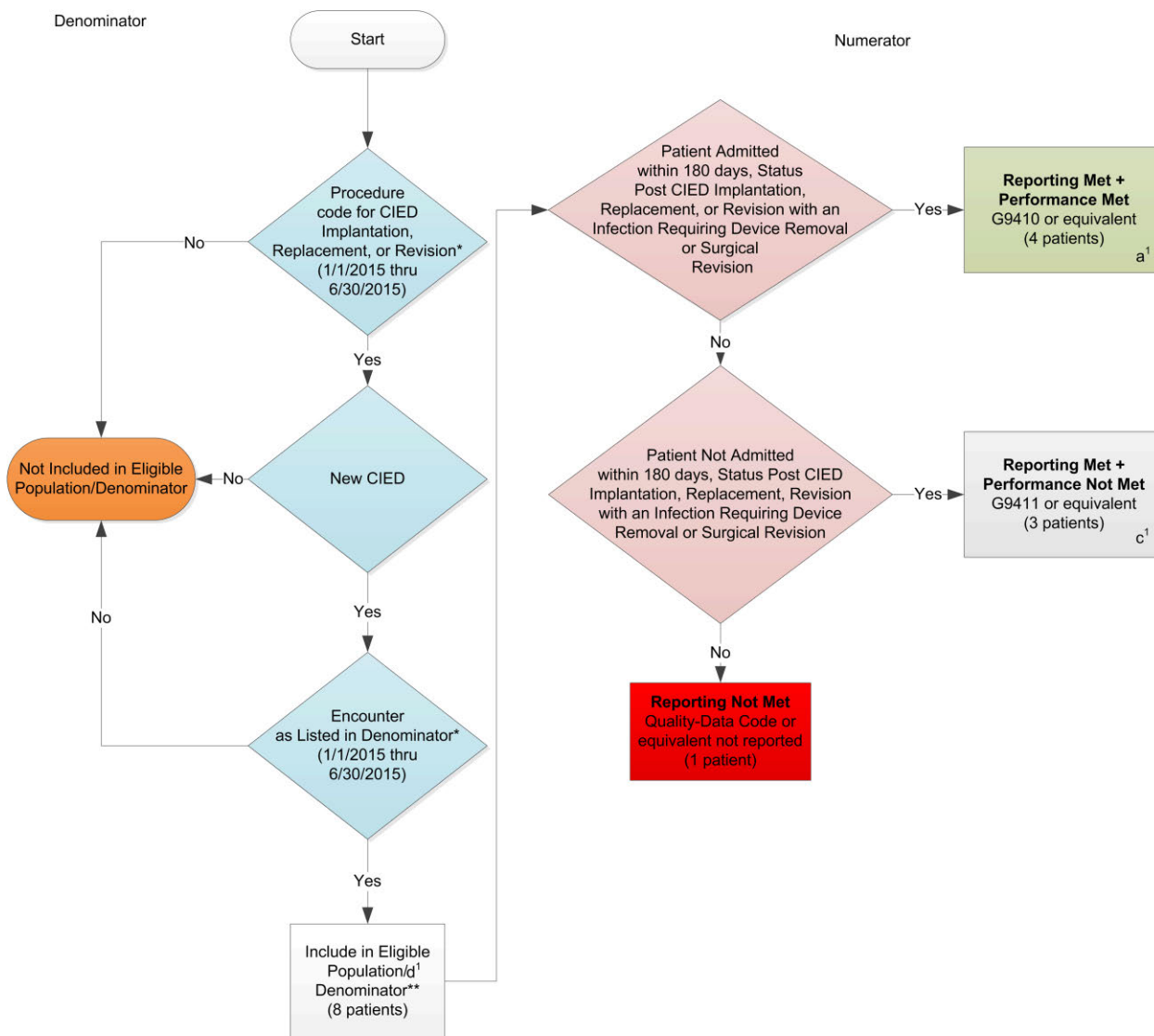


2015 Registry Individual Measure Flow
PQRS #393: HRS-9: Infection Within 180 Days of Cardiac Implantable Electronic Device (CIED)
Implantation, Replacement, or Revision
Reporting Rate One



This measure is to be reported a minimum of **once per reporting period** for patients with a CIED device implantation, replacement, or revision performed from January 1, 2015 through June 30, 2015 of the reporting period.

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.

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

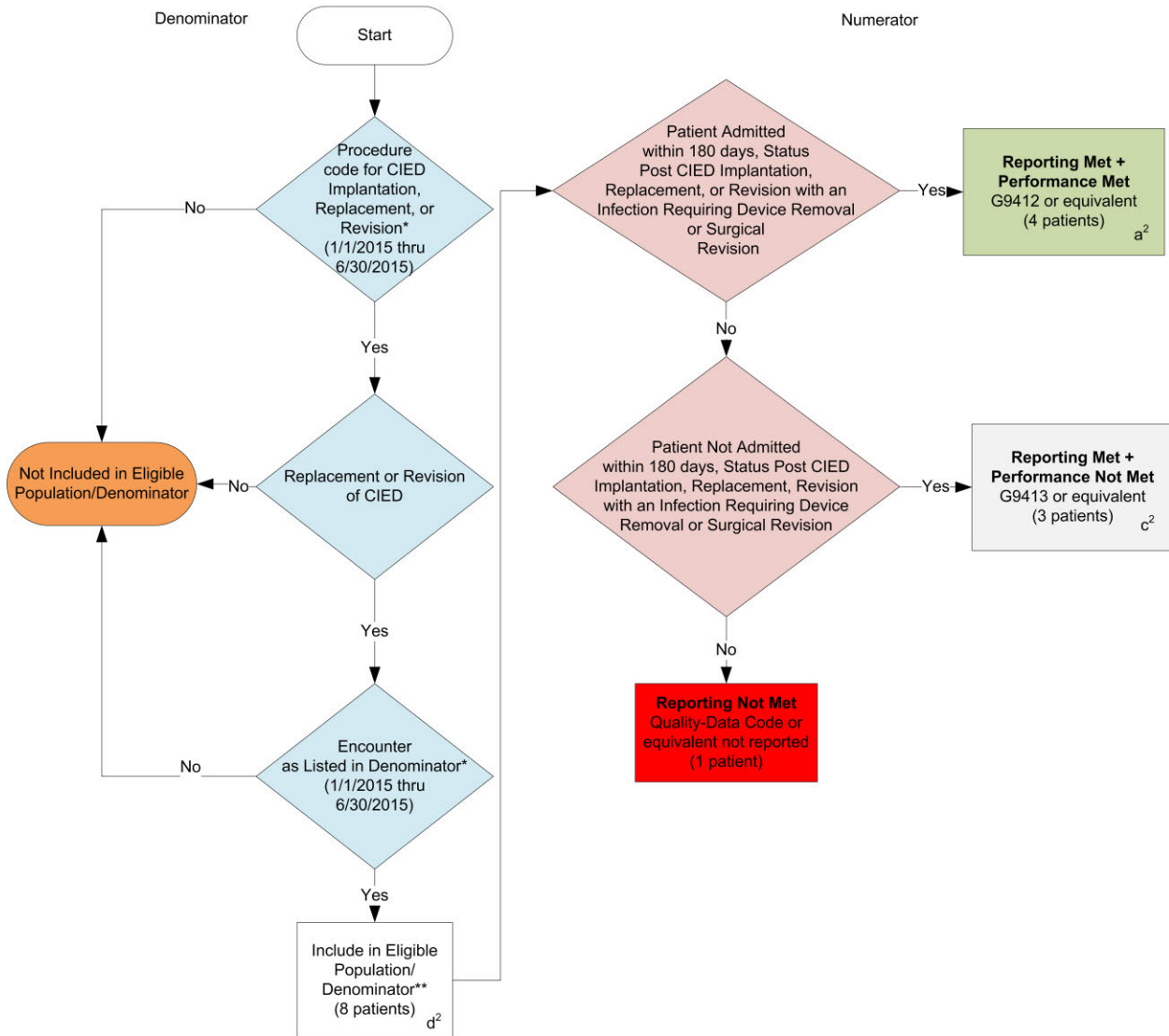
A lower calculated performance rate indicates better clinical care and control

NOTE: Reporting Frequency – Patient-process

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v1

2015 Registry Individual Measure Flow
PQRS #393: HRS-9: Infection Within 180 Days of Cardiac Implantable Electronic Device (CIED)
Implantation, Replacement, or Revision
Reporting Rate Two



This measure is to be reported a minimum of **once per reporting period** for patients with a CIED device implantation, replacement, or revision performed from January 1, 2015 through June 30, 2015 of the reporting period.

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.

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

A lower calculated performance rate indicates better clinical care and control

NOTE: Reporting Frequency – Patient-process

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2015 Registry Individual Measure Flow
PQRS #393: HRS-9: Infection Within 180 Days of Cardiac Implantable Electronic Device (CIED)
Implantation, Replacement, or Revision

SAMPLE CALCULATIONS:

Reporting Rate=

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

Performance Rate=

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

This measure is to be reported a minimum of **once per reporting period** for patients with a CIED device implantation, replacement, or revision performed from January 1, 2015 through June 30, 2015 of the reporting period.

****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.**

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

A lower calculated performance rate indicates better clinical care and control

NOTE: Reporting Frequency – Patient-process

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2015 Registry Individual Measure Flow
PQRS #393: HRS-9: Infection Within 180 Days of Cardiac Implantable Electronic Device (CIED) Implantation, Replacement, or Revision

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.

This measure includes 2 rates for reporting.

Reporting Rate 1:

1. Start with Denominator
2. Check Patient Procedure Code:
 - a. If CIED Implantation Procedure Code as Listed in Denominator equals No, do not include in Eligible population. Stop Processing
 - b. CIED Implantation Procedure Code as Listed in Denominator equals Yes, proceed to check New CIED.
3. Check New CIED:
 - a. If New CIED as equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If New equals Yes, include in the Eligible population proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter Performed as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter Performed as Listed in the Denominator equals Yes, include in the Eligible population.
5. 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 d¹ equals 8 patients in the sample calculation.
6. Start Numerator
7. Check Patient Admitted within 180 days, Status Post CIED Implantation, Replacement, or Revision with an Infection Requiring Device Removal or Surgical Revision:
 - a. If Patient Admitted within 180 days, Status Post CIED Implantation, Replacement, or Revision with an Infection Requiring Device Removal or Surgical Revision 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 a¹ equals 4 patients in Sample Calculation.
 - c. If Patient Admitted within 180 days, Status Post CIED Implantation, Replacement, or Revision with an Infection Requiring Device Removal or Surgical Revision equals No, proceed to check Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision.

8. Check Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision:
 - a. If Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision 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 c¹ equals 3 patients in the Sample Calculation.
 - c. If Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision equals No, proceed to Reporting Not Met.
9. Check Reporting Not Met:
 - a. If Reporting Not Met equals No, Quality Data Code or equivalent was not reported. This is represented by 1 patient in the Sample Calculation.

SAMPLE CALCULATIONS:

Reporting Rate=

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

Performance Rate=

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

2015 Registry Individual Measure Flow
PQRS #393: HRS-9: Infection Within 180 Days of Cardiac Implantable Electronic Device (CIED) Implantation, Replacement, or Revision

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.

This measure includes 2 rates for reporting.

Reporting Rate 2:

1. Start with Denominator
2. Check Patient Procedure Code:
 - a. If CIED Implantation Procedure Code as Listed in Denominator equals No, do not include in Eligible population. Stop Processing
 - b. CIED Implantation Procedure Code as Listed in Denominator equals Yes, proceed to check New CIED.
3. Check New CIED:
 - a. If Replacement or Revision of CIED equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Replacement or Revision of CIED equals Yes, include in the Eligible population proceed to check Encounter Performed.
4. Check Encounter Performed:
 - a. If Encounter Performed as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter Performed as Listed in the Denominator equals Yes, include in the Eligible population.
5. 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 d² equals 8 patients in the sample calculation.
6. Start Numerator
7. Check Patient Admitted within 180 days, Status Post CIED Implantation, Replacement, or Revision with an Infection Requiring Device Removal or Surgical Revision:
 - a. If Patient Admitted within 180 days, Status Post CIED Implantation, Replacement, or Revision with an Infection Requiring Device Removal or Surgical Revision 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 a² equals 4 patients in Sample Calculation.
 - c. If Patient Admitted within 180 days, Status Post CIED Implantation, Replacement, or Revision with an Infection Requiring Device Removal or Surgical Revision equals No, proceed to check Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision.

8. Check Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision:
 - a. If Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision 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 c² equals 3 patients in the Sample Calculation.
 - c. If Patient NOT Admitted within 180 days, Status Post CIED Implantation, Replacement, Revision with an Infection Requiring Device Removal or Surgical Revision equals No, proceed to Reporting Not Met.
9. Check Reporting Not Met:
 - a. If Reporting Not Met equals No, Quality Data Code or equivalent was not reported. This is represented by 1 patient in the Sample Calculation.

SAMPLE CALCULATIONS:

Reporting Rate=

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

Performance Rate=

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