

2014 eMeasure Flows

Cover Page

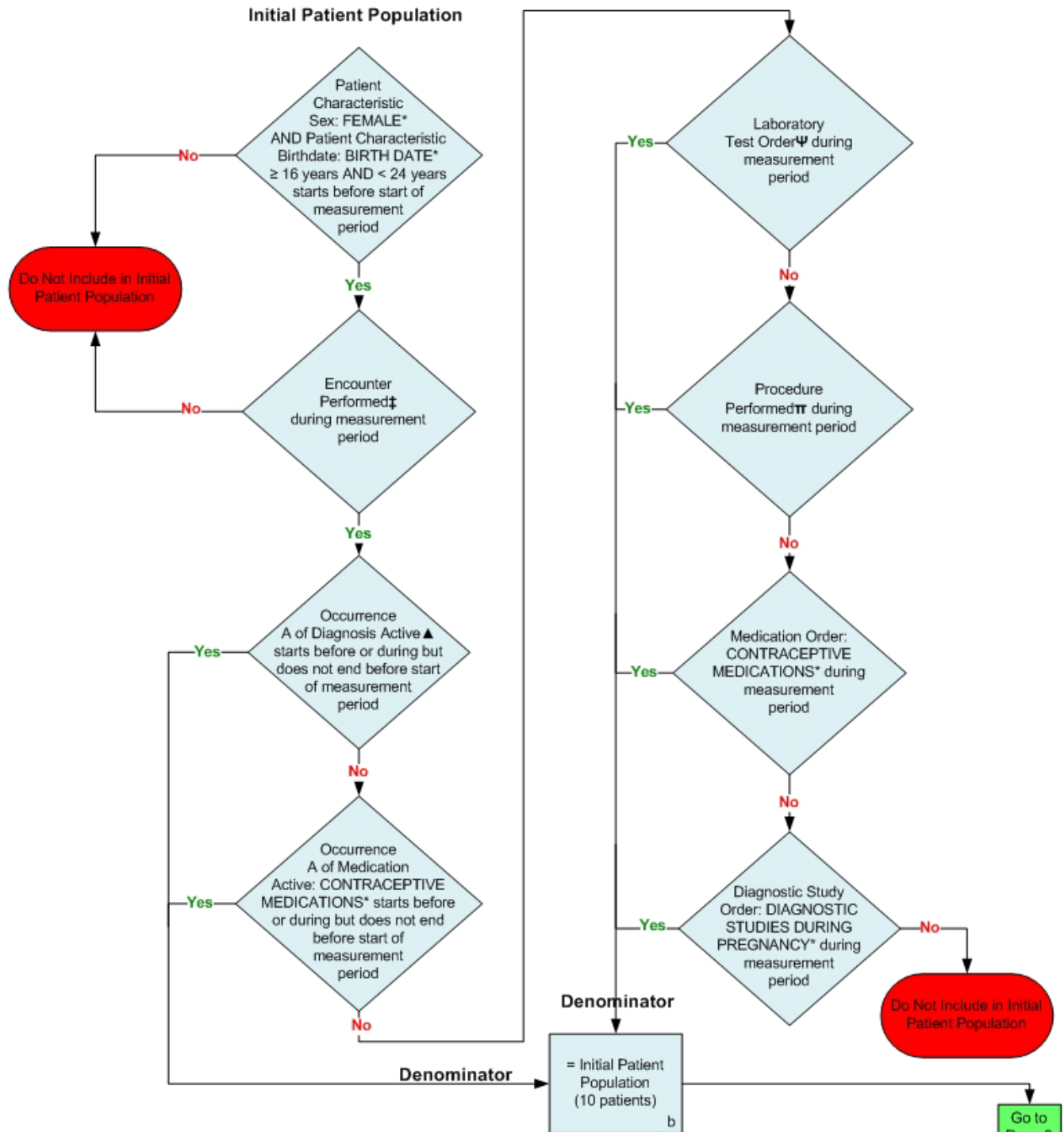
For eligible professionals reporting EHR clinical quality measures for Meaningful Use (MU) only (Option #1) in 2014, the following must be included in the submitted file(s):

- 1 – Rendering NPI and TIN on QRDA Category III files
- 2 – Payers for all eligible patients identified on QRDA Category III files
- 3 – All of the identifiers for the eMeasures the eligible professional or group practice intends to report must be included in the appropriate fields of the QRDA Category III files even if they do not have any eligible patients for those eMeasures
- 4 – Performance rate(s) (or a measure observation value) must be included in the QRDA Category III file for every eMeasure the eligible professional intended to report according to the performance rate (or measure observation) algorithms provided in each of the flows
- 5 – For every patient evaluated for the eMeasures also identify payer, race, ethnicity and sex.

For eligible professionals and group practices reporting EHR clinical quality measures for Meaningful Use (MU) and the Physician Quality Reporting System (PQRS) (Option #2) in 2014, the following must be included in the submitted file(s):

- 1 – Rendering NPI and TIN on the appropriate fields of the QRDA Category I or QRDA Category III files for eligible professionals reporting as *individuals* **OR** submission of all NPIs within the TIN when reporting as a *group practice*
- 2 – At least **one** Medicare Part B beneficiary that is eligible for at least one of the eMeasures either via QRDA Category I or III files
- 3 – Valid HIC# for Medicare beneficiaries on QRDA Category I files
- 4 – Payers for all eligible patients identified on QRDA Category I or III files
- 5 – All of the identifiers for the eMeasures the eligible professional or group practice intends to report must be included in the appropriate fields of the QRDA Category I or III files even if they do not have any eligible patients for those eMeasures
- 6 – Performance rate(s) (or a measure observation value) must be included in the QRDA Category III file for every eMeasure the eligible professional intended to report according to the performance rate (or measure observation) algorithms provided in each of the flows
- 7 – All of the detailed data pertaining to the eMeasures the eligible professional intends to report must be included in the patient-level QRDA Category I files so that the system may generate accurate performance rate(s) (or a measure observation value)
- 8 – For every patient evaluated for the eMeasures also identify payer, race, ethnicity and sex.

2014 eMeasure Flows
eMeasure Identifier: 153
NQF 0033: Chlamydia Screening for Women



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

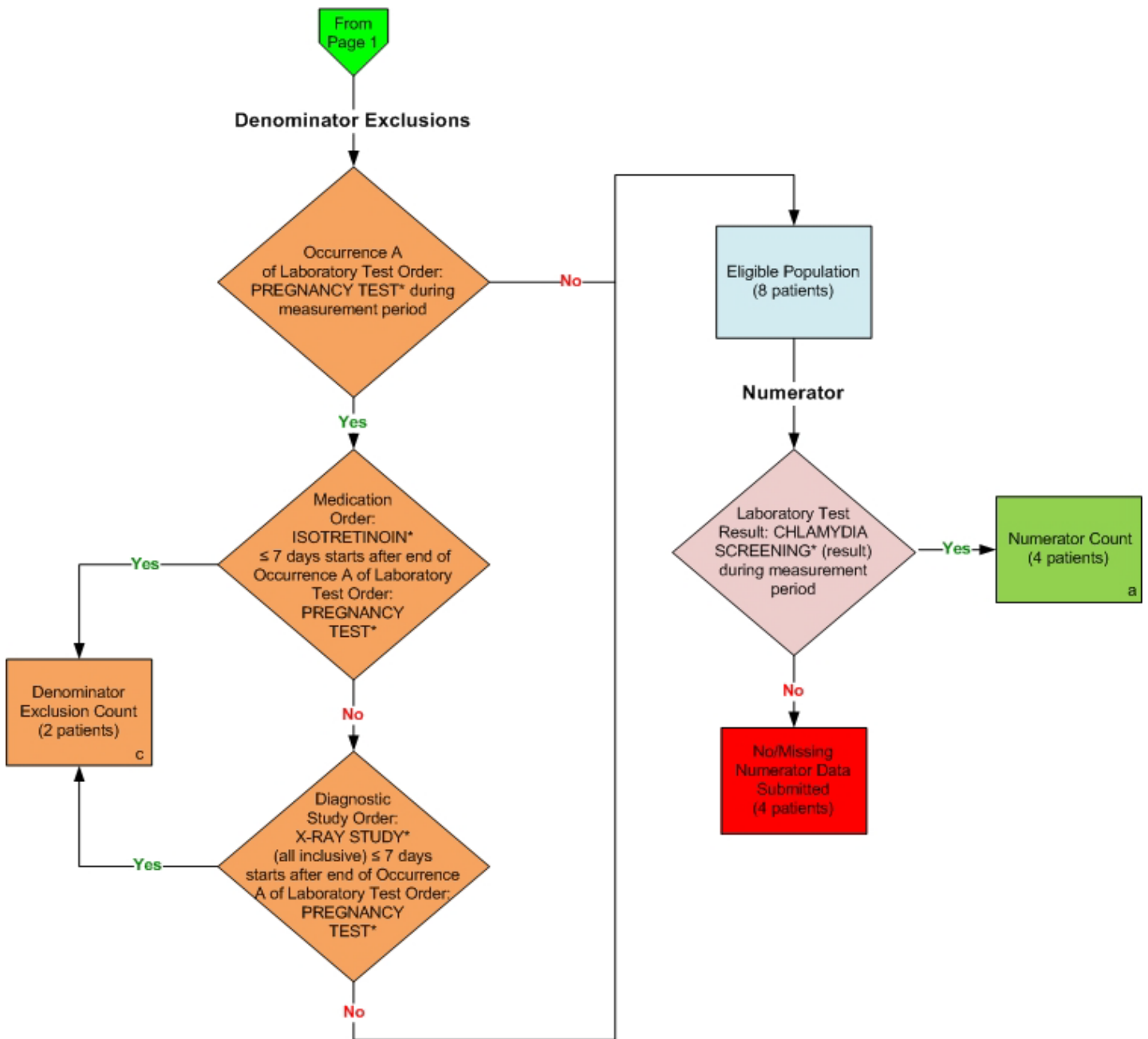
‡ For a listing of appropriate encounters, please refer to the QDM data elements and associated value sets as specific data elements have not been listed.

▲ For a listing of appropriate diagnosis codes to identify sexually active women please refer to the QDM data elements and associated value sets as specific data element names have not been listed.

Ψ For a listing of appropriate laboratory tests to identify sexually active women please refer to the QDM data elements and associated value sets as specific data element names have not been listed.

Ⓣ For a listing of appropriate procedures to identify sexually active women please refer to the QDM data elements and associated value sets as specific data element names have not been listed.

2014 eMeasure Flows
eMeasure Identifier: 153
NQF 0033: Chlamydia Screening for Women



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

SAMPLE CALCULATION:

Performance Rate =

$$\frac{\text{Numerator (a=4 patients)}}{\text{Denominator (b=10 patients) - Denominator Exclusions (c=2 patients) - Denominator Exceptions (N/A)}} = 50.00\%$$

2014 eMeasure Flows
eMeasure Identifier: 153
NQF 0033: Chlamydia Screening for Women

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

1. Start Initial Patient Population
2. Check Patient Characteristic Birthdate:
 - a. If QDM data element, BIRTH DATE, is greater than or equal to 16 years of age AND less than 24 years of age before the start of the measurement period equals No, do not include in Initial Patient Population and stop processing.
 - b. If QDM data element, BIRTH DATE, is greater than or equal to 16 years of age AND less than 24 years of age before the start of the measurement period, equals Yes, continue processing and proceed to check Patient Characteristic Sex.
3. Check Patient Characteristic Sex:
 - a. If QDM data element, FEMALE, equals Yes, continue processing and proceed to check Encounter Performed.
 - b. If QDM data element, FEMALE, equals No, do not include in Initial Patient Population and stop processing.
4. Check Encounter Performed:
 - a. If QDM data element, OFFICE VISIT, during the measurement period equals Yes, proceed to check Diagnosis Active.
 - b. If QDM data element, OFFICE VISIT, during the measurement period equals No, proceed to check next Encounter Performed.
 - c. If QDM data element, FACE-TO-FACE INTERACTION, during the measurement period equals Yes, proceed to check Diagnosis Active.
 - d. If QDM data element, FACE-TO-FACE INTERACTION, during the measurement period equals No, proceed to check next Encounter Performed.
 - e. If QDM data element, PREVENTIVE CARE SERVICES – ESTABLISHED OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, proceed to check Diagnosis Active.
 - f. 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.
 - g. If QDM data element, PREVENTIVE CARE SERVICES – INITIAL OFFICE VISIT, 18 AND UP, during the measurement period equals Yes, proceed to check Diagnosis Active.
 - h. 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.
 - i. If QDM data element, HOME HEALTHCARE SERVICES, during the measurement period equals Yes, proceed to check Diagnosis Active.
 - j. If QDM data element, HOME HEALTHCARE SERVICES during the measurement period equals No, proceed to check next Encounter Performed.
 - k. If QDM data element, PREVENTIVE CARE – ESTABLISHED OFFICE VISIT, 0 TO 17, during the measurement period equals Yes, proceed to check Diagnosis Active.
 - l. If QDM data element, PREVENTIVE CARE – ESTABLISHED OFFICE VISIT, 0 TO 17, during the measurement period equals No, proceed to check next Encounter Performed.

- m. If QDM data element, PREVENTIVE CARE – INITIAL OFFICE VISIT, 0 TO 17, during the measurement period equals Yes, proceed to check Diagnosis Active.
- n. If QDM data element, PREVENTIVE CARE – INITIAL OFFICE VISIT, 0 TO 17, during the measurement period equals No, do not include in Initial Patient Population and stop processing.

5. Check Diagnosis Active:

- a. If Occurrence A of QDM data element, OTHER FEMALE REPRODUCTIVE CONDITIONS, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- b. If Occurrence A of QDM data element, OTHER FEMALE REPRODUCTIVE CONDITIONS, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- c. If Occurrence A of QDM data element, GENITAL HERPES, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- d. If Occurrence A of QDM data element, GENITAL HERPES, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- e. If Occurrence A of QDM data element, GONOCOCCAL INFECTIONS AND VENEREAL DISEASES, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- f. If Occurrence A of QDM data element, GONOCOCCAL INFECTIONS AND VENEREAL DISEASES, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- g. If Occurrence A of QDM data element, INFLAMMATORY DISEASES OF FEMALE REPRODUCTIVE ORGANS, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- h. If Occurrence A of QDM data element, INFLAMMATORY DISEASES OF FEMALE REPRODUCTIVE ORGANS, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- i. If Occurrence A of QDM data element, CHLAMYDIA, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- j. If Occurrence A of QDM data element, CHLAMYDIA, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- k. If Occurrence A of QDM data element, HIV, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- l. If Occurrence A of QDM data element, HIV, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- m. If Occurrence A of QDM data element, SYPHILIS, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
- n. If Occurrence A of QDM data element, SYPHILIS, starts before or during but does not end before start of measurement period equals No, proceed to check next Diagnosis Active.
- o. If Occurrence A of QDM data element, COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.

- p. If Occurrence A of QDM data element, COMPLICATIONS OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM, starts before or during but does not end before start of measurement period equals No, proceed to check Medication Active.
6. Check Medication Active:
- a. If Occurrence A of QDM data element, CONTRACEPTIVE MEDICATIONS, starts before or during but does not end before start of measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - b. If Occurrence A of QDM data element, CONTRACEPTIVE MEDICATIONS, starts before or during but does not end before start of measurement period equals No, proceed to check Laboratory Test Order.
7. Check Laboratory Test Order:
- a. If QDM data element, PREGNANCY TEST, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - b. If QDM data element, PREGNANCY TEST, during the measurement period equals No, proceed to check next Laboratory Test Order.
 - c. If QDM data element, PAP TEST, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - d. If QDM data element, PAP TEST, during the measurement period equals No, proceed to check next Laboratory Test Order.
 - e. If QDM data element, LAB TESTS DURING PREGNANCY, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - f. If QDM data element, LAB TESTS DURING PREGNANCY, during the measurement period equals No, proceed to check next Laboratory Test Order.
 - g. If QDM data element, LAB TESTS FOR SEXUALLY TRANSMITTED INFECTIONS, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - h. If QDM data element, LAB TESTS FOR SEXUALLY TRANSMITTED INFECTIONS, during the measurement period equals No, proceed to check Procedure Performed.
8. Check Procedure Performed:
- a. If QDM data element, DELIVERY LIVE BIRTHS, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - b. If QDM data element, DELIVERY LIVE BIRTHS, during the measurement period equals No, proceed to check next Procedure Performed.
 - c. If QDM data element, PROCEDURES DURING PREGNANCY, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - d. If QDM data element, PROCEDURES DURING PREGNANCY, during the measurement period equals No, proceed to check next Procedure Performed.
 - e. If QDM data element, PROCEDURES INVOLVING CONTRACEPTIVE DEVICES, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - f. If QDM data element, PROCEDURES INVOLVING CONTRACEPTIVE DEVICES, during the measurement period equals No, proceed to check Medication Order.
9. Check Medication Order:
- a. If QDM data element, CONTRACEPTIVE MEDICATIONS, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.

- b. If QDM data element, CONTRACEPTIVE MEDICATIONS, during the measurement period equals No, proceed to check Diagnostic Study Order.
- 10. Check Diagnostic Study Order:
 - a. If QDM data element, DIAGNOSTIC STUDIES DURING PREGNANCY, during the measurement period equals Yes, include in Initial Patient Population and proceed to Denominator.
 - b. If QDM data element, DIAGNOSTIC STUDIES DURING PREGNANCY, during the measurement period equals No, do not include in Initial Patient Population and stop processing.
- 11. Start Denominator
 - a. Denominator equals the Initial Patient Population. Denominator is represented by the letter B in the sample calculation listed at the end of this document. Letter B equals 10 patients in the sample calculation.
- 12. Start Denominator Exclusions
- 13. Check Laboratory Test Order:
 - a. If Occurrence A of QDM data element, PREGNANCY TEST, during the measurement period equals Yes, proceed to check Medication Order.
 - b. If Occurrence A of QDM data element, PREGNANCY TEST, during the measurement period equals No, include in eligible population and proceed to Numerator.
- 14. Check Medication Order:
 - a. If Occurrence A of QDM data element, ISOTRETINOIN, less than or equal to 7 days starts after end of Occurrence A of Laboratory Test Order QDM data element, PREGNANCY TEST, equals Yes, include in Denominator Exclusions count. Denominator Exclusions are represented by the letter C in the sample calculation listed at the end of this document. Letter C equals 2 patients in the sample calculation.
 - b. If Occurrence A of QDM data element, ISOTRETINOIN, less than or equal to 7 days starts after end of Occurrence A of Laboratory Test Order QDM data element, PREGNANCY TEST, equals No, proceed to check Diagnostic Study Order.
- 15. Check Diagnostic Study Order:
 - a. If Occurrence A of QDM data element, X-RAY STUDY (all inclusive), less than or equal to 7 days starts after end of Occurrence A of QDM data element, PREGNANCY TEST, equals Yes, include in Denominator Exclusions count. Denominator Exclusions are represented by the letter C in the sample calculation listed at the end of this document. Letter C equals 2 patients in the sample calculation.
 - b. If Occurrence A of QDM data element, X-RAY STUDY (all inclusive,) less than or equal to 7 days starts after end of Occurrence A of QDM data element, PREGNANCY TEST, equals No, include in eligible population and proceed to Numerator.
- 16. Start Numerator
- 17. Check Laboratory Test Result:
 - a. If QDM data element, CHLAMYDIA SCREENING (result), during measurement period equals Yes, include in Numerator count. Numerator is represented by the 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, CHLAMYDIA SCREENING (result), during measurement period equals No, include in No/Missing Numerator Data Submitted count and stop processing.

SAMPLE CALCULATION:

Performance Rate =

Numerator (a=4 patients)

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Denominator (b=10 patients) – Denominator Exclusions (c=2 patients) – *Denominator Exceptions (N/A)*

= 50.00%