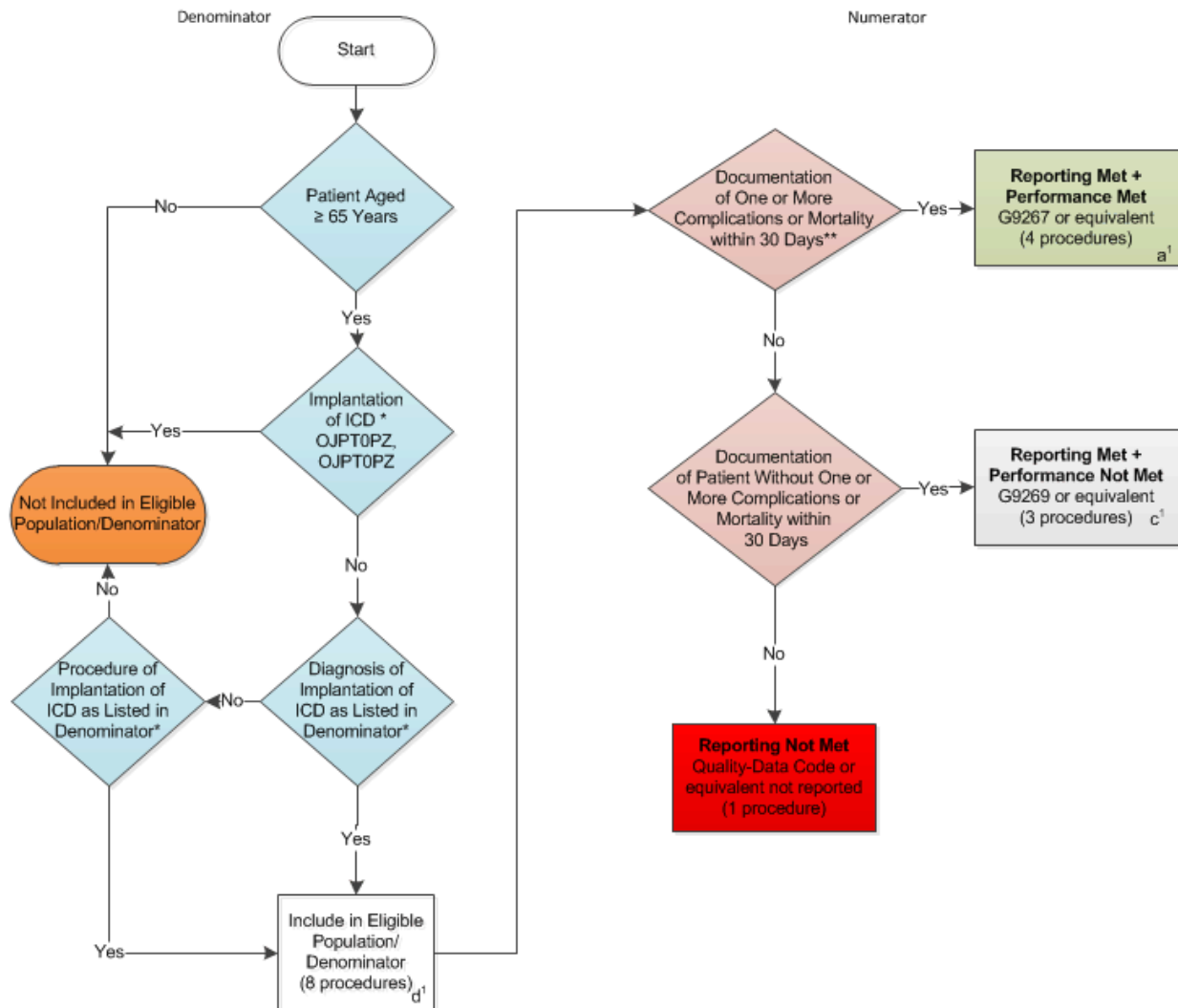


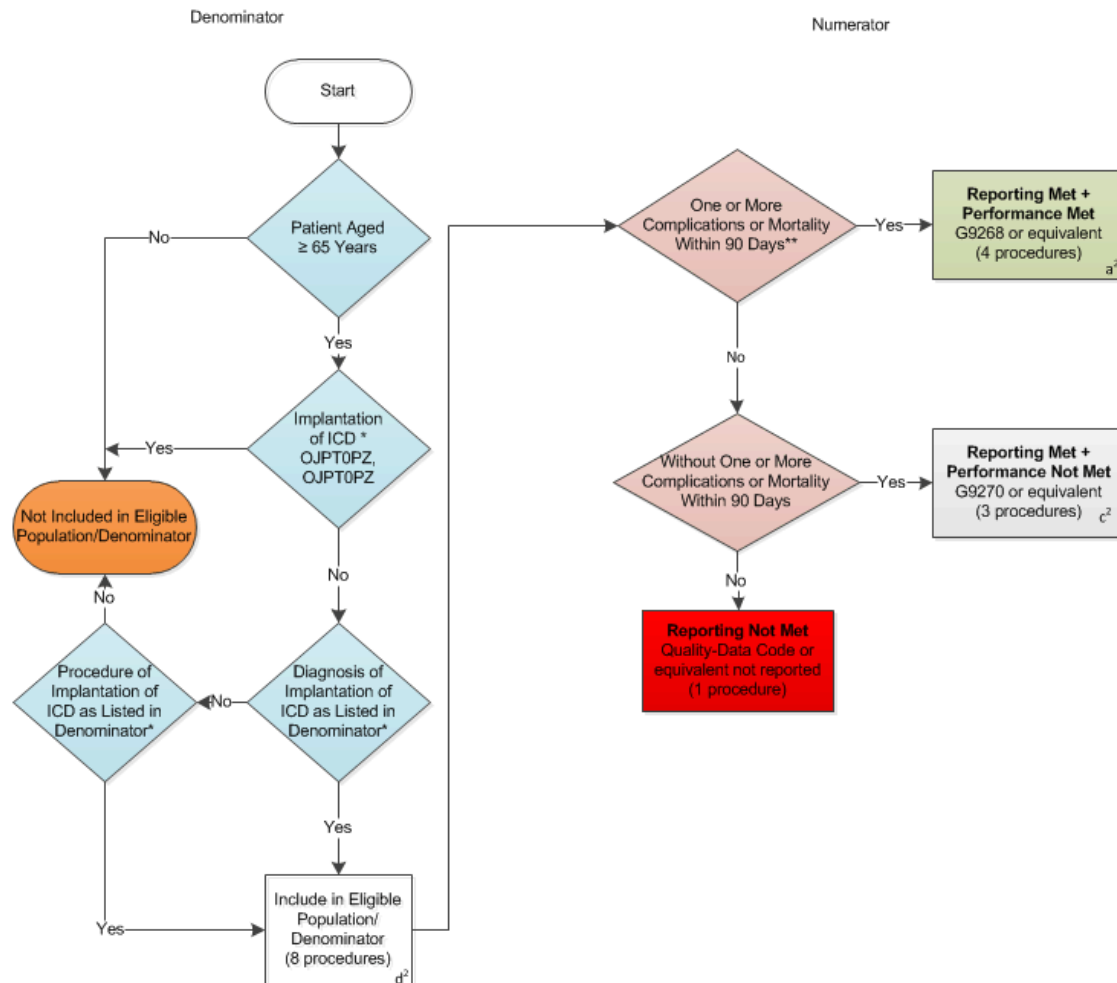
**2015 Registry Individual Measure Flow**  
**PQRS #348 HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications Rate**  
**Reporting Option One**



\*See the posted Measure Specification for specific coding and instructions to report this measure.  
 A lower calculated performance rate for this measure indicates better clinical care or control.  
 NOTE: Reporting Frequency – Procedure

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**2015 Registry Individual Measure Flow**  
**PQRS #348 HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications Rate**  
**Reporting Option Two**



\*See the posted Measure Specification for specific coding and instructions to report this measure.  
 A lower calculated performance rate for this measure indicates better clinical care or control.  
 NOTE: Reporting Frequency – Procedure

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**2015 Registry Individual Measure Flow**  
**PQRS #348 HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications Rate**

**SAMPLE CALCULATIONS:**

**Reporting Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=8 procedures) + Performance Not Met (c}^1\text{+c}^2\text{=6 procedures)}}{\text{Eligible Population / Denominator (d}^1\text{+d}^2\text{=16 procedures)}} = \frac{14 \text{ procedures}}{16 \text{ procedures}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=8 procedures)}}{\text{Reporting Numerator (14 procedures)}} = \frac{8 \text{ procedures}}{14 \text{ procedures}} = 57.14\%$$

\*See the posted Measure Specification for specific coding and instructions to report this measure.

A lower calculated performance rate for this measure indicates better clinical care or control.

This measure contains 2 Reporting Criteria, although as the Sample Calculation indicates, there is **ONLY** one reporting rate and one performance rate for this measure.

NOTE: Reporting Frequency – Procedure

**2015 Registry Individual Measure Flow**  
**PQRS #348: HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications**  
**Rate**

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure. NOTE: A lower calculated performance rate for this measure indicates better clinical care or control.

**Reporting Option One:**

1. Start with Denominator
2. Check Patient Age:
  - a. If Patient Age is greater than or equal to 65 Years of age at Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
  - b. If Patient Age is greater than or equal to 65 Years of age at Date of Service and equals Yes during the measurement period, proceed to check Implantation of ICD.
3. Check Implantation of ICD:
  - a. If Implantation of ICD as Listed in Denominator equals No, do not include in Eligible Population or Denominator. Stop Processing.
  - b. If Implantation of ICD as Listed in Denominator equals Yes, proceed to check Diagnosis of Implantation of ICD.
4. Check Diagnosis of Implantation of ICD:
  - a. If Implantation of ICD as Listed in Denominator equals No, proceed to check Procedure of Implantation of ICD as Listed in the Denominator.
  - b. If Implantation of ICD as Listed in Denominator equals Yes, include in the Eligible population or Denominator.
5. Check Procedure of Implantation of ICD as Listed in the Denominator:
  - a. If Procedure of Implantation of ICD as Listed in the Denominator equals No, do not include in Eligible Population or Denominator. Stop Processing.
  - b. If Procedure of Implantation of ICD as Listed in the Denominator equals Yes, include in the Eligible population or Denominator.
6. Denominator Population:
  - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d<sup>1</sup> equals 8 procedures in the sample calculation.
7. Start Numerator
8. Check Documentation of One or More Complications or Mortality within 30 Days:
  - a. If Documentation of One or More Complications or Mortality within 30 Days equals Yes, include in Reporting Met and Performance Met.
  - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a<sup>1</sup> equals 4 procedures in Sample Calculation.

- c. If Documentation of One or More Complications or Mortality within 30 Days equals No, proceed to check Documentation of Patient Without One or More Complications or Mortality within 30 Days.
- 9. Check Documentation of Patient Without One or More Complications or Mortality within 30 Days:
  - a. If Documentation of Patient Without One or More Complications or Mortality within 30 Days equals Yes, include in Reporting Met and Performance Not Met.
  - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c<sup>1</sup> equals 3 procedures in the Sample Calculation.
  - c. If Documentation of Patient Without One or More Complications or Mortality within 30 Days equals No, proceed to check Reporting Not Met.
- 10. Check Reporting Not Met
  - a. If Reporting Not Met, the Quality Data Code or equivalent was not reported. 1 procedure has been subtracted from the reporting numerator in sample calculation.

**2015 Registry Individual Measure Flow**  
**PQRS #348: HRS-3: Implantable Cardioverter-Defibrillator (ICD) Complications**  
**Rate**

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure. NOTE: A lower calculated performance rate for this measure indicates better clinical care or control.

**Reporting Option Two:**

1. Start with Denominator
2. Check Patient Age:
  - a. If Patient Age is greater than or equal to 65 Years of age at Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
  - b. If Patient Age is greater than or equal to 65 Years of age at Date of Service and equals Yes during the measurement period, proceed to check Implantation of ICD.
3. Check Implantation of ICD:
  - a. If Implantation of ICD as Listed in Denominator equals No, do not include in Eligible Population or Denominator. Stop Processing.
  - b. If Implantation of ICD as Listed in Denominator equals Yes, proceed to check Diagnosis of Implantation of ICD.
4. Check Diagnosis of Implantation of ICD:
  - a. If Implantation of ICD as Listed in Denominator equals No, proceed to check Procedure of Implantation of ICD as Listed in the Denominator.
  - b. If Implantation of ICD as Listed in Denominator equals Yes, include in the Eligible population or Denominator.
5. Check Procedure of Implantation of ICD as Listed in the Denominator:
  - a. If Procedure of Implantation of ICD as Listed in the Denominator equals No, do not include in Eligible Population or Denominator. Stop Processing.
  - b. If Procedure of Implantation of ICD as Listed in the Denominator equals Yes, include in the Eligible population or Denominator.
6. Denominator Population:
  - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d<sup>2</sup> equals 8 procedures in the sample calculation.
7. Start Numerator
8. Check Documentation of One or More Complications or Mortality within 90 Days:
  - a. If Documentation of One or More Complications or Mortality within 90 Days equals Yes, include in Reporting Met and Performance Met.
  - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a<sup>2</sup> equals 4 procedures in Sample Calculation.

- c. If Documentation of One or More Complications or Mortality within 90 Days equals No, proceed to check Documentation of Patient Without One or More Complications or Mortality within 90 Days.
9. Check Documentation of Patient Without One or More Complications or Mortality within 90 Days:
  - a. If Documentation of Patient Without One or More Complications or Mortality within 90 Days equals Yes, include in Reporting Met and Performance Not Met.
  - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate in the Sample Calculation listed at the end of this document. Letter c<sup>2</sup> equals 3 procedures in the Sample Calculation.
  - c. If Documentation of Patient Without One or More Complications or Mortality within 90 Days equals No, proceed to check Reporting Not Met.
10. Check Reporting Not Met
  - a. If Reporting Not Met, the Quality Data Code or equivalent was not reported. 1 procedure has been subtracted from the reporting numerator in sample calculation.

**SAMPLE CALCULATIONS:**

**Reporting Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=8 procedures) + Performance Not Met (c}^1\text{+c}^2\text{=6 procedures)}}{\text{Eligible Population / Denominator (d}^1\text{+d}^2\text{=16 procedures)}} = \frac{14 \text{ procedures}}{16 \text{ procedures}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a}^1\text{+a}^2\text{=8 procedures)}}{\text{Reporting Numerator (14 procedures)}} = \frac{8 \text{ procedures}}{14 \text{ procedures}} = 57.14\%$$