%	73.8%	99.4%	99.4%	99.0%
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility ^c	44.2%	100.0%	65.7%	49.2%	66.5%	91.6%	91.3%	95.9%
47	Advance Care Plan	56.7%	64.7%	68.2%	67.3%	48.9%	45.7%	50.7%	52.5%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	44.1%	51.5%	54.8%	52.5%	72.0%	57.3%	66.5%	72.3%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	63.3%	74.1%	71.4%	70.3%	85.7%	68.9%	82.5%	85.2%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	64.0%	71.6%	70.3%	67.7%	85.2%	76.4%	82.7%	89.8%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	63.9%	75.9%	74.0%	66.9%	73.0%	53.5%	56.0%	68.3%
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	60.1%	70.1%	74.2%	62.9%	67.7%	92.7%	89.7%	73.4%
53	Asthma: Pharmacologic Therapy	86.0%	91.8%	94.3%	87.3%	76.2%	83.4%	81.7%	69.1%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	82.5%	85.9%	87.7%	88.8%	94.1%	94.6%	95.1%	95.0%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	85.7%	88.9%	90.6%	91.3%	95.7%	96.1%	96.4%	96.6%
56	Community-Acquired Pneumonia (CAP): Vital Signs	84.0%	88.6%	89.2%	90.5%	94.0%	94.0%	95.0%	95.7%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	87.0%	89.0%	89.9%	91.1%	91.7%	92.7%	94.0%	94.8%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	85.8%	89.5%	90.1%	91.4%	94.7%	95.4%	96.5%	97.7%
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	82.9%	86.1%	86.5%	89.4%	91.5%	92.2%	92.4%	93.2%
64	Asthma: Asthma Assessment	87.3%	92.5%	89.3%	83.1%	57.2%	34.2%	48.6%	40.6%
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	--	100.0%	100.0%	99.0%	--	66.7%	85.7%	93.9%
66	Appropriate Testing for Children with Pharyngitis	--	--	100.0%	99.3%	--	--	100.0%	100.0%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	57.2%	66.5%	73.7%	74.0%	93.9%	90.9%	88.8%	94.6%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	54.6%	64.4%	69.3%	71.1%	78.3%	97.7%	94.7%	97.7%
69	Multiple Myeloma: Treatment with Bisphosphonates	64.5%	71.3%	75.9%	76.4%	90.2%	86.1%	81.7%	89.5%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	66.2%	72.9%	77.9%	78.4%	95.1%	92.6%	88.3%	95.3%
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	52.6%	61.5%	69.0%	64.6%	70.4%	96.4%	90.6%	94.0%
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	53.4%	62.6%	67.6%	66.1%	73.6%	98.8%	93.2%	93.7%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	63.3%	76.1%	80.4%	82.9%	81.7%	77.2%	77.4%	81.3%
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	36.8%	62.6%	67.1%	72.0%	73.2%	63.4%	68.4%	77.7%
81	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Hemodialysis in ESRD Patients ^{a, b, c}	56.8%	100.0%	100.0%	100.0%	85.7%	16.0%	6.7%	94.4%
82	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Peritoneal Dialysis ^{a, b, c}	54.6%	100.0%	100.0%	--	37.2%	0.0%	10.0%	--
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a, b}	68.3%	74.2%	98.7%	97.7%	54.6%	70.6%	34.8%	23.9%
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	77.5%	76.3%	79.6%	68.3%	64.6%	84.5%	86.1%	89.9%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	71.2%	74.8%	77.7%	65.9%	67.3%	88.4%	88.4%	93.5%
86	Hepatitis C: Antiviral Treatment Prescribed	67.7%	77.6%	84.0%	77.0%	61.0%	46.0%	41.2%	45.8%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	70.6%	79.2%	80.2%	67.0%	59.1%	74.5%	78.5%	85.8%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	70.1%	72.4%	75.8%	75.2%	63.9%	57.6%	59.4%	60.3%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	83.6%	81.9%	83.1%	64.0%	61.8%	50.8%	70.2%	91.5%
91	Acute Otitis Externa (AOE): Topical Therapy	80.6%	81.3%	82.7%	85.1%	62.0%	72.4%	73.8%	83.7%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
92	Acute Otitis Externa (AOE): Pain Assessment	80.6%	80.1%	76.3%	82.1%	34.7%	40.3%	59.4%	85.6%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	78.9%	82.0%	81.3%	85.8%	37.6%	45.5%	63.3%	78.2%
94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility	n/a	--	--	100.0%	n/a	--	--	--
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	72.6%	80.2%	80.7%	82.3%	95.8%	96.6%	97.5%	96.8%
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	80.0%	87.2%	87.4%	87.6%	96.9%	97.5%	98.5%	98.0%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	61.7%	60.0%	72.8%	69.6%	53.5%	65.5%	71.6%	90.5%
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	52.2%	54.6%	72.6%	67.6%	75.7%	75.8%	79.6%	93.5%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	55.8%	62.5%	70.9%	69.3%	83.3%	82.4%	94.7%	98.6%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	100.0%	72.2%	69.6%	74.9%	52.8%	68.0%	77.3%	78.4%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	85.2%	66.2%	72.0%	73.8%	61.8%	69.0%	80.8%	82.3%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	76.4%	80.9%	70.2%	76.1%	73.4%	66.5%	79.9%	70.2%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
109	Osteoarthritis (OA): Function and Pain Assessment	62.1%	73.6%	63.9%	40.0%	59.3%	41.3%	51.7%	80.1%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	65.7%	72.6%	72.2%	76.9%	53.8%	50.9%	51.2%	49.6%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	60.4%	76.7%	75.8%	80.8%	56.2%	52.8%	54.5%	57.1%
112	Preventive Care and Screening: Screening Mammography	66.9%	76.4%	76.6%	78.0%	59.0%	56.1%	53.5%	56.5%
113	Preventive Care and Screening: Colorectal Cancer Screening	50.6%	73.9%	73.0%	76.4%	59.5%	50.5%	52.0%	52.5%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	88.9%	90.6%	81.7%	67.6%	81.0%	55.3%	42.3%	44.1%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	54.6%	65.9%	66.9%	65.8%	81.1%	73.0%	79.7%	80.3%
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) a, b	56.6%	72.4%	90.3%	97.1%	82.0%	73.2%	67.2%	63.5%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	74.1%	79.2%	78.5%	77.5%	71.2%	72.7%	74.0%	78.7%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	56.2%	84.7%	89.3%	87.1%	75.4%	35.2%	40.0%	45.3%
122	Chronic Kidney Disease (CKD): Blood Pressure Management	61.4%	78.9%	84.3%	80.1%	83.0%	68.9%	58.2%	65.6%
123	Chronic Kidney Disease (CKD): Plan of Care – Elevated Hemoglobin for Patients Receiving Erythropoiesis-Stimulating Agents (ESA)	56.0%	61.0%	54.1%	53.6%	82.0%	96.0%	94.8%	95.0%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	65.3%	74.9%	78.5%	78.0%	100.0%	99.1%	99.2%	98.9%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	58.3%	66.2%	59.5%	55.0%	63.0%	52.8%	74.2%	86.6%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	60.9%	67.3%	54.7%	53.3%	48.0%	43.9%	66.9%	69.2%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	49.8%	54.5%	55.0%	65.5%	55.9%	49.6%	60.2%	58.3%
130	Documentation and Verification of Current Medications in the Medical Record	56.3%	69.9%	69.2%	70.5%	79.7%	68.4%	74.7%	85.7%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	63.1%	65.6%	73.5%	73.6%	98.1%	97.4%	97.3%	94.8%
134	Screening for Clinical Depression and Follow-Up Plan	54.4%	64.3%	73.0%	79.5%	83.4%	67.2%	84.2%	82.6%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
135	Chronic Kidney Disease (CKD): Influenza Immunization	n/a	75.7%	74.0%	74.5%	n/a	49.6%	48.6%	69.1%
137	Melanoma: Continuity of Care – Recall System ^{a, b}	n/a	72.7%	99.9%	99.8%	n/a	90.8%	78.2%	96.0%
138	Melanoma: Coordination of Care ^{a, b}	n/a	65.7%	99.9%	99.5%	n/a	87.2%	87.7%	94.0%
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	n/a	60.1%	63.0%	64.9%	n/a	92.0%	92.1%	91.3%
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	n/a	57.1%	58.6%	60.8%	n/a	93.4%	94.2%	95.8%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	n/a	71.3%	61.1%	44.1%	n/a	41.9%	61.6%	82.7%
143	Oncology: Medical and Radiation – Pain Intensity Quantified ^{a, b}	n/a	65.2%	99.9%	99.1%	n/a	66.8%	31.8%	79.2%
144	Oncology: Medical and Radiation – Plan of Care for Pain ^{a, b}	n/a	91.3%	100.0%	100.0%	n/a	91.2%	90.0%	91.2%
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	n/a	65.4%	77.7%	78.3%	n/a	41.6%	48.1%	54.1%
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening ^d	n/a	75.1%	83.3%	85.5%	n/a	2.7%	1.1%	1.5%
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	n/a	77.3%	82.3%	83.9%	n/a	57.3%	54.8%	56.2%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	n/a	66.6%	66.9%	65.7%	n/a	43.8%	51.1%	58.2%
154	Falls: Risk Assessment	n/a	55.9%	62.7%	61.3%	n/a	87.1%	91.9%	81.9%
155	Falls: Plan of Care	n/a	83.4%	87.0%	86.8%	n/a	86.6%	88.0%	87.2%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
156	Oncology: Radiation Dose Limits to Normal Tissues	n/a	70.5%	73.9%	72.9%	n/a	89.2%	93.2%	95.8%
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	n/a	73.9%	80.9%	73.9%	n/a	77.7%	81.6%	88.0%
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	n/a	75.1%	81.2%	83.0%	n/a	91.5%	93.8%	94.4%
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage ^{a, b, c}	n/a	100.0%	99.6%	98.2%	n/a	76.7%	83.9%	92.2%
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a, b, c}	n/a	100.0%	99.6%	99.2%	n/a	61.5%	75.8%	75.8%
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy ^{a, b, c}	n/a	100.0%	97.7%	98.9%	n/a	90.3%	97.2%	96.4%
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy ^{a, b, c}	n/a	100.0%	98.5%	98.9%	n/a	76.6%	75.5%	88.3%
163	Diabetes Mellitus: Foot Exam	n/a	68.8%	59.0%	62.9%	n/a	51.7%	72.1%	77.0%
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation) ^{a, b, c, d}	n/a	100.0%	100.0%	100.0%	n/a	73.8%	93.9%	10.0%
165	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate ^{a, b, c, d}	n/a	100.0%	99.8%	100.0%	n/a	100.0%	78.9%	7.5%
166	Coronary Artery Bypass Graft (CABG): Stroke/Cerebrovascular Accident (CVA) ^{a, b, c, d}	n/a	100.0%	99.7%	100.0%	n/a	100.0%	63.6%	33.3%
167	Coronary Artery Bypass Graft (CABG): Postoperative Renal Insufficiency ^{a, b, c, d}	n/a	100.0%	100.0%	100.0%	n/a	100.0%	100.0%	60.0%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a, b, c, d}	n/a	100.0%	100.0%	100.0%	n/a	92.3%	94.1%	3.3%
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge ^{a, b, c}	n/a	100.0%	91.3%	100.0%	n/a	7.1%	37.5%	97.2%
170	Coronary Artery Bypass Graft (CABG): Beta-Blockers Administered at Discharge ^{a, b, c}	n/a	100.0%	88.3%	100.0%	n/a	0.0%	33.2%	57.1%
171	Coronary Artery Bypass Graft (CABG): Lipid Management and Counseling ^{a, b, c}	n/a	100.0%	93.1%	100.0%	n/a	0.0%	28.4%	71.4%
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	n/a	64.1%	71.2%	76.6%	n/a	91.2%	94.6%	95.9%
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	n/a	78.4%	50.3%	58.2%	n/a	31.0%	63.2%	82.1%
175	Pediatric End Stage Renal Disease (ESRD): Influenza Immunization	n/a	100.0%	--	--	n/a	1.6%	--	--
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	n/a	74.8%	56.9%	52.4%	n/a	90.0%	85.7%	75.7%
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	n/a	74.7%	59.7%	50.3%	n/a	38.2%	61.6%	91.3%
178	Rheumatoid Arthritis (RA): Functional Status Assessment	n/a	75.7%	60.9%	49.8%	n/a	38.4%	62.2%	89.8%
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	n/a	75.2%	59.9%	43.1%	n/a	33.2%	55.5%	88.0%
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	n/a	76.8%	60.8%	58.8%	n/a	90.3%	95.9%	96.0%
181	Elder Maltreatment Screen and Follow-Up Plan	n/a	75.4%	74.0%	69.7%	n/a	50.9%	55.3%	96.7%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
182	Functional Outcome Assessment in Chiropractic Care	n/a	31.0%	50.2%	54.7%	n/a	85.0%	76.6%	78.7%
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	n/a	90.1%	83.3%	78.7%	n/a	39.4%	47.3%	54.6%
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	n/a	90.2%	83.4%	78.7%	n/a	41.0%	51.6%	61.6%
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	n/a	72.0%	73.5%	72.3%	n/a	87.0%	92.5%	96.1%
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	n/a	81.4%	80.0%	62.0%	n/a	83.4%	80.4%	91.7%
187	Stroke and Stroke Rehabilitation: Thrombolytic Therapy ^{a, b}	n/a	n/a	100.0%	100.0%	n/a	n/a	83.3%	100.0%
188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear	n/a	n/a	74.4%	66.7%	n/a	n/a	100.0%	78.6%
189	Referral for Otologic Evaluation for Patients with History of Active Drainage From the Ear Within the Previous 90 Days	n/a	n/a	70.3%	59.4%	n/a	n/a	87.5%	85.7%
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss	n/a	n/a	40.3%	42.5%	n/a	n/a	88.7%	86.5%
191	Cataracts: 20/40 or Better Visual Acuity Within 90 Days Following Cataract Surgery ^{a, b}	n/a	n/a	98.5%	99.2%	n/a	n/a	90.6%	94.8%
192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures ^{a, b, d}	n/a	n/a	100.0%	99.1%	n/a	n/a	3.4%	4.4%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
193	Perioperative Temperature Management	n/a	n/a	67.0%	73.0%	n/a	n/a	85.3%	87.9%
194	Oncology: Cancer Stage Documented	n/a	n/a	71.6%	68.8%	n/a	n/a	85.6%	86.3%
195	Stenosis Measurement in Carotid Imaging Studies	n/a	n/a	75.3%	79.9%	n/a	n/a	59.5%	61.7%
196	Coronary Artery Disease (CAD): Symptom and Activity Assessment ^{a, b}	n/a	n/a	99.7%	99.9%	n/a	n/a	47.1%	65.9%
197	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol ^{a, b}	n/a	n/a	97.9%	99.8%	n/a	n/a	75.3%	82.2%
198	Heart Failure: Left Ventricular Function (LVF) Assessment ^{a, b}	n/a	n/a	99.1%	99.6%	n/a	n/a	45.6%	61.1%
199	Heart Failure: Patient Education ^{a, b}	n/a	n/a	99.8%	100.0%	n/a	n/a	43.4%	41.3%
200	Heart Failure: Warfarin Therapy Patients with Atrial Fibrillation ^{a, b}	n/a	n/a	100.0%	100.0%	n/a	n/a	72.1%	52.4%
201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control	n/a	n/a	86.1%	82.4%	n/a	n/a	76.1%	77.7%
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile	n/a	n/a	79.9%	75.8%	n/a	n/a	68.7%	61.0%
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control	n/a	n/a	87.5%	83.1%	n/a	n/a	53.2%	51.8%
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	n/a	n/a	83.7%	79.9%	n/a	n/a	74.7%	79.6%
205	HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia and Gonorrhea ^{a, b}	n/a	n/a	96.4%	94.5%	n/a	n/a	32.4%	79.0%
206	HIV/AIDS: Screening for High Risk Sexual Behaviors ^{a, b}	n/a	n/a	98.5%	97.0%	n/a	n/a	28.6%	87.0%
207	HIV/AIDS: Screening for Injection Drug Use ^{a, b}	n/a	n/a	96.8%	96.0%	n/a	n/a	32.3%	86.0%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
208	HIV/AIDS: Sexually Transmitted Disease Screening for Syphilis ^{a, b}	n/a	n/a	96.2%	95.5%	n/a	n/a	50.3%	79.3%
209	Functional Communication Measure - Spoken Language Comprehension ^{a, b}	n/a	n/a	80.8%	100.0%	n/a	n/a	58.8%	70.8%
210	Functional Communication Measure - Attention ^{a, b}	n/a	n/a	88.9%	100.0%	n/a	n/a	58.3%	56.6%
211	Functional Communication Measure - Memory ^{a, b}	n/a	n/a	83.0%	100.0%	n/a	n/a	55.5%	69.0%
212	Functional Communication Measure - Motor Speech ^{a, b}	n/a	n/a	81.5%	100.0%	n/a	n/a	66.7%	77.4%
213	Functional Communication Measure - Reading ^{a, b}	n/a	n/a	87.5%	100.0%	n/a	n/a	58.3%	95.0%
214	Functional Communication Measure - Spoken Language Expression ^{a, b}	n/a	n/a	77.6%	100.0%	n/a	n/a	45.8%	77.4%
215	Functional Communication Measure - Writing ^{a, b}	n/a	n/a	80.0%	100.0%	n/a	n/a	16.7%	83.3%
216	Functional Communication Measure - Swallowing ^{a, b}	n/a	n/a	84.7%	100.0%	n/a	n/a	73.6%	72.7%
217	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	71.7%
218	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	68.8%
219	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot, or Ankle Impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	61.2%
220	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	67.0%

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
221	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	68.9%
222	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist, or hand Impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	69.7%
223	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or other General Orthopedic Impairments ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	63.7%
224	Melanoma: Overutilization of Imaging Studies in Stage 0-IA Melanoma ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	95.0%
225	Radiology: Reminder System for Mammograms	n/a	n/a	n/a	74.5%	n/a	n/a	n/a	68.5%
226	Preventive Care and Screening: Tobacco use: Screening and Cessation intervention	n/a	n/a	n/a	65.4%	n/a	n/a	n/a	80.4%
228	Heart Failure (HF): Left Ventricular Function (LVF) Testing ^a	n/a	n/a	n/a	99.8%	n/a	n/a	n/a	93.3%
231	Asthma: Tobacco Use: Screening - Ambulatory Care Setting	n/a	n/a	n/a	65.1%	n/a	n/a	n/a	85.0%
232	Asthma: Tobacco Use: Intervention - Ambulatory Care Setting	n/a	n/a	n/a	59.8%	n/a	n/a	n/a	80.7%
233	Thoracic Surgery: Recording of Performance Status Prior to Lung or Esophageal Cancer Resection ^a	n/a	n/a	n/a	--	n/a	n/a	n/a	--

Measure Number	Measure Description	Average Percent of Instances Reported in 2008	Average Percent of Instances Reported in 2009	Average Percent of Instances Reported in 2010	Average Percent of Instances Reported in 2011	Average Performance Rate in 2008	Average Performance Rate in 2009	Average Performance Rate in 2010	Average Performance Rate in 2011
234	Thoracic Surgery: Pulmonary Function Tests Before Major Anatomic Lung Resection (Pneumonectomy, Lobectomy, or Formal Segmentectomy) ^a	n/a	n/a	n/a	--	n/a	n/a	n/a	--
235	Hypertension (HTN): Plan of Care	n/a	n/a	n/a	45.4%	n/a	n/a	n/a	79.1%
237	Hypertension (HTN): Blood Pressure Measurement ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	0.0%
238	Drugs to be Avoided in the Elderly ^{a,d}	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	3.5%
239	Weight Assessment and Counseling for Children and Adolescents ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	2.2%
240	Childhood Immunization Status ^a	n/a	n/a	n/a	100.0%	n/a	n/a	n/a	0.0%

^a Measure was not reportable via claims during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 227, 228, 229, 230, 233, 234, 236, 237, 238, 239, 240).

^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 136, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216).

^c Measure was not reportable via claims (e.g., registry only) during the 2009 program year (Measures 7, 33, 46, 81, 82, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174).

^d Measure was an inverse measure where a lower performance rate indicates better performance (Measures 1, 146, 164, 165, 166, 167, 168, 192, and 238).

Notes: (1) Eligible professional-level results in this table do not include EPs who were part of a practice that participated under the GPRO. (2) These results are restricted to individual measures (i.e., excluded measures groups). (3) We applied the following hierarchy if an EP participated in multiple mechanisms: EHR, Claims 12-month, Registry 12-month, and Registry 6-month. For example, if an EP participated in both claims and registry mechanisms, the information from claims was used. (4) The percent of instances reported was calculated as the count of reported instances (numerator) divided by the count of eligible instances (denominator) from the mechanism selected according to the hierarchy. (5) The performance rate was calculated as the count of reported instances where performance was met (numerator) divided by the total number of reported instances that excluded reported exclusions (i.e., performance denominator).

Table A24. Eligible Professional (EP) Individual Measure Reporting Consistency Across Program Years for the Physician Quality Reporting System (2008 to 2011)

Measure Number	Measure Description	Participating EPs Reporting Individually 2008 to 2011 ^a	Participating EPs Reporting Individually 2009 to 2011 ^a	Participating EPs Reporting Individually 2010 to 2011 ^a	Participating EPs Reporting Individually 2011 Only ^a	Average Number of Years EPs Reported the Measure ^b	Standard Deviation for Average Number of Years EPs Reported the Measure ^b
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus	4,044	5,613	6,891	13,813	2.42	1.45
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	4,078	5,197	6,366	12,621	2.46	1.46
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	3,833	4,941	6,188	14,525	2.35	1.45
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	287	376	761	2,265	1.87	1.24
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	1,411	3,339	4,339	8,641	2.27	1.40
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)	119	313	1,156	3,480	1.47	0.82
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	23	222	374	1,523	1.58	1.03
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	57	281	357	1,150	1.72	1.07
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	1,355	2,072	2,296	2,960	2.93	1.53
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	1,584	2,056	1,908	3,083	3.09	1.58

Measure Number	Measure Description	Participating EPs Reporting Individually 2008 to 2011 ^a	Participating EPs Reporting Individually 2009 to 2011 ^a	Participating EPs Reporting Individually 2010 to 2011 ^a	Participating EPs Reporting Individually 2011 Only ^a	Average Number of Years EPs Reported the Measure ^b	Standard Deviation for Average Number of Years EPs Reported the Measure ^b
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	2,001	2,163	2,080	3,374	3.02	1.55
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	1,402	1,504	1,349	2,512	3.00	1.57
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	594	672	778	1,668	2.83	1.62
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	656	981	881	1,498	2.91	1.55
21	Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin	847	1,206	1,061	1,527	3.03	1.53
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	654	880	874	1,221	2.94	1.52
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	736	1,017	1,011	1,402	2.97	1.53
24	Osteoporosis: Communication with the Physician Managing On-going Care Post-Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	121	95	101	276	2.61	1.55
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	2,736	2,150	3,076	6,645	2.47	1.48
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	4,559	8,699	7,302	9,947	2.89	1.49
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	109	509	1,214	1,953	1.80	1.01

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32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	333	635	1,510	2,469	1.98	1.20
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge	n/a	12	310	522	1.40	0.52
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	70	216	638	1,120	1.77	1.04
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	148	742	1,236	1,989	1.89	1.05
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	855	3,389	2,798	5,741	2.04	1.11
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	74	148	151	1,177	1.56	1.06
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	279	1,334	1,128	2,332	2.11	1.21
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	117	314	214	324	3.07	1.54
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	106	300	167	274	2.94	1.48
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	97	279	186	303	2.91	1.52
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility	--	1	211	1,215	1.15	0.36
47	Advance Care Plan	708	1,493	3,133	8,478	1.71	1.05

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48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	602	1,351	1,702	3,553	2.11	1.28
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	224	452	499	1,218	2.26	1.41
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	229	370	575	1,199	2.28	1.44
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	241	638	836	1,550	2.18	1.32
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	131	471	638	822	2.31	1.31
53	Asthma: Pharmacologic Therapy	23	121	263	1,185	1.39	0.77
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	5,145	5,479	7,208	12,608	2.85	1.59
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	4,561	4,313	5,896	10,478	2.86	1.60
56	Community-Acquired Pneumonia (CAP): Vital Signs	6,231	4,764	6,628	11,063	2.76	1.53
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	5,743	5,089	7,440	12,660	2.77	1.56
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	6,395	4,866	6,774	11,659	2.71	1.51
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	3,756	3,591	4,929	8,659	2.68	1.53
64	Asthma: Asthma Assessment	20	65	84	753	1.34	0.80
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	--	--	2	32	1.06	0.24

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66	Appropriate Testing for Children with Pharyngitis	--	--	--	48	1.00	0.00
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	134	283	283	336	2.83	1.48
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	92	368	199	240	2.69	1.28
69	Multiple Myeloma: Treatment with Bisphosphonates	187	431	285	457	2.84	1.47
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	189	339	267	467	2.87	1.53
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	162	250	329	524	2.78	1.58
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	144	252	291	526	2.56	1.50
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	2,456	3,371	5,021	5,472	2.17	1.06
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	56	17	15	40	2.70	1.31
81	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Hemodialysis in ESRD Patients	--	--	--	3	1.00	0.00
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia	4	2	12	119	1.20	0.61
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	50	34	94	148	1.96	1.08

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85	Hepatitis C: HCV Genotype Testing Prior to Treatment	54	30	84	109	2.10	1.13
86	Hepatitis C: Antiviral Treatment Prescribed	31	17	74	264	1.52	0.91
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	21	18	71	66	1.97	0.98
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	49	41	179	478	1.55	0.87
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	9	3	34	52	1.68	0.91
91	Acute Otitis Externa (AOE): Topical Therapy	64	108	204	1,124	1.41	0.80
92	Acute Otitis Externa (AOE): Pain Assessment	48	41	114	850	1.32	0.76
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	33	82	134	795	1.38	0.76
94	Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility	--	--	--	1	1.00	--
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	2,579	565	547	659	3.16	1.14
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	2,348	519	554	673	3.11	1.16
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	63	148	110	237	2.07	1.07
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	73	177	107	201	2.22	1.07

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105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	139	112	146	263	2.19	1.17
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	25	155	197	440	1.71	0.88
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	52	174	246	483	1.79	0.93
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	139	235	279	981	1.71	1.00
109	Osteoarthritis (OA): Function and Pain Assessment	110	306	331	814	1.82	0.98
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	1,675	3,407	5,199	16,542	1.64	0.93
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	1,786	4,084	5,326	15,307	1.71	0.96
112	Preventive Care and Screening: Screening Mammography	962	4,293	3,622	9,435	1.82	0.96
113	Preventive Care and Screening: Colorectal Cancer Screening	965	4,413	4,040	10,789	1.78	0.95
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	3	9	42	326	1.18	0.49
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	3,582	3,584	3,618	6,460	2.25	1.16
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD)	71	155	425	1,494	1.44	0.77

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119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	1,476	2,416	2,484	5,414	2.00	1.08
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	94	540	783	827	1.96	0.88
122	Chronic Kidney Disease (CKD): Blood Pressure Management	128	518	628	795	1.99	0.94
123	Chronic Kidney Disease (CKD): Plan of Care – Elevated Hemoglobin for Patients Receiving Erythropoiesis-Stimulating Agents (ESA)	72	128	110	225	2.09	1.09
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	5,611	15,576	17,301	31,496	1.93	0.99
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	147	629	1,158	2,675	1.62	0.84
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	83	488	669	2,230	1.55	0.82
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	754	2,160	3,024	13,380	1.50	0.84
130	Documentation and Verification of Current Medications in the Medical Record	730	6,334	9,564	26,706	1.56	0.80
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	1,572	1,569	1,511	3,078	2.21	1.17
134	Screening for Clinical Depression and Follow-Up Plan	42	139	230	328	1.86	0.92
135	Chronic Kidney Disease (CKD): Influenza Immunization	n/a	55	30	176	1.54	0.82

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137	Melanoma: Continuity of Care – Recall System	n/a	628	389	622	2.00	0.87
138	Melanoma: Coordination of Care	n/a	322	579	760	1.74	0.76
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	n/a	4,050	2,076	3,190	2.09	0.88
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	n/a	1,938	1,210	2,061	1.98	0.88
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	n/a	332	478	1,225	1.56	0.76
143	Oncology: Medical and Radiation – Pain Intensity Quantified	n/a	11	5	32	1.56	0.85
144	Oncology: Medical and Radiation – Plan of Care for Pain	n/a	6	4	30	1.40	0.74
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	n/a	5,686	3,552	3,841	2.14	0.84
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening	n/a	4,083	2,381	2,714	2.15	0.85
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	n/a	3,236	2,193	2,494	2.09	0.85
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	n/a	136	155	320	1.70	0.81
154	Falls: Risk Assessment	n/a	3,845	1,880	4,821	1.91	0.90
155	Falls: Plan of Care	n/a	1,701	1,094	2,916	1.79	0.87
156	Oncology: Radiation Dose Limits to Normal Tissues	n/a	185	114	228	1.92	0.88

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157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	n/a	15	12	26	1.79	0.86
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	n/a	173	146	160	2.03	0.83
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage	n/a	30	23	55	1.77	0.86
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a, b}	n/a	26	16	25	2.01	0.88
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy	n/a	17	17	23	1.89	0.84
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy	n/a	26	16	37	1.86	0.89
163	Diabetes Mellitus: Foot Exam	n/a	1,355	1,763	5,327	1.53	0.76
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation)	n/a	1	--	2	1.67	1.15
165	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate	n/a	--	--	4	1.00	0.00
166	Coronary Artery Bypass Graft (CABG): Stroke/Cerebrovascular Accident (CVA)	n/a	--	--	1	1.00	--
167	Coronary Artery Bypass Graft (CABG): Postoperative Renal Insufficiency	n/a	--	--	1	1.00	--
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a, b, c}	n/a	1	--	5	1.33	0.82
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge	n/a	1	--	8	1.22	0.67
170	Coronary Artery Bypass Graft (CABG): Beta-Blockers Administered at Discharge	n/a	--	--	1	1.00	--

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171	Coronary Artery Bypass Graft (CABG): Lipid Management and Counseling	n/a	--	--	1	1.00	--
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	n/a	85	65	81	2.02	0.85
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	n/a	338	2,243	5,565	1.36	0.56
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	n/a	76	143	162	1.77	0.76
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	n/a	75	167	223	1.68	0.74
178	Rheumatoid Arthritis (RA): Functional Status Assessment	n/a	98	159	217	1.75	0.78
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	n/a	58	107	143	1.72	0.76
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	n/a	64	132	290	1.53	0.72
181	Elder Maltreatment Screen and Follow-Up Plan	n/a	18	3	18	2.00	0.97
182	Functional Outcome Assessment in Chiropractic Care	n/a	86	132	362	1.52	0.74
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	n/a	91	104	404	1.48	0.74
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	n/a	99	86	393	1.49	0.77
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	n/a	392	234	366	2.03	0.87

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186	Wound Care: Use of Compression System in Patients with Venous Ulcers	n/a	16	36	152	1.33	0.62
187	Stroke and Stroke Rehabilitation: Thrombolytic Therapy	n/a	n/a	13	--	2.00	0.00
188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear	n/a	n/a	--	3	1.00	0.00
189	Referral for Otologic Evaluation for Patients with History of Active Drainage From the Ear Within the Previous 90 Days	n/a	n/a	4	10	1.29	0.47
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss	n/a	n/a	19	45	1.30	0.46
191	Cataracts: 20/40 or Better Visual Acuity Within 90 Days Following Cataract Surgery	n/a	n/a	109	120	1.48	0.50
192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures	n/a	n/a	92	114	1.45	0.50
193	Perioperative Temperature Management	n/a	n/a	12,596	11,195	1.53	0.50
194	Oncology: Cancer Stage Documented	n/a	n/a	847	1,130	1.43	0.49
195	Stenosis Measurement in Carotid Imaging Studies	n/a	n/a	9,328	3,572	1.72	0.45
196	Coronary Artery Disease (CAD): Symptom and Activity Assessment	n/a	n/a	335	553	1.38	0.48
197	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol	n/a	n/a	1,118	3,211	1.26	0.44
198	Heart Failure: Left Ventricular Function (LVF) Assessment	n/a	n/a	473	764	1.38	0.49
199	Heart Failure: Patient Education	n/a	n/a	451	521	1.46	0.50

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200	Heart Failure: Warfarin Therapy Patients with Atrial Fibrillation ^a	n/a	n/a	421	1,317	1.24	0.43
201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control	n/a	n/a	2,404	5,621	1.30	0.46
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile	n/a	n/a	1,579	4,054	1.28	0.45
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control	n/a	n/a	2,289	4,257	1.35	0.48
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	n/a	n/a	2,506	5,545	1.31	0.46
205	HIV/AIDS: Sexually Transmitted Disease Screening for Chlamydia and Gonorrhea	n/a	n/a	18	7	1.72	0.46
206	HIV/AIDS: Screening for High Risk Sexual Behaviors	n/a	n/a	4	8	1.33	0.49
207	HIV/AIDS: Screening for Injection Drug Use	n/a	n/a	4	8	1.33	0.49
208	HIV/AIDS: Sexually Transmitted Disease Screening for Syphilis	n/a	n/a	17	9	1.65	0.49
209	Functional Communication Measure - Spoken Language Comprehension	n/a	n/a	8	15	1.35	0.49
210	Functional Communication Measure - Attention	n/a	n/a	5	10	1.33	0.49
211	Functional Communication Measure - Memory	n/a	n/a	9	12	1.43	0.51
212	Functional Communication Measure - Motor Speech	n/a	n/a	3	11	1.21	0.43
213	Functional Communication Measure - Reading	n/a	n/a	2	6	1.25	0.46
214	Functional Communication Measure - Spoken Language Expression	n/a	n/a	9	16	1.36	0.49
215	Functional Communication Measure - Writing	n/a	n/a	1	1	1.50	0.71

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216	Functional Communication Measure - Swallowing	n/a	n/a	8	13	1.38	0.50
217	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments	n/a	n/a	n/a	153	1.00	0.00
218	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments	n/a	n/a	n/a	146	1.00	0.00
219	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot, or Ankle Impairments	n/a	n/a	n/a	129	1.00	0.00
220	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine impairments	n/a	n/a	n/a	172	1.00	0.00
221	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments	n/a	n/a	n/a	165	1.00	0.00
222	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist, or hand Impairments	n/a	n/a	n/a	91	1.00	0.00
223	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or other General Orthopedic Impairments	n/a	n/a	n/a	155	1.00	0.00
224	Melanoma: Overutilization of Imaging Studies in Stage 0-IA Melanoma	n/a	n/a	n/a	1,763	1.00	0.00
225	Radiology: Reminder System for Mammograms	n/a	n/a	n/a	5,462	1.00	0.00
226	Preventive Care and Screening: Tobacco use: Screening and Cessation intervention	n/a	n/a	n/a	38,357	1.00	0.00

Measure Number	Measure Description	Participating EPs Reporting Individually 2008 to 2011 ^a	Participating EPs Reporting Individually 2009 to 2011 ^a	Participating EPs Reporting Individually 2010 to 2011 ^a	Participating EPs Reporting Individually 2011 Only ^a	Average Number of Years EPs Reported the Measure ^b	Standard Deviation for Average Number of Years EPs Reported the Measure ^b
228	Heart Failure (HF): Left Ventricular Function (LVF) Testing	n/a	n/a	n/a	64	1.00	0.00
231	Asthma: Tobacco Use: Screening - Ambulatory Care Setting	n/a	n/a	n/a	244	1.00	0.00
232	Asthma: Tobacco Use: Intervention - Ambulatory Care Setting	n/a	n/a	n/a	97	1.00	0.00
235	Hypertension (HTN): Plan of Care	n/a	n/a	n/a	2,396	1.00	0.00
237	Hypertension (HTN): Blood Pressure Measurement	n/a	n/a	n/a	227	1.00	0.00
238	Drugs to be Avoided in the Elderly	n/a	n/a	n/a	552	1.00	0.00
239	Weight Assessment and Counseling for Children and Adolescents	n/a	n/a	n/a	52	1.00	0.00
240	Childhood Immunization Status	n/a	n/a	n/a	11	1.00	0.00
Total		31,716	48,712	55,649	82,997	2.65	1.47

^a This section describes continuous participation in the years listed. Therefore, if an EP participated in multiple years, but not continuously (e.g., 2009 and 2011, but not 2010) they were not included in the column for 2009 to 2011.

^b This section describes all EPs who participated in the measure in program year 2011.

Notes: (1) Eligible professional-level results in this table do not include EPs who were part of a practice that participated under the GPRO; (2) These results are restricted to individual measures (i.e., excluded measures groups).

Table A25. Individual Measure Performance Information Among Eligible Professionals who Participated Continuously in the Measure for Four Years for the Physician Quality Reporting System (2008 to 2011)

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus ^d	8,978	10.5%	10.1%	16.7%	17.1%	-2.5%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	8,870	67.5%	69.0%	61.1%	61.6%	-3.0%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	8,405	57.6%	61.2%	61.9%	74.7%	9.1%
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b,c}	551	81.9%	96.9%	94.0%	94.2%	4.8%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	4,080	89.6%	90.4%	90.8%	92.0%	0.9%
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a,b}	185	69.5%	66.4%	79.1%	83.0%	6.1%
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	127	97.9%	94.9%	95.4%	94.2%	-1.3%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	131	85.1%	88.4%	91.5%	92.6%	2.9%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	4,364	61.9%	67.5%	69.8%	68.3%	3.3%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	5,421	96.7%	96.7%	96.4%	96.5%	-0.1%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	5,566	97.6%	97.5%	96.9%	96.9%	-0.3%
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	3,869	98.4%	98.5%	98.2%	98.2%	-0.1%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	1,919	53.3%	92.9%	93.0%	93.1%	20.4%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	2,034	94.9%	96.3%	96.6%	95.6%	0.3%
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin	2,564	93.7%	95.0%	95.1%	94.9%	0.4%
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	1,837	85.8%	96.7%	96.3%	96.1%	3.9%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	2,196	94.9%	96.0%	97.0%	97.2%	0.8%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post- Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older	247	63.0%	63.0%	59.9%	57.9%	-2.8%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	5,063	81.1%	80.9%	83.1%	84.7%	1.4%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	13,709	94.5%	92.5%	93.0%	93.9%	-0.2%
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	250	89.1%	90.4%	88.9%	88.8%	-0.1%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	690	85.1%	89.6%	89.2%	89.8%	1.8%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	160	60.7%	89.7%	91.2%	93.0%	15.3%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	310	80.7%	80.3%	78.4%	81.4%	0.3%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	1,253	61.2%	63.3%	66.8%	62.5%	0.7%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	131	65.3%	56.1%	49.3%	54.3%	-6.0%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	631	90.0%	89.0%	87.1%	86.3%	-1.4%
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	537	98.0%	98.2%	98.1%	98.2%	0.0%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	378	92.2%	93.0%	93.0%	93.2%	0.3%
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	393	85.7%	99.9%	99.7%	99.8%	5.2%
47	Advance Care Plan	1,179	58.6%	59.2%	57.8%	57.1%	-0.9%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	1,221	81.6%	80.2%	81.1%	82.0%	0.2%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	564	96.8%	96.4%	96.7%	96.5%	-0.1%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	613	94.1%	94.7%	95.2%	94.3%	0.1%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	605	85.7%	88.7%	88.6%	90.0%	1.6%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	402	82.0%	98.6%	99.1%	97.1%	5.8%
53	Asthma: Pharmacologic Therapy	38	93.1%	91.6%	91.9%	93.7%	0.2%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	15,763	95.1%	95.5%	95.8%	95.8%	0.3%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	13,336	95.9%	96.4%	96.9%	96.9%	0.3%
56	Community-Acquired Pneumonia (CAP): Vital Signs	13,279	95.0%	96.0%	96.6%	96.8%	0.6%
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	14,696	93.2%	94.9%	95.8%	96.1%	1.0%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	12,922	96.2%	97.0%	97.5%	97.7%	0.5%
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	8,864	93.9%	95.1%	95.2%	95.1%	0.4%
64	Asthma: Asthma Assessment	31	87.6%	89.0%	84.9%	85.5%	-0.8%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	431	94.8%	95.5%	96.7%	97.3%	0.9%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	227	85.3%	99.7%	98.5%	98.2%	4.8%
69	Multiple Myeloma: Treatment with Bisphosphonates	558	90.5%	90.4%	90.9%	91.1%	0.2%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	584	95.6%	96.1%	96.1%	96.7%	0.4%
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer	583	79.8%	98.5%	98.5%	99.1%	7.5%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	415	81.5%	99.1%	98.8%	99.2%	6.8%
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	2,456	82.7%	84.7%	86.6%	88.7%	2.4%
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	56	37.2%	66.3%	61.2%	76.3%	27.1%
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a,b}	4	0.0%	5.0%	31.1%	11.9%	.
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	50	85.7%	98.3%	99.3%	97.7%	4.5%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	54	78.1%	96.4%	99.8%	99.3%	8.3%
86	Hepatitis C: Antiviral Treatment Prescribed	31	66.9%	65.5%	72.8%	75.9%	4.3%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	21	83.0%	98.9%	100.0%	93.3%	4.0%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	49	88.7%	90.5%	90.9%	90.9%	0.8%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	9	66.7%	83.3%	88.9%	88.9%	10.1%
91	Acute Otitis Externa (AOE): Topical Therapy	64	82.9%	78.6%	79.9%	86.4%	1.4%
92	Acute Otitis Externa (AOE): Pain Assessment	48	75.4%	74.5%	79.3%	93.4%	7.4%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	33	80.4%	81.3%	81.1%	78.7%	-0.7%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	2,579	96.1%	96.8%	97.5%	96.8%	0.3%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	2,348	97.1%	97.6%	98.4%	98.2%	0.4%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	63	50.3%	74.3%	89.5%	90.9%	21.8%
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	73	78.0%	87.7%	88.3%	92.2%	5.7%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	139	86.6%	92.0%	98.7%	99.7%	4.8%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	25	80.0%	83.1%	90.8%	91.2%	4.5%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	52	89.6%	93.3%	96.4%	98.2%	3.1%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	139	96.8%	92.4%	95.3%	96.2%	-0.2%
109	Osteoarthritis (OA): Function and Pain Assessment	110	92.7%	90.8%	90.9%	90.6%	-0.8%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	1,675	50.3%	49.6%	51.5%	53.6%	2.2%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	1,786	49.2%	51.5%	53.5%	62.3%	8.2%
112	Preventive Care and Screening: Screening Mammography	962	59.9%	61.5%	61.7%	66.4%	3.5%
113	Preventive Care and Screening: Colorectal Cancer Screening	965	64.8%	65.4%	67.2%	68.1%	1.6%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	3	50.0%	75.0%	50.0%	85.7%	19.7%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	3,582	93.4%	93.8%	94.5%	94.5%	0.4%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	71	87.5%	96.1%	83.2%	80.3%	-2.8%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	1,476	69.0%	76.2%	79.8%	82.4%	6.1%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	94	89.9%	74.6%	72.0%	69.6%	-8.2%
122	Chronic Kidney Disease (CKD): Blood Pressure Management	128	88.4%	94.5%	94.3%	93.8%	2.0%
123	Chronic Kidney Disease (CKD): Plan of Care - Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)	72	81.9%	97.3%	98.0%	96.3%	5.5%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	5,611	100.0%	99.9%	99.9%	99.4%	-0.2%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	147	83.2%	89.0%	87.5%	88.9%	2.2%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	83	81.6%	79.1%	74.0%	82.9%	0.6%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	754	55.8%	58.5%	62.7%	64.8%	5.1%
130	Documentation of Current Medications in the Medical Record	730	85.1%	83.2%	85.7%	88.5%	1.3%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	1,572	99.1%	98.8%	98.4%	97.7%	-0.5%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Four Years Continuously ^e	Average Performance Rate per EP in 2008	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
134	Screening for Clinical Depression and Follow-Up Plan	42	94.2%	92.4%	92.9%	94.1%	-0.1%

Notes for Table A25: (1) Results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms. (3) Results were restricted to individual measures (i.e., excluded measures groups). (4) If an eligible professional participated in multiple mechanisms, we used performance information in accordance with the following hierarchy: EHR, claims, and registry. (5) The "Growth Rate" is the compound annual growth rate (i.e., CAGR). ^a Measure was not reportable via claims (e.g., registry or EHR only) during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 228, 233, 234, 235, 237, 238, 239, and 240) ^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 136, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215 and 216). ^c Measure was not reportable via claims (e.g., registry only) during the 2009 program year (Measures 7, 33, 46, 81, 82, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171 and 174). ^d Measure was an inverse measure where a lower performance rate indicates better performance (Measures 1, 146, 164, 165, 166, 167, 168 and 192). ^e Includes eligible professionals who reported a measure for at least four years.

Table A26. Individual Measure Performance Information Among Eligible Professionals who Participated Continuously in the Measure for Three Years for the Physician Quality Reporting System (2009 to 2011).

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus ^d	14,591	10.9%	17.9%	18.7%	-4.5%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	14,067	68.3%	59.5%	59.7%	-6.5%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	13,346	60.5%	60.8%	72.7%	9.7%
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	927	95.3%	92.2%	93.3%	-1.1%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	7,419	85.6%	86.4%	88.2%	1.5%
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a,b,c}	498	57.4%	68.4%	83.2%	20.5%
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	349	88.4%	87.3%	89.8%	0.8%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	412	65.2%	67.5%	72.7%	5.6%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	6,436	65.7%	68.6%	68.4%	2.0%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	7,477	96.6%	96.4%	96.4%	-0.1%
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	7,729	97.5%	96.8%	96.8%	-0.3%
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	5,373	98.4%	98.2%	98.1%	-0.1%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	2,591	93.2%	93.1%	93.4%	0.1%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	3,015	94.6%	95.6%	94.9%	0.1%
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin	3,770	93.4%	93.5%	93.6%	0.1%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	2,717	95.7%	95.4%	95.1%	-0.3%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	3,213	95.2%	96.0%	96.3%	0.6%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post- Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older	342	64.2%	61.6%	59.5%	-3.8%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	7,213	80.8%	83.0%	84.6%	2.3%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	22,408	91.7%	92.5%	93.6%	1.0%
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	759	90.0%	85.5%	85.2%	-2.7%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	1,325	89.8%	88.0%	88.3%	-0.9%
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge ^{a,b,c}	12	100.0%	86.5%	88.1%	-6.1%
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	376	92.4%	93.2%	93.8%	0.7%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	1,052	75.0%	72.7%	74.3%	-0.4%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	4,642	58.4%	62.7%	65.0%	5.5%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	279	52.1%	47.6%	52.2%	0.2%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	1,965	74.1%	73.4%	68.2%	-4.1%
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	851	98.5%	98.4%	98.4%	0.0%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	678	90.8%	92.2%	93.6%	1.5%
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	672	99.4%	99.5%	99.4%	0.0%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility ^c	1	100.0%	5.4%	100.0%	0.0%
47	Advance Care Plan	2,672	53.6%	52.4%	55.2%	1.4%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	2,572	71.7%	73.2%	74.1%	1.6%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	1,016	89.6%	91.0%	91.6%	1.1%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	983	94.0%	95.2%	94.0%	0.0%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	1,243	68.7%	72.8%	74.7%	4.3%
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	873	91.8%	91.7%	73.1%	-10.8%
53	Asthma: Pharmacologic Therapy	159	85.0%	84.5%	74.1%	-6.6%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	21,242	95.3%	95.7%	95.7%	0.2%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	17,649	96.3%	96.8%	96.9%	0.3%
56	Community-Acquired Pneumonia (CAP): Vital Signs	18,043	95.3%	95.9%	96.2%	0.5%
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	19,785	94.2%	95.2%	95.5%	0.7%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	17,788	96.9%	97.6%	97.7%	0.5%
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	12,455	94.0%	94.1%	93.6%	-0.2%
64	Asthma: Asthma Assessment	96	61.0%	58.8%	58.3%	-2.2%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	714	94.6%	96.4%	97.2%	1.4%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	595	98.5%	98.7%	99.1%	0.3%
69	Multiple Myeloma: Treatment with Bisphosphonates	989	89.5%	91.0%	91.0%	0.9%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	923	95.4%	95.7%	96.8%	0.7%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years_Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer	833	98.4%	98.6%	98.8%	0.2%
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	667	98.8%	98.9%	99.1%	0.2%
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	5,827	79.3%	81.9%	85.5%	3.8%
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	73	65.9%	61.2%	72.9%	5.2%
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a,b}	6	3.0%	20.7%	24.6%	186.4%
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	84	99.0%	98.9%	98.6%	-0.2%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	84	97.4%	99.9%	99.5%	1.1%
86	Hepatitis C: Antiviral Treatment Prescribed	48	72.7%	77.8%	75.2%	1.7%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	39	99.1%	86.8%	86.1%	-6.8%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	90	83.9%	86.8%	90.4%	3.7%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	12	71.4%	80.0%	83.3%	8.0%
91	Acute Otitis Externa (AOE): Topical Therapy	172	75.1%	75.2%	84.6%	6.1%
92	Acute Otitis Externa (AOE): Pain Assessment	89	82.9%	81.7%	92.9%	5.9%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	115	89.5%	86.0%	87.8%	-0.9%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	3,144	96.9%	97.6%	97.0%	0.1%
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	2,867	97.6%	98.5%	98.3%	0.3%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years_Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	211	66.1%	75.5%	90.5%	17.0%
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	250	79.3%	78.9%	92.7%	8.1%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	251	84.2%	97.0%	99.0%	8.4%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	180	90.4%	90.5%	91.2%	0.4%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	226	91.4%	94.9%	95.5%	2.2%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD)Therapy	374	81.3%	85.9%	83.7%	1.5%
109	Osteoarthritis (OA): Function and Pain Assessment	416	82.0%	82.3%	85.0%	1.8%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	5,082	52.4%	53.7%	55.5%	2.9%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	5,870	55.0%	58.5%	67.5%	10.8%
112	Preventive Care and Screening: Screening Mammography	5,255	59.2%	57.2%	60.1%	0.8%
113	Preventive Care and Screening: Colorectal Cancer Screening	5,378	54.6%	52.8%	53.7%	-0.8%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	12	29.6%	38.9%	64.7%	47.8%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	7,166	90.0%	91.0%	90.7%	0.4%
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	226	83.0%	74.9%	76.1%	-4.2%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	3,892	73.0%	77.1%	78.8%	3.9%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	634	36.8%	47.9%	49.3%	15.8%
122	Chronic Kidney Disease (CKD): Blood Pressure Management	646	65.2%	67.7%	69.5%	3.2%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years_Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
123	Chronic Kidney Disease (CKD): Plan of Care - Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)	200	97.6%	96.2%	95.2%	-1.2%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	21,187	99.5%	99.7%	99.6%	0.1%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	776	88.6%	89.3%	90.9%	1.3%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	571	83.0%	84.5%	88.5%	3.2%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	2,914	59.4%	63.3%	64.1%	3.9%
130	Documentation of Current Medications in the Medical Record	7,064	76.4%	76.9%	87.8%	7.2%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	3,141	98.6%	98.4%	97.6%	-0.5%
134	Screening for Clinical Depression and Follow-Up Plan	181	84.5%	88.0%	88.2%	2.2%
135	Chronic Kidney Disease (CKD): Influenza Immunization	55	64.5%	63.9%	63.2%	-1.0%
137	Melanoma: Continuity of Care – Recall System ^{a,b}	628	97.7%	94.4%	97.9%	0.1%
138	Melanoma: Coordination of Care ^{a,b}	322	98.4%	92.5%	96.9%	-0.7%
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	4,050	94.1%	94.1%	93.6%	-0.3%
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	1,938	94.4%	94.8%	95.8%	0.7%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	332	73.9%	77.7%	78.9%	3.3%
143	Oncology: Medical and Radiation – Pain Intensity Quantified ^{a,b}	11	64.1%	68.7%	61.6%	-1.9%
144	Oncology: Medical and Radiation – Plan of Care for Pain ^{a,b}	6	90.8%	99.1%	99.7%	4.8%
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	5,686	43.9%	52.9%	56.9%	13.9%
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening ^d	4,083	1.7%	0.6%	0.6%	0.5%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	3,236	58.1%	58.4%	59.0%	0.8%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	136	67.9%	69.1%	71.2%	2.4%
154	Falls: Risk Assessment	3,845	91.7%	91.5%	92.8%	0.6%
155	Falls: Plan of Care	1,701	85.9%	85.6%	86.5%	0.3%
156	Oncology: Radiation Dose Limits to Normal Tissues	185	90.6%	95.1%	93.9%	1.8%
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	15	85.0%	92.4%	98.9%	7.9%
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	173	91.3%	92.1%	94.0%	1.5%
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage ^{a,b,c}	30	89.4%	91.7%	92.9%	2.0%
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a,b,c}	26	99.0%	95.2%	80.5%	-9.8%
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy ^{a,b,c}	17	100.0%	100.0%	99.5%	-0.2%
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy ^{a,b,c}	26	95.9%	94.9%	87.9%	-4.3%
163	Diabetes Mellitus: Foot Exam	1,355	81.8%	84.1%	85.7%	2.4%
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation) ^{a,b,c,d}	1	7.7%	1.9%	0.0%	4.1%
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a,b,c,d}	1	7.7%	5.9%	0.0%	4.1%
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge ^{a,b,c}	1	100.0%	100.0%	100.0%	0.0%
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	85	96.8%	97.9%	97.8%	0.5%
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	338	75.2%	78.2%	78.1%	1.9%
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	76	91.6%	94.1%	94.3%	1.4%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Three Years_Continuously ^e	Average Performance Rate per EP in 2009	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	75	77.8%	84.1%	83.4%	3.6%
178	Rheumatoid Arthritis (RA): Functional Status Assessment	98	77.9%	83.7%	82.1%	2.6%
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	58	83.8%	83.3%	83.6%	-0.1%
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	64	98.3%	98.8%	98.1%	-0.1%
181	Elder Maltreatment Screen and Follow-Up Plan	18	94.4%	97.0%	98.1%	1.9%
182	Functional Outcome Assessment in Chiropractic Care	86	84.2%	81.8%	82.9%	-0.8%
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	91	80.3%	76.4%	79.3%	-0.6%
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	99	79.6%	81.1%	80.8%	0.8%
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	392	97.6%	97.6%	97.1%	-0.3%
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	16	91.4%	93.2%	97.9%	3.5%

Notes for Table A26: (1) Results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms. (3) Results were restricted to individual measures (i.e., excluded measures groups). (4) If an eligible professional participated in multiple mechanisms, we used performance information in accordance with the following hierarchy: EHR, claims, and registry. (5) The “Growth Rate” is the compound annual growth rate (i.e., CAGR). ^a Measure was not reportable via claims (e.g., registry or EHR only) during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 228, 233, 234, 235, 237, 238, 239, and 240). ^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 136, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215 and 216). ^c Measure was not reportable via claims (e.g., registry only) during the 2009 program year (Measures 7, 33, 46, 81, 82, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171 and 174). ^d Measure was an inverse measure where a lower performance rate indicates better performance (Measures 1, 146, 164, 165, 166, 167, 168 and 192). ^e Includes eligible professionals who reported a measure for at least the three most recent program years.

Table A27. Individual Measure Performance Information Among Eligible Professionals who Participated Continuously in the Measure for Two Years for the Physician Quality Reporting System (2010 to 2011)

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus ^c	21,482	19.8%	20.1%	-0.4%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	20,433	58.0%	58.2%	0.3%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	19,534	59.7%	71.8%	20.2%
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	1,688	91.0%	92.3%	1.4%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	11,758	85.7%	87.4%	2.0%
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a,b}	1,654	76.2%	85.5%	12.3%
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	723	89.0%	90.0%	1.2%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	769	70.3%	75.9%	7.9%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	8,732	67.9%	67.1%	-1.2%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	9,385	96.0%	96.0%	0.0%
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	9,809	96.4%	96.4%	0.0%
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	6,722	97.7%	97.6%	-0.1%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	3,369	92.3%	93.0%	0.8%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	3,896	94.7%	94.7%	0.0%
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin	4,831	92.8%	93.4%	0.7%
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	3,591	95.2%	95.3%	0.1%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	4,224	95.2%	95.8%	0.6%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post- Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older	443	61.6%	59.9%	-2.8%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	10,289	83.5%	85.1%	1.9%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	29,710	92.3%	93.3%	1.1%
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	1,973	82.8%	85.2%	2.8%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	2,835	86.3%	87.5%	1.5%
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge ^{a,b}	322	76.8%	85.3%	11.0%
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	1,014	91.9%	92.0%	0.0%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	2,288	72.6%	75.7%	4.3%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	7,440	60.2%	64.3%	6.9%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	430	46.7%	56.4%	20.8%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	3,093	73.0%	67.1%	-8.1%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	1,065	98.6%	98.6%	0.0%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	845	92.7%	94.1%	1.5%
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	858	99.5%	99.4%	-0.1%
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility	212	88.3%	93.5%	5.8%
47	Advance Care Plan	5,805	54.1%	56.3%	4.1%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	4,274	74.8%	75.6%	1.0%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	1,515	90.9%	91.3%	0.4%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	1,558	91.4%	90.9%	-0.6%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	2,079	66.4%	68.1%	2.6%
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	1,511	90.8%	66.1%	-27.2%
53	Asthma: Pharmacologic Therapy	422	86.9%	69.6%	-20.0%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	28,450	95.5%	95.6%	0.0%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	23,545	96.6%	96.8%	0.2%
56	Community-Acquired Pneumonia (CAP): Vital Signs	24,671	95.8%	96.2%	0.4%
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	27,225	94.9%	95.3%	0.5%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	24,562	97.5%	97.8%	0.3%
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	17,384	93.6%	93.3%	-0.3%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
64	Asthma: Asthma Assessment	180	51.5%	52.8%	2.6%
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	2	100.0%	100.0%	0.0%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	997	93.5%	94.3%	0.9%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	794	96.9%	98.2%	1.3%
69	Multiple Myeloma: Treatment with Bisphosphonates	1,274	89.5%	89.8%	0.4%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	1,190	95.0%	95.9%	1.0%
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer	1,162	94.6%	95.0%	0.5%
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	958	95.7%	95.9%	0.2%
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	10,848	78.4%	81.9%	4.5%
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	88	62.0%	75.5%	21.7%
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a,b}	18	57.8%	37.3%	-35.4%
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	178	88.2%	89.0%	0.8%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	168	89.8%	93.3%	3.9%
86	Hepatitis C: Antiviral Treatment Prescribed	122	69.9%	70.5%	0.8%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	110	83.5%	90.6%	8.4%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	269	75.3%	79.4%	5.5%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	46	75.7%	85.2%	12.6%
91	Acute Otitis Externa (AOE): Topical Therapy	376	71.4%	80.4%	12.6%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
92	Acute Otitis Externa (AOE): Pain Assessment	203	80.3%	82.9%	3.2%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	249	86.4%	89.3%	3.3%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	3,691	97.6%	97.0%	-0.6%
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	3,421	98.5%	98.2%	-0.3%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	321	77.8%	92.1%	18.3%
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	357	81.0%	92.2%	13.8%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	397	97.7%	99.2%	1.5%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	377	91.0%	92.6%	1.7%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	472	94.3%	96.0%	1.8%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	653	86.0%	84.6%	-1.7%
109	Osteoarthritis (OA): Function and Pain Assessment	747	78.3%	81.3%	3.8%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	10,281	53.2%	53.6%	0.8%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	11,196	57.4%	64.9%	13.1%
112	Preventive Care and Screening: Screening Mammography	8,877	56.6%	59.8%	5.7%
113	Preventive Care and Screening: Colorectal Cancer Screening	9,418	54.9%	57.4%	4.7%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	54	39.1%	37.6%	-4.0%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	10,784	86.5%	86.1%	-0.5%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	651	77.5%	79.3%	2.3%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	6,376	75.4%	78.9%	4.7%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	1,417	41.5%	43.2%	3.9%
122	Chronic Kidney Disease (CKD): Blood Pressure Management	1,274	59.9%	62.1%	3.8%
123	Chronic Kidney Disease (CKD): Plan of Care - Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)	310	94.7%	93.9%	-0.8%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	38,488	99.7%	99.6%	-0.1%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	1,934	89.6%	91.1%	1.7%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	1,240	88.4%	90.8%	2.8%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	5,938	61.3%	65.1%	6.3%
130	Documentation of Current Medications in the Medical Record	16,628	78.3%	88.3%	12.7%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	4,652	97.9%	96.6%	-1.4%
134	Screening for Clinical Depression and Follow-Up Plan	411	86.7%	85.7%	-1.2%
135	Chronic Kidney Disease (CKD): Influenza Immunization	85	58.5%	60.0%	2.6%
137	Melanoma: Continuity of Care – Recall System ^{a,b}	1,017	91.9%	96.3%	4.8%
138	Melanoma: Coordination of Care ^{a,b}	901	90.1%	94.0%	4.3%
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	6,126	93.2%	93.2%	-0.1%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	3,148	95.1%	96.1%	1.0%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	810	76.7%	77.6%	1.2%
143	Oncology: Medical and Radiation – Pain Intensity Quantified ^{a,b}	16	74.5%	67.7%	-9.2%
144	Oncology: Medical and Radiation – Plan of Care for Pain ^{a,b}	10	98.6%	99.8%	1.3%
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	9,238	49.2%	54.5%	10.8%
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening ^c	6,464	0.6%	1.1%	-0.5%
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	5,429	55.6%	56.4%	1.5%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	291	61.6%	62.6%	1.6%
154	Falls: Risk Assessment	5,725	92.1%	92.5%	0.4%
155	Falls: Plan of Care	2,795	88.3%	88.6%	0.3%
156	Oncology: Radiation Dose Limits to Normal Tissues	299	94.2%	95.4%	1.2%
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	27	89.3%	91.0%	1.8%
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	319	94.8%	95.5%	0.7%
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage ^{a,b}	53	93.5%	94.6%	1.3%
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a,b}	42	91.2%	78.1%	-14.4%
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy ^{a,b}	34	99.8%	99.6%	-0.2%
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy ^{a,b}	42	96.4%	88.4%	-8.3%
163	Diabetes Mellitus: Foot Exam	3,118	80.9%	83.8%	3.5%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation) ^{a,b,c}	1	1.9%	0.0%	2.0%
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a,b,c}	1	5.9%	0.0%	6.3%
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge ^{a,b}	1	100.0%	100.0%	0.0%
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	150	96.1%	97.2%	1.2%
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	2,581	73.3%	86.2%	17.5%
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	219	89.2%	85.5%	-4.0%
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	242	86.8%	87.0%	0.3%
178	Rheumatoid Arthritis (RA): Functional Status Assessment	257	86.0%	86.8%	0.9%
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	165	88.0%	87.4%	-0.7%
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	196	99.0%	98.9%	-0.1%
181	Elder Maltreatment Screen and Follow-Up Plan	21	97.4%	96.0%	-1.4%
182	Functional Outcome Assessment in Chiropractic Care	218	75.2%	76.5%	1.7%
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	195	67.2%	67.4%	0.3%
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	185	75.0%	73.4%	-2.1%
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	626	96.7%	96.6%	-0.1%
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	52	92.0%	93.7%	1.8%
187	Stroke and Stroke Rehabilitation: Thrombolytic Therapy ^{a,b}	13	89.4%	100.0%	11.9%
189	Referral for Otologic Evaluation for Patients with a History of Active Drainage From the Ear Within the Previous 90 Days	4	100.0%	100.0%	0.0%
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss	19	92.8%	98.4%	6.1%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
191	Cataracts: 20/40 or Better Visual Acuity within 90 days Following Cataract Surgery ^{a,b}	109	93.0%	94.6%	1.8%
192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures ^{a,b,c}	92	5.1%	4.9%	0.1%
193	Perioperative Temperature Management	12,596	85.7%	88.2%	3.0%
194	Oncology: Cancer Stage Documented	847	90.9%	91.6%	0.7%
195	Radiology: Stenosis Measurement in Carotid Imaging Studies	9,328	60.5%	61.1%	1.0%
196	Coronary Artery Disease (CAD): Symptom and Activity Assessment ^{a,b}	335	68.1%	81.5%	19.7%
197	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol ^{a,b}	1,118	76.8%	82.2%	7.0%
198	Heart Failure: Left Ventricular Function (LVF) Assessment ^{a,b}	473	60.7%	75.5%	24.5%
199	Heart Failure: Patient Education ^{a,b}	451	51.1%	55.3%	8.2%
200	Heart Failure: Warfarin Therapy for Patients with Atrial Fibrillation ^{a,b}	421	69.2%	71.0%	2.5%
201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control	2,404	75.6%	74.5%	-1.4%
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile	1,579	72.9%	72.7%	-0.2%
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control	2,289	57.1%	60.1%	5.1%
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	2,506	74.9%	84.1%	12.3%
205	HIV/AIDS: Sexually Transmitted Diseases Screening for Chlamydia and Gonorrhea ^{a,b}	18	75.4%	81.8%	8.4%
206	HIV/AIDS: Screening for High Risk Sexual Behaviors ^{a,b}	4	50.0%	99.5%	98.9%
207	HIV/AIDS: Screening for Injection Drug Use ^{a,b}	4	96.9%	99.5%	2.7%
208	HIV/AIDS: Sexually Transmitted Diseases Screening for Syphilis ^{a,b}	17	78.0%	77.1%	-1.3%
209	Functional Communication Measure - Spoken Language Comprehension ^{a,b}	8	73.4%	80.3%	9.4%

Measure Number	Measure Description	Eligible Professionals (EPs) who Reported the Measure Two Years Continuously ^d	Average Performance Rate per EP in 2010	Average Performance Rate per EP in 2011	Growth Rate
210	Functional Communication Measure - Attention ^{a,b}	5	50.0%	73.0%	46.0%
211	Functional Communication Measure - Memory ^{a,b}	9	50.6%	63.8%	26.1%
212	Functional Communication Measure - Motor Speech ^{a,b}	3	66.7%	44.4%	-33.3%
213	Functional Communication Measure - Reading ^{a,b}	2	66.7%	80.0%	20.0%
214	Functional Communication Measure - Spoken Language Expression ^{a,b}	9	38.9%	79.3%	103.9%
215	Functional Communication Measure - Writing ^{a,b}	1	50.0%	66.7%	33.3%
216	Functional Communication Measure - Swallowing ^{a,b}	8	79.5%	81.3%	2.2%

Notes for Table A27: (1) Results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms. (3) Results were restricted to individual measures (i.e., excluded measures groups). (4) If an eligible professional participated in multiple mechanisms, we used performance information in accordance with the following hierarchy: EHR, claims, and registry. (5) The "Growth Rate" is the compound annual growth rate (i.e., CAGR). ^a Measure was not reportable via claims (e.g., registry or EHR only) during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 228, 233, 234, 235, 237, 238, 239, and 240). ^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 136, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215 and 216). ^c Measure was an inverse measure where a lower performance rate indicates better performance (Measures 1, 146, 164, 165, 166, 167, 168 and 192). ^dIncludes eligible professionals who reported a measure for at least the two most recent program years.

Table A28. Percent of Eligible Professionals who Participated and had at Least a 90 Percent Performance Rate by Individual Measures for the Physician Quality Reporting System (2011)

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
1	Diabetes Mellitus: Hemoglobin A1c Poor Control in Diabetes Mellitus ^d	40.3%
2	Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	11.3%
3	Diabetes Mellitus: High Blood Pressure Control in Diabetes Mellitus	24.2%
5	Heart Failure: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	50.0%
6	Coronary Artery Disease (CAD): Oral Antiplatelet Therapy Prescribed for Patients with CAD	62.5%
7	Coronary Artery Disease (CAD): Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI) ^{a,b,c}	47.8%
8	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	53.2%
9	Major Depressive Disorder (MDD): Antidepressant Medication During Acute Phase for Patients with MDD	54.6%
10	Stroke and Stroke Rehabilitation: Computed Tomography (CT) or Magnetic Resonance Imaging (MRI) Reports	33.4%
12	Primary Open Angle Glaucoma (POAG): Optic Nerve Evaluation	88.7%
14	Age-Related Macular Degeneration (AMD): Dilated Macular Examination	89.6%
18	Diabetic Retinopathy: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy	93.4%
19	Diabetic Retinopathy: Communication with the Physician Managing On-going Diabetes Care	85.0%
20	Perioperative Care: Timing of Antibiotic Prophylaxis – Ordering Physician	87.4%
21	Perioperative Care: Selection of Antibiotic - First OR Second Generation Cephalosporin	84.3%
22	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Non-Cardiac Procedures)	88.7%
23	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients)	90.6%
24	Osteoporosis: Communication with the Physician Managing On-going Care Post- Fracture of Hip, Spine, or Distal Radius for Men and Women Aged 50 Years and Older	53.1%
28	Aspirin at Arrival for Acute Myocardial Infarction (AMI)	68.0%
30	Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics	82.8%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
31	Stroke and Stroke Rehabilitation: Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage	71.0%
32	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy	73.5%
33	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge _{a,b,c}	67.0%
35	Stroke and Stroke Rehabilitation: Screening for Dysphagia	53.9%
36	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services	54.6%
39	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older	30.2%
40	Osteoporosis: Management Following Fracture of Hip, Spine or Distal Radius for Men and Women Aged 50 Years and Older	54.9%
41	Osteoporosis: Pharmacologic Therapy for Men and Women Aged 50 Years and Older	46.6%
43	Coronary Artery Bypass Graft (CABG): Use of Internal Mammary Artery (IMA) in Patients with Isolated CABG Surgery	96.3%
44	Coronary Artery Bypass Graft (CABG): Preoperative Beta-Blocker in Patients with Isolated CABG Surgery	84.8%
45	Perioperative Care: Discontinuation of Prophylactic Antibiotics (Cardiac Procedures)	96.9%
46	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility ^c	89.5%
47	Advance Care Plan	34.0%
48	Urinary Incontinence: Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older	62.3%
49	Urinary Incontinence: Characterization of Urinary Incontinence in Women Aged 65 Years and Older	77.1%
50	Urinary Incontinence: Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older	82.1%
51	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation	56.1%
52	Chronic Obstructive Pulmonary Disease (COPD): Bronchodilator Therapy	59.3%
53	Asthma: Pharmacologic Therapy	47.2%
54	12-Lead Electrocardiogram (ECG) Performed for Non-Traumatic Chest Pain	88.2%
55	12-Lead Electrocardiogram (ECG) Performed for Syncope	90.7%
56	Community-Acquired Pneumonia (CAP): Vital Signs	91.6%
57	Community-Acquired Pneumonia (CAP): Assessment of Oxygen Saturation	88.7%
58	Community-Acquired Pneumonia (CAP): Assessment of Mental Status	94.2%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
59	Community-Acquired Pneumonia (CAP): Empiric Antibiotic	84.0%
64	Asthma: Asthma Assessment	38.0%
65	Treatment for Children with Upper Respiratory Infection (URI): Avoidance of Inappropriate Use	82.4%
66	Appropriate Testing for Children with Pharyngitis	95.8%
67	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow	87.9%
68	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy	80.0%
69	Multiple Myeloma: Treatment with Bisphosphonates	75.1%
70	Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry	87.2%
71	Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer	77.9%
72	Colon Cancer: Chemotherapy for Stage III Colon Cancer Patients	70.2%
76	Prevention of Catheter-Related Bloodstream Infections (CRBSI): Central Venous Catheter (CVC) Insertion Protocol	72.0%
79	End Stage Renal Disease (ESRD): Influenza Immunization in Patients with ESRD	63.8%
81	End Stage Renal Disease (ESRD): Plan of Care for Inadequate Hemodialysis in ESRD Patients ^{a,b,c}	66.7%
83	Hepatitis C: Testing for Chronic Hepatitis C – Confirmation of Hepatitis C Viremia ^{a,b}	15.9%
84	Hepatitis C: Ribonucleic Acid (RNA) Testing Before Initiating Treatment	37.0%
85	Hepatitis C: HCV Genotype Testing Prior to Treatment	48.2%
86	Hepatitis C: Antiviral Treatment Prescribed	34.2%
87	Hepatitis C: HCV Ribonucleic Acid (RNA) Testing at Week 12 of Treatment	34.4%
89	Hepatitis C: Counseling Regarding Risk of Alcohol Consumption	55.9%
90	Hepatitis C: Counseling Regarding Use of Contraception Prior to Antiviral Therapy	42.6%
91	Acute Otitis Externa (AOE): Topical Therapy	74.8%
92	Acute Otitis Externa (AOE): Pain Assessment	79.5%
93	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use	68.6%
99	Breast Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	88.9%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
100	Colorectal Cancer Resection Pathology Reporting: pT Category (Primary Tumor) and pN Category (Regional Lymph Nodes) with Histologic Grade	93.1%
102	Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients	55.6%
104	Prostate Cancer: Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients	69.1%
105	Prostate Cancer: Three-Dimensional (3D) Radiotherapy	94.1%
106	Major Depressive Disorder (MDD): Diagnostic Evaluation	73.1%
107	Major Depressive Disorder (MDD): Suicide Risk Assessment	78.0%
108	Rheumatoid Arthritis (RA): Disease Modifying Anti-Rheumatic Drug (DMARD) Therapy	55.7%
109	Osteoarthritis (OA): Function and Pain Assessment	69.4%
110	Preventive Care and Screening: Influenza Immunization for Patients >= 50 Years Old	19.5%
111	Preventive Care and Screening: Pneumonia Vaccination for Patients 65 Years and Older	24.0%
112	Preventive Care and Screening: Screening Mammography	23.0%
113	Preventive Care and Screening: Colorectal Cancer Screening	24.7%
116	Antibiotic Treatment for Adults with Acute Bronchitis: Avoidance of Inappropriate Use	26.0%
117	Diabetes Mellitus: Dilated Eye Exam in Diabetic Patient	72.3%
118	Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD) ^{a,b}	28.1%
119	Diabetes Mellitus: Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients	46.5%
121	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)	31.0%
122	Chronic Kidney Disease (CKD): Blood Pressure Management	45.5%
123	Chronic Kidney Disease (CKD): Plan of Care - Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)	73.8%
124	Health Information Technology (HIT): Adoption/Use of Electronic Health Records (EHR)	98.5%
126	Diabetes Mellitus: Diabetic Foot and Ankle Care, Peripheral Neuropathy – Neurological Evaluation	74.0%
127	Diabetes Mellitus: Diabetic Foot and Ankle Care, Ulcer Prevention – Evaluation of Footwear	63.2%
128	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	33.7%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
130	Documentation of Current Medications in the Medical Record	71.0%
131	Pain Assessment Prior to Initiation of Patient Therapy and Follow-Up	91.6%
134	Screening for Clinical Depression and Follow-Up Plan	68.4%
135	Chronic Kidney Disease (CKD): Influenza Immunization	52.7%
137	Melanoma: Continuity of Care – Recall System ^{a,b}	91.7%
138	Melanoma: Coordination of Care ^{a,b}	87.8%
140	Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement	83.4%
141	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	92.7%
142	Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over-the-Counter (OTC) Medications	73.4%
143	Oncology: Medical and Radiation – Pain Intensity Quantified ^{a,b}	55.6%
144	Oncology: Medical and Radiation – Plan of Care for Pain ^{a,b}	73.9%
145	Radiology: Exposure Time Reported for Procedures Using Fluoroscopy	31.6%
146	Radiology: Inappropriate Use of “Probably Benign” Assessment Category in Mammography Screening ^d	98.4%
147	Nuclear Medicine: Correlation with Existing Imaging Studies for All Patients Undergoing Bone Scintigraphy	26.8%
153	Chronic Kidney Disease (CKD): Referral for Arteriovenous (AV) Fistula	43.0%
154	Falls: Risk Assessment	49.7%
155	Falls: Plan of Care	82.4%
156	Oncology: Radiation Dose Limits to Normal Tissues	89.6%
157	Thoracic Surgery: Recording of Clinical Stage for Lung Cancer and Esophageal Cancer Resection	72.9%
158	Carotid Endarterectomy: Use of Patch During Conventional Carotid Endarterectomy	86.5%
159	HIV/AIDS: CD4+ Cell Count or CD4+ Percentage ^{a,b,c}	73.0%
160	HIV/AIDS: Pneumocystis Jiroveci Pneumonia (PCP) Prophylaxis ^{a,b,c}	38.6%
161	HIV/AIDS: Adolescent and Adult Patients with HIV/AIDS Who Are Prescribed Potent Antiretroviral Therapy ^{a,b,c}	91.0%
162	HIV/AIDS: HIV RNA Control After Six Months of Potent Antiretroviral Therapy ^{a,b,c}	67.1%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
163	Diabetes Mellitus: Foot Exam	62.1%
164	Coronary Artery Bypass Graft (CABG): Prolonged Intubation (Ventilation) ^{a,b,c,d}	75.0%
165	Coronary Artery Bypass Graft (CABG): Deep Sternal Wound Infection Rate ^{a,b,c,d}	75.0%
168	Coronary Artery Bypass Graft (CABG): Surgical Re-exploration ^{a,b,c,d}	83.3%
169	Coronary Artery Bypass Graft (CABG): Antiplatelet Medications at Discharge ^{a,b,c}	88.9%
172	Hemodialysis Vascular Access Decision-Making by Surgeon to Maximize Placement of Autogenous Arterial Venous (AV) Fistula	86.7%
173	Preventive Care and Screening: Unhealthy Alcohol Use – Screening	70.6%
176	Rheumatoid Arthritis (RA): Tuberculosis Screening	49.0%
177	Rheumatoid Arthritis (RA): Periodic Assessment of Disease Activity	86.6%
178	Rheumatoid Arthritis (RA): Functional Status Assessment	84.5%
179	Rheumatoid Arthritis (RA): Assessment and Classification of Disease Prognosis	82.3%
180	Rheumatoid Arthritis (RA): Glucocorticoid Management	90.4%
181	Elder Maltreatment Screen and Follow-Up Plan	90.2%
182	Functional Outcome Assessment in Chiropractic Care	69.0%
183	Hepatitis C: Hepatitis A Vaccination in Patients with HCV	39.3%
184	Hepatitis C: Hepatitis B Vaccination in Patients with HCV	42.0%
185	Endoscopy & Polyp Surveillance: Colonoscopy Interval for Patients with a History of Adenomatous Polyps – Avoidance of Inappropriate Use	89.2%
186	Wound Care: Use of Compression System in Patients with Venous Ulcers	85.0%
187	Stroke and Stroke Rehabilitation: Thrombolytic Therapy ^{a,b}	76.9%
188	Referral for Otologic Evaluation for Patients with Congenital or Traumatic Deformity of the Ear	33.3%
189	Referral for Otologic Evaluation for Patients with a History of Active Drainage From the Ear Within the Previous 90 Days	42.9%
190	Referral for Otologic Evaluation for Patients with a History of Sudden or Rapidly Progressive Hearing Loss	40.6%
191	Cataracts: 20/40 or Better Visual Acuity within 90 days Following Cataract Surgery ^{a,b}	77.3%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
192	Cataracts: Complications within 30 Days Following Cataract Surgery Requiring Additional Surgical Procedures ^{a,b,c,d}	95.6%
193	Perioperative Temperature Management	63.0%
194	Oncology: Cancer Stage Documented	79.5%
195	Radiology: Stenosis Measurement in Carotid Imaging Studies	39.3%
196	Coronary Artery Disease (CAD): Symptom and Activity Assessment ^{a,b}	44.5%
197	Coronary Artery Disease (CAD): Drug Therapy for Lowering LDL-Cholesterol ^{a,b}	40.2%
198	Heart Failure: Left Ventricular Function (LVF) Assessment ^{a,b}	31.9%
199	Heart Failure: Patient Education ^{a,b}	23.8%
200	Heart Failure: Warfarin Therapy for Patients with Atrial Fibrillation ^{a,b}	21.5%
201	Ischemic Vascular Disease (IVD): Blood Pressure Management Control	34.7%
202	Ischemic Vascular Disease (IVD): Complete Lipid Profile	32.6%
203	Ischemic Vascular Disease (IVD): Low Density Lipoprotein (LDL-C) Control	12.3%
204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	44.1%
205	HIV/AIDS: Sexually Transmitted Diseases Screening for Chlamydia and Gonorrhea ^{a,b}	60.0%
206	HIV/AIDS: Screening for High Risk Sexual Behaviors ^{a,b}	66.7%
207	HIV/AIDS: Screening for Injection Drug Use ^{a,b}	58.3%
208	HIV/AIDS: Sexually Transmitted Diseases Screening for Syphilis ^{a,b}	61.5%
209	Functional Communication Measure - Spoken Language Comprehension ^{a,b}	47.8%
210	Functional Communication Measure - Attention ^{a,b}	26.7%
211	Functional Communication Measure - Memory ^{a,b}	42.9%
212	Functional Communication Measure - Motor Speech ^{a,b}	64.3%
213	Functional Communication Measure - Reading ^{a,b}	87.5%
214	Functional Communication Measure - Spoken Language Expression ^{a,b}	48.0%
215	Functional Communication Measure - Writing ^{a,b}	50.0%
216	Functional Communication Measure - Swallowing ^{a,b}	33.3%

Measure Number	Measure Description	Percent of Eligible Professionals Who Had a Performance Rate of At Least 90 Percent
217	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments ^a	43.1%
218	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Hip Impairments ^a	45.9%
219	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lower Leg, Foot or Ankle Impairments ^a	38.0%
220	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Lumbar Spine Impairments ^a	33.1%
221	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Shoulder Impairments ^a	42.4%
222	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Elbow, Wrist or Hand Impairments ^a	47.3%
223	Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Neck, Cranium, Mandible, Thoracic Spine, Ribs, or Other General Orthopedic Impairments ^a	35.5%
224	Melanoma: Overutilization of Imaging Studies in Stage 0-IA Melanoma ^a	87.2%
225	Radiology: Reminder System for Mammograms	54.3%
226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	64.1%
228	Heart Failure (HF): Left Ventricular Function (LVF) Testing ^a	75.0%
231	Asthma: Tobacco Use: Screening- Ambulatory Care Setting	79.5%
232	Asthma: Tobacco Use: Intervention- Ambulatory Care Setting	36.1%
235	Hypertension (HTN): Plan of Care ^a	50.5%
238	Drugs to be Avoided in the Elderly ^{a,d}	90.0%
239	Weight Assessment and Counseling for Children and Adolescents ^a	1.9%

Notes for Table A28: (1) Results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms. (3) Results were restricted to individual measures (i.e., excluded measures groups). (4) If an eligible professional participated in multiple mechanisms, we used performance information in accordance with the following hierarchy: EHR, claims, and registry. ^a Measure was not reportable via claims (e.g., registry or EHR only) during the 2011 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 228, 233, 234, 235, 237, 238, 239, and 240). ^b Measure was not reportable via claims (e.g., registry only) during the 2010 program year (Measures 5, 7, 8, 33, 81, 82, 83, 118, 136, 137, 138, 143, 144, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171, 174, 187, 191, 192, 196, 197, 198, 199, 200, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215 and 216). ^c Measure was not reportable via claims (e.g., registry only) during the 2009

program year (Measures 7, 33, 46, 81, 82, 159, 160, 161, 162, 164, 165, 166, 167, 168, 169, 170, 171 and 174). ^d Measure was an inverse measure where a lower performance rate indicates better performance (Measures 1, 146, 164, 165, 166, 167, 168, 192 and 238).

Table A29. Performance Information for Measures Reported by Practices Participating in the Group Practice Reporting Option (GPRO) I for the Physician Quality Reporting System (2011)

GPRO measures	Measure Description	GPRO Count	Total Denominator Instances	Average Denominator Instances per GPRO	Total Numerator Instances	Average Numerator Instances per GPRO	Average Performance Rate
Coronary Artery Disease	--	--	--	--	--	--	--
CAD-1	Oral Antiplatelet Therapy Prescribed for Patients with CAD	47	22,721	483	22,143	471	83.5%
CAD-2	Drug Therapy for Lowering LDL-Cholesterol	47	22,721	483	21,477	457	88.3%
CAD-3	Beta-Blocker Therapy for CAD Patients with Prior Myocardial Infarction (MI)	47	8,507	181	7,663	163	86.3%
CAD-7	Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD)	47	10,903	232	9,831	209	82.9%
Diabetes Mellitus	--	--	--	--	--	--	--
DM-1	Hemoglobin A1c Testing	46	21,821	474	21,821	474	88.6%
DM-2	Hemoglobin A1c Poor Control in Diabetes Mellitus ^a	46	21,821	474	21,821	474	23.3%
DM-3	High Blood Pressure Control in Diabetes Mellitus	46	21,821	474	21,821	474	69.2%
DM-5	Low Density Lipoprotein (LDL-C) Control in Diabetes Mellitus	46	21,821	474	21,821	474	53.4%
DM-6	Urine Screening for Microalbumin or Medical Attention for Nephropathy	46	21,821	474	21,821	474	89.1%
DM-7	Dilated Eye Exam in Diabetic Patient	46	21,821	474	21,821	474	56.4%
DM-8	Foot Exam	46	21,821	474	21,693	472	56.2%
DM-9	Lipid Profile	46	21,821	474	21,821	474	79.9%
Heart Failure	--	--	--	--	--	--	--
HF-1	Left Ventricular Function (LVF) Assessment	44	18,186	413	18,186	413	83.6%
HF-2	Left Ventricular Function (LVF) Testing	44	5,592	127	5,573	127	89.8%
HF-3	Weight Measurement	44	132,761	3,017	132,380	3,009	82.2%

GPRO measures	Measure Description	GPRO Count	Total Denominator Instances	Average Denominator Instances per GPRO	Total Numerator Instances	Average Numerator Instances per GPRO	Average Performance Rate
HF-5	Patient Education	44	18,186	413	18,186	413	71.3%
HF-6	Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	44	5,781	131	5,139	117	91.8%
HF-7	Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Left Ventricular Systolic Dysfunction (LVSD)	44	5,781	131	5,074	115	87.6%
HF-8	Warfarin Therapy for Patients with Atrial Fibrillation	44	8,034	183	6,976	159	80.4%
Hypertension	--	--	--	--	--	--	--
HTN-1	Blood Pressure Measurement	44	101,837	2,314	101,837	2,314	91.3%
HTN-2	Blood Pressure Control	44	21,401	486	21,149	481	67.8%
HTN-3	Plan of Care	44	29,989	682	29,989	682	63.8%
Preventive Care	--	--	--	--	--	--	--
Prev-5	Screening Mammography	48	25,744	536	25,580	533	66.0%
Prev-6	Colorectal Cancer Screening	47	24,532	522	24,247	516	59.7%
Prev-7	Influenza Immunization for Patients >= 50 Years Old	48	24,656	514	23,779	495	65.6%
Prev-8	Pneumonia Vaccination for Patients 65 Years and Older	47	24,113	513	24,042	512	60.1%

^a Measure that was an inverse measure where a lower performance rate indicates better performance (DM-2).

Numerator instances reflect counts of performance met and performance not met. Performance rate is the performance met as a percent of (performance met + performance not met).

Table A30. GPRO I and GPRO II Incentive Eligibility and Incentive Payments by Tier for the Physician Quality Reporting System (2011)

GPRO	Number of TINs Participating	Number of TINs Qualifying For Incentive	Percent of Participating TINs who Qualify for Incentive	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount
GPRO I (200+ NPI)	54	54	100.0%	\$38,998.71	\$314,561.89	\$393,510.17	\$1,352,253.41	\$21,249,549.38
GPRO II	--	--	--	--	--	--	--	--
Tier 1 (2-10 NPI)	20	2	10.0%	\$1,323.95	\$16,868.08	\$16,868.08	\$32,412.21	\$33,736.16
Tier 2 (11-25 NPI)	12	0	0.0%	n/a	n/a	n/a	n/a	n/a
Tier 3 (26-50 NPI)	4	1	25.0%	\$19,012.24	\$19,012.24	\$19,012.24	\$19,012.24	\$19,012.24
Tier 4 (51-100 NPI)	1	0	0.0%	n/a	n/a	n/a	n/a	n/a
Tier 5 (101-199 NPI)	1	0	0.0%	n/a	n/a	n/a	n/a	n/a
Total (Unduplicated)	38	3	7.9%	\$1,323.95	\$19,012.24	\$17,582.80	\$32,412.21	\$52,748.39

Note: Data were submitted via a web-based tool for GPRO I. All GPRO II data were submitted via claims.

2011 ERX INCENTIVE PROGRAM APPENDIX TABLES

Table A31. Distribution of Incentive Amounts by Specialty for the eRx Incentive Program (2011)

Specialty	Eligible Professionals who Received an Incentive	Percent of Participating EPs Incentive Eligible	Percent of EPs Incentive Eligible	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount	Percent of National Total
MD/DO	116,775	60.5%	24.7%	\$0.20	\$1,403.77	\$2,040.25	\$72,625.71	\$238,249,989.67	88.8%
Allergy/Immunology	730	53.7%	21.1%	\$45.54	\$683.83	\$963.41	\$10,017.40	\$703,286.02	0.3%
Anesthesiology	439	42.3%	6.5%	\$191.53	\$1,731.30	\$2,200.57	\$10,444.49	\$966,048.11	0.4%
Cardiology	9,851	68.0%	43.6%	\$63.21	\$3,133.60	\$3,762.89	\$34,030.41	\$37,068,238.80	13.8%
Colon/Rectal Surgery	147	36.6%	13.3%	\$37.40	\$1,485.78	\$1,603.62	\$4,317.36	\$235,731.83	0.1%
Critical Care	300	56.7%	24.0%	\$133.73	\$2,089.81	\$2,443.28	\$12,217.89	\$732,982.94	0.3%
Dermatology	3,526	59.7%	33.2%	\$57.10	\$2,334.00	\$3,301.93	\$72,625.71	\$11,642,621.91	4.3%
Emergency Medicine	543	50.3%	7.5%	\$0.38	\$466.78	\$842.09	\$10,364.94	\$457,256.11	0.2%
Endocrinology	1,912	67.0%	37.4%	\$41.97	\$966.22	\$1,267.31	\$10,232.00	\$2,423,104.84	0.9%
Family Practice	29,389	69.8%	34.0%	\$1.04	\$655.83	\$924.19	\$17,726.64	\$27,161,094.08	10.1%
Gastroenterology	3,627	53.5%	30.4%	\$6.21	\$1,715.48	\$1,960.36	\$15,125.45	\$7,110,224.44	2.6%
General Practice	584	60.5%	11.0%	\$39.21	\$892.60	\$1,367.94	\$16,320.03	\$798,876.51	0.3%
General Surgery	748	18.6%	3.7%	\$90.29	\$1,640.88	\$1,973.44	\$13,809.57	\$1,476,132.93	0.6%
Geriatrics	1,074	69.6%	28.8%	\$27.02	\$1,411.51	\$1,873.18	\$19,360.17	\$2,011,794.80	0.7%
Hand Surgery	197	30.5%	12.3%	\$316.01	\$1,747.74	\$2,023.08	\$9,528.97	\$398,547.55	0.1%
Infectious Disease	597	36.0%	13.0%	\$89.36	\$1,427.40	\$1,875.78	\$15,575.78	\$1,119,841.87	0.4%
Internal Medicine	25,549	71.3%	33.1%	\$5.79	\$1,196.18	\$1,607.68	\$30,207.83	\$41,074,638.18	15.3%
Interventional Radiologist	1	3.2%	0.1%	\$3,008.68	\$3,008.68	\$3,008.68	\$3,008.68	\$3,008.68	0.0%
Nephrology	2,294	52.7%	30.4%	\$58.01	\$2,978.24	\$3,089.43	\$15,696.90	\$7,087,161.07	2.6%
Neurology	3,403	58.6%	28.2%	\$37.47	\$1,428.64	\$1,789.88	\$25,416.12	\$6,090,945.48	2.3%
Neurosurgery	231	22.5%	5.3%	\$118.28	\$2,343.97	\$2,547.91	\$12,734.26	\$588,566.91	0.2%
Nuclear Medicine	55	71.4%	23.1%	\$432.31	\$3,113.04	\$3,561.63	\$16,928.44	\$195,889.58	0.1%
Obstetrics/Gynecology	1,871	23.0%	6.2%	\$20.65	\$367.76	\$637.44	\$8,199.24	\$1,192,653.76	0.4%
Oncology/Hematology	3,594	64.8%	33.1%	\$90.75	\$2,626.29	\$3,144.21	\$31,048.83	\$11,300,306.32	4.2%
Ophthalmology	7,939	69.2%	41.6%	\$50.22	\$3,657.25	\$4,448.30	\$44,349.93	\$35,315,085.82	13.2%
Oral/Maxillofacial Surgery	7	43.8%	1.9%	\$168.39	\$404.24	\$555.95	\$977.49	\$3,891.66	0.0%

Specialty	Eligible Professionals who Received an Incentive	Percent of Participating EPs Incentive Eligible	Percent of EPs Incentive Eligible	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount	Percent of National Total
Orthopaedic Surgery	3,282	37.4%	15.8%	\$102.67	\$2,368.07	\$2,804.95	\$21,256.82	\$9,205,848.08	3.4%
Other MD/DO	578	45.1%	8.3%	\$32.61	\$1,968.12	\$2,540.23	\$22,525.38	\$1,468,251.60	0.5%
Otolaryngology	2,364	57.1%	27.5%	\$87.74	\$1,346.63	\$1,617.41	\$13,312.94	\$3,823,568.64	1.4%
Pathology	5	29.4%	1.2%	\$283.57	\$2,432.33	\$2,983.79	\$9,157.86	\$14,918.93	0.0%
Pediatrics	194	30.5%	3.3%	\$0.20	\$445.59	\$683.71	\$7,391.80	\$132,640.07	0.0%
Physical Medicine	995	45.4%	13.8%	\$111.69	\$1,561.83	\$1,963.25	\$14,823.26	\$1,953,431.39	0.7%
Plastic Surgery	85	18.2%	2.0%	\$272.21	\$1,606.79	\$2,330.45	\$14,878.54	\$198,087.96	0.1%
Psychiatry	1,702	53.6%	6.0%	\$31.62	\$475.26	\$834.77	\$8,289.02	\$1,420,786.59	0.5%
Pulmonary Disease	2,870	61.7%	33.7%	\$80.09	\$2,309.68	\$2,726.00	\$20,763.27	\$7,823,632.44	2.9%
Radiation Oncology	26	5.8%	0.6%	\$747.35	\$2,299.71	\$2,602.25	\$5,813.27	\$67,658.60	0.0%
Radiologist	5	10.2%	0.1%	\$350.61	\$3,057.58	\$2,731.24	\$5,889.25	\$13,656.22	0.0%
Rheumatology	1,954	74.9%	46.7%	\$28.23	\$1,426.19	\$1,870.20	\$27,981.53	\$3,654,379.74	1.4%
Thoracic/Cardiac Surgery	36	8.9%	1.1%	\$381.12	\$2,429.00	\$3,471.61	\$26,499.80	\$124,977.83	0.0%
Urology	3,907	70.3%	42.9%	\$109.77	\$2,367.48	\$2,687.27	\$29,133.23	\$10,499,155.24	3.9%
Vascular Surgery	164	18.6%	5.7%	\$139.88	\$3,716.81	\$4,213.82	\$15,587.44	\$691,066.13	0.3%
Other Eligible Professionals	23,562	43.9%	10.0%	\$0.36	\$621.90	\$1,276.57	\$46,350.60	\$30,078,651.98	11.2%
Agencies/Hospitals/Nursing and Treatment Facilities	99	52.7%	8.5%	\$53.21	\$806.17	\$1,321.39	\$7,895.43	\$130,817.26	0.0%
Audiologist	0	0.0%	0.0%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Certified Nurse Midwives	12	5.1%	0.9%	\$16.29	\$83.24	\$124.02	\$560.49	\$1,488.25	0.0%
Chiropractor	6	37.5%	8.1%	\$579.59	\$1,244.40	\$1,214.45	\$1,782.94	\$7,286.72	0.0%
Clinical Nurse Specialists	163	44.3%	8.1%	\$4.81	\$296.76	\$398.18	\$1,936.01	\$64,902.64	0.0%
Counselor/Psychologist	33	26.2%	0.1%	\$50.10	\$489.75	\$634.08	\$1,908.47	\$20,924.76	0.0%
Dentist	2	12.5%	0.1%	\$1,110.12	\$2,224.74	\$2,224.74	\$3,339.36	\$4,449.49	0.0%
Dietitian/Nutritionist	7	19.4%	1.4%	\$75.79	\$134.23	\$516.15	\$1,828.98	\$3,613.08	0.0%
Nurse Anesthetist	0	0.0%	0.0%	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
Nurse Practitioner	7,344	43.9%	14.8%	\$0.36	\$260.59	\$395.08	\$7,043.73	\$2,901,486.36	1.1%

Specialty	Eligible Professionals who Received an Incentive	Percent of Participating EPs Incentive Eligible	Percent of EPs Incentive Eligible	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount	Percent of National Total
Optometry	1,944	33.0%	6.0%	\$37.45	\$881.55	\$1,166.38	\$26,915.34	\$2,267,445.60	0.8%
Other Eligible Professional	6,310	54.5%	19.9%	\$0.99	\$2,075.07	\$2,765.61	\$46,350.60	\$17,451,018.84	6.5%
Physical/Occupational Therapy	29	40.3%	10.4%	\$155.57	\$2,366.66	\$2,578.54	\$10,582.51	\$74,777.72	0.0%
Physician Assistant	4,469	41.5%	14.2%	\$0.58	\$289.88	\$463.17	\$7,840.97	\$2,069,911.98	0.8%
Podiatrist	2,967	41.7%	16.8%	\$40.16	\$1,426.06	\$1,687.83	\$15,106.91	\$5,007,781.35	1.9%
Registered Nurse	161	42.4%	8.1%	\$1.55	\$243.77	\$436.40	\$4,341.03	\$70,260.86	0.0%
Social Worker	16	13.4%	0.1%	\$24.92	\$132.83	\$155.44	\$319.36	\$2,487.07	0.0%
Unknown/Missing	32	33.7%	4.8%	\$30.91	\$405.90	\$659.23	\$3,917.38	\$21,095.32	0.0%
Total (Unduplicated)	140,369	56.9%	19.8%	\$0.20	\$1,268.58	\$1,911.75	\$72,625.71	\$268,349,736.97	100.0%

Notes for Table A31: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A32. Potential Incentives and Participation Information by Specialty for the eRx Incentive Program (2011)

Specialty	Average Potential Incentive per Eligible Professional	% of Eligible Professionals who Participated
MD/DO	\$1,196.49	40.8%
Allergy/Immunology	\$580.30	39.3%
Anesthesiology	\$908.81	15.4%
Cardiology	\$2,696.10	64.1%
Colon/Rectal Surgery	\$1,113.53	36.4%
Critical Care	\$1,551.23	42.3%
Dermatology	\$2,503.40	55.7%
Emergency Medicine	\$411.31	15.0%
Endocrinology	\$851.91	55.8%
Family Practice	\$636.83	48.7%
Gastroenterology	\$1,421.96	56.8%
General Practice	\$579.64	18.2%
General Surgery	\$968.55	20.2%
Geriatrics	\$1,217.27	41.3%
Hand Surgery	\$1,116.06	40.3%
Infectious Disease	\$1,282.26	36.3%
Internal Medicine	\$1,126.13	46.4%
Interventional Radiologist	\$2,502.13	3.9%
Nephrology	\$2,644.55	57.7%
Neurology	\$1,038.16	48.2%
Neurosurgery	\$1,406.30	23.6%
Nuclear Medicine	\$2,133.38	32.4%
Obstetrics/Gynecology	\$198.04	26.8%
Oncology/Hematology	\$1,661.72	51.1%
Ophthalmology	\$2,691.70	60.2%
Oral/Maxillofacial Surgery	\$181.00	4.3%
Orthopaedic Surgery	\$1,540.21	42.3%
Other MD/DO	\$1,086.21	18.5%
Otolaryngology	\$1,055.97	48.1%
Pathology	\$1,140.80	4.1%
Pediatrics	\$90.03	10.8%
Physical Medicine	\$1,210.05	30.4%
Plastic Surgery	\$661.04	10.8%
Psychiatry	\$359.87	11.1%
Pulmonary Disease	\$1,902.30	54.6%

Specialty	Average Potential Incentive per Eligible Professional	% of Eligible Professionals who Participated
Radiation Oncology	\$4,377.54	10.4%
Radiologist	\$2,129.58	1.4%
Rheumatology	\$1,251.00	62.3%
Thoracic/Cardiac Surgery	\$1,747.19	12.6%
Urology	\$1,854.66	61.0%
Vascular Surgery	\$2,617.08	30.6%
Other Eligible Professionals	\$451.28	22.7%
Agencies/Hospitals/Nursing and Treatment Facilities	\$696.48	16.2%
Audiologist	\$211.78	3.7%
Certified Nurse Midwives	\$16.09	16.7%
Chiropractor	\$484.31	21.6%
Clinical Nurse Specialists	\$216.12	18.2%
Counselor/Psychologist	\$204.51	0.4%
Dentist	\$101.07	0.5%
Dietitian/Nutritionist	\$103.04	7.2%
Nurse Anesthetist	\$441.70	5.4%
Nurse Practitioner	\$217.12	33.8%
Optometry	\$305.97	18.2%
Other Eligible Professional	\$1,511.14	36.5%
Physical/Occupational Therapy	\$1,520.28	25.7%
Physician Assistant	\$224.37	34.3%
Podiatrist	\$1,065.96	40.2%
Registered Nurse	\$223.85	19.1%
Social Worker	\$95.52	0.4%
Unknown/Missing	\$346.09	14.4%
Total (Unduplicated)	\$947.59	34.8%

Notes for Table A31: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A33. Eligible Professional Information by Specialty for the eRx Incentive Program (2010 to 2011)

Specialty	Eligible Professionals in 2010	Eligible Professionals in 2011	Eligible Professionals who Participated in 2010	Eligible Professionals who Participated in 2011	Participation Rate in 2010	Participation Rate in 2011
MD/DO	471,684	472,929	90,174	192,986	19.1%	40.8%
Allergy/Immunology	3,454	3,464	674	1,360	19.5%	39.3%
Anesthesiology	6,808	6,729	261	1,037	3.8%	15.4%
Cardiology	22,606	22,588	7,994	14,482	35.4%	64.1%
Colon/Rectal Surgery	1,092	1,103	130	402	11.9%	36.4%
Critical Care	1,301	1,251	279	529	21.4%	42.3%
Dermatology	10,426	10,610	2,176	5,909	20.9%	55.7%
Emergency Medicine	7,108	7,203	479	1,079	6.7%	15.0%
Endocrinology	5,071	5,109	1,305	2,853	25.7%	55.8%
Family Practice	85,251	86,432	22,059	42,102	25.9%	48.7%
Gastroenterology	11,846	11,928	2,668	6,775	22.5%	56.8%
General Practice	5,311	5,308	375	966	7.1%	18.2%
General Surgery	19,900	20,002	1,309	4,031	6.6%	20.2%
Geriatrics	3,853	3,731	690	1,542	17.9%	41.3%
Hand Surgery	1,542	1,603	196	646	12.7%	40.3%
Infectious Disease	4,470	4,578	687	1,660	15.4%	36.3%
Internal Medicine	80,389	77,264	18,916	35,858	23.5%	46.4%
Interventional Radiologist	677	804	14	31	2.1%	3.9%
Nephrology	7,386	7,552	1,770	4,355	24.0%	57.7%
Neurology	11,882	12,055	2,001	5,808	16.8%	48.2%
Neurosurgery	4,367	4,357	324	1,028	7.4%	23.6%
Nuclear Medicine	260	238	45	77	17.3%	32.4%
Obstetrics/Gynecology	29,565	30,278	3,282	8,127	11.1%	26.8%
Oncology/Hematology	10,623	10,846	2,530	5,543	23.8%	51.1%
Ophthalmology	18,903	19,083	6,386	11,479	33.8%	60.2%
Oral/Maxillofacial Surgery	371	369	2	16	0.5%	4.3%

Specialty	Eligible Professionals in 2010	Eligible Professionals in 2011	Eligible Professionals who Participated in 2010	Eligible Professionals who Participated in 2011	Participation Rate in 2010	Participation Rate in 2011
Orthopaedic Surgery	20,506	20,731	2,965	8,776	14.5%	42.3%
Other MD/DO	7,319	6,939	422	1,282	5.8%	18.5%
Otolaryngology	8,381	8,610	1,621	4,142	19.3%	48.1%
Pathology	389	417	10	17	2.6%	4.1%
Pediatrics	5,401	5,868	337	636	6.2%	10.8%
Physical Medicine	7,026	7,201	723	2,191	10.3%	30.4%
Plastic Surgery	4,280	4,302	148	466	3.5%	10.8%
Psychiatry	28,458	28,543	907	3,175	3.2%	11.1%
Pulmonary Disease	8,303	8,512	2,030	4,650	24.4%	54.6%
Radiation Oncology	4,310	4,353	94	452	2.2%	10.4%
Radiologist	3,610	3,557	18	49	0.5%	1.4%
Rheumatology	4,174	4,188	1,322	2,608	31.7%	62.3%
Thoracic/Cardiac Surgery	3,281	3,226	114	406	3.5%	12.6%
Urology	8,924	9,116	2,642	5,560	29.6%	61.0%
Vascular Surgery	2,860	2,881	269	881	9.4%	30.6%
Other Eligible Professionals	224,261	236,371	22,849	53,684	10.2%	22.7%
Agencies/Hospitals/Nursing and Treatment Facilities	1,256	1,164	73	188	5.8%	16.2%
Audiologist	182	216	4	8	2.2%	3.7%
Certified Nurse Midwives	1,211	1,402	109	234	9.0%	16.7%
Chiropractor	71	74	6	16	8.5%	21.6%
Clinical Nurse Specialists	1,909	2,024	182	368	9.5%	18.2%
Counselor/Psychologist	31,017	31,683	52	126	0.2%	0.4%
Dentist	3,221	3,153	3	16	0.1%	0.5%
Dietitian/Nutritionist	454	501	20	36	4.4%	7.2%
Nurse Anesthetist	108	129	1	7	0.9%	5.4%
Nurse Practitioner	43,423	49,550	7,523	16,746	17.3%	33.8%
Optometry	31,106	32,469	3,084	5,896	9.9%	18.2%

Specialty	Eligible Professionals in 2010	Eligible Professionals in 2011	Eligible Professionals who Participated in 2010	Eligible Professionals who Participated in 2011	Participation Rate in 2010	Participation Rate in 2011
Other Eligible Professional	33,392	31,751	5,144	11,587	15.4%	36.5%
Physical/Occupational Therapy	319	280	29	72	9.1%	25.7%
Physician Assistant	28,056	31,425	4,747	10,771	16.9%	34.3%
Podiatrist	17,312	17,700	1,651	7,114	9.5%	40.2%
Registered Nurse	2,085	1,992	177	380	8.5%	19.1%
Social Worker	29,139	30,858	44	119	0.2%	0.4%
Unknown/Missing	718	662	51	95	7.1%	14.4%
Total (Unduplicated)	696,663	709,962	113,074	246,765	16.2%	34.8%

Notes for Table A33: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A34. Eligible Professionals who Qualified for an Incentive from the eRx Incentive Program (2010 to 2011)

Specialty	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligible EPs as a Percent of EPs who Participated in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligible EPs as a Percent of EPs who Participated in 2011
MD/DO	56,050	62.2%	116,775	60.5%
Allergy/Immunology	328	48.7%	730	53.7%
Anesthesiology	103	39.5%	439	42.3%
Cardiology	5,331	66.7%	9,851	68.0%
Colon/Rectal Surgery	36	27.7%	147	36.6%
Critical Care	141	50.5%	300	56.7%
Dermatology	1,322	60.8%	3,526	59.7%
Emergency Medicine	235	49.1%	543	50.3%
Endocrinology	845	64.8%	1,912	67.0%
Family Practice	15,656	71.0%	29,389	69.8%
Gastroenterology	1,359	50.9%	3,627	53.5%
General Practice	248	66.1%	584	60.5%
General Surgery	228	17.4%	748	18.6%
Geriatrics	477	69.1%	1,074	69.6%
Hand Surgery	47	24.0%	197	30.5%
Infectious Disease	265	38.6%	597	36.0%
Internal Medicine	13,793	72.9%	25,549	71.3%
Interventional Radiologist	0	0.0%	1	3.2%
Nephrology	983	55.5%	2,294	52.7%
Neurology	1,184	59.2%	3,403	58.6%
Neurosurgery	70	21.6%	231	22.5%
Nuclear Medicine	25	55.6%	55	71.4%
Obstetrics/Gynecology	834	25.4%	1,871	23.0%
Oncology/Hematology	1,410	55.7%	3,594	64.8%
Ophthalmology	4,026	63.0%	7,939	69.2%
Oral/Maxillofacial Surgery	0	0.0%	7	43.8%
Orthopaedic Surgery	921	31.1%	3,282	37.4%
Other MD/DO	198	46.9%	578	45.1%
Otolaryngology	946	58.4%	2,364	57.1%
Pathology	2	20.0%	5	29.4%
Pediatrics	100	29.7%	194	30.5%
Physical Medicine	346	47.9%	995	45.4%
Plastic Surgery	29	19.6%	85	18.2%

Specialty	Eligible Professionals who Qualified for an Incentive in 2010	Incentive Eligible EPs as a Percent of EPs who Participated in 2010	Eligible Professionals who Qualified for an Incentive in 2011	Incentive Eligible EPs as a Percent of EPs who Participated in 2011
Psychiatry	502	55.3%	1,702	53.6%
Pulmonary Disease	1,254	61.8%	2,870	61.7%
Radiation Oncology	4	4.3%	26	5.8%
Radiologist	1	5.6%	5	10.2%
Rheumatology	969	73.3%	1,954	74.9%
Thoracic/Cardiac Surgery	2	1.8%	36	8.9%
Urology	1,786	67.6%	3,907	70.3%
Vascular Surgery	44	16.4%	164	18.6%
Other Eligible Professionals	9,797	42.9%	23,562	43.9%
Agencies/Hospitals/Nursing and Treatment Facilities	34	46.6%	99	52.7%
Audiologist	0	0.0%	0	0.0%
Certified Nurse Midwives	9	8.3%	12	5.1%
Chiropractor	6	100.0%	6	37.5%
Clinical Nurse Specialists	76	41.8%	163	44.3%
Counselor/Psychologist	8	15.4%	33	26.2%
Dentist	0	0.0%	2	12.5%
Dietitian/Nutritionist	4	20.0%	7	19.4%
Nurse Anesthetist	1	100.0%	0	0.0%
Nurse Practitioner	3,060	40.7%	7,344	43.9%
Optometry	936	30.4%	1,944	33.0%
Other Eligible Professional	2,950	57.3%	6,310	54.5%
Physical/Occupational Therapy	6	20.7%	29	40.3%
Physician Assistant	2,002	42.2%	4,469	41.5%
Podiatrist	628	38.0%	2,967	41.7%
Registered Nurse	71	40.1%	161	42.4%
Social Worker	6	13.6%	16	13.4%
Unknown/Missing	10	19.6%	32	33.7%
Total (Unduplicated)	65,857	58.2%	140,369	56.9%

Notes for Table A34: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A35. Eligible Professional Characteristics for the eRx Incentive Program (2011)

Eligible Professional (EP) Characteristics	Number of EPs	Number of EPs Participating	Participation Rate	Number of EPs who were Incentive Eligible	Incentive Eligibility Rate
Participation Mechanism	--	--	--	--	--
Claims	709,962	242,691	34.2%	134,246	55.3%
Registry	709,962	17,272	2.4%	14,184	82.1%
EHR	709,962	104	0.0%	73	70.2%
Geography (Regions)	--	--	--	--	--
1 – Boston	52,413	16,669	31.8%	9,611	57.7%
2 - New York	87,499	25,559	29.2%	14,586	57.1%
3 – Philadelphia	74,884	28,129	37.6%	15,646	55.6%
4 – Atlanta	129,850	51,937	40.0%	31,112	59.9%
5 – Chicago	130,565	48,844	37.4%	27,289	55.9%
6 – Dallas	66,886	23,004	34.4%	13,440	58.4%
7 - Kansas City	32,454	12,894	39.7%	7,615	59.1%
8 – Denver	23,311	6,925	29.7%	3,612	52.2%
9 - San Francisco	82,405	24,852	30.2%	13,682	55.1%
10 – Seattle	28,343	8,673	30.6%	4,660	53.7%
Unknown	703	586	83.4%	7	1.2%
Practice Size (# of NPIs)	--	--	--	--	--
1	167,221	36,479	21.8%	21,550	59.1%
2-4	104,958	38,550	36.7%	20,863	54.1%
5-10	87,373	34,236	39.2%	19,459	56.8%
11-24	77,862	28,792	37.0%	16,425	57.1%
25-50	57,634	22,078	38.3%	12,620	57.2%
51-99	56,712	24,313	42.9%	14,589	60.0%
100-199	54,130	22,998	42.5%	14,024	61.0%
200+	104,072	39,319	37.8%	20,839	53.0%
Beneficiary Volume	--	--	--	--	--
<= 25	219,928	13,182	6.0%	400	3.0%
26 – 100	159,843	42,088	26.3%	12,755	30.3%
101 – 200	118,027	53,075	45.0%	28,753	54.2%
> 200	211,594	137,850	65.2%	98,461	71.4%
Missing Data	570	570	100.0%	0	0.0%
Specialty	--	--	--	--	--
MD/DO	--	--	--	--	--
Primary Care	174,872	79,562	45.5%	55,716	70.0%
Surgery	58,574	16,652	28.4%	4,897	29.4%

Eligible Professional (EP) Characteristics	Number of EPs	Number of EPs Participating	Participation Rate	Number of EPs who were Incentive Eligible	Incentive Eligibility Rate
Other Specialties	239,483	96,772	40.4%	56,162	58.0%
Other eligible professionals	--	--	--	--	--
Physicians	35,696	5,928	16.6%	1,952	32.9%
Physician Assistant	31,425	10,771	34.3%	4,469	41.5%
Nurse Practitioner	49,550	16,746	33.8%	7,344	43.9%
Podiatrists	17,700	7,114	40.2%	2,967	41.7%
Other Eligible Professionals	102,662	13,220	12.9%	6,862	51.9%
Total (Unduplicated)	709,962	246,765	34.8%	140,369	56.9%

Notes for Table A35: (1) Eligible professional-level results in this table do not include EPs who were part of a practice that participated under the GPRO. (2) Sums across participation methods do not equal totals due to participation in multiple mechanisms. (3) Results included the claims, registry, and EHR reporting mechanisms. (4) EPs in the Unknown categories include Registry and EHR data where a match in claims was not found. (5) Primary Care: Family Practice, General Practice, Pediatrics, and Internal Medicine with no subspecialization; Surgery: Colon/Rectal Surgery, General Surgery, Hand Surgery, Orthopaedic Surgery, Plastic Surgery, Oral/Maxillofacial Surgery, Thoracic/Cardiac Surgery, Vascular Surgery, Neurosurgery; Other Specialties: all remaining MD/DO specialties (6) Physicians: Dentist, Optometry, Oral/Maxillofacial Surgery (non-MD/DO), and Chiropractor; Physicians Assistant: Physician Assistant; Nurse Practitioner: Nurse Practitioner; Podiatrists: Podiatrists; Other Eligible Professionals: all remaining non-MD/DO specialties

Table A36. Eligible Professional Information by State for the eRx Incentive Program (2011)

State or Territory	Eligible Professionals	Eligible Professionals who Participated	Participation Rate	Eligible Professionals who Received Incentive	Incentive Eligibility Rate
Alaska	1,682	330	19.6%	168	50.9%
Alabama	8,774	3,752	42.8%	2,149	57.3%
Arkansas	5,133	2,280	44.4%	1,479	64.9%
Arizona	13,070	3,813	29.2%	2,149	56.4%
California	62,356	18,831	30.2%	10,414	55.3%
Colorado	11,059	3,168	28.6%	1,644	51.9%
Connecticut	11,605	3,448	29.7%	2,001	58.0%
District of Columbia	2,074	500	24.1%	243	48.6%
Delaware	2,371	962	40.6%	613	63.7%
Florida	41,628	16,522	39.7%	9,876	59.8%
Georgia	17,371	6,857	39.5%	4,126	60.2%
Hawaii	2,671	695	26.0%	397	57.1%
Iowa	6,376	2,711	42.5%	1,856	68.5%
Idaho	3,232	930	28.8%	482	51.8%
Illinois	28,485	9,776	34.3%	5,823	59.6%
Indiana	15,462	6,366	41.2%	3,756	59.0%
Kansas	7,224	2,648	36.7%	1,407	53.1%
Kentucky	10,422	3,632	34.8%	2,058	56.7%
Louisiana	9,485	2,605	27.5%	1,407	54.0%
Massachusetts	26,735	9,160	34.3%	5,190	56.7%
Maryland	15,283	5,179	33.9%	2,830	54.6%
Maine	5,450	1,445	26.5%	857	59.3%
Michigan	25,828	9,367	36.3%	5,348	57.1%
Minnesota	18,247	6,332	34.7%	2,830	44.7%
Missouri	13,727	5,521	40.2%	3,241	58.7%
Mississippi	5,165	1,688	32.7%	992	58.8%
Montana	2,564	744	29.0%	371	49.9%
North Carolina	22,200	9,751	43.9%	6,133	62.9%
North Dakota	1,935	528	27.3%	248	47.0%
Nebraska	4,895	1,791	36.6%	965	53.9%
New Hampshire	3,550	1,187	33.4%	743	62.6%
New Jersey	23,044	7,944	34.5%	4,797	60.4%
New Mexico	3,907	1,148	29.4%	662	57.7%
Nevada	4,379	1,375	31.4%	655	47.6%

State or Territory	Eligible Professionals	Eligible Professionals who Participated	Participation Rate	Eligible Professionals who Received Incentive	Incentive Eligibility Rate
New York	59,490	17,488	29.4%	9,705	55.5%
Ohio	27,631	10,558	38.2%	6,024	57.1%
Oklahoma	7,441	2,484	33.4%	1,352	54.4%
Oregon	8,679	2,822	32.5%	1,578	55.9%
Pennsylvania	34,343	13,030	37.9%	7,007	53.8%
Puerto Rico	5,738	86	1.5%	30	34.9%
Rhode Island	3,497	1,044	29.9%	535	51.2%
South Carolina	8,828	3,929	44.5%	2,354	59.9%
South Dakota	2,295	990	43.1%	543	54.8%
Tennessee	15,644	5,576	35.6%	3,190	57.2%
Texas	39,307	14,593	37.1%	8,529	58.4%
Utah	4,304	1,069	24.8%	582	54.4%
Virginia	16,875	6,687	39.6%	3,995	59.7%
Virgin Islands	119	16	13.4%	8	50.0%
Vermont	1,664	362	21.8%	223	61.6%
Washington	14,952	4,520	30.2%	2,387	52.8%
Wisconsin	15,472	6,474	41.8%	3,363	51.9%
West Virginia	4,187	1,609	38.4%	856	53.2%
Wyoming	1,239	319	25.7%	153	48.0%
Other	207	28	13.5%	13	46.4%
Unknown/Missing	661	95	14.4%	32	33.7%
Total (Unduplicated)	709,962	246,765	34.8%	140,369	56.9%

Notes for Table A36: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A37. Eligible Professionals who Successfully met Reporting Criteria but did not Receive an Incentive Because they did not have at Least 10 Percent of their Part B MPFS Charges from Instances for the eRx Measure (i.e., Participation Threshold) for the eRx Incentive Program (2010 to 2011)

Specialty	Number of Successful Reporters (EPs) Not Meeting 10% Threshold in 2010	Percent of Successful Reporters (EPs) Not Meeting 10% Threshold in 2010	Number of Successful Reporters (EPs) Not Meeting 10% Threshold in 2011	Percent of Successful Reporters (EPs) Not Meeting 10% Threshold in 2011
MD/DO	971	1.7%	1,787	1.5%
Allergy/Immunology	3	0.9%	2	0.3%
Anesthesiology	4	3.7%	6	1.3%
Cardiology	175	3.2%	202	2.0%
Colon/Rectal Surgery	0	0.0%	4	2.6%
Critical Care	6	4.1%	12	3.8%
Dermatology	105	7.4%	265	7.0%
Emergency Medicine	5	2.1%	7	1.3%
Endocrinology	2	0.2%	1	0.1%
Family Practice	122	0.8%	115	0.4%
Gastroenterology	30	2.2%	106	2.8%
General Practice	2	0.8%	3	0.5%
General Surgery	17	6.9%	39	5.0%
Geriatrics	4	0.8%	5	0.5%
Hand Surgery	0	0.0%	0	0.0%
Infectious Disease	22	7.7%	59	9.0%
Internal Medicine	99	0.7%	186	0.7%
Interventional Radiologist	1	100.0%	1	50.0%
Nephrology	137	12.2%	377	14.1%
Neurology	11	0.9%	13	0.4%
Neurosurgery	11	13.6%	28	10.8%
Nuclear Medicine	2	7.4%	0	0.0%
Obstetrics/Gynecology	18	2.1%	2	0.1%

Specialty	Number of Successful Reporters (EPs) Not Meeting 10% Threshold in 2010	Percent of Successful Reporters (EPs) Not Meeting 10% Threshold in 2010	Number of Successful Reporters (EPs) Not Meeting 10% Threshold in 2011	Percent of Successful Reporters (EPs) Not Meeting 10% Threshold in 2011
Oncology/Hematology	2	0.1%	5	0.1%
Ophthalmology	14	0.3%	37	0.5%
Oral/Maxillofacial Surgery	0	0.0%	0	0.0%
Orthopaedic Surgery	11	1.2%	34	1.0%
Other MD/DO	23	10.4%	22	3.7%
Otolaryngology	5	0.5%	4	0.2%
Pathology	0	0.0%	0	0.0%
Pediatrics	53	34.6%	16	7.6%
Physical Medicine	3	0.9%	23	2.3%
Plastic Surgery	0	0.0%	8	8.6%
Psychiatry	3	0.6%	14	0.8%
Pulmonary Disease	48	3.7%	87	2.9%
Radiation Oncology	8	66.7%	37	58.7%
Radiologist	1	50.0%	1	16.7%
Rheumatology	3	0.3%	5	0.3%
Thoracic/Cardiac Surgery	5	71.4%	24	40.0%
Urology	6	0.3%	5	0.1%
Vascular Surgery	10	18.5%	32	16.3%
Other Eligible Professionals	219	2.2%	319	1.3%
Agencies/Hospitals/Nursing and Treatment Facilities	4	10.5%	4	3.9%
Audiologist	0	0.0%	0	0.0%
Certified Nurse Midwives	2	18.2%	2	14.3%
Chiropractor	0	0.0%	0	0.0%
Clinical Nurse Specialists	0	0.0%	1	0.6%
Counselor/Psychologist	0	0.0%	0	0.0%

Specialty	Number of Successful Reporters (EPs) Not Meeting 10% Threshold in 2010	Percent of Successful Reporters (EPs) Not Meeting 10% Threshold in 2010	Number of Successful Reporters (EPs) Not Meeting 10% Threshold in 2011	Percent of Successful Reporters (EPs) Not Meeting 10% Threshold in 2011
Dentist	0	0.0%	0	0.0%
Dietitian/Nutritionist	0	0.0%	0	0.0%
Nurse Anesthetist	0	0.0%	0	0.0%
Nurse Practitioner	74	2.4%	80	1.1%
Optometry	0	0.0%	1	0.1%
Other Eligible Professional	65	2.2%	107	1.7%
Physical/Occupational Therapy	1	14.3%	1	3.3%
Physician Assistant	66	3.2%	91	2.0%
Podiatrist	6	0.9%	30	1.0%
Registered Nurse	1	1.4%	2	1.2%
Social Worker	0	0.0%	0	0.0%
Unknown/Missing	11	52.4%	3	8.6%
Total (Unduplicated)	1,201	1.8%	2,109	1.5%

Notes for Table A37: (1) Eligible professional-level results in this table do not include eligible professionals who were part of a practice that participated under the GPRO. (2) Results included the claims, registry, and EHR mechanisms.

Table A38. Eligible Professionals by Specialty Subject to 2012 eRx Payment Adjustment

Specialty	Number of EPs Subject to Payment Adjustment	Percent of EPs Subject to Payment Adjustment
MD/DO	114,892	85.2%
Allergy/Immunology	799	0.6%
Anesthesiology	1,263	0.9%
Cardiology	5,889	4.4%
Colon/Rectal Surgery	240	0.2%
Critical Care	215	0.2%
Dermatology	3,149	2.3%
Emergency Medicine	1,276	1.0%
Endocrinology	1,504	1.1%
Family Practice	24,474	18.2%
Gastroenterology	3,339	2.5%
General Practice	1,759	1.3%
General Surgery	3,271	2.4%
Geriatrics	1,342	1.0%
Hand Surgery	401	0.3%
Infectious Disease	594	0.4%
Internal Medicine	20,813	15.4%
Interventional Radiologist	4	0.0%
Nephrology	1,552	1.2%
Neurology	2,905	2.2%
Neurosurgery	790	0.6%
Nuclear Medicine	30	0.0%
Obstetrics/Gynecology	2,815	2.1%
Oncology/Hematology	3,295	2.4%
Ophthalmology	5,077	3.8%
Oral/Maxillofacial Surgery	19	0.0%
Orthopaedic Surgery	5,790	4.3%
Other MD/DO	1,227	0.9%
Otolaryngology	2,985	2.2%
Pathology	17	0.0%
Pediatrics	237	0.2%
Physical Medicine	1,815	1.4%
Plastic Surgery	404	0.3%
Psychiatry	8,421	6.3%
Pulmonary Disease	2,287	1.7%
Radiation Oncology	282	0.2%
Radiologist	44	0.0%

Specialty	Number of EPs Subject to Payment Adjustment	Percent of EPs Subject to Payment Adjustment
Rheumatology	1,084	0.8%
Thoracic/Cardiac Surgery	215	0.2%
Urology	2,636	2.0%
Vascular Surgery	633	0.5%
Other Eligible Professionals ^a	19,892	14.8%
Nurse Practitioner	9,051	6.7%
Physician Assistant	4,491	3.3%
Podiatrist	6,350	4.7%
Other ^b	32	0.0%
Total (Unduplicated)	134,816	100.0%

Notes: (1) Eligible professional-level results in this table do not include EPs who were part of a practice that participated under the GPRO. (2) The September 2011 NPPES file was used to determine specialty, to be consistent with file used for payment adjustment.

^a Table does not show the "Other Eligible Professionals" specialties that are not subject to the payment adjustment.

^b "Other" includes eligible professionals who originally reported under the GPRO option, but were changed to individual participants after the payment adjustment was assessed. Since there was not an opportunity to assess these EPs as individuals, it was possible for them to have specialties that are not among the list of specialties subject to the payment adjustment.

Table A39. GPRO I and GPRO II Incentive Eligibility and Incentive Payments by Tiers for the eRx Incentive Program (2011)

GPRO	Number of TINs Participating	Number of TINs Qualifying For Incentive	Percent of Participating TINs who Qualify for Incentive	Minimum Incentive Amount	Median Incentive Amount	Mean Incentive Amount	Maximum Incentive Amount	Total Incentive Amount
GPRO I (200+ NPI)	43	40	93.0%	\$38,998.71	\$342,260.38	\$397,201.50	\$1,280,873.30	\$15,888,060.16
GPRO II	--	--	--	--	--	--	--	--
Tier 1 (2-10 NPI)	18	17	94.4%	\$783.03	\$9,134.21	\$12,048.23	\$39,032.28	\$204,819.91
Tier 2 (11-25 NPI)	9	9	100.0%	\$4,282.65	\$24,557.55	\$37,481.99	\$101,773.74	\$337,337.90
Tier 3 (26-50 NPI)	2	1	50.0%	\$41,394.62	\$41,394.62	\$41,394.62	\$41,394.62	\$41,394.62
Tier 4 (51-100 NPI)	1	1	100.0%	\$89,885.52	\$89,885.52	\$89,885.52	\$89,885.52	\$89,885.52
Tier 5 (101-199 NPI)	1	1	100.0%	\$137,868.08	\$137,868.08	\$137,868.08	\$137,868.08	\$137,868.08
Total Unduplicated	31	29	93.6%	\$783.03	\$17,980.86	\$27,976.07	\$137,868.08	\$811,306.02

Note: GPRO I data were submitted via claims and registry mechanisms; all GPRO II data were submitted via claims.