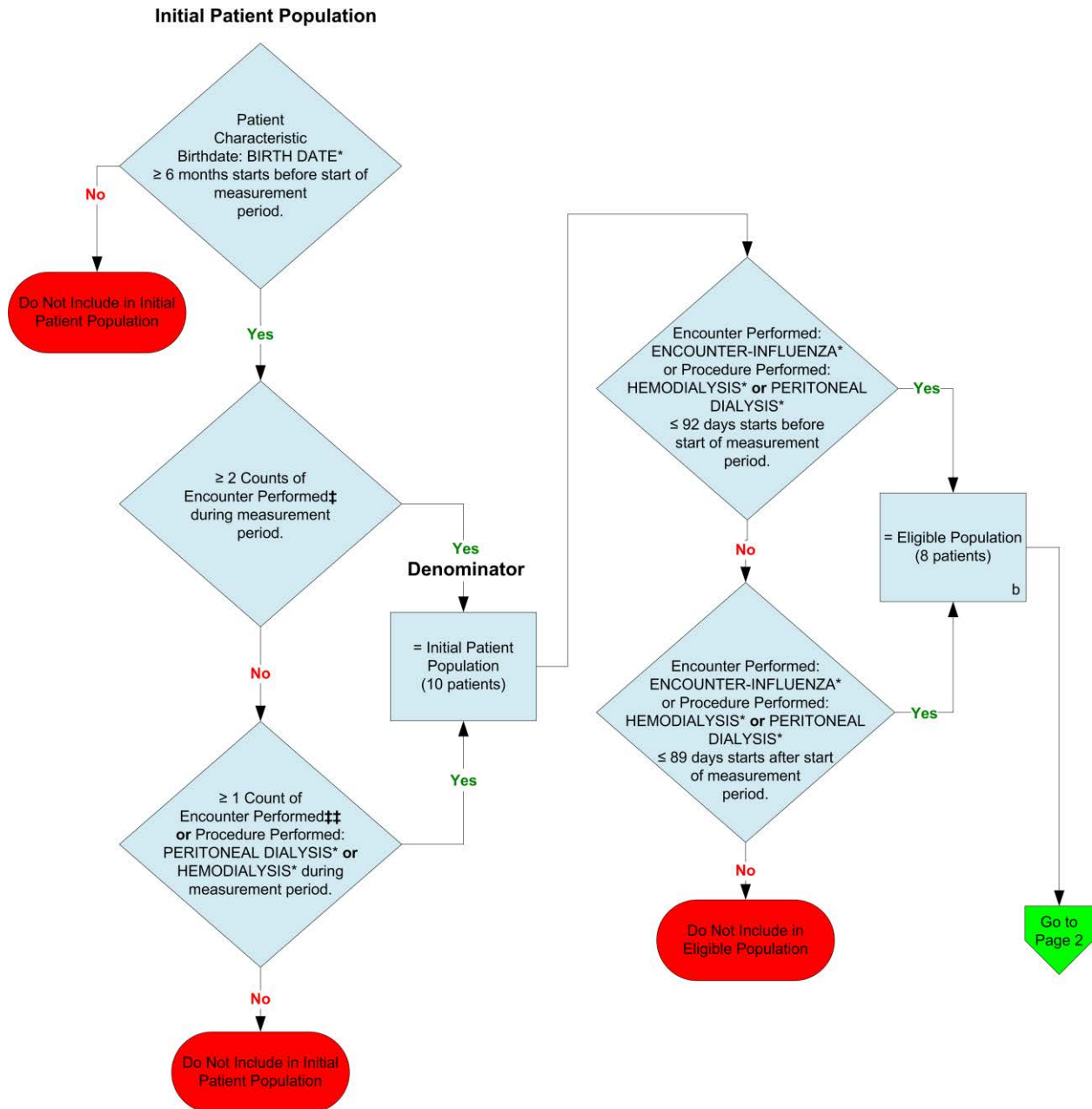


2014 eCQM Flow  
Measure Identifier: CMS147v4  
NQF 0041: Preventive Care and Screening: Influenza Immunization

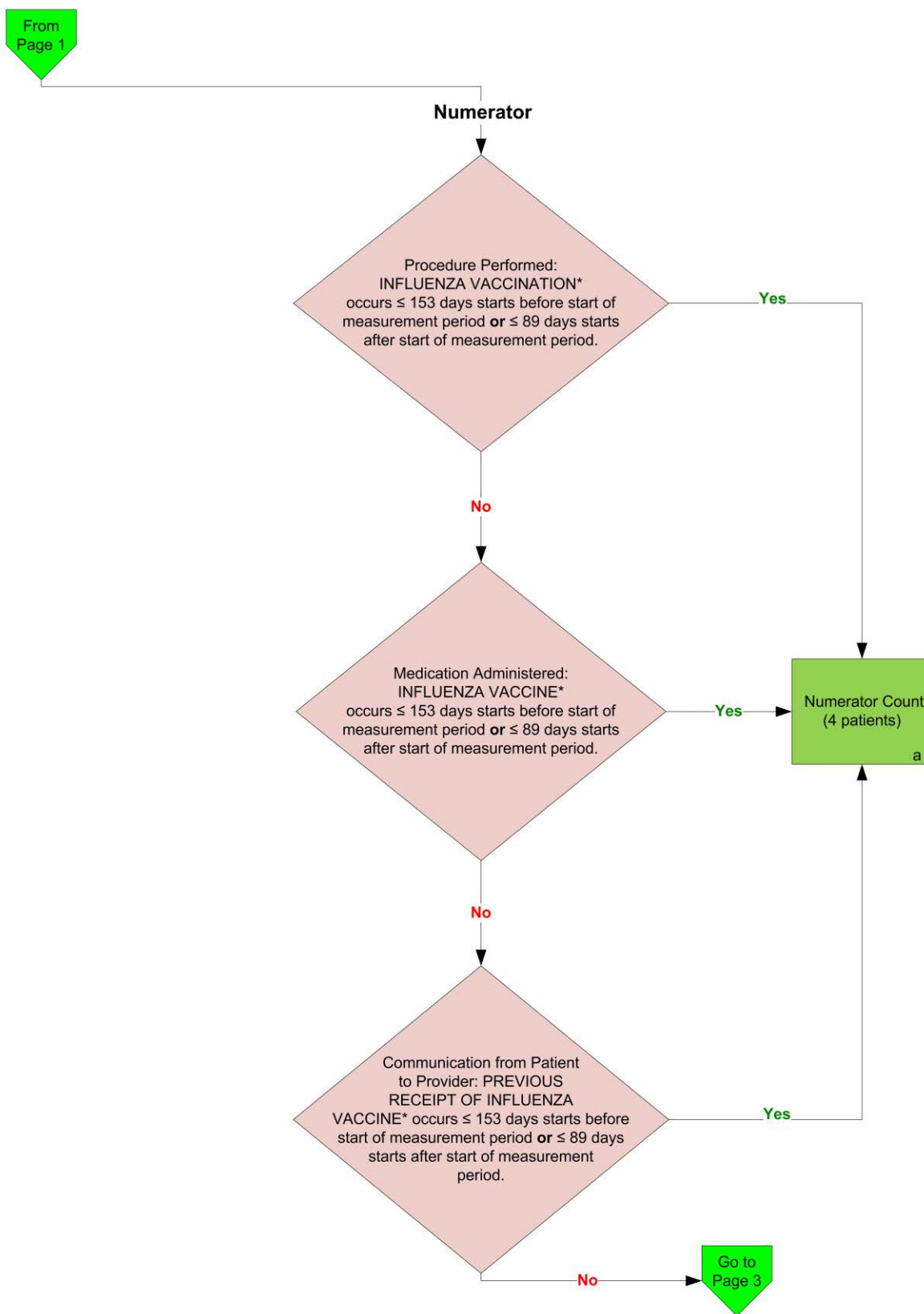


\* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

‡ Appropriate encounters include; Office Visit, Outpatient Consultation, Care Services in Long-Term Residential Facility, Home Health Care Services, Patient Provider Interaction

‡‡ Appropriate encounter include; Preventive Care-Initial Office Visit, 0 to 17, Preventive Care Services-Initial Office Visit, 18 and Up, Preventive Care Services-Other, Discharge Services-Nursing Facility, Nursing Facility Visit, Annual Wellness Visit, Preventive Care-Established Office Visit, 0 to 17, Preventive Care Services-Established Office Visit, 18 and Up, Preventive Care Services-Individual Counseling, Preventive Care Services-Group Counseling, and Face-to-Face Interaction.

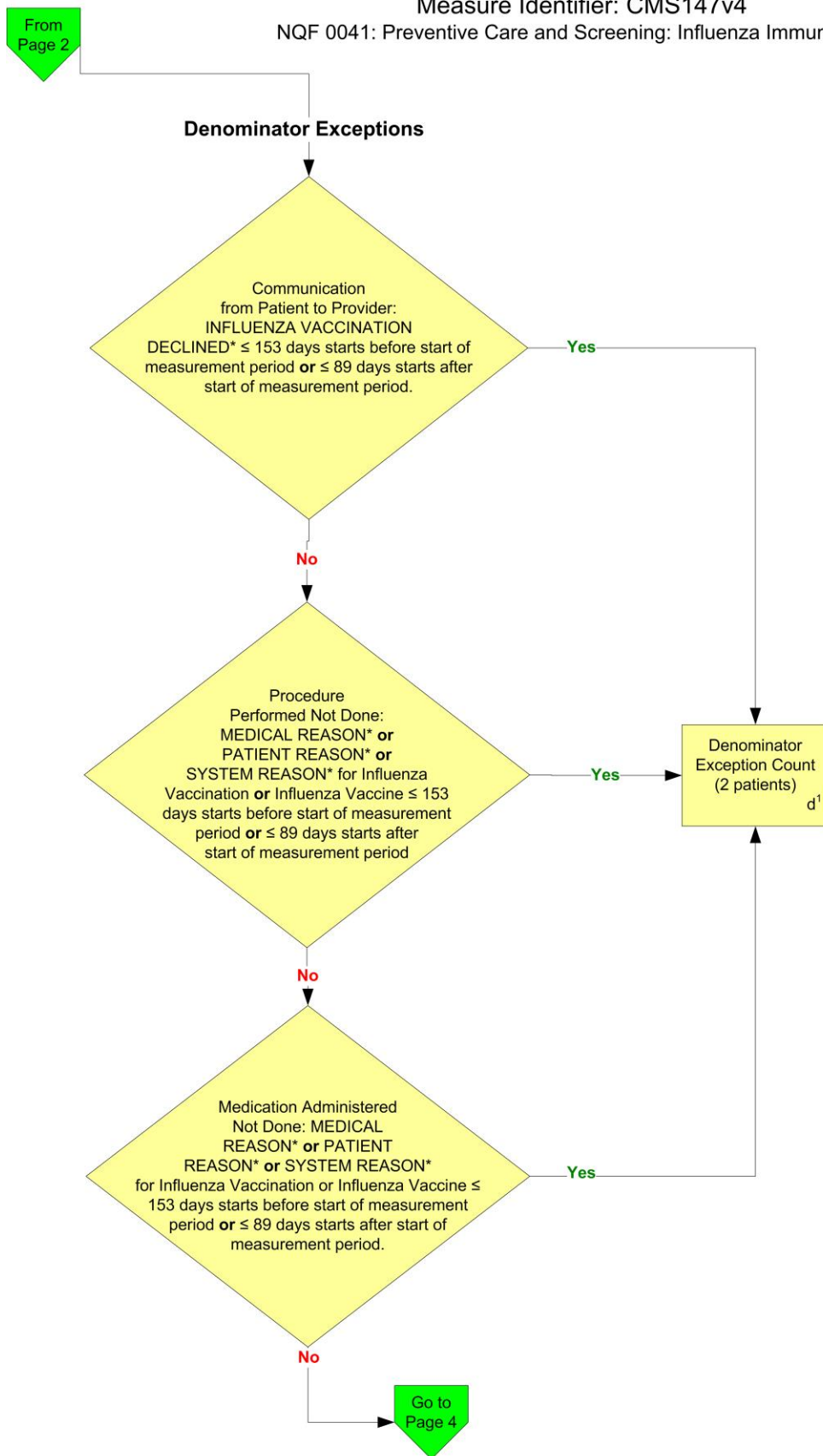
2014 eCQM Flows  
Measure Identifier: CMS147v4  
NQF 0041: Preventive Care and Screening: Influenza Immunization



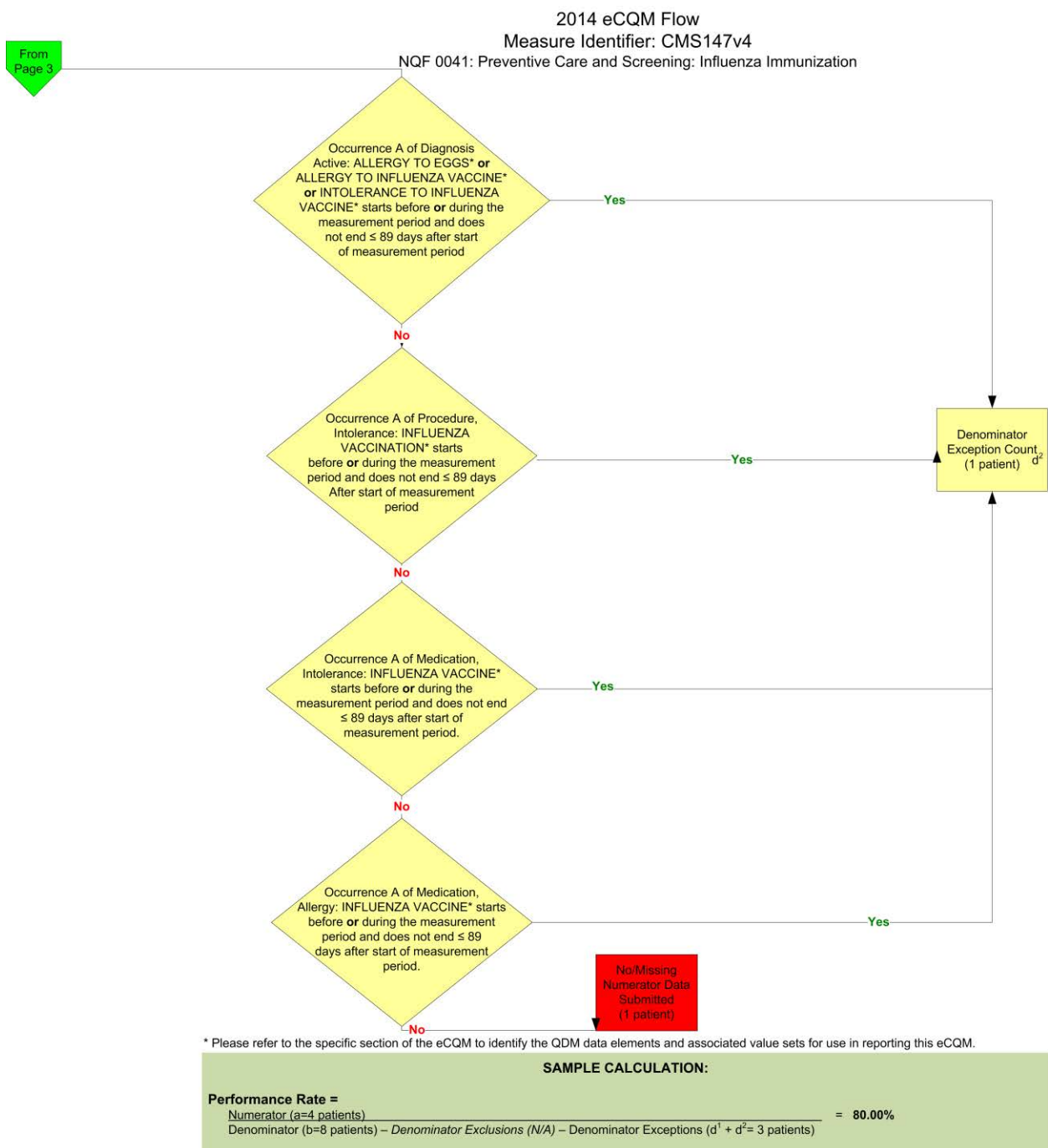
\* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

2014 eCQM Flow  
Measure Identifier: CMS147v4

NQF 0041: Preventive Care and Screening: Influenza Immunization



\* Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.



2014 eCQM Flows  
Measure Identifier: CMS147v4  
NQF 0041: Preventive Care and Screening: Influenza Immunization

Please refer to the specific section of the eCQM to identify the QDM data elements and associated value sets for use in reporting this eCQM.

1. Start Initial Patient Population
2. Check Patient Characteristic Birthdate:
  - a. If QDM data element, BIRTH DATE, is greater than or equal to 6 months of age starts before the start of the measurement period equals No, do not include in Initial Patient Population. Stop Processing.
  - b. If QDM data element, BIRTH DATE, is greater than or equal to 6 months of age starts before the start of the measurement period, equals Yes, continue processing and proceed to check Encounter Performed.
3. Check Encounter Performed: Total number of encounters must be greater than or equal to 2
  - a. If QDM data element, OFFICE VISIT, during measurement period equals Yes, include in Initial Patient Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
  - b. If QDM data element, OFFICE VISIT, during measurement period equals No, proceed to check next Encounter Performed.
  - c. If QDM data element, OUTPATIENT CONSULTATION, during measurement period equals Yes, include in Initial Patient Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
  - d. If QDM data element, OUTPATIENT CONSULTATION, during measurement period equals No, proceed to check next Encounter Performed.
  - e. If QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, during measurement period equals Yes, include in Initial Patient Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.
  - f. If QDM data element, CARE SERVICES IN LONG-TERM RESIDENTIAL FACILITY, during measurement period equals No, proceed to check next Encounter Performed.
  - g. If QDM data element, HOME HEALTHCARE SERVICES, during measurement period equals Yes, include in Initial Patient Population and proceed to check for another Encounter Performed until total number of encounters are greater than or equal to 2.

- h. If QDM data element, HOME HEALTHCARE SERVICES, during measurement period equals No, proceed to check next Encounter Performed.
  - i. If QDM data element, PATIENT PROVIDER INTERACTION, during measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator if total number of encounters are greater than or equal to 2.
  - j. If QDM data element, PATIENT PROVIDER INTERACTION, during measurement period equals No, proceed to check Encounter Performed.
- 4. Check Encounter Performed: Total number of encounters must be greater than or equal to 1
  - a. If QDM data element, PREVENTIVE CARE – INITIAL OFFICE VISIT, 0 TO 17, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - b. If QDM data element, PREVENTIVE CARE – INITIAL OFFICE VISIT, 0 TO 17, during the measurement period equals No, proceed to check next Encounter Performed.
  - c. If QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - d. If QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
  - e. If QDM data element, PREVENTIVE CARE SERVICES – OTHER during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - f. If QDM data element, PREVENTIVE CARE SERVICES – OTHER, during the measurement period equals No, proceed to check next Encounter Performed.
  - g. If QDM data element, DISCHARGE SERVICES – NURSING FACILITY, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - h. If QDM data element, DISCHARGE SERVICES – NURSING FACILITY, during the measurement period equals No, proceed to check next Encounter Performed.
  - i. If QDM data element, NURSING FACILITY VISIT during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - j. If QDM data element, NURSING FACILITY VISIT, during the measurement period equals No, proceed to check next Encounter Performed.

- k. If QDM data element, ANNUAL WELLNESS VISIT, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - l. If QDM data element, ANNUAL WELLNESS VISIT, during the measurement period equals No, proceed to check next Encounter Performed.
  - m. If QDM data element, PREVENTIVE CARE – ESTABLISHED OFFICE VISIT, 0 TO 17, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - n. If QDM data element, PREVENTIVE CARE – ESTABLISHED OFFICE VISIT, 0 TO 17, during the measurement period equals No, proceed to check next Encounter Performed.
  - o. If QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - p. If QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals No, proceed to check next Encounter Performed.
  - q. If QDM data element, PREVENTIVE CARE SERVICES – INDIVIDUAL COUNSELING, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - r. If QDM data element, PREVENTIVE CARE SERVICES – INDIVIDUAL COUNSELING, during the measurement period equals No, proceed to check next Encounter Performed.
  - s. If QDM data element, PREVENTIVE CARE SERVICES – GROUP COUNSELING, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - t. If QDM data element, PREVENTIVE CARE SERVICES – GROUP COUNSELING, during the measurement period equals No, proceed to check Procedure Performed.
5. Check Procedure Performed:
- a. If QDM data element, PERITONEAL DIALYSIS, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.
  - b. If QDM data element, PERITONEAL DIALYSIS, during the measurement period equals No, check next Procedure Performed.
  - c. If QDM data element, HEMODIALYSIS, during the measurement period equals Yes, include in the Initial Patient Population and proceed to Denominator.

- d. If QDM data element, HEMODIALYSIS, during the measurement period equals No, do not include in Initial Patient Population and stop processing.
6. Start Denominator
  - a. Denominator equals the Initial Patient Population, proceed to check Encounter Performed or Procedure Performed.
7. Check Encounter Performed or Procedure Performed:
  - a. If Occurrence A of QDM data element, ENCOUNTER-INFLUENZA, OR Occurrence A of QDM data element, HEMODIALYSIS, OR Occurrence A of QDM data element, PERITONEAL DIALYSIS, less than or equal to 92 days starts before start of measurement period equals Yes, include in Eligible Population and proceed to Numerator.
  - b. If Occurrence A of QDM data element, ENCOUNTER-INFLUENZA, OR if Occurrence A of QDM data element, HEMODIALYSIS, OR Occurrence A of QDM data element, PERITONEAL DIALYSIS, less than or equal to 92 days starts before start of measurement period equals No, proceed to check Encounter Performed or Procedure Performed.
8. Check Encounter Performed or Procedure Performed:
  - a. If Occurrence A of QDM data element, ENCOUNTER-INFLUENZA, OR if Occurrence A of QDM data element, HEMODIALYSIS, OR Occurrence A of QDM data element, PERITONEAL DIALYSIS, less than or equal to 89 days starts after start of measurement period equals Yes, include in Eligible Population. Eligible Population equals the Initial Patient Population plus the Eligible Population. Eligible Population is represented by the letter B in the sample calculation listed at the end of this document. Letter B equals 8 patients in the sample calculation. Proceed to Numerator.
  - b. If Occurrence A of QDM data element, ENCOUNTER-INFLUENZA, OR if Occurrence A of QDM data element, HEMODIALYSIS, OR Occurrence A of QDM data element, PERITONEAL DIALYSIS, less than or equal to 89 days starts after start of measurement period equals No, do not include in Eligible Population and stop processing.
9. Start Numerator
10. Check Procedure Performed:
  - a. If QDM data element, INFLUENZA VACCINATION, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period equals Yes, include in Numerator count. Numerator is represented



by letter A in the sample calculation listed at the end of this document. Letter A equals 4 patients in the sample calculation.

- b. If QDM data element, INFLUENZA VACCINATION, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period equals No, check Medication Administered.

11. Check Medication Administered:

- a. If QDM data element, INFLUENZA VACCINE, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals Yes, include in Numerator count. Numerator is represented by letter A in the sample calculation listed at the end of this document. Letter A equals 4 patients in the sample calculation.
- b. If QDM data element, INFLUENZA VACCINE, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals No, check Communication: From Patient to Provider.

12. Check Communication: From Patient to Provider:

- a. If QDM data element, PREVIOUS RECEIPT OF INFLUENZA VACCINE, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period equals Yes, include in Numerator count. Numerator is represented by letter A in the sample calculation listed at the end of this document. Letter A equals 4 patients in the sample calculation.
- b. If QDM data element PREVIOUS RECEIPT OF INFLUENZA VACCINE, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals No, proceed to Denominator Exceptions.

13. Start Denominator Exceptions

14. Check Communication: From Patient to Provider:

- a. If QDM data element, INFLUENZA VACCINATION DECLINED, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D1 in the sample calculation listed at the end of this document. Letter D1 equals 2 patients in the sample calculation.
- b. If QDM data element, INFLUENZA VACCINATION DECLINED, occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of

measurement period, equals No, proceed to check Procedure, Performed not done.

15. Check Procedure, Performed not done:

- a. If QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for Influenza Vaccination or Influenza Vaccine occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D1 in the sample calculation listed at the end of this document. Letter D1 equals 2 patients in the sample calculation.
- b. If QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for Influenza Vaccination or Influenza Vaccine occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals No, proceed to check Medication, Administered not done.

16. Check Medication, Administered not done:

- a. If QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for Influenza Vaccine or Influenza Vaccination occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D<sup>1</sup> in the sample calculation listed at the end of this document. Letter D<sup>1</sup> equals 2 patients in the sample calculation.
- b. If QDM data element, MEDICAL REASON, OR QDM data element, PATIENT REASON, OR QDM data element, SYSTEM REASON, for Influenza Vaccine or Influenza Vaccination occurs less than or equal to 153 days starts before start of measurement period or less than or equal to starts after start of measurement period, equals No, proceed to check Diagnosis Active.

17. Check Diagnosis Active:

- a. If Occurrence A of QDM data element, ALLERGY TO EGGS, OR QDM data element, ALLERGY TO INFLUENZA VACCINE, OR QDM data element, INTOLERANCE TO INFLUENZA VACCINE, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D<sup>2</sup> in the sample calculation listed at the end of this document. Letter D<sup>2</sup> equals 1 patient in the sample calculation.

- b. If Occurrence A of QDM data element, ALLERGY TO EGGS, OR QDM data element, ALLERGY TO INFLUENZA VACCINE, OR QDM data element, INTOLERANCE TO INFLUENZA VACCINE, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period, equals No, proceed to check next Procedure Intolerance.

18. Check Procedure Intolerance:

- a. If Occurrence A of QDM data element, INFLUENZA VACCINATION, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period, equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D<sup>2</sup> in the sample calculation listed at the end of this document. Letter D<sup>2</sup> equals 1 patient in the sample calculation.
- b. If Occurrence A of QDM data element, INFLUENZA VACCINATION, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period, equals No, proceed to check Medication Allergy or Medication Intolerance.

19. Check Medication Intolerance:

- a. If Occurrence A of QDM data element, INFLUENZA VACCINE, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D<sup>2</sup> in the sample calculation listed at the end of this document. Letter D<sup>2</sup> equals 1 patient in the sample calculation.
- b. If Occurrence A of QDM data element, INFLUENZA VACCINE, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period equals No, proceed to check Medication Allergy.

20. Check Medication Allergy:

- c. If Occurrence A of QDM data element, INFLUENZA VACCINE, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period equals Yes, include in Denominator Exceptions count. The Denominator Exception is represented by the letter D<sup>2</sup> in the sample calculation listed at the end of this document. Letter D<sup>2</sup> equals 1 patient in the sample calculation.
- d. If Occurrence A of QDM data element, INFLUENZA VACCINE, starts before or during the measurement period and does not end less than or equal to 89 days after start of measurement period equals No, include in the No/Missing Numerator Data Submitted count and stop processing.

**SAMPLE CALCULATION:**

**Performance Rate =**

$$\frac{\text{Numerator (a=4 patients)}}{\text{Denominator (b=8 patients) – Denominator Exclusions (N/A) – Denominator Exceptions (d<sup>1</sup> + d<sup>2</sup>= 3 patients)}} = 80.00\%$$