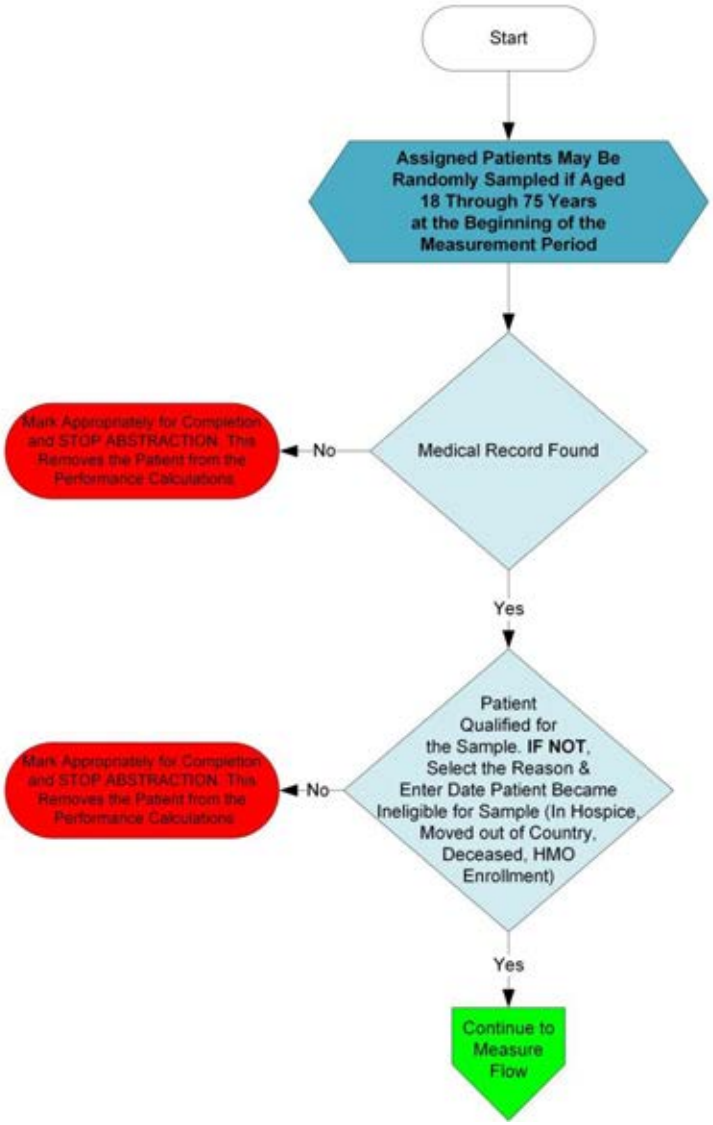
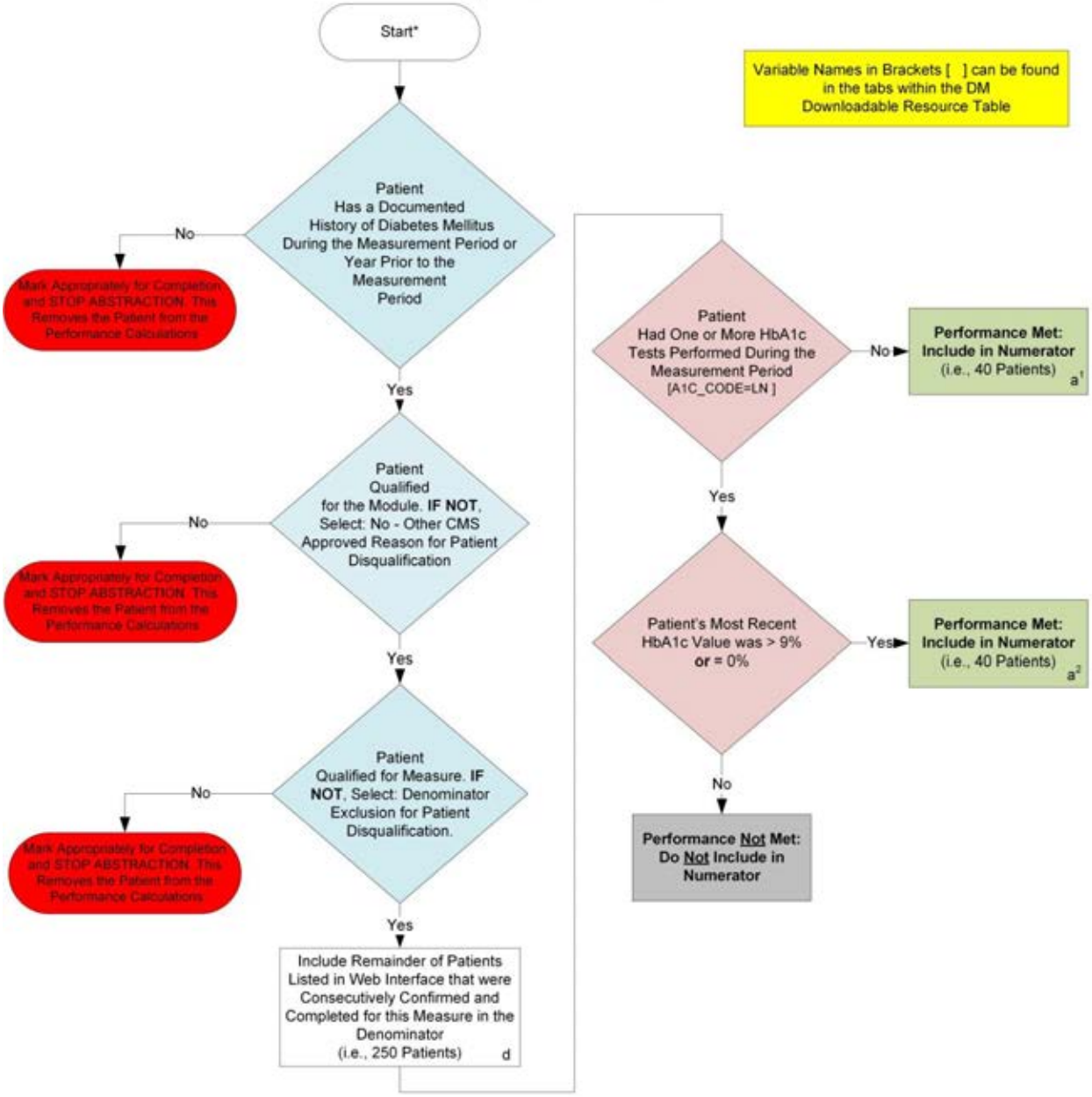
Patient Confirmation Flow for DM

For 2014, confirmation of the "Medical Record Found", or indicating the patient is "Not Qualified for Sample" with a reason of "In Hospice", "Moved out of Country", "Deceased", or "HMO Enrollment", will only need to be done **once** per patient. For module or measure specific reasons a patient is "Not Confirmed" or excluded for "Denominator Exclusion" or "Other CMS Approved Reason", please refer to the associated Data Guidance.



2014 GPRO-DM-2 (NQF 0059): Diabetes: Hemoglobin A1c Poor Control

This flow applies to GPRO Web Interface



(For this measure a lower rate indicates better performance/control)

SAMPLE CALCULATION:

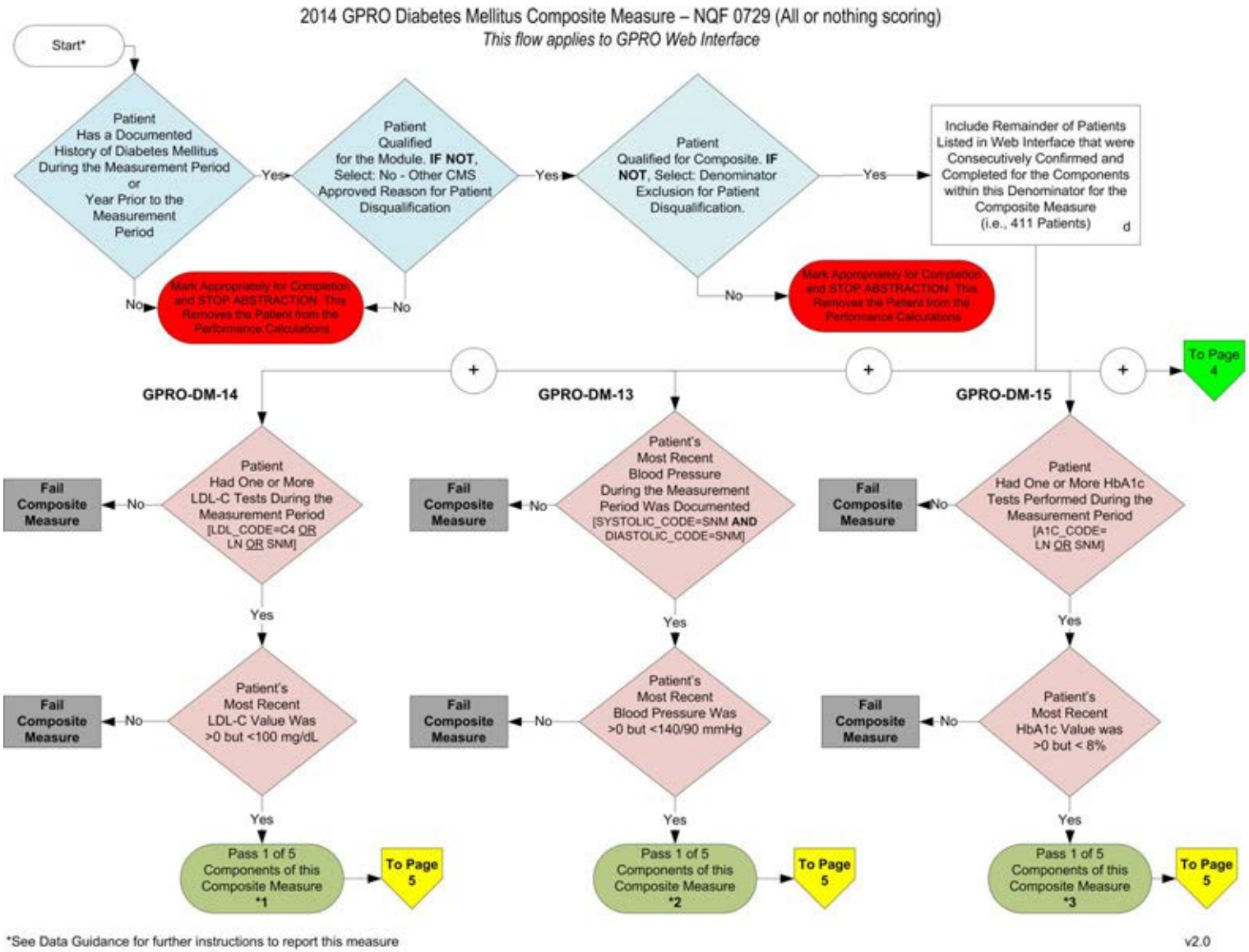
Performance Rate=

Performance Met ($a^1 + a^2$ =80 Patients) / Eligible Denominator (d=250 Patients) = 80 Patients / 250 Patients = 32.00%

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

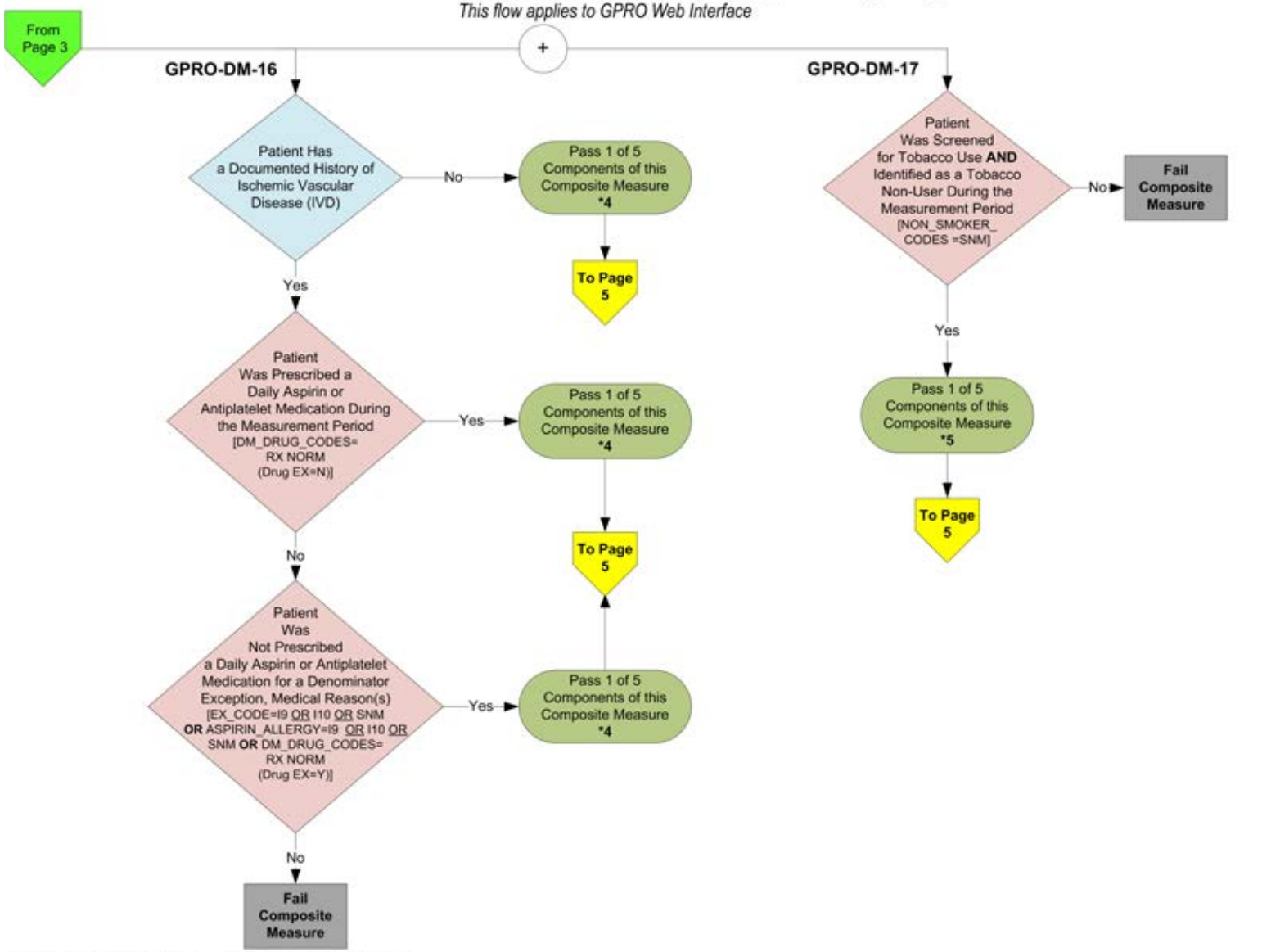
*See Data Guidance for further instructions to report this measure

v2.0


2014 GPRO Diabetes Mellitus Composite Measure – NQF 0729 (All or nothing scoring)
This flow applies to GPRO Web Interface
Start*
Patient Has a Documented History of Diabetes Mellitus During the Measurement Period or Year Prior to the Measurement Period
Yes
Patient Qualified for the Module. IF NOT, Select: No - Other CMS Approved Reason for Patient Disqualification
Yes
Patient Qualified for Composite. IF NOT, Select: Denominator Exclusion for Patient Disqualification.
Yes
Include Remainder of Patients Listed in Web Interface that were Consecutively Confirmed and Completed for the Components within this Denominator for the Composite Measure (i.e., 411 Patients) d
No
Mark Appropriately for Completion and STOP ABSTRACTION. This Removes the Patient from the Performance Calculations
No
No
Mark Appropriately for Completion and STOP ABSTRACTION. This Removes the Patient from the Performance Calculations
+
+
+
To Page 4
GPRO-DM-14
GPRO-DM-13
GPRO-DM-15
Patient Had One or More LDL-C Tests During the Measurement Period [LDL_CODE=C4 OR LN OR SNM]
Fail Composite Measure
No
Yes
Patient's Most Recent LDL-C Value Was >0 but <100 mg/dL
Fail Composite Measure
No
Yes
Pass 1 of 5 Components of this Composite Measure *1
To Page 5
Patient's Most Recent Blood Pressure During the Measurement Period Was Documented [SYSTOLIC_CODE=SNM AND DIASTOLIC_CODE=SNM]
Fail Composite Measure
No
Yes
Patient's Most Recent Blood Pressure Was >0 but <140/90 mmHg
Fail Composite Measure
No
Yes
Pass 1 of 5 Components of this Composite Measure *2
To Page 5
Patient Had One or More HbA1c Tests Performed During the Measurement Period [A1C_CODE= LN OR SNM]
Fail Composite Measure
No
Yes
Patient's Most Recent HbA1c Value was >0 but < 8%
Fail Composite Measure
No
Yes
Pass 1 of 5 Components of this Composite Measure *3
To Page 5
*See Data Guidance for further instructions to report this measure
v2.0

2014 GPRO Diabetes Mellitus Composite Measure – NQF 0729 (All or nothing scoring)

This flow applies to GPRO Web Interface



*See Data Guidance for further instructions to report this measure

v2.0

2014 GPRO Diabetes Mellitus Composite Measure – NQF 0729 (All or nothing scoring)
This flow applies to GPRO Web Interface

SAMPLE CALCULATION: (Overall Composite)

Performance Rates

Performance Met (a= 325 Patients) / Eligible Denominator (d= 411 Patients) = 325 Patients / 411Patients = 79.08%

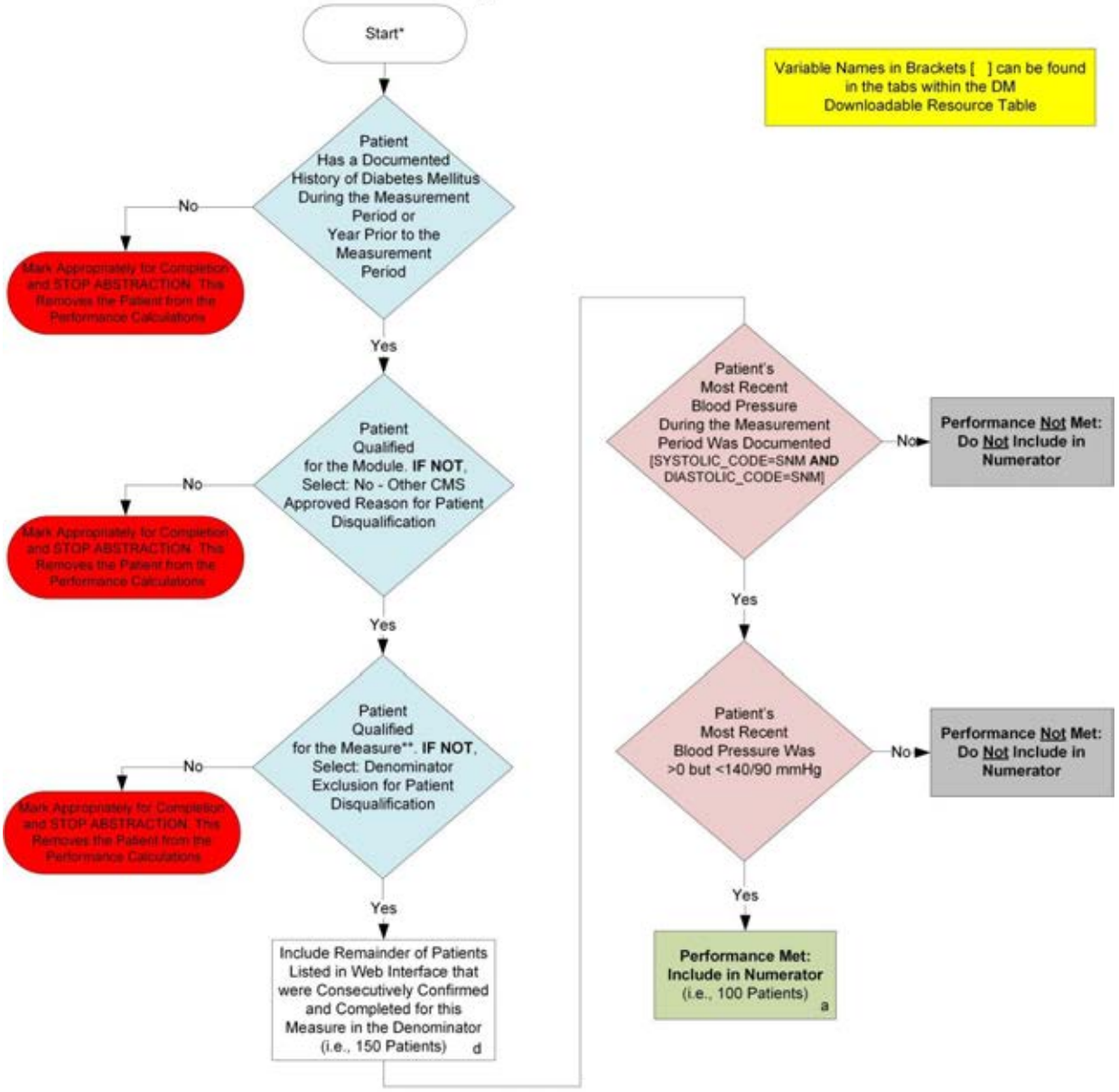
CALCULATION MAY CHANGE PENDING PERFORMANCES MET ABOVE

*See Data Guidance for further instructions to report this measure

v2.0

2014 GPRO-DM-13 (NQF 0729): Diabetes Mellitus: High Blood Pressure Control

This flow applies to GPRO Web Interface



SAMPLE CALCULATION:

Performance Rate=

Performance Met (a = 100 Patients) / Eligible Denominator (d = 150 Patients) = 100 Patients / 150 Patients = 66.67%

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

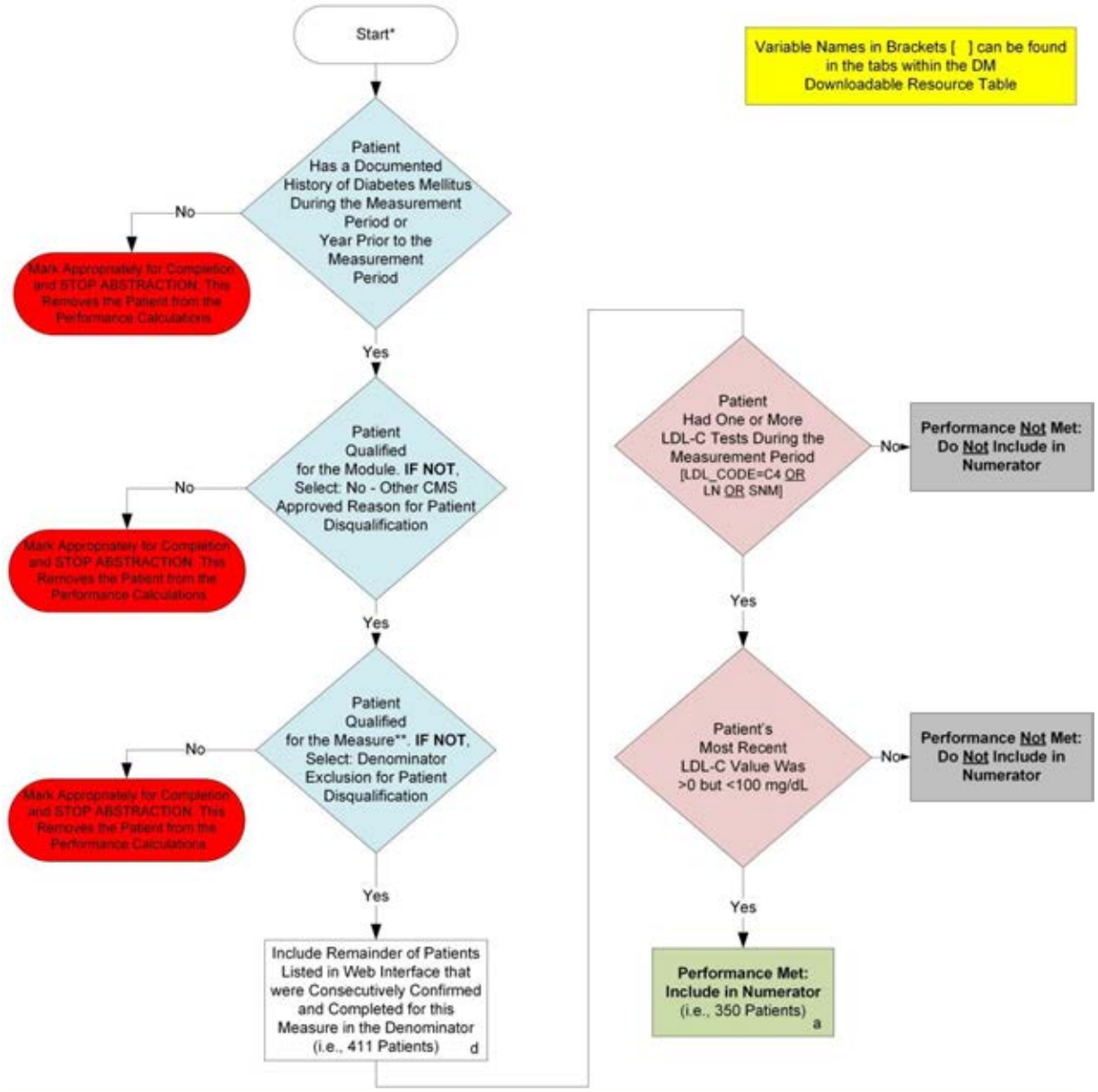
*See Data Guidance for further instructions to report this measure

**Removal from this measure is a patient disqualification from the entire composite

v2.0

2014 GPRO-DM-14 (NQF 0729): Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control

This flow applies to GPRO Web Interface



SAMPLE CALCULATION:

Performance Rate=

Performance Met (a = 350 Patients) / Eligible Denominator (d = 411 Patients) = 350 Patients / 411 Patients = 85.15%

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

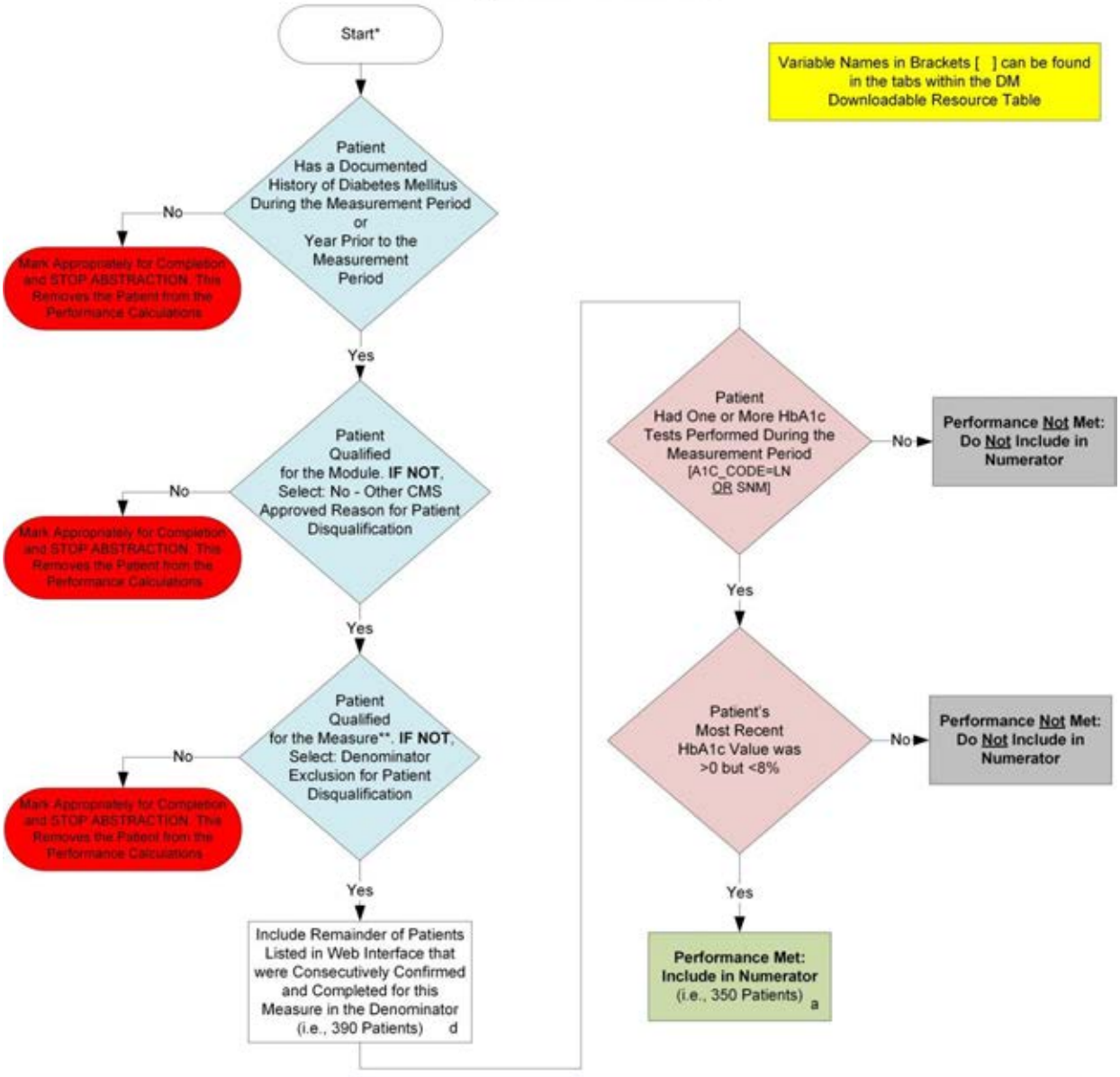
*See Data Guidance for further instructions to report this measure

**Removal from this measure is a patient disqualification from the entire composite

v2.0

2014 GPRO-DM-15 (NQF 0729): Diabetes Mellitus: Hemoglobin A1c Control (<8%)

This flow applies to GPRO Web Interface



SAMPLE CALCULATION:

Performance Rate=

Performance Met (a = 350 Patients) / Eligible Denominator (d = 390 Patients) = 350 Patients / 390 Patients = 89.74%

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

*See Data Guidance for further instructions to report this measure

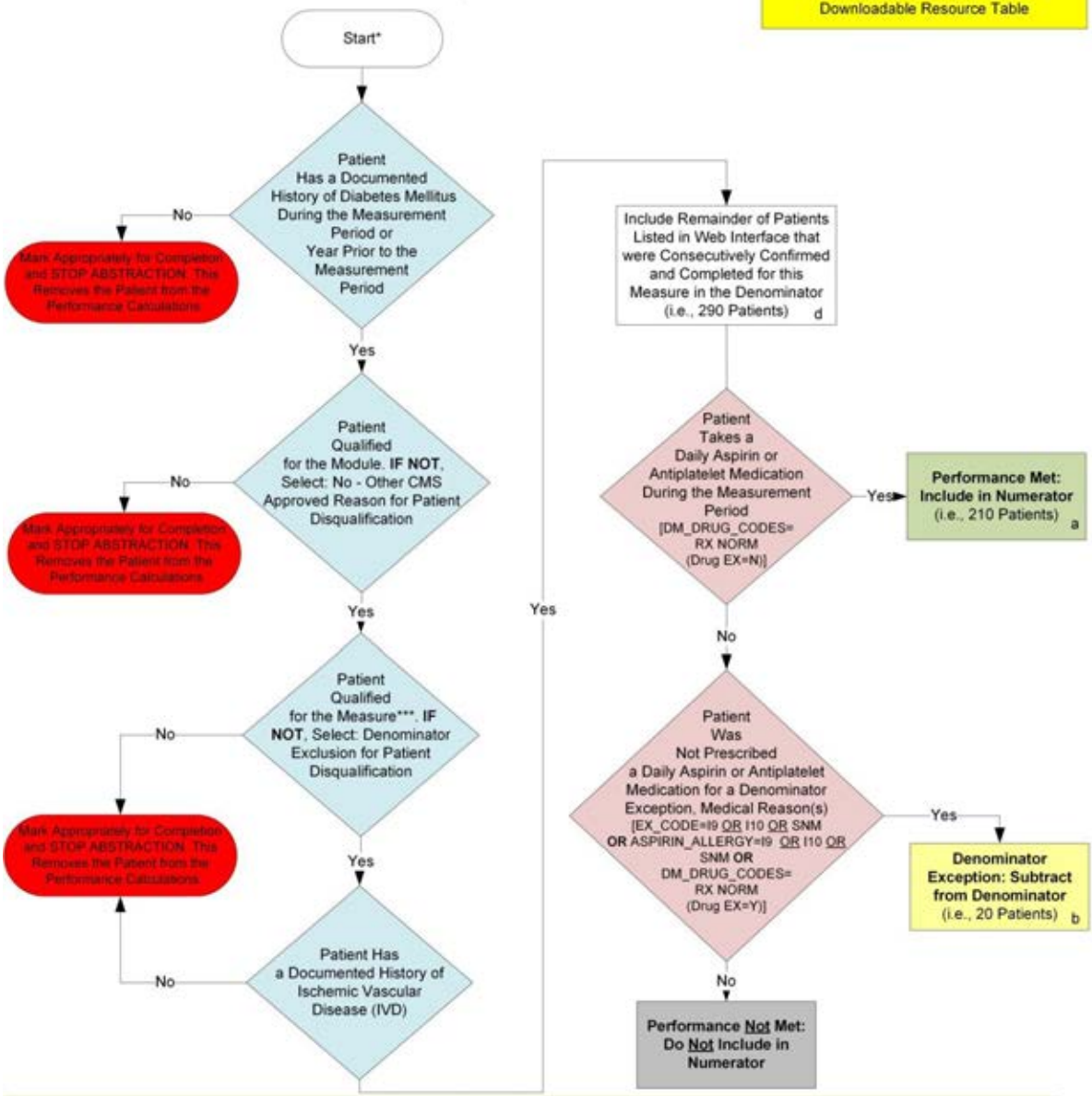
**Removal from this measure is a patient disqualification from the entire composite

v2.0

2014 GPRO-DM-16 (NQF 0729): Diabetes Mellitus: Daily Aspirin or Antiplatelet Medication Use for Patients with Diabetes and Ischemic Vascular Disease

This flow applies to GPRO Web Interface

Variable Names in Brackets [ ] can be found in the tabs within the DM Downloadable Resource Table



SAMPLE CALCULATION:

Performance Rate=

Performance Met (a = 210 Patients) / Eligible Denominator (d = 290 Patients) – Denominator Exception (b = 20 Patients) = 210 Patients / 270 Patients = 77.78%

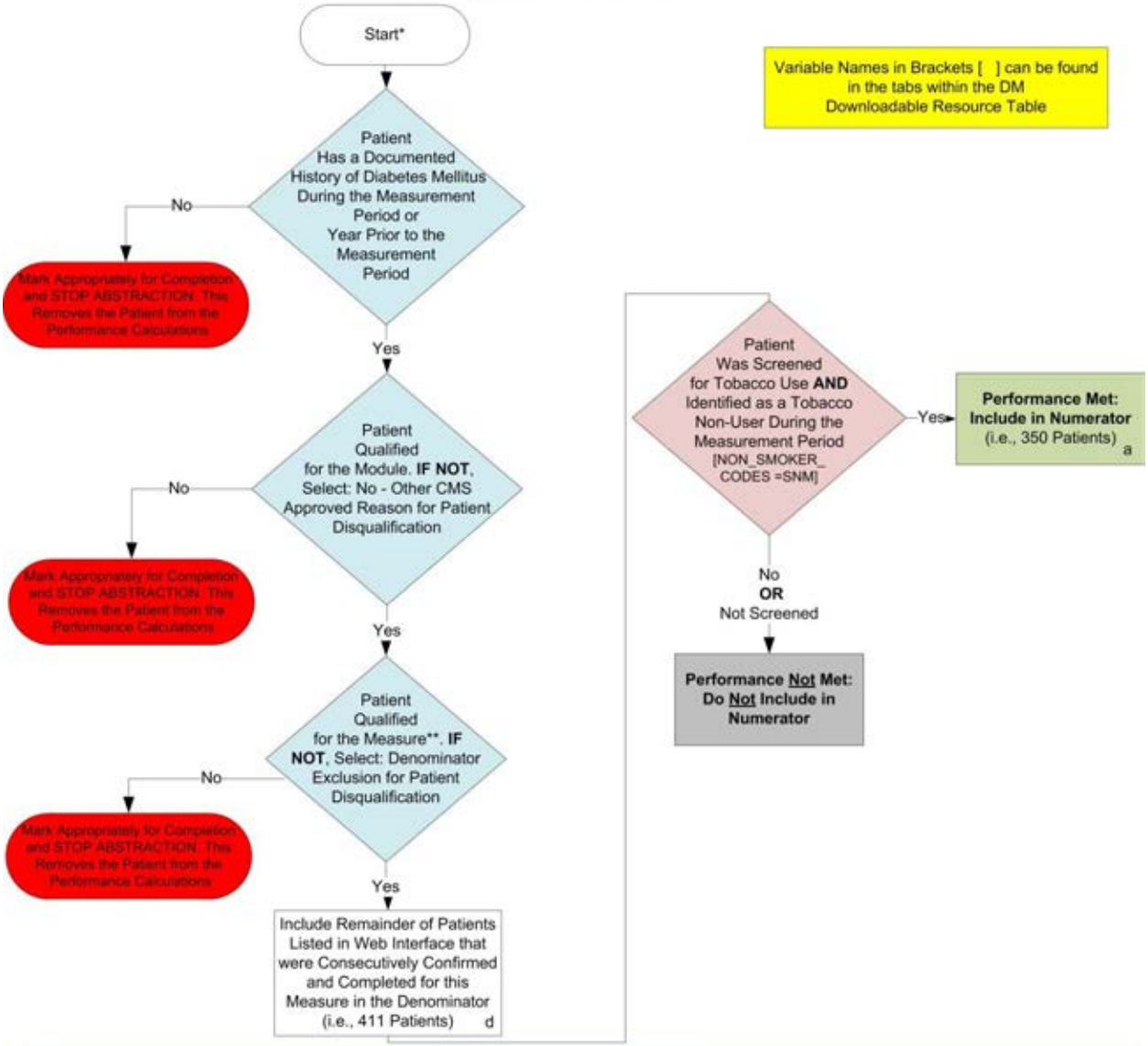
CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

*See Data Guidance for further instructions to report this measure
**EX represents Exclusions or Exceptions as applicable
***Removal from this measure is a patient disqualification from the entire composite

v.2.0

2014 GPRO-DM-17 (NQF 0729): Diabetes Mellitus: Tobacco Non-Use

This flow applies to GPRO Web Interface



SAMPLE CALCULATION:

Performance Rate=

Performance Met (a = 350 Patients) / Eligible Denominator (d = 411 Patients) = 350 Patients / 411 Patients = 85.16%

CALCULATION MAY CHANGE PENDING PERFORMANCE MET ABOVE

*See Data Guidance for further instructions to report this measure

**Removal from this measure is a patient disqualification from the entire composite

Patient Confirmation Flow for DM

For 2014, confirmation of the “Medical Record Found”, or indicating the patient is “Not Qualified for Sample” with a reason of “In Hospice”, “Moved out of Country”, “Deceased”, or “HMO Enrollment”, will only need to be done **once** per patient. For module or measure specific reasons a patient is “Not Confirmed” or excluded for “Denominator Exclusion” or “Other CMS Approved Reason”, please refer to the associated Data Guidance.

1. Start DM Patient Confirmation Flow. Assigned patients may be randomly sampled if aged 18 years through 75 years at the beginning of the measurement period.

2. Check to determine if Medical Record can be found
    a. If no, Medical Record not found, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, Medical Record found, continue processing.

3. Check to determine if Patient Qualified for the sample
    a. If no, the patient does not qualify for the sample, select the reason why and enter the date the patient became ineligible for sample. For example; In Hospice, Moved out of Country, Deceased, HMO Enrollment. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the sample; continue to the 2014 GPRO-DM measure flows.

2014 GPRO-DM-2 (NQF 0059): Diabetes: Hemoglobin A1c Poor Control

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the DM Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.

1. Start processing 2014 GPRO DM-2 (NQF 0059) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module.
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations.

4. Check to determine if the patient qualifies for the module.
    a. If no, the patient did not qualify for the module select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 250 patients). Continue processing.
5. Check to determine if the patient had one or more HbA1c tests performed during the measurement period. Variable Names: A1C_CODE=LN.
    a. If no, patient did not have one or more HbA1c tests performed during the measurement period, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the ‘a[1]’ category (numerator, i.e. 40 patients). Stop processing.
    b. If yes, the patient had one or more HbA1c tests performed during the measurement period, continue processing.

6. Check to determine if the patient’s most recent HbA1c value was greater than nine percent or equal to zero percent.

a. If no, patient's most recent HbA1c value was not greater than nine percent or equal to zero percent, performance is not met and the patient should not be included in the numerator. Stop processing.
b. If yes, patient's most recent HbA1c value was greater than nine percent or equal to zero percent, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a²' category (numerator, i.e. 40 patients). Stop processing.

Sample Calculation
Performance Rate Equals
Performance Met is category 'a¹ plus a²' in the measure flow (80 patients)
Eligible Denominator is category 'd' in measure flow (250 patients)
80 (Performance Met) divided by 250 (Eligible Denominator) equals a performance rate of 32.00 percent
Calculation May Change Pending Performance Met

2014 GPRO Diabetes Mellitus Composite Measure – NQF 0729 (All or nothing scoring)

This flow applies to GPRO Web Interface

See Data Guidance for further instructions to report this measure.
EX represents exclusion or exception as appropriate.

1. Start processing 2014 GPRO DM-Composite (NQF 0729) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module.
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations. Continue processing.

4. Check to determine if the patient qualifies for the module.
    a. If no, the patient did not qualify for the module select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for the components within the denominator for this composite measure. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 411 patients). Continue processing.
5. Check to determine if the patient had one or more LDL-C tests during the measurement period (GPRO-DM-14). Variable Names: LDL_CODE=C4 OR LN OR SNM.
    a. If no, the patient did not have one or more LDL-C tests during the measurement period, the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient did have one or more LDL-C tests during the measurement period, continue processing and proceed to step 6.

6. Check to determine if the patients most recent LDL-C value was greater than zero, but less than 100 mg/dL
    a. If no, the patient’s most recent LDL-C value was not greater than zero or less than 100 mg/dL, the patient fails the composite measure. Stop processing composite measure.

b. If yes, the patient's most recent LDL-C value was greater than zero, but less than 100 mg/dL, the patient passes 1 of 5 components of the DM composite measure. Proceed to step 15 for GPRO-DM-14. Continue processing for GPRO-DM-13, GPRO-DM-15, GPRO-DM-16, and GPRO-DM-17.

7. Check to determine if the patient's most recent blood pressure during the measurement period was documented (GPRO-DM-13). Variable Names: SYSTOLIC_CODE=SNM **AND** DIASTOLIC_CODE=SNM.
    a. If no, the patient's most recent blood pressure during the measurement period was not documented, the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient's most recent blood pressure during the measurement period was documented, continue processing and proceed to step 8.

8. Check to determine if the patient's most recent blood pressure was greater than zero, but less than 140 over 90 mmHg.
    a. If no, the patient's most recent blood pressure was not greater than zero or less than 140 over 90 mmHg, the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient's most recent blood pressure was greater than zero but less than 140 over 90 mmHg, the patient passes 1 of 5 components of the DM composite measure. Proceed to step 15 for GPRO-DM-13. Continue processing for GPRO-DM-15, GPRO-DM-16, and GPRO-DM-17.

9. Check to determine if the patient had one or more HbA1c tests during the measurement period (GPRO-DM-15). Variable Names: A1C_CODE=LN OR SNM.
    a. If no, the patient did not have one or more HbA1c tests during the measurement period, the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient did have one or more HbA1c tests during the measurement period, continue processing and proceed to step 10.

10. Check to determine if the patient's most recent HbA1c value was greater than zero, but less than eight percent.
    a. If no, the patient's most recent HbA1c value was not greater than zero or less than eight percent, the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient's most recent HbA1c value was greater than zero, but less than eight percent, the patient passes 1 of 5 components of the DM composite measure. Proceed to step 15 for GPRO-DM-15. Continue processing for GPRO-DM-16 and GPRO-DM-17.

11. Check to determine if the patient has a documented history of Ischemic Vascular Disease (IVD) (GPRO-DM-16).
    a. If no, the patient does not have a documented history of Ischemic Vascular Disease (IVD), the patient passes 1 of 5 components of the DM Composite Measure. Proceed to step 15.
    b. If yes, the patient has a documented history of Ischemic Vascular Disease (IVD), continue processing and proceed to step 12.

12. Check to determine if the patient was prescribed a daily aspirin or antiplatelet medication during the measurement period. Variable Names: DM_DRUG_CODES=RXNORM (Drug EX=N).

a. If no, the patient was not prescribed a daily aspirin or antiplatelet medication during the measurement period, continue processing and proceed to step 13.
b. If yes, the patient was prescribed a daily aspirin or antiplatelet medication during the measurement period, the patient passes 1 of 5 components of the DM composite measure, proceed to step 15 for GPRO-DM-16. Continue processing for GPRO-DM-17 and proceed to step 14.

13. Check to determine if the patient was Not prescribed a daily aspirin or antiplatelet medication for a denominator exception, medical reason(s). Variable Names: EX_CODE=I9 OR I10 OR SNM **OR** ASPIRIN_ALLERGY=I9 OR I10 OR SNM **OR** DM_DRUG_CODES=RXNORM (drug EX=Y).
    a. If no, the patient was Not prescribed a daily aspirin or antiplatelet medication for a denominator exception, medical reason(s), the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient was Not prescribed a daily aspirin or antiplatelet medication for a denominator exception, medical reason(s), the patient passes 1 of 5 components of the DM composite measure, proceed to step 15 for GPRO-DM-16. Continue processing for GPRO-DM-17 and proceed to step 14.

14. Check to determine if the patient was screened for tobacco use **AND** identified as a tobacco non-user during the measurement period (GPRO-DM-17). Variable Name: NON_SMOKER_CODES=SNM.
    a. If no, the patient was not screened for tobacco use **AND** not identified as a tobacco non-user during the measurement period, the patient fails the composite measure. Stop processing composite measure.
    b. If yes, the patient was screened for tobacco use **AND** identified as a tobacco non-user during the measurement period, the patient passes 1 of 5 components of the DM composite measure, continue processing and proceed to step 15.

15. Determine if the patient passed GPRO-DM-14, GPRO-DM-13, GPRO-DM-15, GPRO-DM-16, and GPRO-DM-17 components of the composite measure. If the patient passed all five components, the patient meets the composite measure. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 325 patients).

Sample Calculation
Performance Rate Equals
Performance Met is category 'a' in the measure flow (325 patients)
Eligible Denominator is category 'd' in measure flow (411 patients)
325 (Performance Met) divided by 386 (Eligible Denominator) equals a performance rate of 79.08 percent
Calculation May Change Pending Performance Met

2014 GPRO-DM-13 (NQF 0729): Diabetes Mellitus: High Blood Pressure Control

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the DM Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.
Removal from this measure is a patient disqualification from the entire composite.

1. Start processing 2014 GPRO DM-13 (NQF 0729) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient had a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module.
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations.

4. Check to determine if the patient qualifies for the measure.
    a. If no, the patient did not qualify for the measure select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 150 patients). Continue processing.
5. Check to determine if the patient’s most recent blood pressure during the measurement period was documented. Variable Names: SYSTOLIC_CODE=SNM **AND** DIASTOLIC_CODE=SNM.
    a. If no, the patient’s most recent blood pressure during the measurement period was not documented, performance is not met and the patient should not be included in the numerator. Stop processing.
    b. If yes, the patient’s most recent blood pressure during the measurement period was documented, continue processing.

6. Check to determine if the patient’s most recent blood pressure was greater than zero, but less than 140 over 90 mmHg.

a. If no, the patient's most recent blood pressure was not greater than zero or less than 140 over 90 mmHg, performance is not met and the patient should not be included in the numerator. Stop processing.
b. If yes, the patient's most recent blood pressure was greater than zero, but less than 140 over 90 mmHg, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 100 patients). Stop processing.

Sample Calculation
Performance Rate Equals
Performance Met is category 'a' in the measure flow (100 patients)
Eligible Denominator is category 'd' in measure flow (150 patients)
100 (Performance Met) divided by 145 (Eligible Denominator) equals a performance rate of 66.67 percent
Calculation May Change Pending Performance Met

2014 GPRO-DM-14 (NQF 0729): Diabetes Mellitus: Low Density Lipoprotein (LDL-C) Control

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the DM Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.
Removal from this measure is a patient disqualification from the entire composite.

1. Start processing 2014 GPRO DM-14 (NQF 0729) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient had a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations.

4. Check to determine if the patient qualifies for the measure
    a. If no, the patient did not qualify for the measure select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 411 patients). Continue processing.

5. Check to determine if the patient had one or more LDL-C tests during the measurement period.
   Variable Names: LDL_CODE=C4 OR LN OR SNM.
    a. If no, the patient did not have one or more LDL-C tests during the measurement period, performance is not met and the patient should not be included in the numerator. Stop processing.
    b. If yes, the patient did have one or more LDL-C tests during the measurement period, continue processing.

6. Check to determine if the patient’s most recent LDL-C value was greater than zero but less than 100 mg/dL.

a. If no, the patient's most recent LDL-C value was not greater than zero or less than 100 mg/dL, performance is not met and the patient should not be included in the numerator. Stop processing.
b. If yes, the patient's most recent LDL-C value was greater than zero but less than 100 mg/dL, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 350 patients). Stop processing.

Sample Calculation
Performance Rate Equals
Performance Met is category 'a' in the measure flow (350 patients)
Eligible Denominator is category 'd' in measure flow (411 patients)

350 (Performance Met) divided by 406 (Eligible Denominator) equals a performance rate of 85.15 percent
Calculation May Change Pending Performance Met

2014 GPRO-DM-15 (NQF 0729): Diabetes Mellitus: Hemoglobin A1c Control (<8%)

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the DM Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.
Removal from this measure is a patient disqualification from the entire composite.

1. Start processing 2014 GPRO DM-15 (NQF 0729) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient had a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations.

4. Check to determine if the patient qualifies for the measure
    a. If no, the patient did not qualify for the module select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 390 patients). Continue processing.

5. Check to determine if the patient had one or more HbA1c tests during the measurement period. Variable Names: A1C_CODE=LN OR SNM.
    a. If no, the patient did not have one or more HbA1c tests during the measurement period, performance is not met and the patient should not be included in the numerator. Stop processing.
    b. If yes, the patient did have one or more HbA1c tests during the measurement period, continue processing.

6. Check to determine if the patient’s most recent HbA1c value was greater than zero but less than eight percent.

a. If no, the patient's most recent HbA1c value was not greater than zero or less than eight percent, performance is not met and the patient should not be included in the numerator.
b. If yes, the patient's most recent HbA1c value was greater than zero, but less than eight percent, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 350 patients). Stop processing.

Sample Calculation
Performance Rate Equals
Performance Met is category 'a' in the measure flow (350 patients)
Eligible Denominator is category 'd' in measure flow (390 patients)
350 (Performance Met) divided by 390 (Eligible Denominator) equals a performance rate of 89.74 percent
Calculation May Change Pending Performance Met

2014 GPRO-DM-16 (NQF 0729): Diabetes Mellitus: Daily Aspirin or Antiplatelet Medication Use for Patients with Diabetes and Ischemic Vascular Disease

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the DM Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.
EX represents exclusion or exception as appropriate.
Removal from this measure is a patient disqualification from the entire composite.

1. Start processing 2014 GPRO DM-16 (NQF 0729) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient had a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, continue processing
4. Check to determine if the patient qualifies for the measure
    a. If no, the patient did not qualify for the module select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the measure, continue processing.

5. Check to determine if the patient has a documented history of Ischemic Vascular Disease (IVD).
    a. If no, the patient does not have a documented history of Ischemic Vascular Disease (IVD), mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient has a documented history of Ischemic Vascular Disease (IVD), the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 290 patients). Continue processing.

6. Check to determine if the patient takes a daily aspirin or antiplatelet medication during the measurement period. Variable Names: DM_DRUG_CODES=RXNORM (Drug EX=N).
    a. If no, the patient does not take a daily aspirin or antiplatelet medication during the measurement period, continue processing.

b. If yes, the patient does take a daily aspirin or antiplatelet medication during the measurement period, performance is met and the patient will be included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the 'a' category (numerator, i.e. 210 patients). Stop processing.

7. Check to determine if the patient was Not prescribed a daily aspirin or antiplatelet medication for a denominator exception, medical reason(s). Variable Names: EX_CODE=I9 OR I10 OR SNM **OR** ASPIRIN_ALLERGY=I9 OR I10 OR SNM **OR** DM_DRUG_CODES=RXNORM (Drug EX=Y).
    a. If no, the patient was Not prescribed a daily aspirin or antiplatelet medication for a denominator exception, medical reason(s), performance is not met and the patient should not be included in the numerator. Stop processing.
    b. If yes, the patient was Not prescribed a daily aspirin or antiplatelet medication for a denominator exception, medical reason(s), this is a denominator exception and the case should be subtracted from the eligible denominator. For the sample performance rate calculation in the flow these patients would fall into the 'b' category (denominator exception, i.e. 20 patients). Stop processing.

Sample Calculation
Performance Calculation Equals
Performance Met is category 'a' in the measure flow (210 patients)
Eligible Denominator is category 'd' in measure flow (270 patients)
Denominator Exception is category 'b' in the measures flow (20 patients)
210 (Performance Met) divided by 265 (Eligible Denominator minus Denominator Exception) equals a performance rate of 77.78 percent
Calculation May Change Pending Performance Met

2014 GPRO-DM-17 (NQF 0729): Diabetes Mellitus: Tobacco Non-Use

This flow applies to GPRO Web Interface

Variable names can be found in the tabs within the DM Downloadable Resource Table.
See Data Guidance for further instructions to report this measure.
Removal from this measure is a patient disqualification from the entire composite.

1. Start processing 2014 GPRO DM-17 (NQF 0729) Flow for the patients that qualified for sample in the DM Patient Confirmation Flow.

2. Check to determine if the patient has a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period.
    a. If no, the patient does not have a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient had a documented history of Diabetes Mellitus during the measurement period or year prior to the measurement period, continue processing.

3. Check to determine if the patient qualifies for the module
    a. If no, the patient did not qualify for the module select: No – Other CMS Approved Reason for patient disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the module, the patient will be included in the eligible denominator for performance rate calculations.

4. Check to determine if the patient qualifies for the measure
    a. If no, the patient did not qualify for the module select: Denominator Exclusion for Patient Disqualification. Mark appropriately for completion and stop abstraction. This removes the patient from the performance calculations. Stop processing.
    b. If yes, the patient does qualify for the measure, the patient will be included in the eligible denominator for performance rate calculations. Note: Include remainder of patients listed in the Web Interface that were consecutively confirmed and completed for this measure in the denominator. For the sample performance rate calculation in the flow these patients would fall into the ‘d’ category (eligible denominator, i.e. 411 patients). Continue processing.

5. Check to determine if the patient was screened for tobacco use **AND** identified as a tobacco non-user during the measurement period. Variable Names: NON_SMOKER_CODES=SNM.
    a. If no, or the patient was not screened for tobacco use **AND** not identified as a tobacco non-user during the measurement period, performance is not met and the patient should not be included in the numerator.
    b. If yes, the patient was screened for tobacco use **AND** identified as a tobacco non-user during the measurement period, performance is met and the patient is included in the numerator. For the sample performance rate calculation in the flow these patients would fall into the ‘a’ category (numerator, i.e. 350 patients). Stop processing.

Sample Calculation
Performance Rate Equals
Performance Met is category ‘a’ in the measure flow (350 patients)
Eligible Denominator is category ‘d’ in measure flow (411 patients)
350 (Performance Met) divided by 406 (Eligible Denominator) equals a performance rate of 85.16 percent
Calculation May Change Pending Performance Met