



Roadmap for Quality Measurement in the Traditional Medicare Fee-for-Service Program













VISION FOR AMERICA:

Patient-centered, high quality care delivered efficiently.



QUALITY MEASURE GOALS:

- **Safety**—where care doesn't harm patients.
- **Effectiveness**—where care is evidence-based and outcomes-driven to better manage diseases and prevent complications from them.
- Smooth Transitions of Care—where care is well-coordinated across different providers and settings.
- **Transparency**—where information is used by patients and providers to guide decision-making and quality improvement efforts, respectively.
- **Efficiency**—where resources are used to maximize quality and minimize waste.
- **Eliminating Disparities**—where quality care is reliably received regardless of geography, race, income, language, or diagnosis.

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Introduction

Given that CMS policies have a transformative impact on the health care system, one fundamental tool that could assist CMS in improving the quality of care is the use of standardized quality measures. Standardized quality measures provide information about care that is accurate, reliable, and relevant in a patient-centered way. Regardless of setting or practitioner, such measures evaluate health care performance in a way that enables comparisons of how well health care is delivered.

This Roadmap for Quality Measurement sets forth the current state of quality measurement efforts within CMS, focusing on the traditional Medicare fee-for-service (FFS) program, and more importantly, provides a roadmap for the potential future direction of expanding and enhancing the implementation and use of quality measures. In general, CMS does not play a significant role in the development or endorsement of quality measures. In light of this fact, this paper is intended to serve as a guide to quality measure developers and endorsers, other quality improvement stakeholders, and the Congress towards specific areas that merit added focus and attention. The goal of this paper is to suggest a heuristic that might guide future CMS decisions in selecting and strategically implementing quality measures in the health care system.

To provide an overview, the next steps in quality measurement will need to focus on evidence-based measures that contain more information relating to:

- · Health outcomes for the patient;
- · Transition of the patient across settings; and
- · Resources used to treat the patient.

This information would focus heavily on the specific conditions having a high impact on the Medicare program by virtue of being largely prevalent in the beneficiary population:

- · Heart Disease
- Diabetes
- Joint Disease/Arthritis
- Cancer
- · Renal Disease
- · Pneumonia and Influenza
- · Chronic Obstructive Pulmonary Disease

At the same time, CMS should continue to value and take interest in additional measures that capture other topics such as the following:

- · Patient safety
- · Patient experience
- · Health disparities
- · End-of-life and palliative care
- Prevention
- · Efficient use of health information technology (HIT)

Most importantly, quality measures should:

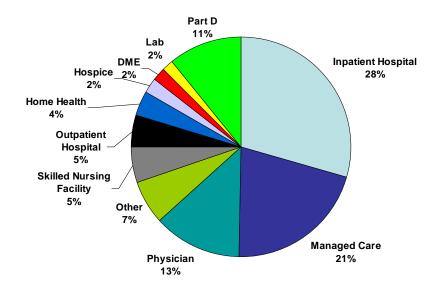
- Support quality improvement activities by providing quality measurement information that will enable outcomes-driven, evidence-based care to be provided to all patients and address current disparities;
- Enhance information transparency, making it available and more user-friendly for patients, payers, and providers alike; and
- · Align financial incentives to reward providers that work together to deliver high quality care.

CMS Current Environment of Quality Measures

For 2008, Medicare spent \$450.5 billion providing care to 43 million Medicare beneficiaries. The chart below indicates the percent of total dollars the Medicare program spends in various settings of care. Notably, CMS currently tracks quality measures in most of these settings, with the exception of only three: labs, durable medical equipment (DME), and hospice. Even in these settings of care for which quality measures are not presently available, certification requirements ensure that care is delivered appropriately. CMS has thus far used quality measures to make provider and plan performance public and to link payment incentives to reporting on measures. It will soon extend the use of quality measures as a tool to link payment to actual performance.

Almost All Settings Are Covered by Quality Measures

Percentage of 2008 Total Expenditures by Setting (\$450.5 B), includes Medicare Advantage



Source: 2008 Trustees' Report

Note: The percentages are calculated based on total Medicare spending, including Medicare Advantage.

Currently, CMS has more than 375 quality measures in place. Many more are in various stages of development and may be implemented in the coming years. Measures already in use are mostly categorized by setting and type and apply to the following care delivery settings: Hospital Inpatient, Hospital Outpatient, Physicians and other eligible professionals (through the Physician Quality Reporting Initiative (PORI)), Nursing Home, Home Health, Dialysis (End Stage Renal Disease, or ESRD), the Part D Prescription Drug Benefit administered by private health plans (Part D), and Medicare Advantage (MA). Some of these are not true "settings" in that they do not denote an actual place in which care is rendered (for example, Part D and MA are programs, while PQRI pertains to physician and other professional behavior regardless of actual setting). However, they are useful for categorization purposes.

Number of Quality Measures by Setting, Current²

Hospital Inpatient	60
Physicians and other Professionals (PQRI)	153
Nursing Home	19
Home Health	12
ESRD	22
Part D	23
Medicare Advantage	59^{3}

The measure types currently in use include: Efficiency, Structure, Process, Intermediate Outcome, Outcome, and Patient Centeredness.

- Efficiency measures might more aptly be called "Resource Use" measures. They are designed to more accurately analyze and combine resource use with quality.
- Structure measures track whether a particular mechanism or system is in place (for example, HIT tools such as electronic health records, personal health records, and eprescribing systems).
- Process measures track the performance of a particular action, such as prescribing a beta blocker to patients with a diagnosis of MI.
- Intermediate outcome measures target a test result (for example, HgbA1C value < 7).
- Outcome measures track the morbidity and mortality resulting from a disease, such as a diabetic foot ulcer.
- Patient centeredness measures reflect the patient's experience with systems and providers.

¹ An inventory of the current CMS quality measures is found in Appendix A.

² Please note that these tallies include measures implemented through various CMS initiatives (for example, RHQDAPU or the Quality Improvement Organization (QIO) program) in addition to individually tallying some measures that are collectively packaged as a single reference in proposed or final regulations (for example, the measures arising from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)). In addition, the ESRD tally reflects the new measures to take effect February 2009.

³ Please note that this tally includes five quality measures implemented only for the Medicare Advantage Special Needs Plans.

Measure Inventory⁴

Of the quality measures currently in use by CMS, 153 address physician and other professional behavior as part of the 2009 PQRI measure set. Within these PQRI measures, the overwhelming majority of services reflected by the measures occur in the outpatient clinic setting which is not an official "setting" for classification purposes. A smaller portion of these services occur elsewhere, mostly in the inpatient hospital setting.

More broadly, while the current categorizations align with the Medicare payment structures (measures for Hospital Inpatient roughly correlates with Part A, PQRI with Part B, etc.), they do not reflect the realities of how care is rendered. For instance, the category of Hospital Inpatient measures does not encompass all measures relating to this setting, given that some PQRI measures actually occur in the inpatient hospital environment yet are classified under the PQRI category. This reflects the fact that PQRI addresses physician and professional behaviors regardless of where the care is rendered (hospital or clinic) as these services are reimbursed under Part B. Categorizing the quality measures in this manner, adhering to the paradigm of the payment silos rather than the reality of care delivery settings, perpetuates a fragmented approach to care.

As far as measure types, there are a large number of process measures, the classic illustration of which is the performance of a specific test. Only seven current measures relate to resource use. Nine are structural measures, which address systems for the provision of services, such as HIT or facility policies. As for patient experience, measures within MA and Part D address this issue more often than the FFS measures do, tracking performance of plans in patient service and satisfaction. There are some comparable efforts within FFS through the CAHPS (Consumer Assessment of Healthcare Providers and Systems) survey, which collects information on access to care for FFS beneficiaries. The FFS program also includes measurement of patients' perceived quality through HCAHPS, the hospital version of CAHPS.

To the extent that generalizations are possible, outcome, intermediate outcome, and resource use measures are currently under-emphasized. This effect is somewhat mitigated by their increased representation in the measures being developed for possible future implementation. Future measures efforts are likely to continue to shift focus onto these areas.

Few, if any, of the current measures encourage greater coordination of care and integration across different settings. They do not conceptualize care delivery across the full continuum. By not emphasizing this perspective, current quality measures are limited in their utility to tackle difficult challenges in the Medicare population such as chronic conditions and end-of-life conditions.

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⁴ The Office of the Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services conducted an inventory of quality measures across all its divisions, including CMS. This inventory is posted at http://www.qualitymeasures.ahrq.gov/hhs/hhsmeasures.aspx.

Quality Measures Types: The Future of Quality Measurement

Given the current inventory of measures, there are some measure types that could justify greater emphasis in future quality measure implementation. Each is defined and described here and a plan on how to incorporate them is discussed further below.

Outcomes Measures

As described above, outcomes measures look at the morbidity and mortality arising from a disease. While process measures address whether or not a particular action was performed, outcomes measures examine the end results of such actions. For example, in the case of diabetes, one measurable outcome might be the HgbA1C value (lab values such as these are termed "Intermediate Outcomes") and another might be the incidence of diabetic foot ulcers or diabetic ketoacidosis (these are plainly termed "Outcomes"). Rather than measure behaviors believed to produce a certain result, outcome measures directly measure the end result itself, as experienced by the patient.

By being more directly tied to results, they are also likely to be more relevant to and more easily understood and embraced by patients. While patients may not grasp the subtle consequences of certain interventions or treatments, they do understand the difference between good and bad outcomes. Combined with an analysis of resource use, outcome measures also enable an examination into the question of value. It becomes possible to analyze whether differences in resource use result in differences in the end outcome. This analysis informs the question of what amount of resource use produces the best value (correlated with improved outcomes). In these ways, outcome measures are a necessary foundation for quality measurement that impacts all three of the basic purposes set forth earlier (transparency, support of quality improvement activities, and incentives to encourage value-driven care).

Resource Use Measures

Resource use measures can look at the utilization patterns of specific providers by either measuring the use or overuse of a particular test or intervention or by comparing the relative resource use for an episode of care. An example of a broadly defined episode would be coronary artery disease, encompassing care in the primary care physician's clinic after initial diagnosis as well as an ensuing hospitalization for chest pain (to rule out MI) and subsequent outpatient follow-up visits for chronic management of angina. A more narrow example would be acute MI that might be limited to the hospital encounter and the follow-up clinic visit immediately afterwards. Episodes of care can thus be defined broadly or more narrowly, but even if the latter, would look at care beyond a single setting.

Some examples of the types of resource use that could be analyzed include the use of a CT scan to diagnose pneumonia (versus a standard chest x-ray) or the inappropriate use of antibiotics in cases of bronchitis. By risk adjusting and then comparing utilization of resources for one provider or episode against another for a similar disease and acuity of illness, one might

appreciate what an appropriate level of utilization might be. Combining this look at resource use with other quality measures such as outcomes, one can assess the efficiency of care being rendered, a crucial step in achieving greater value in health care purchasing.

Like the outcomes measures, resource use measures could play an invaluable role in improving value, fostering greater transparency, and supporting quality improvement pursuits. Such information is critical to answering whether care yields value and identifying and eliminating unnecessary resource use that does not result in any incremental gain in quality. This attention to value-based resource use enhances transparency by producing information that resonates with patients, providers, and payers. Patients are spared tests and interventions that fail to improve outcomes and instead subject them to unnecessary risks and complications. Providers receive greater insights into their practice patterns, realizing where certain resource use may not produce improvements in quality or outcome and receiving the information necessary to support their own quality improvement efforts.

Measures Focusing on Transitions

When combined with the proper incentives, whether financial or non-financial, the use of quality measures could foster better transitions and coordination of care in two ways. First, such "transition measures" may expand the unit of measurement, whether the timeframe or the number of actors. For instance, instead of measures that look only within a specific hospitalization, a transition measure looks at a specified period of time before and/or after that hospitalization such as hospital readmission or 30 day mortality, events taking place outside the timeframe of the actual hospitalization.

In addition to expanding the timeframe, measures may also expand the scope to include the behaviors of multiple actors. Rather than addressing the behavior of a hospital alone (e.g. whether a flu vaccine was administered, whether appropriate prophylaxis for deep venous thrombosis (DVT) was used), such measures incorporate the behavior of another actor rendering care along the continuum. These measures examine areas where multiple actors play a role in bringing about a particular result. Examples include topics such as bed sores/ulcers where the hospital and nursing home might share responsibility or follow up clinic visits after discharge where the hospital and the physician might need to coordinate efforts.

Quality measures can also focus on actions that impact transitions and coordination of care without expanding the scope of measurement. Some behaviors fall completely within the domain of a single setting or entity (whether a facility or an individual provider) yet influence the transition of care. For example, combining such measures with appropriate incentives might encourage a hospital to send a discharge summary to an outpatient physician or to perform medication reconciliation upon discharge. Although one entity or setting (in this case, the hospital) controls such actions, it nevertheless impacts the overall smooth coordination and transition of care.

Quality Improvement Organizations (QIO) 9th Statement of Work

CMS has already begun looking at such issues in the Care Transitions Project within the QIO 9th Statement of Work. This project tasks QIOs in 14 states to work to coordinate care and promote seamless transitions across settings, including from the hospital to home, skilled nursing care, or home health care. It also specifically focuses on reducing unnecessary readmissions to hospitals that may increase risk or harm to patients and cost to Medicare. Measures arising from this scope of work are geared towards achieving these goals of improved transitions of care and greater coordination among providers. In essence, these measures are breaking down the traditional silos and shifting focus to the continuum of care.

Focusing on coordination and integration across the care delivery system could allow for greater quality with fewer "hand-off" errors and less unnecessary, duplicative testing. It would likely mirror more accurately a patient's actual experience and could resonate more with them. With a broader view, it becomes possible to view a patient's care in context and address issues that stretch beyond any single care setting or entity. This is especially true for chronic diseases and end-of-life issues, accounting for a large number of Medicare beneficiaries.

The Road to Greater Coordination and Integration of Care

By re-directing attention to these measures and marrying this measurement effort with the right incentives, it is possible to drive change in how health care professionals and entities think about and deliver care. To focus on chronic conditions and end-of-life conditions and the particular challenges that they present, it would be important to emphasize the importance of coordination and integration of care across many different settings and professionals. Especially for the highest impact conditions, focus would be prioritized on specific ways in which care can be better coordinated for the beneficiaries dealing with them. By volume and cost, some high impact conditions for the CMS populations are, in no particular order:

- · Heart disease (Coronary Artery Disease and Congestive Heart Failure)
- Diabetes
- Joint disease/Arthritis
- Cancer
- · Renal disease
- · Pneumonia and Influenza
- Chronic Obstructive Pulmonary Disease

Collectively, these conditions have a considerable impact: in 2006, they accounted for 44% (\$123.5 billion) of total FFS spending across all settings. Given their significance, they represent a reasonable starting point for areas on which greater focus can be directed in the quality measurement realm.

Many beneficiaries have multiple co-morbidities, carrying more than one of these conditions. Care for such patients is particularly challenging and cannot focus merely on one disease state. These patients frequently land in hospitals for exacerbations of one or more of their conditions, and require a delicate balancing of multiple treatment plans from multiple health care practitioners. For this cohort, it would be especially important to focus on ways in which care can be better coordinated across settings and practitioners. Within this reality, from a quality

measurement standpoint, it is important to look at how care is received by patients with these high impact conditions in order to understand how to improve care overall.

Rethinking the Measures

To move to a more value-based purchasing system, a premium would need to be placed on evidence-based measures that would have the greatest impact in improving quality and value, rather than focusing on developing and endorsing a large number of measures that may be easiest to produce or most readily accessible, such as process measures. Such measures could also contribute to efforts to address disparities that currently exist across different patient populations and geographic areas. Keeping in mind these preferences, CMS will use the following construct to guide its selection and use of quality measures going forward.

Condition-specific Measures

To improve the quality of care delivered to the Medicare population, the majority of new quality measures would need to be condition-specific, focusing on how care is received by patients with one or more of the high impact conditions that affect beneficiaries. Within these condition-specific measures, priority would need to be placed on filling current voids in particular settings, with the ultimate goal of having measures that focus on the same issues for a particular condition in each delivery setting.

For example, for CHF, one measure might be to monitor a patient's weight daily. This behavior should be reflected as a measure in the hospital setting, the outpatient clinic setting (through PQRI), and the nursing home setting. By extending this focus across all settings, every contemplated setting and practitioner across the care continuum is encouraged to think about the same management issues for that disease. In this way, each disease will have a set of measures that track care across the care continuum, honing in on the key elements of care for that specific disease (fluid management for CHF, lipid management for coronary artery disease, etc.). With an effective system of incentives in place, disease-specific measures can encourage care that pays attention to appropriate interventions for particular conditions regardless of setting, ultimately driving an improvement in quality.

Among these condition-specific measures, the majority would focus on outcomes, resource use, and transitions of care. Such measures could collectively provide useful information to support quality improvement activities, focus attention on purchasing greater value, and enhance transparency by presenting information in a more patient-centric manner. Through these means, these measure types will facilitate greater focus on coordination and transitions of care, particularly important for the high impact conditions identified here.

Condition-independent Measures

Even with a future emphasis on condition-specific measures as discussed above, general measures applicable across many disease states should not be neglected. Although accounting for a minority of the new measures, these measures would nevertheless focus sufficient attention to some necessary objectives. For instance, patient safety measures such as fall prevention or sterile central line insertion techniques merit continued attention. Prevention measures such as smoking cessation, vaccines, or DVT prophylaxis are also important. Likewise, general care management and transition measures such as discussion of advanced directives and care plans and medication reconciliation also carry importance beyond any single disease. Quality measures that encourage desired widespread structural changes such as HIT would also fit into this category. Likewise, some outcome measures, resource use measures, and transition measures might apply broadly across many different disease conditions as well.

Using the Quality Measures

Each of the high impact conditions could have quality measures addressing unique components of care related to that particular condition at every contemplated setting of care. For example, CHF-relevant clinical considerations like sodium intake, body weight, or monitoring renal function could be reflected in measures across all settings where a CHF patient might receive care. With all of these entities incentivized to similarly focus on the same interventions, CHF-relevant care will be continuous and consistent across the spectrum without gaps in management.

At the same time, CMS could define episodes of care by selecting batches of measures pertaining to care within the boundaries of a complete episode. As the quality measure landscape gets populated, CMS would have a more complete pool of measures from which to select what belongs in a given episode. This selection process could be guided by what settings are typically involved in the care for a particular condition or commonly seen group of conditions (e.g. diabetes and heart disease). These episodes could look at ultimate outcomes, resource use, transition measures, and some process or structure measures, all directly relevant for a specific condition or a frequently occurring constellation of conditions (acknowledging the multiple comorbidities seen in many beneficiaries).

Collecting and grouping these measures could assist in outlining some possible episodes that can be considered as a new unit of measurement. CMS, with the assistance of the QIOs and through ongoing demonstration projects, might further define the episodes of care for the high impact conditions as well as combinations thereof. These new episode units could then be used to either analyze resource use (as the denominator in the consideration of how much utilization of a particular resource is appropriate per unit) or to reform payment design by reimbursing per each episode of bundled services rather than reimbursing separately for care rendered within each silo.

CMS acknowledges that there is still much work to be done in this area. Because the vast majority of Medicare beneficiaries have multiple co-morbid conditions, the system of care delivery is rife with complexity, making the grouping of interactions of care to define an episode particularly complicated. Many challenges remain: for example, resolving complex attribution issues and establishing risk adjustment tools to take into account the co-morbid states across an

episode. Nevertheless, with a re-tooled quality measurement system that prioritizes coordination and transition issues across the continuum of care, CMS could be better situated to meet these challenges.

Longer Term: Using Episodes as the New Unit of Measurement

More refined and developed episodes of care for the high impact conditions and co-morbidities could drive further analysis into resource use for different practitioners, risk-adjusted and normalized per episode. Such a risk adjusted analysis could ultimately allow a more accurate comparison across practitioners by standardizing the unit on which they are measured (i.e. every practitioner will be held accountable to the same risk-adjusted episode). At the same time, the analysis could take into account resource use data that define an optimal utilization level above which there is no incremental quality benefit and below which there is significant quality loss.

Likewise, a risk adjusted episode unit could allow for bundled payment systems, where costs related to multiple services across multiple settings would factor into a single payment rate. CMS could continue to explore the operational realities of such a system through demonstration projects or legislatively authorized payment reform. Again, by standardizing all care for a particular condition to a common unit of measure, CMS could arrive at an optimal reimbursement given a specific condition or set of conditions. By getting paid this optimal amount, health care providers would have proper incentives to render care more efficiently.

Establishing such episodes of care could also bolster the agency's public reporting initiatives. Rather than post information based on the existing silo framework, CMS could post episode-based information, accounting for the coordination and transitions that occur across the full continuum of care experienced by the patient. The posting of episode-based information could be easier for patients to understand and could provide a powerful non-financial incentive for health care actors to efficiently improve care.

Defining an episode of care and analyzing utilization and payment based on such a unit could also improve the value of what is being purchased. It could assist quality improvement activities by streamlining care and eliminating the unnecessary resources that do not improve outcomes and may actually result in complications and risk. Furthermore, it could enhance transparency by packaging services to be evaluated and reported. CMS could also drastically improve the care that accounts for a large volume and cost of its programs.

Conclusion

The CMS quality measure enterprise is the foundation for the agency to meet some of the major challenges facing it and the health care system at large. Today, CMS uses quality measurement as a tool to support quality improvement programs, improve transparency, and enhance value, ultimately resulting in better care.

In the future, with an emphasis on viewing care across the continuum in which it takes place, CMS could improve the coordination and integration of care beyond a single practitioner or setting. This coordination could be particularly important in addressing the challenges presented by the high impact (by cost and volume) clinical conditions, especially given that many beneficiaries have more than one of these conditions.

CMS has the potential to use a re-directed quality measure initiative to expand the notions of care delivery across the continuum. It could further define episodes of care and use this as a new unit of measurement to spark further developments in resource use, bundled payment systems, and public reporting of information that is useful to both patients and payers and could help to improve care across the health care system.

Appendix A: Current CMS Measures Inventory⁵

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1		_			AMI-1 Aspirin at arrival			Х				Current		
1					AMI-2 Aspirin prescribed at discharge			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular	AMI/CAD	AMI-3 ACE/ARB for LVSD			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular		AMI-4 Adult smoking cessation advice/counseling			х				Current	MR	
1	•			AMI/CAD	AMI-5 Beta blocker prescribed at discharge			х				Current	MR	
1	Hospital IP	APU	Cardiovascular	AMI/CAD	AMI-6 Beta blocker at arrival			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular		AMI-7a Fibronolytic agent received within 30 minutes of hospital arrival			х				Current	MR	
1	Hospital IP	APU	Cardiovascular		AMI-8 a Timing of Receipt of Primary Percutaneous Coronary Intervention (PCI)			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular		Card Surg - Participation in a Systematic Database for Cardiac Surgery		х					Current		Measure in final IPPS rule
1	Hospital IP	APU	Health Care Delivery		HCAHPS - Cleanliness of hospital (individual item)						х	Current	survey	
1	Hospital IP	APU	Health Care Delivery		HCAHPS - Communication about medicines (composite)						х	Current	survey	9th SOW measure pertains only to 65+

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⁵ This chart is current as of January 2009. References to the "final IPPS rule" or the "final OPPS rule" are regarding the 2009 rules. The ESRD measures listed as "current" reflect the measures that will take effect February 2009 and will be collected via the CROWN Web system.

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Communication with doctors (composite)						х	Current	survey	
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Communication with nurses (composite)						х	Current	survey	
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Discharge information (composite)						х	Current	survey	9th SOW measure pertains only to 65+
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Overall rating of hospital care (global item)						х	Current	survey	
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Overall recommendation (global item)						х	Current	survey	
1	Hospital IP	APU	Pain	Patient satisfaction	HCAHPS - Pain control (composite)						х	Current	survey	
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Quietness of hospital (individual item)						х	Current	survey	
1	Hospital IP	APU	Health Care Delivery	Patient satisfaction	HCAHPS - Responsiveness of hospital staff (composite)						х	Current	survey	
1	Hospital IP	APU	Cardiovascular	Heart Failure	Heart Failure (HF) 30-Day Risk Standardized Readmission Measure					х		Current	claims	Measure in final IPPS rule
1	Hospital IP	APU	Cardiovascular	Heart Failure	HF-1 Discharge instructions			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular	Heart Failure	HF-2 Left ventricular function assessment			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular	Heart Failure	HF-3 ACE/ARB for LVSD			Х				Current	MR	
1	Hospital IP	APU	Cardiovascular	Heart Failure	HF-4 Adult smoking cessation advice/counseling			х				Current	MR	
1	Hospital IP	APU	Cardiovascular	Mortality	MORT-30-AMI Acute Myocardial Infarction 30- day mortality Medicare patients					Х		Current	claims	
1	Hospital IP	APU	Cardiovascular	Mortality	MORT-30-HF Heart Failure 30-day mortality Medicare patients					х		Current	claims	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1			Respiratory	Mortality	MORT-30-PN Pneumonia 30-day mortality Medicare patients					Х		Current	claims	
1			Patient Safety	Mortality	NS - Failure to Rescue					Х		Current	claims	Measure in final IPPS rule
1			Respiratory	Pneumonia	PN-1 Oxygenation Assessment			Χ				Retired		Retired 1/1/09
1	Hospital IP	APU	Respiratory	Pneumonia	PN-2 Pneumococcal vaccination status			Χ				Current	MR	
1	Hospital IP	APU	Respiratory	Pneumonia	PN-3b Blood culture performed before first antibiotic received in hospital			Х				Current	MR	
1	Hospital IP	APU	Respiratory	Pneumonia	PN-4 Adult smoking cessation advice/counseling			х				Current	MR	
1			Respiratory	Pneumonia	PN-5c Timing of receipt of initial antibiotic following hospital arrival			Х				Current	MR	
1	Hospital IP	APU	Respiratory	Pneumonia	PN-6 Appropriate initial antibiotic selection			Χ				Current	MR	
1	Hospital IP	APU	Respiratory	Pneumonia	PN-7 Influenza vaccination status			Х				Current	MR	
1	Hospital IP	APU	Surgery	Mortality	QI - Abdominal aortic aneurysm (AAA) mortality rate (with or without volume)					х		Current	claims	Measure in final IPPS rule
1	Hospital IP	APU	Patient Safety	Complications	QI - Accidental puncture or laceration					Х		Current	claims	Measure in final IPPS rule
1	Hospital IP	APU	Patient Safety	Complications	QI - Complication/patient safety for selected indicators (composite)					х		Current	claims	Measure in final IPPS rule
1			Patient Safety	Complications	QI - Death among surgical patients with treatable serious complications					х		Current	claims	Measure in final IPPS rule
1			Bone & Joint	Mortality	QI - Hip fracture morality rate					Х		Current	claims	Measure in final IPPS rule
1	Hospital IP	APU	Patient Safety	Complications	QI - latrogenic pneumothorax, adult					Х		Current	claims	Measure in final IPPS rule
1	Hospital IP	APU	Surgery	Mortality	QI - Mortality for Selected Medical Conditions (Composite)					х		Current	claims	Measure in final IPPS rule
1	Hospital IP	APU	Surgery	Mortality	QI - Mortality for selected surgical procedures (composite)					х				Measure in final IPPS rule
1	Hospital IP	APU	Patient Safety	Complications	QI - Postoperative wound dehiscence					Х		Current	claims	Measure in final IPPS rule

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP	APU	Cardiovascular	Perioperative Care	SCIP Card-2 Surgery Patients on Beta Blocker Therapy Prior to Admission Who Received a Beta Blocker During the Perioperative Period			x				Current	MR	Measure in final IPPS rule
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-Inf-1 Prophylactic antibiotic received within 1 hour prior to surgical incision			х				Current	MR	
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-Inf-2 Prophylactic antibiotic selection for surgical patients			х				Current	MR	
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-Inf-3 Prophylactic antibiotics discontinued with 24 hours after surgery end time			х				Current	MR	
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-Inf-4 Cardiac Surgery Patients with Controlled 6AM Postoperative Serum Glucose				х			Current	MR	
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-Inf-6 Surgery Patients with Appropriate Hair Removal			х				Current	MR	
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-VTE-1 Venous thromboembolism (VTE) prophylaxis ordered for surgery patients			х				Current	MR	
1	Hospital IP	APU	Surgery	Perioperative Care	SCIP-VTE-2 VTE prophylaxis within 24 hours pre/post surgery			х				Current	MR	
1	Hospital IP	QIO	Chronic & Elder Care	Transitions	9th SOW - 0-6 Percentage of patient transitions within the specified geographic area for which a CARE instrument was used.			x				Current		

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP	QIO	Patient Safety	Hospital Acquired Infections	9th SOW - MRSA Infection Rate					Х		Current	claims	
1	Hospital IP	QIO	Patient Safety	Hospital Acquired Infections	9th SOW - MRSA Transmission Rate					х		Current	claims	
1	Hospital IP	QIO	Chronic & Elder Care	Transitions	9th SOW - O-3 Percentage of patient care transitions (FFS Medicare), in the specified geographic area, for which implemented and measured interventions show improvement			x				Current		
1	Hospital IP	QIO	Cardiovascular	AMI/CAD	9th SOW 0-5a AMI Discharge and All-Cause Readmission Rates					Х		Current		
1	Hospital IP	QIO	Respiratory	Pneumonia	9th SOW 0-5c Pneumonia Discharge and All- Cause Readmission Rates					Х		Current		
1	Hospital IP	QIO	Chronic & Elder Care	Transitions	9th SOW -O-2 Percentage of patients discharged to community are readmitted within 30 days who are seen by a physician between discharge and readmission					X		Current		
1	Hospital IP	QIO	Chronic & Elder Care	Transitions	9th SOW -O-4 Percentage of patients from the specified geographic area re-hospitalized within 30 days of discharge from an acute care hospital					x		Current		
1	Hospital IP	QIO	Patient Safety	Pressure Ulcer	9th SOW Patients With Hospital-Acquired Pressure Ulcers					Х		Current	claims	
1	Hospital IP		Cardiovascular	Vascular	AAA stratified by open and endovascular methods					х		Future	STS DB	Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP		Patient safety		Abduction of a patient of any age					Χ		Future		Measure in IPPS final rule for future use
1	Hospital IP		Health Care Delivery	Access	Admit Decision Time to ED Departure Time for Admitted Patients			х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Anti-lipid Treatment at Discharge			х				Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Anti-platelet Medication at Discharge			х				Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety- other	Any incident in which a line designated for oxygen or other gas to be delivered to a patient contains the wrong gas or is contaminated by toxic substances					x		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety		Any instance of care ordered by or provided by someone impersonating a physician, nurse, pharmacist, or other licensed health care provider					x		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Beta Blockade Therapy at Discharge			х				Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Vascular	Carotid Endarterectomy			^	_	_	ᅱ	Future	0.000	Measure in IPPS final rule for future use
	Hospital IP				Catheter-Associated Urinary Tract Infection (UTI)					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Complications	Central Line-Associated Blood Stream Infections					х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cancer	Breast Cancer	College of American Pathologists breast cancer protocol			х				Future		Measure in IPPS final rule for future use
1	Hospital IP		Cancer	Colorectal Cancer	College of American Pathologists Colon and rectum protocol			х				Future		Measure in IPPS final rule for future use
1	Hospital IP		Cancer	Cancer - other	Completeness of pathologic reporting			х				Future		Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP		Patient safety	Patient safety-othe	Death or significant injury of a patient or staff member resulting from a physical assault (i.e., battery) that occurs within or on the grounds of health care facility					x		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Deep Sternal Wound Infection Rate					х		Future	STS DB	Measure in IPPS final rule for future use
	Hospital IP		Cardiovascular	VTE-PE	Deep Vein Thrombosis (DVT)/Pulmonary Embolism (PE)					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Mental health	Cognitive impairment	Delirium					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Diabetes	Patient safety- other	Glycemic Control - Diabetic Ketoacidosis, Nonketotic Hypersmolar Coma, Hypoglycemic Coma					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	AMI/CAD	Heart Attack (AMI) 30 - Day Risk Standardized Readmission Measure					х		Current	claims	Measure in OPPS final rule
1	Hospital IP			Patient safety- other	latrogenic Pneumothorax					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Mortality	Intraoperative or immediately post-operative death in a normal health patient (defined as a Class 1 patient for purposes of the American Society of Anesthesiologists patient safety initiative)					X		Future		Measure in IPPS final rule for future use
1	Hospital IP		Infectious Disease	Hospital acquired infections	Legionnaires' Disease					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Vascular	Lower extremity bypass Median Time from ED Arrival to ED		\Box	-	\Box	Х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Health Care Delivery	Access	Departure for Admitted ED Patients			х				Future	MR	Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP		Health Care Delivery	Access	Median Time from ED Arrival to ED Departure for Discharged ED Patients			х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Hospital acquired infections	Methicillin-Resistant Staphylococcus aureus (MRSA)					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Falls	Patient death associated with a fall while being cared for in a health care facility					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety- other	Patient death or serious disability associated with a burn incurred from any source while being cared for in a health care facility Patient death or serious disability associated with a hemolytic reaction due to the administration of ABO-incompatible flood or					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	other Patient safety-	blood products Patient death or serious disability associated with a medication error (e.g., error involving the wrong drug, wrong dose, wrong patient, wrong time, wrong rate, wrong preparation, or wrong route of administration)					X		Future		Measure in IPPS final rule for future use
1	Hospital IP			other	Defined death and advantage of the life control of					х	_	Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety- other	Patient death or serious disability associated with an electric shock while being cared for in a healthcare facility							Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety- other	Patient death or serious disability associated with hypoglycemia, the onset of which occurs while the patient is being cared for to a health care facility					x		Future		Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
					Patient death or serious disability associated with intravascular air embolism that occurs while being cared for in a healthcare facility.									
1	Hospital IP		Patient safety	Complications						Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety- other	Patient death or serious disability associated with patient elopement (disappearance) for more than four hours.					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety- other	Patient death or serious disability associated with the use of contaminated drugs, devices, or biologics provided by the healthcare facility					х		Future		Measure in IPPS final rule for future use
			Patient safety		Patient death or serious disability associated with the use of restraints or bedrails while being cared for in a health care facility									Measure in IPPS final rule for future use
1	Hospital IP		Patient salety		Patient death or serious disability associated with use or function of a device in patient care in which the device is used or functions other than					X		Future		Measure III IFFS IIIIai fule foi future use
1	Hospital IP		Patient safety	Patient safety- other	as intended					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Complications	Patient death or serious disability due to spinal manipulative therapy					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Falls	Patient Falls Prevalence					Χ		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Falls	Patient Falls with Injury					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Suicide	Patient suicide, or attempted suicide resulting in serious disability, while being cared for in a healthcare facility.					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cancer	Breast Cancer	Patients with early stage breast cancer who have evaluation of the axilla			х				Future		Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP		Respiratory	Pneumonia	Pneumonia (PN) 30-Day Risk Standardized Readmission Measure					х		Current	claims	Measure in OPPS final rule
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Postoperative Renal Insufficiency					х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Pre-operative Beta Blockade					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Pressure Ulcer	Pressure Ulcer Prevalence and Incidence by Severity					х		Future	claims	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Prolonged Intubations					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Surgery - other	Retention of a foreign object in a patient after surgery or other procedure					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Mortality	Risk-Adjusted Mortality for Aortic Valve Replacement and CABG Surgery					х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Mortality	Risk-Adjusted Operative Mortality for Aortic Valve Replacement					х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Mortality	Risk-Adjusted Operative Mortality for CABG					х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Mortality	Risk-Adjusted Operative Mortality for Mitral Valve Replacement/Repair					х		Future	STS DB	Measure in IPPS final rule for future use
	Hospital IP		Cardiovascular	Perioperative Care	SCIP Cardiovascular 3 - Surgery Patients on a Beta Blocker Prior to Arrival Receiving a Beta Blocker on Postoperative Days 1 and 2			x				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Surgery	Perioperative Care	SCIP Infection 8 - Short Half-life Prophylactic Administered Preoperatively Redosed Within 4 Hours after Preoperative Dose			x				Future	MR	Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP		Patient safety		Serious reportable events in healthcare (never events)					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Patient safety-othe	Sexual assault on a patient within or on the grounds of healthcare facility					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety		Stage 3 or 4 pressure ulcers acquired after admission to a health care facility					Х		Future	claims	Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Hospital acquired infections	Staphylococcus aureus Septicemia					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Stroke	STK-1 DVT Prophylaxis			Χ				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Stroke	STK-2 Discharged on Antithrombotic Therapy			х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular		STK-3 Patients with Atrial Fibrillation Receiving Anticoagulation Therapy			Х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Stroke	STK-5 Antithrombotic Medication by End of Hospital Day Two			Х				Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Stroke	STK-7 Dysphasia Screening			Χ				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Stroke/CVA			Х				Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Surgery - other	Surgery performed on the wrong body part					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Surgery - other	Surgery performed on the wrong patient					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	Cardiovascular surgery	Surgical Reexploration					х		Future	STS DB	Measure in IPPS final rule for future use
1	Hospital IP		Surgery	Hospital acquired infections	Surgical Site Infections following Elective Procedures Total Knee Replacement, Laparoscopic gastric Bypass, Litigation and Stripping of Varicose Veins					х		Future		Measure in IPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
1	Hospital IP		Cardiovascular	Hospital acquired infections	Surgical Site Infections-Mediastinitis after Coronary Artery Bypass Graft (CABG)					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Patient safety	Hospital acquired infections	Vascular Catheter-Associated Infection					Х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Respiratory	Hospital acquired infections	Ventilator-Associated Pneumonia (VAP)					х		Future		Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular		VTE-1: VTE Prophylaxis			Х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular		VTE-2: VTE Prophylaxis in the ICU			х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular		VTE-4: Patients with overlap in anticoagulation therapy			х				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	VTE-PE	VTE-5/6: (as combined measure) patients with UFH dosages who have platelet count monitoring and adjustment of medication per protocol or nomagram			x				Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Cardiovascular	VTE-PE	VTE-7: Discharge instructions to address: follow-up monitoring, compliance, dietary restrictions, and adverse drug reactions/interactions			x				Future		Measure in proposed IPPS rule for Current; Not selected for Current
1	Hospital IP		Cardiovascular	VTE-PE	VTE-8: Incidence of preventable VTE					Х		Future	MR	Measure in IPPS final rule for future use
1	Hospital IP		Health Care Delivery		Avg Length of Stay Coupled with Global Readmission Measure - C. dif associated disease					х		Future		Measure in final IPPS rule
1	Hospital IP		Patient safety	Surgery - other	Wrong surgical procedure on a patient			Х				Future		Measure in final IPPS rule
1	Hospital IP		Cancer		Hospital Inpatient Cancer Care Measures: Surgical resection includes at least 12 nodes			x				Future		Measure in IPPS final rule for future use
					Inpatient Diabetes Care Measures: Healthcare Associated Infection - Surgical Site Infections								_	
1	Hospital IP		Diabetes							Χ		Future		Measure in IPPS final rule for future use
2	Hospital OP	APU	Cardiovascular	AMI/CAD	01 AMI Median Time to Fibrinolysis			Х				Current	MR	Measure in OPPS final rule

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
2	Hospital OP	APU	Cardiovascular	AMI/CAD	02 AMI Fibrinolytic Therapy Received Within 30 Minutes			х				Current	MR	Measure in OPPS final rule
_	Hospital OP			AMI/CAD	03 AMI Median Time to Transfer to Another Facility for Acute Coronary Intervention			х				Current	1411 (Measure in OPPS final rule
2	Hospital OP				04 AMI Aspirin at Arrival			Х				Current	MR	Measure in OPPS final rule
2	Hospital OP	APU	Cardiovascular	AMI/CAD	05 Median Time to ECG			Х				Current	MR	Measure in OPPS final rule
2	Hospital OP	APU	Surgery	Perioperative Care	06 Perioperative - Antibiotic Timing			х				Current	MR	Measure in OPPS final rule
2	Hospital OP	APU	Surgery	Perioperative Care	07 Perioperative - Antibiotic Selection			х				Current	MR	Measure in OPPS final rule
2	Hospital OP	APU	Bone & Joint	Utilization	08 MRI Lumbar Spine for Low Back Pain			Х				Current		Measure in OPPS final rule
2	Hospital OP	APU	Cancer	Utilization	09 Mammography Follow-Up Rates			Χ				Current		Measure in OPPS final rule
2	Hospital OP	APU	Health Care Delivery	Radiology	10 Abdomen CT-Use of contrast material: - for diagnosis of calculi in the kidneys, ureter, and/or urinary tract - excluding calculi of the kidneys, ureter, and/or urinary tract	X						Current		Measure in OPPS final rule
2	Hospital OP	APU	Health Care Delivery	Radiology	11 Thorax CT-Use of Contrast Material	х						Current		
2	Hospital OP	APU	Cancer	Colorectal Cancer	Adjuvant Chemotherapy is Considered or Administered Within 4 Months of Surgery to Patients Under Age 80 with AJCC III Colon Cancer			x				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Cancer	Breast Cancer	Adjuvant Hormonal therapy for Patients with Breast Cancer			Х				Future		Measure in OPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
2	Hospital OP	APU	Mental health	Depression- Anxiety	Antidepressant Medication During Acute Phase for Patients with New Episode of Major Depression			Х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Respiratory	Pneumonia	Assessment of Mental Status for Community Acquired Pneumonia			х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Respiratory	Asthma	Asthma Pharmacological Therapy			Х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Cardiovascular	Stroke	Carotid Imaging Reports			Х				Future		Measure in OPPS final rule for future use
2			Bone & joint	Osteoporosis	Communication with the Physician Managing Ongoing Care Post Fracture			х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Cardiovascular	Stroke	CT or MRI Reports			Х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Diabetes	Hypertension	High Blood Pressure Control in Type 1 and 2 Diabetes Mellitus				Х			Future		Measure in OPPS final rule for future use
2			Diabetes	Cholesterol	Low Density Lipoprotein Control in Type 1 and 2 Diabetes Mellitus				Х			Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Bone & joint	Osteoporosis	Management Following a Fracture			Х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Health Care Delivery	Access	Median Time for ED Arrival to ED Departure for Discharged ED Patients			Х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Patient safety	Medication management	Medication Reconciliation			х				Future		Measure in OPPS final rule for future use
2		_	Cancer Bone & joint	Osteoporosis	Needle Biopsy to Establish Diagnosis of Cancer Precedes Surgical Excision/Resection Pharmacologic Therapy			X X				Future Future		Measure in OPPS final rule for future use Measure in OPPS final rule for future use
	`		Cancer	Breast Cancer	Radiation Therapy is Administered Within 1 year of diagnosis for Women Under Age 70 Receiving Breast Conserving Surgery for Breast Cancer			x				Future		Measure in OPPS final rule for future use

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
2	Hospital OP	APU	Chronic & Elder Care	Falls	Screening for Fall Risk			х				Future		Measure in OPPS final rule for future use
2	Hospital OP	APU	Bone & joint	Osteoporosis	Screening or Therapy for Women Aged 65 Years or Older			х				Future		Measure in OPPS final rule for future use
3	ASC		Surgery		Hospital Transfer/ Admission - Percentage of ASC patients who received IV antibiotics ordered for surgical site infection prophylaxis on time			x				Future	MR	
3	ASC		Patient safety		Patient Burn -Percentage of ASC admissions experiencing a burn prior to discharge					X		Future	MR	
3	ASC		Patient safety		Patient Fall -Percentage of ASC admissions experiencing a fall in the ASC.					Х		Future	MR	
3	ASC		Surgery	Perioperative care	Prophylactic Intravenous (IV) Antibiotic Timing			х				Future	MR	
3	ASC		Patient safety	Patient safety- other	Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant -Percentage of ASC admissions experiencing a wrong site, wrong side, wrong patient, wrong procedure, or wrong implant.					X		Future	MR	
			Diabetes		001 Hemoglobin A1C poor control				Х			Current	claims	
			Diabetes		002 DM: LDL control				Χ			Current		
4	Physician	PQRI	Diabetes	Hypertension	003 Blood pressure control				Х			Current	claims	
4	Physician	PQRI	Chronic & Elder Care	Falls	004 Screening for fall risk			Х				Retired	claims	Replaced by new measure(s)

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Cardiovascular	Heart failure	005 HF: ACE-I or ARB for LVSD							Current	claims	
4	Physician	PQRI	Cardiovascular		006 CAD: Oral antiplatelet therapy prescribed			х				Current	claims	
4	Physician	PQRI	Cardiovascular		007 Beta blocker therapy for patients with prior MI			х				Current	registry	
4	Physician	PQRI	Cardiovascular	Heart failure	008 Beta blocker therapy for LVSD			Х				Current	claims	
4	Physician	PQRI	Mental health		009 Antidepressant medication during acute phase for patients with new episode of major depression			Х				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	010 Stroke: CT or MRI reports			Х				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	011 Stroke: Carotid imaging reports			Х				Current	claims	
4	Physician	PQRI	HEENT	Eye care	012 Glaucoma: Optic nerve evaluation			Х				Current	claims	
4	Physician	PQRI	HEENT	Eye care	014 ARMD: Dilated macular examination			Х				Current	claims	
4	Physician	PQRI	Diabetes	Eye care	018 Documentation of presence or absence of macular edema and level of severity of retinopathy			х				Current	claims	
4	Physician	PQRI	Diabetes		019 Communication with the physician managing ongoing diabetes care			х				Current	claims	
4	Physician	PQRI	Surgery	Perioperative care	020 Timing of antibiotic prophylaxis-ordering physician			х				Current	claims	
4	Physician	PQRI	Surgery		021 Selection of prophylactic antibiotic			х				Current	claims	
4	Physician	PQRI	Surgery		022 Discontinuation of prophylactic antibiotic (non-cardiac procedures)			х				Current	claims	
4	Physician	PQRI	Surgery	Perioperative care	023 Venous thromboembolism (VTE) prophylaxis			Х				Current	claims	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician		Bone & joint	Osteoporosis	024 Communication with the physician managing ongoing care post-fracture			Х				Current	claims	
4	Physician	PQRI	Cardiovascular	AMI/CAD	028 Aspirin at arrival			Χ				Current	claims	
4	Physician	PQRI	Surgery		030 Timing of antibiotic prophylaxis- administering physician			х				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	031 DVT Prophylaxis for ischemic stroke or intracranial hemorrhage			Х				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	032 Discharged on antiplatelet therapy			Χ				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	033 Anticoagulant therapy for atrial fibrillation at discharge			х				Current	registry	
4	Physician	PQRI	Cardiovascular	Stroke	034 Tissue Plasminogen Activator (t-PA) considered			х				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	035 Screening for dysphagia			Χ				Current	claims	
4	Physician	PQRI	Cardiovascular	Stroke	036 Consideration of rehabilitation services			х				Current	claims	
4	Physician		Bone & joint	Osteoporosis	039 Screening or therapy for women aged 65 and older			х				Current		
4	Physician		Bone & joint		040 Management following fracture			Χ				Current	claims	
4	Physician	PQRI	Bone & joint	Osteoporosis	041 Pharmacologic therapy			Χ				Current	claims	
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	043 Use of internal mammary artery			х				Current	claims	
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	044 Pre-operative beta blocker			Х				Current	claims	
4	Physician	PQRI	Surgery		045 Discontinuation of prophylactic antibiotic (cardiac procedures)			Х				Current	claims	
4	Physician	PQRI	Patient safety	Medication management	046 Medication reconciliation			Х				Current	registry	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	End of life	Advance directives	047 Advance Care Plan			Х				Current	claims	
4	Physician	PQRI	Renal & GU	Incontinence	048 Assessment of presence or absence in women aged 65 years and older			Х				Current	claims	
4	Physician	PQRI	Renal & GU	Incontinence	049 Characterization of UI in women aged 65 years and older			х				Current	claims	
4	Physician	PQRI	Renal & GU		050 Plan of care for women aged 65 years and older			Х				Current	claims	
4	Physician	PQRI	Respiratory	COPD	051 Spirometry evaluation			Χ				Current	claims	
4	Physician	PQRI	Respiratory	COPD	052 Bronchodilator therapy			Χ				Current	claims	
		PQRI	Respiratory	Asthma	053 Pharmacologic therapy			Χ				Current	claims	
4	Physician	PQRI	Cardiovascular	AMI/CAD	054 Electrocardiogram performed - chest pain			х				Current	claims	
4			Cardiovascular		055 Electrocardiogram performed syncope			Х				Current	claims	
4	Physician	PQRI	Respiratory	Pneumonia	056 CAP: Vital Signs			Χ				Current	claims	
4			Respiratory		057 CAP: Assessment of oxygen saturation			Х				Current	claims	
4	Physician	PQRI	Respiratory	Pneumonia	058 CAP: Assessment of mental status			Х				Current	claims	
4	Physician	PQRI	Respiratory	Pneumonia	059 CAP: Empiric antibiotic			Χ				Current	claims	
4	Physician	PQRI	Respiratory	Asthma	064 Assessment of symptoms			Х				Current	claims	
4	Physician	PQRI	Infectious Disease	Childhood infectious diseases	065 Appropriate Treatment for Children with URI			х				Current	claims	
4	Physician	PQRI	Infectious Disease		066 Appropriate Testing for Children with Pharyngitis			х				Current	claims	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Cancer	Blood cancer	067 MDS: Baseline cytogenetic testing performed on bone marrow			х				Current	claims	
4	Physician	PQRI	Cancer	Blood cancer	068 MDS: Documentation of iron stores in patients receiving erythropoietin			х				Current	claims	
4	Physician	PQRI	Cancer	Blood cancer	069 Treatment with bisphosphonates - Multiple Myeloma			Х				Current	claims	
4	Physician	PQRI	Cancer	Blood cancer	070 Baseline flow cytometry - Chronic Lymphocytic Leukemia			х				Current	claims	
4	Physician	PQRI	Cancer	Breast cancer	071 Hormonal therapy for stage 1C-III, ER/PR positive breast cancer			х				Current	claims	
4	Physician	PQRI	Cancer	Colorectal cancer	072 Chemotherapy for stage III colon cancer patients			х				Current	claims	
4	Physician	PQRI	Cancer	Cancer - other	073 Plan for chemotherapy documented before chemotherapy administered			х				Retired	claims	Not selected for Current
4	Physician	PQRI	Cancer	Breast cancer	074 Radiation therapy recommended for invasive breast cancer patients who have undergone breast conserving surgery			х				Retired	claims	Not selected for Current
4	Physician	PQRI	Respiratory	Pneumonia	075 Prevention of Ventilator-Associated Pneumonia – Head Elevation			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Patient safety	Hospital acquired infections	076 Prevention of Catheter-Related Bloodstream Infections (CRBSI) – Central Venous Catheter Insertion Protocol			х				Current	claims	
4	Physician	PQRI	GI	GERD	077 Assessment of GERD Symptoms in Patients Receiving Chronic Medication for GERD			X				Retired	claims	Not selected for Current
4	Physician	PQRI	Renal & GU	ESRD	078 Vascular Access for Patients Undergoing Hemodialysis			Х				Retired	claims	Not selected for Current

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Renal & GU	ESRD	079 Influenza Vaccination in Patients with End Stage Renal Disease (ESRD)			х				Current	claims	
4	Physician	PQRI	Renal & GU	ESRD	080 Plan of Care for ESRD Patients with Anemia			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Renal & GU	ESRD	081 Plan of Care for Inadequate Hemodialysis in ESRD Patients			х				Current	registry	
4	Physician	PQRI	Renal & GU	ESRD	082 Plan of Care for Inadequate Peritoneal Dialysis			х				Current	registry	
4	Physician	PQRI	Infectious Disease	Hepatitis C	083 Testing of Patients with Chronic Hepatitis C (HCV) for Hepatitis C Viremia			х				Current	claims	
4	Physician	PQRI	Infectious Disease	Hepatitis C	084 Initial Hepatitis C RNA Testing			х				Current	claims	
4	Physician	PQRI	Infectious Disease	Hepatitis C	085 HCV Genotype Testing Prior to Therapy			х				Current	claims	
4	Physician	PQRI	Infectious Disease	Hepatitis C	086 Consideration for Antiviral Therapy in HCV Patients			х				Current	claims	
4	Physician	PQRI	Infectious Disease	Hepatitis C	087 HCV RNA Testing at Week 12 of Therapy			х				Current	claims	
4	Physician	PQRI	Infectious Disease	Hepatitis C	088 Hepatitis A and B Vaccination in Patients with HCV			Х				Retired	claims	Replaced by new measure(s)
4	Physician	PQRI	Infectious Disease	Hepatitis C	089 Counseling Patients with HCV Regarding Use of Alcohol			х				Current	claims	
4	Physician	PQRI	Infectious Disease	Hepatitis C	090 Counseling of Patients Regarding Use of Contraception Prior to Starting Antiviral Therapy			х				Current	claims	
4	Physician	PQRI	HEENT	Otitis	091 Acute Otitis Externa (AOE): Topical Therapy			х				Current	claims	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	HEENT	Otitis	092 Acute Otitis Externa (AOE): Pain Assessment			х				Current	claims	
4	Physician	PQRI	HEENT		093 Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use			X				Current	claims	
4	Physician	PQRI	HEENT	Otitis	094 Otitis Media with Effusion (OME): Diagnostic Evaluation – Assessment of Tympanic Membrane Mobility			х				Current	claims	
4	Physician	PQRI	HEENT	Otitis	095 Otitis Media with Effusion (OME): Hearing Testing			х				Current	claims	
4	Physician	PQRI	HEENT		096 Otitis Media with Effusion (OME): Antihistamines or Decongestants – Avoidance of Inappropriate Use			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	HEENT	Otitis	097 Otitis Media with Effusion (OME): Systemic Antimicrobials – Avoidance of Inappropriate Use			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	HEENT	Otitis	098 Otitis Media with Effusion (OME): Systemic Corticosteroids – Avoidance of Inappropriate Use			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Cancer		099 Breast Cancer Patients who have a pT and pN Category and Histologic Grade for Their Cancer			х				Current	claims	
4	Physician	PQRI	Cancer	Colorectal cancer	100 Colorectal Cancer Patients who have a pT and pN Category and Histologic Grade for Their Cancer			х				Current	claims	
4	Physician	PQRI	Cancer	Prostate Cancer	101 Appropriate Initial Evaluation of Patients with Prostate Cancer			Х				Retired	claims	Not selected for Current

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Cancer	Prostate Cancer	102 Inappropriate Use of Bone Scan for Staging Low-Risk Prostate Cancer Patients			х				Current	claims	
4	Physician	PQRI	Cancer	Prostate Cancer	103 Review of Treatment Options in Patients with Clinically Localized Prostate Cancer			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Cancer	Prostate Cancer	104 Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients			Х				Current	claims	
4	Physician	PQRI	Cancer	Prostate Cancer	105 Three-dimensional Radiotherapy for Patients with Prostate Cancer			Х				Current	claims	
4	Physician	PQRI	Mental health	Depression- Anxiety	106 Patients who have Major Depression Disorder who meet DSM IV Criteria			Х				Current	claims	
4	Physician	PQRI	Mental health	Depression- Anxiety	107 Patients who have Major Depression Disorder who are Assessed for Suicide Risks			х				Current	claims	
4	Physician	PQRI	Bone & joint	Rheumatology	108 Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis			Х				Current	claims	
4	Physician	PQRI	Bone & joint	Osteoarthritis	109 Patients with Osteoarthritis who have an Assessment of Their Pain and Function			х				Current	claims	
4	Physician	PQRI	Immunizations	Adult immunization	110 Influenza Vaccination for Patients ≥ 50 Years Old			х				Current	claims	EHR for 9th SOW
4	Physician	PQRI	Immunizations	Adult immunization	111 Pneumonia Vaccination for Patients 65 years and Older			Х				Current	claims	EHR for 9th SOW
4	Physician	PQRI	Cancer	Breast cancer	112 Screening Mammography			Χ			-	Current		EHR for 9th SOW
			Cancer		113 Colorectal Cancer Screening			х			-			EHR for 9th SOW
4	Physician	PQRI	Behavioral Health	Tobacco use	114 Inquiry Regarding Tobacco Use			Χ				Current	claims	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Behavioral Health	Tobacco use	115 Advising Smokers to Quit			Х				Current	claims	
				Bronchitis	116 Inappropriate AntibioticTreatment for Adults with Acute Bronchitis			х				Current	claims	
4	Physician	PQRI	Diabetes	Eye Care	117 Dilated Eye Exam in Diabetic Patient			Х				Current	claims	
4	Physician	PQRI	Cardiovascular	AMI/CAD	118 ACE/ARB for Patients with CAD and DM and or LVSD			Х				Current	claims	
4	Physician	PQRI	Diabetes	CKD	119 Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients			х				Current	claims	specifications not defined for 9th SOW
4	Physician	PQRI	Renal & GU		120 ACE Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy in Patients with CKD			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Renal & GU	CKD	121 Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)			х				Current	claims	
4	Physician	PQRI	Renal & GU	CKD	122 Chronic Kidney Disease (CKD): Blood Pressure Management			х				Current	claims	
4	Physician	PQRI	Renal & GU		123 Chronic Kidney Disease (CKD): Plan of Care: Elevated Hemoglobin for Patients Receiving Erythropoiesis - Stimulating Agents (ESA)			х				Current	claims	
4	Physician	PQRI	Health Care Delivery	НІТ	124 HIT- Adoption/Use of Health Information Technology (Electronic Health Records)			Х				Current	claims	
4	Physician	PQRI	Health Care Delivery	HIT	125 HIT- Adoption/Use of e-Prescribing			х				Retired	claims	Not selected for Current

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Diabetes	Foot Care	126 Diabetic Foot and Ankle Care, Peripheral Neuropathy: Neurological Evaluation			х				Current	claims	
4	Physician	PQRI	Diabetes	Foot Care	127 Diabetic Foot and Ankle Care, Ulcer Prevention: Evaluation of Footwear			х				Current	claims	
4	Physician	PQRI	Obesity	Nutrition & Exercise	128 Universal Weight Screening and Follow-Up			х				Current	claims	
4	Physician	PQRI	Immunizations	Adult immunization	129 Universal Influenza Vaccine Screening and Counseling			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Patient safety	Medication management	130 Universal Documentation and Verification of Current Medications in the Medical Record			х				Current	claims	
4	Physician	PQRI	Pain		131 Pain Assessment Prior to Initiation of Patient Treatment			х				Current	claims	
4	Physician	PQRI	Health Care Delivery	Communication	132 Patient Co-Development of Treatment Plan/Plan of Care			Х				Retired	claims	Not selected for Current
4	Physician	PQRI	Mental health	Cognitive impairment	133 Screening for Cognitive Impairment			х				Retired	claims	Not selected for Current
4	Physician	PQRI	Mental health	Depression- Anxiety	134 Screening for Clinical Depression			х				Current	claims	
4	Physician	PQRI	Renal & GU	CKD	135 Chronic Kidney Disease (CKD): Influenza Immunization			х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Cancer	Skin cancer	136 Melanoma: Follow-Up Aspects of Care			х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Cancer	Skin cancer	137 Melanoma: Continuity of Care – Recall System			х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Cancer	Skin cancer	138 Melanoma: Coordination of Care			Χ				Current		Final MPFS Table 19: AQA

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	HEENT	Eye Care	139 Cataracts: Comprehensive Preoperative Assessment for Cataract Surgery with Intraocular Lens (IOL) Placement			x				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	HEENT	Eye Care	140 Age-Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement			Х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	HEENT	Eye Care	141 Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care			х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Bone & joint	Osteoarthritis	142 Osteoarthritis (OA): Assessment for Use of Anti-Inflammatory or Analgesic Over- the-Counter (OTC) Medications			X				Current	claims	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cancer	Cancer - other	143 Oncology: Medical and Radiation – Plan of Care for Pain							Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Patient Safety	Radiology	144 Radiology: Computed Tomography (CT) Radiation Dose Reduction			Х				Future		Proposed MPFS Table 13: AQA; Not selected
4	Physician	PQRI	Patient Safety	Radiology	145 Radiology: Exposure Time Reported for Procedures Using Fluoroscopy			Х				Current		Final MPFS Table 19: AQA
4			Bone & joint	Back Pain	Back Pain: Advice Against Bedrest			Х				Current	claims	Final MPFS Table 16: Additional NQF measures
4			Bone & joint	Back Pain	Back Pain: Advice for Normal Activities			Х				Current	claims	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Bone & joint	Back Pain	Back Pain: Initial Visit			Х				Current	claims	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Bone & joint	Back Pain	Back Pain: Physical Exam			Х				Current	claims	Final MPFS Table 16: Additional NQF measures
4			Bone & Joint Cardiovascular	Radiology Cholesterol	Back Pain: Use of Imaging Studies in LBP CAD: Lipid Profile			X				Future Current		Proposed MPFS Table 12: NQF Not selected for Current Final MPFS Table 19: AQA

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Cancer	Cancer - other	Cancer Care: Pain Intensity Quantified			Х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Patient Safety	Cancer - other	Cancer Care: Radiation Limits to Normal Tissues			Х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Cancer	Lung, Airway, Esophageal Cancers	Cancer Care: Recording of Clinical Stage for Lung and Esophageal Cancer			Х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Bone & joint	Back Pain	Chiropractic Care-Functional Outcome Assessment			х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Diabetes	Foot Care	Chronic Wound Care: Off loading of Diabetic Foot Ulcers			х				Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
	Physician Physician		Cardiovascular Renal & GU	Vascular CKD	Chronic Wound Care: Use of Compression System In Patients with Venous Ulcers CKD: Referral for AV Fistula			x			_	Current	claims	Final MPFS Table 18: NQF or AQA Final MPFS Table 19: AQA
4	Physician	PQRI	Diabetes	Foot Care	DM: Foot and Ankle Care, PAD-ABI			х				Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4	Physician	PQRI	Chronic & Elder Care	Elder care - other	Elder Maltreatment Screen and Follow-Up Plan			х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	Endarterectomy: Perioperative Antiplatement Therapy for CEA			х				Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	Endarterectomy: Postoperative Stroke or Death in Asymptomatic Patient Undergoing CEA				Х			Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	Endarterectomy: Use of Patch			х				Current	claims	Final MPFS Table 18: NQF or AQA

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Cancer		Endoscopy and Polyp Surveillance: Surveillance Colonoscopy Interval In Patients With History of Adenomatous Polyps			x				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Chronic & Elder Care	Falls	Falls: Plan of Care			х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Chronic & Elder Care	Falls	Falls: Risk Assessment			Х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Diabetes	Foot Care	Foot Exam			Х				Current	claims	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Infectious Diseas	Hepatitis C	Hepatitis C: Hepatitis A Vaccination			Χ				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Infectious Diseas	Hepatitis C	Hepatitis C: Hepatitis B Vaccination			Χ				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Infectious Disease	HIV/AIDS	HIV/AIDS: CD4+ cell count or percentage			х				Current	registry	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Infectious Disease	HIV/AIDS	HIV/AIDS: HIV RNA Control After 6 Months of Potent Antiretroviral Therapy			х				Current	registry	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Infectious Disease	HIV/AIDS	HIV/AIDS: PCP Prophylaxis			х				Current	registry	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Infectious Disease	HIV/AIDS	HIV/AIDS: Prescribed Potent Antiretroviral Therapy			х				Current	registry	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Cardiovascular	Cholesterol	Lipid Screening			Х				Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4	Physician	PQRI	Patient safety	Radiology	Nuclear Medicine: Correlation with Existing Imaging Studies for all Patients Undergoing Bone Scintigraphy			х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Bone & joint	Osteoporosis	Osteoporosis: Counseling for Vitamin D, Calcium Intake, and Exercise			Х				Future		Proposed MPFS Table 13: AQA; Not selected

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4	Physician	PQRI	End of Life		Palliative Care: Dyspnea Screening and Management			Х				Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4	Physician	PQRI	Health Care Delivery		Participation in a Systematic Clinical Database Registry that Includes Endorsed Measures		х					Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4				ESRD	Pediatric ESRD: Adequacy of HD			Х				Current	rogion y	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Renal & GU	ESRD	Pediatric ESRD: Influenza Immunization			Х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Cancer		Radiology: Inappropriate Use of "Probably Benign" Assessment Category in Mammography Screening			х				Current		Final MPFS Table 19: AQA
4	Physician	PQRI	Bone & joint		Rheumatoid Arthritis: Appropriate use of DMARDs			Х				Future		Proposed MPFS Table 14: NQF or AQA; Not selected for Current
4	Physician	PQRI	Bone & joint		Rheumatoid Arthritis: Assessment and Classification of Disease Prognosis			Х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Bone & joint	Rheumatology	Rheumatoid Arthritis: Functional Limitation Assessment			х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Bone & joint	Rheumatology	Rheumatoid Arthritis: Glucocorticoid Management			х				Current	claims	Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Bone & joint	Rheumatology	Rheumatoid Arthritis: Periodic Assessment of Disease Activity			х				Current		Final MPFS Table 18: NQF or AQA
4			,	6,	Rheumatoid Arthritis: TB Screening			Χ				Current		Final MPFS Table 18: NQF or AQA
4	Physician	PQRI	Cardiovascular	Cholesterol	STS: Antilipid Treatment at Discharge			Х				Current	registry	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Antiplatelet Medications at Discharge			х				Current	registry	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Beta Blocker at Discharge			х				Current	registry	Final MPFS Table 16: Additional NQF measures

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Deep Sternal Wound Infection Rate					х		Current	registry	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Post Operative Renal Insufficiency					Х		Current	registry	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Prolonged Intubation				х			Current	registry	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Selection of Antibiotics for Cardiac Surgery			х				Future		Proposed MPFS Table 12: NQF Not selected for Current
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Stroke-CVA					х		Current	registry	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Cardiovascular	Cardiovascular surgery	STS: Surgical Reexploration				х			Current	registry	Final MPFS Table 16: Additional NQF measures
4			Renal & GU	ESRD	SVS: HD Vascular Access Decision-Making by Surgeons to Maximize Placement of AVF			х				Current	claims	Final MPFS Table 16: Additional NQF measures
4	Physician	PQRI	Behavioral Health	Alcohol Use	Unhealthy Alcohol Use			Х				Current	claims	Final MPFS Table 18: NQF or AQA
5	Nursing Home	NHC	Patient Safety	Pressure Ulcer	Long Stay: High risk residents who have pressure sores					х		Current	MDS	
5	Nursing Home	NHC	Patient Safety	Pressure Ulcer	Long Stay: Low risk residents who have pressure sores					х		Current	MDS	
5	Nursing Home	NHC	Immunizations	Adult immunization	NH - FLU01 Chronic Care Influenza Vaccination QMNursing Home			х				Current	MDS	
5	Nursing Home	NHC	Immunizations	Adult immunization	NH - FLUO1 Post-Acute Care Influenza Vaccination QMNursing Home			х				Current	MDS	
5	Nursing Home	NHC	Immunizations	Adult immunization	NH - PNEUMOVAX01 Chronic Care Pneumococcal Vaccination QMNursing Home			Х				Current	MDS	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
5	Nursing Home	NHC	Immunizations	Adult immunization	NH - PNEUMOVAX01 Post-Acute Care Pneumococcal Vaccination QMNursing Home			х				Current	MDS	
5	Nursing Home	NHC	Chronic & Elder Care	Functional status	NH-01 Percent of Residents Whose Need for Help with Daily Activities Has IncreasedNursing Home					Х		Current	MDS	Reported to the facilities.
5	Nursing Home	NHC	Pain		NH-02 Percent of Residents Who Have Moderate to Severe Pain-Nursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Chronic & Elder Care	Restraints	NH-03 Percent of Residents Who Were Physically RestrainedNursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Renal & GU	Incontinence	NH-04 Percent of Patients with a Urinary Tract InfectionNursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Mental health	Depression- Anxiety	NH-07 Percent of Residents Who Have Become More Depressed or AnxiousNursing Home					х		Current	MDS	
5	Nursing Home	NHC	Chronic & Elder Care	Functional status	NH-08 Percent of Residents Who Spent Most of Their Time in Bed or in a ChairNursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Renal & GU	Incontinence	NH-09 Percent of Residents Who Have/Had a Catheter Inserted and Left in Their Bladder Nursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Renal & GU	Incontinence	NH-10 Percent of Low-Risk Residents Who Lose Control of Their Bowels or BladderNursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Chronic & Elder Care	Functional status	NH-11 Percent of Residents Whose Ability to Move About In and Around Their Room Got WorseNursing Home					Х		Current	MDS	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
5	Nursing Home	NHC	Chronic & Elder Care	Elder care - other	NH-12 Percent of Residents Who Lose Too Much Weight-Nursing Home					Х		Current	MDS	
5	Nursing Home	NHC		Cognitive impairment	NH-13 Percent of Short Stay Residents With Delirium-Nursing Home					Х		Current	MDS	
5	Nursing Home	NHC	Pain		NH-14 Percent of Short Stay Residents Who Had Moderate to Severe PainNursing Home					х		Current	MDS	
5	Nursing Home	NHC	Patient Safety	Pressure Ulcer	NH-15 Percent of Short Stay Residents With Pressure SoresNursing Home					Х		Current	MDS	
5	Nursing Home		Health Care Delivery	Human resources	Average tenure		х					Future	admin	
5	Nursing Home		Chronic & Elder Care	Functional Status	Bedfast					Х		Future	MDS	
5	Nursing Home			Cognitive impairment	Delirium					Х		Future	MDS	
5	Nursing Home		Chronic & Elder Care	Falls	Falls					Х		Future	MDS	
5	Nursing Home		Health Care Delivery	Patient satisfaction	Family CAHPS						х	Future	survey	AHRQ Available 2008
5	Nursing Home		Health Care Delivery	Human resources	Hours per resident day		х					Future	admin	
5	Nursing Home		Health Care Delivery	Patient satisfaction	Discharged Resident CAHPS						Х	Future	survey	AHRQ begininning beta testing
5	Nursing Home		Health Care Delivery	Patient satisfaction	Long stay resident CAHPS						х	Future	survey	AHRQ Available 2008
5	Nursing Home		Health Care Delivery	Human resources	Percent of short-term employees		Х					Future	admin	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
5	Nursing Home			Advance directives	Plan of care, advance directive, prognosis			х				Future	MDS	
5	Nursing Home		Patient safety	Pressure Ulcer	Pressure Ulcer Healing					х		Future	MDS	
5	Nursing Home		Patient safety	Pressure Ulcer	Pressure Ulcer Prevention			х				Future	MDS	
5	Nursing Home		Patient safety	Pressure Ulcer	Pressure Ulcer Treatments			х				Future	MDS	
5	Nursing Home		Chronic & Elder Care	Transitions	Quality of transitions into and out of the nursing home – medication reconciliation, plan of care transfer, appropriateness of plan of care, etc			x				Future	MDS	
5	Nursing Home		Chronic & Elder Care		Rehospitalization from nursing home (SNF and NF)					Х		Future	MDS	
5	Nursing Home		Chronic & Elder Care	Transitions	Return to community – preference, goals, and outcome					х		Future	MDS	
<u> </u>	Nursing Home		Health Care Delivery		Staff turnover		х				-	Future		
6	Hospice		End of Life		Comfortable Dying					Χ		Future	survey	
6	Hospice		End of Life	Dyspnea	For new ratings of shortness of breath =>4 (on a 10 point scale), the percent with treatment (or satisfied) within 4hours					Х		Future	MR	
6	Hospice		End of Life	Depression- Anxiety	For patients diagnosed with depression, the percent who receive interpersonal or medication treatment within two weeks of diagnosis			x				Future	MR	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
6	Hospice		End of Life	Nausea-Bowel Function	For patients who screen positive for constipation, the percent who receive treatment within 1 day of screening			х				Future	MR	
6	Hospice		End of Life	Depression- Anxiety	For patients who screen positive for depression, the percent who receive further assessment, counseling or medication treatment			х				Future	MR	
6	Hospice		End of Life	Depression- Anxiety	For patients who screened positive for anxiety, the percent who receive treatment within two weeks of diagnosis			х				Future	MR	
6	Hospice		End of Life	Dyspnea	For patients who screened positive for dyspnea, the percent who improved within 1 day of screening					Х		Future	MR	
6	Hospice		End of Life	Dyspnea	For patients who screened positive for dyspnea, the percent who receive treatment within 1 day of screening			х				Future	MR	
6	Hospice		End of Life	Nausea-Bowel Function	For patients who screened positive for nausea, the percent of patients who receive treatment within 1 day of screening			x				Future	MR	
6	Hospice		End of Life	Pain	For patients who screened positive for pain, the percent who had an order for regularly scheduled (not PRN) pain medication within on day of screening			х				Future	MR	
6	Hospice		End of Life	Pain	For patients who screened positive for pain, the percent whose pain was at comfortable level within 2 days of screening					х		Future	MR	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
6	Hospice		End of Life	Pain	For patients who screened positive for pain, the percent with a clinical assessment within 1 day of screening					х		Future	MR	
6	Hospice		End of Life	Pain	For patients who screened positive for pain, the percent with any treatment within 1 day of screening			х				Future	MR	
6	Hospice		End of Life	Pain	For patients who screened positive for pain, the percent with improvement within 1 day of screening					х		Future	MR	
6	Hospice		End of Life	Communication	Percent of families reporting the hospice attended to family needs for information about medication, treatment and symptoms						x	Future	survey	
6	Hospice		End of Life	Communication	Percent of families reporting they were informed of what to expect around the time of death						х	Future	survey	
6	Hospice		End of Life	Communication	Percent of families who respond "Always" to question on Family/Friends Evaluation of how often family was kept informed about patient's condition						х	Future	survey	
6	Hospice		End of Life	Pain	Percent of patient with cognitive and language problems receiving pain assessment appropriate to communication needs			x				Future	MR	
6	Hospice		End of Life		Percent of patients admitted to hospice or palliative care who have a screening for symptoms during the admission visit			х				Future	MR	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
6	Hospice		End of Life	Nausea-Bowel Function	Percent of patients on opioids for whom a bowel regimen is established			х				Future	MR	
6	Hospice		End of Life	Nausea-Bowel Function	Percent of patients on opioids who have a bowel regimen initiated within 1 day of opioid initiation			X				Future	MR	
6	Hospice		End of Life	Pain	Percent of patients screened for pain during the admission visit			х				Future	MR	
6	Hospice		End of Life	Management of care	Percent of patients who had comprehensive assessment completed within 5 days of admission			х				Future	MR	
6	Hospice		End of Life	Pain	Percent of patients who had moderate to severe pain on a standard rating scale at any time in the last week of life			х				Future	MR	
6	Hospice		End of Life	Dyspnea	Percent of patients who were screened for shortness of breath during the admission visit			х				Future	MR	
6	Hospice		End of Life	Nausea-Bowel Function	Percent of patients with bowel function assessed at least weekly			Х				Future	MR	
6	Hospice		End of Life	Communication	Percent of patients with chart documentation of a discussion of spiritual or religious concerns			х				Future	MR	
6	Hospice		End of Life	Advance directives	Percent of patients with chart documentation of an advanced directive or discussion that there is no advanced directive			x				Future	MR	
6	Hospice		End of Life	Advance directives	Percent of patients with chart documentation of their preference for life-sustaining treatments			Х				Future	MR	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
6	Hospice		End of Life	Advance directives	Percent of patients with contact information for surrogate decision maker in chart			Х				Future	MR	
6	Hospice		End of Life	Advance directives	Percent of patients with impaired decision- making (dementia, coma or other altered mental status) with documentation of surrogate decision maker in chart within 2 days of recognition of impaired decision making			x				Future	MR	
6	Hospice		End of Life	Pain & Dyspnea	Policy/procedure specifying frequency with which pain & dyspnea should be assessed		Х					Future	survey	
6	Hospice		End of Life	Utilization	Proportion admitted to hospice for less than 3 days					х		Future	admin	
6	Hospice		End of Life	Utilization	Proportion not admitted to hospice					Х		Future		
6	Hospice		End of Life	Utilization	Proportion receiving chemotherapy in the last 14 days of life					Х		Future	admin	
6	Hospice		End of Life	Utilization	Proportion with more than one emergency room visit in the last 30 days of life					х		Future	admin	
6	Hospice		End of Life	Utilization	Proportion with more than one hospitalization in the last 30 days of life					х		Future	admin	
6	Hospice		End of Life	Communication	Provision of interpreter or translators for non- English-speaking or deaf patients		х					Future	survey	
6	Hospice		End of Life	Patient safety- other	Selected number of occurrences per 100 patient days Note: 4 types of issues are tracked: falls, medication errors, DME issues (compliant, malfunction or error), and patient / family complaints)					x		Future	survey	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
6	Hospice		End of Life	Depression- Anxiety	Use of standard questions to assess patient depression		х					Future	survey	
7	Home Health	ннс	Health Care Delivery	Management of care	Acute Care Hospitalization-Risk Adjusted					Х		Current	OASIS	
7	Home Health	ннс	Health Care Delivery	Management of care	Discharge to Community					Х		Current	OASIS	
7	Home Health	ннс	Health Care Delivery	Management of care	Emergency Department Use					х		Current	OASIS	Replaces Emergent care - risk adjusted
7	Home Health	ННС	Chronic & Elder Care	Complications	Emergent Care for Wound Infections, Deteriorating Wound Status					Х		Current	OASIS	
7	Home Health	ННС	Chronic & Elder Care	Functional status	Improvement in Ambulation/Locomotion					1		Current	OASIS	
7	Home Health	ННС	Chronic & Elder Care	Functional status	Improvement in bathing					1		Current	OASIS	
7	Home Health	ННС	Chronic & Elder Care	Functional status	Improvement in Bed Transferring					1		Current	OASIS	
7	Home Health	HHC	Respiratory	Dyspnea	Improvement in dyspnea					1		Current	OASIS	
7	Home Health	ННС	Patient safety	Medication management	Improvement in Management of Oral Medication					х		Current	OASIS	
7	Home Health	ннс	Pain		Improvement in Pain Interfering with Activity					1		Current	OASIS	
7		_	Surgery	Surgery - other	Improvement in Status of Surgical Wounds					1		Current	OASIS	
7	Home Health	HHC	Renal & GU	Incontinence	Improvement in Urinary Incontinence					1		Current	OASIS	
7	Home Health		Mental health	Depression- Anxiety	Depression Assessment Conducted							Future	OASIS-C	
7	Home Health		Mental health	Depression- Anxiety	Depression Interventions Implemented							Future	OASIS-C	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
7	Home Health		Mental health	Depression- Anxiety	Depression Interventions in Plan of Care							Future	OASIS-C	
7	Home Health		Renal & GU	UTI	Development of Urinary Tract Infection							Future	OASIS-C	
7	Home Health		Diabetes	Foot care	Diabetic Foot Care and Patient Education Implemented							Future	OASIS-C	
7	Home Health		Diabetes	Foot care	Diabetic Foot Care and Patient Education in Plan of Care							Future	OASIS-C	
7	Home Health		Patient safety	Medication management	Drug Education on All Medications Provided to Patient/Caregiver During Episode							Future	OASIS-C	
7	Home Health		Patient safety	Medication management	Drug Education on High Risk Medications Provided to Patient/Caregiver at Start of Episode							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Chronic & Elder Care - other	Emergent Care for Hypo/Hyperglycemia					х		Future	OASIS-C	
7	Home Health		Patient safety	Medication management	Emergent Care for Improper Medication Administration, Medication Side Effects					х		Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Falls	Emergent Care for Injury Caused by Fall or Accident at Home					х		Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Falls	Falls Prevention Steps Implemented							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Falls	Falls Prevention Steps in Plan of Care							Future	OASIS-C	
7	Home Health		Cardiovascular	Heart Failure	Heart Failure Symptoms Addressed							Future	OASIS-C	
7	Home Health		Health Care Delivery	Patient satisfaction	HH CAHPS Composite 1: Care of Patient							Future	survey	HH CAHPS

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
7	Home Health		Health Care Delivery	Patient satisfaction	HH CAHPS Composite 2: Communciation between Providers and Patients							Future	survey	HH CAHPS
7	Home Health		Health Care Delivery	Patient satisfaction	HH CAHPS Composite 3: Specific Care Issues (Pain and Medication)							Future	survey	HH CAHPS
7	Home Health		Mental health	Depression- Anxiety	Improvement in Anxiety Level							Future	OASIS-C	
7	Home Health		Behavioral Health		Improvement in Behavior Problem Frequency							Future	OASIS-C	
7	Home Health		Mental health	Cognitive impairment	Improvement in Cognitive Functioning							Future	OASIS-C	
7	Home Health		Mental health	Cognitive impairment	Improvement in Confusion Frequency							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Eating							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Grooming							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Light Meal Preparation							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Lower Body Dressing							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Speech and Language							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Toilet Transferring							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional status	Improvement in Toileting Hygiene							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Functional Status	Improvement in Upper Body Dressing							Future	OASIS-C	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
7	Home Health		Renal & GU	UTI	Improvement in Urinary Tract Infection							Future	OASIS-C	
7	Home Health		Patient Safety	Pressure Ulcer	Increase in Number of Pressure Ulcers							Future	OASIS-C	
7	Home Health		Immunizations	Adult immunization	Influenza Immunization Received for Current Flu Season							Future	OASIS-C	
7	Home Health		Chronic & Elder Care	Falls	Multifactor Fall Risk Assessment Conducted							Future	OASIS-C	
7	Home Health		Pain		Pain Assessment Conducted							Future	OASIS-C	
7	Home Health		Pain		Pain Interventions Implemented							Future	OASIS-C	
7	Home Health		Pain		Pain Interventions in Plan of Care							Future	OASIS-C	
7	Home Health		Patient safety	Communication	Physician Notification Guidelines Established							Future	OASIS-C	
7	Home Health		Immunizations	Adult immunization	Pneumococcal Polysaccharide Vaccine Ever Received							Future	OASIS-C	
7	Home Health		Patient safety	Transitions	Potential Medication Issues Identified and Timely Physician Contact at Start of Episode			х				Future	OASIS-C	
7	Home Health		Patient safety	Medication management	Potential Medication Issues Identified and Timely Physician Contact during Episode			х				Future	OASIS-C	
7	Home Health		Patient Safety	Pressure Ulcer	Pressure Ulcer Intervention Plans Implemented							Future	OASIS-C	
7	Home Health		Patient Safety	Pressure Ulcer	Pressure Ulcer Interventions in Plan of Care							Future	OASIS-C	
7	Home Health		Patient Safety	Pressure Ulcer	Pressure Ulcer Prevention Included in Plan of Care							Future	OASIS-C	
7	Home Health		Patient Safety	Pressure Ulcer	Pressure Ulcer Prevention Plans Implemented							Future	OASIS-C	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
7	Home Health		Chronic & Elder Care		Plan of Care-patients with pain, depression, diabetes or pressure ulcers, or at risk for falls or pressure ulcers, with interventions to prevent, mitigate and/or monitor these conditions included in the physician-ordered plan of care.			x				Future		
7	Home Health		Patient Safety	Pressure Ulcer	Pressure Ulcer Risk Assessment Conducted							Future	OASIS-C	
7	Home Health		Health Care Delivery	Transitions	Timely Initiation of Care							Future	OASIS-C	
8	ESRD	Crown	Renal & GU	ESRD	Assessment of Iron Stores Level: Facility			Х				Current		
8	ESRD	Crown	Renal & GU	ESRD	Catheter Vascular Access and referred to vascular for evaluation for a permanent access - Clinician Level			х				Current	CROWN	
8	ESRD	Crown	Renal & GU	Utilization	ESRD: Hospitalization rate					Χ		Future	claims	
8	ESRD	Crown	Renal & GU	ESRD	Functional Autogenous AV Fistula Access or referral to vascular surgeon for placement - Clinician Level			х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Hematocrit control for ESA therapy - Facility Level				Х			Current	CROWN	
8	ESRD	Crown	Renal & GU		Hemodialysis Adequacy- Monthly measurement of delivered dose Level: Facility			х				Current	CROWN	
8	ESRD	Crown	Renal & GU		Hemodialysis Vascular Access Decision Making by Surgeon to Maximize Placement of Autogenous Arterial Venous Fistula			x				Current	CROWN	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
8	ESRD	Crown	Renal & GU	ESRD	Hemodialysis Vascular Access- Maximizing Placement of Arterial Venous Fistula (AVF) Level: Facility			х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Hemodialysis Vascular Access- Minimizing use of catheters as Chronic Dialysis Access Level: Facility			Х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Hemoglobin control for ESA therapy - Facility Level				х			Current	CROWN	
8	ESRD	Crown	Health Care Delivery		In-Center Hemodialysis CAHPS: Nephrologists' Communication and Caring Composite						х	Future	survey	
8	ESRD	Crown	Health Care Delivery		In-Center Hemodialysis CAHPS: Providing Information to Patients Composite						х	Future	survey	
8	ESRD	Crown	Health Care Delivery		In-Center Hemodialysis CAHPS: Quality of Dialysis Center Care and Operations Composite						х	Future	survey	
8	ESRD	Crown	Health Care Delivery	Patient satisfaction	In-Center Hemodialysis CAHPS: Rating dialysis center						х	Future	survey	
8	ESRD	Crown	Health Care Delivery	Patient satisfaction	In-Center Hemodialysis CAHPS: Rating dialysis staff						х	Future	survey	
8	ESRD	Crown	Health Care Delivery	Patient satisfaction	In-Center Hemodialysis CAHPS: Rating nephrologists						х	Future	survey	
8	ESRD	Crown	Renal & GU	ESRD	Influenza Immunization Clinician Level			Х				Current		
8	ESRD	Crown	Renal & GU	ESRD	Influenza Vaccination in the ESRD Population Facilities			х				Current	CROWN	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
8	ESRD	Crown	Renal & GU	Functional Status	Kidney Disease and Quality of life – KDQOLTM - 36					Х		Future	survey	
8	ESRD	Crown	Renal & GU	ESRD	Measurement of Serum Calcium Concentration Level: Facility			х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Measurement of Serum Phosphorus Concentration Level: Facility			Х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Method of Measurement of Delivered Hemodialysis Dose			Х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Minimum Delivered Hemodialysis Dose (6 mos) Level: Facility			х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Minimum Delivered Hemodialysis Dose (90 days) Level: Facility			Х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Monitoring hemoglobin levels below target minimum Level: Facility			Х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Peritoneal Dialysis Adequacy- Measurement of total Solute Clearance at regular intervals Level: Facility			х				Current	CROWN	
8	ESRD	Crown	Renal & GU	ESRD	Peritoneal Dialysis dose above minimum 1.7			Х				Current	CROWN	
8	ESRD	Crown	Renal & GU	Education	Transplant: Patient Education Awareness Facilities			Х				Future		
8	ESRD	Crown	Renal & GU	Education	Transplant: Patient Education Awareness Physicians			Х				Future		
8	ESRD	DFC	Renal & GU	ESRD	Anemia control				Х			Current	Admin	
8	ESRD	DFC	Renal & GU	ESRD	ESRD: Patient survival					Х		Current	Admin	
8	ESRD	DFC	Renal & GU	ESRD	Hemodialysis adequacy				Х			Current	Admin	
9	Medication		Chronic & Elder Care	Medication management	Adherence to Chronic Medications			Х				Future	claims	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
9	Medication		Cardiovascular	AMI/CAD	Beta-Blocker Therapy for Coronary Artery Disease Beneficiaries with Prior Myocardial Infarction			Х				Future	claims	
9	Medication		Cardiovascular	Choleseterol	Coronary artery disease and lipid-lowering therapy			Х				Future	claims	
9	Medication		Cardiovascular	Choleseterol	Coronary artery disease and medication possession ratio for statin therapy			х				Future	claims	
9	Medication		Diabetes	Medication management	Diabetes Mellitus and Medication Possession Ratio (MPR) for Chronic Medications			Х				Future	claims	
9	Medication		Patient safety	Medication management	INR for beneficiaries taking warfarin and interacting anti-infective medications			х				Future	claims	
9	Medication		Cardiovascular	Choleseterol	Lipid lowering drugs for diabetic beneficiaries			Х				Future	claims	
9	Medication		Patient safety	Medication management	Monthly INR Monitoring for Beneficiaries on Warfarin			х				Future	claims	
9	Medication		Bone & Joint	Osteoporosis	Osteoporosis Pharmacologic Therapy			Χ				Future	claims	
9	Medication		Patient safety	Medication management	Potassium and Creatinine Check for ACEIsARBs			Х				Future	claims	
9	Medication		Patient safety	Medication management	Potassium and Creatinine Check for Diuretics			х				Future	claims	
10	Community	QIO	Cancer	Breast Cancer	Breast Cancer Screening (Mammography) (claims)							Current	claims	
10	Community	QIO	Diabetes	CKD	CKD Slowing the progression disease in individuals with diabetes through the use of ACE inhibitor and/or an ARB agent							Current		

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
10	Community	QIO	Renal & GU		CKD-AV fistula placement and maturation (as a first choice for arteriovenous access where medically appropriate) for individuals who elect, as a part of timely renal replacement counseling hemodialysis as their treatment option for kidney failure.							Current		
10	Community	QIO	Diabetes	CKD	CKD-Timely testing to reduce the rate of kidney failure due to diabetes							Current		
10	Community	QIO	Cancer	Colorectal Cancer	Colorectal Cancer Screening (claims)							Current	claims	
10	Community	QIO	Diabetes		Eye Exam: Patient has received a diabetic eye exam within the past 12 months							Current	claims	
10	Community	QIO	Diabetes		HbA1c: Patients received Hba1c testing at least once within a 12 month period							Current	claims	
10	Community	QIO	Chronic & Elder Care		I-1 Percentage of patient care transitions (FFS Medicare) in the specified geographic area that are attributable to providers who agree to participate							Current		Interim measure; specs needed
10	Community	QIO	Chronic & Elder Care	Transitions	I-2 Percentage of patient care transitions (FFS Medicare) in the specified geographic area that are the potential subject of an implemented intervention that addresses hospital/community system wide processes.							Current		Interim measure; specs needed

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
10	Community	QIO	Chronic & Elder Care	Transitions	I-3 Percentage of patient care transitions (FFS Medicare) in the specified geographic area that are the potential subject of an implemented intervention that addresses AMI, CHF, or pneumonia							Current		Interim measure; specs needed
10	Community	QIO	Chronic & Elder Care	Transitions	I-4 Percentage of patient care transitions (FFS Medicare) in the specified geographic area that are the potential subject of an implemented intervention the addresses specific reasons for readmission							Current		Interim measure; specs needed
10	Community	QIO	Chronic & Elder Care	Transitions	I-5 Percentage of implemented interventions in the specific geographic area that are measured							Current		Interim measure; specs needed
10	Community	QIO	Chronic & Elder Care	Transitions	I-6 Percentage of patient care transitions (FFS Medicare) in the specified geographic area to which implemented and measured interventions apply							Current		Interim measure; specs needed
10	Community	QIO	Immunizations	Adult immunization	IZ-Influenza Immunization (claims)							Current	claims	
10	Community	QIO	Immunizations	Adult immunization	IZ-Pneumococcal Pneumonia Immunization (claims)							Current	claims	
10	Community	QIO	Diabetes	Cholesterol	Lipids: Patient has received lipid testing within pst 12 months							Current	claims	
11	MA (Part C)	HEDIS	Obesity	Nutrition & Exercise	Adult BMI Assessment			х				Current		1st year measure
11	MA (Part C)	HEDIS	Chronic & Elder Care	Falls	Fall Risk Management: Discussing Fall Risk			х				Current	HOS	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
11	MA (Part C)		Chronic & Elder Care	Falls	Fall Risk Management: Managing Fall Risk			х				Current	HOS	
11	MA (Part C)	HEDIS	Mental health	Mental health - other	Improving Mental Health					х		Current	HOS	Will go on MOC in Fall 2008 HEDIS measure
11	MA (Part C)	HEDIS	Population	Community	Improving Physical Health					Х		Current	HOS	Will go on MOC in Fall 2008 HEDIS measure
11	MA (Part C)	HEDIS	Behavioral Health	Substance Abuse	Initiation and Engagement of Alcohol And Other Drug Dependence Treatment			х				Current		
11	MA (Part C)	HEDIS	Renal & GU	Incontinence	Management of Urinary Incontinence in Older Adults-Discussing Urinary Incontinence			х				Current	HOS	
11	MA (Part C)	HEDIS	Renal & GU	Incontinence	Management of Urinary Incontinence in Older Adults-Receiving Urinary Incontinence Treatment			Х				Current	HOS	
11	MA (Part C)	HEDIS	Behavioral Health	Tobacco use	Medical Assistance with Smoking Cessation- Advising Smokers to Quit			х				Current	survey	
11	MA (Part C)	HEDIS	Behavioral Health	Tobacco use	Medical Assistance with Smoking Cessation- Discussing Smoking Cessation Medications			х				Current	survey	
			Behavioral Health	Tobacco use	Medical Assistance with Smoking Cessation- Discussing Smoking Cessation Strategies			х				Current		
_	MA (Part C) MA (Part C)		Bone & Joint Respiratory	Osteoporosis COPD	Osteoporosis Testing in Older Women Pharmacotherapy of COPD Exacerbation			X			-	Current Current		
			Population	Nutrition & Exercise	Physical Activity in Older Adults-Advising Physical Activity			x				Current		

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
11	MA (Part C)	HEDIS	Population	Nutrition & Exercise	Physical Activity in Older Adults-Discussing Physical Activity			х				Current	HOS	
11	MA (Part C)	HEDIS	Patient safety	Medication management	Potentially Harmful Drug-Disease Interactions in the Elderly			х				Current		
11	MA (Part C)	HEDIS	Respiratory	COPD	Relative Resource Use for People with COPD	х						Current	HEDIS	
11	MA (Part C)	HEDIS	Cardiovascular	Cardiovascular - other	Relative Resource Use for People with CV Conditions	х						Current	HEDIS	
11	MA (Part C)	HEDIS	Diabetes		Relative Resource Use for People with Diabetes	х						Current		
11	MA (Part C)	HEDIS	Cardiovascular	Hypertension	Relative Resource Use for People with Uncomplicated HTN	х						Current	HEDIS	
11	MA (Part C)	HEDIS	Patient safety	Medication management	Use of High Risk Medications in the Elderly			х				Current		
11	MA (Part C)	MOC	Health Care Delivery	Access	Access to Preventive/Ambulatory Health Services		Х					Current	HEDIS	
11	MA (Part C)	MOC	Patient safety	Medication management	Annual Monitoring for Patients on Persistent Medications			х				Current	HEDIS	
11	MA (Part C)	MOC	Mental Health	Depression- Anxiety	Antidepressant Medication Management (12 Weeks)			х				Current	HEDIS	
11	MA (Part C)	MOC	Mental Health	Depression- Anxiety	Antidepressant Medication Management (6 Months)			х				Current		
11	MA (Part C)	MOC	Cancer	Breast Cancer	Breast Cancer Screening			Х				Current	HEDIS	
11	MA (Part C)	MOC	Health Care Delivery	Communication	Call Abandonment		х					Current		
11	MA (Part C)	MOC	Health Care Delivery	Communication	Call Answer Timeliness		х					Current	HEDIS	

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
11	MA (Part C)	MOC	Cardiovascular	Cholesterol	Cholesterol Management for Patients with Cardiovascular Conditions			х				Current	HEDIS	
11	MA (Part C)	мос	Cancer	Colorectal Cancer	Colorectal Cancer Screening			х				Current	HEDIS	
11	MA (Part C)		Cardiovascular	Hypertension	Controlling High Blood Pressure				Х			Current	HEDIS	
11	MA (Part C)	МОС	Diabetes	Hypertension	Diabetes: Blood Pressure Control < 130/80				Х			Current		
11	MA (Part C)		Diabetes	Hypertension	Diabetes: Blood Pressure Control < 140/90				х			Current		
11	MA (Part C)		Diabetes		Diabetes: HbA1c Good Control				Х			Current	HEDIS	
11	MA (Part C)		Diabetes		Diabetes: HbA1c Poor Control				Х			Current		
11	MA (Part C)		Diabetes		Diabetes: HbA1c Testing			Х				Current		
11	MA (Part C)		Diabetes	Cholesterol	Diabetes: LDL Control				Χ			Current	HEDIS	
11	MA (Part C)	MOC	Diabetes	Cholesterol	Diabetes: LDL Screening			Х				Current	HEDIS	
11	MA (Part C)		Diabetes		Diabetes: Medical Attention for Nephropathy			х					HEDIS	
11	MA (Part C)	MOC	Diabetes	Eye Care	Diabetes: Retinal Eye Exam			Х				Current	HEDIS	
11	MA (Part C)	MOC	Bone & joint		Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis			Х				Current	HEDIS	
11	MA (Part C)	MOC	Health Care Delivery	Patient satisfaction	Doctors Who Communicate Well						х	Current	survey	M-CAHPS
11	MA (Part C)	МОС	Immunizations	Adult immunization	Flu Shots for Older Adults			Х				Current	HEDIS	M-CAHPS
11	MA (Part C)	MOC	Mental health		Follow-up After Hospitalization for Mental Illness			Х				Current	HEDIS	
11	MA (Part C)	MOC	Health Care Delivery	Patient satisfaction	Getting Appointments and Care Quickly						х	Current	survey	M-CAHPS

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
			Health Care Delivery		Getting Needed Care Without Delays									M-CAHPS
11	MA (Part C)	MOC	HEENT	Eye Care	Glaucoma Screening in Older Adults			Х				Current	HEDIS	
11	MA (Part C)	MOC	Health Care Delivery	Patient satisfaction	Health Plan Customer Service						х	Current	survey	M-CAHPS
11	MA (Part C)	MOC	Bone & Joint	Osteoporosis	Osteoporosis Management in Women who had a fracture			х				Current	HEDIS	
11	MA (Part C)	MOC	Health Care Delivery	Patient satisfaction	Overall Rating of Health Care Quality						х	Current	survey	M-CAHPS
11	MA (Part C)	MOC	Health Care Delivery	Patient satisfaction	Overall Rating of Health Plan									M-CAHPS
11	MA (Part C)	MOC	Cardiovascular	AMI/CAD	Persistence of Beta-BlockerTreatment After a Heart Attack			Х				Current	HEDIS	
11	MA (Part C)	MOC	Immunizations	Adult immunization	Pneumonia Vaccination Status for Older Adults			х				Current	HEDIS	M-CAHPS
11	MA (Part C)	MOC	Respiratory	COPD	Use of SpirometryTesting in Assessment & Diagnosis of COPD			х				Current	HEDIS	
12	Part C: SNP	HEDIS	End of Life	Advance directives	Care for Older Adults: Advanced Care Planning			х				Current		1st year measure, SNP only
12	Part C: SNP	HEDIS	Chronic & Elder Care	Functional Status	Care for Older Adults: Functional Status Assessment			х				Current		1st year measure, SNP only
	Part C: SNP	HEDIS	Patient safety	Medication management	Care for Older Adults: Medication Review			х				Current	HEDIS	1st year measure, SNP only
12	Part C: SNP	HEDIS	Pain		Care for Older Adults: Pain Screening			Х				Current		1st year measure, SNP only
12	Part C: SNP	HEDIS	Patient safety	Medication management	Medication Reconciliation Post Discharge			х				Current	HEDIS	1st year measure, SNP only

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
13	Part D	MOC	Patient safety	Medication management	High Risk Medication Usage			х				Current	PDE	MPDPF First Year Measure 2008
13	Part D	мос	Health Care Delivery	Cost	Medicare Prescription Drug Plan Finder prices versus Prescription Drug Event cost-sharing			Х				Current	PDE/MP DPF	MPDPF First Year Measure 2008
13	Part D	МОС	Health Care Delivery	Cost	Out-of-pocket costs		Х					Current		MPDPF First Year Measure 2008
13	Part D	МОС	Health Care Delivery	Administration	Plan membership retention between program years				х			Current	MBD	MPDPF First Year Measure 2008
13	Part D	MOC	Health Care Delivery	Cost	Projected Risk of entering the Coverage Gap		х					Current		MPDPF First Year Measure 2008
13	Part D	MPDP F	Health Care Delivery	Communication	Availability of Drug Coverage and Cost Information		Х					Current	Plan reported	
13	Part D	MPDP F	Health Care Delivery	Communication	Calls Disconnected When Customer Calls Drug Plan			х				Current	CMS	
13	Part D	MPDP F	Health Care Delivery	Communication	Calls Disconnected When Pharmacist Calls Drug Plan			х				Current	CMS	
13	Part D	MPDP F	Health Care Delivery	Patient satisfaction	Complaints about Joining and Leaving the Plan						Х	Current	СТМ	Complaints Tracking Module (CTM)
13	Part D	MPDP F	Health Care Delivery	Patient satisfaction	Complaints about the Drug Plan						х	Current	СТМ	Complaints Tracking Module (CTM)
13	Part D	MPDP F	Health Care Delivery	Patient satisfaction	Complaints about the Plan's Benefits and Access to Prescription Drugs							Current		Complaints Tracking Module (CTM)
13	Part D	MPDP F	Health Care Delivery	Patient satisfaction	Complaints about the Plan's Drug Pricing and Out-of-pocket Costs						х	Current	СТМ	Complaints Tracking Module (CTM)
13	Part D	MPDP F	Health Care Delivery	Administration	Delays in Appeals Decisions		х					Current		

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
13	Part D	MPDP F	Health Care Delivery	Access	Getting Prescriptions Easily						Х	Current	survey	CAHPS
13	Part D	MPDP F	Health Care Delivery	Patient satisfaction	How Helpful Is Your Plan When You Need Information						х	Current	survey	CAHPS
13	Part D	MPDP F	Health Care Delivery	Cost	How Often the Plan's Drug Prices Change		х						Plan reported	CAHPS
13	Part D	MPDP F	Health Care Delivery	Communication	Pharmacists Have Up-to-date Information on Plan Members Who Need Extra Help			Х				Current	OIS	
13	Part D	MPDP F	Health Care Delivery		Pharmacists Have Up-to-date Plan Enrollment Information			Х				Current	OIS	
13	Part D	MPDP F	Health Care Delivery	Patient satisfaction	Rating of Drug Plan						х	Current	survey	CAHPS
13	Part D	MPDP F	Health Care Delivery	Administration	Reviewing Appeals Decisions			Х				Current	IRE	
13	Part D	MPDP F	Health Care Delivery	Communication	Time on Hold When Customer Calls Drug Plan			Х				Current	CMS	
13	Part D	MPDP F	Health Care Delivery	Communication	Time on Hold When Pharmacist Calls Drug Plan			Х				Current	CMS	
13	Part D	Posted	Health Care Delivery	Cost	Percent of Generic Drugs Dispensed to Members	Х						Current	Plan reported	
13	Part D		Patient safety	Management of care	Adherence to clinical treatment guidelines			х				Future	PDE	Future use is to be determined
13	Part D		Health Care Delivery	HIT	Adoption of e-prescribing		Х					Future	Plan reported	Future Plan Reporting Requirement
13	Part D		Health Care Delivery		Compliance-related measure: looking at the frequency and severity of Corrective Action Plans		х					Future	CMS	Compliance related measure for possible incorporation into the Plan Ratings

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
13	Part D		Health Care Delivery	Cost	Cost of care	Х						Future	PDE	Future use is to be determined
13	Part D		Health Care Delivery	Cost	Evaluation of drug, medical costs, and overall healthcare costs	х						Future	CMS	Future use is to be determined
13	Part D		Health Care Delivery	Access	Formulary comprehensiveness measure		х					Future	CMS	Future use is to be determined
13	Part D		Health Care Delivery	Medication management	Medication Therapy Management Program (MTMP) related measure			Х				Future	Plan reported	Future use is to be determined
13	Part D		Patient safety	Medication management	Patient safety related measures							Future	PDE	Future use is to be determined
13	Part D		Patient safety	Medication management	Patient Safety: Drug/Drug Interaction			Х				Future	claims	PQA measure
13	Part D		Patient safety	Medication management	Patient Safety: Medication Adherence			х				Future	PDE	PQA measure
13	Part D		Patient safety	Utilization	Patient Safety: Over and under utilization					Х		Future	PDE	PQA measure
13	Part D		Health Care Delivery	Access	Pharmacy access - retail, HI, LTC		Х					Future	Plan reported	Future use is to be determined
13	Part D		Health Care Delivery	Transitions	Prescriptions provided during transition periods			х				Future	Plan reported	Future Plan Reporting Requirement
13	Part D		Health Care Delivery	Medication management	Prevention and wellness measures			Х					PDE, Plan reported	Future use is to be determined
13	Part D		Health Care Delivery		Rate of grievances by enrollment						х	Future	Plan reported	Future use is to be determined
13	Part D		Health Care Delivery		Rates of Part D Exceptions and Appeals						х	Future	Plan reported	Future use is to be determined
13	Part D		Health Care Delivery	Adult immunization	Vaccine administration			Х				Future	Plan reported	Future use is to be determined

	Setting	Implementation Use	Condition	SubCondition	Measure	Efficiency	Structure	Process	Intermediate Outcome	Outcome	Patient Centeredness	Measure Readiness	Data Source	Comments
14	Medication	QIO	Patient safety	Medication management	Drug Safety-Drug-Drug Interactions (DDI)			Х				Current	claims	
14	Medication	QIO	Patient safety		Drug Safety-Potentially Inappropriate Medications (PIM)			Х				Current	claims	
	Hospital OP		Health Care Delivery	Radiology	Measure 1: Cardiac SPECT MPI	Х						Future		Lewin group TEP materials
	Hospital OP		Health Care Delivery	Radiology	Measure 2: Echocardiography for Pre-Operative Evaluation	Х						Future		Lewin group TEP materials
	Hospital OP		Health Care Delivery	Radiology	Measure 3: Echocardiography Post Revascularization	х						Future		Lewin group TEP materials
	Hospital OP		Health Care Delivery		Measure 4: CT in the Emergency Department (1 of 2)	х						Future		Lewin group TEP materials
	Hospital OP		Health Care Delivery	Radiology	Measure 5: CT in the Emergency Department (2 of 2)	х						Future		Lewin group TEP materials
	Hospital OP		Health Care Delivery	Radiology	Measure 6: Simultaneous Use of CT Brain and CT Sinus	Х						Future		Lewin group TEP materials