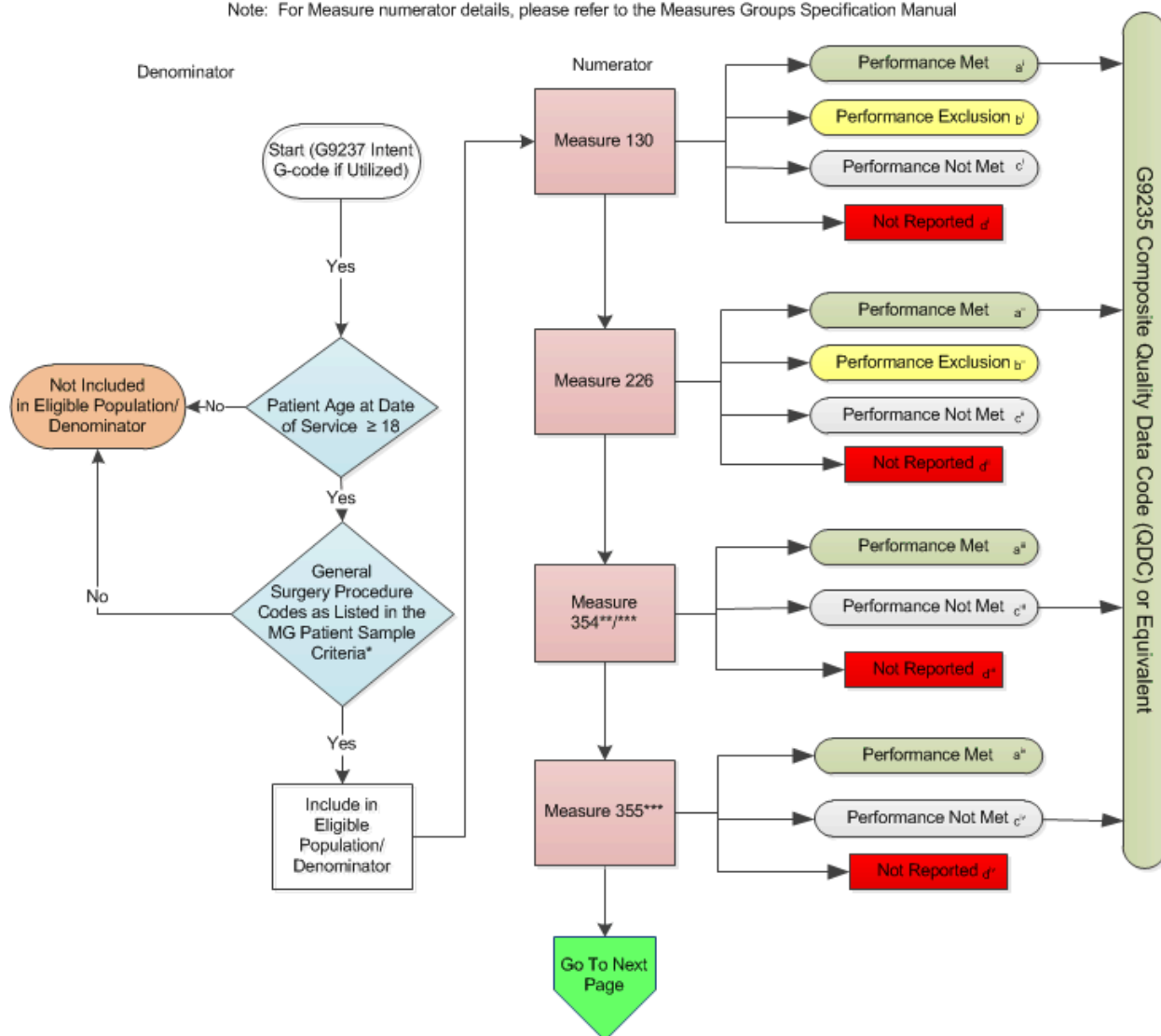


2015 Measures Group (MG) Flow General Surgery

Note: For Measure numerator details, please refer to the Measures Groups Specification Manual



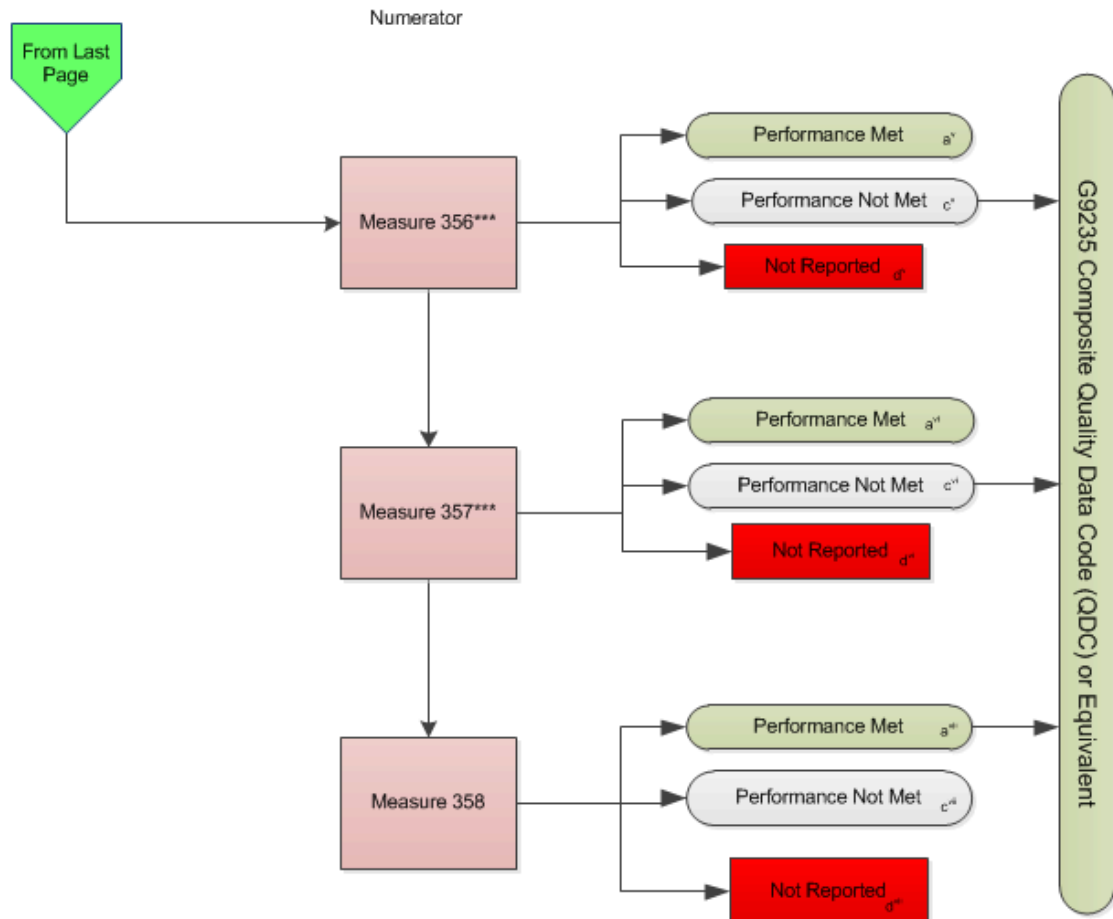
*See the posted 2015 Measures Groups Specification Manual for Patient Sample Criteria, specific coding and instructions to report this Measures Group.

**Measure #354 is only report when the patient has a procedure performed specific to gastric bypass surgery or colectomy.

***Measures #354, #355, #356 and #357 are inverse measures and a lower performance rate indicates better clinical care or control.

2015 Measures Group (MG) Flow General Surgery

Note: For Measure numerator details, please refer to the Measures Groups Specification Manual



***Measures #354, #355, #356 and #357 are inverse measures and a lower performance rate indicates better clinical care or control.

2015 Measures Group (MG) Flow General Surgery

Scenarios for Reporting (Patient/Procedure) and Performance (Measure) Algorithms:

a= Performance Met; b=Performance Exclusion; c=Performance Not Met; d=Not Reported; e=Not Applicable

	<u>Measure 130</u>	<u>Measure 226</u>	<u>Measure 354**/***</u>	<u>Measure 355***</u>	<u>Measure 356***</u>	<u>Measure 357***</u>	<u>Measure 358</u>
	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)
Patient X Procedure Specific to Gastric Bypass or Colectomy	Met (a ⁱ)	Exclusion (b ⁱⁱ)	Met (a ⁱⁱⁱ)	Met (a ^{iv})	Not Met (c ^v)	Not Met (c ^{vi})	Not Met (c ^{vii})
Patient Y Procedure Not Specific to Gastric Bypass or Colectomy	Not Met (c ⁱ)	Not Met (c ⁱⁱ)	Not Applicable (e ⁱⁱⁱ)	Not Met (c ^{iv})	Met (a ^v)	Not Met (c ^{vi})	Met (a ^{vii})
Patient Z Procedure Specific to Gastric Bypass or Colectomy	Not Reported (d ⁱ)	Met (a ⁱⁱ)	Not Met (c ⁱⁱⁱ)	Not Reported (d ^{iv})	Met (a ^v)	Met (a ^{vi})	Met (a ^{vii})

Reporting Algorithm****

Patient X [aⁱ, bⁱ, aⁱⁱ, a^{iv}, c^v, c^{vi}, c^{vii}] + Patient Y [dⁱ, cⁱⁱ, eⁱⁱⁱ, c^{iv}, a^v, c^{vi}, a^{vii}] + Patient Z [dⁱ, aⁱⁱ, cⁱⁱⁱ, d^{iv}, a^v, a^{vi}, a^{vii}] = 1+1+0 = 2 of the Required 20 Patient Sample Reported

Performance Algorithms

Measure 130

Performance Met (1)
Reported QDC for eligible patient (2) - Performance Exclusion (0) = $\frac{1}{2} = 50.00\%$

Measure 226

Performance Met (1)
Reported QDC for eligible patient (3) - Performance Exclusion (1) = $\frac{1}{2} = 50.00\%$

Measure 354

Performance Met (1)
Reported QDC for eligible patient (2) = $\frac{1}{2} = 50.00\%$

Measure 355

Performance Met (1)
Reported QDC for eligible patient (2) = $\frac{1}{2} = 50.00\%$

Measure 356

Performance Met (2)
Reported QDC for eligible patient (3) = $\frac{2}{3} = 66.67\%$

Measure 357

Performance Met (1)
Reported QDC for eligible patient (3) = $\frac{1}{3} = 33.33\%$

Measure 358

Performance Met (2)
Reported QDC for eligible patient (3) = $\frac{2}{3} = 66.67\%$

**Measure #354 is only reported the patient has a procedure performed specific to gastric bypass surgery or colectomy

*** Measures #354, #355, #356 and #357 are inverse measures and a lower performance rate indicates better clinical care or control.

****Reporting of all measures contained in measures group, per eligible patient, equals one.

2015 Measures Group (MG) Flow General Surgery

Please refer to the specific section of the 2015 PQRS Measures Groups Specifications Manual to identify specific coding and instructions to report the General Surgery Measures Group Patient Sample Criteria (denominator), individual measures, and numerator options information for use in reporting this Measures Group.

1. Start with G9237 Intent G-code if Utilized
2. Check Patient Age:
 - a. If the Age is greater than or equal to 18 years of age at Date of Service equals No, do not include in Eligible Population/Denominator. Stop Processing.
 - b. If the Age is greater than or equal to 18 years of age at Date of Service equals Yes, proceed to check Procedure Performed.
3. Check Procedure Performed:
 - a. If Procedure Codes as Listed in the MG Patient Sample Criteria equals No, do not include in Eligible Population. Stop Processing.
 - b. If Procedure Codes as Listed in the MG Patient Sample Criteria equals Yes, include in the Eligible Population/Denominator.
4. Denominator Population
 - a. Include in Eligible Population/Denominator is all eligible patients who meet the Patient Sample Criteria (denominator) for the Measures Group. For each measure within the measures group each numerator option is represented by a letter which is used in the Scenarios for Reporting and Performance Algorithms at the end of this document.
5. Start Numerator Options for Measures within the Measures Group
6. Composite Quality Data Code (QDC) G9235 has been created for registries that utilize claims data. This QDC may be reported in lieu of individual QDCs when all quality clinical actions for all applicable measures within the group have been performed for this patient.
7. Measure 130
 - a. Numerator option Performance Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter aⁱ.
 - b. Numerator option Performance Exclusion is represented by letter bⁱ.
 - c. Numerator option Performance Not Met is represented by letter cⁱ.
 - d. Numerator option Not Reported is represented by letter dⁱ.
8. Measure 226
 - a. Numerator option Performance Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter aⁱⁱ.
 - b. Numerator option Performance Exclusion is represented by letter bⁱⁱ.
 - c. Numerator option Performance Not Met is represented by letter cⁱⁱ.
 - d. Numerator option Not Reported is represented by letter dⁱⁱ.

9. Measure 354

- a. Measure #354 is an inverse measure. A lower calculated performance rate for this measure indicates better clinical control and care.
- b. Measure #354 is only reported when the patient has a procedure performed specific to gastric bypass surgery or colectomy. When measure #354 is Not Applicable it is represented by letter eⁱⁱⁱ in the Scenarios for Reporting Algorithms.
- c. Numerator option Performance Met is represented by letter aⁱⁱⁱ.
- d. Numerator option Performance Not Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Not Met is represented by letter cⁱⁱⁱ.
- e. Numerator option Not Reported is represented by letter dⁱⁱⁱ.

10. Measure 355

- a. Measure #355 is an inverse measure. A lower calculated performance rate for this measure indicates better clinical control and care.
- b. Numerator option Performance Met is represented by letter a^{iv}.
- c. Numerator option Performance Not Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Not Met is represented by letter c^{iv}.
- d. Numerator option Not Reported is represented by letter d^{iv}.

11. Measure 356

- a. Measure #356 is an inverse measure. A lower calculated performance rate for this measure indicates better clinical control and care.
- b. Numerator option Performance Met is represented by letter a^v.
- c. Numerator option Performance Not Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Not Met is represented by letter c^v.
- d. Numerator option Not Reported is represented by letter d^v.

12. Measure 357

- a. Measure #357 is an inverse measure. A lower calculated performance rate for this measure indicates better clinical control and care.
- b. Numerator option Performance Met is represented by letter a^{vi}.
- c. Numerator option Performance Not Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Not Met is represented by letter c^{vi}.
- d. Numerator option Not Reported is represented by letter d^{vi}.

13. Measure 358

- a. Numerator option Performance Met has an arrow pointing to G9235 Composite Quality Data Code (QDC) or Equivalent. Performance Met is represented by letter a^{vii}.
- b. Numerator option Performance Not Met is represented by letter c^{vii}.
- c. Numerator option Not Reported is represented by letter d^{vii}.

14. Scenarios for Reporting and Performance Algorithms

15. Patient X Procedure Specific to Gastric Bypass or Colectomy

- a. Patient X Met Measure 130 (represented by aⁱ)

- b. Patient X Exclusion Reported for Measure 226 (represented by bⁱⁱ)
 - c. Patient X Met Measure 354 (represented by aⁱⁱⁱ)
 - d. Patient X Met Measure 355 (represented by a^{iv})
 - e. Patient X Not Met but Reported Measure 356 (represented by c^v)
 - f. Patient X Not Met but Reported Measure 357 (represented by c^{vi})
 - g. Patient X Not Met but Reported Measure 358 (represented by c^{vii})
- 16. Patient Y Procedure Not Specific to Gastric Bypass or Colectomy
 - a. Patient Y Not Met but Reported Measure 130 (represented by cⁱ)
 - b. Patient Y Not Met but Reported Measure 226 (represented by cⁱⁱ)
 - c. Patient Y Not Applicable for Measure 354 (represented by eⁱⁱⁱ)
 - d. Patient Y Not Met but Reported Measure 355 (represented by a^{iv})
 - e. Patient Y Met Measure 356 (represented by a^v)
 - f. Patient Y Not Met but Reported Measure 357 (represented by c^{vi})
 - g. Patient Y Met Measure 358 (represented by a^{vii})
- 17. Patient Z Procedure Specific to Gastric Bypass or Colectomy
 - a. Patient Z did Not Report Measure 130 (represented by cⁱ)
 - b. Patient Z Met Measure 226 (represented by aⁱⁱ)
 - c. Patient Z Not Met but Reported Measure 354 (represented by cⁱⁱⁱ)
 - d. Patient Z did Not Report Measure 355 (represented by d^{iv})
 - e. Patient Z Met Measure 356 (represented by a^v)
 - f. Patient Z Met Measure 357 (represented by a^{vi})
 - g. Patient Z Met Measure 358 (represented by a^{vii})
- 18. Reporting Algorithm
 - a. Reporting of all applicable measures contained in the measures group, per eligible patient, equals one
 - b. Patient X Reporting equals 1 Plus Patient Y Reporting equals 1 Plus Patient Z Reporting equals 0 for a total of 2 of the Required 20 Patient Sample Reported
- 19. Performance Algorithms
- 20. Measure 130
 - a. Performance Met equals 1 divided by Reported QDC for 2 eligible patients minus 0 Performance Exclusions equals 50% Performance Rate
- 21. Measure 226
 - a. Performance Met equals 1 divided by Reported QDC for 3 eligible patients minus 1 Performance Exclusion equals 50% Performance Rate
- 22. Measure 354
 - a. Performance Met equals 1 divided by Reported QDC for 2 eligible patients equals 50% Performance Rate
- 23. Measure 355
 - a. Performance Met equals 1 divided by Reported QDC for 2 eligible patients equals 50% Performance Rate
- 24. Measure 356

- a. Performance Met equals 2 divided by Reported QDC for 3 eligible patients equals 66.67% Performance Rate
- 25. Measure 357
 - a. Performance Met equals 1 divided by Reported QDC for 3 eligible patients equals 33.33% Performance Rate
- 26. Measure 358
 - a. Performance Met equals 2 divided by Reported QDC for 3 eligible patients equals 66.67% Performance Rate